

PREBUBESCENT SANE FAQ

Common myths about pediatric SANE patients:

A SANE exam will tell a family if their child has been abused.

Unfortunately, a SANE exam will not tell a family if their child has been abused. This is a common misconception. While some abuse does leave physical evidence of trauma, 95% of pediatric sexual abuse patients show no evidence on physical exams.

A family can request a SANE exam without a police report being made.

A police report must be made in all instances of suspected sexual abuse in patients under 18 years of age.

A prepubertal child has vaginal bleeding, were they assaulted?

Not necessarily! While vaginal trauma in a pediatric patient should be regarded as highly suspicious for sexual abuse, there are accidental straddle, crush, or impalement injuries that could cause genital trauma. Other causes of genital bleeding in pediatric patients include urethral prolapse, lichen sclerosus, vulvar ulcers, and infections that are not sexually transmitted.

If a child has vaginal discharge, do they have an STI?

*Most likely no! Vulvovaginitis is a fairly common condition in prepubertal females, especially those with poor hygiene (for instance, those who are potty-training). In addition to STIs, other causes that should be considered include vaginal foreign bodies, *S. pyogenes*, respiratory flora, enteric bacteria, *Candida*, and systemic conditions.*

Medical reasons for vaginal bleeding or blood in urine should always be examined first in cases with no disclosure, witness, or otherwise concern for sexual abuse.