

OhioHealth Emergency Medical Services Podcast Series
October 2021 Episode: Non-Accidental Trauma

Objectives:

1. Define child maltreatment.
2. Discuss signs of non-accidental trauma.

Podcasters

- Dr. Drew Kalnow (Andrew.Kalnow@ohiohealth.com)
- Dr. Eric Cortez (Eric.Cortez@ohiohealth.com)
- Dr. Danni Schneider (Danni.Schneider@ohiohealth.com)
- Dr. Kristin Crichton

Case: 3-month-old dispatched as ill child. Mother and father state baby rolled off changing table onto floor in bedroom two days. You note different stages of bruising on various areas of the body.

Kristin's Initial Thoughts:

- Determine the patient's developmental age.
- Determine if the mechanism is consistent with the injury pattern.

How do you initially approach the child?

- You are also approaching the family while approaching the patient.
- Focus on keeping the child safe and healthy.
- History and physical examination, as always, are very important.
- The younger the patient, the less useful the neurological examination.
- Attempt to partner with the family.

Drew's Initial Thoughts:

- Identification is key. Making that decision to get more care is the important step.
- Recognize that it does NOT add up and get the get out of the situation.
- Express concern to the family about the acuity of the patient.

How often are you dealing with the abuser, and what verbiage is good to use?

- Focus on the medicine and let partner agencies perform the investigations.
- Keep the child safe and healthy.
- Explore occult injuries.
- Relay the information appropriately.
- Some of the information you obtain may not be completely accurate.
- Stay objective.

How often is non-accidental trauma discovered accidentally?

- Literature and experience suggest this occurs frequently.
- Consider mimics of child abuse as well.
 - Mongolian spots: will not resolve with time
 - Cupping
 - No bleeding disorder is more common than child abuse.
 - Bleeding disorders do NOT protect child from child abuse.
- Mechanism of injury is important to consider with developmental age.
- Consider the locations of the bruising: bruises over the bony prominences are expected; bruises over the softer spots of the body are less likely to be accidental
- Patterns of bruising
 - Abuse vs. discipline
 - Discipline that leaves bruising is considered abuse per ORC.

What is the non-accidental trauma workup?

- There are clear guidelines to follow
 - Identify occult injuries not apparent on initial physical examination
 - Neuroimaging looking for brain injury and skull fractures
 - Skeletal series looking for fractures
 - Fractures may not be apparent on physical examination
 - Screening labs for abdominal trauma and bleeding disorders
- Positive findings
 - Brain bleeds are typically admitted for consultation
 - Orthopedics will be involved to help manage fractures
 - Report to children services and law enforcement
 - Children services: based on county of residence
 - Law enforcement: based on location of incident
 - Each have own screening protocol
 - We are mandated reporters
 - Some patients can be discharged to safe location in coordination with children services
 - Social work teams in emergency department are extremely helpful
 - Admitted patients will be seen by the child abuse team

For EMS providers, when should you call children services or law enforcement?

- Any mandated reporter has a duty to report when non-accidental trauma is suspected
 - Passing off to the ED does not count as making a report
 - Hospitals may make separate reports if they have a reasonable suspicion
 - You cannot be held liable for making a report in good faith
- There is some variability based on jurisdiction
- When reporting to child services, it is okay to answer “I do not know”
- Involve law enforcement on scene if parents or guardians are refusing transport to the hospital
- EMS providers have a duty to report to either children services OR law enforcement. It is fine to report to one or the other. Follow your local protocols and consult your local experts when making these decisions. Reporting to one meets the requirement to report.
- Documentation is important.

What is the definition of neglect?

- Failure to perform a duty
- There are several types of neglect. The most common type is supervisory neglect.
- Children services can help with resources for child and caregivers.
- Consider in children with failure to thrive.
- You can also make reports for dependency for help with meeting resources of the child. EMS personnel play a key role in detecting these challenges in the home environment.

What is the responsibility of EMS personnel when running on parents with substance abuse?

- Such circumstances may raise the concern for neglect.
- Intoxicated parents may not be able to care for children.
- Involve partner agencies.