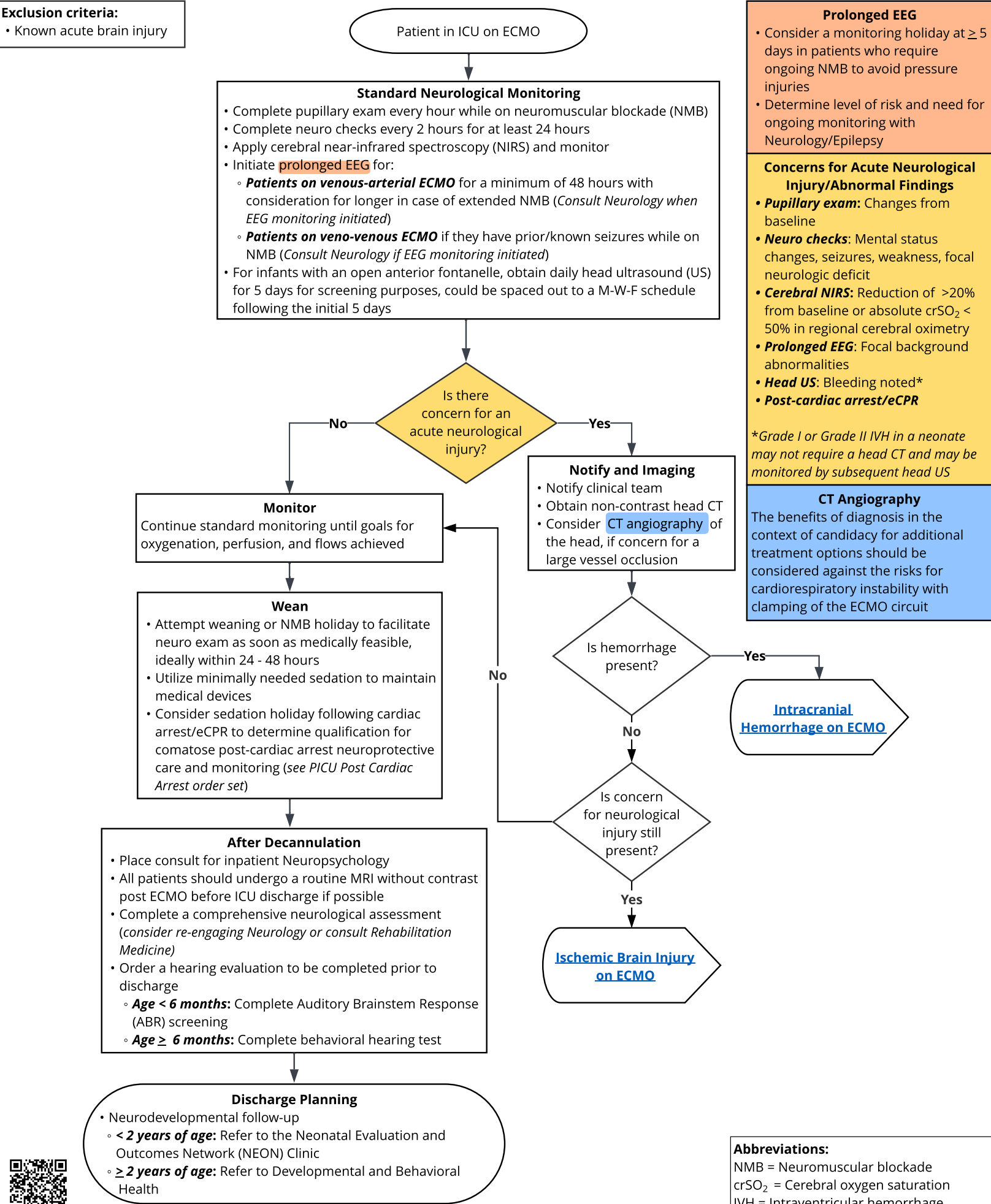


Exclusion criteria:

- Known acute brain injury



Prolonged EEG

- Consider a monitoring holiday at ≥ 5 days in patients who require ongoing NMB to avoid pressure injuries
- Determine level of risk and need for ongoing monitoring with Neurology/Epilepsy

Concerns for Acute Neurological Injury/Abnormal Findings

- Pupillary exam:** Changes from baseline
- Neuro checks:** Mental status changes, seizures, weakness, focal neurologic deficit
- Cerebral NIRS:** Reduction of $>20\%$ from baseline or absolute $\text{crSO}_2 < 50\%$ in regional cerebral oximetry
- Prolonged EEG:** Focal background abnormalities
- Head US:** Bleeding noted*
- Post-cardiac arrest/eCPR**

**Grade I or Grade II IVH in a neonate may not require a head CT and may be monitored by subsequent head US*

CT Angiography

The benefits of diagnosis in the context of candidacy for additional treatment options should be considered against the risks for cardiorespiratory instability with clamping of the ECMO circuit



QR code for mobile view