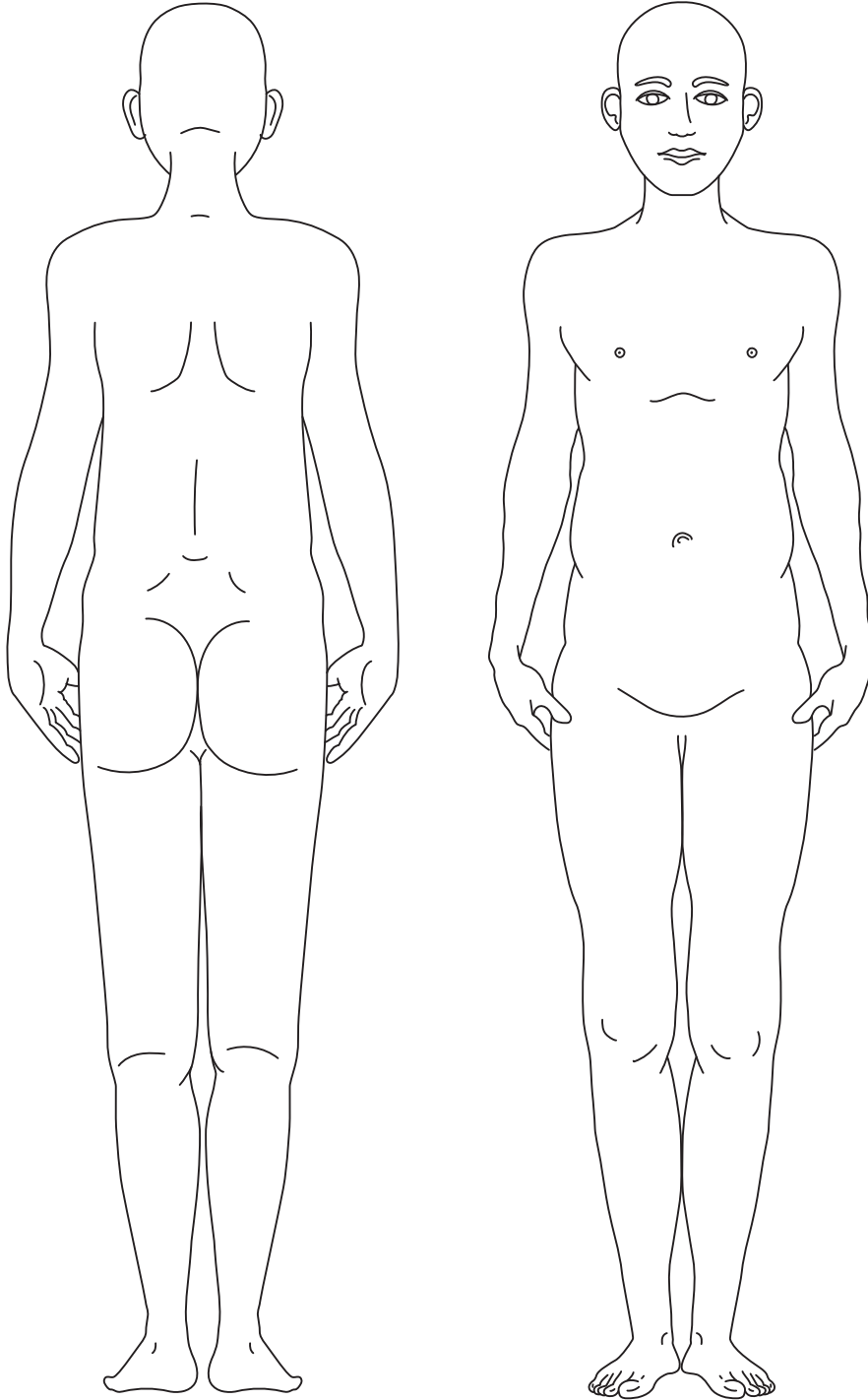


Body Diagram—Child



No injury noted

Page ____ of ____

Examiner's initials: _____

| |
|------------------|
| PATIENT LABEL OR |
| PATIENT'S NAME: |
| MRN# |