

# Kids — Concussions and Head Injuries



## What is a concussion?

A concussion is a brain injury caused by an impact or hit (also called a direct blow) to the head, face or neck. A concussion can also be caused by a blow to the body that sends a force to the head, causing the brain to move within the skull. Your child can have a concussion even if they don't pass out (lose consciousness). Your child's doctor can diagnose a concussion based on the signs and symptoms. Medical imaging tests such as x-rays, CT scans, or MRI scans usually can't diagnose a concussion. More info at [www.recoverconcussion.ca](http://www.recoverconcussion.ca)

A concussion may be called a minor head trauma or minor brain injury. It may also be called a head injury or a mild traumatic brain injury. A simple hit to the head without any of these signs or symptoms is **not** a concussion.

## What are the symptoms of a concussion?

Symptoms of a concussion include:

- a headache
- dizziness
- nausea or vomiting
- being sleepy (drowsy)
- having a hard time waking up, falling asleep, or staying asleep
- having a hard time concentrating, paying attention, or remembering
- being anxious, depressed or cranky (irritable)

These symptoms will usually last for 7 to 10 days. Most children and teens will stop showing signs and symptoms and fully recover by 1 month. If your child has had a concussion before or gets migraines, it may take longer for them to recover.

## How can I care for my child as they recover?

The following tips will help you care for your child as they recover from a concussion

- Give your child prescription medicines as directed by your child's healthcare provider
- You can give your child over-the-counter pain medicine (ibuprofen such as Advil or Motrin or acetaminophen such as Tylenol) for the first few days.
  - Follow the instructions on the bottle for the dose your child needs.
  - Don't give your child ibuprofen or acetaminophen regularly for more than 2 weeks as it may lead to headaches caused by the pain medicine (called rebound headaches).
- Make sure your child eats and drinks normally and that they are drinking enough water.
- Don't give your child any caffeine from coffee, tea, chocolate, carbonated drinks, energy drinks, and some over-the-counter medicines for 4 to 6 hours before bedtime.
- Don't let your child drive for the first 2 days (if your child has a driver's license)
- Warn your teen that they should not drink alcohol or take recreational drugs, including cannabis (marijuana), as those drugs may hide signs and symptoms of a concussion. They may also make your child feel worse, or delay their recovery.
- Follow the Return to School and Return to Sport steps to return to activities safely.
- Follow a bedtime and wake-up routine.
  - Go to bed at the same time and wake up at the same time each day.
  - Do something relaxing before bed, such as taking a warm bath about 1 hour before bed.
  - Limit naps to 1 a day and nap before 3 p.m., for no longer than 30 minutes, and in a bed (not in front of a TV).
  - Don't let your child have screen time (computer and cell phone time including video games, texting, and reading online) for at least 30 minutes before bed.

## When to get emergency care



Even if your child has already been seen by a doctor and you know the child has a concussion, go to your nearest emergency department right away if your child has any of these symptoms:

- a headache that gets worse after taking headache medicine and vomiting or waking up at night
- sudden weakness in the arms or legs
- gets more cranky, confused or doesn't act normal
- sleeps a lot or you have a hard time waking them up
- vomiting that won't stop
- slurred speech
- trouble seeing or complains that things look blurry
- has a very hard time walking, moving their arms and legs, or talking
- seizures

## Make sure your child rests for the first 1 to 2 days

Your child should stay home from school or daycare and avoid physical activity for the first 1 to 2 days to let the brain heal and prevent another concussion. Rest and avoiding another injury to the head are the most important immediate treatments for a concussion.

Rest means your child's physical activity is limited to walking and light exercise that doesn't cause them to sweat. Rest activities will depend on your child's age and can include:

- crafts
- colouring
- board games
- puzzles
- being read a story
- light reading
- watching TV with the lights and the surround sound off

## Returning to normal activities

If your child seems to be doing well after 1 to 2 days of rest, they can start doing more activity, using the steps in Concussion in Children: Returning to School and Sport. Your child should start working on these steps **within 5 days** of the concussion

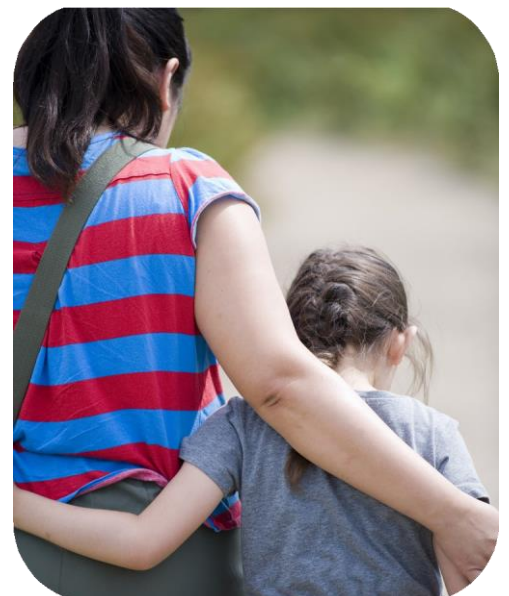
**For 24/7 nurse advice and general health information, call Health Link at 811, Or visit [www.recoverconcussion.ca](http://www.recoverconcussion.ca)**



## Supporting your child

Children often display mood changes and anxiety during recovery from a brain injury. Many children worry about failing at school or not being active. Worrying may make symptoms worse or prolong recovery. Let your child know that having these feelings is normal and offer encouragement and support. Some children may need support from a counsellor.

**If your child is not better after 4 weeks, talk to your healthcare provider and ask for a referral to a pediatrician (a doctor who specializes in children's health), a concussion specialist, or a neurologist.**



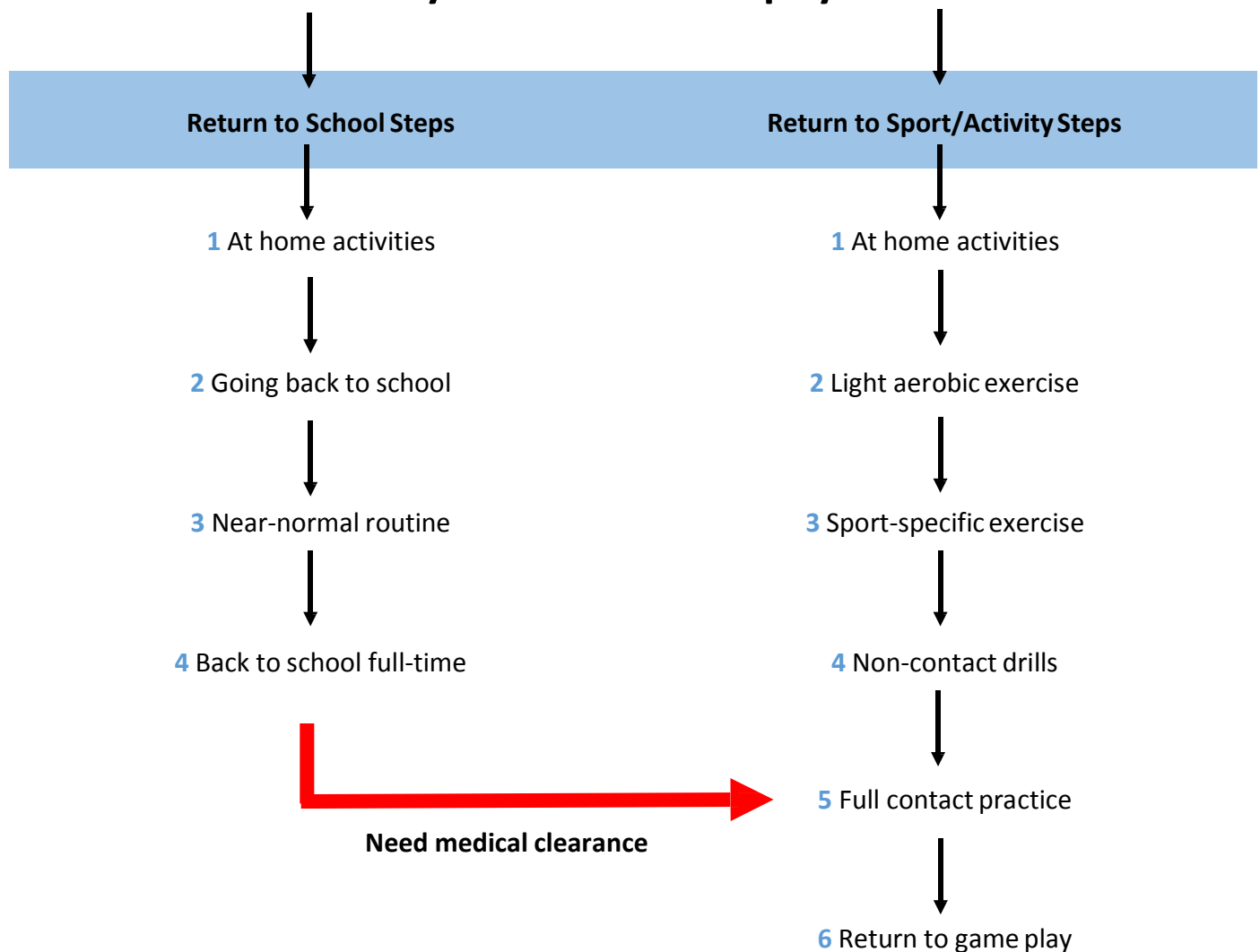
# Concussions in Children: Returning to School and Sport

Go through the following steps to help your child return to school and sport. Your child will be ready to move on to the next step when they can do the activities and handle their symptoms well. If your child has trouble handling symptoms, do the activity in the step for less time or go back to the previous step until they are ready to move to the next step. Your child can begin the Return to Sport steps at the same time they begin the Return to School steps.

Give your child support and encouragement through their recovery and as they work through these steps. Make sure your child doesn't work through the steps too quickly and takes rest breaks when they need to. If your child is not better after 4 weeks or isn't ready to move on to the next step after 1 to 2 weeks, talk to your healthcare provider and ask for a referral to a pediatrician (a doctor who specializes in children's health), a concussion specialist, or a neurologist.



## 1 to 2 days of mental and physical rest



For more info visit

[www.recoverconcussion.ca](http://www.recoverconcussion.ca)

# Return to school

Getting your child back to school will help them get back to doing regular activities again. It may take your child a few days or up to 2 weeks to finish the steps of returning to school full-time.

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<b>Step 1</b>	<b>Start at home activities</b> <ul style="list-style-type: none"><li>• After 1 to 2 days of rest, start at home activities before your child goes back to school.</li><li>• Limit screen time and cell phone use to 15 to 20 minutes at a time.</li><li>• Start doing gentle activities such as walking and light reading.</li><li>• Do homework in 2 sessions for 15 to 20 minutes each and with a 15 minute break between sessions.</li></ul>
<b>Step 2</b>	<b>Going back to school</b> <ul style="list-style-type: none"><li>• Go to bed at a regular time and get 8 to 10 hours of sleep each night (including weekends).</li><li>• Start going to school for half days and work up to a full day of classes.</li><li>• Have your child go to less stressful classes to start and avoid those that take more effort (such as art class) until they feel better.</li><li>• Talk to your child’s teacher about making some temporary changes to help them adjust to school such as:<ul style="list-style-type: none"><li>○ No exams during the first 2 weeks</li><li>○ Sitting in front of the class so there are less distractions</li><li>○ Having a quiet space in school to relax for 20 to 30 minutes</li></ul></li><li>• Take your child to and from school or arrange rides for them so they don’t have to spend as much time walking to and from school, taking the bus, and carrying heavy books and other items.</li></ul>
<b>Step 3</b>	<b>Near-normal routine</b> <ul style="list-style-type: none"><li>• Limit your child to a 30 minute nap a day, if needed.</li><li>• Limit homework to 2 sessions for 30 minutes each and with 15 minute breaks between sessions.</li><li>• Your child is back to full days of school on most or all days of the week.</li><li>• Your child goes to all classes, takes the bus, and is carrying their books.</li><li>• Your child takes regular exams, sits in their normal spot in class, and needs fewer rest breaks in a quiet space.</li></ul>
<b>Step 4</b>	<b>Back to school full-time</b> <ul style="list-style-type: none"><li>• Your child is back to a normal, full workload at school, including taking all exams.</li><li>• Your child may also be ready to return to full contact practice and game play if they are at step 4 of Return to Sport. Talk to your child’s healthcare provider to see if they can have medical clearance to return to full contact practice and game play.</li></ul>

# Return to sport

Your child can begin the Return to Sport steps at the same time they begin the Return to School steps. Your child will be ready to move on to the next Return to Sport step when they are able to do the activities and handle their symptoms well. Spend at least 1 day on each of the Return to Sport steps.

It's important that your child has gone back to school full-time before you ask their healthcare provider to give them medical clearance for full contact practice and game play.

If your child is part of a high-level organized sport, talk to a sports medicine doctor before they return to regular sports activities.

<b>Step 1</b>	<b>Start at home activities</b> <ul style="list-style-type: none"><li>After 1 to 2 days of rest, your child can start doing regular day-to-day activities, such as reading, texting and having screen time, as well as light walking, as long as their symptoms don't get worse. They can start doing 5 to 15 minutes at a time and slowly start doing them for more time.</li></ul>
<b>Step 2</b>	<b>Light aerobic exercise</b> <ul style="list-style-type: none"><li>Light aerobic activities will depend on the age of your child and may include walking, light jogging, or cycling on a stationary bike.</li><li>Your child should do 10 to 15 minutes at most of light aerobic exercise, twice a day. Check with your child's healthcare provider if you don't know which activities are okay for your child to do.</li><li>Your child should not do resistance training or lift weights, any activity with head or body contact, or dives, jumps, high-speed stops, spins, or other fast changes in movement.</li></ul>
<b>Step 3</b>	<b>Sport-specific training and exercise</b> <ul style="list-style-type: none"><li>Do 20 to 30 minutes at most of general conditioning exercise such as running, throwing, or kicking a ball, twice a day.</li><li>Avoid any activities where you could collide (crash into objects or other people) or activities where there is risk of another impact to the head.</li></ul>
<b>Step 4</b>	<b>Drills with no contact</b> <ul style="list-style-type: none"><li>Do activities with a teammate.</li><li>Avoid contact drills such as checking, heading the ball, tackling, or live scrimmages.</li><li>Your child can start resistance training and working on basic skills for their sport.</li><li>Once your child feels good doing basic skills, they can start to do harder skills for their sport and work up to participating in gym class or a full team practice.</li></ul>
<b>Step 5</b>	<b>Medical clearance for full contact</b> <ul style="list-style-type: none"><li><b>Get medical clearance</b> from a healthcare provider experienced with treating concussions before your child starts to do full contact play in their sport.</li></ul>
<b>Step 6</b>	<b>Full contact training and game play</b> <ul style="list-style-type: none"><li>Start with scrimmages with teammates and work up to regular competitive games.</li></ul>

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