

# 2017 Annual Report

Washoe County Regional Medical Examiner's Office



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## **Chief's Report**

#### **HISTORY**

In brief, the history of the Medical Examiner's Office can be summed up in the pre-2007 and post-2007 eras. Prior to 2007, the office was the Washoe County Coroner Office (WCCO), and was managed by a layperson coroner with a law enforcement background. Pathologists were retained on a contract basis to perform autopsies, and frequently also actively practiced hospital pathology at the same time. Effective July 1, 2007, the Board of County Commissioners approved county code that established a Medical Examiner system in Washoe County, and the office became known as the Washoe County Medical Examiner-Coroner Office. A forensic pathologist was the Chief Medical Examiner and Coroner, and employed a second forensic pathologist as a full-time Assistant Medical Examiner; numerous part-time locum tenens pathologists from across the country were added over time to handle the increasing regional caseload. A Deputy Chief Medical Examiner position was added in 2015 due to both caseload and the need for succession planning. Dr. Ellen Clark was the first Chief Medical Examiner of the office. After many years of dedicated service, Dr. Clark retired at the end of 2016.

## **CURRENT STATUS**

Dr. Laura Knight, Deputy Chief Medical Examiner from 2015-2016, accepted a promotion to Chief Medical Examiner beginning in January 2017. Assistant Medical Examiner vacancies were filled in late 2016 to early 2017, and a newly created third Assistant Medical Examiner position was filled in July 2017. As of July 2017, the office was staffed by four full-time, board-certified forensic pathologists who perform autopsies and other medical examinations. The annual autopsy caseload must be divided in such a way that no individual pathologist is over-burdened, the chief has sufficient time for administrative duties, and the office can meet per-pathologist caseload requirements for national accreditation. As caseload grows in our growing region, additional pathologists (part-time contractual or full-time) will need to be budgeted.

#### 2017 YEAR IN REVIEW

Construction of a new Medical Examiner facility was completed in 2016, wrapping up at the end of December. During construction, Medical Examiner staff members were frequently involved in reviewing plans and selecting finishes and equipment. The result of the construction project, and many years of planning and effort, was a modern, physically beautiful, highly efficient and functional facility. The building dedication and ribbon-cutting was held on 1/18/2017, and was attended by the County Commissioners, County Manager and Assistant Managers, Medical Examiner staff, community partners, and the media. Operations were moved from 10 Kirman Avenue to the new building at 990 E. 9th Street on 1/27/2017. With the move into the new facility, the office was rebranded as the Washoe County Regional Medical Examiner's Office (WCRMEO), reflecting the office's status as a modern Medical Examiner system and facility, and the regional services the office provides.

Caseload increased in 2017. This is in keeping with the trends tracked in the office, documenting an annual increase for the last several years. Additional information on annual caseload and case types, is presented subsequently in this annual report. Caseload increases have led to increased staffing requirements, increased budget, and increased revenue from outside coroner county contracts. Increased caseload reflects influx of population in the area, as well as an ageing population, with increases in certain categories of death over time, such as drug-related deaths, accidents, and natural deaths. Three additional staff positions were approved in the FY2018 budget, including the additional forensic pathologist Medical Examiner mentioned above.

The WCRMEO held its annual Outside Agency Conference for coroners in the region, November 16-17, 2017. This annual continuing education conference included training in investigation of sudden unexplained infant and child deaths, suspicious deaths in water, organ and tissue donation, and difficult death investigation cases.

The office obtained Qualtrax software in 2017, modernizing the office's ability to update and track all policies and procedures. This is an important step toward national accreditation.

Mass fatality preparedness remains a focus for the office, with recent memory including such incidents as the Mizpah Fire, Amtrak crash in Churchill County, and the Reno Air Races incident in 2011 which resulted in 11 fatalities and an additional 69 people injured. In 2017, the WCRMEO conducted a Disaster Morgue Operations Exercise in June, testing the capabilities of the new facility and our staff in handling a large through-put of disaster fatalities requiring x-rays, identification, and examinations. The office also participated in the Triennial Airport Exercise in April, in which our role tested our speed and accuracy in body recovery in the event of a major airliner incident; volunteers from our Northern Nevada Disaster Victim Recovery Team (NNDVRT) also participated including our favorite K9 and her handler Dr. Mary Cablk. The office also participated in regional tabletop exercises. The WCRMEO is as well-prepared for all phases of a mass fatality event as is possible, given finite staffing and resources.

Perhaps the most significant accomplishment of 2017 for the WCRMEO was the implementation of an in-house Tissue Donation Program, which had been under consideration and part of strategic planning for years, including specific design elements in the new Medical Examiner facility. After many months of negotiation and policy-setting, the WCRMEO embarked on a partnership with Nevada Donor Network to bridge a gap in our community, allowing those who die outside of a hospital setting the opportunity to donate life-restoring tissues including heart valves, corneas, skin, and bone. This program's success has outpaced our most optimistic dreams, due to the generosity and heroism of donor families who consent to give the gift of life.

#### **FUTURE GOALS**

Future goals and priorities of the office include national accreditation by the National Association of Medical Examiners; continuing partnerships with organ and tissue donation organizations; mass fatality preparedness; and increased academic partnership with the University, including a possible fellowship training program to produce future forensic pathologists. We will continue to be the regional referral center for high quality autopsies, providing services on a contract basis to 18 additional counties in Nevada and Northern California, and the regional center for excellence in medicolegal death investigation. We will continue to conduct high quality mass fatality training exercises, and regular training conferences on medicolegal death investigation for surrounding county coroners and law enforcement. We will increase our academic presence, through cooperation with the University of Nevada-Reno School of Medicine, enhancing the education of medical students, and hopefully, training forensic pathology fellows in the future. Finally, and most importantly, we will strive to continue to serve the citizens of Washoe County with diligence, respect, and compassion, at a time when many of them are having the worst day of their lives, having lost a loved one.

This report represents the second annual statistical and informational report of the Washoe County Regional Medical Examiner's Office. It is my sincere hope that other community agencies, community leaders, law enforcement, regional county coroners, and citizens may find it interesting and useful. Additionally, I hope this data may be of use in prevention efforts, as many of the deaths that come to the attention of the Medical Examiner/Coroner are ultimately preventable.

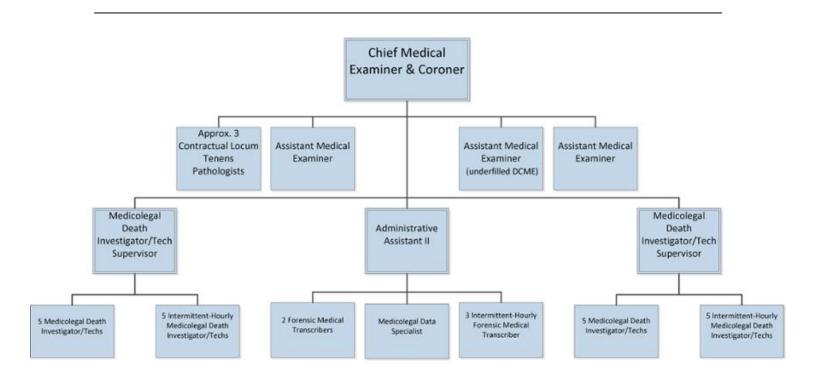
Yours in service.

Dr. Laura D. Knight, MD

**Chief Medical Examiner & Coroner** 

## Introduction

## **Organizational Chart**



## **Mission Statement**

The mission of the Washoe County Regional Medical Examiner's Office (WCRMEO) is to investigate unexpected and unexplained deaths in order to identify and report on the cause and manner of death. We apply scientific investigative techniques and medical procedures, using integrity and compassion, to serve families and public agencies impacted by sudden unexpected death.

## **Statutory Authority**

The WCRMEO is primarily governed by Chapter 259, 440, and 451 of the Nevada Revised Statutes (NRS) and Chapter 35 of the Washoe County Code (WCC). NRS 259 requires that each county have a coroner and WCC 35 creates the Medical Examiner system to fulfill coroner duties.

## **Description**

The Medical Examiner investigates sudden or unexpected deaths, traumatic deaths, and suspicious deaths. Certain categories of sudden death, by law, must be reported to and investigated by this office. All suspicious and many apparent natural death scenes in Washoe County are attended and evaluated by trained Medicolegal Death Investigators employed by the Medical Examiner's Office. Many reported deaths are ultimately determined to be due to natural causes, but as many as 40% of reported cases are found to be due to accidents, homicidal trauma and suicides. Of the deaths reported to and falling within the office's jurisdiction, approximately 22% will require autopsy or other medical examination and an additional 10% or more will require detailed review of medical history and circumstances of death. Board-certified forensic pathologists (medical doctors specializing in forensic pathology) conduct these autopsy and medical examinations.

#### Responsibilities of the office include:

- O Determining the cause and manner of death for jurisdictional cases
- Electronic certification of death certificates in all cases of unnatural death and in many cases of natural death
- o Conducting investigations of death scenes
- Identifying, collecting and processing evidence in order to ensure scientific integrity and usefulness
- o Recognizing unsuspected homicidal violence
- Recognizing and reporting communicable and dangerous diseases, poisonings, and consumer product safety concerns
- o Positively identifying the dead
- Notifying the decedent's next of kin and providing proper assistance to grieving families
- Ensuring integrity of the personal property of decedents
- o Providing expert legal testimony in criminal and civil matters
- Preparing for and responding to mass disasters
- O Assisting in providing for burial of indigent citizens in accordance with law

## **Community Involvement**

The WCRMEO is very active throughout the community. In 2017 WCRMEO staff made many presentations to the community including the Nevada Law Enforcement Academy, Nevada Department of Public Safety, the Nevada Department of Transportation, the Washoe County Career Fair, the Peer Support Group, and lectures to medical students at the University of Nevada, Reno. The office also holds a two day conference on death scene investigation for law enforcement agencies in the region. Each pathologist in the office has a letter of appointment to teach at the University of Nevada, Reno with a rank of Assistant or Associate Professor. In addition, the office hosted educational rotations for 19 medical students, 8 law enforcement officers, 6 nurses and EMTs, and dozens of others.

#### **Awards and Honors**

In 2017, the Washoe County Regional Medical Examiner's Office won the following awards.

- The Outstanding Service Award from the National Association of Medical Examiners (NAME) to Dr. Laura D. Knight
- The Shining Light on Donation Award from Sierra Donor Services of Nevada

## **Jurisdiction and Service Area**

The WCRMEO's primary jurisdiction is Washoe County. However, the office provides services to 13 additional Nevada counties and 5 California counties through interlocal agreements.

#### California Counties

Alpine

Lassen

Modoc

Plumas

Sierra



**Nevada Counties** 

Carson City (state capital)

Churchill

Douglas

Elko

Esmeralda

Eureka

Humboldt

Lander

Lyon

Mineral

Nye

Pershing

Storey

Washoe

WCRMEO service area highlighted in blue

## **Examination Types and Descriptions**

**Autopsy** 

A full postmortem examination encompassing detailed examination of the exterior and interior of the body, including dissection of internal organs and structures, to determine cause of death. Specimens for additional studies, such as toxicology testing, are obtained during the autopsy.

**Limited Autopsy-Head Only**  An autopsy examination limited to the external examination of the entire body and internal examination of only the head. Used in select trauma or suspected trauma cases only. Toxicology specimens can be obtained during a limited autopsy.

**External Examination** 

An examination of the exterior of the body that documents identifying features, stigmata of disease, and findings of injury, without accompanying internal dissection. Toxicology specimens such as blood can be obtained during an external examination.

Consultation

Death investigated by the WCRMEO in which no physical examination is performed because the decedent has well-documented medical condition(s) and no primary care physician, or trauma with prolonged hospitalization, determined to be the cause of death. A Medical Examiner reviews medical records and circumstances of death, and completes the death certificate.

**Jurisdiction Terminated** 

Natural death from known natural disease that is reported to the WCRMEO but does not fall within its jurisdiction

## **Manner of Death Types and Descriptions**

**Natural** Death caused by a natural disease or medical condition

Suicide Death caused by a purposeful self-action with the intent of ending

one's own life

**Homicide** Death at the hands of another

**Accident** Death caused by an unintentional action or external factor

Death in which the cause of death may or may not be known, but the

**Undetermined** circumstances in which the death came about are unknown or

cannot be determined

## **General Statistics**

## **Total Cases by Type**

	<u>2015</u>	<u>2016</u>	<u>2017</u>	'16-'17 Percent Change
Autopsies	565	657	740	+12.6%
Consultations	655	641	534	-17%
<b>External Exams</b>	316	279	265	-5%
Head-Only Autopsy	27	54	42	-22%
<b>Jurisdiction Terminated</b>	2255	2622	3103	+18%
<b>Total Cases Reported</b>	3819	4253	4684	+10%

## **State of Residence**

Alaska	1	Nebraska	1
Arizona	3	Nevada	4,255
British Columbia	1	New Mexico	1
California	355	North Carolina	1
Colorado	3	Ohio	1
Connecticut	4	Oregon	13
Florida	5	Pennsylvania	2
Georgia	1	South Dakota	1
Idaho	2	Texas	3
Illinois	1	Utah	5
Manitoba	1	Virginia	4
Michigan	2	Washington	8
Mississippi	1	Wisconsin	1
Missouri	1	Unknown*	5
Montana	1	Other Country	1

<sup>\*</sup>Unidentified skeletal remains

## **Total Examination Cases\* by Manner of Death**

	<u>2015</u> **	<u>2016</u>	<u>2017</u>	'16-'17 Percent Change
Natural	288	326	431	+32%
Accident	237	263	358	+36%
Suicide	137	170	165	-3%
Homicide	34	38	46	+21%
Undetermined	41	27	43	+59%

<sup>\*</sup>Total Examination Cases comprises all autopsies, limited (head-only) autopsies, and external examinations completed by the WCRMEO.

## **Total Examination Cases\* by Sex**

	2017	Percentage
Male	728	70%
Female	315	30%
Unknown	1	<1%

<sup>\*</sup>Total Examination Cases comprises all autopsies, limited (head-only) autopsies, and external examinations completed by the WCRMEO.

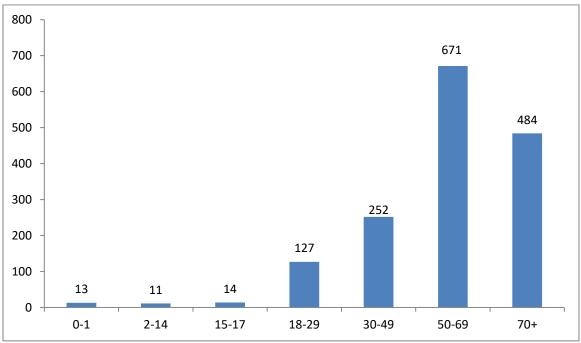
## **Total Examination Cases\* by Race**

	2017	Percentage
White	871	83%
Mexican/Hispanic	88	8%
Black/African American	35	3%
Asian	26	2%
American Indian/Native American	21	2%
Other	5	<1%

<sup>\*</sup>Total Examination Cases comprises all autopsies, limited (head-only) autopsies, and external examinations completed by the WCRMEO.

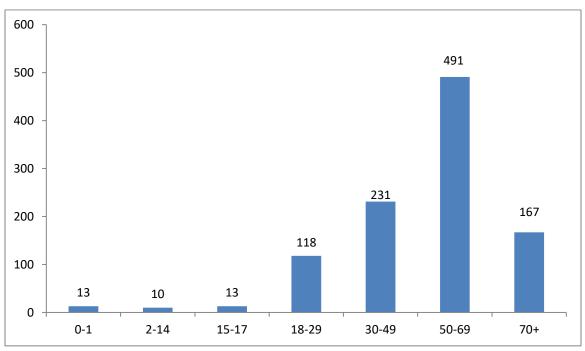
<sup>\*\*</sup>Manner of death for cases occurring outside Washoe County limits is not certified by the WCRMEO but rather the local county coroner. The majority of outside county cases are reported back to the WCRMEO by the jurisdiction agency with manner of death after the death is certified. Prior to mid-2015, cases occurring outside Washoe County limits returned no manner of death reporting.

## **Total Medical Examiner Cases\* by Age**



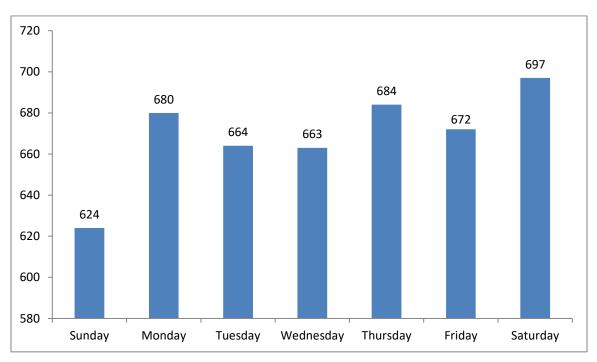
\*Total Medical Examiner Cases comprises all autopsies, limited (head-only) autopsies, external examinations, and consultations completed by the WCRMEO.

## **Total Examination Cases\* by Age**

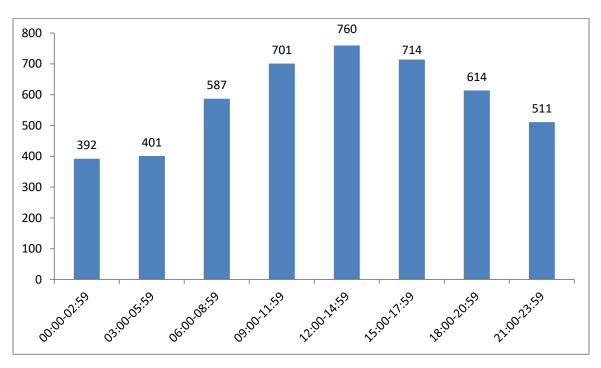


\*Total Examination Cases comprises all autopsies, limited (head-only) autopsies, and external examinations completed by the WCRMEO.

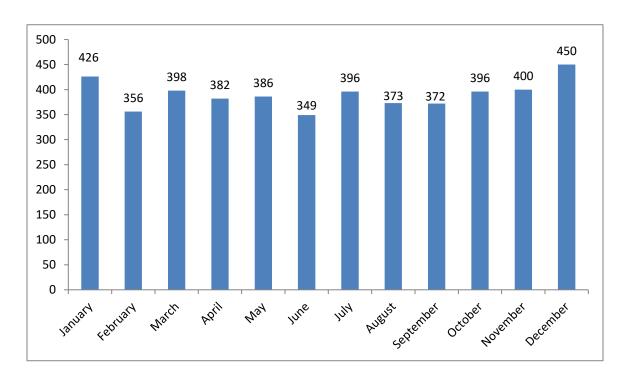
## **Total Reported Deaths by Day of the Week**



## **Total Reported Deaths by Time of Death**

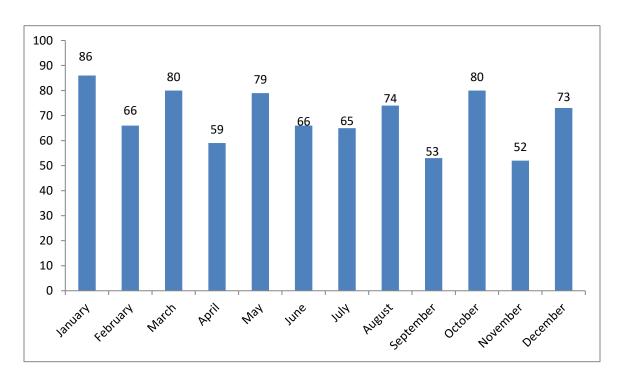


## **Total Reported Deaths by Month**



## **Scene Responses by Month**

833 total scene responses in 2017



## **Specific Causes & Types of Death**

## Major Causes of Death, for Each Manner of Death

For All\* Autopsy/Examination and Consultation Cases Performed at WCRMEO

#### **NATURAL**

Cause of Death	Number	Percent
Atherosclerotic and/or Hypertensive Cardiovascular	398	54%
Disease		
Complications of Chronic Alcoholism	68	9%
Chronic Obstructive Pulmonary Disease	55	7%
Cancer	21	3%
Renal Failure	16	2%
Complications of Diabetes and/or Ketoacidosis	16	2%
Others	166	22%
Total	<b>740</b>	100%

#### **ACCIDENT**

Cause of Death	Number	Percent
Complications of blunt force injuries, fractures, & falls	294	52%
Drug intoxication	190	33%
Drowning	13	2%
Hypothermia	12	2%
Asphyxia, various types	9	2%
Others	51	9%
Total	569	100%

#### **SUICIDE**

Cause of Death	Number	Percent
<b>Gunshot wound</b>	89	51%
Hanging	38	22%
Drug Intoxication	32	18%
Jump from Height	7	4%
Sharp Force Injuries	3	2%
Asphyxia (Intentional)	3	2%
Blunt Force Injuries (Intentional)	1	<1%
Total	173	100%

## **HOMICIDE**

Cause of Death	Number	Percent
<b>Gunshot Wound(s)</b>	32	70%
<b>Sharp Force</b>	6	13%
Injuries		
<b>Blunt Force</b>	4	9%
Injuries		
Strangulation	2	4%
<b>Restraint-related</b>	2	4%
Total	46	100%

#### **UNDETERMINED**

Cause of Death	Number	Percent
Drug Intoxication	12	25%
<b>Undetermined Cause</b>	12	25%
Traumatic Injuries (Unexplained)	6	13%
Sudden Unexplained Death in an Infant	4	8%
(Undetermined)		
Thermal Injuries and/or Smoke Inhalation	4	8%
Drowning	3	6%
Others	7	15%
Total	48	100%

<sup>\*</sup>Includes Washoe County and outside counties covered by interlocal agreement

## WASHOE COUNTY HOMICIDES BY AREA\*

Injury Location	Number
<b>Reno</b> (inclusive of all areas below)	25
Downtown Reno	9
South Reno	7
North Valleys	6
Northeast Reno	3
Sparks	4

<sup>\*</sup> Cases included are only those where injury and death occurred in Washoe County

## HOMICIDES BY COUNTY

County of Death	Total
Carson City	1
Churchill	1
Douglas	1
Elko	2
Humboldt	1
Lassen	1
Lyon	3
Modoc	2
Washoe	33*

<sup>\*</sup>Includes those who were injured in another county but died in a Washoe County hospital

## **Washoe County Transportation Deaths**

There were 76 transportation-related deaths in Washoe County in 2017, down from 88 in 2016.

## **Transportation Deaths, By Sex**

Gender	2016	2017	Percentage of Change
Male	66	54	-18%
Female	22	22	0%

## **Transportation Deaths, By Age**

Age	2016	2017	Percentage
			of Change
0-17	3	7	+133%
18-29	20	12	-40%
30-49	23	14	-39%
50-69	32	22	-31%
<b>70</b> +	10	21	+110%

## **Transportation Deaths, By Role**

Role	2016	2017	Percentage of Change
Driver/Operator	49	47	-4%
Pedestrian	23	15	-35%
Passenger	12	10	-17%
Cyclist	1	4	+300%

## **Washoe County Drug Intoxication Deaths**

2017 saw an increase in drug intoxication deaths, with the largest increase in illicit drugs (up 57% from 2016), mostly in the form of methamphetamine (up 55% from 2016), but with a modest increase in heroin and fentanyl deaths as well. Prescription-related deaths also increased, as did designer drug-related deaths. The over-50 population comprised over half of total drug-related deaths, and over half of methamphetamine deaths, but a smaller percentage of heroin deaths. Illicit, prescription, and over-the-counter drug death data was stratified in more detail in this year's data analysis than in prior years, with and without the co-intoxicant ethanol.

	2012	2013	2014	2015	2016	2017
<b>Total Drug Deaths (Washoe County)</b>	125	145	109	133	110	173
Major Categories*						
Illicit Drugs Only	36	54	41	53	38	78
Illicit Drugs and Ethanol Combined						1
Illicit Drugs & Over-the-Counter Drugs Combined						2
Prescription Drugs Only						34
Prescription Drugs and Ethanol Combined						11
Prescription Drugs Only, or Prescription & Over- the-Counter Drugs Combined	77	64	64	65	43	60
<b>Prescription &amp; Over-the-Counter Drugs Combined</b>						8
Over-the-Counter Drugs Only, or Over-the-Counter Drugs and Ethanol Combined						6
Illicit and Prescription Drugs Combined	8	17	2	11	19	22
Prescription Drugs, Illicit Drugs, & Ethanol Combined						2
Prescription Drugs, Over-the-Counter Drugs, & Ethanol Combined						1
Huffing volatiles/intoxicants						1
<b>Unable to Determine Specific Drugs Involved</b>						2
Long Term Effects of Chronic Drug Abuse Without Acute Intoxication						5
Illicit-involved Deaths, By Drug*						
Methamphetamine (Without Heroin)	25	50	26	43	46	69
Heroin (Without Methamphetamine)	11	9	12	13	16	13
Methamphetamine and Heroin	3	4	3	8	9	16
Cocaine (Alone or With Others)	5	11	4	3	4	5
Designer Drugs	1	0	0	0	4	9

<sup>\*</sup>Not inclusive of **all** intoxication deaths.

## **Drug Intoxication Deaths, By Sex**

Sex	Number	Percentage
Male	101	58%
Female	72	42%

#### **Drug Intoxication Deaths, By Age**

Age	Number	Percentage
0-17	1	<1%
18-29	26	15%
30-49	50	29%
50-69	91	53%
70+	5	3%

## Methamphetamine Intoxication Deaths, By Age

Age	Number	Percentage
0-17	1*	1%
18-29	10	12%
30-49	25	29%
50-69	49	58%
70+	0	0%

<sup>\*</sup>Death was intrauterine fetal demise due to maternal methamphetamine use

#### **Methamphetamine Intoxication Deaths, By Sex**

Sex	Number	Percentage
Male	58	68%
Female	27	32%

## Heroin Intoxication Deaths, By Age

Age	Number	Percentage
0-17	0	0%
18-29	12	41%
30-49	6	21%
50-69	11	38%
70+	0	0%

## Heroin Intoxication Deaths, By Sex

Sex	Number	Percentage
Male	23	79%
Female	6	21%

#### Washoe County Drug Death Comparison 2016-2017

Туре	2016	2017	Percentage of Change
<b>Total Deaths</b>	110	173	+57%
Methamphetamine-related Deaths	55	85	+55%
<b>Heroin-related Deaths</b>	25	29	+16%
<b>Designer Drug-related Deaths</b>	4	9	+125%
<b>Prescription Drug-related Deaths</b>	62	78	+26%

## Washoe County Prescription/Opioid-related Deaths 2016-2017

Туре	2016	2017	Percentage of Change
Total Deaths	52	69	+33%

The most common opioids found in 2017 were Oxycodone -25, Fentanyl/Analogs -21, Morphine -14, Methadone -9. Of note, there is some difficulty in determining whether fentanyl is prescribed or illicit.

# Statistics on Vulnerable Populations and Other Special Categories

## **Washoe County Homeless Person Deaths**

Deaths of homeless individuals (persons with no fixed address or living quarters) reported to the WCRMEO are specifically tracked in the WCRMEO case database. There was a small increase of 3 deaths in 2017 (12.5%) compared to 2016. The majority of the deaths were accidental in nature or due to natural disease. Two deaths were determined to be suicide. Of the Undetermined manner deaths, one was due to illicit drug use and the other due to unexplained/unwitnessed trauma.

#### Washoe County Homeless Deaths, By Sex

Gender	2016	2017
Male	23	23
Female	1	4
Total	24	27

#### Washoe County Homeless Deaths, By Age

Age	2016	2017
0-17	0	0
18-29	1	2
30-49	6	7
50-69	14	14
70+	3	4

#### Washoe County Homeless Deaths, By Manner of Death

Manner	2016	2017
Accident	11	12
Natural	9	9
Homicide	0	2
Suicide	2	2
Undetermined	2	2

## Washoe County Homeless Person Deaths, by Manner of Death, Cause of Death

#### **ACCIDENT**

Cause of Death	Number	Percent
Drug-related deaths	4	33%
<b>Blunt Force Injuries</b>	3	25%
Hypothermia due to environmental exposure	3	25%
Sepsis due to wound infection	1	8%
Drowning	1	8%

#### **NATURAL**

Cause of Death	Number	Percent
Cardiovascular Disease	4	44%
Streptococcal Pneumonia	2	22%
Complications of Chronic Alcoholism	1	11%
<b>Complications of End-Stage Renal Disease</b>	1	11%
<b>Gastrointestinal Hemorrhage</b>	1	11%

## **HOMICIDE**

Cause of Death	Number	Percent
<b>Gunshot Wounds</b>	1	50%
Asphyxiation	1	50%

## **SUICIDE**

Cause of Death	Number	Percent
<b>Gunshot Wound of Head</b>	1	50%
Hanging	1	50%

#### **UNDETERMINED**

Cause of Death	Number	Percent
Illicit Drug-related	1	50%
<b>Complications of Blunt Force Trauma</b>	1	50%

## Law Enforcement-Involved Deaths in Washoe County

Type of Death	Number
In-Custody Deaths (Jail)	6
Officer-Involved Shootings*	5

<sup>\*</sup>For disambiguation purposes: While these deaths from officer-involved shootings occurred within Washoe County, these statistics include Washoe County Sheriff's Office, Reno Police Department, and Sparks Police Department.

# Washoe County Incarcerated/In-Custody Deaths, by Manner of Death

Manner	Number	Percent
Natural	4	67%
Accident	1	17%
Homicide	1	17%
Suicide	0	0%
Undetermined	0	0%

#### Washoe County Incarcerated/In-Custody Causes of Death

Manner	Cause of Death
Natural	Acute Myocardial Infarction
	Acute Pneumonia
	Complications of Metastatic Testicular Cancer
	Congestive Heart Failure
Accident	Complications of Acute (Methamphetamine) and Chronic (Opioid and
	Benzodiazepine) Polysubstance Drug Abuse
Homicide	Complications of Cardiac Arrest in the Setting of Methamphetamine Use,
	Schizophrenia, and Physiological Stress Associated with Struggle Against
	Restraints

## **Washoe County Pediatric Deaths**

There were a total of 19 deaths of individuals aged 17 and under that fell under WCRMEO jurisdiction in Washoe County in 2017.

#### Washoe County Pediatric Deaths, by Manner of Death

Manner	Number	Percent
Accident	8	42%
Suicide	4	21%
Natural	3	16%
Homicide	2	11%
Undetermined	2	11%

## **Washoe County Pediatric Causes of Death**

Manner	Cause of Death	Number
Accident	Subgaleal Hemorrhage	1
	Complications of Placental Abruption	1
	Complications of Delayed Near-Drowning	1
	Blunt Force Trauma	5
Suicide	Asphyxia by Hanging	2
	Multiple Blunt Force Injuries	1
	Gunshot Wound of the Head	1
Natural	Parainfluenza 1 Tracheitis	1
	Complications of Idiopathic Thrombocytopenia Purpura	1
	Anomalous Origin of Left Coronary Artery	1
Homicide	Gunshot Wound	2
Undetermined	Intrauterine Fetal Demise	1
	Undetermined	1

## **Washoe County Senior Deaths**

There were 474 deaths at 65 years of age and older that met the criteria for Medical Examiner jurisdiction. Deaths in seniors present special challenges, such as the need to rule out neglect or abuse, and the propensity for ultimately lethal injury from simple falls.

#### Senior Deaths, By Sex

Gender	Number	Percent	
Female	180	38%	
Male	294	62%	

#### Senior Deaths, By Manner of Death

Manner	Number	Percent	
Natural	245	52%	
Accident	201	42%	
Suicide	20	4%	
Homicide	4	1%	
Undetermined	4	1%	

#### **Causes of Death**

Manner	Cause	Number
	Cardiovascular related	157
Natural	Pulmonary related	41
	Other	47
	Fall related	124
Accident	Motor vehicle related	31
	Other	29
	Gunshot Wound	16
Suicide	Drug Related	2
	Blunt force trauma	2
	Blunt Head Trauma	2
Homicide	Stab Wounds	1
	Strangulation	1
Undetermined	Other	4

## Other Statistics of Interest+

- 1,463 bodies were transported to and stored at the Medical Examiner's Office in 2017, compared to 1,320 bodies in 2016.
- A total of 1,052 bodies were transported on the order of the WCRMEO.
- There were 140 unclaimed and abandoned decedents reported to the WCRMEO in 2017.
- Toxicology testing was performed on 956 cases in 2017 and 809 cases in 2016.
- There were zero (0) cases in which a decedent remained unidentified after thorough investigation in 2017 and 0 cases in 2016.
- 32 organ donations and 136 tissue donations were performed on Medical Examiner cases in 2017, with the full cooperation of the WCRMEO.
- The WCRMEO participated in zero (0) exhumations in 2017.

<sup>&</sup>lt;sup>+</sup>Required by the National Association of Medical Examiners for accreditation purposes.