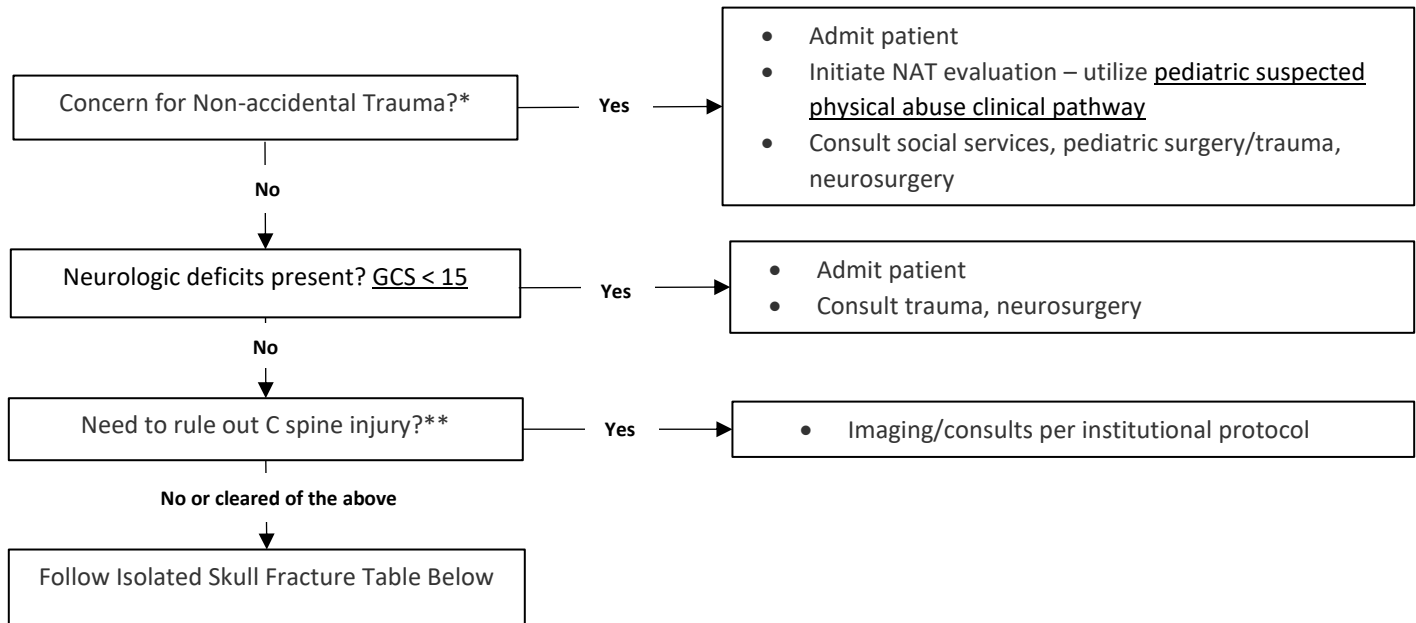


Skull Fracture (Isolated)

Purpose: This pathway is for patients with isolated non-depressed skull fracture without intracranial findings and no other traumatic injuries



Fracture Location	Time since injury	Zofran in ED?	Management Plan
Occipital Frontal Parietal Or Temporal (squamous only)	0 – 4 h	Yes	- Admit to peds floor - Consult neurosurgery
		No	- Observe for a minimum of 4 hours since time of injury (may include time of observation that occurred at home prior to arrival) - If tolerated PO trial, DC home w/ neurosurgery follow up in 1-2 weeks (utilize ED discharge “dot phrase” for instructions and send EPIC chat to NSG with pt MRN) - No Neurosurgery consult required
	> 4h	Yes	- Admit to peds floor - Consult neurosurgery
		No	- DC home w/ neurosurgery follow up in 1-2 weeks (utilize ED discharge “dot phrase” for instructions and send EPIC chat to NSG with pt MRN) - No neurosurgery consult required

*Concern for Non-accidental Trauma?

- Absence of traumatic history to adequately explain skull fracture
- History of other injuries, or presenting with other injuries on physical exam
- Prior CPS/DCFS involvement
- Changing/conflicting stories of present trauma
- Delay of ≥ 72 h in medical evaluation of injury

** C spine eval – per ED physician judgement or established trauma per local guideline/protocol

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D. Li, J. McCarthy	ER and NSG	11/2023	4/2025

Skull Fracture (Isolated)

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