



Objectives: Sexual Assault

1. Provide comprehensive care to all patients who have been sexually assaulted, regardless of their decision to proceed with evidence collection or not.
2. Apply the same principles of managing sexual assault in the acute setting to other ambulatory settings (e.g. medical assessment, pregnancy prevention, STI screening/treatment/prophylaxis, counselling).
3. Limit the documentation in sexual assault patients to observations and other necessary medical information (e.g. avoid recording hearsay information).
4. In addition to other post-exposure prophylaxis measures taken, assess the need for HIV and Hepatitis B prophylaxis in patients who have been sexually assaulted.
5. Offer counselling to all patients affected by sexual assault, including victims, family members and partners.
6. Revisit the need for counselling in patients affected by sexual assault
7. Enquire about undisclosed sexual assault when seeing patients who have symptoms such as depression, anxiety and somatization.