More than ‘CSI’ – Forensic Nurses Work Where Law, Medicine Intersect

By JoAnn Klimkiewicz, Courant Staff Writer

At a Connecticut hospital, a nurse returns to a 50-year-old patient’s room to find the woman dead. Admitted for a minor ailment, the patient had been scheduled to be discharged in two days.

A closer look, and it’s clear there has been a scuffle. A gash on the patient’s nose. Bloody debris under her fingernails. A blood-soaked paper towel in the wastebasket. Another nurse reports that she heard an argument between the woman and her nephew, a drug user who daily pestered her for money. She saw him clutching his arm and heading for the elevator.

This hospital room is now a crime scene, and the nurses know not to disrupt a thing – any innocent detail could provide compelling evidence. Soon, from behind yellow police tape, a gaggle of investigators snap pictures, measure the scene and meticulously sketch the room – all with support from the nurse, trained in collection of crime-scene evidence.

It’s all very “CSI.” And that’s the point of this mock scenario, staged for graduate nursing students last week at Quinnipiac University in Hamden. Because for all its gory glamorization of crime-scene investigations, the hit CBS series has overlooked an emerging player amid all the hype: forensic nurses.

“Forensic nursing? People say, ‘Oh, you work with dead people’ … or they say, ‘Oh, is that like ‘CSI’?’ I get that all the time,” says Kristin Schaer, a forensic nursing student at Quinnipiac who orchestrated the fake hospital scene as part of her final graduate presentation.

“And I have to explain there’s so much more to it than that.”

Indeed, the field covers a broad spectrum, but it’s most simply defined as the intersection of nursing with the law. That can mean working with victims of domestic and sexual violence or elder and child abuse. It can mean assessing criminal defendants or treating the prison population. It can mean helping legal professionals navigate the health care side of a case. And, yes, it can mean death investigations.

Still, if the term is unfamiliar, there’s good reason. A fledgling field just now coming into its own, forensic nursing was only recognized as a specialty in 1995 by the American Nurses Association. Nurses had been practicing forensics for decades. But they never had a label for...
their work until a collective of nurses, primarily sexual-assault examiners, defined their field with the creation of the International Association of Forensic Nurses in 1992.

“We needed to have an organization, an umbrella under which we function, that gave us an increase in visibility and credibility,” says Barbara Moynihan, coordinator of Quinnipiac’s forensic nursing program. She spent a decade as head nurse at Yale-New Haven Hospital’s emergency department and is considered one of the state’s groundbreaking advocates of victim’s rights.

With its strong history in forensics, Connecticut has provided a laboratory of sorts for pioneers in the field. Quinnipiac was one of the first schools in the country to offer a master’s degree program in forensic nursing. Since its first class graduated in 2002, the program has produced nurses emerging as experts in the field. And last fall, Moynihan, fellow faculty member Elaine Pagliaro and retired professor Rita Hammer wrote what is only the second textbook dedicated to the study of the field: “Forensic Nursing: A Handbook for Practice” (Jones and Bartlett, $99.95).

Thick as a small phone book, the 900-page text includes a chapter by the state’s renowned forensic investigator, Henry Lee, and a forward by U.S. Sen. Joseph R. Biden Jr., D-Del. One of the proponents of the 1998 Violence Against Women Act, Biden likens forensic nurses to “foot soldiers” in the response to sexual and domestic violence and writes that they should become fixtures of every emergency room.

“I think we’re now at the point where people are recognizing what [forensic nursing] is, but they say, ‘Well, what am I going to do with it?’” says Pagliaro, assistant director of the Connecticut Forensic Science Laboratory in Meriden.

Plenty, she says. Polls consistently show nurses are among the most trusted professionals. They have good interview skills and know how to read nonverbal cues. And they’re detectives in their own right, having to piece together a host of patient symptoms to help determine treatment.

So forensic nurses, Pagliaro says, can prove valuable resources in building criminal cases or giving testimony at trials. They can accompany social workers in the field to help investigate suspicions of domestic or child abuse. And they can help shape policy in a society whose growing public health concerns stem largely from violence.

Schaer, who will be among 14 students graduating Sunday in the forensic nursing track, plans to use her degree, in part, as an advocate in her specialty of geriatrics.

“I felt frustrated when, as a staff nurse, I’d become aware of incidents of elder abuse and exploitation. I didn’t realize how much the degree would help me feel empowered,” says Schaer, who receive her associate’s degree in nursing about 10 years ago. She credits the forensics program for making her more aware of public health policy, prompting her to be a vocal supporter of the proposed federal Elder Justice Act. She would eventually like to establish, with some of her peers, a forensic nursing consultancy to work with attorneys and state agencies.

With the field still emerging, it faces misconceptions and a sense by some agencies that forensic
nurses are treading on established territory. And Nancy Cabelus can speak from both sides of the police tape. With a background in nursing, she became a state trooper and later graduated with Quinnipiac’s first forensic nursing class. After 20 years with the state police, she retired last month as a detective in the major crimes division and is one of two students pursuing a doctorate in forensic nursing at the University of Tennessee.

“I would detect some confusion over the role [of a forensic nurse]. They might be misinterpreted as trying to be detectives, or they just want to be like ‘CSI’ or maybe the cops would get a little defensive or territorial about their roles,” says Cabelus, who also contributed to the Quinnipiac professors’ textbook. “But once they understand the role, it’ll become more accepted.”

Because, says Cabelus, “Forensic nursing is no passing fad. It is very grounded. And it’s here to stay.”

Why should the general public be interested in this obscure profession?

“Interpersonal violence is such a huge public health issue. Turn on the news and you see there’s so much violence out there,” says Cabelus. “And who is going to treat those victims properly, collect the data, process the information? If a forensic nurse isn’t involved, you may lose evidence ... or you might not detect signs of repeated abuse,” says Cabelus.

She reflects on her time as an emergency room nurse and puts it this way:

“When the police brought in someone involved in ... an assault or rape, I always felt there needed to be a bridge between the medical field and the law enforcement field,” she says. “You felt yourself bridge that gap, yet it didn’t have a name yet. And that’s what forensic nursing is. It’s that bridge.”

If leaders in the field are good at predicting, the bridge is set to get more foot traffic in the coming years. The International Association of Forensic Nurses now has 3,000 members, up from the original 72 who established the group more than 10 years ago, says President Daniel Sheridan.

With the elder population poised to grow, with violence such a major societal issue - and yes, with the popularity of shows like “CSI” – Sheridan says the field will see healthy growth.

This being National Nurses Week, and the profession celebrating its 100th anniversary, Cabelus says she’s amazed to see how the specialty has blossomed in just a decade.

“This discipline is on fire. When you think how far we’ve come ...,” she says. “I think, Where are we going? We’re blazing trails.”

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