

EMERGENCY AND HOME CARE
FOR POTENTIAL HEAD INJURY/CONCUSSION

You should call 9-1-1 immediately if your child:

- *Has a seizure or convulsion, or has persistent vomiting*
- *Becomes confused while thinking or speaking, or has slurred speech*
- *Is not moving neck or arms and legs in a normal manner*
- *Has severe head pain, dilated pupils, or cannot be woken up or roused*
- *Has rapid and significant physical, cognitive, emotional and sleep/energy symptoms*

You should contact your medical provider, an Urgent Care Facility or an Emergency Room if:

- *The wound continues to bleed or gapes open*
- *Headache worsens or does not improve over three (3) days, or neck pain or stiffness develops*
- *Your child has changes in school performance (i.e., difficulty concentrating or remembering, increased fatigue and/or headaches throughout the school day)*
- *Your child sleeps constantly or develops trouble sleeping*
- *Blurred vision or dizziness develops, or you observe unsteady walking*
- *Your child displays unusual emotions, such as increased irritability, sadness, or frustration*
- *Vomiting occurs three (3) or more times*
- *A discharge of blood and/or clear fluid develops from the nose or ear*

Home Care:

- *You may apply ice to the injury to decrease swelling*
- *Insist on adequate rest (no TV, computer, video games, texting, etc.)*
- *Do not give NSAIDS (aspirin, ibuprofen, naproxen) unless directed to do so by a physician*
- *Tylenol (acetaminophen) is not an NSAID, and can be given for mild headache according to manufacturer's instructions*
- *Pay attention and report any symptoms that might develop over the next 48-72 hours to your medical provider*
- *If you have ANY questions or concerns, call your child's medical provider*