Let's Talk About ...

Skull fracture

A skull fracture (FRAK-chur) is a break or crack in one of the bones of the skull, also called the cranium (CRAY-nee-um). A severe impact or hit to the skull—such as from a car accident or fall—can cause skull fractures and may also injure the brain.

There are four main types of skull fractures:

- **Linear** skull fractures are the most common. This happens when there is a break in the bone but the bone doesn't move.
- **Depressed** skull fractures can occur when part of the bone breaks and is pushed inward toward the brain.
- **Diastatic** (dy-uh-STAT-ik) skull fracture is a breakage at the sutures, (the joints between the bones in the head) that widens the space between the sutures.
- **Basilar** (BAZ-uh-ler) skull fractures, the most severe type, involve breaks in the bones near the base of the skull, including the ones around the ears, eyes, and nasal cavity.

Because it takes a lot of force to cause a fracture, your child could also have a brain injury (concussion). Your child will need to have a CT scan to decide if they have a skull fracture.

What problems can a skull fracture cause?

Your child may have some of these problems:

- Head pain or headache
- Less energy and tiring more easily
- Less appetite (this should improve slightly each day)
- A swelling or bump on the head (this goes away over 3–4 days)
- Cut or scrape over the fracture
- Throwing up or feeling like throwing up (caused by concussion)

What can I do to help my child heal?

The healing time will depend on how bad the fracture is. A simple skull fracture will heal on its own. It doesn't need a cast or splint and takes 6–8 weeks to heal completely.

Medicines

If your child has a headache, these medicines can help:

- Acetaminophen: You can give your child this medicine every 4 hours. Follow the product directions to give your child the right amount.
- **Ibuprofen:** You can give your child this medicine every 6 hours if they are at least 2 months old. Follow the product directions to give your child the right amount.

Wound care

- Keep your child's wound clean and dry.
- Put an antibiotic ointment (like Neosporin) on the wound 3 times a day (such as morning, afternoon, and bedtime) until it heals.
- If your child has stitches or staples, do not put them totally in water. Your child should not take a bath or swim, but they can shower 24 hours after receiving staples or stitches. The healthcare provider will tell you when the staples or stitches need to be removed (usually 5–10 days later).
- Watch the wound for signs of infection: yellow drainage, more redness, more pain in the area, or a fever. Call your child's healthcare provider if you notice any of these signs.

Diet

Encourage your child to drink lots of liquids and eat a balanced diet. Have them avoid high-sugar foods (such as candy and sweets), carbonated drinks, and caffeine.

Rest

Make sure your child gets at least 8 hours of sleep at night. Let them take naps or rest breaks when they are tired, but don't let them nap longer than 2 hours a day. This will help your child sleep well at night.

When can my child return to activity and school?

Let your child return to their regular activity gradually and increase their activities slowly. If they get worse with activity, stop the activity and call your child's healthcare provider.

Have your child avoid running until their healthcare provider says it is okay. They should also avoid contact sports and gym classes at school for 2–3 months. If your child has a headache or is tired, they may need to stay home from school for 3–5 days after the injury.

How can I prevent skull fractures in the future?

- Use the right car seats and seatbelts while your child rides in the car.
- Have your child wear a helmet for biking, skateboarding, riding on a scooter, horseback riding, skiing, snowboarding, and sledding.
- Have your child wear protective gear and follow state laws when driving an ATV or motorcycle.



When do I need to take my child to a healthcare provider?

Your child should visit their primary healthcare provider a week after leaving the hospital for a checkup. If your child also had a concussion and has behavior or learning problems, consider seeing a concussion specialist for follow-up testing.

Take your child to the emergency room if they have:

- Different size pupils (black parts in their eyes)
- Vomit more than three times after they go home
- Drowsy or hard to wake up
- Slurred speech or are confused
- Clear liquid dripping from their nose or ears
- A severe headache or headache that gets worse
- Seizures

Notes

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