

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 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 they:

- become unconscious (call an ambulance on 000)
- become 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 seeing normally
- vomit frequently
- bleed from the ear
- has a watery discharge in the ears or nose.

Follow-up

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

- irritability
- mood swings
- tiredness
- 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 gaming 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 symptom free, they can move up to the next stage.

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

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

Children with significant head injury should be directed to this AMA/AIS website, in particular their return to Sport protocol for children, which has a more prolonged period before return to sport:

<https://concussioninsport.gov.au/resources>.

This document can be made available in alternative formats on request for a person with a disability.

Child and Adolescent Health Service
15 Hospital Avenue, Nedlands, WA, 6009
Telephone: (08) 6456 2222
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