EMS Adult Protocols

<table>
<thead>
<tr>
<th>Protocol Title</th>
<th>Sexual Assault (Alleged)</th>
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<tbody>
<tr>
<td>Original Adoption Date</td>
<td>08/2010</td>
</tr>
<tr>
<td>Past Protocol Updates</td>
<td>NOT APPLICABLE, PROTOCOL NEW IN 2010</td>
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<tr>
<td>Date of Most Recent Update</td>
<td>December 26, 2013</td>
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<tr>
<td>Medical Director</td>
<td>Chad Torstenson M.D.</td>
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**Basic Treatment Guidelines:**
1. Identify yourself to the patient, assure patient that they are safe, and are in no further danger.
2. Do NOT burden patient with questions about the details of the crime; you are there to provide emergency medical care.
3. Be alert to immediate scene and document what you see! Touch only what you need to touch at the scene.
   - If it is necessary to disturb evidence, DOCUMENT WHY and how it was disturbed.
5. Treat for shock if indicated.
6. Treat other injuries as indicated.

Preserve evidence, such as clothing you may have had to remove for treatment. To preserve the “chain of evidence be sure that the clothing is NEVER, at any time, left unattended. Contact local Law Enforcement if not present.

**Advanced Treatment Guidelines:**
1. If patient's condition indicates, establish IV of **NORMAL SALINE** at a TKO rate.
2. Monitor EKG and treat dysrhythmias if indicated following the appropriate protocol.

**Special Considerations:**
1. Crewmembers of the same sex may relate better to the patient in time of such emotional crisis. Accurately record your observations and conversations with the patient.
2. DO NOT allow the patient to bathe, douche, change clothes, or go to the bathroom.