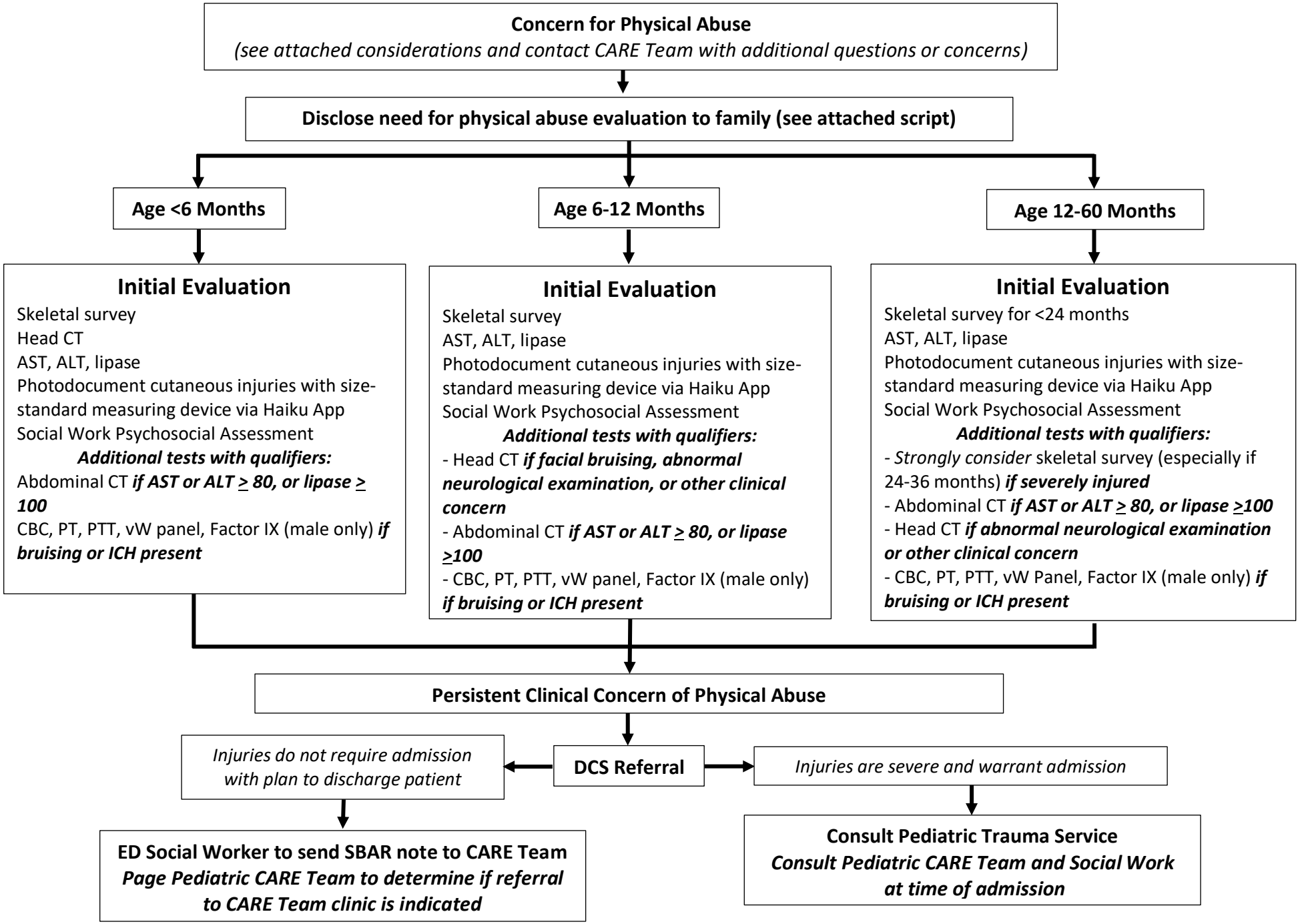
Vanderbilt Children's Hospital
Physical Abuse Clinical Practice Guideline



When to consider physical abuse:

Pre-ambulatory[1]	Ambulatory[10]	Exceptions for evaluation IF without other clinical concern
ANY injury, including: • Bruise[2] • Burn or laceration[3] • Mouth injury (e.g. frenulum tear, lip laceration)[4] • Eye injury (e.g. subconjunctival hemorrhage)[5] • Intracranial injury[6] • Abdominal injury[7] • Genital injury[8] • Broken bones[9]	• Bruise to non-bony or concerning locations (e.g. torso, ears, neck, face, buttock, thigh, upper arm, genitals)[11,12] • Patterned injuries (including adult appearing bite marks)[13] • Multiple injuries in different stages of healing[9,14] • Injury that is not explained by a trauma history or a medical condition[15] • Trauma history that is not consistent with child's developmental capabilities[15] • Important details of the trauma history significantly change or differ between caregivers[15] • Unexplained delay in obtaining medical care[16] • Any broken bones <12 months of age (unless a toddler fracture, see exceptions)[9,14] • Classic metaphyseal lesions (CML), rib, scapular, spinous process, sternal, or vertebral body fractures[17]	Physical abuse need not be evaluated if: • Injury was observed by an impartial witness in a public location • Subconjunctival hemorrhage <2 weeks of age • Confirmed birth-related injury, to include clavicle fracture (acute broken bones in infants <22 days old or healing broken bone in <30 days old) • Confirmed motor vehicle accident injury, animal bite, hair tourniquet, corneal abrasion, or surgical wound • Toddler fracture in cruising child ≥ 9 months with history of a fall OR any toddler fracture in an independently walking toddler (≥12 months) with no additional concerns on exam or history • Linear, unilateral skull fracture in child 6-36 months with history of significant fall (>3 feet or caregiver falling on child) provided by a reliable caregiver

If you have ANY concerns for physical abuse, please use this protocol:

DISCUSSING THE PHYSICAL ABUSE WORK-UP WITH THE FAMILY – EXAMPLE SCRIPT

"Any time a child of this age comes to the hospital with [this injury/these injuries], we evaluate for other injuries. Sometimes a child can have internal injuries, such as broken bones, head injury, or abdominal injury that we cannot see on the outside. Just like you, we want to make sure that your child is okay, so it is important that we do this testing. These tests include _____. As a part of this evaluation, we will also have our Social Worker come talk with you. By law, we are obligated to report any concern for abuse to Department of Children Services. This is a standard part of our evaluation. We are happy to answer any questions or concerns along the way."

This protocol is intended as a guide for physical abuse work-up in order to prevent further injuries and possibly death. Please contact Dr. Kavita Vankineni (kavita.vankineni@vumc.org), **Dr. Heather Williams** (heather.n.williams@vumc.org), **Dr. Emily Fain** (Emily.Fain@vumc.org), **or Amber Greeno** (Amber.Greeno@vumc.org) **for any questions or concerns about the protocol. For specific cases or questions, please contact the VCH CARE Team.**

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