	Department Name Address	ALS	Paramedic
		Revision #	
		Implementation Date	
Protocol	2.2.9 Suspected Child Abuse	Last Reviewed/Update Date	
Author / Owner		Medical Director	

The following signs or symptoms indicate that a child's safety may be at risk and at the very least, the situation should be assessed by a physician able to determine the causes of these symptoms and offer the help and assistance necessary to reduce the risk to the child.

Physical indicators:

- Unexplained bruises or welts including those in the shape of an instrument, electric cord, belt buckle, etc.
- Numerous bruises in various stages of healing.
- Cigarette burns, especially on palms, soles, or buttocks.
- A sign of immersion burns producing sock or glove type markings on hands, feet, or the buttocks.
- Rope burns.
- Infected burns (indicating delay in treatment).
- Torn, stained or bloody underclothes.
- Bleeding, irritation or pain of the genitals.
- Poor hygiene, including lice, scabies, severe or untreated diaper rash, bedsores, body odor, etc.

Behavioral indicators:

- Inappropriate or excessive fear of parent or caretaker.
- Unbelievable or inconsistent explanation for injuries.
- Flat or bald spots on head (infants).
- Nervous disorders (rashes, hives, stomach aches, facial tics).
- Age-inappropriate behaviors (bedwetting, wetting or soiling).
- Parents who refuse treatment or transport of suspicious injuries.
- 1. Present a calm care giving manner.
- 2. Treat injuries according to specific protocol.
- 3. Do not suggest that injuries are suspicious in any manner.
- 4. Transport when possible. Report to the accepting facility in a discreet manner.

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- 5. Notify your local Social Service Office, law enforcement, and medical control for any suspected cases when transport was denied by parents.
- 6. Treat medical or trauma conditions per protocol.
- 7. Document the following on the trip report:
 - Who the incident was reported to, and
 - When the incident was reported, and
 - Where the incident was reported

Medical Director's Signature	Date	

Disclaimer:

The protocols have been developed by the North Dakota Department of Health are meant to be used as general guidance for developing protocols for individual emergency medical services agencies. These sample protocols are not meant to be medical or legal advice; nor do they establish standards of care. Each emergency medical services agency must tailor protocols based on their specific needs or capabilities. Local medical directors must be consulted with and approve any protocol(s) prior to becoming operational in an emergency medical services agency. directors must be consulted with and approve any protocol(s) prior to becoming operational in an emergency medical services agency. The North Dakota Department of Health make no representation on the accuracy of information contained herein and accepts no liability for any loss or damage arising from any content error or omission.