CT Reduction in Minor Pediatric Head Trauma
New Hanover Regional Medical Center

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Presentation
A 15yo male arrived to the emergency department with his grandmother. He complained of ongoing headache, dizziness, light sensitivity, and sound sensitivity since falling and striking his head three days prior. He was participating in volleyball, jumped into the air to strike the ball and collided with another player. He fell approximately 8 feet to the ground, striking the back of his head. There was no reported loss of consciousness. A court side concussion test was performed, which the patient failed. There was a previous concussion at the age of 7 without long term effects. No nausea or vomiting was reported.

Clinical Decision
The PECARN criteria included a recommendation of performing cranial computed tomography (CT) with any fall 2 feet or greater. With the ongoing concussive symptoms and the described mechanism of injury, a CT of the head was performed.

Conclusion
The CT revealed no acute intracranial findings. The patient was discharged home with a diagnosis of post-concussive syndrome.

Cases Report

**Case Report**

**PECARN Childhood Head Trauma: A Neuroimaging Decision Rule**

Does Your Child Need a CT Scan?

If New Hanover Regional Medical Center, we are committed to doing what is best for our patients. When a child arrives at the Emergency Department with a head injury, we want to provide the best management to minimize any potential harm. We use nationally recognized guidelines to determine whether or not a CT scan is indicated. Radiation exposure from CT scans in childhood and subsequent risk of leukemia and brain tumors: a retrospective cohort study. Lancet, 380(9840), 499-505. doi:10.1016/S0140-6736(12)60815-0

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