

GUIDE TO REPORTING DEATHS TO THE MEDICAL EXAMINER (M.E.)

*NOTE: Any physician notifying this office regarding a potential ME case must obtain both a **ME case number** and the **name of the Investigator** to whom he/she has spoken regardless of whether the case is accepted or rejected as a ME case. This information should be recorded in the patient's chart.*

General

All deaths in Westchester County due to (or suspected to be due to) unlawful act, criminal neglect, violence, casualties, or by sudden or unexplained circumstances are immediately reportable to the M.E. Reportable cases include all of the following:

1. Unattended deaths and deaths in public places (local police must be notified)
2. Death or suspicion of death under these circumstances:
 - (1) Homicide
 - (2) Suicide
 - (3) Accident: traffic (auto, bicycle, pedestrian, train); falls (at home or otherwise); occupational (i.e., while at work), etc.
3. Deaths in legal custody (precinct, jail, prison, correctional institution, hospital prison ward); includes persons on parole and those remanded by court for psychiatric treatment
4. Deaths due directly to trauma or to sequelae of recent or remote trauma including mechanical, thermal, chemical, electrical, radiational trauma
5. Deaths in drug addicts and deaths related to drugs, e.g., MI temporally related to cocaine use
6. Deaths during or directly related to a therapeutic, diagnostic or operative procedure
7. Deaths due to poisoning (including food poisonings) and anaphylactic reactions
8. Maternal deaths associated with delivery or abortion
9. Suspected child abuse; infants born of drug addicted mothers
10. Crib deaths or sudden infant death syndrome (SIDS)
11. Hospice deaths occurring outside of a hospital

Specific Situations

1. AIDS: Reportable in drug addicts only; following reporting to M.E. autopsy permission may be obtained by the hospital in cases where the victim has stopped using drugs at least 6 months before death
2. Alcoholism: acute alcoholism is reportable; chronic alcoholism with or without liver cirrhosis is not reportable unless associated with trauma or other unnatural circumstances
3. Fractured hip: deaths from fractured hips are all reportable and are accepted when death has occurred within 2 weeks of injury
4. Operative death: reportable if the patient fails to regain consciousness following surgery or when death is believed to have resulted directly or indirectly from surgery

Note:

1. The death of a patient within 24 hours of coming to the hospital is not reportable unless the death falls under one of the above conditions. On the contrary, length of hospital stay whether days, months or even years does not preclude reporting a death. The cause which brought the patient to the hospital determines in most cases if this death is reportable.
2. Autopsy permission from family should not be requested in a M.E. case unless the case has been previously released by the M.E.
3. If during the course of an autopsy hospital findings or historical information is uncovered which places the death under M. E. jurisdiction, the autopsy should be stopped and M.E. called immediately.
4. Medical Examiner Form #4 is to be completed and must accompany the body whenever a case from a hospital is accepted as a M.E. case. This is a legal document and should be completed with this in mind.
5. Organ donation from M. E. cases requires prior approval of the M. E.; a copy of the signed authorization must accompany the M. E. #4 form with the body.