

# Taking Good Photographs Pocket Guide

Photographic documentation of visible injuries and physical examination findings is an essential skill for the medical provider. Such documentation could now be said to represent the standard of care for abused and neglected children. Photographs do not substitute for accurate, detailed written descriptions of all relevant findings. Rather, they are a pictorial representation of such findings.

## Photographic Equipment

Digital photography has completely supplanted film photography for forensic documentation of child abuse. The equipment can include digital still cameras, such as DSLRs and the newer mirrorless cameras, digital video cameras, and photo colposcopy systems. Digital technology produces images that can be stored easily and printed when needed. For legal reasons, take care to avoid changing the image in any way.

Cell phone photography has emerged as a convenient way to photograph significant findings. Using a cell phone app such as Haiku, the images can be directly transmitted to the electronic medical record (EMR). The same principles of photo documentation apply when using a cell phone to take pictures. Because cell phone lenses are not covered, they should always be cleaned just before photographing.

No matter the equipment used to obtain the photos, no photos should be deleted, and all photos must be managed as part of the medical record. If they are not directly transferred to the EMR, a secure system must be in place for transfer and storage with sufficient, redundant backup.

## Photography Tips

The principles of photography in child abuse include proper planning, good equipment, adequate lighting, and planned composition:

- Whatever camera is used, it is important to set the camera to its highest resolution and lowest compression to obtain the best photos.
- Good lighting is crucial. It may be helpful to use a flash. Setting the flash to bounce off a wall rather than strike the skin directly may help. If using a flash overexposes or washes out the image, take photos with and without a flash.
- Because of variations in lighting and display modalities, photos should not be relied on to identify the true color of a lesion. If color identification is important, documentation should occur in the written report. Note, bruise color analysis to determine age of a lesion is often inaccurate.
- If possible, avoid background clutter in the photograph.
- Compose the picture the way you normally look at the area.
- Take photographs so that the surface that is to be photographed is parallel to the camera sensor and at the same level.
- Still cameras can be set to “center spot focus” so that only the lesion of interest is in focus. It is possible to center the focus on a cell phone camera by touching the screen where the lesion is.

- The first picture should include the patient's name, date of birth and date of examination. This can be combined with a photo of the child's face, or the face photo can be separate.
- Very young children may not hold still for photographs. Having an assistant or two distract the child or having the child sit on an assistant's lap sometimes helps.
- Take at least 3 photos of a finding: distance to show the finding in relation to neighboring anatomy, close-up to show the finding in detail, and finally with an added ruler.
- Document pattern or circumferential injuries, such as burns and bite marks, by showing multiple views.
- If it is difficult to photograph lesions adequately with a single still image or when the injuries are extensive, consider using a video camera, burst shooting or video on a still camera.
- When using video, it is important to move the camera slowly so the scene does not appear "scrubbed."
- Use close-ups to document pattern injuries and marks of restraint or bondage so that these injuries might later be compared with the rope or object that made the marks.
- Take close-up photographs of hands and fingernails to show damage to the nails, missing nails, or traces of blood, skin, or hair.
- Photograph transfer evidence that may be present on the body or clothing, such as dirt, gravel, or vegetation.
- It is always better to take more photos rather than fewer.

Source: Photo Documentation in the Documentation Chapter of *Child Abuse Evaluation & Treatment for Medical Providers*, ChildAbuseMD.com.

See the CHAMP [Photo Documentation Practice Recommendation](#) for more information and resources.

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