

Physical Abuse Evaluations

What To Do Before You Call a Child Abuse Expert when physical abuse is suspected in a child under 2 years old

Physical abuse can present as occult injury and normal external examination with or without irritability or lethargy, bruises (especially suspicious if on the face), lacerations or abrasions, burns, fractures, or other presentations.

History

Complete history, including:

- Review available prior medical records (PMD, ED, Inpatient and CPS)
- Review prior radiologic examinations that were performed at referring hospitals
- Review prior photographs

Determine if forensic evidence will be collected prior to bathing and removal of clothing.

Physical

Complete physical examination, especially:

- Palpation of legs, arms, hands, feet and ribs to feel for crepitus or deformities
- Inspection of all body parts and thorough skin exam
- Complete neurologic examination
- Oral examination (lip, tongue, buccal) to look for frenula tears or dental injuries
- Auricle exam
- Inspection of the scalp and hair
- Genitalia examination

Consults

- Hospital Social Work
- Pediatric ophthalmologist; ask for photographs of the retina
- Medical photography when available
- Request an official radiology reading and upload image
- SANE (Sexual Assault Nurse Examiner) if concern of concurrent sexual abuse ≤ 96 hrs

Diagnostic tests

Routine tests:

- CBC with platelets, LFTs, amylase/lipase, PT/PTT, UA and stool guaiac
- UDS/Toxicology
- Skeletal Survey

Consider:

- Brain imaging (CT acutely; MRI for follow-up)
- Forensic Evidence Kit per SANE consult

Documentation

- History obtained, from whom and to whom
- Physical findings with drawings and measurements
- Tests ordered and performed and results
- Impression: suspected physical abuse

Do not attempt to further interpret findings if there will be a child abuse consultation.

- Impact statement to be faxed to CPS or police

Reporting

Call Child Protective Services Hotline 1-800-635-1522 to make a report.

- Ask them to check if there are other children in the home. They must be evaluated by either their PMD or the CARE Program.
- Ask for a scene investigation, if necessary.

As a licensed professional, you are required to report suspected abuse. A referral to a child abuse expert is not the same as a Hotline report to Child Protective Services.

At discharge from the hospital

- Document head circumference and other growth parameters.
- Make an appointment with a child abuse expert.
- Make appointments with other sub-specialists (possibly orthopedics, neurosurgery and ophthalmology) and PMD.
- Fax script for follow-up skeletal survey to be performed 2 weeks from date of incident.

Further information:

Kellogg ND and the Committee on Child Abuse and Neglect. Evaluation of suspected child physical abuse. Pediatrics. 2001; 119 (6): 1232-1241. <http://aappolicy.aappublications.org/cgi/content/full/pediatrics;119/6/1232>

Botash AS. Child Abuse Evaluation and Treatment for Medical Providers. 2010 <http://www.ChildAbuseMD.com>

Ann Botash, MD, and the CARE Program for the Child Abuse Medical Provider Program

www.CHAMPprogram.com

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