

# MORGUE REVIEW 1.1: OVERVIEW OF MORGUE OPERATIONS

Walsh-Haney Site Visit: 15 November 2007

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**1.0 PURPOSE & SCOPE:** On 15 November 2007, I visited the Guatemala City morgue with Mr. David Davila, Director of the Institute of Forensic Sciences. At his request and with the support of Mr. Alex Rodriguez, Human Rights Ombudsman, I toured the facility with the Chief Medical Examiner. The purpose of the facility tour was to observe morgue flow, physical plant lay-out, and general operating procedures in order to make future recommendations concerning the processing and analysis of forensic casework. While my tour was brief (lasting from 2:30pm-3:00pm), I was guided through the reception area, administrative and medical offices, rooms for rape crisis and psychological counseling, lecture room, autopsy suite, body intake and loading dock, body storage, fingerprint processing room, and the parking lot. I briefly observed an autopsy and body intake.

## 2.0 GENERAL OBSERVATIONS:

**2.1 Location:** The Guatemala City Morgue was located adjacent to the city cemetery.

**2.2 Facilities:** In general, the facility was clean. The lecture room was large and accessible to law enforcement, media, and medical professionals when applicable.

The refrigeration system (walk-in) was not working which resulted in (1) unidentified bodies being stored in a room across the hall and (2) he that bodies waiting to be processed (e.g., photography, fingerprinting, autopsy) were being kept in a room adjacent to the loading dock and body-intake area at room temperature.

No obvious special accommodations were made for family members who come to the morgue to identify decedents.

There were no secured storage lockers for associated physical evidence and/or specimen containers or a drying room for personal effects.

Neither a radiography machine (in working order) nor records storage room was observed.

Security systems within the facility (e.g., video cameras and monitors, card swipe room access, etc) were not observed; although, sign-in procedures at the front desk and security guard monitoring of the parking lot was noted.

Autoclaves, sharps containers, and biohazardous waste receptacles were not observed.

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**2.3 Evidence Handling & Preservation:** During my tour, one decedent was delivered to the morgue in the facility's pick-up truck. The body was prone in the bed of the truck, uncovered, and exposed to the environment.

Photography of the decedent before autopsy and his/her associated personal effects was conducted and the digital images were stored within the computer hard drive in the body-intake room. A quick inspection of the photos showed an absence of scale and case number in the pictures.

Unidentified bodies were placed in body bags and tags that included the decedent's sex and autopsy case number were adhered to the outside of the body bag. According to the medical examiner, unidentified and unclaimed bodies were buried within 48 hours in most instances.

When DNA analysis was necessary, the samples were sent to Spain for analysis.

No standard operating procedures (SOP) for histology, toxicology, radiology, and trace evidence were observed.

**2.4 Personal Protective Equipment:** In use but in limited supply. The medical examiner mentioned that one mask must last approximately 30 days because of funding issues.

### **3.0 RECOMMENDATIONS:** I recommend the following changes:

**3.1.1 Refrigeration.** A walk-in cooler for body and sample storage is requisite.

**3.1.2 Security.** Key or card swipe entry and/or video monitoring of personnel within the morgue and body intake areas are needed.

**3.1.3 Family Counseling Room:** A room that allows for remote body viewing or (minimally) a comfortable and secluded sitting area for families to meet with morgue personnel is necessary.

**3.1.4 Trace Evidence Handling Room:** A room for the collection, drying, processing and storage of associated physical evidence is needed. This room should have a drying rack and be temperature and humidity controlled.

**3.1.5 Body Transport:** Human remains must be transported from the scene in body bags.

**3.1.6 Radiography:** Full body x-rays should be taken for each body. Additional x-rays for antemortem/postmortem radiographic comparisons must also be taken for all unidentified bodies.

**3.1.7 Personal Protective Equipment (PPE):** Unfettered access to PPE must be provided to all personnel.

**3.1.8 Photography:** All decedents, personal effects, and other associated evidence must be photographed with a scale and case number in the photo.

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**3.1.9 Unidentified Bodies:** Body tags should include information concerning the age, sex, stature, and case number. The bodies should not be buried until more time has been allocated for identification (e.g., 30 days). Funeral homes should be included in the processing of bodies for burial. Postmortem fixatives, such as formalin, will help to preserve bodies should additional forensic tests need to be conducted.

**3.1.10 DNA:** DNA samples are sent to Spain for analysis. Additional laboratories should also be used in order to promote quality assurance and speed of analysis.