

LOM01 – Practices for the Examination of Evidence

Table of Contents

1. Background
2. Definitions
3. Scope
4. Responsibilities
5. Practices
6. Documentation
7. References

1. Background

- 1.1. To establish the practices for documenting the examination of evidence to conform to the requirements of the Department of Forensic Sciences (DFS) Forensic Science Laboratory (FSL) *Quality Assurance Manual*, the accreditation standards under ISO/IEC 17025:2005, and any supplemental standards.

2. Definitions

- 2.1. For purposes of this document, the following terms shall have the designated meanings:

DFS: Department of Forensic Sciences

DOM: Departmental Operations Manual

FSL: Forensic Science Laboratory

SOP: Standard Operating Procedures

3. Scope

- 3.1. These practices apply to the FSL personnel who are involved in the examination of evidence.

4. Responsibilities

- 4.1. An **Analyst** will:

4.1.1. Ensure that the appropriate examinations, as designated by the FSL Director or Laboratory Manager, are conducted.

- 4.1.2. When necessary, communicate with the other analysts to determine if additional examinations need to be performed.
 - 4.1.3. Notify the FSL Director or Laboratory Manager when additional examinations not originally requested are needed. This request should also be documented on the *Activity Communication Log*.
 - 4.1.4. Ensure that the work product is accurate and inclusive of all pertinent information to support a conclusion.
 - 4.1.5. Ensure that the supporting documentation is accounted for in its totality and properly labeled.
 - 4.1.6. Initial entries on examination documentation.
 - 4.1.7. Prepare a *Report of Examination* as to the results of the examinations.
 - 4.1.8. Ensure that the integrity of the evidence is maintained.
- 4.2. The **Laboratory Manager** or designee will:
- 4.2.1. Review contributor's requests upon receipt of the case information, which includes the case submission information, chain of custody, and evidence.
 - 4.2.2. Ensure that the case submission information contains necessary information, including contributor contact information, evidence items submitted, and case details.
 - 4.2.3. Initiate contact with the contributor to fill any voids in the submitted information.
 - 4.2.4. Ensure that the laboratory has the capabilities and resources to meet the requirements and requests of the contributor.
 - 4.2.4.1. When laboratory capabilities and/or resources require outsourcing of tests, advise the customer in writing.
 - 4.2.5. Confer with the contributor if the requested examinations differ from the laboratory's capabilities and resolve the discrepancy.
 - 4.2.6. Assign cases to analysts and designate the appropriate examinations. The information will be provided to the analysts through a *Schedule of Analysis*.
 - 4.2.7. Prepare a *Discontinuation of Analysis* when a request for examination has been canceled and no examination has been initiated.

5. Practices

5.1. Examination Process

- 5.1.1. The analyst assigned to the case will conduct the appropriate examinations, as designated by the *Schedule of Analysis*, and will follow the applicable standard operating procedures. If an analyst identifies an additional examination(s) that may be probative, the analyst will notify the Laboratory Manager, or designee. Any significant deviations from the contributor's request will be communicated to the Laboratory Manager or designee. This communication will be documented in the *Activity Communication Log* and the *Schedule of Analysis* will be updated to reflect the change.
- 5.1.2. Any methods or procedures applied to the examination of evidence will be validated according to the *DOM04 – Practices for Validating Technical Procedures*.
- 5.1.3. FSL practices, policies and procedures will be followed to preserve the integrity of the evidence. Analysts are responsible for maintaining effective separation between incompatible activities to prevent cross-contamination.
- 5.1.4. Upon completion of the examinations, results will be communicated in a *Report of Examination* according to the *LOM02 – Practices for Case Documentation and Report Writing*.

5.2. Discontinuing/Cancellation of Examinations

- 5.2.1. If an analyst is instructed to discontinue examinations after they have been initiated, the affected analyst will determine the appropriate stopping point in the testing process. All results will be furnished to the contributor in a *Report of Examination* prepared by the analyst.
- 5.2.2. If examinations have not commenced on additional items that were submitted prior to the cancellation request, the additional items of evidence will not be examined. All results will be furnished to the contributor in a *Report of Examination* or *Discontinuation of Analysis* prepared by the analyst.
- 5.2.3. If a request for examination has been canceled and no examinations have been initiated, a *Discontinuation of Analysis* will be written by the Laboratory Manager or designee indicating that the request for examination has been canceled and that the evidence will be returned to the appropriate party. At a minimum, the *Discontinuation of Analysis* will include the individual's name who canceled the request and the corresponding date.

- 5.2.3.1. All cancellation instructions and the name of the person who canceled the request will be documented on the *Activity Communication Log* and the *Schedule of Analysis* will be updated to reflect the change.

5.3. Subdividing Evidence

- 5.3.1. There may be times during the examination process that an item of evidence needs to be subdivided. Subdividing an item occurs when an item not initially noted during the inventory process needs to be uniquely identified. An analyst may subdivide an item as necessary.

5.3.2. When an evidence item is subdivided, the analyst may choose a format that allows the subitems to be uniquely identified. Examples of acceptable formats used to identify the subdivision(s) are as follows:

5.3.2.1. Item number, decimal point, new sequential number

- 5.3.2.1.1. Example: for an evidence item identified as item 1, the subdivided item number is item 1.1

5.3.2.2. Item number, dash, new sequential number

- 5.3.2.2.1. Example: for an evidence item identified as item 1, the subdivided item number is item 1-1

5.3.2.3. Item number, sequential letter, decimal point (or dash), new sequential number

- 5.3.2.3.1. Example: for an evidence item identified as item 1, the subdivided item number is item 1A.1 (or 1A-1)

5.3.2.4. Item number, (abbreviated) description/descriptor, decimal point (or dash), new sequential number

- 5.3.2.4.1. Example: for an evidence item consisting of a dress, identified as item 1, the subdivided item number is item 1drs.1 (or 1drs-1)

- 5.3.3. If the subdivided evidence item(s) require a significantly different analytical/testing method from the original evidence item, then the *Schedule of Analysis* will need to be updated to reflect the subdivided evidence item and new analysis. If the subdivided evidence item(s) do not require a modification to the *Schedule of Analysis* from the original evidence item, then the *Schedule of Analysis* does not need to be updated.

5.3.4. If an analyst needs to identify different components of one item and subdividing is not appropriate, the analyst may identify those components as necessary.

5.4. Secondary Evidence

5.4.1. Secondary evidence is a work product derived from an examination process. It is not an individual item submitted by a contributor and, therefore could not have been assigned an item identifier through the inventory process. (e.g., DNA extracts)

5.4.2. Secondary evidence may be returned to the contributor unless it is consumed during the examination.

5.4.3. When returning secondary evidence to the contributor, a detailed list of what is being returned will be recorded in chronological order on the *Chain-of-Custody Log*.

5.4.3.1. The final disposition of the secondary evidence will be included in the *Report of Examination*.

5.4.4. When retaining secondary evidence in the laboratory, a detailed list of what is being retained and where it is being retained will be recorded in chronological order on the *Chain-of-Custody Log*.

5.4.4.1. The retention of the secondary evidence will be reflected in the disposition of evidence section of the *Report of Examination*.

5.5. Initialing and Labeling Evidence

5.5.1. Each item, where practicable, will be labeled with the item identifier.

5.5.2. Persons directly examining and/or processing an item of evidence will place their initials and the current date directly on the evidence, where practicable, or its proximal container.

5.5.3. See the *DOM10 – Evidence Handling Procedures* for additional information regarding the labeling of evidence.

5.6. Case File Documentation

5.6.1. All case-related work will be contemporaneously documented at or near the time of testing and retained in the case file. Refer to *LOM02 – Practices for Case Documentation and Report Writing* for specifics.

5.6.2. In the event a request for examination is canceled, all case-related documentation completed up to that point will be retained in the case file.

- 5.6.3. Handwritten administrative and examination documents will be prepared in ink, not pencil. Computer generated notes are acceptable.
- 5.6.4. Examination documentation will be generated in accordance with the accepted policies and procedures of the laboratory. Examination notes will include observations, data and calculations. These notes will be identifiable to the specific examination performed.
- 5.6.5. Abbreviations and notations are acceptable if they are readily comprehensible to a technical or administrative reviewer and clearly documented. A list of abbreviations will be maintained in the *FSL Quality Assurance Manual: Appendix A*.
- 5.6.6. The case number for which data was generated shall be appropriately recorded when data from multiple cases is recorded on a single printout.
- 5.6.7. Every effort will be made to avoid having information printed on the back of documents in the case file. However, when information is recorded on the front and back of an examination document, each side will be numbered as an individual page and initialed and labeled with the case number (and date if technical documentation).
- 5.6.8. When standards and controls are specified in a procedure, the examination documentation will reflect the unique identifier(s).
- 5.6.9. The *LOM02 – Practices for Case Documentation and Report Writing* defines that which is considered administrative and examination documentation.
- 5.6.10. Casework documentation will be filed according to the *LOM02 - Practices for Case Documentation and Report Writing*.

5.7. Evidence Storage

- 5.7.1. It is the responsibility of the analyst who has custody of the evidence to ensure that the integrity of each item is maintained by protecting it from loss, cross-transfer, contamination, or deleterious change.
- 5.7.2. Evidence will be properly sealed in a container and labeled with at least the case/item number(s) prior to storage.
- 5.7.3. Evidence that is not being examined will be stored in a secured, controlled access area.
- 5.7.4. See the *DOM10 – Evidence Handling Procedures* for additional information regarding the storage of evidence.

5.8. Applying a Proper Seal

- 5.8.1. A proper seal prevents loss, cross-transfer, or contamination while ensuring that attempted entry into the container is detectable. A proper seal may include a heat seal, tamper evident tape seal, or a lock with, at a minimum, the date the seal was applied and the initials of the person creating the seal being placed across the seal onto the container, when possible.
 - 5.8.2. If more than one piece of tape is used to create a proper seal, each piece used will, at a minimum, be initialed and dated.
- 5.9. During an Active Examination
- 5.9.1. See the *DOM10 – Evidence Handling Procedures* for information regarding handling of the evidence during active examinations.

6. Documentation

- 6.1. In addition to the case file documents generated when a case is received and during the subsequent examination process (refer to Section 6 of *LOM02 – Practices for Case Documentation and Report Writing* for this list), during routine processing the following record may be generated and retained in the laboratory case files:
 - 6.1.1. Memo for outsourcing

7. References

- 7.1. *ISO/IEC 17025 – General Requirements for the Competence of Testing and Calibration Laboratories*, International Organization for Standardization, Geneva, Switzerland (current revision).
- 7.2. *Forensic Quality Services Supplemental Requirements for Forensic Testing Including FBI QAS, FQS ANSI-ASQ Accreditation Board, Tampa, FL* (current revision)
- 7.3. *ASCLD/LAB-International® Supplemental Requirements for the Accreditation of Forensic Science Testing and Calibration Laboratories*, American Society of Crime Laboratory Directors/Laboratory Accreditation Board, Garner, NC (current revision).
- 7.4. *Quality Assurance Standards for Forensic DNA Testing Laboratories*, Federal Bureau of Investigation, (current revision).

7.5. *DOM04 – Practices for Validating Technical Procedures* (current revision).

7.6. *DOM10 – Evidence Handling Procedures* (current revision).

7.7. *LOM02 – Practices for Case Documentation and Report Writing* (current revision).

7.8. *Forensic Science Laboratory Quality Assurance Manual* (current revision)

7.9. *Unit-specific Quality Assurance Manual* (current revision)

7.10. *Unit Standard Operating Manuals* (current revisions)