



CHILD DEATH SCENE CHECKLIST

Physical Evidence

ENVIRONMENT:	Temperature (inside/outside)
	Sleeping arrangements
	Type of bedding
	Toys (#, type, condition)
	Videos (of V / appropriate for developmental level)
	Computer games
	Clothes (#, condition)
	Parenting books
	Drs. Phone #'s accessible
	Pictures of victim and / or siblings
	Soiled/Wet Clothes
	Check washing machine - clean/dirty
	Cigarettes / ashtrays
	Pornography
	Drug paraphernalia
	Prescription / Non-prescription medication
	Insects
	Hazards to children
	Check wastebaskets
	Type of floor and covering
Contents of toilet	
Septic tank	
Overall appearance of inside	
Overall appearance of outside	
FOOD:	Check shelves / fridge / freezer
	Fresh / Rotting
	Recent purchases
FORMULA:	Baby Bottles (seize if contain contents or residue)
	Cans
	Mixing instructions
	Baby food
	Breast-fed
DIAPERS:	New / Clean
	Where dirty diapers kept
	Wipes
	Ointment
OTHER CHILDREN:	Well nourished
	Well clothed
	Clean / dirty
	Bruises
	Medical conditions
PETS:	Food
	Appearance
	Method, location of waste disposal
	Dangerous animals (including snakes, ferrets)
MEASUREMENTS:	Measure EVERYTHING
	Relevant fixtures / items: floor, stairs, toys, couch, bedding
PHYSICAL EVIDENCE:	Seize EVERYTHING with any possible relevancy
	Evidence of motive: soiled underwear, bedding, diapers, medication, body fluids
	Instruments of discipline



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Information

WITNESSES:	Names / all who had access in last 72 hrs.
	Contact #s / ** Cell phone #s
	Demeanor
FEEDING HISTORY:	Within past 24 hours
	When
	Whom
	What
	Reaction to food
	Bowel movement schedule
MEDICAL INFO:	Name of Dr./s.
	Last visit
	Prenatal visits
	Complications at birth
	Well baby checks
	Prescriptions written, filled
	Over the counter baby medications
	Preexisting medical conditions
	Immunizations
	Bleeding disorder
	Allergies
	Previous broken bones
	Developmental level (rollover, crawl, stand, walk)
	When was child last well
	Condition after removed from caretaker
	*** Obtain waiver for all medical records from birth to event ***
Caretaker Interview:	* Use calendar to document access and child behavior/demeanor
	*Allow witness to provide narrative
	Recent observations: stomach problems, vomiting, poor feeding, lethargy, irritability, seizures, impaired consciousness, last meal (what ate)
	Changes in schedule (work, activities, caretaking responsibilities)
	Financial problems (Debt – cars, rent; New Expenses – daycare)
	Sleep deprivation
	Form of transportation
	Prior experience with children
	Prenatal education
	Expectations not realized (house, timing of family)
	Resentment
	Unrealistic expectations of child (child's attitude, intentional behavior)
	Feelings toward child: what like living with V/typical day with V, anything about V hard to like, use 3 words to describe V
	If accident alleged, ask for specifics: how many stairs, who there, what happened immediately before
	Phone calls made surrounding injury
	<i>Female only:</i>
☺ ☺ ☺ ☺ PHOTOS:	PHOTOGRAPH EVERYTHING (use measuring device to show scale) - every room, every surface, inside refrigerator, inside kitchen and bathroom cupboards
	If head injury, photograph all floor surfaces, cut (and seize) carpet, photograph again, then cut (and seize) the pad below the carpet and photograph again.
	VIDEOTAPE EVERYTHING photographed
	VIDEOTAPE DEMONSTRATION OF HOW INJURY OCCURRED