

Pathology/Biology Section - 2014

G126 Scientific Working Group on Disaster Victim Identification (SWGDVI) Update

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After attending this presentation, attendees will: (1) recognize efforts being taken to establish guidance for mass fatality operations; and, (2) understand concepts of fatality management that undergird developing standards.

This presentation will impact the forensic science community by informing local medical examiners and coroners to be aware that guidelines for fatality management are being developed.

The Scientific Working Group on Disaster Victim Identification (SWGDVI) was formed to advance the scientific basis for disaster victim identification by assembling professionals from the DVI community, including international participants, in a collaborative effort to exchange ideas regarding scientific analysis methods, protocols, training, and research related to DVI. The first meeting of the SWGDVI convened in the summer of 2010. The Committee has grown to 31 members and has retained international membership. Permanent members of the Board include National Association of Medical Examiners (NAME), the International Association of Coroners & Medical Examiners (IAC&ME), the National Transportation Safety Board (NTSB), the Federal Bureau of Investigation (FBI), the Department of Health and Human Services Assistant Secretary for Preparedness and Response (DHHS (ASPR)), the Department of Defense Armed Forces Medical Examiner System (DOD (AFMES)), the International Criminal Police Organization (INTERPOL), the International Committee of the Red Cross (ICRC), and the International Commission on Missing Persons (ICMP) and is supplemented by individual members with varying specific expertise and The Board oversees 11 committees: Search and Recovery; Odontology; Molecular Biology/DNA; Friction Ridge Analysis; Pathology; Anthropology; Data Management; Victim Identification Center/Family Assistance Center; DVI Reconciliation and Quality Assurance; DVI Management; and, Ethics. The SWGDVI Board recommends that jurisdictions predetermine a set trigger point, e.g., suspicion of ten victims — initiate DVI operations. The SWGDVI Board believes that successful disaster victim identification efforts begin with, and are reliant upon, efficient, effective, and timely search-and-recovery operations. Documentation of the place and position of the remains may be important for identification and investigation. Hence, the Board believes that those medicolegal authorities that rely on others to recover remains, particularly without their own office input or involvement, are doing their jurisdiction a disservice. Data collection centers, such as call centers, are important to set up and assist with the development of good victim manifests. The Victim Identification Center (VIC) is a component of the Family Assistance Center (FAC) in which families and loved ones are gathered to obtain antemortem data, including DNA specimens, to compare against the postmortem data developed in the morgue. Postmortem data is obtained from pathologists, anthropologists, friction ridge analysis, and molecular biology/DNA testing forensic science experts. Data management systems are crucial to large-scale operations to organize and utilize the data. The American National Standards Institute-National Institute of Standards and Technology (ANSI-NIST) (500-290) format standards and the National Information Exchange Model (NIEM) semantic standards have been developed which may permit systems to exchange DVI biometric data. Outside database searches are also important; fingerprints, dental, and DNA data may be searched against several databases. A common mistake is to rely solely on a single fingerprint database search. Eventually, the data must be reconciled to develop the identification for every human remain. The entire set of DVI operations must be managed, financially documented, and quality assured. Families must be kept informed of the progress of the DVI operations. The ethical principles that must be considered during all DVI operations are individual autonomy, human dignity, and respect for persons. After three years in development, specific guidelines and best practices are being promulgated by the SWG. These documents, available on the SWGDVI website, are intended to be of use to all medicolegal authorities and those who interact with them. The SWGDVI hopes that these documents will be consulted and be of value during the development of mass disaster plans as well as serve as references for fatality management operations when an incident occurs.

SWGDVI, Fatality Management, Mass Disasters