2002 Annual Report

Los Angeles County Department of Coroner

Gloria Molina

Supervisor, First District

Yvonne Brathwaite Burke

Supervisor, Second District

Zev Yaroslavsky

Supervisor, Third District

Don Knabe

Supervisor, Fourth District

Michael D. Antonovich

Supervisor, Fifth District

On December 7, 1990, an ordinance approved by the County of Los Angeles Board of Supervisors created a Department of Coroner administered by a nonphysician director for all nonphysician operations, while retaining the Chief Medical Examiner-Coroner to set standards for the entire department and carry out statutorily mandated Coroner functions.

The ordinance placed the responsibility for all physician staff under the control the Chief Medical Examiner-Coroner, subject to the general direction of the Board of Supervisors, and the nonphysician director was given authority to manage/direct all nonphysician operations and staff within the department, subject to the general direction of the Board of Supervisors.

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2002 accomplishments

Department Heads' Message

During this last year the Department accomplished many goals and continues to strive for excellence in all endeavors. Our purpose of improving the quality of life in Los Angeles County by providing responsive, efficient and high quality public service to all we serve, continues. This report contains statistical information from the Los Angeles County Department of Coroner for the year 2002, as well as selected statistics from the previous 11 years. In 2002, the Department of Coroner improved its ability to communicate with other agencies and planned for future needs, including the following:

- Completed the E-Commerce project designed to permit the credit card purchasing of Coroner Memorabilia over the Internet, resulting in additional revenues for the department.
- Developed a strategic plan with specific goals for improving service to the public.
- Received recognition from the Los Angeles County Quality & Productivity Commission for performance measurement.
- Worked with the California State Coroners Association (CSCA) to develop and implement an advanced training curriculum for Coroners Investigators, which meets the California State Peace Officers Standards and Training (POST)
- First used videoconferencing to coordinate exhibit preparation with the District Attorney for the successful criminal proceeding in a multiple fatality crime in Kern County. The National Association of Counties recognized the Department for its achievements in videoconferencing.
- Hired a marketing analyst to coordinate and enhance the departments marketing services to include e-commerce cash register services, document services, professional witness testimony, gunshot residue services and other related functions.
- Under the direction of the California Department of Health Services, participated in the revision of the format for the California Death Certificate.
- Worked with the California State Coroner's Association (CSCA) and the State Office of Emergency Services to revise the Mutual Aid Response Manual for Coroner's throughout the state.
- Continued the implementation/funding phase of the Coroner Annex designed to separate the biological functions of the department, which include autopsy, Laboratories, decedent storage and evidence control.
- Held the West Coast Seminar, "Handling Death in a Diverse Society"

The Department of Coroner has developed programs to improve efficiency, generate revenue, and train pathologists and other physicians.

- The Department trains pathologists in the subspecialty of forensic pathology, and also trains residents in pathology, neuropathology, emergency medicine, and other specialties.

can-do attitude

accountability

compassion

commitment

integrity

professionalism

diversity

responsiveness

public value

civic innovation

public trust

effective

caring

- Nationally recognized accreditation programs ensure high-quality service. The Department is accredited by the National Association of Medical Examiners until 2006, American Society of Crime Laboratory Directors until 2008, California Medical Association (continuing medical education) until 2008, and the Accreditation Council of Graduate Medical Education (residency) until 2005. The Department is also certified to provide credit under Peace Officers Standards and Training.
- Skeletons in the Closet, the Coroner's marketing program, has been very successful in generating additional revenue. The Department of Coroner is also active in community service, including countywide projects and Department projects.
- The Youthful Drunk Driver Visitation Program provides classes for individuals at risk for drunk driving accidents. Access to this program is by court order.
- The Department provides mass casualty training for hospitals, medical groups, and large corporations throughout the county.
- The Coroner participates in the Interagency Child Abuse Network, working with other county agencies to improve child protective services.
- Regional offices are open in the Santa Clarita Valley, Antelope Valley, and South Bay areas. These offices improve responsetime to calls in their respective areas.

Legislation

During the year 2002, new laws affected the functions of the Department of Coroner.

- AB 1872 – Establishes procedures for the Coroner, in the event of a mass fatality, to submit a single petition to the Superior Court for an order to judicially establish the fact of, and the time and place of, the deaths of the victims. (California Health & Safety Code 103450).
- HR 3162 – Provides grants to state and local agencies in 2002 to 2007 to enhance preparation for and response to terrorist acts (Title 42, United States Code, section 3714).

Goals

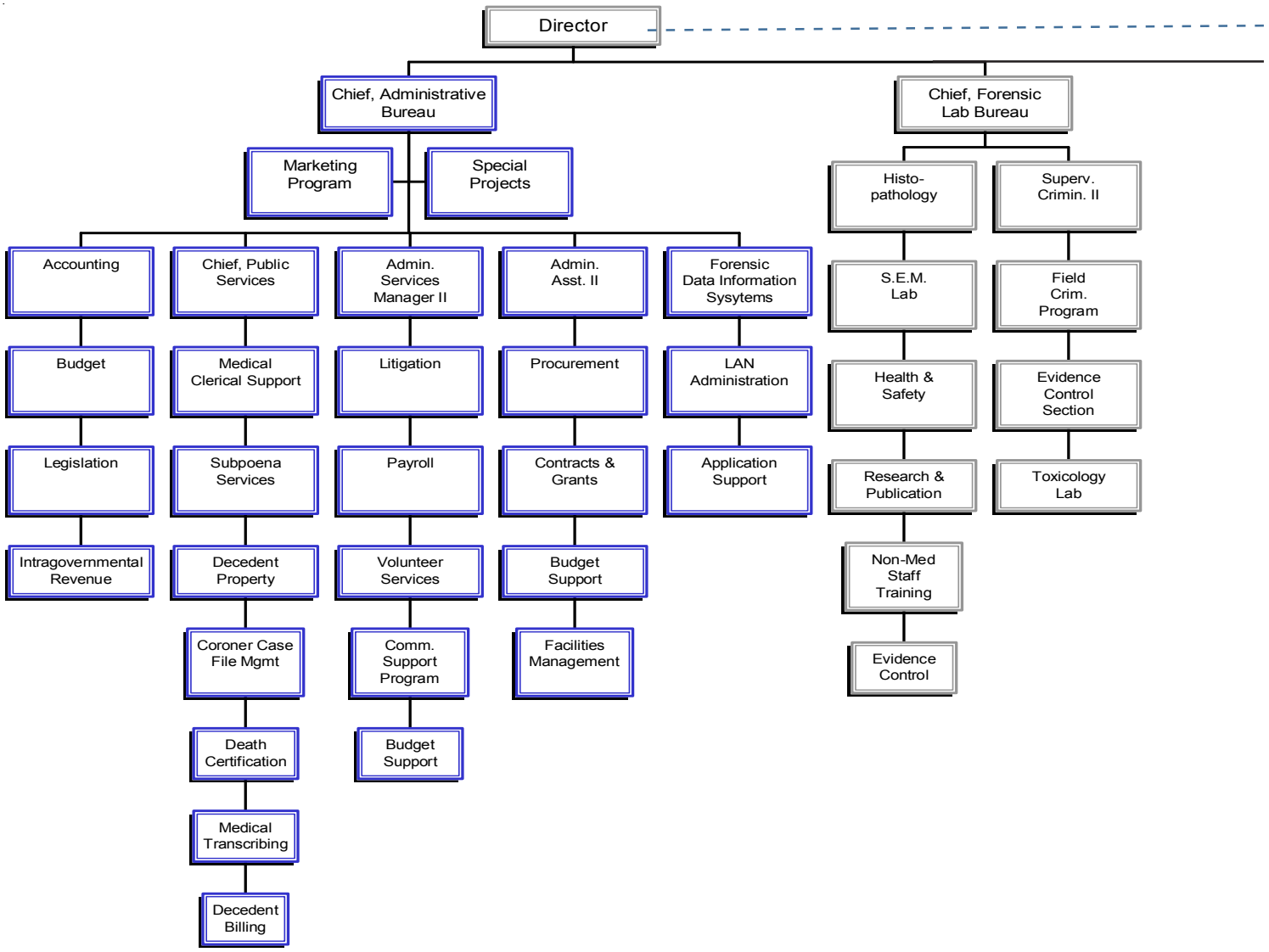
During the coming year, the Department of Coroner has the following goals:

- Work with the CAO and consulting firm Fuller & Coe to facilitate retrofitting of the coroner's HVAC system in the building at 1104 North Misssion Road and facilitate relocation of appropriate staff into other areas.
- Reorganize and restructure the department's photography laboratory to secure and safeguard coroner photos, negatives, and radiographs.
- Update the Deputy Medical Examiners' Manual, in compliance with accreditation standards of the National Association of Medical Examiners.
- Develop procedures for videoconferencing with County agencies, attorneys, and other Coroner's offices.
- Improve the turnaround time of Coroner's reports.

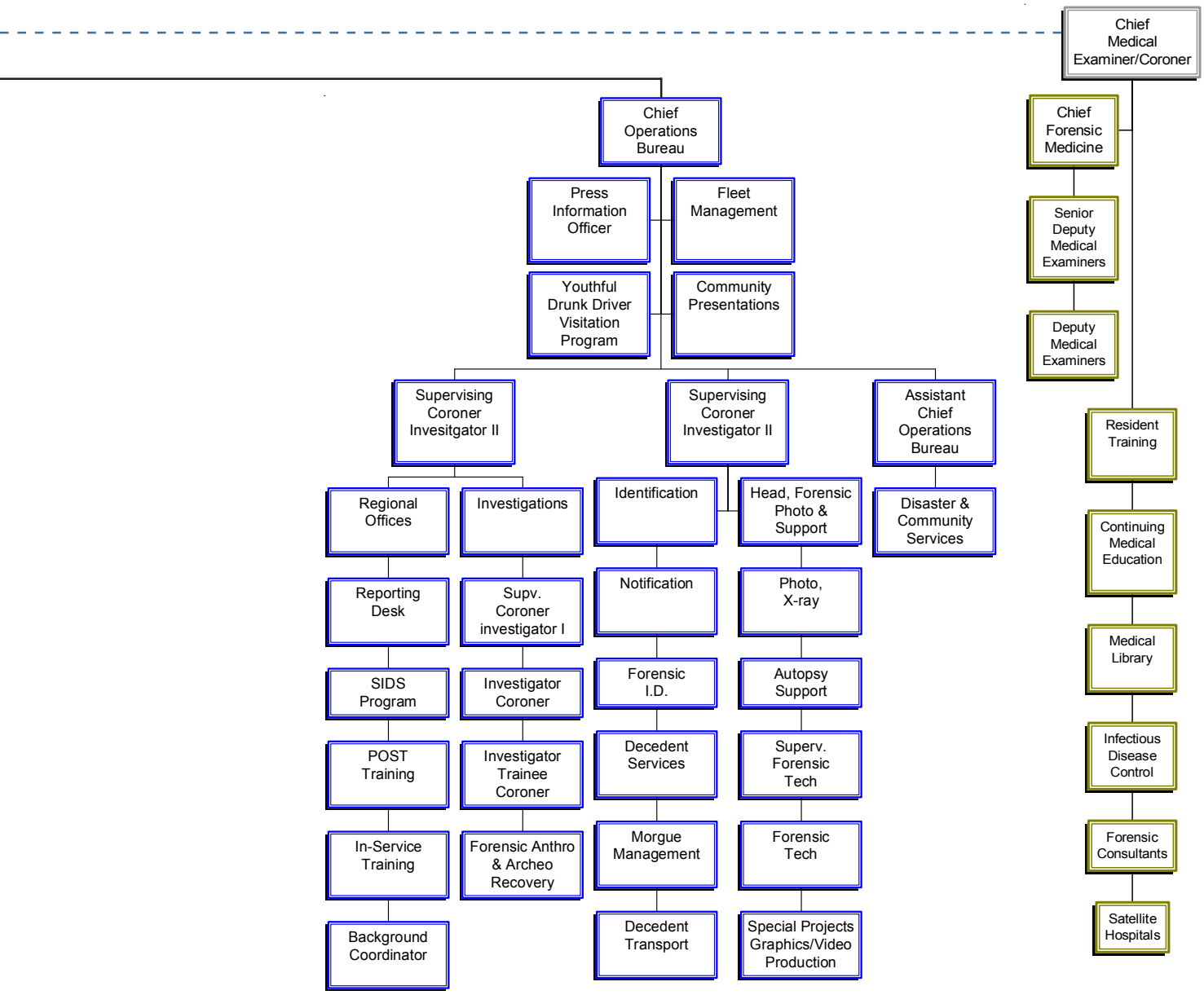
Anthony Hernandez
Director, Department of Coroner

Lakshmanan Sathyavagiswaran, M.D.
Chief Medical Examiner-Coroner

D e p a r t m e n t


Director
Chief, Administrative Bureau
Chief, Forensic Lab Bureau
Marketing Program
Special Projects
Accounting
Budget
Legislation
Intragovernmental Revenue
Chief, Public Services
Medical Clerical Support
Subpoena Services
Decedent Property
Coroner Case File Mgmt
Death Certification
Medical Transcribing
Decedent Billing
Admin. Services Manager II
Litigation
Payroll
Volunteer Services
Comm. Support Program
Budget Support
Admin. Asst. II
Procurement
Contracts & Grants
Budget Support
Facilities Management
Forensic Data Information Sysytems
LAN Administration
Application Support
Histo-pathology
S.E.M. Lab
Health & Safety
Research & Publication
Non-Med Staff Training
Evidence Control
Superv. Crimin. II
Field Crim. Program
Evidence Control Section
Toxicology Lab

# of Coroner 2002



Administrative Services Bureau

■ Chief, Sarah Ahonima

The Administrative Services Bureau is responsible for all departmental financial operations, departmental budget preparation, fiscal reports, personnel, payroll, litigation, procurement, accounting, revenue collection, marketing, volunteer services, affirmative action, contracts and grants, internal control certification, workfare program, facilities management, and other related functions. The accounting section is responsible for all financial transactions performed by the Department of Coroner. All Auditor- Controller guidelines are followed as well as any departmental guidelines governing monetary issues.

"We strive to effectively serve our internal and external customers

ACCOUNTING SECTION

Accounting Section monitors all Departmental accounts, such as salary and benefits, overtime expenditures, services and supplies, and budget.

HUMAN RESOURCES

Human Resources is responsible for personnel issues which are inherent to County government, such as benefits, processing examinations, filling vacant positions, litigation, workers compensation, volunteer services, payroll, community support programs such as job fairs, and budgetary support.

PROCUREMENT

Procurement is responsible for purchasing equipment, maintenance of buildings, contracts, budgetary support, monitoring of fixed assets, and inventory control.

MARKETING PROGRAM

"Skeletons in the Closet" has been operating since September 1993. Given the scarcity of resources at that time, revenue generation had to be considered to help offset monetary losses. The intent was to use monies raised to offset some of the costs associated with the Youthful Drunk Driver Visitation Program (YDDVP), as well as other Coroner needs. "Skeletons in the Closet" features a complete line of quality souvenir items, such as beach towels, shirts, toe tags, and much more. The items are available to the public via Web site at LACORONER.COM or by calling (323) 343-0760.

■ *County Mission*

To enrich lives through effective and caring service.

Administraive Services
1104 North Mission Road
Los Angeles, CA 90033
Tel: 323 343 0784
Fax: 323 221 9768

CONTRACT PROGRAMS

The Department administers contracts and agreements for various functions, such as tissue harvesting, regional offices, satellite hospitals, histopathology, transcribing, contract physicians, and urine drug screening for the Los Angeles County Superior Court. The staff monitors and studies Department operations in the continuing evaluation of the appropriateness of contracting for other functions.

MORTUARY BILLING PROGRAM

The Department now utilizes the services of the various mortuaries to bill for transportation and storage costs at the time services are being billed to the families. This has improved the collection rate, dramatically raising revenues.

SIDS PROGRAM (SB90)

The Department participates in the Sudden Infant Death Syndrome (SIDS) Interagency Council, and actively recovers cost from the State for fulfilling SIDS protocol requirements.

FORENSIC DATA INFORMATION SYSTEMS

The mission of Forensic Data Information Systems is to enhance and support the Department's long-range goals, mission critical business goals and objectives through the administration, project management, and expansion of information technology-related applications and services, including, where appropriate, the delivery of services to agencies referred through appropriate 24/7 e-government technologies.

The FDIS is alsoresponsible for network, database and application administration, preparation of statistics and general client support. The FDIS is responsible to ensure that the Department is in alignment with the County-wide strategic planning effort to conduct county business electronically and maintain compliance with the technological directives as stipulated by the County's Chief Information Officer. The FDIS manages the information technology efforts of subcontractors in the implementation and support of new technologies such as e-commerce content management and voice over internet protocol (VoIP).

"If our products make someone think about life a little more, then we have succeeded".

Accounting

Human Resources

Procurement

Marketing

Contract Programs

Mortuary Billing

SIDS Prgram (SB90)

Forensic Data Information Systems

Forensic Medicine Division

■ Chief, Christopher Rogers, M.D.

The Forensic Medicine Division's full-time permanent staff consists of board certified forensic pathologists who are responsible for the professional medical investigation and determination of the cause and mode of each death handled by the department. Our physicians are experts in the evaluation of sudden unexpected natural deaths and unnatural deaths such as deaths from firearms, sharp and blunt force trauma, etc. Physicians are frequently called to court to testify on cause of death and their medical findings and interpretations, particularly in homicide cases. In addition, the division has consultants in forensic neuropathology, archeology, odontology, anthropology, anesthesiology, pediatrics, surgery, ophthalmologic pathology, pulmonary pathology, pediatric forensic pathology, cardiac pathology, emergency room medicine, psychiatry, psychology and radiology to assist the deputy medical examiners in evaluating their cases.

"We always go the extra mile to achieve our mission"

MEDICAL EDUCATION

The Department is approved by the California Medical Association for Continuing Medical Education activities.

HEALTH & SAFETY/RISK MANAGEMENT

The Department has implemented an aggressive health & safety committee and risk management program, which has significantly reduced work-related injuries.

ICAN

The Department participates in the Interagency Council for Child Abuse and Neglect. This Department is the host of the monthly Child Death Review Committee of ICAN.

IDENTIFICATION OF UNIDENTIFIED BODIES (SB90)

The Department participates in a state-mandated program to examine dental records and collect appropriate specimens for the identification of John and Jane Does.

MEDICAL EXAMINER CORONER ALERT PROJECT

The Department of Coroner reports to the Consumer Product Safety Commission all deaths resulting directly from unsafe consumer products.

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Forensic Medicine Division
1104 North Mission Road
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Fax: 323 225 2752

RESIDENCY PROGRAM

The Medical Division of the Department of Coroner has an Accreditation Council for Graduate Medical Education approved forensic pathology residency program designed to train deputy medical examiners and prepare them for board certification while performing medical investigations under appropriate supervision.

SCUBA PROGRAM

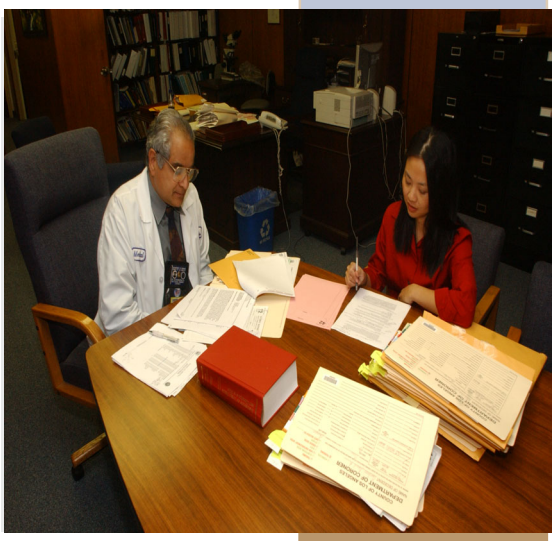
The Department staff participates in the Los Angeles County Interagency Scuba Committee to investigate and develop programs to prevent future scuba diving fatalities.

SIDS PROGRAM (SB90)

The Department participates in the Sudden Infant Death Syndrome (SIDS) Interagency Council, and actively recovers cost from the state for fulfilling SIDS protocol requirements.

TISSUE HARVESTING/ORGAN TRANSPLANTATION

This program provides corneas and other tissues to all in need in our community through coordinated efforts with various tissue banks and hospitals. After family consent is obtained, our medical staff provides review of organ and tissue procurement in Coroner's cases. In addition, the program makes tissue available to low-income and indigent patients at county hospitals at no cost to the patients or hospitals.



UNIVERSITY HOSPITAL PATHOLOGY RESIDENT TRAINING PROGRAM

We offer the opportunity for pathology residents from local university affiliated hospitals (USC, UCLA, and others) to train in our office with costs paid by the hospitals. This program fosters positive relationships with the university hospitals' pathology departments, and improves the standard of practice of forensic medicine in general, as these pathology residents will be practicing in the community when they finish training.

"We take the action needed in a timely manner"

Medical Education

Health & Safety

Risk Management

ICAN

Identification of Unidentified Bodies (SB90)

MECAP

Residency Program

Scuba Program

SIDS Program (SB90)

Tissue Harvesting

Organ Transplantation

University Hospital Pathology Resident Program

Forensic Laboratories Division

Chief, Joseph Muto, D-ABC

The Forensic Science Laboratories Bureau is responsible for the identification, collection, preservation, and analysis of physical and medical evidence associated with Coroner's cases. Our mission is to conduct a comprehensive scientific investigation into the cause and manner of any death within the Coroner's jurisdiction. This is accomplished through the chemical and instrumental analysis of physical and medical evidence.

Our goal is to provide our medical examiners, families of decedents, outside investigating agencies, and the judicial system with timely, accurate, and state-of-the-art forensic analyses, and to provide expert interpretation of those analyses.

The Forensic Laboratory is fully accredited by the prestigious American Society of Crime Laboratory Directors, and our Forensic Blood Alcohol testing program is licensed by the State of California.

"We approach each challenge believing that, together, a soulution can be reached"

CRIMINALISTICS

Our team of specially trained forensic scientists is on call twenty-four hours a day to respond to crime scenes for the proper documentation, collection, and preservation of physical evidence.

HISTOLOGY

This laboratory facilitates the preparation of gross tissue specimens for microscopic examination by the medical staff. This includes hematoxylin and eosin stains, special stains, and immunohistochemical stains. Through the microscopic examination of tissue, our forensic pathologists can determine the age and degree of injury, diagnose disease including cancers, evaluate cellular variation in tissue, and identify the presence of bacteria, medical disorders, and toxins such as asbestos.

TOXICOLOGY

Using state of the art equipment and methods, the toxicology laboratory conducts chemical and instrumental analyses on post-mortem specimens to determine the extent that drugs may have contributed to the cause and manner of death. The laboratories' experienced forensic toxicologists

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Forensic Laboratories Division
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offer expert drug interpretation which assist the medical examiners in answering questions like what drug was taken? How much and when was the drug taken? Did the drug contribute to the cause and/or manner of death? Was the drug use consistent with therapeutic administration, or was it an abuse? If the death is due to a drug overdose, was it intentional or accidental?

SCANNING ELECTRON MICROSCOPY LAB

Our SEM laboratory conducts gunshot residue (GSR) analyses and tool mark evaluations. Using a scanning electron microscope equipped with an energy dispersive x-ray detector, GSR analysis is used to determine whether an individual may have fired a weapon. Our laboratory also performs GSR analyses for many law enforcement agencies throughout California.

Tool mark analysis involves the evaluation of trauma to biological material, especially bone and cartilage, as to the type of instrument that might have produced the trauma. This not only helps our pathologists understand the circumstances of a death, but also aids the law enforcement agency in their criminal investigation.

EVIDENCE CONTROL

Our evidence personnel are responsible for maintaining the integrity and chain of custody for all of the evidence collected from Coroner's cases. All of the physical evidence collected by Department investigators, criminalists, pathologists, forensic technicians and forensic attendants is documented and maintained by the evidence control unit.

"We perform to a high standard of excellence"

Operations Bureau

■ Chief, Craig Harvey, D-ABMDI

This bureau is responsible for the 24-hour day, 7-day week operations of many direct services provided by the department. The Bureau oversees Investigations, Forensic Photography and Support, and the Forensic Services Division. In addition, the bureau is responsible for disaster and community services, fleet management, and other ancillary programs such as regional satellite offices and the Youthful Drunk Driver Visitation Program (YDDVP).

Coroner Investigators are also responsible for testimony in court and disposition on Coroner cases along with preparation of investigative reports for use in the determination of cause and mode of death.

Under state law, all Coroner Investigators are sworn peace officers. The Department of Coroner is a California Peace Officer Standards and Training (P.O.S.T.) certified agency.

"We accept responsibility for the decisions we make and the actions we take"

IDENTIFICATION OF UNIDENTIFIED BODIES (SB90)

The department participates in a state-mandated program to examine dental records of known missing persons to aid in the identification of John and Jane Does. In addition, more recent changes in the law have required that DNA specimens be collected from unidentified remains and sent to the State of California DNA lab in Richmond, California.

NURSING HOME DEATHS (SB90)

The department participates in a state-mandated program to investigate certain nursing home deaths to determine whether a death may be certified as natural by a private physician or handled as a Coroner's case.

Peace Officer Standards Training

The California State Commission on Peace Officer Standards and Training (P.O.S.T.) establishes minimum standards for selection and training requirements for peace officers. We comply with the regulations of the Commission for the Basic Specialized Investigator Program.

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Operations Bureau
1104 North Mission Road
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REGIONALIZATION-SATELLITE OFFICES

Investigative capabilities have been extended to offices in the Antelope Valley, Santa Clarita Valley and South Bay areas of Los Angeles County. Efforts are underway to expand regional efforts to the eastern portion of Los Angeles County. Regional offices provide a more rapid Coroner's response to the scene of death, which results in rapid mitigation of traffic obstructions.

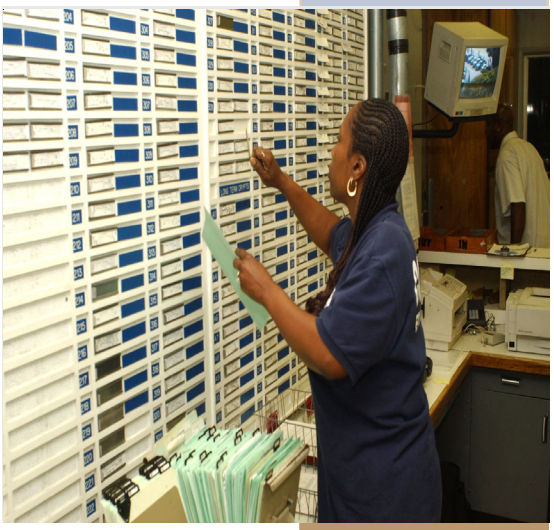
YOUTHFUL DRUNK DRIVER VISITATION PROGRAM

The Department of Coroner has presented the YDDVP program since 1989 as an alternative sentence option that can be considered by the courts. The program is designed to present the consequences of certain behavior in a manner that has an impact and is also educational. The program is currently offered up to 12 times per month and includes classes presented completely in Spanish.

"We value the uniqueness of every individual and their perspective"

DISASTER PREPARATION AND RESPONSE

The program ensures appropriate departmental response as one of the eight lead county agencies to major disasters and significant smaller incidents that involve multiple fatalities requiring successful operation of an Emergency Operation Center (EOC) and field command posts. These efforts may include coordinated activity with major airports, homeland defense agencies, law enforcement, the State Office of Emergency Services, and mutual aid from Coroners throughout the state. The program provides planning support through participation in emergency planning and exercises and also through up-to-date manuals. A plan has been developed to form public/private emergency response partnership with local funeral and cemetery directors for a mass fatality management response system. The Department maintains emergency communications equipment, which includes a command post trailer, County Wide Integrated Radio System (CWIRS) radio communications, a mobile command post, and appropriate ancillary communications equipment. The department also has eleven disaster cache trailers situated throughout the County. The Department has emergency short-wave radio communications ability as well.



Identification of Unidentified Bodies (SB90)

Nursing Home Deaths (SB90)

P.O.S.T.

Regionalization-Satellite Offices

Youthful Drunk Driver Visitation Program (YDDVP)

Disaster Preperation and Response

Operations Bureau 2002

INVESTIGATIONS

The Investigations Division responds to the scenes of death throughout Los Angeles County twenty-four hours a day, seven days per week. It is the responsibility of the Coroner Investigator to function as the eyes and ears of the Deputy Medical Examiner, ensure that State law is followed with respect to Coroner cases and be the advocate for the deceased person. Due to the diverse caseload in Los Angeles County, the Coroner Investigator is in the important position of seeing every death that occurs under other than natural conditions and is often the first to identify serial deaths and consumer product safety issues.

SPECIAL OPERATIONS AND RESPONSE TEAM (SORT)

The Department of Coroner has fielded a specialized response unit comprised of Coroner Investigators, Coroner Criminalists, and Coroner Consultants in Anthropology and Archeology and as needed, Forensic Attendants and Forensic Technician Photographers.

The S.O.R.T. team has two special purpose vehicles fully equipped to handle certain types of cases thoroughly and as rapidly as possible.

The S.O.R.T. team responds to cases requiring specialized recovery and scene processing techniques such as those required in aircraft crashes, buried bodies, scattered human remains and fires and also assists law enforcement agencies in general searches for scattered human remains or possible burial sites.

FORENSIC PHOTOGRAPHY & SUPPORT DIVISION

This division is responsible for providing direct support in the autopsy room to the deputy medical examiners. Staff duties include, but are not limited to, preparation of the bodies for medical examination and autopsy, assisting the deputy medical examiners in the performance of the autopsy, preparation and gathering of toxicology specimens, x-ray and photography and preparation of bodies for release to a mortuary.

"We approach each challenge believing that, together, a soulution can be reached"

Operations Bureau
1104 North Mission Road
Los Angeles, CA 90033
Tel: 323 343 0714
Fax: 323 224 3920

The division is also home to the Forensic Fingerprint Identification Unit that is responsible for post-mortem dental x-rays and specialized fingerprint processing to aid in the identification of Jane, John and Undetermined Does.

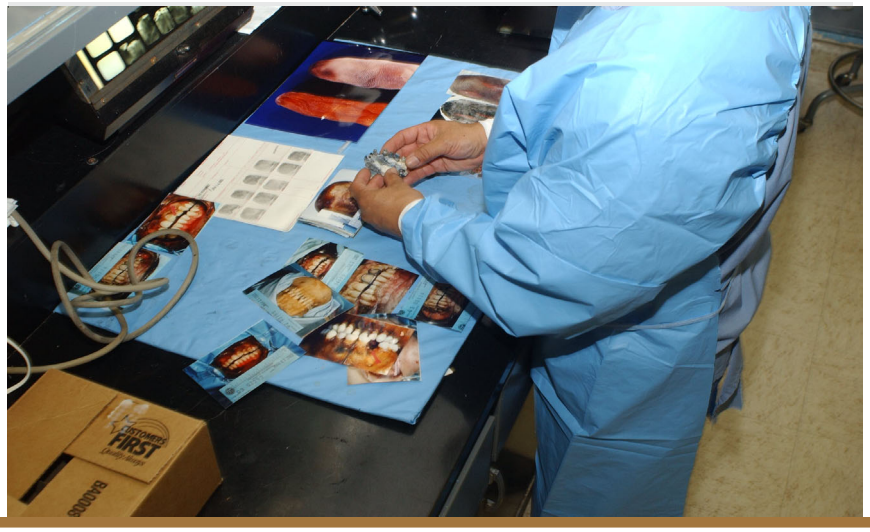
Personnel who have been specially trained also fulfill specialized audio-visual and graphic production requirements for the entire department as well as the courts.

FORENSIC SERVICES DIVISION

Personnel assigned to this unit are responsible for the transportation, processing, storage, and release of bodies that are under the jurisdiction of the Coroner. Bodies may be recovered from any death scene, in almost any environment imaginable, including those in public view, private homes, and hospitals. Decedent processing includes obtaining the height and weight of bodies, the collection, documentation and safekeeping of personal effects, and the collection of both physical and medical evidence, fingerprinting of decedents using LIVE-SCAN technology and placement of identification tags on the body. Bodies are maintained in refrigerated crypts while awaiting examination and release to mortuaries or for county cremation.

The Decedent Services Unit is responsible for crypt management of human remains prior to release for photography, x-ray and autopsy. Additionally, staff are responsible for the accountability of all human remains and specimens stored in the crypt areas.

"We perform to a high standard of excellence"



Public Services Division

■ Chief, Silvia Gonzales

This division is responsible for Coroner case file management, revenue collection (document sales, decedent billing, etc.), and interaction with the public both telephonically and at the front lobby reception area. In addition to providing information and copies of autopsy reports, Public Services staff offers many services to the public. These services include preparation of "Proof of Death" letters to verify that a death is being investigated by the Coroner and "Port of Entry" letters to confirm that a decedent had no communicable disease, necessary for the decedent's admission into a foreign country after death.

"We treat those we serve and each other in a kind and caring manner"

RECORDS SECTION

Records Section is responsible for Coroner Case file control, retention, document sales, and transportation billing. The Section handles over 2,500 telephone inquiries per month from the public and other agencies requesting information and Coroner reports. Revenue generated from documents, microscopic slides, photograph sales and transportation billing for a one year period totals over $1,200,000.00. The Coroner is mandated by Government Code to retain all files permanently; consequently the Department maintains 100+ years of records which are accessed on a regular basis at the request of the public. Since 1991 all inactive case files have been scanned (microfilm was previously utilized). Approximately 16,000 pages are copied from optical disk and microfilm to fill requests received from the public each year.

DEATH CERTIFICATION & MEDICAL/CLERICAL SECTION

The division is responsible for the completion and daily issuance of the Death Certificates to the mortuaries and preparation of amendments stating the final cause of death. Medical/Clerical Section is responsible for reporting SIDS cases to the state and local health agencies for follow up by those agencies. This section also provides secretarial and clerical support to the Deputy Medical Examiners.

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Public Services Division
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MEDICAL TRANSCRIBING SECTION

This section is responsible for the transcription of the autopsy report protocols, microscopic slide reports, neuropathology reports, etc. An outside contract is utilized for routine transcription and an in-house staff of three full-time employees is employed to handle rush, high-priority and sensitive cases. In a one-year period over 2,000 cases are transcribed by request of the law enforcement agencies, the families, hospitals and other outside agencies.

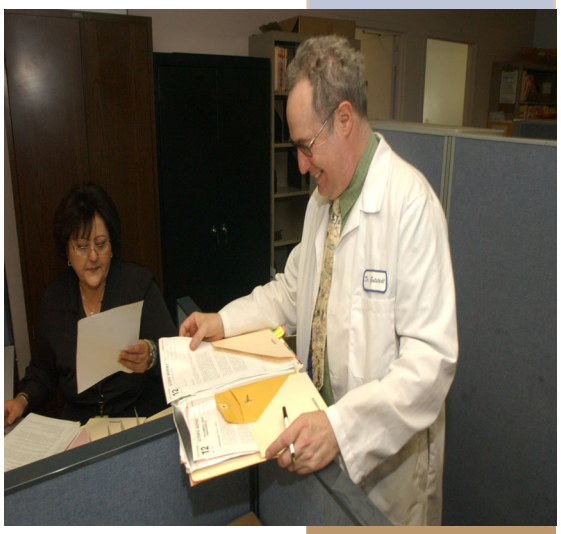
PERSONAL PROPERTY SECTION

Personal property of all decedents is brought to the Personal Property Section and safeguarded in a vault until release to the decedent's next-of-kin. The Department has three Personal Property Custodians who are responsible to receive and inventory the personal effects, contact the next-of-kin and arrange for delivery of the personal effects to the decedent's family. The Office of the Public Administrator is consulted when next-of-kin resides out of state or is unknown. The Custodians are also responsible for disposal of all unclaimed personal effects.

"We act consistent with our values"

SUBPOENA CONTROL

Approximately 4,000 subpoenas are received and processed by the Public Services Division Subpoena Control Section in a one-year period. This unit is responsible for the scheduling of all Deputy Medical Examiners for court appearances, depositions and appointments with law enforcement, district attorney and public defender staff and family members. The revenue generated by civil witness fees and collected by this section total approximately $55,000 per year.



Records Section

Death Certification and Medical Clerical Section

Medical Transcribing Section

Personal Property Section

Subpoena Control

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Accidental Deaths 35
Homocidal Deaths 40
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Natural Deaths 43
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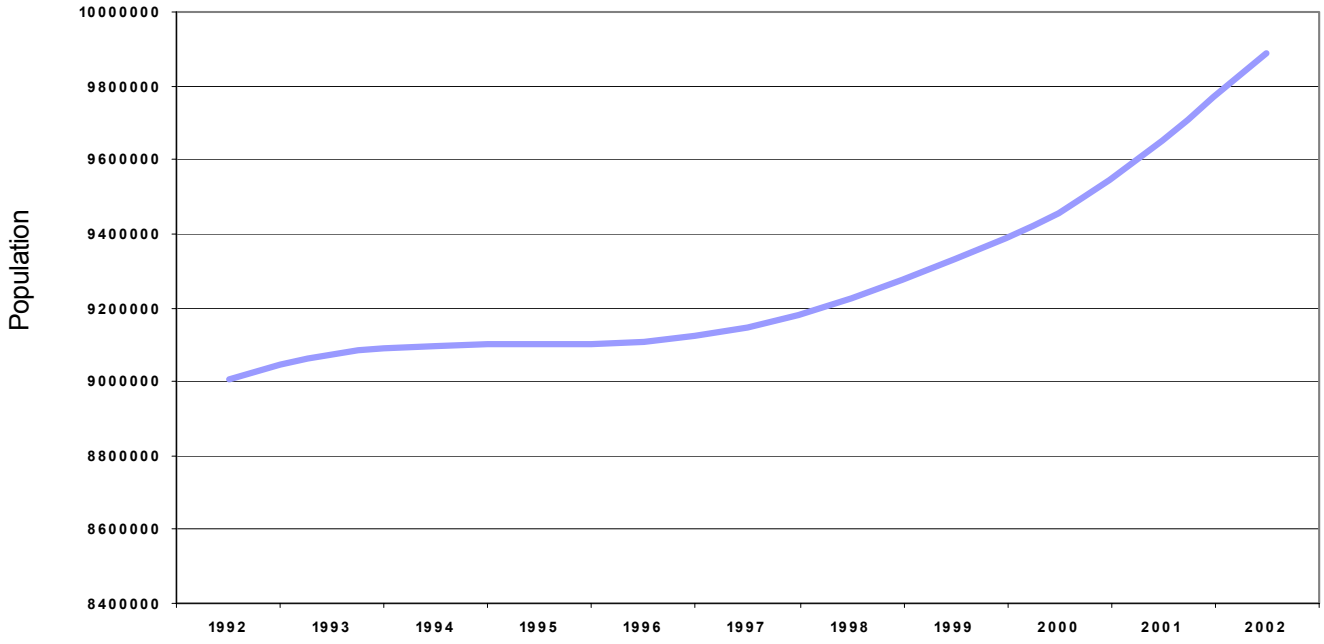
Statistics 1992 - 2002

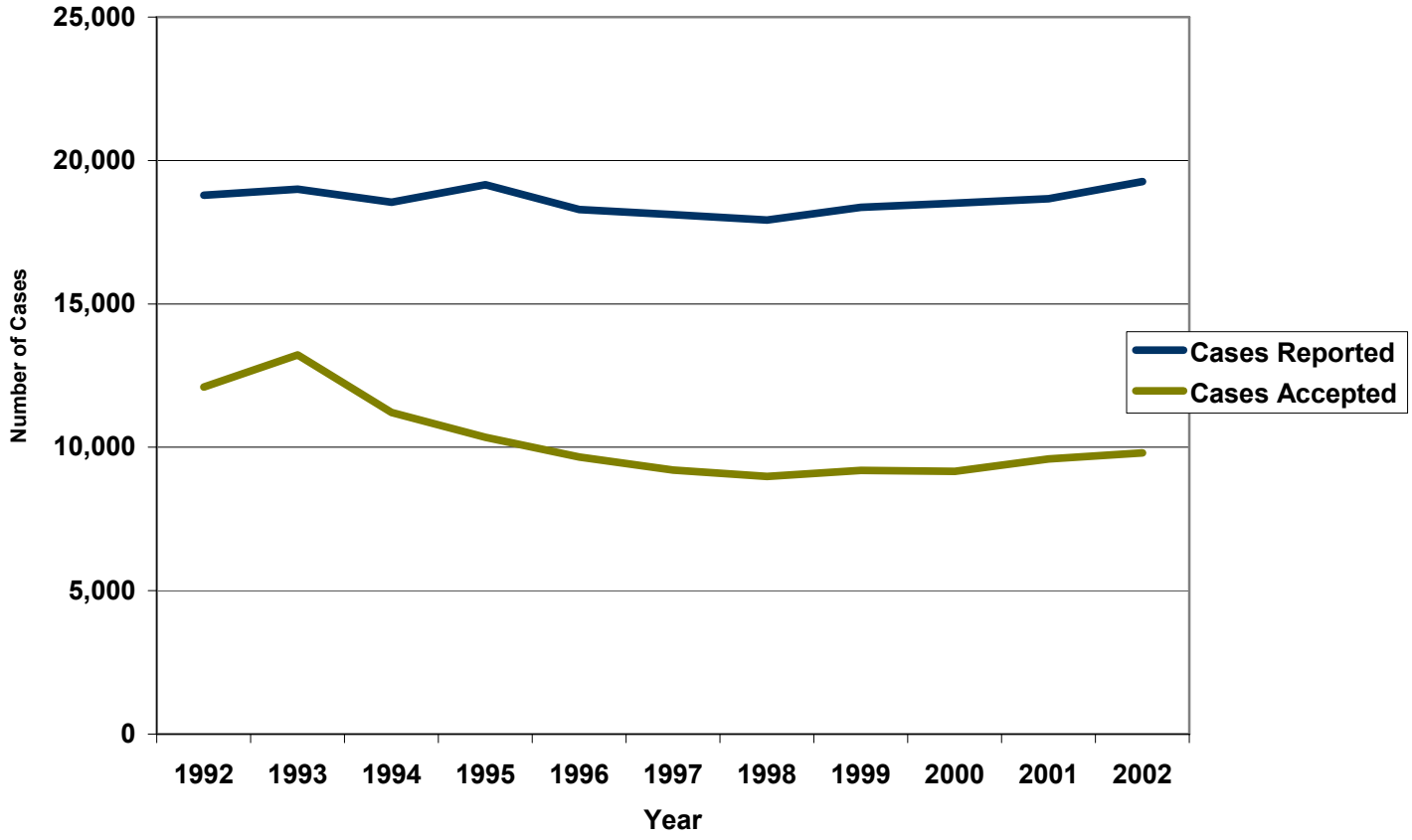
Population of Los Angeles County



YEAR	POPULATION
1992	9,008,000
1993	9,072,200
1994	9,095,200
1995	9,103,900
1996	9,104,700
1997	9,147,100
1998	9,225,800
1999	9,330,110
2000	9,559,600
2001	9,731,000
2002	9,889,300

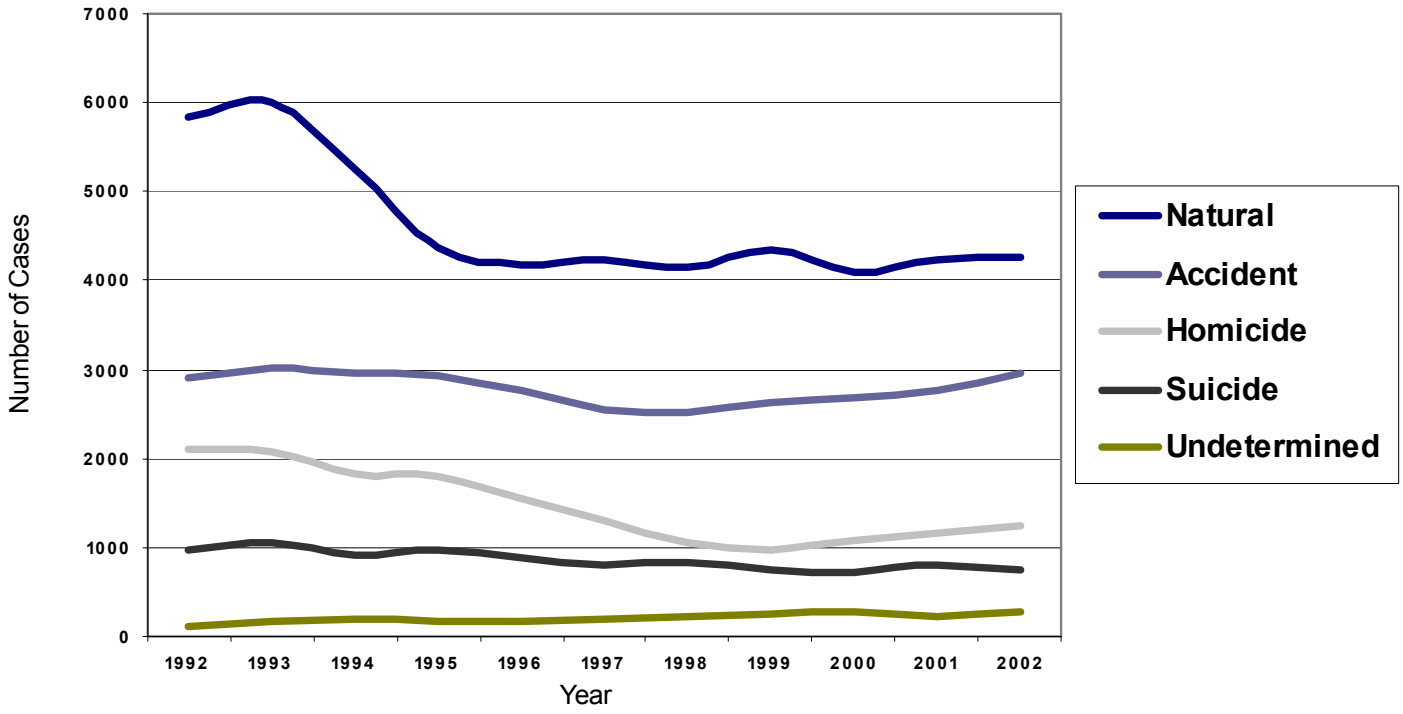
*Source:
State of California, Department of Finance, *Revised Historical City, County and State Population Estimates, 1991-2000, with 1990 and 2000 Census Counts.* Sacramento CA, March 2002.
State of California, Department of Finance, *California County Population Estimates and Components of Change, July 1, 2000-2003.* Sacramento CA, February 2004.

Number of Reported and Accepted Cases per Year



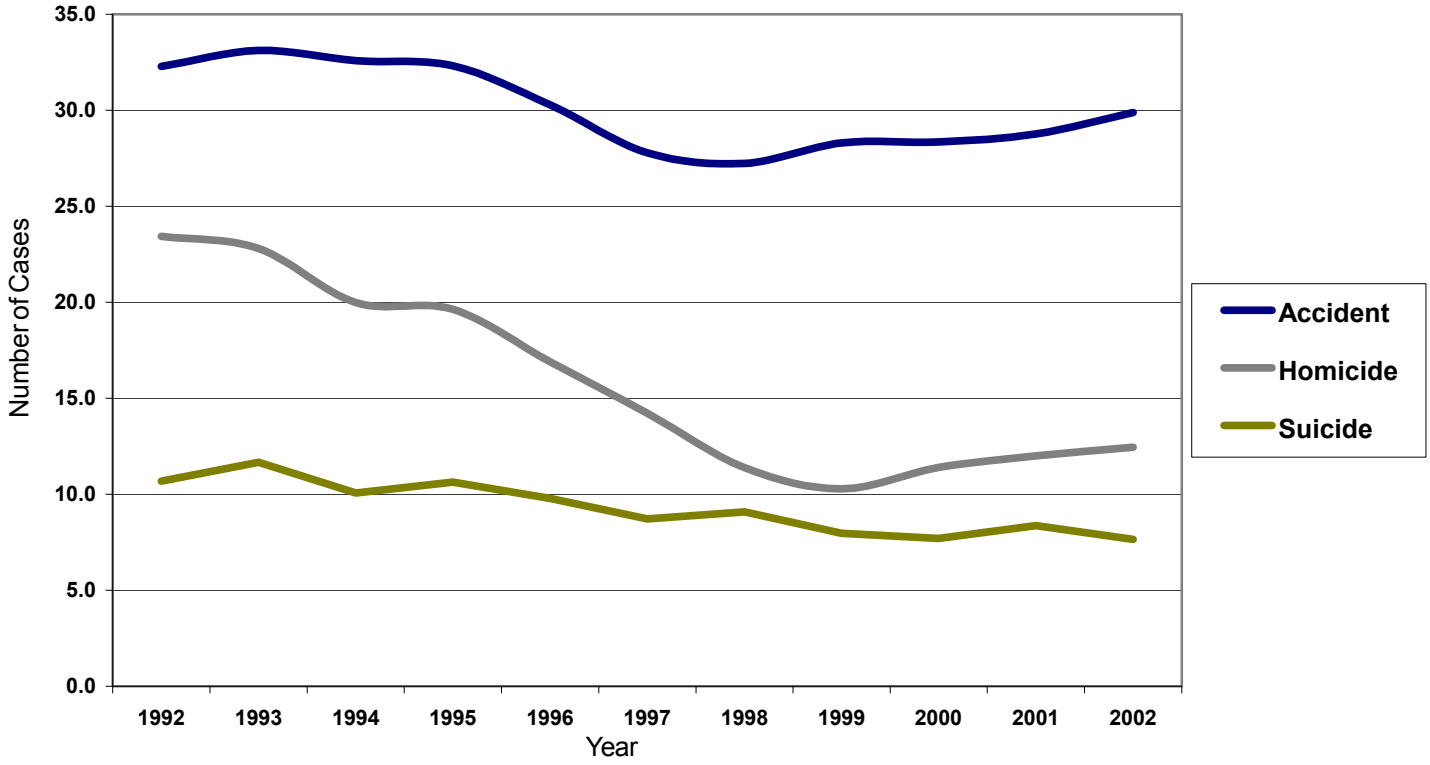
Year	Cases Reported	Cases Accepted
1992	18,794	12,100
1993	19,005	13,217
1994	18,550	11,213
1995	19,160	10,347
1996	18,295	9,656
1997	18,113	9,202
1998	17,924	8,981
1999	18,362	9,197
2000	18,512	9,156
2001	18,665	9,591
2002	18,665	9,470

Final Mode of Coroner's Cases, 1992-2002



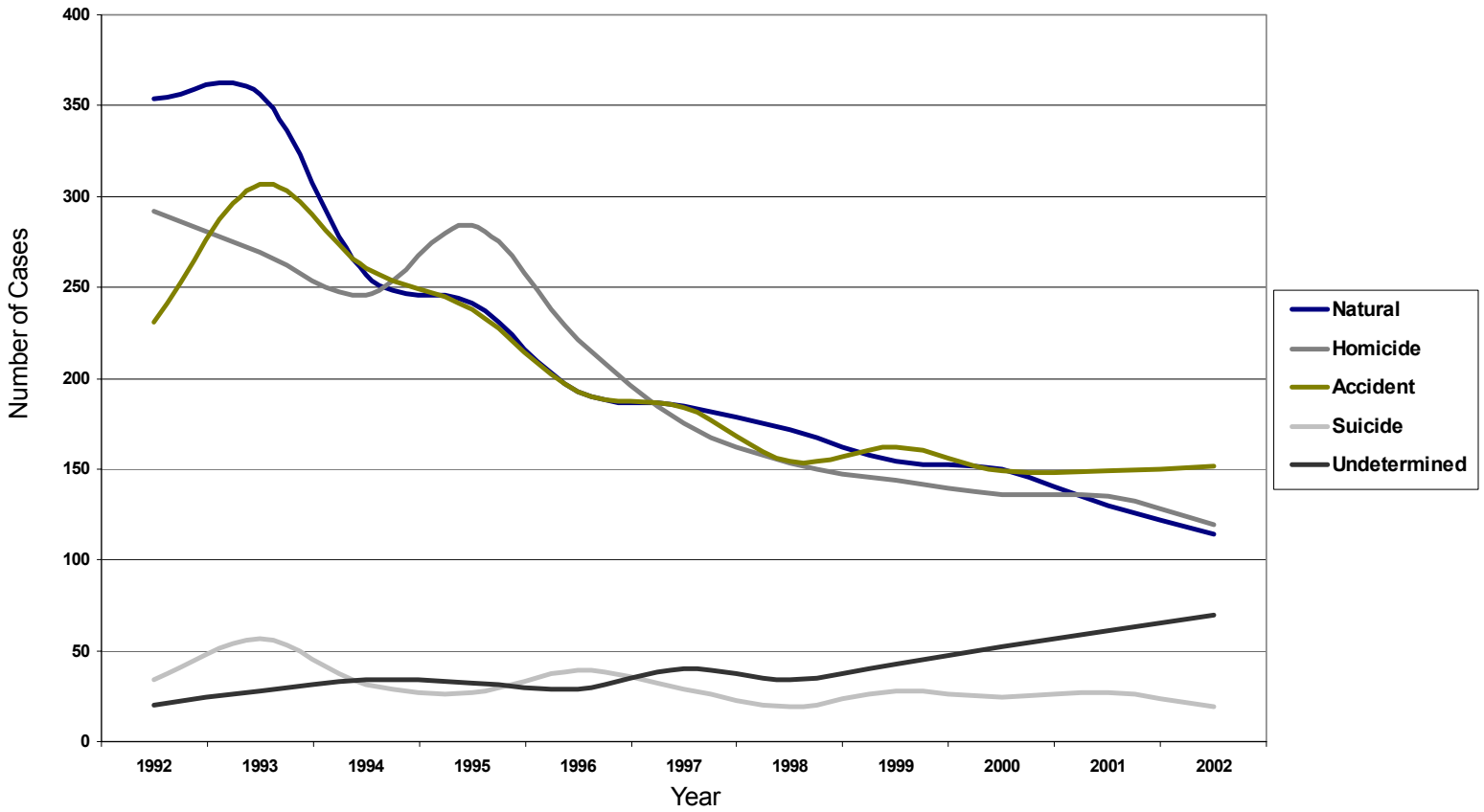
Year	Natural	Accident	Homicide	Suicide	Undetermined
1992	5830	2908	2111	962	101
1993	6000	3005	2068	1058	171
1994	5265	2964	1818	916	196
1995	4365	2942	1788	968	177
1996	4166	2757	1538	891	165
1997	4226	2542	1301	798	201
1998	4139	2513	1050	838	210
1999	4331	2641	960	744	247
2000	4094	2681	1078	729	263
2001	4224	2777	1159	807	226
2002	4261	2955	1232	757	265

Death Rates per 100,000 Population, 1992-2002



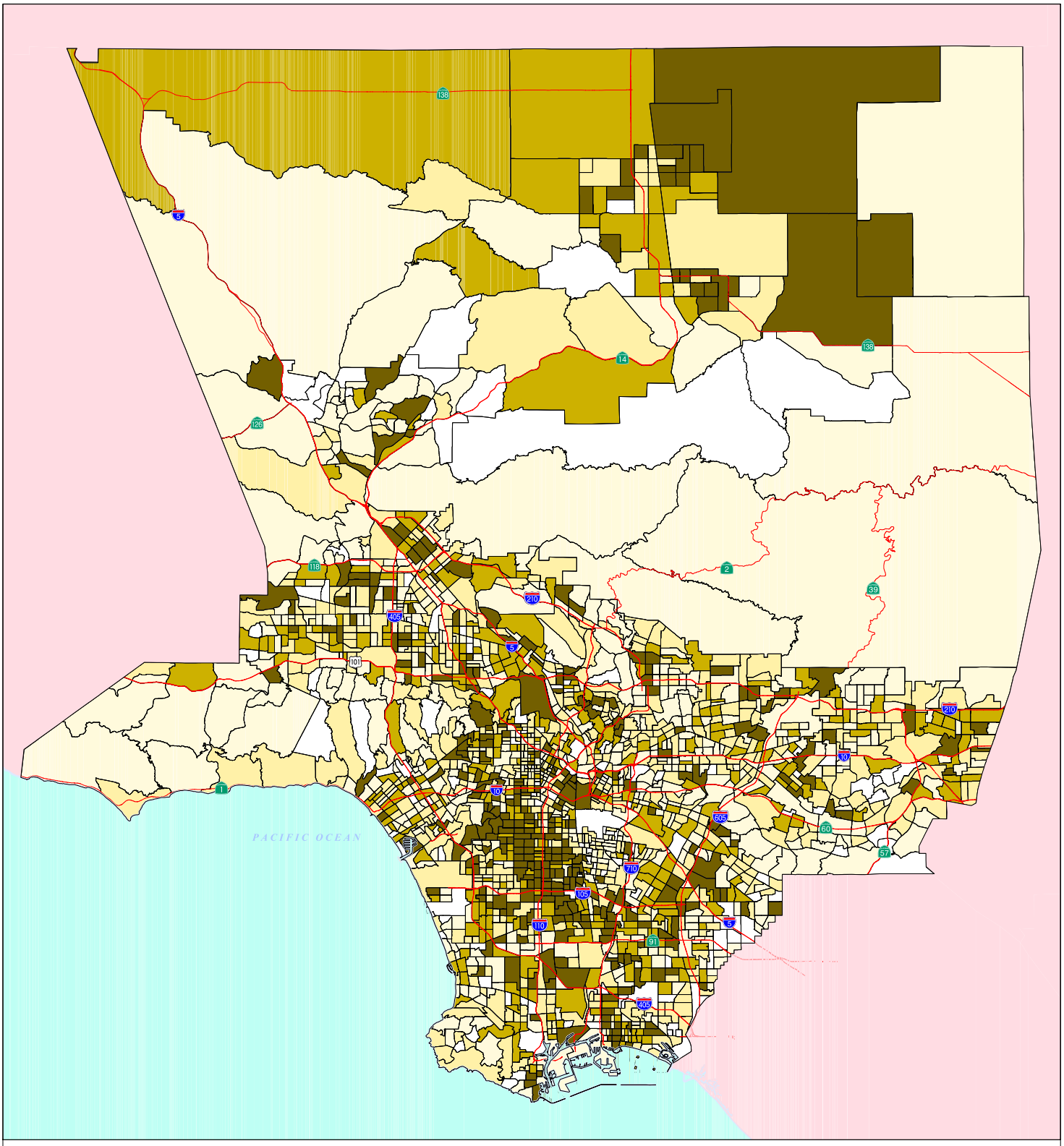
Year	Accident	Homicide	Suicide
1992	32.3	23.4	10.7
1993	33.1	22.8	11.7
1994	32.6	20.0	10.1
1995	32.3	19.6	10.6
1996	30.3	16.9	9.8
1997	27.8	14.2	8.7
1998	27.2	11.4	9.1
1999	28.3	10.3	8.0
2000	28.3	11.4	7.7
2001	28.8	12.0	8.4
2002	29.9	12.5	7.7

Modes for Child Death (ages under 18), 1992-2002



Year	Natural	Homicide	Accident	Suicide	Undetermined
1992	354	292	231	34	20
1993	256	269	307	57	28
1994	257	246	261	31	34
1995	241	284	238	27	32
1996	193	221	193	39	29
1997	185	175	184	29	40
1998	172	153	154	19	34
1999	154	144	162	28	43
2000	150	136	149	24	52
2001	130	135	149	27	61
2002	114	119	152	19	70

Cases Accepted in 2002 by 2000 Census Tract
(by Place of Residence)



Highways

Number of Accepted Cases per 2000 Census Tract
by Place of Residence

- No Cases
- 1 - 2
- 3 - 4
- 5 - 6
- 7 - 41

Total Mapped = 8216

Statistics

8,216	Found and Mapped
103	Not Found
467	Non-LA County
683	Unknown/No Address
9,469	Total

10 0 10 Miles

N

June 28, 2004
Mark Greninger (213) 974-5735
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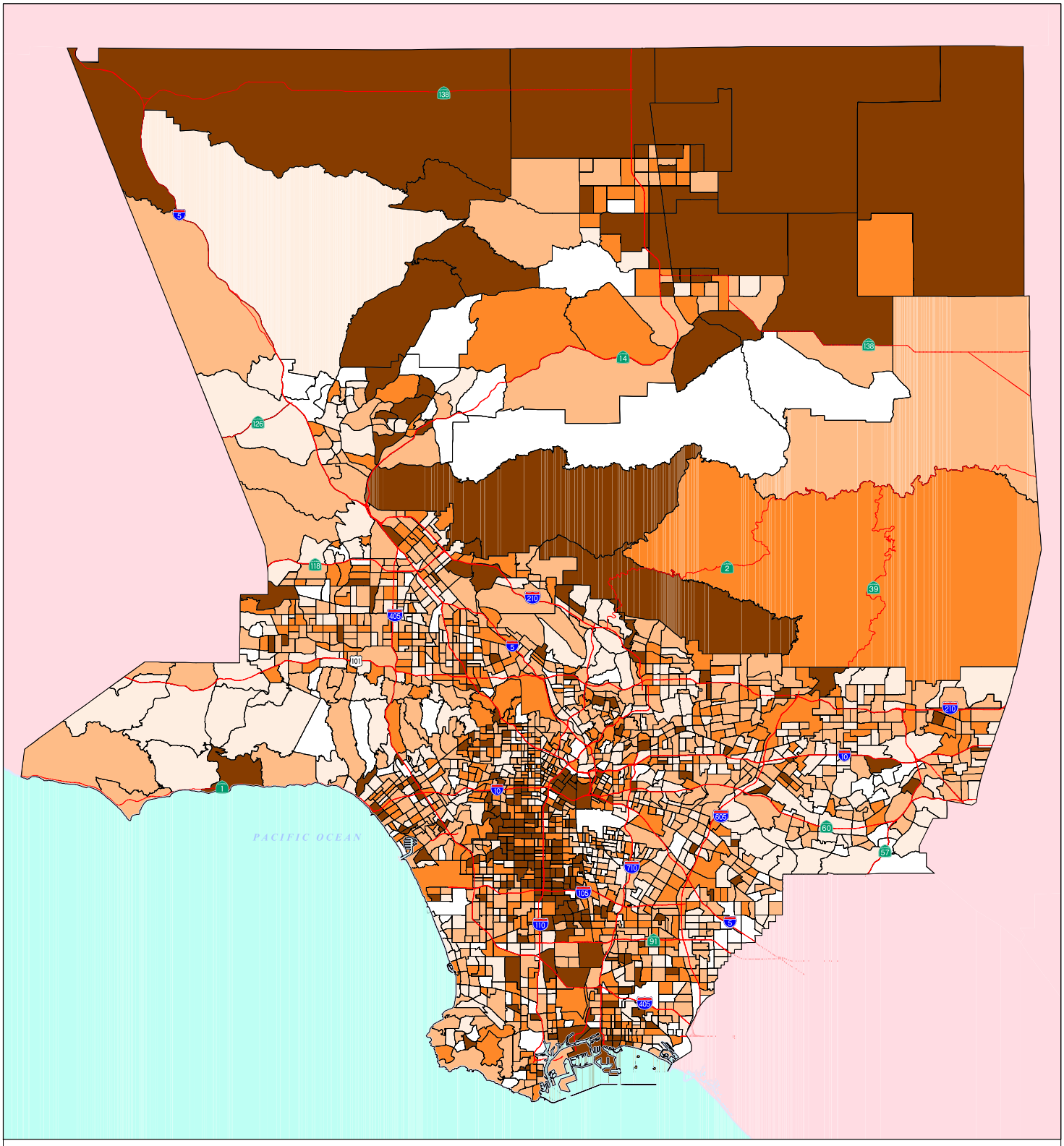
Census Tract Boundaries from
LA Co Registrar/Recorder
Roads Data from Thomas Brothers

Number of Coroner's Cases per 1,000 population (2000 census)
(by Place of Residence)



Highways

Rate of Death per 1,000 people (2000 census)
by Place of Residence

- No Cases
- 0 - 0.5
- 0.5 - 1
- 1 - 1.5
- > 1.5

Statistics

8,216	Found and Mapped
103	Not Found
467	Non-LA County
683	Unknown/No Address
9,469	Total

10 0 10 Miles

N

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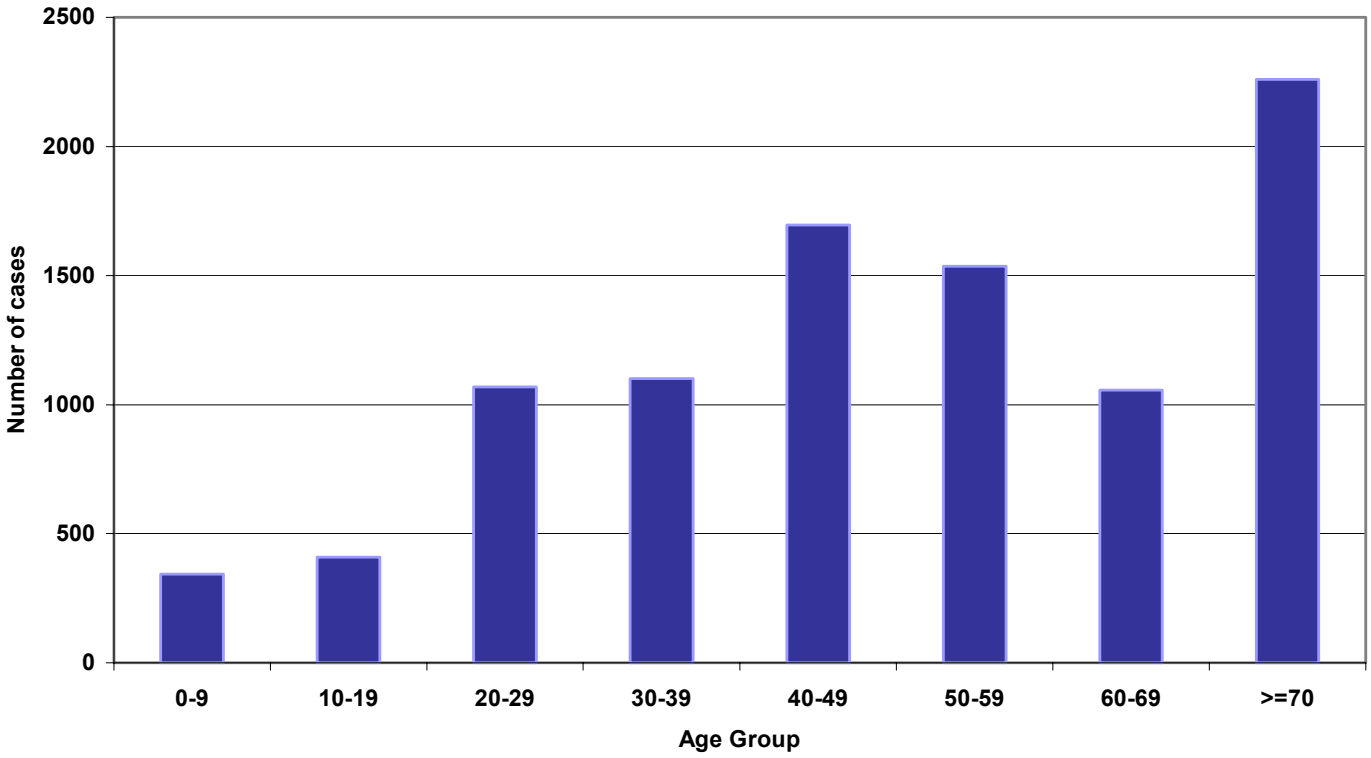
Roads Data from Thomas Brothers

Statistics 2002

Summary

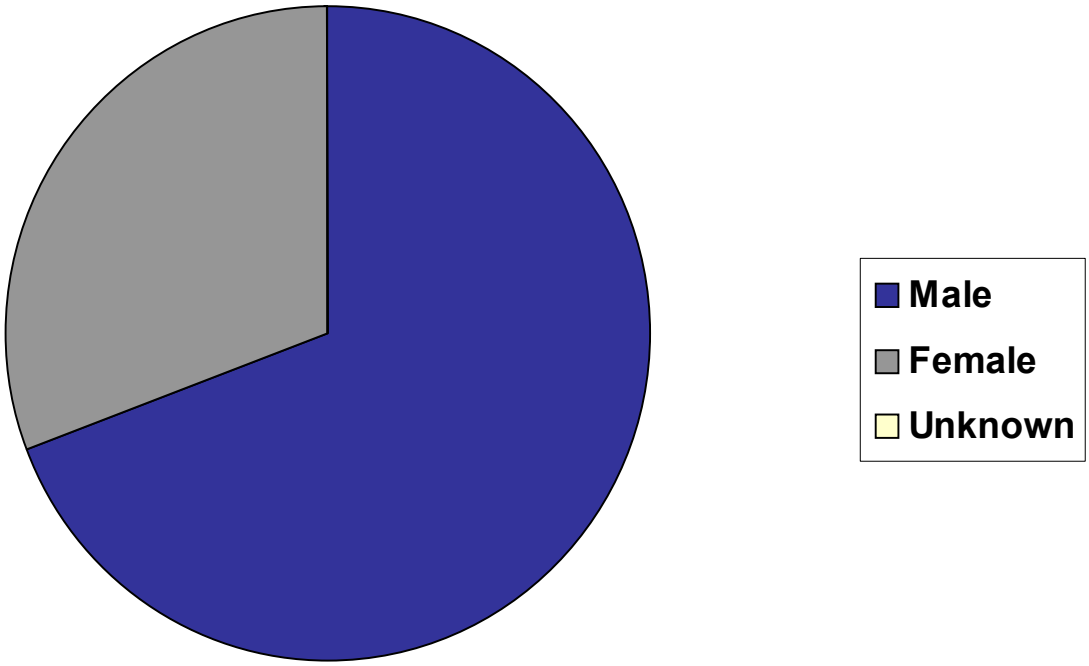
Number of deaths reported:		18,665
Number of cases accepted:		9,470
Number of cases by manner of death:		
Accident:	2,955	
Homicide:	1,232	
Natural:	4,261	
Suicide:	757	
Undetermined:	265	
Scene visits:		3,159
Number of bodies transported:		7,139
External examinations:		
By physician:	2,053	
By investigator:	2,299	
Partial autopsies:		442
Complete autopsies:		4,676
Hospital autopsies under ME jurisdiction:		5
Cases where toxicology was performed:		5,389
Bodies unidentified after examination:		24
Organ and tissue donations:		
Total transplanted organs:		560
Total tissues donated:		801
Unclaimed bodies:		599
Exhumations:		1

Number of Coroner's Cases by Age, 2002



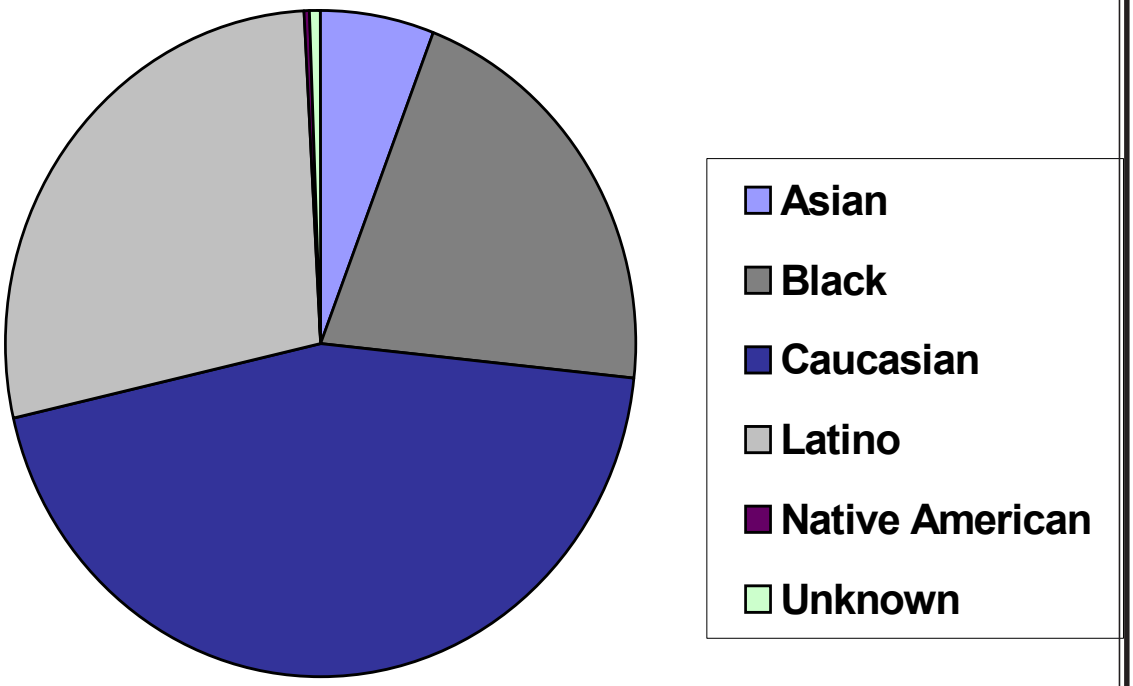
Age	Number of Cases
0-9	344
10-19	409
20-29	1,069
30-39	1,101
40-49	1,696
50-59	1,535
60-69	1,056
>=70	2,260
Total	**9,470**

Coroner's Cases by Gender, 2002



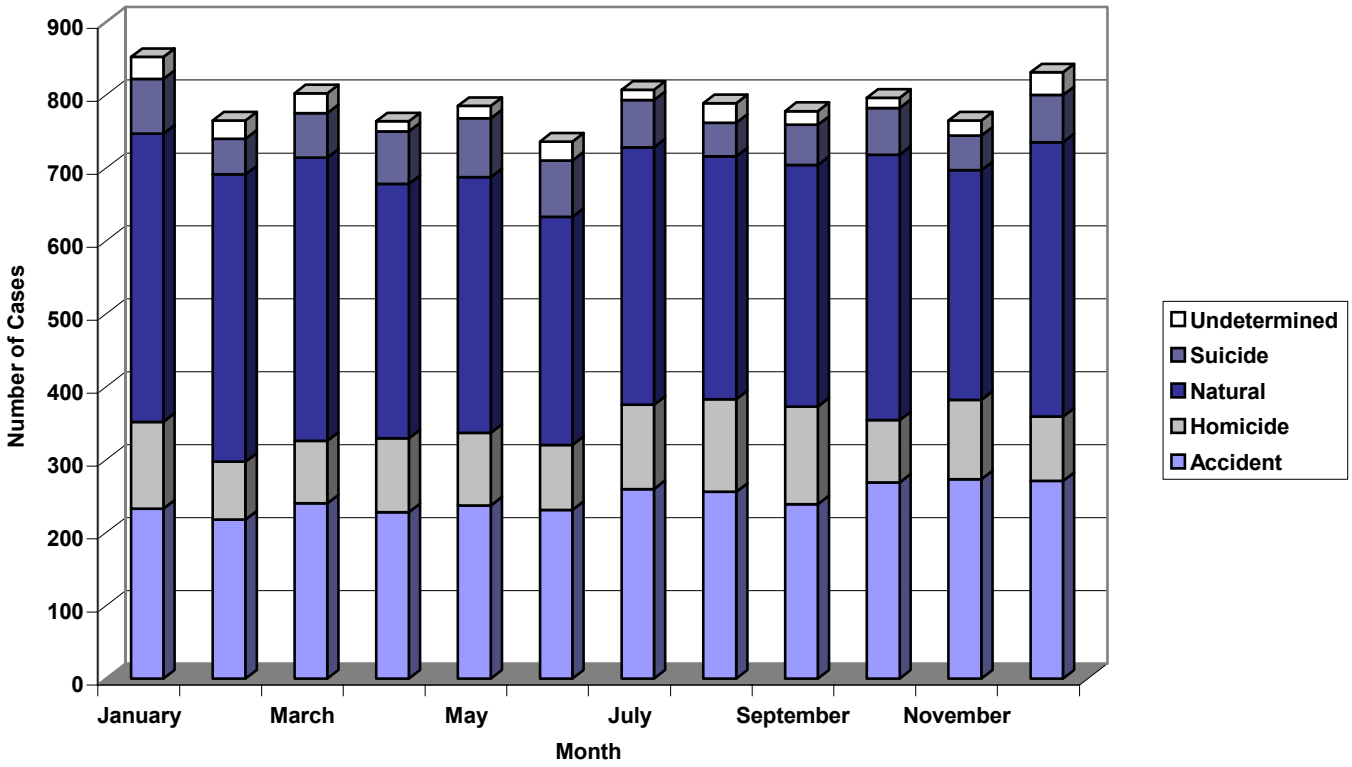
Gender	Number of Cases
Male	6,540
Female	2,920
Unknown	10
Total	**9,470**

Coroner's Cases by Race, 2002



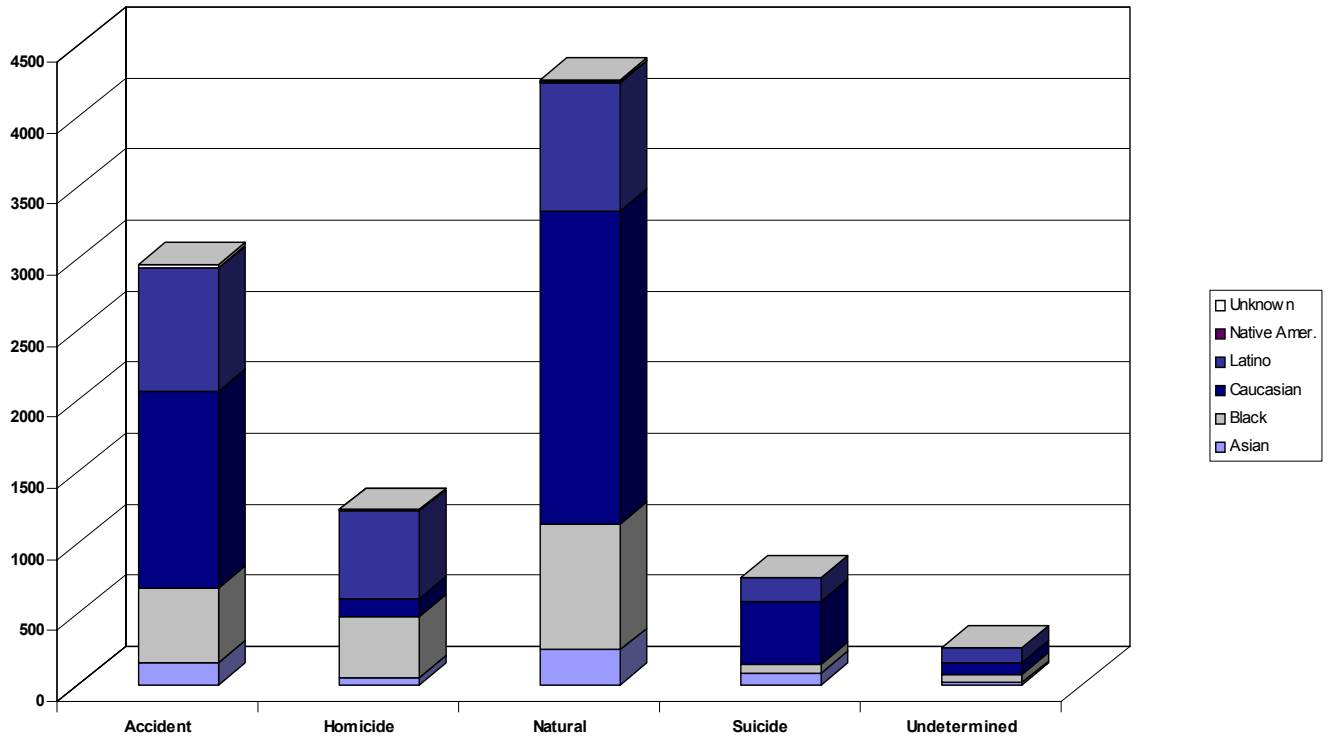
Race	Number of Cases
Asian	558
Black	1,965
Caucasian	4,238
Latino	2,642
Native American	15
Unknown	52
Total	**9,470**

Mode of Death by Month, 2002



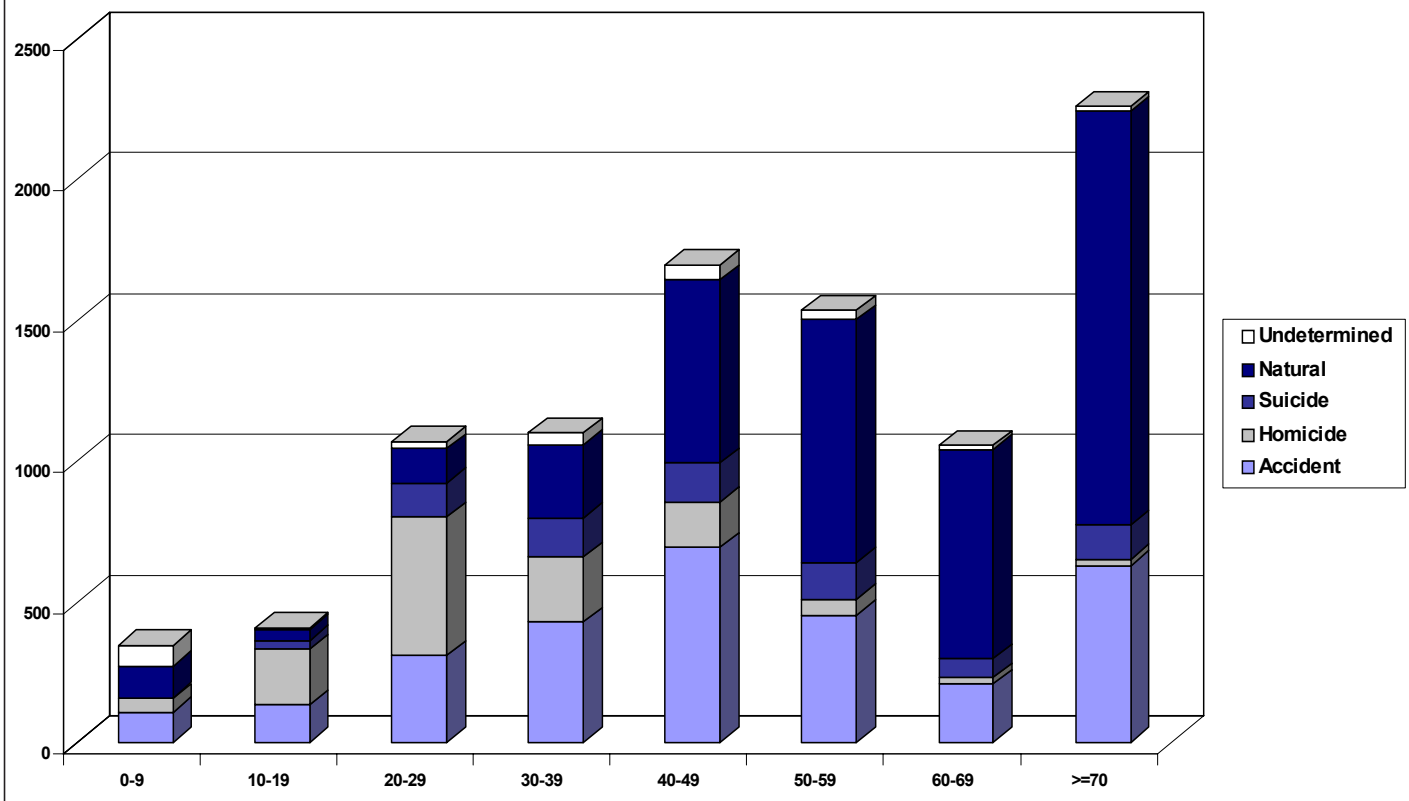
Month	Accident	Homicide	Natural	Suicide	Undetermined	Total
January	233	119	395	75	30	852
February	218	79	394	49	25	765
March	240	86	388	61	27	802
April	228	101	349	72	14	764
May	237	100	350	81	17	785
June	231	89	313	77	26	736
July	260	115	353	65	14	807
August	256	127	333	46	27	789
September	239	134	331	55	19	778
October	269	85	364	64	14	796
November	273	109	315	47	21	765
December	271	88	376	65	31	831
Total	**2,955**	**1,232**	**4,261**	**757**	**265**	**9,470**

Racial Distribution for Each Mode, 2002



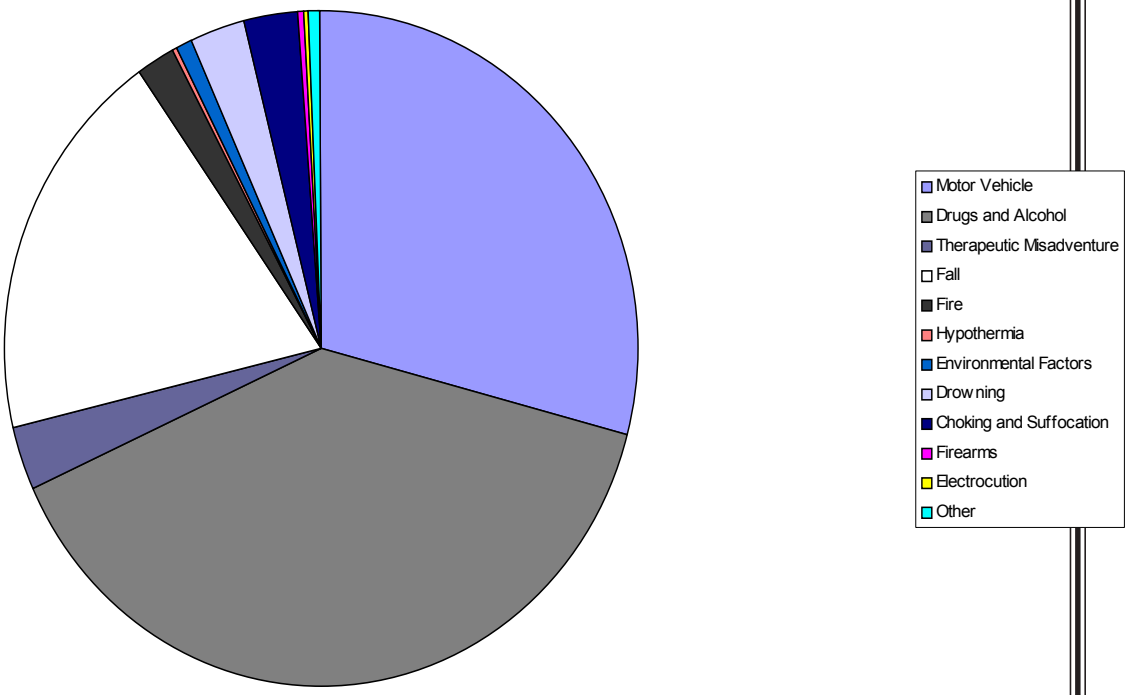
	Accident	Homicide	Natural	Suicide	Undetermined	Total
Asian	161	54	247	81	15	558
Black	524	428	884	69	60	1,965
Caucasian	1,385	126	2,203	440	84	4,238
Latino	862	615	902	163	100	2,642
Native American	4	2	8	1	0	15
Unknown	19	7	17	3	6	52
Total	**2,955**	**1,232**	**4,261**	**757**	**265**	**9,470**

Mode Distribution for Each Age Group, 2002



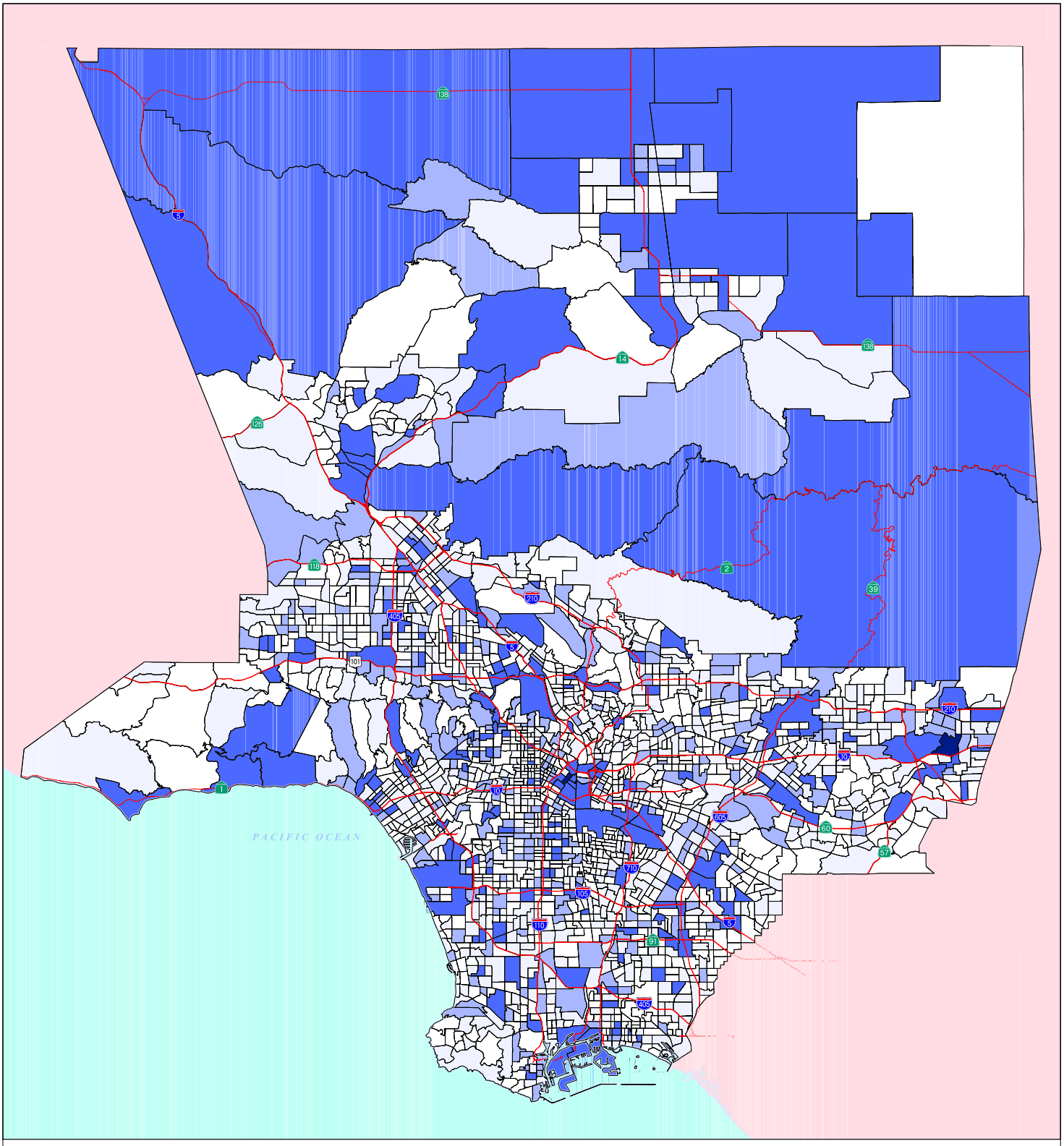
Age	0-9	10-19	20-29	30-39	40-49	50-59	60-69	>=70	Totals
Accident	108	134	308	427	692	452	207	627	2,955
Homicide	48	197	493	231	162	56	22	23	1,232
Suicide	23	32	122	140	139	132	69	121	757
Natural	113	40	121	261	649	862	744	1471	4,261
Undetermined	73	6	25	42	54	33	14	18	265
Totals	**344**	**409**	**1,069**	**1,101**	**1,696**	**1,535**	**1,056**	**2,260**	**9,470**

Accidental Deaths, 2002



Type of Accident	Number of Cases
Transport Accident	861
Drugs and Alcohol	1,154
Therapeutic Misadventure	83
Fall	569
Fire	59
Hypothermia	5
Environmental Factors	31
Drowning	80
Choking and Suffocation	82
Firearms	3
Electrocution	14
Other	14
Total	**2,955**

Accidental Deaths per 2000 Census Tract
(by Place of Residence)



Highways

Accidental Deaths per 2000 Census Tract
by Event Location

- No Cases
- 1
- 2
- 3 - 10
- 10 - 18

Statistics

1,991	Found and Mapped
36	Not Found
118	Non-LA County
810	Unknown/No Address
2,955	Total

10 0 10 Miles

N

July 29, 2004
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Census Tract Boundaries from
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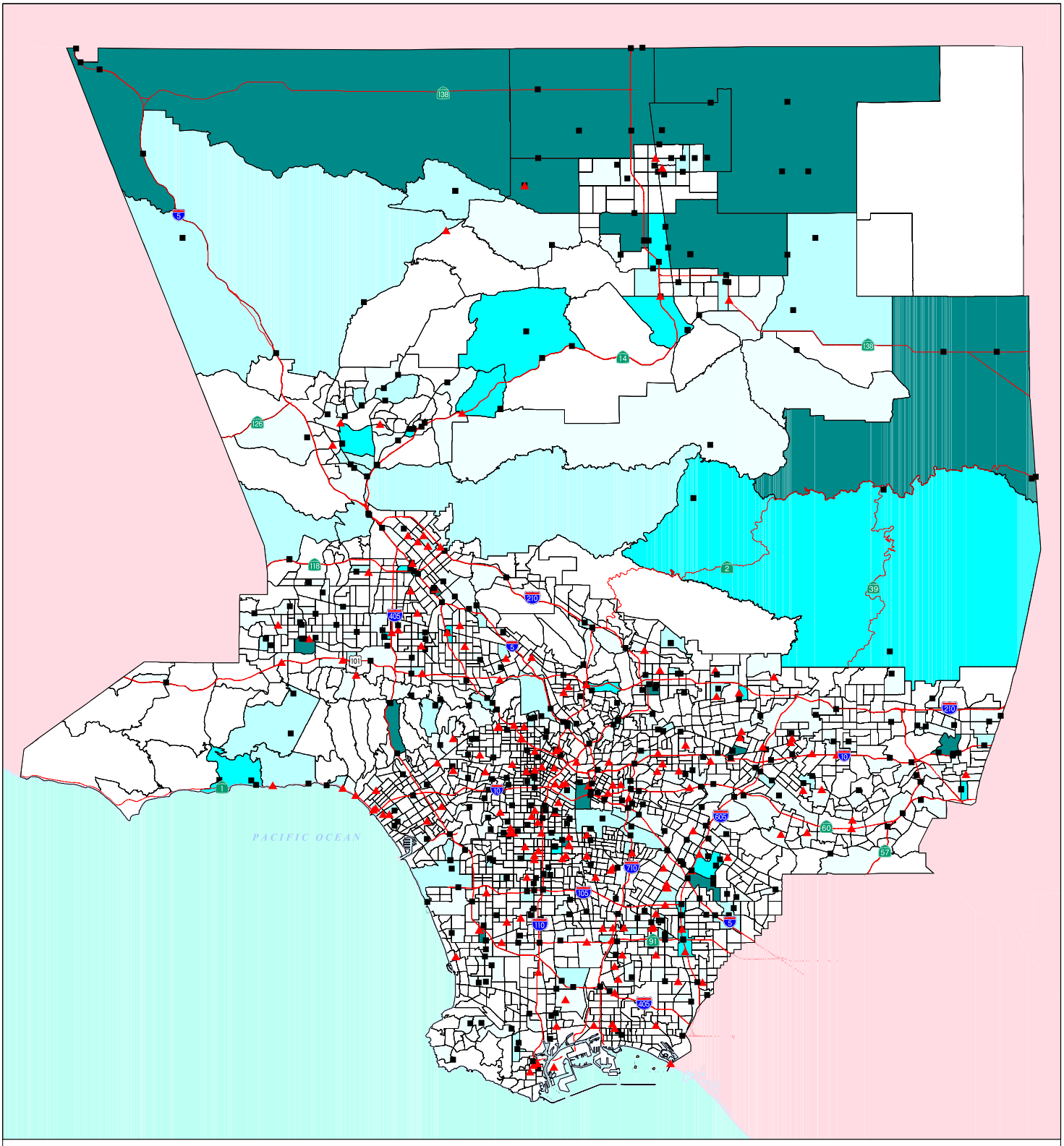
Roads Data from Thomas Brothers

Vehicular Death Locations and by 2000 Census Tract
(by Event Location)



Vehicular Event Locations
- Automobile (498 total)
- Pedestrian (184 total)
- Highways

Vehicular Deaths per 2000 Census Tract
by Event Location
- No Cases
- 1
- 2
- 3
- 4 - 5

Statistics

650	Found and Mapped
12	Not Found
13	Non-LA County
10	Unknown/No Address
685	Total

10 0 10 Miles

N

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Pedestrians:

Collision with car, pick-up truck or van	196
Collision with heavy transport vehicle or bus	25
Collision with railway train or railway vehicle	8
Other and unspecified transport accidents	20
Total pedestrians	249

Pedal Cyclists:

Collision with car, pick-up truck or van	20
Collision with heavy transport vehicle or bus	4
Collision with fixed or stationary object	3
Fall from pedal cycle	1
Other and unspecified transport accidents	1
Total pedal cyclists	29

Motorcycle Riders:

Collision with car, pick-up truck or van	32
Collision with heavy transport vehicle or bus	2
Collision with fixed or stationary object	25
Non-collision accident (fell or thrown)	12
Other and unspecified transport accidents	3
Total motorcycle riders	74

Car Occupants:

Collision with car, pick-up truck or van	198
Collision with heavy transport vehicle or bus	41
Collision with railway train or railway vehicle	1
Collision with horse	1
Collision with fixed or stationary object	155
Non-collision accident (fell or thrown)	53
Other and unspecified transport accidents	18
Total car occupants	467

Occupants of Pick-up Truck or Van:

Collision with motorcycle	1
Collision with heavy transport vehicle or bus	5
Collision with fixed or stationary object	6
Non-collision accident (fell or thrown)	2
Other and unspecified transport accidents	1
Total pick-up truck and van occupants	15

Other Transport Accidents:

Fall from horse	1
Specialized industrial vehicles (forklift, tractor)	3
Water craft	6
Aircraft	11
Other and unspecified transport accidents	6
Total other transport accidents	27

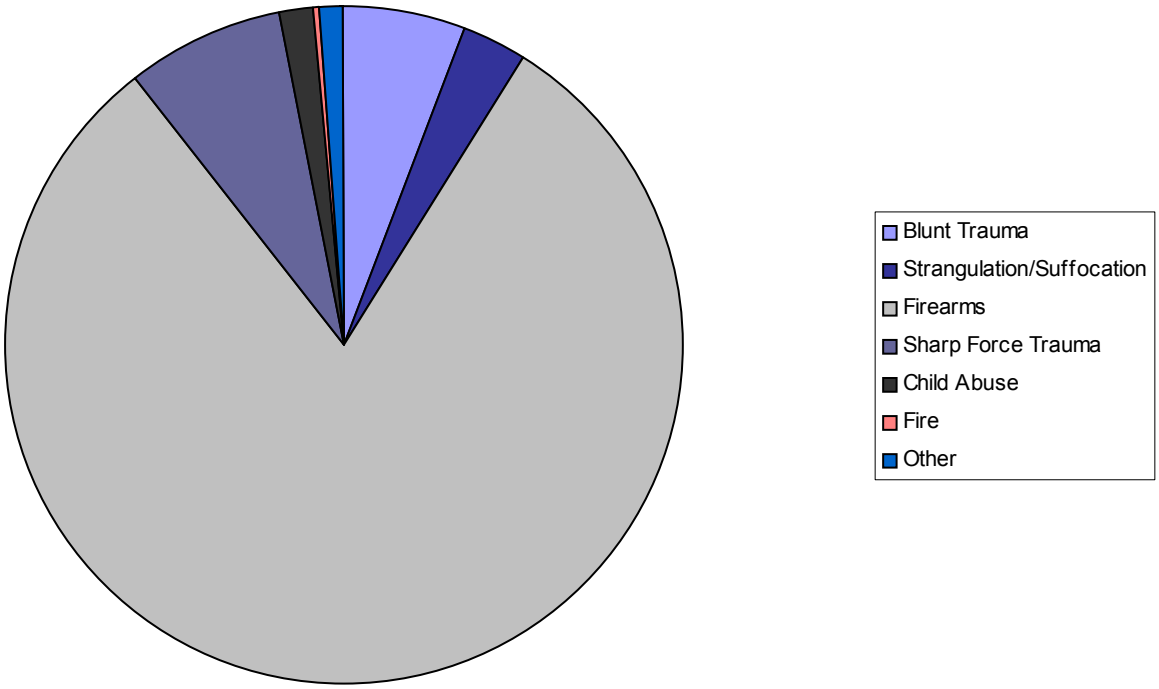
Note: Transport accidents include vehicular accidents, specialized vehicles and collisions with other objects.

Total Transport Accidents **861**

Accidental Falls 2002

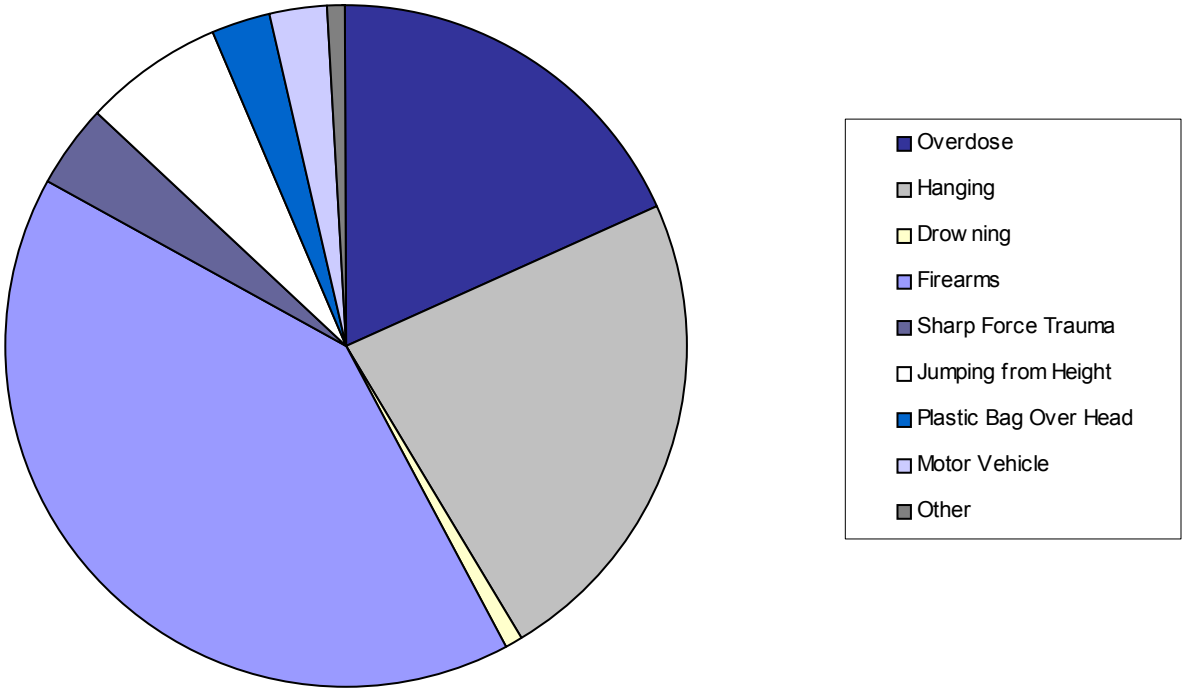
Fall on same level from slipping, tripping and stumbling	303
Fall while being carried or supported by other persons	2
Fall involving wheelchair	10
Fall involving bed	22
Fall involving chair	6
Fall on and from stairs and steps	29
Fall on and from ladder	18
Fall on and from scaffolding	1
Fall from, out of or through building or structure	18
Fall from tree	2
Fall from cliff	5
Diving into water causing injury other than drowning	1
Other fall from one level to another	23
Other fall on same level	6
Unspecified fall	123
Total falls	**569**

Homicidal Deaths, 2002



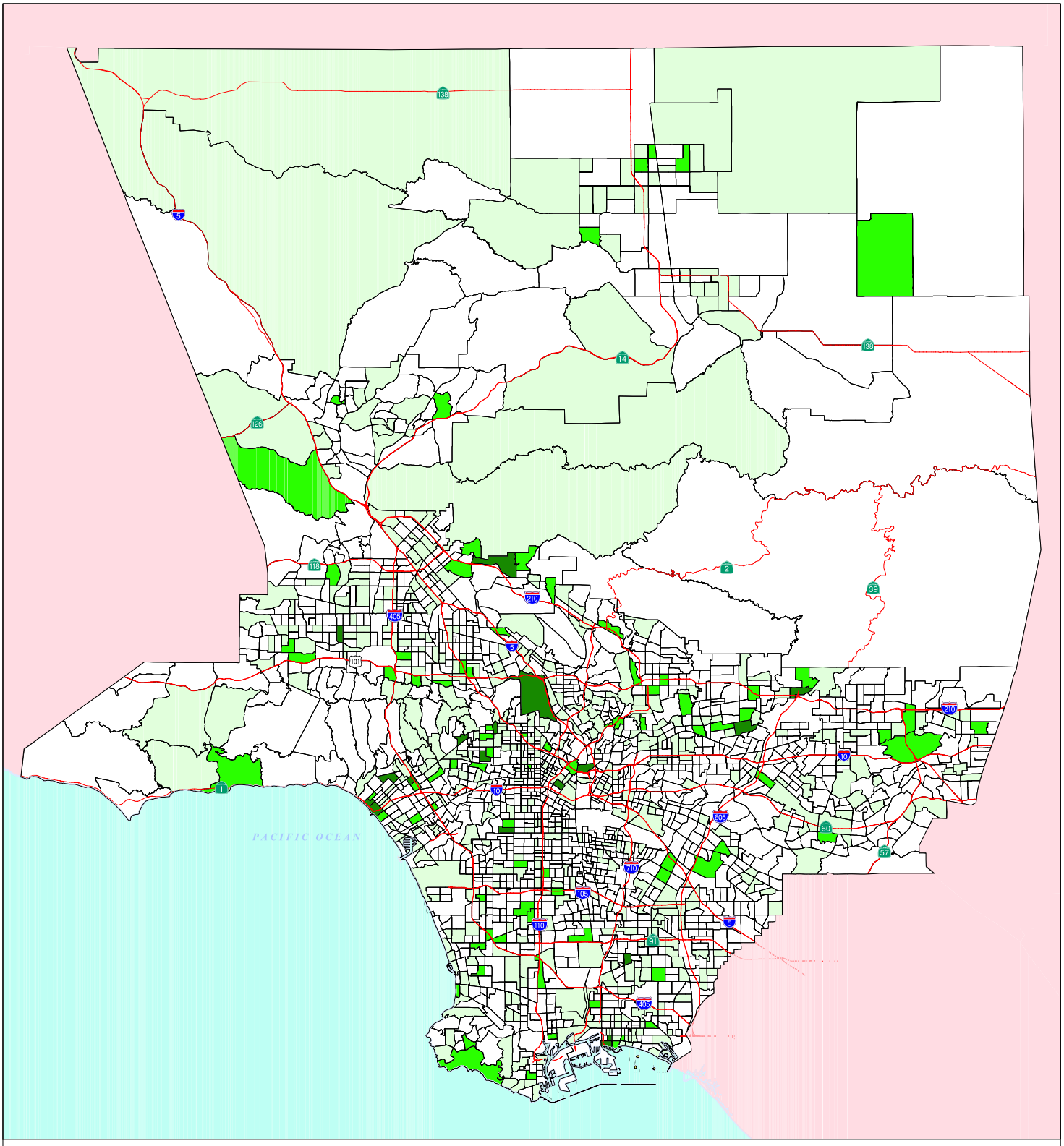
Method of Homicide	Number of Cases
Blunt Trauma	72
Strangulation/Suffocation	37
Firearms	994
Sharp Force Trauma	91
Child Abuse	22
Fire	2
Other	14
Total	**1,232**

Suicidal Deaths, 2002



Method of Suicide	Number of Cases
Overdose	139
Hanging	175
Drowning	6
Firearms	308
Sharp Force Trauma	30
Jumping from Height	51
Plastic Bag over Head	21
Motor Vehicle	20
Other	7
Total	**757**

Suicide Deaths per 2000 Census Tract
(by Event Location)



Highways
Suicide Deaths per 2000 Census Tract
by Event Location
No Cases
1
2
3 - 4

Statistics

700	Found and Mapped
13	Not Found
11	Non-LA County
33	Unknown/No Address
757	Total

10 0 10 Miles

N

July 29, 2004
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Census Tract Boundaries from
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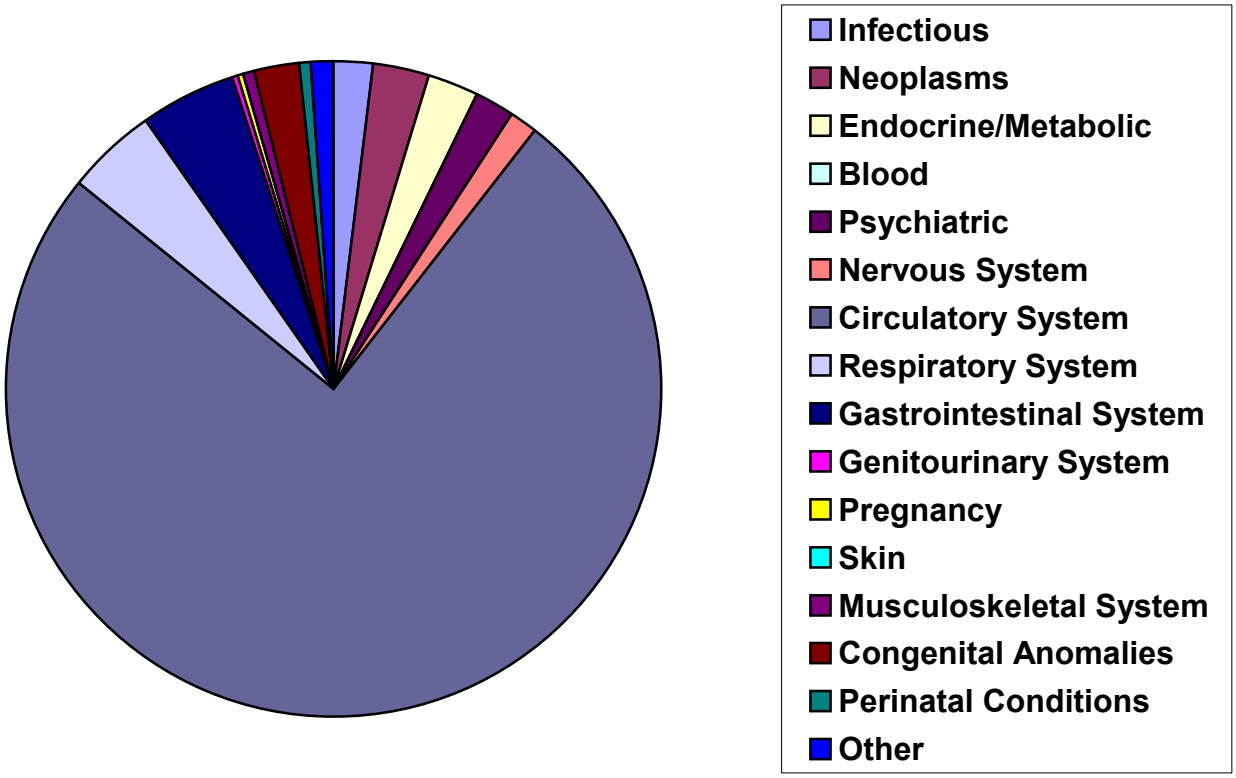
Natural Deaths, 2002



Condition of Death	Number of Cases
Infectious and Parasitic	84
Neoplasms	121
Endocrine/Metabolic/Nutritional	100
Blood/Blood-Forming Organs	5
Psychiatric Conditions	82
Nervous System	59
Circulatory System	3,210
Respiratory System	189
Gastrointestinal System	193
Genitourinary System	13
Conditions of Pregnancy / Childbirth	13
Skin and Subcutaneous Tissue	2
Musculoskeletal System	20
Congenital Anomalies	95
Perinatal Conditions	33
Other Conditions	42
Total	**4261**

Infectious Diseases Among Natural Deaths, 2002

CAUSES OF DEATH	NUMBER OF CASES
Bacterial infections:	
Streptococcus	4
Klebsiella	3
Mycobacterium tuberculosis	3
Neisseria meningitidis	1
Bordetella pertussis	1
Anaerobic bacteria	1
Unspecified bacterial infections	4
Viral infections:	
Human immunodeficiency virus	31
Viral enteritis	4
Hepatitis A	1
Hepatitis B	2
Hepatitis C	4
Viral hepatitis	1
Viral meningitis	2
Viral encephalitis	1
Poliomyelitis	1
Respiratory syncytial virus	1
Unspecified viral infections	7
Other infections:	
Candida	1
Cysticercosis	1
Treponema pallidum	1
Sarcoidosis	1
Unspecified infections	8
TOTAL	**84**

Neoplasms Among Natural Deaths, 2002

PRIMARY SITE	NUMBER OF CASES
Bladder	2
Brain	2
Breast	5
Cervix	6
Colon	7
Esophagus	2
Kidney	1
Larynx	3
Leukemia	8
Liver	9
Lung	23
Lymphoma	4
Malignant histiocytosis	1
Melanoma	2
Meninges	1
Mesothelioma	5
Myeloma	1
Neurofibromatosis	1
Oral cavity	3
Ovary	3
Pancreas	4
Pituitary	1
Pleura	4
Salivary gland	1
Skin	2
Stomach	1
Prostate	5
Thymus	1
Uterus	3
Metastatic/unknown primary site	10
TOTAL	**121**

Respiratory System Disease Among Natural Deaths, 2002

CAUSE OF DEATH	NUMBER OF CASES
Acute epiglottitis	1
Chronic bronchitis	1
Pneumonia:	
Streptococcus	5
Staphylococcus	1
Haemophilus influenzae	1
Mycoplasma	1
Unspecified bacteria	5
Unspecified virus	4
Organism not specified	65
Aspiration pneumonia	4
Empyema	1
Influenza	6
Emphysema	39
Asthma	29
Idiopathic pulmonary fibrosis	4
Unspecified respiratory disorder	22
TOTAL	**189**

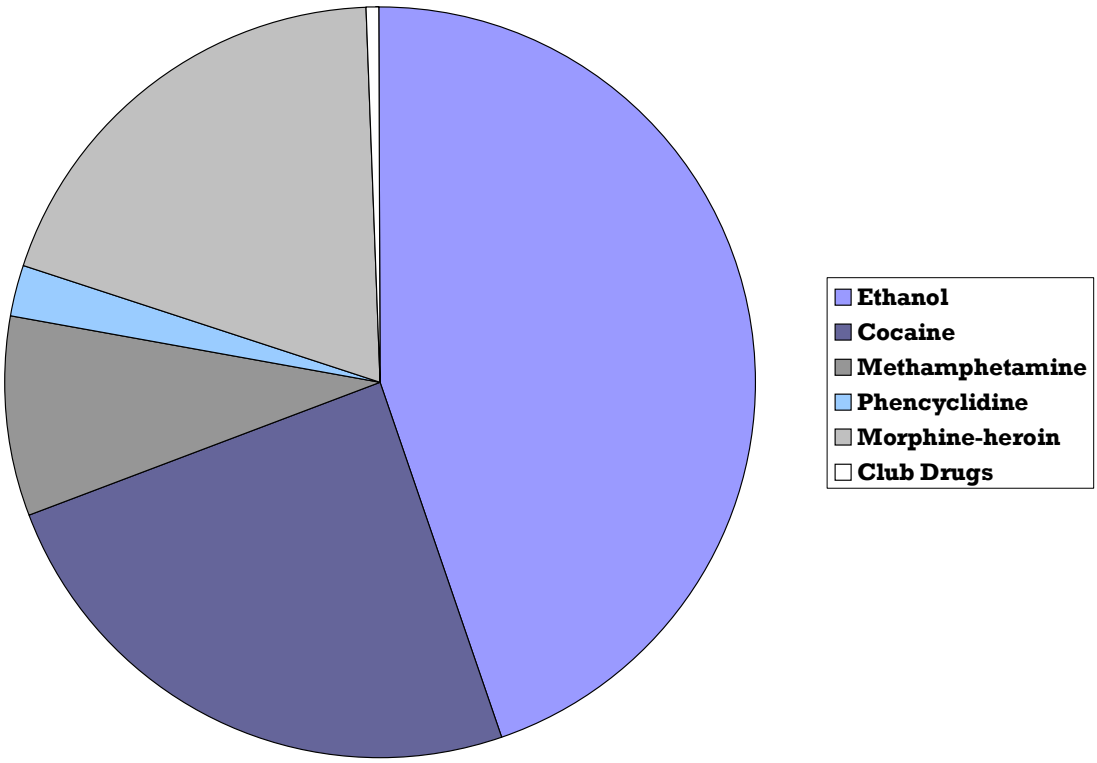
Nervous System Disease Among Natural Deaths, 2002

CAUSE OF DEATH	NUMBER OF CASES
Alzheimer's Disease	3
Cerebral abscess	9
Cerebellar ataxia	1
Cerebral palsy	4
Epilepsy	33
Meningitis	4
Muscular dystrophy	1
Spinocerebellar disease	1
Spinal muscular atrophy	1
Transverse myelitis	1
Other/unspecified disease	1
TOTAL	**59**

Circulatory System Disease Among Natural Deaths, 2002

CAUSE OF DEATH	NUMBER OF CASES
Aneurysms:	
Cerebral	19
Aortic	23
Arteriosclerotic disease	2,583
Asymmetric septal hypertrophy	1
Cardiomyopathy:	
Alcoholic	8
Dilated	49
Hypertrophic	20
Idiopathic	122
Cerebral hemorrhage/infarction	25
Arteritis	1
Kawasaki Disease	1
Endocarditis	8
Hypertensive disease	210
Myocarditis	14
Pericarditis	2
Pulmonary hypertension	1
Thrombosis/embolism	44
Valvular disease:	
Aortic valve disease	2
Mitral valve disease	6
Rheumatic heart disease	4
Peripheral vascular disease	2
Circulatory disease, unspecified	65
TOTAL	**3,210**

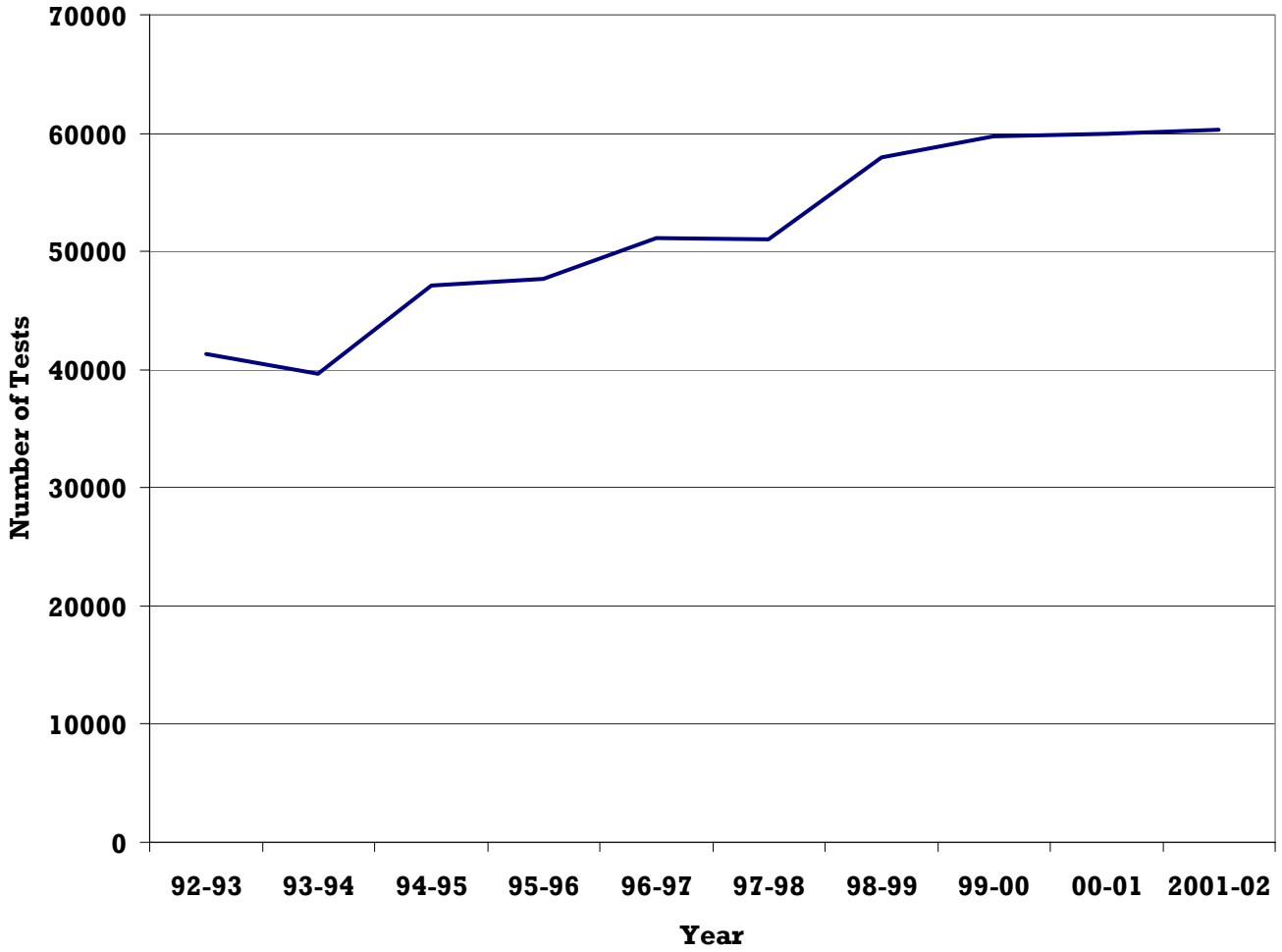
Common Drugs of Abuse, 2002



DRUG	*NUMBER OF CASES*
Ethanol	1,886
Cocaine	1,377
Methamphetamine	1,453
Phencyclidine	266
Morphine-heroin	1766
Club Drugs*	48

*Ketamine, MDMA, GHB

Number of Toxicology Tests per Year, 1992-2002



YEAR	TOXICOLOGY TESTS
92-93	41,337
93-94	39,678
94-95	47,101
95-96	47,705
96-97	51,130
97-98	51,062
98-99	57,943
99-00	59,679
00-01	59,941
01-02	60,242

Although the number of Coroner's cases has decreased, the cases have become more complex, with a resulting increase in the need for support services such as toxicology.

Academic Activities

Publications:

DT Anderson, KL Fritz, JJ Muto "Oxycontin: the Concept of a 'Ghost Pill' and the Postmortem Tissue Distribution of Oxycodone in 36 Cases" *Journal of Analytical Toxicology* 2002 October; 26(7): 448-59.

JK Ribe "Commentary on: Hardin GC. Postmortem Blood and Vitreous Humor Ethanol Concentrations in a Victim of a Fatal Motor Vehicle Crash" *Journal of Forensic Sciences* 2002 November; 47(6): 1405.

Oral Presentations:

L Sathyavagiswaran et al, "Rapid Death from Phlegmonous Gastritis Associated with Lymphoma", American Academy of Forensic Sciences, Atlanta, February 2002.

C Rogers, L Sathyavagiswaran "Mortality Estimate for the 1994 Northridge Earthquake", American Academy of Forensic Sciences, Atlanta, February 2002.

DT Anderson, "Approaches to Analyzing for New Drugs", California Association of Toxicologists, San Jose, California, February 2002.

DT Anderson, "Case Notes—The Postmortem Detection of Phencyclidine in Los Angeles County", Society of Forensic Toxicologists, Dearborn, Michigan, June 2002.

DT Anderson, "Postmortem Toxicology", California Criminalistics Institute, Sacramento, California, August 2002.

TT Noguchi, L Sathyavagiswaran, "Management of High Profile Cases", International Association of Forensic Sciences, Montpellier, France, September 2002.

L Sathyavagiswaran, "The Trial of the 20th Century—Public Perceptions and Media Relations", International Association of Forensic Sciences, Montpellier, France, September 2002.

C Rogers, L Sathyavagiswaran, "Use of New Technology in Forensic Investigation/Training", National Association of Medical Examiners, Shreveport, Louisiana, September 2002.

County of Los Angeles

Strategic Plan

"Enriching Lives"

County Vision

Our **purpose** is to improve the quality of life in Los Angeles County by providing responsive, efficient and high quality public services that promote the self-efficiency, well-being and prosperity of individuals, families, businesses and communities.

Our **philosophy** of teamwork and collaboration is anchored in our **shared values**:

- **A can-do attitude** - we approach each challenge believing that, together, a solution can be achieved.
- **Accountability** - we accept responsibility for the decisions we make and the actions we take.
- **Compassion** - we treat those we serve and each other in a kind and caring manner.
- **Commitment** - we always go the extra mile to achieve our mission.
- **Integrity** - we act consistent with our values.
- **Professionalism** - we perform to a high standard of excellence.
- **Respect for diversity** - we value the uniqueness of every individual and their perspective.
- **Responsiveness** - we take the action needed in a timely manner.

Our **position** as the premier organization for those working in the public interest is established by:

- A capability to undertake programs that have public value;
- An aspiration to be recognized through our achievements as the model for civic innovation; and a pledge to always work to earn the public trust.

County Mission

To enrich lives through effective and caring service

Strategic Plan Goals

1. Service Excellence
2. Workforce Excellence
3. Organizational Effectiveness
4. Fiscal Responsibility
5. Children and Families Well- Being
6. Community Services
7. Health and Mental Health
8. Public Safety