Falls/Head Injuries

Part of being a child is having bumps and bruises. As a toddler, he/she is learning to walk and is naturally clumsy. As children age, they get involved in sports, learn to ride a bike and go out for recess at school. Injuries are part of life! Lacerations and broken bones are going to happen! We are here to help you make decisions on when to bring your child to the doctor.

What consists of a serious head injury?

A serious head injury is one that results in a significant blow to the brain that may result in a skull fracture or bleed in the brain. These injuries thankfully are rare and take a large amount of force. Skull fractures, for example are only 1% of all head injuries.

What types of falls are concerning?

We first look at the mechanism of injury. How far was the fall? What did the child fall onto? Falling from a couple of feet onto carpet or wood flooring is less likely to result in a serious head injury versus a fall from 6 feet onto concrete.

Next, what part of the head did the child fall on? The skull is thickest in the front and back on purpose. It is more concerning if a child lands on their temple regions versus the thicker portions of the skull.

What are signs or symptoms of a serious head injury?

Children who have a serious head injury display abnormal symptoms. You should be concerned if your child is hard to wake up or keep awake, acts or talks confused, has slurred speech, has weakness in the arms or legs, his/her walking is not steady, or has repetitive vomiting. If these symptoms occur, immediately seek help or call 911.

How long should I look for signs of a serious head injury?

It is extremely uncommon for a serious head injury to present after 8-12 hours. If your child suffered a bad fall, but is acting completely normal and is not displaying signs of a serious head injury, it is okay to just monitor. We recommend doing neurologic checks every 2 hours for the first 12 hours just to be safe. Neurologic checks simply means checking on your child to make sure he/she is acting normal. You only have to wake your child up at night if the injury was significant or you have concerns prior to sleep.

When does a child with a laceration need stitches?

Before you can evaluate a cut, you need to stop the bleeding! Even superficial cuts (especially on the face and scalp) can bleed a lot. Hold pressure on the wound until the bleeding stops. Even cuts that require stitches will stop bleeding with extended pressure.

Now it's time to evaluate your child's cut. Only the most significant cuts require stitches or glue. If the wound is deeper and the tissue is spread apart, it likely needs attention. Superficial cuts (think scratches or paper cuts) do not need stitches. Simply clean the wound well with soap and water. Cuts in the inside of the mouth usually do not require stitches and will heal without intervention.