

# INSPECTION REPORT

## DIRECT DISPOSITION ESTABLISHMENT

Pursuant to Section 61-32-8.A NMSA 1978 of the Thanatopractice Act, and the Rules (16.64.1 through 16.64.12 NMAC), the Board and its agents shall conduct inspections to ensure compliance with State Law and Rules.

The Inspector is authorized, during regular business hours (8:00a.m. through 5:00p.m., excluding 12:00p.m. through 1:00p.m.) or through prior arrangement, (prior arrangements for new or change of location of establishments and crematories only) to inspect establishments and crematories, including all records, financial or otherwise. Acceptance of a license shall include permission for the Board, or its designees, to enter the premises without legal process and to inspect the establishment or crematory, including all records, financial and otherwise.

### SECTION A – ESTABLISHMENT INFORMATION

NAME OF ESTABLISHMENT		LICENSE NO.
PHYSICAL ADDRESS	CITY/TOWN	
LICENSEE IN CHARGE		PHONE NO.

### SECTION B – TYPE OF INSPECTION

Type of Inspection	Statutory/Regulatory Authority
<input type="checkbox"/> New Establishment	(16.64.4.8 NMAC and 16.64.4.9 NMAC)
<input type="checkbox"/> Yearly Inspection	(Section 61-32-8; 16.64.4.8 NMAC and 16.64.4.9 NMAC)
<input type="checkbox"/> Change(s) of Establishment*	(6.64.4.11NMAC)
<input type="checkbox"/> Re-Inspection	(16.64.4.11.E NMAC) (Refer to Non-Compliance Report)

Date Last Inspected:    /    /   

\*Date Change(s) Approved by the Board:    /    /   

\*Outline Change(s):

### SECTION C – LICENSED PERSONNEL not applicable if New Establishment

**61-32-12.B of the Thanatopractice Act requires that a license issued by the board shall at all times be posted in the establishment in a conspicuous place.**

**Non-Health Related Non-Compliance – If records do not support that licenses are posted in a conspicuous place the result will be a Non-Health Related Non-Compliance. (Include the non-compliance Section letter/number in Section H).**

NAME	LICENSE NUMBER	LICENSE POSTED (Mark Appropriate Box)	
	DD	YES	NO
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

LICENSES POSTED IN A CENTRAL, CONSPICIOUS LOCATION  YES  NO

NOTATIONS:

Revised: 10/02

## ATTACHMENT C-4

## SECTION D – ESTABLISHMENT BUILDING/SUPPLIES AND EQUIPMENT

Mark the "Yes" box if the requirement as been met. Mark the "No" box if the requirement has not been met.			
<b>Section D1</b>		<b>16.64.4.8 of the Board's Rules provides that the following requirements pertain to all establishments; where applicable, documentation shall be made available for inspection:</b>	
<b>Yes</b>	<b>No</b>	<b>NA</b>	<b>Non-Health</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Applicable if New Establishment.</i> Establishment has <i>not</i> started advertising and/or operating, including posting identification visible from the street identifying the name of the establishment
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Not applicable if New Establishment.</i> There shall be some identification visible from the street identifying the name of the Establishment as licensed by the board
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Applicable if Change of Name.</i> Establishment has not started advertising including posting identification visible from the street identifying the name of the establishment
<input type="checkbox"/>	<input type="checkbox"/>	All advertising, signs, listings, newspaper notices, as well as all stationery, business cards, etc., of the establishment licensed by the board shall include the name of the establishment exactly as licensed by the board	
<input type="checkbox"/>	<input type="checkbox"/>	The building in which the establishment is located shall be in conformity with the requirements of the applicable state and local statutes, rules, ordinances and zoning provisions, of good appearance and devoted primarily to the purpose for which it is licensed. Current business license is posted	
<input type="checkbox"/>	<input type="checkbox"/>	The site and any rooms or areas within the structure thereon, and the use thereof, shall conform to all applicable state and local statutes, rules, ordinances and zoning provisions, of good appearance and devoted primarily to the purpose for which it is licensed	
<b>Section D2</b>		<b>16.64.4.9.C(2) of the Board's Rules provides that the following requirements pertain to all direct disposition establishments:</b>	
<b>Yes</b>	<b>No</b>	<b>Non-Health</b>	
<input type="checkbox"/>	<input type="checkbox"/>	<i>Office</i> is entirely enclosed by flooring, walls, and ceiling, except for proper ventilation and entrances and exits having doors, and which is totally separate from the room where bodies are sheltered except for entrances and exits having doors	
<b>Section D3</b>		<b>16.64.4.9.C of the Board's Rules provides that each direct disposition establishment shall have and maintain a room for sheltering dead human bodies; where applicable, documentation shall be made available for inspection:</b>	
<b>Yes</b>	<b>No</b>	<b>Health</b>	
<input type="checkbox"/>	<input type="checkbox"/>	Refrigeration unit thermodynamically controlled with a minimum storage area of twelve and one-half (12.5) cubic feet per body and temperature measures 40 degrees (in good working condition)	
<input type="checkbox"/>	<input type="checkbox"/>	Doors closed at all times with a sign which states "employees only" or other similar sign	
<input type="checkbox"/>	<input type="checkbox"/>	Entirely enclosed by flooring, walls and ceiling, except for proper ventilation and entrances/exits having doors	
<input type="checkbox"/>	<input type="checkbox"/>	Equipped with a sanitary flooring of tile or other suitable hard, impervious surface	
<input type="checkbox"/>	<input type="checkbox"/>	Equipped with necessary floor drainage (necessary = as required by OSHA)	
<input type="checkbox"/>	<input type="checkbox"/>	Clean and in sanitary condition	
<input type="checkbox"/>	<input type="checkbox"/>	Equipped with necessary ventilation (necessary = as required by OSHA)	
<input type="checkbox"/>	<input type="checkbox"/>	Sink with running hot and cold water	
<input type="checkbox"/>	<input type="checkbox"/>	Free of blood or other matter on floors, counters, equipment, etc.	
<input type="checkbox"/>	<input type="checkbox"/>	Stained sheets/garments receptacle labeled "infectious waste" (as required by OSHA)	
<input type="checkbox"/>	<input type="checkbox"/>	Infectious waste receptacle labeled "infectious waste" (as required by OSHA)	
<input type="checkbox"/>	<input type="checkbox"/>	Sharps container (as required by OSHA)	
<input type="checkbox"/>	<input type="checkbox"/>	Record of regular removal of infectious waste by an authorized company	
<input type="checkbox"/>	<input type="checkbox"/>	Heavy duty rubber gloves	
<input type="checkbox"/>	<input type="checkbox"/>	Protective gear – smock or gown, face shield, head and shoe covers	
<b>Yes</b>	<b>No</b>	<b>Non-Health</b>	
<input type="checkbox"/>	<input type="checkbox"/>	Equipped with necessary lighting (necessary = as required by OSHA)	
<input type="checkbox"/>	<input type="checkbox"/>	Used only for sheltering of dead human bodies	
<input type="checkbox"/>	<input type="checkbox"/>	Enclosed vehicle with cot for transportation of dead human bodies for final disposition	

Section D4		16.64.4.9.C(3) of the Board's Rules provides that each direct disposition establishment have and maintain a casket display room, only if the establishment sells funeral merchandise and/or a range of models; where applicable, documentation shall be made available for inspection:  (Photographs/catalog may not substitute for the requirements outlined in this section.)		
Yes	No	Non-Health		
<input type="checkbox"/>	<input type="checkbox"/>	<i>Not applicable</i> establishment does not contain burial caskets or a range of models, skip the rest of the Section D4		
<input type="checkbox"/>	<input type="checkbox"/>	<i>Applicable if New Establishment or Change of Ownership licensed after 09/15/01. Casket Display Room is a minimum of four hundred fifty (450) square feet in size</i>		
<input type="checkbox"/>	<input type="checkbox"/>	Room is used only for the display of burial caskets		
		YES	NO	N/A
		FULL SIZE CASKET DISPLAY OR MODULAR CASKET DISPLAY		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		A minimum of twelve (12) adult burial caskets in a range of models and prices, <b>OR</b>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		A minimum of twelve (12) modular caskets in a range of models and prices, <b>AND</b>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		A minimum of twelve (12) adult burial caskets in a range of models and prices are available and warehoused within 50 miles of the establishment		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Prices are clearly marked and match the general price list		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Models are clearly marked		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Room is adequately illuminated		
NOTATIONS:				

**SECTION E – DOCUMENTS/CONTRACTS** (not applicable if New Establishment)

61-32-20 of the Thanatopractice Act requires that all dead human bodies not disposed of within twenty-four (24) hours after death, or release to the establishment, or receipt by the establishment shall be embalmed or stored under refrigeration.

16.64.4.12 of the Board's Rules requires all bodies which are refrigerated in lieu of, or prior to, embalming shall be stored at a temperature not to exceed forty (40) degrees Fahrenheit {five (5) degrees Celsius} and shall not be taken out of refrigeration until such time as the dead human body is being prepared to be embalmed, upon final disposition, or for identification purposes only not to exceed thirty (30) minutes.

16.64.1.11.A of the Board's Rules requires that all official documents and contracts of any establishment shall bear the signature of the arranger(s), where applicable, and the licensee signing the document or contract as the representative of the establishment, together with the licensee's license classification and license number, and the date the document or contract was signed by the arranger(s) and licensee.

16.64.1.11.B of the Board's Rules requires each establishment and crematory to maintain copies of all official documents and contracts for funeral, direct disposition, cremation, and any services rendered for services that fall within the scope of the license held pursuant to 61-32-1 et seq.

61-64.1.11.C of the Board's Rules requires each establishment to maintain documentation with dates and times of all services rendered by the establishment, or on behalf of the establishment by the crematory or other subcontractors, up to and including final disposition.

Auditing of records/documents is done to ensure compliance with the above referenced citation(s); therefore documentation supporting compliance needs to be properly documented and in place for each file audited. Four (4) out of six (6) files audited must have the required documentation and information as required herein to receive a compliance.

**Health Related Non-Compliance** – If records do not support that the dead human remains were refrigerated, embalmed, cremated or interred within 24 hours after death, or release to the establishment, or receipt by the establishment the result will be a Health Related Non-Compliance.

**Non-Health Related Non-Compliance** – If documentation is incomplete or lacking for any item cited in the Thanatopractice Act and/or Rules (citation referenced in parenthesis) the result will be a Non-Health Related Non-Compliance.

Mark the "Yes" box if the requirement as been met. Mark the "No" box if the requirement has not been met, and where applicable, enter the date and time.

<b>Section E1</b>		<b>Type of Disposition:</b> (Check all services rendered)		<input type="checkbox"/> Burial With Embalming* <input type="checkbox"/> Burial Without Embalming <input type="checkbox"/> Cremation	<input type="checkbox"/> Forwarding (Transport) <input type="checkbox"/> Other (Specify)
*Licensed Funeral/Commercial Establishment that embalmed the dead human remains:					
Establishment Name: _____					
*Place of Disposition that required the dead human remains to be embalmed:					
Name: _____					
<b>NAME OF DECEASED:</b>				<b>DOD:</b>	<b>TOD:</b>
<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Date</b>	<b>Time</b>	
					Date and time dead human remains were released to the establishment or received by the establishment
		<input type="checkbox"/>			Date and time dead human remains were placed in refrigeration
		<input type="checkbox"/>			Date and time dead human remains were removed from refrigeration for embalming, cremation or interment
		<input type="checkbox"/>			Date and time dead human remains were embalmed
		<input type="checkbox"/>			Date and time dead human remains were released to the crematory or received by the crematory for cremation
		<input type="checkbox"/>			Date and time dead human remains were interred
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Records support that the dead human remains were refrigerated, embalmed, cremated or interred within 24 hours after death, or release to the establishment, or receipt by the establishment.		
<b>Non-Health</b>					
<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Date</b>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Contract is complete, signed by the arranger and licensee and includes the licensee's classification and license number; <b>OR</b> (16.64.1.11.A)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Contract is a pre-need, and is signed by the arranger	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Contract and/or general price list states that embalming is not required by state law	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		If dead human remains were embalmed, there is documentation from the place of disposition requiring that the dead human remains be embalmed prior to interment and date and authorization to embalm which supports that authorization was given prior to embalming (16.64.1.11.B)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Embalming case report is complete, and includes licensee's classification and license number (16.64.1.11.A) (16.64.1.11.B(5)) (16.64.1.11.C)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		There is documentation of date and authorization to cremate (16.64.1.11.B(6)) (16.64.10.8.A(1))	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		There is documentation of date and authorization to cremate given by the office of the medical investigator (16.64.1.11.B(3)) (16.64.10.8.A(2))	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		There is documentation of date cremated remains were given/sent to the authorizing agent(s) (16.64.1.11.C)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Documentation states unclaimed cremated remains may be disposed of after one (1) year in a lawful manner (16.64.10.8.M)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Records support that all authorizations were received <b>prior</b> to services being rendered (16.64.1.11.B(2)) (16.64.1.11.C)	
<b>Yes</b>	<b>No</b>	There is documentation on file supporting that the following disclosures were provided to the arranger(s):			
<input type="checkbox"/>	<input type="checkbox"/>	That prior to interment, entombment, or final disposition of a dead human body or cremains, the direct disposer cannot participate in any rites or ceremonies in connection with the final disposition of the remains			
<input type="checkbox"/>	<input type="checkbox"/>	That prior to interment, entombment, or final disposition of a dead human body or cremains, the direct disposer cannot provide facilities for rites or ceremonies in connection with the final disposition of the remains			
<input type="checkbox"/>	<input type="checkbox"/>	That a body cannot be embalmed unless embalming is required by the place of disposition, and then only by a person licensed to embalm			
<input type="checkbox"/>	<input type="checkbox"/>	That there can be no viewing of the body except for identification purpose only, not to exceed 30 minutes			
<input type="checkbox"/>	<input type="checkbox"/>	That the purchase of any funeral merchandise, and the price thereof, from the direct disposer, does not include any rites or ceremonies or other use of facilities not inherent to the direct disposition			
<input type="checkbox"/>	<input type="checkbox"/>	That a direct disposer may transport, or cause transportation of, a dead human body to a place where services will be conducted with the body present, provided the direct disposer or his agent obtains a signed release from the person accepting the body, which person shall be the person having the right to control the disposition of the body, that person's agent, and the direct disposer or his agent cannot thereafter transport, or cause transportation of, the body to any place. Such signed release shall be kept on file at the direct disposition establishment for a period of not less than five (5) years			
<b>NOTATIONS:</b>					

<b>Section E2</b>		<b>Type of Disposition:</b> (Check all services rendered)		<input type="checkbox"/> Burial With Embalming* <input type="checkbox"/> Burial Without Embalming <input type="checkbox"/> Cremation	<input type="checkbox"/> Forwarding (Transport) <input type="checkbox"/> Other (Specify)
*Licensed Funeral/Commercial Establishment that embalmed the dead human remains:					
Establishment Name: _____					
*Place of Disposition that required the dead human remains to be embalmed:					
Name: _____					
<b>NAME OF DECEASED:</b>				<b>DOD:</b>	<b>TOD:</b>
<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Date</b>	<b>Time</b>	
					Date and time dead human remains were released to the establishment or received by the establishment
		<input type="checkbox"/>			Date and time dead human remains were placed in refrigeration
		<input type="checkbox"/>			Date and time dead human remains were removed from refrigeration for embalming, cremation or interment
		<input type="checkbox"/>			Date and time dead human remains were embalmed
		<input type="checkbox"/>			Date and time dead human remains were released to the crematory or received by the crematory for cremation
		<input type="checkbox"/>			Date and time dead human remains were interred
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Records support that the dead human remains were refrigerated, embalmed, cremated or interred within 24 hours after death, or release to the establishment, or receipt by the establishment.		
<b>Non-Health</b>					
<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Date</b>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Contract is complete, signed by the arranger and licensee and includes the licensee's classification and license number; <b>OR</b> (16.64.1.11.A)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Contract is a pre-need, and is signed by the arranger	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Contract and/or general price list states that embalming is not required by state law	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		If dead human remains were embalmed, there is documentation from the place of disposition requiring that the dead human remains be embalmed prior to interment and date and authorization to embalm which supports that authorization was given prior to embalming (16.64.1.11.B)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Embalming case report is complete, and includes licensee's classification and license number (16.64.1.11.A) (16.64.1.11.B(5)) (16.64.1.11.C)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		There is documentation of date and authorization to cremate (16.64.1.11.B(6)) (16.64.10.8.A(1))	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		There is documentation of date and authorization to cremate given by the office of the medical investigator (16.64.1.11.B(3)) (16.64.10.8.A(2))	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		There is documentation of date cremated remains were given/sent to the authorizing agent(s) (16.64.1.11.C)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Documentation states unclaimed cremated remains may be disposed of after one (1) year in a lawful manner (16.64.10.8.M)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Records support that all authorizations were received <b>prior</b> to services being rendered (16.64.1.11.B(2)) (16.64.1.11.C)	
<b>Yes</b>	<b>No</b>	There is documentation on file supporting that the following disclosures were provided to the arranger(s):			
<input type="checkbox"/>	<input type="checkbox"/>	That prior to interment, entombment, or final disposition of a dead human body or cremains, the direct disposer cannot participate in any rites or ceremonies in connection with the final disposition of the remains			
<input type="checkbox"/>	<input type="checkbox"/>	That prior to interment, entombment, or final disposition of a dead human body or cremains, the direct disposer cannot provide facilities for rites or ceremonies in connection with the final disposition of the remains			
<input type="checkbox"/>	<input type="checkbox"/>	That a body cannot be embalmed unless embalming is required by the place of disposition, and then only by a person licensed to embalm			
<input type="checkbox"/>	<input type="checkbox"/>	That there can be no viewing of the body except for identification purpose only, not to exceed 30 minutes			
<input type="checkbox"/>	<input type="checkbox"/>	That the purchase of any funeral merchandise, and the price thereof, from the direct disposer, does not include any rites or ceremonies or other use of facilities not inherent to the direct disposition			
<input type="checkbox"/>	<input type="checkbox"/>	That a direct disposer may transport, or cause transportation of, a dead human body to a place where services will be conducted with the body present, provided the direct disposer or his agent obtains a signed release from the person accepting the body, which person shall be the person having the right to control the disposition of the body, that person's agent, and the direct disposer or his agent cannot thereafter transport, or cause transportation of, the body to any place. Such signed release shall be kept on file at the direct disposition establishment for a period of not less than five (5) years			
<b>NOTATIONS:</b>					

<b>Section E3</b>		<b>Type of Disposition:</b> (Check all services rendered)		<input type="checkbox"/> Burial With Embalming* <input type="checkbox"/> Burial Without Embalming <input type="checkbox"/> Cremation	<input type="checkbox"/> Forwarding (Transport) <input type="checkbox"/> Other (Specify)
*Licensed Funeral/Commercial Establishment that embalmed the dead human remains:					
Establishment Name: _____					
*Place of Disposition that required the dead human remains to be embalmed:					
Name: _____					
<b>NAME OF DECEASED:</b>				<b>DOD:</b>	<b>TOD:</b>
<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Date</b>	<b>Time</b>	
					Date and time dead human remains were released to the establishment or received by the establishment
		<input type="checkbox"/>			Date and time dead human remains were placed in refrigeration
		<input type="checkbox"/>			Date and time dead human remains were removed from refrigeration for embalming, cremation or interment
		<input type="checkbox"/>			Date and time dead human remains were embalmed
		<input type="checkbox"/>			Date and time dead human remains were released to the crematory or received by the crematory for cremation
		<input type="checkbox"/>			Date and time dead human remains were interred
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Records support that the dead human remains were refrigerated, embalmed, cremated or interred within 24 hours after death, or release to the establishment, or receipt by the establishment.		
<b>Non-Health</b>					
<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Date</b>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Contract is complete, signed by the arranger and licensee and includes the licensee's classification and license number; <b>OR</b> (16.64.1.11.A)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Contract is a pre-need, and is signed by the arranger	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Contract and/or general price list states that embalming is not required by state law	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		If dead human remains were embalmed, there is documentation from the place of disposition requiring that the dead human remains be embalmed prior to interment and date and authorization to embalm which supports that authorization was given prior to embalming (16.64.1.11.B)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Embalming case report is complete, and includes licensee's classification and license number (16.64.1.11.A) (16.64.1.11.B(5)) (16.64.1.11.C) (16.64.1.11.B(6)) (16.64.10.8.A(1))	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		There is documentation of date and authorization to cremate (16.64.1.11.B(3)) (16.64.10.8.A(2))	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		There is documentation of date and authorization to cremate given by the office of the medical investigator (16.64.1.11.B(3)) (16.64.10.8.A(2))	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		There is documentation of date cremated remains were given/sent to the authorizing agent(s) (16.64.1.11.C)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Documentation states unclaimed cremated remains may be disposed of after one (1) year in a lawful manner (16.64.10.8.M)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Records support that all authorizations were received <b>prior</b> to services being rendered (16.64.1.11.B(2)) (16.64.1.11.C)	
<b>Yes</b>	<b>No</b>	There is documentation on file supporting that the following disclosures were provided to the arranger(s):			
<input type="checkbox"/>	<input type="checkbox"/>	That prior to interment, entombment, or final disposition of a dead human body or cremains, the direct disposer cannot participate in any rites or ceremonies in connection with the final disposition of the remains			
<input type="checkbox"/>	<input type="checkbox"/>	That prior to interment, entombment, or final disposition of a dead human body or cremains, the direct disposer cannot provide facilities for rites or ceremonies in connection with the final disposition of the remains			
<input type="checkbox"/>	<input type="checkbox"/>	That a body cannot be embalmed unless embalming is required by the place of disposition, and then only by a person licensed to embalm			
<input type="checkbox"/>	<input type="checkbox"/>	That there can be no viewing of the body except for identification purpose only, not to exceed 30 minutes			
<input type="checkbox"/>	<input type="checkbox"/>	That the purchase of any funeral merchandise, and the price thereof, from the direct disposer, does not include any rites or ceremonies or other use of facilities not inherent to the direct disposition			
<input type="checkbox"/>	<input type="checkbox"/>	That a direct disposer may transport, or cause transportation of, a dead human body to a place where services will be conducted with the body present, provided the direct disposer or his agent obtains a signed release from the person accepting the body, which person shall be the person having the right to control the disposition of the body, that person's agent, and the direct disposer or his agent cannot thereafter transport, or cause transportation of, the body to any place. Such signed release shall be kept on file at the direct disposition establishment for a period of not less than five (5) years			
<b>NOTATIONS:</b>					

<b>Section E4</b>	<b>Type of Disposition:</b> (Check all services rendered)	<input type="checkbox"/> Burial With Embalming*	<input type="checkbox"/> Forwarding (Transport)
		<input type="checkbox"/> Burial Without Embalming	<input type="checkbox"/> Other (Specify)
		<input type="checkbox"/> Cremation	<input type="checkbox"/>
	*Licensed Funeral/Commercial Establishment that embalmed the dead human remains: <b>Establishment Name:</b> _____		
*Place of Disposition that required the dead human remains to be embalmed: <b>Name:</b> _____			

<b>NAME OF DECEASED:</b>					<b>DOD:</b>	<b>TOD:</b>
<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Date</b>	<b>Time</b>		
					Date and time dead human remains were released to the establishment or received by the establishment	
	<input type="checkbox"/>				Date and time dead human remains were placed in refrigeration	
	<input type="checkbox"/>				Date and time dead human remains were removed from refrigeration for embalming, cremation or interment	
	<input type="checkbox"/>				Date and time dead human remains were embalmed	
	<input type="checkbox"/>				Date and time dead human remains were released to the crematory or received by the crematory for cremation	
	<input type="checkbox"/>				Date and time dead human remains were interred	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Records support that the dead human remains were refrigerated, embalmed, cremated or interred within 24 hours after death, or release to the establishment, or receipt by the establishment.			

<b>Non-Health</b>				
<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Date</b>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Contract is complete, signed by the arranger and licensee and includes the licensee's classification and license number; <b>OR</b> (16.64.1.11.A)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Contract is a pre-need, and is signed by the arranger
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Contract and/or general price list states that embalming is not required by state law
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		If dead human remains were embalmed, there is documentation from the place of disposition requiring that the dead human remains be embalmed prior to interment and date and authorization to embalm which supports that authorization was given prior to embalming (16.64.1.11.B)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Embalming case report is complete, and includes licensee's classification and license number (16.64.1.11.A) (16.64.1.11.B(5)) (16.64.1.11.C)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		There is documentation of date and authorization to cremate (16.64.1.11.B(6)) (16.64.10.8.A(1))
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		There is documentation of date and authorization to cremate given by the office of the medical investigator (16.64.1.11.B(3)) (16.64.10.8.A(2))
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		There is documentation of date cremated remains were given/sent to the authorizing agent(s) (16.64.1.11.C)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Documentation states unclaimed cremated remains may be disposed of after one (1) year in a lawful manner (16.64.10.8.M)
<input type="checkbox"/>	<input type="checkbox"/>			Records support that all authorizations were received <b>prior</b> to services being rendered (16.64.1.11.B(2)) (16.64.1.11.C)

<b>Yes</b>	<b>No</b>	<b>There is documentation on file supporting that the following disclosures were provided to the arranger(s):</b>
<input type="checkbox"/>	<input type="checkbox"/>	That prior to interment, entombment, or final disposition of a dead human body or cremains, the direct disposer cannot participate in any rites or ceremonies in connection with the final disposition of the remains
<input type="checkbox"/>	<input type="checkbox"/>	That prior to interment, entombment, or final disposition of a dead human body or cremains, the direct disposer cannot provide facilities for rites or ceremonies in connection with the final disposition of the remains
<input type="checkbox"/>	<input type="checkbox"/>	That a body cannot be embalmed unless embalming is required by the place of disposition, and then only by a person licensed to embalm
<input type="checkbox"/>	<input type="checkbox"/>	That there can be no viewing of the body except for identification purpose only, not to exceed 30 minutes
<input type="checkbox"/>	<input type="checkbox"/>	That the purchase of any funeral merchandise, and the price thereof, from the direct disposer, does not include any rites or ceremonies or other use of facilities not inherent to the direct disposition
<input type="checkbox"/>	<input type="checkbox"/>	That a direct disposer may transport, or cause transportation of, a dead human body to a place where services will be conducted with the body present, provided the direct disposer or his agent obtains a signed release from the person accepting the body, which person shall be the person having the right to control the disposition of the body, that person's agent, and the direct disposer or his agent cannot thereafter transport, or cause transportation of, the body to any place. Such signed release shall be kept on file at the direct disposition establishment for a period of not less than five (5) years

**NOTATIONS:**



<b>Section E5</b>		<b>Type of Disposition:</b> (Check all services rendered)		<input type="checkbox"/> Burial With Embalming* <input type="checkbox"/> Burial Without Embalming <input type="checkbox"/> Cremation	<input type="checkbox"/> Forwarding (Transport) <input type="checkbox"/> Other (Specify)
*Licensed Funeral/Commercial Establishment that embalmed the dead human remains: <b>Establishment Name:</b> _____ *Place of Disposition that required the dead human remains to be embalmed: <b>Name:</b> _____					
<b>NAME OF DECEASED:</b>				<b>DOD:</b>	<b>TOD:</b>
<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Date</b>	<b>Time</b>	
					Date and time dead human remains were released to the establishment or received by the establishment
		<input type="checkbox"/>			Date and time dead human remains were placed in refrigeration
		<input type="checkbox"/>			Date and time dead human remains were removed from refrigeration for embalming, cremation or interment
		<input type="checkbox"/>			Date and time dead human remains were embalmed
		<input type="checkbox"/>			Date and time dead human remains were released to the crematory or received by the crematory for cremation
		<input type="checkbox"/>			Date and time dead human remains were interred
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Records support that the dead human remains were refrigerated, embalmed, cremated or interred within 24 hours after death, or release to the establishment, or receipt by the establishment.		
<b>Non-Health</b>					
<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Date</b>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Contract is complete, signed by the arranger and licensee and includes the licensee's classification and license number; <b>OR</b> (16.64.1.11.A)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Contract is a pre-need, and is signed by the arranger	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Contract and/or general price list states that embalming is not required by state law	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		If dead human remains were embalmed, there is documentation from the place of disposition requiring that the dead human remains be embalmed prior to interment and date and authorization to embalm which supports that authorization was given prior to embalming (16.64.1.11.B)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Embalming case report is complete, and includes licensee's classification and license number (16.64.1.11.A) (16.64.1.11.B(5)) (16.64.1.11.C)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		There is documentation of date and authorization to cremate (16.64.1.11.B(6)) (16.64.10.8.A(1))	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		There is documentation of date and authorization to cremate given by the office of the medical investigator (16.64.1.11.B(3)) (16.64.10.8.A(2))	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		There is documentation of date cremated remains were given/sent to the authorizing agent(s) (16.64.1.11.C)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Documentation states unclaimed cremated remains may be disposed of after one (1) year in a lawful manner (16.64.10.8.M)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Records support that all authorizations were received <u>prior</u> to services being rendered (16.64.1.11.B(2)) (16.64.1.11.C)	
<b>Yes</b>	<b>No</b>	There is documentation on file supporting that the following disclosures were provided to the arranger(s):			
<input type="checkbox"/>	<input type="checkbox"/>	That prior to interment, entombment, or final disposition of a dead human body or cremains, the direct disposer cannot participate in any rites or ceremonies in connection with the final disposition of the remains			
<input type="checkbox"/>	<input type="checkbox"/>	That prior to interment, entombment, or final disposition of a dead human body or cremains, the direct disposer cannot provide facilities for rites or ceremonies in connection with the final disposition of the remains			
<input type="checkbox"/>	<input type="checkbox"/>	That a body cannot be embalmed unless embalming is required by the place of disposition, and then only by a person licensed to embalm			
<input type="checkbox"/>	<input type="checkbox"/>	That there can be no viewing of the body except for identification purpose only, not to exceed 30 minutes			
<input type="checkbox"/>	<input type="checkbox"/>	That the purchase of any funeral merchandise, and the price thereof, from the direct disposer, does not include any rites or ceremonies or other use of facilities not inherent to the direct disposition			
<input type="checkbox"/>	<input type="checkbox"/>	That a direct disposer may transport, or cause transportation of, a dead human body to a place where services will be conducted with the body present, provided the direct disposer or his agent obtains a signed release from the person accepting the body, which person shall be the person having the right to control the disposition of the body, that person's agent, and the direct disposer or his agent cannot thereafter transport, or cause transportation of, the body to any place. Such signed release shall be kept on file at the direct disposition establishment for a period of not less than five (5) years			
<b>NOTATIONS:</b>					

**SECTION F – IF THERE IS/ARE DEAD HUMAN BODIES** (not applicable if New Establishment)

61-32-20 of the Thanatopractice Act requires that all dead human bodies not disposed of within twenty-four (24) hours after death, or release to the establishment, or receipt by the establishment shall be embalmed or stored under refrigeration.

16.64.4.12 of the Board's Rules requires all bodies which are refrigerated in lieu of, or prior to, embalming shall be stored at a temperature not to exceed forty (40) degrees Fahrenheit {five (5) degrees Celsius} and shall not be taken out of refrigeration until such time as the dead human body is being prepared to be embalmed, upon final disposition, or for identification purposes only not to exceed thirty (30) minutes.

16.64.1.11.A of the Board's Rules requires that all official documents and contracts of any establishment shall bear the signature of the arranger(s), where applicable, and the licensee signing the document or contract as the representative of the establishment, together with the licensee's license classification and license number, and the date the document or contract was signed by the arranger(s) and licensee.

16.64.1.11.B of the Board's Rules requires each establishment and crematory to maintain copies of all official documents and contracts for funeral, direct disposition, cremation, and any services rendered for services that fall within the scope of the license held pursuant to 61-32-1 et seq.

61-64.1.11.C of the Board's Rules requires each establishment to maintain documentation with dates and times of all services rendered by the establishment, or on behalf of the establishment by the crematory or other subcontractors, up to and including final disposition.

Auditing of records/documents is done to ensure compliance with the above referenced citation(s); therefore documentation supporting compliance needs to be properly documented and in place for each file audited.

**Health Related Non-Compliance** – If records do not support that the dead human remains were refrigerated, embalmed, cremated or interred within 24 hours after death, or release to the establishment, or receipt by the establishment the result will be a Health Related Non-Compliance.

**Non-Health Related Non-Compliance** – If documentation is incomplete or lacking for any item cited in the Thanatopractice Act and/or Rules (citation referenced in parenthesis) the result will be a Non-Health Related Non-Compliance.

Mark the "Yes" box if the requirement as been met. Mark the "No" box if the requirement has not been met, and where applicable, enter the date and time.

Are there any dead human bodies at establishment? If yes, complete this Section. If no, skip this Section. Yes  No

**Section F1**

NAME OF DECEASED: \_\_\_\_\_ DOD: \_\_\_\_\_ TOD: \_\_\_\_\_

**HEALTH**

Applicable	Not Applicable	Date	Time	
				Date and time dead human remains were released to the establishment or received by the establishment
<input type="checkbox"/>	<input type="checkbox"/>			Dead human remains have <i>not</i> been refrigerated, <i>however</i> records support that the time between death, or the time of release to the establishment, or receipt by the establishment does not exceed 24 hours, <b>OR</b>
<input type="checkbox"/>	<input type="checkbox"/>			Dead human remains are refrigerated in a refrigeration unit that is thermodynamically controlled and temperature does not exceed 40 degrees, and records support that the dead human remains were refrigerated within 24 hours after death, or release to the establishment, or receipt by the establishment, <b>OR</b>
<input type="checkbox"/>	<input type="checkbox"/>			Dead human remains have been embalmed within 24 hours after death, or release to the establishment, or receipt by the establishment (copy of complete embalming case report and documentation from the place of disposition requiring that the dead human remains be embalmed is on file)
	<input type="checkbox"/>			Date and time dead human remains were placed in refrigeration
	<input type="checkbox"/>			Date and time dead human remains were removed from refrigeration for cremation or interment

NOTATIONS:

<b>Section F2</b>				
NAME OF DECEASED:			DOD:	TOD:
<b>HEALTH</b>				
Applicable	Not Applicable	Date	Time	
				Date and time dead human remains were released to the establishment or received by the establishment
<input type="checkbox"/>	<input type="checkbox"/>			Dead human remains have <i>not</i> been refrigerated, <i>however</i> records support that the time between death, or the time of release to the establishment, or receipt by the establishment does not exceed 24 hours, <i>OR</i>
<input type="checkbox"/>	<input type="checkbox"/>			Dead human remains are refrigerated in a refrigeration unit that is thermodynamically controlled and temperature does not exceed 40 degrees, and records support that the dead human remains were refrigerated within 24 hours after death, or release to the establishment, or receipt by the establishment, <i>OR</i>
<input type="checkbox"/>	<input type="checkbox"/>			Dead human remains have been embalmed within 24 hours after death, or release to the establishment, or receipt by the establishment (copy of complete embalming case report and documentation from the place of disposition requiring that the dead human remains be embalmed is on file)
	<input type="checkbox"/>			Date and time dead human remains were placed in refrigeration
	<input type="checkbox"/>			Date and time dead human remains were removed from refrigeration for cremation or interment
NOTATIONS:				

<b>Section F3</b>				
<b>NAME OF DECEASED:</b>			<b>DOD:</b>	<b>TOD:</b>
<b>HEALTH</b>				
<b>Applicable</b>	<b>Not Applicable</b>	<b>Date</b>	<b>Time</b>	
				Date and time dead human remains were released to the establishment or received by the establishment
<input type="checkbox"/>	<input type="checkbox"/>			Dead human remains have <i>not</i> been refrigerated, <i>however</i> records support that the time between death, or the time of release to the establishment, or receipt by the establishment does not exceed 24 hours, <b>OR</b>
<input type="checkbox"/>	<input type="checkbox"/>			Dead human remains are refrigerated in a refrigeration unit that is thermodynamically controlled and temperature does not exceed 40 degrees, and records support that the dead human remains were refrigerated within 24 hours after death, or release to the establishment, or receipt by the establishment, <b>OR</b>
<input type="checkbox"/>	<input type="checkbox"/>			Dead human remains have been embalmed within 24 hours after death, or release to the establishment, or receipt by the establishment (copy of complete embalming case report and documentation from the place of disposition requiring that the dead human remains be embalmed is on file)
	<input type="checkbox"/>			Date and time dead human remains were placed in refrigeration
	<input type="checkbox"/>			Date and time dead human remains were removed from refrigeration for cremation or interment
<b>NOTATIONS:</b>				

**SECTION G – NON-COMPLIANCES AND/OR OTHER NOTATIONS FROM LAST INSPECTION**

Include all HEALTH related non-compliance(s) from the LAST inspection here:

Include all NON-HEALTH related non-compliance(s) from the LAST inspection here:

Include all OTHER notations from the LAST inspection here:

**SECTION H – NON-COMPLIANCES AND/OR OTHER NOTATIONS FROM THIS INSPECTION**

Include all HEALTH related non-compliance(s) from THIS inspection here:

Include all NON-HEALTH related non-compliance(s) from THIS inspection here:

Include all OTHER notations from THIS inspection here:

**SECTION I – ACKNOWLEDGEMENT OF INSPECTION**

**DISCLAIMER:** Compliance with Board Rules on the date of this inspection DOES NOT resolve any pending matters (complaints, disciplinary, etc.) against any licensee listed on this report.

**INSPECTION NON-COMPLIANCE:** The Board may take disciplinary action against any licensee as set forth in Section 61-1-3 NMSA 1978 upon finding by that board that the licensee is guilty of 61-32-24.B(5) "violation of any of the provisions of the Thanatopractice Act or any rule or regulation of the board." 16.64.8 of the Thanatopractice Rules governs the Board's inspection/re-inspection requirements/procedures. Therefore any licensee who/that is notified of non-compliance of the Board's inspection requirements may request for a hearing pursuant to the Uniform Licensing Act 61-1-1 et seq. NMSA 1978 if he/she believes that the establishment was not in violation of the Board's inspection/re-inspection requirements/procedures which was the basis for the non-compliance.

**HEALTH RELATED NON-COMPLIANCE:** Failure to correct HEALTH related non-compliance(s) WITHIN 24 HOURS may result in disciplinary action against the licensee and/or establishment by the Board.

**NON-HEALTH RELATED NON-COMPLIANCE:** Failure to correct NON-HEALTH related non-compliance(s) WITHIN 30 DAYS of date of receipt of this inspection notice may result in disciplinary action against the licensee and/or establishment by the Board.

**THE PENALTY AND RE-INSPECTION FEES MUST BE PAID AS FOLLOWS:**

- None, establishment was found to be in compliance, or
- \$300.00 for the first non-compliance plus actual expenses, or
- \$500.00 for the second non-compliance plus actual expenses, resulting from the first non-compliance.

The Penalty and Re-Inspection Fees must be paid to the Board of Thanatopractice for ANY non-compliance(s) WITHIN 10 DAYS of date of receipt of notice of the fees to be paid.

This is to acknowledge that an inspection of the establishment was conducted on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, and a copy was made available to the establishment.

**ESTABLISHMENT REPRESENTATIVE:**

\_\_\_\_\_  
(PRINT)

\_\_\_\_\_  
(SIGNATURE)

**BOARD REPRESENTATIVE/INSPECTOR:**

\_\_\_\_\_  
(PRINT)

\_\_\_\_\_  
(SIGNATURE)