



Pediatric Associates of NYC

Midtown Manhattan • Park Slope, Brooklyn • Long Island City, Queens

Head Trauma

Head Injury Overview

Head injuries occur commonly in childhood and adolescence. Most head injuries are mild and not associated with brain injury or long-term complications.

Head Injury Monitoring

Children with any of the following symptoms should be evaluated by a healthcare provider since these symptoms may indicate a higher risk of complications.

- If the child has recurrent vomiting
- If the child has a seizure (convulsion)
- If the child loses consciousness after the injury
- If the child develops a headache that is severe or worsens with time
- If there are changes in the child's behavior (eg, lethargic, difficult to wake, extremely irritable, or exhibiting other abnormal behavior)
- If the child stumbles, or difficulty walking, clumsiness, or lack of coordination
- If the child is confused or has slurred speech
- If the child has dizziness that does not resolve or recurs repeatedly
- If blood or watery fluid oozes from the nose or ears
- If the parent/caregiver is concerned about how the child is acting
- If your child develops a stiff neck
- If your child has weakness or numbness involving any part of their body

Head Injury Treatment at Home

Rest—Encourage the child to lie down or choose a quiet activity. Allow the child to sleep if desired. It is not dangerous to sleep after a minor head injury (especially if it is nap time), although the parent should monitor the child, especially during the first 4-6 hours after the injury.

A mild headache, nausea, and dizziness are common, especially during the first few hours after the injury.

Swelling—Swelling (a large lump or "goose egg") is also common after a head injury. To reduce swelling an ice or a cold pack can be applied to the area for 20 minutes.

Swelling usually begins to improve within a few hours, but may take one week to completely resolve.

Pain—Acetaminophen (eg Tylenol®) may be given for a headache. If the child's headache is severe or worsens, the child should be evaluated by a healthcare provider.

Waking from sleep—It is not usually necessary to wake the child/adolescent from sleep after a minor head injury. If the healthcare provider recommends waking the child, he or she should be able to wake up and recognize his or her surroundings and parent/caretaker.