

**Department of State  
Division of Publications**

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**For Department of State Use Only**

Sequence Number: 06-13-13  
Rule ID(s): 5491  
File Date: 6/17/13  
Effective Date: 11/28/13

## Proposed Rule(s) Filing Form

*Proposed rules are submitted pursuant to T.C.A. §§ 4-5-202, 4-5-207 in lieu of a rulemaking hearing. It is the intent of the Agency to promulgate these rules without a rulemaking hearing unless a petition requesting such hearing is filed within sixty (60) days of the first day of the month subsequent to the filing of the proposed rule with the Secretary of State. To be effective, the petition must be filed with the Agency and be signed by twenty-five (25) persons who will be affected by the amendments, or submitted by a municipality which will be affected by the amendments, or an association of twenty-five (25) or more members, or any standing committee of the General Assembly. The agency shall forward such petition to the Secretary of State.*

<b>Agency/Board/Commission:</b>	Department of Health
<b>Division:</b>	Office of the Chief Medical Examiner
<b>Contact Person:</b>	Sarah Yusuf
<b>Address:</b>	425 5 <sup>th</sup> Avenue North
<b>Zip:</b>	37243
<b>Phone:</b>	615-532-7665
<b>Email:</b>	Sarah.Yusuf@tn.gov

**Revision Type (check all that apply):**

- Amendment  
 New  
 Repeal

**Rule(s) Revised (ALL chapters and rules contained in filing must be listed here. If needed, copy and paste additional tables to accommodate multiple chapters. Please enter only ONE Rule Number/Rule Title per row)**

Chapter Number	Chapter Title
1200-36-01	Investigation of Deaths Resulting from Opiate, Illegal or Illicit Drug Overdose
Rule Number	Rule Title
1200-36-01-.01	Purpose
1200-36-01-.02	Definitions
1200-36-01-.03	Required Reporting of Deaths Resulting from Opiate, Illegal or Illicit Drug Overdose
1200-36-01-.04	Investigation of Deaths

(Place substance of rules and other info here. Statutory authority must be given for each rule change. For information on formatting rules go to <http://state.tn.us/sos/rules/1360/1360.htm>)

Investigation of Deaths Resulting from Opiate, Illegal or Illicit Drug Overdose  
New Rule

1200-36-01-.01 Purpose

A complete autopsy is preferred and usually necessary for optimal investigation of deaths resulting from opiate, illegal or illicit drug overdose. The rules in this chapter set forth protocol for uniform investigations of deaths resulting from such drugs.

1200-36-01-.02 Definitions

- (1) "Admission blood" means the blood obtained from an individual, whether alive or deceased, upon admission to the hospital.
- (2) "Autopsy" means the examination and dissection of a dead body by a physician authorized by law for the following purposes: determining the cause, mechanism, or manner of death, or the seat of disease, confirming clinical diagnoses, obtaining specimens for specialized testing, retrieving physical evidence, identifying the deceased, or educating medical professionals and students.
- (3) "Body" means the body of a deceased human or the parts or remains thereof.
- (4) "Chain of Custody" means the methodology of tracking specified materials, substances, or bodies for the purpose of maintaining control and accountability from initial collection to final disposition for all such items and providing accountability at each stage in handling, testing, and storing specimens and reporting test results.
- (5) "County Medical Examiner" means a physician licensed to practice medicine in the state of Tennessee and appointed by the county mayor.
- (6) "County Medical Investigator" means a licensed emergency medical technician, paramedic, registered nurse, physician's assistant or person registered by or a diplomat of the American Board of Medicolegal Death Investigators (AMBDI) and approved by the county medical examiner as qualified to serve under the supervision of a County Medical Examiner and assist the County Medical Examiner in death investigations.
- (7) "Forensic Pathologist" means a licensed physician who is certified in forensic pathology by the American Board of Pathology or who, prior to 2006, has completed a training program in forensic pathology that is accredited by the Accreditation Council on Graduate Medical Education (ACGME) or its international equivalent or has been officially "qualified for examination" in forensic pathology by the American Board of Pathology (ABP).
- (8) "Regional Forensic Center" means a facility accredited by the National Association of Medical Examiners (NAME) that provides forensic autopsy and death investigative services to one or more counties.
- (9) "Scene" means the location where the death occurred and/or where the body was discovered.
- (10) "Toxicology" means the identification and analysis of drugs and poisons.

Authority: T.C.A. §§ 38-7-102, 68-3-502(d), and Chapter 916 of the Public Acts of 2012.

1200-36-01-.03 Required Reporting of Deaths Resulting from Opiate, Illegal or Illicit Drug Overdose

- (1) Any physician, undertaker, law enforcement officer, or other person having knowledge or reasonable suspicion of the death of any person resulting from opiate, illegal or illicit drugs shall immediately notify the county medical examiner or the district attorney general, the local police or the county

sheriff, who in turn shall notify the county medical examiner. The notification shall be directed to the county medical examiner in the county in which the death occurred.

- (2) The county medical examiner or county medical investigator shall report the death to the regional forensic center.
- (3) The regional forensic center shall:
  - (a) Forward reports of such deaths to the Office of the Chief Medical Examiner; and
  - (b) Send the final autopsy report of such deaths to the Office of the Chief Medical Examiner.

Authority: T.C.A. §§ 38-7-102, 68-3-502(d) and Chapter 916 of the Public Acts of 2012.

#### 1200-36-01-.04 Investigation of Deaths

- (1) The county medical investigator or the county medical examiner shall arrive as soon as practicable upon receiving a report pursuant to 1200-36-01-.03(1).
- (2) After arrival at the scene, the county medical investigator or the county medical examiner shall document in writing:
  - (a) Any usage of medications, illicit drugs and drug paraphernalia by the decedent;
  - (b) Any acute attempts of resuscitation performed on the decedent;
  - (c) Interviews with witnesses at the scene;
  - (d) Medical and mental health history of decedent; and
  - (e) An inventory of any medications found at the scene and document the name of the person to whom the medication was prescribed, the prescription number, pharmacy, the name of the prescribing medical practitioner, dosage, date filled, amount of medication issued, amount of medication remaining, and any instructions for the administration of the medication.
- (3) Prior to ordering an autopsy, county medical examiners and/or investigators shall consult with the regional forensic center receiving the body. Interpretation of postmortem toxicology testing requires correlation with history, scene and autopsy findings; thus whenever possible, a forensic autopsy shall be ordered.
- (4) If an autopsy is ordered, the county medical examiner shall send the following items with the body using chain of custody pursuant to the policy of the regional forensic center that will receive the body:
  - (a) All items listed in paragraph (2);
  - (b) Scene photos;
  - (c) Report of investigation;
  - (d) Order for autopsy;
  - (e) All admission blood and urine samples taken from the decedent and held at the hospital laboratory; and
  - (f) If the decedent was transferred to a hospital, a copy of the decedent's hospital medical records.
- (5) The county medical investigator will document the chain of custody for all items sent with the body.

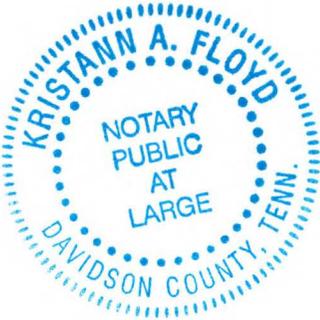
- (6) The county medical examiner or investigator shall remain with the body at any non-hospital scenes until transportation arrives and removes the body.
- (7) The death certificate will be signed by the forensic pathologist who performs the forensic examination.

Authority: T.C.A. §§ 38-7-102, 68-3-502(d) and Chapter 916 of the Public Acts of 2012.

\* If a roll-call vote was necessary, the vote by the Agency on these rules was as follows:

Board Member	Aye	No	Abstain	Absent	Signature (if required)

I certify that this is an accurate and complete copy of proposed rules, lawfully promulgated and adopted by the (board/mission/other authority) on 12-18-12 (date as mm/dd/yyyy), and is in compliance with the provisions of T.C.A. § 4-5-222. The Secretary of State is hereby instructed that, in the absence of a petition for proposed rules being filed under the conditions set out herein and in the locations described, he is to treat the proposed rules as being placed on file in his office as rules at the expiration of sixty (60) days of the first day of the month subsequent to the filing of the proposed rule with the Secretary of State.



Date: 12-18-12 Acting

Signature: David Reagan MD for John Dreyer

Name of Officer: David Reagan

Title of Officer: Chief Medical Officer Commissioner

Subscribed and sworn to before me on: 12/18/12

Notary Public Signature: Kristann A. Floyd

My commission expires on: 1/31/13

All proposed rules provided for herein have been examined by the Attorney General and Reporter of the State of Tennessee and are approved as to legality pursuant to the provisions of the Administrative Procedures Act, Tennessee Code Annotated, Title 4, Chapter 5.

RE Cooper  
 Robert E. Cooper, Jr.  
 Attorney General and Reporter  
6-13-13  
 Date

**Department of State Use Only**

Filed with the Department of State on: 6/17/13

Effective on: 11/28/13

Tre Hargett  
 Tre Hargett  
 Secretary of State

RECEIVED  
 2013 JUN 17 PM 4:26  
 SECRETARY OF STATE

**Regulatory Flexibility Addendum**

Pursuant to T.C.A. §§ 4-5-401 through 4-5-404, prior to initiating the rule making process as described in T.C.A. § 4-5-202(a)(3) and T.C.A. § 4-5-202(a), all agencies shall conduct a review of whether a proposed rule or rule affects small businesses.

These proposed rules only affect county and municipal governments and will have no impact on small businesses.

## **Impact on Local Governments**

Pursuant to T.C.A. §§ 4-5-220 and 4-5-228 “any rule proposed to be promulgated shall state in a simple declarative sentence, without additional comments on the merits of the policy of the rules or regulation, whether the rule or regulation may have a projected impact on local governments.” (See Public Chapter Number 1070 (<http://state.tn.us/sos/acts/106/pub/pc1070.pdf>) of the 2010 Session of the General Assembly)

These rules are expected to have an impact on local governments in that they will result in increased local expenditures resulting from costs of increased autopsies.

## Additional Information Required by Joint Government Operations Committee

All agencies, upon filing a rule, must also submit the following pursuant to T.C.A. § 4-5-226(i)(1).

- (A) A brief summary of the rule and a description of all relevant changes in previous regulations effectuated by such rule;

This rule sets forth uniform protocol for conducting autopsies for deaths resulting from opiate, illegal or illicit drug overdose.

- (B) A citation to and brief description of any federal law or regulation or any state law or regulation mandating promulgation of such rule or establishing guidelines relevant thereto;

T.C.A. § 68-3-502(d) amended by Chapter 916 of the Public Acts of 2012 requires the Commissioner of the Department of Health to establish by rule a protocol for use by medical examiners in deaths resulting from opiate, illegal or illicit drug overdose.

- (C) Identification of persons, organizations, corporations or governmental entities most directly affected by this rule, and whether those persons, organizations, corporations or governmental entities urge adoption or rejection of this rule;

County medical examiners and county medical investigators, regional forensic centers, forensic pathologists, and the Office of the Chief Medical Examiner, will be most affected.

- (D) Identification of any opinions of the attorney general and reporter or any judicial ruling that directly relates to the rule;

- (E) An estimate of the probable increase or decrease in state and local government revenues and expenditures, if any, resulting from the promulgation of this rule, and assumptions and reasoning upon which the estimate is based. An agency shall not state that the fiscal impact is minimal if the fiscal impact is more than two percent (2%) of the agency's annual budget or five hundred thousand dollars (\$500,000), whichever is less;

The fiscal impact is estimated to be more than 2% of the agency's annual budget.

- (F) Identification of the appropriate agency representative or representatives, possessing substantial knowledge and understanding of the rule;

Dr. Karen Cline-Parhamovich, Chief Medical Examiner and Sarah Yusuf, Assistant General Counsel, Tennessee Department of Health possess substantial knowledge and understanding of the rule.

- (G) Identification of the appropriate agency representative or representatives who will explain the rule at a scheduled meeting of the committees;

Dr. Karen Cline-Parhamovich, Chief Medical Examiner and Sarah Yusuf, Assistant General Counsel, Tennessee Department of Health will explain the rule at a scheduled meeting of the committees.

- (H) Office address, telephone number, and email address of the agency representative or representatives who will explain the rule at a scheduled meeting of the committees; and

Dr. Karen Cline-Parhamovic, Office of the Chief Medical Examiner, ETSU/William L. Jenkins Forensic Center, Magnolia and Firth Street, Building 6, Mountain Home, TN 37684, (423) 439-8403, [Karen.Cline@tn.gov](mailto:Karen.Cline@tn.gov) ; Sarah Yusuf, Assistant General Counsel, 3<sup>rd</sup> Floor Cordell Hull Building, 425 5<sup>th</sup> Avenue North, Nashville, TN 37243, 615-532-7665, [Sarah.Yusuf@tn.gov](mailto:Sarah.Yusuf@tn.gov)

- (I) Any additional information relevant to the rule proposed for continuation that the committee requests.