



Discharge Instructions for Closed Head Injury

Recovery from a closed head injury can be a slow and sometimes frustrating period. To follow are some general instructions to help you understand the recovery period.

Wound

- If your injury included a scalp laceration, you may have dissolvable sutures or staples in the wound. These will be assessed and removed in the office at your follow-up.
- Some wounds may be large enough to require a dressing while others can be left uncovered. Our clinical staff will advise you of your needs at discharge.
- You will need to keep your head covered when in direct sunlight until your hair covers the wound well.
- You may shower but you need to cover the wound with a plastic covering (such as a shower cap) to keep it dry. **Do not soak the wound in water for 6 weeks.**
- You may be instructed to use an antibiotic ointment on the wound. Do so as directed.

Pain Relief

- Our office, or your attending physician will provide you with a mild prescription pain medication to help with headaches. You should use these medications sparingly and only as directed. It is expected that most of your pain can be managed with over the counter medications such as Tylenol.
- If you are given a prescription for steroids, please take them as directed and in their entirety.
- If you are having trouble controlling headaches, please notify our office. You may be referred to

make an appointment with your neurologist, but we need to be aware of this.

- If you are prescribed antibiotics, please finish them in their entirety.
- You will have a neurologist to help follow you for anti-seizure medications if you need these. Please follow his/her instructions regarding these medications and contact their office if you need refills.
- You will need to avoid anti-inflammatory medications (such as aspirin and Advil) and/or blood thinners for 4 weeks following surgery. You may be given a steroid to take for a short time after surgery and you should take this as directed.
- **Remember, ABSOLUTELY NO MEDICATION REFILLS WILL BE PROCESSED ON THE WEEKEND.** Please plan accordingly. Contact your pharmacy to process all refill requests.

Exercise/Activity

- Avoid riding in a car for 2 weeks – unless medically necessary.
- The best exercise is walking. Small amounts done frequently are best. Try to set a goal to walk a little more each day. This of course will depend on your individual situation and abilities.
- Avoid strenuous activities for 3 months after surgery.
- It is best to sleep with your head elevated on 2-3 moderate sized pillows.
- **DO NOT GO SWIMMING** for at least 3 months after your injury. If you have had a seizure, see your neurologist for more information regarding this restriction.
- **DO NOT SMOKE.** See your primary care physician if you need assistance to quit smoking.

Driving

- You will be advised not to drive for approximately 4 weeks after this type of injury. This may be longer if you have had a seizure. If you have had a seizure, your neurologist will advise you when it is safe for you to drive.
- It is the policy of this office to advise you not to drive while under the influence of pain medications.

Return to Work

- If you can work from home, you can begin doing light desk/phone work as tolerated about 2 weeks after your injury.
- If you have to report to the office to perform your job, you will be able to do this at 3-4 weeks after the injury. You will be restricted to light desk/phone type work.

- If your job requires heavy physical activity, you will be unable to perform this type of work for at least 12 weeks after the injury.
- The above information may need to be altered if you have other injuries. A neurologist will follow you long term to address work issues.

Follow-up

- You have a follow-up scheduled with one of our clinical staff in our Plano office on _____ . Please arrive at least 20 minutes early to complete paperwork. Remember to bring your insurance card and a picture ID.
- You should also make an appointment to follow up with your neurologist as he/she recommends – if there is no need for surgery, your neurologist will be following you long term.
- At some point after your injury, you may need to have a CT scan. This will be arranged either by our office or your neurologist's office.

What to Watch For

- Please contact our office for any of the following:
Oral temperature greater than 100.5 ° F
Excessive redness, swelling, or drainage at the incision site
Clear liquid draining from wound
New, increasing pain/numbness/weakness in your arms/legs
New or worsening headaches
Blurred vision, slurred speech, or confusion
Vomiting
- For general medical problems such as sore throat, cough, nasal drainage, etc., please contact your primary care physician. You should also contact your primary care physician regarding in questions about your routine medications not prescribed by this office.
- If you have a seizure, go to the emergency room and have them notify our office and your neurologist.
- For medical emergencies, please call 911 or report to the nearest emergency room.



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