

2015 ANNUAL REPORT



Office of the Larimer County Coroner Medical Examiner

James A. Wilkerson IV, MD
Coroner
Chief Medical Examiner

495 N. Denver Ave.
Loveland, CO 80537

larimercoroner@larimer.org





JAMES A. WILKERSON IV, M.D.
CORONER AND CHIEF MEDICAL EXAMINER



OFFICE OF THE LARIMER COUNTY CORONER/ MEDICAL EXAMINER
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. 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

TABLE OF CONTENTS

Letter to Citizens ----- 1

Mission Statement and Function of the LCMEO ----- 3

Explanation of Data ----- 7

General Information and Overall Death Statistics ----- 8

Suicide Statistics ----- 11

Accident Statistics ----- 22

Homicide and Gun-Related Statistics ----- 27

Overdose Deaths ----- 32

Child Deaths ----- 36

Unidentified Remains ----- 40

Public Administrator Cases & Exhumations----- 43

Organ and Tissue Donations ----- 45

Budget ----- 46

Staff Organizational Chart ----- 47

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 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. 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. 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 250 requirements, which include that the Office is run by a Forensic Pathologist/ Medical Examiner, and that at least one Investigator be certified through the American Board of Medicolegal Death Investigators. We have maintained NAME Accreditation continuously since 2002.

In November, 2014, James A. Wilkerson IV, MD was elected as Coroner of Larimer County after the retirement of Dr. Patrick C. Allen who served as Larimer County Coroner for 35 years. Dr. Wilkerson has over 25 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 in the Forensic Pathology partnership are Michael A. Burson, PhD, MD, Dawn Holmes, MD, and John D. Carver, MD, each of whom is also a Forensic Pathologist/ Medical Examiner, as well as Dr. Patrick Allen who will continue to serve part time as a Deputy Coroner/ Forensic Pathologist.

The Larimer County Coroner/Medical Examiner's staff includes a Chief Deputy Coroner/Chief Investigator and five 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.

Duties of the Medical Examiner's Office are dictated by Colorado Revised Statutes and the National Association of Medical Examiners (NAME), 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;

MISSION STATEMENT AND FUNCTION OF THE MEDICAL EXAMINER'S OFFICE

- 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.

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.

MISSION STATEMENT AND FUNCTION OF THE MEDICAL EXAMINER'S OFFICE

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 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 2015, our Medico-legal Investigators conducted numerous 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
- 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

**MISSION STATEMENT AND FUNCTION OF THE
MEDICAL EXAMINER'S OFFICE**

- 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.

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 2015 calendar year. Many of the charts and graphs include data from the last 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 325,000 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 2015.

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)

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. In 2015, we investigated 962 Natural deaths.

SUICIDE: Death as a result of a purposeful action set in motion (explicit or implicit) to end one's life. In 2015, there were 80 deaths certified as Suicides.

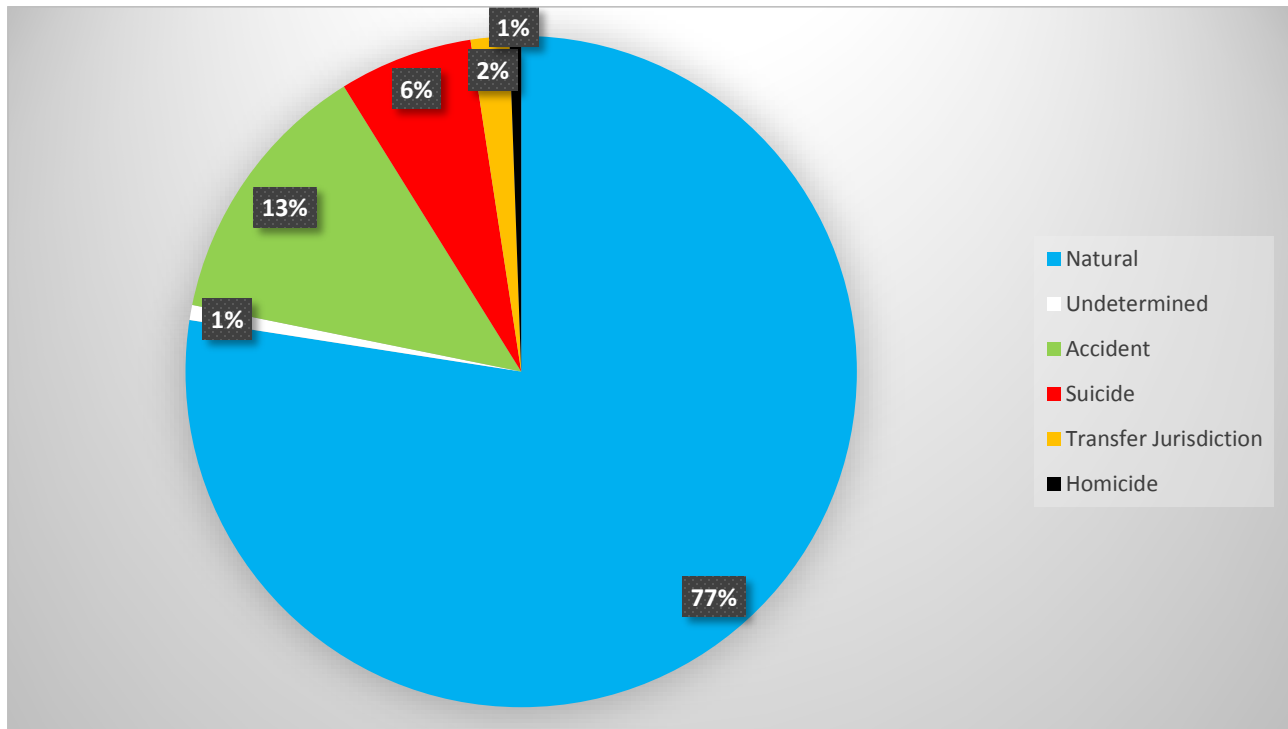
ACCIDENT: Death other than natural where there is no evidence of intent; i.e. an unintentional event or chain of events. This category includes most motor vehicle accidents, falls, drowning, accidental drug overdoses, drug reactions, etc. In 2015, we had 161 Accidents, 39 of which were motor vehicle fatalities.

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 2015, there were 7 Homicides in Larimer County.

UNDETERMINED: Manner assigned when there is insufficient evidence, or conflicting/ equivocal information (especially about intent), to assign a specific manner. In 2015, we had 9 deaths where Manner could not be accurately determined. These are listed as Undetermined.

TRANSFERS: We transferred jurisdiction back to the originating County where the injury occurred in 23 cases.

MANNERS OF DEATH – 2015



2015 YEAR - END STATISTICAL OVERVIEW

The Larimer County Medical Examiner's Office investigated a total of 1,242 deaths during 2015. Of these, 962 were Naturals, 161 were Accidents, 80 were Suicides, 7 were Homicides, 23 were transferred back to the County of origin, and 9 were classified as Undetermined. Of the 1,242 deaths, our 6 Medicolegal Investigators responded to and conducted complete medicolegal investigations into 428 death scenes. The remaining 814 cases where a response was not deemed necessary were home Hospice or hospital deaths falling under Coroner Statutes, but determined to be death solely from Natural causes that had 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: 161 total **95 autopsied; 3 Toxicology only**

- 43 - Drug Overdose (OD)
- 61 - Falls
- 39 - Motor Vehicle Crash (MVC)
 - 1 – Electrocutation
 - 5 - Drowning
 - 6 – Asphyxia (mechanical, positional, huffing, or auto-erotic)
 - 1 – Anaphylaxis (allergic reaction)
 - 2 – Choked on food/ foreign object
 - 2 – Hypo/ hyperthermia
 - 1 – Train vs. pedestrian

Suicides: 80 total **77 autopsied; 1 Toxicology only**

- 45 - Gun Shot Wound (GSW)
- 9 - Drug Overdose (OD)
- 18 - Ligature Strangulation (LS)
 - 1 – Carbon Monoxide (CO)
 - 2 – Asphyxia/Suffocation
 - 1 – Cutting/ stabbing
 - 3 – Jumped from height
 - 1 – Train vs. pedestrian

Homicides: 7 total **7 autopsied**

- 7 - Gun Shot Wound (GSW)

Undetermined: 9 total **8 autopsied; 1-human bone**

- 1 – Blunt force injury (accident vs. homicide)
- 1 – Overdose vs. Natural
- 3 – Overdose (Accident vs. Suicide)
- 1 – Ligature (Accident vs. Suicide)
- 1 – Gunshot (Suicide vs. Homicide)
- 1 – Nothing found at autopsy
- 1 – Human bone

Transfer of Jurisdiction: 23 total

Naturals: 962 total **51 autopsied; 9 Toxicology only**

Total Forensic Autopsies Performed: 238 + 13 Toxicology-Only studies

SUICIDE

STATISTICS

2015 Suicide Information

Suicide is death caused by intentional, self-inflicted injuries. In Larimer County during 2015 there were eighty (80) deaths by suicide. Death by Suicide comprised 6.4% of our investigated cases and 3.2% of all Larimer County deaths.

Age

Average Age	45
Juvenile (<18)	4
Adult	76
Oldest:	88
Youngest:	11

Alcohol and/ or Drugs Present

53/80 (66%)

Gender

Female	18
Male	62

Race

Black	0
Hispanic	4
White	76
Other	0

Mode of Suicide

Gun Shot Wound (GSW)	45
Drug Overdose (OD)	9
Ligature Strangulation (LS)	18
Carbon Monoxide (CO)	1
Asphyxia/ Suffocation	2
Train v. pedestrian	1
Cutting/stabbing	1
<u>Jumped from height</u>	<u>3</u>
	80

Mental Health/ Suicide Notes

Left note or other message:	42/80
	(52%)
Prior ideation or attempts:	51/80
	(64%)
Active mental health treatment:	23/80
	(29%)

Monthly Breakdown

Jan	5
Feb	4
Mar	8
Apr	8
May	7
Jun	7
July	8
Aug	8
Sept	7
Oct	9
Nov	5
<u>Dec</u>	<u>4</u>
	80

2015 Suicide Information

Suicide is death caused by intentional, self-inflicted injuries. In Larimer County during 2015 there were eighty (80) deaths by suicide. Death by Suicide comprised 6.4% of our investigated cases and 3.2% of all Larimer County deaths.

Age

Average Age	45
Juvenile (<18)	4
Adult	76
Oldest:	88
Youngest:	11

Alcohol and/ or Drugs Present

53/80 (66%)

Gender

Female	18
Male	62

Race

Black	0
Hispanic	4
White	76
Other	0

Mode of Suicide

Gun Shot Wound (GSW)	45
Drug Overdose (OD)	9
Ligature Strangulation (LS)	18
Carbon Monoxide (CO)	1
Asphyxia/ Suffocation	2
Train v. pedestrian	1
Cutting/stabbing	1
<u>Jumped from height</u>	<u>3</u>
	80

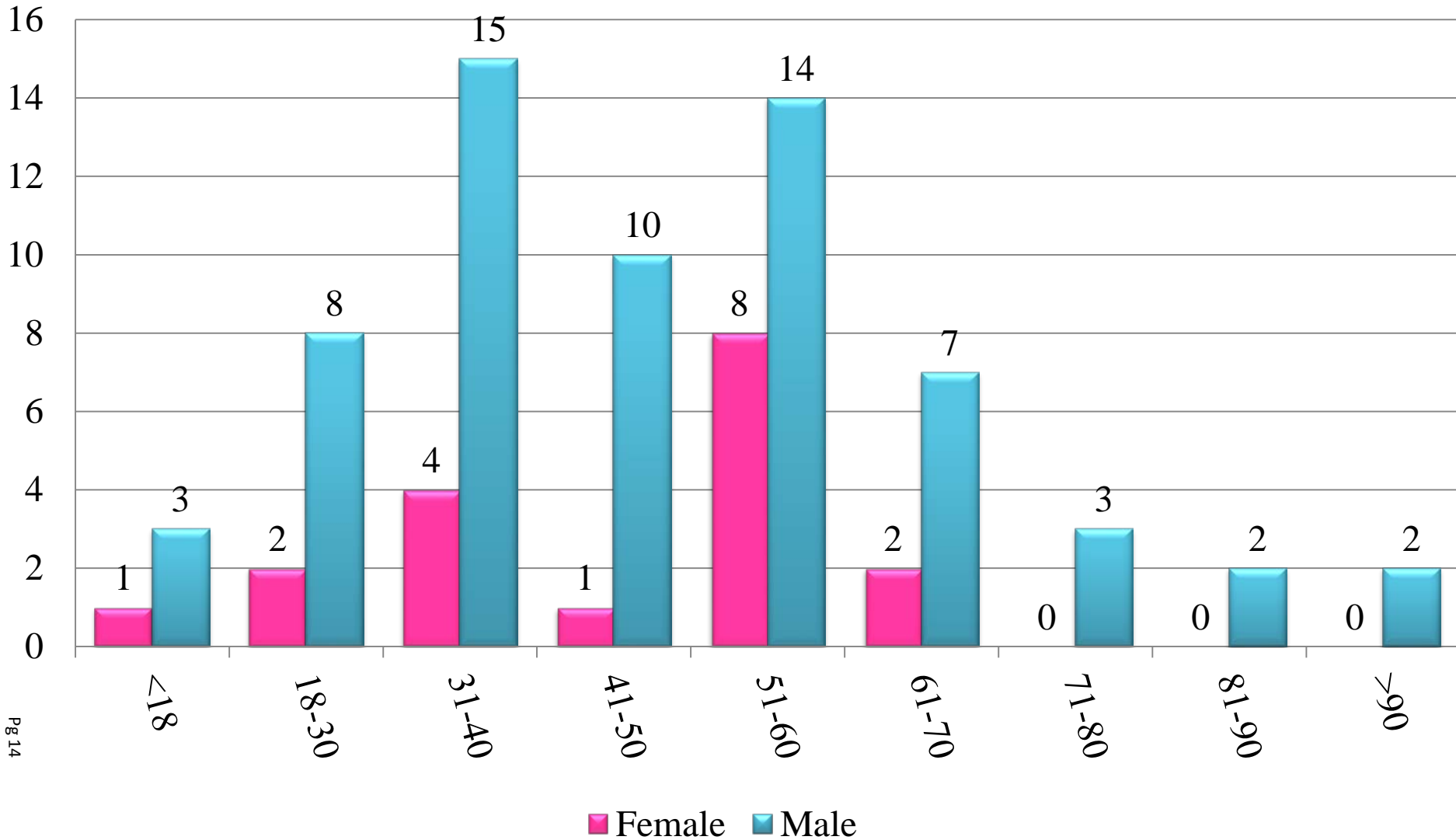
Mental Health/ Suicide Notes

Left note or other message:	42/80
	(52%)
Prior ideation or attempts:	51/80
	(64%)
Active mental health treatment:	23/80
	(29%)

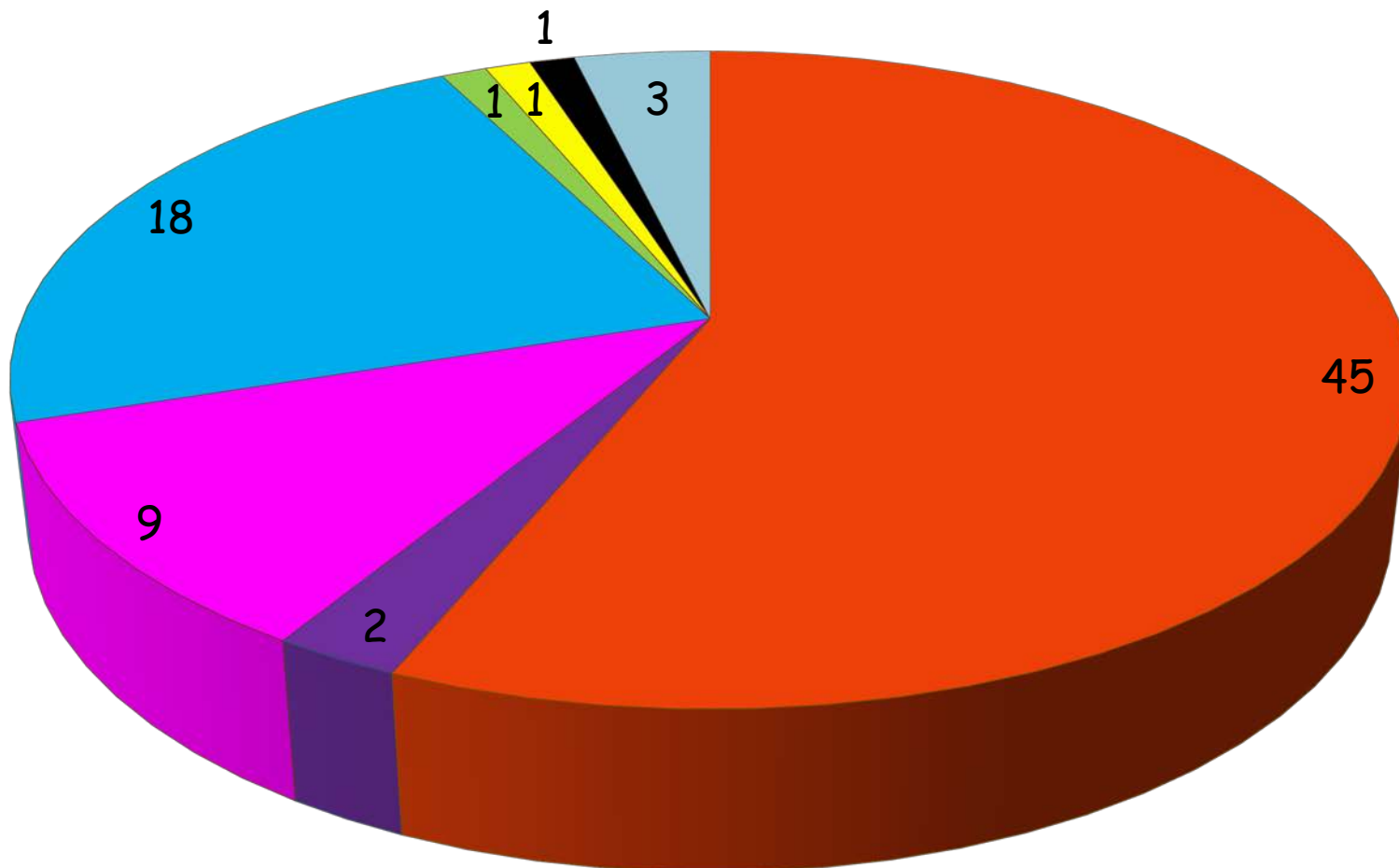
Monthly Breakdown

Jan	5
Feb	4
Mar	8
Apr	8
May	7
Jun	7
July	8
Aug	8
Sept	7
Oct	9
Nov	5
<u>Dec</u>	<u>4</u>
	80

2015 Suicides by Age and Gender Distribution

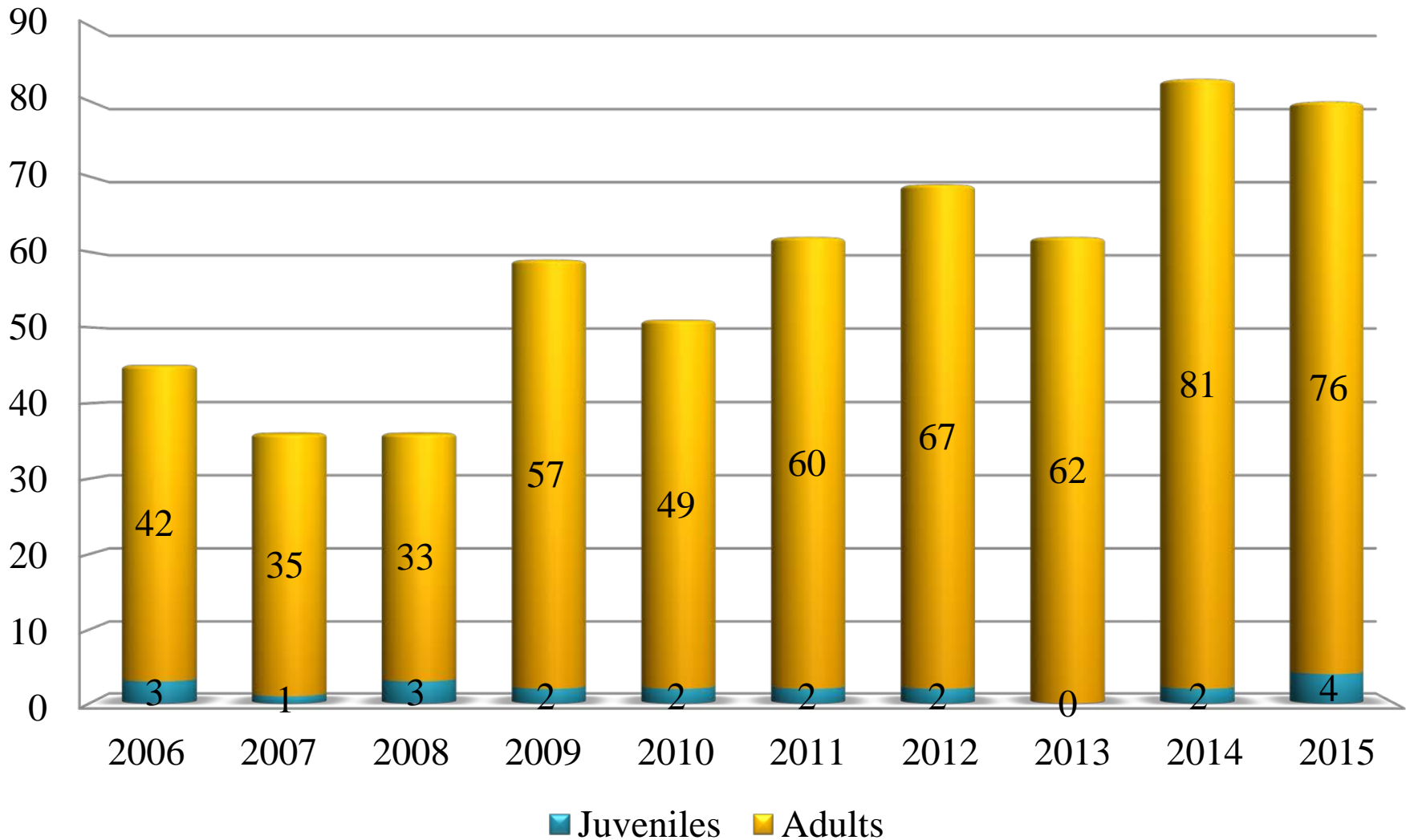


2015 Suicides Distribution by Mechanism

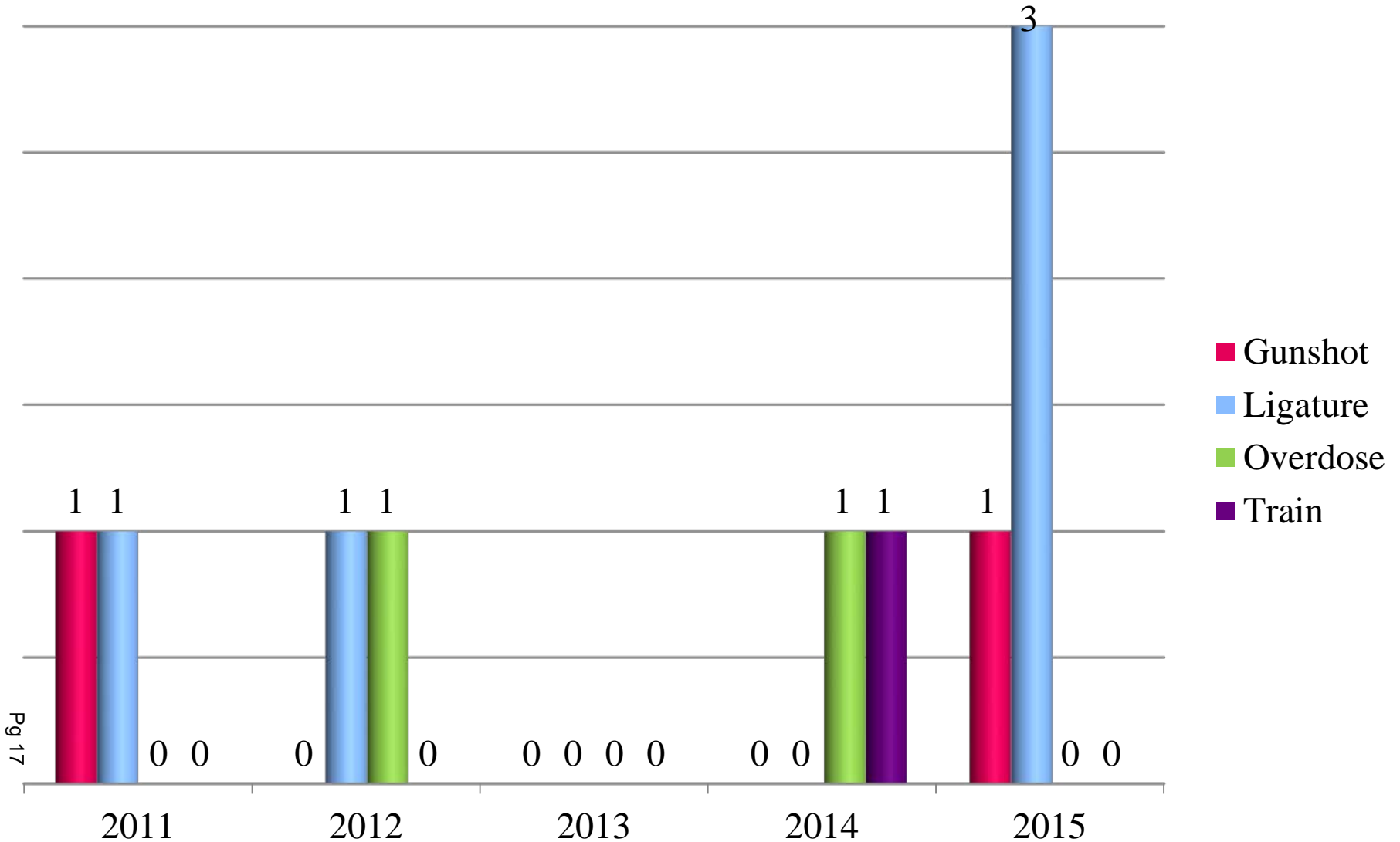


- Gunshot
- Ligature
- Train v. Ped
- Asphyxia
- Carbon Monoxide
- Jumped
- Overdose
- Cut/Stab

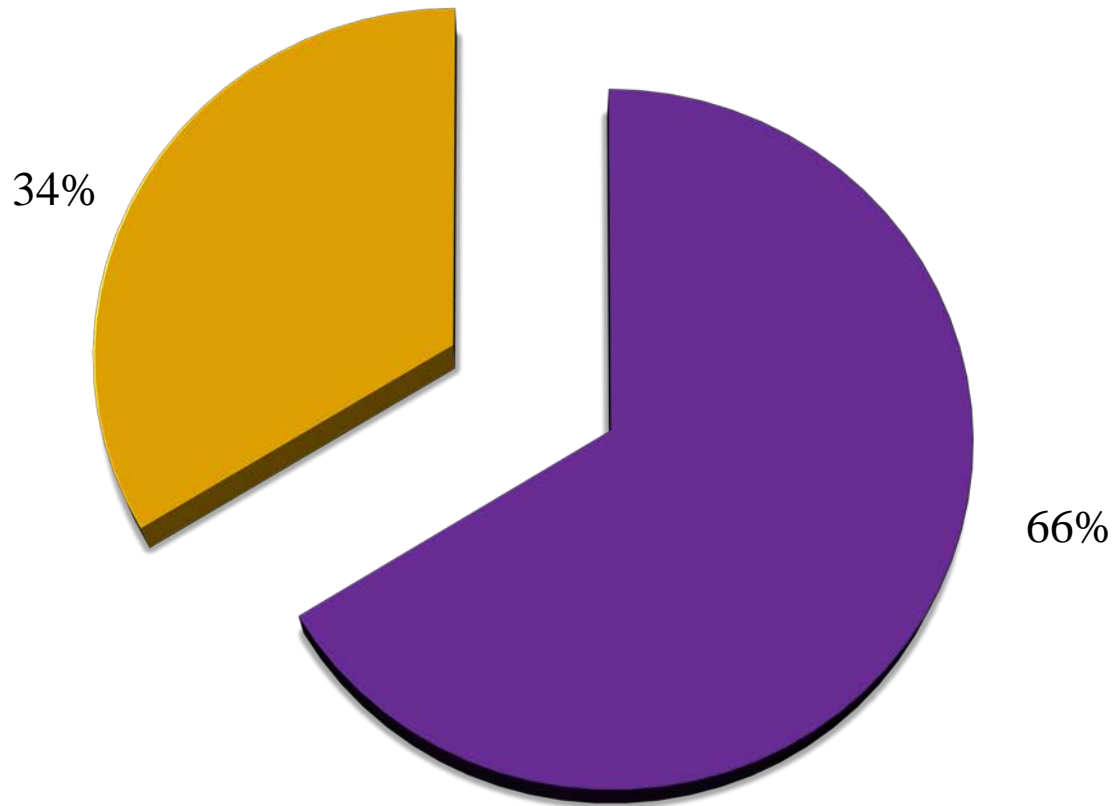
Juvenile (<18) vs. Adult Suicides 10 Years: 2006 - 2015



Mechanism of Juvenile Suicides 5 Years: 2011 thru 2015



Alcohol and/or Drug-Related Suicides 2015



■ Present ■ None detected

DRUGS AND ALCOHOL IN SUICIDE DEATHS – 2015

TOTAL: 53 out of 80 (66%)

#	GENDER	AGE	MODE	ALCOHOL	PRIMARY DRUG ASSOCIATED W/ DEATH
1	Male	65	GSW		
2	Male	58	LS	.175	THC
3	Male	23	OD		OTC-diphenhydramine
4	Male	29	GSW	.293	
5	Male	60	GSW		
6	Female	63	OD	.050	Benzos
7	Male	51	GSW		
8	Male	32	GSW	.255	
9	Male	57	GSW	.051	
10	Male	38	OD		Propranolol
11	Male	44	OD		Antidepressants
12	Male	44	GSW	.157	
13	Male	33	GSW	.243	
14	Female	31	GSW	.080	
15	Male	52	CO		OTC-diphenhydramine
16	Female	67	JUMP		
17	Male	34	LS	.155	Methamphetamine/ oxycodone
18	Male	32	GSW		
19	Male	34	GSW	.075	THC
20	Male	14	GSW		
21	Female	56	ASPHYXIA		Helium
22	Male	65	GSW		
23	Male	65	Train vs Ped		Benzos
24	Female	59	GSW	.108	Benzos
25	Female	40	LS	.281	Sertraline, Trazodone
26	Female	46	LS		
27	Male	74	GSW		Fentanyl
28	Male	70	GSW		
29	Male	57	GSW	.117	
30	Female	53	OD		OTC- diphenhydramine
31	Female	40	ASPHYXIA	.135	Helium
32	Male	45	CUTTING		
33	Male	41	GSW		THC
34	Male	66	JUMP	.083	Fentanyl, benzos
35	Female	19	GSW		Benzos
36	Male	50	GSW	.373	
37	Male	48	LS		Methamphetamine
38	Male	56	OD		Oxycodone, benzos
39	Male	71	GSW		

DRUGS AND ALCOHOL IN SUICIDE DEATHS – 2015

TOTAL: 53 out of 80 (66%)

#	GENDER	AGE	MODE	ALCOHOL	PRIMARY DRUG ASSOCIATED W/ DEATH
40	Male	30	GSW		
41	Male	43	LS		THC
42	Male	88	GSW		Hydrocodone, Gabapentin
43	Male	31	GSW		THC, benzos
44	Female	52	LS		Oxycodone, benzos, THC
	Male	31	LS	.179	
46	Male	36	GSW	.178	Methamphetamine, cocaine, LSD
47	Male	61	GSW	.248	
48	Male	38	LS		
49	Male	54	GSW	(positive)	Benzos
50	Male	24	GSW	.162	
51	Male	33	LS		Benzos
52	Female	60	GSW		
53	Female	58	LS		
54	Male	29	GSW	.025	THC
	Male	56	JUMP		
56	Male	78	GSW		
57	Male	43	GSW		THC
58	Male	55	OD		Opiates, morphine, benzos
59	Male	26	GSW		
60	Female	54	GSW		Tramadol, Carbamazepine
61	Male	40	OD	.147	Benzos, opiates
62	Male	34	LS	.042	
63	Male	22	GSW	.277	
64	Female	20	GSW	.168	THC
	Male	69	GSW		
66	Female	33	OD	.392	Antidepressants
67	Male	54	GSW	.130	Benzos
68	Male	57	LS		
69	Male	45	LS		
70	Male	37	LS		Methamphetamine
71	Male	33	GSW	.285	
72	Male	50	GSW	.273	
73	Male	52	GSW	.232	Benzos
74	Female	11	LS		
	Male	22	GSW		
76	Male	11	LS		Rx amphetamine
77	Female	51	GSW		Methamphetamine
78	Male	52	GSW		

DRUGS AND ALCOHOL IN SUICIDE DEATHS – 2015

TOTAL: 53 out of 80 (66%)

#	GENDER	AGE	MODE	ALCOHOL	PRIMARY DRUG ASSOCIATED W/ DEATH
79	Male	88	GSW		
80	Male	12	LS		

Abbreviations used:

CO = Carbon Monoxide

GSW = Gunshot wound

LS = Ligature strangulation (hanging)

OD = Overdose

MV = Motor vehicle

Ped = Pedestrian

OTC = Over the counter (non-Rx)

ACCIDENT STATISTICS

2015 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 2015, one hundred sixty-one (161) deaths were certified as accidents.

Thirty-nine (39) of these deaths were from motor vehicle (or traffic) crashes (MVCs). Our statistical information will deal first with the MVCs. The other 122 accidental deaths will be discussed on page 26.

Alcohol and/or Drug-Related Motor Vehicle Crashes – Last 10 years
2006 - 2015



In 2015, there were 39 motor vehicle ***fatalities*** in 36 ***crashes***.
Out of the 36 crashes, 14 drivers of involved vehicles (39%) were considered to be under the influence of alcohol and/or drugs.

Motor Vehicle Crash Fatalities (39)

Age

Average Age: 44.6

Juveniles (<18): 2

Adults: 37

Youngest: 15

Oldest: 88

Decedent's Position in Vehicle

Driver: 25

Passenger: 10

Bicyclist: 2

Pedestrians hit by vehicle: 2

Safety Measures by Decedents

Seatbelt used: 11

Seatbelt **NOT** used: 14

N/A: ATV, scooter, or motorcycle: 10

N/A: Pedestrians/ bicyclists hit: 4

Weather Related/ Adverse Road Conditions

Wet Roads: 2

Icy Roads: 2

Time of Day (36 crashes):

00:01 - 06:00: 2

06:01 - 12:00: 10

12:01 - 18:00: 18

18:01 - 00:00: 6

Number of vehicles involved (36 crashes):

One vehicle only: 16

Two or more vehicles: 16

Bicycle vs. vehicle: 2

Vehicle vs. pedestrian: 2

DRUG & ALCOHOL-RELATED MOTOR VEHICLE CRASHES (MVC'S)
2015

Of the 36 TOTAL Motor Vehicle Crashes (with 39 fatalities), 14 involved drivers (39%), tested positive for alcohol and/or drugs

#	Gender	Age	Number of Vehicles involved	Driver of <i>ANY</i> involved Vehicle positive for Alcohol and/ or Drugs
1	69	M	1	
2	30	M	1	
3	55	M	2	
4	29	M	1	
5	15	M	1	
6	32	FE	2	
7	26	M	1	YES
8	38	M	1	
9	19	M	1	YES
10	25	M	2	(Same crash as below)
11	37	M	2	(Same crash as below)
12	64	M	2	YES
13	38	FE	1	YES
14	57	M	2	
15	71	FE	2	
16	27	M	2	YES
17	24	M	2	YES
18	68	M	2	
19	48	M	2	YES
20	59	M	2	
21	18	M	1	YES
22	51	M	1	YES
23	86	FE	4	
24	17	M	1	(Neg)
25	20	M	1	(Same crash as above)
26	57	M	2	
27	19	M	1	YES
28	62	M	1	
29	22	M	1	
30	44	FE	5	YES
31	27	M	1	
32	76	FE	1	
33	21	FE	2	
34	48	M	1	
35	28	M	1	YES
36	60	M	2	YES
37	72	M	2	YES
38	76	M	1	
39	88	FE	3	

**2015 Accidents
(Excluding Motor Vehicle Crashes)**

In 2015, Larimer County had 122 accidental deaths that were not traffic-related. They are classified as follows:

- Drug Overdose (OD) - 43
- Falls - 61
- Hyper/ hypothermia - 2
- Electrocution - 1
- Drowning - 5
- Asphyxia - 6
(includes mechanical, positional,
huffing, or auto-erotic)
- Anaphylaxis (allergic reaction) - 1
- Choking on food or foreign object - 2
- Train vs. pedestrian - 1

Age:

Average Age: 60
Adults: 116
Juveniles: 6

Alcohol and/or drugs found in system: 59/ 122 (48%)

HOMICIDE

and

GUN-RELATED

STATISTICS

2015 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 2015, there were 7 homicide victims in Larimer County. All seven were a result of gunshot wounds.

Age

Average Age: 47
 Adult: 7
 Juvenile: 0

Race

White: 7

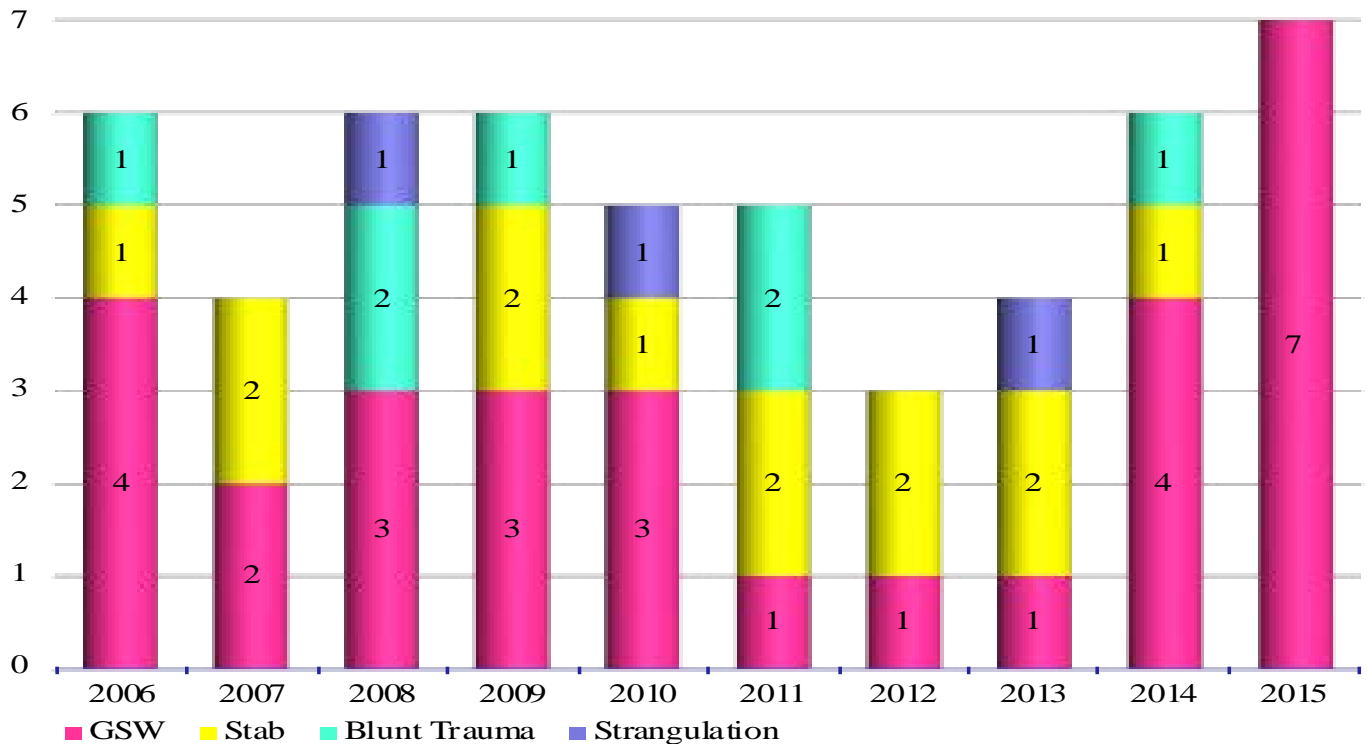
Gender:

Male: 5
 Female: 2

Alcohol/ Drug-Related **

For this statistic, we do not report the decedent's toxicology, 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
2006 - 2015**



GUN-RELATED DEATHS IN LARIMER COUNTY

Last 5 years
(Juvenile: < 18)

2015

Total County Deaths:	2464	
Total Gun Deaths:	52	(2.1% of all deaths)
<i>Suicides:</i>	45	(44 adults, 1 juvenile)
<i>Accidents:</i>	0	
<i>Homicides :</i>	7	(7 adults)
<i>Undetermined:</i>	0	

2014

Total County Deaths:	2309	
Total Gun Deaths:	43	(1.86% of all deaths)
<i>Suicides:</i>	39	(39 adults)
<i>Accidents :</i>	0	
<i>Homicides:</i>	4	(4 adults)
<i>Undetermined:</i>	0	

2013

Total County Deaths:	2191	
Total Gun Deaths:	28	(1.27% of all deaths)
<i>Suicides:</i>	27	(27 adults)
<i>Accidents:</i>	0	
<i>Homicides:</i>	1	(1 adult)
<i>Undetermined:</i>	0	

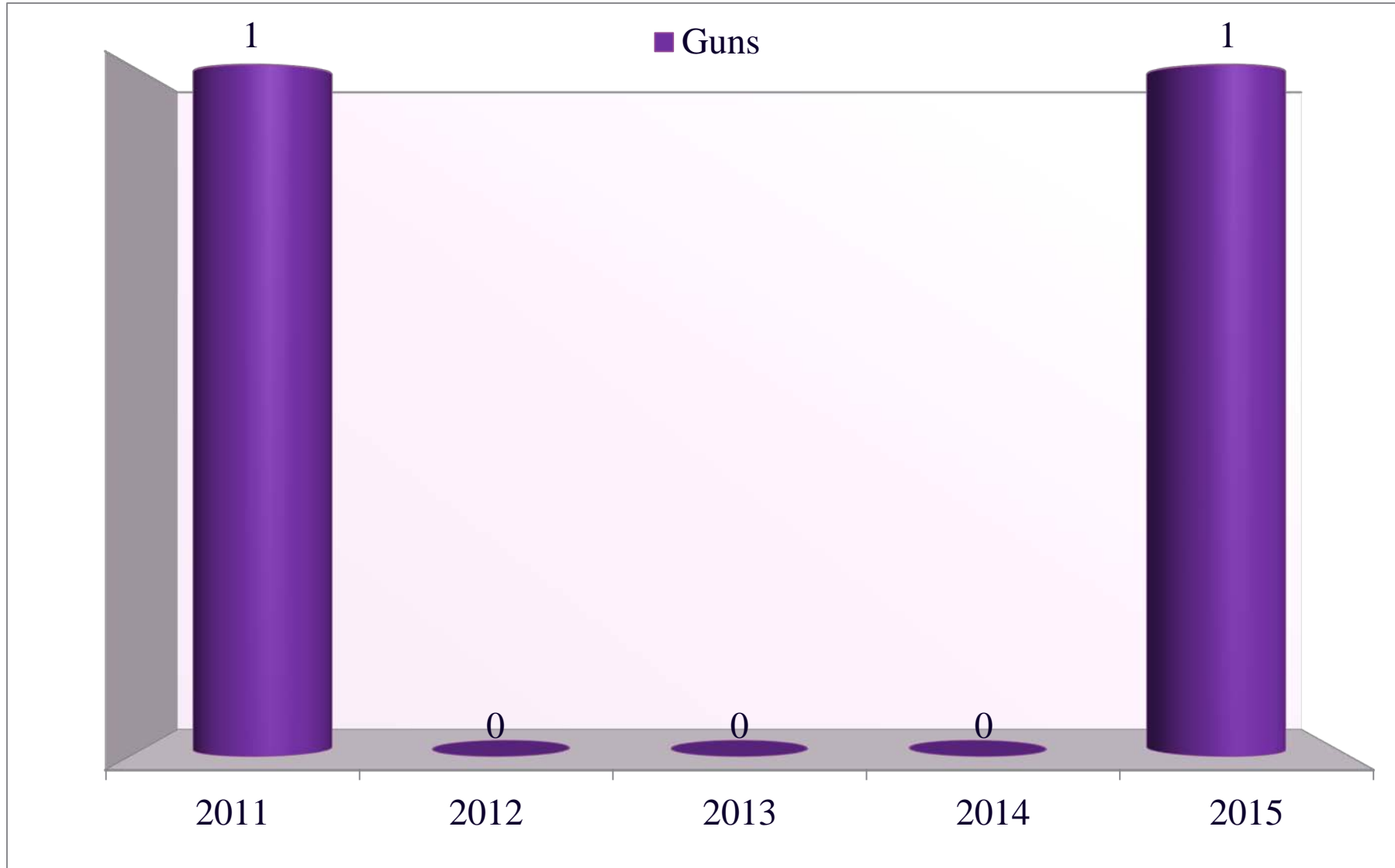
2012

Total County Deaths:	2022	
Total Gun Deaths:	38	(1.9% of all deaths)
<i>Suicides:</i>	37	(37 adults)
<i>Accidents:</i>	0	
<i>Homicides:</i>	1	(1 adult)
<i>Undetermined:</i>	0	

2011

Total County Deaths:	1986	
Total Gun Deaths:	32	(1.6% of all deaths)
<i>Suicides:</i>	31	(30 adults, 1 juvenile)
<i>Accidents:</i>	0	
<i>Homicides:</i>	1	(1 adult)
<i>Undetermined:</i>	0	

JUVENILE (<18) DEATHS FROM GUNS 2011 – 2015



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.

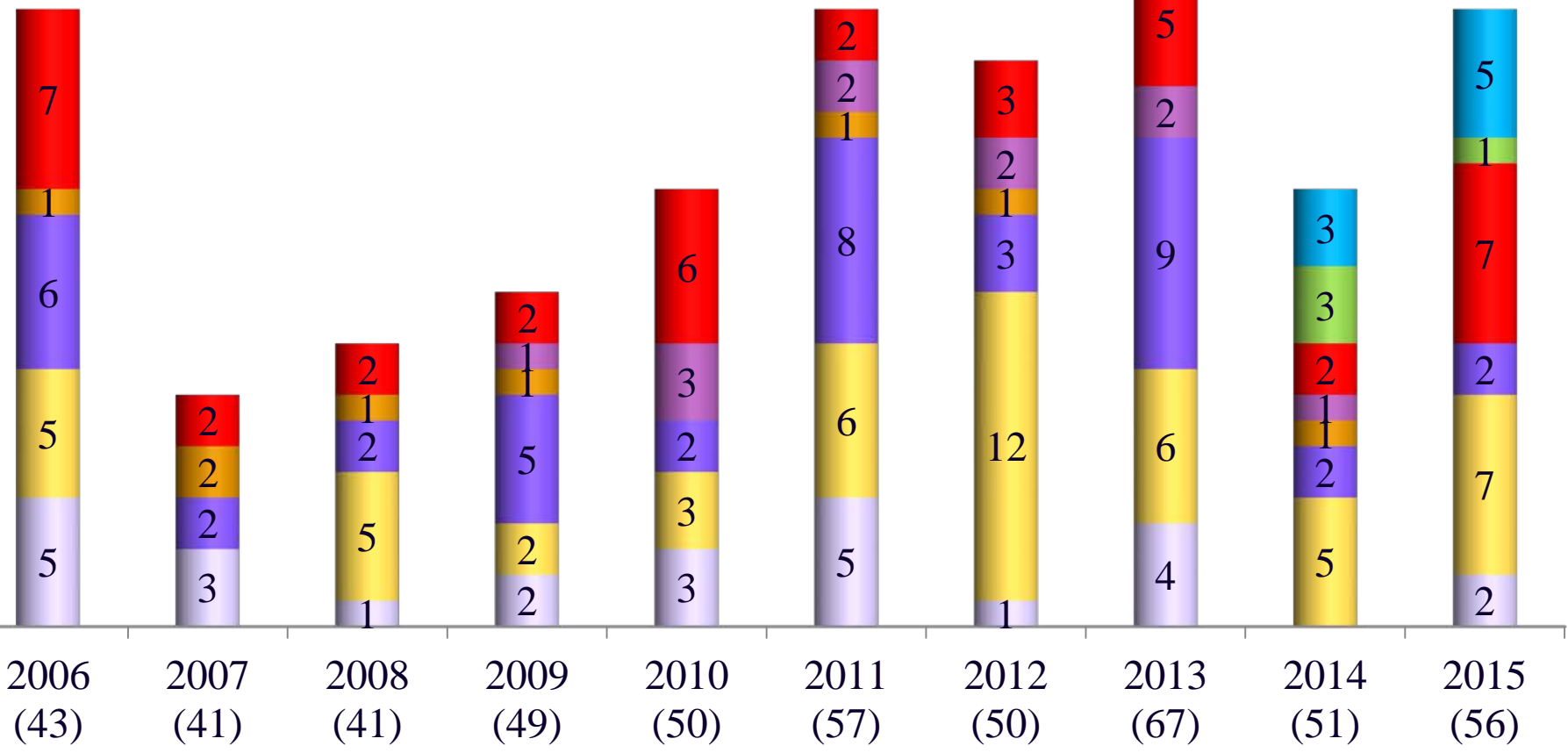
<u>2015</u>		<u>2010</u>	
Suicides	1	Suicides	1
Accidents	0	Accidents	0
Homicides by Juveniles	0	Homicides by Juveniles	0
<u>2014</u>		<u>2009</u>	
Suicides	0	Suicides	1
Accidents	0	Accidents	0
Homicides by Juveniles	0	Homicides by Juveniles	0
<u>2013</u>		<u>2008</u>	
Suicides	0	Suicides	1
Accidents	0	Accidents	0
Homicides by Juveniles	0	Homicides by Juveniles	0
<u>2012</u>		<u>2007</u>	
Suicides	0	Suicides	1
Accidents	0	Accidents	0
Homicides by Juveniles	0	Homicides by Juveniles	0
<u>2011</u>		<u>2006</u>	
Suicides	1	Suicides	1
Accidents	0	Accidents	0
Homicides by Juveniles	0	Homicides by Juveniles	0

Drugs of Abuse and Overdose Statistics

Drugs of Abuse in Overdose Deaths 2006 – 2015

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.

- Fentanyl
- OTC & Other
- Cocaine
- Heroin
- Speedball
- Inhalants
- Methamphetamine
- Rx Antidepressants



DRUGS OF ABUSE USED IN OVERDOSE DEATHS
2015

(Total 56)

** Note: Helium is not considered a drug and hence Helium deaths are not included in this chart. We had 2 Helium suicides in 2015, included in the suicide statistics. Inhalants such as paint and Dust-off are included here.

<u>Accidents</u> (43)	Age	Gender	Alcohol	Drug #1	Drug #2
1	38	FE	.259	Hydrocodone	
2	43	M		Methamphetamine	Cocaine
3	31	FE		Hydrocodone	Oxycontin
4	47	M		Morphine	Oxycodone
5	40	M		Hydrocodone	Benzos
6	34	M		Heroin	
7	58	FE		Baclofen	
8	14	FE		Morphine	
9	51	FE	.033	Morphine	Hydrocodone
10	35	M	.192	Oxycodone	
11	26	M		Heroin	Methamphetamine
12	34	M		Morphine	
13	44	M		Heroin	Benzos
14	30	M		Fentanyl	Ecstasy/ GHB
15	34	M	.166	Methamphetamine	Oxycodone
16	29	M		Heroin	
17	30	FE		Hydrocodone	Benzos
18	46	FE		Hydrocodone	
19	57	M	.026	Oxycodone	
20	19	M		Methadone	
21	57	FE		Methadone	Antidepressants
22	23	M	.045	Benzos	Baclofen
23	27	M		Morphine	Oxycodone
24	31	M	.04	Heroin	
25	36	M	.052	Fentanyl	
26	61	M	.095	Oxycodone	Antidepressants
27	55	M	.292	Heroin	THC
28	45	M	.335	Oxycodone	THC
29	31	FE	.311	Benzos	
30	32	M	.470		
31	30	M		Heroin	
32	44	FE		Oxycodone	Benzos
33	33	M	.197	Oxymorphone	
34	31	M		Oxycodone	Neurontin
35	27	M	.19	Benzos	
36	43	FE		Oxycodone	Benzos

DRUGS OF ABUSE USED IN OVERDOSE DEATHS
2015

(Total 56)

** Note: Helium is not considered a drug and hence Helium deaths are not included in this chart. We had 2 Helium suicides in 2015, included in the suicide statistics. Inhalants such as paint and Dust-off are included here.

<u>Accidents</u> (43)	Age	Gender	Alcohol	Drug #1	Drug #2
37	60	M		Fentanyl	
38	36	FE		Oxycodone	THC
39	53	FE	.462		
40	54	M		Fentanyl	Morphine
41	52	M		Oxycodone	Benzos
42	25	M		Heroin	
43	60	FE		Oxycodone	Antidepressants
<u>Suicides</u> (9)	Age	Gender	Alcohol	Drug #1	Drug #2
1	63	FE	.050	Benzos	
2	33	FE	.392	Antidepressants	
3	23	M		OTC diphenhydramine	THC
4	40	M	.147	Benzos	Opiates
5	56	M		Oxycodone	Benzos
6	53	FE		OTC diphenhydramine	
7	38	M		Propranolol	
8	44	M		Antidepressants	
9	55	M		Methadone	Benzos
<u>Undetermined</u> (4)	Age	Gender	Alcohol	Drug #1	Drug #2
1	49	FE		Oxymorphone	
2	37	FE		Multiple Rx	
3	58	FE		Fentanyl	
4	52	M		Natural vs. Rx	

CHILD DEATHS and SUIDS

**(Sudden Unexpected Infant
Death Syndrome)**

CHILD DEATHS BY AGE, MANNER, AND MODE

(Last 5 years)

(Less than 18 years of age)

2015 (20 total)	Natural	Accident	Suicide	Homicide	SUIDS & Other Undetermined
Full term live birth < 1 mo	1				
1 mo < 1 yr	1	2- Overlay			1 –Blunt trauma (accident v. homicide)
1 yr < 4 yrs		1 - Fall			
4 yrs < 9 yrs		1 - Drowning			
9 yrs < 14 yrs			3 - LS		1 – LS (accident v. suicide)
14 yrs < 18 yrs	4	1 – OD 2 – MVC 1 – Train v. ped	1- GSW		
TOTALS	6	8	4		2
2014 (17 total)	Natural	Accident	Suicide	Homicide	SUIDS & Other Undetermined
Full term live birth < 1 mo	1				
1 mo < 1 yr	2	2- Overlay			
1 yr < 4 yrs	2				1 –Overlay 1 –Blunt trauma (acc v. homicide)
4 yrs < 9 yrs	1	1 - MVC			
9 yrs < 14 yrs	1		1-Train v. Ped.		
14 yrs < 18 yrs	1	1-MVC 1-Drowning	1-OD		
TOTALS	8	5	2		2
2013 (9 total)	Natural	Accident	Suicide	Homicide	SUIDS & Other Undetermined
Full term live birth < 1 mo	1				
1 mo < 1 yr	1				
1 yr < 4 yrs	2	1 – MV vs. Pedestrian			

CHILD DEATHS BY AGE, MANNER, AND MODE

(Last 5 years)

(Less than 18 years of age)

4 yrs < 9 yrs	1				
9 yrs < 14 yrs	1				
14 yrs < 18 yrs		1 – Drowning 1 - MVC			
TOTALS	6	3	0	0	0
2012 (16 total)	Natural	Accident	Suicide	Homicide	SUIDS & Other Undetermined
Full term live birth < 1 mo	7				
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)
TOTALS	9	4	2	0	1
2011 (10 total)	Natural	Accident	Suicide	Homicide	SUIDS & Other Undetermined
Full term live birth < 1 mo	1				
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-OD (suicide vs. accident)
TOTALS	6		2		2

 **Unidentified Remains**

 **Public Administrator
Cases & Exhumations**

 **Organ and Tissue
Donations**

 **Budget**

 **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: 25-35

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 Female Infant: Date of Death: 08/22/96

Approximate Age: Full-term live birth, neo-natal infant

Hair: 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



Height: 5'11"

Approximate Age: 20-30

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.

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 with more white around forehead/ face; curly

Eyes: Brown

Teeth: Natural w/ partial upper denture

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

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 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 970-619-4517 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	??	Undetermined	97C-337	Allnutt-FTC (Reager's)
<u>2002</u>					
FRANK, Betty M. Aka: ANDERSON, Betty	02/01/2002	62	Natural	02C-085	Allnutt- FTC
<u>2004</u>					
SMITH, James	07/01/2004	41	Accident (MVC)	04C-368	Bohlender
<u>2005</u>					
PURINS, Maris	01/27/2005	51	Natural	05C-054	Allnutt- FTC
<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
JOHNSON, Clarence	12/14/2008	57	Natural	08C-868	Allnutt- FTC
<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>					
MILLER, Randy K.	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

Larimer County Medical Examiner's Office – 2015 Annual Report

PUBLIC ADMINISTRATOR CASES
 (No Next-of-Kin found at time of release)

<u>NAME</u>	<u>Date of Death</u>	<u>AGE</u>	<u>MANNER</u>	<u>LCCO#</u>	<u>Funeral Home</u>
<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

EXHUMATIONS

<u>NAME</u>	<u>Date of Death</u>	<u>AGE</u>	<u>MANNER</u>	<u>LCCO#</u>	<u>Date Exhumed</u>
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: University Hospital at Poudre Valley in Ft. Collins, University Hospital at Medical Center of the Rockies on I-25 at the Loveland exit, Banner Health- Ft. Collins Campus, Banner Health at McKee Medical Center in Loveland, Estes Park Medical Center in Estes Park, 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, 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, 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 most accurate and up-to-date donation statistics are available on the Donor Alliance website and may be viewed quarterly or in Donor Alliance's Annual Report at: www.donoralliance.org.

THE BUDGET

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. Since 1979, Larimer County has never had to pay a salary for the elected Coroner, but has to pay only for Pathology services. The Coroner/ Medical Examiner, James A. Wilkerson IV, MD is saving the citizens over \$100,000 per year by operating this way.

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.

The largest increase to our budget in recent years has been due to the rise in overdose cases and the subsequent need for more extensive Toxicology testing. Recent legislation has also mandated "double-testing" of positive results in all motor vehicle deaths, further straining budgets across the State. The public is also more aware of what the Coroner/ Medical Examiner does and expects thorough investigations, autopsies, and other testing when a death occurs.

All County budgets are Public Record and can be accessed on the County website, www.larimer.org

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

2015 (Rank by Population) (Denver not included)	Coroner Or Medical Examiner System	Budget	Employees	Number of Autopsies	Percent of Deaths Reported to the Coroner Requiring Autopsy
Adams (5)	C	\$1,890,008	14	525	15%
Arapahoe (3)	ME	\$1,542,000	15	484	87.8%
Boulder (7)	C	\$972,000	10	175 (est)	13%
Douglas (8)	C	\$1,109,000	11	126	11%
El Paso (1)	ME	\$2,241,000	21	1,000 (est)	30%
Jefferson (4)	C	\$1,779,000	12	298	26%
Larimer (6)	ME	\$1,026,000	7	251	19%
Mesa (11)	ME	\$470,000	12	128	8%
Pueblo (10)	C	\$629,000	8	231	12%
Weld (9)	C	\$946,000	7	175	13.5%

LARIMER COUNTY MEDICAL EXAMINER'S OFFICE ORGANIZATIONAL STRUCTURE

