

Quick Tips:

DO:

- Contact the SARC as soon as possible
- Document injuries with descriptions and photos as appropriate
- Document the victim's words as accurately as possible in your clinical note
- Keep the victim in a single exam room, away from public
- Make the victim as comfortable as possible and allow an escort if desired during treatment/examination
- Arrange for additional clothing for the victim to change into after the forensic exam
- Be professional, regardless of circumstances
- Recommend a referral for mental health counseling when appropriate
- Document consent to the examination or the existence of a search authority (for suspects) in the clinical note

DON'T:

- Place victim or suspect in same area or exam room -- EVER
- Let victim or suspect urinate without capturing the urine for examination
- Let victim or suspect change clothing, wash, etc. until after a forensic exam
- Talk or comment about the incident within earshot of the victim or suspect
- Make victim repeatedly recount the incident.

Priorities:

- Render medical care for acute injuries requiring attention
- Contact the SARC to ensure victim reporting rights
- Provide victim medical and mental health care
- Preserve evidence
- Follow documentary guidelines



*Your Local
Sexual Assault Response Coordinator
Contact Information:*



Healthcare Provider's Role in Responding to Sexual Assault

S A P R O

Sexual Assault Prevention & Response Office

WWW.SAPR.MIL



Sexual Assault Prevention and Response



Your Part as a Provider

As a health care provider (HCP), you may be the first point of contact for victims of sexual assault. The following information is taken from the Department of Defense (DoD) Sexual Assault Prevention and Response Directive 6495.01 and Instruction 6495.02. Knowing these requirements can provide you with care options to assist your patients who are dealing with sexual trauma.

Reporting and Care

In most situations, the military requires providers to notify law enforcement when patients report being the victim of a crime. However, in cases of sexual assault, providers should NOT notify law enforcement. Instead, you should notify the Sexual Assault Response Coordinator (SARC) for your installation.



This allows the SARC to explain to patients their two reporting options, as well as any available treatment and counseling services. The provider's reporting requirement is met once the SARC has been contacted. Further reporting to law enforcement will be handled by the SARC should the patient choose to make an Unrestricted Report.

Military members who experience a sexual assault have the following reporting options:

Unrestricted Reporting (UR). This option follows standard treatment and reporting procedures that typically include acute medical care, a Sexual Assault Forensic Examination, prophylaxis for pregnancy or sexually transmitted infections, and a referral for mental health counseling. Under this option, the patient's command is notified of the crime and law enforcement conducts some form of investigation.

Restricted Reporting (RR). This option allows patients to confidentially receive medical care, mental health counseling, and advocacy services without notification to their command or law enforcement. RR prioritizes patient care over offender accountability. RR also provides a new pathway to care for those patients who have historically foregone treatment because of concerns about the involvement of their command and the criminal justice system.

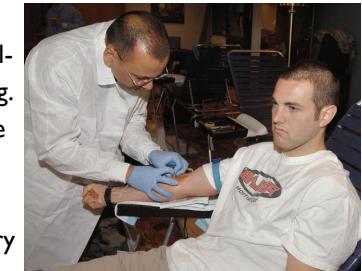
The preceding options reflect the DoD's commitment to victim care under traumatizing circumstances. While most sexual assaults go unreported, it is our hope that these options will help patients more quickly seek care and eventually report their crime. Early access to care may prevent or minimize the longer lasting health and psychological problems associated with sexual assault. Following these reporting pro-

cedures will help create a climate of confidence that responds to patient concerns and fosters recovery.

Sexual Assault Forensic Examinations (SAFEs)

A SAFE may be conducted under both Unrestricted and Restricted Reporting. Guidelines for the collection and preservation of evidence under each option are available from Directive 6495.01 and Instruction 6495.02 (<http://www.dtic.mil/whs/directives>).

SAFES are best performed by providers who have specialized training. If SAFEs are not conducted at your military treatment



facility, agreements with civilian medical providers should be pursued, created or updated to honor Restricted Reporting. Sexual assault exam protocols and evidence collection kits for both victims and suspects can be obtained through normal government supply channels. Examinations of victims require consent. Examinations of suspects require either a written or verbal search authority from a military magistrate or the suspect's consent.