

# Iowa Office of the State Medical Examiner Update 2018

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## Mission Goals

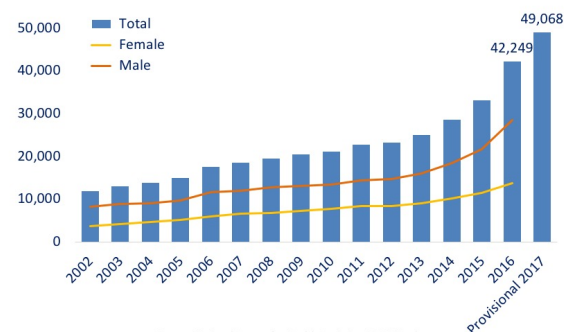
- Conduct high quality and professional medical legal death investigation
- Provide and Protect credible and useful information
- Serve the public ethically and compassionately

## 2017 Iowa Review

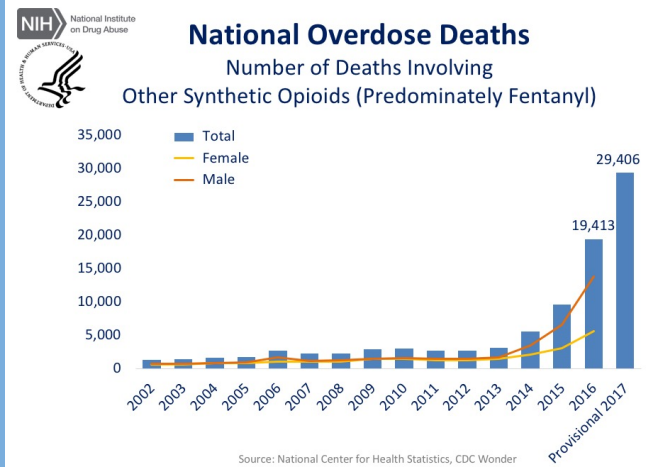
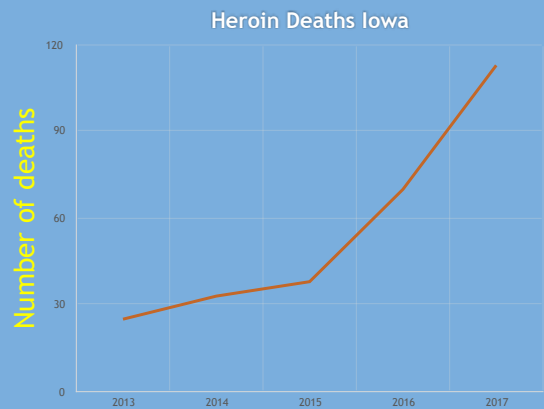
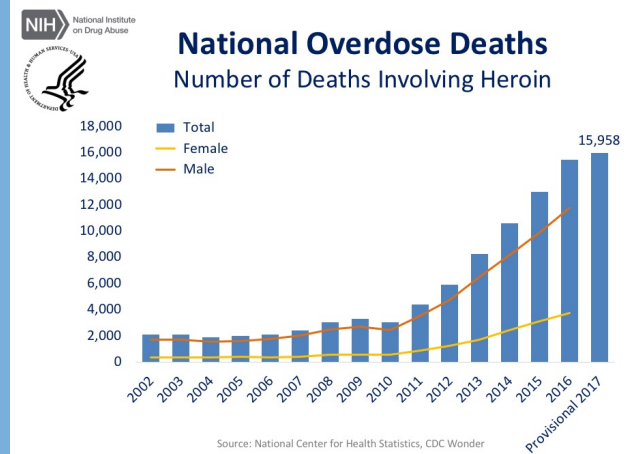
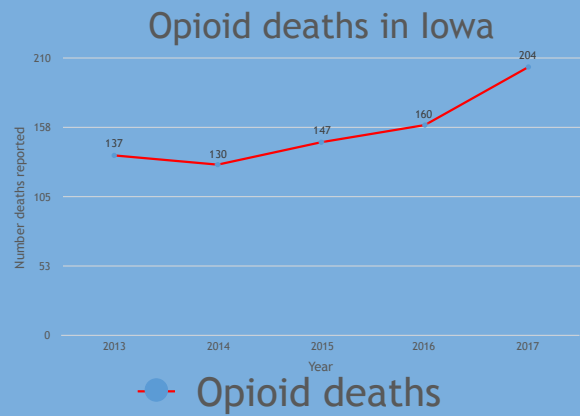
	2017	Last 4 yr avg
Total cases	5,540	5,522
Autopsies	1,508	1,537
Homicides	107	81
Suicides	423	305
Accidents	1270	1,182

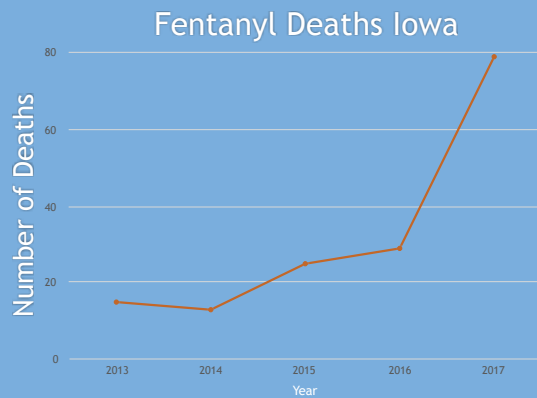


## National Overdose Deaths Number of Deaths Involving Opioids

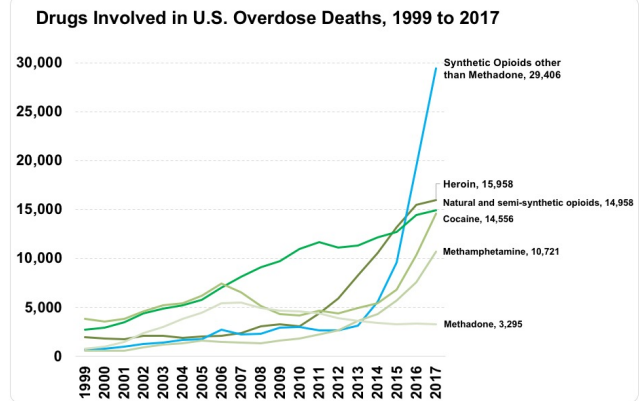


Source: National Center for Health Statistics, CDC Wonder

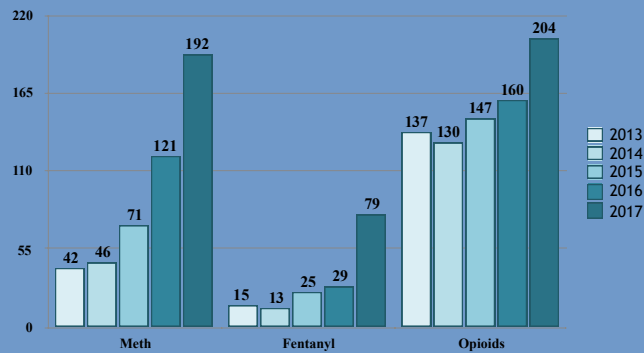




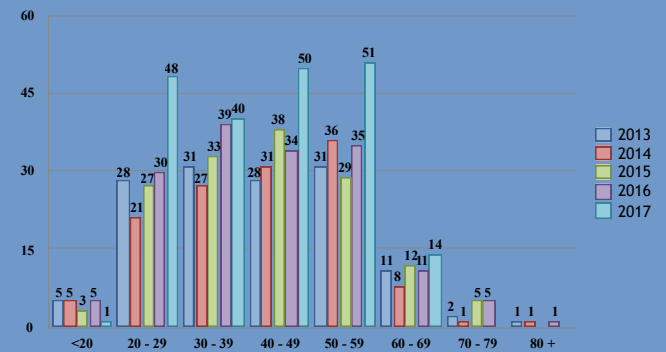
Fentanyl  
analogs in 2017



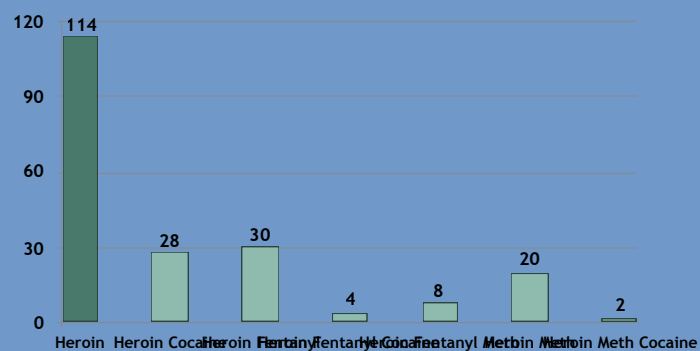
### Meth, Fentanyl, Opioids 5-Year Trend



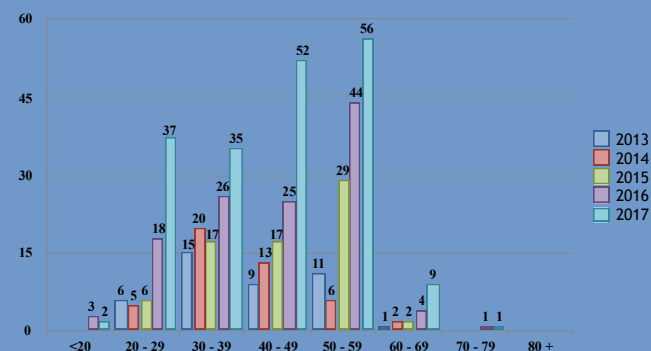
### Opioid Use by Age Group



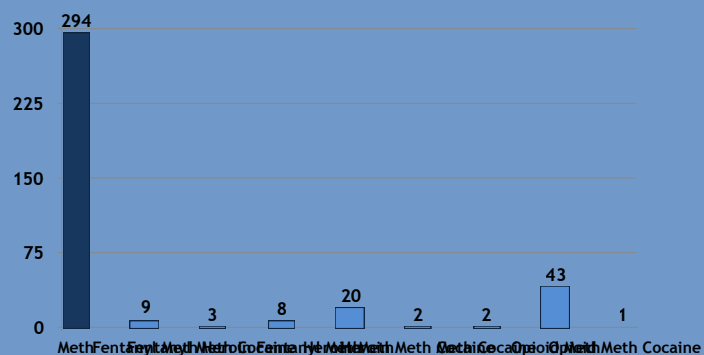
## Heroin: Single vs Mixed on Tox



## Meth Use by Age Group



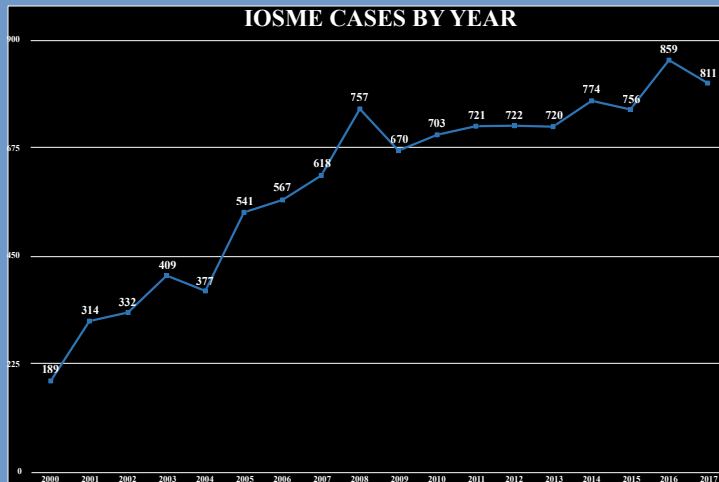
## Meth: Single vs Mixed on Tox



## Conclusions/Recommendations

- Increase in reported drug deaths (Opioids, Heroin, Fentanyl (and analogs) and Methamphetamine)
- Drug use and intoxication extending into 50's and 60's
  - Complex interpretation of Natural Disease and Toxicology
  - Increase index of suspicion in older age groups
  - Lower threshold for autopsy in 50-60 age group





## IOSME Staffing

### 12 Full Time

- 4 Forensic Pathologists
  - Dr. Kelly Kruse joined staff July 2018
- 2 Medical Examiner Investigators
- 2 Autopsy Technicians
- 3 Administrative Assistants
- 1 Radiology Technician

### 32 Part Time

- Autopsy technicians
- Morgue Attendants
- Administrative Assistants

### Partnership

- 2 IDN Liaisons/investigators

## Challenges (Staffing)

### Recommended staffing by NAME (29-33 FTEs):

# autopsies	Pathologists	Technicians	Investigators	Admin/clerical	Attendants
800	4	5	6	8	6
1,000	6	5	7	9	6

# autopsies	Pathologists	Technicians	Investigators	Admin/clerical	Attendants
820	4	3	2	3	Part-time

**Current staffing at State ME Office (total 12 FTEs)**

## Challenges (Timeliness)

- Periodic backlogs 2016-2018 due to surges and understaffing
  - No backlog since July 2018
- Meeting NAME Accreditation standards for Report TAT
  - Phase 1 90% in 60 days
  - Phase 2 90% in 90 days

## Communication Challenges

- Correct spelling of names and address of injury
  - Delays in death certification (15%)
- Receiving ME 1 Forms in time for autopsy
  - 87% of ME 1 forms received by end of day of the autopsy
  - 31% of ME 1 forms not received prior to beginning autopsy
  - 13% of ME 1 forms not received by end of day of autopsy

## Challenges (communication)

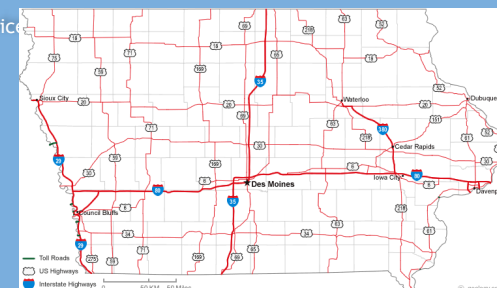
- Communication SCENE to AUTOPSY
  - Drug Intoxication? Sexual Assault? Infectious Disease? Domestic Violence?
  - Alert in First call and ME-1 form
- ME-1 form is Preliminary
  - Narrative
    - Brief Description
    - History/circumstances (surrounding death)
    - Scene Description (location and position of body)
    - Case assessment (impression of reason for death)
    - Reason for Disposition

## Challenges (2017 CME Survey)

- 25 Responses
  - Greatest concern for the future
    - 62% Investigation coverage
    - 17% Autopsy coverage
    - 6% Mass fatality planning/response
    - 3% Budget
    - 12% None or no response
- 83% yes    17% no    Adequate number of investigators
- 72% elective    28% Feel is duty to be CME

## Addressing Concerns

- Coverage and Budget
  - Cross jurisdictional (county) resource sharing
    - Experience
    - Timeliness and quality of service
    - Reduce costs



## Training still available

- Awaiting confirmation of funding for 3 to St Louis Medicolegal Death Investigator course
  - January
- Awaiting next Coverdell Grant 2019 for additional spots to St Louis

## Addressing Concerns

- Autopsy coverage
  - Expand service capability at IOSME
  - Review transportation



## Addressing Concerns

- Mass Fatality Response
  - County and State planning
  - IMORT Development
  - Leveraging existing services
    - 211
  - Exercise - Exercise - Exercise



## IMORT

- Third year of Mass Fatality exercises
- Identified Deficiencies
  - IMORT team members- NEED MORE!
  - Communications
  - GPS equipment and training
  - Field body transportation
  - Cooling equipment
  - Scene body and remains tracking system
  - Media and Family management



**i-SERV**  
Register • Respond  
Iowa Statewide Emergency  
Registry of Volunteers

Register. Respond. You Could Make a Difference.

**Home**  
Register Now  
Contact Us  
FAQ  
Terms of Service  
Privacy Policy

**Welcome to the Iowa Statewide Emergency Registry of Volunteers (i-SERV)**

Thank you for your interest in i-SERV, the Iowa Department of Public Health's secure online registry for individuals wishing to volunteer in the event of a large scale disaster or public health emergency. **As of September 1, 2017 there are 2,399 volunteers registered in i-SERV.** i-SERV is part of a federal effort to coordinate and assemble volunteers for all types of emergencies.

The i-SERV on-line registration includes questions about basic personal information and professional skills. Volunteers have the ability to decide travel distance and length of deployment. Based on the information provided, public health officials will identify and contact those individuals suited to fill the specific volunteer roles needed in an emergency. Once contacted, volunteers will be given information about where they are needed, the duties they will perform, and the option to accept or decline the opportunity.

**Remember:**

- i-SERV membership and volunteer activities are in addition to, and should not interfere with any professional or volunteer commitments you may have already established.
- It is very important to keep the i-SERV database up-to-date. Address, contact, or other changes in personal information should be submitted to i-SERV as soon as they occur.

Before you register, please go to the FAQ tab (upper left) for additional information.

**Member Login**  
Username:  
Password:  
Forgot Username or Password?  
Log In

**Not Registered?**  
Register Now

Log Out to Linked Accounts

<https://www.iaserv.org/>

## County Auditor Survey

- 96 Counties responding
- \$6,354,066 total (average \$1.96 per capita)
  - Autopsies \$2,632,061
  - Investigations, transportation etc \$3,722,005
- Maximum per capita \$6.22
- Minimum per capita \$ .42

## Accomplishments

- NAME accreditation
  - Inspection November 2017
  - Accredited for 4 years
- Opioid Overdose Crisis Supplemental Federal Grant (IDPH)
  - Advanced reporting
  - GIS mapping
  - Freezers, label printers
- Improving the Timeliness and Quality of Drug Mortality Data and the Interoperability of State Electronic Registration
  - IVES portal and integration with IOSME Case Management App
  - Training for CME's and MEI's

## IOSME Equipment Replacement (\$1.0 M)

- X-ray machine
- Freezers
- Autopsy carts
- Microscopes
- Drying cabinets
- IT equipment and infrastructure



## Medical Legal Death Investigation and Death Certification Objectives

- Identify Decedent
- Obtain Information: Locations, Dates
- Determine Cause and Manner of Death

## Death Investigation Objectives

- Accurate and Timely Death Certification
- Efficient and Secure Communication
- Accurate and Useful Data

## Online training on IVES

### Cause of Death Reporting in Iowa

Iowa Department of Public Health  
Bureau of Health Statistics



First time instructions for accessing the  
Cause of Death Reporting in Iowa


1) Go to <https://ives.training-source.org/>

## ME 1 FORM

The image shows two versions of the ME 1 form. The left form is the 'PRELIMINARY REPORT OF INVESTIGATION BY MEDICAL EXAMINER' and the right form is the 'STATE OF IOWA MEDICAL EXAMINER - IF OTHER THAN NATIONAL'. Both forms contain sections for decedent information, information about the decedent and description of death, information about the occurrence, information about the investigation, and a narrative summary of circumstances surrounding death. The right form also includes a section for the medical examiner's signature and a section for the medical examiner's office.

The screenshot shows the 'Injury or Onset of Illness' section of the Ives online training interface. It includes fields for Date of Injury, Is DATE approximate?, Injury Time (Military), Is TIME approximate?, Place of Injury, Address, State, County, City, Zipcode, Last Seen Alive/Communication, Date, Time, Type of Premises, Location, By Whom (First Name), By Whom (Last Name), State, County, Zip Code, Death (Pronounced), Date, Time, Type of Premises, Address where Pronounced, Pronouncer (First Name), Pronouncer (Last Name), State, County, Zip Code, Found Dead By, Date, Time, Type of Premises, Address where Found, By Whom (First Name), By Whom (Last Name), State, County, Zip Code, Police Notified, Time, Police Agency Type, Police Agency Name, Police Officer (First Name), Police Officer (Last Name), Police Contact Number, Industry, Savings Institutions, Including Credit Union, Law Enforcement, Law Enforcement of Domestic Violence, In Custody Death?, Injury or Onset of Illness.

The screenshot shows the 'Suicide' section of the Ives online training interface. It includes checkboxes for Suicide Note Found, Residence Secured, Alcohol Found at Scene, Copy of Note Obtained, Drugs Non-Prescription Found at Scene, Handwriting Sample Obtained, Drugs Prescribed to Decedent Found at Scene, Drugs Prescribed to Others Found at Scene, and Drugs Illegal Found at Scene. It also includes fields for Hanging, Suspension, Body Location, Body Position, Possible Autoerotic Asphyxiation, Ligature Type, Ligature Length (inches), Ligature Texture, Description of Ligature, Ligature Texture, Object/Source of Attachment, Point of Suspension on Body, Knot Type, Description of Knot, Platform, Platform Distance from Ground (inches), Platform Distance from Body (inches), and Description of Platform.

		<b>MEANS OF DEATH (Agency or Object) - IF OTHER THAN NATURAL</b>	
<b>DECEDENT:</b> <b>ADDRESS:</b> <b>Age:</b> <b>Marital Status:</b> <b>Pregnant:</b> <b>ITEM INJURY OR ONSET OF ILLNESS:</b> <b>DEATH:</b> <b>PREDECEASED:</b> <b>FOUND DEAD:</b> <b>POLICE NOTIFIED:</b> <b>M.E. NOTIFIED:</b> <b>TO HOSPITAL:</b> <b>Wait to Scene:</b> <b>Departed Scene:</b> <b>Viewed Body:</b> <b>Sample Drawn:</b>	<b>SUICIDE</b> <input type="checkbox"/> Past Suicidal Ideations <input type="checkbox"/> Past Suicide Attempt <input type="checkbox"/> History Mental Disorder <input type="checkbox"/> Residue Secured <input type="checkbox"/> Suicide Note Found <input type="checkbox"/> Copy of Note Obtained <input type="checkbox"/> Handwriting Sample Obtained <input type="checkbox"/> Non-Prescription <input type="checkbox"/> Prescribed to Decedent <input type="checkbox"/> Prescribed to Other <input type="checkbox"/> Legal	<input type="checkbox"/> Past Suicidal Ideations <input type="checkbox"/> Past Suicide Attempt <input type="checkbox"/> History Mental Disorder <input type="checkbox"/> Residue Secured <input type="checkbox"/> Suicide Note Found <input type="checkbox"/> Copy of Note Obtained <input type="checkbox"/> Handwriting Sample Obtained <input type="checkbox"/> Non-Prescription <input type="checkbox"/> Prescribed to Decedent <input type="checkbox"/> Prescribed to Other <input type="checkbox"/> Legal	<input type="checkbox"/> Past Suicidal Ideations <input type="checkbox"/> Past Suicide Attempt <input type="checkbox"/> History Mental Disorder <input type="checkbox"/> Residue Secured <input type="checkbox"/> Suicide Note Found <input type="checkbox"/> Copy of Note Obtained <input type="checkbox"/> Handwriting Sample Obtained <input type="checkbox"/> Non-Prescription <input type="checkbox"/> Prescribed to Decedent <input type="checkbox"/> Prescribed to Other <input type="checkbox"/> Legal
	<b>HANGING</b> <input type="checkbox"/> Partial Suspension <input type="checkbox"/> Full Suspension <input type="checkbox"/> Possible Autonomic Asphyxiation <input type="checkbox"/> Not Pregnant Will <input type="checkbox"/> Pregnant At Time <input type="checkbox"/> Not Pregnant, But <input type="checkbox"/> Not Pregnant, But <input type="checkbox"/> Not Applicable <input type="checkbox"/> Unknown	<b>Ligature Type:</b> <input type="checkbox"/> Bedding <input type="checkbox"/> Belt <input type="checkbox"/> Clothing <input type="checkbox"/> Electric Cord <input type="checkbox"/> Leather <input type="checkbox"/> Rope <input type="checkbox"/> Sheet <input type="checkbox"/> Wire <input type="checkbox"/> Other: <b>Ligature Length:</b> <input type="checkbox"/> In <b>Description of Ligature:</b> <input type="checkbox"/> Chain Link <input type="checkbox"/> Smooth <input type="checkbox"/> Twisted	<b>Object/Source of Attachment:</b> <input type="checkbox"/> Closet Rod <input type="checkbox"/> Ceiling Beam/Rafter <input type="checkbox"/> Tree <input type="checkbox"/> Bookshelf <input type="checkbox"/> Other: <b>Point of Suspension On Body:</b> <input type="checkbox"/> Neck <input type="checkbox"/> Wrist <input type="checkbox"/> Ankle <input type="checkbox"/> Other: <b>Knot Type:</b> <input type="checkbox"/> Fixed Simple <input type="checkbox"/> Fixed Complex <input type="checkbox"/> Running Simple <input type="checkbox"/> Running Complex <b>Description of Knot:</b>
<b>CARBON MONOXIDE - VEHICLE</b> <b>Vehicle Year:</b> <b>Vehicle Make:</b> <b>Vehicle Model:</b> <b>Gas Tank Level:</b> <input type="checkbox"/> Key in Ignition <input type="checkbox"/> Motor Running <input type="checkbox"/> Restart Possible <input type="checkbox"/> Doors Locked <input type="checkbox"/> Windows Closed <input type="checkbox"/> Air Conditioning On <input type="checkbox"/> Heater On <input type="checkbox"/> Tailpipe Condensation <input type="checkbox"/> Exhaust, with no exhaust: <input type="checkbox"/> None <input type="checkbox"/> Vehicle, if done, why?	<input type="checkbox"/> Vehicle Garaged <input type="checkbox"/> Garage Attached to House <input type="checkbox"/> Garage Type: <input type="checkbox"/> Built in (beneath primary roof) <input type="checkbox"/> Built on (extending roof) <input type="checkbox"/> Detached <input type="checkbox"/> Garage Door Position: <input type="checkbox"/> Closed <input type="checkbox"/> Partially Open <input type="checkbox"/> Fully Open	<b>Describe attempts to seal doors/windows:</b>	

## Future

- More powerful reporting capabilities
- GIS mapping
- Electronic Autopsy Reports
  - Reminder Families must request autopsy reports
  - No charge for families (paper)