Objective: Identify the profile of the Intensive Care Unit from Hospital Universitário Cajuru (Curitiba – PR) neurocritic inpatients: their evolution, internment time and conditions related to the outcome. Methods: Retrospective longitudinal study. Medical records involving severe traumatic brain injury (TBI), spinal trauma (ST) and polytrauma. 160 patients from September 18th of 2017 to September 18th of 2018 were analyzed. Only the ones related with traffic accidents were considered (39). Statistic analysis with the IBM SPSS Statistics v.20.0. program. Results: It was found predominance of males (71.8%) and age between 18 and 74. Among the types of trauma, 14 were interned due to severe TBI, 10 to ST and 15 to polytrauma. It was noticed a higher of motor-to-car collisions (23.1%), followed by motorcycle run over (12.8%) and fall from vehicle (12.8%). Occuring subarachnoid hematoma and predominantly subdural hematoma at the entrance image exams. The minimum internment time was 1 day and the maximum was 34 days, with conservative treatment in 74.4%. Six deaths were described: run over (2), rollover (1), motorcycle-to-car collision (2), motorcycle-to-truck collision (1). The variables of the Glasgow Coma Scale (GCS) (entrance x discharge), the relation between internment time and fatal outcome were submitted to statistic tests, getting a satisfactory p-value (<0.05 in all the analyses). Conclusions: There was statistic significance to trauma conditions when analyzing the entrance and discharge GCS. Also the GCS on the internment time was important for the patient’s death outcome.