

**Fulton County
Medical Examiner
*2018 Annual Report***



Prepared by:

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August 1, 2019

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Preface

This Annual Report would not be possible without the dedication and professionalism of the employees who work for and with the Fulton County Medical Examiner's Office in Atlanta, GA.

Administrative and Support Personnel

John M. Cross, Chief Administrative and Investigative Officer
Paul Desamours, Operations Manager
Karleshia Bentley, Executive Assistant
Sharon Cooper, Customer Service
Carlo Harper, Facility Assistant
Simone Murphy, Medicolegal Transcriptionist
Lynette Redding, Medicolegal Transcriptionist
Erica Spears, Customer Service
Genavieve Staten, Customer Service
Shirley Gleaton, Administrative Assistant
Quanda Vance, Records and Documents Supervisor
Glenda Washington, Forensic Histotechnologist

Medical Examiners

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Karen E. Sullivan, MD, Deputy Chief Medical Examiner
Michael M. Heninger, MD, Associate Medical Examiner
Ryan D. McCormick, MD, Associate Medical Examiner
Rachel L. Geller, MD, Associate Medical Examiner
Maxwell Rollins, MD Forensic Pathology Fellow

Investigative Staff

Deltra Arroyo, ME Investigator
Jodi Bensley, ME Investigator
Candice Dalton, ME Investigator
Dumonder Dawson, Senior ME Investigator
Bertram Ennett, ME Investigator
Danielle Green, ME Investigator
Leon Harrison, ME Investigator
Logan Kuss, ME Investigator
Brian Reents, ME Investigator
Mark Ruffin, ME Investigator
Eric Sliz, ME Investigator
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Forensic Technical Support

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Jacinda Brown, Forensic Technician
Filomena Fernandes, Forensic Technician
Chefrene Gory, Forensic Assistant Supervisor

Marquis Hinds, Forensic Technician
Charles Love, Forensic Technician Supervisor
Kaneshia Lovelace, Forensic Assistant Supervisor
Angie McCray, Forensic Technician Supervisor
Kathy Robinson, Forensic Technician
Tanya Walker, Forensic Technician

Fulton County Government Information Technology

Shenelle Armstrong

Without the above individuals, quality investigation of deaths in Fulton County would not occur, and neither would professional communication with the many agencies and members of the public who are impacted when a death occurs. These employees also care for and maintain a modern facility in which death investigations may be professionally conducted with respect for the dead and at which members of the public, legal, and law enforcement communities can effectively conduct their business.

I thank the employees of the Fulton County Medical Examiner's Office for their dedication, excellence, and professional quality death investigations conducted for the citizens of Fulton County.

It is hoped that the information in this report may be useful to public health, public safety, and other policy and program planners who strive to improve the safety and quality of life.

This Annual Report is for the calendar year 2018. It is not uncommon for some death cases to take many months to finalize because of extensive testing or the need for investigative information that takes time to obtain. The Report itself takes time to prepare and must be done while we carry out our usual activities and death investigations, which also take the time of our staff.

Karen E. Sullivan, MD
Deputy Chief Medical Examiner
August 1, 2019

SECTION I. INTRODUCTION

The Fulton County Medical Examiner (FCME) serves all non-federal, incorporated, and unincorporated areas within Fulton County. In 2016, these areas include nearly all of the City of Atlanta, Alpharetta, Chattahoochee Hills, College Park, East Point, Fairburn, Hapeville, Johns Creek, Milton, Mountain Park, Palmetto, Roswell, Sandy Springs, the City of South Fulton, and Union City and other areas served by special law enforcement agencies such as the Metropolitan Atlanta Rapid Transit Authority (MARTA) and college police forces. The FCME does not serve the few areas of Federal property within the county such as the Federal Penitentiary, which arranges for its own investigations. Some deaths occurring on state property are investigated by the Georgia Bureau of Investigation (GBI). Under the provisions of the Georgia Death Investigation Act (Official Code of Georgia Annotated 45-16-20), FCME investigates deaths that are suspected or known to have resulted from external causes such as injury or poisoning, those occurring while a person is in custody of law enforcement agencies, and deaths that are sudden, unexpected, and not explained with a reasonable degree of medical probability.

Fulton County covers approximately 527 square miles and has an estimated population of 1,050,114. Countywide, the population is about 45.6% white, 44.5% black, 0.3% Native American or Alaska native, 7.5% Asian, two or more races, 2.1% and 7.3% Hispanic/Latino (July 1, 2018 www.census.gov).

The laws describing the duties of medical examiners in Georgia are contained mostly in Official Code of Georgia Annotated, Title 45, Chapter 16: Georgia Death Investigations Act. The types of death required to be reported to the medical examiner include:

- Violence (injury)
- Casualty (accident)
- Suicide
- Suddenly when in apparent good health
- When unattended by physician (no doctor who can sign the death certificate)
- Suspicious or unusual
- Children under 7 if death is unexpected or unexplained
- Executions pursuant to death penalty
- Inmate of state hospital or state, county, or city penal institution
- Admitted to hospital unconscious and dying within 24 hours without regaining consciousness

Decisions about autopsies are not mandated and are left to the discretion of the medical examiner. As can be seen, the laws are general enough that jurisdiction may be accepted in a wide variety of cases that are not otherwise specified in law, such as sudden death while under anesthesia, which may be considered to be "sudden and unexpected" or "unusual."

When a death is reported to FCME, jurisdiction is either accepted (AJ) or declined (DJ). If a case is accepted, it means that the medical examiner will be signing the death certificate (certifying the death).

A case is accepted if:

- It meets criteria specified by law as described above, and

- The incident leading to death occurred in Fulton County, or
- If the place of incident or onset of fatal events is unknown, the death occurred or the dead body was found in Fulton County.

A case is declined for one of two reasons:

- The incident leading to death did not occur in Fulton County.
- There is a physician who is willing to sign the death certificate.

The case medical examiner (forensic pathologist) generally uses one of five approaches to certify a death (obtain information to complete the death certificate):

- **Sign-out:** The death certificate is signed without examining the body. These include death certificate review cases.
- **External Examination:** External examination of the body with a dictated report of the examination. Usually includes toxicology and/or chemistry tests.
- **Autopsy:** Complete autopsy: internal and external examination with dictated report.
- **Limited Dissection:** External examination with internal examination limited to a specific area of the body
 - May be performed if there is expressed objection to autopsy by the legal next of kin or significant health or safety risks exist for staff and a complete autopsy need not be performed.
 - A limited dissection is most often performed to rule out skull and/or brain injuries.

There are basic general rules for classifying manner of death:

- **Natural** deaths are due solely to disease and/or the aging process
- **Accident** applies when an injury or poisoning causes death and there is little to no evidence that the injury or poisoning occurred with intent to harm or cause death. The fatal outcome was unintentional.
- **Suicide** results from an injury or poisoning as a result of an intentional self-inflicted act committed to do self-harm or cause one's own death.
- **Homicide** occurs when death results from a volitional act committed by another person to cause harm, fear, or death. Intent to cause death is a common element but is not required for classified as homicide. The classification of homicide for the purpose of death certification neither indicates nor implies criminal intent, which remains a determination within the province of the justice system.
- **Undetermined** or "could not be determined" is a classification used when the information pointing to one manner of death is no more compelling than one or more other competing manners of death, in thorough consideration of all available information.

Budget and Staff

The operating budget was \$4,347,233 for fiscal year 2018. In 2018, the FCME staff consisted of 5 full time physician medical examiners, 12 investigators, 12 administrative and facility support staff, and 12 forensic technicians and morgue support staff. We had one forensic pathology physician in a fellowship training position funded by Emory University School of Medicine.

General Response

When a death is reported to FCME, the case is assigned a sequential case number. Basic information is obtained on all cases reported. Investigators, in consultation with the on-call medical examiner as needed, make decisions about whether jurisdiction of the case should be accepted or declined, if death scene investigation is required, and whether or not the body needs to be transported to the Fulton County Medical Examiner's Center. The medical examiner then makes decisions about the type of examination to be conducted and the extent of additional testing to be performed. Usually, bodies transported to FCME are ready to be returned to the family and funeral home within 24 hours, or less, if the body has been officially identified.

For further information about FCME, see our website: <http://www.fultoncountyga.gov/fcme-home>. For further information about medical examiners and death investigation, see the website of the National Association of Medical Examiners at <http://www.thename.org/>.

Data Source and Analyses

The data herein are derived from the Holds Our Medical Examiner Records (HOMER) Microsoft Access database. In 2018 there were 2552 deaths reported to the office. One case was classified non-human remains. After excluding this record from data analysis, there were a total of 2551 human death cases for this report. The FCME did not examine any exhumed bodies in 2018.

Race/Ethnicity Categories

Categorizing race/ethnicity of decedents depends on personal preferences in how race/ethnicity is reported by family members. For our database purposes, race is assigned as follows:

B: Black/African-American
W: White/Caucasian
WH: White Hispanic/Latino
BH: Black Hispanic/Latino
H: Hispanic/Latino
AS: Asian
PI: Pacific Islander
NA: Native American

SECTION II. All Reported Cases

Table 1. Number of cases Accepted (AJ) and Declined (DJ) by Manner of Death

	Manner of Death	Frequency	Percent
AJ	ACCIDENT (Non-traffic fatalities)	356	26.4%
	ACCIDENT (T) (Traffic fatalities)	132	9.8%
	HOMICIDE	157	11.7%
	NATURAL	527	39.2%
	SUICIDE	132	9.8%
	UNDETERMINED	42	3.1%
	Total	1346	100.0%
DJ		1205	47.2%
AJ		1346	52.8%
TOTAL		2551	100.0%

Table 2. Manner of Death by Procedure, cross-tabulated for Accepted (certified) cases only (n=1370)

MANNER	PROCEDURE					Total
	Autopsy	External PM Exam	Signout	Limited Dissection	View	
ACCIDENT	255	79	21	1	-	356
ACCIDENT (T)	106	21	5	-	-	132
HOMICIDE	154	-	3	-	-	157
NATURAL	202	299	25	1	-	527
SUICIDE	123	8	-	1	-	132
UNDETERMINED	36	6	-	-	-	42
Total	876	413	54	3	-	1346

Table 3. Police Jurisdictions for Non-Natural Manners of Death

Police Jurisdiction	Total Cases	Accident	Accident (T)	Homicide	Suicide	Undetermined
Alpharetta	30	15	5	-	9	1
Atlanta	466	204	58	101	75	28
City of South Fulton	50	10	14	15	9	2
College Park	14	5	4	3	1	1
East Point	26	15	2	6	2	1
Fairburn	3	-	1	2	-	-
Fulton County	30	8	9	9	3	1
Hapeville	8	5	-	-	2	1
Johns Creek	15	7	1	-	7	-
Milton	9	6	1	-	2	-
Palmetto	6	4	-	-	1	1
Roswell	49	30	5	2	10	2
Sandy Springs	49	27	11	2	8	1
Union City	20	6	6	5	2	1
Total Above	775	342	117	145	131	40
Other or Unspecified	-	14	15	12	1	1
All Cases	775	356	132	157	132	41

* Includes other police jurisdictions such as MARTA and college campus police

SECTION III: Homicides (n = 157)

Homicides	
Case Type	Number
Asphyxia-Smothering	1
Asphyxia-Strangulation	3
Blunt Force	5
Drug Death-Poisoning	1
Gun-Handgun	39
Gun-Not Specified	97
Gun-Revolver	2
Gun-Rifle	1
Gun-Shotgun	2
MVA-Pedestrian	1
Sharp Instrument	4
Sharp Instrument-Knife	1

Homicides: Age, Race, and Sex

	≤ 10	11-20	21-30	31-40	41-50	51-60	61-70	≥ 71	Total
WM	-	1	-	2	-	1	-	1	5
WF	-	-	-	1	-	-	-	1	2
BM	1	19	36	35	18	6	4	-	119
BF	1	3	8	5	1	1	1	-	20
HM	-	-	1	4	2	-	-	-	7
HF	-	-	-	1	-	-	-	-	1
AM	-	-	-	-	1	2	-	-	1
AF	-	-	-	-	1	-	-	-	1
Other	-	-	1	-	-	-	-	-	1
Total	2	23	46	48	23	8	5	2	157

Comments:

- Firearms were involved in 89.8% of homicides.
- 88.5% of homicide victims were black/African-American.
- 84.1% of homicide victims were men.
- 75.8% of homicide victims were black men, 76.4% of which were 40 years of age or younger.

SECTION IV: Suicides (n = 132)

Suicide	
Case Type	Number
Asphyxia	1
Asphyxia-Hanging	40
Asphyxia-Suffocation	1
Drowning-Other	1
Drowning-River	1
Drug Death-Poisoning	13
Gun-Handgun	39
Gun-Not Specified	1
Gun-Revolver	11
Gun-Rifle	4
Gun-Shotgun	5
Jump from Height	9
MVA-Pedestrian	1
Poisoning-CO with no fire	2
Sharp Instrument	1
Sharp Instrument-Knife	1
Train-Commercial	1

Suicides: Age, Race, and Sex

	≤ 10	11-20	21-30	31-40	41-50	51-60	61-70	≥ 71	Not known	Total
WM	-	1	7	10	5	10	11	3	-	47
WF	-	1	1	1	5	2	-	1	-	11
BM	-	7	17	10	7	5	4	-	-	50
BF	-	1	2	5	2	2	-	1	-	13
HM	-	-	1	-	-	-	-	-	-	1
HF	-	-	-	-	-	-	-	-	-	-
AM	-	2	2	-	1	-	-	-	1	6
AF	-	-	1	1	-	1	-	-	-	3
Other	-	-	-	1	-	-	-	-	-	1
Total	-	12	31	28	20	20	15	5	1	132

Comments:

- 45.5% of suicides involved firearms. Suicide by hanging or other asphyxia was the second most common method.
- 9.1% of suicides were in persons 20 years of age or younger. 78.8% of suicide victims were male.
- 43.9% of suicides involved white decedents. 47.7% involved black decedents.

SECTION V: Non-Vehicular Accidents (n = 356)

Accident	
Case Type	Number
Aircraft	4
Asphyxia	3
Asphyxia-Compression	1
Asphyxia-Food	1
Asphyxia-Hanging	1
Asphyxia-Overlaying	1
Asphyxia-Suffocation	2
Blunt Force	6
Cardiac-ASCVD + Drug	1
Cardiac-Hypertension + Drug	5
Crushed-Pinned	1
Drowning-Pool/Spa	1
Drowning-Tub	2
Drug Death-Poisoning	212
Fall	20
Fall-From Height	10
Fall-Standing Height	55
Fire death	4
Hypothermia-Exogenous	20
MARTA-Train	1
MVA-Driver	1
Poisoning-CO with no fire	1
Seizure Disorder-Idiopathic	1
Train-Commercial	1
Undetermined	1

Non-Vehicular Accidents: Age, Race, and Sex

	≤ 10	11-20	21-30	31-40	41-50	51-60	61-70	≥ 71	Total
WM	-	1	26	24	21	22	14	18	126
WF	-	1	4	5	7	3	5	31	56
BM	3	-	3	14	19	30	35	15	119
BF	2	1	2	4	5	8	5	9	36
HM	-	-	2	1	2	1	1	-	7
HF	-	-	-	-	1	-	-	-	1
AM	-	-	2	-	3	1	-	2	8
AF	-	-	1	-	-	-	-	1	2
Other	-	-	-	1	-	-	-	-	1
Total	5	3	40	49	58	65	60	76	356

Comments:

- The most common cause of accidental deaths was due to drugs and poisons which accounted for 61.2% of accidental deaths.
- Falls, usually from a standing height among elderly persons, was the second most common cause of accidental death (25.2%).
- 21.3% of accidental deaths were among persons 71 years of age or older.

SECTION VI: Motor Vehicle Accidents (n = 132)

Accident (Traffic)	
Case Type	Number
Asphyxia-Compression	1
Fire death	1
MARTA-Train	1
MVA-Bicyclist	1
MVA-Driver	43
MVA-Motorcyclist-Driver	18
MVA-Motorcyclist-Rider	1
MVA-Occupant	25
MVA-Pedestrian	34
MVA-Rider	2
Seizure Disorder	1
Stillbirth-MVA	1
Train-Commercial	3

Motor Vehicle Accidents: Age, Race, and Sex

	≤ 10	11-20	21-30	31-40	41-50	51-60	61-70	≥ 71	Unknown	Total
WM	-	3	6	3	2	3	4	3	-	24
WF	-	-	2	1	2	1	2	1	-	9
BM	1	4	17	11	8	10	8	2	1	62
BF	-	4	7	4	2	7	2	1	-	27
HM	-	-	4	-	1	2	-	-	-	7
HF	-	-	1	-	-	-	-	-	-	1
AM	-	-	-	-	-	-	-	-	-	-
AF	1	-	-	-	-	1	-	-	-	2
Total	2	11	37	19	15	24	16	7	1	132

Comments:

- Drivers were the most common type of traffic fatality, followed by pedestrians.

SECTION VII: Undetermined Manner of Death (n = 42)

UNDETERMINED	
Case Type	Number
Blunt Force	3
Cardiac	1
Drowning-Pond	1
Drug Death: Toxicity + Restraint	1
Fire death	4
MVA-Pedestrian	2
Undetermined	19
Unexplained Infant Death	11

Undetermined Manner of Death: Age, Race, and Sex

	≤ 10	11-20	21-30	31-40	41-50	51-60	61-70	≥ 71	Unknown	Total
WM	-	-	2	-	1	-	-	-	-	3
WF	1	-	-	1	1	-	-	-	-	3
BM	8	-	1	3	2	-	3	1	-	17
BF	5	-	1	1	4	-	-	1	-	12
HM	-	-	1	-	-	-	-	-	-	1
HF	-	-	-	-	-	-	-	-	-	-
AM	-	-	-	-	-	-	-	-	-	-
AF	-	-	-	-	-	-	-	-	-	-
Other	-	-	-	-	-	-	-	-	5	5
Total	14	-	5	5	8	-	3	2	5	42

Comments:

- 26.1% of deaths with undetermined manner are sudden unexplained deaths among infants.
- 46.3% of deaths with undetermined manner are classified that way because a cause of death could not be determined, such as in cases with decomposed or skeletal remains.

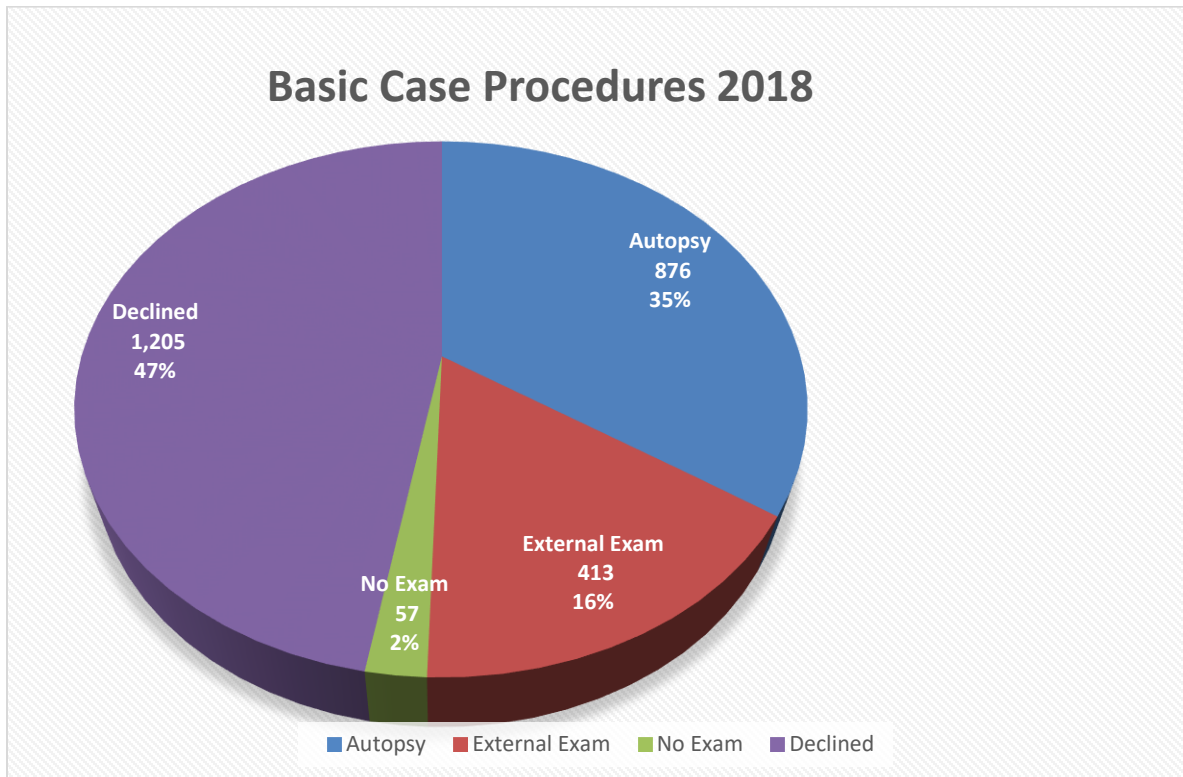
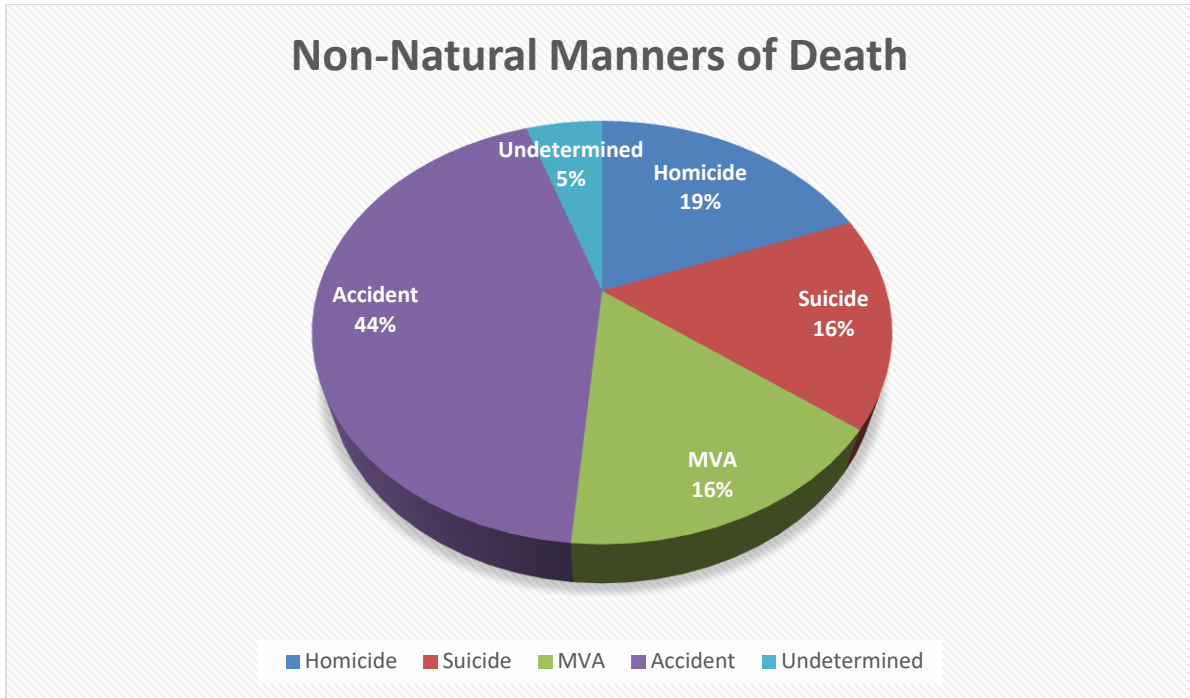
SECTION VIII: Deaths due to Natural Causes (n = 527)

Natural Causes	
Case Type	Number
Aneurysm Rupture	1
Aorta Dissection	2
Cardiac NOS	9
Cardiac-ASCVD	94
Cardiac-Cardiomyopathy	6
Cardiac-Hypertension	237
Cardiac-Infarct NOS	3
Cardiac-Myocarditis	2
Cardiac-Valvular Disease	2
Dementia-NOS	1
Diabetes mellitus	9
Diabetic ketoacidosis	10
Chronic ethanol abuse	48
Endocrine Disease	1
Fat embolism	1
GI Tract Disease	2
GI Tract Hemorrhage	1
Hematologic Disorder	1
Infection NOS	3
Infection-Genitourinary	1
Infection-Lung	10
Infection-Nervous System	2
Multisystem Disease	1
Neoplasm	16
Nervous System	1
Nervous System- Stroke	2
Nervous System-Dementia	1
Nervous System-Hemorrhage	3
Nervous System-Hemorrhage-Hypertension	5
Nonspecific Natural	23
Obesity	2
Pancreatitis	2
Pulmonary	1
Pulmonary Thromboemboli	6
Pulmonary-Asthma	3
Pulmonary-COPD	3
Renal Disease	4
Sarcoidosis	1
Seizure Disorder-Idiopathic	5
Stillbirth	1

Comments:

- 68.4% of natural deaths were due to heart disease.
 - 65.7% of these were attributed to hypertension.
- The majority of deaths investigated by the Fulton County Medical Examiner's Center are sudden natural deaths.

SECTION IX: Graphic Depictions of Case Load and Case Type



SECTION X: Special Topics

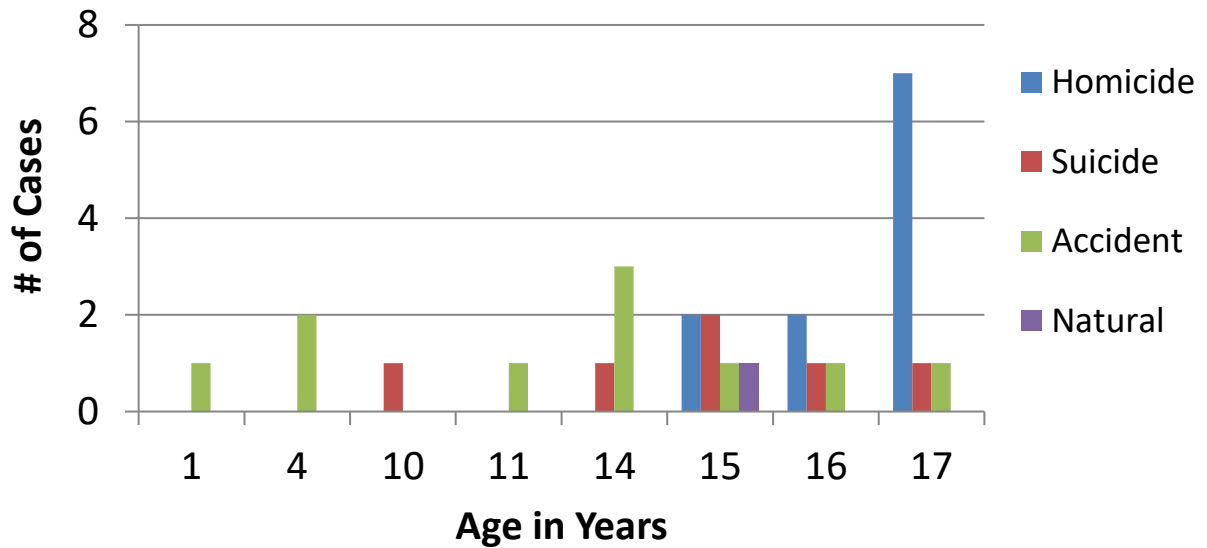
Deaths of Children Age 1 through 17 years:

	≤ 10 years	Cause	11-18 years	Cause
Homicide	2	Asphyxia-Smothering (1) Blunt Force (1)	12	Gun-Not Specified (10) Gun-Handgun (2)
Suicide	1	Asphyxia-Hanging (1)	4	Asphyxia-Hanging (3) Gun-Handgun (1)
Accident	5	Drowning-Tub (1) Asphyxia (1) Asphyxia-Suffocation (1) Asphyxia-Overlaying (1) Asphyxia-Suffocation (1)	2	Drug Death-Poisoning (2)
MVA Accident	2	MVA-Occupant (2)	5	MVA-Occupant (1) MVA-Pedestrian (1) MVA-Motorcyclist-Driver (1) Train-Commercial (1) MVA-Occupant (1)
Natural	4	Stillbirth (1) Infection-Lung (1) Cardiac-Myocarditis (1)	1	Diabetes-Ketoacidosis (1)
Undetermined	11	Unexplained infant death		
	25		24	Total 49

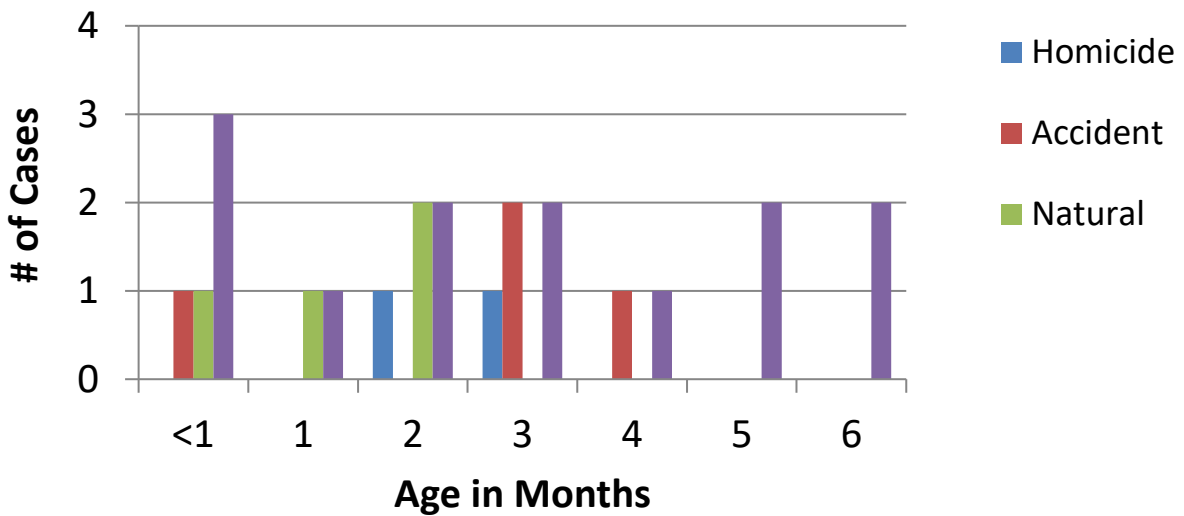
Comments:

- Fulton County's Georgia Child Fatality Review Committee (CFR) is chaired by the Fulton County District Attorney's Office and conducts monthly reviews of decedents aged 17 and younger.
- The FCME participates in the committee by:
 - Hosting the monthly meeting.
 - Co-facilitating the meeting by presenting autopsy reports and photographs of decedents whose cases are reviewed by the panel.
 - Helping to enter decedent information into on-line database of the National Center for Fatality Review and Prevention.
- The FCME also participates in the state of Georgia's Child Fatality Review Panel which reviews county CFR cases which qualify for inclusion into the Sudden Death in the Young Registry conducted by the Centers of Disease Control and Prevention.

Childhood Deaths, Age Distribution and Manner of Death



Infant Deaths, Age Distribution and Manner of Death



Drugs Identified in 2018 FCME Death Investigations:

Drug	Number of Cases
Heroin	78
Cocaine	107
Fentanyl	59
Ethanol	42
Amphetamine/amphetamines	36
Oxycodone	17
Morphine/opiates (some of these may be heroin)	10
Alprazolam	30
Methamphetamine	30
Methadone	7
Hydrocodone	8
Diazepam	6
Diphenhydramine	3
Acetaminophen	1
Citalopram	1
Cocaethylene	29
U-47700	1
Benzodiazepine	3

Comments:

- The majority of drug deaths involve two or more substances.
- Drug deaths result not only from use of illicit substances, but from prescription and over the counter drugs as well.

Deaths among the Elderly:

Manner	Cause	66-75 years	76-85 years	86-95 years	≥ 96 years	Total
Accident	Blunt Force	-	-	-	1	1
	Cardiac-ASCVD-IHD	1	-	-	-	1
	Drug Death-Poisoning	15	1	1	-	17
	Fall	6	3	8	-	17
	Fall-From Height	3	-	-	-	3
	Fall-Standing Height	11	17	18	3	49
	Fire death	2	-	-	-	2
	Hypothermia-Exogenous	4	-	-	-	4
	Asphyxia	-	1	-	-	1
	Drowning-Pool/Spa	-	1	-	-	1
	Asphyxia-Food	-	-	1	-	1
Accident (T)	MVA-Driver	5	-	2	-	7
	MVA-Pedestrian	5	-	-	-	5
Homicide	Asphyxia-Strangulation	1	-	-	-	1
	Gun-Not Specified	1	-	-	-	1
	Sharp Instrument	1	-	-	-	1
Natural	Cardiac	1	-	-	-	1
	Cardiac-ASCVD-IHD	22	9	5	-	36
	Cardiac-Hypertension	54	31	15	1	101
	Cardiac-Valvular	1	-	-	-	1
	Diabetes mellitus	3	1	-	-	4
	Diabetic ketoacidosis	1	-	-	-	1
	Chronic ethanol abuse	8	-	-	-	8
	Fat embolism	1	-	-	-	1
	Infection	1	-	-	-	1
	Infection-Genitourinary	1	-	-	-	1
	Infection-Lung	1	-	-	-	1
	Neoplasm	2	1	2	-	5
	Nervous System	1	-	-	-	1
	Nervous System-Hemorrhage- Hypertension	1	-	1	-	2
	Nonspecific Natural	8	1	7	3	19
	Pulmonary Thromboemboli	1	-	-	-	1
	Pulmonary-COPD	2	-	-	-	2
	Nervous System-Dementia	-	1	-	-	1
	Dementia-NOS	-	-	1	-	1
Nervous System-Hemorrhage	-	-	1	-	1	
Suicide	Drug Death-Poisoning	2	-	-	-	2
	Gun-Handgun	2	-	-	-	2
	Gun-Revolver	2	1	1	-	4

	Poisoning-CO with no fire	1	-	-	-	1
	Drowning-Other	-	1	-	-	1
Undetermined	Blunt Force	2	1	-	-	3
	Undetermined	1	-	-	-	1

Deaths among the Homeless:

Manner	Case Type	Race/Sex	20-29	30-39	40-49	50-59	60-69	70-79	Unknown	Total
Accident	Drug Death-Poisoning	BF	-	-	1	-	-	-	-	1
		BM	1	1	-	2	4	-	-	8
		WM	-	1	2	2	-	-	-	5
	Drug Death: Poisoning+Injury	BF	-	-	-	1	-	-	-	1
		Hypothermia-Exogenous	BF	-	-	1	-	-	-	-
	BM		-	-	4	4	2	2	-	12
WM	-		-	-	2	-	-	-	2	
Accident (T)	MVA-Pedestrian	BF	-	-	-	1	-	-	-	1
		BM	-	-	-	1	-	-	-	1
Homicide	Blunt Force	HM	-	-	1	-	-	-	-	1
	Gun-Handgun	BF	1	-	-	-	-	-	-	1
	Gun-Not Specified	BF	-	-	-	1	-	-	-	1
		BM	-	-	1	-	-	-	-	1
Natural	Cardiac-ASCVD-IHD	BM	-	-	-	1	3	-	-	4
		WM	-	-	-	1	1	-	-	2
	Cardiac-Hypertension	BF	-	-	-	1	-	-	-	1
		BM	-	-	-	2	-	1	-	3
		WM	-	-	-	1	-	-	-	1
	Cardiac-Myocarditis	WM	-	-	-	1	-	-	-	1
	Infection-Lung	BM	-	-	-	-	1	-	-	1
	Neoplasm	WM	-	-	-	-	1	-	-	1
	Nervous System-Stroke	BM	-	-	-	1	-	-	-	1
	Nervous System-Hemorrhage-HBP	BM	-	-	-	-	1	-	-	1
	Seizure Disorder	BM	-	-	-	1	-	-	-	1
Thromboemboli	BF	-	-	1	-	-	-	-	1	
Suicide	Asphyxia-Hanging	WM	-	-	1	-	-	-	-	1
	Gun-Handgun	BM	1	1	-	-	-	-	-	2
	MVA-Pedestrian	BM	-	1	-	-	-	-	-	1
	Train-Commercial	WM	-	-	1	-	-	-	-	1
Undetermined	Blunt Force	BM	-	-	-	-	1	-	-	1
	Undetermined	BM	-	-	1	-	3	-	-	4
		Unknown	-	-	-	-	-	-	1	1
TOTAL			3	4	14	23	17	3	1	65

Comparison with the past: Manners of Death 2000-2018

Year	Homicides	Suicides	Traffic Fatalities	Other Accidents
2000	172	76	143	192
2001	171	87	125	265
2002	203	83	125	265
2003	181	79	113	276
2004	159	90	137	240
2005	145	78	130	262
2006	149	77	132	245
2007	182	86	121	275
2008	156	84	119	255
2009	129	86	111	233
2010	146	101	80	266
2011	126	98	76	239
2012	135	102	89	234
2013	141	119	102	268
2014	154	106	101	332
2015	157	115	105	337
2016	193	120	137	378
2017	134	127	119	318
2018	157	132	132	356

Comparison with the past: Examinations performed 2000-2017

Year	Total Cases	Certified	Autopsies	External Exams	On-Scene Investigation	Total Bodies Examined*
2000	2098	1349	784	331	832	1331
2001	2014	1361	831	355	885	1406
2002	2063	1326	843	302	930	1322
2003	2298	1312	860	412	960	1554
2004	2254	1324	874	310	883	1312
2005	2171	1322	887	369	896	1427
2006	2212	1401	921	436	890	1495
2007	2238	1403	1002	365	921	1482
2008	2271	1386	940	303	894	1420
2009	2371	1418	893	456	856	1441
2010	2477	1416	910	367	848	1414
2011	2337	1299	868	338	780	1321
2012	2241	1315	832	391	825	1313
2013	2429	1454	952	442	1032	1511
2014	2594	1583	1027	525	1084	1635
2015	2545	1596	1052	483	995	1622
2016	2730	1693	1098	521	1113	1723
2017	2524	1370	757	565	1149	1621

*Indicates cases in which the body was examined by an investigator and/or medical examiner.

Comments:

The services provided by the Fulton County Medical Examiner go beyond the routine duties of conducting death investigations. Some of these other services include:

- Testifying in court cases.
- Participating on county and state Child Fatality Review Teams and preparing child fatality information for the Child Death Review reporting system.
- Giving lectures and training sessions.
- Providing a forensic pathology training program.
- Providing death investigations and forensic technician internships.
- Instructing pathology residents in forensic pathology.
- Reporting notifiable conditions to the Health Department.
- Reporting applicable deaths to federal agencies such as the Consumer Product Safety Commission and the Food and Drug Administration.
- Reporting childhood deaths to the Child Fatality Review Team and District Attorney.
- Reporting traffic fatalities to the Fulton County Solicitor.
- Reporting homicide victims to the Fulton County District Attorney.
- Participating in national organizations such as the National Association of Medical Examiners and their activities.
- Development and maintenance of in-house databases.
- Reporting unidentified decedents to NCIC (National Crime Information Center) and the NamUs Unidentified Decedent Reporting System.
- Providing forensic pathology and death investigation experience to medical students and nursing students at Morehouse School of Medicine, Emory University School of Medicine, and other medical institutions.
- Participating in programs such as the Sudden Death in the Young case registry conducted by the Centers for Disease Control and Prevention.