How Nurses Can Help Prevent Child Maltreatment

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Congratulations on your passing score of 88%! Please continue on to complete the required post exam survey.

1) What is the most commonly reported form of child maltreatment?
   - A. Neglect
   - B. Physical abuse
   - C. Sexual abuse
   - D. Financial

   Rationale: Neglect is the most common form of child maltreatment.

2) What probably caused the decline in reported rates of physical and sexual abuse during the past 10 years?
   - A. Economic improvements
   - B. Better prevention efforts
   - C. Increased rates of incarceration
   - D. The cause is unknown and is likely a combination of factors

   Rationale: Research has not clearly pinpointed any one factor.

3) To improve the outcomes in child maltreatment, health professionals must:
   - A. Recognize that child maltreatment occurs only in lower socioeconomic groups.
   - B. Improve their ability to recognize child maltreatment through education and training.
   - C. Deal with perpetrators of child maltreatment as criminals from the start.
   - D. Help the child rehearse his or her account of the abuse.

   Rationale: Training and education will help nurses recognize the signs of maltreatment while considering other causes.

4) Which of the following clinical situations would lead you to suspect child abuse on the basis of physical signs and patient history?

   - A. 
   - B. 
   - C. 
   - D. 

   Rationale: 

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A. A 2-month-old with facial scratches; the infant has long fingernails

B. A 3-month-old with vertical bruises on the buttocks and a report from the parent that the child is always crying. Correct

C. An Asian 1-year-old child with uniform light brown/blue blotches on his or her back and torso; the parents report that the spots have been there since birth, and their other child had the same thing when he was little

Rationale: The vertical bruise on a nonmobile child may have been inflicted. (Persistent crying, often a trigger for physical abuse of infants.) For A, the scratches are consistent with accidental injury; option C best describes birthmarks.

5) Multiple bruises at various stages of healing can be associated with repetitive inflicted injury in children and:

- A. Eczema
- B. Coagulopathy Correct
- C. Congenital dermal melanocytosis

Rationale: Coagulopathies are associated with multiple bruises in various stages of healing, which may be accidental (from trivial trauma or spontaneous) or inflicted.

6) What children are at higher risk for abuse?

- A. Children in foster care
- B. Infants with a history of prematurity
- C. Children with developmental disabilities
- D. All of the above Correct

Rationale: Circumstances above are associated with higher rates of maltreatment. But remember that even full-term, normally developing and healthy children living with biological parents may also be maltreated.

7) What statement is FALSE regarding bruising as it relates to child maltreatment?

- A. Skin manifestations can be subtle and are often overlooked.
- B. Bruising because of spanking with the hand may appear as hand marks.
- C. Bruising that leaves bizarre marks or marks of specific shapes should not be investigated. Correct
- D. Excessive bruising can present in children with underlying medical conditions such as hemophilia, leukemia or thrombocytopenia.

Rationale: Skin markings that are bizarre or resemble shapes such as an iron tip or belt loop are suspicious and should be investigated. Accidental burns from a hot object may also result in patterned marks on the skin. Always obtain a history.

8) What physical signs are related to forced feeding of a child?

- A. Raccoon eyes
- B. Bruises on the pinna
- C. Lacerations of the frenulum, palate, or tongue Correct
- D. Bite marks

Rationale: Lacerations of the frenulum, palate or tongue are consistent with forced feeding.

9) What percentage of all child physical abuse do burns account for?
10) What is the major precipitating event for abusive head trauma in infants?

- A. The infant’s refusal to feed
- B. Drug and alcohol use in the caretaker
- C. Inconsolable crying in the infant  Correct
- D. Illness in the infant

Rationale: While the other answers may contribute to the adult’s frustration and resulting abuse, the most frequent reason given by adults who confess to abusive head trauma is persistent and inconsolable crying in an infant.

11) Which is TRUE about inflicted head injuries?

- A. Accidental head injuries tend to be more serious than inflicted head injuries.  Correct
- B. Falls in the home from a height of less than 3 to 5 feet rarely cause significant intracranial injury.
- C. Subdural hematomas are rarely associated with long bone fractures.
- D. Children with head injuries are at low risk for cardiopulmonary arrest from altered mental status, seizures, and increased intracranial pressure.

Rationale: The death rate from a fall of 5 feet or less is about 1 in 1 million. Inflicted or abusive head injuries tend to be more severe than accidental injuries, with the possible exception of motor vehicle accidents.

12) What characteristics do abdominal injuries in battered children have?

- A. They tend to result from missile injuries and produce massive blood loss and prominent bruising on the abdomen.  Correct
- B. They tend to result from blunt trauma from kicks and punches, can produce massive blood loss, and may occur in the absence of abdominal bruising.
- C. They are the result of blunt trauma and produce no significant blood loss but may present as acute peritonitis later.

Rationale: Blunt trauma to the abdomen may result in severe internal lacerations and hemorrhage, with minimal or no external bruising.

13) Retinal hemorrhages are characteristic of what type of child physical abuse?

- A. Hair pulling
- B. Spiral fractures
- C. Abusive head trauma  Correct
- D. Burns

Rationale: Retinal hemorrhages are characteristic of the shaking that is often a part of abusive head trauma.

14) Skeletal injuries typical of child abuse include all of the following EXCEPT:

- A. Long bone fractures at various stages of healing
- B. Chip or corner fractures of the metaphysis
- C. Long bone fractures at various stages of healing  Correct
- D. Chip or corner fractures of the metaphysis

Rationale: Retinal hemorrhages are characteristic of the shaking that is often a part of abusive head trauma.
15) Which of the following are mandated reporters?

- A. Nurses
- B. Physicians
- C. Teachers
- D. All of the above  Correct

**Rationale:** Generally, all professionals who work with children are mandated reporters. Animal control officers often uncover child abuse while investigating animal abuse. In Texas, all adults are mandated reporters.

16) To determine suspicion in child maltreatment, it is important to consider —

- A. The nature of the injury.
- B. The caretaker’s explanation.
- C. The child’s developmental level.
- D. Evidence of other past injuries.
- E. All of the above.  Correct

**Rationale:** Correct Answer.

17) In California, what is the penalty for mandated reporters who fail to report child maltreatment?

- A. Imprisonment in county jail for six months, a fine of up to $1,000 or both
- B. Imprisonment of five years, a fine of $3,000 or both
- C. Possible civil damages for any subsequent injury to the child
- D. a and c
- E. b and c  Incorrect

18) Which of the following is TRUE of children who have been abused?

- A. All abused children have physical findings of abuse.
- B. Abused children develop attention deficit disorders because of their experiences.
- C. Children who are aggressive have been abused.
- D. Children who have been abused exhibit a wide range of behaviors.  Correct

**Rationale:** A and c are sometimes — but not always — true. Some of the reactions of children to trauma, including PTSD, overlap with behaviors exhibited by children with ADHD, but that is not the same as the incorrect assertion in b.

19) What history is suspicious for child maltreatment?

- A. Different stories about how or when the child was injured

**Rationale:**
20) What is the definition of child neglect?

- A. Acts of omission or failure to meet the basic needs of a child
- B. A failure to provide for shelter and medical care
- C. A failure to supervise a child appropriately that leads to a life-threatening event
- D. All of the above Correct

Rationale: In general, child neglect is any act of omission or failure to meet the basic needs of a child. These needs include clothing, education, attention to emotional needs, medical attention, safety, shelter, sleep and supervision. In some states, such as California, failure to provide education falls under truancy laws rather than child abuse laws.

21) Which statement about adverse childhood experience research is most correct?

- A. It asked adults only about parental death, divorce or mental illness.
- B. It found that adults who had suffered an adverse childhood experience were less likely to be teen parents.
- C. It showed that adults who had suffered an adverse childhood experience had higher rates of emotional problems and physical problems, such as pulmonary and cardiovascular disease. Correct

Rationale: Adverse childhood events include a variety of experiences, including parental death and divorce, all forms of abuse, being exposed to domestic violence and having an incarcerated parent. One study indicated that adults who had suffered an ACE had higher rates of emotional problems and physical problems, such as pulmonary and cardiovascular disease.

22) Which of the following statements about failure to thrive is MOST accurate?

- A. A child who has always been small and is growing along the fifth percentile may have failure to thrive.
- B. Failure to thrive may be due to excess intake or lowered metabolic demands.
- C. All infants whose weight shifts down more than 10 percentile points have failure to thrive.
- D. Failure to thrive is best determined by multiple measures, such as body mass index, length for age and growth velocity. Correct

Rationale: Children who grow steadily, even if they are under the fifth percentile, are considered to have normal growth. Some infants may grow down to a lower percentile during the first two years of life and continue to grow at that percentile. Multiple anthropometric measures should be used to determine failure to thrive. Correct Answer.

23) Which of the following is a family protective factor against neglect?

- A. Family isolation
- B. A community with poor economic and social resources
- C. Parental impairment because of illness
- D. A medically fragile, nonverbal child
- E. A supportive extended family Correct

Rationale: A supportive extended family can be a protective factor against child neglect.
24) Which of the following is a key element of Munchausen syndrome by proxy?

- A. Fathers as the primary family instigators of Munchausen syndrome by proxy
- B. A mother who rarely visits the child while the child is hospitalized
- C. Long gaps in medical care of the child
- D. Symptoms remain when the child is separated from the parent
- E. Illness in the child that is intentional, simulated or exaggerated **Correct**

*Rationale: The hallmark of Munchausen syndrome by proxy is an illness or appearance of illness that is inflicted, simulated or exaggerated, resulting in multiple tests, treatments and even surgeries.*

25) Victims of Munchausen syndrome by proxy:

- A. Average about 3 to 4 years old. **Correct**
- B. Are usually boys
- C. Are always members of a higher socioeconomic class

*Rationale: Child victims of Munchausen syndrome by proxy may be either boys or girls and from any social class.*

26) Mothers of victims of Munchausen syndrome by proxy frequently appear:

- A. Loving and overprotective **Correct**
- B. Cold and distant with medical and nursing staff
- C. More concerned with their child’s well-being than with medical tests and procedures

*Rationale: Mothers of victims of Munchausen syndrome by proxy are often seen as loving or even overprotective. They often are seen by the medical staff, are at their child’s bedside, displaying loving care, and yet may seem more concerned with the tests and procedures than with the child’s illness.*

27) Perpetrators of Munchausen syndrome by proxy often have backgrounds in:

- A. Sales
- B. Child care
- C. Healthcare **Correct**
- D. Research

*Rationale: Parents often have a background or at least some training in healthcare.*

28) Admission laboratory tests for patients with suspected Munchausen syndrome by proxy include:

- A. A full toxicology screen **Correct**
- B. Urine culture and sensitivity
- C. MRI
- D. HIV testing

*Rationale: While additional tests may be indicated, a toxicology screen may uncover substances the parent may have given the child to induce illness.*
29) When nurses make abuse reports to CPS, they should know that:

- A. The burden of proof is on them as healthcare providers.
- B. CPS is responsible for investigating the suspicion and making a determination about child maltreatment. Correct
- C. A report always involves criminal charges.
- D. Their competence will be investigated.

*Rationale: The responsibility of the nurse is to report a reasonable suspicion of child abuse, not to investigate the case.*

30) In cases of suspected child maltreatment, a nurse’s responsibilities includes:

- A. Warning the parent that “the next time” a report would be made to CPS
- B. Investigating the allegations
- C. Helping with the treatment of any medical conditions
- D. Making a report promptly for any reasonable suspicions of child maltreatment Correct

*Rationale: Prompt reporting of any suspicions of child maltreatment and efforts to ensure the safety of the child comprise the nurse’s responsibilities.*

31) Which statement about sexual abuse is TRUE?

- A. Less than 10% of adult women report they were sexually abused as a child.
- B. Children who have been sexually abused rarely have normal physical examinations.
- C. Consensual sexual activity of teenagers may be reportable under child abuse laws in Texas and California, depending on their ages and the ages of their partners. Correct

*Rationale: Most sexually abused children have normal exams; up to 30% of adult women report sexual abuse as a child; there are specific reporting laws for consensual sex involving minors in Texas and California.*

32) Child sexual abuse includes:

- A. Sexual assault
- B. Fondling
- C. Masturbation in front of a child
- D. Sexual exploitation, such as pornography and prostitution
- E. All of the above Correct

*Rationale: All of these behaviors are reportable as child sexual abuse.*

33) If a child discloses sexual abuse but is reluctant to discuss the details, what is the appropriate response for the nurse?

- A. Assure the child that you are a friend who can be trusted.
- B. Promise the child that you will not tell anyone else the secret.
- C. Make a report to ensure a healthcare professional or law enforcement officer with forensic interview techniques interviews the child.
- D. Offer the child a range of possible scenarios so the child does not have to disclose embarrassing details without help.

*Rationale: Correct Answer.*

34) Sexual abuse is frequently perpetrated by:
35) Which of the following are MOST likely to be physical indicators of sexual abuse?

- A. Pregnancy, STDs, and oral trauma Correct
- B. Urinary tract infections
- C. Abdominal bruising

Rationale: Pregnancy and STDs are evidence of sexual contact, and depending on the age of the child, the age of the perpetrator and the circumstances, may indicate sexual abuse. Lacerations and abrasions of the oral cavity also can be significant in the investigation of sexual abuse. The other choices are less specific.

36) Which of the following behavioral changes in a child would be MOST specific to sexual abuse?

- A. Sleep disturbances and fear of certain people or places
- B. Depression or withdrawal from friends and family Incorrect
- C. Regression or pseudomature behavior
- D. Hypervigilance and difficulty concentrating
- E. Acting out the abuse with dolls, other children or drawings

37) Why are children who have been sexually abused reluctant to tell others?

- A. They may be embarrassed to explain what happened.
- B. They may be too young to understand what has happened.
- C. They are afraid the person involved (if a significant other) will withdraw love and the family will break up.
- D. All of the above. Correct

Rationale: Any or all of these factors may explain the reluctance of a sexually abused child to disclose the abuse.

38) When a child has been assaulted within the previous 72 hours, the child should have a medical interview and physical examination for:

- A. Gathering forensic evidence and determining any preventive treatment needed Correct
- B. Determining whether the child is lying
- C. Providing the medical team time to identify the perpetrator

Rationale: While an examination cannot “rule out” sexual assault, valuable evidence may be lost by a delay in examination. In addition, the child may have injuries that require treatment, and a prompt exam provides an opportunity to give prophylactic medication to prevent infections.

39) Primary prevention activities for child abuse include:

- A. Public service announcements Correct
- B. Parent-mentor programs
- C. Home visitation programs for women who used illicit drugs during pregnancy
**40) Why is a colposcope used in cases of child sexual assault?**

- A. To facilitate an internal examination
- B. To magnify the genitalia for examination and allow magnified photos. **Correct**
- C. To help the examiner in surgical treatment of the genitalia
- D. To apply medication if needed

*Rationale: A colposcope allows photos with standard magnification, preserving evidence of injury and allowing expert consultation without subjecting the child to multiple exams.*

**41) Informing the family that CPS has been notified in the case of suspected child maltreatment is:**

- A. Required by law in all cases of child maltreatment
- B. Required by law in cases in which only the parents are implicated
- C. Not required by law but is highly recommended as long as the safety of the child and the healthcare provider are not compromised
- D. Forbidden until the case goes before a judge

*Rationale: Informing the family of a child abuse report fosters open communication between the nurse and family over time. There are some instances in which informing the family may not be safe for the healthcare team or for the child, and nurses should consult with CPS or law enforcement if there are questions about informing the family.*

**42) Which statement about a forensic examination for child sexual abuse is most correct?**

- A. Physical evidence of the assault can only be collected 24 hours after the assault.
- B. Because of the high risk of serious injury from sexual abuse, children should be restrained for the examination if they are uncooperative.
- C. The size of the vaginal opening is a reliable indicator of sexual abuse that involves penetration.
- D. Most genital examinations in cases of child sexual abuse are normal. **Correct**

*Rationale: In more than 90% of examinations of young children who had been sexually abused (with either a witnessed event or a confession), the physical exam was normal.*

**43) Which statement is most correct?**

- A. Most Internet offenders are travelers who contact youth in chat rooms and travel to meet them. **Incorrect**
- B. Internet offenders are as likely to be women as men.
- C. Most Internet offenders are teenagers.
- D. Most victims of sexual abuse that involve the Internet are male.
- E. Internet offenders who travel usually tell their victims they are adults and develop emotional relationships before they arrange to meet.

**44) Which statement is most accurate?**

- A. Most fatal child abuse occurs in children younger than 4 years. **Incorrect**
- B. The majority of child abuse reports are made by healthcare providers. **Incorrect**
- C. Adolescents who live in foster or group homes are at low risk of commercial sexual exploitation.
45) Which statement is most accurate?

- A. About 50% of all child abuse reports are substantiated.
- B. The nurse has some discretion in reporting suspicious injuries if there have never been indications of child abuse in the family before.
- C. Nonadherence with recommended medical care should be reported as medical neglect even if there is no imminent risk to the child.
- D. It is usually recommended to inform the family about a child abuse report although it is not required by law. **Correct**

**Rationale:** Although not required by law, it is generally recommended to inform the family about a child abuse report. About 25% of all child abuse reports are substantiated. While “b” may involve a common practice, the law is clear that even first time instance of suspected abuse must be reported. Part of the definition of neglect involves imminent harm to a child.

46) Post-traumatic stress disorder:

- A. Is always seen in child maltreatment
- B. Is more common in cases of severe neglect than in sexual abuse **Incorrect**
- C. Has the same signs and symptoms in childhood as in adulthood
- D. Is more common in children who already have signs of anxiety or depression before the precipitating traumatic event

47) Which of the following skin conditions can mimic the appearance of an inflicted burn?

- A. Tinea corporis (ringworm)
- B. Impetigo **Correct**
- C. Atopic dermatitis
- D. Acne

**Rationale:** Crusted impetigo can look like an inflicted cigarette burn.

48) Which of the following is an example of a child abuse secondary prevention activity?

- A. Public service announcements that encourage positive parenting
- B. Parent support networks for pregnant teens **Correct**
- C. Mental health services for families affected by maltreatment

**Rationale:** Secondary prevention proactively targets those at higher risk, such as pregnant teens.

49) During the first step of the intake of a reported case of suspected abuse, CPS will:

- A. Determine whether the report meets statutory and agency guidelines **Incorrect**
- B. Decide whether to investigate
- C. Assess the urgency of response
- D. All of the above

50) To help protect children from maltreatment, it is important to:

- A. Teach health professionals how to recognize child maltreatment and intervene appropriately
- B. Provide social support programs to new parents of all economic classes
- C. Improve access to early interventional and primary prevention programs that support the family
- D. All of the above **Correct**
Rationale: All of these interventions can help protect children from maltreatment.