

After Concussion, Return to Normality (ACoRN)

Expected signs of concussion

- Headache
- Fatigue
- Feeling sick
- Poor concentration
- Poor balance / coordination
- Sensitivity to light or noise



Please give regular pain relief for the next 24 hours and consider giving for up to 1 week. (For doses follow guidance on medicine packaging).

The traffic light system below gives a step by step guide on how to manage the expected signs of concussion detailed below.

- You can move forward to the next stage when you have been symptom free for 24 hours
- If symptoms re-appear then please move back to the previous stage to help relieve symptoms
- If symptoms become worse at any point, then please contact either your GP, NHS24 (111) or, if urgent care required, call 999.
- If you still have symptoms after 2 weeks, please see your own GP.

For return to sport, we recommend a minimum of 2 weeks rest. You can access this guidance from "If in doubt, sit them out" (or scan the QR code).



STOP and rest both body and mind

OK to try

- Board games
- Short telephone conversations
- Light crafts

Not yet

- No screen time (TV, computer games, mobile phones, tablets etc)
- No school
- No sports / physical play
- No reading

If no concussion signs for 24 hours, then please move to amber stage



REST, but preparing to move

OK to try

- Light reading
- Limited TV
- Short visits from friends
- 30 min of school work
- Short walks

Not yet

- No school yet
- Avoid computers and computer games
- No sports / physical play

If no concussion signs for 24 hours, then please move to the green stage. If signs return, go back to previous stage.



RETURNING to normal learning activities

OK to try

- Phased return to school (perhaps half days or 3-5 days attendance as tolerated)
- Phased return to homework: beginning at 30 minutes and increasing

Not yet

- No sports . physical play for 2 weeks post injury
- No tests / exams until full phased transition back to education
- No technical subjects (Home Economics / Technical / Science for 2 weeks)

Discuss with your child and agree when phased return to normality is completed. If this is taking more than 2 weeks, please see your own GP.

Information for parents and guardians after a Head Injury

Following a head injury an adult should supervise your child for the next 24 hours. They should also receive regular pain relief (for example, Paracetamol). If you are concerned that they are developing a problem, please telephone this Emergency Department and, if necessary, bring them back to hospital.

The signs that you should look out for are:

- If your child becomes unusually sleepy or is hard to wake up
- Headache all the time, which painkillers don't help.
- Repeated vomiting
- Weakness of arms or legs, e.g. unable to hold things
- Difficulty in seeing, walking, or acts clumsy and uncoordinated.
- Confusion (not knowing where they are, getting things muddled up).
- Fluid or blood coming from ear or nose.
- Fits (convulsions or seizures)
- Any other abnormal behaviour.

Allow your child to sleep as normal. We would encourage you to check on them a couple of times overnight to check:

- Do they appear to be breathing normally?
- Are they sleeping in a normal posture?
- Do they make the expected response when you rouse them gently? (E.g. pulling up sheets, cuddling teddy-bear)
- If you cannot satisfy yourself that your child is sleeping normally, then waken them fully to check.

If you have any concerns about any of the above please contact the Emergency Department.

The vast majority of children who receive this advice leaflet will not develop signs of concussion. However, if signs of concussion are apparent after the first 24 hours, please use the guidance overleaf.

For further advice, information and support around Childhood Acquired Brain Injury, please also contact the **Child Brain Injury Trust online at childbraininjurytrust.org.uk or via email: info@cbituk.org**

This leaflet only gives general information. You must always discuss the individual treatment of your child with the appropriate member of staff. Do not rely on this leaflet alone for information about your child's treatment. This information can be made available in other languages and formats if requested.

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Review Date: June 2024

PIAG: 260

