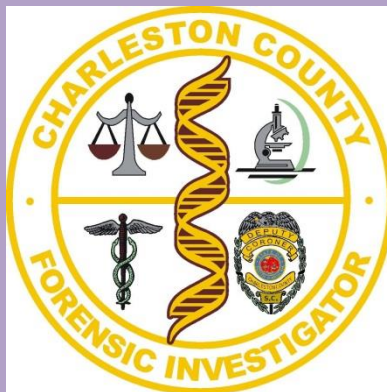


Charleston County Coroner's Office

2013 Annual Report

Coroner Rae H. Wooten



**Charleston County
South Carolina**

Charleston County Coroner's Office – 2013 Annual Report

Rae H. Wooten, Coroner

Chief Deputy Coroner
Bobbi Jo O'Neal

Deputy Coroner
Dottie Lindsay
Kelly Myers
Brittney Martin
Kimberly Rhoton
Cindy Bordallo



OFFICE OF THE CORONER

4050 Bridgeview Drive
Suite 500, Perimeter Center
North Charleston, SC 29405

Phone: (843) 746-4030
Fax: (843) 746-4033

To the Citizens of Charleston County,

I am pleased to share the 2013 Annual Report for the Charleston County Coroner's Office. The goal of providing this information to the public is to increase public awareness of the role of the Coroner's Office and to focus attention on the causes and manners of death in our county in an effort to reduce the number of preventable deaths to the extent possible.

The information contained in this annual report has been compiled from records held by the Charleston County Coroner's Office to include autopsy reports, police reports, death certificates, cremation permits and motor vehicle reports, among others. Hopefully you will find this up-to-date and complete information to be in a format that is accurate and easy to read.

I hope these statistics will be of value to you. If you have any questions or need any further information, please feel free to contact the Charleston County Coroner's Office.

As always, thank you for your support,

Rae H. Wooten
Coroner

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MISSION STATEMENT

To conduct medicolegal death investigations in an independent, compassionate and professional manner serving as a representative of the decedents and survivors to facilitate a thorough understanding of the circumstances surrounding a death.

DESCRIPTION, PURPOSE AND FUNCTION OF THE CHARLESTON COUNTY CORONER'S OFFICE

The Coroner, Rae H. Wooten, RN, BSN, F-ABMDI, is an elected official who oversees a separate and independent law enforcement agency which serves the residents of Charleston County by conducting parallel investigations of any sudden and unexpected death, or those deaths that occur under violent or suspicious circumstances. While the Coroner is elected, the Coroner's Office operates as an entity of Charleston County Government and is funded by tax revenue provided by the citizens of Charleston County. An annual budget is proposed and submitted to the Charleston County Council for approval. The approved budget for the specified fiscal year is administered through the finance department of Charleston County Government.



Coroner Rae H. Wooten

Rae H. Wooten, RN, BSN, F-ABMDI, was born, raised and educated in Columbia, South Carolina before moving to the Charleston area in 1973. She graduated from the University of South Carolina with a Bachelor of Science in Nursing and subsequently worked as a registered nurse in various settings before joining the Charleston County Coroner's Office in April 1995. She became Chief Deputy Coroner in July 1996 and continued in that position until September 1, 2006 when she was appointed Coroner by the Governor. She was elected as Coroner in November, 2008 and was re-elected in November, 2012. She was awarded "Coroner of the Year" for 2012 by the South Carolina Coroner's Association.

The South Carolina Code of Laws mandates that the Coroner investigate any death that is unexpected, unexplained, suspicious, violent or in which the cause and/or

Charleston County Coroner's Office – 2013 Annual Report

manner of death is unknown. The Coroner is also responsible for identifying decedents and making notification to next-of-kin.

The Coroner's Office seeks to find answers to the questions which are important to the decedent's family, involved law enforcement agencies, insurance companies, the judicial system, Consumer Product Safety Commission, the South Carolina Department of Health and Environmental Control (DHEC), and the federal Occupational Safety and Health Administration (OSHA), to name a few. The pursuit of civil or criminal proceedings is in part determined by the ability of the Coroner's Office to determine the cause and manner of death. This unique makeup of job responsibilities means the Coroner's Office performs both a public service and a law enforcement role that requires the Coroner to scrutinize every death within her jurisdiction to determine the events that led to that death. The Coroner may hold a formal inquest to determine the manner of death.

The Coroner's Office also functions as an advocate for families to insure they are notified of the death and the circumstances surrounding the death known at that time. As more information is derived from autopsy and/or further investigation, the Coroner's Office staff updates family members and also assists them in contacting other agencies that can help them through the grieving process. This Office works whenever possible with organizations such as Lifepoint to facilitate family or decedent's wishes regarding organ and tissue donations.

Some of the investigative services and processes performed by the Charleston County Coroner's Office include: Medicolegal death investigations, child and infant death investigation and reconstruction, ordering of autopsies, ordering of forensic odontology examination, forensic anthropologic examination, scene and decedent photography, inked fingerprint collection, ordering of fingerprint comparison, forensic entomology sample collection, overseeing of forensic sexual assault trace evidence collection, overseeing collection of toxicology samples and/or DNA samples, and bloodstain pattern analysis. Crime scene investigations include but are not limited to: homicides, suicides, wrongful deaths, industrial and residential accidents, motor vehicle accidents, deaths due to abuse/neglect/negligence, terrorist acts, death due to malpractice, mass fatalities, arson and fire deaths. The investigations and rulings of the Coroner's Office concerning criminal acts or those that effect the public health and safety, are the foundation for follow up actions by other investigative agencies.

The Fiscal Year 2013 (July 1, 2012 – June 30, 2013) budget for the Charleston County Coroner's Office was \$1,181,562. This was .2% of the total approved Fiscal Year 2013 Charleston County operating budget of \$428,273,624. In 2013, the Coroner's Office also saw the continuation of a federal grant funded part-time paralegal and a full-time evidence custodian. The Fiscal Year 2014 budget for the Coroner's Office was \$1,211,926. This covers the time period of July 1, 2013 – June 30, 2014.

SIZE AND POLULATION OF CHARLESTON COUNTY

The geographic area served by the Charleston County Coroner's Office includes all of Charleston County which is 1,358 square miles, and is located on the southeastern coast of South Carolina. Charleston County has approximately 100 miles of Atlantic Ocean coastline and is the third largest county in South Carolina in terms of population. The county has a unique blend of urban areas, beaches, rivers and two federally protected forest and wilderness areas along with rural countryside. It includes the cities and towns of Charleston, North Charleston, Mt. Pleasant, Isle of Palms, Sullivan's Island, James Island, and Folly Beach to name a few.

The population of Charleston County was estimated to be 365,162 in 2012. In the spring and summer months, the population in the county increases significantly due to the tourist influx to historic sites and beaches. During routine business hours, the population also increases by about 1/3rd due to the location of many jobs and hospitals within the county.



From left to right: Deputy Coroner Brittney Martin, Deputy Coroner Kelly Kraus and Coroner Wooten en route to a scene in the marsh.

ORGANIZATIONAL CHART

Charleston County Coroner's Office

Coroner

Rae H. Wooten, RN, BSN, F-ABMDI

Chief Deputy

Bobbi Jo O'Neal, RN, BSN, F-ABMDI

Deputy Coroner II

Dottie Lindsay, F-ABMDI

Deputy Coroner

Kelly T. Kraus, BS, D-ABMDI

Brittney W. Martin, BS, D-ABMDI

Kimberly L. Rhoton, ANP-BC, RN, D-ABMDI

Jill Farman

Administrative Services Coordinator

Teresa Vickers

Case Manager

Penny Craven, LPN

Paralegal (grant funded)

Joe Crawford, M. Ed., MSCJ

Administrative Assistant (grant funded)

Kathleen G. Roberts

Evidence Custodian (grant funded)

Nancy A. Ritter-Peacock

Consultants:

Forensic Anthropologist

Suzanne Abel, PhD

Forensic Odontologist

Dr. Wolf D. Bueschgen, DMD

INVESTIGATION and DISPOSITION OF CASES

In 2013, there were 4,376 deaths in Charleston County according to South Carolina's Department of Health and Environmental Control-Division of Vital Records. The Coroner's Office had involvement in 1,708 deaths which was 39% of the total deaths in Charleston County. Regarding those deaths, 1,132 were classified as "Natural" deaths; 159 were classified as "Accident"; 43 were classified as "Suicide"; 34 were classified as "Homicide"; and 14 were classified with an "Undetermined" manner. In addition, there were 326 "Limited Investigations".

In addition to these deaths, the Coroner's Office had involvement to various degrees with 1,878 requests for services which included: 3 cases of recovered non-human bones; 1,843 requests for a cremation permit which requires a deputy to review; and 32 requests to make a death notification to next-of-kin by other jurisdictions.

The following description is a general overview of the processes during a jurisdiction assumed, full investigation and the follow-up processes.

Upon arrival at a death scene, the Coroner or a deputy coroner will speak with first responders, law enforcement officers and any witnesses to become familiar with the circumstances surrounding the incident and any safety considerations prior to entering the immediate scene. The Coroner or the deputy will take notes and utilize photographs and/or video to further document the scene. They also collect and preserve all evidence and any personal property on or around the body/remains. In some crime scene situations, the Coroner or deputy will coordinate with law enforcement officers regarding the collection of evidence. Any evidence and/or personal property collected by the Coroner or deputy is secured and documented until it can be processed or appropriately turned over to legal next-of-kin.

The Coroner or deputy makes every effort to identify the decedent utilizing at least two of the following methods: government issued photo ID of the decedent that matches decedent's physical characteristics/features; fingerprint analysis; DNA analysis; coordination of odontology examination (dental X-rays); coordination of forensic anthropology analysis (skeleton/bones); comparison of significant scars, marks and tattoos; birth defects and presence of prosthetics.

If the Coroner or deputy deems it necessary to conduct a post mortem examination (autopsy), they notify the contracted autopsy vendor, which is generally the Department of Pathology and Laboratory Medicine at the Medical University of South Carolina in Charleston. This office also notifies the interested law enforcement agency of the autopsy schedule. The collection and preservation of any and all evidence rendered from an autopsy is of utmost importance to the investigation.

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The Coroner or deputy makes every effort to identify, locate and notify the legal next of kin of the death in a timely manner and in person if possible. The Office also facilitates the release of the remains to the funeral home selected by the next of kin or facilitates county resources for cremation and burial for unclaimed decedents.

The Coroner's Office is responsible for obtaining and reviewing medical records related to both the present event and all past medical records if they might have some relationship to the death. This office documents all the information gathered through the investigation in a written report and collects all documents related to the investigation in a case file. Upon request, the Coroner's Office provides copies of their investigative case file to the Solicitor's Office, the Public Defender's Office and invested law enforcement agencies.

The Coroner's Office contracts the services of Drs. Suzanne Abel (forensic anthropologist) and Wolf Bueschgen (forensic odontologist) for analysis and processing of evidence in the form of skeletal or badly decomposed remains. The anthropologist and odontologist work together to provide the Charleston County Coroner's Office with biological profiles that assist the Coroner's Office with identifying individuals as well as possible indicators of cause and manner of death. They also provide timely, precise, and detailed reports that assist in furthering the investigation.

In approximately 19% percent of the deaths that were investigated (264 total), a full forensic autopsy was performed to aid in the determination of the cause and manner of death, to document disease, to identify injury patterns, and/or to recover evidence. Autopsy services consume approximately 22% of the Coroner's Office budget. The cases not autopsied were those in which the scene investigation, circumstances of death, medical documentation, interviews, social history, and/ or external examination of the body provided sufficient information for certifying the cause of death.

Specimens for toxicology testing, which may be helpful in determining the cause and manner of death, are collected at autopsy and submitted to a nationally accredited laboratory or the South Carolina Law Enforcement Division (SLED) crime lab for testing. Toxicology testing utilized approximately 6% of the Coroner's Office budget. Screening tests include alcohol, illicit drugs, commonly abused prescription and nonprescription drugs, and other substances as needed.

CAUSE and MANNER OF DEATH

The **Cause of Death** is the official determination of the disease or injury and the sequence of events responsible for the occurrence which leads to an individual's death.

The **Manner of Death** is the description used to classify the conditions that caused a death and the circumstances by which they occur. Manner of death is determined largely by means of the investigation. In South Carolina, there are five (5) manners of death, listed below.

NATURAL: Death caused by disease.

SUICIDE: Death as a result of a purposeful action to end one's life.

ACCIDENT: Death other than natural where there is no evidence of intent.

HOMICIDE: Death resulting from injuries inflicted by another person.

UNDETERMINED: Manner assigned when there is insufficient evidence, or conflicting/ equivocal information (especially about intent), to assign a specific manner.

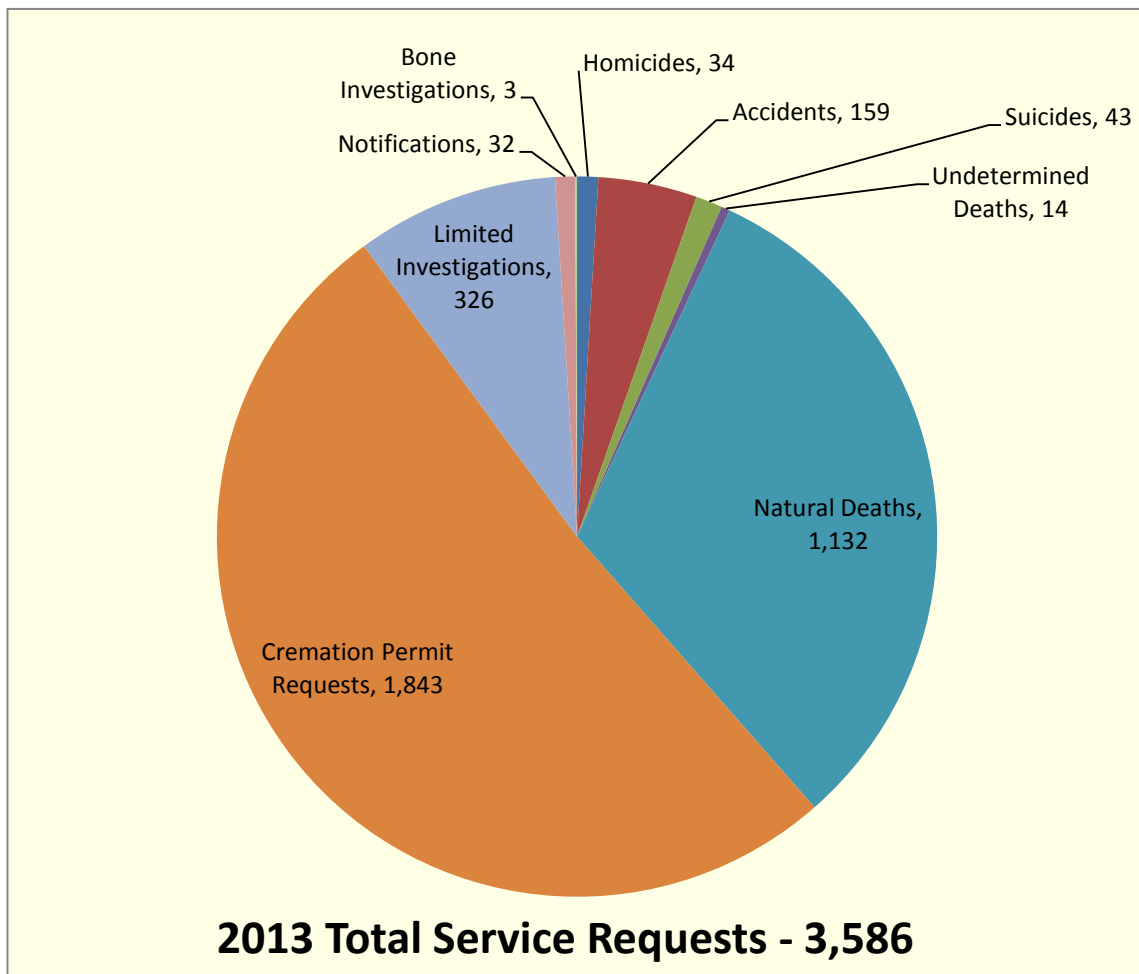


Chief Deputy Bobbi Jo O'Neal.

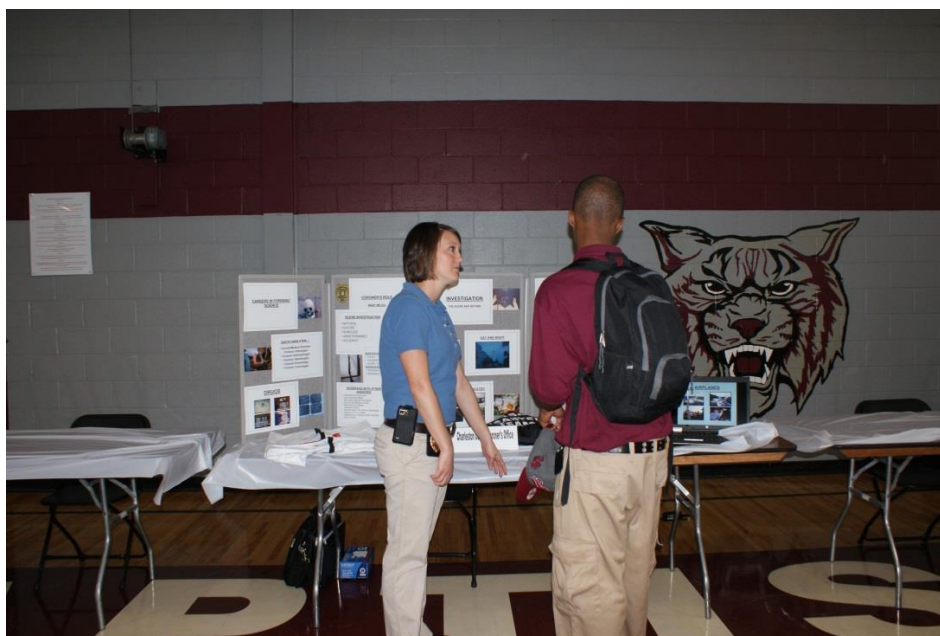
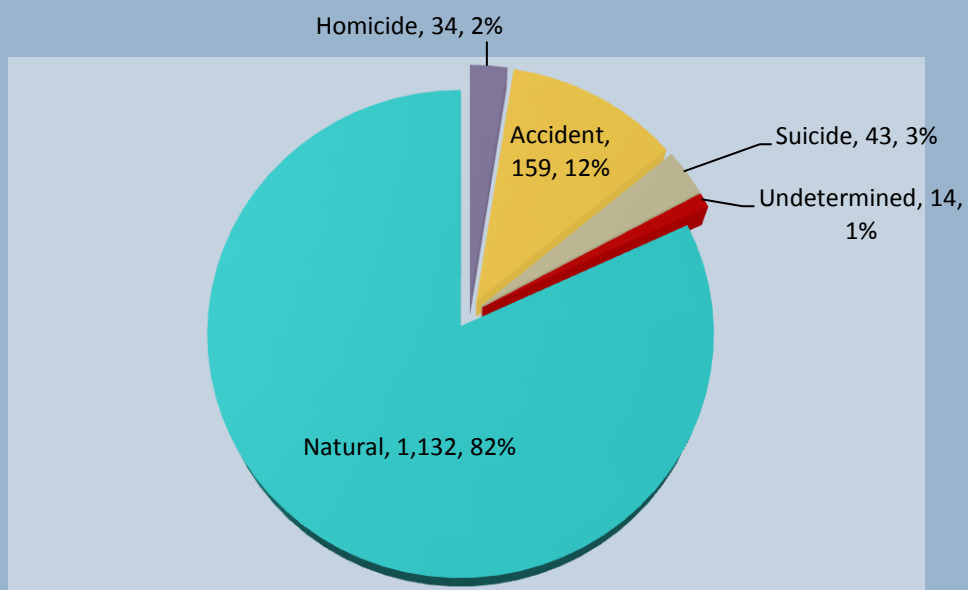
STATISTICS

The Charleston County Coroner's Office investigated 1,705 deaths during 2013. Regarding those deaths, 1,132 were classified as "Natural" deaths; 159 were classified as "Accident" (113 accident events and 46 accidental traffic collisions); 43 were classified as "Suicide"; 34 were classified as "Homicide"; and 14 were classified with an "Undetermined" manner. In addition, there were 326 "Limited Investigations".

In addition to these deaths, the Coroner's Office had involvement to various degrees with 1,878 requests for services which included: 3 cases of recovered non-human bones; 1,843 requests for cremation permits which requires a deputy to review; 32 requests to make notification to next-of-kin by other jurisdictions.



2013 Manner of Death



Deputy Coroner Kimberly Rhoton speaks with a student during a “Career Fair”.

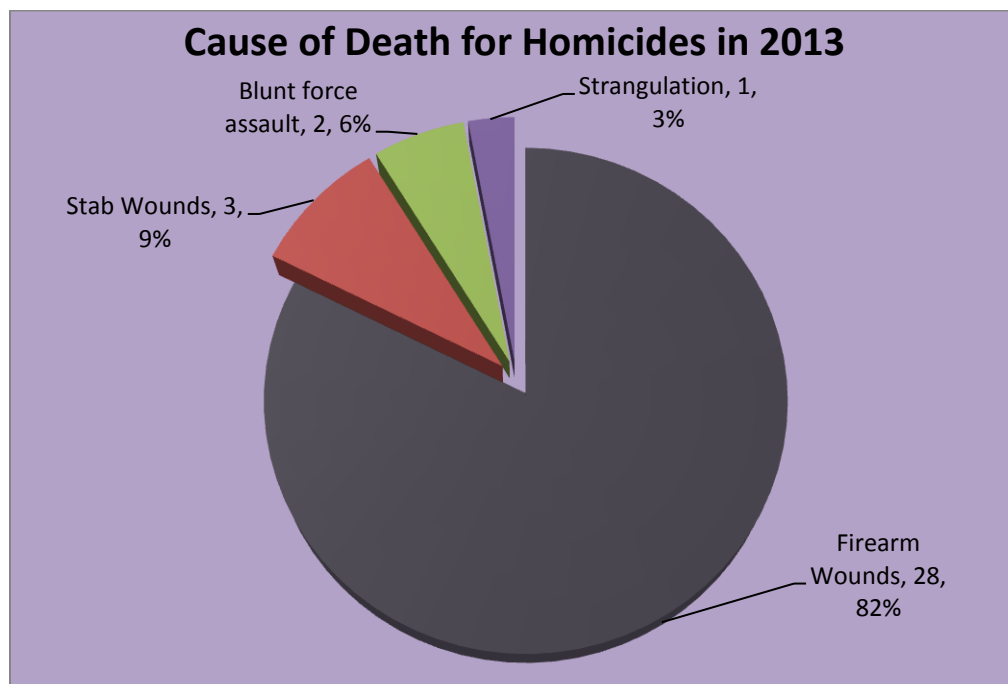
2013 HOMICIDE STATISTICS

The manner of death classified as a "Homicide" when it results from injuries inflicted by another person or inflicted on another by one's grossly reckless behavior. The Coroner's Office is not responsible for determining if a homicide was justified or not and classifies those deaths as "Homicides" in these statistics.

In addition, a death is classified as a "Homicide" regardless of the length of time between an incident causing injuries that results in death which can be attributed to those injuries. South Carolina Code of Laws section 16-3-5 states "A person who causes bodily injury which results in the death of the victim is not criminally responsible for the victim's death and must not be prosecuted for a homicide offense if at least three years intervene between the injury and the death of the victim." This three year window does not apply to the classification of manner of death as long as the death can be attributed to the injuries inflicted by another person or inflicted on another by one's grossly reckless behavior.

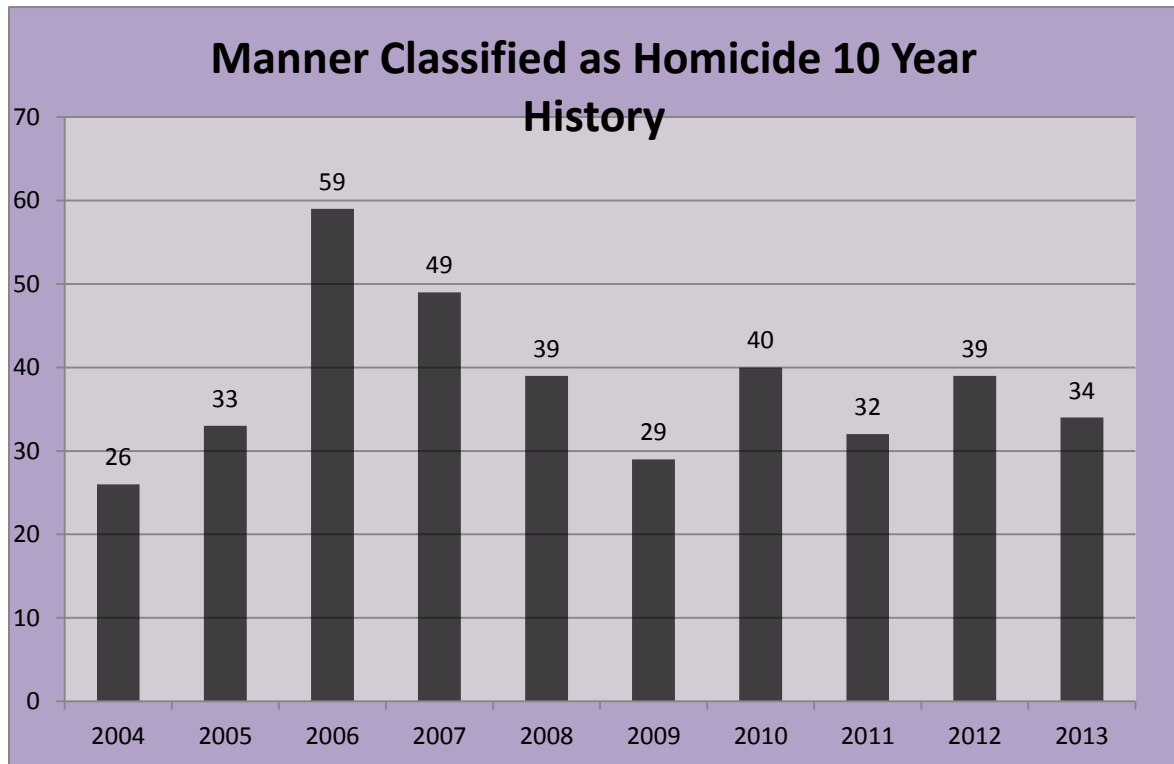
Vehicular incidents, such as those which occur in circumstances of reckless driving or driving under the influence, are NOT included in this category but are counted in the traffic collision statistics.

In 2013, there were 34 deaths classified with a manner of "Homicide" in Charleston County. Twenty-eight (28) were caused by firearm wounds (82%). Of the six remaining deaths, three (3) were caused by stabbing; one (1) was due to strangulation and two (2) were due to blunt force assault.



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A review of the number of deaths classified as "Homicide" in Charleston County over the past 10 years shows the average number per year is 38.



A breakdown for decedents with a manner of death classified as "Homicide" in 2013 by race, sex and age:

Race

Black: 39
White: 5
Hispanic: 0
Asian: 0

Sex

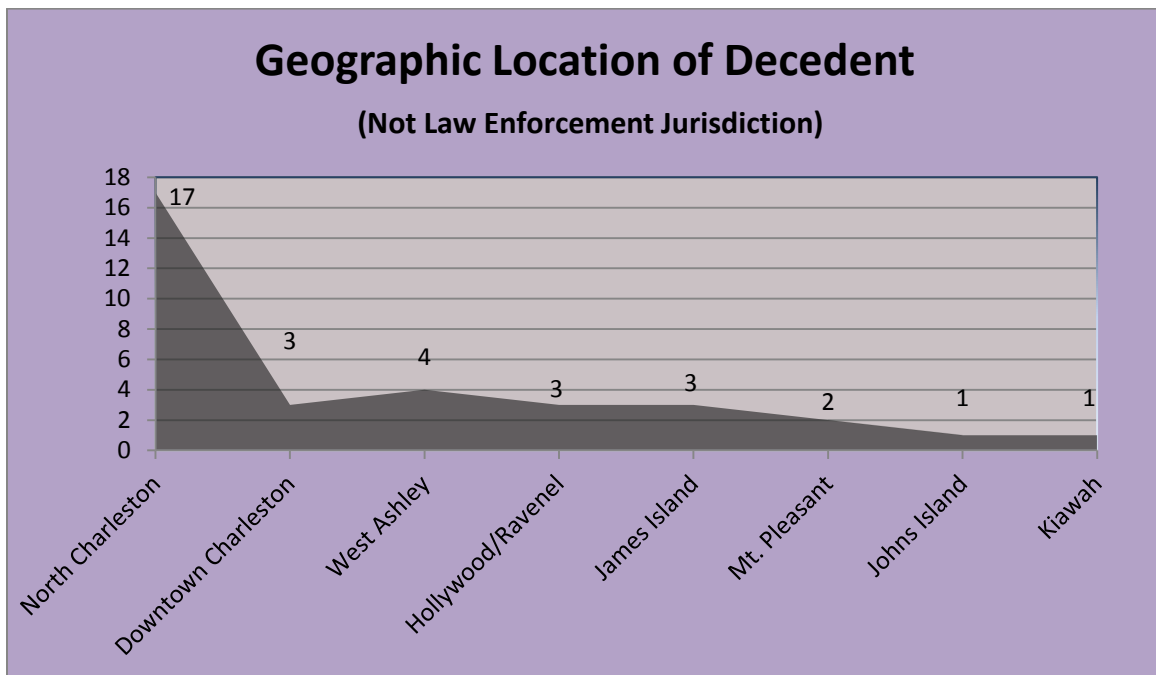
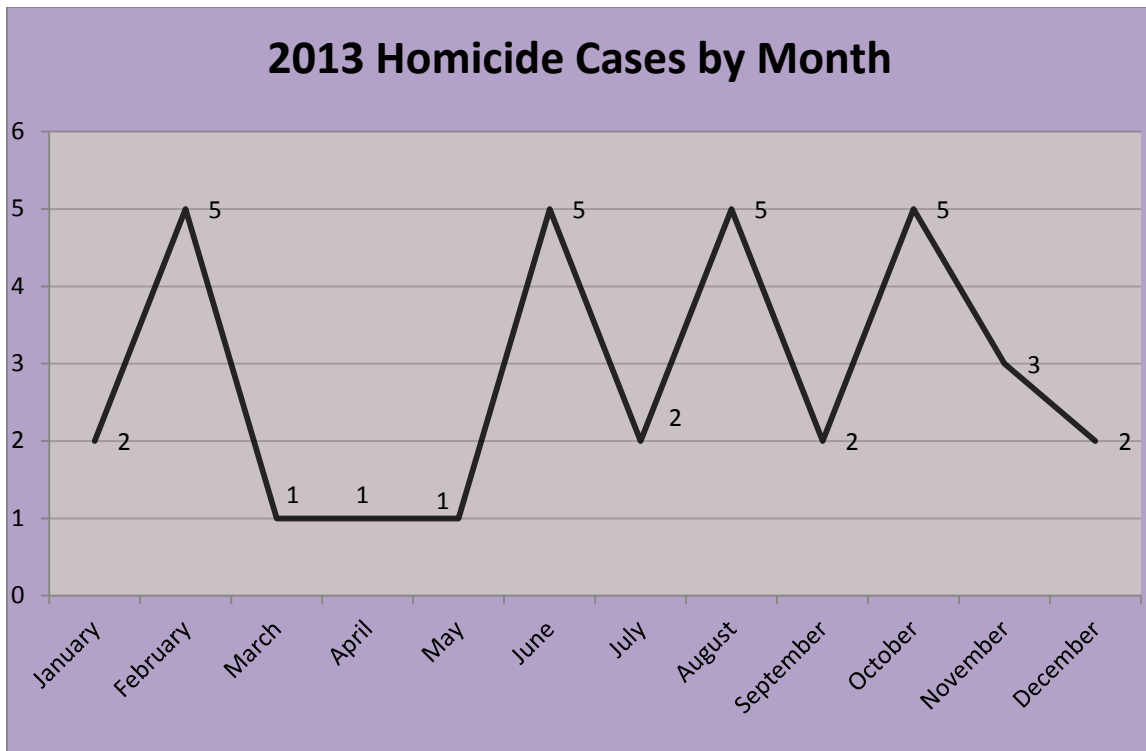
Male: 28
Female: 6

Age

Birth to 1 year: 0	20-30 years: 14
1-2 years: 1	31-40 years: 5
3-10 years: 0	41-50 years: 6
11-16 years: 0	51-60 years: 2
17-19 years: 4	61-70 years: 1
	71-80 years: 0
	81-89 years: 1

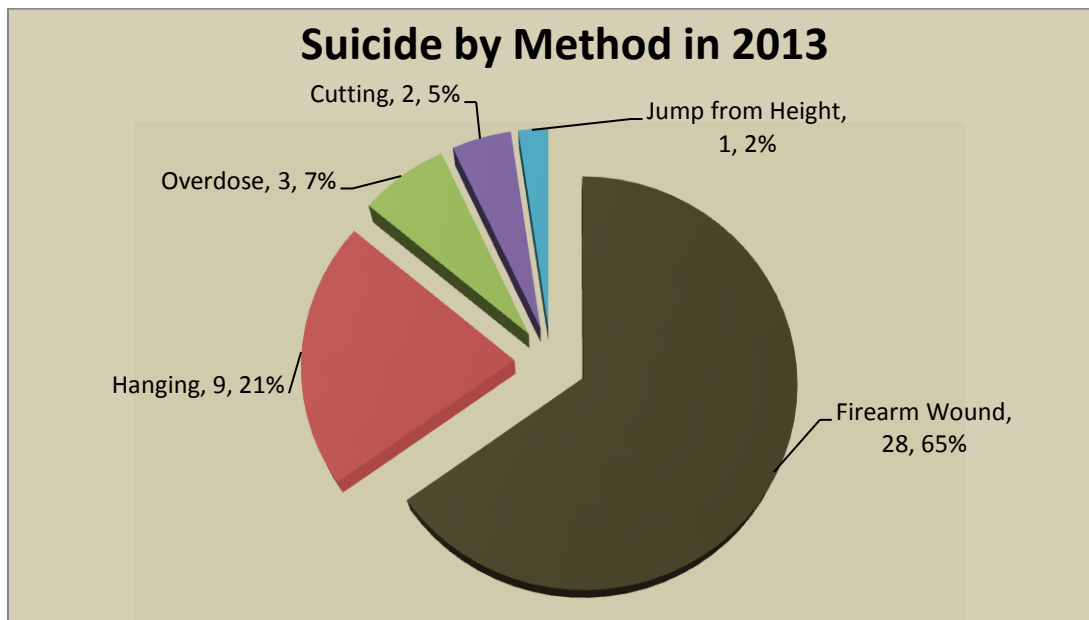
By Race and Sex

Black Male: 26	Black Female: 3
White Male: 2	White Female: 3
Hispanic Male: 0	Hispanic Female: 0
Asian Male: 0	Asian Female: 0

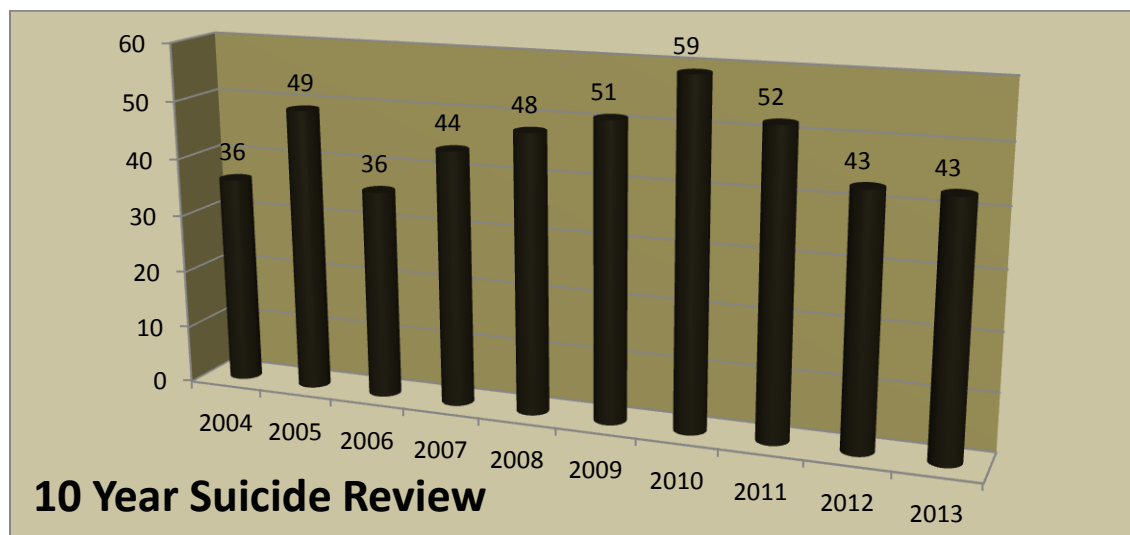


2013 Suicide Information

Suicide is death caused by intentional, self-inflicted injuries. In Charleston County during 2013 there were 43 deaths by suicide. The most prevalent method of suicide in 2013 was via firearm wound with a total of 28. There were nine (9) hangings, three (3) intentional overdoses, two (2) cases of cutting and one (1) cause was jumping from height.



A ten year review of the number of suicides in Charleston County shows an average of 46 per year.



Charleston County Coroner's Office – 2013 Annual Report

A breakdown for suicides in 2013 by race, sex and age:

Race

Black: 3
White: 38
Hispanic: 2

Sex

Male: 34
Female: 9

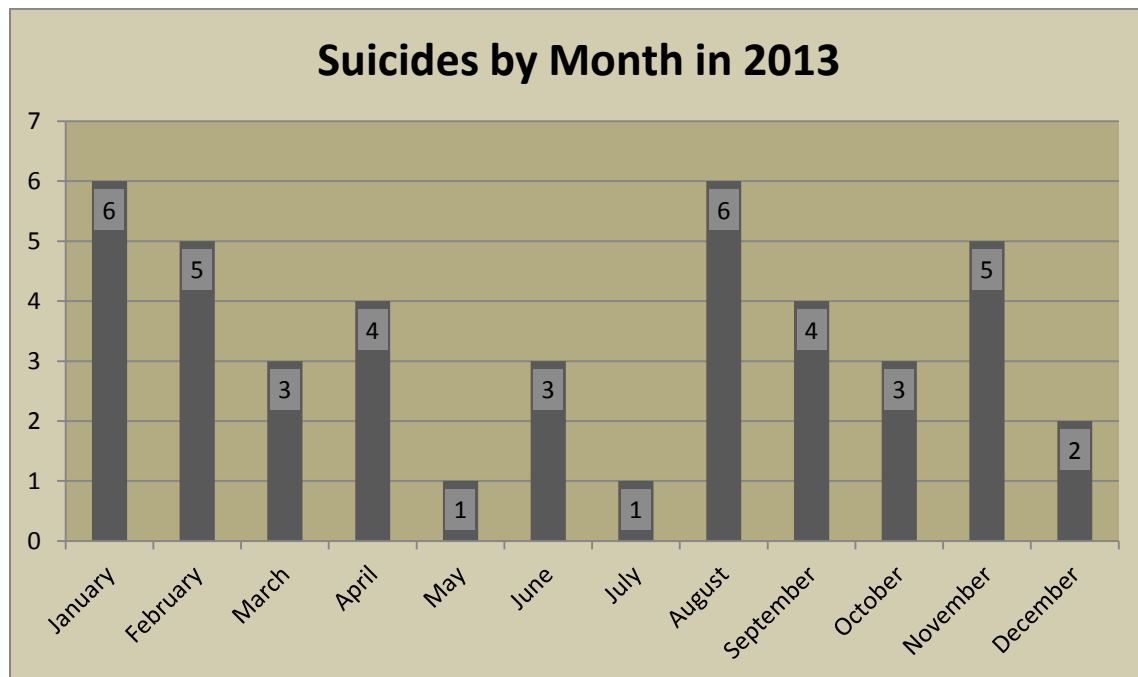
Age

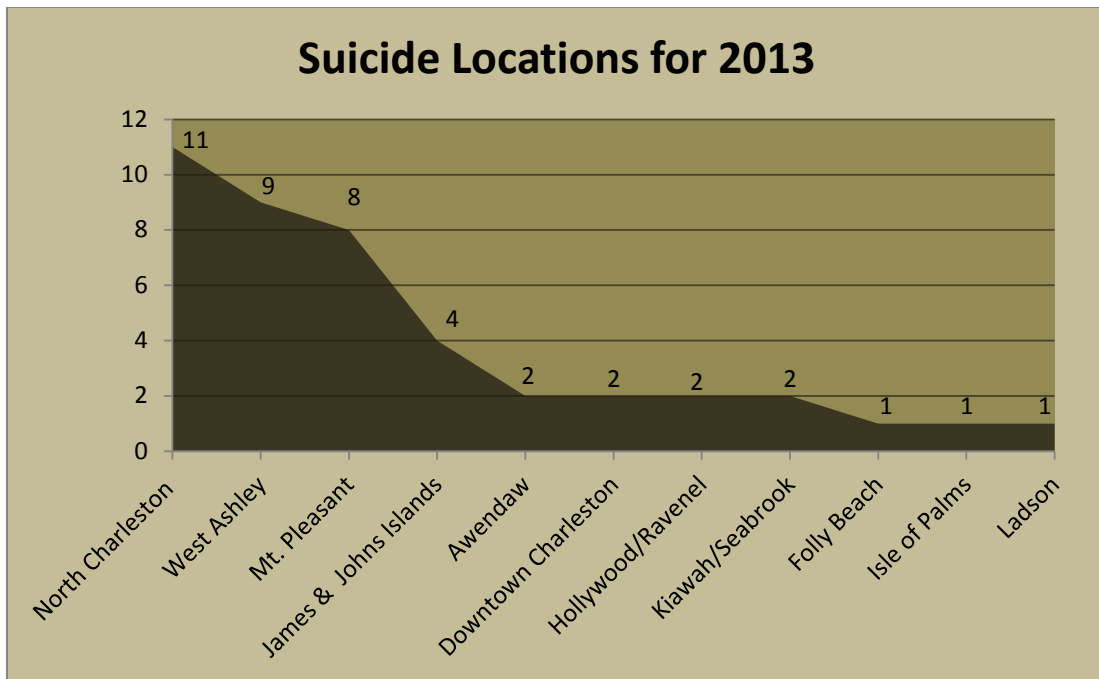
<15 years: 0	41-50 years: 5
16-19 years: 2	51-60 years: 11
20-30 years: 8	61-70 years: 6
31-40 years: 7	71-80 years: 2
	81-89 years: 2

By Race and Sex

Black Male: 3	Black Female: 0
White Male: 29	White Female: 9
Hispanic Male: 2	Hispanic Female: 0

Average Age: 47

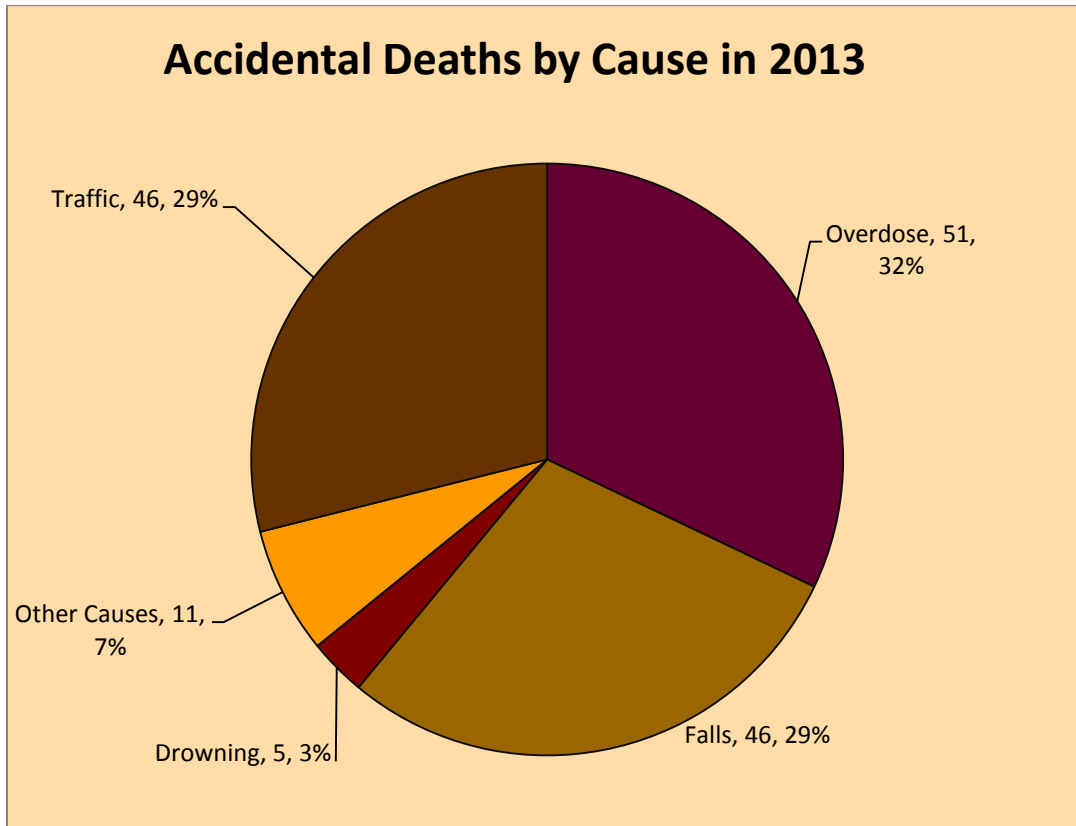




From left to right: Evidence Technician Nancy Ritter-Peacock, a “victim” from a mass-fatality drill, Deputy Lindsay and Deputy Rhoton.

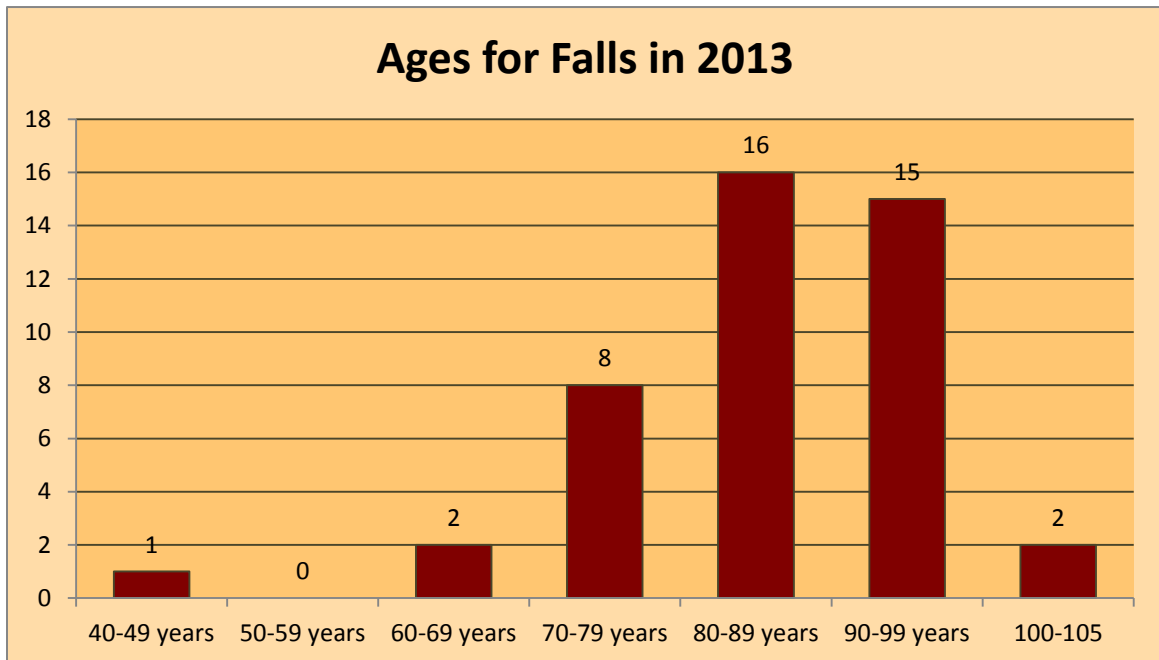
ACCIDENT FATALITIES FOR 2013

Accidental deaths are those deaths that are other than natural where there is no evidence of intent; i.e. an unintentional event or chain of events. This category includes most motor vehicle accidents, falls, drowning, accidental drug overdoses, fire related deaths, etc. During 2013, one hundred fifty-nine (159) deaths were certified as "Accident". There were 51 accidental overdoses, 46 traffic related deaths, 46 deaths resulting from falls (44 from standing or walking and 2 falls from a height) and 5 accidental drowning deaths and 11 others.

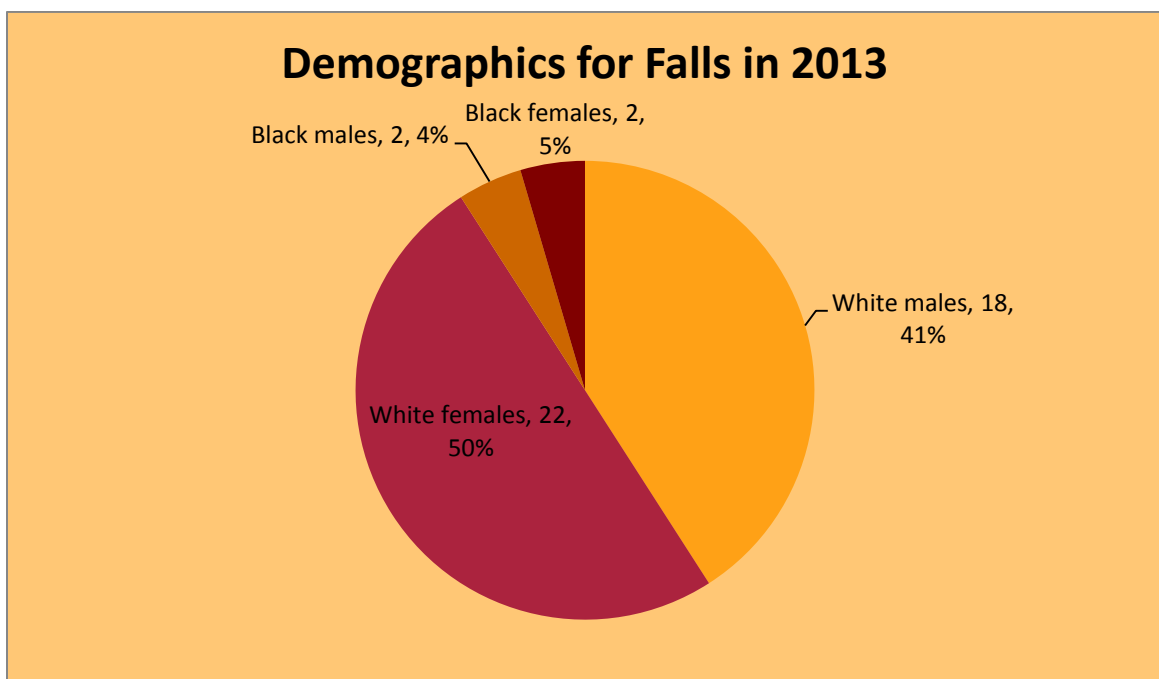


The eleven (11) causes of accidental death listed as 'Other' in the chart above are: 3 from burns; 2 from an airplane crash; 1 logging accident; 1 choking on food; 1 accidental hanging; 1 smothered by dirt; 1 positional asphyxia and 1 death from a surgical event.

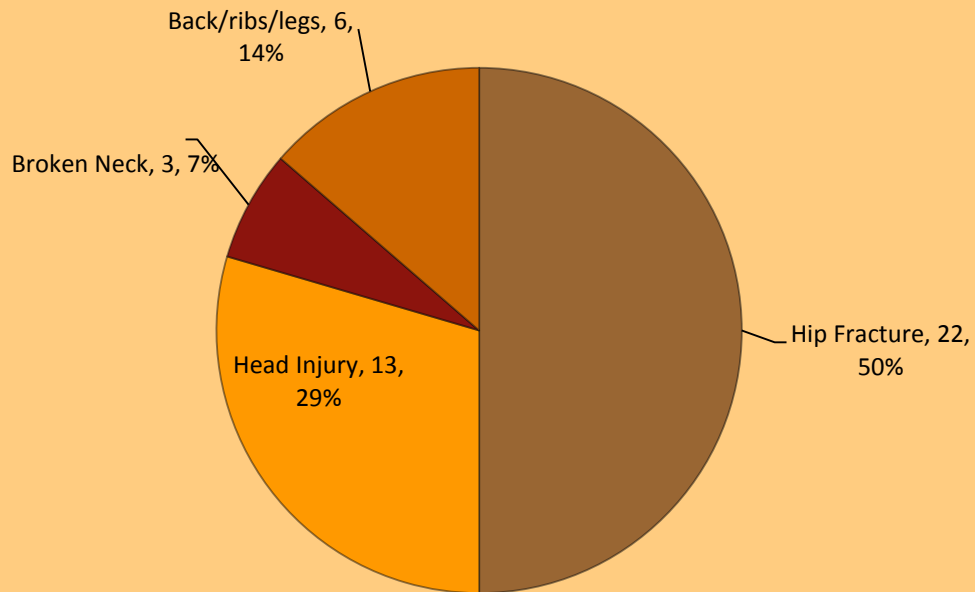
Falls



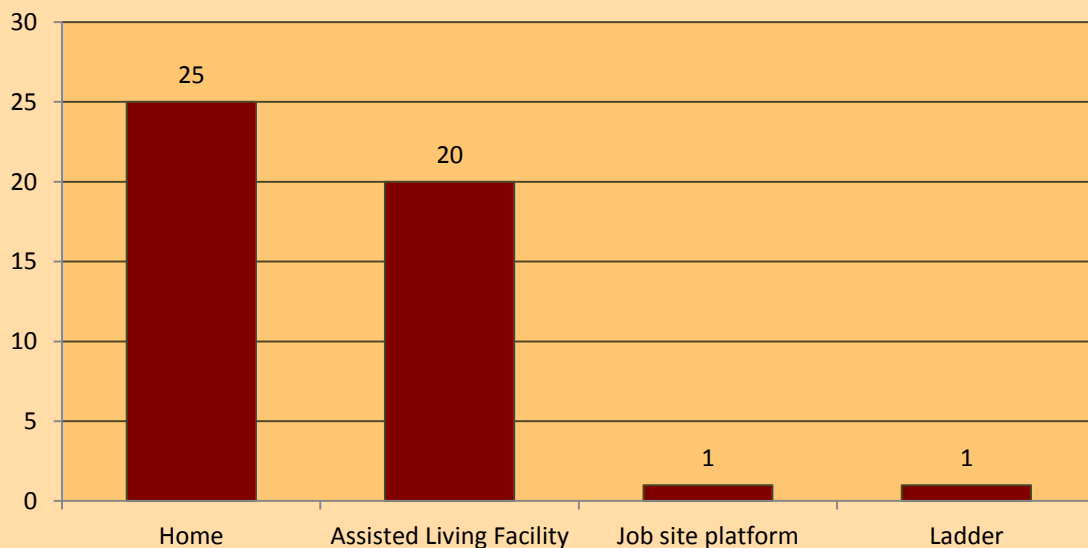
Decedents over 80 years old account for a total of 75% of all accidental falls from walking or standing, leading to expedited death.



Injuries Incurred Leading to Death for Falls

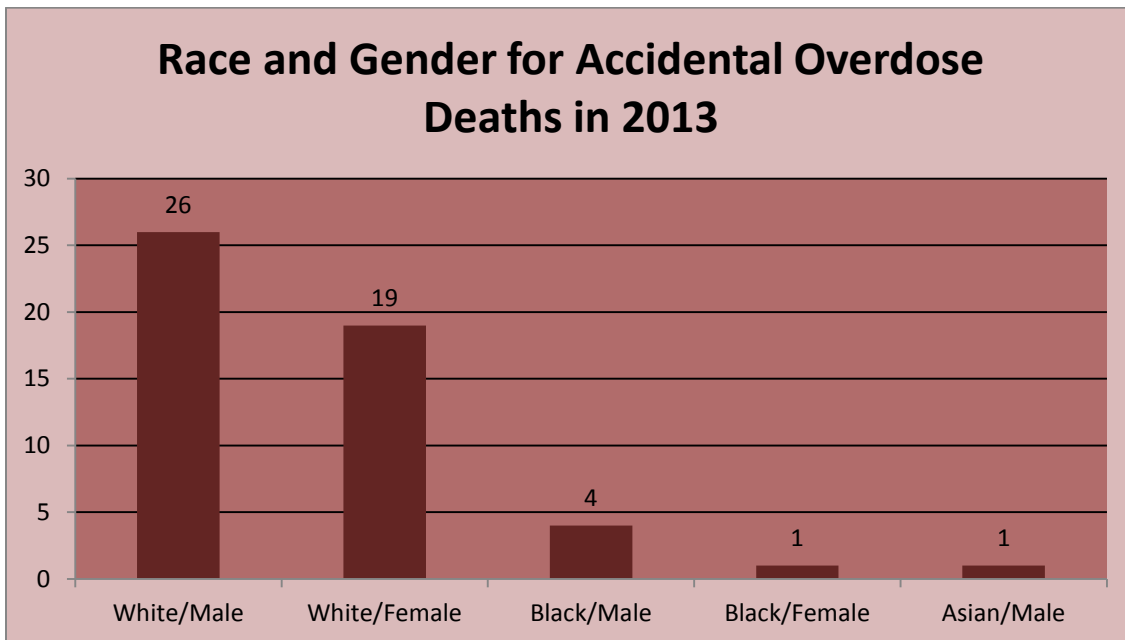
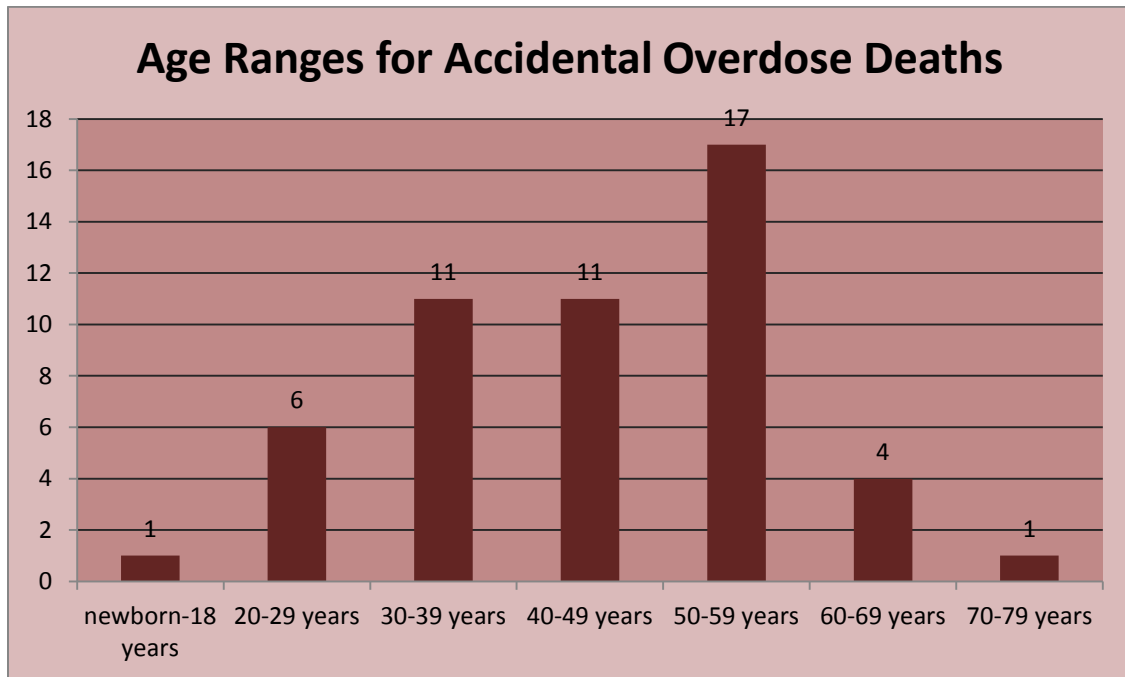


Locations for Falls



Accidental Drug Overdoses

In 2013, there were fifty-one (51) deaths classified as accidental drug overdoses. One was associated with a surgical procedure.



Traffic Fatalities in 2013

There were 46 motor vehicle related fatal collisions in Charleston County in 2013. Those fatalities involve the following types of situations: Eleven (11) pedestrians; Two (2) bicyclists; Ten (10) motorcycles; and two (2) involved mopeds. The balance of fatalities from collisions (21) involved only motor vehicles.

The statistics for these fatalities were derived from coroner reports, EMS and law enforcement reports. In a few cases, there was no information available regarding seatbelt/helmet use or speed of the vehicles.

A breakdown for Traffic fatalities in 2013:

<u>Race</u>	<u>Sex</u>	<u>Age</u>	
Black: 10	Male: 35	<3 years: 1	50-59 years: 10
White: 33	Female: 11	4-19 years: 0	60-69 years: 3
Hispanic: 2		20-29 years: 14	70-79 years: 2
Biracial: 1		30-39 years: 6	80-89 years: 1
		40-41 years: 9	

Race and Sex

Black Male: 10	Black Female: 0
White Male: 24	White Female: 9
Hispanic Male: 1	Hispanic Female: 1
	Biracial Female: 1

Position

Vehicle Driver: 15
Vehicle Passenger: 6
Motorcycle: Driver: 10 Helmet? Yes 2 No 8
Pedestrian: 11
Bicyclist: 2 Helmet Use: Yes 0 No 2
Moped: 2 Helmet Use: Yes 0 No 2

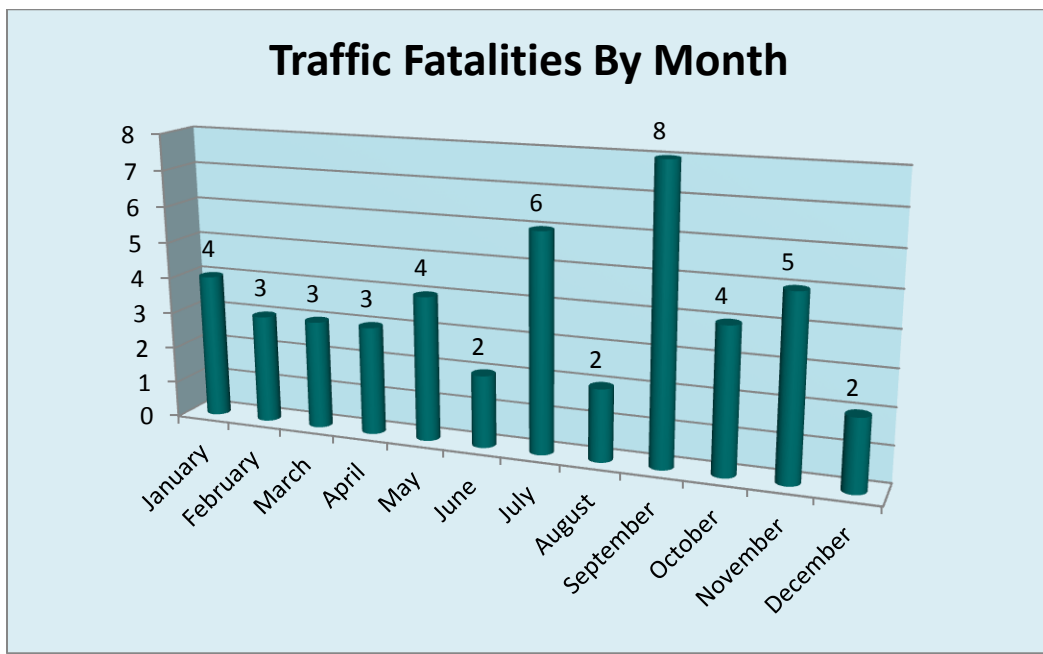
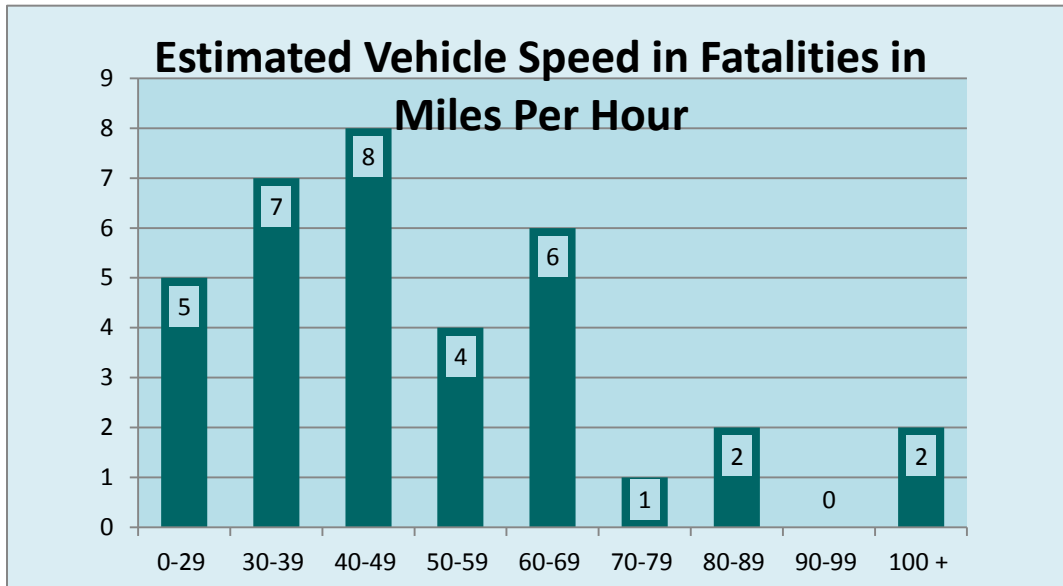
Collision Information

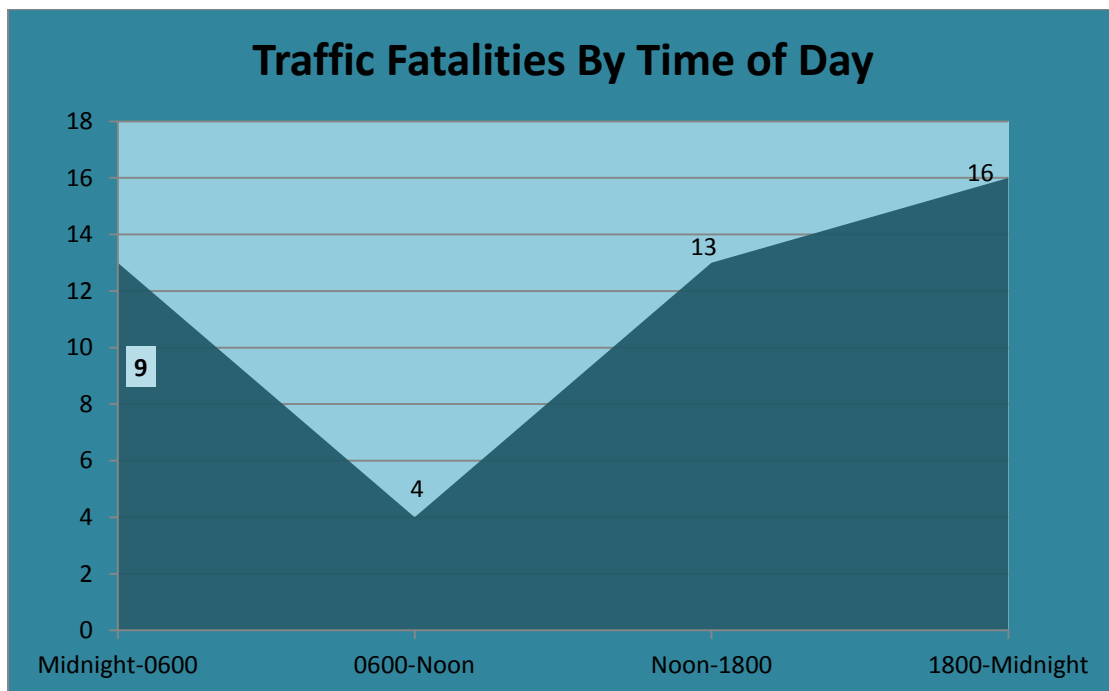
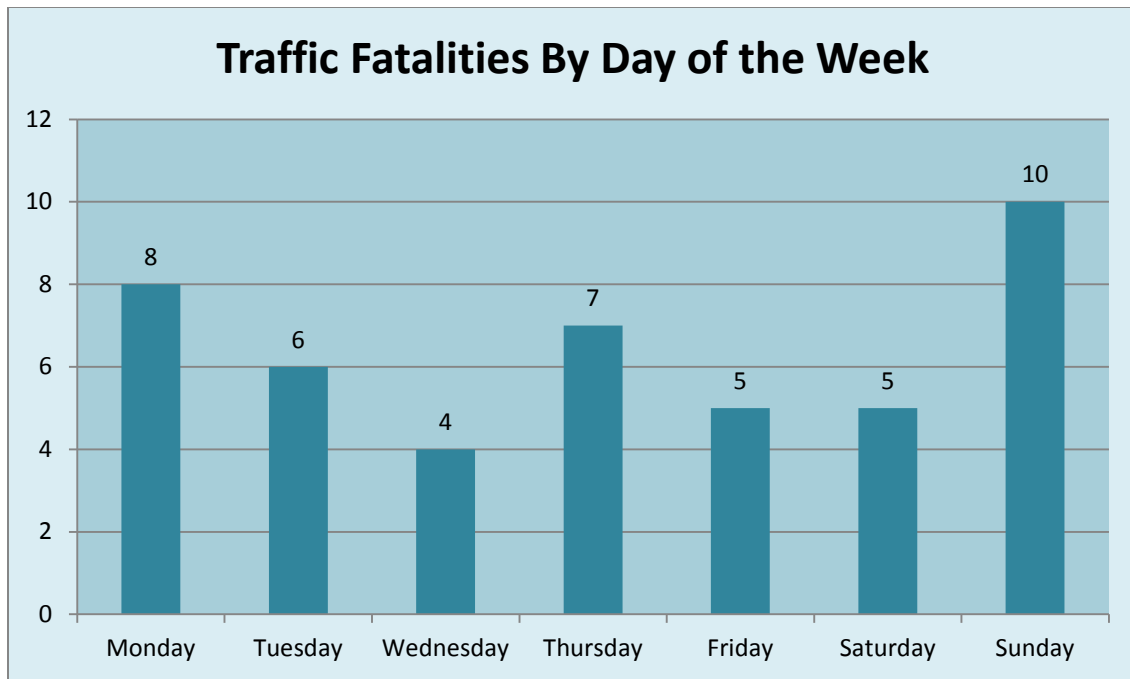
Auto vs. pole or tree: 7
Auto vs. Auto: 5
Solo Motorcycle: 6
Motorcycle vs. Vehicle: 4
Bicycle vs. Vehicle: 2
Moped vs. Vehicle: 2
Pedestrian vs. Vehicle: 11
Single Vehicle left road/flip: 3
Single Vehicle vs. Water: 2 (total 5 deaths)
Vehicle vs. Building: 1

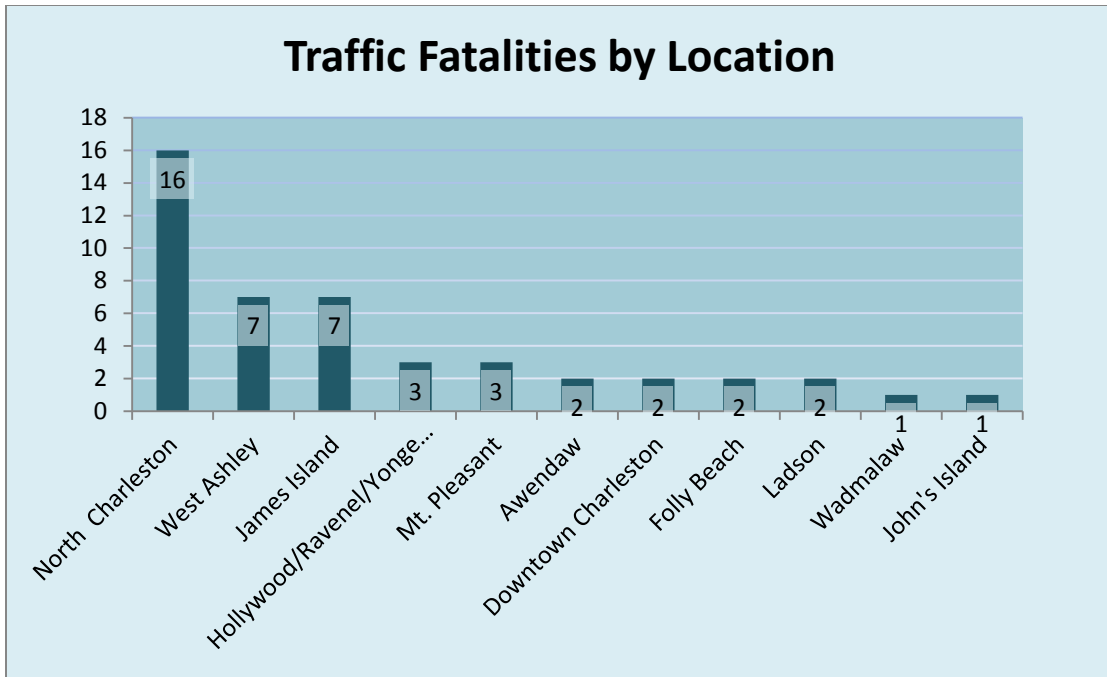
Seatbelt Use (not applicable to motorcycles, moped, bicycle or pedestrian accidents): Yes: 3 No: 11 Undetermined: 7

Of the 11 individuals known to not be wearing a seatbelt, 6 were ejected from their vehicle which is 54%.

The speed estimates are derived from law enforcement motor vehicle collision reports and/or witness statements. A few collisions had unreported speeds or were not able to be estimated and some collisions had multiple decedents.







Coroner Wooten on an excavation scene.

Natural Deaths

In 2013, there were one thousand one hundred thirty-two (1,132) deaths classified as "Natural" by the Charleston County Coroner's Office. The following is a breakdown by "Cause".

Heart related: 412
Cancer: 289
Pulmonary: 141
Dementia/Alzheimer's: 88
Renal: 34
Stroke: 28
Alcoholic related diseases: 31
Cerebral: 20
Diabetic related: 18
Pneumonia: 16
Fail to Thrive: 13
Gastro/Intestinal: 9
Parkinson's: 7
Infection: 6
Hepatic: 5
Seizure: 5
Peripheral vascular disease: 2
Immune System: 2
Others: 5

Undetermined Manner of Death

In 2013, the Charleston County Coroner's Office deemed eight (8) deaths were of an "Undetermined" manner.

INQUESTS IN 2013

There were no inquests in 2013.

GRANTS RECEIVED IN 2013

Department of Justice Office of Justice Programs
FY12 Paul Coverdell Forensic Science Improvement Grants Program
Award #2012-CD-BX-0068
Awarded October 2012 - \$155,266 – Project Director, Chief Deputy O'Neal

South Carolina Department of Public Safety Office of Justice Programs
Paul Coverdell Forensic Science Improvement Grants Program (1NF12005)
Awarded October 2012 - \$34,826 – Project Director, Chief Deputy O'Neal

PRESENTATIONS GIVEN IN 2013

Coroner Rae Wooten

"The Many Faces of Suicide - Methods, madness and the notes they leave behind."

June 2013

Annual Nursing and EMS Conference
Sponsored by University Hospital East
Columbus, OH, USA

"The Charleston 9"

June 2013

Annual Nursing and EMS Conference
Sponsored by University Hospital East
Columbus, OH, USA

Chief Deputy Bobbi Jo O'Neal

"John Doe– Identified Seven Years Later: A NamUs Success Story"

February 2013

65th Annual Scientific Assembly of the American Academy of Forensic Science
Washington, DC, USA

While a great deal of effort has gone into compiling accurate statistics for this report, they are subject to change as "Causes" and "Manners" of death, dates, etc., may change should new or additional information become available.