

Office of the Medical Examiner  
2009 Calendar Year  
Annual Report



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**Reviewed by: Tracey S. Corey, MD Chief Medical Examiner**

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**Office of the Medical Examiner  
 2009 Annual Report**

**Table of Contents**

**Introduction.....5**

**Overview – Office of the Medical Examiner– .....5**

Basic Functions of the Office of the Medical Examiner.....5

Reportable Deaths.....6

Statutory Duty.....7

Training and Education.....8

*Forensic Pathologist Fellowship Program*.....8

    Organizational Chart-Office of the Medical Examiner .....9

**Total Cases.....10**

Figure 1-Statewide Medical examiner Case Totals 2009 .....11

*Louisville Totals by Specific Fatal Event*.....12

*Frankfort Totals by Specific Fatal Event*.....13

*NKY Totals by Specific Fatal Event*.....14

*WKY Totals by Specific Fatal Event*.....15

Figure 2-Total Statewide Cases Sent for Autopsy by Locality of Death.....16

Figure 3-Total Statewide Overdoses Sent for Autopsy by Locality of Death .....17

Figure 4-Statewide Cases by Year of Autopsy.....18

Figure 5-Statewide Cases by Month of Autopsy .....19

Figure 6-Statewide Cases by Age and Gender .....20

Figure 7-Statewide Autopsy Exams.....21

Figure 8-Statewide Cases by Manner of Death .....22

Figure 9-Statewide Accidents by Cause of Death .....23

Figure 10-Statewide Homicides by Cause of Death.....24

Figure 11-Statewide Suicides by Cause of Death.....25

Figure 12-Statewide Drugs Most Frequently Detected .....26

**Cause and Manner of Death .....27**

Figure 13-Louisville Cases by Manner of Death.....27

Figure 14-Frankfort Cases by Manner of Death.....27

Figure 15-Northern Kentucky Cases by Manner of Death.....28

Figure 16-Western Kentucky Cases by Manner of Death .....28

Figure 17-Louisville Cases by Type.....29

Figure 18-Frankfort Cases by Type.....29

Figure 19-Western Kentucky Cases by Type .....30

Figure 20-Northern Kentucky Cases by Type .....30

**Louisville Medical Examiner Office Data.....31**  
 Figure 21-MVC by Manner of Death ..... 31  
 Figure 22-GSW by Manner of Death..... 31  
 Figure 23-Drowning by Manner of Death ..... 32  
 Figure 24-Fire by Manner of Death ..... 32  
 Figure 25-Overdose by Manner of Death ..... 33  
 Figure 26-Most Frequently Detected Drugs ..... 33

**Frankfort Medical Examiner Data.....34**  
 Figure 27-Drowning by Manner of Death ..... 34  
 Figure 28- Fire by Manner of Death ..... 34  
 Figure 29- GSW by Manner of Death..... 35  
 Figure 30- MVC by Manner of Death ..... 35  
 Figure 31- Overdose by Manner of Death ..... 36  
 Figure 32- Most Frequently Detected Drugs ..... 36

**Northern Kentucky Medical Examiner Data .....37**  
 Figure 33- MVC by Manner of Death ..... 37  
 Figure 34- GSW by Manner of Death..... 37  
 Figure 35- Drowning by Manner of Death ..... 38  
 Figure 36- Fire by Manner of Death ..... 38  
 Figure 37- Overdose by Manner of Death ..... 39  
 Figure 38- Most Frequently Detected Drugs ..... 39

**Western Kentucky Medical Examiner Data.....40**  
 Figure 39- MVC by Manner of Death ..... 40  
 Figure 40- GSW by Manner of Death..... 40  
 Figure 41- Drowning by Manner of Death ..... 41  
 Figure 42- Fire by Manner of Death ..... 41  
 Figure 43- Overdose by Manner of Death ..... 42  
 Figure 44- Most Frequently Detected Drugs ..... 42

**Glossary .....43**

**Medical Examiner Districts .....44**

## Introduction

The Office of the Medical Examiner investigates deaths occurring in the state of Kentucky, as authorized by Kentucky's elected coroners. The staff assists Kentucky coroners and law enforcement agencies in all aspects of death investigations by determining the cause and manner of death, identification of the deceased, and collection and interpretation of trace evidence. The Medical Examiner Division performed services for approximately 2,373 deaths. A detailed summary of the case distribution is delineated in this report. **It should be noted that this annual report does not include all deaths occurring in Kentucky, but rather those cases investigated by the Kentucky Medical Examiner Program.** For total numbers of deaths occurring in the state, please contact:

Office of Vital Statistics  
275 E. Main St. 1EA  
Frankfort, KY 40621  
(502) 564-4212

The following report is presented in two sections. The first section summarizes the activity of the Medical Examiner's Office. The second section presents data routinely collected by the Medical Examiner's Office in regards to medicolegal death investigations performed. The graphs and figures presented are designed to be self-explanatory and provide the reader with a brief understanding of the types of cases completed within this Division.

### Overview—Office of the Medical Examiner—2009

The Medical Examiners Office performs death investigations and postmortem examinations at four separate regional offices around the state:

- The Office of the Chief Medical Examiner in Louisville, KY
- The Office of the Associate Chief Medical Examiner in Frankfort, KY
- The Western Kentucky Regional Medical Examiners Office in Madisonville, KY
- The Northern Kentucky Regional Medical Examiners Office in Ft. Thomas, KY

There are six basic functions of the Office of the Medical Examiner:

- determine the cause and manner of death of individual decedents in a timely fashion
- identify the dead with a high degree of certainty and written documentation
- prepare and maintain accurate, thorough and timely reports regarding examinations and opinions
- safeguard and account for evidence and personal property
- maintain confidentiality of case information
- base expert opinions on logical conclusions after considering all historical and physical evidence available, in light of current scientific and medical knowledge

All medical examiner offices in Kentucky are staffed by board certified and/or board eligible forensic pathologists. These forensic pathologists are physicians who have undergone at least five years of postgraduate training to become proficient in the subspecialty of forensic pathology. The forensic pathologists routinely perform postmortem examinations; consult with law enforcement officials and attorneys regarding aspects of investigations including blood spatter analysis, crime scene investigation and toxicology interpretation; meet with decedents' families; and provide expert testimony in courts throughout Kentucky. Additional services provided by the Office of the Medical Examiner include forensic anthropology, clinical forensic medicine and cadaver canine services for the detection and recovery of human remains.

The mission of the Kentucky Medical Examiners Office is to serve the public by:

- providing accurate, thorough and efficient medical legal investigations of death, thereby,
- insuring justice, and
- providing solace, comfort and protection to the living

## Reportable Deaths

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### ***KRS 72.025 Circumstances requiring post-mortem examination to be performed by coroner.***

Coroners shall require a post-mortem examination to be performed in the following circumstances:

- (1) When the death of a human being appears to be caused by homicide or violence;
- (2) When the death of a human being appears to be the result of suicide;
- (3) When the death of a human being appears to be the result of the presence of drugs or poisons in the body;
- (4) When the death of a human being appears to be the result of a motor vehicle accident and the operator of the motor vehicle left the scene of the accident or the body was found in or near a roadway or railroad;
- (5) When the death of a human being occurs while the person is in a state mental institution or mental hospital when there is no previous medical history to explain the death, or while the person is in police custody, a jail or penal institution;
- (6) When the death of a human being occurs in a motor vehicle accident and when an external examination of the body does not reveal a lethal traumatic injury;
- (7) When the death of a human being appears to be the result of a fire or explosion;
- (8) When the death of a child appears to indicate child abuse prior to the death;
- (9) When the manner of death appears to be other than natural;
- (10) When human skeletonized remains are found;
- (11) When post-mortem decomposition of a human corpse exists to the extent that external examination of the corpse cannot rule out injury or where the circumstances of death cannot rule out the commission of a crime;
- (12) When the death of a human being appears to be the result of drowning;

- (13) When the death of an infant appears to be caused by sudden infant death syndrome in that the infant has no previous medical history to explain the death;
- (14) When the death of a human being occurs as a result of an accident;
- (15) When the death of a human being occurs under the age of forty (40) and there is no past medical history to explain the death;
- (16) When the death of a human being occurs at the work site and there is no apparent cause of death such as an injury or when industrial toxics may have contributed to the cause of death;
- (17) When the body is to be cremated and there is no past medical history to explain the death;
- (18) When the death of a human being is sudden and unexplained; and
- (19) When the death of a human being occurs and the decedent is not receiving treatment by a licensed physician and there is no ascertainable medical history to indicate the cause of death.

**Effective:** July 15, 1998

1. The coroner determines whether the case becomes a medical examiner case.
2. The medical examiner and the coroner may discuss whether a complete autopsy, a focused examination, or external inspection with toxicology specimen acquisition is warranted on certain cases. The Medical Examiner makes a MEDICAL DECISION regarding the type and amount of examination done to render a medicolegal opinion and thus provide assistance to the coroner. In all cases submitted by a coroner with an authorization, a report including a final opinion is generated.
3. In the rare event that the coroner declines to authorize an examination by the Medical Examiner's office in a case in which law enforcement investigators conclude that ME involvement is crucial, then law enforcement may obtain and authorize an examination by the ME office by procuring a court order through the Commonwealth Attorney's Office.

### **Statutory Duty**

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#### *72.210 Purpose of Division of Kentucky State Medical Examiners Office.*

In enacting legislation establishing a Division of Kentucky State Medical Examiners Office for the Commonwealth of Kentucky, it is not the intention of the General Assembly to abolish or interfere with the coroner in his role as a constitutionally elected peace officer. It is the intention of the General Assembly for the office to aid, assist, and complement the coroner in the performance of his duties by providing medical assistance to him in determining causes of death.

**Effective:** July 15, 1998

**History:** Amended 1998 Ky. Acts ch. 65, sec. 4, effective July 15, 1998. -- Created 1968 Ky. Acts ch. 114, sec. 1.

## **Summary Highlights**

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Aforementioned above, the four regional medical examiner offices together performed 2,373 postmortem examinations in 2009. In addition, there were 65 forensic anthropology consults (28 identified: 7 not applicable: 5 unidentified: 24 non-human).

## **Training and Education**

The Medical Examiner's Division provides educational instruction in death investigation to coroners, law enforcement, medical, and social service agencies throughout the state. The Office of the Chief Medical Examiner plays an active role in the University of Louisville Department of Pathology educational programs and activities. Staff pathologists participate in the training of medical students, residents and fellows.

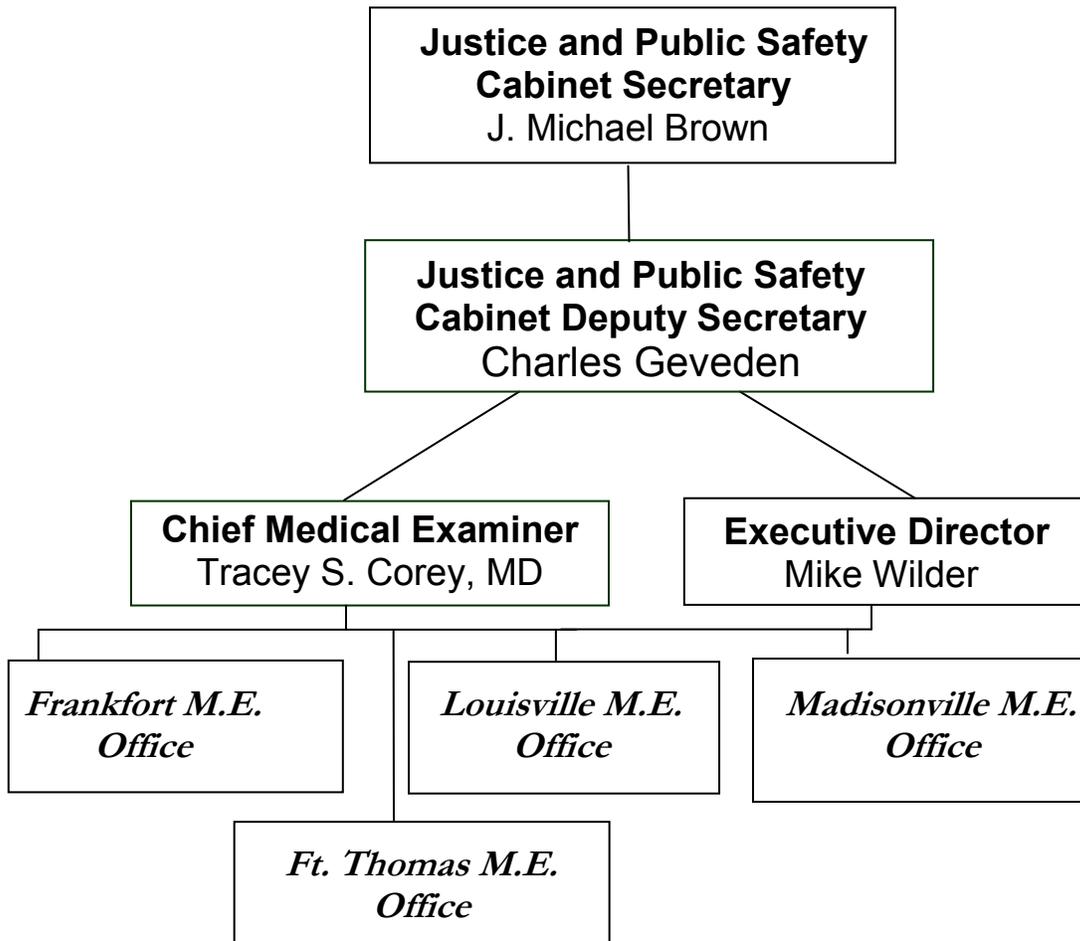
## **Forensic Pathologist Fellowship Program**

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The University of Louisville Division of Forensic Pathology Fellowship program is a one-year extensive training program in the subspecialty of forensic pathology. The trainee works with all of the attending physicians, gaining exposure to a wide spectrum of cases with various histories, causes, manners and mechanisms of death. The trainee is always staffed by one of the attending physicians in the autopsy room. The gross findings are discussed during the dissection, dictated at the table, and are signed out at the end of dissection. Case discussions are initiated prior to autopsy, and continued with staff and investigators through the multi-step process to the final report. The trainee is supervised throughout the process of interpretation of radiographs, microscopic slides, and toxicologic analysis. The trainees' dictations are critiqued and modified as needed by the attending physicians. Early in training, the trainee accompanies the attending physician to death scenes as requested by coroners. As the training year progresses, the fellow may accompany coroners to death scenes without an attending physician; even when the fellow conducts a scene visit without an attending physician, an attending physician remains available to provide telephone consultation regarding scene findings, or go to the scene as circumstances indicate.

**Office of the Medical Examiner  
Organizational Chart**

Figure 1





**Total Cases**

The remainder of this report will present data routinely collected by the Medical Examiner Offices. The graphs summarize data collected on all cases performed throughout the four regional offices.

**Statewide Medical Examiner Case Totals 2009**

The totals listed below do not represent all deaths occurring in Kentucky but rather the total cases undergoing autopsy by the Kentucky Medical Examiner Offices.

**TOTAL STATEWIDE CASES UNDERGOING AUTOPSY BY KENTUCKY  
MEDICAL EXAMINER OFFICES = 2,373**

<b>SUMMARY OF TOTAL STATEWIDE CASES UNDERGOING AUTOPSY BY KENTUCKY MEDICAL EXAMINER OFFICES</b>		
<b>Manner</b>	<b>Total</b>	<b>Percentage</b>
Accidents	1,013	42.69%
Homicides	228	9.61%
Naturals	671	28.28%
Suicides	283	11.93%
Undetermined	174	7.33%
Unclassified	2	0.08%
Pending	2	0.08%
	2,373	

<b>SUMMARY OF TOTAL STATEWIDE OVERDOSES UNDERGOING AUTOPSY BY KENTUCKY MEDICAL EXAMINER OFFICES</b>		
<b>Manner</b>	<b>Total</b>	<b>Percentage</b>
Accidents	490	92.45%
Suicides	17	3.21%
Undetermined	19	3.58%
Complications of Chronic Use	4	0.75%
	530	

**Louisville Totals by Specific Fatal Event**

<b>Fatal Event</b>	<b>Total Cases</b>	<b>Percentage</b>
<b><i>Overdoses</i></b>	<b>213</b>	
Accidental	200	93.9%
Suicide	4	1.88%
Complications of Chronic Use	2	0.94%
Undetermined	7	3.29%
<b><i>MVC</i></b>	<b>135</b>	
Accident	134	99.26%
Undetermined	1	0.74%
<b><i>GSW</i></b>	<b>196</b>	
Accident	1	0.51%
Homicide	85	43.37%
Suicide	105	53.57%
Undetermined	4	2.04%
Pending	1	0.51%
<b><i>DROWNING</i></b>	<b>20</b>	
Accident	20	100%
<b><i>FIRE</i></b>	<b>26</b>	
Accident	26	100%
<b><i>SUID</i></b>	<b>31</b>	
Undetermined	31	100%
<b><i>All other Louisville Accidents</i></b>	<b>36</b>	

**Frankfort Totals by Specific Fatal Event**

<b>Fatal Event</b>	<b>Total</b>	<b>Percentage</b>
<b><i>Overdoses</i></b>	<b>182</b>	
Accidental	163	89.56%
Suicide	9	4.95%
Undetermined	10	5.49%
<b><i>MVC</i></b>	<b>58</b>	
Accidental	57	98.28%
Homicide*	1	1.72%
*(Assault by Vehicle)		
<b><i>GSW</i></b>	<b>97</b>	
Homicide	53	54.64%
Suicide	39	40.21%
Undetermined	5	5.15%
<b><i>Drowning</i></b>	<b>25</b>	
Accidental	21	84.00%
Homicide	1	4.00%
Undetermined	3	12.00%
<b><i>Fire</i></b>	<b>25</b>	
Accidental	21	84.00%
Homicide	3	12.00%
Suicide	1	4.00%
<b><i>SUID</i></b>	<b>24</b>	
Undetermined	24	100%
<b><i>All other FFT Accidents</i></b>	<b>80</b>	

**NKY Totals by Specific Fatal Event**

<b>Fatal Event</b>	<b>Total</b>	<b>Percentage</b>
<b><i>Overdoses</i></b>	<b>101</b>	
Accidental	100	99%
Suicide	1	1%
<b><i>MVC</i></b>	<b>42</b>	
Accidental	42	100%
<b><i>GSW</i></b>	<b>31</b>	
Homicide	4	12.9%
Suicide	27	87.10%
<b><i>Drowning</i></b>	<b>7</b>	
Accident	6	85.71%
Suicide	1	14.29%
<b><i>Fire</i></b>	<b>6</b>	
Accident	6	100%
<b><i>SUID</i></b>	<b>4</b>	
Undetermined	4	100%
<b><i>All other NKY Accidents</i></b>	<b>12</b>	

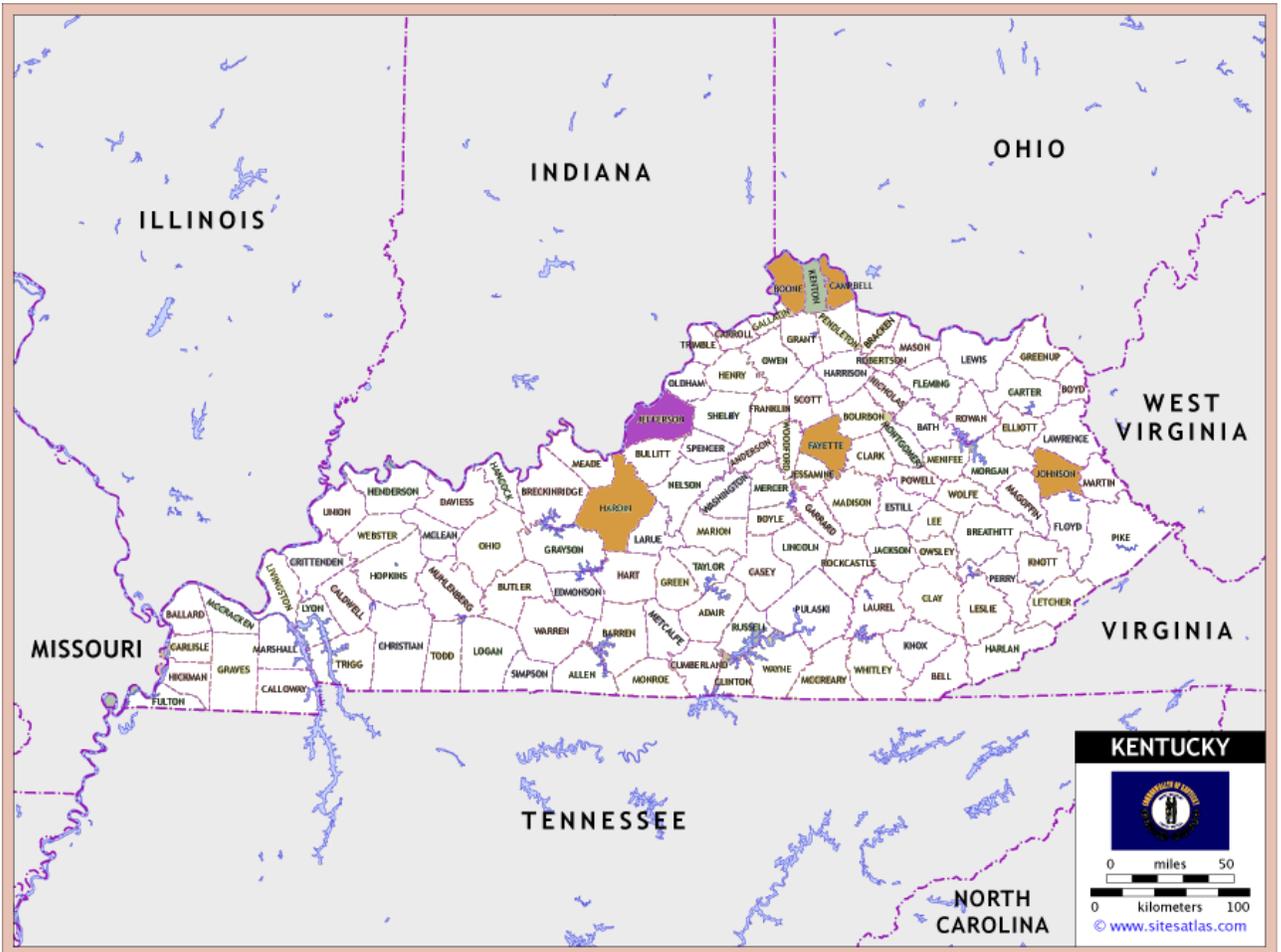
**WKY Totals by Specific Fatal Event**

<b>Fatal Event</b>	<b>Total</b>	<b>Percentage</b>
<b><i>Overdoses</i></b>	<b>34</b>	
Accidental	27	79.4%
Complications of Chronic Use	2	5.88%
Suicide	3	8.82%
Undetermined	2	5.88%
<b><i>MVC</i></b>	<b>23</b>	
Accidental	22	95.65%
Undetermined	1	4.35%
<b><i>GSW</i></b>	<b>34</b>	
Homicide	9	26.47%
Suicide	25	73.53%
<b><i>Drowning</i></b>	<b>8</b>	
Accident	6	75%
Suicide	1	12.5%
Undetermined	1	12.5%
<b><i>Fire</i></b>	<b>12</b>	
Accident	12	100%
<b><i>SUID</i></b>	<b>6</b>	
Undetermined	6	100%
<b><i>All other WKY Accidents</i></b>	<b>19</b>	



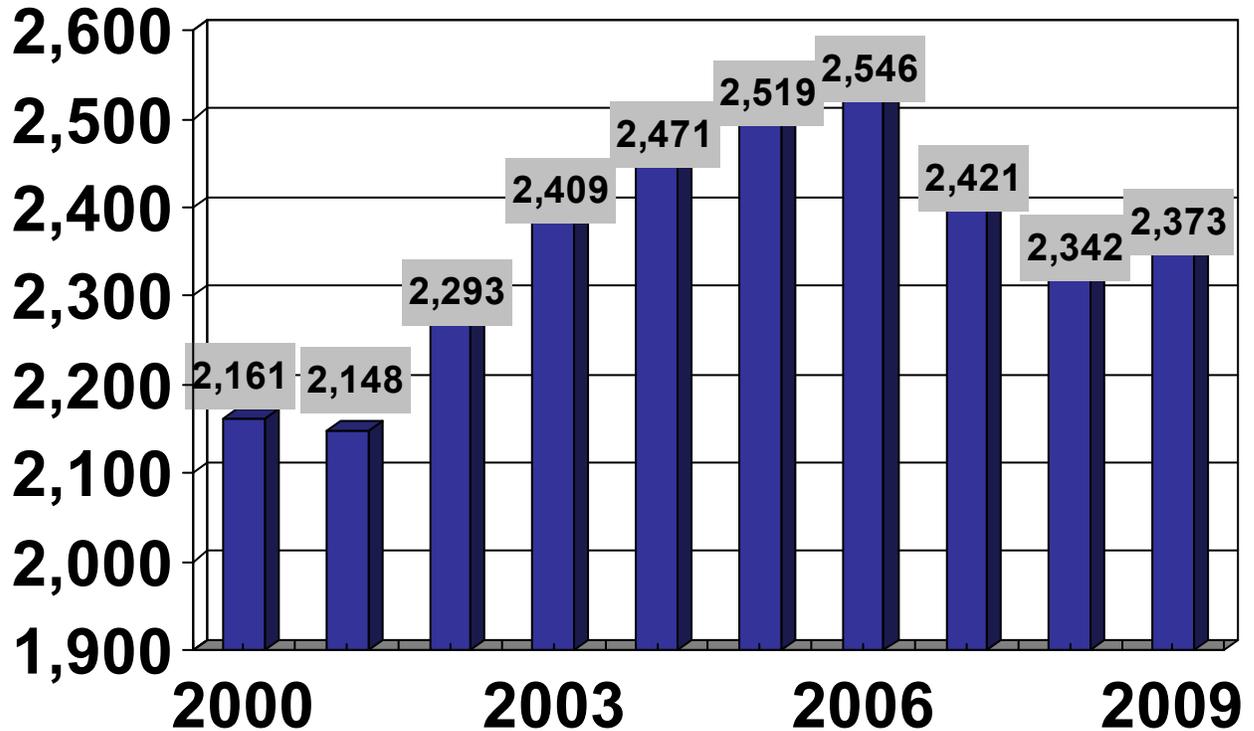
## Total Statewide Overdoses Sent for Autopsy by Locality of Death, 2009 Figure 3

<b>WHITE</b>	<b>0-10</b>
<b>ORANGE</b>	<b>11-20</b>
<b>YELLOW</b>	<b>21-30</b>
<b>BLUE</b>	<b>31-40</b>
<b>GREEN</b>	<b>41-50</b>
<b>GREY</b>	<b>51-100</b>
<b>PURPLE</b>	<b>101-120</b>
*113 is Highest*	



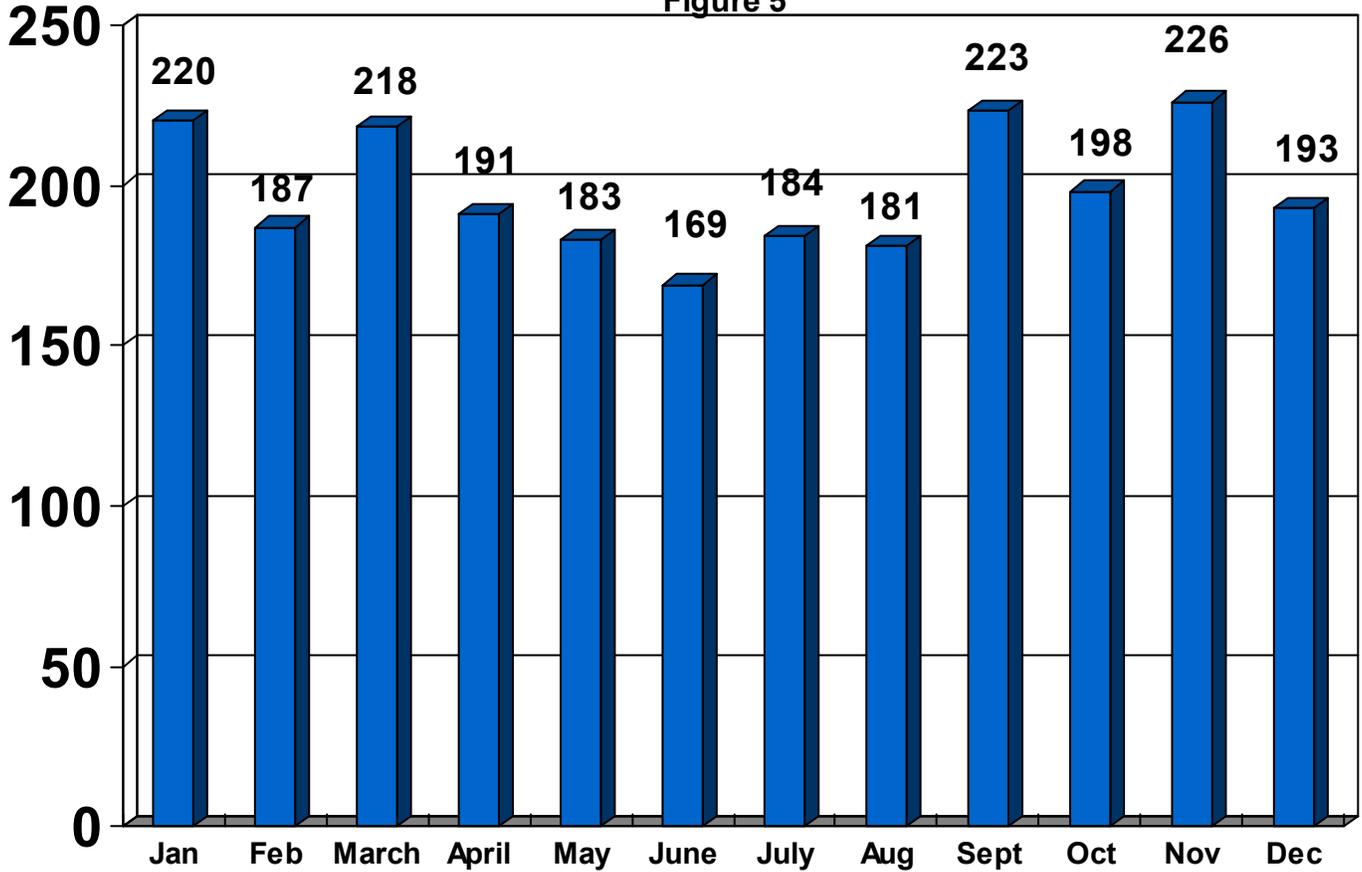
# Total Statewide Cases by Year of Autopsy, 2000-2009

Figure 4



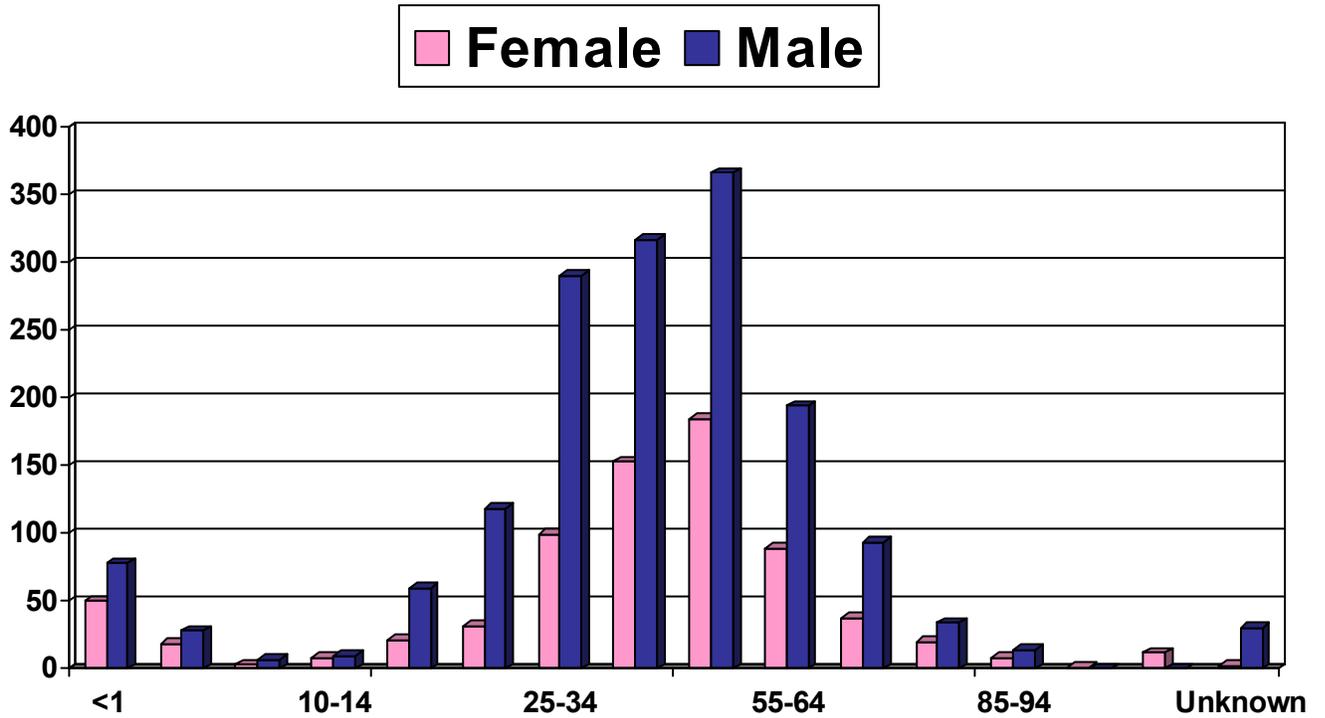
### Total Statewide Cases by Month of Autopsy, 2009

Figure 5



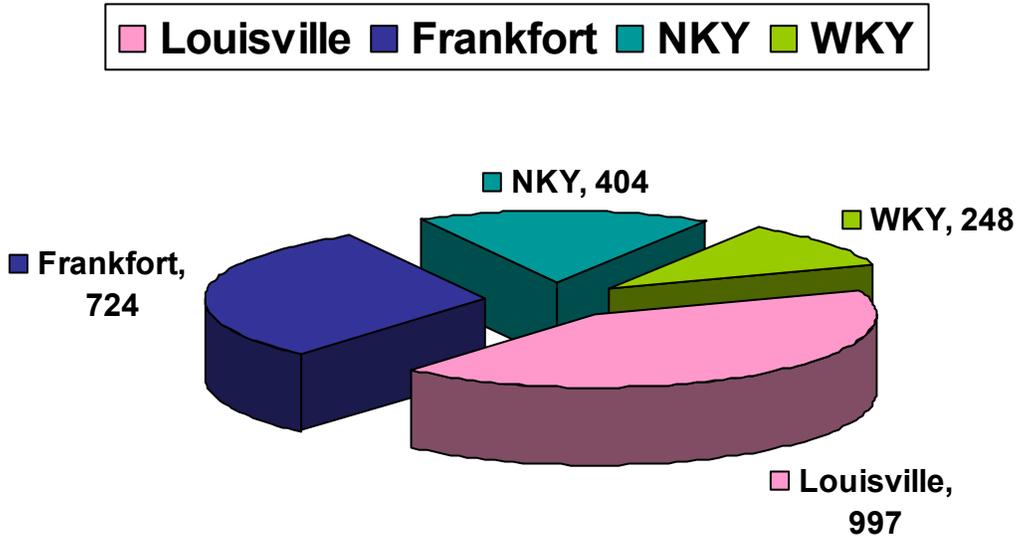
# 2009 Statewide Cases by Age and Gender

Figure 6



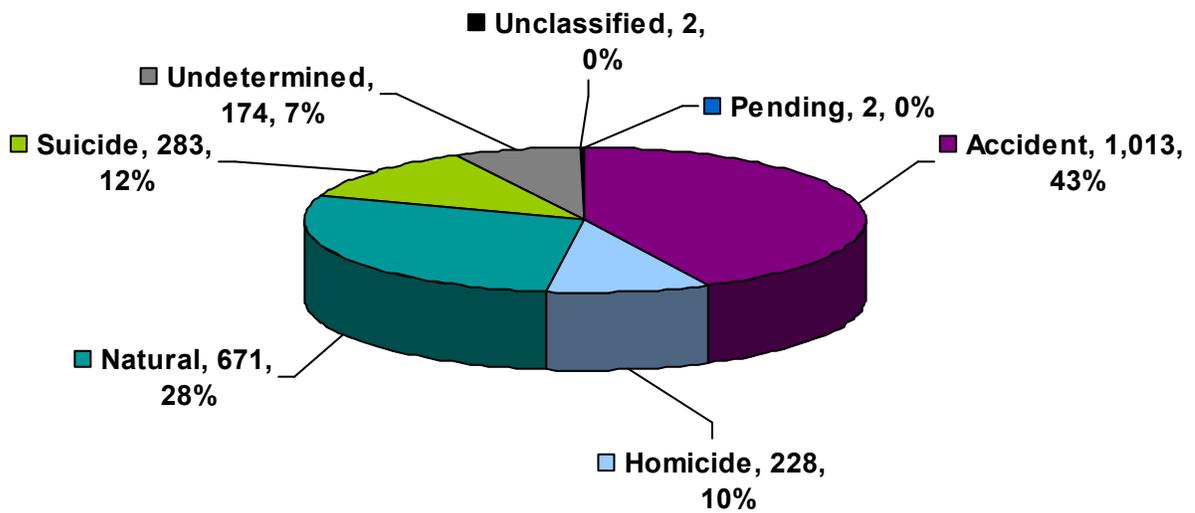
## 2009 Statewide Autopsy Examinations

Figure 7



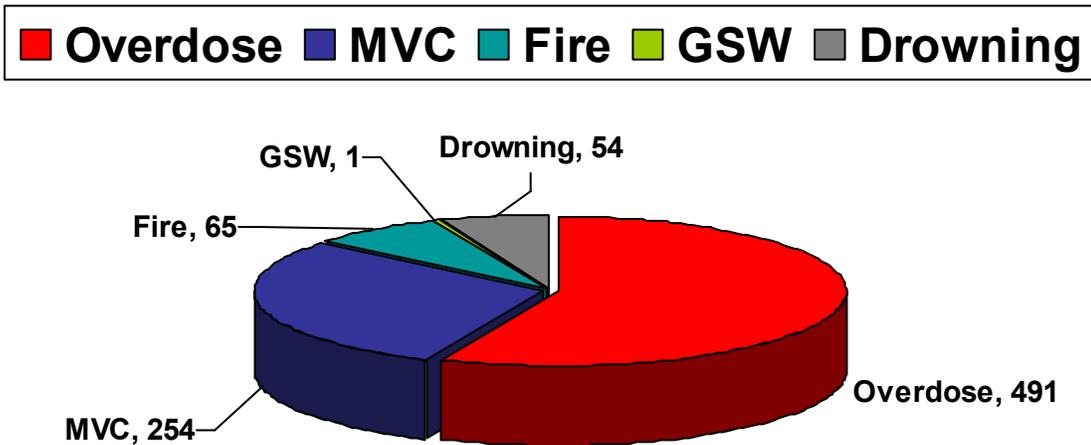
# 2009 Statewide Cases by Manner of Death

Figure 8



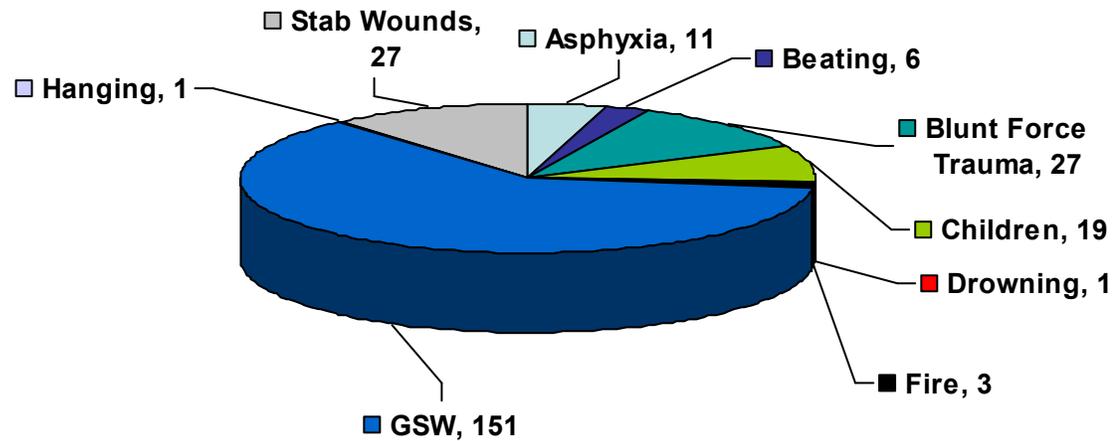
## 2009 Statewide Accidents by Cause of Death

Figure 9



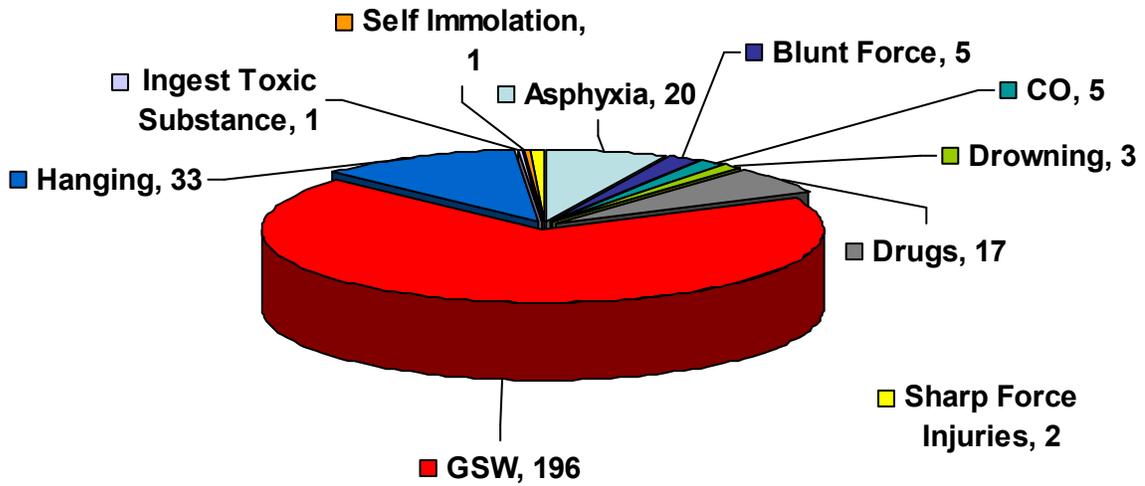
# 2009 Statewide Homicides by Cause of Death

Figure 10



# 2009 Statewide Suicides by Cause of Death

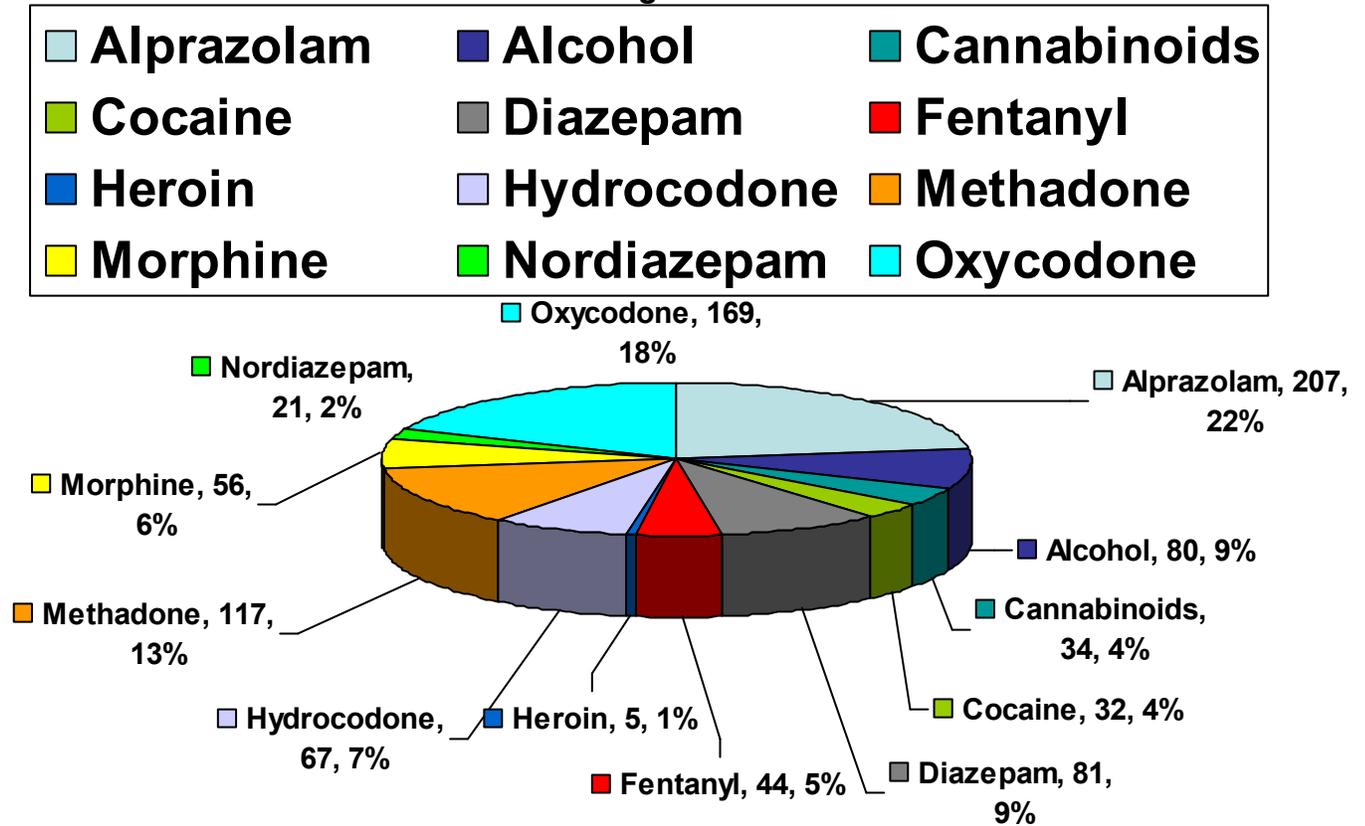
Figure 11



## 2009 Statewide Drugs Most Frequently Detected in the Blood of Overdose

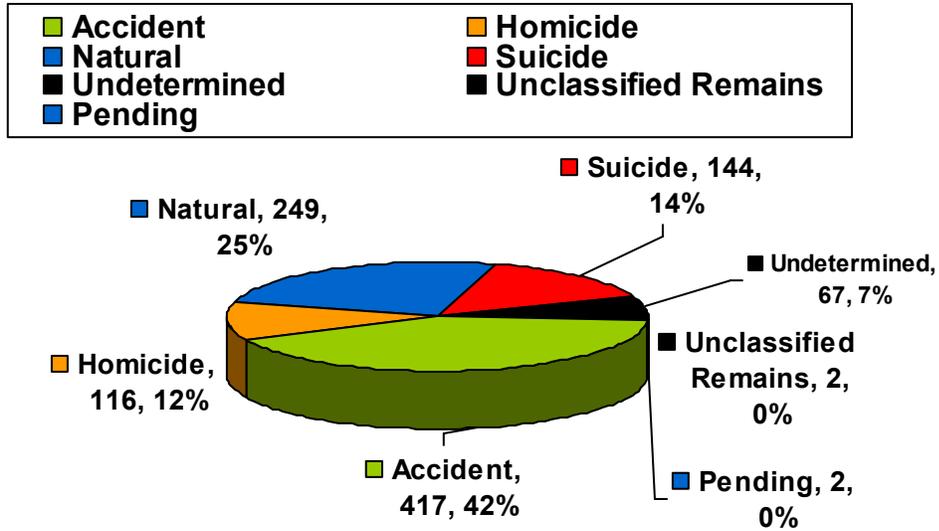
### Victims

Figure 12



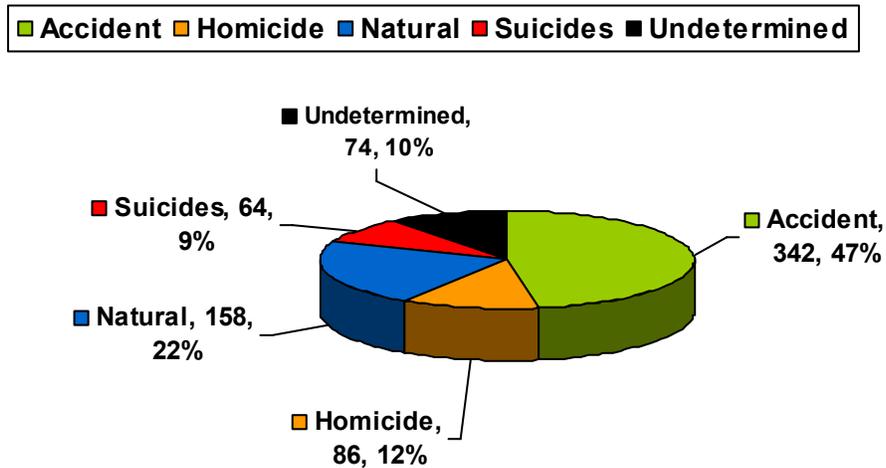
## 2009 Louisville Cases by Manner of Death

Figure 13



## 2009 Frankfort Cases by Manner of Death

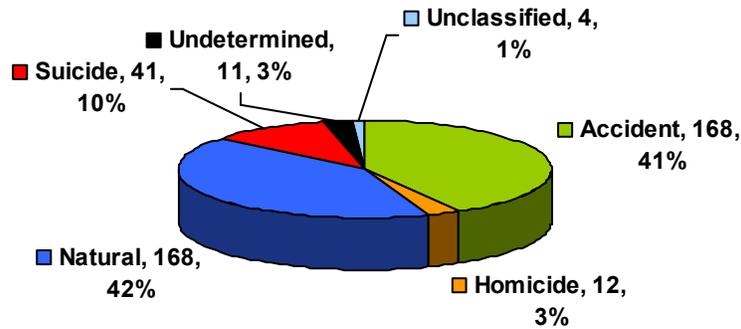
Figure 14



## 2009 Northern Kentucky Cases by Manner of Death

Figure 15

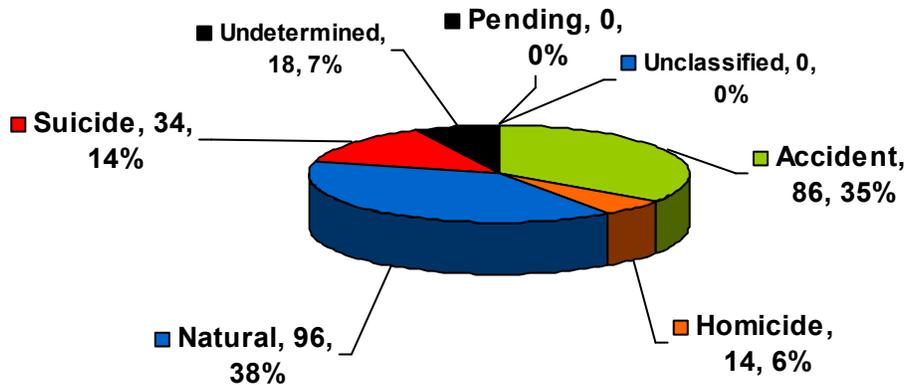
■ Accident   
 ■ Homicide   
 ■ Natural   
 ■ Suicide   
 ■ Undetermined   
 ■ Unclassified



## 2009 Western Kentucky Cases by Manner of Death

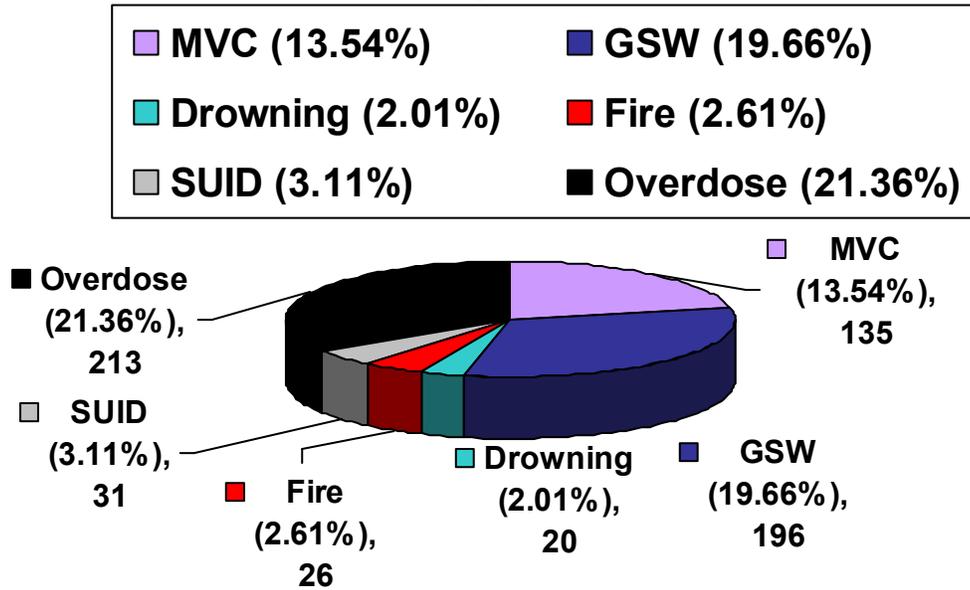
Figure 16

■ Accident   
 ■ Homicide   
 ■ Natural   
 ■ Suicide   
 ■ Undetermined   
 ■ Pending   
 ■ Unclassified



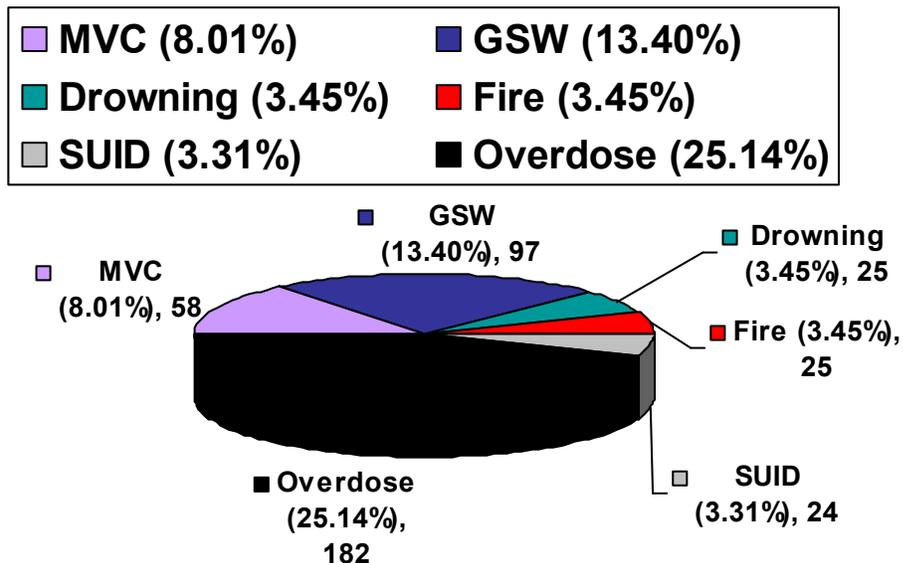
## 2009 Specific Common Causes of Death: Louisville Cases by Type

Figure 17



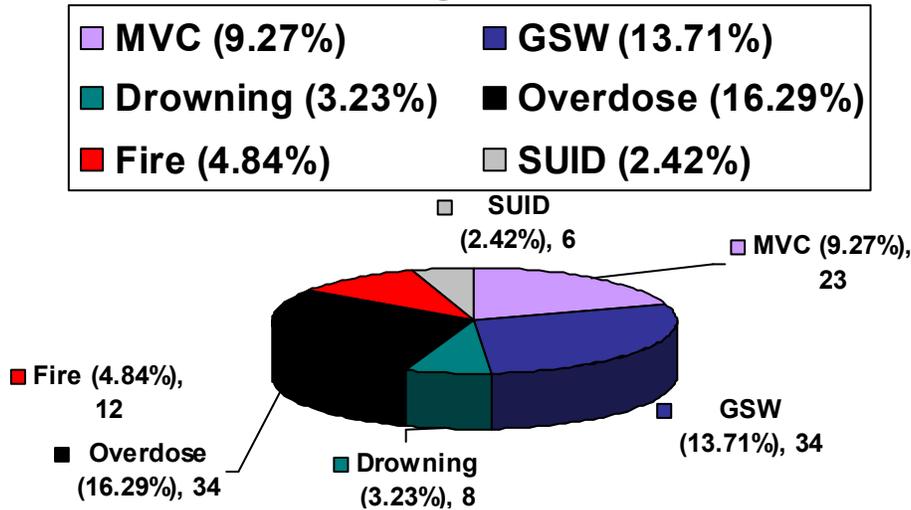
## 2009 Specific Common Causes of Death: Frankfort Cases by Type

Figure 18



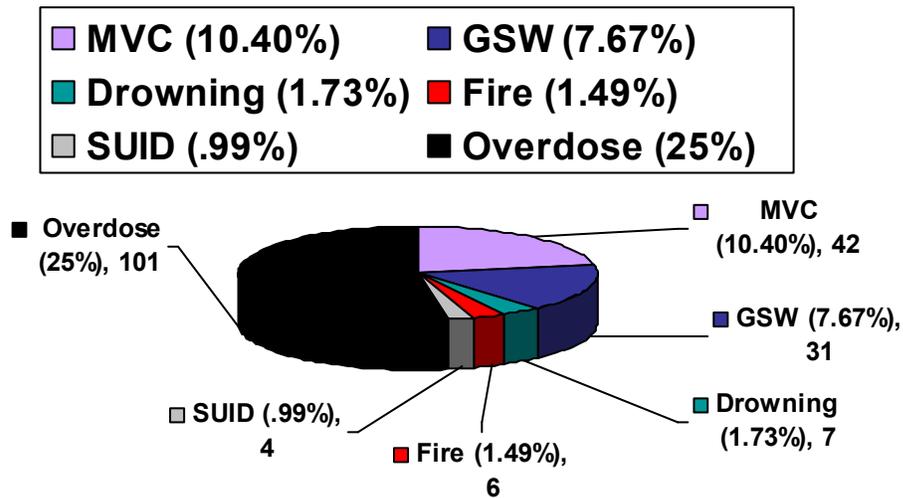
### 2009 Specific Common Causes of Death: Western Kentucky Cases by Type

Figure 19



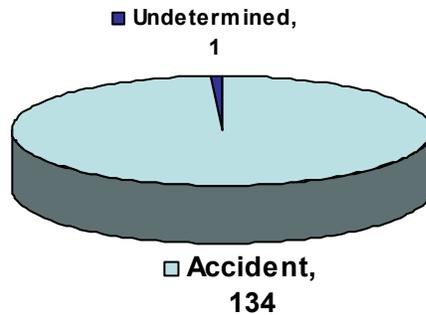
### 2009 Specific Common Causes of Death: Northern Kentucky Cases by Type

Figure 20



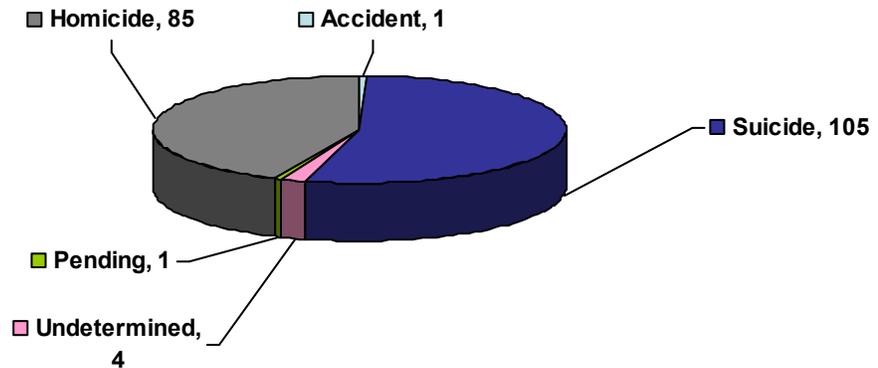
### Louisville MVC by Manner of Death

Figure 21



### Louisville GSW by Manner of Death

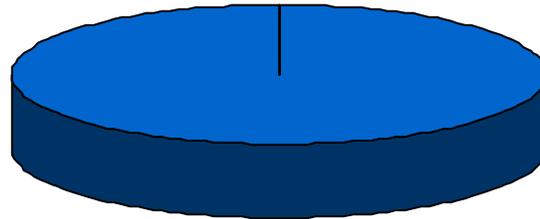
Figure 22



## Louisville Drowning by Manner of Death

Figure 23

■ Accident

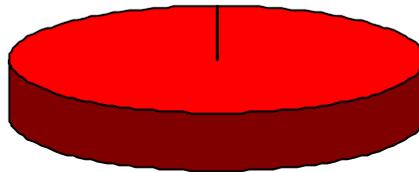


■ Accident, 20

## Louisville Fire by Manner of Death

Figure 24

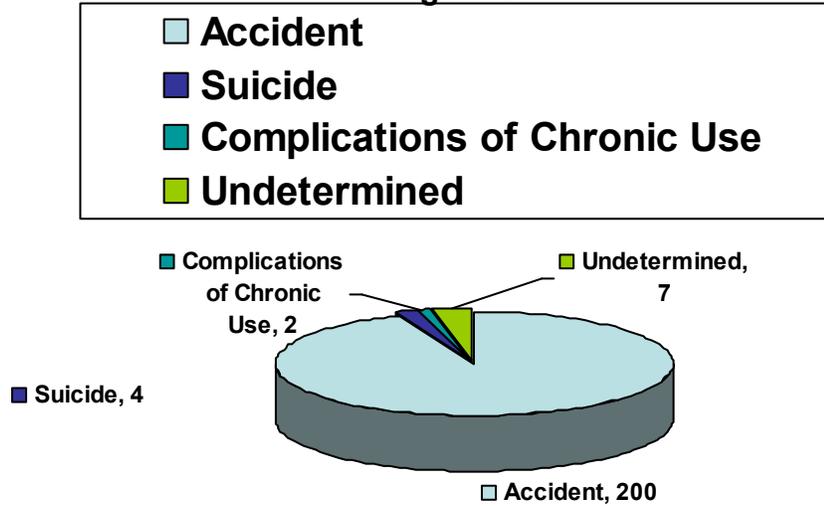
■ Accident



■ Accident, 26

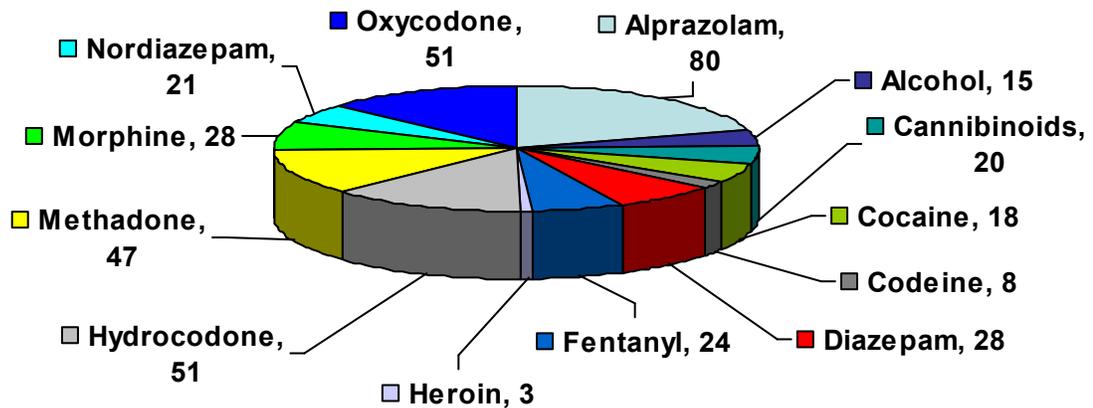
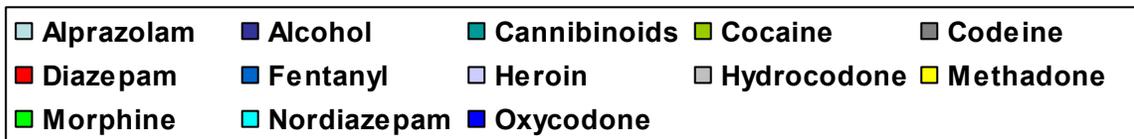
## Louisville Overdose by Manner of Death

Figure 25



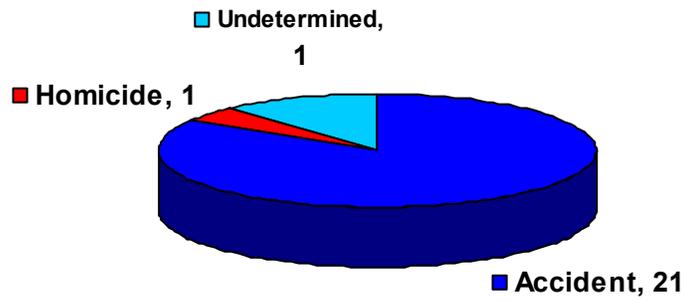
## Louisville Most Frequently Detected Drugs in the Blood of Overdose Victims

Figure 26



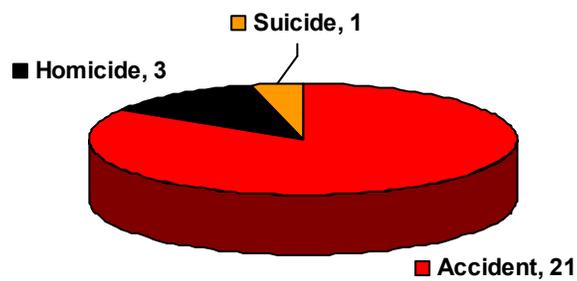
### Frankfort Drowning by Manner of Death

Figure 27



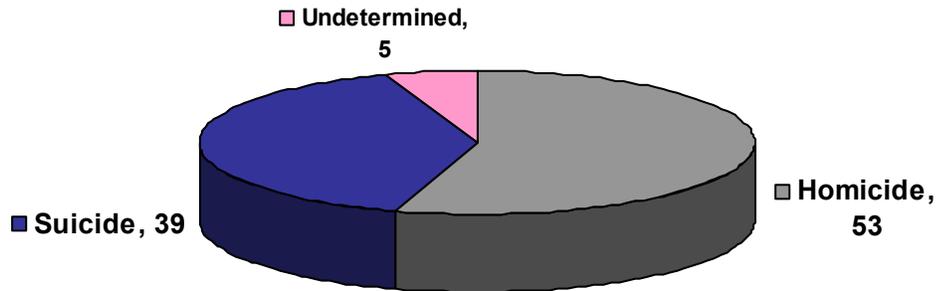
### Frankfort Fire by Manner of Death

Figure 28



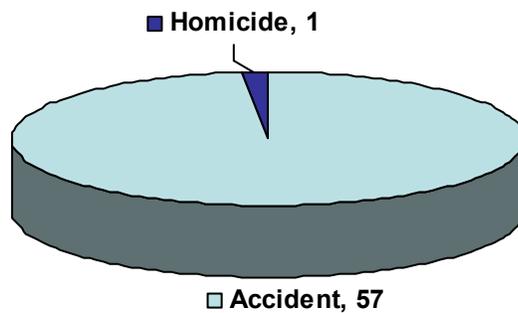
### Frankfort GSW by Manner of Death

Figure 29



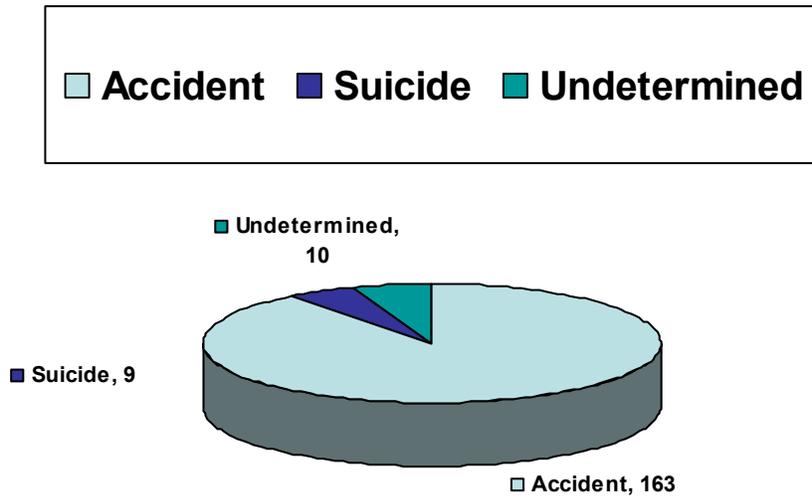
### Frankfort MVC by Manner of Death

Figure 30



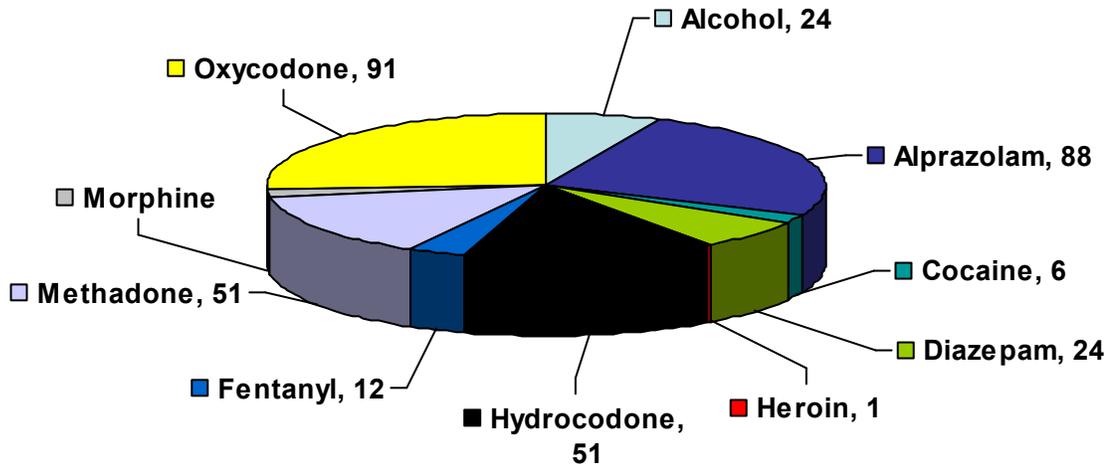
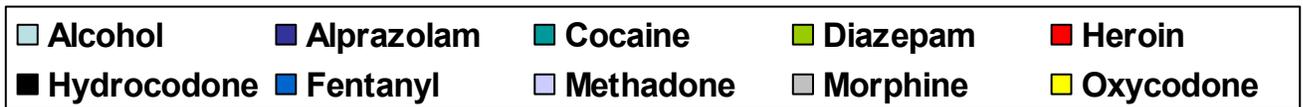
### Frankfort Overdose by Manner of Death

Figure 31



### Frankfort Most Frequently Detected Drugs in the Blood of Overdose Victims

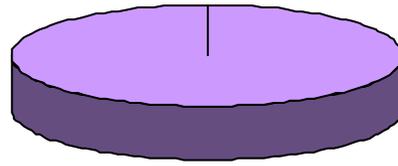
Figure 32



### Northern Kentucky MVC by Manner of Death

Figure 33

■ Accident

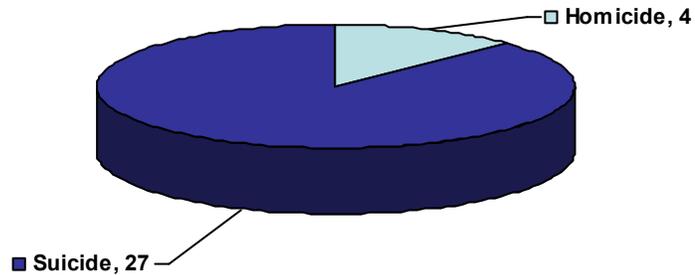


■ Accident, 42

### Northern Kentucky GSW by Manner of Death

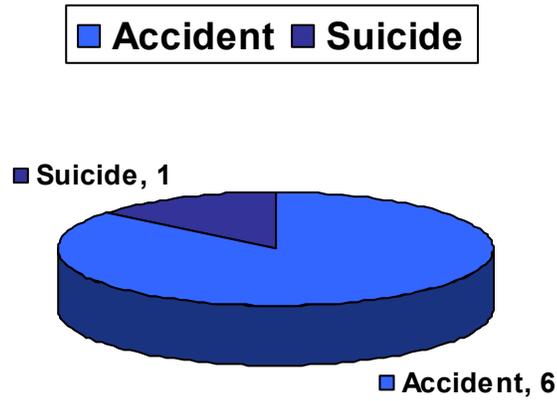
Figure 34

■ Homicide ■ Suicide



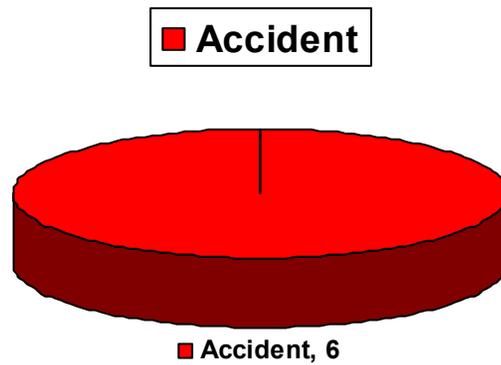
### Northern Kentucky Drowning by Manner of Death

Figure 35



### Northern Kentucky Fire by Manner of Death

Figure 36



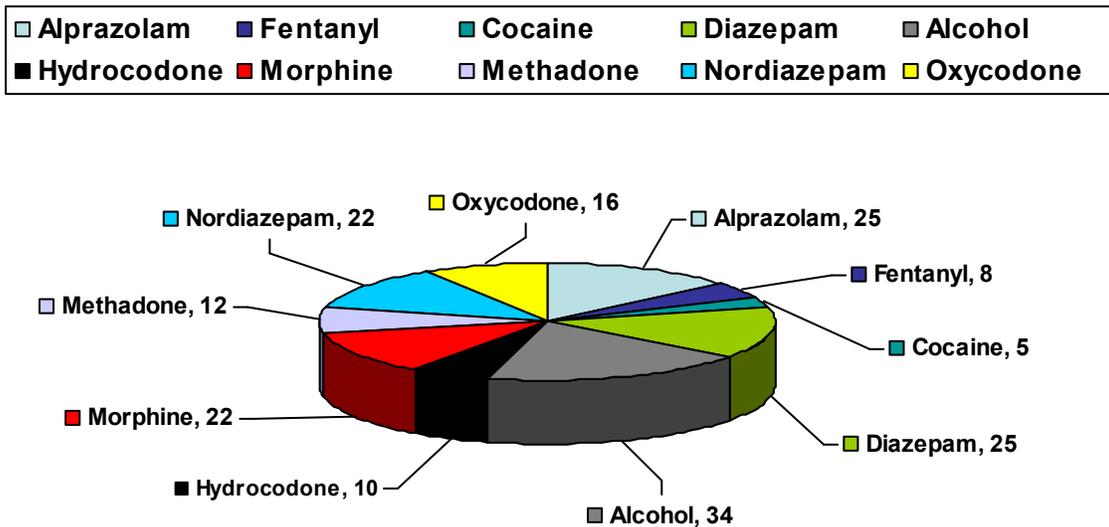
### Northern Kentucky Overdose by Manner of Death

Figure 37



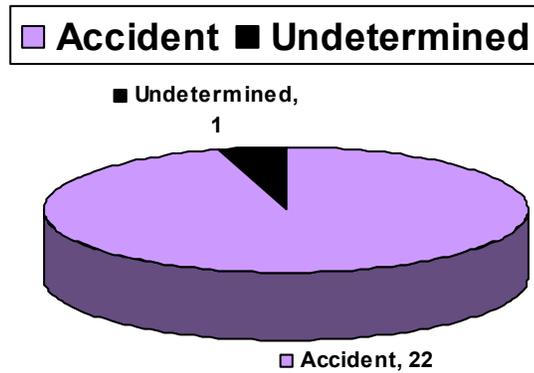
### Northern Kentucky Most Frequently Detected Drugs in the Blood of Overdose Victims

Figure 38



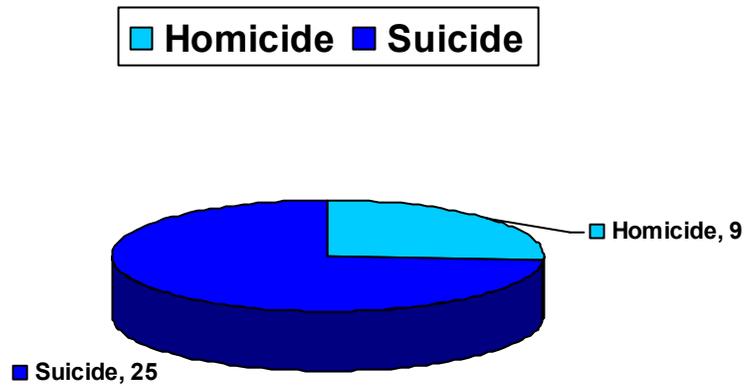
### Western Kentucky MVC by Manner of Death

Figure 39



### Western Kentucky GSW by Manner of Death

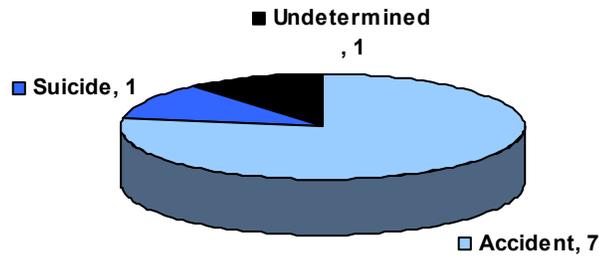
Figure 40



### Western Kentucky Drowning by Manner of Death

Figure 41

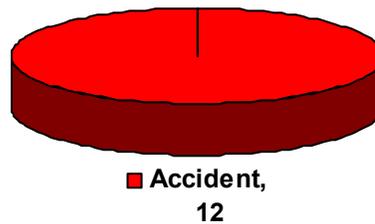
■ Accident ■ Suicide ■ Undetermined



### Western Kentucky Fire by Manner of Death

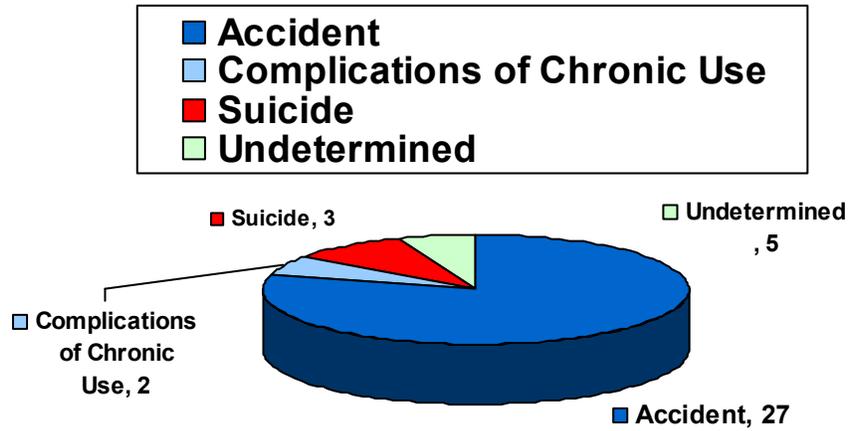
Figure 42

■ Accident



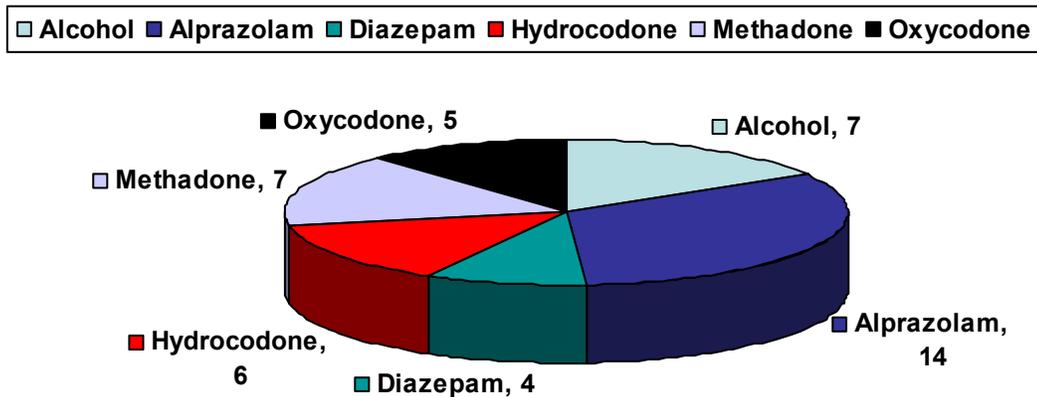
### Western Kentucky Overdose by Manner of Death

Figure 43



### Western Kentucky Most Frequently Detected Drugs in the Blood of Overdose Victims

Figure 44



## ***Glossary***

**Accident** – The *manner of death* used when, in other than *natural deaths*, there is no evidence of intent. The death occurs as a result of an unforeseen event.

**Autopsy** – A detailed postmortem external and internal examination of a body to determine cause of death.

**Homicide** – The *manner of death* in which death results from the intentional harm of one person by another. The medical examiner does not determine whether or not a criminal act has occurred.

**Manner of Death** – The general category of the condition, circumstances or event, which causes the death. The categories are *natural, accident, homicide, suicide and undetermined*.

**Natural** – The *manner of death* used when solely a disease causes death. If death is hastened by an injury, the *manner of death* is not considered natural.

**Office of the Medical Examiner** - the Office of the Medical Examiner investigates deaths occurring in the state of Kentucky, as authorized by Kentucky's elected coroners. The staff assists Kentucky coroners and law enforcement agencies in all aspects of death investigations by determining the cause and manner of death, identification of the deceased, and collection and interpretation of trace evidence.

**Suicide** – The *manner of death* in which death results from intentional act by one's self.

**Unclassified** – Are cases in which Medical Examiner involvement was for purposes other than for determining the *cause and manner* of death—e.g. tissue where no products of conception were identified; exhumation for DNA sampling only.

**Undetermined** – The *manner of death* for deaths in which there is insufficient information to assign another manner.

## **MEDICAL EXAMINER DISTRICTS**

The **Office of the Chief Medical Examiner** in Louisville covers the following **CENTRAL** *counties* in Kentucky and Southern IN:

Adair, Allen, Barren, Breckinridge, Bullitt, Butler, Carroll, Casey, Clinton, Cumberland, Edmonson, Grayson, Green, Hancock, Hardin, Hart, Henry, Jefferson, Larue, Marion, Meade, Metcalfe, Monroe, Nelson, Oldham, Russell, Shelby, Simpson, Spencer, Taylor, Trimbell, and Warren.

*Southern Indiana counties:* Clark, Crawford, Dearborn, Dubois, Floyd, Harrison, Jackson, Jefferson, Ohio, Orange, Perry, Scott, Spencer, Switzerland, Warrick, and Washington.

\*Additionally, the OCME provides weekend, holiday, and vacation coverage for the **Western** counties delineated below.

The **Madisonville** office covers the following **WESTERN** *counties*:

Ballard, Caldwell, Calloway, Carlisle, Christian, Crittenden, Daviess, Fulton, Graves, Henderson, Hickman, Hopkins, Livingston, Logan, Lyon, Marshall, McCracken, McLean, Muhlenberg, Ohio, Todd, Trigg, Union, and Webster.

The **Frankfort** office covers the following **EASTERN** *counties*:

Anderson, Bath, Bell, Bourbon, Boyle, Boyd, Breathitt, Carter, Clark, Clay, Elliott, Estill, Fayette, Floyd, Franklin, Garrard, Harlan, Harrison, Jackson, Jessamine, Johnson, Knott, Knox, Laurel, Lawrence, Lee, Leslie, Letcher, Lincoln, Madison, Magoffin, Martin, McCreary, Menifee, Mercer, Montgomery, Morgan, Nicholas, Owsley, Perry, Pike, Powell, Pulaski, Rockcastle, Rowan, Scott, Washington, Wayne, Whitley, Wolf, and Woodford.

The **Northern Kentucky** office covers the following **NORTHERN** *counties*:

Boone, Bracken, Campbell, Fleming, Gallatin, Grant, Greenup, Kenton, Lewis, Mason, Owen, Pendleton, and Robertson.