

**Scalp Lacerations and Facial Trauma presenting to the Vanderbilt Emergency Room
10/2007**

Policy for Services Covering Facial Trauma

Facial trauma coverage is provided by otolaryngology, plastic surgery and oral and maxillofacial surgery. Policy to define appropriate consults of facial trauma call teams is outlined.

Consult the Facial Trauma on call team

NO

1. Scalp injuries (except major avulsions or loss of scalp tissue, see below)*
2. Neck injuries
3. Isolated dental injuries (not associated with bony fracture)
4. Globe injury
5. Middle ear, external auditory canal, and tympanic membrane injuries
6. Injury to non-hair bearing skin in the post-auricular area

YES

1. Injury to any face component: lips, eyebrows, cheek, mentum, forehead, and nose
2. Complex injury to the eyelids that cannot be repaired by simple skin approximation
3. Injury to external ear (auricle, tragus)
4. Although scalp is not part of the face, major avulsion or loss of tissue in scalp requiring complex or flap repair. ED personnel will wash blood from the hair and evaluate all scalp injuries for extent before calling facial trauma teams.

*Note that Oral and Maxillofacial Surgery call teams are willing to help with less severe scalp lacerations seen in the ED

Services to cover areas associated with non-facial trauma

Isolated Tooth Injury (if needs immediate attention)— OMFS

External auditory canal, Tympanic Membrane, Middle ear—ENT

Globe—Ophthalmology

Scalp—If no avulsion or tissue loss ED will repair with Trauma as backup

Neck—Trauma