

Guideline for Hospital Admission

Ministry of Public Health - Lebanon

Headache indications for admission

Most persons who present with headache have primary headache, and do not require hospitalization.

Patients who present with 'red-flag' features of potential secondary headache may require further investigation or hospitalization. The following are considered red-flag features:

- New onset or change in headache in patients who are aged over 50 years
- Thunderclap headache, with rapid time to peak headache intensity (seconds to few minutes)
- Focal neurological symptoms (e.g. limb weakness, aura <5 min or >1 hr)
- Non-focal neurological symptoms (e.g. cognitive disturbance)
- Change in headache frequency, characteristics or associated symptoms
- Abnormal neurological examination
- Patients with risk factors for cerebral venous sinus thrombosis
- Jaw claudication or visual disturbance
- Neck stiffness
- Fever
- Projectile vomiting
- New onset headache in a patient with a history of HIV infection or of cancer

A strong indication for hospital admission are patients presenting with thunderclap headache, which is a medical emergency possibly due to subarachnoid hemorrhage.

Neuroimaging, including CT and MRI, is not indicated for patients with a clear history of migraine with normal neurological examination and no red-flag features.

References:

Scottish Intercollegiate Guidelines Network. Diagnosis and management of headache in adults, a national clinical guideline, 2008.

Checklist:

	Present	Absent
Thunderclap headache		
New onset or change in headache in patients > 50 years old		
Focal neurological symptoms (e.g. limb weakness, aura <5 min or >1 hr)		
Non-focal neurological symptoms (e.g. cognitive disturbance)		
Change in headache frequency, characteristics or associated symptoms		
Abnormal neurological examination		
Patients with risk factors for cerebral venous sinus thrombosis		
Jaw claudication or visual disturbance		
Neck stiffness		
Fever		
Projectile vomiting		
New onset headache in a patient with a history of HIV infection or of cancer		
