

Indicators of domestic violence – surgery: emergency room

Factsheet



Please note that **none or all of these indicators might be present** or may be indicators of other issues, but they can serve as warning signs and a reason for increased attention and can point towards (a history of) DV.

Emergency rooms in hospitals usually serve as first point of contact for individuals with severe injuries when experiencing domestic violence (DV). Healthcare providers working in emergency rooms are frequently the first point of contact for DV victims within the healthcare system. This presents an occasion for healthcare professionals to not only address the immediate medical issues or injuries related to DV but also to identify and support DV victims. This may include referring the individuals to support resources that can provide emotional aid, crisis counseling, as well as information and help with urgent relocations.⁽¹⁾

Please note that the lists are not exhaustive; it represents only a selection.

Adults: Possible indicators/injuries of domestic violence

- Victims of domestic violence receive radiological examinations more often, especially for physical trauma
- Unexplained or multiple injuries
- Especially head, neck, and facial injuries
- Bruises of various ages
- Injuries do not fit the history given
- Bite marks, unusual burns
- Injuries on parts of the body hidden from view (including breasts, abdomen and/or genitals), especially if pregnant
- Chapped lips
- Teeth knocked out
- Uncomfortable/unusual atmosphere, fear, hierarchy between the victim and the accompanying person
- The accompanying person answers all questions
- The history about the injury does not fit to the injuries
- Dissimulations

Children: Possible indicators/injuries of domestic violence⁽²⁾

- Described history of injury is not consistent with injuries.
- Unusual injuries, e.g.
 - Severe injuries of any kind
 - Frequent fractures
 - Very pronounced injuries of any kind
 - Unusual appearance (e.g., patterned injuries, such as bite marks)
 - Unusual (“protected”) localisation of injuries (including lips, teeth, oral cavity, eyelids, earlobes, buttocks, genitals, fingertips, etc.)



Find more information on **indicators** in [Module 2](#).

- Untreated (old) injuries
- Unexplained injuries in non-mobile children
- Injury “inappropriate” for the child’s age; healthy /infants do not have bruises. Even small, medically irrelevant bruises indicate inappropriate handling of the child

Caution: Severe internal injuries (e.g., fractures) may lack external injuries! Shaking an infant is life-threatening – and also not externally visible.

Elderly: Possible indicators/injuries of domestic violence

- Contusions affecting the inner arms, inner thighs, palms, soles, scalp, ear (pinna), mastoid area, buttocks
- Multiple and clustered contusions
- Abrasions to the axillary area (from restraints) or the wrist and ankles (from ligatures)
- Nasal bridge and temple injury (from being struck while wearing eyeglasses)
- Periorbital ecchymoses
- Oral injury
- Unusual alopecia pattern
- Untreated pressure injuries or ulcers in non-lumbosacral areas
- Untreated fractures
- Fractures not involving the hip, humerus, or vertebra
- Injuries in various stages of evolution
- Injuries to the eyes or nose
- Contact burns and scalds
- Scalp haemorrhage or hematoma

Helpful sources

They can be found [here](#).

- (1) Singhal, S., Orr, S., Singh, H. et al. Domestic violence and abuse related emergency room visits in Ontario, Canada. BMC Public Health 21, 461 (2021).
- (2) Notfall- und Informationskoffer: Kinderschutz in der Arztpraxis und Notaufnahme, Institut für Qualität im Gesundheitswesen Nordrhein