



## Section 1: Administrative / Medical Control

### GUIDELINE/PROCEDURES: DOMESTIC VIOLENCE/SEXUAL ASSAULT/RAPE/ELDER ABUSE

- Domestic violence is physical, sexual, or psychological abuse and / or intimidation, which attempts to control another person in a current or former family, dating, or household relationship. The recognition, appropriate reporting, and referral of abuse is a critical step to improving patient safety, providing quality health care, and preventing further abuse.
- Elder abuse is the physical and / or mental injury, sexual abuse, negligent treatment, or maltreatment of a senior citizen by another person. Abuse may be at the hand of a caregiver, spouse, neighbor, or adult child of the patient. The recognition of abuse and the proper reporting is a critical step to improve the health and well - being of senior citizens.

#### PURPOSE

Assessment of an abuse case based upon the following principles:

- Protect the patient from harm, as well as protecting the EMS team from harm and liability.
- Suspect that the patient may be a victim of abuse, especially if the injury / illness is not consistent with the reported history.
- Respect the privacy of the patient and family.
- Collect as much information and evidence as possible and preserve physical evidence.

#### PROCEDURE

1. Assess patient(s) for any psychological characteristics of abuse, including excessive passivity, compliant or fearful behavior, excessive aggression, violent tendencies, excessive crying, behavioral disorders, substance abuse, medical non-compliance, or repeated EMS requests. This is typically best done in private with the patient.
2. Assess the patient for any physical signs of abuse, especially any injuries that are inconsistent with the reported mechanism of injury. The back, chest, abdomen, genitals, arms, legs, face, and scalp are common sites for abusive injuries. Defensive injuries (e.g. to forearms), and injuries during pregnancy are also suggestive of abuse. Injuries in different stages of healing may indicate repeated episodes of violence.
3. Assess all patients for signs and symptoms of neglect, including inappropriate level of clothing for weather, inadequate hygiene, absence of attentive caregiver(s), or physical signs of malnutrition.
4. Assess all patients for signs of sexual abuse, including torn, stained, or bloody underclothing, unexplained injuries, pregnancy, or sexually transmitted diseases.
5. Immediately report any suspicious findings to the receiving hospital (if transported). If an elder or disabled adult is involved, also contact the Department of Social Services (DSS). After office hours, the adult social services worker on call can be contacted by the 911 communications center.

#### SEXUAL ASSAULT:

- A victim of a sexual assault has experienced an emotionally traumatic event. It is imperative to be compassionate and non-judgmental. Be sensitive to the victim. Expect a wide range of response to such an assault, depending upon social, cultural, and religious background.
- An abbreviated assessment may be indicated based on the patient's mental state.
- Your responsibility is **patient care** and **not detective work**. Questioning of the patient should be limited, because there is no need for the EMS provider to attempt to get a detailed description of the assault. That type of questioning by EMS can harm the investigation, and should be left up to professional investigators. However, carefully document verbatim anything the patient says about the attack. **DO NOT** paraphrase. Based upon the patient's mental state, the following questions may be asked and documented: (Do not persist with questions.)
  - o What happened? (A brief description is acceptable)
  - o When did the attack occur?
  - o Did the patient bathe or clean up after the attack?
- If the patient changed his / her clothes, attempt to bring the clothes in a brown paper bag. **DO NOT** use a plastic bag.
- If the patient did not change his / her clothes, have the patient bring a change of clothes to the hospital (if possible).  
Transport the patient to an appropriate medical facility. Some hospitals are capable of providing additional sexual assault care (SANE Program).