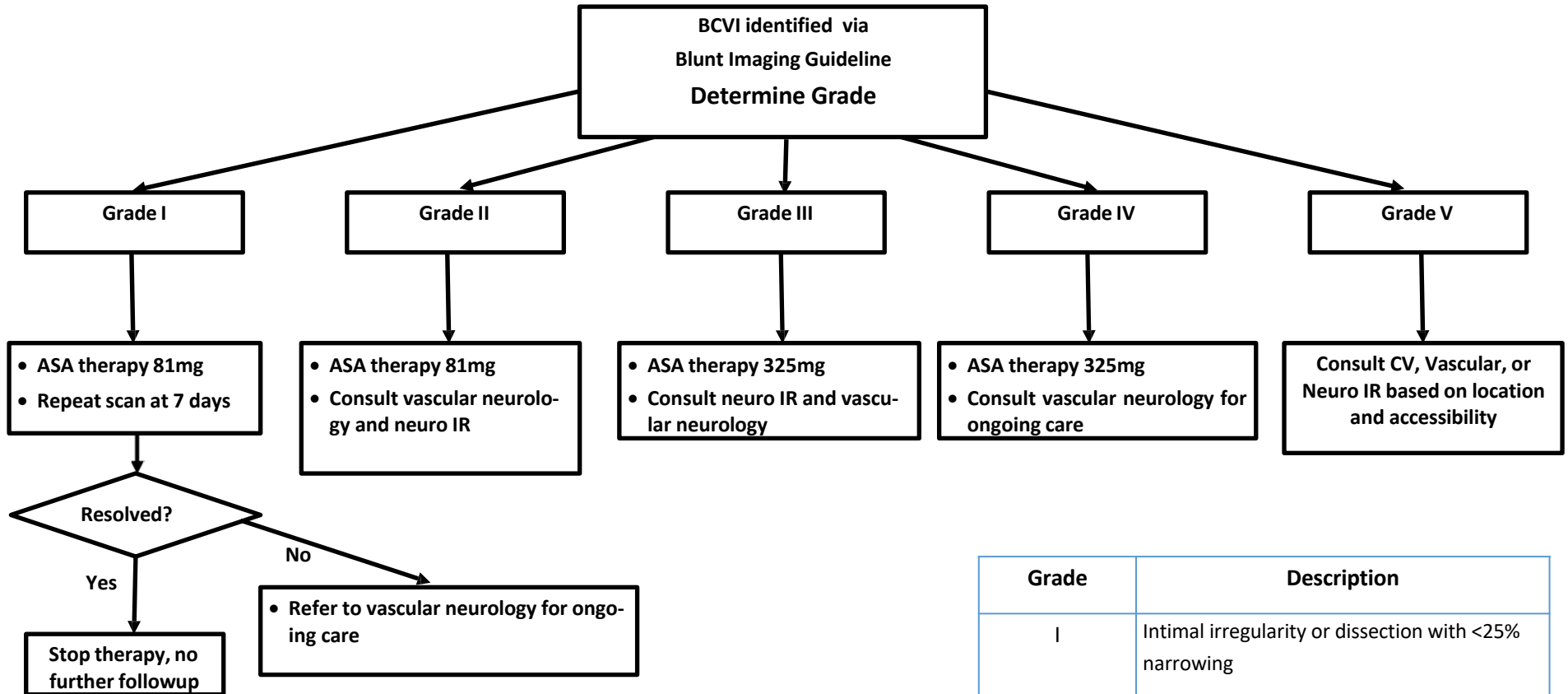


# Clinical Practice Guideline

## Blunt Carotid / Vertebral Artery Injury (BCVI)



- **Antithrombotic therapy does not replace VTE prophylaxis**
- Preferred agent is low dose ASA. However, if a reversible agent is preferred due to surgery or other injuries, therapeutic unfractionated heparin may be used.
- If more detailed imaging is needed (i.e equivocal CTA), order axial fat-saturated T1-weighted MRI
- **Currently, there is only one dedicated Vascular Neurologist. To involve them, consult neurology (floor) or neurocritical care (ICU) who will reach out to Vascular Neurology.**

Grade	Description
I	Intimal irregularity or dissection with <25% narrowing
II	Dissection or hematoma with >25% narrowing, intraluminal thrombus, or raised intimal flap
III	Pseudoaneurysm
IV	Occlusion
V	Transection with extravasation