

HEAD INJURY

TO YOUR HEALTH - PATIENT EDUCATION HANDOUT

3.5

DESCRIPTION

Injury to the head, with or without unconsciousness or other visible signs. Head wounds may be “open” or “closed” depending on the nature of the injury.

FREQUENT SIGNS AND SYMPTOMS

Depends on the extent of injury. The presence or absence of swelling at the injury site is not related to the seriousness of injury. Signs and symptoms include any or all of the following:

- Drowsiness or confusion
- Vomiting and nausea
- Blurred vision
- Pupils of different size
- Loss of consciousness either temporarily or for long periods
- Amnesia or memory lapses
- Irritability
- Headache
- Bleeding of the scalp

CAUSES

The worst head injuries usually result from motor-vehicle accidents or falls.

RISK INCREASES WITH

- Excess alcohol consumption
- Contact sports, especially football or boxing
- Seizure disorders
- Bicycle or motorcycle riding without a helmet

PREVENTIVE MEASURES

Don't drink or use mind-altering drugs and drive. Wear protective headgear for contact sports and cycling. Always use your auto seat belt. Place young children in approved safety car seats.

EXPECTED OUTCOME

Usually curable with early recognition of danger signs and medical treatment. Complications can be life-threatening or cause permanent disability.

POSSIBLE COMPLICATIONS

Bleeding under the skull (subdural hemorrhage and hematoma). Bleeding into the brain.

Student Health Center

WWW.SIU.EDU/~SHC

This information is for educational purposes only. Consult your doctor for specific medical advice, diagnosis and treatment.

GENERAL MEASURES

Hospitalization for observation, if signs and symptoms are severe. Diagnostic tests may include laboratory studies of blood and cerebrospinal fluid, X-rays of the skull and neck and CT scan of the head. The extent of injury can be determined only with careful examination and observation. After a doctor's examination, the injured person may be sent home, but a responsible person must stay with the person and watch for serious symptoms. The first 24 hours after injury are critical, although serious after-effects can appear later (up to 6 months after the injury). If you are watching the patient, awaken him or her every 2 hours for 24 hours or as recommended. Report to the doctor immediately if you can't awaken or arouse the person. Report also any of the following:

- Vomiting
- Inability to move arms and legs equally well on both sides.
- Temperature above 100°F (37.8°C)
- Stiff neck
- Pupils of unequal size or shape
- Convulsions
- Noticeable restlessness
- Loss of coordination
- Confusion or disorientation
- Signs of infection in an open head wound
- Headache that gets worse or does not go away
- Slurred speech

MEDICATION

Don't give any medicine including non-prescription acetaminophen or aspirin until the diagnosis is certain.

ACTIVITY & DIET

The patient should rest in bed until the danger is over. Normal activity may then be resumed as symptoms improve. Liquid diet if directed by your physician.

NOTIFY OUR OFFICE IF...

After an injury, you observe any of the symptoms discussed in General Measures.

References: Griffith's Instructions for Patients, 7th Edition
www.nlm.nih.gov/medlineplus/headandbraininjuries.html



618-453-3311

Dial-A-Nurse is available after-hours until 10:30 p.m. during fall and spring semesters. In case of emergency dial 911.