

A1

CT scan exclusion tool for blunt poly-trauma in under 16s

This tool is aimed to help with a focused CT scan approach in children rather than undertaking whole-body CT scans without consideration. **This tool should be used in conjunction with RCR guidance.**

- If an anatomical region satisfies all the criteria, not scanning that anatomical region should be considered.
- Senior clinical discretion is still advised.

Anatomical region	
1. Head	
a. Not reduced GCS below 13 or intubated	
b. Did not trigger NICE guidelines	
2. Neck	
a. Not reduced GCS below 13 or intubated	
b. Did not trigger NICE guidelines	
3. Chest	
a. Chest X-ray normal	
b. Chest exam normal	
c. Not rapid deceleration (Defined as fall >6 metres or high-impact motor vehicle crash >40 mph)	
4. Abdomen	
a. Not lap belt or handlebar injuries	
b. No abdominal wall ecchymosis	
c. No abdominal tenderness in a conscious patient	
d. No abdominal distension	
e. No clinical evidence of persistent hypovolaemia; eg persistent unexplained tachycardia	
f. No blood from the rectum or nasogastric tube	
5. Spine	
a. No midline tenderness	
b. Low level of concern on mechanism	
c. No neurology	
(MRI should be used where possible as first line)	
6. Limbs	
a. No complex fractures (consider)	
b. No concern of vascular injuries (consider)	
Wider concerns, which could lower the threshold to CT scan:	
a. Patient needs emergency operation	
b. Patient has long secondary transfer	
c. Patient will be sedated in critical care area for an extended period	