

CHILD MALTREATMENT.

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INQUIRE



- History of abuse
- Low educational and socioeconomic status
- Young and/or single parent
- Unwanted pregnancy
- Child with medical and/or behavioral condition
- Domestic violence



IDENTIFY

Commission

-VS-

Omission

Sexual, physical, or psychological

Medical, educational, emotional, or physical

ABUSE

NEGLECT

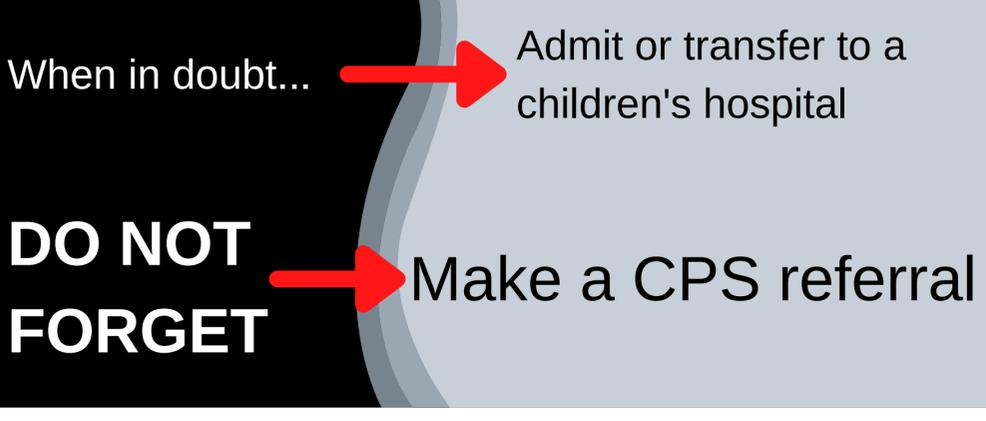
INTERVENE



- Screen for abuse and neglect at all patient interactions.
 - Head and thoracoabdominal trauma (shaking, direct impact, rapid deceleration), rib fractures (squeezing), metaphyseal fractures (forcible pulling or twisting of extremities)
 - Inconsistent history or delay in seeking care
 - Witnessed inappropriate behavior towards child
 - TEN 4 (Trunk, Ears, Neck - 4 years or younger)
 - 4 FACE SP (any bruising less than 4 months old - Frenulum, Auricular area, Cheek, Eyes, Sclera, Patterned bruising)
 - Glove and stocking pattern of burns
- Acknowledge frustrations and review coping strategies.
- Consider a trauma work-up.
 - CBC, Lipase, LFTs, PT, PTT, UA
 - Skeletal survey (both younger and older than 1 year old)
 - Head CT if younger than 2 years old
 - MRI brain and perform abdominothoracic CT if indicated
 - Drug screen
 - Get pictures of visible injuries if any



DISPOSITION



PEM NUGGETS

- ALWAYS have your spidey senses up and maintain a high level of suspicion
- Have a low threshold for work-ups and screening for abuse.



- All healthcare providers are MANDATED REPORTERS
- Clearly document all findings using quotes if you have to.