# JOB AID: MEDICAL MANAGEMENT OF CHILD SEXUAL VIOLENCE AND EXPLOITATION

Providers can use this job aid as a checklist reminder of what tasks should be completed when evaluating a child who has experienced sexual violence and exploitation.

- Obtain history from child without the caregiver present whenever possible.
- Document history obtained directly from child when appropriate, using verbatim quotes whenever possible (with children aged four and older).
- Obtain history from presenting caregiver without the child present whenever possible, unless the child is non-verbal.
- Document history obtained from the caregiver.
- Establish timeframe for last contact with offender (acute or non-acute exam).
- Identify and address safety issues if in-home offender identified.
- Identify and document any treatment rendered.
- Ensure evidence collection if assault is less than (<) 72 hours/3 days ago in pre-pubertal children.
- Ensure evidence collection if assault is less than (<) 168 hours/7 days ago in pubescent children.
- Identify and document body surface injury.
- Identify and document ano-genital injury.
- Offer pregnancy prevention when appropriate due to risk (penile/vaginal penetration reported or suspected) and stage of sexual development.
- Culture for sexually transmitted infections (STIs) when appropriate.
  - Urine NAAT testing in adolescent or prepubescent children
  - Swabs for anal and oral culture as required for gonorrhea or chlamydia
- Offer STI prevention in pubescent children.
- Offer HIVnPEP when appropriate and available.
- Meet mandatory reporting obligations when applicable.
- Provide community-based resources whenever possible.
- Plan and document follow-up care.

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By: Kim Day, RN, FNE, SANE-A, SANE-P, and Jennifer Pierce-Weeks, RN, SANE-A, SANE-P

For more information, please visit aidstar-one.com.

This job aid is an excerpt from the publication entitled, The Clinical Management of Children and Adolescents Who Have Experienced Sexual Violence: Technical Considerations for PEPFAR Programs, and can be accessed at: http://www.aidstar-one.com/focus_areas/gender/resources/reports/prc_technical_considerations.