

Be aware of potential clues to abuse/maltreatment from caregivers, the general environment, and the patient's physical condition. Recognize any act, or series of acts of commission or omission by a caregiver or person in a position of power over the patient, that results in harm, potential for harm, or threat of harm to a patient.

EMS's role is to:

- Document concerns.
- Assess and stabilize potentially serious injuries.
- Disclose concerns to the appropriate authorities (hospital and law enforcement or state authorities).
- EMS personnel are **mandatory reporters** of any suspicion for abuse, maltreatment, neglect, or potential human trafficking or sex trafficking of a minor per [A.R.S. §13-3620.A](#) and [A.R.S. §13-3212](#).
- Notify one of the following applicable entities:
 1. Law enforcement.
 2. Arizona Department of Child Safety 1-888-SOS-CHILD (1-888-767-2445).
 3. Adult Protective Services Central Intake Unit 1-877-SOS-ADULT (1-877-767-2385) Link to their online reporting form: <https://hssazapsprod.wellsky.com/assessments/?WebIntake=1F74FCDA-C6AB-4192-9CEE-F8D20DE98850>.
 4. A tribal law enforcement or social services agency for any Native American minor who resides on an Indian reservation.
- Leave the investigation to law enforcement.

NOTE: Reporting to hospital personnel does not qualify as having fulfilled the mandatory reporting requirement.

EMT

- Primary survey
 - Identify potentially life-threatening issues.
 - Refer to [General Trauma Management](#) as needed.
- Secondary survey
 - Assess physical issues, document any statements made spontaneously by patient. Avoid extensive investigation of the specifics of abuse.
- Report concerns immediately about caregivers impeding your ability to assess/transport patient or refusing care for the patient.
- Attempt to preserve the evidence, but the overriding concern should be providing emergency care to the patient.

- Scenarios that call for a high index of suspicion for abuse in children include:

- [Brief Resolved Unexplained Event \(BRUE\)](#)
- Any bruising on a patient ≤ 4 months, or any bruising on the torso, ears, neck on a patient < 4 years. (See TEN-4-FACESp below)



TEN-4-FACESp

Bruising Clinical Decision Rule for Children < 4 Years of Age

When is bruising concerning for abuse in children < 4 years of age?
If bruising in any of the three components (Regions, Infants, Patterns) is present without a reasonable explanation, strongly consider evaluating for child abuse and/or consulting with an expert in child abuse.

<p style="text-align: center; font-weight: bold; margin: 0;">TEN</p> <p style="text-align: center; font-weight: bold; margin: 0;">Torso Ears Neck</p> <div style="display: flex; justify-content: space-around; align-items: center;"> </div> <p style="text-align: center; font-weight: bold; margin: 0;">FACES</p> <p style="margin: 0;">Frenulum Angle of Jaw Cheeks (<i>fleshy part</i>) Eyelids Subconjunctivae</p> <p style="text-align: center; font-weight: bold; margin: 0;">REGIONS</p>	<p style="font-size: 1.5em; font-weight: bold; margin: 0;">4 months and younger</p> <div style="display: flex; justify-content: center; align-items: center; height: 100px;"> </div> <p style="font-weight: bold; margin: 0;">Any bruise, anywhere</p> <p style="text-align: center; font-weight: bold; margin: 0;">INFANTS</p>	<p style="font-size: 1.5em; font-weight: bold; margin: 0;">Patterned bruising</p> <div style="display: flex; justify-content: space-around; align-items: center;"> </div> <p style="font-weight: bold; margin: 0;">Bruises in specific patterns like slap, grab or loop marks</p> <p style="text-align: center; font-weight: bold; margin: 0;">PATTERNS</p>
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See the signs

Unexplained bruises in these areas most often result from physical assault. TEN-4-FACESp is not to diagnose abuse but to function as a screening tool to improve the recognition of potentially abused children with bruising who require further evaluation.

