



Inclusion/Exclusion Criteria

Absolute inclusion/exclusion criteria are not possible in this area. Rather, clues consistent with different types of abuse/maltreatment should be sought:

1. Potential clues to abuse/maltreatment from caregivers or general environment:
 - a. Caregiver apathy about patient's current situation
 - b. Caregiver overreaction to questions about situation
 - c. Inconsistent histories from caregivers or bystanders regarding what happened
 - d. Information provided by caregivers or patient that is not consistent with injury patterns
 - e. Injuries not appropriate for patient's age or physical abilities (e.g., infants with injuries usually associated with ambulatory children, elders who have limited mobility with injury mechanisms inconsistent with their capabilities)
 - f. Caregiver not allowing adult patient to speak for themselves, or who appears controlling – pay special attention to patients who cannot communicate due to young age or language and/or cultural barriers
 - g. Inadequate safety precautions or facilities where the patient lives and/or evidence of security measures that appear to confine the patient inappropriately
2. Potential clues to abuse or maltreatment that can be obtained from the patient:
 - a. Multiple bruises in various stages of healing
 - b. Age-inappropriate behavior (e.g., adults who are submissive or fearful, children who act in a sexually inappropriate way)
 - c. Pattern burns, bruises, or scars suggestive of specific weaponry used
 - d. Evidence of medical neglect for injuries or infections
 - e. Unexplained trauma to genitourinary systems or frequent infections to this system
 - f. Evidence of malnourishment and/or serious dental problems
3. Have a high index of suspicion for abuse in children presenting with a Brief Resolved Unexplained Event (BRUE) [See [Brief Resolved Unexplained Event \(BRUE\) & Acute Events in Infants Guideline](#)]

Patient Management

Assessment

1. Primary survey and identify any potentially life-threatening issues
2. Document thorough secondary survey to identify clues of for potential abuse/maltreatment:
 - a. Multiple bruises in various stages of healing. A complete skin exam can help identify suggestive findings that would otherwise be missed
 - b. Age-inappropriate behavior (e.g., adults who are submissive or fearful, children who act in a sexually inappropriate way)
 - c. Pattern burns, bruises, or scars suggestive of specific weaponry used
 - d. Evidence of medical neglect for injuries or infections
 - e. Unexplained trauma to genitourinary systems or frequent infections to this system
 - f. Evidence of malnourishment and/or serious dental problems
3. Assess physical issues and avoid extensive investigation of the specifics of abuse or maltreatment, but document any statements made spontaneously by patient
 - a. Avoid asking directed questions of a child