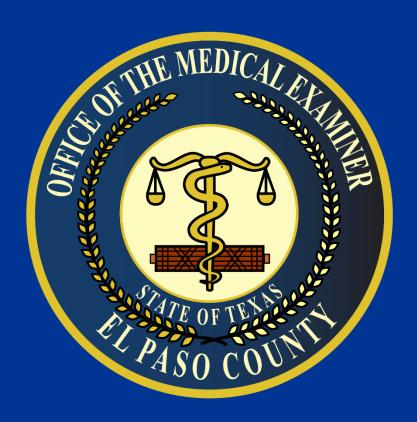


Office of the Medical Examiner 2023 Annual Report









Office of the Medical Examiner

Mario A Rascon, MD, MHCM Chief Medical Examiner

Adam C Gonzalez, MD Janice Diaz-Cavalliery, MD Deputy Medical Examiners

Irene Santiago
Chief of Operations

Annabel Salazar, D-ABMDI Chief Investigator

Jose "Louie" Romero, D-ABMDI Deputy Chief Investigator

Bessie Christmann, D-ABMDI Jordan Enriquez Kathy Martinez, D-ABMDI Nika Carrillo, D-ABMDI Morgan Riddle, D-ABMDI Ashley Rios, D-ABMDI Hanna Holley, D-ABMDI Caliah Cope, D-ABMDI Leslie Munoz Paulina Elizalde Investigators Lorenzo Flores Forensic Photographer

Concepcion Grajeda Alejandra Perez Brittney Morales Administrative Specialists

Kayla Soto
Office Assistant

Arturo Velazquez Morgue Manager

Sal Tellez Isaac Anaya Aaron Lechuga *Morgue Attendants*

Commissioners Court

Ricardo A Samaniego County Judge

Carlos Leon
Commissioner, Precinct 1

David Stout

Commissioner, Precinct 2

Iliana Holguin
Commissioner, Precinct 3

Sergio Coronado

Commissioner, Precinct 4

El Paso County Office of the Medical Examiner 4505 Alberta Drive El Paso, TX. 79905

Telephone: (915) 273-3403 Fax: (915) 273-3404 epcounty.com/medicalexaminer

PROLOGUE

The information found in this annual report has been gathered from the case management system of the El Paso County Office of the Medical Examiner in El Paso, Texas (EPOME). Our staff strives to serve the citizens of El Paso with empathy, competency, integrity, and professionalism.

The EPOME incorporates the scientific rigor of medicine and forensic science to investigate cases of sudden, unexpected deaths, or those that occur under violent or suspicious circumstances in El Paso County. Our mission statement is: "We help the community be safer and healthier through efficient and timely medicolegal death investigation". This translates into an important public health role played by the EPOME, which includes: to identify potential hazards in the community; to monitor trends in violence and injury; to be adequately prepared for a potential emergency response; and to evaluate areas of concern regarding the health, safety, and welfare of the community. It is our hope that this report helps identify trends in the community that allow public health and policy efforts to enhance death prevention and surveillance efforts that protect the lives of all El Pasoans.

The OME remains committed to helping grieving families through high-quality, compassionate, and timely service during the most trying of times – the sudden loss of a loved one.

MARIO A RISCON

Mario A Rascon, MD, MHCM, D-ABP, D-NBPAS, D-ABMDI, F-NAME, F-AAFS

Chief Medical Examiner

El Paso County Office of the Medical Examiner

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INTRODUCTION

The EPOME provides medicolegal death investigation for El Paso County. This includes autopsy services and certification of cause and manner of death in cases of homicides, suicides, accidents and otherwise sudden or unexpected natural deaths. Exceptions to this disposition are areas within the County that arrange for their own death investigations through their own governance bodies or with Federal assistance (e.g., Fort Bliss, Ysleta del Sur Pueblo).

The cause of death is a disease, injury, toxic material, or combination of factors that causes a physiologic derangement severe enough to result in death. The manner of death refers to the circumstances surrounding how the death came about and is divided into five categories: natural, accident, suicide, homicide, and undetermined.

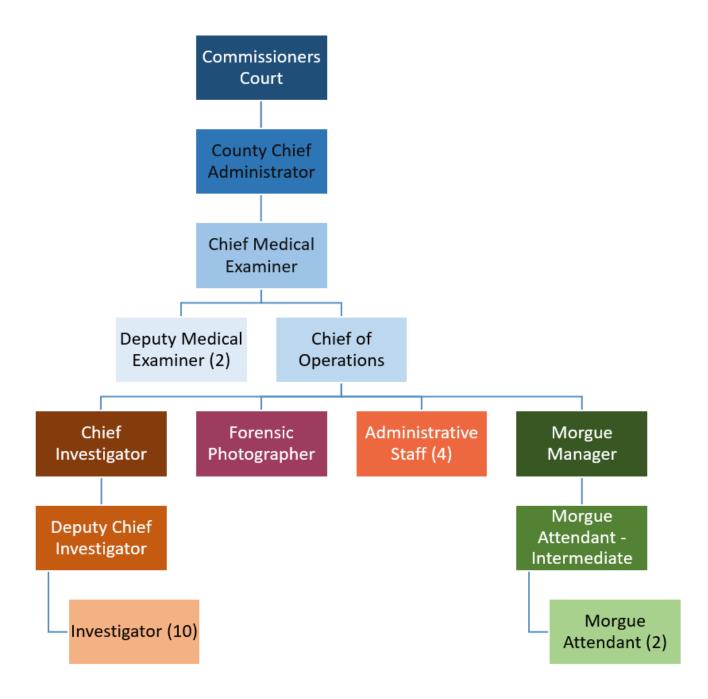
The Texas Code of Criminal Procedure (Chapter 49. 'Inquests Upon Dead Bodies'), stipulates that the EPOME shall conduct an inquest into the death of a person who dies in the County if:

- (1) the person dies in jail or in prison (except under circumstances different than described by Section 501.055(b);
- (2) the person dies an unnatural death from a cause other than a legal execution;
- (3) the body or a body part of a person is found, the cause or circumstances of death are unknown, whether the person is identified or unidentified;
- (4) the circumstances of the death indicate the death may have been caused by unlawful means;
- (5) the person commits suicide or the circumstances of the death indicate that the death may have been caused by suicide;
- (6) the person dies without having been attended by a physician;
- (7) the person dies while attended by a physician who is unable to certify the cause of death and who requests the justice of the peace to conduct an inquest; or
- (8) the person is a child younger than six years of age (few exceptions are part of this provision)

Decisions about autopsies are not mandated and are left to the discretion of the medical examiner. Furthermore, the laws are general enough that jurisdiction may be accepted in a wide variety of cases that are not otherwise specified in law.

In addition, the EPOME services the community by assisting families with funeral arrangements, authorizing cremations, signing death certificates, reporting viable candidates to the local tissue bank for postmortem altruistic donation, positively identifying decedents, preparing for a mass casualty event, academic endeavors (teaching interns and Medical Students), and fostering community outreach through different institutions.

EPOME – ORGANIZATIONAL CHART



CASE JURISDICTION

El Paso covers an area of about 259 square miles (city) and an overall county area of 1015 square miles, having an estimated population (2022 census estimate) of about 868,763. Countywide, the population is about 92% white (which includes 83% white-hispanic and 11% white non-hispanic), 2.8% black, 1% American Indian, 1.2% Asian, 1.2% two or more races.

When a local death (one that occurs within the boundaries of El Paso County) is reported to the EPOME, the case is either **accepted** or **released**. If a case is accepted, it means that the medical examiner will be signing the death certificate. A case is **released** when the death is natural (e.g., non-natural contributing factors such as trauma have been ruled out), circumstances are known, the person has extensive and well documented comorbidities/medical history, and a community physician is willing and able to sign the death certificate.

Local deaths that fall under the EPOME jurisdiction are transported to the EPOME for examination by a contract body transport company. In many cases, an EPOME investigator attends the death scene in person to perform a preliminary examination of the body and present a written field report to the medical examiner. EPOME investigators usually attend all homicides, suicides, and accidental deaths, and selected natural deaths. Investigators are on staff and available 24 hours/day, 365 days/year. EPOME investigators do not physically perform scene investigations on cases that are reported to them from outside of the physical boundaries of El Paso County.

On accepted cases, the medical examiner uses one of two approaches to obtain information to complete the death certificate:

- Inquest. The death certificate is signed without examining the body (review of medical records and other pertinent reports).
- Exams: The body is physically transported to the EPOME, and a final written report is produced. There are two types of exam cases: 1) External Examination. Formal external examination, which may or may not include toxicology/chemical testing. 2) Autopsy. Complete autopsy, which may or may not include toxicology/chemical testing, histology, and/or other ancillary tests.



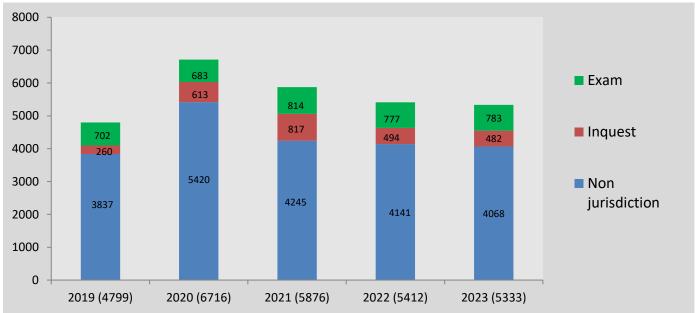
Area served by the EPOME is highlighted in red.

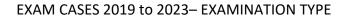
EXECUTIVE SUMMARY - 2023

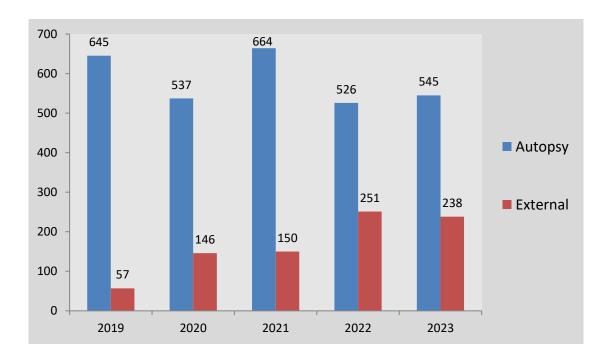
In 2023, the El Paso County had a total of <u>7073</u> deaths. Of these, <u>5333</u> were reported to the EPOME. Every reported case requires a preliminary screening by EPOME investigative staff to determine if it falls under the jurisdiction of the EPOME. Of those calls, a total of 4068 cases were **released**, with death certificates being signed by primary care physicians in the community. These included 530 calls were related to cases that did not meet the guidelines as described above to be reported to the EPOME (**declined jurisdiction** cases). Jurisdiction was **accepted** on a total of <u>1265</u> cases (*482* **inquests** and *783* **exam** cases). A significant proportion [755 (59%)] of the EPOME jurisdiction cases came from local hospitals. In all the exam cases the bodies were physically examined at the EPOME. Full body autopsies were conducted on <u>545</u> cases and <u>238</u> underwent an *external examination* only. The EPOME does not perform partial autopsies.

There were a total of <u>1530</u> death scenes investigated. This represented an increase of 13% from those in 2022 (1355). A total of <u>934</u> bodies were transported to the EPOME facilities. Note that the number of transported bodies is greater than the exam cases; this is because some *release* and some *inquest* cases are transported to the EPOME morgue as a courtesy to families in need of body storage while waiting to finalize funeral arrangements. There were no exhumations performed and no cases previously autopsied at local hospitals were retained by the EPOME in 2023.



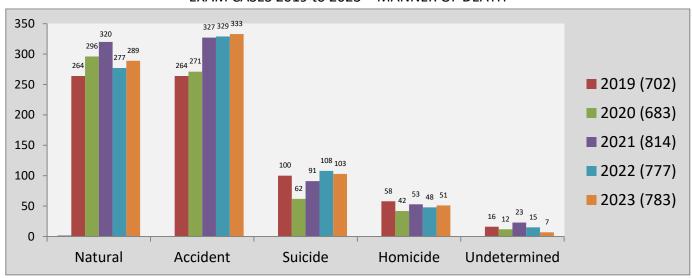




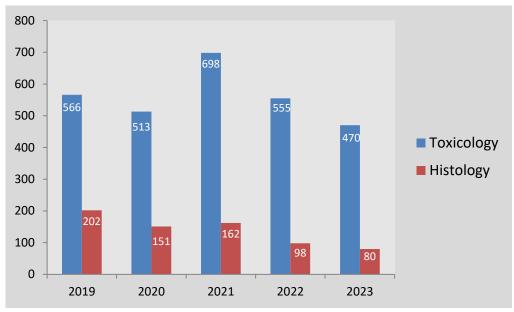


The autopsy to external examination ratio for 2023 was 2.2:1

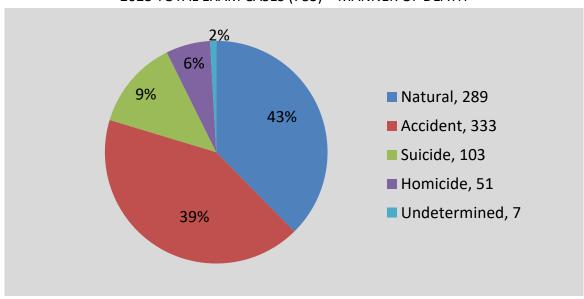
EXAM CASES 2019 to 2023 - MANNER OF DEATH







EPOME 2023: EXAM CASES2023 TOTAL EXAM CASES (783) – MANNER OF DEATH



2023 TOTAL EXAM CASES (783) - MANNER OF DEATH & AUTOPSY STATUS

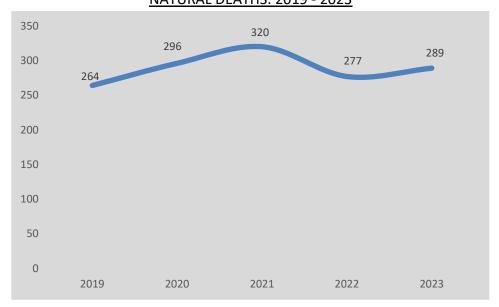
	NATURAL	ACCIDENT	SUICIDE	HOMICIDE	UNDETERMINED	TOTAL (%)
Autopsy (%)	200(69%)	258 (77%)	29 (28%)	51 (100%)	7 (100%)	545 (70%)
External Exam (%)	89 31(%)	75 (23%)	74 (72%)	0	0	238 (30%)
TOTAL	289	333	103	51	7	<u>783</u>

AGE

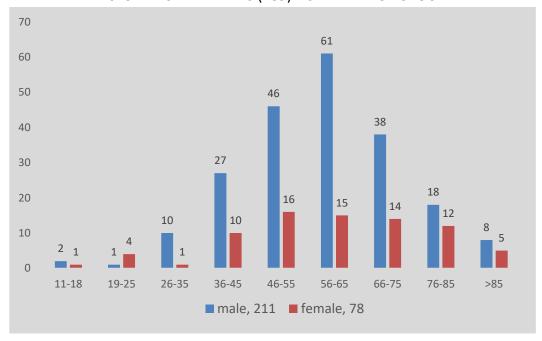
		MANNER OF DEATH								
	NATU	JRAL	ACCI	DENT	SUICIDE HOMICIDE		UNDE	UNDETERMINED		
Age Group	3	9	3	2	3	4	5	\$	3	\$
Unidentified	-	1	-	1	-	-	1	1	2	-
<1	-	-	2	6	-	-	1	-	-	1
1-5	-	1	2	1	-	-	1	1	1	-
6-10	-	1	1	1	-	1	ı	1	1	-
11-18	2	1	9	2	3	3	5	2	1	-
19-25	1	4	30	15	19	7	8	1	1	1
26-35	10	1	61	12	22	5	8	3	1	-
36-45	27	10	47	14	8	5	5	2	-	-
46-55	46	16	43	9	4	3	8	1	-	-
56-65	61	15	39	8	8	2	4	1	-	-
66-75	38	14	20	2	9	-	1	-	-	-
76-85	18	12	4	3	2	-	1	1	-	-
>85	8	5	1	-	3	1	ı	ı	-	-
TOTAL	211	78	259	74	78	25	41	10	5	2
<i>ਹ</i> ': 594	28	39	33	33	103 51		51	7		
φ: <u>189</u>										

2023 TOTAL EXAM CASES (783) – GENDER AND GROUP

NATURAL DEATHS (289) NATURAL DEATHS: 2019 - 2023



2023 NATURAL DEATHS (289) - SEX AND AGE GROUP



Individuals aged 50-68 years comprised 45% of all people who succumbed to natural deaths in 2023. The male:female ratio for natural deaths investigated by the OME was 2.7:1 in 2023.

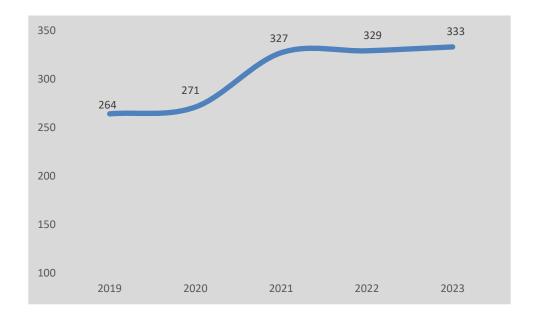
2023 NATURAL DEATHS* - CAUSE OF DEATH

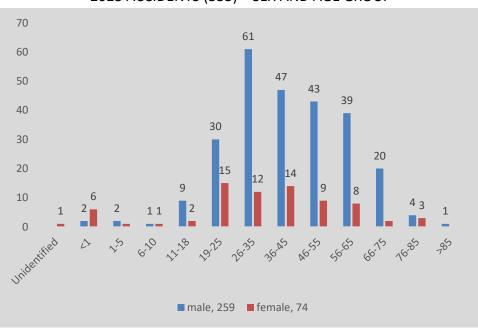
Cardiovascular Disease	221
Complications of Chronic Alcohol Abuse	25
Diabetes Mellitus	9
Cancer	7
Epilepsy	5
Pulmonary Embolism	4

^{*}only diagnoses with 4 or more occurrences are included.

Cardiovascular Disease includes 221 cases with the following cause of death statements: hypertensive and atherosclerotic cardiovascular disease (150), atherosclerotic cardiovascular disease (63), intraparenchymal brain hemorrhage (3), ruptured aortic aneurysm (2), aortic dissection (1), endocarditis (1), and tricuspid valve insufficiency (1).

ACCIDENTS (333) ACCIDENTS: 2019 – 2023





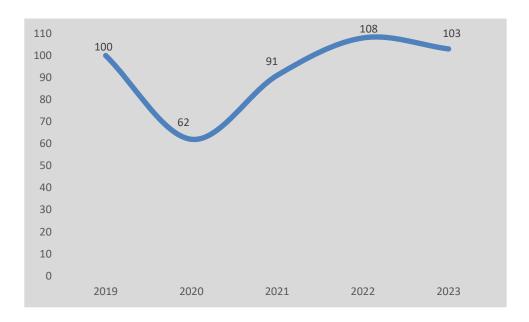
2023 ACCIDENTS (333) - SEX AND AGE GROUP

Accident victims were most frequently male (77.7%). Individuals between the ages of 19-40 years comprised 45% of all accidental fatalities.

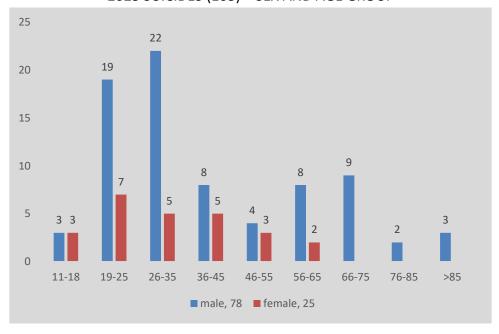
2023 ACCIDENTS (333) - MECHANISM

Acute Drug Toxicity	175
Blunt Force Injuries	119
Environmental Heat Exposure	15
Drowning	8
Asphyxia - Suffocation	7
Alcohol Toxicity	5
Thermal injuries	2
Choking	1
Positional Asphyxia	1
TOTAL	333

SUICIDES: 2019 - 2023



2023 SUICIDES (103) – SEX AND AGE GROUP



Suicide victims were most frequently male (75.75%). Individuals between the ages of 21 - 38 years comprised 52% of all suicides.

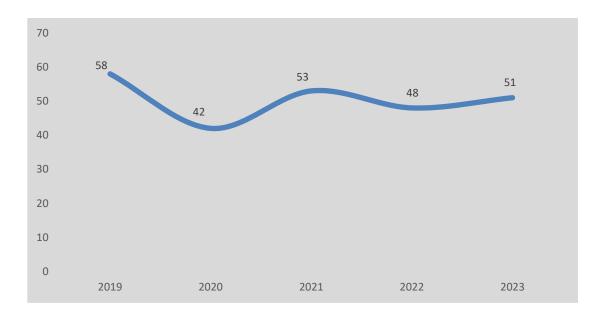
2023 SUICIDES (103) - METHOD

Firearm	58
Hanging	23
Acute Drug Toxicity	12
Blunt Force Injuries	6
Sharp Force Injuries	3
TOTAL	103

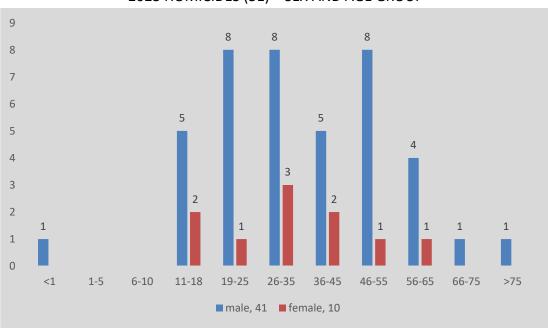
The majority (55 out of 58 [95%]) of suicide by firearm involved wounds to the head.

HOMICIDES

HOMICIDES: 2019 - 2023

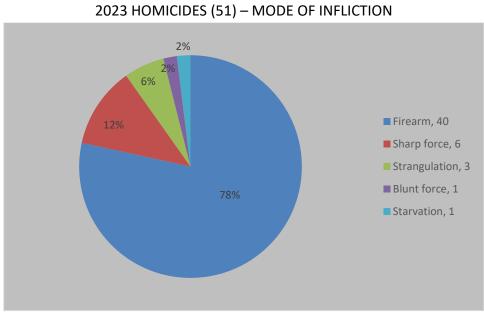


The homicide rate for El Paso County in 2023 was 5.8 per 100,000 people (compared to 7.5 US National Average [CDC, 2022]).

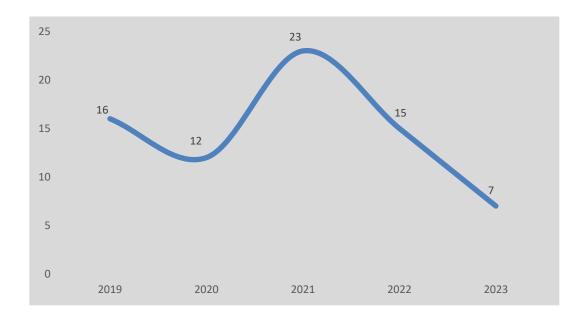


2023 HOMICIDES (51) - SEX AND AGE GROUP

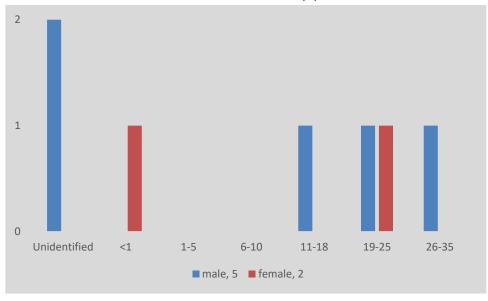
The majority (80%) of homicide victims were male.



UNDETERMINEDUNDETERMINED MANNER OF DEATH: 2019 - 2023



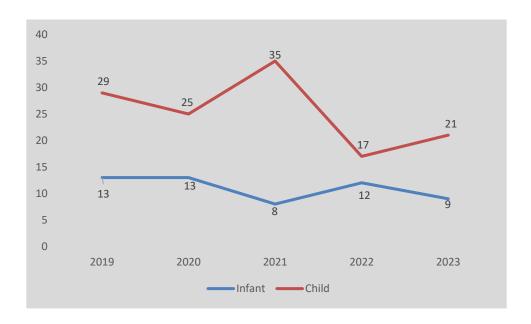
2023 UNDETERMINED MANNER OF DEATH (7) – SEX AND AGE GROUP



CHILD FATALITY

In 2023, there were 30 deaths of individuals 17 years or age or younger, which included the deaths of 9 infants (a baby in the first year of life) and 21 children (individual between the ages of 1 and 17.

INFANT (AGE <1) & CHILD (AGE 1-17) DEATHS: 2019 - 2023



2023 INFANT & AND CHILD DEATHS (30) - SUMMARY TABLE

MANNER OF DEATH						
	NATURAL	ACCIDENT	SUICIDE	HOMICIDE	UNDETERMINED	TOTAL (%)
Full Autopsy (%)	-	18 (95%)	-	4 (100%)	1 (100%)	23 (76%)
External Exam (%)	1	1 (5%)	6 (100%)	-	-	7 (243%)
TOTAL (30)	0	19	6	4	1	100%

2023 INFANT & CHILD DEATHS (31) - MANNER OF DEATH

	MANNER OF DEATH									
	NATI	URAL	ACC	IDENT	НОМ	VICIDE	SUIC	CIDE	UNDETE	RMINED
Age Group	3	2	3	9	3	9	3	9	3	9
<1	-	-	2	6	-	1	-	-	-	1
1-3	-	-	2	1	-	•	-	-	-	1
4-6	-	-	-	-	-	-	-	-	-	-
7-10	-	-	1	1	-	-	-	-	-	-
11-14	-	-	-	-	-	1	3	2	-	-
15-17	-	-	6	-	2	1	-	1	-	1
TOTAL	0	0	11	8	2	2	3	3	0	1
∂ : 16	(0		19		4		5	1	
♀:14										
total: 30	ĺ									

♂=male; ♀=female

2023 CHILD (AGE 1-17) DEATHS (21) - CAUSE OF DEATH

Blunt Force Injury	6
Firearm	5
Hanging	5
Drug Toxicity	3
Drowning	1
Thermal Injuries and Smoke Inhalation	1
TOTAL	21

2023 INFANT (<1Y) DEATHS (9) - CAUSE OF DEATH

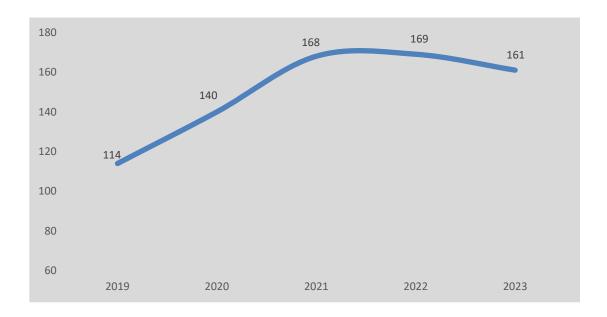
Asphyxia – Suffocation	6
Undetermined	1
Blunt force injuries	1
Thermal Injuries and Smoke Inhalation	1
TOTAL	9

CHILD FATALITY - SUMMARY

Childhood deaths represented 3.8% of all the exam cases investigated by the EPOME in 2023. The most common manner of death among children was accident (63%).

TOXICOLOGY-RELATED DEATHS

TOXICOLOGY-RELATED DEATHS: 2019 - 2023



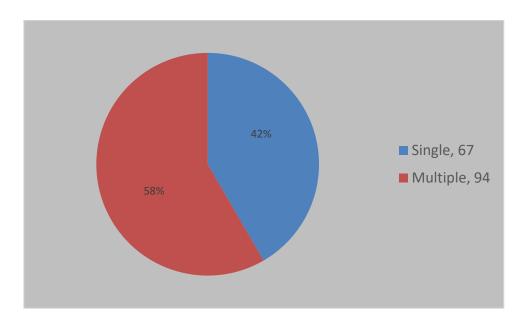
2023 TOXICOLOGY-RELATED DEATHS (161) - SUMMARY

	MAN	NER	OF DI	ЕАТН	
	ACCID	ENT	SUIC	CIDE	
Age Group	3	2	3	9	
11-18	3	-	1	-	
19-25	8	2	2	2	
26-35	26	8	2	-	
36-45	31	7	1	-	
46-55	25	6	1	-	
56-65	18	5	-	1	
66-75	12	1	1	-	
TOTAL	123	29	6	3	
♂: 129	15	2	9		
₽: 32					

♂=male ♀=female

By definition, toxicology-related deaths cannot be natural in manner. Accidents comprised 94% of all toxicology-related deaths. Over half (52%) of the decedents who succumbed to drug toxicity were between the ages of 16 and 43. Regarding accidental toxicology-related deaths, the male-to-female ratio is 4:1.





2023 SINGLE DRUG-RELATED DEATHS (67) - Drug Involved

Methamphetamine	27
Fentanyl	18
Cocaine	15
Heroin	1
Diphenhydramine	1
Fluoxetine	1
Methadone	1
Sevoflurane	1
Bupropion	1
Donepezil	1
TOTAL	67

2023 MULTIPLE DRUG-RELATED DEATHS (94) - Most Frequently Involved Drugs

Fentanyl	80
Methamphetamine	58
Cocaine	27
Heroin	13
Methadone	9
Alprazolam	7
Acetyl fentanyl	6

^{*}only drugs involved in ≥5 cases are mentioned

2023 TOXICOLOGY-RELATED DEATHS – Multiple-Drug-Related Deaths (94): Drugs Involved

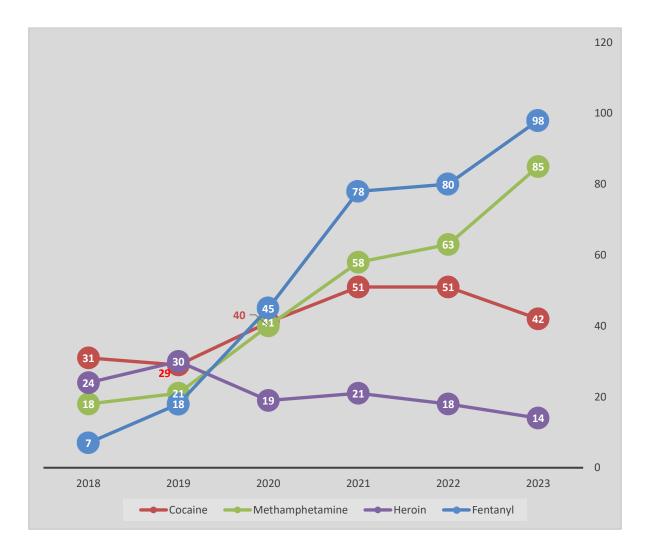
	Number of Drugs				
MANNER	2	3	4	5	≥6
SUICIDE	_		,		
1					4,18,19,23,26,40,70,75,101
2	28,31				1,10,13,23,20,10,70,73,101
3	21,28				
4	47,91				
5	47,31			43,57,75,78,89	
ACCIDENT				13,37,73,70,03	
1		3,37,42			
2	37,64	0,07,12			
3	51,61	37,42,64			
4	37,64	01712701			
5	21,37				
6	,-	21,37,42			
7	37,64				
8	51,61	37,42,64			
9	37,64	- , ,-			
10	37,64				
11	37,64				
12		21,37,64			
13	37,64				
14			3,4,37,72		
15		37,42,64			
16	37,64				
17	37,64				
18	37,64				
19	37,64				
20		37,58,64			
21		21,37,64			
22		10,64,72			
23	37,42				
24	38,51				
25	37,64				
26					4,21,22,37,43,64
27	37,64				
28		3,37,64			
29	37,64				
30	21,37				
31			3,21,37,64		
32	37,64				
33	22,72				
34		3,37,64			
35	37,64				
36	21,37				
37	37,72				
38		4,19,37			
39	37,64				
40	64,72				
41	21,37				
42			4,19,21,63		
43		21,37,64			
44		21,37,64			

	Number of Drugs				
MANNER	2	3	4	5	≥6
ACCIDENT					
45		37,64,72			
46		3,37,64			
47	21,37				
48	37,64				
49	37,64				
50	37,64				
51		4,10,37			
52	37,42				
53		26,37,64			
54	37,64				
55		4,21,37,64			
56	37,64				
57	37,64				
58		37,79,80			
59	21,37				
60	37,64				
61	21,34				
62	21,64				
63		37,42,64			
64	21,37				
65	21,63				
66	37,64				
67		21,37,64			
68	21,37				
69	37,64				
70	37,72				
71	21,37				
72	21,42				
73	37,64				
74	37,64				
75		21,37,72			
76	37,64				
77		37,42,64			
78			15,37,42,64		
79	21,37				
80		21,37,42			
81		37,42,64			
82	37,64				
83	37,64				
84	37,64				
85	37,58				
86	37,58				
87	37,64				
88	37,64				
89	37,72				

2023 TOXICOLOGY-RELATED DEATHS – Multiple-Drug-Related Deaths: Medication/Drug Key

Acetaminophen	1	Fentanyl	37	Naproxen	73
Acetone	2	Fluoxetine	38	Nordiazepam	74
Acetyl Fentanyl	3	Fluvoxamine	39	Olanzapine	75
Alprazolam	4	Gabapentin	40	Opiates (NOS)	76
Amitriptyline	5	Haloperidol	41	Oxazepam	77
Amphetamine	6	Heroin	42	Oxcarbazepine	78
Aripiprazole	7	Hydrocodone	43	Oxycodone	79
Bath Salts	8	Hydroxychloroquine	e 44	Oxymorphone	80
Benzodiazepine (NOS)	9	Hydrogen Sulfide	45	Para-fluoro-fentanyl	81
Buprenorphine	10	Hydromorphone	46	Paroxetine	82
Butalbital	11	Hydroxyzine	47	Pentobarbital	83
Bupropion	12	Inhalants (NOS)	48	Perphenazine	84
Buspirone	13	Insulin	49	Phenobarbital	85
Carisoprodol	14	Isopropanol	50	Phentermine	86
Chlordiazepoxide	15	Ketamine	51	Phenylpropanolamine	87
Chlorphenamine	16	Lacosamide	52	Pregabalin	88
Chlorpromazine	17	Lamotrigine	53	Promethazine	89
Citalopram	18	Levamizole	54	Pseudoephedrine	90
Clonazepam	19	Levetiratecam	55	Quetiapine	91
Clozapine	20	Loperamide	56	Risperidone	92
Cocaine	21	Lorazepam	57	Salicylates	93
Codeine	22	MDMA	58	Sertraline	94
Cyclobenzaprine	23	Meclizine	59	Synth. Cannabinoid	95
Desipramine	24	Meperidene	60	Temazepam	96
Dextromethorphan	25	Metaxolone	61	Tetrafluoroethane	97
Diazepam	26	Metformin	62	Topiramate	98
Difluoroethane	27	Methadone	63	Tramadol	99
Diphenhydramine	28	Methamphetamine	64	Trazodone	100
Donepezil	29	Methane	65	Venlafaxine	101
Doxepine	30	Methanol	66	Verapamil	102
Doxylamine	31	Methylphenidate	67	Ziprasidone	103
Duloxetine	32	Metroprolol	68	Zolpidem	104
Ethane	33	Midazolam	69	Zopiclone	105
Ethanol	34	Mirtazapine	70		
Ethylene Glycol	35	Mitragynine	71		
Etizolam	36	Morphine	72		

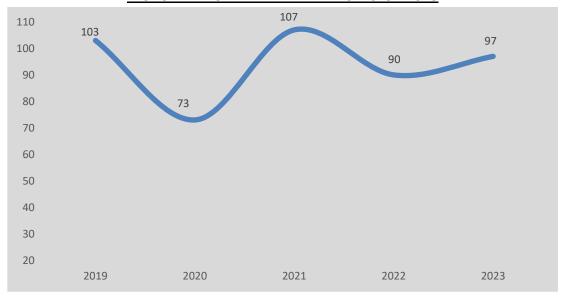
TOXICOLOGY-RELATED DEATHS - 2018-2023 Trends



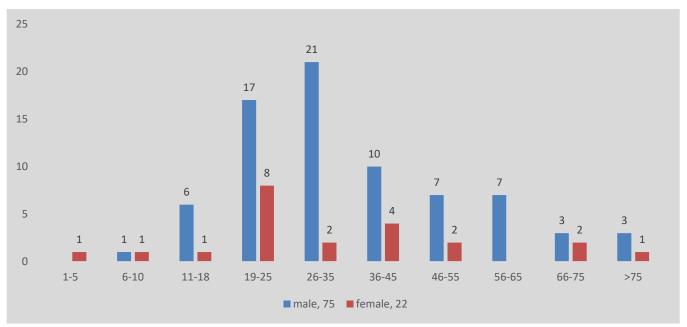
From 2022 to 2023, fentanyl-related deaths increased 22.5%, while methamphetamine-related deaths increased 35%.

MOTOR VEHICLE RELATED DEATHS

MOTOR VEHICLE RELATED DEATHS: 2019 - 2023



2023 MOTOR VEHICLE RELATED DEATHS (97) – SUMMARY TABLE



There were 97 motor vehicle related fatalities in 2023. All were accidental in manner. Males comprised 77% of all motor vehicle related deaths in 2023.

2023 MOTOR VEHICLE RELATED DEATHS (97) - STATUS OF DECEDENT

Driver	38
Pedestrian	24
Passenger	17
Motorcycle - Operator	13
Unknown location in vehicle	3
Bicyclist	1
Motorcycle - Passenger	1
TOTAL	97

MISCELLANEOUS DATA - EPOME

FORENSIC CONSULTATIONS

On occasion, a detailed forensic neuropathology consultation is required to further characterize important anatomic findings in selected cases. Likewise, forensic cardiovascular pathology, forensic anthropology, and forensic odontology consultations are readily available to the EPOME.

YEAR	Neuropathology	Anthropology
2019	17	1
2020	18	0
2021	14	5
2022	12	9
2023	9	2

ORGAN AND TISSUE DONATION

The EPOME allows an organ procurement organization (OPO) to approach families who wish to donate tissues from the deceased. These donations include skin, musculoskeletal tissue, and cardiovascular tissue (heart valves). Similarly, the EPOME also works with another OPO, fostering in-hospital postmortem organ donation. In 2023, there were 9 **donors**, who impacted the lives of local patients in several El Paso Hospitals, including: University Medical Center, Del Sol Medical Center, El Paso Children's Hospital, Sierra Providence East, and Las Palmas Medical Center. Furthermore, the EPOME started working in coordination with the Southwest Brain Bank (SWBB), a brain tissue repository for research in mental illness, for altruistic postmortem donation. In 2023, there were 11 generous families that donated tissue for this laudable endeavor.

CREMATION AUTHORIZATIONS

In Texas, Medical Examiners are required by law to sign an authorization before a body is cremated. The forensic pathologists at the EPOME review each cremation authorization form and the respective death certificate before authorizing cremation. The table below shows the number of cremation authorizations signed by our forensic pathologists over the recent years.

YEAR	Cremations
2019	3392
2020	5020
2021	5026
2022	4776
2023	4596

UNIDENTIFIED BODIES

The EPOME interacts with law enforcement agencies to positively identify individuals. A commonly used technique for identification is fingerprint comparison. Other scientific methods of identification (ID) include radiograph comparison (dental or body), medical devices, and DNA extraction. Over the past 5 years, 484 decedents have been positively identified using fingerprints.

YEAR	Fingerprint ID
2019	105
2020	104
2021	139
2022	191
2023	206

UNCLAIMED BODIES

El Paso County General Assistance (GA) Program provides financial aid to help families who have lost a loved one pay for the funeral and cremation of the individual's remains. In 2023, the OME referred 39 cases to the GA program.

MEDICAL EXAMINER PERFORMANCE AUDIT

TURNAROUND TIME FOR FINAL AUTOPSY REPORT

The EPOME adopts national standards as set forth by the National Association of Medical Examiners (NAME). Regarding final written autopsy reports, NAME recommends that 90% of all exam cases are finalized within 60 calendar days to avoid a phase I (minor) deficiency, and that 90% of all exam cases are finalized within 90 calendar days to avoid a phase II (major) deficiency.

2023 EPOME EXAM CASES (783) - TIME FROM AUTOPSY TO FINAL WRITTEN AUTOPSY REPORT

Time for final report	No. of cases (%)
Within 60 days	762 (97.3)
Within 90 days	771 (98.4)
>90 days	12 (1.5)

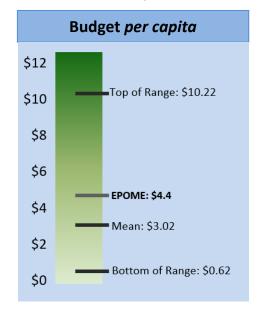
THE COST OF MEDICOLEGAL DEATH INVESTIGATION

A rule-of-thumb figure for providing quality medicolegal death investigation has been said to be about \$3 per person per year, according to a study that included nearly 60 NAME-accredited offices (*J Forensic Sci, September 2013, Vol. 58, No. 5*). In this study, the **budget per capita** (total budget/total number of inhabitants of jurisdiction) had a mean of \$3.02, although there was a very wide range (\$0.62–\$10.22). Another study conducted in the State of Colorado (available at www.denvergov.org/auditor) calculated the **cost per death reported** (total budget/total reported deaths) and found an average cost per death reported of \$808 for the NAME accredited medical examiner offices in their jurisdiction.

In 2023, the EPOME has a cost per death reported of \$717 and a budget per capita of \$4.4/year.

EL PASO COUNTY COST OF MEDICOLEGAL DEATH INVESTIGATION (AS COMPARED WITH OTHER NAME-ACCREDITED OFFICES).





GLOSSARY

Abortion - the premature exit of the products of conception (fetus, fetal membranes, or placenta) from the uterus.

Accident – manner in which death results from unintentional injury, poisoning, or intoxication.

Autopsy – a detailed postmortem external and internal examination of a body to determine cause of death, collect evidence, determine the presence or absence of injury. The autopsy includes examination of the internal organs and structures after dissection.

Cause of Death – a disease, injury, or poison resulting in a physiological derangement or biochemical disturbance that is incompatible with life. The result of post-mortem examination, including autopsy and toxicological findings, combined with information about the medical history of the decedent serves to establish the *cause of death*. The cause of death can result from different circumstances and *manner* of death. For example, the same cause of death, gunshot wound, can result under suicidal, homicidal, or accidental manners.

Children – individuals 17 years of age and younger.

Ethanol – an alcohol, which is the principal toxicant in beer, liquor, and wine.

External Examination— a detailed postmortem external examination of a body, conducted when a full autopsy is determined to not be required.

Homicide – manner in which death stems from a volitional or intentional act of one person against another.

Infant - a child in the first year of life

Inquest - an investigation into the cause and circumstances of the death of a person, and a determination, made with or without a formal document review, as to whether the death was caused by unnatural events.

Physician: a practicing doctor of medicine or doctor of osteopathic medicine who is licensed by the Texas State Board of Medical Examiners under Subtitle B, Title 3, Occupations Code.

Jurisdiction – the extent of the Office of the Medical Examiner's authority over deaths. The EPOME authority covers every death which is due or which might reasonably have been due to a violent or traumatic injury or accident, or is of public health interest and will be investigated by the Medical Examiner.

Manner of Death – the general category of the circumstances of the event which causes the death. The categories are *accident*, *homicide*, *natural*, *suicide*, and *undetermined*.

Natural – the *manner of death* used when solely a disease and/or aging process causes death. If death is hastened by an injury, the *manner of death* is not considered natural.

Office of the Medical Examiner – the office within the El Paso County that is responsible for the investigation of sudden, violent, unexplained, or unexpected death.

Opiate – a class of drugs, including morphine, codeine, and heroin, derived from the opium poppy plant (*Papaver somniferum*).

Pending – the *cause of death* and *manner of death* are to be determined pending further investigation (such as toxicological, histological and/or neuropathological testing).

Stillbirth – the death of a fetus after the 20th week of pregnancy. Also known as Intrauterine Fetal Demise (IUFD) **Stimulant**: a class of drugs, including cocaine and oral amphetamines, whose principal action is the stimulation of the central nervous system.

Sudden Unexpected Infant Death - the death of an infant less than one year of age in which investigation, autopsy, medical history review and appropriate laboratory testing fail to identify a specific cause of death.

Sudden Infant Death Syndrome – (SIDS) a broad, heterogeneous group of unknown causes of death in infants which, since its creation in 1969, evolved from a descriptor into a diagnosis as if it were a singular disease or disorder. Forensic pathologists are migrating away and abandoning the use of SIDS as a diagnostic phrase. **Suicide** – death results from the purposeful attempt to hurt oneself.

Undetermined – the *manner of death* for deaths in which there is insufficient information to assign another manner. An undetermined death may have an undetermined cause and manner of death; an undetermined cause of death and a known manner; or a known cause of death and an undetermined manner.

2023 Annual Report

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Created by:

Mario A Rascon