

**HERMANTOWN POLICE DEPARTMENT
GENERAL ORDER**

SUBJECT: SEXUAL ASSAULT INVESTIGATIONS BY PATROL OFFICERS	NUMBER: 204.00
	EFFECTIVE DATE: 05/18/93
	AMENDED DATE: 11/18/2015 02/25/2019 02/16/2021
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I. PURPOSE

The purpose of this policy is to provide employees with guidelines for responding to reports of sexual assault. The Hermantown Police Department will strive:

- A. To afford maximum protection and support to victims of sexual assault or abuse through a coordinated program of law enforcement and available victim services with an emphasis on a victim centered approach.
- B. To reaffirm peace officers' authority and responsibility to conducting thorough preliminary and follow up investigations and to make arrest decisions in accordance with established probable cause standards;
- C. To increase the opportunity for prosecution and victim services.

Initial officers responding to a sexual assault usually provide the bulk of the evidence for the prosecution. Therefore, a thorough and accurate initial investigation is essential.

II. POLICY

It is the policy of the Hermantown Police Department to recognize sexual assault as a serious problem in society and to protect victims of sexual assault by ensuring its peace officers understand the laws governing this area. Sexual assault crimes are under-reported to law enforcement and the goal of this policy is in part to improve victim experience in reporting so that more people are encouraged to report.

All employees should take a professional, victim-centered approach to sexual assaults, protectively investigate these crimes, and coordinate with prosecution in a manner that helps restore the victim's dignity and autonomy. While doing so, it

shall be this agency's goal to decrease the victim's distress, increase the victim's understanding of the criminal justice system and process, and promote public safety.

Peace officers will utilize this policy in response to sexual assault reported to this agency. This agency will aggressively enforce the laws without bias and prejudice based on race, marital status, sexual orientation, economic status, age, disability, gender, religion, creed, or national origin.

III. DEFINITIONS

For purpose of this policy, the words and phrases in this section have the following meaning given to them, unless another intention clearly appears.

A. **Consent:** As Defined by Minn. Stat. 609.341, which states:

- a. Words or overt actions by a person indicating a freely given present agreement to perform a particular sexual act with the actor. Consent does not mean the existence of a prior or current social relationship between the actor and the complainant or that the complainant failed to resist a particular sexual act.
- b. A person who is mentally incapacitated or physically helpless as defined by Minn. Stat. 609.341 cannot consent to a sexual act.
- c. Corroboration of the victim's testimony is not required to show lack of consent.

B. **Child or Minor:** a person under the age of 18.

C. **Family and Household Member:** As defined in Minn. Stat. 518B.01 Subd.2 to include:

- a. Spouses or former spouses;
- b. Parents and children;
- c. Persons related by blood;
- d. Persons who are presently residing together or who have resided together in the past;
- e. Persons who have a child in common regardless of whether they have been married or have lived together at any time;
- f. A man and women if the woman is pregnant and the man is alleged to be the father, regardless of whether they have been married or have lived together at any time; and
- g. Persons involved in a significant romantic or sexual relationship

D. **Medical Forensic Examiner:** The health care provider conducting a sexual assault medical forensic examination.

- E. **Sexual Assault:** A person who engages in sexual contact or penetration with another person in a criminal manner as identified in Minn. Stat. 609.342 to 609.3451.
- F. **Sexual Assault Nurse Examination (SANE):** An examination of a sexual assault patient by a health care provider, ideally one who has specialized education and clinical experience in the collection of forensic evidence and treatment of these patients.
- G. **Victim Advocate:** A Sexual Assault Counselor defined by Minn. Stat. 595.02 Subd.1(k) and/or Domestic Abuse Advocate as defined by Minn. Stat. 595.02 Subd.1(1) who provide confidential advocacy services to victims of sexual assault and domestic abuse. Victim advocates as defined provide coverage in all counties in Minnesota. Minnesota Office of Justice Programs (MN OJP) can assist departments in locating their local victim advocacy agency for the purposes outlined in this policy.
- H. **Victim Centered:** A victim-centered approach prioritizes the safety, privacy and well-being of the victim and aims to create a supportive environment in which the victim's rights are respected and in which they are treated with dignity and respect. This approach acknowledges and respects a victim's input into the criminal justice response and recognizes victims are not responsible for the crimes committed against them.
- I. **Vulnerable Adult:** Any person 18 years of age or older who:
 - a. Is a resident inpatient of a facility as defined in Minn. Stat. 626.5572 Subd.6;
 - b. Receives services at or from a facility required to be licensed to serve adults un sections 245A.01 to 245A.15, except that a person receiving outpatient services for treatment of chemical dependency or mental illness, or one who is committed as a sexual psychopathic personality or as a sexually dangerous person under chapter 253B, is not considered a vulnerable adult unless the person meets the requirements of clause (4);
 - c. Receives services from a home care provider required to be licensed under sections 144A.43 to 144A.482; or from a person or organization that exclusively offers, provides, or arranges for personal care assistance services under the medical assistance program as authorized under sections 256B.0625 Subd. 19a, 256B.0651 to 256B0654, and 256B.0659; or
 - d. Regardless of residence or whether any type of service is received, possesses a physical or mental infirmity or other physical, mental, or emotional dysfunction:

- i. That impairs the individual's ability to provide adequately for the individual's own care without assistance, including the provision of food, shelter, clothing, health care, or supervision; and
- ii. Because of the dysfunction or infirmity and the need for assistance, the individual has an impaired ability to protect the individual from maltreatment.

IV. PROCEDURES

A. Communications Personnel Response / Additional Actions by Responding Officers

Communications personnel and/or responding officer(s) should inform the victim of ways to ensure critical evidence is not lost, to include the following;

1. Suggest that the victim not bathe, or clean him or herself if the assault took place recently.
2. Recommend that if a victim needs to relieve himself or herself, they should collect urine in a clean jar for testing, and should avoid wiping after urination.
3. Asking the victim to collect any clothing worn during or after the assault and if possible, place in a paper bag, instructing the victim not to wash the clothing (per department policy).
4. Reassure the victim that other evidence may still be identified and recovered even if they have bathed or made other physical changes.

The Department shall withhold public access to information that would reveal the identity of a victim or alleged victim of criminal sexual conduct (Minn. Stat. 13.82 Subd.17(b) and Minn. Stat. 611A.021).

B. Initial Officer Response

Whenever possible two officers should respond to a sexual assault call. One officer should interview the victim while the other officer assumes responsibility for preserving the scene, gathering evidence, searching for the suspect, and notifying support persons for the victim.

The initial officer interviewing the victim assesses the victim's need for emergency medical treatment and provides, or arranges for, transportation to a hospital for medical treatment.

When responding to a scene involving a sexual assault, officers shall follow standard incident response procedures. In addition, when interacting with victims, officers shall do the following:

1. Recognize that the victim experienced a traumatic incident and may not be willing or able to immediately assist with the criminal investigation.
2. The officer shall attempt to determine the location/jurisdiction where the assault took place.
3. Explain the reporting process including the roles of the first responder, investigator, and anyone else with whom the victim will likely interact during the course of the investigation.
4. Officers are encouraged to connect the victim with local victim advocates as soon as possible. Inform the victim that there are confidential victim advocates available to address any needs they might have and to support them through the criminal justice system process. Provide the victim with contact information for the local victim advocate. Upon victim request the officer can offer to contact local victim advocate on behalf of the victim.
5. Ask about and document signs and symptoms of injury, to include strangulation. Officers shall attempt to obtain a signed medical release from the victim.
6. Ensure that the victim knows they can go to a designated facility for a forensic medical exam. Offer to arrange for transportation for the victim.
7. Identify and attempt to interview potential witnesses to the sexual assault and/or anyone the victim told about the sexual assault.
8. Request preferred contact information for the victim for follow-up.

C. Advocates

The program for Aid to Victims of Sexual Assault provides a 24 hours advocacy services to victims of sexual assault. These services are also available to family, parents, partners and other supportive persons of the victims, who will be referred to as secondary victims. These services include: providing support, crisis intervention, information and referral. These services can be provided on-site where the report is taking place, at the hospital or over the phone. It is always the victim's choice about whether or not they speak with an advocate.

In cases where the victim presents at or is taken to a Duluth area hospital, the ER personnel will call an advocate. In such cases, the officer should verify that an advocate has been called, if the hospital has not contacted an advocate it is the officer's responsibility to contact an advocate.

In rare cases where the victim is not seen at the hospital, the officer will explain the services provided by PAVSA advocates and the right of a victim (or

secondary victim) to speak with and advocate prior to conducting the preliminary interview, or to have on present if possible. If the victim chooses to have an advocate contacted, the officer will immediately contact the 24-hour crisis line. If the victim does not wish to have an advocate contacted at that time, the officer will provide a HPD Crime Victim Information Card with the PAVSA phone number circled to the victim.

D. Preliminary Interview of the Victim

The primary investigating officer has the responsibility of interviewing the victim and writing an initial report on the incident. The only exception to the initial interview is when the victim is under the age of 13, do not interview them (in these instances the primary officer will contact the juvenile investigator who will make arrangements for the child/victim to be interviewed at First Witness). Make sure that a statement is taken from whoever brought the child/victim to the hospital and/or reported the sexual assault.

The purpose of this interview is to obtain information concerning the basic elements of the crime, identify any and all witnesses, suspect(s), evidence, and crime scene(s). The officer shall also try and determine the relationship between the victim and suspect(s) to determine if the incident also meets the elements for a domestic violence crime. Pertinent information should be given to assisting squads as soon as possible.

The Hermantown Police Department recognizes that victims of sexual assault due to their age or physical, mental or emotional distress are better served by utilizing interview techniques and strategies that eliminate the duplication of interviews and use a question and answer interviewing format with questioning as nondirective as possible to elicit spontaneous responses.

The victim may be in crisis and experiencing post-traumatic stress disorder or rape trauma syndrome. The officer should allow the victim to speak freely and spontaneously. The officer should avoid using language of consensual sex or asking leading or suggestive questions. The victim's response to the trauma of a sexual assault shall not be used in any way to measure credibility. When drugs or alcohol are involved, the victim may have limited recollection or may be unable to give a complete account of the crime. Not knowing the details of what happened may exacerbate the trauma experienced by the victim. The officer should consider follow up interviews by investigations, if the victim is in great distress.

The Officer should begin the interview by explaining to the victim:

- What information is needed and why.
- The types of evidence that may be important to the investigation.

- The purpose of a SANE examination/evidence collection (to discover and treat any injuries and gather evidence for possible prosecution.
- Although the decision to prosecute can be made at a later time, evidence collection needs are immediate.

Questions to consider during the interview:

- How did you let the perpetrator know that you did not want to have sexual contact, including all physical, verbal and non-verbal action?
- How did the perpetrator let you know that they understood you did not want the sexual contact, including physical, verbal and non-verbal?
- What did you think was going to happen to you? How did you feel?
- Who is the first person you told, and how can we contact them?
- What is your relationship to the perpetrator?

The officer should consider the following when interviewing a sexual assault victim:

- Offer to have a confidential victim advocate present (if possible) if the victim would benefit from additional support during the process.
- Whenever possible, conduct victim interviews in person.
- Make an effort to conduct the interview in a welcoming environment.
- Let the victim share the details at his or her own pace.
- Recognize victims of trauma may have difficulty remembering incidents in a linear fashion and may remember details in days and weeks following the assault.
- After the initial interview, consider reaching out to the victim within a few days, after at least one sleep cycle to ask if they remember any additional details.
- Depending on the victim, additional interviews might be needed to gather additional information. Officer support from a victim advocate to the victim to help facilitate engagement with the investigative process and healing.
- Some victims do remember details vividly and might want to be interviewed immediately.
- During initial and subsequent victim interviews, officers should note the following information as victims share it, recognizing that a victim may not be able to recall all the details of the assault during a particular interview.
 1. Whether the suspect was known to the victim
 2. How long the victim knew the suspect

3. The circumstances of their meeting and if there is any indication of the use of drugs or alcohol to facilitate the sexual assault
4. The extent of their previous or current relationship
5. Any behavioral changes that led the situation from one based on consent to one of submission, coercion, fear, or force
6. Specific action, statements, and/or thoughts of both victim and suspect immediately prior, during, and after assault
7. Relevant communication through social media, email, text messages, or any other forms of communication

The officer should let the victim know that an investigator may contact them, but DO NOT provide a time frame for that contact.

E. Special Considerations—Minors and Vulnerable Adults/Domestic Abuse Victims

1. Minors and Vulnerable Adults

The Hermantown Police Department recognizes that certain victims, due to their age or a physical, mental, or emotional distress, are better served by utilizing interview techniques and strategies that eliminate the duplication of interviews and use a question and answer interviewing format with questioning as nondirective as possible to elicit spontaneous responses. Members of this agency will be alert for victims who would be best served by the use of these specialized interview techniques. Officers, in making this determination, should consider the victim's age, level of maturity, communication skills, intellectual capacity, emotional state, and any other observable factors that would indicate specialized interview techniques would be appropriate for a particular victim. When an officer determines that a victim requires the use of these specialized interview techniques, the officer should follow the guidance below.

- a. Officers responding to reports of sexual assaults involving these sensitive population groups shall limit their actions to the following:
 - i. Ensuring the safety of the victim;
 - ii. Ensuring the scene is safe;
 - iii. Safeguarding evidence where appropriate;
 - iv. Collecting any information necessary to identify the suspect; and
 - v. Addressing the immediate medical needs of individuals at the scene
- b. Initial responding officers should not attempt to interview the victim in these situations, but should instead attempt to obtain

basic information and facts about the situation, including the jurisdiction where the incident occurred and that a crime most likely occurred. Officers should seek to obtain this information from parents, caregivers, the reporting party, or other adult witnesses, unless those individuals are believed to be the perpetrators.

- c. Officers responding to victims with special considerations must comply with the mandated reporting requirements of Minnesota Statute Section 260E.06 and 626.557, as applicable. Officers investigating cases involving victims with special considerations should coordinate these investigations with the appropriate local human services agency where required. Any victim or witness interviews conducted with individuals having special considerations must be audio and video recorded whenever possible. All other interviews must be audio recorded whenever possible.

Not all sexual assaults of minor victims require a mandatory report to social services. This policy recognizes that in certain cases, notifying and/or the involvement of a parent/guardian pursuant to 260E.22 can cause harm to the minor and/or impede the investigation. Officers responding to the sexual assault of a minor victim that does not trigger a mandated report under Minnesota Statute Section 260E.06 should assess for the impact on the victim and the investigation if parents/guardians were notified before making a decision to involve them.

- d. Officers should obtain necessary contact information for the victim's caregiver, guardian or parents and where the victim may be located at a later time. Officers should advise the victim and/or any accompanying adult(s), guardians or caregivers that an investigating officer will follow up with information on a forensic interview.
- e. The officer should advise the victim's caregiver, guardian or parent that if the victim starts to talk about the incident they should listen to them but not question them as this may influence any future statements.

2. Victims of Domestic Abuse

Officers responding to a report of sexual assault committed against a family and household member must also follow the requirements and

guidelines in this agency's domestic abuse policy and protocol, in addition to the guidelines in this policy.

F. Protecting Victim Rights

1. Confidentiality: Officers should explain to victims the limitations of confidentiality in a criminal investigation and that the victim's identifying information is not accessible to the public, as specified in Minn. Stat. section 13.82, subd. 17(b)
2. Crime Victim Rights: Officers must provide the following information to the victim:
 - a. Crime victim rights and resource information required to be provided to all victims as specified by Minn. Stat. section 611A.02, subd. 2(b)
 - b. If the suspect is a family or household member to the victim, crime victim rights and resource information required to be provided to domestic abuse victims, as specified by Minn. Stat. section 629.341, subd. 3.
 - c. The victim's right to be informed of the status of a sexual assault examination kit upon request as provided for under Minn. Stat. section 611A.27, subd. 1.
 - d. Pursuant to Minn. Stat. 611A.26, subd. 1, no law enforcement agency or prosecutor shall require that a complainant of a criminal sexual conduct or sex trafficking offense submit to a polygraph examination as part of or a condition to proceeding with the investigation, charging or prosecution of such offense.
3. Other information: Officers should provide to the victim the agency's crime report/ICR number, and contact information for the reporting officer and/or investigator or person handling the follow up.
4. Language access: All officers shall follow agency policy regarding limited English proficiency.

G. Recording Victim and Witness Statements

Officers conducting all criminal investigations will, whenever possible, record oral victim and witness statements in lieu of written statements. It is not necessary to advise a victim or witness that their statement is being recorded. Officers should use discretion when determining the best method of recording depending on the circumstances of the event. For example with cases of domestic or sexual violence, a discrete and low profile approach to recording would be appropriate in an effort not to add to the distress the victim may already be experiencing. The interview shall be

audio recorded using the officer's Watchguard system and secondary digital recorder (ICrimeFighter). If the victim specifically requests a female officer to investigate, the Team Supervisor will be advised of the request. An attempt should be made to contact a Supervisor; however, in any event the investigating officer can initiate mutual aid.

H. Qualifying Domestic Violence Relationship

Recognizing the crossover between domestic violence and sexual assault allows us to have a more comprehensive victim centered response. Consider this co-occurrence when interviewing the victim. Begin by determining if there is a qualifying relationship (family or household members are defined in Minn. Sta. 518B.01 Subd.2) as you would in a domestic violence investigation, If it is a domestic relationship, then the Risk Question should be asked. Document in your report what the relationship is and if there is a history of domestic violence between the victim and the suspect.

I. Sexual Assault Nurse Examination (SANE)

1. Prior to the sexual assault nurse examination the investigating officer should do the following:
 - a. Ensure the victim understands the purpose of the sexual assault medical forensic exam and its importance to both their general health and wellness as well to the investigation. Officer assurance to the victim that they will not incur any out-of-pocket expenses for forensic medical exams and provide information about evidence collection, storage and preservation in sexual assault cases.
 - b. Provide the victim with general information about the procedure, and encourage them to seek further detail and guidance from the forensic examiner, health care professional, or a victim advocate. Officers and investigators cannot deny a victim the opportunity to have an exam.
 - c. Officers should be aware and if necessary, relay to victims who do not want to undergo an exam that there might be additional treatments or medications they are entitled to even if they do not want to have an exam done or have evidence collected. Victims can seek that information from a health care provider or a victim advocate. If possible, transport or arrange transportations for the victim to the designated medical facility.
 - d. Ask the victim for a signed release for access to medical records from the exam.

2. Officers should not be present during any part of the exam, including during the medical history.
3. Following the exam, evidence collected during the exam shall be handled according to the requirements of agency policy and Minn. Stat. 299C.106.

Time is critical in obtaining medical evidence from the victim. It is preferred and considered best evidence for all CSC victims to have a SANE exam. It has been determined that physical evidence may remain on/in the victim's body for up to 120 hours. If feasible, the victim should be advised to bring a change of clothes to the examination. The officer accompanies the victim to the hospital for a medical examination/collection of evidence.

If a pediatric victim is on a police hold, the responding officer may have to sign consent for the SANE exam.

In addition to the BCA Sexual Assault Evidence Collection Kit, the SANE will offer to collect the following testes for adult/adolescent victims:

- A urine sample for establishing the presence of chemicals either voluntarily ingested or given to the victim without their permission for BCA testing as necessary for the investigation.
- A blood sample for purposes of establishing blood alcohol level for BCA testing as necessary for the investigation.
- Officers should also ask medical personnel to collect a sample for ACID PHOSPHATASE TEST, as this is not part of the SEXUAL ASSAULT EVIDENCE COLLECTION KIT.

Sexual Assault Nurse Examiner's (SANE) personnel are available 24 at both Duluth Hospitals. Their responsibility is to collect, package and label physical evidence. They will obtain sufficient information from the victim to collect pertinent evidence. ****Note**** SANE will not perform an exam on a victim who is unable, due to intoxication or medical condition, to give consent. If a SANE is not available to respond to the hospital, it is the responsibility of the responding officer to collect evidence and photos from the victim where applicable.

SANE personnel package all evidence collected, including clothes, BCA kits and photographs, for release to police. The investigation officer transfers the evidence to the Hermantown Police Department and secures it in compliance with Department policy. It is not necessary for the officer to open the sealed evidence. The only exception to this would be items that need to be "dried" prior to sealing. A RELEASE FOR MEDICAL INFORMATION form should be completed at the hospital if possible.

The officer will collect the signed medical release form. The SANE exam report will be uploaded to Forensic Electronic Medical Records (FEMR) system by the SANE examiner.

J. Gathering and Preserving Evidence at the Scene

It is critical that the chain of custody of evidence be maintained by all personnel involved in evidence collection.

Not all sexual assault incidents will have identifiable scenes containing recoverable and/or timely evidence. When presented with an identifiable crime scene containing recoverable evidence the gathering and preservation of crime scene evidence will be performed by patrol officers. Generally speaking, patrol officers are expected to seize evidence such as bed sheets, clothing, articles left by the suspect, articles touched by the suspect, alcohol and/or drugs or their containers that may have been ingested by the suspect or victim, and other similar evidence. In addition, officers may do the following:

- Collect evidence regarding the environment in which the assault took place, including indications of isolation and soundproofing. The agency should consider utilizing their agency or county crime lab in obtaining or processing the scene where the assault took place. This should be in accordance to any/all other policies and procedures relating to evidence collections.
- Document any evidence of threats or any communications made by the suspect, or made on behalf of the suspect, to include those made to individuals other than the victim.
- In situations where it is suspected that drugs or alcohol may have facilitated the assault, officers should assess the scene for evidence such as drinking glasses, alcohol bottles or cans, or other related items.
- If the victim has declined or a medical forensic exam will not be conducted, the officer should obtain victim consent and attempt to take photographs of visible physical injuries, including any healing or old injuries. Victim should be given directions about how to document any bruising or injury that becomes evidence later after these photographs are taken.

A Supervisor and/or Investigator should be summoned to the scene in cases where evidence must be collected from immovable objects (walls and floors for example), where specialized collection techniques or equipment are needed, where spatter and other similar fluid evidence is to be documented and collected, in cases where the scene requires specific processing needs such as special photography, lighting, measurements and/or high profile cases.. If they are not available, gathering and preserving the crime scene evidence will be performed by Patrol Officers under the direction of the officer in charge of the scene. Supervisors may do the following:

- Assist officer investigating incidents of sexual assault when possible or if requested by an officer.
- Provide guidance and direction as needed.
- Review sexual assault reports to ensure that necessary steps were taken during initial response and investigations.

The Hermantown Police Department will maintain evidence for CSC 1st, 2nd and 3rd Degree for 9 years from the date of incident, CSC 4th and 5th Degree for 3 years from the date of incident. DNA evidence will be maintained permanently with the exception of a BCA kit that was sent to the BCA and returned. In that case, the BCA will keep a copy of the DNA profile on record. HPD will not be contacting victims at the conclusion of the maintenance of evidence, and no effort will be made to return evidence to victims. (exception would be made for items of value)

K. Reports

Each officer involved in the investigation should write individual reports of the initial investigation rather than writing a joint report. In the report, it is important for officers to avoid the use of ambiguous or qualified language, such as "alleged" victim, which may be used by a defense attorney at trial to imply that the officer did not believe the victim's story.

Reports should be as complete as possible but stated in the officer's own words rather than quoting the victim directly. Paraphrasing the victim's statement in the officer's own words is advised so that the victim will not appear to be lying when they cannot recall word for word what the officer was told.

A supervisor should ensure cases are reviewed on an on-going basis. The review process should include an analysis of:

- Case dispositions
- Decisions to collect evidence
- Submissions of evidence for lab testing
- Interviewing decisions

L. Contacting and Interviewing Suspects

Prior to contacting the suspect, officers should consider the following:

1. Conduct a background and criminal history check specifically looking for accusations, criminal charges, and convictions for interconnected crimes, especially crimes involving violence.
2. Consider conducting a pretext or confrontational call or messaging depending on jurisdictional statutes. Involvement of a victim should be based on strong consideration of the victim's emotional and physical state. A victim advocate should be present whenever to offer support.
3. When possible, an attempt would be made to interview the suspect in person.
4. In situations where suspects do not deny that a sexual act occurred, but rather assert that it was with the consent of the victim, officers should do the following:
 - a. Collect evidence of past communication, including but not limited to all relevant interaction (including social media) between the suspect and victim.
 - b. Identify events that transpired prior to, during, and after the assault in an effort to locate additional witnesses and physical locations that might lead to additional evidence.
5. For sexual assaults involving strangers, officers should focus investigative efforts on the collection of video, DNA, and other trace evidence used for analysis to identify the perpetrator (handle evidence collection per HPD Department Policy).

Forensic Examination and/or the Collection of Evidence from the Suspect.

Note: A suspect's forensic examination and/or the collection of evidence from a suspect may be done by either an investigating officer, Forensic Medical Examiner, or crime lab personnel.

1. Prior to or immediately after the preliminary suspect interview, photograph any injuries.
2. Determine whether a sexual assault medical forensic examination should be conducted.
3. Ask for the suspect's consent to collect evidence from their body and clothing. However, officers should consider obtaining a search warrant, with specific details about what evidence will be collected, and should be prepared in advance to eliminate the opportunity for the suspect to destroy or alter evidence if consent is denied.
4. During the suspect's sexual assault medical forensic examination, the officer or medical examiner should do the following:

- a. Strongly consider penile swabbing, pubic hair combings, appearance, scars, tattoos, piercings, and other identifiable marks;
- b. Collect biological and trace evidence from the suspects' body;
- c. Document information about the suspect's clothing, appearance, scars, tattoos, piercings, and other identifiable marks;
- d. Seize all clothing worn by the suspect during the assault, particularly any clothing touching the genital area;
- e. Document the suspect's relevant medical condition and injuries.

III. COMMENTS

Rescinds:	N/A
Standards Reference:	N/A
Statute/Ordinance Reference:	MN Statutes: 13.82 Subd.17(b), 144A.43-144A.482, 245A.01-245A.15, 253B, 256B.0625Subd.19(a), 256B.0651-256B.0654, 256B.0659, 299C.106, 518B.01 Subd.2, 595.02 Subd.1(k), 595.02 Subd.1 (1), 609.341, 609.342-609.345Subd.1, 611A.021, 626.5572 Subd.6
General Order Reference:	G.O. 122.00

BY AUTHORITY OF:

JAMES M. CRACE
Chief of Police