

**MIDLAND MEMORIAL HOSPITAL ALLIED HEALTH PROFESSIONALS
GUIDELINES FOR PERFORMING AS A
SEXUAL ASSAULT NURSE EXAMINER (SANE)**

I. DEFINITION

The Sexual Assault Nurse Examiner (S.A.N.E.) is a registered nurse who has been specially trained to provide comprehensive care to sexual assault patients, who demonstrates competency in conducting a forensic exam and testifies to their findings in a court of law. The Sexual Assault Nurse Examiner practices **under the supervision of the Medical Director of the Sexual Assault Program.**

II. QUALIFICATIONS

A Sexual Assault Nurse Examiner must meet the following qualifications to be considered for appointment to the Allied Health Professional staff:

- Current RN licensure in Texas.
- Able to apply principles of asepsis and infection control.
- Professional liability/malpractice insurance coverage issued by a recognized company and a type and in an amount equal to or greater than the limits established by the governing board.
- Basic Cardiac Life Support (minimum).
- Current TB screening (required upon initial application and at reappointment), and if applicable, one-time mask fit-testing.
- Completed training requirements by the Office of the Attorney General to be certified in state of Texas.

III. DESCRIPTION OF DUTIES

The following are duties the Sexual Assault Nurse Examiner may perform under the direction of a physician:

- Conduct forensic exam;
- Provide a compassionate and sensitive approach;
- Provide a timely medical/forensic examination with more complete evidence collection;
- Provide a consistent care-giver throughout the exam;
- Provide referral for follow-up care and counseling; and
- Provide expertise for effective courtroom testimony;
- Follow the American Nurses Association Standards of Clinical Nursing practice;
- Follow Standards of Forensic Nursing Practice.

IV. ORIENTATION

These Allied Health Professionals must be oriented to Midland Memorial Hospital's Policies and Procedures of the department or unit to which they will be assigned and complete MMH's Allied Health orientation.

Practitioner's Printed Name

Supervising Physician Printed Name

Practitioner's Signature

Supervising Physician's Signature

Section Chief / Department Chair

Date