



# Eye Injury / Complaint

## Assessment

### Pediatric Pearls:

- Use pediatric dosing of medications or electrical therapy for a pediatric patient < 37 kg and as defined by the PEDIA Tape.
- Pediatric hypotension is defined as SBP < 70 + (age in years x 2) mmHg

### Signs & Symptoms:

- Pain, swelling, blood
- Deformity, contusion
- Visual deficit / loss of vision
- Leaky aqueous / vitreous humor
- Upwardly fixed eye
- Shooting or streaking light
- Visual contaminants
- Rust ring
- Lacrimation

### Differential:

- Trauma
- Infection – Viral URI or Sinusitis
- Allergic rhinitis
- Lesions – Polyps, Ulcers
- Hypertension

## Clinical Management Options

P	P	P	P	P	P
L	L	L	L	L	L
1	2	3	4	5	6

- Evaluate pupils
- Complete neurological exam
- Screen for unrecognized chemical and/or agent exposure
- Cover both eyes
- If out of socket, then cover with sterile water or isotonic crystalloid soaked gauze
- If impaled object, then stabilize the object then cover both eyes
- If chemical exposure or burn, then [irrigate](#) with copious amounts of sterile water or [isotonic crystalloid](#)
  - Perform an initial and repeat respiratory assessments.
- [Vascular access](#)
- May use Lidocaine in 1 L Isotonic Crystalloid for [irrigation](#)
- Refer to [Nausea/Vomiting COG](#)

## Consult Online Medical Control As Needed

### Pearls:

- Refer to drug formulary charts for all medication dosing for both adults and pediatric patients.
- Normal visual acuity can present even with severe injury.
- Remove contact lens when possible. If adherent to globe, then do not force. Irrigation may assist with removal.
- Any chemical or thermal burns to the face/eyes should raise concern for respiratory insult.
- Orbital fracture raises concern for globe or nerve injury, or compartment syndrome. This requires repeat assessments.
- Always cover both eyes to prevent further insult.
- Use shield not pads for physical trauma to the eye. Pads are acceptable for the uninjured eye.
- DO NOT remove impaled objects
- Suspected globe rupture or compartment syndrome requires emergent evaluation.