

ADMINISTRATIVE POLICY

1. NEURO INJURIES AND FOLLOW UP CARE:

- 1.1 Any time an individual has an injury to the head or suspected injury to the head, they will receive professional medical attention. Many times when a person sustains a head injury there are no immediate signs or symptoms of internal injury.

After the individual has received medical attention there will generally be instructions for after-care provided. Staff should ensure the instructions are clearly understood and ask questions as needed. Staff shall follow the doctor's orders and notify the supervisor or the on-call supervisor/manager with the instructions. The Supervisor/ Manager may consult with OPTIONS RN for further instruction.

- 1.2 After care may include instructions from the physician to observe the person closely over the next 24 hours. Staff will follow the recommendations of the treating physician. Staff may be asked to observe and document some of the following:

Time: Document the time the check was done.

Pupils: Pupils are normally equal in size and constrict to light equally. When someone has a serious head trauma the right and left pupils will not always be equal in size, nor will they react equally to light. If the person's eyes are unequal or unresponsive, call 911 then call the supervisor or on call supervisor/manager immediately.

Orientation: People can become disoriented if they have a head injury. Ask the person if they know who they are, where they are, and/or the day, time or month. If they do not know, and they normally would know, call the supervisor or on call supervisor/manager immediately. If there are substantial changes, call 911 first.

Mobility/Strength: Sometimes a change in condition is indicated by changes in strength and coordination. Ask the person to "squeeze" your hand using each hand separately, to assess if there is a difference in strength from one side to the other. Watch for any change in their strength, gait and balance. If any changes are noted or if the person complains of being dizzy, contact the supervisor or on-call supervisor/manager. If there are any substantial changes, call 911 first.

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Pain: Pain can be an indicator of further problems after a head injury. If there is a significant change in the level of pain or discomfort, contact the supervisor or on-call supervisor/manager. The Supervisor/Manager may consult with OPTIONS RN for further instruction.

Bleeding from the Ear: If a person begins to bleed from either ear after a head injury and they did not cut or bruise the ear during the initial injury, call 911 immediately then contact the supervisor or on-call supervisor/manager.

Sudden Uncontrollable Vomiting: If a person begins to vomit after sustaining head trauma, call 911 immediately then contact the supervisor or on-call supervisor/manager.

Convulsion: If the individual does not have a seizure disorder and they have a seizure, call 911 immediately then contact the supervisor or on-call supervisor/manager.

- 1.3 The supervisor or on call supervisor/manager will be responsible for coordinating with the RN and QIDP in ICF-ID/H programs.

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