AGENCY JURISDICTION

1.1 **JURISDICTION**: The Office of the Chief Medical Examiner functions pursuant to District of Columbia Code, Division I, Title 5, Ch.14. (DC Law 13-172).

1.2 **DEATH DETERMINATIONS AND INVESTIGATIONS; CREMATIONS.** D.C. Code Sec. 5-1405.

(a) The CME, other medical examiners, and medicolegal investigators (physician assistants or advanced practice registered nurses) licensed under subchapter V of Chapter 12 of Title 3, are authorized to make determinations of death.

(b) Pursuant to regulations established by the Mayor, the following types of human deaths occurring in the District of Columbia shall be investigated by the OCME:

(1) **BY VIOLENCE**: whether apparently homicidal, suicidal or accidental including deaths due to thermal, chemical, electrical or radiation injury and death due to criminal abortion, whether apparently self-induced or not;

(2) **SUDDENLY, UNEXPECTED OR UNEXPLAINED**: not caused by readily recognizable disease, including sudden infant deaths or apparent sudden infant death syndrome (SIDS) for infants one year of age and younger;

(3) **UNDER SUSPICIOUS CIRCUMSTANCES**: under suspicious circumstances;

(4) **WHEN A BODY IS TO BE CREMATED, DISSECTED, OR BURIED AT SEA**: bodies are to be cremated, dissected, buried at sea or otherwise disposed of so as to be thereafter unavailable for examination;

(5) **BY DISEASE, INJURY OR ILLNESS RESULTING FROM EMPLOYMENT**: related to disease resulting from employment or on-the-job injury or illness;

(6) **BY DISEASE CONSTITUTING A THREAT TO PUBLIC HEALTH**: related to disease which might constitute a threat to public health;

(7) **WHEN WARD OF DISTRICT OF COLUMBIA**: persons who are wards of the District of Columbia government (“ward” means any person in the official custody of the District government, on a temporary or permanent basis, because of neglect, abuse, mental illness or mental retardation, D.C. Sec.5-1401);
(8) **BY MEDICAL OR SURGICAL INTERVENTION**: related to medical or surgical intervention, including operative, peri-operative, anesthesia, medication reactions or deaths associated with diagnostic or therapeutic procedures;

(9) **IN LEGAL CUSTODY**: while in legal custody of the District (legal custody includes imprisonment, jail or detention, D.C. Code Sec. 5-1401);

(10) **BY MATERNAL TRAUMA OF FETUS**: fetal deaths related to maternal trauma including substance abuse, and extra-mural deliveries;

(11) **WHEN REQUESTED BY LAW ENFORCEMENT OR COURT-ORDERED**: deaths for which the Metropolitan Police Department, or other law enforcement agency, or the United States Attorney’s Office requests, or a court orders investigation; and

(12) **WHEN A DEAD BODY IS BROUGHT INTO THE DISTRICT OF COLUMBIA WITHOUT PROPER CERTIFICATION**.

(c) **CREMATIONS**: Clearances by the CME shall be required for all deaths occurring in the District of Columbia for which cremations are requested regardless of where the cremation occurred.

(d) **POSSESSION OF A DEAD BODY**: The Mayor shall, by regulation, prescribe procedures for taking possession of a dead body following a death subject to investigation under subsection (b) of this section and for obtaining all essential facts concerning the medical causes of death and the names and addresses of as many witnesses as it is practicable to obtain.

1.3 DEATH NOTIFICATION & PENALTIES FOR NONCOMPLIANCE. D.C. Code Sec. 5-1406

(a) For all deaths described in § 5-1405(b), the CME shall take charge of the body upon the mandatory and direct notification of the death required by subsection (b) of this section. The CME, or duly authorized representatives of the CME, shall have authority to respond to the scene of the death. The body of the decedent shall not be disturbed unless the CME, or the CME's designee, grants permission to do so.

(b) All law enforcement officers, emergency medical service (EMS) personnel, physicians, nurses, health care institutions, nursing homes, community residential facilities, prisons and jails, funeral directors, embalmers and other persons shall promptly notify the OCME of the occurrence of all deaths coming to their attention which are subject to investigation under § 5-1405(b) and shall assist in
making the bodies and related evidence available to a medical examiner for investigation and autopsy.

(c) Any person subject to the reporting requirements in subsection (b) of this section who willfully fails to comply with this section shall be guilty of a misdemeanor and upon conviction shall be fined not less than $100 nor more than $1,000.

1.4 **SUBPOENA POWER FOR ACCESS TO CONFIDENTIAL RECORDS. D.C. Code Sec. 5-1407.**

The CME is authorized to issue a subpoena for confidential medical records and relevant information from physicians, hospitals, nursing homes, residential care facilities and other health care providers as in his or her opinion is necessary for investigating deaths under this chapter. Any such subpoena issued by the CME may be enforced by order of the Superior Court. The Mayor shall, by regulation, prescribe procedures for issuing administrative subpoenas pursuant to this section.

1.5 **POSSESSION OF EVIDENCE AND PROPERTY. D.C. Code Sec. 5-1408.**

(a) At the scene of any death subject to investigation under § 5-1405(b), the medical examiner, a medicolegal investigator, or a law enforcement officer shall take possession of any objects or articles which, in his or her opinion, may be useful in establishing the cause and manner of death or the identity of the decedent and shall hold them as evidence. The Mayor shall issue regulations concerning the evidence in the possession of the CME and the transfer of that evidence to law enforcement agencies or the United States Attorney's Office. The regulations shall include requirements on the length of time evidence shall be preserved by the CME, and shall require that toxicology and histology specimens be preserved for periods of time consistent with the accreditation requirements of the National Association of Medical Examiners.

(b) In the absence of the next of kin, a police officer, a medical examiner or a medicolegal investigator may take possession of all property of value found on or in the custody of the decedent. If possession is taken of the property, the police officer, medical examiner or medicolegal investigator shall make an exact inventory of it and deliver the property to the Property Clerk of the Metropolitan Police Department. The Mayor shall issue regulations concerning the transfer of any such property from the OCME.
1.6 EXAMINATION; FURTHER INVESTIGATION AND AUTOPSY D.C. Code Sec. 1409.

(a) If, in the opinion of the CME, the cause and manner of death are established with a reasonable medical certainty, the CME shall complete a report of the medical examination of the decedent.

(b) If, in the opinion of the CME, or the United States Attorney, further investigation as to the cause or manner of death is required or the public interest so requires, a medical examiner shall either perform, or the CME shall arrange for a qualified pathologist to perform, an autopsy on the body of the decedent and to retain tissues and biological specimens deemed necessary to an investigation. No consent of the next of kin shall be required for an autopsy to be performed under this section.

(c) The medical examiner performing the autopsy shall make a complete record of the findings and conclusions of any autopsy and shall prepare a report thereon.

1.7 AUTOPSY BY PATHOLOGIST OTHER THAN A MEDICAL EXAMINER. D.C. Code Sec. 5-1410.

(a) If an autopsy is performed by a pathologist other than a medical examiner by request of the CME, the pathologist shall furnish to the CME, a complete record of the findings and conclusions of the autopsy. The CME, or assigned medical examiner, shall thereupon prepare a report, indicating the name of the pathologist performing the autopsy, the pathologist's findings and conclusions, and the CME's, or assigned medical examiner's, own comments, if appropriate.

(b) A pathologist other than a medical examiner who performs an autopsy at the request of the CME shall be compensated in accordance with a fee rate established by the Mayor by regulation.

1.8 DELIVERY OF BODY; EXPENSES. D.C. Code Sec. 5-1411.

(a) Following investigation or autopsy, the CME shall release the body of the decedent to the person having the right to the body for the purpose of burial or other disposition pursuant to law. If after a reasonable time, established by regulation by the Mayor, no authorized person claims the body of the decedent, the CME shall dispose of the body in accordance with the law.

(b) Expenses of transportation of bodies and autopsies performed pursuant to this chapter shall be borne by the District of Columbia.

(c) Only the CME shall dispose unclaimed bodies in the District without of next of kin or other means of disposition. The Mayor shall prescribe fees and regulations for the storage and disposal of unclaimed bodies.
1.9 MAINTENANCE OF RECORDS; ANNUAL REPORT. D.C. Code Sec. 5-1412.

(a) The CME shall be responsible for maintaining full and complete records and files, properly indexed, giving the name, if known, of every person whose death is investigated, the place where the body was found, the date, cause and manner of death and all other relevant information and reports of the medical examiner concerning the death. The CME shall issue a death certificate in all appropriate cases.

(a-1) Records and files related to an open investigation of a homicide shall be retained for 65 years from the date the CME initiates its investigation of the homicide. Other records and files maintained under subsection (a) of this section shall be retained by the CME for periods of time established by regulations issued pursuant to Sec. 5-1417. For the purposes of this subsection, the term “open investigation” shall have the same meaning as provided in section § 5-113.31(10). (Millicent Allewelt Amendment Act of 2004, passed on 2nd reading on March 2, 2004 (Enrolled version of Bill 15-34).

(b) The records and files maintained under the provisions of subsection (a) of this section shall be open to inspection by the Mayor, or Mayor's authorized representative, the United States Attorney and the United States Attorney's assistants, the Metropolitan Police Department, or any other law enforcement agency or official, and the Child Fatality Review Committee when necessary for the discharge of its official duties; upon request, to such persons, the CME shall promptly deliver to such persons copies of records relating to the deaths as to which further investigation may be advisable.

(c) Any other person with a legitimate interest may obtain copies of records maintained pursuant to subsection (a) of this section upon such conditions and payment of such fees as may be prescribed by regulation by the Mayor. If such person fails to meet the prescribed conditions, such person may obtain copies of such records pursuant to court order if the court is satisfied that such person has a legitimate interest.

(d) The CME shall prepare an annual report to the Mayor which includes information on the number of autopsies performed, statistics as to the causes of deaths, and any other relevant information the Mayor may require. The annual report shall be open to inspection by the public. The annual report shall not identify by name, deceased persons examined.

1.10 RECORDS AS EVIDENCE. D.C. Code Sec. 5-1413.

The records maintained pursuant to § 5-1412, or reproductions thereof certified by the CME, are admissible as evidence in any court in the District; except that,
statements made by witnesses or other persons and conclusions upon nonmedical matters are not admissible.

1.11 AUTOPSIES PERFORMED UNDER COURT ORDER. D.C. Code Sec. 5-1414.

In the case of unexplained, sudden, violent, or suspicious death, when the body is buried without investigation, or there has been an inadequate investigation, the United States Attorney, on his or her own motion, or on request of a medical examiner, or the Metropolitan Police Department, or other law enforcement agency, may petition the appropriate court for an order to conduct an inquiry. The court may order the body exhumed and an autopsy performed. In such cases, records and reports shall be filed as if the autopsy were performed prior to burial; except that, a copy of the report shall be furnished directly to the court.

1.12 TISSUE TRANSPLANTS. D.C. Code Sec. 5-1415.

The CME may allow the removal of tissue pursuant to § 7-1541.05.
2.0 ORGANIZATION

2.1 MISSION: The Mission of the Office of Chief Medical Examiner (OCME) is to investigate and certify all deaths in the District of Columbia that occur by any means of violence (injury), and those that occur without explanation or medical attention, in custody, or which pose a threat to the public health. OCME provides forensic services to government agencies, health care providers and citizens in the Washington DC metropolitan area to ensure that justice is served and to improve the health and safety of the public.

2.2 ORGANIZATION: The District of Columbia Office of the Chief Medical Examiner is organized into four Divisions:

1) Offices of the Chief & Administration
2) Death Investigation and Certification
3) Forensic Toxicology
4) Fatality Review

2.3 OFFICES OF THE CHIEF & ADMINISTRATION

The Office of the Chief is responsible for oversight of the operational and programmatic functions of the OCME. The Office of Administration program provides administrative services and support to the staff of the OCME. These services include personnel management (timekeeping, training and educational development, and labor relations); contracting and procurement; risk, fleet, property and financial management; information technology and legal services; communications; and agency performance management.

2.4 DEATH INVESTIGATION AND CERTIFICATION

The Death Investigation and Certification Division is responsible for forensic pathology, forensic investigation and mortuary services. Forensic pathology involves conducting decedent examination, certifying the cause and manner of death and providing that information to next of kin and law enforcement, as well as designated government entities and interested parties. Forensic investigation includes evidence gathering, medical interpretation and provision of information to aid in the determination of the cause and manner of death. The purpose of mortuary services is to provide body disposition and autopsy support to forensic pathology staff and the funeral industry. The various functions within this Division are as follows:

(a) **Forensic Pathology**: The purpose of Forensic Pathology is to provide in a timely manner decedent external and/or internal examination, documentation and
analysis services to law enforcement, government agencies, interested parties and families to determine and understand the cause and manner of death.

Services comprised by the activity include: Death certificates; Autopsy reports; Postmortem examinations (autopsies and external exams), Microscopic exams, Neuropathology exams, Other consulting exams, Other consulting reports, Consultations, Court Testimony, Tissue/organ recovery approvals, Evidence collection, Training and Educational presentations, and Residency rotations.

(b) **Forensic Investigation**: The purpose of Forensic Investigation is to provide information and evidence gathering and medical interpretation services to OCME, law enforcement agencies, legal counsel and the community to identify decedents and aid in the determination of the cause and manner of death.

Services comprised by the activity include: Initial death report, Death investigations, Investigation reports, Body identification, Cremation approvals, Public dispositions (unclaimed bodies), Customer inquiry responses and consultations, Training consultations, Educational Presentations, Internship program, and Safety and health recommendations.

(c) **Mortuary Services**: The purpose of Mortuary Services is to provide body disposition and autopsy support services to OCME, the funeral industry and the public so they can have a body, which is prepared for autopsy or disposition in a timely manner.

Services include: Body removals/transports, Body intakes, Body storage, Body releases, Body radiographs (x-rays), Autopsy assistance, and Public dispositions (unclaimed bodies).

(d) **Grief Counseling**: The purpose of Grief Counseling is to provide assessment, Intervention and referral services to individuals and families of decedents so they can cope with issues of trauma and grief following the death of a loved one.

Services include: Assessment interview, Grief consultations, Counseling sessions, Referrals, Educational materials, and Crisis intervention.

### 2.5 FORENSIC TOXICOLOGY

The OCME Forensic Toxicology Laboratory maintains standards of practice for the detection, identification and quantitation of alcohol, drugs and other toxins in biological specimens. The Laboratory provides scientific support services to OCME in order that the agency may provide accurate death investigation and
certification information in a timely manner to next of kin, law enforcement agencies, legal counsel and the community when required.

2.6  FATALITY REVIEW

The Fatality Review program reviews the circumstances of the deaths of individuals within certain populations, including their interaction with District government services. The purpose of the reviews is to provide analysis and recommendations to the public and District entities serving defined populations, so they can address systemic problems, provide better services and be held accountable. The current Fatality Reviews include the Child Fatality Review Committee (CFRC) and Developmental Disabilities Fatality Review Committee (DD FRC).
3.0 AGENCY PUBLIC-PRIVATE SECTOR RELATIONSHIPS

3.1 FUNCTION AND RESPONSIBILITY OF DISTRICT OF COLUMBIA CHIEF MEDICAL EXAMINER’S OFFICE: The function of the D.C. Chief Medical Examiner’s Office is to provide a medicological investigative service of the citizens of the District of Columbia. All activities and guidelines of the agency are established to this end. It is the responsibility of every employee to assist and cooperate in the investigation of death(s) that come within the jurisdiction of the Department in a courteous fashion rendering assistance wherever feasible within the limits of the Department.

3.2 INTERRELATIONSHIPS WITH THE PUBLIC AND PRIVATE SECTOR: There are public and private agencies and institutions with which CME interacts with varying degrees of involvement and which have concurrent interest and jurisdiction regarding certain death cases. Interagency cooperation and coordination is a mandatory requirement for all Agency personnel. The following public and private agencies play a major role in such efforts:

(a) **District of Columbia Department of Health (DOH):** The agency works closely with DOH Center for Policy, Planning and Epidemiology, Vital Records Division. The agency certifies cause and manner of death for purposes of evaluation by the city’s Office of Vital Records. The death certificate must correspond to the reporting requirements of the city’s Office of Vital Records and to the requirements of the International Classification of Diseases (ICD) code. Further, the agency reports deaths by circumstances (i.e., contagious diseases) that are critical to the public to DOH’s Public Health Laboratory. Lastly, the agency coordinates with DOH in emergency response operation planning, training, provision of emergency management information and mobilization and deployment in emergency incidents.

(b) **Metropolitan Police Department (MPD):** The agency works with MPD’s Violent Crime Branch (Mobile Crime Unit) in the investigation efforts toward determination of the cause and manner of death. Further, OCME must turn over all evidence, valuables and certain other decedent property to MPD.

(c) **Fire and Emergency Medical Services (FEMS):** The agency interacts with FEMS at death scenes where FEMS employees have provided emergency medical care and transportation, fire prevention, hazardous material response and rescue services to residents and visitors to the District. Further, the agency works with FEMS in the investigation of cause and manner of death in these circumstances.

(d) **Homeland Security and Emergency Management Agency (HSEMA):** The agency coordinates with HSEMA in emergency response operation
planning, training, provision of emergency management information and mobilization and deployment in emergency incidents.

3.3 **FUNERAL HOMES:** When the autopsy or examination is completed by the agency the body will be released to a funeral home that the family has selected. The Agency will notify the appropriate funeral home and note the information both on and in the case file. A partially completed death certificate will be provided by the agency to the funeral home, usually at the time the body is picked up. In cremation approval cases, funeral homes will call the agency and relate all necessary information per a recorded telephone format. Under no circumstances will personnel of this agency ever recommend a funeral home to a family.

3.4 **EXECUTIVE OFFICE OF THE MAYOR:** Records and files maintained by the OCME in accordance with D.C. Code Sec. 5-1412 are open to inspection by the Mayor or Mayor’s authorized representative.

3.5 **LAW ENFORCEMENT:** Records and files maintained by the OCME in accordance with D.C. Code Sec. 5-1412 are open to inspection by the U.S. Attorney General, the U.S. Attorney’s assistants, the MPD and any other law enforcement agency or official.

3.6 **CONFIDENTIAL MATERIAL:** Written information received from the police or hospitals such as a formal statement of a person, or medical/psychiatric evaluations are privileged material and will be withheld from public review to protect individual rights. D.C. Code

3.7 **ATTORNEY GENERAL’S OFFICE:** The Attorney General is the city’s chief prosecuting officer and represents the city in all criminal prosecutions. Records and files maintained by the OCME in accordance with D.C. Code Sec. 5-1412 are open to inspection by the Attorney General who will have access to all Agency case files at all times.

3.8 **PRESS AND NEWS MEDIA:** The Agency will cooperate with the news media in releasing information not detrimental to ongoing police investigations or the administration of justice. Each contact with the media should inspire trust, generate confidence, cooperation, and approval of the inquiring body. Caution is to be observed, however, to avoid release of legally privileged information or representing opinion as fact. No opinion statements will be made by Agency personnel. In some cases, information will be released only for formal press release over the signature of the Medical Examiner or his/her designee. In homicide and unclassified cases, information released to the news media by the
Agency will be limited to cause and manner of death as listed on the District of Columbia Death Certificate. The Public Information Officer is the only employee authorized to speak to or provide such information to the media.

Admission of news media personnel to the Agency is granted with the same restrictions as to other members of the general public, (See Security Section within this manual).

3.9  **MEDICAL OFFICES, HOSPITALS AND INSTITUTIONS:** The Agency cooperates with the local medical community by providing unclassified, unprivileged medical information to attending physicians, hospitals, and educational institutions.

3.10 **RESEARCHERS:** Unclassified, unprivileged case file information is made available to legitimate legal and medical researchers, criminologists, sociologists and investigate news reporters. All requests for research will be in writing and directed to the Chief Medical Examiner for approval.

3.11 **FATALITY REVIEW COMMITTEES:** Records and files maintained by the OCME in accordance with D.C. Code Sec. 5-1412 are open to inspection by the Child Fatality Review Committee when necessary for the discharge of its official duties. OCME also provides the Mental Retardation and Developmental Disabilities Fatality Review Committee and Domestic Violence Fatality Review Board key information for the discharge of its official duties.

3.12 **FIRE DEPARTMENT’S PARAMEDICAL PERSONNEL:** All Fire Department rescue units work closely with the Agency and will provide information to the Agency via a computer/printer concerning cardio-pulmonary resuscitation (CPR) cases and/or cases in which death appears imminent. This information will then be transcribed by an Investigator and noted on the CASE INFORMATION. Should a death result the body will then come to the Agency.

3.13 **TISSUE, BONE, CORNEA, AND OTHER ORGAN DONATION PROGRAMS:**

(a) The Agency will assist other agencies that have a legitimate interest in organ, bone and tissue transplant programs and who have obtained the family permission for donations from a deceased by expediting the handling of this particular type of case. (See Organ Donation Policy) Close coordination and cooperation in this matter is this Agency’s policy and working standard. When such a case is being worked, the Medical Examiner responsible for the case will be notified to assist in expediting such cases.
(b) All Medical Examiner personnel will assist in this process by witnessing telephone permission donations on the appropriate form provided by the agency staff. When the Agency is contacted by the donor teams concerning a transplant form persons whose death is imminent and which a medical examiner case, the case will be referred to the Medical Examiner on call.