Head Injury

Information for Parents and/or caregivers

Welcome to the Southern Adelaide Local Health Network.

This information sheet aims to answer any questions you may have about your child sustaining a head injury.

Head injury – general advice

Children often bump or bang their heads, and it can be difficult to tell whether an injury is serious or not. Any knock to the head is considered a head injury.

Head injuries are classified as mild, moderate or severe. Many head injuries are mild, and simply result in a small lump or bruise. Mild head injuries can be managed at home, but if your child has received a moderate or severe injury to the head, they need to see a doctor.

Seek help immediately by calling an ambulance if:

- your child has had a head injury involving high speeds or heights greater than a metre, for example, car crashes, high-speed skateboard accidents or falling from playground equipment
- your child loses consciousness (passes out)
- your child seems unwell and vomits more than once after hitting their head.

Glossary of head injury terms:

- Concussion a mild traumatic brain injury that alters the way the brain functions. Effects of concussion are usually temporary, but can include altered levels of consciousness, headaches, confusion, dizziness, memory loss of events surrounding the injury, and visual disturbance.
- Loss of consciousness when a person is unable to open their eyes, speak or follow commands. They have no awareness of stimulation from outside their body and cannot remember the immediate periods before and after the injury.

Signs and symptoms of head injury

The symptoms experienced straight after a head injury are used to determine how serious the injury is. The information below is a guideline.

Moderate to severe head injury

If your child has a moderate or severe head injury, they may:

- lose consciousness
- be drowsy and not respond to your voice
- be dazed or shocked
- not cry straight after the knock to the head (younger children)
- be confused, have memory loss or loss of orientation about place, time or the people around them
- experience visual disturbance
- have unequally sized pupils or weakness in their arm or leg
- have something stuck in their head, or a cut causing bleeding that is difficult to stop, or a large bump or bruise on their head
- have a seizure, convulsion or fit
- vomit more than once.

You should call an ambulance immediately if your child has a moderate or severe head injury.

Mild head injury

A mild head injury or concussion is when your child:

- may display altered level of consciousness at the time of the injury
- is now alert and interacts with you
- may have vomited, but only once
- may have bruises or cuts on their head
- is otherwise normal

You should seek medical advice if your child has any of the above symptoms of mild head injury, and you are worried about them. Otherwise, continue to observe your child for any of the signs and symptoms listed under care at home.

Care at home

Children and adolescents with concussion can take up to four weeks to recover, but most concussions will get better on their own over several days. Following a mild head injury, your child will need to get plenty of rest and sleep, particularly in the first 24 to 48 hours.

Your child may have a headache after a head injury. Give them paracetamol (not ibuprofen or aspirin) every six hours if needed to relieve pain.

There is no need to wake your child during the night unless you have been advised to do so by a doctor.

Call an ambulance immediately if you have any difficulty waking your child.

Children who have had a head injury may develop symptoms at various times. Some of the symptoms may begin minutes or hours after the initial injury, while others may take days or weeks to show up.

If your child experiences any of the following symptoms, take them to the doctor or nearest hospital emergency department immediately:

- vomiting more than once
- bleeding or any discharge from the ear or nose
- fits/seizures/twitching/convulsions
- blurred or double vision
- poor coordination or clumsiness
- any new arm or leg weakness, or any existing weakness that gets worse or does not improve
- difficulty swallowing or coughing when eating or drinking
- sensitivity to noise
- slurred or unclear speech
- unusual or confused behaviour
- severe or persistent headache that is not relieved by paracetamol.

If your child has had a head injury, they should return to school and sport gradually. For moderate to severe head injuries, your doctor will advise you.

Cognitive fatigue

Cognitive fatigue is a common problem that can happen after a head injury. When a child has cognitive fatigue, it means their brain has to work harder to concentrate on tasks it used to be able to do easily, for example watching TV, playing computer games, or having a long conversation. Cognitive fatigue is not related to a child's intellectual capacity or physical energy levels. It can lead to behavioural problems, mood swings and educational difficulties.

Your child may experience some or all of the following symptoms of cognitive fatigue:

- slowness when thinking, understanding and responding to questions or commands
- problems concentrating
- difficulties with memory
- difficulty thinking of the right words to say
- being more demanding than usual, and become easily frustrated
- being more fearful and anxious
- changed sleep patterns
- mood swings and irritability

If your child's cognitive performance or behaviour is very different to normal, or it is getting worse, take them back to the doctor or your nearest hospital emergency department.

Children experiencing cognitive fatigue should have complete rest – for their brain and body. This means no watching TV or playing on mobile electronic devices. Allow your child to gradually return to reading and other activities that require periods of greater concentration or thinking.

Prevention measures to reduce the impact of a head injury

- Helmets for heads
- Insist on helmets when on bikes, roller blades, skateboards or horses.
- Buckle up
- Use appropriate car seats/safety restraints to Australian Safety Design Standards.
- Watch that toddler
- Beware of steps or other unguarded heights. Do not use baby walkers.
- Road awareness
- DO NOT LET children near roads without supervision.
- Watch for children when driving.
- Ask your doctor to advise when its safe for your child to return to sport
- Limit electronic activity such as texting, gaming etc for 48 hours post head injury

Key points to remember

- Head injuries can be mild, moderate or severe.
- Call an ambulance if your child has had head injury involving high speeds or heights, or if after a knock to the head they lose consciousness or vomit more than once.
- Your child may develop a number of different symptoms in the weeks after a head injury. Many of these require immediate medical attention.
- Children with cognitive fatigue need complete rest to recover.

For More information

See your family doctor For 24 hour health advice call – Health Direct 1800 022 222 Parent helpline 1300 364 100 Local emergency department

Adapted from:

Head injury – general advice: kids health information fact sheet. Royal children's hospital Melbourne 2018

Patient information: Head injury in children and adolescents (Beyond the Basics) Uptodate 2018

Patient information: Head injury in children and adolescents (The Basics) UptoDate 2018

For more information

Paediatric Unit

Women's and Children's Division Flinders Medical Centre Bedford Park SA 5042 Telephone: 08 8204 5511 www.sahealth.sa.gov.au/fmc



© Department for Health and Wellbeing, Government of South Australia. All rights reserved. Reviewed January 2023. Next review January 2025.

