INSTRUCTION SHEET: HEAD INJURY

The Student Health Provider has diagnosed a mild head injury. Presently, there is no sign of a serious head injury (injury to the brain).

Be aware, however, that a delayed internal head injury could occur. Chances of a serious delayed injury are very small, but if one occurs, it must be treated immediately!

The routine treatment of a mild head injury is to send a patient home for close observation. A responsible person must stay with the patient to detect any signs of delayed injury. Helper observation is essential during at least the first 24 hours, when a delayed injury is most likely to occur.

After any blow to the head, a patient may have symptoms such as mild headache, dizziness, fatigue, nausea, and perhaps an isolated episode of vomiting. Mild symptoms such as these are to be expected, and are not cause for alarm. These symptoms can last several days, and should be treated symptomatically.

MEASURES YOU SHOULD TAKE TO TREAT YOUR HEAD INJURY:

1. Rest at home! Minimize activity. Allow your body time to recover.
2. A cold pack applied to the injured area off-and-on for the first 48 hours helps relieve discomfort.
3. Over-the-counter pain Acetaminophen (Tylenol) can relieve discomfort associated with a head injury. Take stronger pain medications only if recommended or prescribed for this injury.
4. Eat lightly. Begin with liquids. If liquids are tolerated, advance to soups and soft solids. Drink NO alcoholic beverages.
5. It is perfectly okay to sleep after a head injury. However, the patient must be awakened by the person watching him/her every 1 to 2 hours the first 12 hours after an injury. The helper should make sure the patient responds appropriately to gentle awakening. There is no need to get the patient up and walking about every time he/she is awakened.
6. MOST IMPORTANTLY, WATCH FOR ANY SIGNS OF WORSENING. IN GENERAL, COMMON SENSE WILL ALERT THE PATIENT OR THE PERSON WATCHING THE PATIENT OF ANY SIGNIFICANT CHANGE. Specific signs to watch for include: severe headache, inappropriate drowsiness, repeated vomiting, seizure, inappropriate behavior (confusion, “just not acting right”), markedly stiff neck, fever, bloody or clear drainage from the nose or ears, numbness in arms or legs, inability to move arms or legs, slurring of speech, or inability to be awakened normally. IF ANY OF THESE SIGNS AND SYMPTOMS OCCUR, GO IMMEDIATELY TO THE NEAREST EMERGENCY DEPARTMENT.
7. Make a follow-up appointment with your personal/referral provider or return to the Student Health Center as directed. Your provider can follow your progress, and treat or evaluate any persistent symptoms if they occur.