Illinois Sexual Assault Nurse Examiner (SANE) Training Program Sexual Assault Evidence Collection Guide

Overall Considerations:

- Use in conjunction with the Sexual Assault Treatment Checklist Form
- Use in conjunction with the instructions provided in the ISPECK kit
- Per ISPECK instructions, the examiner should wear protective gear during evidence collection, including gloves, gown, mask and hair covering
- Gloves must be changed after each item of evidence is collected
- Thoroughly clean exam room and evidence processing areas
- Package unlike samples separately and in paper bags/envelopes
- Avoid contamination during collection and the drying of samples
- Evidence collection steps can be done in any order; patient comfort is a major factor throughout the exam
- There is only one chance to collect: when in doubt, collect it!

***Evidence Collection Kit shall be completed if the patient presents himself/herself within 7 days of the sexual assault.

Type of Evidence Specimen	Reason to Collect	Collection Equipment	Method/Instructions
Miscellaneous/debris collection Clothing collection	If patient has not changed clothes post assault; to collect trace evidence that may be	Cloth sheet/exam mat provided in ISPECK kit	 Place clean hospital sheet on the floor Place cloth sheet/exam mat directly over the clean
	present on clothing		hospital sheet 3. Patient stands on cloth
			sheet/exam mat 4. Patient removes one article
			of clothing at a time 5. Place each article of
			clothing in a separate
			 Create a privacy wall for the patient during the
			process using a blanket7. Collect the cloth
			sheet/exam mat by placing in paper bag provided in ISPECK kit
			8. Always collect the patient's underwear even if not
			same as worn during the assault
			 Document stains/tears in clothing
Other debris collection	To collect trace evidence or other findings on the patient's body	Paper bindle; will need to add to ISPECK kit using new printer/copy paper; fold paper	 Collect any debris found on patient's body using a newly gloved finger or a
		the same as bindle found in Step 10 (head hair combings)	swab; do not use forceps/tweezers
			2. Place each item collected in a separate bindle and place in envelope
			3. May need extra small
			envelopes 4. Document debris/other findings
Oral specimens	Oral penetration with or without ejaculation	Sterile swabs	1. Use dry 2 swabs at a time; collect a total of 4 swabs
			2. Swab oral cavity of patient; concentrate on area
			between lower cheek and gums
			 Air dry swabs Place in corresponding
			envelope
Miscellaneous stains/bitemark evidence	Oral contact by assailant, i.e. anywhere the assailant touched	Sterile swabs Sterile water	1. Moisten one swab with sterile water
	the patient with his mouth (kissing, biting, etc); to collect assailant saliva		 Swab the entire area/stain Air dry swab Place in corresponding

			onvolono
	To collect any area that fluoresces under a Wood's Lamp or other alternative light source		envelope
	To collect any dried secretions/stains noted		
	Direct skin contact by assailant, i.e. anywhere the assailant grabbed the patient; to collect assailant skin cells/sweat		
Fingernail specimens	If the patient scratched the assailant during the assault; to collect assailant skin/blood cells	Fingernail wood scraper and bindle; one per hand; provided in ISPECK kit	 Remove 2 specimen envelopes (right hand, left hand) Place bindle under patient's hand on flat surface Scrap nails while holding nails over bindle so that debris falls into bindle Refold bindle and place scraper and bindle in corresponding envelope Repeat steps for other hand
Head hair combings	To collect trace evidence in patient's hair	Comb and bindle; provided in ISPECK kit	 Remove paper bindle and comb Unfold paper bindle Comb head hair so that any loose hair/debris falls into bindle Refold bindle and place comb and bindle in corresponding envelope
Pubic hair combings	To collect trace evidence in patient's pubic hair	Comb and bindle; provided in ISPECK kit	 Remove paper bindle and comb Unfold paper bindle Place under patient's buttocks Comb pubic hair in a downward motion so that any loose hair/debris falls into bindle Refold bindle and place comb and bindle in corresponding envelope If no pubic hair present, document "patient groomed" and skip step
Penile specimens	Oral, anal, digital or other contact	Sterile swabs Sterile water	 Moisten 2 swabs with sterile water Swab shaft of penis and foreskin if present Moisten 2 more swabs with sterile water Swab glans (head of penis) Do not swab urethra Air dry swabs Place in corresponding envelope
Vaginal/cervical specimens	Penile, digital, oral or other penetration with or without ejaculation; genital-to-genital contact	Sterile swabs	 Conduct external assessment for injury and swab external genitalia first if needed Place speculum; do not use lubrication per the request of the Illinois State Police Forensic Lab DO NOT PLACE SPECULUM IN A PRE-

			 PUBSCENT GIRL 4. Using 2 dry swabs, swab posterior fornix of the high vaginal vault (area directly under the cervix) 5. Using 2 dry swabs, one at a time, swab the face of the cervix
			6. Air dry swabs
			 Place in corresponding envelope
Anal specimens	Penile, digital, oral or other	Sterile swabs	1. Moisten 2 swabs with
	penetration or contact with or	Sterile water	sterile water
	without ejaculation		2. Gently place inside anus so that entire cotton tip is
			within 3. Move in circular motion and
			withdraw 4. Then repeat with 2 more
			moisten swabs
			5. Air dry swabs
			6. Place in corresponding envelope
Blood on filter paper	Reference specimen to obtain patient DNA	Filter paper Lancet	 Write patient's name and date on filter paper; can also use a patient label Only touch bottom of filter
			paper with newly gloved hands
			 Don't allow to lay on the counter; place on a clean paper towel or the
			 envelope 4. Finger stick patient with lancet; can use blood obtained for medical
			5. Fill 5 circles with drops of
			6. Allow filter paper to air dry
			 7. Place in corresponding envelope
Urine specimen	Possible drug facilitated sexual assault (DFSA) based on signs	Urine specimen cup	1. Collect earliest urine specimen possible
	and symptoms of patient		2. Advise the patient to
			urinate directly into cup 3. Do not place inside the ISPECK kit
 Date and initial the Place in the approp Label ISPECK kit w Maintain chain-of-co 	e evidence specimens/envelopes inside red evidence tape provided in the ISPE riate space to seal ISPECK kit rith requested information ustody until hand off to law enforcement outside of the ISPECK kit	CK kit	r storage; document when either action

***Patient can decline the release of evidence to law enforcement; the hospital is responsible for storing the evidence in a secure location for up to 14 days.