



Headache

Assessment

Pediatric Pearls:

- Use pediatric dosing of medications or electrical therapy for a pediatric patient < 37 kg and as defined by the PEDIA Tape.

Signs & Symptoms:

- Pain severity
- Nausea / Vomiting
- Photo / Auditory sensitivity
- "Worst ever"
- Thunderclap
- Nuchal rigidity
- Associated neurologic signs: diplopia, ataxia, weakness, etc.

Differential:

- Stroke
- Head trauma
- Hypoxia
- Seizure
- Neoplasm
- Toxins
- Hypertension
- Dehydration
- Infection
- Meningitis
- Hyper/hypoglycemia
- Pre-eclampsia
- Anxiety

Clinical Management Options

P	P	P	P	P	P	<ul style="list-style-type: none"> • Oxygen, target SpO₂ 92 – 96% • BGL Assessment • Basic Airway Management as needed
L	L	L	L	L	L	<ul style="list-style-type: none"> • Perform stroke assessment • Monitor ETCO₂ • Acetaminophen for pain, only if no signs of Stroke, Head Trauma, Seizure, or other emergency with CNS impairment • If SBP > 180 or DBP > 120, then suspect hypertensive crisis and consult OLMC
1	2	3	4	5	6	<ul style="list-style-type: none"> • Vascular access as appropriate for patient condition • Signs of dehydration, then infusion of isotonic crystalloid PRN
						<ul style="list-style-type: none"> • Cardiac monitor and 12 ECG
						<ul style="list-style-type: none"> • Nausea and Vomiting COG as needed • Midazolam for withdrawal or anxiety/panic attack • Advance Airway Management as needed

Consult Online Medical Control As Needed

Pearls:

- Refer to drug formulary charts for all medication dosing for both adults and pediatric patients.
- Document vital signs, including pain scale, before and after any intervention.
- Headaches often resolve with treatment of underlying disorder, which may require acute (ex: dehydration) or long-term (ex: hypertension) management.
- Headaches are broadly classified into "primary" and "secondary" headaches.
 - Primary headaches are benign and are recurrent that are not caused by an underlying disease or structural abnormality. These include, headache, cluster headache, tension headache, and primary sex headache.
 - Secondary headaches can be either benign or life threatening and are caused by underlying disease or a structural abnormality. These include meningitis, intracranial hemorrhage, subarachnoid hemorrhage, subarachnoid hemorrhage, brain tumor, temporal arteritis, and postictal headache.
- Headaches can occur as a result of a hypertensive crisis, which are rare. When a hypertensive crisis does occur, it is often due to medication noncompliance or another factor that worsened existing hypertension.