

**SENATE  
STATE OF MINNESOTA  
NINETIETH SESSION**

**S.F. No. 4090**

**(SENATE AUTHORS: )**

**DATE**  
05/17/2018

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Introduction and first reading  
Referred to Local Government

**OFFICIAL STATUS**

1.1 A bill for an act  
1.2 relating to local government; providing a contested case hearing procedure;  
1.3 amending Minnesota Statutes 2016, section 390.11, subdivisions 1, 2; proposing  
1.4 coding for new law in Minnesota Statutes, chapter 390.

1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.6 Section 1. Minnesota Statutes 2016, section 390.11, subdivision 1, is amended to read:

1.7 Subdivision 1. **Reports of death.** All sudden or unexpected deaths and all deaths that  
1.8 may be due entirely or in part to any factor other than natural disease processes must be  
1.9 promptly reported to the coroner or medical examiner for evaluation. Sufficient information  
1.10 must be provided to the coroner or medical examiner. Reportable deaths include, but are  
1.11 not limited to:

1.12 (1) unnatural deaths, including violent deaths arising from homicide, suicide, or accident;

1.13 (2) deaths due to a fire or associated with burns or chemical, electrical, or radiation  
1.14 injury;

1.15 (3) unexplained or unexpected perinatal and postpartum maternal deaths;

1.16 (4) deaths under suspicious, unusual, or unexpected circumstances;

1.17 (5) deaths of persons whose bodies are to be cremated or otherwise disposed of so that  
1.18 the bodies will later be unavailable for examination;

1.19 (6) deaths of inmates of public institutions and persons in custody of law enforcement  
1.20 officers who have not been hospitalized primarily for organic disease;

1.21 (7) deaths that occur during, in association with, or as the result of diagnostic, therapeutic,  
1.22 or anesthetic procedures;

- 2.1 (8) deaths due to culpable neglect;
- 2.2 (9) stillbirths of 20 weeks or longer gestation unattended by a physician;
- 2.3 (10) sudden deaths of persons not affected by recognizable disease;
- 2.4 (11) unexpected deaths of persons notwithstanding a history of underlying disease;
- 2.5 (12) deaths in which a fracture of a major bone such as a femur, humerus, or tibia has
- 2.6 occurred within the past six months;
- 2.7 (13) deaths unattended by a physician occurring outside of a licensed health care facility
- 2.8 or licensed residential hospice program;
- 2.9 (14) deaths of persons not seen by their physician within 120 days of demise;
- 2.10 (15) deaths of persons occurring in an emergency department;
- 2.11 (16) stillbirths or deaths of newborn infants in which there has been maternal use of or
- 2.12 exposure to unprescribed controlled substances including street drugs or in which there is
- 2.13 history or evidence of maternal trauma;
- 2.14 (17) unexpected deaths of children;
- 2.15 (18) solid organ donors;
- 2.16 (19) unidentified bodies;
- 2.17 (20) skeletonized remains;
- 2.18 (21) deaths occurring within 24 hours of arrival at a health care facility if death is
- 2.19 unexpected;
- 2.20 (22) deaths associated with the decedent's employment;
- 2.21 (23) deaths of nonregistered hospice patients or patients in nonlicensed hospice programs;
- 2.22 and
- 2.23 (24) deaths attributable to acts of terrorism.

2.24 The coroner or medical examiner shall determine the extent of the coroner's or medical

2.25 examiner's investigation, including whether additional investigation is needed by the coroner

2.26 or medical examiner, jurisdiction is assumed, or an autopsy will be performed, subject to

2.27 subdivision 2b and section 390.361.

3.1 Sec. 2. Minnesota Statutes 2016, section 390.11, subdivision 2, is amended to read:

3.2 Subd. 2. **Autopsies.** Subject to subdivision 2b, the coroner or medical examiner may  
3.3 order an autopsy, at the coroner or medical examiner's sole discretion, in the case of any  
3.4 human death referred to in subdivision 1, when, in the judgment of the coroner or medical  
3.5 examiner the public interest would be served by an autopsy. The autopsy shall be performed  
3.6 without unnecessary delay. A report of the facts developed by the autopsy and findings of  
3.7 the person performing the autopsy shall be made promptly and filed in the office of the  
3.8 coroner or medical examiner. When further investigation is deemed advisable, a copy of  
3.9 the report shall be delivered to the county attorney. Every autopsy performed pursuant to  
3.10 this subdivision shall, whenever practical, be performed in the county morgue. Subject to  
3.11 section 390.361, nothing herein shall require the coroner or medical examiner to order an  
3.12 autopsy upon the body of a deceased person if the person died of known or ascertainable  
3.13 causes or had been under the care of a licensed physician immediately prior to death or if  
3.14 the coroner or medical examiner determines the autopsy to be unnecessary.

3.15 Autopsies performed pursuant to this subdivision may include the removal, retention,  
3.16 testing, or use of organs, parts of organs, fluids or tissues, at the discretion of the coroner  
3.17 or medical examiner, when removal, retention, testing, or use may be useful in determining  
3.18 or confirming the cause of death, mechanism of death, manner of death, identification of  
3.19 the deceased, presence of disease or injury, or preservation of evidence. Such tissue retained  
3.20 by the coroner or medical examiner pursuant to this subdivision shall be disposed of in  
3.21 accordance with standard biohazardous hospital or surgical material and does not require  
3.22 specific consent or notification of the legal next of kin. When removal, retention, testing,  
3.23 and use of organs, parts of organs, fluids, or tissues is deemed beneficial, and is done only  
3.24 for research or the advancement of medical knowledge and progress, written consent or  
3.25 documented oral consent shall be obtained from the legal next of kin, if any, of the deceased  
3.26 person prior to the removal, retention, testing, or use.

3.27 Sec. 3. **[390.361] CONTESTED CASE HEARING.**

3.28 Unless otherwise specified in this chapter, an interested party may challenge a coroner  
3.29 or medical examiner's findings or report under chapter 14. For purposes of this section,  
3.30 "interested party" means the spouse, parent, adult child, adult sibling, or legal guardian of  
3.31 the decedent.