

ENTOMOLOGY INFORMATION FORM

DATE: _____ CASE NUMBER: _____

COUNTY/STATE: _____ AGENCY: _____

DECEDENT: _____ AGE: _____ SEX: _____

Last Seen Alive: _____ Date and Time Found: _____

Date Reported Missing: _____ Time Removed from Scene: _____

Site Description:

Body Location: Indoor____ Outdoor____ Rural____ Urban____ Forest____ Field____ Water____
Buried____ Hanging____

Detailed Scene Description: _____

Stage of Decomposition: Fresh____ Bloat____ Advanced____ Dry/Skeleton____ Saponification____

Potential Insect Barriers: Clothing____ Concealment____ Submerged____ Scavengers (Y/N) _____
Detailed Notes: _____

Temperature Measurements: Above Body (chest high) _____ Body Surface _____ Ground
Surface _____ Under Body _____ Soil: 10 cm _____ 20 cm _____
Water _____ Thermostat (Indoor) _____ Maggot Mass: (center of mass) _____

Weather Data: Direct Sun Exposure____ No Sun Exposure____ Partial Sun Exposure____
Recent Rain/Snow____ Clothing entire____ Partial____ Nude____

Detailed Notes: _____

Nearest airport(s) or weather station(s): _____

