

## T11

## SEXUAL ASSAULT

Sexual assault is a devastating life crisis. It involves both emotional and physical trauma. Management of patients suspected of being sexual assault victims requires attention to the patient's emotional and physical needs.

**GENERAL**

- ensure personal safety and safety of bystanders
  - the assailant may still be present
  - police should be contacted if they are not already on scene
  - the scene should be considered a crime scene
    - do not alter, disturb, or displace any items on scene unless required to do so in the course of patient care
- primary survey
  - identify and treat all life-threatening injuries
  - provide ongoing emotional support
- consider load and go
  - in cases of suspected child abuse consideration should be given to immediately removing the child from an unsafe environment to a secured location as soon as possible
- obtain a relevant history, if possible
  - EMS personnel should be careful to document any observations and statements fully and in writing
- secondary survey
  - assess for trauma, especially around the thighs, lower abdomen, and buttocks
  - if vaginal bleeding is evident, treat as indicated (see Genital Injuries and Medicolegal Guidelines)
  - treat other injuries as indicated
  - assist ventilations if required
- do not allow the patient to exert him/herself - e.g. walking, standing unassisted to transfer to the stretcher, etc.
- initiate transport
  - on scene times should be kept to a minimum
  - treat other life-threatening conditions en route
- transport the patient to the nearest appropriate health care facility
  - notify the receiving health care facility of the patient's status as soon as possible
  - transport patient in a position of comfort, injuries permitting
  - attempt to maintain a calm environment while en route
  - monitor and treat the patient en route
  - additional surveys and treatments should be conducted en route
- report all findings to the medical staff at the receiving facility and ensure that the name and designation of the staff who receive the report are clearly noted on the patient care report
  - obtain the correct spelling and title for the medical personnel accepting the report
  - ensure that reporting to the medical staff is done in a manner which safeguards the patient's confidentiality

**NOTE**

- protect the scene and preserve evidence in cooperation with the police
- action can minimize the helplessness that the patient may be feeling
  - assist the patient by telling them what can and should be done immediately
- discourage the patient from bathing, showering, washing, gargling, brushing teeth, douching, urinating or changing clothes
  - this could destroy evidence
- the EMS personnel's immediate reaction is important in providing effective psychological support
  - avoid imposing personal feelings on the patient
  - attempt to assess the patient's emotional state
  - present a calm, professionally concerned demeanor when talking to and assessing the patient
- this is a highly emotional and potentially volatile situation which requires appropriate documentation
  - ensure that all findings and treatments are clearly documented on the patient care report, including
    - the patient's complaints
    - pertinent information about the incident that related to care and injuries
    - objective observations
    - findings from examinations and assessments
  - refrain from subjective comments or notations on the patient care report
- while the gender of the EMS personnel may have less impact than their ability to relate well, an EMS team member of the same sex as the patient may relate better to the patient in a time of crisis
- common physical reactions to sexual assault may include
  - struggling and screaming even hours or days after the assault
  - physical and psychological paralysis
  - pain and shock from penetration or abuse
  - choking, gagging, nausea, vomiting
  - urinating
  - hyperventilating
  - loss of consciousness
  - altered mental status
- any reporting to police and medical staff about the event should be done with the patient's consent and with consideration for the patient's privacy and any applicable legislation regarding patient information
  - thorough documentation on the patient care report is essential
    - a supplemental note or addendum to the patient care report can document the response in greater detail
  - EMS personnel could be required to provide evidence months or years later regarding the incident and should ensure they secure any notes or reports appropriately

*NOTES :*