**Determination Of The Need To Perform An Autopsy/Inspection Based On The Cause of Death**

**Policy**

The purpose of this policy is to establish the procedures for determining whether an autopsy needs to be performed and, if so, the steps to be followed based on the cause of death. The results of the investigative report, input from any investigative agency, the patient’s medical records and other evidence should be considered when determining whether an autopsy should be performed.

The policies and procedures that follow are meant to be a guideline to establish the quality and caliber of performance expected from coroner, assistant coroners, Forensic Pathologists and others who may represent the coroner’s office in the investigation and/or autopsy of a questionable or suspicious death.

**Procedure**

***A) Death from an Unknown Cause***

When a death occurs from an unknown cause the following procedure should be followed to determine the need for an autopsy:

1. Determine through an investigative report and visual examination of the body, or legal mandate, whether a case will be autopsied or examined.

1. An autopsy may be needed to determine the cause and manner of death if it cannot be determined through investigative reports, a medical examination, or by reviewing the patient’s medical history.

1. When cases require the involvement or presence of representatives of outside agencies, i.e.: Homicide, Traffic, etc. at an autopsy, the coroner or the forensic staff should coordinate a mutually agreeable time to perform the autopsy.

***B)******Violent Deaths****/* ***Homicide***

The bodies of all homicide victims shall be autopsied.

1. Bodies are to be placed in a body bag. The bag is then to be secured with an evidentiary seal before the body is transported to the funeral homes or autopsy faciity. This seal is to be broken only in the presence of the Forensic Pathologist/MDI. In situations where it becomes necessary to break the evidentiary seal prior to the examination, the person breaking the seal must document the situation and reseal the body bag to insure the proper chain of custody.

1. Care is to be taken to protect and preserve evidence and to assist the law enforcement agency investigating the case with the collection of evidence.

1. Blood samples and/or other body fluids should be collected for toxicology examination when warranted and if possible, depending on the availability of blood and body fluids.

1. The names of all law enforcement personnel present during the autopsy, including their rank and/or status, are to be included in the dictation of the case.

1. Any personal property found on the decedent and not impounded by law enforcement personnel shall be impounded by the forensic staff and properly inventoried and receipted.

1. Hands should be bagged and taped prior to placing the body in the body bag.

***C) Traffic Fatalities***

Traffic fatalities shall be inspected or autopsied. Fatalities that indicate obvious fatal injuries and in which no prosecution will occur generally do not need to be autopsied.

1. Fatalities that occur but are delayed through medical intervention, that have hospital documentation of the cause of death, and no prosecution will occur, are generally not autopsied.

1. Fatalities in which prosecution is expected shall be autopsied or inspected by the Forensic Pathologist.

1. Fatalities in which no obvious fatal injuries can be detected and in which no prosecution is expected to occur, shall be autopsied or inspected by the Forensic Pathologist.

***D) Suicide***

Suicides may or may not be autopsied for the following reasons:

1.  The method by which the suicide was accomplished.

2. Information supplied through the investigation report and input from any investigating agency may indicate that an autopsy is not necessary.

3. An examination of the body determines whether wounds matchthe information that has been reported.

4. If evidence of foul play or suspicious circumstances is present, an autopsy may be indicated.

**Methods of Suicide –** the method used to commit suicide may indicate the need for an autopsy to be performed.

* Obviously fatal gunshot wounds are generally not autopsied. However, gunshot wounds without an exit wound and in which the projectile is to be recovered may require a partial autopsy.
* Hangings may be autopsied or inspected by the Forensic Pathologist.
* Jumps from a height shall be autopsied or inspected by the Forensic Pathologist.
* Slashing shall be autopsied or inspected by the Forensic Pathologist.
* Carbon Monoxide Poisonings shall be autopsied or inspected by the Forensic Pathologist.
* Stab wounds shall be autopsied or inspected by the Forensic Pathologist.
* Electrocutions shall be autopsied or inspected by the Forensic Pathologist.
* Inhalation of toxic gases shall be autopsied or inspected by the Forensic Pathologist.
* Asphyxias (by use of plastic bags, etc.) may be autopsied or inspected by the Forensic Pathologist.
* Overdoses of medication and/or illegal substances may be autopsied or inspected by the Forensic Pathologist.
* Other categories: Explosions, saws, etc.

***E)******On-the-job Deaths (Violent or Natural)***

When a person dies on the job due to an accident or through natural causes, an autopsy or inspection will be performed by the pathologist to document injuries or to confirm or rule out natural causes of death.

***F)******Deaths Due to Fire***

Victims of fire shall be autopsied or inspected by the Forensic Pathologist.

1. Careful consideration of all information from the investigative report, input from other investigating agencies, circumstances of the fire, and examination of the body in correlation to what has been reported, any photographs, medical records, and other information should be used to determine the cause and manner of death.

1. Badly burned bodies are to be autopsied with meticulous scrutiny of the body for signs of trauma, etc. X-rays of the body are to be taken to aid in identification of the body and to identify any hidden trauma.

***G)******Deaths Due to Drowning***

Victims of drowning shall be autopsied or inspected by the Forensic Pathologist.

Blood and/or other body fluids should be drawn and submitted for toxicology examination unless the death has been delayed. Should that occur, hospital admission blood or toxicology results are to be requested.

***H)******Deaths Due to Aviation Accidents***

 When a death occurs due to an aviation accident, the body(s) shall be autopsied or inspected.

1. The Coroner’s Office will cooperate with the National Transportation Safety Board and Federal Aviation Agency in their investigation, including obtaining specimens for shipment to their lab. The Kootenai County coroner’s office has an NTSB toxicology kit to be used solely for this purpose.

1. When the NTSB toxicology kit is used, the contents should be removed from their packaging and the instructions should be followed. Place the gel bags in the freezer and put the specimens in the refrigerator. Assemble the kit using the chain of custody sheet in use on the morning the specimens will be picked up. Have the courier sign the air bill, then staple the air bill to the chain of custody sheet and file it in the case file.

***I) Exceptions to the Above Guidelines***

Due to the nature of the Coroner’s work and the realities of the world, situations may come about that conflict with the above guidelines. Such situations will be reviewed with the Coroner or his/her designee for final resolution. In the event that legal next of kin opposes and autopsy the “Admonition Opposing Autopsy” form must be completed by legal next of kin and attached to the decedents file. All criminal cases will be autopsied, per Idaho Statutes.

***J) Natural Deaths***

The Coroner’s Office will investigate deaths that are natural. A large percentage of these are “NJR”, meaning that a Medicolegal Investigator from the Coroner’s office has responded to a reported death, examined the body and investigated the scene and circumstances. The decedent's physician will then be contacted and it will be discussed if he/she is willing to sign the Death Certificate. All case information will be entered in to the MDILog for documentation and all scene documentation will be scanned and become a part of the permanent electronic record.

Occasionally, the decedent's physician will later refuse to sign the DC..

Natural deaths that do not fit the “NJR” criteria are reviewed on a case by case basis. Autopsies shall be performed on apparent natural deaths when no obvious cause of death can be determined through investigation or through a combination of the following factors.

The following issues should be considered when reviewing cases for possible medical examination or autopsy:

* Chronological age (the actual age of the deceased)
* The age the deceased appears to be if noticeably different than the actual age
* Examination of body for evidence of disease processes not noted in the investigative report
* Examination of the body for evidence of trauma not noted in the investigative report
* Known medical history
* Medical records
* Lifestyle (i.e.: Nutrition, alcohol use, smoking, etc.)
* Circumstances surrounding death (i.e.: chest pain, sudden collapse, "indigestion", nausea, vomiting, shortness of breath, etc.)

Blood samples and/or other body fluids and/or tissue samples may be obtained as deemed necessary and are possible to secure during a medical examination.

1. Blood samples and/or other body fluid samples will be obtained at the time of autopsy, if possible and either sent for analysis or discarded as may be appropriate.

1. If in the course of examination of any "natural" death, abuse or foul play is suspected, the proper authorities will be called, including but not limited to: homicide, ID and Abuse, and Neglect units as warranted.

***K) Infectious Diseases***

In any case where an infectious disease is suspected or documented, (such as TB, Hepatitis, HIV, etc.), the risk factor to the Coroner’s staff is to be the first consideration in determining whether or not to perform an autopsy. The staff will not be unnecessarily exposed to any infectious diseases.

Whenever the Forensic Pathologist feels there is sufficient risk to the staff from autopsy on a potentially infectious disease case, the case should be brought to the attention of the Coroner or his/her designee for final resolution.

The Kootenai County Coroner’s Office will adhere to Idaho Administrative Procedure Act (IDAPA) of reportable diseases and conditions to our local Idaho Public Health District 4 (Central) or the Epidemiology Program within the Bureau of Communicable Disease Prevention.

Reports must be made within three (3) working days of identification or diagnosis unless otherwise noted on the reportable disease list. (See Attached)

***L) Infants, and Children***

Autopsies are performed on all infants and children. (The only exception where an autopsy would not be completed on a child or infant would be documented congenital anomalies, verified by the treating physician. The cause and manner must be communicated to the KCCO by the treating physician and will be a part of the permanent “NJR” record).

Whenever infants or children are examined and abuse is suspected, the proper authorities will be called.  When an infant or child is autopsied, the following steps will occur:

* Fullbody x-rays taken
* Fullbody photographs taken
* Microscopic examinations performed
* Blood samples and/or other body fluid samples will be obtained, if possible, at the time of autopsy
* Genetic screening

***M) Unattended Deaths***

Unattended deaths must be reported to the coroner’s office for determination of the need to investigate and/or perform an autopsy.

***N) Deaths at a Hospital or Hospital Emergency Room***

When a death occurs at a hospital the following procedure should be followed:

1. The MDI will obtain Emergency Room/Hospital medical records, H and P and speak to the treating nurse and physician regarding what had taken place, admit times, admit situation, family, and diagnosis. EMS and EMS run sheets needs to be copied, viewed and part of the MDI’s report. Interview EMS if available and present.

2. Verify next of kin. Interviews are to be conducted with the family (if available); acquire incident information, medical history and funeral home information.

3. Examine the body and take initial photographs. Determine whether the decedent needs to be transported to the KCCO for further inspection/autopsy. Communicate with the family.

4. Verify that there is a positive I.D. of the decedent, place an I.D. tag on the body, photograph.

***O) At-home Deaths***

When an unattended death occurs at a private residence, the following procedure should be followed:

* Respond to the residence.
* Interview paramedics if possible (always request EMS run sheet when they have responded.)
* If law enforcement is not on the scene, they need to be contacted. If law enforcement is present, discuss chain of events and circumstances.
* Examine the scene and the deceased along with law enforcement personnel. Determine whether case falls within “suspicious” category that would prompt needing a detective on scene.
* Talk with witnesses present to gather decedent’s personal information, medical history, additional issues etc.
* Take initial scene photos.
* Secure property and/or the residence if necessary.
* Photograph and collect medicines found at the scene and remove the medications from the scene.
* If property is to be secured, a property invoice should be completed and the first page should be placed in the front of the case file with a notation indicating where the property is being held. The second page of the invoice should be placed in the envelope with the property. The third page should be put on the clip board that remains with the body.
* Transport the body to the on call the funeral home.
* Contact the deceased’s primary physician and obtain medical history.
* An MDILog report will be created and will include the following;

a. The paramedic run sheet, police report, pharmaceutical report and medical records. If any of these reports are requested but not received, document the date and time requested, the person to whom the request was made and a contact phone number and place the information in the file.

b. If the on-duty MDI is unable to request any of these reports, an MDILog communication must be sent to supervisors requesting follow-up be completed.

***MISCELLANEOUS INFORMATION***

The Coroner will make the final decision regarding autopsy whenever the opinion not to autopsy conflicts with the policies and procedures set forth in this manual. This office operates with a strong “team” concept, and as such, staff members work together to help each other with whatever is required to ease the work load and maintain our collective integrity. This insures a smooth running operation as well as the strong sense of camaraderie we work so hard to achieve.