

□ NEXUS-II Criteria for Head CT in Blunt Head Trauma

Purpose: To identify patients with **blunt head trauma (GCS ≥ 13)** who are at **low risk for clinically significant intracranial injury (ICI)** and **may not require head CT**.

A Head CT is recommended if ANY of the following are present: - Evidence of significant skull fracture (e.g., basilar signs, palpable step-off) - Scalp hematoma - Neurological deficit - Altered level of alertness - Abnormal behavior - Coagulopathy - Persistent vomiting - Age ≥ 65 years

Inclusion Criteria:

- Blunt head trauma
- GCS ≥ 13
- Age ≥ 1 year
- Stable vital signs

Performance:

- Sensitivity: **~98-99%** (excellent for ruling out significant injury)
- Specificity: **Low** (many unnecessary scans avoided only if used judiciously)

□ Comparison with Other Head CT Rules

Rule	GCS Range	Focus	Sensitivity	Specificity
NEXUS-II	≥ 13	Safety net, easy to apply	Very high	Low
CCHR	13-15	High-risk neurosurgical signs	High	Moderate
NOC	15	Symptom-based	Very high	Low

Clinical Tip: NEXUS-II is a **broad and highly sensitive rule** that helps **rule out the need for CT** in patients with **no red flags**. Especially valuable in busy EDs or resource-limited settings.

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