



South Eastman Health  
Santé Sud-Est

<p><b>Approved By:</b> Regional Clinical Manager Team</p>	<p><b>No:</b> AC-S001</p> <p><b>Category:</b> Regional Client Care Manual</p> <p><b>Source:</b> Acute Care</p>
<p><b>New/Replaces:</b></p> <p><b>Date Approved:</b> 13 June 2012</p> <p><b>Reviewed:</b></p> <p><b>Revised:</b></p>	<p><b>Subject:</b> Sexual Assault</p>

PURPOSE

To provide a competent and consistent approach of care and examination for those patients with alleged sexual assault.

POLICY

1. The sexual assault policy and procedure will apply to any person alleging sexual assault presenting to any South Eastman facility or program, with or without police escort.
2. Sexual Assault Nurse Examiners (SANE) when available will examine patients 17 years of age and older at the Bethesda Emergency Department (ED).
3. The patient must give verbal consent for forensic and medical examination.
4. The emergency physician must see all medically unstable patients.
5. For patients less than or equal to 16 years of age, the attending physician or nurse practitioner will notify the attending physician at Winnipeg Children’s Hospital.
6. Post-Exposure Prophylaxis will be discussed with patient and provided with patient consent.
7. The RCMP will be notified when the patient wishes.
8. The Sexual Assault Examination Kit (SAEK) must be completed as instructed in the kit. All evidence must not be left unattended by the examiner. Evidence must be handed over to the RCMP.

PROCEDURE

1. When the patient is less than or equal to 16 years of age, then the following will occur:
  - a. The patient is triaged according to Canadian Triage and Acuity Scale.
  - b. ED physician or nurse practitioner (NP) will discuss case with attending physician at Winnipeg Children’s Hospital for referral. A plan for medical transfer will be made. The patient less than or equal to 16 years of age will receive assessment and management at the referring facility. Emergent medical concerns will be appropriately treated prior to transfer.

- c. Notify Child & Family Services (CFS) 346-7340  
371-1346 (after hours)

**From this point forward, patient will refer to those aged 17 years of age and older.**

2. Patient presents to the Bethesda Emergency Department (ED). *The tri-sites will contact the Bethesda ED prior to sending patient to see if and when a SANE is available.*
3. When no SANE is available, then the attending physician, at any of the regional sites, is responsible to either complete the exam and provide appropriate post-exposure prophylaxis OR refer the patient to the Health Sciences Center Emergency Room. Discussion with the referral site is recommended.
4. Patient is triaged according to Canadian Triage and Acuity Scale.
5. When the patient is medically unstable, they must be seen by the emergency department physician for immediate treatment.
6. When the patient is medically stable, the following will occur:
  - a. An ED nurse will contact a SANE via the phone list.
  - b. Notify RPN/crisis team or support worker. To come as a support person at this time, not for assessment.
7. When a **SANE is available**, the following will occur:
  - a. Determine if patient would like the sexual assault examination kit (SAEK) completed. The SAEK is obtained from the RCMP. This can be done within 72 hours of the assault or later depending on the circumstances of the assault.
    - i. The patient may choose to have SAEK with no police report, or
    - ii. SAEK with police report
  - b. If patient does not want SAEK done, then provide medical treatment of any injuries. Post exposure prophylaxis (follow regional Post-Exposure Protocol AC/LTC 6.6 RM-57: Infection Control 6.6) will be offered and provided with patient's informed consent, including: pregnancy prevention (i.e. Plan B), sexually transmitted infections prophylaxis and treatment.
8. When a **SANE is not** available and the attending physician agrees to care for the patient, the following will occur:
  - a. The ED physician will provide the care noted in 7a and 7b.
9. Follow Up
  - a. Antiviral Prophylaxis: when the patient is started on antiviral prophylaxis, i.e. Combivir, follow up blood work should be done in two weeks with the ED NP.
  - b. Post-Exposure Protocol: blood work will be done according to protocol.
    - a. When the patient requires Hepatitis B immunization, a public health referral (Post-Exposure Public Health Nurse Follow-up Referral) will be done for administration of the remaining two doses.
    - b. The patient will be instructed to follow-up with their primary care provider. When they do not have one, follow-up can be arranged with ED NP.
    - c. When the patient is not already connected with the Mental Health program, then suggest this service.

- d. Complete and provide to patient the Discharge Instructions Following Sexual Assault form.
10. Documentation:
- a. Post Exposure Report
  - b. Post Exposure Source Risk Assessment Form
  - c. PEP Physician Letter
  - d. Exposed Consent Form
  - e. HIV Post-Exposure Prophylaxis
  - f. Post-Exposure Public Health Nurse Follow-Up Referral
  - g. SAEK if completed and all its forms

### References

North Eastman Health Association Inc. AC 6-680 R.1 Sexual Assault Protocol. June 2006.

South Eastman RHA. AC/LTC 6.6 RM-57 Post-Exposure Protocol.

South Eastman RHA. PHIA – C10 Collection of Personal Health Information

South Eastman RHA. PHIA – D14 Disclosure of Personal Health Information to the Police

South Eastman RHA. PHIA – S10 Security and Storage of Personal Health Information

South Eastman RHA. AC/LTC 6.6 RM – 57. Post-Exposure Protocol