

EDs are Variable in Their Evaluation and Treatment of Teen Sexual Assault Victims Compared to Recommended Pathways

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When an adolescent presents to the emergency department (ED) needing to be evaluated for alleged sexual assault, there is a need to do things right in terms of recommended testing and prophylaxis for sexually transmitted infections (STIs) and pregnancy. Yet how consistent are EDs in their approach to these victimized teens? Schilling et al. ([doi/10.1542/peds.2015-2093](https://doi.org/10.1542/peds.2015-2093)) report on a retrospective study of teens seen for sexual assault in 38 EDs that are part of the Pediatric Hospital Information System (PHIS) database over the past decade or so.

The study includes more than 12,600 patients of which less than half received recommended testing and even smaller numbers got recommended prophylaxis. The authors explore the importance of having a specialized sexual assault pathway in place when it comes to having higher rates of prophylaxis. This study is rich in interesting and worrisome findings that hopefully will result in less variability and more consistency across EDs when it comes to evaluating teens who are victims of sexual assault.

To add even more context to the findings, pediatric emergency medicine specialists Drs. Mark Neuman and Nancy Kellogg offer their opinion in an accompanying commentary (REF). Please read this important article and commentary and then compare the data shared with what happens in your ED with the hope that a standard approach to these children will insure healthier short and long term outcomes.

Further Reading

- [Weapon Involvement in the Victimization of Children](#)
- [Medical Providers' Understanding of Sex Trafficking and Their Experience With At-Risk Patients](#)
- [Childhood Sexual Abuse and Suicidal Behavior: A Meta-analysis](#)
- [Pediatrics On Facebook](#)

