

TRAUMATIC BRAIN INJURY

Glasgow Coma Scale Procedural skill

Participant resource kit





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Queensland Trauma Education

The resources developed for Queensland Trauma Education are designed for use in any Queensland Health facility that cares for patients who have been injured as a result of trauma. Each resource can be modified by the facilitator and scaled to the learners needs as well as the environment in which the education is being delivered, from tertiary to rural and remote facilities.

National Safety and Quality Health Service (NSQHS) Standards









About this training resource kit

This package is designed to highlight the importance of and how to perform a structured approach Glasgow Coma Scale (GCS) in the assessment of a trauma scenario.

It is intended to provide guidance to a facilitator on the instruction of participants in the use of the Glasgow Coma Scale following trauma using case examples.

Learning objectives

By the end of this session the participant will be able to:

- Demonstrate an understanding of the elements of the Glasgow Coma Scale.
- Discuss the challenges with each part of the scale.
- Perform a GCS assessment using a structured approach.

Supporting resources

• GCS: Do it this way - infographic poster.

Overview of Glasgow Coma Scale

The Glasgow Coma Scale (GCS) is a commonly utilised scoring system to objectively assess a patient's level of consciousness following a traumatic brain injury (TBI). It is a reliable tool to categorise the severity of TBI:

- Mild = GCS 13-15
- Moderate = GCS 9-12
- Severe = GCS 8 or less

Further reading

Glasgow Coma Scale explained. Mehta Rhea, Chinthapalli Krishna (2019) *BMJ Simulation & Technology Enhanced Learning*. https://www.bmj.com/content/365/bmj.l1296

The Glasgow Structured Approach to Assessment of the Glasgow Coma Scale https://www.glasgowcomascale.org/

Statewide Neurological Assessment (Adult)

https://qheps.health.qld.gov.au/__data/assets/pdf_file/0026/2416922/sw977.pdf

GLASGOW COMA SCALE: Do it this way



Institute of Neurological Sciences NHS Greater Glasgow and Clyde



CHECK

For factors Interfering with communication, ability to respond and other injuries



OBSERVE

Eye opening , content of speech and movements of right and left sides



STIMULATE

Sound: spoken or shouted request

Physical: Pressure on finger tip, trapezius or supraorbital notch



RATE

Assign according to highest response observed

Eye opening

Criterion	Observed	Rating	Score
Open before stimulus	*	Spontaneous	4
After spoken or shouted request	*	To sound	3
After finger tip stimulus	*	To pressure	2
No opening at any time, no interfering factor	✓	None	1
Closed by local factor	✓	Non testable	NT

Verbal response

Criterion	Observed	Rating	Score
Correctly gives name, place and date	*	Orientated	5
Not orientated but communication coherently	✓	Confused	4
Intelligible single words	✓	Words	3
Only moans / groans	*	Sounds	2
No audible response, no interfering factor	*	None	1
Factor interferring with communication	*	Non testable	NT

Best motor response

Criterion	Observed	Rating	Score
Obey 2-part request	*	Obeys commands	6
Brings hand above clavicle to stimulus on head neck	4	Localising	5
Bends arm at elbow rapidly but features not predominantly abnormal	4	Normal flexion	4
Bends arm at elbow, features clearly predominantly abnormal	4	Abnormal flexion	3
Extends arm at elbow	4	Extension	2
No movement in arms / legs, no interfering factor	✓	None	1
Paralysed or other limiting factor	*	Non testable	NT

Sites For Physical Stimulation

Supraorbital notch Finger tip pressure Trapezius Pinch

Features of Flexion Responses

Modified with permission from Van Der Naalt 2004 Ned Tijdschr Geneeskd



Slow Sterotyped Arm across chest Forearm rotates Thumb clenched Leg extends



Normal flexion

Rapid Variable Arm away from body

References

- 1. Teasdale G, Maas A, Lecky F, Manley G, Stocchetti N, Murray G. The Glasgow Coma Scale at 40 years: standing the test of time. Lancet Neurol 2014;13:844-54.
- 2. Laureys S, Bodart O, Gosseries O. The Glasgow Coma Scale: time for critical reappraisal. Lancet Neurol 2014;13:755-7.
- 3. Matis G, Birbilis T. The Glasgow Coma Scale a brief review. Past, present, future. Acta Neurol Belg 2008;108:75-89. e.

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