Computed Tomography Brain and Inpatient Falls: An Audit Evaluating the Indications and Outcomes

Authors: Zain Khan, Steve Ahn, Kathy Monypenny, James Fink

Abstract : In Australian public hospitals, there were approximately 34,000 reported inpatient falls between 2015 to 2016. The gold standard for diagnosing intracranial injury is non-contrast enhanced brain computed tomography (CTB). Over a three-month timeframe, a total of one hundred and eighty (180) falls were documented between the hours of 4pm and 8am at a large metro hospital. Only three (3) of these scans demonstrated a positive intra-cranial finding. The rationale for scanning varied. The common indications included a fall with head strike, the presence of blood thinning medication, loss of consciousness, reduced Glasgow Coma Scale (GCS), vomiting and new neurological findings. There are several validated tools to aid in decision-making around ordering CTB scans in the acute setting, but no such accepted tool exists for the inpatient space. With further data collection, spanning a greater length of time and through involving multiple centres, work can be done towards generating such a tool that can be utilized for inpatient falls.

Keywords: computed tomography, falls, inpatient, intracranial hemorrhage

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