

Fulton County Medical Examiner *2024 Annual Report*



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TABLE OF CONTENTS

Preface	3
Section I. Introduction	4
Section II. All Reported Cases	7
Section III. Manner of Death: Homicide	8
Section IV. Manner of Death: Suicide	9
Section V. Manner of Death: Non-Vehicular Accident	10
Section VI. Manner of Death: Motor Vehicle Accident	11
Section VII. Manner of Death: Undetermined	12
Section VIII. Manner of Death: Natural	13
Section IX. Graphic Depictions: Caseload and Case Type	15
Section X. Special Topics	16
Deaths among Children	17
Deaths among the Elderly	18
Drugs Identified in 2024 Death Investigations	21
Deaths among the Homeless	22
Comparisons with the Past	24
Comments	25

Preface

The data contained within this report reflect the activities associated with investigations of death occurring in Fulton County, GA in the year 2024. The delay in the publication of this report is due in part to the fact that some death cases can 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 takes the time of our staff.

I would like to thank the employees of the Fulton County Medical Examiner's Office for their dedication, excellence, and quality death investigations conducted for the citizens of Fulton County. Without their commitment to deliver a high-level of service, 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. Our staff care for and maintain an accredited facility in which death investigations may be professionally conducted with respect to the dead and at which members of the public, legal, and law enforcement communities can effectively conduct their business.

This report was prepared with the assistance of interns Jolé Short of the Fulton County Medical Examiner's Office and Jaidan R. Sullivan of the Fulton County Information Technology Department.

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.

Karen E. Sullivan, MD
Chief Medical Examiner

SECTION I. INTRODUCTION

The Fulton County Medical Examiner (FCME) serves all non-federal, incorporated, and unincorporated areas within Fulton County. In 2024, 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, 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 the 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 534 square miles and has an estimated population of 1,090,354. Countywide, the population is about 39% white, 43% black, 7% Asian, 7% two or more races, and 8% Hispanic/Latino (July 8, 2025 www.census.gov).

The laws describing the duties of medical examiners in Georgia are contained mostly in the 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 a physician (no doctor who can sign the death certificate)
- Suspicious or unusual
- Children under 7 if death is unexpected or unexplained
- Executions pursuant to the death penalty
- An 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 the 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 responsible for signing the death certificate.

The case medical examiner (forensic pathologist) generally uses one of four 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 Autopsy:** External examination with internal examination limited to a specific area of the body
 - May be performed if there is expressed objection to an autopsy by the legal next of kin or significant health or safety risks exist for staff and a complete autopsy need not be performed.

There are basic general rules for classifying the 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 classification 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, after thorough consideration of all available information.

Budget and Staff

The operating budget was \$6,608,672.00 for fiscal year 2024. In 2024, the FCME staff consisted of 42 employees including 5 full-time medical examiners, 14 investigators, 8 administrative support staff, 14 forensic technicians and morgue support staff, and 1 facility support staff.

General Response

Deaths reported to FCME are assigned 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 the case should be accepted or declined, if a 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 72 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 investigations, 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 VertiQ Case Management Software (January 1, 2024 – December 31, 2024). In 2024 there were 3,095 deaths reported to the office.

Race/Ethnicity Categories

Categorizing the 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 reported by the next of kin:

B: Black/African-American
W: White/Caucasian
H: Hispanic/Latino
AS: Asian
AI: Asian Indian
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	Number	Percent
AJ	ACCIDENT (Non-traffic fatalities)	459	26%
	ACCIDENT (T) (Traffic fatalities)	108	6%
	HOMICIDE	226	13%
	NATURAL	759	43%
	SUICIDE	165	9%
	UNDETERMINED	54	3%
	Total	1759	100 %
DJ		1336	43%
AJ		1759	57%
TOTAL		3095	100 %

Table 2. Manner of Death by Procedure, cross-tabulated for Accepted (certified) cases only (n=2181)

Manner					
	Procedure				
	Autopsy	External PM Exam	Limited Dissection	Death Certificate Reviews	Total
ACCIDENT*	171	22	111	125	429
ACCIDENT (T)**	19	31	53	20	123
HOMICIDE	226	0	0	0	226
NATURAL	127	89	280	269	765
SUICIDE	25	88	44	6	163
UNDETERMINED	41	4	5	3	53
Total	610	233	495	421	1759

- * Non-traffic-related accidents
- ** Traffic-related accidents

SECTION III: Homicides (n =226)

HOMICIDES	
Case Code	Number
Blunt Force Trauma	9
Gunshot Wound (s)	192
Hypothermia and Natural Disease	1
Malnutrition and Neglect	1
Motor Vehicle Collision	1
Neglect	1
Overdose – Illicit	1
Sharp Force Injury	6
Sharp Force Injury and Blunt Force Trauma	1
Stab Wound(s)	11
Strangulation	2

Homicides: Age, Race, and Sex

	≤ 10	11-20	21-30	31-40	41-50	51-60	61-70	71+	Total
WM	0	1	1	4	1	2	2	1	12
WF	0	0	0	0	1	0	0	0	1
BM	0	32	30	43	31	20	9	3	168
BF	2	2	8	10	5	2	3	3	35
HM	0	0	3	0	1	0	0	0	4
HF	0	0	1	0	1	0	0	0	2
AM	0	0	0	0	0	0	0	1	1
AF	0	0	0	0	0	0	0	0	0
Other	0	1	0	0	0	0	0	0	1
Total	2	36	43	57	40	24	14	8	226

Comments:

- Firearms were involved in 84% of homicides.
- 89% of homicide victims were black/African-American.
- 81% of homicide victims were men.
- 74% of homicide victims were black men, 62% of whom were 40 years of age or younger.

SECTION IV: Suicides (n = 159)

Suicides	
Case Code	Number
Electrocution	1
Fire	1
Gunshot Wound	90
Hanging	31
Overdose- Illicit	1
Overdose – Mixed	5
Overdose- OTC	1
Overdose – Pharmaceutical	1
Overdose – Prescription	3
Jump	8
Pedestrian vs. Train	2
Sharp Force Injury	4
Stab Wound	1
Vitiated atmosphere	3
Shotgun Wound	2
Starvation	1
Poisoning	1
Strangulation	1
Blunt Force Injury	2

Suicides: Age, Race, and Sex

	≤ 10	11-20	21-30	31-40	41-50	51-60	61-70	71+	Total
WM	0	4	17	14	9	5	2	0	51
WF	0	1	4	2	1	3	1	2	14
BM	1	3	18	13	10	6	6	5	61
BF	0	1	6	4	1	1	0	1	14
HM	0	0	2	2	0	0	0	1	5
HF	0	0	0	0	0	0	1	0	1
AM	0	0	1	1	1	0	1	0	4
AF	0	0	0	0	0	0	0	0	0
Other	0	0	0	1	1	2	1	0	5
Total	1	9	48	36	27	17	12	9	159

Comments:

- 58% of suicides involved firearms.
- Suicide by hanging was the second most common method.
- 52% of suicides were in persons between the ages of 21- 40.

- 41% of suicides involved white decedents. 47% involved black decedents
- 76% of suicide victims were male.

SECTION V: Non-Vehicular Accidents (n =315)

Accidents (Non-Traffic)	
Case Code	Number
Anaphylaxis	1
Asphyxia-Overlay	1
Asphyxia & Blunt Force Trauma	1
Burns-Thermal	1
Carbon Monoxide	1
Choking	2
Drowning	8
Drowning and Natural Disease	3
Environmental Hyperthermia	1
Environmental Hypothermia	7
Exsanguination-Animal attack	1
Fall	2
Fall – Ground Level	12
Fall – From Height	1
Fall – Downstairs	3
Fire-Structure	10
Hypothermia and Ethanol Intoxication	1
Hypothermia and Illicit Drug Use	2
Hypothermia and Natural Disease	5
Illicit Drug Use and Cardiovascular Disease	14
Gunshot wound	1
Injury- Blunt Force Trauma	4
Overdose-Alcohol	2
Overdose-Ethanol and Cardiovascular Disease	1
Overdose-Illicit	160
Overdose-Inhalant	1
Overdose-Mixed	59
Overdose-Pharmaceutical	4
Overdose-Prescription	3
Overdose and Drowning	2
Overdose-Positional Asphyxia	1

Non-Vehicular Accidents: Age, Race, and Sex

	≤ 10	11-20	21-30	31-40	41-50	51-60	61-70	71+	Unk	Tot
WM	1	0	9	17	16	14	16	4	0	77
WF	0	1	6	8	8	6	1	3	0	33
BM	2	0	20	24	31	22	22	9	1	131
BF	1	0	4	11	12	13	8	7	0	56
HM	0	0	0	2	4	1	1	1	0	9
HF	0	0	0	0	1	0	0	0	0	1
AM	0	0	1	0	0	0	1	0	1	3
AF	0	0	0	0	0	1	0	0	0	1
Unk	0	0	0	0	0	0	0	0	0	0
Other	0	0	0	0	1	1	1	1	0	4
Total	4	1	40	62	73	58	50	25	2	315

Comments:

- The most common cause of non-traffic related accidental deaths was due to the use of controlled substances with or without concomitant use of ethanol. Falls, usually among elderly persons, were the second most common cause of accidental deaths.

SECTION VI: Motor Vehicle Accidents (n = 89)

Accidents (Traffic)	
Case Code	Number
Bicycle vs. Motor Vehicle	2
Electric Scooter vs. Motor Vehicle	2
Motor Vehicle vs Fixed Object	13
Motor Vehicle Rollover	3
Motor Vehicle vs Motor Vehicle	27
Motor Vehicle vs Unknown	1
Motorcycle vs. Fixed Object	2
Motorcycle vs. Motor Vehicle	5
Pedestrian vs. Multiple Vehicles	1
Pedestrian vs. Train	3
Pedestrian vs Motor Vehicle	30

Motor Vehicle Accidents: Age, Race, and Sex

	≤ 10	11-20	21-30	31-40	41-50	51-60	61-70	71+	Total
WM	0	0	1	5	1	3	3	0	13
WF	0	0	1	3	0	1	1	0	6
BM	0	3	8	10	6	4	6	2	39
BF	1	1	7	4	5	2	1	1	22
HM	0	0	2	1	1	0	0	0	4
HF	0	0	0	0	0	0	0	0	0

AM	0	1	1	0	0	0	0	0	2
AF	0	1	0	0	0	0	0	0	1
Other	0	0	2	0	0	0	0	0	2
Total	1	6	22	23	13	10	11	3	89

Comments: 24% of motor vehicle accidents were among the 21-30 age group. 44% of motor vehicle accidents involved black males, followed by 25% that involved black females.

SECTION VII: Undetermined Manner of Death (n =51)

Undetermined	
Case Code	Number
Asphyxia - Choking	1
Blunt Force Trauma	3
Gunshot Wound	3
Fall from Height	1
Intrauterine fetal demise	1
Overdose - Illicit	2
Overdose - Mixed	3
Pedestrian vs Train	3
Stab Wound	1
Sudden unexplained infant death	10
Undetermined	23

Undetermined Manner of Death: Age, Race, and Sex

	≤ 10	11-20	21-30	31-40	41-50	51-60	61-70	71+	No Age	Total
WM	0	0	1	1	1	1	0	0	2	6
WF	0	0	0	1	0	0	1	0	2	4
BM	7	2	3	3	4	1	1	1	1	23
BF	3	0	2	0	1	1	1	0	0	8
HM	0	0	0	0	0	0	0	0	0	0
HF	0	0	0	1	0	0	0	0	0	1
AM	0	0	0	0	0	0	0	0	0	0
AF	0	0	0	0	0	0	0	0	0	0
Other	3	0	0	2	1	0	0	0	3	9
Total	13	2	6	8	7	3	3	1	8	51

Comments:

- Some deaths with undetermined manners are classified that way because a cause and manner of death could not be determined, such as in cases with decomposed or skeletal remains.
- 19% of deaths with undetermined manners are sudden unexplained deaths among infants.

SECTION VIII: Deaths due to Natural Causes (n = 498)

Natural Causes	
Case Code	Number
AIDS	1
Anemia	1
Bowel Obstruction	2
Cancer-Breast	1
Cancer-Carcinoma	1
Cancer-Head and Neck	1
Cancer-Hematologic	1
Cancer – Lung	3
Cardiac-Aortic Dissection	4
Cardiac- Arrhythmia	1
Cardiac-Coronary Artery Disease and Hypertension	71
Cardiac-Congestive Heart Failure	1
Cardiac- Congenital	1
Cardiac- Coronary Artery Anomaly	1
Cardiac-Coronary Artery Disease	45
Cardiac – Coronary Artery Thrombosis	10
Cardiac Disease NOS	12
Cardiac-Hypertension	121
Cardiac-Myocardial Infarction	3
Cardiac- Myocarditis	5
Cardiac- Pericarditis	2
Cardiac- Ruptured Aortic Aneurysm	2
Cardiac- Sudden Cardiac Death	4
Chronic Ethanol Abuse	41
Chronic Kidney Disease	2
Chronic Lung Disease	1
CNS-Cerebral Palsy	1
CNS- Neurodevelopment Disorder	1
CNS-Seizure Disorder	8
CNS Hemorrhage- Aneurysm	2
CNS Hemorrhage- NOS	2
CNS Hemorrhage- Hypertension	13
Connective Tissue Disorder	1
Dehydration	1
Diabetes Mellitus	26
Duodenal Ulcer	1
End Stage Hepatic Cirrhosis	6
Gastric Ulcer	1
Gastrointestinal Hemorrhage	2
Genetic Abnormality	1
Human Immunodeficiency Virus Infection	1
Infection-COVID-19	2

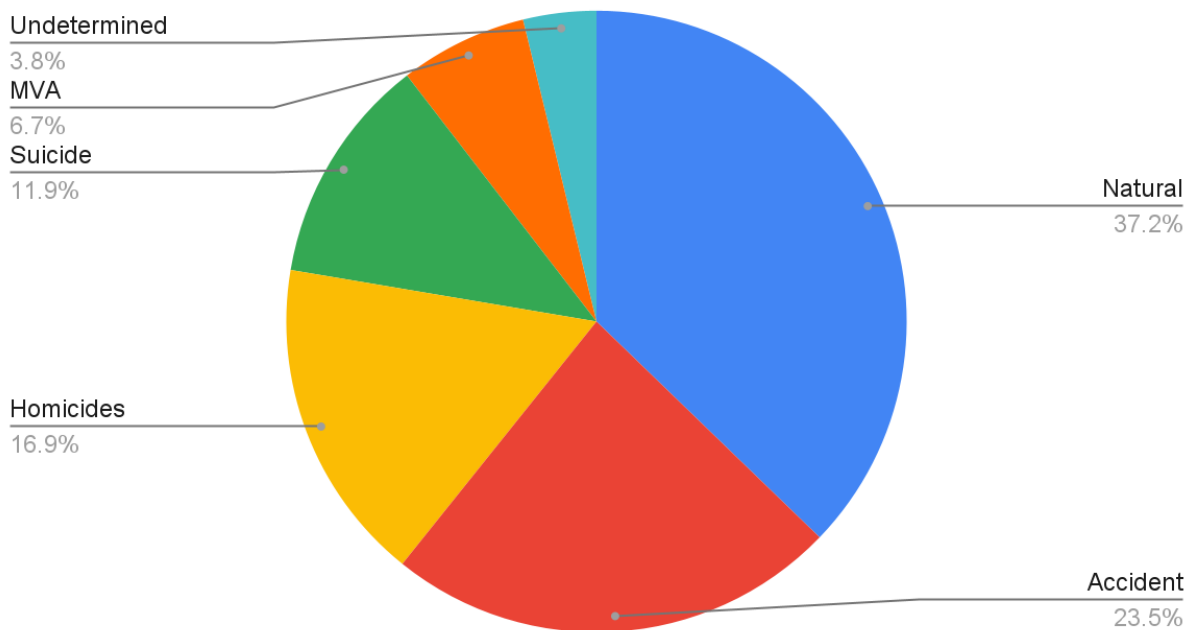
Infection- COVID-19 & Diabetes Mellitus	2
Infection- COVID-19 & Influenza A	1
Infection- Influenza A	1
Infection- Meningitis	1
Infection-Peritonitis	3
Infection-Pneumonia	23
Infection-Sepsis	4
Infection- Tuberculosis	1
Intestinal Ischemia	2
Malnutrition\ Dehydration	1
Non-Specific Natural Disease Process	9
Obesity	4
Organ Failure- Liver	1
Pancreatitis- Acute	1
Peripheral Vascular Disease	1
Pregnancy- Uterine Rupture	1
Pulmonary Asthma	1
Pulmonary-COPD	2
Pulmonary-Embolism	5
Pulmonary- Hypertension	1
Pulmonary-Thromboembolism	20
Pulmonary- Thrombosis	1
Status Asthmaticus	4
Systemic Lupus Erythematosus	1

Comments:

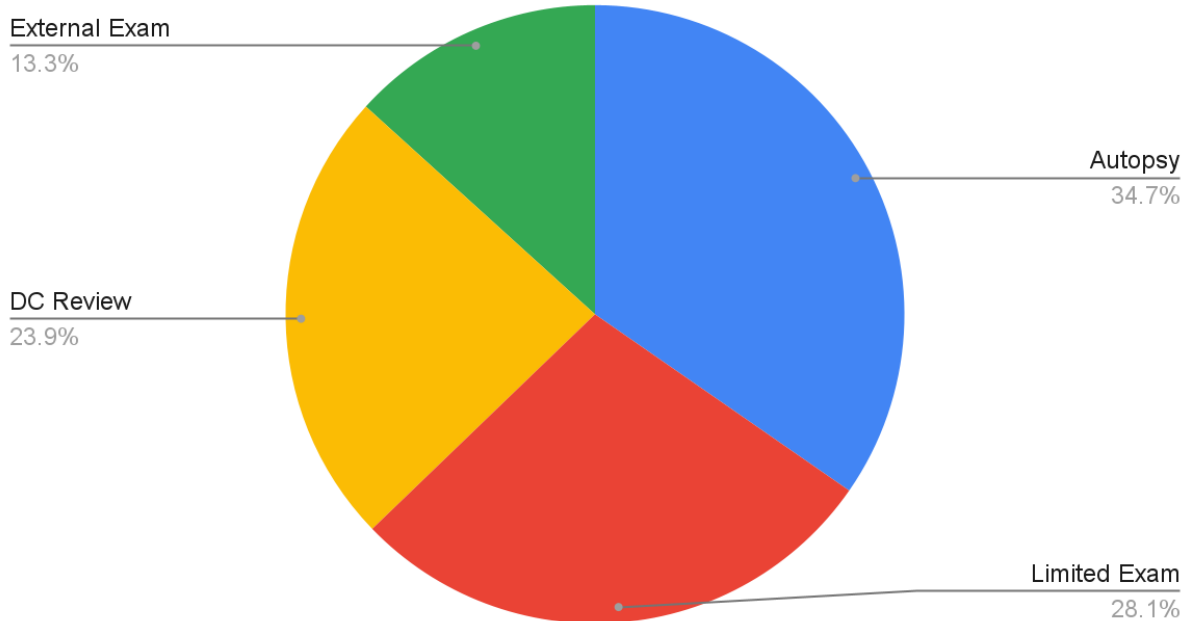
- The majority of deaths investigated by the Fulton County Medical Examiner's Center are sudden natural deaths.
- 57% of natural deaths were due to heart disease. Hypertension was involved in 68% of these cases

SECTION IX: Graphic Depictions of Caseload and Case Type:

Manner of Death 2024



Basic Case Procedures 2024

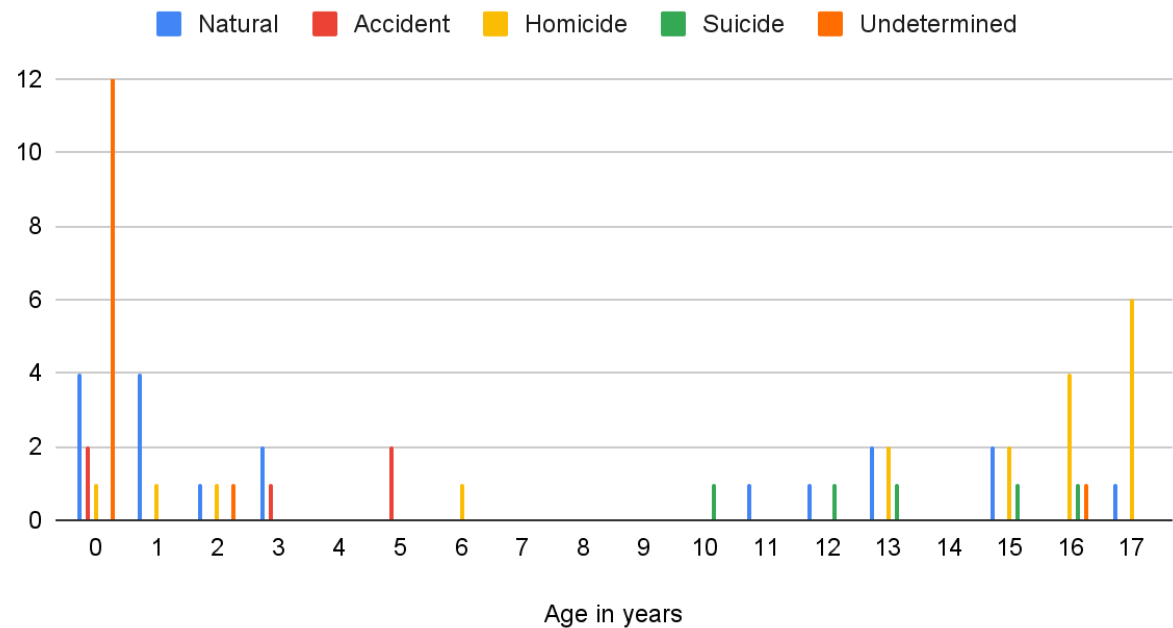


SECTION X: Special Topics

Deaths of Children Ages 1 through 17 years:

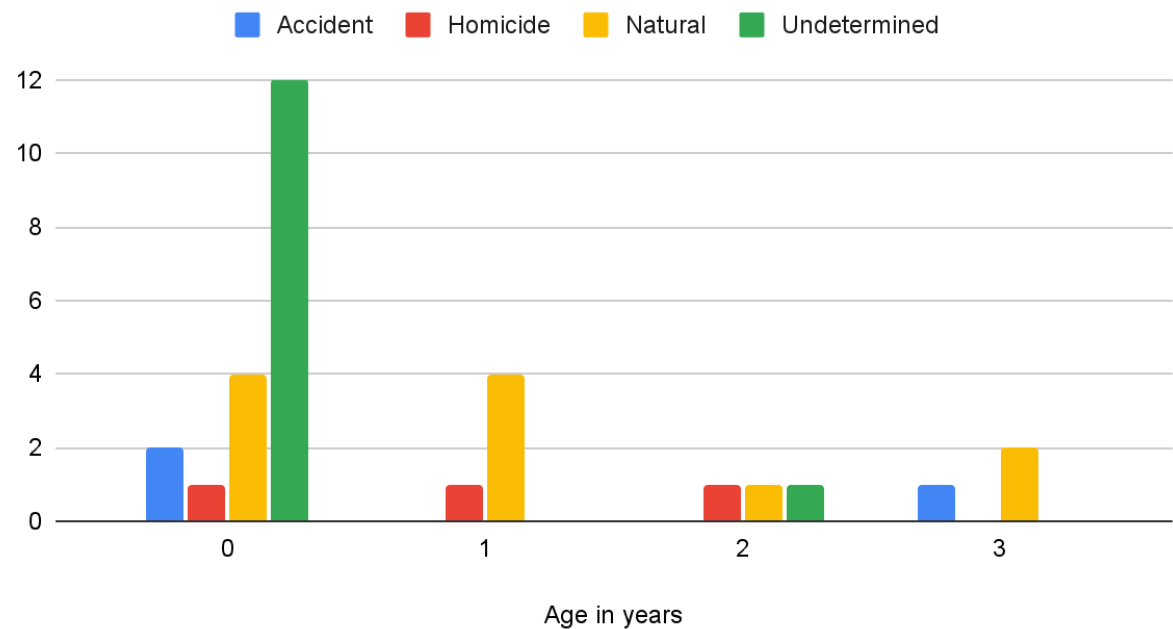
	<= 10 Years Old	Cause	11-17 Years Old	Cause
Accident	2	Asphyxia - Overlay (1) Fire - Structure (1)	0	
Homicide	2	Blunt Force Trauma (2)	14	Gunshot Wound(s) (14)
MV Accident	0		0	
Natural	8	Gastric Ulcer (1) Infection- Covid-19 (1) Infection- Influenza A (1) Infection- Pneumonia (3) Infection- Sepsis (1) Non-specific natural disease process (1)	6	Cardiac - Cardiac Disease NOS (1) Cardiac - Congenital (1) CNS - Seizure Disorder (1) Infection - Pneumonia (2) Pulmonary - Thromboembolism (1)
Suicide	1	Hanging (1)	4	Hanging (1) Gunshot Wound (3)
Undetermined	12	Intrauterine fetal demise (1) Sudden unexplained infant death(10) Undetermined (1)	1	Gunshot Wound(1)
Total	25		25	Total: 50

Childhood Deaths, Age Distribution and Manner of Death



Childhood Deaths, Age Distributions and manner of Death
Age in Months

Infant Deaths, Age Distribution and Manner of Death



Comments:

- Fulton County's Georgia Child Fatality Review (CFR) Committee 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 the 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.

Deaths among the Elderly:

Manner	Cause	Age in years				TOTAL
		years old	76-85 years old	86-95 years old	96 and over	
ACCIDENT	Fall - Against Object		1	1		
	Asphyxia-Food	1				
	Asphyxia and Blunt Force trauma	1				
	Fall	1		1		
	Bicycle Rollover	1				
	Choking		3	1		
	Burn-Thermal	1				
	Drowning		1			
	Drowning and Natural Disease	1	1	1		
	Environmental hypothermia	1				
	Drug Death					
	Fall- Down Stairs	3	3	2		
	Fall- From Height		1			
	Fall-Ground Level	8	24	23	2	
	Fall-To Floor		1	2		
	Fire- Structure	2	1			
	Hypothermia and Natural Disease			1		
	Hypothermia and Ethanol Intoxication	1				

Manner	Cause	66-75 years old	76-85 years old	86-95 years old	96 and over	TOTAL
	Hypothermia and Illicit Drug Use	1				
	Illicit Drug use and Cardiovascular Disease	4				
	Injury- Blunt Force Trauma	1	1			
	Overdose - Illicit	19	1			
	Overdose - Mixed	3				
	Overdose - Pharmaceutical	1				
	Overdose - Prescription		1			
	Overdose and Positional Asphyxia	1				
ACCIDENT (T)	Pedestrian vs Motor Vehicle	5	3			
	Motor Vehicle vs Motor Vehicle	1				
NATURAL	Cancer-Head and Neck	2	1		1	
	Cancer-Lung	2	1		1	
	Cardiac-Aortic Stenosis	1			1	
	Cardiac-ASCVD	14				
	Cardiac-ASCVD and Hypertension	25	20			
	Cardiac – Coronary Artery Disease	10		1	1	
	Cardiac-Hypertension	52	47	1	2	
	Cardiac-Myocardial infarction	1			1	
	Cardiac-NOS	1			1	
	Cardiac-Coronary Artery Thrombosis	3			1	
	CNS-CVA (Stroke)	1				
	CNS – Hemorrhage NOS	13	4	20	2	
	CNS Hemorrhage- Hypertension	1	1		1	
	CNS Seizure Disorder	1			1	
	CNS- Dementia	1			1	
	Chronic Kidney Disease	3	1			
	Chronic Lung Disease	1				
	Chronic Ethanol Abuse	6				
	Diabetes Mellitus	7				
	Duodenal Ulcer	1				
	End Stage Hepatic Cirrhosis	3				
	Gastrointestinal Hemorrhage	1				
	Infection-COVID-19	1				

Manner	Cause	66-75 years old	76-85 years old	86-95 years old	96 and over	TOTAL
	Infection - Peritonitis	1				
	Infection Pneumonia	6			3	
	Infection-Sepsis	1				
	Intestinal Ischemia	1				
	Nonspecific Natural Disease Process	8			14	
	Systemic lupus erythematosus	1				
	Pulmonary- COPD	8				
	Obesity	1				
	Organ Failure Kidney	1				
	Pulmonary Embolism	1				
	Peripheral Vascular Disease	1				
	Pulmonary - Hypertension	2				
	Pulmonary Thromboembolism	1				
HOMICIDE						
	Gunshot Wound(s)	4	1			
	Neglect	1				
	Strangulation	1				
	Stab Wound		2	1		
	Sharp Force Injury		2			
	Hypothermia & Natural Disease	1				
SUICIDE	Sharp Force		1			
	Drug Death	4	1	1		
	Gunshot Wound	4	4			
	Hanging	2				
	Vitiated Atmosphere	1				
UNDETERMINED	Undetermined		1			1
	Blunt Force Trauma	1				1
TOTAL						

Comments: Of the 2181 deaths certified by the medical examiner in 2024, 463 (21%) were persons 66 years of age or older.

Drugs Identified in 2024 FCME Death Investigations-

Drug	Number of Cases
Acetyl fentanyl	6
Alcohol	8
Alprazolam	9
Amphetamine	4
Bromazolam	4
Carisoprodol	1
Citalopram/Escitalopram	2
Clonazepam	3
Cocaine	117
Codeine	3
Cyclobenzaprine	3
Diazepam	2
Difluoroethane	1
Diphenhydramine	3
Ethanol	26
Eutylone	2
Fentanyl	155
Fluoxetine	2
Fluorofentanyl	6
Gabapentin	3
Heroin	11
Hydrocodone	2
Hydromorphone	2
Hydroxyzine	1
Ketamine	3
Methadone	3
Methamphetamine	69
Mitragynine	11
Morphine	9
Nordiazepam	2
Oxycodone	14
Promethazine	3
Sertraline	1
Tramadol	3
Trazodone	2
Venlafaxine	1
Xylazine	43

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 Homeless:

Manner	Case Code	Race/Sex	<20	20-29	30-39	40-49	50-59	60-69	70-79	80-89	Unk	Total
Natural	Cardiac-Coronary Artery Thrombosis (1)											
	Cardiac Hypertension(3)											
	Chronic Ethanol Abuse (4)											
	Diabetes Mellitus (2)	BM		1		4	3	12	1		1	
	Pulmonary - Hypertension(1)	BF				2	1	2				
	Pulmonary - Thromboembolism(1)	WF					2	1				
Accident	Cardiac - ASCVD and Hypertension(6)	WM		1		1		1				
		Other					2					
	Environmental Hyperthermia (1)	BF	0	2	2	2						
	Environmental Hypothermia(4)	BM	0	0	5	3	9	4	3			
	Fire-Structure(1)											
Accident	Hypothermia & Ethanol Intoxication(1)											
	Hypothermia & Illicit Drug Use(2)											
	Hypothermia & Natural disease (2)											
	Illicit Drug use & Cardiovascular Disease(1)											
	Overdose Illicit (26)											
	Overdose Mixed (7)	WM	0	0	4	4	3	2				

	Overdose & drowning (1)											
		WF	0		1	1						
		Other		1								
Accident(T)	Pedestrian vs Vehicle(1)	BF		1	1	2						
	Pedestrian vs Vehicle(6)	BM			1		1	1	1			
	Pedestrian vs Train (1)											
	Electric Scooter vs Vehicle (1)	WM						1				
Homicide	Blunt Force Trauma (1)	WF										
		BM	2	2		3	2	1				
		BF						1				
	Gunshot Wound (8) Overdose- Illicit (1) Sharp Force Injury (1) Stab Wounds (4)											
		WM			1		1	1				
		WF										
		Other				1						
Suicide	Hanging (2) Gunshot Wounds (2) Sharp Force Injury (1) Burns-Thermal (1) Vitiated Atmosphere (1) Pedestrian Vs Train (1)	BM				2						
		WM		1	2		1	1				
		Other				1						
Un-determined		BM		1	1	1	1					
		Other										
TOTAL												123

Comparison with the past: Manners of Death 2000-2023

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
2019	183	129	138	340
2020	258	107	170	382
2021	259	155	185	539
2022	278	138	186	533
2023	225	160	154	545
2024	226	159	89	315

Comparison with the past: Examinations performed 2000-2025

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
2018	2551	1346	876	413	1248	1679
2019	2422	1354	882	402	1100	1494
2020	2665	1636	989	647	888	2,548
2021	3086	2090	1250	674	1553	2,262
2022	2943	2168	993	394	1750	2182
2023	2921	1572	1293	217	1540	2052
2024	3095	1338	610	213	1537	2181

*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 in 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.
- 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 the 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 its 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 undergraduate students interested in forensic science/medicine and to paramedic/EMT firefighter students, medical students, and nursing students at Morehouse School of Medicine, Emory University School of Medicine, and other medical institutions.