

Universal Trauma Precautions for Health Care Providers

Universal trauma precautions refer to behaviors health care providers adopt regardless of prior disclosure of trauma, including opportunities for patient empowerment and creation of choices during health care encounters by those with a working knowledge of the effect of trauma on health.

Examples include:

- Evaluating/Interviewing patients in an office chair rather than exam table
- Offering breaks throughout the encounter
- Allowing patient to remain in their own clothes
- Having well lit rooms and getting permission before turning off lights (eg bedside u/s)
- Maintaining a clear entry and exit from rooms
- Asking patient what would make them more comfortable
- Staff should be appropriately trained
- Avoid common verbiage that mimics sexual innuendo or common assault language such as “spread your legs wide” or “just relax”
- Improving language for consent and shared decision making: ensure all risks and benefits were including in the first consent process. Stop exam immediately if patient says stop. Never start any examination without the patient’s consent.”

Data shows that, in patients with a history of trauma (including emotional, physical and sexual trauma), this form of care is associated with better outcomes.

Process for evaluating the ACE questionnaire and positive responses

Example Scripting for positive score on ACE questionnaire

“Many of our patient have had disturbing experiences that influence their health and well-being so we give all our new patients the ACE questionnaire. I am sorry this happened to you. Thank you for your willingness to share this information, which will help me do my job better.”

“Do you feel that you are currently having physical or emotional effects from your experiences?”

“Have you been able to discuss this with anyone previously? “

“Would you like a referral for further assessment and treatment? “

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