

**STATE OF CONNECTICUT
CT100
SEXUAL ASSAULT EVIDENCE COLLECTION KIT**

To Examining Physician/Nurse/SAFE/SANE:

1. This kit contains materials for collecting sexual assault evidence. There are thirteen (13) separate steps which should, whenever medically appropriate, be completed before a comprehensive medical examination.
2. Directions for each step are printed on the appropriate envelope.
3. Non-lubricated gloves should be worn at all times during evidence collection procedures.
4. Mark each evidence container (e.g., kit or clothing bag(s)) in spaces provided as “1 of 2” or “2 of 2” etc.
5. Initial all seals on this kit and any bags.
6. If patient is undecided about reporting to police, list “Control Number” instead of Patient’s Name, and omit Med. Rec. No. (See enclosed Discharge instructions form for control number directions.)

Special Instructions - CT100 Kit

- Be sure all specimens are thoroughly air-dried. Do not attempt to air-dry “moist specimen” samples (Step 13). Never touch a specimen to determine dryness. Dryness can best be determined by close visual examination of the specimen.
- Place all swabs in swab boxes or packets, as indicated, prior to returning them to the appropriate step envelopes. Return slide container to the appropriate step envelope.
- Complete the identification section on all specimen envelopes and the Step 13 plastic bag prior to returning them to the appropriate step envelopes. Identification information on step envelopes should be completed even if a control number will be used on the Kit and clothing bag identification labels because the patient does not want police notified at the time of the examination.
- Provide all requested information on all step envelopes, including a brief explanation if no specimen was collected for that step.
- Never use saliva to seal specimen or step envelopes. Use a moistened cotton ball, swab, gauze pad or paper towel to moisten glue area.
- Return all sealed step envelopes (except Step 1 clothing bags) to the Kit box. Place step envelopes carefully to avoid crushing specimens or breaking glass blood vacutainers.
- If all step envelopes do not fit in the Kit box, place remaining envelope(s) in a paper bag or large manila envelope. Seal and label this bag by hand with identification and chain of custody information. Be sure to indicate the total number of evidence containers as instructed.

Upon Completion Of Kit:

- Seal the yellow carbonless duplicate of Page 1 Medical Report (and copies of any supplemental pages) in the envelope on the bottom of the Kit box. DO NOT place this form on the inside of the CT 100 box.
- Place cover on filled Kit box, after ensuring that all step and specimen envelopes have been placed inside, except as noted above.

- Secure evidence seals on the Kit box by placing one seal on each side of Kit box in the designated area. Initial each seal.
- Complete Kit cover identification and chain of custody information. (See Guidelines for instruction regarding the use of a Control Number in place of patient's name.)
- If a moist specimen was collected in Step 13, place the yellow "MOIST SPECIMEN" sticker on the upper left corner of the Kit cover.
- Place the orange "BIOHAZARD" sticker on the upper left corner of the Kit cover.
- If evidence must be temporarily stored prior to transfer to police custody, follow detailed storage instructions provided in the Guidelines.

**MEDICAL PERSONNEL
PLEASE PRINT**

PATIENT'S NAME: _____

MED. REC. NO./CONTROL NO.: _____

EXAMINING PHYSICIAN/NURSE/SAFE/SANE: _____

ATTENDING NURSE: _____

HOSPITAL/CLINIC: _____

BAG SEALED BY: _____

***AFTER EVIDENCE COLLECTION PLACE SEALED CLOTHING BAG(S) IN
SECURE, DRY STORAGE AREA AND SEALED KIT IN SECURE,
REFRIGERATED STORAGE AREA.***

STORED BY: _____

DATE _____ TIME _____ AM/PM

**POLICE PERSONNEL
CHAIN OF POSSESSION**

RECEIVED FROM: _____

RECEIVED BY: _____

DATE _____ TIME _____ DEPT: _____

RECEIVED FROM: _____

RECEIVED BY: _____

DATE _____ TIME _____ DEPT: _____

RECEIVED FROM: _____

RECEIVED BY: _____

DATE _____ TIME _____ DEPT: _____

POLICE CASE NUMBER: _____

STEP 1 CLOTHING

- Air-dry all wet or damp clothing before packaging. Place a clean, dry paper over any visible stain(s) or moist areas to avoid cross-contamination.
 - If the patient has changed clothes since the time of the assault, collect only those items that are in direct contact with the patient's genital area.
 - Inform the officer in charge if the patient has changed clothes after assault so that the clothing worn during the assault may be collected.
 - *Do Not* cut through any existing rips, stains, or holes in clothing.
 - *Do Not* shake out clothing as trace evidence will be lost.
 - Leave any obvious debris intact on clothing item(s).
 - If additional bags are needed, do not use plastic bags.
 - Seal any additional bags with tape, label by hand with identification and chain of possession information, and mark as "3 of 3", etc.
 - *Do Not* remove materials observed on clothing. Package intact whenever possible.
1. Unfold and place a clean hospital sheet on floor. Remove and unfold enclosed paper sheet and place over hospital sheet. Have patient stand in center of paper sheet and carefully disrobe.
 2. Collect each item of clothing as removed. Place each small item in a separate small OUTER CLOTHING bag as available. Place all other items of outer clothing plus any large items in a large OUTER CLOTHING bag. Collect patient's underpants and place in UNDERPANTS bag.
 3. Refold paper sheet so as to retain any foreign material present, including any foreign material found on hospital sheet. Carefully place in large OUTER CLOTHING bag.
 4. Label each small bag as directed, close with staples or tape, and place inside large OUTER CLOTHING bag.
 5. Label large bag as directed. Double fold the opening and affix one evidence seal around each end of fold seam. Use evidence seals or tape to seal the fold seam. Initial seals.
 6. Complete identification and chain of possession label.
 7. Store sealed bag(s) in secure (limited access), dry storage area.

DATE/TIME _____

PATIENT _____

COLLECTED BY _____

Contents:

- One folded paper sheet.
- One large brown paper bag labeled "Step 1 Clothing". (Affixed to this bag is Identification label and one chain of custody label. (See Guidelines Section "Evidence Integrity.")
- Two medium sized white paper "specimen" bags labeled "Outer Clothing".
- One small white paper "specimen" bag labeled "Underpants".
- Additional "specimen" bags, as necessary. (Used from hospital stock.)

STEP 1 Continued

Special Instructions:

- Do not remove any debris from the victim's clothing unless there is a danger of loss or contamination of other items.
- Avoid placing more than one clothing item in each specimen bag. All white specimen bags should be sealed and placed inside the brown bag (which may contain a clothing item and the folded white paper sheet).
- If no additional paper bags are available, and/or clothing will not fit in the bags provided, securely wrap clothing in hospital paper, seal with tape, and label by hand with identification and chain of custody information.
- If the patient's clothing is collected, help the patient contact someone (a friend or family member) who can provide a change of clothes, or request that the sexual assault counselor arrange to bring clothing.
- Male Victims: Special care should be taken in packaging the male patient's underpants and pants because the patient may have experienced an ejaculation. To avoid cross-contamination with the offender's semen, clean pieces of paper should be inserted inside the garment and secured, if necessary, with pins, etc. This collection information should be recorded on the Step 1 identification label.

STEP 2 DEBRIS COLLECTION

1. Collect all obvious debris (e.g. soil, fibers, hair, grass, etc.) observed on patient's body during examination. Do not remove debris from the clothing.
2. Place all collected debris in this envelope.
3. Label and seal this envelope.
4. Indicate location and type of debris on diagram below.

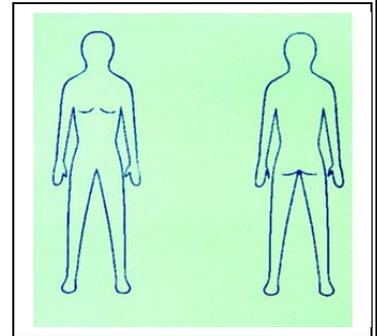
DATE _____ TIME _____ AM
PM

PATIENT _____

COLLECTED BY _____

WAS SAMPLE COLLECTED YES NO

IF NO, WHY NOT? _____



Contents

- One Step Envelope.

Special Instructions

- Step 2 may be completed prior to Step 1 in order to collect obvious debris specimens. However, obvious debris on patient's clothing should not be removed from the clothing.
- Collect any debris specimen observed on patient's body. Look carefully for hairs and smaller specimens.
- If a debris specimen is too large to collect in the envelope provided, place the specimen in a paper bag or securely wrap in hospital paper, seal to avoid loss of the evidence, and label by hand with identification and chain of custody information.

STEP 3 KNOWN BLOOD SAMPLE

1. Using the purple-top blood tube provided, withdraw sample of patient's blood allowing tube to fill to maximum volume. If patient is a child, tube may be filled to less than maximum volume or pediatric tube may be substituted from hospital stock.

2. Label tube appropriately. Place filled tube inside enclosed bubble pack bag. Seal bubble pack and place in this envelope.

3. Seal this envelope and return it to the kit box.

NOTE: If expiration date on blood tube has passed, replace from hospital stock.

NOTE: If toxicology tests are indicated, collect additional blood samples using the CT 400 Kit.

DATE _____ TIME _____ AM
PM

PATIENT _____

COLLECTED BY _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____

Contents

- One step envelope
- One plastic bubble pack
- One purple-top (EDTA) vacutainer blood tube

Special Instructions

- Check the expiration date on the outside of the Kit box. If the date has passed, replace tube in the Kit with non-expired purple-top blood tube from hospital stock. Note the replacement on the Step 3 envelope.
- Use a pediatric needle and blood tube if drawing blood from a child patient.
- When sealing filled blood tube inside the bubble pack, be careful that adhesive on area beneath the paper strip does not tear gloves.

Notes

- In order to minimize patient trauma, blood needed for the hospital laboratory or State toxicology laboratory (CT 400 Kit) should be drawn at the same time as blood needed for the Kit. Follow directions in the CT 400 Toxicology Evidence Kit.

STEP 4 FINGERNAIL SCRAPINGS & CUTTINGS

1. Remove enclosed specimen envelopes. Unfold envelope labeled "LEFT HAND" and place under patient's left hand.
2. With tip of one enclosed wooden scraper, scrape all residue from under fingernails of patient's left hand, allowing all scrapings to fall on specimen envelope. Place scraper on specimen envelope.
3. Using enclosed clippers, clip left hand fingernails, allowing all clippings to fall on specimen envelope.
4. Carefully refold specimen envelope to retain scraper, scrapings and clippings inside. Seal specimen envelope and place inside this envelope.
5. Repeat steps for right hand using folded "RIGHT HAND" envelope.
6. Place clippers inside this step 4 envelope. Label and seal this envelope and return it to kit box.

DATE _____ TIME _____ AM
PM

PATIENT _____

COLLECTED BY _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____

Contents

- One step envelope.
- Two folding specimen envelopes, labeled "Right Hand" and "Left Hand".
- One fingernail clipper.
- Two wooden fingernail scrapers.

Special Instructions

- Fingernails are important specimens--they may contain biological or trace evidence from the assailant or the crime scene, so they should be collected regardless of whether the patient has a specific memory of scratching the assailant. Always obtain the patient's permission before clipping her/his nails.
- Take care to place the opened specimen envelopes on a flat surface to prevent the specimens from sliding off.
- Carefully scrape, then clip the nails to make sure the scrapings and clippings fall on the specimen envelope.
- If the patient prefers not to have nails clipped, carefully scrape all fingernails.
- Artificial nails: it is permissible to scrape and/or swab in lieu of cutting.

STEP 5 KNOWN HEAD HAIR – PULLED

1. Using enclosed tweezers, collect a minimum of twenty (20) head hairs by pulling at least four (4) hairs each from front, back, center, right side, and left side of patient's head. Pulled hairs are the best sample.
2. Place collected hairs inside enclosed specimen envelope, label and seal.
3. Place specimen envelope inside this envelope. Label and seal this envelope and return it to kit box.
4. Retain tweezers for use in Step 9. (Do not seal tweezers inside this envelope.)

DATE _____ TIME _____ AM
PM
PATIENT _____
COLLECTED BY _____
WAS SAMPLE COLLECTED? YES NO
IF NO, WHY NOT? _____

Contents

- One step envelope.
- One specimen envelope.
- One pair of tweezers.

Special Instructions

- If the patient consents, pull as many of the 20 required known head hair specimens as possible. Hair roots contain valuable characteristics for microscopic analysis and comparison with any unknown hairs found during the examination or processing of the crime scene. Even a few pulled hairs will be helpful.
- If the patient's hair is treated (colored, permed, etc.) try to collect specimens that represent the varying characteristics, and note a description of the treatment and/or characteristics on the step envelope.

STEP 6 ORAL SWABS & SMEAR

1. Enclosed are two (2) swab packets, one (1) cardboard container containing one (1) glass slide, and two (2) folded swab boxes labeled "ORAL SWAB."
2. Open a swab packet and remove both swabs.
3. Using unmoistened swabs, carefully swab buccal area and gingival line using the two swabs simultaneously.
4. Using both swabs prepare a smear on the slide provided in the container labeled "ORAL SMEAR." Do not smear frosted area of slide.
5. AIR DRY SWABS AND SLIDE. DO NOT STAIN OR CHEMICALLY FIX SMEAR.
6. Place the swabs in a swab box labeled "ORAL SWAB." Return slide to "ORAL SMEAR" container and complete labels.
7. Repeat steps 2 & 3 with the second swab packet. Air dry the swabs and place in the second swab box labeled "ORAL SWAB."
8. Place swab boxes and secured slide container inside this envelope. Label and seal this envelope and return it to kit box.

DATE _____ TIME _____ AM
PM

PATIENT _____

COLLECTED BY _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____

Contents

- One step envelope.
- One cardboard container containing one (1) frosted-end glass slide.
- Two (2) swab boxes
- Two (2) double swab packets

Special Instructions

- To open swab packet, carefully pull the printed side of the packet that reads "PEEL HERE" until it separates from the unprinted side of the packet for a distance of approximately two inches.
- Pre-assemble swab boxes.
- Carefully open cardboard container to prevent glass slide from falling out. Replace any broken slide with same from hospital stock.
- Use pencil to write patient's initials and date on frosted end of slide.
- To make smears, roll swabs across slide from left to right, forming a single line along the slide.

Note

- Oral cultures needed for STI testing should be taken immediately after this step to minimize the time needed to complete the examination.

STEP 7 DRIED SECRETION SPECIMEN

1. Enclosed is one (1) swab packet and one (1) folded swab box labeled "DRIED SECRETION."
2. Open swab packet and remove both swabs. Moisten swabs lightly with distilled water or normal saline solution.
3. Carefully swab dried secretion using the two swabs simultaneously.
4. If more than one dried secretion is found on patient, use additional swab packet(s) from hospital stock as needed, reserving swab packet(s) for swab storage after specimen collection.
5. Use a separate swab packet for each stain category and location (e.g., saliva around bite marks, blood, semen), indicating location of each specimen on diagram below (additional specimen(s) as 7b, 7c, etc.).
6. AIR DRY SWAB(S). Place the swab in the swab box labeled "DRIED SECRETION." Place any additional swabs in their swab packets for storage. Label each sample as to origin and note the nature of the sample (e.g., saliva around bite marks, blood, semen) on the swab box and any additional used swab packets.
7. Place swab box (and any additional swab packets) inside this envelope. Label and seal this envelope and return it to the kit box.

NOTE:

- Prior to sampling bite marks or physical injuries, take photographs as appropriate.
- After sampling and / or photographing bite marks consult a Forensic Odontologist as deemed necessary.
- Consult lab or police with any further questions regarding the collection or storage related to bitemark evidence. Forensic Lab 203-639-6400 or State Police Communications (24 hr.) 800-842-0200.

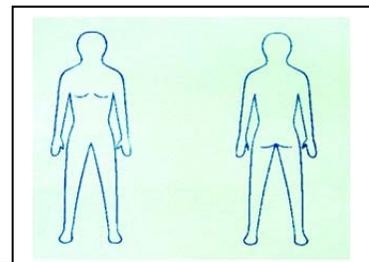
DATE _____ TIME _____ AM
PM

PATIENT _____

COLLECTED BY _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____



Contents

- One step envelope.
- One swab packet.
- One swab box.

Special Instructions

- Use only normal saline solution or distilled water to moisten swabs for dried secretion specimen.
- When swabbing a visible secretion, start at the outside of the secretion area and, making a circular pattern, swab the secretion area toward its center. Do not apply pressure when swabbing the stain.
- To ensure that all swab surfaces are exposed to the secretion, turn the swabs between thumb and forefinger while collecting the specimen.
- The use of an alternate light source with a filter or a Woods short-wave ultraviolet lamp in a darkened examination room can be helpful in locating fluorescence from saliva, urine, semen or feces on the patient.

Bitemarks

- Bitemark evidence should not be overlooked. Bitemark impressions can be compared with the teeth of a suspect and can sometimes be important for identification purposes.
- If any bitemarks or suspected bitemarks are found, contact a forensic odontologist or law enforcement as necessary to ensure that important bitemark evidence is properly collected.
- In general, the collection of saliva and the taking of photographs are the minimum procedures that should be followed when bitemarks are observed.
- Always swab any suspected bitemarks according to the directions in Step 7. Start at the outside of the bitemark and swab the area toward the center in a circular pattern. Note suspected bitemarks on the Step 7 diagram. Avoid excessive pressure.
- Saliva around a bitemark should be collected prior to cleansing or dressing the wound.
- If the skin is broken, avoid swabbing punctures when collecting saliva.
- Bitemarks should be photographed, with the best equipment available. Photographs should be taken looking directly down at the bitemark, not from an angle. A ruler / photographic scale must be placed adjacent to the bitemark and included in at least one of the photographs. An ABFO scale is recommended for this purpose.
- All final photographs of bitemarks should be labeled clearly with identification information (e.g., name of subject, name of photographer, description of what is being photographed, and date). (See below for information regarding the transfer of photographs for storage).

STEP 8 PUBIC HAIR COMBINGS

1. Unfold enclosed specimen envelope and place under patient's buttocks.
2. Comb through pubic hair allowing any loose hairs or other trace materials to fall on specimen envelope.
3. Refold specimen envelope to retain any specimens collected.
4. Place folded specimen envelope and comb inside this envelope.
5. Label and seal this envelope, and return it to kit box.

DATE _____ TIME _____ AM
PM

PATIENT _____

COLLECTED BY _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____

Contents

- One step envelope.
- One folding specimen envelope.
- One plastic comb.

Special Instructions

- Be sure that unfolded envelope is placed on a secure surface under the patient's buttocks to prevent specimens from falling.
- If any hairs contain moist substances, ask the patient's permission to cut the hairs for collection. Air dry the hairs, and place in a Step 13 specimen envelope. Label as directed on the specimen envelope, and make appropriate notes on Step 13 diagram. Note the collection on the Step 13 envelope.
- If the patient refuses to allow the hairs to be cut, swab the specimen with two clean swabs from hospital stock. Air dry the swabs, return the dried swabs to the swab packet, and place in the Step 13 envelope. Note the collection on the Step 13 envelope.
- To avoid the possibility of potential transfer of biological materials of the examiner to the pubic combings, you should either refrain from speaking while collecting this sample or wear a mask during Step 8.

STEP 9 KNOWN PUBIC HAIR PULLED

1. Using tweezers retained from Step 5, collect a minimum of twenty (20) pubic hairs by pulling from different areas of patient's pubic region. Pulled hairs are the best sample.
2. Place collected hairs inside enclosed specimen envelope, label and seal.
3. Place specimen envelope and tweezers inside this envelope.
4. Label and seal this envelope and return it to kit box.

NOTE: Pubic hair specimens may be pulled by the patient if she/he prefers. The patient should wear non-lubricated gloves if she/he completes this step.

DATE _____ TIME _____ AM
PM

PATIENT _____

COLLECTED BY _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____

Contents

- One step envelope.
- One specimen envelope.
- One pair of tweezers (retained from Step 5).

Special Instructions

- If the patient consents, pull as many of the twenty (20) known pubic hair specimens as possible. Hair roots contain valuable characteristics for microscopic analysis and comparison with any unknown hairs found during the examination or processing of the crime scene. Even a few pulled hairs will be helpful. Hair specimens should be cut only when necessary.
- Instead of using the provided tweezers, you may pull lightly on the pubic hairs with your gloved hand to remove pubic hairs from various regions.
- Pubic hair specimens may be pulled by the patient if she/he prefers. The patient should wear non-lubricated gloves if she/he completes this step.
- The tweezers retained from Step 5, and used in this step, should be sealed inside the Step 9 envelope.

STEP 10 GENITAL SWAB

1. Enclosed is one (1) swab packet and one (1) folded swab box labeled "GENITAL SWAB."
2. Open swab packet and remove both swabs. Moisten swabs lightly with distilled water or normal saline solution prior to specimen collection.
3. Carefully swab vulva (or penis and testicles) and inner thighs adjacent to the genital area, using the two swabs simultaneously.
5. AIR DRY SWABS.
6. Place swabs in the swab box labeled "GENITAL SWAB."
7. Place swab box inside this envelope. Label and seal this envelope and return it to kit box.

DATE _____ TIME _____ AM
PM

PATIENT _____

COLLECTED BY _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____

Contents

- One step envelope.
- One swab packet.
- One swab box

Special Instructions

- Use only normal saline solution or distilled water to moisten swabs.
- When swabbing any visible secretion from the genital area, start at the outside of the secretion area and, making a circular pattern, swab the secretion area toward its center.
- To ensure that all swab surfaces are exposed to the secretion, turn the swabs between thumb and forefinger while collecting the specimen.
- Use an alternative light source with a filter or a Woods short-wave ultraviolet lamp or other appropriate alternate light source in a darkened examination room to locate fluorescence from saliva, urine, semen or feces on the patient.
- If the patient is a female, swab the vulva and inner portions of the thighs adjacent to the genital area, even if no secretion is visible.
- If the patient is a male, use one moistened set of swabs to swab the glans and shaft of the penis. Use a second set of swabs (from hospital stock) to swab the base of the penis and testicles. Use a third set of swabs (from hospital stock) to swab the inner portions of the thighs adjacent to the genital area, even if no secretion is visible. After air drying, replace swabs in the original packets. Label the additional packets "shaft" "base" and "thighs." (See Guidelines for special instructions regarding male sexual assault patients.)

STEP 11 VAGINAL SWABS & SMEAR

1. Enclosed are two (2) swab packets, one (1) cardboard container containing one (1) glass slide, and two (2) folded swab boxes labeled "VAGINAL SWAB."
2. Open one swab packet and remove both swabs.
3. Carefully swab vaginal area using the two swabs simultaneously. Do not moisten swabs prior to specimen collection.
4. Using both swabs, prepare a smear on the slide provided in the container labeled "VAGINAL SMEAR." Do not smear frosted area of slide.
5. AIR DRY SWABS AND SLIDE. DO NOT STAIN OR CHEMICALLY FIX SMEARS.
6. Place the swabs in a swab box labeled "VAGINAL SWAB." Return slide to "VAGINAL SMEAR" container and complete labels.
7. Repeat Steps 2 and 3 for the second swab packet. Air dry swabs and place in the second swab box.
8. Place swab boxes and secured slide container inside this envelope. Label and seal this envelope and return it to kit box.

DATE _____ TIME _____ AM
PM

PATIENT _____

COLLECTED BY _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____

Contents

- One step envelope.
- One cardboard container containing one frosted-end glass slide.
- Two swab packets.
- Two swab boxes.

Special Instructions

- Vaginal swabbing should be done with patient lying on her back. Specimens should be collected from the cervix area. (See guidelines regarding examination of patients with disabilities.)
- To open swab packets, carefully pull the printed side of the packet that reads "PEEL HERE" until it separates from the unprinted side of the packet for a distance of approximately two inches.
- Open cardboard container carefully to prevent glass slide from falling out. Replace any broken slide with same from hospital stock.
- Use pencil to write identification information (patient's initials and date) on frosted end of slide.

- To make smears, roll swabs across slide from left to right, forming a single line along the slide.
- If the patient is a male, omit this step and note such on the step envelope.

Note

- The second set of swabs may be analyzed for the presence of condom lubrication evidence. This analysis requires that only non-lubricated gloves be used for the examination and that only warm water be used as a lubricant for the pelvic exam.
- Vaginal cultures needed for STI testing should be taken immediately after the vaginal swab specimens are collected in order to minimize the time needed to complete the examination.

STEP 12 ANAL SWABS AND SMEAR

1. Enclosed are two (2) swab packets, one (1) cardboard container containing one (1) glass slide, and two (2) swab boxes labeled "ANAL SWAB."
2. Open one swab packet and remove both swabs.
3. Carefully swab the anal cavity using the two swabs simultaneously. (Swabs may be moistened lightly with distilled water or normal saline solution.)
4. Using both swabs, prepare a smear on slide provided in container labeled "ANAL SMEAR." Do not smear across frosted area.
5. AIR DRY SWABS AND SLIDE. DO NOT STAIN OR CHEMICALLY FIX SMEAR.
6. Place the two dried swabs in the swab box labeled "ANAL SWAB." Return slide to "ANAL SMEAR" container and complete label.
7. Repeat Steps 2 and 3 for the second swab packet. Air dry swabs and place in the second swab box.
8. Place secured slide container and swab box inside this envelope.

DATE _____ TIME _____ AM
PM

PATIENT _____

COLLECTED BY _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____

Contents

- One step envelope.
- One cardboard container containing one frosted-end glass slide.
- Two swab packets.
- Two swab boxes.

Special Instructions

- Anal specimens should be collected from the anal cavity.
- If the patient is a male, use additional swab packets from hospital stock to collect specimens from around anal opening.
- To open swab packets, carefully pull the printed side of the packet that reads "PEEL HERE" until it separates from the unprinted side of the packet for a distance of approximately two inches.
- Open cardboard container carefully to prevent glass slide from falling out. Replace any broken slides with same from hospital stock.
- Use pencil to write patients initials and date on frosted end of slide.
- To make smears, roll swabs across slide from left to right, forming a single line along the slide.

Note

- The second set of swabs may be analyzed for the presence of condom lubrication evidence. This analysis requires that only non-lubricated gloves be used for the examination, and that only warm water be used as a lubricant for pelvic exam.
- Anal cultures needed for STI testing should be taken immediately after anal swab specimens are collected in order to minimize the time necessary to complete the examination.

STEP 13 OTHER PHYSICAL EVIDENCE

1. Collect any other physical evidence (e.g., condom, tampon, facial or toilet tissue, pubic hair inside vaginal or anal cavity, glass embedded in patient's skin).
2. AIR DRY EACH ITEM (when practical).
3. Place each dry item in a separate enclosed specimen envelope, indicating location of each item on diagram below (e.g., 13A or 13B).
4. Label and seal each specimen envelope and identify the type of evidence on the specimen envelope and place inside this envelope.
5. Place moist item (e.g., condom or tampon) inside enclosed plastic bag and seal. Label and seal plastic specimen bag, and place inside this envelope.
6. Label and seal this envelope and return to the kit.
7. Use additional new envelopes from hospital stock as needed. Label (e.g., 13C, etc.) and seal as directed above, and indicate location on diagram below.
8. Place yellow "moist specimen" sticker in appropriate location on outside of kit.

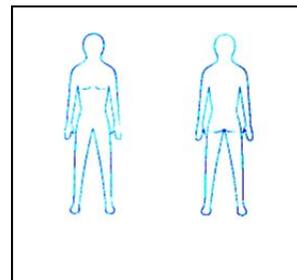
DATE _____ TIME _____ AM
PM

PATIENT _____

COLLECTED BY _____

WAS SAMPLE COLLECTED? YES NO

IF NO, WHY NOT? _____



Contents

- One step envelope.
- Two specimen envelopes labeled "Step 13A" and "Step 13B."
- One zip-top plastic bag labeled "Step 13C (MOIST SPECIMEN)."
- One yellow "MOIST SPECIMEN" sticker.

NOTE: DO NOT place MOIST SPECIMEN sticker on kit UNLESS a moist specimen was collected in Step 13.

Special Instructions

- Only moist specimens that cannot be dried within a reasonable period of time should be collected in the plastic bag provided. All other evidence should be air dried as directed, and collected in either paper bags or paper envelopes as directed.
- If a condom is found, package separately in the plastic bag or other sealed container to prevent leakage and contamination of other specimens.
- If a tampon or sanitary napkin is found, air dry the sample, if possible. Collect the sample in a plastic container, as appropriate.

- DO NOT swab the surfaces of these types of items (condoms, tampons, etc.) prior to packaging.

Photographs

- The patient's specific consent should be obtained according to the health care facility's policies and procedures before any photographs are taken.
- Whenever possible, photographs of injuries should be taken by a competent photographer, preferably a police photographer, with equipment capable of recording clear images of the injury. An appropriate ruler and a color chart should also be used to indicate the size and nature of each injury.
- Colposcopic photographs and photographs of genital area should not be taken unless the patient specifically consents. Patients should be made aware that all photographs may be used in trial.
- Drawings should be made of any injuries, indicating the proper location on the body, on the anatomical figures and the genital figures provided on the Medical Report form. These drawings should always be accompanied by a written description of the injury.
- All photographs should be labeled clearly with identification information (e.g., name of subject, name of photographer, description of what is being photographed, and date). (See below for information regarding the transfer of photographs for storage.)

Transfer of Photographs to Police

- Photographs should be labeled with identification information and sealed inside a separate envelope. Photographs should NOT be placed inside the CT 100 Kit.
- The envelope should be labeled with the same identification information that is listed on the Kit cover.
- If the patient has consented to the police reporting, photographs should be retained according to hospital protocols or transferred to the police department that has jurisdiction where the assault occurred for storage with the case investigation file.
- If the patient has not consented to the police report at the time of the examination, the sealed envelope containing the photographs should be labeled with a Control Number and maintained in the hospital record.

Evidence Integrity: Repackaging, Labeling and Sealing Evidence Containers

Clothing Bag

- Moist stains on clothing should be air dried prior to placement in paper bags. Never touch a stain to determine dryness. Dryness can best be determined by close visual examination. Paper towels should be folded over any visible stains to prevent cross-contamination.
- All small white clothing "specimen" bags (and any other small bags or hospital paper packages used) should be labeled with the requested identification information.
- Double-fold the opening of each white bag and secure with tape. Be sure to seal the fold seam and to wrap tape around the end of the fold seam to hold securely. All seals must be initialed.

- Carefully place the labeled, sealed small white bags (and any other small bags or hospital paper packages used) and the folded white paper sheet inside the large brown paper bag.
- Double fold the opening of the large brown bag and secure with tape. Be sure to seal the fold seam and to wrap tape around the end of the fold seam.
- Carefully place one red evidence seal around each end of the fold seam to form a tamper-evident seal. Initial each seal.
- Evidence seals are intended to indicate, by a tear or break in the seal, that an evidence container has been reopened. The evidence seals included in the Kit are very thin and should be handled very carefully. If the evidence seal tears during application to the evidence container, continue application taking care to maintain the integrity of the seal to the extent possible. After application of the seals, write your name or initials through any tear or break in the evidence seal.
- Complete the identification information section on the label of the large brown bag (and hand-write on any additional bags used).
- Complete the chain of custody label on lower section of brown bag. All requested information should be provided by hospital, police and laboratory personnel (hand-write on any additional bags used).
- Mark the upper right corner of the chain of custody label, e.g., as "2 of 2" to indicate the total number of evidence containers from the patient.
- If any items were packaged in additional paper bags or hospital paper and were not placed inside the large brown clothing bag from the Kit, ensure that the package is sealed completely, hand-labeled with identification and chain of custody information and marked as a separate package (e.g., "3 of 3").