



The Emergency Department Evaluation of Patients with a Sudden or Severe Headache

Learning Objectives

- Review the optimal way in which the clinical evaluation, diagnostic testing, and treatment of Emergency Department patients with acute cephalgia and suspected SAH can be conducted.
- Discuss procedures and protocols that will assist the emergency physician in providing care to these critically ill and injured patients.

Background

One of the critical requirements of the emergency physician is to be able to efficiently diagnose and effectively treat patients who present to the Emergency Department with acute cephalgia and suspected SAH. This lecture will highlight two specific skills that are part of this overall treatment strategy: the physical exam and diagnostic evaluation of these patients, including CT neuroimaging and lumbar puncture, and the use of a protocol that includes pain and nausea medications, steroids, and therapies designed to limit hemorrhage in SAH patients.

In this Brain Injury Course, FERNE would like to stress the use of specific procedures and protocols in managing patients with neurological illness and injury. In effect, the goal is to take a surgeon's approach to treating medical problems in the Emergency Department, including complications related to SAH.

Key Clinical Questions

- What are the clinical signs and symptoms in patients with cephalgia and suspected SAH?
- How should patients with cephalgia and suspected SAH be managed?
- What are the roles for the following therapies in the setting of suspected SAH: pain and nausea medications, steroids, and therapies designed to limit hemorrhage in SAH patients?

Featured Procedures or Protocols

- Diagnostic protocol utilizing CT neuroimaging and lumbar puncture in the evaluation of patients with cephalgia and suspected subarachnoid hemorrhage.
- Treatment protocol for the management of acute cephalgia in the Emergency Department, including the use of therapies to treat cephalgia, migraine headache, and subarachnoid hemorrhage.

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