The Medicolegal Death Investigator
An Evolution in Crime Scene Investigations Relating to Unexpected Deaths
By Emil Moldovan

Abstract
Medicolegal Death Investigation is an uncommon term used to describe the investigation into the manner and causes of death. The name implies a combination of medicine and law into a common discipline. However, the field is much more complex than this simple concept may indicate. Death investigation is comprised of a multitude of forensic specialists. These include the investigators, scientific and medical personnel, police, paramedics, clergy and other support staff.

The Medicolegal Death Investigator (MDI) can wear many different hats. He/she can be an elected/appointed county coroner, an appointed medical examiner, a forensic pathologist, a forensic odontologist (dealing with the study of teeth), botanist, anthropologist, criminalist or a trained forensic death investigator. All of these, and more, may play an integral part in the process.

This article examines the role of the Medicolegal Death Investigators who respond to death scenes as representatives of either a County Coroner or Medical Examiner, in order to document observations and collect physical and trace evidence necessary to determine the manner and cause of death (Haglund & Ernst, 1997). MDIs respond to death scenes that include murders, suicides, accidents or natural deaths. Their expertise in reading death scenes and documenting their findings in photographs and written reports is often critical to the final determination as to the manner of death.

Introduction
The very name - Medicolegal Death Investigation - implies a combination of medicine and law into a common discipline. Dr. Randy Hanzlick, a forensic pathologist, described it as an umbrella term for a patchwork of highly varied state and local systems for investigating deaths. (Committee, 2003) The combined task of collecting and interpreting information about circumstances and causes of death has traditionally been called medicolegal death investigation. This terminology reflects the interface of medical science with law and public policy.
Death investigation has been performed for centuries in all societies, although not always by medical professionals. (Committee, 2003) Dr. Warner Spitz noted that the association of law and medicine dates back to the Egyptian culture as early as 3000 B.C. (Spitz, 2006) The English coroner system was mentioned in documentations around the 12th century B.C. The 1194 Articles of Eyre provided for Custos Placitorum coronae (keeper of the pleas of the crown) and was the first documented origin of the term “coroner.” (Spitz, 2006) The coroner system was brought to the American Colonies by English settlers and established as a legal investigative function. In 1890 Baltimore replaced its coroner system with that of a medical examiner (a trained medical doctor specializing in pathology.) As death investigation became more complex and required a higher degree of sophistication, other cities and states were to follow this example, like New York, which established the office of medical examiner in 1918. (Hanzlick, 1998) While the original intent of the British Coroner system was to ensure that the Crown received its fair share of proceeds from estates of the deceased, investigations into the manner and causes of death evolved as the office’s primary function. (Spitz, 2006) Today, there are approximately 2,000 Medical Examiners and Coroner offices throughout the United States, which examine a combined total of over half million cases annually. (Bureau, 2004)

Modern medicolegal death investigation has evolved into a discipline of forensic science using both forensic medical practitioners and forensic investigators. While the typical portrayal of the medicolegal death investigation in television programs, such as “CSI” and “Law and Order,” sometimes over-dramatizes contributions related to time frames and scientific techniques in solving crimes, the basic tenets of the work are more accurately portrayed than not. Some television programs, such as “Dr. G, Medical Examiner” and “North Mission Road,” attempt a reality-based presentation of the field of medicolegal death investigation. They create reenactments and present actual investigators, forensic pathologist or anthropologist, who perform investigations in real cases without much dramatization. In either case, television has brought an increased public interest and at the same time, has increased public expectations regarding forensic investigations.

The nature of modern death investigation includes social issues that extend beyond the crime scene and often impact everyone who is involved with the death. Dr. Randy Hanzlick stated that death investigations carry broad societal importance for criminal justice and public health. The investigations provide evidence to convict the guilty and exonerate the innocent. Death investigation has an impact on judicial decisions involving incarceration and financial and professional status. Death investigations aid civil litigation as well, states Hanzlick. (2003) A thorough death investigation can uncover unsafe conditions that potentially could save the lives of many individuals.
of other family members. These include sanitary or unhealthy living conditions as well as genetic abnormalities discovered at autopsy.

Death investigation and forensics has expanded into the science of engineering looking into the causes and effects of design flaws, material defect or human error. (Stanczak, 2008) (See the Discovery Guide “From Building Design to Prime Time” for further discussion http://www.csa.com/discoveryguides/forensic/review.php).

A competent death investigation can identify consumer products that expose people to dangerous environments and, as a consequence, save many lives by either removing the dangerous products from sales, or mandating the manufacturers to render them safe for consumer use. Examples of product design changes include child car seats, baby cribs and children’s toys. Death investigations into automobile accidental deaths have improved safety standards by adding air bags, seat belts, bumpers and better side-impact construction.

The death investigation is responsible for determining the cause and manner of death. (Hanzlick, 2003) Vernard I Adams, M.D. defined the cause of death as “the disease or injury that sets in motion the physiologic train of events culminating in cerebral and cardiac electrical silence” and the manner of death as “a pseudo-judicial classification.” (Adams, 2002) The manners (classification) listed on death certificates are “Natural, Accident, Suicide, Homicide and Undetermined.”

The complexities of death investigation are reflected in the multitude of actions needed for successful case conclusion. Investigation of a homicide, for example, examines the trauma inflicted upon the decedent, establishes that the cause of death resulted from that trauma, and contributes to the apprehension of a possible suspect by identifying and collecting physical and trace evidence. The investigator also provides detailed testimony at trial when a suspect is apprehended. Court testimony is critical to the findings of guilt or innocence of the accused, and the thoroughness of the investigation can often mean the difference in jury determinations. Jeff Dusek, a prosecutor from San Diego County, correctly identified the importance of death investigation to the prosecution of criminal cases. He stated that a prosecutor looks to the medical examiner’s office for accuracy, promptness, and the ability to state opinions clearly in court. (Committee, 2003)

The finding of suicide as a manner of death may impact families differently. Suicide carries a stigma on the family name in many cultures. Consequently, objections are often raised by survivors when suicide is documented on the death certificate. Suicide can also leave survivors feeling guilty and unable to cope with the loss of the loved one. (Leash, 1994) Additionally, the finding of suicide can influence the payment of life insurance policies, as most exclude suicide within the first two years after issuance of the policy in order to prevent profit from an individual’s death.
The medical contribution is equally important in deaths ruled natural or accidental. According to Dr. Vincent Di Maio, "Medical expertise is critical in death investigations. It begins with body examination and evidence collection at the scene and proceeds through history, physical examination, laboratory tests, and diagnosis – in short, the broad ingredients of a doctor’s treatment of a living patient.” (Value of Medical Expertise, 2003)

The reporting of death statistics is important in many areas of public health and health care. In addition to the manner and causes of death that document trends of homicides, accidents, suicides and certain health trends throughout the U.S., the data provided by medical examiners and coroners are valuable in other areas of documentation. Dan Sosin stated that the data provided by Medical Examiners and coroners holds great potential for public health surveillance and public health intervention. Medical examiner and coroner death data also can contribute to knowledge regarding bioterrorism and terrorism. (Committee, 2003)

Experience and Training

Who are these forensic professionals that conduct complex scene investigations? As mentioned above, he/she can be an elected or appointed county coroner; an appointed medical examiner; a medical doctor without forensic pathology training; a forensic pathologist; a forensic odontologist, forensic botanist, forensic anthropologist, criminalist, police officer or a specialty trained forensic death investigator. In smaller more rural communities, it might be the elected or appointed county coroner who responds to death scenes and conducts an investigation. In metropolitan areas where the death statistics are much higher per capita, it is seldom the actual elected or appointed coroner or medical examiner who responds. The scene investigation is usually conducted by a medicolegal death investigator who receives training in manner and causes of death, as well as crime scene investigation and evidence collection.

Any of the above may have a role in death investigation. But it is usually the death investigator, representing the interests of a county coroner or medical examiner, who responds to a death scene to perform vital tasks and begin the process in making determinations as to the manner and cause of death.

Some critics of the investigative process refer to the medicolegal death investigator as a “lay person.” (Hanzlick, 1996; Haglund & Ernst, 1997) Webster’s II New College Dictionary defines layman as: “A man who is not a member of a particular profession or specialty”(1995). The definition of the death investigator as a “lay person” should be corrected. While it often is used to differentiate between a non-medical investigator and a physician-pathologist, scene death investigation requires trained, qualified people performing this important forensic function. Today’s MDIs are usually college educated in either criminal justice or one of the physical sciences. They undergo extensive on-the-job training in different aspects of investigative tech-
There has been considerable discussion on the merits of having a coroner or medical examiners conduct the death investigation. (Hanzlick, 1998) While the historical attributes of the coroner system have been traditionally accepted as a bona fide law enforcement tool in death investigations, it was discovered early in the field of forensic death investigation that medical knowledge could establish causes of death based on a sound scientific principle. (Spitz, 2006)

Many of the first medicolegal death investigators were funeral home employees or licensed embalmers. Their responsibilities at the death scene were to remove the body from the scene to the morgue or a mortuary, where a more thorough investigation might be conducted. More thorough and expert scene investigation was identified as important in the findings of the cause and manner of death. Along with that recognition, the need for more qualified scene investigators, with greater medical and anatomical knowledge, became paramount in legal proceedings.

Coroners and medical examiners began hiring investigators with law enforcement experience to respond and conduct a scene investigation. Their knowledge in the identification and collection of physical and trace evidence added an expertise to the death scene investigation. However, that did not resolve the issues of conducting a proper body examination to document post mortem changes that contribute to the cause and manner of death. Experience in law enforcement varied greatly from area to area, depending on the population, budget, availability of workforce and training of the investigator. Consequently, the integrity of death scene investigations was often in question. (Hanzlick, 1996)

Richard C. Harruff, M.D., Associate Medical Examiner for Seattle/King County, Washington stated “A competent and thorough death-scene investigation provides the basis for a comprehensive medicolegal autopsy, and together the scene investigation and autopsy provide the basis for an accurate determination of cause and manner of death.” (U.S. Department of Justice: A Guide for the Scene Investigator, 1999)

1 The morgue is commonly referred to as the holding location for dead bodies prior to autopsy or release to the next of kin. The mortuary is the business establishment where the bodies are prepared for burial.
There were no standard practices or procedures in place to help guide investigators in making decisions whether the death fell under the auspices of the coroner or the medical examiner. (Committee, 2003) Cases were sometimes accepted that were unnecessarily autopsied. A thorough investigation may have produced medical documentation revealing a probable cause of death that could have alleviated the need for an autopsy. This added expense which consumed much of the operational budget of the medical examiner or coroner. It also contributed to delays in burial adding to the grieving of many decedents’ families. On the flip side, cases were often declined that should have had an autopsy to determine the cause and manner of death. (Di Maio, 2003) The actual numbers of undetected or unsolved homicides is unknown, but could be significant when considered on a national scale. A need for a more consistent and standardized death investigation was identified as far back as the early part of the 1900s. Training for death investigators was often left to the agency employing them. Budgetary concerns often placed medicolegal death investigation training on a low priority and that training, if any, was often left up to the individual investigator to obtain on his or her own. (Ernst, 2003)

**American Board of Medicolegal Death Investigators**

In 1974 under the auspices of the St. Louis University, a one-week course in medicolegal death investigation was offered. In February 1998, the American Board of Medicolegal Death Investigators (ABMDI) was founded. Prior to 1995, there was no in-depth study that evaluated the essential tasks and the body of knowledge required to perform competent medicolegal death investigations. (Howe, 2008) Dr. Jeffrey Jentzen, then Chief Medical Examiner of Milwaukee, Wisconsin, found that only 7 of the 28 coroner-served states mandated any formal training for death investigators. He spearheaded a project (The Milwaukee Task Force) to develop a pre-employment test for death investigators, which produced an in-depth analysis of the skills needed to perform the job. (Howe, 2008)

After 1998, ABMDI tested, registered and certified investigators on a national basis. Today, medicolegal death investigators may also be affiliated with the National Association of Medical Examiners (N.A.M.E.), or American Academy of Forensic Sciences (AAFS) and certified as medical investigators (Certified Medical Investigator, Levels I, II or III) through the American College of Forensic Examiners International. (Ernst, 2003) These professional affiliations, training, registration and certification programs have increased the level of proficiency and professionalism of medicolegal death investigators in general. However, many agencies still do not require their medicolegal death investigators to affiliate or become registered by any of the above professional organizations.
Classification, education and training requirements vary greatly. While some agencies classify their MDIs as law enforcement personnel, most classify them as civilian employees without law enforcement authority. Some Sheriff/Coroner agencies use sworn deputies as a combination law enforcement officer/death investigator. Other sheriff/coroners hire specially trained MDI’s and classify them as law enforcement officers with limited law enforcement responsibilities (e.g. in San Bernardino, California.)

Education and training requirements vary from state-to-state. Most require a minimum training period that may include academy classroom training, one-on-one training with an experienced MDI for a specific time period, and continued education on an annual basis. Training can range from a few short weeks to a full year or more. Some colleges and universities offer Medicolegal Death Investigation as part of the Criminal Justice or Forensic training programs. These courses are gaining in popularity and certification or completion of this type of training will often enhance opportunities for many MDI job candidates.²

² A survey of agencies affiliated with the American Board of Medicolegal Death investigators provided the following results:

A. Civilian vs Law Enforcement classifications: 77% of responders classified their medicolegal death investigators as civilian employees (N=23). Only 23% classified death investigators as law enforcement positions (N=7).

B. Previous Experience in Law Enforcement: 47% hired employees with previous law enforcement experience (N=14);

C. Medical Experience as a job requirement: 37% hired employees with previous medical experience (N=11);

D. Previous MDI Experience as a job requirement: 10% hired employees with previous MDI experience (N=2);

E. Education Requirement: 53% hired employees with at least a 4-year Bachelor’s Degree in either criminal justice or the physical sciences (N=16); 13% hired employees with at least a 2-year Associate Degree (N=4); and 33% hired employees with a high school diploma or a GED equivalent diploma.

Education and previous work experience vary greatly, depending on budget restraints, case loads and geographic dynamics. Medical examiners and coroners often require either a combination of college training or previous law enforcement background with emphasis on crime scene investigation. Some high population geographic areas with heavy case loads will also require medical backgrounds such as Emergency Medical Technician (EMT), Paramedic, Registered Nurse (RN), or Physicians Assistant (PA).

The following questions of ABMDI members via E-mail questions were submitted in March 2008. Thirty agencies representing 15 states and the District of Columbia responded to a questionnaire. The questions asked were:

Are your MDI employees classified as law enforcement or civilian personnel?

If the employees are classified as Law Enforcement, what is the authority statute?
Case Histories

The following cases histories are taken from my files of death investigations, handled during my tenure as a Deputy Coroner Investigator at the Los Angeles County Department of Medical Examiner/Coroner. The County of Los Angeles has one of the highest case loads of any Medical Examiner/Coroner in the country.

Case Histories: Case #1, Death by Train

It was early morning in Los Angeles and the phone at the Medical Examiner/Coroner for the County of Los Angeles began ringing in earnest. Under California law, all sudden and unexpected deaths and those deaths defined by statute must be immediately reported to the Medical Examiner/Coroner’s office as soon as they are discovered (Calif. Government Code Sec. 27491). On the telephone was a Los Angeles County sheriff’s dispatcher reporting what appeared to be a suicide by train. Information was sketchy and although the coroner’s protocols required obtaining as much information as possible when the death was reported, little additional information was available from the field units at the scene. Even the sex of the decedent was in question due to traumatic injuries sustained after being struck by a slow-moving freight train. California law states that, unless prior permission is given, no one but the coroner/medical examiner representative may touch the body of a decedent, once it is established that it may be a reportable case to the coroner’s office. The obvious exclusion is the examination of the body upon arrival at a scene of the first responder to determine signs of life. Once death is pronounced by a competent authority, the Medical Examiner/Coroner has jurisdiction over the body, along with all property and evidence within close proximity. Consequently, the deputies on the scene could do little more than document their arrival, cordon off the scene by yellow police “crime scene – do not cross” tape, and wait for homicide detectives, train administrative personnel and the coroner’s investigator to arrive and process the scene.

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Is registration or certification with ABMDI required as a condition of employment?

What are the minimum educational requirements for the position of MDI?

What are the minimum job-related experience requirements for the position of MDI?

3 In many jurisdictions an autopsy is mandated for certain types of death. These include any suspected homicides, unexpected deaths where there is no medical history and the age of the decedent is not consistent with death and where Sudden Infant Death Syndrome (S.I.D.S.) is suspected. The requirement for autopsy may depend on local or state statute as defined by the legislature.
In Los Angeles County, the investigator assigned to field calls representing the Medical Examiner/Coroner is referred to as “Coroner’s Investigator.” California State Law identifies coroner’s investigators as “Peace Officers” (California Penal Code Sec. 830.35.c). I was assigned the case and quickly responded to the scene. Upon arrival I made contact with the lead homicide detective and obtained the following information relating to the death.

The train engineer reported that he was heading slowly westward towards Los Angeles when he observed an individual standing on the railroad tracks. It was just after dawn and the weather was dry and cool. He said he could clearly see the individual and, although he sounded the train horn several times, the person did not attempt to move out of harm’s way. He activated the emergency brakes, dropping sand onto the track to help facilitate stopping in an attempt to avoid hitting the individual. He could only watch as the individual disappeared beneath his engine. When the train was able to come to a complete stop, the victim was discovered beneath one of the freight cars several hundred feet down track from the front engine.

That same morning, a woman appeared at the sheriff’s local substation to report her teenaged son missing. She filed a “missing person’s” report with the desk officer stating that her son had been home when she went to bed, but was gone when she awoke to prepare to go to work. The behavior was unusual for him and she was concerned. Her concerns were heightened, she said, because her son told her he had an argument with his high school girlfriend that evening and she had ended their relationship. She was worried that he may have run away from home to deal with his emotional state. Missing person’s reports, under any circumstance, are taken seriously. Unlike in years past when many police departments required a waiting period of 24 hours, current laws mandate the immediate filing of missing person’s reports.

The detective assigned to the juvenile desk read the missing juvenile report and remembered the train incident from his morning briefing. He phoned the Medical Examiner’s office and we discussed the possibility of the suicide victim being his missing juvenile. The description provided by the missing juvenile’s mother closely matched the physical characteristics and clothing worn by the victim of the train incident. We agreed to meet at his office and confer on how to confirm the identity and notify the mother of the death.

California law (California Government Code 27472a) states that it is the responsibility of the coroner/medical examiner to make a death notification when the death falls under the jurisdiction of that office. A death notification can be made by an assortment of different professions or agencies, depending on the local statute. Some jurisdictions may handle a death notification by sending a police officer, a medical person or clergy. (Leash, 1994)
We decided the best course of action was to try and have the juvenile’s mother return home from work and show her a facial photograph taken of the victim at the site earlier that morning. Most identification of unknown persons is made by fingerprint comparison submitted through the Automated Fingerprint Identification System (AFIS) or through the FBI fingerprint database. In some instances, identification is confirmed by showing a facial photograph taken of the decedent at the scene.

We contact the Sheriff’s Chaplain who lived locally and he agreed to accompany us to the home of the victim when we spoke to his mother. One of the most difficult assignments in medicolegal death investigation is confirming identity and making the notification to surviving family members. It is always an emotionally charged environment and can be extremely difficult for many professionals. It is recommended at least two persons make the notification and, if possible, a clergy member or family support member be present at the time of notification. (Leash, 1994) The case concluded with a finding of suicide based on the actions observed by the train engineer, the recent breakup with his girlfriend and his mother’s statements as to his emotional state the previous night.

Case Study: Case #2, Murder or suicide?

The building was a two-story men’s health spa, located in a commercial area of West Hollywood, California. The spa was frequented primarily by gay men who paid membership or daily user fees and took advantage of the establishment’s pool, health gym, health bar and other amenities. The second story was dedicated to small rooms, rented by the hour, day or half-day. Each room contained a single bed, built on a platform station, elevated off the floor approximately 30-inches.

The body on the bed was that of an African-American male in his early 20s. He was lying supine with his head resting on the single pillow and his feet extended off the end of the bed. He was wearing a black sweatshirt over a white T-shirt, blue jeans and white socks. A dark baseball cap was on his head. His white gym shoes were found on the floor near the bed. Over his head was a black plastic bag, held in place by a large rubber band fastened around his neck. Along the left side of the bed was a small counter top affixed to the wall. There was a mirror that measured approximately 3” x 6” in length along the wall next to the mattress. On the counter top near the bed were the room keys (one key for the door and another for a valuables locker kept on the first floor level). There was the bottom half of an aluminum soft drink can with the bottom turned up. A plastic Bic-type lighter and a syringe (the type used by diabetics to inject themselves with insulin) with the orange top securing the needle removed were observed near the bed.
The half-can showed evidence of a brown substance that had dried (it had been heated with water prior to inserting the mixture into the syringe--a typical procedure used by heroin users.) Located on the mirror was a yellow “post-it note” that had a poem written out in block letters. The poem read “Life is a constant youth I take as my own, I’ve been pricked by a rose & counseled by the trees of things to you unknown.” Beneath the writing was drawn three symbols, a peace sign, a heart and the letter ‘K’ written backwards followed by three horizontal lines as in the letter ‘E’.

This scene held a wealth of information for a trained MDI. It is important to try and decipher what the evidence indicates while processing the scene. Was this a murder committed by a jealous lover? Or, was it a case of autoerotic sexual gratification gone awry? Were the homicide detectives to search for one suspect, two or none?

Every death scene is a potential crime scene. It is the job of the responding investigators, whether they are police officers, paramedics, medicolegal death investigators, or from other forensic disciplines involved in death investigation, to carefully examine the scene for evidence or unusual circumstances that may indicate the death of the person is other than by natural causes.

Through training, experience and careful crime scene processing, the death investigator, after examining the death scene described above, could reach some preliminary conclusions. Interviews of management and staff by the investigator could determine the time of day the decedent arrived at the facilities. This information, combined with the condition of the body, could help establish a reasonable time of death interval. Did the body condition conform to the time elements provided by the staff? If not, how much time difference may have occurred between the time of death interval (the actual time of death and the discovery of the body?)

The investigator might be able to determine the mental state at the time of arrival. Was he nervous? Was he alone? Did he seem quiet and non-communicative or was he jabbering? Did the decedent seem under the influence of drugs or alcohol? Was he a frequent guest of the facilities or was this his only visit? This type of questioning could help establish the manner of death.

An experienced death investigator would recognize several ingredients described in this scene. A plastic bag, a large rubber band used to hold the bag in place, and drugs or alcohol are often present in suicide scenes. In his book Final Exit, Derek Humphry describes in detail how a person can take their own life using the equipment and procedure described here. (Humphry, 1991) I had observed this death scene frequently in the many suicide scenes I investigated. I often found the book Final Exit near the body, indicating that the decedent used it as a reference for the final act of self destruction.

The scene and all the ingredients, or evidence, provide clues as to the cause and manner of death. It should be noted that while the experience of the investigator will contribute to findings, the cause and manner of death should only be ascribed to the case after all the elements of the investigation are completed. These include a complete medical history of the decedent, interviews with family, friends and witnesses, and in most cases, a complete autopsy by a qualified forensic pathologist.

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After conducting a thorough review of the decedent’s medical history, looking into his daily habits and interviewing his family and friends who last saw him alive, the manner of death in this case was determined to be a suicide. Asphyxia was listed as the official cause of death on the death certificate. Interviews with his family indicated a pattern of suicidal ideations. He had not arrived at the location in the company of any other person and the staff discovered the body within a time period that made the possibility of foul play highly unlikely. The presence of the narcotic paraphernalia was consistent with the decedent’s behavior pattern. The lack of any bruising on the body or other signs of struggle was consistent with the ruling of suicide.

Conclusion

Medicolegal death investigation has evolved from the archaic “English Coroner system” to a highly scientific and technical forensic field of study. (Hanzlick, 1998) The field encompasses other scientific disciplines including Anthropology, Entomology, Odontology, Botany and others that, combined with law enforcement, examine death circumstances to determine whether or not a criminal act occurred, and to establish the manner and cause of death.

Today, the medicolegal death investigator is a professional who responds to some of the most horrific death scenes imaginable. The men and women who enter this forensic profession must possess strength in body, character and ethics in order to perform this important service. They enter crime and accident scenes dealing with death on a daily basis. They encounter all aspects of diseases, body fluids, drugs and weapons that may have potential harmful effects on them, simply from their presence. They enter homes ranging from dirty, pack-rat conditions, to executive mansions of the rich and famous. They deal with emotionally charged conditions involving the death of children, parents, wives and husbands, and always maintain a professional attitude regardless of the circumstances. They collect and handle property involving expensive jewelry, cash, and other valuables that they must protect and return to the decedent’s next of kin. They must be capable of examining decomposed and mangled bodies as well as reading and interpreting important medical records to help determine the manner and causes of death. They must coordinate their investigative efforts with other law enforcement agencies, medical staffs, fire department and rescue personnel, and at the same time, protect the interest of the deceased person, whom they represent in death.

Medicolegal death investigators present a specialized ingredient to the crime scene investigation. Through training and experience, combined with fortitude in character and mental well-being, the medicolegal death investigator contributes to the investigative process in a unique manner. They must possess a highly motivated desire to help families of decedents at a time when the need for the most gentle yet professional demeanor, is demanded of them. They must interact with highly trained medical doctors, a multitude of law enforcement personnel, sometimes angry and confused family members and the bureaucracy of public service to achieve one of the most difficult and important aspects of the criminal justice system.
Unless otherwise indicated all photos are by Emil Moldovan

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