

MASS FATALITY OPERATIONAL RESPONSE PLAN

Section 3: Morgue Operations

2021



Section 3: Morgue Operations

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3 Morgue Operations

The main functions of the morgue are to process the human remains in order to collect post mortem information, perform autopsies (if necessary), and to store the remains until they are identified and can be released to the appropriate family member. The basic operations of the morgue for the processing of remains are:

- Decontamination (if needed)
- Receiving
- Examination/collection of post mortem information for:
 - Identification
 - Injury documentation
 - Recovery of evidence
 - Cause and manner of death
- Storage
- Release

Additionally, identification operations also typically take place at or near the morgue. The identification of human remains is addressed in Section 5 of this plan.

Since the Morgue will house the human remains of those who have perished, it shall be kept secure, and managed with the utmost dignity out of respect for the deceased and their surviving family.

3.1 Plan of Operations

While most mass fatality morgue facilities have functional similarities, the condition and number of human remains resulting from the mass fatality will determine the specific optimum operational structure. Therefore, an evaluation team comprised of the State of Louisiana ESF-8 LDH (or designee) and local, other state and/or federal agencies that may be involved with morgue operations shall first take into consideration all specifics of the incident. See Site Evaluation in the Recovery section of this Plan. After the mass fatality scene is evaluated, the evaluation team shall determine what tasks need to be performed to facilitate the most efficient and effective identification of the deceased. Once the State of Louisiana ESF-8 LDH has an idea



of the size and scope of the response required, then a Morgue Operations action plan shall be developed. The activation plan will outline the required operational capabilities including which forensic specialties that will be needed, the size and infrastructure requirements of the morgue itself, ancillary support needed, and other specifics needed to establish a morgue operation that meets the needs of the mass fatality response. For example, in an airline crash with a relatively small group of known intact victims, only the flight crew may require autopsy. All other victims will be identified through conventional means such dental records, fingerprints, and/or pathology. In this situation the current morgue may be sufficient to handle the processing of the bodies. If the disaster involves a criminal act with a large unknown number of victims and substantial body fragmentation, autopsy and a large DNA effort, will be needed to associate body parts, identify victims and determine the cause of death and the current facility may not be sufficient to handle the bodies.

3.2 Morgue Command Structure

To ensure all tasks are handled appropriately and provide a clear expectation of duties, a National Incident Management System (NIMS) compliant incident command structure (ICS) will be established for Morgue operations. The number, or estimated number, of fatalities, their condition, and other incident specific considerations will factor into in determining the actual size and structure of the ICS at the Morgue. A basic NIMS command structure for Morgue Operations can be expanded or contracted as needed to meet operational needs.



3.3 Morgue Site and Facility

When possible, the current State of Louisiana ESF-8 LDH's facilities shall be utilized with augmentation of equipment and resources from outside agencies. If it is not possible to use the State of Louisiana ESF-8 LDH facilities then the following considerations that should be addressed when deciding on the morgues location:

3.3.1 Location

The morgue shall not be located near the Family Assistance Center (FAC). Separation from the FAC will prevent those surviving family members present at the FAC exposure to the sights, sounds, and at times smells from the morgue. This exposure will only add to their grief and suffering and can be avoided by proper site selection for both facilities.

3.3.2 Size

The square footage needed will depend on the stations that will be set up and the number of Morgue personnel that are required to staff each one. Below are some general guidelines that can be used as reference:



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Number of Remains	Square Feet Needed
Less than 100 remains	6,000 square feet
101-200 remains	8,000 square feet
More than 200 remains	10.000 square feet needed

3.3.3 Ventilation

To minimize morgue works exposure to malodorous odors and potentially dangerous fumes, proper ventilation is required in the morgue. If the facility where the temporary morgue is located does not have adequate ventilation already then ventilation will have to be added even if only for the duration of morgue operations.

3.3.4 Waste Disposal

Gray water shall be disposed of utilizing existing drainage (if available) or standard drainage will be constructed as needed. Biological hazardous waste (liquid or dry), produced as a result of morgue operations shall be disposed of according to State of Louisiana ESF-8 LDH requirements. Arrangements shall be made with the licensed company presently disposing of biohazard waste for the State of Louisiana ESF-8 LDH's office to collect waste generated from the incident morgue. If the present company cannot take on this additional waste then an alternative company will be contracted with. Routine trash removal will be performed as needed by an authorized vendor for the State of Louisiana ESF-8 LDH.

3.3.5 Heating and Cooling

Extreme temperatures, both hot and cold, are detrimental to morgue operations because of the affect to morgue personnel. Additionally, extreme heat can be damaging to some of the equipment used in the morgue such as computer and x-ray equipment. If the existing building housing the temporary morgue does not have adequate climate control then temporary HVAC (Heating, Ventilating and Air Conditioning) shall be secured.

3.3.6 *Electricity*

Electrical requirements will be dependent on the location of the incident morgue, whether at the

State of Louisiana ESF-8 LDH's morgue or a remote temporary location. Some general guidelines Section 3: Morgue Operations – Page 7 of 77 January 2021



are:

- Standard 110-120 volts outlets
- 200 amp assessable on site distribution panel

All electrical connections to distribution panels and all wiring shall be performed by a licensed electrician. If necessary, portable generators can be rented/secured in order to help meet electrical needs.

3.3.7 Water Supply

Hot and cold water shall be available as needed. At a minimum, this water will be supplied to the following areas of the morgue:

- Entrance and exit doors
- PPE dressing and undressing areas
- Pathology
- Personnel Effects
- Anthropology
- DNA
- Fingerprint
- Casketing/re-bagging area
- Other areas as needed

3.3.8 Lighting

Adequate lighting shall be provided, as it is imperative for forensic teams as they often will work through the night and examine the human remains, complete post-mortem forms and use scalpels and other sharps.

3.3.9 Communications

Having up-to date information is critical to an efficient and effective morgue. The morgue shall have the ability to communicate with the Body Recovery, Family Assistance Center, Identification Operations and outside organizations. Available communication modes shall include:

- Telephone
- Internet

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- T-1 Line (if needed)
- Cable TV (as needed)
- Radio

3.3.10 Rest Areas for Personnel

Since morgue staff typically works long, laborious hours, a rest area shall be provided. The rest area shall be:

- Climate controlled
- Adequate furniture for people to rest and have meals, including a bed or couch should morgue personnel need to lay down due to exhaustion or other conditions
- Furnished with drinks and high energy snacks

3.3.11 Restroom Facilities

Existing restroom facilities in the building are preferable. However, as necessary, temporary portable restrooms may be secured and used.

3.3.12 Grounds

There shall be adequate room around the morgue facility to accommodate parking for personnel and visitors and for receipt, storage and release of human remains. The vehicles delivering the human remains need to be able to pull in, make delivery, turn and park. Additionally, there needs to be enough room to remove the bodies from the vehicles, which may possibly be a forklift.

3.4 Security and Traffic

Access to the morgue is restricted to only those with proper credentials. Stringent security measures will be put into place to insure the sanctity and security of the morgue. Once the Morgue Plan of Operations has been established, a complementary security and traffic plans shall be developed. This security plan will include security procedures, security postings (interior and perimeter), diagram and photos of the site-specific facility and utility controls. The traffic control plan shall address issues related to automotive traffic in and out of as well as traffic flow inside the morgue compound.



3.4.1 Perimeter Security

Security must be strict at the morgue only allowing authorized persons access to the grounds and facility. A perimeter shall be established with 24 hours security in place, adequate lighting and controlled access points. When possible and needed, erecting a chain link fence (8 to 10 feet high) will greatly aid in securing the morgues perimeter and in controlling access to the morgue. Security personnel will be made aware of those who have official business at the morgue and who should be allowed entrance, what their ID looks like, and will log all visitors in and out of the morgue.

3.4.2 Credentialing and Controlled Access

Anyone entering the morgue must have proper credentials to do so. Most agencies that have representatives working at the morgue (county, state and federal) will have their own credentials. However, the decision early on will be whether or not to provide specific morgue credentials for anyone working there. Security controlling entry to the morgue will be make themselves familiar with all agency credentials involved with morgue operations. Should the State of Louisiana ESF-8 LDH find it necessary, site-specific ID badges can be made for those working in the morgue regardless of their own agency or organization affiliation. If site-specific badges are to be made then the necessary equipment shall be acquired including the badge making machine (and digital camera if not built into the badge machine), blank ID badges and lanyards.

3.4.3 Interior Security

With the perimeter security in place, only those authorized to be in the morgue should be present thus decreasing the need for a large security presence inside the morgue compound. Interior security issues typically include:

- Refrigerated trailers locked when not in use
- Personal effects storage secured at all times
- Providing escorts to visitors as needed
- Disruptive behavior of morgue personnel
- Other incident specific interior security

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3.4.3.1 Routine Patrols

Once morgue operations have been established routine patrols will be scheduled to monitor the perimeter of the morgue compound and insure no breach has occurred. A patrol schedule will be developed for this purpose.

3.4.3.2 Lighting

Lighting is always a good deterrent for those trying to gain entrance to restricted areas. As necessary, good perimeter lighting will be erected to deter those wanting to enter the morgue compound without authorization and or outside the normal entry points.

3.4.3.3 Refrigerated trailers

Refrigerated trailers, both receiving and holding, will be locked and secured when the morgue is not processing human remains, or when Security or Trailer personnel cannot closely watch them. Where keyed padlocks are used to lock trailers, the Security Team and Trailer Management Team leaders will have keys. If combination padlocks are used then the combination will be given to the Security and Trailer Management team leaders and others as deemed necessary and approved by Trailer Management Team Leader. As part of their routine patrol duties, Security will check refrigerated trailers to insure they are kept locked unless being accessed by a member of the trailer management team.

3.4.4 Traffic Control

Traffic control shall address:

- Traffic flow into the morgue facility
 - Designated routes for various vehicles such as funeral vehicles, refrigerated trailers, delivery trucks, staff vehicles, and others as needed
 - Designated parking
 - Restricted and reserved parking areas
 - o All vehicles logged into the facility by perimeter security
- Traffic flow out of the morgue facility
 - All vehicles logged out of the facility by perimeter security
 - Paperwork as needed
- Signage posted showing
 - o Directions to specific sections within the morgue compound

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- Restricted and reserved parking
- Trailer staging and parking areas
- Staff parking areas
- Visitors parking area
- Others as needed

3.5 Morgue Safety

Morgue personnel shall never be put in harm's way in the performance of their duties. When potential safety issues are observed by anyone in the morgue, they should be brought to the attention of the appropriate morgue supervisor.

3.5.1 Universal Precautions

Human remains shall be considered potentially infectious for HIV, HBV, and other bloodborne pathogens. All individuals that come in contact with human remains shall use Universal Precautions. Universal Precautions shall include:

- Gloves worn when touching blood, body fluids, body substances or any item or article associated with deceased human remains
- Masks, goggles or face shields used when splattering or splashing of blood or body fluids is possible.
- Gowns or aprons are worn when splashing, splattering, smearing, or soiling from blood or body fluids is a risk.
- Handling scalpels or other sharp objects carefully to avoid injury to morgue personnel
- Hands and other body parts washed immediately if contaminated with blood or body fluids
- Hands washed immediately after removing gloves

There shall be a PPE dressing area established prior to entering the morgue processing stations, and an area designated for removing and discarding PPE upon exiting. Biohazard bags shall be available to discard the used PPE and a hand washing stations will be available.

NOTE: Wearing full body PPE suits (e.g., Tyvek suits) for prolonged periods can cause the wearer to become overheated. Morgue personnel should monitor themselves, and others. If it appears that individuals are having problems related to overheating, it shall be addressed immediately.



3.5.2 Climate

Working in extreme hot or cold conditions for long periods shall be avoided whenever possible. Prolonged exposure to extreme heat or cold may be detrimental to morgue personnel's health and individuals can become lethargic thus increasing the possibility for accidents to occur causing injury to themselves or others. Often, it will be heat-related issues that will affect personnel working in the morgue. With overheating or any health concern, if on site medical personnel deems it necessary, individuals should be transported to a medical facility for observation and/or treatment.

3.5.3 Trip/Fall Hazards

In setting up operations, every reasonable precaution shall be taken to minimize objects on the ground that may cause individuals to trip/fall, for example:

- Electrical wires and water hoses that must run across the ground in a walking area should be securely taped down and marked with highly visible tape.
- Floor should be maintained free of debris and clutter.
- Spills shall be cleaned up immediately and/ or "wet floor" signs put in place.
- Individuals should avoid climbing over boxes or other containers when possible. For example, use ladders to reach objects overhead and do not substitute chairs, boxes, buckets, or other objects for a ladder.

3.5.4 Proper Lifting Techniques

To avoid back and other physical injuries, morgue personnel should adopt a lifting procedure that minimizes injury when lifting or moving human remains. See Recovery Operations Section for suggested lifting procedures.

3.6 Pictures and Media Relations

One of the most intriguing aspects of a mass fatality response for the public is the activities that go on at the morgue. As the morgue is not open to the public or the media, there is always much curiosity concerning the morgues operations. Only those authorized by the State of Louisiana ESF-8 LDH, Morgue Operations Director, or other authorized person, shall be permitted to take photographs (still or video) at the morgue. Others found taking pictures should have the pictures Section 3: Morgue Operations – Page 13 of 77 January 2021



confiscated, be escorted off the premises and dealt with accordingly by their respective agency. Certainly once human remains have begun arriving and are processed the media will not be allowed in the morgue out of respect for the deceased and their surviving family members. Prior to any remains actually processed through the morgue, it may be advisable to schedule a media day, open the morgue to the media, and invite them in. By exposing the morgue's faculties to the media, and showing the public how their loved ones will be respectfully processed and the expertise of the forensic specialists involved, it can raise the public's confidence level in the overall fatality response and provide a measure of comfort. By opening up the morgue to the media will help avoid probing questions and misunderstandings related to morgue activities as the response continues.

The PIO responsible for fatality response media relations is the best person to coordinate this media day at the morgue. The State of Louisiana ESF-8 LDH should be present and preside over the visit to eliminate questions of who is in charge of the response and represent State of Louisiana ESF-8 LDH.

As access to the morgue is restricted to only those with proper credentials, it will require coordination with the Morgue Operations Director, the security unit at the morgue, the State of Louisiana ESF 8 LDH and PIO so that approved media guest are allowed entry to the morgue. Media representatives should be given clear instructions as to where on the morgue compound they may go and where they may take pictures. All morgue personnel should be aware of a scheduled media visit and instructed what, if anything, they may say to the media and assist in moving them through the morgue compound during their stay.



3.7 Overview of Operations

Unlike routine morgue casework where human remains are typically processed in one location,

in a mass fatality incident, there are separate stations and the remains are most often moved from station to station. Typically, all human remains will be processed through the following:

- Decontamination (if needed)
- Admitting
- Triage
- Photography
- X-ray
- Fingerprint
- Odontology
- Personal Effects
- Anthropology
- Pathology
- DNA
- Storage
- Final Processing

The number of stations may vary depending upon the magnitude of the morgue operations. The flowchart below outlines the general flow of human remains throughout the morgue:



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3.8 Maintaining Quality and Chain of Custody

3.8.1 Quality

Each station shall have specified policies and procedures as well as quality standards for the examination performed and the data collected. The policies, procedures, and quality parameters shall be dictated by the State of Louisiana ESF-8 LDH and must be met to ensure appropriate data collection and recording.

3.8.2 Numbering and Tracking

Once remains enter the morgue they shall be assigned a unique number that will identify and track the remains throughout the examination process until eventual release from the morgue. If DMORT's VIP is used then the remains will be issued a Morgue Reference Number (MRN). If the incident is smaller in nature and VIP is not used, then the State of Louisiana ESF-8 LDH's standard numbering system will be utilized.

Regardless of what field, recovery or other numbers were used to designate a set of remains prior to entering the morgue; once this morgue number has been assigned the previously assigned numbers will no longer be used to identify a specific set of remains.

NOTE: The number assigned during the recovery process will be noted on the morgue documentation should there be a need to "back track" a case having all numbers associated to a specific case will be necessary.

3.8.3 Documentation

The State of Louisiana ESF-8 LDH shall maintain complete and contemporaneous documentation on what examinations were performed on the human remains and/or personal effects and who performed the examinations. The documentation associated with the human remains will remain with the body throughout the examination and will be retained by the State of Louisiana ESF-8 LDH or provided to the appropriate local coroner's office. Documentation will include name, date, time (if possible) procedure(s) performed and observations made. The documentation and



records shall be sufficient to allow an independent expert reach the same conclusions obtained in the morgue.

3.8.4 Escorting the Human Remains

Mass Fatality morgue's are fast-paced and can become very busy with multiple operations going on simultaneously and in close quarters. Escorts will be used to ensure that the human remains go through all necessary morgue stations and that all paperwork is complete and remain associated with the remains. An escort is assigned to each set of remains in Admitting. The escort will accompany the remains through the morgue process and once post mortem examinations is complete, will hand over documentation to Admitting and the remains to Trailer Holding.

3.9 Victim Identification Program (VIP)

If the number of remains warrant, the DMORT Victim Identification Program (VIP) shall be used to document post mortem findings for the human remains. VIP is a software program that has been used since 1994 for mass fatality responses when Federal Government assistance has been requested. It records both post-mortem and ante-mortem data so that they can be compared for identification purposes.

VIP is built on a customized FileMaker Pro 11 relational database platform, is user friendly, requires training, and allows photographs and illustrations to be digitally inserted and accessed easily.

VIP Version 11 is built on a customized FileMaker 11 relational database and will run on both Windows and Macintosh platforms including a mixed environment. VIP can be used in conjunction with SAS analytical software to identify and correct data entry errors such as zip codes that are accidentally keyed into address fields.

3.9.1 VIP Software requirements

- Filemaker Pro Advanced Server 11
- Filemaker Pro 11 with sufficient number of licenses (incident specific)
- Microsoft Office Professional 2007

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- Photoshop CS
- Adobe PDF software

Since versions of software are continually being updated it is important to verify the exact version number of software requirements with DMORT prior to installation.

3.9.2 VIP Hardware requirements

Hardware requirements include:

- Dell Power-Edge Server with RAID backup (or equivalent). **NOTE:** *If the FAC and Morgue can be connected by a secure T1, or greater, line then a single server will suffice however If the FAC and Morgue cannot be connected then two servers will be required and will need to be mirrored to each other.*
- Mid-range computers, monitors and keyboards or laptops at all morgue stations. Computers should be equipped with DC drive and burner and external drive (250-500 GB) for data transfer and archiving and be fully network capable
- Digital cameras and ports for both memory card and USB input of images
- Scanners with both document and film scan capability
- Printers
- Microsoft Office Professional 2007 and Filemaker Pro 11

3.9.3 VIP Forms

3.9.3.1 Tracking Forms

The Tracking Form (<u>See Attachment A</u>) is used to track the movement of human remains throughout the temporary morgue examination process, moving from station to station. A representative at each morgue station will sign off on the Tracking Form, indicating that an examination was performed. There are three entries on the Tracking Form related to Dental post mortem examination those being:

- Dental Exam
- Dental Photo
- Dental Radiology

These are included on the Tracking Form so that a record of these dental examinations occurred however; there are no VIP dental forms as all post-mortem dental information is recorded on forms specific to the equipment utilized in the temporary morgue. There is also an "Embalming"



entry on the Tracking Form in the event human remains are ever embalmed as part of temporary morgue operations.

3.9.3.2 Post-Mortem Forms

The Victim Identification Post-Mortem Forms are comprised of 14 forms (See <u>Attachments</u>) which will be used to record the post-mortem data collected at each station in the morgue at each station in the morgue by forensic personnel. It is imperative that all data entered into these forms is thoroughly completed and legible.

3.10 General Supplies and Equipment

Certain equipment and supplies will be used throughout the morgue, or will be used between different sections of the morgue. Equipment that is necessary for individual stations will be listed under the corresponding subsection under <u>Section 3.11.5 Morgue Stations</u>. Below is a list of common and communal items needed for morgue operations:

General Office Supplies Equipment

- Pens-black or blue
- Sharpies (various colors)
- Paper clips-large size
- 2" binder clips
- Rubber bands
- Stapler w/ staples
- Scissors
- Transparent tape
- Letter size file folders
- 9" X 12" Manila envelops
- 11" X 13" Manila envelopes
- Clip boards
- 8 ¹/₂" X 11" plastic sleeves
- Computer cleaning supplies
- Laminator

Cleaning, Sanitation, and Maintenance

- Brooms and mops
- Dust pans (large)

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- Garbage bags (heavy duty)
- Garbage bag ties
- Garbage cans (large)
- Liquid cleaning detergent or similar
- Liquid bleach
- Pressure washer (as needed)
- Water hoses (where water supply is available)
- Shovels-flat edged
- Hand Sanitizers
 - Liquid, foam or gel sanitizer in bottle
 - Sanitizing wipes
 - Sanitizing spray

Computers and Electronics

- Power Strips and power cords
- Printer/scanner/fax/copier
- Laptops
- Keyboard and Mouse kits
- Wireless network routers
- Ethernet Switches
- Ethernet cords
- Barcode label makers
- Paper shredder
- Mini refrigerator
- Server (Master) for VIP
- Radios

ID Card Kit

- Camera
- Tripod
- Cardstock
- Photo backdrop curtain
- Card Printer
- Card Printer ribbon

Body bags

- Adult body bags-20MIL Extra Heavy Duty
- Infant pouch

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• Pediatric pouch

Morgue Personal Protective Equipment (PPE)

- N95 Respirator Masks
- Tyvek Coveralls-size S, M, L, XXL
- Disposable surgeon caps and/or bouffant caps
- Safety Glasses with side shield
- Full face shield
- Gloves-Microflex Nitrile and/or Latex Gloves S, M, L, XL
- Disposable non-Latex gloves
- Shoe covers protective
- Lab coats M, L, and XL
- Disposable ear loop surgeon's Masks
- Disposable ear loop surgeon's face mask with built-in face shield
- Aprons, vinyl and disposable
- Plastic and Paper sheets
- Red Biohazard Trash Bags

Structural needs

- Eye Wash station
- Florescent lights with heavy duty stands (if additional lighting is required)
- Plastic sheeting
- 50-Partition Drop Curtains-12'X16' Tarpaulin)
- 30-Partition 90o connectors
- 50-Partition "T" connectors
- 60-Partition 1" coupler
- 80-Partiton base
- 1000' Rope
- 100-1" PVC Partition Poles 72" length
- Generator, 16 KW Diesel and necessary attachments for power output
- Folding tables and chairs
- DCA 909 Dosimeter Chargers

3.11 Operational Tasks and Personnel

3.11.1 Decontamination

If there is a threat of contaminated remains, personal effects, and other items of evidence, the

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State of Louisiana ESF-8 LDH will decide the best approach for mitigating the hazardous material agent while preserving all items of interest. Postmortem changes and dismemberment alters the exposed surfaces. Consequently, it may be difficult or impossible to know whether the remains are safe for handling with standard personal protective equipment. Deaths due to certain infectious agents, such as smallpox, may result in remains that cannot be decontaminated. In some cases the focus may be shifted to containment of the remains with examination limited to gathering limited information. The State of Louisiana ESF-8 LDH shall:

- Determine the level of personal protective equipment necessary to complete the operations
- Determine the size and composition of the containment team, which may include Coroner, hazardous materials technicians, forensic pathologists, forensic anthropologists, forensic odontologists, forensic photographers, law enforcement, fire service professionals, investigators, and medical support staff for the containment team.

If removal of personal effects and/or evidence is completed on the cleaning and containment line, all items should be documented in writing and with photography. Items removed from the remains will receive the same number as the remains and be packaged for safe handling.

If necessary, the cleaning and containment process can be repeated multiple times until the remains are safe to handle in the morgue. If the remains cannot be cleaned or contained, the State of Louisiana ESF 8 LDH will determine disposition of the remains.

The remains are placed in the proper receptacle and forwarded to a clean refrigerated area or morgue. If necessary, forensic examination of the remains may be completed on the cleaning and containment line for unusual cases.

3.11.2 Trailer Management

Refrigerated trailers will be used for the storage of human remains at the morgue both upon their initial arrival and post examination until the remains are released from the morgue. The Trailer Management Group is responsible for managing the intake, storage and discharge of human remains from the morgue. The trailers will be decontaminated after they have been used



for the transport/storage of human remains. See <u>Attachment B</u> for procedures on decontamination of refrigerated trailers.

3.11.2.1 Trailer Management Group Supervisor

This person will be responsible for all activities related to the receiving, storage and discharge of human remains while at the Morgue. Where necessary an assistant supervisor will be appointed. The Trailer Management Group is split into two teams, the Remains Receiving and Remains Holding teams. Working with the Remains Receiving Team Leader and the Remains Holding Team Leader, the Trailer Management Group supervisor will help facilitate re-supply of needed resources and equipment.

3.11.2.2 Trailer Management Supplies and Equipment

- Body bags-adult, juvenile and infant sizes
- Toe tags
- Spray paint (to mark bags)
- PPE
- Biohazard wastes disposal
- Trailer logs
- Body release forms
- Laptop computer
- Office supplies
- Printer/copier/scanner/fax machine
- File storage
- Locks for trailers
- Lighting as needed (e.g. pole lighting)
- Ramps/steps/fork lift
- Inclement weather gear as needed
- Cleaning supplies
- Decontamination supplies and equipment
 - o Full body hooded protective suit impervious to household bleach
 - o Respirator with canisters designed to protect against fumes from household bleach
 - Eye protection
 - Gloves-latex gloves and heavy rubber gloves
 - Nonslip shoe covering
 - o 20' X 20" Plastic sheeting-minimum 6mil thickness
 - Push broom(s)
 - Low pressure sprayer (e.g., garden sprayer)
 - 1500 psi pressure washer

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- Scrub brush(s)
- Biohazard waste disposal container

3.11.3 Receiving

Deceased human remains will be transported to the morgue either directly from the recovery site or from a Transfer Site where they have been held. Accompanying the remains will be the associated documentation detailing the recovery, "VIP Victim Site Recovery Form" (See <u>Attachment C</u>) and, where remains are brought to the morgue in refrigerated trailers, trailer manifests showing the precise location of each human remains.

A representative of the receiving team shall insure there are no discrepancies between recovery documentation by verifying all documentation against the human remains. Disassociating recovery documentation from the appropriate remains during the receiving process will impede the identification process. Additionally, the receiving team representative will insure that all recovery documentation is complete and legible.

Refrigerated trailers will be used to store the remains until they are ready to be moved through the morgue process. There will have to be a supply of refrigerated trailers on hand to receive the remains as they are transported to the morgue and to resupply Transfer Sites. Should the remains be transported to the morgue in refrigerated trailers, they can remain in the trailers until ready for examination.

3.11.3.1 Remains Receiving Team Leader

- Responsible for all activities related to receiving human remains from the recovery site. Will work with the Trailer Management Group Supervisor for issues concerning resupply of equipment, materials and other resources, including staffing.
- Inspection of documentation either personally or by designee, will insure that all documentation accompanying the human remains as they are brought in from the recovery site is complete, legible and that field/recovery numbers match the human remains.
- Insure that refrigerated trailers are locked when not actively being accessed and or during non-operational hours.



- Insure there is adequate lighting inside and outside the refrigerated trailers for personnel complete documentation and for safety.
- Insures that refrigerated trailers have sufficient fuel and contacts maintenance personnel when issues arise
- Insure that refrigerated trailers are cleaned after emptied and read for use
- Insures there is sufficient copies of "Receiving Trailer Log" (See <u>Attachment D</u>) forms and other documentation and supplies on hand
- Address any safety issues related to activities at the Receiving site
- Works with Security to establish security procedures and for any security issues that may arise

3.11.3.2 Remains Receiving Specialists

- Assist Remains Receiving Team Leader with documentation
- Assist in moving human remains from Receiving trailers to Morgue Intake
- Clean empty trailers for reuse at recovery site
- Keep Receiving site clean and free of debris

3.11.3.3 Procedures for Receiving Human Remains

3.11.3.3.1 Remains brought in by recovery team personnel

When Transfer Sites are not utilized then the human remains will be transported to the Morgue

directly from the incident site the following should be performed:

- Inspect all recovery documentation for completion and legibility
- Off load one human remain at a time unless sufficient staff to adequately process multiple remains at the same time
- Verify that recovery/field numbers on human remains match recovery documentation
- Address any discrepancies IMMEDIATELY
- Assign location in refrigerated trailer and enter into "Receiving Trailer Log"
- Re-bag remains only if necessary by placing old body bag with remains into a new one-do NOT discard anything brought in from the recovery site
- Remains are placed in designated location in refrigerated trailer

3.11.3.3.2 Remains brought in from Transfer Site in refrigerated trailers

If Transfer Sites are utilized, once a trailer is full, it will be moved from the Transfer Site to the

Morgue. Then, the following should be performed:

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- Driver is instructed where to park refrigerated trailer.
- Verify number on plastic locking tab on trailer doors against what is listed on trailer manifest before breaking tab.
- Inspect all recovery documentation for completion and legibility.
- Compare all recovery documentation to human remains by verifying that recovery numbers on remains match what is on documentation.
- Address any discrepancies IMMEDIATELY.
- Using the trailer manifest a "Receiving Trailer Log" is completed and replaces the manifest.
- Once all documentation is verified the driver can be released and given a clean trailer if needed for the Transfer Site.
- Trailer is locked.

3.11.3.3.3 Remains brought in by other agencies or individuals

There may be occasions where agencies not officially affiliated with the recovery process or individuals will bring human remains directly to the morgue. If this occurs, there will be a need to capture as much information as possible from those agencies/individuals

- Complete a "VIP Victim Site Recovery Form."
- If the agency representative/individual took pictures obtain copies.
- Obtain good contact information from the agency/individual should there be a need to reach back out to them.
- Assign a recovery number and affix to the documentation and human remains.
- Assign location in refrigerated trailer and enter into "Receiving Trailer Log".
- Re-bag remains only if necessary by placing old body bag with remains into a new one. DO NOT discard anything brought in from the recovery site.
- Remains are placed in designated location in refrigerated trailer.

3.11.3.4 Transferring Remains from Receiving to Morgue

As the morgue is ready for remains, they will be moved from the Receiving trailers to the morgue

one at a time.

- Morgue requests that a remains be brought to the morgue
- Receiving Specialists remove remains from the trailer, log the remains out of the appropriate "Receiving Trailer Log"
- Either Receiving Specialists or Morgue personnel move remains from trailer to the morgue.

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3.11.4 Remains Holding

Following examination in the morgue, human remains will be held in Holding Trailers until such time they are released to their respective families or in the case of unidentified or unclaimed bodies, will be buried by State of Louisiana. Occasionally, a set of human remains will need to be re-examined by one or more of the forensic staff so will need to move in and out of the Holding trailers as necessary. Keeping records of the precise location of the remains is imperative. Additionally, working with the Family Assistance Center (FAC) the Remains Holding staff will coordinate the release of human remains once they have been positively identified and released by the State of Louisiana ESF-8 LDH

3.11.4.1 Remains Holding Team Leader

- Responsible for all activities related to the storage and release of human remains from the morgue.
- Works with Trailer Management Group Supervisor for issues concerning resupply of equipment, materials and other resources including staffing
- Insures that human remains are placed in the designated areas once assigned
- Insures that refrigerated trailers are locked when not actively being used and or during non-operational hours at the morgue
- Insures that there is adequate lighting inside and outside the refrigerated trailers.
- Insures that refrigerated trailers have sufficient fuel and contacts maintenance personnel when issues arise
- Insures that refrigerated trailers are cleaned as necessary and when ready to return to vendor are cleaned and disinfected per guidelines in <u>Attachment B</u>
- Maintains "Remains Holding Trailer Logs" (See <u>Attachment E</u>)
- Addresses any safety issues related to activities at the Remains Holding trailer site.
- Works with the Family Assistance Center in coordinating the release of human remains
- Works with funeral homes/mortuaries in releasing human remains

3.11.4.2 Remains Holding Team Personnel

- Receiving human remains from the morgue and placing in Remains Holding trailers
- Retrieve human remains from Remains Holding trailer for re-examination in the morgue
- Keep Remains Holding trailers clean and free of debris

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• Interfaces with funeral homes/mortuaries when releasing human remains

3.11.4.3 Storing Human Remains

- Upon exiting the morgue following examination, human remains will be turned over to the Remains Holding team
- Remains Holding team members will assign the remains a location in a refrigerated trailer and note it on a "Remains Holding Trailer Log"
- Remains are place in designated location in trailer

3.11.4.4 Releasing Human Remains and Personal Effects

As each incident will differ, so will the exact procedures for body release. The following steps

provide general guidelines for releasing human remains and personal effects from the morgue:

- Family Assistance Center will fax/email copy of "Funeral Home and Person Effects Directives Form".
- Either the funeral home will contact the Remains Holding unit to schedule pick up of the remains, OR if the Family Assistance Center has already scheduled a pick up time, this will be communicated, as well.
- Funeral Home representative arrive at morgue and are directed where to park vehicle.
- Funeral home personnel present valid form of ID which is copied with copy to be placed in post mortem file of the deceased.
- Remains Holding unit personnel completes "Remains Release Form" (See <u>Attachment F</u>) and has funeral home representative sign and date form.
- Remains are released and release documentation is forwarded to Data Management to be placed in post mortem file.

3.11.5 Morgue Stations

Before reporting to assigned morgue duty stations, morgue personnel must pass through the PPE Station, an area that has been established for storage of PPE with a space for personnel to don the equipment. At a minimum, PPE will include an impervious gown or Tyvek suit, disposable hat, disposable mask, eye protection, disposable shoe covers, and disposable gloves.

3.11.5.1 Triage (Optional)

An incident with extensive fragmentation and or decomposition may require the use of a triage station. Based on knowledge and experience, scientists assigned to Triage will decide which

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remains have potential for identification. At this station, a forensic anthropologist, or another scientist qualified to perform this function, will:

- Separate human tissue from other material remains.
- Separate human tissue from non-human material.
- Identify associated remains from non-associated remains.
- Assign probative value to fragmented remains in order to first process those remains most likely to provide evidence of personal identity.
- Forward any potential evidence to law enforcement.
- Allow remains to proceed to admitting for entrance into morgue and the examination process.

Remains with little identification potential will be transferred to common tissue holding (not discarded) and personal effects not associated with a body or specimen will be transferred to law enforcement or other specified party for further processing and disposition.

Fragmentary remains or partial bodies may proceed directly to DNA collection or may process through all routine morgue stations. This decision will be based on the potential for identification and will be made by the State of Louisiana ESF-8 LDH or designee.

3.11.5.1.1 Staffing

- Forensic Anthropologists
- Forensic Pathologists
- Odontologist (as needed)
- Other forensic specialists as needed

3.11.5.1.2 Triage Supplies and Equipment

- PPE
- General autopsy instruments (e.g., scalpels, forceps)
- Biohazard disposal containers
- Evidence bags/containers

3.11.5.2 Admitting and Processing

Human remains being held in the Remains Receiving trailers will be brought into the morgue one at a time where they will be entered into the morgue's database, receive a unique morgue reference number (see Section <u>3.8.2 Numbering</u>), assigned an escort then examined at the

various morgue stations as necessary. Section 3: Morgue Operations – Page 29 of 77 January 2021



3.11.5.2.1 Admitting Group Supervisor

The Admitting Group Supervisor is responsible for all activities related to the Admitting and processing of human remains in the morgue. This does not include the forensic specialists and their roles in the examination process, but the physical receiving of the remains, moving them through the various stations and exiting the morgue. Responsibilities include:

- Supervision of Admitting and Escort teams
- Insuring adequate staffing in Admitting and Escort sections
- Works with Receiving Trailer personnel when requesting human remains moved to the morgue for examination
- Insures there are adequate supplies to include hard copies of morgue documentation, office supplies, office equipment, etc. for the Admitting section
- Serves as a working supervisor and may serve in any of the positions in the Admitting and Processing section

3.11.5.2.2 Assistant Admitting Group Supervisor

If necessary, an Assistant Admitting Group Supervisor will be appointed to supervise admitting operations in the absence of the Admitting Group Supervisor. This may be necessary if the morgue is operational for 24 hours a day where the Assistant Admitting Group Supervisor will supervise the overnight shift.

3.11.5.2.3 Admitting Clerk

Responsible for inputting information on human remains entering the morgue into the morgues database, assigning either a Morgue Reference Number (MRN) or Coroners number to the remains, assigning an Escort for the remains and providing necessary documentation to the Escort. Admitting Clerk is responsible for entering human remains into the "Morgue Operations Log" (See <u>Attachment G</u>). Also responsible for reviewing all documentation for a set of human remains after post-mortem examination and prior to them being taken to storage trailer to insure completeness and legibility. Admitting Clerk needs to sign the Tracking Form.

3.11.5.2.4 Escorts

An Escort will be assigned to each of human remains that are examined in the morgue by Admitting and will accompany the remains throughout the examination process. Escorts will ensure that all documentation is complete at each station before moving the remains to the next Section 3: Morgue Operations – Page 30 of 77 January 2021



one. Unless absolutely necessary, an Escort should not leave their assigned set of remains. However, if it becomes imperative that they must leave, the Escort is responsible for seeing that someone takes over their responsibility of escorting the remains through the rest of the examination process and keeping up with the associated documentation. Responsibilities include:

- Carrying documentation from station to station in the morgue insuring it is complete
- Insuring that the documentation remains associate with the respective human remains
- Preventing documentation from contamination (should any documentation be contaminated the form will be replaced with a new one and the old one disposed of as biohazard waste)
- Returning complete documentation to the Admitting staff prior to remains being moved to Storage trailer

3.11.5.2.5 Admitting Supplies and Equipment

- Laptop computer(s)
- Office supplies
- Printer/copier/scanner/fax machine
- Copies of Morgue Operations Log
- Copies of all post mortem documentation
- File storage
- Cleaning/disinfecting supplies

3.11.5.3 Radiology (X-Ray)

The radiology section of the morgue should be located in an area secluded from all other stations. All personnel in this area shall wear appropriate lead protection including an apron and direct protector. Radiographs are used to detect explosive devices, weapons, sharp objects, and reexamine teeth and bones. Complete bodies should be radiographed immediately after admitting and usually will not have to be radiographed a second time. Fragmentary remains should be radiographed before triage, after admitting, and may be returned to radiology at multiple stages of examination as needed.

Radiographs of complete bodies should include AP and laterals of the head with a clear view of the sinuses, an AP of the abdomen and chest, as well as the extremities. If the incident involves



a commercial aircraft, additional radiographs of the hands and feet, as directed by the State of Louisiana ESF 8 LDH, will be obtained.

The radiology technologist will record notes of the radiographs obtained on VIP documentation, "VIP Radiology forms 1 and 2" (See <u>Attachment H</u>) and any additional comments on the "VIP Combined Narratives form 2" (See <u>Attachment Q</u>), provided by the Escort and process radiographs. The radiology technologist also needs to sign the Tracking Form.

3.11.5.3.1 Radiology Team Leader

Responsible for all activities in the Radiology unit of the morgue including:

- Scheduling unit personnel
- Radiation safety issues
- Assigns and monitors dosimeters
- Requests repair/replacement of malfunctioning equipment
- Accountability of all radiographs
- Ensure morgue protocols are being followed

3.11.5.3.2 Radiologists and X-Ray Technicians

- Radiographs all remains in the morgue
- Indicate MRN or Coroners number on each radiograph
- Maintains Radiograph Log
 - MRN or Coroners number
 - o Date and Time
 - Specific radiographs taken
 - Necessary comments
- Cleans and disinfects equipment as needed

3.11.5.3.3 Radiology Supplies and Equipment

- Digital Body X-Ray System
 - Full-size lead apron
 - X-ray screen cleaner
 - o Tube Unit
 - o Sensor plate
 - Casters and hardware for Hardigg Case
 - o X-ray shield (palletized) Opaque mobile lead shield barrier

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3.11.5.4 Photography

The Forensic Photography Station Team photographs human remains to document any injury, trauma, or any possible characteristics of identifiable features and maintain the chain of evidence should the cause of the mass fatality incident is criminal in nature. If the bodies are clothed, they will be photographed before they are undressed. Standard autopsy photographs with be taken with remains in anatomical position ensuring that the entire remains are photographed. Additionally full-face photographs will be taken when possible. Personal effects will be photographed in place, before removal. All photographs shall contain the MRN, or Coroner's number, and a reference scale. Digital images shall be stored in an electronic format and backed up every 4-6 hours. The photographer will record images obtained on the morgue "Photography Log" (See <u>Attachment I</u>). Photographer needs to sign the Tracking Form.

NOTE: Only authorized persons may take photographs inside the morgue. No candid photographs will be allowed inside the morgue without the written permission of the State of Louisiana ESF-8 LDH, nor shall photographs be released, duplicated or removed from the morgue without the written permission of the State of Louisiana ESF-8 LDH.

3.11.5.4.1 Photography Team Leader

Is responsible for all activities of the Photography unit and shall:

- Assist in setting up Photography unit as needed
- Maintain all camera and other equipment and supplies
- Ensure all morgue protocols are being followed
- Coordinate with other forensic units in the morgue

3.11.5.4.2 Photographer

Responsibilities include:

- Photographing all human remains and personal effects in the morgue
- Assist in keeping Photography Unit clean and disinfected

3.11.5.4.3 Photography Supplies and Equipment

- Digital Camera
- Rechargeable batteries and recharge station
- Camera case
- Rulers

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- o L-square
- o 6" White photo
- Standard and metric photo tape

3.11.5.5 Personal Effects

The preservation and collection of personal effects is critically important to the families of victims lost in a mass fatality incident. Personal effects can aid in the identification of human remains. While not considered sufficient for positive identification, they represent good presumptive information for corroboration. They also used in determining pattern injuries. Personal effects are typically classified into two different categories:

- **Associated** Personal items that can be identified to a specific victim such as rings or earrings that are found on the victim or articles such as a wallet found in a carry-on bag with a driver's license, credit cards, and other items with a specific person's name.
- **Unassociated** Personal items that cannot be identified to a specific person such as a necklace or earring found near, but not on a victim, or clothing that has spilled from a suitcase. In the event of an aviation incident the airlines insurance carrier will hire an independent company to catalog and facilitate the return of personal effects to the deceased family.

All personal effects will be described in detail on the "VIP Clothing/Personal Effects form" (See <u>Attachment J</u>) and the "VIP Jewelry form" (See <u>Attachment K</u>). Once the form is complete, a copy of the form is made. The original is placed in the post mortem file for the human remains and a copy maintained by the Personal Effects Team. Personal Effects personnel need to sign the Tracking Form.

If personal effects are discovered in Triage, they will NOT be separated from the human remains at that time. Personal effects will remain with human remains until they have been examined at the Pathology station and have been photographed. At this point, they may be separated, documented, placed in appropriate packing and taken to personal effects storage.

Heavily soiled and or contaminated clothing may remain with the human remains. However, all jewelry, wallets, and other personal effect items will be collected by the Personal Effects team for secure storage.



3.11.5.5.1 Storage of Personal Effects

There shall be a secure storage area in the morgue for personal effects removed from the remains that are processed in the morgue. The Personal Effects Team Leader will coordinate with Security as to who will hold the keys for this area. The specifics relating to the size and equipment needs will depends on the number and condition of the personal effects thus this is incident specific. However, some general considerations for outfitting the personal effects storage room include:

- Square footage of the room/area
- Ability to lock/secure storage area
- Shelving unites (as needed)
- Plastic/Rubber tubs or containers for larger personal effects
- Bags (plastic or paper) for storage of smaller effects
- Marking instruments (e.g. permanent markers)
- Camera to document the items
- Other incident specific requirements

3.11.5.5.2 Release of Personal Effects

All personal effects will be listed on "Personal Effects Release" (See <u>Attachment L</u>) form and signed and respective agency noted by person releasing effects and person receiving effects. The date and time of release will also by entered into the form.

Personal effects will be returned to family members as soon as possible unless unclaimed, then they must be retained for at least eighteen months.

3.11.5.5.3 Personal Effects Team Leader

The Personal Effects team leader will serve as the custodian of all personal effects processed through the morgue. Other responsibilities include:

- Working with Processing Group Supervisor to determine:
 - Documentation procedures
 - Packaging procedures
 - Transfer and storage protocol
- Coordinating with all stations in the morgue for personal effects collection
- Maintaining a supply of Personal Effects forms and other needed supplies
- Maintaining chain of custody of all personal effects
- Coordinating with Security for securing personal effects storage area

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- Preparing personal effects to be turned over to proper authorities
- Ensure all morgue/FBI (for criminal cases)/Airline protocols for personal effects are being followed

3.11.5.5.4 Personal Effects Team Member

Collects packages and labels all personal effects that are processed through the morgue. Other responsibilities include:

- Maintaining copies of Personal Effects forms
- Cleaning and straitening work area as needed
- Notifying Team Leader of issues related to personal effects activities
- Working with other morgue stations in the collection of personal effects

Utilizing the VIP Post Mortem forms, all personal effects will be noted in detail, a copy of the forms made with the original remaining with the post mortem files and a copy maintained by the Personal Effects Team.

3.11.5.6 Pathology

The pathologist will review radiographs, document clothing, personal effects and medical interventions. He or she will also document general physical characteristics and any scars, marks, tattoos, body piercings, contact lenses, or other unique identifiers that might aid in the identification of the victim. The pathologist will document the trauma, document and recover implanted medical devices and prostheses, collect appropriate toxicology samples, and complete an autopsy, if indicated. Associated personal effects will be cleaned of body fluids and placed in clear bags for easy identification. Each bag will be clearly labeled with the case number by the Personal Effects Team and stored in a secured area. Fingers, hands, feet, or bone fragments may only be removed at the direction of the State of Louisiana ESF-8 LDH, and must be properly documented and re-associated with the body.

Findings will be documented immediately following the examination of the body or specimen. The pathologist will complete "VIP Pathology forms 1-4" (See <u>Attachment M</u>) and record any additional comments on the "VIP Combined Narratives form 1" (See <u>Attachment Q</u>) portion of the morgue documentation; all entries shall be legible, each page shall be initialed and the final

page shall be signed and dated by the pathologist. The pathologist needs to sign the Track Form. Section 3: Morgue Operations – Page 36 of 77 January 2021


3.11.5.6.1 Autopsies

A complete autopsy shall be performed:

- At the discretion of the State of Louisiana ESF-8 LDH
- In accordance with National Association of Medical Examiner (NAME) standards (see http://thename.org/index.php?option=com_docman&task=doc_details&gid=18&Itemid =26).

3.11.5.6.2 Pathology Team Leader

Responsible for all Pathology unit activities including:

- Supervision of unit personnel
- Coordinating with Photography and Personal Effects team leaders
- Assisting in setting up the Pathology unit
- Developing criteria for autopsy
- Maintaining adequate unit supplies
- Ensuring morgue protocols are being followed

3.11.5.6.3 Pathologist

Responsibilities include:

- Assisting with Triage as necessary
- Performing detailed examinations of human remains and documenting all findings
- Assisting Photography and Personal Effects personnel as necessary

3.11.5.6.4 Diener

When needed, a Diener will assist the pathologists by:

- Helping to physically move the remains
- Opening cavities as directed by the pathologists
- Assisting in cleaning and disinfecting the pathology unit
- Serving as a scribe when needed.

3.11.5.6.5 Pathology Supplies and Equipment

- Anvil pruner
- Brass Bristle brush
- Forceps
 - Dura Stripper (8")
 - o Fixation (2-hole)
 - Str 8" and 10"
- Hammer with hook

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- Hemostat, straight jaw, heavy point (8")
- Large curved hook, aneurism
- Disposable autopsy knifes
- Lighted Magnifier
- Mallets (7.5" and 9.5")
- Ring cutter finger
- Ring/finger plastic sizers 1-15
- 12" Ruler
- Scalpels
 - o **#15**
 - o **#22**
 - Single use disposable #22
 - Scalpel handles #3 and #4, for use with blades #10-#15 and #20-#25
- Scalpel blade remover for lock-on handles
- Skull Breaker
- Scissors
 - Angular tissue cutting 5.5"
 - Paramedic angled
 - Utility with sharp points 6.5"
 - Utility with sharp/blunt points 5.5"
- Measuring Tape 25'
- Blood tubes
 - o Gray Cap 7-10ML
 - Purple Cap 7-10ML
 - Red Cap 7-10ML
 - Vacutainer tube, 10.0ml Glass serum tube with red stopper
 - o Vacutainer tube, 4.0ml whole blood tube with lavender stopper
 - o Vacutainer tube, gray top plastic 4ml with additives
- Cut Resistant underglove M,L, and XL
- Knife sharpener
- Plastic Specimen Gross cups
- Disposable Plastic Syringe, 60cc
- General use Syringe, 60ml
- Hypodermic needle
- Dissection Equipment
 - Stainless bucket (13 Qt)

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- Dissection Board 18"x24"x0.75"
- Head block
- Wire test tube rack
- Rib cutter, 33.5" lopping shears
- o Rulers, 36" aluminum
- Large Saw blade with Arbor
- Autopsy Saw (Mopec)
- Scale SVI-10A Acculab Bench

3.11.5.7 Fingerprints

Often, fingerprints are the most expeditious mean of identification. It is necessary to obtain the best print possible. This vital work requires the services of a competent identification specialist. A mistake in technique may damage or destroy the fragile fingerprints of a deceased person. The print shall be made from the dermis or epidermis layer of the skin. If the remains are in the advanced stages of decomposition, burned or dehydrated, the fingerprint specialist may want to remove appendages in order to obtain the best print. The removal of an appendage will only be performed with the permission of the State of Louisiana ESF-8 LDH and at a time that will not interfere with any other identification efforts. If an appendage is removed, it will be documented and placed with the remains at the conclusion of the print examination. All fingerprint examinations will be recorded on "VIP Fingerprinting form" (See <u>Attachment N</u>) and any additional comments on the "VIP Combined Narratives form 2." Fingerprint personnel need to sign the Tracking Form.

3.11.5.7.1 Fingerprint Team Leader

Is responsible for all activities related to the Fingerprint unit to include:

- Overseeing all activities in the Fingerprint unit
- Coordinating with Pathologists and State of Louisiana ESF 8 LDH in the removal of appendages
- Coordinating with FAC in obtaining Ante-Mortem fingerprints for comparison
- Maintaining all necessary equipment and supplies for unit
- Assisting in setting up Fingerprint unit as needed
- Ensuring morgue protocols are followed

3.11.5.7.2 Fingerprint Specialist

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- Obtain available prints from human remains
- Clean and disinfect work area as needed
- Document all work

3.11.5.7.3 Fingerprint Supplies and Equipment

- Powder brush
- Fingerprint Cards
- Fingerprint Hinge Lifter
- Latent Print Powder, Silk Black and Silver Grey
- Post-Mortem Card holders
- Penlight
- Forceps, Str 8"
- Magnifier 2.5" Hand
- Magnifier Desk Top fingerprint Loupe
- Porelon Pads
- Printing Ink 2oz Tubes, 60ml Tubes
- Glass Printing Plate
- Printing Roller 2", 4"
- Ring Cutter
- Scalpel
- Scalpels
 - o **#15**
 - o **#22**
 - Single use disposable #22
 - Scalpel handles #3 and #4, for use with blades #10-#15 and #20-#25
 - o Scalpel blade remover for lock-on handles
- Scissors
 - Angular tissue cutting 5.5"
 - Utility with sharp points 6.5"
 - Utility with sharp/blunt points 5.5"
- Syringe, 20cc (for tissue rehydration)
- Syringe, needles 20G 1" (for tissue rehydration)
- Measuring Tape
- Fingerprint Equipment
 - Acetate Sheets 25 Sheet Pad .003", 9" x 12"
 - o Finger Cards FBI Criminal Records Cards

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- Left and Right Hand Record Strip w/adhesive backs
- Personal Identification Fingerprint Cards
- Type III Post Mortem Fingerprint Identification Kit
- Fingerprint Lifting Tape (1.5" Transparent)
- Fingerprint Dusting Kit
- Fingerprint Lifting Tape Transparent Palm/Cluster
- Fingerprint Lifter 2"x2" White (Rubber Lift)
- Fingerprint Tape Dispenser
- Plumbers Putty
- Sheet Protectors
- Syringe with Needle (10cc 20G 1.5")

3.11.5.8 Odontology

The Dental section shall examine the craniofacial remains using one or more of the following techniques:

• Digital dental equipment

- Photographs
- Visual examination and charting
- Impressions (as deemed necessary)
- Craniofacial dissection (only with approval from the State of Louisiana ESF-8 LDH).

NOTE: No craniofacial dissection will be performed if adequate information can be obtained without dissection. Dissection will only be performed with the permission of the State of Louisiana ESF 8 LDH and at a time that will not interfere with any other identification efforts

There shall be a minimum of two forensic odontologists processing the human remains. The dental x-ray equipment typically requires one to handle equipment on the remains and the other at the computer reviewing digital x-rays as they are taken. Also, since there is a level of interpretation when charting, having two interpretations that are consistent tends to minimize the need for re-evaluation. Post-mortem dental findings will be recorded on forms specific to the dental-radiology equipment used in the temporary morgue. Dental personnel need to sign the Tracking Form.

3.11.5.8.1 Odontology Team Leader

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Responsible for all activities related to the Odontology unit including:

- Assisting in Triage as needed
- Assisting in setting up the odontology unit
- Maintaining all equipment and supplies for unit
- Ensure morgue protocols are being followed

3.11.5.8.2 Odontologist

Responsibilities include:

- Post mortem dental examinations
- Documenting all findings using the appropriate charting procedures. All documentation shall be legible, signed and dated.
- Assist in obtaining ante-mortem dental records (if needed)
- Determining if there are sufficient teeth for comparison

3.11.5.8.3 Dental Assistant

Responsibilities include:

- Assisting in maintaining records
- Assisting with making radiographs
- Cleaning Odontology unit
- Serving as scribe as needed
- Transcribing and recording ante mortem dental information into standardized formant and nomenclature (if needed)
- Scanning digital images such as radiographs and photographs into digital format

3.11.5.8.4 Odontology Supplies and Equipment

- Anvil Pruner
- Explorers, Dental (Single End)
- Penlight
- Forceps, Str 10" and 8"
- Hemostat, Straight Jaw, Heavy Point (8")
- Hook, Aneurism, Large Curved
- Hygenic Base Plate Wax M/S
- Hygenic Dental Utility Wax Strips
- Magnifier, Lighted (Folded, 2 x 2)
- Mirror
 - One Socket Mirror Handle

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- Fiberglass Front Surface
- Mouth Stainless
- Mouth Prop. "Molt" Style Large and Small
- Scalpels
 - o **#22**
 - Single use disposable #22
 - Scalpel handles #4, for use with blades #20-#25
 - Scalpel blade remover for lock-on handles
- Scissors
 - Angular tissue cutting 5.5"
 - Utility with sharp points 6.5"
 - Utility with sharp/blunt points 5.5"
- DEXIS Digital Dental X-ray Kit
- X-Ray NOMAD Dental Unit
- Applicators, Cotton Tip
- Long Handle Denture Brush
- Toothbrush
- Cork Head Ring
- Dissection Board 18" X 24"-3/4" THICK
- Dissection Board 12" X 12"
- Head Lamp (Magni-Focuser w/ light)
- Modeling Clay (5 lb.)
- Saw Blade, Large w/ Arbor
- Saw, Autopsy (Mopec)
- 33.5" Lopping Shears
- Lead X-Ray dental Apron and tubes for rolling storage
- Lead Dental X-Ray gloves
- X-Ray Dental View Box (6" x 14" Slim-line Viewer)

3.11.5.9 Anthropology

The Anthropology unit shall analyze X-rays and the remains to determine gender, age, ethnicity, stature and distinguishing characteristics. The examination may require the removal of tissue in order to study the bone surfaces. Anthropologists will record their findings on "VIP Anthropology forms 1 and 2" (See <u>Attachments O</u>) and any miscellaneous comments on the "VIP Combined Narratives form 1." Anthropologist needs to sign the Tracking Form.



3.11.5.9.1 Anthropology Team Leader

Is responsible for all activities related to the Anthropology unit including:

- Assisting in setting up the Anthropology unit
- Maintaining all necessary equipment and supplies
- Serving as the Triage Lead (if the remains are being triaged) and coordinating with other forensic units to support Triage as needed
- Ensuring morgue protocols are being followed

3.11.5.9.2 Anthropologist

Responsibilities include:

- Evaluating and documenting prosthetic devices
- Reviewing x-rays
- Documenting general physical characteristics of the individual to determine
 - o Gender
 - o Age
 - o Ethnicity
 - o Stature
 - Distinguishing characteristics
- Separate co-mingled remains to calculate the minimum number of individual victims, taking care to ensure the continuity of the numbering system
- Consult with pathology and DNA before microwaving, bleaching, boiling, or otherwise altering specimens.
- Sign their findings as transcribed.

3.11.5.9.3 Anthropology Scribe

Responsibilities include:

- Recording finding on Anthropology forms
- Handling radiographs and photographs for Anthropologist
- Keeping unit clean
- Transcribe the information dictated by the anthropologists
- Complete the anthropology log for each specimen
- Verify the morgue number on the specimen bag.

3.11.5.9.4 Anthropology Supplies and Equipment

- Anvil Pruner
- Brass Bristle Brush (toothbrush-like)
- Penlight flashlight

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- Forceps
 - Dura Stripper (8")
 - Fixation (2-hole)
 - Str 8" and 10"
- Large, curved aneurism hook
- Large boning knife
- Magnifier glasses (Visor Loupe-Headband Type)
- Lighted magnifier (Folded, 2 x 2)
- Rulers, 6", 12" and standard and metric photo tape w/ dispenser
- Scalpels
 - o **#15**
 - o **#22**
 - Single use disposable #22
 - Scalpel handles #3 and #4, for use with blades #10-#15 and #20-#25
- Scissors
 - Angular tissue cutting 5.5"
 - Utility with sharp points 6.5"
 - Utility with sharp/blunt points 5.5"
- 25' Steel Measuring Tape
- Toothbrushes hard, medium and soft bristles
- Linen measuring tape (metric)
- Anthropology reference material
 - o Iscan-Loth Age Determination
 - o Suchey-Brooks Female and Male Age Determination
- Anthropology sensitive instruments
 - Dial Sliding Calipers(6")
 - GPM Spreading Caliper 300mm and 600mm
 - Osteometric Filed w/ Case Board

3.11.5.10 DNA

DNA testing is a very powerful method of identification, and can be helpful in identifying bodies/body fragments and re-associating the remains. The DNA recovery team will examine the specimen to determine the best biological sample to be the sample. All samples collected and DNA collections should be in adherence with the AABB guidelines. See http://www.aabb.org/programs/disasterresponse/Pages/massfatality.aspx.



Blood sample may be the optimal specimen for bodies that are less than one day old (fresh). Alternatively, a buccal swab may also be taken if the body is fresh. If these samples are not available, deep red muscle can also be a good sample when bodies are fresh. Liver and spleen tissue is the least desirable sample. Bone is the preferred a sample from older remains. The State of Louisiana ESF 8 LDH shall consult with the organization that will be managing the DNA analysis prior to collecting DNA samples. If possible, two DNA samples will be taken from each human remain. When taking samples from long bones, care should be taken not to transect the bone. A "window" of bone shall be taken. The roots of teeth may also provide a good sample. DNA shall consult with anthropology and/or odontology is advisable prior to taking bone or teeth samples.

Human remains should come to the DNA Unit last. If the Tracking Form indicates that a station has been skipped, the escort should be directed to return the specimen and file to that station. Exceptions can be made for special treatment of the specimens by request from the interested agency.

The morgue number of the specimen is noted on the DNA Log, along with a YES or NO indication for sampling. If a sample is taken, the specimen is placed into a specimen tube that has been prelabeled, by hand (or with a computer generated label), with the testing laboratory number and the morgue number. The numbers should appear both on the tube and on the lid. Only one sample shall be collected from a set of human remains at one time.

If possible, a computer program for the collection of human remains shall be used to track the samples. The specimen shall be given to a second individual who will document the morgue number of the specimen, the type of material, and the exact nature of the specimen collected for DNA. The operator will generate labels—one for the specimen tube(s) and the second on the evidence bag—and inserts the labeled tube into the labeled bag. The bag will be heat-sealed and placed into cold storage (-20 degrees). Once a specimen is frozen, it should remain frozen until it is released to a DNA laboratory for analysis. There is a great diversity of capabilities among various federal, state and local laboratories that can do DNA testing. Using a laboratory with experience in reverse parentage statistical interpretations will be helpful in making Section 3: Morgue Operations – Page 46 of 77 January 2021



identifications. Any DNA specimens taken will be recorded on the "VIP DNA form" (See <u>Attachment P</u>) and any additional comments on the "VIP Combined Narratives form 2." DNA personnel will sign the Tracking Form.

3.11.5.10.1 DNA Team Leader

- Assisting in setting up the DNA unit
- Participating in the Sample collections as needed
- Maintaining all equipment and supplies
- Communicating with the Organization that will oversee the DNA operations
- Transferring the DNA Samples as appropriate to the DNA laboratory
- Ensuring morgue protocols are being followed

3.11.5.10.2 DNA Collector

- Collect sample
- Properly package, label and seal
- Document collection
- Store sample
- Release sample when necessary

3.11.5.10.3 DNA Supplies and Equipment

- Autoclave Sterilization Pouch Self Seal, size: 5.25 in. x10 in., 200/box
- Buccal Swab DNA collection kit
- DNA Bloodstain Card –FTA Classic Card (for whole blood and buccal cells/saliva)
- DNA Bloodstain Card Large Multi-barrier Pouch
- White Coin Envelope (2 1/2 x 4 1/4)#3
- Dissection Board 18" X 24"-3/4" /or sturdy kitchen cutting board
- Biohazard waste disposal bags
- Clorox Bleach spray bottle (not a 1/10 bleach solution should be made up fresh daily)
- Tamper evident tape
- Head Block (to rest Stryker saw)
- Pouch Sealer, With Cleaning Tool, 13 x 3 in.
- Pouch, Heat-Sealable, Polyester with Polyethylene Lining, 2.5mil, 4 oz., 4 x 6 in.
- Pouch, Heat-Sealable, Polyester with Polyethylene Lining, Regular, 16 oz., 6-1/2 x 8 in.
- Pouch, Heat-Sealable, Polyester with Polyethylene Lining, Regular, 32 oz., 8 x 12 in.
- Stryker saw
- Additional saw blades

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- Centrifuge 50ml Tubes (sterile and screw caps)
- Forceps Dissector (6.5")
- Small Biohazard Labels, 1" diameter
- Scalpels
 - o **#15**
 - o **#22**
 - Single use disposable #22
 - Scalpel handles #3 and #4, for use with blades #10-#15 and #20-#25

3.11.5.11 Final Processing

The final processing station is where the remains are prepared for transfer to the Remains Holding trailers. After post-mortem examinations are complete, the escort will return the morgue documentation to the Admitting clerk who will ensure that the documentation is complete and transferred to the Identification Team. Final Processing team personnel will place the remains in a new and or clean body bag, insure that both the bag and the remains are tagged with the correct MRN or Coroners number then turned over the remains to the Remains Holding staff. Final Processing personnel need to sign the Track Form.

NOTE: Prior to placing the remains into a body bag the Final Processing team should thoroughly check around and under the remains to insure that any equipment used in the post mortem examination has not inadvertently been left in the bag.

3.11.5.11.1 Final Processing Team Leader

The Final Processing Team Leader is responsible for all Final Processing unit activities including:

- Assisting in setting up Final Processing area
- Maintaining equipment and supplies
- Coordinating with Admitting and Remains Holding units
- Ensuring all morgue protocols are being followed

3.11.5.11.2 Final Processing Team Member

Responsibilities include:

- Placing human remains in new/clean body bag
- Insuring human remains and body bag are tagged with the correct MRN/Coroner's number

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- Working with Admitting Team to insure all documentation is complete
- Turning over human remains to Trailer Holding personnel



Sample Forms and Documents

- Attachment A: Tracking Form
- Attachment B: Decontamination Procedures for Aluminum Trailers
- Attachment C: VIP Site Recovery Form
- Attachment D: Receiving Trailer Log
- Attachment E: Remains Holding Trailer Log
- Attachment F: Remains Release Form
- Attachment G: Morgue Operations Log
- Attachment H: VIP Radiology
- Attachment I: Photography Log
- Attachment J: VIP Clothing/Personal Effects
- Attachment K: VIP Jewelry
- Attachment L: Personal Effects Release
- Attachment M: VIP Pathology
- Attachment N: Fingerprinting
- Attachment O: VIP Anthropology
- Attachment P: VIP DNA
- Attachment Q: VIP Combined Narratives



Morgue Operations: Attachment A

TRACKING FORM

		Tra	ackin	g Form	Incid Ir	ent ncident Date	
Site Reco	overy #			Date Received	d by Adr	mitting:	
Morque F	Reference No. M	IRN-00001		Date Process	ed In Mo	orgue:	
ME/C #					ort(s):		
IVIE/C #] 1.	Name	2	Name
Presum	ntive				Turne .		Name
ID:		ast Name		First		Middle	
	DOB		Sex		SSN		Suffix
Station L	eader MUST print and	sign their name below	when p	ocessing complet	ted. "No"	= nothing was perfo	ormed at station.
N	Norgue Station:	Prin	t Statio	on Leader's Na	ame	Station Leade	er's Signature
Triage	Admitting	OYes ONo					
O	Personal Effects	OYes ONo					
O	Photography	OYes ONo					
O	Radiology	OYes ONo					
O	Pathology	OYes ONo					
O	Anthropology	OYes ONo					
O	Dental Exam	OYes ONo					
O	Dental Photo	OYes ONo					
O	Dental Radiology	y OYes ONo				1	
O	Fingerprints	OYes ONo					
0000000000	DNA	OYes ONo					
O	Embalming	OYes ONo					
	Exit Morgue	OYes ONo				1	
Comments	From Site Recover	y Description of Rer	mains:				
							-
This Bag	Also Produced	Image	Invent	ory:		Also Included I	n This File:
Morgue F	Reference No's:	# Personal Effe		-	- 1		
-		# Body Radiog			-1-		
		# Pathology Se		hotos:			~
		# Dental Photo	s:]		
		# Dental Radio	graphs	:			
Bar	code Number:						



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Morgue Operations: Attachment B

DECONTAMINATION OF ALUMINUM FLOORED REFRIGERATED TRAILERS

Purpose

To render safe the aluminum floor of a refrigerated used to store dead human remains following a mass fatality event. This is done by physical and or chemical means to eliminate, inactivate or destroy blood-borne pathogens on the surface of the aluminum flooring so they can no longer transmit infectious particles.

Safety

Anyone performing this decontamination process will wear appropriate PPE to include:

- Full body hooded protective suit impervious to household bleach
- Respirator with canisters designed to protect against fumes from household bleach
- Eye protection
- Double gloves heavy pair of rubber gloves over first pair of latex gloves
- Non slip shoe covering

To prevent contamination, take closed any open place where gloves or shoe covering come in contact to the PPE body suit. All materials removed will be collected for proper biomedical waste disposal.

Decontamination Procedures

- **1.** Park trailer with front end (end with refrigerated unit) higher than rear end to allow for drainage
- **2.** Plastic sheeting (minimum 6mil in thickness) will be affixed at the rear opening of the trailer in the following way
 - 3 to 4 feet wider than the trailer on both sides
 - 3 to 4 feet under the end of the trailer
 - 12 to 14 feet from the rear of the trailer outward
 - All sides of the sheeting will be propped up on the ends to create a reservoir
- **3.** Sweep trailer out completely with dry broom (push broom or other). Collect all contaminates swept up into a pile either in the trailer or on the plastic sheeting outside the trailer and place in biomedical waste container.
- **4.** Mix solution of 5.25% household bleach to 1.10 water in a low pressure sprayer (e.g. garden sprayer)



- 5. Completely spray the entire interior of trailer with bleach solution including the rear doors. Begin at the front (refrigerated unit end of trailer) moving towards the rear of the trailer
- **6.** With the refrigerated unit running, the intake opening will be sprayed to allow solution to decontaminate the refrigerated system
- **7.** Allow bleach solution to soak for 15 to 20 minutes (longer soaking period is acceptable when necessary)
- **8.** Using a 1500 psi pressure washer, the trailer will be used to spray the trailer again starting with the front and moving towards the rear spraying the ceiling, walls and floor of the trailer.
- **9.** As needed, using a brush or other cleaning implement may be needed to remove heavily soiled stains from the trailer
- **10.** ALL waste water will be contained and disposed of using the proper liquid biomedical disposal process
- **11.** Apply a lighter coating of the bleach solution to the entire interior of the trailer once again using the low pressure sprayer.
- **12.** Allow the trailer to dry until the bleach odor has dissipated
- **13.** As a last step, turn on the refrigeration unit and again spray several light mists of bleach solution directly into the intake opening and allow unit to run at least 10 minutes before shutting off.
- **14.** Once all waste material (solid and liquid) has been properly disposed of the plastic sheeting, PPE, brooms and other equipment used to decontaminate the trailer(s) will be collected and disposed of as well.



Morgue Operations: Attachment C

VIP VICTIM SITE RECOVERY FORM

Site Recovery #		VIP/DMORT	li	ncident	
Put N/A in all unused	fields.	Victim Site Recovery	Form M	Incident Da Iorgue Reference	
Date:	Description of R Recovery Grid #	emanis:	PS of Recove	ry:	
Time: 24 hour (00:00) Condition: select all that apply					
Autopsied Previously Burned-Partial Thickness Burned-Full Thickness Cremains Decomposed	Fragmented	Scavenged Skin Slippage Skeletonized-Partia Skeletonized-Full Wet-Environmental		on Remains Fou	nd In:
		ent OYoung Adult		ged 🔘 Elderly	○ No Estimate
	⊖Female ⊖No	t Assessed Estim	ated Race:		
Clothing on Remains: (brief description)					
Personal Effects on Remains: (brief description) Yes No					
Other PE with Remains (specify + describe)					
Medical Records Recovery Recovery Comments:	ed: 🔘 Yes 🔵 No				
Presumptive FIELD ID:	Last	First		iddle	# Photos Photo File Name:
ID Based On:	B (MM/DD/YYYY)	SSN	ID# / Drivers lic	cense # / State	
Found By:	- Annen (1 - P - S		Dhana #		
Reported By:	d Agency (if applies)		Phone #	Date Fou	
Name an Reported To:	d Agency (if applies)	١٢	Phone #	Date Repo	rted Time Reported
	d Agency (if applies)] [Phone #		
Recovered by: Age Team Leader:	ency			Phone #	
Members:					
Barcode #			Place	Barcode Stick	er Here



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Morgue Operations: Attachment D

RECEIVING TRAILER LOG

Trailer #_____

1	2	3	4
5	6	7	8
9	10	11	12
13	14	15	16
17	18	19	20
21	22	23	24
25	26	27	28

Location	Recovery #	Date In	Date Out	Released to

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1		
2		
3		
-		
4		
5		
6		
7		
8		
9		
10		
11		
12		
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14		
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18		
19		
20		
21		
22		
23		
24		
25		
26		
27		
28		



Morgue Operations: Attachment E

REMAINS HOLDING TRAILER LOG

Trailer #_____

1	2	3
4	5	6
7	8	9
10	11	12
13	14	15
16	17	18
19	20	21

L	ocation	MRN #	Date In	Date Out	Released to
---	---------	-------	---------	----------	-------------

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1		
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17		
18		
19		
20		
21		



Morgue Operations: Attachment F

REMAINS RELEASE FORM

		NRM#	
Date:		Time:	
	FUNERAL HOME		
Funeral Home:			
	(Name of funeral home)		
Address and Phone:			
	(Funeral home address)		
Representative:		Phone #	
	(Name of FH representative)		(Representatives phone #)

	Place ID he	re and copy form		
eleased by:	(Name)	Agency:	(Agency's name)	
Comments:	(Name)			



Morgue Operations: Attachment G

MORGUE OPERATIONS LOG

This log shall be completed to track human remains in the morgue.

MRN Number	Admitting Section Clerk	Date & Time Admission	Body Escort Name	Destination of Remains

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Morgue Operations: Attachment H

VIP	RADI	OLO	GΥ
-----	------	-----	----

Exam Date:	VIP/DMORT Radiology 1. Page 1 of 2	Incident Incident Date Morgue Reference No.	MRN-00001					
This is Inital X-ray Exam: 🔘	This is a S	Secondary X-ray Exam:	0					
Number of Initial Radiographs:	Number of	f Additional Radiographs:						
Radiology Technologist(s): Name and R	Radiology Technologist(s): Name and Region (list all who worked on THIS case):							
Reason for Additional X-rays:								
Pacemaker Present: OYes ONo In Notable Findings Per Technologist:	nplants Present: [O Yes ONo						
Technologist notified f Name of Forensic Scientist	following person of Morgue Sect							



VIP/DMORT Incident Radiology 2. Incident Date Page 2 of 2 Morgue Reference No.	N-00001
Page 2 of 2 Marrie Petersna No. MP	1-00001
Date of Assessment: Page 2 01 2 Morgue Reference No MRI	V-00001
	1-00001
Assessment Done By: Name and Region	
Type of Forensic Specialist:	Dontist
	Jenusi
Estimated Sex: OMale Female Not Assessed	
Estimated Age: 0-2 06-10 021-30 41-50 71+ 03-5 011-20 031-40 51-70	
Specific Findings: # Location: Side: Type: Detailed Description:	
# Location: Side: Type: Detailed Description: 1	
7	
9	
13	
Comments:	



Morgue Operations: Attachment I

PHOTOGRAPHY LOG

				PICTURE	
DATE	PICTURE #	MRN	DATE	#	MRN

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Morgue Operations: Attachment J

VIP CLOTHING/PERSONAL EFFECTS

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1	Photographer:		VIP/	DMORT	Incident	
	Person(s) Doin		and the second sec	ersonal Effect	s Incident Date	
	Exam Date:			Morg	ue Reference No.	MRN-00001
			CLOTHING	INVENTORY:		
#	Clothing Item	Color	Description	Size	Unique Features	Photo Taken?
1						Yes No
2						Yes No
2						
3						Yes □ No
4						Yes No
5		1		1	1	
						☐ 100 ☐ 110 ▼
Any	thing Handwritten	On Clothing	Or Tags? (location an	d description)		
					7	
	ociated Personal E					1
Per	(select all that ap		Pack Fanny F	Pack Wallet	pecify	
	(001001 011 0101 010		Purse Purse			
Des	scription					
	f Item(s):					
Mon	etary Items: (cash	, coin, travele	ers checks, foreign m	oney)	Photo Ta	aken? OYes ONo
Iden	tification Sources	(credit cards	s, checkbook, ld's, me	dical / Ins cards et	Photo Tr	ken? () Yes () No
Tuch	aneation cources.	(create cara.	s, checkbook, la s, lik			
Una	ssociated Persona	I Effects (fou	nd with / near but not	on the body): OY	es ONo Photo Ta	aken? () Yes () No
(list	type, quantity and	description)				
Othe	er Personal Effects					
-						
-						
	Total Number	of Photos Ta	aken:	Photo File Nam	e:	



Morgue Operations: Attachment K

VIP/DMORT Incident **Incident Date** Jewelry Scribe Morgue Reference No. **MRN-00001** Exam Date: **Jewelry Inventory** W Туре **Band Material** A Make Face Color Inscription Description T Photo taken: Yes No Photo taken: Yes No C H J **Material Color** Jewelry/Type # E Stone Color Size Style Description Inscription W Photo taken: Yes No Photo taken: Yes No -1 E L Photo taken: Yes No Photo taken: Yes No 2 R 17 Photo taken: Yes No Photo taken: Yes No 3 Photo taken: Yes No Photo taken: Yes No 4 Photo taken: Yes No Photo taken: Yes No 5 Photo taken: Yes No Photo taken: Yes No 6 Photo taken: Yes No Photo taken: Yes No 7 Photo taken: Yes No Photo taken: 🔲 Yes 🔲 No 8 Photo taken: Yes No Photo taken: Yes No 9 -Photographer: Person(s) Doing Inventory Total Number of Photos Taken: **Photo File Name:** Use this Space for Additional Info Regarding Jewelry:

VIP JEWELRY

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Morgue Operations: Attachment L

PERSONAL EFFECTS RELEASE

MRN-	Date-	Time-
Temporary disposition-		

(e.g., Morgue, Police Dept., ME/Coroner's office)

No.	Description

The above listed items are release by:				
(Print name)	(Signature)	(Date and Time)		
Released by:				
Agency:				

(Print name)

(Date and Time)

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Released by:	
Agency:	

Morgue Operations: Attachment M

VIP PATHOLOGY



Examining Pathologist & Region	VIP/DMORT Incident				
	Pathology 1. Incident Date				
Scribe	Page 1 of 4				
Exam Date:	Morgue Reference No. MRN-00001				
Sex: OMale OUndetermined Estim	ated Age: 0-2 6-10 21-30 41-50 71+ 3-5 11-20 31-40 51-70				
Estimated Race: Caucasian Asian	 ◯ Hispanic ◯ Other - specify In Indian ◯ Unknown 				
Build Small/Gracile Large/Rob Medium/Intermediate Undeterm					
Condition of Remains: check all that					
Condition of Remains: check all that apply Autopsied Previously Saponified Burned-Partial Thickness Scavenged Burned-Full Thickness Skin Slippage Cremains Skeletonized-Partial Decomposed Skeletonized-Partial Embalmed Wet-Environmental Fragmented Jaw/Face Only Fresh Jaw/Face Only Mummified Fingers, Toes					
Height cm: inches:	Estimated Weight kg: Ibs:				
H a Color: OAuburn OBlonde OGra Black Brown ORe					
i Length: Short Medium Lor	If measured: cm Shaved Male Pattern Baldness Bald Undetermined				
Description: OCurly OWavy OS	Straight ON/A OOther - specify				
Accessory: O Extension O Hair Piece	⊖Hair Transplant ⊖Wig ⊖Other - Specify				
Facial Hair:					
Facial Hair OAuburn Blond Ora Color: Black Brown Rec					
	Beard & Moustache Goatee Sideburns Other - specify Beard Stubble Lower Lip				
	Hazel Other - specify Indetermined				
e S Condition: Both Intact Missing-Right Glass-Right Cataract-Right Missing-Left Glass-Left Cataract-Left Other - specify					
Aids: None Glasses Co	orneal Implant-Left Dther - specify orneal Implant-Right				
T Teeth Present: Yes Dentures:	Yes Upper Engraved/Labeled No Lower Engraved/Labeled				
e t h Appliance: Yes No Type and locat					



	Examining	Pathologist & Region	VIP/DMORT	Incident				
			Pathology 2.	Incident Date				
	Scribe		Page 2 of 4	Margua Pafaranaa Na	MRN-00001			
	Exam Date	e:		Morgue Reference No.	MIRN-00001			
N	Fingernails	s Type ONatural OA	rtificial ONot known	Color				
a		Extra Long 🔿 Long 🔿 N	Nedium OShort D	escription				
i	Characteris	stics 🔘 Bitten 🔘 Decor	ated OMisshapen	○ NA ○ Other - Specify				
l s	I Teensile Celer Description							
3			Bitten OMissha Decorated OYellow/					
Exte	ernal Geni	talia: (check all that apply)						
Fe	male	Circumcision Undeterr	nined Neither Tes	ticle Decended				
Ma		Both Testicles Decend		ble External Genitalia				
	rcumcised	Right Testicle Decende						
		Left Testicle Decended						
EVIG	(check all that	sible Surgery: As Indic		Other Surgeries here:				
	mputation		ther - Specify	Other Surgenes here.				
B		Mastectomy						
	aesarean	Reconstructive						
	ardiac	Tracheotomy						
Scal	rs, Amputati	on, Birth Marks, Defor	mities:					
#	Category	Location	Side Descripti	on				
1	Scars:		[[]		<u>^</u>			
	Amputation:							
	Birth Mark:							
	Deformity:							
2	Scars:							
	Amputation:							
	Birth Mark:							
	Deformity:							
3	Scars:							
	Amputation:							
	Birth Mark:							
	Deformity:							
4	Scars:							
	Amputation:							
	Birth Mark:							
	Deformity:							
5	Scars:							
	Amputation:							
	Birth Mark:							
	Deformity:				-			



Examining Pathologist & Region					ncident Incident Date						
Scribe			Patholo Page 3			Inc	ident	Date			
Exam Date:			Fage 5	014	Morg	ue Refe	erenc	e No.	MRN-0	0001	
Tat	Tattoo(s) and Body Piercing(s)			Tattoo(s)	⊖Yes	ONo	OUnkr		Photos	OYes	⊖No
	a sector and a sec	ides ear lobes):	and the second second			ONo	OUnkr	nown	Photos	OYes	ONo
#	Category	Location	Side	Desc	ription						_
1	Tattoo		<u> </u>								Ē
	Piercing										
2	Tattoo										
	Piercing										
3	Tattoo										
	Piercing										
4	Tattoo	, 	<u> </u>								
	Piercing										
6	Tattoo										
	Piercing										
6	Tattoo										
	Piercing										-
		S Present: O Yes ONE per sectio		Locatio	on & Re	emoval	Desc	ripti	on & Pho	oto	
1	Wallet	Backpack			Body - S	Specify					-
	Jewelry	⊖ Fanny Pa	ack				<u> </u>				
	Clothing		3	Oln C	lothing	- Specif	fy				
	O Money C	Clip Other - S	pecify	Remove	d From B	ody/Clothe					
	O Coin Pu	rse			Yes 🔘		Ph	oto T	aken 🔘	Yes 🔘	No
2	O Wallet	O Backpack			Body - S	Specify					
	O Jewelry	O Fanny Pa			a the loss of	Creati	_				
	OID Brace	elet OPurse			louning	- Specif					
	O Money C		pecify	Remove	d From B	ody/Clothe	es Dh	oto T	akan 🔘	Yes 〇	No
						No	- FU			Tes ()	
3	○ Wallet ○ Jewelry	 Backpack Fanny Pa 		On E	Body - S	Specify					
	Clothing				lothing	- Specif	fv				
	OID Brace		pocific		Ŭ		Í —				
	Coin Pul		pecity			ody/Clothe	Ph	oto T	aken 🔘	Yes 🔘	No
		- Teker			_						
1	Total # Photos Taken Photo File Name										



	Examining Pathologist & Region			VIP/DMORT		Incident Incident Date	
	Scribe Exam Date:		Pa	age 4 of	4	Morgue Reference No.	MRN-00001
	Exam Date:	Familian Ohi	a ata / lavalanta	(Decetter	tion (Outle an adian	-	
Foreig	gn Object Present: O Yes O No	Removed from	ects / Implants	/ Prostne	tics / Orthopedics	in Body	
#	Туре:	Body:	Location:	Side:	Description:		Photo:
1	Prosthetic Other - Specify	O Yes					O Yes ○ No
2	□ Pacemaker □ Prosthetic □ Other - Specify	O Yes No					O Yes No
3	□ Pacemaker □ Prosthetic □ Other - Specify	O Yes					O Yes No
4	Other - Specify	O Yes					O Yes
5	Other - Specify	O Yes					O Yes
6	Other - Specify	O Yes					O Yes No
7	□ Pacemaker □ Prosthetic □ Other - Specify	O Yes					O Yes
8	Other - Specify	O Yes					O Yes No
9	Pacemaker Other - Specify	O Yes No					O Yes ○ No
	y Diagram Used <u>Yes No</u> F ology Narrative:	eferred for A	Autopsy 🖸 Yes	<u>_</u> № То	tal # of Photos Ta	ken Photo File Name	•



Morgue Operations: Attachment N

VIP FINGERPRINTING

	VIP/DMORT	Incident		
	Fingerprinting	Incident Date		
Date of Exam:		Morgue Reference No.	MRN-00001	
Examiner 1:	Examine	r 2:		
Name Printed and Agenc	у	Name Printed and	Agency	
Condition of Hands: (burned, decompose	d, skeletonized, scaven	ged, etc.)		
Condition of Right Hand:		Condition of Left Hand:		
Fingers O Yes If not printed Printed O No why?				
(Check all fingers printed below)		and Describe Oradition	(Allowed and	
Right Hand Describe Condition if Nee		mb 6	n IT Needed:	
☐ Index 2 ☐ Middle 3		x 7		
Fourth 4	- Fou	rth 9		
Little 5				
Right Palm Printed: <u>Yes</u> No Le	ft Palm Printed:	Yes ONo		
Footprints Taken: Right Foot OYes	ONo Left Foot	⊖Yes ⊖No		
Condition of Feet:				
Fingerprint Exam Notes:				



Morgue Operations: Attachment O

VIP ANTHROPOLOGY

Examining Anthropologist & Region	VIP/D	MORT	Incident			
		oology 1.	Incident Date			
Scribe Exam Date: <u>8/5/2010</u>	Page	1 of 2 M	orgue Reference No.	MRN-00001		
Estimated Age Lower Age Range Upper Age Rang	ge	☐ Male ☐ Female	Estimated Sex Male possible Female possible	Unknown		
Co	ndition o	f Remains:				
Autopsied PreviouslyEmbalmedBurned-Partial ThicknessFragmentedBurned-Full ThicknessFreshCremainsMummifiedDecomposedSaponified	Autopsied Previously Embalmed Scavenged Burned-Partial Thickness Fragmented Skin Slippage Burned-Full Thickness Fresh Skeletonized-Partial Cremains Mummified Skeletonized-Full					
Skeletal Race:		Skele	tal Build: E	stimated Stature		
Caucasoid American Indian Other - Spe Negroid Hispanic Asian Unknown	Ň	Small/Gracile Medium/Intermec .arge/Robust	⊖ Undetermined liate	(cm) (in)		
	Missing	Parts				
Cranium Partial R Upper Arm Partial Cranium R Forearm Mandible Partial R Forearm Partial Mandible R Hand Torso Partial R Hand Partial Torso L Upper Arm Unique Skeletal Features (Partial Cranium Partial R Upper Arm Cranium Partial R Upper Arm Dartial Cranium Partial R Upper Arm Partial Cranium Partial R Forearm Partial Torso Partial R Forearm Partial Mandible Partial R Hand Partial Torso Partial R Hand Partial Torso L Upper Arm		Pa prearm Pa and Pa and L L g Pa pper Leg L L Healed Traum Partia arm R Foc Partia arm Partia artia c L Upp Partia c L Upp Partia c L Upp Partia c L Upp C Partia c L L Opp C Partia c L D Dpp C Partia c Partia c C Partia	ttial R Lower Leg L Foot oot Partia trial R Foot pper Leg trial L Upper Leg ower Leg ta, Unique Identifiers, I R Lower Leg L Foot t Partial L I R Foot ver Leg I L Toot J R Foot ver Leg I L Upper Leg	Etc.)		
Unique Skeletal Features: (include location, type and description)						



Anthropology 2. Incident Date Scribe Exam Date: 8/6/2010 Evidence of Ante Mortem Fractures (Old Fractures) O Yes O No Skeletal Trauma: (include location, type and description) Race / Ancestry Based On: Age Based On: Stature Based On: (include measurements)	Examining Anthropologist & Region	VIP/DMORT	Incident						
Scribe Page 2 of 2 Morgue Reference No. MRN-00001 Evidence of Ante Mortem Fractures (Old Fractures) O Yes O No									
Exam Date: 8/6/2010 Intervention Evidence of Ante Mortem Fractures (Old Fractures) O Yes No Skeletal Trauma: (include location, type and description)	Scribe	Deve 0 of 0							
Evidence of Ante Mortem Fractures (Old Fractures) O Yes O No Skeletal Trauma: (include location, type and description) Race / Ancestry Based On: Age Based On: Stature Based On: (include measurements)		Page 2 of 2	Morgue Reference No.	MRN-00001					
Skeletal Trauma: (include location, type and description) Skeletal Trauma: (include location, type and description) Race / Ancestry Based On: Age Based On: Stature Based On: (include measurements)									
Race / Ancestry Based On: Age Based On: Stature Based On: (include measurements)	Evidence of Ante Mortem Fractures (Old Fractures) () Yes () No								
Race / Ancestry Based On: Age Based On: Stature Based On: (include measurements)									
Race / Ancestry Based On: Age Based On: Age Based On: Stature Based On: (include measurements)									
Race / Ancestry Based On: Age Based On: Age Based On: Stature Based On: (include measurements)									
Age Based On: Age Based On: Stature Based On: (include measurements)	Skeletal Trauma: (include location, type a	ind description)							
Age Based On: Age Based On: Stature Based On: (include measurements)									
Age Based On: Age Based On: Stature Based On: (include measurements)									
Age Based On: Age Based On: Stature Based On: (include measurements)									
Age Based On: Age Based On: Stature Based On: (include measurements)									
Age Based On: Age Based On: Stature Based On: (include measurements)									
Age Based On: Age Based On: Stature Based On: (include measurements)	Race / Ancestry Based On:								
Stature Based On: (include measurements)	Rave / Anvestry Based On.								
Stature Based On: (include measurements)									
Stature Based On: (include measurements)									
Stature Based On: (include measurements)									
Stature Based On: (include measurements)	Age Based On:								
	Stature Based On: (include measurement	ts)							
Anthropology Dental Comments:	•								
Anthropology Dental Comments:									
Anthropology Dental Comments:									
	Anthropology Dontol Comments:								
	Anthropology Dental Comments.								
Anthropology Miscellaneous Comments:	Anthropology Miscollanoous Commo	nte							
	Ananopology miscellaneous comme	11.5.							



Morgue Operations: Attachment P

VIP DNA

		VIP/DMORT	Incident	
LISA ID #		DNA	Incident Date	
Exam Date:			Morgue Reference No.	MRN-00001
Examiner 1: (Name and Ag	ency / Region)			
Examiner 2: (Name and Ag				
DNA Specimen Take			emains Taken ns less than complete body)	○ Yes ○ No
If no DNA Specimen tak	en, why?			
Specimen Taken:				
Type: Side:	Description:		Size of Specimen:	
Bone1 Bone2				
Muscle1				
Muscle2				
☐ Organ1 ☐ Organ2				
Tooth1				
Tooth2				
	Pla	ace label here		
	AF	IP / AFDIL lab	el:	
DNA Notes:				



Morgue Operations: Attachment Q

VIP COMBINED NARRATIVES

	VIP/DMORT	Incident	
	Combined Narratives		
		Incident Date	
	Page 1 of 2	Norgue Reference No.	MRN-00001
Comments from Tracking Form			
· · · · · · · · · · · · · · · · · · ·			
Comments from Pathology Exam			
·			
Anthropology Unique Skeletal Feat	Ires		
Anthropology onique okcietari eat	4165		
[
8			
2			<u>/</u>
Anthropology Miscellaneous Com	nents		



·	VIP/DMORT	Incident	
	Combined Narratives		
		mondent bate	
	Page 2 of 2	lorgue Reference No.	MRN-00001
		-	
Radiology Notable Findings			
L			
Radiology Assessment Comments			
Site Recovery Recovery Comments			
Site Recovery Recovery Comments			
L			
DNA Notes			
Fingerprint Exam Notes			