

## Raised intracranial pressure

- **Oculocephalic reflex:**
  - When the head is being turned left to right, the normal response is to move your eyes away from the head movement direction
  - Also when the head is flexed, the normal response is to move the eyes upwards.
  - If these are absent, the oculocephalic reflex is impaired
- **CENTRAL SYNDROME: coning through the foramen magnum;**
  - **Neck stiffness and Cushings triad**
- **UNCAL SYNDROME**
  - **Third nerve compression and ipsilateral dilated pupil.**
  - **Oculomotor palsy is next: eye cannot move laterally**
  - **Hemiplegia may develop**

**YOU DO NOT PERFORM LUMBAR PUNCTURE IN THESE CHILDREN.**

**When would you reconsider lumbar puncture:**

- **Prolonged or focal seizures**
  - **Focal signs**
  - **Widespread purpuric rash**
  - **GCS less than 13**
  - **Dilated pupils**
  - **Dolls eye reflex impairment**
  - **Decerebrate or decorticate posturing**
  - **Thrombocytopenia**
  - **Cushings reflex**
  - **Obvious papilledema**
  - **Hypertension**
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- **Nurse head straight, at 30 degrees**
  - **Intubate and sedate**
  - **Keep PCO<sub>2</sub> 40-45**
  - **Give mannitol 250-500mg/kg**
  - **Think about dexamethasone**

**A few other things:**

- **CT head... everyone gets one**
- **Is there otitis media? Its associated with meningitis**
- **Subacute hours-long onset suggests meningitis**
- **Retinal hemorrhage and dodgy story? Maybe contact DOCs**