13F – REPORTED/SUSPECTED SEXUAL ASSAULT ADULT & PEDIATRIC

EMERGENCY MEDICAL DISPATCHER
EMERGENCY MEDICAL RESPONDER
EMT
EMT-INTERMEDIATE 85
ADVANCED EMT
PARAMEDIC

TREATMENT PRIORITIES
1. Supportive care – physical/emotional
2. IVF if needed for hypotension
3. Sexual assault exam capable destination

EMD

ADVISE TO REST IN COMFORTABLE POSITION
ADVISE NO FOOD OR DRINK
ADVISE TO AVOID MOVEMENT UNLESS NECESSARY

EMR | EMT

GENERAL SUPPORTIVE CARE
OBTAIN VITAL SIGNS
O2 VIA NC OR NRB, AS APPROPRIATE

INSTRUCT PATIENT NOT TO CHANGE CLOTHING OR URINATE/DEFECATE

WHEN TRANSPORTING, PREFERENCE TO UTILIZE TREATING PROFESSIONAL SAME GENDER AS PATIENT

TRANSPORT TO FACILITY THAT PERFORMS SEXUAL ASSAULT EXAMS.

REPORT ANY CONCERNS/SUSPICIONS OF SEXUAL ASSAULT TO RECEIVING FACILITY PERSONNEL

EMT-I85 | AEMT

IV ACCESS
ADULT: IV NS TKO IF SYS BP ≥ 100 mmHg WITHOUT HYPOTENSIVE SYMPTOMS
ADULT: IV NS 250 mL BOLUS IF SYS BP <100 mmHg WITH HYPOTENSIVE SYMPTOMS & NO SIGNS OF PULMONARY EDEMA,
ADULT: REPEAT UP TO 2 LITERS NS IF SYS BP REMAINS < 100 mmHg WITH HYPOTENSIVE SYMPTOMS & NO SIGNS OF PULMONARY EDEMA
PEDIATRIC: IV NS TKO IF SYS BP ≥ (70 + 2x age in years) mmHg
PEDIATRIC: IV NS 20 mL/kg BOLUS IF SYS BP < (70 + 2x age in years) mmHg & NO SIGNS OF PULMONARY EDEMA

PARAMEDIC

CONTINUOUS ASSESSMENT & TREATMENT PER APPLICABLE PROTOCOL(S)