

Investigations

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Purpose

To identify best practices in the investigations of all deaths which fall under the jurisdiction of the coroner's office.

Policy

The medical investigator needs to be abreast on all current standards of death investigation and have working relationships and open lines of communication with local law enforcement agencies to effectively function in processing a death scene. See **Appendix B** for common scene forms used.

Procedures

Emergency Responders

An emergency medical team summoned to any scene for purposes of rendering medical attention to a human being has sole authority in determining when or when not to initiate resuscitative measures. In cases where rigor mortis, livor mortis or decomposition is obvious, or where mutilation is so severe as to preclude life, the first responder may elect to assume that death has occurred.

Under no circumstances may a medical investigator authorize the removal of life support or the cessation of resuscitative activity. This must be done by a qualified physician. An official pronouncement of death is typically made by physicians (MD & DO) and authorized coroner's deputies, however some agencies have agreements allowing other individuals to pronounce death, including but not limited to registered nurses, hospice nurses, and paramedics.

Law Enforcement Agency of Jurisdiction

State statutes require that both the law enforcement agency of jurisdiction and the county coroner representative work together in the investigation of reportable deaths.

Standard police response guidelines call for the first police responder to:

- Tend the injured
- Arrest the perpetrator
- Hold the scene
- Make initial determination of criminality vs. no criminality
- Notify the coroner immediately through established procedures for that community. They may notify their own department's criminal investigation unit or other law enforcement resources

When the medical investigator is the first to get notified of a reportable death in a home, hospital, or nursing home, it is the responsibility of that individual to contact the law enforcement agency of jurisdiction immediately before responding.

[REDACTED]

The body is not to be moved or tampered with in any way until the coroner representative arrives at the scene (except where there is danger to the body or to others at the scene). Due to potential scene hazards, the body may have to be removed before scene investigation can be continued (crowd control, collapsing structures, poisonous gases, traffic, etc.) and every effort should be made to involve the coroner/medical investigator in this process. Any actions involving the decedent by any responders or witnesses should be documented by the designated law enforcement investigator/officer and shall be relayed to the medical investigator on his/her arrival (e.g., CPR administered by passersby, body turned over by EMS, articles removed initially by witnesses or first responders, etc.).

Medical Investigator Response

The management of all scenes is the responsibility of the law enforcement agency of jurisdiction. The management of the body and materials that played a part in the mechanism of the death is the responsibility of the coroner. Scene response is the primary responsibility of the medical investigator. A scene investigation will be conducted in all accident, suicide, homicide, undetermined and reportable deaths unless otherwise specified. Scene investigations are not required for hospital deaths unless it is a suspected homicide, any unexpected child death (infant or toddler), or with other circumstances determined on a case-by-case basis. In these circumstances, response to both the scene and the hospital are required. Nursing home deaths, while reportable, do not require a scene investigation unless foul play is suspected.

Authorized coroner personnel at scenes may include:

- Coroner
- Medical investigator
- Forensic pathologist
- Forensic fellow
- Invited consultants (anthropologist, etc)
- Current pathology resident, medical student, or forensic student interns

High Profile Cases: A high profile case is any death that creates more public attention and news interest than other cases. These cases would include, but are not limited to, homicides, deaths of prominent persons, deaths of law enforcement officers and shootings by law enforcement officers. Medical investigators and assigned coroner staff (including medical students, residents and/or interns) are permitted at these scenes.

Arriving at the Scene

Introduce and Identify Self and Role: Upon arrival at a scene, the coroner representative will introduce him/herself to those individuals who are responsible for conducting the law enforcement investigation. All medical investigators are provided with a photo identification card to be used for identification and this should be worn and visible at all times. Introductions at the scene allow the medical investigator to establish formal contact with other official agency representatives. The medical investigator must identify the first responder to ascertain if any artifacts or contamination may have been introduced to the death scene. The medical investigator must work with all key people to ensure scene safety prior to his/her entrance into the scene.

Upon arrival at the scene, and prior to entering the scene, the medical investigator should:

- Identify the lead law enforcement investigator at the scene and present identification
- Identify other essential officials at the scene (law enforcement, fire, EMS, social/child protective services, etc.) and explain the medical investigator's

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- role in the investigation
 - Identify and document the identity of the first essential official(s) to the scene (first "professional" arrival at the scene for investigative follow-up) to ascertain if any artifacts or contamination may have been introduced to the death scene
 - Determine scene safety (prior to entry)

Exercise Scene Safety: Determining scene safety for all investigative personnel is essential to the investigative process. The risk of environmental and physical injury must be removed prior to initiating a scene investigation. Risks can include hostile crowds, collapsing structures, traffic, and environmental and chemical threats.

The medical investigator will attempt to establish scene safety prior to entering the scene to prevent injury or loss of life, including contacting appropriate agencies for assistance with other scene safety issues.

Upon arrival at the scene, the medical investigator should:

- Assess and/or establish physical boundaries
- Identify incident command, when established
- Secure vehicle and park as safely as possible
- Use personal protective safety equipment
- Obtain clearance/authorization to enter scene from the individual responsible for scene safety
- While exercising scene safety, protect the integrity of the scene and evidence to the extent possible from contamination or loss by people, animals, and elements

Fire & Explosives: In any situation where coroner personnel are summoned to scenes where a fire or explosive has or may continue to occur, coroner personnel are not to proceed until the individual in command of the appropriate fire department or Hazmat unit has issued an "all clear". Rescue personnel are responsible for determining whether live individuals are present. Once the determination has been made by rescue personnel that no life signs exist within the configuration, the retrieval of those assumed dead will proceed at a time when all jeopardy to the living has passed. The determination to enter such a situation is made by the medical investigator, and they cannot be ordered into any such situation until clearance of hazard is assured.

Presence of Criminality or a Dangerous Scene: Scenes to which a medical investigator has been summoned where armed and dangerous individuals are still at large, or where unruly onlookers or family members are present and there is actual threat of bodily harm, are to be rendered safe by the law enforcement agency of jurisdiction. When weighing threat to oneself over potential harm to the evidence contained on or in a body, the medical investigator must decide for one's personal safety.

Handling Dangerous Weapons or Devices: Rules of crime/death scene processing state that any device in or on the body, or any device that is or was a factor in the death is considered within the scope of the [REDACTED] investigation. This requirement must be tempered by the degree of danger presented by the acquisition of the device.

Syringes must be packaged in a secure device such as a sharps shuttle. In all cases of suspected injection related deaths the presence of syringes or other drug paraphernalia, whether on the body or at the scene, should be photographed and documented by the medical investigator and transferred to the control of the investigating law enforcement agency. Syringes should not be brought to the [REDACTED] except under extenuating

circumstances.

Firearms of any sort are the responsibility of the law enforcement personnel at the scene. Regardless of where the firearm is located (under a body or in an adjoining room) it is to be managed by the law enforcement agency and will be rendered safe by those individuals. Firearms should be photographed prior to being moved from the original position to the greatest extent possible. Firearms are not to be transported with a body to the coroner's office.

In cases where the pathologist requests the weapon be produced, it will be through or with specific instructions of the police agency. Firearms at scenes must never be moved prior to all parties completing their investigation under the guidelines of the Crime Scene Protocol found in this section.

Potential for Radioactivity or Hazardous Waste: The [REDACTED] Hazmat Team is responsible for managing all scenes where suspected hazardous wastes or radioactive materials may exist. No individual other than the specifically trained personnel can advise on the suitability of scene/body access.

The Colorado Department of Public Health and Environment Laboratory and Radiation Services Division can be contacted for specific information regarding the handling of radioactive cadavers. Reference material regarding investigation and examination of radioactive remains is also available in the [REDACTED] reference library.

Infectious Disease Cases: Medical Investigators often must touch, examine, or remove a body, or handle contaminated evidence and specimens. The health and safety of all staff is of utmost importance. Proper personal protective equipment must be worn at all times. This includes, at a minimum, proper gloves, but may include a splash-resistant suit, N95 mask, eye protection, and/or shoe covers.

Response Policy When Hazards Exist: When hazards exist in doing a scene investigation that exceed the ability of the medical investigator to handle in a safe manner, without risk to life or limb, this information is to be relayed to the on-call pathologist and a decision will be made on how the scene investigation is to proceed.

Confirm or Pronounce Death: Appropriate personnel must make a determination of death prior to the initiation of the death investigation.

When not confirmed prior to arrival, the medical investigator shall be taken to the decedent for pronouncement of death; the following observations should be documented:

- The location and appearance of the body.
- The presence or extent of rigor mortis, livor mortis, decomposition or severe mutilation.
- The absence of a heart beat on palpation.
- The absence of respiration by examination of the exposed chest and abdomen.
- Bilateral dilation and fixation of the pupils.
- The absence of reflexes.
- The date and time of pronouncement.

Participate in Scene Briefing: The medical investigator must recognize the varying jurisdictional and statutory responsibilities that apply to individual agency representative (e.g., law enforcement, fire, EMT, judicial). Determining each agency's investigative responsibility at the scene is essential in planning the scope and depth of each scene

investigation and the release of information to the public.

The medical investigator will identify specific responsibilities, share appropriate preliminary information, and establish investigative goals of each agency present at the scene. Discussions with the lead law enforcement investigator, the crime laboratory and the medical investigator will outline the requirements of each agency for processing the scene. The law enforcement investigator and crime lab personnel will determine how access will be managed. A discussion may take place at this time to determine if other expertise or consultation with other agencies is required.

When participating in the scene briefing, the medical investigator should:

- Locate the staging area (entry point to scene, command post, etc.)
- Document the scene location (address, mile marker, and building name) consistent with other agencies
- Determine the nature and scope of investigation by obtaining preliminary investigative details
- Ensure that initial accounts of incident are obtained from the first witness(es)

The law enforcement investigator shall apprise the medical investigator of the facts surrounding the death and information pertaining to a suspected cause and manner of death. The request for the presence of a pathologist or other forensic specialist will be discussed at this time.

If criminality is suspected and a crime laboratory investigation is required, the law enforcement investigator and the medical investigator will wait for the arrival of the crime lab unit prior to entering the scene.

Conduct Scene "Walkthrough": Conducting a scene walkthrough provides the medical investigator with an overview of the entire scene. The walkthrough provides the first opportunity to locate and view the body, identify valuable and/or fragile evidence, and determine initial investigative procedures providing for a systematic examination and documentation of the scene and body.

Personnel will be guided through the scene by the law enforcement investigator for purposes of observation and report requirements. If pronouncement of death has not occurred, it will be done at this time.

Prior to or during the scene walkthrough, the following may be required:

- Reassessment of the scene boundaries - adjust as appropriate
- Establishing paths of entry and exit
- Identifying visible physical and fragile evidence
- Documenting and photographing fragile evidence immediately
- Locating and viewing the decedent

Photography During Scene Walkthrough: Crime lab personnel will then proceed to photograph the crime scene. The medical investigator may take preliminary photographs at this point along with the crime lab. When the medical investigator has completed preliminary photography he/she will leave the scene while the crime lab personnel complete their duties.

Establish Chain of Custody: Ensuring the integrity of the evidence by establishing and maintaining a chain of custody is vital to an investigation. This will safeguard against subsequent allegations of tampering, theft, planting, and contamination of evidence.

[REDACTED]

Prior to the removal of any evidence, the custodian(s) of evidence shall be designated and shall generate and maintain chain of custody for all evidence collected.

Throughout the investigation, those responsible for preserving the chain of custody should:

- Document location of the scene and time of arrival of the medical investigator at the scene
- Determine custodian(s) of evidence, determine which agency(ies) is/are responsible for collection of specific types of evidence, and determine evidence collection priority for fragile/fleeting evidence
- Identify, secure, and preserve evidence with proper containers, labels, and preservatives
- Document the collection of evidence by recording its location at the scene, time of collection, and time and location of disposition
- Before leaving the scene, the body bag must be sealed. On suspected homicide cases, a tamper-proof numbered tag must be used to seal the bag. For non-suspected homicides, an [REDACTED] sticker seal should be utilized. On the sticker, the medical investigator must place their initials and the date and time the seal was applied.

Follow Laws Related to the Collection of Evidence: Medical investigators must follow local, State, and Federal laws for the collection of evidence to ensure its admissibility. The medical investigator must work with law enforcement and the legal authorities to determine laws regarding collection of evidence.

The medical investigator, working with other agencies, must identify and work under appropriate legal authority. Modification of informal procedures may be necessary but laws must always be followed.

Prior to or upon arrival at the death scene, the medical investigator should work with other agencies to:

- Determine the need for a search warrant (discuss with appropriate agencies)
- Identify local, State, or Federal laws that might apply
- Identify relevant coroner statutes and/or standard operating guidelines

Documenting and Evaluating the Scene

Photograph the Scene: Photography allows for the best permanent documentation of the death scene. It is essential that accurate scene photographs are available for other investigators, agencies, and authorities to recreate the scene. Photographs are a permanent record of the terminal event and retain evidentiary value and authenticity. It is essential that the scene investigator obtain accurate photographs before releasing the scene.

If evidence has been moved prior to photography, it should be noted in the report, but the body or other evidence should not be reintroduced into the scene in order to take photographs.

When appropriate and prior to moving the body or evidence, the medical investigator should:

- Remove all nonessential personnel from the scene
- Obtain an overall (wide-angle) view of the scene to spatially locate the specific scene to the surrounding area
- Photograph specific areas of the scene to provide more detailed views of specific areas within the larger scene

- Photograph the scene from different angles to provide various perspectives that may uncover additional evidence

Crime lab personnel will identify all physical evidence that is available and upon completion of this identification, photographs will be taken by that unit. The medical investigator may photograph all evidence that is necessary for their investigation but only under the guidance and jurisdiction of the crime lab team.

Criminalistics will be handled on-scene and in the morgue by the law enforcement jurisdiction's crime laboratory handling the case, by the Colorado Bureau of Investigations, or by an appropriate expert(s) which can be found in the resource book.

All photographs taken by the medical investigator or designated representative are the property of the [REDACTED] and are considered legal evidence. No original photographs are to leave [REDACTED] at any time. All original photographic material for review must be downloaded to the electronic case file and printed for the paper file.

Develop Descriptive Documentation of the Scene: Written documentation of the scene provides a permanent record that may be used to correlate with and enhance photographic documentation, refresh recollections, and record observations.

After photographic documentation of the scene and prior to removal of the body or other evidence, the medical investigator should:

- Diagram (not to scale) or describe in writing items of evidence and their relationship to the body with necessary markers
- Describe scene environment including odors, lighting, temperature, and other fragile evidence.

Establish Probable Location of Injury or Illness: The location where the decedent is found may not be the actual location where the injury/illness that contributed to the death occurred. It is imperative that the medical investigator attempt to determine the locations of any and all injury(ies)/illness(es) that may have contributed to the death. Physical evidence at any and all locations may be pertinent in establishing the cause, manner, and circumstances of death. In those cases where the decedent is pronounced in a hospital but the injury/illness occurred at another location, the medical investigator should conduct a scene investigation at the site where the injury/illness occurred whenever possible.

The medical investigator should:

- Document location where terminal event occurred and where death was confirmed
- Determine location from which decedent was transported and how body was transported to scene
- Identify and record rigor mortis, livor mortis, and body temperature as appropriate
- Check body, clothing, and scene for location and consistency/inconsistency of trace evidence and indicate possible artifacts
- Check for drag marks (on body and ground)
- Establish post-injury/illness activity
- Obtain outside records (law enforcement, EMT, medical records, etc) as appropriate
- Interview family members, witnesses, and other associates as appropriate
- If the decedent is transported to a separate location, in conjunction with the law enforcement agency of jurisdiction, visit the actual location where injury or illness occurred and conduct a thorough scene investigation.

[REDACTED]

Collecting, Inventorying and Safeguarding Property and Evidence: The crime lab personnel shall collect and preserve all evidence not found on the body. If an item of evidence not on the body is deemed important by the medical investigator to accompany the body, that evidence shall be documented by the medical investigator and crime lab personnel prior to transport with the body.

The decedent's valuables and property must be safeguarded to ensure proper processing and eventual return to next-of-kin. Evidence on or near the body must be safeguarded to ensure its availability for further evaluation.

All evidence receipted to the medical investigator or collected by the medical investigator, will be receipted back to the investigating law enforcement agency at the completion of the examination. Any evidence retained by [REDACTED] at the time of examination shall be receipted back to the law enforcement agency of jurisdiction as detailed in the Evidence section of these Procedures.

Any special requests for evidence collection from the body at the scene must be discussed by both agencies, and referred to the on-duty pathologist where questions exist. No evidence may be collected from the body if either party feels the evidence could be jeopardized.

For all homicide or suspicious deaths, the medical investigator shall protect the hands to safeguard any potential evidence. This is done by placing an appropriate sized paper bag over each hand. The bags are then to be secured in place by placing evidence tape around the bag near the opening so they do not easily slide off the decedent. The evidence tape shall be initialed and a date and time included to document when the hands were sealed.

Alcohol in a Death Scene: It will be the responsibility of the medical investigator to report the presence of alcohol at the scene. Record the condition of a driver as determined by the law enforcement agency when the driver survives but the passenger(s) do not. Record any evidence of drinking within the scene or indications that a perpetrator had been drinking. Record any indication at a scene of current consumption of alcohol. Record any indication of chronic alcohol abuse on the part of the decedent.

Drugs - Licit and Illicit: In cases where medications (prescription or over the counter) are present at a death scene and relate to the death, the medical investigator will collect them. Please see "Prescription and Illicit Drugs" SOP for specific collection procedures. All opiates and other prescription medications with a potential for abuse will be collected from death scenes regardless of death type; these medications shall be logged into the ECMS in any case falling under [REDACTED] jurisdiction and in presumed natural release cases prior to the termination of coroner jurisdiction. Medications prescribed to someone other than the decedent but suspected to relate to the death will be logged; these may be collected with the permission of the person to whom they were prescribed. Otherwise, they are to be logged and secured appropriately either by receipting them to the family or by securing them in a safe place (i.e., out of the reach of children); this is to be accomplished through a dialogue with any family members present. An inventory of the medications being taken is to be done and all information is to be carefully recorded. If patient medications aid in determining a medical diagnosis, the medication name, dates, dosage, and prescribing physician name should be noted and collected.

Illicit drugs and associated paraphernalia are to be collected by the law enforcement agency in charge at their discretion. These materials are not to be collected by the medical investigator nor inventoried on the medication log, however shall be documented

in the scene narrative.

Over the counter medications are only required to be collected when the investigation indicates that they are suspected of being a factor in the death, or when there is suspicion that the death may be otherwise drug related (mixed drug ingestions, etc). In cases where the medications are unidentified or may be related to the death, a sample may be submitted for toxicological purposes. In these cases it should be well documented in the field report what was taken and for what reason.

Money, Valuables, and Personal Property: If under the jurisdiction of the coroner, the medical investigator will inventory, collect, and safeguard money, valuables, and personal property at the scene and when the body is examined in the field or at the morgue. Personal property on the body shall be documented at the scene, and if appropriate (non-homicide and non-suspicious deaths), may be removed and transferred directly to the legal next of kin on scene or left at the secure scene (with written and photographic documentation).

Interviewing Witnesses at the Scene

The documented comments of witnesses at the scene allow the medical investigator to obtain primary source data regarding discovery of body, witness corroboration, and terminal history. The documented interview provides essential information for the investigative process. The medical investigator should question a witness at the scene of a death with coordination and participation of the law enforcement agency of jurisdiction.

The medical investigator's report shall include the source of information, including specific statements and information provided by the witness.

The medical investigator should:

- Collect identifying data on witnesses (including full name and contact telephone numbers, etc.)
- Establish witness' relationship/association to the deceased
- Establish the basis of witness' knowledge (how does witness have knowledge of the death?)
- Obtain information from each witness
- Note discrepancies from the scene briefing (verify statements)

Documenting and Evaluating the Body

Photograph the Body: The photographic documentation of the body at the scene creates a permanent record that preserves essential details of the body position, appearance, identity, and final movement. Photographs allow sharing of information with other agencies investigating the death.

Prior to moving the body or evidence, the medical investigator should:

- Photograph the scene including overview and close-up pictures
- Photograph the body and immediate scene
- Photograph the decedent's face
- Take additional photographs after moving the body or following removal of objects/items that interfere with photographic documentation of the decedent
- Photograph the decedent with and without measurements (as appropriate)
- Photograph the surface beneath the body (after the body has been removed, as appropriate)
- Never clean the face; do not change condition of the body. Take multiple shots when appropriate.

Conduct External Body Examination (Superficial)

Conducting the examination provides the medical investigator with objective data regarding the single most important piece of evidence at the scene, the body. This documentation provides detailed information regarding the decedent's physical attributes, his/her relationship to the scene, and possible cause, manner, and circumstances of death.

A body search should be conducted by the medical investigator in coordination with law enforcement and crime lab personnel as applicable. No search will be conducted that will taint or jeopardize any evidence needed by the pathologist. The on-call pathologist must be consulted in cases of unusual circumstances.

At the scene and prior to moving the decedent, the medical investigator should, without removing the decedent's clothing:

- Photograph the scene and decedent as described above
- Document the decedent's position
- Document the decedent's physical characteristics
- Document the presence or absence of clothing and personal effects
- Document the presence or absence of any items/objects that may be relevant
- Document the presence or absence of marks, scars, and tattoos
- Document the presence or absence of injury/trauma, petechiae, etc.
- Document the presence of treatment or resuscitative efforts
- Based on the findings, determine the need for further evaluation/assistance of forensic specialists

Preserve Evidence (Body): The photographic and written documentation of evidence on the body allows the medical investigator to obtain a permanent historical record of that evidence. To maintain chain of custody, evidence must be collected, preserved, and transported properly. Physical evidence visible on the body must be photographed. Fragile evidence (evidence which can be easily contaminated, lost, or altered) must also be collected and/or preserved to maintain chain of custody and to assist in determination of cause, manner, and circumstances of death. Prior approval from the on-call pathologist is always required.

Once evidence on the body is recognized, the medical investigator should:

- Photograph the evidence
- Document blood/body fluid on the body (froth/purge, substances from orifices), location, and pattern before transporting
- Place decedent's hands in unused paper bags (in all homicides and suspicious deaths, and consider for all other deaths resulting from gunshot wounds)
- At the direction of the forensic pathologist, collect trace evidence before transporting the body (e.g., blood, hair, fibers, etc.)
- Arrange for the collection and transport of evidence at the scene (when necessary)
- Ensure the proper collection of blood and body fluids for subsequent analysis (as appropriate)
- Place the decedent on an unused evidence sheet in cases of suspected homicide

All items, evidentiary or otherwise, that are on or in the body will remain with the body and will be taken into custody by the medical investigator.

Trace evidence:

- Photograph the item where it is found, prior to any attempt to disturb it. It may help to make it stand out by the use of an arrow or some other marker but definitely include a measuring device such as a short ruler.
Make a diagram of the body, showing the area where the evidence is located. Use the back of an external report form if you need a guide. Identify the location on the body where the evidence in question has been found.
- Select an appropriate means to package or preserve the evidence. Plastic bags should not be used for anything that might be subject to change or alteration by moisture. The most effective means of packaging most evidence is a paper bag or envelope. This allows air to pass freely and prevents moisture from forming on the inside of the bag or on the evidence.
- Always wear gloves when handling evidence or the body. This is not only an effective means of protection from diseases that might be present but also inhibits anything being transferred between the evidence and your skin.
- Document everything removed from the body, in photographs and writing, prior to transport.

Establish Decedent's Identification: The establishment or confirmation of the decedent's identity is paramount to the death investigation. Proper identification allows notification of next-of-kin, settlement of estates, resolution of criminal and civil litigation, and the proper completion of the death certificate.

To establish identity, the medical investigator should document direct visual or photographic identification of the decedent if visually recognizable.

Document Postmortem Changes: The documenting of postmortem changes to the body assists the medical investigator in explaining body appearance in the interval following death. Inconsistencies between postmortem changes and body location may indicate movement of body and validate or invalidate witness statements. In addition, postmortem changes to the body, when correlated with circumstantial information, can assist the investigators in estimating the approximate time of death.

Prior to moving the body, the medical investigator should note the presence of each of the following in his/her report:

- Livor (color, location, blanchability, Tardieu spots)
- Rigor (state/intensity, location on the body, broken)
- Degree of decomposition (including putrefaction, adipocere, mummification, skeletonization, as appropriate)
- Insect and/or animal activity
- Scene temperature (document time and method used or estimated)
- Description of body temperature (i.e., warm, cold, frozen) or measurement of body temperature as prescribed by the [REDACTED] (document method used and time of measurement)
- Describe the presence of an object or the location of the body that might affect decomposition (i.e., in direct sunlight or near a space heater)

Participate in Scene Briefing: The scene debriefing helps investigators from all participating agencies to establish post-scene responsibilities by sharing data regarding particular scene findings. The scene debriefing provides each agency the opportunity for input regarding special requests for assistance, additional information, special examinations, and other requests requiring interagency communication, cooperation, and education.

[REDACTED]

When participating in scene debriefing, the medical investigator should:

- Determine post-scene responsibilities (identification, notification, press relations, and evidence transportation)
- Determine/identify the need for a specialist (e.g., crime laboratory technicians, social services, entomologists, OSHA)
- Communicate with the law enforcement agency the possibility of an external exam or an autopsy, and the tentative time of such exam
- Share investigative data (as required in furtherance of the investigation)
- Communicate special requests to appropriate agencies, being mindful of the necessity for confidentiality

Determine Notification Procedures (Next of Kin): Every reasonable effort should be made to notify the next of kin as soon as possible. Notification of next of kin initiates closure for the family, disposition of remains, and facilitates the collection of additional information relative to the case.

In the State of Colorado, it is the responsibility of the coroner's office to make notification of next of kin. It will be discussed and agreed upon which agency will accompany the coroner's representative when death notification is made. When making a notification, the medical investigator should be accompanied by a law enforcement representative and a victim's advocate. If notification is made by law enforcement, that agency shall notify the [REDACTED] once contact is made and relay all information to the medical investigator.

Ensure Security of Remains: Ensuring security of the body requires the medical investigator to ensure the labeling, packaging, and removal of the remains. An appropriate identification tag is placed on the body at the scene to preclude misidentification upon receipt at the examining facility. The body bag is also sealed at the scene prior to transport. This function safeguards all potential physical evidence and/or property and clothing that remain on the body.

The statute that forms the basis for the entire Colorado coroner system clearly states that the coroner shall view and take legal custody of the body. The term, "take legal custody," carries with it significant responsibilities. Foremost, it initiates a chain of custody that places a burden upon this office to account for any movement of that body:

- to safeguard any property on that body,
- to protect the body from any jeopardy, and
- to describe any procedure performed upon that body in the course of the investigation.

In cases coming in for autopsy, it provides the pathologist with the identity of the decedent. The responding medical investigator will lay the groundwork for this entire chain of events that terminates when the body is formally released.

The body is bagged, sealed and removed after the completion of the scene investigation. Once sealed, the body bag should not be opened unless authorized by the pathologist.

Prior to leaving the scene, the medical investigator should:

- Document time and location of any movement and transport of the body.
- Ensure that the body is protected from further trauma or contamination (if not, document) and unauthorized removal of therapeutic and resuscitative equipment
- Document and secure property, clothing, and personal effects that are on the body
- Identify property and clothing to be kept as evidence

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- Place identification on the body and body bag
 - Place body into a body bag and seal the bag
 - Know when, where, and why the body bag was opened, by whom and for what purpose
 - Secure transportation for the body as appropriate
 - Supervise the removal of the body from the scene
 - Note whether an external examination was conducted in the home, or the case was terminated and a funeral home was summoned
 - Date and sign all forms.

Name (ID) Tags: All bodies within the jurisdiction and control of the [REDACTED] must have an identification tag securely attached to the arm or leg with the identity of the decedent, date of death, and the medical investigator's initials. It is the responsibility of the medical investigator to secure the band.

At scenes where multiple unidentified bodies are discovered, a diagram indicating where each DOE is located at the scene is to be provided by the medical investigator. An identification tag using numbers to specify each DOE will be placed on each body and recorded on the diagram prior to the movement of the bodies. Where possible and for the sake of consistency, coordinate the DOE numbers with the law enforcement officer writing the police report.

Establishing and Recording Decedent Profile Information

Document the Discovery History:

- Establish and record person(s) who discovered the body and when
- Document the circumstances surrounding the discovery (who, what, where, when, how)

Determine Terminal Episode History:

- Document when, where, how, and by whom decedent was last known to be alive
- Document the incidents prior to the death
- Document complaints/symptoms prior to the death
- Document and review complete EMS records and contact EMS providers, if necessary
- Obtain relevant medical records
- Obtain relevant antemortem specimens

Document Decedent Medical History:

- Document medical history, including medications, herbal remedies, alternative therapies, alcohol and drug use, and family medical history from family members and witnesses
- Document information from treating physicians and/or hospitals to confirm history and treatment
- Document physical characteristics and traits (e.g., left-/right-handedness, missing appendages, tattoos, etc.)

Document Decedent's Mental Health History:

- Document the decedent's mental health history, including hospitalizations and medications
- Document the history of suicidal ideations, gestures, and/or attempts
- Document mental health professionals (e.g., psychiatrists, psychologists, counselors, etc.) who treated the decedent
- Document family mental health history

Document Social History (as available and appropriate):

- Document marital/domestic history

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- Document family history (similar deaths, significant dates)
 - Document daily routines, habits and activities
 - Document relationships, friends, and associates
 - Document employment history
 - Document financial history
 - Document educational background
 - Document religious, ethnic, or other pertinent information (i.e., religious objection to autopsy)
 - Document criminal history
 - Document sexual history

Completing the Scene Investigation

Maintain Jurisdiction Over the Body: Maintaining jurisdiction over the body allows the medical investigator to protect the chain of custody as the body is transported from the scene for examination or storage.

Once the scene has been cleared and the medical investigator has completed the investigation, they will dispatch the appropriate carrier to remove the remains to the [REDACTED]. The transporter can only be summoned by the medical investigator; the [REDACTED] contracted transport company must be used for all transfers of bodies to the [REDACTED]. When jurisdiction has been terminated in an investigation, the funeral home selected by the next of kin is to be summoned to transport the remains. [REDACTED] assumes no responsibility for transportation costs in these cases. However, the [REDACTED] has a responsibility to assure that the remains are removed.

Infectious Cases: It is incumbent on the medical investigator to notify all parties concerned when a case is known to be infectious. This would include the carrier, the funeral home, and any other parties who might have contact with the body.

Release Jurisdiction of the Body: Prior to releasing jurisdiction of the body to an authorized receiving agent or funeral director, it is necessary to determine the person responsible for certification of the death. Information to complete the death certificate includes demographic information and the date, time, and location of death.

When releasing jurisdiction over the body, the medical investigator should:

- Determine who will sign the death certificate (name, agency, etc.)
- Confirm the date, time, and location of death
- Arrange with the authorized receiving agent to reconcile all death certificate information
- Release the body to a funeral director or other authorized receiving agent as appropriate

All cases where the medical investigator has released jurisdiction over the body, a forensic pathologist must review the case within 24 hours, usually during the morning case review. Pathologist review must be documented in the ECMS for each case, to include date and name of reviewing pathologist. If there are any circumstances where the medical investigator is unsure if jurisdiction should be assumed, she/he must contact the on-call forensic pathologist immediately to review the case. Otherwise, standard operating procedures shall be followed for which cases need either an external examination or autopsy.

Perform Exit Procedures: Bringing closure to the scene investigation ensures that important evidence has been collected and the scene has been processed. In addition, a systematic review of the scene ensures that artifacts or equipment are not inadvertently

[REDACTED]

left behind (i.e., used disposable gloves, etc.), and any dangerous materials or conditions have been reported.

When performing exit procedures, the medical investigator should:

- Identify, inventory, and remove all evidence collected at the scene
- Remove all personal equipment and materials from the scene
- Report and document any dangerous materials or conditions

Child Death Investigations

Child death investigations shall be done in accordance with local statutes, and national standards. These national standards include the use of the Centers for Disease Control's Sudden Unexplained Infant Death Investigation Reporting Form, and the performance of a doll reenactment by the person(s) who were present when the child was placed down last and when the child was found.

Follow-Up Investigations

Follow-up investigations will be documented as appropriate. Subsequent scene investigation, photography, and interviews with families and/or witnesses will be coordinated with the appropriate law enforcement agency of jurisdiction. New findings affecting the nature of the investigation will be reported immediately to the Coroner or assigned forensic pathologist.

Subpoena: It will frequently be necessary for the medical investigator to follow-up on cases by collecting information from various sources. Although many individuals and agencies will provide information that is subsequently summarized and documented by the medical investigator, it is sometimes necessary to get documents, records, lab samples, and other materials that require a subpoena and/or a receipt.

CRS 30-10-608 provides that, "The Coroner may issue a subpoena to compel the attendance and production of evidence by any necessary witness and the subpoena may be enforced in the district court."

The subpoena issued by the Coroner's representative is for materials that relate only to the cause and the manner of the death being investigated. The subpoena cannot be used by staff members to acquire information or evidence for other agencies.

For medical records, a copy of the record is sufficient. In certain cases where the original must be reviewed, the on-call pathologist will give authorization to request the original records and the subpoena must indicate that original records are required. If any problems occur when requesting original records, the Coroner is to be contacted immediately. Medical charts available electronically (CORHIO electronic database) should be viewed and appropriate portions printed for the paper file.

In any case where the [REDACTED] subpoena is not honored by the holder of the record, the first avenue should be the legal counsel of that establishment. Continued refusal to comply with the subpoena is to be referred to the County Attorney or District Attorney, or the appropriate judge will be contacted for further direction.

Strict adherence to the rules governing the use of the Subpoena by [REDACTED] staff must be observed and maintained. Capricious or unofficial use of the Subpoena will be grounds for immediate dismissal.

Failure to comply with an [REDACTED] subpoena: When there is a failure to comply with the conditions of an [REDACTED] subpoena, the [REDACTED] agent should first attempt to clarify the

[REDACTED]

position and needs of the [REDACTED] with the individual, or the individual's supervisor. If the medical investigator is unable to resolve the matter, he or she should report the incident to the forensic pathologist in charge. All pertinent information must be obtained at this time, which would include the reason(s) the person is failing to comply, and specifically what information is being sought or is needed by the [REDACTED]. The following is the course of action that can/will be taken:

If the pathologist indicates that there is an immediate need for the information, the subpoena can be served to the individual directing them to bring the needed materials to the [REDACTED] at a particular time on a particular date. This action should never be undertaken without the knowledge and approval of the pathologist.

If the refusal continues, a court order will be obtained by the [REDACTED]. This is to be coordinated with the County Attorney.

When the refusal to honor the subpoena is valid, the case must be evaluated by the pathologist to determine the needs of the [REDACTED]. If the decision is to proceed to obtain the records, the facility should be subpoenaed for the names of next of kin, if they are unknown. This will allow the [REDACTED] to obtain permission of the next of kin in lieu of a court order. The pathologist may also attempt to talk to the treating physician to obtain pertinent information. A court order should be sought as a last resort.

Working with Families

Assist the Family: The medical investigator provides the family with a timetable so they can arrange for final disposition, and provides information on available community and professional resources that may assist the family.

When the medical investigator is assisting the family, it is important to:

- Inform the family if an autopsy is required
- Inform the family of available support services
- Inform the family of appropriate agencies to contact with questions (coroner's office, law enforcement, child death groups, etc.)
- Ensure family is not left alone with the body (if circumstances warrant)
- Inform the family of approximate body release timetable
- Inform the family of information release timetable (toxicology, autopsy results, etc., as required)
- Inform the family of available reports, including cost, if any

Notification of Next-of-Kin: The responsibility for formal notification of next of kin lies with the coroner's office. Law enforcement personnel that assist with this process are to be instructed that as a part of the notification, the family spokesperson must contact the coroner's office.

The following are appropriate next of kin, in descending order:

- Executor designated in will
- Spouse (where legally married or common-law requirements met)
- Majority of adult children (18 and over)
- Parent
- Majority of siblings (18 and over)
- Any person willing to assume legal and financial responsibility
- Public Administrator/Social Services

In cases where confusion or controversy exist DO NOT release remains until the questions are resolved; consultation with the county attorney should be made in

controversial cases.

Notification Based on [REDACTED] Identification: In cases where the remains have been identified by [REDACTED] reasonable attempts will be made to contact the legal next of kin who is to be advised of the location of the decedent, the pertinent details of the fatal event, and whether an autopsy was or is to be performed. The [REDACTED] representative making such notification will note in writing the name of the person advised, their relationship to the deceased, the method of notification, and the time and date. If the [REDACTED] representative has made notification, law enforcement should be made aware that notification has been made.

Viewing of Deceased by Next-of-Kin: At the scene of death, in the hospital (inpatient or morgue facility), or at the funeral home, the medical investigator must be guided by the nature of the investigation, a concern for physical evidence that might be on the body, and the health and safety of those who might handle the remains. Viewing should only occur when both the medical investigator and the law enforcement investigator in charge of the investigation concur that no harm will come from family viewing and/or touching the body. In cases where criminality is suspected or exists, the medical investigator will contact the on-call pathologist for instructions on how to proceed with viewing and/or touching of the body by the next-of-kin.

If a body bag has been sealed and broken for the purpose of family viewing, the medical investigator will make a note in the record to this effect and reseal the body to ensure that the body is protected and that the chain of custody continues unbroken.

At the [REDACTED] There will be no viewing of the deceased by the next of kin in the [REDACTED] facility. Exceptions to this policy will be granted under rare circumstances (religious, cultural beliefs, and if deceased will be cremated directly, etc.). Exceptions will be made when requested and reasonably possible, and will be approved only by the Coroner or his/her joint designee(s). Approved viewings will be scheduled by the autopsy assistants and will always be conducted to not interfere with other autopsy suite activities. A victim advocate may or may not be contacted, dependent on a case-by-case basis.

Clearly distraught, belligerent, intoxicated (under the influence of drugs or alcohol), and disrespectful persons will not be allowed to view a body. No more than two persons from the family will be permitted to view the body, and viewing will not be scheduled without approval of the legal next of kin.

When viewing is to take place, the autopsy assistants will make the body and the viewing area as presentable as possible. There will be no viewing outside of normal [REDACTED] working hours.

In rare instances where identification depends on the recognition by the family, digital photographs will be taken by autopsy assistants or medical investigators and made available for viewing by the family.

Informing Family When an Autopsy is or is not to be Performed: Medical investigators will make every effort to communicate with the next-of-kin to keep them apprised of what decisions are being made regarding the examination. Medical investigators must also notify next of kin when a decision has been made not to do an autopsy. Notification and communications with the family must be documented in the file.

When a determination has been made that an autopsy will be performed, the medical investigator will advise the legal next-of-kin. Medical investigators are advised to use tact, diplomacy, and sensitivity in advising the family of the autopsy requirement. A sensitive

[REDACTED]

approach coupled with factual information will aid the family at this extremely emotional time. The next of kin notified should be told the following:

- That an autopsy will be performed
- Why it is necessary (homicide, work-related, obscure cause and/or manner, to rule out other conditions, etc.)
- Where the exam will take place
- How the release is facilitated when the procedure is complete. This includes knowing or obtaining the family's mortuary preference

This communication with next of kin is not for purposes of asking their permission or obtaining their consent. It is advisory, and communicates to them the steps this office will be taking in the investigative process. The contact with the next of kin must be recorded in the case file.

Protests by Next of Kin: When family members express opposition to the autopsy that is not allayed by the discussion of the reasons why the autopsy is required, the Coroner is to be made aware of the opposition. When relaying this information to the Coroner, a phone number for the next of kin is to be provided so that further discussion can be implemented by the [REDACTED]

If the legal next of kin expresses concerns or objections to an autopsy, an [REDACTED] representative will explain the specific reasons why the [REDACTED] has jurisdiction, why the death requires an autopsy, and try to help the next of kin understand [REDACTED] involvement. If objections continue to be voiced, the [REDACTED] representative may contact the on-call pathologist for assistance. Document time, date, person with whom discussions were held, and pertinent issues discussed.

If the next of kin concede to the decision to autopsy, this will also be documented in the case file. If particular requests or limitations are included, the family should be advised whether these are or are not possible.

Where objections to the autopsy continue, or the [REDACTED] is unable to accommodate the desired limitations, the [REDACTED] may require the family to sign an official autopsy waiver form (admonition), with the medical investigator informing the family the limitations in determining cause and manner of death without autopsy examination.

If an autopsy is required despite objections, the family will be informed by the [REDACTED] that the body will be held for a reasonable time (24 hours) unless circumstances compel that the interval should be shorter. An extension of time may be granted as long as it does not jeopardize the ends of justice or expose any citizen to a dangerous situation. During this time, the family may pursue legal avenues in order to prevent the autopsy. These may include:

- Contacting the District Attorney of jurisdiction for relief, or
- Obtaining a court order to prohibit the autopsy.

Next of Kin Not Located and Autopsy is Required: In autopsy cases where the next of kin has not been located, cannot be located, or are unknown, this information shall be given to the Coroner and shall be documented in the case file.

Unidentified Remains and Autopsy is Required: In cases where remains are unidentified and an autopsy is necessary, the establishment of a positive identification and search for next of kin will not preclude the autopsy from commencing. Attempts to establish identity will commence as part of the ongoing investigation by the law enforcement agency responsible for the case. The [REDACTED] will aid in this matter by providing any pertinent



information that may be derived from the examination of the clothing and/or the body.

Release of Personal Effects to Next of Kin: The medical investigator must be attentive to details of the family network and only release personal property to the legal next of kin. Personal property can be released to family members when there is no question as to the relationship that exists. If there is ever a question as to the relationship or it appears that to release items such as large amounts of cash would present problems with others present, no release is to be made.

Funeral Homes Designated by the Family: The staff of the [REDACTED] is prohibited from recommending the use of one funeral home or mortuary/crematory service over another. If family members or others inquire about facilities in an area, they should be referred to a general search engine, provided with an alphabetical list which includes all funeral homes, or the medical investigator may provide them with a list of three or more funeral homes in that given area. The family member should be allowed to decide which if any service(s) they might require by interviewing mortuary or crematory services directly. The exception to this would be a request by family members to conduct family burials or if they inquire as to what services they might perform themselves. It is the responsibility of the medical investigator to obtain the mortuary preference of the family as soon as possible.

Policy/Procedure Violations

Violations of this policy are grounds for disciplinary action, up to and including termination.

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