

[REDACTED] MI [REDACTED] [REDACTED] [REDACTED]

University of Michigan Hospitals and Health Centers Medical Documents

Electronically signed documents are the authoritative medical record copy. Unsigned documents are considered preliminary and may be modified. Documents dated prior to 2001 may be signed on paper.

<u>Type</u>	<u>Case Date</u>	<u>Doctor</u>	<u>Patient Service</u>	<u>Service Dept</u>
INTERIM SUMMARY	04/03/2014	MOHR, BETHANY ANNE	SCAN	PED

Re: Burns, Naomi
Reg No: 100289621
DOB: 01/07/2014
Date of Service: 04/03/2014

CHILD PROTECTION TEAM INTERIM SUMMARY

Factor 13 Assay: Present

Naomi has underwent an extensive hematological evaluation with no evidence of a bleeding/coagulation disorder.

At this time, there is no apparent medical etiology for her bilateral parietal and cerebellar SDH and bilateral, multilayered retinal hemorrhages. Based upon the information currently available, Naomi's parietal/cerebellar SDH and RH are diagnostic of abusive head trauma.

Her bilateral frontal and anterior temporal collections are consistent with chronic SDH (however, difficult to clearly make this determination since an acute SDH was not known to have been present). However, collections could have represented hyperacute blood. These collections could be the result of abusive head trauma; especially in the setting of Naomi's other injuries.

Elevated d-dimer level likely due to presence of SDH and degradation of fibrin.

Naomi is at risk of further harm, possibly more serious harm, in the environment in which the abuse occurred.

***** Addendum *****

Addendum added: 4/7/2014 13:05

Further labs returned re: vonWillebrand Panel

MEDICAL DIRECTOR COAGULATION INTERPRETATION:

PT and PTT are within normal limits. Factor 8 activity is increased at 218%.
VWF Activity is just slightly below the reference range at 49% and VWF Antigen is normal at 106%. In addition, the Factor 8 Activity to VWF Antigen ratio is normal, but the VWF Activity to VWF Antigen ratio is slightly decreased. Clottable fibrinogen is normal at 242 mg/dL. In summary, would recommend obtaining repeat VWF indices at 6 months of age (when normal adult levels are typically seen) along with VWF multimer analysis.

These current lab results, do not provide a clear etiology for Naomi's retinal hemorrhages and/or intracranial hemorrhage.

Repeat testing at 6 months of age recommended; along with VWF multimer analysis.

***** Addendum *****

Addendum added: 4/10/2014 12:40

[REDACTED] [REDACTED] [REDACTED] [REDACTED]

University of Michigan Hospitals and Health Centers Medical Documents

Electronically signed documents are the authoritative medical record copy. Unsigned documents are considered preliminary and may be modified. Documents dated prior to 2001 may be signed on paper.

I spoke to Dr. Bethany Hall (Naomi's PCP) yesterday, 04/09/2014.

Dr. Hall will order repeat skeletal survey to be performed at U of M; and repeat vonWillebrand panel + multimer analysis when Naomi is 6 months old.

I will follow up on repeat skeletal survey.

***** Addendum *****

Addendum added: 4/28/2014 10:57

SKELETAL SURVEY, 20 IMAGES.

DATE: 4/11/2014

HISTORY: Subdural hemorrhage.

COMPARISON: Skeletal survey 3/27/2014.

TECHNIQUE: Frontal and lateral radiographs of the spine as well as frontal radiographs of the extremities were obtained. Please note that radiographs of the skull were not included within this survey.

FINDINGS:

Similar appearance of slight asymmetry of the ossification centers of the proximal femoral epiphyses, with the left slightly more conspicuous. The hips otherwise appear unremarkable.

No new fractures or evidence of fracture healing identified. Less conspicuous lucency involving the right proximal tibial diaphysis which may be related to prior intraosseous line placement.

Low lung inflation, otherwise the lungs appear unremarkable. Nonenlarged cardiac silhouette. Normal bowel gas pattern.

IMPRESSION:

1. No evidence of acute or healing fractures.
2. Radiographs of the skull are not included with this survey.

No fractures or other osseous injury noted.

Bethany Mohr, MD
Assistant Professor

//Electronically signed by Bethany Mohr, MD [REDACTED] on 04/03/2014 08:44:44//

Reg#: 100289621 Name: BURNS, NAOMI

DOB: 01/07/2014 Sex: F

Age: 4 Months

University of Michigan Hospitals and Health Centers
Medical Documents

Electronically signed documents are the authoritative medical record copy. Unsigned documents are considered preliminary and may be modified. Documents dated prior to 2001 may be signed on paper.

DEPARTMENT OF PEDIATRICS AND COMMUNICABLE DISEASES
Child Protection Team

Created by: Bethany Mohr, MDA [REDACTED]
Sent to EHR Date/Time: 04/03/2014 08:46:04
Import Source: CreateDoc
Document ID: 073396377CWB
Last Edit Date/Time: 04/28/2014 10:57:56

***** END OF DOCUMENT *****