Children’s Services

Patient Information

Head injury going home advice

Information for parents, guardians and carers of children who have been admitted to hospital or seen in the Emergency Department following a head injury

Practical advice

- Do not leave your child alone for the first 24hrs.
- Your child may want to go to sleep. This is safe provided the sleep does not go on for longer than one hour from when they would normally be wide awake and you have no difficulty waking them up.
- Night time: check they can be roused when you go to sleep and at the time they would normally wake up unless you have been told otherwise.
- Your child should return to school or nursery when you feel they have recovered and have the energy to cope with a full day.
- Contact sport should be avoided for three weeks
- Your child should not ride a bicycle or play on high equipment for 48 hours or until you feel they have recovered.
When should you return to hospital?

- **Unconsciousness**, or lack of full consciousness (for example, problems keeping eyes open).
- **Problems** understanding, speaking, reading or writing (since the injury).
- **Loss of feeling** in part of the body (since the injury).
- **General drowsiness** i.e. slowness to respond. Children may be a little quieter than usual but they should not be drowsy.
- **Problems balancing** or walking (since the injury).
- **General weakness** (since the injury) in one or both arms or legs, or floppiness in a baby.
- Any changes in **eyesight**—blurred or double vision.
- **New deafness** in one or both ears.
- **Bleeding** from one or both ears.
- Clear fluid coming out of the **ears or nose**
- **A worsening headache** not relieved by painkillers such as paracetamol: it is normal for children to have a headache after a head injury.
- **Repeated vomiting**—more than two episodes
- **A convulsion or fit**. (Collapsing or passing out suddenly).
- **Poor feeding or irritability in a baby**.

Brain scans

Doctors are often asked if a scan should be done. Below is some information that explains how doctors decide if a scan is needed. There are two types of brain scans commonly performed after an injury:

- **CT scan** looks for bleeding in the brain. A CT scan is performed if the injury is severe enough that bleeding on the brain is suspected and brain surgery may be required. CT scans cause a very slight increase in the risk of cancer developing in a child and are therefore only performed if the benefits outweigh the risks. The doctors will follow national guidelines when deciding if a scan should be done. If the child appears well then a period of observation in hospital may be used instead of a scan.

- **MRI scans**: These are used after a very serious head injury, normally when a child has required intensive care. They are used to give information that helps the doctors decide how damaged the brain is.

- **Brain scans** do not help in if there are concussion symptoms as the damage is at the level of the cells and is too small for the scans to pick up.

Concussion symptoms

Some children develop concussion after a head injury. Concussion symptoms occur when the brain has been shaken. There is usually little external or internal sign of an injury. The following symptoms may occur:

- Constant or intermittent headache,
- Feelings of dizziness
- Nausea
- Sensitivity to light or noise
- Sleep disturbance
- Memory problems
- Restlessness
- Impulsivity and self-control problems
- Difficulties with concentration
- Irritability or being easily annoyed
- Feeling depressed, tearful or anxious
- Fatigue
- Difficulties thinking and problem-solving
- Poor sleep and tiredness

In most cases these symptoms resolve within two weeks. However sometimes they may persist much longer. If symptoms are present don’t rush your child back to normal activities.

If symptoms persist after two weeks we suggest you see your GP. They may monitor the resolution of symptoms and if they are particularly troublesome refer your child to the hospital.

This website has helpful information on head injuries: [www.headway.org.uk](http://www.headway.org.uk)