



# Office of the Medical Examiner 2012 Calendar Year Annual Report



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**Reviewed and Revised by:**  
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**Office of the Medical Examiner  
State of Kentucky  
Physician/Doctorate Staff**

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*Chief Medical Examiner*

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*Associate Chief Medical Examiner*

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**Michael W. Johnson, PhD, MD (Through October 2012)**

**Office of the Associate Medical Examiner Frankfort, KY**

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**Victoria Graham, MD**  
**Greg Davis, MD (part-time)**

**Western Kentucky Medical Examiner's Office Madisonville, KY**

**Not operational for 2012**  
**Resumed operation January 1, 2013**

**Northern Kentucky Medical Examiner's Office Ft. Thomas, KY**

**Charles Stephens, MD**  
**Gregory Wanger, MD**

**Office of the Medical Examiner  
2012 Annual Report  
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**Western Kentucky Medical Examiner Data is not included for calendar year 2012.**  
**Only one case, remains, was examined at the facility.**

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## 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 determination of 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 2,402 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—2012

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. This office was not performing cases in 2012 due to lack of a forensic pathologist.
- 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.



## OUR MISSION

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.

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### *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.

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### *Summary Highlights*

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Aforementioned above, the three regional medical examiner offices (OCME, OACME, and NKME) together performed 2,402 postmortem examinations in 2012. All forensic pathology examinations from Western Kentucky were performed at the OCME in Louisville in 2012.

## 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. Furthermore, the OACME plays an active role in the University of Kentucky, Department of Pathology.

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### *Forensic Pathologist Fellowship Program*

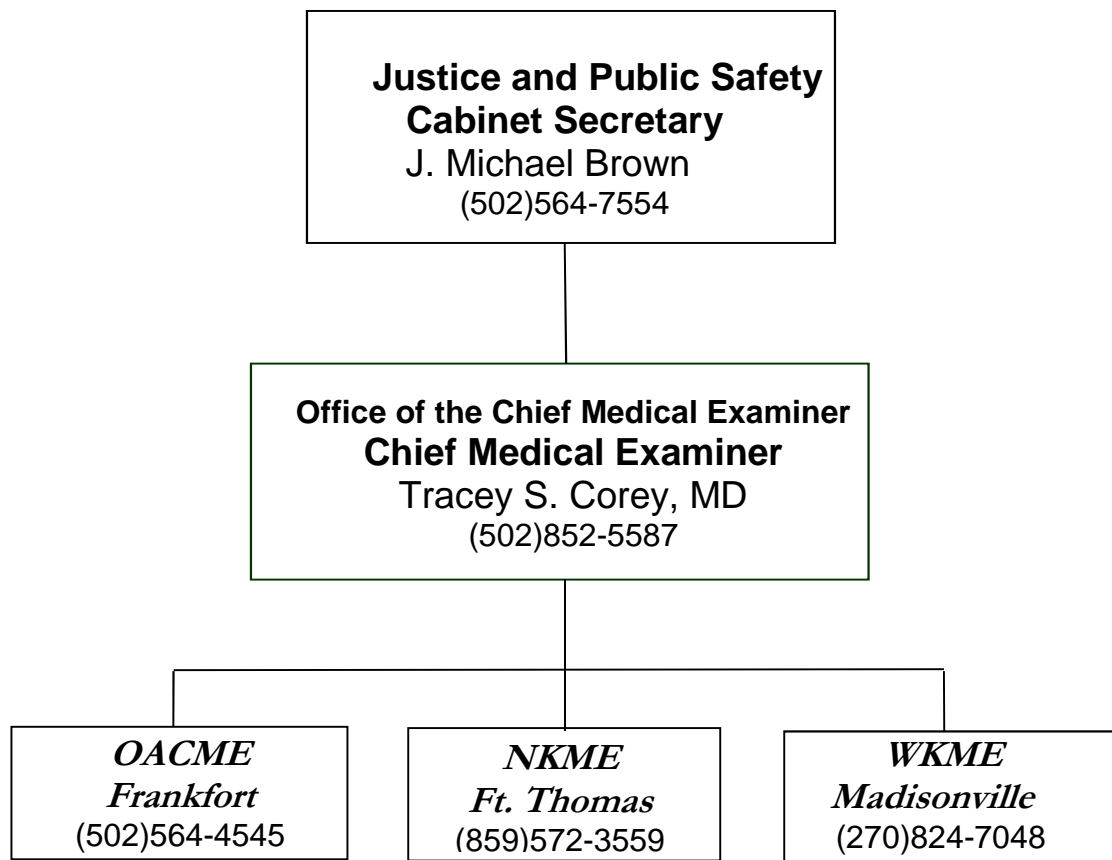
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The University of Louisville Division of Forensic Pathology Fellowship program is a one-year extensive training program in the subspecialty of forensic pathology. The trainee works with all of the attending physicians, gaining exposure to a wide spectrum 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.

<b>ME CASES 2012</b>	
Figure 2	
<b>Total</b>	<b>2,402</b>
<b>OCME Louisville</b>	<b>1,356</b>
<b>OACME Frankfort</b>	<b>623</b>
<b>NKME Ft. Thomas</b>	<b>423</b>
<b>*WKME Madisonville</b>	<b>0</b>

\*All forensic pathology examinations from Western Kentucky were performed at the OCME in Louisville in 2012.

### Statewide Medical Examiner Case Totals 2012

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 = 2,402

STATEWIDE CASES BY KENTUCKY MEDICAL EXAMINER OFFICES		
Figure 3		
Manner	Total	Percentage
Accidents	1,051	43.76%
Homicides	250	10.41%
Naturals	565	23.52%
Suicides	327	13.61%
Undetermined	199	8.28%
Pending Further Information	8	0.33%
Defer to Coroner	2	0.08%
TOTAL	2,402	

**STATEWIDE TOTALS BY SPECIFIC CASE  
TYPES****Figure 4**

Type	Total	Percentage of Statewide Total
Drug Related	732	30.47%
MVCs	252	10.49%
GSWs	372	15.49%
Fire-Related	63	2.62%
Drowning	59	2.46%
Infants <1yr ALL Causes	106	4.41%
SUID	50	2.08%
Children 1yr ≤ 12yrs ALL Causes	59	2.46%

STATEWIDE OVERDOSES BY KENTUCKY MEDICAL EXAMINER OFFICES Figure 5		
Manner	Total	Percentage
Accidents	578	78.96%
Homicide	1	0.14%
Suicides	34	4.64%
Undetermined	45	6.28%
Pending Further Information	20	2.73%
Complications of Chronic Use	52	7.10%
Defer to Coroner	1	0.14%
<b>TOTAL</b>	<b>732</b>	<b>100%</b>

STATEWIDE OVERDOSES CONTAINING HEROIN BY KENTUCKY MEDICAL EXAMINER OFFICES Figure 6		
Manner	Total	Percentage
Accidents	140	97.90%
Undetermined	2	1.40%
Pending Further Information	1	0.70%
<b>TOTAL</b>	<b>143</b>	<b>100%</b>

**Louisville Totals by Some Specific Fatal Event**

<b>Fatal Event</b>	<b>Total Cases</b>	<b>Percentage</b>
<b><i>Drug Related</i></b>	<b>402</b>	<b>29.67%</b>
Accidental	282	70.15%
Homicide	1	0.25%
Suicide	21	5.22%
Natural (Complications of Chronic Use)	46	11.44%
Pending Further Information	20	1.99%
Undetermined	31	7.71%
Defer to Coroner	1	0.25%
Heroin Present	<b>72</b>	<b>17.91%</b>
<b><i>MVC</i></b>	<b>170</b>	<b>12.55%</b>
Accident	166	97.65%
Undetermined/Pending Further Information	2	1.18%
Suicide	2	1.18%
<b><i>GSW</i></b>	<b>242</b>	<b>17.86%</b>
Accident	3	1.24%
Homicide	102	42.15%
Suicide	129	53.31%
Undetermined/Pending Further Information	8	3.31%
<b><i>DROWNING</i></b>	<b>39</b>	<b>2.88%</b>
Accident	27	69.23%
Suicide	5	12.82%
Undetermined/Pending Further Information	7	17.95%
<b><i>FIRE</i></b>	<b>24</b>	<b>1.77%</b>
Accident	19	79.17%
Homicide	2	8.33%
Undetermined/Pending Further Information	3	12.50%
<b><i>SUID</i></b>	<b>26</b>	<b>1.92%</b>
Undetermined	26	100%
<b><i>All other Louisville Accidents</i></b>	<b>45</b>	

\*The above does not represent the total number of Louisville cases\*



**Frankfort Totals by Some Specific Fatal Event**

<b>Fatal Event</b>	<b>Total</b>	<b>Percentage</b>
<b><i>Drug Related</i></b>	<b>160</b>	<b>25.64%</b>
Accidental	135	84.38%
Natural (Complications of Chronic Use)	4	2.50%
Suicide	10	6.25%
Undetermined	11	6.88%
Heroin Present	<b>10</b>	<b>6.25%</b>
<b><i>MVC</i></b>	<b>43</b>	<b>6.90%</b>
Accidental	43	100%
<b><i>GSW</i></b>	<b>100</b>	<b>16.05%</b>
Accident	2	2%
Homicide	56	56%
Suicide	41	41%
Undetermined	1	1%
<b><i>Drowning</i></b>	<b>16</b>	<b>2.57%</b>
Accidental	13	81.25%
Undetermined	2	12.50%
Suicide	2	6.25%
<b><i>Fire</i></b>	<b>38</b>	<b>6.10%</b>
Accidental	33	86.84%
Homicide	1	2.63%
Suicide	1	2.63%
Undetermined	3	7.89%
<b><i>SUID</i></b>	<b>21</b>	<b>3.37%</b>
Undetermined	21	100%
<b><i>All other FFT Accidents</i></b>	<b>65</b>	

\*The above does not represent the total number of Frankfort cases\*

**NKY Totals by Specific Fatal Event**

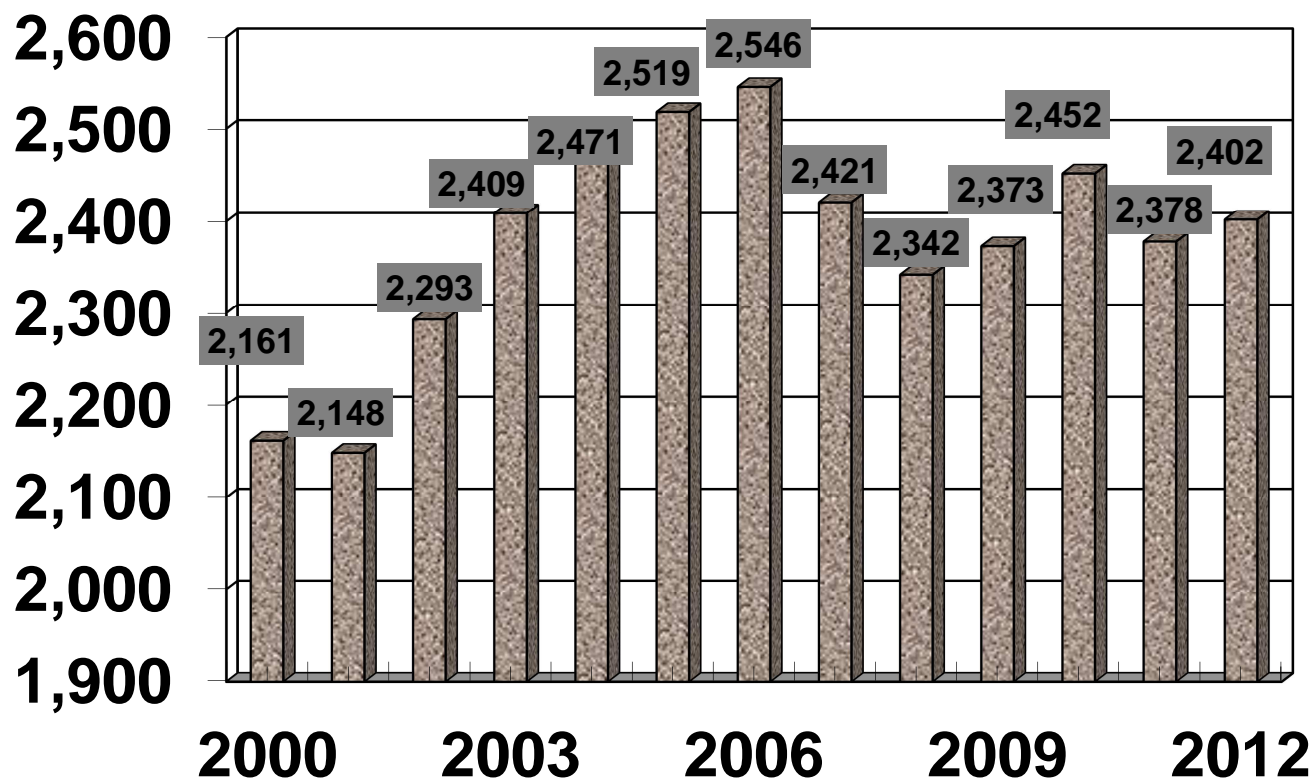
<b>Fatal Event</b>	<b>Total</b>	<b>Percentage</b>
<b><i>Drug Related</i></b>	<b>170</b>	<b>39.34%</b>
Accidental	161	94.71%
Natural (Complications of Chronic Use)	2	1.18%
Suicide	3	1.76%
Undetermined	4	2.35%
Heroin Present	<b>61</b>	<b>35.88%</b>
<b><i>MVC</i></b>	<b>39</b>	<b>9.13%</b>
Accidental	38	97.44%
Natural* Cardiac Event in MVC	1	2.56%
<b><i>GSW</i></b>	<b>30</b>	<b>7.03%</b>
Accident	2	6.67%
Homicide	5	16.67%
Suicide	23	76.67%
<b><i>Drowning</i></b>	<b>4</b>	<b>0.94%</b>
Accident	2	50.00%
Suicide	1	25.00%
Undetermined	1	25.00%
<b><i>Fire</i></b>	<b>1</b>	<b>0.23%</b>
Accident		100%
<b><i>SUID</i></b>	<b>3</b>	<b>0.70%</b>
Undetermined	3	100%
<b><i>All other NKY Accidents</i></b>	<b>14</b>	

\*The above does not represent the total number of Northern Kentucky cases\*

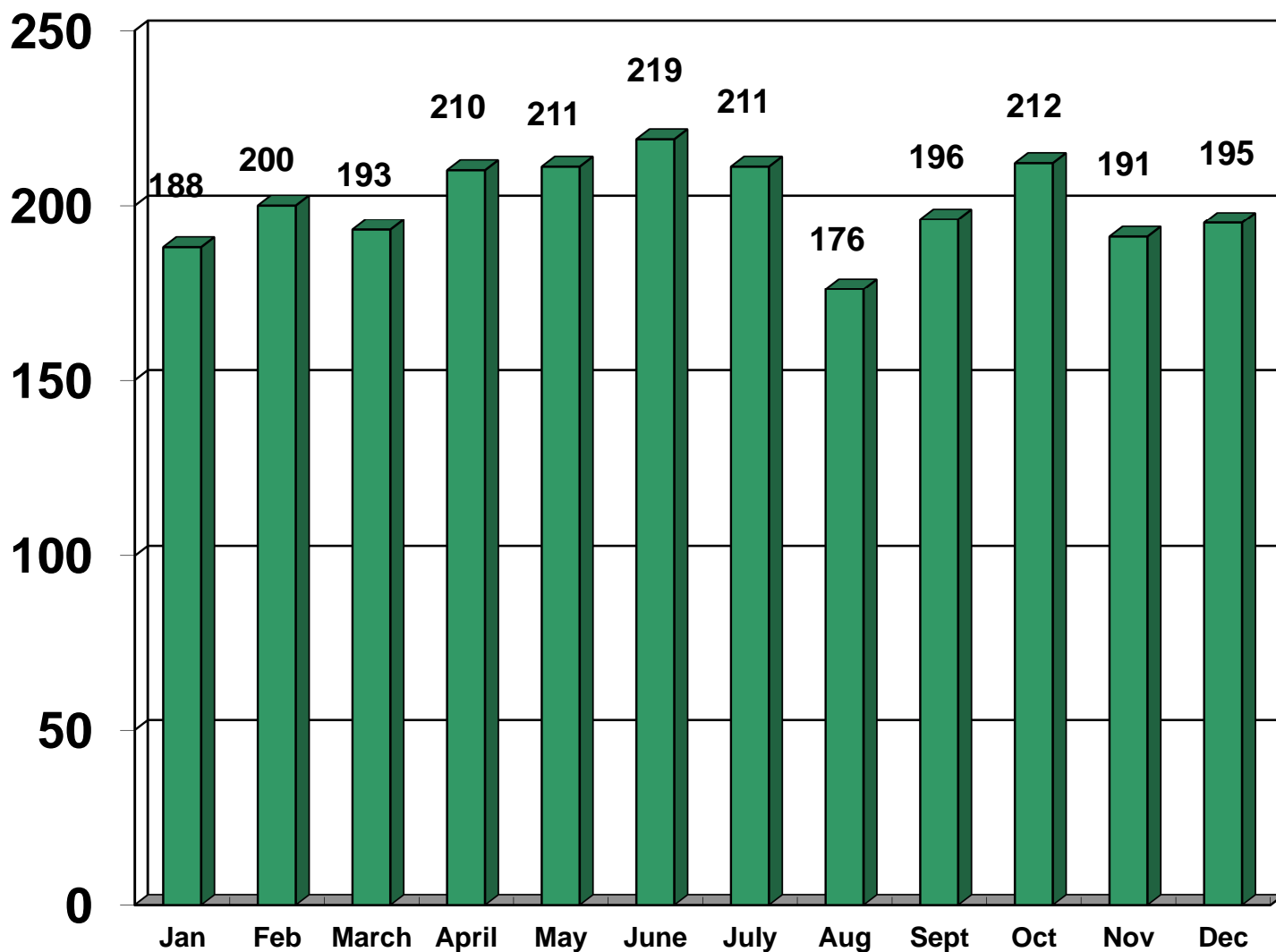




**Statewide Cases by Year of Autopsy 2000-2012**  
**Figure 9**

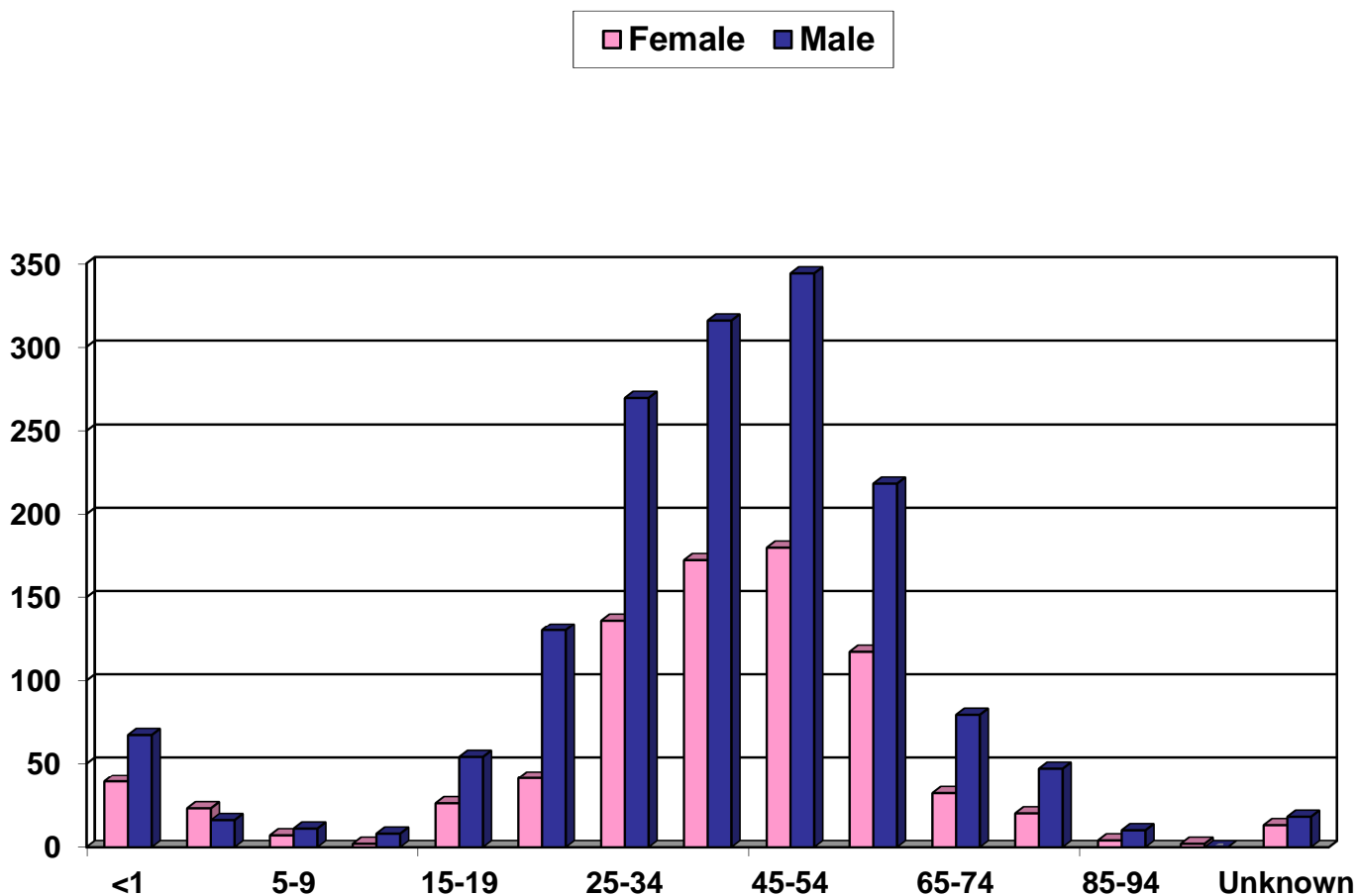


**Statewide Cases by Month of Autopsy, 2012**  
**Figure 10**



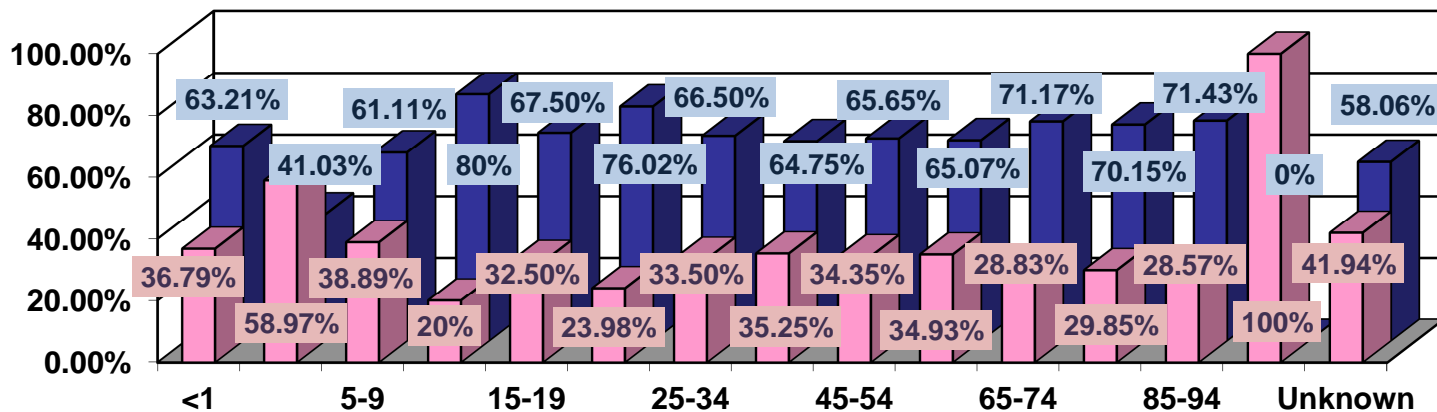


**2012 Statewide Cases by Age and Gender**  
**Figure 11**

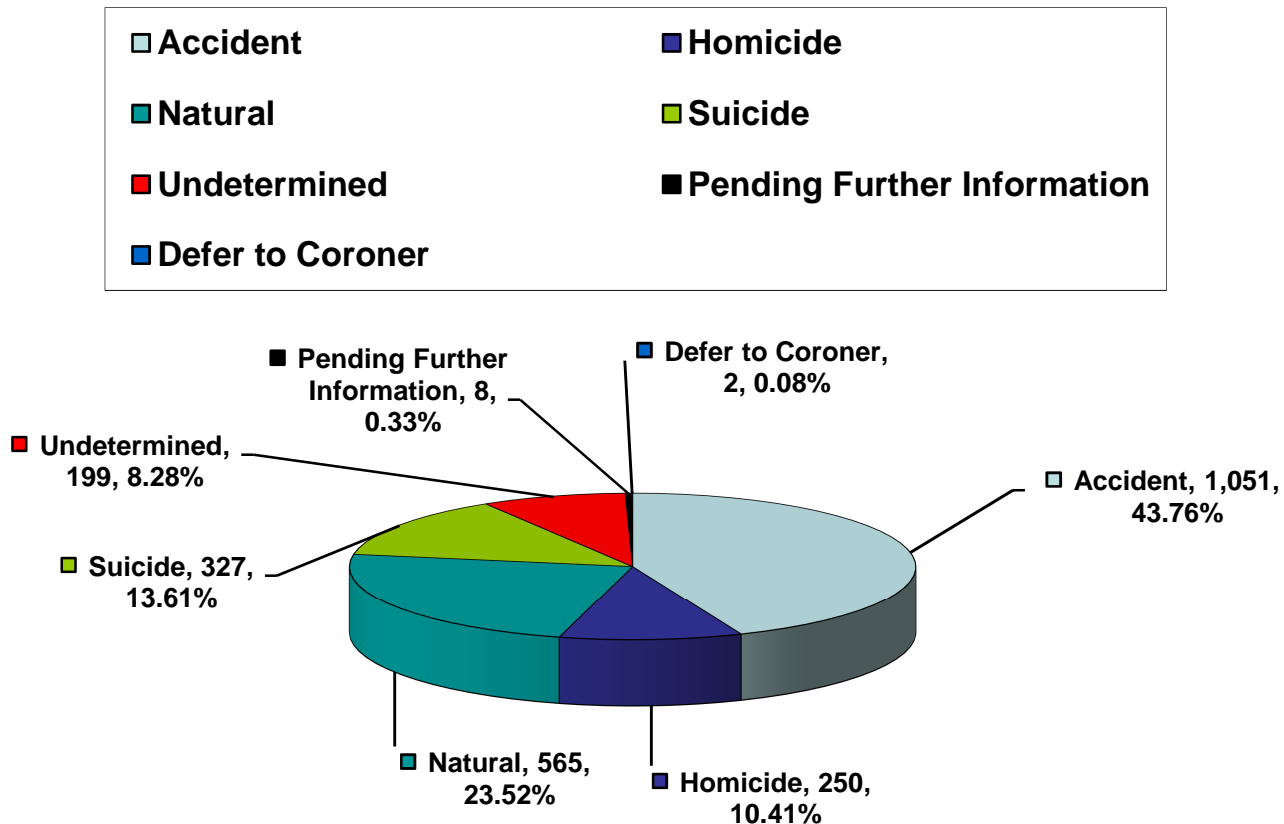


**2012 Statewide Percentages by Age and Gender**  
**Figure 12**

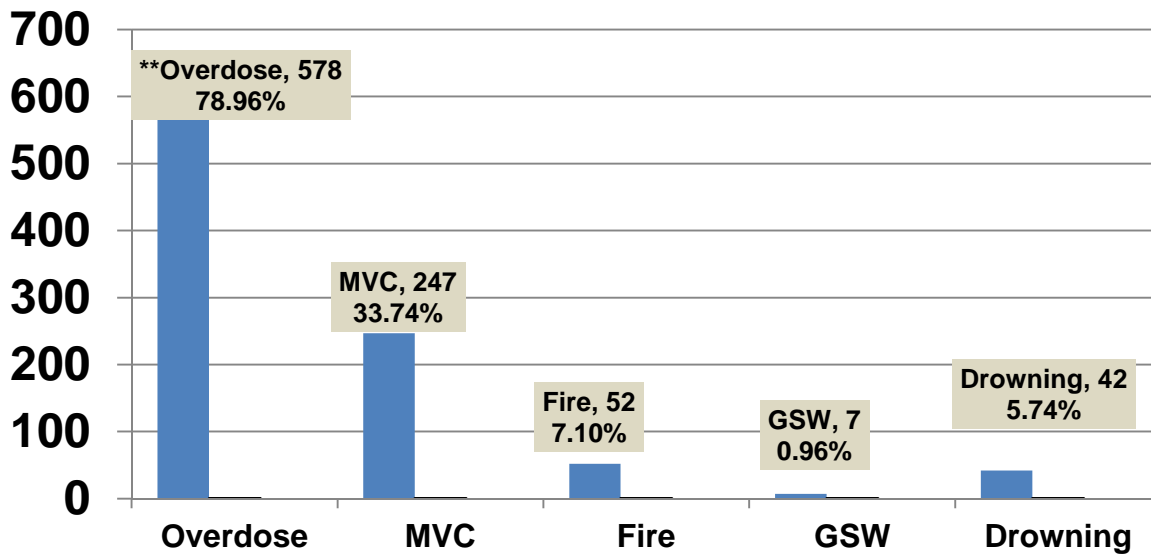
Female Male



## 2012 Statewide Cases by Manner of Death

Figure 13  
TOTAL=2,402

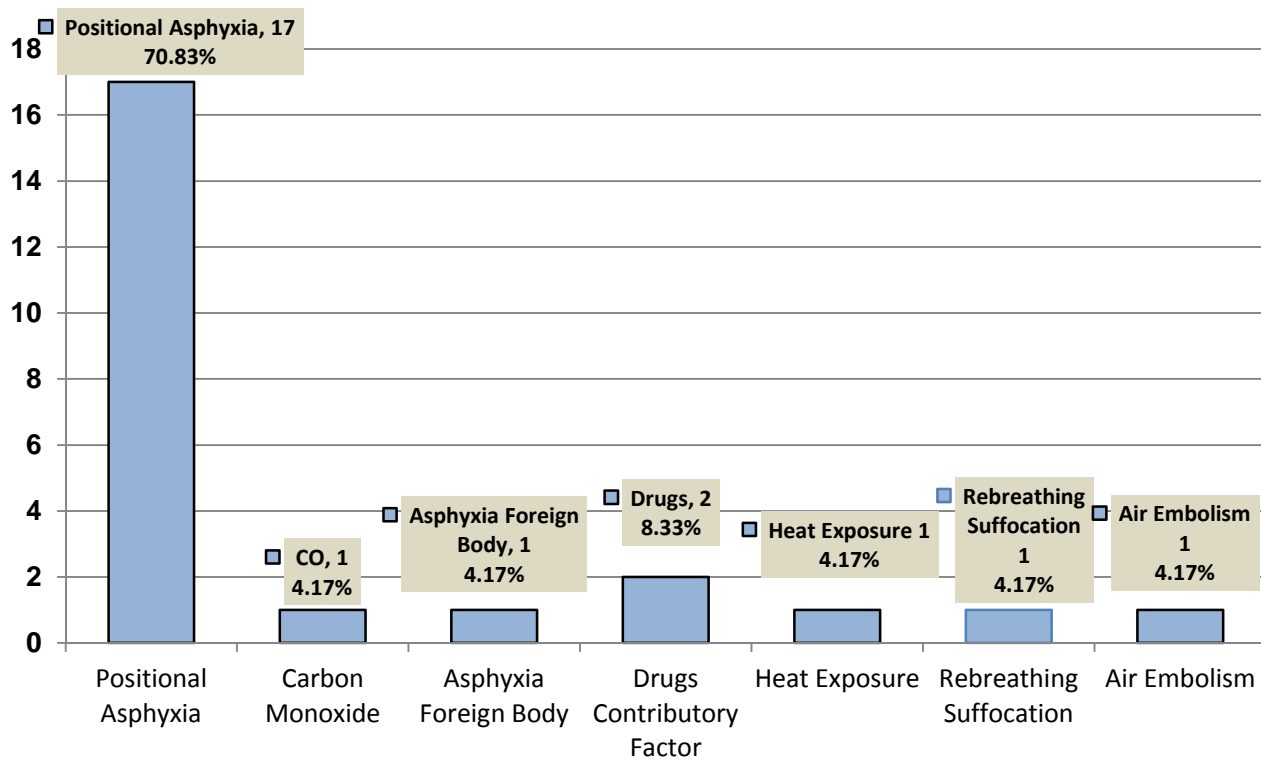
**2012 Statewide Accidents by Major Causes of Death**  
**Figure 14**



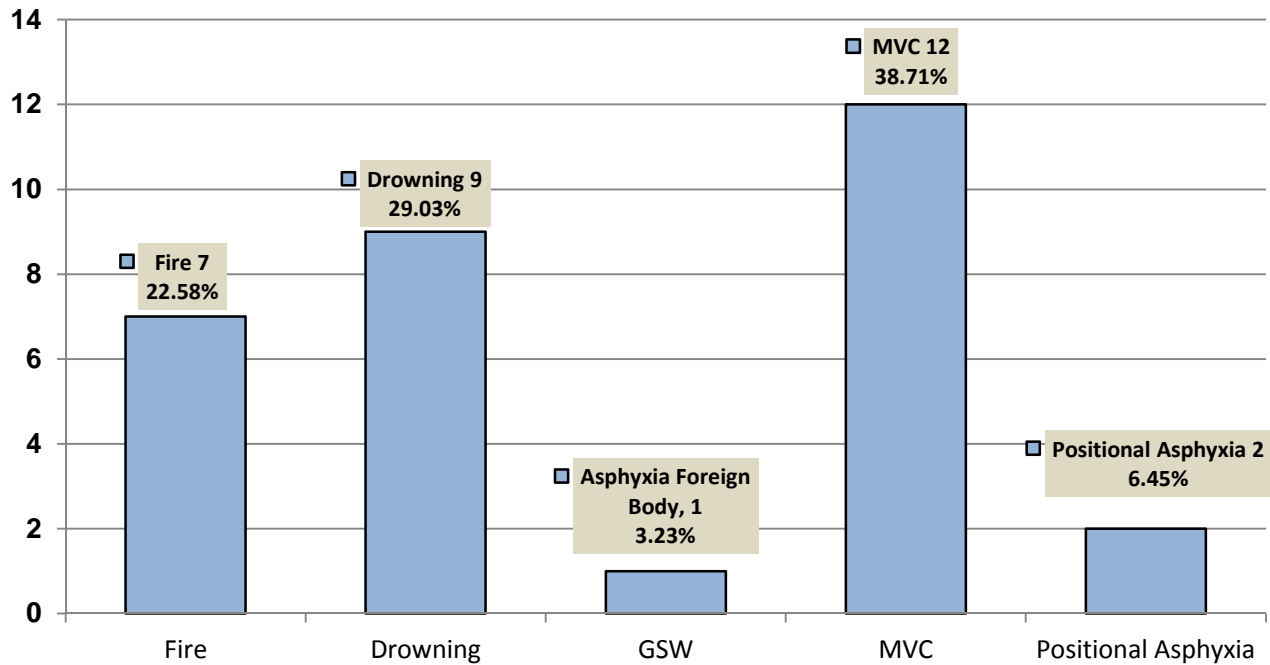
\*Only Major Categories of accidents are illustrated

\*\*Overdoses with manner of death other than "accident" are not included in above totals\*

**2012 Statewide Child (<1) Accidents by Cause of Death**  
**Total=24**  
**Figure 15**

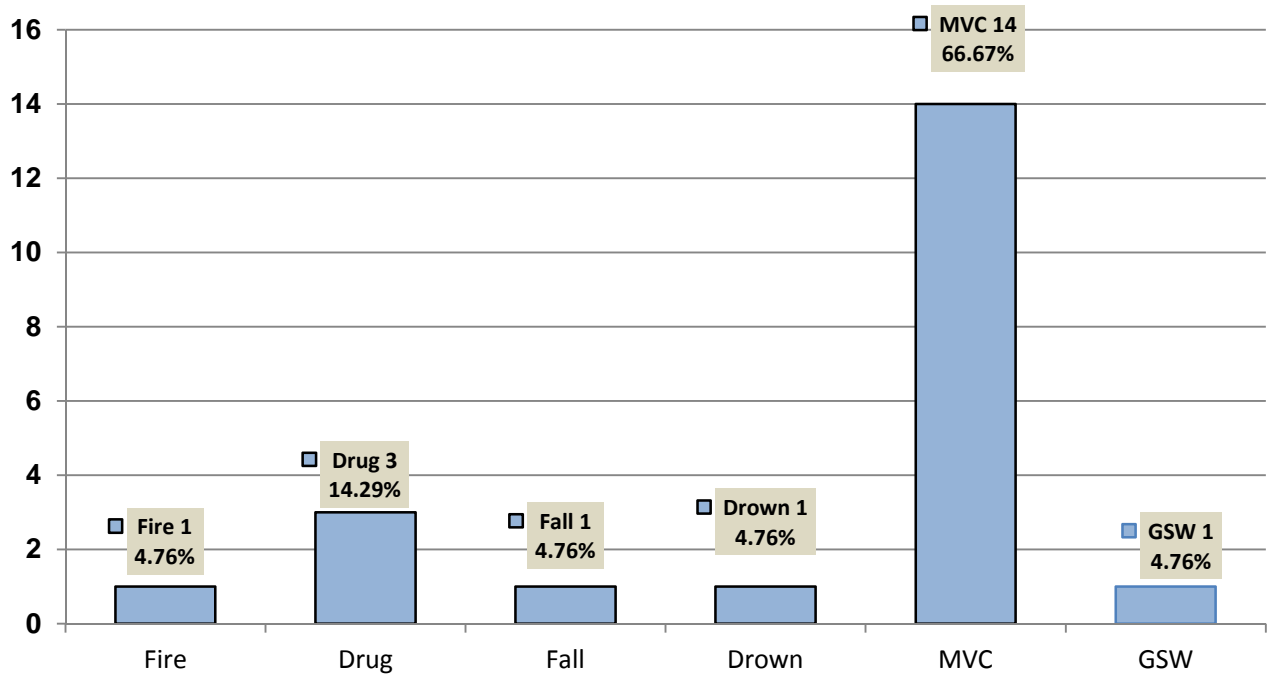


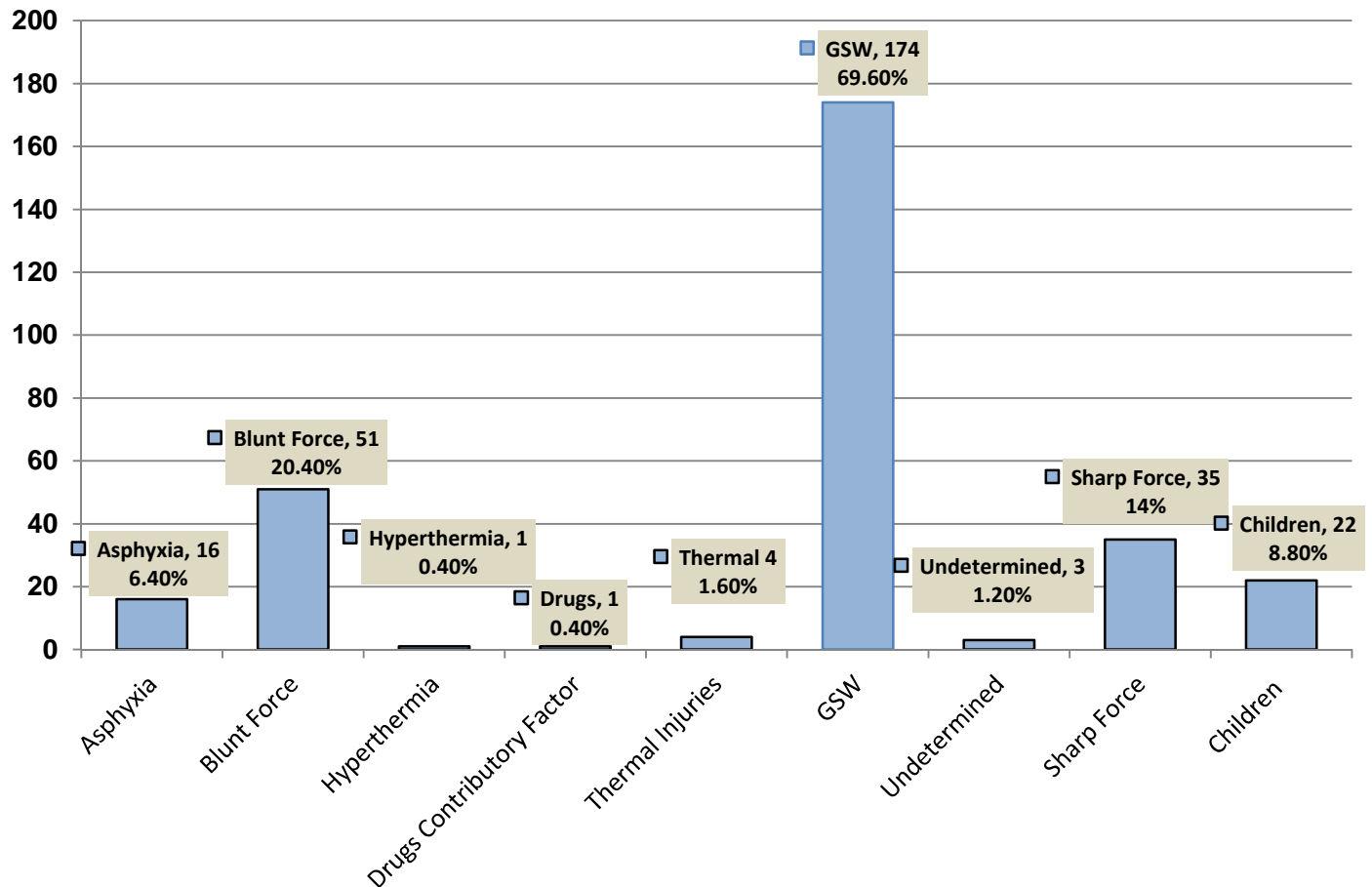
**2012 Statewide Child (1-12) Accidents by Cause of Death**  
**Total=31**  
**Figure 16**





**2012 Statewide Child (13-17) Accidents by Cause of Death**  
**Total=21**  
**Figure 17**



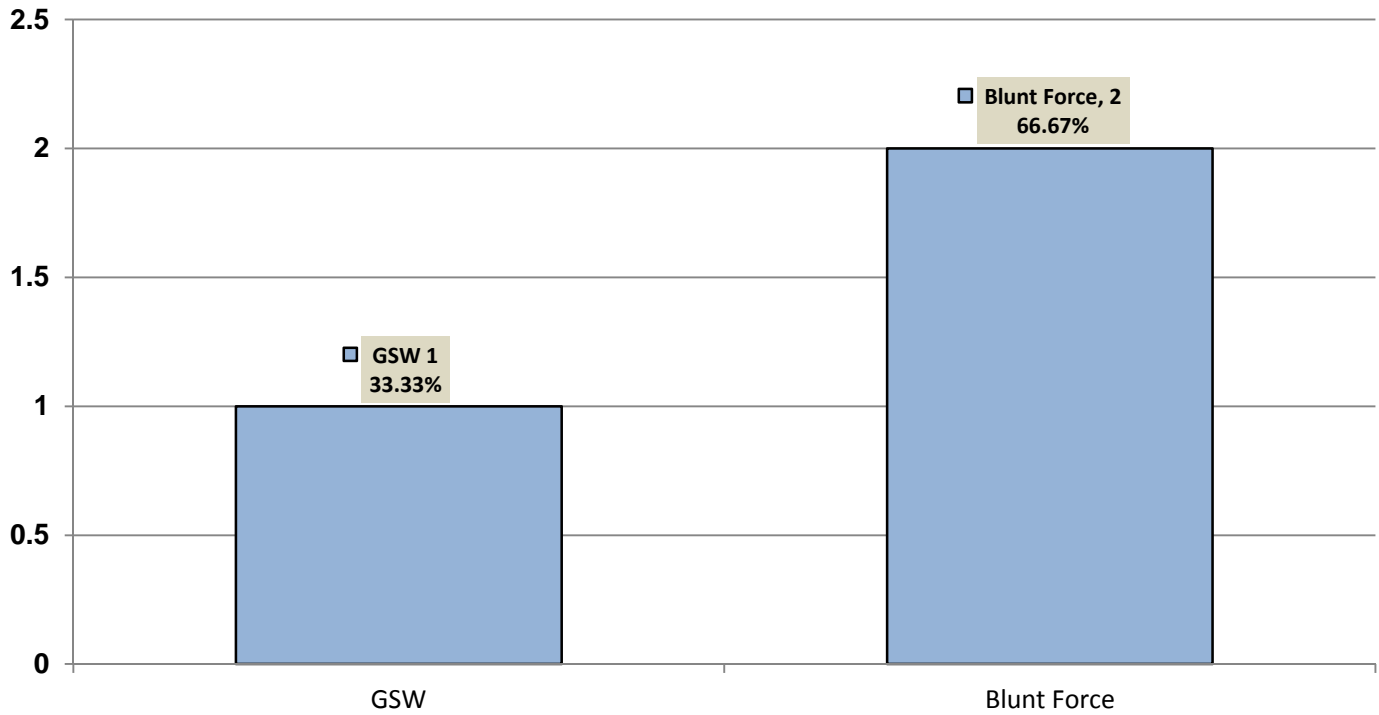
**2012 Statewide Homicides by Cause of Death**  
**Figure 18**

\*Children = ages 17 and younger

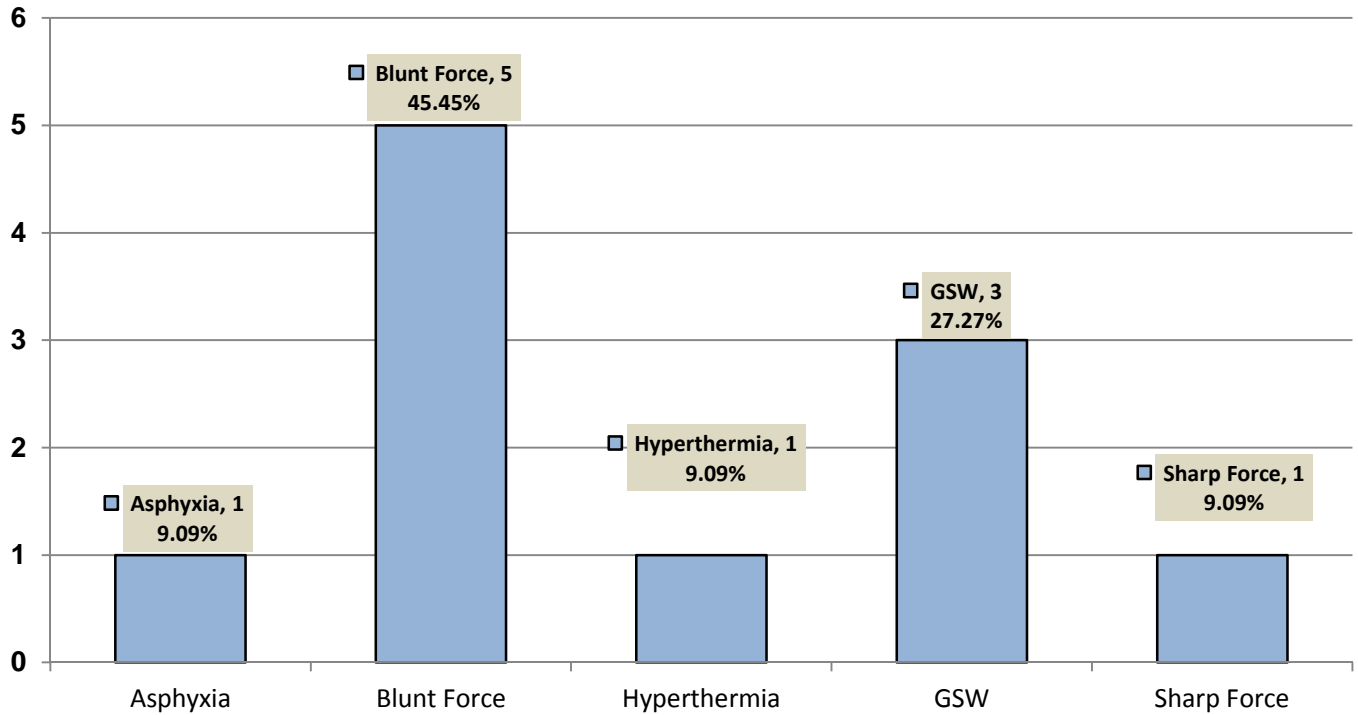
\*\*Percentages may be > than 100%.

Some decedents may have more than one (1)  
type of injury.

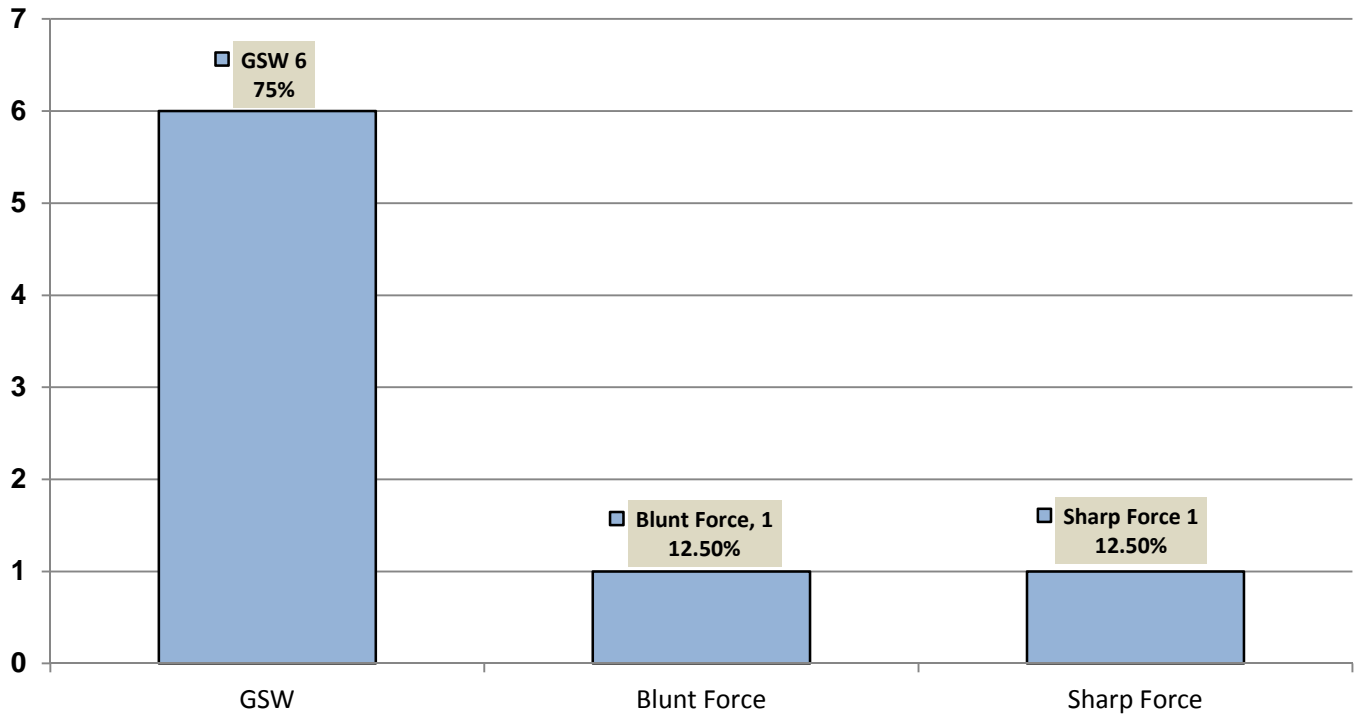
**2012 Statewide Child (<1) Homicides by Cause of Death**  
**Figure 19**  
**Total=3**



**2012 Statewide Child (1-12) Homicides by Cause of Death**  
**Figure 20**  
**Total=11**

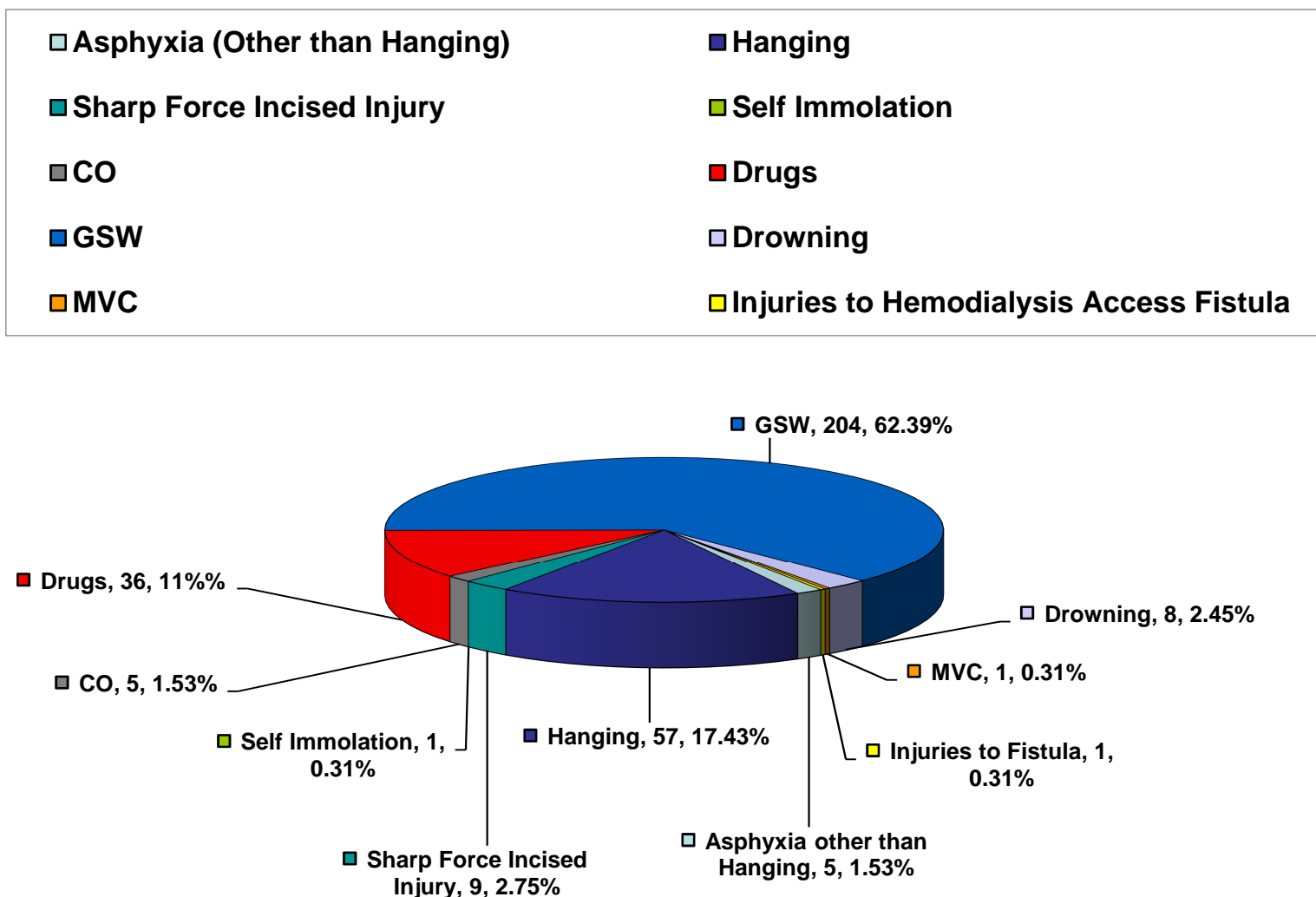


**2012 Statewide Child (13-17) Homicides by Cause of Death**  
**Figure 21**  
**Total=8**



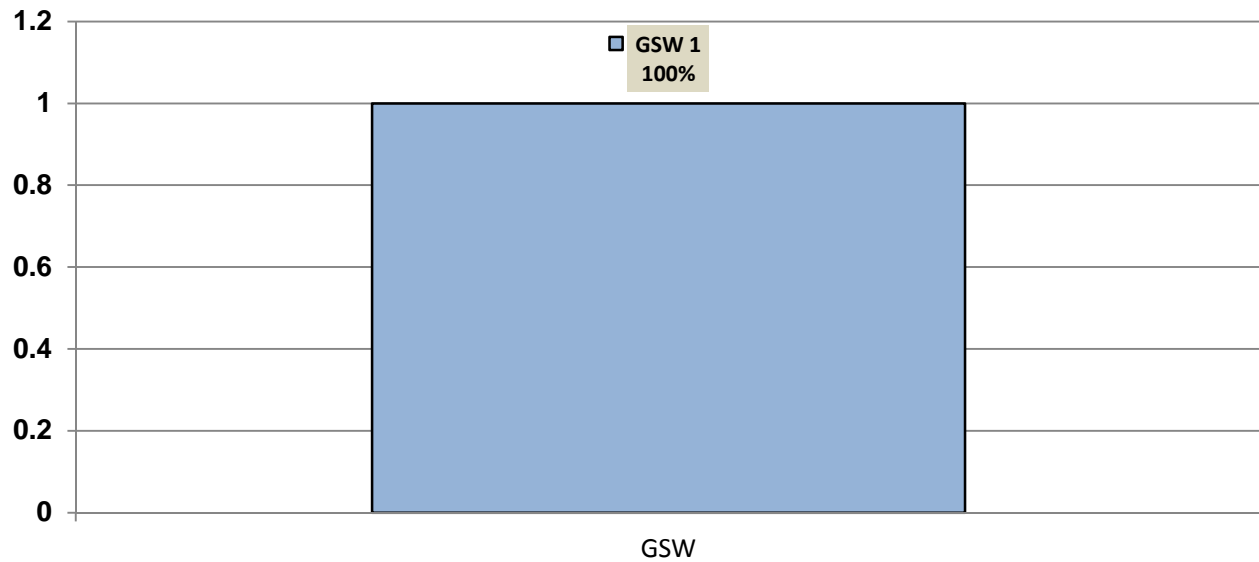
\*\*Percentages may be > than 100%.  
Some decedents may have more than one (1)  
type of injury.

**2012 Statewide Suicides by Cause of Death**  
**Figure 22**

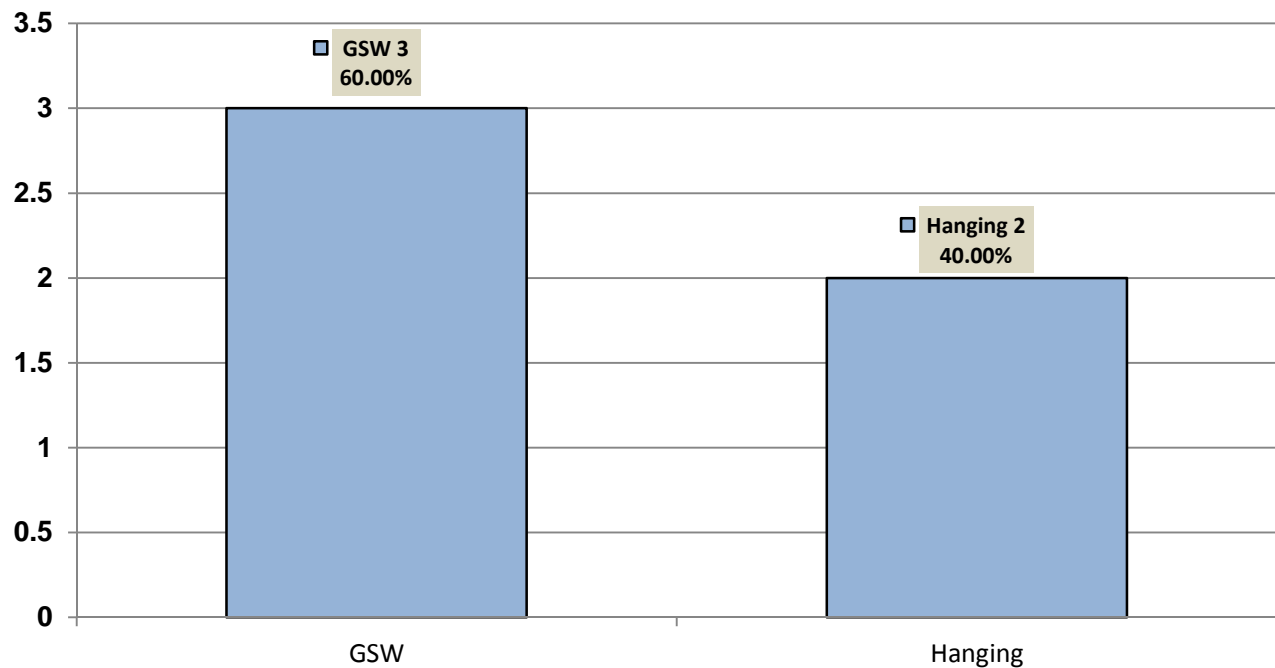




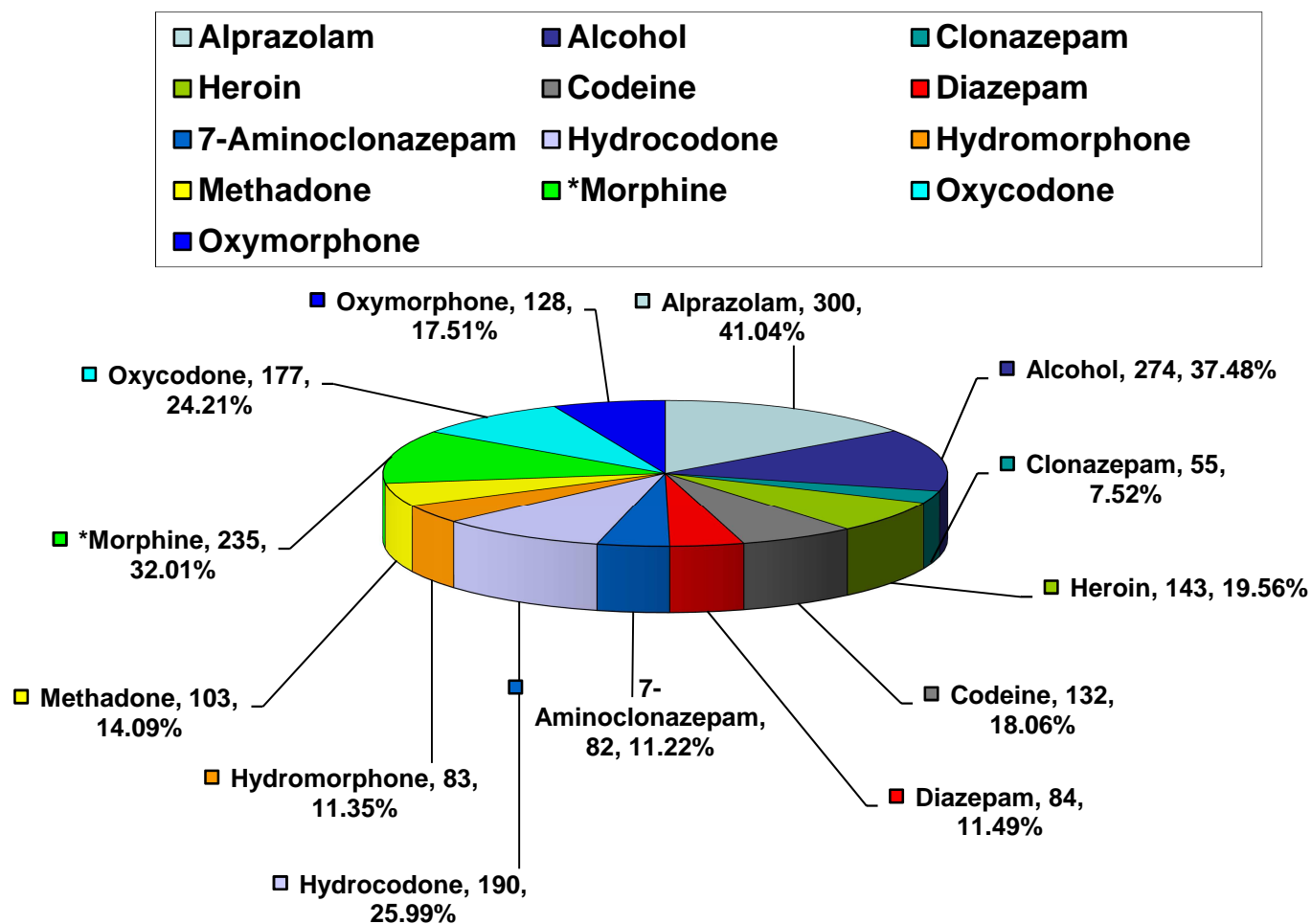
**2012 Statewide Child (1-12) Suicides by Cause of Death**  
**Total=1**  
**Figure 23**



**2012 Statewide Child (13-17) Suicides by Cause of Death**  
**Total=5**  
**Figure 24**



**2012 Statewide Drugs Most Frequently Detected in the Blood of Overdose Victims**  
**Figure 25**

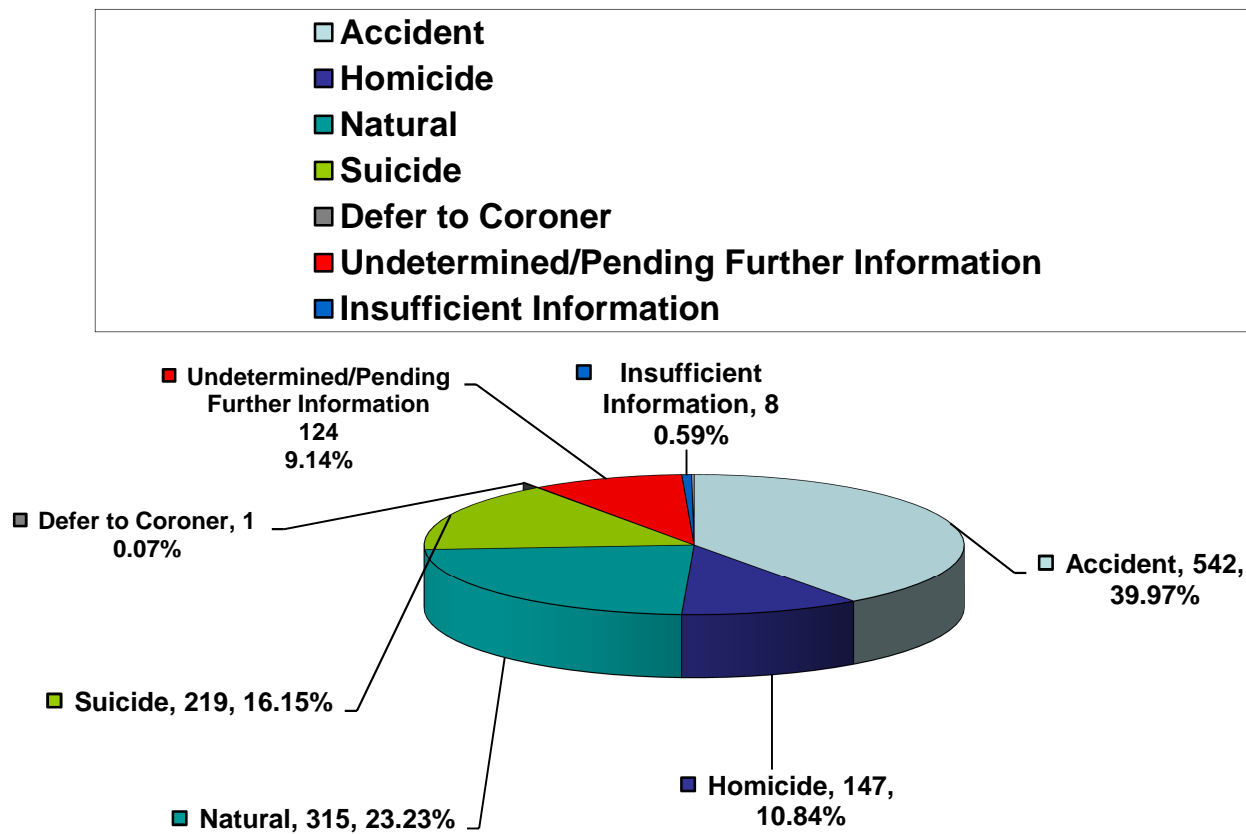


\*Morphine represents true drug and/or metabolite of Heroin

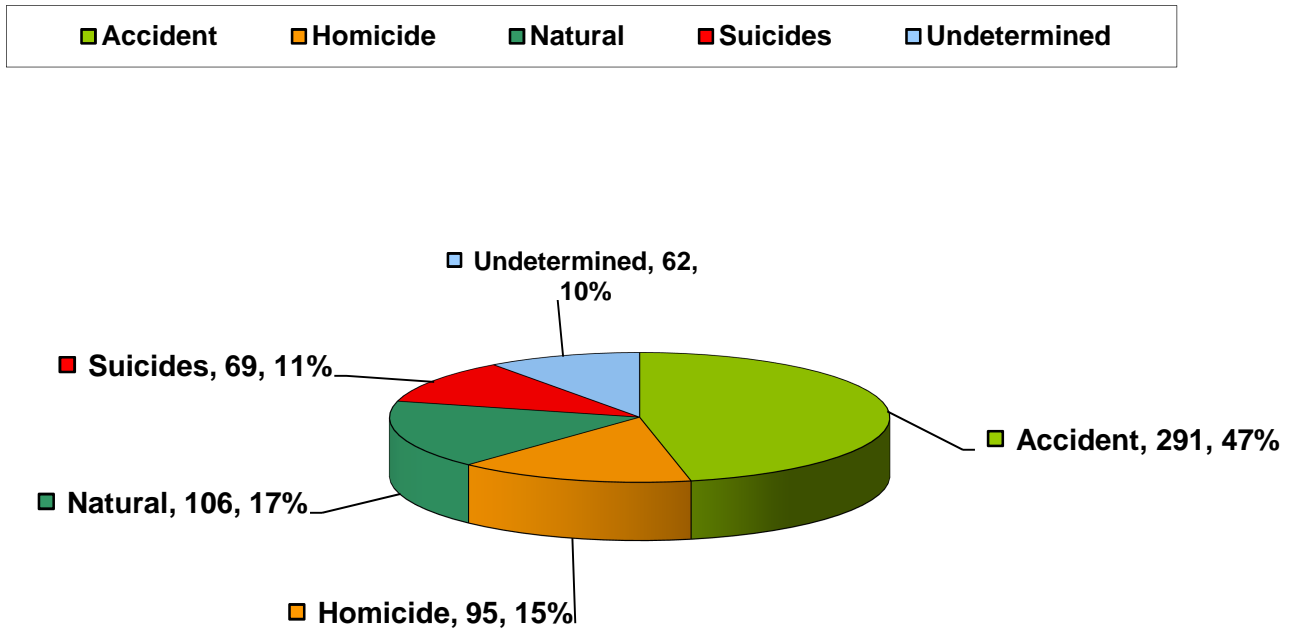
\*Total Percentages >100% due to more than 1 drug being present in many decedents

\*Total statewide overdose cases = 731

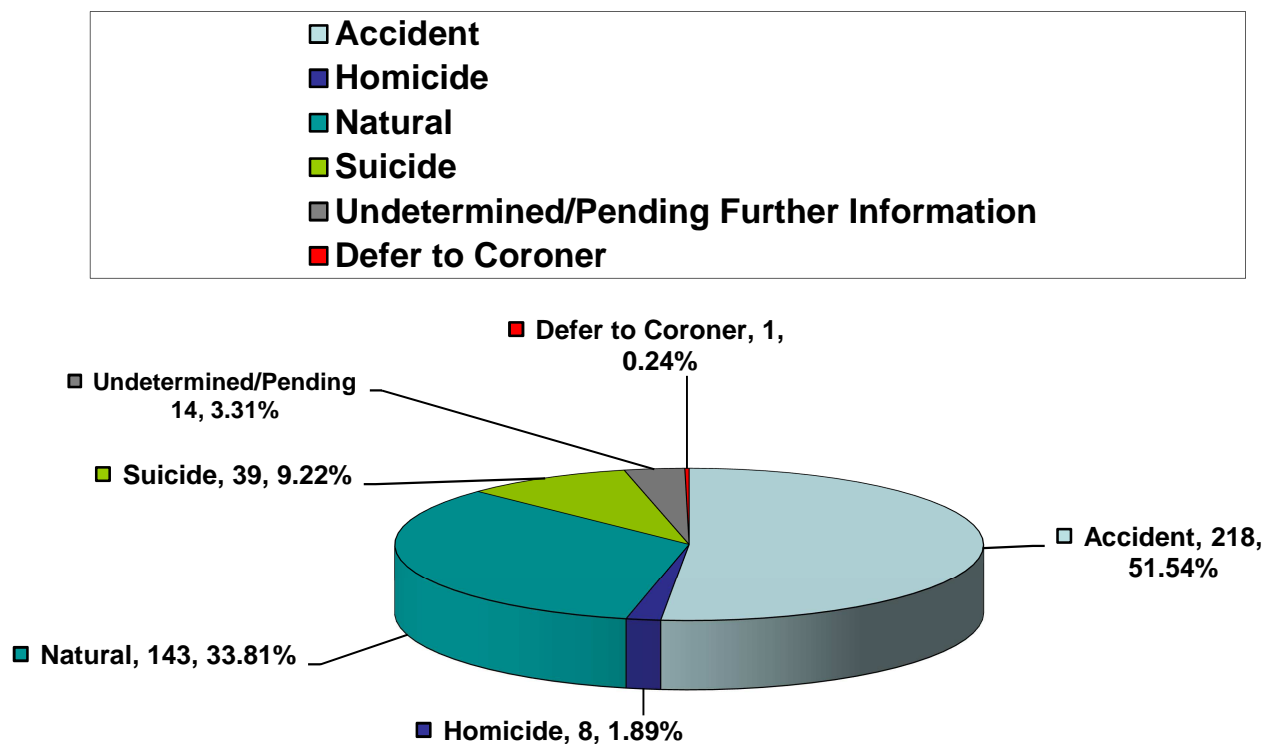
**2012 Louisville Cases by Manner of Death**  
**Figure 26**



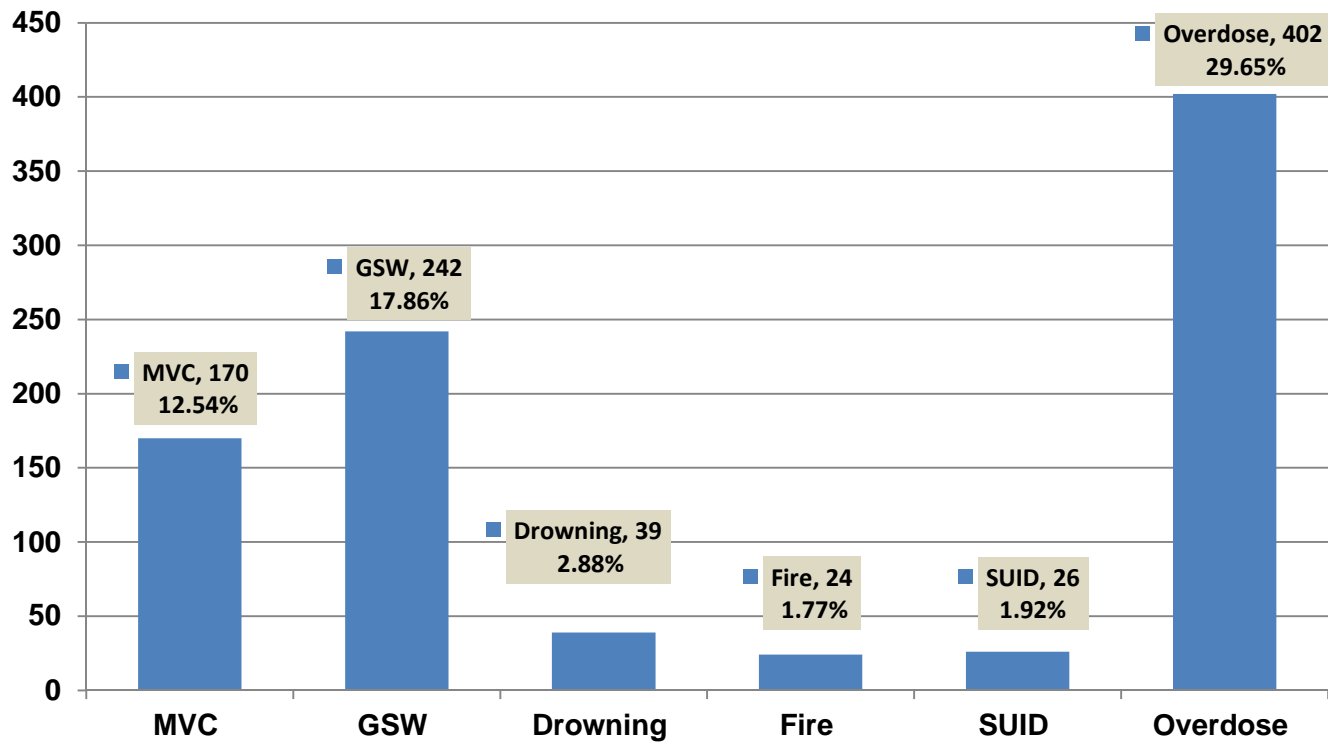
**2012 Frankfort Cases by Manner of Death**  
**Figure 27**



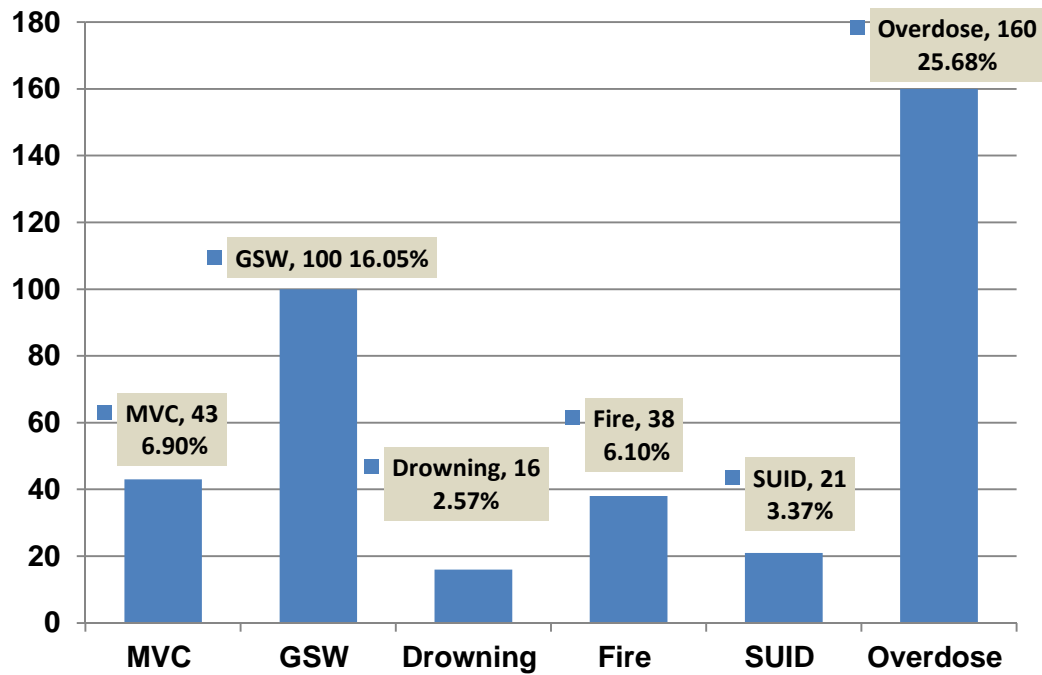
**2012 Northern Kentucky Cases by Manner of Death**  
**Figure 28**



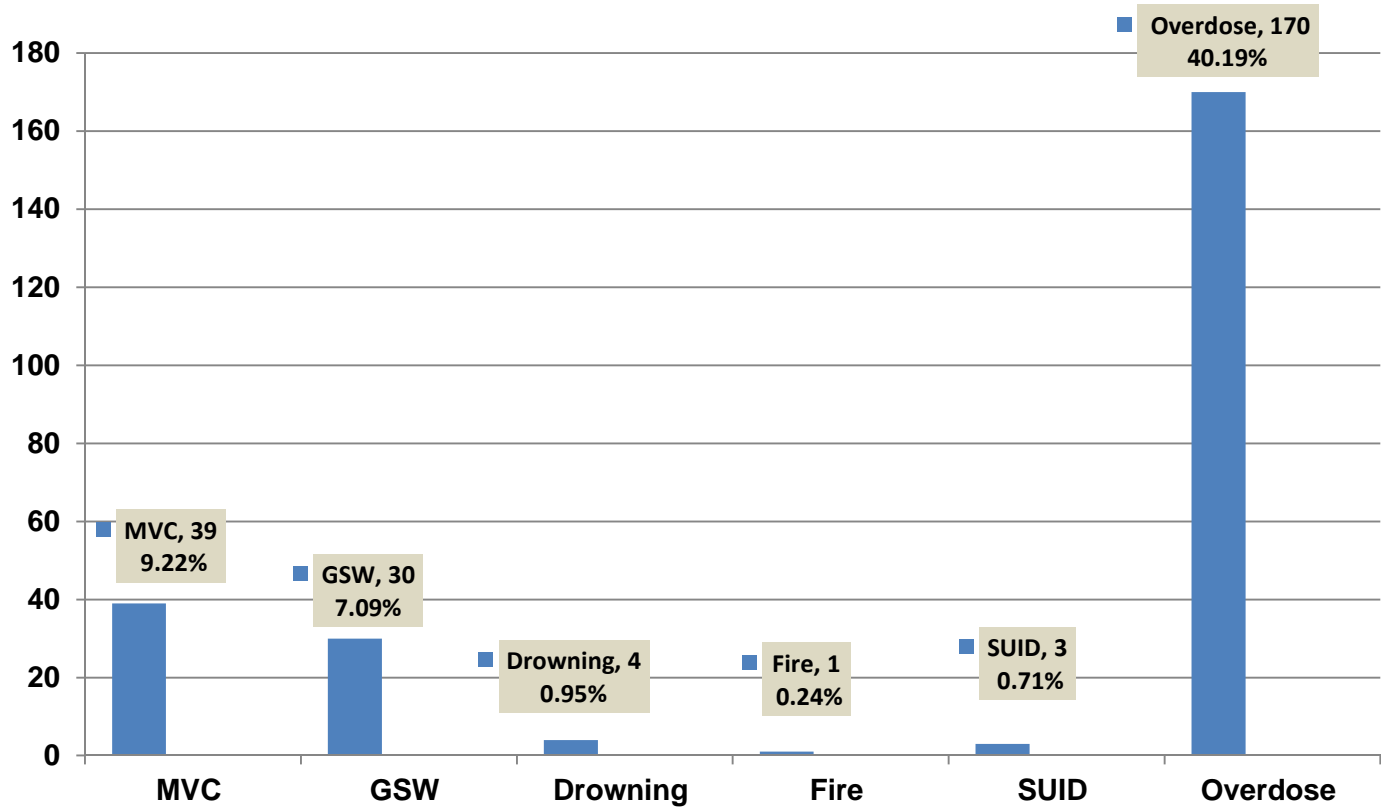
**2012 Specific Common Causes of Death: Louisville Cases by Type**  
**Figure 29**



**2012 Specific Common Causes of Death: Frankfort Cases  
by Type**  
Figure 30

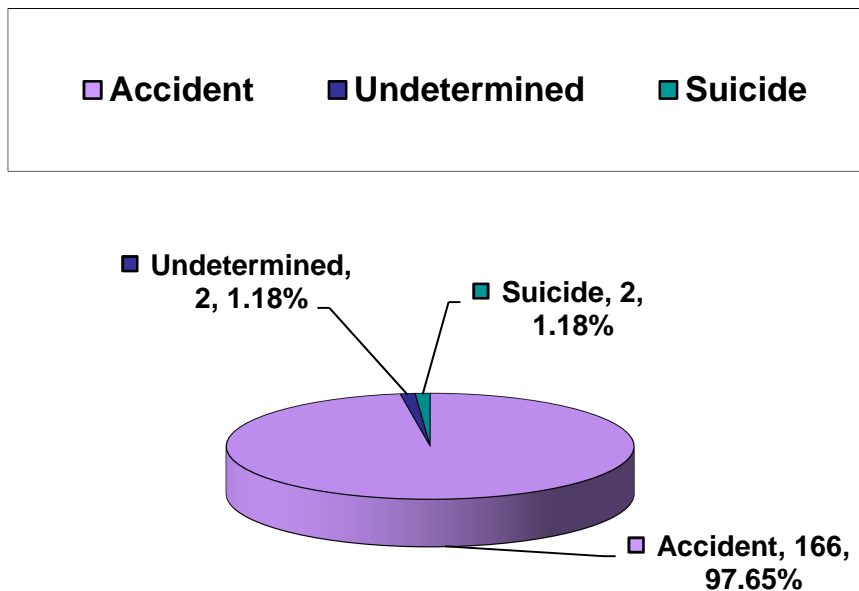


**2012 Specific Common Causes of Death:  
Northern Kentucky Cases by Type**  
Figure 31

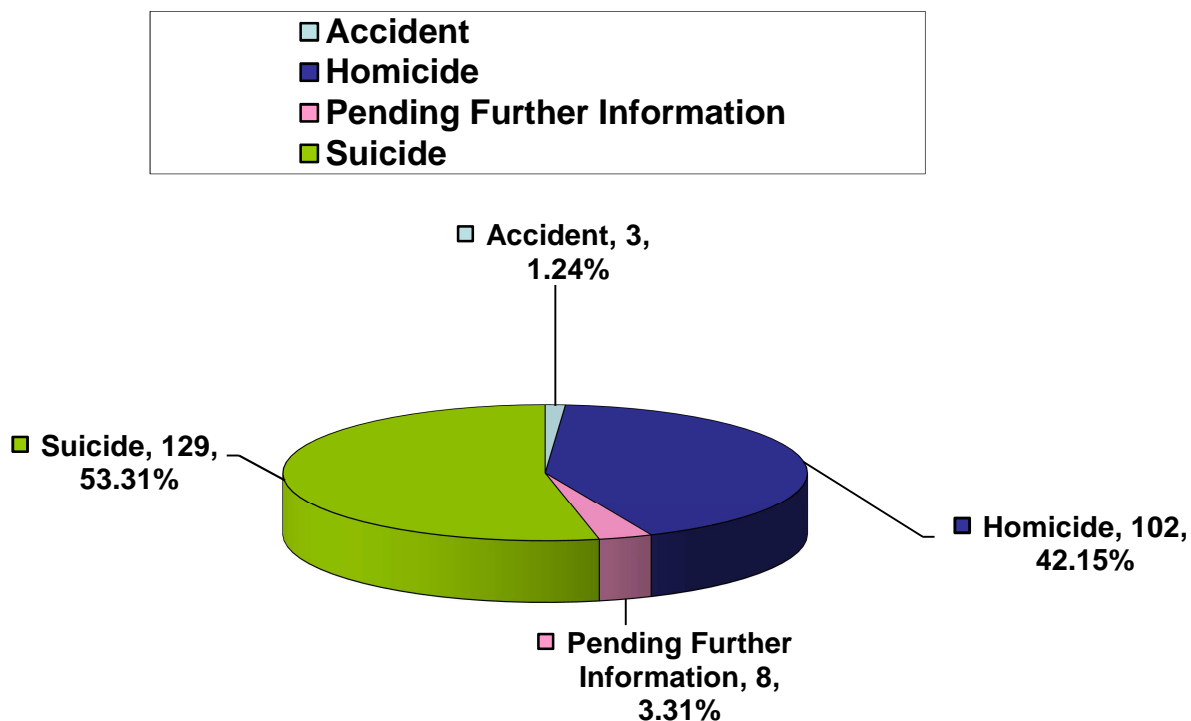




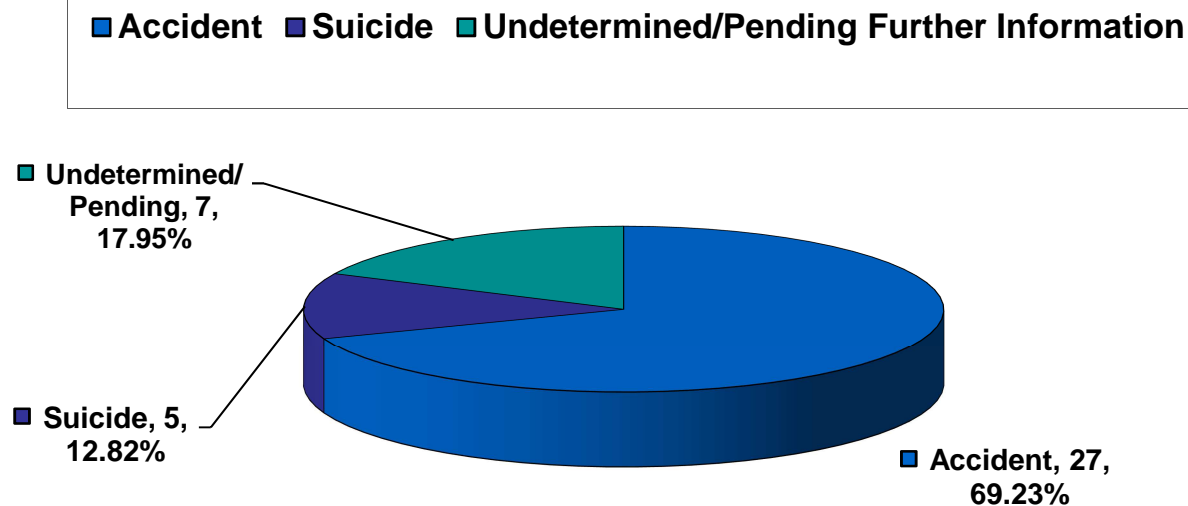
**2012 Louisville MVC by Manner of Death**  
**Figure 32**



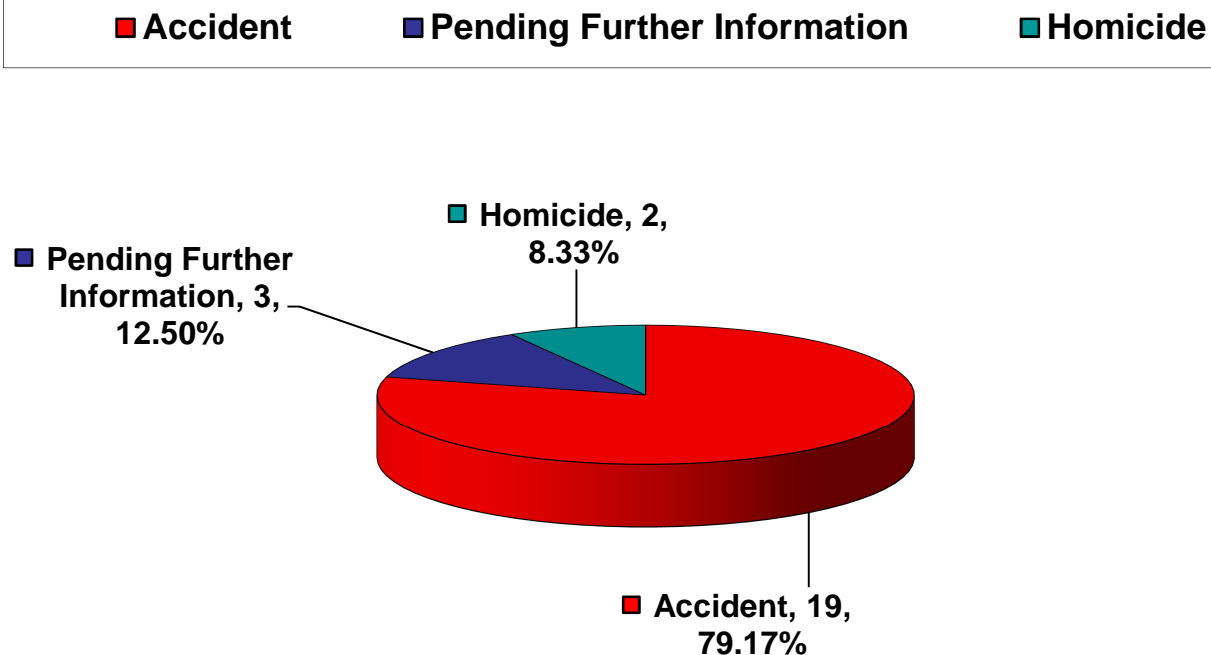
**2012 Louisville GSW by Manner of Death**  
**Figure 33**



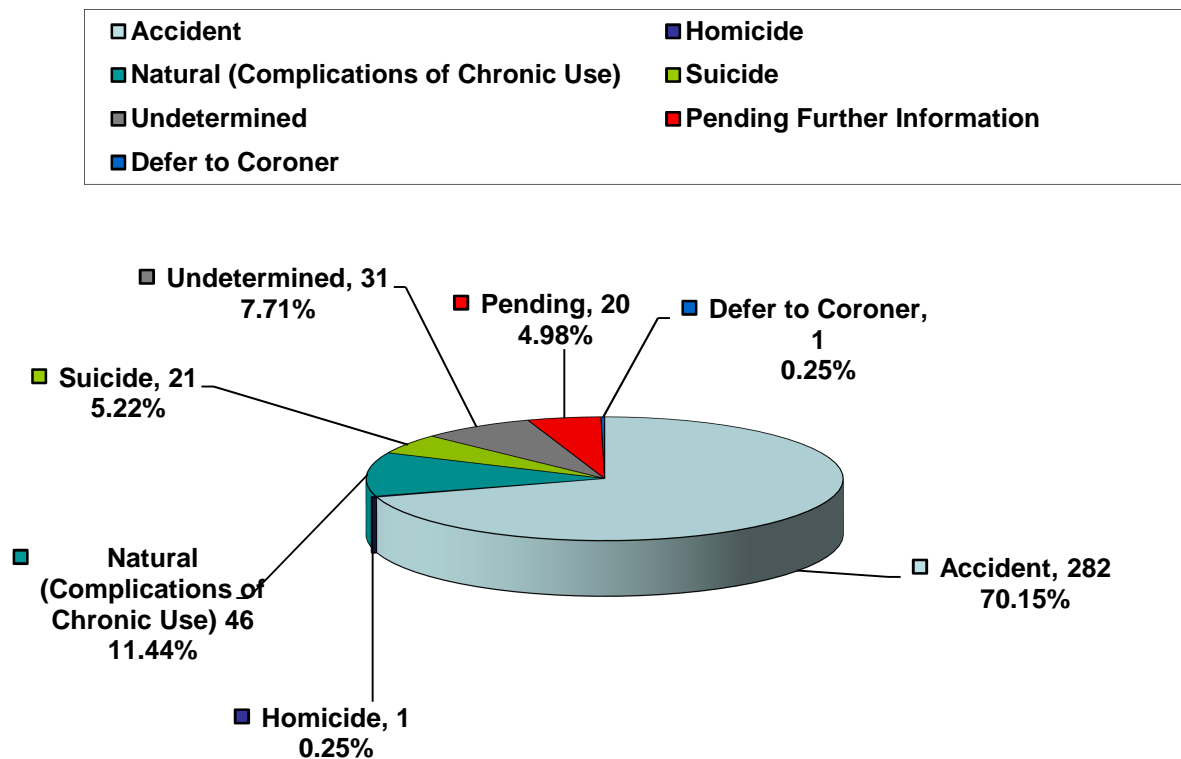
**2012 Louisville Drowning by Manner of Death**  
**Figure 34**



**2012 Louisville Fire by Manner of Death**  
**Figure 35**

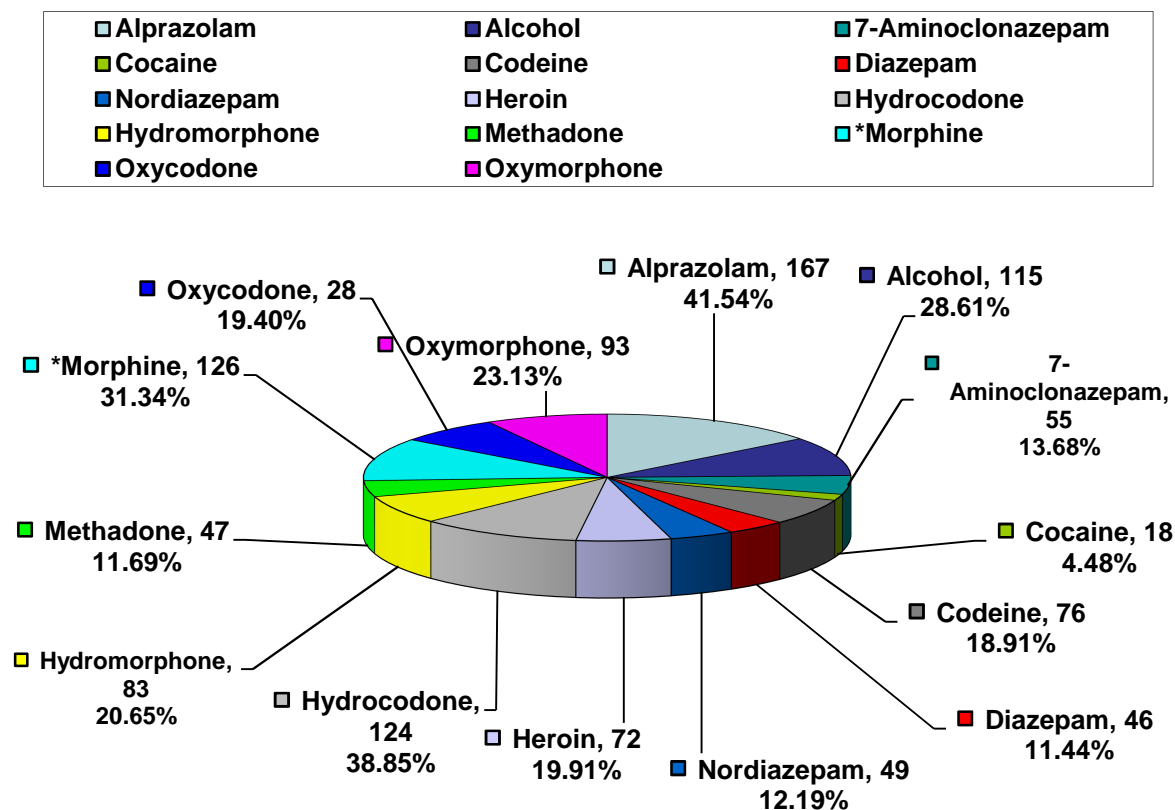


**2012 Louisville Overdose by Manner of Death**  
**Figure 36**  
**Total Overdoses = 402**



## 2012 Louisville Most Frequently Detected Drugs in the Blood of Overdose Victims

Figure 37  
Total Overdoses = 402

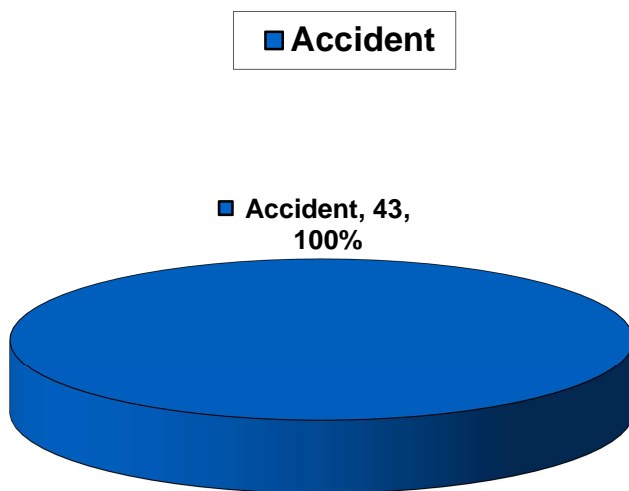


\*Morphine represents true drug and/or metabolite of Heroin

\*Total Percentages >100% due to more than 1 drug being present in many decedents

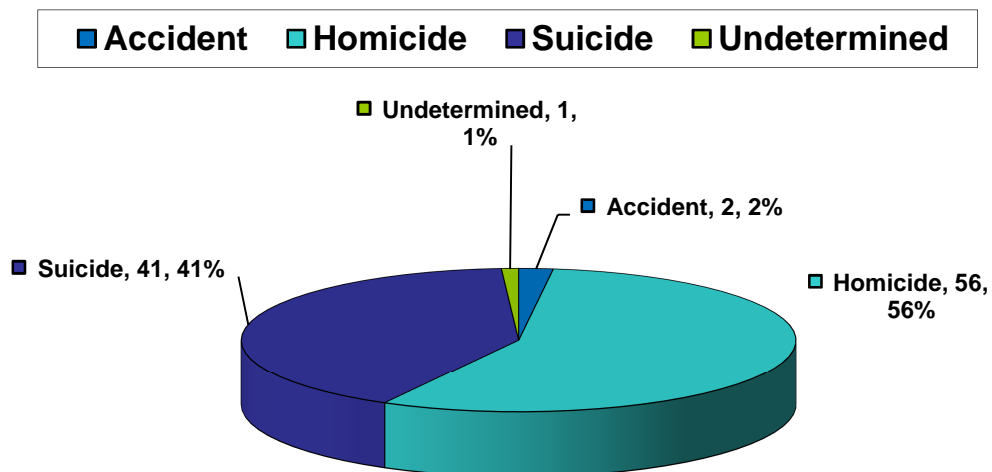
### 2012 Frankfort MVC by Manner of Death

Figure 38

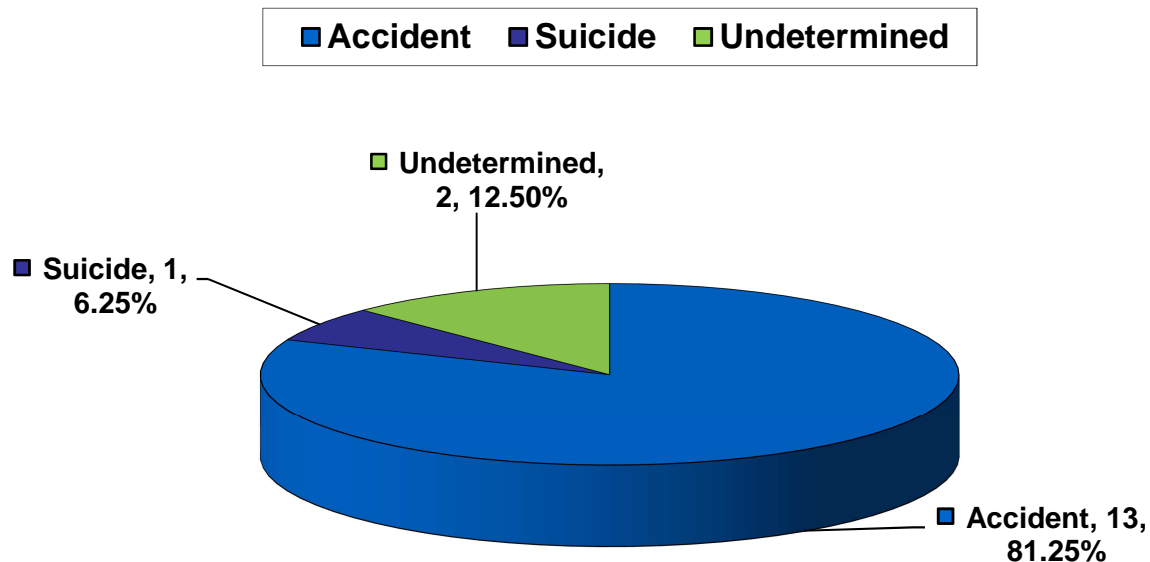


### 2012 Frankfort GSW by Manner of Death

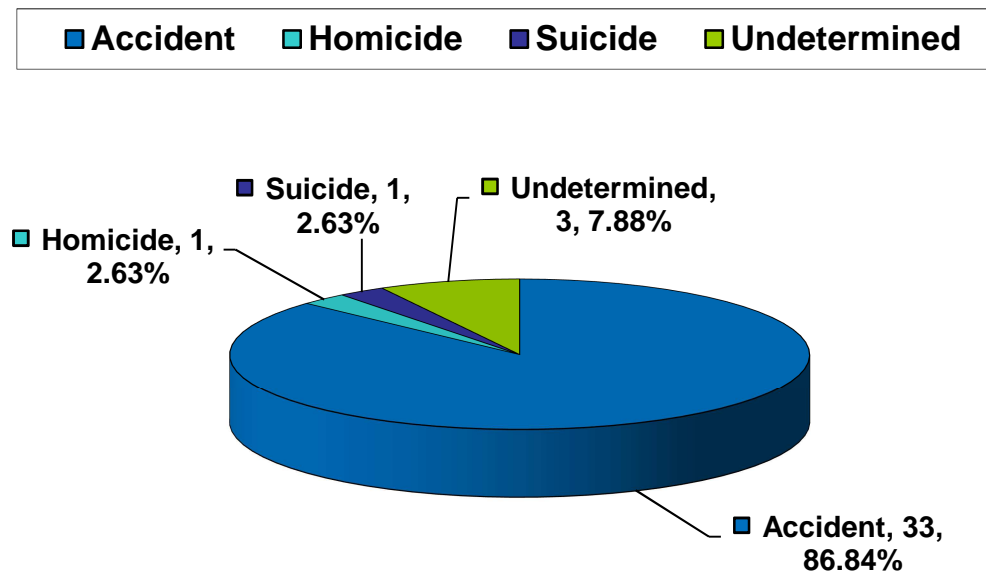
Figure 39



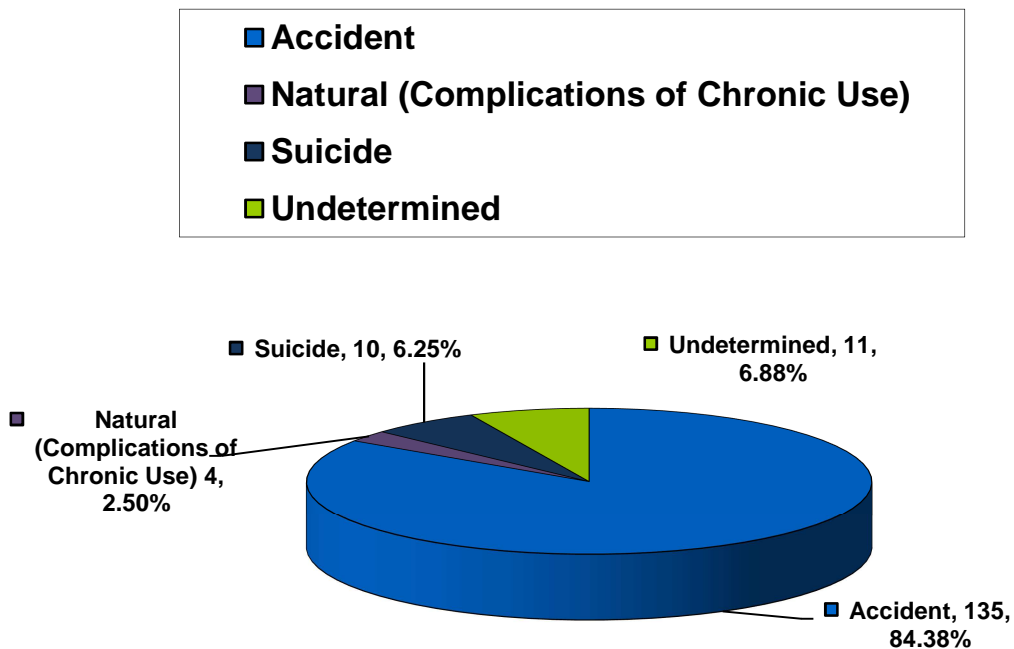
**2012 Frankfort Drowning by Manner of Death**  
Figure 40



**2012 Frankfort Fire by Manner of Death**  
Figure 41



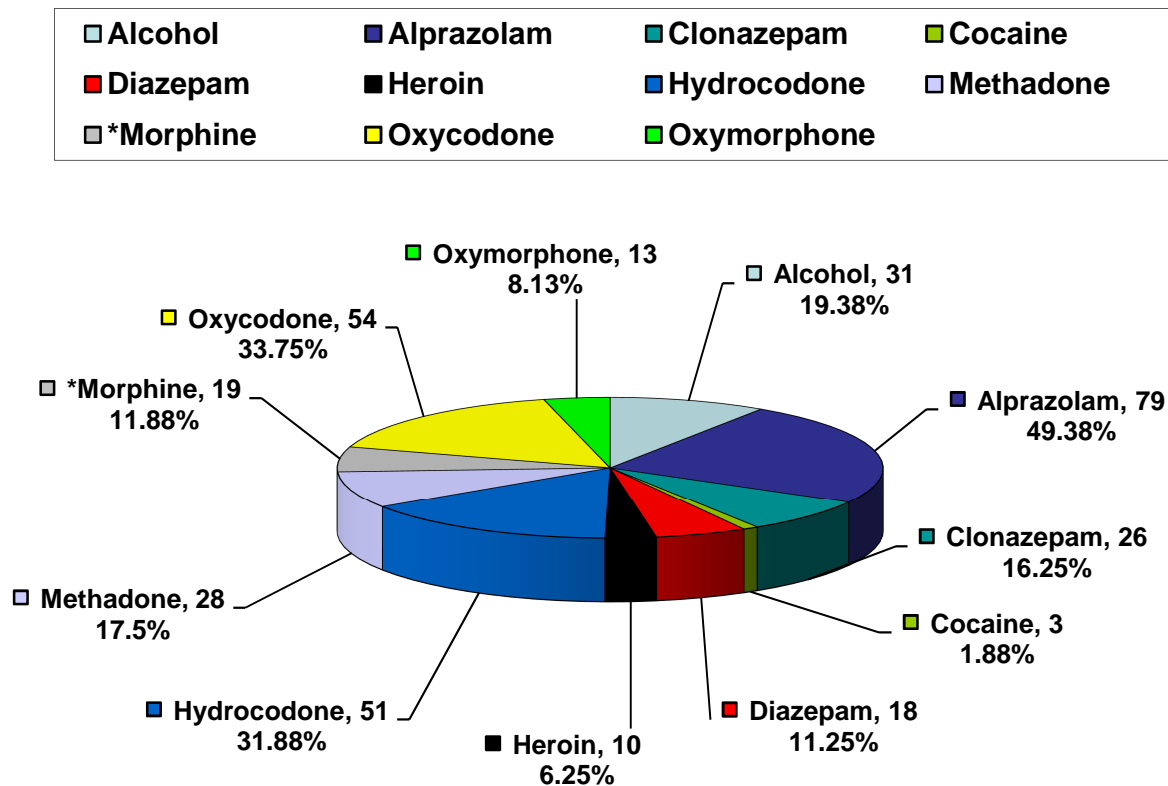
**2012 Frankfort Overdose by Manner of Death**  
**Figure 42**



## 2012 Frankfort Most Frequently Detected Drugs in the Blood of Overdose Victims

Figure 43

Total Overdoses = 160

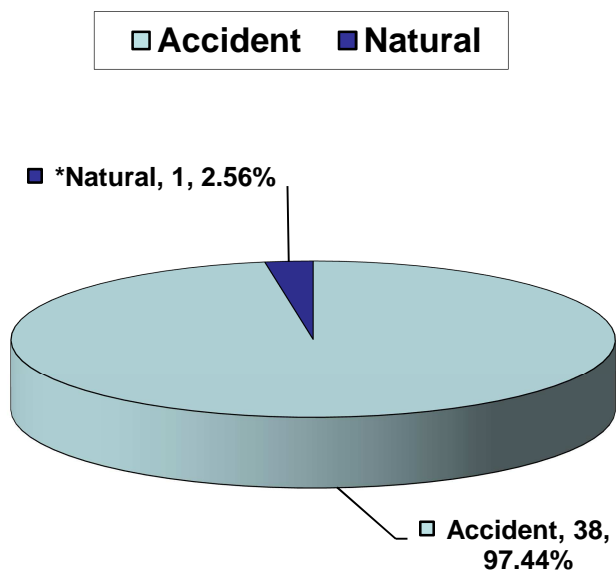


\*Morphine represents true drug and/or metabolite of Heroin

\*Total Percentages >100% due to more than 1 drug being present in many decedents

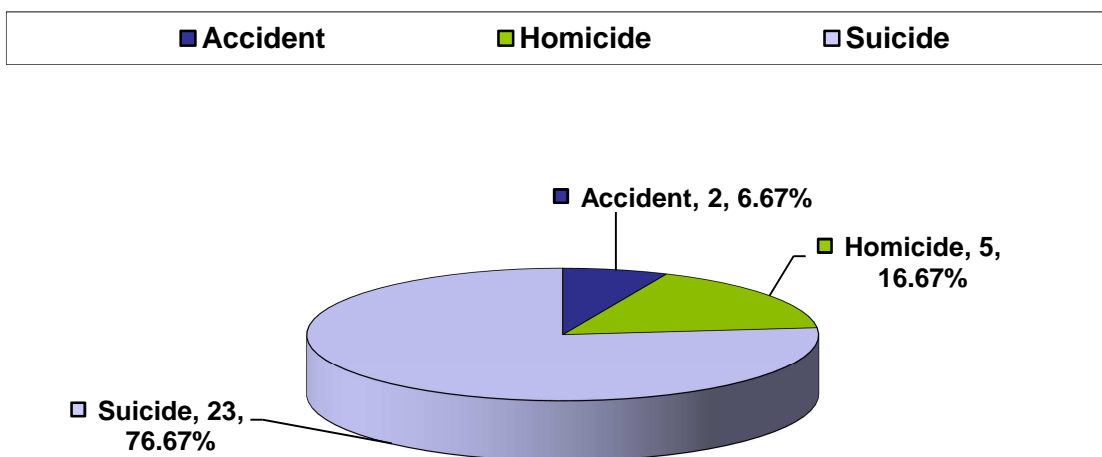


**2012 Northern Kentucky MVC by Manner of Death**  
**Figure 44**

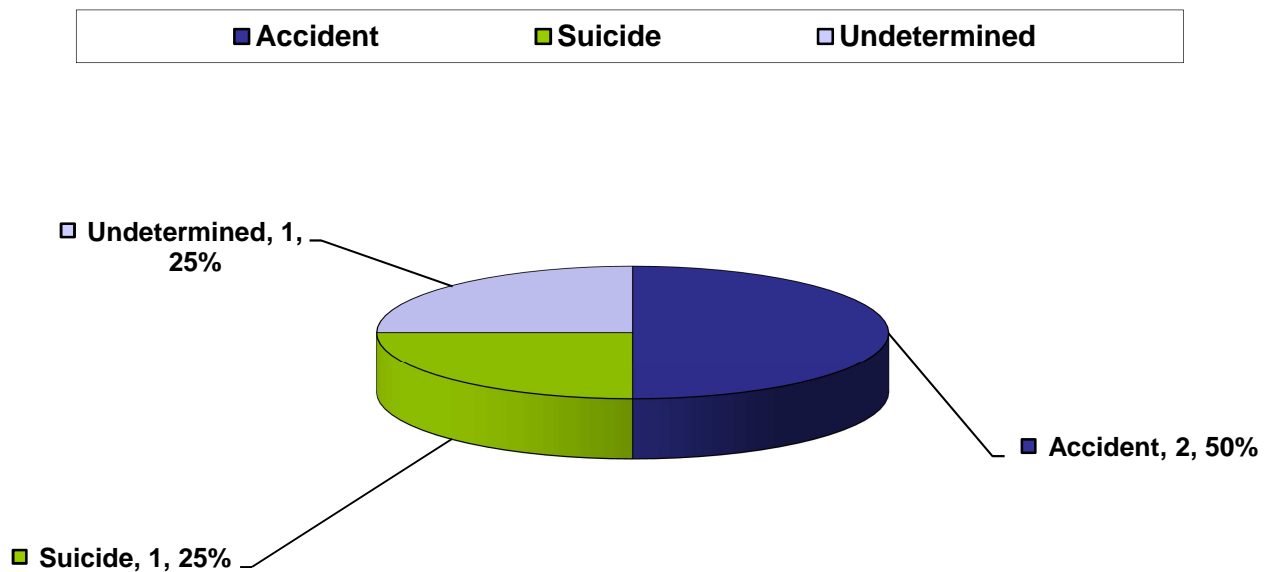


\*Cardiac Event in MVC

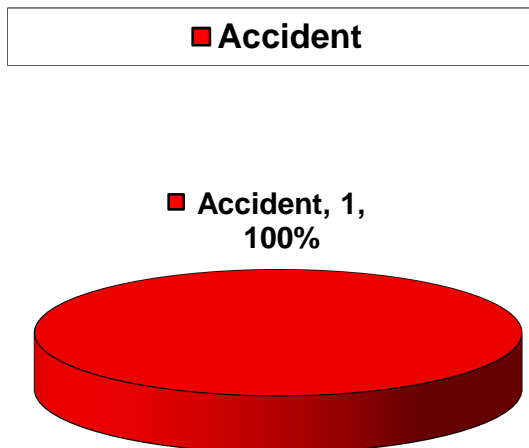
**2012 Northern Kentucky GSW by Manner of Death**  
**Figure 45**



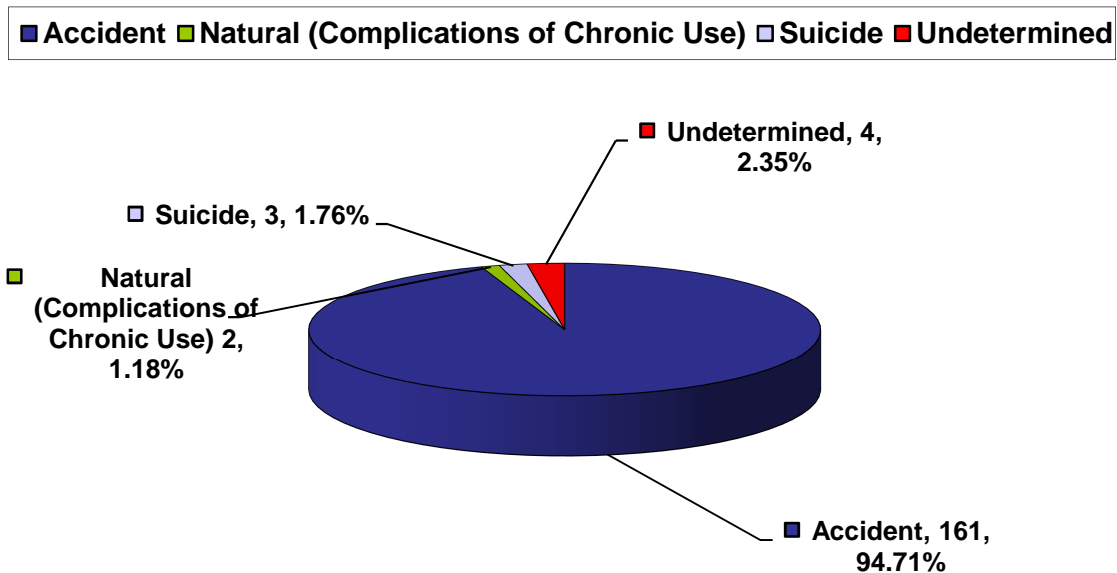
**2012 Northern Kentucky Drowning by Manner of Death**  
**Figure 46**



**Northern Kentucky Fire by Manner of Death**  
**Figure 47**

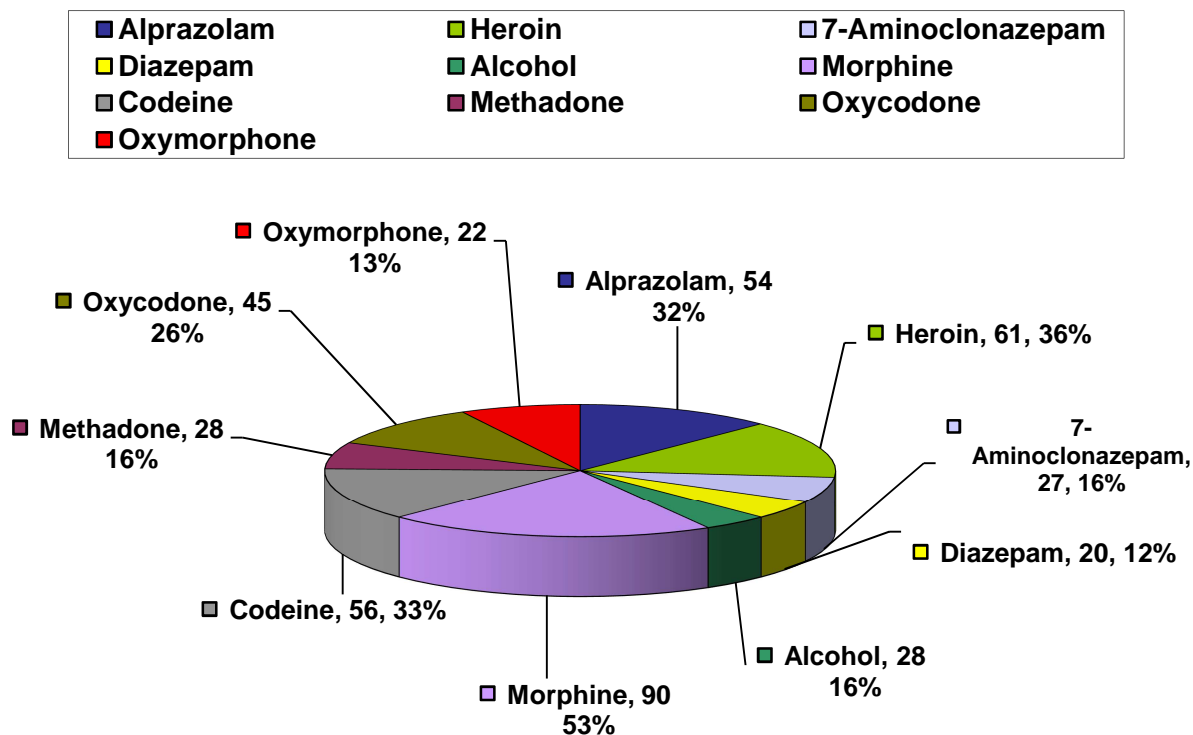


### 2012 Northern Kentucky Overdose by Manner of Death Figure 48



### 2012 Northern Kentucky Most Frequently Detected Drugs in the Blood of Overdose Victims

Figure 49  
Total = 170



\*Morphine represents true drug and/or metabolite of Heroin

\*Total Percentages >100% due to more than 1 drug being present in many decedents

*Additional Data for 2012***Scene Visits at the request of local law enforcement and/or county coroner:**

The OCME attended five (5) scenes.  
The Frankfort Office attended one (1) scene.  
The Northern Kentucky Office attended zero (0) scenes.  
The Western Kentucky attended zero (0) scenes.

**Bodies Transported:** Due to the combined Coroner/Medical Examiner system, no regional Medical Examiner Office transports bodies or arranges/orders the transport of bodies. This duty falls under the purview of the county coroner in which the death occurred. Therefore, zero (0) bodies were transported by any regional office.

**Hospital Autopsies:** Due to the combined Coroner/Medical Examiner system, the Regional Medical Examiner's Offices do not have jurisdiction over hospital deaths and autopsies. There were zero (0) hospital autopsies retained under ME jurisdiction.

**Organ and Tissue Donation: KODA had 88 system wide Organ Donors and 284 Tissue Donors in 2012.**

Of the 1,356 cases undergoing postmortem examinations by the OCME, 17 were organ and 284 were tissue donations.

Of the 623 cases undergoing postmortem examinations by the Frankfort Office, 6 were organ and 2 were tissue donations.

Of the 423 cases undergoing postmortem examinations by the Northern Kentucky Office, 0 were organ and tissue donations as KODA does not perform any recoveries at the Northern Kentucky Facility.

**Unclaimed Bodies:** Due to the combined Coroner/Medical Examiner system, the Regional Medical Examiner's Offices does not have purview over unclaimed bodies. This is the duty of the county coroner in which the death occurred. Therefore, there were zero (0) unclaimed bodies in 2012.

**Exhumations:**

The OCME had one (1) postmortem examination from an exhumation in 2012.  
The Frankfort Office had zero (0) postmortem examinations from an exhumation in 2012.  
The Northern Kentucky Office had zero (0) postmortem examinations from an exhumation in 2012.  
The Western Kentucky Office had zero (0) postmortem examinations from an exhumation in 2012.

**Complete Autopsies**

The OCME performed 1,216 complete autopsies in 2012  
The Frankfort Office performed 562 complete autopsies in 2012.  
The Northern Kentucky Office performed 406 complete autopsies in 2012.  
All forensic pathology examinations from Western Kentucky were performed at the OCME in Louisville in 2012.

**Focused Examinations**

The OCME performed 105 focused examinations in 2012.

The Frankfort Office performed 39 focused examinations in 2012.

The Northern Kentucky Office performed 17 focused examinations in 2012.

All forensic pathology examinations from Western Kentucky were performed at the OCME in Louisville in 2012.

**External Autopsies**

The OCME performed 32 external examinations in 2012. In addition, 3 were examinations of skeletal remains.

The Frankfort Office performed 21 external examinations in 2012. In addition 1 was an examination of skeletal remains.

The Northern Kentucky Office performed zero (0) external examinations in 2012.

All forensic pathology examinations from Western Kentucky were performed at the OCME in Louisville in 2012.

## **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 **WKME in 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.

\*For 2012, all autopsies from the Western Counties were performed by the OCME in Louisville.

The **OACME in 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 **NKME in Ft. Thomas** office covers the following **NORTHERN** *counties*:

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

## Figure 50





**Office of the Chief Medical Examiner (OCME)**

810 Barret Avenue  
Louisville, KY 40204  
Tel: (502)852-5587  
Fax: (502)852-1767

**Office of the Associate Chief Medical Examiner (OACME)**

Central Laboratory Facility  
100 Sower Blvd, STE 202  
Frankfort, KY 40601  
Tel: (502)564-4545  
Fax: (502)564-1699

**Northern Kentucky Regional Medical Examiner's Office (NKME)**

85 North Grand Avenue  
Ft. Thomas, KY 41075  
Tel: (859)572-3559  
Fax: (859)572-3558

**Western Kentucky Regional Medical Examiner's Office (WKME)**

25 Brown Badgett Loop  
Madisonville, KY 42464  
Tel: (270) 824-7048  
Fax: (270) 824-7092

## ***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.