

FORENSIC MEDICINE GOALS AND OBJECTIVES

Faculty:

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| Scott Benton, M.D. | Pediatric Forensic Medicine |
| Ellie Wetsman, M.D. | Pediatric Forensic Medicine |
| Robert Dehne, M.D. | Pediatric Orthopedics |

Goal: Understand the significance of child abuse and neglect and the pediatrician's role in prevention, detection, and treatment.

Competency Tools: A review of a topic or literature.

Learning Objectives and Curriculum Content:

Pediatrician's Role

1. Define the role of the general pediatrician in preventing, identifying, evaluating, and managing child abuse victims suffering from:
 - a. Physical abuse
 - b. Neglect
 - c. Sexual abuse
 - d. Psychological/emotional abuse
2. Discuss the role of child abuse experts in one's community and how the pediatrician should best work with them for optimal care of abused children.
3. Discuss the magnitude of abuse and neglect in American children.
4. Describe local/state laws for reporting and cooperate with members of the multidisciplinary team and law enforcement official in the investigation of potential abuse.
5. Assume responsibility for the identification, evaluation, and management of abused and neglected children.
6. Demonstrate sensitivity to the emotional upheaval experienced by the child, non-offending caregiver, and clinical staff when the diagnosis of child abuse is considered.
7. Think critically about the facts of the case and strive to be objective in reaching conclusions.
8. Discuss cultural and ethnic issues in abuse and neglect, including home remedies that can be confused with abuse.
9. Discuss principles of treatment and possible long-term sequelae for abused or neglected children.

Evaluation and Management:

1. Identify risk factors predisposing to abuse/neglect (e.g., previously abused parent, lack of social support).
2. Describe the constellation of historical, physical examination, and laboratory findings that are associated with the four sub-categories of child abuse.
3. Discuss the importance of nonspecific behavioral complaints in the presentation and evaluation of sexual abuse.

4. Discuss issues regarding the timing, setting, appropriate professional personnel, and equipment (e.g., colposcope, lab services) for evaluation of sexual abuse.
5. Discuss key issue for pediatricians called to testify in court about abuse/neglect.
6. Discuss local resources for evaluation, referral, and follow-up.

Prevention:

1. Discuss prevention strategies for decreasing the number of children at risk for abuse and neglect and apply these strategies in the well child care setting.
2. Implement in the well child setting counseling strategies for parents and children which may reduce abuse and neglect (e.g., discussion of age-appropriate behavior and safety measures such as avoidance of shaking baby; need for supervision; discipline counseling; teaching children "safe touch" rules.)

Skills Acquisition:

1. Conduct an appropriate interview of caretaker and/or child when abuse is suspected.
2. Demonstrate technically proficient and appropriately sensitive physical examination for the potentially physically abused child.
3. Demonstrate technically proficient and appropriately sensitive physical exam for the potentially sexually abused child, including proper technique for collecting laboratory and forensic specimens in the evaluation of possible sexual abuse.
4. Identify common variants of normal genital anatomy, and explain why the majority of children suspected to be victims of sexual abuse do not have physical findings.
5. List indications for and describe interpretations of lab tests and x-ray studies in the evaluation of abuse, and identify findings suggestive of abuse.
6. Perform appropriately detailed documentation of abuse history, physical findings, and results of studies, and correctly report the suspicion of abuse according to state requirements and procedures.
7. Discuss differential diagnosis, including entities that may mimic sexual or physical abuse; compare clinical findings associated with intentional versus unintentional childhood injuries.

Reading Materials:

1. Textbooks on Child Abuse and Neglect
2. Articles from Dr. Benton's files.

Rotation Requirements:

1. Residents will spend approximately 5 half days per week observing and performing forensic medicine evaluations with Dr. Benton.
2. Residents will attend court with Dr. Benton if he needs to appear and observe the proceedings.
3. Residents will participate with Dr. Benton in performing in hospital consultations.

4. Residents will spend ½ day per week learning about the pediatric ophthalmologic exam, comparing normal from abnormal.
5. Residents will spend ½ day per week with Dr Dehne, learning about pediatric orthopedics, reviewing X-rays and assessing normal vs. abnormal exams.
6. Residents will be expected to read about child abuse and neglect and present an informational talk at the end of the rotation.