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## PART II

### Statutory Notifications (S. R. O.)

GOVERNMENT OF PAKISTAN  
MINISTRY OF LAW AND JUSTICE

### NOTIFICATION

*Islamabad, the 14th February, 2023*

**S. R. O. 187(I)/2023.**—In exercise of the powers conferred by sub-section (1) of section 19 of the Anti-Rape (Investigation and Trial) Act, 2021 (XXX of 2021), the Ministry of Law and Justice, upon the recommendations of the Special Committee, is pleased to make the following rules, namely:-

### CHAPTER-I

#### Preliminary

**Short title and commencement.**—(1) These rules shall be called the Anti-Rape (Crises Cell and Medico-Legal) Rules, 2022.

(2) These rules shall come into force at once.

449(1—12)

Price : Rs. 20.00

2. **Definitions.**—(1) In these rules, unless there is anything repugnant in the subject or context,—

- (a) “Act” means the Anti-Rape (Investigation and Trial) Act, 2021 (No. XXX of 2021); and
- (b) “ARCC” means the anti-rape crises cell established under section 4 of the Act.

## CHAPTER-II

### Establishment of Anti-Rape Crises Cell

3. **Establishment of anti-rape crises cell.**—(1) An anti-rape crisis cell (ARCC) shall be established to perform functions under the Act and these rules.

(2) A dedicated ambulance shall be made available with ARCC and shall be pressed into service in case a distress call is made to the ARCC desk. In remote areas where an ambulance may not be available, any motor vehicle equipped with or containing medical equipment for urgent medical aid shall be attached.

(3) ARCC entrance shall have a reception desk with one male and one female staff. The female staff member shall be present at all times. Pamphlets/booklets both in Urdu and English explaining the facilities available for the victim at ARCC shall be present at the reception.

(4) A duty roster shall be maintained at the ARCC containing names, job description and contact numbers of all employees and persons in attendance.

(5) A register of records shall be maintained for all patients visiting ARCC in the format giving in Schedule “A” on computer as well as on notebook registers.

(6) Telephone at the reception desk shall be available to take distress calls. The staff shall be trained and shall be able to note down information given by the victim, guide the victim on steps to be taken, dispatch an ambulance along with one female nurse staff of ARCC in case the victim is at the scene of crime.

(7) Database of all local police stations, medico-legal officers (MLOs), special prosecutors, gynecologists, pediatricians, physiologists and relevant forensic department officers may be present and readily available at all ARCCs in computer and on register.

(8) ARCCs may be equipped with a secured E-ARCC Software which will have all information data of victims; it will enable prompt exchange of information with police/forensics department.

(9) Priority shall be given to immediate treatment of the victim and appropriate measures shall be taken to ensure privacy.

(10) New and clean clothing (free size) for women and children be available as replacement for those taken away for evidence/forensics purposes.

(11) Basic amenities such as running water, refrigerator for storage of samples, separate clean and functional bathroom for the victim and the staff along with one drying cupboard for clothes of the victim should be present in each ARCC.

(12) ARCC shall assist the victim or the person who has brought the victim to make emergency calls to the police, family or friend.

(13) For assisting minors/persons with disabilities, use of human figure dolls or other methods along with diagrams may be provided to explain an act or fact.

(14) List of sign language may be maintained in ARCC to facilitate persons with disabilities.

(15) Room for examining of minors shall be a child friendly room with brightly lit/ calming color paint on at least one of the walls, toys (especially clean stuff/plush toys) for minor victims to play with.

(16) In case the victim comes at night and does not have a safe place to stay they may be allowed to stay the night at the ARCC until arrangements are made for them at *dar-ul-amans* or other government facilities designated in their behalf.

(17) Entry of all sorts of media/print will be banned at the ARCC. No statements by the staff of the ARCC are allowed at all times. Disclosure of identity of the victim by any staff member of ARCC will be subjected to prosecution under section 375A of the Pakistan Penal Code, 1860.

(18) Security guard shall be present at the entrance of the ARCC.

(19) No family member or friends shall be allowed to remain with the victim if there is suspicion of involvement.

4. **Composition of Workforce at the ARCC.**—(1) Each ARCC shall be headed by the Deputy Commissioner and shall include Medical Superintendent, and District Superintendent of Police (DSP).

(2) Each ARCC shall also include preferably a senior female doctor and female nurse having full understanding and training of the medical/legal aspects involved in cases of sexual assault/rape of women and children. Presence of a woman medical practitioner to conduct medical examination for sexual violence cases shall be ensured by the district administration and respective provincial governments.

### CHAPTER-III

#### Treatment and Medico-Legal Examination

5. **Treatment and medico-legal examination upon arrival.**—(1) No victim shall be refused treatment and medico legal examination for any reason whatsoever and medico-legal examination shall be conducted as per guidelines prescribed guidelines under Schedule "B".

(2) Victim with severe injuries will be treated for the injuries first. The victim shall be immediately sent to the emergency ward of the hospital. ARCC shall be equipped with full first aid and such other medical facilities to provide for minor to grievous injuries.

(3) For the protection/wellbeing of the victim, anti-biotics for wounds to prevent infections, tetanus booster, medication to relief anxiety/pain be administered, also blood tests for sexually transmitted infections be taken and incase of the result being positive medications be prescribed. Basic HIV testing should also be done. HIV PEP medications should be administered if the victim has come within seventy two hours of being raped or assaulted. If the HIV result is positive, referrals on the basis of confidentiality shall be made by ARCC. Pregnancy test shall also be taken, Emergency contraceptive pills (ECPS) may be administered if rape victim has come within 72 hours from the commission of crime.

(4) After the medico-legal examination, the victim be allowed to shower/wash up using toiletries present at ARCC.

(5) A fresh set of free size clothes be given to the victim for recording of statement and counseling after undergoing medico-legal examination.

6. **Medico-legal examination procedure.**—(1) The medico-legal examination procedure will be headed preferably by a female medico-legal officer (MLO), nominated and designated by Medical Superintendent in this behalf.

(2) A manual of medico-legal examination shall be present at every ARCC providing step by step instructions for the MLO as provided in Schedule-B of these Rules.

(3) Each MLO should be assisted with preferably at one (trained in examination of sexual assault) female nurse, available twenty-four hours 3 shifts.

(4) The MLO should be able record of emotional state of the victim such as shaking/signing of emotional shock at the beginning of the exam. The MLO should be able to conduct a speedy and through examination of the victim so that humiliation due to repetitions be avoided.

(5) The examination of the victim shall be conducted immediately after registration of FIR and no later than four to six hours ordinarily.

7. **After medico-legal examination.**—(1) MLO should prepare the official medico-legal report based on facts and findings of the examination and should not take more than two to three days.

(2) The medico-legal report shall be prepared without any delay after obtaining all tests results such as x-rays, pregnancy, ultrasound etc.

(3) Copy of the medico-legal report be provided to the investigation officer from special sexual offences investigation unit (SSOIU) and the victim.

8. **Forensic protocols.**—(1) At least twenty sexual assault kits shall be present at each ARCC. Each sexual assault kit will have written and detailed instructions with diagrams on how to use the sexual assault kit for the examiner, printed in Urdu and English. The sexual assault kit will have two Forms for documentation purposes which shall include details of the procedure conducted, time, injuries sustained and details of all evidence obtained.

(2) The Sexual Assault Kits shall have the following: ample sterile swabs for collection of biological data, tubes and containers for blood and urine samples, two disposable tweezers, two large paper bags for collection of clothes and other such physical evidences, a large sheet of white paper on which the victim will stand and undress for collection of hair/fibers, non-powered gloves and face masks for the examiner, dental floss and wooden sticks for finger nail scrapings and combs, distilled water ampules, saline for sample taking, envelopes and box along with relevant labels for each stages of the conducting of the exam.

(3) All electronic as well as physical record shall be present at the relevant forensic laboratory of all sexual assault kits for improvement of quick identification, criminal mapping and better case investigation.

[illegible]

## SCHEDULE-B

### General Guideline for Conducting Medico-Legal Examination

**Step 1 — Introduction:** Greet the victim by their preferred name and make the victim your central focus. Introduce yourself to the victim and tell them your designation, *i.e.* Medico-Legal Officer. Have a calm demeanour, maintain eye contact as much as the victim is comfortable. Be empathetic and non-judgmental.

**Step 2 — Preparing the Victim:** Provide the victim with necessary assurances and explain to them that you are there to listen and help. Ask the victim if they have any questions and answer their questions calmly.

**Step 3 — Obtaining Informed Consent:** Use simple terms to inform the victim of the purpose of the examination, outline the various steps involved in the examination for the victim to understand. The information should be communicated in a non-threatening and non-intimidating manner. Explain to the victim that they have the right to refuse examination. Also explain that if they decide to file FIR against the perpetrator, the medical examination report will be used in trial. Once you are satisfied that the victim has sufficient information to provide informed consent, ask them to sign or mark the consent form.

Please Note: There can be no blanket consent regarding medical examination, the victim has to be explained each step involved in the medical examination in order to obtain consent.

**Step 4 – General Medical History:** After obtaining consent, record the victim's medical history. The medical history would record any known health problems (including allergies), immunization status and medications. Useful questions could be:

- a. Have you seen a nurse or doctor lately?
- b. Have you been diagnosed with any illnesses?
- c. Have you had any operations?
- d. Do you suffer from any infectious diseases?
- e. Do you have any allergies?
- f. Do you take tablets given to you by a health worker?

**Step 5 – Gynaecological History:** After obtaining the victim's consent and their trust, in cases of sexual assault, it is important to take note of the victim's gynaecological history. Questions that could be asked include:

- a. When was the first day of your last menstrual period?
- b. Have you had any sexual relationship prior to this event?

- c. Have you had any pregnancies? How many and how were they delivered?
- d. How many children do you have?
- e. Were there any complications during delivery?
- f. Do you use contraception? What type?
- g. Do you have a current sexual partner?
- h. When did you last have intercourse that you agreed to? (Details may be required if DNA analysis is to be performed.)

**Step 6 – Details of the Rape Incident:** In an empathetic tone and demeanour, ask the victim details of the sexual assault or rape. Do not ask too many questions or interrupt the victim. Give them space to speak and do not indulge in any kind of victim blaming. Important information regarding the assault could include the following:

- a. The date, time and location of the assault, including a description of the type of surface on which the assault occurred;
- b. The name, identity and number of assailants;
- c. The nature of the physical contacts and detailed account of violence inflicted;
- d. Use of weapons and restraints;
- e. Use of medications/drugs/alcohol/inhaled substances;
- f. How clothing was removed.

Finally, note details of any symptoms that have developed since the assault; these may include:

- a. Genital bleeding, discharge, itching, sores or pain;
- b. Urinary symptoms;
- c. Anal pain or bleeding;
- d. Abdominal pain.



**Step 7 – Preparing for Physical Examination:** Before starting the physical examination, take time to explain all the procedures to the victim and why they are necessary. Give the victim a chance to ask any questions. Throughout the physical examination inform the victim what you plan to do next and ask permission. Always let the victim know when and where touching will occur. Show and explain instruments and collection materials. Try to provide as much privacy as possible to the victim during examination. The following universal precautions should be observed at all times during the examination:

- a. Wear gloves whenever in contact with blood or other body fluids;
- b. Change gloves between victims; it may sometimes be necessary to change gloves during the examination in order to prevent contamination;
- c. Wash hands with soap and water after any exposure to body fluids or blood, between clients, and after removing gloves;
- d. Wear protective eye-wear, masks or face shields if there is a possibility of splashing blood or body fluids into your eyes, face or mouth;
- e. Do not recap used needles;
- f. Do not bend or break needles after use;
- g. Dispose of used needles in special impermeable sharps containers immediately after use.

**Step 8 — Physical Examination:** Start the physical examination of the victim to record your findings. The following steps should be followed to thoroughly document the injuries/wounds on the victim's body:

- a. Note the victim's general appearance and demeanour. Start with the victim's hands; this will reassure the victim. Take the vital signs, *i.e.* pulse, blood pressure, respiration and temperature. Inspect both sides of both hands for injuries. Observe the wrists for signs of ligature marks. Inspect the forearms for any injuries which may include bruising, abrasions, lacerations or incised wounds. Check for tenderness and swelling is of great significance.
- b. The inner surfaces of the upper arms and the armpit need to be carefully observed for signs of bruising. Inspect the face. Black eyes can also be subtle. Look in the nose for signs of bleeding. Inspect the ears, not forgetting the area behind the ears, for

evidence of shadow bruising; shadow bruising develops when the ear has been struck onto the scalp.

- c. Gentle palpation of the scalp may reveal tenderness and swelling, suggestive of haematomas. Hair loss due to hair pulling during the assault may cause large amounts of loose hair to be collected in the gloved hands of the examiner; alternatively, a gentle combing may recover any loose hair.
- d. The neck area is of great forensic interest. Bruising on the neck can indicate a life-threatening assault. Imprint bruising may be seen from necklaces and other items of jewellery on the ears and on the neck.
- e. The victim can then be reclined for an abdominal examination, that is to say an inspection for bruising, abrasions, lacerations and trace evidence. Abdominal palpation should be performed to exclude any internal trauma.
- f. With the victim still in reclined position, the legs can be examined in turn, commencing with the front of the legs. Check any abrasions to the knee as well as the feet. The soles of the feet should also be examined.

**Step 9 – Medical Examination for Rape:** Inspect the genitals, pelvic region and surrounding areas for markings, scratches, lesions etc. A swab of the external area should be taken before further examination to collect traces of blood, saliva or semen. Examine the pelvic region as well to note any lacerations due to penetration or attempted penetration as well as traces of bodily fluids. After taking a swab of the external area, examine and collect swabs and samples of the internal area of penetration.

**Step 10 – Report of Examination of Victim:** As per section 164A of the Code of Criminal Procedure 1898, female victims should be examined by a female registered medical practitioner, immediately after commission the offence. The female victim should also be escorted by a female police officer or a family member from her place of convenience to the place of medical examination.

In the report of the examination include the following information:

- a. Name and address of the victim and of the person by whom she was escorted;
- b. Age of the victim;

- c. Description of materials taken from body of the victim for DNA profiling;
- d. Mark of injuries on the body of the victim;
- e. General mental condition of the victim;
- f. Particulars of any other materials, in reasonable detail, taken from the victim;
- g. The report should state precisely the reasons for each conclusion;
- h. The report should specifically record the consent of the victim or his or her guardian for the medical examination;
- i. The report should document exact time of commencement and completion of the examination.
- j. After completing the examination report, without any delay, send the examination report to the Investigating Officer to be forwarded to the Magistrate.

**Step 11 – Medical Treatment:** Victims of sexual violence may contract a sexually transmitted infection (STI) as a direct result of the assault. Therefore it is important to test victims for STIs and provide them with the necessary treatment. Counseling should also be provided to cope with the trauma of the incident.

**Step 12 – Examination of Arrested Person:** Under section 53A of Code of Criminal Procedure, 1898, it is lawful for a registered medical practitioner employed in a hospital run by the Government to make an examination of the arrested person in such cases.

**Step 13 – Report of Examination of Arrested Person:** In the report of the examination of the arrested person make sure to include the following information:

- a. Name and address of the arrested person and of the person by whom he was brought for medical examination;
- b. Age of the arrested person;
- c. Marks of injury, if any, on the arrested person;
- d. Description of material taken from the arrested person for DNA profiling;

- e. Particulars of any other materials, in reasonable detail, taken from the arrested person;
- f. The report should state precisely the reasons for each conclusion;
- g. The report should document exact time of commencement and completion of the examination.
- h. After completing the examination report, without any delay, send the examination report to the Investigating Officer to be forwarded to the Magistrate.

Important Information: As per section 164B Cr.PC, DNA samples are to be collected for evidence.

**Step 14 – Forensic Evidence Collection and Submission:** All the samples or contents collected during examination should be sent for laboratory or chemical examination. Submit the report to Investigation Officer and make sure that the report is signed and dated. Make sure to include your opinions on the wounds and injuries in the medical report before filing the report to Court for further proceedings.

[File No. 2(3)/2022-DLA.]

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