

IDENTIFICATION

I. GENERAL

When possible, identification of deceased persons, whose death certificates are issued by the District of Columbia Office of the Chief Medical Examiner (DC OCME), are made visually. The visual identification can be done either at DC OCME by use of a photograph of the decedent's face or at the death scene, if appropriate. Medicolegal Investigators (MLIs) will make every effort to positively identify the decedent at the scene. The purpose is to assure that the correct name of the decedent is typed onto the death certificate, a legal document. Positive identification of such deceased persons must be accomplished by a forensically accepted method. These methods include comparison of ante-mortem and post-mortem fingerprints, comparison of ante-mortem and post-mortem dental or x-rays, and DNA analysis. At DC OCME, all decedents are fingerprinted after clearance by the medical examiner. The fingerprints are submitted to the Metropolitan Police Department (MPD) to be entered into the Automated Fingerprint Identification System (AFIS). If no positive identification is made through AFIS, the fingerprints are forwarded to the Federal Bureau of Investigation (FBI). If no match is made through the FBI, another forensically accepted method of identification is used.

II. VISUAL IDENTIFICATION

DC OCME Medical Examiners (ME) and/or Medicolegal Death Investigators (MLI) will review the identification photographs of decedents and determine whether a visual identification of the decedent can be made. Upon the determination that a visual identification can be made, the photograph will be shown to a family member, friend or other relation who is certain they know the decedent well enough to make an identification. This will be accomplished with that individual at DC OCME.

At a death scene, the MLI may have this individual in attendance make the identification by looking at the decedent's body or a photograph of the deceased person's face. The MLI will notify the Communications/Intake staff when the identification has been accomplished at the scene. The appropriate paperwork will be completed as if done at OCME.

After clearance by the medical examiner, the decedent will be fingerprinted by appropriately trained personnel whether or not a visual identification can be made. When it is determined that a visual identification cannot be made due to the extent of facial injuries or the state of decomposition, the mortuary staff will x-ray the decedent and/or take a biological sample to be used for DNA analysis. The sample shall be appropriately stored. DNA blood cards are made and retained indefinitely by DC OCME Toxicology laboratory.

The individual identifying the decedent will make available to DC OCME staff, an acceptable form of government identification.ⁱ The individual will present their

identification to the Security Officer in the DC OCME lobby who will then walk it to the window in the Communications/Intake Unit, handing it to Communications/Intake Staff. This staff member will notify the representative from Recover that there is an individual waiting to identify a decedent.

Communications/Intake staff will pull the case file and verify that the decedent can be visually identified. The Communications/Intake staff will give the Medical History Card and the Decedent Survivor Form to the Recover staff who will then go to greet the identifier and invite him/her to one of the two private Family Rooms. Recover will explain the identification process, offer Recover's services to the individual(s) and prepare the individual(s) to look at the photograph of the decedent. If the assigned MLI has indicated that an MLI needs to be notified to obtain more information about the decedent, the Communications/Intake staff member will do so at this time.

During the time the Recover representative is assisting the person(s) doing the identification, the Communications/Intake staff will be entering information in the computerized Forensic Analysis Case Tracking System (FACTS). This information will include the method of identification, date and time of identification, name and address of the individual attempting the identification of the decedent, type of identification presented and the identification number. The Communications/Intake staff member will indicate his or her own name as the staff member to whom the identification is made. This form will be printed and ready to take to the individual attempting to identify the decedent.

The Recover representative will inform the Communications/Staff member that the individual is ready to look at the photograph and attempt to make an identification of the decedent. The Communications/Intake staff member then meets with the person(s) in the Family Room of DC OCME, introduces themselves, offers an appropriate greeting and gives the individual the instructions for looking at the photograph. When he or she is ready, the individual can look at the photograph and if possible, make the identification.ⁱⁱ

The Communication/Intake staff will then ask the individual to print the full legal name of the decedent on the reverse side of the photograph, on the Medical History Card and on the FACTS Identification form. All forms must bear the same name, including middle initial and spelling. At the same time, the individual will sign his or her name with the date on each of these three documents. After reviewing the decedent's name and assuring that it is printed the same way on all three forms, AND the spelling of the name is understood, the Communications/Intake staff then signs and dates both the Medical History Card and the Identification form as witness to the identification.

Upon completion of this task, the Communication/Intake staff assures that the individual's identification has been returned. The staff member then returns to FACTS and, on the Identification screen, enters the remaining information:

- The decedent's name as printed on the forms by the identifier
- Identifier's relationship to the decedent

- Identifier's telephone number
- Staff member's own name and the date and time the identification is completed

This information is then saved to FACTS.

The Communications/Intake staff then types the decedent's name on the death certificate, without error. On the Release Checklist screen of the FACTS system, it is noted that the Decedent Survivor Form has been completed, if appropriate.

For identifications accomplished by forensically approved methods or if the identification is accomplished at the scene, it is the responsibility of the assigned MLI to complete the Identification form in FACTS with the name of the decedent as provided by the identifying person(s) or method. The MLI will indicate the correct name to be typed on the death certificate and the documentation authorizing the name.

When the identification is accomplished at a scene of death by the MLI, the following procedure will take place:

1. The MLI will have the individual attempting to identify the decedent present the acceptable form of government identification, take a photograph of it, and make note of the identification number. The MLI will explain the purpose and procedure for identification, and assist the individual(s) in filling out the Decedent Survivor form and the Medical History Card. Whether the individual either has observed the body of the decedent or looks at the photograph of the decedent's face, he or she will then print the full legal name of the decedent on the reverse side of the photograph and on the appropriate place on the Medical History Card. The individual will then sign his or her name and date both forms. The MLI will review the names printed, be sure the name is understood, and then sign his or her name to the Medical History Card as witness to the identification.
2. Upon returning to DC OCME, the MLI will then enter the data on the Identification screen of FACTS, print the form, and in the places indicated for the decedent's name, the identifier's signature and witness signature, the words "see Medical History Card" will be printed with the writer's initials and date alongside. The MLI will access the Release Checklist screen of FACTS and indicate the Decedent Survivor Form has been filled out, if appropriate. The MLI will inform the Communications/Intake staff that the identification has been completed and the decedent's name may then be typed on the Death Certificate.

III. OTHER FORENSICALLY ACCEPTED MEANS OF IDENTIFICATION

All decedents shall be fingerprinted after clearance by the medical examiner whether or not the decedent can be visually identified. It is the responsibility of the MLI and/or medical examiner assigned to that case to notify the Mortuary Supervisor or his/her designee that x-rays are indicated and the type. A specimen for DNA comparison needs

to be obtained by the MLI and/or medical examiner. These requests are indicated in FACTS.

Fingerprints will be sent to MPD Latent Print division, under chain of custody, for comparison studies. When the information is returned and there is a positive identification of the decedent made, the MLI will then enter that information in the FACTS Identification Screen.

When fingerprints are not an option, the MLI will investigate the availability of dental or other radiographs on a case by case basis, for ante-mortem and post-mortem comparison. The comparison study of dental radiographs is done by an appointed dentist. Other radiographic comparison, in most cases, is done by a DC OCME Medical Examiner who examines both the ante-mortem and post-mortem films. The study is documented and if a positive identification results, the MLI will enter this information in FACTS.

At this time, DNA comparison is not fully available. However, it is imperative that post-mortem specimens for DNA comparison be obtained. Should the decedent have a tentative identity, the MLI assigned to the case should investigate the availability of ante-mortem specimens and their availability. These ante-mortem specimens should be obtained, labeled and appropriately stored in the freezer for intended future use. When identification of the decedent is accomplished by DNA comparison and the documentation is received by DC OCME, it is the responsibility of the assigned MLI to enter this data in the FACTS Identification Screen.

IV. UNIDENTIFIED PERSONS

Definition: Unidentified persons include those that are not visibly identifiable, decomposed, beyond recognition or otherwise unknown. Information should be collected about unique identifiers in order that the unclaimed earthly remains may be properly cremated without compromising the potential for future identification. Collection of information concerning unidentified remains should begin as soon as possible upon receipt of the decedent or remains.

A full examination of the individual should be made and if descriptors are not obvious via external exam, the findings should be denoted as undetermined. The information collected must be entered into FACTS and should include:

- a. sex and appropriate age range
- b. race and complexion
- c. height and weight
- d. hair length (measured), color and style
- e. facial hair: color and length (measured)
- f. eye color
- g. any distinguishing characteristics: scars, moles, tattoos, birthmarks, brands, piercings, etc.

- h. diagram location
- i. medical intervention: prosthetics, amputations, pacemakers, pins, plates, dentures, etc.
- j. note any serial numbers or manufacturer's markings
- k. diagram location
- l. congenital anomalies: hare lip, missing or extra digits, etc.
- m. diagram location
- n. corrective eyeglasses or contacts
- o. retain for ophthalmologist consult
- p. note any serial numbers or manufacturer's markings
- q. needle (track) marks
- r. diagram location
- s. clothing and shoes
- t. note sizes, colors, materials, brand names, patches, alterations, etc.
- u. property and valuables, including jewelry
- v. note location.

ⁱ **Acceptable forms of Government Identification**

- Approved by DC OCME General Counsel
- Approved by DC OCME Supervisor
- Certificate of Citizenship (Form N-560 or N-561)
- Certificate of Naturalization (Form N-550, N-570 or N-578)
- Certification of Report of Birth Abroad of Citizen of US (Form DS-1350)
- Consular Report of Birth Abroad of a Citizen of US (Form FS-240)
- Driver's License
- Foreign Passport
- Medicare/Medicaid Card
- Military Dependent Identification Card
- Military Identification
- Photo Identification Card
- Un-Expired Employment Authorization Card (Form I-688A, I-688B or I-766)
- Un-Expired Refugee Travel Document (I-571)
- Un-Expired Resident Alien Card, Permanent Resident Card, Northern Marianas Card (Form I-551)
- Un-Expired Refugee Travel Document (I-571)
- Un-Expired Temporary Resident Card (Form I-688)
- US Citizen Identification Card (!-197)
- US Military Discharge Papers (Form DD214)
- US Passport
- US Selective Service Identification Card
- Welfare or Social Service ID Card with ID

ⁱⁱ Should the individual not be able to make a positive identification of the decedent, the Communications/Intake staff should excuse themselves from the room, go to the FACTS and access the "Unable to make Identification" screen of the system. This should be printed and taken to the individual to sign thereby confirming they were not able to make the identification of the decedent.