CAMDEN COUNTY
PROSECUTOR’S SEXUAL
ASSAULT NURSE EXAMINER
PROGRAM

Camden County Office of the Prosecutor
Office of the Prosecutor
Camden, New Jersey  08101
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INTRODUCTION

- The numbers of women and children victimized both by known and unknown assailants is steadily increasing in the US.
- In this country there is one sexual assault on average every two minutes.
- Many victims choose not to report assault.
FACTS ABOUT SEXUAL ASSAULT

- Sexual Assault is a violent crime
- It is a crime of power and control which sex is used as a weapon to punish the victim

- Sexual assault is vaginal, oral or anal sex without the victims consent or with a victim who is unable to consent
FACTS

- Penetration can be by the assailant’s penis, finger or by any object
- One in three girls and one in five boys will be sexually assaulted before age 18
- *84% of sexual assaults are perpetrated by someone the victim knows
- A rape occurs on the average every other day in Camden County
FACTS

- Only 27% of the women whose sexual assault met the legal definition, thought of themselves as victims.
- NO MEANS NO!
- DOESN’T MATTER IF SHE DIDN’T RESIST OR FIGHT BACK.

- Victims can be:
  - Female
  - Male

- Age:
  - Infants to elderly
WHY VICTIMS DON’T REPORT

Embarrassment
- Lack of faith in the follow up and treatment in the health care system
- Fear they will not be believed
- Lack of confidence in the criminal system
- May feel guilty or responsible for being victimized
WHY VICTIMS DON’T REPORT

- Many who have been victimized have been treated with skepticism
- Their actions may have involved risky or illegal behavior
- Some fear offender retaliation
CAMDEN COUNTY PROGRAM

- Cooper Medical Center
- Kennedy Health Systems Stratford September 2001
- Our Lady of Lourdes Medical Center December 2002
- Virtua Hospital Voorhees-2012
CAMDEN COUNTY SART

SEXUAL ASSAULT RESPONSE TEAM = SART Team consists of the following:

- SEXUAL ASSAULT NURSE EXAMINER
- RAPE CARE ADVOCATE
  - SERV = SERVICES EMPOWERING THE RIGHTS OF VICTIMS
    - Serving Camden and Gloucester Counties
    - Do not respond with victims under the age of 13.
- POLICE DEPARTMENTS
SEXUAL ASSAULT NURSE EXAMINER

- Professional Nurses
- Formal training Program
- Trained in Forensic photography, colposcopy and genital injury assessments.
- Advanced certification required by the NJ State Board of Nursing
- Every County in NJ must have SANE Program according to the State Attorney General Standards
ADVANTAGES

- **EMERGENCY DEPARTMENTS**
  - Prevents long delays in busy ED’s
  - Frees up physicians and nurses
  - SANE Maintains competence in forensic evidence collection

- **Prosecutor’s Office**
  - SANE functions as fact or expert witness
  - SANE can provide useful information
    - Colposcope photographs
    - Increased documentation of injuries
CURRENT PROGRAMS HAVE SHOWN

- Increase in reported sexual assaults
- Increase in guilty pleas
- Increase in guilty convictions
RAPE CARE ADVOCATE

TRAINED TO ASSIST WITH:

- Escort victim to the hospital
- Support victim through evidentiary exam
- Provide crisis intervention and short term counseling
- Provide information and referrals

SERVICES
EMPOWERING THE RIGHTS OF VICTIMS:

SERVING CAMDEN AND GLOUCESTER COUNTIES
ROLE OF POLICE OFFICER

- Team interview
- Conduct criminal investigation
- Apprehend Assailant
- Provide safety to the victim
Purpose of Team Interview

- **Victim Centered Approach**
  - Minimize number of times victim must report details of the incident
  - Details can be traumatizing and embarrassing
EVIDENTIARY EXAM
CRITERIA

- Victim is 13 years old, under age of 13 done on a case by case basis by a pediatric trained SANE
- Assault window should be within 5 days of assault-in certain situations may be extended to 14 day
- The victim consents to the evidentiary exam
CHILDREN 12 years and younger can be seen for SANE eval at NJ CARES during normal business hours

Contact Child Abuse Unit Investigator who will contact SART/SANE Coordinator for consultation
CONSENT ISSUES

- All patients 13 and above must consent to this exam. It is not the parents or police say so.
- Victims who are unable to consent due to trauma, temporary mental condition or developmental delay, must have next of kin or court order to perform exam.
HOW SART IS ACTIVATED

- Victim arrives in the Emergency Department
- Police escorts victim to Emergency Department
- Victim is referred to the Emergency Department from Rape Crisis Hot Line
- Victim is picked up at the scene by EMS.
- Triage Nurse pages
- On call SANE and SERV advocate
- Police with consent of victim
First Responders: Police, EMS, Emergency Dept.

- Clothing should not be removed unless specifically requested by for medical management.
- If clothing must be removed bring in the sheet from stretcher. Place any clothing removed and white sheet in individual (paper, if available) bags and set aside for SANE.
- Give Victim information and options so they can make informed decisions.
- Options What medical facility they want to go to. Victim has the right to go to anyone of the 4 participating hospitals in the county.
First Responders

- Believe them: watch your words, facial expressions or body language

- When in doubt call PD to report like you would normally do. Victim can change mind later and stop all police involvement

- Please limit victim’s story to just getting the basic facts.
Triage

- Ask patient to refrain from:
  - EATING
  - DRINKING
  - SMOKING
  - CHEWING GUM
  - WASHING IN ANY WAY
  - VOIDING

- all emergent medical care supersedes SANE exam.
Medical Screening

- ALL VICTIMS MUST RECEIVE A MEDICAL SCREENING PRIOR TO BEING SEEN BY THE SANE

- Police may be at the hospital during the medical screening which will delay SANE being called
Criteria for Adult SANE Exam

- **Victim must be age 13 years or older** (12 years and younger see pediatric SANE activation)

  AND

- **Incident occurred within the past 5 days**, 

  AND

- Victim consents to SART activation and evidence collection. Victim **can not be under the influence of drugs or alcohol**. Victim needs medical clearance
Conducted in a private room
Conducted prior to evidentiary exam
*Interview conducted in the presence of SANE and SERV advocate and Law Enforcement if victim consents*

*Law Enforcement may tape interview eliminating victim returning for tape statement at later time.*
Interview

- Forensic interview determines the type of exam

- Detailed information is elicited from victim about the type of assault.

- DFSA 48 hours to collect blood and up to five days for urine.
FORENSIC EVIDENCE

- Victim acts as crime scene
- Evidence is transferred from the doer to the victim
- Collection of evidence is guided by the interview whenever possible
- Physical evidence which can scientifically be matched with a known individual or item.
Patient’s Activities Since Assault

- Urinated, Defecated
- Ate, Drank
- Vomited
- Bathed, Showered, Douched
- Brushed Teeth/Gargled
- Changed Clothes
- Had any consensual sex within last 5 days and if so was a condom used.
FORENSIC EVIDENCE

- EVIDENCE INCLUDES:
- HEAD TO TOE EXAMINATION:
  - Fingerprints
  - Footprints
  - Body fluids
  - Hair and fibers
  - Collect as evidence and bagged up clothing that is relevant to assault.
  - Blood and Urine if possible Drug Facilitated Sexual Assault
DNA

- CAN BE FOUND
  - Blood stains
  - Flesh
  - Seminal fluid
  - Saliva
  - Hair
  - Perspiration stains

- NO TWO PEOPLE HAVE THE SAME DNA EXCEPT IDENTICAL TWINS
Documentation Tools

- Colposcope-instrument used to magnify the perineum and vagina.
- Description of injury and documentation on body diagram.
- Forensic Photography
- Use of measure in documentation.
- Use of woods lamp (alternate light source) as documentation tool.
Head to Toe Assessment

- Hair combing
- Oral assault? Swab mouth, look for bruising inside of lips, chipped teeth, dental floss the teeth
- Fingernail swabs
- Evidence of bite or suck marks.
- Debris
Forensic Examination and Evidence Collection:

Equipment and Procedures
Forensic Equipment

- Equipment is kept locked and secured
- Colposcope
- Digital Camera
- Alternate Light Source
- Swab Dryer
- Evidence Collection Kits
- Misc. supplies
- **GLOVES** – worn and changed frequently throughout exam
Room Set-Up
Forensic Equipment
Sexual Assault Forensic Evidence Collection Kit – “SAFE” Kit
Injuries and Findings

- Document cuts, lacerations, bruises, abrasions, redness, swelling, bites, burns, scars, stains and foreign material.
- Record size, color and appearance of all injuries.
- Photograph with and without ruler.
BITE MARKS
Alternate Light Source (ALS)
Aids in visualizing dried secretions.
Positive ALS Findings:
Inspect Lips, Teeth, Gums and Mouth for Injuries
Forensic Pelvic Inspection

- Designed to detect trauma.
- Must differentiate between disease and trauma.
- Only 20-32% of sexual assault victims have evidence of genital trauma.
- Current research underway looking at injury from sexual assault at University of Penn. Dr Lynn Sommers studying elasticity of skin, race and ages of participant, pre and post consensual sex
For Female Victims: Pubic Hair Combing, External Genital Specimen, Anal, Rectal, Vaginal and Cervical Specimens/speculum used only on post-pubertal females
For Male Victims:
Pubic Hair Combing, External Genital Specimen, Anal and Rectal Specimens
HYMEN
MYTHS AND TRUTHS

- SANES do not perform **VIRGIN** checks.
- A hymen is a fold of tissue in the lower entrance to the vagina, that comes in different shapes and changes with puberty, becomes more elastic after puberty.
- Hymenal injury in prepubertal and adolescent girls tend to heal rapidly often leaving no evidence of trauma.
- Hymenal measurements are rarely used as a diagnostic tool.
Buccal Swabs for DNA Control
Buccal Control Swabs

- Done to collect Victim’s DNA reference sample
- Inside of cheek (Buccal area) swabbed to collect skin cells
- Victim rinses mouth before swabbing

✓ Blood sample from victim not needed
Drug-Facilitated Sexual Assault

- "Red flags" for DFSA
  - Loss of time
  - Loss of memory, flashes of memory
  - Level of intoxication greater than expected for amount of alcohol/drugs ingested

- Must be physical signs, other indications, or strong suspicion that sexual assault/contact occurred
Time Frame for DFSA Testing

- If < 48 hours since possible ingestion, collect both:
  - **Blood** – 30 ml in Gray Top Tubes
  - **Urine** – 60 to 100 ml
Evidence Must Be Thoroughly Dried

- Swab Dryer speeds drying
- Simply blows air – not heated or cooled
- **Do not refrigerate “SAFE” Kit:**
  - Evidence is dry
  - Refrigeration causes condensation (moisture)
Evidence must be properly labeled, packaged and sealed – SANE cannot leave evidence unattended
Custody of SAFE Kit/Evidence

- Done according to County procedure

- If Victim *Reporting* to police at time of exam:
  - SAFE kit/evidence given directly to law enforcement at time of exam. The kit MUST be picked up by police after the exam.

- If Victim *Not Reporting* at time of exam:
  - Outside of Kit labeled “Jane (or John) Doe”
  - Kit/evidence handled according to county procedures for storing evidence for mandatory “5 year” hold
After the Exam

- Pregnancy prophylaxis
- STD prophylaxis
- Replacement clothing, if needed
- Discharge instructions/Information:

- The Forensic Medical Examination Kit **MUST** be picked up from the SANE after the exam in complete.
Once evidence is turned over to police

- If assault was committed in NJ it will be turned over to the State Police Crime Lab in Hamilton Twp. N.J.

- If assault was committed outside of NJ it will be sent via FedEx to the police dept. who is investigating the crime.
For more information on the SAFE kit and the evidence collection process, please contact:

- Camden County Prosecutor’s Office SANE Program at: 856-365-3111

Some Photos taken from:
- “Quick Reference Sexual Assault” by Giardino, Datner, Asher, Girardin, Faugno, and Spencer.
- “Color Atlas of Sexual Assault” by Girardin, Faugno, Seneski, Slaughter, and Whelan.
Thank you!