

Office of the Medical Examiner 2013 Calendar Year Annual Report



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Office of the Medical Examiner

2013 Annual Report

Table of Contents

Overview	6
Introduction.....	7
Overview – Office of the Medical Examiner.....	7
Basic Functions of the Office of the Medical Examiner.....	7
Reportable Deaths	8
Statutory Duty	9
Training and Education.....	10
Forensic Pathologist Fellowship Program	10
Accreditations	10
Figure 1-Organizational Chart: Office of the Medical Examiner.....	11
 Statewide Medical Examiner Data	 12
Table 1-Total Cases: ME Cases by Office.....	13
Figure 2-Statewide Cases Sent for Autopsy by Locality of Death	14
Figure 3-Statewide Cases by Year of Autopsy	15
Figure 4-Statewide Cases by Month of Autopsy	16
Figure 5-Statewide Cases by Age and Gender	17
Figure 6-Statewide Percentages by Age and Gender.....	18
Table 2-Statewide Cases by Manner of Death.....	19
Figure 7-Statewide Cases by Manner of Death	20
Figure 8-Statewide Accidents by Cause of Death	21
Figure 9-Statewide Homicides by Cause of Death	22
Figure 10-Statewide Suicides by Cause of Death.....	23
Table 3-Statewide Medical Examiner Totals by Specific Case Type.....	24
Table 4-Statewide Medical Examiner Drug Related Deaths	25
Table 5-Statewide Medical Examiner Drug Related Deaths Containing Heroin	25
Figure 11-Statewide Drug Related Deaths Sent for Autopsy by Locality of Death	26
Figure 12-Statewide Drug Related Deaths Containing Heroin by Locality of Death	27
Figure 13-Statewide Drugs Most Frequently Detected	28
 Statewide Medical Examiner Data of Children (Birth-17)	 29
Figure 14-Statewide Child (<1) Accidents by Cause of Death.....	30
Figure 15-Statewide Child (1-5) Accidents by Cause of Death	31
Figure 16-Statewide Child (6-12) Accidents by Cause of Death	32
Figure 17-Statewide Child (13-17) Accidents by Cause of Death	33
Figure 18-Statewide Child (<1) Homicides by Cause of Death	34
Figure 19-Statewide Child (1-5) Homicides by Cause of Death	34
Figure 20-Statewide Child (6-12) Homicides by Cause of Death	35
Figure 21-Statewide Child (13-17) Homicides by Cause of Death	35
Figure 22-Statewide Child (6-12) Suicides by Cause of Death.....	36
Figure 23-Statewide Child (13-17) Suicides by Cause of Death.....	36
Figure 24-Statewide Child (<1) Undetermined by Cause of Death.....	37

Louisville Medical Examiner Office Data.....	38
Figure 25-Louisville Cases by Manner of Death	39
Figure 26-Louisville Cases by Common Causes of Death	40
Table 6-Louisville Totals by Common Causes of Death	41
Figure 27-Louisville Drug Related by Manner of Death.....	42
Figure 28-Louisville Most Frequently Detected Drugs	43
Table 7-Louisville Additional Drugs Detected in Drug Related Death Victims	44
Figure 29-Louisville MVC by Manner of Death	45
Figure 30-Louisville GSW by Manner of Death	45
Figure 31-Louisville Drowning by Manner of Death	46
Figure 32-Louisville Fire by Manner of Death.....	46
 Frankfort Medical Examiner Office Data	 47
Figure 33-Frankfort Cases by Manner of Death	48
Figure 34-Frankfort Cases by Common Causes of Death	49
Table 8-Frankfort Totals by Common Causes of Death	50
Figure 35-Frankfort Drug Related by Manner of Death	51
Figure 36-Frankfort Most Frequently Detected Drugs	52
Table 9-Frankfort Additional Drugs Detected in Drug Related Death Victims	53
Figure 37-Frankfort MVC by Manner of Death	54
Figure 38-Frankfort GSW by Manner of Death	54
Figure 39-Frankfort Drowning by Manner of Death	55
Figure 40-Frankfort Fire by Manner of Death	55
 Western Kentucky Medical Examiner Office Data	 56
Figure 41-Western Kentucky Cases by Manner of Death	57
Figure 42-WKY Cases by Common Causes of Death	58
Table 10-WKY Totals by Common Causes of Death	59
Figure 43-WKY Drug Related by Manner of Death	60
Figure 44-WKY Most Frequently Detected Drugs.....	61
Table 11-WKY Additional Drugs Detected in Drug Related Death Victims.....	62
Figure 45-WKY MVC by Manner of Death.....	63
Figure 46-WKY GSW by Manner of Death.....	63
Figure 47-WKY Drowning by Manner of Death.....	64
Figure 48-WKY Fire by Manner of Death	64
 Northern Kentucky Medical Examiner Office Data.....	 65
Figure 49-Northern Kentucky Cases by Manner of Death	66
Figure 50-NKY Cases by Common Causes of Death.....	67
Table 12-NKY Totals by Common Causes of Death	68
Figure 51-NKY Drug Related by Manner of Death	69
Figure 52-NKY Most Frequently Detected Drugs.....	70
Table 13-NKY Additional Drugs Detected in Drug Related Death Victims.....	71
Figure 53-NKY MVC by Manner of Death.....	72
Figure 54-NKY GSW by Manner of Death.....	72
Figure 55-NKY Drowning by Manner of Death.....	73
Figure 56-NKY Fire by Manner of Death	73

Additional Information	74
Additional Data for 2013	75
Medical Examiner Districts	77
Figure 57- Regional Office Coverage.....	78
Regional Offices Contact Information.....	79
Glossary	80

Overview

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 2,384 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—2013

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.

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

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

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

Aforementioned above, the four regional medical examiner offices (OCME, OACME, WKME and NKME) together performed 2,384 postmortem examinations in 2013.

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.

Forensic Pathologist Fellowship Program

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.

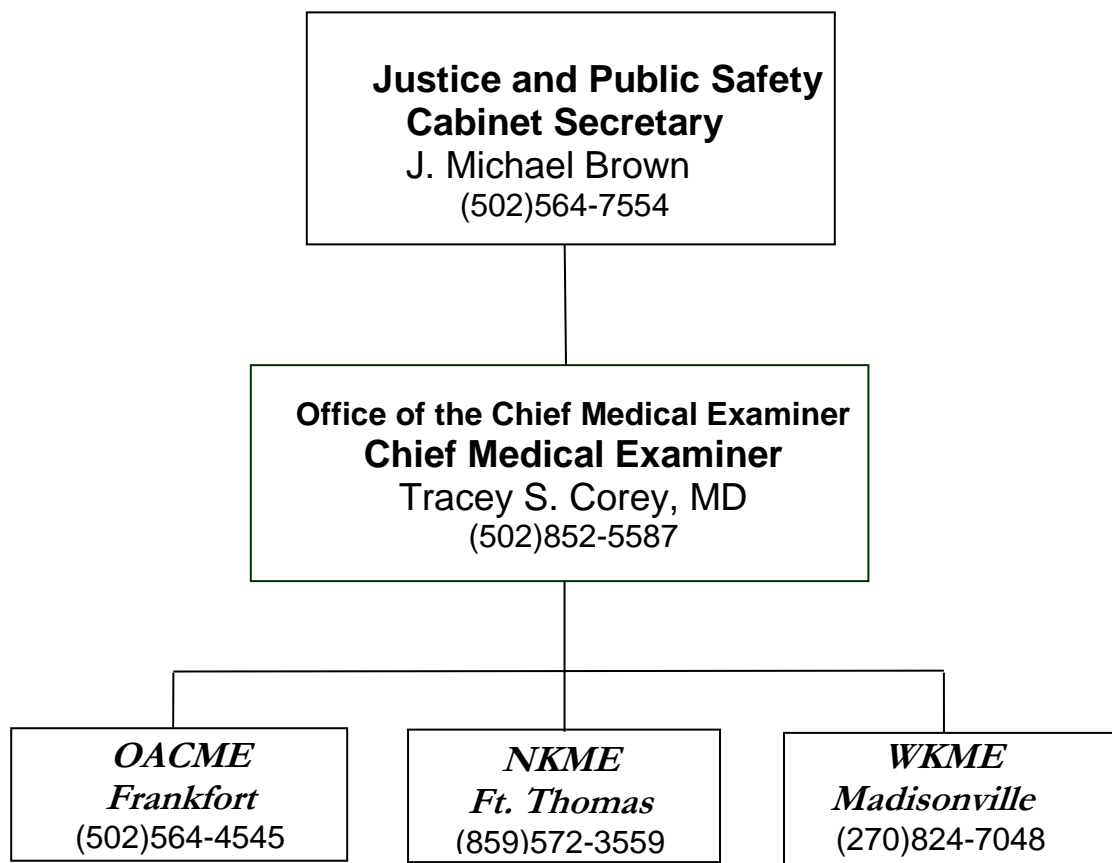
Accreditations

The Kentucky State Office of the Chief Medical Examiner in Louisville, KY is fully accredited by the National Association of Medical Examiners (NAME) through December 2017.

The University of Louisville Division of Forensic Pathology Fellowship Program at the Office of the Chief Medical Examiner in Louisville, KY is fully accredited by The Accreditation Council for Graduate Medical Education (ACGME) through April 2018.

Office of the Medical Examiner Organizational Chart

Figure 1



Statewide Medical Examiner Data

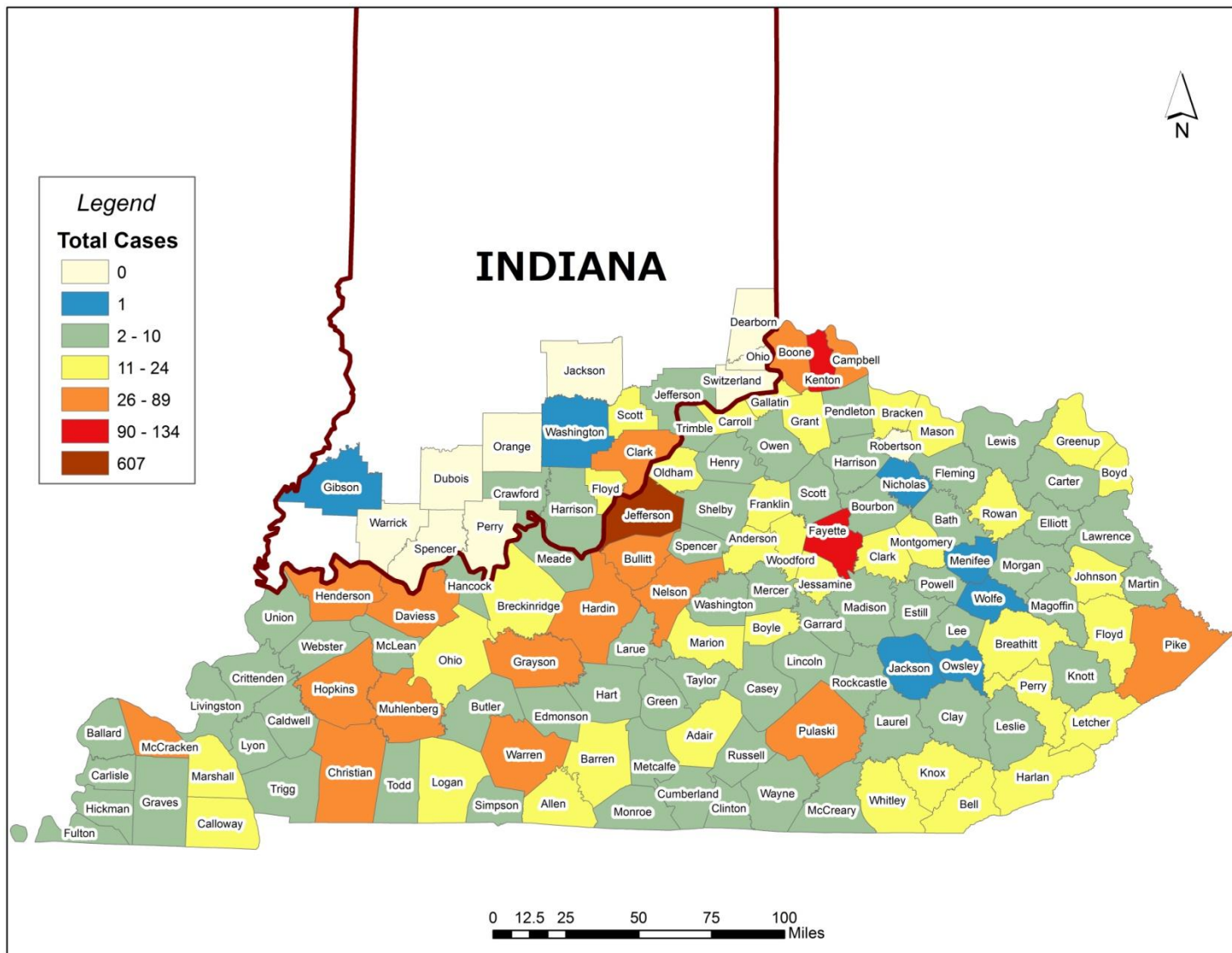
Total Cases

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.

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

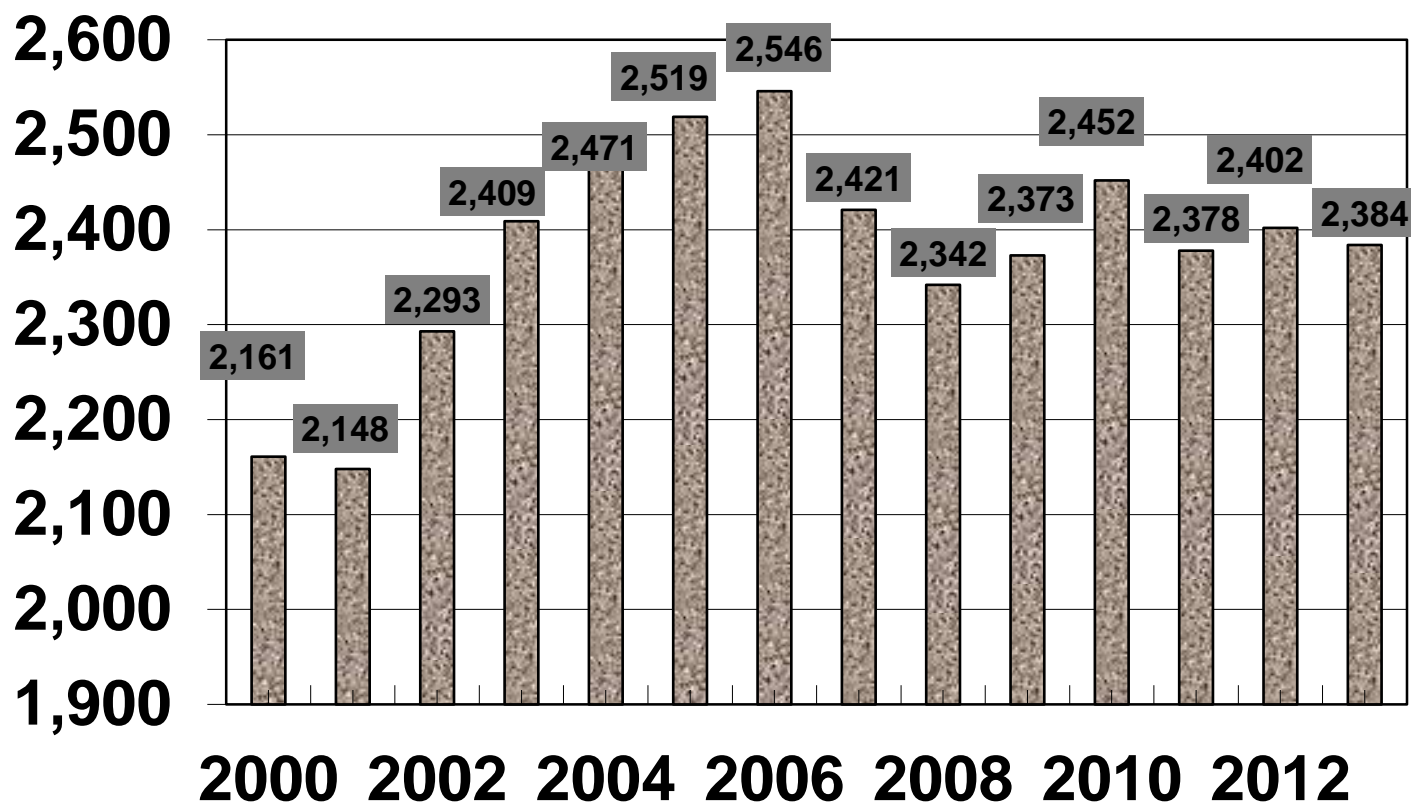
ME CASES 2013	
Table 1	
Total	2,384
OCME Louisville	1,098
OACME Frankfort	638
WKME Madisonville	275
NKME Ft. Thomas	373

Statewide Cases Sent for Autopsy *by* *Locality of Death, 2013* **Figure 2**



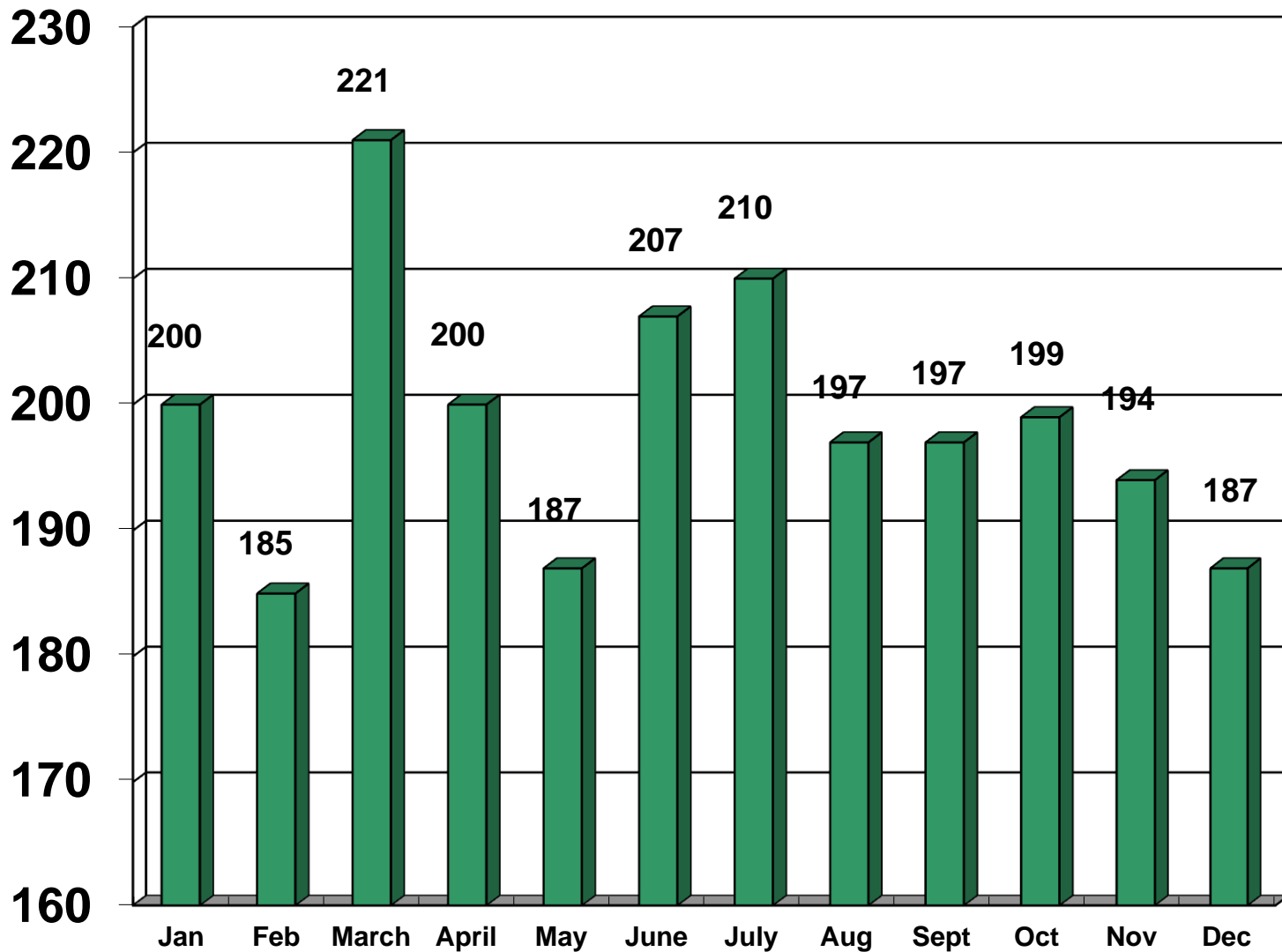
Statewide Cases by Year of Autopsy, 2000-2013

Figure 3

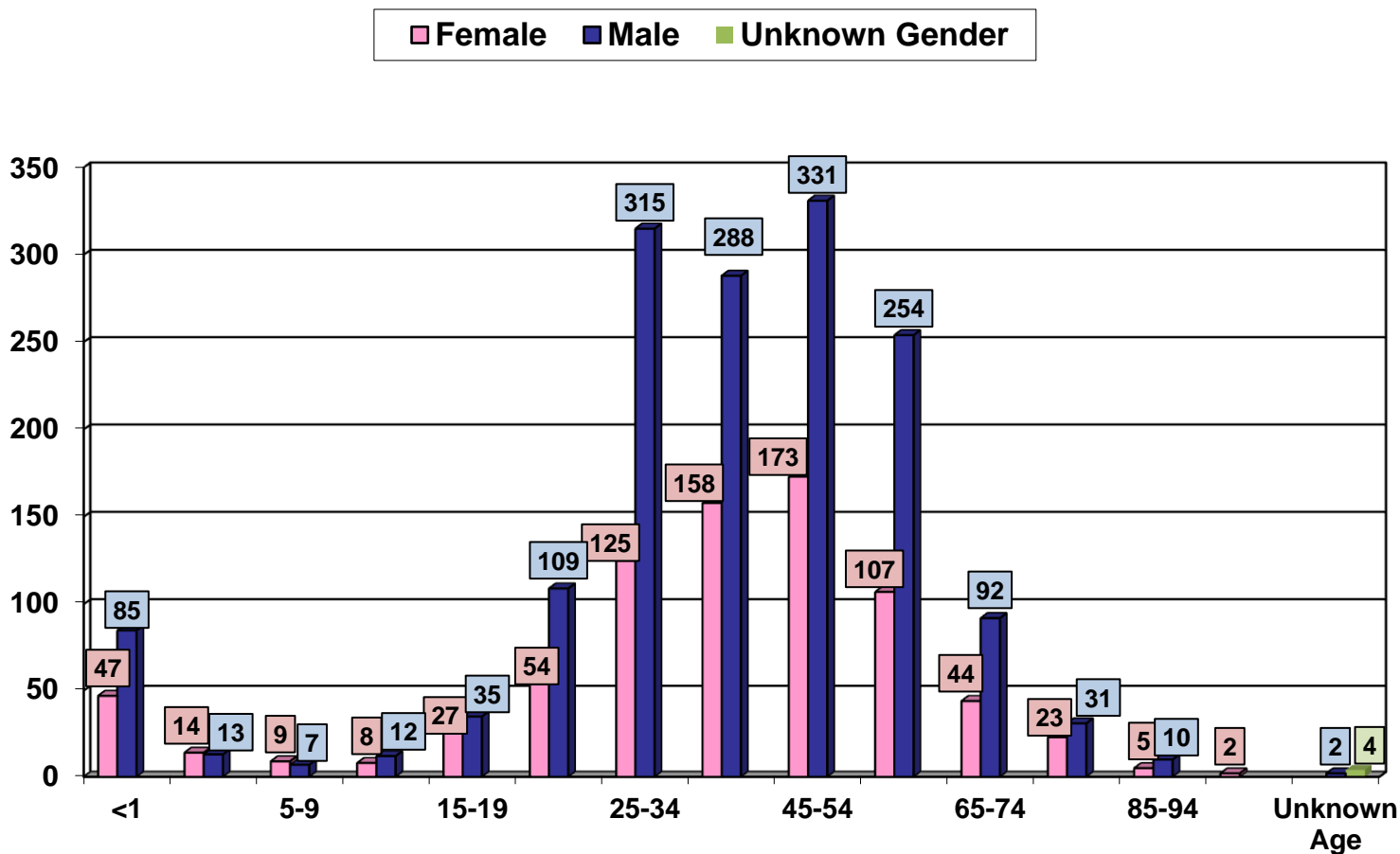


Statewide Cases by Month of Autopsy, 2013

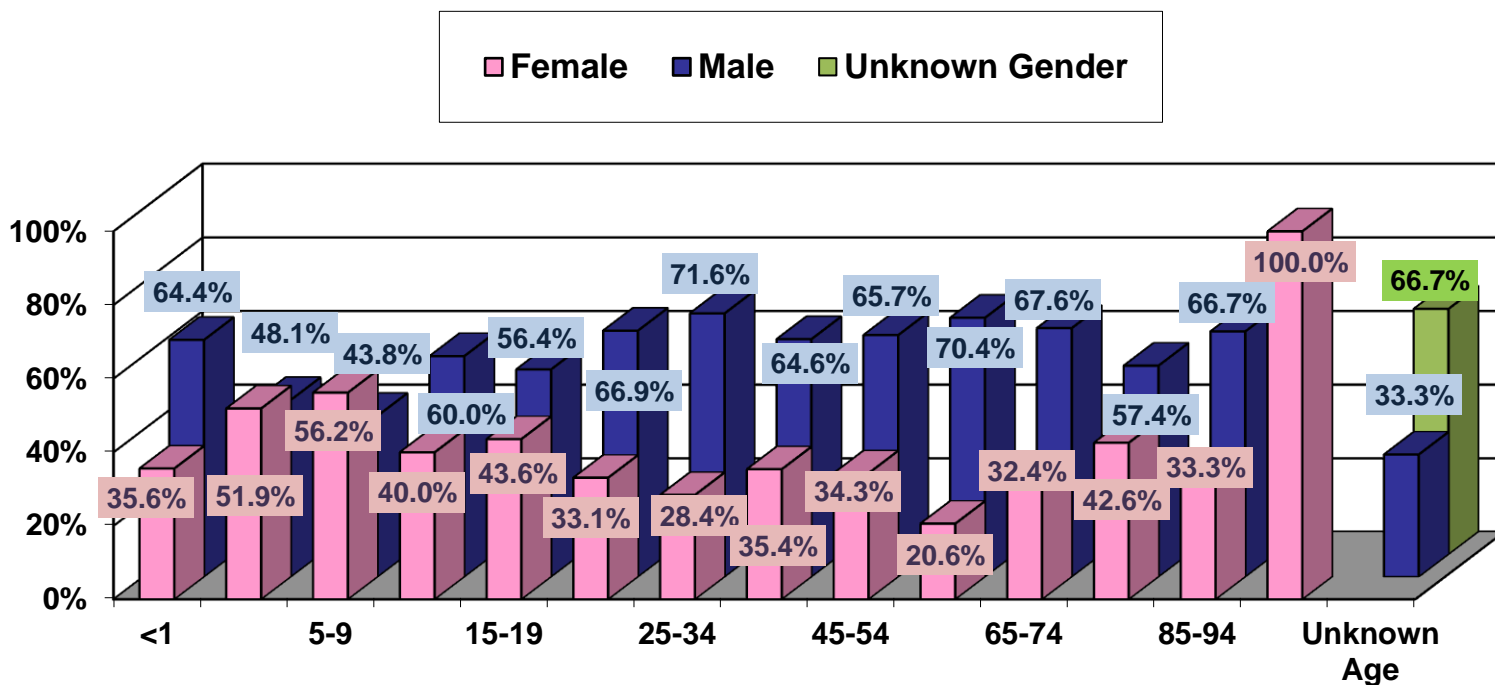
Figure 4



2013 Statewide Cases by Age and Gender Figure 5



2013 Statewide Percentages by Age and Gender Figure 6

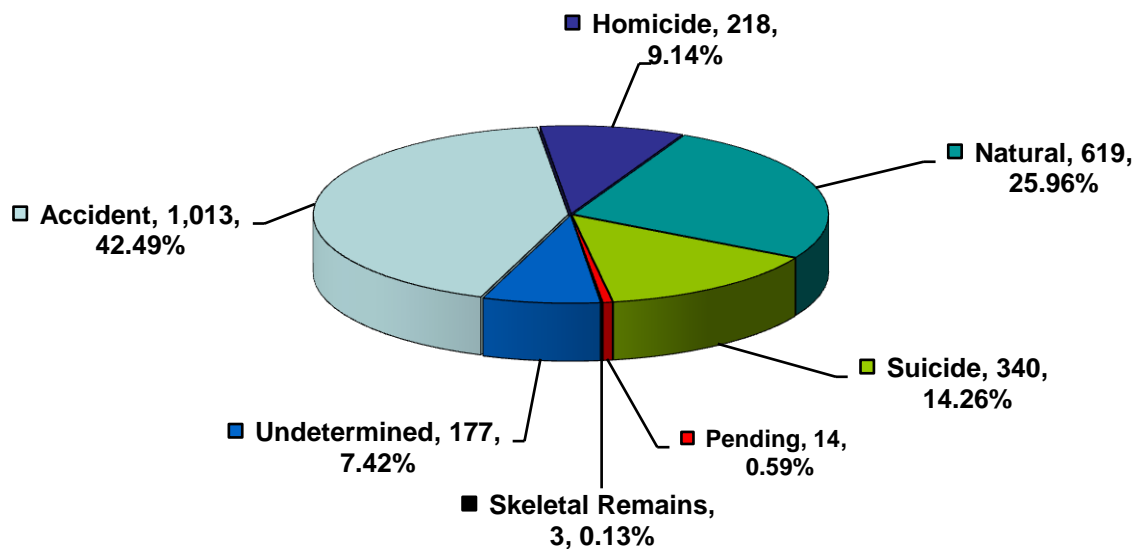
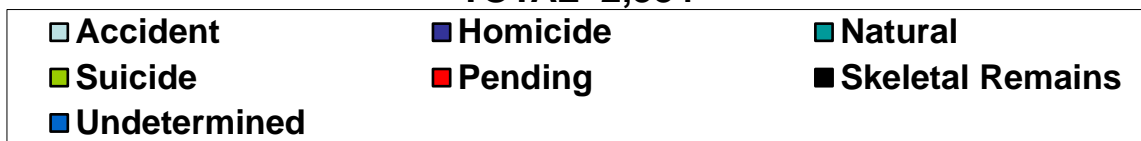


STATEWIDE MEDICAL EXAMINER CASES BY MANNER Table 2		
Manner	Total	Percentage
Accidents	1,013	42.49%
Homicides	218	9.14%
Naturals	619	25.96%
Suicides	340	14.26%
Undetermined	177	7.42%
Pending Further Information	14	0.59%
Skeletal Remains of No Forensic Significance	3	0.13%
TOTAL	2,384	

2013 Statewide Cases by Manner of Death

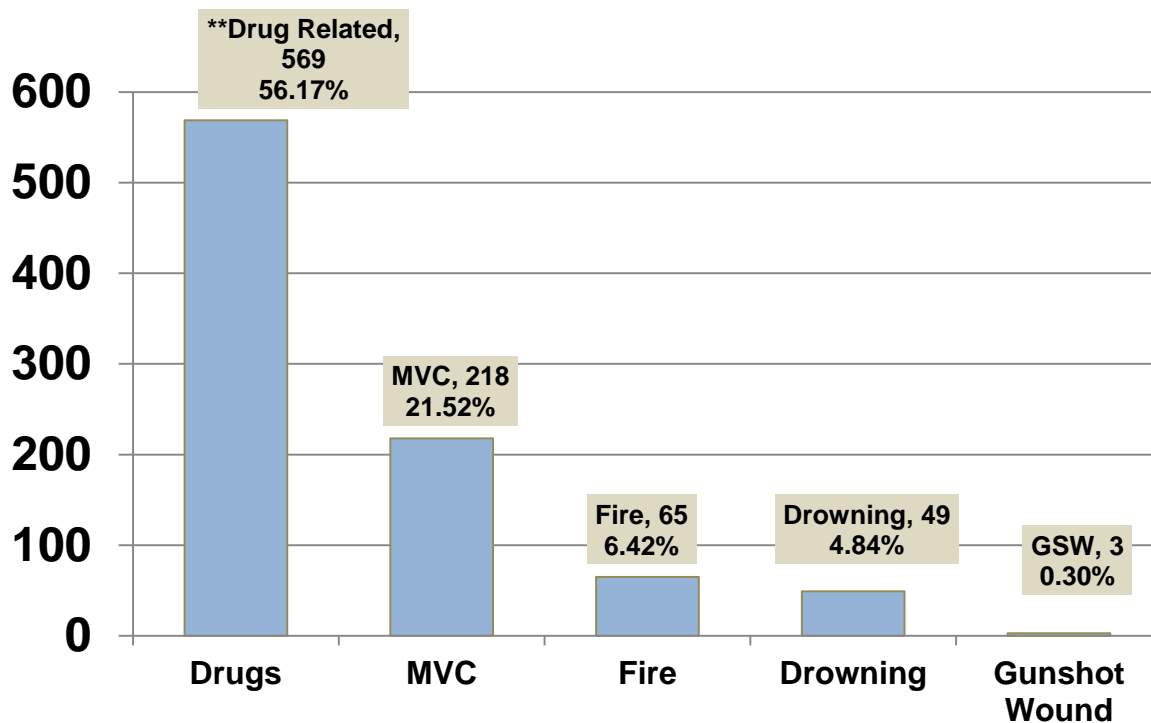
Figure 7

TOTAL=2,384



2013 Statewide Accidents by Major Causes of Death

Figure 8

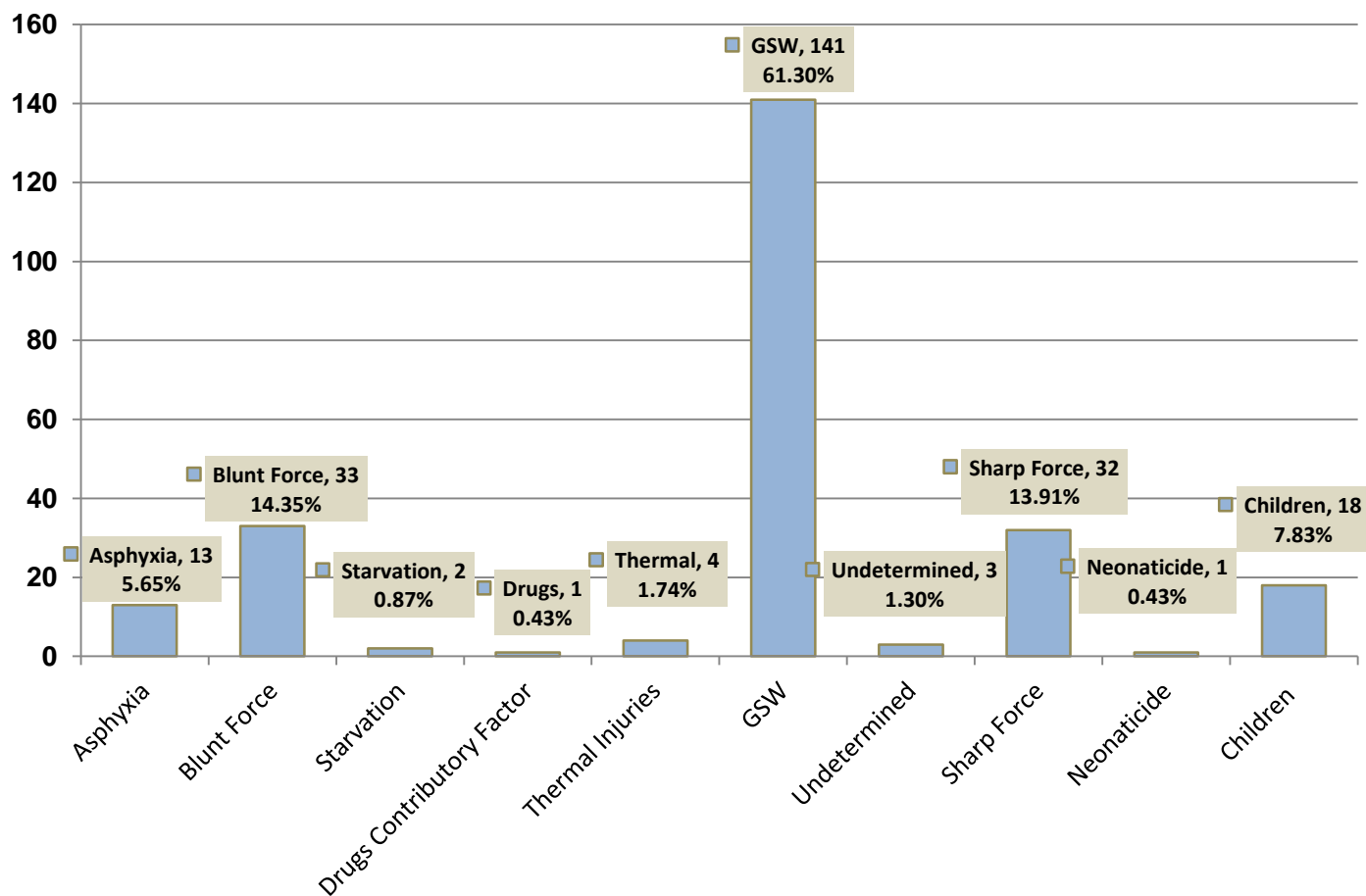


*Only Major Categories of accidents are illustrated

**Drug Related with manner of death other than "accident" are not included in above totals*

2013 Statewide Homicides by Cause of Death

Figure 9

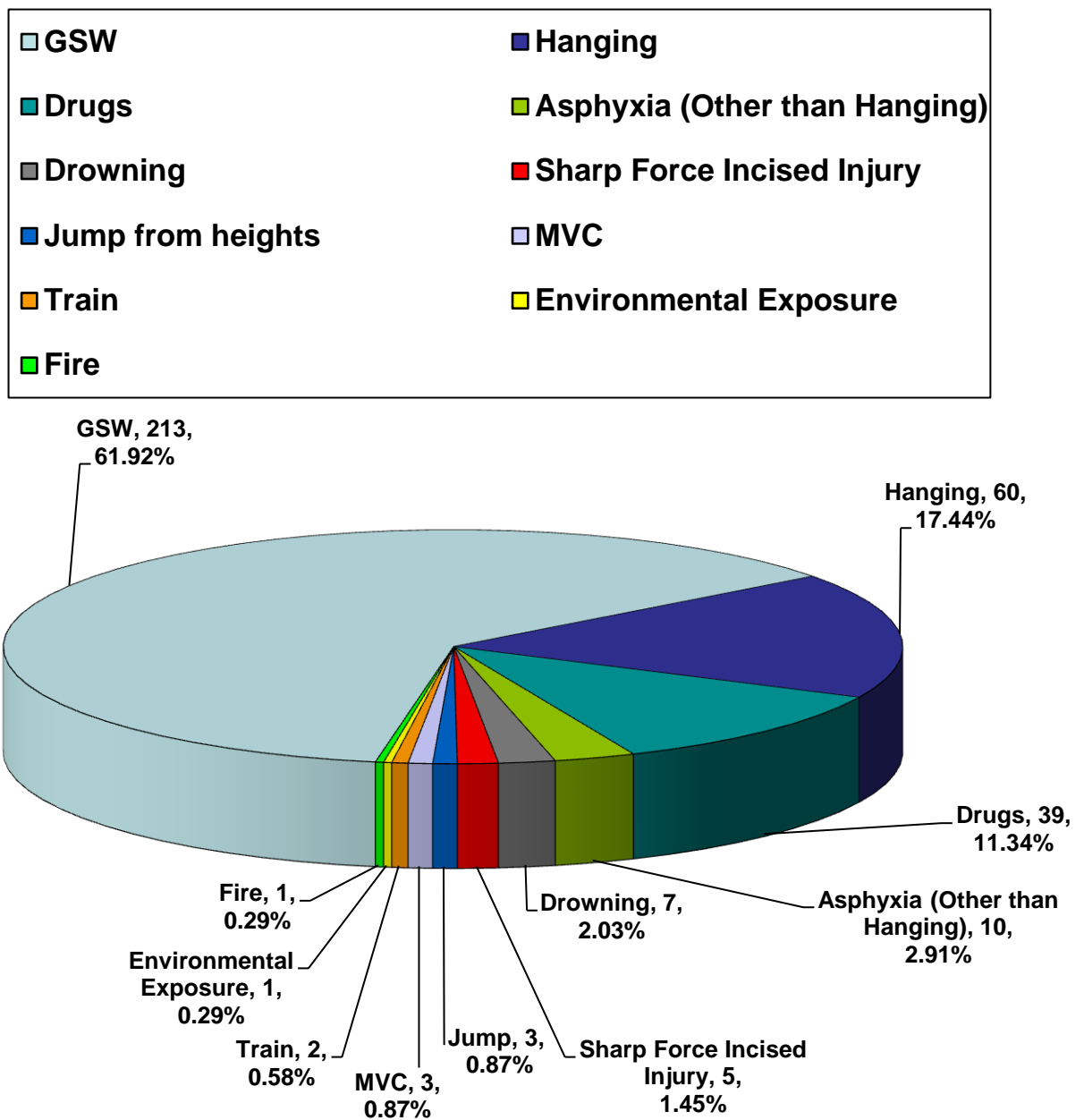


*Children = ages 17 and younger

**Percentages may be > than 100%,
as some decedents may have more than one (1)
type of injury.

2013 Statewide Suicides by Cause of Death

Figure 10



**2013 STATEWIDE MEDICAL EXAMINER
TOTALS BY SPECIFIC CASE TYPES****Table 3**

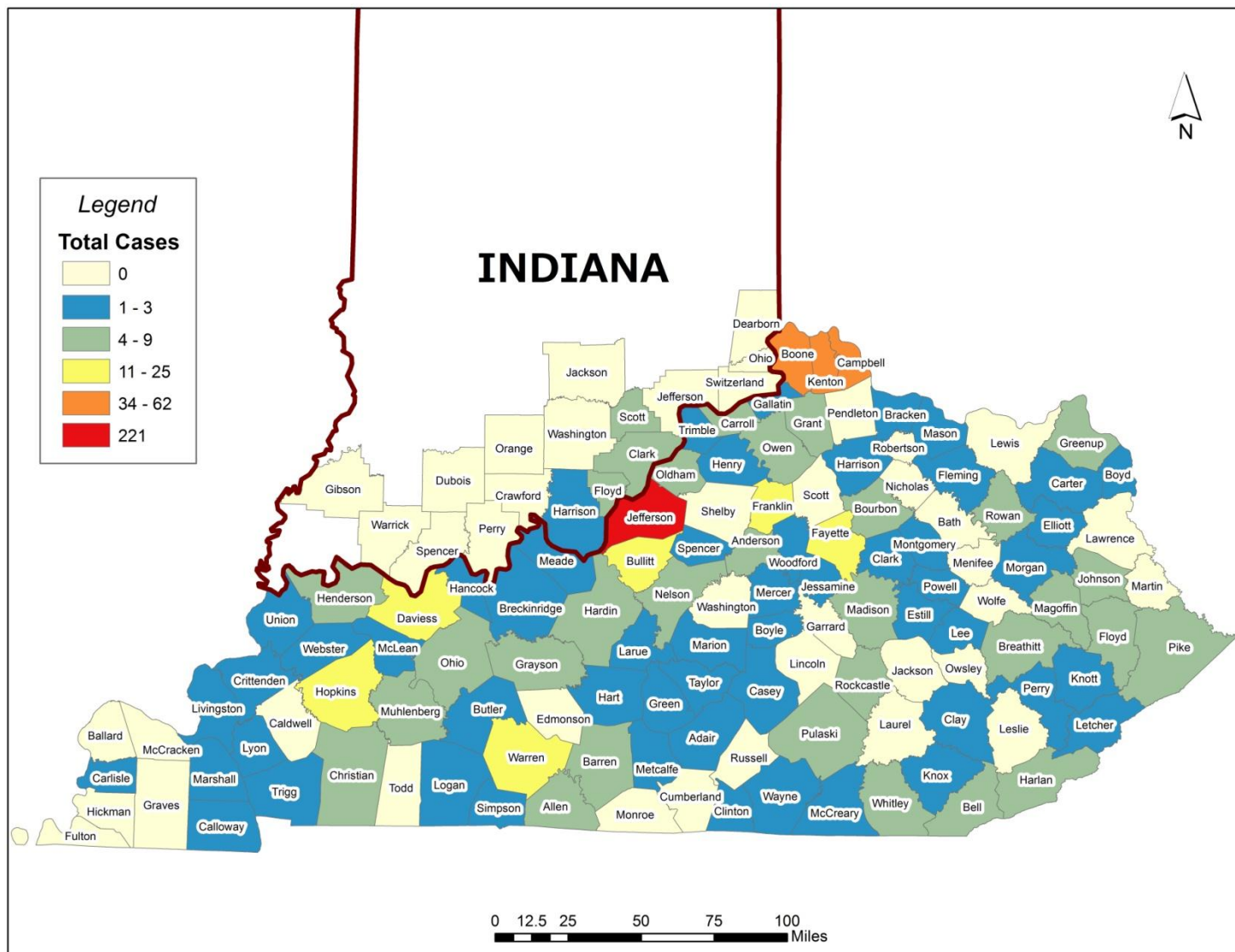
Type	Total	Percentage of Statewide Total
Drug Related	722	30.29%
MVCs	225	9.44%
GSWs	364	15.27%
Fire-Related	75	3.15%
Drowning	63	2.64%
Infants <1yr ALL Causes	133	5.58%
SUID	59	2.47%
Children >1yr ≤ 12yrs, ALL Causes	51	2.14%

2013 STATEWIDE MEDICAL EXAMINER DRUG RELATED DEATHS		
Table 4		
Manner	Total	Percentage
Accidents	569	78.81%
Homicides	3	0.42%
Suicides	39	5.40%
Undetermined	34	4.71%
Pending Further Information	3	0.42%
Insufficient Information	4	0.55%
Complications of Chronic Use	70	9.70%
TOTAL	722	100%

2013 STATEWIDE MEDICAL EXAMINER DRUG RELATED DEATHS CONTAINING HEROIN		
Table 5		
Manner	Total	Percentage
Accidents	214	93.04%
Suicides	2	0.87%
Undetermined	12	5.22%
Pending Further Information	2	0.87%
TOTAL	230	100%

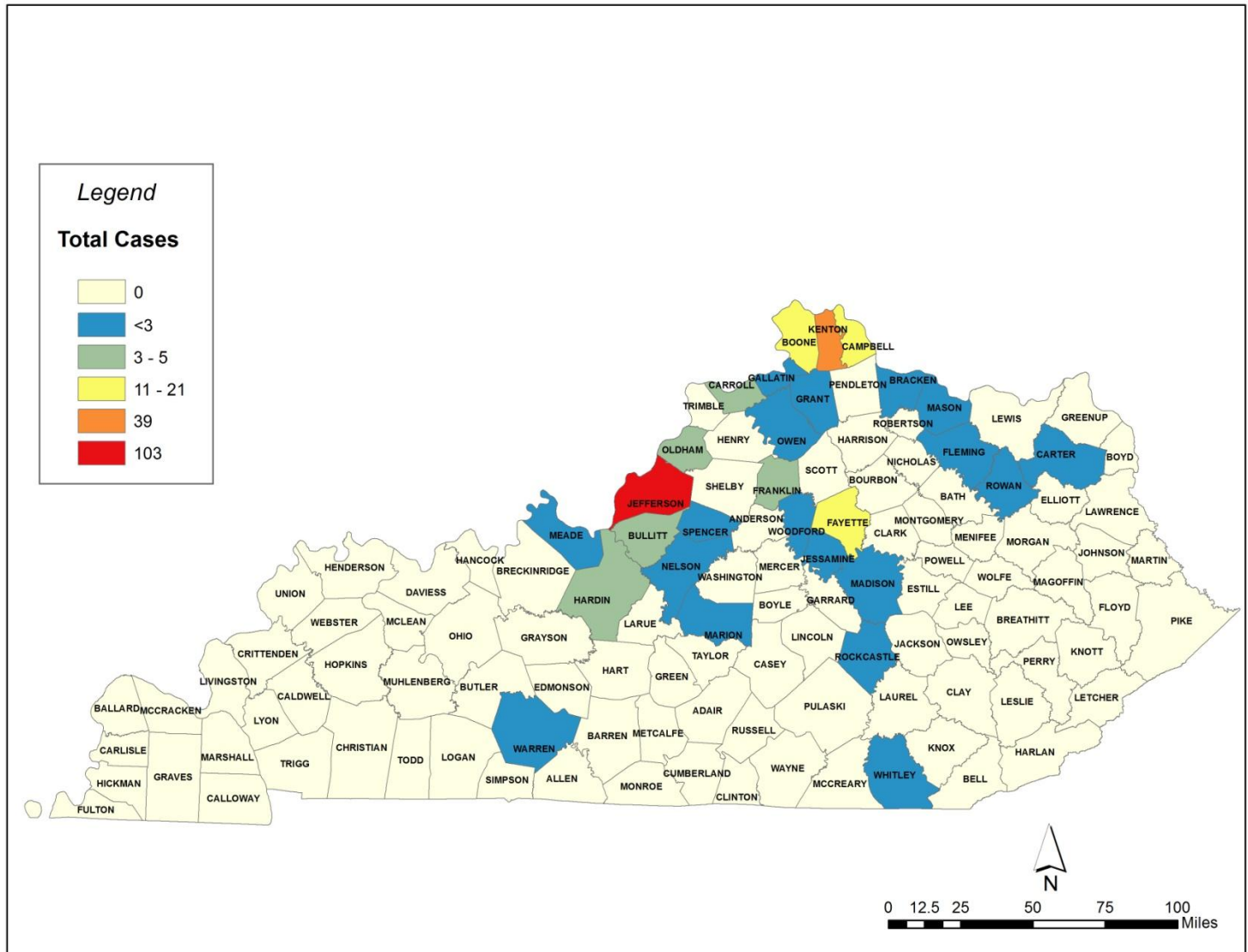
Statewide Drug Related Deaths Sent for Autopsy by Locality of Death, 2013

Figure 11



Statewide Drug Related Deaths Containing Heroin Sent for Autopsy by Locality of Death, 2013

Figure 12

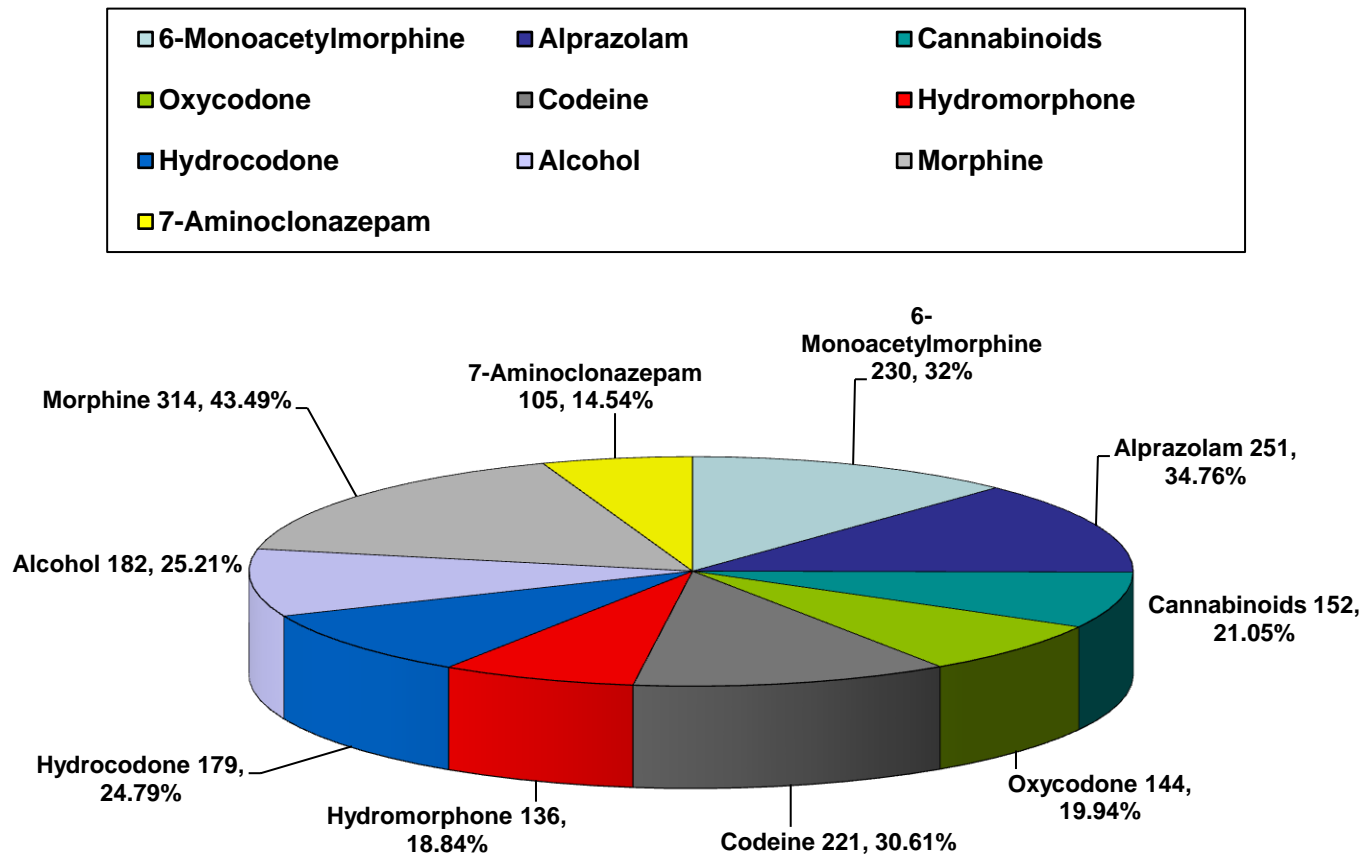


2013 Statewide Most Frequently Detected Drugs in the Blood of Drug Related Death Victims

Figure 13

Total = 722*

*Includes Indiana



*Morphine represents true drug and/or metabolite of Heroin: Heroin is known in 230 statewide cases

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

*Total statewide overdose cases = 722

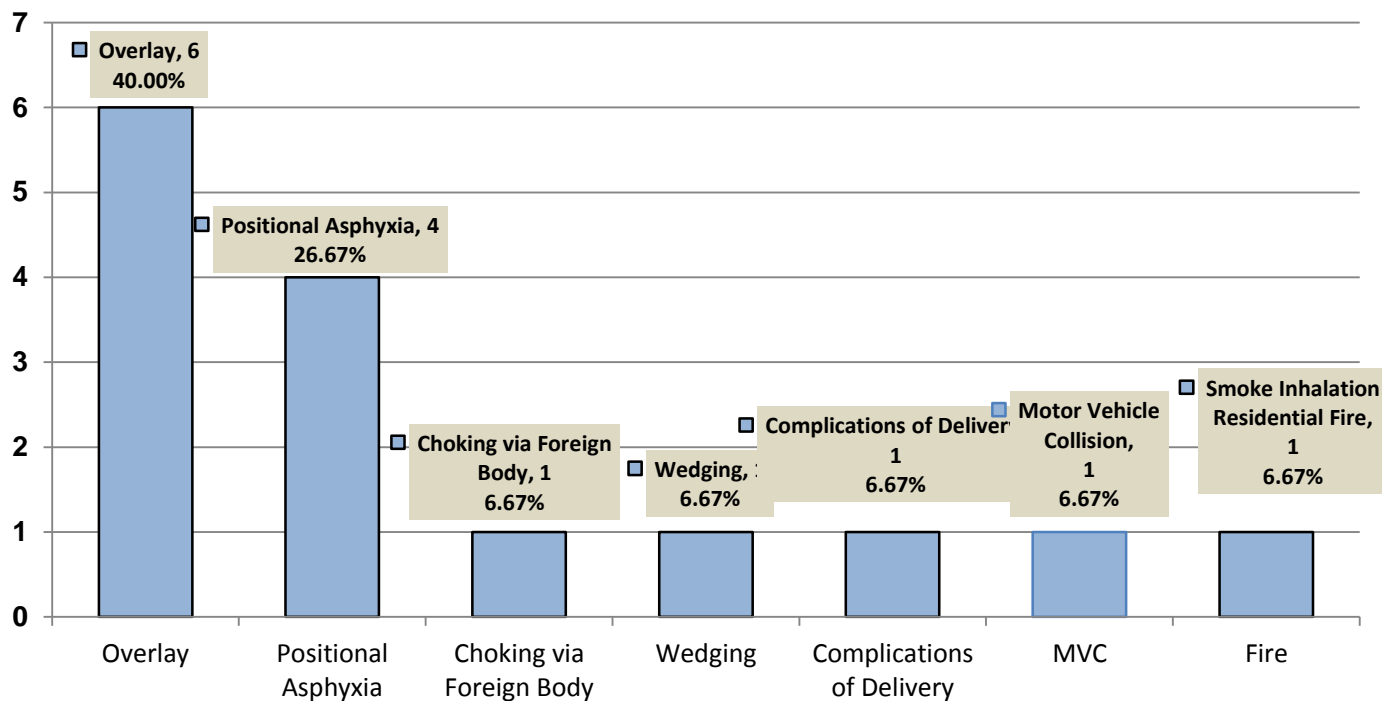
*This figure delineates only drugs occurring ≥ 100 .

Statewide Medical Examiner Data of Children (Birth-17)

2013 Statewide Child (<1) Accidents by Cause of Death

Figure 14

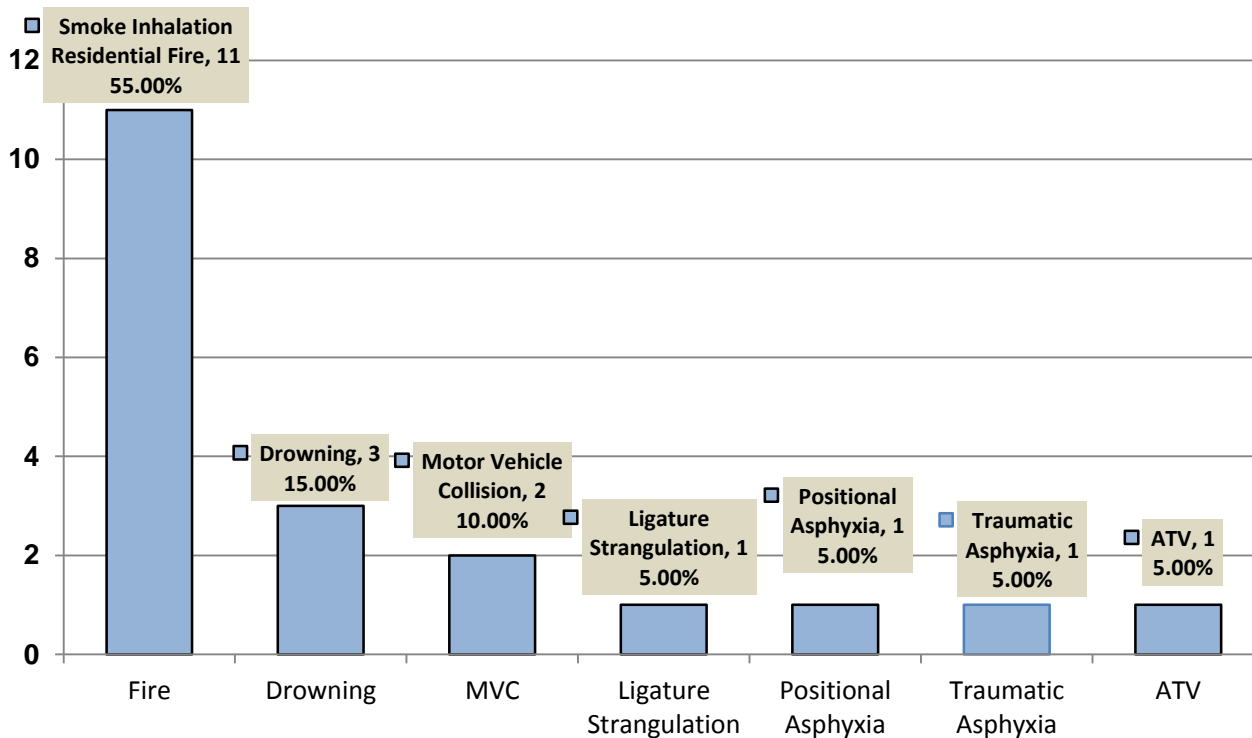
Total <1 Accidental Deaths=15



2013 Statewide Child (1-5) Accidents by Cause of Death

Figure 15

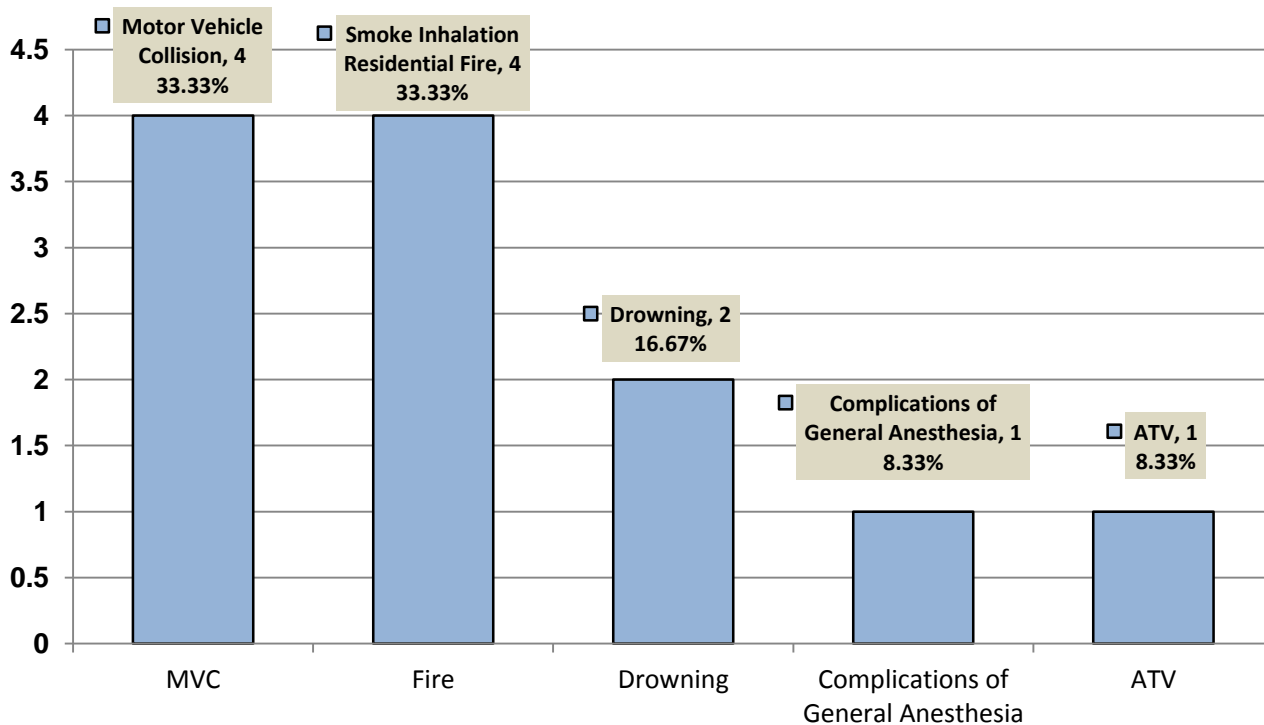
Total 1-5 Accidental Deaths=20



2013 Statewide Child (6-12) Accidents by Cause of Death

Figure 16

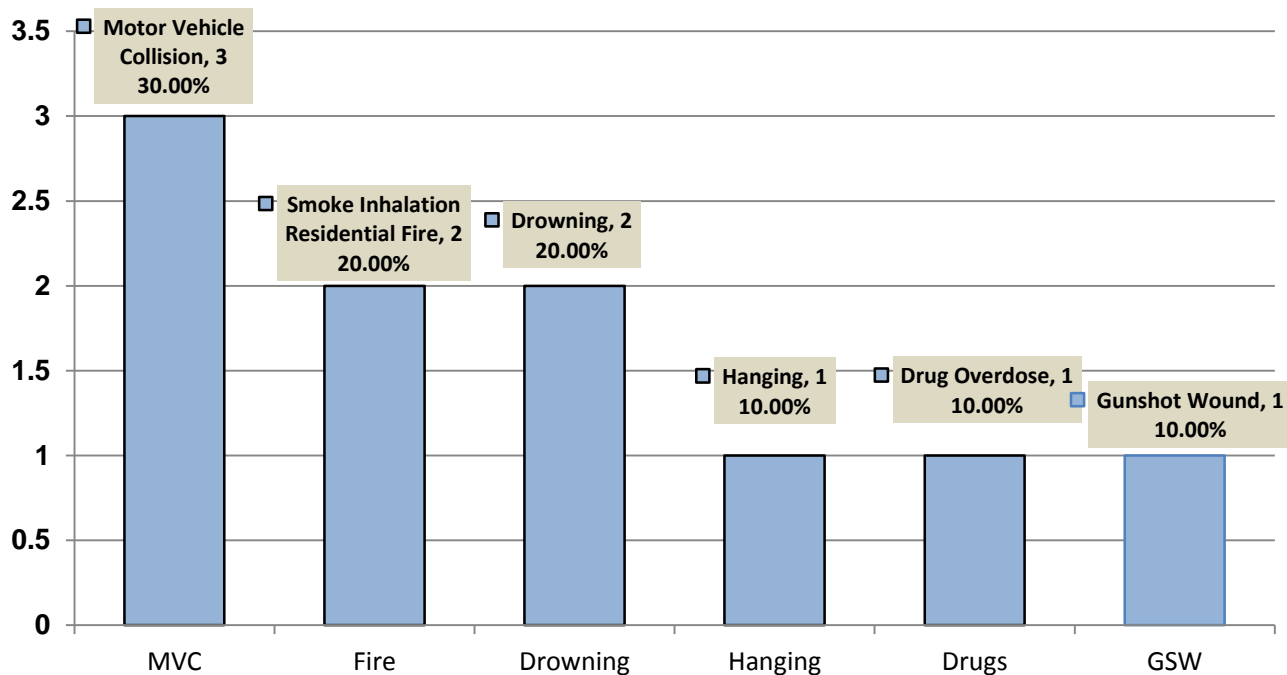
Total 6-12 Accidental Deaths=12



2013 Statewide Child (13-17) Accidents by Cause of Death

Figure 17

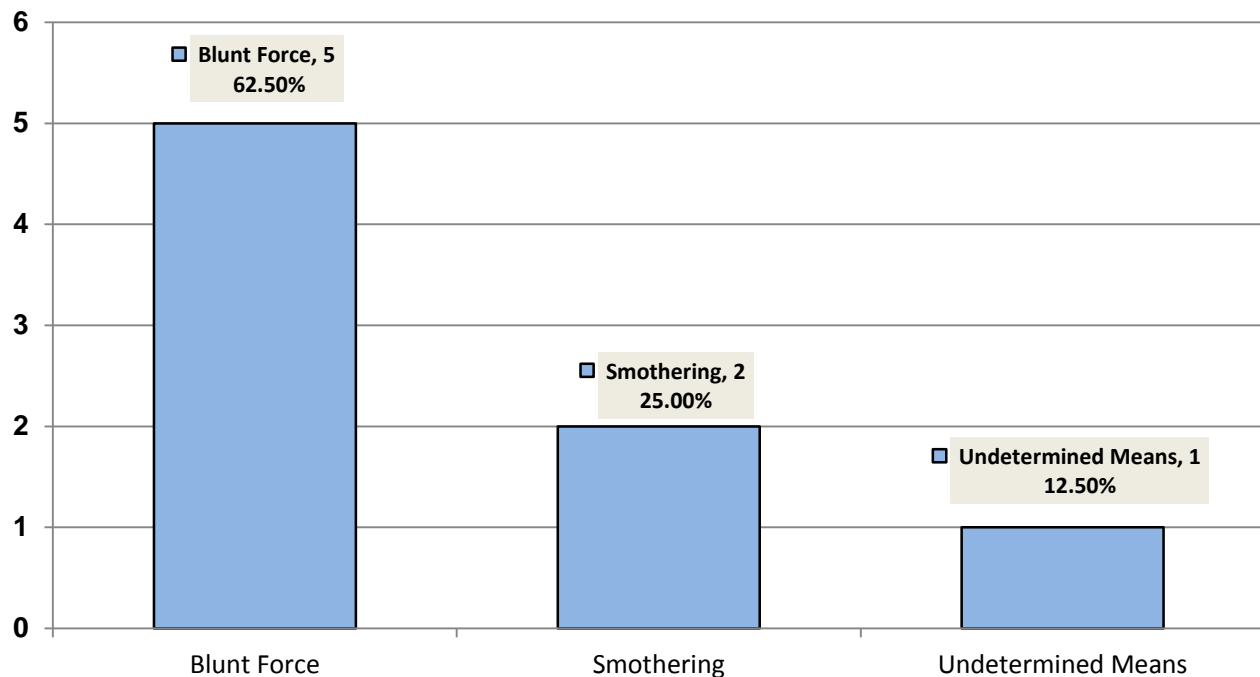
Total 13-17 Accidental Deaths=10



2013 Statewide Child (<1) Homicides by Cause of Death

Figure 18

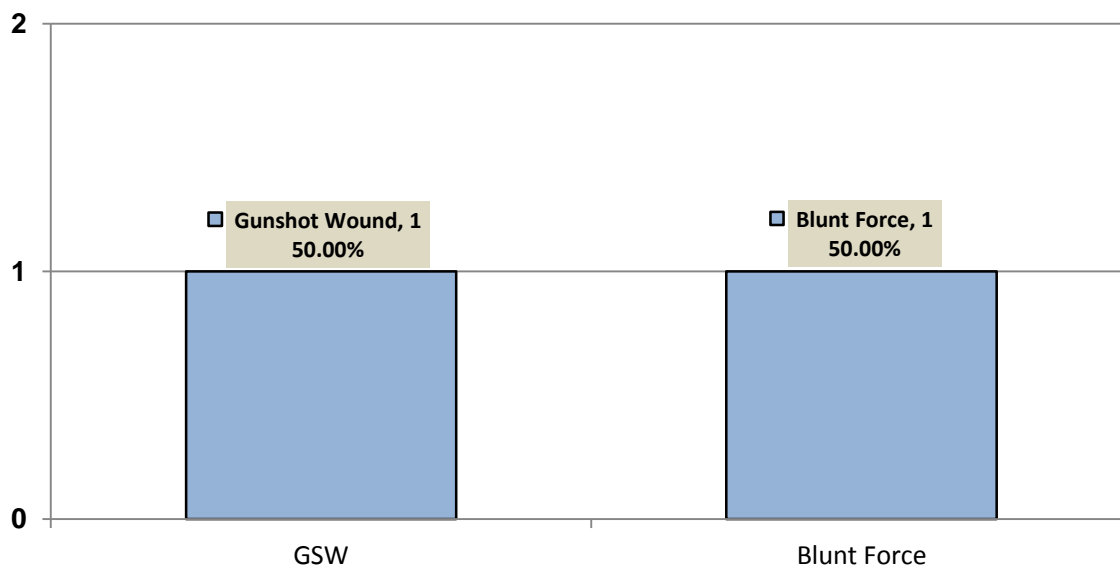
Total <1 Homicide Deaths=8



2013 Statewide Child (1-5) Homicides by Cause of Death

Figure 19

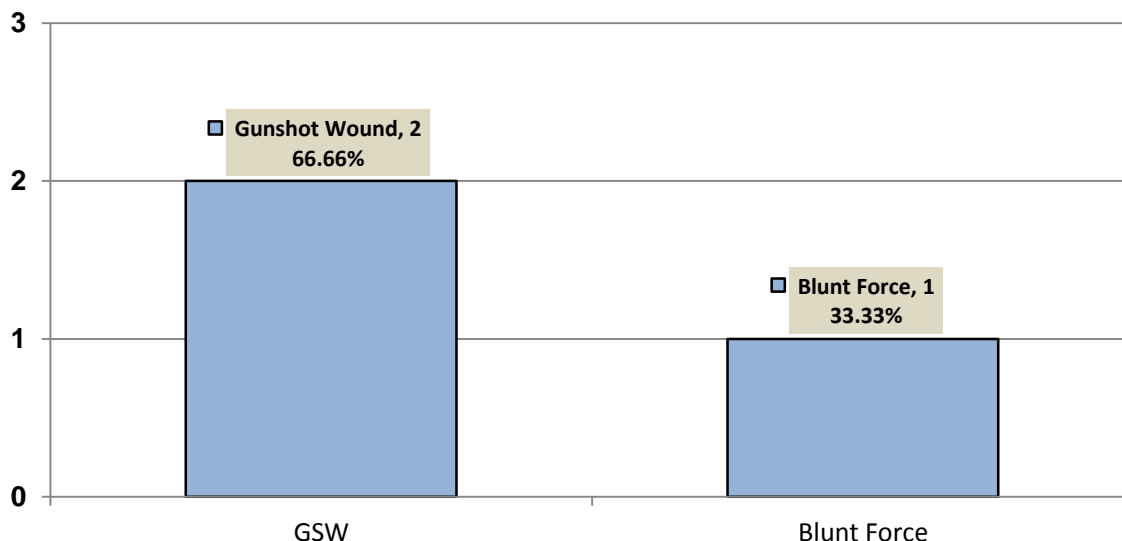
Total 1-5 Homicide Deaths=2



2013 Statewide Child (6-12) Homicides by Cause of Death

Figure 20

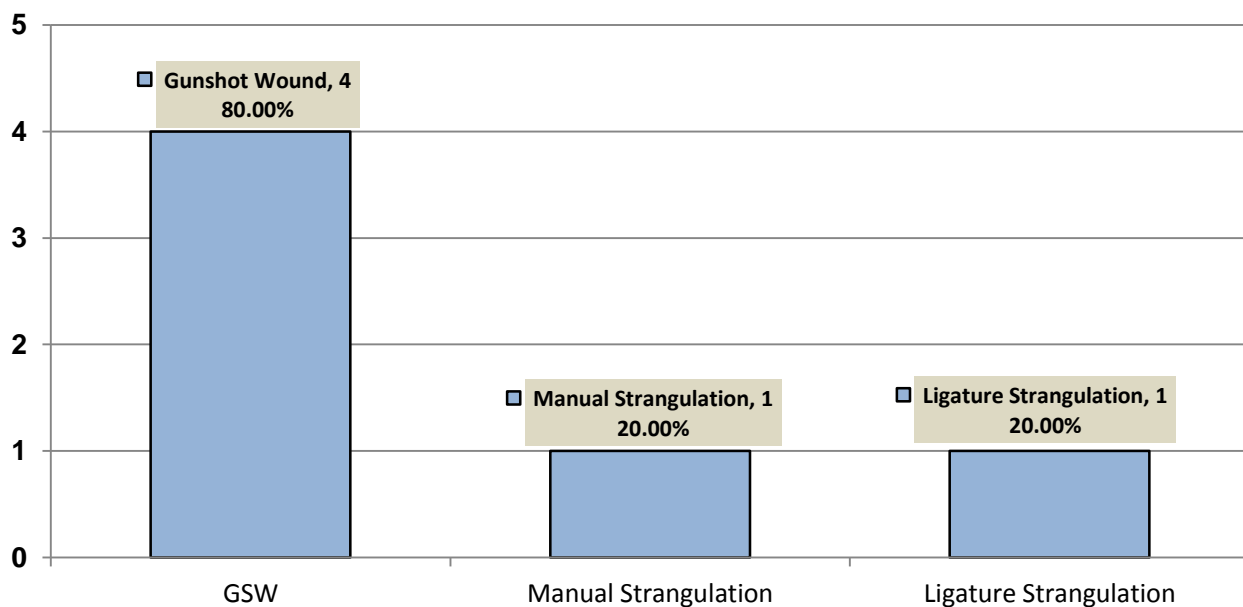
Total 6-12 Homicide Deaths=3



2013 Statewide Child (13-17) Homicides by Cause of Death

Figure 21

Total 13-17 Homicide Deaths=5



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

2013 Statewide Child (6-12) Suicides by Cause of Death

Figure 22

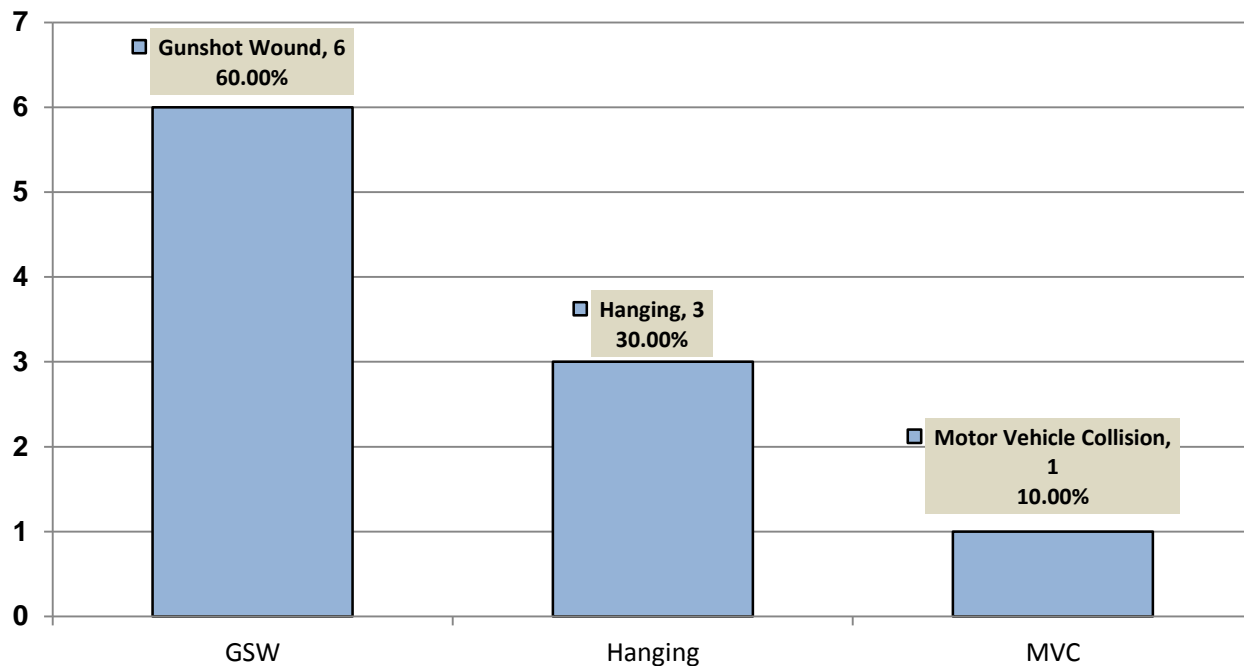
Total 6-12 Suicide Deaths=1



2013 Statewide Child (13-17) Suicides by Cause of Death

Figure 23

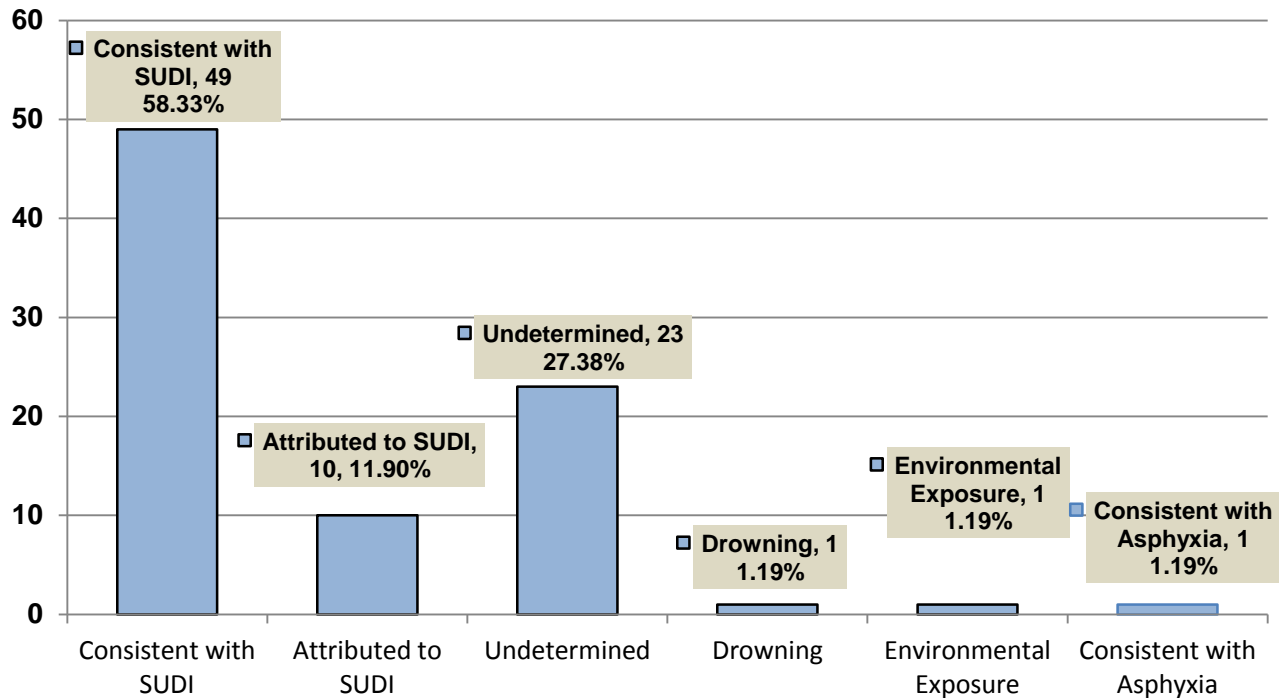
Total 13-17 Suicide Deaths=10



2013 Statewide Child (<1) Undetermined Manners by Cause of Death

Figure 24

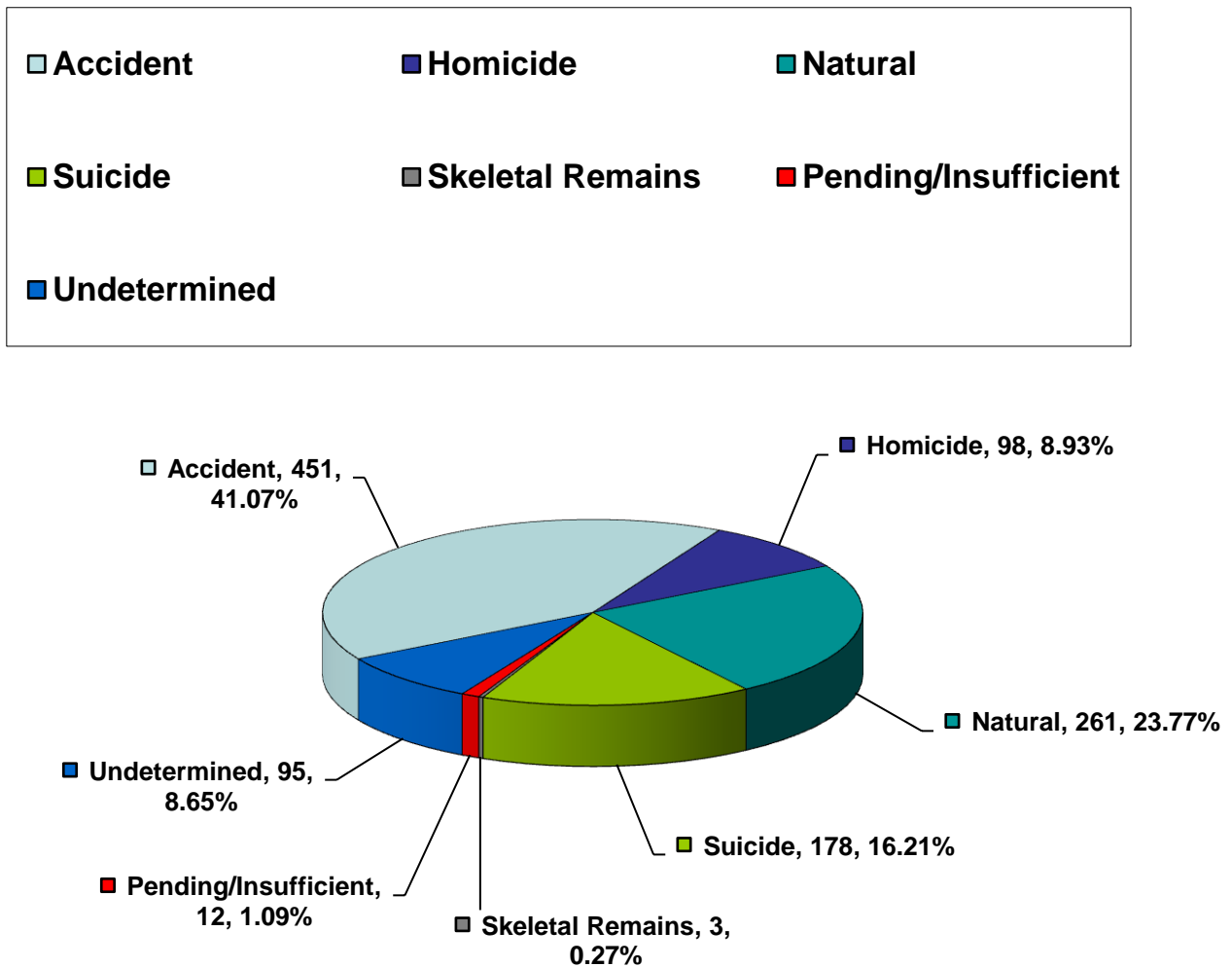
Total <1 Undetermined Deaths=84



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

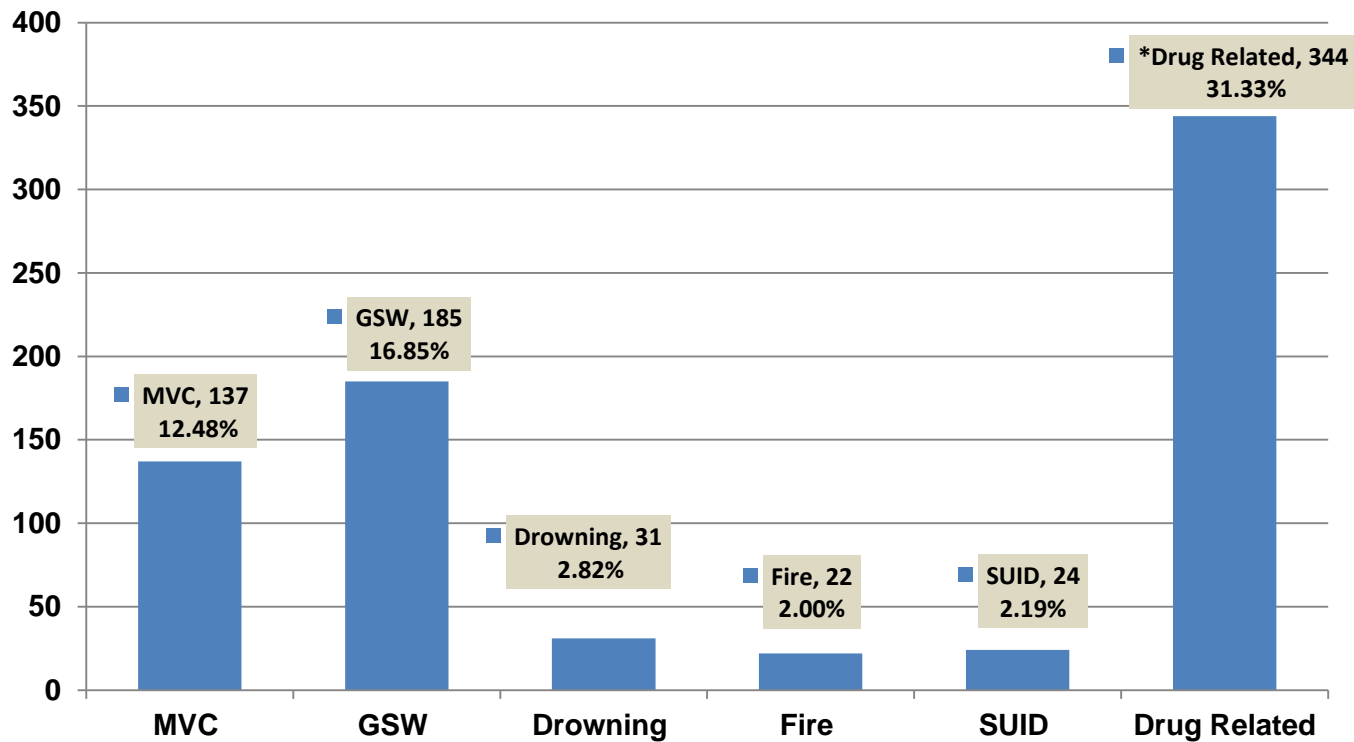
Louisville Medical Examiner Office Data

2013 Louisville Cases by Manner of Death Figure 25



2013 Louisville Cases by Common Causes of Death

Figure 26



*Drug Related total includes Indiana

Louisville Totals by Common Causes And subsequent Manners of Death

Table 6

Fatal Event	Total Cases	Percentage
<i>Drug Related - Kentucky</i>	326	33.96%
Accident	229	70.25%
Homicide§	1	0.31%
Suicide	16	4.91%
Natural (Complications of Chronic Use)	47	14.42%
Insufficient Information	4	1.23%
Pending Further Information	3	0.92%
Undetermined	26	7.98%
Heroin Present	124	38.04%
<i>Drug Related - Indiana</i>	18	21.18%
Accident	13	72.22%
Natural (Complications of Chronic Use)	4	22.22%
Suicide	1	5.56%
Heroin Present	4	22.22%
<i>Motor Vehicle Accident</i>	137	12.48%
Accident	132	96.35%
Suicide	2	1.46%
Undetermined/Pending	3	2.19%
<i>Gunshot Wound</i>	185	16.85%
Accident	2	1.08%
Homicide	69	37.30%
Suicide	107	57.84%
Undetermined/Pending Further Information	7	3.78%
<i>Drowning</i>	31	2.82%
Accident	22	70.97%
Suicide	5	16.13%
Undetermined/Pending Further Information	4	12.90%
<i>Fire Related</i>	22	2.00%
Accident	21	95.45%
Undetermined/Pending Further Information	1	4.55%
<i>SUID</i>	24	2.19%
Undetermined	24	100%
<i>All other Louisville Accidents</i>	37	3.37%

The above does not represent the total number of Louisville cases

▣Other than Drug Related Deaths, Indiana cases are included in totals▣

§Homicide: Multiple Substance Intoxication was a contributing factor

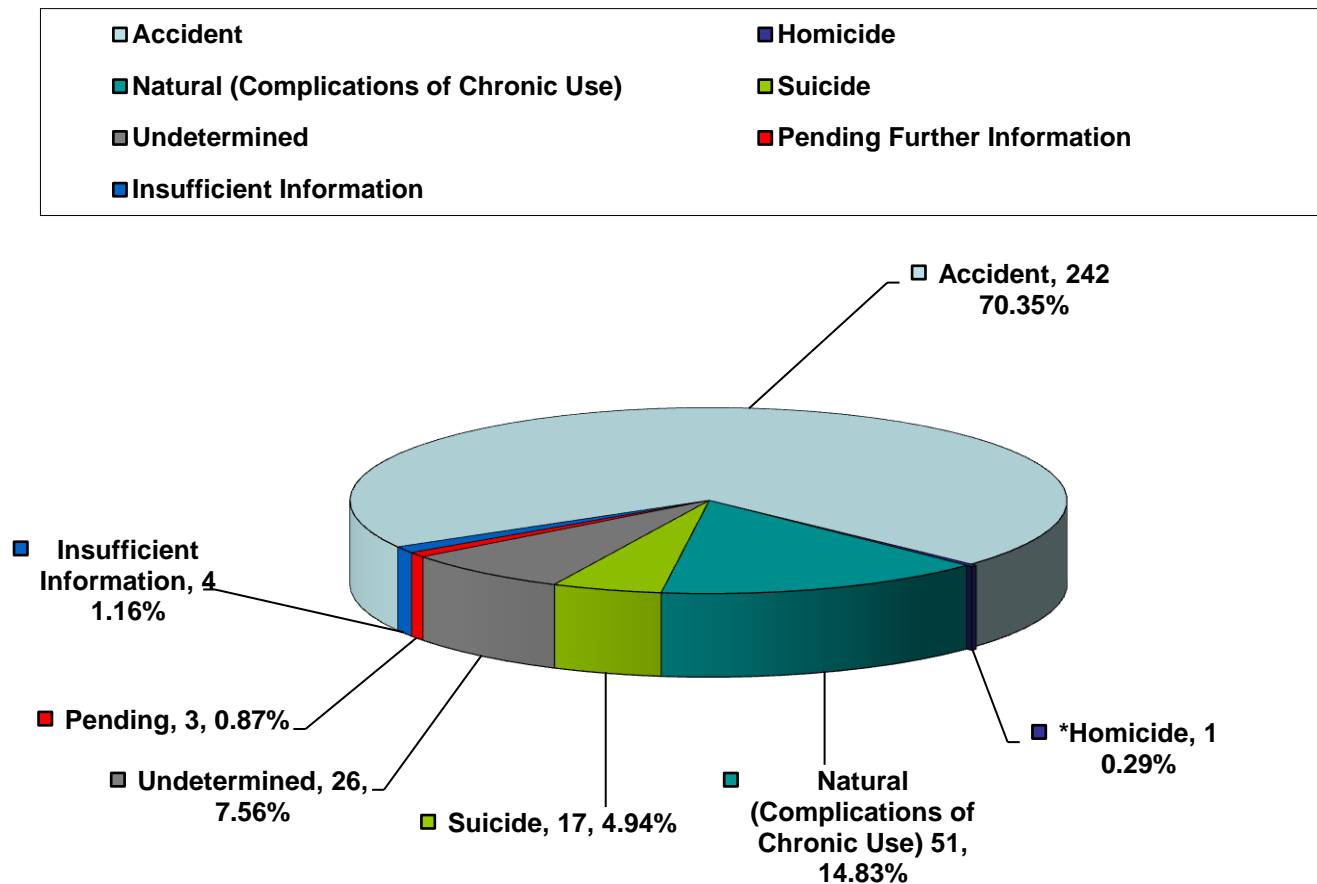


2013 Louisville Drug Related by Manner of Death

Figure 27

Total = 344

Includes Indiana



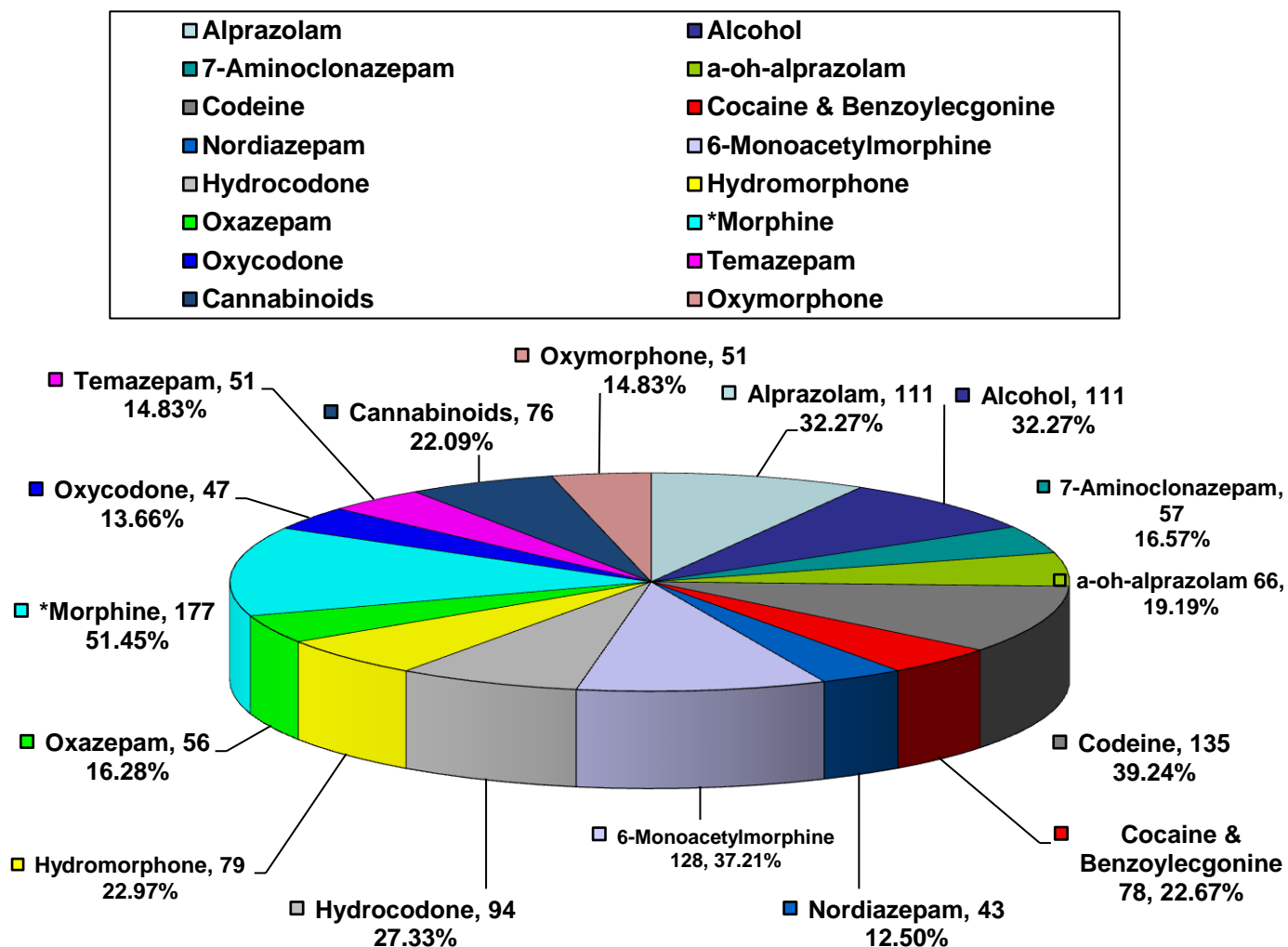
*Homicide: Multiple Substance Intoxication was a contributing factor

2013 Louisville Most Frequently Detected Drugs in the Blood of Drug Related Death Victims

Figure 28

Total = 344*

*Includes Indiana



*Morphine represents true drug and/or metabolite of Heroin

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

¤Detected drugs were found in blood, urine, and/or vitreous fluids.

§This figure delineates only drugs occurring ≥ 30

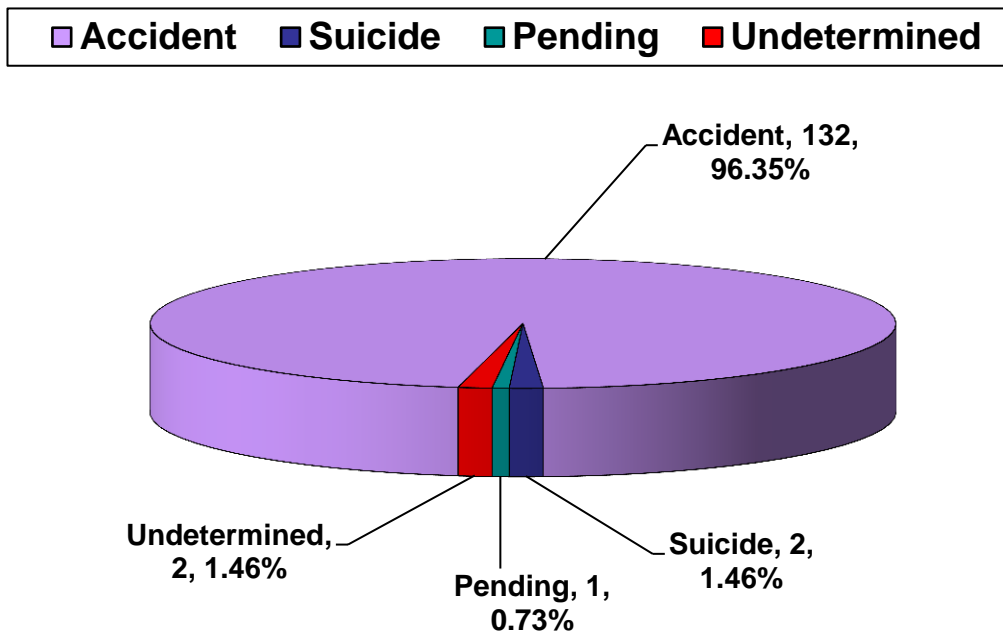
2013 Louisville Additional Drugs Detected in Drug Related Death Victims

Table 7

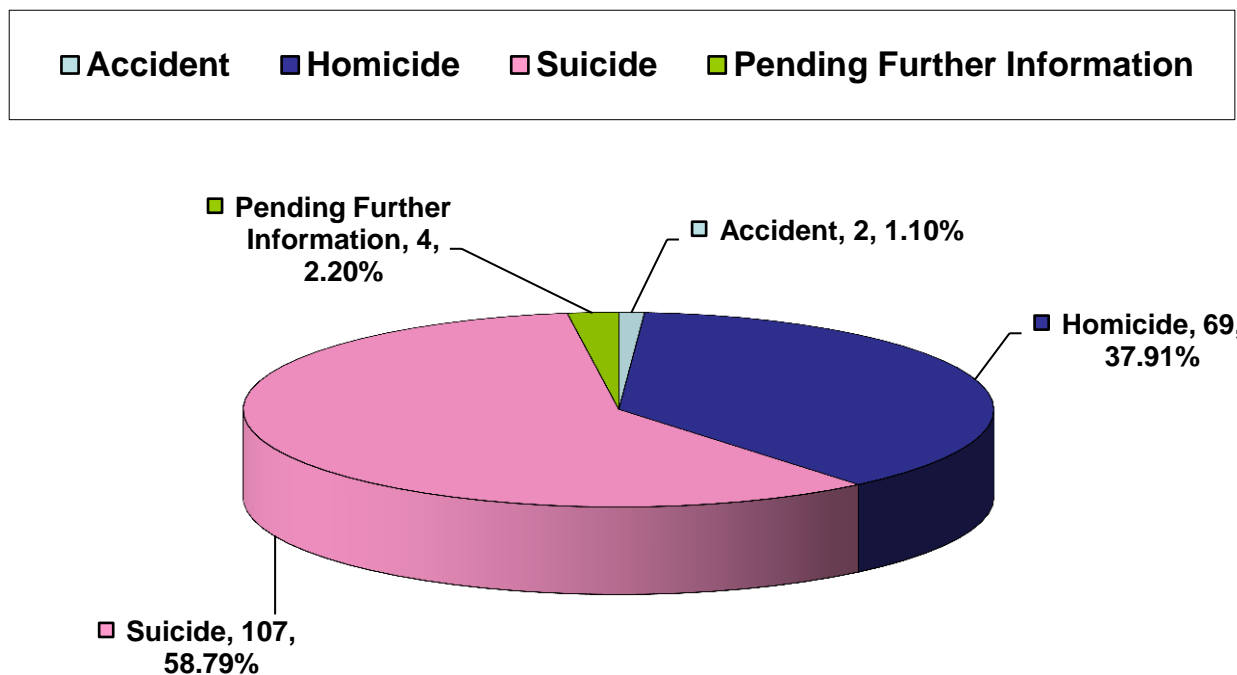
*Includes Indiana

11-carboxy-tetrahydrocannabinol	16	Levetiracetam	1
2-ethylidene-1,5-3,3-diphenylpyrrolidine	4	Lidocaine	1
Acetaminophen	7	Meprobamate	6
Acetone	2	Methadone	28
Alpha-hydroxyalprazolam	5	Methamphetamine	24
Amitriptyline	6	Methanol	1
Amlodipine	2	Methylenedioxymethamphetamine	2
Ampethamine	22	Metoclopramide	1
Atenolol	1	Mirtazapine	3
Barbiturates	1	Naloxone	1
Buprenorphine	9	Naproxen	1
Butalbital	6	Norbuprenorphine	9
Cabamazepine Epoxide	1	Nordoxepin	2
Caffeine	23	Norfentanyl	11
Carasoprodol	1	Norfluoxetine	4
Carbamazepine	5	Norsertaline	3
Carboxy Tetrahydrocannabinol	17	Nortramadol	8
Carisoprodol	3	Nortriptyline	6
Chlorophenylpiperazine	1	Nuprenorphine	1
Citalopram	6	Olanzapine	1
Cloazepam	14	Orphenadrine	1
Cocaethylene	4	Oxaprozin	1
Cyclobenzaprine	6	Paroxetine	4
Dextromethorphan	1	Pentobarbital	5
Diazepam	23	Phentermine	1
Diphenhydramine	10	Phytoin	1
Doxepin	2	Pregabalin	1
Doxylamine	3	Promethazine	2
Duloxetine	3	Pseudoephedrine	2
EDDP	12	Quetiapine	6
Fentanyl	14	Salicylate	2
Fluoxetine	3	Sertaline	3
Gabapentin	16	Topiramate	3
Glucose	2	Tramadol	7
Hydrochlorothiazide	2	Trazodone	3
Hydroxyzine	2	Valproic Acid	1
Lamotrigine	1	Zolpidem	5
Laprazolam	7		

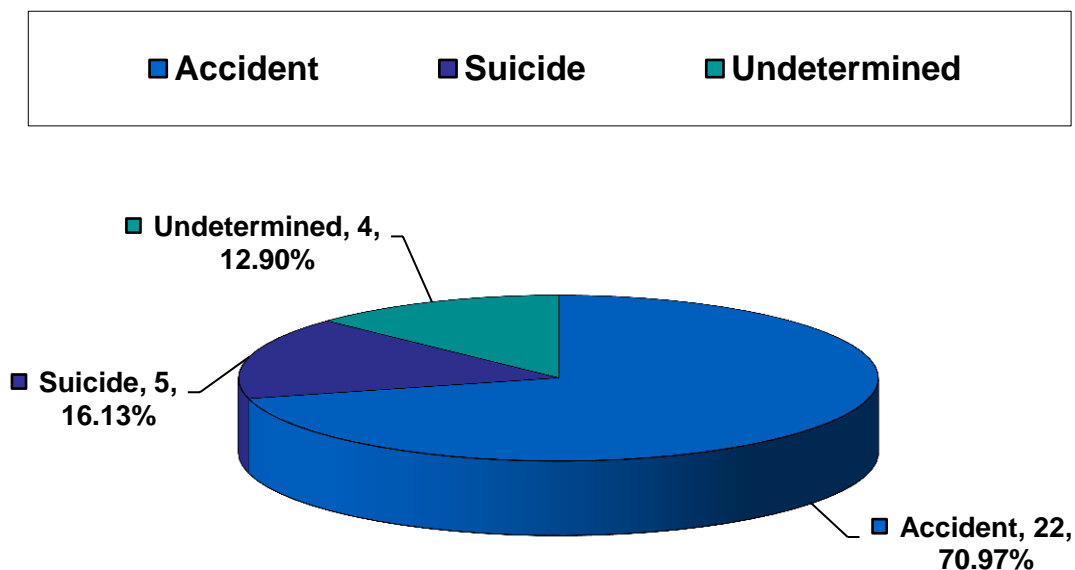
2013 Louisville MVC by Manner of Death Figure 29



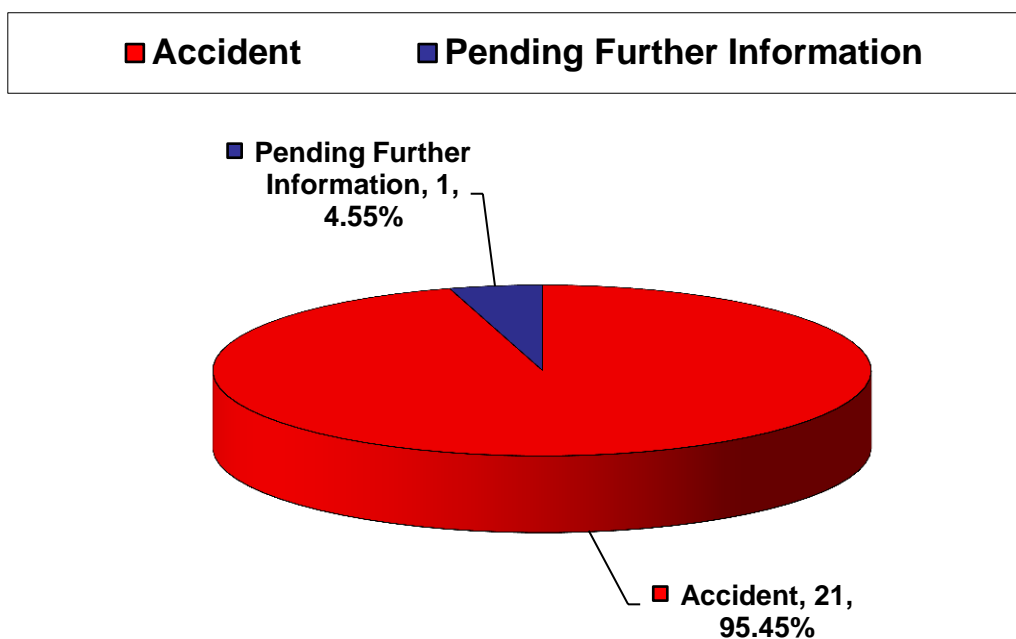
2013 Louisville GSW by Manner of Death Figure 30



2013 Louisville Drowning by Manner of Death Figure 31



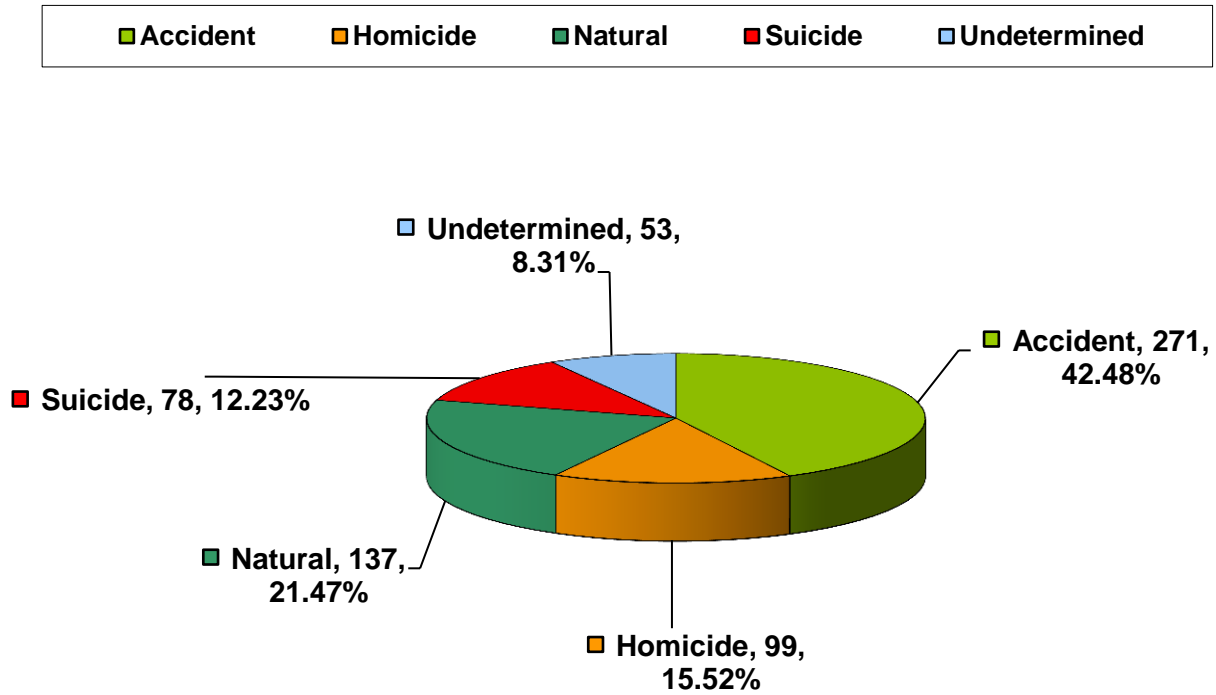
2013 Louisville Fire by Manner of Death Figure 32



Frankfort Medical Examiner Office Data

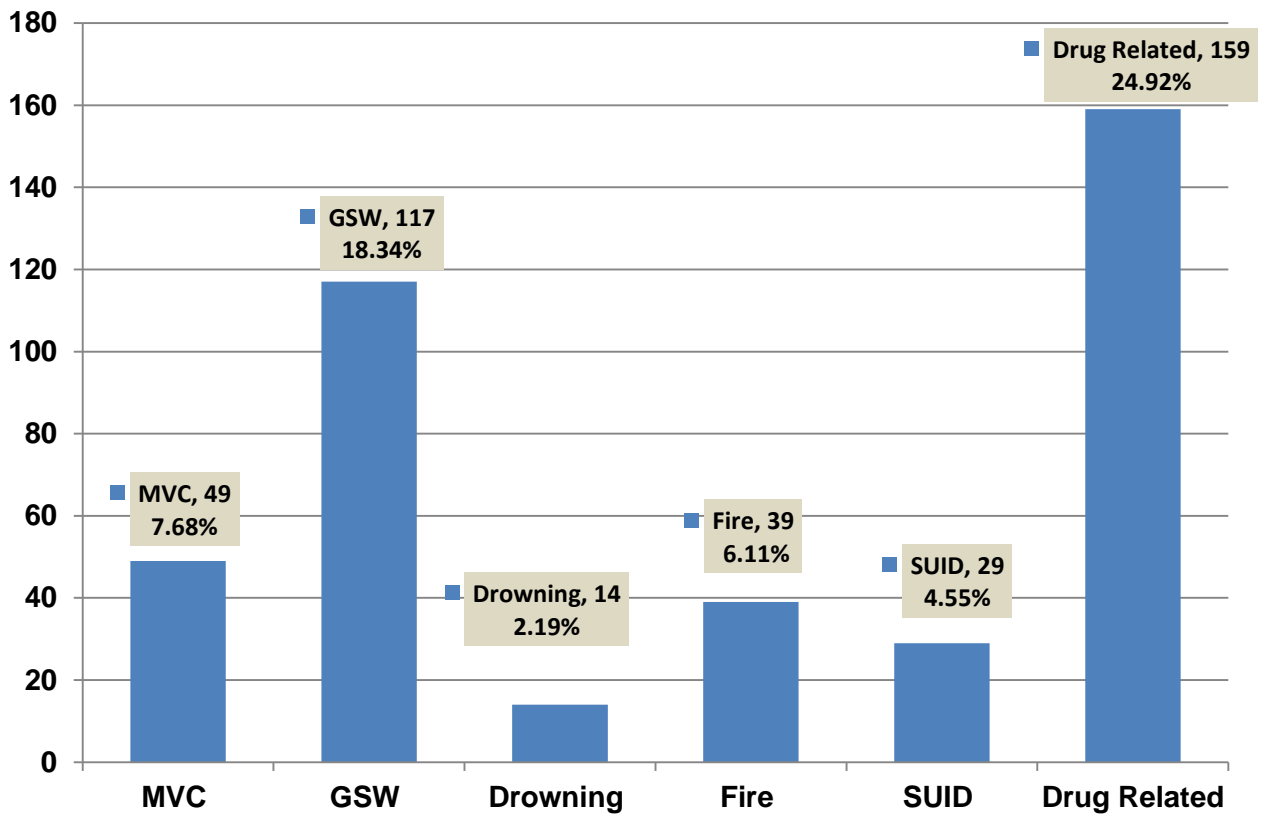
2013 Frankfort Cases by Manner of Death

Figure 33



2013 Frankfort Cases by Common Causes of Death

Figure 34



Frankfort Totals by Common Causes And Subsequent Manners of Death

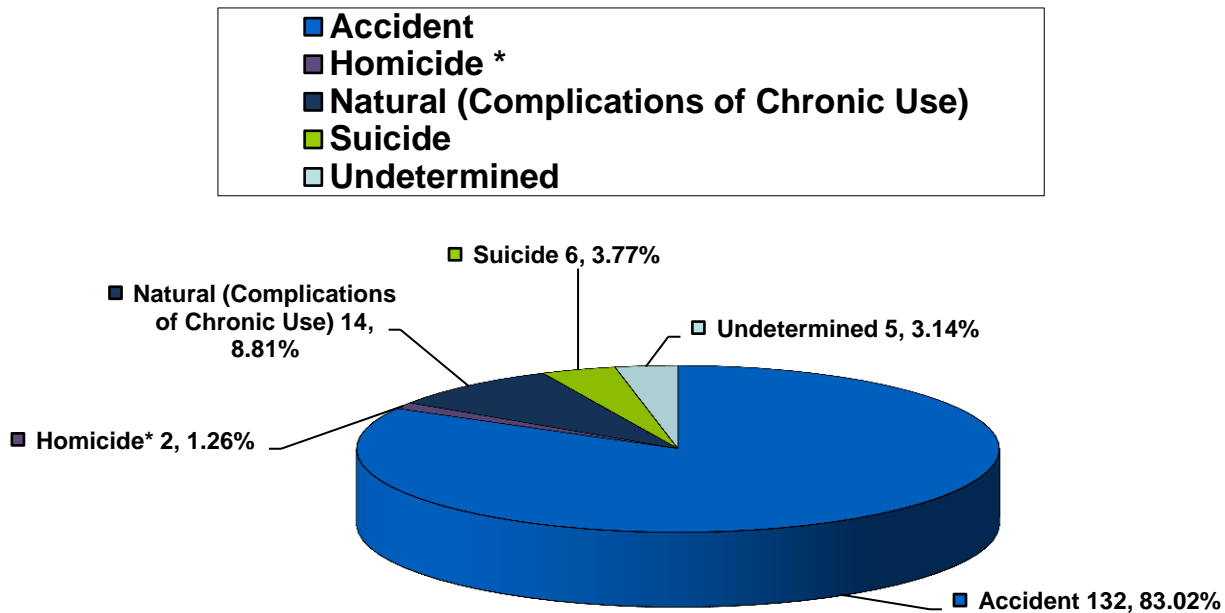
Table 8

Fatal Event	Total	Percentage
<i>Drug Related</i>	159	24.92%
Accident	132	83.02%
Homicide*	2	1.26%
Natural (Complications of Chronic Use)	14	8.81%
Suicide	6	3.77%
Undetermined	5	3.14%
Heroin Present	23	14.47%
<i>Motor Vehicle Accident</i>	49	7.68%
Accident	49	100%
<i>Gunshot Wound</i>	117	16.85%
Homicide	58	49.57%
Suicide	59	50.43%
<i>Drowning</i>	14	2.19%
Accident	13	92.86%
Suicide	1	7.14%
<i>Fire Related</i>	39	6.11%
Accident	31	79.49%
Homicide	6	15.38%
Suicide	1	2.56%
Undetermined	1	2.56%
<i>SUID</i>	29	4.55%
Undetermined	29	100%
<i>All other FFT Accidents</i>	50	7.84%

The above does not represent the total number of Frankfort cases

*Homicides: 1 combined Drug Toxicity contributory cause: 1 Chronic Ethanol Abuse contributory cause

2013 Frankfort Drug Related by Manner of Death Figure 35

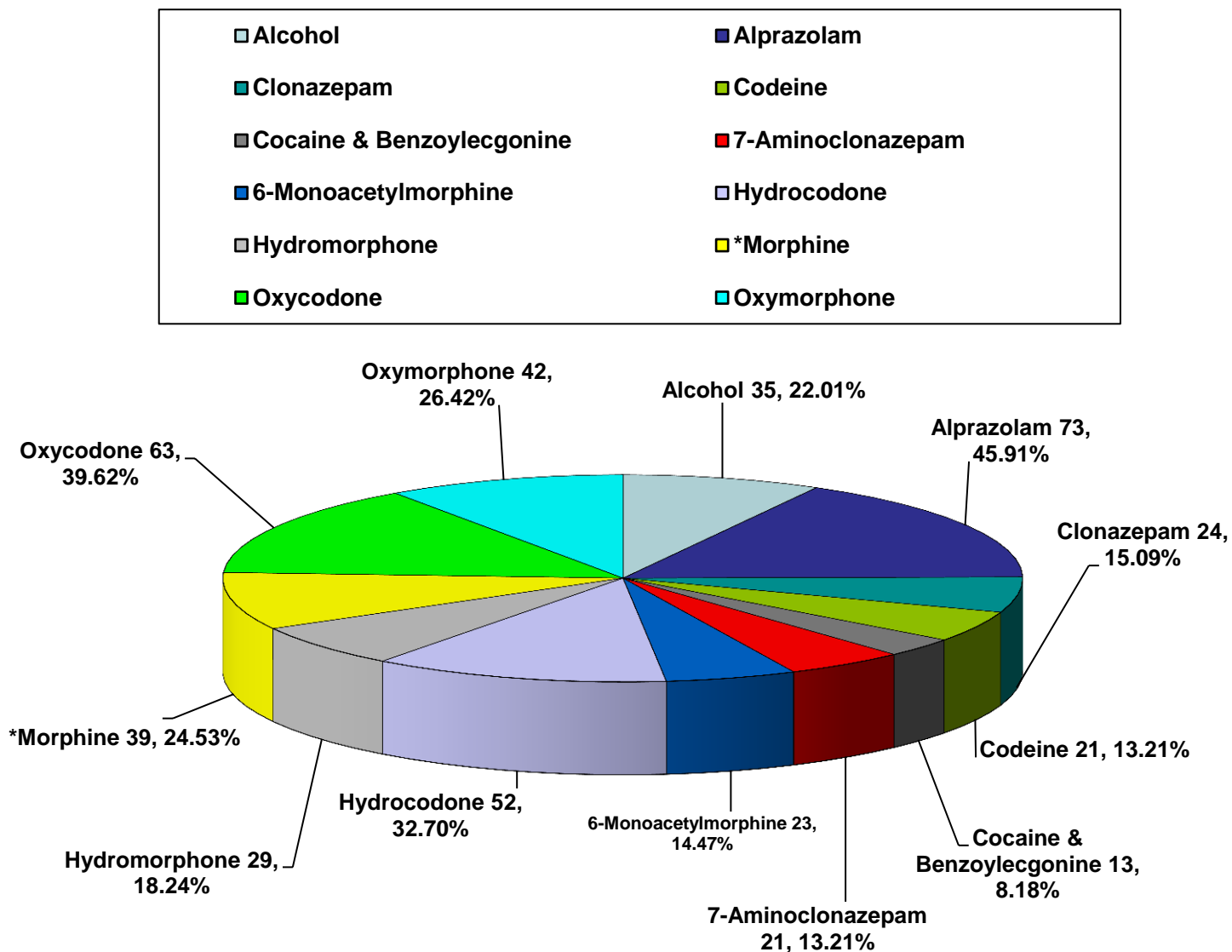


*Homicides: 1 combined Drug Toxicity contributory cause; 1 Chronic Ethanol Abuse contributory cause

2013 Frankfort Most Frequently Detected Drugs in the Blood of Drug Related Death Victims

Figure 36

Total = 159



*Morphine represents true drug and/or metabolite of Heroin

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

¤Detected drugs were found in blood, urine, and/or vitreous fluids.

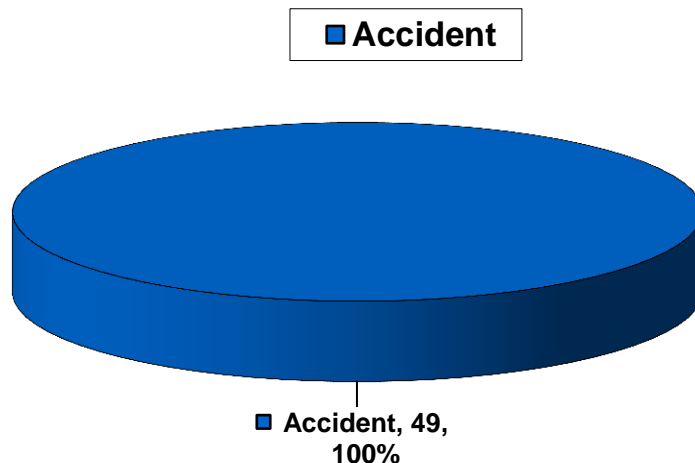
§This figure delineates only drugs occurring ≥20 other than Cocaine & Benzoyllecgonine.

**2013 Frankfort Additional Drugs Detected
in
Drug Related Death Victims
Table 9**

Acetaminophen	1	Hydrochlorothiazide	1
Acetone	2	Ibuprofen	1
Aminoclonazepam	4	Ketamine	1
Amitriptyline	1	Levetiracetam	1
Amlodipine	1	Lorazepam	3
Ampheamine	5	Maclofen	1
a-OH-Alprazol	10	Marijuana	1
Buprenorphine	10	Meprabamate	2
Bupropion	1	Methamphetamine	7
Butalbital	6	Metoprolol	1
Caffeine	4	Norbuprenorphine	6
Carboxy	1	Nordiazepam	19
Carboxy THC	1	Norfentanyl	3
Carisoprodol	6	Nortramadol	3
Chlordiazepoxide	1	Nortriptyline	1
Cotinine	1	Oxazepam	18
Demoxepam	1	Paroxetine	1
Dextromethorphan	1	Phenobarbital	2
Diazepam	19	Pregabalin	1
Difluoroethane	1	Promethazine	1
Diphenhydramine	4	Pseudoephedrine	1
Duloxetine	1	Quitapine	1
EDDP	2	Rocephin	1
Ephedrine	1	Temazepam	12
Fentanyl	8	Topiramate	1
Fluoxetine	1	Tramadol	6
Gabapentin	2		

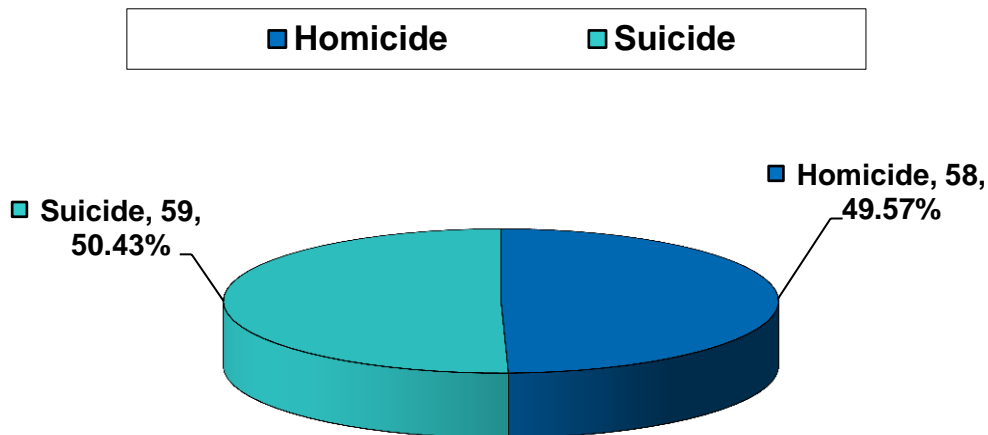
2013 Frankfort MVC by Manner of Death

Figure 37



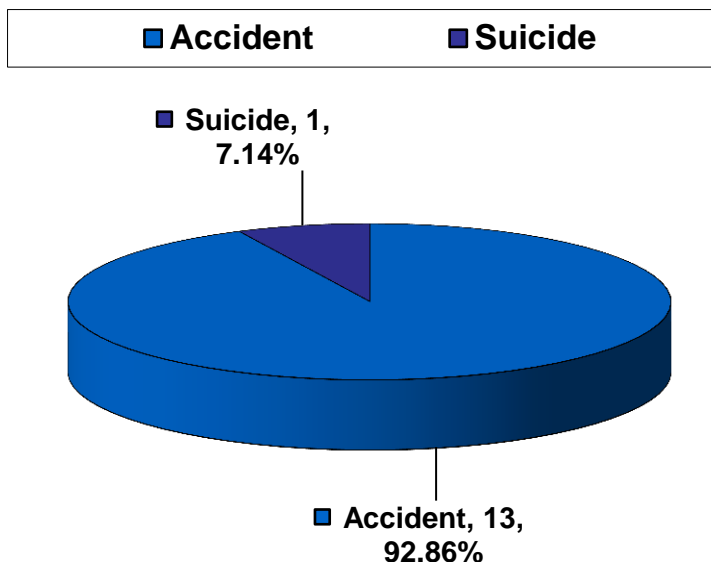
2013 Frankfort GSW by Manner of Death

Figure 38



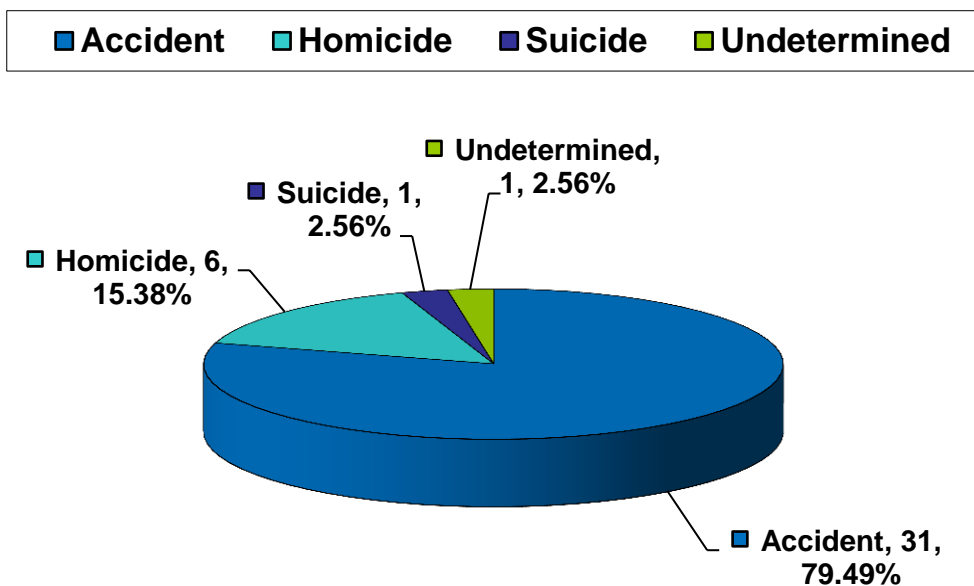
2013 Frankfort Drowning by Manner of Death

Figure 39



2013 Frankfort Fire by Manner of Death

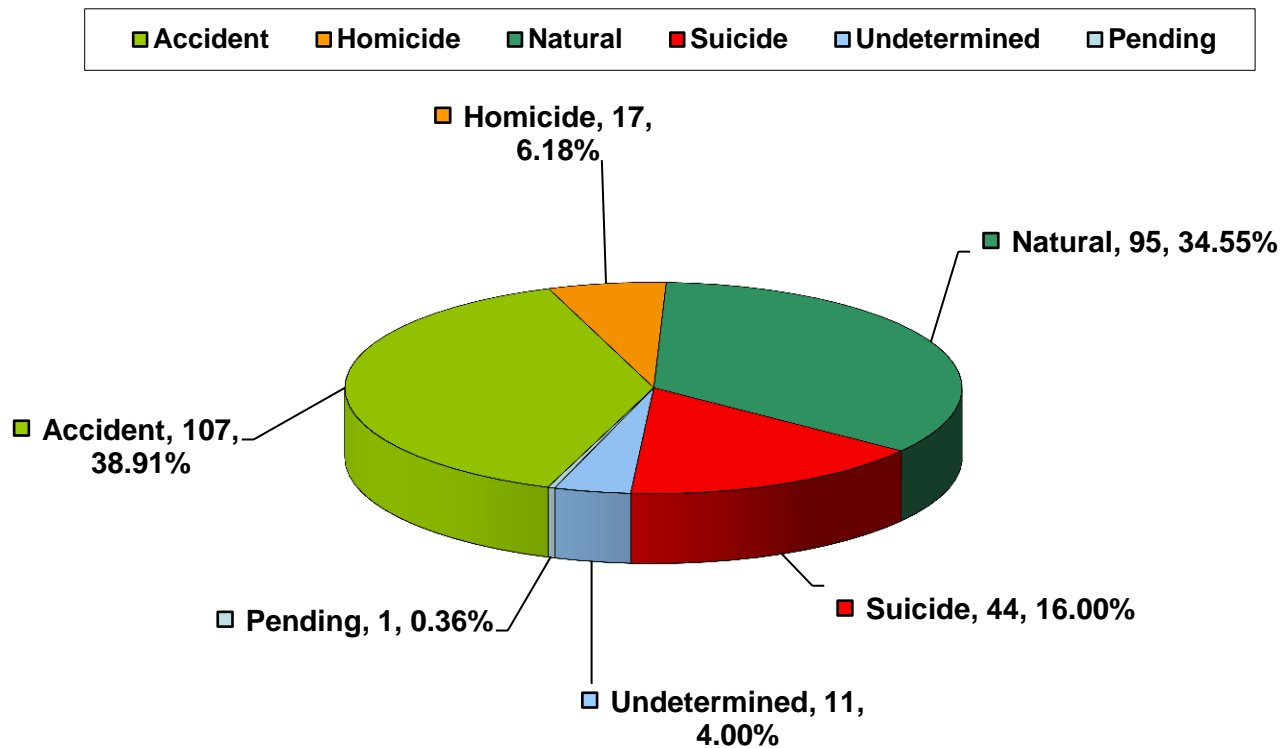
Figure 40



Western Kentucky Medical Examiner Office Data

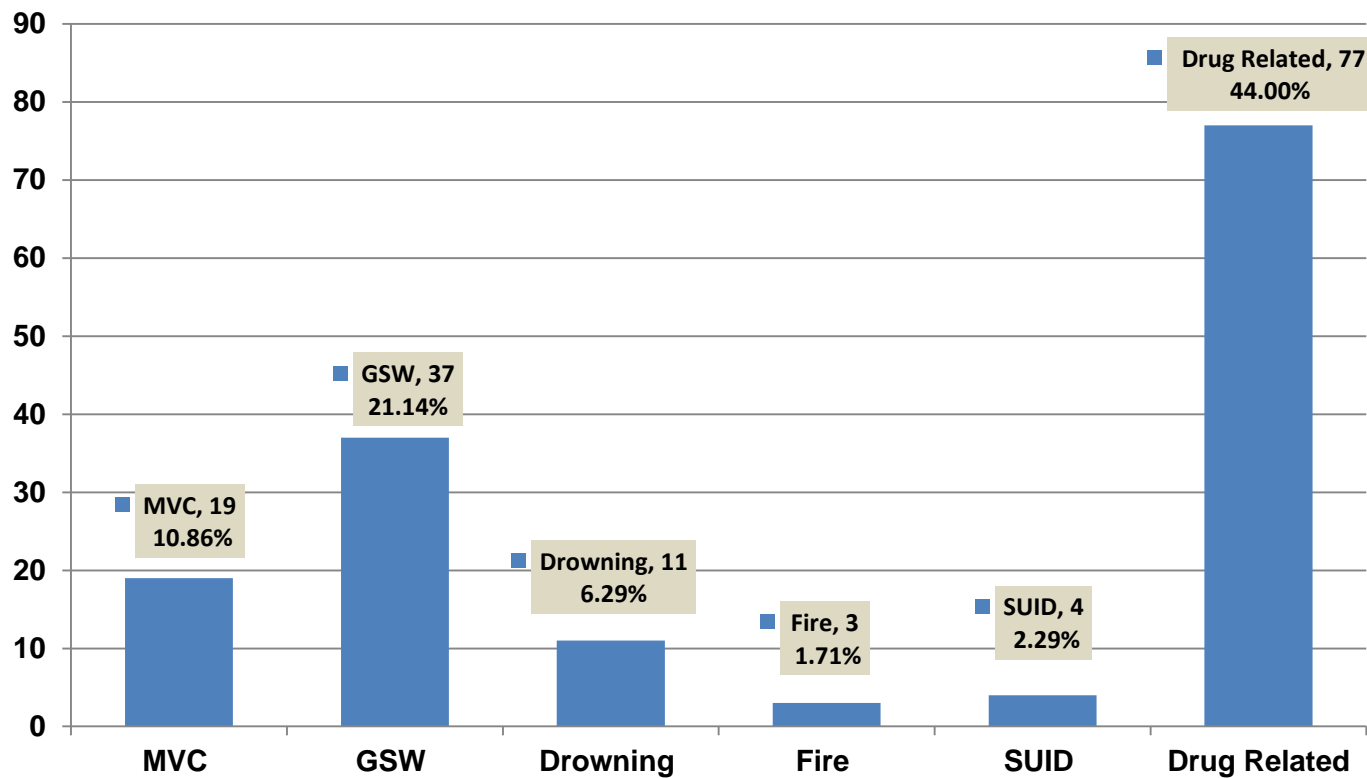
2013 Western Kentucky Cases by Manner of Death

Figure 41



2013 Western Kentucky Cases by Common Cause of Death

Figure 42



Western Kentucky Totals by Common Causes And Subsequent Manners of Death

Table 10

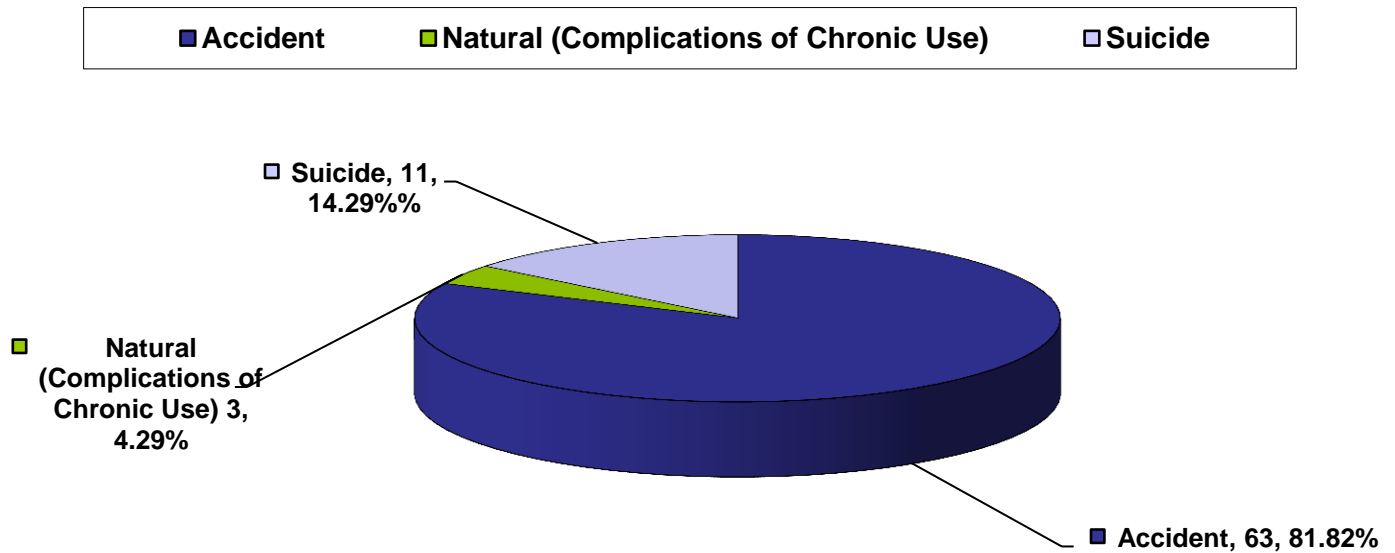
Fatal Event	Total	Percentage
<i>Drug Related</i>	77	28.00%
Accident	63	81.82%
Natural (Complications of Chronic Use)	3	3.90%
Suicide	11	14.29%
Heroin Present	0	0%
<i>MVC</i>	19	6.91%
Accident	18	94.74%
Undetermined/Pending Further Information	1	5.26%
<i>GSW</i>	37	13.45%
Accident	1	2.70%
Homicide	10	27.03%
Suicide	24	64.86%
Undetermined	2	5.41%
<i>Drowning</i>	11	4.00%
Accident	11	100%
<i>Fire</i>	3	1.09%
Accident	3	100%
<i>SUID</i>	4	1.45%
Undetermined	4	100%
<i>All other WKY Accidents</i>	16	4.32%

The above does not represent the total number of Western Kentucky cases

2013 Western Kentucky Drug Related by Manner of Death

Figure 43

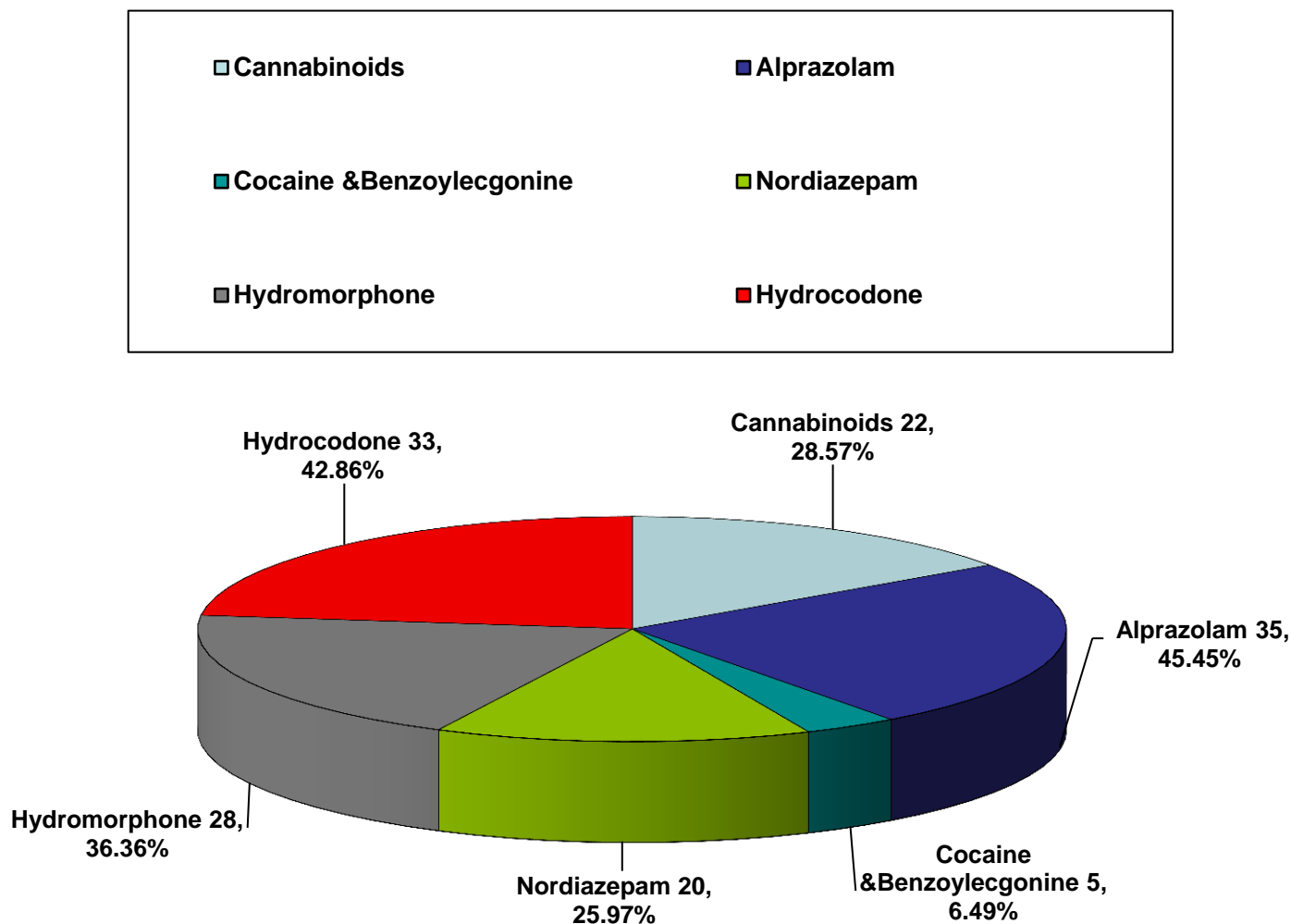
Total = 77



2013 Western Kentucky Most Frequently Detected Drugs in the Blood of Drug Related Death Victims

Figure 44

Total = 77



*Morphine represents true drug and/or metabolite of Heroin

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

⌘Detected drugs were found in blood, urine, and/or vitreous fluids.

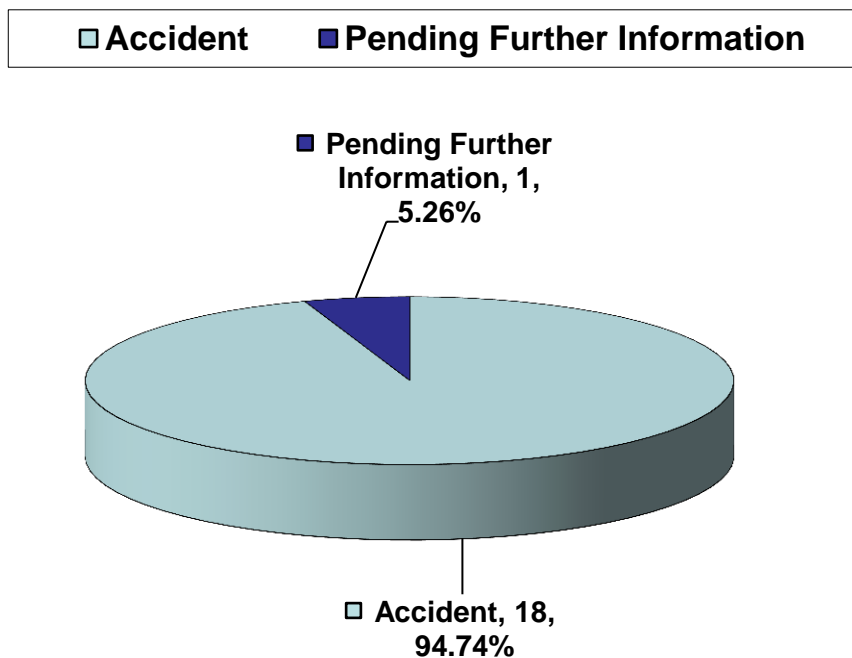
§This figure delineates only drugs occurring ≥ 20 other than Cocaine & Benzoyllecgonine.

**2013 Western Kentucky Additional Drugs
Detected in
Drug Related Death Victims
Table 11**

7-Aminoclonazepam	13	Hydroxyzine	1
Acetaminophen	1	Loratadine	1
Aminoclonazepam	1	Lorazepam	4
Amitriptyline	5	Meprobamate	4
Amlodipine	2	Methadone	12
Amphetamine	11	Methamphetamine	10
α-OH-alprazolam	11	Methanol	1
Atenolol	1	Morphine	9
Benzodiazepines	1	Norbuprenorphine	2
Buprenorphine	2	Nordoxepin	1
Bupropion	1	Norfentanyl	3
Buspirone	1	Norfluoxetine	1
Caffeine	3	Norsertraline	1
Carboxy THC	7	Nortramadol	4
Carisoprodol	2	Nortriptyline	4
Chlordiazepam	1	Norvenlafaxine	2
Chlorpheniramine	1	Oxazepam	17
Clonazepam	3	Oxycodone	18
Codeine	3	Oxymorphone	12
Descarboethoxyloratadine	1	Paroxetine	1
Dextromethorphan	1	Pregablin	1
Diazepam	14	Propranolol	1
Difluoroethane	1	Quetiapine	2
Diphenhydramine	2	Sertraline	1
Doxepin	2	Temazepam	16
EDDP	1	Tizanidine	1
Ethanol	18	Tramadol	4
Fentanyl	5	Venlafaxine	2
Fluoxetine	1	Zolpidem	1
Gabapentin	3		

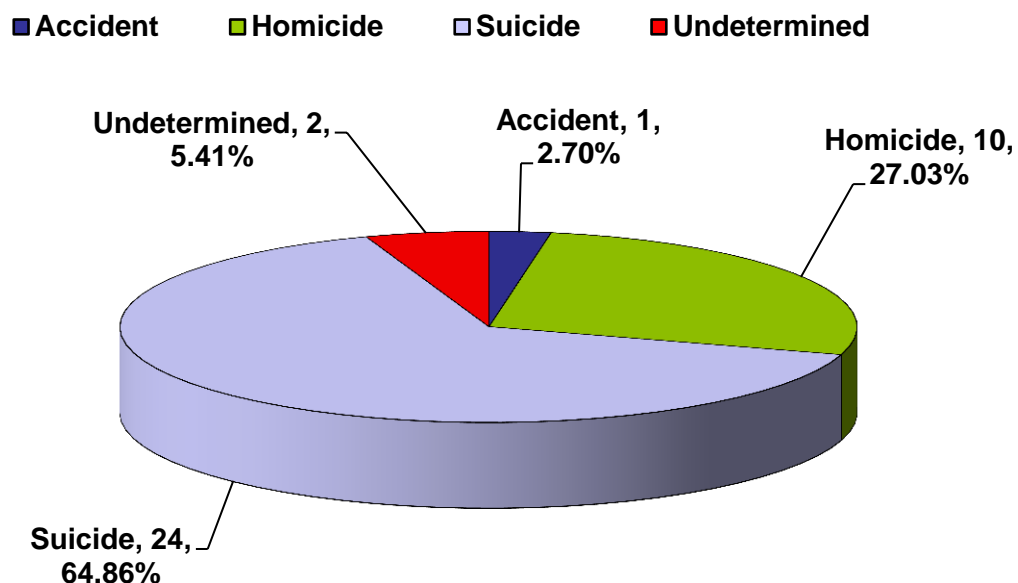
2013 Western Kentucky MVC by Manner of Death

Figure 45



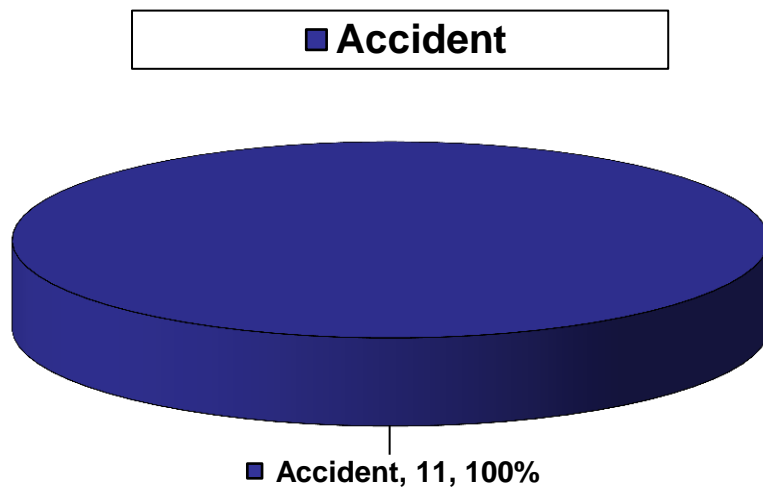
2013 Western Kentucky GSW by Manner of Death

Figure 46



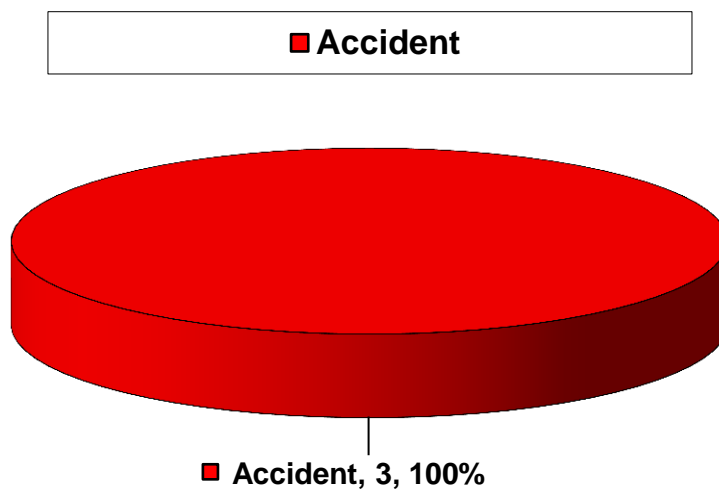
2013 Western Kentucky Drowning by Manner of Death

Figure 47



2013 Western Kentucky Fire by Manner of Death

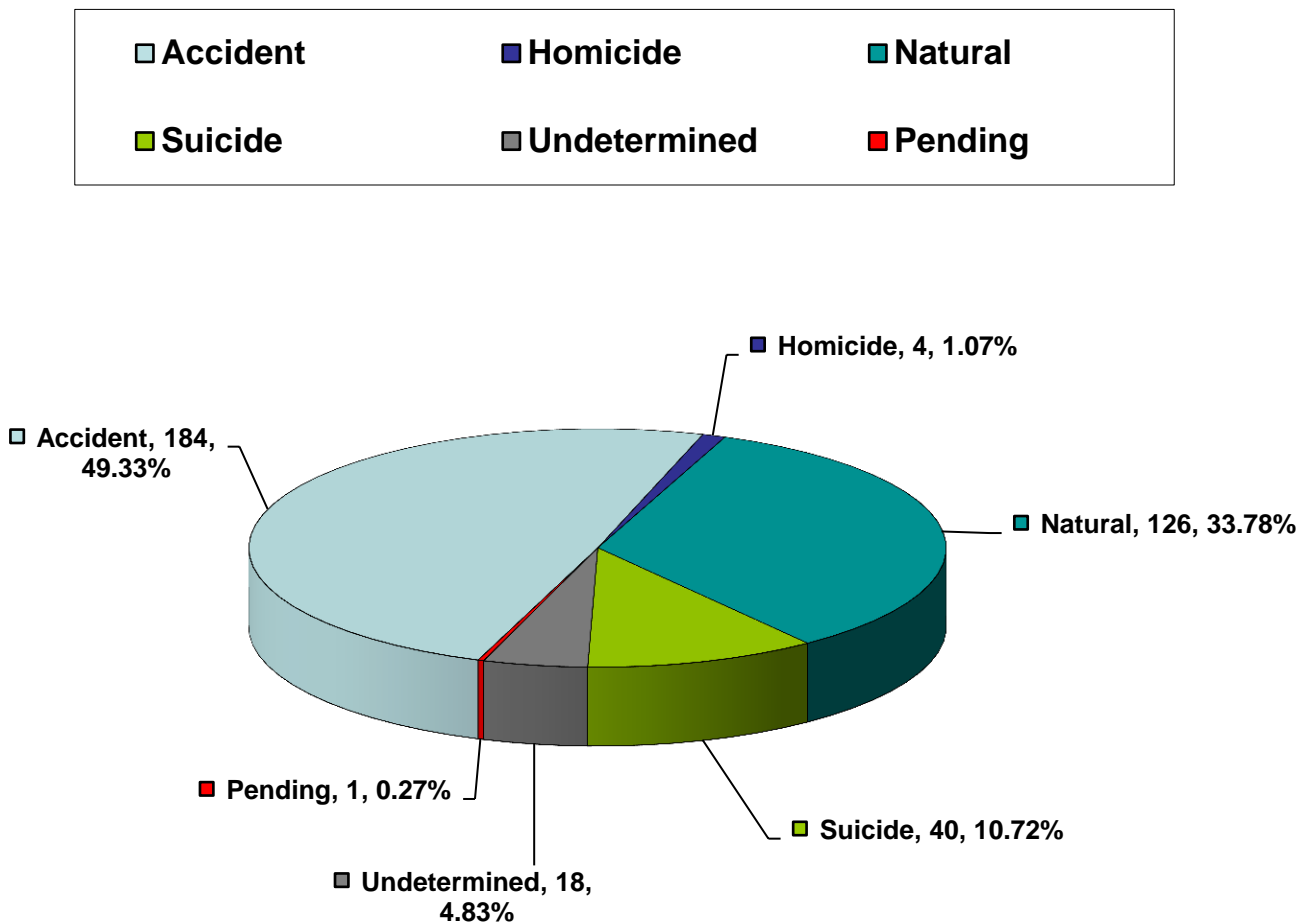
Figure 48



Northern Kentucky Medical Examiner Office Data

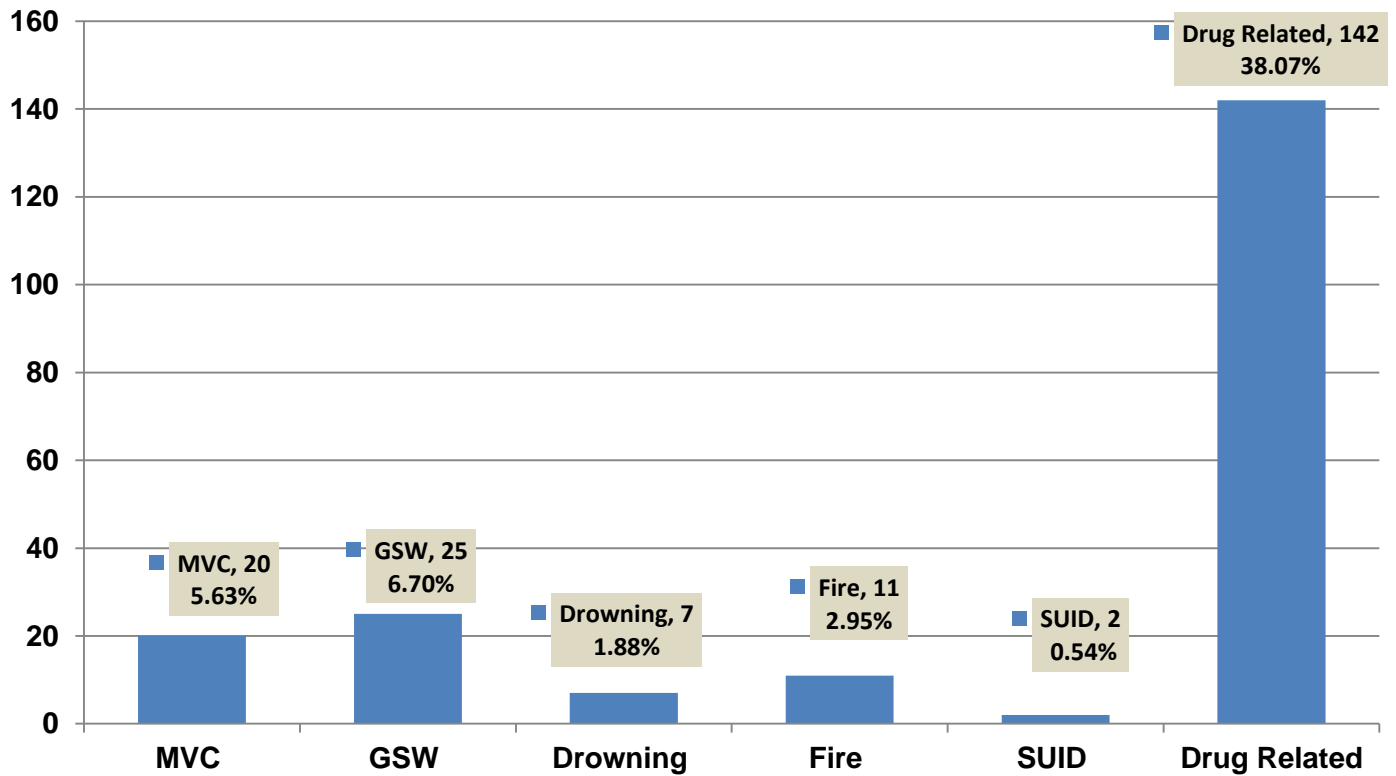
2013 Northern Kentucky Cases by Manner of Death

Figure 49



2013 Northern Kentucky Cases by Common Causes

Figure 50



NKY Totals by Common Causes And Subsequent Manners of Death

Table 12

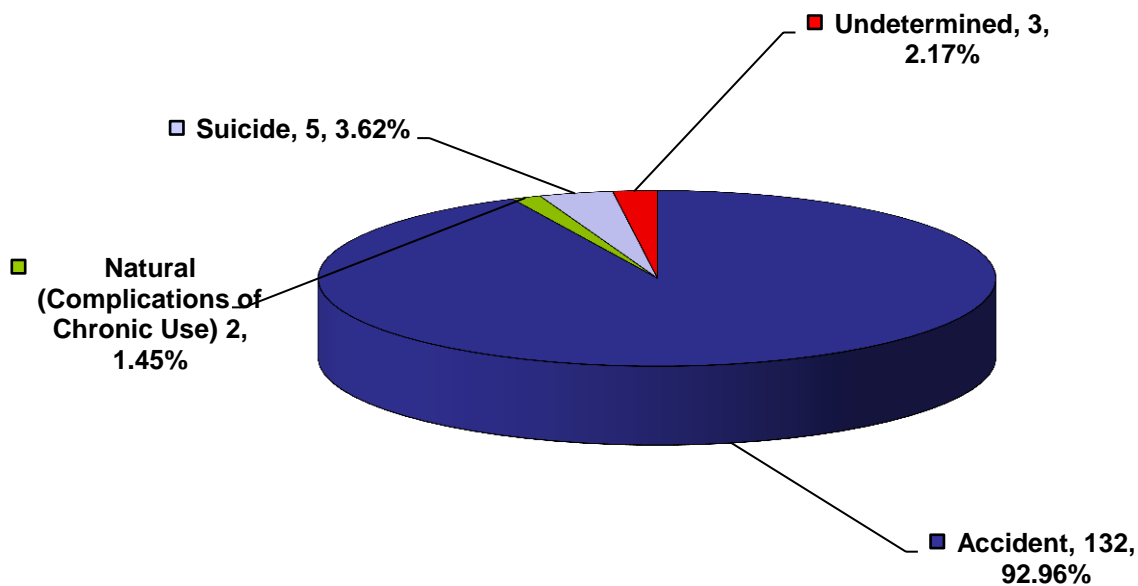
Fatal Event	Total	Percentage
<i>Drug Related</i>	142	38.07%
Accident	132	92.96%
Natural (Complications of Chronic Use)	2	1.41%
Suicide	5	3.52%
Undetermined	3	2.11%
Heroin Present	79	55.63%
<i>MVC</i>	20	5.36%
Accident	19	95.00%
Suicide	1	5.00%
<i>GSW</i>	25	6.70%
Homicide	2	8.00%
Suicide	23	92.00%
<i>Drowning</i>	7	1.88%
Accident	3	42.86%
Suicide	2	28.57%
Undetermined	2	28.57%
<i>Fire</i>	11	2.95%
Accident	10	90.91%
Undetermined	1	9.09%
<i>SUID</i>	2	0.54%
Undetermined	2	100%
<i>All other NKY Accidents</i>	13	4.87%

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

2013 Northern Kentucky Drug Related by Manner of Death

Figure 51

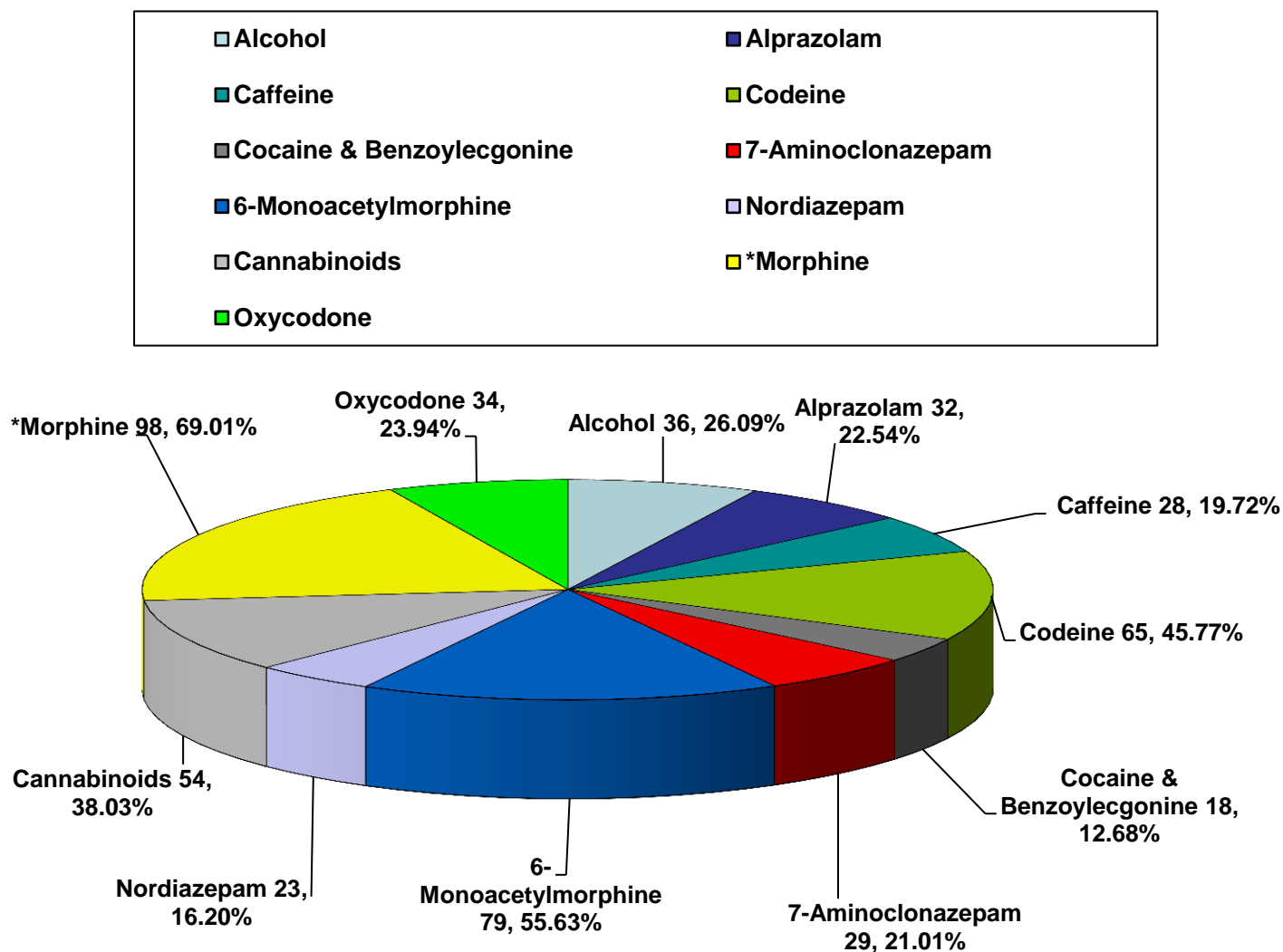
Total = 142



2013 Northern Kentucky Most Frequently Detected Drugs in the Blood of Drug Related Death Victims

Figure 36

Total = 159



*Morphine represents true drug and/or metabolite of Heroin

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

⌘Detected drugs were found in blood, urine, and/or vitreous fluids.

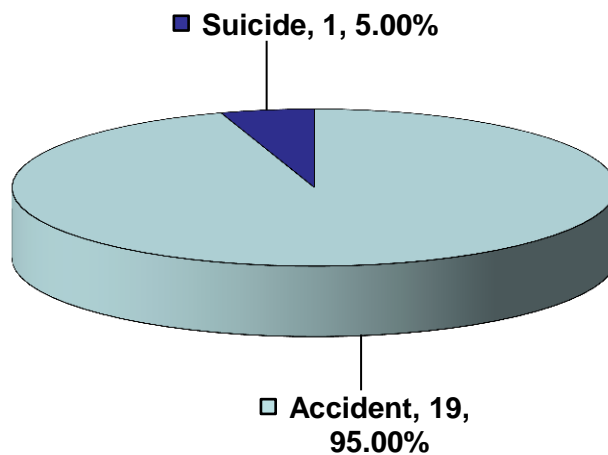
§This figure delineates only drugs occurring ≥ 20 other than Cocaine & Benzoylcegonine.

**2013 Northern Kentucky Additional Drugs
Detected in
Drug Related Death Victims
Table 13**

ACETAMINOPHEN	4	HYDROCODONE	12
ACETONE	1	HYDROMORPHONE	10
AMIODARONE	2	HYDROXYZINE	1
AMITRIPTYLINE	1	LORAZEPAM	4
AMLODIPINE	1	METHADONE	12
AMPHETAMINE	1	METHAMPHETAMINE	1
BISOPROLOL	1	MIRTAZAPINE	1
BUPRENORPHINE	1	NALOXONE	1
BUPROPION	1	NORDOXEPIN	3
BUSPIRONE	1	NORFLUOXETINE	3
BUTALBITAL	1	NORSERTRALINE	2
CHLORDIAZEPOXIDE	1	NORTRAMADOL	4
CHLOROPHENLYPIPERAZINE	1	NORTRIPTILINE	1
CIMETIDINE	1	NORVENLAFAXINE	2
CITALOPRAM	6	OXAZEPAM	4
CLONAZEPAM	5	OXYMORPHONE	15
COCAETHYLENE	2	PREGABALIN	3
CYCLOBENZAPRINE	2	PROMETHAZINE	4
DEXTROMETHORPHAN	2	PROPRANOLOL	1
DIAZEPAM	21	PSEUDOEPHEDRINE	1
DIPHENHYDRAMINE	4	QUETIAPINE	4
DOXEPIN	3	TEMAZEPAM	6
DULOXETINE	4	TOPIRAMATE	1
EDDP	5	TRAMADOL	4
FENTANYL	1	TRAZODONE	4
FLUOXETINE	3	VENLAFAXINE	2
GABAPANTIN	11	VERAPAMIL	1
HYDROCHLOROTHIAZIDE	3	ZOLPIDEM	3

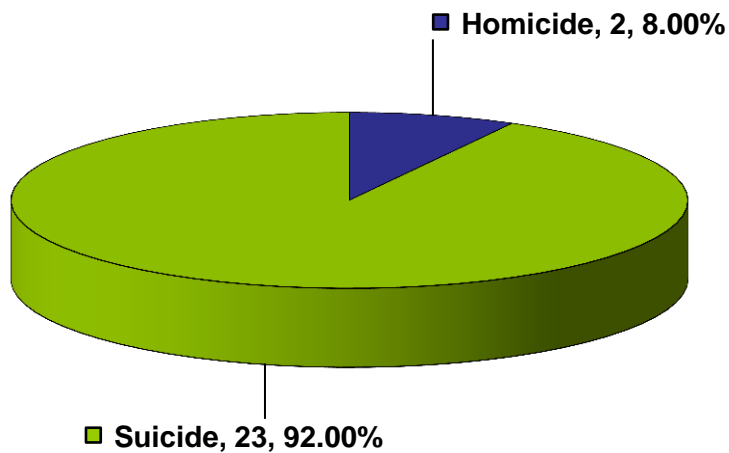
2013 Northern Kentucky MVC by Manner of Death

Figure 53



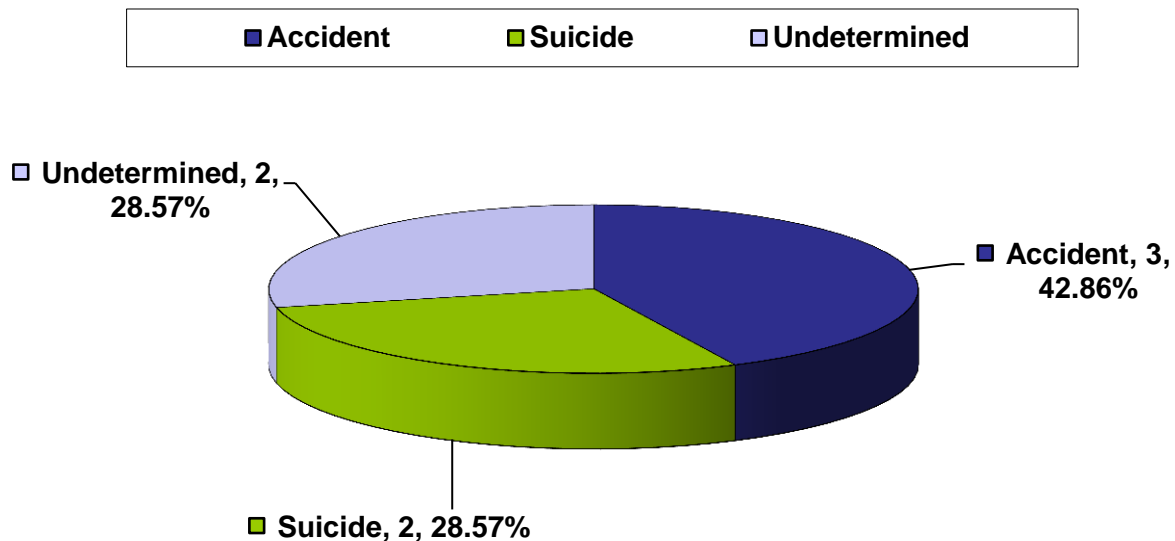
2013 Northern Kentucky GSW by Manner of Death

Figure 54



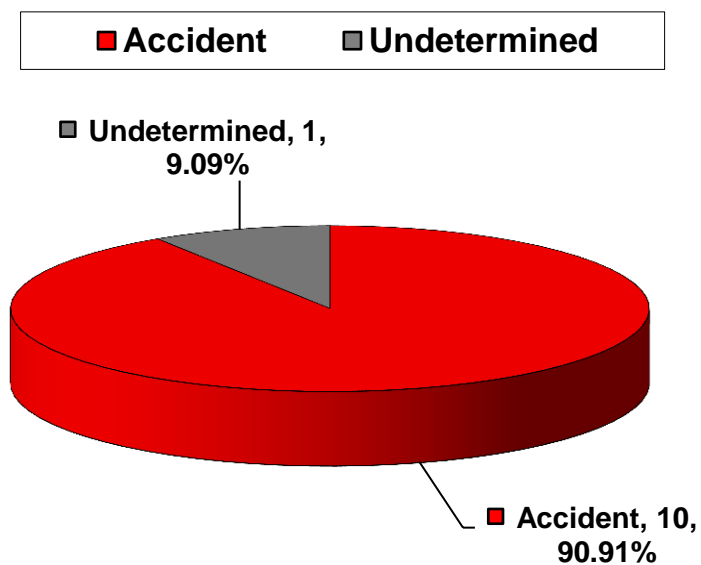
2013 Northern Kentucky Drowning by Manner of Death

Figure 55



2013 Northern Kentucky Fire by Manner of Death

Figure 56



Additional Information

*Additional Data for 2013***Scene Visits at the request of local law enforcement and/or county coroner:**

The OCME attended six (6) scenes.
The Frankfort Office attended zero (0) scenes.
The Western Kentucky attended one (1) scene.
The Northern Kentucky Office attended three (3) 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 109 system wide Organ Donors and 263 Tissue Donors in 2013.

Of the 1,098 cases undergoing postmortem examinations by the OCME, 11 were organ and 19 were tissue donations.

Of the 638 cases undergoing postmortem examinations by the Frankfort Office, 9 were organ and 10 were tissue donations.

Of the 275 cases undergoing postmortem examinations by the Western Kentucky Office, 0 were organ and 1 was tissue donation.

Of the 373 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 2013.

Exhumations:

The OCME had zero (0) postmortem examination from an exhumation in 2013.
The Frankfort Office had one (1) postmortem examination from an exhumation in 2013.
The Western Kentucky Office had zero (0) postmortem examinations from an exhumation in 2013.
The Northern Kentucky Office had zero (0) postmortem examinations from an exhumation in 2013.

Complete Autopsies

The OCME performed 918 complete autopsies in 2013.
The Frankfort Office performed 527 complete autopsies in 2013.
The Western Kentucky Office performed 266 complete autopsies in 2013.
The Northern Kentucky Office performed 284 complete autopsies in 2013.

Focused Examinations

The OCME performed 127 focused examinations in 2013.

The Frankfort Office performed 62 focused examinations in 2013.

The Western Kentucky Office performed 4 focused examinations in 2013.

The Northern Kentucky Office performed 10 focused examinations in 2013.

External Autopsies

The OCME performed 53 external examinations in 2013. In addition, 4 were examinations of skeletal remains.

The Frankfort Office performed 49 external examinations in 2013. In addition, 3 were examinations of skeletal remains.

The Western Kentucky Office performed 5 external examinations in 2013.

The Northern Kentucky Office performed 79 external examinations in 2013. In addition 1 was an examination of skeletal remains.

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, Trimble, 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.

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 57



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.