

Procedure for SANE Evaluation/Forensic Collection

- A. Initial Report of Sexual Abuse or Assault
 - a. Initial notification or reporting of sexual abuse or assault will be handled in accordance with GDC SOPs 507.04.91, 208.06 and 508.22.
 - i. Medical staff shall conduct an initial assessment of the offender to determine if there is evidence of any physical trauma requiring immediate medical intervention in accordance with good clinical judgment.
 - ii. Medical staff shall immediately initiate all necessary urgent/emergent treatment for bleeding, wounds, and other traumas.
 - b. Nursing staff shall complete the Nursing Protocol Assessment form for alleged Sexual Assault. This shall be filed in the nurse's notes section of the medical record.
 - c. Facility clinicians (MD/NP/PA) shall document the physical examination in the progress notes.
 - d. When medically indicated, medical staff shall initiate arrangements to transfer the offender accompanied by a qualified staff member to the designated emergency facility for continued treatment and collection of forensic evidence. The Urgent/Emergent and Medical PREA Log will be completed.
 - e. Upon return from hospital SOP 507.04.91 and 508.22 shall be followed.
- B. Collection of evidence by SANE Nurse on-site
 - a. The following facilities have SANE Nurses assigned:
 - i. Small facilities shall use their assigned medical catchment State Prison for SANE Nurse services.
 - b. Notification of SANE Nurse
 - i. Offenders must consent to a SANE examination, prior to contacting SANE in accordance with *SOP 507.04.85 Informed Consent*.
 - ii. If the alleged assault occurred within 72 hours of the reported incident, and the offender does not require transport to the ER, the designated facility SANE Nurse shall be immediately notified, and an appointment scheduled for the collection of forensic evidence. This will occur only if there has been penetration reported by the patient. For females and males, this also includes oral penetration. Otherwise, no rape kit will be collected.

NOTE: The 72 hours begins at the time the alleged assault occurred.

- iii. If the sexual assault occurred more than 72 hours previously, the decision on whether the evaluation is done by a local hospital, by the SANE Nurse, or facility staff will be made on a case-by-case basis. The decision shall be made by the Health Authority in consultation with the Facility Investigator in accordance with GDC PREA Policy.
 - iv. For sites without a designated or available SANE Nurse, a designated catchment facility, or the SANE is not available within a reasonable time frame, the Appointing Authority, in consultation with the Regional SAC, shall coordinate with the Office of Health Services (OHS) to arrange for the offender to be transported to a hospital for collection of the forensic evidence.
- c. A list of the SANE Nurse call schedule shall be posted in the medical unit along with the physician on-call schedule and, for sites without 24-hour nursing, designated security locations. The SANE Nurse Call Roster shall include the SANE Nurses approved to enter the facility.
- d. Once the SANE Nurse is notified, the Warden or designee shall be notified of the date and time for the scheduled forensic assessment and collection. Date and time of SANE Nurse notification shall be placed on the log.
- e. The offender will remain in a designated area until the forensic exam is completed. The Consent for Treatment Form will be completed consenting to the exam by the SANE Nurse prior to scheduling the visit. *See Refusal of Treatment. During this time the process should be explained to the offender with confirmation they understand what to expect.
- C. SANE Assessment/Forensic Collection
- a. Patient Preparation
 - i. An exam room must be ready at the time the SANE exam is scheduled and the SANE Nurse arrives.
 - ii. The patient is allowed to eat and drink if no oral penetration has occurred.
 - iii. If oral penetration occurred, the patient should be nil per os NPO, if possible, until the exam is completed. If the exam does not occur within 8 hours, the patient can eat or drink as necessary. However, if the patient cannot tolerate the NPO status, limited food and drink can be consumed after 4 hours. This will not preclude the exam from being done. Patients with medical conditions will be assessed for nutritional and fluid needs on a case-by-case basis, i.e. diabetics.

- iv. The patient should not change clothes or underwear, and should not shower or brush teeth until the exam is done. The patient should be counseled as to the reason due to the importance of not destroying evidence.
- v. If at all possible, clothes should not be removed until the SANE Nurse is present. If clothes are removed, they should be removed with victim standing on exam paper and all clothes must be placed in **PAPER** bags. Each article of clothing must be placed in separate **PAPER** bags. The bags must be sealed. The bag must also be labeled with the inmate's name, date and time.
- vi. If no signs or symptoms of bleeding or severe trauma are present or witnessed by medical staff, which would have required immediate first aid intervention, no medical exam should occur until the SANE Nurse completes the forensic exam.
- vii. Medical staff should wear exam gloves at all times when interfacing/assisting/assessing the patient until the SANE exam has been completed.

b. Equipment

- i. The SANE Nurse shall arrive with an approved SANE Kit which will include the following:
 - a. Camera
 - b. Forensic Ruler
 - c. Toluidine Swabs
 - d. 10% Acetic Acid or KY Jelly
 - e. Red Top Tube (Lab)
 - f. Pipette
 - g. Sterile Water Syringes (2)
 - h. SANE Forms
 - i. Goggles

NOTE: This is subject to change
- ii. The exam room must have the following available and ready at the scheduled time of the SANE exam:
 - a. All routine exam supplies, i.e. gloves, gauze pads, etc.
 - b. Woods Lamp/Ultraviolet light
 - c. Sterile Water
 - d. Rape Kit (make sure it is not expired)
 - e. Index Cards

- f. Blood Tube, or similar product will be available and a rack to hold blood tubes and for drying the swabs After the evidence is collected.
- g. Table Exam Paper
- h. Paper Bags (small and large (grocery size))
- i. Supplies for collection of required labs

c. Procedures

i. Lab- The following labs will be drawn:

- a. Perpetrator
 - i. Confirm HIV status
 - ii. Hepatitis profile
 - iii. Rapid Plasma Reagin (RPR)
- b. Victim
 - iv. HIV
 - v. Hepatitis profile
 - vi. RPR

NOTE: All changes in HIV status will be entered into SCRIBE.

ii. Treatment: When a SANE exam is completed on site, the facility provider or designee (i.e. On-Call provider) shall be responsible for ordering prophylactic treatment for STIs, as well as pregnancy prophylactics if applicable. This includes follow-up of all labs collected.

a. All necessary clinical treatment must be initiated by a clinical practitioner; Recommendations include:

i. Female Patients

NOTE: Patients should have a pregnancy test with results before administering medication.

ii. Coverage for GC, BV, Chlamydia and Trichomonas

Recommended Regimens

Ceftriaxone 250 mg IM in a single dose

PLUS

Metronidazole 2 g orally in a single dose

PLUS

Azithromycin 1 g orally in a single dose

OR

Doxycycline 100 mg orally twice a day for 7 days

iii. Patients Penicillin Allergic

Azithromycin 2 g PO

PLUS

Metronidazole 2 gms orally in a single dose

iv. MALE PATIENTS

Recommended Regimens

Ceftriaxone 250 mg IM in a single dose

PLUS

Metronidazole 2 g orally in a single dose

PLUS

Azithromycin 1 g orally in a single dose

- iii. There shall be a follow-up visit by a clinician 3 working days following exam.
- d. Documentation Forms
- i. SANE Nurses shall bring a copy of their assessment forms which they will complete on site.
 - ii. Once completed, the SANE Nurse shall leave a copy of their nurses notes which shall be filed in the medical record with the Nursing Protocol Form for Sexual Assault.
 - iii. The SANE Nurse shall also leave a copy of their Forensic Exam documentation which shall be filed in a designated locked filing cabinet in medical administration, along with copies of the complete GDC Facility Chain of Custody Form.
 - iv. These shall be retained in accordance with the medical retention schedule.
- e. Chain of Custody
- i. Once the rape kit is collected, required legal chain of custody shall be followed until it is sent to the GBI lab. Until it leaves the facility it must remain locked up.
 - ii. The Chain of Custody shall be from SANE Nurse to Security Shift Supervisor or at a level above.
 - iii. The Security individual collecting the kit shall sign the Medical PREA Log. All other Chain of Custody policies shall be followed including completion of the GDC Facility Chain of Custody form. A copy of this form shall be given to medical and attached to the completed SANE Exam documentation left by the SANE Nurse.
- f. Refusal of Treatment
- i. Individuals refusing to be evaluated following a report of sexual abuse shall be counseled regarding the medical and legal implication of foregoing the evaluation. This shall be thoroughly documented in the medical record and on a refusal of treatment form.

- D. Referrals for MH Evaluation and Counseling
 - a. Referrals for MH evaluation and counseling will be done in accordance with SOP 507.04.91 and 508.22.

- E. Medical PREA Log and SANE Invoice
 - a. The reported incident shall be entered on the PREA Medical Log. The log shall be completed in its entirety to include the home of the victim for which forensic evidence is being collected.

 - b. The Health Services Administrator (HSA) or Director of Nursing (DON) shall forward the log electronically in a confidential manner to the Administrative Assistant to the Director of Patient Care Services, by the 5th calendar day of the month for the previous month. The log shall be reviewed for completeness before sending.

 - c. The HSA shall review all invoices for the forensic exam upon receipt. Once verified, invoices will be forwarded to the contract vendor for processing in accordance with current budgetary practices.