Head Injury in Patients on Anticoagulants

Quick-reference for community pharmacists · Aligned with NICE NG232

CALL 999: Serious Head Injury Features

- ☐ Loss of consciousness at any point, however brief
- ☐ Seizure following head injury
- ☐ New neurological symptom: weakness, difficulty speaking, or visual disturbance
- ☐ Worsening headache with vomiting after head injury
- ☐ Confusion, agitation, or deteriorating conscious level
- ☐ Amnesia for events before or after the injury

Call 999 for any of the above, regardless of anticoagulant status. Deterioration can be rapid; do not wait for symptoms to progress.

A&E TODAY: All Head Injuries on Anticoagulants

- ☐ Any head injury in a patient taking warfarin, apixaban, rivaroxaban, edoxaban, dabigatran, or heparin
- ☐ Send to A&E even if the patient feels completely well and the injury appears minor
- ☐ NICE NG232: CT imaging is commonly required even when other CT indications are absent; follow current NICE NG232 recommendations.
- ☐ Do not advise observation at home; send directly to Accident and Emergency
- ☐ Paracetamol for pain relief; avoid aspirin and non-steroidal anti-inflammatory drugs (NSAIDs) due to additional bleeding risk

Intracranial haemorrhage can be initially silent. A patient who feels fine may deteriorate hours later.

SELF-CARE: Minor Injury, No Anticoagulants, No Red Flags

- ☐ No anticoagulant therapy
- ☐ No loss of consciousness, no amnesia, no vomiting, no neurological symptoms
- ☐ Low-force mechanism (e.g. walked into a door frame)
- ☐ Responsible adult present to observe for 24 hours
- ☐ Paracetamol for pain; avoid aspirin and NSAIDs in the acute phase

Safety-net: seek urgent help if headache worsens, vomiting occurs, drowsiness develops, behaviour changes, or any neurological symptoms appear within 24 hours.

Red Flags at a Glance

Feature	More likely minor	Red flag
Consciousness	Fully alert throughout; no blackout	Any loss of consciousness, however brief
Headache	Mild, short-lived, no change from baseline	Persistent or worsening headache
Vomiting	None	Any vomiting after head injury
Neurological symptoms	None	Confusion, weakness, speech or visual change
Amnesia	None	Memory loss before or after the injury
Mechanism	Low-force; no significant impact	Fall from height, collision, or assault
Anticoagulants	Not prescribed	On warfarin, apixaban, rivaroxaban, or similar

Key reminders: Any head injury on an anticoagulant requires A&E assessment, even if the patient feels well: intracranial haemorrhage can be initially silent. NICE NG232: CT imaging is commonly required even when other CT indications are absent; follow current NICE NG232 recommendations. Paracetamol is appropriate for pain relief; aspirin and NSAIDs increase bleeding risk and should be avoided after head injury.