**Language used in Child Protection Medical Assessment (CPMA) reports:**

**Various terms may be used in CPMA reports.**

This is a glossary to help ensure there is a shared understanding of what these terms mean.

• **Consistent/Compatible with** – the examination findings (e.g. an injury) could have

been caused by a given explanation (e.g. history from child/parent). However, this does

not mean that other causes are not possible

• **Not consistent/Not compatible with** – the examination findings (e.g. injury) could not

have been caused or is unlikely to have been caused by the given explanation (e.g.

history from child/parent)

• **More likely than not** – one cause is more likely than another i.e. to the standard of

being more than 50% likely

• **Inflicted/Non-Accidental injury** – injury caused by someone else, most likely due to

physical abuse. any bodily injury that is deliberately inflicted on a vulnerable person that is considered unacceptable in any culture at a given time. This may include hitting, kicking, burning, biting or choking.

• **Accidental injury** – injury that can be reasonably explained through an accidental

mechanism sustained during normal movement/play/activities; this takes account of the

developmental level/abilities/behaviour of the child

• **Unexplained injury** – an injury where no plausible explanation has been given and

there is no clear medical explanation. This may require further consideration to decide

whether the injury is more likely to be inflicted or accidental

• **Index/subject child** – the main child who has presented with a concern. This could

be because they have an injury, have said they have been hurt or there is some other

reason why abuse is suspected

**Medical terms doctors may use in reports – these should also be**

**explained in the reports:**

• **Abrasion** – a superficial injury involving only the outer layers of the skin that does not

extend to the full thickness of the epidermis. Can be linear abrasion (scratch) or broad

abrasion (graze)

• **Bruise** – visible evidence of leakage of blood into soft tissues as a result of injury to

blood vessels

• **Erythema** – redness of the skin caused by dilatation (widening) of the underlying

capillaries (small blood vessels)

• **Haematoma** – a collection of blood forming a mass or lump under the skin

• **Laceration** - wound splitting the full thickness of the skin, usually from blunt trauma

• **Incision** – wound splitting the skin, usually caused by a sharp object e.g. blade

• **Mark** – an area of skin that is a different colour to the surrounding skin. This is a

generic term and could indicate an injury (recent or healed) or a skin issue (e.g. birth

mark/medical cause). When this term is used a description of the appearance of the

mark should be documented and an opinion on what the mark is should be offered

• **Petechiae** – small, distinct pin-prick sized bruises (<2mm) that occur when blood

vessels rupture. May be single or multiple

• **Subconjunctivae (subconjunctival) haemorrhage** - is a red spot on the whites of the eyes caused by a broken blood vessel and can be indicative of non-accidental trauma injury, including a bloodshot eye.

• **Scar** – fibrous tissue that replaces normal tissue after the healing of a wound

**Lesion – area of abnormal or damaged tissue, caused by injury or disease process**