



Medical Examiners Commission Meeting

November 8, 2019

Barbara C. Wolf, M.D. • Sheriff Harrell Reid • Kenneth T. Jones • Wesley H. Heidt, J.D.
Jeffrey A. Siegmeister, J.D. • Charlie Cofer, J.D. • Robin Giddens Sheppard, L.F.D.
Stephen J. Nelson, M.A., M.D., F.C.A.P. • Carol R. Whitmore, R.N.

MEDICAL EXAMINERS COMMISSION MEETING

Tampa Airport Marriott
4200 George J. Bean Parkway
Tampa, FL 33607
November 8, 2019, 10:00 AM EDT

Opening Remarks

Introduction of Commission Members and Staff

Approval of Meeting Agenda and Minutes from previous Commission Meeting of August 9, 2019

<u>ISSUE NUMBER</u>	<u>PRESENTER</u>
1. Informational Items:	
• Status Report: MEC Reappointments	Vickie Koenig
• Status Report: DME Appointments for Districts 4 & 16 and Reappointments for Districts 8, 10, 12, 14, & 18	Vickie Koenig
• 2020 Reappointments/Assessments for Districts 15-23	Vickie Koenig
• District 1 Search Committee Update	Stephen J. Nelson, M.D.
• District 1 Interim District Medical Examiner Appointment	Stephen J. Nelson, M.D.
• District 19 Search Committee Update	Stephen J. Nelson, M.D.
• 2018 Drugs in Deceased Persons Annual Report	Megan Neel
• 2019 Interim Drug Data	Megan Neel
• 2018 Coverdell Status Update	Chad Lucas
• 2020 Legislative Session	Jim Martin, J.D.
• VCDCC Recommendation for Dr. Vega	Stephen J. Nelson, M.D.
2. Department of Health Violent Death Reporting System Update	Nicholas Thomas, Ph.D.
3. OPO Organ Research Discussion	Stephen J. Nelson, M.D.
4. MEC Drug Report – Tracked Drugs: Difluoroethane, Mitragynine	Stephen J. Nelson, M.D. & Vickie Koenig
5. Unidentified Deceased Initiative	Jon Rigsby
6. Prescription Drug Monitoring Program Update Discussion	Bruce A. Goldberger, Ph.D.
7. Emerging Drugs	Bruce A. Goldberger, Ph.D.
8. Dr. Minyard Letter	Stephen J. Nelson, M.D.
9. Other Business	Stephen J. Nelson, M.D.

Possible dates for next MEC Meeting are February 11-12. Location is TBD.

MEDICAL EXAMINERS COMMISSION MEETING

Sawgrass Marriot Golf Resort & Spa
1000 PGA Tour Boulevard
Ponte Vedra Beach, Florida 32082
August 9, 2019 10:00 AM EDT

Commission Chairman Stephen J. Nelson, M.A., M.D., F.C.A.P. called the meeting of the Medical Examiners Commission to order at **10:01 AM**. He advised those in the audience that the meetings of the Medical Examiners Commission are open to the public and that members of the public will be allowed five minutes to speak. He then welcomed everyone to the meeting and asked Commission members, staff, and audience members to introduce themselves.

Commission members present:

Stephen J. Nelson, M.A., M.D., F.C.A.P., District 10 Medical Examiner
Barbara C. Wolf, M.D., District 5 Medical Examiner
Wesley H. Heidt, J.D., Office of the Attorney General
Robin Giddens Sheppard, L.F.D., Funeral Director
Kenneth T. Jones, State Registrar, Department of Health
Hon. Charlie Cofer, J.D., Public Defender, 4th Judicial Circuit
Hon. J. Harrell Reid, Hamilton County Sheriff
Hon. Jeffrey A. Siegmeister, J.D., State Attorney, 3rd Judicial Circuit
Hon. Carol R. Whitmore, R.N., Manatee County Commissioner (via Teleconference)

Commission staff present:

Vickie Koenig
Megan Neel
Chad Lucas
James D. Martin, J.D.

District Medical Examiners present:

Craig Mallak, M.D. (District 17)
Jon R. Thogmartin, M.D. (District 6)
James W. Fulcher, M.D. (District 7)
Andrea N. Minyard, M.D. (District 1 Interim)
B. Robert Pietak, M.D. (District 4 Interim)
Russell S. Vega, M.D. (District 12)

Other District personnel present:

Jeff Martin (District 1)
Lindsey Bayer (District 5/24)
Aurelian Nicolaescu, M.D. (District 4)
Karla Orozco (District 7)
Bill Pellan (District 6)
Tim Gallagher, M.D. (District 1)
Jeffrey J. Brokaw (District 4)
Deanna A. Oleske, M.D. (District 23)
Tim Crutchfield (District 4)

Guests present:

Karen Card, DrPH (DOH)
Bruce Goldberger, Ph.D. (UF)
DiAnn McCormack (CorneaGen)
Amy Wilson (LifeNet Health)
Chris Poindexter (LifeNet Health)
Toni Lake (LifeNet Health)
Cory Herbert (LEITR)
Reva Huey (Legacy)
Lynetta Oxendine (Our Legacy)
Chris Bufano, J.D. (FDLE)
Jonathan Rigsby (FDLE)
Larry Cochran (LifeQuest)
Karin Frosio (LifeNet Health)
Christopher Ayres (LifeNet Health)
Ozell Newsome (LifeNet Health)
Heather Hooy (LEITR)
Rebecca Sayer (LifeLink)
Dean Register (FDLE)

A MOTION WAS MADE, SECONDED, AND PASSED UNANIMOUSLY FOR THE COMMISSION TO APPROVE THE AGENDA.

A MOTION WAS MADE, SECONDED, AND PASSED UNANIMOUSLY FOR THE COMMISSION TO APPROVE THE MINUTES OF THE MAY 1, 2019 MEDICAL EXAMINERS COMMISSION MEETING.

DISCIPLINE AGENDA: DISTRICT 1 INTERIM MEDICAL EXAMINER ANDREA N. MINYARD, M.D.

FDLE Assistant General Counsel Chris Bufano, J.D., presented an overview of the status of the Commission's administrative complaint against District 1 Interim Medical Examiner Andrea N. Minyard, M.D. This case is before the Commission upon the administrative complaint that charges the respondent with violating the provisions of Chapters 406.075(1)(i) and 406.075(1)(a), Florida Statutes, to wit: Violation of Rules 11G-2.001(1)(b), 11G-2.002(2), 11G-2.003(1)(e), 11G-2.003(3)(b), 11G-2.003(5)(a), and 11G-2.003(5)(b), Florida Administrative Code. In response to the administrative complaint the Respondent, through her attorney, filed an election of rights form disputing the factual allegations and requested a formal hearing before an administrative law judge.

The Respondent was not recommended for reappointment by the Commission and is currently serving only on an interim basis. She has recently submitted a letter of resignation from her current position effective September 30th. This recommendation is made with the consideration of an expenditure of resources that litigating this case through a trial at the Division of Administrative Hearings will involve.

FDLE Counsel respectfully recommends that the Commission dismiss the Administrative Complaint.

MR. SIEGMEISTER MADE A MOTION TO DISMISS THE ADMINISTRATIVE COMPLAINT AGAINST ANDREA N. MINYARD, M.D. AND MRS. SHEPPARD SECONDED. THE MOTION PASSED UNANIMOUSLY THAT THE ADMINISTRATIVE COMPLAINT AGAINST DR. MINYARD BE DISMISSED.

Sheriff Reid, Mr. Heidt, and Dr. Wolf did not participate in the vote as they were members of the probable cause panel for this case.

ISSUE NUMBER 1: INFORMATIONAL ITEMS

- Moment of Silence – Mrs. Carol Kassoff: The Commission observed a moment of silence in memory of Mrs. Carol Kassoff, who recently passed away after a battle with Alzheimer's disease. Mrs. Kassoff was the wife of Norman C. Kassoff, J.D., the Director of Operations at the Miami-Dade Medical Examiner's Office under the late Dr. Joseph H. Davis, as well as a tremendous resource for the State of Florida for many years.
- Status Update: DME and State Attorney MEC Reappointments: Mrs. Koenig informed the Commission that the Governor's Appointments Office has received everything they need for both Commission members and will process each application so that the appropriate reappointments can be made. MEC staff has received recommendation letters from the Florida Association of Medical Examiners as well as the Florida Prosecuting Attorneys Association. Both MEC members have also submitted their gubernatorial appointment forms online and FDLE Commissioner Swearingen submitted a letter of recommendation for reappointment for both Commission members to Governor DeSantis on May 24, 2019.

- Status Update: Reappointments for Districts 8, 10, 12, & 14: Mrs. Koenig informed the Commission that the Governor's Appointments Office has received everything they need for these reappointments and they will process each application so that the appropriate reappointments can be made. A recommendation letter from Dr. Nelson was submitted to Governor DeSantis on May 23, 2019.
- District 16 Appointment and District 18 Reappointment Updates: Mrs. Koenig informed the Commission that the Governor's Appointments Office has received everything they need for both districts and will process each application so that the appropriate appointment or re-appointment can be made.
- District 1 Search Committee Update: Dr. Nelson informed the Commission that the search committee has met one time. A few weeks ago the search committee solicited for applications and received around five interested applicants. Since then, all but two applicants have withdrawn their names. Interviews will be held on Wednesday, August 14, 2019, in Pensacola. The search committee is hoping to name a new District Medical Examiner shortly afterwards.
- District 19 Search Committee Update: Dr. Nelson informed the Commission that District 19 Medical Examiner Roger E. Mittleman, M.D., announced his retirement effective April 30, 2020. The search committee has had one in-person meeting as well as one telephone conference meeting in which application materials were approved. Those application announcements have subsequently been posted on the county's website, as well as on the American Academy of Forensic Science, Florida Association of Medical Examiners, and the National Association of Medical Examiners websites. The application pool for this position is expected to close at the end of September. District 19 would like to have the new District Medical Examiner in place well before Dr. Mittleman's retirement date.
- District 15 Medical Examiner Status Update: Dr. Nelson informed the Commission that District 15 appoints their medical examiner via Home Rule authority and they have selected Wendolyn Sneed, M.D., for the position of District Medical Examiner. Dr. Sneed will replace Dr. Michael D. Bell when he retires at the end of September.
- District 4 Medical Examiner Appointment Update: Dr. Nelson informed the Commission that B. Robert Pietak, M.D., has obtained his Florida Medical License and is now in place as Interim District 4 Medical Examiner. Dr. Nelson sent a letter of recommendation to Governor DeSantis for appointment on behalf of the Medical Examiner's Commission on July 1, 2019.
- USF Forensic Anthropology Institute Update: Dr. Nelson informed the Commission that on May 7, 2019, the Pasco County Board of County Commissioners unanimously voted to terminate the Intergovernmental Agreement between Pasco County, the Pasco County Sheriff's Office, and the University of South Florida. With this vote, USF and its facilities will be removed from Pasco County at the conclusion of the contractual notice period in 36 months. USF no longer has an exclusive arrangement for the facilities and they are now open for anyone else to use.
- 2018 Drugs in Deceased Persons Report (Interim and Annual): Ms. Neel reported that the 2018 Interim report was published in July. The quality review checks for 2018 Annual Drugs in Deceased Persons Report were being finalized. There is one district awaiting return from the Quality Assurance Committee, and two districts that have been returned for corrections.

- 2018 Annual Workload Report: Mrs. Neel reported that all of the data has been received and is currently under review. She is hoping that the report will be published in September.
- 2018 Coverdell Status Update: Mr. Lucas reported to the Commission that the 2018 Coverdell Grant funds were released by the National Institute of Justice on March 11, 2019. The Memoranda of Understanding (MOUs) for the 2018 grant were e-mailed to the participating districts by the grant manager that same week. In anticipation of the funds being released, Mr. Lucas e-mailed award packages to the participating districts on March 6, 2019. Physical copies of the MOUs were mailed to the participating districts by the grant manager the week of March 25, 2019. Once signed MOUs are received by the grant manager, districts may begin to spend money on items on their 2018 expenditure list. Mr. Lucas advised that budget amendments are taking up to one month for federal approval, and to please be mindful of the grant timeline when submitting budget amendments or reimbursement requests.

ISSUE NUMBER 2: DEPARTMENT OF HEALTH OPIOID PROJECT

Karen Card, DrPH, with the Department of Health (DOH), again appeared before the Commission to give another update on the Department of Health Opioid Project. She reported that Dr. Jared Jashinsky has replaced Dr. Randolph Schilke as the project's epidemiologist. She also reported that August 31st is the end of their two year grant period. However, the project will roll without interruption into a 3 year grant period beginning September 1st. The name of the new grant is called Overdose Data to Action and it is much larger and bigger in scope. The drug overdose surveillance project will not change, but is now part of a larger project the Centers for Disease Control and Prevention is organizing and funding.

The medical examiner money that was intended for improved and more frequent toxicology testing also exists in Overdose Data to Action grant. \$557,000 per year will be distributed in identical fashion as the money the Department of Health is currently trying to distribute. The original method developed to distribute the money has not been popular. Dr. Card met with a small group of medical examiners and other stakeholders to come up with alternatives. All laboratories used by the medical examiners in Florida were contacted and an agreement was reached to let the labs accept the money and invoice the Department of Health for services that qualify under the grant. This will enable smaller districts, which were eligible for smaller amounts of money, to receive more grant funding than originally proposed. The Department of Health is obtaining purchase requisitions for three of the four labs (NMS, AXIS, Stewart, and UF). The districts will be informed on how they can allow the laboratory to bill the Department of Health instead of their own district. If this plan goes well, then a mechanism will be developed to serve the districts that have their own in-house labs.

The opioid project has a fatal records collection and abstraction deadline on August 31st and they will, without difficulty, make their 75% target for record collection and abstraction for the entire state of Florida.

The Violent Death Reporting System (VDRS) recently come online and they are making their first set of record requests. Districts 1 and 2 have received their record requests, and others are forthcoming. The process should be identical to the opioid project. The same FTP server is set up to accept VDRS records as well as drug overdose records. The Violent Death Reporting System collects self-harm, assault, undetermined intent, unintentional firearm, legal intervention, and terrorism records. The quantity of records dwarfs drug overdoses, and suicide accounts for most of those records. They will be sending the requests to all districts and they understand that anything under investigation is not available to them. They will also acknowledge and work with the districts concerning Marsy's Law.

ISSUE NUMBER 3: ZERO DENIALS FOR ORGAN PROCUREMENT

Dr. Nelson reemphasized Commission's position is zero denials for organ procurement. There was a recent issue with a medical examiner district and that office was reminded that the organ procurement organizations are not interested in injured or damaged organs for transplant. If there are damaged organs, the medical examiner offices will not receive calls from organ procurement asking for permission to procure those organs. The Commission encourages all medical examiner districts to work to facilitate organ procurement.

ISSUE NUMBER 4: FEDERAL RULES OF CRIMINAL PROCEDURE: IS THE MEDICAL EXAMINER A "FACT WITNESS" OR AN "EXPERT WITNESS"?

Dr. Nelson reported that there have been issues recently with medical examiner testimony in federal court within the Middle District of Florida where medical examiners are being considered "fact" witnesses, instead of an "expert" witness giving opinion testimony. Dr. Nelson invited the 1st Assistant U.S. Attorney from the Middle District of Florida (Karin Hoppmann, J.D.) to attend this meeting. While showing interest, she was not in attendance.

Jon R. Thogmartin, M.D., informed the Commission that he has been the district medical examiner in District 6 for 19 years, and has only given testimony in federal court in 1 criminal case and 1 civil case during that time. He also said that his associate medical examiners have similarly been infrequently involved in federal court. Historically with his cases, he signed a contract stating he was an expert witness, negotiated fees for his services, and was paid as an expert witness. However, there have been a few cases recently where his associate medical examiners were called upon to be fact witnesses in federal cases.

In July 2018, Dr. Noel A. Palma was contacted by the federal defender in a shooting case. Dr. Palma gave his usual expert testimony services and sent an invoice, but the defense said they weren't going to pay the fees on the invoice because he was a fact witness. After some back and forth talks between Dr. Palma, Dr. Thogmartin, and the defense attorney, Dr. Thogmartin obtained the transcripts from the testimony. He then highlighted all of Dr. Palma's qualifications and expert testimony, attached it to the invoice along with the defense's communication saying Dr. Palma was a fact witness, and sent it to the chief judge and the presiding judge. In return, apology letters and payment for expert witness testimony were received.

Dr. Christopher I. Wilson received a subpoena for a federal drug case shortly thereafter. Upon receipt, the medical examiner's office called and told them they were going to charge expert witness fees. They were told, however, that Dr. Wilson would be testifying as a fact witness. When Dr. Wilson showed up for testimony, he was questioned as and testified as an expert witness. It is still unclear if expert witness fees will be paid.

Dr. Palma recently had a very high profile, complex homicide case where the defendant was charged federally. He prepared for the case for several hours and met with the federal prosecutor to give what was clearly expert witness testimony. At the time, there was a clear understanding that expert testimony was being provided and the prosecutor would be billed accordingly. However, the prosecutor called a few days later and advised that according to her superior, Dr. Palma would be testifying as a fact witness. One of the Assistant U.S. Attorneys later confirmed this with Dr. Thogmartin. An emergency hearing was held to discuss the issue. At the hearing the judge and the defense both knew and understood Dr. Palma was giving expert witness testimony. However, when the judge questioned the Assistant U.S. Attorney about it, he said that he did tell Dr. Palma and Dr.

Thogmartin that Dr. Palma would be a fact witness, but he was mistaken. Dr. Thogmartin went on to say that his goal for the hearing was not to get Dr. Palma paid, but rather to prevent the de-professionalization of the medical examiner profession in federal court when they are in a clear expert witness scenario. Furthermore, expert witness fees are expected due to mitigate the costs to a medical examiner's office when a medical examiner is in court for an extended period of time for a hearing.

Dr. Thogmartin further stated that the U.S. attorneys were not too happy with how the events unfolded. They wanted to know the name of the Chairman of the Medical Examiners Commission and the FDLE lawyer for the Commission.

Dr. Nelson said that there is an expert witness form to fill out for the federal courts for them to pay the necessary fees, and it bothers him that they do not know the difference between Rules 701 and 702 of the Federal Rules of Evidence. He also said the federal prosecutor argued with him about one of his cases to the point where he had to obtain a protective order.

Honorable Jeffrey A. Siegmeister, J.D., said he thinks this is more of a budgetary issue for the Middle District instead of a lack of understanding of Federal Rule. Any time he has seen that kind of argument over bills, it has been because of someone saying, "This is our budget limit". He went on to say he can certainly see the offense of being called a fact witness when someone is in fact an expert witness, and would be surprised if an experienced lawyer truly thought a medical examiner is a fact witness. He then said that a court ruling from the chief federal judge stating that a medical examiner is an expert witness may need to be obtained to keep this from happening again.

Dr. Thogmartin reiterated that the money isn't the thing that is the problem for him. The problem is that people are being told they are a fact witness, preparing as a fact witness, and being called a fact witness, but being treated as an expert witness at testimony. He views that as medical examiners not being treated as professionals and being misrepresented to the people of the court, and would prefer just being told they can't pay him.

Dr. Nelson asked for a recommendation from the Commission to prevent this from happening in the future. Mr. Siegmeister again recommended obtaining a local court rule from the chief judge. Mr. Wesley Heidt suggested going on a case-by-case basis by filing a motion to declare the status of the witness because the opinion of the chief judge may change.

ISSUE NUMBER 5: DROWNING STUDY

Dr. Nelson informed the Commission that Andrew Schmidt, D.O., M.P.H., was unable to make it to the Commission meeting due to a scheduling conflict, and would like to attend at a later date.

ISSUE NUMBER 6: PRESCRIPTION DRUG MONITORING PROGRAM UPDATE

Bruce A. Goldberger, Ph.D., appeared before the Commission to provide an update on the State's Prescription Drug Monitoring Program (PDMP). The State of Florida uses a web-based database called E-Force which facilitates the collection, storage, maintenance, and analysis of controlled substance dispensing data reported by pharmacies and physicians. Unlike other states' PDMPs, which share their data quite readily, the State of Florida's PDMP is highly restricted based on Florida Statutes. The Department of Health has collaborated with law enforcement agencies, the Attorney General's office, and other privacy stakeholders to ensure that the policies are enforced and protect

health information. There have been recent changes to the state PDMP to authorize a district medical examiner and their staff to request and receive information from the state PDMP; however it is not direct access to the system. The medical examiner or their designee would have to call the PDMP to obtain information on a particular decedent. The reports that are produced by the PDMP include detailed dispensing history of the individual as well as the associated summaries of the total number of prescriptions dispensed, current quantity of opioid prescriptions, and current morphine milligram equivalents per day in a 30 day average. A list of prescribers and dispensers are also available if you ask for those data.

As of June 10, 2019, 32% of people residing within Florida have filled at least one prescription this year. Thirty-three million prescriptions were dispensed within the calendar year of 2018, and 14 million prescriptions have been dispensed through June 10, 2019. So far, seven medical examiners have created accounts in the PDMP and 109 requests have been made (62 requests in 2018 and 47 requests in 2019). There have also been 33 medical examiner delegates who have created accounts and they have made 492 total requests (182 requests in 2018 and 310 requests in 2019).

Dr. Goldberger stated that he felt there was some reluctance to use the PDMP because the data is not real-time. A user could submit a request today and get a response the same day or even a few days if it is the weekend. Because of that, Becky Poston has offered to make herself personally available to medical examiner offices 24/7/365 if it assists in studying the utility and efficacy of the PDMP in medico-legal death investigations in Florida.

Dr. Nelson asked if it would be easier to just allow medical examiners to have unfettered access to the PDMP. Dr. Goldberger agreed and he has already told Ms. Poston that he would work with his colleagues to develop a strategy to get medical examiners and their delegates direct, real-time access to the system.

Dr. Nelson stated that it was his recollection that when the PDMP was before the State Legislature the pushback against medical examiners having direct access to the PDMP came from the Department of Health. The Department of Health did not want medical examiners to have unfettered access to the system. Dr. Goldberger confirmed that and said it was because of their perception of privacy and making it consistent with state statute.

Mr. Ken Jones said it has been around three years since this issue was approached. The Florida Department of Health has new General Counsel and a new Surgeon General. It may be a good opportunity for the Commission to ask the new Surgeon General and General Counsel to revisit this issue. Statutes could be reopened for change or there could be an agreement reached with the Department of Health.

MS. WHITMORE MADE A MOTION FOR THE COMMISSION TO CONTACT THE SURGEON GENERAL ABOUT REVISITING MEDICAL EXAMINER DIRECT ACCESS THE PDMP AND DR. WOLF SECONDED.

Mr. Jones then asked if it would be better to start the conversation with Becky Poston and Dr. Goldberger asked if Ms. Koenig could setup a telephone conference with Ms. Poston. Ms. Koenig agreed that it may be easier to talk to Ms. Poston and get the best direct contact for discussion and then possibly invite them to the November MEC Meeting if they would like to talk to the Commission directly. Dr. Nelson felt like that was too late for any bills to be filed before next year's legislative session. Mr. Jones felt like the Department of Health wouldn't want to open that statute for changes and suggested that the Commission talk with Ms. Poston first.

Dr. Thogmartin said that the real power of the PDMP would be jurisdictional determination, finding doctors, and finding next of kin. It is a gateway to everything a medical examiner needs. He went on to say that an algorithm in the program directly linked to date of death in the system would give indirect access users such as medical examiners access to everything they need under 406.11 and 406.12, F.S. without changing statute for the PDMP. He also said that the system loses probably 75% of its utility through the current method of use for medical examiners as compared to any physician with a national provider number, DEA number, and a medical license.

Craig T. Mallak, M.D. (District 17), said that he got a DEA number through the county at no cost and listed on his Florida medical license that he dispenses schedule II narcotics and he got an E-Force access with no problem. He went on to say that he doesn't use the system every day, but when he needs to he can with no problem.

Dr. Nelson said he feels that it is inevitable that they will ask how often the PDMP is used by medical examiners and that any changes may not be made if there is only a limited amount of use. Dr. Goldberger said that there were 182 requests in 2018 and 310 so far in 2019. Dr. Nelson remarked that 182 requests out of almost 12,000 drug deaths in 2018 is not a lot.

Deanna A. Oleske, M.D. (District 23), said that she is pretty sure that District 23 was probably responsible for about half of the requests for 2019 and that she uses the PDMP all the time. She said that if you query a patient, the search results will have either a "1" or a "0". If a "0" shows, there are no doctors in the past two years that have prescribed controlled substances. If the search shows a "1", then there is most likely a doctor that has prescribed controlled substances in the past two years. These results alone help her to determine whether or not to accept jurisdiction on a case.

Mr. Siegmeister said that he didn't think it would be that complicated to have any changes made and think that the intent of that statute is to prevent the misuse of people's privacy. However, he is amazed that the specific language that restricts medical examiners from directly using the PDMP is in statute.

Mr. Bill Pellam (District 6) commented that the usage numbers could be so low because of the delays medical examiners have to experience when using the system. He also went on to say that an easy way for the Department of Health to audit the medical examiner usage in the system is to verify any data requests against death certificates they have on file.

Mr. Jones agreed that tracking back to death certificates is easy and is something they can accomplish, and reiterated that he felt it would best to start the conversation with Becky Poston about direct access first. From that point on anything that needed to be done, whether it be legislative changes or something else, could be looked at.

Commission member Carol Whitmore, R.N. said that bill introductions as well as small changes to existing statutes needed to be presented by October. She also said making small changes doesn't require going through the whole, bill process. Mr. Siegmeister followed-up by saying that this would basically be a "glitch bill" if it were going to legislature for changes.

Dr. Nelson asked that the associated parties work on the direct access issue and recommended putting this topic back on the agenda for the upcoming MEC Meeting in November.

ISSUE NUMBER 7: EMERGING DRUGS

Dr. Goldberger provided the Commission with an update on emerging drug trends. He reported that in the forensic casework of Florida's crime laboratories, fentanyl analogs are notably absent from the first two quarterly submissions of 2019, which could possibly be attributed to statutory changes that included fentanyl analogs in the drug schedule. There has been an increase in cathinone submissions, specifically eutylone and N-ethylpentylone. Designer benzodiazepines are also commonly appearing in forensic casework.

ISSUE NUMBER 8: 2019 FAME EDUCATIONAL CONFERENCE RECAP

Dr. Goldberger reported that the 2019 FAME Educational Conference held July 10-12, 2019, at the Eau Palm Beach Resort and Spa in Manalapan, Florida was a big success, and around 100 people attended. He also asked that if you attended and received a CME evaluation via e-mail, please complete it. These evaluations help FAME plan for future conferences.

ISSUE NUMBER 9: SOLICITATION FOR 2020 FAME EDUCATIONAL CONFERENCE

Dr. Goldberger reported that the 2020 FAME Educational Conference will be co-hosted by District 9 Medical Examiner and FAME President Joshua D. Stephany, M.D. The tentative date and location for the conference is the Hilton Orlando Bonnet Creek from July 22-24, 2020.

ISSUE NUMBER 10: OTHER BUSINESS

- Dr. Nelson reminded everyone that the Department of Justice, Bureau of Justice Statistics, has requested that Medical Examiner Offices complete a 16 page online survey for them and encouraged everyone to complete the survey before the deadline at the end of the year.
- Larry Cochran, the Assistant Executive Director of LifeQuest Organ Recovery Services, shared that a zero denial position is not the norm for organ procurement across the nation. He also noted that with the explosion of the drug epidemic, almost 70% of all donors fall under the jurisdiction of the medical examiner; making the medical examiner's work truly life-saving. He also reported that the four organ procurement organizations in Florida and Dr. Nelson collaborated on a paper for presentation at their national meeting in June, which was attended by about 1,200 people. The presentation was extremely well attended and received. That paper has also recently been accepted for international presentation in Dubai in November.
- Mr. Jon Rigsby with FDLE's Unidentified Deceased Initiative reported that they have not had an identification in a while, but told of a case he has been working on out of District 4 on behalf of the Jacksonville Sheriff's Office in an attempt to identify an unknown white female. They had come to a tentative identification on her based on fingerprints, however she had multiple aliases and her criminal history was unclear as to her real identity. After quite a bit of legwork and help from the Georgia Bureau of Vital Statistics, FDLE received a copy of the decedent's original birth certificate. Based on research gathered from information on the birth certificate, both of her parents are deceased, however she has at least one sibling. Mr. Rigsby hopes to have a full success story for this case at the next Commission meeting. Mr. Ken Jones informed Mr. Rigsby that his office can help with any out of state vital statistics work on future cases.

- Dr. Nelson reminded everyone that the next Medical Examiners Commission meeting will be between November 6th and 8th and the location is TBD, but will most likely be in the Tampa or Sarasota area.

With no further business to come before the Commission, the meeting was adjourned at 11:25 A.M.



OFFICE OF
STATE ATTORNEY
FIRST JUDICIAL CIRCUIT OF FLORIDA

August 15, 2019

PRESS RELEASE

State Attorney Bill Eddins announced that the Medical Examiner's Search Committee met on August 14, 2019 to consider the resume of Dr. Scott Luzi for possible appointment as Chief Medical Examiner for the First District of Florida. Dr. Luzi is a Forensic Pathologist currently working in California. The committee reviewed Dr. Luzi's background including his experience, education, and references. His resume and references are attached to this press release.

After Dr. Luzi's interview, the committee unanimously voted to recommend his appointment. The counties will need to reach an agreement on his contract and salary before his name can be submitted to the Governor for appointment. All parties involved will discuss the issue and it is hoped that a decision will be made within 30 days.

Dr. Minyard's resignation is effective September 30, 2019, so it will be necessary to appoint an Interim Medical Examiner. The State Attorney's Office has the responsibility to appoint an Interim. This appointment must be done in conjunction with the four counties, as they have the responsibility of payment. My office and the four counties are working on obtaining a system and process to appoint an interim and it is expected to be in place by October 1, 2019.

The four counties have been very cooperative and diligent in regard to the search for a new medical examiner. Their cooperation is fully appreciated and it is expected this process will be successful.

WILLIAM "BILL" EDDINS
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OFFICE OF
STATE ATTORNEY
FIRST JUDICIAL CIRCUIT OF FLORIDA

August 23, 2019

Dear Search Committee Members:

I have been contacted by Dr. Scott Luzi and he has indicated that he is withdrawing his name from further consideration for the position of Chief Medical Examiner for the First District. At this time we currently have one advertisement for the position running on the National Association of Medical Examiners website. We are in the process of posting this advertisement on two additional websites. At this time, we have not received any additional applications for the position.

I have scheduled a meeting of the Search Committee for September 18, 2019 at 2:30 p.m. It is very important that everyone make arrangements to attend that meeting. At that time I would like for the Committee to consider retaining a physician recruiting firm to assist in this matter. There are a number of firms that specialize in this area and at least one that has worked with other Florida districts in recruiting medical examiners. As a result of Dr. Luzi's decision, the process of obtaining an interim Medical Examiner is of even greater importance.

Sincerely,

A handwritten signature in black ink, appearing to read "William Eddins".

William "Bill" Eddins

State Attorney

WILLIAM "BILL" EDDINS
STATE ATTORNEY



P.O. Box 12726
Pensacola, FL 32591
Telephone: (850) 595-4200
Website: <http://sao1.co.escambia.fl.us>

OFFICE OF
STATE ATTORNEY
FIRST JUDICIAL CIRCUIT OF FLORIDA

September 20, 2019

via email

Medical Examiner's Search Committee: Lumon May, Sam Parker, Kelly Windes, Tony Anderson, Sheriff Larry Ashley, Chief Tommi Lyter, Mike Atwood, Bruce Miller, Dr. Stephen Nelson, Dr. Kevin Jones

Escambia County Commissioners: Jeff Bergosh, Doug Underhill, Lumon May, Robert Bender, Steven Berry

Santa Rosa County Commissioners: Sam Parker, Robert "Bob" Cole, W.D. "Don" Salter, Dave Piech, Lane Lynchard

Okaloosa County Commissioners: Graham Fountain, Carolyn Ketchel, Nathan Boyles, Trey Goodwin, Kelly Windes

Walton County Commissioners: Bill Chapman, Danny Glidewell, Melanie Nipper, Trey Nick, Tony Anderson

Dear Committee Members and County Commissioners:

On September 18, 2019, the Medical Examiner Search Committee unanimously recommended that the counties retain Dr. Jon Thogmartin, Chief Medical Examiner for District Six, to assist the counties in their search process. This assistance to the counties may include advice regarding contracts, budgets and operations. He will also assist the committee in advertising and recruiting a permanent medical examiner.

Dr. Thogmartin has recommended that the committee suspend active recruitment efforts until after the beginning of the New Year. This is to allow the committee time to continue its work to make this a more attractive position. The committee has agreed to this recommendation.

I realize that this has been a difficult process and appreciate the cooperation of everyone involved.

Sincerely,


William "Bill" Eddins
State Attorney

WE/jw

c via email: Escambia County Attorney Alison Rogers
Santa Rosa County Attorney Roy Andrews
Okaloosa County Attorney Greg Stewart
Walton County Sidney Noy
Escambia County Administrator Janet Gilley
Santa Rosa County Administrator Dan Schebler
Okaloosa County Administrator John Hofstad
Walton County Administrator Larry Jones

WILLIAM "BILL" EDDINS

STATE ATTORNEY

FIRST JUDICIAL CIRCUIT OF FLORIDA

Please reply to Pensacola Office

September 20, 2019



Honorable Ron DeSantis
Governor of Florida
The Capitol
Tallahassee, FL 32399-0001

Re: Medical Examiner of District One

Governor DeSantis:

On January 18, 2019, my office notified you that the Medical Examiner's Commission failed to recommend the reappointment of Dr. Andrea Minyard as the Medical Examiner of District One. As a result, I appointed Dr. Andrea Minyard as temporary Medical Examiner to serve until the Medical Examiner's Commission recommends to the Governor and the Governor appoints a new Medical Examiner for District One.

Dr. Minyard has resigned her temporary position. Her last day of service is September 30, 2019. As a result, I appoint Dr. Timothy Gallagher as temporary Interim Medical Examiner effective October 1, 2019, until a new Medical Examiner is appointed for District One.

The search committee for the permanent position has made a diligent effort to obtain a new permanent medical examiner, but to date has been unable to do so.

Sincerely,

A handwritten signature in cursive script, appearing to read "William Eddins".

William "Bill" Eddins
State Attorney

c: via email Santa Rosa County Commissioner Sam Parker
Walton County Commissioner Tony Anderson
Escambia County Commissioner Lumon May
Okaloosa County Commissioner Kelly Windes
Dr. Stephen J. Nelson, Chairman, Medical Examiners Commission
Susan Smith, Governor's Office
Escambia, Santa Rosa, Okaloosa, and Walton County Sheriff's Offices
District One Police Departments
Dr. Timothy Gallagher, Interim Medical Examiner

ESCAMBIA COUNTY
190 Governmental Center
Post Office Box 12726
Pensacola, Florida 32591

SANTA ROSA COUNTY
6495 Caroline Street
Suite S
Milton, Florida 32570

OKALOOSA COUNTY
151 Cedar Avenue
Crestview, Florida 32536
(850) 689-7820

WALTON COUNTY
524A E. Hwy. 90
Post Office Box 630
DeFuniak Springs, FL 32435

Felony & Intake - (850) 595-4200
Misdemeanor - (850) 595-4200
Juvenile - (850) 595-3750

(850) 981-5500

1B 9th Ave.
Shalimar, Florida 32579
(850) 651-7260

(850) 892-8080



State of Florida Medical Examiners Commission

P.O. Box 1489 | Tallahassee, FL 32302-1489 | (850) 410-8600

August 15, 2019

Honorable Ron DeSantis
Governor of Florida
The Capitol, Plaza Level 05
400 South Monroe Street
Tallahassee, Florida 32399-0001

Re: Florida Violent Crime and Drug Control Council

Dear Governor DeSantis:

On June 30, 2019 the 2-year term for the medical examiner designated seat on the Florida Violent Crime and Drug Control Council [F.S. §943.031(2)(i)] currently held by District 12 Medical Examiner Russell S. Vega, M.D. expired.

Dr. Vega has volunteered to serve another 2-year term on the Council and I recommend him to you for re-appointment without hesitation.

If you have any questions, or need further information on Dr. Vega's qualifications for this position, please contact me at 863 298-4600.

Sincerely,

A handwritten signature in blue ink, appearing to read "Stephen J. Nelson".

Stephen J. Nelson, M.A., M.D., F.C.A.P.
Chairman
Medical Examiners Commission

SJN: scl

Enclosure

cc: Rick Swearingen, Commissioner, Florida Department of Law Enforcement

From: [Koenig, Vickie](#)
To: [Lucas, Steven](#)
Subject: FW: Organ research question
Date: Wednesday, September 11, 2019 1:29:20 PM

Topic for the November meeting.

From: Nelson, Stephen [mailto:StephenNelson@polk-county.net]
Sent: Wednesday, September 11, 2019 1:08 PM
To: Koenig, Vickie
Subject: RE: Organ research question

- 1.) Let's put this topic on the Agenda for the MEC meeting.
- 2.) We used to prohibit "research" uses of organs because we got burned one time that they were going to take the heart for transplantation, but that fell through and they took the heart for research.
If the heart is beating in the recipient, that's proof-positive that there was nothing wrong with it. However, if it's given to some researcher who never authors a diagnostic report to me, I have tremendous heartburn with that. We stopped that practice for hearts. We still allow research for other organs, but those other organs aren't as critical as heart (and brain) for sudden death determination.

Stephen J. Nelson, M.A., M.D., F.C.A.P.
District Medical Examiner
10th Judicial Circuit of Florida
(Polk, Hardee, and Highlands Counties)
1021 Jim Keene Boulevard
Winter Haven, FL 33880-8010
863-298-4600 main
863-298-5264 fax
863-687-1344 answering service (24/7/365)

From: Koenig, Vickie <VickieKoenig@fdle.state.fl.us>
Sent: Wednesday, September 11, 2019 1:04 PM
To: Nelson, Stephen <StephenNelson@polk-county.net>
Subject: [EXTERNAL]: RE: Organ research question

I was thinking that since the OPO had consent for transplant it would logically move to research too. Is there any heartburn with a ME possibly denying the organ for research on a case by case basis? I could see potentially having some link to the cause of death (possibly some type of anomaly in the heart that could be research worthy, but also directly contributory to death).

From: Nelson, Stephen [mailto:StephenNelson@polk-county.net]
Sent: Wednesday, September 11, 2019 1:01 PM
To: Koenig, Vickie
Subject: RE: Organ research question

When our organ procurement agency (LifeLink of Florida) asks for consent from the NOK, that consent includes transplantation AND research.

If the family consents for their loved one's organs and/or tissues to be recovered for transplant, in my District they have already consented for organ and tissue use for research. The NOK should be driving this anatomical gift, NOT the medical examiner. We're trying to REDUCE the number of organs and tissues that are buried.

Stephen J. Nelson, M.A., M.D., F.C.A.P.
District Medical Examiner
10th Judicial Circuit of Florida
(Polk, Hardee, and Highlands Counties)
1021 Jim Keene Boulevard
Winter Haven, FL 33880-8010
863-298-4600 main
863-298-5264 fax
863-687-1344 answering service (24/7/365)

From: Koenig, Vickie <VickieKoenig@fdle.state.fl.us>
Sent: Wednesday, September 11, 2019 12:55 PM
To: Nelson, Stephen <StephenNelson@polk-county.net>
Cc: Martin, James <JamesMartin@fdle.state.fl.us>
Subject: [EXTERNAL]: FW: Organ research question

Dr. Nelson,

I'm not sure that I've had this questions before. I know the statute is specific that organs (or body parts) cannot be kept with approval of the next of kin. I would think that the ME may need the organ in question to determine a cause of death. What are your thoughts, and if they allow the organ for research is next of kin consent needed (since it was during organ procurement)?

Thank you,
Vickie

From: Bayer, Lindsey [<mailto:Lindsey.Bayer@marioncountyfl.org>]
Sent: Wednesday, September 11, 2019 11:52 AM
To: Koenig, Vickie
Subject: Organ research question

Hi Vickie,

If an ME case goes into the OR for organ recovery and it is determined that the organs are unsuitable for transplant but are suitable for research is that something we would restrict on a case by case

basis?

Thanks,

Lindsey

Lindsey A. Bayer, MS, F-ABMDI

Director of Operations
Districts 5 & 24 Medical Examiner Office

809 Pine Street
Leesburg, FL 34748
(352)326-5961
(352)365-6438 Fax

Serving Lake, Sumter, Seminole, Marion, Citrus and Hernando Counties



Under Florida law, e-mail addresses are public records. If you do not want your e-mail address released in response to a public records request, do not send electronic mail to this entity. Instead, contact this office by phone or in writing.

Lucas, Steven

From: Nelson, Stephen <StephenNelson@polk-county.net>
Sent: Tuesday, August 27, 2019 8:56 AM
To: Claudia Dimit (cfdimit@gmail.com)
Cc: Koenig, Vickie; Lucas, Steven; Neel, Megan; Martin, James
Subject: inhalants - MEC drug report

Ms. Dimit,

Your August 24th email to Megan Neel at FDLE and the Medical Examiners Commission was referred to me as its Chairman.

The change that you refer to was made at the Medical Examiners Commission meeting of December 14, 2012 in Ocala. This was done to simplify the reporting process (as many new drugs were being reported to the MEC). The majority of inhalants reported to the MEC were difluoroethane. Reinstating the individual category is not something onerous.

I'll ask MEC staff that this issue be placed on our Agenda at our next MEC meeting in November. We don't yet have a firm location for that meeting, but it will likely be somewhere in Tampa Bay area. Your presence at that meeting is not necessary or required. Thank you for bringing this issue to my attention.

Stephen J. Nelson, M.A., M.D., F.C.A.P.
District Medical Examiner
10th Judicial Circuit of Florida
(Polk, Hardee, and Highlands Counties)
1021 Jim Keene Boulevard
Winter Haven, FL 33880-8010
863-298-4600 main
863-298-5264 fax
863-687-1344 answering service (24/7/365)

-----Original Message-----

From: Claudia Dimit [<mailto:cfdimit@gmail.com>]
Sent: Saturday, August 24, 2019 10:17 PM
To: Neel, Megan
Subject: Medical Examiners mtg. Agenda

Hi Megan

How do I request that a reinstatement of the Difluoroethane category be reinstated on the medical examiners annual reports? I guess it needs to be put on the Nov. agenda. Who do I write to and what do I need to provide.
Claudia Dimit

Sent from my iPhone

ANDREA N. MINYARD, M.D.

Stephen J. Nelson, M.A., M.D., F.C.A.P.
Chairman, Medical Examiners Commission
Email: StephenNelson@polk-county.net

October 24, 2019

Dear Dr. Nelson:

I am writing to you, the members of the Commission, and my medical examiner colleagues to correct mischaracterizations stemming from the events that resulted in my resignation as the District 1 Medical Examiner. I think it also important to describe the impact of this experience for other Medical Examiners and for the members of the Medical Examiners Commission (MEC).

Last year, Sheriffs Ashley and Adkinson from Okaloosa and Walton counties retrospectively reviewed all 2015 to 2018 deaths reported by their officers to the D1 Office. By way of background information, in D1, an average of three law enforcement officers either respond in person or supervise the first responders for any death outside of a hospital. Despite the number of law enforcement officers present at those scenes, no one in my office or the State Attorney's Office received any contemporaneous complaints regarding those deaths until the review was ordered by these Sheriffs.

A list of 89 cases was submitted by the Sheriffs in a complaint to the MEC. A probable cause panel chaired by Dr. Barbara Wolf as the sole Medical Examiner determined that of those 89 cases, more information was needed on 27. In each of the 27 cases, I offered to re-request all medical records and the Panel declined (*Source: phone conversation between Jeff Martin and Doug Culbertson*). The lack of medical records in the file was a major criticism cited by the Panel. In D1, as in other medical examiner offices, medical records are not retained in the ME file. D1's medical records are stored per GS2 schedule (*Rule 1B-24.003(1)(b) FAC*), and when cases are finalized, medical records are destroyed. Again, I offered to re-obtain medical records, but the Panel declined.

Of the 27 cases, 12 were considered to have violated various statutes and rules. According to the Panel, D1 mishandled 12 cases from over 8700 district-wide declined cases between 2015 and 2018. (*complaint attached*) Following the review, the Commission speculated that the 12 cases represented "the tip of the iceberg." I believe that it is neither ethical nor reasonable to make such declarations, because by its very nature, a retrospective review will flag any and all cases.

In April 2019, I contacted Dr. Wolf's office to set up a date and time when I would be permitted to review District 5's declined jurisdiction cases from 2015 to 2018. I informed Dr. Wolf's office what I would be looking for in advance of the visit. When I arrived, I was told that Dr. Wolf was not in the office for personal reasons. However, Dr. Wolf later implied at an MEC meeting that I had shown up at her office unannounced, demanding to see thousands of cases and medical records on a day when she would not be there. This is patently false. I think most people know that I am polite, respectful and professional, and it is not in my character to act as she described, but statements made in a public forum by an individual with the standing enjoyed by Dr. Wolf in her position as a Commission member are taken very seriously, carry a great deal of weight and may persuade others to believe these falsehoods. In addition, public records belong to the public and it should not be considered a nuisance when a request is made in the proper fashion. Further, it is concerning that Dr. Wolf mischaracterized what transpired, which deflects from the information discovered in her records.

As I reviewed Dr. Wolf's 2015 non-medical examiner (NME) cases, I discovered cases that were similar to those in D1 that were cited by the Probable Cause Panel. Attached are some of the cited cases from D1, and for comparison, cases where jurisdiction was declined by Dr. Wolf's district. Please observe the initials on D5 case cover pages. You can see that Dr. Wolf does not sign or initial any of the Associate's declined cases, a fact that is important because, of the twelve cases allegedly mishandled in D1, eight were decided by D1 *Associate* Medical Examiners. Dr. Wolf and the Probable Cause Panel suggested that I should have been disciplined for the professional decisions made by other competent medical examiners, while Dr. Wolf does not sign or initial all declined cases in her own district, which strongly suggests that she does not review every declined case in her jurisdiction.

At the last MEC meeting, the complaint against me was dismissed without prejudice. The recommendation to dismiss the action was signed by Assistant General Counsel Christopher Bufano on May 14, 2019 (attached); my resignation from D1 was announced on August 1, 2019. The MEC meeting minutes are at best misleading:

"The respondent recently submitted a letter of resignation from her current position effective September 30, 2019. FDLE Counsel recommended that the Commission dismiss the Administrative Complaint *in light of this development.*"
(Source: MEC minutes from August 9, 2019)

I request that this be corrected, because it is one of many gross mischaracterizations that have devalued my professional and personal reputation, damaged the trust placed in me by families, county and other agency officials and created increases in my professional liability insurance. I am left to explain to medical examiners and counties what transpired and reassure them that I am a competent and professional medical examiner while they wonder if they should gamble on me. These are not small or inconsequential realities.

Questions now remain for the Medical Examiners Commission to examine. How does the MEC continue to hold medical examiners to standards that are not also held by those who sit in judgement? Is it now appropriate for the MEC to reconsider the Probable Cause process and include several medical examiners from different districts to review information, in light of the fact that the Probable Cause Panel chaired by a single medical examiner is readily influenced by that sole medical examiner? How poorly do these circumstances reflect on Florida's districts and on the MEC when trying to attract applicants for positions held by competent medical examiners? Shouldn't certain procedures and judgements be reserved for egregious failings? Finally, and on behalf of all Florida medical examiners, I ask that this Commission consider, in the best interest of the public, to act as a body inclined to provide guidance, leadership and advice, rather than to disparage, incite, and expel.

I am requesting that a copy of this letter be provided to the MEC members and that it be read into the minutes in my absence. I am sincerely grateful for the support and consideration I have received from Dr. Nelson and others and for the time I have been provided today and throughout these past months.

Respectfully,

Andrea N. Minyard, MD



State of Florida Medical Examiners Commission

P.O. Box 1489 | Tallahassee, FL 32302-1489 | (850) 410-8600

November 27, 2018

MEMORANDUM

To: Stephen J. Nelson, M.A., M.D., F.C.A.P.
Chairman
Medical Examiners Commission

From: PROBABLE CAUSE PANEL
Barbara C. Wolf, M.D., District 5 Medical Examiner, Chair *Barbara Wolf M.D.*
Honorable J. Harrell Reid, Hamilton County Sheriff
Mr. Wesley Heidt, J.D., Office of the Attorney General

Subject: Report of the Panel – Complaint against Andrea N. Minyard, M.D. (District 1)

In May 2018, Okaloosa County Sheriff Larry Ashley and Walton County Sheriff Michael Adkinson filed formal complaints against District 1 Medical Examiner Andrea N. Minyard, M.D. The complaints allege that over the past few years several cases in their respective counties did not have an adequate death investigation performed as required pursuant to Chapter 406, F.S. The complaints further allege that Dr. Minyard was negligent in her duties as a medical examiner.

Staff thoroughly reviewed the information in the complaint, as well as all case documents provided by the District 1 Medical Examiner's Office. Lacking in depth medical knowledge for the variety of cases in question, staff requested that a probable cause panel be convened to determine if Dr. Minyard's decisions in the cases were sound and well-founded.

In response to your memorandum of July 13, 2018, the Probable Cause Panel convened on July 30, 2018, at 10:30 a.m. at the Hamilton County Sheriff's Office in Jasper, Florida. Panel members District 5 Medical Examiner Barbara C. Wolf, M.D., Sheriff Harrell Reid, and Mr. James Purdy, J.D., were all present. Also present were Commission staff members Vickie Koenig, Doug Culbertson, Beth McNeil, and FDLE Assistant General Counsel Chris Bufano. Staff had already mailed the Panel members a notebook and an Ironkey flash drive containing all documents and reference materials upon which the Panel would base their opinions.

The first order of business was the election of a chair, which Dr. Wolf accepted. Next, the Panel reviewed the statutory reference that established the Panel as well as the procedures that the Panel and the Commission will use in these proceedings. The authority of the Probable Cause Panel is established by section 406.075(3), F.S., and is limited to a determination of whether the facts establish a violation of Chapter 406, Florida Statutes, Florida Administrative Code Chapter 11G, or the Practice Guidelines.

Dr. Wolf discussed the allegations submitted by the complainants and potential violations of Chapter 406, Florida Statute, Rule 11G, Florida Administrative Code, and the Practice Guidelines for Florida Medical Examiners. The Panel agreed that scene response by the medical examiner's office is not statutorily required.

The Panel discussed each of the 27 cases outlined in the complaints. The case files were lacking in supporting documentation, especially medical records for the jurisdiction declined cases and photographs for accepted cases. The Panel requested staff to obtain law enforcement reports and EMS reports for several cases that would assist them in their findings. The Panel also directed staff to inquire of the District 1 Medical Examiner's Office whether any medical records or photographs exist for some of the cases. The Panel would reconvene upon obtaining the requested information.

On August 29, 2018, Governor Scott appointed Honorable Charlie Cofer, J.D. to replace the completed term of Mr. Purdy. As a result, Mr. Wesley Heidt, J.D. was named to the Panel. Mr. Purdy provided Mr. Heidt with the documents and reference materials to review prior to the next Panel meeting.

The Probable Cause Panel was delayed due to Hurricane Michael. The Panel reconvened on November 14, 2018, at 10:00 a.m. at the Hamilton County Sheriff's Office in Jasper, Florida, to discuss the cases and additional documents staff obtained. Panel members Dr. Wolf, Sheriff Reid, and Mr. Heidt were all present. Also present were Commission staff members Vickie Koenig, Beth McNeil, Chad Lucas, and FDLE Assistant General Counsel Chris Bufano.

Dr. Wolf reviewed the general discussion from the last meeting in which a number of the cases were questioned due to apparent lack of medical records to support determinations and findings in the cases. The additional law enforcement and EMS reports had been provided to the Panel members prior to the meeting. The District 1 Medical Examiner's Office advised staff that there were no medical records for the requested cases as the district considers them obsolete once the physician signs off on a case or jurisdiction is declined. The office also advised that no photographs are taken for any case that is an investigation only. Thus the Panel had all documents from the District 1 Medical Examiner's Office.

After extensive discussion of the cases, the Panel made the following determinations:

- Butler, Date of Death 8/15/2017: A 46 year old male with a history of alcohol and drug abuse. Case was initially declined, but later accepted because the decedent had no primary care physician. Medical records were requested, but none were received. No autopsy was performed and with no medical records there is nothing to support the opinion of cause and/or manner of death. With a history of substance abuse, no toxicology was performed, therefore drug toxicity as a cause of death could not be ruled out. (11G-2.003(5)(b), F.A.C.)
- Booker (aka Brunson), Date of Death 12/7/2015: A 50 year old female found collapsed in her kitchen with a history of alcohol and drug abuse. Two prescription bottles of hydrocodone belonging to the decedent along with other prescriptions were found on scene. One of the hydrocodone prescription bottles, filled seven days prior with a 15-day supply, was empty. No medical records were in the file. Jurisdiction was declined. The death certificate signed by the decedent's primary physician lists cause of death as aspiration. No toxicology was performed, therefore drug toxicity as a cause of death could not be ruled out. Cremation was approved. (11G-2.003(5)(b), F.A.C.)

- Taylor, Date of Death 5/30/2017: A 70 year old female found unresponsive on kitchen floor was reported as a possible choking incident. EMS reports indicate that two attempts at intubation were unsuccessful due to the amount of vomit in airway. Airway was suctioned with approximately 200 cc of thick vomitus removed. No medical records in file. Jurisdiction declined. (11G-2.003(5)(b), F.A.C.)
- Heasley, Date of Death 1/5/2017: A 62 year old female who was oxygen dependent died at home. While the decedent had been hospitalized 2 months prior with chronic obstructive pulmonary disease, there was a 2 hour delay in the family reporting the death. The decedent's body had been cleaned and removed from the house by the husband when the death was reported. The Panel felt that these factors make the death reasonably suspicious. No medical records in file. Jurisdiction declined. (11G-2.003(3)(b) and 11G-2.003(5)(a), F.A.C.)
- Johnson, Date of Death 6/24/2016: A 47 year old female found deceased at home. The family reported history of abuse of alcohol and pills and no pill counts were provided for a hydrocodone prescription on scene. Decedent had no medical history of any potentially fatal disease. No medical records in file or indications they were requested. No toxicology was performed, therefore, drug toxicity as a cause of death could not be ruled out. Jurisdiction declined. (11G-2.003(5)(b), F.A.C.)
- Trickett, Date of Death 10/28/2016: A 74 year old male with cardiac history was found at the bottom of stairs. While no reported trauma, there is a possibility of head trauma. No medical records in file. No autopsy was performed, therefore, trauma as a cause of death could not be ruled out. Jurisdiction declined. (11G-2.003(5)(b), F.A.C.)
- Stuart, Date of Death 1/26/2017: A 35 year old male was found unresponsive in bed. Family reported that he had been in a recent altercation and had a black eye. He had arrived in town the evening prior to being found deceased. Jurisdiction was accepted because he had no in-state primary physician and the decedent was transported to the medical examiner's office. No autopsy was performed, no body diagram was made, and no photographs or medical records were in the file. (11G-2.002(2), 11G-2.003(1)(e), and 11G-2.003(5)(a), F.A.C.)
- Beitler, Date of Death 10/5/2017: A 55 year old female with a history of ethanol abuse and binge drinking. Four empty 1.5 liter wine bottles were found in the trash. Medical records requested but none received. Jurisdiction accepted. No autopsy or toxicology was performed, therefore, acute alcohol toxicity as a cause of death could not be ruled out. (11G-2.003(5)(b), F.A.C.)
- Bruhn, Date of Death 11/5/2017: A 50 year old female with a reported 10-year pill problem. Prescriptions for decedent on scene include alprazolam and oxycodone. No pill counts provided. No medical records in file. Jurisdiction declined. No toxicology was performed, therefore, drug toxicity as a cause of death count not be ruled out. (11G-2.003(5)(b), F.A.C.)

- Teves, Date of Death 3/20/2018: A 58 year old male with medical history of epilepsy, dementia, and Parkinson's disease was deceased amid suspicions of neglect. There were inappropriate pill counts for the decedent's prescriptions, including alprazolam and hydrocodone. No medical records in file. Jurisdiction declined. No toxicology was performed, therefore, drug toxicity as a cause of death could not be ruled out. (11G-2.003(5)(a), F.A.C.)
- Christian, Date of Death 3/23/2018: A 62 year old male found deceased in his residence. Family reported that decedent would drink when taking alprazolam. Unknown pills were also found in a metal tin the deceased's dresser. No medical records in file. Jurisdiction declined. No toxicology was performed, therefore, drug toxicity as a cause of death could not be ruled out. (Rule 11G-2.003(5)(b), F.A.C.)
- Klang, Date of Death 3/28/2018: A 47 year old male with a history of depression and alcohol abuse found deceased at his home. No medical records in file to support a natural death. Death certificate signed by the decedent's primary physician lists cause of death as unknown. Cremation was approved. (11G-2.003(5)(b), F.A.C.)

Conclusions

The Panel found that there was probable cause for disciplinary action regarding the complaints lodged against Dr. Andrea Minyard. The Panel felt that there was a general lack of documentation of medical histories and records reviewed prior to making a determination. It was noted that the further from Escambia county a death occurred, the less likely it was that the District 1 Medical Examiner's Office would assume jurisdiction. There was also a general tendency to decline a case if the primary physician was willing to sign the death certificate even if circumstances surrounding the death or reports of drug/alcohol abuse indicated that the case should become a medical examiner's case. The Panel finds that all the cases identified above violated s. 406.075(1)(i), F.S., and Rule 11G-2.001(1)(b), F.A.C. Additional violations for subsections of Rule 11G-2.003, F.A.C., are noted for each of the cases cited above.

The Panel recommends that Dr. Minyard be placed on a period of supervised probation for one year. The supervised probation would be under the direction of a medical examiner of Dr. Minyard's choosing as approved by the Commission. Dr. Minyard would be required to provide initially 100% of all jurisdiction declined and any case without an autopsy to the supervising medical examiner every two weeks. The supervising medical examiner would report his/her observations to the Commission at every quarterly meeting, and would determine a graduated reduction in case reviews based on his/her observations.

The Panel is prepared to discuss this matter and the reasoning behind their conclusions at a future Commission meeting. In the meantime, please contact staff if you have any questions or if the panel can be of further assistance.

BCW/vgk



OFFICE OF THE DISTRICT ONE MEDICAL EXAMINER
A.N. Minyard, M.D. - Chief Medical Examiner

Escambia Santa Rosa Okaloosa Walton
5151 North 9th Ave. Pensacola Florida 32504
Telephone: (850) 416-7210 Fax: (850) 416-6475 Email: reportdeath@fldme.com



Central Office Use Only

Case Number:

MLA MLO MLI

Jurisdiction Status

Accepted

Declined

Approving Signature

Date Approved

16-31-16

PRELIMINARY REPORT OF INVESTIGATION

DECEDENT: Harold Wayne Thickett
(First Name) (Middle Name) (Last Name)

ADDRESS: _____
(residence) (Number & Street or Route, Box No.) (City, State) (County) ME Attended Scene? Yes No

INFORMATION ABOUT DECEDENT AND DESCRIPTION OF BODY

AGE (Under 2, use Months / Days) Age: <u>14</u> Date of Birth: _____ SSN: _____	SEX <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Undetermined	CLOTHING <input type="checkbox"/> Clothed* <input type="checkbox"/> Partially Clothed* <input type="checkbox"/> Unclothed	BODY TEMPERATURE <input type="checkbox"/> Warm <input type="checkbox"/> Cool <input type="checkbox"/> Cold Area Temp: _____ Core Temp: _____	BLOOD <input type="checkbox"/> Nose <input type="checkbox"/> Mouth <input type="checkbox"/> Ears <input type="checkbox"/> Clothing <input type="checkbox"/> None	POSITION <input type="checkbox"/> Prone <input type="checkbox"/> Supine <input type="checkbox"/> Sitting <input type="checkbox"/> Hanging <input type="checkbox"/> R-Side <input type="checkbox"/> L-Side <input type="checkbox"/> Slumped <input type="checkbox"/> Kneeling
MARITAL STATUS <input type="checkbox"/> Married <input type="checkbox"/> Never Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Unknown	HEAD-HAIR <input type="checkbox"/> None <input type="checkbox"/> Partly Bald <input type="checkbox"/> Blonde <input type="checkbox"/> Brown <input type="checkbox"/> Red <input type="checkbox"/> Black <input type="checkbox"/> Gray <input type="checkbox"/> White	EYES-Color: _____ (if Unidentified): _____ WEIGHT: _____ lbs.	RIGOR <input type="checkbox"/> Neck: <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> Arms: <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> Legs: <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 *0 = absent, *3 = full	FROTH <input type="checkbox"/> Present <input type="checkbox"/> Absent Color: _____	SCARS/TATTOOS R-Hand: _____ L-Hand: _____ Head: _____ Chest: _____ Stomach: _____ R-Arm: _____ L-Arm: _____ R-Leg: _____ L-Leg: _____ R-Back: _____ L-Back: _____ Other: _____
RACE <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Other	OTHER HAIR <input type="checkbox"/> Mustache <input type="checkbox"/> Beard	LENGTH: _____ inches	TEETH/DENTAL <input type="checkbox"/> Natural <input type="checkbox"/> False <input type="checkbox"/> Orthodontics <input type="checkbox"/> Restorations	LIVOR Color: _____ Fixed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Anterior <input type="checkbox"/> Posterior <input type="checkbox"/> Lateral (R / L)	OTHER (Dirt, water etc.) <input type="checkbox"/> Nose <input type="checkbox"/> Mouth <input type="checkbox"/> Ears <input type="checkbox"/> None
DECOMPOSITION <input type="checkbox"/> Early <input type="checkbox"/> Advanced <input type="checkbox"/> None					

INFORMATION ABOUT OCCURRENCE

ITEM	DATE	TIME	LOCATION WCSO	COUNTY	TYPE OF PREMISES (Home, farm, highway, hospital, etc.)
M.E. NOTIFIED	10/29	1225	(Agency/Informant) Dep. Epley Investigator: Case#: 16-00103320	W	Phone #:
INJURY AND/OR ILLNESS	UNK	UNK	(Address)	W	Residence
PRONOUNCED	10/29	1015	(Address/By Whom) Niece	W	Residence
FOUND DEAD			(Name/Relationship) Brother-in-law	W	Residence
LAST KNOWN ALIVE	10/28	1930	(Premises Type)		
ARRIVED AT SCENE			(Location/Site Taken)		PHOTOS TAKEN? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No RESIDENCE SECURE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
CORE BODY TEMP					

SUSPECTED MANNER OF DEATH? Natural Homicide Suicide Accident Pending Undetermined Employment Related? Yes No Unknown

MEANS OF DEATH IF OTHER THAN NATURAL

IF MOTOR VEHICLE INVOLVED <input type="checkbox"/> Driver (if known) <input type="checkbox"/> Passenger (if known) <input type="checkbox"/> Pedestrian <input type="checkbox"/> Other	<input type="checkbox"/> Lap Belt Used <input type="checkbox"/> Shoulder Belt Used <input type="checkbox"/> Helmet <input type="checkbox"/> Child Restraint	<input type="checkbox"/> Hit-Run <input type="checkbox"/> Multiple Fatality <input type="checkbox"/> Air Bag Deployed <input type="checkbox"/> Ejected	<input type="checkbox"/> Passenger Car <input type="checkbox"/> Truck <input type="checkbox"/> Van <input type="checkbox"/> Motorcycle	<input type="checkbox"/> Farm Equipment <input type="checkbox"/> Semi-Trailer <input type="checkbox"/> Bicycle <input type="checkbox"/> Other:
IF WEAPON RELATED: <input type="checkbox"/> Rifle - Cal. _____ <input type="checkbox"/> Handgun - Cal. _____ <input type="checkbox"/> Shotgun - Cal. _____ <input type="checkbox"/> Unknown Type	<input type="checkbox"/> Stippling <input type="checkbox"/> Smudging <input type="checkbox"/> Abrasion <input type="checkbox"/> Round	<input type="checkbox"/> Oblong <input type="checkbox"/> Stellate <input type="checkbox"/> Surg. Treated <input type="checkbox"/> Other	<input type="checkbox"/> Head <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Abdomen	<input type="checkbox"/> Buttocks <input type="checkbox"/> Thighs <input type="checkbox"/> Lower Legs <input type="checkbox"/> Feet <input type="checkbox"/> Upper Arms <input type="checkbox"/> Lower Arms <input type="checkbox"/> Hands <input type="checkbox"/> Other
INSTRUMENT: WHAT KIND:	<input checked="" type="checkbox"/> Blunt / <input type="checkbox"/> Sharp	LIGATURE DESCRIPTION:		
IF VERDOSE: (Suspected) <input type="checkbox"/> Drug <input type="checkbox"/> Alcohol <input type="checkbox"/> Chemical/Poison <input type="checkbox"/> Unknown	REMARKS:		<input type="checkbox"/> Ingested <input type="checkbox"/> Injected <input type="checkbox"/> Inhaled <input type="checkbox"/> Unknown	<input type="checkbox"/> Other:

SCENE CONDITIONS

BIOLOGICAL/ ENVIRONMENTAL CONDITIONS	Animal Activity <input type="checkbox"/> Yes <input type="checkbox"/> No	Weather Conditions:	Body Location:	Surface Type:	Body Fluids:
	Type:	<input type="checkbox"/> Day <input type="checkbox"/> Rain	<input type="checkbox"/> Indoors	<input type="checkbox"/> Carpet <input type="checkbox"/> Sand	<input type="checkbox"/> Moist
	Insect Activity <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Night <input type="checkbox"/> Hurricane	<input type="checkbox"/> Outdoors	<input type="checkbox"/> Tile/Wood <input type="checkbox"/> Concrete	<input checked="" type="checkbox"/> Wet
	Fly <input type="checkbox"/> Egg <input type="checkbox"/> Larva <input type="checkbox"/> Pupal <input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Tornado		<input type="checkbox"/> Grass <input type="checkbox"/> Water	<input type="checkbox"/> Dry
Beetle: <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Cloudy <input type="checkbox"/> Lightning		<input checked="" type="checkbox"/> Dirt <input type="checkbox"/> Other	<input type="checkbox"/> Other	
Ant: <input type="checkbox"/> Yes <input type="checkbox"/> No					

MEDICAL HISTORY

CONDITION: <input type="checkbox"/> Hypertension <input type="checkbox"/> Vascular Disease <input type="checkbox"/> Pulmonary Disease <input type="checkbox"/> Diabetes <input type="checkbox"/> Cancer <input type="checkbox"/> Fractures <input type="checkbox"/> Seizure	<input type="checkbox"/> Tobacco: day/week/month <input type="checkbox"/> Alcohol: day/week/month <input type="checkbox"/> Narcotic: day/week/month <input type="checkbox"/> Other (specify):	MEDICAL PROVIDER INFORMATION: NAME: _____ PHONE #: _____ NAME: _____ PHONE #: _____	MEDICATIONS: _____ _____ _____
---	---	--	--

NEXT OF KIN - Name and Phone #: _____

IDENTIFICATION (Source) By: Visual Photo/D.L. Fingerprint Dental X-ray Unidentified Other: _____

NARRATIVE SUMMARY OF CIRCUMSTANCES SURROUNDING DEATH:

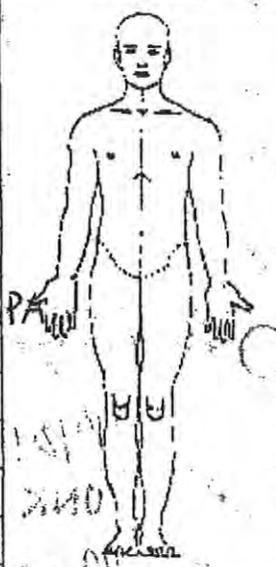
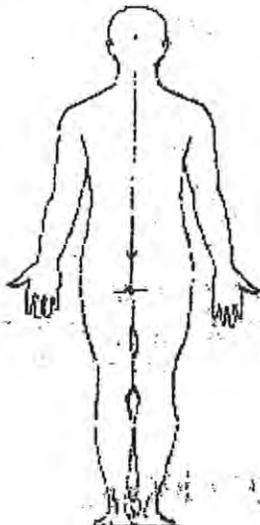
FIND unresponsive at bottom of stair case.

No reported trauma - per WSO appeared as if decedent collapsed.

med hx: Pap Dr Thomas Roberts PA Healthmark clinic
 # M/W
 (P) (850) 951-4556
 (F) (850) 951-4527

Last seen 10/19/16

meds:
 Rosuvastatin
 Clopidogrel
 Valsartan
 carvedilol
 Doloral
 Toprol



- WITNESSED:**
 YES NO
- APPARENT TRAUMA:**
 YES NO
- ANY SUSPICIOUS SIGNS:**
 YES NO
- SUBSTANCE ABUSE:**
 YES NO

Evidence Collected: _____

Personal Effects: _____

Released to:
 Next of Kin (Immediate Only)
 Law Enforcement
 Left at Scene

DISPOSITION OF THE BODY

Transported Not Transported

Transported to: SHH FWB Funeral Home Other: _____

Funeral Home (Name and Telephone): JERRY EVANS

Physician to Sign Death Certificate: D. HOSH Physician Name and Phone #: _____

Forensic Investigator: BM/CN

District 5 Medical Examiner -- Non Medical Examiner Case

Year 2015
CaseNumber 00644
County Sumter
Date & Time Reported 07/07/2015 1504
Reporting Agency The Villages Regional Hospital
Reported By Jason Taylor
Phone (352) 751-8140

Decedent Information

Lastname Fetter
Firstname Norman
Middlename
Date Of Birth [REDACTED]
Date & Time Of Death 07/07/2015 1318
Age: 75
Race White
Gender M
Body was Found
Place of Death ER/Outpatient

Investigator: Harding, Brett
Next of Kin Name Gail Fetter- spouse
Next of Kin Phone (352) 483-6972
Doctor Signing DC Dr. Anwar Khan
Doctor's Phone
Funeral Home All Faiths The Villages
Return to District Declined: False

Narrative

This death was reported by Jason Taylor of the Villages Regional Hospital a possible trauma related death. He stated the decedent, Norman Fetter, was working on his approximately 4 foot high deck at home today. His wife stated he offered no complaints and even had been dancing prior to this event. Around 12:30 his wife discovered him unresponsive next to the deck. 9-1-1 was called and paramedics responded. Upon their arrival they found the patient to be unresponsive with ants on his body. Examination revealed

Brett
✓

District 5 Medical Examiner -- Non Medical Examiner Case

a contusion to the eye, an abrasion to the leg, an abrasion to the arm and his dentures to be broken.

Resuscitation was initiated and the patient was transported to the emergency department. There he arrived asystolic and resuscitation was exhausted without success. The decedent's past medical history is significant for a hypertension and diabetes. I informed Mr. Taylor that I would come to the emergency department to inspect and examine the decedent.

Upon my arrival in the emergency department I am met by Nurse Taylor. I am taken to room #12 within the department. The decedent is on a hospital bed covered in a white sheet. Removal of the sheet reveals the decedent to be clad in a hospital gown. The decedent has a hospital band bearing his name on his wrist. Evidence of medical intervention includes electrocardiogram patches, a cervical collar and an intraosseous catheter. The decedent face and neck are covered in ant bites. The body is cool to the touch in an environment that is cool. Rigor has developed and blanching dependent lividity is present.

Examination of the body reveals a very small laceration to the eyelid. Inspection of the eye reveals a traumatic injury. Abrasions are identified on the knees, arm and face. Removal of the cervical collar reveals no injury to the neck, visually or by palpation. The primary care physician, Dr. Anwar Khan, was contacted and agreed to certify the death. No foul play or recreational drug use was involved in the death. The decedent was photographically documented utilizing digital imaging. The circumstances surrounding the death were discussed with Dr. Barbara Wolf. Jurisdiction was declined and the body released to a funeral home or cremation service of the family's choice.

District 5 Medical Examiner -- Non Medical Examiner Cas

Year 2015
CaseNumber 00130
County Hernando
Date & Time Reported 02/03/2015 1304
Reporting Agency Bayfront Health Spring Hill
Reported By RN Jennifer Pearce
Phone 352-688-3002

Decedent Information

Lastname Fultz
Firstname William
Middlename
Date Of Birth [REDACTED]
Date & Time Of Death 02/03/2015 1145
Age: 50
Race White
Gender M
Body was Found
Place of Death ER/Outpatient
Investigator: Pope, Melissa
Next of Kin Name Hilda Mayhew
Next of Kin Phone Unknown
Doctor Signing DC Jignesh Patel
Doctor's Phone (727) 815-7207
Funeral Home Downing Funeral Home & Cremation Services
Return to District Declined: False

SL
2/13/15
for supplement



Narrative

On 2/3/15 at 1304 hours this office was contacted by Jennifer Pearce of Bayfront Spring Hill (352-688-3002) and notified of the death of William Fultz, a 50 year old white male who had a witnessed seizure then fell and hit his face, and then went into the ER in cardiac arrest. He was pronounced dead at 1145 hours by Dr. Lopez-Cortez. The death was reported because the decedent has no attending physician. According to Pearce, the decedent had injuries from the fall, including a lacerated lip, a missing right upper

District 5 Medical Examiner -- Non Medical Examiner Cas

incisor, and a large hematoma on the bottom lip. There were no other observable injuries.

His history includes alcohol abuse, cirrhosis of the liver, COPD, bipolar disorder and schizophrenia. He also has a history of suicidal ideations. Reportedly, the decedent has come to the ER in the past after drinking a gallon of Captain Morgan's rum and hearing voices telling him to kill himself and other people. They have no history of the decedent making any suicidal attempts.

I asked Pearce to place the decedent on hold in the hospital morgue.

I contacted the decedent's "foster father" Darren Mikal (352-398-6549), who shared his residence with the decedent and helped care for him. He provided the following information. The decedent grew up in foster homes until he was 18 years old. His mother (Hilda Mayhew) is mentally ill and he has not been able to locate a number to contact her. She lives in Morefield, West Virginia. Mr. Mikal stated that he would contact the HCSO for assistance in locating her. Reportedly, the decedent was in treatment at The Harbor (Pasco County) last year, and was then sent to St. Joseph's Hospital over Christmas. He was there for 3 days before going to Holy Grand (a homeless shelter). He then walked 22 miles to return to Mikal. The decedent was an alcoholic and had cirrhosis of the liver. For 2-3 days before his death, the decedent felt sick and stayed in bed except to go outside and smoke cigarettes. Mikal believed the decedent may have developed pneumonia.

Mikal stated that the decedent has never had any suicidal ideations or attempts in the past. He has never abused prescription or illegal drugs. He smoked approximately 2 packs of cigarettes per day since he was 7-8 years old. He has no prescription medications and has not been to see a doctor in years.

I requested records from St. Joes, but received a note that the decedent was actually seen at Morton Plant Hospital. Records were requested from there.

-Melissa Pope

2/5/2015 Medical records were received from Morton Plant Hospital. Writer contacted RN Supervisor Donna Lambert at Bayfront Health Spring Hill and was informed that the decedent's "foster family" were currently present with her at the hospital. Writer asked Darren Mikal about the decedent's history with seizures and he replied that the decedent had never been diagnosed with a seizure disorder. He stated he believed the seizure-like activity was a result of the decedent's chronic alcoholism. He further added that the decedent had never sustained any traumatic head injuries. Mr. Mikal stated that arrangements have been made with Downing Funeral Home.

The medical history and circumstances surround this death were discussed with Chief Investigator Harding who discussed the case with Dr. Kyle Shaw. The next-of-kin stated the seizures were due to his alcohol abuse and no trauma was involved. Jurisdiction was declined. The ME hold was released on the decedent who was then released to Dowling Funeral Home.

Inv. Hopkins

2/13/2015: Dr. Patel called the office indicating he did not feel he should sign the death certificate, and if he did he would put "unknown" since he was not present at the death. We discussed the case, as well as a brief summary of Florida statute regarding such cases. He agreed and was understanding that the

District 5 Medical Examiner -- Non Medical Examiner Cas

decedent had a history of significant medical conditions, but was initially resistant to allowing me to provide him information regarding the circumstances of death. Eventually we were able to discuss the circumstances of death as reported to this office, and he indicated he would put something to the effect of "multiple medical conditions of aging" on the death certificate.

-KCSHaw, MBBS



OFFICE OF THE DISTRICT ONE MEDICAL EXAMINER
A.N. Minyard, M.D. - Chief Medical Examiner

Escambia Santa Rosa Okaloosa Walton
5151 North 9th Ave. Pensacola Florida 32504
Telephone: (850) 416-7210 Fax: (850) 416-6475 Email: reportdeath@fdme.com



Central Office Use Only

Case Number:

MLA MLO MLI

Jurisdiction Status

Accepted Declined

Approving Signature

Date Approved

JUN 02 2017

PRELIMINARY REPORT OF INVESTIGATION

DECEDENT:

Janet (First Name) C (Middle Name) Taylor (Last Name)

ADDRESS:

415 Gulf Shore Dr #4 (Number & Street or Route, Box No.) Destin, FL (City, State) _____ (County)

ME Attended Scene? Yes No

INFORMATION ABOUT DECEDENT AND DESCRIPTION OF BODY

AGE (Under 2 use Months / Days)

Age: 70
Date of Birth: [REDACTED]
SSN: _____

SEX
 Male
 Female
 Undetermined

CLOTHING
 Clothed*
 Partially Clothed*
 Unclothed

BODY TEMPERATURE
 Warm Cool Cold
Area Temp: _____
Core Temp: _____

BLOOD
 Nose Mouth
 Ears Clothing
 None

POSITION
 Prone Supine
 Sitting Hanging
 R-Side L-Side
 Stumped Kneeling

MARITAL STATUS

Married
 Never Married
 Widowed
 Divorced
 Separated
 Unknown

HEAD-HAIR

None
 Partly Bald
 Blonde
 Brown
 Red
 Black
 Gray
 White

EYES-Color: _____

(If Unidentified:)

WEIGHT: _____ lbs.
LENGTH: _____ inches

RIGOR
 Neck: 0 1 2 3
 Arms: 0 1 2 3
 Legs: 0 1 2 3
*0 = absent, *3 = full

FROTH
 Present Absent
Color: _____

OTHER
(Dirt, water etc.)
 Nose
 Mouth
 Ears
 None

SCARS/TATTOOS

R-Hand: _____
L-Hand: _____
Head: _____
Chest: _____
Stomach: _____
R-Arm: _____
L-Arm: _____
R-Leg: _____
L-Leg: _____
R-Back: _____
L-Back: _____
Other: _____

RACE

White
 Black
 Hispanic
 Asian
 Other

OTHER HAIR

Mustache
 Beard

TEETH/DENTAL

Natural
 False
 Orthodontics
 Restorations

LIVOR
Color: _____
Fixed? Yes No
 Anterior
 Posterior
 Lateral (R / L)

DECOMPOSITION

Early
 Advanced
 None

INFORMATION ABOUT OCCURRENCE

ITEM	DATE	TIME	LOCATION	COUNTY	TYPE OF PREMISES (Home, farm, highway, hospital, etc.)
M.E. NOTIFIED	5/30	2138	(Agency/Informant) Investigator: <u>Sgt. Watkins</u> Case#: <u>OC30 17-007123</u>	OK	Phone #: <u>259-0054</u>
INJURY AND/OR ILLNESS			(Address)		
PRONOUNCED <u>FOUND DEAD</u>	5/30	2017	(Address/By Whom) <u>Husband</u>	OK	DR
LAST KNOWN ALIVE			(Name/Relationship)		
ARRIVED AT SCENE			(Premises Type)	PHOTOS TAKEN? <input type="checkbox"/> Yes <input type="checkbox"/> No	RESIDENCE SECURE? <input type="checkbox"/> Yes <input type="checkbox"/> No
CORE BODY TEMP			(Location/Spot Taken)		

SUSPECTED MANNER OF DEATH? Natural Homicide Suicide Accident Pending Undetermined Employment Related? Yes No Unknown

MEANS OF DEATH - IF OTHER THAN NATURAL

IF MOTOR VEHICLE INVOLVED	<input type="checkbox"/> Driver (if known) <input type="checkbox"/> Passenger (if known) <input type="checkbox"/> Pedestrian <input type="checkbox"/> Other	<input type="checkbox"/> Lap Belt Used <input type="checkbox"/> Shoulder Belt Used <input type="checkbox"/> Helmet <input type="checkbox"/> Child Restraint	<input type="checkbox"/> Hit-Run <input type="checkbox"/> Multiple Fatality <input type="checkbox"/> Air Bag Deployed <input type="checkbox"/> Ejected	<input type="checkbox"/> Passenger Car <input type="checkbox"/> Truck <input type="checkbox"/> Van <input type="checkbox"/> Motorcycle	<input type="checkbox"/> Farm Equipment <input type="checkbox"/> Semi-Trailer <input type="checkbox"/> Bicycle <input type="checkbox"/> Other:	
IF WEAPON RELATED:	<input type="checkbox"/> Rifle - Cal. _____ <input type="checkbox"/> Handgun - Cal. _____ <input type="checkbox"/> Shotgun - Cal. _____ <input checked="" type="checkbox"/> Unknown Type	<input type="checkbox"/> Stippling <input type="checkbox"/> Smudging <input type="checkbox"/> Abrasion <input type="checkbox"/> Round	<input type="checkbox"/> Oblong <input type="checkbox"/> Stellate <input type="checkbox"/> Surg. Treated <input type="checkbox"/> Other	<input type="checkbox"/> Head <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Abdomen	<input type="checkbox"/> Buttocks <input type="checkbox"/> Thighs <input type="checkbox"/> Lower Legs <input type="checkbox"/> Feet	<input type="checkbox"/> Upper Arms <input type="checkbox"/> Lower Arms <input type="checkbox"/> Hands <input type="checkbox"/> Other
INSTRUMENT:	WHAT KIND: <input checked="" type="checkbox"/> Blunt / <input type="checkbox"/> Sharp	LIGATURE DESCRIPTION:				
IF OVERDOSE: (Suspected)	<input type="checkbox"/> Drug <input type="checkbox"/> Alcohol <input type="checkbox"/> Chemical/Poison <input type="checkbox"/> Unknown	REMARKS:	<input type="checkbox"/> Ingested <input type="checkbox"/> Injected <input type="checkbox"/> Inhaled <input type="checkbox"/> Unknown	<input type="checkbox"/> Other:		

SCENE CONDITIONS

BIOLOGICAL/ ENVIRONMENTAL CONDITIONS	Animal Activity <input type="checkbox"/> Yes <input type="checkbox"/> No Type: _____ Insect Activity <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Fly <input type="checkbox"/> Egg <input type="checkbox"/> Larva <input type="checkbox"/> Pupal <input type="checkbox"/> Beets: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Ant: <input type="checkbox"/> Yes <input type="checkbox"/> No	Weather Conditions: <input type="checkbox"/> Day <input type="checkbox"/> Rain <input type="checkbox"/> Night <input type="checkbox"/> Hurricane <input type="checkbox"/> Clear <input checked="" type="checkbox"/> Tornado <input type="checkbox"/> Cloudy <input type="checkbox"/> Lightning	Body Location: <input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors	Surface Type: <input type="checkbox"/> Carpet <input type="checkbox"/> Sand <input type="checkbox"/> Tile/Wood <input type="checkbox"/> Concrete <input checked="" type="checkbox"/> Grass <input type="checkbox"/> Water <input type="checkbox"/> Dirt <input type="checkbox"/> Other	Body Fluids: <input checked="" type="checkbox"/> Moist <input type="checkbox"/> Wet <input type="checkbox"/> Dry <input type="checkbox"/> Other
---	--	--	---	--	---

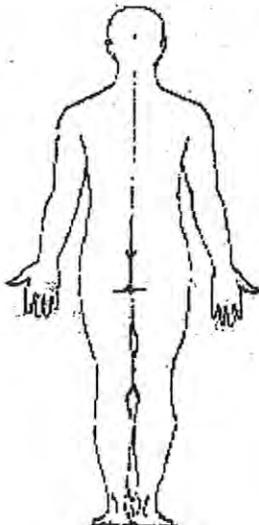
MEDICAL HISTORY

CONDITION <input type="checkbox"/> Hypertension <input checked="" type="checkbox"/> Vascular Disease <input type="checkbox"/> Pulmonary Disease <input type="checkbox"/> Diabetes <input type="checkbox"/> Cancer <input type="checkbox"/> Fractures <input type="checkbox"/> Seizure	<input type="checkbox"/> Tobacco: _____ day/week/month <input type="checkbox"/> Alcohol: _____ day/week/month <input type="checkbox"/> Narcotic: _____ day/week/month <input checked="" type="checkbox"/> Other (specify): _____	MEDICAL PROVIDER INFORMATION: NAME: _____ PHONE #: _____ NAME: _____ PHONE #: _____	MEDICATIONS: _____ _____ _____
---	---	--	--

NEXT OF KIN - Name and Phone #: Thomas Taylor Husband

IDENTIFICATION - (Source) By: Visual Photo/D.L. Fingerprint Dental X-ray Unidentified Other:

NARRATIVE SUMMARY OF CIRCUMSTANCES SURROUNDING DEATH:



3 yrs ago MI, DM

home in kitchen by herself - husband found on floor food in kitchen

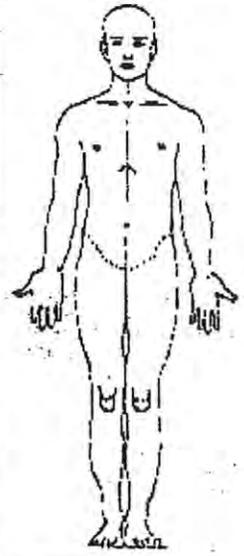
EMS stated obstructed airway - cleared airway

PCP - Dr. Edinger out of FWO by hospital

Les Walters -

EMS report stated only thick vomit in airway with chewed up tortilla chips

↳ ran by Doc "let her go"



WITNESSED:
 YES NO

APPARENT TRAUMA:
 YES NO

ANY SUSPICIOUS SIGNS:
 YES NO

SUBSTANCE ABUSE:
 YES NO

Evidence Collected: _____

Personal Effects: _____

Released to:
 Next of Kin (Immediate Only)
 Law Enforcement
 Left at Scene

DISPOSITION OF THE BODY

Transported Not Transported

Transported to: SHH FWB Funeral Home Other: notify for

Funeral Home (Name and Telephone): Davis - Watkins 864-1822 Called for Release At

Physician to Sign Death Certificate: _____ Physician Name and Phone #: _____

Forensic Investigator: R. Sialer

District 5 Medical Examiner -- Non Medical Examiner Case

Year 2015
CaseNumber 00947
County Lake
Date & Time Reported 10/15/2015 000
Reporting Agency Leesburg Regional Medical Center
Reported By Cathy Klink
Phone 352-323-5762

Decedent Information

Lastname Byrd
Firstname Thomas
Middlename
Date Of Birth [REDACTED]
Date & Time Of Death 10/14/2015 2329
Age: 51
Race White
Gender M
Body was Found
Place of Death ER/Outpatient

Investigator: Locklear, Krystal

Next of Kin Name Penny Byrd

Next of Kin Phone 727-813-5698

Doctor Signing DC

Doctor's Phone

Funeral Home

Return to District Declined: False

Narrative

On October 15, 2015 at 0000 hours this office was contacted by Cathy Klink with Leesburg Regional Medical Center and notified of the death of Thomas Byrd, a 51 year old white male. This office was contacted because the decedent had possibly aspirated food, while eating.

Cathy provided the following information: the decedent and his spouse were consuming dinner when he



District 5 Medical Examiner -- Non Medical Examiner Case

became unresponsive and fell to the ground. He began vomiting and 911 was contacted. Medics arrived on scene, but were unable to intubate due to the amount of food particles present in the airway. He was transported to Leesburg Regional Medical Center for a full evaluation. He remained unresponsive and was pronounced dead at 2329 hours. There was a documented history of hypertension and chronic obstructive pulmonary disease. It is unknown who the primary care physician was at this time.

Cathy was notified that additional information would be necessary prior to determining jurisdiction. Records were requested from Leesburg Regional Medical Center for review. The decedent's family has not chosen a funeral home.

Inv. Locklear

10/15/2015 – Records were received from Leesburg Regional Medical Center and advised that the decedent was eating dinner, started gasping for air and then began vomiting. Chief Investigator Harding was notified of the circumstances surrounding this death and advised that it would not fall under Medical Examiner's jurisdiction.

Cathy was contacted and notified that based on the information provided that this death would not fall under Medical Examiner's jurisdiction. She advised that the decedent did have a primary care physician who agreed to certify the death certificate, but she did not have his name readily available. The decedent was released with no holds. –KL



OFFICE OF THE DISTRICT ONE MEDICAL EXAMINER
A.N. Minyard, M.D. - Chief Medical Examiner



Escambia - Santa Rosa - Okaloosa - Walton
5151 North Ninth Avenue Pensacola Fl 32504
Telephone: (850) 416-7200 Fax: (850) 416-6475 Email: districtone@fldme.com

REPORT OF INVESTIGATION

DECEDENT: Laura Renee Beitler

Case Number: MLI-170836

ADDRESS: 9950 US Highway 98 W Lot J8, Miramar Beach, FL 32550

Approving Signature:

DECEDENT INFORMATION AND DESCRIPTION OF BODY					
AGE: 55 Yr	RACE: White	SEX: Female	DOB: [REDACTED]	SSN: [REDACTED]	MARITAL STATUS: Single
POSITION:	SKIN TEMPERATURE:	RIGOR: Neck: Arms: Legs:	LIVOR: Color: Fixed: Location:	FROTH:	DECOMPOSITION:
Next Of Kin: Yiorgos Christakis 774-408-6177 Son					
Identification: Visual			Identified By: Family Friend		
LAW ENFORCEMENT AGENCY					
Agency Name: WCSCO - Walton County Sheriff's Office			Investigated By: Deputy Jeffrey McIntosh		Offense/CAD Number: 17-109284
INCIDENT INFORMATION					
ITEM	DATE	TIME	LOCATION	COUNTY	PREMISES
NOTIFICATION	10/05/17	11:33	(Agency/Informant) WCSCO Report By: Jeff	Walton	Phone Number: 850-865-3573
INJURY					
DEATH	10/05/17	10:20 FND	9950 US Highway 98 W Lot J8 Miramar Beach, FL. 32550 Pronounced by:	Walton	Decedent's Residence
LAST KNOWN ALIVE:	10/04/17	09:00	(Name/Relationship) Justina Marie Brewer/Friend	Seen And Heard	Decedent's Residence
ARRIVED ON SCENE			(Premises Type)	Photos Taken: No Residence Secure: Yes	
CORE BODY TEMPERATURE			(Location/Site Taken)	Body Temp:	Area Temp:
SUSPECTED MANNER: Natural			ME Attended Scene: Scene Not Attended		
MEDICAL HISTORY					
Chronic ETOH Abuse, Sleep Apnea, Depression.					
DISPOSITION OF BODY					
Transported To: Release to FH					
Funeral Home: Clary-Glenn 850-892-2511					
Physician to Sign Death Certificate: Andrea N. Minyard, M.D.					

INITIAL CALL SUMMARY

55 y/o w/f found deceased in her residence from suspected natural causes. No trauma or foul play could be reported. The decedent has a past medical history of chronic ETOH abuse. No PCP could be reported. Medical records have been requested to determine jurisdiction.

CASE NARRATIVE

55 y/o w/f found deceased in her residence from suspected natural causes. The decedent was last known alive on 10/04/17 at approximately 0900 hrs., when she was last seen and heard by a friend. On 10/05/17 at approximately 1020 hrs., the decedent was found unresponsive in bed by the same friend. 911 was notified. South Walton Fire Rescue (SWFR) and Walton County Sheriff's Office (WCOS) arrived on scene where death was confirmed at approximately 1026 hrs., by SWFR. I was notified of this case on 10/05/17 at approximately 1133 hrs., by Deputy McIntosh, with WCOS. At this time, I was informed that the decedent did not suffer from any apparent trauma and foul play was not suspected. According to family, the decedent suffered from chronic ethanol abuse and had previous back surgeries. Four empty wine bottles were located in a trash inside of the residence, with receipts stating that two of them were purchased on 09/28/17 and two other ones were purchased on 10/01/17. No other sources of alcohol could be located on scene. Reportedly, the decedent did not see a physician and was not currently on any medications. The decedent was released to Clary-Glenn Funeral Home with a hold placed pending a medical records search. On 10/09/17, this case was discussed with Dr. Minyard in regards to no medical records being located. On 10/09/17, I spoke with the decedent's son. At this time, I was informed that the decedent suffered from sleep apnea, depression, along with chronic ethanol abuse. Reportedly, the decedent would not consume any ethanol for approximately five-six months, until something upset her. Once the decedent was upset, it was stated she would consume a large amount of ethanol for a period of time before becoming sober again. According to the decedent's mother, the decedent had recent complaints of chest pains and worsening sleep apnea. The decedent had voiced wanting to see a Cardiologist; however, never made an appointment. The decedent's son stated that the decedent had some concern that she may have suffered from hypertension and recent weight gain; however, never received medical treatment. The District One Medical Examiner's Office has accepted jurisdiction as the decedent was unattended at the time of death.

Forensic Investigator: B. Munro

District 5 Medical Examiner -- Non Medical Examiner Case

Year: 2015
Case Number: 00657
County: Marion
Date & Time Reported: 07/10/2015 1233
Reporting Agency: Marion County Sheriff's Office
Report of By: Deputy Velasquez
Phone: 352-843-4366

Decedent Information

Last Name: Gaubatz
First Name: Guy
Initials: D
Date Of Birth: [REDACTED]
Date & Time Of Death: 07/10/2015 1155
Age: 65
Race: White
Gender: M
Body was Found:
Place of Death: Residence

Investigator: Dotson, Keara
Next of Kin Name: Christine Krona
Next of Kin Phone: 734-330-8752
Doctor Signing DC: Dr. Geepha
Doctor's Phone: 352-369-3320
Funeral Home:

Return to District Declined: False

Narrative

On 07/10/2015 at 1233 hours, Deputy Velasquez (352-843-4366) with the Marion County Sheriff's Office contacted this office to report the death of Guy D. Gaubatz, a 65 year old white male, whose death was pronounced at his residence located at 7120 SW 132nd Avenue in Ocala. This death was reported as a possible natural death. Deputy Velasquez contacted this office as the decedent was not known to have medical issues.

Bew ✓

District 5 Medical Examiner -- Non Medical Examiner Case

Deputy Velasquez provided the following information: the decedent was last known to be alive approximately one month ago. The decedent's wife, Christine Krona (732-330-8752), resides out-of-state and had not seen the decedent in approximately one year. She has not communicated with the decedent in approximately one month. On 07/10/15, the decedent's wife requested that a well-being check be conducted at the residence. Deputy Velasquez responded to the residence and observed that the decedent's vehicle was present, and that there was no evidence of forced entry. He found the decedent obviously deceased inside the residence, and pronounced his death at 1155 hours.

Deputy Velasquez advised that there are no suspicious circumstances, and that foul play is not suspected. He advised that no obvious trauma was observed; however, alcohol bottles were observed throughout the residence. According to the decedent's wife, the decedent was known to be an alcoholic, and received treatment at the VA hospital from Dr. Patel for alcohol related issues. According to the decedent's wife, he does not have any known medical conditions. Deputy Velasquez advised that the residence was in disarray and he was unable to locate prescription medications inside the residence. He recovered a document stating that the decedent received treatment from Dr. Geepha at the VA Hospital. Deputy Velasquez spoke with Dr. Geepha's supervisor, "Laura", who advised that Dr. Geepha will certify the decedent's death.

I informed Deputy Velasquez that the circumstances of this case do not fall under the Medical Examiner's Office jurisdiction, and that the decedent could be released to a funeral home of choice. He advised that a funeral home had not yet been selected.

-Investigator Keara Dotson

District 5 Medical Examiner -- Non Medical Examiner Case

Year 2015
CaseNumber 00141
County Citrus
Date & Time Reported 02/08/2015 719
Reporting Agency Citrus Memorial Hospital
Reported By Jennifer Lasse
Phone 352-726-1551

Decedent Information

Lastname Uzar
Firstname Joseph
Middlename Anthony
Date Of Birth [REDACTED]
Date & Time Of Death 02/08/2015 605
Age: 27
Race White
Gender M
Body was Found
Place of Death ER/Outpatient

Investigator: Pope, Melissa
Next of Kin Name Amber Uzar
Next of Kin Phone 352-201-7768;352-201-6595
Doctor Signing DC Steven Powers/ Brian Slaby
Doctor's Phone (352)732-0339/726-4499
Funeral Home
Return to District Declined: False



Narrative

Uzar, Joseph Anthony

On 2/8/15 at 0719 hours this office was contacted by Jennifer Lasse, Charge Nurse at Citrus Memorial Hospital, and notified of the death of Joseph Anthony Uzar, a 27 year old white male who came to the ER in cardiac arrest and died. His death was pronounced by Dr. Kapanics at 0605 hours. Nurse C.J. Hall

District 5 Medical Examiner -- Non Medical Examiner Case

provided the following information. The decedent has a history of obesity and sleep apnea. He consumed alcohol before going to bed. He fell out of the bed and the family found him unresponsive. EMS transferred him to CMH's ER. There were no observable injuries.

I then spoke with the decedent's sister Nikki Uzar, who relayed questions to the decedent's wife, Amber Uzar and provided the following information. The decedent has a medical history of sleep apnea, alcoholism, and high blood pressure (for which he takes medication). He drinks to the point of being intoxicated on a daily basis. His sleep apnea is diagnosed but he does not use a breathing machine. For the past few weeks, he has complained of numbness in his lip and pain in his right arm/shoulder and leg. The decedent went to bed at approximately 0230 hours and was sleeping on his back. At approximately 0500 hours the wife heard him roll out of bed and found him face down on a hard wood floor. He has no history of abusing illicit or prescription drugs. He made suicidal comments as a teenager after a relationship breakup, but has never made any attempts.

The decedent's doctors are Dr. Steven Powell and Dr. Brian Slaby in Inverness.

Dr. Lavezzi reviewed the information for this case. Based on the information provided above, I declined jurisdiction in this case.

-Melissa Pope



OFFICE OF THE DISTRICT ONE MEDICAL EXAMINER
A. N. Minyard, M.D. - Chief Medical Examiner

Escambia Santa Rosa Okaloosa Walton
75151 North 9th Ave. Pensacola Florida 32504
Telephone: (850) 416-7210 Fax: (850) 416-6476 Email: reportdeath@fdme.com



Central Office Use Only

Case Number:

MLA MLO MLI

Jurisdiction Status:

Accepted

Declined

Approved Signature: *[Signature]*

Date Approved: 12-9-15

PRELIMINARY REPORT OF INVESTIGATION

DECEDENT:

Nora Baker

ADDRESS:

1480 Sky Ranch Rd. Baker FL

ME Attended Scene? Yes No

INFORMATION ABOUT DECEDENT AND DESCRIPTION OF BODY

AGE (Under 2 use Months / Days)

Age: 50

Date of Birth: [Redacted]

SSN: [Redacted]

MARITAL STATUS

- Married
- Never Married
- Widowed
- Divorced
- Separated
- Unknown

RACE

- White
- Black
- Hispanic
- Asian
- Other

SEX

- Male
- Female
- Undetermined

HEAD-HAIR

- None
- Partly Bald
- Blonde
- Brown
- Red
- Black
- Gray
- White

OTHER HAIR

- Mustache
- Beard

CLOTHING

- Clothed*
- Partially Clothed*
- Unclothed

EYES-Color:

(If Unidentified):

WEIGHT: _____ lbs.

LENGTH: _____ inches

TEETH/DENTAL

- Natural
- False
- Orthodontics
- Restorations

BODY TEMPERATURE

- Warm Cool Cold
- Area Temp: _____
- Core Temp: _____

RIGOR

- Neck: 0 1 2 3
- Arms: 0 1 2 3
- Legs: 0 1 2 3
- *0 = absent, *3 = full

LIVOR

- Color: _____
- Fixed? Yes No
- Anterior
- Posterior
- Lateral (R / L)

BLOOD

- Nose Mouth
- Ears Clothing
- None

FROTH

- Present Absent
- Color: _____

OTHER

- (Dirt, water etc.)
- Nose
- Mouth
- Ears
- None

DECOMPOSITION

- Early
- Advanced
- None

POSITION

- Prone Supine
- Sitting Hanging
- R-Side L-Side
- Slumped Kneeling

SCARS/TATTOOS

- R-Hand: _____
- L-Hand: _____
- Head: _____
- Chest: _____
- Stomach: _____
- R-Arm: _____
- L-Arm: _____
- R-Leg: _____
- L-Leg: _____
- R-Back: _____
- L-Back: _____
- Other: _____

INFORMATION ABOUT OCCURRENCE

ITEM	DATE	TIME	LOCATION	COUNTY	TYPE OF PREMISES (Home, farm, highway, hospital, etc.)
M.E. NOTIFIED	12/7/15	2120	0050 (Agency/Informant) Def. Upmore	OK	Phone #: 850-259-0352
INJURY AND/OR ILLNESS			(Address)		
PRONOUNCED	12/7/15	1944	EMS	OK	Residence
FOUND DEAD			(Address/By Whom)		
LAST KNOWN ALIVE	12/7	1800	(Name/Relationship) Parents		
ARRIVED AT SCENE			(Premises Type)		PHOTOS TAKEN? <input type="checkbox"/> Yes <input type="checkbox"/> No
CORE BODY TEMP			(Location/Site Taken)		RESIDENCE SECURE? <input type="checkbox"/> Yes <input type="checkbox"/> No

SUSPECTED MANNER OF DEATH? Natural Homicide Suicide Accident Pending Undetermined Employment Related? Yes No Unknown

MEANS OF DEATH - IF OTHER THAN NATURAL

IF MOTOR VEHICLE INVOLVED	<input type="checkbox"/> Driver (if known) <input type="checkbox"/> Passenger (if known) <input type="checkbox"/> Pedestrian <input type="checkbox"/> Other	<input type="checkbox"/> Lap Belt Used <input type="checkbox"/> Shoulder Belt Used <input type="checkbox"/> Helmet <input type="checkbox"/> Child Restraint	<input type="checkbox"/> Hit-Run <input type="checkbox"/> Multiple Fatality <input type="checkbox"/> Air Bag Deployed <input type="checkbox"/> Ejected	<input type="checkbox"/> Passenger Car <input type="checkbox"/> Truck <input type="checkbox"/> Van <input type="checkbox"/> Motorcycle	<input type="checkbox"/> Farm Equipment <input type="checkbox"/> Semi-Trailer <input type="checkbox"/> Bicycle <input type="checkbox"/> Other
IF WEAPON RELATED:	<input type="checkbox"/> Rifle - Cal. _____ <input type="checkbox"/> Handgun - Cal. _____ <input type="checkbox"/> Shotgun - Cal. _____ <input type="checkbox"/> Unknown Type	<input type="checkbox"/> Stippling <input type="checkbox"/> Smudging <input type="checkbox"/> Abrasion <input type="checkbox"/> Round	<input type="checkbox"/> Oblong <input type="checkbox"/> Stellate <input type="checkbox"/> Surg. Treated <input type="checkbox"/> Other	<input type="checkbox"/> Head <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Abdomen	<input type="checkbox"/> Buttocks <input type="checkbox"/> Thighs <input type="checkbox"/> Lower Legs <input type="checkbox"/> Feet
INSTRUMENT:	WHAT KIND: <input type="checkbox"/> Blunt / <input type="checkbox"/> Sharp	LIGATURE DESCRIPTION			
IF OVERDOSE: (Suspected)	<input type="checkbox"/> Drug <input type="checkbox"/> Alcohol <input type="checkbox"/> Chemical/Poison <input type="checkbox"/> Unknown	REMARKS:	<input type="checkbox"/> Ingested <input type="checkbox"/> Injected <input type="checkbox"/> Inhaled <input type="checkbox"/> Unknown	<input type="checkbox"/> Other:	

SCENE CONDITIONS

BIOLOGICAL/ ENVIRONMENTAL CONDITIONS Animal Activity <input type="checkbox"/> Yes <input type="checkbox"/> No Type: Insect Activity <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Fly <input type="checkbox"/> Egg <input type="checkbox"/> Larva <input type="checkbox"/> Pupal <input type="checkbox"/> Beetle: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Ant: <input type="checkbox"/> Yes <input type="checkbox"/> No	Weather Conditions: <input checked="" type="checkbox"/> Day <input type="checkbox"/> Rain <input type="checkbox"/> Night <input type="checkbox"/> Hurricane <input type="checkbox"/> Clear <input type="checkbox"/> Tornado <input type="checkbox"/> Cloudy <input type="checkbox"/> Lightning	Body Location: <input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors	Surface Type: <input type="checkbox"/> Carpet <input type="checkbox"/> Sand <input checked="" type="checkbox"/> Tile/Wood <input type="checkbox"/> Concrete <input type="checkbox"/> Grass <input type="checkbox"/> Water <input type="checkbox"/> Dirt <input type="checkbox"/> Other	Body Fluids: <input type="checkbox"/> Moist <input checked="" type="checkbox"/> Wet <input type="checkbox"/> Dry <input type="checkbox"/> Other
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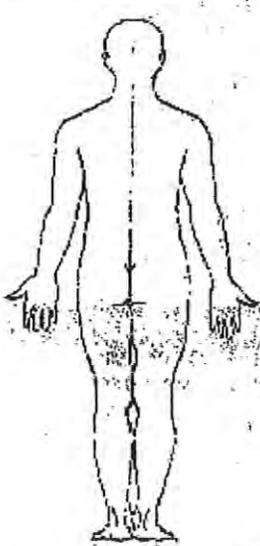
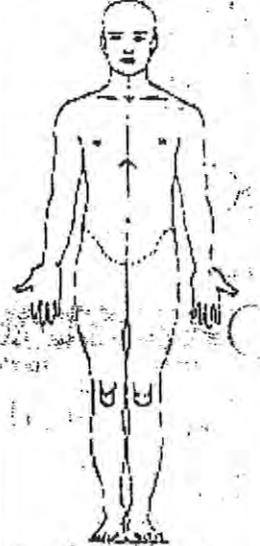
MEDICAL HISTORY

CONDITION: <input type="checkbox"/> Hypertension <input type="checkbox"/> Vascular Disease <input type="checkbox"/> Pulmonary Disease <input type="checkbox"/> Diabetes <input type="checkbox"/> Cancer <input type="checkbox"/> Fractures <input type="checkbox"/> Seizure	<input type="checkbox"/> Tobacco: _____ day/week/month <input type="checkbox"/> Alcohol: _____ day/week/month <input type="checkbox"/> Narcotic _____ day/week/month <input type="checkbox"/> Other (specify): _____	MEDICAL PROVIDER INFORMATION: NAME: _____ PHONE #: _____ NAME: _____ PHONE #: _____	MEDICATIONS: _____ _____ _____
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NEXT OF KIN - Name and Phone #: _____

IDENTIFICATION (Source) By: Visual Photo/D.L. Fingerprint Dental X-ray Unidentified Other: _____

NARRATIVE SUMMARY OF CIRCUMSTANCES SURROUNDING DEATH

	SO y/o w/f collapsed in kitchen		
	MX Anxiety / depression Chronic ETOH Chronic Nicotine Arthritis HTN		Meets Carvedilol Lisinopril Metaxcam
	WITNESSED: <input type="checkbox"/> YES <input type="checkbox"/> NO		Evidence Collected: _____
	APPARENT TRAUMA: <input type="checkbox"/> YES <input type="checkbox"/> NO		Personal Effects: _____
	ANY SUSPICIOUS SIGNS: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		Released to: <input type="checkbox"/> Next of Kin (Immediate Only) <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Left at Scene
	SUBSTANCE ABUSE: <input type="checkbox"/> YES <input type="checkbox"/> NO		Per OUSO - Family was known chronic ETOH & over medicate
	NO TRAUMA / NO Foul play		_____
	_____		_____
	_____		_____
	_____		_____

DISPOSITION OF THE BODY

Transported Not Transported
 Transported to: SHH FWB Funeral Home Other: _____

Funeral Home (Name and Telephone): _____

Physician to Sign Death Certificate: GIOMANCE Physician Name and Phone #: _____

Forensic Investigator: MAE

District 5 Medical Examiner -- Non Medical Examiner Case

Year 2015
CaseNumber 00832
County Lake
Date & Time Reported 09/14/2015 1125
Reporting Agency Sumter County Sheriff's Office
Reported By Christine Yager
Phone 352-793-2621

Decedent Information

Lastname Simington
Firstname William
Middlename James
Date Of Birth [REDACTED]
Date & Time Of Death 09/14/2015 1030
Age: 57
Race White
Gender M
Body was Found
Place of Death Residence

Investigator: Pena, Felicia
Next of Kin Name Unknown
Next of Kin Phone Unknown
Doctor Signing DC Dr. John Burress
Doctor's Phone 352-259-7994
Funeral Home
Return to District Declined: False

Narrative

On 09/14/2015 at 11:25 hours this office was contacted by Deputy Christine Yager (352-793-2621), of the Sumter County Sheriff's office to report a possible natural death. Deputy Christine Yager provided the following information: the decedent, William Simington, is a 57 year old white male, weighing approximately 300 pounds. The office of Dr. John Burress, the primary care physician, has declined jurisdiction of this case based on the fact that the decedent has not visited their office in over a year.

Beal

District 5 Medical Examiner -- Non Medical Examiner Case

When Deputy Christine was asked for the circumstances of the scene, this investigator was referred to the lead investigator, Deputy William Lamb (352-303-6247).

Deputy William Lamb provided the following information regarding the circumstances surrounding the death, as well the medical and lifestyle history of the decedent: Deputy Lamb informed this investigator that the decedent was last known alive, last night (9-13-2015) by his girlfriend at 22:30 hours prior to going to sleep. The girlfriend informed law enforcement that this morning (09/14/2015), she woke and went into the decedent's room to make sure he left for work earlier that morning. Upon entering the room, she found the decedent lying prone on the bed with his legs bent at the knee and hanging over the side of the bed. 9-1-1 was called and Rural Metro responded. Upon arriving to the scene, EMS found the decedent to be asystolic and pronounced time of death at 10:30.

Deputy Lamb informed this investigator that the decedent's medical history is significant for hypertension and angina. He also reported that the decedent was involved in a car accident around 2011-2012, which required surgery on his shoulder and jaw. Prescribed medication found at the scene consisted of metoprolol, amlodipine, morphine, and tramadol. Deputy Lamb was asked to verify if the decedent was compliant with his medications, at which point he informed this investigator that the decedent was not compliant with his medication. Deputy Lamb stated that when the amount of medication present is compared to the prescription instructions and the dates the medications were filled, it appears the decedent had stopped taking all medications. When asked about the decedent's lifestyle history, he denied the use of tobacco, illicit drugs, the abuse of prescription medication and any suicidal threats, attempts or ideations. However, Deputy Lamb verified the use of alcohol (chronic alcoholism) and stated that the decedent would consistently take his medication while drinking alcohol. When asked if law enforcement suspected foul play, Deputy Lamb stated no.

The information for this case was reviewed with Dr. Wolf, who informed this investigator that it did not fall within medical examiner jurisdiction.

This investigator spoke with Dr. Burress's office, who stated that the decedent was last seen on September 16, 2014. I was informed that the decedent had an appointment scheduled for August 13, 2015. However, the decedent contacted the medical office on August 5, 2015, stating that he was out of medication. The decedent was prescribed a 30 day refill and neglected to appear for his appointment on August 13. I informed Mr. Burress's office that this case did not fall under Medical Examiner's jurisdiction and ended the conversation.

---Investigator Pena

STATE OF FLORIDA
DIVISION OF ADMINISTRATIVE HEARINGS

FLORIDA DEPARTMENT OF LAW
ENFORCEMENT, MEDICAL EXAMINERS
COMMISSION,

Petitioner,

vs.

CASE NO. 19-2083

ANDREA N. MINYARD, M.D.,

Respondent.

STIPULATED MOTION TO RELINQUISH JURISDICTION

COMES NOW the Petitioner, Florida Department of Law Enforcement, Medical Examiners Commission, by and through the undersigned Assistant General Counsel and moves that the Administrative Law Judge enter an order of relinquishment of jurisdiction of the Division of Administrative Hearings in the above-styled cause, and as grounds therefor would show:

1. Petitioner, through the undersigned attorney, has contacted Respondent's attorney, T.A. Borowski, regarding this motion and he has stipulated to the requested action.
2. This matter will be presented by the undersigned attorney to the Medical Examiners Commission at their next quarterly meeting during the week of July 29th, 2019 in Ponte Vedra, Florida, with the recommendation of dismissal of this action.
3. Dismissal of the action will eliminate the necessity of trial by the parties.

WHEREFORE, the Petitioner moves for relinquishment of the jurisdiction of the Division of Administrative Hearing.

DATED this 14th day of May, 2019.



Christopher D. Bufano
Assistant General Counsel
Florida Department of Law Enforcement
Post Office Box 1489
Tallahassee FL, 32302
Phone No.: 850-410-7676
E-Mail:
christopherbufano@fdle.state.fl.us
Florida Bar No. 0015046

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing has been furnished via electronic mail to T.A. Borowski, Attorney for Respondent, ted@borowski-traylor.com; maryann@borowski-traylor.com this 14th day of May, 2019.



Christopher D. Bufano
Assistant General Counsel
Florida Bar No: 0015046