PLEASE NOTE

This document, prepared by the Legislative Counsel Office, is an office consolidation of this regulation, current to August 25, 2007. It is intended for information and reference purposes only.

This document is not the official version of these regulations. The regulations and the amendments printed in the Royal Gazette should be consulted to determine the authoritative text of these regulations.

For more information concerning the history of these regulations, please see the Table of Regulations.

If you find any errors or omissions in this consolidation, please contact:

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CHAPTER C-25.1
CORONERS ACT
REGULATIONS

Pursuant to section 56 of the Coroners Act R.S.P.E.I. 1988, Cap. C-25.1, Council made the following regulations:


2. The remuneration payable to a coroner
   (a) for performing his or her duties under the Act,
      (i) between the hours of 8:00 a.m. and 12 midnight, is $100 per hour, and
      (ii) between the hours of 12 midnight and 8:00 a.m., is $150 per hour;
   (b) for arranging an autopsy and interpreting the results, is $150;
   (c) for preparing and submitting any report required under the Act, is $50. (EC489/07)

3. The remuneration payable to a pathologist
   (a) for preparing and reporting the results of a post-mortem examination is $436; and
   (b) for preparing and reporting the results of a forensic post-mortem examination is $555. (EC489/07)

4. The remuneration payable to a witness summoned by a coroner to give evidence at an inquest is,
   (a) in the case of a witness other than one referred to in clause (b) or (c), $25 per half day;
   (b) in the case of a witness who is a pathologist or medical practitioner, $150 per half day; and
   (b) in the case of a witness who is a professional person, other than a person mentioned in clause (b), $100 per half day. (EC489/07)

5. The travel allowance payable to a witness who attends an inquest is,
   (a) where the witness resides within the city or town in which the inquest is held, $3 per day;
   (b) where the witness resides outside the city or town where the inquest is held, 24 cents per kilometre each way between his or her residence and the place of the inquest; and
   (c) where the witness resides outside the Province of Prince Edward Island and is required to attend an inquest in Prince Edward Island,
the minimum return airfare plus reasonable living expenses. (EC489/07)

6. The remuneration payable to an interpreter at an inquest is $50 per half day. (EC489/07)

7. The remuneration and allowances payable to jurors at an inquest shall be the same as those paid to jurors under the *Jury Act* R.S.P.E.I. 1988, Cap. J-5.1. (EC489/07)

8. The Minister may authorize any further fees and allowances that the Minister considers reasonable respecting services required and provided in the administration of the Act. (EC489/07)

9. (1) A warrant to take possession of a body pursuant to clause 6(1)(a) of the Act shall be in Form 1 of the Schedule.

   (2) A warrant pursuant to subsection 10(1) of the Act requiring a post-mortem examination shall be in Form 2 of the Schedule.

   (3) A report of a post-mortem examination pursuant to subsection 10(3) of the Act shall be in Form 3 of the Schedule.

   (4) An order to disinter a body pursuant to section 11 of the Act shall be in Form 4 of the Schedule.

   (5) A certificate of a coroner releasing a body pursuant to subsection 14(2) of the Act shall be in Form 5 of the Schedule.

   (6) A certificate of a coroner releasing a body pursuant to subsection 14(4) of the Act shall be in Form 6 of the Schedule.

   (7) A report of a coroner pursuant to clause 15(1)(a) of the Act shall be in Form 7 of the Schedule.

   (8) An order directing an inquest pursuant to section 19 of the Act shall be in Form 8 of the Schedule.

   (9) A summons to an inquest witness pursuant to subsection 38(1) of the Act shall be in Form 9 of the Schedule.

   (10) An order to a witness pursuant to subsection 38(3) of the Act who is confined to a place mentioned in clause 5(1)(h) of the Act shall be in Form 10 of the Schedule.

   (11) A jury report prepared pursuant to section 49 of the Act shall be in Form 11 of the Schedule. (EC489/07)
SCHEDULE

FORM 1

Warrant to Take Possession of a Body
(Clause 6(1)(a))

I, ……………………………, a Coroner for Prince Edward Island have reason to believe that ………………….. died under circumstances that require investigation, and I issue this warrant to take possession of the body to conduct an investigation into the circumstances surrounding the death and the manner and cause of death of …………………………….

DATED this …………….day of …………………………, 20….

……………………………………
A Coroner for Prince Edward Island

(EC489/07)
FORM 2

Warrant for a Post-Mortem Examination
(Subsection 10(1))

To ………………………………, a pathologist.

I, ………………………, a Coroner for Prince Edward Island, direct you
to make a post-mortem examination on the body of ……………………
and the following special examinations or analyses be made by you
and/or designate.

Toxicology:

☐ Blood for Ethyl alcohol

☐ Drug Screen

☐ Other (specify): .................................................................

The body is identified at the time of autopsy by ………………………

Case history and circumstances of death (including request for any
specific evaluation at autopsy in addition to opinion re: cause of death)

<table>
<thead>
<tr>
<th>Age</th>
<th>Date and Time of Death (may be estimated only)</th>
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Authorities concerned at this time:

☐ Coroner

☐ City or Town Police

☐ R.C.M.P.

☐ Hospital Chart (Specify)

☐ Other

Please telephone verbal report of findings, immediately following
completion of the gross examination, to me at:

☐ Office……………………………☐ Other……………………

DATED this ……………day of ……………………, 20…..

………………………………………………………………………………

A Coroner for Prince Edward Island

(EC489/07)
FORM 3

Report of the Post-Mortem Examination
(Subsection 10(3))

Made upon the body of …………………………………………………
Lab. No. ……………………………………………………………………..
Identified to me by …………………………………Time …………….
In the presence of ………………………………………………………….
Sex ……… about the age of …… at …………………….. Prince Edward
Island, on the ….day of ……………., 20…. about … hours after death.
Time autopsy commenced ………………………………………………..
Remarks (clothing, etc.) …………………………………………………..
Length of body ……… weight …………. how nourished ………………
1. Peculiarities of
   (a) Hair ……………………………………………………………...
   (b) Teeth ……………………………………………………………
   (c) Eyes (pupil, colour, etc.) ………………………………………
   (d) Skin (cyanosis, eruptions, scars) ……………………………
2. Rigor mortis
3. Post mortem staining
4. Decomposition
5. External marks of violence

   Internal Examination

   Chest
6. Diaphragm
7. Pericardium
8. Heart
   (a) Weight
   (b) Right side
   (c) Left side
   (d) Valves
   (e) Myocardium
   (f) Coronary arteries
9. Aorta and large vessels
10. Character of blood in heart and blood vessels
11. Pleura
   (a) Right
   (b) Left
12. Lungs

   Abdomen
13. Peritoneum, etc.
14. Stomach and contents
15. Intestines
16. Pancreas
17. Liver
18. Gall bladder
19. Lymph nodes
20. Spleen
21. Adrenals
22. Kidneys and ureters
23. Bladder and contents
24. Prostate
25. Urethra
26. Testes
27. Uterus
28. Tubes and ovaries

Head and Neck .................................................................
Mediastinal Structures ....................................................
Brain .............................................................................
Osseous System ............................................................
Alcohol Reaction ............................................................
Additional Examinations ..................................................

I hereby certify that I have examined this body and have opened and
examined the above-mentioned organs as indicated and that in my
opinion the cause of death was: ..............................................

...................................................................................

Pathologist .....................................................................

Where more space is required on which to describe in detail important
conditions, such description may be written on a separate sheet of paper
to be attached thereto.
Give the number of the section referred to: ..............................

DATED this ............day of ................................., 20...
(EC489/07)
FORM 4

Order for Disinterment
(Section 11)

To, …………………………., spouse or next of kin of ……………………,

who died at …………………………………., on the ………… day of ……………………..20…., and is buried or stored at ……………………

And to, ……………………………., the owner or person in charge of the place of burial or storage.

I, ……………………………., Chief Coroner for Prince Edward Island being of the opinion that disinterment is necessary for the purposes of investigation or inquest, do hereby order the disinterment of the said ……………………………….

DATED this …………….day of …………………………, 20….

………………………………………….
Chief Coroner for Prince Edward Island

(EC489/07)
FORM 5

Certificate of a Coroner Releasing a Body
(Subsection 14(2))

I, ........................................, a Coroner for Prince Edward Island have
examined the Medical Certificate of Death of ........................................,
late of .........................., who was born on the ......day of ............
20...., and I release the body for burial, cremation or transport.

DATED this .............day of ................................., 20....

................................................
A Coroner for Prince Edward Island

(EC489/07)
FORM 6

Certificate of a Coroner Releasing a Body that was
Brought into the Province
(Subsection 14(4))

I, ………………………….., a Coroner for Prince Edward Island have
inspected the Medical Certificate of Death or other documents that
accompanied the body of …………………………………. that was
brought into the Province of Prince Edward Island, and have made such
investigation that was necessary to establish or confirm the cause of
death and release the body for burial or cremation.

DATED this ……………day of …………………………, 20….

……………………………………
A Coroner for Prince Edward Island

(EC489/07)
FORM 7

Report of Coroner when Inquest not Necessary
(Clause 15(1)(a))

I, ................................., a Coroner for Prince Edward Island,
residing at .......................... Prince Edward Island report that,
after an investigation by me, I am of the opinion that ......................
.......................... (date of birth:....................... ) of .................
in ............................... came to his/her ................... death on the
...... day of ...................... ...................... at ......................
of .................................................. by the following means:

Medical Cause of Death: ..................................................
.................................................................

Manner of Death:
.................................................................
(Natural, Accidental, Suicide, Homicide or Undetermined)

Circumstances: ..........................................................
.................................................................
.................................................................

After this investigation I am of the opinion that an inquest is not
necessary and I have completed the required Registration of Death and
have permitted the disposition of the body of ..........................

DATED this ..........day of .........................., 20....

.................................................................

A Coroner for Prince Edward Island

(EC489/07)
FORM 8

Order Directing Inquest
(Section 19)

I, ………………………….., Attorney General for Prince Edward Island, pursuant to the power vested in me by the Coroners Act direct ………………………….. of ………………………… Prince Edward Island the Chief Coroner or a Coroner for Prince Edward Island, to hold an inquest pursuant to the Coroners Act into the death of ………………………….., late of ………………………….., who died at …………………….. Prince Edward Island the ………… day of ………………………, 20….

DATED at Charlottetown, Prince Edward Island ………. day of …………………….., 20…. ……………………………………………

Attorney General for Prince Edward Island

(EC489/07)
FORM 9

Summons to Inquest Witness
(Subsection 38(1))

To …………………………………………………………………………

You are summoned to appear before me on …………… the ………. day

of ……………………………………………....., 20…., at ……… a.m./p.m.

at ……………………………………. Prince Edward Island to

give evidence at the inquest into the death of ……………………………

DATED this …………….day of …………………………, 20….

Please bring with you all records and documents in your

control relating to the death of

…………………………………………………………...

……………………………………

A Coroner for Prince Edward Island

(EC489/07)
FORM 10

Order Requiring Attendance of a Confined Witness
(Subsection 38(3))

To …………………………………………………………………………

WHEREAS …………………………………… is required as a witness
to attend an inquest into the death of ………………………………
to be held on the ………. day of ……………., 20…., at …………………
Prince Edward Island commencing at …………………………………

WHEREAS I am informed that ……………………………… is confined
at …………………………………………………………………………..

I THEREFORE DIRECT you to deliver him/her to a peace officer so that
he/she may be brought before the presiding Coroner to testify at the
inquest.

I FURTHER DIRECT the peace officer to whom custody of the said
……………………………….. is given to provide for safe keeping to
him/her and to have him/her available as a witness at the inquest into the
death of ………………………………. at the time and place stated, and
to return him/her to the custody of ………………………………………
at …………………………………….. after he/she is no longer required
as a witness.

DATED this ….day of ………………., 20…., at …………………
Prince Edward Island

…………………………………………
A Coroner for Prince Edward Island

(EC489/07)
FORM 11

Jury Report
(Section 49)

We, (Please Print)

……………………………..……. of …………………………………….
……………………………..……. of …………………………………….
……………………………..……. of …………………………………….
……………………………..……. of …………………………………….
……………………………..……. of …………………………………….
……………………………..……. of …………………………………….

have been sworn as the jury to inquire into the death of a person identified as …………………………., at an inquest held at …………., ……………………………., Prince Edward Island on the ………. day of ……………………………………, 20…. determined the following:

1. Name of deceased: ……………………………………………………
2. Date and time of death: ………………………………………………..
3. Place of death: ………………………………………………………...
4. Cause of death ………………………………………………………...
5. By what means: ……………………………………………………….

In the interest of avoiding similar deaths in the future we recommend the following:
……………………………………………………………………………..
……………………………………………………………………………..
……………………………………………………………………………..
……………………………………………………………………………..

(Signature of Jury Member)                                      (Signature of Jury Member)

……………………………..…….    …………………………………….
……………………………..…….    …………………………………….
……………………………..…….    …………………………………….

This report was received by me this ……… day of …………………., 20….  

…………………………………………………………
A Coroner for Prince Edward Island

(EC489/07)