

CHAPTER 49
STATE MEDICAL EXAMINER

Authority

N.J.S.A. 52:17B-80.

Source and Effective Date

R.2009 d.311, effective September 14, 2009.
See: 41 N.J.R. 2440(a), 41 N.J.R. 3844(a).

Chapter Expiration Date

In accordance with N.J.S.A. 52:14B-5.1b, Chapter 49, State Medical Examiner, expires on September 14, 2016. See: 43 N.J.R. 1203(a).

Chapter Historical Note

Chapter 49, State Medical Examiner, was filed and became effective prior to September 1, 1969.

1983 Revisions: Amendments became effective December 19, 1983 as R.1983 d.589. See: 15 N.J.R. 135(a), 15 N.J.R. 2172(d).

Pursuant to Executive Order No. 66(1978), Chapter 49, State Medical Examiner, was readopted as R.1989 d.35, effective December 16, 1988. See: 20 N.J.R. 2687(a), 21 N.J.R. 171(b).

Pursuant to Executive Order No. 66(1978), Chapter 49, State Medical Examiner, was readopted as R.1994 d.30, effective December 16, 1993. See: 25 N.J.R. 5104(a), 26 N.J.R. 484(a).

Pursuant to Executive Order No. 66(1978), Chapter 49, State Medical Examiner, was readopted as R.1998 d.596, effective November 25, 1998. See: 30 N.J.R. 3606(a), 30 N.J.R. 4385(a).

Chapter 49, State Medical Examiner, was readopted as R.2004 d.204, effective May 4, 2004. See: 36 N.J.R. 14(a), 36 N.J.R. 2788(b).

Chapter 49, State Medical Examiner, was readopted as R.2009 d.311, effective September 14, 2009. See: Source and Effective Date.

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SUBCHAPTER 1. AUTOPSIES

13:49-1.1 Mandatory autopsies

(a) In the absence of an objection based on the religious beliefs of the decedent, autopsies shall be performed in all cases of human death occurring in the following circumstances; however, the autopsy should be the least intrusive procedure consistent with proper forensic practice (as defined in N.J.A.C. 13:49-1.8) and the duty to preserve organs for transplant:

1. All cases of apparent homicidal deaths;
2. All deaths occurring under suspicious or unusual circumstances;
3. All deaths from causes which might constitute a threat to public health;
4. All deaths of inmates of jail, prison, or penitentiary and all prisoners and suspects who were in the process of being detained, arrested or transported by guards, police and law enforcement or court officers unless the suspected cause of death is a known condition for which the inmate, prisoner or suspect is hospitalized and being treated at the time of death, and the medical examiner's investigation, review of hospital records, and examination of the decedent's body permit him or her to determine the cause of death beyond a reasonable doubt without an autopsy, and no other issues of public interest compel his or her conclusion that an autopsy is necessary;
5. All infants and children suspected of having been abused or neglected and children suspected of having died from sudden infant death syndrome (SIDS);
6. In all cases wherein the State Medical Examiner, the Attorney General, any assignment judge of the Superior Court, or the county prosecutor (of the county wherein the injury occurred or where the decedent expired) requests an autopsy;
7. In all cases otherwise under the Medical Examiner's jurisdiction where the decedent has been identified as a potential donor pursuant to P.L. 1969, c.161 (N.J.S.A. 26:6-57 et seq.), the medical examiner shall perform any necessary examination, autopsy or analysis of any organ or

tissue in a manner and within a time period compatible with preservation of the organ or tissue for the purpose of transplantation.

(b) Upon notification that a deceased person whose death is under investigation is a donor under the Uniform Anatomical Gift Act, P.L. 1969, c.161 (N.J.S.A. 26:6-57 et seq.), the medical examiner shall commence an immediate investigation concerning the cause of death. The medical examiner, with the cooperation of the police, prosecutors and medical personnel, shall complete the preliminary investigation concerning cause of death within a time period compatible with preservation of organs for transplantation.

1. The medical examiner shall have access to and may request all necessary information, including copies of medical records, laboratory test results, x-rays and other diagnostic results. This information should be provided as expeditiously as possible, through reasonable means, to the medical examiner so the medical examiner can continue the investigation into the cause of death and complete the examination within a time period compatible with the preservation of the organ or tissue for purposes of transplantation.

2. The medical examiner shall release all requested organs and tissue which in his or her opinion are not involved in the cause of death (as defined in N.J.A.C. 13:49-1.8).

3. Should the medical examiner believe that a specific organ or area of tissue is involved in the cause of death, the medical examiner shall attend the removal procedure in order to make a final determination and allow recovery to proceed, request a biopsy or deny removal of said organ if in the medical examiner's judgment those tissues or organs may be involved in the cause of death.

4. The medical examiner or designee shall explain in writing the reasons for determining that organs or tissues for which authorization for removal was denied may be involved in the cause of death and shall include the explanation in the records and provide a copy to the organ procurement agency.

5. The medical examiner shall have access to medical records, pathology reports and to the body of the donor, post-removal. In the event an organ is not transplanted and there is no consent to donate the organ for research, the medical examiner shall be notified. The medical examiner who performed the autopsy shall make the determination as to whether and when the organ should be returned.

6. The harvesting team shall complete a surgical report form. Subsequently, information on the immediate functioning of the transplanted organ(s) and pathology reports, if available, shall be provided to the medical examiner.

7. If the medical examiner releases the organ for procurement, a pre-mortem blood sample (labelled and dated with time of blood draw), sample of catheterized urine, sample of bile if the liver is recovered for transplantation,

and a biopsy specimen in fixative of the organs procured, as requested, shall be delivered to the medical examiner at the time of the transport of the body to the medical examiner's office.

Amended by R.1983 d.589, effective December 19, 1983.

See: 15 N.J.R. 135(a), 15 N.J.R. 2172(d).

In (a), deleted old 3 and added new 4 and 5.

Amended by R.1989 d.110, effective February 21, 1989.

See: 20 N.J.R. 2856(b), 21 N.J.R. 447(a).

Emergency Amendment, R.1994 d.571, effective October 21, 1994 (expired December 20, 1994).

See: 26 N.J.R. 4447(a).

Adopted Concurrent Proposal, R.1995 d.36, effective December 20, 1994.

See: 26 N.J.R. 4447(a), 27 N.J.R. 380(a).

13:49-1.2 Discretionary autopsies

(a) In the absence of an objection based on the religious beliefs of the decedent, autopsies may be performed when it appears in the discretion of the county medical examiner to be in the public interest to do so in all cases of human deaths occurring in the following circumstances:

1. All cases of violent deaths which are apparently suicidal or accidental, including but not limited to deaths due to thermal, chemical, electrical or radiation injury, except as enumerated in N.J.A.C. 13:49-1.1, Mandatory autopsies;

2. All deaths caused by disease, disability or infirmity which are not readily recognizable;

3. All deaths of inmates as defined in N.J.S.A. 52:17B-86(f) occurring in institutions maintained in whole or in part at the expense of the State or county when the inmate was not hospitalized therein for organic disease;

4. All deaths related to diseases resulting from employment or from accidents while employed;

5. All deaths from motor vehicle collisions to include drivers, occupants, and pedestrians.

Amended by R.1983 d.589, effective December 19, 1983.

See: 15 N.J.R. 1351(a), 15 N.J.R. 2172(d).

In (a)5, added "occupants".

Amended by R.1989 d.110, effective February 21, 1989.

See: 20 N.J.R. 2856(b), 21 N.J.R. 447(a).

Amended by R.1994 d.30, effective January 18, 1994.

See: 25 N.J.R. 5104(a), 26 N.J.R. 484(a).

13:49-1.3 Jurisdiction between counties

(a) When the medical examiner of the county wherein the death occurred determines that the incident which is suspected of being the cause of death has occurred in a New Jersey county other than his or her own, he or she may transfer jurisdiction to that county medical examiner immediately for the continuance of the investigation. Any county medical examiner to whom jurisdiction is transferred pursuant to this section shall immediately take charge of the continuance of the investigation and shall perform any examinations, autopsies or other functions required by the State Medical Examiner Act.