

Supplementary Table 1

Data Entry Form

Authors	
Year	
Journal	
Funding source	
Sample size	
Nature of sample	
% of those approached who participated	
Inclusion/Exclusion Criteria	
% excluded	
Where recruited	
Length of time since trauma (days)	
Intervention description	
Control description (note matching to intervention in terms of timing, etc.)	
Types of blinding (if any)*	
Setting	
Length of follow-up	
Design type (e.g., RCT?)	
% dropped out/lost to follow-up*	
PTSD measure	
Additional measures	

Type of Analysis/Was it intent to treat?*	
Trial stopped early?*	
<i>M</i> (SD) for active and control group on treatment outcomes at all reported follow-ups	
Effect type and 95% CIs	
Effectiveness – any information about acceptability for pts, providers, etc?	
Adverse effects?	
Failure to report certain outcomes?*	
Conclusions	
Limitations	
Risk of bias? (any failure to report variables with asterisk)	

Supplementary Table 2

Summary of studies included.

Citation	Design	Participants	Setting & Location	Intervention	Control	Outcomes
Acierno et al., 2003	RCT	15+ years old within 72 hours of reporting rape (<i>N</i> = 226)	Emergency Department; United States	Video intervention (17 minutes) including medical prep and psychoeducation	Treatment as usual	6-week: alcohol and marijuana use
Foa, et al., 1995	Participants matched	16+ years old with recent assault and PTSD diagnosis (<i>N</i> = 20)	Research and treatment center; Northeastern United States	Brief prevention program: 4 (2 hour) weekly meetings	Assessment only	2 months and 5.5 months post-assault: PSS-I, PSS-SR, SAI, BDI
Foa et al., 2006	RCT	Women with recent SA meeting DSM-IV symptom criteria for PTSD (not duration) (<i>N</i> = 90)	Research and treatment center; Northeastern United States	Brief cognitive behavioral intervention: 4 (2 hour) weekly meetings	Assessment only; Supportive counseling	Post-treatment, 2-, 3-, 6-, 9-, and 12-month: PSS-I, PSS-SR, BDI, BAI, ETO (Foa, Rothbaum, Riggs, & Murdock, 1991)
Frank et al., 1988	RCT	Treatment seeking women experiencing recent SA (<i>N</i> = 84)	Research and treatment center; Northeastern United States	Systematic desensitization (14-session) or cognitive behavior therapy (14-session)	Non-victimized control group	Post-treatment: BDI, STAI, Fear Survey Schedule; Feelings of Inadequacy Scale (Church, Truss, & Velicer, 1980); SAS-II
Gilmore et al., 2019a	Usability and qualitative analysis	Adult women experiencing recent SA seeking SAMFE	SAMFE centers; Southeastern United States	mHealth intervention focused on alcohol and substance use; suicide	None	Post-assault PHQ-2 (Löwe, Kroenke, &

		care ($n = 13$) and community providers ($n = 25$)	United States	prevention; PTSD and depression; coping skills, physical health; referral to community resources		Gräfe, 2005); PCL-5; AUDIT-C (Saunders, Aasland, Babor, De la Fuente, & Grant, 1993)
Gilmore et al., 2019b	RCT	Adolescent and adult women experiencing recent SA presenting for SAMFE care ($N = 154$)	SAMFE centers; Midwestern United Sites	Video intervention (9 or 18 minutes) including psychoeducation only (9 minute) or medical prep and psychoeducation (18 minutes); Video intervention (9 or 18 minutes) providing relaxation techniques only (e.g., diaphragm breathing) or medical prep and relaxation techniques (18 minutes)	Treatment as usual	1.5-month: Prescription opioid misuse and non-medical use of prescription medication
Gilmore et al., in press	RCT	Women experiencing recent SA (age 15+) receiving SAMFE care ($N = 233$)	SAMFE centers; Midwestern United States	Video intervention (9 or 18 minutes) including psychoeducation only (9 minute) or medical prep and psychoeducation (18 minutes); Video intervention (9 or 18 minutes) providing relaxation techniques only (e.g., diaphragm breathing) or medical prep and relaxation techniques (18 minutes)	Treatment as usual	1.5-, 3-, and 6-month: PDS, Perceived Control over Stressful Events Scale (Frazier et al., 2011)
Hassija &	Case series	Women referred from	Telehealth rural	Prolonged exposure or	None	Post-treatment:

Gray, 2011		rape crisis center ($N = 15$)	clinic; Western United States	cognitive processing therapy (avg. 13 sessions)		PCL, CES-D
Miller et al., 2015	RCT	Adult women experiencing recent SA presenting for SAMFE care ($N = 164$)	SAMFE centers; United States	Video intervention (9 minutes) including psychoeducation only	Treatment as usual	2-week & 2-month: PSS-SR, STAI-S, SUDs
Nixon et al., 2016	RCT	Adult women experiencing past month SA with Acute Stress Disorder ($N = 47$)	Rape crisis center; United States	Cognitive processing therapy (6 sessions)	Treatment as usual (6 sessions)	3-, 6-, and 12-month CAPS and BDI
Resnick et al., 1999	Pseudo-randomized	Adult women experiencing recent SA presenting to emergency department within 72 hours post-assault ($N = 48$)	Emergency department; United States	Video intervention (17 minutes) including medical prep and psychoeducation	Treatment as usual	Post-treatment: SUDS, BAI 6-week: PSS-SR, BAI
Resnick et al., 2005	RCT	15+ years old girls and women experiencing recent SA presenting for SAMFE care ($N = 205$)	Emergency department; United States	Video intervention (17 minutes) including medical prep and psychoeducation	Treatment as usual	Post-treatment: SUDS, BAI 6-week: PSS-SR, BDI, PILL, BAI, assessment of alcohol and drug use
Resnick et al., 2007	Randomized with dismantling conditions added half-	14+ years old girls and women experiencing recent SA presenting for SAMFE care ($N =$	Emergency department; Southeastern United States	Video interventions (17 mins) including medical prep and psychoeducation; medical prep only; psychoeducation only	Treatment as usual	Targeted follow-ups for 6 weeks and 6 months with considerable timing variability;

	way through trial	406)				Reported marijuana use outcomes
Rothbaum et al., 2012	RCT	Individuals presenting to the Emergency Department meeting DSM-IV PTSD criterion A (<i>N</i> = 137)	Emergency department; Southeastern United States	Modified prolonged exposure: 3 (1hr) weekly sessions	Assessment only	4-week: PSS-I, BDI, PDS 12-week: PSS-I
Tarquinio et al., 2012	Uncontrolled trial	Women within 24-72 hours after first-time sexual assault (<i>N</i> = 17)	Research center; France	Newly developed eye movement desensitization and reprocessing (EMDR) urgent/emergency intervention (URG-EMDR)	None	4-week and 6-month; IES (Horowitz et al., 1979); measures of sexuality; SUDS during treatment
Walsh et al., 2017	RCT	Women experiencing recent SA (age 15+) receiving SAMFE care (<i>N</i> = 233)	SAMFE centers; Midwestern United States	Video intervention (9 or 18 minutes) including psychoeducation only (9 minute) or medical prep and psychoeducation (18 minutes); Video intervention (9 or 18 minutes) providing relaxation techniques only (e.g., diaphragm breathing) or medical prep and relaxation techniques (18 minutes)	Treatment as usual	Pre- and post-exam: PANAS-NA (Watson, Clark, & Tellegen, 1988); 1.5-, 3-, and 6-month: AUDIT, self-reported marijuana use, DAST (Skinner, 1982)
Zohar et al., 2018	RCT	Adults with past-month trauma and reporting >2 DSM-IV	Medical center and home-based	Escitalopram (titrated 10mg-20mg/day) up to 24 weeks	Placebo	Post-treatment: CAPS, PSS-SR, PSQI, MADRAS,

criteria for acute stress disorder ($N =$ 353)	treatment; Israel and South Africa	VAS depression, VAS anxiety, CGI
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Note. BAI = Beck Anxiety Inventory; BDI = Beck Depression Inventory; CAPS = Clinician-Administered-PTSD Scale; CES-D = Center for Epidemiological Studies-Depression Scale; CGI = Clinical Global Impression; DAST = Drug Abuse Screening Test; DSM-IV = Diagnostic and Statistical Manual – 4th Edition; ETO = Expectancy of Therapeutic Outcome; IES = Impact of Events Scale; MADRAS = Montgomery-Asberg Depression Rating Scale; PANAS-NA = Positive and Negative Affect Schedule – Negative Affect subscale; PCL = PTSD Checklist; PDS = Posttraumatic Diagnostic Scale; PILL = Pennebaker Inventory of Limbic Languidness; PSS-I = PTSD Symptom Scale-Interview; PSS-SR = PTSD Symptom Scale-Self Report; PSQI = Pittsburgh Sleep Quality Index; PTSD = Posttraumatic Stress Disorder; RCT = Randomized Controlled Trial; SAI = Standardized Assault Interview; SAS-II = Social Adjustment Scale II; SAMFE = Sexual assault medical and forensic exam; STAI = State Trait Anxiety Inventory; SUDS = Subjective Units of Discomfort Scales; VAS = Visual Analogue Scale.