

ANNEX 8 WHO SEXUAL VIOLENCE DOCUMENTATION FORM

World Health Organization SEXUAL VIOLENCE EXAMINATION RECORD

PATIENT DETAILS

FAMILY NAME		
GIVEN NAME(S)		
DATE OF BIRTH	AGE (in years)	SEX
ADDRESS (or other identification)		

EXAMINATION

DATE	TIME
PLACE	
HEALTH WORKER'S NAME (or identification details)	
OTHER PERSONS PRESENT DURING CONSULTATION (and relationship to patient)	

REPORT

DATE SENT

SENT TO

¹ This record should be used in conjunction with the WHO *Guidelines for Medico-legal Care for Victims of Sexual Violence*, which contain much of the background information about the conduct of the examination.

Notes on completing the Consent Form

Consent for an examination is a central issue in medico-legal practice. Consent is often called “Informed consent” because it is expected that the patient (or his/her parent(s) or guardian) will be “informed” of all the relevant issues to help the patient make a decision about what is best for him/her at the time.

The patient needs to understand:

- » What the history-taking process will involve.
- » The type of questions that will be asked and the reason those questions will be asked.

For example:

“I will need to ask you for details of the assault. I will need to know where your attacker’s body touched yours so I will know where to look on your body for signs of injury or for traces of evidence from your attacker.”

- » That the examination will be done in circumstances of privacy and dignity. The patient will lie on an examination couch and an extensive examination will be required.
- » That a genito-anal examination will require the patient to lie in a position where this area can be adequately seen with the correct lighting.

For example:

“I will ask you to lie on your back on the examination couch with a sheet draped over your knees. I will ask you to draw your knees up, keep your ankles together and flop your legs apart so that I can look carefully at your pelvic area with the help of this light.”

- » That the genito-anal area will be touched by the examiner’s gloved hands to allow internal structures to be better seen. A device designed for looking inside the vagina or the female birth canal, called a speculum, may be used. A device for looking inside the anus, an anoscope, may be used.
- » That specimen collection involves touching the body and body openings with swabs and collecting body materials such as head hair, pubic hair, genital secretions, blood, urine and saliva. Clothing may be collected. Not all of the results of the forensic analysis may be made available to the patient.

It is crucial to inform the patient that the information told to the health worker and found on examination will be conveyed to investigators for use in the pursuit of criminal justice if the patient decides to pursue legal action or in jurisdictions with mandatory reporting requirements. This means that anything told to the health worker may not be kept private between patient and health worker, but may be discussed in an open court at some time in the future.

The patient should also be given an explanation as to how photographs may be used. Photography is useful for court purposes and should NOT include images of genital areas.

All of the above information should be provided in a language that is readily understood by the patient or his/her parent/guardian.



CONSENT FOR A MEDICAL CONSULTATION¹

..... (*insert health worker's name*) has explained to me the procedures of examination, evidence collection and release of findings to police and/or the courts.

I (*insert patient's name*) agree to the following:

(Mark each n that applies)

Examination, including examination of the genitalia and anus.

Collection of specimens for medical investigations to diagnose any medical problems. Collection of specimens for criminal investigation.

Photography.

Providing a verbal and or written report to police or other investigators. Treatment of any identified medical conditions.

Patient's (or parent's or guardian's) signature or mark

Witness' signature

Date

¹ In cases involving children, a parent or guardian can sign on behalf of the child. Similarly, if an adult is not competent to provide consent, the next of kin or guardian should sign on his/her behalf.

MEDICAL HISTORY

1. RELEVANT MEDICAL/SURGICAL/PSYCHIATRIC HISTORY

For children include:

- relevant antenatal/postnatal and developmental history;
- history of behavioural problems (if considered relevant to allegations);
- family history.

2. RELEVANT GYNAECOLOGICAL HISTORY

First day of last normal menstrual period (DD/MM/YY):

Average number of days between menstrual periods:

Age at menarche (for children):

Was patient menstruating at the time of the assault?	Yes	No	Not applicable
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Is the patient currently pregnant?	Yes	No	Not applicable
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Pregnancy history:

Methods of contraception currently in use:

History of genital trauma, surgery or bleeding:

3. ALLERGIES

4. MEDICATIONS/IMMUNIZATION STATUS (e.g. hepatitis B, tetanus)

HISTORY OF OFFENCE

5. DETAILS FROM OTHER PARTIES (e.g. police, family, witnesses)

Details provided by (name):

6. DETAILS FROM PATIENT

Date(s) of assault (or period over which assaults occurred, number of assaults and date of last assault):

Time: Location:

Assailant(s) (number and relationship to patient, if any): Alcohol consumed:

Drugs consumed:

Weapons used, threats made:

Relevant details of assault:

7. CURRENT SYMPTOMS

SUMMARY OF SEXUAL ASSAULT

VAGINAL PENETRATION	Assailant 1	Assailant 2	Assailant 3	Assailant 4	Assailant 5
Attempted/completed?					
Ejaculated Yes/No?					
ANAL PENETRATION	Assailant 1	Assailant 2	Assailant 3	Assailant 4	Assailant 5
Attempted/completed?					
Ejaculated Yes/No?					

ORAL PENETRATION	Assailant 1	Assailant 2	Assailant 3	Assailant 4	Assailant 5
Attempted/completed?					
Ejaculated Yes/No?					

	Assailant 1	Assailant 2	Assailant 3	Assailant 4	Assailant 5
EJACULATED ON BODY If 'Yes' list site					
SALIVA ON BODY If 'Yes' list site					
CONDOM USED (Yes/No/?)					
LUBRICANT USED (Yes/No/?)					

OBJECTS ¹ USED FOR PENETRATION	Assailant 1	Assailant 2	Assailant 3	Assailant 4	Assailant 5
VAGINA					
ANUS					
MOUTH					

¹ Include body parts (e.g. digits).

8. POST ASSAULT

Detail clothing worn at time of assault:

Changed clothes	Yes	No
Cleaned clothes	Yes	No
Bathed/showered	Yes	No
Had sexual intercourse	Yes	No

EXAMINATION

10. PERSONS PRESENT

Name(s):

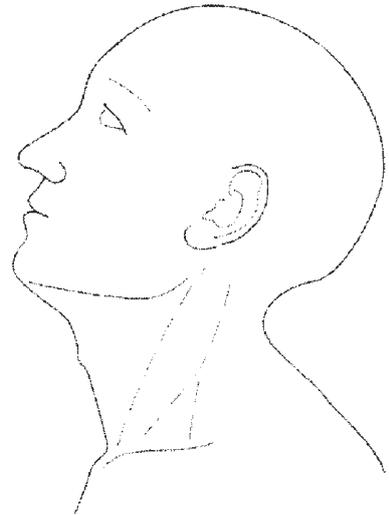
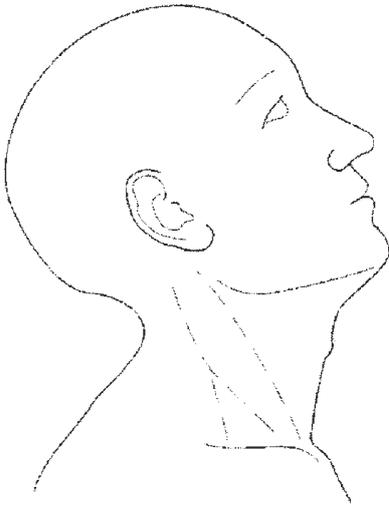
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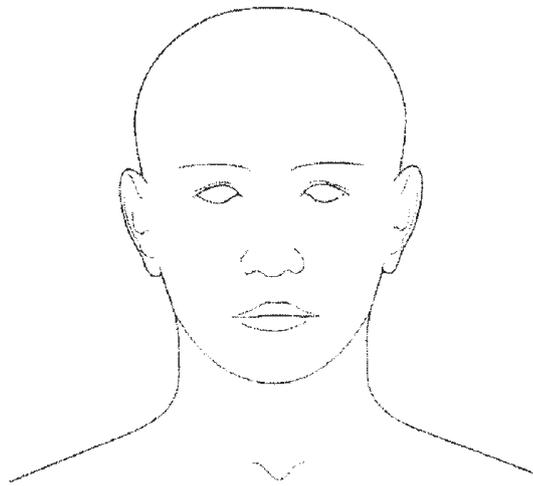
.....

11. INITIAL APPEARANCE (e. g. intellect, physical, sexual development, clothing, emotional state, effects of alcohol/drugs)

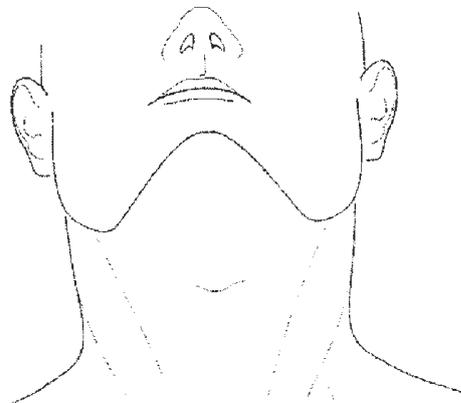
12. FINDINGS (place notes here; use body charts for diagrams)

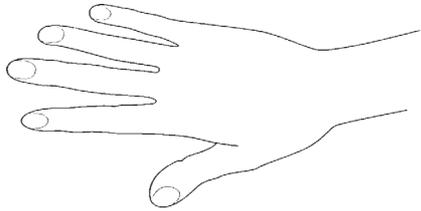


Right

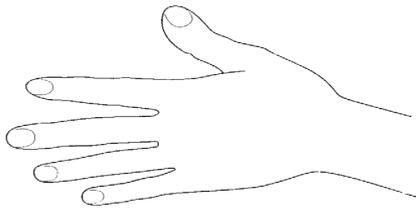


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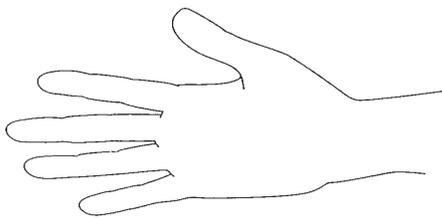




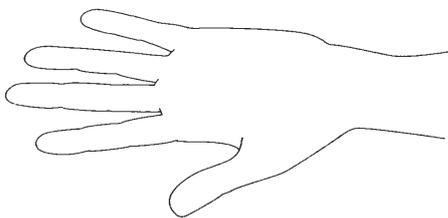
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L



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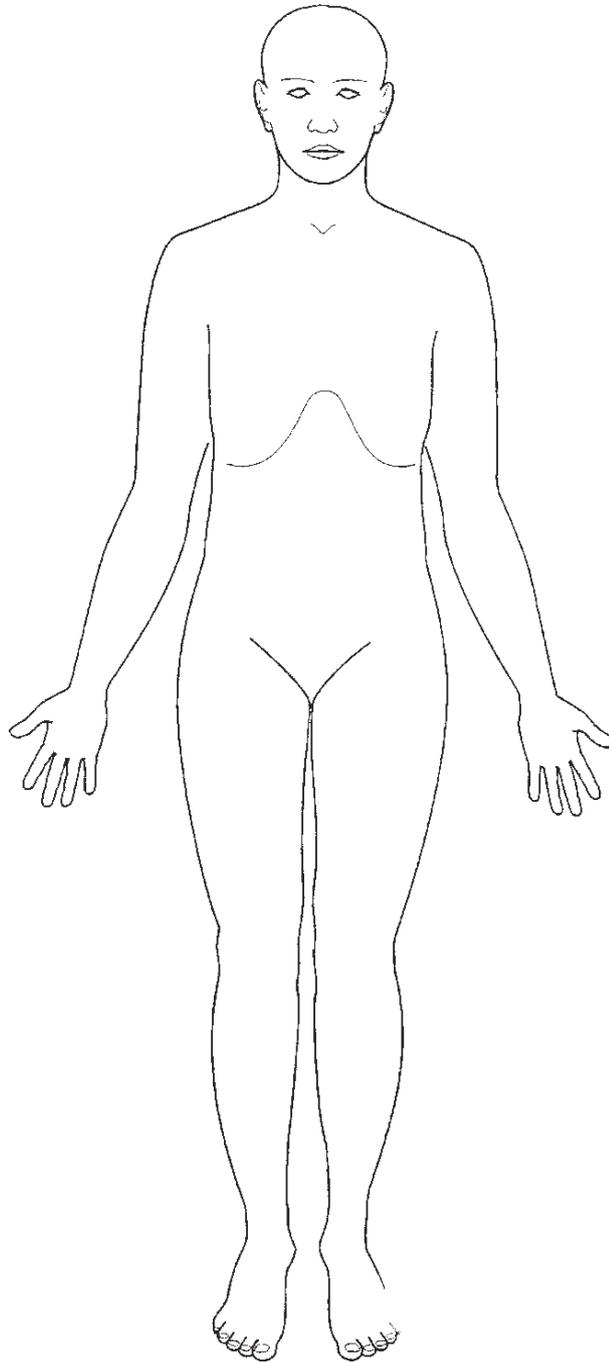


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Right

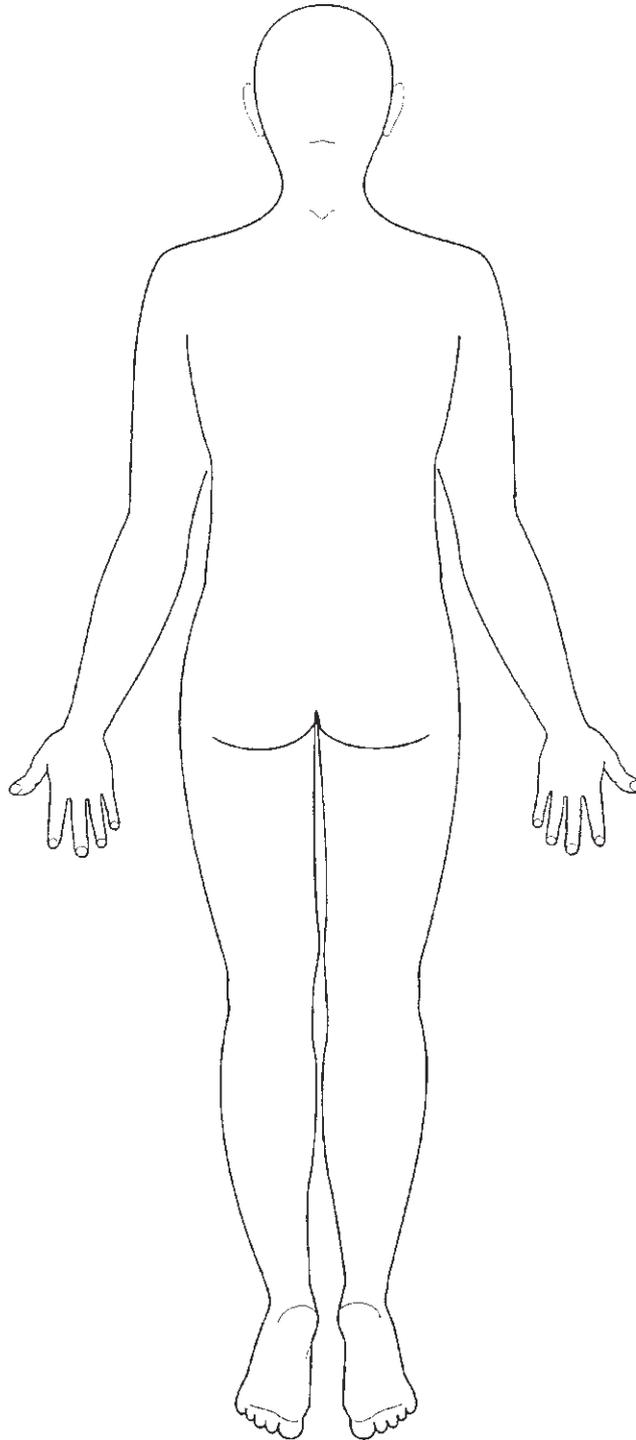
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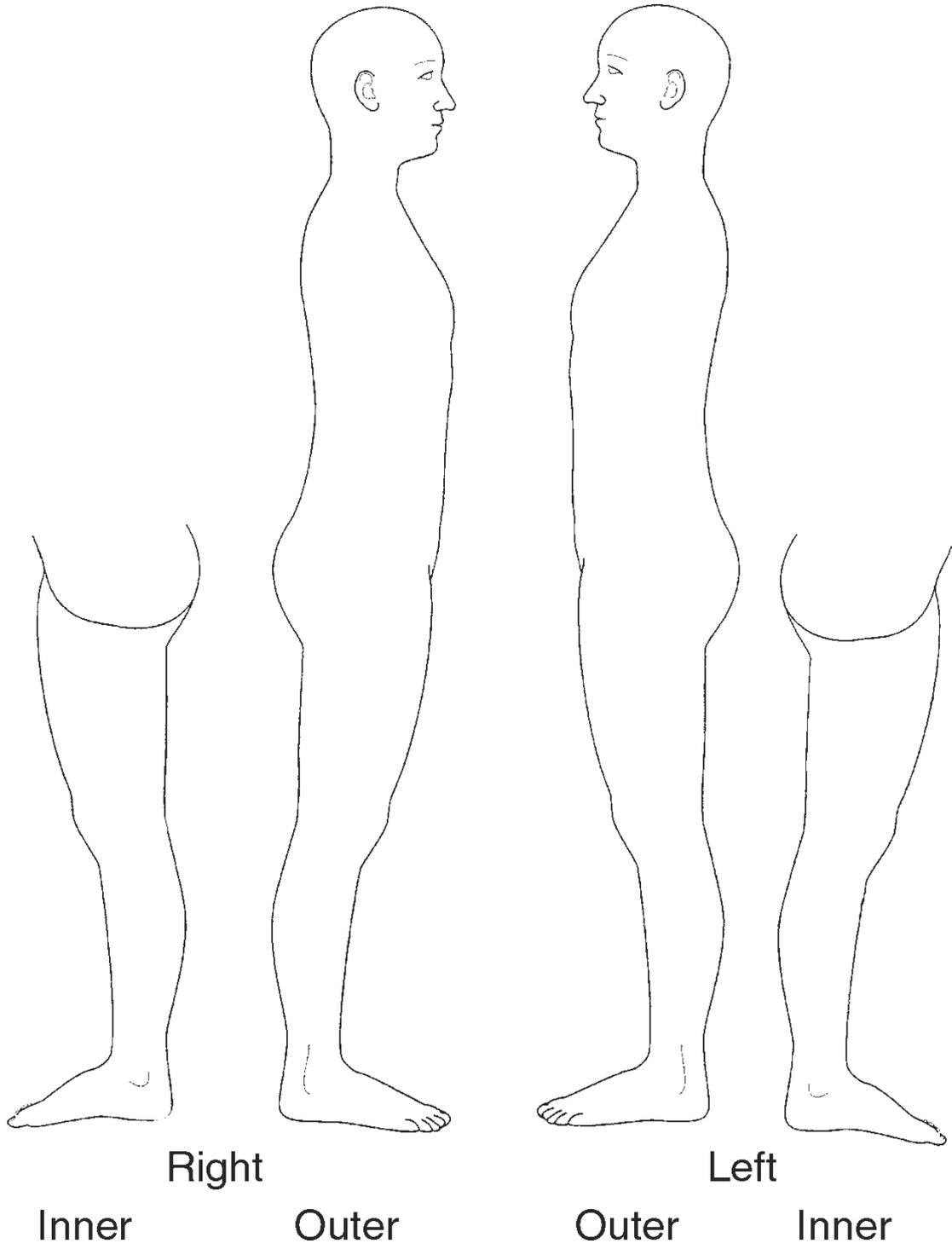


Draw in outline of breasts as required.

Left

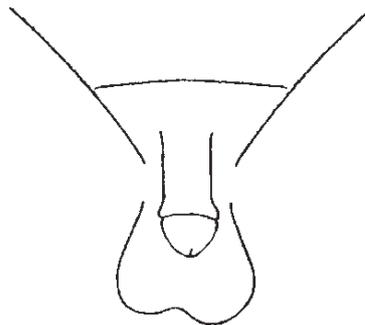
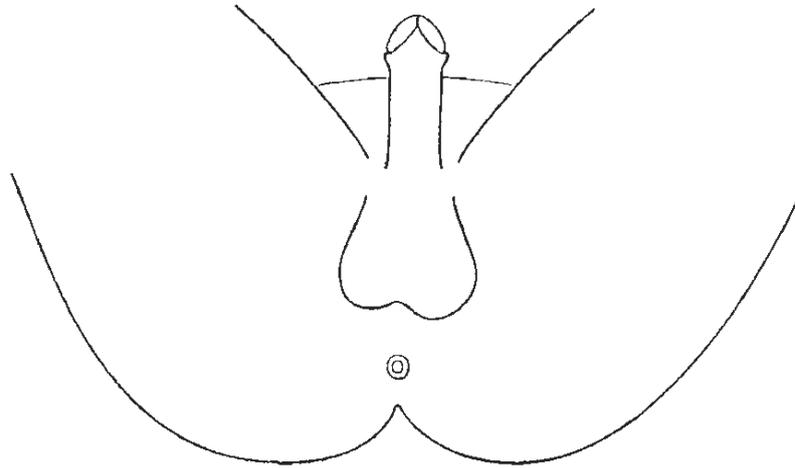
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Right

Left

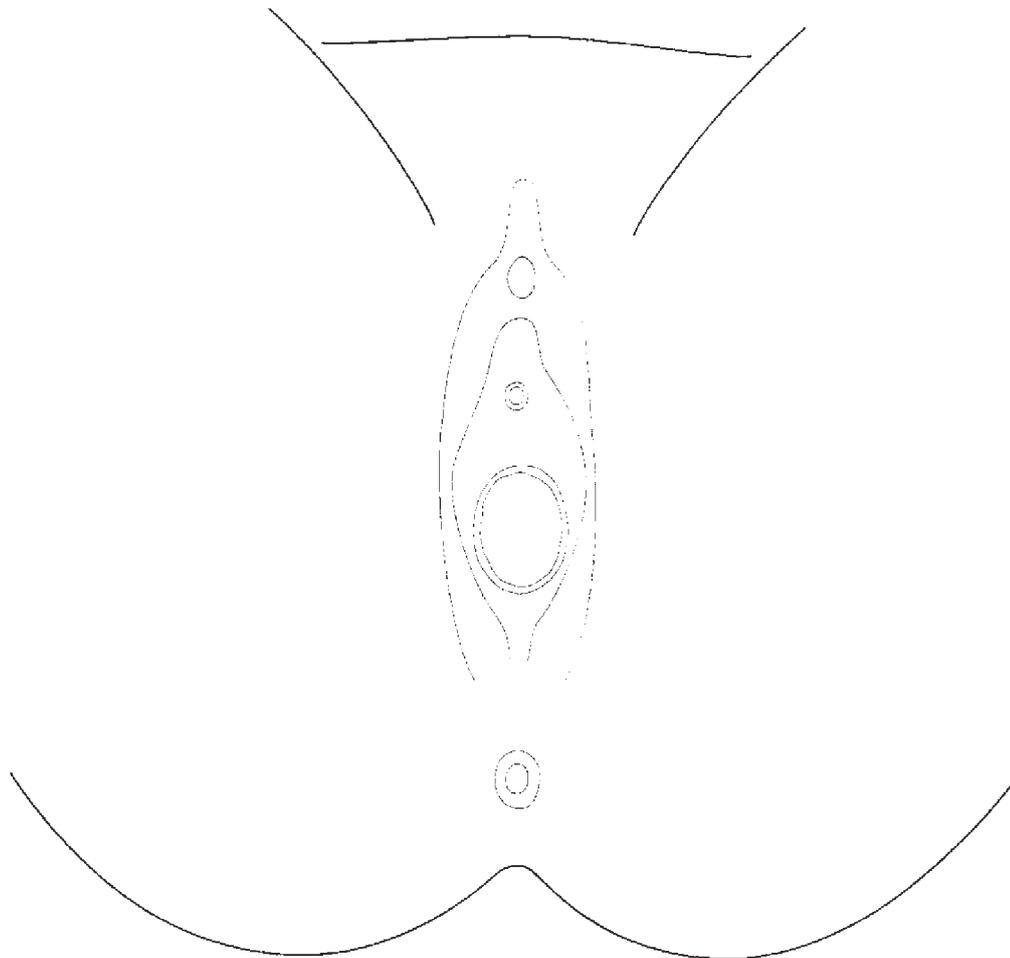


Proctoscopy conducted
Findings:

YES NO

Right

Left



Speculum examination conducted YES NO

Proctoscopy conducted YES NO

Findings:

OTHER DETAILS

13. PHOTOGRAPHY

No Yes

By whom?

Date and time:

14. MEDICATION PROVIDED

Emergency contraception	No	Yes	Details:
STI prophylaxis	No	Yes	Details:
HIV prophylaxis	No	Yes	Details:
Other	No	Yes	Details:

15. HOSPITAL PATHOLOGY

No Yes

Details:

16. FOLLOW-UP ARRANGEMENTS (e.g. medical, counselling)

17. CONTACT MADE WITH OTHER HEALTHWORKERS

Letter Yes No

Telephone call Yes No

Details:

COLLECTION OF FORENSIC SPECIMENS

Informed consent specifically for specimen collection should be obtained, and documented.

Explain that the specimens may be used for the criminal justice process should a legal action go ahead. If a report of the assault has not been made (i.e. to the police) there may still be some benefit in collecting the specimens (and holding them for a time). This should be explained to the patient.

Some results of the tests may not be available to the patient (unlike diagnostic tests done by medical practitioners).

Consult with your local laboratory regarding appropriate types and handling of specimens. For example, do not collect DNA evidentiary material if your laboratory does not perform this test.

Once collected, the specimens should not be out of the doctor's sight until handed to the police. This process is called "continuity of evidence" and is designed to avoid allegations of specimen tampering. Record the name of the police officer to whom the specimens are handed, and the date and time of transfer, on the second to last page of this proforma (page 21).

INSTRUCTIONS TO THE PATIENT

If the patient alleges oral penetration with possible ejaculation in the mouth, drinking and toothbrushing should be postponed until oral forensic specimens are collected. If the patient is thirsty, the oral specimen can be collected prior to history taking and examination (see below).

Use words like "gather" and "collect", as opposed to "take" and "scrape". A calm demeanor is helpful.

GENERAL PRECAUTIONS

Wear gloves for examination and specimen collection.

All forensic swabs are dry to begin with and should be dry to end with!

Recap dried swabs and seal with a patient label, if available.

In order to find spermatozoa, the laboratory will need a slide and a swab.

The slide is used to look for sperm (the adjacent diagram shows how to plate the specimen).

The sperm are then extracted from the swab for DNA typing.

Specimens should be sealed into a bio-hazard bag.



SAMPLE LABEL	
Name of patient	Ada Wells
Date & time of collection	01.10.02 0400 hrs
Specific type of specimen	Endocervical swab
Name of doctor	Dr A Welborn

Every specimen should be labelled with identifying data (see example).

ORDER OF COLLECTION

Clothing

Trace evidence from the patient's clothes will not be lost if the patient is instructed to undress over a large sheet of paper (drop sheet). One way of doing this is to ask the patient to stand on a sheet of paper, behind a screen and hand out the items of clothing one by one, to be placed in individual paper bags. Note which items of clothing have been collected. Check with the police which items of clothing are required.

Drop sheet

The drop sheet could have evidence from the offender such as pubic hairs, head hairs and clothing fibres.

The drop sheet could have evidence from the scene such as sand, fibres or vegetation.

The drop sheet is folded in such a way so as to retain any evidence, placed in a paper bag and sealed with a patient label.

Sanitary pad/tampon

These items should be dried and sealed in a double paper bag.

Fingernail scrapings

An allegation of the victim scratching the assailant may leave foreign DNA or fibres under the patient's fingernails. A wooden swab stick may be broken in half, one used for each hand, and the remnants placed in a sterile urine jar. Alternatively, the fingernail(s) can be cut and the clippings placed in the container.

Head hair for comparison purposes

Twenty representative hairs should be cut from over the head, placed on a piece of paper, folded as the drop sheet, sealed and bagged.

Oral swab

Spermatozoa in the mouth collect in the same places as saliva. The best reservoirs are therefore the gingival margins of the lower teeth and under the tongue. This swab should be done if there is allegation of oral penetration within the last 12–24 hours. Alternatively, have the patient his/her mouth with 20–30 ml of sterile water and collect the rinsings in a sterile container.

Saliva on skin

Assailant DNA can be recovered. The double swab technique involves (a) swabbing the affected area with a swab moistened with tap water, followed by (b) swabbing with a dry swab. Both swabs should be air dried and submitted.

Semen on skin

The double swab technique can be also be used for skin where dried semen may be present. Both the first moist swab and the second dry swab should have slides made from them. Use this technique wherever ejaculation may have occurred, including the vulva and anus.

Pubic hair combing

Performed infrequently and only if foreign hair is noted on examination. Submit comb and products. Collect foreign materials with a swab stick and submit in a sterile container.

Vaginal swab

A swab taken with or without the use of a speculum, depending on patient/doctor preference.

Endocervical swab

Can be collected with the use of a speculum for direct visualization of the cervix. Use warm water to lubricate the speculum.

Anal and rectal swab

An anoscope may be used, or the anus can be swabbed under direct vision.

Victim / Assailant DNA for comparison

If there is no allegation of oral penetration, a buccal swab may be taken. Otherwise, blood will provide DNA (see below).

Blood for DNA

Should be collected into an appropriate tube.

Blood for drugs

Use a plain tube.

Urine for drugs

Instruct the patient to provide a full sterile container of urine.

SAMPLES

FORENSIC SAMPLES

Health Worker's Copy

Clothing(bags)
 Drop sheet
 Sanitary pad/tampon

BODY EVIDENCE

Oral swab and slide
 Foreign material on body
 Semen-like stains on body
 Semen-like material on head hair
 Semen-like material on pubic hair
 Combing of pubic hair
 Fingernail evidence
 Body swab (for saliva) (note site)
 Other (specify)

GENITO-ANAL EVIDENCE

Foreign material
 High vaginal swab and slide
 Endocervical swab and slide
 Anal swab and slide
 Rectal swab and slide
 Other (specify)

COMPARISON SAMPLES

Pubic hair
 Head hair
 Buccal swab for DNA
 Blood for alcohol and drugs (plain tube or fluoride/oxalate vial)
 Urine for drugs

OTHER

Other samples (list)

TOTAL NO. OF SEALED BAGS

The samples listed were handed to:

Name: Rank/number:
 Station/squad:
 Date and time:
 Signed:

FORENSIC SAMPLES

Laboratory Copy¹

Date and time collected:hours on / /

SAMPLES

- Clothing(bags)
- Drop sheet.....
- Sanitary pad/tampon

BODY EVIDENCE

- Oral swab and slide
- Foreign material on body
- Semen-like stains on body
- Semen-like material on head hair
- Semen-like material on pubic hair
- Combings of pubic hair
- Fingernail evidence
- Body swab (for saliva) (note site)
- Other (specify)

GENITO-ANAL EVIDENCE

- Foreign material
- High vaginal swab and slide
- Endocervical swab and slide
- Anal swab and slide
- Rectal swab and slide
- Other (specify)

COMPARISON SAMPLES

- Pubic hair
- Head hair
- Buccal swab for DNA
- Blood for alcohol and drugs (plain tube or fluoride/oxalate vial)
- Urine for drugs

OTHER

- Other samples (list)
-
-

HEALTH WORKER'S NAME:

¹ This copy to be enclosed with specimens. These should be taken to the laboratory.