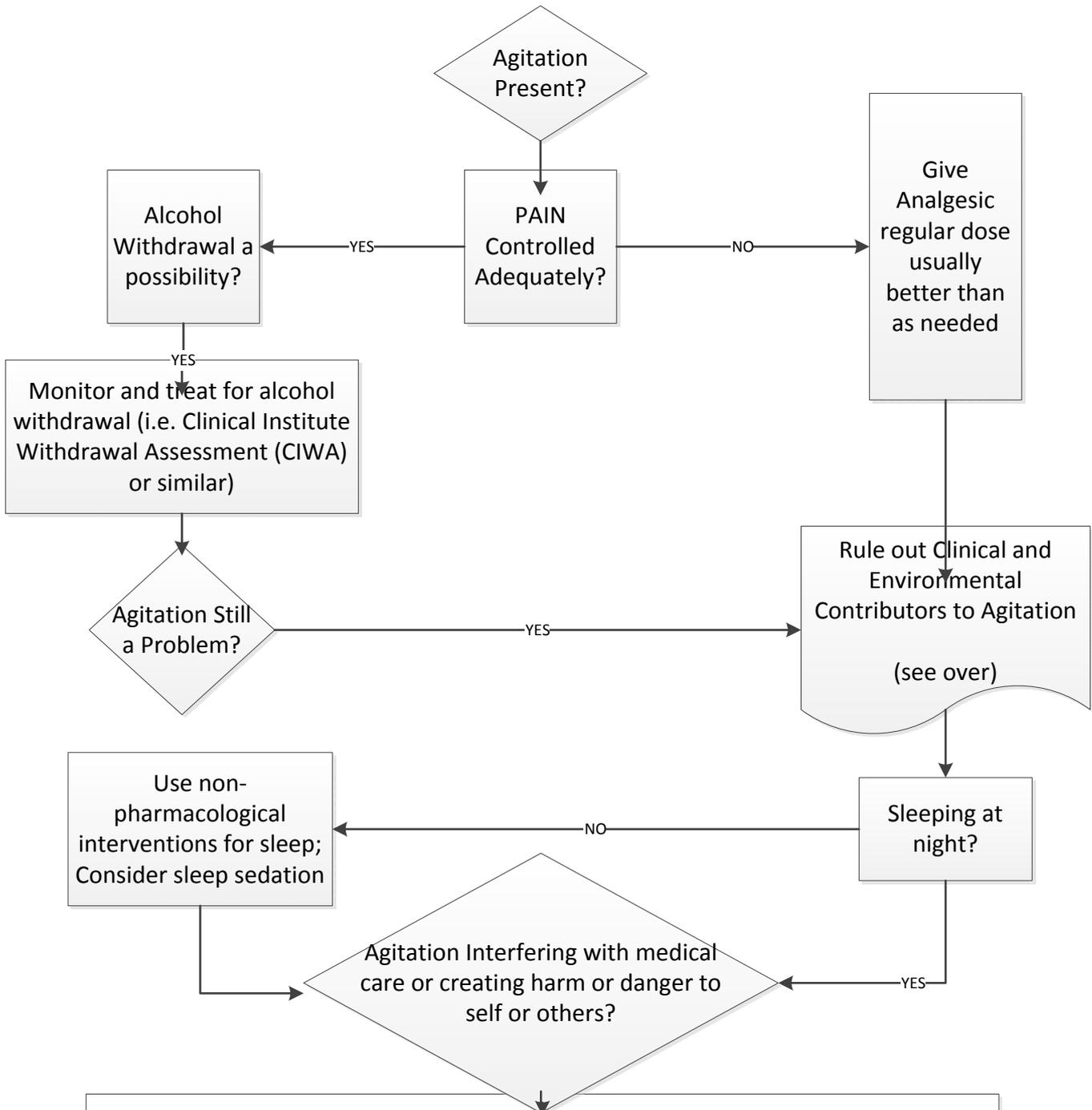


Management of Agitation Following Brain Injury



1. **Consider mechanical restraints;** ensure appropriate pharmacological intervention is used concurrently to minimize further agitation and/or injury.

2. **Consider pharmacological intervention.** Start low and go slow. Taper to effect. Use scheduled medications proactively and PRNs when needed.

Note: When medication has been effective in moderating severe behaviour, staff are often reluctant to reduce or withdraw the medication for fear of a return to dangerous or disruptive levels of responding. The patient may be kept on the drug well beyond the time needed. Most medications have the potential to affect the level of alertness, cognition and initiation of a patient, which may have deleterious effects on rehab. Individuals with a brain injury are typically more sensitive to medications and their side effects (depression, mania, insomnia, paranoia)