* GCS <= 14
* Palpable skull fracture
* Other signs of altered mental status
	+ agitation
	+ somnolence
	+ slow response to verbal communication

CT recommended

Observation vs. CT on basis of other clinical factors:

* Physician experience
* **Age < 3 months**\*\*
* Worsening signs/symptoms after ED observation
* Multiple vs isolated findings
* *Isolated* LOC ***or*** *Isolated* Frontal

Scalp hematoma ***in infants > 3 months*** has low risk (< 1.0%) of CiTBI

* Parental preference

\*\*Stronger consideration should be given to obtaining CT in Infants < 3 months old.

<0.02% Risk of CiTBI

CT Not Recommended

 NO

 YES

0.9% Risk of CiTBI

* Occipital, Parietal or Temporal Scalp Hematoma
* History of LOC >= 5 seconds
* Not acting normally per parent
* Severe mechanism of injury:
* MVA with: pt ejection ***or*** death of another passenger ***or*** rollover
* Pedestrian or unhelmeted cyclist struck by motorized vehicle
* Fall > 3 ft.
* Head struck by high impact object

 NO

 YES

 4.4% Risk of CiTBI