

Priority Topic: DOMESTIC VIOLENCE

Key Features:

Domestic Violence is not more commonly referred to as Intimate Partner Violence or IPV.

1. In a patient with [new, obvious risks for domestic violence](#) , take advantage of opportunities in pertinent encounters to [screen for domestic violence](#) (e.g., periodic annual exam, visits for anxiety/depression, ER visits).

What you should study: As of 2018, the USPSTF recommends screening all women of child-bearing age for Intimate Partner Violence

- ✓ [EM Cases BCE 65: Intimate Partner Violence](#)
- ✓ [Intimate Partner Violence AAFP 2016](#)
- ✓ [Intimate Partner Violence WHO 2012](#)
- ✓ [Intimate Partner Violence ACOG 2012](#)
- ✓ [Trauma in Pregnancy AAFP 2014](#) - **Consider IPV as a possible etiology**

2. In a patient in a [suspected or confirmed situation of domestic violence](#) :
 - a) Assess the [level of risk and the safety of children](#) (i.e., the need for youth protection).
 - b) Advise about the [escalating nature of domestic violence](#) .

3. In a situation of [suspected or confirmed domestic violence](#) , develop, in collaboration with the patient, an [appropriate emergency plan](#) to ensure the

safety of the patient and other household members.

What you should study:

- ✓ [Safety Plan Domestic Violence](#) – **Long document but VERY useful, scan for important features**

4. In a patient living with domestic violence, [counsel about the cycle of domestic violence and feelings associated with it](#) (e.g., helplessness, guilt), and its [impact on children](#).

What you should study:

- ✓ [Cycle of Violence](#)
- ✓ [Types and Cycles of Abuse](#)
- ✓ [Children's Exposure to IPV 2013](#)