CLINICAL DECISION RULE I
Pediatric Mild Head Injury and Need for Head CT

Objectives:

To learn to locate and assess the clinical usefulness of a published clinical prediction or
decision rules and to appropriately apply them to the care of individual patients as well as
to the development of clinical policies.

This includes:
1. Determining the proper ranking in an ascending hierarchy of evidence for a
   particular clinical prediction or decision rule.
2. Assessing the rule’s applicability to and likely impact on your clinical practice.

Assignment:

1. Read the attached scenario.
2. Devise a PICO question and electronic search engine strategy to locate applicable clinical
evidence.
3. Read the attached guidelines for reading articles pertaining to clinical prediction or decision
   rules.
4. Use the attached worksheet as a guide to your assessment.

In approaching this exercise, it will be useful to keep in mind that the development of a
prediction or decision instrument generally involves multiple studies. Study designs pertaining
to issues of diagnosis, prognosis and therapy are commonly encountered, depending on the nature
of the instrument, the phase of development and the inclinations of the investigators. The learner
will find knowledge of the therapy, diagnosis and prognosis modules useful and prerequisite to
comfortable completion of this exercise. We suggest that, after reading the scenario, you read the
Users’ Guides chapter and then examine the design of the Critical Review Form in relationship
to the chapter before proceeding to the critical appraisal of the studies.

Clinical Scenario:

An ambulance from Northeast County EMS arrives to the pediatric trauma bay. They had arrived
on the scene of an 8 year old girl who had fallen off her bicycle in the driveway unwitnessed and
not wearing a helmet. Per EMT, she was awake but drowsy upon their arrival with no signs of
neurological deficit. Her mother came outside of the house after hearing her brothers calling for
help. The EMT assess her vital signs and they are normal. They find her GCS to be 14.

On arrival into the trauma bay, she is awake, intermittent alert but drifts off to close her eyes.
She complains that her tummy hurts and vomits. Her pupils are equal and reactive, she will
follow simple commands, and she will answer to her name. She remembers arriving at the
hospital in an ambulance but not how she fell. There are no focal neurological deficits. There is a
small abrasion under the hair on the back part of her head. Is a CT scan indicated and what is the
likelihood of finding a clinically relevant intracranial injury?
You are now so intrigued by all aspects of pediatric head trauma care that you forego the usual after-shift beers so you can go directly to the library for an exciting literature search.

You conduct PubMed search combining the key words “head CT”, “pediatric head trauma”, and “clinical prediction rule” yields 23 responses from which five significant articles are selected.

**Enclosed Materials:**


7. Worksheet for evaluating an article on Clinical Prediction Rules