

**SAN DIEGO POLICE DEPARTMENT
PROCEDURE**

DATE: NOVEMBER 5, 2019
NUMBER: 6.30 – PATROL
SUBJECT: DEATH INVESTIGATION REPORTING
RELATED POLICY: 6.06
ORIGINATING DIVISION: HOMICIDE
NEW PROCEDURE:
PROCEDURAL CHANGE: **MINOR CHANGES**
SUPERSEDES: DP 6.30 – 06/21/2018

All portions of this document in **bold print** are deemed by the San Diego Police Department to be records of security procedures and are exempt from disclosure under the California Public Records Act by Section 6254(f) of the California Government Code.

I. PURPOSE

This Department Procedure establishes guidelines for the investigation and reporting of death and suicide cases.

II. SCOPE

This procedure applies to all sworn members of the Department.

III. BACKGROUND

Law enforcement officers play a vital role when documenting the circumstances surrounding death-related calls.

The purpose of a death investigation is to collect information and evidence to determine whether a death was criminal, non-criminal, or a suicide. Officers are not considered medical experts and are not expected to determine the cause of a person's death.

The Homicide Unit investigates all criminal deaths or deaths that occur under suspicious circumstances. Officers who respond to death scenes that seem suspicious (i.e., trauma inconsistent with a version of events presented by a family member, unexplained death of

a previously healthy person, deaths that could be interpreted as homicide or suicide) should consult their sergeant or the Field Lieutenant. A supervisor should contact the Homicide Office, at (619) 531-2293, during business hours or the on-call Homicide Lieutenant via the Watch Commander's Office during non-business hours for assistance.

The Child Abuse Unit investigates all deaths of children under the age of 18 years, with the general exception of obvious homicides, suicides, traffic fatalities, and terminal illnesses. Officers who respond to a child death scene should consult their sergeant or the Field Lieutenant. A supervisor should contact the Child Abuse Office, at (619) 531-2260, during business hours or the on-call Child Abuse Sergeant via the Watch Commander's Office during non-business hours. Refer to Department Procedure 3.31, Child Abuse Procedures, for details.

Whenever a death occurs in a location other than a medical facility, Communications Division dispatches an officer to the scene to determine the circumstances surrounding the death. Officers are also dispatched to reports of apparent suicides or attempt suicides.

A thorough investigation, including a detailed description of the scene, surveillance video, photographs, sketches, witness statements and evidence collected, is required in each of these instances. Minor details that seem unimportant at the time of the investigation can become extremely important when an autopsy reveals that a case handled as a natural death is actually a homicide.

If a patient dies at home under hospice care, a death investigation is not required.

IV. REPORTING PROCEDURES

Appropriate Crime Case Codes

1. An ARJIS-2 and a Supplemental Death Report must be completed for death investigations and suicides. The appropriate crime code sections are:
 - a. Death – 920000
 - b. Suicide – 921000
2. The report must be submitted to Records Division.

V. CAUSE OF DEATH

Officers will not indicate the direct cause of death on the Supplemental Death Report. Each death will be categorized as:

1. Traumatic - an obvious injury that could be reasonably believed to have caused or contributed to the death. Suicides are included in this category;
2. Apparently Natural - there is no indication of trauma and the victim's death was likely natural. Drug-related deaths do not fit into this category; or,
3. Undetermined - the circumstances of the death do not fit into the "Traumatic" or "Apparently Natural" categories. Examples of this are drug-related deaths, or when a person dies without being sick. When in doubt, always mark "Undetermined."

VI. DEATH INVESTIGATION SUPPLEMENTAL

Each of the six headings in the narrative section of the Supplemental Death Report must be specifically addressed.

A. Scene Description

Describe the immediate area surrounding the decedent. If indoors, describe the setting (i.e., "A sparsely furnished studio apartment, with only a plastic chair and a television set in the living room.") Also, describe the temperature and whether windows were open or lights were on. Describe if the apartment or house was secured (i.e., deadbolt locked from the inside), and note whether there were any signs of forced entry. When listing medications that were found, be sure to include the medication name, dispensing pharmacy, physician, dosage, number of pills left in the container, and when the prescription was last filled. Photographs to include the body and scene shall be taken in all cases.

B. Location and State of the Body

Describe how the body was positioned and where it was located (i.e., "The male was on his stomach, with his head turned to the left. The male's head was facing north, and his arms were outstretched beside him".)

1. Describe the condition of the body (i.e., "The body was cold to the touch. The lower portion of the body was discolored. The limbs were stiff. There was a red, frothy substance on and around the mouth. On the left side of the head was a small hole with a small amount of dried blood below it"). 
2. Provide a full description of tattoos, marks, and scars, as they are often instrumental in efforts to identify the decedent.

C. History/Background of Subject

Include the decedent's medical history and behavior just prior to death. (i.e., "Smith had been a cancer patient for the past two years. According to his brother, he was very distressed about his failing health. Jones last saw Smith at noon in Smith's apartment. Smith was alone at the time".) Remember to give sources of all information (relatives, friends, landlords, etc.) and list them as witnesses on an ARJIS-4, if necessary.

D. Evidence/Property

Describe what was found and where it was found, who the owner is (if known), and why it was impounded.

1. The Medical Examiner's Investigator will generally take custody of personal property found on the decedent. However, the Medical Examiner will occasionally ask the officer to impound certain types of property. Drugs, drug paraphernalia, firearms, and large sums of money are examples of items that should be impounded by the investigating officer. Otherwise do not search for or remove property from the clothing of the decedent. All prescription and non-prescription medication found at the scene or upon the decedent shall be described within the Death Investigation Supplemental by the investigating officer.
2. When a death appears to be a drug overdose, the Medical Examiner will retain drug paraphernalia related to the death.
3. When a death appears to be a suicide, and a note is left, the officer will provide the original suicide note to the Medical Examiner. A copy of the note should be forwarded (along with any photographs and property tags) to the Adult Missing Persons Unit at MS 713.

E. Witness Statements

Officers should take thorough statements from family members, close friends, medical providers, employers, or the last persons to come in contact with the decedent. Additionally a witness check should be conducted if the facts of the case warrant a witness check.

F. Investigation

The investigating/reporting officer should tie together, in narrative form, what has been learned during the investigation and draw a conclusion for categorization of the death as Traumatic, Apparently Natural, or Undetermined. The conclusion should be based upon all of the facts of the case such as location and trauma to the body, witness statements, evidence located, surveillance video etc.

The investigation should include not only the time dispatched but the time Communications received the original call and the time death was confirmed at the scene or pronounced by a physician at the hospital if transported.

Reasonable attempts should be made at the scene to determine the decedent's next of kin. Order under California law is as follows: Durable Power of Attorney for Healthcare, spouse or registered domestic partner, adult children, parents, siblings, other blood relatives.

VII. MEDICAL EXAMINER'S JURISDICTION/WAIVERS

- A. Per Government Code 27491, it is the responsibility of the Medical Examiner's Office to inquire into and determine the circumstances, manner, and cause of all violent, sudden, unusual deaths, unattended deaths, deaths where the deceased has not been seen by a physician in the 20 days preceding death, or deaths known or suspected as due to contagious disease.
- B. Officers should contact the Medical Examiner's Office, at [REDACTED] directly or via Communications Division to notify them of suicides, natural deaths, or unexplained deaths, including child deaths. Do not contact the Medical Examiner on homicide cases. The Homicide Unit will make the notification and arrange to release the victim's body to their custody. [REDACTED]
- C. In cases where a doctor has seen the decedent within 20 days of death, the doctor will often sign a death certificate and waive the requirement of an autopsy. This includes child deaths in which the child has a previously known or diagnosed medical condition or illness. In these cases, the Medical Examiner's Office will provide a Waiver Number over the telephone for the officer's report. The Medical Examiner will not respond to the scene, and the family may make arrangements with a mortuary.
- D. In cases where the decedent has no apparent family or guardian, a Medical Examiner will respond and take custody of the body.