

Examination of a Survivor and collection of evidence

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**For DHEERA,
An initiative by Dr. Shantha Kumari,
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Gynaecological Societies of India**

The role of a Gynaecologist

Use important evidence of the crime - help judges understand physical and mental condition of the survivor

Use reports to corroborate the Survivors story and enhance credibility

Offer primary level counselling treatment and referral for the physical and psychological sequelae

Medical examination



REMEMBER -25 THINGS TO DO



1-11 General instructions

12. Informed consent

13. Marks of identification

14. Relevant Medical and Surgical History

15. History of sexual Violence , type of physical violence ,emotional abuse etc

16. General Physical examination

17. Examination for injuries

18. External Genitalia

19. Systemic examination

20 and 21.Evidence and sample collection

22. Provisional medical opinion

23. Treatment prescribed

24. Date and time of completion of examination

25. Final opinion

General instructions

1. Name of the Hospital.....OPD No.....Inpatient No
.....
2. Name D/O, W/O or S/O where known
.....
3. Address
4. Age as reported DOB
5. Sex (M/F others)
6. Date and Time of arrival in the hospital
7. Date and time of commencement of examination.....
8. Brought by(Name and signature)
9. MLC No Police Station
10. whether conscious / Coherent oriented in time and place
and person.....
11. Any physical/ intellectual/psychosocial disability.....
(interpreters or special educators will be needed where the
survivor has special needs such as hearing / speech disability,
language barriers , intellectual or psychosocial disability)

12. Informed consent and marks of identification

- Informed consent/refusal
- I D/O or W/O S/O hereby give my consent for
 - Medical examination-Y/N
 - Medicolegal examination Y/N
 - Sample collection for clinical and forensic examination Y/N
 - I also understand that as per law the hospital is required to inform police, and this has been explained to me
 - I want the information to be revealed to the Police –Y/N
 - I have understood the purpose and the procedure of the examination including the risk and benefit , explained to me by the examining doctor .My right to refuse the examination at any stage and the consequence of such refusal ,including that my medical treatment will not be affected by my refusal has also been explained and may be recorded .Contents of the above have been explained to me in language with the help of a special educator/ interpreter /support person
 - If special educator/ interpreter/ support person has helped, then his /her name and signature

13. Marks of identification

- Any scar or mole
- Left thumb impression

14. Relevant Medical and Surgical history

Onset of menarche in case of girls – Yes/No

Age of onset

Menstrual History – Cycle length and duration

Last menstrual period

Menstruation at the time of incident Yes/No

Menstruation at the time of examination –Yes/No

Was the survivor pregnant at the time of incident –Yes/No

If yes duration of pregnancy weeks

Contraception use Yes/No

If Yes method used

Vaccination status – Tetanus (vaccinated/ not vaccinated) Hepatitis B (Vaccinated/not Vaccinated)

15A. History of sexual violence

- Date of incident being reported
- Time of incident
- Location
- Estimated duration: 1-7 days, 1 week to 2 months, 2-6 months, 6 months
- Episode – one/multiple/chronic > 6 months, unknown
- Number of assailants ...
- Name/s
- Sex of the assailants
- Approximate age
- If known- relationship to the survivor
- Description of the incident in the words of the narrator
- Narrator of the incident – survivor / informant (specify name and relationship to survivor)
- Add extra page if necessary

15B. TYPE OF PHYSICAL VIOLENCE USED IF ANY

Hit with

Hand ☐

Fist ☐

Blunt object ☐

Sharp object ☐

Biting ☐

Pinching ☐

Violent Shaking ☐

Any other ☐

Burned with

Kicking ☐

Pulling hair ☐

Banging head ☐

Dragging ☐

Tick the relevant answer /answers and describe if any

15C. Emotional Abuse

- Emotional abuse or violence if any (insulting, cursing, violating , terrorising)
- Use of restraints if any
- Used or threatened the use of weapons or objects if any
- Verbal threats for eg threats of killing or hurting survivor or any other person survivor is interested in use of photographs blackmailing if any
- Luring (sweets ,chocolates, drinks, alcohol ,drugs , money, job) if any
- Any other

15D.

- Any history of alcohol or drug intoxication
- Whether sleeping or unconscious at the time of the incident

15E.

If the survivor has left any marks of injuries on assailants – details

15F. Details regarding sexual violence

Was penetration by penis ,fingers or object or other body parts (write Y-Yes, No-N Don't know – DNK) Mention and describe body parts and or objects used for penetration

Penetration				Emission of Semen		
Organ involved	By Penis	By body part of self or assailant or third part (finger ,tongue or any other)	By object	Yes	NO	Don't know
Genitalia (vagina and or urethra)						
Anus						
Mouth						

Details regarding sexual violence

- Oral sex by assailant Y/N/DNK
- Forced masturbation of self by survivor Y/N/DNK
- Forced Masturbation of assailant by survivor , forced manipulation of genitals Y/N/DNK
- Exhibitionism (perpetrator displaying genitals)Y/N/DNK
- Did ejaculation occur outside body orifice (vagina /anus/mouth/urethra? Y/N/DNK
- If yes, where on body?
- Condom used
- If yes status of condom
- Lubricant used
- If yes describe kind of lubricant
- If object is used , describe the object

Post incident details

Post incident has the survivor	Yes/No/Do Not know	Time since incident and any other remarks
Changed clothes Changed undergarments Cleaned/washed clothes Cleaned/washed undergarments Bathed Douched Passed urine Passed stools Rinsing of mouth/Brushing/ Vomiting (Circle any or all as appropriate)		

H/O Vaginal/anal /oral bleeding / discharge prior to the incident of sexual violence

H/O Vaginal /anal /oral bleeding /discharge since the incident of sexual violence

H/O painful urination / painful defecation /fissures/abdominal pain /pain in genitals or any other part since the incident or sexual violence

16. General physical examination

Height in cms

Weight in Kgs

General built- thin /normal/obese

Gait

Pulse rate

Blood pressure

Temperature

Respiratory rate

Pupils

Any other disability or deformity

17. Examination for injuries on the body

Can range from complete absence of injuries (frequently) to grievous injuries

What ?

Bruises
Nail abrasions
Teeth bites
Cuts
Lacerations
Fracture
Tenderness
Boils
Burns

Where ?

Scalp
Face
Neck
Shoulders
Breast
Wrists
Forearms
Medial aspect of
upper arms
Thighs and buttocks

How?

Size,
Shape
Colour
Swelling
Signs of healing
Simple/grievous
Dimensions

18. External Genitalia – record findings

Labia majora
Labia Minora
Urethral meatus and vestibule
Fourchette and introitus
Perineum
Hymen

P/S findings if performed
P/V findings if performed
*Record reasons for P/S & P/V
Anus and Rectum –Bleeding /tear/discharge
/oedema/tenderness
Oral cavity –Bleeding /discharge /tear /edema
/tenderness

Per Vaginal and Per Speculum examination should not be done unless required for detection of injuries or for medical treatment

19. Systemic examination

- CNS
- CVS
- Respiratory System
- Abdomen

20. 21. Evidence collection- sample collection

- To obtain confirmation of allegation
- To establish link between victim and scene
- To establish the link between the victim and assailant

Every contact leaves a trace

Evidence collection- sample collection



Always maintain the
Chain of evidence



Identify the
specimen



Label the specimen
and sign the label



Record the disposal
of the specimen

Sample collection & Investigations

20. Hospital Laboratory /Clinical Laboratory

- Blood for HIV ,VDRL, HbsAg,HCV
- Urine test for Pregnancy
- Ultrasound for Pregnancy/Internal injury
- X ray for injury

21. Central /State Forensic Laboratory

- Debris collection paper
- Clothing evidence where available – (to be packed in separate paper bags after air drying)

Sample collection

Swabs from stains on the body (blood ,serum, foreign material)

Scalp hair -10-15 strands

Head hair combing

Nail scrapings –both hands separately

Oral swab

Blood for grouping ,testing for drugs alcohol

Blood for DNA analysis –

Urine – drug testing

Any other – tampon /sanitary napkin /condom object

If not collected -reasons for not collecting

Genital and anal evidence (each sample to be packed, sealed and labelled separately to be placed in a bag)

Matted pubic hair

Pubic hair combing (mention if shaved)

Cutting of pubic hair – mention if shaved

Two vulval swabs – semen and DNA

Two vaginal swabs – semen and DNA

Two anal swabs – semen and DNA testing

Vaginal smear (air dried) for semen examination

Urethral swab

Samples to be preserved as directed till handed over to police along with duty attested sample seal

If not collected -reasons for not collecting

22. Provisional medical opinion

I have examined (name of survivor) M/F /other aged reporting
(type of sexual violence and circumstances , no of hours /days
.....after the incident after having (bathed /douched , no of times

My findings are as follows :

Samples collected (for FSL awaiting reports)

Samples collected (for hospital laboratory)

Clinical findings

Additional observations

23. Treatment prescribed

Yes /No /any
comments

STI prevention treatment

Emergency contraception

Wound treatment

Tetanus prophylaxis

Hepatitis B vaccination

Post exposure prophylaxis for HIV

Counseling

Others

24. Date and time of completion of examination

Date and time of completion of examination

This report contains number of sheets and
.....number of envelopes

Signature of examining doctor

Name of examining doctor

Place seal

25. Final opinion

After receiving Lab reports –in the following mentioned formats

Opinions regarding sexual assault survivor to be given in a case of sexual assault / rape

S.NO	Opinion	Conditions when such opinion is given
1	There is evidence of recent sexual intercourse	When recent injuries to genitals and other body parts are found and motile spermatozoa are recovered from vagina
2.	Remote sexual intercourse	Partially healed injuries and non motile spermatozoa in vagina – when reported late
3	Recent penetration	Local recent injuries to genitals but no spermatozoa are recovered – condom, vasectomised, finger dildo, other objects

Opinions regarding sexual assault survivor to be given in a case of sexual assault

S.NO	Opinion	Conditions when such opinion is given
4	There is evidence of remote penetration	When local partially healed injuries to genitals and no spermatozoa are recovered
5	There is evidence of recent sexual assault	Recent injuries / bite marks etc on face , cheeks neck breasts nipples thighs etc but injuries to genitals are absent – when help arrives before actual penetration occurs
6	Evidence of remote sexual assault	Partially healed injuries / bite marks etc on face , cheeks neck breasts nipples thighs etc but injuries to genitals are absent
7	There is no evidence of vaginal penetration , but possibility cannot be ruled out	When there are no injuries and no spermatozoa are recovered from vagina

Opinions
regarding sexual
assault survivor
to be given in a
case of sexual
assault

S.NO	Opinion	Conditions when such opinion is given
8	There is evidence of recent oral/anal intercourse	When recent injuries are noted and motile spermatozoa are recovered from these areas
9	There is evidence of remote oral / anal intercourse	When partially healed injuries are noted and non motile spermatozoa are recovered from these areas
10	Evidence of recent or remote oral/anal penetration	When recent/ partially healed injuries are found and spermatozoa are not recovered
11	There is no evidence of oral/anal penetration , but possibility cannot be ruled out	When there are no injuries and no spermatozoa are recovered from oral cavity / anal canal

Findings in support of the above opinion, taking into account the history, clinical examination findings and Laboratory reports of bearing identification marks described above, ... hours/ days after the incident of sexual violence, I am of the opinion that:

.....

.....

.....

.....

.....

.....

Signature of Examining Doctor

Name of Examining Doctor

Place:

Seal

**COPY OF THE ENTIRE MEDICAL REPORT MUST BE GIVEN TO THE SURVIVOR/
VICTIM FREE OF COST IMMEDIATELY**

Summary

Informed consent

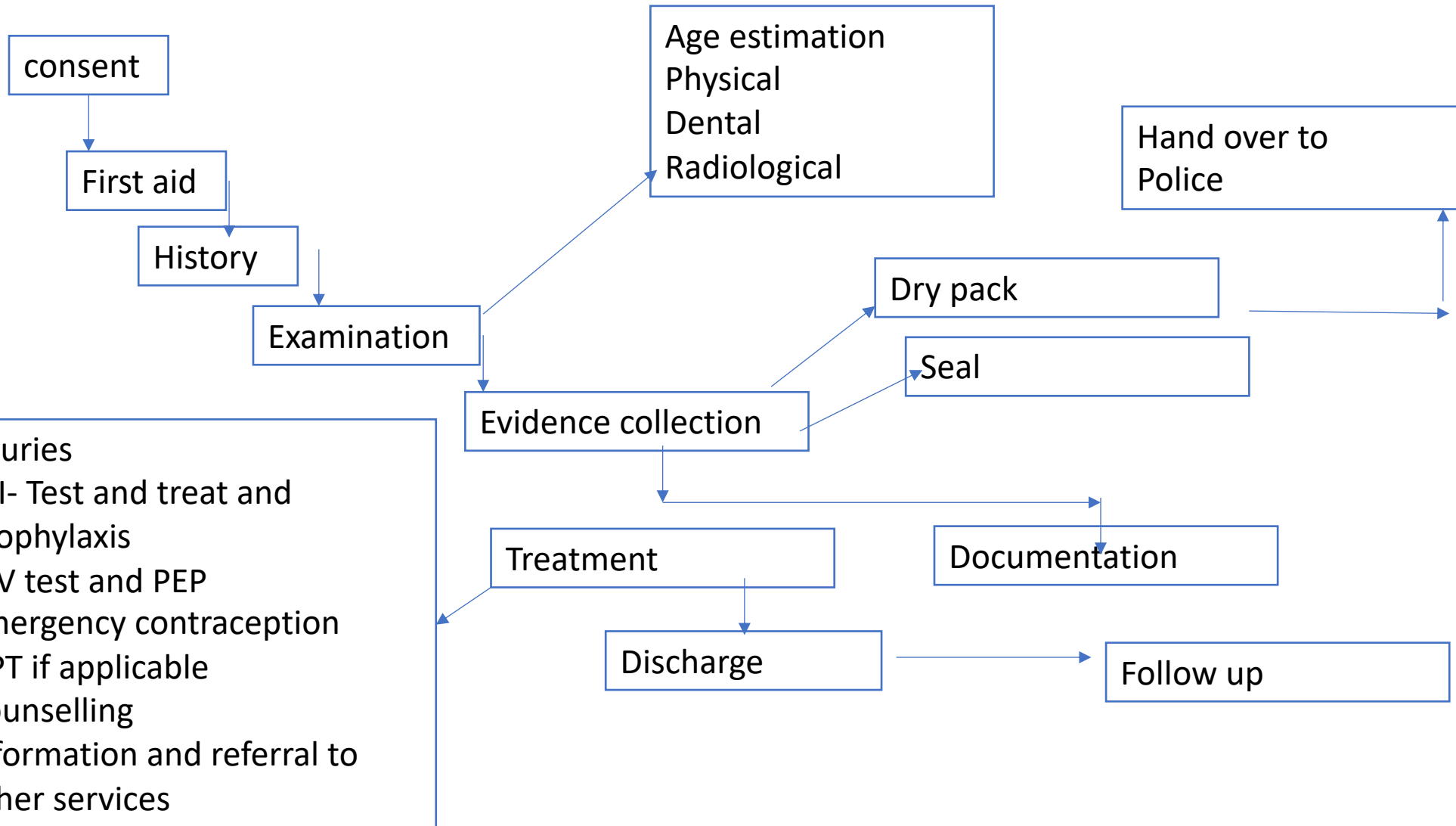
Per vaginum examination – 2 finger test – not to be done – Hymen or size of vagina etc not to be commented

Injury documentation

Sample collection

Final opinion

The following are the components of a comprehensive health care response to sexual violence and must be carried out in all cases



Sexual Assault Forensic Examination Kit

Annexure 1

Fixtures	Equipment	Drugs and commodities	Documentation
Examination table	Torch	For prophylaxis or treatment of sexually transmitted infections as per country protocol Syndromic Case Management - Antibiotics	Consent forms
Light, preferably fixed	Tweezers	Antiretroviral drugs for post-exposure prophylaxis for HIV as per protocol - case specific	Reporting formats
Curtains	Scissors	Emergency contraception	Receipt for material evidence
Table	Nail Cutter	Analgesics	
Chair	Comb	Tetanus prophylaxis	
Wash basin	Measuring tape	Pregnancy test kits	
Ruler	Calipers	Magnifying glass	

Annexure 2

Supplies for collection of forensic evidence	
Sterile gauze swabs 5x5 and swabs	Sterile water/ normal saline
Containers for transporting swabs	Scales for height measurement
Microscope slides	Stationery (Pen, pencil, eraser, stapler and pins)
Vacutainers	Sterile foam tipped applicator
Sterile Urine specimen containers	Shoe cover
Sheets of paper (drop sheet)	Cap
Paper bags	Filter paper
Plastic specimen bags	Sterile swab sticks
Spatula	Phosphate buffered saline
Sterile Surgical Gloves	Hand wash
Masks	Carton
Cleaning materials	Cotton roll (small)
Antiseptic solution	Red sealing wax
Perineal Sheet/ Gown, cloth or sheet to cover the victim during the examination	Bandage Gauze
Sanitary napkins	Plaster big size
Speculum	Envelopes with outer and inner clothing for collection of different samples
Protoscope/anoscope	Syringes and needles (2cc and 5 cc)
Tourniquet	FTA card in pouch

Acknowledgments and REFERENCES

CONTRIBUTORS

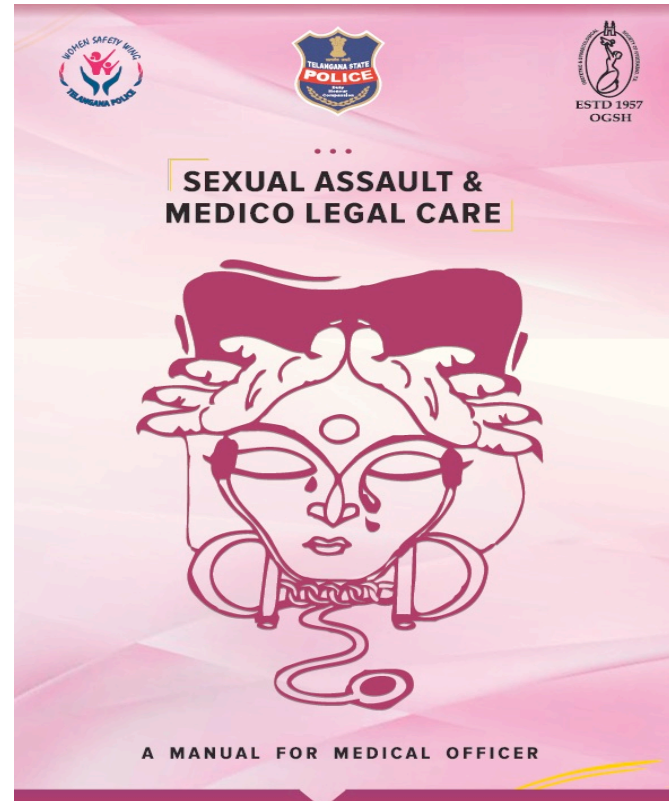
Smt. Swati Lakra, IPS
IGP, Women Safety Wing

Smt. B.Sumathi, IPS
SP, Women Safety Wing

Dr. Mamatha Raghuvver
Technical partner, Bharosa

Dr. R. Sudha
Associate professor of
forensic medicine

**Obstetric & gynaecological
society of Hyderabad**



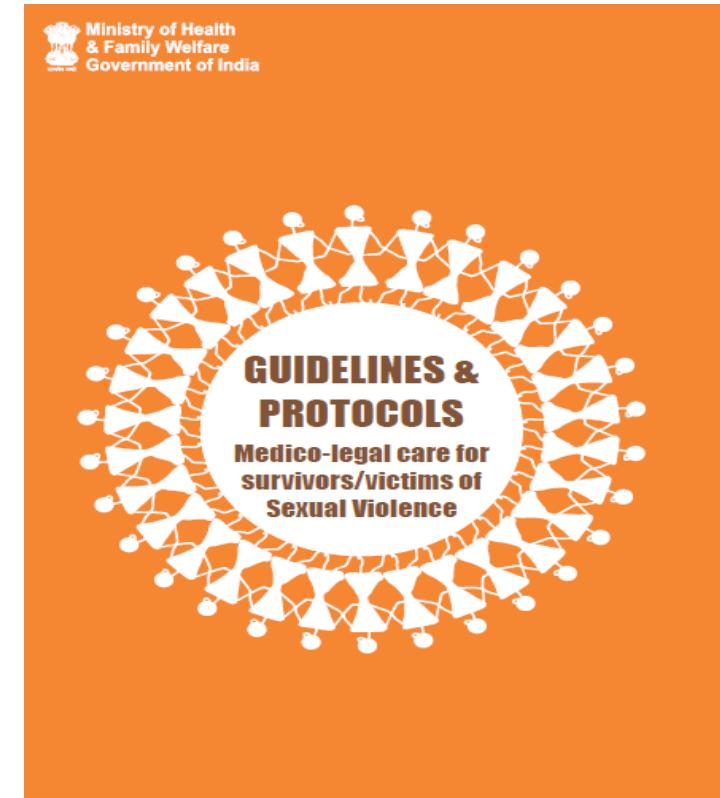
Medical Examination of Sexual Assault
Victim using Medical Kit - Demonstration

By Dr. Ponnuru Malathi,

Professor, Govt. Maternity Hospital,
Petlaburz, Hyderabad.

Women Safety Wing, Telangana Police

<https://youtu.be/bt7ll15Vpo4>





REGISTRATION and PRE – TEST

POST-TEST and FEEDBACK



**Certificate will be awarded to participants on course attendance
and submission of Registration, Pre-Test, Post-Test, Feedback**