

INTRODUCTION

The Water-Related Death Scene Investigation (DSI) Protocol is a tool to help investigators collect detailed, standardized information in drowning and other water-related deaths. It provides a process for investigators to seek and collect rich, detailed, and contextual information that can support more effective investigations, public safety, public health, and prevention planning. Throughout this protocol, the decedent is referred to as “the subject.”

The Water-Related DSI Protocol is divided into three parts:

REPORTING PARTY/WITNESS INTERVIEW FORM

Found on **page 2**, this portion of the Protocol is intended to collect important information from people at the scene, including witnesses or those who found the subject. It poses time-sensitive questions to those in the vicinity of the incident or where the subject was found. If family members are the witnesses/reporting party, additional questions from the Decedent Information Report should be asked.

SCENE PROCESSING FORM

Found on **page 6**, this portion of the Protocol is intended to collect important information about the location and environment where the subject was found. It poses time-sensitive questions to collect transient information and process the scene.

DECEDENT INFORMATION FORM

Found on **page 18**, this portion of the Protocol includes important information about the subject, including significant risk factors for drowning. Information in this section may be collected from multiple sources including further investigation activities, autopsy reports, and family members.

The following report summarizes the investigation of the following individual:

Name of subject:

Subject date of birth:

Subject date of death:

Subject sex at birth: Female Male

Subject race (*check all that apply*): Alaska Native, specify tribe:

Native Hawaiian

American Indian, specify tribe:

White

Pacific Islander, specify:

Black

Asian, specify:

Unknown

Hispanic or Latino/a origin?: Yes No Unknown

Subject height and weight:

feet

inches

pounds

ounces

Time of death, if known (Military):

Unknown

REPORTING PARTY/WITNESS INTERVIEW FORM

These questions should be asked of the reporting party as well as any witnesses present **at the scene** of the incident or recovery. If the individuals interviewed for this information are also family or caregivers of the subject, the questions in the Decedent Information Form should also be asked. In addition to asking reporting parties and witnesses to describe what happened, investigators are encouraged to ask them to show, or reenact, what happened, ideally in the location of the incident. Please iterate to family or witnesses that this is a standard protocol and these questions will be asked in all circumstances and are not to be interpreted as an interrogation or belief of guilt.

1. Was the incident witnessed?

- Yes, proceed to 1a No, skip to 1e Unknown, skip to 1e

1a. If witnessed, who witnessed the incident? Check all that apply.

- | | |
|---|---|
| <input type="checkbox"/> Bystander | <input type="checkbox"/> Parent/guardian/caregiver |
| <input type="checkbox"/> Patron/swimmer | <input type="checkbox"/> Other family member, describe: |
| <input type="checkbox"/> Boater | <input type="checkbox"/> Intimate partner |
| <input type="checkbox"/> Lifeguard | <input type="checkbox"/> Friend |
| <input type="checkbox"/> Other facility staff | <input type="checkbox"/> Other, describe: |
| <input type="checkbox"/> Resident or neighbor | <input type="checkbox"/> Unknown |

1b. If witnessed, who first noticed that the subject was in trouble? Check all that apply.

- | | |
|---|---|
| <input type="checkbox"/> Bystander | <input type="checkbox"/> Parent/guardian/caregiver |
| <input type="checkbox"/> Patron/swimmer | <input type="checkbox"/> Other family member, describe: |
| <input type="checkbox"/> Boater | <input type="checkbox"/> Intimate partner |
| <input type="checkbox"/> Lifeguard | <input type="checkbox"/> Friend |
| <input type="checkbox"/> Other facility staff | <input type="checkbox"/> Other, describe: |
| <input type="checkbox"/> Resident or neighbor | <input type="checkbox"/> Unknown |

1c. Were any of the witnesses aged 18 or older?

- Yes No Unknown

1d. What was the reporting party or witness doing when they realized the subject needed help?

1e. Witness/reporting party names/contact information:

1f. If incident was not observed, what prompted discovery of subject?

2. Prior to incident, where was the subject last seen?

3. When subject was last seen, were they observed:

- In the water On the water Near the water Not near any water

4. What was the subject's last activity immediately prior to the incident? Check all that apply.

- | | |
|--|--|
| <input type="checkbox"/> Swimming | <input type="checkbox"/> Breath holding or feat of endurance |
| <input type="checkbox"/> Sunbathing | <input type="checkbox"/> Traveling (<i>land, water, ice, air</i>), describe: |
| <input type="checkbox"/> Playing outside | <input type="checkbox"/> Water sports/boating/recreation (<i>including cliff jumping or scuba diving</i>), describe: |
| <input type="checkbox"/> Playing inside | <input type="checkbox"/> Sleeping |
| <input type="checkbox"/> Working | <input type="checkbox"/> Other, describe: |
| <input type="checkbox"/> Bathing | <input type="checkbox"/> Unknown |

5. Was subject forcibly submerged by another person, including roughhousing or being pushed?

- Yes No Unknown

6. Was the subject supervised at the time of the incident? Include lifeguards present.

- Yes Supervisor present but distracted
 No, but supervision was not needed No, but supervision was needed
 Unknown

**Supervision can be needed for a variety of reasons, including age, development, swimming ability, or cognitive or physical disability. In some instances, a person may have been in a supervisory role but turned their back or been distracted. In those instances, answer "yes" and detail their distractions in 6c-6e.*

6a. If subject was supervised, who was providing supervision? Check all that apply. **If no supervision, skip to question 7.**

- | | |
|--|---|
| <input type="checkbox"/> Lifeguard(s) | <input type="checkbox"/> Swim instructor/Camp counselor |
| <input type="checkbox"/> Parent or caregiver | <input type="checkbox"/> Babysitter |
| <input type="checkbox"/> Family member | <input type="checkbox"/> Other, specify: |
| <input type="checkbox"/> Friend | <input type="checkbox"/> Unknown |

6b. Was the supervisor (or the main supervisor, if multiple supervisors) under age 18?

- Yes No Unknown

6c. Was anything impacting the main supervisor's ability to attentively supervise?

- Yes No Unknown

6d. What was impacting supervision for the main supervisor? Check all that apply. If not, skip to question 7.

- | | |
|--|--|
| <input type="checkbox"/> Glare on the water | <input type="checkbox"/> Distracted by mobile device |
| <input type="checkbox"/> Weather (<i>rain, fog, bright sun</i>) | <input type="checkbox"/> Other distractions, describe: |
| <input type="checkbox"/> Toys/play equipment in the water | <input type="checkbox"/> Alcohol use |
| <input type="checkbox"/> White water/foam on the water | <input type="checkbox"/> Drug use |
| <input type="checkbox"/> Too many people for attentive supervision | <input type="checkbox"/> Other, specify: |

6e. What was the main supervisor doing when they realized the subject was missing or in trouble? If the incident was not observed, what made them realize something was amiss?

7. Was a flotation device used by the subject at the time of incident?

- | | |
|---|-------------------------------------|
| <input type="radio"/> Yes, life jacket or personal flotation device (PFD) | <input type="radio"/> No, skip to 8 |
| <input type="radio"/> Yes, inflatable device, describe: | <input type="radio"/> Unknown |
| <input type="radio"/> Yes, other, describe: | |

7a. If subject was wearing a life jacket or inflatable device, was it... (check all that apply)

- | | | | | |
|--|---------------------------|--------------------------|---------------------------|-------------------------------|
| The correct size? | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A | <input type="radio"/> Unknown |
| Approved by the U.S. Coast Guard?
<i>This can be ascertained by checking the tag.</i> | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A | <input type="radio"/> Unknown |
| Worn properly (<i>fully buckled and tightened</i>)? | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A | <input type="radio"/> Unknown |
| Properly inflated? | <input type="radio"/> Yes | <input type="radio"/> No | <input type="radio"/> N/A | <input type="radio"/> Unknown |

7b. Did the life jacket or inflatable device contribute to the death?

- Yes No Unknown

8. Check all that apply in regards to the subject:

- | | |
|--|--|
| <input type="checkbox"/> Alcohol, drugs, or paraphernalia found at scene | <input type="checkbox"/> None of the above |
| <input type="checkbox"/> Subject observed using alcohol or drugs at time of incident | <input type="checkbox"/> Unknown |
| <input type="checkbox"/> Subject suspected of using alcohol or drugs at time of incident | |

9. Was subject breathing/attempting to breathe when discovered?

Yes

No

Unknown

10. Describe the state of the witnesses and/or reporting parties. Include if any witnesses had wet clothing or injuries and their physical and emotional condition.