



Head injuries

When there is a head injury it is important to look for signs of serious injury.

Concussion

The brain is free to move a little within the skull and can thus be 'shaken' by a blow to the head. This shaking is called concussion.

Recognition

- Brief period of impaired consciousness following a blow to the head.

There may also be:

- Dizziness or nausea on recovery
- Loss of memory of events at the time of, or immediately preceding, the injury
- Mild, generalised headache

Your aims:

- To ensure the individual recovers fully and safely
- To place the individual in the care of a responsible person
- To obtain medical aid if necessary

Treatment:

- Check the individual's level of response using the AVPU code:
 - A – Are they alert, eyes open and responding to questions?
 - V - Does the individual respond to voice, obey simple commands?
 - P - Does the individual respond to pain (e.g. eyes open or movement in response to being pinched)?
 - U - Is the individual unresponsive?
- Regularly monitor and record vital signs - level of response, breathing and pulse. Even if the individual appears to recover fully, watch them for any deterioration in their level of response
- When the individual has recovered, place them in the care of a responsible person. If an individual has been injured on the sports field, never allow them to 'play on' without first obtaining medical advice
- Advise the individual to go to hospital, if following a blow to the head they develop symptoms such as headache, vomiting, confusion, drowsiness or double vision

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If the individual does not recover fully, or if there is a deteriorating level of response after an initial recovery dial 999 for an ambulance.

Cerebral compression

Compression of the brain – a condition called cerebral compression – is very serious and almost invariably requires surgery. Cerebral compression occurs when there is a build-up of pressure on the brain. This pressure may be due to one of several different causes, such as an accumulation of blood within the skull or swelling of injured brain tissues.

Recognition

- Deteriorating level of response – casualty may become unconscious.

There may also be:

- history of a recent head injury
- intense headache
- noisy breathing, becoming slow
- slow, yet full and strong pulse
- unequal pupil size
- weakness and/or paralysis down one side of the face of body
- high temperature; flushed face
- drowsiness
- noticeable change in personality or behaviour, such as irritability or disorientation.

Your aim

- To arrange urgent removal of the casualty to hospital.
- Dial 999 for an ambulance.**

If the casualty is conscious:

- keep them supported in a comfortable resting position and reassure them
- regularly monitor and record vital signs – level of response, pulse, and breathing – until medical help arrives

If the casualty is unconscious:

- Open the airway using the jaw thrust method and check breathing (primary survey)
- Be prepared to give chest compressions and rescue breaths if necessary
- If the casualty is breathing, try to maintain the airway in the position the casualty was found

Skull fracture

If an individual has a head wound, be alert for a possible skull fracture. An affected individual may have impaired consciousness.

A skull fracture is serious because there is a risk that the brain may be damaged either directly by fractured bone from the skull or by bleeding inside the skull. Clear fluid (cerebrospinal fluid) or watery blood leaking from the ear or nose are signs of serious injury.

Suspect a skull fracture in any individual who has received a head injury resulting in impaired consciousness. Bear in mind that a casualty with a possible skull fracture may also have a neck (spinal) injury and should be treated accordingly.

Recognition

- Wound or bruise on the head
- Soft area or depression on the scalp
- Bruising or swelling behind one ear
- Bruising around one or both eyes
- Clear fluid or watery blood coming from the nose or an ear
- Blood in the white of the eye
- Distortion or lack of symmetry of the head or face
- Progressive deterioration in the level of response.

Aims:

- To maintain an open airway
- To arrange urgent removal of the individual to hospital.

If the individual is conscious:

- Help them to lie down
- Do not turn the head in case there is a neck injury
- Control any bleeding from the scalp by applying pressure around the wound
- Look for and treat any other injuries
- Dial 999 for an ambulance
- If there is discharge from an ear, cover the ear with a sterile dressing or clean pad, lightly secured with a bandage. Do not plug the ear
- Monitor and record vital signs – level of response, pulse, and breathing – until medical help arrives.

If the individual is unconscious:

- Open the airway using the jaw thrust method and check for breathing (primary survey)
- Be prepared to give chest compressions and rescue breaths if needed
- Dial 999 for an ambulance and call parents**