



JOHNSON COUNTY

Medical Examiner Department
Marcus Nashelsky, M.D., Medical Examiner
Michael Hensch, Administrator

Autopsy Report Request

Please complete this form and mail or email to the following address:

Johnson County Medical Examiner Department
913 S. Dubuque Street
Iowa City, IA 52240
JCME@co.johnson.ia.us

Name of Decedent:

Date of Death:

Requestor's Information*

Full Name:

Relationship to the Decedent**:

Telephone Number:

Mailing Address:

Email Address:

(For law enforcement requests only)

Date of Request:

Signature of Person
Completing this Form:

*Iowa Code § 22.7(41)

**The person/class of persons which come first in the following list is authorized to receive an autopsy report as immediate next of kin:

1. The surviving spouse of the decedent, if not legally divorced from the decedent, or if there is no surviving spouse:
2. A child or children of the decedent, or if there is no surviving spouse and no surviving children:
3. A parent of the decedent, or if there is no surviving spouse, child, or parent:
4. A sibling of the decedent, or if there is no surviving spouse, child, parent, or sibling:
5. A grandparent of the decedent, or if there is no surviving spouse, child, parent, sibling, or grandparent:
6. A grandchild of the decedent.