

Suspected Child Abuse	
Sources	No BCH EBG; CHOP clinical pathway
Presentation	<p>Skeletal injuries</p> <ul style="list-style-type: none"> Long bones: epiphyseal/metaphyseal fracture seen as “bucket handle” or “corner fracture” at the end of long bones, spiral fractures Ribs: posterior nondisplaced rib fractures due to squeezing of the rib cage (may not be visible on plain film until callus formation) Skull: fractures >3mm wide, complex fractures, bilateral fractures, non-parietal fractures. These suggest forces greater than those sustained from minor household trauma <p>Bruises</p> <ul style="list-style-type: none"> Unusual/protected areas (chest, abdomen, back, buttocks) Patterned Multiple bruises or bruises in different stages of healing, do not fit the history and developmental stage <p>Burns</p> <ul style="list-style-type: none"> Multiple burn sites Well-demarcated edges Stocking/glove distributions Absence of splash marks Symmetrically burned buttocks or lower legs <p>Head trauma</p> <ul style="list-style-type: none"> Subdural hematomas Retinal hemorrhages Skull fractures (see above)
Workup	<ul style="list-style-type: none"> Consult CPT, Social Work Skeletal survey (<2yo) Noncontrast head CT: good for intracranial hemorrhage and skull fractures Brain MRI: If asymptomatic Dilated indirect ophthalmoscopy exam for retinal hemorrhages Bone health labs (if fractures): Ca, Mg, Phos, Alk Phos, intact PTH, 25 Hydroxyvitamin D Bleeding disorders labs (if bruising/bleeds): PT/PTT, consider vWF, Factor VIII, IX

Syncope	
Differential	<ul style="list-style-type: none"> Common conditions <ul style="list-style-type: none"> Vasovagal Breath holding spells Orthostatic hypotension Toxic exposure Life-threatening <ul style="list-style-type: none"> Arrhythmias: ventricular arrhythmias, long QT syndrome (LQTS), Brugada syndrome, catecholaminergic polymorphic ventricular tachycardia (CPVT), congenital short QT syndrome, pre-excitation syndromes such as WPW (which can lead to SVT with a rapid ventricular response) Structural: hypertrophic cardiomyopathy, severe aortic stenosis, coronary artery anomalies, arrhythmogenic right ventricular cardiomyopathy (ARVC), dilated cardiomyopathy Acute myocarditis Pulmonary hypertension Vasovagal (neurocardiogenic) Heat illness Anaphylaxis Other: hypoglycemia, SVT, bradycardia, POTS
Workup	<ul style="list-style-type: none"> History and physical exam <ul style="list-style-type: none"> Precipitating factors: exercise, acute arousal, postural change, pain or emotion for Description of event Past medical history Family history of early cardiac death (<50 years), arrhythmias, cardiomyopathy, sudden drownings or unexplained car accidents Exam: orthostatic vitals