

Arizona Peace Officer Standards and Training

Basic Curriculum Model Lesson Plan

LESSON TITLE: DEATH INVESTIGATIONS INCLUDING SUDDEN INFANT DEATH SYNDROME 5.7

SUBJECT:	Death Investigations Including Sudden Infant Death Syndrome
AZ POST DESIGNATION:	5.7
HOURS:	4
COURSE CONTENT:	A description of the techniques and procedures for investigating cases involving death. Homicide, suicide, natural, accidental and Sudden Infant Death Syndrome (SIDS) cases are discussed.
PERFORMANCE OBJECTIVES:	Upon completion of this course of instruction, students using notes, handouts and other support materials as references, within the allotted time, will:
5.7.1	Identify the following special considerations for conducting a death investigation: <ul style="list-style-type: none">A. Examine the body for signs of life (i.e., verify death).B. Determine apparent manner of death (e.g., natural or other).C. Describe physical condition and location of body.D. Determine most appropriate course of action from among the following alternatives:<ul style="list-style-type: none">1. Apparent natural death which should be referred to the Medical Examiner.2. Apparent natural death requiring only signature of death certificate by physician familiar with medical history of the deceased.3. Apparent unnatural death requiring specialized investigative assistance.
5.7.2	Given a written, verbal or visual description of a child's death, identify whether Sudden Infant Death Syndrome is the most likely cause of death based on the following SIDS indicators: <ul style="list-style-type: none">A. Death generally occurs within one (1) year of birth.

- B. Death generally occurs during a sleep period.
- C. SIDS infants appear to have been healthy.
- D. Generally, there are no visible signs of trauma.
- E. Frothy or blood-tinged mucous or vomit may be present in, or around, the nose and/or mouth.

5.7.3 Identify who may legally pronounce a person dead.

5.7.4 Identify the following methods of committing suicide and the physical appearance features of the victim associated with each:

- A. Gunshot wound.
- B. Hanging.
- C. Poisoning.
- D. Carbon monoxide inhalation.
- E. Suffocation or physical injury.
- F. Slashed wrists.

5.7.5 Identify the meanings of the following terms:

- A. Abrasion.
- B. Ante mortem.
- C. Contusion.
- D. Incision.
- E. Laceration.
- F. Lividity.
- G. Rigor mortis.
- H. Post mortem.

5.7.6 Identify the following special considerations for conducting a suicide investigation:

- A. Collect any drugs/medications and/or drug/medication containers.
- B. Obtain information as to the victim's psychological/emotional history.
- C. Obtain information as to any prior suicide attempts.

DATE FIRST PREPARED: June 1995

PREPARED BY: Unknown

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REVIEWED – REVISED:	Edward Reynolds	DATE: October 2001
REVIEWED – REVISED:	SME Committee	DATE: May 2002
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REVIEWED – REVISED:		DATE:
AZ POST – APPROVAL:	Richard Watling	DATE: November 2009
AZ POST – APPROVAL:	Lori Wait	DATE: December 2021

INSTRUCTOR REFERENCES:

CLASS LEVEL: Student

TRAINING AIDS: <http://www.azleg.gov/ArizonaRevisedStatutes.asp>

INSTRUCTIONAL STRATEGY: Interactive lecture and class discussion.

SUCCESS CRITERIA: 70% or higher on a written, multiple-choice examination.

COMPUTER FILE NAME: 5.7 Death Investigations Including SIDS

DATE RELEASED TO THE SHARE FILE: May 27, 2022

I. INTRODUCTION

- A. Instructor – (self) introduction.
- B. Preview of performance objectives.

II. DEATH INVESTIGATION**P. O. 5.7.1**

- A. Examine the body for signs of life (verify death).

P. O. 5.7.1A

- 1. Cold to touch.
- 2. No pulse.
- 3. No heartbeat.
- 4. No breathing.
- 5. Eyes fixed, crusty, cloudy.
- 6. Presence of rigor mortis.
- 7. Presence of post-mortem lividity.
- 8. Animal/insect activity.
- 9. Putrefaction/decomposition.
- 10. Skin slippage.
- 11. Adipocere.
- 12. Mummification.

- B. Determine manner of death.

P. O. 5.7.1B

- 1. Accidental:
 - a. Airplane crash.
 - b. Electrocution.
 - c. Industrial.
 - d. Drowning.
 - e. Auto-erotic.

2. Natural death (doctor will sign): **P. O. 5.7.1D2**
 - a. Heart attack.
 - b. Cancer.
 - c. Diabetes.
 - d. Various other diseases.
3. Apparent natural death which should be referred to the Medical Examiner. **P. O. 5.7.1D1**
4. Suicide: **P. O. 5.7.4**
 - a. Gunshot.
 - b. Hanging.
 - c. Poisoning.
 - d. Carbon monoxide inhalation.
 - e. Suffocation or physical injury.
 - f. Slashing wrists.
5. Unknown:
 - a. Found dead.
 - b. No sign of foul play.
 - c. No sign of natural death.
 - d. No doctor to sign.
6. Homicide (requiring specialized investigative assistance): **P. O. 5.7.1D3**
 - a. Gunshot.
 - b. Knife.
 - c. Blunt force.
 - d. Multiple deaths.

7. Describe physical condition and location of the body.

P. O. 5.7.1C

III. DEATH INVESTIGATION TERMS

P. O. 5.7.5

- A. Abrasion.
- B. Ante mortem.
- C. Contusion.
- D. Incision.
- E. Laceration.
- F. Lividity.
- G. Rigor mortis.
- H. Post mortem.

IV. SPECIAL CONSIDERATIONS FOR CONDUCTING A SUICIDE INVESTIGATION

P. O. 5.7.6

- A. Collect any drugs/medications and/or drug/medication containers.
- B. Obtain information as to the victim's psychological/ emotional history.
- C. Obtain information as to any prior suicide attempts.

V. DUTIES OF FIRST RESPONDING OFFICERS

- A. Render aid first.
 - 1. CPR?
 - 2. Treat wounds.
 - 3. Stabilize and prevent shock.
 - 4. Make individuals comfortable.
 - 5. Remove them from the danger area if necessary.
- B. Protection of the scene.
 - 1. Set up barriers/crime scene tape.
 - 2. Stand guard and prevent destruction of evidence.

3. Remove people/witnesses from the scene.
 4. If possible, cover delicate items of evidence (i.e., casings, bullets, etc.).
- C. Direct in securing back-up officers.
1. Ensure safe arrival.
 2. Prevent destruction of evidence with vehicles or footwear.
- D. Arrest of suspect.
1. If reasonable, detention would be allowed under exigent circumstances even if probable cause did not exist.
 2. You may question him/her without Miranda if you are on a fact-finding mission to determine if a crime occurred.
 - a. As soon as he/she is the focus of the investigation, you should stop questioning him/her.
 - b. Do not give Miranda.
 3. Make notes of all statements as soon as practical.
 - a. Your accurate recall of the facts will be critical at trial.
 - b. Try to write down exact quotes, if possible.
 4. After questioning has stopped, make note of spontaneous unsolicited statements.
 5. Make note of the suspect's demeanor, physical condition, emotional state, clothing and injuries including redness to certain parts of the body that might go away in time.
 6. What was the suspect doing when you first saw him/ her.
 7. Note the time first observed.
 8. Note the lighting/weather conditions when you arrive.
 9. If you turn on a light, leave it on, but let someone know you did.
 10. If you have to touch or move objects, so be it, but let investigators know.
 11. Do not unload weapons!

12. Do not move a weapon unless you absolutely have to.
 13. Assign someone to guard it rather than disturb it.
 14. Do not assume any death scene is anything other than a homicide scene. Treat all scenes with care.
 15. If a suspect invoked his/her rights or asked about, or for, an attorney, write down his/her exact request or invocation.
 - a. Sometimes these statements are not official invocations of Miranda.
 - b. Let the experts determine.
 - c. No matter what, stop questioning him/her at this point!
 - d. Do not let others question him/her until investigators arrive.
 - e. Let investigators know exactly what was said ASAP.
 16. Separate from others.
- E. Detention of investigative leads/witnesses.
1. Separate from each other.
 2. Treat statements the same as suspects.
- F. Be prepared to expand the scene, if necessary.
1. The scene can always be reduced later, but sometimes enlarging the scene too late results in the loss of critical evidence.
 2. Always start out big.
 3. Do not brief patrol supervisors in the scene.
 4. Do not discuss the scene, evidence or statements within earshot of the media or other persons.
 5. Be aware of technology that allows easy listening to your conversations (i.e., boom/amplified microphones).
- G. Start a scene roster.
1. Identify everyone entering the scene.

2. Turn over the roster to investigators.
- H. Briefing.
1. Turn over all information to investigators.
 2. Do not think that the person will tell the same story to the detectives; if they lied, they probably cannot tell the same story twice or they may tell you the truth, but lie to the investigators.
 3. If you think you saw something important or suspicious, trust your instincts and tell an investigator. You may be the only person that noticed this.

VI. INDICATORS FOR SUDDEN INFANT DEATH SYNDROME (SIDS)**P. O. 5.7.2**

- A. Death generally occurs within one (1) year of birth. **INSTRUCTOR NOTE:** *S.I.D.S. is not a cause of death, but a classification.*
- B. Death generally occurs during a sleep period.
- C. SIDS infants appear to have been healthy. **INSTRUCTOR NOTE:** *Do not confuse SIDS with hidden abuse.*
- D. Generally, there are no visible signs of trauma.
- E. Frothy or blood-tinged mucus or vomit may be present in, or around, the nose and/or mouth.

VII. DEATH NOTIFICATION PROCEDURES

- A. Notify in person if at all possible.
- B. Have another family member present or nearby, if possible.
- C. Make notification direct and factual.
 1. Do not beat around the bush.
 2. Use plain language (i.e., “dead,” “died,” etc.).
 3. Do not use terms like expired, checked out or big cloud in the sky.
 4. There is no easy way to do this so do not sugar coat it.
 5. Do not be harsh or disrespectful.
 6. Some details are better off unsaid.

7. Have a phone number handy for them to get more information and support.
- D. Show compassion.
1. It is okay to put your arm around them and say you are sorry this happened. At the time, you may be all the support they have.
 2. No jokes or laughing.
 3. If other officers are in the area laughing, move away from them first.
- E. Do not hurry.
1. Take the time to do it correctly and accurately.
 2. Make sure that before you leave, they are with someone who will help them. If no one is available, call for a social worker (i.e., fire department volunteer).
 3. Offer to call a friend or family member for them.
- F. Review your notification.
1. Could it have been done better?
 2. Learn from your mistakes.
 3. Watch how others do it. Volunteer to go with another officer on one before you do one and watch what happens.
- G. Legal responsibility for pronouncing a person dead. **P. O. 5.7.3**
1. A.R.S. 11-593. Reporting of certain deaths; failure to report; classification. **INSTRUCTOR NOTE:** *Most agencies have policies in place concerning death notifications.*
 - a. Any person having knowledge of the death of a human being including a fetal death shall promptly notify the nearest peace officer of all information in the person's possession regarding the death and the circumstances surrounding it under any of the following circumstances:
 - i. Death when not under the current care of a physician or nurse practitioner for a potentially fatal illness or when an attending physician or nurse practitioner is unavailable to sign the death certificate.
 - ii. Death resulting from violence.
 - iii. Deaths occur suddenly when in apparent good health.

- iv. Death occurring in a prison.
 - v. Death of a prisoner.
 - vi. Death occurring in a suspicious, unusual or unnatural manner.
 - vii. Death from disease or accident believed to be related to the deceased's occupation or employment.
 - viii. Death believed to present a public health hazard.
 - ix. Death occurring during, in association with or as a result of anesthetic or surgical procedures.
 - x. Unidentifiable bodies.
- B. The peace officer shall promptly notify the county medical examiner or alternate medical examiner and, except in deaths occurring during, in association with or as a result of surgical or anesthetic procedures from natural diseases, shall promptly make or cause to be made an investigation of the facts and circumstances surrounding the death and report the results to the medical examiner or alternate medical examiner. If there is no county medical examiner or alternate medical examiner appointed and serving within the county, the county sheriff shall be notified by the peace officer and the sheriff shall in turn notify and secure a licensed physician having the qualifications of an alternate medical examiner to perform the death investigation or to arrange for an autopsy.
- C. Every person who knows of the existence of a body where death occurred as specified in subsection A of this section and who knowingly fails to notify the nearest peace officer as soon as possible unless the person has good reason to believe that notice has already been given is guilty of a class 2 misdemeanor.
- D. If the deceased was under treatment for accident or illness by prayer or spiritual means alone, in accordance with the tenets and practices of a well-recognized church or religious denomination, and death occurred without a physician or nurse practitioner in attendance, the person who has knowledge of the death shall report all information in the person's possession regarding the death and circumstances surrounding it directly to the county medical examiner or the alternate medical examiner who may waive an external examination or autopsy if the county medical examiner or alternate medical examiner is satisfied that the death of the person resulted from natural causes.
- E. Each county shall provide to the department of public safety fingerprints of all deceased persons for whom the circumstances of death require an external examination or autopsy and whose deaths are required to be investigated pursuant to this section. These fingerprints shall be on a form provided by the department of public safety and shall be accompanied by such other information regarding the physical description and the date and place of death as the department of public safety may require. Fingerprints taken pursuant to this section shall be used only for the purpose of purging criminal history files. All information and data in the

department of public safety that are furnished in compliance with this section are confidential and may be disclosed only on written approval of the director of the department of public safety to the juvenile court, social agencies, public health and law enforcement agencies licensed or regulated by this state.

VIII. THE PHYSICAL AND PSYCHOLOGICAL ASPECTS OF DEATH INVESTIGATION.

A. Slide show. ***INSTRUCTOR NOTE:*** *Optional if available.*

1. Various gunshot wounds.
2. Various knife wounds.
3. Axe wounds.
4. Wound patterns.
5. Incisions.
6. Lacerations.
7. Contusions.
8. Blunt force trauma.
9. Aircraft accidents.
10. Drownings.
11. Hangings.
12. Auto erotica.
13. Building jumpers.
14. Various industrial deaths.
15. Obesity-related death.
16. High profile homicide scenes.
17. Multiple homicide scenes.
18. S.I.D.S. death.

B. Officer mental well being and coping mechanisms.

1. Separate yourself from the despair and trauma involved.
2. Tell yourself, "It is just a crime scene," a thing instead of a person.
3. Do not take it home.
4. Talk with other officers.
5. Prepare yourself ahead of time for what you will see (like this class).
6. "Gallows humor" is not all bad, but be very discreet and do not do it in public view.

IX. PROCEDURES AND PRACTICES OF HOMICIDE INVESTIGATION

- A. Explain to students how knowledge of what homicide investigators do may help them understand all these procedures.
- B. Walk students through a completed homicide investigation from start to finish, explaining their role in the investigation and how it affects the outcome of the entire case.

X. DEATH INVESTIGATION REPORT WRITING

- A. Prepare a handout for students to use to assist them in including all the necessary information for the various types of death reports they may have to author. This handout should include the following information: ***INSTRUCTOR NOTE: Instructor preference.***
- B. Natural death.
 1. Family doctor will sign (under a doctor's care).
 2. Being treated for a potentially fatal illness.
 3. Check records and warrants that need to be expunged (usually a letter or teletype to the court of jurisdiction is required).
- C. Victim (first, middle and last names).
 1. Date of birth, physical description and social security number.
 2. Address residing at and telephone number.
 3. Employer (name, address and telephone number).
- D. Next of kin.
 1. Complete name and date of birth.

2. Address residing at and relationship.
 3. Telephone number.
 4. Employer (name, address and telephone numbers).
 - a. If not known, state “unknown.”
 - b. If not able to locate – so state.
- E. Witnesses.
1. Complete name and date of birth.
 2. Address residing at.
 3. Telephone number.
 4. Employer (name, address and telephone number).
- F. Investigative leads:
1. Complete name and date of birth.
 2. Address residing at.
 3. Telephone number.
 4. Employer (name, address and telephone number).
- G. Paramedics.
1. Name(s), shift and station.
 2. Address and telephone number.
- H. Mortuary: Family request – name and rotation from O.M.E. – name (address and telephone number not required, but helpful).
1. Property – list property impounded.
 2. List “none” if none.
 3. Name of person and relationship released to.
- I. Vehicle.

1. Describe and note disposition.
 2. Records check.
- J. List criminal record number (needed to morgue out records).
1. Note if a victim of recent assault or accident.
- K. Medical history.
1. Doctor that has previously treated the victim.
 2. Name, address and telephone number – treated for.
- L. Officers involved:
1. Name(s), rank and serial number (what they did).
 2. Latent print examiner.
- M. Synopsis.
1. Who, what, when, where and how.
- N. Narrative (title of report: Natural, homicide, suicide or death unknown). All reports will include the following:
1. Who was contacted and information they provided.
 2. Scene as you found it.
 3. Type of structure.
 4. Secure, entry forced?
 5. Lights – on or off and which ones?
 6. Weather conditions.
 7. Victim’s activities just prior to death – can they be determined?
 8. Circumstances surrounding the death – complaining of pain, shortness of breath, vomiting, bleeding, etc.
 9. Accidental fall, electrocution, etc.
 10. Sudden or unexpected.

- O. View and examine the body (if there is any question that the death is other than natural, photograph first).
 - 1. Location – room, bed, floor, open field, in vehicle, etc.
 - 2. Position.
 - 3. Condition – cold, warm, lividity, rigor mortis, cuts, bruises, wounds, etc.
 - 4. Clothing – on or off, describe and include the shoes.
 - 5. Enclosures: To be sent to O.M.E.
 - 6. Medications.
 - 7. Drugs.
- P. Complete O.M.E. report, yellow tag and enclosures with the deceased.

XI. CONCLUSION

- A. Review of performance objectives.
- B. Final questions and answers.
- C. Instructor closing comment(s).