



Massachusetts State Police Forensic Services Division Crime Laboratory



Evidence Handling and Submission Manual

Evidence Control Unit

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1 INTRODUCTION

1.1 Purpose

- 1.1.1 The Massachusetts State Police Crime Laboratory (MSPCL) recognizes the need for uniform and consistent methods and procedures for the proper recognition, collection, and preservation of physical evidence collected and submitted to the laboratory for forensic analysis.
- 1.1.2 This manual establishes global procedures and requirements for the MSPCL on the handling, submission and the disposition of evidence.
- 1.1.3 Refer to the MSPCL Evidence Storage Guideline Protocol (ID 85598) for guidance on storage conditions for evidence preservation.

1.2 Definitions

- 1.2.1 Evidence Technician (ET): This individual receives, packages, labels, and transports evidence for the MSPCL while maintaining the proper chain of custody. An ET also conducts inventories of evidence storage locations.
- 1.2.2 Analyst Custody (AN Custody): A password protected electronic LIMS location to document physical possession of evidence.
- 1.2.3 Storage Area: A secure limited access location or designation to store evidence. For example, an analyst's storage area, shelf, cabinet or bulk container.
- 1.2.4 Authorized Agencies: All state and federal law enforcement agencies and local Police Departments as legislated or otherwise authorized by the Crime Laboratory Director.
- 1.2.5 Evidence Control Unit: The Evidence Control Unit (ECU) receives, packages, labels and transports evidence for the MSPCL and external law enforcement agencies, while maintaining the proper chain of custody. The ECU also conducts inventories of evidence storage locations.
- 1.2.6 Electronic Case Record: refers to documentation retained in the LIMS either under the Case Log or uploaded as an attachment as it applies to this manual.
- 1.2.7 Proximal container: Internal packaging that is used to reduce the chance of items falling out and/or to prevent commingling while inside a larger parent container (e.g., box, bag).
- 1.2.8 Currency – The official currency, coins and negotiable paper notes issued by a government and accepted by United States financial institutions for exchange.

2 TEMPERATURE AND HUMIDITY PROCEDURES FOR EVIDENCE STORAGE AREAS

2.1 Purpose

- 2.1.1 This section establishes the acceptable temperature and humidity ranges, the procedures for monitoring and recording temperature and humidity readings, and the policy for documenting and addressing temperature and humidity deviations for MSPCL evidence storage areas. This policy also applies to evidence storage areas not under the direct responsibility of the Evidence Control Unit (ECU).

2.2 Policy

- 2.2.1 An evidence storage area is defined as any area where evidence is stored overnight.
- 2.2.2 Recording will occur on business days, when staffed. ECU is responsible for evidence storage areas under their direct control within the Sudbury and Springfield laboratories. Units/Sections are responsible for recording data for their own evidence storage areas (refrigerated or non-refrigerated as applicable) in laboratories where the Evidence Unit is not staffed five days a week. Evidence Technicians and Analysts should refer to their respective supervisors if it is unclear who shall be recording data for the respective storage area.
- 2.2.3 The temperatures of the non-refrigerated evidence storage areas, freezers, refrigerators, walk-in refrigerators and the drug vaults will be recorded daily when staffed using the appropriate Temperature and Humidity Form. Alternatively, a laboratory approved electronic monitoring device may be used to record temperatures at least once per day.
- 2.2.4 The humidity for non-refrigerated evidence storage areas, walk-in refrigerators, and the drug vaults will be recorded daily when staffed using the appropriate Temperature and Humidity Form. Alternatively, a laboratory approved electronic monitoring device may be used to record humidity at least once per day.
- 2.2.5 All records of temperature and humidity readings will be maintained for at least one accreditation cycle by the Unit/Section responsible for taking the daily readings.
- 2.2.6 If available, the temperature/humidity-measuring device shall have an expiration date sticker and when applicable a NIST traceable certificate.

2.3 Temperature and Humidity Monitoring for Evidence Storage Areas

- 2.3.1 Freezer Units. The acceptable temperature range is at or below 0°C (32°F).
- 2.3.2 Sub-Freezers. The acceptable temperature range is -85°C to -60°C (-121°F to -76°F).
- 2.3.3 Refrigerators. The acceptable temperature range is 2° to 8°C (36°F to 46°F).
- 2.3.4 Walk-in Refrigerators. The acceptable temperature range is 2°C to 8°C (36°F to 46°F) with humidity ranging from 0 to 60%.

- 2.3.5 Non-refrigerated evidence storage areas to include bulk storage and drug vaults.
The acceptable temperature range is 24°C (75°F) or lower with the humidity ranging from 0 to 60%.

2.4 Monitoring and Troubleshooting Procedures

2.4.1 For storage areas monitored manually:

- 2.4.1.1 Refer to the current Temperature and Humidity Form for the storage area. Document the initials of the individual recording the readings in the designated column for that day. Record the initial temperature and/or humidity reading in the designated column(s).
- 2.4.1.1.1 “NS” (not staffed) shall be entered in the reading column for days that a specific area was not staffed by the unit responsible for taking the temp/humidity. The recorder’s initials on days where NS is entered reflects the individual adding NS.
- 2.4.1.1.2 “NR” (not recorded) shall be entered in the reading column for days where the location was staffed but the temperature and humidity were inadvertently not taken. The recorder’s initials on days where NR is entered reflects the individual documenting that the readings were not recorded but not necessarily the individual whose responsibility it was to do so.
- 2.4.1.2 If the temperature is not within the acceptable range, close the refrigerator, freezer, or the door to the evidence storage room for non-refrigerator storage for a minimum of 15 minutes and take another reading. During this time, place a sign on the appropriate location stating that QC is in progress. Record the second reading in the designated column. If the reading is still out of range, the recording individual may add any comments as necessary (e.g., out of range) in the designated column. Comments are not required.
- 2.4.1.3 If the humidity reading or the second temperature reading is not acceptable, the ET or Analyst will notify a supervisor immediately.
- 2.4.1.4 The Supervisor will evaluate the circumstances of the out-of-range reading. If necessary, the Supervisor will contact the appropriate party to resolve the issue.
- 2.4.1.4.1 When adjustments to HVAC and/or facility systems may be needed, the Facilities Administrative Officer shall be notified to make adjustments and arrange any applicable service calls.
- 2.4.1.4.2 The Section Manager of Forensic Support shall be notified to evaluate if evidence transfer is needed. The Section Manager will consult with the Section Manager of the applicable unit and the Section Manager of Forensic Biology as needed to make this determination.

- 2.4.1.4.3 The Section Manager of Forensic Support shall notify the Quality Assurance Section Manager and/or Quality Assurance Section Supervisor and the Director and/or Assistant Director if evidence is being relocated due to a potential quality issue.
- 2.4.1.5 The Supervisor will acknowledge the out-of-range reading with their initials, date, and a description of any applicable actions taken, on the form in the designated column as soon as practicable.
- 2.4.1.6 The monthly Temperature and Humidity Forms shall be reviewed within the month following the completion of the form by a Unit Supervisor for completeness and compliance with the steps above.
- 2.4.2 For storage areas being monitored with a laboratory approved electronic monitoring device:
 - 2.4.2.1 The Unit will establish the range of temperature and humidity that will trigger automatic notification. Refer to the applicable unit protocols for recording and monitoring requirements.
- 2.4.3 The monthly Temperature and Humidity Forms and electronic monitoring system (excluding stand-alone refrigerators and freezers) shall then be reviewed quarterly by the Forensic Operations Manager, who shall monitor for trends that could adversely impact the integrity of the evidence or future testing results. The Forensic Operations Manager shall consult with other Section Managers and the Quality Assurance Manager as needed to ensure appropriate action is taken.

3 QUALITY CONTROL

3.1 Purpose

- 3.1.1 This section establishes procedures for quality control responsibilities within the Evidence Control Unit.

3.2 Drying Cabinet Filter Maintenance

- 3.2.1 Filters will be changed annually or at the manufacturer's recommendation.
- 3.2.2 Maintenance of the drying cabinet filters will be the responsibility of the unit that has direct control of that drying cabinet.
 - 3.2.2.1 The non-door intake grill filter will be replaced by an external vendor at the direction of a supervisor. The replacement date of a non-door intake grill filter will be documented in a Filter Maintenance Log. An Evidence Unit Supervisor shall be notified if a filter replacement sensor is activated on a unit. The unit may remain in service if a sensor is activated but a service call should be made if an odor is detected coming from the cabinet or if the filter has been in use for 12 months without a filter change.

3.2.2.2 The door intake grill filter will be monitored every quarter or more frequently if deemed necessary. The door intake grill filter should be replaced by an MSPCL employee when it turns dark in color. The replacement date of a door intake grill filter will be documented in the Filter Maintenance Log.

3.2.3 Each Unit/Section is responsible for retaining the filter documentation for their respective units. All supporting documents shall be maintained for reference for at least one accreditation cycle and may then be disposed of if deemed appropriate by the Quality Assurance Manager or Director.

4 DRYING EVIDENCE

4.1 Purpose

4.1.1 This section establishes procedures for drying evidence that is submitted to the MSPCL for analysis.

4.2 Biological Hazard Awareness

4.2.1 Please refer to the MSPCL Safety Manual for additional guidance.

4.3 General Requirements

4.3.1 All damp or wet evidence submitted to the MSPCL shall be dried in an appropriate hood or drying cabinet prior to being placed into storage.

4.3.2 When drying evidence, consideration must be given that all items may contain potentially probative trace materials. Proper precautions (such as using a hood or drying cabinet with low airflow) shall be taken to preserve those materials.

4.3.3 Evidence from different cases **must** be dried and repackaged separately.

4.3.4 Evidence from different recovery locations (e.g., victim(s) and suspect(s) clothing) should be dried in separate drying cabinets.

4.3.4.1 If multiple drying cabinets are not available, evidence from different recovery locations can be placed into the same drying cabinet and shall be separated with separate vertical clean paper shields that extend to the floor. These shall be repackaged in separate containers.

4.3.4.2 Paper placed on the floor must be such that cross contamination is precluded (i.e. separate pieces of paper shall be used for each item when sharing a cabinet).

4.3.4.3 If evidence from different recovery locations must be dried in the same hood; a note in the electronic case record must be made that paper barriers were used.

4.3.5 If, at any time, the cabinet seal tag appears to have been compromised, do not

open the cabinet. Notify an Evidence Unit Supervisor immediately. The supervisor shall notify the appropriate Section Manager and QA Manager immediately to determine the appropriate course of action.

4.4 Procedure for Drying Evidence

- 4.4.1 Prior to use, clean the inside of the drying cabinet with a bleach solution.
- 4.4.2 The bottom of the drying cabinet shall be covered with a clean paper drop cloth to retain any material that may be dislodged in the drying process.
- 4.4.3 Label the paper drop cloth with identifying information to include at a minimum the MSPCL case number, date, and initials of person(s) placing the evidence into the drying cabinet.
- 4.4.4 Evidence should be scanned to the AN custody of the individual preparing and setting up the drying cabinet prior to electronically moving the item(s) into the drying cabinet.
- 4.4.5 **For drug evidence**, there shall be two employees present. The employees will notify the Evidence Unit Supervisor verbally prior to opening the evidence. The drug evidence will be opened to allow the evidence to dry. The two employees who performed the work and the supervisor who was notified will be documented in the same note to file in LIMS that was made for documenting the tag number. Open the container and retain the original red security seal.
- 4.4.6 Open the container, if necessary, and place the evidence inside the drying cabinet.
- 4.4.7 Secure the cabinet with the appropriate tag. The tag number is documented by making a note to file in LIMS.
- 4.4.8 A copy of the lab submission form shall be posted at the assigned drying cabinet area specifying the articles being dried in that cabinet and the date that the evidence was submitted to the laboratory. The drying cabinet number shall be annotated on the submission form in the event the form is dislodged.
- 4.4.9 Only the ET or Analyst shall remove the evidence from the drying cabinet unless exigent circumstances exist or otherwise directed by the responsible party of the Evidence Control Unit; generally, the ET is responsible for removing dry articles from the drying cabinet(s) and repackaging the evidence for storage.
- 4.4.10 All articles of evidence being dried shall be removed from the assigned drying cabinet area within three (3) working days after submittal to the MSPCL unless further drying is needed. If further drying is needed, an ET or Analyst shall initial and date the copy of the evidence submission form each working day after the evidence has been drying for more than three (3) working days. The ET or Analyst will also enter a note in the electronic case record.
- 4.4.11 When the non-drug evidence is ready to be removed, verify the inventory on the

evidence submission form with the actual articles being stored. If an item is found during the process, the ET will notify their supervisor and a crime scene responder, if applicable, for resolution.

- 4.4.12 If the dried non-drug evidence will not be placed back into the original packaging, that original packaging shall be retained within the parent container.
- 4.4.13 When **drug evidence** is ready to be removed, there shall be two employees present. The employees will notify the Evidence Unit Supervisor verbally prior to opening the cabinet. The two employees who performed the work and the supervisor who was notified will be documented in a note to file in LIMS. Reseal the container and apply a new red security seal. Document the new seal number in the same note to file in LIMS.
- 4.4.14 The paper drop cloth and seal tag will not be retained for **drug evidence** or packaged items when the evidence seals remain intact during the drying process.
- 4.4.15 For unsealed non-drug evidence, the paper drop cloth shall be contained in a brown paper bag. Place the brown paper bag, drying cabinet tag and the evidence items inside the parent container for storage. The paper drop cloth shall be entered into LIMS under the respective scene submission as Item Type: "CRIM" and a comment made in the Item Description: "paper drop cloth."
- 4.4.16 Evidence should be electronically removed from the drying cabinet and placed into the AN custody of the individual packaging the items.
- 4.4.17 Properly package, seal, and label the container.
- 4.4.18 Shred the copy of the lab submission form.
- 4.4.19 Clean the inside of the drying cabinet with a bleach solution.
- 4.4.20 Store the items as outlined in the MSPCL Evidence Storage Guideline Protocol.

5 REQUIREMENTS FOR EVIDENCE SUBMISSION

5.1 Purpose

- 5.1.1 This section establishes the laboratory's procedures for handling external agency submissions and evidence submissions by scene responders within the MSPCL.

5.2 Eligibility

- 5.2.1 Refer to the General Lab – Item Analysis Policy (ID 4163) for information about eligibility for submission and testing.
- 5.2.2 All evidence submitted to the MSPCL for analysis must be submitted by an authorized agency.
- 5.2.3 Fire Debris and Explosives evidence submitted by external agencies is accepted at

the 59 Horse Pond Road facility only. Explosives must be rendered safe prior to submission. This type of evidence may be submitted by external agencies at other facilities with prior approval from the TRAE Unit Section Supervisor. The approval must be documented in the electronic case record.

- 5.2.4 Drug evidence is accepted at 59 Horse Pond Road, Sudbury, MA and 190 Carando Drive, Springfield, MA.
- 5.2.5 Postmortem Toxicology evidence is only accepted from the Office of the Chief Medical Examiner (OCME).
- 5.2.6 Firearms, as a matter of safety and operational procedure, will not be accepted without having been first rendered safe by a member of the Massachusetts State Police Crime Laboratory Firearms Identification Section (see Section 6.2 herein, Pre-Submission Procedure for Firearms).
- 5.2.7 Sexual Assault Evidence Collection Kits (SAECKs)
 - 5.2.7.1 Out of state Sexual Assault Kits, for assaults which occurred out of state, will not be examined by the Forensic Services Division unless approval is received from the Director or Assistant Director. Approval must be obtained prior to examination and documented in the electronic case record.
 - 5.2.7.2 For all Sexual Assault case types (Reported, Unreported, Out of State), the associated Toxicology kits are always accepted.
 - 5.2.7.3 For all unreported (non-investigatory) Sexual Assault (USA) Kits, the age of the victim will be verified. If the age is 15 years or under the SAECK will be examined. If the age of the victim is 16 years or older, the SAECK will not be examined, unless approval is received from the Director or Assistant Director. Approval must be obtained prior to examination and documented in the electronic case record.
 - 5.2.7.3.1 If the SAECK is not marked as to the age of the victim, the SAECK will be sent for age verification to determine if it is eligible for processing refer to Section 6.4.6.5.
 - 5.2.7.3.2 If Toxicology analysis is requested on the SAECK, the SAECK will be accepted for Toxicology analysis.
- 5.2.8 Items that are not considered evidence do not need to be packaged and stored under proper seal. The following items are not considered evidence:
 - Test fired projectiles generated to certify ammunition. These may be discarded, if recovered.
 - Test firings (projectiles and cartridge casings) used solely for entry into NIBIN.
 - Known DNA standards collected from Convicted Offenders for entry into the CODIS offender index.

5.3 Evidence Documentation

5.3.1 The submitting agency must document the submission by conducting a full inventory of the items being submitted on an evidence submission form (ESF), however named.

5.3.2 Evidence Submission Form Completion

5.3.2.1 The submitting agency or Analyst is responsible for providing a completed ESF, including the type of analysis needed for all items submitted.

5.3.2.1.1 With the exception of Postmortem Toxicology evidence submissions and Drug Evidence submissions on a SP295 form, evidence submissions documented on any carbon copy version of the ESF must also be accompanied by a signed copy of the Evidence Submission Supplemental Agreement.

5.3.2.1.1.1 The Evidence Technician will provide a copy of this agreement to the submitting agency representative at submission for completion and signature.

5.3.2.1.1.2 The agreement will be scanned and uploaded to the LIMS and the original hardcopy will be stored in ECU with the original ESF.

5.3.2.2 The following information should be completed on the form or obtained by the submitting individual from the incident report.

- Incident Date, Type, Town
- Description of items being submitted, including property numbers (if applicable) and recovery location
- Select the appropriate type(s) of forensic analysis that is being requested on each item
- If selecting Crim/DNA the agency must also outline if the item has been previously processed for fingerprints (if the item is amenable).

5.3.2.2.1 When completed by an Analyst after collection at a crime scene or during resubmission of evidence, the ESF may be completed electronically. The form must be printed to select the type(s) of analysis requested, as this is not available in the electronic submission. Completed Evidence Submission Forms must be scanned and uploaded to the LIMS.

5.3.2.3 Instructions for Swabs of Biological Evidence

5.3.2.3.1 When swabs are collected from different sources or areas, the submitting agency should list the swabs separately on the submission form. If swabs were collected from the same location and packaged together, the agency should list it as one item on the ESF and note the

quantity of swabs contained within.

5.3.2.4 Instructions for Control Swabs

- 5.3.2.4.1 These swabs are occasionally collected at a crime scene. The submitting agency or scene responder should list control swabs separately on the Evidence Submission Form (ESF) and they should be listed individually in LIMS.

5.3.2.5 Instructions for Known DNA Standards

- 5.3.2.5.1 Known standards are samples collected directly from an individual and submitted to the laboratory for comparison. If there are multiple standards for the same case, the submitting agency should list the standards individually and they should be entered into LIMS separately.

5.3.2.6 Instructions for Firearm Evidence

- 5.3.2.6.1 The MSPCL recommends that all discharged cartridge casings and/or projectiles be packaged individually in proximal containers (e.g., coin envelopes) and listed as separate items on the ESF.
- 5.3.2.6.2 Bulk ammunition, discharged cartridge casings and/or projectiles that are collected and packaged in the same proximal container shall be listed as one item on the ESF. For example, “uncounted rounds of live ammunition”.
- 5.3.2.6.3 If a count is provided on the ESF (e.g., 9 discharged cartridge casings from scene), the MSPCL will consider this an exact count, and any discrepancies will require consultation with the submitting agency before processing.
- 5.3.2.6.4 The MSPCL will accept uncounted bulk submissions (e.g., “Uncounted number of discharged cartridge casings from scene”), but will not accept approximate numbers.
- 5.3.2.6.5 The MSPCL recommends that agencies refrain from unloading rounds of ammunition from magazines prior to submission.
- 5.3.2.6.6 Firearms recovered loaded will be considered one item with 3 components (firearm, magazine, and ammunition) and should be listed as one item on the ESF. If a firearm is recovered with an empty magazine the firearm should be listed as one item with 2 components (firearm with magazine) or if the firearm is a revolver with no magazine and the item is recovered loaded with ammo it should be listed as one item with 2 components (firearm with ammunition).
- 5.3.2.6.7 Magazines recovered loaded with ammunition but not inside a firearm will be considered one item with 2 components (magazine with

ammunition) and should be listed as one item on the ESF.

5.3.3 Police Reports and Other Forms

- 5.3.3.1 Police report(s), and any additional documentation received from the submitting agency must be scanned and uploaded to the LIMS.
- 5.3.3.2 Police reports or a summary of the incident are required for all submissions when Criminalistics and/or DNA analysis is requested. If not available at the time of evidence submission, they should be provided as soon as possible.
- 5.3.3.3 Police reports are not required for Drug or Toxicology submissions.
- 5.3.3.4 For all other evidence, police reports should be submitted at the time evidence is submitted, when possible.
- 5.3.3.5 If the agency is in possession of a completed victim's consent form, it should be submitted with any sexual assault toxicology kit.

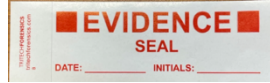
5.4 Evidence Identification

- 5.4.1 Prior to submittal, evidence should be marked by the agency for identification purposes. Identification tags or labels may be affixed to the item or to the item's packaging. The unique identifier number will be assigned by the MSPCL and affixed to the item or the item's packaging upon receipt of the evidence by the MSPCL.

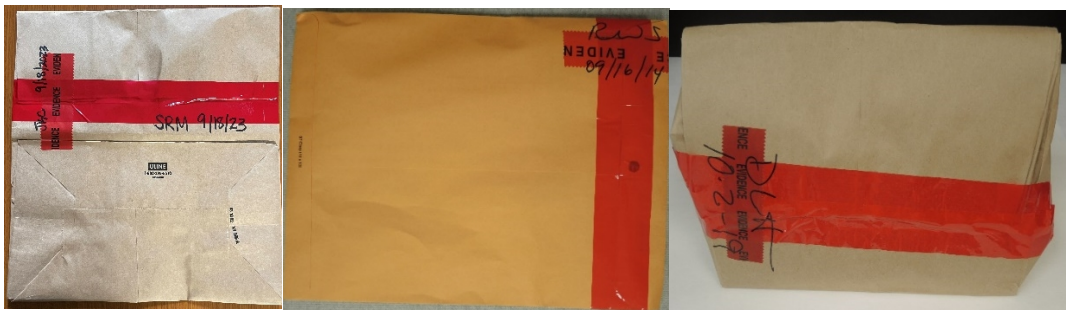
5.5 Evidence Packaging

- 5.5.1 The submitting agency is responsible for the proper documentation and packaging of evidence submitted to the MSPCL. Proper packaging materials will be available to the submitting agency representative for use in packaging evidence while at the Evidence Control Unit (ECU).
- 5.5.2 Packaging materials should protect the evidence from contamination, deleterious effects, or tampering. Packaging materials should be clean and not previously used. The type of analysis required shall be considered when determining how to preserve the evidence.
- 5.5.3 Evidence examination submissions to the MSPCL must be in a sealed initial/dated condition.
- 5.5.4 Vendor purchased pre-assembled kits including but not limited to Sexual Assault Evidence Collection Kits, Toxicology Kits related to sexual assaults, Toxicology Kits submitted for Operating Under the Influence (OUI) offenses, Blood Stain Collection Kits, Gunshot Residue Collection Kits and Buccal Collection Kits will be accepted with only the kit provided evidence seals so long as they are intact and initial/dated as outlined on the seal. These initials/date are not required to cross onto the packaging.

- 5.5.4.1 If the seal provided with the kit is compromised at any time, the package shall be sealed according to the below requirements according to the packaging type.



- 5.5.5 All seals must be initialed and dated or otherwise marked to document the person sealing the evidence. These markings must cross from the tape onto the packaging. The purpose of the seal is to ensure that evidence has not been contaminated or altered in transport or storage.
- 5.5.6 A container is “properly sealed” only if its contents cannot readily escape and if opening the container results in obvious damage/alteration to the container or its seal. Manufacturer seals do not need to be taped and sealed.
- 5.5.7 Exterior Packaging:
- 5.5.7.1 Tamper-evident (STE) tape should not be used to seal seams of an exterior package.
- 5.5.7.2 Bags/Envelopes: A piece of evidence tape must be placed across any openings and then secured with a piece of tamper tape. The tamper tape may be applied by a MSPCL employee at submission if the package is already sealed initial/dated or by the individual sealing the package. Initials/date should be added across the tamper tape extending onto the bag.
- 5.5.7.3 See the photo below for acceptable examples.



- 5.5.8 Boxes: All seams of a box must be fully covered with tape, forming an H-seal. An H-seal may be across the bottom of a box or side of a box.
- 5.5.8.1 One piece of tamper tape must be placed over each H-seal and initial/dated (i.e., top and bottom of a cardboard box or opening flap of a gun or knife box). See below for acceptable examples.



- 5.5.8.2 Firearm boxes: If the firearm box has manufacturer holes in the bottom of the box, all holes must be covered with evidence tape. Initials/date across this tape is recommended but not required. If initials/date are used across this tape at the bottom they do not need to extend from the tape onto the package.
- 5.5.9 Tamper tape is not required on heat sealed packets, buccal collection kits or mylar envelopes.
- 5.5.10 Evidence that cannot be enclosed in a sealed container (due to size or shape) shall have the approval of the Evidence Control Unit Supervisor or appropriate Unit/Section Supervisor prior to submission.
- 5.5.10.1 In rare circumstances, it may not be possible to seal evidence prior to submission (e.g., a firearm discovered in a body of water will be submitted to the lab in a vessel containing the same water). This shall be noted in the electronic case record and must be properly sealed after testing for storage.
- 5.5.10.2 Large items of evidence, such as doors, safes and furniture, may be too large to be packaged in the conventional manner described above. Submissions of large items are generally discouraged, however, if an item needs to be submitted and the size of the item precludes packaging, a legible identification tag or label will be affixed to the item. Specific areas of concern (such as stains or adhering substances) should be protected by taping paper to the wider area surrounding the substance's location. Transient evidence should be collected prior to submission to avoid loss or contamination. If necessary, a label or notation should be affixed to the item indicating that item is heavy and additional precautions should be used when lifting or transporting.
- 5.5.10.2.1 The Crime Scene Response Unit and/or Crime Scene Services Section can be requested to respond and process items on scene in lieu of submitting large items to the lab for processing.
- 5.5.11 The submitting agency shall refer to the MSPCL Evidence Submission Handbook for additional information.
- 5.5.11.1 Biological evidence on clothing and related items should be allowed to air dry

before being packaged and submitted for analysis. If items are not dry at the time of submission, the submitting agency shall notify the Evidence Technician so that items can be properly dried at the time of submission.

- 5.5.12 Food products submitted for examination for fingerprints and/or the recovery of DNA may be packaged in plastic if the item has the potential to leak and should be kept refrigerated.
- 5.5.13 Any item being submitted for analysis that has residual moisture, such as clothing, shoes, or fresh marijuana, should be packaged in paper or cardboard; such packaging allows water vapors to escape. Plastic should be avoided.
- 5.5.14 Firearms located in water should be packaged in the water in which it was located. The firearm should not be dried before packaging.
- 5.5.15 All firearms and firearm related items shall be handled with the assumption they will be fingerprinted or sampled for DNA. These items should not be packaged in cotton or sealed in plastic.
- 5.5.16 Trace evidence, such as hairs, fibers, or paint chips should be packaged separately in paper folds or glassine packets. The packet, including seams or openings, must be securely sealed to avoid sample loss. Plastic should be avoided because the sample may contain residual moisture or may cause static electricity that may interfere with the removal of trace samples from its container. Gel lifts should not be used as a medium for the collection and/or storage of trace materials. If an external agency submits trace material on a gel lift, a TRAE (Trace/Arson and Explosives) Unit supervisor shall be notified.
- 5.5.17 Liquid blood evidence in vials or tubes (or proximal container) must be labeled with, at a minimum, a unique identifier. This type of evidence should be refrigerated prior to delivery but not frozen. Care should be taken to ensure that the package is properly sealed to avoid breakage of the tube and potential seepage. The outer package should display "Biological Hazard" identification.
- 5.5.18 Bone and tissue samples (including a product of conception) submitted for Forensic Biology shall be stored in a sub-freezer.
- 5.5.19 Knives and other sharp instruments shall be packaged in specialty sharps packaging, e.g., a knife box.
- 5.5.20 Hypodermic Needles and Syringes
- 5.5.21 Syringes and needles require approval by laboratory management **prior** to submission.
- 5.5.22 The ET will not package syringes or needles for the submitting agency.
- 5.5.23 If approved for submission, all syringes and needles must be submitted in a hypodermic safety container. The container should be constructed of clear plastic

material, be leak-proof on the sides, be puncture resistant and labeled as to its contents.

5.5.24 A supply of containers should be maintained in each station's contraband storage room. Syringes or needles should only be transported for analysis in hypodermic safety containers. The Evidence Control Unit has the names of suppliers (vendors) of the containers and single containers are available at the laboratory.

5.5.25 Use of proximal containers:

5.5.25.1 When ammunition is submitted in a proximal container along with a firearm, the proximal container must be sealed closed with tape to ensure safety during evidence handling. Initials and dates are not required on this seal.

5.5.25.2 For all other evidence, submitting agencies are encouraged to seal and mark proximal containers but are not required to under MSPCL protocol.

5.5.25.3 Proximal containers used (originally created or opened) by MSPCL Analysts shall be sealed and marked with the appropriate initials and date of the person sealing the container when practicable. Tamper evident tape is not required to complete a seal for proximal containers because it will be sealed into a container (e.g., box, bag). The proximal container shall be marked for identification purposes (i.e., LIMS case number and item number). This will ensure if the proximal container is removed from the exterior container, it can be identified appropriately.

5.5.25.4 When a proximal container is opened for evidence examination/analysis, ensure that the package is marked with the LIMS case number and item number before returning it to the exterior container.

5.5.26 Evidence potentially infested with live insects or bugs must be placed in a sub-freezer, for no less than three days prior to being placed in a drying cabinet or other evidence storage location. An Evidence Unit Supervisor shall be notified of all submissions potentially infected with live insects or bugs.

5.5.27 Securing vs. Sealing Evidence

5.5.27.1 Securing evidence shall only be used when items are in process and movement of the evidence will only occur within a specific unit laboratory location unless otherwise approved by management. Refer to the Quality Assurance Manual – Testing and Calibration (ID 8149) for additional information on properly securing evidence.

5.5.27.2 Evidence for transport to another Unit/Section or laboratory location shall be “properly sealed” prior to any movement.

5.6 Methods for Submitting Evidence

5.6.1 Evidence Submitted in Person

- 5.6.1.1 Evidence will be submitted to the Evidence Control Unit by appointment when practicable.
- 5.6.1.2 The ET or Analyst will process evidence submitted in person in accordance with the submission procedures herein. Refer to Section 6, Non-Drug Evidence Submission Procedures or Section 9, Drug Evidence Submission Procedures.

5.6.2 Evidence Submitted Via Delivery Service

- 5.6.2.1 Typically, send out cases for biology will be returned to the Evidence Control Unit. All other send outs will be forwarded to the appropriate section. If evidence received via delivery service is marked for the ECU it will only be accepted by the ECU provided there is a return address and contact person listed on the package. The following procedures will be followed when the ECU receives evidence via delivery service for non-parent item returns:
 - 5.6.2.2 The receiving ET or Analyst will process the items into LIMS as soon as practicable.
 - 5.6.2.3 The package will be stored in a cold storage unit until an ET or appropriate personnel are available to process the evidence.
 - 5.6.2.4 If the shipping tracking number is not documented on the external laboratory's chain of custody form, a copy of the external packaging slip used to mail the evidence to the MSPCL will be added to the case documents. If the shipping tracking barcode is present, please scan barcode to the respective LIMS submission.
 - 5.6.2.5 Reconcile the items listed on the external laboratory's chain of custody documentation to each item listed on the MSPCL chain of custody information.
 - 5.6.2.6 If applicable, utilize the external laboratory's item number found on the chain of custody form to reconcile controls created by the external laboratory to the appropriate cases.
 - 5.6.2.7 An ET or appropriate personnel will enter the necessary information into LIMS to document the return of the evidence to the MSPCL thereby continuing with the chain of custody for the case and the respective items.
 - 5.6.2.8 For parent item returns (e.g., shirt, pants) the ET or Analyst will follow the procedures below for processing:
 - 5.6.2.8.1 Log the original item/container back into LIMS and then create two child samples in LIMS. The first child sample will be for the sample that was carried forward for testing and the second child sample is the half of the sample created at the external vendor laboratory that has been set aside for additional testing. Ensure LIMS labels are created for the zip

lock pack with work product and for the coin envelope with the additional testing half of the snippet.

- 5.6.2.9 Any associated paperwork sent from the external laboratory gets forwarded to the DNA Unit.
- 5.6.2.10 If the package is not a return of an outsourced case, contact the sender to confirm that the MSPCL was the intended recipient of the package.
- 5.6.2.11 If the ET or Analyst is unable to contact the submitting or investigating agency the package will be stored in a secure area until contact can be made.
- 5.6.2.12 If the submitting or investigating agency has no knowledge of the package being submitted, an Evidence Unit Supervisor and the Forensic Support Section Manager will be immediately notified.
- 5.6.2.13 When the ET or Analyst verifies the package was sent and learns of its contents, they will open the package and accession the evidence.
- 5.6.2.14 If the Evidence Submittal Form has not been enclosed with the package, the ET or Analyst will generate one and note that it was filled out by the laboratory.

5.7 Evidence Resubmission Procedures

- 5.7.1 Evidence may be resubmitted to the laboratory for analysis or supplemental analysis.
- 5.7.2 The submitting agency shall conduct a full inventory of the items being resubmitted on the evidence submission form.
- 5.7.3 The ET or Analyst will process the resubmission following the instructions provided in the Instructions for Receiving a Resubmission.
- 5.7.4 For additional guidance on Drug Resubmissions, please refer to Section 10.4 within this document.

6 NON-DRUG EVIDENCE SUBMISSION PROCEDURES

6.1 Purpose

- 6.1.1 This section establishes procedures for submitting non-drug evidence to the MSPCL. It provides guidance to both internal MSPCL personnel and external submitting agencies on how to handle non-drug evidence submissions.
- 6.1.2 The procedures for the submitting agency representative need to be communicated by MSPCL personnel, if not already communicated using information handouts, or posted signs at the Evidence Intake areas.

- 6.1.3 Refer to the Evidence Intake Instructions (ID 93624) for additional information regarding LIMS entry.

6.2 Pre-Submission Procedure for Firearms

- 6.2.1 Firearm and firearm related evidence (including black powder weapons) shall be evaluated by the Firearms Identification Section (FIS) prior to submission to deem the weapon safe.
- 6.2.2 FIS does not deem paintball and pellet guns safe if they are submitted to the laboratory for examination.
- 6.2.3 FIS does not need to evaluate a firearm being resubmitted to the laboratory that has already been deemed safe, if the MSPCL container seals have not been broken since it was returned to the agency.
- 6.2.4 All firearms shall be packaged in individual boxes. Components (i.e., the magazine and ammunition recovered within the firearm) may be packaged in proximal containers and then stored together within one box with the firearm.
- 6.2.5 All firearms and firearm related items shall be handled with the assumption they will be fingerprinted or sampled for DNA. Gloves shall be worn when handling the item and changed between items.
- 6.2.6 The FIS Analyst will affix an evidence property tag to the outside of the firearm box to document that the weapon has been rendered safe. The Analyst will date, initial and place their ID number on the tag. After the weapon has been deemed safe, the submitting agency will seal the container and submit the ballistics evidence to the ET or Analyst as directed below.

6.3 Submittal Procedure for the Submitting Agency Representative

- 6.3.1 The submitting agency shall conduct a full inventory of the items being submitted on the appropriate submission form and ensure the packaging is properly sealed, as described in Section 5 Requirements for Evidence Submission.
- 6.3.2 The ET will provide the submitting agency representative with LIMS bar-code labels for each case. The submitting agency representative shall apply one (1) label to the corresponding evidence.

6.4 Submittal Procedure for the Evidence Technician or Analyst

- 6.4.1 Review of Case Documentation.
 - 6.4.1.1 The ET or Analyst shall check the ESF to ensure that the information on the form is complete. If all the applicable fields are not completed, ask the agency to fill in the information if possible.
 - 6.4.1.2 The item description field should include a general description of the item and the recovery location, the specific location where the item was collected. For

example, when clothing is collected from an individual the submitting agency should use this field to document the person's name to identify ownership. In circumstances where a GSR kit or a buccal swab is used, the submitting agency should list the name of the person from whom it was collected, not the name of the hospital or police department from where it was collected.

6.4.1.3 If a police report is not provided, request that it be submitted and document the request in the electronic case record.

6.4.1.4 If a victim consent form for a Toxicology Kit is not provided, request that it be submitted and document the request in the electronic case record.

6.4.2 Review of Evidence Packaging

6.4.2.1 Verify that the submitting agency properly sealed the outer container. If the outer container is not properly sealed, the submitting agency shall correct the seal.

6.4.2.2 Verify that the evidence is packaged appropriately according to the guidance in the information papers. If evidence is packaged incorrectly, direct the submitting agency representative on how to package the item correctly. Enter a note in the electronic case record. The entry will describe how the evidence was originally packaged during submission, the steps that were taken to correct the packaging and any other information that could be used to track the packaging during the original custody of the item.

6.4.2.3 The ET or Analyst shall refrain from opening sealed containers submitted to the laboratory for examination during the receiving process. If for some reason the container needs to be opened to document the contents, the submitting agency should break the seal and conduct the appropriate inventory. If the agency opens the container, they should re-seal the container prior to submitting the evidence to the laboratory.

6.4.2.4 If the item(s) are wet, they must be dried before storage. Refer to Section 4.

6.4.2.5 Label exterior containers in large letters/numbers using a marker.

6.4.2.6 Label rectangular-shaped boxes (excluding Sexual Assault Evidence Collection and Toxicology Kits) on two (2) sides (for storage flexibility).

6.4.2.7 Evidence containers will be labeled with the following information:

6.4.2.7.1 Unique LIMS Number

6.4.2.7.2 Town of incident and/or investigating agency name (or LIMS Department Code) if different than town

6.4.2.7.3 The unique LIMS Number and town of incident are not required to be written on buccal kits, GSR kits, Mylar envelopes or heat-sealed plastic bags, unless the container will be stored in a sub freezer where the

label may become detached because of the elements. If a town of incident is not applicable (CODIS Hits) writing only the LIMS number is sufficient. The LIMS container or item label should be used for identification purposes.

6.4.3 Entry into LIMS

- 6.4.3.1 Check LIMS by using all available case information to verify if the case has already been entered. If the case is found, access that case number to enter the supplemental evidence. If the case is not found, issue a new LIMS case number and enter all case information available to prevent duplicate case numbers.
- 6.4.3.2 The item description and recovery location will be transcribed in its entirety from the ESF into LIMS for each item submitted.
- 6.4.3.3 The manner in which the evidence was collected, packaged and submitted to the laboratory will dictate how the evidence is received and processed into LIMS.
 - 6.4.3.3.1 If multiple Toxicology Kits for multiple victims for the same Sexual Assault case are received, the victim's name should be entered into the item's description field in LIMS to distinguish one kit from another.
 - 6.4.3.3.2 If an OUI case contains multiple OUI samples for multiple suspects, the suspect's name shall be entered into the item's description field in LIMS to distinguish one sample from another.
 - 6.4.3.3.3 Firearm evidence shall be entered into LIMS as one item (regardless of how the items are packaged) when the components of said firearm were confirmed to have been recovered together as one item (i.e., firearm recovered loaded with magazine and ammunition). Recovery locations and descriptions should be added to LIMS descriptions per the ESF.
 - 6.4.3.3.3.1 Example: The ESF lists on three lines; Firearm from residence, magazine from firearm, and ammunition from magazine. This should be entered into LIMS as one item: Firearm, magazine, and ammunition from residence.
 - 6.4.3.3.3.2 Example: The ESF lists on three lines; Firearm from living room, magazine from bedroom, ammunition from magazine. This should be entered into LIMS as two items: Firearm from living room and Magazine with ammunition from bedroom.
 - 6.4.3.3.3.3 Example: The ESF lists (3) magazines from residence on one line. Three separate items described as "Magazine from residence" should be created in LIMS.

- 6.4.3.3.4 If ammunition, projectiles, and casings are recovered from the same location and packaged in the same proximal container they may be entered into LIMS as one item. Ammunition, projectiles, and casings recovered from different locations or individually packaged should be entered into LIMS as separate items.
- 6.4.3.3.4.1 Example: (45) live rounds from basement can be entered into LIMS as one item, but (3) casings from parking lot and (3) casings from garage should be entered as two separate items.
- 6.4.3.3.5 LIMS Containers may be created as needed for the ease of transport throughout the laboratory but are not required.
- 6.4.3.3.6 For Sexual Assault Evidence Collection Kits (SAECKs) the Kit number, hospital, kit type, and date received (if provided) should be entered into the attributes section of the item tab.
- 6.4.3.3.7 For Known DNA Standards, the ET or Analyst will enter each standard under the case number it was collected for at that time. The individual's name will be entered into the Items Description field.
- 6.4.3.3.8 CODIS Verification Standards, also known as buccal or saliva collection kit, are standards collected from a known source for the purpose of verifying a CODIS Hit. The ET or Analyst should reference LIMS to ensure it is submitted under the CODIS hit or forensic case, as appropriate. The ET or Analyst should reference the Items Tab in LIMS to verify if a CODIS Hit File exists.
- 6.4.3.3.8.1 If a CODIS Hit file exists, go to the CODIS Hit in LIMS.
- 6.4.3.3.8.2 If there is a name associated with the CODIS Hit at the top of the main LIMS screen, the standard will be entered under the CODIS Hit case number. The individual's name will be entered into the Item's Description field.
- 6.4.3.3.8.3 If there is no name associated with the CODIS Hit at the top of the main LIMS screen, the standard will be entered under the forensic case number for which it is being submitted. The individual's name will be entered into the Item's Description field.
- 6.4.3.3.9 If a standard is submitted under a CODIS Hit number or a forensic case number but should be moved per these guidelines, a DNA Unit Supervisor may move the standard to the correct CODIS Hit case number or forensic case number prior to the standard being tested. The DNA Unit Supervisor should reference Section 7.2, Inventory Discrepancy within this manual and the LIMS Protocol and User Manual for additional guidance.

6.4.4 Completing the Transfer of Custody

- 6.4.4.1 The ET or submitting Analyst will sign and date the ESF accepting the evidence and initiating the chain of custody for the submitted evidence. The ET or analyst that signed the ESF for receiving the evidence shall be the person entering it into LIMS.
- 6.4.4.2 The signed, completed, ESF will be scanned and uploaded to the LIMS. The original ESF will be retained in ECU for review and long-term storage.
- 6.4.4.3 If an electronic ESF is generated by the submitting Analyst, the completed, signed, original ESF must be forwarded to the Evidence Control Unit. A member of the Evidence Control Unit will ensure a copy is sent to the District Attorney Point of Contact, unless the DAPOC has requested not to receive ESF copies.
- 6.4.4.4 The submitting Analyst must fax, email or mail a copy of the ESF to the Investigator for every submission that is made by an Analyst. This shall be documented by a note to file in LIMS and/or placing the fax confirmation page in the case file.
- 6.4.4.5 The submitted evidence shall be placed in a storage location and the custody updated in LIMS.
 - 6.4.4.5.1 All fire debris evidence is stored in the Fire Debris Evidence Vault or in the explosion-proof locker inside the Fire Debris Evidence Vault.
 - 6.4.4.5.2 PMT evidence will be transported by an ET to the PMT Unit either on the same day or the next business day.

6.4.5 Creating Case Files

- 6.4.5.1 Create the applicable case file(s) in LIMS, as needed.

6.4.6 Creating LIMS Assignments

- 6.4.6.1 Refer to the MSPCL's Assignment Protocol (ID 3391) for additional direction on creating LIMS assignments.

6.4.7 Sexual Assault Evidence Collection Kits

- 6.4.7.1 All reported SAECKs will be forwarded to the Criminalistics Unit for processing.
- 6.4.7.2 For all unreported (non-investigatory) SAECKs, the age of the victim will determine if the SAECK is examined or sent for long-term storage.
 - 6.4.7.2.1 Unreported SAECKs with victims 16 years of age or older will be sent to Milford for Long Term Storage. No case files or assignments will be created.

- 6.4.7.2.2 If the age of the victim is confirmed to be 15 years or younger, the SAECK will be considered a Reported Sexual Assault for assignment, transport, and analysis purposes. If a name is present at the time of submission the information will be entered into LIMS but still entered as a USA. In addition, enter "Under 16" into the last name field in LIMS. If present, scan and upload the police report to LIMS.
- 6.4.7.2.3 If the outside of the SAECK is not marked as to the age of the victim, the SAECK shall be forwarded to the Criminalistics Unit for age verification. Upon age verification, the Analyst shall add the age of the victim to the electronic case record.
- 6.4.7.2.3.1 If upon age verification, the victim is 15 years or younger, follow the instructions outlined in Section 6.4.7.2.2.
- 6.4.7.2.3.2 If upon age verification, the victim is 16 years or older, the Analyst will send the SAECK for storage in Milford Long Term Storage.
- 6.4.7.2.4 If a Toxicology Kit is not present, the ET or Analyst will check the face of the Sexual Assault Evidence Collection Kit (SAECK) to determine if Toxicology analysis is requested. If "Yes" is checked off, a Toxicology assignment will be created for the SAECK, and the Toxicology File will be forwarded to the Toxicology Unit. Approval from the Director or Assistant Director is not required for these assignments. The ET or Analyst will check that the consent form is included (if it is in the possession of the submitting agency representative).

6.4.8 Multiple Unit Analysis Requests

- 6.4.8.1 When items of evidence require examination/analysis by multiple section/units of the laboratory stickers will be placed on the evidence package to mark what Units/Sections need to analyze the evidence. In addition, if the Unit/Section does not already have an open assignment, each respective Unit/Section will receive an assignment in LIMS per the MSPCL Assignment Protocol (ID 3391)

6.4.8.2 Firearm Evidence – Multiple Unit Analysis Workflow

- 6.4.8.2.1 Items in line with the Item Analysis Policy are sent through the laboratory in the following order when multiple unit analysis is requested: CSSS first, followed by Criminalistics, then FIS, and lastly to Trace/Arson and Explosives (TRAЕ) if serial number restoration is requested and/or needed.

- 6.4.8.2.2 **Fire Debris/Explosives Analysis and Trace Analysis Cases:** consult with TRAЕ Unit to determine order of analysis needed.

- 6.4.8.2.3 Requests for fingerprints and/or DNA collection on drug packaging shall

be forwarded to the Case Management Unit. If approved per the IAP, the drug packaging will be sent to the Drug Unit first. The Drug Unit will separate any packaging as needed for transport to the CSSS first and then to Criminalistics as approved/requested. Multi-Unit stickers will be added to the evidence package when transferred to the CSSS.

- 6.4.8.3 When the evidence is transported to the next Unit/Section for analysis, the Analyst will ensure that the previous Unit/Section Analyst placed their initials and date on the respective section's label prior to conducting analysis.
- 6.4.8.4 They shall document this by placing their own initials and date on the "Initial and Date Check" line on the previous section's label. Note: This check only signifies that initials appear in the designated location for the section prior as an additional precautionary measure against deleterious effects that may occur as a result of processing evidence in the incorrect sequence. For example, CSSS should process items for latent print analysis prior to the Criminalistics Unit swabbing the item for potential DNA analysis.
- 6.4.8.5 The Analyst shall place their own initials and date on their Unit/Section's label after completing examination.
- 6.4.8.6 The ET or Analyst shall ensure the applicable labels on the container have been completed prior to transferring the evidence to other MSPCL facilities as well as when returning the evidence to the investigating or submitting agency by placing their initials and date on the "Initial and Date Check" line for the last label in the examination process.
- 6.4.8.7 If it is determined that analysis is not needed the ET or Analyst should place a line through the analysis sticker that is not needed with initial and date.
- 6.4.8.8 Please refer to the Multiple Unit Analysis Information Paper for additional information.

7 Non-Drug Evidence Handling Procedures

7.1 Purpose

- 7.1.1 This section establishes procedures for laboratory handling of non-drug evidence. It provides guidance to internal MSPCL employees on how to handle discrepancies and found currency during examination or analysis.

7.2 Inventory Discrepancy

- 7.2.1 Inventory discrepancies arise when the item(s) listed on an original submittal form does not match the contents submitted to the laboratory. When a discrepancy is identified, corrections may be required prior to proceeding with analysis depending on the nature of the discrepancy.

- 7.2.1.1 Inventory information that requires corrections prior to proceeding with

analysis shall include discrepancies associated with item quantity or descriptions that cannot be clarified through analysis (e.g., obvious color differences, item type).

- 7.2.1.1.1 Differences in item quantity such as the count listed on the submission form and the actual count will be considered discrepant and shall require corrections prior to proceeding with analysis.
- 7.2.1.1.2 Items found within other items or items such as multiple layers of clothing (e.g., shirt removed from within a sweatshirt) will be considered discrepant if not listed separately on the submission form and shall be corrected prior to proceeding with analysis.
- 7.2.2 In some instances, an evidence discrepancy requiring correction may impact the ability to perform testing on another item submitted under the same LIMS case number. In these instances, work may not be completed on the impacted items until the discrepancy is resolved.
- 7.2.3 For PMT discrepancies, see the Toxicology Administrative Manual.
- 7.2.4 Evidence Discrepancy from Submitting Agency
 - 7.2.4.1 If the submitting agency notifies the laboratory of a discrepancy on the submission form, the lab will send a copy of the submission form to the agency for correction. The updated form will be stored in the electronic case record in LIMS.
 - 7.2.4.2 If a staff member identifies a discrepancy, the staff member will notify the submitting individual and attempt to resolve the discrepancy. The staff member will make an entry in the electronic case record, noting the date and name of the person notified.
 - 7.2.4.2.1 If a representative of the submitting agency approves the change, an entry shall be made in the electronic case record to document the individual's approval regarding the change to the original item/inventory prior to casework being performed on that item(s).
 - 7.2.4.2.2 The staff member will update the LIMS item description field(s) to reflect the update.
 - 7.2.4.2.3 The staff member will print the applicable ESF from LIMS and make the change(s) to that form, including handwritten initials and date next to the edit(s).
 - 7.2.4.2.4 The staff member will send a copy to the investigating or submitting agency and document when and to whom this updated form was sent in the electronic case record.
 - 7.2.4.2.5 The updated form will be scanned, uploaded, and stored in the

electronic case record in LIMS by the editing staff member. The staff member will send the updated version (with handwritten edits) to the ECU to be retained with the original form.

- 7.2.4.2.6 Refer to the LIMS Protocol and User Manual (ID 4049) as needed to properly document evidence disposition.
- 7.2.4.2.7 If the staff member is unable to resolve the discrepancy, they shall contact a unit supervisor. The unit supervisor will contact the investigating officer to inform them that the discrepant item of evidence will not be analyzed, and the evidence will be returned. The supervisor will document the notification by making an additional entry in the electronic case record.
- 7.2.4.2.8 If a discrepancy is identified with items of evidence submitted by an external agency but collected by a different agency (e.g., clothing collected by SANE and submitted by investigating agency), the staff member shall notify the submitting agency and make an entry in the electronic case record noting the date and name of the person notified.
 - 7.2.4.2.8.1 The staff member will update the LIMS item description field(s) to reflect the update.
 - 7.2.4.2.8.2 The staff member will print the applicable ESF from LIMS and make the change(s) to that form, including handwritten initials and date next to the edit(s).
 - 7.2.4.2.8.3 The staff member will send a copy to the investigating or submitting agency and document when and to whom this updated form was sent in the electronic case record.
 - 7.2.4.2.8.4 The updated form will be scanned, uploaded, and stored in the electronic case record in LIMS by the editing staff member.
 - 7.2.4.2.8.5 The staff member will send the updated version (with handwritten edits) to the ECU to be retained with the original form.
 - 7.2.4.2.8.6 Analysis may proceed on the discrepant item.

7.2.5 Evidence Discrepancy from a Laboratory Analyst

- 7.2.5.1 If a staff member identifies a discrepancy, the staff member will contact the Analyst to resolve the discrepancy. The staff member will make an entry in the electronic case record , noting the date and name of the person notified.
 - 7.2.5.1.1 If the analyst approves the change, the electronic case record shall document the individual's approval regarding the change to the original item/inventory prior to casework being performed on that item(s). See

Sections 7.2.4.2.2 through 7.2.4.2.6 for proper documentation to be completed by the staff member.

7.2.5.1.2 If the staff member is unable to resolve the discrepancy, they shall contact their direct supervisor.

7.3 Procedure for Addressing a Case Information Discrepancy

- 7.3.1 This section provides procedures for handling a case information discrepancy found on the original submittal form after the submission is received and entered into LIMS. When a discrepancy is discovered, the staff member must determine whether the case information is inaccurate.
- 7.3.2 The Analyst may reference the incident report to verify case information discrepancies. If the incident report is not present, or the discrepancy cannot be resolved by referencing the report, the Analyst will confirm the relevant case information discrepancy with the investigating or submitting agency. The Analyst will document how they resolved the discrepancy by making a note to file in LIMS by referencing the report and noting the date and name of the person who confirmed the change. If the Analyst is unable to obtain confirmation from the agency, the Analyst will document the attempts made to confirm the information by making a note to file in LIMS and will resume analysis.
- 7.3.3 Case information discrepancy should not be corrected on the original submission forms. The correction should be documented by making a note in the electronic case record informing all users why the information was changed.
- 7.3.4 In circumstances where evidence is received under the wrong case number, the evidence and documentation should be transferred and submitted under the appropriate case number. Please refer to the Procedures for Documenting a LIMS Electronic Chain of Custody Discrepancy in the MSPCL LIMS Manual for additional guidance.

7.4 Resolving Post-Submission Evidence Packaging and Sealing Variances

- 7.4.1 If outer evidence packaging is sealed but does not contain the initials and date of the submitting agency, the person who discovered the seal variance will place their initials and date across the seal and write "reseal" next to the seal. The supervisor of the person who received or collected the evidence shall be notified.
- 7.4.2 For internally created packaging, if packaging is sealed but does not contain the initials and date of the person who sealed it, the person who discovered the seal variance shall contact their supervisor. The supervisor will determine if the original unit or receiving unit will inventory and reseal. This will be documented in the electronic case record.
- 7.4.3 If damage to a sealed container or packaging is discovered post-submission, document the seal condition in the electronic case record.

7.4.4 If the damage potentially compromises the integrity of the evidence, a supervisor shall be notified. The supervisor will make arrangements for the same day or the next business day with the appropriate unit supervisor(s) to assess the packaging. A supervisor shall visually inspect the item to determine if an inventory is to be conducted to confirm the contents of the package

7.4.4.1 If an inventory is needed, the unit supervisor will conduct the inventory in comparison to the item description on the ESF.

7.4.4.1.1 If no items are missing, the supervisor will reseal the container with their initials and date and add a note in the case file.

7.4.4.1.2 If it is determined that items are missing, the unit supervisor shall reseal with their initials and date, add a note in the electronic case record, and notify the Quality Assurance Manager. The supervisor shall notify the submitting agency of the damage to the packaging and item discrepancy and confirm the items that were submitted.

7.4.4.2 If an inventory is not required, the packaging shall be initialed and dated by either an ECU supervisor or unit supervisor with the word "reseal" and a note to the electronic case record.

7.4.5 If an item's existing packaging is damaged or needs to be placed into another container for extra support, the existing packaging should be retained in the new packaging. The LIMS label on the existing package should be lined out with the appropriate initials and date, and a duplicate replacement LIMS label should be generated for the new packaging. If the original packaging needs to be discarded for health and safety reasons, refer to the empty package discarding procedures within.

7.5 Post-Examination Seals for Bags

7.5.1 In re-sealing the bag, the Analyst uses evidence tape over the portion of the container that was opened to seal the package. The Analyst then runs a strip of serrated tamper-evident (STE) tape across and over the evidence tape so that tampering with the container's tape results in obvious damage/alteration to the container or seal. Once the tape is in place, the Analyst then initials/dates the STE tape extending their initials beyond the tape into the packaging margin (e.g., initials should extend from tape on to bag, box) making it difficult to reposition the tape correctly and thereby demonstrate tampering.



7.6 Post-Examination Seals for Box

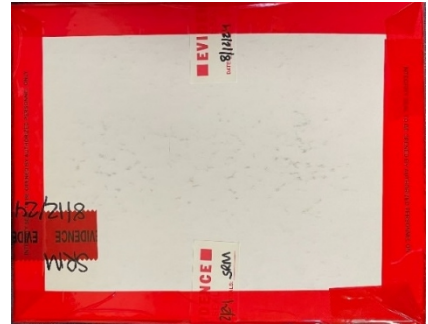
7.6.1 In re-sealing the box, the Analyst uses evidence tape over the portion of the container that was opened to seal the



package. The Analyst then runs a strip of STE tape across and over the evidence tape so that tampering with the container's tape results in obvious damage/alteration to the container or seal. Once the tape is in place, the Analyst then initials/dates the STE tape extending their initials beyond the tape into the packaging margin making it difficult to reposition the tape correctly and thereby demonstrating tampering.

7.7 Post Examination Seals for Sexual Assault Evidence Collection Kit (SAECK)

The SAECK is re-sealed with evidence tape covering all four open edges on the bottom side of the kit box. The Analyst then runs a strip of STE tape across and over the evidence tape so that tampering with the container's tape results in obvious damage/alteration to the container or seal. Once the tape is in place, the Analyst then initials/dates the STE tape extending their initials beyond the tape onto the kit box making it difficult to reposition the tape correctly and thereby demonstrating tampering.



7.8 Handling Currency

7.8.1 Receiving and Documenting Currency

- 7.8.1.1 Currency will only be accepted for processing as evidence.
- 7.8.1.2 Currency will not be accepted for storage or safe keeping.
- 7.8.1.3 All currency being submitted will be documented on the ESF.
- 7.8.1.4 Two individuals shall verify the total currency amount by denomination. A note shall be added to the electronic case record to document the verification of the currency and the individuals verifying.
 - 7.8.1.4.1 For crime scenes, the scene responder shall make an additional notation in their field notes or a note in the electronic case record pertaining to the amount collected. This should be verified by a second individual as soon as practicable. This verification may be completed on scene by a member of another unit or agency.
 - 7.8.1.4.2 After the total currency amount by denomination has been verified by both the receiving person and the submitter, the receiver shall sign the ESF on the designated Acknowledged Receipt location.
 - 7.8.1.4.3 If the total currency amount cannot be verified due to the possibility of damaging or altering its evidentiary value, it must be packaged and sealed prior to being accepted. A note should be added to the electronic case record documenting that the total currency amount by

denomination could not be verified. The currency will be entered in LIMS as soon as possible. The chain of custody will be documented until the currency is returned to the investigating agency.

- 7.8.1.5 The submitter should complete the ESF.
- 7.8.1.6 Currency submitted with drug evidence will not be verified and will follow Section 9, Drug Evidence Submission Procedures.
- 7.8.1.7 If currency is discovered by an Analyst during casework processing, the Analyst will follow Step 7.8.1.4 and document their findings by sampling the parent item in LIMS.
 - 7.8.1.7.1 The Analyst will place the currency into a new container and create a return assignment for the currency, outlining in the comments field of the assignment that the container contains currency.
 - 7.8.1.7.2 The Analyst should document the discovery of the currency in the electronic case record.
- 7.8.1.8 If currency is found during a crime scene or at the time of submitting the evidence to the lab, the responder will follow steps 7.8.1.4, if a second individual is not available at the time of submission, the total currency will be verified as soon as practicable after submission.
 - 7.8.1.8.1 The scene responder will place the currency into a new container and create a return assignment for the currency, outlining in the comments field of the assignment that the container contains currency.
 - 7.8.1.8.2 The scene responder should make an additional notation in their field notes or enter a note in the electronic case record pertaining to the amount collected or found.
- 7.8.1.9 All currency without forensic value, regardless of the amount, shall be returned to the submitting agency as soon as practicable.

7.9 Handling of Non-Biological Items Potentially Containing Drugs for Non-Drug Analysis

- 7.9.1 Non-Biological items potentially containing drugs for non-drug analysis are defined as items that may contain small/trace amounts of potential controlled substances.
 - 7.9.1.1 Examples of these types of evidence include but are not limited to:
 - 7.9.1.1.1 Vape pens, smoked/burnt cigarette like material, items with potential drug residues (scales, blenders), and/or liquids, beverages or food that may have been poisoned or tampered with.
 - 7.9.1.2 These items are often not being submitted for drug analysis, but the Drug Unit may assist depending upon the analysis required.

7.9.2 The items will be packaged individually in packaging material that best suits the type of analysis being requested (no plastic/HSP for items for DNA, aluminum cans for volatile liquids), sealed and initial/dated.

7.9.2.1 Vape Pens must be packaged separately from any other item in a paper bag or manila envelope for safety purposes.

7.9.3 A red security seal will be placed on each sealed opening and the unique number(s) will be documented by the submitting individual on the Evidence Submission Form.

7.9.4 Items do not need to be stored within the Drug Vault but may be stored in the applicable storage location per the requested analysis.

7.9.5 This evidence is not considered drug evidence for inventory and transport requirement purposes.

7.10 **Post Examination of Non-Biological Items Potentially Containing Drugs for Non-Drug Analysis**

7.10.1 If trace amounts of potential drug material separates from the parent item, it can be itemized and packaged with the parent item.

7.10.2 When re-sealing boxes or bags the Analyst uses evidence tape over the portion of the container that was opened to seal the package.

7.10.3 The Analyst will initial/date the tape extending the initials/date onto the packaging.

7.10.4 A new red/blue security seal will be placed over each new seal near the initial/date. The red/blue security seal can take the place of the tamper tape for exterior containers.

7.10.5 The red/blue security seal number(s) will be documented in the electronic case record.

8 **NON-DRUG EVIDENCE DISPOSITION**

8.1 **Purpose**

8.1.1 This section establishes the laboratory's procedures for the disposition of non-drug evidence.

8.2 **Disposition of Evidence**

8.2.1 The disposition of evidence includes: (1) return of non-drug evidence after it has been analyzed; (2) return of non-drug evidence that was not examined (as determined by the laboratory or upon request of the investigating agency or applicable county District Attorney's Office); and (3) destruction, or permanent disposal, of non-drug evidence.

- 8.2.2 Biological samples such as known standards, cuttings and snippets that have been created by an Analyst will be retained indefinitely unless authorized by the DA's office to return them to the submitting agency or if a court order for the destruction of evidence is received from the DA's office to destroy the evidence. A note in the electronic case record shall be entered for the respective case(s) with detailed information on who authorized the release or destruction. If additional documentation is provided (i.e., Court Order) a copy will be uploaded to the LIMS.

8.3 Disposition of Biological Samples

- 8.3.1 Test tubes containing blood and biological tissue samples present a significant health and safety hazard if not handled properly. To minimize the risk of biohazard exposure to those who handle these types of samples, they will only be returned to the investigating or submitting agency upon request.

8.3.2 Non-Toxicology Biological Samples

- 8.3.2.1 The agency may request the return by annotating the request on the Evidence Submission Form (ESF) or making a request by telephone or writing to the ET, Analyst or Evidence Control Unit Supervisor.
- 8.3.2.2 Once the biological tissue has been processed for analysis, the sample is retained, and any remaining contents are considered a biological hazard and will be properly disposed.

8.3.2.3 Known Blood Standards

- 8.3.2.3.1 Tubes of blood that have been swatched or are duplicate standards shall be refrigerated for six months in the event further analysis is required. Six months after the date of analysis, wherein no further analysis has been requested, the container will either be (1) returned to either the investigating or submitting agency (if requested) or (2) will be disposed of as a biohazard.

8.3.3 Human Performance Toxicology and Postmortem Toxicology Biological Samples

- 8.3.3.1 The agency may request the return of biological sample(s) by annotating the request on the Evidence Submission Form (ESF) or making a request by telephone or in writing to the Toxicology Unit supervisor. The Toxicology Unit will notify an Evidence Unit supervisor thereafter with the respective case and sample numbers.
- 8.3.3.2 Refer to the Toxicology Administrative Protocol (ID 4523) for sample retention information.

8.4 Return of Evidence without Analysis

- 8.4.1 There are times when the MSPCL may need to return case evidence to the investigating or submitting agency without analysis. If no evidence submitted in a

case is amenable to lab analysis, the laboratory shall notify the submitting agency that the evidence is being returned and document the notification in the electronic case record.

8.5 Return of Out of State Sexual Assault Kits

- 8.5.1 The kit will be retained in Sudbury on the Out of State Kit Shelf until the Case Management Unit provides disposition instructions.

8.6 Return of Evidence upon Request

- 8.6.1 If the underlying criminal matter is disposed of, adjudicated, closed, etc., and/or the investigating agency or the DA's office desires the return of evidence to the investigating agency, requests may be made to the Case Management Unit (CMU). The request will be documented in the electronic case record. CMU or the unit receiving the request will coordinate by closing any open requests/assignments that are no longer needed. A transport request/assignment shall be created in LIMS as applicable. The evidence will be returned by appointment if needed immediately or will be returned at the time of their next intake appointment.
- 8.6.2 The investigating agency or DA's office may provide written documentation to the laboratory authorizing a third party (i.e., not the investigating or submitting agency) to retrieve the evidence on their behalf by providing written documentation using the Third Party Evidence Release Form (ID 2718). The form will be uploaded to the electronic case record.

8.7 Documentation of Return of Evidence

- 8.7.1 The return of evidence to the investigating or submitting agency will require documentation of the signature of the person or officer to whom the evidence is returned.
- 8.7.2 The investigating or submitting agency personnel receiving evidence from the MSPCL shall receive a copy of a receipt confirming the transaction from LIMS.
- 8.7.3 The electronic signature of the ET and/or Analyst returning the evidence shall be documented on the original copy stored in LIMS.
- 8.7.4 If capturing an electronic signature is not possible, a hard copy receipt will be signed by the person or officer whom the evidence is returned to and the ET and/or Analyst returning the evidence.
 - 8.7.4.1 A copy of the receipt will be provided to the agency, and the original will be scanned and uploaded to the electronic case record and the original will be sent to ECU for storage with the ESF.
- 8.7.5 Please refer to the Evidence Return Instructions (ID 3745) for additional guidance.

8.8 Destruction of Evidence Upon Request (Non-Biological Samples)

8.8.1 It is the Crime Lab's policy not to destroy evidentiary material unless:

- Court order has been received for destruction
- Samples analyzed within Toxicology Unit

8.9 Destruction of Proficiency Tests

8.9.1 A list of case number(s) for any retained proficiency tests will be forwarded to the QA Manager to review and approve prior to destruction.

8.10 Procedure for Handling Empty Packaging

8.10.1 The following procedure should be followed when evidence or samples have been removed from the original container either to be preserved or consumed in analysis and empty packaging is to be discarded.

8.10.1.1 Ensure that the seals of the original packaging have been documented by means including, but not limited to, photography, photocopy or handwritten notes. The documentation of the seals shall be kept in the case record.

8.10.1.2 The Analyst will make a note in the case log table indicating what container was discarded.

8.10.1.3 When applicable, if item(s) were removed from the packaging for the purpose of preservation the item(s) shall be packaged into a new container.

9 DRUG EVIDENCE SUBMISSION PROCEDURES

9.1 Purpose

9.1.1 This section establishes procedures for submitting drug evidence to the MSPCL. It provides guidance to both internal MSPCL employees and external submitting agencies on how to handle drug evidence submissions and found drugs during examination or analysis.

9.1.2 The procedures for the submitting agency representative need to be communicated by MSPCL personnel, if not already communicated using information handouts, or posted signs at the Evidence Intake areas.

9.2 Requirements for Submitting Drug Evidence

9.2.1 Prior to submission, all drug evidence must be inventoried by the submitting agency. This information shall be documented on the Evidence Submission Form. The drug evidence shall be sealed in a suitable container

9.2.2 Handling Oversized Items

9.2.2.1 Case items that are too large for packaging within heat-sealed bags may be sealed following the accepted procedures for packaging non-drug evidence.

The evidence must be stored in the drug vault.

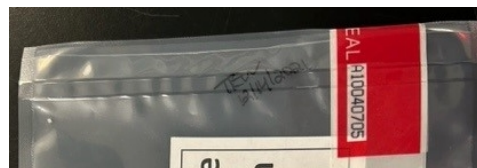
- 9.2.2.2 Massachusetts State Police (MSP) case evidence that is too large to store in the drug vault will be taken to the bunker at MSP Headquarters. Access to the bunker is arranged through the MSP Evidence Control Section (ECS). The ECS coordinates with the Drug Unit for the purpose of permitting a Drug Unit Analyst to weigh evidence, and sample evidence to be analyzed at the Drug Unit.
- 9.2.2.3 Non-MSP case evidence that is too large to store in the drug vault will be submitted to the laboratory, sampled, analyzed and returned in the same day if possible.

9.3 Removing Items from Original Drug Packaging for Non-Drug Analysis

- 9.3.1 If drug packaging is approved for non-drug analysis per the MSPCL Item Analysis Policy, the Case Management Unit will make arrangements with the Drug Unit to separate packaging for transport to other units.

9.4 Submittal Procedure for the External Submitting Agency Representative

- 9.4.1 The submitting agency representative will advise the ET of the number of incoming cases they have to submit.
- 9.4.2 The ET will provide the submitting agency representative with a heat seal packet, if needed, for uniform storage of the drug evidence. The submitting agency representative will package the items in the heat-sealed packet and use the available heat sealer to seal the packet. The submitting agency representative shall Initial and date the seal.
- 9.4.3 The ET shall provide the submitting agency representative with the appropriate red security seal(s) for each container being submitted.
- 9.4.4 Red Security Seals are not amenable to markings; therefore initials/dates cannot extend across them.
- 9.4.5 For heat sealed packets, the submitting agency representative shall place one red security seal on or near (not below) any non-manufacturer heat seal. See photos below for acceptable seal options.



- 9.4.6 For boxes, the officer shall initial/date each 'H' seal (top/bottom of box) and then place one red security seal over each 'H' seal. See example below. Additional tamper tape is not required for drug boxes.



- 9.4.6.1 Non-standard seam boxes (e.g. banker boxes) will be placed into another box where "H" seals can be applied, when possible.
- 9.4.6.2 If an oversized non-standard seam box cannot be placed into another box where an "H" seal is possible, each open seam will be sealed with red evidence tape - the officer shall initial/date and then place one red security seal over each set of interconnected seams (e.g. for a banker box, the seams around the lid will be sealed with red evidence tape - the officer will then initial/date a portion of this seal and apply one red security seal over an adjacent portion).



- 9.4.6.3 For boxes with a completely removable lid, two red security seals will be applied to secure it to the box, the seals will be placed so they are on opposite sides of the lid.
- 9.4.7 For paper bags and envelopes, evidence tape must be placed across any openings, and then one red security seal must be placed across that evidence tape. Additional tamper tape is not required.
- 9.4.8 The submitting agency representative shall record the unique seal number from the red security seal(s) on the ESF.

9.4.9 The ET will provide the submitting agency representative with LIMS bar-code labels for each case. The representative shall apply one bar-code label to the ESF, and one label to the corresponding evidence.

9.4.10 The submitting agency representative shall then provide the sealed and labeled container with the ESF to the ET or Analyst.

9.5 Submittal Procedure for the Evidence Technician or Analyst for External Submissions

9.5.1 Once the evidence has been sealed by the submitting agency representative, the evidence packaging shall only be opened in the presence of either the Evidence Unit Supervisor, Drug Unit Supervisor or the Drug Analyst assigned to the case.

9.5.2 Verify that the evidence is packaged appropriately according to the guidance in the information papers. If evidence is packaged incorrectly, direct the submitting agency representative on how to package the item correctly. Enter a note in the electronic case record. The entry will describe how the evidence was originally packaged during submission, the steps that were taken to correct the packaging and any other information that could be used to track the packaging during the original custody of the item.

9.5.3 Review the ESF for administrative accuracy and match the ESF with the evidence tendered making sure that the case number is on each package of evidence submitted (if more than one). Ensure the red security seal number is accurately transcribed on the ESF. If errors are noted, provide the form back to the submitting agency representative to make corrections.

9.5.4 Sign the ESF and give the submitting agency representative a copy as a receipt.

9.5.5 Enter basic case information in the LIMS to include investigating agency, drug submission code and submitting agency representative's name. For ECS cases, the ET or Analyst will review the information entered by ECS and make the appropriate edits.

9.5.6 Place the evidence into a secure evidence room designated for the storage of drug evidence and update the custody in LIMS.

9.5.7 Forward the drug file folder (if created) to the Drug Unit.

10 DRUG EVIDENCE HANDLING PROCEDURES

10.1 Purpose

10.1.1 This section establishes procedures for handling drug evidence and found drugs during examination or analysis.

10.2 Resolving Post-Submission Drug Evidence Packaging and Seal Variances Pre-Analysis

- 10.2.1 If the outer packaging contains a red security seal(s) that corresponds to the unique identifier(s) listed on the ESF, but the seal does not contain the initials of the submitting agency representative and the date of submission, the person who discovered the variance will place their initials and date across the seal and write “reseal” next to the seal.
- 10.2.1.1 A note will be added to the electronic case record and the container will be moved to the outgoing drug evidence area so the submitting agency representative can review the package and add their initials/date at the next appointment at the laboratory.
- 10.2.2 If the outer packaging contains a red security seal(s) but the number(s) does not correspond to the unique identifier(s) listed on the ESF.
- 10.2.2.1 The individual will check to confirm if the seal contains the initials and date of the submitting agency and aligns with the date of submission or a date prior to submission (to account for agencies who may seal their items at the time of collection or prior to submission).
- 10.2.2.1.1 If the above conditions are met the person who discovered the variance will update the unique identifier on the ESF and add a note to the electronic case record.
- 10.2.2.1.2 If the date and initials do not align with the date of submission or a date prior to submission (to account for agencies who may seal their items at the time of collection or prior to submission), the individual will notify a unit supervisor to utilize video surveillance to confirm if the package integrity is compromised. The supervisor will follow steps 10.2.3.2 or 10.2.3.3 as applicable
- 10.2.3 If the ESF does not contain the unique red security seal number, but the package is sealed, initialed and dated by the submitting agency, the case will be brought to a supervisor.
- 10.2.3.1 Video surveillance may be accessed (refer to the Policy on Security Video Recording – ID 2790) to confirm the red security seal on the package matches that upon submission.
- 10.2.3.2 If the security seal matches via video surveillance, a note and screen capture of the video will be added to the electronic case record and the security seal # will be added to the ESF by a unit supervisor.
- 10.2.3.3 If the security seal does not match, the Forensic Support Section Manager, Director, Assistant Director, Deputy Director of Forensic Chemistry, Forensic Chemistry Section Manager, and the Quality Assurance Manager will be notified immediately, and the package will be secured in a drying cabinet with a locked seal until further action is taken.
- 10.2.4 If the outer packaging does not contain the appropriate red security seal(s), but the

package is sealed and initial/dated by the submitting agency, the case will be brought to a supervisor.

- 10.2.4.1 Video surveillance may be accessed (refer to the Policy on Security Video Recording – ID 2790) to confirm the initial/date across the seal matches that upon submission.
- 10.2.4.2 If the initials/date match via video surveillance, a note and a screen capture of the video will be added to the electronic case record and a security seal # will be added to the package and document on the ESF by a unit supervisor.
- 10.2.4.3 If the initials/date do not match or cannot be determined by video surveillance if the initials/date match, the Forensic Support Section Manager, Director, Assistant Director, Deputy Director of Forensic Chemistry, Forensic Chemistry Section Manager, and the Quality Assurance Manager will be notified immediately, and the package will be secured in a drying cabinet with a locked seal until further action is taken.
- 10.2.5 If damage to a sealed container or packaging is discovered post-submission, document the seal condition in the electronic case record, taking a photograph and uploading if feasible.
 - 10.2.5.1 If the damage potentially compromises the integrity of the evidence, a drug supervisor shall be notified. The drug supervisor will make arrangements for the same day or the next business day to assess the packaging (items will be secured in a drying cabinet with a locked seal until they can be assessed).
 - 10.2.5.2 A drug supervisor shall visually inspect the item to determine if an inventory is to be conducted to confirm the contents of the package
 - 10.2.5.2.1 If an inventory is needed (i.e. if items are at risk of escaping from the outer package), the drug supervisor will conduct the inventory in comparison to the item description on the ESF.
 - 10.2.5.2.2 If there is no inventory discrepancy, the supervisor will reseal the container with their initials and date and add a note in the case record.
 - 10.2.5.2.3 If it is determined that there is an inventory discrepancy, the drug supervisor shall reseal with their initials and date, add a note in the electronic case record, and notify the Quality Assurance Manager and the Crime Laboratory Director. The supervisor shall notify the submitting agency of the damage to the packaging and inventory discrepancy and confirm the items that were submitted.
 - 10.2.5.3 If an inventory is not required (i.e. the damage is minor and items could not readily escape), the packaging shall be initialed and dated by a drug supervisor with the word “reseal” and a note to the electronic case record.
- 10.2.6 If an item’s existing packaging is damaged or needs to be placed into another

container for extra support, the existing packaging should be retained in the new packaging. The LIMS label on the existing package shall be lined out with the appropriate initials and date, and a duplicate replacement LIMS label shall be generated for the new packaging. If the original packaging needs to be discarded for health and safety reasons, refer to the empty package discarding procedures within this manual.

- 10.2.7 If there are any questions that arise that are not addressed in this procedure and need immediate attention (e.g., an item cannot be accounted for), the Crime Laboratory Director, Deputy Director of Forensic Chemistry, Forensic Chemistry Section Manager, Forensic Support Section Manager and the Quality Assurance Manager will be contacted.

10.3 Discrepancies

- 10.3.1 See the Drug Unit administrative protocol for direction on drug evidence discrepancies identified by the Drug Unit.
- 10.3.2 If a drug evidence item cannot be accounted for the Crime Laboratory Director, Deputy Director of Forensic Chemistry, Forensic Chemistry Section Manager, Forensic Support Section Manager and the Quality Assurance Manager will be contacted.

10.4 Handling Found Drug Evidence and Internal Drug Evidence Transfers

- 10.4.1 If drug evidence is found in clothing or other evidentiary items during the course of non-drug analysis, the Analyst should proceed as follows:
 - 10.4.1.1 Take a digital photograph of the drug evidence and retain in the case record.
 - 10.4.1.2 Separate the drug evidence from the item and place it into a heat-sealed package (i.e., Kapak bag). See Section 5.5.11.9 Hypodermic Needles and Syringes, Section 7.9 Handling of Non-Biological Items Potentially Containing Drugs for Non-Drug Analysis and/or Section 9.2 Requirements for Submitting Drug Evidence as needed.
 - 10.4.1.3 Obtain the appropriate red security seal(s).
 - 10.4.1.3.1 For heat sealed packets, place one red security seal on or near (not below) any non-manufacturer heat seals. See photos below for acceptable seal options.





10.4.1.3.2 For boxes, place one red security seal over each 'H' seal. See example below.



- 10.4.1.4 Update the LIMS record to create a sample from the parent item so that the record is clear as to what item of clothing (or other container) the drug evidence was found in. Make a note in the electronic case record describing what was found and documenting the unique red security seal number(s).
- 10.4.1.5 If the found item would be processed by the Drug Unit, the evidence must be stored in a properly secured evidence storage room until such time as they can be transported to the drug vault at the Evidence Control Unit (ECU).
 - 10.4.1.5.1 The Analyst will notify the Evidence Unit Supervisors of the drug evidence found. The Evidence Unit Supervisor will be responsible for coordinating the transport of the drug evidence to the ECU. The Evidence Technician will create the drug file, as needed. The drug evidence will be scanned to the drug vault and the drug file will be forwarded to the Evidence Unit Supervisor.
 - 10.4.1.5.2 The Evidence Unit Supervisors will contact the investigating case officer (IO) and inform them that drug evidence was found during examination and that the drug evidence was sent to the ECU. The Evidence Unit Supervisors will coordinate with the IO if analysis is needed or if the evidence can be returned.
- 10.4.1.6 If the found item falls under Section 7.9, the red security seal number shall be added to the package and noted in the electronic case record . The item(s) can be sent for further analysis as suitable.

10.4.1.6.1 The individual who found the item should follow Section 7.2.

10.4.2 If drug evidence is found on the floor or in the area of a workbench, the Analyst or ET shall proceed as follows:

10.4.2.1 The Analyst or ET will seal the sample into a heat-sealed package and notify a unit supervisor immediately of the found drug evidence.

10.4.2.2 The supervisor will work with the Analyst or ET to determine if the sample originated from a respective case that was either recently submitted or analyzed. The sample will be documented under a new LIMS Case Number and the Quality Assurance Manager will be notified by email of the findings.

10.4.2.3 If the sample is found in the Evidence Control Unit, the Evidence Unit Supervisor shall consult a Drug Unit Supervisor to determine if the sample is a potential drug sample. If it is determined the sample is not drug related it will be disposed of in a biohazard bin.

10.5 Reseal and Inventory Requests

10.5.1 The MSPCL performs reseal and inventory for State Police agencies. Narcotics repackaging requests are initiated directly by the Evidence Control Section .

10.5.2 The MSPCL will not accept requests to re-seal or inventory cases that were returned without analysis.

10.5.3 The CL-55 Form is to be completed when evidence needs to be re-sealed, re-tested or inventoried by the laboratory.

10.5.4 Requirements for Submitting Agency:

10.5.4.1 The NIU Team Leader will complete the top portion of the CL-55 form to initiate re-sealing, re-testing and/or inventory requests.

10.5.4.2 Place a mark next to the action requested (e.g., re-sealing only, re-sealing and inventory, reanalysis and re-sealing).

10.5.4.3 Complete the "Signature of Supervisor or NIU Team Leader," and "date" fields.

10.5.4.4 If the original packaging seal is broken, the submitting agency representative will re-seal the package prior to submitting the evidence.

10.5.4.4.1 The ET shall provide the submitting agency representative with the appropriate red security seal(s) for each container being submitted.

10.5.4.4.2 For heat sealed packets, the submitting agency representative shall place one red security seal over any non-manufacturer heat seal.

10.5.4.4.3 For boxes, the submitting agency representative shall place one red

security seal over any taped seal.

10.5.4.4.4 The submitting agency representative shall record the unique seal number from the red security seal(s) on the CL-55.

10.5.4.5 If the original MSPCL seals were not broken, no further action is needed.

10.5.4.6 The submitting agency representative shall then provide the sealed and labeled container with the CL-55 to the ET or Analyst.

10.5.5 Requirements for the Evidence Control Unit:

10.5.5.1 Ensure the red security seal number matches that on the ESF, SP-295, or CL-55. If errors are noted, provide the form back to the submitting agency representative to make corrections.

10.5.5.2 The ET or Analyst returning the evidence will provide the White copy of the CL-55 to the agency when the evidence is being returned to the agency.

10.5.5.3 The ET or Analyst returning the evidence will provide the Evidence Control Unit Supervisor with the yellow copy of the CL-55. The supervisor will mail the yellow copy of the CL-55 to the Commander or Department Head of the respective department by the Evidence Control Unit after the evidence is returned.

10.5.5.4 The pink copy of the CL-55 will be retained in the Drug File.

10.6 Storage of Completed Cases

10.6.1 When the analysis is complete, the evidence will be stored in a secure evidence room approved to store drug evidence. Once the report is complete, the following will occur:

10.6.1.1 The evidence will be placed in the proper outgoing storage area.

10.6.1.2 The case file folder(s) will be placed in the proper outgoing storage area under the appropriate LIMS Department Code or with the evidence marked for return. This file identifies the case as ready to be picked up.

10.7 Return Procedure for the Evidence Technician or Analyst

10.7.1 When an agency representative comes to the laboratory to retrieve evidence, the ET or Analyst will refer to the outgoing file cabinet and determine which cases are ready for pickup, unless the files are being stored with the evidence. The procedure for the ET or Analyst when returning drug evidence to the representative of the submitting agency will be:

10.7.1.1 Retrieve completed cases from the outgoing storage area of the evidence room to be returned to the agency.

- 10.7.1.2 Scan the evidence to the agency representative using the barcode issued by the laboratory. The ET or Analyst should verify the identity of the agency representative by checking photo ID, unless the agency representative is known to the ET or Analyst.
- 10.7.1.3 A copy of the signed return receipt will be provided to the agency representative.
- 10.7.1.4 If a SP-295 Form was used the ET will follow the steps below in addition to the above.
 - 10.7.1.4.1 ET or Analyst will sign the SP-295 Form under the “Submitted by Whom” column.
 - 10.7.1.4.2 Have the agency representative sign and print their name on the SP-295 Forms under the “Delivered to Whom” column.
 - 10.7.1.4.2.1 Note: The above ‘wet’ signature requirements on the SP-295 may be omitted when returning bulk (20 cases or more in a day) unanalyzed evidence to an MSP agency. The electronic equivalent will substitute.
 - 10.7.1.4.3 The agency representative will be given the white and yellow copies of the SP-295 Form with the evidence.
 - 10.7.1.4.4 The pink copy of the SP-295 will remain in the Drug File Folder.
- 10.7.2 Refer to Evidence Return Instructions (ID 3745) for additional guidance.

10.8 Destruction of Drug Evidence

- 10.8.1 The MSPCL does not participate in the drug destruction program.

10.9 Destruction of Analyst Proficiency Tests and Training Cases (Narcotics)

- 10.9.1 The Deputy Director of Forensic Chemistry and the Quality Assurance Manager will authorize the destruction of any proficiency or training cases retained by completing the disposition section of the SP-295 form. Alternatively, if no SP-295 was generated, a note to file in LIMS may authorize this destruction. The samples will be disposed of by the appointing authority responsible for the destruction of drug evidence.

11 TRANSFER OF EVIDENCE PROCEDURES

11.1 Purpose

- 11.1.1 The section establishes the procedures for transferring evidence during the course of analysis and between MSPCL locations by MSPCL employees.

11.2 General Guidelines

- 11.2.1 Transfer of non-drug evidence between MSPCL facilities should follow the Satellite-to-Unit / Unit-to-Satellite Transfer policy, see Section 11.4 Unit-to-Unit Transfer Procedures.
- 11.2.2 Procedures for handling found drug evidence during regular casework and the transfer of drug evidence between the MSPCL facilities should follow Section 10.3, Handling Found Drug Evidence and Internal Drug Evidence Transfers.

11.3 MSPCL Electronic Chain of Custody Procedures for Casework and Case Files

11.3.1 Electronic Chain of Custody Procedures for Casework

- 11.3.1.1 The Analyst shall scan the evidence to their personal “Analyst Custody” in LIMS during the course of analysis, examination and/or processing.
- 11.3.1.2 The Analyst shall secure the evidence at the end of each workday such that it is protected from deleterious change.
- 11.3.1.3 The Analyst shall scan the evidence to a completed location when the evidence is ready to be transferred or returned.

11.3.2 Evidence Transfer Procedures for Case Files

- 11.3.2.1 The MSPCL employee shall scan the case file to their personal “Analyst Custody” in LIMS if the file is in their physical custody for court proceedings or transfer to another satellite laboratory.

11.4 Unit-to-Unit Transfer Procedures

11.4.1 Non-Drug Samples Recovered from Evidence during Examination

- 11.4.1.1 For samples recovered from evidence, excluding DNA snippets, the Analyst will package evidence to be delivered to a specific unit for analysis (such as Trace or Arson analysis) separately and identify this evidence with a new LIMS label. Once the evidence is sealed in its new container, the container shall be delivered to the Evidence Control Unit or placed into a designated secure transport location. The Analyst shall provide the Evidence Technician or Analyst with instructions for transfer and or request/assignment, and a copy of the ESF. The Evidence Control Unit will forward the appropriate paperwork to the Unit/Section receiving the evidence.

11.4.2 Additional Examination Requests

- 11.4.2.1 There are times when evidence is examined by one MSPCL Unit/Section then it is determined later that examination is needed by another MSPCL Unit/Section on the same item. If additional examination is needed post-submission the Analyst should deliver the container(s) to the Evidence Control Unit or place it into a designated secure transport location. If applicable, provide the ET, Analyst or Evidence Unit Supervisor with instructions for transfer and or request/assignment. The Analyst should also

document the request by making a note in the electronic case record.

11.4.2.1.1 The ET or Analyst transferring the evidence should verify the container is properly sealed prior to transporting. Initiate a case folder or supplemental folder for the respective Unit/Section examining the evidence if applicable.

11.4.2.1.2 Depending on the type of evidence, the ET or Analyst should follow the steps listed in Section 7.8 Handling Currency, Section 10.3 Handling Found Drug Evidence and Internal Drug Evidence Transfers, and Section 11.4, Unit-to-Unit Transfer Procedures.

11.4.3 Non-Drug or Non-Firearm Evidence Satellite-to-Unit / Unit-to-Satellite Transfers

11.4.3.1 Transfer of evidence or samples recovered from evidence that needs to be transferred between MSPCL locations will customarily be made through the Evidence Control Unit. Transfer receipts are not required for Satellite-to-Unit / Unit-to-Satellite Transfers if the Analyst or Evidence Technician scans the evidence or samples into their AN custody, and, on arrival, the Analyst or Evidence Technician scans the evidence or samples to the Unit/Section the evidence is needed.

11.4.4 Transferring Firearms from Satellite-to-Unit / Unit-to-Satellite Transfers

11.4.4.1 Transfer of weapons between laboratories and forensic services Units/Sections shall be performed by Department of State Police personnel only, whether sworn or civilian, possessing a Firearms Class A Large Capacity License.

11.5 Drug Evidence Transports between Laboratories

11.5.1 Drug evidence may be transported by Evidence Technicians between drug laboratories (Sudbury and Springfield) for operational needs.

11.5.2 When drug evidence is awaiting transport between laboratories it will be scanned to a bulk evidence container and secured inside a Drug Vault.

11.5.3 When the transport bin is ready for transport, a container inventory will be conducted by two individuals. A list of the custody of the bin will be printed and compared to the items in the bin. If all items are accounted for the individuals will initial and date the custody list and provide it to an ECU supervisor.

11.5.4 The bin will be locked within the Evidence Control Unit and scanned to the Evidence Technician's LIMS AN custody for transport.

11.5.5 Access to the keys to unlock the transport bins will be maintained by the Forensic Chemistry and Evidence Control Unit management, Drug Unit Section Supervisor, Drug Unit Supervisors, Evidence Control Unit Supervisors, Forensic Support Section Manager and Supervisor and the Safety and Security Manager.

- 11.5.5.1 Sharing, borrowing, or duplication of any bin key is prohibited.
- 11.5.5.2 Any lost key shall be immediately reported to and documented by the Evidence Unit Section Supervisor and the Safety and Security Manager through the proper chain of command.
- 11.5.5.3 The keys shall remain in the respective facilities. At no time should the individual transporting the drug evidence transport the keys between facilities.
- 11.5.6 Upon arriving at the ECU all evidence will be removed from the locked transport bin and scanned to the drug vault to ensure all items are accounted for.
- 11.5.7 If individuals with access to the lock box keys are unavailable or any other reason precludes the removal of the evidence upon arrival, the entire locked transport bin will be transferred to the drug vault and stored until access can be made and the transfer of evidence completed.
- 11.5.8 For any evidence that is unaccounted for/lost/missing following transport, an Evidence Control Unit Supervisor, the Forensic Support Section Supervisor and Section Manager shall be immediately notified, and the event shall be documented in LIMS. The Crime Laboratory Director and Quality Assurance Manager shall be notified through the appropriate chain.