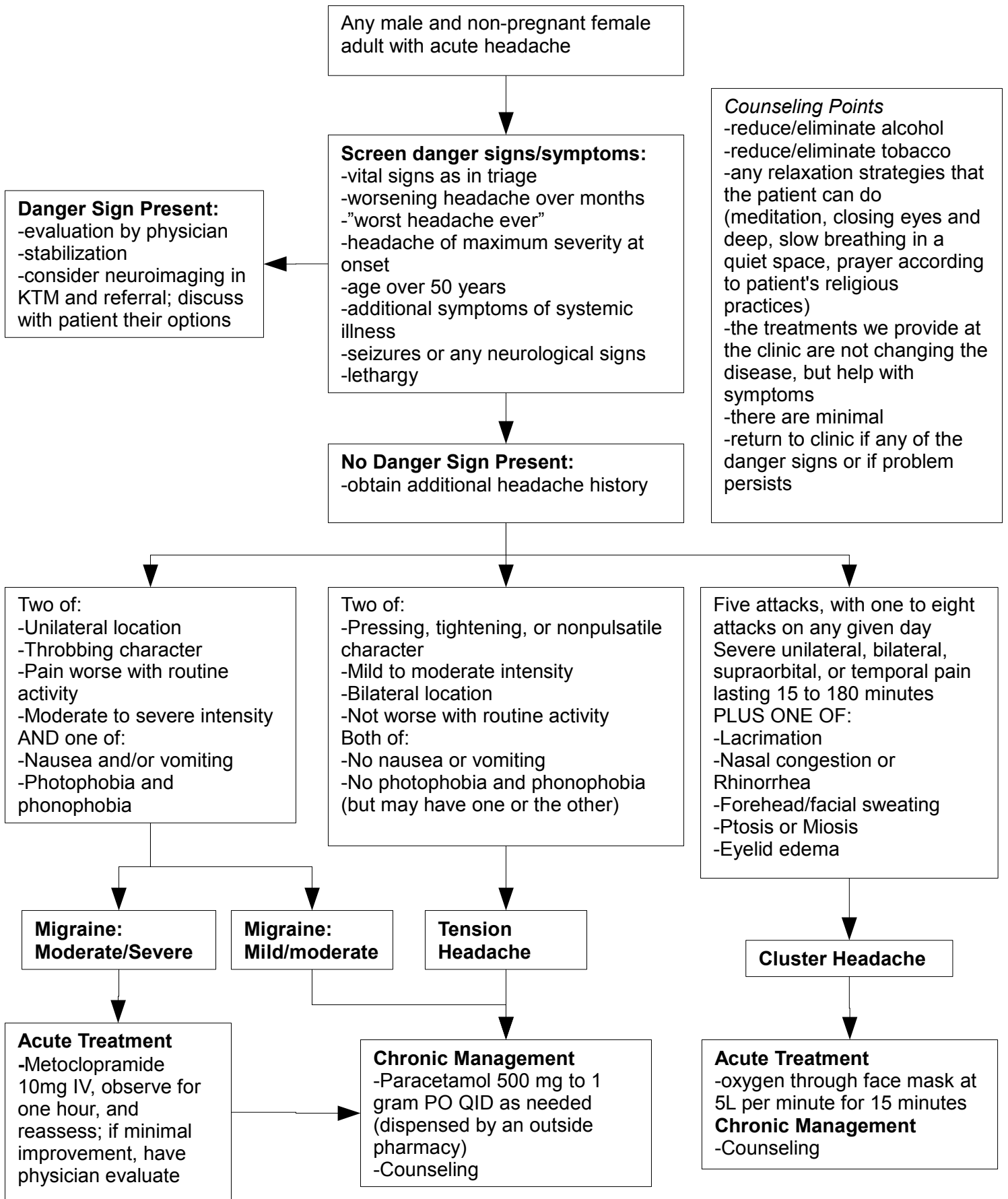


# Protocol for Patients Presenting with Acute Headache



**Counseling Points**  
 -reduce/eliminate alcohol  
 -reduce/eliminate tobacco  
 -any relaxation strategies that the patient can do (meditation, closing eyes and deep, slow breathing in a quiet space, prayer according to patient's religious practices)  
 -the treatments we provide at the clinic are not changing the disease, but help with symptoms  
 -there are minimal  
 -return to clinic if any of the danger signs or if problem persists

*Notes (typically do not need to be printed out at the clinic; just for reference and documentation)*

Presently, the primary function of this protocol is to ensure that headache is not indicative of a more easily treatable condition. Eventually, given its high prevalence in the community and clear impact on quality of life, we need to develop a better primary care approach to non-specific LBP that includes more rigorous lifestyle interventions.

We have not included verapamil as a treatment for cluster headache here because of its questionable or minimal impact on symptom reduction. Eventually, as our primary care capacity improves and the evidence for treating cluster headaches with calcium channel blockers expands, we should consider adding this treatment onto the present protocol.