

## **Pediatric-Specific Forensic Exam Kits**

**SART Listserv  
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**Issue:** Pediatric-specific medical forensic exam kits.

**Background:** Would Defense Attorneys raise legal issues if steps are omitted for pediatric patients compared to adult medical forensic exam kits?

### **Pediatric forensic exam kit providers:**

- TriTech Forensic Evidence Collection makes kits according to requests
- They will develop a Child Exam kit to your specifications:  
<http://www.tritechusa.com/kits/sexualassault.htm>
- Some facilities use kits from their state crime labs, but they are usually "Adult" and adapted for child cases.

### **State specific protocols for pediatric medical forensic exams:**

#### ***Massachusetts:***

<http://depts.washington.edu/hcsats/pdf/guidelines/Child%20guidelines%201.12.04.pdf>

#### ***California:***

#### **Governor's Office of Emergency Services**

#### **Medical Report: Suspected Child Physical Abuse And Neglect Examination**

[http://www.cmtc.tv/pdf/oes\\_forms/oes\\_900\\_form.pdf](http://www.cmtc.tv/pdf/oes_forms/oes_900_form.pdf)

#### **California (Santa Rosa)**

- Developed a sexual assault evidence kit from TriTech, in conjunction with local law enforcement agencies and our county crime lab for our Pediatric Sexual Assault Nurse Examiner team (approximately 50+ children for sexual assault assessments/month and 25 children for physical abuse assessments and consultations/month).
- Differs from typical adult evidence collection kits. It has less cotton tipped applicators for vaginal and anal evidence collection and it doesn't contain hair standard samples (this could be a hot topic for many municipalities).
- Pulled head or pubic hair not routinely collected. The reasoning is two fold; 1) Most patients are pre-pubertal, 2) 90-95 % of patients that are pubertal, shave their pubic hair.
- We don't eliminate evidence collection steps per se, but alter collection techniques from children v. adolescent/adult. We use a plan A, plan B, principle. Plan A is vaginal evidence swabs, but if that is not possible for whatever reason, we go on to Plan B, and collect genital swabs. As penetration of the female sexual organ of prepubertal girls is typically rubbing/touching of the genitals and does not usually involve vaginal penetration, this is an acceptable collection technique in our community. The examiner documents site of evidence collection - vaginal, cervical or genital. Current research shows

semen, sperm and/or DNA evidence is rarely found on prepubertal children after 24 hours and is found on the child's underwear or clothing/linens more often than on genital/vaginal swabs. (1,2)

- If there is significant hymeneal or vaginal trauma, the patient is most likely going to be sedated (general anesthesia or conscious sedation) for repair and vaginal swabs can be collected at that time. This helps to ensure a pain-less/pain-free exam.
- No issues in court with pediatric-specific kits. Most defense attorneys attack the credibility of the child victim's family (outcry witnesses), the SANE and/or law enforcement.
- As long as the SANE/Medical Professional who collected the evidence is well trained and follows current evidence-based, research-cited practice procedures, there typically would not be a question.
- Children are not little adults and do need to be treated somewhat differently. Of course, chain of custody is routinely a question.

## **Maryland**

- Creating a pediatric kit based on Massachusetts' model.

### **Online Resources**

*Forensic Evidence Findings in Prepubertal Victims of Sexual Assault: PEDIATRICS Vol. 106 No. 1 July 2000, pp. 100-104*

<http://pediatrics.aappublications.org/cgi/reprint/106/1/100>

### ***Pediatrics, Child Sexual Abuse***

<http://www.emedicine.com/emerg/topic369.htm> (Bibliography at the bottom is very useful)

### ***Evaluating for Chile Sexual Abuse:***

<http://www.aafp.org/afp/20010301/883.html>

### ***Child Abuse Evaluation and Treatment for Medical Providers:***

<http://www.childabusemd.com/physical-exam/evidence-collection.shtml>

### ***Childrens Hospital Cincinnati Ohio: Child Abuse Identification Toolkit for Professionals***

<http://www.cincinnatichildrens.org/svc/alpha/c/child-abuse/tools/presentations.htm>

### ***Medical Findings in Child Sexual Abuse***

<http://www.cincinnatichildrens.org/NR/rdonlyres/09491D30-FBEB-4C10-A394-4AE1665A63DB/0/sexabuse.ppt>

### **Child Sex Abuse Resources**

<http://www.prevent-abuse-now.com/stats.htm>

### **Articles:**

1. Christian CW, Lavelle JM, De Jong AR, Loiselle J, Brenner L, Joffe M. Forensic evidence findings in prepubertal victims of sexual assault. *Pediatrics*. 2000; 106 (pt 1):100-104.

2. Young KL, Jones JG, Washington T, Simpson P, Casey PH. Forensic laboratory evidence in sexually abused children and adolescents. *Arch Pediatr Adolesc Med*. 2006; 160:585-588.