



WISCONSIN LEGISLATIVE COUNCIL STAFF MEMORANDUM

Memo No. 2

TO: MEMBERS OF THE SPECIAL COMMITTEE ON THE POWERS AND DUTIES OF
CORONERS AND MEDICAL EXAMINERS

FROM: Don Salm, Senior Staff Attorney

RE: Discussion of Selected Statutory Provisions in Other States Relating to Qualifications of
Coroners and Medical Examiners; Examples of States With Statutory Provisions Relating to
a Coroners and Medical Examiners Training and Standards Board or Commission

DATE: November 14, 2005

This Memo, prepared at the request of the Special Committee at its October 18, 2005 meeting: (1) discusses selected statutory provisions in other states relating to the qualifications of coroners and medical examiners (ME); and (2) provides examples from two states with either existing or proposed statutory provisions relating to a coroners and MEs training and standards board or commission.

OTHER STATES' PROVISIONS RELATING TO QUALIFICATIONS OF CORONERS AND MEDICAL EXAMINERS

At its October 18th meeting, the Special Committee requested some examples of other states' provisions relating to specific qualifications for the office or position of coroner or ME. There are, of course, a number of states that, as in Wisconsin, do not have any specific requirements for coroners or MEs. This discussion lists examples of states that do have requirements. The following information is derived from state-by-state death investigation system descriptions on the Center for Disease Control website (www.cdc.gov). In this listing, the term "board-certified" refers to certification by the American Board of Pathology.

Connecticut. Commission on Medicolegal Investigations appoints State Chief Medical Examiner (CME), who must be a physician with a minimum of four years of postgraduate training in pathology and such additional experience in forensic pathology as the Commission may determine. The CME must be board-certified in both anatomic and forensic pathology. An "otherwise qualified person" who is **not** licensed may be appointed, but must obtain a license within one year of appointment. The CME appoints assistants and deputies subject to Commission approval; no qualifications are specified.

Delaware. CME, who is appointed by the Secretary of the Department of Health and Social Services (DHSS) with approval of the Governor, must be a board-certified pathologist (with preference given to physicians with experience in the field of forensic pathology). The CME may appoint, with the approval of the DHSS, two assistants who must be physicians with two or more years of experience or training in pathology. The CME may also appoint a toxicologist and deputy MEs (who must be practicing physicians).

Florida. District MEs, who are appointed by the Governor upon recommendation of the state Medical Examiners Commission (except in “home rule” counties), must be practicing physicians in pathology.

Iowa. State ME, who is appointed by the Commission on Public Safety, must be a physician and surgeon, or osteopathic physician and surgeon, **with special knowledge in forensic pathology.** County MEs, who are appointed by the county board of supervisors, must be licensed as doctors of medicine and surgery, doctors of osteopathic medicine and surgery, or as osteopathic physicians.

Maryland. State ME, who (along with deputies) is appointed by the Postmortem Examiners Commission, must be a licensed physician **with at least two years of postgraduate training in pathology.** Deputy MEs, appointed by the Commission for each county, must be licensed physicians.

Massachusetts. State Chief ME, who is appointed by the Governor, must be a physician who is board-certified in forensic pathology. The CME appoints district MEs who must be “duly qualified persons learned in the science of medicine.”

Michigan. County MEs, and their deputies, who are appointed by the County Board of Supervisors, must be physicians.

Minnesota. Elected county coroners must have completed “**academic courses in pharmacology, surgery, pathology, toxicology, and physiology.**” County MEs, who are appointed by the Board of County Commissioners in Hennepin and Ramsey Counties, must be physicians.

New Hampshire. State Chief ME, who is appointed by the Governor and a state council, must be a board-certified forensic pathologist **and must have had experience in forensic medicine.** County MEs, who are appointed by county commissioners, must be physicians and may deputize competent physicians in cases where an ME cannot be present.

New Jersey. State ME is appointed by the Governor and county. County MEs are appointed by the board of chosen freeholders. The State CME must be a forensic pathologist. County MEs must be physicians “**with recognized ability and good standing in the community**” and **with such training or expertise as may be prescribed by the State ME by rule.**

New Mexico. State Medical Investigator (MI) is appointed by the Board of Medical Investigators (consisting of the Dean of the UNM Medical School, Secretary of Health and Environment, Chairman of the Board of Thanatopractice, and the Chief of the State Police). State MI appoints district MIs. The State MI must be a physician **and “in so far as practicable, trained in medicine and pathology.”** District MI’s must be physicians.

North Carolina. State Chief ME, who is appointed by the Secretary of Health and Human Resources, must be a board-certified forensic pathologist. County MEs, who must be physicians, are

appointed by the CME. **Acting MEs, with no specific qualifications, may be appointed in the absence of an available physician.**

Ohio. County coroner, who is either elected or appointed depending on the county, must be a physician licensed to practice as a physician in Ohio for a period of “**at least two years immediately preceding his or her election or appointment as coroner.**” Coroner may appoint one or more licensed physicians as assistants.

Oklahoma. State Chief ME, who is appointed by the Board of Medicolegal Investigations, must be a physician and a board-certified forensic pathologist. The State CME appoints county MEs, who must be doctors of medicine or osteopathy and surgery.

Oregon. State ME is appointed by the Superintendent of the State Police upon advice of the State Medical Examiner Advisory Board. The State ME must be a pathologist **and must meet other qualifications set by the Advisory Board.** County ME’s must be physicians.

West Virginia. State Chief ME, who is appointed by the Director of the Division of Health, must be a physician who is board-certified in Anatomic and Forensic Pathology **and has experience in forensic medicine and pathology.** CME appoints county MEs, who must be physicians.

EXAMPLES OF STATE TRAINING AND STANDARDS BOARDS OR COMMISSIONS FOR CORONERS AND MEDICAL EXAMINERS PROPOSED OR EXISTING IN OTHER STATES

At its October 18th meeting, several members of the Special Committee requested outlines of laws or bills in other states relating to the creation of a state training and standards board or commission for coroners and MEs. The following is a brief description of such laws or proposals in three states.

Alabama Coroner’s Training Commission

2005 Alabama House Bill 203 (which has passed the House and is currently in the Senate) establishes the Alabama Coroner’s Training Commission (ACTC). Under that bill:

1. The ACTC is required to develop and periodically revise a list of **approved training school programs** for meeting the minimum standard training for coroners and their designated assistants. The ACTC must also establish **minimum levels of pre-service and in-service training** required of coroners and other scientists involved in human death investigations.

2. Any coroner or deputy coroner must complete **at last 12 hours of approved training within six months** of assuming office, **unless** he or she has at least 24 months of previous service as a county coroner or deputy coroner in the state.

3. Any coroner, deputy coroner, or any person authorized to officially represent the county coroner must complete **12 hours of training**, approved by the commission, **during each calendar year he or she serves as coroner.** The commission may waive all or any portion of the required training, as it deems appropriate (there is a specific waiver provision requiring proof of an emergency or extenuating circumstances).

4. A coroner or his or her designated assistant who **fails to complete** the minimum annual in-service training required by this act may be **suspended** from office, without pay, by the Governor for

not more than 90 days. At the end of the suspension period, the Governor may continue the suspension of the coroner and his or her designated assistants until he or she completes the annual minimum in-service training.

4. The commission has the authority to establish more stringent standards, which are reasonable and prudent, to improve the quality of investigation and the certification of unattended deaths in this state. The commission is required to authorize, oversee, and administer the required training.

Indiana Coroners Training Board [IC 4-2.3-6.5, Indiana Code; Title 207, Indiana Administrative Code]

The Indiana statutes and Administrative Code establish the Indiana Coroners Training Board. The board consists of seven members, as follows:

1. The Commissioner of the State Department of Health or the commissioner's designee, who must serve as chairperson of the board
2. The Chairperson of the Commission on Forensic Sciences.
3. The Superintendent of the State Police Department.
4. Four county coroners appointed by the Governor. Not more than two of the county coroner members of the board may be from the same political party.

The board is required to adopt rules relating to: (1) standards for continuing education and training for county coroners; (2) mandatory training and continuing education requirements for deputy coroners; and (3) minimum requirements for continuing education instructors approved by the board.

The statutes create the **coroners training and continuing education fund**. The board may use the fund for the following purposes:

1. Training equipment and supplies necessary to operate the fund.
2. Aid to approved training programs that have met the minimum requirements of the board.
3. Travel, regional conferences, and other expenses actually incurred in connection with the member's duties.
4. Any other purpose that the board determines is necessary to carry out the provisions of this chapter.

To date, the board has created the Indiana Administrative Code provisions relating to the minimum basic training and "externship" requirements for deputy coroners. Any deputy coroner may not continue as a deputy coroner if he or she fails to: (1) attend the required basic training course **within one year of the date of his or her employment**; and (2) successfully **complete the externship** and a required written test **within 12 months** of attending the basic training course. The chairman of the board must require all persons attending the board-approved basic training course to obtain a minimum 80% score on all written examinations and a passing score on the externship administered on a pass/fail basis. Failure to attain a passing score on all written examinations and on the externship constitutes a

failure of the course. A person failing to achieve a passing score may apply to the chairperson to retake any failed examination or externship.

The board must **certify** all deputy coroners it deems have completed the minimum training course and externship. The requirement for the **minimum basic training course** necessary to satisfy the requirement for all deputy coroners, whether employed on a part-time or full-time basis, must consist of **not less than 40 hours of classroom and practical training**. The subject matter covered must be approved by the board prior to the beginning date of each basic training course. The externship necessary to satisfy the requirement for all deputy coroners, whether employed on a part-time or full-time basis, must be approved by the board prior to the beginning date of the externship. All persons required to participate in the minimum basic training course and externship must attend all sessions. Absence from any portion of the training and externship may disqualify a deputy coroner from certification at the discretion of the board.

There is an extensive website on the Indiana State Coroners Training Board (www.in.gov/ctb).

DLS:wu:jal