



Idaho SANE/SART Update

... improving access to standardized care
of the sexual assault patient in the state
of Idaho



Introducing



Cari Whitson has joined ISP as our second SANE/SART Coordinator. She has over 20 years of nursing experience and is excited to help support forensic nursing in Idaho! She began her career as an ER nurse going on to become a supervisor of the medical/surgical unit, labor and delivery and the ER. For the last few years, she has worked in public health.

Her time spent working in the ER gave her a passion for helping victims of crime and a desire to become a SANE nurse. She is very excited for the opportunity to work at ISP and is looking forward to the challenges of learning to become a SANE/SART Coordinator.

Cari and her husband Tom have 3 daughters and 4 grandsons. Camping, fishing and side-by-side rides, especially with the grandkids, is her favorite way to spend free time.

Please join us in welcoming Cari; she can be reached at cari.whitson@isp.idaho.gov or on her business cell, at 986-266-1577.

And Announcing ...

After five years, I (Deb) will be retiring from ISP on November 21, 2025. I have enjoyed my time in this role immensely and the decision to retire was not an easy one, but my family wants to see more of me, and with three new great-grandbabies coming this year (which will bring my count of greats to 13!!) it really is time. The role will continue to function with Cari and whoever replaces me ... hint, hint ... if you've ever considered a highly autonomous role that can impact nursing on a state-wide basis you might consider this role.

Questions? Reach out by email (Deborah.wetherelt@isp.idaho.gov) or phone (208-615-1620) and I'll be glad to share.

Strangulation Manual

Its coming, we swear!!

A large group of multi-disciplinary professionals has worked for a year on an addendum to the *Idaho Response to Sexual Assault Guidelines* and we are VERY pleased to announce that we are expecting it to be available to you in July 2025! We will send the addendum out to everyone on this mailing list and encourage you to share it far and wide!!



Evidence Pearls

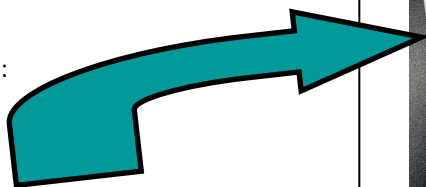


Evidence Review — The Basics

We are delighted to have many new SANEs in Idaho and thought it might be time to review some of the basics of evidence collection.

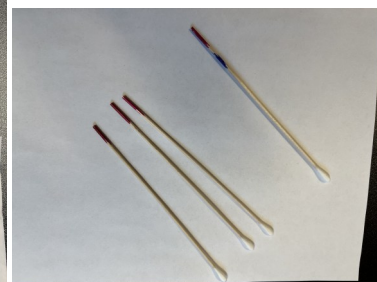
- FOUR dry swabs for all body cavities (mouth, vagina, anus)
- TWO damp swabs for ALL other collection sites, regardless of size
- Wear PPE and change gloves for collection of each site.
- Color-code the handles and envelopes for double accuracy
- Swabs must dry for a minimum of 60 minutes before being put into evidence envelopes
- If you drop a swab (gasp!!) after you have swabbed with it—KEEP IT! Mark the handle with a second color and package it separately. For example, if you dropped one vaginal swab and you had colored the handle red, add a line of another color to the swab and dry it. Package it in it's own envelope and mark the envelope "Vaginal 2: swab dropped on floor". The remaining vaginal swabs would be packed together as "Vaginal 1".

Example:



If your patient has limited, or no, memory of the sexual assault how do you know what to collect for evidence? We recommend collecting from the sites of "usual" contact, including:

- Peri-oral (around the mouth)
- Oral
- Neck
- Bilateral breasts (one sample)
- Abdomen (may have semen)
- External Genitalia
- Vagina
- Anus



Welcome!

After Scott Baggett's retirement (yay, Scott!) Steve Barker stepped into the ED Manager role and assumed leadership for the SANE program at Minidoka Memorial in Rupert.

Brittany Ramirez and Jennifer Bailey are co-sharing the Manager of Forensic Nursing role at Kootenai Health in Coeur d'Alene until a permanent manager is found.

Shanna Angel is the nursing manager of the newly formed Blaine SAFE Program in Hailey ... in addition to her personal anesthesia business! (Seems so many of us wear multiple hats, doesn't it?)

Gayla Tweedy is spearheading the creation of a new SANE program at Benewah Community Hospital; she is hosting a SANE-A class there in October and sits on the newly formed Benewah County SART.

We are Nurses ... We Provide Healthcare

If you've taken one of Deb's 40-hour SANE-A classes you know how strongly she stresses that we are nurses who provide healthcare - a July 2024 Idaho Supreme Court ruling re-emphasized that.

In a case in which a SANE-trained RN cared for a patient who had been assaulted the nurse testified (guided, of course, by the questions from both prosecution and defense attorneys) that she had examined the patient for a "dual purpose", to gather "medical" and "forensic evidence on a stated assault". Further questioning focused almost entirely on the forensic aspect of the exam, leading the court to rule "in sum, there was no evidence offered that demonstrated how the statements (the patient) made during the (joint) interview pertained to a medical purpose. Such testimony was necessary to meet the foundational requirements of Rule 803(4)(A) and (B)".**

The nurse could only answer questions that she was asked and the attorneys appeared to have erred (in the court opinion) in not admitting (or focusing on) the medical aspects of the exam completed by the RN. The court said "The State could have supported (the nurse's) testimony by offering (the patient's) physical assessment, the audio recording of (the nurse's) questioning, and more specific testimony from (the nurse), but it failed to do so".

How do we prepare for court then? I would offer that we need to understand that our ONLY role in forensics is to collect *patient requested evidence for the emotional well-being of the patient.* Offering the patient all choices during an exam, including evidence collection, is medical care — allowing the patient to choose to have evidence collection (or not) restores autonomy to them, which is a first step in healing from trauma.

When we do trial prep with attorneys we need to speak to the need to ensure that questioning focuses on the fact that the medical forensic exam is fully *medical* in nature including any collection of forensic evidence. The medical indication for evidence collection is to begin the restoration of autonomy for healing. We turn evidence over to law enforcement because they "own" evidence.

It is similar to nurses drawing blood; technically, that is a hospital lab's responsibility but we may do the draw for the benefit of the patient. Does it benefit the lab? Yes, they get the sample without sending a phleb to draw, but the nurse drew for the benefit of the patient, NOT the benefit of the lab.

We are nurses, we provide healthcare ... a true statement medically, and it is important that we help the criminal justice system understand that. The nurse in this case did NOTHING wrong, it appears the focus of the attorneys' questions did not make it clear that the medical forensic exam, in its entirety, is a medical exam.

**Rule 803 pertains to allowing medical personnel testify to what they see/hear/do during a medical examination; i.e. medical hearsay.

2025 SANE-A Classes

August 4-8	Moscow	Sept. 15-19	Preston
Oct. 6-10	Bonnars Ferry	Oct. 20-24	Saint Maries



To register send an email to forensic. Nursing@isp.idaho.gov with this info:

Class you wish to attend	Name and Mailing Address	Credentials (RN, BSN, etc.)
Email & phone	Organization/Dept you work	RN License #

Congratulations!!

Jennifer Bailey passed her SANE-P certification exam!!

Jennifer has been an RN over 11 years and a Forensic Nurse Examiner for the last two-and-a-half years with Kootenai Health in Coeur d'Alene. She has a passion for forensic nursing and plans to obtain her GFN (Generalist Forensic Nurse through the Academy of Forensic Nursing) next.

Her long-term plans are to become a Nurse Practitioner, and since becoming a FNE, has decided to specialize in Forensics once she completes schooling.

Jennifer is part of the team that recently restarted the local SART team; the team decided to expand the SART into a SART+ and will review cases for all adult victims of crime, not just sexual assault.

Jennifer is also a Board Member of the local advocacy center, Safe Passage — she is a busy woman!



Ordering SAECKs and Tox Kits

SAECKs are ordered at this email:

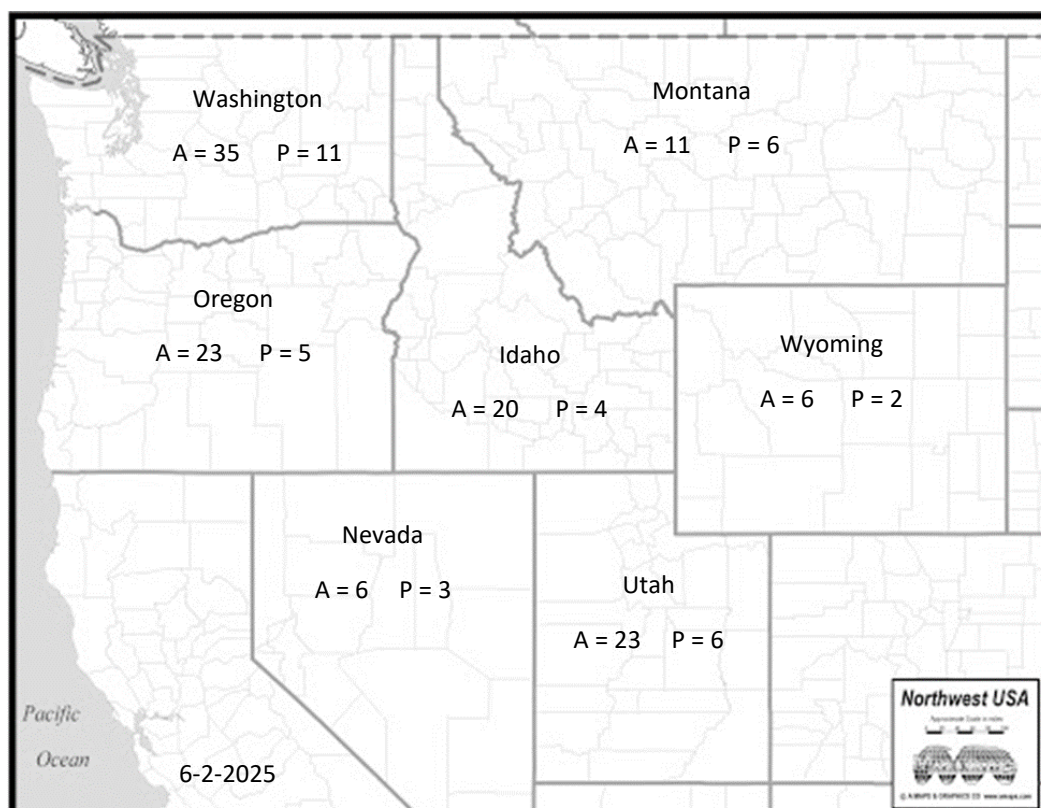
D3lab@isp.idaho.gov

Tox kits are ordered at your local State Lab:

Meridian: D3lab@isp.idaho.gov

Pocatello: D5lab@isp.idaho.gov

Coeur d'Alene: D1lab@isp.idaho.gov



Certified SANEs in the Pacific Northwest

We need more of us!



Valor Hospital Secures an IWCF Grant to Strengthen SANE Program

Valor Health is proud to announce that we have been awarded a \$29,205K grant from the Idaho Women's Charitable Foundation (IWCF) in support of our Sexual Assault Nurse Examiner (SANE) program. This generous funding represents an investment in compassionate, trauma-informed care for survivors of sexual assault in our rural health community.

The IWCF grant will directly enhance our ability to provide specialized training for nurses, expand on-call SANE coverage, provide much needed equipment, and improve access to forensic medical services. By strengthening the foundation of our SANE program, we are ensuring that survivors receive the expert care and advocacy 24/7 that they deserve for both adult and pediatric support.

This achievement is a testament to the dedication of our team and our ongoing commitment to addressing the needs of some of Gem County's most vulnerable patients. We are deeply grateful to the IWCF for recognizing the importance of this work and for partnering with us to make a lasting impact.

Together, we are building a safer, more responsive community one step, and one survivor, at a time.

Submitted by Kathy Prindle, MSN, RN; Executive Director of Clinical Services, Valor Health, Emmett, ID ..



Kathy Prindle, Exe. Director of Clinical Services



The Valor Health SANE Team in Emmett, ID



Billie Osterhoudt, Acute Care Manager

Statute of Limitations Associated with Sexual Assault in Idaho

Prosecutor Tessie Buttram and Judge John Dinger (Ada County) have shared that there is NO STATUTE OF LIMITATIONS for rape ... BUT, a misdemeanor sexual battery of an adult has a statute of limitation of one year from the date of the crime. While we, as nurses, do not know what charge may be assessed against the perpetrator, we need to be able to tell our patients that if penile penetration did not occur they will need to speak with law enforcement in less than a year if they think they may want to press charges. They CAN still have an anonymous kit collected, but if there was not penile penetration the evidence would not be used after a year.

Senate Bill 1199

We have been asked to collect reports of concerns with patient care since the passage of the Parental Rights Bill (no medical care for a minor without parental/guardian consent). If you know of a time when care was delayed or negatively impacted due to difficulties with parental consent please send a brief summary of that care (no names or other HIPAA info, please). While we will share the information with legislators we will NOT share where it is from ... you remain anonymous!!

Send info to forensic.Nursing@isp.idaho.gov