



# Sexual offences: PRE-PUBERTAL complainants

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## This flow chart must only be used after consideration of the following:

The flowchart is for the use of forensic physicians and paediatricians.

It is intended to help the decision making process when deciding if a forensic medical examination is warranted in 'child-unfriendly' hours, or can wait and be done during the day.

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.

## The needs of the child should always be paramount.

### In all cases consideration must be given to:

1. General welfare of young person.
2. Medical needs including;
  - a. Injuries
  - b. Post-exposure prophylaxis
  - c. Advice on STI screening
3. Safeguarding issues including child protection issues.
4. Other forensic opportunities such as Early evidence kits, clothing, nappies, bedding etc.

Have these issues been taken into consideration?

Yes

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

No

Wait until the morning\*

No

Within the last 12 hours?

Yes

Reconsider these factors

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.