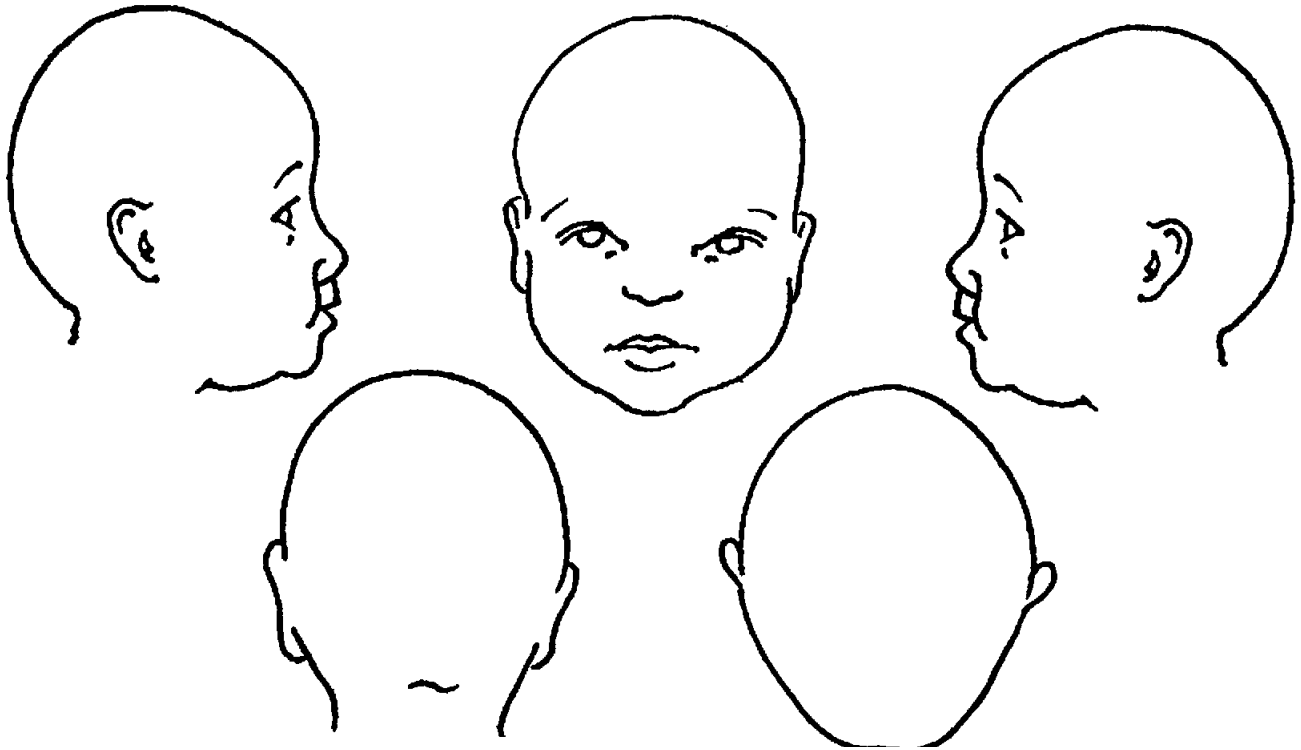
APPENDIX 4: BODY MAPS

Body Map: Baby / Toddler



When you notice an injury to a child, try to record the following information in respect of each mark:

- Exact site of injury on the body, e.g. upper outer arm/left cheek
- Size of injury - in appropriate centimetres or inches
- Approximate shape of injury, e.g. round/square or straight line
- Colour of injury - if more than one colour, say so
- Is the skin broken?
- Is there any swelling at the site of the injury, or elsewhere
- Is there a scab? / any blistering? / any bleeding?
- Is the injury clean? or is there grit/fluff etc
- Is mobility restricted as a result of the injury?
- Does the site of the injury feel hot?
- Does the child feel hot?
- Does the child feel pain?

Child & Young Person Name…… Date of Birth……

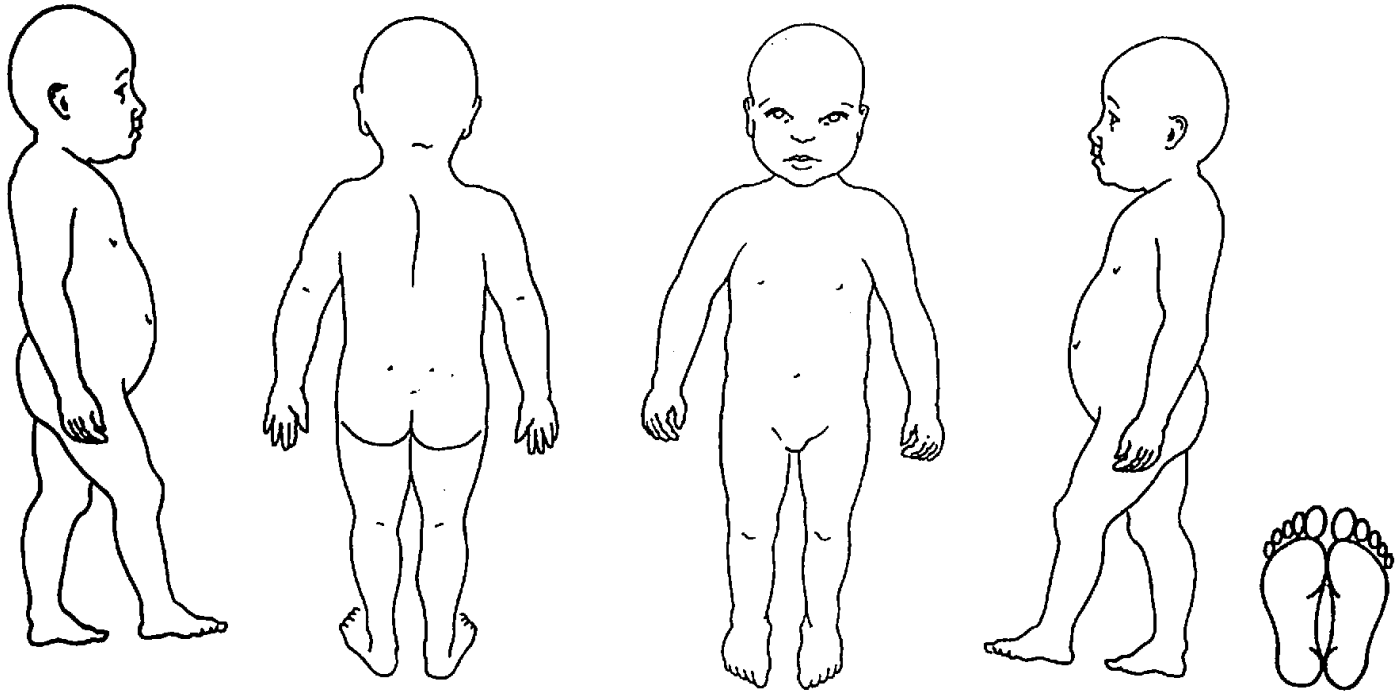
Date & Time Body Map Completed……

Name of Person Completing Body Map…… (Please Print Name)

Signed……Designation/Base…… Witnessed by…… (Please Print Name)

Signature……..

Body Map: Baby / Toddler



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Date & Time Body Map Completed……

Name of Person Completing Body Map…… (Please Print Name)

Signed…… Designation/Base……

Witnessed by…….. (Please Print Name) Signature……

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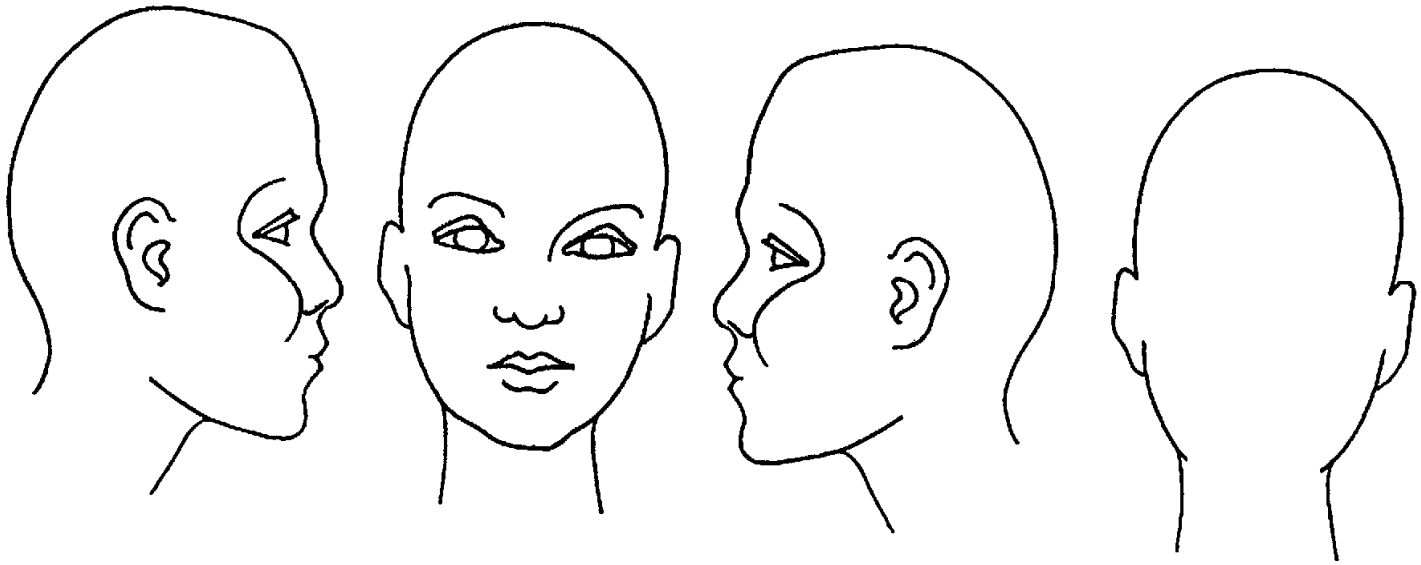
Body Map: Child



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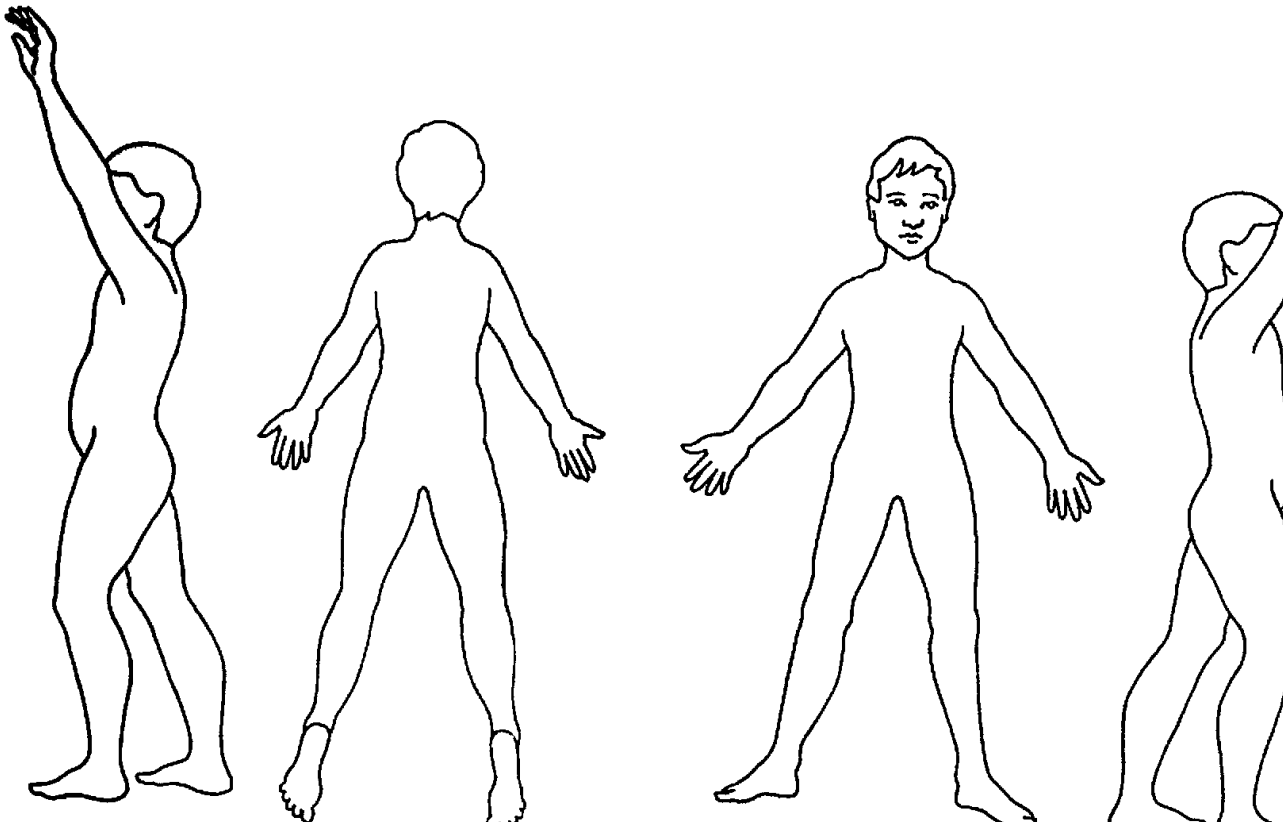

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Child & Young Person Name……Date of Birth…….

Date & Time Body Map Completed……

Name of Person Completing Body Map…… (Please Print Name)

Signed……Designation / Base……

Witnessed by……(Please Print Name) Signature