

## **CHECKLIST: Transfer Plan for Pediatric Survivors of Sexual Assault**

- An appropriate medical examination (*not* a forensic medical examination)
- Necessary stabilizing treatment prior to transfer to a treatment hospital or a clinic that provides treatment services to pediatric survivors
- Medically and factually accurate written and oral information about:
  - Emergency contraception
  - The indications, contraindications, and potential risks associated with the risk of emergency contraception
  - The availability of emergency contraception
- Prompt transfer—without undue burden to the pediatric survivor—to a treatment hospital or a clinic that provides treatment services to pediatric survivors
- The written agreement of a treatment hospital to accept transfer of pediatric survivors

**Please send the plan to [olc-sasplans@vdh.virginia.gov](mailto:olc-sasplans@vdh.virginia.gov) with the subject line  
“*Facility Name – NEW Pediatric Transfer Plan*” – thank you!**