Clinical Pathway for Pediatric Bruising Injury
Age 0-4

Clinical Trigger
Children <4 years with TEN-4-FACES-P bruising and no independently witnessed mechanism, such as MVC, to explain bruising

Work-up:
- Complete physical assessment - including skin exam
- Consult Forensic Nurse Examiner
- Skeletal survey in child <2 years
- Head CT **IF**:
  - Child <6 months
  - Child <1 and any injury (including bruising) to head and/or neck
  - Abnormal neurologic exam and/or mental status change
- Labs:
  - CBC
  - Coags
  - LFT
  - Lipase
  - Urinalysis

TEN-4-FACES-P

TEN
- **T**orso (front or back)
- **E**ars
- **N**eck

4
- **4** <4.99 months old with bruising anywhere

FACES
- **F**renula tear or injury
- **A**ngle of the jaw
- **C**heeks
- **E**yelids
- **S**ubconjunctival hemorrhage

P
- **P**atterned bruise

CPS referral if abuse is suspected

Disposition

Medical admission

Safety admission

Discharge

- Admitting service ensures above work-up has been complete
- If admitting to PICU, consult Peds Surgery
- Consult Child Safety Team:
  - If CST is unavailable and child is ready for discharge, refer to Child Safety Clinic
- Patterned bruising:
  - No further evaluation for bleeding disorder needed
- NOT patterned bruising:
  - vWF antigen, vWF activity (Ristoctin cofactor), Factor VIII level, Factor IX level
- Skeletal fracture identified
  - Refer to Skeletal Injury Pathway

- Confirm contact information is correct
- Place referral to Child Safety Clinic (CAV Clinic)