

Head Injury (Children)

Patient Information

Urgent Treatment Centre



The Patient Information Leaflets page on the Trust website is available on the link:
<https://www.wwl.nhs.uk/patient-information-leaflets> or scan the QR code.

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Section 1

After a bad bang to the head, you may expect to see some of the following features in the first 24 hours; your child may:

- Look pale.
- Be quieter than usual.
- Be more upset or frightened.
- Have a headache or some pain in the area that they have banged their head.
- Not feel hungry.
- Vomit (be sick) once or twice.
- Be sleepy. NB: it is very important to make sure that this is normal sleep, and your child wakens normally when roused.

If your child is not tolerating diet/fluids for 24 hours after the head injury, then your child needs to be brought to the Accident & Emergency Department of a hospital. Whilst in hospital, your child will need special observations done - neurological observations – to check their condition and look out for early signs of any problems developing, for example:

- Bleeding inside the skull.
- Swelling of the brain.
- Raised pressure in the skull.

It is important to note these problems are very rare, but they can occur, and that is why the neurological observations are taken and recorded every hour, including through the night.

The nurse will check your child's:

- Level of consciousness.
- Reaction of the pupils by shining a light into their eyes.
- Movement of all the limbs and body.
- Strength in the arms and legs.
- Pulse, breathing, temperature and blood pressure.
- Oxygen level in the blood, by shining a special light through a finger or toe, using a sensor shaped like a very soft peg.
- Response to commands, questions, and general conversation.

You can be very helpful, as you know your child better than anyone else, by observing their behaviour and reporting anything that does not seem right.

Section 2

We will be looking out for developing symptoms:

- Increasing headache; we will need you to help us complete a 'pain assessment' form to monitor how bad the headache is.
- Excessive vomiting (being sick).
- Fits, blackouts, loss of consciousness.
- Difficulty in hearing, speech, seeing, feeling.
- Numbness.
- Increasing drowsiness and difficulty in waking properly.
- Abnormal movements.

Most of the effects of the head injury will settle down within the first 24 hours. If your child seems well and is improving, then do not worry.

If any of the 'developing symptoms' occur, then immediate medical attention must be sought.

Discharge from the Urgent Treatment Centre

Your child has been discharged from the Urgent Treatment Centre, as it is felt that no further effects are likely to happen. Very rarely things can still go wrong, so it is important that you follow the points listed below:

- Observe for any signs in section 1 or 2. If the symptoms last longer than 24 hours, become worse, or your child is generally becoming more unwell, take him/her to the nearest A & E department.
- Give paracetamol for pain relief.
- If your child is usually on medication, this should be continued unless otherwise advised.
- After 48 hours – if there are any problems, contact your GP or nearest Emergency Department, Urgent Treatment Centre, or NHS Direct.
- When your child can return to school will depend on how bad the injury was. Most children can return to school within a day or two, but after a bad injury, this may be longer. They should be allowed to play as normal, but playing computer games may induce headaches. If you are unsure about these issues, please discuss with medical staff.

Comments, Compliments or Complaints

The Patient Relations/Patient Advice and Liaison Service (PALS) Department provides confidential on the spot advice, information and support to patients, relatives, friends, and carers.

Contact Us

Tel: 01942 822376 (Monday to Friday 9am until 4pm)

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Ask 3 Questions

Become more involved in decisions about your healthcare. You may be asked to make choices about your treatment. To begin with, try to make sure you get the answers to three key questions:

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



How We Use Your Information

For details on how we collect, use, and store the information we hold about you, please see patient information leaflet, Ref. **Corp 006** How we use your information, this can be found on the Patient Information Leaflets page on the Trust website, see details on the front cover.

This leaflet is also available in audio, large print, Braille, and other languages upon request. For more information, please ask in the department/ward.

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