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 Chad Lucas

Megan Neel James D. Martin, J.D.

**District Medical Examiners present**:

Craig Mallak, M.D. (District 17) Andrea N. Minyard, M.D. (District 1 Interim)

Jon R. Thogmartin, M.D. (District 6) B. Robert Pietak, M.D. (District 4 Interim)

James W. Fulcher, M.D. (District 7) Russell S. Vega, M.D. (District 12)

**Other District personnel present:**

Jeff Martin (District 1) Tim Gallagher, M.D. (District 1)

Lindsey Bayer (District 5/24) Jeffrey J. Brokaw (District 4)

Aurelian Nicolaescu (District 4) Deanna A. Oleske, M.D. (District 23)

Karla Orozco (District 7) Tim Crutchfield (District 4)

Bill Pellan (District 6)

**Guests present:**

Karen Card, DrPH (DOH) Chris Bufano (FDLE)

Bruce Goldberger, Ph.D. (UF) Jonathan Rigsby (FDLE)

DiAnn McCormack (CorneaGen) Larry Cochran (LifeQuest)

Amy Wilson (LifeNet Health) Karin Frosio (LifeNet Health)

Chris Poindexter (LifeNet Health) Christopher Ayres (LifeNet Health)

Toni Lake (LifeNet Health) Ozell Newsome (LifeNet Health)

Cory Herbert (LEITR) Heather Hooy (LEITR)

Reva Huey (Legacy) Rebecca Sayer (LifeLink)

Lynetta Oxendine (Our Legacy) 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 Rules11G-2.001(1)(b), 11G-2.002(2), 11G-2.003(1)(e), 11G-2.003(3)(b), 11G-2.003 (5)(a), and 11G2.003(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 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. Mrs. Kassoff was the wife of Norman Kassoff, the Director of Operations at the Miami-Dade Medical Examiner’s Office under 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 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 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 appointments and reappointments 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 that they have selected Wendolyn Sneed, M.D., for the position of District Medical Examiner. Dr. Sneed will replace Dr. 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 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 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), appeared before the Commission to give an 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 on organ procurement is zero denials. There was a recent issue with a district and that office was reminded that organ procurement is not interested in injured organs. If there are damaged organs, the medical examiner offices will not receive calls from organ procurement asking for permission to procure those organs.

**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 courts being considered “fact witness” instead of “expert witness”. He invited Karin Hoppmann, 1st Assistant U.S. Attorney from the Middle District of Florida, to attend the 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. 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. 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 attend at a later date.

**ISSUE NUMBER 6: PRESCRIPTION DRUG MONITORING PROGRAM UPDATE**

Bruce 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 or 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 Mallak, M.D., 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., 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 Pellan 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.

Ms. Carol Whitmore 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.