

Best Practices for Sexual Assault Nurse Examiners

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The Value of SANEs

- SANEs are a great leap forward in forensic medicine. As trained health care professionals and forensic experts, they provide:
 - Comfort and care to patients reporting sexual assault
 - Competent and consistent exam with evidence collection, and the willingness to come to court and testify as to chain of custody, etc.
 - Expert testimony, usually on tissue and anatomy

What Medical/Forensic Experts Do

- Provide fact and expert testimony.
 - Fact testimony.
 - Patient demeanor, appearance, statements.
 - Exam procedure, collection, storage protocols.
 - Expert Testimony.
 - Meaning of physical findings.
 - Occasionally, testimony on typical patient responses and behaviors.

Statements

- Statements made to medical providers for purposes of diagnosis/treatment = traditional HSY exception.
- Two hurdles:
 - Is it truly for diagnosis/treatment?
 - Is it *Crawford* proof?
 - *Crawford* watchword is testimonial.

Crawford Proof Statements

- Nurses should be caring for PATIENTS-refrain from term victim
- Nurses should be conducting an examination for the purpose of medical diagnosis and treatment
- Documentation should not be about the investigation, but focus on the medical

Interpretation of Physical Findings

- No medical professional can give an opinion as to a legal conclusion generally.
- Usually expressed in terms of consistencies.
- Medical opinion must be guided by legal limitations and THE RESEARCH.
- Remember: Most cases, even when reported acutely, do not yield evidence of ano-genital injury.

What SANEs Are

- Unbiased, scientific examiners trained to check for signs of abuse and report on them neutrally.
- Know the research
- All testimony should be based on the research

What SANEs are NOT

- Law enforcement officers, or professionals who are in any way answerable to law enforcement
 - Most SANEs view the forensic part of the exam as something done as a courtesy to the patient, not at the behest of law enforcement
- Victim advocates
 - SANEs **do** provide comfort and care within the nursing role (patient advocates), but this is different from what is normally viewed as victim advocacy

Best Practices

- Having reporting/non-reporting options
- Unit Based Advocates
- Need MOU with area SANE experts-difficult to have one on base

Victim Advocates

- Allow patient to make decision if advocate
 - Responds to hospital
 - Provides support during exam
 - Provides on-gong supprt

SART

- Sexual Assault Response Team
 - SANE should be part of the SART team
 - To provide information
 - To provide explanation of exam findings

Peer Review

- All cases should have a peer review of the report
 - Assures non-biased documentation
 - Confirms the findings
 - May identify additional findings
 - Increased competency/learning for new SANEs

Photographs

- All cases should have photographs
 - For peer review
 - For court
 - For follow up

Follow Up Exams

- All cases with an injury, or finding should have a follow up examination
 - To confirm subjective findings
 - Swelling
 - Redness
 - To confirm injury
 - Shows expected healing of injury
 - To differentiate injury from medical finding
 - Ectropion cervix

HIV

- All patients should be offered HIV testing
- All patient should be offered HIV prophylactic medications