State of New Jersey
DEPARTMENT OF HEALTH
PO BOX 360
TRENTON, N.J. 08625-0360
www.nj.gov/health

PHILIP D. MURPHY
Governor

SHEILA Y. OLIVER
Lt. Governor

JUDITH M. PERSICHILLI, RN, BSN, MA
Commissioner

EXECUTIVE DIRECTIVE NO: 20-010

WHEREAS, Coronavirus disease 2019 ("COVID-19") is a contagious, and at times fatal, respiratory disease caused by the SARS-CoV-2 virus; and

WHEREAS, COVID-19 is responsible for the 2019 novel coronavirus outbreak, which was first identified in Wuhan, the People's Republic of China in December 2019 and quickly spread throughout the Hubei Province and multiple other countries, including the United States; and

WHEREAS, on January 30, 2020, the International Health Regulations Emergency Committee of the World Health Organization declared the outbreak a "public health emergency of international concern," which means "an extraordinary event which is determined to constitute a public health risk to other States through the international spread of disease and to potentially require a coordinated international response," and thereafter raised its global risk assessment of COVID-19 from "high" to "very high"; and

WHEREAS, on January 31, 2020, the Secretary of the United States Department of Health and Human Services declared a public health emergency for the United States to aid the nation's healthcare community in responding to COVID-19; and

WHEREAS, on March 9, 2020, Governor Philip D. Murphy issued Executive Order 103, declaring the existence of a Public Health Emergency, pursuant to the Emergency Health Powers Act, N.J.S.A. 26:13-1 et seq, and a State of Emergency, pursuant to the Disaster Control Act, N.J.S.A. App A:9-33 et seq., in the State of New Jersey for COVID-19; and

WHEREAS, on April 7, 2020, Governor Philip D. Murphy issued Executive Order 119 extending the Public Health Emergency declared on March 9, 2020; and

WHEREAS, under the declared public health emergency, the Commissioner of the Department of Health is empowered, pursuant to N.J.S.A. 26:13-12, to take all reasonable and necessary measures to prevent the transmission of infectious disease and apply proper controls and treatment for infectious disease; and

WHEREAS, pursuant to N.J.S.A. 26:13-7(a)(1), the Commissioner of the Department of Health, the Commissioner of the Department of Environmental Protection and the Chief State Medical Examiner are empowered to take actions or issue and enforce orders to

provide for the safe disposition of human remains as may be reasonable and necessary to respond to the public health emergency; and

WHEREAS, on March 24, 2020, the World Health Organization issued interim guidance on infection prevention and control and the safe management of human remains in the context of COVID-19, which recommends minimizing direct interaction with the remains of persons who have died with suspected or confirmed COVID-19 and does not recommend embalming in order to avoid excessive manipulation of the remains; and

WHEREAS, pursuant to N.J.S.A. 26:13-7(a)(3), the Commissioner of the Department of Health, the Commissioner of the Department of Environmental Protection and the Chief State Medical Examiner are empowered "[t]o direct or issue and enforce orders requiring any business or facility, including, but not limited to, a mortuary or funeral director, authorized to hold, embalm, bury, cremate, inter, disinter, transport, and dispose of human remains under the laws of this State to accept any human remains if such orders are reasonable and necessary to respond to the public health emergency and are within the safety precaution capabilities of the business or facility"; and

WHEREAS, pursuant to N.J.S.A. 26:13-7(a)(4), the Commissioner of the Department of Health, the Commissioner of the Department of Environmental Protection and the Chief State Medical Examiner are empowered "[t]o direct or issue and enforce orders requiring that every human remains prior to disposition be clearly labeled with all available information to identify the decedent, which shall include the requirement that any human remains of a deceased person with a contagious disease shall have an external, clearly visible tag indicating that the human remains are infected to avoid the need to reopen required body bags and, if known, the contagious disease"; and

WHEREAS, on April 13, 2020, the Department of Environmental Protection temporarily amended the daily hourly operating limits in any air permit governing the operation of a New Jersey human crematory by permitting the crematories to operate in excess of any permitted daily hourly operating limits as may be necessary to satisfy increased service needs due to the COVID-19 pandemic; and

WHEREAS, as of April 22, 2020, the State has approximately 95,865 documented cases of COVID-19 and 5,063 deaths related to COVID-19, and

WHEREAS, the COVID-19 pandemic has caused significant delays in the cremation of human remains particularly for crematories in northern New Jersey; and

WHEREAS, the Centers for Disease Control and Prevention expects that additional cases of COVID-19 will be identified in the coming days, including more cases in the United States, and that person-to-person spread is likely to continue to occur; and

WHEREAS, projections indicate that the number of deaths related to COVID-19 cases are likely to continue to increase to proportions that will strain both the existing capacity of health care facilities to safely store human remains and the postmortem management

capacity in the State, in particular the capacity to facilitate the safe and timely disposition of human remains while balancing the rights of the family of the deceased and the risk of exposure to infection; and

NOW, THEREFORE, I, JUDITH PERSICHILLI, Commissioner of the New Jersey Department of Health, in consultation with the Chief State Medical Examiner and the Commissioner of the Department of Environmental Protection, pursuant to the powers afforded to me under the Emergency Health Powers Act, hereby ORDER and DIRECT the following:

1. Licensed mortuary practitioners are strongly encouraged to provide for the disposition of human remains by direct cremation or immediate burial or entombment, regardless of whether the cause of death was related to COVID-19.

2. Embalming is strongly discouraged but may be performed when determined necessary by a licensed mortuary practitioner and if appropriate personal protective equipment is utilized.

3. Human remains may not be stored or otherwise held for future memorialization. As a general rule, licensed mortuary practitioners should provide for the disposition of all human remains within seven days of death.

4. Mortuaries, cemeteries and crematories shall, within their reasonable safety precaution capabilities, maximize their hours of operation in response to increased demand for final disposition services, including expanded daily, weekend and holiday hours.

5. Licensed mortuary practitioners, under the direction of a registered mortuary, shall not permit in-person viewings, visitations or ceremonies with an open casket containing the decedent, regardless of the decedent's cause of death. Viewings, visitations or ceremonies with closed caskets or the presentation of the cremains of the decedent are permitted, but must comply with the current limitations on gatherings, as set forth in Executive Order No. 107 (2020) and New Jersey Office of Emergency Management Administrative Order No. 2020-04, and any subsequent Executive Order or Administrative Order relating to limitations on gatherings.

6. Cemeteries shall ensure that all graveside services comply with current limitations on gatherings as set forth in Executive Order No. 107 (2020) and New Jersey Office of Emergency Management Administrative Order No. 2020-04, and any subsequent Executive Order or Administrative Order relating to limitations on gatherings.

7. To avoid cremation delays, registered mortuaries must utilize crematories that have the capacity to provide services in a timely manner. The Department of Law and Public Safety, Division of Consumer Affairs is authorized to provide supplemental and ongoing guidance to effectuate the provisions of this paragraph.

8. Licensed mortuary practitioners may not deny funeral services for any deceased person based upon their cause of death; nor may they place any condition not required by this Directive upon the provision of funeral services for any deceased person based upon their cause of death, or represent that state or local law requires that any condition not required by this Directive be placed upon the provision of funeral services for any deceased person based upon their cause of death.

9. To the extent possible, licensed mortuary practitioners shall take into consideration the religious, cultural, family and individual beliefs of the deceased person or their family for disposition of the remains.

10. To alleviate delays in removing human remains, registered mortuaries shall immediately identify and contact at least one other registered mortuary in another county for the purpose of referring a decedent's next of kin or designated representative to that mortuary (the "Reciprocal Services Mortuary") when the referring mortuary is unable to provide disposition services due to capacity issues.

11. A registered mortuary that is unable to take immediate custody of human remains at the request of a decedent's next of kin or designated representative and whose Reciprocal Services Mortuary is also unable to take custody of the remains may transport the remains to the designated State Temporary Morgue for the catchment area in which the mortuary is located, as set forth in paragraph 17 below.

12. When a death occurs at a long-term care, assisted living facility, assisted living program, dementia care home, comprehensive personal care home or a residential health care facility (collectively "Health Care Facility"), unless the circumstances of the death are statutorily required to be investigated by the Medical Examiner's office, the facility shall contact the decedent's legal next-of-kin or the decedent's designated representative within 4 hours from the time of death and advise that the person(s) with legal authority to control the disposition of the decedent's remains must make arrangements for the removal and disposition by a licensed mortuary practitioner within 12 hours of death.

13. When a death occurs at a Health Care Facility, and there is no known legal next-of-kin or designated representative for the decedent, or the remains have not been removed from the facility within 12 hours from the time of death, and the facility is unable to continue to safely store the remains, the facility may transport the remains to the designated State Temporary Morgue for the catchment area in which the facility is located, as set forth in paragraph 17 below.

14. When a death occurs at a hospital, including emergency modular field treatment facility, or any other hospital facility established during this state of emergency (collectively "Hospital Facility"), unless the circumstances of the death are statutorily required to be investigated by the Medical Examiner's office, the Hospital Facility shall contact the decedent's legal next-of-kin or the decedent's designated representative within 4 hours from the time of death and advise that the person(s) with legal authority to

control the disposition of the decedent's remains must make arrangements for the removal and disposition by a licensed mortuary practitioner within 48 hours of death.

15. When a death occurs at Hospital Facility, and there is no known legal next-of-kin or designated representative for the decedent, or the remains have not been removed within 48 hours of the death and the Hospital Facility is unable to continue to safely store the remains, the Hospital Facility may transport the remains to the State Temporary Morgue designated for the catchment area in which the hospital is located, as set forth in paragraph 17 below.

16. When a death occurs at a Hospital Facility or a Health Care Facility and the identity of the decedent is unknown, unless the circumstances of the death are statutorily required to be investigated by the Medical Examiner's office, the remains shall be deemed to be unidentified.

a. The Health Care Facility shall, as soon as possible, but not later than 4 hours from the time of death, contact the office of the county or intercounty medical examiner in the jurisdiction where the death occurred to take custody of the remains.

b. If remains received as unidentified are thereafter identified, the county or intercounty medical examiner shall release the remains pursuant to the direction of any proper person willing to accept responsibility therefor and who shall state the name and last known residence of the deceased, and acknowledge receipt of the remains.

c. Unidentified remains shall not be transferred to or accepted by the State's temporary morgues.

d. Disposition of unidentified remains shall be performed pursuant to N.J.S.A. 40A:9-54 to -56.

17. When permitted under this Directive, Health Care Facilities, Hospital Facilities, and registered mortuaries may transport human remains to State Temporary Morgues as follows:

a. Northern Catchment Area: Hospitals, healthcare facilities, and registered mortuaries located in the counties of Bergen, Essex, Hudson, Passaic, Morris, Sussex and Warren may transport human remains to the Northern State Temporary Morgue, whose email address is: Morgue-north@gw.njsp.org and telephone number is (609) 433-4117.

b. Central Catchment Area: Hospitals, healthcare facilities, and registered mortuaries located in the counties of Hunterdon, Mercer, Middlesex, Monmouth, Ocean, Somerset and Union may transport human remains to the Central-Southern State Temporary Morgue, whose email address is Morgue-central@gw.njsp.org and telephone number is (609) 433-0641.

c. Southern Catchment Area: Hospitals, healthcare facilities and registered mortuaries located in the counties of Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester and Salem may transport human remains to the Central-Southern State Temporary Morgue, whose email address is Morgue-south@gw.njsp.org and telephone number is (609) 433-4184.

18. The Health Care Facility, Hospital Facility or registered mortuary transferring human remains to a State temporary morgue maintains responsibility for making appropriate and timely arrangements for the removal of the remains from the State Temporary Morgue for final disposition.

19. Any Health Care Facility, Hospital Facility or registered mortuary that assumes responsibility for the transport of human remains to a State Temporary Morgue ("Transferring Entity") is required to do the following:

a. Contact the State Temporary Morgue designated for the catchment area in which the Transferring Entity is located to make arrangements for the temporary morgue to receive the remains;

b. Ensure that the medical professional pronouncing the death of the decedent initiates the death certificate by entering the death particulars (name, date of death, and cause of death) into the New Jersey Electronic Death Records System (EDRS) and that an EDRS number is generated prior to transport;

c. Arrange for transportation of the remains from the Transferring Entity to the State Temporary Morgue designated for the catchment area in which the Transferring Entity is located;

   i. The Department of Health, Office of the Chief State Medical Examiner, or Department of Law and Public Safety, Division of Consumer Affairs, may issue supplemental guidance on the transportation of remains during the current public health emergency.

d. Accurately complete the State Transfer Form, which is attached hereto and incorporated herein by reference;

e. Ensure that the remains prepared for transportation are accompanied by available information identifying the decedent, as set forth in paragraph 21 below;

f. Ensure that the transportation provider returns a copy of the fully executed State Transfer Form to the Transferring Entity in a timely manner after the remains are transported to and received by the State temporary morgue;

g. Maintain a copy of the fully executed State Transfer Form in the decedent's record;

h. Provide the decedent's next of kin, if one exists, with a copy of the fully executed State Transfer Form and advise the next of kin when the remains were transferred and to which State temporary morgue; and

i. Ensure that the appropriate arrangements are made for the removal of the remains from the State temporary morgue for disposition in a timely manner.

20. Prior to transportation from the location where death occurred or was discovered, all human remains, regardless of cause of death, shall be placed into non-porous, polyvinyl (minimum 8 mm thickness) zippered pouches designed for human remains (i.e., cadaver or "body" bags) and externally disinfected using products approved by the U.S. Environmental Protection Agency to be effective against emerging viral pathogens.

a. The Transferring Entity is responsible for maintaining an appropriate supply of cadaver bags to meet the demand.

b. Transferring Entities shall provide information on their inventories of cadaver bags to the New Jersey Department of Health, Office of the Chief State Medical Examiner, or New Jersey Office of Emergency Management.

c. State entities may, depending on supply, make available cadaver bags to Transferring Entities and may require reimbursement for cost.

21. Human remains prepared for transportation shall be accompanied by available information identifying the decedent.

a. Identifying information must be recorded indelibly on the outside of the pouch, near the zipper closure, and on the body itself and shall include the decedent's name, date of death, date of birth, the name of the transferring entity and the EDRS case number for the decedent.

b. The Transferring Entity shall maintain a record describing any unique physical attributes of the deceased (scars, markings, tattoos) as well as retain a photograph of decedent and identifying marks, whenever possible.

c. When the cause of death is known or reasonably suspected to have been related to COVID-19 or other contagious disease, a completed copy of the Department of Health's Communicable Disease Alert Form must accompany the remains.

22. All persons involved in the preparation for disposition, transportation or storage of human remains, regardless of the cause of death, should wear appropriate personal protection equipment and adhere to precaution standards for the preparation and handling of human remains set forth in N.J.A.C. 8:9-1.3.

23. Mobility assistance vehicle providers and emergency medical providers, outside of the 911 system, may be used for the purposes of transporting human remains to and from the State temporary morgue sites.

a. Providers transporting human remains shall ensure that the remains are properly secured in the vehicle for transport.

b. Upon completion of the transport, the emergency medical provider shall disinfect the vehicle that was used to transport the human remains with products approved by the U.S. Environmental Protection Agency to be effective against emerging viral pathogens.

24. All Healthcare Facilities and Hospital Facilities using a State Temporary Morgue shall ensure that staff responsible for coordinating the removal of remains from the State Temporary Morgue are advised of the location of the remains and that staff immediately provide the location of the remains and a copy of the fully executed State Transfer Form to a licensed mortuary practitioner seeking to take custody of the remains for disposition.

25. All Healthcare Facilities and Hospital Facilities shall, within their staffing capabilities, afford mortuary and/or Medical Examiner staff 24-hour access to their morgues to retrieve human remains, inclusive of all holidays and for the duration of this Directive, to the best of their staffing resources.

26. Postmortem management entities within the state, including but not limited to, registered mortuaries, licensed mortuary practitioners, cemeteries, crematories, county and intercounty morgues, Hospital Facilities, and Health Care Facilities shall provide information upon request by the Department of Health, Office of the State Chief Medical Examiner, Department of Law & Public Safety, Division of Consumer Affairs, or New Jersey Office of Emergency Management regarding situational and projected postmortem management capacity at each entity.

This Directive shall take effect immediately. The provisions of this Directive shall remain in force and effect for the duration of the public health emergency originally declared in Executive Order No. 103 (2020) and extended by Executive Order No. 119 (2020) unless otherwise modified, supplemented and/or rescinded.

Judith Persichilli

Judith Persichilli, R.N., B.S.N., M.A.
Commissioner

4/22/2020
Date

PHILIP D. MURPHY
Governor

SHEILA Y. OLIVER
Lt. Governor

State of New Jersey
DEPARTMENT OF HEALTH
OFFICE OF THE CHIEF STATE MEDICAL EXAMINER
120 South Stockton Street
P.O. Box 360
Trenton, NJ 08625-0360
TELEPHONE (609) 376-0557 FAX (609) 633-8312
www.ni.gov/health

JUDITH M. PERSICHILLI, RN, BSN, MA
Commissioner

ANDREW L. FALZON, MD
Chief State Medical Examiner

DECEDENT TRANSFER AUTHORIZATION FORM

1. DECEDENT INFORMATION:

Name: _____ Date of Birth: _____
MR/ME #: _____ EDRS#: _____
Sex: _____ Race: _____
Home Address/ Nursing Home of Residence: _____
Date of Death: _____
Communicable disease: Yes___ No: ___ If yes, please attach DOH Communicable Disease Alert Form

2. NEXT OF KIN ("NOK") CONTACT INFORMATION:

Name: _____ Relationship to the Deceased: _____
Telephone #: _____ Address: _____
NOK Informed of Transfer: Yes ____ No ____
If Yes, informed by: Phone ____ Voicemail ____ Other (Specify)_____

3. TRANSFERRING FACILITY REPRESENTATIVE INFORMATION:

Name of representative: _____ Title: _____
Facility: _____ Signature: _____
Telephone #: _____ E-mail: _____
Facility Address: _____
Death Certificate Filed by Facility: Yes ____ No ____

4. DECEDENT TRANSPORTED TO STORAGE FACILITY BY:

Name: _____ Transportation Company/Facility: _____
Signature: _____ Date/Time: _____

5. STORAGE FACILITY RECEIVING BODY:

North: _____ Central: _____ South: _____
Name: _____ Title: _____
Signature: _____ Date/Time: _____
Seal#: _____
Trailer#: _____ Rack#: _____ Row#: _____

6. DECEDENT RECEIPT WITNESSED BY:

Name: _____ Title: _____
Signature: _____ Date/Time: _____
(The witness who signs Section 6 cannot be the same individual that signs Section 5 above.)

By signing this form above, the Transferring Facility has agreed that the following provisions are the sole responsibility of the Transferring Facility, and agreed that the Department of Health and the Office of the Chief State Medical Examiner have no responsibility regarding the following:

1. *Certification of death for death certificate*
2. *Transportation of the deceased to the storage facility*
3. *Proper identification of the deceased prior to transfer of body.*
4. *The removal and cataloguing of all property of value of the deceased prior to transferring the body*
5. *Unless NOK makes arrangements, final disposition of the deceased*

New Jersey Department of Health
PO Box 358
Trenton, NJ 08625-0358

COMMUNICABLE DISEASES ALERT

SECTION I - INSTRUCTIONS

The following is a list of contagious, infection or communicable diseases developed in accordance with the provisions of P.L. 1988, C. 125 (N.J.S.A. 26:6-8.2). Funeral directors must be notified in writing if the deceased individual had any of these diseases at the time of death.

Such notification shall be accomplished by placing this form with the remains and forwarding a copy of same to the funeral director. The body shall not be released until this form is completed and placed with the remains.

-Human Immunodeficiency Virus Infections including AIDS (Acquired Immune Deficiency Syndrome)
-Anthrax
-COVID-19
-Creutzfeldt-Jakob Disease
-Viral Hepatitis B
-Malaria (Untreated)
-Meningococcal Disease (Untreated)
-Plague (Untreated)
-Q Fever (Untreated)
-Rabies
-Smallpox
-Syphilis-Primary and Secondary (Untreated)
-Toxoplasmosis Disseminated (Untreated)
-Tuberculosis (Untreated)
-Tularemia
-Typhoid Fever (Untreated)
-Viral Hemorrhagic Fevers **(Contact State Health Department Immediately)**
-Yellow Fever (First 5 Days of Infection)

Complete Section II if the deceased had one or more of the above diseases.

SECTION II

Name of Deceased	Date of Death

Name of Health Care Facility	Name of Funeral Director

I am the attending physician, registered professional nurse or state or county medical examiner who made the determination and pronouncement of death and I have determined or I have knowledge that the above-named individual suffered from one of the communicable diseases listed in Section I above at the time of his/her death.

All persons performing or assisting in post-mortem procedures should wear gloves, masks, protective eyewear, gowns and waterproof aprons. Instruments and surfaces contaminated during post-mortem procedures should be decontaminated with an appropriate chemical germicide.

Name of Pronouncer (Print)	Signature	Date

Distribution: Original - Funeral Director
Copy - Health Care Facility
Copy - Attach to Remains