

2020 ANNUAL REPORT

Office of the Larimer County Coroner/ Medical Examiner

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Coroner and Chief Medical Examiner

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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. Many of the statistics, charts, and graphs will vary year-to-year, as trends are followed and new or different information is requested.

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.

James A. Wilkerson IV, MD

*Larimer County Coroner
Chief Medical Examiner*

MISSION STATEMENT and FUNCTION OF THE MEDICAL EXAMINER'S OFFICE

MISSION STATEMENT

To seek the truth;

To combine forensic science and medicolegal death investigation to determine the cause and manner of death;

To serve the community with professionalism and integrity.

The Office of the Coroner/Medical Examiner operates as 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. 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 Statute (CRS) 30-10-606 mandates that the Office of the Coroner investigate any death where the cause of death is unknown. When necessary to determine the cause of death, an autopsy can be ordered by the Coroner. Certain autopsies are mandated by Statute.

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). This is a stringent accreditation of over 300 requirements which includes that a NAME Office is run by a Forensic Pathologist/Medical Examiner, and at least one Investigator be certified through the American Board of Medicolegal Death Investigators (ABMDI). We have maintained NAME Accreditation continuously since 2002. Our most recent inspection in mid-2020 found our office to be "exemplary" compared to offices throughout the country.

The Coroner must be elected every four years. We are fortunate that for over 40 years, Larimer County has continually elected a forensic pathologist/medical examiner as its Coroner, maintaining a professional medically-run office. Our Larimer County Coroner/Chief Medical Examiner is James A. Wilkerson IV, MD. Dr. Wilkerson has over 29 years' experience as a Forensic Pathologist and is triple-board certified in Forensic, Anatomical, and Clinical Pathology. Forensic Pathology is the branch of medical science that is applied to the legal investigation of sudden, unexpected, violent, or suspicious deaths. Also included in the Forensic Pathology partnership are Michael A. Burson, PhD, MD, and Stephen J. Cina, MD, each of whom is a Forensic Pathologist/ Regional Medical Examiner.

The Larimer County Coroner/Medical Examiner's staff includes a Chief Deputy Coroner/Chief Investigator and seven full-time and two part-time Deputy Coroner/Investigators. All investigators are trained extensively in medicolegal death investigation through ongoing education. All investigators are Certified Death Investigators through the Colorado Coroners Association and are encouraged to complete the National Death Investigator certification process through the American Board of Medicolegal Death Investigators. Completing our staff is the Administrative Office Manager, the Administrative Assistant and three morgue dieners.

MISSION STATEMENT and FUNCTION OF THE MEDICAL EXAMINER'S OFFICE

Duties of the Medical Examiner's Office are dictated by CRS 30-10-606 and the National Association of Medical Examiners (NAME). This includes:

- To be available to respond to a 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 ultimately determine the 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.

MISSION STATEMENT and FUNCTION OF THE MEDICAL EXAMINER'S OFFICE

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. 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-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;

MISSION STATEMENT and FUNCTION OF THE MEDICAL EXAMINER'S OFFICE

- Deaths from criminal abortion, including any situation where such abortion may have been self-induced;
- 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 and Certification
- Medical and Forensic Seminars
- Accident Investigation
- Crime Scene Investigation
- Evidence Collection and Preservation
- Medical Training
- Interviewing and Dealing with Grief

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 2018, our Medico-legal Investigators conducted a number of educational outreach training presentations to local agencies, schools, community service groups, and individuals, including but not limited to:

- AIMS and Front Range Community College Peace Officer Academies
- Larimer County Victim's Advocates
- Colorado Zero Suicide/Office of Suicide Prevention
- Rocky Mountain High School
- Poudre Valley High School
- Various individual meetings with students and 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.

EXPLANATION OF DATA

The Larimer County Coroner's Office was established in 1881 and records have been kept continuously since. 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 2020 calendar year. Many of the charts and graphs include data from the last 5-10 years, as needed to show trends.

The geographic area served by the Larimer County Medical Examiner's Office includes 2,634 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 6th largest county in Colorado, based on population. The population of Larimer County is approximately 345,000 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 crossing through its boundaries.

The data in this report is 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 2020.

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.

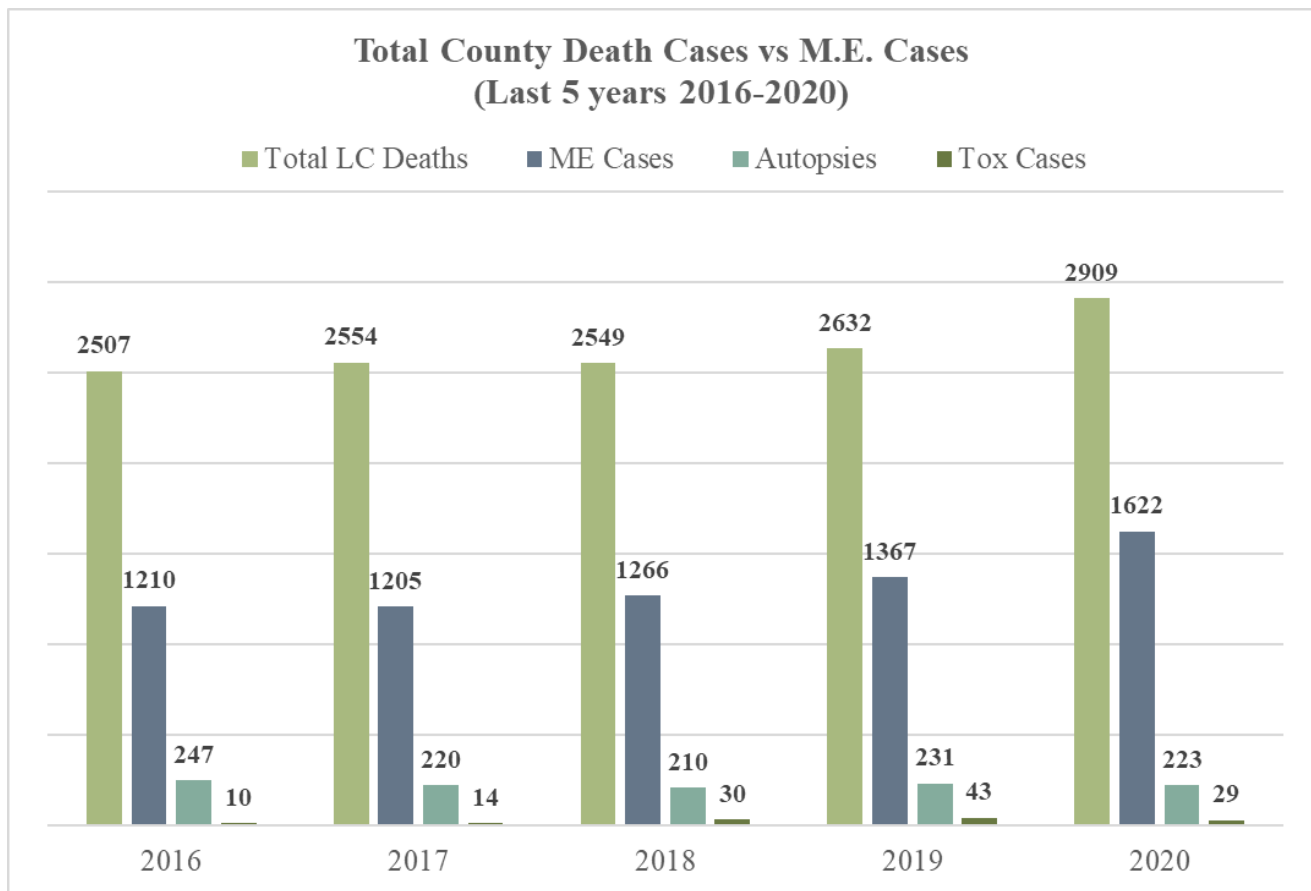
Abbreviations are used for modes of death throughout the various charts and graphs in this report. They are as follows:

- CO (carbon monoxide)
- GSW (gunshot wound)
- AH (asphyxia by hanging)
- MVC (motor vehicle crash)
- OD (overdose)

TOTAL LARIMER COUNTY DEATHS VS. MEDICAL EXAMINER CASES IN 2020

Larimer County Medical Examiner’s Office requires all deaths within Larimer County to be reported to our office. The only exception is fetal deaths under 21 weeks gestation, which do not fall under Coroner Statute. In 2020, the total number of deaths reported to our office was 2,909. The Medical Examiner’s Office assumed jurisdiction in 1622 (55.8%) of these cases. Larimer County Medicolegal 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 medicolegal scene investigation in 448 of the 1622 cases. Out of these investigations, complete forensic autopsies were performed in 223 cases (49.7%) of the accepted Coroner cases. Plus, in 29 additional cases, only toxicology studies were deemed necessary. 24 cases were transferred back to the jurisdiction in which the event originated. The remaining 173 cases not autopsied or tested for toxicology 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.

Cases in which jurisdiction was not assumed by the Medical Examiner (1287 deaths), were those individuals in nursing homes, facility hospices, or hospital settings longer than 24 hours, and 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 following tables, graphs, and figures summarize all cases where the Medical Examiner assumed jurisdiction.



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 non-natural 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. Most deaths are Natural deaths and over half occur in hospital or nursing home setting and hence, do not fall under Coroner jurisdiction. Of the total 2,909 deaths in Larimer County in 2020, 2,651 were Natural deaths, meaning that only 258 deaths were not Natural events. Of the 2,651 Natural deaths, 1,364 had had extenuating circumstances causing them to fall under Coroner's jurisdiction.

UNDETERMINED - Manner assigned when there is insufficient evidence, or conflicting/equivocal information (especially about intent), to assign a specific manner. In 2020, we had 8 deaths where Manner could not be accurately determined. These are listed as Undetermined.

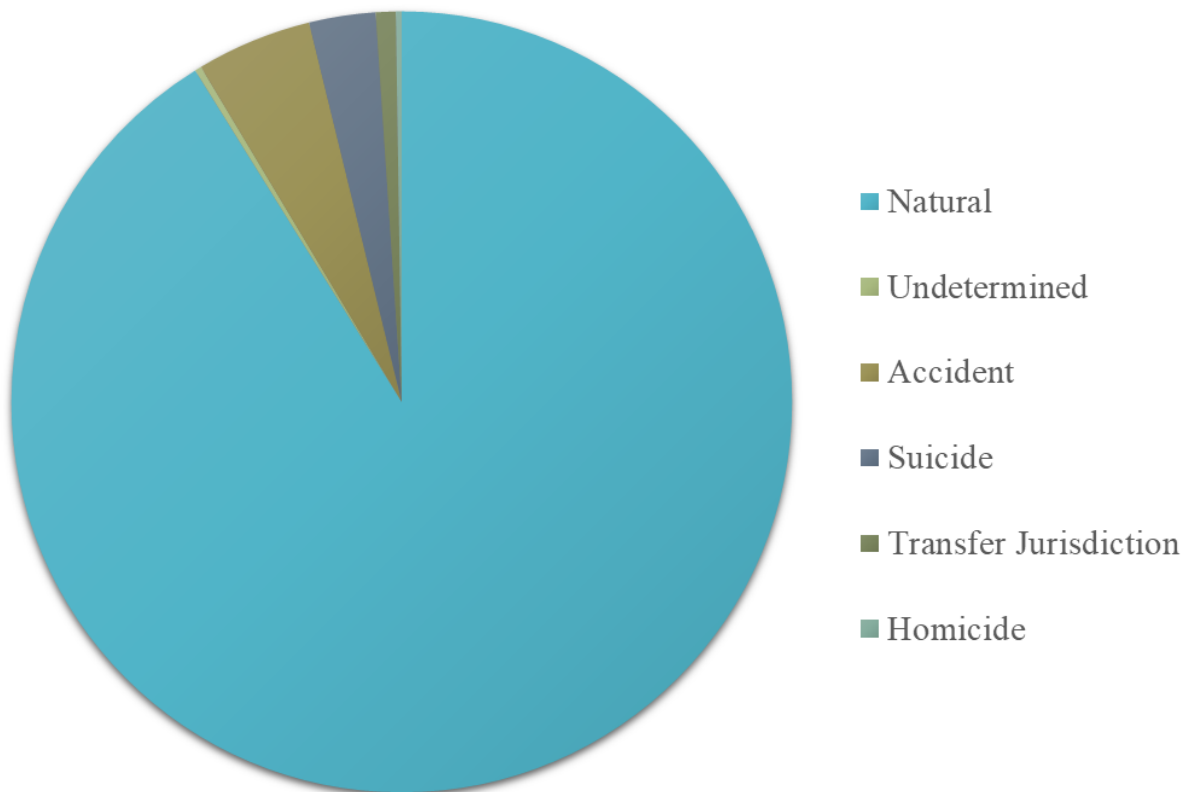
ACCIDENT - Death other than natural where there is no evidence of intent; i.e. an unintentional event or chain of events. This category includes most motor vehicle accidents, falls, drowning, accidental drug overdoses, drug reactions, etc. In 2020, we had 139 Accidents, 35 of which were motor vehicle fatalities.

SUICIDE - Death as a result of a purposeful action set in motion (explicit or implicit) to end one's life. In 2020, there were 80 deaths certified as Suicides.

(TRANSFERS) - Jurisdiction transferred back to the originating County where the injury occurred in 24 cases.

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). In 2020, there were 7 Homicides in Larimer County.

MANNERS OF DEATH – 2020



2020 YEAR - END STATISTICAL OVERVIEW

In 2020, the Larimer County Medical Examiner's Office had a total of 2,909 deaths reported to us. Of these, 1,622 deaths fell under Coroner jurisdiction and required investigation. Of the 1,622 deaths, 1,364 were Naturals, 139 were Accidents, 80 were Suicides, 7 were Homicides, 24 were transferred back to the County of origin, and 8 were classified as Undetermined. Of the 1,622 deaths, our 7 Medicolegal Investigators responded to and conducted complete medicolegal investigations into 441 death scenes. The remaining 1,181 cases were home hospice or hospital deaths falling under Coroner Statutes but determined to be death solely from Natural causes with no suspicious or unusual circumstances. These deaths 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 medicolegal investigation is still done.

Accidents: 139 total	88 autopsied; 8 toxicology only
38 - Falls	
35 - Motor Vehicle Crash (MVC)	
49 - Drug Overdose (OD)	
01 - Drowning	
08 - Asphyxia (mechanical, positional)	
03 - Hypo/Hyperthermia	
01 - Fire/Thermal	
01 - Impalement	
03 - Blunt Force	
Suicides: 80 total	76 autopsied; 0 toxicology only
39 - Gun Shot Wound (GSW)	
24 - Asphyxia by Hanging (AH)	
05 - Drug Overdose (OD)	
01 - Asphyxia (gas/hood)	
01 - Ingested Batteries	
00 - Pedestrian vs motor vehicle	
00 - Pedestrian vs Train	
03 - Knife	
03 - Carbon Monoxide (CO)	
04 - Jump/Fall	
Homicides: 7 total	7 autopsied
05 - Gun Shot Wound (GSW)	
02 - Knife	
Undetermined: 8 total	7 autopsied
04 - Suicidal OD vs Accidental OD	
02 - Suicide vs Natural	
01 - SUID	
01 - Accident	
Naturals: 1,364 total	45 autopsied; 21 toxicology only
Transfer of Jurisdiction: 24 total	

Total Forensic Autopsies Performed: 223

Toxicology-Only studies: 29

2020 SUICIDE INFORMATION

Suicide is death caused by intentional, self-inflicted injuries. In Larimer County during 2020 there were 80 deaths by suicide. Death by Suicide comprised 4.9% of our investigated cases and 2.7% of all Larimer County deaths.

Age

Average Age	40
Juvenile (<18)	1
Adult	79
Oldest:	86
Youngest:	16

Gender

Female	20
Male	60

Race

Asian	1
Hispanic	8
White	68
Mixed/other	3

Alcohol and/or Drugs Present

(Includes over-the-counter and Rx meds, recreational and illicit drugs)

Total	58/80 (72.5%)
ETOH	31/80 (38.8%)
THC	46/80 (57.5%)

Mode of Suicide

Gun Shot Wound (GSW)	39
Asphyxia by Hanging (AH)	24
Drug Overdose (OD)	5
Asphyxia by gas/hood	1
Jump from Height	4
Knife	3
Carbon Monoxide (CO)	3
Poison	1
	80

Monthly Breakdown

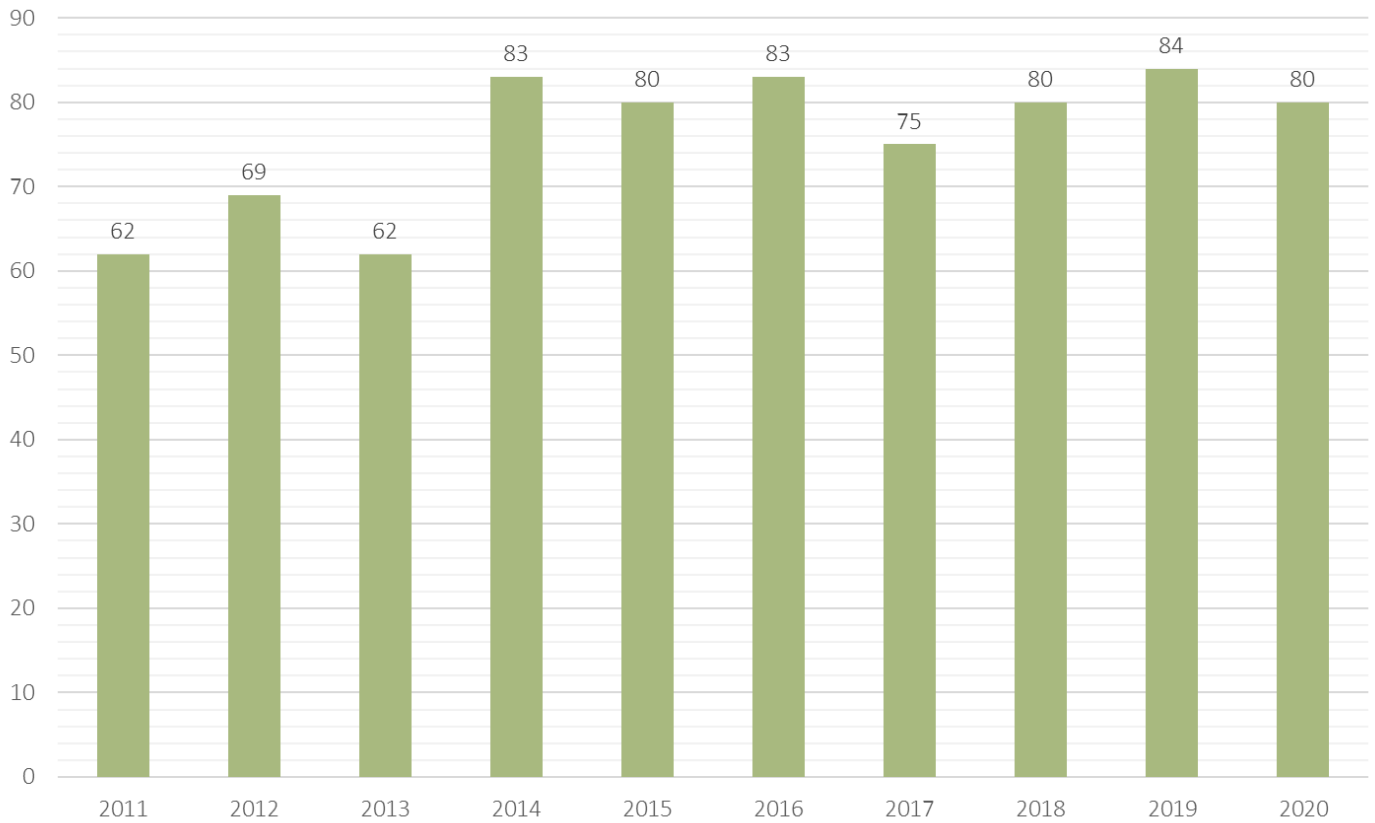
Jan	5
Feb	7
Mar	7
Apr	10
May	6
Jun	7
July	9
Aug	11
Sept	4
Oct	4
Nov	4
Dec	6
	80

Mental Health/Suicide Notes

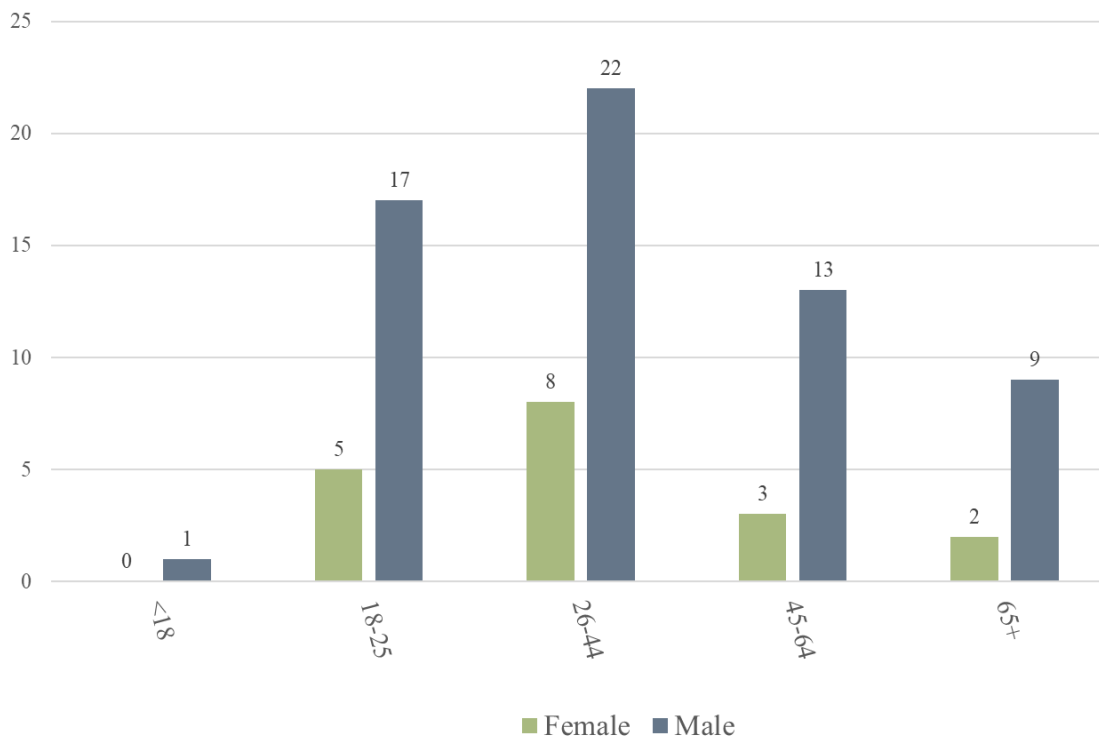
Left note or other message: 20/80 (25%)

Prior ideation or attempts: 14/80 (18%)

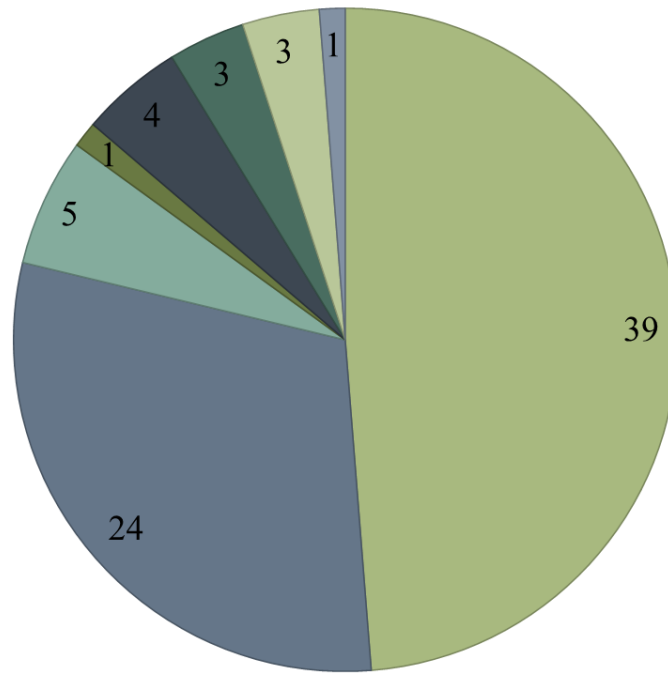
Suicide Totals - Last 10 Years: 2011 - 2020



2020 Suicides by Age and Gender Distribution

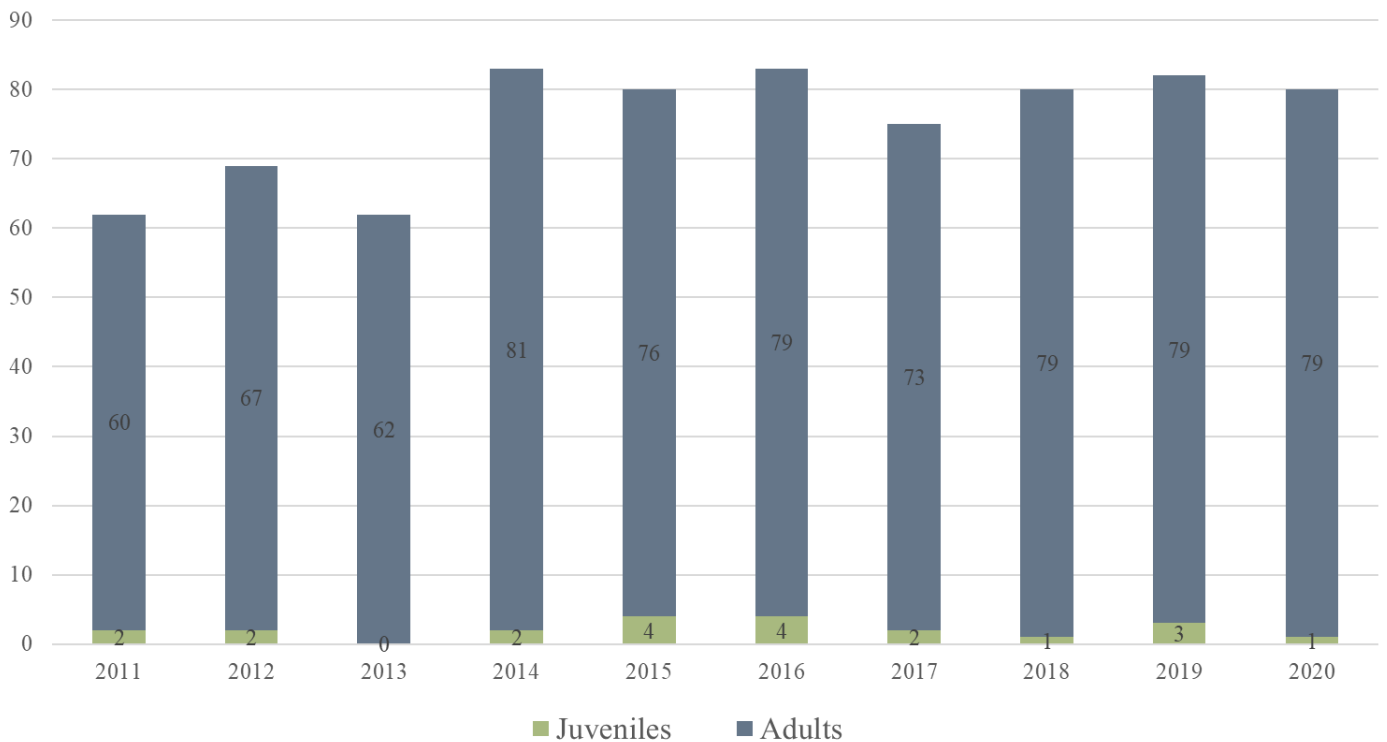


2020 Suicides Distribution by Mechanism

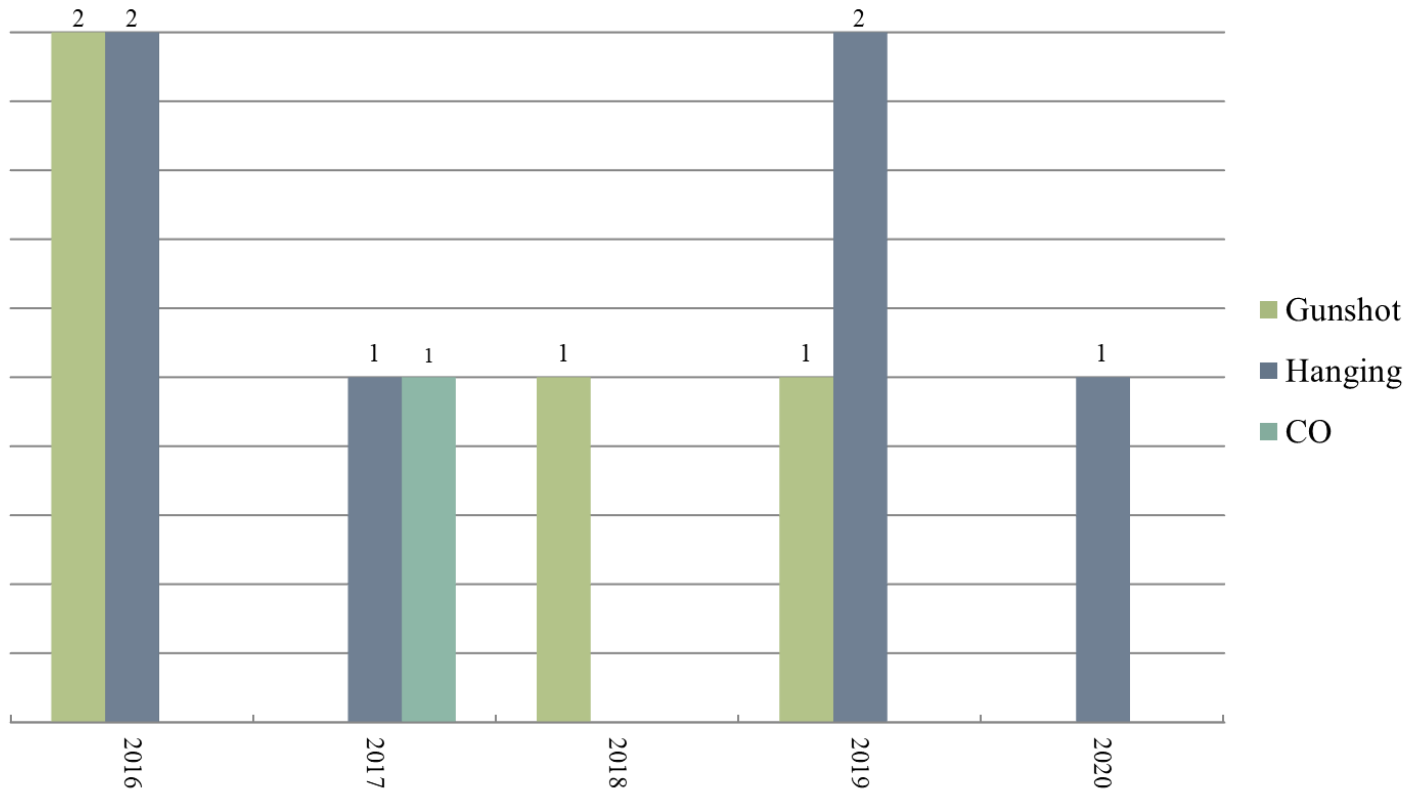


- Gunshot
- Hanging
- Overdose
- Asphyxia-Gas/Hood
- Jump from Height
- Knife
- Carbon Monoxide
- Poison

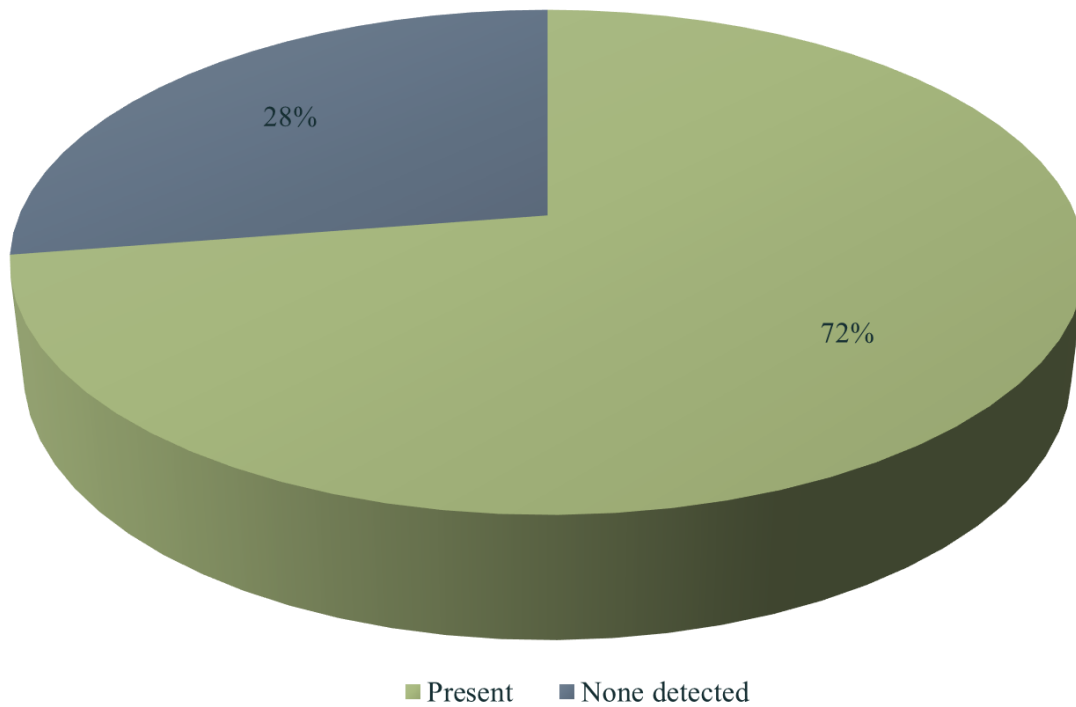
Juvenile (<18) vs. Adult Suicides, 10 Years: 2011 - 2020



Mechanism of Juvenile Suicides—5 Years: 2016 - 2020



Alcohol and/or Drug-Related Suicides 2020



DRUGS AND ALCOHOL IN SUICIDE DEATHS – 2020
TOTAL: 40 out of 80 (50%)

#	GENDER	AGE	MODE	ALCOHOL	PRIMARY DRUG(S) PRESENT
1	Female	58	CO	.020	Amphetamine
2	Male	67	GSW		
3	Female	57	OD		Morphine, Hydrocodone, Oxycodone
4	Female	24	GSW		THC
5	Male	43	Hanging		
6	Male	38	Hanging	.198	
7	Female	44	GSW		THC
8	Male	16	Hanging		THC
9	Male	21	GSW	.060	Alprazolam, THC, Methamphetamine
10	Male	86	CO		Temazepam
11	Female	25	OD		Olanzapine, Gabapentin, Mirtazapine, THC
12	Male	25	GSW		Cocaine, THC, Benzoyllecgonine
13	Male	31	Hanging	.269	
14	Male	69	GSW		
15	Male	49	GSW		Steroids
16	Male	40	GSW	.183	
17	Male	42	GSW		
18	Male	32	GSW		THC
19	Female	20	OD		Citalopram/Escitalopram, Propranolol
20	Female	41	GSW		
21	Male	25	GSW	.168	THC
22	Male	48	GSW	.184	
23	Male	40	Hanging	.069	THC
24	Female	23	Hanging	.224	
25	Male	20	GSW		LSD
26	Female	25	GSW	.019	Clonazepam
27	Male	65	Hanging		
28	Male	45	GSW	.118	Amphetamine

DRUGS AND ALCOHOL IN SUICIDE DEATHS – 2020
TOTAL: 40 out of 80 (50%)

#	GENDER	AGE	MODE	ALCOHOL	PRIMARY DRUG(S) PRESENT
29	Male	59	GSW	.083	
30	Male	24	Hanging	.152	
31	Male	78	GSW		
32	Male	34	OD	.070	Oxycodone
33	Male	23	GSW		THC
34	Male	32	Hanging	.130	
35	Male	25	Hanging	.019	
36	Female	66	GSW		
37	Male	24	Hanging	.337	Diazepam
38	Female	32	Hanging	.154	Diazepam, Cocaine
39	Male	31	GSW		THC
40	Male	42	GSW	.179	
41	Male	34	GSW		
42	Male	23	GSW	.280	THC
43	Male	33	Hanging	.029	Methamphetamine
44	Female	48	Knife		THC, Hydroxyzine, Cyclobenzaprine
45	Male	36	GSW	.187	Amphetamine, THC, Hydrocodone
46	Male	42	Hanging	.038	Methamphetamine, THC
47	Male	80	GSW		Oxycodone
48	Male	20	Hanging	.143	THC
49	Male	81	GSW		Phenobarbital
50	Male	35	GSW	.074	Amphetamine
51	Female	38	Jump		THC
52	Female	27	Hanging		Methamphetamine, Buprenorphine
53	Male	25	Jump		
54	Male	28	GSW		Clonazepam, Alprazolam, THC
55	Male	56	Knife		
56	Male	52	Hanging		THC
57	Male	23	Jump	.074	Lamotrigine

DRUGS AND ALCOHOL IN SUICIDE DEATHS – 2020
TOTAL: 40 out of 80 (50%)

#	GENDER	AGE	MODE	ALCOHOL	PRIMARY DRUG(S) PRESENT
58	Male	33	GSW	.196	THC
59	Male	35	GSW		THC
60	Female	32	Asphyxia		Methamphetamine, Methadone, EDDP
61	Male	64	GSW		
62	Female	24	GSW		
63	Male	47	GSW		Midazolam
64	Female	70	Poison		
65	Male	30	GSW	.186	THC
66	Male	24	Jump		
67	Male	46	Knife		THC
68	Female	31	Hanging		
69	Male	41	Hanging	.066	
70	Male	56	GSW	.058	
71	Male	68	GSW		
72	Male	59	Hanging		
73	Male	65	OD		Morphine, Oxycodone, Fentanyl, Duloxetine
74	Male	55	GSW		Hydrocodone
75	Male	46	Hanging		
76	Female	21	Hanging		THC
77	Male	23	GSW		
78	Male	37	CO		
79	Male	23	Hanging	.186	THC
80	Female	36	Hanging		

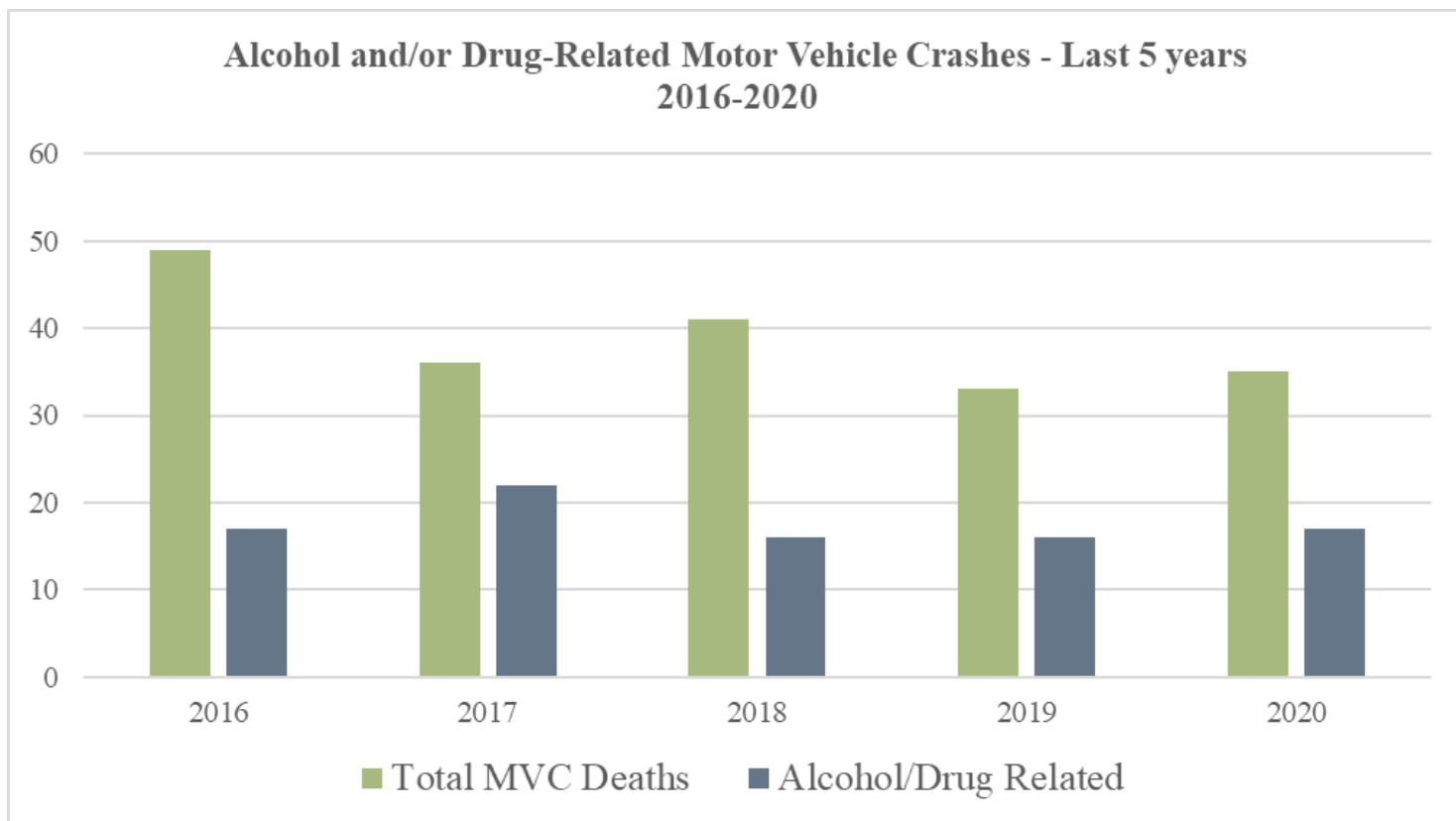
Abbreviations used:

- CO = Carbon Monoxide
- GSW = Gunshot Wound
- OD = Overdose
- Asphyxia (other than hanging = huffing, mechanical, bag over head, etc.)

2020 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 2020, 140 deaths were certified in Larimer County as accidents.

35 of these deaths were from motor vehicle (or traffic) crashes (MVCs). Our statistical information will deal first with the MVCs. The other 104 accidental deaths will be discussed on page 26.



In 2020, there were 35 motor vehicle *fatalities* in 33 *crashes*.

Out of the 33 crashes, 17 drivers of involved vehicles (52%) were considered to be under the influence of alcohol and/or drugs.

MOTOR VEHICLE CRASH FATALITIES (35)

Age		Decedent's Position in Vehicle	
Average Age:	44.5	Driver:	26
Juveniles (<18):	1	Passenger:	5
Adults:	34	Unknown:	0
Youngest:	17	Pedestrians hit by vehicle:	4
Oldest:	84	Bicyclists:	0

Safety Measures by Decedents

Seatbelt used:	11
Seatbelt NOT used:	11
N/A: ATV, scooter, or motorcycle:	9
N/A: Pedestrians/bicyclists hit:	4
Unknown:	0

Weather Related Adverse Road Conditions

Snow, Ice, and/or Strong Wind:	3
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Time of Day:

Unknown AM:	0
Unknown PM:	0
00:01 - 06:00:	5
06:01 - 12:00:	5
12:01 - 18:00:	15
18:01 - 00:00:	10

Number of vehicles involved:

One vehicle only:	19
Two or more vehicles:	16

DRUG & ALCOHOL-RELATED MOTOR VEHICLE CRASHES (MVCs) 2020

Of the 33 TOTAL Motor Vehicle Crashes (with 35 fatalities), 17 deaths involved drivers who tested positive for alcohol and/or drugs

INCIDENT #	GENDER	AGE	# OF VEHICLES INVOLVED	DRIVER(S) POSITIVE FOR DRUGS/ALCOHOL
1	M	38	1	N
2	M	83	1	N
3	M	24	1	Y
4	F	69	1	N
5	F	17	2	N
6	F	25	2	Y
7	M	29	2	N
8	F	31	2	Y
9	M	48	1	N
10	F	22	1	Y
11	M	54	2	Y
12	M	36	1	Y
13	M	37	2	Y
14	M	68	2	N
15	M	45	1	Y
16	M	42	2	Y
17	M	69	1	N
18	M	22	1	Y
19	M	67	1	N
20	M	67	2	N
21	M	21	1	Y
22	F	52	1	N
23	F	44	3	N
24	M	25	1	N
25	F	39	1	Y
26	M	37	2	N
27	M	72	1	Y
28	M	64	1	Y
29	M	22	3	Y
30	M	84	2	N
31	M	51	2	Y
32	M	48	2	N
33	M	80	2	N
34	M	29	1	Y
35	M	26	1	N

2020 ACCIDENTS (Excluding Motor Vehicle Crashes)

In 2020, Larimer County had 104 accidental deaths that were not traffic-related. They are classified as follows:

Falls:	38
Drug Overdose (OD):	49
Choking on food/foreign object:	1
Asphyxia (mechanical, positional):	5
Drowning:	3
Blunt Force:	3
Impalement:	1
Hypothermia/Hyperthermia:	3
Fire/Thermal injury:	1

Age:

Average Age:	54
Adults:	102
Juveniles (<18):	2

Alcohol and/or drugs found in system: 64/104 (62%)

2020 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 2020, there were 7 homicide victims in Larimer County.

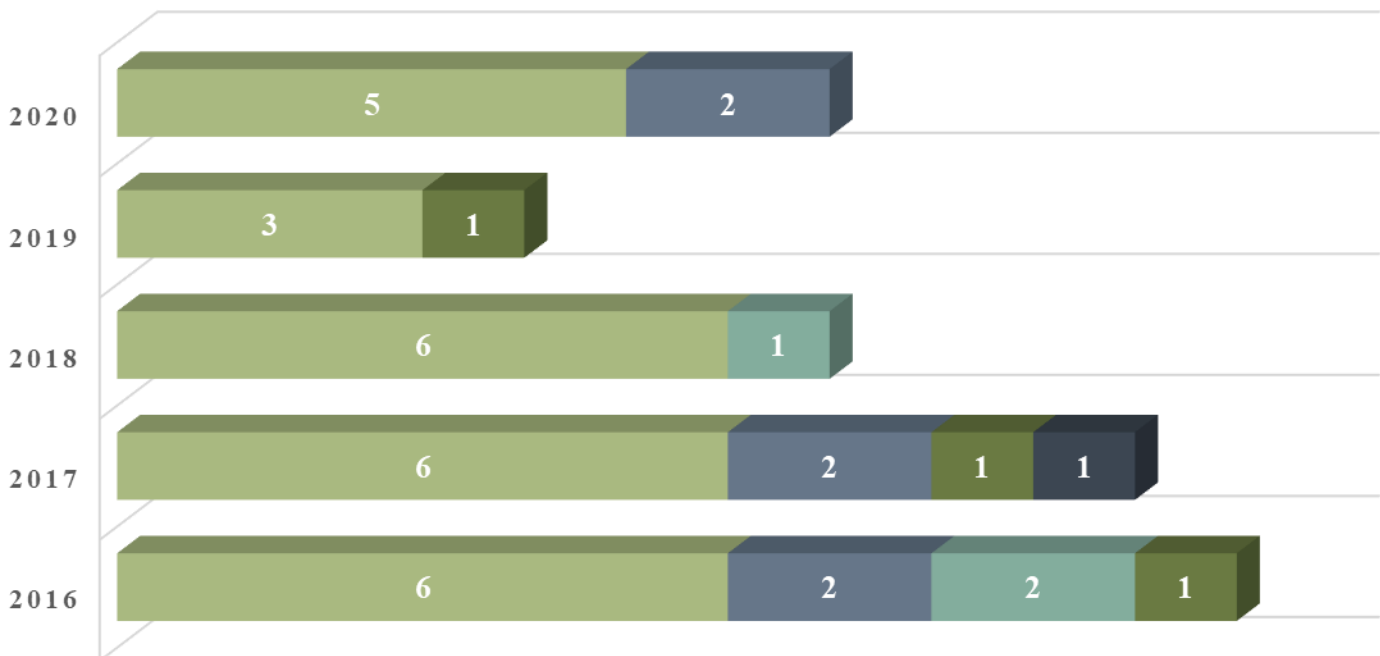
AGE		RACE		GENDER	
Average Age:	34	White:	6	Male:	6
Adult:	6	Hispanic:	0	Female:	1
Juvenile:	1	Mixed/Other:	1		

****Alcohol/Drug-Related ****

We do not report on alcohol or drugs in our homicide statistics, as we do not want any positive results to imply fault on the part of the victim. The perpetrator is presumed innocent until proven guilty and is HIPAA-protected.

HOMICIDES - LAST 5 YEARS 2016 - 2020

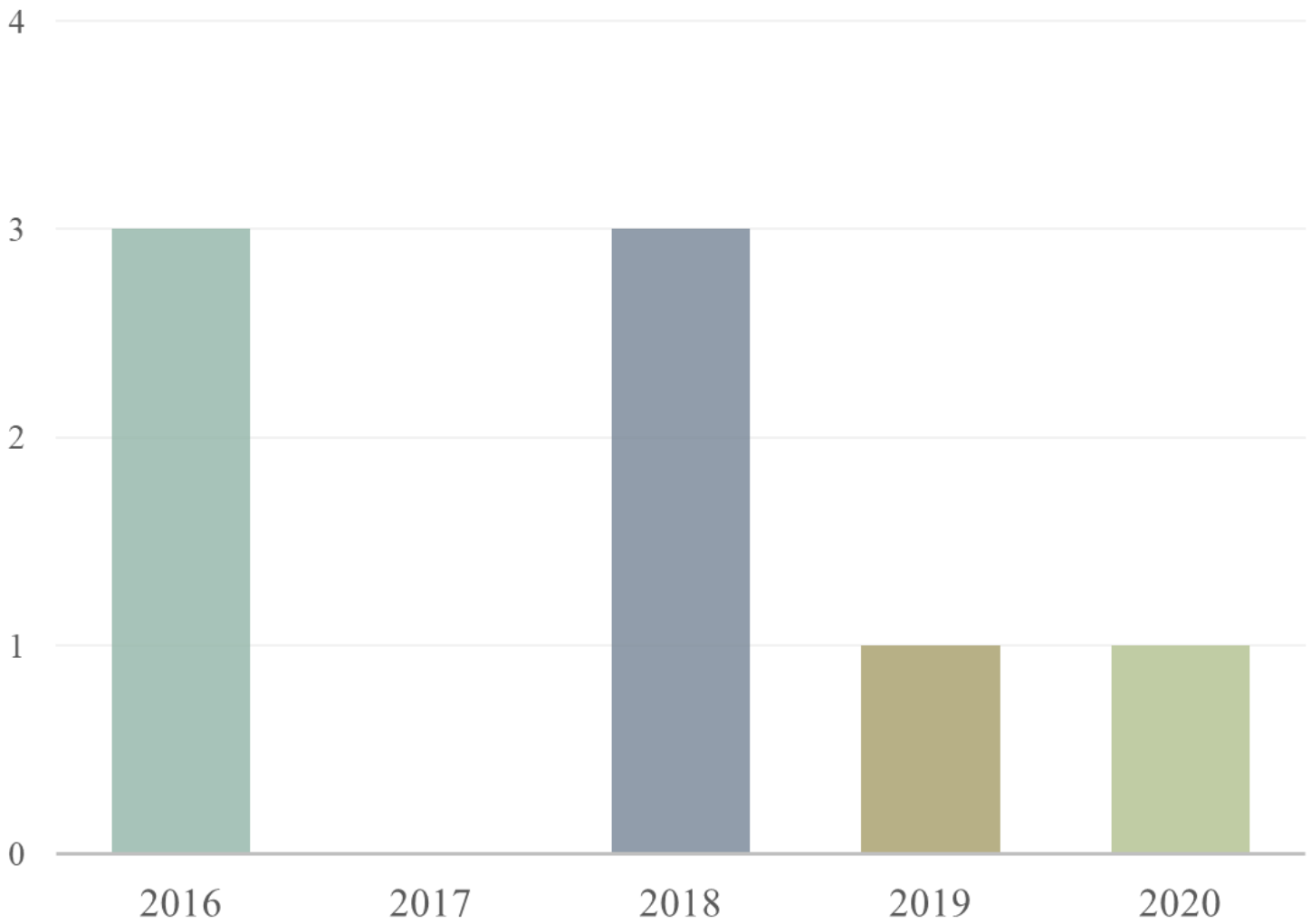
■ GSW
 ■ Stab
 ■ Blunt Trauma
 ■ Aspyxia
 ■ Drowning



GUN-RELATED DEATHS IN LARIMER COUNTY

2020 Total County Deaths:	2909	
Total Gun Deaths:	44	(1.5% of all deaths)
<i>Suicides:</i>	39	(39 adults)
<i>Accidents:</i>	0	
<i>Homicides:</i>	5	(4 adults)
<i>Undetermined:</i>	0	
<hr/>		
2019 Total County Deaths:	2632	
Total Gun Deaths:	39	(1.5% of all deaths)
<i>Suicides:</i>	36	(36 adults, 1 juvenile)
<i>Accidents:</i>	0	
<i>Homicides:</i>	3	(3 adults)
<i>Undetermined:</i>	0	
<hr/>		
2018 Total County Deaths:	2549	
Total Gun Deaths:	48	(1.9% of all deaths)
<i>Suicides:</i>	40	(39 adults, 1 juvenile)
<i>Accidents:</i>	2	
<i>Homicides:</i>	6	(4 adult, 2 juveniles)
<i>Undetermined:</i>	0	
<hr/>		
2017 Total County Deaths:	2554	
Total Gun Deaths:	40	(1.6% of all deaths)
<i>Suicides:</i>	33	(33 adults)
<i>Accidents:</i>	0	
<i>Homicides:</i>	6	(6 adults)
<i>Undetermined:</i>	1	(1 adult)
<hr/>		
2016 Total County Deaths:	2507	
Total Gun Deaths:	60	(2.4% of all deaths)
<i>Suicides:</i>	54	(52 adults, 2 juvenile)
<i>Accidents:</i>	0	
<i>Homicides:</i>	6	(5 adults, 1 juvenile)
<i>Undetermined:</i>	0	

**JUVENILE (<18) DEATHS FROM GUNSHOT WOUNDS
2016 – 2020**



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 homicide.

2020

Suicides	0
Accidents	0
Homicides by Juveniles	0

2015

Suicides	1
Accidents	0
Homicides by Juveniles	0

2019

Suicides	1
Accidents	0
Homicides by Juveniles	0

2014

Suicides	0
Accidents	0
Homicides by Juveniles	0

2018

Suicides	1
Accidents	0
Homicides by Juveniles	0

2013

Suicides	0
Accidents	0
Homicides by Juveniles	0

2017

Suicides	0
Accidents	0
Homicides by Juveniles	0

2012

Suicides	0
Accidents	0
Homicides by Juveniles	0

2016

Suicides	2
Accidents	0
Homicides by Juveniles	0

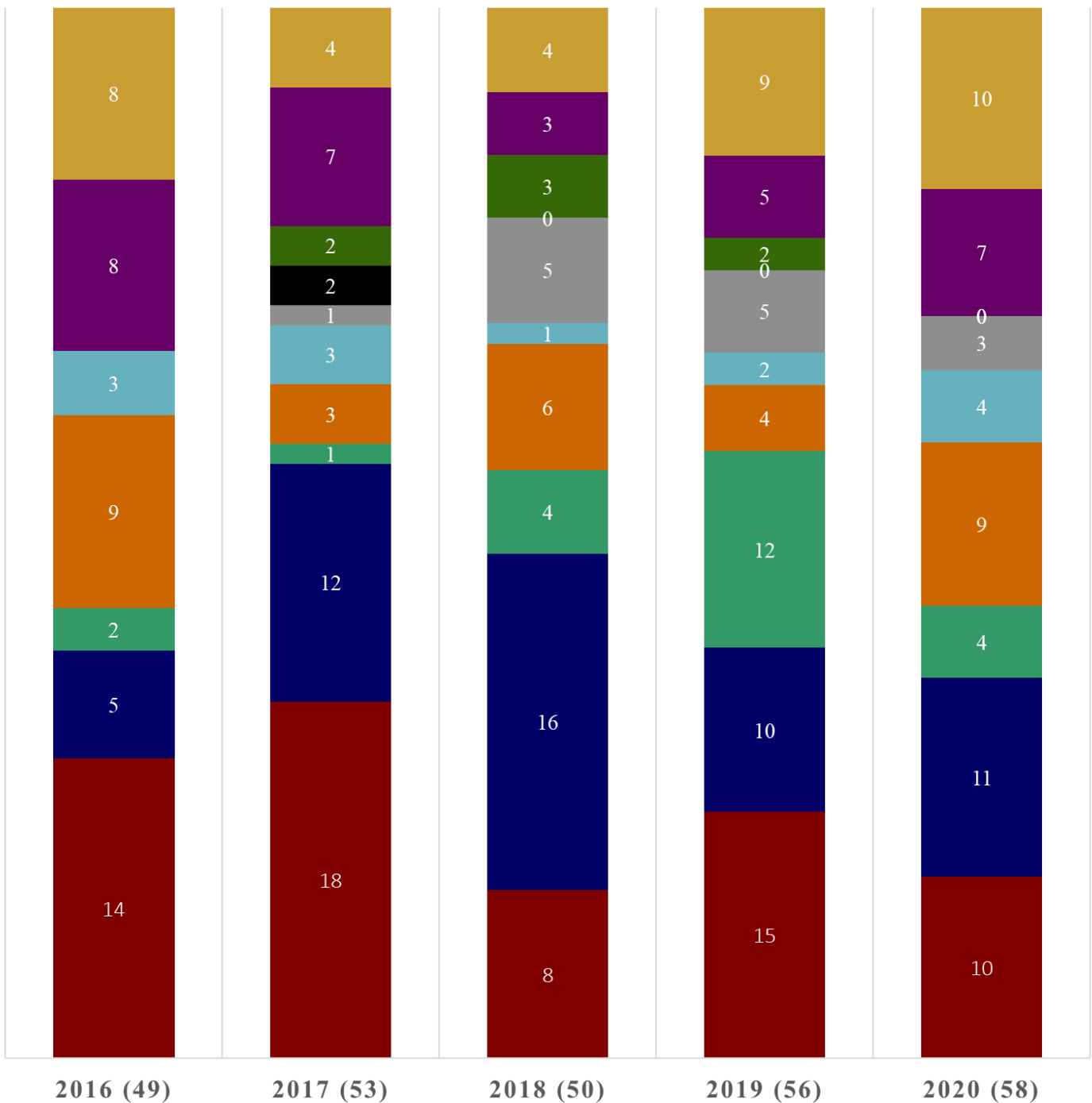
2011

Suicides	1
Accidents	0
Homicides by Juveniles	0

DRUGS OF ABUSE IN OVERDOSE DEATHS 2016 – 2020

Most overdose deaths are a result of a combination of prescriptions, over-the-counter medications, alcohol, and/or illicit drugs. We have chosen the PRIMARY drug(s) of abuse in each death.

- Rx Opiates
- Rx/Mixed Rx
- Alcohol (and meds)
- Heroin
- Methamphetamine
- Cocaine present
- Inhalants
- OTC meds
- Meth+heroin
- Fentanyl



**DRUGS OF ABUSE USED IN OVERDOSE DEATHS 2020
(Total 58)**

Accidents (49)	Gender	Age	Alcohol	Drug #1	Drug #2 or more
1	M	35		Cocaine	Heroin
2	F	17		Oxycodone	
3	M	54		Methadone	
4	M	21		Fentanyl	Cocaine
5	M	44		Heroin	Methamphetamine
6	F	41		Doxylamine	Loperamide, Alprazolam
7	F	30		Heroin	
8	M	29		Heroin	Methamphetamine
9	M	34		Fentanyl	
10	M	29		Heroin	
11	M	39		Fentanyl	Cocaine
12	F	28	.018	Heroin	
13	M	39		Cocaine	Heroin
14	M	26	.030	Fentanyl	Cocaine
15	F	62		Methadone	Methamphetamine
16	M	44		Fentanyl	
17	M	34		Heroin	
18	M	52	.088	Oxycodone	Alcohol
19	M	30		Cocaine	Fentanyl
20	M	45	.107	Heroin	Methamphetamine
21	M	61		Hydrocodone	Heroin, Fentanyl
22	F	59		Oxycodone	Alprazolam, Fentanyl
23	M	49	.022	Heroin	
24	F	54		Fentanyl	Citalopram, Cyclobenzaprine
25	M	44		Fentanyl	Methamphetamine
26	M	26		Mitragynine	
27	M	47		Fentanyl	Methamphetamine
28	M	52	.447	Alcohol	Chlordiazepoxide
29	M	40		Fentanyl	

**DRUGS OF ABUSE USED IN OVERDOSE DEATHS 2020
(Total 58)**

<u>Accidents (49)</u>	Gender	Age	Alcohol	Drug #1	Drug #2 or more
30	F	54		Diazepam	Clonazepam
31	M	61		Codeine	Oxycodone, Hydrocodone
32	M	48		Methamphetamine	
33	M	24		Cocaine	
34	M	26	.011	Cocaine	
35	M	20	Y	Benzodiazepines	
36	M	33		Heroin	
37	M	30		Fentanyl	
38	M	54		Fentanyl	Methamphetamine, Cocaine
39	M	42		Heroin	Methamphetamine
40	F	37		Methamphetamine	
41	F	30		Heroin	Methamphetamine
42	F	38		Propranolol	Verapamil
43	M	39		Methamphetamine	
44	M	64		Oxycodone	
45	M	40		Oxycodone	Xanax
46	F	40		Methadone	
47	F	29		Fentanyl	Methamphetamine, Cocaine
48	M	22	.076	Heroin	
49	M	20		Fentanyl	
<u>Suicides (5)</u>					
1	F	57		Topiramate	Bupropion, Hydrocodone
2	F	25		Olanzapine	Mirtazapine, Gabapentin
3	F	20		Citalopram	Propranolol
4	M	65		Fentanyl	Oxycodone, Codeine
5	M	34	.070	Oxycodone	
<u>Undetermined (4)</u>					
1	F	32		Heroin	Methamphetamine
2	M	35		Quetiapine	Olanzapine, Clonazepam
3	F	50		Clozapine	Lamotrigine
4	M	28		Methamphetamine	Heroin, Codeine

CHILD DEATHS BY AGE, MANNER, AND MODE
Last 5 years - < 18 years of age

2020 (11 Total)	Natural	Accident	Suicide	Homicide	SUIDS & Other Undetermined
Fetal demise up to < 1 mo	6				1 - Unknown
1 mo < 1 yr	1	1			1 - Unknown
1 yr < 4 yrs				1	
4 yrs < 9 yrs					
9 yrs < 14 yrs					
14 yrs < 18 yrs					
TOTALS	7	1		1	2
2019 (16 Total)	Natural	Accident	Suicide	Homicide	SUIDS & Other Undetermined
Fetal demise up to < 1 mo	1				1 – Unknown
1 mo < 1 yr	3	3			1 – SUIDS vs Hypoxic Encephalopathy
1 yr < 4 yrs		1			
4 yrs < 9 yrs	1	1			
9 yrs < 14 yrs			2		1 – Possible Accident
14 yrs < 18 yrs			1		
TOTALS	5	5	3		3
2018 (18 Total)	Natural	Accident	Suicide	Homicide	SUIDS & Other Undetermined
Fetal demise up to < 1 mo	5				
1 mo < 1 yr		1 - Co-Sleep/ Overlay			1 – SUID
1 yr < 4 yrs					
4 yrs < 9 yrs		1-MVA			
9 yrs < 14 yrs	1	1-Bike vs. Object 1-MV vs. Ped	1-GSW		
14 yrs < 18 yrs	1	1-Drowning		2-GSW	
TOTALS	7	7	1	2	1

CHILD DEATHS BY AGE, MANNER, AND MODE
Last 5 years - < 18 years of age

2017 (19 Total)	Natural	Accident	Suicide	Homicide	SUIDS & Other Undetermined
Fetal demise up to < 1 mo	2				
1 mo < 1 yr		2-Co-Sleep/ Overlay		1- Smothering	1-SUID
1 yr < 4 yrs	2	1-Drowning			1-SUID vs. Vaccine Reaction
4 yrs < 9 yrs	1	1-Drowning			
9 yrs < 14 yrs	1				
14 yrs < 18 yrs	1	1 – OD 2 - MVC	1-Hanging 1-CO		
TOTALS	7	7	2	1	2
2016 (18 Total)	Natural	Accident	Suicide	Homicide	SUIDS & Other Undetermined
Fetal demise up to < 1 mo	4				
1 mo < 1 yr				1-Blunt Trauma	
1 yr < 4 yrs	2				
4 yrs < 9 yrs		1-Drowning			1-Undetermined (Natural vs. Homicide)
9 yrs < 14 yrs	1	1-Drowning 1-Bike vs. MV			
14 yrs < 18 yrs		1 - OD	2-GSW 2-Hanging	1-GSW	
TOTALS	7	4	4	2	1

UNIDENTIFIED REMAINS

The Larimer County Medical Examiner's Office currently has four (4) deceased individuals or remains who are unidentified. These cases are described below, oldest to most recent.

1. Unidentified Hispanic Male: Date of Death: 09/16/94

Approximate Age: 25-35

Height: 5'10"

Weight: 140 lbs.

Hair: Black, wavy, medium length

Eye Color: Brown

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/ white plaid shirt; red long-sleeved sweatshirt; khaki trousers; black/ white canvas and vinyl athletic shoes. 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 Male: Date of Death: Approximately 07/06/97

Approximate Age: 20-30

Height: 5'11"

Weight: 150 – 170 lbs.

Hair: Sandy Brown, long, wavy; receding hairline; chin beard or goatee

Eye Color: Unknown

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

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

Clothing: 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.

UNIDENTIFIED REMAINS

3. Unidentified African American Female

Date of Death: 07/11/11



Approximate Age: Approximately 60 (55 – 70)

Height: 5'6" **Weight:** 211 lbs.

Hair: Gray/ black with more white

around forehead/ face; curly **Eye Color:** Brown

Scars/ Tattoos: Round scar beneath chin; scar on lower abdomen (possible past C-section)

Clothing: Black paisley patterned blouse; black pants

Dental: Natural w/ partial upper denture

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

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.

4. Unidentified Native American Remains

Date of Report: 10/10/18

The Department of Natural Resources at Colorado State University (CSU) reached out to the Coroner's Office a possible gravesite with visible bones that were found in the Red Mountain Open Space, in an area recently purchased by Larimer County. The bones were known and reported to the county by the previous landowner who believed them to be Native American. CSU Archaeologists then worked in tandem with the state, as well as the Larimer County Coroner's Office to document and determine the forensic or historic nature of the site. There were no visible historic artifacts, clothing or tissues around the bones. All offices involved agreed the site was not of recent forensic value and believed the site to be Native American. Arrangements were made with local tribal officials and it was decided to leave the bones in place as they are not near any public recreational areas. The site was documented with our Office, Larimer County Parks, CSU and the CO State Archaeologist records for future reference.

If you have any information concerning any of the above individuals, please contact the Larimer County Medical Examiner's Office at 970-498-6161. You can remain anonymous.

You can also e-mail us at: larimercoroner@larimer.org

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 decedents listed,
please contact our Office at 970-498-6161 or the appropriate Funeral Home.
You may also email: larimercoroner@larimer.org. You may remain anonymous.

NAME	Date of Death	AGE	MANNER	LCCO#	Funeral Home
<u>1997</u>					
Un-ID'd White male	07/06/1997	N/A	Undetermined	97C-337	Allnutt-FTC (Reager's)
<u>2004</u>					
SMITH, James	07/01/2004	41	Accident (MVC)	04C-368	Bohlender
<u>2006</u>					
MCCLENNY, "Jack"	01/07/2006	80	Natural	06C-021	Allnutt- FTC
<u>2008</u>					
TOWNES, Sterling	10/03/2008	45	Natural	08C-676	Kibbey's
ELLSWORTH, Shawk	11/20/2008	58	Accident (Fall)	08C-814	Goes (sister?)
<u>2009</u>					
YODER, Karl	09/27/2009	58	Accident (Burn)	09C-678	Viegut
DORSEY, Robert	12/14/2009	65	Natural	09C-879	Vessey
<u>2011</u>					
Un-ID'd Black female	07/11/2011	Approx 60's	Suicide (OD)	11C-558	Bohlender
DAVIS, Herbert	09/12/2011	65	Natural	11C-748	Viegut
<u>2012</u>					
ROBISON, Randy K. (aka MILLER)	01/29/2012	50	Suicide (Cutting)	12C-097	Allnutt- FTC
MULLANEY, John F.	03/08/2012	56	Accident (Fall)	12C-214	Bohlender
FROST, Jack	09/26/2012	48	Suicide (Train)	12C-769	Allnutt- FTC
JACKSON, Duane	09/20/2012	67	Natural	12C-786	Allnutt- FTC
EASTBURN, Carl B.	09/27/2012	74	Suicide (GSW)	12C- 792	Kibbey's
<u>2013</u>					
TROUT, Gary	11/22/2013	66	Natural	13C-1053	Allnutt-Lvld
<u>2014</u>					
PALMER, Terry (aka: Terry VLICK)	05/23/2014	64	Natural	14C-452	Bohlender
<u>2015</u>					
GIDEON, Michael	08/23/2015	64	Natural	15C-849	Goes

PUBLIC ADMINISTRATOR CASES
No Next-of-Kin Found at Time of Release

NAME	Date of Death	AGE	MANNER	LCCO#	Funeral Home
<u>2016</u>					
LONGHIBLER, Spencer	06/28/2016	63	Accident	16C-564	Allnutt-FTC
CONDON, Brian	08/20/2016	55	Suicide	16C-780	Allnutt-Lvld
KAPLAN, Joel	09/13/2016	59	Natural	16C-846	Viegut
<u>2017</u>					
MUTTER, Kathy A.	02/13/2017	51	Natural	17C-166	Vessey
GARNER, Joel	10/02/2017	54	Accident	17C-914	Bohlender
<u>2018</u>					
GAWRLYCZIK, Richard	02/24/2018	68	Natural	18CC0216	Bohlender
MARTINEZ, Ronald C.	03/01/2018	66	Natural	18CC0270	Bohlender
BLACKWELL, Phillip R.	08/25/2018	68	Suicide	18CC0820	Allnutt-FTC
<u>2019</u>					
WEST, Kelly James	12/31/2018	53	Natural	19CC0015	Allnutt-FTC
DIAMOND, Thomas R.	01/20/2019	80	Natural	19CC0087	Allnutt-FTC
BECKEL, Melvin	06/17/2019	53	Natural	19CC0616	Viegut
HOOVER, Michael J.	08/12/2019	65	Natural	19CC0842	Allnutt-Lvld
SOMMERS, Harold L.	04/12/2019	60	Natural	19CC0409	Goes
<u>2020</u>					
MAZIK, Lee	12/23/2019	58	Natural	20CC0011	Allnutt-FTC
BAIRD, Dwight	01/21/2020	58	Natural	20CC0087	Northern CO Crematory
SAMORA, Anthony	04/09/2020	60	Natural	20CC0400	Goes
SPARKS, James	04/25/2020	73	Natural	20CC0541	Allnutt-EP

EXHUMATIONS

NAME	Date of Death	AGE	MANNER	LCCO#	Date Exhumed
HETRICK, Peggy L.	02/11/1987	37	Homicide	87C-049	05/14/1998
DECKER, Donald J.	07/06/2008	22	Undetermined	08C-459	03/15/2011

ORGAN AND TISSUE DONATION

There are six (6) hospitals within the borders of Larimer County: UCHealth Poudre Valley Hospital in Ft. Collins, UCHealth at Medical Center of the Rockies in Loveland, Banner Health Center - Ft. Collins Campus, Banner Health at McKee Medical Center in Loveland, Estes Park Medical Center in Estes Park, and Northern Colorado Rehabilitation Hospital in northern Johnstown. 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 donor, extended postmortem intervals, disease process, or substance use; and on rare occasions our Office, the District Attorney, or law enforcement may not wish to allow donation to occur, or may place certain restrictions on a donation, for investigative or legal reasons. This is usually in cases of homicide or suspected homicide, and infant deaths where organ and/or tissue retrieval could interfere with autopsy findings and compromise a criminal investigation.

Since the majority of hospital deaths do not fall under the Medical Examiner's jurisdiction, our Office is not involved with all donation requests. Therefore, the most accurate and up-to-date donation statistics are available on the Donor Alliance and Rocky Mountain Lions Eye Bank websites: www.donoralliance.org; <https://corneas.org/>.

THE BUDGET – 10-COUNTY COMPARISON

The Larimer County Coroner/Medical Examiner’s Office duties are mandated by Colorado Statute and the office is funded through the Larimer County Commissioners by the citizens of Larimer County. Staff salaries are set by the County and salaries follow the standard merit and yearly cost-of-living raises that are the same across all County departments. Since the Medicolegal Investigators are considered law enforcement, the salaries coincide with other law enforcement salaries.

As the population of Larimer County increases, so must our budget. At least two Investigators must be “on call” at all times and we occasionally need to call out a third and a fourth. Due to television and other media, the public has come to expect a thorough, professional, timely investigation and autopsy when a death occurs. We strive to provide the best investigation and public service possible.

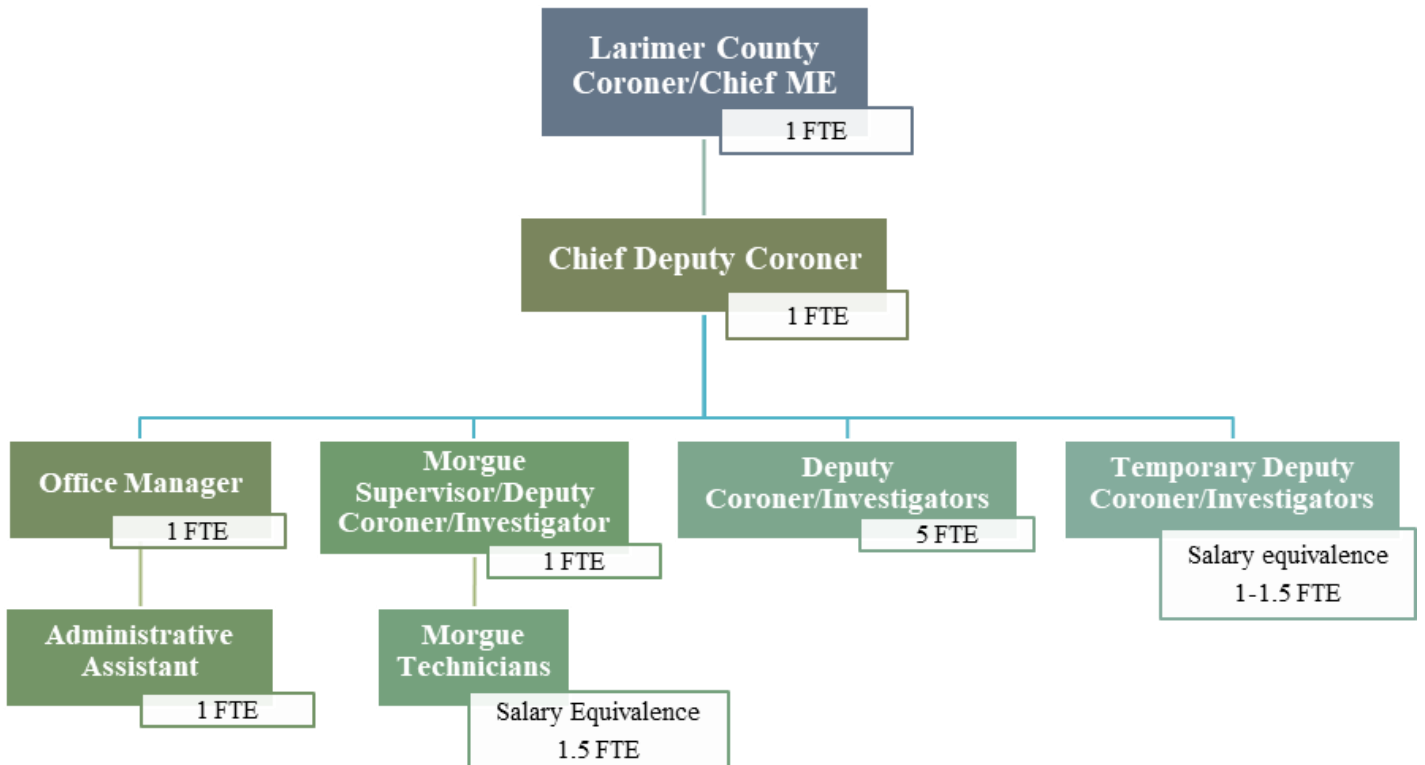
All County budgets are Public Record and Larimer County’s be accessed through the County website, www.larimer.org/budget.

Below are the results of a 10-County Budget Survey of Coroner and Medical Examiner Offices in Colorado.

2018	County	Coroner or Medical Examiner System	Owens and/or operates autopsy facility	Budget	Full-Time Employees	Total Number of Deaths Reported/ Autopsies (Approx)	Percent of Deaths Reported Requiring Autopsy (Approx)
1	El Paso	ME	Y	\$2,980,002	26	6,037 / 920	17.6%
2	Arapahoe	ME	Y	\$1,954,591	14	4,145/493	11.5%
3	Jefferson	C	Y	\$2,468,000	+3 ¹⁴ contract	5,603 / 481	8.5%
4	Adams	C	Y	\$2,187,000	15	3,937 / 629	16%
5	Larimer	ME	Y	\$1,619,591	11	2,909 / 223	8%
6	Boulder	C	Y	\$1,450,107	12	3,077 / 289	9.3%
7	Douglas	C	Y	\$1,422,179	9	2,066 / 206	10.6%
8	Weld	ME	Y	\$1,594,945	12	1,658 / 241	13.6%
9	Pueblo	C	N	\$878,000	3	1,179 / 285	14.6%
10	Mesa	ME	Y	\$597,650	3	917 / 140	7.6%

Ranked by population, Denver not included.

2020 LARIMER COUNTY CORONER'S OFFICE ORGANIZATIONAL CHART



Total FTE's = 7 plus 2 Temporary Investigators