SUSPECTED ABUSE

All healthcare providers are obligated by law to report cases of suspected child, elder, or vulnerable adult abuse.

Report all alleged or suspected abuse or neglect to the appropriate agency. Georgia Code requires providers to report incidents of abuse to their county's public children services agency or a municipal or county peace officer.

Simply notifying hospital personnel about concerns of maltreatment do not meet mandated EMS reporting responsibilities. If any maltreatment is suspected, the EMS provider MUST, by law, notify the local public children services agency or law enforcement as soon as possible.

Physical abuse and neglect is often difficult to determine - the following are indicators of possible abuse:

- Injuries scattered on many areas of the body.
- Malnutrition or lack of cleanliness.
- Any fracture in an child under 2 years of age.
- Injuries in various stages of healing.
- More injuries than are usually seen in other children of the same age.

Initial Management:

- DO NOT confront or become hostile to the parent or caregiver.
- Treat any obvious injuries.
- In cases of suspected sexual abuse or assault:
 - o Discourage patient from washing and/or using the restroom.
 - o If the child/patient has not changed clothes, transport patient in these clothes.
 - o If clothes have been removed but unwashed, bring clothes and underwear with patient in a paper (not plastic) bag.
 - o Do not delay transport to search for evidence.

Reporting:

- Report your suspicions to the responding EMS crew.
- Notify the local public children services agency or law enforcement as soon as possible. You are legally responsible reporting your suspicions.
- **DO NOT** initiate the report in front of the patient or caregiver.

Documentation:

- Document any statement the child/patient makes in their own words.
- All verbatim statements made by the patient, the parent, or caregiver should be placed in quotation marks.
- Document unexplained injuries, discrepant history, delays in seeking medical care, and repeated episodes of suspicious injuries.
- Document history, physical exam findings, environmental surroundings, and notification of EMS personnel in the patient narrative on your report.