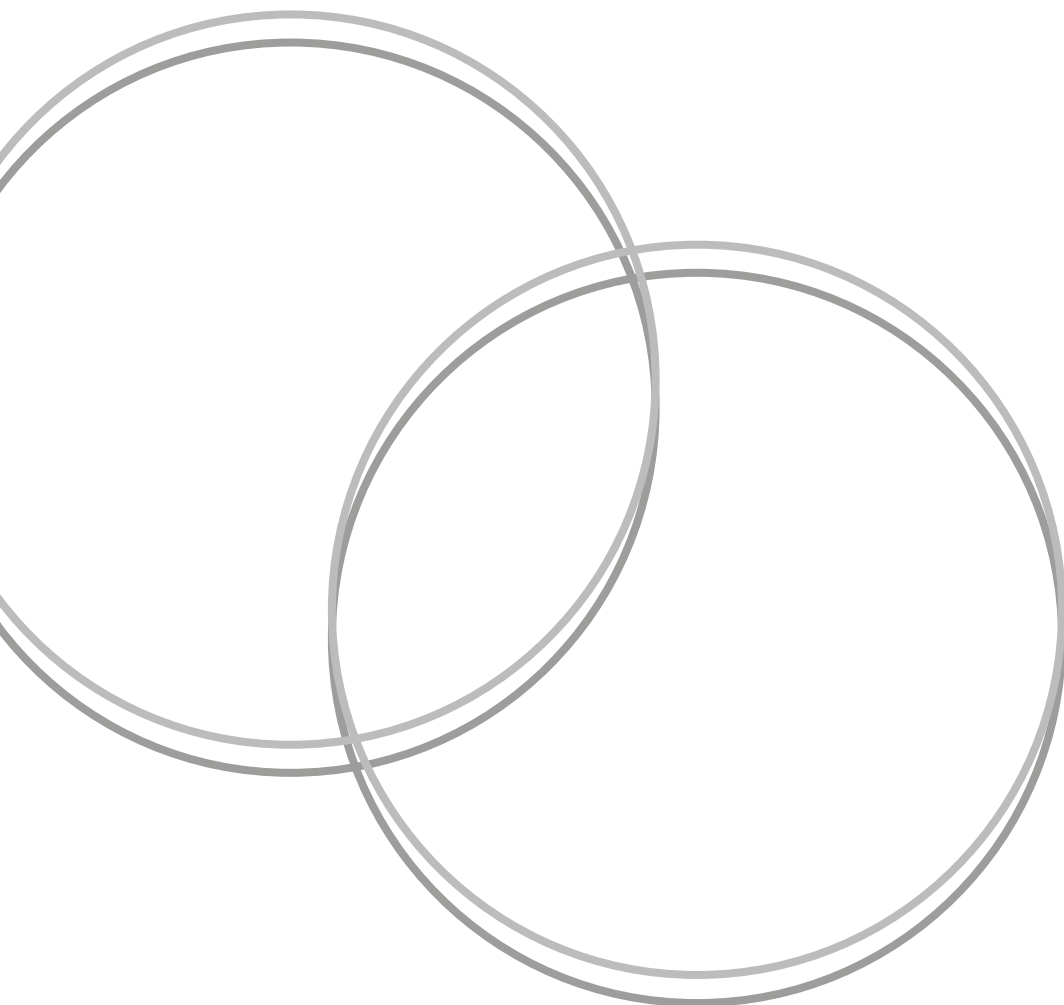


Advice after a head injury

Information for patients



Your doctor or nurse practitioner has examined you and is happy for you to go home. **However, for the first 24 hours at home you should have a responsible adult with you, who has read this information sheet.**

Most head injuries do not lead to serious complications. However, if you experience any of the following symptoms, you should go immediately to your nearest emergency department.

- severe or worsening headache (a mild headache is normal after a head injury)
- vomiting (being sick)
- confusion or feeling unusually sleepy
- fits (collapsing or passing out suddenly)
- any change to your eyesight
- dizziness or lack of co-ordination
- weakness in one or both of your arms or legs
- clear fluid or blood coming out of your ears or nose
- new deafness in one or both ears
- inability to remember what has happened (amnesia)

What you should not worry about

It is normal after a head injury to experience the following symptoms over the next few days.

- Mild headache. It is safe to take a painkiller such as paracetamol. (Please see the instructions on the packet for advice about how much to take and how often.)
- Feeling sick (without vomiting) or not feeling hungry. This can be helped by drinking clear fluids (such as water) and avoiding drinking alcohol.
- Difficulty concentrating.
- Feeling more tired, which might then make you irritable or anxious.

These symptoms should disappear over the next two weeks.

However, if they don't or you are concerned about how you are feeling, please see your GP.

General advice

If you follow this advice you should get better more quickly and may relieve some of your symptoms.

- Try to avoid stressful situations as these can make any symptoms worse.
- Do not return to your normal school, college or work activity until you feel you have completely recovered.
- You should not drive a motor vehicle or operate machinery for at least 24 hours after your accident.
- Do not work on a computer or play computer games until you have completely recovered, as spending time concentrating on images or text on a screen may make your symptoms worse.
- Your ability to tolerate alcohol is reduced after a head injury, so you should not drink alcohol until you are completely recovered.
- Do not play any contact sports for at least 3 weeks and without talking to your doctor first.

More information about head injuries can be found online at:

www.nhs.uk/conditions/head-injury-minor/Pages/Introduction.aspx

www.patient.co.uk/health/head-injury-instructions

Taking anti-coagulant medication after a head injury

If you have a head injury and are taking medication such as warfarin or direct oral anticoagulants (DOACs) you are at higher risk of having a sudden or delayed bleeding on the brain.

Your doctor will have carried out a risk assessment, weighing up the benefits of continuing your anticoagulant (with the risk of bleeding) and stopping the anticoagulant (with the risk of blood clots forming). After one week, the risks associated with head injuries return to normal.

You have been advised to:

☐

continue your anticoagulant

☐

stop your anticoagulant for one week

Long-term problems

Most people recover quickly from minor head injuries and experience no long-term problems.

However, please contact your GP if you:

- are still experiencing problems two weeks after your accident
- are concerned whether you are fit to drive a car or motorbike
- develop new problems after a few weeks or months They can make sure you are recovering properly

Concussion

Concussion is a temporary brain injury, which can be caused by a direct blow to the head, or by a blow to another part of the body that causes sudden jarring of the head. It can affect the normal functioning of the brain, but is not always caused by any physical damage to the brain itself.

This results in a certain signs and symptoms that start soon after the injury, but don't last long.

Please read the following signs and symptoms and follow the advised action. If the symptoms of concussion don't settle down after 1-2, weeks you should see your GP for a check-up.

The treatment of concussion follows four simple principles, called the **4R's: Recognise, Remove, Rest, Return.**

1. RECOGNISE

You do not need to have been 'knocked out' to have concussion.

Symptoms you may have:

- headache
- feeling dizzy
- ringing in the ears
- feeling sick
- difficulty concentrating
- blurred vision
- feeling dazed
- feeling 'not quite right'

Things you may notice:

- sleepiness
- poor concentration
- easily distracted
- feeling more emotional
- feeling 'slowed down'

2. REMOVE

You should avoid intense physical activities whilst you recover. Returning to physical activity or sport too soon can:

- prolong the symptoms of concussion
- increase the risk of further concussion
- increase the risk of other injuries
- affect work performance

A further brain injury before a concussion has fully resolved, can lead to permanent brain injury or, very rarely, death.

3. REST

The most important treatment for concussion is rest. For the first 24 hours you should rest completely from both physical and mental (brain) activities.

Physical rest

- You should rest from physical activity for at least 14 days, or longer if symptoms continue.
- You can begin to return to light day to day activities as symptoms settle.

Mental rest

- Spending a long time reading, watching TV, playing computer games, etc. will initially make symptoms worse.
- After 24 hours of complete rest, these can be gradually re-introduced.

Work

- It is unusual to need a long time off work or education following a minor head injury with concussion symptoms; usually a day or two if you continue to feel unwell or your symptoms return at work.

4. RETURN

Once any symptoms have settled, and after a minimum of 14 days rest, you can begin to return to sport/exercise through a Graduated Return to Play (GRTP) programme. This is available online from most Sporting Governing Bodies.

If you are unable to find the policy for your sport, you should follow the Rugby Football Union's HEADCASE guidance.

www.englandrugby.com/run/player-welfare/headcase

How to contact us

If you have any questions or concerns, please contact your GP or NHS 111 (dial 111 (freephone) from any landline or mobile).

You can also contact Headway the Brain injury charity for help and support with any ongoing concerns arising from your head injury. These may include problems with memory, fatigue, emotional well-being, and vocational support.

We know that for some recovering from a head injury can be challenging for the individual, families, and carers. Headway can provide a range of coping strategies and rehabilitation tools to maximise recovery outcomes.

Please contact Headway Oxfordshire on **01865 326263** or email us at **admin@headway-oxford.org.uk** and ask to speak to an ABI Navigator.

Reference

The information in this leaflet is based upon guidance from the National Institute of Clinical Excellence (NICE 2014).

Feedback

We aim to provide you with a quality service at all times. If you have any comments, concerns or complaints about your experience at our service, please tell a member of the team or contact the Patient Advice and Liaison Service (PALS)

Email: **PALS@ouh.nhs.uk**

Call: **01865 221 473**
01295 229 259

You can also email: **feedback@ouh.nhs.uk**

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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Oxford University Hospitals NHS Foundation Trust
www.ouh.nhs.uk/information



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