

variants, such as mongolian spots and congenital anomalies of genitalia, can be mistaken for abuse.

Box 13-5

Warning Signs of Abuse

- Child has physical evidence of abuse or neglect, including previous injuries.
- History is incompatible with the pattern or degree of injury, such as bilateral skull fractures after being dropped.
- Explanation of how injury occurred is vague or the parent or guardian is reluctant to provide information.
- The patient is brought in with a minor, unrelated complaint, and significant trauma is found.
- Histories are contradictory among caregivers.
- The mechanism of injury provided is not possible given age or developmental level of the patient, such as 6-month-old turning on hot water.
- Bruising or other injury is present in a non-mobile patient.
- The patient's affect is inappropriate in relation to the extent of injury.
- Evidence of abusive or neglectful parent–child interaction is present.
- The parent, guardian, or custodian disappears after bringing in the patient for trauma or a patient with suspicious injury is brought in by an unrelated adult.
- The patient has multiple fractures of differing ages.
- There was a delay in seeking care.