

# Let's Talk ABOUT...

## Depressed skull fracture

**A** depressed skull fracture happens when one or more pieces of the skull bone are pushed inward (see "**B**" on the illustration). An indentation (**A**) with no breaks in the bone happens more often in babies. Since the brain is beneath the skull, the skull bone fragments may injure the brain (**C**). Your child may have a bruise on the brain (called a concussion), and a swollen black-and-blue area on the skin.

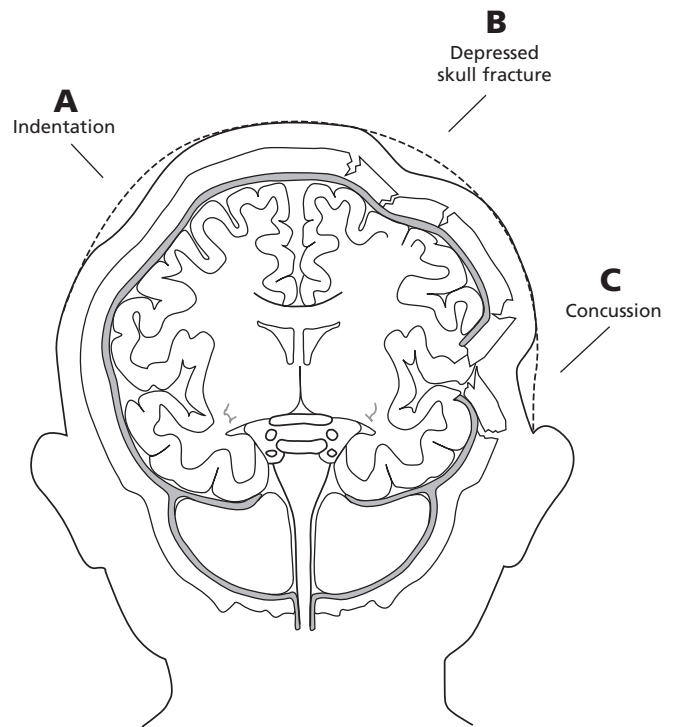
### How does the doctor treat the depressed skull fracture?

Your child will have a special x-ray called a CT scan to find out if he has a skull fracture. The CT scan takes pictures of your child's brain and skull bones.

Your child may need surgery. This is to reposition the bone fragments if they are pushing on the brain. Before surgery, your child's head is shaved so the surgery can be completely clean. Your child will receive medicine to help him relax and sleep during the surgery. During surgery, the doctor may put small metal plates and screws in place to hold the bone fragments together. The surgeon will close the skin over the surgery area with sutures (SOO-churs) or skin staples. Your child may have antibiotics after surgery. The surgeon will decide if your child needs antibiotics.

After surgery, your child will stay in the hospital for a few days. There will be a lot of equipment around his bed. The equipment helps the staff care for your child. While your child is in the hospital, the nurses will frequently check your child's temperature, pulse, blood pressure, and alertness. They will also use every effort to keep your child comfortable.

Often, children have a low fever after this type of surgery. It is part of the healing process. It is because the brain is irritated, not because of infection. It is also common for children to vomit. However, if your child vomits a lot he can become dehydrated (not enough water in the body). To keep this from happening,



your child may receive fluids with an IV (a tiny tube put in a vein).

### What happens after surgery?

Your child can go home once he is alert, moving about, and has no fever or vomiting for two to three days. Be sure to schedule a follow-up appointment before you leave the hospital.

After an injury to the head, some children have brain problems such as trouble walking, trouble speaking, or memory loss. Your nurse will teach you about these problems that happen with concussions or mild brain injuries. The rehabilitation team may evaluate your child and make sure his brain is healing well. The healthcare team will talk to you about the care your child needs after surgery.

## What can my child do at home?

You have to restrict your child's activities until the first follow-up appointment. This will be about three weeks after he goes home from the hospital. Keep your child away from these activities:

- Contact sports (soccer and skiing, for example, are contact sports)
- Bicycling (even with a helmet)
- Trampolines
- Roller skating or T-Ball
- School

Your doctor will tell you when your child can return to these activities and to school. If your child returns to school before the first follow-up appointment, he cannot go to recess or gym class.

A child life specialist can help you make a list of quiet activities for your child. Tell your nurse you would like to speak to a child life specialist. They can help with concerns about your child's self-image, anxiety, stress, and other emotions.

Once your child is home, you may notice some changes. Many of these are normal for a child who has had a brain injury. Many children have headaches, tire easily, and have mood swings. If your child was sent home with medicines to control seizures, call the surgeon's office immediately if you notice any of the following:

- Your child acts "drunk" (walking into walls or appearing unsteady while walking)
- Your child has problems talking
- Your child has more seizures

## How do I care for my child at home?

1. Keep your child's head dry and clean, especially around the surgery area.

2. Call the surgeon's office if:

- You notice the surgery area becomes **red or tender**
- You see **yellow, green, or bloody fluid draining** from the area
- Your child develops a **fever**

3. Before you leave the hospital, your nurse will give you instructions to care for the surgery area and when it is safe to wash your child's hair.

4. The staples or stitches need to be removed seven to 10 days after your child leaves the hospital. If you live outside the area, your child's local health care provider can do this for you. If you live close enough to the hospital, call to arrange a time to have the stitches or staples removed in the surgeon's office at the hospital.

## When should I call my child's doctor?

Call your child's doctor if you see any of the following:

- Your child is more and more sleepy or it is difficult to wake him.
- Your child can not stay awake even for a short time.
- Your child has severe headaches that get worse or last more than one day.
- Your child has trouble seeing or has blurred vision that gets worse over time.
- The fluid from the suture/staple site is yellow, green, or bloody.
- Fluid from the suture/staple site has an odor.
- Your child has more seizures.
- Your child has nausea and vomiting that continues or gets worse over 24 hours.