Los Angeles County Department of Medical Examiner-Coroner

2015 Annual Report



Los Angeles County Board of Supervisors



Hilda L. Solis Supervisor, First District

Mark Ridley-Thomas Supervisor, Second District

Sheila Kuehl Supervisor, Third District

Don Knabe Supervisor, Fourth District

Michael D. Antonovich Supervisor, Fifth District Editor's Note:

For the year 2015, Dr. Mark Fajardo was the Chief Medical Examiner-Coroner for the Los Angeles County Department of Medical Examiner-Coroner.

TABLE OF CONTENTS

Presentations	1
Forensic Medical Division	2
Forensic Sciences Laboratories Division	4
Operations Division	6
Administrative Services Division	9
Public Services Division	11
Population of Los Angeles County, 2005-2015	13
Number of Reported and Accepted Cases per Year, 2005-2015	14
Final Manner of Medical Examiner-Coroner Cases, 2005-2015	15
Death Rates per 100,000 Population, 2005-2015	16
Manner for Child Deaths (Ages under 18), 2005-2015	17
Statistics Required by National Association of Medical Examiners	18
Medical Examiner-Coroner Cases by Age	19
Medical Examiner-Coroner Cases by Gender	20
Medical Examiner-Coroner Cases by Race	21
Manner of Death by Month	22
Race Distribution for Each Manner	23
Manner Distribution for Each Age (Years) Group	24
Accidental Deaths	25
Transportation Accidents	26
Accidental Falls	27
Homicidal Deaths	28
Suicidal Deaths	29
Natural Deaths	30
Circulatory System Disease Among Natural Deaths	31
Nervous System Disease Among Natural Deaths	32
Infectious Diseases Among Natural Deaths	33
Neoplasms Among Natural Deaths	34
Alcohol Detected by Manner	35

DMEC 2015 Annual Report

Marijuana Detected by Manner	35
Cocaine Detected by Manner	36
Methamphetamine Detected by Manner	36
Heroin Detected by Manner	37
Phencyclidine Detected by Manner	37
Fentanyl Detected by Manner	38

PRESENTATIONS AND PUBLICATIONS

C Rogers, N Ellis, Quality Assurance of Autopsy Cultures, American Academy of Forensic Sciences, Orlando FL, February 2015.

B Elias, C Rogers, Suicidal Suffocation with Inert Gases, National Association of Medical Examiners, Charlotte NC, October 2015.

K-C Su, Court Experience and Interesting Forensic Cases, Institute of Forensic Medicine, Institute of Justice, Taipei, Taiwan, December 2015.

DC Astarita, LA Scheinin, L Sathyavagiswaran, Fat Transfer and Fatal Macroembolization, J. Forensic Sci. Mar;60(2):509-10 (2015).

P Talving, M Tadlock, K Chouliaras, M Kennedy, O Okoye, H Aksoy, E Karamanos, L Zheng, DJ Grabo, C Rogers, T Noguchi, K Inaba, D Demetriades, The Origin of Fatal Pulmonary Emboli: A Post Mortem Analysis of 500 Deaths From Pulmonary Embolism in Trauma, Surgical and Medical Patients, Am J Surg. Jun;209(6):959-68 (2015).

EG Brooks, JR Gill, R Buchsbaum, S Utley, L Sathyavagiswaran, DC Peterson. Testing for Infectious Diseases in Sudden Unexpected Infant Death: A Survey of Medical Examiner and Coroner Offices in the United States. J Pediatr. July;167(1):178-82 (2015).

S Acree, C Rogers, D Anderson, M. Schuchardt, L. Sathyavagiswaran. Amantadine Overdose: What is murder or suicide? The effect of postmortem drug redistribution. Am J Clin Pathol July;138(suppl 1):A001 (2015).

FORENSIC MEDICINE DIVISION

The Forensic Medicine Division's full-time permanent staff consists of boardcertified forensic pathologists who are responsible for the professional medical investigation and determination of the cause and mode of each death handled by the Department.

The physicians are experts in the evaluation of sudden, unexpected, natural deaths and unnatural deaths such as deaths from firearms, sharp and blunt force trauma, etc. Physicians are frequently called to court to testify on cause of death, and their medical findings and interpretations, particularly in homicide cases.

In addition, the division has consultants in forensic neuropathology, odontology, anthropology, anesthesiology, pediatrics, surgery, ophthalmologic pathology, pulmonary pathology, cardiac pathology, emergency medicine, psychiatry, psychology and radiology to assist the deputy medical examiners in evaluating their cases.

MEDICAL EDUCATION

The Department is approved by the Institute for Medical Quality, a subsidiary of the California Medical Association as a provider of Continuing Medical Education activities.

HEALTH & SAFETY/RISK MANAGEMENT

The Department has implemented an aggressive health & safety committee and risk management program, which has significantly reduced work-related injuries.

ICAN

The Department participates in the Interagency Council for Child Abuse and Neglect (ICAN). This Department is the host of the monthly Child Death Review Committee of ICAN.

IDENTIFICATION OF UNIDENTIFIED BODIES (SB 90)

The Department participates in a State-mandated program to examine dental records and collect appropriate specimens for the identification of John and Jane Does.

MEDICAL EXAMINER-CORONER ALERT PROJECT (MECAP)

The Department of Medical Examiner-Coroner reports to the Consumer Product Safety Commission on all deaths directly related to unsafe consumer products.

RESIDENCY PROGRAM

The Medical Division of the Department of Medical Examiner-Coroner has an Accreditation Council for Graduate Medical Education-approved forensic pathology residency program designed to train deputy medical examiners and prepare them for board certification while performing medical investigations under appropriate supervision.

SCUBA PROGRAM

The Department staff participates in the Los Angeles County Interagency Scuba Committee to investigate and develop programs to prevent future scuba diving fatalities.

TISSUE HARVESTING/ORGAN TRANSPLANTATION

This program provides corneas and other tissue to all in need in our community through coordinated efforts with various tissue banks and hospitals. After family consent is obtained, our medical staff provides review of organ and tissue procurement in Medical Examiner-Coroner cases.

In addition, the program makes tissue available to low-income and indigent patients at County hospital at no cost to the patients or hospitals.

UNIVERSITY HOSPITAL PATHOLOGY RESIDENT TRAINING PROGRAM

The department offers the opportunity for pathology residents from local university-affiliated hospital (USC, UCLA, and others) to train in our office with costs paid by the hospitals. This program fosters positive relationships with the university hospitals' pathology department and improves the standard of practice of forensic medicine in general, as these pathology residents will be practicing in the community when they finish training.

FORENSIC SCIENCES LABORATORIES DIVISION

The Forensic Sciences Laboratories Division is responsible for the identification, collection, preservation, and analysis of physical and medical evidence associated with Medical Examiner-Coroner cases.

The mission is to conduct a comprehensive scientific investigation into the cause and manner of any death within the Medical Examiner-Coroner jurisdiction. This is accomplished through the chemical and instrumental analysis of physical and medical evidence.

The goal is to provide our medical examiners, families of decedents, outside investigating agencies, and the judicial system with timely, accurate, and advanced forensic analyses; and to provide expert interpretation of these analyses.

The Forensic Sciences Laboratories are fully accredited in Controlled Substances, Trace Evidence, Toxicology and Firearm/Toolmarks by the prestigious American Society of Crime Laboratory Directors-Laboratory Accreditation Board (ASCLD/LAB-International).

The forensic blood alcohol testing program is licensed by the State of California (Title 17).

CRIMINALISTICS

Our teams of specially-trained forensic scientists are on call twenty-four hours a day to respond to crime scenes for the proper documentation, collection and preservation of physical evidence.

HISTOLOGY

This laboratory facilitates the preparation of gross tissue specimens for microscopic examination by the medical staff. This includes hematoxylin and eosin stains, special stains, and immunohistochemical stains.

Through the microscopic examination of tissue, forensic pathologists can determine the age and degree of injury, diagnose disease including cancers, evaluate cellular variation in tissue, and identify the presence of bacteria, medical disorders, and toxins such as asbestos.

TOXICOLOGY

Using advanced instrumentation and methods, the toxicology laboratory conducts chemical and instrumental analysis on post-mortem specimens to determine the extent to which drugs may have contributed to a death.

The laboratory's experienced forensic toxicologists offer expert drug interpretation that assist the medical examiners in answering questions like what drug was taken? How much and when was the drug taken? Did the drug contribute to the cause and/or manner of death? Was the drug use consistent with therapeutic administration, or was it abuse? If the death is due to a drug overdose, was it intentional or accidental?

SCANNING ELECTRON MICROSCOPY LAB

Our scanning electron microscope (SEM) laboratory conducts gunshot residue (GSR) analyses and toolmark evaluations. Using a SEM equipped with an energy dispersive x-ray detector, GSR analysis is used to determine whether an individual may have fired a weapon.

Our laboratory also performs GSR analyses for many law enforcement agencies throughout California. Toolmark analysis involves the evaluation of trauma to biological material, especially bone and cartilage, as to the type of instrument that might have produced the trauma. This not only helps our pathologists understand the circumstances of a death, but also aids the law enforcement agency in their criminal investigation.

EVIDENCE CONTROL

Our evidence personnel are responsible for maintaining the integrity and chain of custody for all of the evidence collected from Medical Examiner-Coroner cases. All of the physical evidence collected by Department investigators, criminalists, pathologists, forensic technicians, and forensic attendants is documented and maintained by the evidence control unit.

OPERATIONS DIVISION

The Division is responsible for the 24-hour-a-day, 7-day-a-week operations of many direct services provided by the Department. The Division oversees Investigations and Decedent Services Unit. In addition, the Division is responsible for public information office functions, fleet management, emergency and disaster planning, homeland security grants, and other ancillary programs such as regional offices and the Youthful Drunk Driver Visitation Program (YDDVP).

INVESTIGATIONS

The Investigations Division responds to the scenes of death throughout Los Angeles County twenty-four hours a day, 7 days a week.

It is the responsibility of the Coroner Investigator to function as the eyes and ears of the Deputy Medical Examiner, ensure that State law is followed in respect to Medical Examiner-Coroner cases, and be the advocate for the deceased person.

Coroner Investigators are responsible for preparation of investigative reports for use in the determination of cause and manner of death, along with identifying the deceased and notifying their next of kin.

Testimony in court and depositions on Medical Examiner-Coroner cases also is an important part of the investigator's duties. Due to the diverse case load in Los Angeles County, the Coroner Investigator is in the important position of seeing every death that occurs under other than natural circumstances and is often the first to identify trends such as serial deaths and consumer product safety issues.

The Department of Medical Examiner-Coroner is a California Peace Officer Standards and Training (POST) certified agency. Under State law (Penal Code 830.35), all Coroner Investigators are sworn peace officers. The Coroner Investigators must meet the same stringent hiring standards as any other California law enforcement agency.

The Division offers specialized POST certified training including the 40-hour annual Skeletal Recovery course, which is attended by law enforcement, coroner investigators, criminalists, military and others from around the country.

Investigative capabilities have been extended to offices in the Antelope Valley and San Fernando. Regional offices provide a more rapid Medical Examiner-Coroner response to the scene of death, which results in rapid mitigation of traffic and other public conveyance obstructions.

SPECIAL OPERATIONS, DISASTER PREPAREDNESS AND RESPONSE

The Department of Medical Examiner-Coroner has fielded a specialized response unit comprised of Coroner staff including investigators, criminalists, technicians, doctors and consultants in anthropology and entomology.

The SORT team responds to cases requiring specialized recovery and scene processing techniques, such as those required in aircraft crashes, buried bodies, scattered human remains and fires, and also assists law enforcement agencies in general searches for scattered human remains or possible burial sites. They are the primary responders for mutual aid requests and multiple fatality incidents.

Disaster preparedness and response is a key Departmental responsibility as one of the lead County agencies in major disasters and significant smaller incidents that involve multiple fatalities. The Department also serves as the Region 1 Coroner Mutual Aid Coordinator for the State of California. Our role requires plan development and regular training on the operation of an Emergency Operations Center (EOC) and field response, as well as participating in multi-agency emergency exercises.

As a result of grant funding, the Department has been able to purchase disaster equipment to include multiple decedent storage and transportation vehicles, a command post and mobile autopsy vehicle. We continue to strive to update and keep current with our training and equipment needs.

YOUTHFUL DRUNK DRIVER VISITATION PROGRAM (YDDVP)

The Department of Medical Examiner-Coroner has presented the YDDVP program since 1989 as an alternative sentencing option that can be considered by a judicial officer. The program is designed to present to the participants the consequences of certain behavior in a manner that has an impact and also is educational. The program is currently offered weekly and includes classes presented completely in Spanish.

DECEDENT SERVICES UNIT

Personnel assigned to this unit are responsible for the transportation, processing, storage, and release of bodies that are under the jurisdiction of the Medical Examiner-Coroner. Bodies may be recovered from any death scene, in almost any environment imaginable, including those in public view, private homes, and hospitals. Decedent processing includes obtaining the height and weight of bodies, the collection, documentation, and safekeeping of personal effects, and the collection of both physical and medical evidence, fingerprinting of decedents using LIVE-SCAN technology and placement of identification tags on the body.

Bodies are maintained in refrigerated crypts while awaiting examination and release to mortuaries or for County cremation. Additionally, staff members are accountable for all human remains and specimens stored in the crypt areas.

ADMINISTRATIVE SERVICES DIVISION

The Administrative Services Bureau is responsible for all departmental financial operations, departmental budget preparation, fiscal reports, personnel, payroll, procurement, accounting, revenue collection, marketing, volunteer services, contracts and grants, public records request processing, information technology, workfare programs, facilities management, and other related functions.

FISCAL SERVICES

The Accounting section is responsible for all financial transactions performed by the Department of Medical Examiner-Coroner. All Auditor-Controller guidelines are followed as well as any departmental guidelines governing monetary issues. The section also monitors all departmental accounts, such as salary and benefits, overtime expenditures, services and supplies, and budget.

PROCUREMENT

Procurement is responsible for processing all requests for goods and services for the Department, warehouse and facilities management. Procurement staff works closely with fiscal staff to provide real-time information on services and supplies expenditures, fixed assets and inventory control, playing an important budgetary support role. They also provide guidance to end-users in the development of specifications and scopes of work.

HUMAN RESOURCES

Human Resources is responsible for personnel issues that are inherent in County government such as benefits, processing examinations, filling vacant positions, litigation, workers compensation, volunteer services, payroll, community support programs such as job fairs, and budgetary support.

CONTRACTS AND GRANTS

The Department administers contracts and agreements for various functions, such as tissue recovery, regional offices lease agreements, cremation services, neuropathology and forensic pathologist physician services. Contracts/Grants staff monitor existing contracts and grants, ensuring all provisions are adhered to. Staff also studies Department operations in the continuing evaluation of the appropriateness of contracting for other functions.

FORENSIC DATA INFORMATION SYSTEMS

The mission of Forensic Data Information Systems (FDIS) is to enhance and support the Department's long-range goals, mission-critical business goals, and

objectives through the administration, project management, and expansion of information technology-related applications and services, including the appropriate delivery of services to agencies referred through appropriate 24/7 e-government technologies.

The FDIS also is responsible for network, database and application administration, preparation of statistics and general client support. The FDIS is responsible to ensure that the Department is in alignment with the County-wide strategic planning effort to conduct County business electronically and maintain compliance with the technological directives as stipulated by the County's Chief Information Officer. The FDIS manages the information technology efforts of subcontracts in the implementation and support of new technologies such as ecommerce content management and voice over internet protocol (VoIP).

PUBLIC SERVICES DIVISION

This Division is responsible for Medical Examiner-Coroner case file management, revenue collection (document sales, decedent billing, etc.), and interaction with the public both telephonically and at the front lobby reception area. In addition to providing information and copies of autopsy reports, Public Services staff offers many services to the public. These services include preparation of "Proof of Death" letters to verify that a death is being investigated by the Medical Examiner-Coroner, and "Port of Entry" letters to confirm that at decedent had no communicable disease, necessary for the decedent's admission into a foreign country after death.

RECORDS SECTION

The Medical Examiner-Coroner is mandated by the California Government Code to retain all files permanently; therefore, the Department maintains 100+ years of records that are accessed on a regular basis at the request of the public, law enforcement and other government agencies. This Section is responsible for maintaining and securing Medical Examiner-Coroner records. In addition, this section handles a large volume of calls and is tasked with handling requests for records, reports and proof of death letters. Older records are maintained off site, on microfilm or microfiche, and must be transferred on to paper in order to be released. Some of our older records date back to the 19th century and are handwritten in ledgers.

DEATH CERTIFICATION

The Section is responsible for the completion and daily issuance of the death certificates to mortuaries.

MEDICAL/CLERICAL SECTION

This Section is responsible for reporting SIDS (Sudden Infant Death Syndrome) cases to the State and local health agencies for follow-up by those agencies.

The section also provides clerical support to the Deputy Medical Examiners.

MEDICAL TRANSCRIBING

The Transcriber is responsible for the transcription of the autopsy report protocols, microscopic slide reports, neuropathology reports, suicide recordings, case review reports, supplemental reports, etc. An outside contractor is utilized for routine transcriptions.

PERSONAL PROPERTY SECTION

Personal property of all decedents is kept in the Personal Property Section and maintained in a vault until release to the decedent's next of kin. The Department has three Personal Property Custodians who collect, inventory, safeguard and release decedent's personal property to the legal next of kin. The Custodians are also responsible for disposal of all unclaimed personal effects.

SUBPOENA DESK

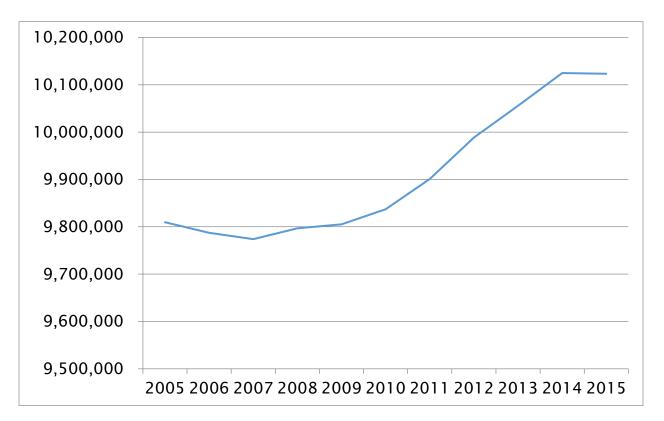
The desk is responsible for processing all criminal and civil subpoenas, distribution (DocuPeak) of all subpoenas issued to staff on Medical Examiner-Coroner related business, processes subpoenas requesting documents, collection of witness fees. The desk is also responsible for the scheduling of all Deputy medical Examiners for court appearances, depositions and appointments with law enforcement, Deputy District Attorneys, Public Defender staff, and members of the public.

BILLING SECTION

This section is responsible for billing and collecting transportation and handling (T&H) fees from the legal Next of Kin (NOK). California Government Code (Sections 27472 and 54985) and Los Angeles County Code (2.22.100) authorizes the Medical Examiner-Coroner to charge and collect from the person entitled to control the disposition of the remains the actual expense incurred by the coroner in removing the body from the place of death and keeping the body until its release to the person responsible for its interment. These same codes allow the Medical Examiner-Coroner to waive the fees if the person entitled to control the disposition of the remains and proves to be indigent. Full or make partial payments can be made via mail, on line or in person.

GIFT SHOP

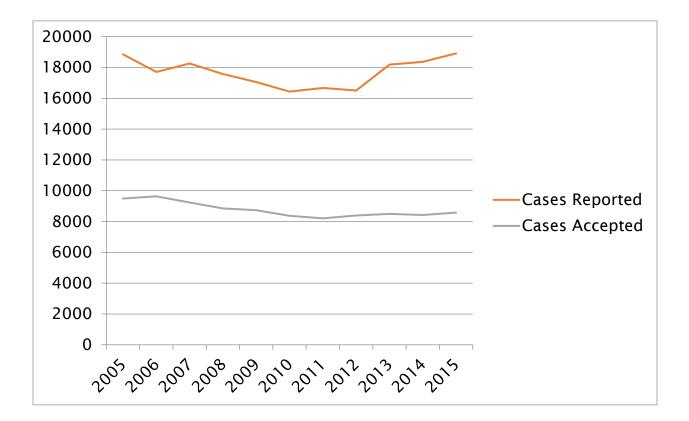
"Skeletons in the Closet" has been operating since September 1993. The purpose of the store is to promote how fragile life is and create awareness and responsibility toward one's actions. Souvenir items, such as beach towels, t-shirts, baseball caps, key chains and more are offered for sale in the store and online. The items are available to the public via website at LACORONER.COM or by calling (323) 343-0760.



Population of Los Angeles County, 2005-2015

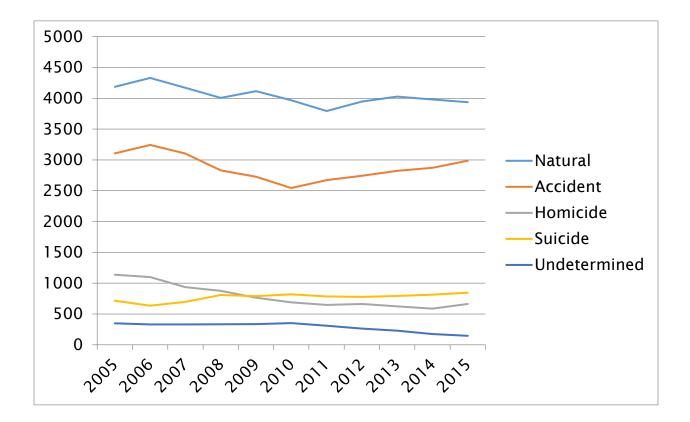
Year	Population
2005	9,809,557
2006	9,787,327
2007	9,773,894
2008	9,796,812
2009	9,805,233
2010	9,837,011
2011	9,900,858
2012	9,988,287
2013	10,055,477
2014	10,124,684
2015	10,123,248

Sources: State of California, Department of Finance



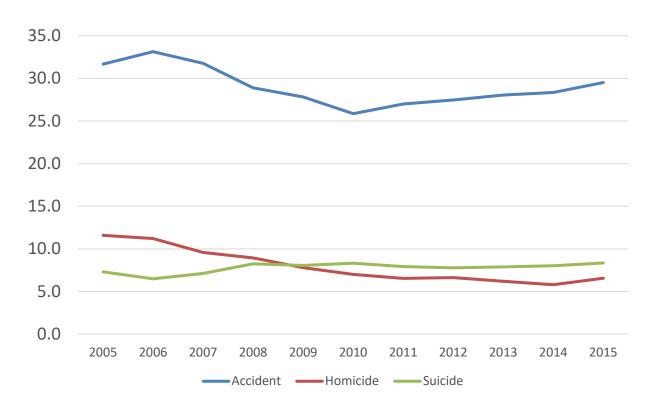
Number of Reported an	d Accepted Cases	per Year, 2005-2015
-----------------------	------------------	---------------------

Year	Cases Reported	Cases Accepted
2005	18,854	9,494
2006	17,704	9,637
2007	18,254	9,237
2008	17,572	8,854
2009	17,053	8,734
2010	16,434	8,371
2011	16,668	8,207
2012	16,508	8,390
2013	18,187	8,495
2014	18,365	8,428
2015	18,913	8,578





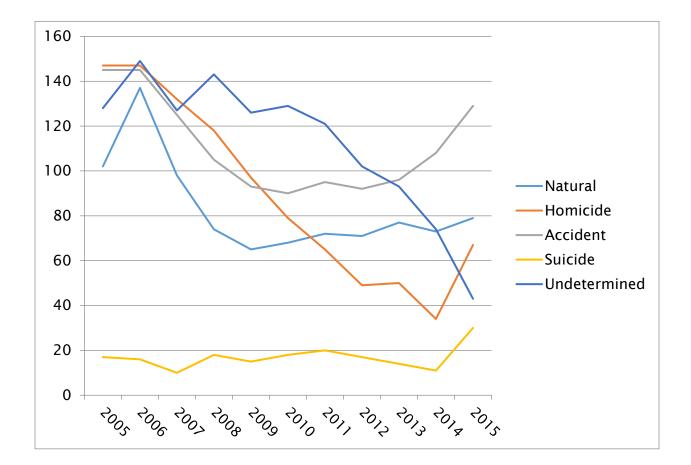
Year	Natural	Accident	Homicide	Suicide	Undetermined
2005	4186	3106	1137	716	349
2006	4330	3243	1098	635	331
2007	4170	3104	936	696	331
2008	4007	2830	876	807	334
2009	4115	2728	765	791	335
2010	3968	2544	689	818	352
2011	3793	2673	647	784	310
2012	3947	2743	662	776	262
2013	4027	2823	624	793	228
2014	3981	2871	587	813	176
2015	3936	2987	664	845	146

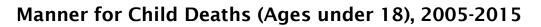


Death Rates per 100,000 Population, 2005-2015

*crude rates

Year	Accident	Homicide	Suicide
2004	31.5	11.4	7.2
2005	31.7	11.6	7.3
2006	33.1	11.2	6.5
2007	31.8	9.6	7.1
2008	28.9	8.9	8.2
2009	27.8	7.8	8.1
2010	25.9	7.0	8.3
2011	27.0	6.5	7.9
2012	27.5	6.6	7.8
2013	28.1	6.2	7.9
2014	28.4	5.8	8.0
2015	29.5	6.6	8.3



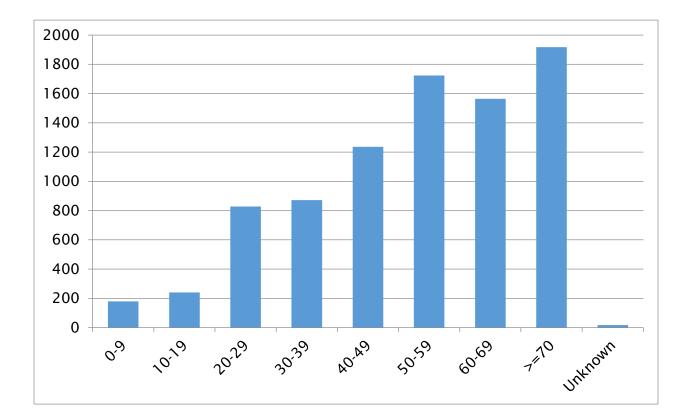


Year	Natural	Homicide	Accident	Suicide	Undetermined
2005	102	147	145	17	128
2006	137	147	145	16	149
2007	98	132	125	10	127
2008	74	118	105	18	143
2009	65	97	93	15	126
2010	68	79	90	18	129
2011	72	65	95	20	121
2012	71	49	92	17	102
2013	77	50	96	14	93
2014	73	34	108	11	74
2015	79	67	129	30	43

General Overview

Statistics Required by National Association of Medical Examiners

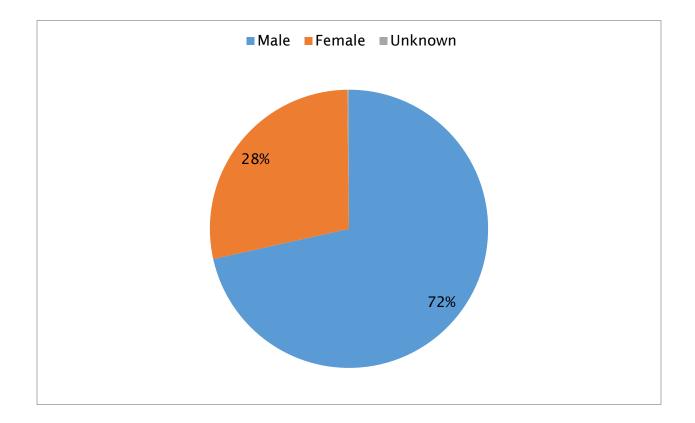
Number of deaths reported: Number of cases accepted:	18,913 8,578
Number of cases by manner of death:	
Accident: Homicide: Natural: Suicide: Undetermined:	2,987 664 3,936 845 146
Scene visits:	3,356
Number of bodies transported:	6,313
External examinations:	
By physician: By investigator:	2,754 2,114
Partial autopsies:	240
Complete autopsies:	3,341
Hospital autopsies under ME jurisdiction:	3
Cases where toxicology was performed:	4,377
Bodies unidentified after examination:	19
Organ and tissue donations:	
Total organ donors: Total tissue donors:	141 461
Unclaimed bodies:	460
Exhumations:	4





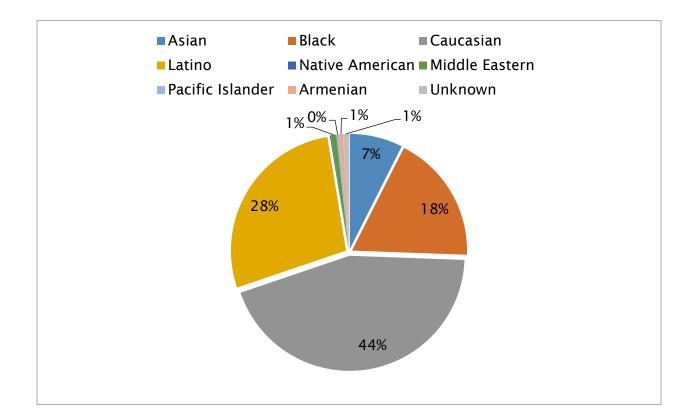
Age	Number of Cases
0-9	179
10-19	241
20-29	828
30-39	872
40-49	1236
50-59	1724
60-69	1564
>=70	1917
Unknown	17



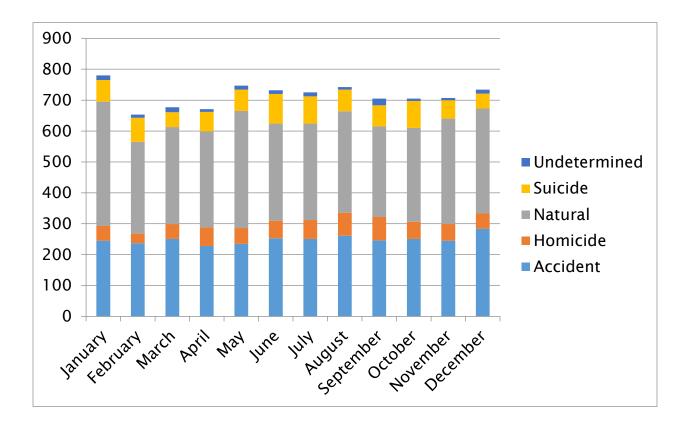


Gender	Number of Cases
Male	6134
Female	2427
Unknown	17



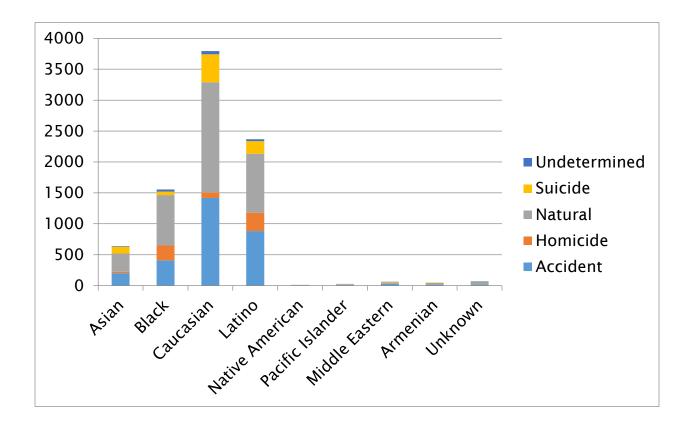


Race	Number of Cases
Armenian	51
Asian	640
Black	1,554
Caucasian	3,793
Latino	2,368
Middle Eastern	65
Native American	12
Pacific Islander	29
Unknown	66



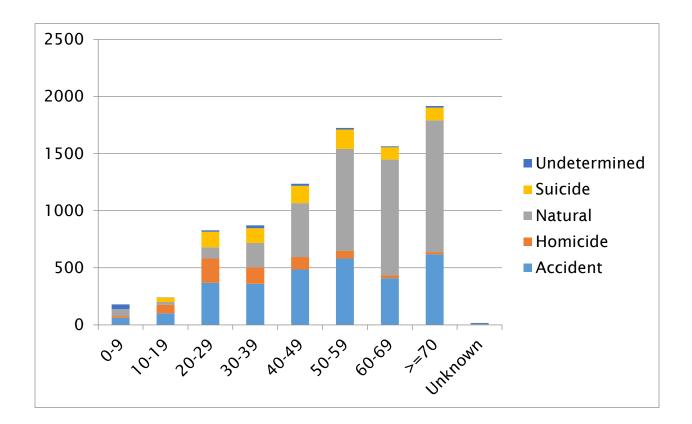
Manner of	Death	by	Month
-----------	-------	----	-------

Month	Accident	Homicide	Natural	Suicide	Undetermined	Total
January	245	48	402	70	15	825
February	237	31	297	78	10	689
March	251	48	314	48	16	692
April	228	60	311	63	9	722
May	235	51	379	69	13	687
June	253	57	314	96	12	641
July	251	61	312	88	13	726
August	261	74	329	70	8	673
September	246	76	293	68	22	669
October	251	55	304	87	8	690
November	245	54	341	60	7	647
December	284	49	340	48	13	767
Total	2987	664	3936	845	146	8578



Race Distribution for Each Manner

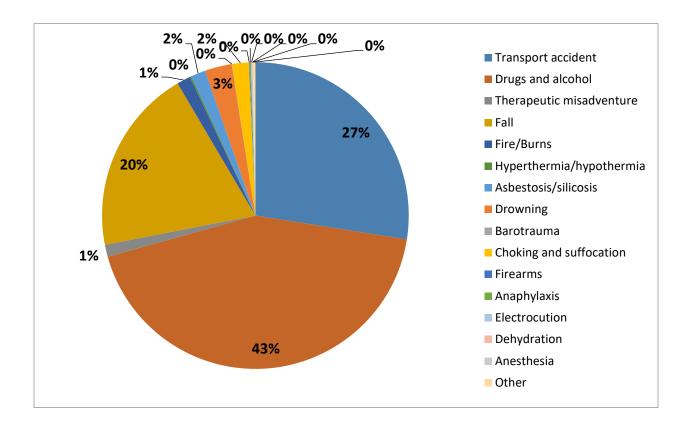
Race	Accident	Homicide	Natural	Suicide	Undetermined
Armenian	18	2	24	7	0
Asian	202	22	297	108	11
Black	409	239	816	57	33
Caucasian	1418	91	1781	452	51
Latino	883	296	952	205	32
Middle Eastern	27	3	22	9	4
Native American	6	1	5	0	0
Pacific Islander	7	5	17	0	0
Unknown	17	5	22	7	15





Manner	0-9	10-19	20-29	30-39	40-49	50-59	60-69	>=70	Unknown
Accident	62	101	369	360	485	582	409	618	1
Homicide	15	75	212	143	109	66	24	19	1
Natural	60	24	99	214	472	893	1014	1153	7
Suicide	0	40	135	130	151	169	108	112	0
Undetermined	42	1	13	25	19	14	9	15	8

Accidental Deaths



Drugs and alcohol	1290
Transport accident	821
Fall	585
Drowning	85
Choking and suffocation	53
Asbestosis/silicosis	46
Fire/Burns	43
Therapeutic misadventure	38
Other	8
Hyperthermia/hypothermia	5
Anaphylaxis	4
Electrocution	4
Firearms	2
Barotrauma	1
Dehydration	1
Anesthesia	1
Total accidental deaths	2987

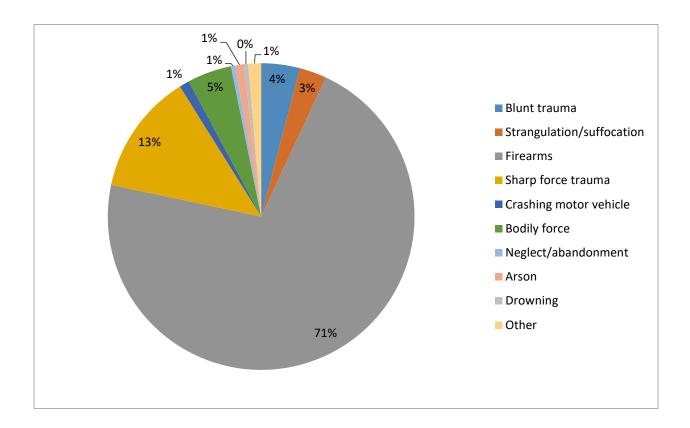
Transportation Accidents

Pedestrians	Collision with car, pick-up truck or van	220
	Collision with heavy transport vehicle or bus	11
	Collision with railway train or railway vehicle	11
	Other and unspecified transport accidents	29
	Collision with bicyclist	1
	Collision with two- or three-wheeled motor vehicle	2
	Total pedestrians	274
Pedal Cyclists	Collision with car, pick-up truck or van	35
	Collision with train	1
	Collision with fixed object	3
	Collision with pedestrian or animal	1
	Unspecified collision	1
	Non collision transport	2
	Unspecified vehicle	7
	Collision with motorcycle	5
	Collision with semi-truck	1
	Total pedal cyclists	56
Motorcycle Riders	Collision with pedestrian or motorcycle	5
,	Collision with car, pick-up truck or van	82
	Collision with heavy transport vehicle or bus	8
	Collision with fixed or stationary objects	28
	Non-collision accident (fell or thrown)	16
	Other and unspecified transport accidents	7
	Total motorcycle riders	146
Car Occupants	Collision with car, pick-up truck or van	125
	Collision with heavy transport vehicle or bus	12
	Collision with fixed or stationary objects	118
	Non-collision accident (fell or thrown)	29
	Collision with motorcycle	1
	Other and unspecified transport accidents	2
	Total car occupants	287
Other Transport Accidents	Occupant of pick-up truck or van	5
	Truck collision with truck	1
	Pick-up truck or van versus fixed object	7
	Pick-up truck or van versus unspecified object	3
	Driver of heavy transport vehicle, non-collision	4
	Fall from bus	1
	Off-road vehicle	8
	Other and unspecified transport accidents	24
	Boat	2
	Plane	3
	Total other transport accidents	58
	Total transport accidents	821

Accidental Falls

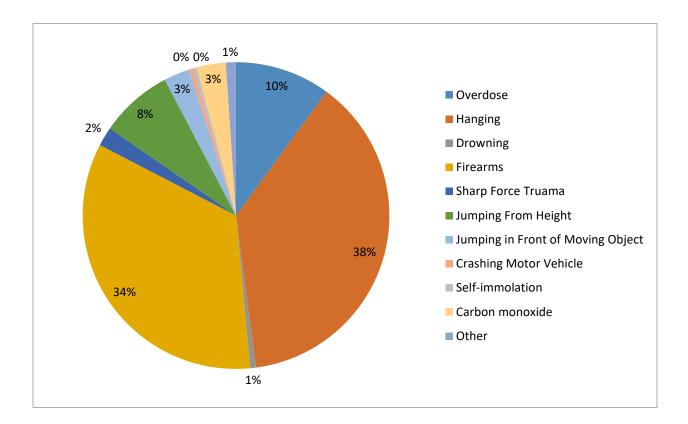
Fall on same level from slipping, tripping and stumbling	468
Fall while being carried or supported by other persons	2
Fall involving wheelchair	7
Fall involving bed	18
Fall involving chair	1
Fall on or from stairs and steps	18
Fall from furniture	3
Fall on or from ladder	13
Fall from scaffolding	5
Fall from, out of or through building or structure	35
Fall from tree	2
Fall from cliff	3
Fall from skateboard	5
Fall from one level to another	4
Other and unspecified falls	1
Total accidental falls	585

Homicidal Deaths

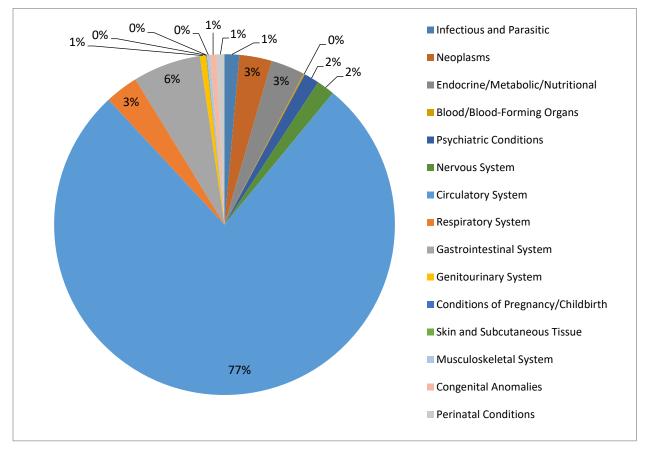


Firearms	474
Sharp force trauma	85
Bodily force	31
Blunt trauma	27
Strangulation/suffocation	19
Other	9
Crashing motor vehicle	7
Arson	6
Neglect/abandonment	3
Drowning	3
Total Homicides	664





Hanging	320
Hanging	
Firearms	288
Overdose	85
Jumping From Height	65
Carbon monoxide	26
Jumping in Front of Moving Object	23
Sharp Force Trauma	17
Other	9
Drowning	5
Crashing Motor Vehicle	4
Self-immolation	3
Total suicides	845



Natural Deaths

Circulatory System	3031
Gastrointestinal System	253
Endocrine/Metabolic/Nutritional	126
Respiratory System	124
Neoplasms	121
Nervous System	67
Psychiatric Conditions	57
Infectious and Parasitic	55
Perinatal Conditions	30
Congenital Anomalies	24
Genitourinary System	23
Musculoskeletal System	11
Blood/Blood-Forming Organs	5
Other	5
Skin and Subcutaneous Tissue	2
Conditions of Pregnancy/Childbirth	1
Anaphylaxis	1
Total	3936

Circulatory System Disease Among Natural Deaths

Aneurysms	Cerebral	19
	Aortic	32
	Other	4
Ruptured aortic dissection		32
Peripheral vascular disease		3
Arteriosclerotic disease		2186
Cardiomyopathy	Alcoholic	16
	Dilated	37
	Hypertrophic	66
	Right ventricular dysplasia	5
	Obesity	30
Congestive heart failure		16
Acute myocardial infarction		53
Cerebral hemorrhage/infarction		55
Endocarditis		4
Hypertensive disease		422
Myocarditis		5
Pulmonary hypertension		2
Thrombosis/embolism		25
Hereditary clotting disorder		1
Valvular disease	Aortic valve disease	2
	Mitral valve disease	4
	Pulmonary valve	1
	Aortic and mitral valve	4
Ruptured esophageal varices		4
Arrhythmia		3
Total		3031

Nervous System Disease Among Natural Deaths

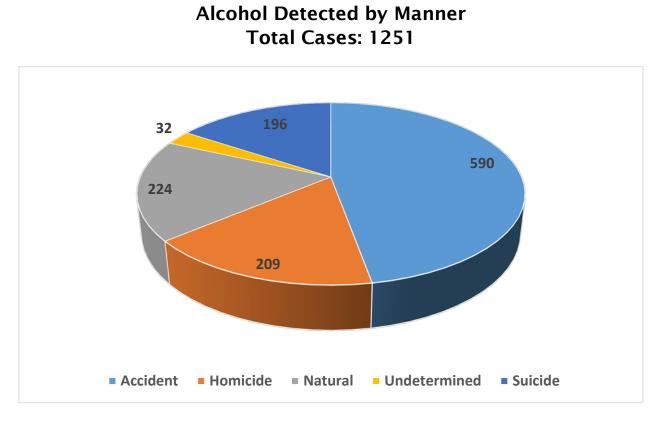
Alzheimer Disease	3
Cerebral palsy	7
Epilepsy	42
Meningitis/encephalitis	7
Parkinson Disease	2
Other	6
Total	67

Infectious Diseases Among Natural Deaths

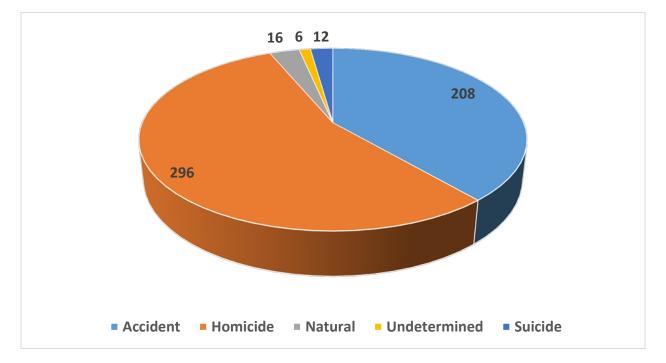
Bacterial infections	Clostridium difficile	2
	Streptococcus	3
	Staphylococcus	4
	Unspecified bacteria	1
	Tuberculosis	2
	Mycobacterium (non-tuberculosis)	1
Viral infections	Hepatitis C	17
	Human immunodeficiency virus	21
	Gastroenteritis, not otherwise specified	1
	Polio	1
Fungal infections	Cryptococcus	1
	Pneumocystis	1
Total		55

Neoplasms Among Natural Deaths

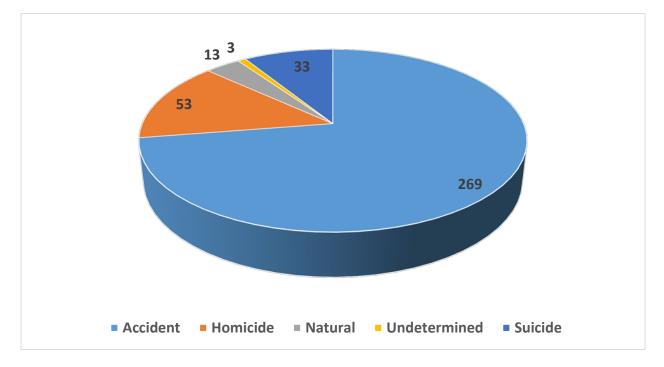
Γ.	
Lung	17
Colon	9
Pancreas	7
Liver	6
Breast	6
Brain	6
Unknown primary site	6
Head and neck	5
Mesothelioma	5
Bladder	5
Lymphoma	5
Stomach	4
Uterus	4
Ovary	3
Multiple myeloma	3
Meningioma	3
Rectum	2
Cardiac	2
Thymus	2
Cervix	2
Testis	2
Kidney	2
Thyroid	2
Melanoma	2
Cerebral colloid cyst	2
Sarcoma	2
Esophagus	1
Anal	1
Spleen	1
Malignant neoplasm of mediastinum	1
Penis	1
Prostate	1
Leukemia	1
Total	121



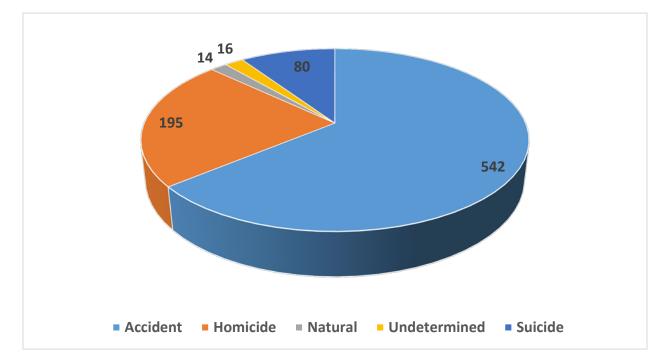
Marijuana Detected by Manner Total Cases: 538



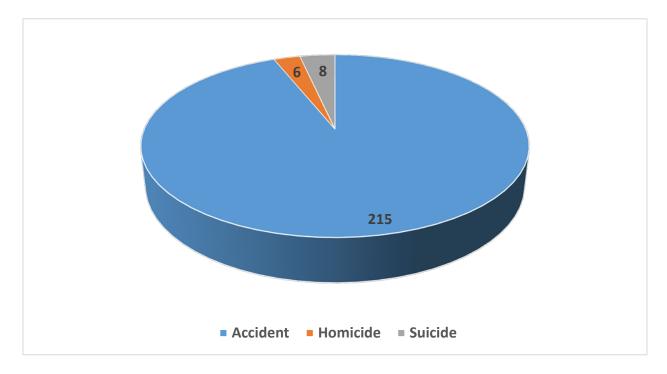




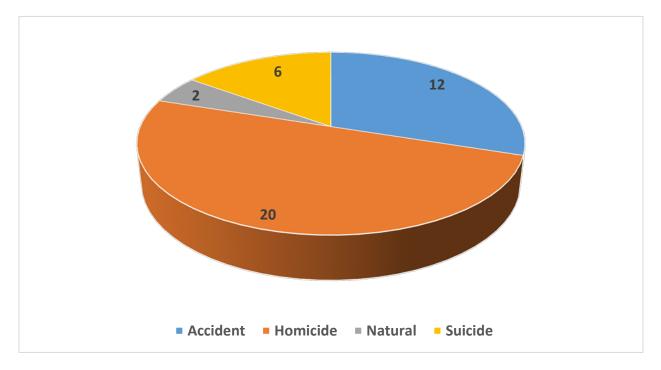
Methamphetamine Detected by Manner Total Cases: 847



Heroin Detected by Manner Total Cases: 229



Phencyclidine Detected by Manner Total Cases: 40



Fentanyl Detected by Manner Total Cases: 48

