Autonomy (pt. choices)
Beneficence (for the benefit or wellbeing)
Non-malfeasance (do not cause harm)
Veracity (truthfulness)
Confidentiality
Justice

ANA Code of Ethics

The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.

The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.

The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.

The same as feelings Religion Following the law Following culturally accepted norms

Produces the most good and does the least harm? When Best respects the rights of those weighing affected? Treats people fairly, without decisions, discrimination or favoritism? which Best serves the community as a whole? option: Expresses the values of the person making the decision? Too drunk, too drugged, or too psychotic to understand the SANE consent Cannot stay awake, cannot cooperate, cannot give Those who have known cognitive disabilities and have a designated guardian Consent concerns Concerns and Should the physical exam be controversies done? when SA Should evidence be collected? patients Should the evidence be cannot released to LE? consent

Incapacitated Patients	What are the implications with suspected sexual assault? What are we allowed to do?	
	What is the right thing to do?	
Ethical and legal concerns	What would the patient want? Is there a designated legal representative? Is there a surrogate available who can make decisions? Should a court order be obtained?	
Why is there suspicion that SA occurred?	Found without clothing/clothing in disarray Suspicion of genital injury/genital penetration Suspicious circumstances surrounding unconscious patient Other?	

Questions to consider	Is the cause of the incapacity short lived? Will procedures be done that will remove evidence? If there is concern that SA occurred? Should the patient be checked for injury?	
Safety concerns	Exams or parts of exams should not be performed if there is concern for patient or SANE safety	
What about photography?	Should photos be taken of nongenital injuries? How about genital injuries?	
	Are there other ways to document injuries besides photos?	

Have a policy and procedures in place ahead of time This situation WILL eventually Advocacy come up • IF • County prosecutors • Others? Right to confidential care and treatment related to pregnancy, STI's Minor consent If minor consents, then they are responsible for the bill and confidentiality Minor has control over medical record Age of consent for most medical treatment is age 18

Minors

If under 16 sexual contact is a crime, but it is not necessarily a mandated report

Sexual contact that falls under child abuse guidelines is a mandated report

If not mandated report pt. decides whether to report to LE

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Hospital ethics committee Legal Risk management Colleagues Pastoral care	Resources	
Pierce-Weeks, J. & Campbell, P. (2008) The challenges forensic nurses face when their patient is comatose: Addressing the needs of our most vulnerable patient population. <i>Journal of Forensic Nursing</i> , 4, 104-110. Eiselein, E.M., Hunt, B., Peth, H.A. & Sellas, M. I. (2008). Forensic evidence collection: What are your legal obligations? <i>ED Legal Letter</i> , March, 33-35. Speck, P. M., & Ropero-Miller, J.D. (2010). Webinar: An Overview of Drug-Facilitated Sexual Assault SANE/SAFE/SARP Protocol 1. Forensic Science Education. www.rti.org/forensiced. August24th	Other available resources	
There are many concerns/varied opinions It is very important to have policies and procedures in place ahead of time Multidisciplinary approach is key	Bottom line	