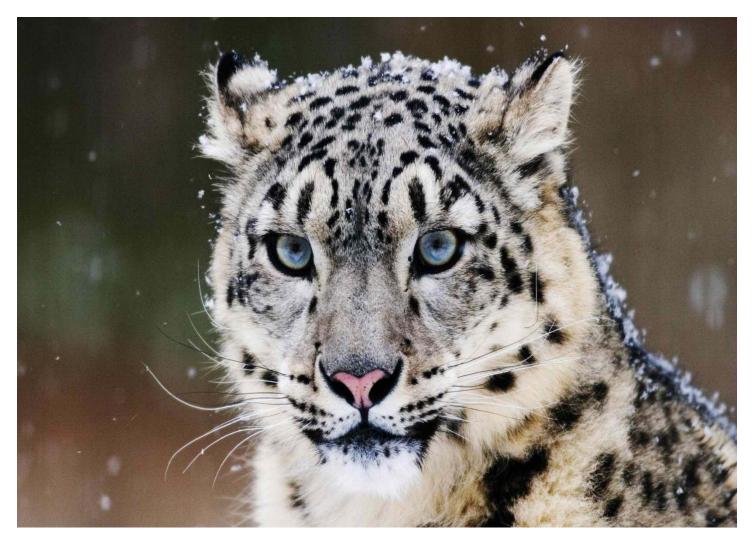
### **2013 ANNUAL REPORT**



### OFFICE OF THE LARIMER COUNTY CORONER MEDICAL EXAMINER



PATRICK C. ÁLLEN, MD CORONER CHIEF MEDICAL EXAMINER

495 N. DENVER AVE. LOVELAND, CO 80537



OFFICE OF THE LARIMER COUNTY CORONER/ MEDICAL EXAMINER Patrick C. Allen, MD, Coroner and Chief Medical Examiner

CORONER

495 North Denver Avenue Loveland, CO 80537 Phone: 970-619-4517 Fax: 970-619-4510

To the Citizens of Larimer County,

The information you will find in this annual report has been gathered from records held by the Larimer County Office of the Coroner / Medical Examiner, Donor Alliance, and the State of Colorado Health Department. Our staff strives to serve Larimer County with integrity and professionalism. It is our wish to provide the public with the most up-to-date and complete information possible in a format that is accurate and easy to read.

We hope these statistics will be of value to you. If you have any questions or need any further information, please feel free to contact us.

Patriel C. Allen M

Patrick C. Allen, MD Larimer County Coroner Chief Medical Examiner

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#### <u>MISSION STATEMENT</u>

- To seek the truth;
- TO COMBINE FORENSIC SCIENCE AND MEDICO-LEGAL DEATH INVESTIGATION TO DETERMINE THE CAUSE AND MANNER OF DEATH;
- TO SERVE THE COMMUNITY WITH PROFESSIONALISM AND INTEGRITY.

#### FOREWARD

The Medical Examiner's Office serves the residents of Larimer County by incorporating the fields of medicine and forensic science to investigate any sudden and unexpected death, or those deaths that occur under violent or suspicious circumstances. Colorado Revised Statutes mandate that the Office of the Coroner investigate any death where the cause of death is unknown, and when necessary to determine the cause of death, an autopsy can be ordered by the Coroner.

In early 2002, the Larimer County Medical Examiner's Office became the 3<sup>rd</sup> county in Colorado (following El Paso and Denver) and the smallest county in the nation to attain National Accreditation as a certified Medical Examiner's Office through the National Association of Medical Examiners (NAME). We continue to maintain the NAME Accreditation.

The investigative and medical staff seek to find answers to the questions which are important to the decedent's family, involved law enforcement agencies, insurance companies, the judicial system, Consumer Product Safety Commission, the Colorado Department of Health, and OSHA, to name a few. The pursuit of civil or criminal proceedings is in part determined by the ability of the Medical Examiner's Office to determine the cause and manner of death. This unique makeup of job responsibilities means the Medical Examiner's Office performs both a public service and a law enforcement role that requires the Medical Examiner to scrutinize every death within the jurisdiction to determine the events that led to that death.

The Medical Examiner's Office also functions as an advocate for families by working with them to insure they are notified of the death, relaying the medical information from autopsies, and placing families in touch with other agencies that will assist in the grieving process. The office works whenever possible with organizations such as the Rocky Mountain Lions Eye Bank and the Donor Alliance Network to facilitate family wishes regarding organ donations.

#### DESCRIPTION, PURPOSE, AND FUNCTION OF THE MEDICAL EXAMINER'S OFFICE

The Office of the Coroner / Medical Examiner is a separate and independent law enforcement agency. It is a division of the Larimer County government and is funded through the Larimer County Commissioners by the citizens of Larimer County.

Patrick C. Allen, MD, is Larimer County's elected Coroner/ Chief Medical Examiner. Dr. Allen is a medical doctor who is trained and triple-board certified in Anatomical, Clinical, and Forensic Pathology. Forensic Pathology is the branch of medical science that is applied to the legal investigation of sudden, unexpected, violent, or suspicious deaths. Dr. Allen has been the elected Coroner in Larimer County since 1979. Dr. Allen has three partners in his Forensic Pathology group: James A. Wilkerson IV, MD, Michael A. Burson, PhD, MD, and John D. Carver, MD, each of whom is also a Forensic Pathologist/ Medical Examiner.

The Larimer County Coroner/Medical Examiner's staff includes a Chief Deputy Coroner/Chief Investigator and five Deputy Coroner/Investigators. Full time Investigators for Larimer County must also be P.O.S.T.-certified police officers. All investigators are trained extensively in medico-legal death investigation. Completing our staff is the Administrative Office Manager.

Duties of the Medical Examiner's Office are dictated by Colorado Revised Statutes, and include:

- To respond to the death scene, 24 hours a day, 7 days a week;
- To Investigate the scene of death;
- > To take all necessary steps needed to positively identify the decedent;
- To determine the date and time of death;
- > To collect, preserve, and process pertinent evidence at the scene;
- > To photograph, document, and/or sketch the scene;
- > To remove the body from the scene in a dignified manner;
- > To interview witnesses, family members, physicians, employers, friends, neighbors, etc.;
- > To compile and document information in unbiased, accurate, and complete reports;
- > To assist at autopsy, which will determine Cause of Death;
- To notify next-of-kin;
- To process and compare fingerprints from weapons and other items;
- To provide information and assistance to families;
- To interact with other Law Enforcement, governmental, and health agencies, i.e. police/ sheriff, fire, Emergency Medical Services, attorneys, OSHA, FBI, Consumer Product Safety Commission, DEA, school districts, hospitals, funeral homes, organ donation teams, etc.;
- > To release information to public through press releases and/ or media interviews;
- > To provide testimony at depositions and in court;
- To provide training and education in the field of Death Investigation to other law enforcement, health, and community service agencies.

Many cases brought to the Medical Examiner's office are dealt with in a routine manner because the identity of the decedent is known and next-of-kin can be readily contacted. However, there are occasional cases that are difficult to resolve. In these deaths, one or more pertinent pieces of information are missing or difficult to establish. Identification of the deceased may require locating dental records, fingerprints, or surgical records. The decedent may not have next-of-kin, or the next-of-

#### DESCRIPTION, PURPOSE, AND FUNCTION OF THE MEDICAL EXAMINER'S OFFICE

kin may be far removed and difficult to locate. These cases may take more time, but the Medical Examiner's staff will pursue any and all leads to resolve these issues.

The postmortem examination (autopsy) on each decedent includes the preservation of evidence, body fluids, and tissue for microscopic examination, toxicological analyses, trace evidence analysis, and other tests deemed necessary. Photographs are taken at autopsy both externally and internally and have value both as evidence and additional documentation of cases.

The Medical Examiners and Investigators provide testimony at depositions and in court. The staff participates in meetings with police, physicians, and attorneys (Prosecution and Defense) in a variety of criminal and civil cases.

Our office works closely with organ and tissue procurement teams in a cooperative effort to ensure that the decedent's wishes and those of their family are honored.

Death investigation requires frequent contact between our office and various media personnel. The staff is skilled in responding to media inquiries that occur daily.

Deaths which fall under the jurisdiction of the Coroner are defined by statute (CRS: 30-10-606) and include, but are not limited to, the following circumstances:

- All victims of external violence, unexplained cause, or deaths with suspicious circumstances (including all actual or suspected homicides, suicides, and accidents);
- Deaths where no physician is in attendance, or where, though in attendance, the physician is unable to certify the cause of death;
- Deaths from thermal, chemical, or radiation injury, or death from any injury sustained prior to hospital admission;
- Deaths from criminal abortion, including any situation where such abortion may have been selfinduced;
- Deaths from a disease which may be hazardous or contagious or which may constitute a threat to the health of the general public;
- Deaths occurring while in the custody of law enforcement officials or while incarcerated in a public institution;
- When the death was sudden and happened to a person who was in good health;
- All "crib deaths" (Sudden Unexpected Infant Death Syndrome);
- > All patients that die within 24 hours of admission to a hospital or nursing home facility.

Investigators must participate in ongoing continuing education, including:

- Death Investigation Seminars
- Medical and Forensic Seminars
- Accident Investigation
- Crime Scene Investigation
- Evidence Collection and Preservation
- Medical Training

#### DESCRIPTION, PURPOSE, AND FUNCTION OF THE MEDICAL EXAMINER'S OFFICE

Because Larimer County requires that all full-time Medico-legal Death Investigators be POST-Certified Peace Officers, certified investigators must also participate in ongoing law enforcement training, including:

- Firearms
- Advanced Driving Techniques
- Interviewing and Interrogation
- CCIC and NCIC training

In early 2002, the Larimer County Medical Examiner's Office became the smallest county in the nation and the third county in Colorado to attain National Accreditation as a Medical Examiner's Office through the National Association of Medical Examiners (NAME). We continue to maintain the NAME Accreditation.

The Medical Examiner's staff provides regular training and education to other law enforcement, health, and community service agencies concerning the roles and functions of this office. In 2013, our Medico-legal Investigators conducted over 75 educational outreach training presentations to local agencies, schools, community service groups, and individuals including but not limited to:

- AIMS Police Academy
- > Berthoud Fire Dept. & Poudre Fire Authority
- College America
- Colorado Coroner's Association
- CSU & Poudre School District Forensic Program
- Fort Collins Police Department
- > Front Range Community College Med Prep & Criminal Justice Programs
- Larimer County & City of Fort Collins Victim's Advocates
- Larimer County Search and Rescue
- > Pathways Hospice & Suicide Resource Center
- Prevent Alcohol & Risk-Related Trauma in Youth (PARTY) Program (30 +/- presentations throughout school year)
- Rocky Mountain High School
- > UNC Forensics & Criminal Justice Program
- > Various individual meetings with citizens throughout the community.

We have also been asked to train other Coroners and Deputy Coroners throughout the State of Colorado as part of the Colorado Coroner's Association and the Colorado State Coroner's Standards Training Board requirements for ongoing education.

#### **EXPLANATION OF DATA**

The vast majority of information presented here has been compiled from deaths that fell under the jurisdiction of the Larimer County Coroner/ Medical Examiner during the 2013 calendar year. Many of the charts and graphs include data from the last 10 years, as needed to show trends. Our Office maintains archival data as far back as 1979, when Dr. Allen first assumed the office of Larimer County Coroner, as well as case summaries from the inception of the Office in 1881.

The geographic area served by the Larimer County Medical Examiner's Office includes 2,640 square miles, which is located in the north central part of the state. Weld and Jackson Counties are to the east and west, respectively, with Boulder County on the south and the State of Wyoming on the north. Larimer is the 7<sup>th</sup> largest county in Colorado, based on population. The population of Larimer County is approximately 300,000 and includes the cities and towns of Estes Park, Berthoud, Loveland, Ft. Collins, and Wellington. Small communities such as Timnath, LaPorte, Bellvue, Drake, Glen Haven, Livermore and Red Feather Lakes are also within the boundaries of Larimer County. The county extends to the Continental Divide and includes much of Rocky Mountain National Park. Over 50% of Larimer County is publicly owned, most of which is land within Roosevelt National Forest and Rocky Mountain National Park. The County has two school districts; Poudre School District R-1 and the Thompson Valley School district RJ-2. Larimer County has nine (9) State highways, three (3) US highways, and one Interstate highway going through its boundaries.

The data in this report are summarized from individual cases under the jurisdiction of the Coroner/Medical Examiner and presented here in aggregate form. Long term death statistics were gathered from Coroner's statistics over the last 10 (or more) years. Current yearly information and statistics were gathered from deaths in 2013.

The "Undetermined" Manner of Death category includes deaths in which the manner could not clearly be determined, as in some drug overdoses where there is no clear evidence as to whether the injury occurred with intent or accidentally. Undetermined is also used for Sudden Unexpected Infant Death Syndrome (SUIDS), and in other cases, such as found skeletal remains, where no other clear manner of death can be determined.

It is the intention of the Larimer County Medical Examiner's Office to provide factual statistics and information for and requested by the citizens of Larimer County. Graphs and tables, which display information such as classification of death, drugs of abuse, death rates, and motor vehicle crash statistics have been selected as those most likely to assist other agencies and individuals seeking statistical information.

Abbreviations are used for modes of death throughout the various charts and graphs in this report. They are as follows:

- CO (carbon monoxide)
- GSW (gunshot wound)
- LS (ligature strangulation)
- MV (motor vehicle)
- MVC (motor vehicle crash)
- OD (overdose)

#### TOTAL LARIMER COUNTY DEATHS VS. MEDICAL EXAMINER CASES IN 2013

In 2013, there were 2,191 deaths in Larimer County. The Medical Examiner's Office assumed jurisdiction in 1,157 (53%) of these cases. Larimer County Medico-legal Investigators review medical information and conduct necessary telephone interviews on all M.E. cases, and it was deemed necessary to respond to the death scene and conduct a thorough medico-legal scene investigation in 376 of the 1,157 cases. Out of these investigations, complete forensic autopsies were performed in 195 cases. The Medical Examiner cases **not** autopsied (962) were those in which the scene investigation, circumstances of death, medical documentation, interviews, social history, and/ or external examination of the body provided sufficient information for certifying the cause of death. In 6 of those 962 cases, toxicology studies only were deemed necessary. Twenty-two (22) of the 962 cases were transferred back to the originating jurisdiction.

Cases in which jurisdiction was not assumed by the Medical Examiner (1,034 deaths), were primarily those individuals in nursing homes or hospital settings with a known fatal disease process and no evidence of extenuating circumstances, thus enabling the primary physician to certify the cause of death without Medical Examiner involvement. The accompanying tables, graphs, and figures summarize all cases where the Medical Examiner assumed jurisdiction.

#### Total LC Deaths ■ ME Cases ■ Autopsies

#### Total County Death Cases vs. M.E. Cases (Last 5 years: 2009 - 2013)

#### MANNER OF DEATH

The **Manner of Death** is a classification of the way in which the Cause of Death came about, whether by force of natural events, accidental means, self-inflicted wounds, or other external forces. Manner of Death is determined largely by means of the investigation. There are only five (5) manners of death, listed below.

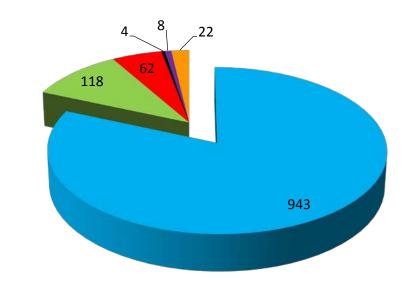
**NATURAL:** Death caused *solely* by disease. If natural death is hastened by injury or any other nonnatural event (ex: fall), the manner of death will not be considered natural. If the terminal disease process is *caused* by a non-natural event (ex: pneumonia due to long-term bed confinement as a result of a motor vehicle accident), the manner of death will not be considered natural.

**SUICIDE:** Death as a result of a purposeful action set in motion (explicit or implicit) to end one's life.

**ACCIDENT:** Death other than natural where there is no evidence of intent; i.e. an unintentional event or chain of events. This category includes most motor vehicle accidents, falls, drowning, accidental drug overdoses, drug reactions, etc.

**HOMICIDE:** Death resulting from injuries intentionally inflicted by another person (explicit or implicit), or inflicted on another by one's grossly reckless behavior (does not include vehicular homicide).

**<u>UNDETERMINED</u>**: Manner assigned when there is insufficient evidence, or conflicting/ equivocal information (especially about intent), to assign a specific manner.



#### Manners of Death in 2013 ME Cases

■ Natural ■ Accident ■ Suicide ■ Homicide ■ Undetermined ■ Jurisdiction Transferred

#### 2013 YEAR - END STATISTICAL OVERVIEW

The Larimer County Medical Examiner's Office investigated a total of 1,157 deaths during 2013. Of these, 943 were Naturals, 118 were Accidents, 62 were Suicides, 4 were Homicides, 22 were transferred back to the County of origin, and 8 were classified as Undetermined. Of the 1,157 deaths, Medico-legal Investigators responded to and conducted complete medico-legal investigations into 376 death scenes. The cases where a response was not necessary were 781 Hospice, hospital, or nursing home deaths from Natural causes that had no suspicious or unusual circumstances and were investigated via telephone and medical record review.

Not every accident or suicide is necessary to autopsy. This usually occurs when the person has been a patient in a hospital or nursing home and there is adequate medical history and a documented diagnosis which can eliminate the need for an autopsy. However, a complete medico-legal investigation is still done.

Accidents:118 total43 - Drug Overdose (OD)33 - Falls24 - Motor Vehicle Crash (MVC)4 - Hyper/hypothermia6 - Drowning2 - Choking3 - Asphyxia (mechanical, positional, or auto-erotic)1 - Bicycle (no vehicle involvement)1 - Carbon Monoxide (CO)1 - Fire/ thermal	73 autopsied + 2 Toxicology only
Suicides: 62 total 27 - Gun Shot Wound (GSW) 18 - Drug Overdose (OD) 8 - Ligature Strangulation (LS) 2 - Carbon Monoxide (CO) 2 - Asphyxia/Suffocation 2 - Cutting/ stab 1 - Motor Vehicle Crash (MVC) 1 - Drowning 1 - Train vs. pedestrian	56 autopsied + 1 Toxicology only
Homicides: 4 total 2 - Stabbing 1 - Gun Shot Wound (GSW) 1 – Blunt force (beating/ strangulation)	4 autopsied
Undetermined: 8 total 4 – Drug Overdose (OD) (accident vs. suicide) 2 – No anatomic findings; likely natural 1 – Starvation (probable suicide) 1 – MVC (accident vs. suicide) Transfer of Jurisdiction: 22 total	8 autopsied
	F. a
Naturals: 943 total	54 autopsied + 3 Toxicology only

Total Forensic Autopsies Performed: 195 + 6 toxicology only studies

## SUICIDE

## STATISTICS

#### **2013 SUICIDE INFORMATION**

Suicide is death caused by intentional, self-inflicted injuries. In Larimer County during 2013 there were sixty-two (62) deaths by suicide. Death by Suicide comprised 5.4% of our investigated cases and 2.8% of all Larimer County deaths. The suicide rate dropped slightly from last year.

#### Age

- 8-	
Average Age	46
Juvenile	0
Adult	62
Oldest:	91
Youngest:	18
<u>Gender</u>	
Female	18
Male	44
<u>Race</u>	
Black	0
Hispanic	1

Monthly Breakdown				
Jan	7			
Feb	4			
Mar	9			
Apr	6			
May	4			
Jun	4			
July	3			
Aug	4			
Sept	7			
Oct	5			
Nov	6			
Dec	3			
	62			

#### Mode of Suicide

White

Gun Shot Wound (GSW)	27
Drug Overdose (OD)	18
Ligature Strangulation (LS)	8
Carbon Monoxide (CO)	2
Asphyxia	2
Cut/ stab	2
Train vs. pedestrian	1
Motor Vehicle (MVC)	1
Drowning	1

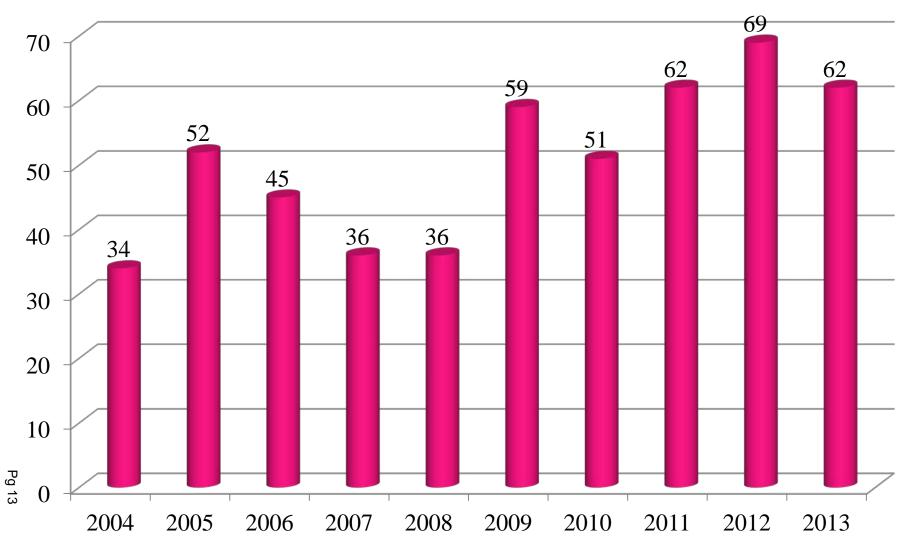
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#### Mental Health/ Suicide Notes

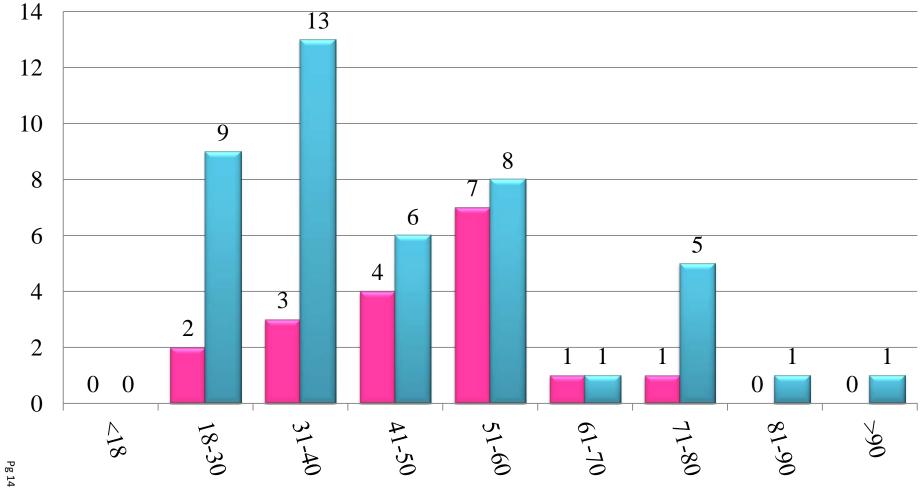
Left note or other message	29
(47%)	
Prior ideation or attempts	40
(65%)	
Active mental health treatment	15
(24%)	

Alcohol and/ or Drugs Present 46/62 (74%)

### Suicide Totals - Last 10 Years 2004 - 2013



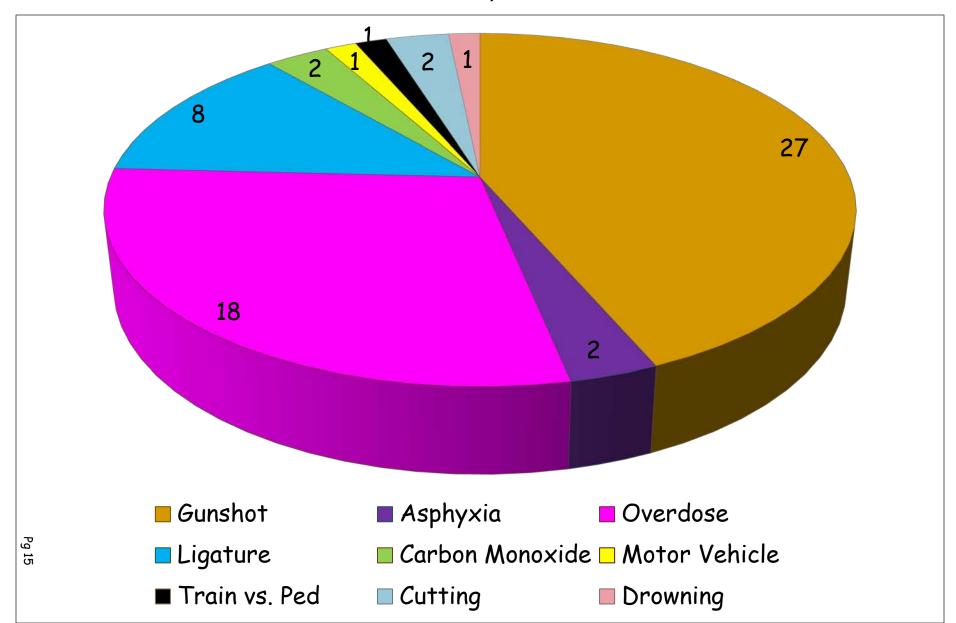
### 2013 Suicides by Age and Gender Distribution



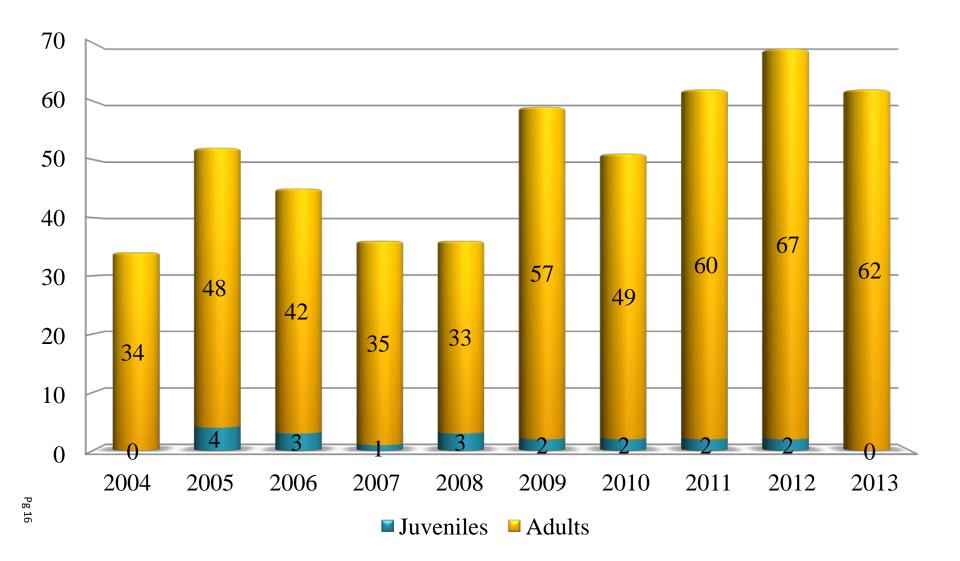
Female ■ Male

#### 2013 Suicides

#### Distribution by Mechanism

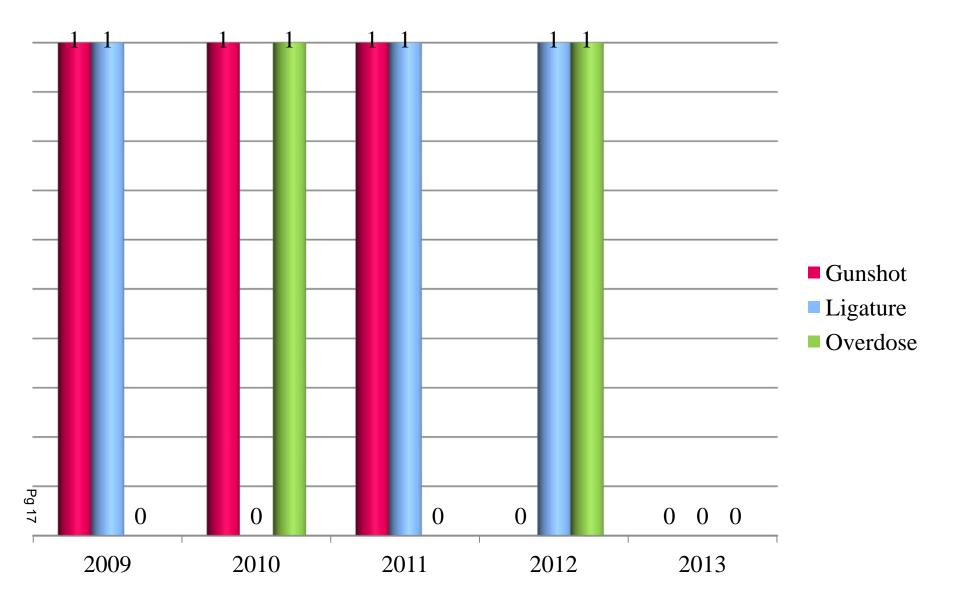


### Juvenile (<18) vs. Adult Suicides 10 Years 2004 - 2013

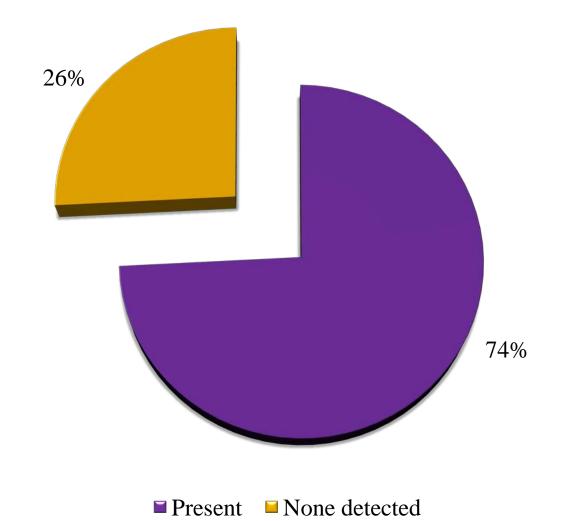


#### Mechanism of Juvenile Suicides

5 Years - 2009 - 2013



### Alcohol and/or Drug-Related Suicides 2013



#### DRUGS AND ALCOHOL IN SUICIDE DEATHS – 2013 TOTAL: 46 OUT OF 62 (74%)

#	GENDER	AGE	MODE	ALCOHOL	PRIMARY DRUG ASSOCIATED W/ DEATH
1	Male	35	GSW	.062	
2	Male	52	LS		
3	Male	18	GSW		
4	Male	48	OD	.107	OTC diphenhydramine
5	Male	35	GSW		Cannabinoid
6	Male	54	LS		
7	Female	53	OD	.131	Oxycodone
8	Female	25	OD		Morphine
9	Female	41	GSW	.263	Opiate/ narcotic
10	Male	39	LS		
11	Female	58	OD	.284	Benzodiazepines
12	Male	65	OD		Antidepressants
13	Male	91	Cutting		Tranquilizers
14	Male	32	GSW		Cannabinoid
15	Male	29	GSW		
16	Male	41	GSW		Opiate/ narcotics
17	Male	35	OD	.228	OTC diphenhydramine
18	Male	72	GSW		
19	Male	23	GSW		
20	Male	34	GSW		Opiate/ narcotics
21	Male	58	OD	.225	Hydrocodone
22	Male	34	MVC	.055	Cannabinoid
23	Female	51	OD	.270	Antipressants
24	Male	58	Asphyxia		Helium
25	Male	23	GSW	.207	
26	Male	39	LS	.296	
27	Female	40	OD		OTC diphenhydramine
28	Male	59	GSW		
29	Male	78	GSW		Hydrocodone
30	Male	19	LS		
31	Female	46	OD		Opiate/ Oxycodone
32	Female	45	Asphyxia		Helium
33	Female	60	Drowning		
34	Male	31	LS	.058	
35	Female	69	OD		Benzodiazepines
36	Female	59	GSW		
37	Female	40	OD		Insulin
38	Male	59	GSW		Benzodiazepines
39	Female	79	GSW		Opiate/ narcotics

#### DRUGS AND ALCOHOL IN SUICIDE DEATHS – 2013 TOTAL: 46 OUT OF 62 (74%)

40	Male	24	OD	.036	Methamphetamine, Benzos, Oxycodone
41	Male	34	GSW	.046	
42	Male	56	OD	.097	Oxycodone, antidepressants
43	Male	39	GSW		Cannabinoid
44	Male	83	GSW	.109	
45	Female	49	OD		OTC diphenhydramine
46	Male	47	LS	.010	Methamphetamine; opiates
47	Male	31	Train v. Ped	.170	Oxycodone
48	Male	29	GSW	.023	Morphine
49	Male	71	GSW		
50	Male	72	GSW		Oxycodone
51	Male	18	LS	.173	Opiate/ narcotics
52	Female	18	OD		Cannabinoid
53	Female	52	Cutting		
54	Male	46	GSW		
55	Male	18	СО	.275	
56	Male	57	GSW		
57	Male	40	СО	.079	
58	Male	73	GSW		
59	Male	26	GSW	.005	Antidepressants
60	Female	31	OD		OTC Tylenol
61	Female	56	OD	.046	Oxycodone; Tranquilizers
62	Male	45	GSW		

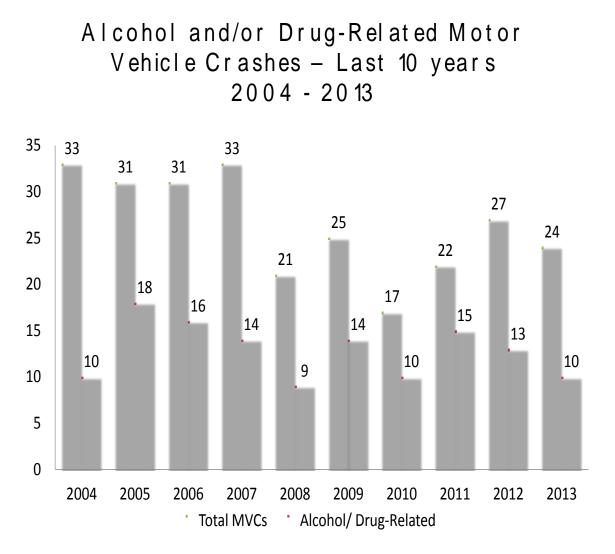
## ACCIDENT

## STATISTICS

#### **2013 Accident Statistics**

Accidental deaths are deaths other than natural where there is no evidence of intent; i.e. an unintentional event or chain of events. This category includes most motor vehicle crashes (MVC), falls, drowning, accidental drug overdoses (OD), choking, etc. During 2013, one hundred eighteen (118) deaths were certified as accidents.

Twenty-four (24) of these deaths were motor vehicle (or traffic) crashes (MVCs). Our statistical information will deal first with the MVCs. The other 94 accidental deaths will be discussed on page 25.



In 2013, there were 24 motor vehicle crash fatalities. Out of the 24 fatalities, 10 drivers of involved vehicles (41.6%) were considered to be under the influence of alcohol and/or drugs.

#### **Motor Vehicle Crash Fatalities (24)**

<u>Age</u>				
Average Age:	42			
Juveniles (<18):	2			
Adults:	22			
Youngest:	2			
Oldest:	88			

#### **Decedent's Position in Vehicle**

Driver:	17
Passenger:	5
Pedestrian:	2

#### **Safety Measures by Decedents**

Seat belt used:	3
Seat belt <b>NOT</b> used:	12
N/A: ATV, scooter, or motorcycle:	5
N/A: Pedestrians/ bicyclists hit:	4

#### Weather Related/ Adverse Road Conditions

Wet Roads: 2

#### Time of Day:

00:01 - 06:00:	2
06:01 - 12:00:	3
12:01 - 18:00:	10
18:01 - 00:00:	8
Unknown:	1

#### Number of vehicles involved:

One vehicle only:	13
Two or more vehicles:	11

#### LARIMER COUNTY MEDICAL EXAMINER'S OFFICE - 2013 ANNUAL REPORT

#### DRUG & ALCOHOL-RELATED MOTOR VEHICLE CRASHES (MVC'S) 2013

#	Gender	Age	Number of Vehicles involved	Driver of <u>ANY</u> involved Vehicle: + for Alcohol	Driver of <u>ANY</u> involved Vehicle: + for Drugs
1	Female	18	2		
2	Male	20	2		
3	Female	48	2		
4	Male	28	1	.226	
5	Male	66	1		
6	Male	81	1		Oxycodone
7	Male	63	1		Cannabinoid
8	Female	2	1		
9	Male	68	3		Cannabinoid
10	Male	17	2		
11	Male	19	2		
12	Male	43	1		
13	Male	88	1		
14	Female	56	2		
15	Female	65	1		
16	Male	66	2		Benzodiazepines
17	Male	43	2	.230	
18	Male	30	2		
19	Male	21	1		Cannabinoid
20	Male	64	2		
21	Female	27	1		
22	Female	26	1	.239	
23	Male	36	1	.378	
24	Male	21	1	.222	

#### 2013 Accidents (Excluding Motor Vehicle Crashes)

In 2013, Larimer County had 94 accidents that were not traffic-related. They are classified as follows:

Drug Overdose (OD)	-	43
➤ Falls	-	33
Hyper/ hypothermia	-	4
Drowning	-	6
Asphyxia	-	3
(includes mechanical, positional, and a	auto-erotic)	
Choking	-	2
Carbon Monoxide (CO)	-	1
Fire/ Thermal	-	1
<ul> <li>Bicycle (no vehicle involvement)</li> </ul>	-	1

#### Age:

Average Age: 56.5 Adults: 93 Juveniles: 1

Alcohol and/or drugs found in system: 61/94 (65%)

# HOMICIDE AND

# **GUN-RELATED**

STATISTICS

#### **2013** Homicide Information

Homicide is a death that results from injuries intentionally inflicted by another person (explicit or implicit), or inflicted on another by one's grossly reckless behavior. Vehicular homicides are *NOT* included in this category, as these deaths do not show intent to kill and are hence counted in the Motor Vehicle Crash statistics.

In 2013, there were 4 homicide victims in Larimer County. Two were from from stabbing, one was from a gunshot, and one was beating with strangulation.

Age		Race	
Average Age:	52	White:	3
Adult:	4	Hispanic:	1
Juvenile:	0		

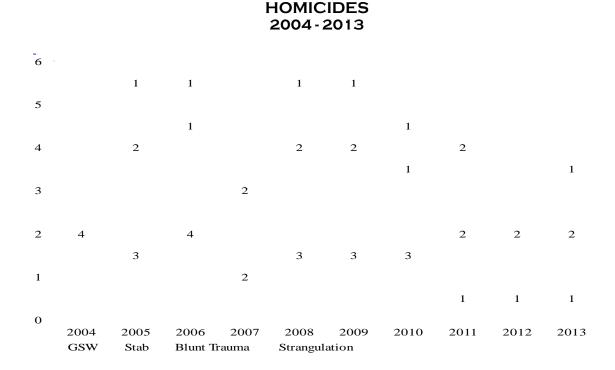
#### Gender:

Male: 2 Female: 2

#### Alcohol/ Drug-Related

We only report the decedent's toxicology, as the perpetrator is presumed innocent and is HIPAA-protected.

All four of the homicide victims tested positive for alcohol; one victim tested positive for methamphetamine and another one was positive for marijuana.



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<u>GUN-RELATED DEATHS IN LARIMER COUNTY</u> Last 10 years				
	(JUVENILE			
2013				
Total County Deaths:	2191			
Total Gun Deaths:	2151	(1.27% of all deaths)		
Suicides:	27	(27 adults)		
Accidents:	0			
Homicides:	1	(1 adult)		
Undetermined:	0	(1 0000)		
<u>2012</u>				
Total County Deaths:	2022			
Total Gun Deaths:	38	(1.9% of all deaths)		
Suicides:	37	(37 adults)		
Accidents:	0			
Homicides:	1	(1 adult)		
Undetermined:	0			
2011				
Total County Deaths:	1986			
Total Gun Deaths:	32	(1.6% of all deaths)		
Suicides:	31	(30 adults, 1 juvenile)		
Accidents:	0			
Homicides:	1	(1 adult)		
Undetermined:	0			
2010				
Total County Deaths:	1939			
Total Gun Deaths:	31	(1.6 % of all deaths)		
Suicides:	28	(27 adults, 1 juvenile)		
Accidents:	0			
Homicides:	3	(3 adults)		
Undetermined:	0	· · ·		
2009				
Total County Deaths:	1697			
Total Gun Deaths:	27	(1.4 % of all deaths)		
Suicides:	24	(23 adults, 1 juvenile)		
Accidents:	0			
Homicides:	3	(3 adults)		
Undetermined:	0			

#### **GUN-RELATED DEATHS IN LARIMER COUNTY**

LAST 10 YEARS (JUVENILE: < 18)

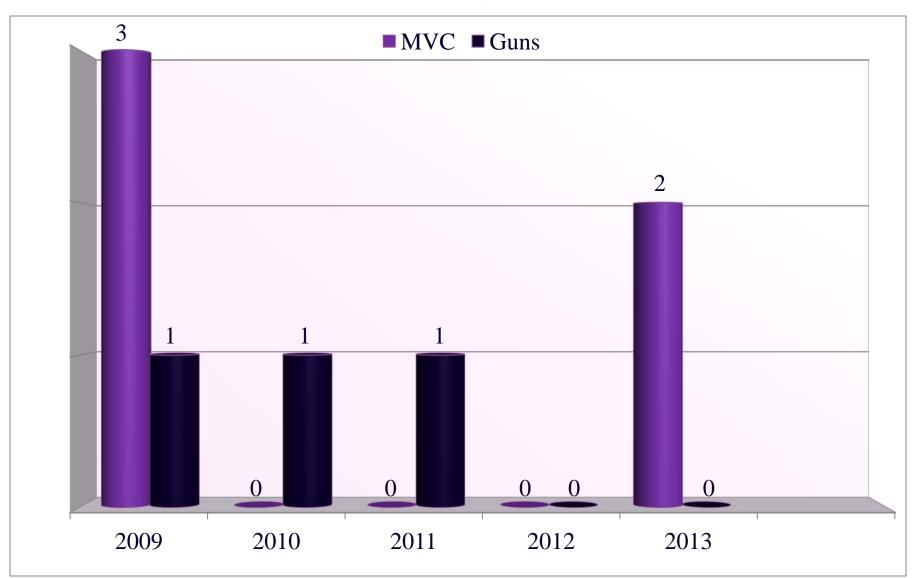
2008		
Total County Deaths:	1709	
Total Gun Deaths:	22	(1.3 % of all deaths)
Suicides:	19	(18 adults, 1 juvenile)
Accidents:	0	
Homicides:	3	(3 adults)
Undetermined:	0	
2007		
Total County Deaths:	1615	
Total Gun Deaths:	22	(1.4 % of all deaths)
Suicides:	20	(19 adults, 1 juvenile)
Accidents:	0	
Homicides:	2	(2 adults)
Undetermined:	0	
2006		
Total County Deaths:	1501	
Total Gun Deaths:	24	(1.6 % of all deaths)
Suicides:	19	(18 adults, 1 juvenile)
Accidents:	0	( , , , ,
Homicides:	4	(4 adults)
Undetermined:	1	(1 adult: suicide vs. accident)
2005		
Total County Deaths:	1551	
Total Gun Deaths:	28	(1.8 % of all deaths)
Suicides:	25	(23 adults, 2 juveniles)
Accidents:	0	(, -, -,,
Homicides:	3	(3 adults)
Undetermined:	0	
2004		
zoo4 Total County Deaths:	1474	
Total Gun Deaths:	16	(1.1 % of all deaths)
Suicides:	10	(12 adults)
Accidents:	0	(12 00010)
Homicides:	4	(4 adults)
Undetermined:	0	(
Undetermined:	0	

Larimer County Medical Examiner's Office 2013 Annual Report

#### JUVENILE (<18) DEATHS FROM GUNS

#### vs. MOTOR VEHICLE CRASHES

2009 - 2013



Pg 30

#### **GUNS IN THE HANDS OF JUVENILES**

(JUVENILE: < 18)

Statistics below are to show deaths occurring at the hands of a juvenile with a gun during the last 10 years. They include suicides, accidental shootings resulting in death, and homicides *perpetrated* by a juvenile. They DO NOT include juveniles who are *victims* of a homicide.

		<u>2008</u>	
<u>2013</u>		Suicides	1
Suicides	0	Accidents	0
Accidents	0	Homicides by Juveniles	0
Homicides by Juveniles	0		
		<u>2007</u>	
<u>2012</u>		Suicides	1
Suicides	0	Accidents	0
Accidents	0	Homicides by Juveniles	0
Homicides by Juveniles	0		
		2006	
<u>2011</u>		Suicides	1
Suicides	1	Accidents	0
Accidents	0	Homicides by Juveniles	0

2010	

0

Homicides by Juveniles

2010	
Suicides	1
Accidents	0
Homicides by Juveniles	0

	0	0	0
_	U	U	

Suicides	1
Accidents	0
Homicides by Juveniles	0

#### <u>2005</u>

Suicides	2
Accidents	0
Homicides by Juveniles	0

#### <u>2004</u>

Suicides	0
Accidents	0
Homicides by Juveniles	0

# DRUGS OF ABUSE

### AND

# OVERDOSE

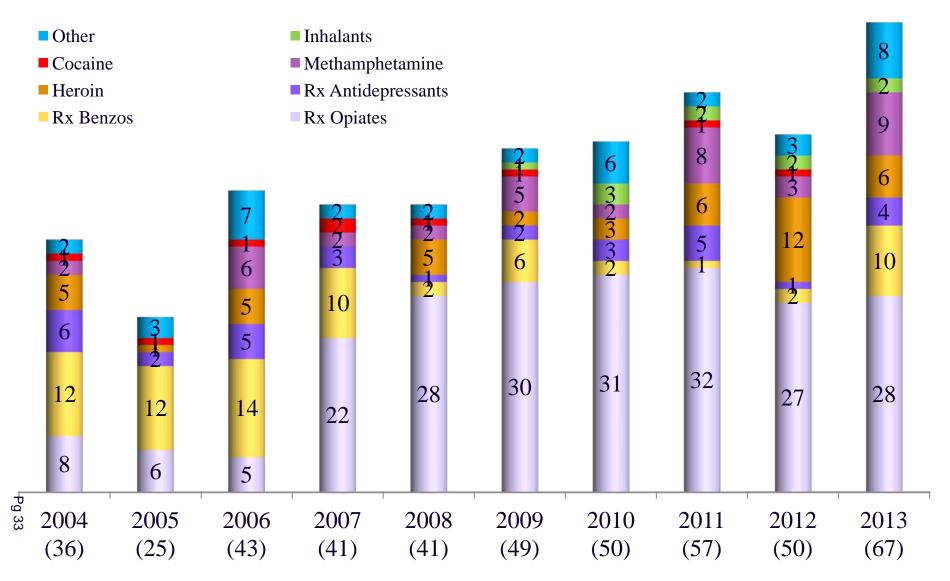
# STATISTICS

Larimer County Medical Examiner's Office 2013 Annual Report

#### Drugs of Abuse in Overdose Deaths

#### 2004 - 2013

Most overdose deaths are the result of a combination of prescriptions, over-the-counter meds, alcohol, and/ or illicit drugs. We have chosen the PRIMARY drug of abuse in each death, so that only one drug is shown for each death.



#### DRUGS OF ABUSE USED IN OVERDOSE DEATHS

2013

(TOTAL 65)

\*\* NOTE: GASES SUCH AS HELIUM ARE NOT CONSIDERED "DRUGS" AND HENCE ARE NOT INCLUDED IN THIS CHART. However, they are documented on the Drugs of Abuse graph on pg. 33

<u>Accidents</u> (43)	Age	Sex	Alcohol	Drug #1	Drug #2
1	42	Male	.017	Oxycodone	
2	30	Male		Heroin	
3	25	Female	.346	Benzodiazepines	Hydromorphone
4	40	Female	.171	Benzodiazepines	Morphine
5	44	Female		Benzodiazepines	Morphine
6	36	Female		Fentanyl	
7	26	Female		Oxycodone	Methadone
8	48	Male		Methamphetamine	
9	26	Female	.277	Antidepressants	
10	31	Female		Methamphetamine	Oxycodone
11	23	Female		Ecstasy (MDMA)	Methamphetamine
12	49	Male		Hydromorphone	
13	25	Male	.199	Oxycodone	
14	36	Female		Narcotics	
15	23	Male		Methamphetamine	
16	26	Male	.163	Methadone	Benzodiazepines
17	57	Female	.009	Fentanyl	Methamphetamine
18	21	Male		Heroin	Oxycodone
19	23	Male		Oxycodone	
20	26	Female		Methadone	Hydrocodone
21	39	Female		Oxycodone	Fentanyl
22	33	Male		Benzodiazepines	
23	23	Male		Heroin	
24	67	Male		Morphine	Oxycodone
25	30	Male		Heroin	
26	33	Male		Methamphetamine	Fentanyl
27	56	Female		Antidepressants	
28	57	Female		Benzodiazepines	
29	61	Male	.352	Benzodiazepines	
30	59	Female		Morphine	Methadone
31	59	Male		Heroin	
32	53	Male		Benzodiazepines	Oxycodone
33	44	Female		Methamphetamine	
34	49	Male		Morphine	Methamphetamine
35	49	Male		Chemotherapy	
36	58	Male		Heroin	Methamphetamine
37	33	Male		Oxycodone	Benzodiazepines

#### DRUGS OF ABUSE USED IN OVERDOSE DEATHS

2013

(TOTAL 65)

\*\* NOTE: GASES SUCH AS HELIUM ARE NOT CONSIDERED "DRUGS" AND HENCE ARE NOT INCLUDED IN THIS CHART. However, they are documented on the Drugs of Abuse graph on pg. 33

Accidents	Age	Sex	Alcohol	Drug #1	Drug #2
(43)					
38	57	Female		Fentanyl	
39	43	Female	.058	Oxycodone	
40	32	Female	.022	Methamphetamine	
41	25	Female		Methamphetamine	
42	45	Male		Morphine	Benzodiazepines
43	36	Female		Morphine	Oxycodone
<u>Suicides</u> (18)	Age	Sex	Alcohol	Drug #1	Drug #2
1	48	Male	.107	Diphenhydramine	
2	53	Female	.131	Oxycodone	Oxymorphone
3	25	Female		Morphine	Phenothiazine
4	58	Female	.284	Benzodiazepines	Hydrocodone
5	65	Male		Hydrocodone	Antidepressants
6	35	Male	.228	Diphenhydramine	
7	58	Male	.225	Hydrocodone	
8	51	Female	.270	Antidepressants	
9	40	Female		Diphenhydramine	Hydrocodone
10	46	Female		Oxycodone	Antidepressants
11	69	Female		Benzodiazepines	
12	40	Female		Insulin	
13	24	Male	.036	Oxycodone	Benzodiazepines
14	56	Male	.097	Oxycodone	Antidepressants
15	49	Female		Diphenhydramine	
16	18	Female		Antidepressants	
17	31	Female		Tylenol	Benzodiazepines
18	56	Female	.046	Oxycodone	Benzodiazepines
<u>Undetermined</u>	Age	Sex	Alcohol	Drug #1	Drug #2
<u>Manner</u>					
(4)					
1	71	Female	.049	Morphine	
2	31	Male		Benzodiazepines	
3	29	Female	.020	Methamphetamine	
4	69	Female		Oxycodone	Benzodiazepines

# CHILD DEATHS AND SUIDS

## (SUDDEN UNEXPECTED INFANT DEATH SYNDROME)

#### CHILD DEATHS BY AGE, MANNER, AND MODE (LAST 5 YEARS)

2013	Natural	Accident	Suicide	Homicide	SUIDS & Other
(9 total)	1				Undetermined
Full term live birth < 1 mo	1				
1 mo < 1 yr	1				
1 yr < 4 yrs	2	1 – MV vs. Pedestrian			
4 yrs < 9 yrs	1				
9 yrs < 14 yrs	1				
14 yrs < 18 yrs		1 – Drowning 1 - MVC			
TOTALS	6	3	0	0	0
2040	N		0.1.1		
2012	Natural	Accident	Suicide	Homicide	SUIDS & Other
(16 total) Full term live birth	7				Undetermined
< 1 mo	/				
1 mo < 1 yr		3 – positional asphyxia/ overlay			
1 yr < 4 yrs	1				
4 yrs < 9 yrs	1				
9 yrs < 14 yrs		1 - electrocution			
14 yrs < 18 yrs			1 – LS 1 - OD		1 (GSW: suicide vs. homicide)
			2		
TOTALS	9	4	2	0	1
2011	Natural	Accident	Suicide	Homicide	SUIDS & Other
(10 total)	Naturai	Accident	Suicide	Homicide	Undetermined
Full term live birth	1				
< 1 mo 1 mo < 1 yr					1
1 yr < 4 yrs	1				
4 yrs < 9 yrs	-				
9 yrs < 14 yrs					
14 yrs < 18 yrs	4		1-GSW 1-LS		1-0D (suicide vs. accident)
TOTALS	6		2		2

#### CHILD DEATHS BY AGE, MANNER, AND MODE (LAST 5 YEARS)

2010	Natural	Accident	Suicide	Homicide	SUIDS & Other
(12 total)					Undetermined
Full term live birth	4				
< 1 mo					
1 mo < 1 yr	2				
1 yr < 4 yrs					
4 yrs < 9 yrs	1				
9 yrs < 14 yrs					
14 yrs < 18 yrs	2		1-0D		1
			1-GSW		
TOTALS	9	0	2	0	1
2009	Natural	Accident	Suicide	Homicide	SUIDS & Other
(12 total)					Undetermined
Full term live birth	2				
< 1 mo					
1 mo < 1 yr	2	1-Drowning			
1 yr < 4 yrs					
4 yrs < 9 yrs					
		1-MV v. bike	1-GSW		
4 yrs < 9 yrs	1	1-MV v. bike 2-MVC	1-GSW 1-LS		
4 yrs < 9 yrs 9 yrs < 14 yrs 14 yrs < 18 yrs		2-MVC 1-OD	1-LS		
4 yrs < 9 yrs 9 yrs < 14 yrs	1 5	2-MVC			
4 yrs < 9 yrs 9 yrs < 14 yrs 14 yrs < 18 yrs		2-MVC 1-OD	1-LS		
4 yrs < 9 yrs 9 yrs < 14 yrs 14 yrs < 18 yrs		2-MVC 1-OD	1-LS		

## **UNIDENTIFIED REMAINS**

## PUBLIC ADMINISTRATOR CASES & EXHUMATIONS

## ORGAN AND TISSUE DONATIONS

📥 ORGANIZATIONAL CHART

#### **UNIDENTIFIED REMAINS**

The Larimer County Medical Examiner's Office currently has four (4) deceased individuals who remain unidentified. These individuals are described below.

#### 1) Unidentified Hispanic Male:

Date of Death: 09/16/94

Height:5'10"Approximate Age:25-35Hair:Black, wavy, medium lengthScars/ Tattoos:Weight:140 lbs.Scars/ Tattoos:Well-healed, old traumatic scars on right lower back and right back hip.Clothing:Blue nylon windbreaker with logo "ATA Services, Mile High Stadium"; gray/ whiteplaid shirt; red long-sleeved sweatshirt; khaki trousers; black/ white canvas and vinyl athleticshoes. A religious pamphlet was found in a pocket from the Jeremiah Baptist Church, Denver.Dental:Two silver caps on upper front incisors

This Hispanic male was apparently living a transient lifestyle. He was found deceased in the boxcar of a train in a railroad yard in north Ft. Collins. He had sustained massive blunt force injuries to the head, consistent with being caught in the slamming door of the boxcar of an abruptly stopping train. The manner of death appears to be accidental. The train in which he was found arrived in Denver from New Mexico on 09/15/94 and was forwarded on to Ft. Collins at 02:00, 09/16/94.

#### 2) Unidentified Caucasian Female Infant:

#### Date of Death: 08/22/96

<u>Approximate Age</u>: Full-term live birth, neo-natal infant <u>Hair:</u> Dark brown, wavy

This live birth, full-term infant female was found in shallow water of Horsetooth Reservoir, wrapped in a garbage bag with several rocks to weigh it down. There is no natural disease process found that could have contributed to the death and autopsy findings are consistent with suffocation. The manner of death appears to be homicide.

#### 3) Unidentified Caucasian Male:

#### Date of Death: Approximately 07/06/97



<u>Height:</u> 5'11"
<u>Approximate Age</u>: 20-30
<u>Weight:</u> 150 – 170 lbs.
<u>Hair</u>: Sandy Brown, long, wavy; receding hairline; chin beard or goatee
<u>Eye Color</u>: Unknown

<u>Teeth</u>: Beautiful, straight, white, no fillings; All 4 wisdom teeth present; slight gap between top front incisors.

<u>Scars/ Tattoos:</u> Small, circular tattoo on left thumb with the letters: P.I.L; both ears pierced one time; well-manicured fingernails.

<u>Clothing:</u> Black tee shirt with bright pink motorcross logo "Sprucewood Express"; long-sleeved striped shirt; Rustler brand blue jeans; black leather work boots.

This man was found deceased in north Fort Collins in the sleeper cab of an abandoned semi tractor-trailer. He was probably living a recently transient lifestyle. There is no evidence of trauma or foul play. There is no natural disease process apparent at autopsy. The manner of death is undetermined.

#### 4) Unidentified African American Female

#### Date of Death: 07/11/11

This middle-aged African American female checked in to a local motel on 06/27/11 and arrived there by taxi. She paid for a room in cash through 07/11/11. It was later found that she had stayed at other local motels in the area, always taking a taxi, paying in cash, and giving false and different names. She told the Motel 9 that her name was Sandra Nelson, of 5203 Bosa Ave., Park City, UT. This was later found to be a non-existent address and false name. She also stated that she was originally from Los Angeles and was looking for a house in this area. On 07/11/11, she did not show up for breakfast as had been her custom. Since it was her last paid day, staff assumed she had checked out. They entered her room with a master key and found her deceased on the bed with pills at her feet and a bright blue, granular purging coming from her nose and mouth. There was no suicide note but autopsy results showed a massive overdose of multiple medications. All attempts to identify the decedent have failed.



Height: 5'06"

Age: Approximately 60 (55 - 70)

Weight: 211 lbs.

Hair: Gray/ black, curly, more white around forehead/ face

Eyes: Brown

Teeth: Natural w/ partial upper denture

Scars: round scar beneath chin; scar on lower abdomen (possible past Csection)

Clothing: Black paisley patterned blouse; black pants

Jewelry: White metal chain necklace; white metal earrings; white metal wristwatch

If you have any information concerning any of the above individuals, please contact the Larimer County Medical Examiner's Office at 970-619-4517. You can remain anonymous. You can also e-mail our web site at: <a href="https://www.larimer.org/coroner">www.larimer.org/coroner</a>

#### PUBLIC ADMINISTRATOR CASES

(NO NEXT-OF-KIN FOUND AT TIME OF RELEASE)

We are publishing this list in an effort to help families find their loved ones, if possible. If anyone has any information regarding next-of-kin on any of the above-listed, please contact our Office at 970-619-4517. You may remain anonymous.

VOLLINTINE, Thomas       04         2004	2/01/2002 4/05/2002 7/01/2004 2/27/2005 2./07/2006 4/02/2006	02C-085 02C-167 04C-368 05C-054 06C-021 06C-172	Allnutt- FTC Goes Bohlender Allnutt- FTC Resthaven
2004         SMITH, James       07         2005       01         PURINS, Maris       01         2006       01	7/01/2004 ./27/2005 ./07/2006	04C-368 05C-054 06C-021	Bohlender Allnutt- FTC Allnutt- FTC
SMITH, James       07         2005	./27/2005 ./07/2006	05C-054 06C-021	Allnutt- FTC Allnutt- FTC
SMITH, James       07         2005	./27/2005 ./07/2006	05C-054 06C-021	Allnutt- FTC Allnutt- FTC
2005 PURINS, Maris 01 2006	./27/2005 ./07/2006	05C-054 06C-021	Allnutt- FTC Allnutt- FTC
PURINS, Maris 01 2006	/07/2006	06C-021	Allnutt- FTC
PURINS, Maris 01 2006	/07/2006	06C-021	Allnutt- FTC
2006	/07/2006	06C-021	Allnutt- FTC
MCCLENNY, Andrew "Jack" 01			
	1/02/2006	06C-172	Resthaven
EMANUELE, Frank 04			
2008			
	)/03/2008	08C-676	Kibbey-Fishburn
	/20/2008	08C-814	Goes
JOHNSON, Clarence 12	2/14/2008	08C-868	Allnutt- FTC
2009			
	5/01/2009	09C-323	Bohlender
YODER, Karl 09	9/27/2009	09C-678	Viegut
DORSEY, Robert 12	2/14/2009	09C-879	Vessey
2010			
JOHNSON, Mark A. 01	/06/2010	10C-011	Allnutt- FTC
LYNN, Vernon 04	/02/2010	10C-243	Goes
EVANS, William 05	5/15/2010	10C-352	Goes
	5/12/2010	10C-431	Viegut
· · · · ·	/18/2010	10C-522	Vessey
	/05/2010	10C-835	Allnutt-Lvld
2011			
	/06/2011	11C-018	Viegut
	//11/2011	11C-558	Bohlender
	)/12/2011	11C-748	Viegut

#### PUBLIC ADMINISTRATOR CASES (NO NEXT-OF-KIN FOUND AT TIME OF RELEASE)

2012			
MILLER, Randy K.	01/29/2012	12C-097	Allnutt- FTC
MULLANEY, John F.	03/08/2012	12C-214	Bohlender
ALBECK, Joel A.	07/13/2012	12C-582	Goes
FROST, Jack	09/26/2012	12C-786	Allnutt- FTC
JACKSON, Duane	09/20/2012	12C-786	Allnutt- FTC
EASTBURN, Carl B.	09/27/2012	12C- 792	Kibbey-Fishburn
GRAY, Cheryl "Montana"	11/27/2012	12C-951	Viegut
2013			
STOKES, Stephanie	01/31/2013	13C-109	Viegut
THOMPSON, James	03/02/2013	13C-212	Bohlender
TROUT, Gary	11/22/2013	13C-1053	Allnutt-Lvld

#### **EXHUMATIONS**

NAME	Date of Death	LCCO#	Date of Exhumation
HETTRICK, Peggy L.	02/11/1987	87C-049	05/14/1998
DECKER, Donald J.	07/06/2008	08C-459	03/15/2011

#### **ORGAN AND TISSUE DONATION STATISTICS**

There are five (5) hospitals within the borders of Larimer County: Poudre Valley Hospital in Ft. Collins, McKee Medical Center in Loveland, Estes Park Medical Center in Estes Park, Medical Center of the Rockies on I-25 at the Loveland exit, and Northern Colorado Rehabilitation Hospital between Loveland and Greeley. Nearly all organ and tissue donation referrals take place in the hospital setting. It is the policy of the Larimer County Medical Examiner's Office to facilitate organ and tissue donation in as many cases as possible without compromising the integrity of the investigation.

When referrals are made to harvesting banks, this does not mean that donation automatically takes place. Donations may not occur due to a variety of reasons: Families may not wish to donate; Organ and Tissue Banks may rule out the donation due to the age of the donator or a disease process; and on rare occasions our Office may refuse to allow donation to occur or may place certain restrictions on a donation. This is usually in cases of homicide or suspected homicide, or infant deaths where organ and/ or tissue retrieval could interfere with autopsy findings and compromise a criminal investigation.

Since not all deaths fall under the Medical Examiner's jurisdiction, our Office is not involved with all donation requests. Therefore, the statistics on the following page have been compiled by the Colorado Donor Alliance Organization.



#### Larimer County 2013 Statistics

#### Organ Data 2013

#### McKee Medical Center

- o 20 organ referrals (1 potential)
- 1 organ donor.
- o 5 prgans transplanted

#### Medical Center of the Rockies

- o 90 organ referrals (7 potential)
- o 6 organ donors
- o 25 organs transplanted

#### Poudre Valley

- u 58 organ referrals (3 potential)
- 3 organ donors
- 7 organs transplanted

#### Total Combined Organ Data 2013 (McKee, MCOR, PV)

- c 168 organ referrals (11 potential)
- e 10 organ donors
- o 37 organs transplanted

#### Tissue Data 2013

#### McKee Medical Center

- o 124 tissue referrals (37 potential)
- 24 tissue donors.

Medical Center of the Rockies

- 250 tissue referrals (66 potential)
- 38 tissue donors.

#### Poudre Valley

- o 275 tissue referrals (47 potential)
- 24 tissue donors

#### Total Combined Tissue Data 2013 (McKee, MCOR, PV)

- o 649 tissue referrals (150 potential)
- 85 tissue donors;

### Larimer County Medical Examiner's Office Organizational Structure

