Near Fatality Criteria and Determination Flow Chart (rev. 4/2024)

“Near fatality” is a phrase used in child protective services. It is not a medical term. It is defined as follows:

- Child Abuse Prevention and Treatment Act (CAPTA), Chapter 67, subchapter 1, General program, the term “near fatality” means an act that, as certified by a physician, places a child in serious or critical condition.
- KRS 600.020 (40) “Near fatality means an injury that, as certified by a physician, places a child in serious or critical.

If any of the following factors are present, use the Near Fatality (NF) chart to evaluate whether the circumstance meet the criteria for applying the designation.

- Life-saving procedures have been performed (CPR, intubation, administration of Narcan with a marked improvement or stabilization of previously unstable vital signs, blood transfusions and IV fluids).
- Child will be/was admitted to the intensive care unit (ICU) including pediatric intensive care (PICU) and neonatal intensive care unit (NICU), or step-down unit, as a result of the injury and/or alleged neglect.
  - The condition of the child admitted to the ICU/step-down unit must be considered. If the child is admitted for observation, such as after surgery, the condition MAY NOT meet that of a near fatality.
- The child’s vital signs were unstable at any time.
- Any acute intracranial (brain) bleeding or internal organ injury with potential for fatal outcome without intensive/critical care or observation.
- Emergently transferred to a referral or specialty hospital due to serious condition of the child, not just due to a lack of pediatric inpatient providers.

If consultation is needed, email: DCBSChildProtection@ky.gov
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A report alleging maltreatment involving a deceased child may be accepted without a fatality designation but, if a report is accepted under these circumstances, the agency must also consider whether the information provided supports application of the fatality designation. A fatality designation is applied when a report of maltreatment meets acceptance criteria and there is suspicion that the maltreatment contributed to the child’s death.

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