

11G MEDICAL EXAMINERS COMMISSION

CHAPTER 11G-1 ORGANIZATION

- 11G-1.001 Structure, Purpose.
- 11G-1.002 District Medical Examiners, Associate Medical Examiners.
- 11G-1.003 General Procedures, Agenda, Declaratory Statement. (Repealed)
- 11G-1.004 Commission Office. (Repealed)
- 11G-1.005 Approved Forms. (Repealed)
- 11G-1.006 Statutes and Rules Affecting Agency. (Repealed)

11G-1.001 Structure, Purpose.

(1) The Medical Examiners Commission is created within the Department of Law Enforcement (the Department). The Commission consists of nine persons appointed or selected as provided in Section 406.02(1), F.S.

(2) The Commission submits nominations to the Governor for appointment of a district medical examiner for each medical examiner district, as defined in this rule chapter, from nominees who are practicing physicians in pathology. In home rule counties which have established medical examiners under provisions of home rule charter, the medical examiner shall serve as the district medical examiner who would otherwise be appointed under this chapter.

Specific Authority 406.04 FS. Law Implemented 406.02, 406.06, 406.17 FS. History—New 10-18-81, Formerly 11G-1.01, Amended 7-6-99.

11G-1.002 District Medical Examiners, Associate Medical Examiners.

(1) A District Medical Examiner (DME) is appointed for each Medical Examiner District by the Governor under the provisions of Section 406.06(1), F.S.

(2) A District Medical Examiner may appoint such Associate Medical Examiners as needed, to serve at the pleasure of the DME.

(3) An appointment of an Associate Medical Examiner expires with the expiration of the appointment of the District Medical Examiner that appointed him.

(4) The District Medical Examiner shall file with the Commission office a copy of the letter of appointment, resignation, or removal of each Associate Medical Examiner.

(5) The District Medical Examiner shall supervise the work and work product of Associate Medical Examiners on a regular basis as necessary to insure consistency and quality.

(6) The term “medical examiner” as used in these rules means a District Medical Examiner or Associate Medical Examiner.

(7) The medical examiners, their agents, servants and employees shall not be the agents, servants or employees of the Florida Department of Law Enforcement or the Medical Examiners Commission and shall not be entitled to any benefits granted employees of the Florida Department of Law Enforcement.

(8) The Florida Department of Law Enforcement shall not be deemed to assume any liability for the acts, omissions to act or negligence of the medical examiners, their agents, servants and employees.

(9) Medical examiners are subject to the provisions of the Code of Ethics for Public Officers and Employees, Chapter 112, Part III, F.S. Medical examiners shall become familiar with the Code of Ethics and ensure that they are in compliance with the requirements stated therein.

(10) Medical examiners shall not:

(a) Obtain any rental space or equipment from a business or professional association in which he, his spouse or children has a business interest unless the county he serves determines that any one of the exemptions cited in Section 112.313(12), F.S., applies.

(b) Utilize a business or professional association in which he, his spouse or children has a business interest for any services, including but not limited to secretarial, laboratory, courier, and investigative, unless the county he serves determines that any one of the exemptions cited in Section 112.313(12), F.S., applies.

(c) Participate in any way with the county in the determination of the bid specifications or the determination of the lowest or best bidder for the services, rental space or equipment if his business or professional association is to submit a bid proposal to provide these services, rental space or equipment.

(d) May not allow an organ or tissue procurement agency to provide employees or the salaries for any members of the medical examiners office.

(11) Medical examiners or their business entities may provide services if the terms and conditions of Section 112.313(12), F.S., (exemptions) are met.

Specific Authority 406.04 FS. Law Implemented 112.313, 406.02, 406.06, 406.17 FS. History—New 10-18-81, Formerly 11G-1.02, Amended 4-11-88, 12-26-88, 8-28-91, 2-23-93, 8-22-00, 7-29-01.

CHAPTER 11G-2 STANDARD INVESTIGATION PROCEDURES

11G-2.001	Determination of Jurisdiction, Preliminary Procedures.
11G-2.002	Identification.
11G-2.003	Investigation.
11G-2.0031	SIDS Autopsy Protocol.
11G-2.004	Physical Evidence.
11G-2.005	Records, Autopsy Report.
11G-2.006	Practice Guidelines.

11G-2.001 Determination of Jurisdiction, Preliminary Procedures.

(1) If a medical examiner becomes aware of a death within the district that may be a death which must be investigated under the terms of Section 406.11, F.S., the medical examiner shall make such inquiry as is necessary to see if jurisdiction exists for an investigation.

(2) If a medical examiner is notified of a death and the medical examiner determines that jurisdiction under Section 406.11, F.S., does not exist, the findings and conclusions supporting that determination shall be recorded in the permanent records of the medical examiner's office. The person having control of the body shall be notified of the determination.

(3) If a medical examiner makes an investigation solely in order that human remains may be disposed of under the terms of Section 406.11(1)(c), F.S., the medical examiner may give or deny permission for such disposal under one of the following conditions:

(a) Not until the medical examiner has autopsied the body, or has determined the cause of death by inquiry, shall the medical examiner relinquish jurisdiction for cremation, anatomic dissection, or burial-at-sea. The medical examiner may, absent information to the contrary, rely on the information found on a signed death certificate as being true and accurate.

(b) Excepting medical specimens, fetal remains or other dead human tissue for which a regular death certificate is not required, unidentified human remains shall not be cremated, donated for anatomic dissection, or buried at sea.

(c) Fetal deaths for which cremation, anatomic dissection or burial-at-sea of the remains is intended must be referred to the medical examiner for investigation. For the purposes of this section, "fetal death" is defined by Section 382.002, F.S. The medical examiner shall keep an accurate record of each such investigation in such sufficient detail to allow a review of the circumstances.

(4) If a medical examiner becomes aware of a death, apparently from disease, he shall investigate it as a death from a disease constituting a threat to the public health, if

(a) The investigation is requested by an appropriate official of the Department of Health pursuant to Section 381.0011 or 381.0012, F.S.

(b) The medical examiner determines that additional information concerning the cause and mechanism of death, beyond that available in the decedent's medical history, is needed to protect the public health.

(5) If the medical examiner determines that jurisdiction for an investigation under Section 406.11(1)(a) or (b), F.S., does exist, he shall

(a) Inform the person having control of the body that, pursuant to Sections 406.12 and 382.008, F.S., the body should not be embalmed or otherwise prepared for burial or disturbed until examined by the medical examiner,

(b) Arrange for transportation of the body and for examination of the scene of death or injury,

(c) Notify the appropriate law enforcement official having jurisdiction over persons, criminal scenes or investigations, physical evidence, or records, pursuant to Section 406.14, F.S.,

(d) Notify the Department of Motor Vehicles if the death is the result of a traffic accident, pursuant to Section 316.065(2), F.S., as necessary,

(e) Ensure that the next of kin is notified that the medical examiner's office is investigating the death, when this can be done without hindering the legal purpose of the investigation and the identification and location of the next of kin is readily available. The contact with the next of kin, or the attempt to contact, shall be documented in the medical examiner's case file, whether such contact or attempt to contact is made by the medical examiner's office or through other persons or agencies such as hospital personnel, law enforcement agencies, funeral homes or friends of the deceased, and

(f) Promptly notify the next of kin, authorized funeral home, or other representative when the body can be released, provided the identification and location of the next of kin or representative is known.

Specific Authority 406.04 FS. Law Implemented 406.04, 406.11, 406.13 FS. History—New 10-18-81, Amended 7-10-85, Formerly 11G-2.01, Amended 8-27-87, 11-24-87, 10-14-96, 7-6-99.

11G-2.002 Identification.

(1) The body shall be identified as soon as possible. If necessary to make an identification, the medical examiner shall determine and record the following information:

(a) A detailed physical description, including a clothing and personal effects inventory,

(b) Complete skeletal x-rays,

- (c) Thorough dental charts and x-rays,
- (d) Blood groupings, and
- (e) Fingerprints.

(2) If no identification has been made within seven days, the above information shall be furnished to the Department on a form furnished for that purpose. If identification is subsequently made, the medical examiner shall inform the Department.

(3) In all cases, a photograph of the face shall be taken, and in cases of questionable identity, fingerprints shall be taken on forms provided by the Department and these shall be forwarded to the Department through the appropriate law enforcement agency.

(4) The medical examiner shall retain unidentified remains and preserve them in accordance with the law.

(5) In the case of apparent criminal homicide, the medical examiner shall take all actions necessary so that he can testify to the identity of the deceased.

Specific Authority 406.04 FS. Law Implemented 406.11, 406.13, 406.145 FS. History—New 10-18-81, Formerly 11G-2.02, Amended 8-22-00.

11G-2.003 Investigation.

(1) A medical examiner shall investigate under the authority of Section 406.11, F.S., in order to determine the cause of death and such circumstances surrounding it as are necessary and in the public interest. Such an investigation shall consist of examinations or investigation as the medical examiner shall deem necessary, including but not limited to:

- (a) An examination of the scene of death or injury and physical evidence;
- (b) Questioning of relatives, witnesses, prior attending physicians, or law enforcement officers;
- (c) An examination of the deceased's medical records;
- (d) An examination or autopsy of the body, including the testing of specimens as provided in Rule 11G-2.004, F.A.C., and a complete or partial dissection;
- (e) Such photographs as needed to record the findings.

(2) Medical examiner autopsies performed pursuant to Section 406.11, F.S., shall be performed by pathologists or directly supervised residents in pathology. Performance shall require in situ examination of the tissues pertinent to determining the cause of death and the removal of viscera pertinent to the determination of the cause of death. Removal of other organs and tissues during the autopsy shall be under the direct supervision of the pathologist. Direct supervision requires the presence of the supervising pathologist in the autopsy room. A medical examiner shall not sign a death certificate unless he or she has made such investigation as needed to assure the accuracy of the findings.

(3) A complete autopsy shall be performed when the death:

- (a) Is alleged or suspected to be by criminal violence;
- (b) Occurred while in police custody;
- (c) Occurred in any prison or penal institution;
- (d) Appears to have been by gunshot wound;
- (e) Is suspected to be as a result of poisoning;
- (f) Is suspected to be as a result of Sudden Infant Death Syndrome;
- (g) Appears to have been by suicide; or
- (h) Whenever requested or directed by the State Attorney under law.

(4) An autopsy is generally needed to complete the investigation of deaths:

- (a) Resulting from motor vehicle or aircraft accident;
- (b) From a disease constituting a threat to the public health;
- (c) By apparent drowning;
- (d) In a state institution; or
- (e) Otherwise by violence.

(5) This rule serves to require investigations and autopsies in certain circumstances, but does not limit a medical examiner in exercising the authority contained in Chapter 406, F.S.

Specific Authority 406.04 FS. Law Implemented 406.11, 406.13 FS. History—New 10-18-81, Formerly 11G-2.03, Amended 8-27-87, 9-23-93, 12-3-03.

11G-2.0031 SIDS Autopsy Protocol.

(1) Sudden infant death syndrome (SIDS) is the sudden death of an infant under one year of age which remains unexplained after a thorough case investigation, including performance of a complete autopsy, examination of the death scene, and review of the clinical history.

(2) A medical examiner is obligated to perform a complete autopsy and conduct a thorough scene and clinical history review of any sudden, unexpected or apparently non-violent death of an infant under one year of age which might be a case of SIDS.

(3) The medical examiner investigating a potential SIDS case must be familiar with the place of discovery of the infant in terms of sleep site, bed clothes, position at time of discovery, sharing the bed with others, and environmental hazards such as fumes or extreme temperature hazards. Familiarity with the scene may be determined by personal inspection on the part of the medical

examiner or a medical examiner investigator or police investigator. The results of scene investigation shall be included in the medical examiner case file. The diagnosis of SIDS should not be made if it is apparent that a hazard such as overlay by an adult, fall from bed, suffocation from dangerous coverings or other environmental hazards played a role in the death.

(4) The clinical history review shall attempt to include determination of prenatal, delivery and postnatal medical information relevant to a proper diagnosis of SIDS and should include history of familial disease, mental illness and social setting pertinent to exclusion of illnesses or child abuse, the absence of which is essential to the diagnosis of SIDS. During the investigation contact shall be made with the Department of Children and Family Services for information in its records of abuse or neglect of children within the family or family setting.

(5) An autopsy is mandated whenever an infant death is under investigation as a potential SIDS. The autopsy is needed to exclude congenital, infectious, environmental or other unnatural causes of death. The gross narrative description shall consider external features including integrity of all orifices, status of internal organs and tissues and hollow viscera contents. Serosal and membrane petechiae and presence or absence of blood clot in the heart and great vessels should be mentioned as well as a skeletal x-ray survey and appropriate photographs. Histological slides should include major viscera sufficient to exclude readily diagnosed disease processes. Bacterial cultures and viral cultures should be performed when needed to document or exclude suspect infectious agents. Appropriate tissues and fluids should be preserved for toxicological study when indicated.

(6) As soon as the diagnosis of SIDS is made, a letter of condolence and explanation with reference to a counseling visit by the county public health unit representatives should be sent from the medical examiner to the parents or guardians. The county public health unit must be notified and furnished the names and addresses of the parents or guardians. The medical examiner shall furnish case investigative findings to the Consumer Product Safety Commission or other concerned governmental agencies upon request. In such event the counseling letter should make reference to the prospective visit by such agency.

Specific Authority 383.3362(4), 406.04 FS. Law Implemented 383.3362, 406.11, 406.13 FS. History--New 10-14-96, Amended 7-6-99.

11G-2.004 Physical Evidence.

(1) Definitions. The following definitions apply to this section:

(a) "Body part". The entire head, an entire extremity, a portion of an extremity that includes a hand or foot, or the torso, of a dead human body. For human skeletal remains a body part is defined as a nearly complete skull, or most of the bones of extremity, or most of the bones of the torso.

(b) "Organ". An entire internal viscus, such as a brain, heart, larynx, lung, stomach, or uterus of a dead human body.

(c) "Tissue". A representative sample of a body part or organ, constituting a minority of the volume or mass of the part or organ.

(d) "Embedded tissue". Tissue which has been embedded in paraffin blocks, or the like, for the purpose of histological study.

(e) "Sections". Tissue mounted on glass slides for the purpose of histological staining.

(f) "Stained sections". Sections which have been stained for the purpose of microscopic examination.

(g) "Fluid". Liquid from a blood vessel, body cavity, hollow viscus, hematoma, or abscess of a dead human body. Fluids include blood, vitreous humor, bile, gastric content, urine, cerebrospinal fluid, and effusions.

(h) "Specimen". A body part, organ, tissue, fluid, embedded tissue, section, or stained section; or a swab from a body part, organ, tissue, or body surface.

(i) "Physical evidence". An item or items taken during an investigation which is believed to be pertinent to the determination of the cause of death, manner of death, identification of the deceased, determination of disease, injury or intoxication, or which is taken to answer anticipated questions in any investigation. Includes specimens.

(j) "Retained". With respect to specimens, kept by the medical examiner after the release of the remains to the next of kin.

(k) "Research". Any one of the following:

1. Procedures designed for therapy or resuscitation, performed on a dead human body for experiment or practice, unrelated to the determination of cause of death, mechanism of death, manner of death, presence of disease, injury, or intoxication, or identification of the deceased.

2. Testing of body parts or organs for purposes unrelated to the determination of cause of death, manner of death, presence of disease, injury, intoxication, or identification.

3. Testing of tissues or fluids by an experimental scientist that results in no report to the medical examiner.

(l) "Next of Kin". "Legally authorized person" as defined by Section 470.002(18), F.S.

(2) The medical examiner shall seize such physical evidence as shall be necessary to determine the cause and manner of death, presence of disease, injury, intoxication, and identification of the decedent, or to answer questions arising in criminal investigations, and shall label, prepare, analyze, examine, and catalog such evidence as needed.

(3) Examination for alcohol and appropriate chemical and drug concentrations shall be done in all deaths resulting from violence to persons over ten years of age, when death occurs within twelve hours of injury.

(4) Physical Evidence shall be retained by the medical examiner as follows:

(a) Stained sections shall be preserved indefinitely and embedded tissue preserved for at least ten (10) years.

(b) Fixed organs shall be retained until the medical examiner has completed his or her studies of them.

(c) All other specimens shall be retained for one year.

(d) All other physical evidence not released to another investigative agency or to the owner shall be retained for one year.

(e) Physical Evidence that is retained for any period longer than is specified above must be held in accordance with Rule 11G-2.006, F.A.C.

(5) Requests for independent examination and analysis of physical evidence in the custody of the medical examiner shall be allowed by the medical examiner under his supervision and control in a manner designed to provide maximal preservation of the physical evidence. Unless compelling reasons dictate, irreplaceable, non-duplicable and non-divisible physical evidence such as embedded tissue shall not be released for independent analysis and examination.

(6) Physical evidence specimens no longer required to be retained by the medical examiner shall be disposed of.

(7) Procedures Concerning Body Parts.

(a) Human remains released by a medical examiner to the next-of-kin shall include all body parts unless the next-of-kin explicitly agree to claim an incomplete body.

(b) If human remains recovered by the medical examiner are incomplete owing to dismemberment or decomposition, and there is a possibility that further body parts will be discovered subsequently, the next-of-kin shall be given the choice of claiming incomplete remains, or waiting to claim the remains until further parts are recovered.

(c) If a body part such as a skull requires special examination, release of the remains should be delayed until the special examination is completed unless the next-of-kin explicitly choose to claim incomplete remains.

(d) Body parts retained by the medical examiner shall be subsequently released to the next-of-kin or disposed of pursuant to the wishes of the next-of-kin.

(e) Body parts not claimed by the next-of-kin are considered biomedical waste [Section 381.0098(2)(a), F.S.] and shall be destroyed by legally prescribed means, at the expense of the medical examiner.

(f) Evidentiary aspects of retained body parts shall be preserved by documentation by writing, photography, radiography or other indirect means, or by retention of tissue samples. Body parts themselves shall not be retained as evidence for legal proceedings.

(g) Permission of the next-of-kin is not required to retain organs, tissues, sections, or fluids for the determination of cause of death, manner of death, disease, injury, intoxication, or identification of the deceased.

(h) Permission of the next-of-kin is not required to destroy retained organs, tissues, sections, or fluids.

(8) Research.

(a) Permission of the next-of-kin is required for:

1. Retention of specimens solely for the purpose of research.

2. Research procedures, designed for therapy or resuscitation, performed on a dead human body for experiment or practice, unrelated to the determination of cause of death, mechanism of death, manner of death, presence of disease, injury, or intoxication, or identification of the deceased.

(b) Permission of the next-of-kin is not required for:

1. The utilization of specimens for teaching and educational purposes, or publication in scientific or medical publications, when the specimens were retained for the determination of cause of death, manner of death, disease, injury, intoxication, identification of the deceased, or preservation of evidence.

2. The utilization of medical examiner records for teaching and educational purposes, or publication in scientific or medical publications, when the records were created in the course of medical examiner death investigations

Specific Authority 406.04 FS. Law Implemented 406.11, 406.13 FS. History—New 10-18-81, Formerly 11G-2.04, Amended 8-27-87, 10-14-96, 7-29-01, 11-30-04.

11G-2.005 Records, Autopsy Report.

(1) The District Medical Examiner shall keep among the official records:

(a) The appointment as DME by the Governor,

(b) A copy of each letter of appointment, resignation, and removal of an AME,

(c) A log or registry of all cases referred to the medical examiner's office,

(d) Records of all investigations performed, including findings, laboratory reports, photographs, and autopsy reports,

(e) Copies (typed) of all Death Certificates signed by a DME or AME in his capacity as a medical examiner, and

(f) All other notes or documentation forming a record of an investigation.

(2) The autopsy report shall be typed and shall only include the objective results of the examination of the body and the toxicologic samples. The circumstantial history and toxicologic correlations shall constitute a separate portion of the investigative report.

(3) Any death certificate signed by a DME or AME in the capacity of medical examiner shall show the address of the District Medical Examiner's office.

Specific Authority 406.04 FS. Law Implemented 406.11, 406.13 FS. History—New 10-18-81, Formerly 11G-2.05.

11G-2.006 Practice Guidelines.

The duties and standards of care of a medical examiner are to be consistent with those contained in the “Practice Guidelines for Florida Medical Examiners, Sponsored by the Florida Association of Medical Examiners,” which publication is dated 5-15-03 and is hereby incorporated by reference.

Specific Authority 406.04 FS. Law Implemented 406.075, 406.11, 406.13 FS. History—New 7-29-01, Amended 11-30-04.

CHAPTER 11G-3 DISCIPLINARY GUIDELINES

11G-3.001 Disciplinary Procedures. (Repealed)

11G-3.002 Grounds for Discipline. (Repealed)

CHAPTER 11G-4 FINANCIAL ASSISTANCE FOR MEDICAL EXAMINER DISTRICTS

- 11G-4.001 Purpose. (Repealed)
- 11G-4.002 Allocation. (Repealed)
- 11G-4.003 Payment Procedures - Local Government Criminal Justice Trust Fund Monies. (Repealed)
- 11G-4.004 Payment Procedures - Aid to Local Governments Monies. (Repealed)
- 11G-4.006 Accountability. (Repealed)

CHAPTER 11G-5 DISTRICT MEDICAL EXAMINERS

- 11G-5.001 Purpose. (Repealed)
- 11G-5.002 Establishment of Medical Examiner Districts.
- 11G-5.003 District Medical Examiner Terms of Office.
- 11G-5.004 Process for District Medical Examiner Candidate Nomination to the Governor.

11G-5.002 Establishment of Medical Examiner Districts.

The following districts and counties are designated as Florida's medical examiner districts:

- (1) District 1 – Escambia, Okaloosa, Santa Rosa, Walton;
- (2) District 2 – Franklin, Gadsden, Jefferson, Leon, Liberty, Taylor, Wakulla;
- (3) District 3 – Columbia, Dixie, Hamilton, Lafayette, Madison, Suwannee;
- (4) District 4 – Clay, Duval, Nassau;
- (5) District 5 – Citrus, Hernando, Lake, Marion, Sumter;
- (6) District 6 – Pasco, Pinellas;
- (7) District 7 – Volusia;
- (8) District 8 – Alachua, Baker, Bradford, Gilchrist, Levy, Union;
- (9) District 9 – Orange, Osceola;
- (10) District 10 – Hardee, Highlands, Polk;
- (11) District 11 – Dade;
- (12) District 12 – DeSoto, Manatee, Sarasota;
- (13) District 13 – Hillsborough;
- (14) District 14 – Bay, Calhoun, Gulf, Holmes, Jackson, Washington;
- (15) District 15 – Palm Beach;
- (16) District 16 – Monroe;
- (17) District 17 – Broward;
- (18) District 18 – Brevard;
- (19) District 19 – Indian River, Martin, Okeechobee, St. Lucie;
- (20) District 20 – Collier;
- (21) District 21 – Glades, Hendry, Lee;
- (22) District 22 – Charlotte;
- (23) District 23 – Flagler, Putnam, St. Johns;
- (24) District 24 – Seminole.

Specific Authority 406.04 FS. Law Implemented 406.05 FS. History—New 2-23-93.

11G-5.003 District Medical Examiner Terms of Office.

The term of office of the district medical examiner shall be three years. Appointments to fill a vacancy shall be for the unexpired portion of the term. For the purpose of administration, the 24 district medical examiners serve staggered terms, in accord with the following rotation:

- (1) First year – Districts 1 through 7;
- (2) Second year – Districts 8 through 14;
- (3) Third year – Districts 15 through 24.

Specific Authority 406.04 FS. Law Implemented 406.06(1)(a) FS. History—New 2-23-93.

11G-5.004 Process for District Medical Examiner Candidate Nomination to the Governor.

(1) Policy Statement. Nominations for appointment as a district medical examiner shall be made only after solicitation of comments from city, county and state officials as well as from directors of funeral homes. Candidates nominated by the Medical Examiners Commission will be submitted to the Governor within 30 days after the Commission has voted on the matter. It is not the intent of the Commission to serve as the primary recruiting source for district medical examiner candidates, rather, the Commission intends that this responsibility should remain primarily within the district. The Commission will provide a medical examiner member of the Commission to participate in the candidate screening process at the district level.

(2) Procedure for Nomination for Reappointment of District Medical Examiners.

(a) Prior to the expiration of each incumbent district medical examiner's three year term of appointment, the Medical Examiners Commission staff shall survey by written correspondence the district's state attorney(s), public defender(s), sheriff(s), police chief(s), county commissioner(s), funeral home directors and a member of the local medical community. The survey will solicit input from each relevant to performance of the incumbent district medical examiner and ask for a "favorable" or

“non-favorable” response regarding nomination for reappointment. Additionally, the survey will ask for suggestions for improving district medical examiner services. The survey shall request recommendations for the nomination of the incumbent or any other qualified candidate(s) to serve as district medical examiner.

(b) A summary of the survey results shall be provided to the Commission. Copies of the survey responses shall be forwarded to the incumbent district medical examiner by Commission staff. The incumbent, together with any other qualified candidates named in the survey responses, shall be notified in writing as to the date, time and place of the Commission meeting which will be considering the reappointment of the district medical examiner.

(c) The Commission chairman may request establishment of a committee, as referred to in paragraph 11G-5.004(3)(b), F.A.C., to address concerns regarding the incumbent district medical examiner raised in the survey responses or to initiate a search for other candidates for nomination by the Commission.

(3) Procedure to fill a District Medical Examiner Vacancy.

(a) The Governor will be notified by the Commission upon determination that a district medical examiner position has become vacant or is anticipated to become vacant. The Commission shall also notify the respective state attorney(s), public defender(s), sheriff(s), police chief(s), county commission(s) and funeral home directors for that medical examiner district, requesting that names of potential candidates for the position of district medical examiner be submitted to the candidate search committee established in paragraph 11G-5.004(3)(b), F.A.C.

(b) Within 30 days of being notified of a vacancy or anticipated vacancy, the Chairman of the Commission shall call for a district candidate search committee to be established and appoint a chairman. The search committee shall consist of invited representatives from the offices of the state attorney(s), public defender(s), sheriff(s), police chief(s), county commission(s), funeral homes and a representative of the local medical community from within the bounds of that particular medical examiner district and a physician member of the Medical Examiners Commission or his designee. The search committee shall be requested to:

1. Seek applications from interested candidates who are licensed physicians and experienced practitioners of pathology who possess qualifications to take the examination or already possess the primary certification offered by the American Board of Pathology, American Osteopathic Board of Pathology, or equal qualification rendered by a non-United States medical specialty certifying agency.

2. Establish an interview team, which shall have a quorum of three participants, to interview interested candidates meeting minimum position qualifications. If the district includes a medical school, the dean of the medical school should be invited to participate as a member of the interview team.

3. Assure that the candidate(s) recommended to the Commission for nomination as district medical examiner is in agreement with the respective county representatives regarding the medical examiner budget as outlined in Section 406.06(3), F.S.

4. Review background information about the final candidate(s) from present and past sources, to include a criminal history check, comments of county medical associations, employment references, local hospitals, government agencies and funeral homes with which the candidate(s) has a prior working relationship. Background inquiries should incorporate information on work performance and working relationships, as well as the candidate(s) reasons for and circumstances of leaving employment.

5. Submit an interview package to the Medical Examiners Commission staff for each candidate recommended to the Commission for nomination consisting of: pertinent correspondence regarding the candidate(s); results of background inquiries; letters of reference; and a letter from the candidate(s) to the Commission staff authorizing the release of information from former employers and the Board of Medicine in the state in which the candidate(s) is or was licensed.

6. Complete the candidate selection and interview process and submit interview packages to the Commission within 90 days of appointment of the candidate search committee unless additional time is requested in writing and approved by the Commission Chairman.

(c) The Commission staff shall review interview packages for completeness, prior to their being submitted to the Medical Examiners Commission and, if directed by the Chairman, make additional inquiries concerning the candidate’s background or qualification.

1. The Commission staff shall verify each candidate’s medical licensure status.

2. The Commission staff shall notify all candidates in writing of the time and place of the Commission meeting at which the district nomination(s) will be considered.

(d) The Commission, by majority vote, shall nominate one or more candidates to the Governor, to fill a district medical examiner office vacancy prior to the expiration of six months from the date of the vacancy. Nothing herein is intended to restrict the Commission’s consideration of candidates for nomination only to those persons who may be recommended by a candidate search committee.

(e) The Commission will notify each candidate in writing as to the action taken by the Commission regarding their nomination as district medical examiner.

(f) The Commission will notify the chairman of the candidate search committee in writing on action taken by the commission regarding candidates submitted by the district to fill a district medical examiner vacancy. If the Commission does not vote to nominate any of the candidates submitted by the candidate search committee, the chairman of the committee may be requested to submit other candidates. The Office of the Governor will be notified that none of the candidates submitted for that district were acceptable and that the position is still vacant.

Specific Authority 406.04 FS. Law Implemented 406.06(1)(a) FS. History—New 2-23-93, Amended 9-27-93.