

## **DOD INSTRUCTION 5154.30**

# ARMED FORCES MEDICAL EXAMINER SYSTEM (AFMES) OPERATIONS

Originating Component:	Office of the Under Secretary of Defense for Personnel and Readiness
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Approved by:	Brad Carson, Acting Under Secretary of Defense for Personnel and Readiness

Purpose: This issuance:

• Establishes policy, assigns responsibilities, and provides direction for forensic medicine activities throughout DoD In accordance with the authority in DoD Directive (DoDD) 5124.02.

• Provides for the continued operation and governance of AFMES, a component of the Defense Health Agency (DHA) under DoDD 5136.13, in carrying out assigned functions, including those under Section 1471 of Title 10, United States Code (U.S.C.).

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## **SECTION 1: GENERAL ISSUANCE INFORMATION**

**1.1. APPLICABILITY.** This issuance applies to OSD, the Military Departments, the Office of the Chairman of the Joint Chiefs of Staff and the Joint Staff, the Combatant Commands, the Office of the Inspector General of the Department of Defense, the Defense Agencies, the DoD Field Activities, and all other organizational entities within the DoD (referred to collectively in this issuance as the "DoD Components").

#### 1.2. POLICY.

a. DoD maintains forensic medicine capabilities to support DoD and other external stakeholders.

b. The AFMES is established as a subordinate element of the DHA to:

(1) Perform forensic pathology investigations in accordance with Section 1471 of Title 10, U.S.C.

(2) Exercise DoD scientific authority for the identification of remains of DoD-affiliated personnel in deaths from past conflicts and other designated conflicts as provided in Section 1509 of Title 10, U.S.C.

c. DoD maintains expertise and capabilities in current and emerging forensic medicine disciplines, including but not limited to, forensic pathology, forensic anthropology, forensic odontology, DNA sciences, forensic toxicology, and mortality surveillance.

### **SECTION 2: RESPONSIBILITIES**

# **2.1. UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND READINESS** (USD(P&R)). The USD(P&R)):

a. Establishes policy and provides overall guidance for the AFMES.

b. Develops, in coordination with the Under Secretary of Defense for Policy, identification and laboratory policy in accordance with the AFMES and Section 1509 of Title 10, U.S.C.

c. Develops, in coordination with the Under Secretary of Defense for Acquisition, Technology, and Logistics, forensic medicine policy in accordance with DoDD 5205.15E.

# **2.2. ASSISTANT SECRETARY OF DEFENSE FOR HEALTH AFFAIRS (ASD(HA)).** Under the authority, direction, and control of the USD(P&R), the ASD(HA):

a. Develops policy for, provides policy oversight of, and monitors the implementation of this issuance to ensure effective and efficient forensic medicine activities throughout DoD.

b. Directs that forensic medicine activities are appropriately reflected in the Defense Medical Programming Guidance and in the DoD budget.

c. Receives technical advice from the Armed Forces Medical Examiner (AFME) through the Director, DHA, and advises the USD(P&R) on execution of the responsibilities for forensic medicine disciplines.

**2.3. DIRECTOR, DHA.** Under the authority, direction, and control of the USD(P&R) through the ASD(HA), the Director, DHA:

a. Exercises authority, direction, and control over the AFME.

b. Monitors daily operations, provides administrative support, and maintains operational and functional oversight, including responsibility to administer the budget, personnel, information technology, facilities, and other resources required to support the missions and functions of the AFMES.

c. Appoints a forensic pathologist certified by the American Board of Pathology as the AFME from among nominees from the Army, Navy, and Air Force.

d. Appoints a forensic pathologist certified by the American Board of Pathology to the Defense POW/MIA Accounting Agency (DPAA) to:

(1) Exercise scientific identification authority as provided in Section 1509 of Title 10, U.S.C.

(2) Establish identification and laboratory procedures in accordance with the AFMES.

(3) Advise the DPAA Director on forensic science disciplines.

e. Assures the ability of the AFME to carry out authorities under Section 1471 of Title 10, U.S.C.

f. Coordinates with the DoD Component heads to identify requirements for forensic medicine activities.

2.4. AFME. Under the authority, direction and control of the Director, DHA, the AFME:

a. Serves as:

(1) The Chief, AFMES, and leads the AFMES organization.

(2) The DoD scientific authority for the identification of remains of DoD-affiliated personnel in current deaths and of other deceased individuals for whom a death certificate has not been issued.

(3) The DoD scientific authority for the identification of remains of DoD-affiliated personnel in deaths from past conflicts and other designated conflicts, in accordance with Section 1509 of Title 10, U.S.C.

b. Delegates his or her authority under Section 1471 of Title 10, U.S.C., to the Deputy Armed Forces Medical Examiner, Deputy Medical Examiners, Regional Medical Examiners, and other board-certified forensic pathologists under the cognizance of the AFME when professional credentials are verified.

c. Develops and establishes appropriate standards, processes, and procedures to fulfill requirements for forensic medicine disciplines in accordance with DoDDs 1300.22E, 5205.15E, 6490.14; and Department of Defense Instruction (DoDI)) 5505.10, and 1300.18.

d. Develops, establishes, and maintains laboratory accreditation; training and professional certification; and research, development, test and evaluation programs.

e. Ensures the medical examiner whose primary duties include identification of remains in support of DPAA for past conflicts and other designated conflicts in accordance with Section 1509 of Title 10, U.S.C., is fully informed in order to establish identification and laboratory policy consistent with the AFMES.

f. Oversees:

(1) The identification of remains in accordance with Title 10, U.S.C., and DoDD 1300.22E.

(2) The operation of the central forensic toxicology laboratory for the DoD Drug Testing Program in accordance with DoDIs 1010.01 and 1010.16.

(3) The operation of the Armed Forces DNA Identification Laboratory (AFDIL) to perform DNA testing for identification of human remains from peacetime casualties and from current and past conflicts and other designated conflicts. As authorized by the Director, DHA or ASD(HA), the AFDIL may perform DNA testing for other federal agencies on a reimbursable basis.

(4) The operation of the Armed Forces Repository of Specimen Samples for the Identification of Remains (AFRSSIR) in accordance with DoD Directive 5400.11 and DoD 5400.11-R to collect and store specimen samples for the identification of the human remains of any Service member, DoD civilian employee, or contractor personnel supporting military forces in accordance with this instruction.

(5) The operation of a DoD medical mortality registry to archive pertinent medical records, autopsy reports, and investigative reports on every Service member death. The AFME identifies medical, circumstantial, epidemiologic, and prevention issues for military deaths, and makes recommendations for improvements in personnel protective equipment. Military mortality information is reviewed annually with the Director, DHA.

(6) Forensic pathology investigative services rendered to non-DoD entities on a cost reimbursable basis and in accordance with DoDD 1100.20 and DoDI 3025.21.

(7) Consultation (including, as required, diagnostic and consultative services and medico-legal opinions, testimony, and evidence) on medico-legal investigations and related matters to the judge advocates and criminal investigative agencies of the Military Services and other federal agencies.

(8) Medico-legal investigations, including autopsies and DNA studies for identification, to support eligible organizations outside DoD, in accordance with Section 2012 of Title 10, U.S.C. and DoDD 1100.20. Such support is provided on a reimbursable basis, unless providing support serves a valid military training purpose and the support is incidental to the training, in accordance with DoDD 1100.20.

g. Reviews at least annually, with the Director, DHA, the AFMES accomplishments, mission and organization changes, and budget execution.

h. Issues and maintains federal death certificates in cases subject to AFME's authority under Section 1471 of Title 10 and for all cases requiring an overseas death certificate.

i. Maintains an official seal and attests to the authenticity of official records under that seal.

#### 2.5. DOD COMPONENT HEADS. The DoD Component heads:

a. Annually review the forensic medicine services provided by the AFMES for effectiveness and efficiency in meeting their requirements and make appropriate recommendations for improvement to the Director, DHA. b. Ensure a DNA reference sample is sent to the AFRSSIR from individuals entering Military Service and all Service members have a sample on file with the AFRSSIR.

c. In accordance with DoDIs 3020.41, 6025.19, and 6490.03, require that Service members, DoD civilian employees, and contractor personnel who accompany military forces are not deployed without collection of a DNA reference specimen, collected in accordance with applicable procedures, to be used for identification of remains. The specimen will be forwarded to the AFRSSIR. No duplicate specimen samples will be held separately from the AFRSSIR.

d. Notify the AFME of the deaths of all Service members on active duty and inactive duty for training, including those retired due to disability within 120 days of death, if the death was the result of an injury or illness incurred while such a member was on a period of active duty. Allow the AFME to review all pertinent medical and dental records, investigative reports, photographs, evidence, x-rays, and retained pathologic materials on any autopsy performed in a DoD medical facility. Medical, casualty, mortuary, law enforcement, and other similar personnel of the DoD Component shall expeditiously report all such deaths to the AFME.

**2.6. SECRETARIES OF THE MILITARY DEPARTMENTS.** The DoD Component heads: In addition to the responsibilities in Paragraph 2.5., the Secretaries of the Military Departments each nominate a forensic pathologist certified by the American Board of Pathology to serve as the Armed Forces Medical Examiner as requested.

### **SECTION 3: OPERATIONS**

#### 3.1. FORENSIC PATHOLOGY INVESTIGATIONS AND AUTOPSIES

**a.** Authority. Under the authority, direction, and control of the AFME and in accordance with Section 1471 of Title 10, U.S.C., a medical examiner may conduct a forensic pathology investigation to determine the cause or manner of death of a deceased person if such an investigation is determined to be justified under circumstances described in Paragraph 3.1.b. The investigation may include an autopsy of the decedent's remains.

**b.** Basis for Investigation. A forensic pathology investigation of a death under this Section is justified if at least one of the circumstances in Paragraph 3.1.b.(1) and one of the circumstances in Paragraph 3.1.b.(2) exist:

(1) Justification under this Paragraph is a circumstance under which:

- (a) It appears the decedent was killed or that the cause of death was unnatural;
- (b) The cause or manner of death is unknown;
- (c) There is reasonable suspicion the death was caused by unlawful means;

(d) It appears the death resulted from an infectious disease or from the effects of a hazardous material that may have an adverse effect on the military installation or community involved; or

(e) The identity of the decedent is unknown.

(2) Justification under this Paragraph is a circumstance under which:

(a) The decedent was found dead or died at an installation garrisoned by units of the Military Services that is under the exclusive jurisdiction of the United States;

(b) The decedent was a Service member on active duty or inactive duty for training;

(c) The decedent was recently retired in accordance with Chapter 61 of Title 10, U.S.C., as a result of an injury or illness incurred while a member on active duty or inactive duty for training;

(d) The decedent was a civilian dependent of a Service member and was found dead or died outside of the United States;

(e) In any other authorized DoD investigation of matters which involves the death, a factual determination of the cause or manner of the death of the decedent is necessary; or

(f) In any other authorized investigation being conducted by the Federal Bureau of Investigation, the National Transportation Safety Board, or any other federal agency, an

authorized official of such agency with authority to direct a forensic pathology investigation requests the AFME conduct such an investigation.

(3) Consent of the next-of-kin is not required for any forensic pathology investigation carried out under Paragraph 3.1.b.(2) or any other applicable compulsory authority.

#### c. Determination of Justification.

(1) Subject to Paragraph 3.1.c.(2), the determination that a circumstance exists under Paragraph 3.1.b.(1) will be made by the AFME.

(2) A commander may, after consultation with the AFME, make the determination that a circumstance exists under Paragraph 3.1.b.(1) and require a forensic pathology investigation under this Section without regard to a determination made by the AFME if:

(a) In a case involving circumstances described in Paragraph 3.1.b.(2)(a), the commander is the commander of the installation where the decedent was found dead or died; or

(b) In a case involving circumstances described in Paragraph 3.1.b.(2)(b), the commander is the commander of the decedent's unit at a level in the chain of command exercising summary court-martial convening authority.

#### d. Limitation in Concurrent Jurisdiction Cases.

(1) The exercise of authority under this Section is subject to the exercise of primary jurisdiction for the investigation of a death:

(a) In the case of a death in a State (including for this purpose the District of Columbia, the Commonwealth of Puerto Rico, and Guam), by the State or a local government of the State; or

(b) In the case of a death in a foreign country, by that foreign country under any applicable treaty, status of forces agreement, or other international agreement between the United States and that foreign country.

(2) Paragraph 3.1.d.(1) does not limit the authority of the AFME to conduct a forensic pathology investigation of a death that is subject to the exercise of primary jurisdiction by another sovereign nation if the investigation by the other sovereign nation is concluded without a forensic pathology investigation that the AFME considers complete. A forensic pathology investigation is incomplete if the investigation does not include an autopsy of the decedent.

e. Processes. For a forensic pathology investigation under this Section, the AFME will:

(1) Designate one or more qualified pathologists to conduct the investigation.

(2) To the extent practicable and consistent with responsibilities under this Section, give due regard to any applicable law protecting religious beliefs.

(3) As soon as possible, notify the decedent's person authorized to direct disposition of human remains (PADD), as defined in DoDI 1300.18, if known, that the forensic pathology investigation is being conducted.

(4) As soon as practicable after the completion of the investigation, authorize release of the decedent's remains to the person authorized to direct disposition of human remains, if known.

(5) Promptly report the results of the forensic pathology investigation to the official responsible for the overall investigation of the death.

**f.** Other Forensic Pathology Cases. In other cases in which the AFME does not have jurisdiction under Paragraph 3.1.b., but where the AFME believes a medico-legal investigation is needed with respect to a death for which DoD has an interest in a forensic pathology investigation, the AFME will seek the assistance and cooperation of authorities who exercise jurisdiction for conducting such investigation. In all aircraft mishap investigations where the local medico-legal authority has retained jurisdiction, OAFME may provide assistance as requested by the investigation board.

**3.2 AFRSSIR.** The AFRSSIR will:

a. Be operated under rules and procedures that ensure, in accordance with DoDD 5400.11 and DoD 5400.11-R, the protection of privacy of the specimen samples and any DNA analysis of those samples.

b. Maintain specimens in accordance with applicable standards. Specimen samples maintained by the AFRSSIR may only be used for:

(1) The identification of human remains.

(2) The identification of any member of the Military Services, DoD civilian employee, or contractor personnel supporting military forces, who is suspected of being missing in action, a prisoner of war, unaccounted for, or detainee, and any other purpose for the benefit of such a member or person as authorized by the ASD(HA).

(3) Internal QA activities to validate processes for collection, maintenance and analysis of samples.

(4) A purpose for which the donor of the sample, a surviving primary next-of-kin as defined in DoDI 1300.18, or, in the case of a contractor or other civilian personnel, the legal next-of-kin, provides consent.

(5) A purpose as provided in Section 1565a of Title 10, U.S.C., when all of the following conditions are met:

(a) The responsible DoD official has received a valid order of a federal court or military judge. For this purpose, the Chief of the Trial Judiciary of each of the Military Departments is the military judge authorized to issue such an order.

(b) The specimen sample is needed for the investigation or prosecution of a felony or any sexual offense.

(c) The specimen sample can be provided in a manner that does not compromise the ability of the AFRSSIR to maintain a sample for the purpose of identification of remains.

(d) No other source for obtaining a specimen for DNA profile analysis is reasonably available.

c. Establish and maintain a procedure for destruction of samples. A routine destruction schedule will be followed, under which samples will be retained for not more than 50 years.

(1) Individual specimen samples will be destroyed at the request of the donor following the conclusion by the donor of completed military service or other applicable relationship to DoD.

(2) On receipt of such a request, the AFRSSIR will destroy the sample within 180 calendar days and send notification to the donor.

(3) If the donor is deceased, destruction may be requested by the applicable primary or legal next-of-kin.

**3.3. OTHER AFMES FUNCTIONS.** Consultation (including, as required, diagnostic and consultative services and medico-legal opinions, testimony, and evidence) on medico-legal investigations will, absent extraordinary circumstances as determined by the AFME, be provided under the standard operating procedures of the AFMES.

a. Consultation will include accession of the material into the AFMES case repository as a Government medical record, internal QA review, and the availability of the consulting pathologist to all interested parties with a need to know or authorization for access.

b. AFMES pathologists are normally unavailable for nomination or assignment by convening authorities or military judges as defense consultants or members of the defense team, or other position requiring protection of communications and submitted case materials as privileged attorney-client communications.

## GLOSSARY

#### G.1. ACRONYMS.

AFDIL	Armed Forces DNA Identification Laboratory
AFME	Armed Forces Medical Examiner
AFMES	Armed Forces Medical Examiner System
AFRSSIR	Armed Forces Repository of Specimen Samples for the Identification of Remains
ASD(HA)	Assistant Secretary of Defense for Health Affairs
DHA	Defense Health Agency
DNA	deoxyribonucleic acid
DoDD	DoD Directive
DoDI	DoD Instruction
DPAA	Defense POW/MIA Accounting Agency
QA	quality assurance
U.S.C.	United States Code
USD(P&R)	Under Secretary of Defense for Personnel and Readiness

G.2. **DEFINITIONS.** These terms and their definitions are for the purpose of this issuance.

**autopsy.** An examination and dissection of a dead body by a physician for the purpose of determining the cause, mechanism, or manner of death, or the seat of disease, confirming the clinical diagnosis, obtaining specimens for specialized testing, retrieving physical evidence, identifying the deceased or educating medical professionals and students.

**completed military service.** Includes active duty service, all service as a member of the Selected Reserve, the Individual Ready Reserve, the Standby Reserve, the Retired Reserve, or the Retired Regular Permanent.

**forensic medicine disciplines.** Those forensic disciplines supporting the DoD's medical missions. They include but are not limited to, forensic pathology, forensic anthropology, forensic odontology, DNA sciences, forensic toxicology, and mortality surveillance.

**forensic pathology.** The branch of medicine concerned with determining the cause and manner of death and identifying the deceased through medical and scientific means, including the autopsy process.

**forensic pathology investigation.** A systematic process of gathering, recording, and preserving evidence and information for purposes of positive identification of the deceased, documentation of trauma and preexisting conditions, and investigative correlations to include an interpretation of injury patterns. The goal of a forensic pathology investigation is to determine a cause and

manner of death compatible with the scene of death, terminal events, and the background of the deceased and to assist with criminal and safety-board investigations. For the purposes of this instruction, the terms forensic pathology investigation and medico-legal death investigation are synonymous.

person authorized to direct disposition of human remains. Defined in DoDI 1300.18.

#### REFERENCES

- DoD Directive 1100.20, "Support and Services for Eligible Organizations and Activities Outside the Department of Defense," April 12, 2004
- DoD Directive 1300.22E, "Mortuary Affairs Policy," October 30, 2015
- DoD Directive 5124.02, "Under Secretary of Defense for Personnel and Readiness (USD(P&R))," June 23, 2008
- DoD Directive 5136.13, "Defense Health Agency (DHA)," September 30, 2013
- DoD Directive 5205.15E, "DoD Forensic Enterprise (DFE)," April 26, 2011
- DoD Directive 5400.11, "DoD Privacy Program," October 29, 2014
- DoD Directive 6490.14, "Defense Suicide Prevention Program," June 18, 2013
- DoD Instruction 1010.01, "Military Personnel Drug Abuse Testing Program (MPDATP)," September 13, 2012
- DoD Instruction 1010.16, "Technical Procedures for the Military Personnel Drug Abuse Testing Program (MPDATP)," October 10, 2012
- DoD Instruction 1300.18, "Department of Defense (DoD) Personnel Casualty Matters, Policies, and Procedures," January 8, 2008, as amended
- DoD Instruction 3020.41, "Operational Contract Support," December 20, 2011
- DoD Instruction 3025.21, "Defense Support of Civilian Law Enforcement Agencies," February 27, 2013
- DoD Instruction 5505.10, "Criminal Investigations of Noncombat Deaths," August 15, 2013
- DoD Instruction 6025.19, "Individual Medical Readiness (IMR)," June 9, 2014
- DoD Instruction 6490.03, "Deployment Health," August 11, 2006
- DoD 5400.11-R, "Department of Defense Privacy Program," M ay 12, 2007

United States Code, Title 10