



New Proposed Federal Law Would Make it Easier to Medically Kidnap Children by Doctors

By Allie Parker | September 6, 2019



Dr. Lynn K Sheets (left) and Senator Tammy Baldwin (right)

It is not just fractures parents may have to try and explain to avoid a life sentence of being accused of child abuse, or Shaken Baby Syndrome, if one Child Abuse Specialist gets her way in new proposed federal legislation.

According to Dr. Lynn Sheets, [Medical Director of child advocacy and protective services at Children's Hospital of Wisconsin](#), a bruise is a "sentinel injury."

Dr. Sheets claims:

"One of the things we realized is if you just call it a bruise, everyone has bruises. Everyone thinks about it as a minor injury including the doctors, including child welfare. So we needed to change the way people are thinking about these minor injuries in young infants."

She continues by saying “Think about them differently. They’re warning injuries or important injuries. They’re sentinel injuries. That’s why I coined the term and it has caught on nationally and even internationally.” ([Source.](#))

Her reasoning for this newly “coined” term is a [study](#) she participated in, in 2003: [Sentinel Injuries in Infants Evaluated for Child Physical Abuse.](#)

The study includes 401 children <12 months of age.

The children were found to have: definite abuse, intermediate concern for abuse, and no abuse.

Never is it mentioned how the “definite abuse” was founded. It only states the children were evaluated by the child protection team at a children’s hospital.

The study showed: 200 were definitely abused, 100 had intermediate concern for abuse, and 101 had no abuse. Of the 200 definitely abused, 27.5% had “sentinel injuries,” 8% of the intermediate concerning had the sentinel injuries, and 0% had “sentinel injuries” in the non abused children.

Of these “sentinel injuries,” 80% were bruises, 11% were intraoral injuries, and 7% were noted as “other.”

Their conclusion was: “sentinel injuries” are common in abused children.

Dr. Sheets has now gone so far as to propose legislation in the U.S. Senate, [S.B. 1009](#), which has been sponsored by Wisconsin Senator Tammy Baldwin. [Full text here.](#)

Dr. Douglas Smith, a retired University of Michigan professor of pathology who has testified in cases where parents are wrongly accused of Shaken Baby Syndrome, wrote the following in a letter to Senator Tammy Baldwin that *Health Impact News* obtained, opposing Dr. Sheets’ questionable science in trying to expand the net to catch parents allegedly abusing their children in order to remove more children from their parents by CPS:

In her paper, Dr. Sheets stated that “infants who are not yet cruising have bruises on well child physical examinations in 0% to 2.2% of cases, according to published research.”

She cites three references to support that conclusion. One was not an actual study but an opinion piece in a throw away journal.

The second study included 246 infants less than 9 months old and only 3 had bruises (1.2%). The third study found 11 bruises in 511 (2.2%) infants that were not yet cruising.

These studies had exclusions for suspicion for physical abuse. There is no gold standard for “suspicion” of abuse so one must consider that there may be bias in the exclusion criteria that would lower the incidence of bruises.

There is also the problem that some skin lesions are miscalled bruises. The child abuse pediatricians often claim any lesion that doesn’t blanch when pressed, is a bruise. Lesions such as petechial rashes and eczema can be misdiagnosed as bruises.

There are 4 million babies born in the United States each year. If 1.2-2.2% of them have a bruise at any given point in time, that represents 48,000 to 88,000 babies.

If all of those babies get a bone survey and a CT scan, that represents 10's of millions of dollars for the costs of the tests, untold expenses to the families falsely accused because of false positive tests, and up to 88 excess cancers per year.

Another study by Dr. Harper and colleagues asked the question in a different way.

They took a database that was collected for a study of siblings of children who had been referred to the child protection team for evaluation of physical abuse.

They extracted data from the original cohort of child protection team consults for babies less than 6 months old, who had been referred for isolated bruising.

They then asked how many of them had other injuries and how many had a final determination of substantial evidence of or definite physical abuse.

There were only 50 cases that presented with a single bruise and only 14 of those (28%) had a final diagnosis of physical abuse.

One should keep in mind that these were not all children that had a single bruise but only children who were referred by another doctor to the child protection team because they suspected abuse. ([Full article here.](#))

Dr. Sheets is apparently also teaching her "research" to others.

In a [power point presentation](#) she gives to other physicians, she claims "bruising" is NOT normal. "If the lesion won't blanch, it 'could' be a bruise, or something else."

Rare does not mean absolute. If something is rare, it does not automatically mean due to physical abuse. There are hundreds of thousands of rare diseases in the world. Why, when it comes to infants and children, who cannot speak up to defend themselves and their parents, is anything rare automatically considered abuse?

She finished her lecture by telling the doctors to "avoid words that minimize injury."

Therefore, always state it is a bruise. If you document it as "bruise-like," it might not hold as much weight with CPS or DHHS.

So in other words, Sheets is teaching doctors to falsify medical documents for the purpose of misleading CPS and DHHS. I do believe this is considered Obstruction of Justice.

A [fact sheet](#) to oppose [SB 1009](#) was prepared by United Family Advocates, Diane Redleaf, Andrew Brown, Family Justice Resource Center, Michelle Weidner, with the additional support of these groups: Movement for Family Power, Welfare Warriors, and others.

This fact sheet points out key problems in the bill.

The first point is using words like "injury" in a diagnosis.

Doctors diagnose the existence of a bruise or other skin lesion, but cannot diagnose the cause or mechanism.

By using words like “injury” or “abusive,” a physician is essentially accusing parents and caregivers of causing the lesions.

The bill, as pointed out by the fact sheet, is also proposing the lead in these investigations will mainly be Child Abuse Pediatricians.

This revokes outside or unbiased opinions and consultations with other specialties that could point to another cause for these lesions. They’ve already been diagnosed as “injuries.”

Finally, the study used in support of the bill, as referenced earlier in this article, is bias, as it was conducted by Dr. Sheets herself, and is flawed.

According to [a study](#) by Viswanathan M, Berkman ND, Dryden DM, et al, titled: *Assessing Risk of Bias and Confounding in Observational Studies of Interventions of Exposures: Further Development of the RTI item Bank [Internet]*, they concluded:

Attributing causality to interventions from such evidence requires prespecification of anticipated sources of confounding prior to the review, followed by appraisal of potential confounders at three levels: outcomes, studies, and the body of evidence.

We propose a substantial expansion in the critical appraisal of confounding when systematic reviews include observational studies for evaluation of benefits or harms of interventions. Questions about burden, reliability, and validity remain to be answered. Consensus around specific items necessary for evaluating risk of bias for different types of observational study designs does not yet exist.” ([Source.](#))

This bill, if passed, is a recipe for disaster, fueled by money, and will likely result in countless more false allegations of child abuse.

This means more CPS involvement in families, which will take more of their time that they could be using to investigate real abuse and neglect, tearing innocent families apart based on flawed studies, misleading information in medical reports, and biased opinions, which are already why so many children are being medically kidnapped.

You can give feedback to Tammy Baldwin, US Senate here:

<https://www.baldwin.senate.gov/feedback>

You can find your states US Representative here:

<https://www.govtrack.us/congress/members>

About the Author



Allie Parker is a [Family Advocate](#) and mother. She is a surviving victim of a false Child Abuse Pediatrician’s accusation. Read [her story here](#).