

SUIDI Reporting Form: A Guide for Investigators

The SUIDI reporting form is a guide for novice and veteran investigators of infant deaths. The form is designed to ensure that all information is collected in a consistent, sensitive manner. The form is designed as a questionnaire. You can read the questions to the person you are interviewing. Most questions can be answered by placing a "√" in the corresponding box or filling in the blank. The eight-page form is divided into nine sections.

1. Investigation Data

This section is filled out first by the person (e.g., coroner, death scene investigator, law enforcement official, or medical examiner) who interviews the witness.

- **Primary residence.** Address where the infant was living when he or she died.
- **Incident address.** Address where the infant died or where the final injury occurred.
- **Witness.** Person who knows some or all of the circumstances surrounding the infant's death. This may be the person who 1) last placed the infant in or near the area where he or she was found not breathing or breathing with distress, 2) last observed the infant alive, or 3) found the infant not breathing or breathing with distress.

2. Witness Interview

This section is filled out by the person who interviews the witness.

- **Usual caregiver.** The person who took care of the infant more than 50% of the time.
- **Last placed.** The last time the infant was put down to sleep or rest (e.g., in a crib).
- **Last known alive (LKA).** The last time the infant was observed alive (e.g., time when a parent heard the infant cry).
- **Found.** The act of finding the infant not breathing or breathing with distress.
- **Positional support.** Item such as a wedge or pillow used to keep an infant on their side or back while sleeping.
- **Wedging.** Being caught in a narrow space that causes interference with chest wall movements and normal breathing (e.g., infant wedged between mattress and bed frame).

3. Infant's Medical History

This section is filled out by the person investigating the infant's death. This information may be obtained from the infant's healthcare provider, medical record, or caregiver.

- **Metabolic disorder.** A disease that affects a person's ability to use or metabolize food (e.g., Medium chain acyl-CoA dehydrogenase or MCAD deficiency).
- **Birth defect.** A physical or functional abnormality that the infant had at birth (e.g., spina bifida, congenital heart defect, Down syndrome)
- **Newborn screen.** Tests done at birth to detect certain metabolic disorders.

4. **Infant Dietary History**

This section is filled out by the person investigating the infant's death. The information should be obtained from the person who last fed the infant. If that person is not the person who usually fed the infant, also interview the infant's usual feeder.

5. **Pregnancy History**

This section is filled out by the person who interviews the biological or birth mother or someone who knows her history well (e.g., her healthcare provider, partner, or her mother).

6. **Incident Scene Investigation**

This section is filled out by the person investigating the infant's death.

7. **Investigation Summary**

Investigators use this section to describe any concerns that they have that are not documented in the preceding sections of the form. Investigators may use the checkboxes to indicate when tasks are completed such as doll reenactment.

8. **Investigation Diagrams**

Scene Diagram—The investigator indicates the following on the scene diagram:

- North direction.
- Windows and doors.
- Wall lengths and ceiling height.
- Location of furniture, including infant's bed or sleep surface.
- Location of infant's body when found.
- Position of other people or animals found near the infant.
- Location of heating and cooling devices, and other objects in room.

Body Diagram—The investigator indicates the following on the body diagram:

- Discoloration around face, nose, or mouth.
- Secretions (drainage or discharge from anywhere on the body).

- Skin discoloration (livor mortis).
- Pressure mark areas (pale areas, blanching).
- Rash or petechiae (small, red blood spots on skin, on membranes, or in eyes).
- Marks on body (scratch or bruises).
- Location of medical devices (e.g., breathing tube, gastrostomy feeding tube).
- Body temperature.

9. Summary for Pathologist

This section summarizes all the information collected during the witness interview and investigation at the incident or death scene. This section should be completed last by the person investigating the infant's death.

- **Asphyxia.** Condition of severely deficient supply of oxygen to the body that can rapidly lead to unconsciousness and death (e.g., compression of infant's chest because he was wedged into a narrow space or had a person lying on them).
- **Overlying.** Situation in which someone or something is placed on or over the infant.
- **Hyperthermia.** Life-threatening condition in which the core body temperature is above 40°C (104°F).
- **Hypothermia.** Life-threatening condition in which the core body temperature falls below 35°C (95°F).
Half of these sudden, unexplained infant deaths (SUID) are due to sudden infant death