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Q&A: Collier medical examiner's office not overwhelmed by coronavirus, but workload is up

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The growing number of coronavirus-related deaths in Southwest Florida has not overwhelmed the staff at the Collier County Medical Examiner's Office, but the workload has increased, according to District 20 Medical Examiner Dr. Marta Coburn.

In an email interview with the Naples Daily News and The News-Press, Coburn, the medical examiner for District 20, said her staff is taking extra precautions to protect their team from the virus, which has so far been [far deadlier and much more contagious than the common flu.](#) ([/story/news/2020/05/01/covid-19-coronavirus-more-deadly-florida-than-flu/5152804002/](#))



Marta Coburn, medical examiner's office (Photo: Provided)

To prevent spreading the virus, the office is limiting access to the morgue and employees are increasing their use of N95 masks, which filter out at least 95% of airborne particles. They've also made efforts to spread out employees working in the office, and employees have been asked to limit their social contacts outside of work.

As of Monday, the Collier County Medical Examiner reported 26 deaths in its jurisdiction related to the novel coronavirus.

In case you missed it:How many Lee, Collier deaths by coronavirus? Depends on who you ask: medical examiners or the state ([/story/news/local/2020/05/01/coronavirus-deaths-florida-how-many-covid-19-deaths-collier-and-lee-counties-depends-who-you-ask/3055550001/](#))

Here are highlights of the interview, which has been edited for length.

NDN: How has the virus impacted workload of the District 20 Medical Examiner's Office?

Coburn: The number of calls and the number of investigations have increased due to COVID. We investigate all of these calls. We have also had many more meetings, review of medical articles, news reports, etc. so that we remain up to date regarding information about the virus.

We have had numerous media requests for information and records, and we have had to spend a great deal of time procuring (personal protective equipment). We also had to change schedules, determine who would work from home and determine what procedures to implement to accomplish what we need to do.

In addition to the increase from COVID-related calls and investigations, all other deaths that come under medical examiner jurisdiction must also be addressed.

NDN: Is there any way to quantify how much your case load has increased since the coronavirus pandemic?

Coburn: It is not possible to know that without going back and looking at each individual COVID positive and COVID negative case. Many, if not most, would not have been reportable to the Medical Examiner, if not for the pandemic.

NDN: Has your office been overwhelmed with COVID-19 cases?

Coburn: No.

Read More:How did coronavirus infect Florida? Travelers visited 46 states, 75 foreign destinations before diagnosis ([/story/news/local/florida/2020/04/07/coronavirus-florida-travelers-covid-19-visited-46-states-75-foreign-destinations/2939500001/](#))

NDN: Your staff members already are experienced at protecting themselves from infection. Are you taking extra precautions because of COVID-19?

Coburn: Medical examiner staff take precaution on every case because we cannot know who may have hepatitis, HIV, tuberculosis, meningitis, etc. We collect as much information as is available on any case that we will examine so that we can take extra precautions if someone has or may have an active infectious disease.

Extra precautions for COVID cases, for example, means that we use N95 masks, we prepare swabs ahead of time to contain the work area, we lock the morgue area and no staff is permitted to enter the morgue, except for the doctor and technician performing the autopsy. I would constantly remind staff to make sure that they showered and changed clothes after autopsy.

We would do these same things if we had a possible meningitis or tuberculosis case, for example.

NDN: What steps are you taking to avoid missing any COVID-19 cases?

Coburn: The information regarding patients' symptoms changed rapidly throughout the first months, as did risk factors and other information. For example, travel-related information first was limited to the initial five countries, then Washington state, the northeastern states, California and Louisiana, etc. As more cases were reported, we expanded our criteria.

We never want to miss any case, not just COVID cases, because families, health departments, communities and others depend on a thorough investigation and rely on our data and results.

To avoid missing cases, we review all information and speak to health providers, caretakers, family, etc. and if symptoms or other information possibly support death due to COVID, we investigate further and will swab a decedent that has not already been tested.

NDN: You sent notices to the county's funeral homes and medical facilities reminding them of your role in signing all COVID-19 case death certificates. Does that mean that you take custody of the bodies in all cases, or are there scenarios where swabs and photographs are taken outside your facility?

Coburn: We assume jurisdiction, but may not necessarily bring the body to the medical examiner's office.

Read more: [22 people have died from COVID-19 in longterm care facilities across Southwest Florida \(/story/news/health/2020/04/29/florida-nursing-homes-susceptible-covid-19-death-data/3049365001/\)](https://www.naplesnews.com/story/news/health/2020/04/29/florida-nursing-homes-susceptible-covid-19-death-data/3049365001/)

NDN: How many of the COVID-19 patients who died are getting autopsied? Are the reasons for death changing after the autopsies?

Coburn: We have autopsied several people who tested negative for COVID. We have autopsied one COVID positive person. The cause of death is pending microscopic tissue analysis in that case.

NDN: What new policies or procedures have you implemented to protect your staff from COVID-19 exposure?

Coburn: We have purchased additional N95 masks. We disinfect the administration area and bathrooms daily; purchased disinfectant for the morgue that kills COVID and a number of other viruses and bacteria; purchased additional cut-resistant gloves, hoods that cover the entire head and shoulders, additional Tyvek suits and face shields to ensure protection during autopsies.

NDN: Can you explain the work-from-home situation in your office?

Coburn: Two employees are working from home because they have small children (forensic investigator and director of operations).

We have practiced distancing by moving employees to different offices. I ask each employee to continue to limit their circle of contacts as they have done since the beginning of the pandemic, since it has worked very well for our office.

NDN: How are your inventory levels of personal protective equipment?

Coburn: We have continued to purchase from different vendors throughout the pandemic and have been able to increase our inventory so that we have almost a year's inventory for most items.

NDN: Have you had to change how long you use the equipment or taken steps to increase its longevity?

Coburn: In the case of N95 masks, we do not reuse if it is used to perform an autopsy. We also discussed washing and reusing gowns, but we will not need to do so as we have enough inventory of Tyvek suits and plastic gowns.

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