Sudden, Unexplained Infant Death Investigation

curriculum guide
Sudden, Unexplained Infant Death Investigation

Curriculum Guide
Sudden, Unexplained Infant Death Investigation

Curriculum Guide

Developed and Approved by the National Steering Committee and Development Core Team for Sudden, Unexplained Infant Death Investigation

March 2007
## National SUIDI Steering Committee

<table>
<thead>
<tr>
<th>Name</th>
<th>Title/Role</th>
<th>Organization/Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sheriff Larry Amerson</td>
<td>Chairman Training Committee</td>
<td>National Sheriff's Association, Anniston, AL</td>
</tr>
<tr>
<td>Robert N. Anderson, Ph.D.</td>
<td>Chief Medical Examiner</td>
<td>National Center for Health Statistics, Hyattsville, MD</td>
</tr>
<tr>
<td>Thomas Andrew, M.D.</td>
<td>Chief Medical Examiner</td>
<td>New Hampshire State Medical Examiner's Office, Concord, NH</td>
</tr>
<tr>
<td>Brian Bishop</td>
<td>Project Director</td>
<td>National Association of State EMS Directors, Frankfort, KY</td>
</tr>
<tr>
<td>Sarah Blanding, R.D.</td>
<td>Project Director</td>
<td>Maternal and Infant Health Branch, Atlanta, GA</td>
</tr>
<tr>
<td>Susan Broderick, J.D.</td>
<td>Project Director</td>
<td>National District Attorneys Association, Alexandria, VA</td>
</tr>
<tr>
<td>Suzanne Bronheim, Ph.D.</td>
<td>Project Director</td>
<td>National Center for Cultural Competence, Washington, DC</td>
</tr>
<tr>
<td>Stephanie Bryn, M.P.H.</td>
<td>Project Director</td>
<td>Health Resources and Services Administration, Rockville, MD</td>
</tr>
<tr>
<td>Kathleen Buckley, M.S.N., C.N.M.</td>
<td>Director</td>
<td>National Fetal and Infant Mortality Review Programs, Washington, DC</td>
</tr>
<tr>
<td>Mary Case, M.D.</td>
<td>Chief Medical Examiner</td>
<td>St. Louis County Medical Examiner's Office, St. Louis, MO</td>
</tr>
<tr>
<td>Marie Chandick</td>
<td>President</td>
<td>Association of SIDS and Infant Mortality Programs, Stony Brook, NY</td>
</tr>
<tr>
<td>Steven Clark, Ph.D.</td>
<td>Project Director</td>
<td>Occupational Research and Assessment, Inc., Big Rapids, MI</td>
</tr>
<tr>
<td>Tracey Corey, M.D.</td>
<td>State Chief Medical Examiner</td>
<td>Kentucky Office of the State Medical Examiner, Louisville, KY</td>
</tr>
<tr>
<td>Theresa Covington, M.P.H.</td>
<td>Director</td>
<td>National MCH Center for Child Death Review, Okemos, MI</td>
</tr>
<tr>
<td>Laura Crandall, P.T., M.A.</td>
<td>The SUDC Program</td>
<td>Hackensack, NJ</td>
</tr>
<tr>
<td>Karla Damus, M.S.P.H., Ph.D., R.N.</td>
<td>Project Coordinator</td>
<td>National March of Dimes, White Plains, NY</td>
</tr>
<tr>
<td>Terry W. Davis, Ed.D.</td>
<td>National Training Coordinator</td>
<td>Centers for Disease Control and Prevention, Atlanta, GA</td>
</tr>
<tr>
<td>J. Scott Denton, M.D.</td>
<td>Project Director</td>
<td>College of American Pathologists, Office of the Medical Examiners-Cook County, Chicago, IL</td>
</tr>
</tbody>
</table>
Mary Dudley, M.D.
Chief Medical Examiner
American Forensic Nurses Association
Wichita, KS

Mary Fran Ernst, B.S.
American Board of
Medicolegal Death Scene Investigators
Medicolegal Death Investigator
St. Louis, MO

Andrea Furia
Back to Sleep Campaign
National Institute of Child Health and Human Development
Bethesda, MD

Joyce Gulley, M.A., L.P.C.
National Association of Counselors
Oakland County Medical Examiner
Pontiac, MI

Randy Hanzlick, M.D.
Fulton County Medical Examiner
Professor of Forensic Pathology, Emory University
Atlanta, GA

Kent Hymel, M.D.
American Academy of Pediatrics
Committee on Child Abuse and Neglect
Falls Church, VA

Jeffrey Jentzen, M.D.
Chief Medical Examiner
Milwaukee County
Milwaukee, WI

Henry Krous, M.D.
Director of Pathology
Children’s Specialist of San Diego
San Diego, CA

Vincent Lafronza, Ed.D., M.S.
Senior Fellow
National Indian Health Board
Washington, DC

Mary Leary, J.D.
National District Attorneys Association
Alexandria, VA

Rebecca T. Leeb, Ph.D.
Division of Violence Prevention
Centers for Disease Control and Prevention
Atlanta, GA

Bruce Levy, M.D.
National Association of Medical Examiners
Chief Medical Examiner for the State
of Tennessee
Nashville, TN

Commander Craig Mallak, M.D., J.D.
Armed Forces Chief Medical Examiner
Office of the Armed Forces Medical Examiner
Rockville, MD

Mike Malloy, M.D.
American Academy of Pediatrics
Task Force on Infant Sleep Position and SIDS
Galveston, TX

Marian MacDorman, Ph.D.
National Center for Health Statistics
Hyattsville, MD

Stacey Mitchell, M.S.N., R.N.
Senior Forensic Nurse Investigator
International Association of Forensic Nurses
Houston, TX

Peter A. Modafferi
Chief of Detectives
International Association of Chiefs of Police
Rockland County District Attorney’s Office
New City, NY

Julie Moreno
Office of Minority Health
U. S. Department of Health and Human Services
Rockville, MD
Detective Mary Murphy
International Association of Chiefs of Police
Rockland County District Attorney's Office
New City, NY

P. Michael Murphy, D.B.A.
International Association of Coroners and Medical Examiners
Clark County Coroner's Office
Las Vegas, NV

Susan D. Narveson
Acting Chief
Investigative and Forensic Sciences Division
National Institute of Justice
Washington, DC

Catherine Nolan, M.S.W., A.C.S.W.
Director
Office on Child Abuse and Neglect/Children's Bureau
U.S. Department of Health and Human Services
Washington, DC

Steve Nunez, B.A.
Program Manager
New Mexico Office of the Medical Investigator
Albuquerque, NM

Jerry Pena
Assistant Forensic Science Manager
International Association for Identification
Austin, TX

Debra Prosnitz
Research Analyst
National Conference of State Legislatures
Washington, DC

Brad Randall, M.D.
Aberdeen Area-Indian Health Service,
Perinatal-Infant Mortality Review Committee
Sioux Falls, SD

Deborah Robinson
Deputy Director
SIDS Foundation of Washington
Kirkland, WA

Richard N. Rucker
Ohio Department of Public Safety
National Association of EMS Directors
Columbus, OH

Carrie Shapiro-Mendoza, Ph.D., M.P.H.
Maternal and Infant Health Branch
Centers for Disease Control and Prevention
Atlanta, GA

Detective/Sgt. Richard R. Snyder, M.B.A.
Indiana Commission on Abused and Neglected Children
Marion County Sheriff's Department
Indianapolis, IN

Hal Stratton, J.D.
Chairman
U.S. Consumer Product Safety Commission
Washington, DC

Judith Thierry, D.O., M.P.H.
Maternal and Child Health Coordinator
Indian Health Service
Rockville, MD

Kay Tomashek, M.D., M.P.H.
Maternal and Infant Health Branch
Centers for Disease Control and Prevention
Atlanta, GA

Ernie Weyand
Agent
Federal Bureau of Investigation
Billings, MT

R. Doggett Whitaker, Jr.
National Funeral Directors Association, Inc.
Newberry, SC

Marian Willinger, Ph.D.
Special Assistant for SIDS
National Institute of Child Health and Human Development
Rockville, MD
Development Core Team

Captain Donald Burbrink, B.S.
Louisville Metro Police Department
Louisville, KY

Julia Chamberlain, E.M.T.-P, I/C, B.S.N., R.N.
International Association of Forensic Nurses
Leslie, MI

Steven C. Clark, PhD
Occupational Research and Assessment
Big Rapids, Michigan

Kathleen Diebold, M.A.
Chief Investigator/Child Death Specialist
Medical Examiner Office
St. Louis, MO

Roberta Geiselhart, B.S.N.
Supervisor of Investigations
Hennepin County Medical Examiner Office
Maples, MN

Fern R. Hauck, M.D., M.S.
Department of Family Medicine
University of Virginia Health System
Charlottesville, VA

Laura S. Hillman, M.D.
Professor, Child Health and Neonatology
University of Missouri-Columbia
Columbia, Missouri

Robert Hinnen, M.S.W.
Program Director
SIDS Center of New Jersey
Hackensack, NJ

Vernon M. Keenan
Director
Georgia Bureau of Investigation
Decatur, GA

Marian MacDorman, Ph.D.
National Center for Health Statistics
Hyattsville, MD

Don Mauro, M.A.
Captain, Los Angeles Sheriff’s Department,
Retired
Santa Monica, CA

James May
Forensic Investigator
Tooele, UT

Terry Nerbonne, Ph.D.
Ferris State University
School of Criminal Justice
Big Rapids, MI

Chief Thomas O’Connor
Chief of Police
International Association of Chiefs of Police
Maryland Heights, MO

Thomas Streed, Ph.D.
CEO
Forensic Consultation International
San Diego, CA

Cathy Stueckermann, J.D., M.P.A.
CHR and EMS Program
Indian Health Service
Rockville, MD

Bradley Thach, M.D.
Division of Newborn Medicine
Washington University School of Medicine
St. Louis, MO

Bruce Walz, Ph.D.
Department of Emergency Health Services
University of Maryland, Baltimore County
Baltimore, MD
National SUIDI Steering Committee................................................................. 6
Development Core Team.................................................................................. 9
Preface.............................................................................................................. 14
Introduction...................................................................................................... 14
How This Guide was Developed .................................................................... 15
How to Use This Guide................................................................................... 18
Infant Death Investigator Curriculum ............................................................

Section 1: Infant Death Investigation Foundation Skills................................. 25
1. Sudden, Unexplained Infant Deaths............................................................ 28
   1.1 Types of Sudden, Unexplained Infant Death......................................... 29
   1.2 Data Collection and Reporting Tools................................................. 30
2. Infant Growth and Development................................................................. 31
   2.3 Infant Growth..................................................................................... 32
   2.4 Infant Developmental Milestones...................................................... 33
   2.5 Infant Feeding, Diet, and Risks......................................................... 34
3. Interviewing Psychology............................................................................ 35
   3.6 Interviewing Awareness .................................................................... 36
   3.7 Assessing Content and Behavior...................................................... 37
   3.8 The Investigative Interview.............................................................. 38
Section 2: Case Interviews.........................................................................................39
4. Interviewing and Investigative Data Collection ..................................................42
  4.9 Initial Case and Witness Information Gathering .............................................43
  4.10 Recent Infant Activities and Behavior............................................................44
  4.11 Medical Information and Pregnancy History ...............................................45
  4.12 Dietary and Feeding Information...................................................................46

5. Conducting Witness Interviews............................................................................47
  5.13 Establish and Document EMS Involvement.................................................48
  5.14 Establish and Document Law Enforcement Involvement.............................49
  5.15 Establish and Document Hospital Involvement............................................50

Section 3: Infant Scene Investigation.......................................................................51

6. Conducting Scene Investigations.........................................................................54
  6.16 Document the Scene and Body .................................................................55
  6.17 Document Items Removed from the Scene .................................................56
  6.18 Document Day Care/Babysitting Scene.......................................................57

7. Conducting the Doll Reenactment ....................................................................58
  7.19 Explain Reenactment to Family Member/Caregiver.................................59
  7.20 Have Placer/Finder Demonstrate Infant Positions ....................................60
  7.21 Photograph Reenactment ...........................................................................61
  7.22 Debrief Family Member/Caregiver...............................................................62

Section 4: Pre-Autopsy and Post-Autopsy Reporting ...........................................63

8. The Pre-Autopsy Report .....................................................................................66
  8.23 Document Case Information ......................................................................67
  8.24 Document Sleeping Environment ...............................................................68
  8.25 Document Infant History ............................................................................69
  8.26 Document Family Information ....................................................................70
  8.27 Document External Examination ..............................................................71
  8.28 Develop Narrative Report to the Pathologist .............................................72

9. Certification of Unexplained Infant Deaths.......................................................73
  9.29 Sudden, Unexplained Infant Death Certification .......................................74
  9.30 Reporting Cause of Death in SIDS-Like Cases .......................................75
Appendix: Performance Assessment Forms

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-1</td>
<td>Sudden, Unexplained Infant Deaths</td>
<td>79</td>
</tr>
<tr>
<td>1-2</td>
<td>Infant Growth and Development</td>
<td>80</td>
</tr>
<tr>
<td>1-3</td>
<td>Interviewing Psychology</td>
<td>81</td>
</tr>
<tr>
<td>2-4</td>
<td>Interviewing and Investigative Data Collection</td>
<td>82</td>
</tr>
<tr>
<td>2-5</td>
<td>Conducting Witness Interviews</td>
<td>83</td>
</tr>
<tr>
<td>3-6</td>
<td>Conducting Scene Investigations</td>
<td>84</td>
</tr>
<tr>
<td>3-7</td>
<td>Conducting the Doll Reenactment</td>
<td>85</td>
</tr>
<tr>
<td>4-8</td>
<td>The Pre-Autopsy Report</td>
<td>86</td>
</tr>
<tr>
<td>4-9</td>
<td>Certification of Unexplained Infant Deaths</td>
<td>87</td>
</tr>
</tbody>
</table>
Preface

This curriculum guide was prepared with the idea of improving teaching and evaluation techniques in medicolegal death investigator education and training programs. It provides instructional outlines and references designed to assist the instructor in the medicolegal education program. Covering only the topics delineated in the publication Sudden, Unexplained Infant Death Investigation, this guide is not intended to be an exhaustive treatment of the various professions represented within the multidisciplinary job title of Death Investigator or subspeciality of Infant Death Investigation Specialist. It should be sufficiently comprehensive, however, to assist subject matter experts in designing instructional plans for teaching the recommended investigative guidelines. In addition, the various performance objectives and criterion statements written for each task provide a consistent means of establishing evaluation standards for program completers.

The curriculum guide is representative of the occupational job duty categories, which list major activities and tasks performed by an entry-level death investigator. The curriculum guide contains a resource list and criteria statements that indicate the minimum standards of performance accepted as evidence of competence in completion of the task by participants in the field of infant death investigation. This is a performance-based curriculum guide, which helps the instructor develop a teaching style wherein students learn by doing. It is based on task analysis and reflects the skills, knowledge, and attitudes that employers expect incumbent investigators to possess.

It is the intent of all those involved in the development of this guide that it be used to provide relevant training or retraining for employment in the rapidly expanding field of medicolegal death investigation.

Introduction

The fact that an instructor is well qualified in his/her trade or occupation provides no assurance that he or she will be successful in attempting to teach the occupation to others. However valuable, occupational experience alone does not make one an instructor. In order to teach, it is first necessary to identify the expected outcomes of each training experience. Often, subject matter experts fail as instructors because they neglect skills they consider “common sense” to performance of the job. In other words, the skills that,
over time, become habit never appear on the lesson plans as knowledge to be mastered and applied in the field. This failure manifests itself in student confusion, frustration, and, ultimately, poor job performance. This curriculum guide is designed to enable the subject matter expert to develop instructional plans that emphasize the essentials of infant death investigation.

To succeed in the instruction of others, the teacher must organize and plan each lesson using sound instructional methodologies and realistic performance-based outcomes. This curriculum guide has been prepared to assist those wishing to teach introductory infant death investigation following Sudden, Unexplained Infant Death Investigation: A Systematic Training Program for the Professional Infant Death Investigation Specialists, released by the Centers for Disease Control and Prevention (CDC) in June 2006. This guide deals with the tasks each infant death investigator must learn to perform and apply if he or she is to have success in the field. The performance tasks in this guide are confined to those areas covered in the training text.

How This Guide Was Developed

The methodology selected for this occupational research required collection of data from a sample of current subject matter experts, practitioners from the field who perform daily within the occupation being investigated. This “criterion” was used to identify members of the various multidisciplinary groups that provided the data for this research. The National Steering Committee and Core Development Team were formed for the purpose of developing national guidelines for conducting sudden, unexplained infant death investigations (SUIDI).

National Steering Committee

The National Steering Committee members represent an independent multidisciplinary group of international, national, and state organizations whose constituents are responsible for some aspect of the infant death investigation and its outcomes. Each member of committee was selected by the CDC based on nominations made by various associations. The rationale for their involvement was twofold: (a) they represent the diversity of the profession nationally, and (b) their members are the key stakeholders in the outcomes of this research. Each organization has a role in conducting and/or following up infant death investigations and in implementing the guidelines.
Development Core Team

The Core Team was made up of representatives from various regions of the United States (i.e., Northeast, Southeast, Midwest, Southwest, West) and agencies typically involved in the investigation and follow-up of SUID nationally. These representatives were practitioners, having specific knowledge regarding the investigation of infant death, and had participated in the training of new investigators.

Research Method

The DACUM method was used for conducting both the occupational and task analysis necessary to determine the essential elements of the death investigator’s job. The resulting task list, or job profile chart, was used to construct each lesson outline contained in this curriculum guide. The DACUM process is based on the following principles:

1. Expert workers are better able to describe/define their jobs than anyone else.
2. Any job can be effectively and sufficiently described in terms of the tasks that successful workers in that occupation perform.
3. All tasks have direct implications for the knowledge and attitudes that workers must have in order to perform the tasks correctly.

The Core Team made up the development committee, and the National Steering Committee made up the validation or administrative committee. Both committees over the course of approximately 14 months followed the procedural steps listed below:

1. Orient committee members to the development process.
2. Review job or occupational area under investigation.
3. Identify the general areas of responsibility.
4. Identify the specific tasks performed in each duty area.
5. Review and refine task and duty statements.
6. Sequence task and duty statements.
7. Entry-level criteria.
8. Training objectives for each task.

The tasks that were verified as essential became the research base for developing each task sheet contained within this guide. The information resulting from the task analysis and performance objective development is presented in each task sheet. The information on the task sheets can be incorporated into modules, learning guides, lesson plans, or other types of instructional materials for student and instructor use.
The development process used is particularly well suited for formal educational institutions as well as job-specific training program developers that are planning to implement competency-based education or training programs, since the first step in the development of any competency-based training program is the identification and verification of performance tasks upon which the instructional program is based. The performance tasks identified and delineated in this guide will assist the training program developer as well as the instructors in planning consistent, “real world” training programs. The addition of the performance objectives and assessment forms will enable the learner to acquire much-needed hands-on skills during the training period.

Fig. 1. The curriculum guide’s structure.
How to Use This Guide

Although each jurisdiction may be considered “different,” it is the developers’ contention that sound death scene investigation begins with consistent behavior at each death scene, regardless of geographic location. This curriculum guide is divided into five sections, containing 13 chapters and 58 performance tasks or units of instruction, each with a set of steps/elements that, when completed, enable the learner to succeed at the unit. Each unit of instruction is considered essential to the death investigator’s job.

The organization or individual planning to train or retrain death investigators should review the Sudden, Unexplained Infant Death Investigation: Guidelines for the Scene Investigator before attempting to use this curriculum guide. In fact it is strongly recommended that each student enrolled in any death investigator basic course should receive a copy of that publication. Once the trainer has a clear understanding of the infant death investigation guide, he/she can begin using the instruction sheets presented in this curriculum guide. Additional materials and support personnel (subject matter experts) may be required to successfully conduct death investigator training following this guide.

The curriculum guide is divided into sections, chapters, units, and steps/elements. There are five sections, 13 chapters, 58 units of instruction, and more than 300 steps/elements. The users of this guide should be well versed in the skill required to investigate death. Because of the multidisciplinary approach that must be taken when selecting instructors for training death investigation, this guide is designed to allow for multi-instructor flexibility. There are three types of forms or sheets within this guide:

1. The Section Sheets.
2. The Chapter Sheets.
3. The Unit Sheets.

For quick reference, a Sheet ID Bar (Fig. 2) is located at the top of each sheet. This is used to locate specific section, chapter, and unit sheets within the guide.

**Fig. 2. Sheet ID Bar.**
The Section Sheets

The section sheets are used at the beginning of each Section and contain specific information regarding the instructional content of the section's duties. Each duty area covered within that section is listed along with the section's terminal performance objective. Instructors use section sheets to quickly identify or review training topics “at a glance.” Below (Fig. 3) is a sample section sheet.

Fig. 3. A Section Sheet.
The Chapter Sheets

The chapter sheets are used at the beginning of each duty area and contain specific information regarding the instructional content of that chapter and units of instruction covered. Each unit covered within that chapter area is listed along with the performance criteria for the duty. In addition to the units, tools, equipment, and resources are listed to assist in preparing the instructor for training each unit. As with section sheets, instructors use chapter sheets to quickly identify or review the training units “at a glance.” Unit statements are much more specific than chapters and, in some cases, actually become the titles of individual training classes. Below (Fig. 4) is a sample chapter sheet.

Fig. 4. A Chapter Sheet.
The Unit Sheets

The unit sheets are designed to allow subject matter experts to construct specific lesson plans for actual use during classroom instruction. Each unit sheet contains the specific steps and/or elements required to perform the task. In addition to the steps/elements is an interim performance objective. This objective is written specifically for the performance of the training unit using this sheet. Both instructors and students may use these sheets; instructors use them to write lesson plans, and students use them to prepare for both classroom and performance instruction. Finally, there is a section for planning notes. This allows the skilled instructor to simply “teach” directly from the unit sheets, with the occasional “note” to remind them of specific details related to the unit at hand. Below (Fig. 5) is a sample unit sheet.

Fig. 5. A Unit Sheet.
The Investigator Performance Assessment Forms (checklists)

The investigator performance assessment forms, or simply the performance checklists, are designed for consistent evaluation of students at the conclusion of each duty area. Each of the duty areas has a checklist associated with it, each containing the related task statements. After the student has performed the task, the instructor simply indicates the level of performance by checking one of the boxes to the right of the task statement. This allows for both lab and on-the-job training (OJT) and evaluation of skills. Students receiving a less than acceptable rating can continue to attempt the performance of the task until they achieve a check in one of the grayed boxes (good or excellent).

The checklists provide both students and instructors with consistent documentation relative to the achievement of specific training goals. Below is a sample of a performance checklist.

Fig. 6. An Investigator Performance Assessment Form or Performance Checklist.
Lesson Plans

As a part of the train-the-trainer continuation grant, task-specific lesson plans will be developed and pilot-tested for implementation on a national level. These lesson plans will be designed for use by both traditional educational institutions seeking to upgrade their curriculum and state/locally sponsored training seminars seeking to upgrade active scene investigators. In addition, these plans will be practical enough for self-study.

Fig. 7. The curriculum guide’s structure and flow.
SECTION 1: Infant Death Investigation Foundation Skills
<table>
<thead>
<tr>
<th>SECTION:</th>
<th>CHAPTERS: ALL</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECTION:</td>
<td>1 Infant Death Investigation Foundation Skills</td>
</tr>
<tr>
<td>CHAPTERS:</td>
<td>1 Sudden, Unexplained Infant Deaths</td>
</tr>
<tr>
<td></td>
<td>2 Infant Growth and Development</td>
</tr>
<tr>
<td></td>
<td>3 Interviewing Psychology</td>
</tr>
</tbody>
</table>

**TERMINAL PERFORMANCE OBJECTIVE:**

At the conclusion of this training, the investigator will be able to demonstrate and apply the necessary foundation skills for conducting a complete infant death investigation as outlined in the SUIDI Training Text.
### SECTION: 1  
#### CHAPTER: 1  
#### UNITS: ALL

| SECTION: | 1 | Infant Death Investigation Foundation Skills |
| CHAPTER:  | 1 | Sudden, Unexplained Infant Deaths |

**UNITS:**

1. Types of Sudden, Unexplained Infant Death
2. Data Collection and Reporting Tools

**CRITERIA:** Competence in the task will be recognized when the investigator correctly explains the various causes of sudden, unexplained infant death and the importance of the scene investigation in establishing cause of death using appropriate terminology.

**TOOLS AND EQUIPMENT:**
- SUIDI Reporting Forms (various)
- General Scene Reporting Forms

**RESOURCES:**
- Case Scenarios
- SUIDI Training Text
- NIJ Death Scene Guidelines
- SUIDI Scene Guidelines
## Section 1: Infant Death Investigation Foundation Skills

### Chapter 1: Sudden, Unexplained Infant Deaths

#### Unit 1: Types of Sudden, Unexplained Infant Death

<table>
<thead>
<tr>
<th>Steps/Elements</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1</td>
<td>Describe sudden infant death syndrome (SIDS)</td>
</tr>
<tr>
<td>1.2</td>
<td>Describe types of asphyxia or suffocation deaths</td>
</tr>
<tr>
<td>1.3</td>
<td>Describe metabolic error deaths</td>
</tr>
<tr>
<td>1.4</td>
<td>Describe death due to trauma or injury</td>
</tr>
<tr>
<td>1.5</td>
<td>Describe deaths from unknown causes</td>
</tr>
</tbody>
</table>

### Interim Performance Objective:

Given a SUID scene scenario, the investigator will determine the type of SUID presented.

### Planning Notes:
### STEPS/ELEMENTS:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1</td>
<td>Describe the importance of the SUIDI</td>
</tr>
<tr>
<td>2.2</td>
<td>Describe SUIDI Reporting Form function</td>
</tr>
<tr>
<td>2.3</td>
<td>Describe SUIDI Reporting Form sections</td>
</tr>
<tr>
<td>2.4</td>
<td>Describe standardized pre-autopsy reporting</td>
</tr>
</tbody>
</table>

### INTERIM PERFORMANCE OBJECTIVE:

Given a SUID scenario, the investigator will determine the investigative approach, describe necessary critical data to be collected at the scene, and report all critical data to the forensic pathologist. Competency will be recognized when all appropriate scene data is identified, documented, and reported to the pathologist before the autopsy.

### PLANNING NOTES:
### SECTION: 1

### CHAPTER: 2

### UNITS: ALL

<table>
<thead>
<tr>
<th>SECTION: 1</th>
<th>CHAPTER: 2</th>
<th>UNITS: ALL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Infant Death Investigation Foundation Skills</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Infant Growth and Development</td>
<td></td>
</tr>
</tbody>
</table>

#### UNITS:

<table>
<thead>
<tr>
<th></th>
<th>Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Infant Growth</td>
</tr>
<tr>
<td>4</td>
<td>Infant Developmental Milestones</td>
</tr>
<tr>
<td>5</td>
<td>Infant Feeding, Diets, and Risks</td>
</tr>
</tbody>
</table>

#### CRITERIA:

Competence in this chapter will be recognized when the investigator can apply all infant growth and development skills to various infant death case studies.

#### TOOLS AND EQUIPMENT:

- SUIDI Reporting Forms
- Denver Developmental Growth Charts
- Ross Laboratories Growth Charts

#### RESOURCES:

- Case Scenarios
- SUIDI Training Text
- SUIDI Scene Guidelines
- Denver Development Materials, Inc.
- Ross Laboratories Infant Growth Chart
<table>
<thead>
<tr>
<th>SECTION: 1</th>
<th>CHAPTER: 2</th>
<th>UNIT: 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECTION:</td>
<td>1</td>
<td>Infant Death Investigation Foundation Skills</td>
</tr>
<tr>
<td>CHAPTER:</td>
<td>2</td>
<td>Infant Growth and Development</td>
</tr>
<tr>
<td>UNIT:</td>
<td>3</td>
<td>Infant Growth</td>
</tr>
</tbody>
</table>

**STEPS/ELEMENTS:**

1. Describe normal infant growth
2. Describe infant growth concerns
3. Define failure to thrive
4. List causes of failure to thrive
5. Describe infant growth charts
6. Describe standard infant growth charts used in the United States
7. Demonstrate how to use growth charts

**INTERIM PERFORMANCE OBJECTIVE:**

Given a case scenario, the investigator will determine whether or not the subject infant is within “normal” growth range and support the determination.

**PLANNING NOTES:**
Section 1: Infant Death Investigation Foundation Skills

CHAPTER: 2 Infant Growth and Development

UNIT: 4 Infant Developmental Milestones

STEPS/ELEMENTS:

4.1 Describe gross motor skills, fine motor skills, infant social skills, and language skills

4.2 Describe unaccustomed prone sleep

4.3 Describe developmental screening tools

4.4 Describe monitoring process

4.5 Demonstrate application of Denver Development Screening Test II

4.6 Describe infant developmental milestone chronology

4.7 Describe one-month developmental milestones

4.8 Describe two-month developmental milestones

4.9 Describe three-month developmental milestones

4.10 Describe four to five-month developmental milestones

4.11 Describe six-month developmental milestones

4.12 Describe seven- to eight-month developmental milestones

4.13 Describe nine-month developmental milestones

4.14 Describe 10- to 12-month developmental milestones

INTERIM PERFORMANCE OBJECTIVE:

Given various infant ages, the investigator will identify each of the infant developmental milestones associated with the given age.

PLANNING NOTES:
## STEPS/ELEMENTS:

- 5.1 Describe typical feeding periods in the United States
- 5.2 Describe dietary risk factors

### INTERIM PERFORMANCE OBJECTIVE:
Given infant data, the investigator will describe the feeding periods and any associated dietary risk factors.
<table>
<thead>
<tr>
<th>SECTION: 1</th>
<th>CHAPTER: 3</th>
<th>UNITS: ALL</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECTION: 1</td>
<td>Infant Death Investigation Foundation Skills</td>
<td></td>
</tr>
<tr>
<td>CHAPTER: 3</td>
<td>Interviewing Psychology</td>
<td></td>
</tr>
<tr>
<td>UNITS:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Interviewing Awareness</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Assessing Content and Behavior</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>The Investigative Interview</td>
<td></td>
</tr>
</tbody>
</table>

**CRITERIA:** Competence in this chapter will be recognized when the investigator can apply all interviewing techniques presented with 80% accuracy.

**TOOLS AND EQUIPMENT:**
- Notebook and Writing Instrument
- General Interview Questions
- Recording Device

**RESOURCES:**
- Case Scenarios
- Interviewing Partner
- SUIDI Training Text
- SUIDI Scene Guidelines
<table>
<thead>
<tr>
<th>SECTION: 1</th>
<th>CHAPTER: 3</th>
<th>UNIT: 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECTION:</td>
<td>Infant Death Investigation Foundation Skills</td>
<td></td>
</tr>
<tr>
<td>CHAPTER:</td>
<td>Interviewing Psychology</td>
<td></td>
</tr>
<tr>
<td>UNIT:</td>
<td>Interviewing Awareness</td>
<td></td>
</tr>
</tbody>
</table>

**STEPS/ELEMENTS:**

- 6.1 Describe interviewing and interrogation
- 6.2 Describe cross-cultural considerations
- 6.3 Explain how to understand one’s own cultural lens
- 6.4 Explain how to learn about other cultures
- 6.5 Describe interviewing preschool children
- 6.6 Describe interviewing school-aged children

**INTERIM PERFORMANCE OBJECTIVE:**

Given a case scenario, the investigator will identify each of the basic awareness features of the forensic interview.

**PLANNING NOTES:**
SECTION: 1 Infant Death Investigation Foundation Skills

CHAPTER: 3 Interviewing Psychology

UNIT: 7 Assessing Content and Behavior

STEPS/ELEMENTS:

7.1 Assess verbal content
7.2 Assess nonverbal behavior
7.3 Describe how to assess the accuracy of witnesses’ statements
7.4 Explain the importance of using proxemics, body language, and cultural sensitivity

INTERIM PERFORMANCE OBJECTIVE:

Shown a videotaped interview, the investigator will identify all phases of a witness interview.

PLANNING NOTES:
### SECTION: 1
Infant Death Investigation Foundation Skills

### CHAPTER: 3
Interviewing Psychology

### UNIT: 8
The Investigative Interview

#### STEPS/ELEMENTS:

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.1</td>
<td>Plan the interview</td>
</tr>
<tr>
<td>8.2</td>
<td>Perform the interview’s “entry” phase</td>
</tr>
<tr>
<td>8.3</td>
<td>Perform the interview’s “event” phase</td>
</tr>
<tr>
<td>8.4</td>
<td>Perform the interview’s “escape” phase</td>
</tr>
</tbody>
</table>

#### INTERIM PERFORMANCE OBJECTIVE:

Shown a videotaped interview, the investigator will identify each phase of the three-phase interview.

#### PLANNING NOTES:
SECTION 2: Case Interviews
## TERMINAL PERFORMANCE OBJECTIVE:

At the conclusion of this training, the investigator will be able to demonstrate knowledge of the necessary interviewing skills as applied to conducting interviews of both professional and nonprofessional witnesses.
### SECTION: 2  |  CHAPTER: 4  |  UNITS: ALL

**SECTION:** 2  |  Case Interviews

**CHAPTER:** 4  |  Interviewing and Investigative Data Collection

**UNITS:**

- 9  |  Initial Case and Witness Information Gathering
- 10  |  Recent Infant Activities and Behavior
- 11  |  Medical Information and Pregnancy History
- 12  |  Dietary and Feeding Information

**CRITERIA:** Competence in this chapter will be recognized when the investigator can conduct an interview of nonprofessional witnesses, completing the appropriate scene form(s) while demonstrating both cultural and language competency.

**TOOLS AND EQUIPMENT:**
- Scene Forms and Writing Instrument
- Clipboard
- General Interviewing Questions
- Recording Device

**RESOURCES:**
- SUIDI Scene Guidelines
- Local Support Agency Brochure(s)
### SECTION: 2  
### CHAPTER: 4  
### UNIT: 9

#### SECTION: 2  
#### CHAPTER: 4  
#### UNIT: 9

**SECTION:** 2  
**CHAPTER:** 4  
**UNIT:** 9

**Case Interviews**  
**Interviewing and Investigative Data Collection**  
**Initial Case and Witness Information Gathering**

**STEPS/ELEMENTS:**

- 9.1 Ensure scene safety
- 9.2 Identify and request additional resources
- 9.3 Manage the scene
- 9.4 Determine who stays and who goes
- 9.5 Evaluate the potential for a productive interview at this time
- 9.6 Determine information about the witnesses
- 9.7 Identify potential problems
- 9.8 Setup the interview
- 9.9 Document general investigation data
- 9.10 Document additional investigation data
- 9.11 Describe witness interview questions
- 9.12 Document recent contacts, activities, and behaviors
- 9.13 Identify questions for the placer/last known alive/finder

**INTERIM PERFORMANCE OBJECTIVE:**

Given a case scenario, the investigator will conduct a witness interview documenting all required information on the appropriate scene form(s).

**PLANNING NOTES:**
Section 2: Case Interviews

Section: 2  Chapter: 4  Unit: 10

Section: Case Interviews
Chapter: Interviewing and Investigative Data Collection
Unit: Recent Infant Activities and Behavior

Steps/Elements:

10.1 Document changes in infant behavior and physical health within 72 hours of death
10.2 Document injuries within 72 hours of death

Interim Performance Objective:

Given a case scenario, the investigator will identify and document all critical infant activities and behaviors occurring within 72 hours of death on the appropriate scene form(s).

Planning Notes:
### STEPS/ELEMENTS:

- **11.1** Document medical history
- **11.2** Document birth history
- **11.3** Document recent visits/contacts with healthcare providers
- **11.4** Document healthcare provider’s information
- **11.5** Document pregnancy history

### INTERIM PERFORMANCE OBJECTIVE:

Given a case scenario, the investigator will list all appropriate medical information and pregnancy history questions for the parent and/or caregiver witness(es).

### PLANNING NOTES:
### STEPS/ELEMENTS:

12.1 Identify foods and liquids fed to infant in 24 hours prior to death

---

### INTERIM PERFORMANCE OBJECTIVE:

Given a case scenario, the investigator will collect and document all foods and liquids fed to the infant within 24 hours of death.

---

### PLANNING NOTES:
### SECTION: 2  | CHAPTER: 5  | UNITS: ALL

<table>
<thead>
<tr>
<th>SECTION</th>
<th>2</th>
<th>Case Interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHAPTER</td>
<td>5</td>
<td>Conducting Witness Interviews</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>UNITS</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>Establish and Document EMS Involvement</td>
</tr>
<tr>
<td>14</td>
<td>Establish and Document Law Enforcement Involvement</td>
</tr>
<tr>
<td>15</td>
<td>Establish and Document Hospital Involvement</td>
</tr>
</tbody>
</table>

**CRITERIA:** Competence in this chapter will be recognized when the investigator can conduct an interview of professional witnesses, completing the appropriate scene form(s) while demonstrating professional behavior.

**TOOLS AND EQUIPMENT:**
- Scene Forms and Writing Instrument
- Clipboard
- Interviewing Questions
- Recording Device

**RESOURCES:**
- Case Scenarios
- SUIDI Training Text
- SUIDI Scene Guidelines
<table>
<thead>
<tr>
<th>SECTION: 2</th>
<th>CHAPTER: 5</th>
<th>UNIT: 13</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECTION:</td>
<td>2</td>
<td>Case Interviews</td>
</tr>
<tr>
<td>CHAPTER:</td>
<td>5</td>
<td>Conducting Witness Interviews</td>
</tr>
<tr>
<td>UNIT:</td>
<td>13</td>
<td>Establish and Document EMS Involvement</td>
</tr>
</tbody>
</table>

**STEPS/ELEMENTS:**

1. 13.1 Understand EMS “system” design
2. 13.2 Verify EMS involvement
3. 13.3 Describe emergency medical treatments given
4. 13.4 Document EMS observations
5. 13.5 Conduct EMS follow-up interview

**INTERIM PERFORMANCE OBJECTIVE:**

Given a case scenario involving EMS, the investigator will conduct an interview and document all required information on the appropriate scene form(s).

**PLANNING NOTES:**
<table>
<thead>
<tr>
<th>STEPS/ELEMENTS:</th>
</tr>
</thead>
<tbody>
<tr>
<td>14.1 Understand essential law enforcement information</td>
</tr>
<tr>
<td>14.2 Verify law enforcement involvement</td>
</tr>
<tr>
<td>14.3 Document scene information from law enforcement</td>
</tr>
<tr>
<td>14.4 Describe on-scene law enforcement activities</td>
</tr>
<tr>
<td>14.5 Document law enforcement observations</td>
</tr>
<tr>
<td>14.6 Determine previous law enforcement investigations</td>
</tr>
<tr>
<td>14.7 Document disposition of infant, evidence, and property</td>
</tr>
<tr>
<td>14.8 Conduct law enforcement follow-up interview</td>
</tr>
</tbody>
</table>

**INTERIM PERFORMANCE OBJECTIVE:**

Given a case scenario involving law enforcement, the investigator will conduct an interview and document all required information on the appropriate scene form(s).

**PLANNING NOTES:**
<table>
<thead>
<tr>
<th>SECTION: 2</th>
<th>CHAPTER: 5</th>
<th>UNIT: 15</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SECTION:</strong></td>
<td>2</td>
<td>Case Interviews</td>
</tr>
<tr>
<td><strong>CHAPTER:</strong></td>
<td>5</td>
<td>Conducting Witness Interviews</td>
</tr>
<tr>
<td><strong>UNIT:</strong></td>
<td>15</td>
<td>Establish and Document Hospital Involvement</td>
</tr>
</tbody>
</table>

**STEPS/ELEMENTS:**

15.1 Verify hospital receiving information  
15.2 Document healthcare worker’s observations  
15.3 Obtain records, evidence, and property  
15.4 Conduct hospital and social services follow-up interviews

**INTERIM PERFORMANCE OBJECTIVE:**

Given a case scenario involving hospital personnel, the investigator will conduct an interview and document all required information on the appropriate scene form(s).

**PLANNING NOTES:**
Section 3: Infant Scene Investigation
TERMINAL PERFORMANCE OBJECTIVE:

At the conclusion of this training, the investigator will be able to demonstrate the skills required to conduct a complete infant death investigation as outlined in the SUIDI training text.
**SECTION:** 3  Infant Scene Investigation  

**CHAPTER:** 6  Conducting Scene Investigations  

**UNITS:**  
- 16  Document the Scene and Body  
- 17  Document Items Removed from the Scene  
- 18  Document Day Care/Babysitting Scene  

**CRITERIA:**  Competence in this chapter will be recognized when the investigator can conduct an infant investigation, gathering all critical scene data and completing the appropriate scene form(s) while demonstrating both cultural and language competency.  

**TOOLS AND EQUIPMENT:**  
- Scene Forms and Writing Instruments  
- Investigative Notebook  
- Personal Protection Equipment (gloves)  
- Photographic Equipment  
- Flashlight  
- Communication Equipment (radio/cell phone)  
- Measuring Tape  

**RESOURCES:**  
- Case Scenarios  
- SUIDI Scene Guidelines  
- SUIDI Training Text
### SECTION: 3 Infant Scene Investigation

### CHAPTER: 6 Conducting Scene Investigations

### UNIT: 16 Document the Scene and Body

#### STEPS/ELEMENTS:

| 16.1 | Document scene demographics |
| 16.2 | Describe scene environment |
| 16.3 | Photograph scene |
| 16.4 | Describe scene activities |
| 16.5 | Describe heating and cooling systems |
| 16.6 | Collect data on scene temperature |
| 16.7 | Describe room/area in which infant was found |
| 16.8 | Create a “scaled” scene diagram |
| 16.9 | Photograph the body |
| 16.10 | Determine indications of asphyxia or trauma |
| 16.11 | Assess rigor mortis |
| 16.12 | Assess livor mortis |
| 16.13 | Assess algor mortis |
| 16.14 | Setup the body diagram |

#### INTERIM PERFORMANCE OBJECTIVE:

Given a scene scenario, the investigator will describe the documentation procedure and items necessary to document within the micro (smaller—specific to infant) scene.

#### PLANNING NOTES:
### INTERIM PERFORMANCE OBJECTIVE:

Given a scene scenario and appropriate scene form (evidence log), the investigator will accurately document all items of evidence and property removed from the scene.

### PLANNING NOTES:
<table>
<thead>
<tr>
<th>SECTION: 3</th>
<th>CHAPTER: 6</th>
<th>UNIT: 18</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SECTION:</strong> 3</td>
<td>Infant Scene Investigation</td>
<td></td>
</tr>
<tr>
<td><strong>CHAPTER:</strong> 6</td>
<td>Conducting Scene Investigations</td>
<td></td>
</tr>
<tr>
<td><strong>UNIT:</strong> 18</td>
<td>Document Day Care/Babysitting Scene</td>
<td></td>
</tr>
</tbody>
</table>

**STEPS/ELEMENTS:**

18.1 Identify level of care  
18.2 Identify supervising adults  
18.2 Learn details of building ownership and operation  
18.3 Obtain official documentation for re-entry (search warrant) if necessary  
18.4 End contact with persons, allowing for continuing contact

**INTERIM PERFORMANCE OBJECTIVE:**

Given a scene scenario and appropriate scene form(s), the investigator will describe the procedures necessary to accurately document a day care/babysitting scene and document all required data on the appropriate scene form(s).

**PLANNING NOTES:**
### SECTION: 3  |  CHAPTER: 7  |  UNIT: ALL
---|---|---
**SECTION:** 3  |  Infant Scene Investigation  |  
**CHAPTER:** 7  |  Conducting the Doll Reenactment  |  
**UNITS:**  
19  |  Explain Reenactment to Family Member/Caregiver  |
20  |  Have Placer/Finder Demonstrate Infant Positions  |
21  |  Photograph Reenactment  |
22  |  Debrief Family Member/Caregiver  |

### CRITERIA:  
Competence in this chapter will be recognized when the investigator can conduct and document a doll reenactment showing both placed and found positions while demonstrating both cultural and language competency.

### TOOLS AND EQUIPMENT:  
- Doll  
- Writing Instruments  
- Scene Forms  
- Photographic Equipment  
- Tape Measure  
- Communication Equipment (radio/cell phone)

### RESOURCES:  
- Case Scenarios  
- Local Support Agency Brochure(s)
SECTION: 3 Infant Scene Investigation

CHAPTER: 7 Conducting the Doll Reenactment

UNIT: 19 Explain Reenactment to Family Member/Caregiver

STEPS/ELEMENTS:

19.1 Review reenactment goals
19.2 Explain importance of visualization by forensic pathologist
19.3 Show the reenactment doll to the family member/caregiver
19.4 Describe the reenactment procedure to the family member/caregiver

INTERIM PERFORMANCE OBJECTIVE:

Given a case scenario the investigator will describe the investigative importance of the doll reenactment and the procedure followed to perform the reenactment.

PLANNING NOTES:
### SECTION: 3 | CHAPTER: 7 | UNIT: 20

**SECTION:** 3  Infant Scene Investigation  
**CHAPTER:** 7  Conducting the Doll Reenactment  
**UNIT:** 20  Have Placer/Finder Demonstrate Infant Positions

#### STEPS/ELEMENTS:

20.1 Hand the reenactment doll to the participant  
20.2 Ask participant to demonstrate exactly how infant was placed  
20.3 Ask participant to demonstrate exactly how infant was found

#### INTERIM PERFORMANCE OBJECTIVE:

Given a case scenario, doll, necessary sleeping environment, and “placer/finder,” the investigator will demonstrate the process of placing the doll into both “placed” and “found” positions, then assist the “placer/finder” in repeating the process.

#### PLANNING NOTES:
### SECTION: 3
**Infant Scene Investigation**

### CHAPTER: 7
**Conducting the Doll Reenactment**

### UNIT: 21
**Photograph Reenactment**

**STEPS/ELEMENTS:**

1. Photograph doll in positions
2. Photograph bed and bedding
3. Transmit photographs to the pathologist

**INTERIM PERFORMANCE OBJECTIVE:**

Given a scene, doll, and appropriate sleeping environment, the investigator will photograph the doll in both “placed” and “found” positions and describe the critical elements of each photograph.

**PLANNING NOTES:**
### Section 3: Infant Scene Investigation

#### Chapter 7: Conducting the Doll Reenactment

#### Unit 22: Debrief Family Member/Caregiver

**Steps/Elements:**

- **22.1** Highlight the personal difficulty of performing a reenactment
- **22.2** Reinforce the importance of the reenactment
- **22.3** Provide an information sheet explaining what takes place at this point
- **22.4** Provide timetable for release of official reports
- **22.5** Provide family member/caregiver with office contact numbers
- **22.6** Express understanding as to the overwhelming nature of the event
- **22.7** Encourage the family member/caregiver to ask questions

#### Interim Performance Objective:

Given a case scenario, the investigator will describe the process used to debrief family members and caregivers after the doll reenactment has been completed.

#### Planning Notes:
Section 4: Pre-Autopsy and Post-Autopsy Reporting
## TERMINAL PERFORMANCE OBJECTIVE:

At the conclusion of this training, the investigator will be able to demonstrate the necessary infant investigation skills to write a narrative report, properly identify all critical scene data required by the pathologist before autopsy, and recognize a properly completed death certificate.
## Section 4: Pre-Autopsy and Post-Autopsy Reporting

### Chapter 8: The Pre-Autopsy Report

#### Units:

<table>
<thead>
<tr>
<th>No.</th>
<th>Unit Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>23</td>
<td>Document Case Information</td>
</tr>
<tr>
<td>24</td>
<td>Document Sleeping Environment</td>
</tr>
<tr>
<td>25</td>
<td>Document Infant History</td>
</tr>
<tr>
<td>26</td>
<td>Document Family Information</td>
</tr>
<tr>
<td>27</td>
<td>Document External Examination</td>
</tr>
<tr>
<td>28</td>
<td>Develop Narrative Report to the Pathologist</td>
</tr>
</tbody>
</table>

### Criteria:

Competence in this chapter will be recognized when the investigator can conduct an infant investigation, gathering all critical infant and caregiver data, completing the appropriate scene form(s), and reporting critical scene data to the pathologist.

### Tools and Equipment:

- Scene Forms and Writing Instruments
- Computer with Internet Access
- Digital Camera

### Resources:

- Case Scenarios
- SUIDI System Guide
- SUIDI Top 25
- SUIDI Training Text
- SUIDI Scene Guidelines
SECTION: 4
CHAPTER: 8
UNIT: 23

SECTION: 4 Pre-Autopsy and Post-Autopsy Reporting
CHAPTER: 8 The Pre-Autopsy Report
UNIT: 23 Document Case Information

STEPS/ELEMENTS:
23.1 Document general case information

INTERIM PERFORMANCE OBJECTIVE:
Given a case scenario and the appropriate scene form(s), the investigator will document all required case information in the appropriate location.

PLANNING NOTES:
## Pre-Autopsy and Post-Autopsy Reporting

### The Pre-Autopsy Report

#### Document Sleeping Environment

<table>
<thead>
<tr>
<th>STEPS/ELEMENTS:</th>
</tr>
</thead>
<tbody>
<tr>
<td>24.1 Document asphyxia concerns</td>
</tr>
<tr>
<td>24.3 Document sleep surface sharing</td>
</tr>
<tr>
<td>24.4 Document sleeping condition changes</td>
</tr>
<tr>
<td>24.5 Document hyperthermia/hypothermia concerns</td>
</tr>
<tr>
<td>24.6 Document environmental hazards</td>
</tr>
<tr>
<td>24.7 Document unsafe sleeping conditions</td>
</tr>
</tbody>
</table>

### INTERIM PERFORMANCE OBJECTIVE:

Given a case scenario and the appropriate reporting form(s), the investigator will document all required sleeping environment data in the appropriate location(s).

### PLANNING NOTES:
### SECTION: 4 Pre-Autopsy and Post-Autopsy Reporting

### CHAPTER: 8 The Pre-Autopsy Report

### UNIT: 25 Document Infant History

#### STEPS/ELEMENTS:

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>25.1</td>
<td>Document diet</td>
</tr>
<tr>
<td>25.2</td>
<td>Document any recent hospitalization</td>
</tr>
<tr>
<td>25.3</td>
<td>Document any previous medical diagnosis</td>
</tr>
<tr>
<td>25.4</td>
<td>Document any acute life-threatening events</td>
</tr>
<tr>
<td>25.5</td>
<td>Document previous medical care without diagnosis</td>
</tr>
<tr>
<td>25.6</td>
<td>Document any recent fall or other injury</td>
</tr>
<tr>
<td>25.7</td>
<td>Document religious, cultural, or ethnic remedies used</td>
</tr>
<tr>
<td>25.8</td>
<td>Assess death due to natural causes other than SIDS</td>
</tr>
</tbody>
</table>

#### INTERIM PERFORMANCE OBJECTIVE:

Given a case scenario and the appropriate reporting form(s), the investigator will document all required infant history information in the appropriate location(s).

#### PLANNING NOTES:
SECTION: 3  CHAPTER: 8  UNIT: 26

SECTION: 4  Pre-Autopsy and Post-Autopsy Reporting

CHAPTER: 8  The Pre-Autopsy Report

UNIT: 26  Document Family Information

STEPS/ELEMENTS:

26.1 Document any prior sibling deaths
26.2 Document previous encounters with police or social services
26.3 Document request for tissue or organ donation
26.4 Document objection to autopsy

INTERIM PERFORMANCE OBJECTIVE:
Given a case scenario and the appropriate reporting form(s), the investigator will document all required family information in the appropriate location(s).

PLANNING NOTES:
### STEPS/ELEMENTS:

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>27.1</td>
<td>Document pre-terminal resuscitative treatment</td>
</tr>
<tr>
<td>27.2</td>
<td>Assess death due to trauma, poisoning, or intoxication</td>
</tr>
</tbody>
</table>

### INTERIM PERFORMANCE OBJECTIVE:

Given a case scenario including infant photos and the appropriate reporting form (body diagram), the investigator will identify and document all external body markings in the appropriate location on the form using appropriate terminology.

### PLANNING NOTES:
## Section 4: Pre-Autopsy and Post-Autopsy Reporting

### Chapter 8: The Pre-Autopsy Report

#### Unit 28: Develop Narrative Report to the Pathologist

<table>
<thead>
<tr>
<th>STEPS/ELEMENTS:</th>
</tr>
</thead>
<tbody>
<tr>
<td>28.1 Develop concise overview of investigation</td>
</tr>
<tr>
<td>28.2 Document suspicious circumstances</td>
</tr>
<tr>
<td>28.3 Document alerts to pathologist</td>
</tr>
<tr>
<td>28.4 Describe physical evidence and gathered information</td>
</tr>
</tbody>
</table>

### Interim Performance Objective:

Given a case scenario, the investigator will develop a narrative scene report of the investigation, including basic case information, parent and infant data, a description of the scene and body, and physical evidence gathered.

### Planning Notes:
### Section 4: Pre-Autopsy and Post-Autopsy Reporting

<table>
<thead>
<tr>
<th>SECTION: 4</th>
<th>CHAPTER: 9</th>
<th>UNITS: ALL</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Pre-Autopsy and Post-Autopsy Reporting</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Certification of Unexplained Infant Deaths</td>
<td></td>
</tr>
</tbody>
</table>

### Units:

<table>
<thead>
<tr>
<th></th>
<th>Unit Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>29</td>
<td>Sudden, Unexplained Infant Death Certification</td>
</tr>
<tr>
<td>30</td>
<td>Reporting Cause of Death in SIDS-Like Cases</td>
</tr>
</tbody>
</table>

### Criteria:

Competence in this chapter will be recognized when the investigator can describe the various sections of the standard U.S. death certificate and complete the cause-of-death section using various case scenarios.

### Tools and Equipment:

- Scene Forms and Writing Instruments

### Resources:

- Case Scenarios
- U.S. Standard Death Certificate
- State Death Certificate
- SUIDI Training Text
- SUIDI Guidelines
### STEPS/ELEMENTS:

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>29.1</td>
<td>Distinguish SIDS from other causes of infant death</td>
</tr>
<tr>
<td>29.2</td>
<td>Assess investigative adequacy</td>
</tr>
<tr>
<td>29.3</td>
<td>Identify gray zone findings</td>
</tr>
</tbody>
</table>

### INTERIM PERFORMANCE OBJECTIVE:

Given a case scenario, the investigator will identify and describe SIDS, SUID, and gray-zone findings that affect each type of death.

### PLANNING NOTES:
### STEPS/ELEMENTS:

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>30.1</td>
<td>Define cause and manner of death statements</td>
</tr>
<tr>
<td>30.2</td>
<td>Describe the ICD R95 coding (SIDS)</td>
</tr>
<tr>
<td>30.3</td>
<td>Understand suggested cause of death reporting methods</td>
</tr>
<tr>
<td>30.4</td>
<td>Understand standard formatting</td>
</tr>
</tbody>
</table>

### INTERIM PERFORMANCE OBJECTIVE:

Given several case scenarios and completed standard U.S. death certificates, the investigator will determine if the case scenario and associated death certificate is completed correctly.

### PLANNING NOTES:
Chapter 1

INVESTIGATOR PERFORMANCE ASSESSMENT FORM
Sudden, Unexplained Infant Deaths

Directions: Indicate the level of the investigator’s accomplishment by placing an X in the appropriate box under LEVEL OF PERFORMANCE. If, because of special circumstances, a performance component was not applicable or impossible to execute, place an X in the N/A box.

Name
Date
Performance Trainer

LEVEL OF PERFORMANCE

The investigator:

1. recognized types of sudden, unexplained infant death.

2. described data collection and reporting tools.

Comments:
Chapter 2

INVESTIGATOR PERFORMANCE ASSESSMENT FORM
Infant Growth and Development

Directions: Indicate the level of the investigator’s accomplishment by placing an X in the appropriate box under LEVEL OF PERFORMANCE. If, because of special circumstances, a performance component was not applicable or impossible to execute, place an X in the N/A box.

<table>
<thead>
<tr>
<th>LEVEL OF PERFORMANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

The investigator:

1. Identified infant growth. □ □ □ □ □ □ □
2. Identified infant developmental milestones. □ □ □ □ □ □ □
3. Identified infant feeding, diet, and risks. □ □ □ □ □ □ □

Comments:
INVESTIGATOR PERFORMANCE ASSESSMENT FORM

Interviewing Psychology

Directions: Indicate the level of the investigator’s accomplishment by placing an X in the appropriate box under LEVEL OF PERFORMANCE. If, because of special circumstances, a performance component was not applicable or impossible to execute, place an X in the N/A box.

<table>
<thead>
<tr>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
</tr>
<tr>
<td>Performance Trainer</td>
</tr>
</tbody>
</table>

**LEVEL OF PERFORMANCE**

<table>
<thead>
<tr>
<th>N/A</th>
<th>None</th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Excellent</th>
</tr>
</thead>
</table>

The investigator:

1. Understood interviewing awareness.  
2. Assessed content and behavior.  
3. Performed the investigative interview.

Comments:
Chapter 4

INVESTIGATOR PERFORMANCE ASSESSMENT FORM

Interviewing and Investigative Data Collection

Directions: Indicate the level of the investigator’s accomplishment by placing an X in the appropriate box under LEVEL OF PERFORMANCE. If, because of special circumstances, a performance component was not applicable or impossible to execute, place an X in the N/A box.

<table>
<thead>
<tr>
<th>Name</th>
<th>Date</th>
<th>Performance Trainer</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>LEVEL OF PERFORMANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

The investigator:

1. Documented initial case and witness information gathering.

2. Documented recent infant activity and behavior.

3. Documented medical information and pregnancy history.

4. Documented dietary and feeding information.

Comments:
Chapter 5
INVESTIGATOR PERFORMANCE ASSESSMENT FORM
Conducting Witness Interviews

Directions: Indicate the level of the investigator’s accomplishment by placing an X in the appropriate box under LEVEL OF PERFORMANCE. If, because of special circumstances, a performance component was not applicable or impossible to execute, place an X in the N/A box.

The investigator:
1. Established and documented EMS involvement.
2. Established and documented law enforcement involvement.
3. Established and documented hospital involvement.

Comments:
### Chapter 6

**INVESTIGATOR PERFORMANCE ASSESSMENT FORM**

conducting Scene Investigations

Directions: Indicate the level of the investigator’s accomplishment by placing an X in the appropriate box under LEVEL OF PERFORMANCE. If, because of special circumstances, a performance component was not applicable or impossible to execute, place an X in the N/A box.

<table>
<thead>
<tr>
<th>Level</th>
<th>N/A</th>
<th>None</th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Excellent</th>
</tr>
</thead>
</table>

**The investigator:**

1. Documented the scene and body.
2. Documented items removed from the scene.
3. Documented day care/babysitting scene.

**Comments:**

---

Appendix: Investigator Performance Assessment Forms
## INVESTIGATOR PERFORMANCE ASSESSMENT FORM
Conducting the Doll Reenactment

Directions: Indicate the level of the investigator’s accomplishment by placing an X in the appropriate box under LEVEL OF PERFORMANCE. If, because of special circumstances, a performance component was not applicable or impossible to execute, place an X in the N/A box.

<table>
<thead>
<tr>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
</tr>
<tr>
<td>Performance Trainer</td>
</tr>
</tbody>
</table>

### LEVEL OF PERFORMANCE

<table>
<thead>
<tr>
<th>N/A</th>
<th>None</th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The investigator:

1. Explained reenactment to family member/caregiver.
   - [ ] N/A
   - [ ] None
   - [ ] Poor
   - [ ] Fair
   - [ ] Good
   - [ ] Excellent

2. Had placer/finder demonstrate infant positions.
   - [ ] N/A
   - [ ] None
   - [ ] Poor
   - [ ] Fair
   - [ ] Good
   - [ ] Excellent

3. Photographed reenactment.
   - [ ] N/A
   - [ ] None
   - [ ] Poor
   - [ ] Fair
   - [ ] Good
   - [ ] Excellent

4. Debriefed family member/caregiver.
   - [ ] N/A
   - [ ] None
   - [ ] Poor
   - [ ] Fair
   - [ ] Good
   - [ ] Excellent

Comments:
Chapter 8

INVESTIGATOR PERFORMANCE ASSESSMENT FORM
The Pre-Autopsy Report

Directions: Indicate the level of the investigator’s accomplishment by placing an X in the appropriate box under LEVEL OF PERFORMANCE. If, because of special circumstances, a performance component was not applicable, or impossible to execute, place an X in the N/A box.

<table>
<thead>
<tr>
<th>Name</th>
<th>Date</th>
<th>Performance Trainer</th>
</tr>
</thead>
</table>

**LEVEL OF PERFORMANCE**

<table>
<thead>
<tr>
<th></th>
<th>N/A</th>
<th>None</th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Excellent</th>
</tr>
</thead>
</table>

The investigator:

1. Documented case information.  
2. Documented sleeping environment.  
3. Documented infant history.  
4. Documented family information.  
5. Documented external examination.  
6. Developed narrative report to the pathologist.  

Comments:
# INVESTIGATOR PERFORMANCE ASSESSMENT FORM

Certification of Unexplained Infant Deaths

Directions: Indicate the level of the investigator's accomplishment by placing an X in the appropriate box under LEVEL OF PERFORMANCE. If, because of special circumstances, a performance component was not applicable or impossible to execute, place an X in the N/A box.

<table>
<thead>
<tr>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
</tr>
<tr>
<td>Performance Trainer</td>
</tr>
</tbody>
</table>

---

**LEVEL OF PERFORMANCE**

<table>
<thead>
<tr>
<th>N/A</th>
<th>None</th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Excellent</th>
</tr>
</thead>
</table>

The investigator:

1. **Understood sudden, unexplained infant death certification.**
   - N/A
   - None
   - Poor
   - Fair
   - Good
   - Excellent

2. **Reported cause of death in SIDS-like cases.**
   - N/A
   - None
   - Poor
   - Fair
   - Good
   - Excellent

**Comments:**

---