



**Quality Division Use Only**

Quality Tracking #:	<input type="text" value="2018-077"/>	Classification:	<input type="text" value="Incident"/>
Non-Conformance Level:	<input type="text" value="N/A"/>	Section:	<input type="text" value="Crime Scene"/>
Date of Discovery:	<input type="text" value="07/24/18"/>	Date of Incident:	<input type="text" value="07/11/18"/>

Forensic Case Number(s), if applicable:	Agency Case Number(s), if applicable:
2018-10241 2018-04973 2018-11694 2018-13350	087880318 039090718 101527318 115560018

**Description of Non-conformance:**  
In three instances, the Firearms section received items of evidence originally collected by the Crime Scene Unit (CSU) that, upon opening and inspecting the items, appeared to have a possible blood stain on them but they were not labeled with a biohazard sticker on the outer packaging. In a fourth case, the crime scene investigator (CSI) wrote "visible blood" on the item's outer packaging but did not put a biohazard sticker on the packaging. The lack of biohazard labels on potentially biologically contaminated items is a violation of Crime Scene Unit SOP clause 2.8.

**Actions Taken:**  
In all four instances, Firearms section management notified the CSIs on the cases and the CSU supervisors. All appropriate swabs were taken from the items prior to the Firearms section decontaminating the items so there was no risk of losing any potential DNA evidence. There is no further action required for any of these four cases. The CSIs were assigned and required to pass a Qualtrax test with questions regarding how to handle biologically contaminated evidence items. Section 2.8. of the CSU SOP was revised to include verbiage that says contaminated items shall be labeled in a way to indicate they could be potentially biohazardous, i.e. a biohazard sticker or "visible blood" written on the outer packaging.

**Summary of Root Cause Analysis:**  
**Note: Incidents are documented for tracking purposes and trend analysis. Root Cause Analysis is not required for incidents.**



N/A

**Additional Information/Follow-Up:**

This was an administrative error that did not have an impact on the technical results for any section involved. In case 039090718/2018-04973, the CSU swabbed the gun for contact DNA. However, the CSI did not notice any blood on the gun when collecting the item and therefore did not swab for blood and did not mark the packaging as a biohazard. Since the Firearms section believed there to be blood on the item, the Firearms manager contacted the investigating officer who then requested the gun be swabbed for blood. The item was then transferred to the Biology section to be swabbed. In case 087880318/2018-10241, the gun that Firearms received for analysis was confirmed to have been previously swabbed for blood by the CSI, but the item was not labeled as a biohazard. There were 57 items collected at this scene and the lack of the biohazard sticker on this particular item was an oversight by the CSI. In 101527318/2018-11694, the outer packaging was not labeled as a biohazard. The item had been transferred from the CSI who collected it at the scene to another CSI to deliver the item to the Property Room. The item was transferred in the original packaging that was appropriately labeled with a biohazard sticker. However, after accepting custody, Property Room personnel placed the item into a new envelope and did not place a biohazard sticker on the new outer packaging. The original packaging with the appropriate label was inside the envelope and was available for the firearms section to see that it was potentially biohazardous. This item was not swabbed for contact DNA or blood because the CSI was given permission by her supervisor not to swab the item due to the events of the crime scene which was captured on surveillance video. In case 115560018/2018-13350, the CSI wrote "visible blood" on the outer packaging but did not use a biohazard sticker. The use of a biohazard sticker or the word "biohazard" written on the packaging, was required by the Crime Scene Unit SOP. Although it was made apparent that the item contained blood, the outer packaging label did not follow policy. Firearms personnel are required to wear PPE when opening evidence so there was no potential safety risk due to the lack of the label. It should also be noted that the HFSC Multi-Disciplinary Review Lean Six Sigma project team is looking into this situation.

Section Manager: Domingo Villarreal

Date: 10/23/18

Division Director: Jerry Pena

Date: 10/29/18

**Incidents or Corrective Actions that involve the Biology/DNA section are reviewed by the Technical Leader and CODIS Administrator.**



**Houston Forensic Science Center**  
**Incident/Corrective Action Report**  
Quality Division

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**Technical Leader:** N/A  
**CODIS Administrator:** N/A

**Date:** N/A  
**Date:** N/A

**Quality Director:** Lori Wilson

**Date Closed:** 10/29/18