

Guidelines for Scheduling Medical Evaluations

Sexual Abuse allegation prompting request

CLEAR DISCLOSURE BY CHILD

! IMPORTANT POINTS

- Time of last sexual contact w/ alleged perpetrator?
- Any current anogenital complaints?
 - Pain, bleeding
 - Bruising, abrasions, lacerations
 - Vaginal/ penile discharge

S C H E D U L I N G T I M E L I N E

- Incident ≤ 72 hours
- Child/adolescent w/ genital bruising, abrasions, lacerations
- * Active anogenital bleeding—
referral to ED

- Incident > 72 hours but ≤ 10 days
- Anogenital complaint
 - Vaginal/penile discharge

- Incident ≥ 10 days
- No anogenital complaints

same day as referral

within 24-72 hours
or first available

within next 7 days
or first available

NO DISCLOSURE BY CHILD

Sexual Acting Out or Parental Concern

- Forensic Interview
- Caretaker and/or 3rd party information

A PREPUBERTAL CHILD (≤ 11 YEARS) WITH:

- Questionable anogenital findings after an evaluation by PCP due to genitourinary complaint or parental concern
- STD diagnosed by PCP

The need/timing for a medical assessment is determined by the obtained information with medical provider input

schedule within 24-72 hours
or first available

Guidelines for Scheduling Medical Evaluations

Physical Abuse allegation prompting request

! IMPORTANT POINTS

- Age of Child? Non Ambulatory?
- When were injuries first noticed?
- Are any injuries currently present?
- Skin injuries
 - Multiple?
 - Pattern?
 - Location?
- More than one type of injury presenting simultaneously?
- Was medical care sought?
- History of prior injuries?

SCHEDULING TIMELINE

•Child < 5 years or nonverbal child
≥ 5 years old with acute skin injuries

•Verbal child ≥ 5 years old with:

- Multiple skin injuries with or without recognizable pattern
- Located on face, neck, trunk, buttocks
- Different type of injuries presenting simultaneously

•Medical follow-up for a child initially evaluated at ED for skin/skeletal injuries concerning for abuse

•Child who sustained injuries recently (within last 10 days) per history, now with no visible injuries or with healing injuries present

•Child with a past history of inflicted injuries, observed with multiple scars with or without a recognizable pattern

same day as referral

within 24-72 hours
or first available

within next 7 days
or first available



Guidelines for Scheduling Medical Evaluations

Drug Exposed Child allegation prompting request

Important points

- Was child found living in an environment that was actively manufacturing drugs?
- Time lapsed since discovery of child in manufacturing lab?

S C H E D U L I N G T I M E L I N E

Active clandestine drug lab and/or child with symptoms of intoxication (e.g. irritability, hyperactivity, drowsiness, vomiting, feverish, increased heart rate, respiratory difficulty, seizures)

- Medical follow up for a child initially evaluated at emergency department for exposure to a clandestine lab
- Child living in an environment where illicit drugs, including pharmaceuticals (not under physician's management) are used, traded/trafficked, or sold.

to Emergency Department
for evaluation

within 7 days or
first available