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CRANIAL BURR HOLE

Using a Hudson-Brace

Using a hand or electric drill

Drilling with the perforator bit
Use the perforator bit to drill through the outer table, felt as a smooth drilling motion.

Note: the non-rotating hand should provide counter-torque and resist forward motion of the drill.

Set the Stopper
Set the stopper based on the CT to prevent drilling too deeply (typically 0.5-2 cm). Use the largest drill bit in the kit.

Drilling with the conical burr
When the drilling motion becomes jagged, switch to the conical burr to trephinate the inner table of the skull.

Drill through the skull
Drill through the inner table of the skull.

Epidural hematoma
Evacuate epidural blood with irrigation and gentle suction.

Subdural hemorrhage
For a subdural bleed, make a three-sided (or "X") incision in the dura. Use irrigation but do NOT suction.

Skin closure
Leave a drain in place as blood will reaccumulate. Close the skin for hemostasis.

Note: Burr holes without CT guidance can be done in the following sequence: ipsilateral temporal, contralateral temporal, ipsilateral frontal, ipsilateral parietal. See video.

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