

Southern Illinois Regional EMS System

HH-2 DOMESTIC VIOLENCE SPOUSAL ABUSE

ALS/ILS/BLS

1. Illinois Law:
 - 1.1. It is the responsibility of the individual who identifies violence upon another person to notify the police and to provide information to the victim regarding services available to victims of violence as mandated by Illinois law.

2. Domestic Violence/Spousal Abuse Identification:
 - 2.1. Spousal abuse may occur when a couple lives together or are dating or between adults and teens in a relationship. Physical abuse includes deliberately inflicted injury, sexual abuse and neglect. Spousal abuse may include a history of forced sexual encounter.

3. Management:
 - 3.1. Do not enter scene unless safe:
 - 3.1.1. Contact police if they are not on the scene upon arrival.
 - 3.2. Remove patient from scene as quickly as possible.
 - 3.3. Initiate medical/trauma care.
 - 3.4. Treat injuries and contact medical control appropriate to treatment SOP.
 - 3.5. Note and document environment and patient's interaction with family/friends.
 - 3.5.1. Observe for and document discrepancies in the history obtained from the patient and family/friends.
 - 3.5.2. History that does not match the injury.
 - 3.5.3. Delay in seeking treatment.
 - 3.5.4. Obvious injuries and unexplained injuries.
 - 3.6. Inform the patient that you are required by law to report suspected victims of violence.
 - 3.6.1. Report incident/suspicious to police.
 - 3.6.2. **Document** on the run report the date, time and law enforcement personnel you reported the incident to.
 - 3.6.3. Report your suspicion to the ED staff upon arrival.
 - 3.7. Provide patient with information sheet regarding services available to victims of abuse/violence.
 - 3.7.1. **Document** on the run report that the patient received this information.

4. Refusal of Treatment/Transport:
 - 4.1. Inform the patient that you are required by law to report suspected/actual victims of violence to local law enforcement agencies.
 - 4.1.1. **Document** on the run report the date, time and law enforcement personnel you reported the incident to.
 - 4.2. Have patient sign "Refusal of Treatment/Transport" Form.
 - 4.3. Contact medical control if any questions of patient's mental competency to refuse treatment/transport.
 - 4.3.1. Refer to Patient Right of Refusal (A-6) SOP.
 - 4.4. Provide patient with information sheet regarding services to victims of abuse/violence.
 - 4.4.1. **Document** on the run report that the patient received this information.