Let's talk about concussion and your child's risk for more serious injury such as bleeding in or around the brain.

**Concussion**
- Brain movement within the skull
- Symptoms* may include headache, nausea, dizziness, or difficulty concentrating
- Symptoms should resolve in several days to a few months
- Recovery is almost always complete
- Cannot be seen on a CT scan

**Brain Injury**
- Blood
- Occurs when the head injury is severe enough to cause bleeding in or around the brain
- May require medical intervention such as a stay in the hospital or surgical procedure

In 100 children with minor head injury similar to your child:
- **5 will have brain injury** and **95 will not**

*This information may not apply to young children who are not yet able to walk or talk.*

* Kuppermann et al., Lancet, 2009

For questions and concerns, please contact:

Pediatric Head CT Choice: Version 29/5/100
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After monitoring your child in the emergency department for a period of time, we will find out if there is any serious bleeding in or around the brain with:

- **HEAD CT SCAN**
  - You can have a head CT scan test done to determine if your child has had a brain injury.

- **OBSERVATION AT HOME**
  - If your child’s symptoms are the same or better in the next 1-2 days, then there was no serious bleeding in or around the brain.

It is very unlikely, but if your child develops new or worsening symptoms* such as these, bring him/her back to the Emergency Department as soon as possible.

- Lack of alertness (if they are becoming less and less alert within the next day)
- Severely worsening headache (despite resting)
- Vomiting (enough episodes to interfere with eating)
- Unsteadiness or cannot walk
- Difficulty talking or recognizing people

Your child can maintain regular activities such as sleep.

* Some symptoms may not apply to young children who are not yet able to walk or talk.

Please circle the issues that are most important to you and your child.

<table>
<thead>
<tr>
<th>SPEED OF DIAGNOSIS</th>
<th>RADIATION</th>
<th>SEDATION</th>
<th>COST</th>
<th>POTENTIAL DOWNSIDES</th>
<th>WAIT IN ED</th>
</tr>
</thead>
<tbody>
<tr>
<td>HEAD CT SCAN</td>
<td>Now</td>
<td>Yes</td>
<td>Possible</td>
<td>May increase cost depending on your coverage</td>
<td>Typically longer</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>May find irrelevant things that lead to more tests</td>
<td></td>
</tr>
<tr>
<td>OBSERVATION AT HOME</td>
<td>Delayed</td>
<td>No</td>
<td>No</td>
<td>No added cost if symptoms worsen</td>
<td>Typically shorter</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Potential return to ED if symptoms worsen</td>
<td></td>
</tr>
</tbody>
</table>

After discussing this together, we want to do:

- [ ] HEAD CT SCAN
- [ ] OBSERVATION AT HOME
- [ ] Let the Emergency Department doctor decide what to do next

You will have the opportunity to revisit this decision with your doctor while you are in the Emergency Department.