

## How Children Wake Up from Brain Injury

Procedure/Treatment/Home Care  
Si usted desea esta información en español,  
por favor pídasela a su enfermero o doctor.

**#227**

Name of Child: \_\_\_\_\_ Date: \_\_\_\_\_

# How Children Wake Up from Brain Injury

Your child's brain has been hurt. This has many names, including **traumatic brain injury (TBI)**, and **head injury**. This can happen in two ways:

- The head moves then stops quickly, so the brain bounces inside the skull and gets hurt. This is called a **closed brain injury (CBI)**. It can happen when something hits the head hard, like a car window or a rock, or if the child is shaken hard.
- Something moving fast goes into the child's head, like a bullet. This is called an **open brain injury**.

When a child's brain is hurt badly, it can cause many problems. The child may have trouble doing certain things, or not be able to do them at all, or may not behave the same as before. This can be hard on the family. After the injury, you will see the child get better over the first 6 months to 1 year. After that, the child may still get better, but more slowly, over several years. As the child gets older, problems may get better but new problems may begin.

How your child gets better after a brain injury depends on many things, including:

- where the brain injury is, and how much it hurt the brain
- who your child was before the injury, and how your child learns
- how your child reacts to the brain injury
- how the family reacts to the child with the brain injury

# How the family gets better

When the child's brain is hurt badly, it upsets the family. Attention moves to the sick child, and away from other people and things the family does. You may see changes in the family's feelings, health, and money. Everyone in the family may react differently. Make sure to pay attention to everyone in the family, each parent, brothers, and sisters. Let friends and family help when they can. Let the health care team do what they can to help your family, too. Tell your nurse, doctor, or social worker if you want to speak with other people who have had a child with a brain injury.

It helps if you know what may happen as your child gets better after a brain injury. It also helps to know what you can do for your child. As children get better, they go through 8 stages. Find where your child is on this list, and read what you can do to help.

## Stage 1: Does not respond

### What you see

Your child seems to be in a deep sleep. This is called being in a **coma**. When you try to wake up your child, you get no response.

### What the family can do

- Touch and talk to your child. Your child may hear you. Talk about family things.
- Tell the nurse, doctor, or therapist what music or TV shows your child likes. Sometimes this helps children remember and learn.

## Stage 2: Responds in general ways

### What you see

When you try to wake up your child, you get a little response. This is called being **semi comatose**. Your child may not respond much. If you tickle your child's foot,

he or she may move it. There may be some more time than usual between when you tickle and when the child moves.

## **What the family can do**

- Touch and talk to your child. Your child may hear you. Talk about family things.
- Each day, tell your child what day it is, where he or she is, and why he or she is there. You may want to put a big calendar on the wall where your child can see it, and cross off each day as it passes.
- Tell the nurse, doctor, or therapist what music or TV shows your child likes. Sometimes this helps children wake up.

## **Stage 3: Responds to what you do**

### **What you see**

Your child now responds a little bit more, and reacts to things. Sometimes your child may respond, and sometimes not. Your child may turn toward a sound, or look at something moving. Your child may try to move away from painful things. Your child may start to talk. Your child may not remember things very well, so may look afraid, upset, or may not understand what is happening.

### **What the family can do**

- Touch and talk to your child.
- Each day, tell your child what day it is, where he or she is, and why he or she is there. You may want to put a big calendar on the wall where your child can see it, and cross off each day as it passes.
- Each day, tell your child he or she is safe and taken care of.
- Call your child by name. Say the names of people in the room, and family and friends. Show your child family photos and name the people in them. Talk about things your child likes to do.

- Bring in your child's favorite toy or book, or play music your child likes. Use one at a time. Too many things at once can confuse your child.
- Notice how your child's reaction changes. Since your child knows you, he or she may respond to you before responding to a nurse or doctor. Tell the rest of the health care team what you see.
- Ask your child to do one simple thing, such as, "squeeze my hand." Give your child lots of time to respond. Don't say it again, or ask your child to do something else right away.
- Give your child enough time to rest.
- Don't test your child too much. This may confuse your child, if he or she has trouble remembering or understanding.



**Bring in your  
child's favorite toy  
or book,  
or play music  
your child likes.**

## **Stage 4: Confused and upset**

### **What you see**

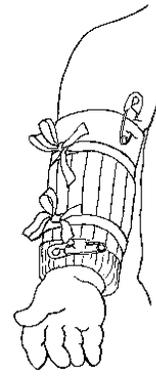
This may be hard for families to see. The child may not understand what is happening. The child is confused and afraid. Some families see this and think their child is in pain. The child may get upset easily. The child may move quickly between feeling sad, happy, angry, and cranky. The child may yell, hit, or scratch. The child is not angry with you.

Your child may not remember new things for very long. The child may say things you don't expect, or may say things that are not true. The child may not understand what to do with things. For example, he or she may see a pen, but not remember it is used for writing. Your child may not be able to pay attention for very long.

This is the stage when your child may hurt himself or somebody else. Your child may be kept safe in bed or a chair by being held there with **restraints**.

## What the family can do

- Each day, tell your child what day it is, where he or she is, and why he or she is there. You may want to put a big calendar on the wall where your child can see it, and cross off each day as it passes.
- Each day, tell your child he or she is safe and taken care of.
- When you are with your child, be calm and soothing. This will help your child feel safe and stay calm. You may hold and rock your child, play soft music, or read a book.
- Talk to your child slowly, in simple words and short sentences.
- When you ask your child to do something, give one step at a time. Repeat it slowly.
- When you don't understand your child, ask him or her to say it again. If your child gets upset, try to guess what he or she means. If you can't find what it is, change the topic.
- Correct your child gently. Don't argue with your child. Don't tell your child he or she is bad for not remembering things.
- Give your child time to finish talking. If you finish your child's sentences for him or her, the child is not learning.
- Expect your child will forget things.
- Don't believe everything your child says.
- When you tell your child you are going to do something, do it. If you can't do it, explain why.



**Your child may be kept safe  
in bed or a chair  
by being held there with  
restraints.**

- If your child is upset, try to find out what is bothering your child. If you think your child is in pain, tell the nurse. There may be too much noise or too many people in the room.

## **Stage 5: Confused and hard to manage, not so upset**

### **What you see**

In time, your child calms down. Your child does not get angry so quickly. Your child may not remember the day, month, year, or place. Your child may do better with you than with the doctors and nurses.

Your child can pay attention for 2 or 3 minutes, but may forget what he is doing if someone moves nearby. Your child may not be able to remember new things well, but may be able to do things he or she did before the brain injury.

Your child may still get upset when trying to do things that are hard to do. Your child will not always remember he or she had a brain injury, and may be confused when talking about this. Your child may seem like a robot, with a face and voice that do not change with feelings.



**Your child may still get upset when trying to do things that are hard to do.**

### **What the family can do**

- Talk to your child slowly, in simple words and short sentences.
- When you ask your child to do something, keep it simple. Your child may be able to do more things on his or her own now, with a few hints.
- When your child is good, praise him or her.

- Correct your child gently. Don't argue with your child.
- Expect your child will forget things.
- Don't believe everything your child says.
- When your child gets upset, change the subject and let your child rest.

## **Stage 6: Confused and much less upset**

### **What you see**

Your child gets less upset when trying to do things. When your child has trouble doing something, he or she may not get as angry as before. Your child may be able to do one thing, like therapy, for as long as 30 minutes.

Your child may remember the year and place, but not the day and date. Your child may remember big things that happen, but not the little things or details.

Your child may be able to do some things without help. Your child may be able to learn now, but not do things on his or her own. Your child may need hints to remember what to do next.

Your child still can't remember very well, so may still give the wrong answers to questions. However, your child's answers may make more sense now. This may be a hard time for the family. The child knows he or she has problems remembering and doing things. However, the child may still want to do things he or she is not able to do.

### **What the family can do**

- Speak to your child normally, but be very clear. Your child still does not understand when you are joking.
- Expect your child to pay attention to one thing for about 10 to 15 minutes.

- Ask your child to tell you what he or she did today.
- Your child will like to do the same things every day, in the same order.
- Use a chart or book to list things your child needs to do.

## Stage 7: Can do day-to-day things

### What you see

Your child can now remember what happened yesterday, but may not be able to tell you much detail. Your child knows what day it is, and where he or she is. Your child can now do day-to-day things he should be able to do for his age and ability. Your child may never be able to tell you what happened right before the brain injury.

Your child may talk more, but may wait until someone else speaks first. Your child's face may show more feelings. Your child may not be sure what to do or say. Remember, your child has just begun to remember, so everything seems very new.

Your child may still have some problem paying attention. Your child will get confused if you ask him or her to do something new and hard to do.

### What the family can do

- Ask your child to tell you what he or she did today, with as much detail as possible. Help your child learn how to remember.
- Ask the nurse, doctor, and therapist what your child can do safely, and what your child is not yet ready to do. What your child thinks he or she can do may not be safe.
- Your child may still not be able to understand jokes.



**Ask your child to tell you what he or she did today.**

# Stage 8: Can choose what to do, and do it

## What you see

Your child now is able to think better. Your child may still get better at remembering and paying attention, but now will get better much more slowly than before. Your child may have trouble solving problems, and may not make the best decisions. Your child may act without thinking first. Your child may only be able to think about one thing at a time, and may not be able to think quickly. Your child's moods may change from happy to sad quickly.

## What the family can do

- Do things with your child, like playing games or going to the park. Help your child learn what he or she can do safely, and what he or she needs help with.
- When your child can read and write, have him remember things with lists and notes.
- Find out when your child gets angry, and help your child learn what to do at those times.
- Help your child talk about feelings. Tell your child it is normal to have feelings.
- Remember it takes a long time to get better after a brain injury. You may want to join a support group of other parents whose children have had brain injuries. If you have any questions, ask your nurse or doctor.



**Help your child remember things with lists and notes.**

## Now that you've read this:

- Tell your nurse or doctor the stage of brain injury your child is in now. (Check when done.)
- Tell your nurse or doctor what you can do to help your child now. (Check when done.)
- Talk your nurse or doctor about what help your child will need to go back to school. (Check when done.)



If you have any questions or concerns,

- call your child's doctor or
- call \_\_\_\_\_

If you want to know more about child health and illness,  
visit our library at The Emily Center at Phoenix Children's Hospital  
1919 East Thomas Road  
Phoenix, AZ 85016  
602-933-1400  
866-933-6459  
[www.phoenixchildrens.com](http://www.phoenixchildrens.com)  
Facebook: [facebook.com/theemilycenter](https://www.facebook.com/theemilycenter)  
Twitter: @emilycenter

#### Disclaimer

The information provided at this site is intended to be general information, and is provided for educational purposes only. It is not intended to take the place of examination, treatment, or consultation with a physician. Phoenix Children's Hospital urges you to contact your physician with any questions you may have about a medical condition.

Monday December 16, 2013 • DRAFT to family review  
#227 • Written by Cindy Craver, OT • Illustrated by Dennis Swain



## How Children Wake Up from Brain Injury

Procedure/Treatment/Home Care  
Si usted desea esta información en español,  
por favor pídasela a su enfermero o doctor.

Name of Health Care Provider: \_\_\_\_\_ Number: 227  
For office use: Date returned: \_\_\_\_\_  db  nb

# Family Review of Handout

**Health care providers:** Please teach families with this handout.

**Families:** Please let us know what you think of this handout.

Would you say this handout is hard to read?  Yes  No

easy to read?  Yes  No

Please circle the parts of the handout that were hard to understand.

Would you say this handout is interesting to read?  Yes  No

Why or why not?

Would you do anything differently after reading  
this handout?  Yes  No

If yes, what?

After reading this handout, do you have any  
questions about the subject?  Yes  No

If yes, what?

Is there anything you don't like about the drawings?

Yes  No

If yes, what?

What changes would you make in this handout to make it better or easier to understand?

Please return your review of this handout to your nurse or doctor or send it to the address below.

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602-933-1395

[flondon@phoenixchildrens.com](mailto:flondon@phoenixchildrens.com)

**Thank you for helping us!**