

# DEPARTMENT OF THE MEDICAL EXAMINER



**William W. Goodhue, Jr., M.D., Acting Chief Medical Examiner\***

## **POWERS, DUTIES AND FUNCTIONS**

The Department of the Medical Examiner (MED) serves the public through the investigation of sudden, unexpected, violent, and suspicious deaths. The purpose of such an investigation is to discover, document, and preserve the medical, anatomic, or evidentiary findings, which will allow the department to determine the cause and manner of death, to identify the time of death and injury, to confirm or deny the account of how death occurred, to determine or exclude other contributory or causative factors to the death, and to provide expert testimony in criminal and civil litigation. Documented, sound, and objective medical evidence enables recognition of murder and exoneration of the innocent in court proceedings.

Section 6-1305 of the 1973 Revised Charter of the City and County of Honolulu (2000 Edition) states, "When any person dies in the City as a result of violence or by a casualty, or by apparent suicide, or suddenly when in apparent health, or when not under the care of a physician, or when in jail or in prison, or within twenty-four hours after admission to a hospital, or in any suspicious or unusual manner, it shall be the duty of the person having knowledge of such death to immediately notify the Department of the Medical Examiner and the Police Department."

The MED is staffed by physicians specialized in the area of forensic pathology, medical examiner investigators, laboratory technologists, autopsy assistants, and clerical personnel. The physicians are board certified in the specialty of anatomic pathology as required by Section 841-14.5 of the Hawaii Revised Statutes with the majority of autopsies performed by forensic board certified pathologists.

The staff is aware of the tragedy that accompanies sudden and unexpected deaths, and realizes that each case represents an individual who is deeply missed by his or her loved ones. Our investigators are trained to deliver death notifications with the utmost compassion, courtesy, and professionalism. A thorough investigation into the circumstances of death, postmortem examination, and necessary laboratory studies are directed at determining the cause and manner of death. In addition to providing pertinent answers for significant issues such as insurance claims, estate settlements, information and evidence necessary for civil and criminal legal proceedings, they also provide factual data for relatives, which helps them through their grieving process with better understanding of the cause and manner of death.

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\*Retired August 31, 2011

The physicians are available for the relatives, attorneys and estate representatives to provide necessary information.

## **HIGHLIGHTS**

Principal objectives of the MED are to protect the public health by (a) diagnosing previously unsuspected contagious disease; (b) identifying trends affecting the lives of our citizens such as traffic accident fatalities, drug-related deaths, industrial accidents, and teen and other suicides aimed at prevention; and (c) identifying hazardous environmental conditions in the workplace, home and elsewhere. The department's community outreach educational program this year included 48 different requested presentations in house and in the field to approximately 407 at risk teenagers aimed at DUI and drug abuse prevention, and to approximately 751 students interested in forensic careers as well as professional groups. Presentations most often include morgue tours for high school students with an informative seminar on drug-related deaths, speeding accidents, teen suicides, and other trends affecting the lives of our citizens. The goal is to provide a better perspective of how their actions and decisions can affect them as well as others in the community. Driving schools frequently ask for these programs for their student drivers. The MED actively participates in multi-disciplinary state-wide child death review systems, thereby generating recommendations for decreasing child deaths by identification of risk factors and promulgation of preventive measures. The Department similarly participates in an inter-agency domestic violence fatality review team, aimed at prevention by identification of risk factors. Assisting local donor agencies to obtain consent for organ and tissue procurement is an ongoing priority. The Department continues to participate in the Honolulu Heart Program which includes aging studies of the brain in pre-registered enrollees. Scientific death investigation additionally provides factual material and evidence for agencies involved in workers' compensation, public health hazards, and community health and disease. As a proponent of city-wide mass casualty readiness, the MED has participated in a multi-echelon interagency mass fatalities leadership course, and has completed a department continuity of operations plan, also updating the Department and the City mass casualty plans. The Department's participation in the National Missing and Unidentified Persons System (NamUS), a new online database, assists in determining whether a missing loved one might be one of otherwise unidentified remains in our custody.

The MED offers pathology electives to medical students, medical transitional program residents, and pathology residents from the University of Hawaii John A. Burns School of Medicine. In addition, the Chaminade University forensic science curriculum provides opportunities for on-site internships as part of the requirement to complete the forensic science baccalaureate degree.

The Department maintains a high level of competence in the field of scientific death investigation and continues to contribute to the improvement of the quality of life of the people of Oahu.

The Department's website is included in the official website of the City and County of Honolulu at <http://www.honolulu.gov>.

The work of the Department is tabulated in statistical form as follows:

## SUMMARY OF STATISTICAL REPORT OF CASES HANDLED BY DEPARTMENT FISCAL YEAR 2012

The office investigated 2213 deaths this past year as compared to 2149 in Fiscal Year 2011. The MED assumed jurisdiction in 775 cases and performed autopsies in 454 cases. Non-autopsied cases comprised complete external examinations and toxicological testing of body fluids.

Next-of-kin authorized organ donation in 44 cases. Of the 775 jurisdiction cases, the MED investigators visited 373 original death scenes. These scenes are where the incident occurred and, therefore, are an integral part of a thorough death investigation. For example, if the death of a young child occurs in a medical institution, in addition to visiting the medical institution, the MED investigator goes to the original scene of the incident.

Number of deaths investigated .....	2213
..... Jurisdiction assumed in .....	775
..... Violent deaths .....	462
Autopsied .....	298
Not autopsied.....	164
..... Violent deaths (undetermined manner) ..	23
Autopsied .....	19
Not autopsied .....	4
..... Unclassified (undetermined manner).....	10
Autopsied .....	8
Not autopsied.....	2
..... Non-violent deaths.....	280
Autopsied .....	129
Not autopsied.....	151
..... Historical remains .....	1
..... Non-human artifacts.....	0
..... Jurisdiction released to private physician (death within 24 hours).....	701
..... Attended/other deaths reported... ..	737
Total autopsies performed by Medical Examiner .....	454
Total number of bodies transported to Morgue . .....	695
Total organ/tissue harvesting.....	44
Total original scene of incident visited .....	373
Total no body, no autopsy (DC jurisdiction).....	115
Total unidentified skeletal remains.....	2

**LABORATORY PROCEDURES CONDUCTED  
FISCAL YEAR 2012**

Laboratory Chemical Tests .....	982
Ethanol Tests.....	682
Toxicology Screen .....	1201
Toxicology Sent Out .....	246
Hematoxylin and Eosin Slides Prepared.....	2036
Special Slides Prepared ... ..	27

Laboratory procedures that include toxicological analysis, blood alcohol determinations, preparation of microscopic slides for histological examinations, and various other chemical analyses of different types of body fluids continue to be a very important aspect of investigation of deaths occurring under our jurisdiction.

Drug-related deaths, including abuse of prescription medication, continue to be a concern. Cocaine, opiates, Oxycontin, and methamphetamine continue to be detected in toxicological screens of deaths investigated by the Department. Methamphetamine continues to be associated with violent deaths.

**REQUEST FOR REPORTS  
FISCAL YEAR 2012**

Investigation and Autopsy Reports .....	808
Fees Collected .....	\$1,883.50

A fee of \$5.00 is charged for each report requested by individuals and private agencies. There is no charge to governmental agencies or to hospitals. There is a fee of not less than \$5.00 for reports subpoenaed. Other related fees include duplication of microscopic slides and digital photographs.

**BUDGET AND AUTHORIZED PERSONNEL  
FISCAL YEAR 2012**

Budget Expenditures .....		\$1,358,364
..... Salaries .....	\$853,943	
..... Current Expenses...	504,421	
..... Equipment ... ..	0	
..... Positions.....	19	

## CLASSIFICATION OF VIOLENT DEATHS FISCAL YEAR 2012

The number of violent deaths decreased to 497 compared to 516 last fiscal year. There were 227 other accidental deaths this past year compared to 230 in FY 2011. Falls (125) and poisoning (84) comprised the majority of the 227 victims. There was a decrease in the number of homicides, 17 this year compared to 22 the previous year.

Violent Deaths.....		497
..... Homicide .....		17
.....     Asphyxia .....	1	
.....     Blunt trauma .....	5	
.....     Child abuse.. .....	2	
.....     Fire ... .....	1	
.....     Gunshot..... .....	4	
.....     Stabbing .....	4	
..... Suicide .....		118
.....     Asphyxia .....	9	
.....     Fall..... .....	17	
.....     Gunshot..... .....	18	
.....     Hanging .....	56	
.....     Poisoning..... .....	15	
.....     Sharp force trauma . .....	3	
..... Traffic .....		61
..... Water-Related .....		45
..... Industrial..... .....		11
..... Other Accident .....		227
..... Undetermined..... .....		33
.....     Drowning .....	3	
.....     Fall..... .....	2	
.....     Fire ... .....	2	
.....     Poisoning..... .....	14	
.....     Traffic .....	2	
.....     Unknown..... .....	10	

NOTE: Some deaths are reported in 2 different categories.

**BREAKDOWN OF HOMICIDE VICTIMS BY RACE  
FISCAL YEAR 2012**

<u>Race</u>	<u>2011 July-December</u>	<u>2012 January-June</u>	<u>Total</u>
Caucasian	0	1	1
Filipino	0	1	1
Hawn/Part-Hawn	2	3	5
Micronesian	2	1	3
Tongan	1	0	1
Other Asian	0	1	1
All Other	2	3	5
<b>TOTAL</b>	<b>7</b>	<b>10</b>	<b>17</b>

**BREAKDOWN OF HOMICIDE METHODS USED  
FISCAL YEAR 2012**

<u>Methods Used</u>	<u>2011 July-December</u>	<u>2012 January-June</u>	<u>Total</u>
Asphyxia	0	1	1
Blunt trauma	4	1	5
Child abuse	0	2	2
Fire	0	1	1
Gunshot	1	3	4
Knife wounds/ Stabbing	2	2	4
<b>Total</b>	<b>7</b>	<b>10</b>	<b>17</b>

**SUICIDE STATISTICS  
FISCAL YEAR 2012**

<u>Method</u>	Chi		Cau		Fil		Hwn P-Hwn		Jps		Kor		Pac Island		Other		<u>Total</u>
	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	
Asphyxia			3	1			1	1							3		9
Fall	1		5	3	1					1	1	2			3		17
Gunshot			8	3			2		1						4		18
Hanging			7		3	1	16	1	5	1	3	1	6	2	8	2	56
Sharp force trauma			1									1			1		3
Poisoning			6	4			1			2						2	15
<b>TOTAL</b>	<b>1</b>		<b>30</b>	<b>11</b>	<b>4</b>	<b>1</b>	<b>20</b>	<b>2</b>	<b>6</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>6</b>	<b>2</b>	<b>19</b>	<b>4</b>	<b>118</b>

**SUICIDE VICTIMS  
FISCAL YEAR 2012**

<u>Age</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
10 thru 19	7	1	8
20 thru 29	24	4	28
30 thru 39	17	6	23
40 thru 49	11	5	16
50 thru 59	11	5	16
Over 60	19	8	27
TOTAL	89	29	118

**SUMMARY OF SUICIDES  
FISCAL YEAR 2012**

<u>2011</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
July	6	3	9
August	10	2	12
September	6	2	8
October	6	6	12
November	6	3	9
December	7	1	8
Sub-Total	41	17	58
<u>2012</u>			
January	9	1	10
February	8	3	11
March	11	2	13
April	5	0	5
May	5	2	7
June	10	4	14
Sub-Total	48	12	60
TOTAL	89	29	118

**TRAFFIC FATALITIES  
FISCAL YEAR 2012**

Type of Occupant	<u>MALE</u>			<u>FEMALE</u>			<u>Total</u>
	<u>2011 July-Dec</u>	<u>2012 Jan-Jun</u>	<u>(With Alc.)</u>	<u>2011 July-Dec</u>	<u>2012 Jan-Jun</u>	<u>(With Alc.)</u>	
Operator	4	3	(4)	1	2	(1)	10
Passenger	1	4	(1)	1	3	(0)	9
Pedestrian	8	8	(7)	1	2	(0)	19
Motorcyclist	6	7	(4)	0	0	(0)	13
Moped rider	5	3	(0)	0	0	(0)	8
Other	1	0	(1)	1	0	(0)	2
<b>TOTAL</b>	<b>25</b>	<b>25</b>	<b>(17)</b>	<b>4</b>	<b>7</b>	<b>(1)</b>	<b>61</b>

## WATER-RELATED DEATHS FISCAL YEAR 2012

There were 45 water-related deaths compared to 39 last year. Thirty-one victims died while engaged in ocean-related activities.

<u>Location and Activity</u>	<u>MALE</u>		<u>FEMALE</u>		<u>Total</u>
	<u>2011 July-Dec</u>	<u>2012 Jan-Jun</u>	<u>2011 July-Dec</u>	<u>2012 Jan-Jun</u>	
Ocean					
Body boarding	1	0	0	0	1
Canoe paddling	1	0	0	0	1
Diving	0	0	0	1	1
Diving, free	3	2	0	0	5
Diving, SCUBA	0	1	0	0	1
Fishing	0	1	0	0	1
Paddle boarding	1	1	0	0	2
Parasailing	0	1	0	0	1
Snorkeling	0	4	0	1	5
Surfing	0	3	0	0	3
Swimming	3	0	1	0	4
Wading/walking	3	1	2	0	6
Harbor/Pier	2	0	0	0	2
Canal/Stream	2	1	0	0	3
Reservoir	1	0	0	0	1
Jacuzzi	1	0	0	0	1
Swimming pool	1	3	1	2	7
<b>TOTAL</b>	<b>19</b>	<b>18</b>	<b>4</b>	<b>4</b>	<b>45</b>

## INDUSTRIAL DEATHS FISCAL YEAR 2012

There were 11 job-related deaths this year compared to eight the previous year.

<u>Age</u>	<u>Synopsis</u>
61	This housekeeper sustained intracranial hemorrhage in an unwitnessed fall while cleaning a house.
45	This police officer sustained multiple traumatic injuries when he was struck by a vehicle as he stood on the shoulder of a highway.
86	This dance studio owner sustained head injuries when she fell and struck her head on a file cabinet.
71	This tree trimmer sustained severe crush injuries while climbing a coconut tree that uprooted and fell on him.
38	This construction laborer sustained craniocerebral injuries when he fell from the roof of a house.
42	This computer IT specialist sustained multisystem organ failure when he fell down the stairs at work.
64	This resident manager sustained multisystem organ failure when he fell while painting a building.
28	This police officer sustained craniocerebral injuries when he was involved in a rear-end collision.
40	This construction worker sustained crush injuries by falling sheet of dirt mixed with rocks.
24	This Air Force aircraft loadmaster craftsman sustained craniocerebral injuries when he fell through a rooftop.
26	This tree trimmer sustained internal traumatic injuries when he fell from a coconut tree.

**OTHER ACCIDENTAL DEATHS  
FISCAL YEAR 2012**

<u>Method</u>	<u>MALE</u>		<u>FEMALE</u>		<u>Total</u>
	<u>2011 July-Dec</u>	<u>2012 Jan-Jun</u>	<u>2011 July-Dec</u>	<u>2012 Jan-Jun</u>	
Asphyxia	4	3	1	2	10
Blunt trauma	1	2	0	1	4
Fall	37	31	28	29	125
Poisoning	35	26	10	13	84
Other	1	3	0	0	4
<b>TOTAL</b>	<b>78</b>	<b>65</b>	<b>39</b>	<b>45</b>	<b>227</b>

## UNDETERMINED DEATHS (MANNER) FISCAL YEAR 2012

When investigative information and autopsy findings cannot determine the fashion in which a cause of death came about, the manner of death is listed as "Undetermined." Thirty deaths fell within this category. The majority of cases fell into two categories: poisoning (drug-related), where accidental or intentional overdose could not be determined, and unknown, where after a complete autopsy, the cause and manner of death could not be determined.

<u>Method/Cause</u>	<u>MALE</u>		<u>FEMALE</u>		<u>Total</u>
	<u>2011 July-Dec</u>	<u>2012 Jan-June</u>	<u>2011 July-Dec</u>	<u>2012 Jan-June</u>	
Drowning	2	1	0	0	3
Fall	1	1	0	0	2
Fire	1	0	1	0	2
Poisoning	8	2	2	2	14
Traffic	1	1	0	0	2
Unknown	2	4	2	2	10
<b>TOTAL</b>	<b>15</b>	<b>9</b>	<b>5</b>	<b>4</b>	<b>33</b>