

OHIO FUNERAL
DIRECTORS
ASSOCIATION
MORTUARY
RESPONSE
TEAM
(OFDA-MRT)

RESPONSE PLAN

OFDA

1-800-589-6332

1-614-486-5339

DURING BUSINESS HOURS

This manual may be downloaded at www.OFDAMRT.org

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The following is a list of the current Policy Board members. If you need an activation of the OFDA Mortuary Response Team and you are unable to contact anyone at the OFDA office, contact one of the Policy Board members on this list (starting at the top). The activation will then be handled by that board member.

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OHIO FUNERAL DIRECTORS ASSOCIATION
MORTUARY RESPONSE TEAM
(OFDA-MRT)

INTRODUCTION

The Team can only be activated by the **Coroner or highest ranking official (HRO) with jurisdiction over the incident in** the area in which a disaster occurs. In the event of a request for activation by the federal government, the request must come from an authority within the agency making the request, along with a contract for equipment and/or services detailing the terms of the request. This Team will work under the direction of the HRO and by no means will they overstep their bounds. The Coroner has the ultimate authority of all remains in a mass fatality situation.

The Team has a policy to be used for an actual incident or a mock disaster. This criteria is for the benefit of the Team as well as for the person or agency who is activating the Team. The following pages have a questionnaire, calling procedure, operating procedure and our Team plan. The questionnaire is very important, it will give the Team most of the information it needs to become operational. There are also certain requests we have to participate in a mock disaster. This Team has been trained to assist the Coroner/HRO office in many capacities.

To support this team and its efforts, the OFDA has established a not for profit foundation called the OFDA Mortuary Response Foundation (OFDA-MRF). It is through this foundation that grant monies and other team funds are tracked and recorded. The leadership of the OFDA is also the leadership of the foundation. You may see the abbreviations OFDA-MRT and OFDA-MRF and they can be used interchangeably.

OFDA-MRT

TEAM MAKE-UP

POLICY BOARD - The responsibility of the Policy Board will be to meet with the Officers of OFDA to set policies and to go over different curriculums. They will select members from applications completed by trained funeral service professionals to be trained for specific core group assignments. (ie. Morgue Operations, Family Assistance, Site/recovery or Management Support) All additional team personnel will be cross trained to fill as many personnel needs as possible. They will keep an updated file on all team members in the state. They will maintain relations with other disaster organizations as well as emergency organizations. They will be in charge of conducting seminars to train team members as well as speaking to other groups about our organization. Other responsibilities will be given by the Board of OFDA. The Policy Board will meet a minimum of 6 times a year.

POLICY BOARD CHAIRMAN – This person will be picked by the President of OFDA. This person will also be the direct link between OFDA and the Team. This person will conduct all meetings and have the responsibilities of a committee chair. The chair at a disaster site will work with the team chiefs to supervise the operations and to keep all Officers of OFDA informed. In the event that the chairman is not available, the Vice-Chair will fulfill these duties.

POLICY BOARD VICE-CHAIRMAN- This person will be picked by the Policy Board Chair and Co-Chiefs. It will be the responsibility of this person to carry out any duties assigned to him/her by the Policy Board Chair, and conduct any Policy Board meetings or business in the absence of the Policy Board Chair.

ADMINISTRATIVE OFFICER – This person will be picked by the Policy Board Chair, Vice-Chair, and Co-Chiefs. This person will maintain the team roster including tracking training records and maintaining updated licenses. This person will also take the lead role in forming and maintaining a formal resource list for the OFDA-MRT.

TEAM CO-CHIEFS (3) - The Co-Chiefs will be appointed by the Policy Board. Their job will be to respond to the scene, organize a strategic plan and assign jobs to team members. They will interface with the Management Support Team (MST) to maintain proper documentation of the incident, including, but not limited to finances, logistical needs, team roster and situation reports.

CORE TEAM - Consisting of members selected by the Policy Board, the core team, trained and experienced in disaster related activities will respond, as requested by a Co-Chief, to a scene. The Team shall meet a minimum of two times a year to go over procedures or to put on mock disasters, seminars, etc.

In the event of a mass fatality disaster the following is a line of authority for the Mortuary Team:

1. OFDA President and Executive Director
2. Policy Board Chairman
3. Team Co-Chiefs
4. Section Leaders

OFDA-MRT Mobile Morgue Equipment

The morgue equipment available through OFDA-MRF is available to any county in Ohio and beyond. It is contained in three trailers staged in Columbus, Ohio. The morgue equipment may be used for processing, identification, sanitation, preservation (as authorized) of human remains from a mass fatality incident (MFI). It is a cache of equipment to support the pathology, dental, anthropology, DNA, fingerprinting, X-ray and photography operations in a morgue involved in investigating and determining identification of the victims of an MFI. It also can support site/recovery, Family Assistance Center (FAC) and embalming operations.

When provided a site, the temporary morgue equipment provides the opportunity for constructing individual sections for each operational area. It includes instruments, preparation tables, water and electric service, lighting and personal protection equipment needed by that specific section. An itemized list is maintained to verify that all equipment is on hand before and after an incident. The equipment in the morgue is based on standards set in disaster responses throughout the country. Due to the variety of disaster situations and needs, there may be equipment needed that is unique to a specific disaster that may have to be procured at the time of the disaster.

OFDA-MRT members will deploy to set up the morgue, maintain the morgue equipment and disassemble the morgue upon completion of the operation. Team members will also assist with site/recovery, morgue and FAC operations as requested by the HRO. Forensic staffing for the morgue will be done by the HRO. If needed, assistance in finding staffing can be given by MRT officers.

There are also two “push packs” available in Ohio that serve as first response trailers to any county in Ohio with equipment to assist with site recovery operations. The “push packs” are maintained in Erie and Gallia Counties. They can be requested through the county E.M.A.

When a mass fatality incident occurs, the Mobile Morgue will provide the equipment and non-perishable supplies as a field expedient where it is essential. The Mobile Morgue is designed to supply ample inventory with minimal effort on the part of the requesting person, and to be delivered in a timely and efficient manner. Perishable supplies will be obtained directly from suppliers through prearranged agreement.

Additional morgue equipment is also available from the US Government, Department of Homeland Security, National Disaster Medical System (NDMS), Disaster Mortuary Operational Response Team (DMORT). State EMA officials will need to follow normal protocols for receiving federal assistance to obtain this equipment. Most members of the OFDA-MRT are also members of DMORT and will help facilitate this process.

Photos of the mobile morgue equipment can be found at www.ofdamrt.org/morguephotos

STANDARD OPERATING AND CALLING GUIDLINES

1. Event Occurs
2. Coroner/HRO calls OFDA, Policy Board Chairman (PBC), or a Policy Board member. Contact attempts to get written request to be faxed to OFDA office at (614) 486-5358 OR (800) 507-1465 or e-mail to DISASTER@OFDAMRT.ORG [written request MUST be obtained as soon as practical]
3. Notification is made to OFDA Executive Committee, Executive Director, MRT Policy Board and Team Co-Chiefs.
4. PBC, CO-CHIEFS, and/or local team member communicate with Coroner/HRO. After assessing the situation with the coroner/HRO, PBC will determine OFDA-MRT needs.
5. After assessment, PBC consults with OFDA Executive Committee, Executive Director and Policy Board to activate team.
 - Order of activation:
 1. Remaining PB Members
 2. MST - Respond to OFDA office
 3. Site Recovery Team
 4. Morgue Team – Members will be directed where to respond
 5. Family Assistance Team (if necessary)
6. Coroner/HRO and OFDA make general press release (refer to next page) If PIO is needed, the PB will determine who will assume that role.
7. If OFDA President and/or PBC deems it necessary, OFDA will send an officer to the scene.
8. Local Team Member, as appointed, works with co-chiefs to explain area and responsible parties.
9. TEAM PLAN TAKES EFFECT. Follow Response Plan protocols for all team operations
10. After disaster, critical incident stress debriefing is mandatory.
11. Morgue inventory will be completed prior to reloading and restock needs will be assessed.
12. Each member will complete a critique two weeks following disaster.
13. Team will meet to discuss and review critiques and general operation of response team.

PRESS RELEASE

"The Ohio Funeral Directors Association, at the request of _____, Coroner/HRO of _____ County has been asked to alert the OFDA-MRT. Currently no further information is available. The Ohio Funeral Directors Association will issue a statement as soon as details are available. If you would like to receive the release, please call the OFDA office at 614-486-5339, give them your fax number and a statement will be sent to you."

MEDIA RELATIONS

A. General

NO ONE speaks to the media except the OFDA Headquarter representative or the authorized Public Information Officer (PIO) when requested by the coroner/HRO. NO EXCEPTIONS. IF AND ONLY IF the Coroner/HRO or the authorized media person requests does any member of the mortuary response team speak with the media. If requested by this person to speak with the media, the following guidelines will be observed:

1. One person from the mortuary response team will be designated to deal with the press. This person should be cool under fire, articulate, respected by officials, credible to reporters and low key. This person will speak to the media only when requested or released to do so by the Coroner/HRO. All other press releases will go through the coroner/HRO.
2. Inform the media who the mortuary response team PIO is.
3. Inform the entire team who the PIO is, and ask that all questions be directed to that person.
4. When asked to accompany a media person, be prepared with the information they need, and be certain it is correct. Only comment in your area of expertise.
5. Do not give ill-formed, spur of the moment interviews.
6. Do not feel compelled to answer every question asked of you. Do not speculate. Do not lie.
7. Do not go before a camera, and talk to a reporter without first giving careful thought to what you will say and how you will say it.
8. OFDA will make every effort prepare a written press release for team members to submit to local/hometown papers after the incident.

Above all remember, NO ONE speaks to the media except the PIO unless authorized to do so by the Coroner/HRO. NO EXCEPTIONS.

**OHIO FUNERAL DIRECTORS ASSOCIATION
STATE EMERGENCY OPERATIONS PLAN
MORTUARY**

PURPOSE

A trained and certified mortuary response team is formed to aid those who are in charge of human remains. The team is comprised of trained coordinators, and will be available to provide support in disaster recovery, family assistance and identification of remains, as well as, if requested, aid in notifying families of deceased victims. They shall prepare and file death certificates and facilitate ways for preparing, processing, and releasing dead human remains to the next of kin under emergency conditions.

ORGANIZATION

For those operating under this plan, the person(s) responsible for state wide notification and/or coordination of mortuary activities will be OFDA Disaster Policy Board Chairman (see phone list inside cover for additional numbers), OFDA Office (1-800-589-6332 during business hours). For the most current list of Policy Board phone numbers refer to the phone number list on the team website at www.ofdamrt.org.

LOCAL

By law, the County Coroner is responsible for the dead as stated in ORC . OFDA Mortuary Response Team members, and other local funeral service personnel when activated, will be available to assist under the direction of the County Coroner/HRO.

CONCEPT OF OPERATION

When disaster conditions permit, and an estimate can be made of the dead, temporary morgue sites will be established. Remains will be recovered and evacuated to the temporary morgues for identification purposes and safeguarding of personal effects found on the dead. When authorized by officials and the family, the mortuary response team shall prepare, process and release the remains for final disposition.

DIRECTION AND CONTROL

When a disaster occurs, the Coroner/HRO, should immediately contact the OFDA through its offices or through the MRT Policy Board Chairman or other MRT Policy Board member (see phone list). They, in turn, will notify the appropriate members of OFDA, including the Executive Director and Executive Committee, team Co-Chiefs and Policy Board members. OFDA representatives including the Executive Director, Executive Committee and the MRT Policy Board Chair, shall act as dispatchers to activate the team in response to the request of the Coroner/HRO in charge of the disaster situation.

The chairman and appointed others will take charge of the situation as it relates to the mortuary response team's specific designated assignments.

INITIAL RECOVERY & OPERATIONS GUIDELINES

Local team member assists with initial procurement of hotel rooms, food service, funeral home assistance, etc.

At this time the PB will coordinate with the coroner where the morgue will be set up and begin taking steps to get the mobile morgue to the scene.

1 or 2 PB members will respond to OFDA office to work with the MST and continue personnel call ups and begin supply procurement.

Request a copy of the county resource list.

Make a request for security at morgue site and FAC.

Make request to Coroner/HRO for refrigerated trucks if needed.

Start to procure vehicles for transportation of remains to morgue.

Discuss the need for other forensic specialists with the coroner. Request MST to begin calling in specialists as directed by the coroner.

- ◆ None of the remains shall be moved or touched by workers until direction and approval has been given by the Coroner/HRO.
- ◆ Operations will be coordinated by the Coroner/HRO and, where designated, the mortuary response team's qualified coordinator.
- ◆ A survey and assessment of the situation will be made by the Coroner/HRO and, where requested, the mortuary response team coordinator. They will note the approximate number of dead, condition of the remains, environmental conditions, and type of terrain, and will identify equipment, personnel and supplies needed to implement an effective plan.
- ◆ Once workers have reported to the staging area, a briefing will be held, assignments will be given, and, if appropriate, workers will be divided into teams.
- ◆ Photos or a sketch will be made of the disaster site. If applicable, the scene will be divided into sections, with the recovery teams assigned to a particular section.
- ◆ Suitable stakes or markings will be placed at the location of each body, and a number will be assigned to each body or collection of body parts as directed by the Coroner/HRO or his designated appointee.
- ◆ Remains, regardless of size, will be tagged and records kept as to the location and/or surroundings in which the remains were found.

All personal effects found on the body will be removed in the morgue, placed in a container, tagged with corresponding numbers and data reflecting the location and/or surroundings, and secured.

INITIAL RECOVERY & OPERATIONS GUIDELINES CONTINUED

- ◆ Unattached personal effects will be placed in a container and tagged with a unique number and data reflecting the location and/or surroundings, and secured.
- ◆ When practical, remains will be containerized and tagged with a unique number on each container.
- ◆ Valuables, such as wallets or jewelry, that are attached to the body shall not be removed.
- ◆ Remains may then be removed, as authorized, from their initial discovery site to a staging area for transporting to a temporary morgue site. This initial movement may require litters, stretchers, or other specialized removal equipment.
- ◆ The mortuary response team shall provide or acquire the key services requested by the Coroner/HRO and shall call upon a support group of funeral service personnel.

BIOLOGICAL-CHEMICAL RESPONSE

GENERAL

The OFDA-MRT will respond to any request for assistance from a Coroner or highest ranking official (HRO) with jurisdiction over the incident in the county in which a disaster occurs.

When the incident involves Biological or Chemical Agents the incident automatically is reported to the Federal Government and typically becomes a federal response under FBI jurisdiction. The Federal Disaster Mortuary Operational Response Team (DMORT) has a specialized unit whose function is the decontamination of human remains for the ultimate purpose of returning these remains to family members where possible for humanitarian and legal reasons. This team is known as DMORT-WMD.

The DMORT-WMD Team is under the control of DHS/NDMS and adheres to protocols as specified in the Incident Command System. They will adhere to the recommendations of the coroner but will not compromise the safety of deployed personnel.

Because of the specialized training and equipment necessary for responding to the contaminated areas, or “Hot” zones, and because a trained team is already in place with protocols established, the OFDA-MRT will be limited to activities that would occur in the “Cold” or non-contaminated areas to include:

- The Family Assistance Center (FAC)
- Management Support (MST)
- Transportation of decontaminated Remains
- Documentation preparation
- And any other “Cold Area” activities normally prescribed in the MRT Plan

Further information about the DMORT-WMD as well as the protocols and contact information may be gathered at www.dmort-wmd.org.

Another agency that is trained in Biological and Chemical Response is the Chemical Biological Incident Response Force or CBIRF and they can be contacted at www.cbirf.usmc.mil. Their mission is as follows: When directed, forward-deploy and or respond to a credible threat of a Chemical, Biological, Radiological, Nuclear, or High Yield explosive (CBRNE) incident in order to assist local, state, or federal agencies and Unified Combat Commanders in the conduct of consequence management operations by providing capabilities for agent detection and identification; casualty search, rescue, and personnel decontamination; and emergency medical care and stabilization of contaminated personnel.

OPERATIONAL GUIDELINES FOR EVACUATION TO MORGUE

- ◆ Evacuation operations from the disaster site or staging area will be coordinated by the Coroner/HRO and, where designated, the disaster response team coordinator shall assist.
- ◆ A survey and assessment of the situation will be made by Coroner/HRO and, perhaps, PBC or designated person.
- ◆ Before operations begin, a briefing will be held, assignments and directions given.
- ◆ **The transfer of remains to the temporary morgue shall be handled discreetly, with sensitive care of the human body, and wherever possible, "professional" vehicles should be used.**
- ◆ All names on vehicles used for transport will be removed (or covered).
- ◆ Vehicles should travel the same route from the handling site to the morgue area. This route will be established in coordination with the local traffic control agency(s).
- ◆ Vehicles are to travel at a moderate speed, in convoy style, with escort, if necessary, maintaining order and dignity.
- ◆ Records will be kept at the staging area as to the identification of the vehicle and its driver, as well as the tag number of the deceased being transported.
- ◆ Transportation officer shall maintain an appropriate flow of remains to the morgue site so as to not exceed the receiving capacity.
- ◆ The mortuary response team shall provide or acquire the key services requested by the Coroner/HRO and shall call upon a support group of funeral service personnel.

TEMPORARY MORGUE SITE

- ◆ A morgue site is to be selected, organized, and put into operation if the number of dead exceeds the resources of the coroner's office. The Coroner/HRO may ask the MRT Liaison at the impacted site to select the location of the temporary morgue site if they personally cannot do this.
- ◆ The temporary morgue should be located as near as possible to areas with heavy death toll and should have: showers, hot and cold water, heat, electricity, drainage, ventilation, restrooms, parking areas, communication possibilities, and rest areas. It should be fenced or locked for security of remains and personal property. It should be removed from public view and have sufficient space for remains identification procedures. It should also be subject to partitioning for separation of functions such as handling remains, x-ray, autopsy, records maintenance, etc.
- ◆ Potential, temporary morgue sites are existing mortuaries, cemeteries, National Guard armories, airport hangers, state garages or other options without wooden floors. After morgue sites are established, coordinators should obtain refrigerated trailers as necessary. The trailers can be moved to whatever location is desired by the coroner. If refrigerated trailers are not available, the coroner can arrange for railroad refrigeration cars, vans or cold storage to aid in the preservation of remains. The functions carried out at each morgue site will be determined by the circumstances. Under no circumstances should a school be used.
- ◆ Once a morgue site has been selected, the Coroner/HRO or the designated mortuary response team Co-Chief will organize its operations and assign personnel to all active morgue sections as appropriate.
- ◆ The morgue site may be used for the temporary housing, identification, sanitation, preservation (as authorized) as well as the distribution point for release of the dead to their next of kin or their agent.
- ◆ Refrigeration units will be utilized as necessary.
- ◆ Deceased human remains received at the morgue will attempt to be identified and all helpful information shall be recorded for each remains in the Victim Identification Program (VIP).
- ◆ Personal effects will be received, photographed, recorded and secured.
- ◆ Should embalming be directed by the Coroner/HRO or approved by a family representative, the Coroner/HRO may rely on the mortuary response team to organize the operations, equipment, supplies and personnel needed.

FAMILY ASSISTANCE CENTER

One component of the MRT is the Family Assistance Center. There are several purposes of this component.

1. Set up a Family Assistance Center at a suitable location convenient to the site but removed from the mainstream of activities. Organize a staff of trained funeral service professionals who will assist the appropriate agencies in dealing with the families.
2. Secure information directly from the survivors or their designated agents. This information shall be used to assist in the identification of the remains. A comprehensive VIP interview form (see appendix A) shall be completed by a Team Member and family. This information shall come directly from the family, their agent or from a local Law Enforcement Agency and not from the receiving funeral director.
3. They shall prepare all necessary paperwork for the final distribution of the remains, maintain all records and develop files for each victim.
4. They shall coordinate the return of the remains to the funeral director that has been chosen by the family.

The Family Assistance Center shall fall directly under the responsibility of the Team Co-Chief or his designate. Due to the sensitive nature of the work being done, only selected individuals shall have access to this area. Proper decorum shall be dictated by each operation but it shall be the Co-Chiefs responsibility to have this established. A suggested location would be a hotel with meeting rooms large enough to accommodate the number of people who would be involved given the size of the operation.

Of utmost concern, is to provide every consideration towards the victims family. It shall be the responsibility of the Coroner/HRO to keep the family aware of any updates regarding the victims (details that have been approved for release). The center shall also be responsible to maintain a current log of how to reach each family and their location.

RETURN TO FAMILY MEMBERS

Once the remains have been positively identified, the next of kin will be contacted. The Coroner/HRO or, at the direction of the Coroner/HRO, the mortuary response team will coordinate the release of the remains and personal effects to the next of kin or their representative.

In situations where there are unidentified remains, the Coroner/HRO shall make the decision and provide direction regarding their disposition.

Where embalming or preparation is authorized to be accomplished, the procedure will be under the direction of the team Co-Chief.

GENERAL MASS BURIAL GUIDELINES

(To be used ONLY under the direct order of the Coroner/HRO)

- ◆ Mass burial may become necessary when the number of remains cannot be managed and become a public health concern, or when remains cannot be adequately refrigerated or embalmed, identified or processed in an acceptable time.
- ◆ Such an effort could be initiated for the public health, safety and welfare.
- ◆ The location of any mass burial site must also be decided upon by the Coroner/HRO, taking into consideration the number of remains to be buried, distance and transportation considerations. An existing cemetery would be the ideal and most logical location for any mass burial.
- ◆ The next consideration should be given to federal, state, county, or city owned property or right-of-ways, such as: parks and recreational areas, flood control basins, sides of freeways and river beds, beneath high power lines or rail yards or along rail lines.
- ◆ Alternate consideration can be given to private property, preferably large open fields or similar sites. Access and egress are also important factors along with the type of terrain and the understanding that later exhumations may occur. These exhumations may be ordered in an attempt to identify and return remains to families.

Process for mass burial by mortuary personnel - Those remains designated for mass burial should be processed to ensure the following:

- remains rechecked for any type of jewelry or other items that may lead to identity
- postmortem information has been properly documented, as available, especially in those areas of scars, tattoos, deformities and other physical descriptions
- fingerprints have been taken, if not, fingers rechecked for possible prints to be taken
- an additional body tag (preferably metal), should be attached, properly filled out and placed into a small, sealed plastic bag and placed in the pouch
- a second additional tag attached to the pouch containing the morgue reference number or name with social security number
- if possible, remains should be placed in a wooden or metal container for burial: that container should also be marked with corresponding reference numbers and/or name
- exact location of each burial should be recorded on grid maps including dates, times and other information necessary for possible exhumations at a later time.
- each burial site also may be marked (staked) with the correct corresponding morgue reference number and/or name.

GUIDELINES

If possible, all mass burials will be under the direction of the Coroner/HRO.

However, even where widespread devastation has occurred, mass burial of the dead should be done only as a last resort.

In the case of thousands of unidentified dead, if anyone is directed to bury a dead human body, then the following records should attempt to be made and a report of this activity given to the Coroner/HRO. If the proper forms are not available, a blank piece of paper could be used to list the information below:

- ◆ Morgue number, sex, race, age, height, weight, hair color, eye color, scars, tattoos, teeth (natural, false, or both), missing or artificial limbs.
- ◆ Date of death and/or date of recovery.
- ◆ List all details about clothing: size, color, manufacturer, etc.
- ◆ List all items found in pockets.
- ◆ Ink fingers and take fingerprints.
- ◆ Site of recovery, county of death, place and date of burial.
- ◆ Print burial team leader's name, address, phone number, and social security number on the form and sign it.
- ◆ Attach a tag or a piece of tape on the body and write burial team leader's social security number on it.
- ◆ If mass burial occurs, follow these guidelines: dig grave minimum 36" deep; make sure the burial team leader's social security number is on the body; record exact location of grave on identification form you have made (so grave can be found later); place in appropriate container or wrap body in plastic, tarpaulin, or heavy blankets or mark grave with a homemade cross and write on cross "DEAD HUMAN BODY", and the burial team leader's social security number. (The burial team leader's social security number is being requested so they can be contacted later if necessary.)
- ◆ Turn in the information you have recorded to the Coroner/HRO.

UNIDENTIFIABLE REMAINS AND/OR COMMON TISSUE

Disposition of unidentifiable remains and/or tissue is the responsibility of the Coroner/HRO. (State or local laws may generally predetermine the disposition of the remains/tissue.) Such remains and/or tissue released to the mortuary response team for disposition should follow these prescribed guidelines:

1. Under no circumstances should unidentified or unassociated remains or tissue be commingled with identified remains.
2. Remains should be prepared by applicable standard preparation procedures, as determined by the Coroner/HRO.
3. Interment in a local cemetery should be the preferred choice. Cremation should be avoided for religious reasons and availability for identification at later date.
4. Religious considerations should be observed. Non-denominational rites should be held at the site of interment.
5. Records and procedures for interment should follow the guidelines as set forth in the mass burial section.

TEMPORARY STORAGE VS. BURIAL

Temporary storage of remains or tissue may be the choice rather than immediate burial. Consideration in the decision would include: time between death and the identification and return of the remains to the family, possibility of identification, and inability to locate or determine the next of kin; and legal considerations. The choice is the responsibility of the Coroner/HRO. If the decision is temporary storage, remains should be released to the mortuary response team for preparation. Preparation should be done by standard preparation procedures, pouched and/or casketed, then returned to the Coroner/HRO for storage. Records and procedures for storage should follow the guidelines as set forth in the mass burial section.

REMAINS NOT RECOVERED

Conditions and circumstances sometimes preclude the recovery of remains in spite of exhaustive efforts and resources expended by those involved. Once the determination has been made that one or more remains are unrecoverable, non-denominational memorial services should be arranged. All efforts should be made to notify and include the surviving family members in this service. Assistance in post-death activities should be extended to the surviving family members

PREPARATION GUIDELINES

A. General

All examinations must be completed and a release form signed by the Coroner/HRO where any embalming/preparation takes place. At the completion of the identification process and with the proper forms, the remains shall be moved to the embalming area and a notation to this effect should be entered on the master chart. The embalming/preparation of the remains should be carried out under the direction of the mortuary response team Co-Chief. If possible, the wishes of the next of kin and religious considerations should be observed. All remains should be treated as a contagious disease case. Embalming reports should be completed on each remains and forwarded to mortuary response team administrative personnel. The classification and method of embalming procedures should be determined by the embalming team and a Co-Chief. All remains within the same classification should be prepared in a like manner.

Remains should be classified in one of the following categories:

1. Current - Remains received in a non-decomposed state, and may be viewable or non-viewable.
2. Flesh-covered - Remains received in a state of decomposition but with no bones exposed.
3. Semi-skeletal - Remains received with some flesh on the bones.
4. Skeletal - Remains received with no flesh on the bones. These conditions will be noted on the embalming report for each remain processed.

PERSONAL EFFECTS & PROPERTY DISPOSITION

A. Procedures

1. Recovery of personal effects and property should be handled by search and recovery personnel concurrently with recovery of remains.
2. Careful collection and location plotting of personal effects found at a disaster site is critical to preserving clues of ownership. For example, property found on remains (wallets, jewelry, etc.) must stay with the recovered remains. When property is found close to remains, it must be tagged to identify its location in relationship to the remains. Photographs of personal effects should be taken prior to removal from the site.
3. Items should be placed in clear plastic bags for easier identification; wet items should be placed in paper bags. An identification (recovery) number should be placed on each bag as well as the item.
4. A special secure area (hanger, etc.) is needed for processing unidentified (as to ownership) personal effects; special security is required.
5. When recording items, use basic descriptions, do not assume. A ring should be described as "yellow in color with clear stone", not "gold band with diamond."
6. If possible, all identified personal effects should be released to the next of kin or their representative. A receipt listing all items released to the next of kin should be signed by the next of kin. All unidentified personal effects should remain under the control of the Coroner/HRO.
7. The local district attorney or state attorney general is a source of advice and legal interpretation on issues relating to the disposition of personal effects and property.

PERSONNEL

Potential Personnel Needed in a Mass Fatality Incident:

Qualified disaster coordinators	Recovery personnel
Evacuation personnel	Funeral Directors
Embalmers	Interviewers
Data Entry Clerks	Odontologists
Secretaries	Law Enforcement
Anthropologist	Pathologist
X-ray Techs	Fingerprint Specialist
Evidence Specialist	Photographer
CISD Personnel	Counselors
Logistics Support Personnel	Surveyors

CRITICAL INCIDENT STRESS DEBRIEFING

One of the problems that arises during and following a multi-death disaster is the relationship between those people who are called upon to be disaster workers and the nature of the work they must do. Since funeral directors deal with death on a routine basis, it is often believed that they should be able to handle the disaster /death situation without much difficulty. This is not necessarily the case since funeral directors are accustomed to dealing with only one or a few deaths at a time in familiar surroundings.

Recognizing the effects of stress among disaster workers, the state funeral directors association will aid in coordinating their debriefing needs. It should be mandatory that all Disaster Response Team members attend a debriefing session before leaving the disaster scene.

APPENDIX

FORMS

OFDA-MRT Equipment/Personnel Request Form

(Please print or type when completing this form)
this form available at www.ofdamrt.org/forms

Date of Request: _____

Requesting Agency: _____

Name of Highest Ranking Official (HRO): _____
Print Name

Title/Position of HRO: _____

Location of Incident: _____
City, County and State

Request for: _____ Personnel _____ Equipment _____ Both

Location of command center: _____

Phone Number of Requesting Agent: (_____) _____ - _____

Cell Phone Number: (_____) _____ - _____

Other pertinent information:

Signature of HRO: _____

.....
FOR OFDA OFFICIAL USE

Approval for deployment given by: _____

Time of approval: _____ Date of Approval: _____

MOCK DISASTER REQUEST FORM

(Please submit request as early as 4-6 months prior to drill to allow sufficient time for planning)

this form available at www.ofdamrt.org/forms

1. DATE AND TIME OF EXERCISE _____
2. LOCATION OF COMMAND POST (WE REQUEST ONE OF OUR REPRESENTATIVES BE PRESENT TO OBSERVE THE OPERATION) _____
3. WHO IS IN CHARGE OF THE TOTAL OPERATION _____
4. DATE AND TIME OF ORGANIZATIONAL MEETINGS AND WHO IS EXPECTED TO ATTEND _____
5. HOW MANY RESPONDERS DO YOU WANT PRESENT _____
6. HOW MANY FATALITIES ARE EXPECTED _____
7. HOW MANY FATALITIES CAN THE CORONER'S OFFICE HANDLE _____
IF USING A NEIGHBORING COUNTY'S FACILITIES, ARE THEY AVAILABLE FOR THIS INCIDENT? Yes____ No____
8. HOW MANY STAFF PEOPLE DOES THE CORONER'S OFFICE HAVE _____
9. WHAT TYPE OF SERVICES ARE EXPECTED OF US? _____
10. WHAT TYPE OF EQUIPMENT, INSTRUMENTS AND SUPPLIES ARE NEEDED? _____
11. WHAT TYPE OF FACILITIES ARE AVAILABLE FOR A TEMPORARY MORGUE? _____

OHIO FUNERAL DIRECTORS MORTUARY RESPONSE TEAM QUESTIONNAIRE
this form available at www.ofdamrt.org/forms

PLEASE ALLOW 3 TO 8 HOURS TO FULLY MOBILIZE THE TEAM

1. WHAT TYPE OF DISASTER _____
2. LOCATION OF DISASTER (CITY & COUNTY & DIRECTIONS) _____

3. DATE & TIME OF INCIDENT _____
4. NUMBER OF FATALITIES _____
5. HOW MANY FATALITIES CAN THE CORONER'S OFFICE HANDLE _____
a. IF USING A NEIGHBORING COUNTY'S FACILITIES,
ARE THEY AVAILABLE FOR THIS INCIDENT? Yes _____ No _____
6. HOW MANY STAFF PEOPLE DOES THE CORONER'S OFFICE HAVE _____
7. WHAT TYPE OF SERVICES ARE EXPECTED OF US _____

8. WHAT TYPE OF EQUIPMENT, INSTRUMENTS AND SUPPLIES ARE NEEDED

9. WHAT TYPE OF FACILITIES ARE AVAILABLE FOR A TEMPORARY MORGUE

**(THIS FORM MUST ACCOMPANY THE OFDA-MRT
EQUIPMENT/PERSONNEL REQUEST FORM)**

VIP Personal Information

Page 1 of 8

Name _____ / _____ / _____ Gender Male Female
Last First Middle Maiden/Birth name _____

Address _____ Phone (H) _____

City _____ State _____ Zip _____ Phone (W) _____

Res County _____ Res Country _____ Phone (O) _____

Live Inside City Limits Yes No Race: African American Hispanic Asian/Pacific Islander
 Caucasian Native American Other _____

Social Security # / Other _____ Date of Birth _____ Age _____
(MM/DD/YYYY)

Citizenship (1 or more) _____ Highest Education Level:

Naturalization Card Yes No Religion _____ Elem/Second (0-12): _____

College (1-5+): _____

Birth Hospital _____ Birth City _____ State/Country _____

Alias 1 _____ 2 _____
Last First Middle Last First Middle

Group Status: Traveling Alone Group such as family, company, sports team or school

Group Type: _____ Fam/Grp Name: _____

If family group, please list other family members below:

Related to _____

Marital Status Married Never Married Widowed Divorced Separated Unknown Wedding Date _____
(MM/DD/YYYY)

Spouse _____ Living Deceased Unknown
Last Maiden/Birth name First Middle

Father _____ Living Deceased Unknown
Last First Middle

Mother _____ Living Deceased Unknown
Last Maiden/Birth name First Middle

Legal Next of Kin _____ Phone _____
Last First Middle

Address: _____ On Site Phone _____
City _____ State _____ Zip _____

Relationship: Wife Father Brother Son Employer Other _____
 Husband Mother Sister Daughter Friend

Informant 1: Name _____
Last First

Address _____ Phone _____

City _____ State _____ Zip _____ On Site Phone _____

Relationship Wife Father Brother Son Employer Other
 Husband Mother Sister Daughter Friend

Please place other here

Informant 2: Name _____
Last First

Address _____ Phone _____

City _____ State _____ Zip _____ On Site Phone _____

Relationship Wife Father Brother Son Employer Other
 Husband Mother Sister Daughter Friend

Please place other relationship here

Coroner/ME/Lead Agency _____

Incident Location _____ Incident Name _____

VIP Personal Information

Page 2 of 8

Name _____ / _____ / _____
Last First Middle

Male
 Female

Dentist Name _____

Address _____

City _____ **State** _____ **Zip** _____

Phone _____

- | | |
|--|---|
| <input type="checkbox"/> Extensive Dental Work | <input type="checkbox"/> Most/all teeth |
| <input type="checkbox"/> Lower dentures | <input type="checkbox"/> Dental Films |
| <input type="checkbox"/> Upper dentures | <input type="checkbox"/> Bridge |
| <input type="checkbox"/> Upper & Lower | <input type="checkbox"/> Other |
| <input type="checkbox"/> Partial Plate | |
| <input type="checkbox"/> Braces | |
| <input type="checkbox"/> No teeth | |

Dentist 2 _____

Address _____

City _____ **State** _____ **Zip** _____

Phone _____

Medical Radiographs? Physician(s) _____

Yes
 No

Address _____

Medical Radiographs Location

Potential Type of Radiographs - and dates taken if known

Objects in Body: Pacemaker Steel plate Shrapnel
 Bullets Needles Other

Old Fractures: Description: _____ Please place other objects here _____
 Yes No

Surgery Gall Bladder Laparotomy Breast Implants
 Appendectomy Caesarean Open heart
 Tracheotomy Mastectomy Other

_____ Please place other surgery here

Unique Characteristics Description of: Scars, Operations, birthmarks, burns, missing organs, amputations, other special characteristics

Yes No

Prosthetic

Prosthetic Location/Description

Yes _____
 No _____

Prints on File: Prints Located

Yes No

Fingerprints _____
 Footprints _____

Employer & Address Please list last employer if retired - Information on additional employers should be placed on page 6

Type of Business _____

Occupation _____

VIP Personal Information

Page 3 of 8

Name _____ / _____ / _____
Last First Middle

Male
 Female

Height inches Less than 24 24-36" 37-48" 49-60" 61-72" 73-84" 85-96" Over 96"

Weight in Pounds less than 10 11-20 21-40 41-60 61-80 81-100 101-120 121-140 141-160 161-180 181-200 201-220 221-240 241-260 261-280 281-300 Greater than 300

Eye Blue Green Grey Brown Hazel
Eye Missing R Glass R Cataract R Blind R
Status Missing L Glass L Cataract L Blind L

Optical Glasses Contacts None
Description _____

Hair Color Auburn Brown Gray Salt & Pepper Other
 Blonde Black Red White _____
Please place other here

Hair Colored Yes No Unknown Color _____ Hair Style _____

Hair Accessory Wig Toupee Hair Piece Hair Transplant

Hair Length Short 1-3" Medium 4-8" Long 8-12" Very Long 12-24" Over 24" Bald

Hair Description _____

Facial Hair Color Blonde Brown Black Gray Red Salt & Pepper White N/Applicable

Facial Hair Type Beard Beard & Moustache Moustache Clean Shaven Goatee N/Applicable

Facial Hair Style Fu Manchu Mutton Chops
 Handle Bar Pencil Thin Upper Lip
 Whiskers Under Lower Lip Full Upper Lip

Facial Hair Notes _____

Ear Lobes Attached Unattached Unknown Circumcision Yes No Unknown NA

Fingernail Type Natural Artificial Unknown Length Extremely Long Long Medium Short

Fingernail Color _____ Fingernail Characteristics Bites Mishapen Decorated Stained

Description _____

Toenail Color _____ Toenail Characteristics Bites Mishapen Decorated Stained

Toenail description _____

Complexion: Light Medium Dark Acne Tanned Olive Ruddy

Tan Mark Description _____

Tattoo(s) Yes No Description/ Body Location _____

Can family draw a picture?

Tattoo Yes Unknown No Tattoo
Photos No NA Photo Location _____

Body Piercing(s)? Yes No

Body Piercing Location(s) _____

Body Piercing Description _____

VIP Personal Information

Page 6 of 8

Name _____ / _____ / _____
Last First Middle

Male
 Female

Wallet: Description _____

Contents _____

Purse: Description _____

Contents _____

Other Personal Effects

Ever in Armed Forces? Yes No Unknown Military Branch _____

Military Service Number _____ Nation Served _____

Approximate Service Date _____

Additional Data

VIP Personal Information

Page 7 of 8

Name _____ / _____ / _____
Last First Middle

SS# _____
 Male Female

Potential Living Biological Donors

Mother/Father of Missing Individual

Consent Form

Name	Age	Address	Phone	DNA Collected	Signed
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Brother and Sisters of Missing Individual

Name	Age	Address	Phone	DNA Collected	Signed
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Spouse of Missing Individual

Name	Age	Address	Phone	DNA Collected	Signed
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Children of Missing Individual

Name	Age	Address	Phone	DNA Collected	Signed
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
				<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Primary donor for Nuclear DNA Analysis

An “appropriate family member” for **nuclear DNA Analysis** is someone that is biologically related to and only one generation removed from the deceased. The following are the family members who are appropriate donors to provide reference specimens, and in the order of preference (family members highlighted in bold print are the most desirable):

1. Natural (Biological) **Mother and Father**, OR
2. **Spouse** and Natural (Biological) **Children**, OR
3. A Natural (Biological) Mother or Father and victim’s biological children, OR
4. Multiple Full Siblings of the Victim (i.e., children from the same Mother and Father)

VIP Personal Information

Page 8 of 8

Name _____ / _____ / _____
Last First Middle

Interview Location _____ Interview Date _____ Interview Time _____
(MM/DD/YYYY)

Interviewer Info:

Interviewer Name _____
First Last

Interviewing Organization _____

Interviewer Home Information

Interviewer Address _____
Street, City State, Zip

Interviewer home phone _____

Interviewer cell phone _____

interviewer work phone _____

Interviewer On-Site Information

interviewer onsite address _____
Street, Hotel, Room #

interviewer onsite phone _____

interviewer onsite cell _____

Reviewer Info:

Reviewer Name _____

Reviewer Signature _____

Reviewing agency _____

Coroner/ME/Lead Agency _____

Incident Location _____ Incident Name _____

VIP/DMORT Program

Requested Records List

Victim Last/First/Middle _____

Case # _____

Informant LAsT/First/Middle _____

Address _____

Informant phone _____

On Site Phone _____

Dental

Type	Location	Contact	Phone	Date Ord	Date Rec

Prints

Radiographs

Medical Records

Photo Requests

Requested Records Notes
