



Spokane County

WASHINGTON

OFFICE OF THE
MEDICAL EXAMINER

CHIEF MEDICAL EXAMINER
VEENA D. SINGH, MD
FORENSIC PATHOLOGIST

DEPUTY MEDICAL EXAMINER

Sean Ricciardo, MD
FORENSIC PATHOLOGIST

DEPUTY MEDICAL EXAMINER

MAKINZIE MOTT, MD
FORENSIC PATHOLOGIST

REQUESTS FOR SPECIMENS FOR DNA ANALYSIS INSTRUCTIONS

The Spokane County Medical Examiner's Office frequently receives requests for blood or tissue samples for the purpose of DNA analysis. These requests are often generated by questions of paternity determination.

The primary mission of the Spokane County Medical Examiner is autopsy examination of sudden and unexpected death. During autopsy examination the Spokane County Medical Examiner obtains blood and tissue samples, when possible, on all cases. The majority of these samples are used for death investigation. Reserved samples are destroyed after three years. The reserved blood and/or tissue samples may be available for further testing by interested parties upon written request if requested within the appropriate time frame. The availability of these samples is prioritized for criminal and civil inquiries with due respect given to the rights of the decedent and their next-of-kin.

When all priority needs have been met, remaining samples may be made available for paternity testing under the following conditions:

1. A formal request must be made in writing by the next-of-kin, attorney representing the next-of-kin, legal subpoena, or court order as needed. For those unsure of the wording for a formal request, a form is available on the Medical Examiner's Website under "Frequently Used Forms"
2. The Medical Examiner's Office will maintain a Chain-of-Custody for all samples and will therefore submit specimens directly to the testing agency as per their sample requirements. The requesting party will need to locate a laboratory capable of performing specific testing and advise the Spokane County Medical Examiner's office which laboratory will be used.
3. Comparison testing of other individuals involved in paternity determination is outside the function of the Medical Examiner's Office.
4. A non-refundable administrative fee of \$100, payable by check or money order, to the Spokane County Medical Examiner for processing, storage, retrieval and handling of biological specimens; must be submitted with the formal request for specimens. The Medical Examiner's office cannot accept debit or credit cards.
5. The requesting individual is responsible for any and all costs associated with transfers and testing of samples billed by the testing laboratory. The testing laboratory will submit a separate bill to the requesting individual/agency.
6. Autopsy-obtained samples will only be released when all appropriate documents or court orders and payments have been submitted.
7. The Spokane County Medical Examiner's Office is not responsible for laboratory selection, test selection, test performance, or interpretation of the results of the DNA/Paternity testing. The requesting party acknowledge that they are responsible for all shipping and lab testing fees, in addition to the \$100 non-refundable fee paid to Spokane County for processing, storage, retrieval, and handling of biological specimens.