Concurrent E: Treatment and Rehabilitation

19

IMPROVING THE CARE OF CHILDREN PRESENTING WITH MILD TRAUMATIC BRAIN INJURY (MTBI) TO EMERGENCY CARE SETTINGS: CLINICIANS ATTITUDES AND PERCEPTIONS OF CARE

doi:10.1136/injuryprev-2012-040580g.19

B Kool*, V King, S Ameratunga, S Wells. The University of Auckland, New Zealand

Background Traumatic brain injury (TBI) is a significant Public Health problem in New Zealand and globally. The vast majority of cases (80–90%) are considered to be mild.

Aims/Objectives/Purpose To examine the barriers and enablers to clinicians delivering evidenced-based care to children presenting with mild head injury to Emergency Department (ED) and Accident and Medical Clinic (A&M) settings.

Methods A cross-sectional survey of a purposeful sample of clinicians involved in the acute assessment of children was conducted in 2011 in two busy paediatric EDs and an A&M clinic, in Auckland. Clinicians were selected from various stages of post graduate training. The survey tool captured information on: demographics, clinical experience and training, current practice in relation to the acute management of mild TBI (MTBI) and sources of knowledge.

Results/Outcomes 29 surveys were completed. Most clinicians (25/29) believed MTBI is an important complication among children who sustain a head injury, and considered doctors the most suitable professional to screen children for MTBI (22/29). Many agreed that a lack of knowledge was a barrier to effectively managing children who sustained a MTBI (13/29). Most (17/29) felt that there was a lack of follow-up for children with MTBI. Slightly more than half (16/29) indicated they gave verbal advice in addition to written advice.

Significance/Contribution to the Field The findings of this study are consistent with overseas research suggesting important gaps between current and best practice for the appropriate care of children with MTBI in EDs and in primary care settings.