

SEXUAL ABUSE THROUGH THE MEDICAL EYE

Lisa Wahl, Family Nurse Practitioner
Sexual Assault Nurse Examiner
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DISCLOSURES

- NO one will affiliate with me after I tell them my job in social gatherings
- NO \$\$-“financial disinterest” in child abuse
- I am employed by Providence St. Peter Hospital
- Still no money...



OBJECTIVES

- Myth Busters: The hymen and the “virgin check”
- Discuss acute vs non acute medical response to sexual abuse
- Discuss the differences between pediatric and adolescent/adult medical approach
- Review the Sexual Assault Emergency Medical Evaluation WA State Guidelines for all ages
- The science behind child disclosures of sexual victimization
- Staying in your lane: medical/legal
- Depictions: the clinician’s role in a criminal case



MYTH BUSTING

Fact or Fiction

The Role of the Medical Provider

- First and foremost, medical care
- Is one part of the needed response to potential maltreatment (CPS, law enforcement, and prosecutors)
- Cooperation and communication with other medical providers
- Open good faith exchange with these agencies is legal and protected
- HIPAA is trumped

The Role of the Medical Provider

- Perform an accurate and well documented History and Physical
- Perform a thorough, well documented *and humane* genital exam
- Develop a thorough differential diagnosis
- Treatment of medical conditions



ACUTE VS NON-ACUTE?

120 HOURS



ACUTE MEDICAL EXAM

- National protocols on evidence collection:
- Pubertal if <120 hours since contact
- Prepubertal best within 24 hrs., WA crime labs test all kits to 120 hrs. regardless of victim age
- Forensic evidence sent to the State Crime Lab for processing
- Harborview has protocol for obtaining forensic evidence :
- <http://depts.washington.edu/hcsats/>

SANE-A, SANE-P Certification Requirements

- Minimum 2 years RN
- 40 hours academic coursework
- Clinical preceptorship completion
- Minimum 300 hours practice as a SANE within the last 3 years

International Association of Forensic Nurses (IAFN)

- Certifying knowledge and expertise required for this specialty practice
- Possess ongoing professional commitment to providing quality patient care
- Promotes highest standards of forensic nursing practice through the development, implementation, coordination and evaluation of all aspects of forensic science

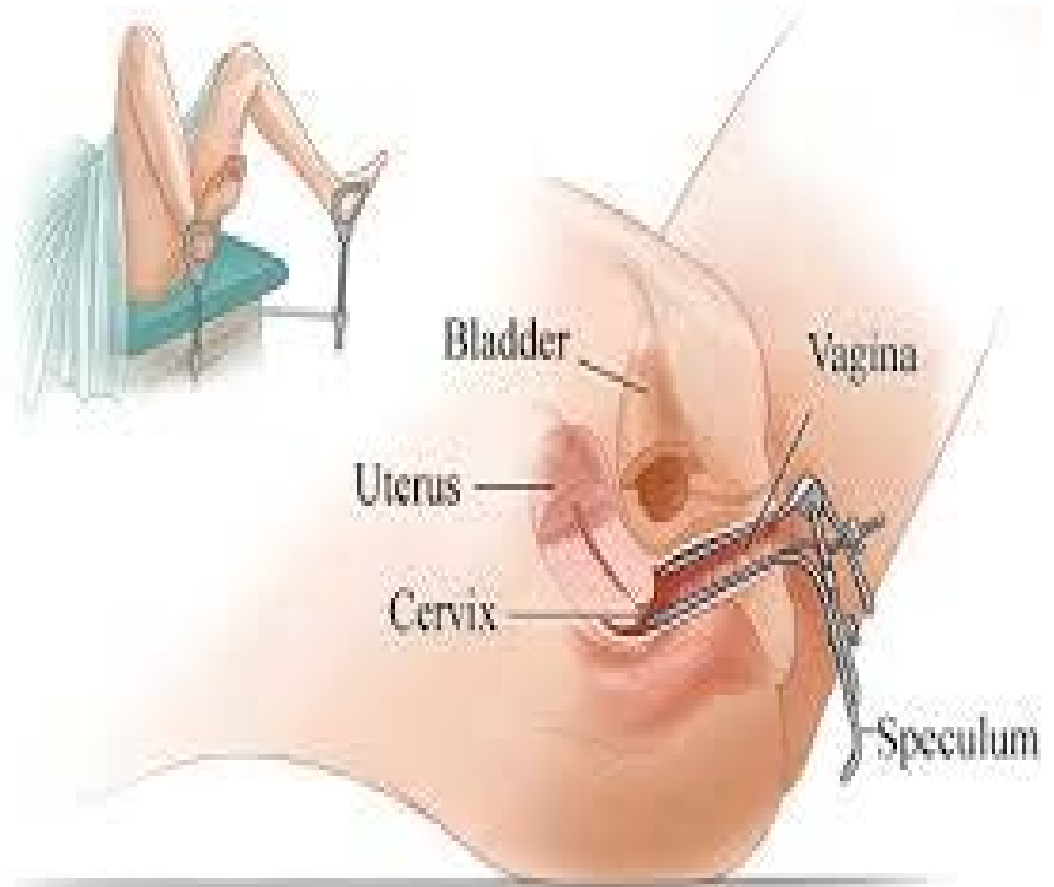
The Exam

- Subjective = Medical History
- Objective = Physical Exam
- Differential Diagnosis = ?
- Diagnosis
- Treatment
- What to Do Next

COMMON MISPERCEPTION



PUBERTAL SPECULUM EXAM



COLPOSCOPY



SCREENING FOR SEXUALLY TRANSMITTED INFECTIONS (STI)

Urine: gonorrhea/Chlamydia for all pubertal children, and prepubertal girls

Center for Disease Control recommends culture for prepubertal boys

Swabs... what went where? (Hint: Medical History)

Confirmation of sexual abuse:

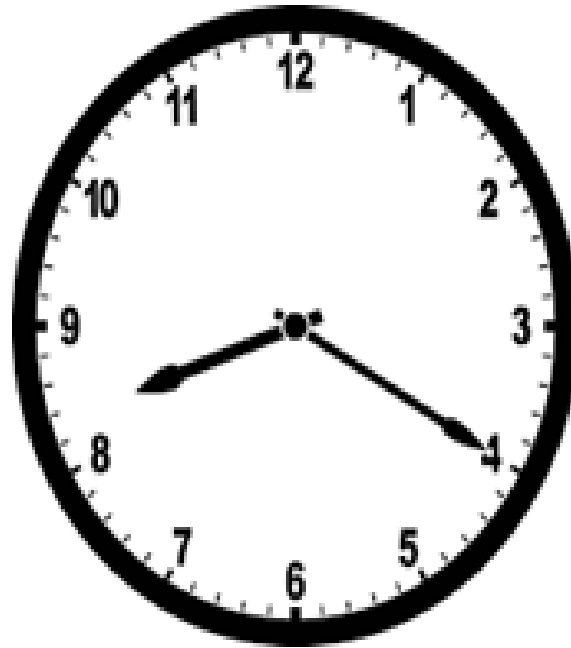
- *Acute physical trauma consistent with history of abuse
- *Chlamydia, gonorrhea, trichomonas vaginalis, or syphilis infection
- *Pregnancy in child <14 years of age

Suspicious for sexual abuse

- ~Evidence of past trauma consistent with history of abuse
- ~Genital warts if >5 years of age with history of abuse
- ~Genital HSV with history of abuse

“Evidence?”

BLUNT TRAUMA INJURY AKA RAPE



PROPHYLAXIS FOR PUBERTAL SEXUAL ABUSE

Azithromycin 1 gram orally for GC/CT

Ceftriaxone 250 mg IM for GC/CT

Metronidazole 2 grams orally for trich

Consider antiemetic aka "I'm going to throw up!"

Emergency contraception: Levonorgestrel or Ulipristal

PEP for HIV if indicated

HPV vaccine, Hep B vaccine

PREPUBERTAL?? TEST FIRST, TEST TWICE IF +, THEN TREAT

CHILD DISCLOSURE OF SEXUAL ABUSE



HOW CHILDREN DISCLOSE

- Children disclose WHEN THEY are ready to disclose
- Children disclose WHAT THEY are ready to disclose
- Children disclose TO the person they are ready to disclose to
- 10% of children disclose sexual abuse while they are children aka 90% don't tell.
- The average age of disclosure is 8.5 years; the range is 2-99
- Disclosure is a process, not a single event
- Disclosures occur in safe and familiar setting-bath time, bed time, car rides, Child Advocacy Centers 😊
- When children are removed from a dangerous or unsafe environment, it takes 6-12 months of consistency and safety to then disclose many forms of abuse. Frequently these will be the first disclosures of sexual abuse.

MEDICAL/LEGAL LANES



National Children's Alliance Medical Evaluation Standard, Coordinated with the Multidisciplinary Team Response

- Help insure the health, safety and well being of the child
- Diagnose, document and address conditions resulting from abuse
- Differentiate findings that are indicative of abuse or those that may be explained by other conditions
- Assess for developmental, emotional or behavioral problems
- Provide family education and referrals



MEDICAL/LEGAL LANES

- Purpose/process of taking a history from a child is not a forensic interview
- Eliciting information to create treatment plan
- Identification of alleged offender for purposes of child's ongoing physical and emotional safety
- CV for foundation of expertise
- Educating the jury

DEPICTIONS



CLINICIAN'S ROLE



Date:

Attention:

Law Enforcement:

Case Number:

Detective:

To Whom It May Concern,

I have reviewed the digital images that you provided concerning the above case. The question was whether any of the individuals pictured was less than 18 years old. In reviewing pictures to determine the approximate age of the individual in question, I utilize general impression of facial appearance, body habitus (based on 18 years medical training and clinical experience), and Tanner staging. Tanner staging is a system of classifying pubertal development as it progresses over time. The different stages of puberty, and the approximate age at which they occur, were derived from Dr. Tanner's studies of large groups of adolescents over time. While one cannot determine the exact age of an individual based on Tanner staging alone, one can use Tanner staging to help in deciding if an individual is likely to be less than 18 years old.

RESOURCES

- National Child Traumatic Stress Network
 - Act of Congress 2005, in response to 9/11 and the national trauma experienced by children affected by this act of terrorism
- Center for Youth Wellness, Dr. Nadine Burke Harris
- Washington State Department of Social and Health Services
 - 1-866-END HARM (1-866-363-4276)
 - Mandatory Reporters
- Education: Darkness to Light
- <http://www.edutopia.org>
- <http://massadvocates.org/tlpi/>
- <http://www.cdc.gov/violenceprevention/childmaltreatment/index.html>

RESOURCES

- Harborview Medical Center Sexual Assault Guidelines at <http://depts.washington.edu/hcsats/>
- International Association of Forensic Nurses at www.ForensicNurses.org
- Center for Disease Control at <https://www.cdc.gov/>
- www.WesternRegionalCAC.org
- National Children's Advocacy Center at nationalcac.org
- American Academy of Pediatrics
- *Medical Evaluation of Child Sexual Abuse, A Practical Guide*, by Martin A. Finkel, DO, FACOP, FAAP, and Angelo P. Giardino, MD, PhD, MPH, FAAP
- *Child Abuse and Neglect, Diagnosis, Treatment, and Evidence*, by Carole Jenny, MD, MBA

Questions?

Lisa Wahl, MSN, ARNP

Providence St. Peter

Sexual Assault Clinic and

Child Maltreatment Center

(360) 493-7469

