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Disaster Victim Identification In Israel : A Multi-Disciplinary Approach

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Introduction

Although Disaster Victim Identification (DVI) is often thought of as the function of forensic medicine, an objective analysis shows that in disasters medical expertise is only one aspect of what must be a team effort involving numerous government and non-government offices. The approach is multi-disciplinary. Israel has, unfortunately, suffered numerous disasters. Some were terrorism related, but others were not. The net result has been extensive experience. This article uses experience involving the Israel DVI program as an illustration of the multi-disciplinary approach to DVI and offers a fresh perspective concerning the medical examiner's role.

For administrative reasons the focus stresses police functions and police interaction with other agencies. It is only because of those often quiet tasks that the medical examiner is able to work.

Historical Perspective

In the initial years of the State of Israel DVI was considered the off-shoot of military action, and all civilian cases were handled under military responsibility.[1] There were, fortunately, relatively few incidents, hence the bureaucratic framework was rarely tested. Change came in the 1970s from three directions that shaped the future of Israeli DVI.

First, the Institute for Forensic Medicine (the Institute)[2] was removed from the Police forensic division and transferred to the Ministry of Health. This was done to enhance professionalism at the Institute and give it an independent image in the courtroom.

Towards the end of the 1970s DVI gained international recognition as a formal discipline. Disaster studies took root, and Interpol established its DVI Standing Committee. This new approach slowly influenced Israeli thinking.

In parallel Israel was undergoing a spirit of civilianization, as the founding generation of leaders was leaving the work force. That civilianization eventually caused the transfer of many functions into civilian hands.

By the mid-1980s these three factors joined together, and DVI in civilian incidents moved from the military to an awkward marriage between the Israel Police and the Institute. It took several years for the two government offices to decide upon common work procedures, a consensus that came about more as the result of experience than formal discussion.

Victim identification always involves various low-profile police functions, even when the Institute takes a leading role. In routine work such as suspicious death and traffic accidents, the Israel Police/Operations Division is responsible for the transfer of bodies to the Institute, where body identifications are made. Most often a contractor works as an agent for Police/Operations and handles the physical transfer of bodies. The Israel Police/Division of Identification & Forensic Science (DIFS) or the Traffic Police is in charge of scene preservation (photography) and evidence collection as necessary.

In a disaster significant new dimensions are added. Routine procedures become insufficient to handle the size, direct consequences, and / or severity of the incident. Hence, the most common term applied to these incidents is “disaster.” A new working framework is needed stressing working within defined professional tasks and leaving as much as possible for others to do.

Definitions

Victim Identification, whether in peacetime or in times of national emergency, is part of an overall criminal investigation. In the case of terrorism it is part of the process of bringing the perpetrator and his support mechanism to justice. (Even in the case of a suicide bombing in which the bomber does not survive, there is virtually always a support group with criminal responsibility.)[3] In wartime DVI in the civilian sector can be part of a war crimes complaint. For these reasons DVI must be treated with the same legal exactness rendered to any other case of criminally caused death. This means amongst other considerations regard for complete and exact paperwork and chain of evidence in the identification, even under the pressures of a disaster.

The process of DVI is well known to medical examiners as well as all others involved in disaster management. In simplistic terms this means the positive correlation of *ante mortem* and *post mortem* data of sufficient importance to constitute identification. In Israel “sufficient importance” means acceptance in courts. This, of course, introduces new elements into the inter-disciplinary equation.

In accordance with Interpol procedures, “the specific religious and cultural needs and national idiosyncrasies or laws and directives”[4] are taken into consideration during a DVI operation. To this end discussions have been held with the clergy of numerous religions to clarify their concerns. This is another example of the Israeli multi-disciplinary approach to DVI.

Methodology

Identification can be done by personal recognition, by unique identifying marks, by technical findings, or a combination thereof. In disasters that exceed the routine capabilities of the Institute there has been pressure to reduce the number of bodies sent for pathological examination by using facial recognition by a relative, workmate, or friend as a sole basis. The approach, however, has been rejected, remembering that DVI is part of a criminal investigation, and taking into account error in identification or lack of confidence in decisions. Even when a body is readily identified, it has been decided that the deceased should be examined by a forensic medical expert to gain a better understanding of the incident.

Personal recognition constitutes a basic issue. There are (to cite just one problem) limitations on personal recognition based on changes in the body after death. This is reflected in Jewish Law restricting the parts of the face that can be recognized, and the nature of death / time after death when the identification is made. In one case involving 76 victims of a building collapse on 11 November 1982, the facial recognition of three cadavers was soon voided by fingerprints. Thus, although personal recognition is allowed to enable family closure, the responsibility for technical identification remains.

It was concluded early in the DVI experience that technical findings must be certified by a qualified *forensic* expert capable of evaluating importance based on experience in similar identification cases. This generally means a medical examiner at the Institute.

Information

In routine cases the collection of *ante mortem* information is usually straight-forward. Institute staff requests items such as dental records, body fluid samples for DNA testing in the Institute laboratory, and medical x-rays from the family of the deceased, and only in few cases is police assistance required. Key problems in AM information collection are age of the material and verification of authenticity. The Institute has the experience and know-how to determine what is suitable.

Post Mortem information, as well, is essentially the responsibility of the Institute, since it is the forensic medical staff that is responsible for the recording of marks (scars, tattoos, etc.) or technical findings such as fingerprints, dental data, medical details, etc. A primary police function is AM/PM fingerprint comparison.

The rules of collecting data are simple. *Ante mortem* information without corresponding *post mortem* information will not lead to an identification, though its collection can be significant for criminal investigations.

In summary, in routine cases the collection of PM data is relatively straight forward, and data collection is the responsibility of medical examiners at the Institute (with the possible exception of difficult fingerprinting of the deceased). Mass disasters, however, present new challenges, if for no other reason than the scope of the incident and the deluge of information.

“Players” and Authority

A “player” is an office that exercises a role in victim identification. There are primary, corollary, and secondary players. In routine identification cases there are few “players.” The primary

example is the Institute. Sometimes there is site photography. The key word is “sometimes.” In mass disasters, however, the situation is much more complex.

In DVI cases the Israel Police and the Institute for Forensic Medicine are primary players. They have a direct influence on identifications. The Israel Police has several player roles, such as site preservation, body description, investigations, etc.

Corollary players include fire and ambulance services which exercise key roles and influence at a disaster site, but they are not directly involved in identifications. Their activities can, however, justifiably delay or interfere with body documentation, transfer, and removal.

Secondary players have a contributing role, but they do not directly participate in identifications. This would include a courier service transporting *ante mortem* records, or an airline providing seating plans or ticket payment details (to arrive at the address of a person who paid by credit card).

Many other “players” must be taken into consideration during a disaster response. They all influence the body identification process to a degree, but they do not perform an identification. Some leading offices are:

Chief Rabbinate

This office assigns an official representative to the Institute in times of disaster to coordinate religious concerns.

Government Press Office

This government body represents the interests of the Office of the Prime Minister in times of mass disaster. The GPO issues press cards to visiting journalists, however those cards are for general coverage and are not at all restricted to identification issues, nor do they exclude identification issues.

Israel Defense Forces (IDF)

Although the IDF is no longer responsible for DVI, it still is an important “player.” The IDF is a resource for equipment to be used at the disaster site and not readily available to the Israel Police. Examples are night lighting and communications assistance such as point-to-point landline telephones. The IDF also makes its relevant personnel records available for identification of deceased victims. The IDF is responsible for the identification of uniformed soldiers, even when killed in a civilian incident (such as a bus bomb).

IDF - Home Front Command

In times of national emergency the Home Front Command is tasked with Search & Rescue, the retrieval of bodies, completing descriptive forms, and transport of bodies.

Institute for Forensic Medicine (Institute)

In addition to regular workers, the Institute has the option of enlisting volunteer medical staff to help in its operations. That staff operates under Institute rules and procedures.

Israel Police

The Israel Police holds operational responsibility for disaster sites, unless such responsibility is formally transferred to the Home Front Command due to the scope of the incident. Sub-players in

the Israel Police are Operations (site command and security, body transfer from the site [through contracts or agents]), traffic, Interpol NCB, DIFS, Civilian Guard (volunteers), Medicine (physical and mental health of policemen), and Investigations.

DIFS tasks are site documentation, body numbering and identification, PM fingerprinting of deceased victims, retrieval of AM fingerprints from official records and personal property, permanent technical liaison in the Institute for Forensic Medicine, liaison with Investigations, backup for DNA processing (as needed).

Police Investigations works in liaison with DIFS at the disaster site. It builds lists of missing persons, family liaison and collection from them of AM information, participation in the AM / PM information comparison process. Part of the investigations process in a disaster is providing representatives to screen telephone calls for substantive information about missing persons.

Traffic is an essential corollary player, enabling access to the disaster area by authorized vehicles and distancing regular vehicular traffic. There is also an aspect of post-disaster onlooker convergence.

The Israel Police Medical Services is responsible for the work-related medical and psychological health of all policemen and of all volunteers specifically asked to assist the police.

The Spokesman's Office is in charge of all police and specifically DIFS/DVI relations with the media. In a DVI incident the district spokesman works according to police rules in coordination with that spokesman's office in National Headquarters.

The Bomb Squad renders and declares an area safe in an incident that involves or is suspected to involve explosives. This includes the primary disaster site and all of those areas of congregation that might be the scene of secondary explosions.

Magen David Adom

Magen David Adom (MDA) plays several related functions. It is the Israeli national emergency medical, disaster, ambulance and blood bank service. It is officially recognized by the International Committee of the Red Cross (ICRC) as the national aid society of the State of Israel under the Geneva Conventions. It is also a member of the International Federation of Red Cross and Red Crescent Societies. MDA is assisted by Hatsolah, a religious evacuation service. MDA is not allowed to transport deceased persons. Their direct role in identification is related to persons who die *en route* to hospital or pass away in hospital. In these cases MDA provides any information they might have concerning the person whom they transported.

Ministry of Foreign Affairs

The Ministry acts as the coordination point for all operational assistance involving foreign countries.

Ministry of Interior – Pesach

Pesach, an office in the Ministry of Interior, is activated only in times of formally declared national emergency. Its main functions are assistance in evacuation and identification of wartime civilian dead. It has made its evacuation and housing equipment available in times of need, but the identification segment of its program has never been tested in real time.

Municipal Governments

There are numerous levels of municipal government in Israel. Some municipalities and regional governments have taken an active role in disaster response and have had experience involving deaths. The basic role of local government concerning identification is surviving family psychological support. Local government has also been of assistance in building missing persons lists and in soliciting ante mortem data from families.

Zaka

This is a non-government volunteer organization operating under the auspices of the Police Civil Guard and divided regionally according to police district. Zaka has a role in assisting the police staff in the identification process under police instruction or that of the Institute for Forensic Medicine. When working in this capacity Zaka is bound by police or Institute discipline and is covered by their insurance.

Summary

In summary, these are some of the more prominent “players” in disaster response. One of the major differences between routine victim identification and disaster victim identification is that DVI requires a multi-disciplinary team effort that takes over many of the non-medical functions of the medical examiner (in Israel the “Institute”).

DIFS/DVI Structure

The DVI unit is located in the Field Assistance Section of DIFS. It has a permanent full-time headquarters staff, which is augmented in times of disaster. The basic philosophy is that additional staff be assigned emergency functions as close as possible to their routine job functions. Hence, the unit uses evidence technicians for photography and fingerprinting, dentists (volunteers and conscripted persons) for odontology work, physicians, DIFS retirees, computer programming experts, etc. All supplementary personnel are trained before incidents, so they know where they fit bureaucratically and are up-to-date with work rules. Their service is covered by law with appropriate on-the-job insurance.

The unit is responsible for keeping work protocols current and in compliance with the general Investigations Department protocols. All protocols must adhere to police medical and safety regulations.

Pre-Incident

Planning

Planning is based on risk assessment. A survey of possible risks and estimates of fatalities and probabilities must be undertaken in conjunction with the widest range of sources. Response to fatality identification must be planned on that basis, with the full realization that estimates are not firm. The DIFS officer in charge of DVI is responsible for coordinating this planning.

Consideration is given to type of risk (natural, military, terrorist, industrial, traffic, etc.) and scope, with response taking into consideration available manpower and equipment.

For planning purposes mass-fatality incidents are divided into four categories: (1) up to about 25 fatalities (the prevalent experience to date of the Institute), (2) 25 to 100 fatalities, (3) 100 to 1000

fatalities, and (4) more than 1000 fatalities. These are planning categories and are to be considered guidelines and not absolute numbers. The categories must be adjusted for various factors such as wartime or peacetime, speed of body collection, cause of death (e.g., industrial or WMD chemical exposure), etc.

Part of planning in major incidents is to consider the integration of equipment and/or personnel assistance from abroad into the identification program and plan for modular and totally joint operations depending upon circumstances. The Far Eastern Tsunami[5] and an earthquake in Yalova, Turkey have served as important models for the integration of foreign DVI experts.

In the planning process the Institute has been given free hand in looking for expanded space (in one helicopter crash a large urban funeral parlor was used as a mortuary, but it was found that some medical equipment is too cumbersome to move) and additional medical personnel.

Exercises

The accepted timetable for exercises is a three year cycle. In the first year written procedures are revised based upon previous experience. In the second year one or more tabletop exercises are run to familiarize personnel with procedure and iron out questions of inter-office coordination. Full field exercises are designed as a culmination of the process to test specific details of planning.

The cycle can be hastened if there is rapid and significant personnel turnover, or if real incidents interrupt the cycle. In the latter case the cycle reverts immediately to the stage of revising protocols based upon lessons learnt.

An exception to this timetable is field exercises dictated by outside institutions, such as airport exercises which must be held annually. DVI participation at the field level should be according to need assessment but not less frequently than once every three years.

Exercises test both internal DIFS/DVI procedures and equipment, and interface and coordination with other players.

One problem that is still to be addressed is an approach to Interpol to develop a foreign assistance protocol and exercise its activation and implementation. Such exercises should be both in person and tabletop, and also by telecommunications. Current philosophy is that teams will be dispatched abroad as needed, but composition of teams and cooperation between teams is more a national prerogative than a coordinated program.

Equipment

There are several types of equipment needed in the DVI process. The Head, DVI Mobile Crime Laboratories, is responsible for designating what equipment is necessary for site recording. He coordinates with DIFS/Supply for rapid acquisition of equipment as supplies run low during disaster response. He is also responsible for training of his personnel for disaster response as differentiated from crime scene response, with the understanding that many disasters are also crime scenes.

An officer on the permanent staff is responsible for the distribution and maintenance of equipment for DVI purposes, as well as training field technicians in its use. Equipment is meant to include forms. It is also meant to be stored in a readily portable fashion, with the understanding that police cars often cannot pull up and park exactly adjacent to the site. Resupply is done in coordination with DIFS/Supply.

The forms used by DIFS/DVI in body identification are based on those designed by Interpol. The shortened forms used for fill-in in the field, retain the Interpol numbering and color schemes. When interviewing families for the collection of ante mortem information, the longer (complete) form is used. This allows more complete information collection and allows family members to feel that they are making a solid contribution to the identification. All information collected on forms is transmitted to the Institute for use by the forensic medical staff.

Professional Literature and Networking

An important facet of DVI planning is a review of pertinent professional literature to learn of the experiences and methods of identification experiences in foreign countries, so that application can be made to Israeli planning. This includes attendance at international conferences and the hosting of guests in Israel. In two cases fingerprint experts from abroad demonstrated techniques to take post mortem prints from burnt or decaying cadavers. This training was done with the cooperation of the Institute.

Incidents

Types of Incidents

There are several types of incidents which require specialty responders even at initial stages: chemical, building collapse, explosives, live electricity, etc. In these cases there is no activity connected with deceased persons until the area has been rendered safe by the delegated authority responsible for the specific type of incident.

DIFS/DVI is not involved in life-saving activity, hence its work is not covered by protocols detailing work before the area is rendered safe.

The Institute is not affected by these hazards, since its staff generally does not visit disaster sites. In the case of autopsies of persons who have inhaled or who have been exposed to hazardous materials, the Institute has its own internal work precautions and safety measures.

Site control DVI Arrival

DIFS/DVI personnel and all auxiliary personnel including DVI volunteers travel to disaster scenes without violating traffic laws or sounding sirens. At the scene they have been instructed to park vehicles at a distance in areas designated by police traffic control.

DVI Entry

Entry to the disaster site is controlled by the senior police person present. DIFS/DVI entry is subject to his decisions. DVI/DVI is an activity that will be undertaken only after medical evacuation has been completed. The only exception is scene photography which has its criminal investigation implications. This is authorized by Head, DIFS.

Medical & Other Responders

In many incidents the “first responders” are the non-injured or lesser-injured people involved in the incident.[6] These responders are incorporated into planning rather than excluded from response.[7] An important step is debriefing these people after their role is completed.

It is the job of the first uniformed or medical person on scene to assess the situation and report to an appropriate government agency such as police, who will then make further notifications.[8] Uniformed first responders include: police, fire, ambulance, Homefront Command (wartime).

Investigators and/or DIFS/DVI personnel question all private "first responders" active before the arrival of uniformed responders, so that all relevant DVI information can be obtained.

Triage

Medical responders classify the injured according to severity and evacuation priority. Deceased persons are separated from the injured and moved to a separate area for dispatch. Equipment supply kits include color and pictorial tags to avoid confusion.

No person is considered deceased until there is a formal certification of such by an authorized person, no matter how obvious death might be.

Medical Evacuation

Since Magen David Adom is a national service, the injured are dispatched to hospital depending on medical condition and bed availability. There is no "patient kidnapping" to hospitals based on payment to drivers. The net result is that it is easier to put together patient lists (in DVI terms, the first steps in missing person lists).

Hospitals

Investigations stations policemen in hospitals to which casualties are evacuated. They will record names of injured who remain out-patients and who are admitted. These lists are kept according to place of incident from which the injured are evacuated.[9] The lists are coordinated with the missing person effort, so that these people are excluded from possible DVI lists.

Those who die *en route* to hospital or in hospital after a disaster are transferred to the morgue then evacuated to the Institute, even if there is no problem of identification. This transfer is according to general hospital procedures.

Fatalities at the Scene

Incident Folder

Police Investigations develops an incident file of which DVI folders eventually become part. The incident file describes the event, its causes, perpetrators (if human), geographic details, missing persons, etc. Part of the incident file is a report of the detailed area search for casualties and for missing persons.

Work Procedures

A physician authorized by the Ministry of Health certifies death in all cases, even when such certification seems "obvious." Then the DIFS field unit affixes numbers printed in advance to all bodies and fills out a form (based on Interpol) with basic location and description. This form is the first paperwork in the deceased's identification file. This activity is done before bodies are moved, except when possible life-saving treatment is deemed necessary.

Police/Investigations interview witnesses to the incident and survivors. It is a cardinal rule that survivors help survivors, hence their testimony can be critical.[10] Part of the testimony is later used for the purpose of victim identification.

Personal property in the pockets or in the hands of deceased persons is not removed. Although it can be an important indication of identification, it is not considered definitive evidence. There have been numerous cases in which papers associated with a body did not belong to the holder. (In two cases abroad victims were traveling on bogus documentation.

Police/Operations collect all anonymous property not readily apparent to be connected with a specific body. Said property is not be laundered[11] or washed and is available for examination by Institute for Forensic Medicine and Israel Police staff for identification purposes.

Body Removal – Peacetime

In a peacetime disaster with fatalities not exceeding the reception and storage abilities of the Institute, bodies are transferred directly by a contractor under the authority of Police/Operations. In the case of a larger peacetime number of fatalities, the Institute advises where the bodies should be brought.[12] All body parts that cannot be associated are logged in at the scene and photographed, then placed in a body bag or sleeve supplied for the purpose. Each part is kept in a separate bag and forwarded to the Institute with paperwork showing location. This simplifies subsequent DVI.

Body Removal – National Emergency

In an officially declared national emergency, a body collection point in each police district is selected in advance by the local municipal authority and the Ministry of Interior/Pesach in consultation with DIFS/DVI. Its logistical support operation is the responsibility of the Ministry of Interior/Pesach and the municipality, which will also supply assisting manpower. Pesach is responsible for supplying refrigeration for bodies as needed and as conditions permit. Site selection preference is given to areas, such as a stadium with entry gates that can be easily secured. The basic idea is to prepare for DVI before an event and not afterwards. DIFS brings all professional materials, Interpol forms, MSO for fingerprint collection, DNA sampling, photo, portable X-ray devices, etc.

Paperwork and forms to be used by soldiers at the incident site is coordinated with the Home Front Command, which is responsible for body documentation, cadaver collection, and transfer to the body collection point.

At the body collection point deceased persons is logged in by Pesach according to the place of the incident. The basic idea is that when the DVI superstructure is totally overwhelmed, a new mechanism must be set in place.

Bodies are kept separately according to incident, and a DVI file is opened for each deceased person. This procedure started with an airport exercise in which “victims” were evacuated at the same time as transfer from victims of a supposed traffic accident. DVI was complicated by unintentional mixing of the bodies (dolls).

DIFS/DVI and assisting medical volunteers (those over the age of military service and employed with the assistance of the Ministry of Labor) are responsible for the recording of *post mortem* information at the regional collection point, with the exception that property that is the responsibility of Police Operations.).

As much is feasible, collection points are set up according to a series of “stations” at each of which one particular function will be performed. Stations are: reception, photography, fingerprints,

medical, DNA (to be done by using a collection kit), dental, property (responsibility of Police/ Operations), quality control.[13]

Bodies are accompanied by a form indicating to which station they should be sent. After the body passes through the station, appropriate notation will be made. For example, cadavers without hands are not routed to fingerprints.

All body parts that cannot be associated with the logged in at the scene and photographed. Each part will be kept in a separate bag and kept according to the protocol for unidentified bodies. Body parts go under the same identification process with stress on DNA, however with fewer "stations." Body reconciliation is done at a later stage.

Fatalities in Hospital

En route

Persons declared deceased *en route* to hospital are delivered to the hospital mortuary.

Short term

Persons deceased in hospital within a day or two of the incident are transported to the Institute or to the body collection point (national emergency) for identification. Copies of appropriate hospital records accompany the body for use in identification efforts.

Long term

Persons deceased in hospital a period of time after the incident are transported to the Institute or the body collection point (national emergency) for identification. If the body collection point has been closed, the bodies are sent to the Institute. Copies of appropriate hospital records accompany the body for use in identification efforts.

Ante Mortem Data Collection

Government Sources

It is the responsibility of Police Investigations to request AM information from police criminal records and from non-police governmental sources such as the IDF and the Prison Service. DIFS supplies all information in its possession, such as fingerprints and DNA samples. This is done as a standard operating procedure (SOP) without Institute request. (There have been cases of DVI resolved from fingerprints in criminal arrest files. One policeman was identified based on fingerprints kept for "exclusion" purpose.)

Medical Sources

Police Investigations is responsible for collecting AM data from doctors, dentists, etc. according to standard procedures insuring the subject's privacy in both the case in which the subject is determined to be a deceased victim and when investigation later shows that he is not amongst the dead.

Family Sources

In a mass fatality situation police investigations establishes a family center for the reception of next-of-kin who have come to inquire about deceased persons and provide AM information. Such information collection is done on Interpol-type forms. DIFS assists with the collection of DNA

samples[14] and the collection of latent fingerprints left by the person missing and presumed deceased.

There have been cases in which families have not wanted to provide DNA samples, presumably to hide sensitive family relationships (or non-relationships.

Collection Privacy Concerns

All DVI information collected is considered sensitive and is not released to the public. If the missing person is not amongst the dead, the information collected is kept and/or destroyed according to standard police protocols.

(Retention of at least some information can be useful to keep tract of habitual reporters.)

Release of the names of identified victims will not be done by DIFS. This is covered by Police Spokesman and Institute protocols.

Types of Incidents

A single incident is defined as one which occurs in a specific area, at a specific time (though that time may be long term as in a chemical leak), and as a result of one cause or multiple related causes (for example, fire and subsequent explosion). All single incidents are dealt with separately to the extent possible, even if they occur in close geographic or time proximity.

Example. In one terrorist attack on 30 July 1997 in the Machane Yehudah market, two bombs were detonated one after the other, one street apart. This is an example of two single incidents.

In all single incidents primary police responsibility falls upon the highest sub-district police officer present until other arrangement is made. Policemen working at the site are from the sub-district unless re-enforcements are needed from elsewhere. Headquarters personnel serve in observer and advisory status, unless otherwise decided.

Aviation

In aviation accidents on field the Israel Airports Authority has general authority. It is quite plausible that an aviation accident will encompass a wide geographic area.[15]

Industrial Accidents

Police/Operations is responsible for the site, its closure, and its operational security in all types of incidents. The fire department is always responsible to prevent conflagration in case of flammables present.

Structural engineers are responsible to ascertain that there is no danger of building collapse. Industrial chemists are responsible to determine that there is no chemical leakage. These are additional “players” in the multi-disciplinary approach.

DVI teams do not enter a sight until it is rendered safe, since DVI is by definition not a life saving activity.

Assistance from Abroad

Personnel

One must make objective assessments. This is a weak point in DVI planning. Formal agreements have yet to be reached with countries on the Interpol DVI Standing Committee to provide DVI

manpower assistance to supplement DIFS capabilities, although there are informal understandings. The agreements must include call-up procedures. That assistance also has to be coordinated with the Institute.

In parallel DIFS has DVI teams available to Interpol as might be needed. The issue of mutual assistance will be raised at Interpol meetings in the context of drawing up a general protocol and conducting tabletop exercises.

Medical Oversight

The Israel Police Chief Physician is required to certify that all working conditions, particularly in close proximity to bodies, body fluids or body parts meet recognized safe medical standards.

It is the responsibility of the Chief Physician to determine when work on bodies must be halted at any stage for medical reasons, even if such requires immediate burial without identification.

The Medical Office provides psychologists to look after the psychological welfare of DIFS staff dealing in any aspect of DVI. This includes but not be limited to PTSD, and includes all stages of the work process.

Conclusions

In routine work victim identification the medical examiner has almost an exclusive role in victim identification. As the Israeli experience shows, in times of disaster the scope of activity in victim identification widens, other offices are involved, and the process of identification becomes an inter-disciplinary team effort.

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Notes

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2. Often called “Abu Kabir,” based on the name of the neighborhood where it is located.
3. Only in a “No-Tech” incident does the perpetrator act alone. See Almog, Joseph; Levinson, Jay, “Looking Backwards Part VI: No-Tech Terror,” in Crisis Response, Volume 45 (2008)
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6. Granot, Hayim, The True Golden Hour: How People Respond in Emergencies. Toronto: Key Publishing House (2009)
7. Scanlon, Joseph, Private communication, 9 February 2013.

8. Example is first responder at the 4 January 1987 crash of Amtrak Train 94 (the Colonial) at Chase, Maryland. In post-crash descriptions she vividly described her decision to survey and report rather than apply medical treatment.
9. A training exercise showed the fallacy of the previous method in which patients were listed only according to type of injury. This is particularly important in the case of two incidents close in time.
10. Scanlon, Joseph; Helsloot, Ira. “Putting it all Together: Integrating Ordinary People into Emergency Response.” Unpublished paper based upon lecture given at Amsterdam (NL) Fire Department, 2 December 2010.
11. According to Jewish law, those victims with spilt blood are buried in a closed coffin in the clothing they wore at the time of death, hence laundry is not necessary. See Tukatsinski, Yehi’el Mikhal ben Aharon, Gesher ha-hayim (in Hebrew), Jerusalem: N.A. Tukatsinski (1960 – second revised edition), p. 106.
12. An example is the 4 February 1997 collision of two helicopters near She'ar Yashuv in northern Israel. Seventy-three persons were killed. DVI operations were shifted to a large funeral facility in Northern Tel Aviv.
13. Interpol Guide, *loc. cit.*
14. For DNA in Jewish Law, see ed. Rozen, Yisrael. Techumin (in Hebrew). Alon Shevut, Israel: Zomet, Vol. 23 (5763-2003).
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