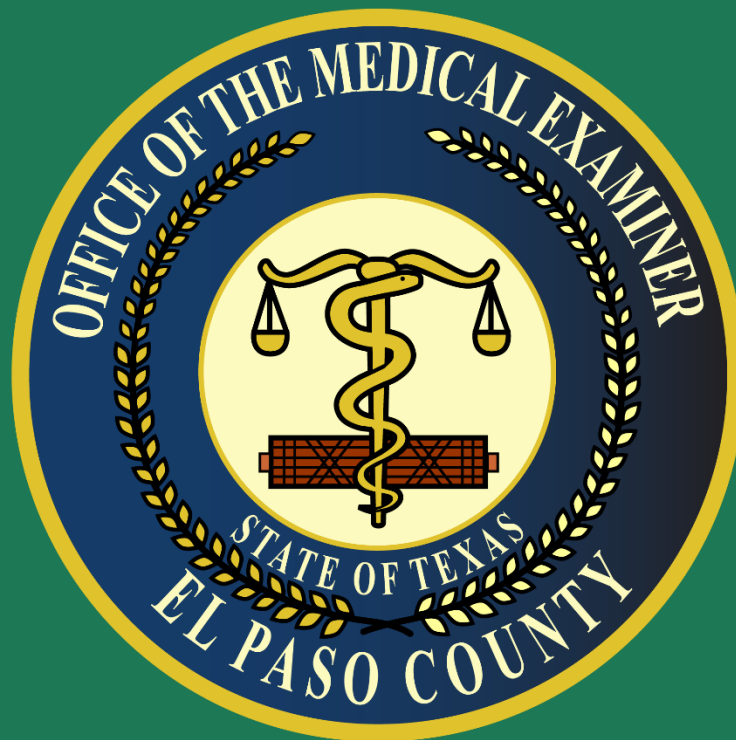




Office of the Medical Examiner

2024 Annual Report



El Paso County, Texas





Office of the Medical Examiner

Mario A Rascon, MD, MHCM
Chief Medical Examiner

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

Irene Santiago
Chief of Operations

Annabel Salazar, D-ABMDI
Chief Investigator

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

Nika Carrillo, D-ABMDI
Bessie Christmann, D-ABMDI
Caliah Cope, D-ABMDI
Paulina Elizalde, D-ABMDI
Andrea Gandarilla
Kathy Martinez, D-ABMDI
Morgan Riddle, D-ABMDI
Ashley Rios, D-ABMDI
Jovana Puente
Jonathan Yu
Investigators

Lorenzo Flores
Forensic Photographer

Concepcion Grajeda
Alejandra Perez
Brittney Morales
Administrative Specialists

Kayla Soto
Office Assistant

Arturo Velazquez
Morgue Manager

Sal Tellez
June Gonzales
Aaron Lechuga
Morgue Attendants

Commissioners Court

Ricardo A Samaniego
County Judge

Jackie Butler
Commissioner, Precinct 1

David Stout
Commissioner, Precinct 2

Iliana Holguin
Commissioner, Precinct 3

Sergio Coronado
Commissioner, Precinct 4

El Paso County Office of the Medical Examiner
4505 Alberta Drive
El Paso, TX. 79905
Telephone: (915) 273-3403 Fax: (915) 273-3404
epcounty.com/medicalexaminer

PROLOGUE

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

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

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



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

Chief Medical Examiner

El Paso County Office of the Medical Examiner

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INTRODUCTION

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

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

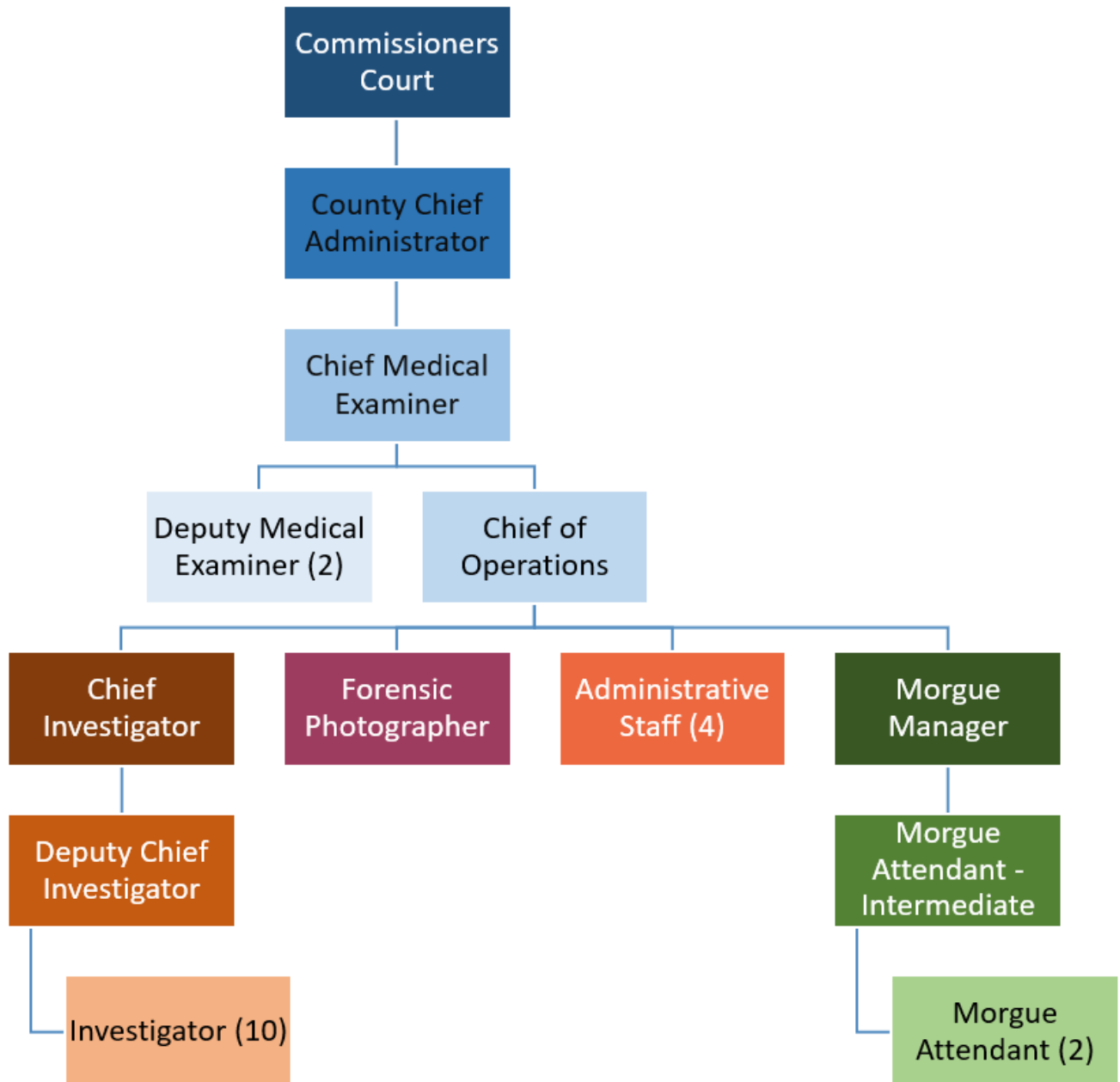
The Texas Code of Criminal Procedure (Chapter 49. 'Inquests Upon Dead Bodies'), stipulates that the EPOME shall conduct an inquest into the death of a person who dies in the County if:

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

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

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

EPOME – ORGANIZATIONAL CHART



CASE JURISDICTION

El Paso covers an area of about 259 square miles (city) and an overall county area of 1015 square miles, having an estimated population (2023 census estimate) of about 884,432. Countywide, the population is about 94% white (which includes 83% white-hispanic and 11% white non-hispanic), 3.4% black, 0.3% American Indian, 1.1% Asian, 1.2% two or more races.

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

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

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

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



Area served by the EPOME is highlighted in red.

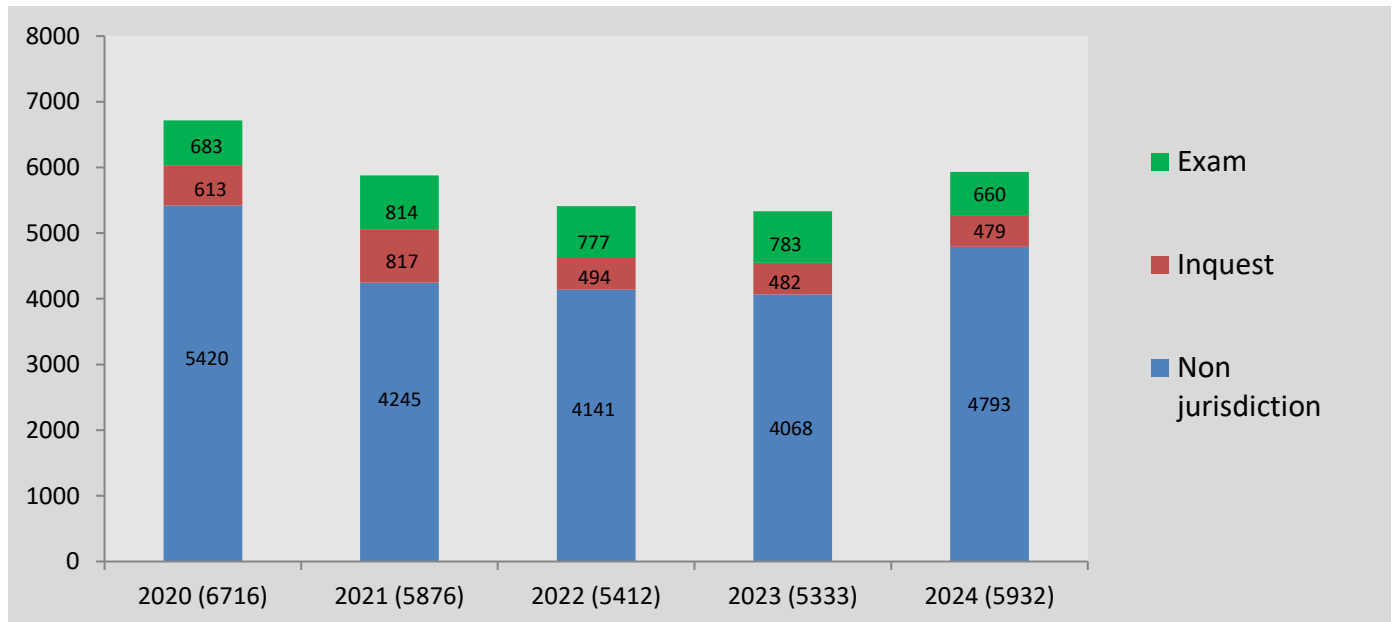
EXECUTIVE SUMMARY – 2024

In 2024, El Paso County had a total of 7191 deaths. Of these, 5932 were reported to the EPOME. Every reported case requires a preliminary screening by EPOME investigative staff to determine if it falls under the jurisdiction of the EPOME. Of those calls, a total of 4175 cases were **released**, with death certificates being signed by primary care physicians in the community. Additionally, 618 calls were related to cases that did not meet the guidelines as described above to be reported to the EPOME (**declined jurisdiction** cases). Jurisdiction was **accepted** on a total of 1139 cases (479 inquests and 660 exam cases). In all the exam cases the bodies were physically examined at the EPOME. Full body autopsies were conducted on 483 cases and 177 underwent an *external examination* only. The EPOME does not perform partial autopsies.

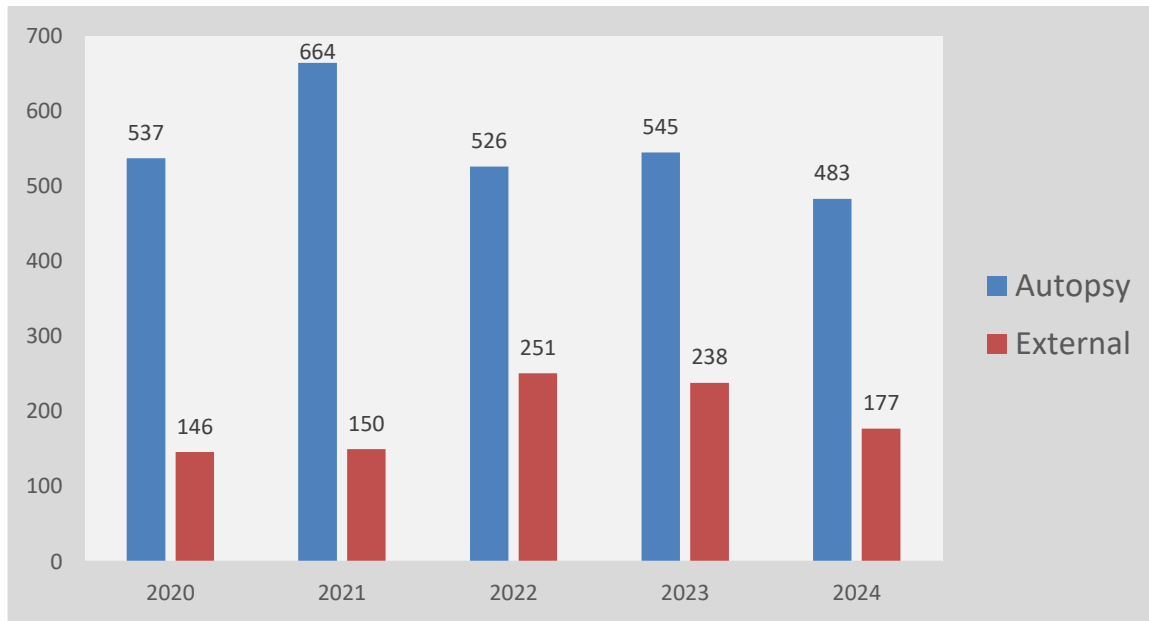
There were a total of 1496 death scenes investigated. A total of 856 bodies were transported to the EPOME facilities. Note that the number of transported bodies is greater than the exam cases; this is because some *release* and some *inquest* cases are transported to the EPOME morgue as a courtesy to families in need of body storage while waiting to finalize funeral arrangements. There were no exhumations performed and no cases previously autopsied at local hospitals were retained by the EPOME in 2024.

EPOME DATA

TOTAL CASES HANDLED BY THE EPOME – 2020 to 2024

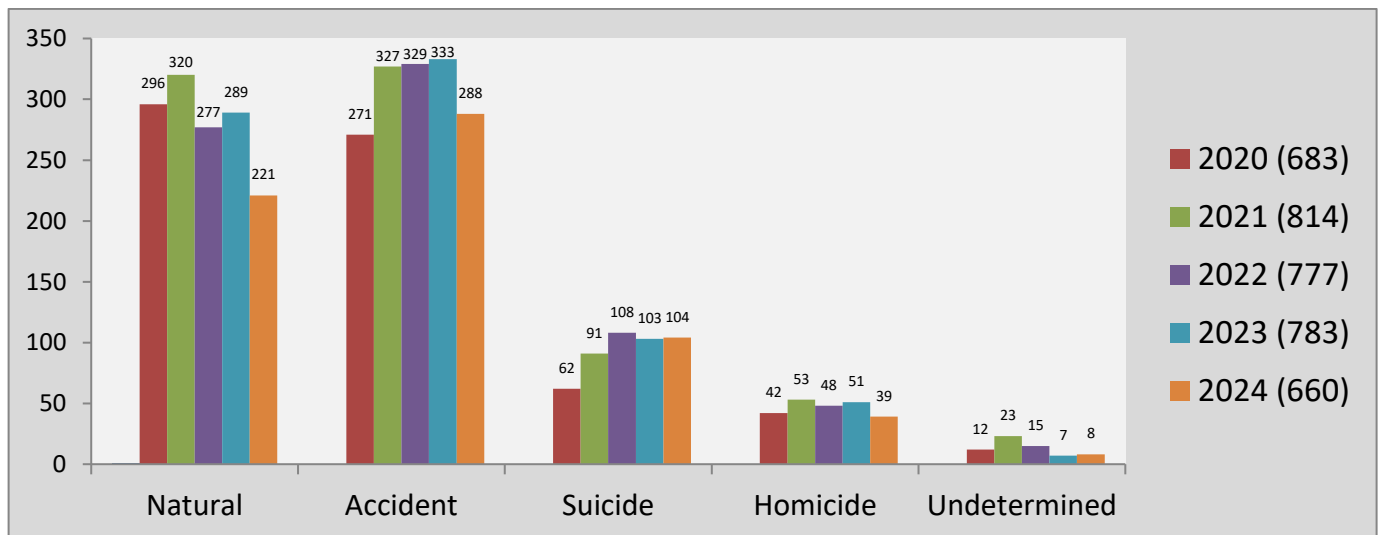


EXAM CASES 2020 to 2024– EXAMINATION TYPE

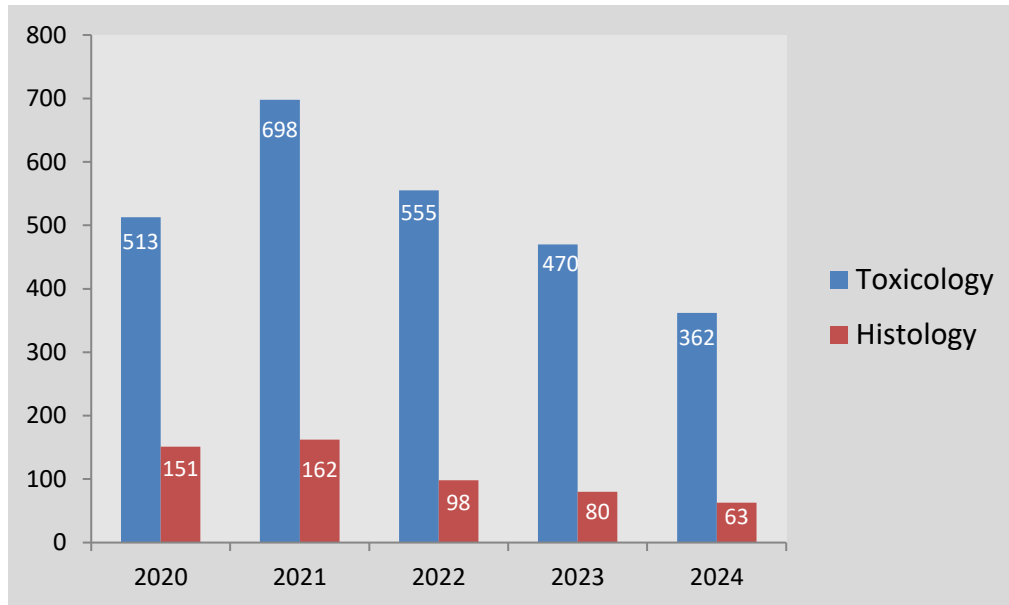


The autopsy to external examination ratio for 2024 was 2.7:1

EXAM CASES 2020 to 2024 – MANNER OF DEATH

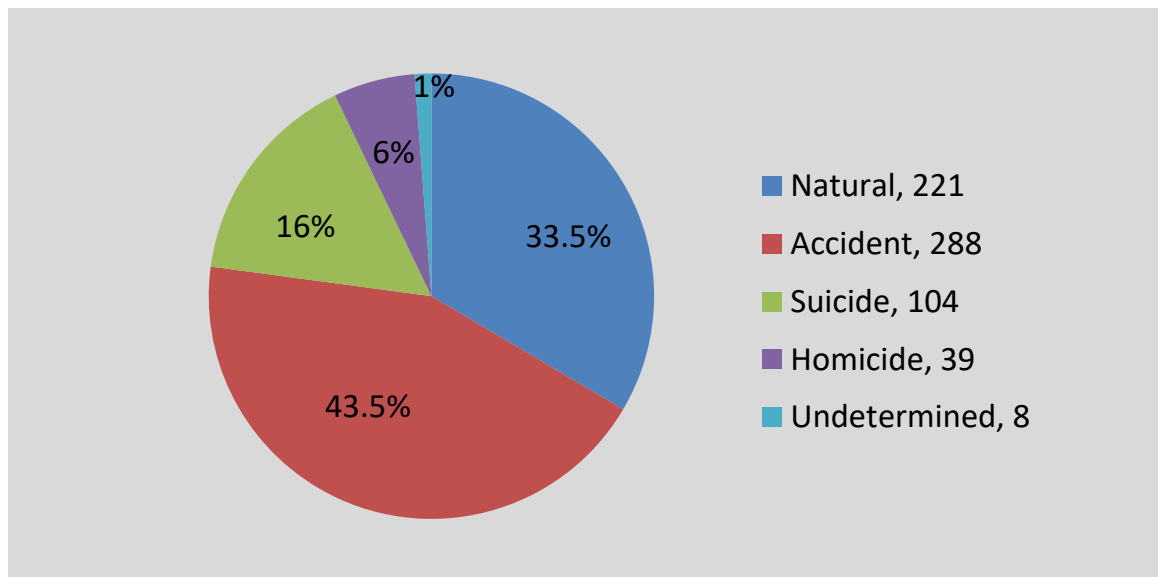


EXAM CASES 2020 to 2024– TOXICOLOGY & HISTOLOGY REQUESTS



EPOME 2024: EXAM CASES

2024 TOTAL EXAM CASES (660) – MANNER OF DEATH



2024 TOTAL EXAM CASES (660) – MANNER OF DEATH & AUTOPSY STATUS

	MANNER OF DEATH					TOTAL (%)
	NATURAL	ACCIDENT	SUICIDE	HOMICIDE	UNDETERMINED	
Autopsy (%)	165 (74%)	234 (81%)	38 (36.5%)	39 (100%)	7 (87.5%)	483 (73%)
External Exam (%)	56 (26%)	54 (19%)	66 (63.5%)	0	1 (12.5%)	177 (27%)
TOTAL	221	288	104	39	8	660

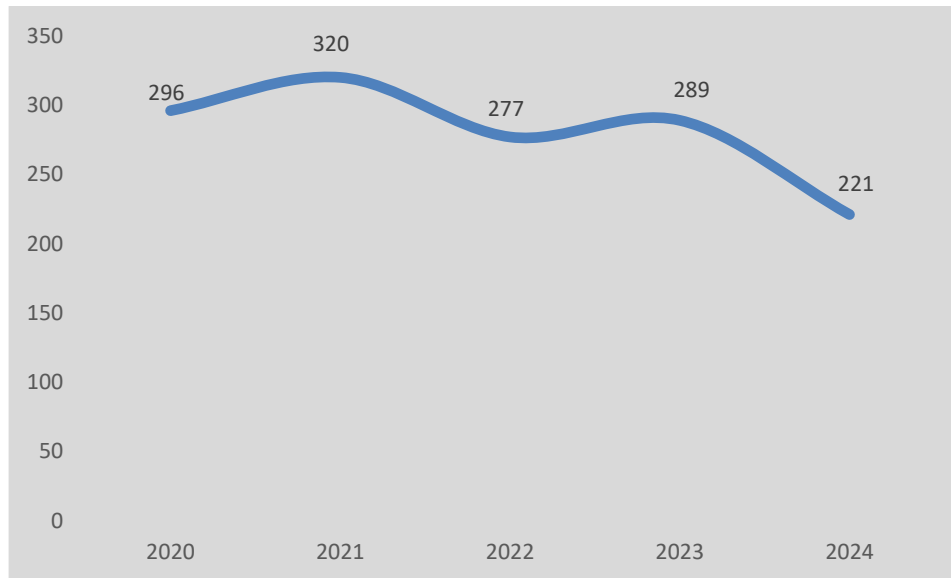
2024 TOTAL EXAM CASES (660) – GENDER AND AGE GROUP

	MANNER OF DEATH									
	NATURAL		ACCIDENT		SUICIDE		HOMICIDE		UNDETERMINED	
Age Group	♂	♀	♂	♀	♂	♀	♂	♀	Undetermined Sex	♀
Unidentified	1	-	3	1	-	-	-	-	7	-
Fetus*	-	2	-	-	-	-	-	-	-	-
<1	2	2	3	3	-	-	1	-	-	-
1-5	-	1	3	1	-	-	-	-	-	-
6-10	-	-	-	-	-	-	-	-	-	-
11-18	2	1	11	4	2	1	1	-	-	-
19-25	3	1	30	6	15	3	9	-	-	-
26-35	7	2	39	15	22	3	10	1	-	-
36-45	20	6	49	11	19	6	9	2	-	-
46-55	23	10	39	9	13	1	2	-	-	-
56-65	45	9	27	2	9	2	3	-	-	-
66-75	49	8	16	8	-	-	1	-	-	1
76-85	15	1	3	2	6	-	-	-	-	-
>85	6	4	2	1	2	-	-	-	-	-
TOTAL	173	47	225	63	88	16	36	3	7	1
♂: 529	220*		288		104		39		8	
♀: 130										

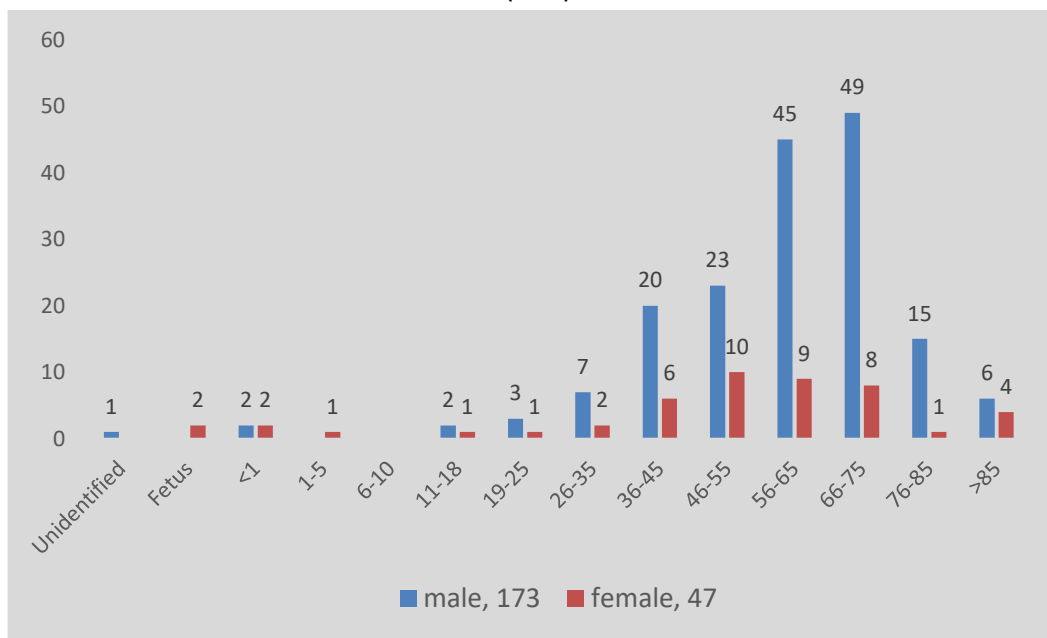
*includes one case (fetal demise) where sex could not be determined

♂=male; ♀=female

NATURAL DEATHS (221) NATURAL DEATHS: 2020 - 2024



2024 NATURAL DEATHS (221) – SEX AND AGE GROUP



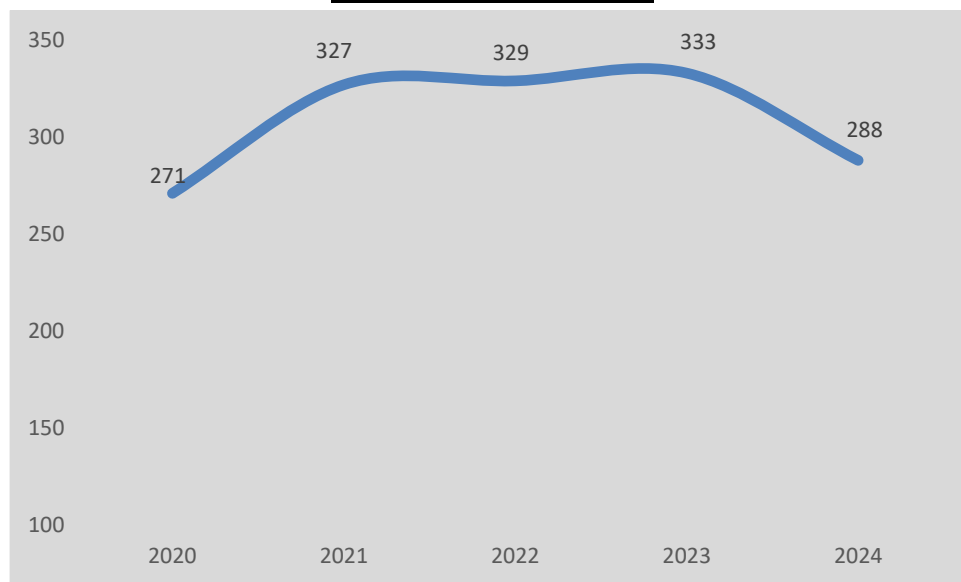
Individuals aged 50-69 years comprised 50% of all people who succumbed to natural deaths in 2024. The male:female ratio for natural deaths investigated by the OME was 3.6:1 in 2024.

2024 NATURAL DEATHS* – CAUSE OF DEATH

Cardiovascular Disease	149
Complications of Chronic Alcohol Abuse	19
Pulmonary Embolism	10
Pneumonia	6
Diabetes Mellitus	5
Cancer	5

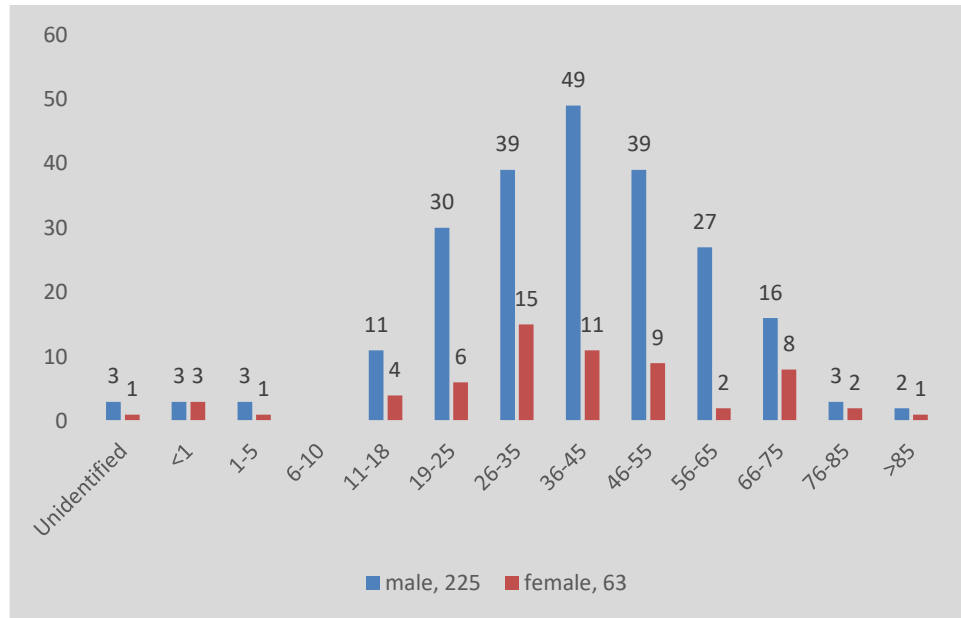
*only diagnoses with 5 or more occurrences are included.

Cardiovascular Disease includes 149 cases with the following cause of death statements: *hypertensive and atherosclerotic cardiovascular disease (111) and atherosclerotic cardiovascular disease (38).*

ACCIDENTS (288)ACCIDENTS: 2020 – 2024

There was a 13.5% decrease in overall accidental deaths from 2023 (333) to 2024 (288).

2024 ACCIDENTS (288) – SEX AND AGE GROUP



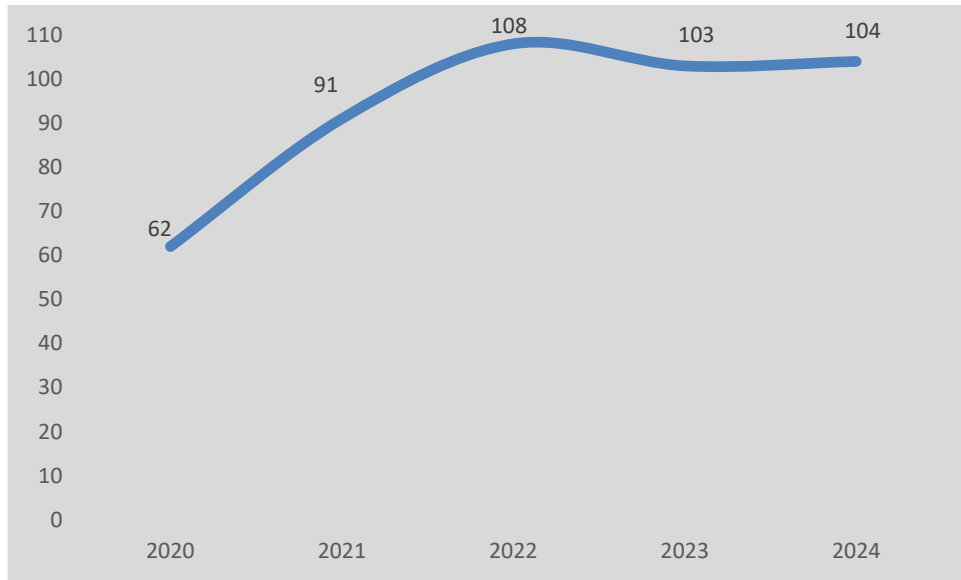
Accident victims were most frequently male (78%). Individuals between the ages of 20 – 47 years comprised 53% of all accidental fatalities.

2024 ACCIDENTS (288) – MECHANISM

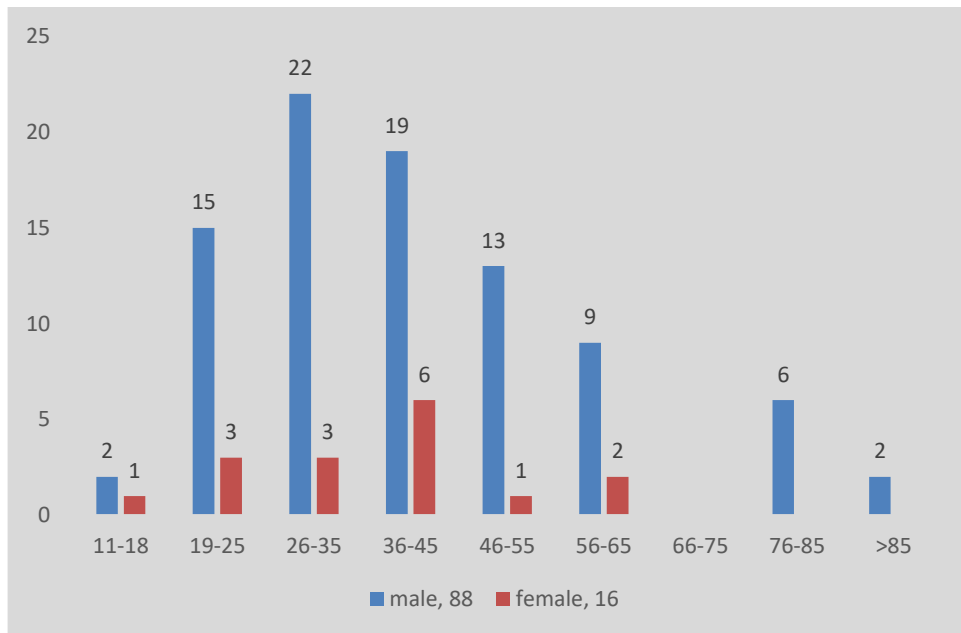
Acute Drug Toxicity	121
Blunt Force Injuries	94
Drowning	34
Environmental Heat Exposure	16
Thermal Injuries	12
Asphyxia - Suffocation	5
Gunshot Wound	2
Asphyxia - Positional	1
Asphyxia - Overlay	1
Choking	1
Electrocution	1
TOTAL	288

SUICIDES

SUICIDES: 2020 - 2024



2024 SUICIDES (104) – SEX AND AGE GROUP

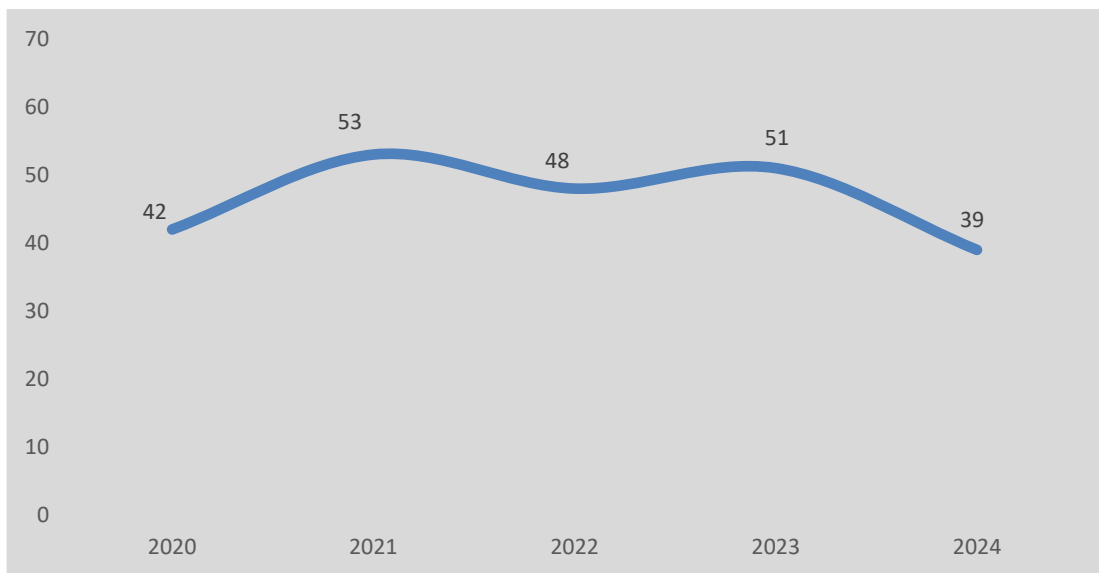


Suicide victims were most frequently male (84.6%). Individuals between the ages of 20 – 40 years comprised 54.8% of all suicides.

2024 SUICIDES (104) – METHOD

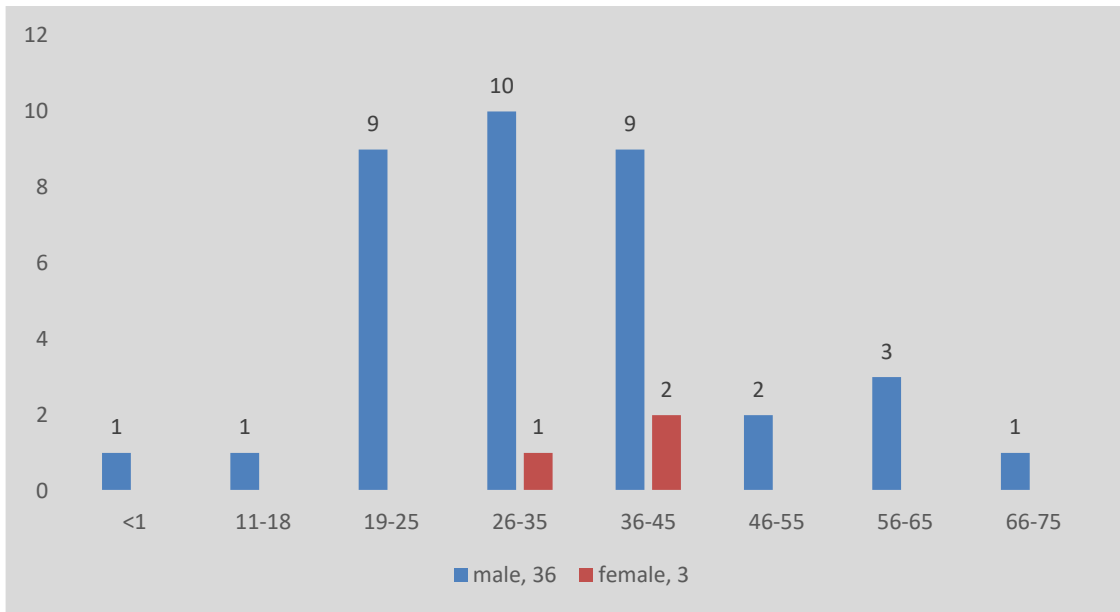
Firearm	59
Hanging	27
Blunt Force Injuries	10
Acute Drug Toxicity	4
Sharp Force Injuries	3
Suffocation	1
TOTAL	104

The majority (55 out of 59 [93%]) of suicide by firearm involved wounds to the head.

HOMICIDES**HOMICIDES: 2020 - 2024**

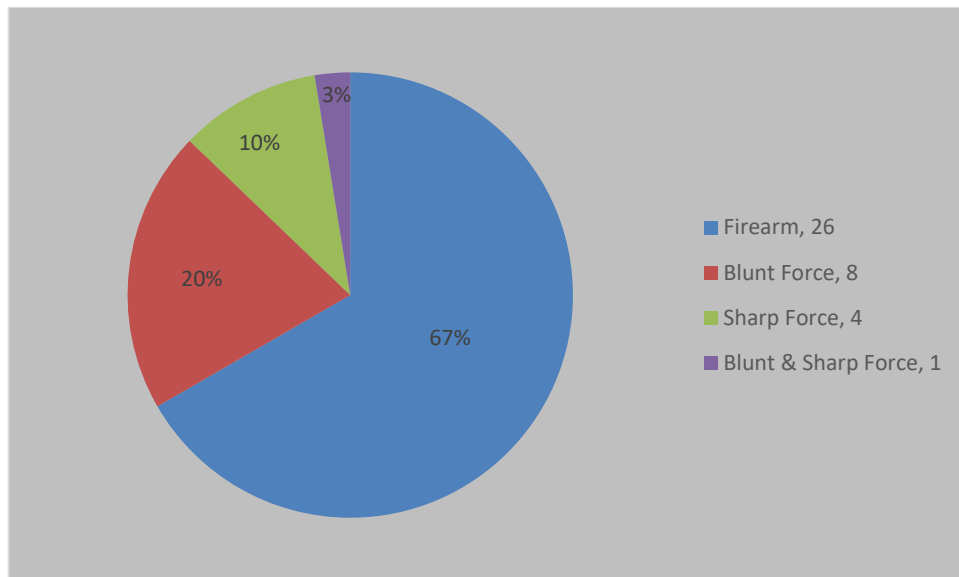
There was a 23.5% decrease in homicidal deaths from 2023 (51) to 2024 (39). The homicide rate for El Paso County in 2024 was 4.4 per 100,000 people (compared to 5.7 US National Average [STATISTA, 2023]).

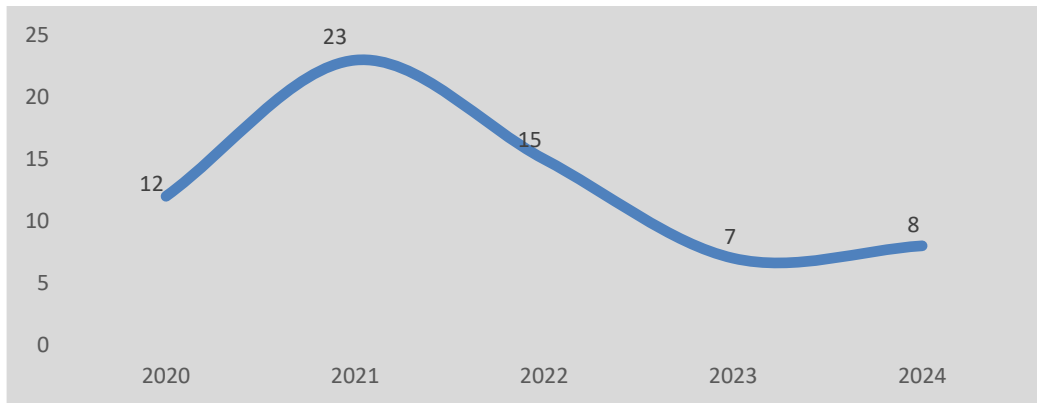
2024 HOMICIDES (39) – SEX AND AGE GROUP



The majority (92%) of homicide victims were male.

2024 HOMICIDES (39) – MODE OF INFLECTION

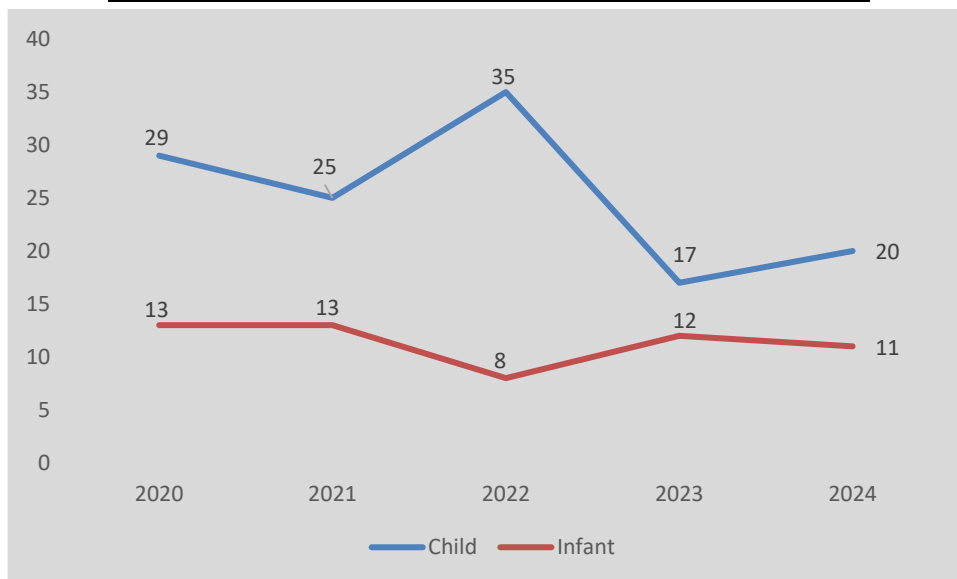


UNDETERMINED**UNDETERMINED MANNER OF DEATH: 2020 - 2024**

The vast majority (7/8 [87.5%]) of undetermined cases in 2024 were unidentified partial skeletal remains.

CHILD FATALITY

In 2024, there were 31 deaths of individuals 17 years or age or younger, which included the deaths of 11 infants (a baby in the first year of life) and 20 children (individual between the ages of 1 and 17).

INFANT (AGE <1) & CHILD (AGE 1-17) DEATHS: 2020 - 2024

2024 INFANT & AND CHILD DEATHS (31) – SUMMARY TABLE

	MANNER OF DEATH					TOTAL (%)
	NATURAL	ACCIDENT	SUICIDE	HOMICIDE	UNDETERMINED	
Full Autopsy (%)	6 (100%)	20 (95%)	2 (66%)	1 (100%)	0	29 (93%)
External Exam (%)	-	1 (5%)	1 (33%)	-	0	2 (7%)
TOTAL (34)	6	21	3	1	0	31 (100%)

2024 INFANT & CHILD DEATHS (31) – MANNER OF DEATH

	M A N N E R O F D E A T H									
	NATURAL		ACCIDENT		HOMICIDE		SUICIDE		UNDETERMINED	
Age Group	♂	♀	♂	♀	♂	♀	♂	♀	♂	♀
<1	2	2	3	3	1	-			-	-
1-3	-	1	3	1	-	-	-	-	-	-
4-6	-	-	-	-	-	-	-	-	-	-
7-10	-	-	-	-	-	-	-	-	-	-
11-14	-	1	2	-	-	-	-	-	-	-
15-17	-	-	6	3	-	-	2	1	-	-
TOTAL	2	4	14	7	1	0	2	1	0	0
♂ : 19	6		21		1		3		0	
♀ : 12										

♂=male; ♀=female

2024 CHILD (AGE 1-17) DEATHS (20) – CAUSE OF DEATH

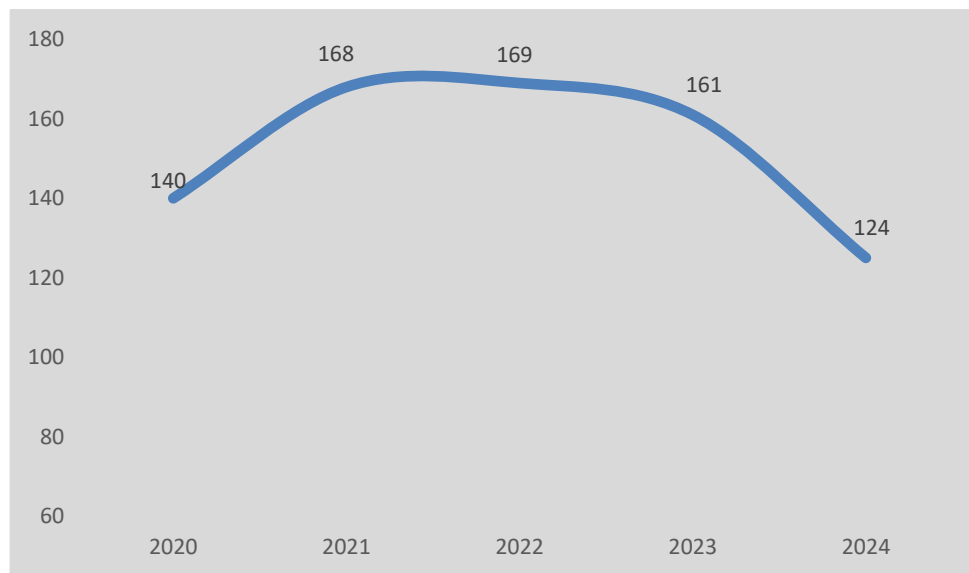
Blunt Force Injury	10
Drowning	4
Blunt Force Injury	1
Drug Toxicity	1
Gunshot Wound	1
Intestinal Obstruction	1
Epilepsy	1
Positional Asphyxia	1
TOTAL	20

2024 INFANT (<1Y) DEATHS (11) – CAUSE OF DEATH

Asphyxia – Suffocation	5
Overlay	1
Myocarditis	1
Necrotizing Enterocolitis	1
Viral Pneumonia	1
Blunt Force Injury	1
Congenital Cardiovascular Anomaly	1
TOTAL	11

CHILD FATALITY – SUMMARY

Childhood deaths represented 2.7% of all the exam cases investigated by the EPOME in 2024. The most common manner of death among children was accident (67%).

TOXICOLOGY-RELATED DEATHS**TOXICOLOGY-RELATED DEATHS: 2020 - 2024**

There was a 23% decrease in toxicology-related deaths from 2023 (161) to 2024 (124).

2024 TOXICOLOGY-RELATED DEATHS (125) – SUMMARY

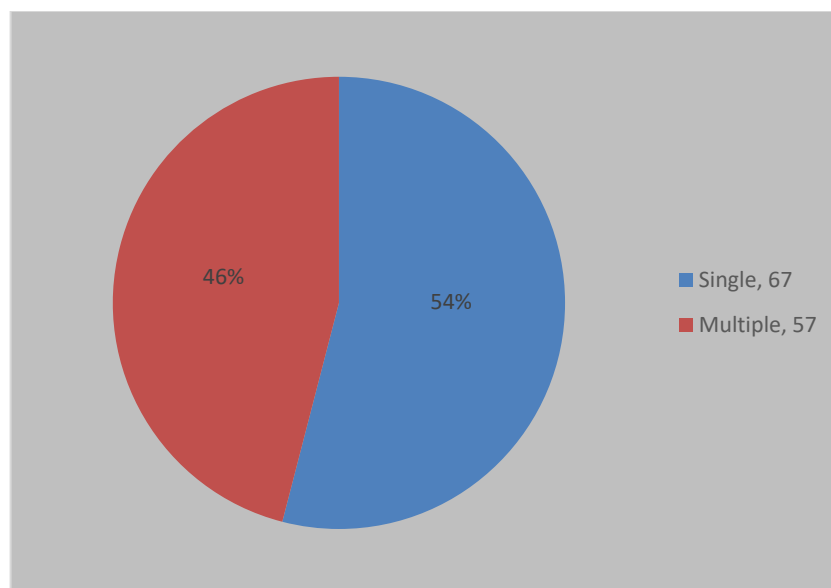
	M A N N E R O F D E A T H			
	ACCIDENT		SUICIDE	
Age Group	♂	♀	♂	♀
11-18	-	-	-	1
19-25	2	1	-	2
26-35	21	7	-	1
36-45	26	8	-	-
46-55	21	4	-	-
56-65	21	1	-	-
66-75	7	1	-	-
TOTAL	98	22	0	4
♂: 98	120		4	
♀: 26				

TOTAL: 124

♂=male ♀=female

Toxicology-related deaths cannot be natural in manner. Accidents comprised 96.8% of all toxicology-related deaths. Over half (52%) of the decedents who succumbed to drug toxicity were between the ages of 26 and 44. Regarding accidental toxicology-related deaths, the male-to-female ratio is 3.8:1.

2024 TOXICOLOGY-RELATED DEATHS (124) – Single vs. Multiple Drugs



2024 SINGLE DRUG-RELATED DEATHS (67) – Drug Involved

Cocaine	24
Methamphetamine	21
Fentanyl	9
Ethanol	2

Eleven drugs/substances were involved in one (1) case each: Amphetamine, bupropion, fluoxetine, heroin, hydrocodone, hydrogen sulfide, isopropanol, ketamine, methadone, para-fluorofentanyl, and volatiles.

2024 MULTIPLE DRUG-RELATED DEATHS (57) –Most Frequently Involved Drugs*

Fentanyl	39
Methamphetamine	31
Cocaine	17
Alprazolam	10
Ethanol	10
Morphine	7
Heroin	6
Oxycodone	5
Methadone	5

*only drugs involved in ≥5 cases are mentioned

2024 TOXICOLOGY-RELATED DEATHS – Multiple-Drug-Related Deaths (57): Drugs Involved

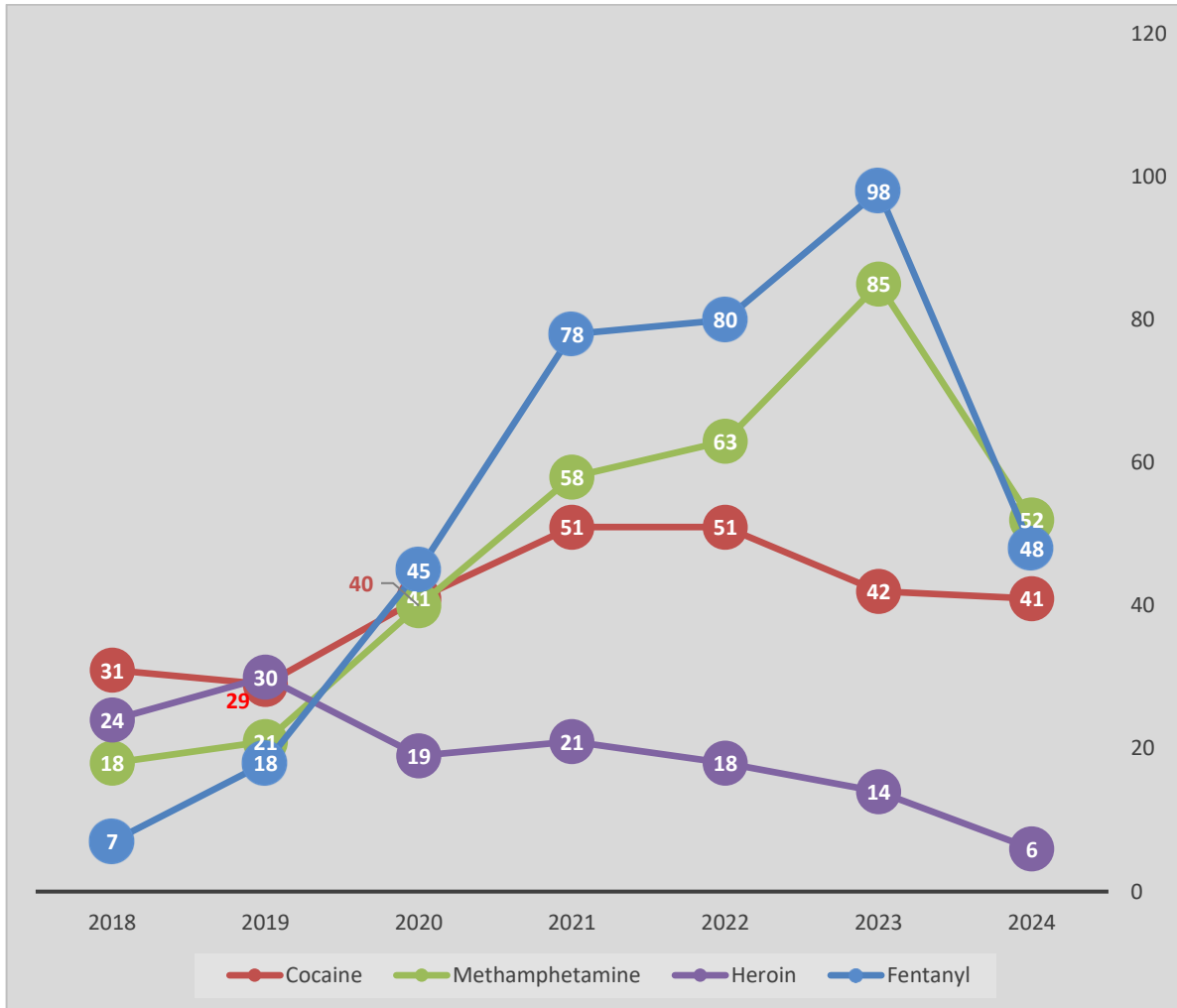
MANNER	Number of Drugs				
	2	3	4	5	≥6
SUICIDE					
1		21,41,94			
2	28,31				
3		28,31,34			
ACCIDENT					
1				3,37,40,67,75	
2	40,67				
3		27,40,84			
4	40,67				
5		23,45,67			
6		23,40,45			
7			23,29,40,67		
8			4,40,60,67		
9	40,67				
10			4,11,23,40		
11	40,67				
12			23,40,67,75		
13		23,40,67			

MANNER	Number of Drugs				
	2	3	4	5	≥6
ACCIDENT					
14	40,67				
15	37,40				
16	23,67				
17			3,4,40,45		
18			3,23,40,45		
19			4,7,20,40		
20	40,75				
21		29,40,67			
22				4,27,40,82,94	
23		23,66,75			
24	27,40				
25				4,20,40,82,94	
26		23,66,75			
27	23,67				
28	27,40		4,20,40,67		
29	23,37				
30		23,37,40			
31		66,67,82			
32		23,40,67			
33		66,67,82			
34		24,49,75			
35	23,37				
36	40,67				
37				4,6,31,46,103	
38		3,40,67			
39	40,67				
40	28,31				
41	40,67				
42		40,61,67			
43				20,24,46,73,94	
44	37,40				
45			24,40,67,75		
46		23,37,67,			
47	40,67				
48		45,66,67			
49				4,23,45,66,67	
50		37,40,67			
51				25,40,67,75,103	
52			4,29,37,82		
53	37,40				
54	23,67				

2024 TOXICOLOGY-RELATED DEATHS – Multiple-Drug-Related Deaths: Medication/Drug Key

Acetaminophen	1	Ethylene Glycol	38	Morphine	75
Acetone	2	Etizolam	39	Naproxen	76
Acetyl Fentanyl	3	Fentanyl	40	Nordiazepam	77
Alprazolam	4	Fluoxetine	41	Olanzapine	78
Amitriptyline	5	Fluvoxamine	42	Opiates (NOS)	79
Amlodipine	6	Gabapentin	43	Oxazepam	80
Amphetamine	7	Haloperidol	44	Oxcarbazepine	81
Aripiprazole	8	Heroin	45	Oxycodone	82
Bath Salts	9	Hydrocodone	46	Oxymorphone	83
Benzodiazepine (NOS)	10	Hydroxychloroquine	47	Para-fluoro-fentanyl	84
Buprenorphine	11	Hydrogen Sulfide	48	Paroxetine	85
Butalbital	12	Hydromorphone	49	Pentobarbital	86
Bupropion	13	Hydroxyzine	50	Perphenazine	87
Buspirone	14	Inhalants (NOS)	51	Phenobarbital	88
Carisoprodol	15	Insulin	52	Phentermine	89
Chlordiazepoxide	16	Isopropanol	53	Phenylpropanolamine	90
Chlorphenamine	17	Ketamine	54	Pregabalin	91
Chlorpromazine	18	Lacosamide	55	Promethazine	92
Citalopram	19	Lamotrigine	56	Pseudoephedrine	93
Clonazepam	20	Levamisole	57	Quetiapine	94
Clonidine	21	Levetiracetam	58	Risperidone	95
Clozapine	22	Loperamide	59	Salicylates	96
Cocaine	23	Lorazepam	60	Sertraline	97
Codeine	24	MDMA	61	Synth. Cannabinoid	98
Cyclobenzaprine	25	Meclizine	62	Temazepam	99
Desipramine	26	Meperidene	63	Tetrafluoroethane	100
Despropionyl Fentanyl	27	Metaxolone	64	Topiramate	101
Dextromethorphan	28	Metformin	65	Tramadol	102
Diazepam	29	Methadone	66	Trazodone	103
Difluoroethane	30	Methamphetamine	67	Venlafaxine	104
Diphenhydramine	31	Methane	68	Verapamil	105
Donepezil	32	Methanol	69	Volatiles	106
Doxepine	33	Methylphenidate	70	Ziprasidone	107
Doxylamine	34	Metoprolol	71	Zolpidem	108
Duloxetine	35	Midazolam	72	Zopiclone	109
Ethane	36	Mirtazapine	73		
Ethanol	37	Mitragynine	74		

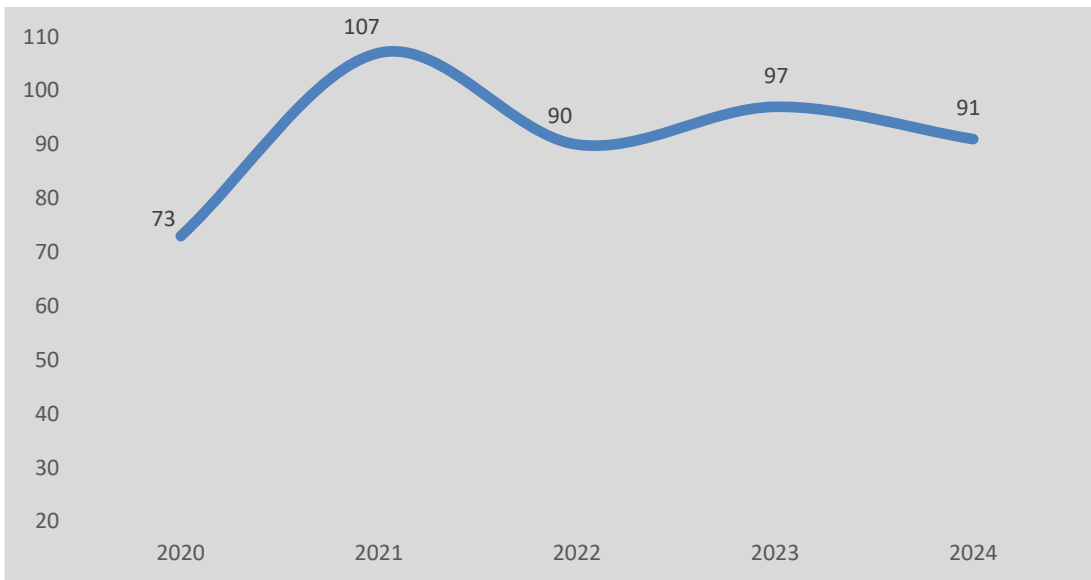
TOXICOLOGY-RELATED DEATHS – 2018-2024 Trends



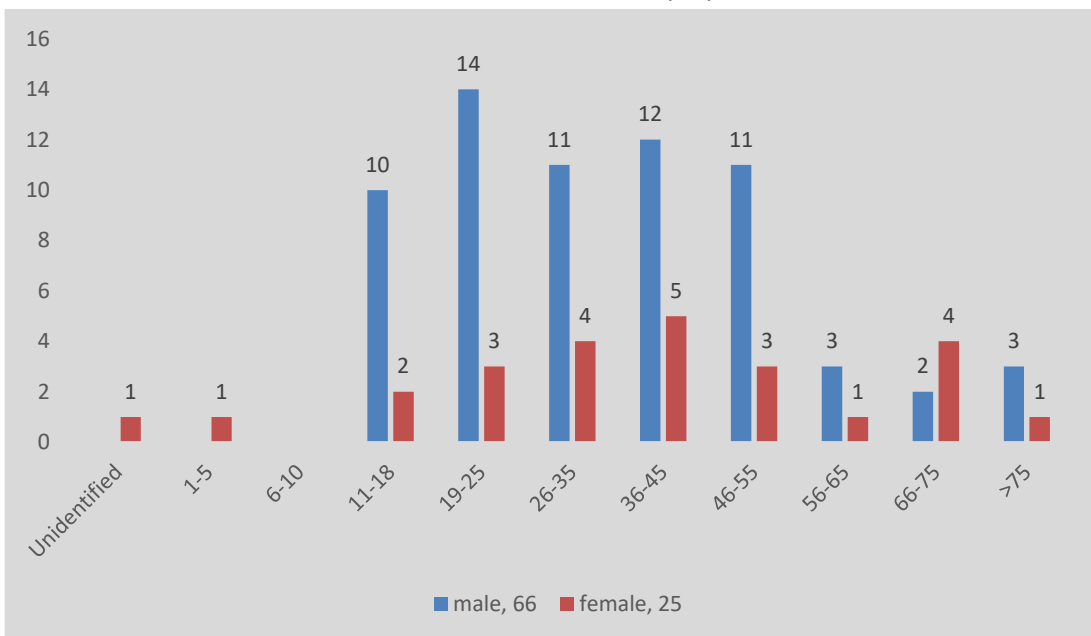
From 2023 to 2024, fentanyl, methamphetamine, and heroin-related deaths decreased significantly (51%, 38%, and 57% respectively).

MOTOR VEHICLE RELATED DEATHS

MOTOR VEHICLE RELATED DEATHS: 2020 - 2024



2024 MOTOR VEHICLE RELATED DEATHS (91) – SUMMARY TABLE



There were 91 motor vehicle related fatalities in 2024. Eighty six cases (94.5%) were accidental in manner; there were 5 (5.5%) suicides. Males comprised 72.5% of all motor vehicle related deaths in 2024.

2024 MOTOR VEHICLE RELATED DEATHS (91) – STATUS OF DECEDENT

Driver	46
Pedestrian	30
Passenger	15
TOTAL	91

Moto vehicle fatalities include 3 all-terrain vehicle (ATV) incidents and 17 motorcycle incidents. Railroad-related cases were excluded (two cases in 2024).

MISCELLANEOUS DATA - EPOME**FORENSIC CONSULTATIONS**

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

YEAR	Neuropathology	Anthropology
2020	17	1
2020	18	0
2021	14	5
2022	12	9
2024	9	2

ORGAN AND TISSUE DONATION

The EPOME allows an organ procurement organization (OPO) to approach families who wish to donate tissues from the deceased. These donations include skin, musculoskeletal tissue, and cardiovascular tissue (heart valves). Similarly, the EPOME also works with another OPO, fostering in-hospital postmortem organ donation. In 2024, there were **41** donors, who impacted the lives of local patients in several El Paso Hospitals, including: University Medical Center, Del Sol Medical Center, El Paso Children's Hospital, Sierra Providence East, and Las Palmas Medical Center by donating **175** organs/tissue. Furthermore, the EPOME started working in coordination with the Southwest Brain Bank (SWBB), a brain tissue repository for research in mental illness, for altruistic postmortem donation. In 2024, there were **11** generous families that donated tissue for this laudable endeavor.

CREMATION AUTHORIZATIONS

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

YEAR	Cremations
2020	5020
2021	5026
2022	4776
2023	4596
2024	4490

UNIDENTIFIED BODIES

The EPOME interacts with law enforcement agencies to positively identify individuals. A commonly used technique for identification is fingerprint comparison. Other scientific methods of identification (ID) include radiograph comparison (dental or body), medical devices, and DNA extraction. Over the past 5 years, 837 decedents have been positively identified using fingerprints.

YEAR	Fingerprint ID
2020	104
2021	139
2022	191
2023	206
2024	197

UNCLAIMED BODIES

El Paso County General Assistance (GA) Program provides financial aid to help families who have lost a loved one pay for the funeral and cremation of the individual's remains. In 2024, the OME referred **51** cases to the GA program.

MEDICAL EXAMINER PERFORMANCE AUDIT

TURNAROUND TIME FOR FINAL AUTOPSY REPORT

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

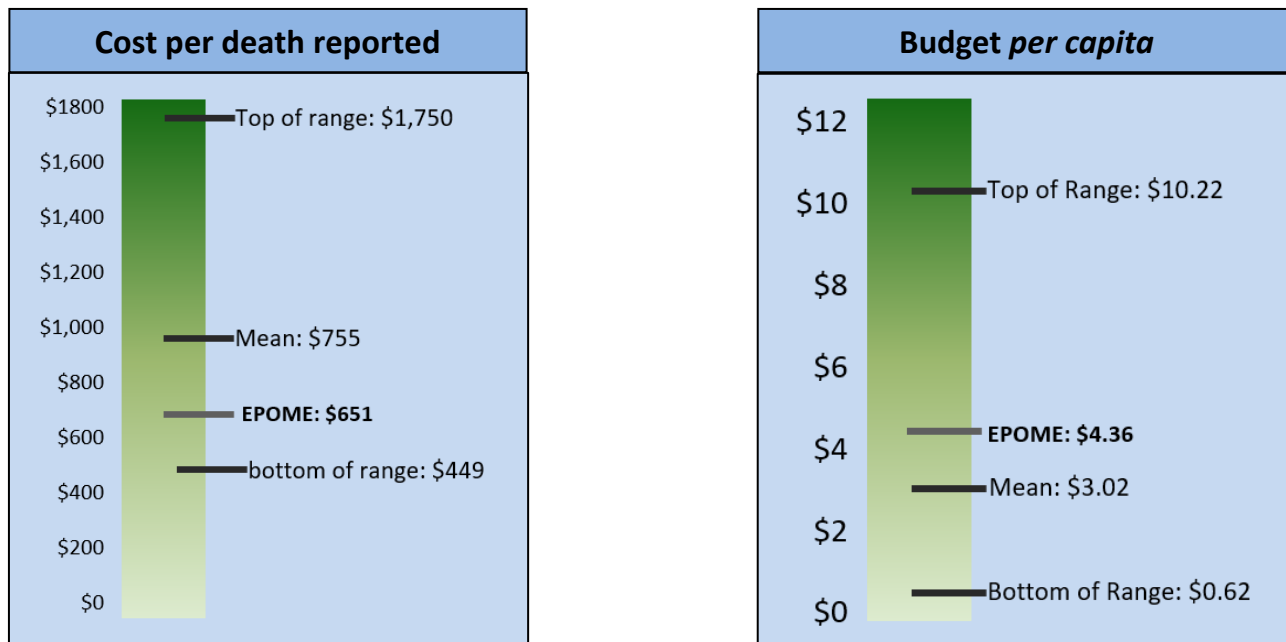
2024 EPOME EXAM CASES (660) – TIME FROM AUTOPSY TO FINAL WRITTEN AUTOPSY REPORT

Time for final report	No. of cases (%)
Within 60 days	633 (95.9)
Within 90 days	648 (98.1)
>90 days	12 (1.8)

THE COST OF MEDICOLEGAL DEATH INVESTIGATION

A rule-of-thumb figure for providing quality medicolegal death investigation has been said to be about \$3 per person per year, according to a study that included nearly 60 NAME-accredited offices (*J Forensic Sci*, September 2013, Vol. 58, No. 5). In this study, the **budget per capita** (total budget/total number of inhabitants of jurisdiction) had a mean of \$3.02, although there was a very wide range (\$0.62–\$10.22). Another study conducted in the State of Colorado (available at www.denvergov.org/auditor) calculated the **cost per death reported** (total budget/total reported deaths) and found an average cost per death reported of \$808 (mean=\$755) for the NAME accredited medical examiner offices in their jurisdiction.

In 2024, the EPOME has a *cost per death reported* of **\$651** and a *budget per capita* of **\$4.36/year**.

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

GLOSSARY

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

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

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

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

Children – individuals 17 years of age and younger.

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

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

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

Infant - a child in the first year of life

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

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

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

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

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

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

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

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

Stillbirth – the death of a fetus after the 20th week of pregnancy. Also known as Intrauterine Fetal Demise (IUFD)

Stimulant: a class of drugs, including cocaine and oral amphetamines, whose principal action is the stimulation of the central nervous system.

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

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

Suicide – death results from the purposeful attempt to hurt oneself.

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

2024 El Paso County Office of the Medical Examiner Annual Report

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Created by:

Mario A Rascon