



# Information about your forensic medical examination (FME)

**This leaflet provides written information to support the explanation given to you by the doctor or nurse who you will see prior to undergoing a forensic medical examination, (FME). This may not cover all the questions you may have, so please ask the doctor or nurse any questions you have. It is your right to do so.**

## Consent and confidentiality

- The doctor/nurse must ask for your consent (agreement) before asking questions (taking a history), examining you and/or taking samples, e.g. swabs, mouth samples, urine, blood, hair. They will explain why the questions, examination or samples may be appropriate. Consent is your choice. You can say yes or no. If you need more time or information, please ask. You may have come for an FME, but you do not have to go ahead with it.



- You can agree to some of what is suggested, but you do not have to agree to everything. You can change your mind or withdraw your consent, at any time; for example, you might decide you do not want to have blood taken.
- For children and young people, the consent of the parent or carer may be needed, but in law, young people aged 16 years and older are assumed to have the ability (capacity) to make their own decisions. In an FME, there are medical, forensic and legal aspects to consider and it is advisable to have support and advice from a parent/carers, or other trusted adult. The doctor or nurse must always assess whether you understand the examination and its implications.
- Occasionally, the doctor/nurse may have concerns whether someone can consent; this may be temporary, e.g. because of tiredness, pain, or the effects of alcohol/drugs. They may suggest waiting and conducting the FME a little later. Sometimes, the lack of capacity may be more long-lasting or permanent and they will discuss with you, perhaps

relatives or carers, and professional colleagues, what is the most appropriate action and whether it is in the best interests of the individual to undertake the FME.

- Consent depends on having enough information about the examination, as well as what will happen to the samples and the information. For example, in a police investigation, information is shared with the police, forensic scientists, or lawyers; a statement for Court might be needed, or the doctor or nurse may need to go to Court. Information might be shared with others, e.g. a GP or a hospital doctor or nurse, or social care. If you consent to images being taken e.g. photographs of injuries, or intimate images of the 'private parts',

(breast, anal or genital area), the doctor/nurse will explain why these might be needed and how they are stored, or shared, if that is necessary.



- Although this does not happen very often, where an individual or another may be at risk of harm, the doctor/nurse has a duty to share information, even without consent. In an investigation into a serious crime, the police can apply for a Court order to disclose information.



## History and examination



- The doctor/nurse asks relevant questions (history); sometimes, extra questions may be needed for clarification. They will ask about other recent sexual activity.
- The questions will be about your physical health and your mental (psychological and emotional) health. They will include questions about any disability, medicines (prescribed and ones bought at the chemist or in shops), and drugs (both legal and illegal) which you may take.
- These questions will also help the doctor/nurse advise you about the medical and follow up care, which you might need.
- The doctor/nurse will explain why an examination may be needed, but you do not have to agree. If an 'intimate examination' is proposed, that is of the breast, or other private parts (genital or anal area), a chaperone would be offered; and you decide what examination takes place.

## Frequently asked questions

### Why have I been asked to give a sample of my DNA for elimination?

This is to assist the forensic scientists when testing the other samples. You may choose to provide a DNA sample or not. There are strict rules about how it is used and it cannot be searched against or be loaded onto the National DNA database. The elimination sample can only be used in the investigation of the incident which you have reported. It will normally be destroyed within 6 months. You can write to the police, to ask for your sample to be destroyed.



### Why do the police want my clothes?

Forensic evidence may be found on clothing, long after it has been lost from the body. Evidence may be transferred to clothing and may be found even after it has been washed. Evidence may be found on other items, e.g. toothbrushes, face wipes, tissues, nappies and sanitary pads and tampons. It is your choice whether you provide your clothes. The police will explain what may happen to the clothing and whether it will be returned.

### There are lots of samples, will they all be tested?

Usually the police or the forensic scientists decide this based on the individual circumstances of a case. For example, if enough information is obtained from testing one swab, it would not usually be necessary to test others. If someone thinks they were given drugs without their knowledge ('spiked' drink), a blood sample and urine samples might be taken, but not all tested.





## Frequently asked questions

**What happens to the samples if they are not tested, or not all of them are tested?**

The police will explain. Samples may be kept in case they are needed. If the case cannot be progressed, for example, the perpetrator (assailant) is not identified and charged, the samples are stored and may be reviewed and re-tested if new evidence becomes available or new techniques are developed at a later stage. In ordinary healthcare settings, biological samples and tissue cannot be stored indefinitely, as the law (Human Tissue Act), does not permit this. If samples are taken as evidence for a criminal investigation, the law does permit storage, the time may vary, depending on circumstances.

However, if the samples are taken without the police being involved, as in a non-police referral (n-PR), then they should be stored for no more than two years, and if not submitted to the police for testing, they should be destroyed. The doctor/nurse will discuss and explain what will happen to n-PR samples when asking for your consent.

**I hate blood tests and needles for injections, but I have loads of piercings and tattoos. I'm too frightened to have a blood sample.**

The doctor/nurse will explain why a blood sample is appropriate, but whether you have one is your choice. You don't have to give a reason if you say 'no'. Tattoos and piercings are not the same as having a blood test.



**I've had a bath or a shower. I've ruined the forensic evidence and the police won't be able to investigate what's happened to me.**



Please do not worry; after a sexual assault, most people will want to wash as soon as possible. Evidence may remain after washing and forensic samples are just one type of evidence. What you tell the police and the doctor/nurse, clothing and CCTV, are all types of evidence. The

doctor/nurse uses guidance, to help to decide what samples to take, even after washing.

**I was so shocked and frightened, I waited 2 days before reporting this to the police. Will the DNA evidence be gone by now?**

How long evidence may persist on or within the body, will depend on a number of factors. The doctor/nurse uses guidance to decide what samples might be taken. The police can and will still investigate a crime, many weeks, months or years after it happened, even when there may be no DNA-type evidence available.

**It was my partner who did this; and we'd had sex just the day before. I agreed to that sex, but not to this. Is an examination necessary?**

It is up to you whether or not you have an examination. Often, the police will ask you to have an examination, as securing the evidence as early as possible is important, especially if they have not yet interviewed your partner (the alleged assailant), about what happened.



## Frequently asked questions

**I had sex with my ex-partner 2 days ago. Why do I need to be asked about that? I don't want him to get into trouble; he's not done anything wrong.**

The doctor/nurse will explain, but it is important the forensic scientists have the relevant information, including recent intercourse. There may be two different types of semen and so two different DNA profiles. The scientists' job is to report on what is found and to interpret the findings. The doctor/nurse may find injuries, which occasionally (but not often) arise during consensual intercourse. It may affect the advice given, e.g. on the type of emergency contraception required.

**I've started my period, now. Can I still be examined? Will the evidence be lost?**

It is your choice whether you are examined; and while a period might make a difference to the persistence of evidence, an examination is still offered. Other samples may be of help, e.g. sanitary wear (towels, pads, liners, tampons), which might otherwise be thrown away. An examination means injuries can be noted (but there may be none) and medical and follow up care arranged.



**The man used a condom, so there won't be any evidence, anyway, will there?**

Even if a condom has been used, an examination is still offered. Other evidence may be collected, condoms may break, or be put on after some semen has already been released. Also, the doctor/nurse would make notes of any injuries, discuss and provide medical and follow up care for you.

**When will I get the results of the forensic samples?**

The doctor/nurse or the police will explain what may happen to the samples, and whether, if they are tested, you can be told the findings. Sometimes, the samples may not be tested. For example, in a sexual offence, if there is no dispute as to what took place, but the issue is whether the person consented, the samples may not be tested, as the results won't assist.

**I have 4 hours of time where I have no memory and I am sure my drink was spiked. Will the drug be found?**

It depends; some drugs may be broken down in the body quickly, so, there may be no trace of a drug by the time an individual becomes aware that something has happened. This is one reason why the police may ask for a urine sample, as 'early evidence', soon after the incident is reported.



Sometimes, an individual may have had an unexpected or unusual reaction to drinking, or it has interacted with another medicine he/she takes. Blood and/or urine samples are usually taken for alcohol and drug testing. For longer time intervals, a lock of hair may be collected and used for testing, but the hair is not taken until at least 4 – 6 weeks after the incident.

**I was so scared that I froze and didn't fight back. So, I've not got any bruises or scratches. No-one will believe me when I say I was raped, will they?**

The doctor/nurse knows from experience and research that many people who have been sexually assaulted or raped do not have injuries, either to the body or to the private parts (genital and anal area). They will explain that to you, and to others, with your consent. It is part of the role of the doctor/nurse to explain this to the police, lawyers and the Court.



## Frequently asked questions

**I've never had sex before, so I was a virgin; when I'm examined, they'll be able to see the injuries and confirm that, won't they?**

Even when someone has never had sex before, there may be no signs that sexual intercourse took place. The doctor/nurse will not comment on virginity, but would explain to you, and others, e.g. lawyers, the Court, why there may be no injury or signs that intercourse has taken place.

**I woke up in a strange bed and I am sure someone has had sex with me, even though I don't remember anything. Will the examination and tests confirm what happened?**

An examination may help the police investigation in finding what may have happened, but it is very unlikely the doctor/nurse will be able to comment at the end of the examination. They will explain the limits of the examination so that it is clear what you can expect from an examination. Please ask any questions you have. Sometimes the type of incident, or the time since it occurred, or the use of a condom, may mean there is no forensic (DNA type) evidence, but the police will still investigate.



**I had some cocaine about 12 hours before the incident; I've never had any before. I suppose that makes what happened my fault. And will I get into trouble with the police for using illegal drugs?**

Using any sort of drug, including alcohol or illegal drugs, does not mean you have agreed to anything else. The law is clear that consent has to be active and freely given, and the person is able (has the capacity) to consent.

The doctor/nurse asks about all types of drugs: those prescribed by a doctor or nurse, those from a chemist or a shop, alcohol and illicit drugs. Whether you disclose you have used cocaine is your choice. Evidence of that might already have been obtained (though not confirmed), if you have provided a urine sample. Giving complete information can assist the investigation. Whilst some drugs are broken down and eliminated from the body within a few hours/days, others, for example cannabis, may be identified in urine for up to 3-4 weeks after last use.

**I reported the incident and had the examination over two months ago and nothing has gone to Court. How much longer will it take?**

Testing samples, obtaining and preparing all the evidence ready for a Court case can take many months, even more than a year; please ask the police about this.



**My two young children were asleep upstairs when the neighbour came and attacked me; they didn't know anything about it. I am a good parent, so why do social services have to be told? I don't want that, because I'm worried they'll come and take my children away.**

The doctor/nurse and the police have a legal obligation (statutory duty) to make sure that children are safeguarded. In this situation, they must inform children's social care. Any contact social care make will be to ensure you and your children are safe, and to offer help, if needed; they know that most children are much happier, safer and better remaining with their parents.