



# Sexual Assault Evidence Collection Kit (2020)

South Carolina Law Enforcement Division (SLED)

Paper envelope containing SAK contents (dispose of this envelope once opened)



STATE OF SOUTH CAROLINA  
LAW ENFORCEMENT DIVISION

**SEXUAL ASSAULT  
EVIDENCE COLLECTION KIT**

# Toxicology Items



**For Crime Lab Personnel Only**

Lab Number: \_\_\_\_\_  
Item Number: \_\_\_\_\_

## TOXICOLOGY EVIDENCE

Victim Name or Anonymous ID #: \_\_\_\_\_

If this is an anonymous collection DO NOT label this envelope with the victim's name.

1) Place the following items in this envelope:  
\_\_\_\_\_ Toxicology Evidence Distribution Envelope  
\_\_\_\_\_ Urine sample (if collected)

2) Ensure this bag is sealed properly.

3) Place this bag in the plastic zip-style bag provided.

**PLACE BIOHAZARD LABEL HERE**

### Chain of Custody

FROM: \_\_\_\_\_  
PRINT NAME SIGNATURE DATE/TIME

TO: \_\_\_\_\_  
PRINT NAME SIGNATURE DATE/TIME

RE75C:TOXEV1 4/2020

101860

AFFIX EVIDENCE SEAL HERE

THEN INITIAL SEAL

VICTIM'S NAME: \_\_\_\_\_

TOXICOLOGY SECTION  
EVIDENCE DISTRIBUTION ENVELOPE  
*(Sexual Assault Victim)*

GRAY-STOPPERED BLOOD COLLECTION TUBE

FOR CRIME LAB PERSONNEL ONLY

SLED LAB NO.: \_\_\_\_\_

RE75C:TOXSE 1 4/2020

**TOXICOLOGY BLOOD SAMPLE**  
(GRAY STOPPERED TUBE)

VICTIM'S NAME: \_\_\_\_\_  
COLLECTED BY: \_\_\_\_\_  
DATE: \_\_\_\_\_ AND TIME: \_\_\_\_\_  
OF COLLECTION

WAS SAMPLE COLLECTED?  YES  NO  
IF NO, WHY NOT? \_\_\_\_\_

FOR CRIME LAB PERSONNEL ONLY

LAB NO.: \_\_\_\_\_  
ITEM NO.: \_\_\_\_\_

Place the labeled, gray stoppered tube into the bubble pack and place in bag

**TOXICOLOGY BLOOD SAMPLE**  
(GRAY STOPPERED TUBE)

VICTIM'S NAME: \_\_\_\_\_

COLLECTED BY: \_\_\_\_\_

DATE: \_\_\_\_\_ AND TIME: \_\_\_\_\_ <sup>am</sup> OF COLLECTION  
<sub>pm</sub>

WAS SAMPLE COLLECTED?  YES  NO

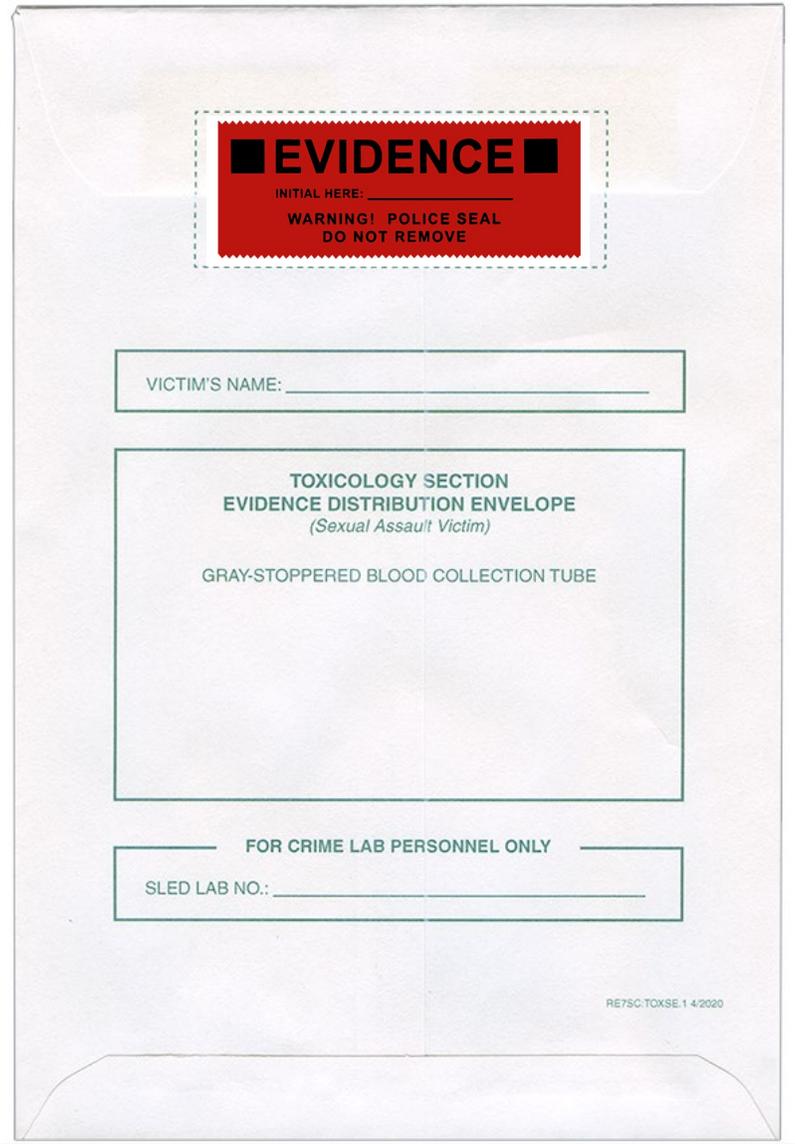
IF NO, WHY NOT? \_\_\_\_\_

2588 **FOR CRIME LAB PERSONNEL ONLY**

LAB NO.: \_\_\_\_\_

ITEM NO.: \_\_\_\_\_

Place plastic bag containing blood tube into the Toxicology Section Evidence Distribution Envelope, label with victim's name, and seal with evidence tape



**EVIDENCE**  
INITIAL HERE: \_\_\_\_\_  
WARNING! POLICE SEAL  
DO NOT REMOVE

VICTIM'S NAME: \_\_\_\_\_

**TOXICOLOGY SECTION  
EVIDENCE DISTRIBUTION ENVELOPE**  
*(Sexual Assault Victim)*

GRAY-STOPPERED BLOOD COLLECTION TUBE

**FOR CRIME LAB PERSONNEL ONLY**

SLED LAB NO.: \_\_\_\_\_

RE7SC:TOXSE.1 4/2020

Place the Toxicology distribution envelope and urine sample (if collected) into Toxicology Evidence bag and start chain of custody



For Crime Lab Personnel Only

Lab Number: \_\_\_\_\_

Item Number: \_\_\_\_\_

## TOXICOLOGY EVIDENCE

Victim Name or Anonymous ID #:

\_\_\_\_\_

If this is an anonymous collection DO NOT label this envelope with the victim's name.

- 1) Place the following items in this envelope:
  - \_\_\_\_\_ Toxicology Evidence Distribution Envelope
  - \_\_\_\_\_ Urine sample (if collected)
- 2) Ensure this bag is sealed properly.
- 3) Place this bag in the plastic zip-style bag provided.



### Chain of Custody

FROM:	_____	_____	_____
	PRINT NAME	SIGNATURE	DATE/TIME
TO:	_____	_____	_____
	PRINT NAME	SIGNATURE	DATE/TIME
TO:	_____	_____	_____
	PRINT NAME	SIGNATURE	DATE/TIME
TO:	_____	_____	_____
	PRINT NAME	SIGNATURE	DATE/TIME
TO:	_____	_____	_____
	PRINT NAME	SIGNATURE	DATE/TIME



RE75C:TOXEV.1 4/2020

# DNA Items



For Crime Lab Personnel Only

Lab Number: \_\_\_\_\_

Item Number: \_\_\_\_\_

## DNA EVIDENCE

**Victim Name or Anonymous ID #:**

\_\_\_\_\_

If this is an anonymous collection DO NOT label this envelope with the victim's name.

- Place the following items in this envelope:
 

PLACE  
BIOHAZARD  
LABEL  
HERE

  - \_\_\_\_\_ DNA Evidence Distribution Envelope
  - \_\_\_\_\_ Underwear (if collected)
- Ensure this envelope is sealed properly and add evidence tape across seal.
- Place this envelope in the plastic zip-style bag provided.

### Chain of Custody

<b>FROM:</b> _____	PRINT NAME	SIGNATURE	DATE/TIME
<b>TO:</b> _____	PRINT NAME	SIGNATURE	DATE/TIME
<b>TO:</b> _____	PRINT NAME	SIGNATURE	DATE/TIME
<b>TO:</b> _____	PRINT NAME	SIGNATURE	DATE/TIME
<b>TO:</b> _____	PRINT NAME	SIGNATURE	DATE/TIME



RE75C:DNAENV.1 4/2020

### DEBRIS COLLECTION

VICTIM'S NAME: \_\_\_\_\_

COLLECTED BY: \_\_\_\_\_

DATE: \_\_\_\_\_ AND TIME: \_\_\_\_\_ am OF COLLECTION  
pm

WAS SAMPLE COLLECTED?  YES  NO

IF NO, WHY NOT? \_\_\_\_\_

---

FOR CRIME LAB PERSONNEL ONLY

LAB NO.: \_\_\_\_\_

ITEM NO.: \_\_\_\_\_

AFFIX EVIDENCE SEAL HERE

THEN INITIAL SEAL

VICTIM'S NAME: \_\_\_\_\_

DNA SECTION  
EVIDENCE DISTRIBUTION ENVELOPE  
(Sexual Assault Victim)

KNOWN DNA STANDARD - BUCCAL SWABS ENVELOPE  
SUSPECTED BODY FLUID ENVELOPE  
SUSPECTED SALIVA ENVELOPE  
VAGINAL/PENILE SWABS ENVELOPE  
ORAL SWABS ENVELOPE  
RECTAL SWABS ENVELOPE  
FINGERNAIL SWABS ENVELOPES  
PUBIC HAIR COMBINGS ENVELOPE  
MISCELLANEOUS MATERIALS ENVELOPE

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FOR CRIME LAB PERSONNEL ONLY

SLED LAB NO.: \_\_\_\_\_

RE75C:DSE.1 4/2020

### UNDERWEAR (PLACE IN KIT BOX)

VICTIM'S NAME: \_\_\_\_\_

COLLECTED BY: \_\_\_\_\_

DATE: \_\_\_\_\_ AND TIME: \_\_\_\_\_ am OF COLLECTION  
pm

WAS SAMPLE COLLECTED?  YES  NO

IF NO, WHY NOT? \_\_\_\_\_

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FOR CRIME LAB PERSONNEL ONLY

LAB NO.: \_\_\_\_\_

ITEM NO.: \_\_\_\_\_

**SUSPECTED BODY FLUID**

Crime Lab Use Only  
Do not write in this area.

Victim's Name \_\_\_\_\_

Collector's Initials \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Was sample collected?  Yes  No

If no, why not? \_\_\_\_\_

RE75C:SBF.1 2/2020

**RECTAL SWABS**

Crime Lab Use Only  
Do not write in this area.

Victim's Name \_\_\_\_\_

Collector's Initials \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Was sample collected?  Yes  No

If no, why not? \_\_\_\_\_

RE75C:RS.1 2/2020

**MISCELLANEOUS MATERIALS**

Crime Lab Use Only  
Do not write in this area.

Victim's Name \_\_\_\_\_

Collector's Initials \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Was sample collected?  Yes  No

If no, why not? \_\_\_\_\_

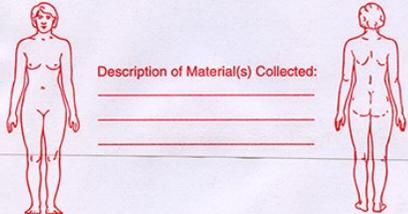
RE75C:MM.1 2/2020

Description of Material(s) Collected:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



RE75C:MMBK.1 2/2020

**PUBIC HAIR COMBINGS**

Crime Lab Use Only  
Do not write in this area.

Victim's Name \_\_\_\_\_

Collector's Initials \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Was sample collected?  Yes  No

If no, why not? \_\_\_\_\_

RE75C:PHC.1 2/2020

Description of Material(s) Collected:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



RE75C:MMBK.1 2/2020

**ORAL SWABS**

Crime Lab Use Only  
Do not write in this area.

Victim's Name \_\_\_\_\_

Collector's Initials \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Was sample collected?  Yes  No

If no, why not? \_\_\_\_\_

RE75C:OS.1 2/2020



**SUSPECTED SALIVA**

Any non-genital area where the suspect may have licked, kissed, or bitten the victim. Note on the back of this envelope the location of sample collection.

Allow swabs to air dry thoroughly before packaging.

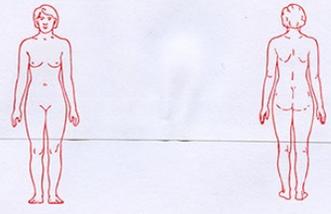
Victim's Name \_\_\_\_\_

Collector's Initials \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Was sample collected?  Yes  No

If no, why not? \_\_\_\_\_

RE75C:SS.1 4/2020



RE75C:SSBK.1 2/2020

DNA evidence collection envelopes with no changes

Changes to DNA evidence collection envelopes:

Known DNA standard-required

Vaginal/Penile

Fingernail swabs

**KNOWN DNA STANDARD - BUCCAL SWABS**  
**COLLECTION OF THIS SAMPLE IS REQUIRED**

Crime Lab Use Only  
Do not write in this area.

Victim's Name \_\_\_\_\_

Collector's Initials \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

RE7SC: KDNA.1 4/2020

**FINGERNAIL SWABS - LEFT**

Crime Lab Use Only  
Do not write in this area.

Victim's Name \_\_\_\_\_

Collector's Initials \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Was sample collected?  Yes  No

If no, why not? \_\_\_\_\_

RE7SC: FSL.1 2/2020

**VAGINAL/PENILE SWABS**

Crime Lab Use Only  
Do not write in this area.

Victim's Name \_\_\_\_\_

Collector's Initials \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Was sample collected?  Yes  No

If no, why not? \_\_\_\_\_

RE7SC: VPS.1 2/2020

**FINGERNAIL SWABS - RIGHT**

Crime Lab Use Only  
Do not write in this area.

Victim's Name \_\_\_\_\_

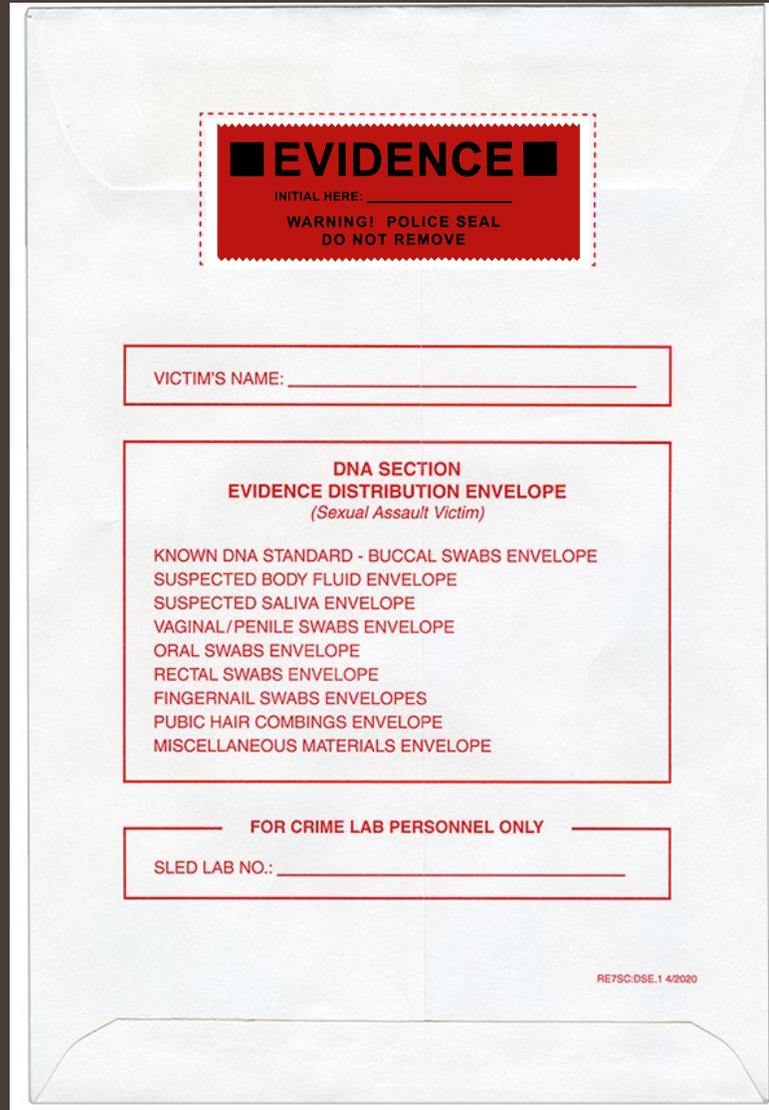
Collector's Initials \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Was sample collected?  Yes  No

If no, why not? \_\_\_\_\_

RE7SC: FSR.1 2/2020

Place all DNA evidence into the DNA Section Evidence Distribution Envelope, label with victim's name, and seal with evidence tape



**EVIDENCE**  
INITIAL HERE: \_\_\_\_\_  
WARNING! POLICE SEAL  
DO NOT REMOVE

VICTIM'S NAME: \_\_\_\_\_

**DNA SECTION  
EVIDENCE DISTRIBUTION ENVELOPE**  
*(Sexual Assault Victim)*

KNOWN DNA STANDARD - BUCCAL SWABS ENVELOPE  
SUSPECTED BODY FLUID ENVELOPE  
SUSPECTED SALIVA ENVELOPE  
VAGINAL/PENILE SWABS ENVELOPE  
ORAL SWABS ENVELOPE  
RECTAL SWABS ENVELOPE  
FINGERNAIL SWABS ENVELOPES  
PUBIC HAIR COMBINGS ENVELOPE  
MISCELLANEOUS MATERIALS ENVELOPE

FOR CRIME LAB PERSONNEL ONLY

SLED LAB NO.: \_\_\_\_\_

RE75C:DSE.1 4/2020

DNA  
Distribution  
Envelope, debris  
collection bag,  
and underwear  
bag will be  
placed into the  
large nylon  
envelope labeled  
DNA Evidence

**DEBRIS COLLECTION**

VICTIM'S NAME: \_\_\_\_\_  
COLLECTED BY: \_\_\_\_\_  
DATE: \_\_\_\_\_ AND TIME: \_\_\_\_\_ <sup>am</sup> OF COLLECTION  
<sub>pm</sub>

WAS SAMPLE COLLECTED?  YES  NO  
IF NO, WHY NOT? \_\_\_\_\_

750A **FOR CRIME LAB PERSONNEL ONLY**

LAB NO.: \_\_\_\_\_  
ITEM NO.: \_\_\_\_\_

**EVIDENCE**  
INITIAL HERE: \_\_\_\_\_  
**WARNING! POLICE SEAL  
DO NOT REMOVE**

VICTIM'S NAME: \_\_\_\_\_

**DNA SECTION  
EVIDENCE DISTRIBUTION ENVELOPE**  
*(Sexual Assault Victim)*

KNOWN DNA STANDARD - BUCCAL SWABS ENVELOPE  
SUSPECTED BODY FLUID ENVELOPE  
SUSPECTED SALIVA ENVELOPE  
VAGINAL/PENILE SWABS ENVELOPE  
ORAL SWABS ENVELOPE  
RECTAL SWABS ENVELOPE  
FINGERNAIL SWABS ENVELOPES  
PUBIC HAIR COMBINGS ENVELOPE  
MISCELLANEOUS MATERIALS ENVELOPE

**FOR CRIME LAB PERSONNEL ONLY**

SLED LAB NO.: \_\_\_\_\_

RE75C-DSE.1 4/2000

**UNDERWEAR**  
(PLACE IN KIT BOX)

VICTIM'S NAME: \_\_\_\_\_  
COLLECTED BY: \_\_\_\_\_  
DATE: \_\_\_\_\_ AND TIME: \_\_\_\_\_ <sup>am</sup> OF COLLECTION  
<sub>pm</sub>

WAS SAMPLE COLLECTED?  YES  NO  
IF NO, WHY NOT? \_\_\_\_\_

750B **FOR CRIME LAB PERSONNEL ONLY**

LAB NO.: \_\_\_\_\_  
ITEM NO.: \_\_\_\_\_

Add the DNA Section envelope, debris collection bag, and underwear bag to this envelope and start chain of custody



For Crime Lab Personnel Only

Lab Number: \_\_\_\_\_

Item Number: \_\_\_\_\_

## DNA EVIDENCE

Victim Name or Anonymous ID #:

\_\_\_\_\_

If this is an anonymous collection DO NOT label this envelope with the victim's name.

1) Place the following items in this envelope:

\_\_\_\_\_ DNA Evidence Distribution Envelope

\_\_\_\_\_ Underwear (if collected)



2) Ensure this envelope is sealed properly and add evidence tape across seal.

3) Place this envelope in the plastic zip-style bag provided.

### Chain of Custody

FROM: \_\_\_\_\_

PRINT NAME SIGNATURE DATE/TIME

TO: \_\_\_\_\_

PRINT NAME SIGNATURE DATE/TIME



Place the Toxicology and DNA outer packages with completed chains of custody into the transport container

The image displays three evidence collection forms from the South Carolina Law Enforcement Division (SLED). The forms are arranged in a row, with the middle one slightly offset behind the others. Each form includes a SLED logo, a 'Chain of Custody' section, and a barcode.

**Toxicology Evidence Form:**

- Logo: SLED 1974
- Section: **TOXICOLOGY EVIDENCE**
- Field: Victim Name or Anonymous ID #:
- Text: If this is an anonymous collection DO NOT label this envelope with the victim's name.
- Instructions:
  - Place the following items in this envelope:
    - \_\_\_\_\_ Toxicology Evidence Distribution Envelope
    - \_\_\_\_\_ Urine sample (if collected)
  - Ensure this bag is sealed properly.
  - Place this bag in the plastic zip-style bag provided.
- Section: **Chain of Custody**
- Table:

FROM:	PRINT NAME	SIGNATURE	DATE/TIME
TO:	PRINT NAME	SIGNATURE	DATE/TIME
TO:	PRINT NAME	SIGNATURE	DATE/TIME
TO:	PRINT NAME	SIGNATURE	DATE/TIME
TO:	PRINT NAME	SIGNATURE	DATE/TIME
- Barcode: 10-982
- Text: NOTE TOXICOL 1-2020

**Sexual Assault Evidence Form:**

- Logo: SLED 1974
- Section: **Sexual Assault Evidence**
- Text: Place the following in this container:
- Instructions:
  - SEAL EDNA Evidence envelope
  - SEAL EToxicology Evidence bag
  - Sexual Assault Evidence Collection Protocol
- Section: **IMPORTANT:**
- Text:
  - This container is only for transport of individually sealed DNA and Toxicology evidence and the completed protocol. This container should NOT be sealed and may be discarded when evidence and paperwork is removed.
  - If this is an anonymous collection, protect the identity of the victim by placing the Sexual Assault Evidence Collection Protocol in an envelope prior to placing it in this container.

**DNA Evidence Form:**

- Logo: SLED 1974
- Section: **DNA EVIDENCE**
- Text: For Crime Lab Personnel Only
- Fields: Lab Number: \_\_\_\_\_, Case Number: \_\_\_\_\_
- Text: Victim Name or Anonymous ID #:
- Text: If this is an anonymous collection DO NOT label this envelope with the victim's name.
- Instructions:
  - Place the following items in this envelope:
    - \_\_\_\_\_ DNA Evidence Distribution Envelope
    - \_\_\_\_\_ Underwear (if collected)
  - Ensure this envelope is sealed properly and add evidence tape across seal.
  - Place this envelope in the plastic zip-style bag provided.
- Section: **Chain of Custody**
- Table:

FROM:	PRINT NAME	SIGNATURE	DATE/TIME
TO:	PRINT NAME	SIGNATURE	DATE/TIME
TO:	PRINT NAME	SIGNATURE	DATE/TIME
TO:	PRINT NAME	SIGNATURE	DATE/TIME
TO:	PRINT NAME	SIGNATURE	DATE/TIME
TO:	PRINT NAME	SIGNATURE	DATE/TIME
- Barcode: 10-982
- Text: NOTE DNA 1-1-2020

Add SANE  
report and zip  
close transport  
container. Do  
**NOT** seal with  
evidence tape



## Sexual Assault Evidence

Place the following in this container:

- 1) SEALED DNA Evidence envelope
- 2) SEALED Toxicology Evidence bag
- 3) Sexual Assault Evidence Collection Protocol

### **IMPORTANT:**

- This container is only for transport of individually sealed DNA and Toxicology evidence and the completed protocol. This container should NOT be sealed and may be discarded when evidence and paperwork is removed.
- If this is an anonymous collection, protect the identity of the victim by placing the Sexual Assault Evidence Collection Protocol in an envelope prior to placing it in this container.

Anonymous Kits  
should be  
labeled with  
Anonymous ID #



For Crime Lab Personnel Only

Lab Number: \_\_\_\_\_

Item Number: \_\_\_\_\_

## TOXICOLOGY EVIDENCE

Victim Name or Anonymous ID #:

If this is an anonymous collection DO NOT label this envelope with the victim's name.

- 1) Place the following items in this envelope:
  - \_\_\_\_\_ Toxicology Evidence Distribution Envelope
  - \_\_\_\_\_ Urine sample (if collected)
- 2) Ensure this bag is sealed properly.
- 3) Place this bag in the plastic zip-style bag provided.

PLACE  
BIOHAZARD  
LABEL  
HERE

### Chain of Custody

FROM:	_____	_____	_____
	PRINT NAME	SIGNATURE	DATE/TIME
TO:	_____	_____	_____
	PRINT NAME	SIGNATURE	DATE/TIME
TO:	_____	_____	_____
	PRINT NAME	SIGNATURE	DATE/TIME
TO:	_____	_____	_____
	PRINT NAME	SIGNATURE	DATE/TIME
TO:	_____	_____	_____
	PRINT NAME	SIGNATURE	DATE/TIME



101860

RE75C-TOXEV.1 4/2020



For Crime Lab Personnel Only

Lab Number: \_\_\_\_\_

Item Number: \_\_\_\_\_

## DNA EVIDENCE

Victim Name or Anonymous ID #:

If this is an anonymous collection DO NOT label this envelope with the victim's name.

- 1) Place the following items in this envelope:
  - \_\_\_\_\_ DNA Evidence Distribution Envelope
  - \_\_\_\_\_ Underwear (if collected)
- 2) Ensure this envelope is sealed properly and add evidence tape across seal.
- 3) Place this envelope in the plastic zip-style bag provided.

PLACE  
BIOHAZARD  
LABEL  
HERE

### Chain of Custody

FROM:	_____	_____	_____
	PRINT NAME	SIGNATURE	DATE/TIME
TO:	_____	_____	_____
	PRINT NAME	SIGNATURE	DATE/TIME
TO:	_____	_____	_____
	PRINT NAME	SIGNATURE	DATE/TIME
TO:	_____	_____	_____
	PRINT NAME	SIGNATURE	DATE/TIME
TO:	_____	_____	_____
	PRINT NAME	SIGNATURE	DATE/TIME



101860

RE75C-DNAENV.1 4/2020

For anonymous kits, SANE report may be sealed in an envelope (not provided) and place into transport container



## Sexual Assault Evidence

Place the following in this container:

- 1) SEALED DNA Evidence envelope
- 2) SEALED Toxicology Evidence bag
- 3) Sexual Assault Evidence Collection Protocol

### IMPORTANT:

- This container is only for transport of individually sealed DNA and Toxicology evidence and the completed protocol. This container should NOT be sealed and may be discarded when evidence and paperwork is removed.
- If this is an anonymous collection, protect the identity of the victim by placing the Sexual Assault Evidence Collection Protocol in an envelope prior to placing it in this container.

# Important Information for the Collector is included in SAK



## **Important Information for the Collector:**

*This is abbreviated information and is not intended to be comprehensive instructions for collection of the SLED Sexual Assault Evidence Collection Kit.*

Detailed collection instructions, the SLED Sexual Assault Examination Protocol, and other required forms are maintained under the "Forensic Services" section at <http://www.sled.sc.gov>.

When collection is complete, place a copy of the Sexual Assault Examination Protocol in the zip-style plastic bag along with the sealed DNA Evidence envelope and the Toxicology Evidence envelope.

It is strongly encouraged that a blank master copy of the current version of all forms and instructions be maintained in the event that internet is not available when needed. Please check the SLED web site periodically for updated versions of these forms.

### **When items are not collected:**

Please check 'no' on the envelope for "Was sample collected?" and do **NOT** seal the envelope. It is not necessary to return unused swabs.

### **Complete protocol paperwork and information on envelopes:**

Check either the 'no' or 'yes' box on ALL evidence envelopes and mark protocol paperwork appropriately.

### **Collecting Body Fluid swabs and Miscellaneous Materials:**

- Always indicate which type of sample is suspected (saliva, semen, blood, hair, etc.).
- Mark the diagram on the back of the envelope to indicate where the sample was collected.
- Written descriptions are also helpful (left thigh, right breast, etc.).

### **Additional envelopes/collections:**

Please do **NOT** collect additional samples or swabs unless there are extraordinary circumstances. The number of swabs provided per envelope is sufficient for analysis.

### **Patient Information Labels:**

Please do **NOT** place patient labels on sample envelopes in such a manner that information is obscured.

### **Packaging damp/wet items:**

Dry ALL wet items completely before packaging (condoms, tampons, sanitary napkins, etc.). Packaging items wet may affect our ability to obtain DNA results.

**NOTE:** Preparation of smears is no longer required or recommended; therefore, the glass slides and plastic slide holder are not included in this kit.

# Protocol and Instructions found at [sled.sc.gov](http://sled.sc.gov) in the Forensic Services section

## SLED Sexual Assault Evidence Collection Kit Forms and Information

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Sexual assault evidence collection protocols, instructions, and other forms and information are no longer included in the SLED Sexual Assault Evidence Collection Kit box, and are instead now posted here. This will allow for increased ability to update and expand instruction when necessary without having to involve an external vendor. You will find that these forms are the same or similar to those formerly found in the kit box.

It is strongly recommended that each facility print a master copy of each form, so that in the event that internet access or this site is not available when needed, evidence collection is not delayed.

If you have any questions or concerns regarding the forms below, please contact the SLED Forensic DNA Casework Department at (803) 896-7383 Monday through Friday 08:30am to 05:00pm. If necessary, we can be reached at (803) 737-9000 during non-business hours.

1. [SLED Sexual Assault Examination Protocol](#)
2. [SLED Sexual Assault Evidence Collection Kit Instructions](#)
3. [SLED Sexual Assault Examination Protocol – NEW KIT 08.2020](#)
4. [SLED Sexual Assault Evidence Collection Kit Instructions – NEW KIT 08.2020](#)
5. [SLED Sexual Assault Evidence Collection Kit - Important Information for the Collector](#)
6. [SLED Date Rape Drug Supplemental Instructions](#)
7. [DCVC SAP Billing Claim Form](#)
8. [DCVC SAP Medical Release Protocol Form](#)
9. [Notice of Change - SOVA to DCVC](#)
10. [SCCADVASA SA Member Program List](#)

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<https://www.sled.sc.gov/forensics.html>