Survey Instructions:

• Submit this form using one of the following three methods:

o Online: https://www.bjscmec.rti.org

Agency ID:

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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.

		J			
○ E-n	nail: <u>CMEC@rt</u>	i.org			
o Ma	il: Use the enc	losed postage-paid envelop	e		
• Please	do not leave ar	ny items blank. If you do not	understand a question,	please email or call for clarification	ո.
If the ar	nswer to a que	stion is none or zero, write	"0" in the space provided	d. When exact numeric answers are	e not available,
please	provide estima	tes and mark the estimate of	check box where approp	riate.	
Use blu	e or black ink a	and print as neatly as possib	le.		
Use an	X when markir	ng an answer in a box.			
Please indi	icate the prin	nary person who comple	ted this form:		
Name:					
	Last Name		First Name		MI
Title:					
Phone:		<u> </u>			
	Area Code N	umber	Extension		
E-mail:					
Agency					
Website:					

Burden Statement

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

Federal agencies may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 90 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate, or any other aspects of this collection of information, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. The Omnibus Crime Control and Safe Streets Act of 1968, as amended (34 USC 10132), authorizes this information collection. Although this survey is voluntary, we urgently need your cooperation to make the results comprehensive, accurate, and timely. We greatly appreciate your assistance.

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 Porensic 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.

	we will collect additional information about the <u>head position</u> in your office that you rted 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)
A 8.	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 <u>does not</u> 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 <u>once</u> 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 <u>do not</u> 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 <u>directly employ</u> 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 <u>Forensic Pathologists</u> or <u>Autopsy Pathologists</u> that were <u>directly employed</u> by your office during the pay period that included December 31, 2023. A12. How many Forensic/Autopsy Pathologists did your office <u>directly employ</u> in the following categories during the pay period that included December 31, 2023? <u>Include</u> full-time, part-time, and on-call employees. <u>Do not</u> include contractors. <u>Include</u> 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: Part-time employees: On-call employees:	
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 full-time autopsy pathologists certified by ABP in forensic pathology: Number of part-time autopsy pathologists certified by ABP in forensic pathology: 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 Salary 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 basiso	

												alent if paid employed b	
		offi	ce as of Dorted in A1	ecember 31,	2023?	Do no	<u>t</u> inclu	ide Chief	Medica	al Exar	niner sa	alaries previo	usly
						Annı		arting Sa nimum	alary	Annu	al Star Maxir	ting Salary num	N/A
			salary (or if paid hou	nnual <u>full-tim</u> salary equiva ırly or by stip	alent end)	\$,		\$			
		b.	time (or sa	nnual salary alary equivale y or by stiper	ent if	\$				\$			
		sep incl	arate from uded Dece es	e employ an assisting in ember 31, 20	n an A	ified Pa utopsy	athol Tech	ogists' A nnician re	ssistar ole, dur	nts to ring th	perforn le pay l	n autopsies, period that	
The duri	follow	ing pav	questions	collect info	rmatic Decen	n abou	ut <u>De</u>	ath Inves	stigator	<u>'s</u> that	worke	d for your o	ffice
	How durin emplo positi in giv	mar oyee ons en o	ny Death In ne pay peries and cont (e.g., Coro category. fice did not	nvestigators iod that inclipant Death In iners) that are employ deat	did young did not be also for all all also for all all also for all all also for all all also for all also for all all also for all all also for all all all all also for all all all also for all all all all all all all all all al	our offi Decemb ators th Death I	ice er oer 3 nat wo nvest	mploy or 1, 2023? ork directl	<u>Include</u> y for yo	full-tin ur offic	ne, pari ce. <u>Inclu</u>	wing catego t-time, on-cal ude head of c loes not have	l office
			employees										
			employee										
	 		ors/Fee-for										
	On-c	all e	mployees:										
		the	pay period	I-time and p d that includ Death Invest	led De	cembe	r 31,	estigato 2023 wer	rs that re certif	worke fied by	d for y the A	our office do merican Boa	uring ard of
		Nui	mber of <u>full</u>	<u>-time</u> Death	Investi	gators o	certifie	ed by ABI	MDI:				
		Nui	mber of <u>pa</u>	<u>rt-time</u> Death	Invest	igators	certif	ied by AE	BMDI:				
			mber of <u>cor</u> tified by AE	ntract/fee-for BMDI:	-servic	<u>e</u> Death	n Inve	stigators					
		sala	Hourly Salary Stipend Fee-for-sel	ath Investigated in A10. Set Continue to rvice (paid by aid only on a	elect al A20 o case,	il that ap n page call, da	o <i>ply.</i> • 6 ay, or	other fee				e head of offi	ice
			9- • P	Jy J.11 U	00 .0	. 55, 110							

	A20.	. What is the annual starting salary range (or starting salary range equivalent if paid hourly or by stipend) for <u>full-time</u> and <u>part-time</u> Death Investigators employed by your office as of <u>December 31</u> , 2023? <u>Do not</u> 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) 	Ψ	\$, , , , , , , , , , , , , , , , , , ,				
		b. Starting annual salary <u>part-time</u> (or salary equivalent if paid hourly or by stipend)		\$, , , , , , , , , , , , , , , , , , ,				
A21	Did y		eer Death Investigators in 20	023?				
Antl pho	nropo tograp	ct questions ask about <u>scientif</u> logists, Autopsy Technicians, ohers, evidence technicians, fa e pay period that included Dec	or non-autopsy physicians) mily support workers) that v	and ancillary staff (e.g., dr	rivers, fice			
A22	func inclu does	many scientific support or antions did your office directly ended December 31, 2023? Do not have staff in a given category	mploy in the following categot include contractors or contractors or contractors.	ories during the pay perio	d that ffice			
		My office did not employ scientificancillary staff → SKIP to A23	c support or					
	Full	-time employees:						
	Par	t-time employees:						
	On-	call employees:						
adm	inistr	ct questions ask about <u>adminis</u> ative assistants, records clerks e pay period that included Dec	s, secretaries, and IT staff) t	ative managers/directors, hat were employed by you	r office			
A23	durii entiti	many Administrative Staff did ng the pay period that included es. Enter 0 if your office does no	l December 31, 2023? <u>Do no</u> t have staff in a given categor	t include contractors or conti	s ract			
		My office did not employ adminis staff → SKIP to A24	trative					
	Ful	l-time employees:						
	Par	t-time employees:						
	On	-call employees:						
A24	. How durii	many <u>vacant or unfilled</u> positing the pay period that included	ons did your office have for I December 31, 2023? If none	each of the following role e, enter 0.	s			
	Fore	nsic or Autopsy Pathologists:						
	Dea	th Investigators:						

EXPENDITURES AND FUNDS

B1.	On what month and day does your office's M M / D D	fiscal year begin	(e.g., 01/01,	07/01, 10/	01)?
B2.	How much did your office spend on death i completed fiscal year?	nvestigation func	tions in the	most rece	ently
	If your office is part of a larger organization expenses related to death investigation funinclude your total expenses.				
	 Include expenses paid by your office, such training, transportation, toxicology/ancillary related to MEC functions. 				
	\$	k if estimate:			
В3.	Which of the following functions of your of reported in B2? Select one for each row.	fice are included i	in the total e	expenditui	res
	Expense		All	Some	None
	a. Autopsies				
	b. Personnel				
	c. Supplies and equipment				
	d. Training				
	e. Transportation		0	0	0
	f. Toxicology		0		0
	g. Indigent Burial		0	0	0
	h. Body storage		0	0	0
B4.	Which of the following provides budgetary Public health agency (e.g., department or d Law enforcement agency (e.g., department Government attorney's office (e.g., district a	ivision of public hea or division of publi attorney, attorney g	alth) c safety) eneral)		
B5.	In your most recently completed fiscal year resources, or spend personal, out-of-pocke on any of the following? Select one for each	t money for whic			
	Expense	Yes	No	Do	n't Know
	a. Personal protective equipment (PPE)	0	0		0
	b. Continuing education or certifications	0	0		0
	c. Other official work supplies				

WORKLOAD

Th	is section	has o	uestions	about	three	levels	of invo	lvement	in (death	investigation	ns.
	II3 36611011	iias y	เนษอเเบเเอ	about	unce	161613	OI 11170	,ı v eiileiit	111 \	a c aui	IIIVESHUAHO	ııə.

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. <u>Do not</u> include cases where another agency (e.g., State Medical Examiner) assumed jurisdiction to complete the death certificate.

eve	2023, was your office notified of an n if jurisdiction was declined. Include Yes No → SKIP to C4 on page 9		cases that were rep	orted to your office,
►C2 .	In 2023, what was the total numb	per of deaths reported vestigations?	I to your office for	the following
		Number of deaths	NA – My office did not have deaths in this category	My office had deaths in this category, but did not track
	a. Total number of deaths your office was notified of in 2023	Check if estimate:		
	b. Number of deaths for which your office performed death investigation functions	Check if estimate:		
	c. Number of deaths where your office determined cause and manner	Check if estimate:		
C3.	In 2023, was your office notified 'tribal lands' includes areas labeled			

No - Our office receives deaths from tribal lands, but none were reported in 2023

No - Our office does not have tribal lands in our geographic jurisdiction

trust lands, Alaska Native villages, and tribal communities.

() Yes

Thes	e ne	xt questions ask about	autopsie	es your c	office ordered or performed in 2023.		
C4.	202 3 or cl	3? Include referrals from inical autopsies. Include in	other me	dicolegal	ies <u>at your facility or facilities</u> (e.g., "in-house") in death investigation authorities but exclude any private amplete autopsies.		
	Y						
		lo → SKIP to C6					
	•C5.	facilities (e.g. "in-hous	se")?	·	ies did your office conduct at your facility or autopsies conducted at your facility or facilities		
		Crieck ii estimate.					
C6.	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. ———————————————————————————————————						
	·C7.	In 2023 where were th	e autons	sies orde	ered by your office performed? Select all that apply.		
	٠,٠	•	-		our office does not use private facilities or hospitals		
		Other public MEC of	fice	\frac{n}{to p}	erform autopsies → SKIP to C10		
		── Private facility or hos	pital	, ,			
	\downarrow						
	C8.	How many of these au in 2023?	topsies	were per	formed for your office by private facilities/hospitals		
		Numbe	er of auto	psies per	formed at private facilitates/hospitals		
		Check if estimate:					
	C9.	How far from your offi frequently?	ce is the	autopsy	facility or contractor your office uses most		
		Less than 50 miles					
		○ 50-100 miles					
		○ Greater than 100 mil	es				
C10.	follo		hen dete	ermining	ur office <u>routinely</u> perform or order autopsies for the cause and manner of death and signing the death ons.		
	Тур	e of death	Yes	No			
	a.	Drug related	0	0			
	b.	Elderly	0	0			
	C.	Homicides	0	0			
	d.	Motor vehicle deaths	0	0			
	e.	Suicide by firearm	0	0			
		Suicide by hanging					

n n	ext allestions ask about	vour office's ma	dicologal death in	vestigations (MD	I)		
In 2	2023, did your office (e.g Yes				•		
·C12	investigators) conduc	t?	•	(e.g. medicolegal	death		
				ce, who is <u>primar</u>	rily responsible		
	_	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	0	0	0	0		
b.	Death scene investigations with inspection/ examination of body	0	0	0	0		
C.	Determination of which deaths are autopsied	0	0	0	0		
d.	Determination of which deaths receive forensic toxicology testing	\circ	0	0	0		
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							
·C1				outinely confirm p	oositive results		
ind	lividual's death? Law enforcement personr Medical examiner/corone	nel r personnel	arily responsible	for notifying next	of kin about the		
	For for d. At per C1!	In 2023, did your office (e.g. Yes No → SKIP to C13 C12. In 2023, how many so investigators) conduct Number of Check if estimate: For those functions that ar for performing the followin Duty a. Determination of which deaths are accepted for further investigation b. Death scene investigations with inspection/ examination of body c. Determination of which deaths are autopsied d. Determination of which deaths receive forensic toxicology testing At the death scene, externate perform drug screening testing At the death scene, externate perform drug screening testing At the death scene, externate perform drug screening testing No → SKIP to C16 C15. After performing drug with toxicology testing No For your office, who of the individual's death? Law enforcement persons Medical examiner/corone	In 2023, did your office (e.g. medicolegal de Yes No → SKIP to C13 C12. In 2023, how many scene investigation investigators) conduct? Number of scene investigation of scene investigation deaths are accepted for further investigation b. Death scene investigations with inspection/ examination of body c. Determination of which deaths are autopsied d. Determination of which deaths are autopsied d. Determination of which deaths receive forensic toxicology testing At the death scene, external examination/insperform drug screening tests (e.g., urine scene) Yes No → SKIP to C16 C15. After performing drug screening tests, with toxicology testing in a laboratory Yes No For your office, who of the following is prim	In 2023, did your office (e.g. medicolegal death investigators) — Yes No → SKIP to C13 C12. In 2023, how many scene investigations did your office (investigators) conduct? Number of scene investigations Check if estimate: For those functions that are conducted internally by your offifor performing the following duties? Select one for each row. Forensic or Autopsy Pathologists a. Determination of which deaths are accepted for further investigation b. Death scene investigation b. Death scene investigation of which deaths are autopsied d. Determination of which deaths are autopsied d. Determination of which deaths receive forensic toxicology testing At the death scene, external examination/inspection, or at autoperform drug screening tests (e.g., urine screen or Randox®) — Yes No → SKIP to C16 C15. After performing drug screening tests, did your office rowith toxicology testing in a laboratory in 2023? Yes No For your office, who of the following is primarily responsible individual's death? Law enforcement personnel Medical examiner/coroner personnel	C12. In 2023, how many scene investigations did your office (e.g. medicolegal investigators) conduct?		

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
or mo all pri D1.	he following questions, unidentified remains refers to remains that are unidentified for 60 days ore. Include cases unresolved for 60 days or more even if subsequently identified. Include cases from ior years. 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)
	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.	dea	r suspected overdose deaths in 2023 aths, or not at all? Exclude delayed of the 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	0						
	b.	Order an autopsy						\bigcirc	
	C.	Draw toxicology specimens	0 0				0		
	d.	Run toxicology tests	0		0		\circ		0
	e.	Consult with a toxicologist before determining cause and manner of death	0		0		0		0
D7.	you	rou have a sudden unexpected infan ur office conduct, or request, if warr lect one for each row.						anner of	death?
	Procedure		Yes N		No	Decision made elsewhere (e.g. state medical examiners' o office)		ere (e.g. state I examiners'	
		0 : 6 6			0				
	b.	Doll re-enactment			0	\bigcirc	\neg		\bigcirc
	C.	Imaging, including x-ray, CT, or MRI			0	0			0
	d. Autopsy				\bigcirc	\bigcirc			\bigcirc
	e. Forensic toxicology				0	0	0		0
	f.	Microbiology			0	0	_		0
	g.	Histology			0	0			0
	h.	Genetic testing (e.g., sudden cardiac	deaths)			0			0
D8.	a d	es your office use the Sudden Infant leath certificate? Yes No Death certificate completed elsewhere	-			·			en completing

RECORDS AND EVIDENCE RETENTION

E1.	of I	I your office have a computerize December 31, 2023? Such a systen agement system. This does not in the information. Yes → SKIP to E3	em is also known as	a computerized ca	ase or information				
	►E2.	What is the primary reason you management system? Select of Do not want computerized call. Funding Privacy or security concerns Too few cases/records Other (please specify)	one.	·		n			
E3.	 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 								
	sch	edule is a policy for how long reco	rds are retained. Se Yes	elect one for each r	ow. Not applicable - our office does not produce or use this				
	a.	Case records	0	0					
	b.	Forensic toxicology specimens	0	0	0				
	C.	Biological specimens other than toxicology specimens	0	0					
	d.	Non-biological evidence		\bigcirc	\bigcirc				

E5 .	E5. Does your office currently archive hard copies of your official investigative records and									
reports?										
	Yes No. No. No. 100 Per 57									
	O N	lo → 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									
		0								
		0	0							
		c. A regulated third-party storage facility (e.g., Iron Mountain)	0	0						
		d. Personal storage (including both home and rental storage)	0	0						
		e. Other business or office (e.g., funeral home, hospital, law office)								
E8.	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) The specific work with Veterans Administration or other groups to determine if the decedent is a veteran? Yes No									
		RESOURCES								
F1.	devi	of December 31, 2023, did your office have access to the Internet, separatice, to use for official job functions? Yes Io	te from a	personal						
F2.			eath inve	stigation						

F3.	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.	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		Y			nrough a r agency	No acces	s	
	a. Criminal history databases								
	b. EMS records					0	0		
	c. Fingerprint databases					0	0		
	d. Medical records databases					\bigcirc	\bigcirc		
	e. Prescription drug monitoring program	s					\bigcirc		
F6.	In 2023, did any of the staff at your office Select one for each row. Training or resource a. Mass fatality investigation/disaster plants. b. Bloodborne pathogens		Yes	No O	of the fo	bliowing tr	ainings ?		
F7.	counseling, therapy, or peer support. Yes No								
	Select one for each row. Select no if an ite	em is not	is not offered in yo		My office did not have cases of this				
	Specialty area		Yes N		。		n 2023		
	a. Child fatality	0				(
	b. Elderly/vulnerable adult fatality					(
	c. Overdose fatality					(
	d. Maternal death					(
	e. Suicide								
	o. Galoido								

	In 2023, did your office directly provide the following support services or provide referrals for these services? Select one for each row.								
	Sı	ıpport service	Service directly provided	Referral to another entity or organization	No				
	a.	Advocates for families of victims							
	b.	Grief and bereavement services for survivors (e.g., counseling or therapy, homicide survivor groups)	0	0	0				
	C.	On-scene support or advocacy for bystanders or other family and friends of deceased	0	0	0				
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