How to Deal with Dead Bodies

Death is a taboo topic so it's not too surprising that you will seldom see articles about it, but death is a reality that must be dealt with in any disaster.

I don't mean deal with dead bodies in the sense of "shoot, shovel & shut up." As you can see from the graphic below from a US military medical manual, most hospital admissions are caused by disease and other non-combat related factors.

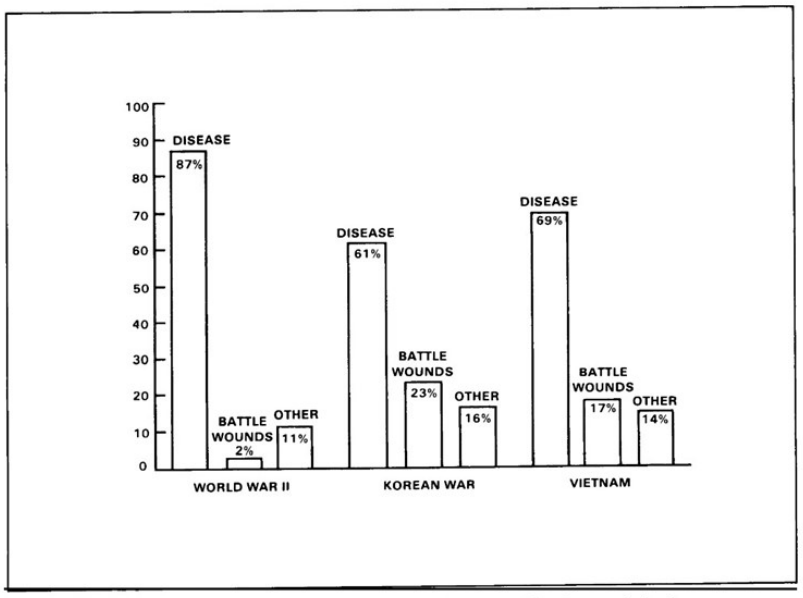

Figure 7-4. Percent of hospital admissions due to disease and battle wounds in three wars

During America's bloodiest war, the US Civil War, for

every three people who died in combat, five died from disease. (Friedman, 2018)

Post 9/11, significantly more service members died from suicide than died during

combat. (Thomas Howard “Ben” Suitt, 2021)

So, reality is nothing like what we see on TV or what the gun control crowd would have you believe. Way more people die because of microbes and heart disease than high velocity lead poisoning.

But what if the worst happens? How would my city handle large numbers of deaths? What if somebody dies during a disaster and emergency services aren’t responding? How would my family deal with the death of a family member?

These are reasonable questions to ask. We don’t like to talk about death, but none of us are getting out of life alive.

Morgues & Emergency Services Agreements

Death is part of emergency planning. During a normal run of the mill, short duration disaster where emergency services will be able to respond before decay sets in, dead bodies should be left in situ, emergency services should be called to declare the person dead. If the circumstances of death are suspicious, law enforcement will be dispatched to perform an investigation, and then the coroner is dispatched to take the body to the morgue where an autopsy will be performed.

During a mass casualty event, casualties are triaged and separated according to urgency. A simplified explanation of this process is that walking wounded are tagged Green or Minor, non-ambulatory patients who not in immediate danger are tagged Yellow or Delayed, patients in urgent need of medical attention to save their lives are marked Red or Immediate, and those that are dead or who will soon die regardless of effort are tagged Black for Expectant or Deceased.

The triage system ensures that the patients with the most serious injuries that can be saved are stabilized and transported first, and that limited resources are not wasted on patients who will die anyway, using up those limited resources and causing more deaths in the process.

The Black triage area, the morgue, is separated from the other treatment areas so patients are not laying next to their dead or dying friends and neighbors. Cities are now required by Federal law to have Emergency Managers and emergency plans. Dealing with mass casualties and deaths is of those plans. Large cities may have city or county morgues overseen by the medical examiner and coroner.

I live in a semi-rural area and our smaller municipalities enter into emergency services agreements with local businesses to provide them with refrigerated semitrailers to store bodies when emergency services are overwhelmed.

The condition of patients in the triage areas sometimes worsens and they must be moved from one are to another. Patients who die are moved the morgue and tagged black. They will eventually be transported by the coroner and medical examiner's office after all the living have been treated.

First responder, volunteer with a governmental or non-governmental organization active in disaster, or even if you volunteer on the spot (spontaneous volunteers in Fed-speak), you could be tasked to help deal with the dead.

When There is No Morgue

In long duration disasters where there may no longer be a government to deal with the dead and bodies will enter into the smelly and messy phases of decomposition before the government responds, I would use the International Red Cross Red Crescent document Managing Dead Bodies After Disasters: A Field Manual for First Responders. (Cordner, 2016) Download a copy for your Digital Survival Library and print a copy for your survival library.

I'm sure this is a problem that no one wants to deal with. We would rather that our first responders deal with them, and I would speak to an attorney about what is and isn't legal

before taking matters into your own hands. You could be charged with a combination of crimes for moving or disposing of a dead body. Law enforcement may consider the area a crime scene. It would be better to find whatever remnants of government emergency management exist, and volunteer with them, than to act on your own.

That said, I have researched numerous of both historical and modern examples where survivors have had to deal with dead bodies during survival ordeals.

In 2012, Salvador Alvarenga was captain of a 2-man longline fishing vessel from Costa Azul, Mexico when his motor was knocked out by a norteño (severe storm). First mate Ezequiel Córdoba died about four months into his 438-day ordeal adrift in the Pacific, drifting from Mexico to the Marshall Islands. Consistent with his interviews with Jonathan Franklin that resulted in Franklin's book 438 Days: An Extraordinary True Story of Survival at Sea, (Franklin, 2015) Mr. Alvarenga told me in an in-person interview about his experience having to bury Córdoba's body at sea. Several years after his survival ordeal, it was evident that it was still difficult to talk about. (Wikipedia, Jose Salvador Alvarenga, 2024)

Most survivalists are probably familiar with the story of Uruguayan Air Force Flight 571, chartered, by a ruby team, which crashed in the Andes in 1972. Hopefully you will not be reduced to anthropophagy, as were the Uruguayan survivors. (Wikipedia, Uruguayan Air Force Flight 571, 2024)

If you are involved in dealing with the dead, the IRCRC manual makes some good points:

The main goals are:

- To "promote the proper and dignified management of dead bodies" and
- to "facilitate their identification."

Recovery

- Create a Unique Number for Each Body
- Photograph and Record Data for Each Body as Soon as Possible
- Place Each Body in a Body Bag
- Arrange Temporary Storage

Most of the pressure will be from family members seeking to identify missing loved ones, linking the management of the dead to family reunification activities. A list of the missing must be created and information on the missing must be collected.

Families should make sure that they have current photos of loved ones and any identifying marks, jewelry or tattoos. If you have young children, save photos of them in the different clothing that they wear.

Health & Safety

The public often fear that numerous bodies will cause an epidemic, but the risk of infection for first responders and the general public is very low unless the dead resulted from a highly infectious disease such as Ebola, cholera, or Lassa fever. This perception can result in disrespectful mass burials that make it difficult to identify remains or the use of so-called disinfectants.

In most cases, the living are much more likely to spread disease than the dead. Victims of natural disasters usually die from trauma or drowning. Take precautions such as wearing PPE (work boots, work clothes, waterproof gloves, apron, masks, eye protection) and wash hands with soap and water to protect against body fluids and bloodborne illnesses such as hepatitis and HIV after handling the dead and before eating. They also should not touch dead bodies and then touch their

face, eyes or mouth. While most pathogens will not survive longer than 48 hours after death, there are exceptions such as Ebola and HIV.

The main risk posed by dead bodies to the public is the potential contamination of drinking water by fecal material, although this risk has not been measured and documented.

Body handlers are usually at greater risk of injury by debris during extraction, lifting injuries, falls or psychological injury, than from infection.

The recovery of bodies from confined, unventilated spaces should be approached with a commensurate degree of caution.

Untrained personnel should not handle the dead if deaths were caused by highly infectious disease.

Allocating Unique Codes to Bodies in Mass Casualty Incidents

Two sets of waterproof labels (or paper protected by plastic bags) should be created for recovery and temporary storage. One should be affixed to the ankle or wrist and one to the outside of the container or body bag. The number should reflect the location where the body was found, the team that recovered the body, and a unique number.

This code should be affixed to all evidence and photos. Photos should be taken of the full-length view of the body, a frontal view of the face, birthmarks, scars, obvious deformities, and any identifying marks, tattoos or jewelry. If possible, photos should include a scale. If there is time, take photos of the upper and lower halves of the body, a side view of the face, and any personal belongings.

The record should record the sex, approximate age range, obvious marks, personal belongings, color and length of hair,

height, and any obvious dental features. Belongings should be left of the body or in pockets where they were found, and clothing should be left on the body.

The chain of custody of the bodies must be recorded if handed off for temporary storage, burial, etc.

Burial

The burial site must be carefully selected. It must be easily located and acceptable to those living nearby. Customs and wishes of the community should be respected. The site should be clearly marked and surrounded on all sides by a 10m buffer to allow the planting of trees. Consideration should be given to the soil type and highest water table level. Dry and alkaline soil conditions prevent DNA degradation. The site should be at least 30m from springs or water courses and 200m from wells or drinking water sources.

Do not use biodegradable body bags, lime or other chemical products. If possible, human remains should be buried in marked, individual graves between 1.5 and 3m deep. Single graves should be at least 1.5m above the highest water table level. For communal graves, the water table must be at least 2.5m deep and the grave must be at least 0.7m above the highest water table level. The exact location of the burial must be recorded. If possible, GPS coordinates should be included.

The body bag or coffin should be marked with a waterproof label. Where possible, graves should be marked and labeled with concrete too thick to be easily moved or vandalized.

Dealing with Death

For dealing with death, each culture and religion has customs and rituals that can often comfort the living. Most survivalists should also have a copy of the book, Where There is no Doctor (Werner, 1992), and can find a decent entry on dealing with death in the back.

I hope you do not end up needing this info, but it's better to have and not need it than to need it and not have it.

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