

# Health Facts

## Emergency Department

### Head Injury

A head injury is a knock to the head that may cause pain, cuts, swelling and/or bruising. Most head injuries are not serious but occasionally they can be and may result in trauma or damage to the brain.

#### **A child who has had a head injury:**

- Requires observation.
  - observe the child carefully for the 24 hours after the head injury.
  - the child should be able to be easily woken at all times.
- May resume normal activity (excluding sports) as directed, usually within 2-3 days. See over for a guide on returning to sports.
- Does not routinely require a follow-up appointment.

#### **Pain relief**

If your child has mild pain give paracetamol (Panadol®, Dymadon®, Panamax®) or ibuprofen (Nurofen®) and follow the manufacturer's instructions.

Next dose of \_\_\_\_\_ to be given at \_\_\_\_\_.

#### **Emergency complications**

Bring your child back to hospital if he or she:

- Becomes unconscious (Call an ambulance on 000).
- Becomes confused, irritable or delirious.
- Has anything that might be a convulsion, fit, turn or spasm of the face or limbs.
- Complains of a persistent headache or develops a stiff neck.
- Complains of blurred vision, seeing double or has other problems with their vision.
- Vomits frequently.
- Bleeds from the ear.
- Has a watery discharge in the ears or nose.

#### **Follow up**

Problems resulting from minor head injury can be difficult to detect. In the weeks after a head injury your child may display:

- Irritability
- Mood swings
- Tiredness

# Health Facts

- Concentration problems
- Behavioural problems

If any of these occur or you have other concerns take your child to the GP or Emergency Department.

## Returning to sport

Current evidence supports a gradual return to sport following a head injury, with a stepwise return to play. Children who return to sport too early are at risk of sustaining complications from their head injury.

Your child should have a period of physical and mental rest (“brain rest”). This includes avoiding sporting activities but also activities that require mental concentration including computer use, television, texting and playstations for 48 hours.

Once your child has been symptom free for 48 hours and feels back to normal, they can commence a gradual return to sporting activities as shown below. Each stage should last 24-48 hours and if they remain symptoms free, they can move up to the next stage.

Stage	Activity	Aim of Stage
<b>Stage 1:</b> <b>No activity</b> <i>For first 48 hours after injury</i>	Complete physical and mental rest	Recovery
<b>Stage 2:</b> <b>Light aerobic exercise</b>	Walking, swimming, stationary cycling	Gentle increase in heart rate
<b>Stage 3:</b> <b>Sport-specific exercise</b>	Running drills at football codes, cricket, basketball, netball, hockey	Adds movement
<b>Stage 4:</b> <b>Non-contact training drills</b>	Passing drills at football codes, cricket, basketball, netball, hockey	Adds co-ordination and exercise
<b>Stage 5:</b> <b>Full contact practice</b>	Participate in normal training activities	Restores confidence and allows coaching staff to assess progress
<b>Stage 6:</b> <b>Return to play</b>	Normal game play	

If your child develops any symptoms (headache, dizziness, nausea or tiredness), they should move back a stage and try again after a further 24-48 hour period of rest. If you are uncertain about full return to play, your GP can advise further.

If your child has persistent headaches, dizziness, nausea or vomiting, or if you have any concerns, take your child to the GP or the Emergency Department.