

Suspected Child Abuse and Neglect (SCAN)

Consult with SCAN specialist on call

Report to Child Protective Services, DCFS in California 800-540-4000, Call social work to report

Non-accidental Trauma

Suspect

Injury not c/w history or child development
Changing history
Delay in seeking care
Blame injury on another child or sibling
Suspicious patterns of injury
Sentinel injuries (see below)
Child self-report

Bruises: TEN 4 FACES

Torso
Ear
Neck
4 months old or younger
Frenulum
Auricular
Cheek
Eyelid
Scleral
Patterned bruises: pinch marks, handprints, belt marks, loops

Fractures (skeletal survey if these)

Multiple / different ages
Metaphyseal corner/bucket handle
Posterior rib
Femur in non-mobile child
Humerus in < 2 yo
Skull fx beyond simple linear

Burns

Stocking-glove, donut shaped on buttocks, patterned / cigarette

Work-up < 2yo if suspect abuse

Skeletal survey
Bruises: CBC, PT/PTT
Poss abd trauma: LFTs, amylase, lipase, UA for hematuria
Fracture: BMP, Ca, PO4, Vit D, PTH
Ophtho consult w/in 24 hrs
CT head, abd as indicated

Work-up > 2yo if suspect abuse

X-ray areas of concern / tender
Bruises: CBC, PT/PTT
Poss abd trauma: LFTs, amylase, lipase, UA for hematuria
CT head, abd as indicated

Sexual abuse / assault

Suspect

Inappropriate sexual behavior in young child
Genital trauma
Symptoms of STIs
Child self-report

ED management

Evaluate acute symptoms (eg pain, bleeding, dysuria, symptoms of STI) and provide needed acute care

Forensic exam

Indicated if assault < 72 hours prior
Pubertal: send to SART center
Prepubertal: call SCAN team

Testing

Urine pregnancy test if menarchal
Baseline RPR, HIV, Hep panel, urine gonorrhea & chlamydia, wet mount prn (don't do if SART team will examine, may do blind vaginal swab in pre-pubertal)
Consider baseline CBC, BMP, LFTs if providing HIV prophylaxis

Pregnancy prophylaxis

As indicated depending on history
Plan B now and in 12 hours OR
Ovral 2 tabs or LoOvral 4 tabs now and in 12 hours, w/ Ondansetron

STI prophylaxis

Ceftriaxone 250mg IM
Azithromycin 1 gm PO
Flagyl 2 gm PO
Treat pre-pubertal only if test+

HIV prophylaxis: consult with SCAN or HIV specialist

Truvada PO daily, Raltegravir 400 mg PO BID – give first 2 weeks (will get 2 weeks more on f/u)

Follow-up w/SCAN specialist

2 weeks for repeat urine pregnancy test, STI sx and test results check, Rx remaining HIV meds

Child neglect

Suspect

Unkempt, dirty
Food insecurity, hungry
Poor growth, failure to thrive
Lacking needed medical care
Irregular school attendance
Child self-report

Work-up

Plot growth, BMI
Assess for acute medical issues
Consider admit if severe FTT

Human trafficking

Suspect

With "friend" or "family member" who doesn't allow patient to answer questions or be alone
Patient avoids eye contact
Patient appears anxious
Vague past medical history
Signs of malnutrition, dehydration
Substance use/abuse
STDs
Skin signs:
Ligature marks
Patterned bruises
Cigarette burns
Bite marks
Tattoo (esp of name) in intimate body area

Questions

Can you come/go from your home whenever you want?
Is anyone forcing you to do things you do not want to do?
Do you need permission to eat, sleep, use the bathroom?
Have you/family been threatened?
Have your ID/documents been taken from you?

Work-up

Call SW to assist in assessment
National Human Trafficking Hotline
888-373-7888