



Medical Forensic Sexual Assault Exams

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Objectives

- Describe the components of the Medical-Forensic Exam
- List the number of swabs required to collect, per MN BCA guidelines, for each body site
- Explain the labeling and packaging requirements for each evidence kit
- Describe the process for and details of collecting clothing as evidence

What is a Medical Forensic Exam?

- Exam done up to **120 hours**** after a sexual assault
- Provide health care for both physical and emotional trauma
- Evidence collection which may be used by criminal justice system to investigate and prosecute offenders



Why Perform a Medical Forensic Exam?

- Peace of mind for the victim that they “are okay”
- Provides information about the sexual assault
- Corroborate “account of incident”
- Diagnose and treat injuries
- Assess risk for Sexually Transmitted Infections and Pregnancy



Components of a Sexual Assault Exam

- Consent
- Account of the Sexual Assault
- Medical history
- Physical exam
- Injury care
- Evidence collection
- Sexually Transmitted Infections prophylaxis
- Pregnancy prevention
- Crisis intervention
- Discharge instructions

Patient-Centered Approach

- Consider the patient first
- **Listen**
- Promote patient autonomy
- Ensure patient safety
- Hold self and others accountable



How to be **patient-centered** during a Medical Forensic Exam

- Give sexual assault patients priority as emergency cases
- Provide the necessary means to ensure patient privacy
- Adapt the exam process as needed to address the unique needs and circumstances of each patient
- Recognize the importance of victim services within the exam process
- Assess and respect patients' priorities
- Address patients' safety during the exam

IAFN Position Statement, "Collaboration With Victim Advocates," (2008)

Your Best Reaction

- **Support:** Provide patients with all of their options and *support* the patient to make their own choices.
- **Absence of pressure:** Try *not to pressure* patients regarding their decision to involve (or not involve) law enforcement.
- **Concern:** Demonstrate genuine *concern* for patients' physical and mental health.



Helpful Phrases

- "I'm sorry this happened to you. This shouldn't have happened to you."
- "Thank you for trusting me with this information."
- "I'm happy you decided to come in and learn about your options today."
- "What are you most worried about at this moment?"
- "I can't promise what will happen in your case, but I can promise to do my very best for you."

Consent

- Informed consent is obtained throughout exam
- There are two essential but separate consents
 - Medical evaluation and treatment
 - Forensic exam and evidence collection
- The medical forensic exam should NEVER be done against the patient's will
- Consent can be rescinded at any time



Medical History

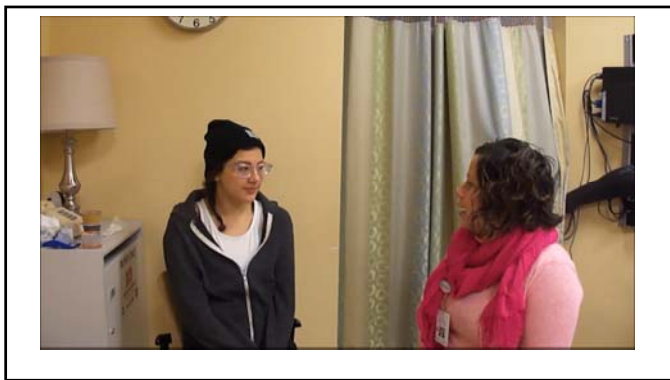
- Ongoing medical concerns
- Current medications
- Pregnancy status
- Menstrual cycle information
- Genital surgery



Account of Incident

- **Guides the exam and evidence collection**
- When given to a medical provider it is an "excited utterance" and is exempt from hearsay rule in court
- Assists in discharge planning, safety planning and assessing suicide risk

Medico-Legal History Taking



Evidence Collection

Purpose of Evidence Collection

- To confirm recent sexual contact
- DNA can be collected from - Mouth, Fingernails, Skin, Genital/Vagina, Anus
- DNA collected can be - Hair, Skin cells, Perspiration, Saliva, Blood, Semen
- To corroborate the victim's "Account of the assault"
- To help identify the suspect(s)



Evidence Collection - Overview

- After the BCA kit is open
- You need to keep it in your line of sight to maintain the chain of custody
- Evidence is not tested unless reported to Law Enforcement
- Expiration date on kit – for purple top tube



Swab Collection

- Swab collection is based on patient's account
- **No** anal assault = **no** anal swabs
- Reason swabs were collected need to be thoroughly documented in chart
- Best evidence is body fluids



Swab Collection

- All swabs are collected with a light touch, in a circular motion
- Purpose is to obtain DNA from suspect, not the victim
- All swabs are collected together, at the same time
- Use sterile water or saline to moisten swabs
- Use a **moist** swab to collect **dry** secretions
- Use a **dry** swab to collect **moist** secretions



BCA Collection Guidelines

Site	# of Swabs	Timeframe
Oral	4 (dry)	24 hours
Rectal	4 (lightly moistened)	48 hours
Penile	2 (lightly moistened)	48-72 hours
Scrotal	2 (lightly moistened)	48-72 hours
Skin	2 per site (lightly moistened)	48-72 hours
Fingernails	1 per hand (lightly moistened)	120 hours
Perianal	4 (lightly moistened)	120 hours
Perineal	4 (lightly moistened)	120 hours
Vaginal	4 (dry)	120+ hours
Cervical Os	2 (dry)	120+ hours

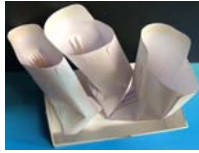
Contamination of Evidence

- Make every attempt not to talk, cough, or sneeze while collecting samples (or wear a mask)
- Avoid cross-contamination
 - Wear gloves when handling evidence
 - Change gloves between each sample
 - Ensure working area is cleaned
- If swab drops after collection, document – Do Not Use!



Drying Samples

- Allow to air dry
- Different options
 - Swab dryer
 - Swab drying rack
 - Individual swab box
 - Tented envelope
 - Labeled upside down Styrofoam cups



Drying Samples



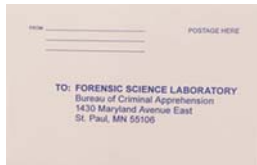
Drying Samples

- Dry in a low traffic area
- Don't use a fan
 - Can blow dust, skin cells etc. around and attach to sample
- Drying swabs prevents
 - Contamination (leak through) from sample to sample within SA kit
 - Loss of sample – wet samples stick to the envelope when they dry

Toxicology

- Collect on all patients
- Collect **Blood up to 120 hours*** post assault
- Collect **Urine up to 120 hours** post assault
- Use specimen container in urine toxicology kit
- Use grey top tubes in blood toxicology kit
- Needs to be refrigerated following collection
- Specimens not tested without report to Law Enforcement

Urine Toxicology Kit



- Collect ASAP - first urination preferred
- Instruct patient not to wipe after (if exam not completed yet)

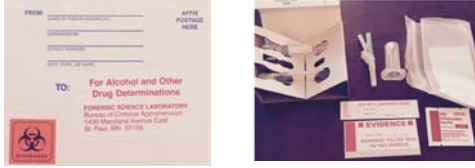
Completing Urine Kit Paperwork

Document -

- Drugs given in the ED
- Patient's pertinent medications
- Drug and alcohol consumed
- Concern for DFSA

Collection time of urine sample is the **Exact** time it was obtained

Blood Toxicology Kit



- Collect ASAP – preferably before exam
- Collect 10 ml in 2 gray-top tubes

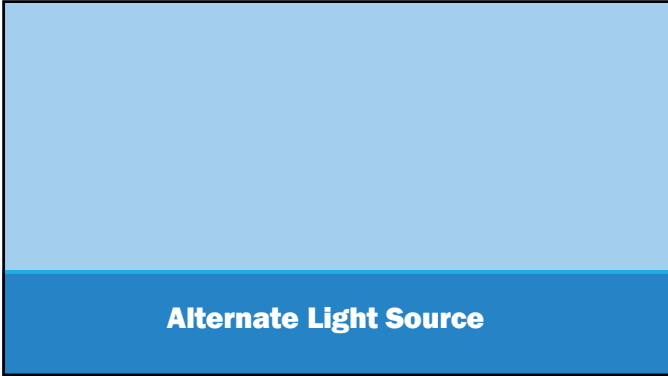
Completing Blood Kit Paperwork

Document -

- Drugs given in the ED
- Patient's pertinent medications
- Drug and alcohol consumed
- Concern for DFSA


Collection time of blood sample is the **Exact** time it was obtained





Head-to-Toe Physical Exam

- Have patient undress
 - Place clothing on clean surface or in paper bag
- Inspect patient's body with Alternate Light Source (ALS)
 - Around mouth
 - Neck
 - Breasts
 - Abdomen
 - Mons Pubis
 - Genitalia & buttocks






Head to Toe Exam

Head to Toe assessment

- Inspect patient's body head-to-toe for injuries
- Documentation is key!
 - Description
 - Body Diagram
 - Photo-documentation
- Use the pain scale for all areas of pain/tenderness
- If patient able to recall mechanism of injury, document it in quotes
- Have patient fully undress to completely assess for injuries







Swab Collection: Oral and Skin



Evidence Collection - Skin

- Collect 2 **moistened swabs** from each site
- Neck both sides on the same 2 swabs
- Breasts both sides on the same 2 swabs
- Collect even if showered 1-2 times
- Bite marks - Collect 2 **moistened swabs**

Evidence Collection - Fingernails

- Collect 1 **moistened swab** from all of the fingernails on each hand
- Package each hand swab separately

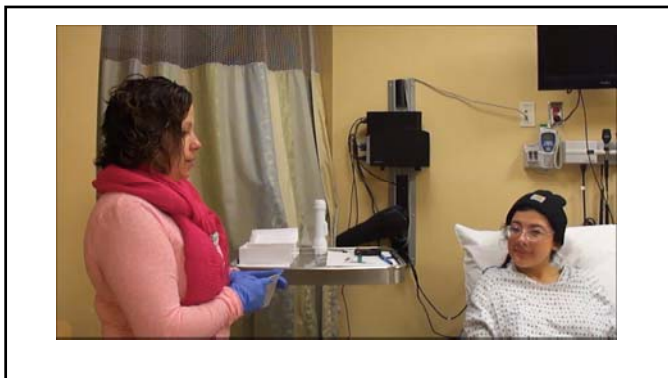



Evidence Collection – Oral

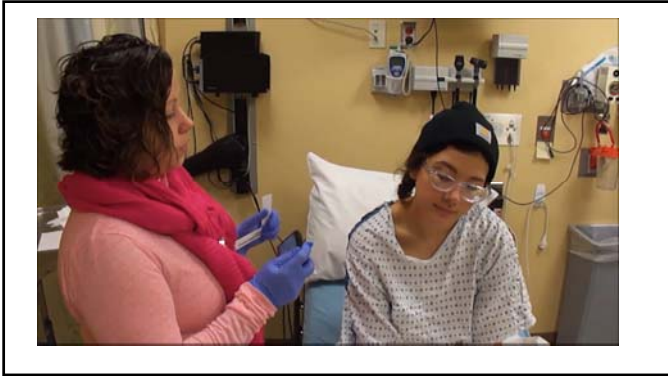
- Collect **4 dry swabs** up to **24 hours** after oral assault
- Swab upper and lower gum line
- Behind lower teeth and under tongue
- Swab around piercings



STEP 9		ORAL SWABS	
PATIENT'S NAME	_____		
DATE COLLECTED	_____	TIME	_____
COLLECTED BY	_____		
WAS SAMPLE COLLECTED?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
IF NO, WHY NOT?	_____		




Forensic Photography



Genital Exam and Evidence Collection

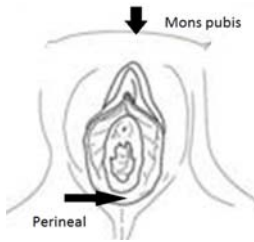
Pubic Hair Combing

- Lightly comb the pubic hair over the white piece of paper
- Fold the comb and any loose hairs into the paper
- Place in the envelope, label and seal it
- Do not pluck hairs from pubic area as a control sample
- Showered = **NO** collection
 - Hairs are extremely transient
 - Hair is not a good source of DNA



Evidence Collection – Female Genital

- Mons pubis (shaved) even if showered
- Collect **2 lightly moistened** swabs
- Perineum (Perineal)
 - **4 swabs** collected at the same time
 - Lightly moistened
 - Collect up to **120 hours**
 - Even if showered 1-2 times
 - Even if menstruating



Evidence Collection – Female Genital

STEP 8 **PERINEAL SWABS**

PATIENT'S NAME: _____

DATE COLLECTED: _____ TIME: _____ am
pm

COLLECTED BY: _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____

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Internal Genital Exam

- Don't use Lube (document on the BCA form if you do)
- Collect **4 dry swabs** from vaginal vault up to **120 hours**
- Collect **2 dry swabs** from cervical os up to **120 hours**
- Collect even if menstruating
- You can collect vaginal swabs if patient declines speculum exam
- Insert swabs 4-5 cm and gently rotate



Vaginal Evidence Collection

STEP 6 VAGINAL SWABS

PATIENT'S NAME: _____

DATE COLLECTED: _____ TIME: _____ AM/PM

COLLECTED BY: _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____

STEP 7 CERVICAL SWABS

PATIENT'S NAME: _____

DATE COLLECTED: _____ TIME: _____ AM/PM

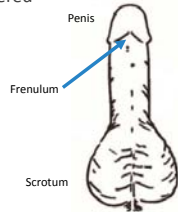
COLLECTED BY: _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____

Evidence Collection – Male Genital

- Pubic hair combing if patient has not showered
- Penis
 - Collect **2 lightly moistened** swabs
 - 48-72 hours after assault
- Scrotum
 - Collect **2 lightly moistened** swabs
 - 48-72 hours after assault



Evidence Collection – Male Genital

STEP 11 PENILE SWABS

PATIENT'S NAME: _____

DATE COLLECTED: _____ TIME: _____ AM/PM

COLLECTED BY: _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____

STEP 11 Scrotum SWABS

PATIENT'S NAME: _____

DATE COLLECTED: _____ TIME: _____ AM/PM

COLLECTED BY: _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____

Evidence Collection – Anal

- Anal = exterior
- Label envelope **Anal**
- Collect **4 moistened swabs**
 - Collect all 4 at the same time
 - Collect up to **120 hours**
 - Even if showered 1-2 times

STEP 10 ANAL SWABS

PATIENT'S NAME: _____

DATE COLLECTED: _____ TIME: _____ AM/PM

COLLECTED BY: _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____

Evidence Collection – Rectal

- Rectal = inside
- Collect **4 moistened swabs**
- Collect up to **48 hours**
- Collect 2 swabs at a time
- Insert 2-3 cm into anal canal
- Gently rotate

STEP 10 RECTAL SWABS

PATIENT'S NAME: _____

DATE COLLECTED: _____ TIME: _____ AM/PM

COLLECTED BY: _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____




Trace Evidence and Clothing Collection

Patient's DNA Sample

- Blood needs to be collected for the patient's DNA sample
- Blood is preferred over buccal
- Blood should be placed on **inner** filter paper
- Do not put the tube of blood in the kit
- If blood draw is not possible - a finger prick and collection of 5-7 spots of blood is sufficient
- If blood can not be collected at the time of exam, investigator can collect buccal at a later time

Victim's DNA Blood Sample

Do not place purple top tube back in box!



Packaging of Trace Evidence

Place hairs or fibers in paper, fold, seal with a patient label and place in the envelope



Trace Evidence

- Biologic samples to collect
 - Tampons
 - Nuvaring
 - Condoms
 - Hairs
 - Other foreign bodies in body cavities



Packaging & Labeling of Trace Evidence

Poke holes in top of specimen container with scalpel, or sterile scissors.

Label specimen container with patient label, exam time, & initials



Packaging of Trace Evidence

- Document trace evidence in the chart and photograph
- Place container in a brown bag and label bag with the following:
 - Patient label
 - Handwritten patient name, DOB, MRN
 - Contents of bag
 - Jurisdiction
 - Case Number (if reported)
 - Date of exam
 - Your name
- Seal the bag with evidence tape – initials and date across the seal
- Refrigerate

Clothing

- Only collect clothing worn after the assault
- Collect underwear
- Clothing at home - paper bags
- Even if it has been washed – Collect!
- Do not force patient to provide clothing
 - Document as “patient declined”
 - Document demeanor or statements made
 - If not able to collect- swab the area



Packaging Clothing

- Handle/manipulate clothing as little as possible
- Important to ensure clothing is dried prior to packaging - If not, notify law enforcement
- Label each bag with the following:
 - Patient label (with date and time of collection)
 - Hand written patient name, DOB, MRN
 - Date of exam
 - Contents of bag
 - Jurisdiction
 - Case Number (if reported)
 - Your name
- Seal the bag with evidence tape – initials and date across the seal

Proper Labeling & Sealing of Clothing Bag



Remember: Only one piece of clothing per bag!

What's wrong with this?



Non Biological Trace Evidence

- Photograph and Document**
- Dirt, Sticks, Leaves, Grass, etc.
 - Package separately in brown bags
 - Do not include in SA Kit
 - BCA will likely not analyze



Packaging Evidence

Packaging of Swab Envelopes

- Ensure all envelopes are labeled with the location of the swabs collected
 - Some locations do not have pre-labeled envelopes in the kit
- DO NOT lick the seal on the envelope
 - Seal the envelope with a patient label
 - Ensure the date and time of collection is included
 - Initial across the seal to ensure chain of custody
- On the front of the envelope, mark "Yes" under "Was Sample Collected?"
- Only include the envelopes/samples that you collected

Proper Packaging of Swab Envelopes

STEP 10 **RECTAL SWABS**

PATIENT'S NAME: _____

DATE COLLECTED: _____ TIME: _____ AM/PM

COLLECTED BY: _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____

Patient name

Date

Collection Time is the "start time" of the exam (all swabs will be the same)

Your initials

Sexual Assault Exam Report

Hospital: _____ Collected by: _____

Please return this form to the kit after the exam is completed.

STEP 1: General Information

Patient's Name: _____

Age: _____

Date of alleged assault: ____/____/____ Time: _____ AM/PM

Date of hospital exam: ____/____/____ Time: _____ AM/PM

(Patient's description of assault: _____) → Often referred to as "Account of Incident"

BCA Sexual Assault Report **OR** Sexual Assault Report **MUST** be included in every Kit

Labeling Sexual Assault Kit

Patient Name

Provider Name

Date/time placed in secured storage

Jurisdiction and case number

This section completed when evidence picked up by LE

SEXUAL ASSAULT EVIDENCE COLLECTION KIT

FOR HOSPITAL PERSONNEL

VICTIM'S NAME: Jane Doe DOB: 1/1/2000

PHYSICIAN'S NAME: _____

KIT SEALED BY: N. Nurse

PLACED IN SECURED STORAGE AREA

PLACED BY: N. Nurse

DATE: 1/1/16 TIME: 0000

Jurisdiction and case number

RECEIVED FROM: _____

DATE: _____ TIME: _____

RECEIVED BY: _____

DATE: _____ TIME: _____

DELIVER TO THE CRIME LABORATORY IMMEDIATELY

REINTEGRATE AFTER USE

STATE OF MINNESOTA
DEPARTMENT OF PUBLIC SAFETY
BUREAU OF CRIMINAL APPROPRIATION
FORENSIC SCIENCE LABORATORY

Sealing SA Kit

Your initials

Date

Storage & Chain of Custody

- Chain of Custody
 - Evidence cannot be left unattended
 - Chain of custody form needs to be completed for each case
 - Documents hand-off between medical facility and law enforcement including date and time, and details of evidence
- SA Kit, Blood, and Urine Need to be Refrigerated
 - Clothes do not need to be refrigerated
- Storage/Refrigerator need to be locked with limited access



Chain of Evidence Form

Evidence Information	
Parent Label	Collection Date: _____ Time: _____ <input type="checkbox"/> Blood, <input type="checkbox"/> Urine, <input type="checkbox"/> SA Kit, <input type="checkbox"/> Other _____ of specimen SANE Printed Name: _____ SANE Signature: _____
Chain of Evidence	
Placed in locked area by _____	
BCA Lab Specimens and Copy of Hospital Records	Clothing
Released to: _____	Released to: _____
Agency: _____	Agency: _____
Released by: _____	Released by: _____
Placed in locked refrigerator by _____	
Temporary Disposition of Evidence	
Location: _____	Date: _____
Released by: (SANE) _____	Signature: _____
Released to: (SANE) _____	Signature: _____
Location: _____	Date: _____
Released by: (SANE) _____	Signature: _____
Released to: (SANE) _____	Signature: _____
Location: _____	Date: _____
Released by: (SANE) _____	Signature: _____
Released to: (SANE) _____	Signature: _____

Evidence collection: Chain of Custody

- Evidence is placed in a locked refrigerator or given to Law Enforcement after exam
- Law Enforcement is responsible for picking up and storing evidence
- Jurisdictions will store evidence for varying amounts of time
- Law Enforcement signs Sexual Assault kit before taking it
- Chain of custody form?



Sexually Transmitted Infection Prophylaxis

Emergency Contraception

STI Prophylaxis, Emergency Contraception & HIV nPEP

Best Practice --- Follow CDC Guidelines

- Discuss & provide coverage for
 - Gonorrhea, Chlamydia, Trichomonas/Bacterial Vaginosis
 - Oral, Vaginal, or Rectal assault

Also Consider.....

- Tetanus, HPV, Hepatitis B (first dose)
- Oral Emergency Contraception options - 0-120 hours
- HIV nPEP - 0-72 hours post assault

Discharge & Follow-Up

- Overwhelming amounts of information to absorb at this point
- Provide handouts for patient to take home and reference
- Give names of advocacy centers, specialists, free clinics, support groups, etc.
- Prevent any barriers to follow-up care
- Provide cheat-sheets and detailed instructions for follow-up
- Follow CDC guidelines and recommendations for follow-up and testing
- Assist and collaborate with advocacy, social work, and ED if patient needs other services
- Housing, transportation, mental health, etc.