

STEP 5 HEAD/ORAL EXAMINATION

Record all findings of exam using diagrams, legend, and a consecutive numbering system.

Follow instructions on Envelopes 5 and 9 for Evidence Collection.

Patient Identification Label

Use this diagram to document any injuries to the head/oral cavity and indicate sample types collected and locations of collection.

Diagram A - Head

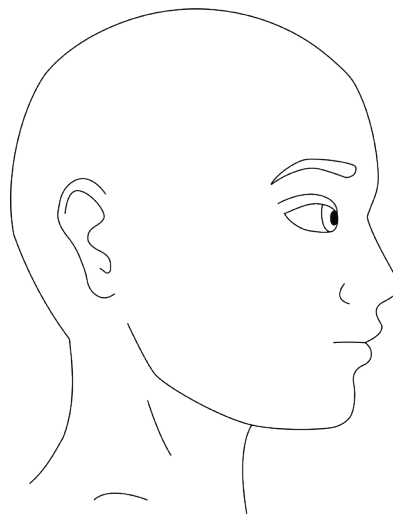
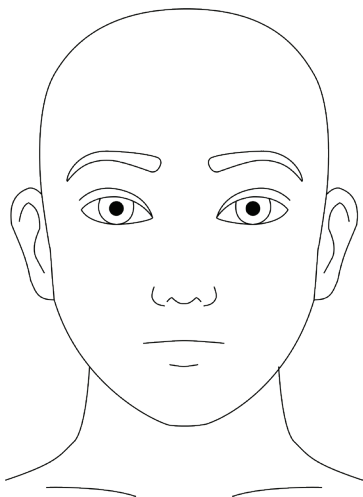
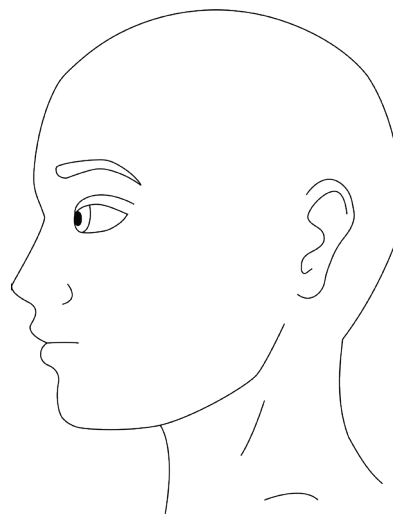
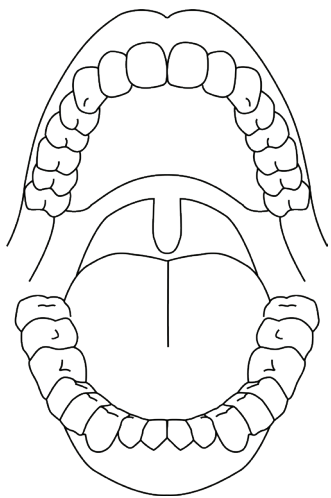


Diagram B - Mouth



LEGEND: Types of Findings

AB Abrasion	BU Burn	ER Erythema (redness)	IW Incised Wound	OF Other Foreign Materials (describe)	PI Previous Injury	TB Toluidine Blue
ALS Alternate Light Source	DE Debris	FB Foreign Body	LA Laceration	PS Potential Saliva	TE Tenderness	
BI Bite (apparent)	DF Deformity	H/F Hair/Fiber	MS Moist Secretion	OI Other Injury (describe)	SI Suction Injury	V/S Vegetation/Soil
BR Bruise	DS Dry Secretion	IN Induration (firmness)	NB Non-blanching	PE Petechiae	SW Swelling	

Locator #	Type	Description	Locator #	Type	Description

Distribute all pages of the document as listed below:

5 Original (Law Enforcement – Put in Envelope on Underside of Kit) Copy of original (Crime Lab – Put in Kit) Scan/copy original (Medical Facility – Retain)

Clinician's Initials: _____