I. Title
Sexual Assault Examination and Collection of Forensic Evidence for the Adult, Adolescent or Pediatric Patient

II. Policy
UTMB supports community efforts to address sexual assault crime by establishing a process for accurate evidence collection and support for sexual assault survivors.

Medical Forensic Sexual Assault Exam with Evidence Collection (MFSAEEC) shall be performed by a Sexual Assault Nurse Examiner (SANE), if available. If a SANE nurse is not available, an Emergency Department (ED) nurse may perform the exam; however, the speculum exam may only be performed by an ED faculty physician or a nurse practitioner.

Treatment of the patient shall be considered a medical emergency. The Emergency Department (ED) staff is responsible for the medical and/or surgical care of the patient. Stabilizing the patient’s medical condition is a priority.

UTMB respects the diverse cultural needs, preferences, and expectations of the patients and families it serves to the extent reasonably possible while appropriately managing available resources and without compromising the quality of health care delivered.

Forensic photographs will be used for photo documentation, educational purposes, and peer review, but the name of the patient will not be identified. Forensic photographs will be stored in the ED.

Forensic Photographs will be released to:
1. District Attorney Office by subpoena only.
2. Department of Family Protective Service (DFPS)
   a. Complete the “Texas Department of Family Protective Service AUTHORIZATION TO DISCLOSE PROTECTED HEALTH INFORMATION” form. The Forensic Record and/or Forensic Photographs are then released to DFPS.
   b. The Forensic Record and/or Forensic Photographs are then released to DFPS.
   c. No genital photographs will be released to DFPS. If a specific request is made for genital photographs UTMB Legal Affairs will be consulted.
3. Law Enforcement Agent
   a. Complete the “LAW ENFORCEMENT REQUEST FOR RECORDS” form. The Forensic Record and/or Forensic Photographs are then released to Law Enforcement.
   b. No genital photographs will be released to Law Enforcement.
   c. If a specific request is made for genital photographs UTMB Legal Affairs will be consulted.

SANE records are stored in compliance with the UTMB Records Retention Schedule.

III. Procedures

When a patient presents to the (ED) with a law enforcement official requesting an MFSAEEC, or a patient presents to the ER with a history of sexual assault that has occurred within the previous 96 hours:

1. The triage nurse or nurse accepting the patient shall generate an ED record indicating sexual assault. NEVER USE THE TERM “RAPE.”
2. The social worker and charge nurse are notified.
3. Treatment and/or evidence collection shall not be delayed for a social worker or the Galveston County Resource and Crisis Center (GCRCC) unless the patient agrees to the delay.
4. The patient and family/guardian are placed in the exam room. (The patient should not undress at this time.)
5. The physician or nurse practitioner completes a medical assessment examination.
6. Vital signs, past medical history, current medications, and immunization status shall be assessed and recorded on the ED record.
7. If the patient declines the forensic exam, the medical exam and treatment shall be performed on patient request only.
8. If the patient meets ALL of the following criteria, dispatch shall be called to activate the SAFE Team:
   - The patient does not require immediate medical attention;
   - The patient is competent and capable of signing consent for the examination and collection of evidence;
   - The patient voluntarily wants an MFSAEEC;
   - The patient was sexually assaulted within the past 96 hours; AND
   - The patient has a Law Enforcement case number.
9. If the patient is 18 years or older and meets the above criteria, the patient may request the MFSAEEC without involving Law Enforcement. The patient will not have a Law Enforcement case number.
10. Informed written consent for treatment shall be obtained from the patient or guardian.
11. The patient has the right to refuse any/all steps of the collection of evidence and medical treatment.
12. Only the patient; examiner with chaperone, if indicated; and an advocate from the Galveston County Resource and Crisis Center (GCRCC) with patient/guardian consent, shall be allowed in the exam room, unless the patient requests an accompanying person of their choice. The examiner shall decline any person entry whose presence may compromise the exam.
13. The SANE or ER nurse shall not leave evidence unsecured and shall maintain the chain of custody.
14. A Toluidine Blue Dye will be applied prior to any digital, speculum examination, or vaginal instrumentation (i.e., insertion of a vaginal Foley catheter or rectal swab) to avoid causing injuries by the improper handling of an examination by speculum or the improper insertion of the examining finger.
**Note:** If a SANE is consulted to complete a sexual assault exam on an “Inpatient,” the SANE shall evaluate whether the patient meets the above criteria. If the patient meets the necessary criteria, the exam shall be done in the SAFE room, unless the patient is critically ill in which event the exam shall be done in the critical care room.

**Use of Colposcopy/Digital Camera for MFSAEEC**

The patient will be informed of the purpose of taking photographs and will give a verbal and/or written consent which will be documented in the medical record.

15. A patient who is a minor or any patient who is unable to consent must have consent given by a parent, legal guardian, or court order. (Under Texas Family Code - Section 32.005 Examination without Consent of Abuse or Neglect of Child)

16. Texas Department of Criminal Justice (TDCJ) rules and regulations apply for patients that are inmates of TDCJ.

17. County/City inmates are able to consent for themselves.

**IV. Definitions**

**Colposcope:** A lighted magnifying instrument used to examine the tissues of the hymen, vagina, cervix, and anal area, and which has the capability of taking and recording forensic photographs.

**Forensic Photographs:** Photographs that are taken during a sexual assault/abuse forensic/medical exam and/or forensic evidence collection process.

**Medical Forensic Sexual Assault Exam with Evidence Collection (MFSAEEC):** An exam performed by medical personnel for documenting the history of an assault; assessing and documenting findings of trauma and injuries during a head-to-toe examination; assessing and documenting genital injuries; and providing treatment and collecting evidence following a sexual assault. The exam is requested and/or ordered by Law Enforcement Departments, District Attorneys, or County Attorneys of the county in which the assault occurred. The exam may also be requested by patients 18 years or older that do not wish to involve law enforcement.

**Sexual assault:** Any unwanted, non-consensual, sexual contact against any individual by another. This includes acts involving manipulation, physical force, or coercion. Sexual assault is never the patient’s fault.

**Sexual Assault Evidence Collection Kit (SA Kit):** A pre-packaged kit that contains materials, supplies and records used to collect and document forensic evidence post sexual assault.

**Sexual assault nurse examiner (SANE):** A specially trained Registered Nurse who has received classroom and clinical training to perform sexual assault exams and collect forensic evidence.

**SAFE room:** A room designated for and supplied with special equipment to perform the MFSAEEC.

**SAFE TEAM:** The UTMB response team to a sexual assault patient. This team includes the SANE, a social worker, and the charge nurse.

**Subpoena:** A written legal writ requiring an appearance in court to give testimony or to supply documents pertaining to a specific legal investigation.
**Toluidine Blue Dye (TBD):** A 1% aqueous solution that dyes the deep inner epidermis skin cells whose nuclei have been exposed by lacerations/tears. TBD is used for detection of minor injury in the anal-genital area. A deep blue color uptake is considered positive indicating injury.

V. **Texas Department of Correction (TDC) and County Jail Inmates**

Texas Department of Criminal Justice (TDCJ) rules and regulations shall apply for patients who are inmates of TDCJ. County/City inmates are able to consent for themselves.

When an inmate states she/he has been sexually assaulted and the assault occurred within the past 96 hours, follow the policy and procedure above with the following considerations:

TDCJ inmate:
The patient’s nurse will call TDCJ Control Picket and request a case number from the Office of Inspector General (OIG) who will approve whether a MFSAEEC should be completed.

County inmate:
County officers will bring the inmate to the ER with a case number.

ED dispatch is notified to activate the “SAFE” Team; however the GCRCC is not called.

The SANE nurse will take security into consideration when determining where the exam will be performed.

During the MFSAEEC:
- At least 2 officers must be present at all times and more officers may be requested as needed; and
- The inmate’s cuffs will not be removed unless indicated by the SANE.

Upon completion of MFSAEEC:

TDCJ:
1. The inmate is returned to the appropriate location based on the patient’s condition.
2. The Investigator or designated officer signs the chain of custody form and takes the SA Kit.

County:
1. The inmate is returned to the appropriate location in the ED/hospital based on the patient’s condition.
2. If no further treatment is required, the inmate is discharged into the custody of the County law enforcement officers.
3. The Galveston County Sherriff’s department signs the chain of custody form and takes the SA Kit.

VI. **Responsibilities**

*Social Worker*
1. Make contact with the patient and ask if services from Galveston County Resource and Crisis Center (GCRCC) are desired. If yes, the social worker will ask the patient to sign an Authorization for Disclosure of Protected Health Information and call to request an advocate.
2. Contact law enforcement from the jurisdiction in which the reported assault occurred if there is no case number.
3. Explain to the patient that they may need to wait up to an hour for the SANE to arrive. Do not have the patient remove clothing until instructed by the SANE or ED nurse performing the exam.
4. Clean clothing may be sent for during this time, since the patient’s clothing will most likely be tagged as evidence.
5. Discourage the patient from eating, smoking, washing, or urinating prior to the exam. If the patient must use the restroom, encourage him/her not to wipe after use, preserving any evidence that may be present.

SANE
1. Explain the evidence collection procedure to the patient.
2. Obtain consents for MFSAEEC, treatment, collection of evidence and release of medical records information to the law enforcement agency with jurisdiction.
3. The SANE will escort the patient to the SAFE room.
4. Once the forensic exam begins, the SANE or ED nurse performing the exam will not leave the room unless a medical emergency arises and faculty is involved (in this case, evidence collection is deferred until the medical emergency is resolved.)
5. Obtain a history from the patient and document it using the patient’s own words.
6. Conduct a head-to-toe exam, and document the size, shape, color and location of any injuries.
7. Collect specimens following the Texas Evidence Protocol, as outlined in the Sexual Assault Evidence Collection Kit and as indicated by the history given by the patient.
8. Conduct a detailed genital exam as indicated by the history of the patient, looking for signs of trauma and/or foreign material. Document any signs of trauma or foreign material, using a Woods lamp for a visual examination of semen on body surfaces. A colposcope may be used to provide improved visualization of injuries (see guidelines below). A digital camera may be used upon verbal and/or written consent to photograph from the patient or used upon verbal and/or written consent to photograph from the patient or their legal representative. (Under Texas Family Code -Section 32.005 Examination without Consent of Abuse or Neglect of Child).
9. Initiate pregnancy prevention medication if indicated and/or requested, but only after confirmation of negative pregnancy test results.
10. Administer prophylactic medication necessary to prevent Sexually Transmitted Infections (STI) as outlined in order sets.
11. Initiate all referrals to regulatory services, mental health services or any other services deemed necessary or required by law.
13. Ensure that all the evidence remains in the presence of the SANE or in the locked SAFE room until collected by the law enforcement agency requesting the MFSAEEC.

VII. Relevant Federal and State Statutes
Texas Penal Code § 22.011 (Sexual Assault)
Texas Human Resources Code Chapter 48 (Investigations and Protective Services for Elderly and Disabled Persons)
Texas Family Code Chapter 32 (Consent to Treatment of Child by Non-Parent or Child)
Texas Family Code Chapter 261 (Investigation of Report of Child Abuse or Neglect)

VIII. Related UTMB Policies and Procedures
IHOP 6.2.26 Patient Rights Related to Protected Health Information (PHI)
IHOP 9.3.9 Reporting Suspected Abuse, Neglect and Exploitation of Children, the Elderly and/or Disabled Persons.
IX. Additional References

Regional Maternal and Child Health Program Policy 13.7, Assessment and Screening of Domestic Violence

Lynch, Virginia A. MSN,RN,FAAN, FAAFS, Forensic Nursing; Mosby Inc. 2006


Groth, Stephen J. MD, FACEP, Goldman Peggy L. MD. FACEP, Evaluations and Management of the Sexually Assaulted or Sexually Abused Patient; Use of Toluidine Blue Dye. This publication has been produced by the American College of Emergency Physicians under contract 98-0347(P) with the US Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. June 1999.


X. Dates Approved or Amended

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XI. Contact Information

Nursing Services
(409) 772-4104