

J. Keith Pinckard MD PhD

President National Association of Medical Examiners

National Association of Medical Examiners (NAME):

Certification, Accreditation, and Standards



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President National Association of Medical Examiners

Chair, NAME Standards Committee

Vice Chair, Scientific Area Committee for Medicine (OSAC)

Board Member, Academy Standards Board (ASB)

NAME Background / History

 The National Association of Medical Examiners (NAME) is the national professional organization of physician medical examiners, medicolegal death investigators and death investigation system administrators who perform the official duties of the medicolegal investigation of deaths of public interest in the United States. NAME was founded in 1966 with the dual purposes of fostering the professional growth of physician death investigators and disseminating the professional and technical information vital to the continuing improvement of the medical investigation of violent, suspicious and unusual deaths. Growing from a small nucleus of concerned physicians, NAME has expanded its scope to include physician medical examiners and coroners, medical death investigators and medicolegal system administrators from throughout the United States and other countries.

Certification

- Certification generally applies to individuals
 - Procedure by which a third party gives written assurance that a person, product, process, or service conforms to specific requirements (ISO/IEC Guide 2:2016)

- NAME does not certify individuals
 - Forensic pathologists are licensed physicians
 - American Board of Pathology (ABP)
 - American Board of Medicolegal Death Investigators (ABMDI)

Accreditation

- NAME's accreditation program started in 1975
- Applies to offices and systems, not individual practitioners
- Accreditation standards emphasize policies and procedures, not work product

Accreditation

- Accreditation is an endorsement that the system provides an adequate environment in which to practice
- Provides reasonable assurance that the system well serves its jurisdiction
- A peer review system based on objective observation and constructive criticism
 - Checklist > 350 items; updated as needed

Accreditation

- 90 Offices fully accredited
- Population served by NAME accredited offices is ~180M
- Approximately half of the US population is served by a NAME accredited Medical Examiner's office



VS

Professional Practice Standards

- Consensus-based process using outside stakeholders and public comment
- Take years to develop and approve
 - Not easily changed
 - Must be rewritten every few years

- Are NOT appropriate for the practice of medicine
 - By definition, documentary standards are generated by a diverse consensus body, many of whom are NOT physicians
 - Not appropriate for nonphysicians to dictate the practice of medicine

- Standards about the nonmedical practice aspects of medicolegal death investigation
- Organization of Scientific Area
 Committees for Forensic Science (OSAC)
 - A "think tank"; proposes draft standards
- Academy Standards Board (ASB)

- A standards development organization (SDO)

ASB 125: Organizational and Foundational Standard for Medicolegal Death Investigation

- Resources
- Roles
- Education/Training
- Certification
- Accreditation
- Does NOT cover the practice of medicine
 Ex: autopsy performance, death certification

Professional Practice Standards

- Generated within a particular profession
- These are appropriate for, and very common in, the practice of medicine
- Not consensus-based (outside of field)
- Not put out for public comment

NAME Forensic Autopsy Performance Standards

- Professional practice standards
- Describe the minimum performance level for forensic autopsies
- Originated in 2005
- 8 sections, with 31 standards

NAME Forensic Autopsy Performance Standards

- Generated by forensic pathologists
- NAME Standards Committee
- Edits/additions discussed and voted by membership, potentially each year
- Must be reapproved collectively every 5 years

NAME Forensic Autopsy Performance Standards

- A2.6 The forensic pathologist or representative shall investigate deaths of persons in custody.
- B3.4 The forensic pathologist shall perform a forensic autopsy when the death is apparently non-natural and in custody of a local, state, or federal institution.

- Called for by the President
- Topics and authors approved by the Executive Committee
- Administrative or Scientific
- Rigorous process of draft, approval in concept, public comment (months)
- Final approval by the Board of Directors

 Recommendations for the Definition, Investigation, Postmortem Examination, and Reporting of Deaths in Custody

- Acad Forensic Pathol. 2017 7(4): 604-618; renewed

 "An autopsy must be performed on all deaths in custody where the death may be deemed unnatural, regardless of phase and time since injury."

 Recommendations for the Definition, Investigation, Postmortem Examination, and Reporting of Deaths in Custody

– Acad Forensic Pathol. 2017 7(4): 604-618; renewed

 "Comprehensive toxicology, including common illicit and therapeutic drugs, should be performed on all cases unless a period of hospitalization precludes the usefulness of the testing."

- Medical Examiner, Coroner, and Forensic
 Pathologist Independence
 - Acad Forensic Pathol. 2013 3(1): 93-98; renewed
 - Similar to points made in "Strengthening Forensic Science in the United States: A Path Forward" (2009) by the National Research Council

Medical Examiner Independence

- Legislative encroachment
- Several bills aimed at dictating the practice of medicine
 - Specifically, dictating how the death in a particular type of case must be certified
 - e.g. fentanyl deaths (cause of death wording and manner of death)

Medical Examiner Independence

- Has been a challenge
 - NAME committed to this principle
- NAME has a seat on the House of Delegates of the American Medical Association
- Proposed AMA Resolution 708

Medical Examiner Independence

AMA Resolution 708 (passed June 10, 2024)

"...RESOLVED, that our American Medical Association supports the independent authority of physicians to provide accurate and transparent postmortem assessments and death investigation reporting in a manner free from undue influence (New HOD Policy); and be it further

RESOLVED, that our AMA advocate with state and federal governments to ensure laws and regulations do not compromise a physician's ability to use their medical judgement in the reporting of postmortem assessments and medicolegal death investigations. (Directive to Take Action)"



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Questions?