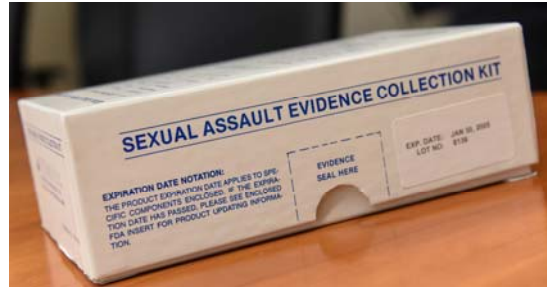


Restricted Sexual Assault Kits (SAKs)



Part One: Evidence Collection Guide
Part Two: Evidence - Swab Drying Guide
Part Three: Packaging Evidence Guide

2023

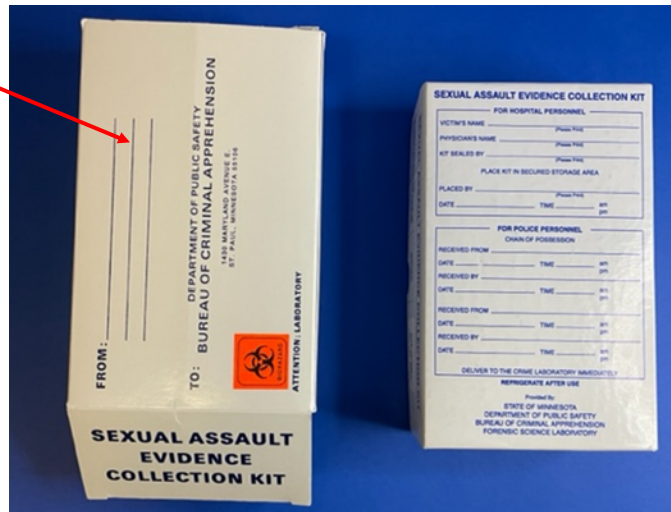
Part One

Evidence Collection Guide

For patients requesting a medical forensic sexual assault exam that **have not** made a report to law enforcement at the time of the exam.

Sexual Assault Kit (SAK)

- Carefully open the outer box
- Save the outer box or “mailing sleeve” for packing the SAK at the end of the exam
- Unseal the inner box to begin exam
- Maintain security of the SAK, if you leave the room lock the SAK in the cart or take it with you.



Evidence Collection – Swabs

- Swab collection is based on patient’s account **No** oral assault = **no** oral swabs
- Reason swabs were collected need to be documented in chart and BCA form
- All skin swabs are collected with a light touch, in a circular, rolling 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 – 1 or 2 drops per swab
- Use a **moist** swab to collect **dry** samples
- Use a **dry** swab to collect **moist** samples

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 work area is clean
 - If swab drops after collection, document – Do Not Use!

Restricted - Clothing Evidence

- Only collect underwear if it is dry and will fit in the sexual assault kit box
- Have patient undress (with privacy)
- Place underwear in paper bag until ready to package
- Patient does not need to undress on paper
- Do not force patient to provide underwear
Document “patient declined”
- Manipulate underwear as little as possible
- **Important** make sure underwear is dry prior to packaging



Evidence Collection - Skin

- Examples of when to collect skin swabs
 - Strangulation – swab neck and fingernails from patient's hands
 - Perpetrator oral contact on patient's body – kissing, licking, biting, sucking
 - Perpetrator ejaculated on patient's skin
 - Pre-ejaculate on patient's skin
 - Perpetrator held patient's wrists tightly for a few minutes – Touch DNA
- Collect 2 moistened swabs from each site
 - Neck - both sides on the same 2 swabs
 - Breasts - collect swabs from each breast and package separately
- Collect even if showered 1-2 times

STEP 12		MISCELLANEOUS SWABS	
PATIENT'S NAME:			
DATE COLLECTED:	TIME:		
COLLECTED BY:			
BODY LOCATION:	Neck		
SUSPECTED FLUID TYPE:	Saliva		
WAS SAMPLE COLLECTED?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
IF NO, WHY NOT?			

Evidence Collection - Fingernails

- Collect if patient reports scratching perpetrator
- Collect **1 moistened swab** from all of the fingernails on right hand
- Collect **1 moistened swab** from all of the fingernails on left hand
- Package each hand fingernail swab separately

Cumulative moist swab on all 5 fingernails



STEP 10		MISCELLANEOUS SWABS	
PATIENT'S NAME:			
DATE COLLECTED:	TIME:		
COLLECTED BY:			
BODY LOCATION:	Fingernails left hand		
SUSPECTED FLUID TYPE:	Skin cells		
WAS SAMPLE COLLECTED?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
IF NO, WHY NOT?			

Evidence Collection – Oral

- Collect 4 dry swabs up to 24-36 hours after oral assault
- Swab upper gum line and behind top teeth
- Swab lower gum line and behind bottom teeth
- Swab under tongue
- Swab around piercings

STEP 9 **ORAL SWABS**

PATIENT'S NAME: _____

DATE COLLECTED: _____ TIME: _____ am
pm

COLLECTED BY: _____

WAS SAMPLE COLLECTED? ☒ YES ☐ NO

IF NO, WHY NOT? _____

RETURN STEP 9.3.15

Pubic Hair Combing

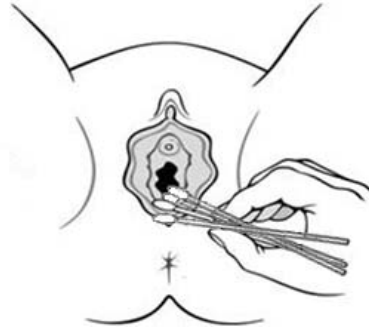
- Collect if patient has **not** showered since the assault
- Place edge of white paper under buttocks
- Lightly comb the pubic hair over the white piece of paper
- Fold the comb and any loose hairs into the paper
- Place in the envelope, label and seal it
- Showered = **NO** collection
 - Hairs are extremely transient
 - Hair is not a good source of DNA



Evidence Collection – Female External Genital

Collect

- **All** vaginal penetration – digital or penile
- Vulva - oral contact by perpetrator
- Even if showered 1-2 times
- Even if menstruating
- Collect up to **120 hours**



Perineal = external genital

- **4 swabs** collected at the same time
- Swab all of the vulva and perineum
- Lightly moistened with saline or sterile water

STEP 8 PERINEAL SWABS	
PATIENT'S NAME:	_____
DATE COLLECTED:	_____ TIME: _____ AM/PM
COLLECTED BY:	_____
WAS SAMPLE COLLECTED?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
IF NO, WHY NOT?	_____

Evidence Collection - Female Internal Genital

- Don't use Lube (document on the BCA form if you do)
- Collect **4 dry swabs** from vaginal vault up to **120 - 240 hours**
- Collect **2 dry swabs** from cervical os up to **120 - 240 hours**
- Collect even if menstruating
- Blindly collect vaginal swabs if patient declines speculum exam
- Blindly collect vaginal swabs if there is no provider available
 - Insert swabs 4-5 cm into vagina and gently rotate
- Important for a provider to do a speculum exam when patient has vaginal bleeding to determine if it is menstrual blood or injury

STEP 6 VAGINAL SWABS	
PATIENT'S NAME:	_____
DATE COLLECTED:	_____ TIME: _____ AM/PM
COLLECTED BY:	_____
WAS SAMPLE COLLECTED?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
IF NO, WHY NOT?	_____

STEP 7 CERVICAL SWABS	
PATIENT'S NAME:	_____
DATE COLLECTED:	_____ TIME: _____ AM/PM
COLLECTED BY:	_____
WAS SAMPLE COLLECTED?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> 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
- Anterior surface of scrotum - Collect **2 lightly moistened** swabs, 48-72 hours after assault

STEP 11 **PENILE SWABS**

PATIENT'S NAME: _____

DATE COLLECTED: _____ TIME: _____ am/pm

COLLECTED BY: _____

WAS SAMPLE COLLECTED? ☒ YES ☐ NO

IF NO, WHY NOT? _____

ME-MNL-8757P11-1.0 (1/15)

STEP 11 **SCROTUM SWABS**

PATIENT'S NAME: _____

DATE COLLECTED: _____ TIME: _____ am/pm

COLLECTED BY: _____

WAS SAMPLE COLLECTED? ☒ YES ☐ NO

IF NO, WHY NOT? _____

ME-MNL-8757P11-2.0 (1/15)

Evidence Collection – Anal (External)

- 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: _____

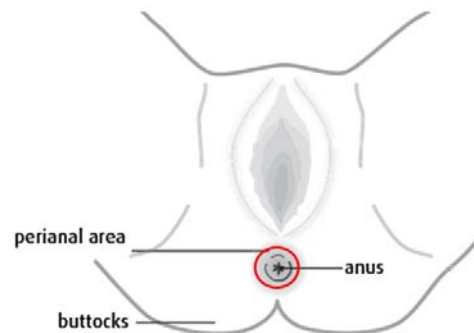
DATE COLLECTED: _____ TIME: _____ am/pm

COLLECTED BY: _____

WAS SAMPLE COLLECTED? ☒ YES ☐ NO

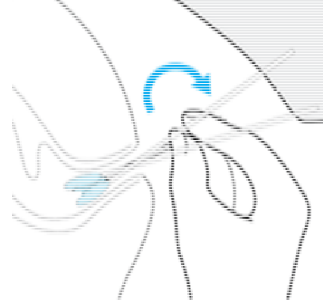
IF NO, WHY NOT? _____

ME-MNL-8757P10-1.0 (1/15)



Evidence Collection – Rectal (Internal)

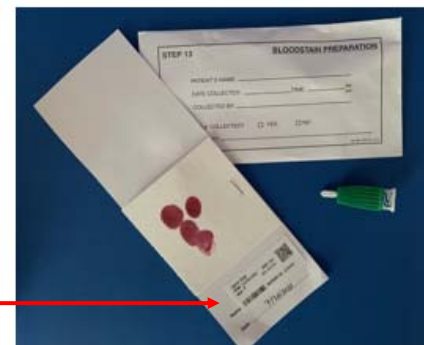
- Rectal = inside
- Collect **4 moistened swabs**
- Collect up to **48 hours**
- Can collect 2 swabs at a time
- Insert 2-3 cm into anal canal
- Gently rotate



STEP 10		RECTAL SWABS	
PATIENT'S NAME: _____			
DATE COLLECTED: _____		TIME: _____ am/pm	
COLLECTED BY: _____			
WAS SAMPLE COLLECTED?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, WHY NOT? _____			

Patient's DNA Blood Sample

- Blood needs to be collected for the patient's DNA sample
- Blood should be placed on **inner** filter paper in the **Bloodstain Preparation** envelope
- Blood draw not needed - use lancet provided in the sexual assault kit to collect of 4-5 drops of blood
- If unable to collect blood - Collect 4 dry swabs from patient's inner cheek
 - Label **Buccal** swabs



Patient label, date/time

Restricted - Dry Biological Trace Evidence

- Place hairs or fibers in the center of paper in **Foreign Matter Collection** envelope
- Re-fold paper and put back in the **Foreign Matter Collection** envelope



Restricted - Additional Evidence

- Only collect underwear if it is dry and can fit in SAK
- Do not collect tampon or condom
- Do not collect any other additional evidence
- Encourage patient to store clothing in paper bags at home if they might report to law enforcement

Part Two

Evidence - Swab Drying Guide

Swabs – Collecting Sample

1. Carefully open swab wrapper
2. Pull back the clear wrapper side
3. Label swab wrapper
4. Collect sample



Swabs – Packaging

5. Slide wooden stick ends in first
6. Leave clear swab wrapper pulled back to air dry cotton tips
7. Put all the of the swabs for each sample back in one wrapper



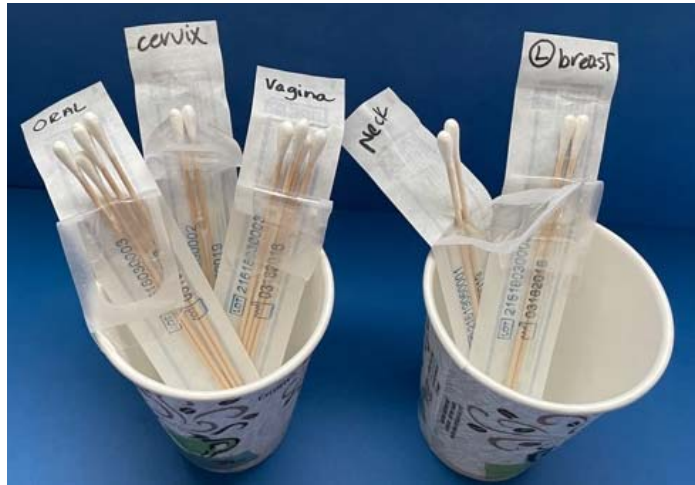
Swabs - Drying Samples

- Dry in a low traffic area
- Don't use a fan - they can blow dust, skin cells etc. around and attach to sample
- Drying swabs prevents
 - Contamination (leak through) from sample to sample
 - Loss of sample – wet samples stick to the envelope when they dry
- Allow to air dry – about an hour
- Drying options -
 - Swab dryer – not best practice
 - Swab drying rack – test tube rack/test tubes
 - Cups
 - SAK box method



Swabs – Drying

- Carefully place swab wrappers in cups
- Ensure that the individual swab wrappers do not touch to prevent cross contamination



SAK Box
method

- 1.** Put SAK
box
bottom
into SAK
box top



2.

Place swabs back in swab wrappers

3.

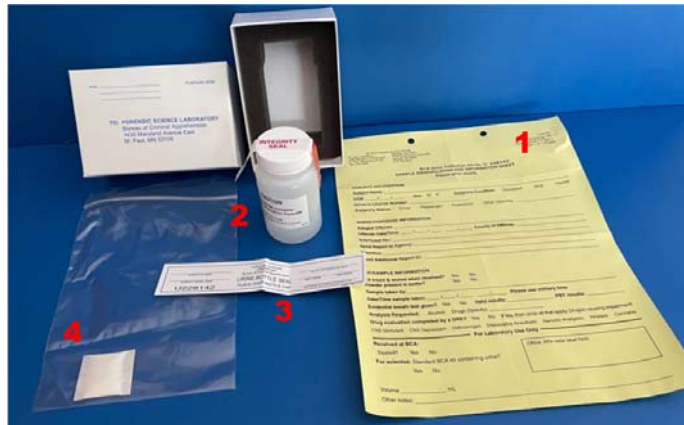
Slide wrappers between the top and bottom box

Toxicology Evidence

- Collect when there is concern for drug/alcohol facilitated sexual assault
- If patient declines toxicology sample collection – document patient “Declined”
- Collect **Blood up to 48 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
- Toxicology kits should be refrigerated following collection until hand-off to law enforcement or sending to BCA (do not need to be refrigerated in the mail)
- Specimens not tested without report to Law Enforcement

Toxicology Evidence – Urine Kit

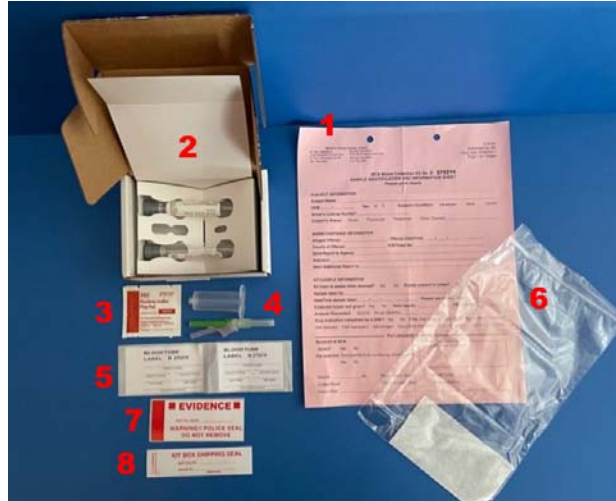
1. Form – document:
 - Exact time collected
 - Drugs given to patient in the ED
 - Patient's pertinent meds and last dose
 - Drug and alcohol consumed
 - DFSA concern - document # of times patient has voided
2. Specimen Container
3. Label
4. Plastic bag
 - Collect ASAP
 - Instruct patient not to wipe if genital swabs have not been collected yet
 - 100 ml is preferred



1. Label specimen container
2. Place in bag and bottom of box
3. Lift flaps and seal

Toxicology Evidence – Blood Kit

1. Form - document
 - Exact time collected
 - Drugs given in the ED
 - Patient's pertinent meds
 - Drug and alcohol consumed
2. Inner box with gray top tubes
3. Betadine wipe
4. Vacutainer/needle
5. Tube labels
6. Plastic bag
7. Inner box seal
8. Outer box security seal
 - Collect ASAP
 - 10 ml per tube



1. Label tubes

2. Seal inner box

3. Place box in plastic bag

Part Three

Packaging Evidence Guide

Restricted packaging for patients that have **not** made a report to law enforcement

2023

Restricted Sexual Assault Evidence Packaging

- Use patient labels to seal envelopes in the sexual assault kit
- Use patient labels for specimens in urine and blood toxicology kits
- Write patient information and patient label on the BCA *Patient Information and Sexual Assault History* Form
- **No patient information** on the outside of the SAK and toxicology boxes
- Write the BCA barcode number on the outside of the SAK and toxicology boxes

Step One - Consent Form **Restricted** SAK

- Patient marks **Restricted** Kit Storage

- Patient name/signature not required
**Sexual Assault Evidence Testing
and Storage Consent Form**

- Nurse or provider signs the form

- BCA Barcode number

- Original sent to the BCA

- Make a copy for patient
- Make a copy for the chart

Restricted Kit Storage

☒ I am choosing **Restricted Kit Storage** for my Sexual Assault Evidence Collection Kit(s).

I do not consent to the forensic testing of samples and specimens collected, also known as Sexual Assault Evidence Collection Kit, Blood and/or Urine Kits.

I understand testing will not occur unless I make a report to law enforcement and provide consent to test my kit as indicated above for Unrestricted Kits.

I understand that my Restricted Kit(s) will be transported for long-term storage at the BCA Forensic Laboratory.

I understand that Restricted Kits will be maintained for a minimum of 30 months from the date of receipt by the BCA Forensic Laboratory.

I understand any identifying information submitted with my Restricted Kit(s) will be used for storage/tracking purposes only, will be kept secure as private data, and will not be shared with law enforcement.

Any identifying information provided will be maintained as private data pursuant to Minn. Stat. §13.82, Subd. 17(b)

I understand, if at any time, I would like to change my decision from Restricted Kit Storage to Unrestricted Kit to be tested, it is my responsibility to contact law enforcement, directly or through my Advocate. I understand I will need to sign a consent form to allow forensic testing.

I understand that after 30 months, the BCA may destroy the evidence from my forensic examination without any further notification to me.

Print Patient/Guardian Name: _____

Patient/Guardian Signature & Date: _____

☐ For Restricted Kits only - Please check box if Patient/Guardian does not consent to the release of identifying information to the BCA Forensic Laboratory.

I affirm I have discussed the information above with Patient/Guardian and the Patient/Guardian has selected the option of Restricted Kit storage without identifying information.

Print Medical Provider Name: _____

Medical Provider Signature & Date: _____

Medical Facility Identifier*: **MN00123**

*If no identifying information is provided with a Restricted Kit, a unique medical facility identifier MUST be included on the kit(s). The Consent form and Restricted Kit Submission Form. Enough information must be provided with this kit to allow for conversion to Unrestricted status if the Patient/Guardian chooses to do so.

BCA

7/24/21-2022
Version: 03/20/2023
Page 2 of 3

Step Two - **Restricted** Kit Submission Form

- Fill in the form
- Original is submitted with SAK to BCA
- Print one to scan into patient's chart
- BCA Barcode number
- No patient information on the form
- Person to receive the confirmation email/mail
- Scan the returned form with barcode into patient's chart

RESTRICTED KIT STORAGE
Submission Form
7/24/21-2022 Issue Date: 12/31/2022

Minnesota Bureau of Criminal Apprehension
Forensic Science Service
Website: baa.mn.gov
Email: baa@mn.gov

Complete this form and place inside the mailing box. Kits can be hand delivered or mailed to the BCA Forensic Laboratory - see page 2

Keep a copy of this form for your files. Required fields indicated with ***

Name and Location of submitting Medical Facility *		Medical Facility Identifier* MN00123	
City, State of Incident*	County of Incident *	Date Kit Collected *	
Patient Name		Patient Date of Birth	
Law Enforcement Agency (if applicable)		Law Enforcement ICR or Property #	
Blood Kit # (as applicable)*		Urine Kit # (as applicable) *	
<small>If submitting blood kit for storage, enter # above. Indicate N/A if no blood kit is being submitted.</small>		<small>If submitting a urine kit for storage, enter # above. Indicate N/A if no urine kit is being submitted.</small>	

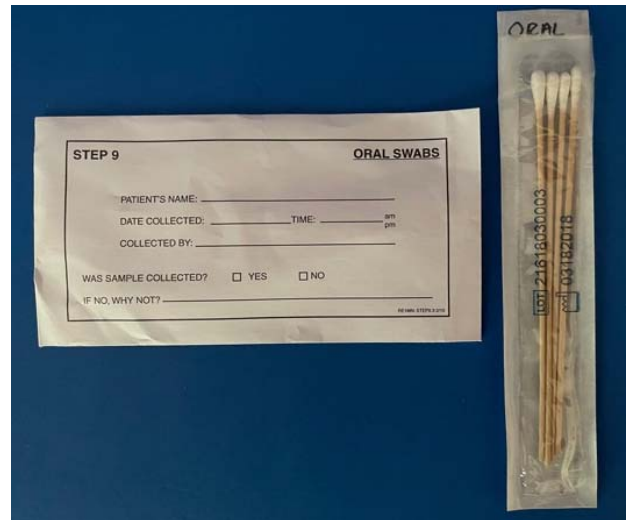
If the Restricted Kit(s) is being transported to the BCA by the law enforcement agency, the kit(s) must be clearly marked as Restricted to ensure proper barcoding and receipt.

Once the kit(s) is (are) received by the BCA Forensic Laboratory, a copy of this submission form will be returned to the medical facility personnel or law enforcement officer designated below. The completed form will have the unique barcode number(s) assigned to the SAECK and Toxicology Kits (if submitted). Please keep a copy of this form in the event the patient would like the kit tested in the future (conversion to Unrestricted status).

*Name _____
*Address _____
*Phone # _____
*Email Address _____

Step Three - Packaging Swabs

1. Swabs will be dry in ~ 1 hour
2. Pull the clear side of wrapper up and over cotton tips of swabs



Step Four – Put Swabs in the Envelopes

3. Slide cotton tips end of wrapper into the envelope
4. Close the envelope



Step Five – Label Front of Envelopes

STEP 10 RECTAL SWABS

PATIENT'S NAME: _____

DATE COLLECTED: _____ TIME: _____ am pm

COLLECTED BY: _____

WAS SAMPLE COLLECTED? ☒ YES ☐ NO

IF NO, WHY NOT? _____

STEP 11

Neck

~~PENILE SWABS~~

PATIENT'S NAME: _____

DATE COLLECTED: _____ TIME: _____ am pm

COLLECTED BY: _____

WAS SAMPLE COLLECTED? ☒ YES ☐ NO

IF NO, WHY NOT? _____

- 1.** All envelopes need to be marked with the collection site
- 2.** On the front of the envelope mark **YES** for “Was the sample collected?”
- 3.** No other information is needed on the front of the envelope

Step Six - Label Back of Envelopes

SEAL FLAP

1. Jane Doe
DOB: 12/09/1981 AGE: 33y
SEX: F DIL: SMITH

2. 7/20/21 0800 LW

3.

PATIENT ID: 123456

- 1.** Patient label over the seal
- 2.** Initials, date and time on the label
- 3.** Your initials over the seal

Only put envelopes with collected specimens back in the SAK

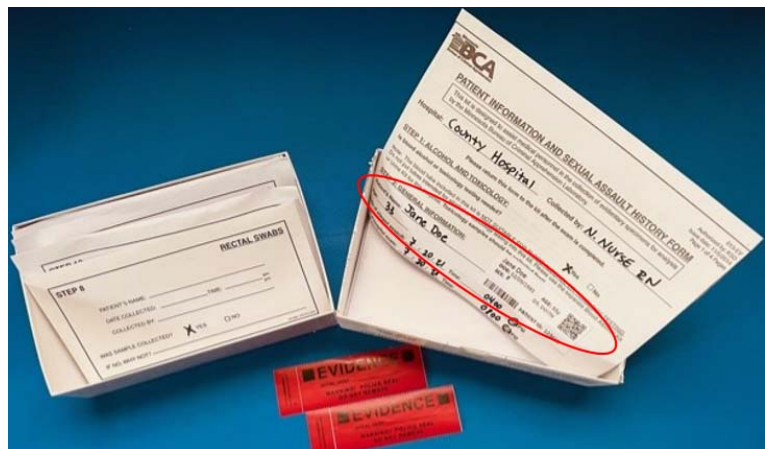
Step Seven - Additional Evidence **Restricted**

- Underwear can be placed in the SAK if it is dry and fits
- Underwear can be placed in a small brown bag or swab envelope



Step Eight - BCA Paperwork

- Fill out BCA ***Patient Information and Sexual Assault History*** Form
- Put collected specimen envelopes in box
- Write patient information or use patient label on the form



BCA Paperwork

Fill out BCA *Patient Information and Sexual Assault History Form*

BCA PATIENT INFORMATION AND SEXUAL ASSAULT HISTORY FORM

Version: A Document Number: 205-BI Authorization: KSD/MS
Page 1 of 4 Pages Issue Date: 06/21/18 Distribution: FSS

This kit is designed to assist medical personnel in the collection of evidentiary specimens for analysis by the Minnesota Bureau of Criminal Apprehension Laboratory.

Hospital: _____ Collected by: _____

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

STEP 1: ALCOHOL AND TOXICOLOGY:
Is blood alcohol or toxicology testing needed? ☒ Yes ☐ No
Note: Do not put tubes intended for alcohol or toxicology testing into this kit. Please use the separate Blood Alcohol Kit or Urine Kit for this purpose. Toxicology samples should be collected first!

STEP 2: GENERAL INFORMATION:
Patient's Name: _____ **Patient Label**
Age: _____
Date of alleged assault: ____/____/____ Time: ____:____ AM/PM
Date of hospital exam: ____/____/____ Time: ____:____ AM/PM
Patient's description of assault: _____
Patient has no memory of assault, reports vaginal pain

Did the assailant have oral contact with the patient's genital area? ☐ Yes ☐ No ☒ Not sure
Did the assailant wear a condom? ☐ Yes ☐ No ☒ Not sure
Did the patient receive any injuries resulting in bleeding? ☐ Yes ☒ No ☐ Not sure
Did the assailant bleed? ☐ Yes ☐ No ☒ Not sure
Did the patient have any consensual sex in the 120 hours prior to exam? ☒ Yes ☐ No ☐ Not sure
If yes, how many hours previous? **~48**
Was the consensual partner a different person than the assailant? ☒ Yes ☐ No ☐ Not sure

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BCA PATIENT INFORMATION AND SEXUAL ASSAULT HISTORY FORM

Version: A Document Number: 205-BI Authorization: KSD/MS
Page 2 of 4 Pages Issue Date: 06/21/18 Distribution: FSS

STEP 3: CLOTHING AND UNDERWEAR:
Are these the clothes the patient was wearing during and/or immediately after the assault? ☒ Yes ☐ No ☐ Not sure
Place undergarments of patient and other clothing that could contain evidence from the assault in separate clean paper bags, seal and initial. (If necessary, be sure to dry clothing before packaging).

STEP 4: FOREIGN MATTER COLLECTION:
Based upon the patient's description of the assault and/or your observations, is there any material on the patient's body (such as hairs) or items that may be relevant to the assault (such as condoms, tampons, etc.)? ☒ Yes ☐ No
If yes, what type of item and from where? **Hair found in vagina**
Allow any damp items to **air dry** before packaging. For smaller items, place material in center of paper provided, fold paper to retain material collected, and return paper to envelope. Seal envelope and fill out all information requested on envelope.

STEP 5: PUBIC HAIR COMBINGS:
Between the time of assault and hospital exam, has the patient: ☐ Showered or Bathed ☐ Not Showered or Bathed
NOTE: It is not necessary to collect pubic hair combings if the patient has showered or bathed.
Place towel under patient's buttocks. Using comb provided, comb pubic hair in downward strokes so that any loose hairs and/or debris fall onto the paper towel. Fold towel in manner to retain comb, hairs, and debris and place in envelope. Seal the envelope and fill out all information requested on the envelope.

STEP 6: VAGINAL SWABS:
Did vaginal assault occur? ☐ Yes ☐ No ☒ Not sure
If checking yes or not sure, follow collection procedures for vaginal, cervical, and perineal swabs.
Using **four** swabs **simultaneously**, swab the vaginal walls. Allow swabs to **air dry**. Return swabs to envelope. Seal the envelope and fill out all information requested on the envelope.

STEP 7: CERVICAL SWABS:
Using **two** swabs **simultaneously**, swab the cervical opening. Allow swabs to **air dry**. Return swabs to envelope. Seal the envelope and fill out all information requested on the envelope.

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Example of the information to include

BCA PATIENT INFORMATION AND SEXUAL ASSAULT HISTORY FORM

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STEP 8: PERINEAL SWABS:
Using **four** swabs **simultaneously**, swab the perineal region. The swabs may be moistened with a minimal amount of sterile water. Allow swabs to **air dry**. Return swabs to envelope. Seal the envelope and fill out all information requested on the envelope.

STEP 9: ORAL SWABS:
Did the patient have oral contact with the assailant's genitalia? ☐ Yes ☐ No ☒ Not sure
If checking yes or not sure, follow collection procedure below.
Using **four** swabs **simultaneously**, swab the buccal and gum line. Allow swabs to **air dry**. Return swabs to envelope. Seal the envelope and fill out all information requested on the envelope.

STEP 10: RECTAL SWABS:
Did rectal assault occur? ☐ Yes ☐ No ☒ Not sure
If checking yes or not sure, follow collection procedure below.
Using **four** swabs moistened with sterile water **simultaneously**, swab inside the rectum. Allow swabs to **air dry**. Return swabs to envelope. Seal the envelope and fill out all information requested on the envelope.

STEP 11: PENILE SWABS:
Using **two** swabs moistened with sterile water **simultaneously**, swab the entire penis. Allow swabs to **air dry**. Return swabs to envelope. Seal the envelope and fill out all information requested on the envelope.

STEP 12: MISCELLANEOUS SWABS:
(Including, but not limited to, possible transfer of blood, saliva, or semen on skin, finger swabs of suspect if digital penetration has occurred, fingernail swabs, etc.)
Did the assailant have oral contact with any area on the patient's body (breast, neck, etc.)? ☐ Yes ☐ No ☒ Not sure
If yes, what area? _____
Was there any transfer of semen from the assailant to the victim in an area not previously collected? ☐ Yes ☐ No ☒ Not sure
If yes, what area? _____
NOTE: Swabs from different areas must be placed in separate envelopes.
Using **two** swabs moistened with sterile water **simultaneously**, swab the above identified areas. Allow swabs to **air dry**. Return swabs to envelope. Seal the envelope and fill out all information requested on the envelope. Please be sure to indicate suspected fluid type on envelope.

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BCA PATIENT INFORMATION AND SEXUAL ASSAULT HISTORY FORM

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STEP 13: BLOODSTAIN PREPARATION:
(Used in DNA testing as a known blood sample from the patient. NOT for use on any injuries the patient may have received.)
Mark bloodstain collection card containing the absorbent paper with the patient's name. Draw blood (using the finger prick provided) and deposit at least 4 individual drops of blood onto the absorbent paper. If drawing blood for other testing, deposit blood from the blood tube or IV tube onto the absorbent paper. **Please do not return a blood tube with the kit.** Allow bloodstain to **air dry THOROUGHLY**. Return absorbent paper and card to envelope. Seal the envelope and fill out all information requested on the envelope.

FINAL INSTRUCTIONS

- 1) Fill out all information requested on all sample envelopes and bags COMPLETELY.
- 2) Return this form to the kit prior to sealing.
- 3) Affix and initial red police evidence seals where indicated on box top.
- 4) Fill out all information requested on kit box top under "For Hospital Personnel".
- 5) Give sealed kit and sealed bags to the investigating officer.

Note: If the officer is not present at this time, place sealed kit and sealed bags in secure and refrigerated area and hold for pickup by the investigating officer.

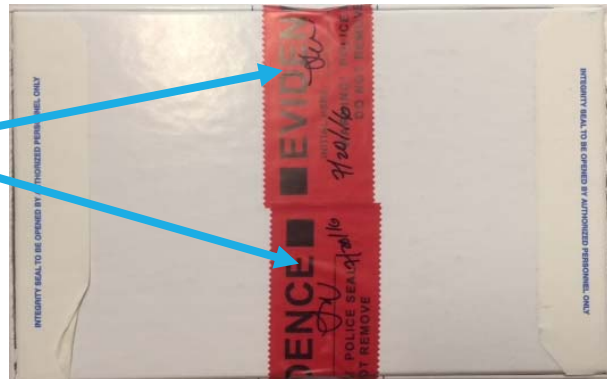
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Example of documentation

Step Nine – Seal the SAK

- Seal SAK with red tape included in the SAK

- Initial and date over seals



Step Ten - Label **Restricted** SAK

- Write SAK **Barcode number** on SAK
- Provider/Collector Name
- Name of person sealing SAK
- Date/time if placed in secured storage
- Clearly mark SAK **Restricted**

Step Eleven - Toxicology Evidence **Restricted**

- Fill in Blood/Urine kit numbers on **Restricted Kit Storage Submission Form**
- Send to BCA without any patient ID information on outside of box
- Label box with SAK Barcode number
- Clearly mark box **Restricted**

The image shows the 'RESTRICTED KIT STORAGE Submission Form' and two boxes. The form is titled 'RESTRICTED KIT STORAGE Submission Form' and includes fields for 'Name and Location of Submitting Medical Facility', 'City, State of Incident', 'County of Incident', 'Patient Name', 'Patient Date of Birth', 'Law Enforcement Agency', 'Law Enforcement ICR or Property #', 'Blood Kit # (as applicable)', and 'Urine Kit # (as applicable)'. The form is marked with 'MN00123' and 'B 416984' and 'U 228142'. The boxes are labeled 'MN00123' and 'U228142' and are marked with 'Restricted'.

Step Twelve - **Restricted** SAK Hand-off

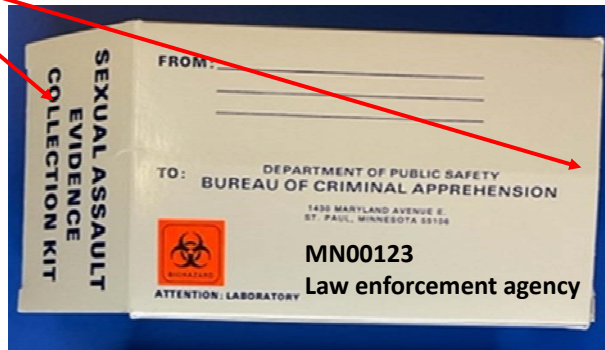
Place sealed SAK and the completed paperwork in the pre-addressed BCA mailing sleeve

- Sexual Assault Evidence Testing and Storage Consent Form and
- Restricted** Kit Storage Submission Form inside the outer BCA mailing sleeve

The image shows the 'SEXUAL ASSAULT EVIDENCE TESTING AND STORAGE CONSENT FORM' and the 'RESTRICTED KIT STORAGE Submission Form'. The consent form is marked with '1.' and '2.' and includes fields for 'Name', 'Address', 'City', 'State', and 'Zip'. The submission form is marked with 'MN00123' and 'B 416984' and 'U 228142' and is marked with 'Restricted'. The submission form is placed inside the outer BCA mailing sleeve, which is addressed to 'DEPARTMENT OF PUBLIC SAFETY BUREAU OF CRIMINAL APPREHENSION'.

Step Thirteen - **Restricted** SAK Hand-off

- Seal both ends of the mailing sleeve with packing/evidence tape



- Hand-off SAK and toxicology kits (if applicable) to law enforcement or
- Send all the evidence to BCA by USPS mail

Step Fourteen - Enter SAK Barcode in Track-Kit

Go to <https://mn.track-kit.us>

SIGN IN

Please enter your login credentials below

Barcode (Username)

Password

[Contact Support](#)
[Forgot your password?](#)
[How do I get an account?](#)

Click on link to view support info

- If you are having trouble logging in – lock up evidence in a secure location
- Track-Kit instruction guide in Resource Binder

<https://mn.track-kit.us/login> ♦ support@stacsdna.com ♦ 1-888-470-4252 ♦ 24 hours a day, 7 days a week

Entering Information into Track-Kit

Select Your Hospital From the Drop Down Menu

Organization Selector

Your user account is a multi-organization account. Before proceeding, you must select the organization under which the various actions you intend to perform will be recorded.

Please note: You will be able to change the organization you are acting under through the Dropdown Menu that will be located on the top left corner of the website.

Organization * ?

Select...

Proceed

Scan or Manually Enter Barcode Number

You are currently logged in as [Linda Walther](#)
(Last Login: 6/30/2022 4:55 PM)

Under the Regions Hospital

Collapse Menu

Home

☒ Collected

☐ Uncollected

Orders

Start by scanning a barcode

Enter/Scan Barcode...

Go

If you manually enter the barcode number – you will be asked to enter the number twice.

Enter SAK Info

- **Restricted**
 - Check “No”
- **Don’t enter law enforcement agency and county unless LE picks up SAKs as a courtesy**
- Enter Toxicology samples
 - Drop down boxes for toxicology sample box numbers
- Check if sending SAK by mail

The screenshot shows the 'Kit Details' form with the following sections and fields:

- General Details:**
 - Barcode: MN00131
 - Kit Type: Sexual Assault Kit
 - Status: In Medical Facility
 - Tracking Completion Date: (empty)
- Medical Facility Details:**
 - MF Kit Status: In Inventory
 - Collector: Donna Anderson
 - Collection Date: 3/9/2022
 - Is this an Unrestricted Kit?: ☐ Yes ☒ No
 - Law Enforcement Agency: Select...
 - LEA Reporting County: Select...
 - Blood Sample?: ☐ Yes ☒ No
 - Urine Sample?: ☐ Yes ☒ No
 - Other Items: ☐ Yes ☒ No
 - Are you mailing kit to lab?: ☒ N/A ☐ Yes ☐ No
 - Enter a tracking number if applicable: (empty)

Red arrows from the instructions point to the 'Is this an Unrestricted Kit?' field, the 'Law Enforcement Agency' and 'LEA Reporting County' dropdowns, and the 'Are you mailing kit to lab?' field.

Evidence collection: Chain of Custody

- Ideally the SAK, Blood, and Urine kits should be refrigerated
- Storage/Refrigerator need to be locked with limited access
- Evidence is mailed to BCA or handed off to law enforcement
- Mailing can be done on the next business day if evidence is in a locked, secure location (for example - in locked cabinet, medication dispensing system, lab)
- Make sure to document SAK barcode in the HER encounter
- Document when SAK is mailed or handed off to law enforcement (important for hospital liability)

Patient Discharge Information **Restricted** SAK

- Discharge information including **SAK Barcode number**
- Advocacy referral
 - Rapehelpmn.com – by zip code
 - RAINN.org 24/7 online help
- Give patient paper bags to store clothing store in secure location at home

Restricted Sexual Assault Kit Information

- The Minnesota Bureau of Criminal Apprehension (BCA) is the designated entity that is required by law to securely store all sexual assault evidence kits when they are restricted (not reported to law enforcement) for a minimum of 30 months.
- 30 months from the time the BCA receives your kit(s), if no report to law enforcement has been made, the BCA has the authority to destroy your kit(s).
- Restricted kits submitted to the BCA will not contain any identifying information inside or outside the kit. Instead, a unique identification number will be assigned to all evidence collected (see below).
- All medical information, including the Forensic Medical Exam note and any additional care provided during your exam will be securely stored in your medical chart at the hospital.
- Evidence kits are not tested unless a report is made to law enforcement. To make a report, contact the law enforcement agency serving the location of where the assault took place. However, Minnesota statute 609.3429 does state that a victim may initiate a report by contacting any law enforcement agency, regardless of where the crime may have occurred. You will be required to sign forms to convert your kit(s) to an unrestricted kit for testing and to allow release of your Forensic Medical Exam note to law enforcement.

You are strongly encouraged to contact advocacy services to help with the reporting process. Rapehelpmn.com or RAINN.org can help you find advocacy services near you or you can call RAINN 800.656.4673.

- If you make a report to law enforcement, your kit(s) will be tested by the BCA. Please contact the law enforcement agency investigating your case for any results received.

Your sexual assault kit barcode number: **MN00123**

Signature of Patient/Parent/Guardian

Date

Signature of Nurse

WELCOME TO YOUR PORTAL

The survivor portal is the web-based access point for information on your kit

On the survivor portal, you can:

- See your kit's progress as it moves from the medical facility to the law enforcement agency to the lab.
- Find survivor resources.
- Find contact information for the hospital, law enforcement agency, and prosecutor's office affiliated with your kit.
- Subscribe to updates on changes to your kit's status.
- Use the quick exit feature to leave the site quickly and clear your browser history.

Log in

- Go to the web address given to you at the time of your exam.
- Enter your username (the kit barcode) and your temporary password.
- The first time you log in you will be prompted to change your password.
- After that, you can change your password at any time by going to **User Profile > Password Management**.
- Set up security questions to help you reset your password if you forget it.
- Go to **User Profile > Security Questions** and follow the on-screen instructions.
- If you forget your password you can reset it by answering security questions (if you set them up) or by clicking on **Forgot Your Password?** on the login page.

Navigate the portal

- Go to "My Kit" to see your kit's status.
- Go to "Resources" to find helpful resources.
- Go to "Contacts" to view information about this hospital, law enforcement, and prosecutor's office associated with your kit.
- Go to "FAQ" to learn about Frequently Asked Questions.
- Go to the User Profile icon to manage your password and subscribe to updates.
- Log out using the "EXIT" button.

PORTAL DETAILS AND SETTINGS

Understanding the options available in the survivor portal

View your kit's details

- Whether or not you gave consent to have your kit tested.
- Discard date for your kit if you did not give consent for testing.
- Current status and location of your kit.
- The history of your kit's progress through the system.

MY KIT'S DETAILS

Set up notifications

- To receive updates on your kit, go to **User Profile > Update Notifications** and choose the updates you wish to be sent by email or text.
- You can also designate an ideal time of day for update.

Use the privacy and security features

- In the upper-left corner of the screen verify the time of your last login to ensure that your account is secure.
- Click on the "EXIT" button in the upper-right corner of the screen to leave the site quickly.
- Go to "Clear Your Browser History" for instructions on clearing survivor portal from your browser's history.

Find resources and help

- In this section you can search for victim advocacy services, telephone hotlines, or other helpful resources such as links to websites, resource guides, or videos.
- You can filter the resources by geographical area to find something close to home.