

WI-IAFN SANE/FNE Suspect Examination / Evidence Collection Guidelines

“Forensic nurses care for and treat individuals, families, communities, and populations in systems where intentional and unintentional injuries occur. These include but are not limited to patients who have been: Victims, suspects, or perpetrators of interpersonal violence...” (Forensic Nursing: Scope and Standards of Practice 2015, page 10). The International Association of Forensic Nurses Sexual Assault Nurse Examiner (SANE) Education Guidelines outlines the evidentiary needs in the care of the patient (suspect) of sexual assault.

The examination and evidence collection from the suspect is as important as the examination and evidence from the victim. The timely and complete examination of the suspect may assist in the investigation and prosecution of a case or in the exoneration of someone falsely accused or misidentified.

Evidence obtained in an unlawful search or seizure is generally inadmissible in a criminal trial. If the suspect is consenting to the SANE/FNE examination and evidence collection, the WI-IAFN Model Suspect Consent Form: Forensic Examination (Appendix 1) should be used by the SANE/FNE to obtain consent. A consenting suspect can withdraw his/her consent to the examination at any time. If consent is withdrawn, law enforcement will need to obtain a search warrant for the examination and evidence collection. If consent is withdrawn after evidence collection has occurred, healthcare organization policy and procedure should be followed. If the suspect is NOT consenting, a search warrant must be obtained by law enforcement and presented to the SANE/FNE prior to the examination and evidence collection. The WI-IAFN and WI DOJ recommends the use of the search warrant developed by the WI Department of Justice and the WI-IAFN Protocols and Documentation Committee (Appendix 2).

Law enforcement and prosecutors determine if a suspect examination is to be done. The SANE/FNE (due to training and experience) is the expert in the determination of what evidence should be collected from the suspect. SANE/FNE from the WI Chapter of the IAFN have developed charts detailing what should be collected in regards to what contact / acts are reported (Appendix 3 and 4).

The SANE/FNE suspect examination will consist of the following:

- A same sex (as the suspect) law enforcement officer must be in the room throughout the examination of the suspect.
- Initial assessment of the suspect will include vital signs, height/weight, any physical complaint, medical/surgical history, allergies, current medications, right or left handedness and whether the suspect has had a vasectomy, a bone marrow transplant or is a twin.
- The suspect will be referred to the ED physician or PCP if any condition is identified during the SANE/FNE suspect examination which requires assessment or intervention beyond SANE/FNE scope of practice.
- Head-to-toe assessment will be focused on identification of possible evidence and its collection, documentation of any injury found and any other relevant physical finding(s).
- Evidence collection may include but is not limited to swabs of various parts of the body including the fingernails and genital area, collection of any dried secretions or debris

found on the body, body hair, the DNA standard, clothing, blood and/or urine and photographs indicating injury and /or identifying marks on the body.

- No photographs or video recordings of the genitals unless specifically stated in the consent or search warrant.
- Evidence collected will be released to the law enforcement agency requesting the suspect examination.
- STI testing if requested by law enforcement.
- Ideally, the same SANE/FNE and the same room will not be used for the examination of the victim and suspect. If this is not possible, measures taken to prevent cross-contamination will be documented.
- The non-consenting suspect should assent or be cooperative with the examination. If the suspect becomes uncooperative or combative during the examination, the SANE/FNE should stop the examination and have law enforcement intervene as jurisdictional and healthcare organization policy and procedure dictate. If the nurse does not feel safe, the SANE/FNE may choose not to participate in the suspect exam.
- The law enforcement agency requesting the examination/evidence collection of the suspect will assume the cost of forensic services.

Completed by the members of the WI-IAFN Protocols and Documentation Committee on 07/14/2017.

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