



Whatcom County Medical Examiner

RCW 68.50.010

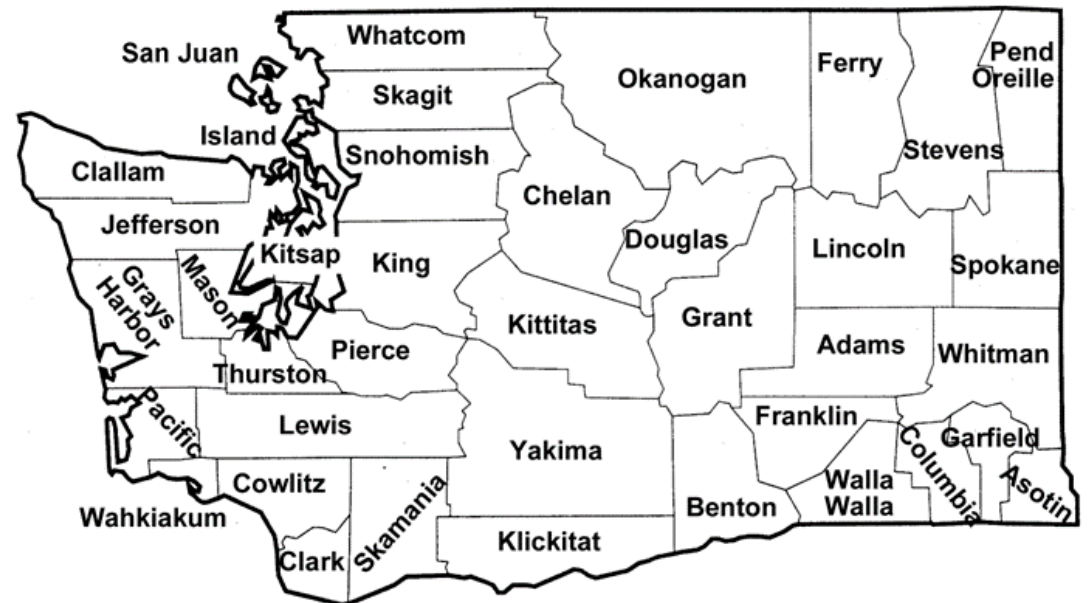
- **Coroner's jurisdiction over remains.**
- The jurisdiction of bodies of all deceased persons who come to their death **suddenly** when in apparent good health without medical attendance within the thirty-six hours preceding death; or where the circumstances of death indicate death was caused by **unnatural or unlawful means**; or where death occurs under **suspicious** circumstances; or where a coroner's autopsy or postmortem or coroner's inquest is to be held; or where death results from unknown or obscure causes, or where death occurs within one year following an accident; or where the death is caused by **any violence whatsoever**, or where death results from a known or suspected abortion; whether self-induced or otherwise;

RCW cont.

- where death apparently results from **drowning, hanging, burns**, electrocution, gunshot wounds, stabs or cuts, lightning, starvation, radiation, **exposure, alcoholism, narcotics** or other addictions, tetanus, strangulations, suffocation or smothering; or where death is due to premature birth or still birth; or where death is due to a **violent contagious disease** or suspected contagious disease which may be a **public health hazard**; or where death results from alleged rape, carnal knowledge or sodomy, where death occurs **in a jail** or prison; where a body is found dead or is not claimed by relatives or friends, is hereby vested in the county coroner or medical examiner, which bodies may be removed and placed in the morgue under such rules as are adopted by the coroner or medical examiner with the approval of the county commissioners, having jurisdiction, providing therein how the bodies shall be brought to and cared for at the morgue and held for the **proper identification** where necessary.

Medical Examiner System

- A *medical examiner* is a licensed physician who has specialized training and board certification in the field of Forensic Pathology.
- Appointed, not elected, position
- Population over 250,000
- 6 Medical Examiner Offices in WA
 - Clark County
 - Pierce County
 - King County
 - Snohomish County
 - Whatcom County
 - Spokane County



Medical Examiner System

- **MEDICAL EXAMINER**
 - Population over 250,000
 - Designated staff to work specific tasks
 - Larger budget
 - 24/7 staff in office
 - (Whatcom is on-call currently)
 - In-house doctor(s)
 - Autopsy daily
 - All inclusive Facility

Budgets for Medical Examiner Offices in Washington State 2022

- Pierce County.... **\$12,716,410** (25 employees) 1 Chief Medical Examiner, 1 Deputy Chief Medical Examiner, 1 Associate Medical Examiner, 5 office admin, 6 autopsy assistants, 1 operations manager, 1 lead investigator, 9 full time investigators.
- King County....\$ **14,074,559**, 1 Chief Medical Examiner, 1 lead investigator, 9 full-time investigators, 2 disease control officers, 3 full time autopsy technicians, 1 intern
- Snohomish County.... **\$3,895,733** (21 employees) 1 operations manager, 1 chief investigator, 4 full-time pathology assistants 1 part-time , 1 pathologist, 1 lead investigator, 9 full-time investigators, 1 part-time investigator, and 2 office admins

Budgets for Medical Examiner Offices in Washington State 2022

- Spokane County.... \$2,639,086 (15 employees) 1 Chief Medical Examiner, 2 Deputy Medical Examiners, 1 Operations Manager, 2 admin, 1 Lead Autopsy Supervisor, 2 autopsy assistants , and 6 full-time investigators.
- Clark County \$1,840,000 (2021) (10 employees) 1 Chief Medical Examiner, 1 associate medical examiner, 5 full-time investigators, 2 full time autopsy technicians and 1 operations manager.
- Whatcom County.... \$588,000 (9 employees) 1 Operations Manager, 1 full-time lead investigator, 3 on-call investigators, 1 Chief Medical Examiner, 1 full time autopsy assistant, 1 part-time autopsy assistant, 1 office administrator

Counties Similar to Whatcom

- **Kitsap County (2021)**

- Population: 278,064
- Annual Budget: \$ **1,538,980**
- Reported Deaths: 938
 - Autopsies: 159
 - Externals: 135
 - Limited: 33

- **Whatcom County (2022)**

- Population: 250,000
- Annual Budget: **\$588,000**
- Reported deaths: 742
 - Autopsies: 150
 - Externals: 91
 - Limited: 8

Counties Similar to Whatcom

- **Benton County (2021)**

- Population: 201,877
- Annual Budget **\$919,809**
- Case Load: 373
- Employees: 5; plus 2 interns

- **Thurston County (2022)**

- Population: 275,611
- Annual Budget: **\$ 1,685,998**
- Case Load: no current data
- Employees: 12 (full-time)

REPORTED COUNTY CASE LOADS

Clark County (2021): 457 Jurisdictional Cases; 141 No Jurisdiction

Pierce County: no data

King County (2021): 3,086 Jurisdictional Cases; 941 No Jurisdiction

Snohomish (2021): 846 Jurisdictional Cases; 1,109 No Jurisdiction

Whatcom (2022 Jan-Dec 9): 419 Jurisdictional Cases,

261 No Jurisdiction

Spokane (2021): 952 Jurisdictional Cases, 1922 No Jurisdiction

Whatcom County Medical Examiner's Staff



Chief Medical Examiner (department head)

1 Operations Manager

1 Full-time Lead Investigator

2 Autopsy Technicians (1 full time, 1 part time)

3 On-call Investigators

2 Interns

The Medical Examiner or Operations Manager, along with on call Investigator are on duty 24/7/365

Prior to 2022

- Employees (2 plus ME):
 - One Assistant: 8:00 am – 12:00 pm; check messages and receive faxes; file cases; assist with autopsy
 - One Office Assistant (part-time)
- No staff certified in death investigation (ABMDI)
- No electronic case tracking system
- All files were paper

Prior to 2022: Families and Community

- minimal relationship with tissue donation facilities to allow for donation
- Indigent cases were not thoroughly vetted for accuracy or confirmation of indigent status
- Indigent/abandoned cases were not referred to donation facilities for education purposes, per RCW
- Limited training provided to outside agencies regarding the role of the Medical Examiner's Office

Prior to 2022: Death Investigation

- Policies and procedures were from 2002
- **No** Scene Responses; therefore, **no** scene photographs
- No Medical Examiner scene investigations
- No Medical Examiner Report of Death
- Hospital and home deaths were not properly reported
- Fracture and accidental cases were not fully investigated (EDRS referrals)

What does the Medical Examiner's Office Do? (Today)

Screen	Screen reported deaths and determine involvement
Locate and notify	Locate and notify family of a death
Conduct	Conduct scene investigation; external or internal examinations
Certify	Certify death certificates when requires our involvement
Follow	Follow-up on open cases
Close out	When the cause and manner of death have been determined, the case is closed out and reports are sent to families, if requested, and to Law Enforcement of jurisdiction.
Talk	Talk with families and agencies regarding cases
Provide	Provide public outreach with community and partner agencies

Current Medical Examiner Operations

- Office Hours 9:00 am – 5:00 pm
- On-Call Staff: Available 24 hours a day, 365 days a year
- Policies and procedures are in accordance with IACME accreditation
- Forensic Pathologist on call to respond to scenes as needed
- Operations Manager on call 24/7
- Lead Investigator on-call after hours to assist investigators on a scene

Current Medical Examiner Operations

- Investigators on-call 24-hours: respond to scenes
- gather information and data from the scene relevant or related to cause and manner of death, which provides key information to the forensic pathologist
- Fully electronic case files
- Required: **all** home and hospital deaths are reported to the medical examiner's office to screen for jurisdiction
- Medical records are reviewed on hospital deaths for verification of information

Current Medical Examiner Operations

- A Report of Death is completed by the Investigator that attended the scene (detailed written document with extensive case information)
- Autopsy reports are provided to family members when requested
- Medical Examiner available to speak with any family member upon request
- Families now able to allow for tissue or cornea donation
- Autopsies are performed on cases in accordance with IACME accreditation Standards and NAME Autopsy Standards;

Current Medical Examiner Operations

- DNA is collected and retained permanently on all Medical Examiner Cases
- Specimens (bodily fluids and tissue) are collected and held on a retention schedule
- All skeletal remains will be examined by the state anthropologist
- Archaeological specimens will be turned over to the State Archaeologist
- All unidentified decedents will be examined by the state odontologist, a DNA sample will be submitted to CODIS; entered into NAMUS

Current Medical Examiner Operations

- Indigent cases are properly vetted for accuracy and confirmation of indigent status
- Indigent cases referred to donation as required per RCW's
- Intern Program (volunteers)
 - Investigations
 - Pathology/Autopsy

What Standards Do We Follow?

-
- Investigation process per the (ABMDI) American Board of Medicolegal Death Investigators, (IACME) International Association of Coroners and Medical Examiners, and (NAME) National Association of Medical Examiners accreditation standards resulting in consistent, professional and high-quality death investigations.



What Does this mean?

- Costs will increase due to:
 - 24/7/365 an investigator will be on call for the Medical Examiner's Office;
 - Reporting all home deaths;
 - Investigators responding to the scenes to conduct a thorough death investigation;
 - All hospital cases will be reported and reviewed by an experienced investigator;
 - Case information will be entered into an electronic case tracking system;
 - Contract initiated with a company to dispose of the biohazard trash;
 - Office hours now 0900-1700 Monday-Friday
 - Staff Available to meet with families, agencies and stakeholders

IS THIS A JURISDICTIONAL CASE?

- If it is reported that the deceased has **significant medical history** the investigator will reach out to the primary care provider and notify them that their patient has died and discuss the facts and the reported information to the primary care provider.
- If the provider **confirms the history** and reveals no red flags, the primary care provider will complete the death certificate, the case will receive an **NJA** number and jurisdiction will be released.



2021 versus 2022

	2021	2022
Deaths Reported to the ME	unknown	742
Death Investigations	0	458
MEI Scenes	0	262
Postmortem Examinations	168 (per annual report)	251
Full Autopsy	No data	150
Limited	No data	8
External or Toxicology Only	No data	91

2021 versus 2022

Manner	2021	2022
Natural	33	405
Accident	88	184
Suicide	37	51
Homicide	3	10
Undetermined	7	37 (mostly bones)
Pending	No data	55 pending completion
Total	168	742

IMPORTANCE OF A THOROUGH DEATH INVESTIGATION

EXAMPLES FROM EARLY 2022:

****8 cases were signed out as natural** (by treating physician)

****Upon further review of the case the following were determined:**

- (1) Anoxic Encephalopathy due to acute fentanyl and methamphetamine intoxication, Manner: **Accident**
- (2) Subdural Hematoma, Manner: **Accident**
- (1) Acute heroin and methamphetamine intoxication, Manner: **Accident**
- (1) Anoxic encephalopathy due to acute fentanyl intoxication, Manner: **Accident**
- (2) Acute fentanyl and methamphetamine intoxication, Manner: **Accident**
- (1) Septic Shock; endocarditis, neck abscess, Other significant conditions paraplegia after a fall from height in 2018, Manner: **Accident**



What do Medicolegal Investigators do?



That moment when you find out
Forensic Science isn't like a TV show

Do Forensic Science, they said.

It will be like CSI.....

INITIAL INTAKE



- Receive a call from an agency reporting the death.
- Obtain demographic information about the decedent, name, date of birth, address;
- Is there next of kin?
- Obtain medical and social history;
- Ascertain when the decedent was last seen alive;
- What was the condition of the decedent or their activities prior to last known alive? Did they have complaints?
- Are there medications on scene?

INITIAL INTAKE



- Is there evidence of a struggle?
- Is there trauma on the body?
- Is there a weapon nearby?
- Are there drugs, alcohol or paraphernalia on scene?
- Log in to look at medical records to verify information

WHY GO TO THE SCENE?

- **STANDARD OF PRACTICE**

- **Non-attendance at death scenes has been regarded as one of the classical mistakes in medicolegal death investigation and forensic pathology.**
- view the body in the context of its surroundings
- obtain information on how, when, and where the body was found, by whom, and under what circumstances.
- the forensic pathologist is better able to interpret findings at the autopsy
Example: patterned imprint across the neck from collapsing onto an open drawer

The Scene Response

- Arrive at the scene
- Gather information available from law enforcement.
- Interview witnesses, bystanders and family members;
- obtain demographic information from all interviewed and those needed to be interviewed that may have left prior to investigator arrival.

The Scene Response

- Enter scene: take notes on observations
- take progressive photographs.
- Photograph the overall scene and then from four corners.
- Observe the overall scene
- identify items on or near the body that may have influenced the death; photograph all items.
- Approach the decedent, photograph the decedent as found, then around the entire body.
- Body exam: look in the eyes, ears, and mouth, photograph and document findings and observations.

The Scene Response continued.....

- Photograph, Observe (visual inspection), palpate (touch) – entire body and back; DOCUMENT (written report of all findings)
- If a weapon is involved, place paper bags over the hands and secure with tape at the wrist.
- If it is a homicide a body bag lined with a white sheet will be placed under the body and the body will be rolled onto the body bag and sheet.
- The body will be sealed in a body bag and will be locked with a numbered integrity seal.
- If not a homicide, a body bag will be placed under the body and the body will be secured in the body bag and locked with an integrity seal.
- Arrange for transport to the Medical Examiner's Office.



Types of Death Scenes

- **Accidental** deaths, which include a multitude of circumstances, including misadventure
- **Suicidal** deaths, which include a multitude of circumstances
- **Homicidal** deaths, which include a multitude of circumstances
- **Sudden deaths**, with or without suspicious circumstances
- **Difficult victim identification**, which includes mummification and putrefaction
- **Disaster** victim identification dealing with **multiple casualties**

Arrival to the Medical Examiner's Office

- On a routine basis, upon arrival to the office;
- Decedent is logged into the tracking system and morgue with date and time of arrival.
- X-rays are taken if required.
- Decedent is removed from the body bag and photographed as received.
- Property is removed, documented and photographed.
- Clothing on the body and accompanying the body is documented, removed and photographed.
- The body is photographed (front and back) along with injuries, scars, marks and tattoos.

Why is supporting our Medical Examiner System Important?

- Need proper staffing
 - high case load results in burn out and injury
 - This will be greatly reduced.
- Morale will be optimal
- All deaths will be screened, and information will be verified.
- Jurisdiction will be assumed for all cases that fall under Medical Examiner's Jurisdiction.
- Thorough Death Investigations will be conducted.

Why is supporting our Medical Examiner System Important?

- Proper oversight of Medical Examiner Cases: including drug related deaths, suicides, homicides, accident and abuse cases.
- Confirm all information for death certificates. (public health and community concern)
- Revenue and savings for Whatcom County general fund:
 - Confirming indigent deaths
 - State reimbursement for autopsies
- Provide service to families.
- Enable the Medical Examiner's Office to provide information and data in the interest of public health and the community
- move forward with accreditation process.

Critical Needs: MUST HAVE IMMEDIATELY

- 4 additional Full Time Investigators
- 1 additional Full Time Autopsy Technician

CRITICAL NEEDS: AS SOON AS POSSIBLE (BY 2024)

- ROLL "OFFICE" INTO COUNTY or MARKEDLY INCREASE BUDGET
- RETENTION OF EMPLOYEES
- MUST HAVE **BENEFITS** INCLUDING (BUT NOT LIMITED TO):
 - HEALTH, VISION, DENTAL INSURANCE
 - VESTED RETIREMENT WITH WASHINGTON STATE
 - DEFERRED COMPENSATION
 - LIFE INSURANCE
 - DISABILITY INSURANCE

OTHER CRITICAL NEEDS

- NEW FACILITY
- MUST HAVE ACCREDITATION BY 2025 (STATE LAW)
- PROCESS TAKES ONE YEAR



EXPANSION

OFFICE

PUBLIC PARKING

EXPANSION

AUTOPSY COMPLEX

SALLY PORT

MASS DISASTER

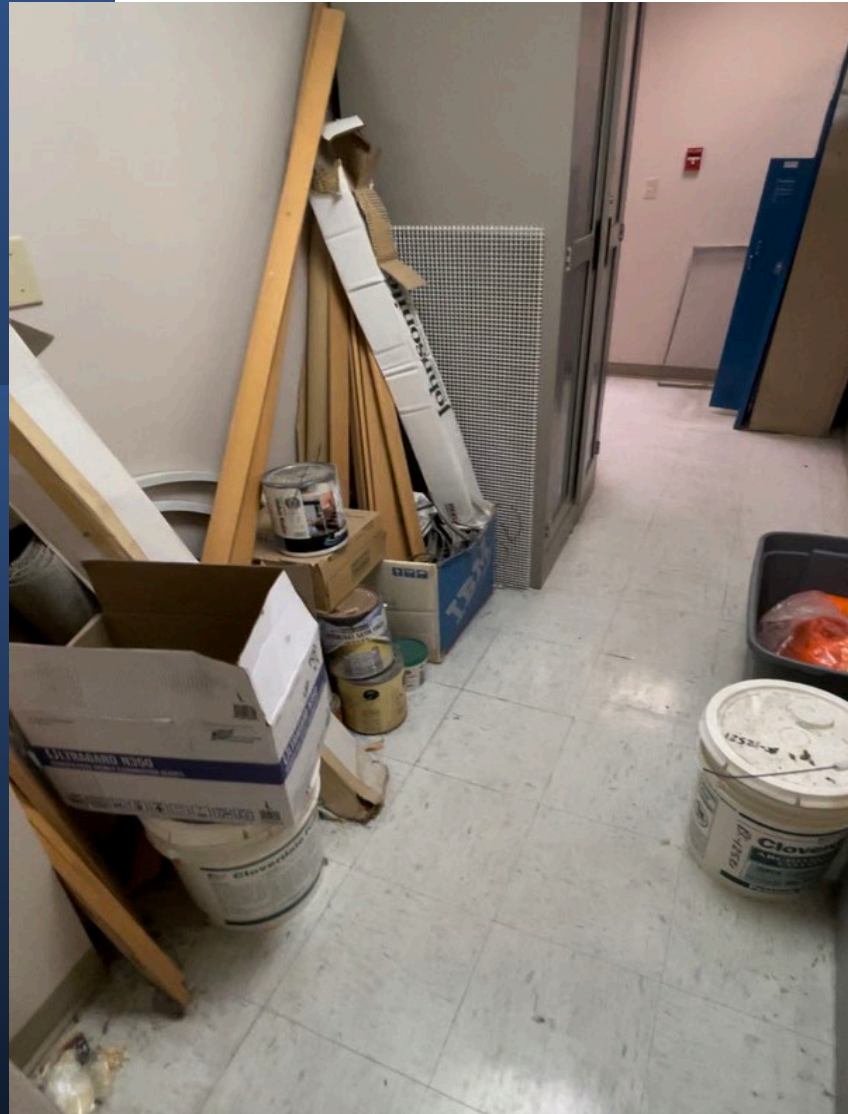
EXPANSION

STAFF PARKING

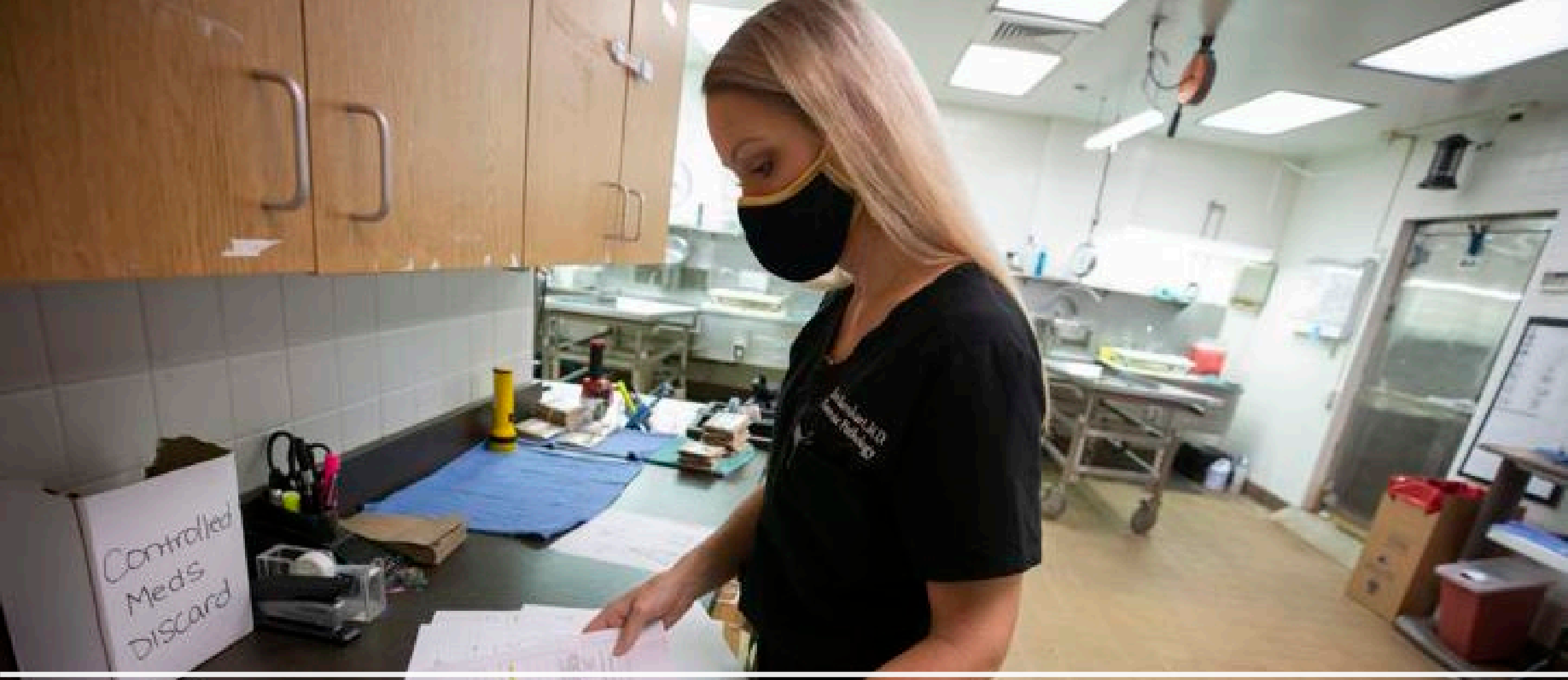
SHERIFF'S EVIDENCE



Morgue
January
2022







Circa 2016: Galveston

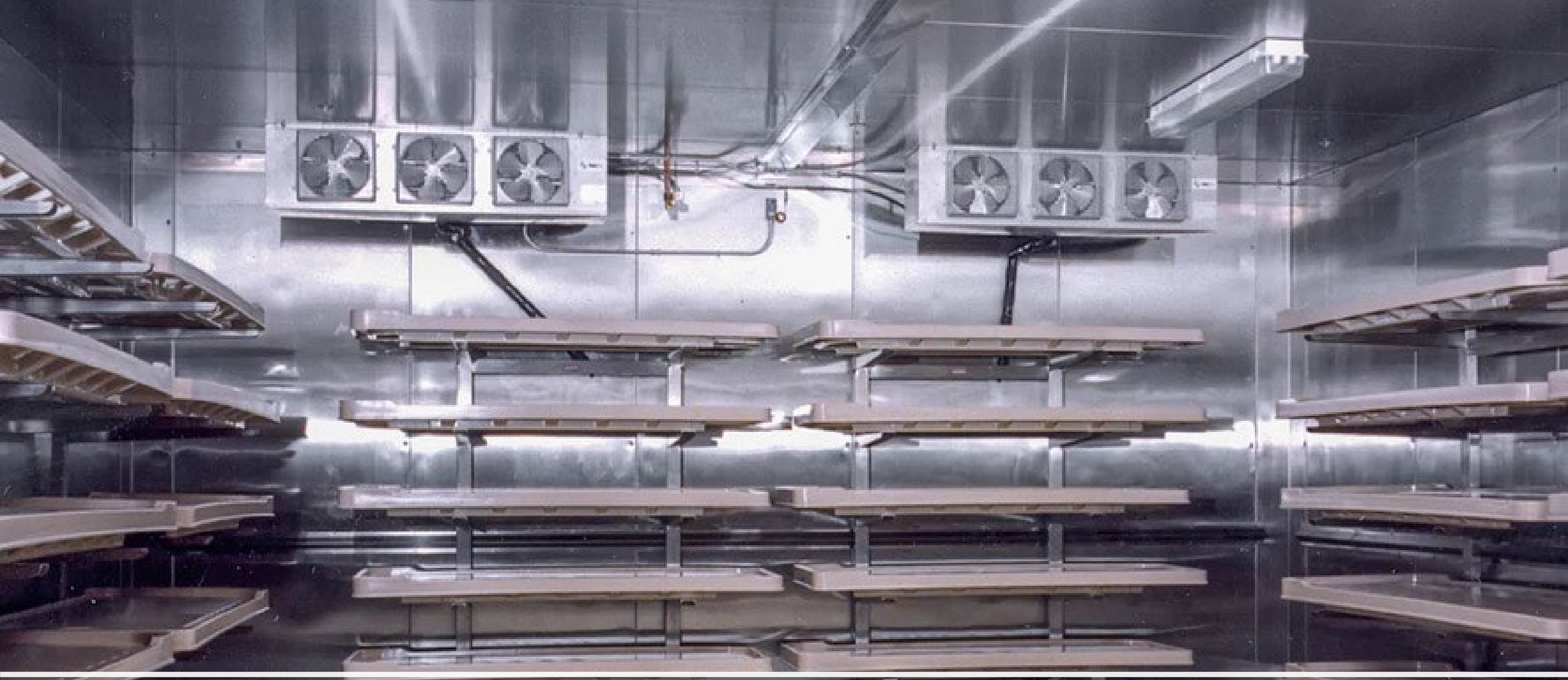


Galveston Morgue (population 350,000)





Homicide/Special Procedure Room



Walk-In Cooler; Racks; Lift



Rack System

LODOX

Currently: bring in portable x-ray

Grant for own portable x-ray





BENEFITS TO WHATCOM COUNTY

- PROFESSIONALISM, COMPASSION AND INTEGRITY with thorough and complete death investigation and certification
- Staff Available to meet with families, agencies and stakeholders
- 24/7/365 an investigator will be on call for the Medical Examiner's Office
- Investigators responding to scenes to conduct a thorough death investigation
- All hospital cases will be reported and reviewed by an experienced investigator;
- Case information entered into an electronic case tracking system
- Office hours now 0900-1700 Monday-Friday



Questions???