

(II) BY THE CLOSE OF BUSINESS OF THE NEXT WORKING DAY THAT IS NOT A SATURDAY, SUNDAY, OR STATE HOLIDAY TO:

1. THE DIRECTOR;
2. THE HEALTH OFFICER IN THE JURISDICTION WHERE THE DEATH OCCURRED; AND
3. THE DESIGNATED STATE PROTECTION AND ADVOCACY SYSTEM.

~~(IV) THE DESIGNATED STATE PROTECTION AND ADVOCACY SYSTEM.~~

(2) AN INITIAL REPORT:

(I) MAY BE:

1. ORAL IF FOLLOWED BY A WRITTEN REPORT WITHIN 5 WORKING DAYS FROM THE DATE OF THE DEATH; OR

2. WRITTEN; AND

~~(II) IF ORAL, SHALL BE FOLLOWED WITH A WRITTEN REPORT WITHIN 5 WORKING DAYS FROM THE DEATH;~~

~~(H) (HH) (II) SHALL CONTAIN AS MUCH THE FOLLOWING RELEVANT INFORMATION: CONCERNING THE DEATH AS THE ADMINISTRATIVE HEAD OF THE FACILITY IS ABLE TO PROVIDE.~~

1. THE NAME, AGE, AND SEX OF THE DECEASED;
2. THE TIME OF DISCOVERY OF THE DEATH;
3. THE DECEASED'S PLACE OF RESIDENCE AT THE TIME OF DEATH;
4. IF THE DEATH OCCURRED IN A PLACE OTHER THAN THE RESIDENCE OF THE DECEASED, THE LOCATION OF THE BODY AT THE TIME OF DISCOVERY;
5. THE ROOM OR PLACE WHERE THE BODY WAS FOUND;
6. THE NAME OF THE PERSON WHO TOOK CUSTODY OF THE BODY;
7. IF KNOWN, THE IDENTITY OF THE PARTY OR PARTIES THE NAME OF THE PERSON EVALUATING THE DEATH, IF KNOWN;
8. IF KNOWN, WHETHER OR NOT AN AUTOPSY IS BEING PERFORMED, IF KNOWN; AND
9. IF KNOWN, THE NAME, ADDRESS, AND