

# 2023 CENSUS OF MEDICAL EXAMINER AND CORONER OFFICES

U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics



Acting as collection agent: RTI International

**Please use this form to provide information on behalf of the following agency:**

*[FILL AGENCY NAME HERE]*

**If the agency name printed above or jurisdiction(s) included are incorrect, please call us at 1-866-509-7470.**

### Survey Instructions:

- Submit this form using one of the following three methods:
  - **Online:** <https://www.bjscmec.rti.org>
    - Agency ID:
    - Password:
  - **E-mail:** [CMEC@rti.org](mailto:CMEC@rti.org)
  - **Mail:** Use the enclosed postage-paid envelope
- Please do not leave any items blank. If you do not understand a question, please email or call for clarification.
- If the answer to a question is none or zero, write "0" in the space provided. When exact numeric answers are not available, please provide estimates and mark the estimate check box where appropriate.
- Use blue or black ink and print as neatly as possible.
- Use an X when marking an answer in a box.

### Please indicate the primary person who completed this form:

Name:     
*Last Name First Name MI*

Title:

Phone:     —       
*Area Code Number Extension*

E-mail:

Agency   
 Website:

**If you have any questions, call RTI toll-free at 1-866-509-7470, or send an e-mail to [CMEC@rti.org](mailto:CMEC@rti.org). If you have general project-related questions, please contact Matt Durose of BJS at (202) 598-0295 or [Matt.Durose@usdoj.gov](mailto:Matt.Durose@usdoj.gov).**

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This survey is intended to collect information about your office's death investigation functions. If your office is embedded within another department or type of office (e.g., law enforcement agency, mortuary), please only report details about the resources and practices related to death investigation functions.

## ADMINISTRATION

**A1. What is the title of the head position in your office (e.g., Chief Medical Examiner, Coroner) and who holds that title?**

Title:

Name:

*Last Name*

*First Name*

**A2. Is your head of office required to be a Forensic Pathologist or other type of physician?**

- Yes – the head of office is required to be a Forensic Pathologist
- Yes – the head of office is required to be a physician, but not a Forensic Pathologist
- No

**A3. Which of the following best describes your death investigation office?**

- Coroner office
- Medical examiner office
- Law enforcement coroner office (e.g., Sheriff-coroner)
- District attorney or prosecutor office
- Justice of the peace
- My office does not investigate deaths → **SKIP to the end of the survey and return in the enclosed envelope**
- Other medicolegal death investigation office (please specify) ▾

**A4. What level of government best describes your office?**

- City office
- County office
- District/regional office
- State office

**A5. Does your office have authority over multiple jurisdictions? For example, your office is the medical examiner or coroner for multiple counties or districts.**

- Yes
- No

**A6. What geographic jurisdictions does your office have authority over (e.g., Wake County or State of Ohio, or Judicial District 8)? If you have authority over multiple jurisdictions, enter a comma (,) between each jurisdiction.**

First we will collect additional information about the head position in your office that you reported in A1.

**A7. Is your head of office's position full-time or part-time?**

- Full-time (30 hours or more per week)
- Part-time (Less than 30 hours per week)

**A8. Is the head of your office elected?**

- Yes
- No

**A9. Does your head of office perform any of the following death investigation functions in addition to their primary administrative duties? *Select all that apply.***

- Autopsies
- Scene investigations
- Other investigative casework (e.g., perform body examinations or inspections, conduct and document interviews)
- The head of office is an administrative position only and does not perform direct death investigation or autopsy duties

**A10. What was the annual salary (or annual salary equivalent if paid hourly or by stipend) for your head of office as of December 31, 2023?**

Annual Salary or  
Equivalent

\$    ,

The next section collects information about the following types of staff who could support death investigation functions at your office.

- Forensic Pathologists or Autopsy Pathologist
- Death Investigators
- Other scientific support staff (e.g., Forensic Toxicologists, Forensic Analysts)
- Ancillary staff (e.g., drivers, photographers, evidence technicians)
- Administrative staff (e.g., administrative managers/directors, administrative assistants, record clerks, secretaries)

Each employee should be reported only once in this section. If an employee fills more than one role, please include them in their primary role.

For questions in this section, please consider the following definitions:

- **Full time employees:** Staff directly employed by your office who have regularly scheduled hours and work on average 30 hours or more per week on death investigation functions.
- **Part-time employees:** Staff directly employed by your office who have regularly scheduled hours and work on average fewer than 30 hours per week on death investigation functions.
- **Contractors/Fee-for-service:** Those who are hired to do work for your office as a contractor and are not directly employed by your office (e.g., receives a 1099).
- **On-Call employees:** Staff directly employed by your office who do not have regularly scheduled hours and only work on an as needed basis.
- **Vacancies:** Positions for which your office has funds to staff but remain unfilled or open.

Many medical examiner and coroner offices do not directly employ Forensic or Autopsy Pathologists, and rely on contracted entities, the state Medical Examiner, or other medical examiner/coroner office for their autopsy services.

**A11. How are autopsy services handled by your office? Select all that apply.**

- Autopsies sent to the State Medical Examiner or another public Medical Examiner/Coroner office
- Private company, independent contractor (e.g. locum tenens), university, hospital, or other contract entity perform autopsies
- Forensic or Autopsy Pathologists directly employed by our office perform autopsies

**SKIP to A17 on page 5** if your office only contracts autopsy services or sends to another MEC office.

Next, we will collect information about Forensic Pathologists or Autopsy Pathologists that were directly employed by your office during the pay period that included December 31, 2023.

**A12. How many Forensic/Autopsy Pathologists did your office directly employ in the following categories during the pay period that included December 31, 2023? Include full-time, part-time, and on-call employees. Do not include contractors. Include Chief Medical Examiners that are Autopsy/Forensic Pathologists. Enter 0 if your office does not have staff in given category.**

My office did not directly employ Forensic/Autopsy Pathologists → **SKIP to A17 on page 5**

Full-time employees:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Part-time employees:	<input type="text"/>	<input type="text"/>	<input type="text"/>
On-call employees:	<input type="text"/>	<input type="text"/>	<input type="text"/>

**A13. How many full-time and part-time Forensic/Autopsy Pathologists directly employed by your office in the pay period that included December 31, 2023 were certified in forensic pathology by the American Board of Pathology (ABP)? Do not include contractors. If none, enter 0.**

Number of <u>full-time</u> autopsy pathologists certified by ABP in forensic pathology:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number of <u>part-time</u> autopsy pathologists certified by ABP in forensic pathology:	<input type="text"/>	<input type="text"/>	<input type="text"/>

**A14. How were Forensic/Autopsy Pathologists directly employed by your office paid in 2023? Do not include contractors. Do not include Chief Medical Examiners/head of office salaries reported in A10. Select all that apply.**

- Hourly
  - Salary
  - Stipend
- Continue to A15 on page 5**
- Fee-for-service (paid by case, call, day, or other fee structure) → **SKIP to A16 on page 5** if staff are paid only on a fee-for-service basis

**A15. What is the annual starting salary range (or starting salary range equivalent if paid hourly or by stipend) for full-time and part-time Autopsy Pathologists directly employed by your office as of December 31, 2023? Do not include Chief Medical Examiner salaries previously reported in A10.**

	Annual Starting Salary Minimum	Annual Starting Salary Maximum	N/A
a. Starting annual <u>full-time</u> salary (or salary equivalent if paid hourly or by stipend)	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>
b. Starting annual salary <u>part-time</u> (or salary equivalent if paid hourly or by stipend)	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>

**A16. Did your office employ any certified Pathologists' Assistants to perform autopsies, separate from assisting in an Autopsy Technician role, during the pay period that included December 31, 2023?**

- Yes
- No

The following questions collect information about Death Investigators that worked for your office during the pay period that included December 31, 2023.

**A17. How many Death Investigators did your office employ or contract in the following categories during the pay period that included December 31, 2023? Include full-time, part-time, on-call employees and contract Death Investigators that work directly for your office. Include head of office positions (e.g., Coroners) that are also Death Investigators. Enter 0 if your office does not have staff in given category.**

My office did not employ death investigators  
→ **SKIP to A21 on page 6**

Full-time employees:	<input type="text"/> <input type="text"/> <input type="text"/>
Part-time employees:	<input type="text"/> <input type="text"/> <input type="text"/>
Contractors/Fee-for-service:	<input type="text"/> <input type="text"/> <input type="text"/>
On-call employees:	<input type="text"/> <input type="text"/> <input type="text"/>

**A18. How many full-time and part-time Death Investigators that worked for your office during the pay period that included December 31, 2023 were certified by the American Board of Medicolegal Death Investigators (ABMDI)?**

Number of <u>full-time</u> Death Investigators certified by ABMDI:	<input type="text"/> <input type="text"/> <input type="text"/>
Number of <u>part-time</u> Death Investigators certified by ABMDI:	<input type="text"/> <input type="text"/> <input type="text"/>
Number of <u>contract/fee-for-service</u> Death Investigators certified by ABMDI:	<input type="text"/> <input type="text"/> <input type="text"/>

**A19. How were Death Investigators at your office paid in 2023? Do not include head of office salaries reported in A10. Select all that apply.**

- Hourly
  - Salary
  - Stipend
  - Fee-for-service (paid by case, call, day, or other fee structure) → **SKIP to A21 on page 6** if paid only on a fee-for-service basis
- } **Continue to A20 on page 6**

**A20. What is the annual starting salary range (or starting salary range equivalent if paid hourly or by stipend) for full-time and part-time Death Investigators employed by your office as of December 31, 2023? Do not include head of office salaries reported in A10.**

	Annual Starting Salary Minimum	Annual Starting Salary Maximum	N/A
a. Starting annual <u>full-time</u> salary (or salary equivalent if paid hourly or by stipend)	\$ [ ] [ ] [ ] , [ ] [ ] [ ]	\$ [ ] [ ] [ ] , [ ] [ ] [ ]	<input type="checkbox"/>
b. Starting annual salary <u>part-time</u> (or salary equivalent if paid hourly or by stipend)	\$ [ ] [ ] [ ] , [ ] [ ] [ ]	\$ [ ] [ ] [ ] , [ ] [ ] [ ]	<input type="checkbox"/>

**A21. Did your office have unpaid volunteer Death Investigators in 2023?**

Yes

No

**These next questions ask about scientific support staff (e.g., Forensic Toxicologists, Anthropologists, Autopsy Technicians, or non-autopsy physicians) and ancillary staff (e.g., drivers, photographers, evidence technicians, family support workers) that were employed by your office during the pay period that included December 31, 2023.**

**A22. How many scientific support or ancillary staff with roles specific to death investigation functions did your office directly employ in the following categories during the pay period that included December 31, 2023? Do not include contractors or contract entities. Enter 0 if your office does not have staff in a given category.**

My office did not employ scientific support or ancillary staff → **SKIP to A23**

Full-time employees: [ ] [ ] [ ]

Part-time employees: [ ] [ ] [ ]

On-call employees: [ ] [ ] [ ]

**These next questions ask about administrative staff (e.g., administrative managers/directors, administrative assistants, records clerks, secretaries, and IT staff) that were employed by your office during the pay period that included December 31, 2023.**

**A23. How many Administrative Staff did your office directly employ in the following categories during the pay period that included December 31, 2023? Do not include contractors or contract entities. Enter 0 if your office does not have staff in a given category.**

My office did not employ administrative staff → **SKIP to A24**

Full-time employees: [ ] [ ] [ ]

Part-time employees: [ ] [ ] [ ]

On-call employees: [ ] [ ] [ ]

**A24. How many vacant or unfilled positions did your office have for each of the following roles during the pay period that included December 31, 2023? If none, enter 0.**

Forensic or Autopsy Pathologists: [ ] [ ] [ ]

Death Investigators: [ ] [ ] [ ]

## EXPENDITURES AND FUNDS

**B1. On what month and day does your office's fiscal year begin (e.g., 01/01, 07/01, 10/01)?**

/    
 M M / D D

**B2. How much did your office spend on death investigation functions in the most recently completed fiscal year?**

- If your office is part of a larger organization (e.g., sheriff-coroner, funeral home), only include expenses related to death investigation functions. If your office only functions as an MDI office, include your total expenses.
- Include expenses paid by your office, such as, for autopsies, personnel, supplies and equipment, training, transportation, toxicology/ancillary testing, indigent burial, and body storage expenses related to MEC functions.

\$   ,    ,    .00
 Check if estimate:

**B3. Which of the following functions of your office are included in the total expenditures reported in B2? Select one for each row.**

Expense	All	Some	None
a. Autopsies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Personnel	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Supplies and equipment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Toxicology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Indigent Burial	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Body storage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**B4. Which of the following provides budgetary oversight of your office?**

- Public health agency (e.g., department or division of public health)
- Law enforcement agency (e.g., department or division of public safety)
- Government attorney's office (e.g., district attorney, attorney general)
- Department or division of forensic science
- Court system
- Other government funding body (e.g., county or state commission)
- Other (please specify) ▾

**B5. In your most recently completed fiscal year, did staff in your office use their own personal resources, or spend personal, out-of-pocket money for which there was no reimbursement, on any of the following? Select one for each row.**

Expense	Yes	No	Don't Know
a. Personal protective equipment (PPE)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Continuing education or certifications	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Other official work supplies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

# WORKLOAD

**This section has questions about three levels of involvement in death investigations.**

*Depending on how your office categorizes cases/investigations, numbers reported in a given category may be the same as the number reported in a prior category.*

- a) Total number of deaths your office was notified of in 2023:** The total number of deaths your office was notified of, including all cases reported to your office even if jurisdiction was declined.
- b) Number of deaths for which your office performed death investigation functions:** The number of deaths for which your office performed death investigation functions beyond documenting the initial notification of the death outlined above. For example, the number of cases for which your office performed death investigation functions like responding to a scene, identifying a decedent, conducting supplemental interviews, notifying family, or ordering autopsies.
- c) Number of deaths where your office determined cause and manner:** The number of deaths where your office determined cause and manner. Do not include cases where another agency (e.g., State Medical Examiner) assumed jurisdiction to complete the death certificate.

**C1. In 2023, was your office notified of any deaths?** *Include all cases that were reported to your office, even if jurisdiction was declined. Include cremation cases.*

- Yes
- No → **SKIP to C4 on page 9**

**C2. In 2023, what was the total number of deaths reported to your office for the following levels of involvement in death investigations?**

	Number of deaths	NA – My office did not have deaths in this category	My office had deaths in this category, but did not track
<b>a. Total number of deaths your office was notified of in 2023</b>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Check if estimate: <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>b. Number of deaths for which your office performed death investigation functions</b>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Check if estimate: <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>c. Number of deaths where your office determined cause and manner</b>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Check if estimate: <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**C3. In 2023, was your office notified of any deaths that occurred on tribal lands?** *The term 'tribal lands' includes areas labeled Indian country, federal or state recognized reservations, trust lands, Alaska Native villages, and tribal communities.*

- Yes
- No - Our office does not have tribal lands in our geographic jurisdiction
- No - Our office receives deaths from tribal lands, but none were reported in 2023



These next questions ask about autopsies your office ordered or performed in 2023.

**C4. Did your office conduct medicolegal autopsies at your facility or facilities (e.g., “in-house”) in 2023?** *Include referrals from other medicolegal death investigation authorities but exclude any private or clinical autopsies. Include both partial and complete autopsies.*

- Yes
- No → **SKIP to C6**

→ **C5. In 2023, how many medicolegal autopsies did your office conduct at your facility or facilities (e.g. “in-house”)?**

,     Number of medicolegal autopsies conducted at your facility or facilities  
 Check if estimate:

**C6. Did your office order any medicolegal autopsies to be conducted at a location other than your facilities in 2023?** *Include autopsies sent to State Medical Examiners, other Medical Examiner/Coroner offices, and private facilities or hospitals.*

- Yes
- No → **SKIP to C10**

→ **C7. In 2023, where were the autopsies ordered by your office performed?** *Select all that apply.*

- State Medical Examiner’s office
  - Other public MEC office
  - Private facility or hospital
- } *If your office does not use private facilities or hospitals to perform autopsies → **SKIP to C10***

↓ **C8. How many of these autopsies were performed for your office by private facilities/hospitals in 2023?**

,     Number of autopsies performed at private facilities/hospitals  
 Check if estimate:

**C9. How far from your office is the autopsy facility or contractor your office uses most frequently?**

- Less than 50 miles
- 50-100 miles
- Greater than 100 miles

**C10. In 2023, as part of practice or policy, did your office routinely perform or order autopsies for the following types of deaths when determining cause and manner of death and signing the death certificate?** *Do not include external examinations.*

Type of death	Yes	No
a. Drug related	<input type="radio"/>	<input type="radio"/>
b. Elderly	<input type="radio"/>	<input type="radio"/>
c. Homicides	<input type="radio"/>	<input type="radio"/>
d. Motor vehicle deaths	<input type="radio"/>	<input type="radio"/>
e. Suicide by firearm	<input type="radio"/>	<input type="radio"/>
f. Suicide by hanging	<input type="radio"/>	<input type="radio"/>

These next questions ask about your office's medicolegal death investigations (MDI).

**C11. In 2023, did your office (e.g. medicolegal death investigators) perform scene investigations?**

- Yes
- No → **SKIP to C13**

→ **C12. In 2023, how many scene investigations did your office (e.g. medicolegal death investigators) conduct?**

Number of scene investigations

Check if estimate:

**C13. For those functions that are conducted internally by your office, who is primarily responsible for performing the following duties? *Select one for each row.***

Duty	Forensic or Autopsy Pathologists	Death Investigators	Other Medical Examiner/ Coroner Staff	Not applicable - this function is not performed by my office
a. Determination of which deaths are accepted for further investigation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Death scene investigations with inspection/ examination of body	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Determination of which deaths are autopsied	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Determination of which deaths receive forensic toxicology testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**C14. At the death scene, external examination/inspection, or at autopsy, did your office routinely perform drug screening tests (e.g., urine screen or Randox®) in 2023?**

- Yes
- No → **SKIP to C16**

→ **C15. After performing drug screening tests, did your office routinely confirm positive results with toxicology testing in a laboratory in 2023?**

- Yes
- No

**C16. For your office, who of the following is primarily responsible for notifying next of kin about the individual's death?**

- Law enforcement personnel
- Medical examiner/coroner personnel
- Someone else (please specify): ↴

**C17. In 2023, did your office respond to a multiple fatality event with four or more decedents?**

- Yes
- No → **SKIP to D1**

**C18. Did your office need or use assistance from other Medical Examiner/Coroner offices/jurisdictions during any multiple fatality event in 2023?**

- Yes
- No

## SPECIALIZED INVESTIGATIONS

**For the following questions, unidentified remains refers to remains that are unidentified for 60 days or more. Include cases unresolved for 60 days or more even if subsequently identified. Include cases from all prior years.**

**D1. As of December 31, 2023, did your office have any records of remains that were unidentified for 60 days or more? Include cases regardless of disposition of the remains. Include cases unresolved for 60 days or more even if subsequently identified after December 31, 2023.**

- Yes
- No → **SKIP to D3**

**D2. How many cases of human remains did your office have on record that were unidentified for 60 days or more as of December 31, 2023? Include cases regardless of disposition of the remains.**

Don't know

 ,   

Total number of unidentified humans remains on record

Check if estimate:

**D3. How long does your office generally hold unidentified human remains before disposition?**

- Less than 1 month
- 1-6 months
- More than 6 months to a year
- Our office holds unidentified remains indefinitely

**D4. How does your office dispose of unidentified human remains? *Select all that apply.***

- Bury
- Cremate
- Donate body to a body donation program
- Donate body to other program(s) (e.g., museum)
- Our office holds unidentified remains indefinitely
- Other (please specify) ▾

**D5. What biometrics and samples do you routinely collect before disposition of unidentified human remains? *Select all that apply.***

- Dental records (charting)
- Dental Radiographs/X-rays
- Fingerprints
- Full body radiographs (X-ray, CT)
- Photos of identifying characteristics (e.g., tattoos, scars, etc.)
- Samples for DNA analysis (e.g., blood card/spot, bone)

**D6. For suspected overdose deaths in 2023, did your office do the following for all deaths, some deaths, or not at all? Exclude delayed overdose deaths (e.g., hospital inpatients). Select one for each row.**

Action	All deaths	Most deaths	Some deaths	None/My office does not do this
a. Go to scene of death if outside of hospital	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Order an autopsy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Draw toxicology specimens	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Run toxicology tests	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Consult with a toxicologist before determining cause and manner of death	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**D7. If you have a sudden unexpected infant death case, which of the following procedures would your office conduct, or request, if warranted, to determine cause and manner of death? Select one for each row.**

Procedure	Yes	No	Decision made elsewhere (e.g. state medical examiners' office)
a. Scene investigation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Doll re-enactment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Imaging, including x-ray, CT, or MRI	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Autopsy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Forensic toxicology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Microbiology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Histology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Genetic testing (e.g., sudden cardiac deaths)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**D8. Does your office use the Sudden Infant Death Syndrome, or SIDS, diagnosis when completing a death certificate?**

- Yes
- No
- Death certificate completed elsewhere (e.g., state medical examiners' office)

## RECORDS AND EVIDENCE RETENTION

**E1. Did your office have a computerized system to manage, compile, or track cases or evidence as of December 31, 2023?** *Such a system is also known as a computerized case or information management system. This does not include the use of Excel or other spreadsheet software to manage case information.*

- Yes → **SKIP to E3**  
 No

**E2. What is the primary reason your office does not have a computerized case or information management system?** *Select one.*

- Do not want computerized case or information management system  
 Funding  
 Privacy or security concerns  
 Too few cases/records  
 Other (please specify) →

**E3. For deaths reported to your office in 2023, how often was a narrative investigation report produced?** *An investigation report is distinct from any logs, death certificates, law enforcement or autopsy reports.*

- All deaths  
 Some deaths  
 No deaths  
 Did not have any deaths in 2023

**E4. Did your office have a written retention schedule for the following items in 2023?** *A retention schedule is a policy for how long records are retained. Select one for each row.*

	Yes	No	Not applicable - our office does not produce or use this
a. Case records	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Forensic toxicology specimens	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Biological specimens other than toxicology specimens	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Non-biological evidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**E5. Does your office currently archive hard copies of your official investigative records and reports?**

- Yes
- No → **SKIP to E7**

**E6. Does your office currently archive hard copies of your official investigative records and reports in any of the following places? Select one for each row.**

Location	Yes	No
a. Government-owned office	<input type="radio"/>	<input type="radio"/>
b. Government-run or government-controlled dedicated storage facility	<input type="radio"/>	<input type="radio"/>
c. A regulated third-party storage facility (e.g., Iron Mountain)	<input type="radio"/>	<input type="radio"/>
d. Personal storage (including both home and rental storage)	<input type="radio"/>	<input type="radio"/>
e. Other business or office (e.g., funeral home, hospital, law office)	<input type="radio"/>	<input type="radio"/>

**E7. How does your office dispose of unclaimed human remains? Select all that apply.**

- Bury
- Cremate
- Donate body to a body donation program
- Donate body to other program(s) (e.g., museum)
- Our office holds unclaimed remains indefinitely
- Other (please specify) ↴

**E8. For unclaimed remains, does your office work with Veterans Administration or other groups to determine if the decedent is a veteran?**

- Yes
- No

## RESOURCES

**F1. As of December 31, 2023, did your office have access to the Internet, separate from a personal device, to use for official job functions?**

- Yes
- No

**F2. As of December 31, 2023, did your office have a work vehicle dedicated to death investigation functions separate from personal vehicles?**

- Yes
- No

**F3. As of December 31, 2023, did your office, or the agency with administrative oversight of your office, own a body storage cooler that you used for death investigation functions?**

- Yes
- No → **SKIP to F5**

**F4. Is the official maximum capacity of all your office's body storage cooler(s), including disaster equipment, 20 or more?**

- Yes
- No

**F5. Did your office have access to the following resources, either directly or through another agency, as of December 31, 2023? Select one for each row.**

Resource	Yes, directly	Yes, through a partner agency	No access
a. Criminal history databases	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. EMS records	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Fingerprint databases	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Medical records databases	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Prescription drug monitoring programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**F6. In 2023, did any of the staff at your office participate in any of the following trainings? Select one for each row.**

Training or resource	Yes	No
a. Mass fatality investigation/disaster planning	<input type="radio"/>	<input type="radio"/>
b. Bloodborne pathogens	<input type="radio"/>	<input type="radio"/>

**F7. In 2023, did your office provide mental health/wellness support for staff? For example, counseling, therapy, or peer support.**

- Yes
- No

**F8. In 2023, did your office participate in the following multidisciplinary review teams? Select one for each row. Select no if an item is not offered in your jurisdiction.**

Specialty area	Yes	No	My office did not have cases of this type in 2023
a. Child fatality	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Elderly/vulnerable adult fatality	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Overdose fatality	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Maternal death	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Suicide	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**F9. In 2023, did your office directly provide the following support services or provide referrals for these services? Select one for each row.**

<b>Support service</b>	<b>Service directly provided</b>	<b>Referral to another entity or organization</b>	<b>No</b>
a. Advocates for families of victims	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Grief and bereavement services for survivors (e.g., counseling or therapy, homicide survivor groups)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. On-scene support or advocacy for bystanders or other family and friends of deceased	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**F10. As of December 31, 2023, did your office have a dedicated family support specialist or trained trauma counselor for family and friends of the deceased?**

- Yes
- No

**F11. Does your office have access to a computerized axial tomography (CAT or CT) scan, either directly or through a partner agency?**

- Yes, directly
- Yes, through a partner agency
- No

**Thank you for your participation in the 2023 Census of Medical Examiner and Coroner Offices (CMEC).  
Your feedback is very important to us!**

**Please return your survey in the enclosed envelope or send to:**

**Census of Medical Examiner and Coroner Offices  
RTI International  
ATTN: 0218708.000.005  
3040 E. Cornwallis Road, PO Box 12194  
Research Triangle Park, NC 27709-2194**