

Death Scene Investigation



A FIELD GUIDE

SCOTT A. WAGNER, MD

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Dedication

This book is dedicated to the memory of Phyllis Wagner

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Preface

Death Investigation is an art that is never mastered. It is the fusion of science, old-fashioned footwork, and intuition. Each death scene is unique in some way and presents new challenges to even the most seasoned investigator among us. Even more, long or late hours, unpleasant environmental conditions, and difficult psychosocial situations further complicate the job. It is during those tough times when having and following a protocol pays off. Death investigation scenarios can vary widely but protocols are the tool to keep the results consistent. Skirting protocols for convenience or other reasons can lead to erroneous conclusions — or worse, lost convictions.

During the entire death investigation, from initial call to final courtroom testimony, the *way* things are done is as important as *what* is done. Having and following a standard routine for death investigation minimizes potential errors. Having the appropriate resources and tools at hand to make the job easier and more efficient is also important. Through the course of his or her work, the death investigator must interface with law enforcement, district attorneys, defense attorneys, families, friends, witnesses, medical professionals, media, and countless others in the community. Producing a death investigator's handbook for all situations, in all jurisdictions, is not possible. We seek here to provide a book that is a useful tool for the death investigator with at least some basic training.

Because the majority of deaths in any medical examiner's or coroner's office are natural, emphasis is placed in this area. Death investigators come from varying backgrounds. Those from nonmedical fields will find the drug and disease section useful. Medical terms are often really a "second language," and the words can have odd spellings. The book aims to be a field guide for basic medical information. For those without forensic backgrounds, the forensic glossary can be of use. Words have specific meanings in forensic pathology. The current usage and meaning of these words are given.

Many deaths, usually natural, do not require scene visits, especially those that occur in health-care facilities. The death investigator's role is slightly different in these cases, usually requiring discussions with medical personnel and obtaining medical records. A fair portion of this book also deals with handling medical information.

Finally, because the book is a field guide, it will not answer all questions raised. However, references are supplied for seeking further information when

one gets back to the office. For the death investigator, knowing where to look for an answer is more important than memorizing a great deal of data.

It is my intention that the information and images in this book be used only by the professionals and students in the fields of or related to death scene investigation, law enforcement, death investigation, and law, or by funeral directors. Improper uses of these images can be a violation of the law, and using these photographs in a salacious manner violates the basic ethics the author and his colleagues uphold. The first lesson to learn in death scene investigation is reverence for the deceased and their families. In keeping with this reverence, we honor the deceased by using the information learned to study diseases and injuries for the benefit of the living.

Scott A. Wagner, M.D.

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Guidelines for the Death Scene Investigator

1

Purpose of the Death Investigation

Although the primary goal of a death investigation is to establish the cause and manner of death, the role of the investigator extends much further than simply answering these two questions. A common question asked is, “Why does it matter? The person is dead.” While it is true that the dead cannot benefit, the value in death investigation is to benefit the living and future generations. In a culture that values life, explaining the death in a public forum (the meaning of “forensic”) is crucial for many reasons. And this interest goes beyond simple curiosity. Listed below are some common reasons that death investigations are performed for the benefit of all living persons.

Death investigation benefits include:

1. Families of the deceased:
 - Discover genetic/inherited disorders
 - Collection of death benefits, e.g., life insurance, black lung funds
 - Answer questions about the death, e.g., “why did he complain of headaches?”
 - Psychological benefit of knowing the truth, peace of mind
2. Legal systems, civil and criminal:
 - Provide evidence for prosecution in a criminal matter causing death (e.g., murder, manslaughter, neglect of a dependant causing death, etc.)
 - Provide evidence to exonerate a person under suspicion
 - Provide evidence for civil matters, such as negligence causing death
 - Death of a person in custody
3. Public health and safety:
 - Identify infectious diseases, both new and old

- Identify defective devices or products that can cause death
 - Identify trends in deaths to develop strategies for the future (e.g., sudden infant death syndrome [SIDS] death rate)
4. Medical care quality:
- May be conducted within the hospital or institution or by the medical examiner or coroner
 - Evaluation of the effectiveness of treatments and therapy
 - Evaluation of the potential errors of individuals or the system
 - Evaluation of transplant donors for signs of disease or injuries that might affect the transplant recipient
 - Research (e.g., to evaluate the adverse effects of a novel drug or therapy)

Role of the Death Scene Investigator (DSI)

The death scene investigator (DSI) is a coroner, medical examiner, or a death investigator charged by the federal government, state, county, parish, or municipality with conducting death investigations. The death investigator commonly works under the direction of the medical examiner or coroner.

Death investigation is accomplished by the interaction of many individuals with varying expertise. Often, the DSI coordinates many of the activities, agencies, and final outcomes regarding the death. The families and loved ones of the deceased often have many questions about how the person died. Law enforcement and prosecution need the investigator's input. Environmental challenges such as noting the cherry-red lividity of carbon monoxide poisoning might only be recognized by the DSI, thus saving the lives of others who might inhabit the building with a faulty furnace. And finally, the pathologist will have questions at the autopsy, as a part of a complete investigation. The investigator is the central hub in the continually turning wheel of death investigation and its subsequent resolution.

Death investigators come from many different backgrounds, which often include law enforcement, medical, funeral directors, and even the clergy. Many investigators bring their past experiences to the field of death investigation and are then trained on the job. There are many training programs available, but few uniform, nationally recognized standards. The American Board of Medicolegal Death Investigators (ABMDI) was founded in the late 1990s to develop a standard training curriculum. Some death investigators are required to obtain this certification.

Philosophy of Death Investigation

In death investigation, the body is the most important piece of evidence. The investigation involves focusing on the body and the attached trace evidence. In forensic pathology, it is often stated that one “takes the victim as he finds him.” This axiom simply means that no assumptions are made, and the investigation starts with the body, examining the injuries, diseases, and evidence present to arrive at a cause or manner of death. Observations become facts. When sufficient facts are available, an opinion can be formed. If new facts become available, the opinion can change.

Notification of a Death

The wheels are set in motion by the first call of a death to the coroner’s or medical examiner’s office. These calls are usually received from law enforcement dispatch, but can originate from health-care facilities, first responders, or funeral homes and other agencies. Having received the notification, the investigation can take on various forms and depths of inquiry depending on the type of death and the circumstances. Taking the initial call, it is important to know if the case is under one’s jurisdiction. Below is a list of cases that fall under the jurisdiction of the coroner or medical examiner in many states. Please note that most any death, if suspicious, can come into one’s jurisdiction. Generally, jurisdiction over a death is determined by the county in which the death occurred. Exceptions to this would include a death on a ship or airliner, where the jurisdiction would be the nearest port or the airport where the plane lands. Check protocols and medical examiner or coroner laws in your area for details.

In many states, a ny individual who has knowledge of a suspicious or unnatural death is expected, by law, to report this. Each state has its own state autopsy laws, state anatomy laws, or postmortem examination laws. Deaths that are commonly reported to a medical examiner or coroner are as follows:

- Deaths under unexplained, unusual, suspicious, or unnatural circumstances
- Homicides
- Deaths due to accident, even when the accident does not appear to be the primary cause of death
- Poisoning deaths
- Deaths in which there is no attending physician, or the deceased has not seen a physician recently (30 to 120 days)

- Deaths in which a physician will not sign the death certificate
- Deaths from infectious disease that pose a potential public health risk
- Maternal deaths from abortion
- Stillborn fetus 20 weeks or older whose death was not attended by a medical practitioner
- Death of an inmate or a person in custody
- Deaths during surgery or in proximity of a diagnostic or therapeutic procedure
- Deaths related to a disease or injury acquired or potentially acquired at work
- Sudden unexpected death of a person who suffered a fracture in the past 6 months
- Deaths of organ and transplant donors
- Death of a child, less than 14 years, in which at least two physicians will not sign the death certificate
- Any death in which there is doubt about reporting, should be discussed with the medical examiner/coroner's office (MEC)

The duties of the DSI take him or her to many different places and facilities in the community. The DSI will encounter all types of death cases — from homicides to natural deaths. The following is a summary of the scope of cases commonly encountered by the DSI:

- Medical facility deaths of persons with previously known lethal disease, in which the physician will sign the death certificate
- Home or hospice deaths of persons with previously known lethal disease in which the physician will sign the death certificate
- Medical facility deaths where injury occurred in the facility (e.g., a fall or death during surgery)
- Medical facility deaths where an injured person was taken to the facility (e.g., initially survived gunshot wound of the head)
- Deaths of unknown cause that occur at home
- Deaths involving a motor vehicle
- Deaths in custody
- Deaths in the workplace
- Suspicious deaths or homicides at any location
- Mass fatalities (airliner, train, subway)
- Airplane crash fatalities (smaller aircraft)
- Suicides at the home
- Alleged suicides away from the home

It is the duty of the DSI to obtain crucial data regarding the demographics of a given case. Many find it easy to obtain this information as

early as possible in the death investigation. Each MEC office has its own set of demographic data to be collected. Below is a sample listing of important demographic data that can be important in a death investigation:

- Full name of decedent, including at least the middle initial
- Maiden name (if applicable)
- Sex, race, age, and date of birth
- Social security number (for future social security fraud investigations)
- Address of residence, including city, state, and zip code
- Marital status: single (never married), married, divorced, and widowed
- Home phone and/or cell phone number
- Next-of-kin contact: relationship to deceased, name, address, and telephone number
- Date, location, and time of notification of next-of-kin and by whom
- Employment history; position, name, address, telephone number of company, supervisor's name, and current status (retired, employed, laid off)

No two death investigations will be exactly alike, but all have similar steps that are taken during the initial call, investigation, and resolution. These steps are as follows.

Discovery of Deceased

Determine who made the call and how your agency was contacted.

1. Intake — initial contact:
 - Determine depth of agency involvement (can vary from phone interview to scene visit).
 - Establish phone contact with the scene.
 - Determine jurisdiction.
 - Determine the scope of your agency's responsibility.
 - Do other agencies need to be notified? (e.g., the National Transportation Safety Board [NTSB], Occupational Safety and Health Administration [OSHA], etc.)
2. Information gathering:
 - Identify potential health hazards at the scene (e.g., carbon monoxide [CO], explosions, electrical).
 - Determine the circumstances of death (the story leading up to the death).
 - Collect demographic data, death event data, medical history, criminal history.

- Speak to family, first responders, medical providers, and witnesses.
 - Coordinate with evidence technicians in crime scene cases.
3. Initial assessment at the scene:
 - Secure the scene and establish a perimeter.
 - Identify the law enforcement officer in charge (if any).
 - What is the working cause and manner of death?
 - Will an autopsy be needed?
 - Are any additional experts needed at the scene or at the autopsy?
 4. Examination of the body, the most important evidence at the scene:
 - Obtain photographic documentation.
 - Obtain a scene diagram.
 - Note scene temperature and conditions.
 - Assess the signs of death: rigor, algor, and livor mortis, and decomposition.
 - Package the body and transport.
 - Postmortem examination, including autopsy.
 5. Follow-up information:
 - Toxicology.
 - Autopsy report.
 - Final law enforcement reports.
 - Further investigation.
 6. Final report and disposition of case
 7. Depositions and trial

Statutory Responsibilities

The medical examiner/coroner (MEC) has the statutory responsibility and legal responsibility to determine the cause and manner of death. At most death scenes, because they are natural deaths, this means the MEC has authority and control of the death scene, especially the body. At scenes where law enforcement is present, the scene usually belongs to that agency, but the body is the responsibility of the MEC. At times, especially in high-profile cases and/or homicides, other agencies such as law enforcement and the prosecutor/district attorney will be very interested in collecting evidence if a crime has been committed. Law enforcement usually has control of the scene and evidence.

It is very important that all agencies work together in these situations because there is a common goal, namely that of discovering the facts of the death and the alleged crime. The death scene investigator (DSI) should find and identify himself or herself to the law enforcement personnel in charge. If the MEC clearly has jurisdiction but there is a dispute, it can be useful for the DSI to carry a copy of the appropriate statute to demonstrate authority to those persons doubting it.

Confirm or Validate the Death

Before the death investigation can begin, the death must be officially confirmed. If any signs of life are seen by the first responders, the body will likely not be at the scene and death will be pronounced at the medical facility. In some cases, emergency services will have checked for signs of life and already confirmed the death. Authority to pronounce death varies by state laws. Typically, a physician, MEC, or nurse (under a physician's direction)

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