Head Injury: Concussion

Your child has been seen at Nationwide Children’s Hospital because of a specific type of head injury, called a concussion. A concussion can be caused by a blow, bump or jolt to the head. It can also happen when a fall or hit to the body jars the brain to make it move in an unnatural way (Picture 1). The injury to the brain is usually temporary. Your child may feel or act differently for a short time while the brain heals.

At this time, we do not think it is necessary to admit your child to the hospital. However, you will need to watch them closely for the next 24 to 48 hours. If you feel that you cannot do this, please tell your doctor or nurse before you leave.

What to expect

A concussion may affect how a child thinks, feels, and acts. Depending on the degree of brain injury, the symptoms can be few or many, mild or severe. They can come, go, then
They may last minutes or weeks. Typically, all symptoms should go away in time. Common symptoms are:

<table>
<thead>
<tr>
<th>Physical</th>
<th>Cognitive (thinking)</th>
<th>Emotional</th>
<th>Sleep</th>
</tr>
</thead>
<tbody>
<tr>
<td>headache, “pressure in head”</td>
<td>confused</td>
<td>irritable, moody, fussy</td>
<td>drowsy</td>
</tr>
<tr>
<td>neck pain</td>
<td>feeling like</td>
<td>more emotional than usual</td>
<td>low energy</td>
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<tr>
<td>nausea or vomiting</td>
<td>“in a fog”</td>
<td>sad</td>
<td>trouble falling</td>
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<tr>
<td>sensitivity to light</td>
<td>short attention span</td>
<td>nervous or anxious</td>
<td>asleep</td>
</tr>
<tr>
<td>sensitivity to noise</td>
<td>problems</td>
<td></td>
<td>sleeping more or</td>
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<tr>
<td>balance problems</td>
<td>remembering</td>
<td></td>
<td>less than usual</td>
</tr>
<tr>
<td>dizziness</td>
<td>“don’t feel right”</td>
<td></td>
<td></td>
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<tr>
<td>blurred vision</td>
<td>feeling slowed down</td>
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</tbody>
</table>

**What to do the first 24 to 48 hours**

- **Call to make a follow-up doctor’s appointment.** Regardless of the degree of injury, it is important that your child have medical follow-up with a doctor experienced with head injuries.

- Let your child take rests and naps as needed during the day. You do not need to wake them up or check on them. This advice is outdated.

- Encourage your child to get a good night’s sleep. Avoid things that might keep them awake longer, such as screen time (TV, computer, cell phone) and loud music. Avoid snacks and drinks with caffeine (colas and energy boosters) close to bedtime.

- For a mild to moderate headache, you may give the over-the-counter pain medicine acetaminophen (Tylenol®). Do not give ibuprofen (Motrin®, Advil®) until the doctor says it is OK. Read the label to know the right dose for the age of your child.

- Use ice packs on the head or neck to ease pain.

- At the doctor’s appointment, let the doctor know if your child is having trouble doing things they were able to do before the head injury, including schoolwork.

- Tell your child’s teachers and coaches that they have had a head injury so teachers can allow for changes in behavior and ability to concentrate, if needed.

**When to call the doctor**

You will need to return to the Emergency Department or call your medical provider
if your child has any of the following signs or symptoms:

- Repeated or projectile vomiting
- Hard to wake up or quickly falls back to sleep after waking
- Loss of consciousness. Child does not wake up when you touch and talk to him.
- A major change in behavior or personality, such as confusion, impulsiveness, recklessness, aggressiveness, or abnormal behavior
- Complaints of worsening headaches that are not relieved with pain medicine
- Bleeding or clear fluid from the nose or ears
- Hearing problems
- Slurred speech
- Convulsions or seizures (staring into space, looking dazed, twitching, or shaking)
- Staggering or swaying while walking
- Weakness or dizziness
- Eye changes such as crossed eyes, droopy eyelids, or trouble using eyes
- Blurred or double vision
- Numbness or tingling in face, arms, or legs
- Does not "look right" to you or seems to be getting worse instead of better

Activities allowed

The severity of symptoms guides what activities your child is able to do and how soon. There are no hard and fast rules.

If your child has had a concussion before, the recovery may be slower this time. Your child may have good days when symptoms are mild and bad days when they may be a little worse. This is a normal part of recovery. Your child’s doctor will help decide what is safe for them.

The following activities may be allowed after 1 to 2 days of rest as long as they do not cause symptoms to increase very much.

- Watching TV and listening to quiet music (avoid headphones)
- Limited technology use, such as computer time, electronic games, and phone texting
- Board games and card games that do not need a lot of concentration
- Reading, drawing, and doing homework for brief periods of time
- Going for walks if your child is able to without problems
Relaxing with friends and teammates, as long as it does not cause stress

Your child should stop any activity that causes symptoms until seeing their physician.

Participation in the following activities is not allowed until the doctor says it is OK:

- Gym and recess
- Contact sports and rough play
- Activities that require balance, such as bike riding, skate boarding, swimming, skiing, and tree climbing
- Operating motor vehicles, including ATVs, motorcycles, motor scooters, snowmobiles, and cars

Avoid any activity that will put your child at risk for another head injury until the brain heals. A repeat injury before the brain heals can slow recovery and cause long-term problems.

Most children return to school in 2 to 5 days following a concussion. Your child’s symptoms may not have all gone away before they go back to school. It is best for them to stay home if symptoms are bad enough to prevent learning or they cannot make it through at least a half day of school.

You will know your child has recovered when they can do regular activities without having concussion symptoms.

Preventing future injuries

Passenger safety. Use proper child passenger restraints (car seat or booster seat) for age and size of child.

Sports safety. Make sure your child:

- Wears a helmet that fits properly and protective gear when using a bike, skateboard, scooter, roller-skates, or participating in a contact sport like football.
- Learns and uses proper technique when playing sports, such as tackling in football and “heading” the ball in soccer.
- Always tells someone right away if they hit their head and do not feel normal afterwards.

Street safety. Children should be taught to play where it is safe and supervised. Most children can safely cross the street alone at about 10 years of age.

If you need a doctor for your child, call the Nationwide Children's Referral and Information Line at (614) 722-KIDS.