	1960-1961
4	$634,111.44
1	52,705.48
9	8,987.93
4	$695,804.85
2	$ 85,825.00
0	6,543.94
2	$ 92,368.94
5	$ 394.40
7	826.72
2	$ 1,221.12

L. A. COUNTY
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COUNTY OF LOS ANGELES

BIENNIAL REPORT

OF

THE

CHIEF MEDICAL EXAMINER-CORONER

THEO. J. CURPHEY, M.D.
Chief Medical Examiner-Coroner

1961-62 - 1962-63

COUNTY OF LOS ANGELES

BIENNIAL REPORT

OF

THE CHIEF MEDICAL EXAMINER-CORONER

THEO. J. CURPHEY, M.D., CHIEF MEDICAL EXAMINER-CORONER

Fiscal Years July 1, 1961 - June 30, 1962
July 1, 1962 - June 30, 1963

BOARD OF SUPERVISORS

Ernest E. Debs, Chairman, 1962

Warren M. Dorn, Chairman, 1963

Burton W. Chace

Frank G. Bonelli

Kenneth Hahn

Lindon S. Hollinger
Chief Administrative Officer

Burton W. Chace
Chairman of the Board of Supervisor's Committee
for the Coroner

"If the law has made you a witness, remain a man of science: you have no victim to avenge, no guilty or innocent person to ruin or save. You must bear testimony within the limits of science."

Brouardel

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COUNTY OF LOS ANGELES
OFFICE OF CHIEF MEDICAL EXAMINER-CORONER
HALL OF JUSTICE
LOS ANGELES 12, CALIFORNIA

THEODORE J. CURPHEY, M. D.
CHIEF MEDICAL EXAMINER-CORONER

Honorable Board of Supervisors
County of Los Angeles
Hall of Administration
Los Angeles, California

Gentlemen:

Herewith is presented the biennial report of the Office of Chief Medical Examiner-Coroner of Los Angeles County for the fiscal years 1961-62 and 1962-63.

The report contains a detailed summary of the operations of the various departments and also includes an appendix outlining the legal responsibilities of the office as stated in Section 27491 of the Government Code of the State of California.

It will be evident from its perusal and from a comparison with previous reports, that progress has been made in the period it covers, towards the goal originally set for the office in 1957, namely, the wider application of current scientific knowledge to the investigation of sudden and unexpected deaths. Underlying this approach is a deliberate attempt to change the current pattern of medico-legal investigation, where the application of the scientific method has for the most part been concentrated around the investigation of homicidal deaths, with insufficient attention being paid to the larger volume and wider spectrum of cases of sudden death of a non-criminal nature handled by the larger metropolitan offices in this country. Our directed aim is not to investigate the homicide with less scientific diligence but rather to expend comparable effort on those cases of equal or at times even greater significance to the citizens of the community. These would include the more frequent and larger groups of deaths from such causes as suicide, automobile and aviation accidents, deaths from industrial hazards, those in which workmen's compensation are at issue, and finally those involving settlements of life or accident insurance benefits to the citizen.

Keeping in mind that the basic orientation of this office is in the direction of general service to the public, it is necessary then to cover with equal care all the areas of sudden and unexpected death and to give to those cases of a non-criminal nature the same degree of scientific effort that is expended on the less than 3% of cases from homicide.

Once more it is my pleasure to express to the Board of Supervisors, the Chief Administrative Officer and his various department heads and staff personnel, our sincere appreciation of their continuing interest and help in furthering the progressive development of the vast potentials for service that exist in this special field where organized medicine provides for and protects the interests of the citizen. It is proper to note too that through the foresightedness and the wisdom of County government an opportunity is being provided for this office to pioneer in and develop this increasingly important field of medico-social service.

My thanks also go to the various law enforcement agencies of the County, without whose help we could not function, as well as to those funeral directors who continue to provide us with the physical facilities necessary for the handling of the cases investigated by us in their respective communities.

Finally, the entire staff of the office has earned the commendation of the community for their enthusiastic help during the past two years and their demonstrated cooperation directed at making our agency an efficient arm of County government.

Respectfully submitted,

Theo. J. Curphey

Theodore J. Curphey, M.D.
Chief Medical Examiner-Coroner

to the Board of
cer and his various
sincere apprecia-
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ubmitted,

J. Murphey

urphey, M.D.
Examiner-Coroner

OFFICE OF CHIEF MEDICAL EXAMINER-CORONER

The office of the Coroner is a very ancient office descending from medieval England. The office of Coroner was created in California in 1872 by legislative enactment. It was designated a County office in Los Angeles County by charter provisions adopted in 1913.

By charter amendments adopted by the Los Angeles County Board of Supervisors in 1956, the Coroner of Los Angeles County was required to be a physician who is a certified Pathologist. In 1960, the Administrative Code of the County of Los Angeles was amended to provide for a change in the title from Coroner to Chief Medical Examiner-Coroner and to define more accurately and to emphasize the medical nature of the office as established by charter amendments adopted in 1956. Therefore, in Los Angeles County, the office of Coroner is referred to as the Chief Medical Examiner-Coroner's Office.

The Chief Medical Examiner-Coroner's Office has been located in the Hall of Justice since 1926. Although the department has acquired additional space since this period, the present facilities are wholly inadequate for the demands of a modern medico-legal office. Plans for a modern medical-examiner's building are now being processed and the department is looking forward to locating in new facilities sometime in the near future.

During the 1961-1963 biennium, there were 112,431 deaths recorded in Los Angeles County. Of this total, 24,589 cases or 21.9 percent of all deaths in Los Angeles County were investigated by the Chief Medical Examiner-Coroner's Office. During this report period, 10,117 coroner's cases were processed in our Hall of Justice facility. The remaining 14,472 cases were handled by private mortuaries who act as coroner's representatives on a monthly rotating basis.

ORGANIZATION

The Chief Medical Examiner-Coroner's Office is organized into four major divisions as follows:

ADMINISTRATION DIVISION:

The Administration Division is responsible for personnel, payroll, accounting, operation and systems procedures, maintenance of coroner's records, conducts inquests, and prepares medical and legal testimony for presentation to the Coroner's Inquest Jury.

During the 1961-1963 fiscal years, the Administration Division conducted or caused to be conducted a series of management analyses studies in a continuing effort to improve the methods and procedures of operations throughout the Department. These studies resulted in forms and files revisions, a central mail depository for incoming and outgoing mail, an information desk, and a centralized inventory and requisition system. At the close of the biennium, plans and studies for a more efficient and stream-lined operation were in progress.

INQUEST SECTION:

The Inquest Section is responsible for the holding of formal inquests into the deaths of persons other than natural causes. The purpose of the inquest is to determine if death was the result of a criminal act on the part of another. The inquests are generally held in the Hall of Justice and are conducted by an Inquest Deputy.

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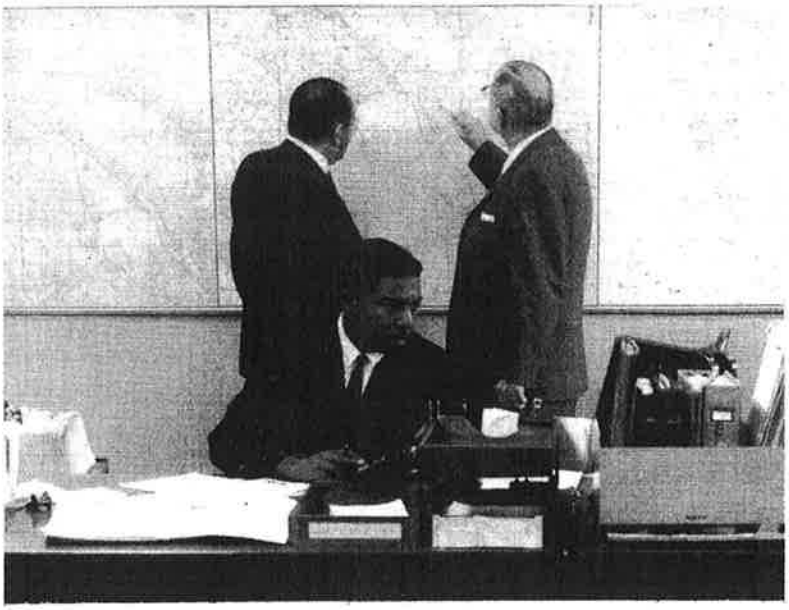
The substitution of jurors screened beforehand for service in the Superior Courts in place of jurors chosen at random from the city's streets, which became effective in the fiscal year 1961-1962 (November, 1961), has been a distinct step forward in improving the objectivity of the inquest verdict - a matter of considerable concern to those interested in retaining the inquest as an integral part of modern medico-legal investigation.

In this connection, further progress has been made in Los Angeles County by amendment to Section 27491 of the Government Code (June, 1961), whereby an advisory verdict is substituted for the previously established coroner's verdict and the setting forth in such an advisory verdict as to whether the death was occasioned by the act of another, and whether it was the result of criminal means, without, however, naming any person as being responsible therefor.

The proceedings are recorded and transcripts made available to the District Attorney, city attorneys, and others interested. During the 1961-1963 biennium, the Chief Medical Examiner-Coroner's Office conducted 619 inquests.

RECORD SECTION:

The Record Section is responsible for receiving and processing and tape recording the initial report of death on coroner's cases, maintaining permanent case records pertaining to all Chief Medical Examiner-Coroner's cases, notifying the next of kin of the deceased, releasing remains on authorization of persons entitled to claim remains, holding and releasing of personal property of the deceased, issuing death certificates, and maintaining the coroner's register as required by law.



Most of the personal contacts with the public and relatives of the deceased are handled by this section. This would include accompanying identification witnesses to view the remains of deceased relatives and friends.

STENOGRAPHIC AND CONTROL SECTION:

The Stenographic and Control Section is responsible for the transcribing of dictated cases, taking medical dictation, obtaining medical history and police reports over the telephone, and answering all telephone calls for the doctors or for medical information.

In order to handle the inquiries from the public relative to the status of cases not yet certified, the Chief Administrative Office was requested to establish a post position in this section for the purpose of establishing a liaison between the public and the various departments involved in processing a case. This position was to serve a dual purpose; namely, to act as a source of information as to the reason for the delay in certification and also to give the approximate time of completion of the certificate, as well as to alert the department to the need for giving priority to those cases where the delay was working an economic hardship on the survivors of the deceased on such matters as insurance settlements, estate matters, etc.

The position was accordingly established for the fiscal year 1963-1964, and its activities will be evaluated in a future report.

The Control Section is responsible for maintaining the control on approximately 13,000 cases per year and processing of approximately 80,000 miscellaneous laboratory, police, case, history, and toxicology reports, and the preparation of the monthly statistical report.

MEDICAL DIVISION:

The Medical Division is responsible for the professional medical investigation and determination of the cause and mode of death of each case handled by the Chief Medical Examiner-Coroner's Office. The post-mortem medical and pathological investigation is conducted by doctors of medicine in a specialized branch of pathology dealing with autopsies and laboratory investigations.

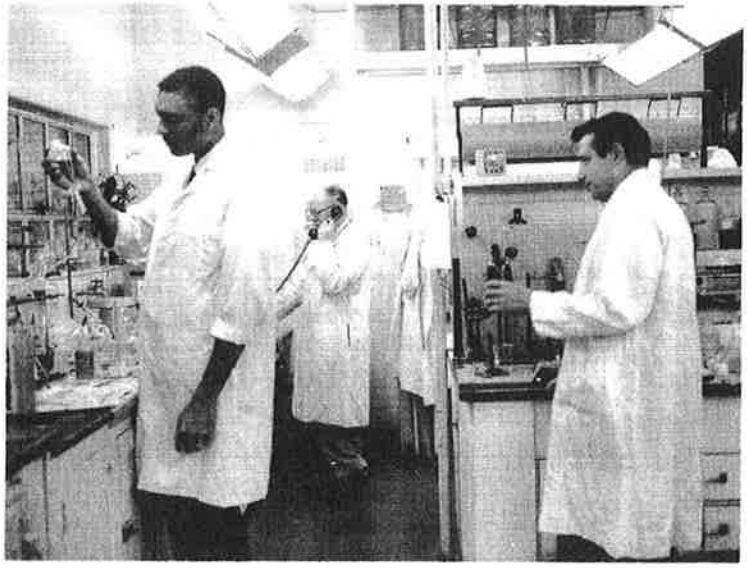
During the 1961-1963 biennium, the Medical Division investigated 24,589 coroner's cases and performed 9,435 autopsies. The autopsy rate for this report period was 38.4 percent.

During the 1961-1963 biennium, the Histopathology Laboratory prepared 36,653 routine and special slides for microscopic examination.

During the 1961-1962 fiscal year, a full-time Bacteriologist was appointed. During the 1962-1963 fiscal year, our Bacteriology Laboratory came into full operation and bacteriological studies were made in 180 cases. These studies, in many cases, contributed to establishing the cause of death. Reports from this laboratory are of significant value in placing public health departments on notice of communicable diseases, in the event such diseases are detected by the laboratory.

TOXICOLOGY DIVISION:

The Toxicology Division is responsible for making qualitative and quantitative analyses of specimens submitted by the Deputy Medical Examiners to determine the presence or absence of poisons, drugs, or chemicals. In many cases, these laboratory findings are essential in determining the cause of death.



During the 1961-1963 biennium, 9,416 various laboratory tests were conducted by the Toxicology Division.

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Toxicology

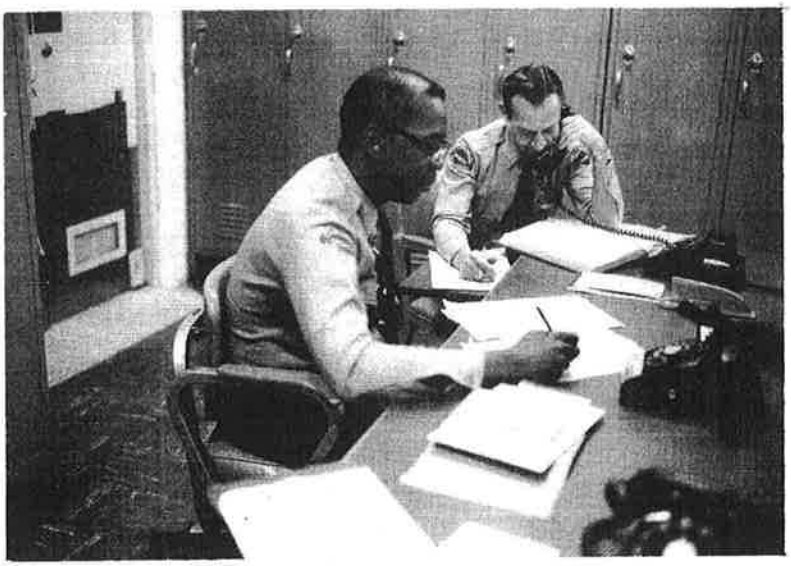
On January 31, 1963, Mr. Raymond Abernethy, the Head Toxicologist, retired. Mr. Abernethy had worked in County service for 37 years. During this time, he became an internationally recognized authority in Forensic Toxicology. In the recruitment of a successor, the office is mindful of this fact especially as it relates to the rapidly increasing number of new synthetic drugs being marketed for industrial and medical use, with the attendant danger of resulting fatality when they are used for therapeutic or industrial purposes, or when deliberately given or taken with homicidal or suicidal intent.

The recovery, identification, and quantitation of these synthetic drugs is a new and highly complex and difficult field in which the Toxicologist now finds himself involved. His contribution to the knowledge of the effects of these new drugs on the human being, when death is suspected as being caused by them, has great significance in respect to the future of these agents in their therapeutic and industrial use.

For this and other reasons, the choice of a Head Toxicologist must be made with great care if the appointee is to continue to meet the rapidly increasing responsibilities in the field of Toxicology in this, the second largest office in the nation serving an explosively growing metropolitan complex that Los Angeles County represents.

MORTUARY DIVISION:

The Mortuary Division is responsible for the operation of the Chief Medical Examiner-Coroner's Office mortuary in the Hall of Justice.



This division is also responsible for the transportation of coroner's cases in which death occurred in the metropolitan area of Los Angeles County, as well as the transportation of all suspected homicide cases in other parts of the County to the Hall of Justice.

In addition, persons of the Mortuary Division embalm and preserve bodies, assist in on-the-scene investigation of coroner's cases, assume custody of personal property found on the person of the deceased, assist Deputy Medical Examiners at the autopsy table, and take photographs of remains and organs as required.

During the 1961-1963 biennium, the Mortuary Division handled 10,117 cases and embalmed a total of 8,302 cases.

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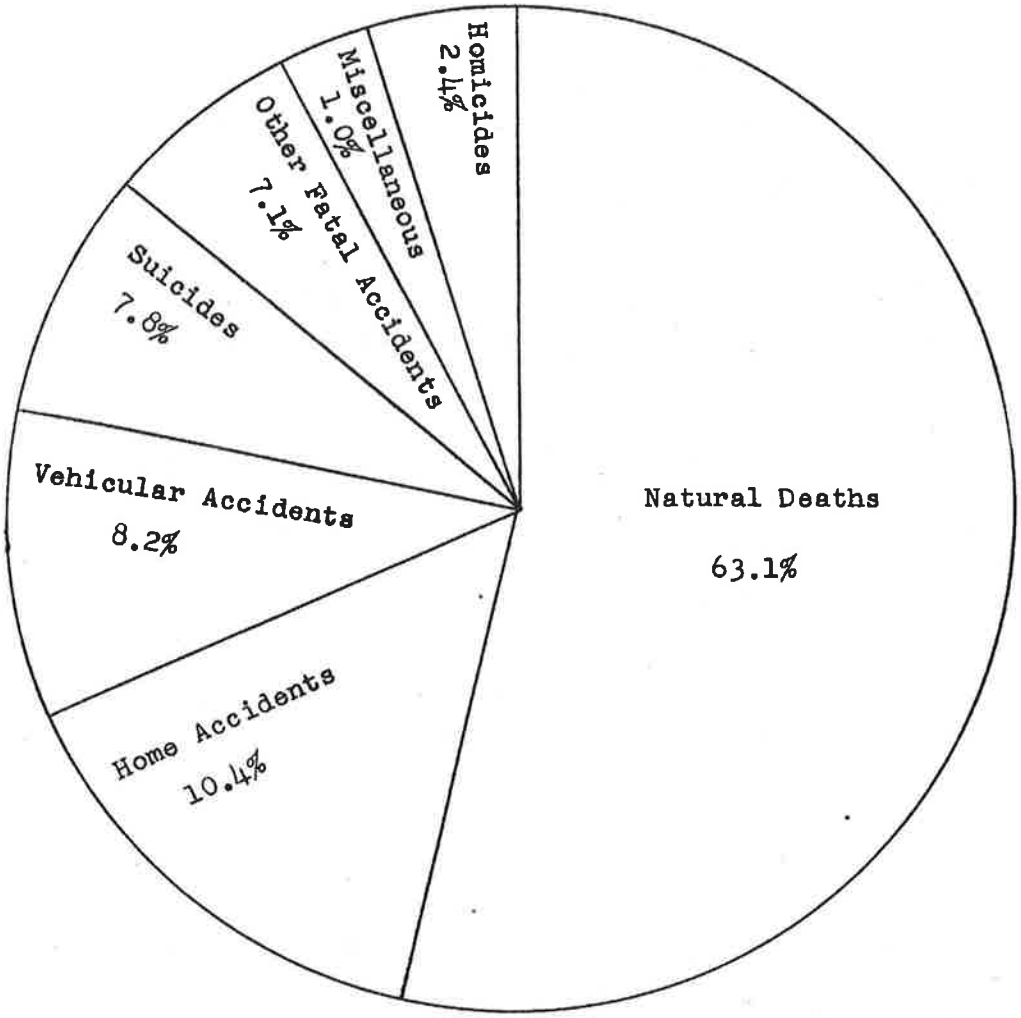
C H A R T S

CHART NO. 1

DISTRIBUTION OF MEDICOLEGAL CASES

LOS ANGELES COUNTY -- 1961-1962

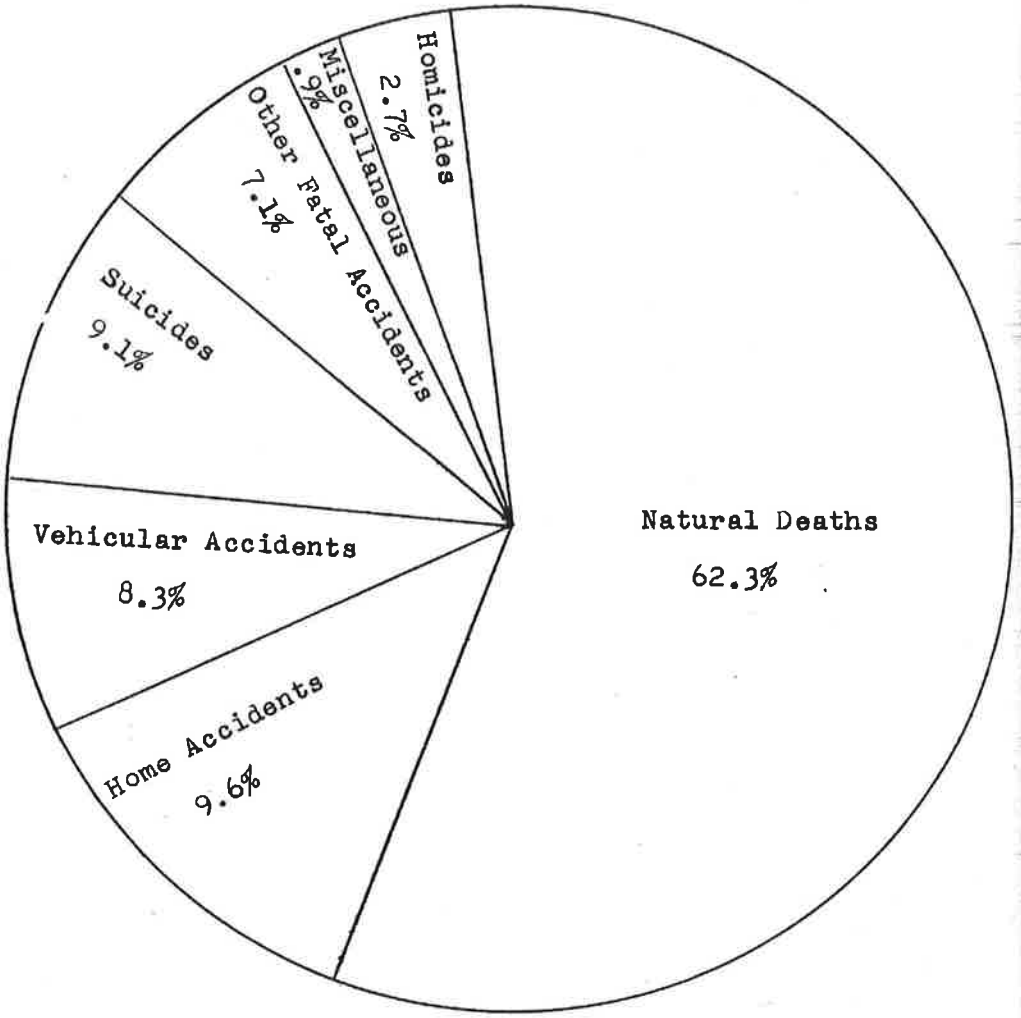


Total number of cases = 12,073

CHART NO. 2

DISTRIBUTION OF MEDICOLEGAL CASES

LOS ANGELES COUNTY -- 1962-1963



Total number of cases = 12,516

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DEPARTMENT OF CHIEF MEDICAL EXAMINER-CORONER

STATISTICAL SECTION

TABLE NO. 1

CASES INVESTIGATED BY MEDICAL EXAMINER

	1961-62	1962-63	TOTAL
In Central Examining Facilities..	5,137	4,980	10,117
In Other Than Central Examining Facilities.....	6,936	7,536	14,472
TOTAL.....	12,073	12,516	24,589

TABLE NO. 2

MANNER OF DEATH - MEDICAL EXAMINER CASES

	1961-62		1962-63	
Manner of Death	Total Cases	Percent of Total	Total Cases	Percent of Total
Natural Causes*.....	7,613	63.1	7,806	62.3
Home Accidents.....	1,258	10.4	1,196	9.6
Vehicular Accidents.....	993	8.2	1,050	8.3
Suicides.....	949	7.8	1,136	9.1
Other Fatal Accidents...	697	5.8	702	5.7
Homicides.....	291	2.4	330	2.7
Industrial Accidents....	129	1.1	154	1.2
Stillbirths.....	67	.6	81	.6
Undetermined.....	41	.3	19	.2
Aircraft Accidents.....	15	.1	14	.1
Abortions - Criminal....	13	.1	15	.1
Railway Accidents.....	7	.1	13	.1
TOTAL.....	12,073	100.0	12,516	100.0

* Excluding symptoms of senility and ill-defined conditions shown in the table.

TABLE NO. 3

AUTOPSIES PERFORMED AND MANNER OF DEATH

Manner of Death	1961-62			1962-63		
	Total Cases	Autopsies Performed	Percent of Cases Autopsied	Total Cases	Autopsies Performed	Percent of Cases Autopsied
Natural Causes...	7,613	2,180	28.6	7,806	2,232	28.6
Undetermined....	41	31	75.6	19	15	78.9
Abortions...	13	13	100.0	15	15	100.0
Vehicular Accidents....	993	859	86.5	1,050	959	91.3
Railway Accidents....	7	4	57.1	13	6	46.2
Aircraft Accidents....	15	9	60.0*	14	9	64.3*
Stillbirths.	67	28	41.8	81	37	45.7
Home Accidents....	1,258	419	33.3	1,196	436	36.5
Other Accidents....	697	313	44.9	702	328	46.7
Homicides...	291	276	94.8**	330	312	94.5**
Suicides....	949	308	32.5	1,136	390	34.3
Industrial Accidents....	129	110	85.3	154	146	94.8
TOTAL....	12,073	4,550	37.7	12,516	4,885	39.0

* Pilots autopsied in each accident.

** Homicides not autopsied were homicide-suicide cases.

TABLE NO. 4

DEATHS FROM NATURAL CAUSES - IN MAJOR GROUPS
(INTERNATIONAL LIST)

	1961-62		1962-63	
	Total Cases	Percent of Total Cases	Total Cases	Percent of Total Cases
Infective and parasitic diseases.....	35	.4	42	.5
Neoplasms.....	209	2.6	217	2.7
Allergic, endocrine, metabolic and nutritional diseases.....	39	.5	60	.8
Diseases of the blood and blood-forming organs..	10	.1	5	-
Mental, psychoneurotic and personality disorders..	60	.8	72	.8
Diseases of the nervous system and sense organs.....	295	3.8	266	3.3
Diseases of the circulatory system.....	5,832	76.1	6,016	76.7
Diseases of the respiratory system.....	555	7.1	538	6.8
Diseases of the digestive system.....	416	5.3	454	5.7
Diseases of the genito-urinary system.....	17	.2	13	.1
Diseases of pregnancy, childbirth and the puerperium.....	10	.1	6	.1
Diseases of the skin and cellular tissue.....	2	-	2	-
Diseases of the bones and other organs of movement.....	4	-	8	.1
Congenital malformations.	60	.8	39	.4
Diseases of early infancy-prematurity.....	69	.9	68	.8
Symptoms, senility and ill-defined conditions.....	41	.5	19	.2
Stillbirths.....	67	.8	81	1.0
TOTAL.....	7,654	100.0	7,825	100.0

TABLE NO. 5

OCCUPATIONAL ACCIDENTS - TYPE OF ACCIDENT

Type of Accident	1961-62	1962-63	TOTAL
Inhalation - Poison.....	-	1	1
Crushing.....	28	23	51
Suffocation.....	1	4	5
Falls.....	27	43	70
Caught in machinery.....	14	18	32
Electrocution.....	9	14	23
Burns.....	7	6	13
Others.....	43	45	88
TOTAL.....	129	154	283

TABLE NO. 6

HOME ACCIDENTS - TYPE OF ACCIDENT

Type of Accident	1961-62	1962-63	TOTAL
Crushing.....	15	10	25
Falls.....	798	772	1,570
Drowning.....	56	62	118
Burns.....	125	121	246
Carbon Monoxide.....	41	43	84
Firearms.....	25	13	38
Poisonings.....	86	86	172
Suffocation.....	15	12	27
Plastic bags.....	6	4	10
Gas Heater.....	26	20	46
Others.....	65	53	118
TOTAL.....	1,258	1,196	2,454

DENT

2-63	TOTAL
1	1
23	51
4	5
3	70
.8	32
4	23
6	13
5	88
4	283

63	TOTAL
	25
	1,570
	118
	246
	84
	38
	172
	27
	10
	46
	118
	2,454

TABLE NO. 7

VEHICULAR ACCIDENTS - TYPE OF ACCIDENT

	1961-62		1962-63	
	Total Cases	Percent of Total Cases	Total Cases	Percent of Total Cases
Pedestrian struck by truck.....	26	2.6	22	2.1
Pedestrian struck by auto.....	301	30.1	312	29.3
Pedestrian struck by train.....	5	.5	14	1.3
Pedestrian struck by bus.....	8*	.8	5*	.5
Pedestrian struck by motorcycle.....	-	-	3	.3
Auto and auto collision.	248	24.8	293	27.5
Auto and bus collision..	9*	1.0	6*	.6
Auto and truck collision.....	71	7.1	47	4.4
Auto and train collision.....	13	1.3	15	1.4
Auto and motorcycle collision.....	15	1.5	26	2.4
Auto and bicycle collision.....	15	1.5	13	1.2
Auto and scooter collision.....	4	.4	5	.5
Truck and truck collision.....	4	.4	7	.6
Auto into fixed object..	144	14.4	152	14.2
Auto overturned.....	43	4.3	53	5.0
Auto ran off road.....	37	3.7	39	3.7
Fall from moving vehicle.....	19	2.0	8	.8
Motorcycle into fixed object.....	13	1.3	12	1.1
Truck overturned.....	5	.5	11	1.1
Miscellaneous.....	18	1.8	21	2.0
TOTAL.....	998	100.0	1,064	100.0

* Includes streetcars also.

TABLE NO. 8

OTHER FATAL ACCIDENTS

	1961-62	1962-63	TOTAL
Suffocation	7	1	8
Electrocution	3	3	6
Burns	11	22	33
Falls	496	488	984
Drowning	55	32	87
Poisonings	34	42	76
Crushing	9	8	17
Carbon Monoxide	8	11	19
Firearms	6	2	8
Therapeutic accidents	25	38	63
Others	43	55	98
TOTAL	697	702	1,399

TABLE NO. 9

SUICIDES

MANNER	1961-62	1962-63	TOTAL
Vehicles	1	5	6
Firearms	290	348	638
Hanging	98	103	201
Carbon Monoxide	78	99	177
Jumping	40	36	76
Barbiturates	288	395	683
Poisons	83	82	165
Drowning	8	11	19
Sharp instrument	30	21	51
Suffocation (plastic bag)	25	24	49
Burns	7	9	16
Miscellaneous	1	3	4
TOTAL	949	1,136	2,085

962-63	TOTAL
1	8
3	6
22	33
488	984
32	87
42	76
8	17
11	19
2	8
38	63
55	98
702	1,399

2-63	TOTAL
5	6
48	638
03	201
99	177
36	76
95	683
32	165
.1	19
21	51
14	49
9	16
3	4
6	2,085

TABLE NO. 10

HOMICIDES

MANNER	1961-62	1962-63	TOTAL
Firearms.....	143	173	316
Sharp instrument.....	58	68	126
Blunt instrument.....	12	9	21
Strangulation.....	17	20	37
Assault.....	48	49	97
Burns.....	2	1	3
Miscellaneous.....	11	10	21
TOTAL.....	291	330	621

TABLE NO. 11

DEATHS CAUSED OR CONTRIBUTED TO BY ALCOHOLISM

CLASSIFICATION	1961-62	1962-63	TOTAL
Acute alcoholism.....	60	72	132
Chronic alcoholism.....	200	177	377
Cirrhosis and fatty liver....	521	586	1,107
Highway accidents.....	147	192	339
Home accidents.....	27	36	63
Other fatal accidents.....	4	6	10
Homicides.....	58	85	143
Suicides.....	126	167	293
Natural cases.....	79	218	297
TOTAL.....	1,222	1,539	2,761

TABLE NO. 12

IMMEDIATE CAUSES OF DEATH DETERMINED BY
LABORATORY TEST -- 1961-1962

Type of Test	Total Tests	Immediate Cause of Death	
		Total Number of Cases Certified	Percent of total tested
Alcohol.....	3,193	60	.018
Barbiturates.....	606	343	56.6
Carbon Monoxide.....	276	131	47.5
Narcotic.....	58	25	43.2
Poisons.....	251	126	50.2
TOTALS.....	4,384	685	15.6

Percent of immediate causes of death determined by laboratory test of total coroner's cases = 5.7%

TABLE NO. 13

IMMEDIATE CAUSES OF DEATH DETERMINED BY
LABORATORY TEST -- 1962-1963

Type of Test	Total Tests	Immediate Cause of Death	
		Total Number of Cases Certified	Percent of total tested
Alcohol.....	3,765	72	.019
Barbiturates.....	685	437	63.8
Carbon Monoxide.....	295	160	54.8
Narcotic.....	67	33	49.3
Poisons.....	220	116	52.7
TOTALS.....	5,032	818	16.3

Percent of immediate causes of death determined by laboratory test of total coroner's cases = 6.5%

BY

e of Death

Percent of total tested
.018
56.6
47.5
43.2
50.2
15.6

by laboratory

Y

of Death

Percent of total tested
.019
63.8
54.8
49.3
52.7
16.3

y laboratory

TABLE NO. 14

INCIDENCES OF ALCOHOLISM IN
HOMICIDES, SUICIDES, AND ACCIDENTS
1961-1962

Manner	Total Cases	Negative or No Test	0.01-0.04	0.05-0.09	0.10-0.14	0.15- and up	Per ** cent of Incidence of Alcoholism
Homicides.....	291	191	11	14	17	58	34.4
Suicides.....	949	715	18	44	46	126	24.7
Home accidents..	1,258	1,224	2	1	4	27	2.7
Other fatal accidents....	697	689	-	4	-	4	1.1
Vehicular accidents*....	993	741	19	41	45	147	25.4
Pedestrians.....	355	296	6	8	9	36	16.6
Passengers.....	238	176	7	13	12	30	26.1
Drivers.....	400	269	6	20	24	81	32.8

TABLE NO. 15

INCIDENCES OF ALCOHOLISM IN
HOMICIDES, SUICIDES, AND ACCIDENTS
1962-1963

Manner	Total Cases	Negative or No Test	0.01-0.04	0.05-0.09	0.10-0.14	0.15- and up	Per ** cent of Incidence of Alcoholism
Homicides.....	330	193	9	19	24	85	41.5
Suicides.....	1,136	814	31	64	60	167	28.3
Home accidents..	1,196	1,149	2	5	4	36	3.9
Other fatal accidents....	702	695	-	-	1	6	.9
Vehicular accidents*....	1,050	735	18	40	65	192	30.0
Pedestrians.....	361	286	5	9	9	52	20.8
Passengers.....	236	170	5	15	22	24	28.0
Drivers.....	453	279	8	16	34	116	38.4

* Includes pedestrians, passengers, and drivers.
** Includes figures contained in Table No. 11.

TABLE NO. 16

DEATHS BY AGE GROUPS -- 1961-1962

Age Groups	Classification				Total
	Natural	Accident	Suicide	Homicide	
Stillbirths.....	67				67
Under 1 month.....	83	9		1	93
1 month-1 year.....	394	48		6	448
1 year-15 years....	114	274	2	13	403
15 years-30 years..	97	388	122	93	700
30 years-40 years..	303	266	166	80	815
40 years-50 years..	799	270	223	51	1,343
50 years-60 years..	1,468	283	203	21	1,975
60 years-70 years..	1,734	339	119	15	2,207
Over 70 years.....	2,662	1,235	114	11	4,022
TOTAL.....	7,721	3,112	949	291	12,073

TABLE NO. 17

DEATHS BY AGE GROUPS -- 1962-1963

Age Groups	Classification				Total
	Natural	Accident	Suicide	Homicide	
Stillbirths.....	81				81
Under 1 month.....	71	10		1	82
1 month-1 year.....	384	38		2	424
1 year-15 years....	113	238	4	18	373
15 years-30 years..	110	442	167	105	824
30 years-40 years..	293	265	204	81	843
40 years-50 years..	889	304	277	62	1,532
50 years-60 years..	1,484	313	226	28	2,051
60 years-70 years..	1,874	301	116	24	2,315
Over 70 years.....	2,607	1,233	142	9	3,991
TOTAL.....	7,906	3,144	1,136	330	12,516

mi-de	Total
	67
1	93
6	448
13	403
93	700
80	815
51	1,343
21	1,975
15	2,207
11	4,022
291	12,073

mi-de	Total
	81
1	82
2	424
18	373
05	824
81	843
62	1,532
28	2,051
24	2,315
9	3,991
30	12,516

TABLE NO. 18

LABORATORY TESTS, ETC.

	1961-62	1962-63	TOTAL
Microscopic examinations....	16,868	19,125	35,993
Toxicological examinations..	4,384	5,032	9,416
Bacteriological examinations.....	9	180	189
Special tissue stains.....	91	200	291
Cytology examinations.....	186	183	369
Routine tissues filed (Hold Jars).....	5,056	5,478	10,534
TOTAL.....	26,594	30,198	56,792

TABLE NO. 19

PHOTOGRAPHY

	1961-62	1962-63	TOTAL
Negatives made and processed.....	1,678	2,145	3,823
Black and white prints made and processed.....	3,411	4,316	7,727
Color slides.....	62	42	104
Black and white slides.....	9	5	14
Black and white microscopic slides.....	6	0	6
X-rays.....	41	100	141
Enlargements.....	40	19	59
Taken at scene.....	488	600	1,088
TOTAL.....	5,735	7,227	12,962

TABLE NO. 20

MISCELLANEOUS DATA

	1961-62	1962-63	TOTAL
Bodies embalmed.....	4,092	4,210	8,302
Bodies embalmed for which fees were collected.....	3,597	3,745	7,342
Number of Inquest Hearings....	336	283	619
Non-coroner's cases (cases reported to the Coroner and found not to be coroner's cases but requiring notification be sent to the Health Department).....	2,844*	3,303	6,147

* Estimate - actual figures not available.

EXPENDITURES

	1961-62	1962-63
Salaries and Wages.....	$695,331.70	$741,343.52
Services and Supplies.....	55,127.10	63,423.74
Capital Outlay.....	25,336.88	2,665.69
TOTAL.....	$775,795.68	$807,432.95

REVENUE COLLECTED

	1961-62	1962-63
Embalming Fees.....	$89,800.00	$93,449.95
Sale of Documents.....	7,328.49	9,037.19
Witness Fees.....	473.49	296.05
Refund of Transportation.....	807.50	973.51
TOTAL.....	$98,409.48	$103,756.70

TABLE NO. 21

COST COMPARISONS

County	Year	System	Population*	Annual Budget	Cases Handled	Cost Per Capita
New Orleans, Louisiana	1961	Coroner	627,525	$143,570.00	4,197	.2288
San Diego, California	1961	Coroner and Public Administrator	1,033,011	$198,412.00	1,766	.1927
Baltimore, Maryland (State)	1961	Post Mortem Medical Examiners	3,100,689	$326,610.31	5,706	.1054
Los Angeles, California	1960 to 1961	Medical Examiner-Coroner	6,038,771	$695,804.85	10,825	.1152

*Population figures based on the 1964 World Almanac census of 1960.

A P P E N D I X

REPORTABLE DEATHS TO THE CORONER

The Government Code of the State of California, Section 27491, directs the Coroner to inquire into and determine the circumstances, manner, and cause of the following deaths which are immediately reportable to the Coroner:

(1) Without medical attendance.

(2) Wherein the deceased has not been attended by a physician within 10 days prior to death.

(3) Where the attending physician is unable to state the cause of death.

(4) Known or suspected homicides.

(5) Known or suspected suicides.

(6) Where the deceased died as a result of an accident.

(7) Related to or following known or suspected self-induced or criminal abortion.

(8) Therapeutic misadventures.

(9) Accidental poisoning (food, chemical, drugs, therapeutic agents.)

(10) Poison deaths.

(11) Drowning, fire, hanging, gunshot, stabbing, cutting, strangulation, exposure, heat prostration, alcoholism, drug addiction, aspiration deaths, and suffocation.

(12) Occupational diseases or occupational hazards.

(13) Known or suspected contagious diseases constituting a public hazard.

(14) All deaths of unattended persons.

(15) Under such circumstances as to afford a reasonable ground to suspect that the death was caused by the criminal act of another.

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DUTIES, FUNCTIONS, AND RESPONSIBILITIES OF THE CHIEF MEDICAL EXAMINER-CORONER

The duties of the Coroner are set up in the Government Code as follows:

Section 27491, Government Code:

"It shall be the duty of the coroner to inquire into and determine the circumstances, manner, and cause of all violent, sudden or unusual deaths; unattended deaths; deaths wherein the deceased has not been attended by a physician in the 10 days before death; deaths related to or following known or suspected self-induced or criminal abortion; known or suspected homicide, suicide, or accidental poisoning; deaths known or suspected as resulting in whole or in part from or related to accident or injury either old or recent; deaths due to drowning, fire, hanging, gunshot, stabbing, cutting, exposure, starvation, alcoholism, drug addiction, strangulation, or aspiration; death in whole or in part occasioned by criminal means; deaths associated with a known or alleged rape or crime against nature; deaths in prison or while under sentence; deaths known or suspected as due to contagious disease and constituting a public hazard; deaths from occupational diseases or occupational hazards; deaths under such circumstances as to afford a reasonable ground to suspect that the death was caused by the criminal act of another, or any deaths reported by physicians or other persons having knowledge of death for inquiry by the coroner. Inquiry in this section does not include those investigative functions usually performed by other law enforcement agencies."

EXAMINATION, IDENTIFICATION, REMOVAL, AND NON-DISTURBANCE OF THE BODY.

Section 27491.2, Government Code:

"The coroner or his appointed deputy, on being informed of a death and finding it to fall into the classification of deaths requiring his inquiry, may immediately proceed to where the body lies, examine the body, make identification, make inquiry into the circumstances, manner, and means of death, and, as circumstances warrant, either order its removal for further investigation or disposition, or release the body to the next of kin. For purposes of inquiry, the body of one who is known to be dead under any of the circumstances enumerated in Section 27491 shall not be disturbed or moved from the position or place of death without permission of the coroner or his appointed deputy."

TAKING CHARGE OF PERSONAL EFFECTS AND PROPERTY.

Section 27491.3, Government Code:

"In any death into which the coroner is to inquire, he may take charge of any and all personal effects, valuables,

and property of the deceased at the scene of death and hold or safeguard them until lawful disposition thereof can be made. He may, in his discretion, lock the premises and apply a seal to the door or doors prohibiting entrance to the premises, pending arrival of a legally authorized representative of the deceased; provided that this shall not be done in such a manner as to interfere with the investigation being conducted by other law enforcement agencies. Any costs arising from the premises being locked or sealed while occupied by property of the deceased may be a proper and legal charge against the estate of the deceased. Any such property or evidence related to the investigation or prosecution of any known or suspected criminal death may, with knowledge of the coroner, be delivered to a law enforcement agency or district attorney, receipt for which shall be acknowledged."

Section 27491.3, Government Code:

".....It shall be unlawful for any person to search for or remove any papers, moneys, valuable property or weapons constituting the estate of the deceased from the person of the deceased or from the premises, prior to arrival of the coroner or without his permission. At the scene of any death, when it is immediately apparent or when it has not been previously recognized and the coroner's examination reveals that police investigation or criminal prosecution may ensue, the coroner shall not further willfully disturb the body or any related evidence until the law enforcement agency has had reasonable opportunity to respond to the scene, if their purposes so require and they so request."

MEDICAL DUTIES.

Section 27491.4, Government Code:

"For purposes of inquiry the coroner may, in his discretion, take possession of the body which shall include the authority to exhume such body, order it removed to a convenient place, and make or cause to be made a post mortem examination or autopsy thereon, and make or cause to be made an analysis of the stomach, stomach contents, blood, organs, fluids, or tissues of the body.....He shall have the right to retain only such tissues of the body removed at the time of the autopsy as may, in his opinion, be necessary or advisable to the inquiry into the case, or for the verification of his findings. No person may be present during the performance of a coroner's autopsy without the express consent of the coroner."

RECORDING DUTIES.

Section 27491.4, Government Code:

".....The detailed medical findings resulting from an inspection of the body or autopsy by an examining physician shall be either reduced to writing or permanently

preserved on recording discs or other similar recording media, shall include all positive and negative findings pertinent to establishing the cause of death in accordance with medico-legal practice and this, along with the written opinions and conclusions of the examining physician, shall be included in the coroner's record of death."

ISSUANCE OF CERTIFICATE OF DEATH.

Section 27491.5, Government Code:

"The cause of death appearing on a certificate of death signed by the coroner shall be in conformity with facts ascertained from inquiry, autopsy and other scientific findings. In case of death without medical attendance and without violence, casualty, criminal or undue means, the coroner may, without holding an inquest or autopsy, make the certificate of death from statements of relatives, persons last in attendance, or persons present at the time of death, after due medical consultation and opinion has been given by one qualified and licensed to practice medicine and so recorded in the records of death, providing such information affords clear grounds to establish the correct medical cause of death within accepted medical practice and within the requirements for accuracy prescribed by the Division of Vital Statistics of the State Department of Public Health. The coroner shall not finally exclude crime, suicide, or accident as a cause of death because of lack of evidence."