

Emergency Services

Concussion (Minor Head Injury) in Adults

A head injury results from a direct blow to the head that causes shaking and jarring of the brain. If the blow is hard enough to injure the brain, it is called a concussion.



The doctor who examined you did not find any signs of serious complications from your head injury. We expect to have a quick recovery.

What are the common symptoms of a head injury? How long will they last?

The most frequent symptoms are:

- headaches, tiredness, dizziness
- trouble sleeping
- difficulty concentrating and learning new things
- feeling anxious, depressed or irritable

You may experience none, a few, or all of these symptoms. They may show up right away or over the next few days. These symptoms are part of the normal recovery process.

Recovery from a head injury varies from person to person. Most people start to feel better within hours or days; however, some symptoms can last for a week or longer. You must not be left alone for the next 24 hours, as it is possible for more serious symptoms to arise. You must be watched closely by another responsible adult.

Go to the nearest Emergency Department if:							
You have a headache that gets worse or does not go away with pain medicine.							
You are feeling dizzy and it does not go away with rest.							
You have nausea, or you vomit two or more times.							
You have changes in your vision.							
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Call 9-1-1 right away if:							
You have uncontrolled shaking, tremors, or convulsions.							
☐ You have uncontrolled shaking, tremors, or							
☐ You have uncontrolled shaking, tremors, or convulsions.							
☐ You have uncontrolled shaking, tremors, or convulsions.☐ You are very sleepy.							
 ☐ You have uncontrolled shaking, tremors, or convulsions. ☐ You are very sleepy. ☐ You become confused, restless or agitated. 							
 ☐ You have uncontrolled shaking, tremors, or convulsions. ☐ You are very sleepy. ☐ You become confused, restless or agitated. ☐ You cannot be woken up. 							
 ☐ You have uncontrolled shaking, tremors, or convulsions. ☐ You are very sleepy. ☐ You become confused, restless or agitated. ☐ You cannot be woken up. ☐ You have weakness in the arms or legs. 							

How to take care of yourself at home

Rest

- Stay home for the next day or so.
- Gradually return to your regular activities.
- **Do not** do any strenuous physical activities for the next 24 hours.
- Do not watch the TV or work on a computer for long periods of time.

Driving

- **Do not** drive for the next 24 hours.
- Over the next week, if you are having trouble concentrating, do not drive or operate machinery until this symptom goes away.

Health

- **Do not** drink alcohol for at least the next 24 hours. If you continue to have a headache, do not drink alcohol until your doctor says it is safe to.
- Only take medicine prescribed by your doctor.
- Do not take aspirin (ASA), ibuprofen, or other anti-inflammatory medicines. These medicines can increase the chance of bleeding.

Activities and Exercise

- You can do activities or exercise as long as you do not have any symptoms of your head injury.
- Start with light exercise such as walking and cycling on a stationery bike.
- Gradually increase how often and how long you do an activity or exercise.
- If the injury was caused during sports, check with your doctor before returning to that sport.
- Until you are fully recovered, do not take part in any contact sports or any sport where there is a chance you might hit your head (such as hockey, soccer, football, skiing, snow boarding, or cycling). Your doctor will let you know when you are fully recovered.
- Always wear a helmet when playing any sport where there is a chance you could hit your head.

For more on how to plan your recovery, follow the 'Return to Activity' and 'Return to Work' tools attached.

To learn more, it's good to ask:

- Your family doctor
- Fraser Health Concussion Services 604-514-7431
 Email: concussion@fraserhealth.ca

Online: fraserhealth.ca and search "concussion"

Fraser Health Virtual Care 1-800-314-0999
 Live chat online: fraserhealth.ca/virtualcare 10:00 a.m. to 10:00 p.m., daily

HealthLinkBC
 8-1-1 (7-1-1 TTY)

Online: HealthLinkBC.ca

HealthLinkBC is open 24 hours. Available in 130 languages. For an interpreter, say your language in English. Wait until an interpreter comes on the phone.

Web Resources on Concussion

MyGuide Concussion

A personalized guide on recovery by GF Strong concussion.vch.ca

Concussion Awareness

Training Tool cattonline.com
Select 'Athlete' or 'Workers and Workplaces'

Parachute Canada

parachutecanada.org

Select 'Injury Topics' then choose 'Concussion'



Return to Activity

This tool is a guideline for managing an individual's return to activity following a concussion and does not replace medical advice. Timelines and activities may vary by direction of a health care professional.

	STAGE 1:	STAGE 2:	STAGE 3:	STAGE 4:	STAGE 5:
	Initial rest	Prepare to return to activity	Increase your activity	Gradually resume daily activities	Full return to activity
• Lir (cc sm • Ke • Sle ne a r scl	ay home in a quiet and calm avironment. mit your screen time computer, television, and nartphone use). eep any social visits brief. eep as much as your body eeds while trying to maintain regular night sleeping hedule. ee: The goal for each stage is and the 'sweet spot' between ang too much and too little.	 Test your readiness by trying some simple, familiar tasks such as reading, using the computer, or shopping for groceries. Keep the time on each activity brief (e.g., less than 30 minutes) and take regular rest breaks. Go for walks or try other light physical activity (e.g., swimming, stationary bike), without becoming short of breath. Keep bed rest during the day to a minimum. It is unlikely to help your recovery. Get ready to return	 Gradually return to usual activities and decrease rest breaks. Start with less demanding activities before harder ones. Physical activity might include jogging, lifting light weights, or non-contact sport drills, gardening, dancing. Note: You could start returning to school or work on a part-time basis (e.g., a few hours per day). 	Resuming daily activities can be challenging because your energy and capacity for activities may be variable, but should improve day-to-day or week-to-week. Students and workers may require accommodations, such as reduced hours, reduced workload, extra time for assignments, or access to a quiet distraction-free work environment. Continue your return	 Full class schedule, with no rest breaks or accommodations. Full work schedule with usual expectations for productivity Student athletes should not return to sport competition until they have fully returned to school. Only return to contact sports or dangerous job duties (e.g., operating heavy equipment, working from heights) when cleared by your doctor.
	nen symptoms start to improve R after resting for 2 days max, BEGIN STAGE 2	Tolerates simple, familiar tasks, BEGIN STAGE 3	Tolerates further increase in level of activity, BEGIN STAGE 4	Tolerates partial return to usual activities, BEGIN STAGE 5	

If new or worsening symptoms are experienced at any stage, go back to the previous stage for at least 24 hours. You many need to move back a stage more than once during the recovery process.

Each person will progress at his/her own pace. It is best not to "push" through symptoms. If you do too much, your symptoms may worsen. Decrease your activity level and your symptoms should settle. Then continue to gradually increase your activity in smaller increments.







Return to Work

This tool is a guideline for managing an individual's return to work following a concussion and does not replace medical advice. The goal for each stage is to find the 'sweet spot' between doing too much and doing too little. Timelines and activities may vary by direction of a health care professional.

	AT HOME		AT WORK				
STAGE 1:	STAGE 2:	STAC	GE 3:	STAGE 4:	STAGE 5:	STAGE 6:	
 Initial physical and cognitive rest Rest in a quiet and calm environment. Try activities that do not aggravate symptoms (e.g., listening to quiet music or colouring). Sleep as much as your body needs while trying 	Gradually increase cognitive activity by trying simple, familiar tasks (e.g., reading, watching TV, using the computer or drawing). Go for walks or try other light physical activity (e.g., swimming, stationary bike, light housework), without becoming short of breath. Take frequent rest periods; keep napping to a minimum. Begin with brief periods of activity, up to 30 minutes. Start thinking about returning to work: communicating with the workplace, a return to work plan, and your commute. Gradually increase	Continue to increase cognitive activity. Continue to return to pre-injury physical activities (e.g., grocery shopping, gardening, jogging, light weight training). Contact workplace to discuss a tailored Return to Work plan. Attempt to commute to work to assess if it aggravates symptoms or drains energy. A regular sleeping schedule supports a successful return to	Prepare to return to work—at work • Work accommodations can include: flexible hours, reduced workload, extra time for tasks, access to a quiet, distraction-free work environment. • Arrange to return to work on a graduated basis. Consider number of hours per day and appropriate accommodations. • Work your way up to an additional 2 hours of activity, with breaks as needed. • Have a plan to leave work and return to Stage 2 if symptoms worsen.	Begin graduated return to work Return to work according to your graduated return to work plan, with the agreed upon number of hours per day and accommodations. At work, start with less demanding activities before more difficult ones. Gradually increase working hours weekto-week, or sooner, as appropriate.	Regular work hours with modifications, as needed Decrease accommodations as energy and capacity increases. Accommodations can be phased out in "trial" periods, to ensure that they are no longer needed. Monitor energy levels for completing household tasks and participating in social or recreational activities after the work day.	Full return to work • Full regular work schedule with usual expectations for productivity, without accommodations.	
to maintain a regular night sleeping schedule. Limit: Lengthy social visits. Screen time (smartphone, computer, television) and reading. Avoid: Sports or physical activities that increase your heart rate or cause you to break a sweat.						NOTE: Only return to job duties that may have safety implications for you or others when cleared by a licensed medical professional (e.g., operating heavy equipment, working from heights, driving). Full return to work	
NOTE: It is recommended to discuss driving with a licensed medical professional for safety considerations.		breaks as needed. Prepare to return to work		Return to work with accommodations and a personalized	a personalized		
Rest	activity			Return to Work plan			
When symptoms start to improve OR after resting for 2 days max, BEGIN STAGE 2 When 30 minutes of activity is tolerated, BEGIN STAGE 3		When 4 hours of activity is tolerated, with breaks as needed, BEGIN STAGE 4		When ready for regular work hours with accommodations, BEGIN STAGE 5	When regular work hours are tolerated with min. accommodations, BEGIN STAGE 6	Once you have COMPLETED STAGE 6, Return to Work strategy completed	

Recognizing that workplace environments vary by industry and occupation, returning to work may focus more on a return to cognitive activity, physical activity, or a combination of both. It is normal to experience symptoms during recovery; you do not have to wait to be symptom free before returning to work. However, after Stage 2, if new or worsening symptoms appear at any stage, go back to the previous stage for at least 24 hours. You many need to move back a stage more than once during the recovery process.





