

## 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 if <2 years
- CT Head if:
  - Child <6 months
  - Child <1 year and any injury (including bruising) to head and/or neck
  - Abnormal neurologic exam and/or mental status change
- Labs
  - CBC
  - Coags
  - LFT
  - Lipase
  - Urine Drug Screen

## TEN-4-FACES-P

### TEN

- **T**orso (front and 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 bruising

CPS referral if abuse is suspected

## Child Safety Team Coverage:

Mon-Thurs: Child Safety & Advocacy  
Fri-Sun: Ped Surg

## Disposition

Medical Admission

Safety Admission

Discharge

- Admitting service ensures above work up has been completed
- Consult Child Safety & Advocacy
  - If CS&A is unavailable and child is ready for discharge, refer to CS&A Clinic
- If admitting to PICU, consult Ped Surgery
- Patterned Bruising:
  - No further evaluation for bleeding disorder needed
- NOT patterned bruising:
  - vWF antigen, vWF activity (Ristocetin 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 & Advocacy Clinic

4 and down...in a gown! 