Policy: The Office of the Chief Medical Examiner (OCME) attempts to positively identify all decedents whose deaths are under the jurisdiction of the Medical Examiner.

Purpose: To define and set forth the criteria for acceptable methods of decedent identification.

Scope: The following procedure is to detail the steps required to accomplish and document the decedent identification process.

Definitions: CMS – Case Management System

DFS Central Evidence Unit (CEU) – Unit that receives postmortem and antemortem DNA samples for testing.

Identification – the legal name of a decedent. In regards to a fetal demise, the association between a fetus and the biological mother.

Family member – an individual that is legally or biologically related to the decedent.

Friend – an individual who is acquainted with a decedent through a social or professional relationship and can recognize the decedent visually. In regards to a fetal demise, an individual who witnessed the delivery of the fetus.

Family Reference Sample (FRS) – a DNA sample collected from the decedent’s closest available biological relative.

MPD – Metropolitan Police Department

1. Tentative Identification
   1.1. All decedents under OCME jurisdiction are considered tentatively identified until the identification is confirmed by one of the following methods.
      1.1.1. Visual Identification
      1.1.2. External Identification
      1.1.3. Fingerprints
1.1.4. Radiograph Comparison
1.1.5. Circumstantial Identification
1.1.6. DNA Comparison
1.2. Tentative names may be obtained from identification cards found on the person, names provided by individuals at the scene or hospital, law enforcement, and documents found at the scene.
1.3. Tentative names are listed in parentheses. The parentheses are removed from the name after the identification is confirmed.
   1.3.1. Individuals received without a tentative name are listed as last name Unidentified, first name Unidentified. The name is not listed in parentheses.
   1.3.2. Demographics such as sex, race and age estimate may be listed as the middle name.
2. Visual Identification
2.1. Visual identification may occur at the scene or at OCME. In order for a visual identification to occur the decedent must be viewable, i.e, not advanced decomposition or extensive disfiguring facial trauma.
   2.1.1. At the scene, the Investigator decides if the decedent is viewable and confirms that the family member or friend saw the decedent.
      2.1.1.1. The family member or friend completes and signs the Decedent Survivor form.
      2.1.1.2. The Investigator photographs the individual’s governmental issued photo identification.
   2.1.2. The Investigator prints the photograph; writes the OCME case number, date of the identification, and relationship of individual to the decedent on the printed photograph page; and, forwards it to Records Management.
   2.1.3. The Investigator prints and completes the Decedent Identification form from CMS.
   2.1.4. The Investigation updates the decedent’s name within CMS, removes () and ensures the spelling of the name matches the name written by the family member or friend on the Decedent Survival Form.
      2.1.4.1. Confirms the decedent’s date of birth, address, social security number is correct.
      2.1.4.2. When the social security number is unavailable, 999-99-9999 is entered.
2.2. Visual Identification at OCME – by photograph only; there is no viewing of decedents at the OCME.
   2.2.1. Preparing the photograph
2.2.1.1. The photography staff generates a photograph (ID Photo) for the purpose of showing the family member or friend. The decedent is draped so that only his/her face and the case number are shown in the ID photo.

2.2.1.2. When the decedent is in an early state of decomposition or has facial trauma, a black and white photograph or profile photograph may be taken and a medical examiner will decide if it is appropriate for viewing.

2.2.1.3. The ID Photo is placed in the Documentation Room for the ID Unit staff.

2.2.1.4. The ID Unit staff retrieves the photograph and places it within in the case chart.

2.2.1.5. The ID Unit staff calls the family member or friend to schedule a visual identification. The staff member informs the family member or friend that they must have government issued photo identification (ID) to enter the OCME.

2.2.1.5.1. The ID Unit staff informs the family member or friend that the visual identification will occur by the viewing of a photo and the actual physical body will not be viewed.

2.2.1.5.2. The phone call is documented in the Comment section of the Identification page within CMS. The staff’s initials, date and time of the call and outcome of the call are documented in the comment.

2.2.2. When the family member or friend arrives, the ID Unit staff receives the ID from the individual viewing the ID Photo (Viewer) and completing the identification paperwork.

2.2.3. ID Unit staff copies the ID and returns it to the Viewer.

2.2.4. ID Unit staff documents on the copy of the ID the following:
   2.2.4.1. the case number;
   2.2.4.2. date and time the Viewer arrived;
   2.2.4.3. relationship of the Viewer to the decedent; and
   2.2.4.4. the staff member’s initials.

2.2.5. ID Unit staff prepares the Decedent Survivor Form.
2.2.6. ID Unit staff forwards the prepared Decedent Survivor Form to the Recover staff. 
   (In absence of Recover staff, ID Unit Staff completes the following steps.) 
   
2.2.6.1. The Recover staff meets with the family member or friend and explains 
   the identification process. 
2.2.6.2. The family member or friend completes the Decedent Survivor Form. 
2.2.6.3. Recover staff passes the completed form back to the ID Unit staff. 
2.2.6.4. The ID Unit staff completes the form by signing the Witness line. 
2.2.6.5. Using the information written on the Decedent Survivor Form by the 
   Viewer, the ID Unit staff completes the Identification page within CMS: 
   updates the decedent’s name; removes (); and ensures the decedent’s 
   name, date of birth, address and social security number matches the 
   information written by the family member or friend on the Decedent 
   Survival Form. 
   
2.2.6.5.1. If the social security number is unavailable, 999-99-9999 is entered 
   as the social security number in CMS. 
2.2.7. The ID Unit staff enters all the provided survivor contact information into the 
   Decedent Survivor Page within CMS. Staff enters the information into the “List 
   of Decedent Survivors” section of the page and not the “Primary Decedent 
   Survivor” or “Initial Contact Person Information”. Only Investigations enters 
   information into the “Primary Decedent Survivor” or “Initial Contact Person 
   Information”. 
2.2.8. The ID Unit staff saves the information within CMS and prints the Identification 
   Form. 
2.2.9. The ID Unit staff presents the ID Photo face down to the Viewer. 
2.2.10. After viewing the ID Photo, the Viewer prints the decedent’s name and signs the 
   back of the ID Photo and completes the Identification form. 
2.2.11. The ID Unit staff finalizes the Identification form by signing the Witness line and 
   documenting the date and time of the identification. 
2.2.12. The ID Unit staff verifies that the decedent’s name written on the Decedent 
   Survivor, Identification form and back of the photograph are consistent. If there 
   are inconsistencies, the ID Unit staff clarifies the spelling of the decedent’s name 
   with the family member or friend. 
2.2.13. The ID Unit staff places all completed forms in the case chart. 
2.3. Additional Viewing of the ID Photo
2.3.1. Once the identification of the decedent is confirmed, the ID Photo is not shown to additional family members or friends of the decedent. One exception is when the legal NOK did not visually identify the decedent and requests to perform a visual identification prior to release of the decedent.

3. External Identification

3.1. External Identification occurs when the body is EITHER unavailable for visual identification or scientific identification methods OR visual identification has occurred outside the presence of OCME staff and is deemed adequate to meet OCME identification standard.

3.2. An External Identification is completed under the following circumstances.

3.2.1. The case is a cremation request that is converted to a medical examiner case and identification has occurred prior to the decedent being transported to OCME and the Authorization to Cremate is received.

3.2.2. The decedent died (or fetal demise occurs) in the hospital and the following criteria are met:

3.2.2.1. a family member or friend is bedside during the terminal hospitalization; and,

3.2.2.2. the decedent does not have significant facial trauma (i.e. blunt force trauma, thermal injuries, firearm injury, sharp force); and,

3.2.2.3. the terminal event resulted in only one victim or the terminal event resulted in two victims and the victims are physically different (i.e., male and female, adult and child, etc.).

3.2.3. External Identification cannot be done when any of the above criteria are not met.

3.2.4. Any questions as to the suitability of a decedent to meet the External Identification criteria should be directed to the Identification Unit Supervisor in consultation with the Doctor on Call or the Deputy Chief Medical Examiner.

3.3. When a hospital death occurs and meets the criteria of 3.2.2 an Investigator completes the following steps:

3.3.1. verbally confirms a family member or friend was bedside during the terminal hospitalization;

3.3.2. verbally confirms the proper spelling of the decedent’s name and correct birth date with the family member or friend;

3.3.3. completes the Identification page in CMS; and,

3.3.4. prints, completes, dates and signs the Identification form from the Identification page.
4. Fingerprint
4.1. The Mortuary Unit staff obtains fingerprints from all decedents, except when the condition of the decedent precludes capturing the fingerprints.
   4.1.1. Fingerprints are captured using fingerprint ink onto a fingerprint card.
   4.1.2. The Mortuary Unit initiates the transfer of custody form and provides the fingerprint cards to the ID Unit.
   4.1.3. The ID Unit retrieves the fingerprint card from the Documentation Room and place them in the case chart. The Transfer of Custody form is completed by the ID Unit staff at the time fingerprints are retrieved.
4.2. Upon request, desiccated fingers are rehydrated and printed.
4.3. When a decedent has not been identified by visual or external identification, the ID Unit staff submits fingerprints to the FBI.
   4.3.1. Complete the FBI submission form;
   4.3.2. Scan the fingerprint card at 600 DPI in PDF format;
   4.3.3. Email the submission form and fingerprint file to spc@fbi.gov.
4.4. When the FBI results are negative, the prints are submitted to the Department of Homeland Security:
   4.4.1. Complete the DHS submission form;
   4.4.2. Scan the fingerprint card at 600 DPI in JPEG format;
   4.4.3. Email the submission form and fingerprints to afis@dhs.gov.
4.5. When OCME staff believes the decedent has an arrest record with MPD, but the FBI search resulted in a negative hit, a hard copy of the prints is released to MPD.
   4.5.1. Investigations or ID Unit emails a request to the Mortuary Unit for a second set of fingerprints.
   4.5.2. The mortuary unit initiates the transfer of custody form and provides the second set of prints to the Investigations or ID Unit.
   4.5.3. Investigations or ID Unit notifies MPD that a set of prints is ready for pick up.
   4.5.4. Investigations or ID Unit transfers the prints to MPD and MPD completes a Transfer of Custody form. The completed form is placed in the release case chart.
4.6. The ID Unit Staff documents when the fingerprints are submitted and to which agency as well as the fingerprints results in the Identification page of CMS.
4.7. The ID Unit Staff notifies the family when the decedent is identified via fingerprint comparison. The date and time the family is notified and who is notified is documented in the Identification page within CMS.
5.0 Radiograph Comparison

5.1 When fingerprint searchers are negative and the decedent cannot be visually identified, the ID Unit staff searches for antemortem radiographs, skeletal and dental, by speaking with the family member or friend and searching local hospitals.

5.1.1 The OCME FedEx account number may be provided to out of District facilities so that radiographs can be shipped to the office.

5.2. When radiographs are available, the ID Unit staff requests that the images be burned to a CD, submits a Request for Records to the hospital, initiates the Transfer of Custody form and notifies the METT staff via Everbridge for radiograph pick up.

5.3. The METT team retrieves the CD and delivers it to the ID Unit staff.

5.4. The Anthropologist reviews the radiographs for appropriateness and requests additional postmortem radiographs from the Mortuary Unit staff via email, if needed.

5.5. The Mortuary staff takes the requested postmortem radiographs and uploads them to the PACS system. He/she sends an e-mail to the Anthropologist, CC’ing the Mortuary Supervisor, stating that the postmortem radiographs are available.

5.6. The Anthropologist makes the radiograph comparison and writes a Supplemental Note summarizing the findings.

5.6.1. If positive, the Anthropologist updates the Identification page within CMS, notifies family, and submits the chart to the ID Unit for death certificate preparation.

5.6.2. If negative, the Anthropologist returns the chart to the ID Unit and makes a comment in the Identification page of CMS.

5.7. If the radiograph comparison is a dental comparison and an Odontologist is needed, the Anthropologist contacts the Odontologist to schedule a dental identification. The Odontologist submits the results of the comparison to the Anthropologist.

5.7.1. If positive, the Anthropologist updates the Identification page within CMS, notifies family, and submits the chart to the ID Unit for death certificate preparation.

5.7.2. If negative, the Anthropologist returns the chart to the ID Unit and makes a comment in the Identification page of CMS.
6. Circumstantial Identification
   6.2. When a decedent cannot be positively identified via visual identification, external identification, fingerprint comparison, or radiograph comparison, a circumstantial identification is considered.
      6.2.1. The ID Unit Supervisor compiles the biological profile of the decedent, biological profile of the individual believed to be the decedent and the circumstances surrounding the death (e.g., date individual last seen alive, state of decomposition, location decedent discovered).
      6.2.2. The ID Unit Supervisor presents the circumstantial evidence to the medical examiner for consideration.
      6.2.2.1. If the identification is confirmed via circumstantial evidence, the ID Unit Supervisor documents all factors considered in the identification in a Supplemental Note and updates the Identification page in CMS.
      6.2.2.1.1. The Supplemental Note is forwarded to the ID Unit for death certificated preparation.
      6.2.2.2. If the identification is not confirmed via circumstantial evidence, either DNA comparison is pursued or the decedent is classified as unidentified and SOP IDU1.006 is followed.

7. DNA Comparison
   7.2. Identification via DNA comparison is pursued when other means of identification are unsuccessful and the ID Unit Supervisor and/or the Medical Examiner feels the decedent is not a candidate for circumstantial identification.
   7.3. Antemortem DNA collections - A Family Reference Sample (FRS) is collected for identification purposes.
      7.3.1. The FRS source is contacted to schedule an appointment to submit DNA. The source is asked to bring a government issued photo identification.
      7.3.2. The ID Unit staff initiates the sample collection by copying the family member’s ID and having him/her complete the Decedent Survivor Form.
      7.3.3. The FRS completes the DNA Evidence Collection Consent Form.
      7.3.3.1. A sampling kit (four sterile swabs and a swab box) is used to collect the buccal swabs.
      7.3.3.2. The FRS rubs each swab along the inside cheek of his/her mouth.
      7.3.3.3. The swabs are placed in the swab box. The swab box is labeled with the case number and sealed in an envelope labeled with a case number.

7.4. Postmortem DNA sample –
7.4.1. The postmortem DNA sample is retrieved.
   7.4.1.1. An FTA is retrieved from storage. The Transfer of Custody label is completed and the front and back of the FTA package is photocopied. The photocopy is forwarded to Records Management.
   7.4.1.2. The release of the FTA card is noted in the FTA logbook (I:\FTA Cards).
   7.4.1.3. Non-FTA samples are retrieved from Mortuary and the Release of Evidence form is generated via CMS and completed by the individuals releasing and receiving the sample. The completed form is forwarded to Records Management.

7.5. Submission of the DNA specimens – the FRS and DNA specimen are submitted to the Department of Forensic Sciences (DFS) Central Evidence Unit (CEU).
   7.5.1. The DFS Evidence Submission Form is completed and submitted with the specimen. A copy of the DFS Evidence Submission Form and chain of custody form initiated by CEU is received and forwarded to Records Management.
   7.5.2. When DNA results are received, the Anthropologist:
      7.5.2.1. Reviews the results using the following Kinship Index categories
         7.5.2.1.1. ~1 – Uninformative
         7.5.2.1.2. 10-20 – Useful support
         7.5.2.1.3. 40-50 – Strong supportive evidence
         7.5.2.1.4. 1000 – Very powerful evidence
      7.5.2.2. For a Kinship Index of ≥1000, updates the Identification page within CMS and notifies the family of the identification.
      7.5.2.3. For Kinship Index ≤999, notifies the case medical examiner to review the case and determine the identification status of the decedent.