

Inspections and Accreditation

Consent for Inspection And Office Survey Information

In addition to the Inspection and Accreditation Checklist, the following items are included in this document, and completion is required:

- Consent for Inspection
- Contact Sheet
- Office Description
- Facility Information
- Annual Statistics
- Staffing Information

Furthermore it is necessary to submit copies of all written standard operating procedures (checklist below) that are required as checklist items.		
☐ 1H.1 Does the office have a written and implemented policy or standard operating procedure, signed within the last two years covering facility maintenance? Phase II Deficiency		
☐ 1I.1 Does the office have a written and implemented policy or standard operating procedure, signed within the last two years covering facility security? Phase II Deficiency		
2.1 Does the office have a written and implemented policy or standard operating procedure, signed within the last two years addressing safety, that comports with federal and state regulations with regard to injury and illness prevention, repetitive motion injuries, and biohazard and chemical exposure? Phase II Deficiency		
2.3 Are safety policies and procedures written and posted or readily accessible? Phase II Deficiency		
2.4 Is a written blood-borne pathogen control program in place? Phase II Deficiency		
□ 3.1 Does the office have a written and implemented policy, signed within the last two years covering personnel issues? Phase II Deficiency		
☐ 3.2 Are there written and implemented procedures for discipline and removal of staff for cause? Phase II Deficiency		
□ 3D.1 Are there written and implemented qualifications established for medical investigators? Phase II Deficiency		
☐ 3E.1 Does the office have written and implemented policies for the qualifications and training necessary for all technical staff (e.g. histotechnologists, radiology technicians, etc.)? Phase I Deficiency		
U 4.1 Does the office have a written and implemented policy or standard operating procedure, signed within the last two years covering case notification, acceptance of, and declining of cases? Phase II Deficiency		
4.11 Is there a written and implemented procedure in place to assure the release of the correct body and personal effects to the funeral home? Phase II Deficiency		
5.1 Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, covering office investigations, that addresses activities and responsibilities in the office and at death scenes? Phase II Deficiency		
5.2 Is there a written and implemented office policy requiring a medical examiner or investigator to obtain the initial history of the fatal event, ascertain the essential facts and circumstances, elicit any pertinent medical history, and make a record of the names and addresses of any witnesses? Phase II Deficiency		
□ 5A.1 Is there a written and implemented policy identifying which cases require scene investigations? Phase II Deficiency		
☐ 6.1 Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, covering body transportation and handling? Phase II Deficiency		
7.1 Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, covering postmortem examination procedures? Phase II Deficiency		
7.2 Is there written documentation of a physical examination of the decedent's unclothed body prepared for every decedent whose body is examined? Phase II Deficiency		

Furthermore it is necessary to submit copies of all written standard operating procedures (checklist below) that are required as checklist items.		
7.3 Is there a written and implemented policy which specifies the criteria for the determination of when complete autopsies, partial autopsies, or external examinations are to be performed? Phase I Deficiency		
7.14 Is there a written and implemented office policy which defines when radiographic examinations are to be performed? Phase I Deficiency		
7.15 Is there a written and implemented office policy that defines when ancillary tests or procedures are to be undertaken, (e.g., outlining when histologic, toxicologic, microbiologic, biochemical, genetic [including DNA], anthropological, and odontologic specimen collection, testing, or consultation is to be done or sought)? Phase I Deficiency		
7.16 Does the office have a written policy or standard operating procedure, implemented and signed within the last two years, covering the retention and disposition of organ and tissue specimens taken at autopsy, that addresses whether, or under what circumstances, next-of-kin are to be notified of each retention or disposition? Phase II Deficiency		
8.1 Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, covering identification procedures? Phase II Deficiency		
9.1 Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, covering evidence collection? Phase II Deficiency		
9.2 Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, covering tissue and body fluid specimen collection? Phase II Deficiency		
9.3 Does the office have a written and implemented policy or standard operating procedure, signed within the last two years covering evidence and specimen disposition and destruction? Phase II Deficiency		
9A.1 Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, for the collection of toxicology specimens? Phase II Deficiency		
9B.2 Is it the written and implemented policy of the office to take charge of the body, the clothing on the body, and any evidence on the body which may aid in determining the identification of the deceased and the cause and manner of death? Phase II Deficiency		
10.1 Does the office have written and implemented policies or standard operating procedures, signed within the		
last two years, covering each of the below (A-H) support services including toxicology, radiology, histology, forensic sciences, and criminalistics? Phase I Deficiency		
10B.3 Is a written schedule of exposures (i.e., an x-ray "technique" chart) on hand, or is there an alternative system in place so as to ensure proper x-ray film exposures? Phase I Deficiency		
10C.8 Is a written list/catalog of histology sections taken, designating the organ or anatomic site from which the section was obtained, made for each autopsy that includes histology? Phase I Deficiency		
10D.5 Are tests performed according to written standard operating procedures? Phase II Deficiency		
11.1 Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, covering reports and records keeping? Phase II Deficiency		
☐ 11F.5 Do written and implemented guidelines detail the archiving and destruction times for all records? Phase I Deficiency		

where,	11F.6 Does the office have a written and implemented policy or standard method for filing, to include how, and which records are stored? Phase I Deficiency
	11G.2 Is there a written and implemented procedure regarding distribution of records and information? Phase I next
	11G.4 Does the office have a written and implemented policy regarding media contact? Phase I Deficiency
ast two	*11H.1 Does the office have a written and implemented policy or standard operating, procedure signed within the years covering organ and tissue donation? Phase II Deficiency
	12.1 Does the office have a written and implemented mass disaster (multiple fatality) plan, signed within the last rs, that includes consideration of weapons of mass, destruction protective clothing and equipment, body handling mination and disposal, and which mandates appropriate preparatory staff training? Phase II Deficiency
ast two	13.1 Does the office have a written and implemented policy or standard operating procedure, signed within the years, covering quality assurance? Phase II Deficiency
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CONSENT FOR INSPECTION

The (office/system) hereby gives its consent for review of its records, procedures, and facilities by the National Association of Medical Examiners (NAME) for purposes of inspection and accreditation.
Confidential information may be reviewed in the process and will be kept confidential by NAME staff and Inspectors.
Information gathered during the inspection and accreditation process may be used for statistical summary proposes and may be made public.
The office/system hereby agrees to abide by and be bound by the policies and procedures for inspection and accreditation of NAME as declared in the NAME Bylaws and the NAME Inspection and Accreditation Policies and Procedures Manual.
signature:
print:Chief Medical Examiner
 Date

NAME ACCREDITATION SURVEY

CONTACT SHEET

Jurisdiction:				
Chief Medical Examiner:				
Address:				
phone number:				
email address:				
FAX number:				
TAX Hamber				
Contact Person for Inspection and Accreditation:				
Date of Last Inspection:				
Send Letters of Congratulations to:				

OFFICE DESCRIPTION

Classification:	city
	county
	<pre> multi-county state</pre>
	state other(describe):
Organization struc	cture:
	report to:
	county commissioners
	state governor
	police dept/public safety
	attorney general's office
	health department
	forensic science department
	stand alone governing board
	other (describe):
	Other (describe).
Population served	: residents
Geographic area se	erved: sq miles
W	14-1-1 4- 4
Year Office estab.	lished in its current form:
Budget: \$	M
	· <u> </u>
Tax contribution	(per capita): \$
Other sources of	revenue or funding (list separately)
Enclose copies of	the office's budget covering the past three fiscal years.
_	
Number of years (total) previously NAME accredited:

FACILITIES

Age of building: yrs
Do you anticipate a new building or significant remodeling within the next 5 yrs? $$ Y $/$ N
Please describe:
Size of facility: sq ft
Is this adequate? Y / N If not, provide estimate of total space needed? sq ft
Size of autopsy suite: sq ft
Is this adequate? Y / N If not, provide estimate of total space needed? sq ft
Number of autopsy tables:
Is this adequate? Y / N If not, provide estimate of total number of tables needed?
Ancillary/satellite offices:
Ancillary/sacerifice Offices:
Support Services:
ME Office Other (specify location) (Check)
Toxicology lab:
Radiologic facilities:
Histology facilities:Forensic sciences lab:
Darkroom facilities:
Forensic dentistry:Forensic anthropology:
Forensic entomology:

Is the office responsible for body transport, either by actually transporting the bodies or paying for delivery services? all/some/none $\frac{1}{2}$

ANNUAL STATISTICS: Year from which data below (annual totals) were derived:				
	Number			
Deaths in jurisdiction: (all deaths including non ME/C cases)				
Deaths reported to the office: Deaths investigated(certified): Scenes investigated by ME/C staff: Bodies brought to the facility Bodies transported to the facility which were paid for by or transported by the ME/C	(% of deaths certified by this ME/C office)			
Inspections: Autopsies performed: Partial autopsies:	<pre>(% of deaths certified by this ME/C office) (% of deaths certified by this ME/C office) (% of all autopsies performed)</pre>			
Microscopic studies Formal Neuropathologic studies Formal Cardiac pathologic studies	<pre>(% of all autopsies performed) (% of all autopsies performed) (% of all autopsies performed)</pre>			
Autopsies performed for outside jurisdictions:	(% of all autopsies performed)			
Deaths certified as homicide: Homicides autopsied:	(% of deaths certified by this ME/C office) (% of all autopsies performed)			
Deaths certified as suicide: Suicides autopsied:	(% of deaths certified by this ME/C office) (% of all autopsies performed)			
Non MVA-Accident deaths certified Non MVA-Accidents autopsied:	(% of deaths certified by this ME/C office) (% of all autopsies performed)			
MVA Accidental deaths certified MVA-Accidents autopsied:	(% of deaths certified by this ME/C office) % of all autopsies performed)			
Deaths certified as natural: Naturals autopsied:	(% of deaths certified by this ME/C office) (% of all autopsies performed)			
Deaths certified as undetermined or unclassified: Undetermined autopsied:	(% of deaths certified by this ME/C Office) (% of all autopsies performed)			
Unidentified bodies: Unidentified bodies autopsied	(% of deaths certified by this office) (% of all autopsies performed)			
Organ donations:	(% of all autopsies performed)			
Corneal and other tissue donations:	(% of all autopsies performed)			
Average number of bodies in storage at the facility per day:				

STAFFING

In full time equivalents (FTE); count staff only once by primary duty or split into fractions of FTE by duty as appropriate, e.g. an administrative assistant who spends half of his or her time on computerized data analysis for annual statistics should be counted as 1/2 FTE administrative assistant and 1/2 FTE as computer staff:

- 1. Current Staffing
- 2. Vacant Positions
- 3. Total Positions Office Should Maintain

1	2	3	
			total office staff (in-house)
			pathology staff, excluding residents
			board-certified forensic pathologists
			forensic pathology residents
			pathology/physician assistants
			autopsy assistants/dieners
			body handlers/morgue attendants
			toxicology staff, including toxicologists
			toxicologists
			histotechnologists
			forensic photographers
			x-ray technicians
			investigators
			administrators/administrative assistants
			receptionists
			medical transcriptionists/typists
			records keepers
			computer staff/data analysts
			custodians/maintenance personnel
			outsourced work or duties (describe)
			other (describe):