**Survey Instructions:** 

# 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 is incorrect, please call us at 1-866-662-8134.

<ul> <li>Submit this form using one of the following fou</li> <li>Online: https://www.bjscmec.org</li> </ul>	ur methods:	
Agency ID:		
Password:		
O E-mail: CMEC@rti.org		
о <b>Fax:                                    </b>		
o Mail: Use the enclosed postage-paid envel	•	
	not understand a question, please email or call for clarification ite "0" in the space provided. When exact numeric answers a	
please provide estimates and mark the estimat		ire not available,
Use blue or black ink and print as neatly as pos	sible.	
• Use an X when marking an answer in a box.		
Please indicate the primary person who comp	pleted this form:	
Name:		
Last Name	First Name	MI
Title:		
Phone: — — —		
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E-mail:		
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Website:		

If you have any questions, call RTI toll-free at 1-866-662-8134, or send an e-mail to CMEC@rti.org. If you have general project-related questions, please contact Connor Brooks of BJS at (202) 514-8633 or Connor.Brooks@usdoj.gov.

#### **Burden Statement**

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 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.	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)
АЗ.	What level of government best describes your office?  City office  County office  District/regional office  State office
A4.	Which, if any, of the following provides administrative 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  My office does not report to another agency  Other (please specify)
A5.	Is your office located within another business, such as a funeral home?  Yes  No
A6.	What jurisdictions does your office serve (e.g., County, State, or Judicial District)? If you serve multiple jurisdictions, enter a comma (,) between each jurisdiction.

The following section collects information about staff who support death investigation functions at your office and includes questions about Autopsy Pathologists, Coroners/non-physician Medical Examiners/non-autopsy physicians, Death Investigators, other scientific support staff (e.g., Forensic Toxicologists, Forensic Analysts), ancillary staff (e.g., drivers, photographers, evidence technicians), and administrative staff (e.g., administrative assistants, record clerks, secretaries).

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.
- **Consultants/Contractors:** Those who work for another company or as a consultant and are hired to work for your office, including locums tenens.
- On-Call employees: Those 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.
A7.	Dece	your office employ/contract any Autopsy Pathologists during the pay period that included ember 31, 2023? Please include all full-time, part-time, consultants/contractors/locum tenens, on-call Autopsy Pathologists. es o → SKIP to A13 on page 4
	<b>→</b> A8.	How many Autopsy Pathologists did your office employ/contract in the following categories during the pay period that included December 31, 2023? Enter 0 if your office does not have staff in given category.
		Full-time employees
		Part-time employees:
		Consultants/contractors/locum tenens:
		On-call employees:
	A9.	How many full-time and part-time 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 count contractors, consultants, or locum tenens. If none, enter 0.
		Number of <u>full-time</u> autopsy pathologists certified by ABP in forensic pathology:
		Number of <u>part-time</u> autopsy pathologists certified by ABP in forensic pathology:
	A10.	How were Autopsy Pathologists that performed autopsies for your office paid in 2023?  Please include full-time and part-time employees and consultants/contractors/locums tenens.  Select all that apply.  Hourly Salary Stipend  Continue to A11 on page 4

		Fee-for-service (paid by case, call, day, or oth	ŕ	. •
	A11.	What was the average annual salary (or annu stipend) for <u>full-time and part-time</u> Autopsy P December 31, 2023?		
			Annual Salary or Equivalent	Not Applicable
		<ul> <li>a. Average annual <u>full-time</u> salary (or salary equivalent if paid hourly or by stipend)</li> </ul>	\$	
(		b. Average annual salary <u>part-time</u> (or salary equivalent if paid hourly or by stipend)	\$ , ,	
	A12.	Did your office employ/contract any certified autopsies, separate from assisting in an Autothat included December 31, 2023?  Yes		
		○ No		· ·
A13	phys part-t	your office employ/contract any Coroners/non sicians during the pay period that included Dectime, consultants/contractors, and on-call employers put them in their primary role.	cember 31, 2023? Please in	clude all full-time,
1		o → SKIP to A17 on page 5		
	<b>→</b> 14.	How many Coroners/non-physician Medical E office employ/contract in the following catego December 31, 2023? Enter 0 if your office does	ories during the pay period	that included
		Full-time employees:		
		Part-time employees:		
		Consultants/contractors:		
		On-call employees:		
	A15.	How were Coroners/non-physician Medical E office paid in 2023? Please select all that apply Hourly Salary Continue to A16 on page 5  Stipend Fee-for-service (paid by case, call, day or other service)		·

	A16.	What was the average annual salary (or annustipend) for <u>full-time</u> and <u>part-time</u> Coroners autopsy physicians employed by your office	/non-physician Medical Ex	caminers/non-		
		autopsy physicians employed by your office	Annual Salary or Equivalent	Not Applicable		
		a. Average annual <u>full-time</u> salary (or salary equivalent if paid hourly or by stipend)	\$ , ,			
		b. Average annual salary <u>part-time</u> (or salary equivalent if paid hourly or by stipend)	\$			
A17	Dece emple	your office employ/contract any Death Investi ember 31, 2023? Please include full-time, part-ting eses. If an employee fills more than one role, p eses → SKIP to A22 on page 6	ne, consultants/contractors,	and on-call		
	<b>≯</b> A18.	How many Death Investigators did your office during the pay period that included December staff in given category.	e employ/contract in the fer 31, 2023? Enter 0 if your	following categories office does not have		
		Full-time employees:				
		Part-time employees:				
		Consultants/contractors:				
		On-call employees:				
	A19.	How many full-time and part-time Death Inveduring the pay period that included December Board of Medicolegal Death Investigators (A	er 31, 2023 were certified I			
		Number of <u>full-time</u> Death Investigators certified by ABMDI:				
		Number of <u>part-time</u> Death Investigators certifie	ed by ABMDI:			
	A20.	How were Death Investigators directly employall that apply.  ☐ Hourly ☐ Salary ☐ Stipend ☐ Fee-for-service (paid by case or call) → SKII		2023? Please select		
	A21.	What was the average annual salary (or annustipend) for <u>full-time and part-time</u> Death Inv December 31, 2023?				
			Annual Salary or Equivalent	Not Applicable		
		a. Average annual <u>full-time</u> salary (or salary equivalent if paid hourly or by stipend)	\$ , ,			
		b. Average annual salary <u>part-time</u> (or salary equivalent if paid hourly or by stipend)	\$ , ,			

A22. Did your office have volunteer Death Investigators in 2023?  ☐ Yes ☐ No → SKIP to A24
►A23. How many <u>volunteer</u> Death Investigators did your office have in 2023?
A24. During the pay period that included December 31, 2023, did your office employ/contract scientific support staff (e.g., Forensic Toxicologists, Forensic Analysts or Chemists, other scientific investigative support staff) or ancillary staff (e.g., drivers, photographers, evidence technicians) with roles specific to death investigation functions? Include full-time, part-time, consultants/contractors, and on call-employees.  ☐ Yes ☐ No → SKIP to A26
► ► ► ► ► ► ► ► ► ► ► ► ► ► ► ► ► ► ►
Full-time employees:
Part-time employees:
Consultants/contractors:
On-call employees:
A26. During the pay period that included December 31, 2023, did your office employ/contract any Administrative Staff (e.g., administrative assistants, records clerks, secretaries) who directly supported death investigation functions? Please include full-time, part-time, consultants/ contractors, and on-call employees.  Yes  No → SKIP to A28
A27. How many Administrative Staff (e.g., administrative assistants, records clerks, secretaries did your office employ/contract in the following categories during the pay period that included December 31, 2023?
Full-time employees:
Part-time employees:  Consultants/contractors:
On-call employees:

A28.	How many <u>vacant or unfilled</u> poduring the pay period that inclu	_			ving roles
	Role	Vacant Positions			
	Autopsy Pathologists:				
	Coroners/non-physician Medical Examiners/non-autopsy physicians:				
	Death Investigators:				
	EXPE	NDITURES AND FUN	DS		
B1.	On what month and day does your manner of the second of th	our office's fiscal year begin (e	.g., 01/01	, 07/01, 1	0/01)?
B2.	<ul><li>expenses related to death investinctions include your total expenses.</li><li>Include expenses paid by your</li></ul>	d on death investigation function organization (e.g., sheriff-corone estigation functions. If your office office, such as, for autopsies, per logy/ancillary testing, indigent bur	er, funeral only funct ersonnel, s	home), or ions as ar supplies a	nly include n MDI office, and equipment,
В3.	Which of the following function B2? Select one for each row.	s of your office are included in	the total	expendit	ures reported in
	Expense		Yes	No	
	a. Autopsies		0	0	
	b. Personnel				
	c. Supplies and equipment				
	d. Training				
	e. Transportation		0		
	f. Toxicology		0		
	g. Indigent Burial		0		
	h. Body storage		0	0	
	i. Other (please specify) →				

B4.	I. In your most recently completed fiscal year did your office receive funding from any of the following? Select one for each row.				
				Don't	My office is not permitted to collect funds
	Funding/revenue source	Yes	No	Know	from this source
	<ul> <li>a. American Rescue Plan Act/Coronavirus State and Local Fiscal Recovery Funds (ARPA/SLFRF)</li> </ul>		0		
	<ul> <li>b. Consultant fees/referral fees (e.g., autopsies, neuropathology)</li> </ul>	0	0	0	0
	c. Cremation waiver/authorization or permit fees	0	0	0	0
	d. Opioid Settlement Funds	0	0	0	0
	e. Report/record fees				0
B5.	B5. In 2023, 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	_	
	a. Personal protective equipment (PPE)	0	0		
	b. Specimen storage	0	0		
	c. Certifications/continuing education	0	0		
	d. Transportation (not including commute to work)	0	0		
	e. Other official work supplies				
	WORKLO	AD			
C1.	In 2023, were there any deaths that your office inv  ○ Yes  ○ No → SKIP to C13 on page 10	estigate/	d or oth	erwise d	ocumented?
	C2. In 2023, what was the total number of deaths documented?  Don't know—This specific data was not track  Deaths  Check if estimate:	-	ır office	investig	ated or otherwise
C3.	<ul> <li>In 2023, did any of the deaths reported in C2 meet your office's criteria to perform additional death investigation functions?</li> <li>Yes</li> <li>No → SKIP to C5 on page 9</li> </ul>				perform additional
	▶C4. In 2023, for how many deaths did your office beyond documenting the report of the death  ☐ Don't know—This specific data was not track ☐ Deaths Check if estimate: ☐	?	death i	nvestiga	tive functions,

C5. In 2023, did any of the deaths reported in C2 meet your office's criteria to determine cause and/or manner of death?  Yes
○ No → SKIP to C7
■ In 2023, for how many deaths did your office determine the cause and/or manner of death of the control of th
C7. In 2023, did your office receive any deaths from tribal lands? The term 'tribal lands' includes areas labeled Indian country, federal or state recognized reservations, trust lands, Alaska Native villages, an 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 on page 10
■ In 2023, what was the total number of deaths from tribal lands that your office investigated or otherwise documented?  □ Don't know—This specific data was not tracked  □ Deaths  Check if estimate: □
C9. In 2023, did any of the deaths from tribal lands reported in C8 meet the criteria for your office to perform additional death investigation functions?  ○ Yes ○ No → SKIP to C11
C10. In 2023, for how many deaths from tribal lands did your office perform investigative functions, beyond documenting the report of the death?  □ Don't know—This specific data was not tracked  □ Deaths  Check if estimate: □
C11. In 2023, did any of the deaths from tribal lands reported in C8 meet your office's criteria to determine cause and/or manner of death?  ○ Yes ○ No → SKIP to C13 on page 10
C12. In 2023, for how many deaths from tribal lands did your office determine the cause and/or manner of death?  Don't know—This specific data was not tracked  Deaths  Check if estimate:

These next questions ask about autopsies your office ordered or performed in 2023.
C13. Did your office conduct medicolegal autopsies <u>internally</u> in 2023?
C14. In 2023, how many medicolegal autopsies did your office conduct internally? Include referrals from other medicolegal death investigation authorities but exclude any private or hospital autopsies. Include both partial and complete autopsies.  Number of medicolegal autopsies conducted internally
Number of medicolegal autopsies conducted internally
C15. Did your office order any medicolegal autopsies to be conducted <u>externally</u> in 2023?  Yes  No. No. No. 2010
→C16. In 2023, where were autopsies ordered by your office performed externally? Please select all that apply.
☐ State Medical Examiner's office If your office does not use private facilities or hospitals ☐ Other MEC office to perform autopsies → SKIP to C18 ☐ Private facility or hospital
C17. How many autopsies were performed for your office by private facilities/hospitals in 2023?  Number of autopsies performed at private facilitates/hospitals  C18. 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  C19. 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?  Type of death  Yes  No
a. Drug related
b. Elderly
c. Homicides
d. Motor vehicle deaths
e. Suicide by firearm
f. Suicide by hanging  These next questions ask about your office's medicolegal death investigations (MDI).  C20. In 2023, did medicolegal death investigators in your office perform scene investigations?  Yes  No → SKIP to C22 on page 11
C21. In 2023, how many scene investigations did medicolegal death investigators conduct?  Number of scene investigations

C22. For those functions that are conducted internally by your office, who is <u>primarily responsible</u> for performing the following duties? Select one for each row.					
Duty	Autopsy Pathologists	Coroners/ Non-physician Medical examiner/ non-autopsy physicians	Death Investigators	Other Internal Staff	Not applicable, this function is not performed by my office
a. Determination of which deaths are accepted for further investigation		•	0	0	
b. Death scene investigations with inspection/ examination of body	0	0	0	0	0
c. Determination of which deaths are autopsied	0	0	0	0	0
d. Determination of which deaths receive forensic toxicology testing	0	0	0	0	0
C23. At the death scene, external examination/inspection, or at autopsy, did your office routinely perform drug screening tests (e.g., urine screen or Randox <sup>®</sup> ) in 2023?  ☐ Yes ☐ No → SKIP to C25					
■ C24. After performing drug screening tests, did your office routinely confirm positive results with toxicology testing in a laboratory in 2023?  ○ Yes ○ No					
_	?	nnel	responsible for	notifying next o	of kin about the

$ \bigcirc$ $Y$	<b>023, did your office respond to a multiple fatality event with four or more decedents?</b> Tes
	$10 \rightarrow SKIP to D1$
<b>√€27</b> .	In 2023, how many multiple fatality events (4 or more decedents) did your office respond to?  1-5  6-10  More than 10
C28.	Did your office need and/or use assistance from other jurisdictions to respond to multiple fatality events in 2023 for functions your office would normally complete independently?  O Yes  No
	SPECIALIZED INVESTIGATIONS
For the fo	llowing questions, unidentified remains refer to remains that are <u>unidentified for 60 days or</u>
more.	
	of December 31, 2023, did your office have <u>any</u> records of remains that were unidentified for <u>ays or more?</u> Please include cases regardless of disposition of the remains.
	$10 \rightarrow SKIP to D7 on page 13$
<b>→</b> D2.	In what year was the oldest case of unidentified remains currently on record reported to your office?  YYYY
D3.	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? Please include cases regardless of disposition of the remains.  Don't know Total number of unidentified humans remains on record Check if estimate:
D4.	How long does your office generally hold unidentified human remains before disposition?  Less than 1 month  1-2 months  3-6 months  More than 6 months to a year  More than 1 year  Our office holds unidentified remains indefinitely
D5.	How does your office dispose of unidentified human remains? Please select all that apply.  Bury Cremate Our office holds unidentified remains indefinitely Other (please specify)

	D6. What biometrics and samples do you routinely collect before disposition of unidentified human remains? Please 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)									
This	s next question asks about suspected drug ov	erdose death	s in 2023.							
	D7. For suspected overdose deaths in 2023, did your office do the following for all deaths, some									
	deaths, or not at all? Exclude delayed overdos	se deaths. Sele	ect one for e	each row.						
		All	Most	Some	None/My office does					
	Action	deaths	deaths	deaths	not do this					
	a. Go to scene of death if outside of hospital	0	0	O						
	b. Order an autopsy									
	c. Draw toxicology specimens		0							
	d. Run toxicology tests									
	e. Consult with a toxicologist before determining cause and manner of death	0	0	0	0					
	RECORDS AND EVIDENCE RETENTION									
E1.	<ul> <li>Did your office have a computerized system used to manage, compile, or track cases or evidence as of December 31, 2023? Such a system is also known as a computerized information management system or CMS. This does not include the use of Excel or other spreadsheet software to manage case information.         <ul> <li>Yes → SKIP to E3</li> <li>No</li> </ul> </li> </ul>									
	► E2. What is the <u>primary</u> reason your office do  One of want CMS  Funding  Privacy or security concerns  Technology constraints  Too few cases/records  Other (please specify)	oes not have	a CMS? Se	lect one.						
E3.	For deaths reported to your office in 2023, he produced, distinct from any logs, death certing All deaths  Some deaths  No deaths  Did not have any deaths									

E4.	Did your office have a written retention schedule for the following items in 2023? Select one for each row.								
		Yes	No	Not applicable not produc					
	a. Case records	0		(	$\supset$				
	b. Forensic toxicology specimens	0		(	$\supset$				
	c. Biological specimens other than toxicology specimens	0	0	(	$\supset$				
	d. Non-biological evidence	0	0	(	$\bigcirc$				
E5.	Did your office maintain records for the Hard copies Electronically Both Don't produce written records	or storag	je as har	d copies, electro	nically,	or both in	າ 2023?		
E6.	<ul> <li>Upon the last administration change (e.g., appointment of a new medical examiner or election of a new coroner), did the current office administration receive comprehensive death records from the prior administration?         <ul> <li>Yes</li> <li>No</li> <li>Don't know</li> </ul> </li> </ul>								
<b>E7.</b>	E7. Does your office archive hard copies of your official investigative records and reports?								
	the any of the following place	s? Seled	ct one for	each row.					
	Location				Yes	No			
	a. Government-owned office				0	0			
	b. Government-run or govern	nment-co	ontrolled s	storage facility	0	0			
	c. A regulated third-party sto	rage fac	ility (e.g.,	Iron Mountain)	0	0			
	d. Personal storage (including both home and rental storage)								
	e. Other business or office (e office)	e.g., fune	eral home	, hospital, law	0				
		RESC	DURC	ES					
F1.	As of December 31, 2023, did your device, to use for official job funct  O Yes  No		ave acce	ess to the Interne	et, separ	ate from	a personal		
F2.	As of December 31, 2023, did your functions, separate from personal   Yes No			ork vehicle dedic	ated to	death inv	estigation		

F3.	<ul> <li>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?</li> <li>Yes</li> <li>No → SKIP to F5</li> </ul>							
	<b>★</b> 4. What is the official maximum capacity of the body storage cooler(s)?  Maximum capacity							
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.							
	Decembe	Vac 4	المحمدان	Yes, through a	No seess			
	Resource	Yes, o	lirectly	partner agency	No access			
	a. Criminal history databases							
	b. EMS records	(						
	c. Fingerprint databases	0		U	0			
	d. Law enforcement or other criminal records databases			0				
	e. Medical records databases							
	f. Prescription drug monitoring programs	(	$\supset$					
F6.	In 2023, did staff at your office participate row.  Training or resource  a. Mass fatality investigation  b. Disaster planning (e.g., National Incident Management System [NIMS])  c. Bloodborne pathogens	Yes	No O					
	d. Proper lifting procedures							
F7.	<ul> <li>In 2023, did your office provide mental health/wellness support (e.g., counseling, therapy, peer support) for staff?</li> <li>Yes</li> <li>No</li> </ul>							
F8.	<ul> <li>In 2023, did your office participate in emergency response drills (e.g., state, county, regional or city)?</li> <li>Yes</li> <li>No</li> <li>Our state/region/county/city does not conduct emergency response drills</li> </ul>							
F9.	In, 2023, did your office participate in any multidisciplinary review teams? For example, for child fatalities, elderly/vulnerable adult fatalities, or overdose fatalities?  ○ Yes ○ No → SKIP to F11 on page 16							

	F10. In 2023, did your office participate in the following multidisciplinary review teams?  Select one for each row.								
		Specialty area			Yes	No	have o	My office did not have cases of this type in 2023	
			a. Child fatality					$\circ$	
			b.	Elderly/vulnerable adult fatality				$\bigcirc$	
	c. Overdose fatality								
			d.	Maternal death investigative team				$\bigcirc$	
	_		e.	Suicide investigative team	0				
F11. In 2023, did your office participate in any of these data collection efforts or programs? Select one for each row.									
	_			llection		Yes	No	Don't know	
		<ul> <li>National Missing and Unidentified Persons (NamUs)</li> <li>Sponsor: Department of Justice (DOJ)</li> </ul>			,	0	0	0	
	L	Sį	oor	onal Violent Death Reporting System ( nsor: Centers for Disease Control and	Prevention (CDC)			0	
	(	c. State Unintentional Drug Overdose Reporting System (SUDORS) Sponsor: Centers for Disease Control and Prevention (CDC)							
F12.				id your office directly provide the fovices? Select one for each row.	ollowing support	services or	provide	referrals for	
		Support service		t service	Service directly provided	Referral another e or organiz	entity		
			a. Advocates for families of victims			Or Organiz	ation	0	
		b. G	rief Irvi	f and bereavement services for vors (e.g., counseling or therapy, icide survivor groups)	0			0	
	(	by	'sta	scene support or advocacy for anders or other family and friends of eased	0	0		0	
F13. As of December 31, 2023, did your office have a dedicated family support specialist or counselor for family and friends of the deceased?  Yes									
	=C	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: 0216093.000.005 5265 Capital Boulevard									

## Raleigh, NC 27690