

Pediatric Post-Sexual Assault Medications



Chlamydia: Azithromycin, PO

<45 kg: 20 mg/kg (max 1000mg)

>45 kg: 1000 mg

Gonorrhea: Ceftriaxone, IM

<45 kg: 125 mg

>45 kg: 250 mg

Trichomonas: Metronidazole, PO

<45 kg: 5 mg/kg/dose, TID for 7 days (max 2000mg/day)

>45 kg: 2000mg, as a single dose

HIV Prophylaxis for non-pill swallowing patients

Raltegravir chewable tablets (25 mg, 100 mg)

Weight	Dosing	# of chewable tablets
11 to 14 kg	75 mg twice daily	3 x 25 mg BID
14 to 20 kg	100 mg twice daily	1 x 100 mg BID
20 to 28 kg	150 mg twice daily	1.5 x 100 mg BID
28 to 40 kg	200 mg twice daily	2 x 100 mg BID
> 40 kg	300 mg twice daily	3 x 100 mg BID

Zidovudine oral solution (50 mg / 5 ml)

Weight	Dosing	Frequency
4 to 9 kg	12 mg/kg/dose	Twice daily
9 to 30 kg	9 mg/kg/dose	Twice daily
> 30 kg	300 mg/dose	Twice daily

Lamivudine oral solution (10 mg / ml)

Weight	Dosing	Frequency
< 50 kg	4 mg/kg/dose	Twice daily
> 50 kg	150 mg	Twice daily



**Pediatric ED
SEXUAL ASSAULT/ABUSE
Process Flow Sheet**

Is patient **≥13 years** with **sexual contact <96 hours**, stable, AND consents to forensic examination?

Yes

Follow the **Adult SART Flowchart**

No

ED Social Work Consult
Page via Operator, or call Office x4628, Voicemail x4374
ACS Report made by SW (or MD) as indicated

Is this case known to ACS?
If yes: Brooklyn ACS Field Office
(Day – 718 - 623-4531/4500)
(Evening – 646 - 945-1560/1423/1448)
If no: Call hotline (800) 635-1522
Complete 2221 Form and SW database

Physician performs **Physical Exam** and **Forensic Exam** as indicated in patients <13 years
Physician orders **Diagnostic Tests** and **Post-Sexual Assault Medications**
Consent for Forensic Examination must be completed (Found in Kit)

HCG: every female of childbearing age
RPR: for Syphilis
Hepatitis B: IgM Antibody, Surface Antibody, Surface Antigen
Hepatitis C Antibody
If Consenting to **HIV PEP:**
-**HIV-1 Ab Screen**
-**CBC**
-**CMP**
Additional diagnostic testing per MD
-DNA swab, STI cultures
Medications: See next pages

Physician Documents in Quadramed:
History, exam findings, care provided, any photography, consent, consults, disposition, and follow-up

Photos of any visible exam findings
-Use the camera attached to Nurse's computer station that directly downloads photos into the patient's chart
-Include a photo of patient's face
-Include name/MRN/date in each photo

Physician arranges patient **Disposition** with **appropriate follow-up.**
Email: tracey.braithwaite@nychhc.org, Barbara.nicolas@nychhc.org, and Jeffrey.rallo@nychhc.org the MRN and case summary.

Required

< 13 Years
Primary Care Physician
Must call PCP or answering service to have conversation and document it.
≥ 13 Years
Adolescent Clinic
Dr. Suss, Dr. Cambridge, Clinic code 992
Mon-Fri, 9a-11a, E-Building 4D

Recommended

General Pediatrician
Child Psychiatry/ Behavioral Health
Walk-in Clinic
Mon-Fri, 8:30a-1p
R-Building

If ACS involved or NYPD bringing there from ED

Brooklyn Advocacy Center
320 Schermerhorn St
Brooklyn, NY 11207
(718) 330-5409