



What To Do If You Have To Go To The ER (For a bad headache)

None of us likes to think of needing to go the ER (emergency room) but it can happen. Why not be prepared in case that day comes? This newsletter is devoted to helping make the ER visit as uneventful as possible.

First, why go to the ER? Symptoms like chest pain, shortness of breath, uncontrollable bleeding, major body injury-these are common reasons to go the ER. What about headache? When should a person go the ER for a bad headache? Since Dr. Hutchinson's practice focuses on headache, this newsletter will be devoted to ER visits for headache.

Most headaches are benign and do not represent a brain tumor or internal bleeding; however, the more acute the onset of the headache, the higher the chance it could be more than a migraine. If a headache is so severe it wakes you up in the middle of the night; is accompanied by nausea/vomiting and any abnormal neurological signs such as weakness on one side of the body, then a trip to the ER is advised.

What about severe migraine? In most cases, patients should have a rescue plan from Dr. Hutchinson (or another provider) about how to handle a severe headache that is not responding to their usual meds. For example, some patients may use an Imitrex injection; others an oral narcotic such as Vicodin. If you don't have a rescue plan outlined, then please discuss this with Dr. Hutchinson at your next appt.

Do you really need to go to the ER? CALL DR HUTCHINSON. She may advise an urgent visit to her office where she can administer either an Imitrex or Toradol injection or she may advise a trip to a local ER. By calling Dr. Hutchinson first, she can give you the best advice. Both Imitrex and Toradol injections are non-narcotic (and non-drowsy) so patients can drive themselves to and from the office. After the injection, patients can relax in a darkened exam room until better enough to drive home.

If you need to go to the ER

STEP 1: Getting there safely. **It is not safe to drive with a severe headache!** Have a friend or family member take you. If no one is available, call 911! Emphasize the severity of the headache to the 911 operator.

STEP 2: Always have a list with you of all the medications you take including dosage and take it with you to any ER or urgent care visit. In fact, this list should be with you at all times just in case an unexpected ER visit occurs. Be prepared to tell the ER staff what meds you have already taken that day prior to the ER visit.

Make sure to note all ALLERGIES on your list of medications as well. For women patients, make sure to tell the ER if there is any chance of pregnancy.

STEP 3: Provide the ER with a list of all your treating providers including phone numbers. This is very important so they can call us with any questions. Ask the ER to fax copies of the ER visit, including all test results to your providers. This will help make sure your providers, including Dr. Hutchinson, have all necessary information for your follow-up visit.

STEP 4: Notify the ER that Dr. Hutchinson's office would be happy to fax a copy of your most recent office visit to them. This can help them know what our current treatment plan is.

STEP 5: In the rare case that admission to the hospital is needed, have the ER notify Dr. Hutchinson. She has privileges at both Hoag Hospital and Irvine Medical Center. In most cases, you will be discharged with instructions to follow-up with Dr. Hutchinson.

STEP 6: Bring discharge instruction sheets and prescription medication bottles from the ER to your follow-up visit.

Keep in mind that the ER is not an ideal place to go for a severe migraine; the bright lights, the noise and the long wait time can aggravate the headache. In some cases, the ER staff has a negative attitude towards the headache patient, often perceiving the patient wanting a narcotic. Why not discuss with Dr. Hutchinson non-narcotic options to rescue a severe migraine? She can also provide a note for her migraine patients with suggestions on treatment if an ER or Walk-in visit is necessary. The note can make the visit much easier.

If frequent ER visits occur, then a more aggressive preventive approach to your headaches is needed. Please see Dr. Hutchinson for a preventive plan if you are going to the ER more than 2 times a year.

I hope this newsletter has helped you know what to do if you have to go to an ER for a severe headache.

Sincerely,

Susan Hutchinson, MD Director-Orange County Migraine & Headache Center