HENNEPIN COUNTY MEDICAL EXAMINER 2014 ANNUAL REPORT







Welcome to the 2014 Hennepin County Medical Examiner's Office annual report. This report reflects a statistical breakdown of the total caseload of the three counties—Hennepin, Dakota, and Scott—which the Hennepin County Medical Examiner provides with forensic death investigation and autopsy services. The Hennepin County Medical Examiner also provides forensic autopsy services on a referral basis to counties throughout Minnesota and Wisconsin.

All physicians at the Hennepin County Medical Examiner's Office are certified by the American Board of Pathology in Anatomical and Forensic Pathology. Other board certifications — Neuropathology and Clinical Pathology — are also represented among the physician staff. Death investigators are certified by the American Board of Medicolegal Death Investigators.

Hennepin County Medical Examiner staff occupy key leadership positions and hold committee appointments in numerous state and national organizations, including the National Association of Medical Examiners, the American Academy of Forensic Sciences, the College of American Pathologists, the American Society for Clinical Pathology, the American Board of Pathology, the American Board of Medicolegal Death Investigators, National Institute of Standards and Technology, and the Minnesota Coroners' and Medical Examiners' Association. Hennepin County Medical Examiner physicians sit on the editorial boards of two leading forensic science journals, *The Journal of Forensic Sciences* and *Academic Forensic Pathology*. The Hennepin County Medical Examiner's Office is accredited by the National Association of Medical Examiners and administers an American College of Graduate Medical Education approved fellowship in forensic pathology.

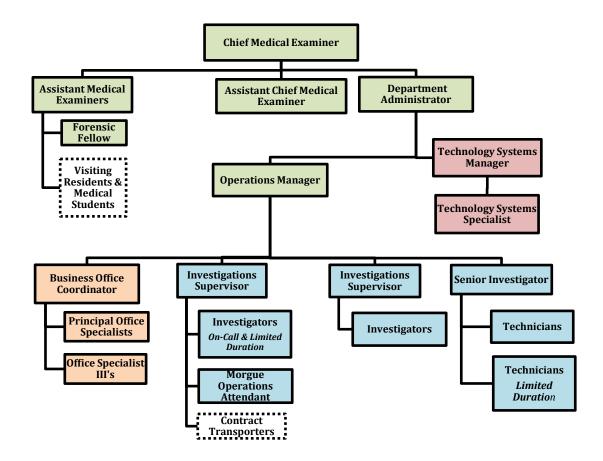
Our current strategic initiatives include positioning ourselves for continued growth of the Hennepin-Scott-Dakota model into a larger Regional Center of Excellence for medical examiner services. This includes a planning for a regional facility that provides adequate resources and incentivizes major partners to join us in meeting the needs of a growing population and continuing to meet and exceed our resident expectations.

The culmination of this knowledge and expertise is brought forth in this report for 2014.

Respectfully,

Andrew Baker, MD Chief Medical Examiner

Hennepin County Medical Examiner's Office



BUDGET

Budget Summary:	2012 Actual	2013 Budget	2014 Budget
Budgeted Property Tax Requirement*	\$3,406,087	\$3,337,965	\$3,337,965
Other Taxes			
Federal			
State			
Local		1,453,320	1,482,386
Investment Earnings			
Fees for Services	119,000	134,950	121,975
Fines and Forfeitures			
Licenses and Permits	180,075	231,000	252,000
Bond Proceeds			
Other Revenue	91,984	111,000	240,500
Total Revenues	\$3,797,146	\$5,268,235	\$5,434,826
Personal Services	\$2,949,913	\$4,179,410	\$4,255,967
Commodities	185,067	84,356	70,756
Services	768,343	966,804	1,008,603
Public Aid			
Capital Outlay	8,545		
Other Charges	36,882	37,665	99,500
Total Expenditures	\$3,948,750	\$5,268,235	\$5,434,826
*Reflects the adjusted property tax requirement budget, not actual propert	y tax collection.		
Budgeted Positions (Full-time Equivalents)	26.7	34.0	34.0

History, statute, and procedures

In 1963, the Office of the Hennepin County Medical Examiner was established to replace the Coroner's Office. The current law outlining the duties of the office, Minnesota Statutes, Chapter 390 (revised 2006), states that:

"All sudden or unexpected deaths, and all deaths that may be due entirely, or in part, to any factor other than natural disease processes must be promptly reported to the coroner or medical examiner for evaluation No person, other than the county coroner or medical examiner ... shall file or amend the cause or manner of death information with the state registrar in cases of likely or suspected accidental, suicidal, homicidal, violent, or mysterious deaths occurring in the county."

Cases that must be reported

Deaths that occur within the borders of Hennepin, Dakota or Scott County must be reported, if they meet certain criteria, whether the injury was sustained in these counties or elsewhere. All sudden or unexpected deaths and all deaths that may be due entirely, or in part, to any factor other than natural disease must be reported. These include, but are not limited to:

- 1. Unnatural deaths, including violent deaths arising from homicide, suicide, or accident:
- 2. Deaths due to a fire or associated with burns or chemical, electrical, or radiation injury:
- 3. Unexplained or unexpected perinatal and postpartum maternal deaths;
- 4. Deaths under suspicious, unusual or unexpected circumstances;
- 5. Deaths of people whose bodies are to be cremated or otherwise disposed of in such a manner that the bodies will later be unavailable for examination;
- 6. Deaths of inmates of public institutions and people in custody of law enforcement officers, who have not been hospitalized primarily for organic disease;
- 7. Deaths that occur during, in association with, or as the result of diagnostic, therapeutic, or anesthetic procedures [these include operating room deaths];
- 8. Deaths due to culpable neglect;
- 9. Stillbirths of 20 weeks or longer gestation, unattended by a physician;
- 10. Sudden deaths of people not affected by recognizable disease;
- 11. Unexpected deaths notwithstanding a history of underlying disease;
- 12. Deaths in which a fracture of a major bone such as a femur, humerus, or tibia has occurred within the past six months;
- 13. Deaths unattended by a physician, occurring outside of a licensed health care facility or licensed residential hospice program [see D. below];
- 14. Deaths of people not seen by their physician within the past 120 days;
- 15. Deaths occurring in an emergency department;

- 16. Stillbirths or deaths of newborn infants in which there has been maternal use of or exposure to unprescribed controlled substances, including street drugs, or in which there is history or evidence of maternal trauma;
- 17. Unexpected deaths of children;
- 18. Solid organ donors;
- 19. Unidentified bodies:
- 20. Skeletonized remains:
- 21. Deaths occurring within 24 hours of arrival at a health care facility, if death is unexpected;
- 22. Deaths associated with the decedent's employment;
- 23. Deaths of nonregistered hospice patients or patients in nonlicensed hospice programs [see D. below]; and
- 24. Deaths attributable to acts of terrorism.

Prereporting the imminent deaths of patients who are expected to die at home or at a residential hospice and who are registered with an official hospice program helps to expedite matters once death occurs.

Procedures for reporting and investigating

Reporting a death: When a death occurs that falls into any of the above categories, the physician, law enforcement officer, mortician, or other individual connected with the case makes a report to the Medical Examiner's Office by telephone (612-215-6300, 24 hours). That report includes the decedent's name, address, age, sex, race, marital status, next of kin, summary of medical history, physical findings, name of last attending physician, and other pertinent data.

Preserving evidence: At the location of the death, the Medical Examiner, deputy or investigator provides direction for the removal or alteration of the body. Interference with the body or scene of death with intent to mislead the Medical Examiner or conceal evidence, including clothing, effects or any part of the scene, including moving weapons or items near the body, is a gross misdemeanor (Minnesota Statutes §609.502).

Investigation and jurisdiction: The Medical Examiner's Office contacts the last attending physician and asks about the decedent's medical history, the most likely cause of death, and the relationship of any physical or chemical injury. After completing a preliminary investigation, the Medical Examiner's investigator decides which agency has jurisdiction of the case. Although all cases described above must be reported, the Medical Examiner reserves the right to accept or decline jurisdiction. If an attending physician has seen the decedent within 120 days and the death is natural, jurisdiction is usually declined. Any death in which there is uncertainty as to whether it is a Medical Examiner's case should be reported and discussed with the Medical Examiner's investigator.

If jurisdiction is assumed, the death certificate is signed only by the Medical Examiner.

Autopsy: When death meeting criteria for a report occurs at a local hospital, any autopsy usually is performed at the Hennepin County Morgue by Medical Examiner's Office staff. In some cases, autopsy may be performed by the hospital pathologist if he or she has a valid autopsy permit. The Medical Examiner will make these decisions on a case-by-case basis.

Special circumstances: In all instances of organ donation, the Medical Examiner must be notified by the responsible agency prior to arrangements being made for the recovery of any organ. Authorization for tissue donation must be approved by the Medical Examiner before procurement.

When the deceased is to be cremated, the funeral director is responsible for obtaining approval from the Medical Examiner's Office prior to cremation of the body. It is preferable that this be done via fax at 612-321-3556 Investigative staff of the office can be reached at (612) 215-6300 to explain and assist with this process.

Information for investigating agencies

The Medical Examiner's Office can provide information concerning the cause of death to the investigating agency and the decedent's attending physician. Any other person or agency must have authorization from the family or a court order (not a subpoena) to obtain a copy of the autopsy and/or Medical Examiner's report. A charge is made for copies of these documents.

Attending physicians and hospital staff members may be allowed to attend autopsies at the Medical Examiner's Office. Staff must express a desire to be present at the autopsy when the death is reported. Every effort will be made to accommodate such requests.

Our responsibility to families and the community

Determining cause and manner of death: The Medical Examiner's goal is to assist families, law enforcement agencies and the legal system by determining a scientifically unbiased and logical cause and manner of death. The information gathered during a forensic death investigation and subsequent autopsy can be critical in civil or criminal court cases for deaths that occur in Hennepin, Dakota and Scott counties.

In many instances, families can provide information that may be helpful in the case. Families also can benefit from the investigation process because even in straightforward natural deaths, information from the death investigation or autopsy may help surviving family members protect their own health.

Returning the body to the family: Final disposition of the body is the family's responsibility. They should contact the funeral home of their choice. For information about the circumstances and cause of death and concerns about personal effects, relatives can contact the Hennepin County Medical Examiner's Office by calling 612-215-6300.

Understanding our roles: The Medical Examiner is a licensed physician, trained in the specialty of forensic pathology. The agency also employs an Assistant Chief Medical Examiner and several Assistant Medical Examiners, who also are licensed physicians and trained forensic pathologists. Medical Examiner Investigators are highly trained, experienced professionals who perform death investigations by gathering and interpreting information to ensure that death investigations are unbiased, thorough and accurate. Investigators may ask you many questions that will help to find answers about how and why your loved one died.

The Medical Examiner is an independent entity and does not work for the Hennepin County Attorney's Office or any law enforcement agency.

The autopsy: An autopsy is an examination of the body to determine the cause and manner of death and assess any abnormalities that may be present. A complete forensic autopsy includes a review of the decedent's medical history. Small specimens (biopsies) of internal organs may be examined, and samples of body fluids are retained and tested for drugs and other substances. In deaths resulting from violence, other types of evidence may be collected and examined by a crime laboratory or other agency. In some cases it may be necessary to retain larger portions of tissues, or occasionally even whole organs, for additional or specialized examination.

In many cases of sudden or unexpected death, evidence of preexisting natural disease will make an autopsy unnecessary.

Final results of the autopsy report may take many weeks. In occasional cases, specialized microscopic or laboratory studies may delay the final report longer. However, the autopsy and other tests rarely delay the release of the body to family members.

Can a family refuse an autopsy?

Minnesota law (as of 2014) does not recognize a statutory right to refuse an autopsy ordered by the Medical Examiner. Families who wish to object to an autopsy should consult the Medical Examiner's website (www.hcmeo.us) for the most current excerpts of the relevant Minnesota statute(s), effective on July 1, 2015. Autopsies are done to answer medical and legal questions in the "public interest," to protect public health or to address a question of law. However, we recognize that your family beliefs may be contrary to autopsy. We are open to discussion to try to accommodate your wishes, as long as we can fulfill the legal obligation presented by your loved one's death.

Public and private information

Basic demographic information and the cause and manner of death are matters of public record under Minnesota law. The rest of the information that is gathered is confidential and treated similarly to a medical record. This information is available only to immediate next-of-kin, legal representatives of the decedent's estate, and treating physicians.

In cases of homicide, Medical Examiner information and autopsy reports can only be provided to the law enforcement agencies that are investigating the death and to the prosecutor in the county where the homicide occurred.

Getting a copy of the autopsy report

Immediate family members can submit a written request for the autopsy report to the Hennepin County Medical Examiner's Office at 530 Chicago Avenue, Minneapolis, MN 55415. Include your full name, address, daytime telephone number and your relationship to the decedent. There is a \$25 charge for this service, so a check or money order made out to "Hennepin County Medical Examiner" must be included with the request.

If the autopsy contains medical language that is confusing to you, you can call the Medical Examiner with questions. The number is 612-215-6300.

Hennepin, Dakota, and Scott counties: 2014

Aggregate data

1060

7463

123

6763
1931
4557
40

Jurisdiction Accepted	<u> 1931</u>
Natural	879
Accident (not traffic)	663
Traffic accident	104
Suicides	187
Homicide	46
Undetermined	52



HCME autopsies (not HCMC)	881
Autopsies at other institutions	9
Partial autopsies	41
External examinations	12
Referral autopsies	40
HCME-HCMC inpatient autopsies	44
HCME-HCMC ER autopsies	45
Donations (total)	<u>415</u>
Eyes	145
Tissue/bones	220
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Organs	50

Total Medical Examiner autopsies

Cremations approved

Subpoenas answered





Hennepin County: 2014

41

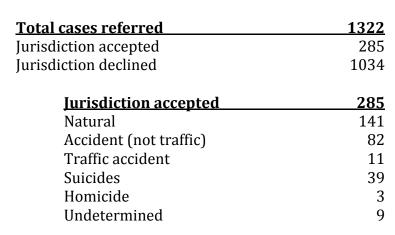
Total cases referred	5074
Jurisdiction accepted	1558
Jurisdiction declined	3286
Jurisdiction accepted	1558
Natural	698
Accident (not traffic)	548
Traffic accident	90
Suicides	138
Homicide	43

Undetermined



Total medical examiner autopsies	831
Donations (total)	322
Eyes	100
Tissue/bones	172
Organs	50
Scene visits by investigators	954

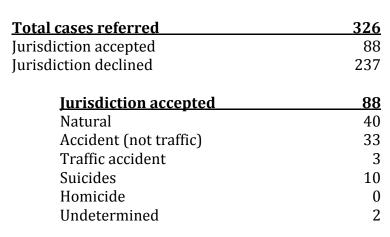
Dakota County: 2014





Total Medical Examiner autopsies	145
Donations (total)	66
Eyes	35
Tissue/bones	31
Scene visits by investigators	304

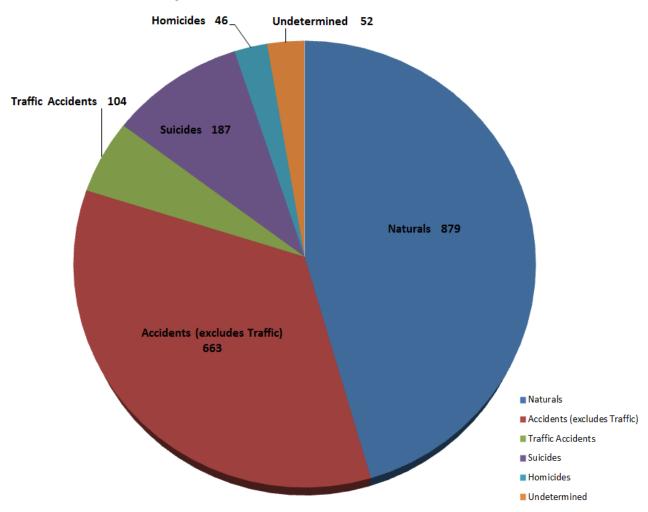
Scott County: 2014



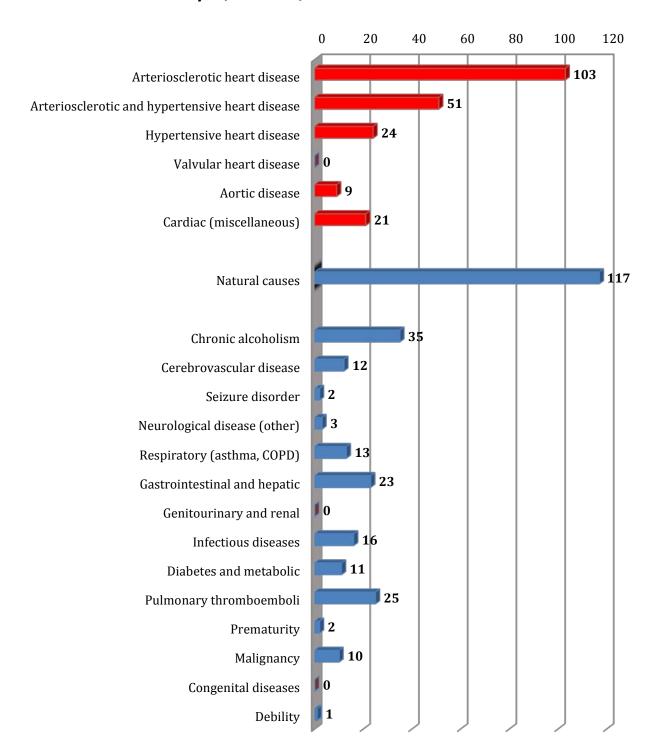


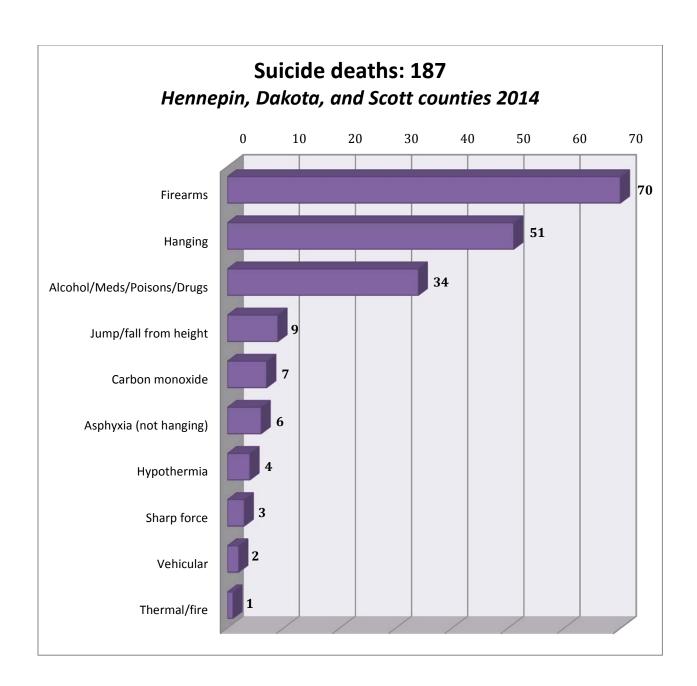
Total Medical Examiner autopsies44Donations (total)19Eyes6Tissue/bones13Scene visits by investigators93

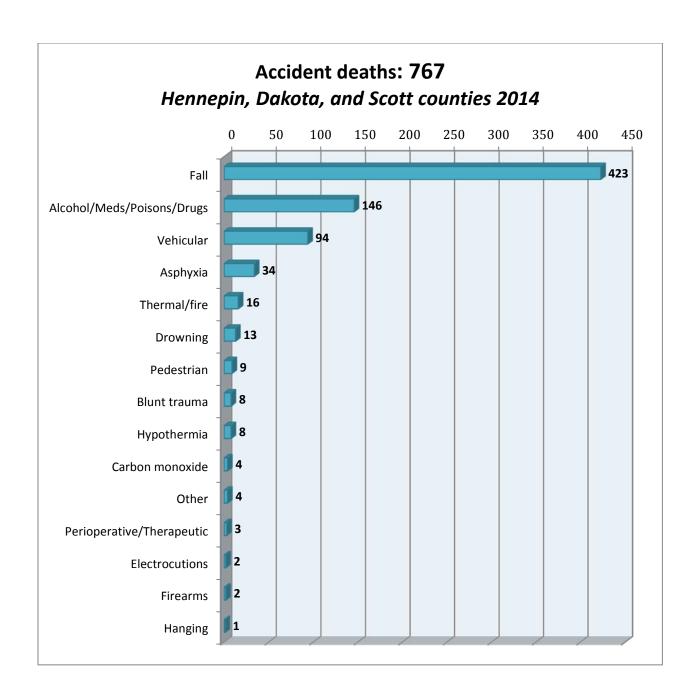
Accepted Cases by Manner Of Death: Hennepin, Dakota and Scott Counties 2014

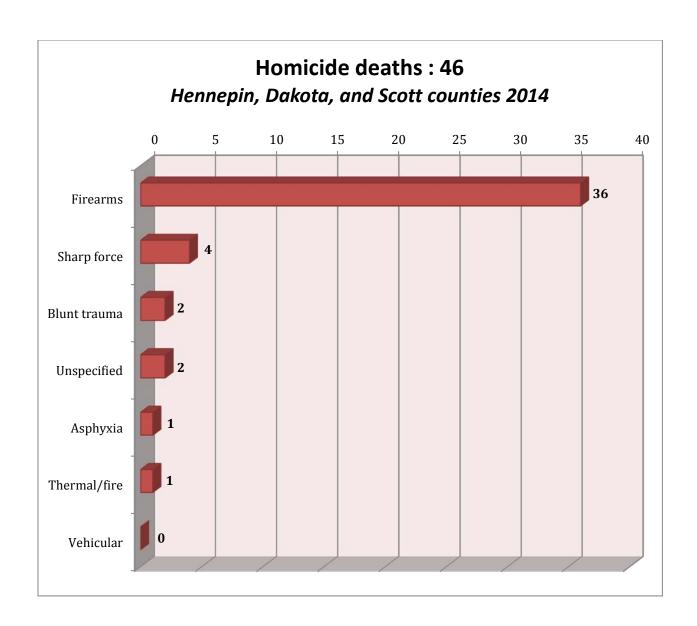


Natural deaths (autopsied cases): 478 Hennepin, Dakota, and Scott counties 2014









Historical data

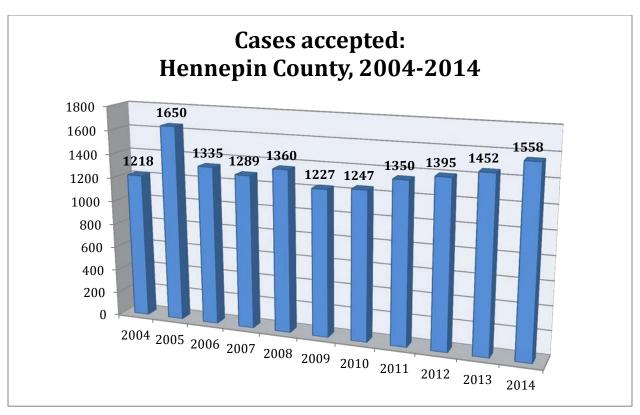
Hennepin County: 2013

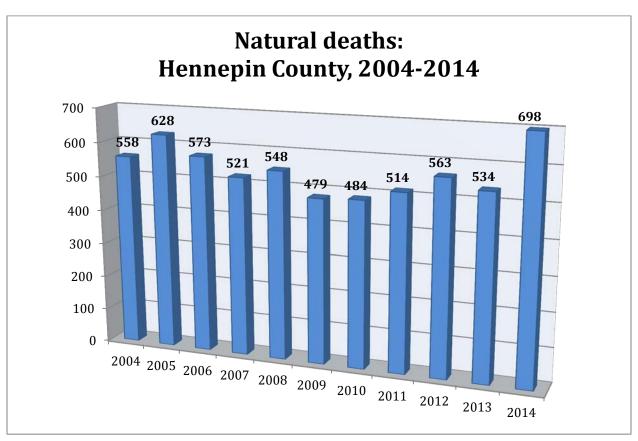
Total cases referred	4881
Jurisdiction accepted	1452
Jurisdiction declined	3157

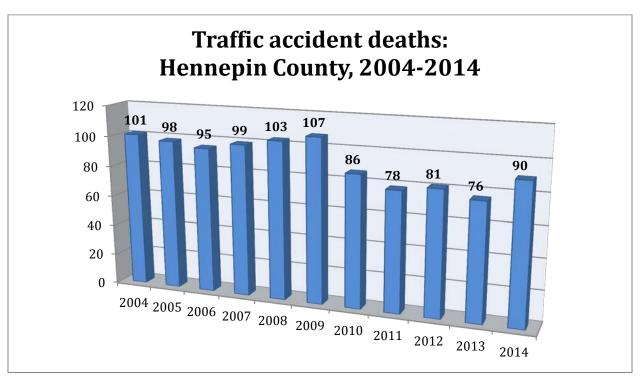
Jurisdiction accepted	1452
Natural	534
Accident (not traffic)	598
Traffic accident	76
Suicides	140
Homicide	64
Undetermined	40

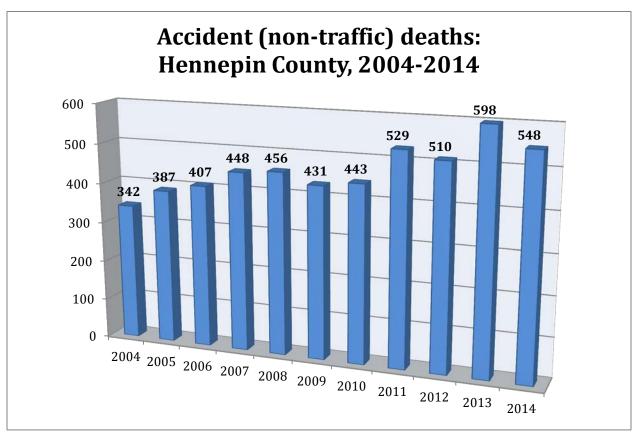
Total Medical Examiner autopsies	768
Donations (total)	273
Eyes	96
Tissue/bones	139
Organs	38
Scene visits by investigators	948

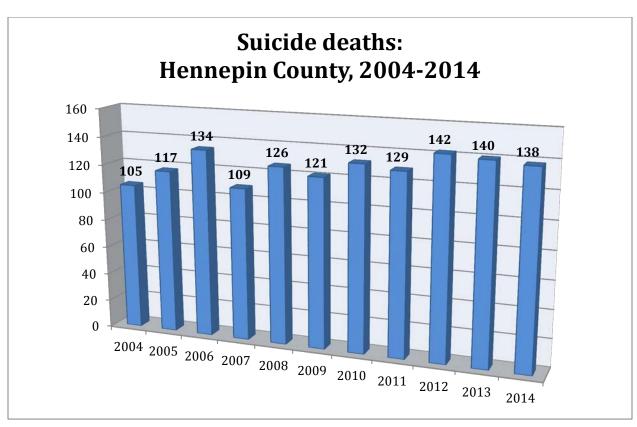


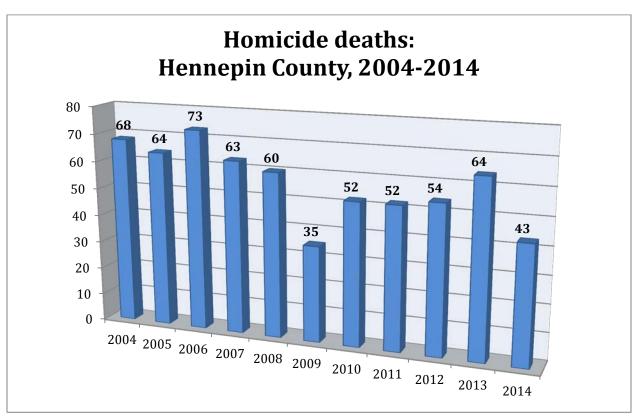












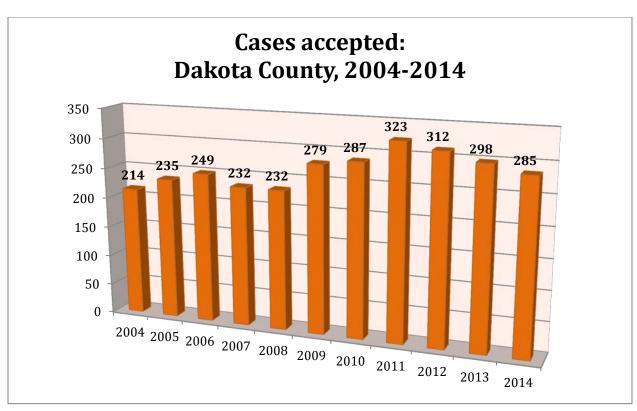
Historical data

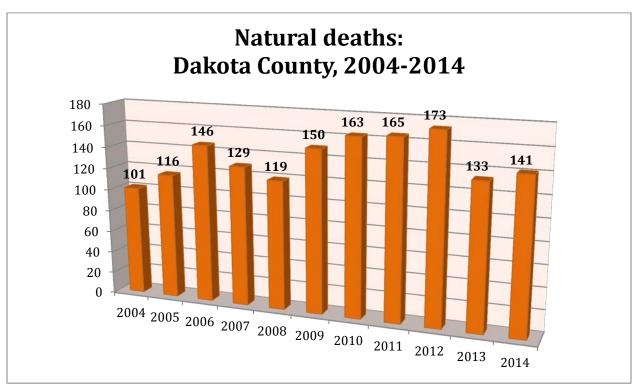
Dakota County: 2013

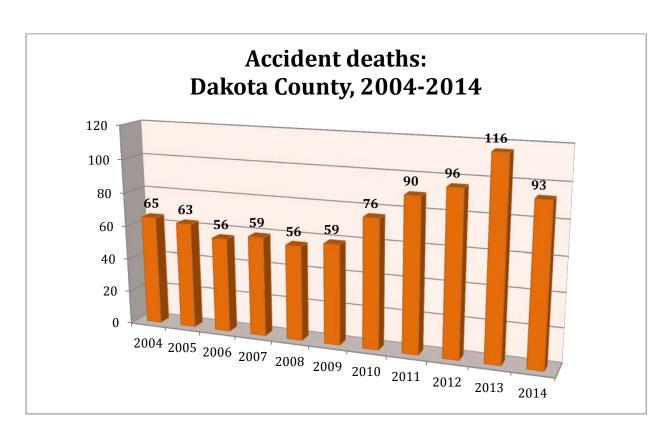


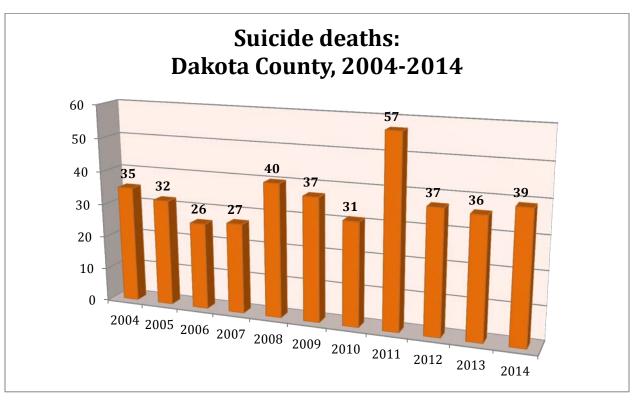
Total cases referred	1228
Jurisdiction accepted	298
Jurisdiction declined	925
Jurisdiction accepted	298
Natural	133
Accident (not traffic)	102
Traffic accident	14
Suicides	36
Homicide	6
Undetermined	7

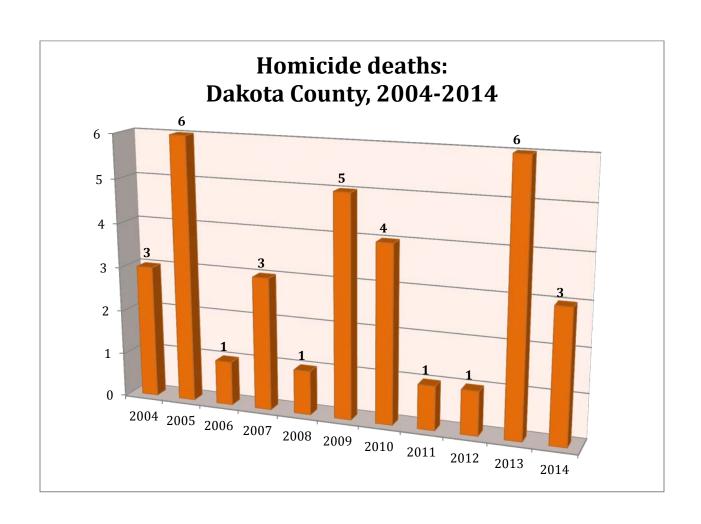
Total Medical Examiner autopsies	161
Donations (total)	37
Eyes	17
Tissue/bones	20
Scene visits by investigators	322











HISTORICAL DATA

Scott County: 2013



<u>1 otal cases referred</u>	<u> 322</u>
Jurisdiction accepted	85
Jurisdiction declined	237
Jurisdiction accepted	85
Natural	39
Accident (not traffic)	22
Traffic accident	8
Suicides	10
Homicide	2
Undetermined	4
Total Medical Examiner autopsies	46
Donations (total)	18
Eyes	7
Tissue/bones	11
Scene visits by investigators	97

