



Faculty of Forensic & Legal Medicine

Sexual offences: POST-PUBERTAL complainants

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The medico-legal guidelines and recommendations published by the Faculty are for general information only. Appropriate specific advice should be sought from your medical defence organisation or professional association. The Faculty has one or more senior representatives of the MDOs on its Board, but for the avoidance of doubt, endorsement of the medico-legal guidelines or recommendations published by the Faculty has not been sought from any of the medical defence organisations.

The flow chart overleaf must only be used after consideration of the following:

If the complainant is a child, i.e. under 18 years of age, this flowchart is for the use of forensic physicians and paediatricians. It is also important to consider who holds parental responsibility.

If the complainant is an adult, i.e. over 18 years of age, this flowchart is for the use of forensic physicians or nurses.

It is intended to help the decision making process when deciding if a forensic medical examination is warranted between the hours of midnight and 7am, or can wait and be done by the day team.

It is intended that it is only a guide. Decisions must be made on a case-by-case basis as to whether an earlier examination is required, with consideration given to external factors as necessary.

Wherever there is doubt, a discussion should take place between the referring party (usually the investigating officer), the forensic physician on call and/or paediatrician, as appropriate, for a child or young person under 18 years, or with the forensic physician or nurse for an adult.

The needs of the child should always be paramount as is also the case for an adult complainant.



In all cases consideration must be given to:

1. General welfare of young person/complainant.
2. Medical needs including;
 - a. Injuries
 - b. Emergency contraception
 - c. Post-exposure prophylaxis
 - d. Advice on STI screening
3. Safeguarding issues including child protection issues.
4. Early evidence kits

Has a Sexual Offence Medicine (SOM) trained

- forensic physician/paediatrician for a child or young person < 18 years
- forensic physician or forensic nurse if complainant is an adult

considered these issues?

Yes

Has there been oral, vaginal or anal – penile or digital penetration or ejaculation on the body surface?

No

Wait until the morning*

Yes

Within the last 12 hours?

No

Reconsider these factors

Yes

Wait until not intoxicated
In the meantime consider other forensic opportunities such as EEK, clothing etc

Yes

Is the complainant intoxicated?

No

Examine out of hours

*Providing that any delay does not push the examination outside any of the maximum time frames for relevant forensic samples as per the most recent FFLM Recommendations for the collection of forensic specimens from complainants and suspects.