OPERATIONS MANUAL

INTRODUCTION

MI-MORT is a collaborative effort between the Michigan Department of Health and Human Services (MDHHS) Bureau of EMS, Trauma, and Preparedness (MDHHS), and the Michigan Funeral Directors Association (MDFA). Funding sources for this project have been provided by the Office of Assistant Secretary for Preparedness and Response (ASPR) Hospital Preparedness Program (HPP) and the Centers for Disease Control and Prevention (CDC) Public Health Emergency Plan (PHEP).

DOCUMENT PURPOSE

The MDHHS-BETP supports the public health and healthcare response to natural or man-made disasters. The Michigan Mass Fatality Plan is an annex of the Michigan Emergency Management Plan (MEMP).

The Michigan Mortuary Operational Response Team (MI-MORT) was established to provide the State of Michigan a mass fatality resource that could be readily deployed to any location in the State in response to an incident in which the number of dead has exceeded local or regional resources. During an emergency response, the members of the MI-MORT team work to support the local Medical Examiner and ultimately the Local, Regional and State response. This team provides technical assistance and personnel to recover, identify and process deceased victims in a dignified manner.

This Operations Manual was created to assist MI-MORT personnel during training or while deployed on a mission. It is a dynamic document that will continually be updated as procedures are developed to address specific issues.

The MI-MORT Operations Manual is consistent with the National Disaster Medical System (NDMS) Disaster Mortuary Operational Response Team (DMORT) operational policies and guidelines in order to facilitate a seamless integration of services if a federal response is required to support the state response.

Standard Incident Command System (ICS) terminology is used to ensure consistency with all ICS response elements and the National Incident Management System (NIMS).

Use of and adherence to this Operations Manual will ensure optimal personnel performance, standardization of activities and procedures to promote safe and effective MI-MORT operations.

It is expected that all MI-MORT members will use the MI-MORT Operations Manual as a fundamental tool for education, training exercises and MI-MORT mission assignments. It should be kept ready for immediate access with each team member's personal response equipment.

ASSUMPTION 1: MI-MORT Operations Manual development was based on a scenario that assumes the need to utilize all of all MI-MORT resources – a plan-for-the-worst scenario. Obviously, because each disaster is unique, and each Medical Examiner has standard operating procedures for routine casework, disaster-specific modifications will be made every time. Not all of the MI-MORT Operational Teams may be needed. For those that are used, procedural variations will adapt to the needs of the local Medical Examiner to accomplish a successful mission.

ASSUMPTION 2: MDHHS maintains a basic Disaster Portable Morgue Unit (DPMU) that contains equipment and supplies necessary to initiate operations. This version of the Operations Manual was developed assuming that there may be equipment not yet a part of the disaster portable morgue unit (DPMU) and must be procured by the local jurisdiction with assistance by the Medical Examiner and/or the appropriate Emergency Management and the Emergency Operations Center. Activities described in this document are focused on the operational needs of the County Medical Examiner requesting assistance.

MI-MORT ORGANIZATIONAL STRUCTURE

MISSION

The MI-MORT mission is to provide dignified and respectful fatality management services during disaster events. MI-MORT will assist and support local Medical Examiners, local and state law enforcement, local emergency response organizations and the Michigan Department of Health and Human Services with identification of the dead, preservation of evidence, and return of human remains to families.

EMERGENCY PREPAREDNESS REGIONS – Parallel the Emergency Management-Homeland Security Department divisions.

The state of Michigan is divided into eight regions such that no county is split.

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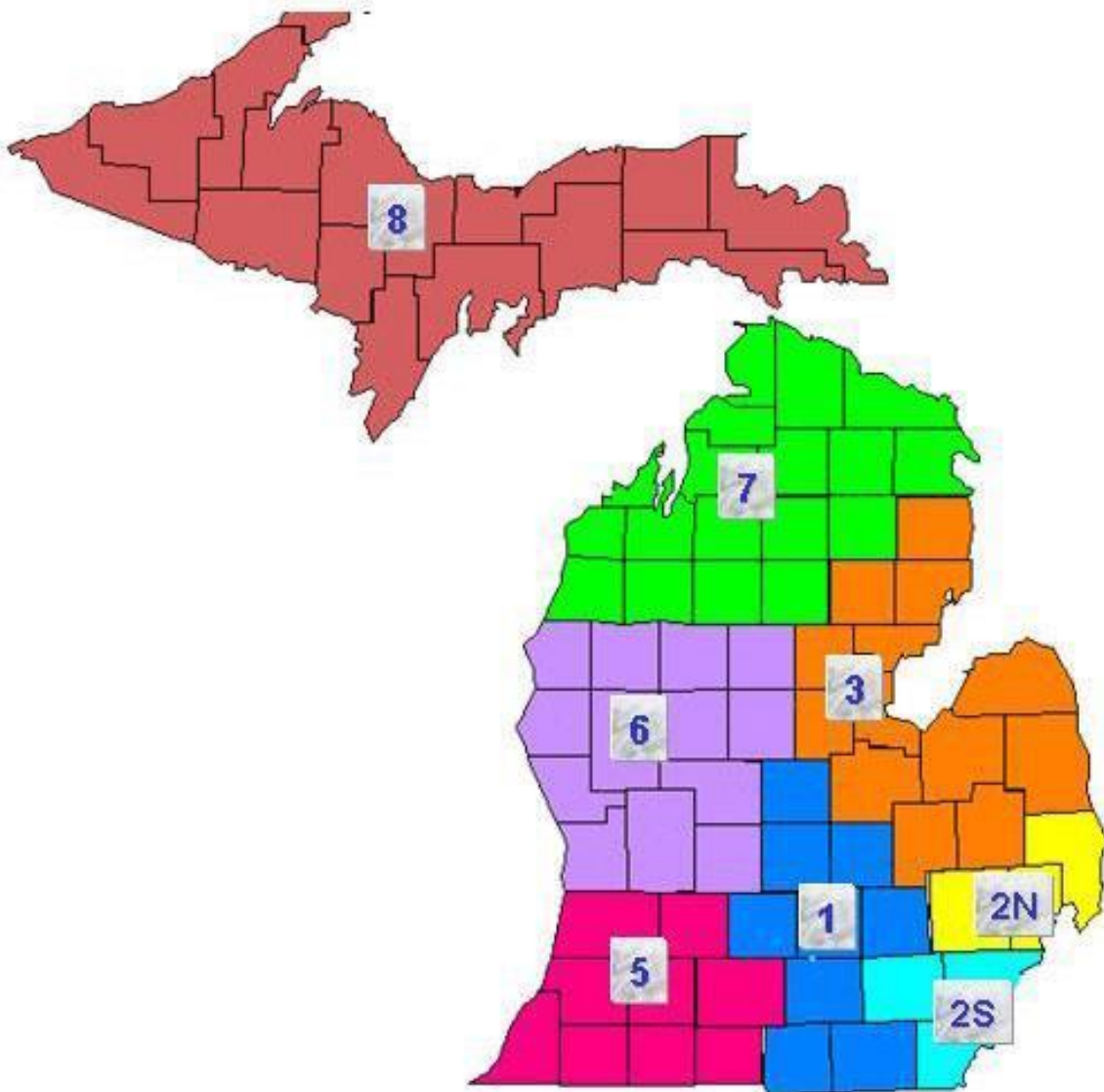
Region	Counties	
1	Lenawee Hillsdale Livingston Jackson Gratiot	Clinton Ingham Eaton Shiawassee
2N	Oakland St. Clair	Macomb
2S	Wayne Monroe	Washtenaw
3	Genesee Bay Huron Lapeer Arenac Iosco Ogemaw	Sanilac Tuscola Saginaw Midland Gladwin Oscoda Alcona
5	Barry Allegan Van Buren St. Joseph Branch	Kalamazoo Calhoun Berrien Cass
6	Isabella Oceana Newaygo Muskegon Ottawa Kent	Clare Osceola Mecosta Lake Mason Montcalm Ionia
7	Grand Traverse Wexford Leelanau Emmett Charlevoix Roscommon Presque Isle Montmorency Alpena	Antrim Kalkaska Benzie Manistee Missaukee Cheboygan Otsego Crawford
8	Marquette Chippewa Mackinac Luce Schoolcraft Alger Delta Gogebic	Menominee Dickinson Iron Baraga Keweenaw Houghton Ontonagon

MI-MORT SPONSORSHIP & MANAGEMENT ORGANIZATION

The Michigan Mortuary Response Team (MI-MORT) is a collaborative effort between MDHHS BETP and Michigan Funeral Directors Association, Michigan Dental Association Forensic Dental Team, and the Disaster Assistance Recovery Team. The MDHHS BETP and the MI-MORT members work to support the DPMU and mass fatality response. This mass fatality resource has been established since 2007.
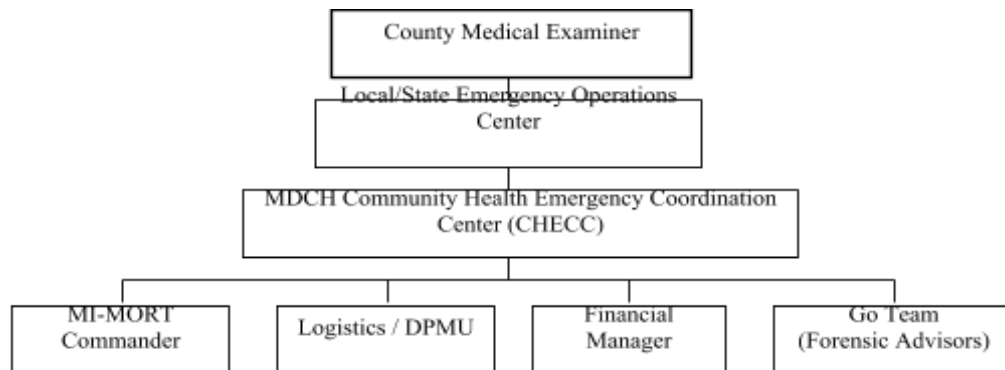
MI-MORT OPERATIONAL STATUS DEFINITIONS

1. Advisory:
     Response teams are be in a state of increased awareness monitoring of news coverage of a significant event that may result in a need for the Michigan Department of Health and Human Services/Bureau of EMS, Trauma, and Preparedness assets including MI-MORT response. Advisories are for informational purposes only.

2. Alert:
     Response team(s) in a state of readiness requiring overt preparatory action on the part of the alerted team. MDHHS-CHECC may authorize activation of team members up to a set limit on number of person-hours for activities associated with the Alert. MDHHS-CHECC may execute procurement in support of team activities during Alert (e.g., truck, bus, or van rental, consumable supply purchases, etc.).

3. Deployment:
     Event is issued a "Mission Number" and placement of MI-MORT personnel and/or teams in activation status for deployment. Activation of MI-MORT assets must be approved by MDHHS-CHECC.

MEDICAL EXAMINER ROLE

In Michigan, medical examiners (ME) are required by law (County Medical Examiners Act, Act 181 of 1953) to conduct investigations into the cause of death in cases of persons who come to their death suddenly, unexpectedly, accidentally, violently, or as a result of any suspicious circumstances. The statutory duty of the medical examiner does not change when the victims are multiple. The medical examiner for the county in which the deaths occur retains jurisdiction over the bodies.

Correct identification of human remains is necessary, not only for family notification, but also is critical when resolving issues of probate. Coinciding with identification of the victims is documentation of body location, wounds, and wound patterns that may be essential information required to reconstruct the event or determine the cause.

When a local disaster happens, local or state assets must be used before requesting the assistance of Federal assets. MI-MORT is designed to be the first line of response to a state level disaster until local arrangements can be made to resume near normal operations.

MI-MORT TEAM MEMBERSHIP

TEAM MEMBER COMMITMENT

MI-MORT members have dedicated themselves and are committed to serving the needs of families throughout disaster events. MI-MORT members shall maintain a state of "readiness" during the non-activation periods. Team members are expected to pursue training in mass fatality related subjects, to register in the MI Volunteer Registry, and to be available for deployment on short notice. When Team members are activated/deployed, they shall adhere to the MI-MORT Disaster Team Code of Conduct and follow instructions regarding work assignments and policies outlined in this Operations Manual

POSITION CLASSIFICATION PLAN

Membership in MI-MORT is limited to qualified individuals in the forensic disaster/mortuary community who have a desire to serve their community in the time of need. These positions involve working with deceased human remains, to varying degrees. All members are classified by position according to their respective training, education, and experience backgrounds. The various classifications are:

CODE	MI-MORT Title Description (primary but not limited)	Minimum Requirement
MCMD	**MI-MORT Commander/Co-Commander** disaster management of personnel, equipment and mass fatality disaster assets; ME Liaison; MDHHS/EMC Liaison; Scheduling	Response experience; management and administration experience
GTL	**Go Team Leader** performs disaster evaluation duties as back-up to MI-MORT Commander	Mass fatality disaster response experience; management and administration experience
VICL	**Victim Information Collection Data Team Leader** supervises Victim Information Collection Data Center	Response experience; management and administration experience
PATF	**Pathologist, Forensic** examines recovered remains, details anatomic observations; may serve as Team leader for Pathology or Morgue Identification Center	Licensed Forensic Pathology M.D. or D.O.
PATN	**Pathologist, Non-Forensic** examines recovered remains and details anatomic observations under the supervision of a forensic pathologist	Licensed M.D. or D.O. without forensic/ post-mortem experience
ANTF	**Anthropologist, Forensic** search or examination of bone or fragments; may serve as team leader for scene or morgue anthropology	Ph.D. with forensic/post-mortem experience
ANTN	**Anthropologist, Non-Forensic** search or examination of bone or fragments under the supervision of a forensic anthropologist	B.A., B.S., M.S., or Ph.D. in Anthropology without forensic/ post-mortem experience
ODNF	**Odonatologist, Forensic** examines dental remains, processes ante-mortem dental records for identification; may serve as team leader for ante or post-mortem Odontology	Licensed Dentist with forensic/ post-mortem experience

CODE	MI-MORT Title Description (primary but not limited)	Minimum Requirement
ODNN	**Odonatologist, Non-Forensic** examines dental remains, processes ante-mortem dental records for identification under the supervision of a forensic Odonatologist	Licensed Dentist without forensic/ post-mortem experience
BHLO	**Behavioral Health Officer** monitors team member performance and well being	M.D., Ph.D., Licensed Mental Health provider or Nurse
AO	**Administrative Officer** coordinates administration and financial documentation duties with MDHHS/EMC	Administration and financial experience
CHAP	**Chaplain** Pastoral care of MI-MORT staff	Pastoral experience
IRCS	**IR Computer Specialist** sets up and troubleshoots network operation and database modifications; assists command staff	Programming, IR or MIS experience, MS Office applications including Excel
MEDI	**Medical Investigator** identification coordinator; post-mortem data entry and VIP (Victim Identification Program database) searching for possible identification linkages; may perform VIC interviews or contact families for information; may serve as team leader for Morgue Identification Center, Verification Unit, Morgue Operations, Admitting, Photography, Personal Effects, Radiology (body X-ray), Remains Holding or Storage, or Records Management; may assist with Pathology, Anthropology, Odontology, DNA, or scene search teams	Medical Examiner Forensic Investigator or Law Enforcement Death Investigation Detective
MRTO	**Mortuary Officer** may serve as team leader for Morgue Operations, Admitting, Personal Effects, Radiology (Body X-Ray), Embalming, Casketing, Remains Holding or Storage, or Remains Release; may serve as VIC interviewer	Licensed Funeral Director, Embalmer
SAFO	**Safety Officer** monitors proper PPE usage and safety factors in the scene and morgue environments	Chemistry/Blood borne background
DNAS	**DNA Specialist** may serve as team leader for post-mortem DNA collection and VIC DNA team for specimen collection from families	Laboratory level Forensic DNA Experience
FPTS	**Fingerprint Specialist** Obtains print impressions from remains or ante-mortem specimens; compares ante and post-mortem prints for identification; may serve as team leader for ante or post-mortem Fingerprint Teams.	Post-mortem fingerprint experience or Latent Print Analyst
FORS	**Forensic Specialist** assists DNA, pathology, anthropology, odontology, photography, or personal effects teams; may serve as team leader for photography or personal effects	Laboratory level Forensic Experience: toxicology, Chemistry, firearms, etc.

CODE	MI-MORT Title Description (primary but not limited)	Minimum Requirement
DPMU	**DPMU Team** equipment managers and logistics coordinators	Administration and mechanical aptitude experience
EVSP	**Evidence Specialist** scene search and recovery; assists photography, personal effects, pathology, anthropology, odontology, or DNA teams; may serve as team leader for Search and Recovery Center or Transport, Remains Holding, Photography, Personal Effects, or Remains Storage.	Crime Scene Technician experience
AUTT	**Autopsy Technician** assists pathology, anthropology, odontology, or DNA teams; may serve as team leader for radiology (body X-ray)	Medical Examiner morgue autopsy or X-ray experience
ITDE	**IR Data Entry** performs data entry; helps in any other clerical capacity	Data entry, Windows, and MS Office proficiency
VDCS	**Victim Information Collection Data Specialist** interviews families in Victim Information Collection Data Center for gathering VIP information on missing persons; performs data entry of ante-mortem information	Training in VIC (non-Funeral Director level)
PHOT	**Photographer** takes photographs at any of the several morgue stations or at disaster site	Forensic Photography experience
ADSP	**Administrative Specialist** helps in any clerical capacity including data entry, records clerk, or morgue scribe	Clerical skills with basic computer skills
DENA	**Dental Hygienist/Assistant** assist Odonatologist at table or in clerical capacity, or serve as body escort or scribe	Dental Hygienist or Assistant
MRTA	**Mortuary Assistant** body escort, scribe, body storage handling	Members not otherwise defined

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MI-MORT APPLICATION PROCESS

Individuals with related disaster, forensic or mortuary experience may apply for MI-MORT membership by visiting one of the following web sites (www.MIMORT.org) under the Membership tab and (www.mivolunteerregistry.org) and completing the User Profiles. Once credentials have been verified the Applicant will be notified of acceptance, classification and further activities.

MI-MORT members are expected to keep their user profiles up to date and to notify the MI-MORT Administrative Officer of any changes in:
- Address
- Contact information
- Name change
- Job changes or changes in licensure
- Additional training that would qualify for upgrading the member's classification.

MI-MORT Membership Categories:
- Applicant Member – any person who has completed a User Profile and seeks consideration for membership.
- Active Member – Any person, whose MI-MORT application has been completed, reviewed by MDHHS along with a background check, submitted the required ICS 100, 200, 700, and 800 certificates and has been assigned to a position classification.
- Inactive Member – Any person whose Active status has been suspended due to:
  o Voluntary request for such status.
  o Failure to maintain training requirements, etc.
  o Investigation of violation of Code of Conduct.

Hours of Operation:
Disaster activation may result in round-the-clock operations. Members may be asked to work on 12-hour shifts, 7 days per week during activation. Disaster specific work hours or shifts will be determined by the ICS Commander, Medical Examiner, or other authority.

Travel Days:
Members' first day of activation is used for travel, in-processing and briefings; work is assigned on the second day. Members' last of work is spent briefing the replacement member on the duties of the position.

TRAINING REQUIREMENTS

Disaster response work is often very different from day-to-day tasks performed in normal occupations, even for forensic professionals. Members are not expected to know how to maximize the team effort of a MI-MORT mission without adequate training. For this reason, each member is expected to take part in:
- A minimum of one disaster-related exercise, disaster related training seminar, or disaster activation event in each two-year period in order to remain in Active status and ready for deployment. Failure to document such activity, or obtain an exemption granted by the Commander upon exigent circumstances, may be grounds for moving the member to Inactive status until the education requirement has been satisfied.
- Completion of the following independent study NIMS courses: IS 100a, IS 200a, IS 700a & IS 800a. The IS 300 and IS 400 classes are a requirement for command staff and team leaders.

- GO Team Leaders, members of the VIC Core Team, Odontology Team, DPMU Team and other members may be asked to participate in additional training sessions each year due to the depth of information to be learned.

TEAM UNIFORM CRITERIA

MI-MORT members are encouraged to adopt the official uniform selected for the area of operation to which they are assigned. Standardized uniforms provide for instant recognition of other MI-MORT members. The cost for uniform purchase is the member's responsibility. Member uniform expenses, however, may be tax deductible (see your tax advisor for details). Uniforms may be worn during travel to and from activations and at training sessions.

Composition of the MI-MORT Uniform:
The uniform will consist of Khaki pants, Khaki field jacket, team authorized shirt(s), team authorized hat, socks (color optional), combat style boot, (black or khaki), over covering (dependent upon environmental conditions), e.g., raincoat or poncho, and gloves.

Insignia and Identification Patches:
- **Name Tape:** (*Last name only*) the name tape (cloth) shall be worn immediately above and parallel to the top edge of the right breast pocket. Name tape is a 1-inch wide, 4-½ inch long cloth strip. The tape extends to each pocket edge but not beyond. Tape should be khaki, with brown type

- **MI-MORT:** The name of "MI-MORT" (tape) shall be worn immediately above and parallel to the top edge of the left breast pocket. The tape is a 1-inch wide, 4 ½ inch long cloth strip and extends to each pocket edge but not beyond. The color of the tape should be khaki, with brown type.

- **U.S. Flag:** Affix to the outside right sleeve of the blouse. Locate 1 inch below the shoulder seam and centered across the sleeve. The pattern of the flag is of the blue square and stars displayed to the upper right corner. This pattern indicates forward motion, no retreating.

- **MI-MORT Patch:** Affix to the left pocket centered.

- Suggested all patches be Velcro in place.

All applications to the uniform must be centered in the areas indicated. No patch or insignia is to be affixed to the pants of the uniform. Insignia and identification patches may be sewn or Velcro to the uniform.

Basic Uniform:
- Pants: Khaki, BDU or Tactical, cargo pants type in rip stop, federal cloth, or nylon fabrics.
  - o For hot weather activations: Khaki pants with zip off pant legs, made from light weight nylon or other quick-dry materials, may be more appropriate for members who must wear Tyvek type coveralls.
- Team T-Shirt: blue or appropriate team color with MI-MORT logo embroidered over right chest
  - o For hot weather activations, light or dark blue shirts, made from light weight nylon or other quick-dry materials, may be more appropriate.

VIC Basic Uniform:
- Pants – Khaki dress slacks
- Long Sleeve Shirt – White with MI-MORT logo embroidered over right chest

When Authorized:

The MI-MORT uniform is required to be worn by a MI-MORT member during field deployments in response to a disaster. The uniform may also be worn during:
- field exercise involving the MI-MORT,
- Training sessions, which provides an opportunity for uniform inspections.

Wearing of the uniform in circumstances other than those stated above will require pre-approval from the Commander of the MI-MORT

PERSONAL PREPAREDNESS

Readiness:

MI-MORT personnel should be prepared to respond to a mission within 4 hours of activation notice. Due to the need for rapid response, all personnel should have a deployment pack (or "Go Kit") containing necessary personal clothing, equipment, and supplies readily available for immediate mobilization. This should include: appropriate clothing for the environment, personal hygiene items, medications, and protective items such as sunscreen and insect repellent.

The "Go Kit" should be contained in 1 or 2 personal packs at most. It is advantageous to be able to split the personal gear so that a small carrying pack of personal necessities can remain with the member at all times, while the gear not needed during transport or at the areas of operation can be left at the MI-MORT Administrative Command Post (ACP) or the lodging location.

It is recommended that for space reasons, Team members pack seven days of uniforms and underclothes. Laundry service or field washing may be necessary to complete the remainder of the time deployed.

Since Team members may not find adequate food, shelter, or water available initially at the site and the MI-MORT ACP may not become fully operational until well into the response, **Team members should bring personal food and water for the initial 24 hours.** Personal food should be of a type that can be easily carried in your pack and have a resistance to spoilage.

"Go Kit":

The following list suggests minimum requirements to provide the self-sufficiency necessary during mission operations. This list may be modified by Team management based on deployment location and weather conditions. Team members should adjust this minimum inventory for the specific requirements of the mission.

Suggested Contents of a GO KIT:
- MI-MORT ID card with Lanyard
- Driver's License, Passport
- Rolling Duffel 30"
- Large Back Pack
- 3 Pair Khaki BDU Pants
- 3 MI-MORT Uniform Shirts
- 6 – 10 Tee Shirts, & Undergarments
- 14 Pair of Heavy Cotton Socks
- 1 Pair Black Work Boots (steel toe preferred)
- Hat

- Casual Clothing: Jeans, Polo Shirts,
- Shorts, Tee Shirts, Bathing Suit,
- Shower Sandals, Sweatshirt
- Laundry Bag
- Tennis Shoes
- Cash, few dollars in loose change
- Cell Phone & Charger
- Spare Eyeglasses
- Clock (Manual Alarm)
- Watch
- Small Flashlight, With Spare Batteries
- Small First Aid Kit
- Rain Gear
- 4 Weeks of Prescription Medications
- Toiletries: Tooth Brush, Tooth Paste, Travel Shampoo, Soap, Wash Cloth, Towel, Aspirin, Rolaids, Tylenol, Etc., Razor & Shaving Cream, Stick Deodorant, sunscreen (UV), Baby Wipes, Detergent, 2 Rolls Toilet Paper, Q-Tips, Insect Repellant, Hand Sanitizer, Foot and Baby Powder & Several large zip lock plastic bags to put all of this stuff in to keep dry.
- Small One Person Tent
- Lightweight Sleeping Bag
- 2 Large Garbage Bags (liners for sleeping bag)
- Air mattress and battery pump
- Small Pillow, 2 Old Sheets, 1 Light Blanket
- 1 Flat of Bottled Water
- 1 Box of MRE's or other heat stable food supply
- Dried Fruit
- Power Bars, Pop Tarts, Crackers, Coffee, Tea Bags,
- Stamps & Stationary
- Small Bible
- Deck of Cards
- Paperback Books
- Small Radio or CD player, Walkman, etc.
- And Most Important!!!!!!!! *A Positive "Can Do" Attitude*

Search and Recovery Assignment

In addition, if the position duties and responsibilities subject the individual to working in a hazardous area, such as the disaster destruction site, the following Personnel Protective Equipment (PPE) is required:

- Hard hat.
- Heavy work gloves (should be leather).
- Boots (should be steel toe/shank, water resistant).
- Eye protection (should meet ANSI 287.1).

ACTIVATION/DEPLOYMENT PHASES – GENERAL OPERATIONAL CHECKLISTS

For the purposes of this document Activation and Deployment refer to the same situation and are often used interchangeably. SEOC in coordination with MDHHS/CHECC (Community Health Emergency Coordination Center) activates/deploys MI-MORT. Decisions to deploy personnel, teams, or equipment resources to meet mission objectives are made upon coordination between CHECC and MI-MORT Command staff. Activation/deployment orders to members are issued only through MI-MORT Command Staff. Self-deployment without authorization by Command Staff may be grounds for moving the member to Inactive status.

The MI-MORT Operational Checklists represent general operating procedures for MI-MORT personnel before, during, and after mission assignment. The *General* Operational Checklist contains common actions that must be accomplished at each stage of the deployment by *all* positions. The MI-MORT Commander or Team Leaders may require additional On Site actions of Team members depending on the nature and magnitude of the assignment. While the checklists are intended to be a general summary of actions, it should be understood that:

- Some required actions might not be listed, but must be identified and assumed by the appropriate position.
- Some actions may be the primary responsibility of another Team position, but may require assistance and coordination from other position(s).
- The actions are listed in a general chronological order, but deviation may be required to meet mission objectives.

The following are general duties, responsibilities, and expectations that pertain to all MI-MORT members.

- **Non-Alert Condition:**
  No disaster activities required.

  - Team members are expected to attend training sessions as they are made available.
  - Team members are expected to maintain their user profiles with up-to-date changes in contact information – name, home, fax, e-mail, job changes, etc.

- **Advisory Condition:**
  Members receive word of a disaster event, possibly by way of TV coverage. No response is indicated at such times. Members may or may not receive any official word from MI-MORT about the disaster. Members should:

  - Take no action.
  - Monitor media sources for information regarding the location and weather conditions of the incident.
  - Monitor for e-mail information from MI Volunteer Registry
  - Refrain from calling Command Staff.

- **Upon Alert Notification:**
  MI-MORT Command Staff may receive official notice from MDHHS BETP of a possible activation to a specific disaster. Members will receive official information, normally by e-mail broadcast to all members, from Command staff via MI Volunteer Registry placing them on Alert at which time a Ready List of members available for response will be created.

  At the onset of a mass fatality disaster, with or without official notice from MDHHS BETP, it should be anticipated that a portion, or all, of the MI-MORT Team may be placed on Alert. Alert status should be

considered a notice that response may be necessary within a 24-hour time frame. Alert status does not indicate that actual deployment will occur, but rather implies that deployment MAY occur.

During the **Alert phase**, members should:

- ☐ Receive notification of possible activation from Command Staff via MI Volunteer Registry
- ☐ Inform employer of alert status and determine if absence will be authorized.
    - Team members are encouraged to educate their employer in advance regarding MI-MORT participation responsibilities prior to joining.
    - It is advisable to have an agreement with your employer that outlines time off (vacation or administrative leave or leave without pay) and pay issues for deployment with MI-MORT.
- ☐ Reply when requested from Command Staff as to availability status check.
- ☐ Provide additional contact phone numbers for follow-up contact and fax number for receipt of orders.
- ☐ Remain available via telephone, pager or fax.
    - If traveling such as on vacation, members should keep in constant contact with their workplace office or notify Command Staff as to contact telephone, fax number, or unavailability.
    - Command Staff are NOT responsible for tracking down members for availability.
    - Members are responsible to keep Command Staff posted regarding their whereabouts and availability.
- ☐ Transfer information as requested. Help may be needed in communicating information to other Team members.
    - If members are directed by MI-MORT Command Staff to perform information transfer, they must be sure to relate the information exactly as it was given.
    - Some Team members may be a link in the MI-MORT notification system, which is similar to a telephone tree throughout the Team.
    - It is recommended that members not call Command Staff during the Alert phase unless it is deemed absolutely necessary.
    - Keep in mind that Command Staff will be extremely busy coordinating the alert status activity and all calls should be kept to a minimum.
- ☐ Review Operations Manual for anticipated assignment, Code of Conduct, and Go Kit readiness.
- ☐ Make necessary personal preliminary preparation for activation.
    - Verify and resolve work and personal schedule conflicts.
    - Identify areas of personal concern that will need attention during your absence.
    - Keep in mind that members MAY or MAY NOT be activated.
    - Be prepared to withdraw from business and social meetings or activities if activated.
    - Make arrangements for personal responsibilities while activated.
    - Brief family members regarding possible activation.
- ☐ Review the personal equipment checklist and medications (3 week supply recommended).
    - During the Alert status, members should check their supply and if necessary contact physicians to acquire additional medications.
    - All prescription medication MUST be carried in the original container bearing the label as it came from the pharmacy. In the event members are not aware, it is **illegal** to carry prescription medication outside of its original container.

    ☐   Assess personal gear readiness for the specific disaster area and environmental conditions. Insert last minute items into the pack such as fresh batteries, foodstuffs, fresh water, etc.

    ☐   Withdraw enough money ($200 minimum suggested), some in cash and some available with credit/debit card, for the deployment

            If members are deployed, it will be necessary for them to take along enough cash and/or a credit card for a 2-week period as ATMs may be out of service for a period of time. Members will not receive money to purchase food and other items needed during travel to, from and while at the disaster.

            For security reasons, it is a good idea to take a smaller amount of cash and to carry a debit or credit card.

    ☐   Monitor mission-related information from local sources such as Internet, radio, and television.

    ☐   Remain prepared to depart on short notice.

- **Upon Activation:**

  The MI-MORT Commander will receive official word from MDHHS BETP that Activation (deployment) of some or all of the Team is necessary. In case of a partial Team activation, selection will be based on "disaster-specific" needs and a fair method of rotation and criteria for deployment. Selection of Team Leaders and Team members for deployment will be based on skill, experience, and specific qualities that will enhance the response effort. Command staff will contact each Team member to coordinate travel and lodging.

MI-MORT Team members shall <u>NOT</u> respond to any disaster site under the pretense of MI-MORT unless specifically requested by MI-MORT Command Staff.

During the **Activation phase**, members should:

    ☐   Receive notification of selection and assignment from Command Staff.

    ☐   Establish communications with the appropriate Team Leader if directed to do so.

    ☐   Participate in Team briefings and/or conference calls as requested.

    ☐   Members should not travel until they receive authorization and travel orders from Command staff. However, this may be done by telephone notice so document that date, time, and person issuing the deployment order. Members will be given as much lead time as possible, however, members should be prepared to leave home on very short notice. This warrants members having a good pre-plan for the issues previously discussed in the Alert phase.

    ☐   Take the "Go Kit". Make sure it is adequately stocked with items appropriate for the type of disaster and future weather conditions.

    ☐   Wear the designated MI-MORT uniform during travel, if available.

    ☐   Review the MI-MORT Operations Manual for information pertinent to the assigned position description, operational checklist, operational procedures, and safety procedures.

    ☐   Take advantage of available travel time for rest prior to arrival.

    ☐   Carry out assignments as directed.

On-Site Operations:

Upon arrival at the disaster area, immediately report to the designated check-in center or to the MI-MORT Commander for your assignment. The MI-MORT Commander can be located via the Administrative Command Post (ACP) or Morgue Operations Center (MOC). When reporting for duty, members will need to complete necessary forms.

When **<u>on site</u>** members should:

- Perform duties as a Team player. Every MI-MORT member was selected because of a specific expertise. In a MI-MORT operation, many areas of expertise are integrated into one "team" approach to the operation. A major ingredient in the success of a MI-MORT mission is that each member performs his or her duties with a "team player attitude."
- Report to the designated staging area as directed.
- Complete check-in procedures to include identification card issuance and medical screening, if applicable.
- Participate in the Team briefings and meetings as appropriate. Members should become familiar and comply with the chain of command and policies that are adopted for the "disaster-specific" operation. Each disaster will require some modification of the MI-MORT standard operating guidelines. Members will receive more specific information at on-site briefings.
- Ensure your physical readiness through proper nutrition, water intake, rest, and stress management techniques.
- Remain professional – be aware of your surroundings when not on duty.
- Remember MI-MORT operational activities deal with sensitive issues. While on deployment members should remember the "world" is watching and listening. Members are expected to be professional with respect to behavior and conversation when out and about the area. Do not make the mistake of making inappropriate comments or discussions that can be overheard.

    Media sources have been known to plant reporters for the purpose of gathering information by eavesdropping on your group discussion. Always be conscious of the fact that even if it is not a reporter near you, it COULD be a friend or family member of a disaster victim and your comments and behavior will reflect on the credibility of MI-MORT operations.

- Comply with the MI-MORT Team Code of Conduct. Compliance with the Code of Conduct is mandatory and shall be followed by all members.
- Maintain telephone contact with family members to reduce anxiety and stress on them.
- Receive any appropriate issue of gear (e.g., radio, cell phone, etc.) pertinent to the position.
- Ensure use of all safety practices and procedures.
- Ensure proper equipment needs are met and equipment is operational prior to each operational period.
- Report any signs/symptoms of Extended Incident Stress Syndrome (EISS), injury, fatigue, or illness to the immediate supervisor.
- Brief replacements fully on all ongoing operations when relieved at the end of operational periods or rotation out of the mission.
- Provide supervisor with regular status reports as directed.
- Prepare and maintain records and reports, including duty station logs, as appropriate.
- Carry out assignments as directed.

Deactivation:

Members may be released from the mission by either rotating out after a period of duty or upon completion of the MI-MORT mission. In either case, members should:

- Participate in the Team briefings and meetings as requested.
- Prepare personal belongings for demobilization.
- Return all assigned equipment to appropriate location
- Attend incident stress debriefings, if available. Past experiences with disaster workers have proven the value of participation.
- Follow through with any Administration details (e.g., After Action Reports) with your Team Leader or Command staff. Likely, there will be finalizing details that need attention. Completion of these details in a timely fashion will lessen the workload for all concerned.
- Participate in Team After Action Review activities, if applicable.
- Remember to keep details Confidential when sharing your experience.
- Submit comments to Team Leader for discussion and possible inclusion in the After Action Report. Comments submitted should include a review of pertinent position descriptions, operational checklists, and procedures for recommended changes.

HEALTH ISSUES

MI-MORT members are responsible for their medical and physical fitness. Team members should consider all medical conditions that might be aggravated by disaster response. If members are taking prescription medication, they will be responsible for having an adequate supply for the duration of the deployment. The SEOC will work with the CHECC to identify possible on-scene MI-MORT medical health support resources. This may include collaboration with the designated Regional MCC. Members should contact the medical unit if they need any medical assistance during the deployment.

Immunizations:

MI-MORT members should already have obtained immunization or screenings for:
- Hepatitis B (3 shots over 6 months),
- Hepatitis A (2 shots over 6 months) is also recommended,
- Tetanus and Diphtheria
- Annual Tuberculosis testing.

Sickness/Injury While on Activation:

If a Team member becomes ill or injured while on activation, the Team Leader should seek medical assistance immediately. In cases of injury, after medical attention is acquired, the Team Leader shall write a full report of the circumstances surrounding the event using the appropriate forms.

VEHICLE ACCIDENTS:

In case of an accident involving a personal, state owned or rental vehicle, a MI-MORT member is required to report the incident and complete necessary forms.

- ☐ Notify Command staff immediately.
- ☐ Contact local police. File an official police report and retain a copy and the number before leaving the scene.
- ☐ Obtain the other driver's license information (insurance, driver's license number, etc.) Provide the other driver with driver's license and rental vehicle information only.

For rental vehicles, call the rental company office and speak to the manager. Determine what paper work needs to be completed.

Submit the following to the Command staff:
- ☐ Detailed accident statement.
- ☐ Police report
- ☐ Proof of ownership (registration for personal vehicles).
- ☐ Other driver's information.
- ☐ Copy of driver's license.
- ☐ Bills for any medical care received.
- ☐ Also submit any information that would be helpful in processing or explaining the claim. Pictures are beneficial.

MI-MORT DISASTER ACTIVATION COMMAND STRUCTURE

Overall direction and control of a disaster is managed by the ICS Commander. Elements related to the management of fatalities are coordinated by the Medical Examiner and MDHHS/CHECC who determine the level of assistance needed from MI-MORT. Michigan's MEMP calls for the implementation of an Incident Command System to manage a disaster event. The role of an activated MI-MORT team would fall under the ICS Operations function.
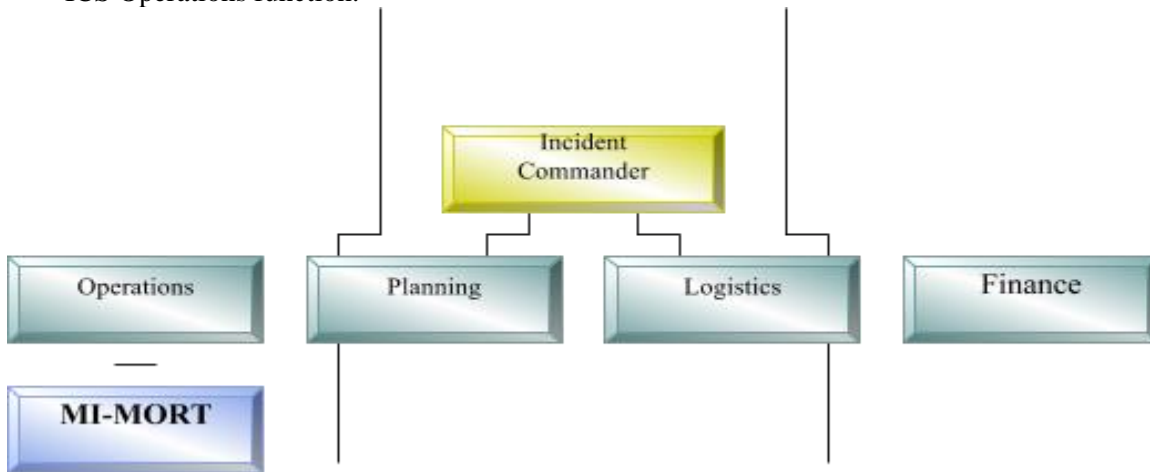
MI-MORT, in turn, follows the ICS model in aligning the reporting responsibilities of its various internal functions in the event of activation.

As with any ICS situation, only the positions that are required to achieve the objectives of the mission are filled. If a position on the MI-MORT command structure is unfilled, all necessary duties and responsibilities are assumed by the next higher position. In the Operations Section, for example, Team Leaders report to Branch Directors who report to the Section Chief who reports to the MI-MORT Commander.

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MI-MORT Commander

MI-MORT serves the needs of the Medical Examiner. Therefore, the MI-MORT Commander answers directly to the Medical Examiner. The MI-MORT Commander is responsible for all team activity during the deployment period. It shall also be the responsibility of the MI-MORT Commander, in consultation with other authorities involved, to staff the necessary positions on the team. MI-MORT will interface with local and State agencies and volunteer organizations as deemed necessary and appropriate by the Medical Examiner, ICS Commander, and the MDHHS/CHECC.

Functional Services and Responsibilities:

Upon activation, MI-MORT is designed to provide a wide range of services to assist with processing victim remains.

1. **GO-TEAM** (Incident Management Team or IMT)
   a. Respond to disaster site within four hours.
   b. Establish liaison with Medical Examiner.
   c. Provide SITREP to Incident Command and MDHHS/CHEC

2. **COMMAND**
   a. Administrative Command Post (ACP) management.
   b. Operations Section for management of tactical implementation of functional branches.
   c. Planning Section for production of the Incident Action Plans (IAPs).
   d. Logistics Section for management of equipment resources including establishment of the information Resources Center (IRC)
      i). IRC and records management functions may be located or moved as the event unfolds and as Medical Examiner resources dictate.
      ii). Initial set up may be at the morgue or VIC during early stages and moved to the Morgue Identification Center during later stages as various elements demobilize.
   e. Administration and Finance Section for personnel and costs accounting.

3. **SEARCH AND RECOVERY BRANCH**
   a. Search and Recovery Center (SRC) establishment and management.
   b. Recovery and tracking of remains.
   c. Anthropological assessment of human vs. non-human remains.
   d. Victim transport staging.

4. **MORGUE OPERATIONS CENTER**
   a. Morgue Operations Center (MOC) management.
   b. Remains Receiving and Holding.
   c. Admitting/Body Escort.
   d. Photography.
   e. Personal Effects.
   f. Pathology.
   g. Anthropology.
   h. Fingerprint.
   i. Radiology.
   j. Odontology.
   k. DNA.
   l. Embalming /Casketing.
   m. Processed Remains Storage.

5. **VICTIM INFORMATION COLLECTION DATA BRANCH**

a. Victim Information Collection Center (VIC) management.
b. Interview of families and friends of victims.
c. Data gathering (VIP ante-mortem interview forms).
d. DNA familial sample and victim reference specimen collection.
e. Family Affairs (Remains Release.

6. **MORGUE IDENTIFICATION BRANCH**
a. Morgue Identification Center (MIC) management.
b. Data Entry (VIP post-mortem, if applicable).
c. Medical Records follow-up.
d. Receipt and distribution of ante-mortem records.
e. Fingerprint ante and post-mortem comparison.
f. Dental ante and post-mortem comparison.
g. Victim identification.
h. Records Management.

OPERATIONAL OVERVIEW - PRE-PROCESSING OPERATIONS

The operational overviews provide a sequential listing of practical issues, considerations, and assignment duties required for various aspects of a mission. The more prepared team members are to understand how tasks interrelate, the better equipped they will be to contribute to the MI-MORT team mission of helping the Medical Examiner.

- The overviews assume that the Medical Examiner desires to take advantage of MI-MORT's full capabilities. Realistically, however, larger Medical Examiner offices may request only limited assistance in specific areas to support their normal operations. The Medical Examiner's preferences will dictate the level of response provided and the Teams to be activated.

- MI-MORT operations consist of various activities carried out at a number of facilities or locations within the facility. The following overview lists the various activities and the locations where they may take place during activation:

A. **Activation/Deployment Events:**
1. Upon activation of Command Staff through the State Emergency Operations Center SEOC)/MDHHS/CHECC, Team Leaders are deployed as first responders (Go-Team) to:
    a. Contact Medical Examiner to offer assessment assistance.
    b. Identify level of immediate response (personnel and/or equipment) needed.
    c. Identify areas for Administrative Command Post (ACP), staging, and lodging.
    d. Identify areas for temporary morgue (if applicable), and VIC sites.
2. MI-MORT Management response to incident:
    a. MI-MORT Program Director maintains contact with MDHHS/CHECC desk at the SEOC Command Staff.
        i). This may be done in a location not affected by compromised infrastructure at or near the incident site.
        ii). Contact is maintained by a radio system as a back up to land line and cellular telephone service.
    b. MI-MORT Commander joins Go-Team for assessment
    c. Logistics Chief initiates preparations to transport DPMU from the warehouse.
    d. Administration Section Chief activates an alert system to identify members capable of responding (Alert Status-Ready List) during Go-Team assessment.
        i). Team activation activities may be transferred to an interim base of operations while Command staff is traveling to the site.
        ii). Team activation activities will transfer to the ACP once it is set up.
3. Command Staff advises MDHHS/CHECC desk of:
    a. Assessment results for Medical Examiner needs.
    b. Personnel deployed and scheduled to respond.
    c. Responder sheltering needs.
    d. Equipment transportation needs (trucking contracts).
    e. Other special needs as identified in assessment.

B.   **MI-MORT Command Post Events:**
Command establishes an Administrative Command Post (ACP) for control of arriving MI-MORT members and logistics coordination with MDHHS/CHECC. It may be located with other responding agencies.
1.   Recommended Staffing
   a.   MI-MORT Commander
   b.   Deputy Commander
   c.   Operations Section
   d.   Chief Planning Section Chief
   e.   Logistics Section Chief
   f.   Administration and Finance Section Chief
   g.   Liaison Officer
   h.   Safety Officer
   i.   Information Officer (if applicable)
   j.   Official Photographer
2.   Physical Considerations
   a.   Area is separate from but close to morgue
      i).   MI-MORT Command Trailer with radio and computer network server communication links should be near the ACP and may serve as such until adequate space can be secured.
      ii).   Radio communications during first 72 hours is maintained for contact with Program Director.
   b.   Adequate space for all agencies to function if located together
   c.   Multiple hard telephone lines for phone, fax and Internet access
   d.   Computers and printers networked to functional areas
   e.   Restrooms
   f.   Office supplies
   g.   Fax (high resolution)
   h.   Copying machine(s)
   i.   Two-way communication equipment for morgue base of operations personnel
   j.   Security personnel
   k.   Cable television service (weather and news) to maintain situational awareness as events unfold
   l.   Office equipment, desks, chairs, etc.
3.   The Go-Team Leader remains in command until arrival of MI-MORT Commander.
4.   Reporting /Staging of MI-MORT staff includes:
   a.   Planning Section to log in arriving personnel and coordinate with Administrative Section for documentation processing and assignment
      i).   Assignment of personnel as directed
   b.   ID Cards may be issued by duty station assigned (authorization level):
      i).   Disaster Site/Scene
      ii).   Morgue
      iii).   VIC
      iv).   MIC
      v).   ADMIN
      vi).   MI-MORT Official Photographer, or
      vii).   ALL (for Branch Directors).
   c.   Rotation scheduling anticipates arrival and departure dates for members to cover one overlap day for orientation (two-week maximum is the goal).
5.   Coordinate volunteers showing up (funeral directors, police, fire, citizens) with Medical Examiner guidance.
6.   Prepare daily briefing agendas for MI-MORT teams:

a. Mission goal and Medical Examiner needs
b. Identify Command Staff and Team leader assignments,
c. Safety issues, buddy system, reports of injuries,
d. New arrivals orientation for paperwork and overview of mission, and
e. Pre-shift updates 6am and 6pm (if 24-7 schedule).

C. **Logistics Section Events:**

Logistics maintains the Disaster Portable Morgue Unit (DPMU). The DPMU is maintained at a warehouse in Lansing and contains equipment and supplies needed to begin operations and continue until replenishment supplies can be arranged. All materials are segregated into kits by section of use and are in four trailers for transport. Tent structures, power, heating and air conditioning units are not in the DPMU. The DPMU is designed to be erected as needed inside of usable facilities augmented by the utilities listed. The DPMU contains portable radios systems designed to keep MI-MORT teams in contact.

Offices for Logistics Operations will be needed to coordinate the many responsibilities of the Section.

1. Recommended Initial Staffing
    a. Logistics Section Chief
    b. 6 DPMU Assistants
    c. 12 Assistants as staffing permits
    d. Medical Unit (supplied by SEOC, DMAT, RMAT, etc.)
2. Physical Considerations
    a. Area is separate from but close to morgue.
    b. Multiple hard telephone lines for phone, fax and Internet access.
    c. Computers and printers networked other functional areas.
    d. Office supplies.
    e. Fax (high resolution).
    f. Copying machine(s).
    g. Two-way communication equipment.
    h. Office equipment, desks, chairs, etc.
3. Activate DPMU Team and arrange for transport of DPMU equipment
    a. Secure trucking contractor via SEOC/CHECC to transport palletized equipment
    b. Secure prime mover tow vehicle to transport Command Post trailer.
4. Establish method for request and approval of additional equipment and supply resources via EOC processes. The preferred process for requesting resources is to utilize the local EOC, if possible, so that the request can be tracked up through the State EOC if necessary. Conditions may dictate an alternate process of making the request directly to SEOC/CHECC, especially if MI-MORT is serving multiple Medical Examiner Districts.
    a. Establish communications (phone and radio if necessary) with Local and State EOC.
    b. Determine and order quantity of expendable supplies (personal protective equipment) needed for continuing operations.
5. Facilities Unit to secure fixed structure or tent based accommodations for:
    a. Morgue Site
    b. Victim Information Collection Data Center Site
    c. Administrative Command Post
    d. Logistics Section Offices
    e. Sheltering accommodations for arriving personnel
6. Perform site prep for temporary morgue and coordinate requests for contract services and rentable resources:
    a. Warehouse or other fixed structure for morgue operations

b. Tents or office trailers for ACP, MIC, Odontology and Fingerprint Ante-mortem Teams

c. Water supply and morgue table drainage (holding tank and biomedical waste disposal service agency if public sanitary sewer is not accessible)

d. Electrical power (600 KVA minimum)/HVAC if necessary

e. Phone, internet and cable media services

f. Morgue flooring (grading of field if needed, marine plywood for Body X-Ray Team if heavy X-ray units will be used)

g. Refrigerated trailers (no wooden flooring for cleansing ability; with dual electrical and diesel fuel power options) for:
   i). Remains holding (before processing)
   ii). Remains storage (for after processing)

h. Carpentry for:
   i). Shelves inside trailers if necessary
   ii). Access ramps to load and unload remains from trailers

i. Portable toilets (staged far enough away from morgue and an area for rest breaks to avoid odor problems).

D.   **Information Resources Center (IRC) Events:**
The Communications Unit of the Logistics Section is responsible for establishing the IRC. If not already established by the Medical Examiner, the IRC manages the various computer networks needed to run the MI-MORT operations. It facilitates the transfer of information at multiple sites. For example, the VIC computerizes ante-mortem data collected through the Fatality Response Emergency Database (VIP) Interview Packet. The IRC computerizes post-mortem data collected at the morgue. MIC then compares ante and post-mortem data to develop presumptive identifications for consideration by the Identification Team (Verification Unit).

1. Recommended staffing:
   a. 1-IR Technology Specialist (hardware, networking, etc.)
   b. 1-IR Programming Specialist (VIP, DEXIS, programming, etc.)

2. Recommended Equipment:
   a. Computer server, PCs and networking equipment for morgue and ACP operations administered from the Command Post Trailer
   b. Computer server, PCs and networking equipment for VIC operations administered from the VIC
   c. Multiple hard telephone lines for phone, fax, and Internet access
   d. Two-way communication equipment
   e. Security personnel
   f. Cable television or radio for latest news updates
   g. Office equipment, desks, chairs, etc.

3. Maintain On-Duty/Off-Duty Log book to document individuals staffing the position

4. Establish in a secure location separate from morgue but near ACP if possible

5. Establish secured network at ACP, Morgue, MIC, and VIC (if possible for:
   a. VIP server (web based with secured access)
   b. Logging of remains storage information
   c. Daily download of VIP ante-mortem data from VIC to server (if   necessary due to lack of internet connectivity)

6. Set VIP client access from MIC, VIC, Morgue Admitting, Photography/Personal Effects, Odontology (ante-mortem), Fingerprints (ante-mortem), and Records Management Teams

7. Set up hard wired networks for digital dental x-ray and digital body x-ray programs (due to transmission speeds and image file sizes)

8. Establish web link access for ACP and MIC Teams to access VIP and search web

9. Set up digital photo storage and processing network for MIC

10. Modify disaster-specific forms in the VIP database as needed
11. Create a daily back up procedure
12. When multiple agencies are involved in the deployment additional procedures may need to be implemented. For example, copies of specific records as well as specific reports may need to be generated by the MIC with Commander approval.
13. Upon completion of mission, prepare a complete set of all database files in a runtime version on CD for Medical Examiner's permanent records.

OPERATIONAL OVERVIEW-OPERATIONS SECTION

The Operations Section performs all tactical work with recovering, processing and identifying human remains. Upon completion of morgue processing operations, Odontology and Fingerprint teams continue to effect identifications under the Identification Branch.

OPERATIONAL OVERVIEW-SEARCH AND RECOVERY BRANCH

A disaster may result in or produce a specific site or multiple sites where search and recovery activities take place. The MI-MORT focus at this site will be the discovery, documentation, and subsequent recovery of all artifacts involving human remains. As part of this effort, a Search and Recovery Center (SRC) may be formed to assist the ICS Commander.

The Search and Recovery Branch Director will be responsible for the coordination of all MI-MORT D.A.R.T. search activities.

MI-MORT does not possess the capability or equipment to enter chemical, biological, radiological, nuclear, or explosive (CBRNE) contaminated sites or handle contaminated human remains. Thus, Search and Recovery operations anticipate functioning in non-contaminated environments.

A. **Recommended Staffing:**
1. Search and Recovery Branch Director.
2. 1-Logistics Team Leader
3. 3-4 Logistics Section Team members
4. 1- Chaplain and/or Behavioral Scientist
5. 1-Transportation Team Leader (also acts as Dispatcher)
6. 5-6 Transportation Team Drivers (if possible)
7. 1-Safety Officer
8. 1-Search Team Section Chief
9. 5-6-Search Team Leaders (dependent on size of site and number of grids)
10. 1-Forensic Anthropologist, Odonatologists or Medical Examiner/Investigator (per search team is suggested.
11. 1-Photographer per search team
12. 5-6-Evidence Specialists for evidence collection and note taking (per search team).
13. 1-Transportation Unit specialist per 1-2 search teams is suggested (shared across teams).

B. **Physical Considerations Equipment:**
1. Radios or other communication equipment.
2. Heavy work gloves (should be leather).
3. PPE (level D or C if necessary) including eye protection (should meet ANSI 287.1).
4. Boots (should be steel toe/shank, water resistant).
5. Personal pack.
6. Latex or Nitrile gloves.
7. Writing documentation equipment.
8. Camera kit.
9. Steel tape measure/GPS Unit.
10. -Note: Remove unless we get this
11. Laptop PC.
12. Evidence packaging materials, including tags.

C. **General Operational Aspects:**

1. Extreme effort will be made to render the most respectful, dignified, and ethical treatment of the dead. It is recognized that the circumstances of the disaster may dictate innovative methods to accomplish search activities.

2. The SRC Director will survey and assess the situation making note of necessary information about the disaster at hand including: estimated number of remains, security issues, worker safety issues, and special requests by investigating agencies. The SRC Director will develop a search plan for the area and identify the number of personnel, equipment, and special resources are needed to accomplish the mission.

3. The SRC Director will conduct a briefing of team members prior to commencing activities. In addition to pertinent information regarding the mission at hand, the SRC Director will identify and alert team members of specific safety issues known at the time.

4. The Search and Recovery Team will conduct its operation in the most efficient manner possible while focusing on standard practices of safety and evidence preservation.

5. Standard archaeological methodologies may be required in the planning and implementation of an effective and efficient search of the disaster to locate all relevant human biological materials.

6. The documentation of the site minimally includes the production of a plain view map or sketch displaying the location of all recovered human remains relative to permanent feature(s) of the scene.

7. Careful scene documentation will be carried out in the form of sketches, GPS readings, video, and/or photos. This may supplement primary scene documentation by the law enforcement agency in charge.

8. During initial search activities, suitable stakes or markings will be placed at the location of found human remains. Numbers (on waterproof, indelible materials) will be assigned to each whole or fragmented human remains located and records kept identifying the location of the remains within the disaster site.

9. Extensive efforts will be implemented to achieve recovery of all human tissue which will be documented, collected, and transferred to the morgue through the Transportation Staging Team.

10. Transportation of human remains, personal affects and evidence from the disaster site to the morgue unit is to be done in a forensically sound manner, including maintaining a chain of custody. All items turned over to the transportation team will be signed for, to/from, and then will be similarly signed for, to/from, when turned over to the Remains Management Team for transport to the morgue Vehicles used in the transportation of human remains, personal effects and evidence should be appropriate to the task. Personnel involved in transportation should be individuals familiar with human remains, forensic evidence, and maintaining a chain of custody.

11. Wallets and jewelry or other items attached to human remains will not be removed from the remains. They will be transferred to the morgue with the remains.

12. When the situation dictates, the Search and Recovery Team may be required to remove the remains from the immediate site and transfer them to an evacuation area. In the event an evacuation area is not necessary the remains will be transferred to the morgue utilizing the best method available.

D. **Specific Operational Aspects:**
1. Search and Recovery Teams shall adhere to the Search and Recovery Protocol Guide.

OPERATIONAL OVERVIEW-INFORMATION TECHNOLOGY SECTION

The Information Technology (IT) Section is responsible for the digital infrastructure needed to facilitate the MI-MORT mission. To protect the information collected during disaster response, segregation of internal networks and the public internet is critical. Internet access is to be limited to specific designated devices that will not have access to operational data. The IT section's primary focus is enabling other sections to perform their duties efficiently and effectively. In addition to responsibilities during deployments, the IT section also has responsibilities to perform routine maintenance on the infrastructure.

Deployment

A. **General Information**
    Areas should be setup in the order listed below, with the first priority being the badging system in order to register newly arriving personnel. Care should be taken to secure all cabling with Gaffer's tape to protect cabling from adhesive residue and minimize trip hazards. Whenever possible, secure cabling to or along walls and away from traffic areas.

B. **Badging Station**
    Consider the appropriate location for badging new personnel and receive the badging laptop, the associated go kit and badge printer kit from logistics. Deploy the equipment according to the IT assembly steps and notify incident command when badge generation can begin.

C. **Family Center Assembly**
    Determine the appropriate networking configuration based on how widely dispersed equipment will be from a single point. If all equipment is within 200' and not separated by thick walls or metal barriers, deploy a single hub configuration as outlined in the IT assembly steps, otherwise deploy a multiple hub configuration. Deploy the laptops and printer according to the IT assembly steps and notify incident command when setup is completed.

D. **Forensic Center and Information Center Assembly**
    Determine the appropriate networking configuration based on how widely dispersed equipment will be from a single point. If all equipment is within 200' and not separated by thick walls or metal barriers, deploy a single hub configuration as outlined in the IT assembly steps, otherwise deploy a multiple hub configuration. Deploy the laptops and printer according to the IT assembly steps and notify incident command when setup is completed.

Operations

A. **Troubleshooting**
    After all areas have been configured check with all sections and confirm that equipment is functioning properly and address issues as they are reported.

B. **Documentation**
    Make note of any issues or areas of improvement for future deployments.

Demobilization

C. **General Information**
    Items should be kept together in the fashion in which they were originally deployed (VIC and MIC shouldn't be intermingled). Make note of any expendable supplies (ink, paper, Gaffer's tape, etc.) that needs to be replaced.

OPERATIONAL OVERVIEW – MORGUE OPERATIONS

Disaster specific needs dictate how the morgue will be set up to best accomplish the MI-MORT mission of helping the Medical Examiner process disaster victims for eventual identification. MI-MORT Command should first assess the situation and determine what specific tasks need to be performed in conjunction with the Medical Examiner. After considering the condition of fatalities and circumstances, they should consider what processes would be necessary to accomplish the mission and determine what additional tasks need to be accomplished to supplement the Medical Examiner's resources. The Morgue Branch Supervisor oversees all remains processing activities. Duty assignments for the teams involved in morgue processing are divided into two groups to maintain NIMS compliant span of control in supervisory responsibilities.

Morgue General Considerations
A. **Location/Layout/Floor plan:**
    Careful consideration should be given in selecting a morgue site. MI-MORT will work with local officials, normally the Medical Examiner, the local EOC, the State MDHHS/CHECC, and others to establish a temporary morgue facility.
    1. Defining the "ideal" morgue set up is next to impossible, however when establishing the morgue, the following should be considered:
        a. Facility availability for the time frame necessary.
            i).   Retrofit capability and cost.
            ii). Hard weather tight structure with concrete floors.
        b. Space Requirements:
            i).   Less than 100 fatalities-6,000 sq. ft.
            ii). 101-200 fatalities-8,000 sq. ft.
            iii). More than 200 fatalities-10,000 sq. ft.
        c. Ventilation.
        d. Drainage (sanitary sewer floor drains in operational areas).
        e. Heating/cooling (HVAC Power Supply).
        f. Communications services (e.g., telephones, internet, etc.).
        g. Electrical capabilities (minimum 600 amps. Service).
        h. Water (cold water hookup with utility sink and hose bib connector).
        i. Hot water heaters to supply water to:
            i).   PPE dressing area.
            ii). Pathology.
            iii). Personal Effects.
            iv). Anthropology.
            v).   DNA.
            vi). Embalming.
        j. Supply lines (water and power) to run on outside of cubicles; center aisle to remain free and uncluttered for body cart movement.
        k. Rest/break area for workers.
        l. Cleanliness.
        m. Plumbing, sewer system, or restroom availability.
        n. Accessibility from site and to Medical Examiner facility.
        o. Site Security (including shielding of some areas from outside view).
        p. Adequate lighting.
        q. Hazardous materials waste storage capability (including embalming chemicals.
        r. Other disaster-specific needs.
    2. Morgue processing of human remains is divided into work function-oriented teams. It may be divided into as many as necessary to accomplish the mission.

3. Cubicle size 12' x 24' typical.
   a. 3,500 square feet minimum required for basic cubicle set up (96' x 40').
   b. 2,500 square feet minimum required for DPMU equipment storage area.
4. Two-sided station path is desired if space is available, or
   a. One-sided long path (200 ft. x 40 ft.), or
   b. L-shaped (100 ft. x 100 ft.) if necessary

B.   **PPE/Entry to Morgue:**
This area provides a location for morgue personnel to put on and remove personal protective equipment and to obtain first aid if necessary.
1. Level D PPE is required for all personnel handling human remains.
2. Location is near entry to morgue, adjacent to Admitting Station.
3. Tables and chairs are present for putting on PPE.
4. Contains First Aid/Eye Wash table.
5. Contains sink for hand washing or other sanitizing alternative.
6. PPE must be removed prior to departing the morgue area.

MORGUE FORENSIC GROUP

TEAMS

A. **Radiology (Body X-Ray)**
This Team obtains remains. Ante-mortem body submitted for scanning by
1. Recommended
   a. 2-Autopsy experience (one Leader).
   b. 2-Assistants.
2. Recommended
   a. Protective
   b. Log book.
   c. 1 - table.
   d. X-Ray Imager.
   e. Digital x-ray equipment on-
3. Full body radiographs should be performed
4. A log shall be kept of Number (MRN)
5. Post-mortem exam:
   a. X-rays taken, Direct (provides image screen and PC

Team: radiographs of human x-rays may also be this Team.
Staffing: Technicians with X-ray designated as Team

Equipment: clothing.

computer system or leased site.
of each body or part as required.
each Morgue Reference processed.

preferably by digital Radiography (DR) system directly to computer storage).

Diagram labels:

Admitting Group — Remains Holding for Admitting (Refrigerated Trailers); Remains Storage for Release (Refrigerated Trailers)

Forensic Group — Admitting/Escort Station; Photography/Personal Effects Collection; Pathology; Anthropology; Fingerprinting; Casketing (if needed); Embalming (if needed); DNA; Odontology; Radiology

   b. Images are labeled with MRN information before digitization.
   c. Computer automates digitizing and data entry.
   d. Review is done by anthropologist or pathologist for specific characteristics that may be helpful in victim identification (anomalies) and/or additional exams indicated.
   e. Print copies for the Disaster Victim Packet (DVP) folder if appropriate.
   f. Burn CD with radiograph images (TIFF or JPG format) for DVP.
6. Ante-mortem records entry/scanning and comparison.
   a. MIC advises of receipt of body x-rays with medical records.
   b. Body escort retrieves x-rays from file room.
   c. Scan in (digitize) ante-mortem x-rays to computer.
      i). Print images for VIP ante-mortem file.
   d. Burn CD with scanned radiograph images (TIFF or JPG format) for VIP ante-mortem file.
   e. Body escort returns x-rays to file room.
7. Radiographic identification should be documented by two forensically qualified individuals according the procedures established by the Medical Examiner.

B. **Pathology Team:**
The Pathology Leader shall assure that initial triage and examinations of remains is documented. This Team works in conjunction with Photography and Personal Effects Teams as remains are first inspected.
1. Recommended Staffing (if autopsy is required, 2 stations would need to be staffed):
   a. 1-Pathologist or Forensic Pathologist (designated as Team Leader).
   b. 1-Autopsy Technician.

     c.   1-Scribe (clean hands)

     d.   At least two Mortuary Officers should remain available in the morgue for doing view ability assessments.

  2.   Recommended Equipment:

     a.   Protective clothing.

     b.   2-tables.

     c.   4-chairs.

     d.   Pathology Instrument Kit.

     e.   Portable autopsy tables.

     f.   Lighting.

  3.   The Pathology Leader shall meet with the Medical Examiner and the Morgue Operations Branch Director or designee to establish "disaster-specific" guidelines and protocols for specimen collection, body examination, and/or autopsy.

  4.   "View ability" of remains assessment is performed by two Mortuary Officers and noted in the DVP. (View ability for embalming considerations affects Jaw Resection Policy.

  5.   Remains are photographed (Photography Team) upon receiving and opening the remains pouch.

     a.   Unassociated fragmentary human remains are segregated for additional numbering by Admitting Team (MRN a, b, c, etc.) if necessary.

     b.   Every photo shall contain the MRN.

  6.   Remains (See Remains Classification Policy) are classified as:

     a.   Complete Human Remains (C/HR).

     b.   Common Tissue Human Remains (CT/HR).

  7.   Personal effects (See Personal Effects Policy,) are documented and recovered (often in concert with Photography Team) upon examination by pathologist.

     a.   Descriptions should be generic, e.g., "yellow metal ring with clear colorless stone" (not: "gold diamond ring").

     b.   Photography is done by digital camera.

     c.   Property inventory/chain of custody forms are completed with MRN.

     d.   Personal information observable on effects shall be recorded, e.g., inscription on ring.

     e.   Initial cleaning is OK if not sealed for evidence.

     f.   Original inventory form goes with effects, copy to DVP file folder.

  8.   Processing involves initial body exam or autopsy, photography, and triage determination to instruct Body Escort for follow-up Teams to be used in any appropriate order:

     a.   Pathology examination.

     b.   Identification photo (cleaned up) taken.

     c.   Toxicology specimens collected (if applicable).

     d.   Anthropology work-up (if applicable).

     e.   Fingerprints (if applicable).

     f.   X-Ray (if applicable) and review by anthropologist and/or pathologist.

     g.   Odontology (if applicable).

     h.   DNA Collection.

     i.   Embalming/Casketing (if applicable).

C.   **Anthropology Team (Morgue)**:

This Team may assist in 4 functional areas of the MI-MORT operation. These include the documentation of the incident site and associated material (separate Team), assisting with the initial documentation and sorting of human remains in the morgue Pathology triage, evaluation of body x-rays for adequacy and identifying features, and providing comprehensive forensic anthropological documentation of human remains in the morgue.

  1.   Recommended staffing:

     a.   Forensic Anthropologists (one designated as Team Leader).

b.   1 - Scribe.
2.   Recommended Equipment:
   a.   Protective clothing.
   b.   Log book.
   c.   2 - tables.
   d.   4 - chairs.
   e.   Anthropology Kit.
3.   Comprehensive documentation is made of human skeletal and other fragmentary remains including assessment of bone, bone portion, side, chronological age, sex, stature, ancestral affiliation, ante-mortem trauma, and pathological conditions.
4.   These attempts may require the removal of soft tissue in order to study the bone surfaces macroscopically.
5.   Coordination with Pathology and DNA Teams may be an important consideration in cases of major fragmentation of human remains, especially where there has been submersion and bone is the primary tissue being recovered.
6.   Attempts will be also be made to emphasize skeletal features that could potentially provide a positive identification (primarily through radiographic comparison).
7.   Post-mortem x-rays are reviewed by anthropologist or pathologist for specific characteristics that may be helpful in victim identification (anomalies) and/or additional exams indicated.
8.   Examination forms are completed for the DVP.

D.   **Fingerprinting Post-mortem Team**:
This Team obtains post-mortem friction ridge impressions, i.e., fingerprints, footprints, and/or palm prints, where possible of all victims.
1.   Recommended staffing:
   a.   2-3 - Fingerprint Specialists (one designated as Team Leader).
2.   Recommended Equipment:
   a.   Protective clothing.
   b.   Log book.
   c.   2 - tables.
   d.   4 - chairs.
   e.   Fingerprint Post-mortem supplies to include fingerprint cards, handprint lifters, mikrosil, ink, magnetic powders and magnetic brushes, among other supplies, should be available.
3.   A log shall be kept of each MRN processed.
4.   Collect known finger   and/or palm impressions.
5.   Techniques available:
   a.   Clean the fingers of all foreign matter such as dirt, grease, blood, etc. Washing the fingers with soap and water will suffice in most circumstances.
   b.   If the skin is firm, a small soft bristled brush can be used to clean the fingers by lightly brushing in the direction of the ridge flow.
   c.   Make sure the skin is fully dry prior to impression collection
   d.   In some instances, it may be necessary to amputate the fingers or surgically remove the skin in order to obtain legible prints. Authorization from the Medical Examiner (or designee) must be granted prior to employing either of these methods.
   e.   At certain stages of decomposition, the epidermis can be easily separated from the dermis with a shallow cut around the wrist or a shallow cut below the first finger joint to release the skin. After cleaning and drying, the skin can be slipped over the technician's own finger like a glove and printed.
   f.   When fingers are pliable and intact but wrinkles prevent adequate printing, an injection of tissue builder with a hypodermic syringe may satisfactorily remove the wrinkles.

g. The powder method may be used if the skin is intact.
h. When wrinkled or mummified fingers are encountered, Duplicate or similar silicone plastic impression material is often the most expedient and effective method of obtaining legible prints.
i. The Duct Seal Method may be successful with wrinkled mummified fingers and water soaked fingers in the early stages of decomposition. Other pliable materials of similar consistency may also be used (e.g., Play Dough, Silly Putty, etc.).
j. In most cases of incineration when the hands are tightly clenched, amputation of the fingers is usually necessary. In extreme cases, photography may be the only method for recording these prints due to the fragile condition of the skin.
k. Photocopy of inked impressions is made for DVP file (the photocopiers in Admitting or Photography may be used for this purpose.
l. Original print cards are placed into manila envelopes (for protection) and labeled with the MRN.
m. Original inked impressions are grouped and couriered to Fingerprint Ante-mortem Team (or other Fingerprint Identification Team as determined by Medical Examiner or law enforcement) for comparison with known print sources.

E. **DNA Collection Team**:
    This Team is responsible for the collection and preservation of biological material specimens from remains for DNA testing at a laboratory.
    1. Recommended staffing:
        a. 2 - DNA Specialists (one designated as Team Leader).
    2. Recommended Equipment:
        a. Protective clothing.
        b. Log book.
        c. 2 - tables
        d. 4 - chairs.
        e. DNA Instrument Kit.
    3. Team Leader ensures that specimen collection procedures avoid cross contamination by training Team personnel on:
        a. Using new gloves for each set of remains,
        b. Using new, disposable scalpel blades for each set of remains,
        c. Using appropriate agents and methods to clean autopsy saw blades, scissors, or other non-disposable instruments used between set of remains, and
        d. Using new collection containers appropriate for each specimen collected.
    4. Collected specimens are maintained in a secured freezer or other appropriate secured space until couriered transfer to the DNA lab can be made.
    5. If the remains specimen was too small to sample and collected in its entirety for lab testing, notation will be made on the DNA report and the Body Escort will be instructed to return the DVP to the Admitting Station.
    6. Log books are maintained to record each MRN processed for:
        a. Collector's name,
        b. Specimen type (i.e., portion, entire specimen, none-unsuitable for collection), and
        c. Disposition (freezer storage or other appropriate secured space, or transfer to DNA lab).

    d.   At certain stages of decomposition, the epidermis can be easily separated from the dermis with a shallow cut around the wrist or a shallow cut below the first finger joint to release the skin. After cleaning and drying, the skin can be slipped over the technician's own finger like a glove and printed.

    e.   When fingers are pliable and intact but are dehydrated an injection of tissue builder with a hypodermic syringe, or soaking in the tissue builder may re-hydrate the skin prior to collection.

    f.   The most efficient method, based on the condition of the skin, will be used to collect the known impressions. This could include collection with ink, powders, casting material or photography.

    g.   .Photocopy of inked impressions is made for DVP file (the photocopiers in Admitting or Photography may be used for this purpose. (WHAT IS THIS DVP File? IS THIS STANDARD REQUIRING AN ORIGINAL COPY OF THE KNOWN IMPRESSIONS AND ALSO A SECONDARY COPY?)

    h.   Original print cards are placed into manila envelopes (for protection) and labeled with the MRN. (WHAT IS THE MRN?)

    i.   The known impressions are stored and examined by the Fingerprint Ante-mortem Team (or other Fingerprint Identification Team as determined by Medical Examiner or law enforcement) for comparison with known print sources.

F.   **Odontology Post-mortem Team:**
This Team assures that accurate dental charting and radiographs are performed and that the post-mortem information collected is recorded for cross-matching with ante-mortem dental records (processed in the Ante-mortem Odontology Team).

    1.   Recommended staffing:
        a.   2 - Forensic Odonatologists (one designated as Team Leader).
        b.   2 - Additional forensic dental personnel
    2.   Recommended Equipment:
        a.   Protective clothing.
        b.   Log book.
        c.   2 - tables.
        d.   4 - chairs.
        e.   DEXIS digital dental x-ray system.
        f.   Hand held dental X-Ray unit.
        g.   WinID dental laptop computer and printer.
        h.   Odontology Post-mortem Instrument Kit.
        i.   Digital Camera.
    3.   The MI-MORT policy regarding jaw resection should be closely followed.
    4.   The MI-MORT Odontology Protocol Guide should be closely followed.
    5.   Perform post-mortem dental exam.
    6.   Digital x-rays taken:
        a.   are labeled with MRN information, and
        b.   DEXIS number format shall include the MRN.
    7.   Dental charting shall be done by two forensic odonatologists.
    8.   WinID shall be used for post-mortem data entry.
    9.   All post-mortem dental records shall remain with the ante-mortem dental section after data entry into Win ID.

MORGUE ADMITTING/PROCESSING GROUP TEAMS:

A. **Admitting Team:**
    This Team tracks and records all remains entering and leaving the mortuary process and assigns Body Escorts to each set of remains.
    1. Recommended Staffing:
        a. Admitting/Processing Group Supervisor.
        b. 1 - Assistant (non-escort).
    2. Recommended Equipment:
        a. 2 - tables.
        b. 4 - chairs.
        c. Logbooks or log forms.
        d. Necessary office supplies.
        e. Disaster Victim Packets.
            i).   Prepare DVP processing packets (pre-numbered with labels on each form, extra labels in folder) with basic VIP forms and/or additional forms as required by Medical Examiner.
            ii). Start with only 20 folders to allow for changes discovered as processing begins.
        f. Two-way communications equipment.
        g. Computer.
        h. Photocopier/printer.
        i. Barcode label maker.
        j. Supply of necessary forms for all Teams of the morgue.
    3. Admitting maintains the On-Duty/Off-Duty Log book (Morgue Sign-In Log,) to document individuals staffing the morgue.
    4. Each time human remains are brought into the morgue, regardless of the reason, they MUST ENTER through the Admitting Team.
    5. Admitting assures that every container, pouch, and evidence bag, containing recovered human remains is assigned a "Morgue Reference Number" (MRN) as determined by Medical Examiner.
    6. The MRN shall be affixed to the human remains container with a waterproof tag or label in indelible ink.
    7. Admitting shall maintain a Morgue Admitting Log. The log should reflect the date, time, escort assigned, and destination of the remains processed.
    8. MRN assignment is entered in log book:
        a. Normally the field assigned bag number will be retained throughout, for example DS-0001
        b. Body Escort is assigned and handed only one DVP folder at a time.
        c. Individual numbers are issued for unassociated fragmentary remains.
            i).   This may occur upon triage at Pathology, Photography, and Personal Effects sorting.
            ii). Additional Escort(s) are assigned with new folder(s) for additional unassociated remains.
            iii). Newly discovered unassociated remains are given sub numbers of original, for example DS-0001a, b, etc. (See Commingled Remains Found in Same Disaster Pouch Policy)
        d. The Admitting Leader shall ensure that a DVP is created containing necessary forms and that the outer jacket of the DVP has the MRN present in bold, legible, large letters and numbers. The DVP shall be given to the assigned escort along with any special instructions prior to the movement of the human remains.
        e. Upon completion of processing, Escort returns with DVP folder to Admitting to verify:
            i).   Teams involved in processing,
            ii). Copies of personal effects inventories and fingerprint cards,
            iii). Signatures of personnel processing the remains, and
            iv). Signature of escort.

    f.   Completed DVP folders are logged out and couriered to MIC for data input. In the event it is necessary to release a DVP to another Team of the morgue the Admitting Leader shall maintain a record of whom the DVP was released to and when it was returned.

B.   Remains Escort Team:

Body Escorts accompany human remains through the mortuary process and ensure proper documentation is complete and attached at each morgue station.

    1.   Recommended Staffing:
        a.   Escort Team Leader
        b.   6 - Escorts shall be staged near or next to the Admitting Team.
        c.   Volunteers from a funeral director and embalmers disaster team work well as Escorts. Escorts will be carefully evaluated regarding their personal medical fitness taking into account conditions such as heart problems, high blood pressure, pregnancy, special impairments, etc. and for their experience associated with handling dead human remains. Stress factors will also be monitored carefully on all personnel serving as Escorts.
    2.   Escort duties include:
        a.   Moving assigned remains through processing stations as directed
        b.   Ensuring that processing forms are signed before moving to the next processing station.
        c.   Keeping forms clean from contamination.
            i).   Contaminated forms should be brought to the attention of Admitting where a photo copy of the form may be made for the DVP and the original, contaminated one destroyed as biomedical waste.
            ii).   Alternatively, a replacement form may be completed at the station where the contamination occurred to replace the contaminated one.
        d.   Delivering the completed DVP back to admitting prior to delivery of the remains to storage areas.

C.   Photography Team:

The Photography Leader shall assure that quality photos are made of each set of remains that enters the Team.

    1.   Recommended Staffing:
        a.   2 - Photographers (one designated as Team Leader).
        b.   One may be called on to serve as a floating photographer to assist with Pathology, Odontology, Fingerprints, Anthropology, or DNA if needed.
    2.   Recommended Equipment:
        a.   Protective clothing
        b.   1 - table.
        c.   2 - chairs.
        d.   2 - ladders.
        e.   Digital camera.
        f.   Computer (shared with Personal Effect Team)
        g.   Photocopier/printer (shared with Personal Effect Team)
    3.   Remains are photographed upon receiving and opening the remains pouch (often in concert with Pathology Team).
        a.   Every photo shall contain the MRN.
        b.   Digital photos are stored on networked computers and labeled appropriately with the MRN
    4.   If necessary, 35mm photographs are also taken.
    5.   Since photos of fatalities are of a sensitive and evidentiary nature, the Team Leader shall maintain stringent security and protection over all film or digital media taken until custody has been passed to the Admitting Leader or designee.

6. Printing of photographs will be as directed by Medical Examiner policies. Generally, a set of photos will be produced in "proof sheet" form (typically 4-6 photos per page) for inclusion into the DVP. However, this printing may be conducted at a separate place and time from initial processing of the remains.

7. The Team Leader shall be authorized to photograph human remains as outlined in the on-site plan but shall not have the authority to take candid or personal autopsy pictures around the morgue area. Candid pictures taken will be considered UNAUTHORIZED. The MI-MORT Team Code of Conduct clearly prohibits unauthorized photographs or video.

D. **Personal Effects Team:**

This Team is responsible for the collection, cleaning, accountability, and storage of personal effects found on deceased victims. (Personal effects found at the disaster site, unassociated with remains, are not typically processed through the morgue.) The ICS Commander, Medical Examiner, and other authorities may elect to have all personal effects stored at a separate Personal Effects Security depot until they can be released to next of kin.

1. Recommended Staffing:
   a. 2 - Evidence Technicians (one designated as Team Leader).
   b. One may be called on to serve as a floating member to assist with newly discovered items at Pathology, Radiology (Body X-Ray), Fingerprints, Dental, Anthropology, or DNA if needed.

2. Recommended Equipment:
   a. Protective clothing.
   b. Logbooks.
   c. 1 - table.
   d. 2 - chairs.
   e. Bags and sealing supplies.
   f. Cleaning supplies.

3. The Team Leader shall assure:
   a. Personal Effects Policy is followed,
   b. Personal effects are inventoried (i.e., personal papers in wallets are identified individually),
   c. Personal effects are packaged and tagged, and
   d. A log is maintained

4. Personal effects are photographed, documented and recovered upon examination (often in concert with Pathology Team).
   a. Photography by digital camera with MRN displayed in the photo.
   b. Property inventory/chain of custody forms are completed with MRN.
   c. Record personal information observable on effects (initials on jewelry, names in wallets, driver licenses, credit cards, etc.)Initial cleaning is permissible if not sealed for evidence or needed for subsequent DNA testing.

5. Original inventory form to remain with effects, copy to DVP file folder.

6. Personal effects are grouped and couriered to designated Personal Effects Security depot (as determined by Medical Examiner or law enforcement) by a designated escort.
   a. If inventory form is not a carbonless, make copy upon release to Personal Effects Security (to stay with the effects) and with the original returned to Identification Team for DVP file.

7. The Team Leader shall be responsible for the custody and security of all items and for obtaining signatures on the proper release or chain of custody forms when transferring personal effects between the morgue Teams or to the Personal Effects Security area, if applicable.

8. Under certain "disaster-specific" conditions, this Team will be responsible for cleaning, sanitizing, and re-photographing personal effects before release.

E. **Embalming Team:**
This Team ensures that thorough disinfection, preparation, and minor re-constructive cosmetic procedures are accomplished on each body or part of body when authorized by the appropriate NOK or at the direction of the Medical Examiner.
   1. Recommended Staffing:
      a. 1-Mortuary Officer who is a licensed Embalmer as Team Leader
      b. 1 Assistant
   2. Recommended Equipment:
      a. Protective clothing.
      b. Log book.
      c. 2 tables.
      d. 4 chairs.
      e. Embalming Kit.
   3. Embalming procedures shall not be performed on anybody or body part unless appropriate approval has been granted in writing by the legal Next-of-Kin (NOK) or legal authority has been granted by Medical Examiner or MDHHS.
   4. Appropriate embalming reports shall be completed and inserted into the DVP.
   5. "Disaster-specific guidelines" for embalming should be established following MI-MORT Embalming Policy as closely as possible.
   6. MI-MORT embalmers shall use embalming and minor re-constructive cosmetology techniques that will enhance the possibility of "view ability" of the deceased.
   7. Embalming chemicals are to be ordered on site (not part of DPMU due to shelf life) as needed.
   8. For details of the embalming process, see Embalming Guidelines in the Policy section of the OPERATIONS MANUAL

F. **Casketing Team:**
This Team is charged with placing human remains in a casket for the disposition of the remains to a designated site.
   1. Recommended Staffing:
      a. 1- Mortuary Officer (designated as Team Leader),
      b. 1- Assistant.
   2. Recommended Equipment:
      a. Protective clothing.
      b. Log book.
      c. 2 - tables.
      d. 4 - chairs.
      e. Casket trucks.
      f. Tags, markers.
   3. Medical Examiner determines if unidentified remains are to be casketed on-site.
   4. Caskets are to be ordered on-site.
   5. Place remains in caskets as necessary. The outside of the casket shall bear the name of the deceased and/or the MRN as appropriate on metal, weather proof tags.
   6. Maintain a log reflecting the disposition of the remains. The log shall identify the date, time, of casketing and disposition back to Remains storage.

G.   **Remains Holding Trailers (Refrigerated):**
1.   Storage of Remains Received from Search and Recovery Center
This Team will manage trailers or other storage facilities and keep an accurate log of human remains delivered from the disaster site for release to the Admitting Team of the morgue.
   a.   Recommended Staffing:
      i).   1- Mortuary Officer (designated as Team Leader),
      ii).   1- Assistant.
      iii).   There should be 2 ground personnel (Remains Escorts) who will transfer the remains by way of gurney to the admitting area of the morgue.
   b.   Recommended Equipment:
      i).   Protective Clothing.
      ii).   Clipboard and log.
      iii).   Heavy gloves.
      iv).   Flashlight.
      v).   Jackets for refrigerated areas.
      vi).   Body gurneys for ground personnel.
      vii).   Refrigerated trailers (no wooden floors for clean ability).
      viii).   Padlocks for trailers.
      ix).   Deodorizing agents.
      x).   The logs shall reflect the field assigned reference number and receipt of remains delivered from the site and released for processing. Log in procedure:
      xi).   Delivering party name,
      xii).   Date/time of receipt,
      xiii).   Field assigned number(s),
      xiv).   Location of recovery (general), and
      xv).   Date/time of release to Admitting Team.
   c.   The Team Leader will monitor the refrigeration units and assure that they are properly serviced.
   d.   Recommended temperature is 35-38 degrees Fahrenheit.
   e.   The Team Leader shall assure the holding facilities are securely locked before leaving at the end of an operational period.
   f.   Company name and logo on any trailers should be securely covered (strong enough to withstand high wind and rain).
   g.   An evaluation must be made as to the number of fatalities expected to determine the holding storage capacity necessary.
   h.   If trailers are used, approximate space requirement is 20 adult whole remains per 53-foot trailer without shelving.
   i.   Distribute remains to Admitting as requested.

2.   **Storage of Remains Received from Morgue Processing:**
This Team manages trailers or other storage facilities and keeps an accurate log of human remains delivered from the morgue and released after Identification.
   a.   An evaluation must be made as to the number of fatalities expected to determine the storage capacity necessary.
   b.   If trailers are used, approximate space requirement is 20 adult whole remains per 53-foot trailer.
      i).   Capacity should be doubled by constructing shelving and lighting inside the trailers.
      ii).   Construction of loading ramps for trailers may be needed.
      iii).   Trailer doors should be positioned so that a tent covers only the doors for privacy leaving the refrigeration units available for servicing.
      iv).   Fan speed reduction switches should be installed so that when the door is opened the fan speed slows. This helps prevent excessive discharge of offensive odors.

      v).   Company name and logo should be covered on any trailers (strong enough to withstand high wind and rain).

c.   The Team Leader will monitor the refrigeration units and assure that they are properly serviced.

      i).   Recommended temperature is 35-38 degrees Fahrenheit.

      ii).   Remains In, Transfer, and Remains Out logs shall reflect the reference number and receipt of remains received from the Disaster Site Center or morgue, transferred for processing, and those released after Identification.

d.   Remains Log in procedure:

      i).   MRN,

      ii).   Date/time of receipt, and

      iii).   Location of storage (initial).

e.   Trailers should be segregated for coding of storage location:

      i).   Unidentified remains, and

      ii).   Identified remains.

f.   Additional spreadsheets may be developed for inventory of remains, relocation, or release. This is necessary, for example, when several MRN cases are associated by Dental, DNA, or other forms of identification as one individual. Such cases are grouped and moved to an Identified Remains trailer for release.

g.   Remains Log out procedure:

      i).   Victim's name or assigned case number (with all associated MRN cases listed),

      ii).   Location of storage (final),

      iii).   Date/time of release,

      iv).   Funeral home name authorized to receive remains,

      v).   Name of company receiving remains (if different from funeral home),

      vi).   Name of driver, and

      vii).   Name of team personnel releasing the remains.

      viii).   If any personal effects are released with the body, the appropriate MI-MORT Personal Effects/Evidence Release Form must be signed by the person to whom the body is released. The form shall be inserted into the DVP.

h.   Deliver all completed release paperwork to the file room.

i.   The Team Leader shall assure the storage facilities are attended at all times and securely locked before leaving at the end of an operational period.

3.   **Cleaning of Storage Trailers:**

a.   Refrigerated trailers no longer needed for storage may be cleaned and decontaminated. Normally this is done by a contracted cleaning service.

b.   However, in the absence of such service, the procedures contained in Biological Decontamination of Aluminum Floor Refrigerated Trailers may be used.

OPERATIONAL OVERVIEW – VICTIM INFORMATION COLLECTION (VIC)

The Victim Information Collection Center (VIC) should be established as quickly as possible following a disaster incident. The mission of the VIC is to receive notice from families and concerned friends of possible disaster victims. The VIC, through interviews with the NOK, collects ante-mortem information, performs data entry if applicable, and transfers data to the IRC. In addition, it transfers necessary information to the NOK and assists the Medical Examiner with notifications, if requested. It may also be co-located with other responding agencies.

A. **Recommended Staffing:**
   1. Victim Information Collection Branch Director.
   2. 4 - Group/Unit Leaders
   3. 8 - VIC Specialists, Mortuary Officers, or Medical Investigators to interview families
   4. 1- Volunteer Coordinator
   5. 1 - Behavioral Health Specialist/Chaplain
   6. 6 - IR Data Entry Specialists
   7. 1 - Odonatologist
   8. 1 - DNA Specialist
   9. 1 - Forensic Specialist to assist DNA collection
   10. 2 - Mortuary Officers for Remains Release
   11. 3 - Records Specialists
   12. 7 - Administrative Assistants (as staffing permits)
   13. 1 - IRC Specialist (as needed from Logistics)

B. **Physical Considerations:**
   1. The VIC should be located away from the disaster scene in an area that is easily accessible and easy for families to locate. The building used for the VIC should not be the same as the morgue.
   2. Adequate space for all agencies to function.
   3. Multiple hard telephone lines for phone, fax, and Internet access.
   4. Computers and printers networked to IRC.
   5. Restrooms.
   6. Office supplies.
   7. Fax (high resolution).
   8. Copying machine.
   9. Two-way communication equipment (in early stages for contact with morgue operations).
   10. Appropriate food and beverages for family members.
   11. Private rooms for consultation and interviews.
   12. Security personnel.
   13. Cable television or radio for latest news updates.
   14. Office equipment, desks, chairs, etc.

C. **Overview of Tasks and Duties:**
   1. Hours of operation and telephone numbers should be released to the public by way of a news conference. This can be accomplished by working with the ICS Information Officer (IO).
   2. The VIC should be organized and operated in such a way as to create an atmosphere of organization, calmness, professionalism, concern, and care. Accomplishing the mission of the VIC will require several agencies and volunteer organizations to coordinate together. MI-MORT personnel will work with local authorities to make the VIC operational.
   3. Maintain On-Duty/Off-Duty Log book to document individuals staffing the center. Signature cards with handwritten initials should be made for all VIC personnel since their initials are being added to documents (e.g., when initials are put on a document to account for its completed computer entry).

D. **Missing Person Information Collection Team:**

This Team manages the collection of ante-mortem data on victims reported missing.
1. VIC staff interview families and obtain personal data for input into VIP:
   a. In person,
   b. By telephone contact, and:
2. Interview Team may also coordinate collection of medical records for comparison.
3. Volunteers offered by local authorities are managed for initial training prior to assuming victim contact duties.
4. Chaplaincy and behavioral health personnel assist with grieving families and, if necessary, VIC staff.

E. **IR/Data Entry Team:**
   This Team manages the entry of ante-mortem data on victims reported missing.
   1. Each individual victim (whether known or suspected), for whom any ante-mortem information is received, will be entered into the appropriate computer database. Individual computer records are required even if multiple members of the same family are victims.
   2. The victim's "unique number" (VIP ante-mortem file) is usually assigned from arbitrarily derived set of numbers. The local Medical Examiner will determine the numbering assignments.
   3. Prior to ANY computer entry, the database will be queried by name and/or unique number to eliminate the creation of duplicate records. This procedure should be done regardless of whether a completely new entry is being made or whether additional information is being added to a current record.
   4. No ante-mortem computer record should be deleted for any reason. If a duplicate ante-mortem record needs to be removed from the active system, consult with the IRC for assistance in exporting records to a backup file.
   5. After the initial entering of all data, the records should be printed out and audited for entry accuracy at least once. When the auditing/editing is completed, the date and the editing person's initials should be noted.
   6. There are some ante-mortem records that should be scanned into the computer at the VIC. These include but are not limited to photographs.
   7. It is the responsibility of all personnel to inform the IRC of all computer problems when they occur. Unauthorized personnel should not attempt to fix problems on their own.

F. **Dental Records Acquisition Team:**
   This team, often one Odonatologist, contacts dental offices of victims to obtain ante-mortem charts and x-rays for comparison. (See also the Odontology protocol Guide).

G. **Family History (DNA) Team:**
   This team contacts families to obtain DNA standards of the victim and kinship samples for DNA testing.
   1. VIC should provide a separate interview room for DNA counseling to obtain:
      a. Family tree genetic profile of potential DNA donors,
      b. Buccal swab collection from family members, and
      c. Reference materials from the victim, i.e., toothbrush, razors, etc.

H. **Family Affairs (Remains Release Team-Funeral Directors):**
   This team manages and documents the release of identified remains to authorized funeral homes.
   1. Documentation procedures will be determined by Medical Examiner.

2. Notify funeral home of release status following death certificate completion.
3. Notify Remains Storage of identification and potential release.
4. Coordinate release with funeral home and delivery of death certificate.
5. Remains Log out procedure:
    a. Victim's name (with all associated MRN cases listed),
    b. NOK authorizing release,
    c. Funeral home name authorized to receive remains,
    d. Name of company receiving remains (if different from funeral home),
    e. Name of driver,
    f. Date/time of release, and
    g. Name of Team personnel releasing the remains.
    h. Direct driver to Remains Release trailers with necessary authorizing paperwork.
    i. Return all files to File Room and sign them back in.

I. **Records Management Team:**
    This team manages and documents the storage of physical VIP ante-mortem file folders in conjunction with the system set up by the Medical Examiner in the Morgue Identification Center. See also, Records Management Policy.

J. **Support Personnel:**
    Because VIC operations are normally at a location away from morgue operations, the center needs to operate as a sub ICS system while maintaining true reporting alignment to the Operations Section. Support staff consist of a Supplies/Facilities Unit leader to augment Logistics Section issues, a Documentation Unit to augment Planning Section issues (e.g., report input for IAP preparation), and an Administrative Unit to augment Administration Section issues (e.g., time and travel). These personnel arrange logistical support and provide workload data as needed. They also arrange courier services for materials received from families to MIC for distribution:
    1. VIP interview forms,
    2. Photos, documents, medical records for VIP ante-mortem file,
    3. Dental records for Ante-mortem Odontology Team,
    4. Body X-Rays to Radiology (Body X-Ray) Team for scanning,
    5. Fingerprint records for Fingerprint Ante-mortem Team,
    6. Direct reference DNA specimens (toothbrush, razor, etc.) for DNA lab, or
    7. Buccal swabs from family for DNA lab.

K. **VIC General Work Flow Diagram:**
    The Medical Examiner will dictate how reports of missing persons will be managed. The chart below illustrates one method for managing the flow of information at a call center.

MI-MORT OPERATIONS MANUAL

Missing Person Report Processing Flow Chart
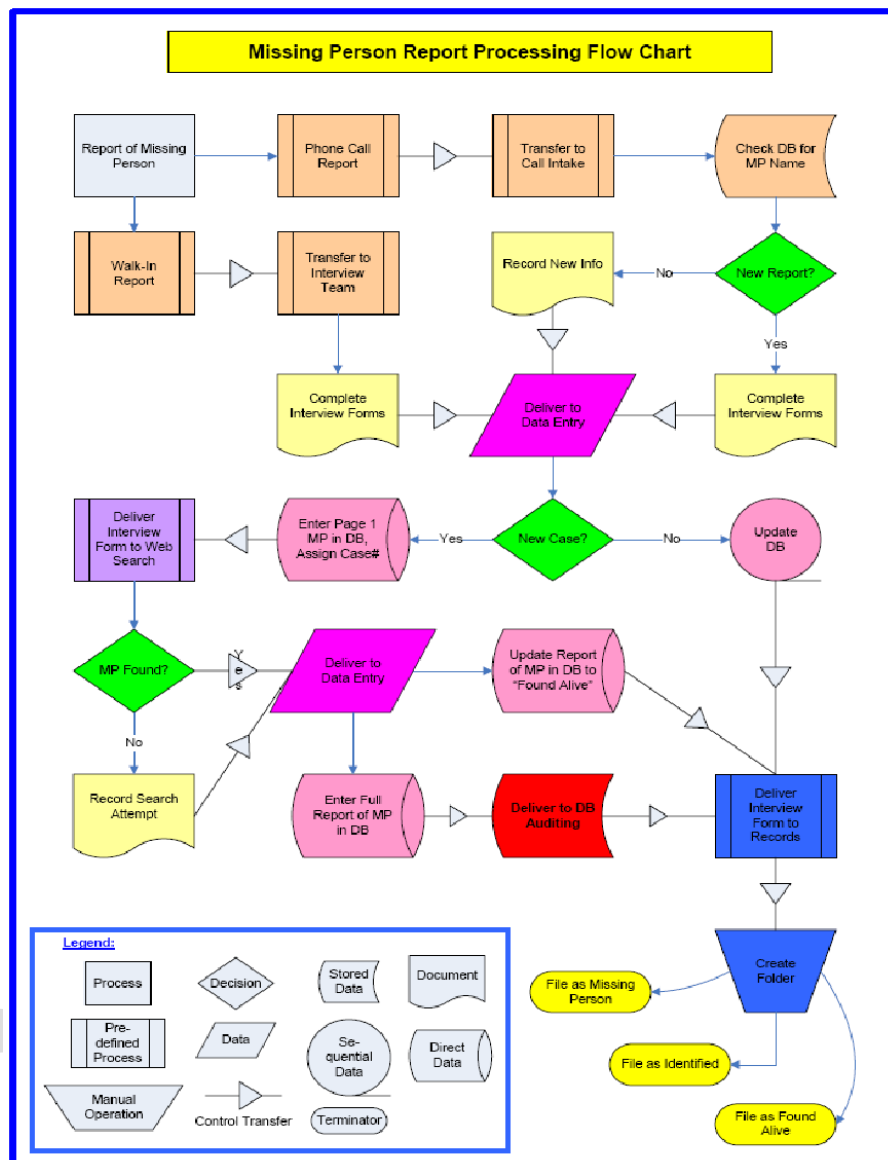
OPERATIONAL OVERVIEW – MORGUE IDENTIFICATION CENTER BRANCH

The MI-MORT Commander should provide regular updates to all Team members on the status of the identification process. The Morgue Identification Center Branch coordinates the remains identification processing functions including:

- Post-mortem VIP data entry,
- VIP data analysis of ante and post-mortem indicators for leads to identification,
- Ante-mortem Fingerprint and Odontology Teams,
- Coordination of body x-ray comparisons,
- Channeling positive identification reports to the Medical Examiner, and
- File management of:
    - DVP file folders,
    - VIP ante-mortem missing person reports, and
    - Presumptive death certificates, if applicable.

In the absence of designation of duty assignments by the Medical Examiner, the following may be used to organize the Morgue Identification Center Branch.

The Identification Verification Unit Leader is responsible for reviewing all pertinent ante and post-mortem data and any other relevant information for the purpose of making positive identifications of deceased victims. The Verification Unit Leader coordinates the assembly of information indicating a potential identification for presentation to the Medical Examiner for approval. This may include reports of positive identification by visual, dental or fingerprint comparison or other means.

Prior to final review, the ID/Release Review Specialist will cross match ante and post-mortem files to examine for any conflicting indicators (significant differences). The Morgue Identification Center Team should meet regularly to review the potential matches and determine whether the information is sufficient to recommend a positive identification to the local Medical Examiner. If necessary, the Identification Team **may** call upon specialists to provide input and review such as:

- Forensic Odonatologist,
- Forensic Pathologist,
- Forensic Anthropologist,
- Fingerprint Specialist,
- DNA lab representative.

If the Team is in agreement on a positive identification a Report of Positive Identification shall be completed, submitted to the Medical Examiner for approval, and placed in the VIP ante-mortem folder of the victim identified. All related post-mortem files (in the case of fragmented human remains) shall be assembled into the primary VIP ante-mortem file. The information will be returned to the ID/Release Review Specialist who will initiate:

- Generation of the death certificate,
- NOK notification procedures, and
- Release procedures managed by the Family Affairs Team (in the Victim Information Collection Data Branch)

If the Team cannot conclude that the information positively identifies a victim, the files will be returned to the ID/Release Review Specialist with a notation of why the Team cannot support identification. The ID/Release Review Specialist will attempt to obtain additional supporting information that will assist in the identification process.

This Team manages a variety of tasks all of which are focused on establishing identification of victims. The Medical Examiner may incorporate his or her Medical Investigations staff into this Team including assignment of a Chief Investigator as Team Leader.
1. Recommended Equipment:

    a.   Adequate space for all agencies to function if multiple, e.g., law enforcement, vital statistics, etc.

    b.   Multiple hard telephone lines for phone, fax, and Internet access.

    c.   Computers and printers networked to IRC.

    d.   Color Laser printer for digital photos.

    e.   Restrooms.

    f.   Office supplies.

    g.   Fax (high resolution).

    h.   Copying machine(s).

    i.   Two-way communication equipment.

    j.   Private rooms for consultation and interviews.

    k.   Security personnel.

    l.   Cable television or radio for latest news updates.

    m.   Office equipment, desks, chairs, etc.

2.   Maintain On-Duty/Off-Duty Log book to document individuals staffing the Team. Signature cards with handwritten initials should be made for all MIC personnel since their initials may be added to documents (e.g., when initials are put on a document to verify its computer entry).

3.   Location should be separate from morgue and serve as an adjunct to Medical Examiner's investigative staff.

4.   Contact dentists, doctors, and hospitals for requesting records indicating points on which identification could be made.

A.   **Data Entry Team:**

This Team performs data entry into VIP including:

1.   Morgue processing documentation (DVP):

2.   Personal effects verification

3.   Processing Teams reports:

    a.   Pathology exams - body description and trauma,

    b.   X-ray,

    c.   Fingerprints,

    d.   Odontology,

    e.   Anthropology, and/or

    f.   DNA.

4.   Process digital photography from DVP:

    a.   Label each photo file in computer with MRN and store on server,

    b.   Digital photographs stored in the computer server should be titled with the MRN followed by DP01 through DP0x to designate the number of digital photographs taken (be sure to include the leading zero for numbers 01 through 09).

    c.   Print thumbnails for each DVP folder, and

    d.   Burn CD of all photos for each DVP.

B.   **Verification Unit Team:**

This Team coordinates identification and notification procedures.

1.   Recommended staffing:

    a.   2 - Medical Investigators (as ID/Release Review Specialists)

2.   Initiate the preliminary ante-mortem/post-mortem record comparisons based on a variety of possible match points (e.g., scars, tattoos, surgical procedures, unique clothing, other unique personal effects such as a ring with a specific engraving, etc.).

    a.   Notify Verification Unit Leader or others assigned about potential identification or leads, or

    b.   Contact family for additional information if applicable.

3.   Receive identification match data for presentation to the Verification Unit Leader from:

    a.   Odontology,

    b.   Fingerprints,

    c.   Body X-ray,

    d.   Anatomic features (pathology/anthropology), or

    e.   DNA lab results.

4. Assemble all related files of a potential identification case (VIP and MRN folders) and examine for logical inconsistencies (e.g., history of amputation but body part is present) prior to presentment to the Verification Unit Leader for review.
5. Prepare death certificate as directed for Medical Examiner signature.
6. Initiate notification of families (procedures to be determined by Medical Examiner) for positive identification to obtain:
   a. If applicable, follow NOK Notification of Positive Identification policy,
   b. Complete a NOK Notification Report,
   c. If fragmentary or less than complete remains are identified, obtain written family directive on preferences for notification and handling of additional parts identified later (Additional Remains Release Election,
   d. Funeral home name, and
   e. Signed authorization from next-of-kin identifying funeral home of choice, (Remains Release Authorization)
7. Deliver release authorization and death certificate to Remains Release Team.

C. **Fingerprint Ante-mortem Team:**

This Team compares ante-mortem fingerprint, footprint, and/or palm print records with prints obtained from victims (processed in the Fingerprint Post-mortem Team). If the existing records are in the State of Michigan database, the Team will obtain those records.

1. Recommended staffing:
   a. 2 - Fingerprint Specialists (one designated as Team Leader)
   b. The Ante—mortem Team members are typically the same members as the Post-Mortem Team
2. Recommended Equipment:
   a. Scanner for fingerprint records. NOTE: Only specific scanners have the correct specifications for latent and known impressions
   b. Multiple hard telephone lines for phone and fax
   c. Computer and printer networked to IRC.
   d. Office supplies.
   e. Fax (high resolution). . NOTE: Fingerprint records cannot be faxed.
   f. Copying machine.
   g. Office equipment, desks, chairs, etc.
3. All ante-mortem records shall remain with the VIP ante-mortem folder except when being processed or examined for final identification comparison.
4. Original post-mortem print cards, received by courier from morgue, shall be logged in and maintained in secure files (copies exist in the DVP) in MRN order.
5. The MI-MORT policies regarding Fingerprint Identification and Records Management should be closely followed.
6. Receive notice from Records Management that ante-mortem fingerprint records have been received and filed with the VIP ante-mortem folder.
7. Retrieve original fingerprint portion of VIP record for comparison.
8. Maintain a log of all positive identifications made.
9. Positive identification verification forms require two examiners to concur on ID (Report of Positive Identification. (Do these forms already exist?)
10. Deliver positive identification report, original MRN print records, and ante-mortem records used to Medical Investigation Team to initiate final processing.

D.   **Ante-mortem Odontology Team:**
This Team shall assure that ante-mortem information collected is recorded for cross-matching with post-mortem dental records (processed in the Odontology Post-mortem Team). While the processing of victim remains stays operational in the Morgue Branch, this Team reports to the Odontology Team Leader who oversees both post-mortem and ante-mortem teams. Upon completion of morgue processing, this team continues to report to the Morgue Identification Center Branch Director.
   1.   Recommended staffing:
      a.   4 - Forensic Odonatologists (one designated as Team Leader).
   2.   Recommended Equipment:
      a.   Scanner for dental x-ray records.
      b.   Multiple hard telephone lines for phone and fax.
      c.   Win ID Computer and printer networked to IRC.
      d.   Office supplies.
      e.   Fax (high resolution).
      f.   Copying machine.
      g.   Office equipment, desks, chairs, etc.
      h.   All ante-mortem dental records shall remain with the dental ante-mortem section until final identification is complete.
      i.   (12) mouth mirrors
      j.   (12) pair forceps
      k.   (12) pair of scissors Large
      l.   (12) scalpel blade holders
      m.   Disposable scalpel blades
      n.   Pair of Lopers
      o.   Vinyl gloves sizes small, medium, and large
      p.   Personal protective clothing misc. (gloves, face shields, booties, masks, etc.)
      q.   Nomad x-rays
      r.   Computers with Dexis and win ID installed
      s.   3-4 Dexis sensors
      t.   Composite UV light 395 NM
      u.   Isopropyl alcohol
      v.   Blue shop gloves
   3.   The MI-MORT policies regarding Odontology Protocol Guide, and Records Management, should be closely followed.
   4.   Win ID shall be used for ante-mortem data entry.
   5.   Receive notice from Records Management that dental records have been received and filed with the VIP ante-mortem folder.
   6.   Retrieve ante-mortem dental portion of VIP record for comparison.
   7.   Retrieve post-mortem dental portion of DVP record for comparison, if necessary.
   8.   Maintain a log of all positive identifications made.
   9.   Make printed images of comparison for VIP and DVP folders.
   10. Positive identification verification forms require two forensic odonatologists to concur on ID (Report of Positive Identification).
   11. Deliver positive identification report, ante-mortem dental records, and post-mortem dental records used to Medical Investigation Team to initiate final processing.

E.   **Records Management Team (File Room):**
(If separate from Medical Examiner's normal file system)

This Team provides Records Management for disaster only records and is normally kept segregated from the filing of routine Medical Examiner cases.

1. Recommended staffing:
   a. 1 - Team Leader (either: Medical Investigator, Evidence Specialist, or Mortuary Officer)
   b. 3 - Assistants to serve as records clerks or file managers.
2. Recommended Equipment:
   a. Multiple hard telephone lines for phone and fax.
   b. Computer and printer networked to IRC.
   c. File cabinets (with locks if location is not inside a securable room).
   d. Office supplies.
   e. Fax (high resolution).
   f. Copying machine
   g. Office equipment, desks, chairs, etc.
   h. The MI-MORT policies regarding Ontology Protocol Guide and Records Management should be closely followed
3. Signature cards with handwritten initials should be made for all File Room personnel since their initials may be added to documents (e.g., when initials are put on logs to verify records release and return).
4. Information Security
   a. ALL information is confidential to those assigned to assist with the disaster.
   b. The Medical Examiner, or designee, remains the official Records Custodian for purposes of release of information.
   c. No information is to leave the File Room unless it is properly logged out by the Records Management Team to approved personnel. All files must be logged in and out with "File Out" system for tracking.
   d. Serve as central receiving and distribution center with logging procedures for:
      i). Dental records,
      ii). Medical records and body x-rays,
      iii). DNA samples for testing (other than those processed by DNA Team-VIC),
      iv). Fingerprint records, however,
         (a) Fingerprint Ante-mortem Team may obtain known prints directly from law enforcement agencies for comparison.
         (b) These external source records shall be added to the VIP ante-mortem file.
5. The Records Management Team will maintain a log for ANY information that leaves the File Room. This log will note:
   a. Victim's name or MRN of case file,
   b. Exact items taken (i.e., dental or fingerprint records),
   c. Date, time, and person who checked it out,
   d. Date, time, and person who returned it and checked it back in.
6. Upon arrival in the File Room, all ante-mortem records (VIP interview forms, X-rays, photographs, etc.) must be labeled with the victim's name and/or unique number, if applicable, and filed with the primary VIP folder. Do NOT place a permanent label directly over information on them, if at all possible. Place them into separate envelopes, if necessary, that are labeled with the.
   a. Victim's name and/or unique number, and
   b. Nature of contents:
      i). Medical records,
      ii). Dental records,
      iii). Fingerprint records, etc.
7. Individual victims (whether known or suspected) will each have an ante-mortem file. Individual folders are required even if multiple members of the same family are victims.
8. ALL ante-mortem information and records received will be manually logged by the Records Management Team in two separate logs:
   a. In the individual's VIP ante-mortem file folder a running log is kept of all materials added to the file, and

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b. In the master log (printed versions of Excel spreadsheets to track records). This is maintained separately from the file folders in case a folder is missing.

9. It is the responsibility of the Records Management Team and IRC Leader (or their designees) to reconcile the hard copy file folder inventory with computer files.

10. All ante and post-mortem information and records are to be handled as evidence. The chain of custody of records must be maintained via the logs. The Records Management Team must be able to account for all received information/records, whether they are in the direct possession of the Records Management Team or checked out to an authorized individual.

11. For post-mortem records, the Morgue Reference Numbering (MRN) system will be decided upon at the beginning of the incident by the Medical Examiner and MI-MORT Commander (see Human Remains Numbering System Policy, The established numbering systems must be used throughout the MIC. MIC personnel will not use any additional or alternative numbering system without prior authorization from the Medical Examiner or MIC Director.

12. File categories:
    a. Unidentified Remains case files in MRN order and containing:
        i).   DVP processing paperwork,
        ii).   Printouts of digital photos,
        iii). CD copy of all photos taken,
        iv).   Printouts of digital dental x-rays,
        v).   CD copy of all digital dental x-rays taken,
        vi).   Printouts of digital body x-rays,
        vii). CD copy of all digital body x-rays taken,
        viii). Personal effects inventory.
    b. Missing Person Reports (VIP) case files in Last Name alphabetical order and containing:
        i).   Printed VIP interview form along with original hand completed one,
        ii).   Other police missing person reports submitted,
        iii). Medical records or body x-rays submitted,
        iv).   Fingerprint records,
        v).   Dental ante-mortem records including x-rays, and
        vi).   Notes of contacts for information gathering.
    c. Identified Remains-Medical Examiner determines which master number to use and merges into one file all related materials:
        i).   VIP ante-mortem reporting forms,
        ii).   Ante-mortem medical records,
        iii). MRN folders (multiple if DNA associates parts),
        iv).   Dental records (ante and post-mortem),
        v).   DVP Photographs,
        vi).   DNA submission documents,
        vii). Body X-Ray identification (ante and post-mortem),
        viii). Fingerprints and comparisons made, and
        ix).   Remains release and funeral home documentation.
                NOTE: There are three types of Identified case files:
                ● *Identified and Released*
                ● *Identified and Ready for Release*
                ● *Identified and Unclaimed.*
    d. Court Issued Presumptive Death Certificates and related documents (if applicable):
        i).   Affidavits and supporting documents,
        ii).   Court order,
        iii). Copy of presumptive death certificate issued, and
        iv).   Record of transmittal of death certificate to State Registrar:
                (a) May require funeral director involvement,

      (b) May require family authorization for funeral home to handle,

      (c) State Registrar coordination required.

v).   If subsequently identified, an amended death certificate must be issued and all this material is moved to the Identified Remains file.

TEAM POSITION DESCRIPTIONS / OPERATIONAL CHECKLISTS

The MI-MORT Position Descriptions provide a formal method to document the basic duties of each position during a mission. MI-MORT is staffed and operated in a manner that meets the functional requirements described in this document. Because of the unique nature of every disaster incident, adaptations of mission tasks will be made as needed in conjunction with the needs of the Medical Examiner. The MI-MORT Position Descriptions on the following pages assume an optimal situation and full implementation of MI-MORT capabilities.

The forms listed in the Position Descriptions are for reference. Flexibility and adaptability are critical to a successful mission so any of these may be altered to meet the needs of a particular mission. Log sheets, in particular, are not intended to replace computer data entry. They serve as a redundant, quick reference guide to aid those working in the morgue sections when simple questions arise about what types of processing were accomplished for each case. When processing of all remains has been completed, the various logs are transferred to the Morgue Identification Center's Records Management Team.

COMMAND AND GENERAL STAFF

A. GO-TEAM LEADER

The MI-MORT Go-Team Leader is responsible for immediate response to an incident for the purpose of assessing the initial level of assistance required by the County Medical Examiner and communicating those needs to MDHHS/CHECC and the MI-MORT Coordinator. GO-Team members are designated by the MI-MORT Command Staff and may consist of MI-MORT Command Staff or Regional Team Leaders depending on the location of the disaster. The goal of the GO-Team is to arrive at the disaster within four hours of activation by MDHHS/CHECC. Telephonic contact with the Medical Examiner may precede physical arrival at the incident.

Minimum MI-MORT Classification:
- Regional Team Leader, or
- MI-MORT Commander Appointment
- D.A.R.T. Board Member

Description of Duties:
- Establishes and maintains liaison with County Medical Examiner and ICS Commander to identify needs and services until the arrival of the MI-MORT Commander.
- Assesses facilities requirements and locations for proper and timely setup and activation of the
  o MI-MORT Administrative Command Post (ACP),
  o Search and Recovery Transport Staging Area,
  o Morgue Operations Center (MOC),
  o Victim Ante-mortem Data Center (VIC),
  o Morgue Identification Center (MIC),
  o Information Resources Center (IRC), and
  o Other areas of operation as applicable.
- Communicates an Incident Situation Report (SITREP) to MDHHS/CHECC, MI-MORT Coordinator and MI-MORT Command Staff to identify level of response needed (e.g., VIC, Teams, etc.)
- Remains as the Acting Commander until the arrival of the MI-MORT Commander.

Upon Activation:

- ☐ Upon receipt of advisory or alert, confirm the notification to MDHHS/CHECC and obtain instructions from Coordinator. Obtain 24-hour contact numbers.
- ☐ Review applicable sections of the MI-MORT OPERATIONS MANUAL.
- ☐ Initiate telephone contact, if possible, with the Medical Examiner to advise of options available and potential response times.
- ☐ Collect as much data as can be obtained about the type, location, and time frame of the mission.
- ☐ Maintain ongoing communications with MDHHS/CHECC
- ☐ Respond to the incident to establish initial liaison with the Medical Examiner and ICS Commander

On-site Operations:

- ☐ Contact County Medical Examiner and ICS Commander to develop an initial SITREP to include:
  - Estimated victim count,
  - Resource needs,
  - Team support layout and requirements (e.g., ACP, MOC, VIC , MIC, IRC),
  - Staging location for responding Team members,
  - Communications procedures, and
  - Local and site hazards and personal safety precautions.
- ☐ Participate in planning and strategy sessions with local officials and communicate updates to the MDHHS/CHECC and MI-MORT Coordinator
- ☐ Evaluate the capability of resources to complete the assignment. Order additional resources if needed.
- ☐ Upon arrival of MI-MORT Commander:
  - Provided SITREP
  - Transfer all mission records, documentation, etc., to Commander, and Accept Duty reassignment

Deactivation:

- ☐ Ensure all equipment (Equipment Assignment form) is returned to the Logistics Section.
- ☐ Participate in development of a formal Team After Action Report.

B. **MI-MORT COMMANDER**

The MI-MORT Commander is responsible for managing all aspects of a MI-MORT mission from the time of activation through the return to the home jurisdiction including all resources (e.g., personnel and equipment). The MI-MORT Commander reports directly to Medical Examiner, ICS Commander or MDHHS/CHECC.

Minimum MI-MORT Classification:
- MI-MORT Commander,
- Regional Team Leader, or
- MI-MORT Program Director Appointment

Description of Duties:
- Establishes and maintains liaison with County Medical Examiner, MDHHS/CHECC, and ICS Commander to identify needs and services.
- Assigns and supervises:
  o Deputy MI-MORT Commander
  o Operations Section Chief
  o Planning Section Chief
  o Logistics Section Chief
  o Administration and Finance Section Chief
  o Safety Officer
  o Official Photographer
  o Behavioral Health Officer
  o Chaplain
- Develops and implements the Incident Action Plan (IAC).
- Ensures proper and timely setup and activation of the
  o MI-MORT Administrative Command Post (ACP),
  o Search and Recovery Transport Staging Area,
  o Morgue Operations Center (MOC),
  o Victim Ante-mortem Data Center (VIC),
  o Morgue Identification Center (MIC),
  o Information Resources Center (IRC), and
  o Other areas of operation as applicable.
- Ensures that supplies and support necessary to accomplish MI-MORT mission objectives and activities are available.
- Assigns Branch and Unit Leaders and provides direction and control.
- Interacts with the MDHHS/CHECC for the coordination of Team staffing rotation and resupply requirements.
- Attends briefings with Medical Examiner and ensures all Team personnel are kept informed of mission objectives and status changes.
- Ensures the completion of all required reports and maintenance of records for MDHHS/CHECC.
- Ensures Extended Incident Stress Syndrome (EISS) management activities for Team members are addressed.
- Prepares the deployment After Action Review.

Upon Activation:

- ☐ Upon receipt of advisory or alert, confirm the notification to MDHHS/CHECC and obtain instructions from MI-MORT Coordinator. Obtain 24-hour contact numbers.
- ☐ Establish communications with the GO-Team, if applicable, to identify staging area.
- ☐ Collect as much data as can be obtained about the type, location, and timeframe of the mission and communicate to the MDHHS/CHECC.
- ☐ Coordinate potential activation needs with GO-Team and MDHHS/CHECC.
- ☐ Activate Team readiness notification system to identify personnel ready for deployment.
- ☐ Ensure information on site conditions, prevailing environmental issues, and necessary resource requirements is obtained for MDHHS/CHECC.
- ☐ Determine the specific personal gear required for incident area climate and location.
- ☐ Brief Regional Team leaders on:
  - Current situation status,
  - Schedule for events if full activation occurs
  - Mobilization timetable, if full activation occurs
  - Types of assistance likely to be needed
  - Appropriate personal gear and equipment required for the specific disaster area climate and location
- ☐ Receive formal activation notice from MDHHS/CHECC.
- ☐ Ensure that assigned Unit Leaders are adequately briefed on and understand the following:
  - Staging area,
  - Individual, Unit, and Team performance expectations, and
  - Methods for establishing and changing Team priorities.
- ☐ Ensure all personnel review applicable position descriptions of the MI-MORT OPERATIONS MANUAL.
- ☐ Discuss and coordinate anticipated logistical requirements with the Unit Leader.
- ☐ Maintain ongoing communications with MDHHS/CHECC.
- ☐ Contact County Medical Examiner and ICS Commander and receive an initial briefing to include:
  - Incident Situation Report (SITREP).
  - Team objectives and assignment (scope of mission)
  - Operational work periods.
  - Team support layout and requirements (e.g., ACP, MOC, VIC, MIC, IRC),
  - Communications procedures,
  - Procedures for requesting supplies and equipment if through local EOC.
  - Team member medical treatment resources and evacuation procedures, and
  - Site hazards and personal safety precautions.
- ☐ With Planning Section Chief, develop and implement the Incident Action Plan (IAC).
- ☐ Ensure an initial full Team briefing for all arriving personnel is conducted to include:
  - Team organizational structure
  - Chain of command,
  - Centers layout and requirements,
  - Latest event information,
  - Environmental conditions,
  - Media issues and procedures,
  - Communications procedures,
  - Disaster Team Code of Conduct,
  - Operational work periods,
  - Team medical treatment and evacuation procedures,

- ● Process for requesting supplies and equipment,
- ● Site hazards and personal safety precautions, and
- ● Other information provided by the Unit Leaders or Team specialists
☐ Identify local and MDHHS/CHECC reporting requirements:
  - ● To whom.
  - ● Type of information to be reported.
  - ● Reporting schedule.
  - ● Means of reporting.
☐ Ensure that Section Chiefs develop a process to determine an overall operational assessment process that includes:
  - ● Functional requirements and immediate needs,
  - ● Work schedules for extended operations,
  - ● Rest and rotation periods for personnel, and
  - ● Adequacy of support facilities.
☐ Evaluate the capability of resources to complete the assignment. Order additional resources if needed.
☐ Monitor on-site coordination between the functions within the team, other responders, local officials, and the MDHHS/CHECC.
☐ Conduct regular team meetings and daily briefings. Identify:
  - ● Who should attend?
  - ● Schedule.
  - ● Unique agenda items.
☐ Evaluate on-going team operational performance in meeting established objectives to include:
  - ● Effectiveness of overall team operations,
  - ● Assessment of equipment shortages and needs,
  - ● Assurance of health and welfare needs of personnel including the need to drink fluids, obtain nourishment, and take rest periods,
  - ● Assessment of fatigue in personnel,
  - ● Assessment of signs of EISS in personnel, and
  - ● Adherence to established procedures.
☐ Ensure demobilizing Section/Unit Leaders are debriefed.
☐ Review the status of the current Team assignment and advise the local official(s) and MDHHS/CHECC whether continued effort is necessary and advisable.
☐ Ensure the development of a MI-MORT Demobilization Plan to include transition of MI-MORT Team duties to Medical Examiner procured local assistance.
☐ Brief Command and General Staff concerning terminating the mission and preparing to return to home base.
☐ Prior to the receipt of the demobilization order, provide an estimate to the MDHHS/CHECC of the personnel hours necessary for equipment clean-up/rehab of DPMU.

Deactivation:

☐ Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
☐ Ensure that personnel are assigned to assist with the breakdown of the DPMU, if necessary, and policing the areas of operation.

☐ Ensure the return of MI-MORT ACP site to at least its original condition.
☐ Maintain contact with the MDHHS/CHECC and follow demobilization plan.

☐ Conduct a Unit Leader debriefing session prior to the return to the home jurisdiction.

☐ Ensure all mission records, documentation, etc., are forwarded to MDHHS/CHECC for archiving (exclude victim and investigation documentation), if applicable.

☐ Ensure follow up Team EISS management activities are conducted, if applicable.

☐ Prepare a formal Team After Action Report and forward to MDHHS BETP, with copies to the MI-MORT sponsoring organization, within 60 days after return from the mission.

C. MI-MORT DEPUTY COMMANDER

The MI-MORT Deputy Commander is responsible for assisting the MI-MORT Commander in managing all aspects of a MI-MORT mission from the time of activation through the return to the home jurisdiction including all resources (e.g., personnel and equipment). The MI-MORT Deputy Commander reports directly to MI-MORT Commander.

Minimum MI-MORT Classification:
- Regional Team Leader, or
- MI-MORT Commander Appointment

Description of Duties:
- May be assigned any of the duties of the MI-MORT Commander and may serve as Acting MI-MORT Commander during operational periods.

Upon Activation:
Upon receipt of advisory or alert obtain instructions from MI-MORT Commander. Obtain 24-hour contact numbers.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  o Pre Processing Operations
  o Morgue Operations
  o VIC Operations
  o Code of Conduct
  o Equipment and Supplies Requisition
  o Numbering Systems

On-site Operations:
- Contact MI-MORT Commander and receive an initial briefing to include:
  o Incident Action Plan (IAC).
  o Areas of responsibility.
  o Incident Situation Report (SITREP).
  o Team objectives and assignment.
  o Operational work periods.
  o Team support layout and requirements (e.g., ACP, MOC, VIC, MIC, IRC),
  o Communications procedures,
  o Procedures for requesting supplies and equipment
  o Team member medical treatment resources and evacuation procedures, and
  o Site hazards and personal safety precautions.

Deactivation:
- Coordinate with MI-MORT Commander deactivation tasks to be completed.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.

D. LIAISON OFFICER

Incidents that are multi-jurisdictional, or have several agencies involved, may require the establishment of the Liaison Officer position on the Command Staff. The Liaison Officer is responsible for coordinating

support agencies that wish to interact with the Medical Examiner. The Liaison Officer reports directly to the MI-MORT Commander.

Minimum MI-MORT Classification:
- Regional Team Leader, or
- MI-MORT Commander Appointment

Description of Duties:
- Serves as a contact point for Agency Representatives.
- Assists in establishing and coordinating interagency contacts.
- Monitors incident operations to identify current or potential inter-organizational problems.
- Coordinates activities of visiting dignitaries.

Upon Activation:
- Upon receipt of advisory or alert obtain instructions from MI-MORT Commander. Obtain 24-hour contact numbers.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Pre Processing Operations
  - o Morgue Operations
  - o VIC Operations
  - o Code of Conduct
  - o Equipment and Supplies Requisition

On-site Operations:
- Report in at the Administrative Command Post for assignment and log in procedures at the beginning of each shift.
- Participate in planning meetings, providing current resource status, including limitations and capability of assisting agency resources.
- Maintain a list of assisting and cooperating agencies and Agency Representatives.
- Monitor check-in sheets daily to ensure that all Agency Representatives are identified.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment) is returned to the Logistics Section.
- Ensure that all required agency forms, reports and documents are completed prior to demobilization.
- Participate in a formal Team After Action Report.

E.   INFORMATION OFFICER

The Information Officer is responsible for developing and releasing information about the incident to the news media, to incident personnel, and to other appropriate agencies and organizations as determined by the Medical Examiner's needs. The Information Officer reports directly to the MI-MORT Commander.

Minimum MI-MORT Classification:
- Regional Team Leader, or
- MI-MORT Commander Appointment

Description of Duties:
- Develop material for use in media briefings.
- Informs media and conducts media briefings if requested by Medical Examiner.
- Arranges for tours and other interviews or briefings that may be required.

Upon Activation:
- Upon receipt of advisory or alert obtain instructions from MI-MORT Commander. Obtain 24-hour contact numbers.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    - o   Pre Processing Operations
    - o   Morgue Operations
    - o   VIC Operations
    - o   Code of Conduct
    - o   Equipment and Supplies Requisition

On-site Operations:
- Report in at the Administrative Command Post for assignment and log in procedures at the beginning of each shift.
- Participate in planning meetings, providing media information that may be useful to incident planning.
- Obtain Medical Examiner approval of media releases.
- Maintain current information summaries and/or displays on the incident and provide information on the status of the incident to assigned personnel.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Participate in a formal Team After Action Report.

F. **SAFETY OFFICER**

The Safety Officer is responsible for assessing hazardous and unsafe situations and developing measures for ensuring personnel health and safety. The Safety Officer may be assigned assistants to serve at remote sites. The safety officer has emergency authority to stop and/or prevent unsafe acts. The Safety Officer reports directly to the MI-MORT Commander.

Minimum MI-MORT Classification:
- Safety Officer

Description of Duties:
- Develops measures for ensuring personnel health and safety.
- Coordinates with Command Staff regarding emergency response personnel health and safety issues.
- Investigates and reports injuries and treatments
- Monitors safety procedures in all working environments
- Stops and/or prevents unsafe acts.

Upon Activation:
- Upon receipt of advisory or alert obtain instructions from MI-MORT Commander. Obtain 24-hour contact numbers.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    - Health Issues
    - Vehicle Accidents
    - Code of Conduct
    - Equipment and Supplies Requisition

On-site Operations:
- Report in at the Administrative Command Post for assignment and log in procedures at the beginning of each shift.
- Assist Command staff with daily briefings regarding safety issues.
- Assist in developing the Medical Plan (ICS 206 MI-MORT Medical Plan) for the IAP
- Monitor safety procedures at the disaster site environment including:
    - Proper usage of personal protective equipment (PPE).
    - Hydration and fatigue conditions
    - Sunburn protection
    - Insect activity (mosquito)
- Monitor safety procedures in the morgue environment including:
    - Proper usage of personal protective equipment (PPE),
    - Control and disposal of contaminated biomedical waste,
    - Shielding procedures and monitoring of radiation in the X-Ray and Odontology Sections, and
    - Proper use and disposal of hazardous chemicals.
- Monitor safety procedures in the VIC DNA Team environment including:
    - Proper usage of personal protective equipment (PPE),
    - Proper handling of biological specimens collected from families, and
    - Control and disposal of contaminated biomedical waste.
- Coordinate members' medical assistance with medical provider designated by EOC or ICS.
- Investigate and report injuries, illnesses, and treatments
- Maintain a log of all injuries, illnesses, and treatments of members.

Deactivation:
- Provide report and briefing to Safety Officer replacement on status of operations if rotating out prior to termination of the MI-MORT mission.

- Ensure all mission records, documentation, etc., are forwarded to MDHHS BETP for archiving (exclude victim and investigation documentation).
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Participate in a formal Team After Action Report.

G.   BEHAVIORAL HEALTH OFFICER

The Behavioral Health Officer is responsible for monitoring Extended Incident Stress Syndrome (EISS) of Team members during the mission. The Behavioral Health Officer reports directly to the Safety Officer.

Minimum MI-MORT Classification:
- Behavioral Health Officer

Description of Duties:
- Coordinates Extended Incident Stress Syndrome (EISS) management activities for Team members as needed.
- Monitors team members for signs and symptoms of stress.
- Coordinates behavioral health care with MDHHS/CHECC designated providers.

Upon Activation:
- Upon receipt of advisory or alert obtain instructions from MI-MORT Commander. Obtain 24-hour contact numbers.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Code of Conduct

On-site Operations:
- Report in at the Administrative Command Post for assignment and log in procedures at the beginning of each shift.
- Coordinate Extended Incident Stress Syndrome (EISS) management activities for Team members as needed.
- Observe team member performance for signs and symptoms of stress.
- Provide counseling or referral through MDHHS/CHECC designated mental health provider for any member seeking assistance.
- Serve as social coordinator for down time activities to mitigate long work hours.
- May serve at any of the operational sites including morgue or Victim Ante-mortem Data Center.

Deactivation:
- Provide report and briefing to Behavioral Health Officer replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Participate in a formal Team After Action Report.

H.   CHAPLAIN

The Chaplain is responsible for providing pastoral care to Team members during the mission. The Chaplain reports directly to the Safety Officer.

Minimum MI-MORT Classification:
   - Chaplain

Description of Duties:
   - Coordinates pastoral care activities for Team members as needed.
   - Arranges for multi-denominational services if needed.

Upon Activation:
   - Upon receipt of advisory or alert obtain instructions from MI-MORT Commander. Obtain 24-hour contact numbers.
   - Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
      o   Code of Conduct

On-site Operations:
   - Report in at the Administrative Command Post for assignment and log in procedures at the beginning of each shift.
   - Coordinate pastoral care activities for Team members as needed.
   - Observe team member performance for signs and symptoms of stress.
   - Assist families concerned with cultural end of life practices and group memorial services if needed.
   - May serve at any of the operational sites including morgue or Victim Information Collection Data Center.

Deactivation:
   - Provide report and briefing to Chaplain replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
   - Participate in a formal Team After Action Report

I.   OFFICIAL PHOTOGRAPHER

The Official Photographer is responsible for documenting the overall management aspects of the mission. The Official Photographer reports directly to the MI-MORT Commander.

Minimum MI-MORT Classification:
   - Photographer,
   - Medical Investigator, or
   - Evidence Specialist

Description of Duties:
   - Coordinates with Command Staff regarding scope and nature of photographic documentation to be recorded.

Upon Activation:
   - Upon receipt of advisory or alert obtain instructions from MI-MORT Commander. Obtain 24-hour contact numbers.
   - Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
      o   Code of Conduct
   - Equipment and Supplies Requisition
   - Photography

On-site Operations:
   - Report in at the Administrative Command Post for assignment and log in procedures at the beginning of each shift.

- Photograph as directed the various areas of operation.
- Strictly control access to and copies of photographs taken.
- Maintain a log of photographic assignments.

Deactivation:
- Provide report and briefing to Official Photographer replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all mission photographs are archived and delivered to the MI-MORT Commander for presentation to the Medical Examiner.
- Assist MI-MORT Commander and Medical Examiner with creating a set of photographs authorized for release for member's use.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Participate in a formal Team After Action Report.

J. OPERATIONS SECTION CHIEF

The Operations Section Chief is responsible for managing all activities focused on recovery, processing, identification, and release of human remains, maintaining situation control of these processes, and assisting with restoration of normal Medical Examiner operations. The Operations Section Chief reports directly to the MI-MORT Commander.

Minimum MI-MORT Classification:
- Regional Team Leader, or
- MI-MORT Commander Appointment

Description of Duties:
- Supervises Branch Directors for:
    o Search and Recovery Center
    o Morgue Operations Center
    o Victim Information Collection Data Center
    o Morgue Identification Center
- Identifies MI-MORT members available for Branch and Unit Leader positions.
- Coordinates assignment of Branch and Unit Leaders with MI-MORT Commander.
- Establishes and maintains liaison with Commander in the ACP and with MDHHS/CHECC for procurement of resources.
- Serves as principle liaison with Medical Examiner for operational strategies.

Upon Activation:
- Upon receipt of advisory or alert obtain instructions from MI-MORT Commander. Obtain 24-hour contact numbers.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    o Pre Processing Operations
    o Morgue Operations
    o VIC Operations
    o Code of Conduct
    o Equipment and Supplies Requisition
    o Numbering Systems
    o Photography
    o Personal Effects
    o Classification of Human Remains
    o Commingled Remains
    o Jaw Resection

   o   Odontology Protocol Guide
   o   Records Management
   o   Visual Identification
   o   Fingerprint Identification
   o   Anatomic Features Identification
   o   NOK Notification
● Establish communications with the Disaster Evaluation Team if applicable to identify staging area.

On-site Operations:
● Identify Command Staff reporting requirements:
   o   To whom.
   o   Type of information to be reported.
   o   Reporting schedule.
   o   Method of reporting
● Coordinate with Commander and Planning Section Chief to identify Team support rotation requirements and re-supply process:
   o   Provisions (e.g., food, water, lodging, etc.),
   o   Personnel deployment and travel schedules, and
● Coordinate with Commander and Logistics Section Chief to identify equipment requirements and re-supply process:
   o   Search and Recovery victim transportation staging,
   o   Body storage (refrigerated trailers, etc.),
   o   Temporary morgue staging (tent, warehouse, etc.) and equipment (x-ray units, freezers, etc.)
   o   VIC staging,
   o   Service needs (power, water, etc.)
   o   Communications and office equipment (radios, copiers, faxes, etc.)
   o   Staff transportation.
   o   Local medical assistance.

Deactivation:
● Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
● Maintain contact with the Command Staff and assist with demobilization plan.
● Ensure all Command and General Staff equipment is returned to the Logistics Section, if applicable.
● Ensure all mission records, documentation, etc., are forwarded to Planning Section chief for archiving (exclude victim and investigation documentation).
● Ensure all personally issued equipment (Equipment Assignment form is returned to the Logistics Section.
● Participate in a formal Team After Action Report.

K.   PLANNING SECTION CHIEF

The Planning Section Chief collects, evaluates, and disseminates incident situation information/intelligence to incident management personnel, prepares status reports, displays situation information, maintains status of resources assigned to the incident, manages personnel activation and scheduling, and develops and documents the Incident Action Plan (IAP) based upon guidance from the commander. The Planning Section Chief reports directly to the MI-MORT Commander.

Minimum MI-MORT Classification:
● Regional Team Leader, or
● MI-MORT Commander Appointment
Description of Duties:
● Supervises Leaders (if applicable) for:

- o Resources Unit
- o Situation Unit
- o Documentation Unit
- o Demobilization Unit
- Establishes and maintains liaison with Commander in the ACP and with MDHHS/CHECC for situation reports.
- Develops and documents the Incident Action Plan (IAP) with MI-MORT Commander
- Ensures the check-in function at incident locations is established.
- Ensures maintenance of master roster of all personnel and equipment resources checked in at the incident.
- Schedules personnel replenishment and deactivation.

Upon Activation:
- Upon receipt of advisory or alert obtain instructions from MI-MORT Commander. Obtain 24-hour contact numbers.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Pre Processing Operations
  - o Morgue Operations
  - o VIC Operations
  - o Code of Conduct
  - o Equipment and Supplies Requisition
- Establish communications with the administrative staff assembling and maintaining the Ready List of available members.

On-site Operations:
- Identify Command Staff reporting requirements:
  - o To whom.
  - o Type of information to be reported.
  - o Reporting schedule.
  - o Method of reporting
- Coordinate with Commander to prepare the IAP. The IAP should address tactical objectives and support activities required for one operational period, generally 12 to 24 hours. The IAP should also contain provisions for continuous incorporation of "lessons learned" as incident management activities progress.
  - o Establish the Planning meeting and reporting cycle.
- Coordinate with Commander and Operations Section Chief to identify Team support rotation requirements.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Maintain contact with the Command Staff and assist with development of demobilization plan.
- Ensure all personally issued equipment (Equipment Assignment form is returned to the Logistics Section.
- Ensure all used and missing supplies and equipment are documented upon inventory and reported to MDHHS/CHECC for reimbursement.
- Ensure all mission records, documentation, etc., are forwarded to MDHHS BETP for archiving (exclude victim and investigation documentation), if applicable.
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Participate in a formal Team After Action Report.

L. PLANNING SECTION RESOURCE UNIT LEADER

The Resource Unit Leader is responsible for maintaining the status of all assigned resources (primary and support) at an incident. This is achieved by overseeing the check-in/ check-out of all resources, maintaining a status-keeping system indicating current location and status of all resources, and maintenance of a master list of all resources (e.g., key supervisory personnel, primary and support resources, etc.). The Resource Unit Leader reports directly to the Planning Section Chief.

Minimum MI-MORT Classification:
- Regional Team Leader, or
- MI-MORT Commander Appointment

Description of Duties:
- Establish the check-in / check-out function at incident locations. (ICS 211 MI-MORT Incident Check In List,
- Prepares Organization Assignment List (ICS Form 203)
- Prepares appropriate parts of Division Assignment Lists (ICS Form 204)
- Maintain master roster of all personnel and equipment resources checked in at the incident.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Pre Processing Operations
  - Morgue Operations
  - VIC Operations
  - Code of Conduct
  - Equipment and Supplies Requisition

On-site Operations:
- Identify Command Staff resource reporting requirements:
  - To whom.
  - Type of information to be reported.
  - Reporting schedule.
  - Method of reporting
- Coordinate with Commander and Planning Section Chief to identify Team anticipated personnel rotation requirements.
- Prepare and maintain the Administrative Command Post (ACP) display (to include organization chart and resource allocation and deployment).

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Participate in a formal Team After Action Report.

M.   PLANNING SECTION SITUATION UNIT LEADER

The Situation Unit Leader is responsible for collection, processing and organizing of all incident information. The Situation Unit Leader may prepare future projections of incident growth, maps and intelligence information. The Situation Unit Leader reports directly to the Planning Section Chief.

Minimum MI-MORT Classification:
- Regional Team Leader, or
- MI-MORT Commander Appointment

Description of Duties:
- Begin collection and analysis of incident data as soon as possible.
- Prepare, post, or disseminate resource and situation status information as required, including special requests.
- Prepare the Incident Status Summary Form
- Provide photographic services and maps if required.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    o Pre Processing Operations
    o Morgue Operations
    o VIC Operations
    o Code of Conduct
    o Equipment and Supplies Requisition

On-site Operations:
- Identify Command Staff situation reporting requirements:
    o To whom.
    o Type of information to be reported.
    o Reporting schedule.
    o Method of reporting
- Coordinate with Commander and Planning Section Chief to identify factors, situations and circumstances to monitor (e.g., caseload projections, weather, traffic flow, etc.)
- Prepare periodic projections or as requested by the Planning Section Chief.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Participate in a formal Team After Action Report.

N.   PLANNING SECTION DOCUMENTATION UNIT LEADER

The Documentation Unit Leader is responsible for the maintenance of accurate, up-to-date incident files. Examples of incident documentation include: Incident Action Plan (IAP), incident reports, communication logs, injury claims, situation status reports, etc. Thorough documentation is critical to post-incident analysis. Some of the documents may originate in other sections, this unit shall ensure each section is maintaining and providing appropriate documents. The Documentation Unit will provide duplication and copying services for all other sections. The Documentation Unit will store incident files for legal, analytical, and historical purposes. The Documentation Unit Leader reports directly to the Planning Section Chief.

Minimum MI-MORT Classification:
- Regional Team Leader, or

● MI-MORT Commander Appointment

Description of Duties:
- Establish duplication service; respond to requests.
- Store files for post-incident use.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Pre Processing Operations
  - o Morgue Operations
  - o VIC Operations
  - o Code of Conduct
  - o Equipment and Supplies Requisition

On-site Operations:
- Set up work area; begin organization of incident files.
- File all official forms and reports.
- Review records for accuracy and completeness; inform appropriate units of errors or omissions.
- Provide incident documentation as requested.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Participate in a formal Team After Action Report.

O.   PLANNING SECTION DEMOBILIZATION UNIT LEADER

The Demobilization Unit Leader is responsible for developing the Incident Demobilization Plan. On large incidents, demobilization can be quite complex, requiring a separate planning activity. Note that not all agencies require specific demobilization instructions. The Demobilization Unit Leader reports directly to the Planning Section Chief.

Minimum MI-MORT Classification:
- Regional Team Leader, or
- MI-MORT Commander Appointment

Description of Duties:
- Participate in planning meetings as required.
- Review incident resource records to determine the likely size and extent of demobilization effort.
- Based on the above analysis, add additional personnel, work space, and supplies as needed.
- Develop incident check-out function for all units (ICS 221 MI-MORT Demobilization Checkout).
- Develop an Incident Demobilization Plan detailing specific responsibilities and release priorities and procedures (e.g., transfer custody of records, unidentified/ unreleased remains, and personal effects custody).

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Pre Processing Operations
  - o Morgue Operations
  - o VIC Operations
  - o Code of Conduct

- o Equipment and Supplies Requisition

On-site Operations:
- Coordinate demobilization with Agency Representatives including potential local staff training on continuity of database operations.
- Monitor the on-going Operations Section resource needs.
- Identify surplus resources and probable release time.
- Evaluate logistics and transportation capabilities to support demobilization.
- Distribute demobilization plan (on and off-site).
- Provide status reports to appropriate requestors.
- Ensure that all Sections/Units understand their specific demobilization responsibilities.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Participate in a formal team After Action Report.

P.   LOGISTICS SECTION CHIEF

The Logistics Section Chief is responsible for all support requirements needed to facilitate effective and efficient incident management, including the coordination of resource ordering through the MDHHS/CHECC. The Logistics Section Chief also coordinates facilities, transportation, supplies, equipment maintenance and fuel, food services, communications, information technology support, and medical services through the MDHHS/CHECC. The Logistics Section Chief reports directly to the MI-MORT Commander.

Minimum MI-MORT Classification:
- Regional Team Leader, or
- MI-MORT Commander Appointment

Description of Duties:
- Supervises Leaders for:
  - o Disaster Portable Morgue Unit (DPMU)
  - o Supply Unit
  - o Communications Unit
  - o Information Resource (IR) Unit
- Establishes and maintains liaison with Commander in the ACP and with MDHHS/CHECC for logistical support.
- Coordinates the Disaster Portable Morgue Unit Team (DPMU) that erects and deploys the equipment cache as needed for the Administrative Command Post, Information Resources Unit, Morgue Operation Center, Morgue Identification Center, and Victim Information Collection Data Center.
- Develops the Supply Unit which provides the locations and the personnel needed to receive, process, store, and distribute all supply orders.
- Develops the Communications Unit to make the most effective use of the communications equipment and facilities assigned to the incident.
- Develops the Information Resource (IR) Unit that establishes and maintains the computer networks used for Victim Identification Profile Program (VIP) and Dental Identification (Win ID).

Upon Activation:
- Upon receipt of advisory or alert obtain instructions from MI-MORT Commander. Obtain 24-hour contact numbers.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:

- o Pre Processing Operations
- o Morgue Operations
- o VIC Operations
- o Code of Conduct
- o Equipment and Supplies Requisition
- o Numbering Systems
- o Notify and coordinate DPMU team activities as needed

On-site Operations:
- Identify Command Staff reporting requirements:
  - o To whom
  - o Type of information to be reported
  - o Reporting schedule
  - o Method of reporting
- Identify local and state equipment and supply request procedures:
  - o Requests submitted to whom
  - o Type of information to be provided
  - o Method of requesting goods
- Coordinate with Commander and Operations Section Chief to:
  - o Ensure that incident facilities are adequate
  - o Ensure that the resource ordering procedure is made known to appropriate Team Leaders
  - o Develop transportation system to support operations needs
  - o Place orders for resources as needed
- Coordinate with Commander to implement the Incident Action Plan and demobilization plan including time required to clean, decontaminate, inventory, repack and transport DPMU back to warehouse.
- Ensure that all supplies and equipment are inventoried, returned to the cache, and prepared for transport.

Deactivation:
- Maintain contact with the Command Staff and assist with development of demobilization plan.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Ensure all used and missing supplies and equipment are documented upon inventory and reported to Planning Section for reimbursement.
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Participate in a formal team After Action Report.

Q.   LOGISTICS SECTION FACILITIES UNIT LEADER

The Facilities Unit Leader is primarily responsible for the layout and activation of incident facilities, (e.g., morgue, Victim Information Collection Data Center, Morgue Identification Center and Administrative Command Post). The Facilities Unit Leader procures sleeping and sanitation facilities for incident personnel. The Facilities Unit Leader reports directly to the Logistics Section Chief.

Minimum MI-MORT Classification:
- DPMU Specialist, or
- Commander Appointment

Description of Duties:
- Obtain a briefing from the Logistics Section Chief
- Receive and review a copy of the Incident Action Plan IAP.
- Determine requirements for each facility, including the ACP.

- Provide sleeping facilities.
- Provide security services.
- Provide facility maintenance services (e.g., sanitation, lighting, clean up).
- Coordinate with local or State EOC units to secure facilities required.
- Supervise the overall set up, operation, and deactivation of facilities.
- Maintain facility records
- Maintains Unit/Activity Log (ICS Form 214,)

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  o Pre Processing Operations
  o Morgue Operations
  o VIC Operations
  o Code of Conduct
  o Equipment and Supplies Requisition

On-Site Operations:
- In conjunction with the Logistics Section Chief and Medical Examiner, determine the most appropriate area for the facilities to be set up.
- Request necessary contracts and services through MDHHS/CHECC at local or State level for:
  o Portable morgue,
  o Victim Information Collection Data Center,
  o Morgue Identification Center and
  o Administrative Command Post
  o Maintain facility records

Deactivation:
- Demobilize facilities and honor remediation requirements of contracts, if applicable.
- Provide report and briefing to Facilities Unit Leader replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Unit performance.
- Participate in a formal team After Action Report.

R.   LOGISTICS SECTION COMMUNICATIONS UNIT LEADER

The Communications Unit Leader is responsible for developing plans for the effective use of incident communications equipment and facilities including computer networking and internet access; installing and testing of communications equipment; distribution of communications equipment to incident personnel; and the maintenance and repair of communications equipment. The Communications Unit Leader reports directly to the Logistics Section Chief.

Minimum MI-MORT Classification:
- DPMU Specialist, or
- Commander Appointment

Description of Duties:
- Obtain a briefing from the Logistics Section Chief
- Receive and review a copy of the Incident Action Plan IAP.
- Determine requirements for each unit requiring communications. This Unit installs and tests all communications equipment; supervises and operates the incident communications center; distributes

and recovers equipment assigned to incident personnel; and maintains and repairs communications equipment on site.

- Ensure that incident communications and message centers are established.
- Ensure communications systems are installed and tested.
- Ensure an equipment accountability system is established.
- Coordinate with local or State EOC units to secure communications equipment and linkages as required.
- Maintain records on all communications equipment as appropriate.
- Maintains Unit/Activity Log (ICS Form 214)

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Pre Processing Operations
  - o Information Resources Center
  - o Morgue Operations
  - o VIC Operations
  - o Code of Conduct
  - o Equipment and Supplies Requisition

On-Site Operations:
- In conjunction with the Logistics Section Chief and Medical Examiner, determine the most appropriate forms of communication to activate.
- Request necessary contracts and services through MDHHS/CHECC at local or State level for:
  - o Radio communications to EOC,
  - o Land based or satellite telephone service, and
  - o Cable and Internet access service
- Provide technical information as required on:
  - o Adequacy of communications systems currently in operation.
  - o Geographic limitation on communications systems.
  - o Equipment capabilities/limitations.
  - o Amount and types of equipment available.
  - o Anticipated problems in the use of communications equipment.
- Recover equipment from Units being demobilized.

Deactivation:
- Demobilize communication systems and honor remediation requirements of contracts, if applicable.
- Provide report and briefing to Communications Unit Leader replacement on status of operations if rotating
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Unit performance.
- Participate in a formal Team After Action Report

S.   LOGISTICS SECTION RADIO SYSTEM SPECIALIST

The Radio System Specialist is responsible for developing plans for the effective use of radio communications equipment and facilities; installing and testing of radio equipment; distribution of radio equipment to incident personnel; and the maintenance and repair of radio equipment needed to ensure contact among Command, Disaster Site and Morgue staff. The Radio System Specialist reports directly to the Communications Unit Leader.

Minimum MI-MORT Classification:
● DPMU Specialist

Description of Duties:
● Prepares and implements the Incident Radio Communications Plan (ICS Form 205)
● Ensures personal portable radio equipment from cache is distributed as needed according to the Radio Communications Plan.

Upon Activation:
● See General Operational Checklist.
● Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  o   Pre Processing Operations
  o   Information Resources Center
  o   Morgue Operations
  o   VIC Operations
  o   Code of Conduct
  o   Equipment and Supplies Requisition
  o   Numbering Systems

On-Site Operations:
● In conjunction with the Logistics Section Chief, Communications Unit Leader and Medical Examiner, determine the most appropriate area for the IRC to be set up. Provide technical information as required on:
  o   Adequacy of communications systems currently in operation.
  o   Geographic limitation on communications systems.
  o   Equipment capabilities/limitations.
  o   Amount and types of equipment available.
  o   Anticipated problems in the use of communications equipment.

Deactivation:
● Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
● Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
● Assist in the critique of the Unit performance.
● Participate in a formal team After Action Report.

T.   LOGISTICS SECTION INFORMATION RESOURCES (IR) PROGRAMMING SPECIALIST

The Information Resources Programming Specialist organizes and maintains the Information Resources Center (IRC) networked computer system, unprocessed data, computer programs, and computerized entry of all ante and post-mortem data for the purpose of victim identification. The Information Resources Programming Specialist reports directly to the Communications Unit Leader.

Minimum MI-MORT Classification:
● IR Computer Specialist with FileMaker programming experience

Description of Duties:
- Oversees the information resources function.
- Supervises the overall set up, operation, and deactivation of the MI-MORT ante and post-mortem information management systems and the final transfer of data to local Medical Examiner.
- Ensures that data collection format and records are modified to meet the information requirements of the specific disaster and makes changes as necessary.
- Oversees ante and post-mortem data entry problems.
- Liaisons with the VIC, MIC, morgue, and other relevant agencies (e.g., FBI), to ensure the necessary information is collected properly and communicated by approved means.
- Provides requested reports from data collected.
- Transitions data from MI-MORT operation to the local Medical Examiner upon termination of MI-MORT mission.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Pre Processing Operations
  - Information Resources Center
  - Morgue Operations
  - VIC Operations
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Numbering Systems

On-Site Operations:
- In conjunction with the Logistics Section Chief, Communications Unit Leader and Medical Examiner, determine the most appropriate area for the IRC to be set up.
- Request necessary supplies, computer equipment, telephone, fax, and data lines, copiers, etc., from Logistics Section.
- Ensure information management system equipment is networked and functioning properly including:
  - Administrative server with VIP database,
  - Morgue connections to server,
  - Win ID dental comparison database,
  - Body digital x-ray database,
  - Internet access to MI-MORT web site,
  - MIC connections to server,
  - Records Management connections to server, and
  - VIC connection to server or alternate method of transferring daily update of VIP data to administrative VIP server.
- Provide training to personnel on the computer systems as necessary.
- Adapt information collection and record keeping system to include the information needs of the specific disaster, (e.g. cultural and religious customs).
- Provide DVP and VIP interview template forms for data collection.
- Generate reports upon approval of the MI-MORT Commander.
- Provide reference guide of recovery locations, if applicable, (e.g., GPS coordinates, seating chart, etc.).
- Back up all computer files on a daily basis.

Deactivation:
- Ensure databases contain complete information from incident.
- Provide the local Medical Examiner with database copies on CD and physical records.
- Ensure access to data through training of local end-users on applicable information systems so that

data may be updated and effectively used by local authorities.
● Ensure all files from DPMU cached PC hard disk drives are erased.
● Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
● Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
● Assist in the critique of the unit performance.
● Participate in a formal team After Action Report.

U.   **LOGISTICS SECTION INFORMATION RESOURCES (IR) UNIT TECHNOLOGY SPECIALIST**

The Information Resources Unit Technology Specialist provides appropriate computer technical support and management for equipment installation and network wiring and maintenance. The Information Resources Unit Technical Specialist reports directly to the Information Resources Unit Leader.

Minimum MI-MORT Classification:
● IR Computer Specialist with networking experience
Description of Duties:
● Provides system maintenance for all computer hardware and software during the mission.
● Prints out reports as directed.
● Ensures all information management system equipment is set up at the VIC, MIC, morgue, and RC and functioning properly.
● Monitors server performance and capacity.
● Ensures security of networks.
● Establishes a backup system for daily use.
Upon Activation:
● See General Operational Checklist.
● Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    o   Pre Processing Operations
    o   Information Resources Center
    o   Morgue Operations
    o   VIC Operations
    o   Code of Conduct
    o   Equipment and Supplies Requisition
    o   Numbering Systems
On-Site Operations:
● Report in at the IRC for assignment and log in procedures at the beginning of each shift.
● Partake in briefing of IRC personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
● Ensure computer hard drives are cleaned from the previous mission.
● Set up IRC, MOC, MIC, VIC, DEXIS (digital dental x-ray network), ADC, digital body x-ray network, if applicable, and administrative data information management systems (e.g., computers, fax machines, printers, modems, scanner, and copiers).
● Ensure information management systems are networked and functioning properly.
● Provide ongoing technical support to ensure the information management system continues to function properly.
● Deliver all requested reports as scheduled.
Deactivation:
● Erase all mission files from the computer hard drives.
● Prepare the system and files for the next deployment.

- Suggest improvements to the information collection and record keeping for future missions.
- Ensure all documentation is forwarded to the Commander.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Unit performance.

V.   LOGISTICS SECTION GROUND SUPPORT UNIT LEADER

The Ground Support Unit Leader Support is primarily responsible for transportation of personnel, supplies, food, and equipment, and fueling, service, maintenance, and repair of vehicles and other ground support equipment. The Ground Support Unit Leader reports directly to the Logistics Section Chief.

Minimum MI-MORT Classification:
- DPMU Specialist

Description of Duties:
- Supports out-of-service resources.
- Arranges for and activate fueling, maintenance, and repair of ground resources.
- Maintains Unit/Activity Log (ICS Form 214)

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Pre Processing Operations
  - o Morgue Operations
  - o VIC Operations
  - o Code of Conduct
  - o Equipment and Supplies Requisition

On-Site Operations:
- Maintain Support Vehicle Inventory and transportation vehicles.
- Provide transportation services as needed for Disaster Site recovered remains transportation
- Personnel to and from sheltering or lodging accommodations
- Arriving or departing personnel.
- Collect use information on rented equipment.
- Requisition maintenance and repair supplies (e.g., fuel, spare parts) for
- DPMU vehicles
- Refrigerated trailers
- Rental vehicles.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Unit performance.
- Participate in a formal team After Action Report.

W.   LOGISTICS SECTION SUPPLY UNIT LEADER

The Supply Unit Leader is primarily responsible for ordering personnel, equipment and supplies; receiving and storing all supplies for the incident; maintaining an inventory of supplies; and servicing non-expendable supplies and equipment. The Supply Unit Leader reports directly to the Logistics Section Chief.

Minimum MI-MORT Classification:
- DPMU Specialist

Description of Duties:
- Receives and responds to requests for personnel, supplies and equipment. The unit also handles tool operations, which include storing, disbursing, and servicing of all tools and portable, nonexpendable equipment and coordinates equipment and supply requests to MDHHS/CHECC.
- Develops and implements safety and security requirements.
- Maintains Unit/Activity Log (ICS Form 214)

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Pre Processing Operations
  - o Morgue Operations
  - o VIC Operations
  - o Code of Conduct
  - o Equipment and Supplies Requisition

On-Site Operations:
- Order, receive, distribute, and store supplies and equipment.
- Coordinate requests for personnel with Planning and Administration Chiefs
- Maintain an inventory of supplies and equipment.
- Determine the type and amount of supplies reroute.
- Service reusable equipment.
- Notify MDHHS/CHECC of any unfilled positions or technical specialists, as required.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Unit performance.
- Participate in a formal team After Action Report.

X. LOGISTICS SECTION FOOD UNIT LEADER

The Food Unit Leader is responsible for supplying the food needs for the entire incident, including all remote locations (e.g., Disaster Site Center, morgue, Victim Ante-mortem Data Center, etc.). The Food Unit Leader reports directly to the Logistics Section Chief.

Minimum MI-MORT Classification:
- DPMU Specialist

Description of Duties:
- Determines food and water requirements.
- Determines the method of feeding to best fit each facility or situation.
- Supervises caterers, cooks, and other Food Unit personnel as appropriate.
- Maintains Unit/Activity Log (ICS Form 214)

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Pre Processing Operations
  - o Morgue Operations

      o   VIC Operations
      o   Code of Conduct
      o   Equipment and Supplies Requisition

On-Site Operations:
- Obtain necessary equipment and supplies and establish cooking facilities.
- Ensure that well-balanced menus are provided.
- Order sufficient food and potable water from the Supply Unit.
- Maintain an inventory of food and water.
- Maintain food service areas, ensuring that all appropriate health and safety measures are being followed.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Unit performance.
- Participate in a formal team After Action Report.

Y.   ADMINISTRATION AND FINANCE SECTION CHIEF

The Administration and Finance Section Chief is responsible for managing all administrative and financial aspects of a MI-MORT mission from the time of activation through the return to the home jurisdiction. The Administration and Finance Section Chief reports directly to the MI-MORT Commander.

Minimum MI-MORT Classification:
- MI-MORT Director of Finance,
- Administrative Officer
- Go Team Leader, or
- MI-MORT Commander Appointment

Description of Duties:
- Creates and maintains Ready List of MI-MORT members available for activation.
- Coordinates activation of members with MDHHS/CHECC for deployment orders.
- Establishes and maintains liaison with Commander, Planning Section, Logistics Section, and with MDHHS/CHECC so that operational records can be reconciled with financial documents.
- Processes arriving members for identification cards and administrative documentation of time worked.

Upon Activation:
- Upon receipt of advisory or alert obtain instructions from MI-MORT Commander. Obtain 24-hour contact numbers.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
      o   Pre Processing Operations
      o   Morgue Operations
      o   VIC Operations
      o   Code of Conduct
      o   Equipment and Supplies Requisition
- Establish communications with the GO Team if applicable to identify staging area.
- Coordinate potential activation needs with the GO Team and MDHHS/CHECC.
- Assess Team readiness, including identifying personnel ready for deployment by initiation of a call or e-mail request for availability to develop a Ready List.
- Receive formal activation notice from MDHHS/CHECC.

- Provide names of activated Team members to MDHHS/CHECC. Periodically forward updated rosters to MDHHS/CHECC.
- Respond to ACP to establish administrative offices.
- Maintain ongoing communications with MDHHS/CHECC.

On-site Operations:
- Identify local and state reporting requirements:
  - o To whom.
  - o Type of information to be reported.
  - o Reporting schedule.
  - o Method of reporting
  - o Ensure all deploying personnel have received identification cards, if applicable.
- Ensure that all personnel time records (Attendance and Leave Record,) are accurately completed and transmitted according to policy.
- Ensure all deploying personnel report injuries and receive treatment.
- Ensure all expendable supplies used are documented for reimbursement.
- Ensure all deactivating personnel have completed out-processing documentation

Deactivation:
- Maintain contact with the MDHHS/CHECC and follow demobilization plan.
- Ensure all Logistics Section reports of used and missing supplies and equipment are reported to MDHHS/CHECC for reimbursement.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Ensure all mission records, documentation, etc., are forwarded to MDHHS BETP for archiving (exclude victim and investigation documentation), if applicable.
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Participate in a formal team After Action Report.

Z. ADMINISTRATION AND FINANCE SECTION ASSISTANT

The Administration and Finance Section Assistant is responsible for performing Administration clerical duties in the Administrative Command Post. The Administration and Finance Section Assistant reports directly to the Administration and Finance Section Chief.

Minimum MI-MORT Classification:
- Administration Assistant

Description of Duties:
- Performs Administration clerical duties in the Administrative Command Post.
- Processes arriving members for identification cards and Administration documentation of time work

Upon Activation:
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o MI-MORT Command Post Events
  - o Code of Conduct
  - o Equipment and Supplies Requisition
  - o Report in at the Administrative Command Post for assignment and log in procedures at the beginning of each shift.

On-site Operations:
- Identify local and state reporting requirements:
  - o To whom.
  - o Type of information to be reported.

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o Reporting schedule.
o Method of reporting
o Ensure all deploying personnel have received identification cards.
o Ensure that all personnel time records (Attendance and Leave Record) are accurately completed and transmitted according to policy.
o Ensure all deploying personnel report injuries and receive treatment.
o Ensure all expendable supplies authorized to be personally purchased and used for the mission are documented for reimbursement.
o Ensure all deactivating personnel have completed out-processing documentation

Deactivation:
● Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
● Assist in the critique of the Unit performance.

SEARCH AND RECOVERY BRANCH

A.   **SEARCH AND RECOVERY BRANCH DIRECTOR**
The Search and Recovery Branch Director is responsible for overseeing search and recovery efforts of human remains at a disaster site and serving as the liaison between the morgue operations and State/local search and recovery efforts. The Search and Recovery Branch Director reports directly to the Operations Section Chief. In the absence of a Search and Recovery Branch Director the Anthropology Team Leader (Scene) shall serve as the Search and Recovery Branch Director for MI-MORT personnel.

Minimum MI-MORT Classification:
● D.A.R.T. Board Member,
● Medical Examiner Representing Jurisdiction,
● Forensic Anthropologist, or
● MI-MORT Commander Appointment

Description of Duties:
● Oversees, conducts, and directs recovery efforts for human remains at the disaster site.
● Investigates the circumstances of the disaster to determine the most effective method of search and recovery operations.
● Coordinates and plans for adequate personnel and equipment to perform search and recovery operations at the disaster site.
● Ensures security and control over remains during recovery, processing at transport assembly location, and transport release to morgue operations.
● Identifies and ensures that proper protective gear (e.g., Level D or higher) is worn at the disaster site by all site recovery personnel in hazardous areas.
● Provides daily safety briefing to recovery personnel.
● Provides direction and guidance to photographer and documentation specialist for disaster site processing (e.g., sketches, video, and photographs, etc.).
● Monitors EISS levels of responder personnel and implements stress reduction measures as necessary.
● Notifies the Morgue Operations Branch Director of the status and pace of the recovery operation at the site.
● Maintains standard practices of evidence preservation.
● Maintains Unit/Activity Log (ICS Form 214)

Upon Activation:
● Upon receipt of advisory or alert obtain instructions from MI-MORT Commander or Operations Section Chief. Obtain 24-hour contact numbers.
● Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with

particular attention to Operational Overviews and policies on:

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    - o Search and Recovery Events
    - o Code of Conduct
    - o Equipment and Supplies Requisition
    - o Search and Recovery Protocol Guide
    - o Numbering Systems
    - o Search and Recovery Events
    - o Code of Conduct
    - o Equipment and Supplies Requisition
    - o Search and Recovery Protocol Guide
    - o Numbering Systems

On-site Operations:
- In conjunction with the MI-MORT Commander, Operations Section Chief and Medical Examiner, determine the most appropriate disaster site staging area for transport assembly.
- In conjunction with the ICS, and local search and rescue teams, develop coordinated search and recovery plans.
- Brief MI-MORT site personnel on operational plans.
- Ensure victim remains are not moved until approval has been given by the Medical Examiner.
- Ensure that all recovered remains are documented and assigned a unique field or site number.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.
- Ensure that any associated personal effects that were with the body upon recovery remain with the body when it leaves the disaster site for morgue processing.
- Monitor the site for safety hazards. Mitigate hazards.
- Maintain documentation of remains recovered and transported to morgue operations center:
    - o Recovery Site Report,
    - o Recovery Site Field Log,
    - o Recovery Site Master Log,
    - o Recovery Site Transport Log,
- Monitor use of supplies and notify Logistics Supply Unit of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure proper site turnover to local officials after operations are complete.
- Ensure all documentation is forwarded to the Operations Section Chief.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

B.   ANTHROPOLOGY TEAM LEADER (SCENE)

The Anthropology Team Leader (Scene) directs and assists in the proper identification, screening, and documentation of human remains at the disaster incident site. The Anthropology Team Leader reports directly to the Search and Recovery Branch Director or other Search and Recovery manager as established by ICS Command. In the absence of a Search and Recovery Branch Director, the Anthropology Team Leader (Scene) shall serve as the Search and Recovery Branch Director for MI-MORT personnel and, as such, reports directly to the Operations Section Chief.

Minimum MI-MORT Classification:
- Forensic Anthropologist

Description of Duties:
- Oversees the Anthropology function at the disaster site.
- Assists disaster site personnel with identification and screening of human versus non-human remains and questionable material.
- Ensure that steel toed and steel shank boots are available for work at the disaster site.

On-site Operations:
- Report in at the disaster site command post for assignment and log in procedures at the beginning of each shift.
- Brief MI-MORT anthropology personnel if applicable to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Assist with removal, preliminary examination, documentation, and photography of human remains and all personal effects found on or with the remains.
- Ensure that any associated personal effects that were with the body upon discovery remain with the body when it leaves the disaster site for morgue processing.
- Ensure that all recovered remains are documented and assigned a unique field or site number.
- Maintain standard practices of evidence preservation.
- Assist with segregation of unassociated or commingled human remains for purposes of tracking number assignment.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.
- Monitor use of supplies and notify Logistics Supply Unit of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to Anthropology Team Leader replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Document any lost or damaged equipment or item requiring maintenance or servicing and provide list to the Search and Recovery Branch Director.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Ensure all records and documentation are completed and forwarded to the Search and Recovery Branch Director (or Operations Section Chief if no MI-MORT Search and Recovery Branch Director was assigned.)
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

C. **TRANSPORT STAGING TEAM LEADER**

The Transport Staging Team Leader directs and assists in the proper documentation of human remains transported from the disaster incident site to the morgue. The Transport Staging Team Leader reports directly to the Search and Recovery Branch Director or other Search and Recovery manager as established by ICS Command.

Minimum MI-MORT Classification:
- Medical Investigator,
- Evidence Specialist, or
- Mortuary Officer
- D.A.R.T. Member

Description of Duties:
- Oversees the remains staging and transport functions at the disaster site.
- Assists disaster site personnel with tracking recovered remains.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Search and Recovery Events
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Search and Recovery Protocol Guide
  - Numbering Systems
- Ensure that steel toed and steel shank boots are available for work at the disaster site.

On-site Operations:
- Report in at the disaster site command post for assignment and log in procedures at the beginning of each shift.
- Brief MI-MORT transport staging personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Log in all remains brought to the transport staging area (Recovery Site Transport Log)
- Maintain standard practices of evidence preservation.
- Ensure that any associated personal effects that were with the body upon receipt remain with the body when it leaves the disaster site for morgue processing.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.
- Monitor use of supplies and notify Logistics Supply Unit of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Document any lost or damaged equipment or item requiring maintenance or servicing and provide list to the Search and Recovery Branch Director.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Ensure all records and documentation are completed and forwarded to the Search and Recovery Branch Director.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

D. **SEARCH AND RECOVERY TEAM MEMBER**

The Search and Recovery Team Member assists in the proper collection and documentation of human remains recovered from the disaster incident site. The Search and Recovery Team Member reports directly to the assigned team leader or other Search and Recovery manager as established by ICS Command.

Minimum MI-MORT Classification:
- Medical Investigator,
- Forensic Odonatologist,
- D.A.R.T. Member
- Evidence Specialist,
- Forensic Specialist,
- Mortuary Officer, or
- Mortuary Assistant

Description of Duties:
- Assists with the remains search and recovery operation at the disaster site.
- May be assigned to search, collection or transportation teams.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Search and Recovery Events
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Search and Recovery Protocol Guide
  - Numbering Systems
- Ensure that steel toed and steel shank boots are available for work at the disaster site.

On-site Operations:
- Report in at the disaster site command post for assignment and log in procedures at the beginning of each shift.
- Maintain standard practices of evidence preservation.
- Ensure that any associated personal effects that were with the body upon discovery remain with the body when it leaves the disaster site for morgue processing.
- Assist with segregation of unassociated or commingled human remains for purposes of tracking number assignment.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance

E.   SEARCH AND RECOVERY PHOTOGRAPHER

The Search and Recovery Photographer assists in the proper photographic documentation of human remains recovered from the disaster incident site. The Search and Recovery Photographer reports directly to the Search and assigned team leader or other Search and Recovery manager as established by ICS Command.

Minimum MI-MORT Classification:
- Photographer,
- Medical Investigator,
- Evidence Specialist, or
- Forensic Specialist

Description of Duties:
- Oversees the photography function at the disaster site.
- Coordinates with the team leader to determine photographic requirements and the equipment (digital/film) and lighting required to capture the desired images.
- Uses subject-matter knowledge to anticipate the various stages in the recovery procedure to recognize points of interest and to apply discretion in documenting elements such as overall and mid-range photographs.
- Carries out precision processing operations to generate high quality digital images or photographs.
- Ensures the field assigned number appears in every photograph taken whenever possible.
- Maintains an accurate numbering system for each set of digital images or roll of film.
- Provides security of each set of digital images or roll of exposed film.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Search and Recovery Events
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Photography
  - Numbering Systems
  - Ensure that steel toed and steel shank boots are available for work at the disaster site.

On-site Operations:
- Report in at the disaster site command post for assignment and log in procedures at the beginning of each shift.
- Take appropriate photographs of remains as they are recovered and placed into transport containers ensuring that any field assigned number appears in every photograph taken whenever possible.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

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MORGUE OPERATIONS BRANCH

A.   MORGUE OPERATIONS BRANCH DIRECTOR

The Morgue Operations Branch Director is responsible for coordinating the overall receipt, processing, and storage of recovered remains through the Morgue Operations Center. In the absence of a Morgue Operations Branch Director, the Forensic Group Supervisor shall assume these duties. The Morgue Operations Branch Director reports directly to the Operations Section Chief.

Minimum MI-MORT Classification:
- Pathologist,
- Forensic Odonatologist,
- Regional Team Leader,
- Medical Investigator,
- Mortuary Officer, or
- MI-MORT Commander Appointment

Description of Duties:
- Maintains Communication with the Search and Recovery Branch Director (if any) to monitor the rate of recovery of remains to be processed.
- Monitors security and control over remains received from the site, while being processed through each morgue Team, and upon placement into refrigerated remains storage.
- Notifies Logistics Supply Unit of anticipated supply needs and processes equipment and supply requisitions for morgue teams (Equipment or Supply Requisition Form,)
- Provides orientation of newly arriving morgue personnel.
- Monitors access of unauthorized personnel in the Morgue areas.
- Monitors morgue personnel for effects of EISS and coordinates staff rotations to assure adequate rest breaks.

Upon Activation:
- Upon receipt of advisory or alert obtain instructions from MI-MORT Commander or Operations Section Chief. Obtain 24-hour contact numbers.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Pre Processing Operations
  - Morgue Operations
  - VIC Operations
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Photography
  - Numbering Systems
  - Classification of Human Remains
  - Commingled Remains
  - Jaw Resection
  - Odontology protocol Guide
  - Biological Decontamination of Aluminum Floor Refrigerated Trailers

On-site Operations:
- Set up at the Admitting Team location for morgue base of operations.
- Assist with the coordination and placement of refrigerated storage trailers, rest areas, portable toilets, and DPMU equipment.
- Provide briefing of morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Coordinate with Forensic Group Supervisor and Admitting/Processing Group supervisor to manage

scheduling, rest period rotation, and Team assignment adjustments as needed to ensure processing efficiency and daily station clean up.
- Monitor use of supplies and notify Logistics Supply Unit of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all documentation is forwarded to the Operations Section Chief.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

B.   **FORENSIC GROUP SUPERVISOR**
The Forensic Group Supervisor is responsible for overseeing forensic teams in the morgue. The Forensic Group Supervisor reports directly to the Morgue Operations Branch Director. In the absence of a Morgue Operations Branch Director, the Forensic Group Supervisor shall also serve as the Morgue Operations Branch Director. In the absence of a Forensic Group Supervisor the Operations Section Chief may assign one of the forensic team leaders to serve in the capacity of the Forensic Group Supervisor.

Minimum MI-MORT Classification:
- Regional Team Leader,
- Medical Investigator,
- Mortuary Officer, or
- MI-MORT Commander Appointment

Description of Duties:
- In conjunction with the local Medical Examiner and Morgue Operations Branch Director, establishes guidelines for assigning a Morgue Reference Number (MRN) and processing procedures for the disaster.
- Oversees needs and procedures of the following:
    o   Radiology,
    o   Pathology,
    o   Anthropology,
    o   Fingerprint,
    o   DNA Collection, and
    o   Odontology Teams.
- Communicates supply and equipment needs of forensic sections up the chain for Logistics Supply Unit (Equipment or Supply Requisition Form,)
- Maintains Unit/Activity Log (ICS Form 214)

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    o   Morgue Operations
    o   Code of Conduct
    o   Equipment and Supplies Requisition
    o   Numbering Systems
    o   Photography
    o   Personal Effects
    o   Classification of Human Remains
    o   Commingled Remains

o Jaw Resection
o Odontology protocol Guide

On-site Operations:
- Ensure that unassociated human remains are separated from other unassociated remains during processing by Pathology Team, returned to Admitting, and, assigned a unique MRN, DVP, and escort.
- Maintain constant communications with Team leaders on issues related to changes to or deviations from established disaster specific processing procedures.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.
- Monitor use of supplies and notify Morgue Operations Branch Director of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to Forensic Group Supervisor replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all documentation is forwarded to the Morgue Operations Branch Director
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

C. **RADIOLOGY (BODY X-RAY) TEAM LEADER**
The Radiology (Body X-Ray) Team Leader is responsible for performing diagnostic radiograph procedures (X-rays) of disaster victims for the purposes of documentation of the subject. The Radiology (Body X-Ray) Team Leader reports directly to the Morgue Operations Branch Director.

Minimum MI-MORT Classification:
- Autopsy technician, or
- Mortuary Assistant

Description of Duties:
- Oversees the Radiology (Body X-Ray) morgue function.
- Coordinates with the Forensic Group Supervisor to determine radiographic requirements and the appropriate methods for printing and displaying captured digital images.
- Coordinates the printing of images and duplication onto CD media for each DVP.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  o Body X-Ray Team
  o Code of Conduct
  o Equipment and Supplies Requisition
  o Numbering Systems
  o Records Management

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Set up digital body x-ray equipment from DPMU.
- Brief Radiology (Body X-Ray) Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Provide training as necessary in using the computerized digital x-ray system to include:
  o Radiation safety basics,

o basic exposure settings on the x-ray portable imager for typical bodies and parts,

o use and care of the X-ray equipment,

o encoding the MRN onto the X-ray image,

o use of the scanner for digitizing ante-mortem x-rays provided by families for comparison, if applicable, and

o computer program use for on-screen viewing comparisons, storage, printing, and duplication of digital images to CD for the DVP.

● Follow all radiological precautions (use of lead shielding) to prevent radiation exposure to operators and personnel in the morgue area.

● Take radiographs of remains as required.

● Record the MRN on each post-mortem x-ray image captured followed by "-BX01", "-BX02", etc.

● Enclose printed copies of post-mortem x-ray images in DVP for each set of remains.

● Maintain a log of cases processed.

● Use an assigned scribe, or remove gloves prior to handling, to minimize the potential for contaminating the DVP or forms used.

● Complete radiology report documentation in DVP.

● Ensure that any associated personal effects that were with the body upon receipt remain with the body when it leaves the Team.

● Notify Pathology and Personal Effects Teams of personal effects newly discovered during x-ray processing.

● Have captured images reviewed by an anthropologist or pathologist for adequacy.

● Follow all Universal Precautions against exposure to communicable disease and biohazards.

● Monitor use of supplies and notify Forensic Group Supervisor of anticipated replenishment needs.

Deactivation:

● Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.

● Document any lost or damaged equipment or item requiring maintenance or servicing and provide list to the Forensic Group Supervisor.

● Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.

● Ensure all records and documentation are completed and forwarded to the Forensic Group Supervisor.

● Assist in the critique of the Team performance.

● Participate in a formal Team After Action Report.

D. RADIOLOGY (BODY X-RAY) TEAM ASSISTANT

The Radiology (Body X-Ray) Team Assistant is responsible for assisting Radiology (Body X-Ray) Team personnel by performing supporting tasks such as physically moving remains being x-rayed, preparation of x-ray materials or forms, cleaning of instruments and work surfaces, or other related duties. The Radiology (Body X-Ray) Team Assistant reports directly to the Radiology (Body X-Ray) Team Leader.

Minimum MI-MORT Classification:

● Mortuary Officer

● Mortuary Assistant

Description of Duties:

● Receives instructions from Radiology (Body X-Ray) Team Leader about duties and procedures to be followed.

● Ensures all support functions for processed remains are completed.

Upon Activation:

● See General Operational Checklist.

● Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with

particular attention to Operational Overviews and policies on:
- o Body X-Ray Team
- o Code of Conduct
- o Equipment and Supplies Requisition
- o Numbering Systems
- o Records Management

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of Radiology (Body X-Ray) Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Strive to prevent biohazard contamination of the DVP or other documentation by avoiding placement near contaminated surfaces or handling it with contaminated gloves.
- Clean instruments and station areas as needed.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

E.   **PATHOLOGY TEAM LEADER:**

The Pathology Team Leader assists with the identification process by determining the anatomic conditions indicating the cause of death by examination or by the preservation of sufficient evidence for later identification. The Pathology Team Leader also performs a triage process with the initial documentation and sorting of human remains derived from the recovery containers from the scene. The Pathology Team Leader reports directly to the Morgue Operations Branch Director. In the absence of a Morgue Operations Branch Director, the Admitting/Processing Group Supervisor shall also serve as the Morgue Operations Branch Director.

Minimum MI-MORT Classification:
- Pathologist

Description of Duties:
- Oversees the forensic pathology function and may assist in the admitting process with the identification of human remains and fragmented human remains.
- In conjunction with the Forensic Group Supervisor establishes guidelines for pathology procedures.
- Coordinates documentation, photography, and removal of personal effects from remains.
- Documents the extent of injuries and anatomic findings to assist in establishing the victim's cause of death and identification by close examination of remains.
- Performs triage function by determining which morgue processing Teams shall be used for the remains.
- Completes processing documentation forms in DVP.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Admitting/Body Escort Team
  - o Pathology Team
  - o Photography Team
  - o Personal Effects Team
  - o Code of Conduct

- o Equipment and Supplies Requisition
- o Numbering Systems
- o Photography
- o Personal Effects
- o Classification of Human Remains
- o Commingled Remains
- o Jaw Resection

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Assist in the setup of the pathology station.
- Brief Pathology Team personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Ensure all personnel follow pathology protocols.
- Ensure that unassociated human remains are:
  - o Separated from other unassociated remains during processing,
  - o Returned to Admitting, and
  - o Assigned a unique MRN, DVP, and escort.
- Coordinate with Photography and Personal Effects Team personnel the documentation and collection of personal effects.
- Collect body fluids/tissue specimens for toxicology where appropriate.
- Perform detailed examinations as required to aid in determining cause of death and positive identification, including autopsies if appropriate.
- Use an assigned scribe to complete the DVP or forms used, or remove gloves prior to handling, to minimize the potential for contaminating.
- Document thoroughly all examinations, autopsies, anatomic specimens, and articles associated with the victim in DVP and return to the assigned body escort.
- Maintain a log of cases processed.
- If appropriate, complete Autopsy Report.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.
- Monitor use of supplies and notify Forensic Group Supervisor of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all documentation is forwarded to the Forensic Group Supervisor.
- Document any lost or damaged equipment or item requiring maintenance or servicing and provide list to the Forensic Group Supervisor.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report

F.   PATHOLOGY TEAM PATHOLOGIST

The Pathology Team Pathologist assists with the identification process by determining the anatomic conditions indicating the cause of death by examination or by the preservation of sufficient evidence for later identification. The Pathology Team Pathologist also performs a triage process with the initial documentation and sorting of human remains derived from the recovery containers from the scene. The Pathology Team Pathologist reports directly to the Pathology Team Leader.

Minimum MI-MORT Classification:

- Forensic Pathologist, or
- Non-Forensic Pathologist

Description of Duties:
- Follows established guidelines for pathological procedures for the disaster.
- Coordinates documentation, photography, and removal of personal effects from remains.
- Documents the extent of injuries and anatomic findings to assist in establishing the victim's cause of death and identification by close examination of remains.
- Ensures proper documentation of examination or autopsy results.
- Performs triage function by determining which morgue processing Teams shall be used for the remains.
- Completes processing documentation forms in DVP.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    o Admitting/Body Escort Team
    o Pathology Team
    o Photography Team
    o Personal Effects Team
    o Code of Conduct
    o Equipment and Supplies Requisition
    o Numbering Systems
    o Photography
    o Personal Effects
    o Classification of Human Remains
    o Commingled Remains
    o Jaw Resection

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Assist in the setup of the pathology station.
- Participate in briefing of Pathology Team personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Ensure that unassociated human remains are:
    o Separated from other unassociated remains during processing,
    o Returned to Admitting, and
    o Assigned a unique MRN, DVP, and escort.
- Coordinate with Photography and Personal Effects Team personnel the documentation and collection of personal effects.
- Remove body fluids/tissue specimens for toxicology where appropriate.
- Perform detailed examinations as required to aid in determining cause of death and positive identification, including autopsies.
- Use an assigned scribe to complete the DVP or forms used, or remove gloves prior to handling, to minimize the potential for contaminating.
- Document thoroughly all examinations, autopsies, anatomic specimens, and articles associated with the victim in DVP and return to the assigned body escort.
- Complete examination report documentation in DVP (as appropriate).
- Provide input on victim identification indicators, as appropriate.
- Ensure the transfer of all personal effects collected to the Personal Effects Team.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

G. **PATHOLOGY TEAM AUTOPSY TECHNICIAN**

The Autopsy Technician is responsible for assisting Pathology Team personnel by performing supporting tasks such as physically moving remains being examined, preparation of collection materials or forms, cleaning of instruments and work surfaces, or other related duties. The Autopsy Technician reports directly to the Pathology Team Leader.

Minimum MI-MORT Classification:
- Autopsy Technician
- Mortuary Assistant

Description of Duties:
- Receives instructions from Pathology Team Leader about duties and procedures to be followed.
- Ensures all support functions for processed remains are completed.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    o Pathology Team
    o Photography Team
    o Personal Effects Team
    o Code of Conduct
    o Equipment and Supplies Requisition
    o Numbering Systems
    o Photography
    o Personal Effects
    o Classification of Human Remains
    o Commingled Remains

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of Pathology Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Strive to prevent biohazard contamination of the DVP or other documentation by avoiding placement near contaminated surfaces or handling it with contaminated gloves.
- Clean instruments and station areas as needed.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

H. **ANTHROPOLOGY TEAM LEADER (MORGUE)**

The Anthropology Team Leader (Morgue) assists in the victim identification process through examination of human remains in a variety of conditions. The Anthropology Team Leader in the morgue may also assist in the triage process with the initial documentation and sorting of human remains derived from the recovery containers from the scene. The Anthropology Team Leader reports directly to the Forensic Group Supervisor.

Minimum MI-MORT Classification:
- Forensic Anthropologist,
- Non-Forensic Anthropologist

Description of Duties:
- Oversees the Anthropology function at the morgue.
- Coordinates with the Forensic Group Supervisor to determine anthropological requirements and the appropriate methods for examining and documenting findings.
- Determines whether remains are human.
- Assesses to the extent possible sex, chronological age, ancestry affiliation, stature, and other conditions of each team of remains.
- Assesses unique features, pathological conditions, ante-mortem bone trauma, and medical interventions that may be used for positive identification.
- Conducts radiographic comparisons for positive identification or turns over information to forensic radiologists, analyzes trauma to skeletal remains.
- Correlates investigative evidence with laboratory findings to assist with the identification process.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    - Anthropology Team
    - Code of Conduct
    - Equipment and Supplies Requisition
    - Numbering Systems
    - Commingled Remains

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Brief Anthropology Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Provide training as necessary to ensure personnel follow processing protocols.
- Supervise members of the Anthropology Team.
- Assist in the setup of the anthropology station.
- Assist with preliminary examination and documentation of remains.
- Establish number of victims by segregation of commingled remains recovered.
- Ensure that unassociated human remains are:
    - Separated from other unassociated remains during processing,
    - Returned to Admitting, and
    - Assigned a unique MRN, DVP, and escort.
- Establish ancestry, sex, approximate age, stature, ante or post-mortem trauma, and skeletal pathology, if necessary.
- Direct photography of unique features to document the biological profile.
- Provide consultation and input on identifications, as appropriate.
- Use an assigned scribe, or remove gloves prior to handling, to minimize the potential for contaminating the DVP or forms used.
- Document all examinations thoroughly.
- Maintain a log of cases processed.
- Complete the anthropological report documentation in DVP.
- Maintain a log of all MRN cases processed.
- Ensure that any associated personal effects that were with the body upon receipt remain with the body when it leaves the Team.

- Follow all Universal Precautions against exposure to communicable disease and bio-hazards.
- Monitor use of supplies and notify Forensic Group Supervisor of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to Anthropology Team Leader replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Document any lost or damaged equipment or item requiring maintenance or servicing and provide list to the Forensic Group Supervisor.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Ensure all records and documentation are completed and forwarded to the Forensic Group Supervisor.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

I ANTHROPOLOGY TEAM ANTHROPOLOGIST

The Anthropology Team Anthropologist assists in the victim identification process through examination of human remains in a variety of conditions. The Anthropology Team Anthropologist in the morgue may also assist in the triage process with the initial documentation and sorting of human remains derived from the recovery containers from the scene. The Anthropology Team Anthropologist reports directly to the Anthropology Team Leader.

Minimum MI-MORT Classification:
- Forensic Anthropologist, or
- Non-forensic Anthropologist

Description of Duties:
- Determines whether remains are human.
- Assesses to the extent possible sex, chronological age, ancestry affiliation, stature, and other conditions of each team of remains.
- Assesses unique features, pathological conditions, ante-mortem bone trauma, and medical interventions that may be used for positive identification.
- Conducts radiographic comparisons for positive identification or turns over information to forensic radiologists, analyzes trauma to skeletal remains.
- Correlates investigative evidence with laboratory findings to assist with the identification process.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Anthropology Team
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Numbering Systems
  - Commingled Remains

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Participate in briefing of Anthropology Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Assist in the setup of the anthropology station.
- Assist with preliminary examination and documentation of remains.
- Establish number of victims by segregation of commingled remains recovered.
- Ensure that unassociated human remains are:

- o Separated from other unassociated remains during processing,
- o Returned to Admitting, and
- o Assigned a unique MRN, DVP, and escort.
● Establish ancestry, sex, approximate age, stature, ante or post-mortem trauma, and skeletal pathology, if necessary.
● Direct photography of unique features to document the biological profile.
● Provide consultation and input on identifications, as appropriate.
● Use an assigned scribe, or remove gloves prior to handling, to minimize the potential for contaminating the DVP or forms used.
● Document all examinations thoroughly.
● Complete the anthropological report documentation in DVP.
● Maintain a log of all MRN cases processed.
● Ensure that any associated personal effects that were with the body upon receipt remain with the body when it leaves the Team.
● Follow all Universal Precautions against exposure to communicable disease and bio-hazards.

Deactivation:
● Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
● Assist in the critique of the Team performance.

J. **ANTHROPOLOGY TEAM ASSISTANT**

The Anthropology Team Assistant is responsible for assisting Anthropology Team personnel by performing supporting tasks such as physically moving remains being examined, preparation of collection instruments or forms, cleaning of instruments and work surfaces, or other related duties. The Anthropology Team Assistant reports directly to the Anthropology Team Leader.

Minimum MI-MORT Classification:
- Evidence Specialist,
- Autopsy Technician, or
- Mortuary Assistant

Description of Duties:
- Receives instructions from Anthropology Team Leader about duties and procedures to be followed.
- Ensures all support functions for processed remains are completed.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Anthropology Team
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Numbering Systems
  - Commingled Remains

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of Anthropology Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Strive to prevent biohazard contamination of the DVP or other documentation by avoiding placement near contaminated surfaces or handling it with contaminated gloves.
- Clean instruments and station areas as needed.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

K. **FINGERPRINT POST-MORTEM TEAM LEADER**

The Fingerprint Post-mortem Team Leader assists in the victim identification process by obtaining and recording finger, palm, and/or foot print impressions. The Fingerprint Post-mortem Team Leader reports directly to the Forensic Group Supervisor.

Minimum MI-MORT Classification:
- Fingerprint Specialist

Description of Duties:
- Oversees the post-mortem fingerprinting function.
- Coordinates with the Forensic Group Supervisor to determine fingerprint requirements and the appropriate methods for recording, storing and duplicating ridge detail impressions obtained.
- Obtains all available ridge detail impressions, or other comparable material, for comparative purposes.
- Maintains log of prints obtained for each MRN.

- Provides guidance and instruction to fingerprint personnel from local departments involved in field investigations, as necessary.
- Coordinates information obtained with Fingerprint Ante-mortem Team.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Fingerprinting Post-mortem Team
  - o Code of Conduct
  - o Equipment and Supplies Requisition
  - o Numbering Systems
  - o Records Management

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Assist in the setup of the fingerprint station.
- Brief Fingerprint Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Label each set of prints collected with MRN followed by "-FP01", "-FP02", etc.
- Process remains to obtain all available ridge detail impressions, or other comparable material, for comparative purposes.
- Provide guidance and instruction as necessary to fingerprint personnel from local jurisdictions involved in the investigation.
- Confer as necessary with officials of law enforcement and others who are directly concerned with facts of the disaster.
- Ensure that any associated personal effects that were with the body upon receipt remain with the body when it leaves the Team.
- Use an assigned scribe, or remove gloves prior to handling, to minimize the potential for contaminating the DVP or forms used.
- Complete fingerprint report documentation in DVP.
- Place original print cards into manila envelopes (for protection) and label with the MRN.
- Ensure all DVP documentation is completed and returned to the assigned body escort.
- Maintain a log of all MRN cases processed.
- If appropriate, provide copies of print impressions obtained to the designated AFIS fingerprint analysis team established by ICS Command for the incident.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.
- Monitor use of supplies and notify Forensic Group Supervisor of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission. Document any lost or damaged equipment or item requiring maintenance or servicing and provide list to the Forensic Group Supervisor.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Ensure all records and documentation are completed and forwarded to the Forensic Group Supervisor.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

L. FINGERPRINT POST-MORTEM TEAM ASSISTANT

The Fingerprint Post-mortem Team Assistant is responsible for assisting Fingerprint Post-mortem Team personnel by performing supporting tasks such as physically moving remains being processed, preparation of

collection materials or forms, cleaning of instruments and work surfaces, or other related duties. The Fingerprint Post-mortem Team Assistant reports directly to the Fingerprint Post-mortem Team Leader.

Minimum MI-MORT Classification:
- Fingerprint Specialist, or
- Evidence Specialist

Description of Duties:
- Receives instructions from Fingerprint Post-mortem Team Leader about duties and procedures to be followed.
- Ensures all support functions for processed remains are completed.

Upon Activation
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Fingerprinting Post-mortem Team
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Numbering Systems
  - Records Management

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of Fingerprint Post-mortem Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Strive to prevent biohazard contamination of the DVP or other documentation by avoiding placement near contaminated surfaces or handling it with contaminated gloves.
- Clean instruments and station areas as needed.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

M. **DNA TEAM LEADER (MORGUE)**

The DNA Team Leader (Morgue) assists in the victim identification process by collecting biological material from human remains for DNA testing. The DNA Team Leader reports directly to the Forensic Group Supervisor.

Minimum MI-MORT Classification:
- DNA Specialist

Description of Duties:
- Oversees the DNA collection function at the morgue.
- Coordinates with the Morgue Operations Branch Director and/or Medical Examiner to determine biological material sampling requirements and the appropriate methods for collecting and transferring specimens to the DNA lab.
- Selects best appropriate specimen from remains and fragmentary human remains.
(The lab could be in a different state)

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  o DNA Collection Team
  o Code of Conduct
  o Equipment and Supplies Requisition
  o Numbering Systems

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Brief DNA Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Provide training as necessary to ensure personnel follow processing protocols.
- Assist in the setup of the DNA station.
- Ensure that specimen collection procedures avoid cross contamination of specimens by training team personnel on:
  o Using new gloves for each set of remains,
  o Using new, disposable scalpel blades for each set of remains,
  o Using appropriate agents and methods to clean autopsy saw blades, scissors, or other Non-disposable instruments used between specimens being processed, and
  o Using new collection containers for each specimen collected.
- If multiple specimens are collected from a single case, label each specimen taken with MRN followed by "-DN01", "-DN02", etc.
- Ensure proper storage and control of DNA specimens from collection through transfer to DNA lab.
- Ensure maintenance of chain of custody of medical and legal evidence for body parts and remains.
- Document all examinations thoroughly.
- Enclose DNA report documentation in DVP.
- Maintain a log of all MRN cases processed.
- Ensure that any associated personal effects that were with the body upon receipt remain with the body when it leaves the Team.
- Follow all Universal Precautions against exposure to communicable disease and bio-hazards.
- Monitor use of supplies and notify Forensic Group Supervisor of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to DNA Team Leader replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Document any lost or damaged equipment or item requiring maintenance or servicing and provide list

to the Forensic Group Supervisor.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Ensure all records and documentation are completed and forwarded to the Forensic Group Supervisor.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

N.   **DNA TEAM ASSISTANT**
The DNA Team Assistant is responsible for assisting DNA Team personnel by performing supporting tasks such as physically moving remains being examined, preparation of collection materials or forms, cleaning of instruments and work surfaces, or other related duties. The DNA Team Assistant reports directly to the DNA Team Leader.

Minimum MI-MORT Classification:
- DNA Specialist,
- Forensic Specialist, or
- Evidence Specialist

Description of Duties:
- Receives instructions from DNA Team Leader about duties and procedures to be followed.
- Ensures all support functions for processed remains are completed.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o DNA Collection Team
  - o Code of Conduct
  - o Equipment and Supplies Requisition
  - o Numbering Systems

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of DNA Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Strive to prevent biohazard contamination of the DVP or other documentation by avoiding placement near contaminated surfaces or handling it with contaminated gloves.
- Clean instruments and station areas as needed.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

O.   **ODONTOLOGY POST-MORTEM TEAM LEADER**
The Odontology Post-mortem Team Leader assists in the victim identification process by determination of dental characteristics on human remains for comparison with ante-mortem dental records. The Odontology Post-mortem Team Leader reports directly to the Forensic Group Supervisor.

Minimum MI-MORT Classification:
- Forensic Odonatologist

Description of Duties:

- Oversees the forensic dentistry function.
- Coordinates with the Forensic Group Supervisor to determine dental radiographic requirements and the appropriate methods for printing and displaying captured digital images.
- Performs post-mortem dental examinations.
- Digitizes radiographs and other images for computer graphical comparison.
- Maintains and examines dental records, charts, and radiographs during morgue operations.
- Computerizes post-mortem dental information using the Win ID program.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  o Odontology Post-mortem Team (page)
  o Code of Conduct
  o Equipment and Supplies Requisition
  o Numbering Systems
  o Jaw Resection
  o Odontology Protocol
  o Records Management

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Assist in the setup of the odontology station.
- Set up and maintain odontology computer Win ID program.
- Brief Odontology Post-mortem Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Label each set of digital dental x-rays taken with MRN followed by "-DX01", "-DX02", etc.
- Provide training as necessary in using the computerized digital x-ray system to include:
  o Basic exposure settings on the x-ray portable imager for dental materials,
  o Use and care of the digitizing/imaging plate, and
  o Use of computer program for on-screen viewing comparisons, storage, printing, and duplication of digital images to CD for the DVP, if applicable.
- Take digital dental X-rays when necessary.
- Ensure Odontology Protocol Guide procedures are followed.
- Follow all radiological precautions (use of lead shielding) to prevent radiation exposure to operators and personnel in the morgue area.
- Use an assigned scribe, or remove gloves prior to handling, to minimize the potential for contaminating the DVP or forms used.
- Document thoroughly all dental anatomic specimens and prostheses associated the victim.
- Ensure concurrence by at least two forensic odonatologists to complete dental charting of unidentified remains.
- Enter post-mortem dental charting information into Win ID.
- Enclose original dental report documentation in DVP.
- Maintain a log of all MRN cases processed.
- Ensure that any associated personal effects that were with the body upon receipt remain with the body when it leaves the Team.
- Follow all Universal Precautions against exposure to communicable diseases and bio-hazards.
- Monitor use of supplies and notify Forensic Group Supervisor of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.

- Document any lost or damaged equipment or item requiring maintenance or servicing and provide list to the Forensic Group Supervisor.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Ensure all records and documentation are completed and forwarded to the Forensic Group Supervisor.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

P.   ODONTOLOGY POST-MORTEM TEAM ODONTOLOGIST

The Odontology Post-mortem Odonatologist assists in the victim identification process by determination of dental characteristics on human remains for comparison with ante-mortem dental records. The Odontology Post-mortem Odonatologist reports directly to the Odontology Post-mortem Team Leader.

Minimum MI-MORT Classification:
- Forensic Odonatologist, or
- Non-forensic Odonatologist

Description of Duties:
- Performs post-mortem dental examinations.
- Digitizes radiographs and other images for computer graphical comparison.
- Maintains and examines dental records, charts, and radiographs during morgue operations.
- Computerizes post-mortem dental information using the Win ID program.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Odontology Post-mortem Team
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Numbering Systems
  - Jaw Resection
  - Odontology Protocol Guide
  - Records Management

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Assist in the setup of the odontology station. .
- Participate in briefing of Odontology Post-mortem Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Follow the numbering system for each set of records obtained that is compatible with the local Medical Examiner's system.
- Label each set of digital dental x-rays taken with MRN followed by "-DX-01", "-DX02", etc.
- Provide training as necessary in using the computerized digital x-ray system to include:
  - Basic exposure settings on the x-ray portable imager for dental materials,
  - Use and care of the digitizing/imaging plate, and
  - Use of computer program for on-screen viewing comparisons, storage, printing, and duplication of digital images to CD for the DVP.
- Perform examinations and record necessary dental information as required.
- Take digital dental X-rays when necessary.
- Ensure Odontology Protocol Guide procedures are followed.
- Follow all radiological precautions (use of lead shielding) to prevent radiation exposure to

- Operators and personnel in the morgue area.
- Use an assigned scribe, or remove gloves prior to handling, to minimize the potential for contaminating the DVP or forms used.
- Document thoroughly all dental anatomic specimens and prostheses associated the victim.
- Ensure concurrence by at least two forensic odonatologists to complete dental charting of unidentified remains.
- Enter post-mortem dental charting information into Win ID.
- Enclose original dental report documentation in DVP.
- Maintain a log of all MRN cases processed.
- Ensure that any associated personal effects that were with the body upon receipt remain with the body when it leaves the Team.
- Follow all Universal Precautions against exposure to communicable diseases and bio-hazards.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance

Q. **ODONTOLOGY POST-MORTEM TEAM ASSISTANT**
The Odontology Post-mortem Team Assistant is responsible for assisting Odontology Post-mortem Team personnel by performing supporting tasks such as physically moving remains being examined, preparation of collection materials or forms, cleaning of instruments and work surfaces, or other related duties. The Odontology Post-mortem Team Assistant reports directly to the Odontology Post-mortem Team Leader.

Minimum MI-MORT Classification:
- Dental Assistant

Description of Duties:
- Receives instructions from Odontology Post-mortem Team Leader about duties and procedures to be followed.
- Ensures all support functions for processed remains are completed.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Odontology Post-mortem Team
  - o Code of Conduct
  - o Equipment and Supplies Requisition
  - o Numbering Systems
  - o Records Management

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of Odontology Post-mortem Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Strive to prevent biohazard contamination of the DVP or other documentation by avoiding placement near contaminated surfaces or handling it with contaminated gloves.
- Clean instruments and station areas as needed.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics

Section.
- Assist in the critique of the Team performance.

R. **ADMITTING/PROCESSING GROUP SUPERVISOR**
The Admitting/Processing Group Supervisor is responsible for assigning a Morgue Reference Number (MRN) and Body Escort to physically move remains through the appropriate morgue Teams while providing security for the remains and accompanying records. The Admitting/Processing Group Supervisor reports directly to the Morgue Operations Branch Director. In the absence of a Morgue Operations Branch Director, the Forensic Group Supervisor shall also serve as the Morgue Operations Branch Director.

Minimum MI-MORT Classification:
- Regional Team Leader,
- Medical Investigator,
- Mortuary Officer, or
- MI-MORT Commander Appointment

Description of Duties:
- In conjunction with the local Medical Examiner and Morgue Operations Branch Director, establishes guidelines for assigning a Morgue Reference Number (MRN) and processing procedures for the disaster.
- Oversees needs and procedures of the following:
  o Admitting,
  o Escort,
  o Photography,
  o Personal Effects,
  o Embalming
  o Casketing, and
  o Remains Storage Teams.
- Oversees case number assignment and issuance of the Disaster Victim Package (DVP-case file folder).
- Ensures all forms for assigned remains are completed after each morgue Team has completed processing.
- Submits completed DVP folders to the MIC when remains processing is complete.
- Maintains Unit/Activity Log (ICS Form 214)

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  o Morgue Operations
  o Code of Conduct
  o Equipment and Supplies Requisition
  o Numbering Systems
  o Photography
  o Personal Effects
  o Classification of Human Remains
  o Commingled Remains
  o Jaw Resection
  o Biological Decontamination of Aluminum Floor Refrigerated Trailers

On-site Operations:
- Brief team personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.

- Coordinate retrieval of remains with Remains Holding Team Leader.
- Maintain log of MRN assignment and cross-reference to any field assigned numbers on remains delivered from the disaster site (Morgue Admitting Log).
- Ensure that unassociated human remains separated from other unassociated remains during processing by Pathology Team are returned to Admitting, and assigned a unique MRN, DVP, and escort.
- Review completed DVP to ensure it contains
    o Each applicable morgue Team's completed DVP form,
    o Personal effects inventory (copy)
    o Fingerprint impressions card (copy),
    o Original dental charting, digitized x-ray printouts, and CD (of originals), if applicable,
    o Body x-ray printouts and CD, and
    o Digital photo(s), if applicable.
    o Transmit completed DVP by courier to the MIC.
- Update Admitting log to reflect
    o Remains classification
    o Teams involved in processing, and
    o Transmittal of DVP and fingerprint cards to MIC.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.
- Monitor use of supplies and notify Morgue Operations Branch Director of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all documentation is forwarded to the Morgue Operations Branch Director
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report

S.   ADMITTING TEAM ASSISTANT
The Admitting Team Assistant is responsible for assisting the Admitting Team by note taking and completing logbook and DVP forms as required minimizing the contamination of DVP materials. The Admitting Team Assistant reports directly to the Admitting/Processing Group Supervisor.

Minimum MI-MORT Classification:
- Mortuary Assistant

Description of Duties:
- Receives instructions from Admitting/Processing Group Supervisor about duties and procedures to be followed.
- Maintains security and control over log books and/or DVP as directed.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    o Admitting/Body Escort Team
    o Code of Conduct
    o Equipment and Supplies Requisition
    o Numbering Systems
    o Commingled Remains

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Assist the Admitting/Processing Group Supervisor upon receipt of a single set of remains from Remains Holding Team as directed.
- Prevent biohazard contamination of the DVP or other documentation by avoiding placement near contaminated surfaces or handing it to any person with contaminated gloves.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

T. **ADMITTING TEAM BODY ESCORT**

The Admitting Team Body Escort is responsible for physically accompanying a set of remains from the Admitting Station until completion of morgue processing and controlling the Disaster Victim Packet (DVP) documentation procedures. The Admitting Team Body Escort reports directly to the Admitting/Processing Group Supervisor.

Minimum MI-MORT Classification:
- Mortuary Assistant

Description of Duties:
- Maintains security and control over remains and DVP from time of receipt until placement in Remains Storage/Release Team.
- Receives instructions from Pathology Team about morgue Teams to which the remains must be escorted for processing.
- Ensures all logs and DVP forms for processed remains are completed.
- Submits tracking information and DVP to the Admitting/Processing Group Supervisor when processing is complete.
- Delivers processed remains to Remains Storage.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Admitting/Body Escort Team
  - o Code of Conduct
  - o Equipment and Supplies Requisition
  - o Numbering Systems
  - o Commingled Remains

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Receive assignment of a single set of remains from the Admitting/Processing Group Supervisor along with a DVP.
- Physically escort the remains to each station as determined by triage.
- Prevent biohazard contamination of the DVP or other documentation by avoiding placement near

contaminated surfaces or handing it to any person with contaminated gloves.
- Ensure that each Team leader has signed off on the appropriate forms of the DVP upon completion of processing.
- Deliver tracking information and DVP to the Admitting/Processing Group Supervisor when processing is complete.
- Ensure that the remains stay in the escort's presence at all times until transfer to Remains Storage/Release Team.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Section performance.

U. **PHOTOGRAPHY TEAM LEADER**
The Photography Team Leader is responsible for still photography documentation of medical specimens, post-mortem examinations, and other medical procedures for diagnostic and legal purposes. The Photography Team Leader reports directly to the Admitting/Processing Group Supervisor.

Minimum MI-MORT Classification:
- Photographer,
- Medical Investigator, or
- Evidence Specialist.

Description of Duties:
- Oversees the photography function.
- Coordinates with the Admitting/Processing Group Supervisor to determine photographic requirements and the equipment (digital/film) and lighting required to capture the desired images.
- Uses subject-matter knowledge to anticipate the various stages in the procedure to recognize points of interest and to apply discretion in documenting elements beyond the scope of explicit instructions.
- Carries out precision processing operations to generate high quality digital images or photographs.
- Ensures the MRN appears in every photograph taken.
- Maintains an accurate numbering system for each set of digital images and roll of film.
- Provides security of each set of digital images and exposed film.
- Notifies the Morgue Operations Branch Director of apparently unauthorized individuals taking photographs in the morgue area.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Photography Team
  - Personal Effects Team
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Numbering Systems
  - Photography

On-site Operations:
- Brief team personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Station at least one photographer to remain available at the Pathology Team at all times.
- Station at least one photographer to remain available at all times to float among other Teams as needed.

- Maintain a log of cases processed.
- Take appropriate photographs of remains as they enter morgue documenting the MRN in every photograph.
- Maintain a chronological log of photographs taken for each MRN.
- For digital photography storage, use PC and/or CD ROM storage as directed.
- Maintain a security system for exposed film rolls.
- Submit exposed film rolls to the Admitting/ Processing Group Supervisor at the end of each operational period, or effect the development, as directed.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.
- Monitor use of supplies and notify Logistics Supply Unit of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to Photography Team Leader replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all records and documentation are completed and forwarded to the Admitting/Processing Group Supervisor.
- Document any lost or damaged equipment or item requiring maintenance or servicing and provide list to the Admitting/Processing Group Supervisor.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

V.   **PHOTOGRAPHY TEAM ASSISTANT**
The Photography Team Assistant is responsible for assisting Photography Team personnel by performing supporting tasks such as physically moving remains being photographed, preparation of materials or forms, cleaning of equipment and work surfaces, or other related duties. The Photography Team Assistant reports directly to the Photography Team Leader.

Minimum MI-MORT Classification:
- Photographer,
- Medical Investigator, or
- Evidence Specialist.

Description of Duties:
- Receives instructions from Photography Team Leader about duties and procedures to be followed.
- Ensures all support functions for processed remains are completed.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Pathology Team
  - Photography Team
  - Personal Effects Team
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Numbering Systems
  - Photography

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of morgue personnel to ensure all understand the overall processing flow and their

specific duties and responsibilities.
- Strive to prevent biohazard contamination of the DVP or other documentation by avoiding placement near contaminated surfaces or handling it with contaminated gloves.
- Clean equipment and station areas as needed.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance

W.   PERSONAL EFFECTS TEAM LEADER

The Personal Effects Team Leader is responsible for the collection and documentation of personal effects found on victims after admission to the morgue. The Personal Effects Team Leader reports directly to the Admitting/Processing Group Supervisor.

Minimum MI-MORT Classification:
- Medical Investigator,
- Evidence Specialist, or
- Mortuary Officer

Description of Duties:
- Serves as the personal effects custodian.
- Coordinates with the Admitting/Processing Group Supervisor to determine documentation, packaging, and transfer to storage requirements for personal effects recovered from human remains during morgue processing.
- Ensures collection of all personal effects found on deceased victims in conjunction with Pathology Team processing or elsewhere.
- Maintains log of items collected for each MRN.
- Ensures that maintenance of chain of custody for items is maintained.
- Ensures the personal effects are secured for eventual disposition to NOK or law enforcement if deemed to be evidence.
- Cleans and sanitizes effects as appropriate.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Pathology Team
  - Photography Team
  - Personal Effects Team
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Numbering Systems
  - Personal Effects

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- In conjunction with the Admitting/Processing Group Supervisor, establish disaster-specific guidelines and protocols for personal effects numbering, transfer documentation, secured storage facilities, cleaning and repackaging, and release to NOK.
- Brief Personal Effects Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.

- Ensure Personal Effects Policy is followed.
- Label multiple items collected from an individual case with MRN followed by "-PE01", "-PE02", etc.
- Tag and have photographed all personal effects obtained from remains during morgue   processing with MRN visible.
- Maintain chain of custody of collected items.
- Use an assigned scribe, or remove gloves prior to handling, to minimize the potential for contaminating the DVP or forms used.
- Complete examination report documentation in DVP (as appropriate).
- Inventory pockets, wallets, purses listing individual documents or items on the Personal Effects/Evidence Release (Chain of Custody Form).
- In preparing the form, leave the release information blank. Place the original in the MRN file and attach a copy to the bagged item(s).
- Do NOT clean items if they represent the only source of potential biological material for DNA testing.
- For example, a MRN that consists only of a blood stained watch should not be cleaned. It should be submitted to DNA as received.
- Secure personal effects in lockable storage.
- Obtain signatures for proper release of personal items on the appropriate form.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.
- Monitor use of supplies and notify Admitting/Processing Group Supervisor of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to Personal Effects Team Leader replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all records and documentation are completed and forwarded to the Admitting/Processing Group Supervisor.
- Document any lost or damaged equipment or item requiring maintenance or servicing and provide list to the Admitting/Processing Group Supervisor.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

X.   **PERSONAL EFFECTS TEAM ASSISTANT**
The Personal Effects Team Assistant is responsible for assisting Personal Effects Team personnel by performing supporting tasks such as physically moving remains being examined, preparation of collection materials or forms, cleaning of instruments and work surfaces, or other related duties. The Personal Effects Team Assistant reports directly to the Personal Effects Team Leader.

Minimum MI-MORT Classification:
- Mortuary Officer

Description of Duties:
- Receives instructions from Personal Effects Team Leader about duties and procedures to be followed.
- Ensures all support functions for processed remains are completed.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Pathology Team

- o Photography Team
- o Personal Effects Team
- o Code of Conduct
- o Equipment and Supplies Requisition
- o Numbering Systems
- o Personal Effects

On-site Operations:
- ● Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- ● Partake in briefing of morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- ● Strive to prevent biohazard contamination of the DVP or other documentation by avoiding placement near contaminated surfaces or handling it with contaminated gloves.
- ● Ensures the personal effects are secured for eventual disposition to NOK or law enforcement if deemed to be evidence.
- ● Clean instruments and station areas as needed.
- ● Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
- ● Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- ● Assist in the critique of the Team performance.

Y.   **EMBALMING TEAM LEADER**
The Embalming Team Leader reports directly to the Admitting/Processing Group Supervisor. The Embalming Team Leader is responsible for the embalming of human remains after completion of morgue processing.

Minimum MI-MORT Classification:
- ● Mortuary Officer

Description of Duties:
- ● Oversees the embalming function.
- ● Coordinates with the Morgue Operations Branch Director, Admitting/Processing Group Supervisor and/or Medical Examiner to determine embalming requirements and the appropriate methods for embalming remains.
- ● Sets up the embalming process.
- ● Requisitions a sufficient supply of embalming equipment and supplies.
- ● Liaisons with State and local funeral directors for assistance through the Medical Examiner, if necessary.
- ● Determines the viewable or non-viewable status of remains.
- ● Exercises the application of specialized techniques for pre-embalming, embalming, and post embalming processes.
- ● Practices necessary re-constructive cosmetology where appropriate to enhance view ability.

Upon Activation:
- ● See General Operational Checklist.
- ● Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Embalming Team
  - o Casketing Team
  - o Code of Conduct
  - o Equipment and Supplies Requisition

o Numbering Systems
o Embalming Guidelines

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Brief Embalming Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Provide training as necessary to ensure personnel follow processing protocols (Embalming Guidelines).
- Set up embalming function. Include sufficient space for all staging areas including embalming supplies.
- Coordinate with Logistics Supply Unit for procurement of sufficient embalming chemicals and proper hazardous waste disposal contractor services.
- Verify NOK authorization or Medical Examiner directive prior to embalming and any necessary re-constructive cosmetology.
- Embalm or process remains as appropriate.
- Complete appropriate MI-MORT embalming forms and insert in DVP.
- Maintain a log of all MRN cases processed.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.
- Monitor use of supplies and notify Admitting/Processing Group Supervisor of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Document any lost or damaged equipment or item requiring maintenance or servicing and provide list to the Admitting/Processing Group Supervisor.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Ensure all records and documentation are completed and forwarded to the Admitting/Processing Group Supervisor.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

Z.   EMBALMING TEAM ASSISTANT
The Embalming Team Assistant is responsible for assisting Embalming Team personnel by performing supporting tasks such as physically moving remains being examined, preparation of collection materials or forms, cleaning of instruments and work surfaces, or other related duties. The Embalming Team Assistant reports directly to the Embalming Team Leader.

Minimum MI-MORT Classification:
- Mortuary Officer, or
- Mortuary Assistant

Description of Duties:
- Receives instructions from Embalming Team Leader about duties and procedures to be followed.
- Ensures all support functions for processed remains are completed.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    - o Embalming Team

- o Casketing Team
- o Code of Conduct
- o Equipment and Supplies Requisition
- o Numbering Systems
- o Embalming Guidelines

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of Embalming Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Strive to prevent biohazard contamination of the DVP or other documentation by avoiding placement near contaminated surfaces or handling it with contaminated gloves.
- Clean instruments and station areas as needed.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

AA. CASKETING TEAM LEADER

The Casketing Team Leader is responsible for the casketing of human remains after completion of morgue processing. The Casketing Team Leader reports directly to the Admitting/Processing Group Supervisor.

Minimum MI-MORT Classification:
- Mortuary Officer

Description of Duties:
- Oversees the casketing function.
- Coordinates with the Morgue Operations Branch Director, Admitting/Processing Group Supervisor and/or Medical Examiner to determine casketing requirements and the appropriate methods for casketing remains.
- Sets up the casketing process.
- Ensures a sufficient supply of caskets.
- Liaisons with State and local funeral directors for assistance through the Medical Examiner, if necessary.
- Transfers remains to caskets and affixes permanent identification materials to the remains and caskets as directed.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Embalming Team
  - o Casketing Team
  - o Code of Conduct
  - o Equipment and Supplies Requisition
  - o Numbering Systems
  - o Embalming Guidelines

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Brief Casketing Team morgue personnel to ensure all understand the overall processing flow and

their specific duties and responsibilities.
- Provide training as necessary to ensure personnel follow processing protocols.
- Set up casketing function. Include sufficient space for all staging areas including empty casket supply.
- Coordinate with Logistics Supply Unit for procurement of sufficient caskets.
- Ensure sufficient numbers of casket bearers are available for dignified treatment of remains.
- Complete appropriate MI-MORT forms and insert in DVP.
- Maintain a log of all MRN cases processed.
- Place name of deceased, if known, on outside of casket, otherwise use the MRN.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.
- Monitor use of supplies and notify Morgue Admitting/Processing Group Supervisor of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Document any lost or damaged equipment or item requiring maintenance or servicing and provide list to the Admitting/Processing Group Supervisor.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Ensure all records and documentation are completed and forwarded to the Admitting/Processing Group Supervisor.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

BB.   CASKETING TEAM ASSISTANT
The Casketing Team Assistant is responsible for assisting Casketing Team personnel by performing supporting tasks such as physically moving remains being examined, preparation of collection materials or forms, cleaning of instruments and work surfaces, or other related duties. The Casketing Team Assistant reports directly to the Casketing Team Leader.
Minimum MI-MORT Classification:
- Mortuary Officer, or
- Mortuary Assistant

Description of Duties:
- Receives instructions from Casketing Team Leader about duties and procedures to be followed.
- Ensures all support functions for processed remains are completed.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
   o Embalming Team
   o Casketing Team
   o Code of Conduct
   o Equipment and Supplies Requisition
   o Numbering Systems
   o Embalming Guidelines

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of Casketing Team morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.

● Strive to prevent biohazard contamination of the DVP or other documentation by avoiding placement near contaminated surfaces or handling it with contaminated gloves.
● Clean instruments and station areas as needed.
● Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
● Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
● Assist in the critique of the Team performance.

CC.   **REMAINS STORAGE/RELEASE TEAM LEADER**

The Remains Storage/Release Team Leader is responsible for receiving and logging remains transported from the disaster site, holding them in refrigerated units, releasing them for processing through the morgue, and finally, the storage and release of remains after completion of morgue processing. The Remains Storage/Release Team Leader reports directly to the Admitting/Processing Group Supervisor.

Minimum MI-MORT Classification:
● Medical Investigator,
● Evidence Specialist, or
● Mortuary Officer

Description of Duties:
● Oversees receipt and storage of remains received from the disaster site and upon completion of morgue processing.
● Coordinates with the Morgue Operations Branch Director, Admitting/Processing Group Supervisor, and/or Medical Examiner to determine remains storage requirements and the appropriate methods for documentation and storage of remains.
● Ensures all logs and forms for received and released remains are maintained.
● Maintains security and control over remains from time of receipt until release to designated funeral home.
● Ensures a sufficient supply of refrigerated trailers through liaison with Logistics Supply Unit.
● Ensures release of remains is done systematically and with proper records in accordance with the procedures of Medical Examiner.

Upon Activation:
● See General Operational Checklist.
● Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  o Remains Storage
  o Code of Conduct
  o Equipment and Supplies Requisition
  o Numbering Systems
  o Records Management
  o Biological Decontamination of Aluminum Floor Refrigerated Trailers

On-site Operations:
● Staff the Remains Storage station for assignment and log in procedures at the beginning of each shift.
● Brief Remains Storage morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
● Log remains received from disaster site (Remains In (Receipt) Log,).
● Coordinate and log transfer of assigned remains to and from Admitting Team (Remains Transfer Log,).
● Establish a storage system to segregate unidentified, identified but unclaimed, and identified and ready for release human remains.

- Develop spreadsheets for inventory control of remains, relocation, or release. This is necessary, for example, when several MRN cases are associated by Dental or DNA identification as one individual. Such cases are grouped and moved to an Identified Remains trailer for release.
- Establish and maintain a remains inventory (Remains Inventory of Trailer) to expedite locating and retrieving remains when required for release or reexamination.
- Log remains released after identification (Remains Out (Release) Log).
- If personal effects are released along with remains, log out.
- Items released by MRN numbers, and
- Complete Personal Effects/Evidence Release (Chain of Custody) Form.
- Monitor and ensure proper maintenance of refrigerated trailers at recommended temperature of 35-38 degrees Fahrenheit.
- Ensure that records and trailers are secured at the end of each operational period.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.
- Monitor use of supplies and notify Admitting/ Processing Group Supervisor of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all documentation is forwarded to the Admitting/Processing Group Supervisor.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

DD. **REMAINS STORAGE/RELEASE TEAM ASSISTANT**

The Remains Storage/Release Team Assistant is responsible for assisting Remains Storage/Release Team personnel by transporting remains to or from refrigerated holding or storage facilities, cleaning of equipment and work surfaces, or other related duties. The Remains Storage/Release Team Assistant reports directly to the Remains Storage/Release Team Leader.

Minimum MI-MORT Classification:
- Mortuary Assistant

Description of Duties:
- Receives instructions from Remains Storage/Release Team Leader about duties and procedures to be followed.
- Ensures all support functions for processed remains are completed.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  o Remains Storage
  o Code of Conduct
  o Equipment and Supplies Requisition
  o Numbering Systems
  o Records Management
  o Biological Decontamination of Aluminum Floor Refrigerated Trailers

On-site Operations:
- Report in at the morgue admitting station for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of morgue personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.

- Strive to prevent biohazard contamination of the DVP or other documentation by avoiding placement near contaminated surfaces or handling it with contaminated gloves.
- Clean instruments and station areas as needed.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:

- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance

VICTIM INFORMATION COLLECTION DATA CENTER BRANCH

A.   **VICTIM INFORMATION COLLECTION DATA CENTER BRANCH DIRECTOR**

The Victim Information Collection Data Center Branch Director is responsible for establishing the Victim Information Collection Data Center (VIC), managing a call center if activated, ensuring proper interviewing of families and acquaintances of victims using the Fatality Response Emergency Database (VIP) forms, and coordinating the exchange of information among the Morgue Identification Center (MIC), Information Resource Center (IRC), and the VIC. The Victim Information Collection Data Center Branch Director reports directly to the Operations Section Chief.

Minimum MI-MORT Classification:
- VIC Core Team Leader,
- Group Team Leader,
- Mortuary Officer, or
- MI-MORT Commander Appointment

Description of Duties:
- Coordinates with the Operations Section Chief and local authorities in determining the location of the VIC and call center if activated.
- Liaisons with the IRC on form modifications, data collection techniques, and identifications made by the Identification Team.
- Monitors call volume surges and staffing levels (coordinated with Logistics Resource Unit) needed, especially during the first few days of the event.
- Establishes a call prioritization and referral system to optimize use of available staff levels.
- Directs initial focus and resources to collecting missing person data while the Data Center capabilities are being installed.
- Assists the Medical Examiner in providing current information of the deceased to the NOK.
- Provides discretion and confidentiality of all verbal and written documentation concerning the deceased, NOK, and family members.

Upon Activation:
- Upon receipt of advisory or alert obtain instructions from MI-MORT Commander or Operations Section Chief. Obtain 24-hour contact numbers.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Victim Information Collection Data Center
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Numbering Systems
  - Records Management
  - Coordinate with Administration and Finance Section Chief on availability and readiness of VIC Core Team.

On-Site Operations:
- In conjunction with the MI-MORT Commander, Operations Section Chief and Medical Examiner, determine the most appropriate area for the VIC to be set up and to publish telephone contact numbers through Information Officer Channels.
- Request necessary supplies, equipment, telephone, fax, and data lines, copiers, etc., from Logistics Supply Unit.
- Set up VIC stations. Provide systematic approach to operations.
- Work with the IRC Technical Specialist to set up and ensure proper functioning of computer equipment assigned to the VIC.

- Brief interviewers and data entry personnel to ensure all understand the overall information management system and their specific duties and responsibilities.
- Provide training as necessary.
- Assist with set up of DNA Team.
- Coordinate delivery of completed VIP ante-mortem folders to Records Management.
- Maintain accountability and security of any documentation with the family.
- Coordinate family support options with other appropriate agencies.
- Monitor use of supplies and notify Logistics Supply Unit of anticipated replenishment needs.

Deactivation:
- Provide input into the MI-MORT Demobilization Plan on length of time to complete family interaction.
- Coordinate with Medical Examiner on transition of VIC operations to Medical Examiner staff following demobilization.
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Forward all completed records to the IRC.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Participate in a formal Team After Action Report

B.   INFORMATION MANAGEMENT GROUP SUPERVISOR

The Information Management Group Supervisor is responsible for managing the collection and storage of ante-mortem data on victims reported missing. The Information Management Group Supervisor reports directly to the Victim Information Collection Data Center Branch Director. In the absence of the VIC Branch Director, the Information Management Group Supervisor shall serve as the VIC Branch Director

Minimum MI-MORT Classification:
- VIC Specialist,
- Medical Investigator, or
- Mortuary Officer

Description of Duties:
- Works closely with Information Resources Center (IRC) to ensure computer linkages among the VIC, IRC, morgue operations and internet are maintained.
- Manages family interview protocols to collect ante-mortem data.
- Coordinates use of volunteer groups, if applicable.
- Coordinates and disseminates IRC data management protocols with affected personnel.
- Ensures newly arriving VIC personnel are trained and assisted on proper data collection and computer entry procedures.
- Assigns interviewers and ensures VIC staff is trained on proper data collection and computer entry.
- Ensures the collection and timely transfer of ante-mortem data into VIP.
- Ensures the collection, security, and timely transfer of ante-mortem medical and dental records to the Records Management Team.
- Oversees the collection, security, and timely transfer of ante-mortem medical and dental records to the Records Management Team.
- Provides discretion and confidentiality of all verbal and written documentation concerning the deceased, NOK, and family members.
- Maintains Unit/Activity Log (ICS Form 214)

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with

particular attention to Operational Overviews and policies on:
- o Victim Information Collection Data Center
- o Code of Conduct
- o Equipment and Supplies Requisition
- o Numbering Systems
- o Records Management

On-Site Operations:
- Report as directed to the VIC Branch Director.
- Review interview protocols to be followed.
- Take part in briefing of personnel to ensure all understand the overall information management system and their specific duties and responsibilities.
- Liaison with the IRC Leader to incorporate any modifications to the data collection forms for use in the identification process.
- Assign interviewers and provide interview sheets to be completed.
- Assign call takers and provide script options to address how to prioritize calls for referral.
- Coordinate family support options with other appropriate agencies.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the team performance.

C. MISSING PERSON INFORMATION COLLECTION TEAM LEADER

The Missing Person Information Collection Team Leader is responsible for managing call center intake operators and the interview team collecting ante-mortem data on victims reported missing. The Missing Person Information Collection Team Leader reports directly to the Information Management Group Supervisor.

Minimum MI-MORT Classification:
- VIC Specialist,
- Medical Investigator, or
- Mortuary Officer

Description of Duties:
- Ensures newly arriving VIC personnel and volunteers are trained and assisted on proper call taking and interview procedures.
- Oversees the collection, security, and timely transfer of interview forms to the Data Entry Team.
- Provides discretion and confidentiality of all verbal and written documentation concerning the deceased, NOK, and family members.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Victim Information Collection Data Center
  - o Code of Conduct
  - o Equipment and Supplies Requisition
  - o Numbering Systems
  - o Records Management

On-Site Operations:
- Report as directed to the Information Management Group Supervisor.

- Review interview protocols to be followed.
- Take part in briefing of interviewers and data entry personnel to ensure all understand the overall information management system and their specific duties and responsibilities.
- Develop call taker greeting scripts to aid in prioritizing reports of missing persons.
- Revise call taker scripts as situations and needs evolve.
- Coordinate family support options with other appropriate agencies.
- Coordinate replacement supplies or equipment with Supplies/Facilities Unit Leader

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

D.   INTERVIEW TEAM LEADER
The Interview Team Leader is responsible for managing the interview team receiving calls reporting missing persons and completing the VIP interview package with families and acquaintances of victims. The Interview Team Leader reports directly to the Missing Person Information Collection Team Leader.

Minimum MI-MORT Classification:
- VIC Specialist, or
- Mortuary Officer

Description of Duties:
- Receives incoming calls reporting missing persons.
- Coordinates and conducts interviews of families and acquaintances of victims to obtain VIP ante-mortem data.
- Ensures newly arriving VIC personnel are assisted on proper call taking and interview procedures.
- Assists with the collection, security, and timely transfer of ante-mortem medical and dental Records to the Records Management Team.
- Provides discretion and confidentiality of all verbal and written documentation concerning the deceased, NOK, and family members.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o   Victim Information Collection Data Center
  - o   Code of Conduct
  - o   Equipment and Supplies Requisition
  - o   Numbering Systems
  - o   Records Management

On-Site Operations
- Report as directed to the Missing Person Information Collection Team Leader.
- Review call taker scripts for missing person reports.
- Review interview sheets to be completed.
- Take part in briefing of interviewers and data entry personnel to ensure all understand the overall information management system and their specific duties and responsibilities.
- Interview families in person or by telephone with care and dignity for the victims to obtain VIP data.
- Receive requests for additional ante-mortem information and re-contact NOK as necessary.
- Collect and document incoming additional medical and dental records; transfer to Records Management.

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- Maintain accountability and security of any documentation with the family.
- Coordinate family support options with other appropriate agencies.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

E.   **INTERVIEW TEAM SPECIALIST**
The Interview Team Specialist is responsible for completing the VIP interview package with families and acquaintances of victims. The Interview Team Specialist reports directly to the Interview Team Leader.

Minimum MI-MORT Classification:
- VIC Specialist, or
- Mortuary Officer

Description of Duties:
- Interviews families and acquaintances of victims to obtain VIP ante-mortem data.
- Assists newly arriving VIC staff on proper interview procedures.
- Assists with the collection, security, and timely transfer of ante-mortem medical and dental records to the Records Management Team.
- Provides discretion and confidentiality of all verbal and written documentation concerning the deceased, NOK, and family members.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Victim Information Collection Data Center
  - o Code of Conduct
  - o Equipment and Supplies Requisition
  - o Numbering Systems
  - o Records Management

On-Site Operations:
- Report as directed to the Interview Team Leader.
- Review call taker scripts for missing person reports.
- Review interview sheets to be completed.
- Take part in briefing of interviewers and data entry personnel to ensure all understand the overall information management system and their specific duties and responsibilities.
- Receives incoming calls reporting missing persons.
- Interview families in person or by telephone with care and dignity for the victims to obtain VIP data.
- Receive requests for additional ante-mortem information and re-contact NOK as necessary.
- Collect and document incoming additional medical and dental records; transfer to Records Management.
- Maintain accountability and security of any documentation with the family.
- Coordinate family support options with other appropriate agencies.

Deactivation
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

F. VOLUNTEER TRAINING TEAM LEADER

The Volunteer Training Team Leader is responsible for managing the training of volunteer staff on completing the VIP interview package with families and acquaintances of victims. The Volunteer Training Team Leader reports directly to the Missing Person Information Collection Team Leader.

Minimum MI-MORT Classification:
- VIC Specialist, or
- Mortuary Officer

Description of Duties:
- Arranges training of newly arriving VIC team members on proper call taking and interview procedures.
- Assists with the collection, security, and timely transfer of ante-mortem medical and dental records to the Records Management Team.
- Provides discretion and confidentiality of all verbal and written documentation concerning the deceased, NOK, and family members.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    o Victim Information Collection Data Center
    o Code of Conduct
    o Equipment and Supplies Requisition
    o Numbering Systems
    o Records Management

On-Site Operations:
- Report as directed to the Missing Person Information Collection Team Leader.
- Review call taker scripts for missing person reports.
- Review interview sheets to be completed.
- Take part in briefing of interviewers and data entry personnel to ensure all understand the overall information management system and their specific duties and responsibilities.
- Develop just-in-time training modules for VIC interview staff.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

G. CHAPLAINCY/BEHAVIORAL HEALTH TEAM LEADER

The Chaplaincy/Behavioral Health Team Leader is responsible for managing the referral of service options with VIC personnel as needs arise. The Chaplaincy/Behavioral Health Team Leader reports directly to the Missing Person Information Collection Team Leader.

Minimum MI-MORT Classification:
- Behavioral Health Specialist, or
- Chaplain

Description of Duties:
- Offers guidance to VIC personnel during times of stress.
- Works to coordinate social activities and events for after-work hours to ease the stresses of long work cycles.
- Provides discretion and confidentiality of all verbal and written documentation concerning the deceased, NOK, and family members.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    - Victim Information Collection Data Center
    - Code of Conduct
    - Equipment and Supplies Requisition
    - Numbering Systems

On-Site Operations:
- Report as directed to the Missing Person Information Collection Team Leader.
- Review interview sheets to be completed to understand the process.
- Take part in briefing of interviewers and data entry personnel to ensure all understand the overall information management system and their specific duties and responsibilities.
- Develop just-in-time training modules for VIC staff on signs and symptoms of stress and stress reduction techniques.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

H. VIC DATA ENTRY TEAM LEADER

The VIC Data Entry Team Leader is responsible for managing ante-mortem VIP data entry from VIP interview forms or similar computer data processing work. The VIC Data Entry Team Leader reports directly to the Information Management Group Supervisor.

Minimum MI-MORT Classification:
- VIC Specialist,
- IT Data Entry, or
- Mortuary Officer

Description of Duties:
- Receives direction from the Victim Information Collection Data Center Branch Director, Information Management Group Supervisor, and/or Medical Examiner on data entry requirements and the appropriate methods for documentation and verifying entered data.
- Assigns personnel as needed for data entry and auditing of previously entered data.

- Liaisons with the IRC Leader on form modifications, data input techniques, and identifications made.
- Ensures all ante-mortem processing data is entered in VIP
- Ensures all ante-mortem digitized (scanned) photographs from families are stored on the computer server and images printed for inclusion in the VIP packet.
- Provides copies of the VIP interview forms and daily logs to appropriate agencies as approved.
- Oversees edits of computer entries to ensure accuracy and completeness of records.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  o Victim Information Collection Data Center
  o Code of Conduct
  o Equipment and Supplies Requisition
  o Numbering Systems

On-site Operations:
- Report in at the VIC for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of VIC personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Monitor use of supplies and notify Supplies/Facilities Unit Leader of anticipated replenishment needs.
- Liaison with the Information Management Group Supervisor to incorporate any modifications to procedures used in the data entry process.
- Begin data entry immediately upon receiving completed VIP forms from interviewers.
- Perform double check verification of other VIC personnel data entry.
- Ensure all ante-mortem digital photography is stored on the computer server and images are printed for inclusion in the VIP ante-mortem folder.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the team performance

I. **VIC DATA ENTRY SPECIALIST**
The VIC Data Entry Specialist is responsible for performing ante-mortem VIP data entry from VIP interview forms or similar computer data processing work. The VIC Data Entry Specialist reports directly to the VIC Data Entry Team Leader.

Minimum MI-MORT Classification:
- VIC Specialist,
- IT Data Entry, or
- Mortuary Officer

Description of Duties:
- Participates in the ante-mortem information gathering function.
- Receives direction from the Data Entry Team Leader on data entry requirements and the appropriate methods for documentation and verifying entered data.
- Ensures all ante-mortem processing data is entered in VIP
- Ensures all ante-mortem digitized (scanned) photographs from families are stored on the computer server and images printed for inclusion in the VIP packet.
- Provides copies of the VIP interview form and daily logs to appropriate agencies as approved.
- Edits computer entries to ensure accuracy and completeness of records.

- May serve as an auditor for data entry of other personnel to check against typographical errors.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Victim Information Collection Data Center
  - o Code of Conduct
  - o Equipment and Supplies Requisition
  - o Numbering Systems

On-site Operations:
- Report in at the VIC for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of VIC personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Monitor use of supplies and notify Data Entry Team Leader of anticipated replenishment needs.
- Begin data entry immediately upon receiving completed VIP forms from interviewers.
- Performs double check verification of other VIC personnel data entry.
- Ensure all ante-mortem digital photography is stored on the computer server and images are printed for inclusion in the VIP ante-mortem folder.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

J.   VIC DATA ENTRY AUDITING SPECIALIST

The VIC Data Entry Auditing Specialist is responsible for auditing ante-mortem VIP data entry from VIP interview forms or similar computer data processing work. The VIC Data Entry Auditing Specialist reports directly to the VIC Data Entry Team Leader.

Minimum MI-MORT Classification:
- IT Data Entry,
- Medical Investigator, or
- Evidence Specialist.

Description of Duties:
- Participates in the identification function.
- Receives direction from the VIC Data Entry Team Leader and/or Medical Examiner on data entry requirements and the appropriate methods for documentation and verifying entered data.
- Ensures all ante-mortem processing data entered in VIP is audited against the original handwritten interview forms.
- Audits computer entries to ensure accuracy and completeness of records.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Code of Conduct
  - o Equipment and Supplies Requisition
  - o Numbering Systems
  - o Photography
  - o Personal Effects
  - o Classification of Human Remains
  - o Records Management

On-site Operations:
- Report in at the VIC for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of VIC personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Perform double check verification of other VIC personnel data entry.
- Retrieve files as necessary from Records Management and follow all file tracking and log-out procedures.
- Return files not being actively reviewed to Records Management whenever possible.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

K. DENTAL RECORDS ACQUISITION TEAM LEADER

The Dental Records Acquisition Team Leader is responsible for contacting dentists of reported missing persons to obtain copies of dental records. The Dental Records Acquisition Team Leader reports directly to the Information Management Group Supervisor.

Minimum MI-MORT Classification:
- Odonatologist, Forensic
- Odonatologist, Non-Forensic,
- Dental Assistant or Dental Hygienist or,
- Medical Investigator.

Description of Duties:
- Receives notice of potential family dentists of victims reported missing from Interview or Data Entry Teams.
- Initiates telephonic contact with potential dentists in order to obtain copies of ante-mortem dental charts, records, and dental x-rays for comparison by the Odontology Teams.
- Assists in transfer of collected dental records to Records Management Team for use by the Ante-mortem Odontology Team.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Victim Information Collection Data Center
  - o Code of Conduct
  - o Equipment and Supplies Requisition
  - o Numbering Systems
  - o Odontology Protocol Guide

On-site Operations:
- Report in at the VIC for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of VIC personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Monitor use of supplies and notify Supplies/Facilities Unit Leader of anticipated replenishment needs.
- Liaison with the Ante-mortem Odontology Team to incorporate any modifications to procedures.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics

Section.
- Assist in the critique of the Team performance

L.   FAMILY HISTORY (DNA) TEAM LEADER
The Family History (DNA) Team Leader is responsible for coordinating meetings with families to obtain genetic information, familial DNA samples, and missing person reference DNA specimens for testing. The Family History (DNA) Team Leader reports directly to the Information Management Group Supervisor.

Minimum MI-MORT Classification:
- DNA Specialist

Description of Duties:
- Participates in the ante-mortem information and DNA materials gathering function.
- Coordinates with the Victim Information Collection Data Center Branch Director, Information Management Group Supervisor, and/or Medical Examiner on data and DNA materials collection requirements and the appropriate methods for documentation and delivery of materials to the DNA lab selected for testing.
- Liaisons with the MIC Leader on form modifications and data input techniques required for the Team.
- Ensures all ante-mortem family tree information from families is collected and included in the VIP packet.
- Provides copies of the family tree information to appropriate DNA labs as approved.
- Ensures all ante-mortem buccal swabs from families and victim reference specimens collected are properly documented as to provenance and delivered to appropriate DNA labs as approved.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o   Victim Information Collection Data Center
  - o   Code of Conduct
  - o   Equipment and Supplies Requisition
  - o   Numbering Systems
  - o   Records Management

On-site Operations:
- Report as directed to the Information Management Group Supervisor.
- Partake in briefing of VIC and DNA Team personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Monitor use of supplies and notify Supplies/Facilities Unit Leader of anticipated replenishment needs.
- Liaison with the Information Management Group Supervisor to incorporate any modifications to the procedures used in DNA materials collection and the information collection and data entry processes.
- Coordinate and log incoming additional DNA specimen materials (toothbrush, razor, etc.); transfer to the VIC Records Management Team for DNA lab. Establish a system for:
  - o   Families visiting the VIC to provide family tree lineage information and to provide Buccal swab samples for DNA testing.
  - o   Families visiting the VIC to provide victim reference specimens, i.e., toothbrush, razor, etc.
  - o   Families unable to visit the VIC to provide family tree lineage information by telephone interview with a DNA Specialist.
  - o   families unable to visit the VIC to provide Buccal swab samples for DNA testing by mailing the collection kit with instructions for use and return of the kit.
  - o   Families unable to visit the VIC to provide victim reference specimens i.e., toothbrush, razor, etc. by mail or other delivery mode with instructions on handling, packaging and

shipment.
- o Delivery of collected DNA materials to the designated storage or laboratory facility.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all documentation is forwarded to the Information Management Group Supervisor.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report

M. FAMILY AFFAIRS (REMAINS RELEASE) TEAM LEADER

The Family Affairs (Remains Release) Team Leader is responsible for coordinating the release of identified victims to the funeral service agency selected by the family. The Family Affairs (Remains Release) Team Leader reports directly to the Information Management Group Supervisor.

Minimum MI-MORT Classification:
- Mortuary Officer

Description of Duties:
- Coordinates with the Victim Information Collection Data Center Branch Director, Information Management Group Supervisor, and/or Medical Examiner on procedures to be followed to release identified remains.
- Ensures all documentation is completed to verify release of remains.
- Ensures personal effects of the victim are released as directed.
- Updates VIP for release status of identified remains and personal effects as directed.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Victim Information Collection Data Center
  - o Code of Conduct
  - o Equipment and Supplies Requisition
  - o Numbering Systems
  - o Personal Effects
  - o NOK Notification of Positive Identification

On-site Operations:
- Report in at the VIC for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of VIC personnel to ensure all understand the overall processing flow and specific duties and responsibilities.
- Notify funeral home of release status following death certificate completion.
- Notify Remains Storage of identification and potential release.
- Coordinate release with funeral home and delivery of death certificate.
- Direct driver to Remains Release trailers with necessary authorizing paperwork.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

N.   **VIC RECORDS MANAGEMENT TEAM LEADER**
The VIC Records Management Team Leader is responsible for managing the storage of ante-mortem files in concert with the Morgue Identification Center Records Management Team Leader. The VIC Records Management Team Leader reports directly to the Information Management Group Supervisor.

Minimum MI-MORT Classification:
- Medical Investigator,
- Administrative Specialist,
- Evidence Specialist, or
- Mortuary Officer
-

Description of Duties:
- Oversees VIC records management functions.
- Coordinates with the Morgue Identification Center Branch Director, Victim Information Collection Data Center Branch Director, and/or Medical Examiner to determine records management requirements and the appropriate methods for storing, retrieving, and merging documentation.
- Ensures that file tracking procedures account for every file folder.
- Ensure compliance with Records Management Policy.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Victim Information Collection Data Center
  - Records Management
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Numbering Systems

On-site Operations:
- Report in at the VIC for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of VIC personnel to ensure all understand the overall processing flow and specific duties and responsibilities.
- Supervise Records Management Team personnel.
- Provide detailed briefing to review the MI-MORT Records Management Policy with staff.
- Coordinate with the Information Management Group Supervisor and/or Medical Examiner to determine file cabinet equipment, space, and security requirements for records being stored.
- Request necessary supplies equipment, telephone, fax, and data lines, copiers, etc., from Supplies/Facilities Unit Leader.
- Establish file log locator systems to expedite locating and retrieving files when required for release or reexamination.
- Establish a storage system to segregate case files by:
  - reported missing,
  - found alive,
  - identified but unclaimed, and
  - Identified and ready for release.
- Log and file materials as received (alphabetically in Last Name order):
  - VIP ante-mortem reports
  - Medical records or DNA specimen authorization forms.
  - Ensure notification of the appropriate MIC Team when new ante-mortem records (e.g., dental, fingerprints, etc.) have been received for transfer.
  - Establish record log-out procedures to include file release to MIC Records File Room for:

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- VIP Ante-mortem file transfer
- Medical, dental and X-ray records transfer
- Coordinate release of files systematically and with proper accounting for person receiving file in accordance with the procedures of the Medical Examiner.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.

O.   VIC RECORDS MANAGEMENT TEAM ASSISTANT

The VIC Records Management Team Assistant is responsible for performing the storage of ante-mortem files. The VIC Records Management Team Assistant reports directly to the VIC Records Management Team Leader.

Minimum MI-MORT Classification:
- Medical Investigator,
- Administrative Specialist,
- Evidence Specialist, or
- Mortuary Officer

Description of Duties:
- Receives direction from the VIC Records Management Team Leader on tracking and delivery requirements and the appropriate methods for documentation and verifying received materials.
- Ensures all received file materials are properly documented.
- Follows file tracking procedures account for every file folder.
- Ensures compliance with Records Management Policy.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Victim Information Collection Data Center
  - Records Management
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Numbering Systems

On-site Operations:
- Report in at the VIC for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of VIC personnel to ensure all understand the overall processing flow and specific duties and responsibilities.
- Maintain records log locator systems to expedite locating and retrieving files when required for release or reexamination.
- Maintain a storage system to segregate case files by:
  - reported missing,
  - found alive,
  - identified but unclaimed, and
  - Identified and ready for release.
- Log and file materials as received (alphabetically in Last Name order):
  - VIP ante-mortem reports
  - Medical records or DNA specimen authorization forms.
- Ensure notification of the appropriate MIC Team when new ante-mortem records have been received

for transfer.
- Maintain record log-out procedures to include file release to MIC Records File Room for:
  o VIP Ante-mortem file transfer
  o Medical, dental and X-ray records transfer
- Coordinate release of files systematically and with proper accounting for person receiving file in accordance with the wishes of Medical Examiner.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

P.   **VIC SUPPLIES/FACILITIES UNIT LEADER**
The VIC Supplies/Facilities Unit Leader is responsible for maintaining stocks of office supplies and coordinating lodging needs if VIC is separated from the rest of the MI-MORT team operations. The VIC Supplies/Facilities Unit Leader reports directly to the Victim Ante-mortem Data Branch Director.

Minimum MI-MORT Classification:
- Medical Investigator,
- Administrative Specialist,
- Evidence Specialist, or
- Mortuary Officer

Description of Duties:
- Receives direction from the Victim Information Collection Data Branch Director on supply and housing requests (if the VIC is operating separate from the balance of the MI-MORT operation.)
- Coordinates requests for supplies and equipment to the Logistics Supply Unit.
- Coordinates requests for housing facility needs to the Logistics Chief.
- Maintains Unit/Activity Log (ICS Form 214)

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  o Victim Information Collection Data Center
  o Code of Conduct
  o Equipment and Supplies Requisition

On-site Operations:
- Report in at the VIC for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of VIC personnel to ensure all understand the overall processing flow and specific duties and responsibilities.
- Maintain office supplies depot for VIC needs.
- Coordinate housing needs for rotating MI-MORT personnel, if applicable.
- Coordinate vehicle and courier services for delivery of materials to Morgue Identification Center and Records Management File Room.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

Q. **VIC DOCUMENTATION UNIT LEADER**
    The VIC Documentation Unit Leader is responsible for providing statistical reporting of VIC progress to the Planning Chief for the Incident Action Plan as well as special project reports as directed. VIC Documentation Unit Leader also coordinates personnel scheduling needs with the Planning Chief. The VIC Documentation Unit Leader reports directly to the Victim Information Collection Data Branch Director.

    Minimum MI-MORT Classification:
    ● Medical Investigator,
    ● Administrative Specialist,
    ● Evidence Specialist, or
    ● Mortuary Officer
    ● Dental Hygienist to Dental Assistant
    Description of Duties:
    ● Receives direction from the Victim Information Collection Data Branch Director on types of documentation required by the Planning Chief for daily IAP's.
    ● Coordinates requests for personnel scheduling and rotations to the Planning Chief.
    ● Creates specialized reports as directed.
    ● Maintains Unit/Activity Log (ICS Form 214)
    Upon Activation:
    ● See General Operational Checklist.
    ● Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
        o Victim Information Collection Data Center
        o Code of Conduct
        o Equipment and Supplies Requisition
    On-site Operations:
    ● Report in at the VIC for assignment and log in procedures at the beginning of each shift.
    ● Partake in briefing of VIC personnel to ensure all understand the overall processing flow and specific duties and responsibilities.
    ● Maintain personnel scheduling of MI-MORT staff and coordinate requests for replacements through the Planning Chief.
    ● Provide special reports as directed.
    Deactivation:
    ● Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
    ● Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
    ● Assist in the critique of the Team performance.

R. **VIC ADMINISTRATIVE UNIT LEADER**
    The VIC Administrative Unit Leader is responsible for managing attendance and travel voucher records for MI-MORT personnel as an assistant to the Administrative Chief. The VIC Administrative Unit Leader reports directly to the Victim Information Collection Data Branch Director.

    Minimum MI-MORT Classification:
    ● Medical Investigator,
    ● Administrative Specialist,
    ● Evidence Specialist, or
    ● Mortuary Officer
    Description of Duties:

- Receives direction from the Victim Information Collection Data Branch Director on types of documentation required by the Administrative Chief for time and travel.
- Works closely with the VIC Documentation Unit Leader on scheduling and time and travel documentation.
- Assists personnel with completion of forms required for time and travel.
- Coordinates Branch Director requests for personnel to the Logistics Resource Unit.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    o Victim Information Collection Data Center
    o Code of Conduct
    o Equipment and Supplies Requisition

On-site Operations:
- Report in at the VIC for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of VIC personnel to ensure all understand the overall processing flow and specific duties and responsibilities.
- Maintain personnel time and travel documentation for coordination with the Administrative Chief.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

IDENTIFICATION BRANCH

A.   MORGUE IDENTIFICATION CENTER BRANCH DIRECTOR

The Morgue Identification Center Branch Director is responsible for establishing the Identification Center (MIC) consisting of the Verification Unit, Data Entry, Fingerprint Ante-mortem, Ante-mortem Odontology, and Records Management Teams. The Medical Examiner may elect to assign his/her existing Medical Investigative staff to oversee or approve final identification verification; remains release, and file management procedures. The Morgue Identification Center Branch Director reports directly to the Operations Section Chief. In the absence of a Morgue Identification Center Branch Director, the Verification Unit Leader shall also serve as the Morgue Identification Center Branch Director.

Minimum MI-MORT Classification:
- Forensic Pathologist,
- Regional Team Leader,
- Medical Investigator, or
- MI-MORT Commander Appointment

Description of Duties:
- Oversees identification functions:
    o DVP data entry and analysis,
    o Medical Records review,
    o ID report verification, and
    o Records Management.
- Coordinates with the Operations Section Chief and/or Medical Examiner to determine post processing identification requirements and the appropriate methods for documentation and storage of file materials.

- Coordinates set up of the MIC consisting of the Verification Unit, Fingerprint Ante-mortem, Ante-mortem Odontology, and Records Management Teams
- Liaisons with the IRC on form modifications, data input techniques, and identifications made.
- Ensures information management system equipment in the MIC is installed and functioning properly.

Upon Activation:
- Upon receipt of advisory or alert obtain instructions from MI-MORT Commander or Operations Section Chief. Obtain 24-hour contact numbers.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    o Pre Processing Operations
    o Morgue Operations
    o Victim Information Collection Data Center
    o Code of Conduct
    o Equipment and Supplies Requisition
    o Numbering Systems
    o Photography
    o Personal Effects
    o Classification of Human Remains
    o Odontology Protocol Guide
    o Records Management
    o Visual Identification
    o Fingerprint Identification
    o Anatomic Features Identification
    o NOK Notification

On-site Operations:
- In conjunction with the Operations Section Chief and Medical Examiner, determine the most appropriate area for the MIC Teams.
- Request necessary supplies, office equipment, telephone, fax, and data lines, copiers, etc., from Logistics Supply Unit.
- Request Internet web access to perform searches related to victims and NOK contacts.
- Brief MIC Team Leaders and personnel to ensure all understand the overall information management system, their specific duties and responsibilities, and procedural changes as they occur.
- Establish release authorization, death certificate preparation and delivery procedures for Family Affairs (Remains Release) Team in VIC.
- Coordinate with Medical Examiner on how identified victim case files will be finalized and numbered.
- Provide daily reports to the Medical Examiner, Team Leaders, and DOH/ESF-8 regarding number of:
    o Missing persons reported,
    o Victims identified and methods used, and
    o Unidentified remains to be identified.

Deactivation:
- Provide input into the MI-MORT Demobilization Plan on length of time to complete identifications.
- Coordinate with Medical Examiner on transition of MIC operations to Medical Examiner staff following demobilization.
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all documentation is forwarded to the Operations Section Chief.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

● Participate in a formal Team After Action Report.

B. DATA ENTRY TEAM LEADER

The Data Entry Team Leader is responsible for managing post-mortem VIP data entry from DVP file folders or similar computer data processing work. The Data Entry Team Leader reports directly to the Morgue Identification Center Branch Director.

Minimum MI-MORT Classification:
- IR Data Entry,
- Medical Investigator, or
- Evidence Specialist.

Description of Duties:
- Participates in the identification function.
- Receives direction from the Morgue Identification Center Branch Director and/or Medical Examiner on data entry requirements and the appropriate methods for documentation and verifying entered data.
- Supervises Data Entry staff.
- Ensures all post-mortem processing data is entered in VIP
- Edits computer entries to ensure accuracy and completeness of records.
- Maintains Unit/Activity Log (ICS Form 214)

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Numbering Systems
  - Photography
  - Personal Effects
  - Classification of Human Remains
  - Records Management

On-site Operations:
- Report in at the MIC for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of MIC personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Ensure immediate data entry upon receiving completed DVP folders from morgue.
- Perform double check verification of other MIC personnel data entry.
- Ensure all post-mortem digital photography is stored on the computer server and images are printed for inclusion in the DVP.
- Retrieve files as necessary from Records Management and follow all file tracking and log-out procedures.
- Return files not being actively reviewed to Records Management whenever possible.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance

C. **DATA ENTRY SPECIALIST**

The Data Entry Specialist is responsible for performing post-mortem VIP data entry from DVP file folders or similar computer data processing work. The Data Entry Specialist reports directly to the Data Entry Team Leader.

Minimum MI-MORT Classification:
- IR Data Entry,
- Medical Investigator, or
- Evidence Specialist.

Description of Duties:
- Participates in the identification function.
- Receives direction from the Data Entry Team Leader and/or Medical Examiner on data entry requirements and the appropriate methods for documentation and verifying entered data.
- Ensures all post-mortem processing data is entered in VIP
- Ensures all post-mortem digital photography is stored on the computer server and images printed for inclusion in the DVP.
- Edits computer entries to ensure accuracy and completeness of records.
- May serve as Data Entry Auditing Specialist.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    o Code of Conduct
    o Equipment and Supplies Requisition
    o Numbering Systems
    o Photography
    o Personal Effects
    o Classification of Human Remains
    o Records Management

On-site Operations:
- Report in at the MIC for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of MIC personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Begin data entry immediately upon receiving completed DVP folders from morgue.
- Ensure all post-mortem digital photography is stored on the computer server and images are printed for inclusion in the DVP.
- Retrieve files as necessary from Records Management and follow all file tracking and log-out procedures.
- Return files not being actively reviewed to Records Management whenever possible.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance

D. **DATA ENTRY AUDITING SPECIALIST**

The Data Entry Auditing Specialist is responsible for performing post-mortem VIP data entry from DVP file folders or similar computer data processing work. The Data Entry Auditing Specialist reports directly to the Data Entry Team Leader.

Minimum MI-MORT Classification:

- IT Data Entry,
- Medical Investigator, or
- Evidence Specialist.

Description of Duties:
- Participates in the identification function.
- Receives direction from the Data Entry Team Leader and/or Medical Examiner on data entry requirements and the appropriate methods for documentation and verifying entered data.
- Ensures all post-mortem processing data entered in VIP is audited against the original handwritten processing forms.
- Ensures all post-mortem digital photography is stored on the computer server and images printed for inclusion in the DVP.
- Audits computer entries to ensure accuracy and completeness of records.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  o Code of Conduct
  o Equipment and Supplies Requisition
  o Numbering Systems
  o Photography
  o Personal Effects
  o Classification of Human Remains
  o Records Management

On-site Operations:
- Report in at the MIC for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of MIC personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Perform double check verification of other MIC personnel data entry.
- Ensure all post-mortem digital photography is stored on the computer server and images are printed for inclusion in the DVP.
- Retrieve files as necessary from Records Management and follow all file tracking and log-out procedures.
- Return files not being actively reviewed to Records Management whenever possible.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

E.   **VERIFICATION UNIT LEADER**
The Verification Unit Leader is responsible for managing remains identification processing functions including: reviewing VIP ante-mortem missing person reports for potential identifying features; coordinating identification reports; processing death certificates; and assembling potential identified files for Medical Examiner approval. The Medical Examiner may elect to assign his/her existing Medical Investigative staff to oversee or approve final identification verification; remains release, and file management procedures. The Verification Unit Leader reports directly to the Morgue Identification Center Branch Director. In the absence of a Morgue Identification Center Branch Director, the Verification Unit Leader shall also serve as the Morgue Identification Center Branch Director.

Minimum MI-MORT Classification:
- Medical Investigator

Description of Duties:
- Participates in the identification function.
- Receives direction from the Morgue Identification Center Branch Director and/or Medical Examiner on post processing identification requirements and the appropriate methods for documentation and storage of file materials.
- Assists with set up of the MIC office.
- Liaisons with the IRC on form modifications, data input techniques, and identifications made.
- Orders and tracks additional records (e.g., dental X-rays and charts, medical, and fingerprint records, and other data) deemed necessary.
- Coordinates receipt and storage of ante-mortem records and materials with Records Management Team.
- Coordinates reports of positive identification with file materials for presentation to the Medical Examiner for approval.
- Assists the Medical Examiner with notifications of positive identification to NOK, if appropriate.
- Coordinates issuance of death certificates upon establishment of positive identification or court ordered presumptive death declaration.
- Initiates release procedure notification to Family Affairs (Remains Release) Team in VIC.
- Maintains Unit/Activity Log (ICS Form 214)

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    - Pre Processing Operations
    - Morgue Operations
    - VIC Operations
    - Code of Conduct
    - Equipment and Supplies Requisition
    - Numbering Systems
    - Photography
    - Personal Effects
    - Classification of Human Remains
    - Odontology Protocol Guide
    - Records Management
    - Visual Identification
    - Fingerprint Identification
    - Anatomic Features Identification
    - NOK Notification

On-site Operations:
- Report in at the MIC for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of MIC personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Monitor use of supplies and notify MIC Director of anticipated replenishment needs.
- Use Internet web access to perform searches related to victims and NOK contacts.
- Liaison with the IRC Leader to incorporate any modifications to the data entry procedures used in the identification process.
- Ensure coordination of incoming additional ante-mortem materials and records for distribution.
    - Ante-mortem body x-rays are delivered to Records Management with notification made to Radiology (Body X-Ray) Team for digitizing and comparison with appropriate MRN cases.
    - Ante-mortem dental records and x-rays are delivered to Records Management with notification made to Ante-mortem Odontology Team for digitizing and input to Win ID

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System for comparison.
- o Ante-mortem fingerprint records are delivered to Records Management with notification made to Fingerprint Ante-mortem Team for comparison.
- o Ante-mortem medical records are delivered to Records Management with notification made to IT/Review Release Specialist team.
- o Coordinate incoming DNA Buccal swab collection specimens for distribution to DNA lab.
- o Coordinate incoming additional DNA specimen materials (toothbrush, razor, etc.) for transfer to DNA lab for testing.
- ● Maintain accountability and security of any additional materials provided by the family or other sources.
- ● Retrieve files as necessary from Records Management and follow all file tracking and log-out procedures.
- ● Return files not being actively reviewed to Records Management whenever possible.
- ● Receive identification match data for presentation to Medical Examiner from:
    - o Ante-mortem Odontology,
    - o Fingerprints Ante-mortem,
    - o Body X-ray,
    - o Anatomic features (Pathology or Anthropology), or
    - o DNA lab.
- ● Assemble all related files of a potential identification case (VIP ante-mortem folder, MRN files, and medical records) and examine for logical inconsistencies (e.g., history of amputation but body part is present). Review prior to presentment to Medical Examiner for decision.
- ● Once approved by the Medical Examiner, perform VIP data entry to assign positive victim identifications (VIP) to post-mortem records (MRNs), including how identification was made, by who, time and date.
- ● Assign staff to a Notification Team, if appropriate.
- ● Notify families (procedures to be determined by Medical Examiner) of positive identification and obtain:
    - o signed authorization from next-of-kin identifying funeral home of choice (Remains Release Authorization)
    - o funeral home name, and
    - o if body part or less than complete remains, written family directive on preferred method of notification and handling of additional parts identified later (Additional Remains Release Election).
- ● Coordinate release authorization and death certificate delivery to VIC Remains Release Team.
- ● Assemble all related files of an identification case (there may be several fragmentary remains MRNs linked by dental or DNA matching to one individual) and merge into the VIP ante-mortem file.
- ● Medical Examiner will determine the final numbering system for identified remains cases.
- ● Return all files of identified remains to Records Management with notation of merged MRN file numbers and presumptive death certificate files, if applicable.

Deactivation:
- ● Provide report and briefing to replacement on status of pending identification cases if rotating out prior to termination of the MI-MORT mission.
- ● Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- ● Assist in the critique of the Team performance.
- ● Participate in a formal Team After Action Report

F.   VERIFICATION UNIT ID/RELEASE REVIEW SPECIALIST
The Verification Unit ID/Release Review Specialist is responsible for performing remains identification

processing functions including review of VIP ante-mortem missing person reports for potential identifying features, coordinating identification reports, processing death certificates, and assembling potential identified files for Medical Examiner approval, and notifying NOK, if appropriate. The Medical Examiner may elect to assign his/her existing Medical Investigative staff to oversee or approve final identification verification, NOK notification; remains release, and file management procedures. The Verification Unit ID/Release Review Specialist reports directly to the Verification Unit Leader.

Minimum MI-MORT Classification:
- Medical Investigator

Description of Duties:
- Participates in the identification function.
- Receives direction from the Verification Unit Leader and/or Medical Examiner on post processing identification requirements and the appropriate methods for documentation and storage of file materials.
- Reviews all post-mortem processing data entered in VIP.
- Orders and tracks additional records (e.g., dental X-rays and charts, medical, and fingerprint records, and other data) deemed necessary.
- Coordinates receipt and storage of ante-mortem records and materials with Records Management Team.
- Coordinates reports of positive identification with file materials for presentation to the Medical Examiner for approval.
- Assists the Medical Examiner with notifications of positive identification to NOK, if appropriate.
- Coordinates issuance of death certificates upon establishment of positive identification or court ordered presumptive death declaration.
- Initiates release procedure notification to Family Affairs (Remains Release) Team in VIC.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  o VIC Operations
  o Code of Conduct
  o Equipment and Supplies Requisition
  o Numbering Systems
  o Photography
  o Personal Effects
  o Classification of Human Remains
  o Odontology Protocol Guide
  o Records Management
  o Visual Identification
  o Fingerprint Identification
  o Anatomic Features Identification
  o NOK Notification

On-site Operations:
- Report in at the MIC for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of MIC personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Conduct a daily, morning inventory of all files being actively worked on in the section for Records Management accounting.
- Use Internet web access to perform searches related to victims and NOK contacts.
- Perform data analysis in VIP to locate potentially identifiable features and possible matches.

- Begin cross references on all personal effects.
- Continue cross references to all fields as time allows.
- Receive and track requests for additional ante-mortem information and forward to NOK.
- Order and track all additional records (e.g., dental X-rays and charts, medical, dental, and fingerprint records, DNA Buccal swab kits, and other data) deemed necessary.
- Coordinate incoming additional ante-mortem materials and records for distribution.
   - o Ante-mortem body x-rays are delivered to Records Management with notification made to Radiology (Body X-Ray) Team for digitizing and comparison with appropriate MRN cases.
   - o Ante-mortem dental records and x-rays are delivered to Records Management with notification made to Ante-mortem Odontology Team for digitizing and input to Win ID System for comparison.
   - o Ante-mortem fingerprint records are delivered to Records Management with notification made to Fingerprint Ante-mortem Team for comparison.
   - o Ante-mortem medical records are reviewed for unique anatomic features (e.g., surgical implants, surgical history, amputations, etc.) and incorporated into VIP as deemed appropriate.
   - o Coordinate incoming DNA Buccal swab collection specimens for distribution to DNA lab.
   - o Coordinate incoming additional DNA specimen materials (toothbrush, razor, etc.) for transfer to DNA lab for testing.
- Maintain accountability and security of any additional materials provided by the family or other sources.
- Retrieve files as necessary from Records Management and follow all file tracking and log-out procedures.
- Conduct a daily, morning inventory of all files being actively worked on in the section for Records Management accounting.
- Return files not being actively reviewed to Records Management whenever possible.
- Receive identification match data for presentation to Medical Examiner from:
   - o Ante-mortem Odontology,
   - o Fingerprints Ante-mortem,
   - o Body X-ray,
   - o Anatomic features (Pathology or Anthropology), or
   - o DNA lab.
- Assemble all related files of an identification case (VIP ante-mortem folder, MRN files, and medical records) and examine for logical inconsistencies (e.g., history of amputation but body part is present). Present files to Verification Unit Leader for review prior to presentment to Medical Examiner for decision.
- Once approved by the Medical Examiner, perform VIP data entry to assign potential positive victim identifications (VIP) to post-mortem records (MRNs), including how identification was made, by who, time and date.
- Input identification match data in VIP from reports provided by:
   - o Odontology,
   - o Fingerprints,
   - o Body X-ray,
   - o Anatomic features (Pathology or Anthropology), or
   - o DNA.
- Prepare death certificate as directed for Medical Examiner signature.
- Notify families (procedures to be determined by Medical Examiner) of positive identification and obtain:
   - o signed authorization from next-of-kin identifying funeral home of choice (Remains Release Authorization)

- o funeral home name, and
- o if body part or less than complete remains, written family directive on preferred method of notification and handling of additional parts identified later (Additional Remains Release Election).
- Coordinate release authorization and death certificate delivery to Remains Release Team.
- Assemble all related files of an identification case (there may be several fragmentary remains MRNs linked by dental or DNA matching to one individual) and merge into the VIP ante-mortem file.
- Return all files of identified remains to Records Management with notation of merged MRN file numbers and presumptive death certificate files, if applicable.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

G.   **FINGERPRINT ANTE-MORTEM TEAM LEADER**
The Fingerprint Ante-mortem Team Leader assists in the victim identification process by receiving and managing ante-mortem fingerprint records for comparison with post-mortem impressions obtained during processing. The Fingerprint Ante-mortem Team Leader reports directly to the Verification Unit Leader.

Minimum MI-MORT Classification:
- Fingerprint Specialist

Description of Duties:
- Coordinates with the Verification Unit Leader to determine fingerprint requirements and the appropriate methods for comparing ante-mortem records with ridge detail impressions obtained from victims.
- Correlates all ante-mortem data with post-mortem fingerprint data for identification purposes.
- Provides positive identification reports to Verification Unit Leader.
- Coordinates with local agencies for access to AFIS or similar fingerprint databases.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Fingerprint Ante-mortem Team
  - o Code of Conduct
  - o Equipment and Supplies Requisition
  - o Numbering Systems
  - o Records Management
  - o Fingerprint Identification

On-site Operations:
- Report in at the MIC for assignment and log in procedures at the beginning of each shift.
- Assist in the set-up of the Fingerprint Ante-mortem Team.
- Brief Fingerprint Ante-mortem Team personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Receive notification that ante-mortem fingerprint records have been received and filed with the VIP ante-mortem folder in Records Management.
- Retrieve original ante-mortem fingerprint records from Records Management and follow all file tracking and log-out procedures.
- Ensure that a copy of original ante-mortem records is made and placed in the VIP ante-mortem file prior to removing the original set to the Team.
- Use VIP ante-mortem file numbering, if available, and record the VIP number on each ante-mortem fingerprint record followed by "-FP01", "-FP02", etc.

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- Maintain a log of all ante-mortem fingerprint records received from families or other sources.
- Conduct a daily, morning inventory of all files being actively worked on in the section for Records Management accounting.
- For ante-mortem fingerprint records received from sources other than Records Management:
  - o Use originals for day to day work, and
  - o Deliver copies of original fingerprint records to Records Management for inclusion in the VIP ante-mortem folder whenever possible.
- Log in post-mortem MRN prints couriered from morgue.
- Affect identification based on comparisons between ante and post-mortem prints as required.
- Provide guidance and instruction as necessary to fingerprint personnel from local jurisdictions involved in the investigation.
- Confer as necessary with officials of law enforcement and other agencies on locating sources of ante-mortem fingerprint records.
- Ensure concurrence by at least two fingerprint examiners to declare a match between ante and post-mortem records.
- Provide reports of positive identification (Report of Positive Identification) by fingerprint comparison, with MRN and VIP ante-mortem files attached, to Verification Unit Leader.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.
- Monitor use of supplies and notify Verification Unit Leader of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Document any lost or damaged equipment or item requiring maintenance or servicing and provide list to the Verification Unit Leader.
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Ensure all records and documentation are completed and forwarded to the Verification Unit Leader.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

H.   FINGERPRINT ANTE-MORTEM TEAM SPECIALIST

The Fingerprint Ante-mortem Team Specialist assists in the victim identification process by receiving and processing ante-mortem fingerprint records for comparison with post-mortem impressions obtained during processing. The Fingerprint Ante-mortem Team Specialist reports directly to the Fingerprint Ante-mortem Team Leader.

Minimum MI-MORT Classification:
- Fingerprint Specialist,
- Forensic Specialist, or
- Evidence Specialist

Description of Duties:
- Correlates all ante-mortem data with post-mortem data for identification purposes.
- Provides positive identification reports to Fingerprint Ante-mortem Team Leader.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - o Fingerprint Ante-mortem Team
  - o Code of Conduct
  - o Equipment and Supplies Requisition

- o   Numbering Systems
- o   Records Management
- o   Fingerprint Identification

On-site Operations:
- Report in at the MIC for assignment and log in procedures at the beginning of each shift.
- Assist in the set-up of the Fingerprint Ante-mortem Team.
- Participate in briefing of Fingerprint Ante-mortem Team personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Receive notification that ante-mortem fingerprint records have been received and filed with the VIP ante-mortem folder in Records Management.
- Retrieve original ante-mortem fingerprint records from Records Management and follow all file tracking and log-out procedures.
- Ensure that a copy of original ante-mortem records is made and placed in the VIP ante-mortem file prior to removing the original set to the Team.
- Use VIP ante-mortem file numbering, if available, and record the VIP number on each ante-mortem fingerprint record followed by "-FP01", "-FP02", etc.
- Maintain a log of all ante-mortem fingerprint records received from families or other sources.
- Conduct a daily, morning inventory of all files being actively worked on in the section for Records Management accounting.
- For ante-mortem fingerprint records received from sources other than Records Management:
  - o   Use originals for day to day work, and
  - o   Deliver copies of original fingerprint records to Records Management for inclusion in the VIP ante-mortem folder whenever possible.
- Log in post-mortem MRN prints couriered from morgue.
- Affect identification based on comparisons between ante and post-mortem prints as required.
- Provide guidance and instruction as necessary to fingerprint personnel from local jurisdictions involved in the investigation.
- Confer as necessary with officials of law enforcement and other agencies on locating sources of ante-mortem fingerprint records.
- Ensure concurrence by at least two fingerprint examiners to declare a match between ante and post-mortem records.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

I.   ANTE-MORTEM ODONTOLOGY TEAM LEADER

The Ante-mortem Odontology Team Leader assists in the victim identification process by receiving and managing ante-mortem dental records for comparison with post-mortem records obtained during processing. The Ante-mortem Odontology Team Leader reports directly to the Verification Unit Leader. *(While morgue operations continue, the Ante-mortem Odontology Team reports to the Odontology Team Leader. Upon morgue demobilization, reporting is as above.)*

Minimum MI-MORT Classification:
- Forensic Odonatologist

Description of Duties:
- Coordinates with the Verification Unit Leader and/or Medical Examiner to determine dental requirements and the appropriate methods for comparing ante-mortem records with records obtained from victims.

- Computerizes ante-mortem dental information and generates best matches using the Win ID program.
- Correlates all ante-mortem data with post-mortem data for identification purposes.
- Provides positive identification reports to Verification Unit Leader.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    - Ante-mortem Odontology Team
    - Code of Conduct
    - Equipment and Supplies Requisition
    - Numbering Systems
    - Odontology Protocol Guide
    - Records Management

On-site Operations:
- Report in at the MIC for assignment and log in procedures at the beginning of each shift.
- Assist in the set-up of the Ante-mortem Odontology Team.
- Brief Ante-mortem Odontology Team personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Conduct a daily, morning inventory of all files being actively worked on in the section for Records Management accounting.
- Provide training as necessary in using the computerized digital x-ray system to include:
    - scanner for digitizing ante-mortem x-rays, and
    - Transfer of images to Win ID.
- Receive notification that ante-mortem dental records have been received and filed with the VIP ante-mortem folder in Records Management.
- Retrieve original ante-mortem dental records from Records Management and follow all file tracking and log-out procedures.
- Scan ante-mortem dental x-rays and enter charting information using the Win ID program.
- For ante-mortem dental records received from sources other than Records Management:
    - Prepare copies for day to day work,
    - Deliver original dental records to Records Management for inclusion in the VIP ante-mortem folder whenever possible.
- Affect identification based on comparisons between ante and post-mortem records as required.
- Ensure maintenance of chain of custody of ante-mortem dental records received.
- Return files not being actively reviewed to Records Management whenever possible.
- Provide guidance and instruction as necessary to dental personnel from local jurisdictions involved in the investigation.
- Confer as necessary with officials of law enforcement and other agencies on locating sources of ante-mortem dental records.
- Ensure concurrence by at least two forensic odonatologists to declare a match between ante and post-mortem records.
- Provide reports of positive identification by dental comparison, with MRN and VIP ante-mortem files attached, to Verification Unit Leader.
- Monitor use of supplies and notify Verification Unit Leader of anticipated replenishment needs.
- Follow all Universal Precautions against exposure to communicable disease and biohazards.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Document any lost or damaged equipment or item requiring maintenance or servicing and provide list to the Verification Unit Leader.

- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Ensure all records and documentation are completed and forwarded to the Verification Unit Leader.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

J. ANTE-MORTEM ODONTOLOGY TEAM ODONTOLOGIST

The Ante-mortem Odontology Team Odonatologist assists in the victim identification process by receiving and processing ante-mortem dental records for comparison with post-mortem records obtained during processing. The Ante-mortem Odontology Team Odonatologist reports directly to the Ante-mortem Odontology Team Leader.

Minimum MI-MORT Classification:
- Forensic Odonatologist, or
- Non-forensic Odonatologist
- Dental Assistant or Dental Hygienist

Description of Duties:
- Computerizes ante-mortem dental information and generates best matches using the WinID program.
- Correlates all ante-mortem data with post-mortem data for identification purposes.
- Confers with officials of law enforcement and others who are directly concerned with specific facts of the disaster.
- Provides positive identification reports to Ante-mortem Odontology Team Leader.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
    o Ante-mortem Odontology Team
    o Code of Conduct
    o Equipment and Supplies Requisition
    o Numbering Systems
    o Odontology Protocol Guide
    o Records Management

On-site Operations:
- Report in at the MIC for assignment and log in procedures at the beginning of each shift.
- Assist in the set-up of the Ante-mortem Odontology Team.
- Participate in briefing of Ante-mortem Odontology Team personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Provide training as necessary in using the computerized digital x-ray system to include:
    o scanner for digitizing ante-mortem x-rays, and
    o Transfer of images to Win ID.
- Receive notification that ante-mortem dental records have been received and filed with the VIP ante-mortem folder in Records Management.
- Retrieve original ante-mortem dental records from Records Management and follow all file tracking and log-out procedures.
- Maintain a log of all ante-mortem dental records received from families or other sources.
- Conduct a daily, morning inventory of all files being actively worked on in the section for Records Management accounting.
- Scan ante-mortem dental x-rays and enter charting information using the Win ID program.
- For ante-mortem dental records received from sources other than Records Management:
    o Prepare copies for day to day work,

o Deliver original dental records to Records Management for inclusion in the VIP ante-mortem folder whenever possible.
● Affect identification based on comparisons between ante and post-mortem records as required.
● Return files not being actively reviewed to Records Management whenever possible.
● Provide guidance and instruction as necessary to dental personnel from local jurisdictions involved in the investigation.
● Confer as necessary with officials of law enforcement and other agencies on locating sources of ante-mortem dental records.
● Ensure concurrence by at least two forensic odonatologists to declare a match between ante and post-mortem records.
● Provide reports of positive identification by dental comparison to Ante-mortem Odontology Team Leader.
● Follow all Universal Precautions against exposure to communicable disease and biohazards.
Deactivation:
● Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
● Assist in the critique of the Team performance

K. MIC RECORDS MANAGEMENT TEAM LEADER
The Morgue Identification Center Records Management Team Leader is responsible for managing the storage and retrieval of all files related to the disaster. The Medical Examiner may elect to assign his/her existing staff to oversee or approve file management procedures. The Records Management Team Leader reports directly to the Verification Unit Leader.

Minimum MI-MORT Classification:
● Medical Investigator,
● Administrative Specialist,
● Evidence Specialist, or
● Mortuary Officer
Description of Duties:
● Oversees records management functions.
● Coordinates with the Morgue Identification Center Branch Director, Victim Ante-mortem Data Center Branch Director, and/or Medical Examiner to determine records management requirements and the appropriate methods for storing, retrieving, and merging documentation.
● Sets up the Records Management Team in conjunction with the MIC office.
● Ensures that file tracking procedures account for every file folder.
● Ensures compliance with Records Management Policy.
Upon Activation:
● See General Operational Checklist.
● Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
o Records Management
o Code of Conduct
o Equipment and Supplies Requisition
o Numbering Systems
o Records Management
On-site Operations:
● Report in at the MIC for assignment and log in procedures at the beginning of each shift.
● Request necessary supplies equipment, telephone, fax, and data lines, copiers, etc., from Logistics Supply Unit.

- Coordinate with the Morgue Identification Center Branch Director, Verification Unit Leader and/or Medical Examiner to determine permanent file cabinet equipment, space, and security requirements for records being stored.
- Brief Records Management Team personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Provide detailed briefing to review the MI-MORT Records Management Policy with file room staff.
- Supervise Records Management Team personnel.
- Establish file log location systems to expedite locating and retrieving files when required for release or reexamination.
- Establish a storage system to segregate case files by the following:
  - o Unidentified, numerically in MRN order (VIP post-mortem DVP folders from morgue),
  - o Identified and released,
  - o Identified and ready for release,
  - o Identified but unclaimed, and
  - o Presumptive death certificate (if applicable).
- Log and file materials as received:
  - o VIP ante-mortem reports from VIC together with related medical records or DNA specimen authorization forms (alphabetically in Last Name order),
  - o Court ordered presumptive death certificate files (alphabetically in Last Name order).
- Ensure notification of the appropriate MIC Team when new ante-mortem records have been received for filing.
- Establish record log-out procedures to include partial file release for:
  - o Dental ante and post-mortem comparison,
  - o Fingerprint ante and post-mortem comparison, and
  - o Body x-ray ante and post-mortem comparison.
- Coordinate release of files systematically and with proper accounting for person receiving file in accordance with the procedures of the Medical Examiner.
- Conduct a daily, morning inventory of all files being actively worked on in the MIC for Records Management accounting.
- Monitor use of supplies and notify Supplies/Facilities Unit Leader of anticipated replenishment needs.

Deactivation:
- Provide report and briefing to replacement on status of operations if rotating out prior to termination of the MI-MORT mission.
- Ensure all documentation is forwarded to the Verification Unit Leader.
- Ensure all personally issued equipment (Equipment Assignment) is returned to the Logistics Section.
- Assist in the critique of the Team performance.
- Participate in a formal Team After Action Report.

L.   RECORDS MANAGEMENT TEAM ASSISTANT

The Records Management Team Assistant is responsible for receiving, logging, and distributing morgue, missing person, and ante-mortem materials provided by families. The Records Management Team Assistant reports directly to the Records Management Team Leader.

Minimum MI-MORT Classification:
- Medical Investigator,
- Administrative Specialist,
- Evidence Specialist, or
- Mortuary Officer

Description of Duties
- Receives direction from the Records Management Team Leader on tracking and delivery requirements and the appropriate methods for documentation and verifying received materials.

● Ensures all received file materials are properly documented.

Upon Activation:
- See General Operational Checklist.
- Review applicable sections of the MI-MORT OPERATIONS MANUAL as a refresher with particular attention to Operational Overviews and policies on:
  - Records Management
  - Code of Conduct
  - Equipment and Supplies Requisition
  - Numbering Systems
  - Records Management

On-site Operations:
- Report in at the MIC for assignment and log in procedures at the beginning of each shift.
- Partake in briefing of MIC personnel to ensure all understand the overall processing flow and their specific duties and responsibilities.
- Maintain chain of custody documentation for all materials received and distributed.
- Log and file materials as received:
  - VIP ante-mortem reports from VIC together with related medical records or DNA specimen authorization forms (alphabetically in Last Name order),
  - VIP post-mortem DVP folders from morgue (numerically in MRN order), and
  - Court ordered presumptive death certificate files (alphabetically in Last Name order).
- Establish file log-out procedures to include partial file release for:
  - Dental ante and post-mortem comparison,
  - Fingerprint ante and post-mortem comparison, and
  - Body x-ray ante and post-mortem comparison.
- Coordinate release of files systematically and with proper accounting for person receiving file in accordance with the wishes of Medical Examiner.
- Serve as central receiving and distribution center with logging procedures for incoming known victim:
  - Dental records,
  - Medical records and body x-rays,
  - DNA samples for testing (other than those processed by DNA Team-VIC),
  - Fingerprint records, however,
  - Fingerprint Ante-mortem Team may obtain known prints directly from law enforcement agencies for comparison.
- File known victim received materials in the appropriate VIP ante-mortem folder.
- Notify the appropriate Team (Odontology or Radiology) of x-rays received for which digitizing will be required so that they may retrieve the materials from Records Management.
- Notify the Verification Unit of medical records received for which review will be required so that they may retrieve the materials from Records Management.
- Notify the Fingerprint Ante-mortem Team of fingerprint records received for which review will be required so that they may retrieve the materials from Records Management.
- Notify the DNA Team at VIC of received DNA samples for testing (other than those processed by DNA Team-VIC) for which processing will be required so that they may retrieve the materials from Records Management if necessary.

Deactivation:
- Ensure all personally issued equipment (Equipment Assignment form) is returned to the Logistics Section.
- Assist in the critique of the Team performance.

APPENDIX A

MI-MORT POLICIES

MI-MORT CODE OF CONDUCT

Members should take pride in the individual sacrifices members make and the work the entire MI-MORT Team accomplishes. Your conduct while on active duty should always be professional and with the best interest of the State in mind. As a MI-MORT Team member, adherence to the Code of Conduct is mandatory. Violation of the Code of Conduct may result in removal from the disaster site and temporary or permanent suspension from the Team. Each case of misconduct will be handled by the Commander or forwarded to MDHHS/MDHHS for appropriate action.

1. Insubordination will not be tolerated.
2. The chain of command will be followed. Criticisms, complaints, concerns, and grievances shall be channeled up the chain of command.
3. Command staff communication with MDHHS/CHECC should be limited to problems/issues that cannot be resolved by the Team. Team member communication with MDHHS/CHECC is discouraged except when requested by MDHHS/CHECC. Team members should contact the Administration and Finance Section Chief or the Commander with questions and/or concerns.
4. Any article written by a Team member for publication, or any personal news release regarding an official deployment or the activities of a Team, that identifies a particular disaster victim, must be approved by the MI-MORT Coordinator.
5. Discussion with any media source during activation is prohibited unless authorized by the MI-MORT Commander.
6. Any Team member who willfully takes unauthorized photographs, audio recordings, or videotapes at restricted areas of a disaster site response will be removed from the disaster site and his or her actions will be considered grounds for permanent removal from the Team.
7. Failure to report for duty when and where members agreed without a legitimate excuse is considered misconduct.
8. Entering into unauthorized contracts for goods or services in the name of the Team, MI-MORT, or Michigan State Government is strictly prohibited.
9. Unprofessional conduct such as disrespect regarding the injured, dead, their personal effects, or families will not be tolerated and shall be considered gross misconduct and will be considered grounds for permanent removal from the Team.
10. Acceptance of any bribe of money, goods, or services in exchange for information is prohibited.
11. Misappropriation of personal effects or money collected from the disaster shall not be tolerated and shall be considered gross misconduct and will be considered grounds for permanent removal from the Team.
12. Gambling or any gaming for money between Team members is not allowed during disaster activation.
13. Team uniforms shall not be worn into bars, taverns or other establishments in which a bad reflection would be made on the State or MI-MORT.
14. The use of any illegal drug or abuse of prescription medication at any time while on activation is strictly prohibited. Violation of this is considered gross misconduct and grounds for permanent removal from the Team. Prescription warnings should be followed as to avoid injury of self or others
15. Consumption of alcoholic beverages while on duty is prohibited. Driving or operation of government equipment or equipment issued to the government while under the influence of alcohol or drugs is prohibited and shall be regulated by local laws.

16. Local government laws and ordinances will be respected. Being temporarily employed by the state does not allow Team personnel to ignore local laws. In the event a Team member is arrested, he or she shall face prosecution according to local laws. Any member arrested shall notify Command staff immediately. Failure to so notify shall constitute a violation of the Code of Conduct.
17. Team members are responsible for reporting to their disaster work assignment at the time and place scheduled. Tardiness due to social activities will be considered misconduct.
18. Inappropriate, foul, or profane language is not tolerated.
19. Discrimination or harassment of any type, including but not limited to, race, religion, cultural background, national origin, or sexual orientation shall not be tolerated.
20. Hazing, pinning, initiation, public or private intimidation or humiliation, ceremonies or ritual events directed against any Team member are strictly prohibited.

EQUIPMENT AND SUPPLY REQUISITIONS POLICY

On-site operations will consume supplies and equipment in the DPMU cache. Reordering of supplies or requesting equipment not already contained in the DPMU requires a tracking system for proper accountability. The process for requisitioning such materials involves the following steps:

1. Team Leaders are responsible for requisitioning materials needed for their respective sections.
2. Team Leaders complete an Equipment or Supply Requisition Form.
3. The requisition is passed up through the Chain of Command to the Branch Director level where it is delivered to the Supply Unit of the Logistics Section. (This is to keep all parties informed of the request so duplicate requests can be avoided.)
4. The Supply Unit will either
   a. Fill the request with materials from the cache, or
   b. Place the orders to obtain the requested materials.
5. Delivery of the materials will be made to the Team Leader as soon as possible.
6.

ILLNESS/INJURY NOTIFICATION POLICY

If a team member becomes sick or injured while actively deployed or for a sanctioned exercise, they should seek medical assistance immediately. The team leader should be notified as soon as possible and notify command staff of the situation.

In case of injury, the Employer's Basic Report of Injury form must be completed within 24 hours by MI-MORT Command Staff and MDHHS-MDHHS Managerial Staff and DCH HR needs to be notified immediately. DCH HR will provide authorization for treatment. All information and medical bills related to a work injury will be forwarded to CMI for review and payment under the workers compensation process. A physician's statement must be provided to cover any absences from work due to this injury.

A work related injury becomes "compensable" if the team member is required to be off work seven days or more. Injuries of seven days or less are NOT compensable. If the team member must be off work for 15 days or more, compensation would be paid retroactive to the date of the injury. The Disability Management Coordinator in HR is responsible for monitoring this process.

The Employer's Basic Report of Injury form and the Employee's Report of Claim form can be downloaded at www.michigan.gov/wca located under the FORMS tab.

SEARCH AND RECOVERY TEAM PROTOCOLS

Immediate Response Caveat:

All disasters are local. In the first few hours following a disaster, notification of the location of human remains is made to the Medical Examiner. Recovery of these remains is coordinated by Medical Examiner staff using local resources. When Recovery Team resources arrive to assist, they are incorporated as directed by the Medical Examiner.

Mission:

To provide a well-trained, fully equipped, highly motivated MI-MORT capability to respond to disaster situations and coordinate or perform the tasks of search and recovery of human remains.

Scope:

MI-MORT search and recovery operations will be conducted in non-contaminated environments. For contaminated environments, assistance of decontamination teams must be requested to render the remains safe to handle prior to transportation to morgue operations for processing. The mission will be conducted in accordance with state and local laws and regulations as directed by the Medical Examiner.

Objective:

To conduct an operation in which human remains are located, properly documented and recovered in a dignified and respectful manner.

Concept of Operations:

- Command & Control: The Search and Recovery Branch is a functional element responsible to the existing command structure under the Operations Section Chief.
- Safety: Health and welfare of MI-MORT responders shall remain the top priority.
  - Contaminated human remains must be rendered safe before the Search and Recovery Team initiates recovery operations.
  - Any responder may refuse a mission if that responder believes that he/she cannot complete the mission safely.
  - No responder can be compelled to perform any task that the responder deems to be unsafe.
  - No responder shall be required to perform beyond his or her level of training and capability.
- Qualifications: Any MI-MORT member who is capable of meeting the physical, mental, and skill demands may serve on the Search and Recovery Team.

STANDARD OPERATING PROCEDURES (SOPS)

SOPs cover the following topics:
1. Command and Control/Team Composition
2. Scene and Responder Safety/PPE
3. Decontamination/Utilization of ancillary services
4. Search method basics
5. Scene processing
6. Assessment and Initial Search
7. Documentation of the Location of Human Remains, Personal Effects, and Evidence
8. Collection of Recovered Remains
9. Transportation of Human Remains
10. Chain of Custody
11. Scene imaging & mapping
12. Scene Security & Control
13. Equipment

SEARCH AND RECOVERY PROCEDURES

1. **Command and Control/Team Composition**
   While the Medical Examiner is responsible for fatality management operations, supporting resources augment that responsibility.
   a. Initiating a NIMS compliant system is essential for deploying and managing resources at the scene of a mass fatality incident. This system establishes a primary point of contact at the scene, an effective line of communication, and the ability to provide a safe and secure scene of operations. The Search and Recovery Branch Director will use this system to support and coordinate search and recovery efforts, establish staging areas (Search and Recovery Center – SRC) as necessary, and allocate resources including equipment, supplies, and personnel.

   b. The basic organizational model will be adapted or expanded to meet mission needs.

   c. The SRC Director will implement the following:
      i. Establish organizational command and control. Work with the jurisdictional Medical Examiner, local, state, and Federal responders to develop an integrated ICS.
      ii. Maintain communications with the Operations Chief and MI-MORT Command
      iii. Assess or establish physical boundaries (perimeter, zones, etc.).
      iv. Request and/or conduct a safety sweep of the area by personnel qualified to identify and evaluate additional hazards and safety concerns.
      v. Develop a search plan for the area(s) and identify the number of personnel, equipment, and special resources, such as cadaver search canine, needed to accomplish the mission.
      vi. Delegate respective NIMS compliant positions as necessary for the search and recovery operations.
      vii. Establish on-scene facilities as necessary (such as staging, rehab, command, access, etc.)
      viii. Develop joint operational action planning to include strategies, tactics and methodologies, timelines and processing milestones.
      ix. Implement documentation for scene access, resource management, action planning, and a log of actions taken at the scene.
      x. Implement documentation for the collection, recovery and transportation of human remains and personal effects.
      xi. Ensure that none of the remains are moved until approval has been authorized the Medical Examiner through appropriate channels.

2. **Scene and Responder Safety/PPE**
   a. Responder safety overrides all other concerns. MI-MORT personnel must take steps to identify and remove or mitigate safety hazards that may further threaten responders. MI-MORT personnel must exercise due caution while performing emergency operations to avoid injuries to themselves and others.

   b. The SRC Director or designated safety officer will conduct a briefing of team members prior to commencing activities to alert Team members of specific safety issues known at the time.

   c. Safety is the responsibility of every Team member. Following the initial evaluation of the scene, MI-MORT personnel should:
      i. Follow standard Environmental Protection Agency (EPA) and Occupational Safety and Health Administration (OSHA) regulations.
      ii. Follow standard distancing precautions for potential nuclear, biological, and chemical hazards.
      iii. Mark hazard areas clearly and designate safety zones and safe havens if necessary.
      iv. Communicate hazards to other personnel arriving at the scene.

      v.   Monitor personnel for dehydration, stress, and fatigue and treat as necessary.

      vi.   Utilize the established medical plan, including sufficient medical personnel assigned to treat site responders.

      vii.   Establish scene safety plan to include an evacuation plan.

    d.   PPE: The determination of the level of personnel protection required will be the responsibility of the SRC Director in consultation with the designated safety officer or other qualified designee in accordance with applicable standards.

3.   **Decontamination/Utilization of Ancillary Services**

The search and recovery team shall coordinate with necessary ancillary services as dictated by the mission. Such services may include, but are not limited to, Urban Search and Rescue (USAR) teams, canine cadaver teams, and other local, state, and federal services such as DMORT-WMD team if contamination of remains is encountered.

    a.   MI-MORT does not possess HazMat trained staff or equipment necessary to handle events that are chemical, biological, radiological, nuclear, or explosive (CBRNE) in nature.

    b.   CBRNE events will require the assistance of non-MI-MORT resources to decontaminate human remains prior to retrieval by MI-MORT Search and Recovery Team members.

    c.   Recovery of contaminated remains may be delayed for substantial periods of time (days to weeks in the case of radiological incidents) until appropriate decontamination resources can be implemented.

    d.   Local HazMat teams with appropriate level of PPE may be called upon to move contaminated human remains to a holding facility (preferably refrigerated) until decontamination procedures can be implemented.

    e.   Weak structural integrity of damaged buildings may prevent recovery until heavy equipment teams are able to minimize safety risks.

4.   **Search Method Basics**

Utilizing established search protocols, an appropriate search method will be employed with consideration given to weather, terrain, location and condition of the human remains. Appropriate documentation of search method shall be done.

    a.   Establishing the Search Area -There are four methods of establishing the Search Area:

        i.   <u>Theoretical</u>: Disaster area within which the human remains could be located

             Theoretical Search Area = πr^2

             Area = $3.14 * 1^2 = 3.1$ square miles

The Search Team Leader initially must consider the total area (that of a circle) within which the human remains may be located.
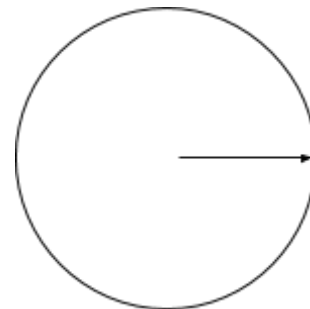
        ii.   <u>Experiential</u>: Experiential data which reflects the distances human remains have been located in similar conditions. Experience derived from previous incidents can be extremely valuable in establishing a search area. The Search Team Leader can use analyses of case history data as a tool for establishing the search area. Although they provide assistance, past experiences are not absolutes and always subject to exceptions.

        iii.   <u>Subjective</u>: Evaluation of the limiting factors that exist for the specific incident and geographic location. Almost without fail, there will be a broad spectrum of subjective factors that will affect the establishment of the search area. Among them are:

            (a.) "Likely spots",

(b.) Natural barriers and terrain features,

(c.) Physical clues, and

(d.) Historical data.

(e.) Gut feeling or intuition based on special circumstances.

iv. Deductive Reasoning: Methodical step-by-step analysis of circumstances. Going from the general to the specific. This is the process of reasoning in which the Search Team Leader looks at general facts and circumstantial evidence and logically deduces probable conclusions that are not obvious or were not known initially.

b. Allocating Search Resources- Successful search missions are dependent on quick response, efficient searching and good management. The three factors essential for a successful operation are:

i. Resources: the right ones, responding at the right times, in the right places.

ii. Communications: of all types, to all search members, plus feedback to the SRC Director.

iii. Management: searches fail because of poor management more than any other reason.

c. Keys to Successful Searching

i. Respond quickly.

ii. Confine movements of witnesses.

iii. Use advance teams to flag routes.

iv. Find clues.

v. Protect clues.

vi. Diversify your initial response action.

vii. Back up your operations – redundancy can equal success.

d. Grid Search Personnel Requirements- To Search One Square Mile:

5. Spacing (feet)	6. Searchers	7. Hours*	8. Total Searcher Hours
9. 150	10. 35.2	11. 3.5	12. 123.2
13. 140	14. 37.7	15. 3.5	16. 132
17. 130	18. 40.6	19. 3.5	20. 142.2
21. 120	22. 44	23. 3.5	24. 154
25. 110	26. 48	27. 3.5	28. 168
29. 100	30. 53	31. 3.5	32. 185.5
33. 90	34. 58.7	35. 3.5	36. 205.3
37. 80	38. 66	39. 3.5	40. 231
41. 70	42. 75.4	43. 3.5	44. 264
45. 60	46. 88	47. 3.5	48. 308
49. 50	50. 105.6	51. 3.5	52. 369.6
53. 40	54. 132	55. 3.5	56. 462
57. 30	58. 176	59. 3.5	60. 616
61. 20	62. 264	63. 3.5	64. 924
65. 10	66. 528	67. 3.5	68. 1848

*Average trained grid team takes 3.5 hours to go 1 mile.

5. **Scene Processing**

The complete and accurate identification of human remains and evidentiary processing begins at the scene of the mass fatality incident. The Medical Examiner has the ultimate responsibility for the recovery and identification of the deceased.

a. Processing typically follows sequential steps:

    i.   Assessment and initial search team, if available, locates and flags potential human remains
    ii.   Documentation search team:
       (a.)   Verifies human vs. animal (anthropology),
       (b.)   Assigns a field number to the remains,
       (c.)   Determines GPS coordinates, if applicable
       (d.)   Affixes VeriChip, if applicable
       (e.)   Photographs the remains with the field assigned number,
       (f.)   Logs the description and location,
       (g.)   Affixes identifying tags or markings to the human remains, and
       (h.)   Notifies the Collection Team for removal to the transportation staging area.
       (i.)   Collection team
          (i.)   Places human remains in disaster pouches or other suitable containers, and
          (ii.)   Verifies field assigned number on the remains and pouches.
       (j.)   Transportation Team:
          (i.)   Transports recovered remains to morgue processing center, and
          (ii.)   Documents removal from site and receipt at morgue processing.

b.   The search and recovery teams have to assume that any mass fatality scene could be a crime scene. They are expected to carefully document every piece of physical evidence recovered from the scene.

c.   The scene perimeter should be large enough to ensure its protection from public access until all agencies have agreed to release the scene.

d.   Although teams can discard information later, scene processing always involves the physical destruction of the actual scene, and additional information may not be recoverable after the scene has been processed and released.

e.   Efficient information recovery proceeds from the least intrusive to the more intrusive (e.g., after teams locate, flag, and sequentially number the human remains, they are photographed prior to removal).

f.   Although protocols may change in the middle of an event depending on the scope and extent of the incident, documenting every aspect of the human remains/evidence processing operation will ensure the preservation of information.

6.   **Assessment and Initial Search**
Before processing the scene, MI-MORT Command, in consultation with the local Medical Examiner, is expected to:
a.   Assess the scope of the Search and Recovery area to define the mission.
b.   Determine the size and composition of the Search and Recovery Teams. Each team should be led by a competent forensically trained member. The composition of each team can include any combination of MI-MORT team members and local responders as authorized by the Medical Examiner. However, emphasis must be placed on health, strength, and endurance capability of the members. Team composition should be dictated by the needs (strategic goals and operational objectives) of the incident.
c.   Integrate the Search and Recovery Teams according to existing interagency jurisdiction and chain of command. The scope and extent of the mass fatality incident determines the number of agencies involved.
d.   Establish and/or verify control over access to the scene. Coordinate MI-MORT access to the site.
e.   Establish communications among transport vehicles, on-scene incident command, the Operations Section, and the morgue, as necessary.
f.   Establish an on-scene human remains processing station (Search and Recovery Center-SRC)

g.   Determine if initial search teams are to be dispatched to locate and flag potential remains for follow-up by Search Team documentation personnel. During initial search activities, suitable stakes or markings will be placed at the location of found human remains without disturbing the remains.

h.   Standard archaeological methodologies may be needed in the planning and implementation of an effective and efficient search of the disaster to locate all relevant human biological materials.

7.   **Documentation of the Location of Human Remains, Personal Effects, and Evidence**
The search and recovery teams shall include documentation in the permanent record of the scene. Photographic documentation creates a permanent record of the scene that supplements the written incident reports. The teams shall complete this documentation, including location information, before the removal or disturbance of any items. Videotaping may serve as an additional record but not as a replacement for still photography. Records of each set of human remains or other item recovered will be documented in writing on:

a.   Search Team Reports and Log books:
   i.   Recovery Site Report
   ii.   Recovery Site Field Log
   iii.   Recovery Site Master Log
   iv.   Recovery Site Transport Log

b.   Forms designated for use by Medical Examiner.

c.   Toe Tags or other attachments using waterproof ink markers.

d.   Disaster pouches.

e.   The search and recovery teams are expected to adhere to Medical Examiner dictated procedures including:
   i.   Locating, flagging, and attaching field reference numbers to all human remains, personal effects, and evidence in the grid.
   ii.   Assigning field reference numbers for items recovered. (Multiple sites will require coordination of field number systems to be used.) The number system used should be:
      (a.)   Internally consistent, cross-referenced with other agencies and integrated into all protocols and reports,
      (b.)   Expandable yet simple to interpret,
      (c.)   Capable of indicating where the remains, personal effects, and evidence were recovered,
      (d.)   Capable of tracking remains, personal effects, and evidence throughout the investigation, and
      (e.)   Relate to subsequent processing steps without error.
   iii.   Recording recovery location information including GPS coordinates, if applicable, and notes that may help with personal identification or scene reconstruction (e.g., name and address on mail in the vicinity of the remains, generic descriptors, such as a foot or shoe).
   iv.   Affixing VeriChip to remains, if applicable
   v.   Photographing individual items (midrange and close) with an identifier (i.e., field reference number and a grid identifier, if applicable) and scale. Consider including a directional compass arrow that points north.
   vi.   Documenting the evidence collector (e.g., the collector's unique identifier or name and the date and time of recovery).
      (a.)   All remains, effects and evidence should be documented on an appropriate form provided by the local jurisdiction or developed and approved for the specific mission.

8.   **Collection of Recovered Remains**
Conduct the systematic removal of human remains, personal effects, and evidence:
a.   Using a permanent marker, mark the outside of the primary bag or container and tag with the identifying number, the collector's unique identifier or name, and the date and time of collection.
b.   Place the same identifying number on the inside of the body bag or other bag or container. Utilization of the aluminum tag is recommended if available.

c. Transport all personal effects on or with the human remains to the morgue. Wallets and jewelry or other items attached to human remains will not be removed at the site. They will be transferred to the morgue with the remains.

d. When necessary and possible, wrap the head before moving it to protect cranial/ facial fragments and teeth.

e. Do not assume that fragmented human remains are associated with each other. Unless directly connected by intact tissue, all partial human remains will be handled individually. If a presumptive association is possible a note shall be made on all applicable forms.

f. After removing the human remains, photograph the areas from which evidence was recovered to document whether anything was under the human remains.

g. After the search and recovery teams have cleared the area and before releasing the scene for public access, conduct a final shoulder-to-shoulder sweep search to locate any additional items.

9. **Transportation of Human Remains**
Human remains shall be removed from the recovery location in a manner consistent with normal dignified funeral practices unless an immediate removal is dictated by exigent circumstances.

a. All human remains will be singularly placed in a disaster pouch and labeled in accordance with established consistent procedures.

b. The human remains will not be stacked one on the other in any vehicle or storage facility.

c. To the degree possible, human remains will not be commingled.

10. **Chain of Custody**
Establishing and maintaining a chain of custody verifies the integrity of the evidence. The remains/evidence processing teams are expected to maintain the chain of custody throughout the recovery process. Throughout the investigation, those responsible for preserving the chain of custody shall:

a. Use Medical Examiner/law enforcement standard chain of custody procedures.

b. Document the time of arrival and departure of Search and Recovery personnel at the scene.

c. Document the collection of evidence by recording its location at the scene and time of collection.

d. Document all transfers of custody (including the name of the recipient and the date and manner of transfer).

11. **Scene Imaging & Mapping**:
If overall scene mapping is not already assigned to a designated unit by Incident Command, the search and recovery teams can use a grid system to divide the scene into manageable units to show the location and context of items (i.e., their positions relative to other items) at the scene. A grid system may need to be three dimensional if building searches involve multiple floors. The documentation of the site minimally includes the production of a plan view map or sketch displaying the location of all recovered human remains relative to permanent feature(s) of the scene. The search and recovery teams are expected to (as dictated by the event):

a. Identify boundaries and fixed landmarks (e.g., a utility pole, building corners, or GPS located points).

b. Establish a primary point of reference for the scene.

c. Divide the scene into identifiable sectors and create a grid system.

d. Use accurate measuring devices. Suggestion: Consider using steel tapes (which do not stretch) and electronic measuring/positioning devices.

e. Record overall views of the scene (e.g., wide-angle, aerial, 360-degree) with a designated photographer to relate items spatially within the scene and relative to the surrounding area. A combination of still photography, videotaping, and other techniques is most effective.

f. Remember to:

i. Consider muting the audio portion of any video recording unless there is a narration.

ii. Minimize the presence of scene personnel in photographs/videos.

iii. Maintain photo and video logs.

12. **Scene Security and Control:** Search and Recovery Team personnel shall follow established mission security protocols and request additional security resources as needed.

13. **Equipment:**
The Search and Recovery Branch shall establish a Search and Recovery Center (SRC) and maintain an equipment cache. The Logistics Chief will be responsible for ensuring the maintenance, readiness and delivery of the cache. The initial equipment cache includes:
    a.   Flags, Marking
    b.   Gloves, Leather
    c.   GPS Handheld units
    d.   Human remains pouches
    e.   Office supplies, Log books, Markers
    f.   Photo Kit with GPS Card
    g.   PPE (Level D)
    h.   Radios
    i.   Rakes
    j.   Rulers
    k.   Shovels
    l.   Tag, Aluminum Write On
    m.   Tarps
    n.   Trowels
    o.   VeriChip Inserters and VeriChips and Scanners

NUMBERING SYSTEMS FOR HUMAN REMAINS POLICY

An accurate and reliable numbering system for all human remains is crucial to an effective MI-MORT mission. The system must conform to the needs of the local Medical Examiner as well as be sufficient for proper evidence tracking. *In the absence of an established Medical Examiner system* the following guidelines may be employed. There are several places where the numbering system must be carefully managed.

1.   Field or Search and Recovery - The numbering system starts in the field.
   a.   It should always be consecutive and non-repeating. A simple system is preferred (e.g., Bag 1, Bag 2, Bag 3, etc.).
   b.   Prefixes MAY be used to clarify where they were found (e.g. F-1 for floating remains in the water, S-1 for submerged remains, Grid B-3, etc.).
   c.   In the field, all individual remains must be given their own number.
   d.   If remains are not connected by clothing or tissue, they must get different bags and numbers.

2.   Morgue Operations:
   a.   If possible, the field assigned number shall be used as the Morgue Reference Number (MRN) unless a different system is established by the Medical Examiner.
   b.   The MRN and suffixes will be used to further identify multiple items related to the MRN (be sure to include the leading zero for numbers 01 through 09):
      i.   Digital photographs stored in the computer server should be titled with the MRN followed by DP01 through DP0x to designate the number of digital photographs taken.
      ii.   Personal Effects collected should be labeled with the MRN followed by PE01 through PE0x to designate the number of items collected for each case.
      iii.   Post-mortem digital body x-rays stored in the body x-ray computer server (if applicable) should be titled with the MRN followed by BX01 through BX0x to designate the number of digital body x-rays taken.
         (a.)   Ante-mortem body x-rays digitized would be labeled by the number assigned to the VIP ante-mortem folder, e.g., VIP#- BX01 through BX0x to designate the number of digital body x-rays received and digitized.
      iv.   Fingerprint cards created should be labeled with the MRN followed by FP01 through FP0x to designate the number of print impression cards made for each case.
         (a.)   Ante-mortem fingerprint cards would be labeled by the number assigned to the VIP ante-mortem folder, e.g., VIP#- FP01 through -FP0x to designate the number of fingerprint cards received.
      v.   Post-mortem digital dental x-rays stored in the dental x-ray computer server (DEXIS) should be titled with the MRN followed by DX01 through DX0x to designate the number of digital dental x-rays taken.
         (a.)   Ante-mortem dental x-rays digitized would be labeled by the number assigned to the VIP ante-mortem folder, e.g., VIP#- DX01 through DX0x to designate the number of digital dental x-rays received and digitized.
      vi.   Post-mortem DNA specimens (only if multiple specimens are collected from a single MRN item) should be titled with the MRN followed by DN01 through DN0x to designate the number of specimens taken.
         (a.)   Ante-mortem DNA known family samples (Buccal swabs) would be labeled by the number assigned to the VIP ante-mortem folder, e.g., VIP#- DB01 through DB0x to designate the number of samples received.
         (b.)   Ante-mortem DNA known reference specimens (e.g., tooth brush, clothing, razor, etc.) would be labeled by the number assigned to the VIP ante-mortem folder, e.g., VIP#- DR01 through DR0x to designate the number of specimens received.

vii.   Summary of case numbering suffixes applied (be sure to include the leading zero for numbers 01 through 09):
    (a.)   DP01   Digital Photos
    (b.)   PE01   Personal Effects
    (c.)   BX01   Body X-rays
    (d.)   FP01   Finger Prints
    (e.)   DX01   Dental X-rays
    (f.)   DN01   DNA Specimens (post-mortem)
    (g.)   DB01   DNA Family Samples (Buccal swabs)
    (h.)   DR01   DNA Reference Specimens (known victim DNA)

c.   Identified Remains Case Number Conventions:
   i.   The Medical Examiner may elect to enter identified remains in the District's existing computerized case file management system for that office once MRN case files have been matched to VIP case files.
    (a.)   Cross reference notes should be made to indicate which VIP case and MRN case(s) are associated with the master case number.
    (b.)   Multiple MRN cases may be matched by dental or DNA identification to one individual.
   ii.   The Medical Examiner may elect to use the first MRN identified with a particular VIP as the PRIMARY number.
    (a.)   Additional MRN cases identified as the same individual may be cross referenced to the primary MRN for tracking purposes.
    (b.)   Logs of MRN numbers should be updated to reflect the primary and secondary links for tracking purposes.

PHOTOGRAPHY POLICY

MI-MORT recognizes the importance of utilizing photographs and video taping for scene documentation as well as various forensic aspects of the morgue operations. It further recognizes that unauthorized photography or videotaping must be controlled to maintain the integrity of the operation. *In the absence of an established Medical Examiner policy* the following policy will be enforced.

1. All photographs/video taken shall be the property of the Medical Examiner and shall be under the control and custody of the MI-MORT Commander or designee until delivered to the Medical Examiner upon completion of the mission.

2. Unauthorized display of "autopsy" photographs is prohibited by law, MCL 333.2855a.

3. Photographers and/or videographers will be designated to perform necessary documentation tasks. Each will be assigned a specific duty station(s). They are only authorized to take pictures pertinent to their duty station and shall not be authorized to take candid pictures or video.

4. Personal cameras or camcorders are not allowed in controlled areas with the exception of the Official Photographer. Film or digital media containing unauthorized photographs/video will be confiscated. Controlled areas are defined as:
    a. Inside the perimeter of the disaster scene.
    b. Inside the morgue facility.
    c. Inside the Administrative Command Post.
    d. Inside the Victim Ante-mortem Data Center.
    e. Inside the Morgue Identification Center.
    f. Inside the Information Resources Center.
    g. Any human remains.
    h. Memorial services.
    i. Other "disaster-specific" areas as designated.

5. Team members will be allowed to take candid pictures in non-controlled areas. Non-controlled areas are defined as any area that is not designated as controlled.

6. The MI-MORT Commander will appoint a photographer as the "disaster-specific" official MI-MORT Photographer or videographer. The individual(s) will be identified with a specific identification card, which clearly indicates OFFICIAL PHOTOGRAPHER. Only the Official Photographer will be allowed to take candid pictures to document MI-MORT activities in controlled areas. At a mutually agreed time, the Official Photographer will meet with the MI-MORT Commander and Medical Examiner to review the pictures or video. They will make the decision of which photographs/video are suitable for release to Team members.

7. Team members will be allowed to review all approved photographs/video and select the ones they wish to acquire, which will be duplicated on a cost basis.

8. It is recommended that a picture of the Official Photographer be posted so that Team members can identify the individual. This will assist with security purposes and help to avoid impostors.

9. Refer to Disaster Team Code of Conduct for more information regarding this policy.

PERSONAL EFFECTS POLICY

Personal effects: are physically on the deceased victim and can be associated with the deceased. *In the absence of an established Medical Examiner system* personal effects will be handled in the following manner:

1. Clothing:
   a. A description of clothing will be entered into the VIP Recovered Clothing Description Form.
   b. Clothing will be recorded on a Personal Effects/Property Release form and turned over to the Personal Effects Team.
   c. Clothing will NOT be released with the deceased to the NOK but separately as with jewelry.

2. Jewelry such as watches, rings, necklaces, etc. will be evaluated by the Pathology Team Leader on the basis of intactness and damage, recorded on a Personal Effects/Property Release form and turned over to the Personal Effects Team.
   a. *Intact Jewelry*. Defined as: jewelry that appears to be complete and absent of significant damage to its structure. (Jewelry that is intact but discolored by fire or chemicals is handled as intact.)
   b. *Damaged Jewelry*. Defined as jewelry that appears to be incomplete or has been cut for removal purposes or appears to have been significantly altered in form or shape.

3. Miscellaneous Personal Effects such as wallets, personal papers, pagers, cell phones, etc. shall be recorded on a Personal Effects/Property Release form and turned over to the Personal Effects Team.

4. Personal Effects Team shall maintain a log reflecting the MRN source and brief description of the items.

5. Personal Effects/Property Release form will be used to release clothing, jewelry, or other items to the personal effects security agent designated to handle other personal effects from the disaster site. The agent will be responsible for returning the items to the NOK. Items should be cleaned, as best possible, photographed, and returned separately to the NOK or the funeral home designated by the NOK. In the event there is not a designated agent the items should be cleaned, photographed, and returned to the NOK by the Personal Effects Team in coordination with the MIC.

6. The above policy does not include unassociated personal effects such as luggage, loose clothing, documents, etc., which are recovered at the disaster scene. MI-MORT will not accept responsibility for these items and considers them the sole responsibility of another agency or designated agent. These items will not be allowed to enter the morgue area and will not be considered the responsibility of the MI-MORT Personal Effects Team of the mortuary operations.

CLASSIFICATION OF HUMAN REMAINS ADMITTED TO MORGUE POLICY

All containers and pouches containing human remains admitted into the morgue system will be assigned a "Morgue Reference Number" (MRN-__) by the Admitting/Processing Group Supervisor. Any number(s) already assigned to the remains, for example, by SRC, should be reflected on the admitting log. When remains are processed by the Pathology Team, they will be classified by a pathologist in that Team. The Pathology Team may request examination by the Anthropology Team prior to classification determination. The 3 classifications options are:

1. Complete Human Remains (C/HR). This is defined as a body that has all structures attached regardless of the severity of injury, or when unattached body structures that accompany the body can be identified as belonging to that particular body and collectively accounts for all body structures.

2. Incomplete Human Remains (INC/HR). This is defined as body parts/structures or a body with any missing structure(s) due to the disaster incident.

3. Common Tissue Human Remains (CT/HR). This is defined as any human tissue recovered that cannot be identified as belonging to a particular body.

When the classification of the body has been established the classification shall be entered into the records and the Admitting Team Leader shall note the classification status in the Admitting log prior to transmitting the VIP to MIC.

COMMINGLED HUMAN REMAINS FOUND IN SAME DISASTER POUCH POLICY

In the absence of an established Medical Examiner system, if it is discovered that there are NON-RELATED body structures in one disaster pouch, each individual structure shall be removed and placed in a separate pouch or container labeled with amended identifying numbers, including any grid numbers, with the added amendment of A, B, C, and so on to the MRN.

> *Example*:
> Body 48 is intact except the left leg is missing. However, inside the pouch are found NON-RELATED body structures. A NON-RELATED right arm is found and a NON-RELATED right leg is found. The following would be the appropriate steps.

Body 48 is classified as Incomplete Human Remains (INC/HR). The non-related right arm is placed in separate container or pouch and labeled 48A (log will note INC/HR). The non-related right leg is placed in a separate container or pouch and labeled 48B (log will note INC/HR).

JAW RESECTION POLICY

Dental structure examination plays an important role in the identification of disaster fatalities. While the importance of a thorough and accurate examination is clearly understood, it is important that certain guidelines are established to avoid possible embalming complications regarding view ability of the deceased. *In the absence of an established Medical Examiner policy, the Pathologist present in the morgue will determine policy*.

Viewable: The probability is good to suggest that embalming and post-mortem re-constructive cosmetology may allow viewing of the victim by family and/or friends. Therefore, facial incisions, oral autopsy examinations, or extraction of fingers should not be performed unless deemed absolutely necessary for evidentiary value.

Non-Viewable: The probability is poor to suggest that embalming and post-mortem re-constructive cosmetology may allow viewing of the victim by family and/or friends. Examinations may be accomplished as deemed necessary.

Appropriate DVP/VIP forms will be used to determine the classification. The classification of the human remains will affect the dental examination technique performed.

1. *Viewable* Resection should not be performed unless it is directed by the Medical Examiner.
   a. Resection should not be performed without consultation with the Pathologist present in the morgue
   b. If the Medical Examiner authorizes resection, it must be performed in a manner to preserve the possibility for viewing the body by the NOK.
   c. A non-mutilating technique should be used since it will allow ready visualization of the dental structures without disfiguring the face and will allow for improved facial re-constructive cosmetology.
   d. Resection can only be performed with the approval of Odontology Team Leader

2. *Non-Viewable* Resection may be performed at the discretion of the odonatologist.
   b. All oral structures that are removed will be returned to the respective body and placed in their anatomically correct position unless expressly directed by the Medical Examiner to retain the structures for evidentiary purposes.

ODONTOLOGY PROTOCOL GUIDE

Information and the general outline of this protocol was obtained from and developed with the permission of Dr. E. Woolridge and Dr. A. Warnick from the DMORT Odontology Protocol written by the above authors in June 2003

The Odontology Protocol is intended as a guideline to help MI-MORT meet its mission assignment of assisting Michigan Medical Examiners in a mass disaster situation when the dental identification of human remains is required.

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PROTOCOLS

1. MI-MORT/ICS Reporting Alignment

    Post-mortem Morgue and Ante-mortem Odontology Teams are supervised by an Odontology Team Leader who reports to the Morgue Forensic Group Supervisor, who reports to the Morgue Branch director, who reports to the Operations Chief. Command level meetings will involve the Odontology Team Leader to coordinate protocols desired by the Medical Examiner. This may involve additional consultation with the resident Forensic Odonatologist, if so designated by the Medical Examiner.

    In the initial stages of a response, the Odontology Team Leader may devote more time and effort to the Post Odontology Team workload in morgue operations to initiate processing. As the event develops over time, the Odontology Team Leader may shift attention and base of operations to the Ante Odontology Team needs.

    When Morgue operations are demobilized, Odontology Team assignment shifts to the Identification Branch where dental matches contribute to victim identification. At that point the Odontology Team Leader reports to the Verification Unit Leader, who reports to the Morgue Identification Center Branch Director, who reports to the Operations Chief.

2. Odontology Team Leader Responsibilities
    The Odontology Team Leader receives briefings from Commander Staff, the Medical Examiner and the locally designated Forensic Odonatologist (if applicable). Responsibilities:
    a. Assure shift sign-in logs are accurate.
    b. Maintain knowledge of all participants' location at all times.
    c. Coordinate the scheduling of personnel with chain of command up to the Planning Section Chief.
    d. Maintain awareness of individual capabilities.
    e. Work directly with the local dental team in personnel assignments.

f.   Assign a time and place for meetings before each shift to review procedures and goals of the day.

g.   Review and update the database of those listed as missing (ante-mortem records) and unidentified (post-mortem records) at the start of each day.

h.   Conduct independent audit of ante-mortem and post-mortem data for quality control purposes.

i.   Help the local Dental Team if they do not have equipment or protocol in place.

j.   Provide contact information to Logistics for dental supply companies nationwide and assure that all the necessary supplies and protective gear is available.

k.   Receive and verify all requests for re-supply and new equipment prior to submitting the request to the Morgue Branch Director.

l.   Coordinate computer and database management needs with the Communication Unit of the Logistics Section. Alteration of data management procedures may be implemented only after the Odontology Team Leader and the Communications Unit have evaluated the change request and are able to ensure continued integrity of all systems and data stored.

3.   Post-mortem/Morgue Protocol

    a.   Post-mortem Team Leader Responsibilities

       i.   Conduct daily meeting prior to the start of each rotation with the counterpart from the proceeding shift, if applicable.

       ii.   Confirm that all supplies and equipment are present and that personal assigned to the post-mortem section are adequately trained in the use of the computer, DEXIS and the hand held x-ray units.

       iii.   Assign team members that consist of at least two dentists and one auxiliary.

       iv.   Exchange information with other disciplines/team approach.

       v.   Distribute pertinent information to team members by having an assigned time and place for team meetings.

       vi.   Assure the computer database is backed up at the end of each shift.

       vii.   Conduct daily audit of randomly selected files for accuracy and completeness.

       viii.   At the end of each shift all written Post-mortem records will be taken to the record keeping area.

    b.   Clinical examination and charting of victim

       i.   All team members who are deployed will follow the examination protocol taught at the yearly training meetings.

       ii.   Each 3 person team consists of a minimum of 2 dentists and 1 auxiliary.

       iii.   The Universal charting systems will be used.

        (a.)   All charting will be done on a post-mortem Win ID chart prior to entry into the post-mortem computer.

        (b.)   Case Numbers assigned to each victim and entered into WINID system will be consistent with the case number assigned to the victim (Morgue Reference Number)

       iv.   Radiographs using the DEXIS system will be completed and the file where the images are placed will be noted on the written chart.

       v.   A full series of radiographs will be taken on all victim dentition including victims that are fully edentulous. Lead aprons must be worn by all persons while taking radiographs. Radiographs will be of diagnostic quality.

       vi.   A copy of the dental chart will be made before the body leaves the odontology post-mortem section.

       vii.   All post-mortem data entry will be according to the protocol taught at the yearly training meetings.

       viii.   At the end of each shift the post-mortem odontology section and equipment will be cleaned according to OSHA requirements.

4.   <u>Ante-mortem Protocol</u>
   a.   Ante-mortem Team Leader Responsibilities:
      i.   Daily meeting prior to the start of each rotation with your counterpart from the proceeding shift.
      ii.   Confirm that all supplies and equipment are present and that personal assigned to the ante-mortem section are adequately trained in the use of the computer, DEXIS and scanner.
      iii.   Assign two member teams
      iv.   Exchange information with other disciplines using a team approach.
         (a.) Non dental information, for example, Social Security numbers located on dental appliances, need to be communicated to the Morgue Identification Center staff.
         (b.) Anatomic features not previously noted in processing reports of Pathology, Anthropology, etc., need to be brought to the attention of the appropriate Team for follow-up and possible reexamination.
      v.   Distribute pertinent information to team members by having an assigned time and place for team meetings.
      vi.   Assure the computer database is backed up at the end of each shift.
      vii.   Perform a daily audit of randomly selected files for accuracy and completeness.
      viii. At the end of each shift all written ante-mortem record copies will be taken to the record keeping area.
   b.   Ante-mortem Examination Section Team
      i.   When receiving ante-mortem information it is important to retain the original packing/envelopes that came with the information. The identification number assigned by the Medical Examiner should be placed on all records assigned for each individual.
      ii.   Charting and entering ante-mortem information into the computer should follow the accepted WINID protocol for each two person team.
      iii.   Team members assigned to scanning ante-mortem radiographs are to note on each written chart the file where the images are stored.
      iv.   Each team is to verify that all records are entered and that the proper radiographs are assigned.
   c.   Ante-mortem Telephone Protocol
      i.   It is preferred that only designated Odontology Team members should contact dentists when requesting ante-mortem dental records, if possible.
      ii.   When contacting dentists for ante-mortem information, it is important that all conversations take place, solely with the dentist if at all possible. One or more Odonatologists may be stationed in the Victim Ante-mortem Data Center Branch to conduct telephone contact with victims' dentists.
      iii.   Recommended telephone procedure:

When calling the victim's dentist, and the receptionists' answers, say:
"Hello, my name is Dr.＿＿＿＿＿＿＿＿＿, and I am calling from the
＿＿＿＿＿＿＿ County Medical Examiner's Office.

May I speak with Doctor ＿＿＿＿＿＿＿＿?

When the Doctor answers say:

"Hello, My name is Dr.＿＿＿＿＿＿, and I am calling from the
＿＿＿＿＿＿ County Medical Examiner's Office regarding victim identification.
I am reviewing information that has been submitted to our office on behalf of one of your patients,
(give the patient's first and last name)

I am calling for additional information in order to complete our records in an attempt to identify this individual."

(Make sure all information placed on the form is signed by the contacting dentist, dated and time stamped.)

    iv.   The following dental records are to be requested
- (a.) The original full mouth or bite-wing radiographs dated, with the patient's complete name and the name and address of the dental office supplying the records. If only copies are available, please have the dentist label the radiographs left and right.
- (b.) Legible copies of the written dental records and charting.
- (c.) A written narrative of any treatment rendered since the radiographs were taken.
- (d.) Unless otherwise directed by the Medical Examiner, have the dentist use FedEx, UPS or certified mail for the requested records. The receiving address will be supplied by the Medical Examiner in charge.

5.   <u>Comparison Protocol</u>
    a.   Utilizing the WINID protocol: after each ante-mortem record is entered and verified for accuracy, a best match comparison will be run.
    b.   When a possible match is obtained, do the following steps:
        i.   Print comparison page.
        ii.   Print ante and post-mortem radiographs for review.
        iii.   Make a radiographic comparison.
        iv.   Obtain confirmation of positive ID from the team leader.
    c.   All positive IDs should be dated and signed off by a Forensic Odonatologist and the Odontology Team Leader, utilizing the established protocol of the Medical Examiner in charge.
    d.   Once a positive Identification has been made, the WINID database will be immediately updated.
    e.   Preferred method of receiving dental images is in the digital format and not in a printed format.

6.   <u>Documentation Protocol</u>
    In the absence of other specific procedures established by the Medical Examiner, dental identification may be documented using the following procedures:
    a.   A report of Positive Identification shall be completed documenting the:
        i.   Names of two Odonatologists concurring on the identification,

ii.   Date and time identification was made,

iii.   Name of victim and ante-mortem record source used to effect identification, and

iv.   MRN file number(s) matched to the ante-mortem records.

b.   The report of Positive Identification shall be forwarded to the Verification Unit Leader for review and forwarding to the Medical Examiner.

EMBALMING GUIDELINES

The embalming area should be kept separate and private from the other areas of the morgue if possible. A maximum of two (2) licensed embalmers working per embalming table is recommended.

1. **Preparation Categories:**
   a. *Arterial Preparation*: Conventional arterial injection is advised.
   b. *External Preparation:* When the condition of the body or body part is traumatized, decomposed or charred to the extent that normal arterial injection is not advisable. [Common Tissue (CT/HR) falls into this classification].
2. **Embalming Guidelines:**
   a. *External Sanitation and Disinfection:* All body orifices shall be disinfected at the beginning of the embalming operation. Equipment, tables, and instruments shall be cleaned and disinfected upon completion of each case. The floor of the embalming room as well as the area in general shall be cleaned and disinfected with a recognized disinfecting agent or a solution of household bleach mixed at a rate of 10 parts water to 1 part bleach.
   b. *Setting Features*: Needle injector or mandible suturing.
   c. *Injection Site*: Injection site and vessel selection is at the discretion of the embalmer and will be dependent on the case at hand. A single point injection (Carotid is recommended) is permissible if thorough saturation of the tissue can be achieved. If thorough saturation cannot be accomplished by a single injection then multiple injection sites must utilized.
   d. *Fluid Dilution*: Consideration should be given to the condition of the body and the time frame in which the body may have to be held before final disposition. A careful pre-embalming analysis should be performed by the embalmer. Strength of the injection fluid should be consistent with all factors related to the condition of the body or body part and final disposition. In the majority of cases the "waterless" injection technique should be used.
   e. *Volume of Injection*: A minimum of 1 gallon of injection arterial fluid per 50 lbs. of body weight.
   f. *Injection Pressure:* High-pressure (60-140 lbs.) with low to moderate rate of flow method is recommended.
   g. *Hypodermic Injection:* Areas of poor diffusion of arterial chemical, or areas where the normal circulatory system is not intact should be treated with hypodermic injection of a high index (50-index) cavity chemical. If hypodermic injection is necessary for the facial features, hands, and arms, it should be accomplished using a syringe and 18 or 20 gauge needle.
   h. *External Packs*: External cavity packs should be used with discretion. They should not be used to replace thorough hypodermic injection but may be used in addition to or following hypodermic injection. Cauterant packs should be used in an effort to cauterize areas but not to replace other methods of deep tissue preservation.
   i. *Cavity Treatment*: Normal aspiration procedures should be performed to ensure that thorough aspiration is accomplished. On an average size adult body cavity, chemical should be injected into the thoracic and abdominal cavities at the rate of 16 ounces respectively using a high index (50-index) cavity chemical. Low index non-fuming cavity chemicals are not recommended for disaster victims.
   j. *Massage Cream:* Facial features, hands, and arms shall receive a coat of massage cream, Vaseline or other emollient cream during the arterial injection and following final bathing. The cream should be massaged well into the skin.
   k. *Sealing Incisions*: An abundant amount of dry incision sealer shall be placed in all incisions prior to suturing. Before the body is released from the Embalming Team, a coating of liquid incision sealer shall be applied to all incisions and sutured areas. Every effort should be made to control leakage problems during transfer or shipping.

l. *Plastic Garments*: When necessary, plastic garments may be placed on the deceased but only after all other methods to control leakage have proven unsuccessful. Plastic garments should be used primarily as a backup control method for leakage. If unionalls are used an adequate amount of absorbent hardening compound or paraformaldehyde crystals may be placed inside the unionalls. The wrists of the unionalls should be taped tightly.

m. *External Preparation Processing*: When the condition of the body or body part is massively traumatized, decomposed or charred, and classified as "Non-Viewable", to the extent that normal arterial injection is not advisable, an external method of processing the remains can be utilized. Guidelines for whole body external processing are:

- Double pouch body.
- Aspirate cavities and inject high index cavity fluid.
- Hypo injects major areas of body (minimum 5% solution).
- Wrap body in blanket or 2 linen sheets.
- Saturate blanket or sheets with 96 ounces of high index cavity (50-index).
- Completely cover the entire surface of the sheets with hardening compound (approximately 30-40 lbs.).
- Close pouch.
- Remove body from table.
- Clean and disinfect table.
- Drape a 4mil x 10' x 14' of plastic over table.
- Place body on to table.
- Wrap plastic sheeting around body tightly, at least 3 times around.
- Leave ends open and begin at the waist to tape completely around body every 6 inches and work toward head or foot. Push out trapped air as members proceed.
- At the foot end, twist end tightly then fold end over and tape end tightly around body.
- At head insert cotton or towel saturated with approximately 1 cup of quality deodorizing agent.
- At head end twist end tightly then fold over and tape end tightly around the body.
- Wrap body with linen sheet and tape every 6 inches head to foot.
- Write name and MRN on linen sheet at head. Write HEAD at the head end.
- Gloves and gown should be changed throughout the processes so as not to contaminate the clean plastic or outside linen sheet. The above technique can be used, with modification, to accommodate external preparation of body parts.

RECORDS MANAGEMENT POLICY

In the absence of an established Medical Examiner system, the following records management policy may be used.

1.   Morgue Disaster Victim Packet (DVP) Records
   a.   All morgue generated reports whether written or dictated shall be completed by the specialist performing the examination and shall not be removed from the premises of the morgue operation. Unless established differently by the Medical Examiner, all transcription of examination records shall be performed on-site and at no time shall a specialist remove any records for transcription and later submission. All work is to be completed on-site unless authorized by the Morgue Operations Branch Director.
   b.   All DVP folders shall be:
      i.   Completed before leaving the morgue,
      ii.   Couriered to MIC for data input of VIP post-mortem information, and
      iii. Delivered to the File Room for logging and filing.
   c.   Fingerprint Exception
      i.   A copy of post-mortem print impressions shall be placed in the DVP, and
      ii.   Original post-mortem print impressions shall be couriered to the MIC, Fingerprint Ante-mortem Team for filing and comparison.
2.   Ante-mortem Records
   a.   Upon arrival in the File Room, all ante-mortem records (VIP interview forms, X-rays, photographs, etc.) must be labeled with the victim's name and/or unique number, if applicable, and filed with the primary VIP folder. Do NOT place a permanent label directly over information on them, if at all possible. If necessary, place them into separate envelopes that are labeled with the:
      i.   victim's name and/or unique number, and
      ii.   nature of contents
            ● medical records,
            ● dental records,
            ● fingerprint records, etc.
   a.   Individual victims (whether known or suspected) will each have an ante-mortem file. Individual folders are required even if multiple members of the same family are victims.
   b.   ALL ante-mortem information and records received will be manually logged by the Records Management Team in two separate logs:
      i.   In the individual's VIP ante-mortem file folder a running log is kept of all materials added to the file (Case File Inventory), and
      ii.   In the master log (printed versions of Excel spreadsheets developed as dictated by medical Examiner needs). This is maintained separately from the file folders in case a folder is missing.
3.   It is the responsibility of the Records Management Team and IRC Leader (or their designees) to reconcile the hard copy file folder inventory with computer files.
4.   All ante and post-mortem information and records are to be handled as evidence. The chain of custody of records must be maintained via the logs. The Records Management Team must be able to account for all received information/records, whether they are in the direct possession of the Records Management Team or checked out to an authorized individual.
5.   File categories:
   a.   Unidentified Remains case files in MRN order and containing:
      i.   DVP processing paperwork,
      ii.   Printouts of digital photos,
      iii. CD copy of all photos taken,
      iv.   Printouts of digital dental x-rays,
      v.   CD copy of all digital dental x-rays taken,

     vi.   Printouts of digital body x-rays,

     vii.   CD copy of all digital body x-rays taken,

     viii.   Personal effects inventory,

  b. <u>Missing Person Reports</u> (VIP) case files in Last Name alphabetical order and containing:

     i.   Printed VIP interview form along with original hand completed one,

     ii.   Other police missing person reports submitted,

     iii.   Medical records or body x-rays submitted,

     iv.   Fingerprint records,

     v.   Dental ante-mortem records including x-rays, and

     vi.   Notes of contacts for information gathering.

  c. <u>Identified Remains</u>-Medical Examiner determines which master number to use and merges into one file all related materials:

     i.   Positive identification reports,

     ii.   Final Death Certificates,

     iii.   VIP ante-mortem reporting forms,

     iv.   Ante-mortem medical records,

     v.   DVP Photographs,

     vi.   DNA submission documents,

     vii.   MRN folders (multiple if DNA associates parts),

     viii.   Dental records (ante and post-mortem),

     ix.   Body X-Ray (ante and post-mortem),

     x.   Fingerprints and comparisons made, and

     xi.   Remains release and funeral home documentation.

  d. <u>Court Issued Presumptive Death Certificates</u> and related documents (if applicable):

     i.   Affidavits and supporting documents,

     ii.   Court order,

     iii.   Copy of death certificate issued, and

     iv.   Record of transmittal of death certificate to Vital stats:

        ● May require funeral director involvement,

        ● May require family authorization for funeral home to handle,

        ● Vital Stats coordination required.

     v.   If subsequently identified, an amended death certificate must be issued and all this material is moved to the Identified Remains file.

6. <u>Information Security</u>

  a. ALL information is confidential to those assigned to assist with the disaster.

  b. No information is to leave the File Room unless it is properly checked out by the Records Management Team to approved personnel. All files must be logged in and out with "File Out" system for tracking.

7. The Records Management Team will maintain another log for ANY information that leaves the File Room. This log will note:

  a. Victim's name or MRN of case file,

  b. Exact items taken (i.e., dental or fingerprint records),

  c. Date, time, and person who checked it out,

  d. Date, time, and person who returned it and checked it back in.

VISUAL IDENTIFICATION POLICY

In the absence of other specific procedures established by the Medical Examiner, visual identification may be accomplished using the following procedures:

1. If the facial condition of the victim is undamaged and, in the opinion of the Identification Team, capable of being identified by individuals who have known the victim, a photograph will be prepared for viewing by the person making the identification.
2. Preferably, two individuals should make the visual identification in the presence of two VIC Specialists or Medical Investigators.
3. A report of Positive Identification shall be completed documenting the:
    a. Name(s) of individual(s) making the identification,
    b. Relationship, if any, to the victim,
    c. Address and phone number of identifiers,
    d. Date, time and location identification was made,
    e. Method used (direct viewing, from photograph, etc.) and
    f. Witnesses to the identification.

The report of Positive Identification shall be forwarded to the MIC for Identification Team Review and forwarding to the Medical Examiner.

FINGERPRINT IDENTIFICATION POLICY

1. Techniques available:
    a. Clean the fingers of all foreign matter such as dirt, grease, blood, etc. Xylene is excellent for this, however, in most instances, washing the fingers with soap and water will suffice.
    b. If the skin is firm, a small soft bristled brush can be used to clean the fingers by lightly brushing in the direction of the ridge flow.
    c. Make sure the surface is dry prior to printing as ink will not adhere to wet skin.
    d. In some instances, it may be necessary to amputate the fingers or surgically remove the skin in order to obtain legible prints. Authorization from the Medical Examiner (or designee) must be granted prior to employing either of these methods.
    e. At certain stages of decomposition, the epidermis can be easily separated from the dermis with a shallow cut around the wrist or a shallow cut below the first finger joint to release the skin. After cleaning and drying, the skin can be slipped over the technician's own finger like a glove and printed.
    f. When fingers are pliable and intact but wrinkles prevent adequate printing, an injection of tissue builder with a hypodermic syringe may satisfactorily remove the wrinkles.
    g. The powder method may be used if the skin is intact.
    h. When wrinkled or mummified fingers are encountered, duplicate or similar silicone plastic impression material is often the most expedient and effective method of obtaining legible prints.
    i. The Duct Seal Method may be successful with wrinkled mummified fingers and water soaked fingers in the early stages of decomposition. Other pliable materials of similar consistency may also be used (e.g., Play Dough, Silly Putty, etc.).
    j. In most cases of incineration when the hands are tightly clenched, amputation of the fingers is usually necessary. In extreme cases, photography may be the only method for recording these prints due to the fragile condition of the skin.

In the absence of other specific procedures established by the Medical Examiner, fingerprint identification may be accomplished using the following procedures:

2.   A report of Positive Identification shall be completed documenting the:
      a.   Names of two Fingerprint Specialists concurring on the identification,
      b.   Date and time identification was made,
      c.   Name of victim and ante-mortem record source used to effect identification, and
      d.   MRN file number(s) matched to the ante-mortem records.

3.   The report of Positive Identification shall be forwarded to the Verification Unit Leader for review and forwarding to the Medical Examiner

ANATOMIC FEATURES IDENTIFICATION POLICY

In the absence of other specific procedures established by the Medical Examiner, identification by anatomic features such as tattoos, surgical scars, radiological comparison, medical device, etc., may be accomplished using the following procedures:

1.   A report of Positive Identification shall be completed documenting the:
      a.   Names of two Forensic Anthropologists or Pathologists concurring on the identification,
      b.   Anatomic features upon which identification was based,
      c.   Date and time identification was made,
      d.   Name of victim and ante-mortem record source used to effect identification, and
      e.   MRN file number(s) matched to the ante-mortem records.

The report of Positive Identification shall be forwarded to the MIC for Identification Team Review and forwarding to the Medical Examiner.

NOK NOTIFICATION OF POSITIVE IDENTIFICATION POLICY

In the absence of other specific procedures established by the Medical Examiner, MI-MORT can provide for notification of NOK using the following guidelines.

1.   When a disaster victim has been positively identified, the Identification Team will provide a copy of the declaration of positive identification and letter of official notification to the NOK both of which will be sent to the VIC for action by a Notification Team.
2.   Notification Teams comprised of 2 persons selected by the Victim Ante-mortem Data Center Branch Leader. It shall be the responsibility of the Notification Team to contact the NOK for a personal visit if possible.
3.   When a Notification Team contacts the NOK they should have the original or a copy of the declaration of positive identification and the letter of official notification to the NOK that includes appropriate release authorization wording to designate the funeral home selected by the NOK. This will reflect either "Incomplete Human Remains" or "Complete Human Remains" and the preference of the NOK about how notification of identification of additional fragmented remains should be made, if applicable.
4.   If the NOK are present at the VIC, the Notification Team shall escort the NOK into a private room for the announcement of formal notification of identification. A Team member shall read the letter of official notification to the NOK. The Notification Team will answer, to the best of their knowledge, any questions from the NOK.

      a.   When emotions of the NOK permit, the Team will present them with the applicable release authorization form to designate the funeral home selected by the NOK. The Team should review the release authorization and answer any questions. After review of the release authorization, the NOK should be asked to sign it.

      b.   A photocopy of the release authorization should be given to the person who signed it. The original copy should be returned to the MIC through established methods.

5.   If the NOK is not present at the VIC, and a personal visit is not possible, the Notification Team may notify the NOK by telephone.

      a.   One person will do the speaking and the other will witness the conversation. When the NOK answers the phone, the Team member should identify him or herself by first and last name.

      b.   Before continuing the Team member should feel comfortable that the NOK comprehends who is calling and that it is an official call.

      c.   Notes should be kept stating the date and time of the call, to whom the Team member spoke, and what relationship they hold to the victim.

      d.   The letter of official notification to the NOK should be read to them slowly and distinctly. After answering any questions, the Team should tell the NOK about the necessary release authorization form to designate the funeral home to be selected by the NOK that needs their signature.

      e.   The NOK should be asked if they have access to a fax or if they would be comfortable with a local law enforcement agency hand delivering the form to their residence.

          i.   If they wish to involve local law enforcement, ask for the name of the agency and phone number. The release authorization can be faxed to the local agency and hand carried for signature then returned by way of fax to the VIC.

          ii.   If the NOK is uncomfortable with local law enforcement, ask them if they could designate someone to perform this task. Members may suggest a close friend, clergyman, funeral director, Red Cross, or Salvation Army. At the end of the conversation the Team member should give the NOK their full name and the phone number at the VIC again.

      f.   Notes should be made by the Team member as to whom the release authorization should be sent, the telephone number, and fax number. This agency or person should be contacted and briefed regarding what they should do. The appropriate MI-MORT follow-up form can be used by the Notification Team to document the above tasks.

6.   Advise the NOK that this process will be completed in the most expedient manner possible and that they should not receive or accept information from anyone other than whom they have designated.

STANDARD OPERATING GUIDELINES FOR BIOLOGICAL DECONTAMINATION OF ALUMINUM FLOOR REFRIGERATED TRAILERS
(ADAPTED FROM DMORT'S EXPERIENCES AT HURRICANE KATRINA)

Decontamination of aluminum floor refrigerated trailers may proceed after the trailer is emptied of human remains and shelving units. Cleaning may be done by a contracted cleaning company as long as its protocols meet or exceed the procedures listed below.

Definitions:
- *Decontamination* means the use of physical or chemical means to remove, inactivate, or destroy blood borne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.

Waste Collection Preparation:
- Trailer shall be parked with the refrigeration unit end tilted higher than the exit doors to allow for drainage.
- All debris that it that is removed from the trailer shall be collected for proper biomedical waste disposal.
- Continuous plastic sheeting of 6 mil thickness shall be placed at the door openings of the refrigerated trailer extending at least 3 feet beyond the width of the trailer opening and 3 feet under the actual end of the trailer. The plastic should extend at least 10' to 12' from the bumper of the trailer outward and propped up on the sides to create a reservoir.

Worker Safety:
- Personnel performing the actual decontamination within the trailer will wear full hooded PPE with shoe coverings that are impervious to sodium hypochlorite, commonly known as "household bleach".
- Other PPE for the personnel would include
    - a respirator with canisters specifically designed for sodium hypochlorite,
    - eye and face protection,
    - single layer of latex gloves
    - pair of heavy rubber gloves applied as a second layer over the latex gloves and
    - rubber non slip shoe covering.
- All areas such as boot and glove connections must be securely fastened to outer PPE with an approved tape.

Cleaning Sequence:
- Dry sweep the trailer interior out thoroughly with a dry push broom with all contaminates swept on to the plastic collection reservoir. After the trailer has been thoroughly dry swept and all contaminates are on the plastic, sweep all contaminates into a pile and place all contaminates in proper biomedical waste containers for disposal.
- Prepare a hand operated low pressure sprayer filled with household bleach solution (5.25% Sodium Hypochlorite) diluted 1:10 with water.
- Liberally apply the diluted bleach to the interior ceiling, walls, floor and doors of the trailer.
- Spraying is to start at the front of the trailer (refrigeration unit end) working from the ceiling, down the walls to the floor of the trailer towards the back - the rear doors.
- The intake opening for the refrigeration system should also be sprayed while the refrigeration system is operating and cycling in order to thoroughly clean the system.
- Allow the bleach solution to remain in place not less than 15 minutes.
- Use a fresh water (without bleach) pressure washer with a minimum of 1500 psi to spray the interior of the refrigerated trailer down again starting in the front with the ceiling, walls and finally the floor to remove all loose contaminates. A bucket and brush may be needed to remove any heavily soiled stains from interior of trailer.

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- All waste water must be contained. Most refrigerated trailers have floor drain holes in the front and rear of the trailer. Hoses may be attached to drain holes and fed to a containment system to collect all runoff waste. All wastewater from the cleaning process must be disposed in liquid biomedical waste containers for proper disposal.
- After the trailer has been thoroughly cleaned with the pressure washer, use the hand operated low pressure sprayer to reapply a light misting of straight household bleach solution using the hand operated pressure sprayer to the interior of the trailer in the sequence stated above.
- Allow the trailer to air dry with the doors left open until bleach odor has dissipated.
- After the trailer has been fully decontaminated, turn on the refrigeration unit so that air is flowing throughout the trailer. Apply a number of light mists of 2 to 3 sprays from the low pressurized sprayer directly into the intake of the refrigerated unit to clean the unit of any contamination. Allow the refrigerated unit to run a minimum of 10 minutes before shutting unit off.

Waste Disposal:
- All wastewater and debris gathered within the plastic barrier shall be placed in liquid biomedical waste containers for proper disposal.
- All plastic sheeting shall be disposed of in proper biomedical waste containers.
- Personnel PPE shall also be placed in proper biomedical waste containers after decontamination has been completed.
- Disposal of brooms, brushes and any other equipment unable to be decontaminated should be disposed of properly in a biomedical waste container.
- After decontamination of trailer and affected area, and proper disposal of used PPE, cleaning personnel must wash hands with a disinfectant soap.

DISASTER DIRECTION AND CONTROL

NIMS and ICS Overview

On February 28, 2003, President Bush issued Homeland Security Presidential Directive 5 (HSPD-5), Subject: Management of Domestic Incidents, which directs the Secretary of Homeland Security to develop and administer a National Incident Management System (NIMS). This system provides a consistent nationwide template for Federal, State, tribal, local governments and private organizations to work together effectively and efficiently to prepare for, respond to, and recover from domestic incidents, regardless of cause, size, or complexity, including acts of catastrophic terrorism. HSPD-5 requires all Federal departments and agencies to adopt the NIMS and use it in their domestic incident management and emergency prevention, preparedness, response, recovery, and mitigation programs and activities, as well as those actions taken in support of State or local entities. The directive also requires Federal departments and agencies to make adoption of the new system by State and local organizations a condition for Federal preparedness assistance as of FY 2005.

NIMS is a set of standardized organizational structures and procedures designed to improve interoperability among jurisdictions and disciplines. The structures include the Incident Command System and Multi-agency Coordination Systems (not discussed in this overview)

Terminology (in descending command order)

Command Staff: In an incident management organization, the Command Staff consists of the Incident Commander and the special staff positions of Information Officer, Safety Officer, Intelligence Officer (if established), and Liaison Officer who report directly to the Incident Commander. They may have an assistant or assistants, as needed.

General Staff: The group of incident management personnel reporting to the Incident Commander. The General Staff normally consists of Operations Section Chief, Planning Section Chief, Logistics Section Chief, and Finance/Administration Section Chief.

Section: That organizational level with responsibility for a major functional area of the incident, e.g., Operations, Planning, Logistics, Finance/Administration, and Intelligence (if established). The section is organizationally between branch and Incident Commander.

Branch: The organizational level having functional or geographic responsibility for major parts of incident operations. A branch is organizationally between section and division/group in the Operations Section, and between section and units in the Logistics Section. Branches are identified by functional area.

Division: The partition of an incident into geographical areas of operation. Divisions are established when the number of resources exceeds the span-of-control of the operations chief. A division is located within the ICS organization between the branch and the group or task force/strike team.

Group (Team): Established to divide the incident into functional areas of operation. Groups are composed of resources assembled to perform a special function not necessarily within a single geographic division. Groups, when activated, are located between branches and resources in the operations section.

Unit: The organizational element having functional responsibility for a specific incident planning, logistics, or finance/administration activity.

Resources: Personnel and major items of equipment, supplies, and facilities available or potentially available for assignment to incident or event tasks, and for which status is maintained. Resources are described by kind and type, and may be used in tactical support or supervisory capacities at an incident or at EOCs.

Other Terms:

Operational Period: The period of time scheduled for execution of a given set of operation actions as specified in the Incident or EOC Action Plan. Operational Periods can be of various lengths, although usually not over 24 hours.

Incident Action Plan (IAP): An oral or written plan containing general objectives reflecting the overall strategy for managing an incident. It may include the identification of tactical resources and assignments. The Incident Action Plan may include attachments that provide direction and important information for management of the incident during one or more operational periods.

Organizational Elements: In ICS, positions and responsibilities not assigned to an individual remain the responsibility of the next higher position in the chain of command. The ICS organization has five major functions, as depicted below. These are command, operations, planning, logistics, and finance and administration.
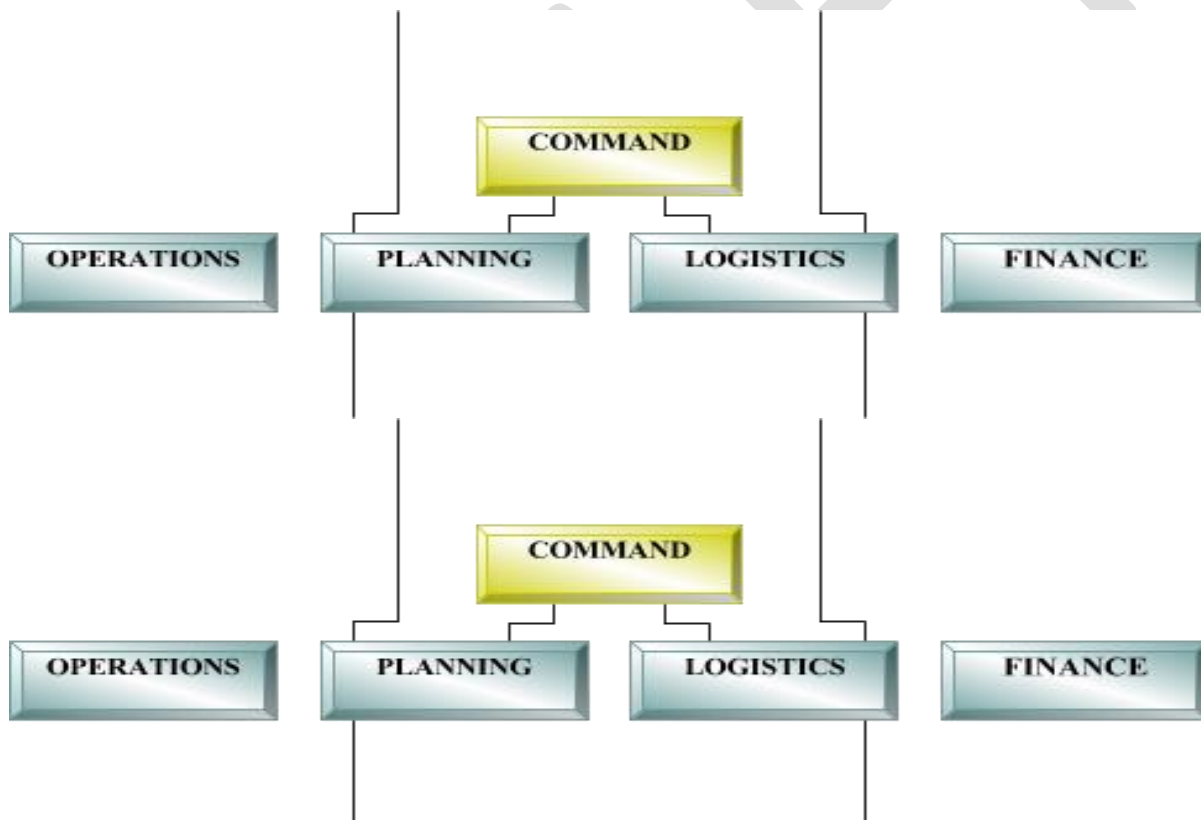
1. **Operations Section**.
   Operations at the incident include all activities focused on reduction of the immediate hazard, establishing situation control, and restoration of normal operations. The illustration below depicts the primary organizational structure template for an Operations Section. ICS offers flexibility in determining the right approach based on specific circumstances of the incident at hand
   a. Operations Section Chief and Deputies.
      i. The Operations Section Chief (OSC) is responsible for the direct management of all incident-related tactical/operational activities.
      ii. The OSC will establish tactical objectives for each operational period, with all other section chiefs and unit leaders establishing their own supporting objectives.
      iii. The OSC may have one or more deputies assigned, with the assignment of deputies from other agencies encouraged in the case of multi-jurisdictional incidents.
      iv. An OSC should be designated for each operational period and should have direct involvement in the preparation of the Incident Action Plan (IAP) for the period of responsibility.
   b. Branches: Branches may be used to serve several purposes, and may be functional or geographic in nature. In general, branches are established when the number of divisions or groups exceeds the recommended supervisor/subordinate span of control of 1:3 to 1:7 for the OSC; a ratio of 1 supervisor for 5 subordinates is normally recommended (1:8 to 1:10 in the case of many larger-scale law enforcement operations).
   c. Divisions and Groups: Divisions and Groups (Teams) are established when the number of resources exceeds the span of control of the Incident Commander/Operations Section Chief. Divisions are established to divide an incident into physical or geographical areas of operation. Groups (Teams) are established to divide the incident into functional areas of operation. For certain types of incidents, for example, the IC may establish intelligence functions as a functional group in the operations section. There may be additional levels of supervision below the Division or Group level.
   d. Units. Units may be a specific incident planning, logistics, or finance/administration activity.
   e. Resources. Resources refer to the combination of personnel and equipment required to enable incident management operations. Resources may be organized and managed in three different ways, depending upon the requirements of the incident.
      i. Single Resources. These may be individual personnel or individual equipment items and the operators associated with them. Single Resources represent primary tactical units.
      ii. Task Forces. A Task Force is any combination of resources assembled in support of a specific mission or tactical need. All resource elements within a task force must have common communications and a designated leader.
      iii. Strike Teams. Strike Teams are a set number of resources of the same kind and type that have an established minimum number of personnel. The use of Strike Teams and Task Forces is encouraged, wherever possible, to optimize the use of resources, reduce the span of control over a large number of single resources, and reduce the complexity of incident management coordination and communications.

2. **Planning Section**
   The Planning Section is responsible for collecting, evaluating, and disseminating tactical information pertaining to the incident. This section maintains information and intelligence on the current and forecasted situation, as well as the status of resources assigned to the incident. The planning section prepares and documents IAPs and incident maps and gathers and disseminates non-sensitive intelligence information that is critical to the incident. As shown below, the planning section has four primary units and may include a number of technical specialists to assist in evaluating the situation and forecasting requirements for additional personnel and equipment
   a. The Planning Section Chief oversees all incident-related data gathering and analysis regarding incident operations and assigned resources,

b. Develops alternatives for tactical operations
c. Conducts planning meetings,
d. Prepares the Incident Action Plan for each operational period.
e. Depending on the scope of the incident, the Chief may handle the Unit responsibilities or designate Unit Leaders to assist

3. **Logistics Section**
   The Logistics Section meets all support needs for the incident (except aircraft), including ordering resources through appropriate procurement authorities. It also provides facilities, transportation, supplies, equipment maintenance and fueling, food service, communications, and medical services for incident personnel. Depending on the scope of the incident, the Chief may handle the Unit responsibilities or designate Unit Leaders to assist.

4. **Finance/Administration Section**
   When there is a specific need for financial, reimbursement (individual and agency/department), and Administration services for an incident, a Finance and Administration Section is established. Under the ICS, not all agencies will require such assistance. In large, complex scenarios involving significant funding originating from multiple sources, the Finance and Administration Section is an essential part of the ICS. The Procurement Unit administers all financial matters pertaining to vendor contracts. This unit coordinates with local jurisdictions to identify sources for equipment; prepares and signs equipment rental agreements; and processes all Administration requirements associated with equipment rental and supply contracts. Note, in some agencies, the Logistics Section's Supply Unit will be responsible for certain procurement activities. The procurement unit will also work closely with local cost authorities.

MI-MORT Incident Command Structure (Full Staff = 150)

MI-MORT Command
- Liaison Officer
- Information Officer
- Safety Officer
- Behavioral Health Specialist
- Chaplain

Operations Section (105)
- Search and Recovery Division (13)
- Morgue Division (45)
- Fatality Info/ FAC Division (36)
- Identification Division (10)

Planning Section (5)
- Resource Unit
- Situation Unit
- Documentation Unit
- Demobilization Unit

Logistics Section (18)
- Facilities Unit
- Communications Unit
- Ground Support Unit
- Supply Unit
- Food Unit
- Medical Unit

Admin Section (3)
- Time and Travel Unit
- Finance Unit