

# Forensic Photography

*Critical Graphic Documentation Of Elder Abuse For Law Enforcement Officers, Medical Professionals, Advocates, & Others Who Participate In Prosecution*

# Objective #1

Understand value of formal photographic documentation of injuries, environment or other factors to facilitate prosecution of Elder Abuse incident

# Objective #2

Describe tools available for formal photographic documentation of injuries, environment or other factors to facilitate prosecution of Elder Abuse incident

# Disclosure

- The planners, presenters, and content reviewers of this course disclose **no conflicts of interest**.
- Upon signing in on the attendance sheet, attending the course in its entirety (due to the criticality of the content) and completing the course evaluation, you will receive a certificate that documents the continuing nursing education contact hours for this activity.
- The International Association of Forensic Nurses is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.



# Additional Disclosures & Attribution

- My career is in Forensic Nursing, so the perspective & semantics used will often reflect my own practices & experience.
  - “Patient” instead of Victim or Survivor
  - Focus is on medical treatment & documentation of injuries rather than assisting with prosecution; unbiased
  - Bound by Nursing Ethical Principles
    - Nonmaleficence
    - Autonomy
    - Beneficence
    - Justice
    - Fidelity
    - Integrity
- I will do my best to specify areas that be different for law enforcement, social workers, prosecution, & other professionals; stop & correct me if you hear me discussing anything that would be incorrect or different for your field.
- Many of the ideas, photographs, & quotes have been borrowed from respected colleagues & other professionals, with permission. I have cited these & a full list of References to match the citations is at the end of the presentation.

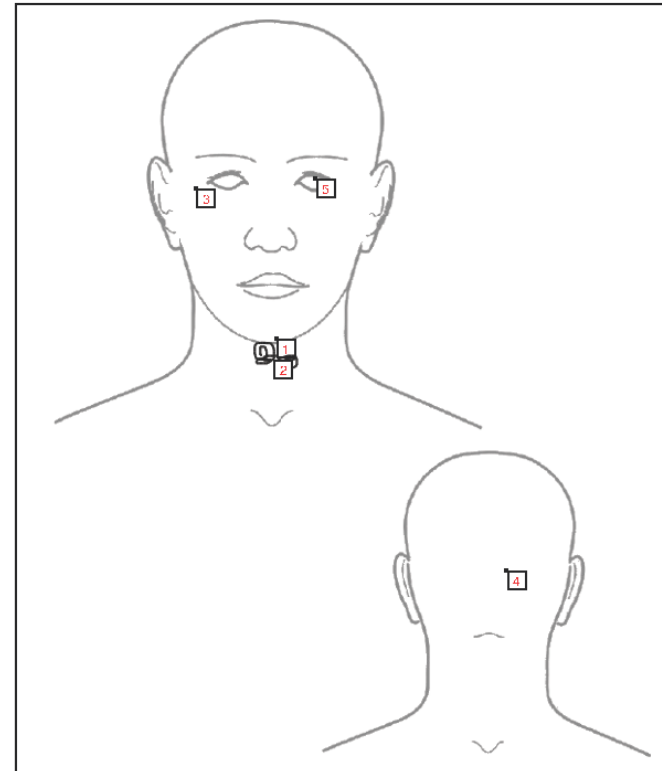
# Seeing is Believing

- Photographs best describe injuries & evidence.
- Provides objective, reliable data.
- Records things that may not be noticed initially.
- May be used for quality control, training, and peer review.
- It is more powerful to show the jury a photo of injury or evidence than to describe it alone- Vivid Representation of the truth.

# Documentation of Injuries

- Every injury should ideally be documented in 3 different ways:
  1. Description of injury in chart
  2. Body Map
  3. Photograph (with accompanying Photo Log)

Diagrams 1 of 5



Item Type of Finding	Description
1	Abrasion
2	Erythema (redness)
3	Bruise:contusion
4	Alternate Light Source +ALS at 470 nm around where perpetrator had his face during sexual assault
5	Petechiae

Notes

# Photography Habits of a Professional Expert<sub>3</sub>

- Take the time to learn how to competently use your camera.
- Always wear gloves if your hands will be in photo.
- Be consistent. If you choose to use a scale for a bruise on one part of the body, but not a separate bruise, you will look sloppy.
- There should be a consistent pattern in the order of photographs- such as head to toe.
- Photographs should match written documentation. Chart description of injury, photo scale, and body map should sound the same.
- Ensure secure back-up storage of photographs. Always obtain original copies of images as a part of the chart.
- Peer review of cases should include feedback on photography. Are they clear? At a 90° angle? Both with/without scale? Etc.



# Will it hold up in court?

- “Is depiction this a fair and accurate depiction?” Is it relevant to the case?
- If both are true, the actual person who took the photograph should not need to testify or even be identified. <sup>1</sup>
- Victims/patients may take their own follow up photography for use in court. It’s advisable to suggest they stamp it with a date & time.

# Personal Cell Phone Cameras



- Do NOT ever use your personal cell phone to take photos of patients.
- It is unprofessional at best & likely violates patient privacy laws.
- Your cell phone may become evidence, in which case it will likely be taken by police for several weeks to preserve for a case.
- Just don't do it!



# Consent for Photodocumentation

- Before taking photographs, patients should receive an informed consent that is specific for imaging.
- Be familiar with your facilities policies & procedures as well as state legislation.
  - Photo only visible injuries or all patients?
  - How will you securely store photos?
  - Are genital photographs handled differently?
- Law enforcement or CSI may also take photos. It is recommended to always take your own as well.
- The consent should also detail to whom and how the photos can be released. (L.E.? Only the DA?...)

# To Delete or Not to Delete?<sup>5</sup>

- What is your policy on blurry or unusable images?
- Two different viewpoints:
  - Deleting destroys evidence
  - You should delete any photos that don't adequately document what was seen at the time of exam
- Law enforcement agents, or Crime Scene investigators should not delete photos. However, nurses/medical staff are not LE. There is no set "gold standard" for this in the Forensic Nursing world.
- Forensic cameras may renumber images when one is deleted, further strengthening the argument to delete.



# According to Dr. Jen Markowitz:

*“[P]hotos are taken for the purpose of documenting findings as part of the medical record. Just as our colleagues in other areas of medicine take photos to document findings (and delete photos that aren’t useful for those purposes, such as blurry ones), so too do we. Those photos may then be used, along with the rest of the medical record, in a criminal or civil proceeding. At that time I have to testify as to whether my photos are “true and accurate” depictions of what I saw on exam. I am swearing under oath that my photos display what I saw. Just as I swear under oath that the swabs were obtained from the places I say they were obtained, or that the statements in my documentation actually reflect what the patient said to me.*

*To be honest, the idea that we are “destroying evidence” seems to be an arbitrary one. We don’t maintain specula after female sexual assault medical-forensic exams, but certainly, we could argue there is “evidence” potentially present on them. We don’t worry about it because there are swabs that theoretically captured the same “evidence”. I view this under a similar light. And being able to discuss my (current, regularly reviewed) policies and procedures and articulate why I may have deviated from them (if in fact, I did) is what speaks to transparency, in my opinion.”*

From Forensic Healthcare Online Article, “Deleting Blurry & Unusable Photographs.”

# Be Respectful

- Never photograph a patient's face & genitals together in one image.
- Except in very rare cases, a long-range, naked shot of a patient is not acceptable or necessary.
- When it will not compromise a photograph, drape a patient to protect their modesty. (i.e. when photographing a bruise on the upper chest, it may be appropriate to drape their breast).
- Above all, do not coerce or force a patient/victim to have any photographs taken against their will.

# First step...

- Do not forget to include patient's identifying information.
- The first and photographs should “bookmark” the images with patient's identifying information.
  - Name
  - Age
  - Date of Birth
  - Date of Service
  - Sex
  - MRN
- In a hospital setting, a patient's armband or label may be useful. Law enforcement or CSI often uses a cover sheet or photo ID card.
- The second photo should be an image of the patient's face for identification.





# Views to Photograph<sub>4</sub>

- When photographing an injury, you should typically take 3 views
  - Full Body view for perspective
  - Mid-range view for context
  - Close-up view
- If you use a scale in close-up photo, always duplicate the same photograph without the scale to show you are not hiding exculpatory evidence.



# The Rule of Thirds

## Photography

- Compositional rule that helps you take more aesthetically pleasing photos
- Divide your camera's frame into thirds and plant key objects on these lines



## Forensic Photography

- At one time, this term was incorrectly used to describe the principal of taking 3 separate photos with views of every injury at different lengths with Forensic Photography.

# Photodocumentation as Evidence

- There are other things that can be photographed beyond injuries to corroborate patient's account of the assault:
  - Torn or bloody clothing
  - Dirt/debris
  - Broken fingernails
  - Disheveled/matted hair



# ALS (Alternate Light Source)

- Some body fluids invisible to the naked eye may fluoresce (glow) under a specific wavelength of light & with colored goggles.
- Light will be absorbed (darken) under ALS with blood.
- There is questionable science about detecting under the surface bruising with ALS.

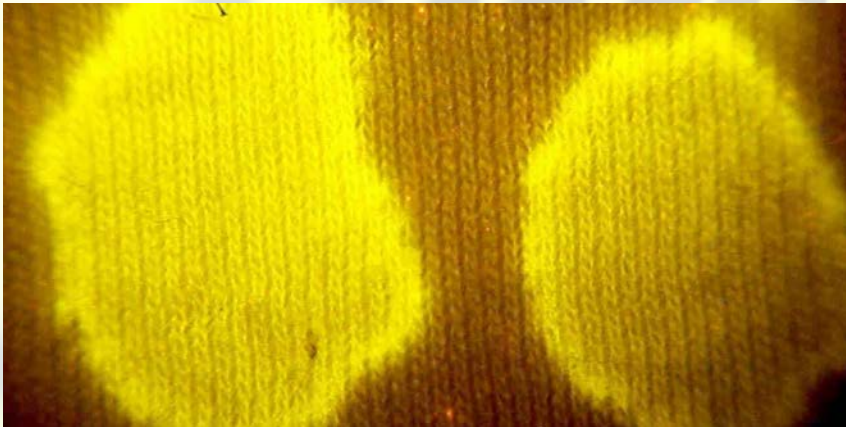


To photograph fluorescence or absorption under ALS, block out as much white light/external light as possible. Use either an appropriately colored camera filter or shield in place of goggles. Adjust the ISO, Shutter Speed, & Aperture until desired effect is achieved.

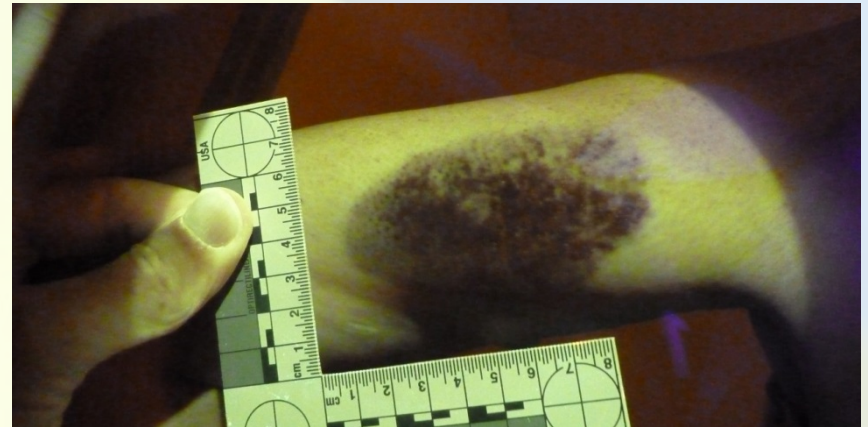


# ALS (Alternate Light Source)

**Fluorescence with unknown fluid**



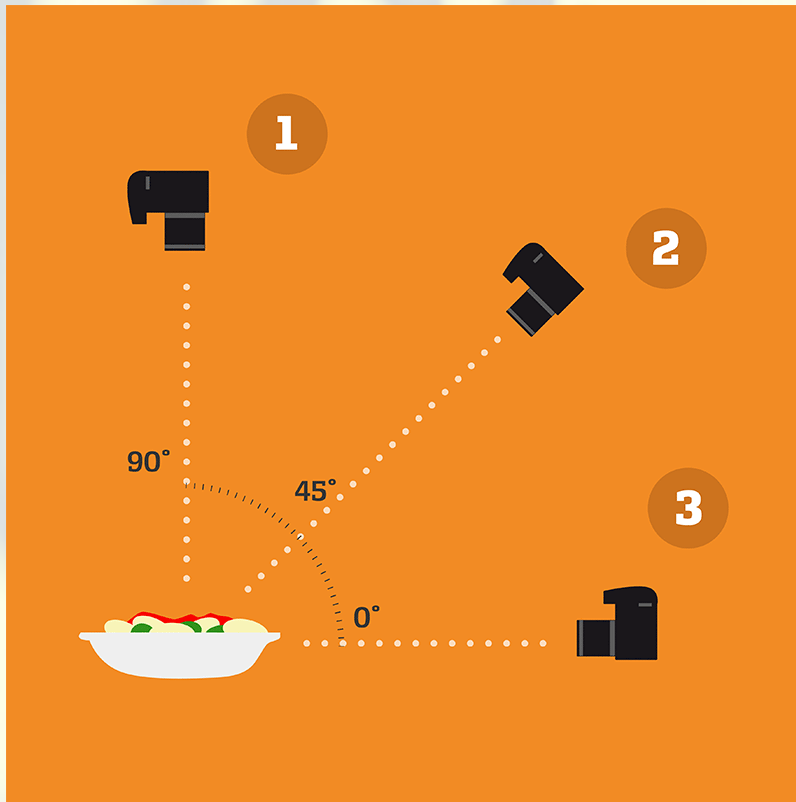
**Absorption with bruising/blood**



When charting findings of ALS, document location, wavelength (in nm), and any details patient is able to give about substance or injury. However, you can not identify substance solely on the appearance under ALS.



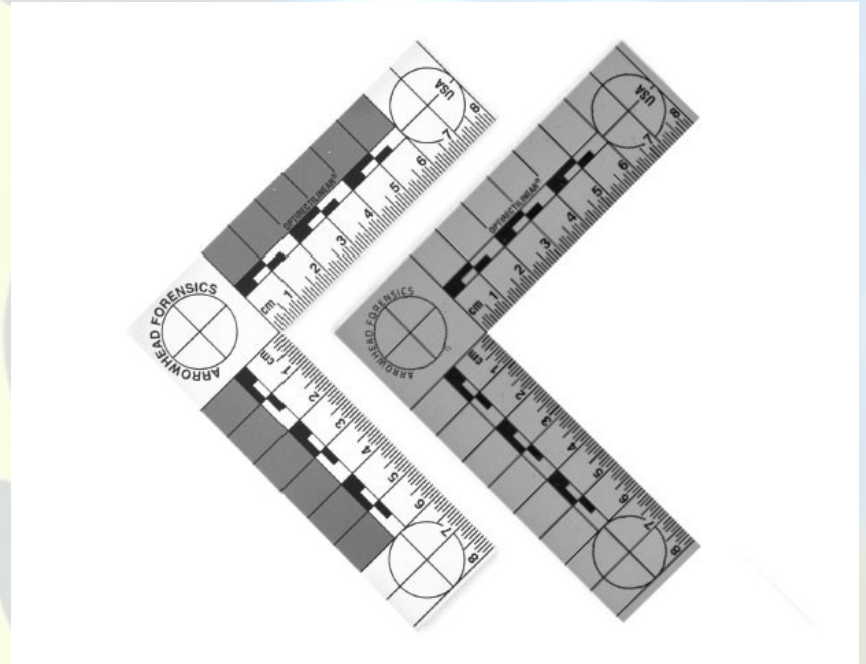
# 90° Rule



- Images must truly and accurately represent the object in question.
- Images of objects should be shot at a 90° angle to the subject so there is no distortion.
- Perspective shots (show placement of object) do not need to follow this rule.

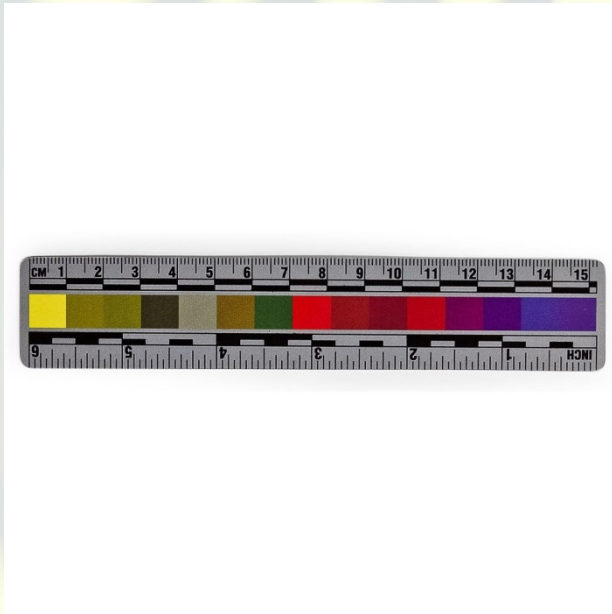
# Scales

- Allow accurate dimensions in images of objects we photograph.
- Often a small ruler, but many objects may be used when necessary, such as coins or business cards.
- ABFO #2 scales are L-shaped to measure dimensions. Other scales are linear.



# Scales

- Some photo scales have colors to help determine accurate colors of bruises or other injuries regardless of lighting.
- When using a scale in close-up photo, always duplicate the same photograph without the scale to show you are not hiding exculpatory evidence.
- Some are reusable; others have adhesive and are meant to be used once.





Holding a standard ruler would not show the curvature  
The rings keep the picture in perspective

Older version of the KISS System



# Colposcopy

- Medical diagnostic procedure to examine an illuminated, magnified view of the cervix and the tissues of the vagina and vulva.
- Becoming outdated as digital camera imaging technology has surpassed clarity of photos



# Forensic Camera Systems



- Cortexflo, SDFI
- Offers hands-free photography paired with a high quality digital camera and secured storage system.

# References

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