

**Patient
Information**

Caring for a child with a head injury

Your child has been assessed and is able to go home. Please make sure they are with an experienced carer who is able to closely observe them for the next few days.

This is a guide to keeping your child safe after a head injury.

Red category

Following a bang to the head, children may experience a few problems but rarely will they be serious. If you notice that your child is showing any of the symptoms listed below you must telephone 999 or go to the nearest Emergency Department straight away.

If your child:

- is sleepy and you cannot wake them.
- is confused (not knowing where they are, getting things muddled up).
- has a fit –making uncontrolled jerky movements.
- complains of eye sight problems.
- has difficulty speaking or understanding what you are saying.
- has weakness in their arms and legs or are losing their balance.
- has had clear or bloody fluid dribbling from their nose, ears or both since the injury.
- is continually vomiting.
- in babies, a different tone of crying –usually a high-pitched cry.

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Amber category

If your child has any of the symptoms below, we suggest you seek advice from your GP or telephone NHS 111 today. If your child is showing 2 symptoms from the list below then please treat as the Red category:

- has a continuous or worsening headache (not relieved by pain relief such as paracetamol).
- has had 3 or more separate bouts of vomiting within 12 hours (there must be a gap of 30 minutes for it to be a different bout).
- has continued irrational or unusual behaviour.

Green category

Listed below are the common symptoms of a minor head injury and do not usually need any treatment.

Your child:

- is alert and interacts with you.
- has a mild headache, dizziness or blurred vision (these symptoms may be worse when reading or watching television).
- is nauseous but not vomiting.

What is a minor head injury in a child?

Minor head injuries are common in active and exploring children, because they also have little sense of danger, poor balance and larger heads. These injuries may not result in loss of consciousness; your child will remain alert and able to communicate fully.

The advice below will help your child to recover and be more comfortable:

- Give regular pain relief such as paracetamol.
- Avoid giving anti-inflammatory medication, such as ibuprofen.
- Observe that your child is behaving normally and that they respond to you as usual.
- Encourage your child to drink, start with small sips of water. Your child may feel sick and be reluctant to eat, so small regular snacks such as toast may help.

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- Your child will need their usual sleep routine and for the first couple of nights you should check on them regularly. They should respond normally to your touch and their breathing should sound normal.
- At first your child may sleep more during the day but you should wake them every hour.
- Limiting screen sessions to 30 minutes, 2 or 3 times a day, helps to reduce symptoms. This includes TV, games consoles and mobile phones.
- As your child recovers, make sure that they avoid strenuous activity for the next 2 to 3 days or until their symptoms have settled.
- Avoid contact sport (such as rugby or football) for at least 3 weeks.
- Allow your child to return to school when you feel that they have recovered.

You know your child best. If you are concerned about them, you should seek further advice from your GP or NHS 111.

Further information

FA Concussion Guidelines

Website: www.thefa.com/get-involved/fa-concussion-guidelines-if-in-doubt-sit-them-out

England Rugby

Enter 'England Rugby concussion guidelines' in your internet search box. Select **Final Headcase Extended Guide Feb 2021** from the search results.

NHS UK

Website: www.nhs.uk/conditions/head-injury-and-concussion/

Headway

Website: www.headway.org.uk/about-brain-injury/individuals/types-of-brain-injury/mild-head-injury-and-concussion/

NICE guidelines

www.nice.org.uk/guidance/cg176/resources/head-injury-suggested-written-discharge-advice-pdf-191717245

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Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation

* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84: 379-85



<https://aqua.nhs.uk/resources/shared-decision-making-case-studies/>