1 Receipt of postmortem specimens

1.1 This task should be performed reasonably soon after a batch of samples arrives in the laboratory. The assigned Criminalist will report to the postmortem (PM) processing supervisor, and perform any and all tasks related to PM processing.

1.2 Specimens from all five boroughs are delivered to the laboratory in sealed red plastic containers. The LIMS system will automatically update the PM bin’s chain of custody once the PM bin’s custody has transferred from the Evidence Unit to the Forensic Biology Personnel.

   1.2.1 Note: if samples arrive late in the day, inventory red bins (Step 1.3) and store samples in a refrigerator. Samples will be processed the next day.

1.3 To inventory the contents of the red plastic containers proceed with the following:

   1.3.1 Inventory each container separately. (Check for completeness and record any discrepancies. Report any discrepancies to the PM supervisor.)

   1.3.2 Compare the plastic tags with serial numbers to the serial numbers written on the chain of custody.

   1.3.3 The person on the rotation must record the chain of custody.

   1.3.4 Scan the included chain of custody to a PDF document, and incorporate into the LIMS system. The original is given back to the Evidence Unit.

   1.3.5 Scan the manifest to a PDF document, and incorporate into the LIMS system. Discard the original in a red biohazard waste container.

   1.3.6 Sort the manifests by borough and set aside.

1.4 For discrepancies or problems with the inventory, refer to “Troubleshooting” and proceed as specified.

1.5 Fill out the PM documentation for each bin. The LIMS system will automatically create the chain of custody for each sample, and record the packaging and processing as the analyst unpacks the postmortem evidence and exemplar samples.

1.6 Ensure that the PM items all have barcode labels and are stored in an appropriate container (See Table 1).
1.6.1 If items are not packaged properly, repackage according to the table below. Seal the package with Evidence Tape or using a heat-sealer for the 4x6” KAPAK™ bag, except where indicated. Initial and date all seals. Note: the evidence tape should not obscure the ME # on the barcode label.

**Table 1**

<table>
<thead>
<tr>
<th>Sample</th>
<th>Packaging</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bloodstain cards</td>
<td>4x6” KAPAK™ bag (seal KAPAK bag)</td>
</tr>
<tr>
<td>Hair, Nails, Trace Evidence*</td>
<td>Coin envelopes placed into 4x6” KAPAK™ bag (do not seal KAPAK bag)</td>
</tr>
<tr>
<td>Oral, vaginal, anal, penile, and bladder swabs*</td>
<td>Coin envelopes placed into 4x6” KAPAK™ bag (do not seal KAPAK bag)</td>
</tr>
<tr>
<td>Bone</td>
<td>Plastic specimen container</td>
</tr>
<tr>
<td>Muscle or soft tissue</td>
<td>Plastic specimen container or 15 ml Falcon tube</td>
</tr>
</tbody>
</table>

* Store samples from the same ME # in the same KAPAK bag. Do not seal the bag.

1.7 Once inventoried and processed, store samples in the appropriate storage area (See Table 2).

**Table 2**

<table>
<thead>
<tr>
<th>Room Temperature (20°C)</th>
<th>Refrigerator (4°C)</th>
<th>Freezer (-20°C)</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Bloodstain cards</td>
<td>- Oral, vaginal, anal, penile, and bladder swabs</td>
<td>- Bone</td>
</tr>
<tr>
<td>- Fingernails</td>
<td>- SAK</td>
<td>- Muscle or Soft Tissue</td>
</tr>
<tr>
<td>- Hair</td>
<td>- Samples in RNAlater®</td>
<td>- Product of conception (POC)</td>
</tr>
<tr>
<td>- Other Trace Evidence</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1.8 Spray the inside of the red bins with disinfectant and let air dry. Set the red containers aside in the designated area for pick up.

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2 Postmortem bloodstain processing (non-vouchered bloods)

2.1 Make the ME barcode labels for the bloodstain cards using the LIMS system. Wear gloves when handling the bloodstain cards. Handwrite the ME # if unable to generate labels. Initial each bloodstain card prepared.

2.2 The preparer of the bloodstain cards must initial and date each card.

2.3 The setup of the bloods and bloodstain cards must be witnessed by another laboratory staff member. That person must confirm that the order of the blood vials in the rack match the order of the prepared bloodstain cards. The witness will record the witnessing setup in the documentation.

2.4 The bloodstain cards should have the following information prior to processing:
   2.4.1 ME case number (on affixed label or handwritten)
   2.4.2 Initials of the person preparing the stain
   2.4.3 Date the stain card was prepared
   2.4.4 LIMS’ stain card ID

2.5 Prepare stains one at a time. Staining of the cards and the opening of liquid blood samples MUST be performed under a biological safety hood with the exhaust fan operating. A new lint free wipe should be used to open each vial stopper. Make sure the blood vial is closed before preparing the next bloodstain card.

2.6 Use a transfer pipette to make four stains for each bloodstain card, filling in the four circles on each card with blood.

2.7 Re-cap non-vouchered PM blood vials and discard in the plastic biohazard “sharps” container.

2.8 Allow the bloodstain cards to dry overnight in the hood with the exhaust fan running. Document that the stain cards are being stored in the hood.

2.9 Package the air-dried stains into a 4x6” KAPAK™ bag. Seal the bag with evidence tape or using a heat sealer. Initial and date the seal.

2.10 Organize the bloodstain cards by borough and in ME # order. Add the cards to the appropriate yellow borough bin located on the bench where they are temporarily stored until a supervisor has had a chance to review the cards. Document the cards’ new storage location.

2.11 Bloodstain cards of ME cases that have been assigned FB #'s by a supervisor will be labeled with the FB # and transferred to the red bin on the bench. Cards of ME cases that will not be assigned an FB # are transferred to the blue borough bins. The transfer of cards reviewed by the supervisor...
are placed to their appropriate long-term storage locations by the assigned Criminalist III on PM Processing:

2.11.1 Cards with FB #'s are stored numerically by FB # in the designated bloodstain card box.

2.11.2 Cards without FB # are stored numerically by borough and ME # in the designated bloodstain card box.

2.12 The electronic chain of custody will document the transfer between storage locations and Criminalists.

2.13 CLEAN THE BIOLOGICAL SAFETY CABINET (refer to Quality Control Procedure #QC125 in the Quality Assurance/Quality Control Manual).

3 Assignment of case numbers

3.1 This task should be performed by the PM supervisor or trained supervisor.

3.2 Gather all appropriate documentation. The daily case census sheets are available electronically through the CMS system.

3.3 Compare each autopsy case documentation with the manifest and the specimens received to ensure that all of the specimens designated for Forensic Biology have been received. See the Troubleshooting section if there are discrepancies.

3.4 Screen all the documentation for potential Forensic Biology cases. The following types of cases should be assigned an FB case number:

3.4.1 Homicides

3.4.2 Any case in which sexual assault evidence (SAK or orifice/penile swabs) has been collected

3.4.3 Any case in which a Forensic Biology test is requested via email, phone, or noted on the manifest.

3.4.3.1 Note: Hemoglobin, thrombophilia, and sickle cell cases are assigned an MG # and not an FB #. Contact the Molecular Genetics group.

3.4.4 Any unknown body with PM samples requiring DNA identification (must verify the victim is still unknown by checking CMS or the ID Unit)

3.4.5 Any case in which evidence from the NYPD or DA’s office has been submitted

3.4.6 POC/fetus (only if criminal activity is involved)
3.5 **For cases that will be assigned an FB case number:** Check the database to determine if FB case numbers have been assigned to the ME numbers.

3.5.1 If the database has a FB # for the ME #, the PM samples will be signed into the pre-existing case numbers.

3.5.2 If the database does not have a FB # for the ME #, review and assign the PM samples an FB case number. Enter the appropriate information into the database. Create a new case folder by obtaining a manila folder with the FB case number.

3.6 Upon electronically assigning a FB # to the ME #, LIMS will create a unique PM number for each specimen.

3.6.1 Exception: For Missing Persons cases (unknown victim), the PM sexual assault evidence (PM SAK or PM orifice/penile swabs) should be placed on a separate chain of custody from the other PM samples.

3.7 PM SAK and PM orifice/penile swabs must be signed over to the Evidence Unit so that they may be processed. All other specimens must be placed in retained storage. Continue to document the chain of custody for these items to reflect their final location.

3.8 Give the FB cases to the evidence sign-in supervisor.

3.9 All other cases are not assigned an FB case number. These would include cases where the Manner of Death is:

3.9.1 Pending Studies (possible homicides, i.e.- CUPPI, case unknown pending police investigation)

3.9.2 Natural

3.9.3 Therapeutic Complication

3.9.4 Accident/Motor vehicle accidents (MVA’s) *which are under investigation* (i.e.- hit and run)

3.9.5 Suicide

3.9.6 Undetermined

3.9.7 Or any case which involves child abuse or suspected child abuse

3.10 **For cases that will **not be assigned an FB case number:** File the daily case census sheets and respective autopsy worksheets in chronological order for archival purposes. After 30 days, discard the paperwork. Electronic copies are available through CMS.
4 Discarding postmortem items

4.1 Refer to the table below regarding storage and discarding of blood and non-blood items:

Table 3:

<table>
<thead>
<tr>
<th></th>
<th>Bloodstain?</th>
<th>Non-Blood?</th>
<th>Discard?</th>
</tr>
</thead>
<tbody>
<tr>
<td>FB cases</td>
<td>Y</td>
<td>Y</td>
<td>Retain all indefinitely.</td>
</tr>
<tr>
<td>Non-FB cases</td>
<td>Y</td>
<td>Y</td>
<td>Discard non-blood after 6 months; discard bloodstain after 5 years.</td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>Y</td>
<td>Discard non-blood after 5 years.</td>
</tr>
<tr>
<td></td>
<td>Y</td>
<td>N</td>
<td>Discard bloodstain after 5 years.</td>
</tr>
<tr>
<td>POC/Fetus (criminal activity)</td>
<td>n/a</td>
<td>Y</td>
<td>Retain a small piece and discard the remainder.</td>
</tr>
</tbody>
</table>

4.2 A copy of the manifest will be filed with Batch Chain for the sample being discarded. The original manifest will be filed in a binder for discarded postmortem samples.
## 5 Troubleshooting

<table>
<thead>
<tr>
<th>Problem</th>
<th>Recommended Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unlabeled specimen; unscanable label</td>
<td>Criminalist I: For an unlabeled specimen, do not process; record the deviation and notify supervisor. Store questionable samples in designated refrigerated area. For an unscanable label, process as long as the ME number is legible. Criminalist III/IV: Narrow down possible ME by process of elimination. Contact ME who performed the autopsy to request an additional sample. If not available, retrieve sample from Department of Toxicology.</td>
</tr>
<tr>
<td>Unreadable but scannable barcode label</td>
<td>Criminalist I: Scan barcode and generate new label. Use new label to confirm ME# with manifest and place label on staincard. Continue with processing.</td>
</tr>
<tr>
<td>Specimen collected but not listed on manifest</td>
<td>Criminalist I: Record the deviation and continue with processing. Criminalist III/IV: Confirm what samples were collected by the ME who performed the autopsy.</td>
</tr>
<tr>
<td>Specimen not collected but listed on manifest</td>
<td>Criminalist I: Record the deviation and notify the supervisor. Criminalist III/IV: Contact ME who performed the autopsy to request an additional sample. If not available retrieve sample from Department of Toxicology.</td>
</tr>
</tbody>
</table>
## Problem

**Blood vial labeled “Hospital Blood” and/or has the ME # written on the hospital label**

**Recommended Action**

Criminalist I: Record the deviation, continue with processing, and notify supervisor. Criminalist III/IV: Verify on the autopsy worksheet that ME submitted hospital blood. If so, do nothing. If not, contact ME who performed the autopsy to inform them of the situation and attempt to retrieve sample in a purple top tube.

**Missing manifest**

Criminalist I: Record the deviation and continue with processing, and notify supervisor. Criminalist III/IV: Contact the respective borough Deputy ME.

**Container not sealed with black ties**

Criminalist I: Record the deviation, continue with processing, and notify supervisor. Criminalist III/IV: Notify Dan Stevelman.

**Broken blood vials/ Blood vial with a detached rubber stopper**

Criminalist I: Record the deviation and notify supervisor. Criminalist III/IV: Contact ME who performed the autopsy to request an additional sample. If not available, retrieve sample from Department of Toxicology.

**Blood vial with a non-purple stopper**

Criminalist I: Record the deviation and continue with processing. Criminalist III/IV: Contact ME who performed the autopsy to inform them of the situation and attempt to retrieve sample in a purple top tube.
# Processing of Postmortem Specimens

<table>
<thead>
<tr>
<th>Problem</th>
<th>Recommended Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood that appears to be decomposed, fluid, grayish in color, or clotted</td>
<td>Criminalist I: Record the deviation and continue with processing, and notify supervisor. For blood clots, smear clot onto the stain card. Discard leftover blood clot properly. Criminalist III/IV: Contact ME who performed the autopsy and ask for a bone sample.</td>
</tr>
<tr>
<td>Blood labeled “decomp” on blood vial or autopsy case worksheet</td>
<td>Criminalist I: Record the deviation, continue with processing, and notify supervisor. Criminalist III/IV: Contact ME who performed the autopsy and ask for a bone sample.</td>
</tr>
<tr>
<td>Blood vial labeled for HIV testing (or paperwork for HIV testing included)</td>
<td>Criminalist I: Do not process; Record the deviation and notify supervisor. Store questionable samples in designated refrigerated area. Criminalist III/IV: Return items to the Manhattan morgue.</td>
</tr>
<tr>
<td>RNAlater® samples: liver, spleen, and heart and/or requisition forms</td>
<td>Criminalist I: Do not process; record the deviation and notify supervisor. Place samples in designated refrigerated area. Criminalist III/IV: Notify the Molecular Genetics group to pick up samples and sign Batch Chain.</td>
</tr>
<tr>
<td>Incorrect or no sample submitted for decomposed victim or a case for FB</td>
<td>Criminalist III/IV: Contact ME who performed the autopsy and ask for an appropriate sample (long bone, rib, etc.) Retrieve sample from Toxicology as a last resort.</td>
</tr>
</tbody>
</table>
6 Civil paternity requests

6.1 Do not accept any phone calls from family members. Direct all phone calls to the OCME Legal Department.

6.2 A paternity request is initiated with an email from the Legal Department indicating the family plans to have DNA paternity testing done and to place any specimens on hold.

6.3 Check the PM database to determine the following:

6.3.1 Was a sample collected?

6.3.2 What type of PM sample is available (blood, hair, etc.)?

6.3.3 Is this an FB or non-FB case?

6.3.4 Verify subject’s name with autopsy sheet

6.4 Locate the appropriate PM sample and verify that you have the correct PM sample and subject name. Place PM sample into paternity bin for FB case # assignment.

6.5 Send a “reply to all” email answering all of the questions listed above in 6.3. List all samples in FB custody. Indicate if there is an inconsistency between the subject’s name listed in the email from the Legal Department and what is listed in the autopsy sheet.

6.6 If no sample is available in FB, contact the Toxicology Department for a potential sample.

6.7 If a sample is available, retrieve it from EU, and process the sample.

6.8 Store the stain card in the appropriate retained storage location. Update all appropriate databases. Retain the email requesting a specimen from the Toxicology Department and your reply. Place PM Sample into the Paternity Bin for FB Case Number assignment.

6.9 FB will be contacted by the Legal Department when a paternity kit has arrived for the subject. Retrieve the kit.

6.10 Locate the appropriate FB case file & sample.

6.11 Open kit and discard any glass containers for liquid blood in the sharps container.

6.12 Submit a quarter of the PM sample for testing. If PM sample appears to be decomposed, submit half of the sample. (Example- If four circles are stained, submit one circle. If the bloodstain is decomp fluid, submit two circles.) Do not send the entire sample; a minimum of 50% of the sample should be retained. If the testing laboratory or family is requesting the entire item, verify this with the Legal Department and proceed as advised.
6.13 Submit the portion of stain card in a coin envelope labeled with the subject name, ME #, and any other relevant information. Submit a portion of the tissue or bone sample in a plastic, puncture- and leak-proof container labeled as described previously. Seal, initial, and date packaging. Return unused sample to their original storage location.

6.14 Fill out an OCME autopsy specimen chain of custody documentation and shipping paperwork. Refer to the autopsy sheet for information regarding the subject’s age, race, time of death, and medical examiner who performed the autopsy.

6.15 If requested, have autopsy specimen chain of custody notarized. Consult with the PM Blood Processing Supervisor for a list of Public Notaries within the agency.

6.16 Make copies of the paperwork and save the sender’s receipt from the shipping envelope. File the relevant paperwork in the FB file. Update the paternity database.

6.17 Place sample, court order, and other appropriate paperwork in the kit.

6.18 Seal and place kit in appropriate area to be sent. Call the appropriate shipping company to arrange pick-up, as needed. Record the confirmation number in FB file.

6.19 Email the original contact and inform them that the kit will be picked up. Include the confirmation number. File the email with the relevant paperwork in the FB file.