Charleston County Coroner's Office

2018 Annual Report

Coroner Rae H. Wooten

Charleston County
South Carolina

Rae H. Wooten, Coroner

Chief Deputy Coroner
Bobbi Jo O'Neal

Deputy Coroner Supervisors
Brittney Martin
Kimberly Rhoton

CHARLESTON COUNTY
SOUTH CAROLINA

OFFICE OF THE CORONER

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North Charleston, SC 29405

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To the Citizens of Charleston County,

I am pleased to share the 2018 Annual Report for the Charleston County Coroner's Office. The goal of providing this information 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. It is my hope that the sharing of this information will assist in efforts to reduce the number of preventable deaths, to the extent possible.

The information contained in this annual report comes from many sources to include: case investigations, autopsy reports, police reports, death certificates, cremation permits, motor vehicle reports, etc.

I hope that you will find this up-to-date and complete information to be in a format that is accurate and easy to read and is of value to you.

If you have any questions or need any additional information, please feel free to contact the Charleston County Coroner's Office.

As always, thank you for your support,

Rae H. Wooten, RN, BSN, F-ABMDI
Coroner of Charleston County, SC

DEDICATION

This report is dedicated to the decedents, and the citizens of Charleston County, and beyond, who grieve the loss of loved ones whose deaths are statistically reflected here. It has been an honor and privilege to serve you during this time of greatest need.

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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 determine the "Cause of Death" and the "Manner of Death."

PURPOSE AND FUNCTION OF THE CHARLESTON COUNTY CORONER'S OFFICE

The South Carolina Code of Laws (17-5-530(B)) mandates "The coroner or medical examiner shall make an immediate inquiry into the cause and manner of death and shall reduce the findings to writing on forms provided for this purpose.", upon notification of deaths that are unexpected, unexplained, suspicious, violent or in which the cause and/or manner of death is unknown. The Coroner is also responsible for identifying decedents and making notification to next-of-kin.

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.

The Fiscal Year 2018 approved budget for the Charleston County Coroner's Office was $1,910,948. This partially covers the period of January 1, 2018 – June 30, 2018.

The Fiscal Year 2019 approved budget for the Coroner's Office was $2,074,655. This partially covers the period of July 1, 2018 – December 31, 2018.

THE OFFICE

The Coroner's Office investigates the circumstances surrounding a person's death and provides information to the decedent's family, involved law enforcement, the judicial system, insurance companies, the Consumer Product Safety Commission, the South Carolina Department of Health and Environmental Control (DHEC), Occupational Safety and Health Administration (OSHA) and many others.

The Coroner's Office advocates for families by notifying and advising them of the circumstances surrounding the death known at that time. The Office provides updates to the families after autopsy and/or further investigation reveals new information. Additionally, we refer families to resource agencies when necessary to assist them through the grieving process. This Office works with organizations such as Sharing Hope to facilitate the family or decedent's wishes regarding organ and tissue donation whenever possible.

Medicolegal death investigation provided by the Charleston County Coroner's Office may involve many things, to include but not limited to, scene response, scene and decedent photography, ordering of forensic autopsies (authorized by SC Code17-5-520), anthropologic and odontology examinations, fingerprint collection and ordering of fingerprint comparison, etc. Collection of toxicology samples and/or DNA samples are also part of the investigation.

Scene investigations include, but are not limited to, child and infant death investigation and re-enactments, homicides, suicides, industrial and residential accidents, motor vehicle accidents, deaths due to abuse/neglect/negligence, terrorist acts, death due to malpractice, mass fatalities, arson, drowning, drug related and fire deaths.

The investigations and rulings of the Coroner's Office related to criminal acts, or those that effect the public health and safety, are the foundation for follow up actions by other investigative agencies. The pursuit of civil or criminal proceedings is influenced the Coroner's Office determination of the cause and manner of death. The Coroner may hold a formal inquest to determine the "Manner of Death". There were no inquests held in 2018.

In January, the Charleston County Coroner's Office received a South Carolina Department of Public Safety - Office of Justice Programs - Paul Coverdell Forensic Science Improvement Grant for $54,094.00 to fund a Special Opioid Investigator.

In late 2018, the office opened and began operating an in-house autopsy suite and morgue.

THE CORONER

Coroner Rae H. Wooten

The Coroner, Rae H. Wooten, RN, BSN, F-ABMDI, is an elected official who oversees a separate and independent law enforcement agency serving 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.

Coroner Wooten, 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 Governor Mark Sanford appointed her Coroner of Charleston County. She was elected Coroner of Charleston County in November 2008 and was re-elected in 2012 and 2016.

The South Carolina Coroner's Association recognized her as "Coroner of the Year" for 2012.

2018 ORGANIZATIONAL CHART

Citizens of Charleston County

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, F-ABMDI

Brittney W. Martin, BS, F-ABMDI

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

Sheila A. Williams, BS, BA, D-ABMDI

Sara K. Tuuk, BS, MS, D-ABMDI

Anita Hasert, BS, D-ABMDI

Administrative Services Coordinator
Teresa Vickers, BS

Case Coordinator/Morgue and Autopsy Suite Coordinator
Eliza Dobbins, BFA

Paralegal
Joe Crawford, M. Ed., MSCJ

Forensic Evidence Technician
Nancy A. Ritter-Peacock

Cremation Permit Specialist (grant funded)
Amanda Karnath, BS, MS

Contracted Consultants:

Forensic Anthropologist
Suzanne Abel, PhD

Forensic Odontologist
Dr. Wolf D. Bueschgen, DMD

Forensic Pathologist
Dr. Janice Pat Ross

INVESTIGATION and DISPOSITION OF CASES

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 evidence and 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.

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 the decedent's physical characteristics/features; fingerprint analysis; comparison of significant scars, marks and tattoos; birth defects and presence of prosthetics; coordination of odontology examination (dental X-rays); coordination of forensic anthropology analysis (skeleton/bones); DNA analysis and other methods.

If the Coroner or deputy deem it necessary to conduct a post mortem examination (autopsy), the contracted transport vendor transports the decedent to our in-house morgue/autopsy suite (23 cases) or to the Department of Pathology and Laboratory Medicine at the Medical University (393 cases). The contracted forensic pathologist Dr. Janice Pat Ross conducts all in-house autopsies and began in November 2018. This office also notifies the interested law enforcement agency of the autopsy schedule. The collection and preservation of all evidence rendered from an autopsy is of utmost importance to the investigation.

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 the 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 past medical records, as they might have relevance to the death. This office summarizes the information gathered through the investigation in a written report and collects 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 documenting findings that may assist with determining cause and manner of death. They also provide timely, precise and detailed reports that assist in furthering the investigation.

In approximately 18% percent of the deaths that were investigated, which is 416 out of 2,286 deaths reported, 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 to recover items of evidentiary/investigative value. 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 or upon admission to a hospital and are submitted to a nationally accredited laboratory or the State Law Enforcement Division (SLED) crime lab for testing. In 2018, the coroner's office ordered 441 toxicology tests. 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 specific disease or injury and the sequence of events that leads to an individual's death.

The **Manner of Death** is determined largely by means of the investigation and relates to circumstances at the time of, or surrounding the death. In South Carolina, as is common in the United States, there are five (5) manners of death as listed below.

NATURAL: Death caused by disease.

SUICIDE: Death because of a purposeful action to end one's own 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 after a thorough investigation there is insufficient evidence, or conflicting/ equivocal information (especially about intent), to assign a specific manner.

2018 STATISTICS

There were 2,286 deaths reported to the Charleston County Coroner's Office in 2018. Regarding those deaths, 1,886 were classified as "Natural" deaths, 264 were classified as "Accident"; 73 were classified as "Suicide"; 50 were classified as "Homicide"; and 13 were classified with an "Undetermined" manner.

In addition to these deaths, the Coroner's Office had involvement to various degrees with 2,698 requests for services which included: 16 cases of recovered bones (3 human and 13 non-human); 2,607 requests for a cremation permit which requires deputy review; 40 requests to make a death notification to next-of-kin by other jurisdictions; 34 cases were preliminarily investigated via telephone inquiries which subsequently were turned over to other jurisdictions due to their having jurisdiction in the case. There was one (non-death) agency assist case with law enforcement.

The Coroner's Office was not involved in any exhumations in 2018.

The grand total of all requests for services plus death investigations was 4,984.

Other statistics include:
Full autopsy: 416 cases
- In-House Autopsies began November 2018: 23
- Contracted Autopsies at MUSC: 393

Number of external exams ordered: 26
Number of partial/limited autopsies ordered: 1
Number of hospital autopsies under coroner jurisdiction: 0 known
Deceased transports to morgue: 427
Deceases transported for storage only: 97
Toxicology tests ordered: 441
Unidentified decedents: 0
Exhumations: 0
Unclaimed: 12
Donor referrals, organ donation and tissue donation statistics from Sharing Hope SC:
- Release for organ donation: 63
- Release for tissue: 63
- Organ donors: 17
- Tissue donors: 9

2018 "HOMICIDE" STATISTICS

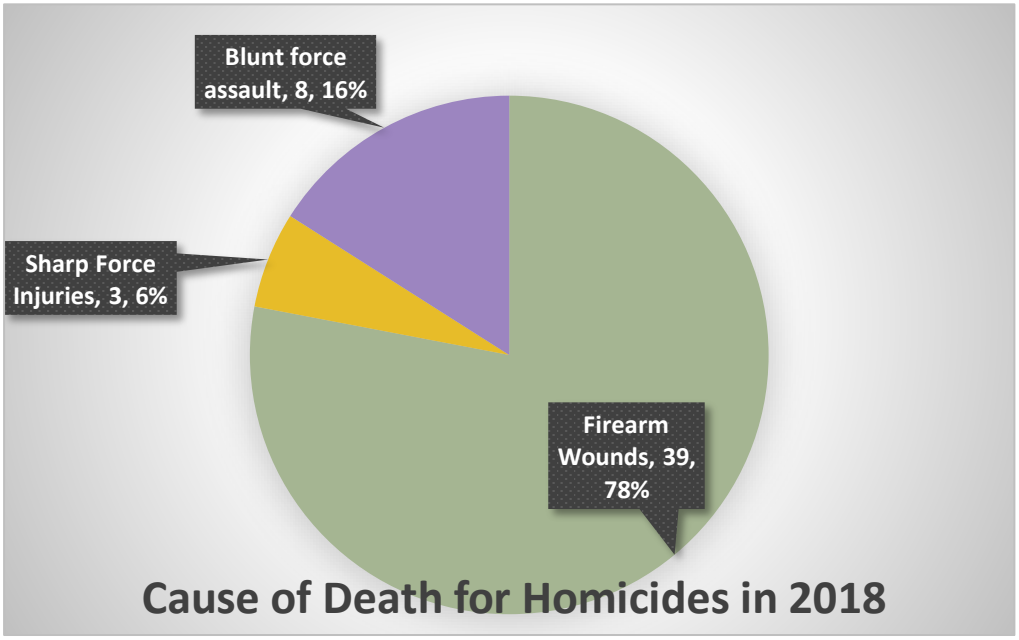
The manner of death is classified as a "Homicide" when it results from injuries inflicted by another person or inflicted on another by one's grossly reckless behavior. The Coroner's Office is not responsible for determining if a homicide was justified or not and classifies those deaths as "Homicides"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

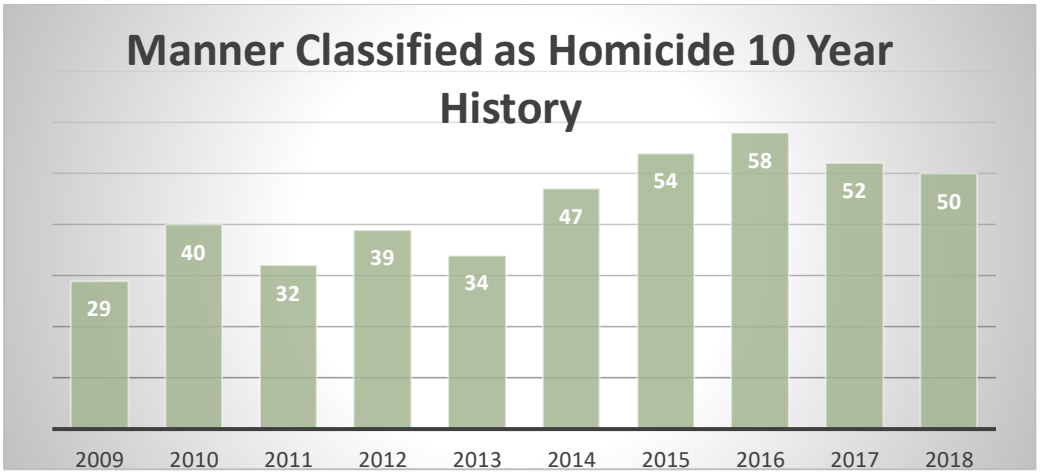
South Carolina Code of Laws section 16-3-5 states "A person who causes bodily injury which results in the death of the victim is not criminally responsible for the victim's death and must not be prosecuted for a homicide offense if at least three years intervene between the injury and the death of the 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 collisions, occurring in circumstances of reckless driving or driving under the influence, are NOT included in this category but are counted in the traffic collision statistics under the manner - Accident.

In 2018, there were 50 deaths classified with a manner of "Homicide" in Charleston County. Thirty-nine (39) were due to firearm wounds. Of the eleven remaining deaths, eight were caused by blunt force trauma, and three deaths were due to sharp force trauma.

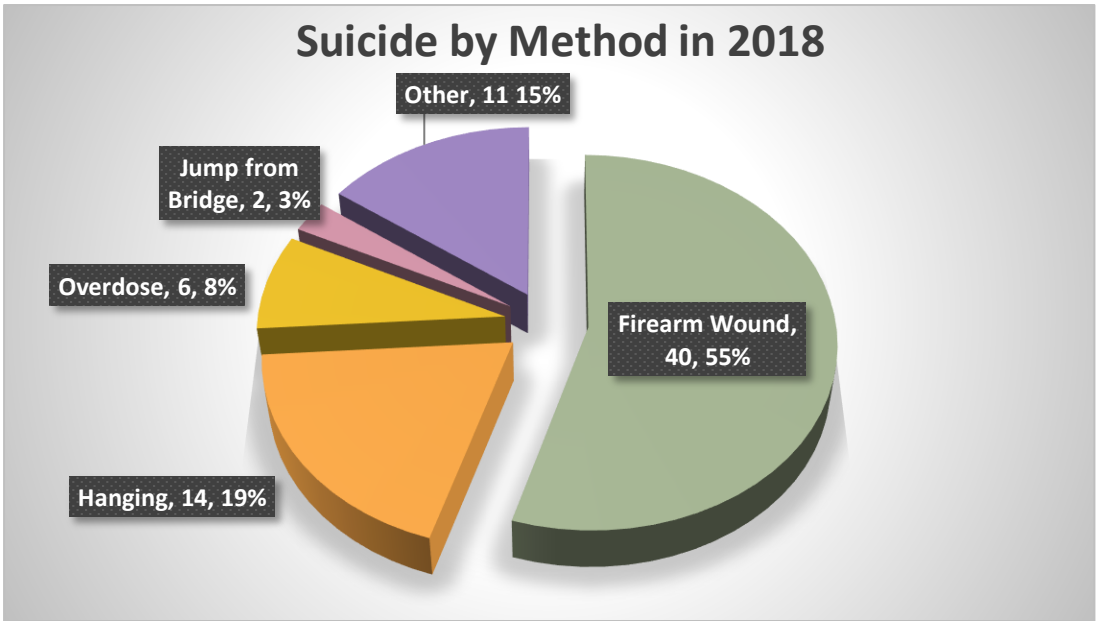


A review of the number of deaths classified as "Homicide" in Charleston County over the past 10 years shows the average number per year is 43.

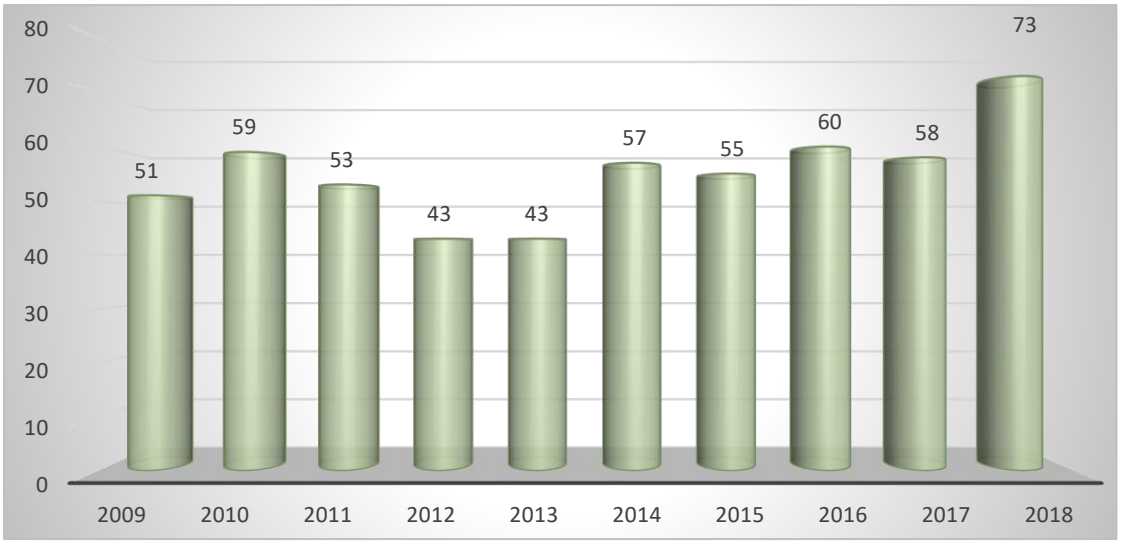


2018 "SUICIDE" STATISTICS

Suicide is death caused by intentional, self-inflicted injuries. In Charleston County during 2018, there were 73 deaths by suicide. The most prevalent method of suicide in 2018 was via firearm wound totaling 40. There were fourteen (14) hangings; six (6) overdoses; one death from jumping from the Ravenel Bridge; one death from jumping from the Wando Bridge and eleven (11) other various causes.



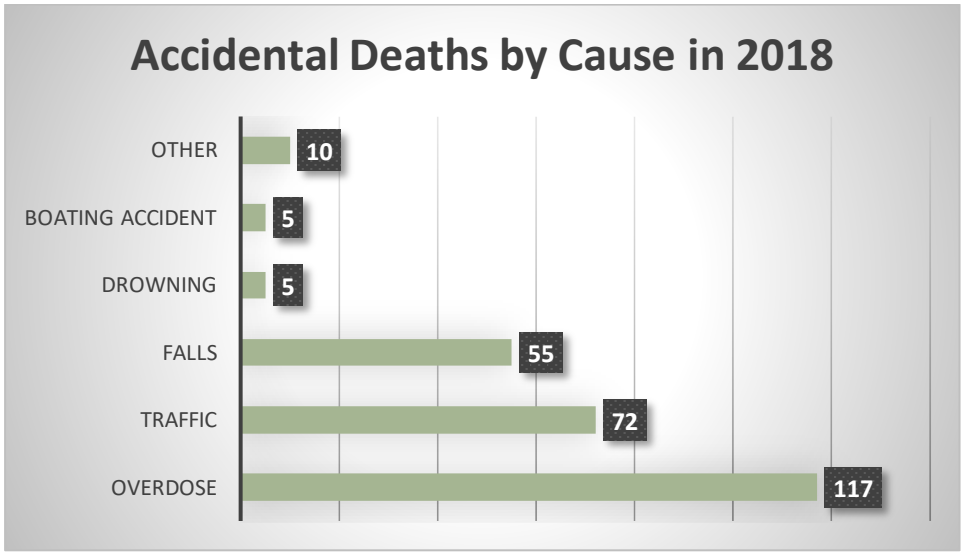
A ten-year review of the number of suicides in Charleston County shows an average of 55 per year.



2018 "ACCIDENT" STATISTICS

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 2018 there were 264 deaths certified as "Accident". The causes include: 117 overdoses; 72 traffic collisions; 55 falls; 5 drownings; 5 boating accidents; 10 other accidents.



2018 "Natural Death" Statistics

In 2018, there were 1,886 deaths reported to the Charleston County Coroner's Office which classified as "Natural". Deaths reported to the office in which the decedent was not attended by a physician or under hospice care was 831. The deputies receiving those reports either responded in person or communicated with medical staff, paramedics, law enforcement officers, family members, etc., present on scene, to determine if the body could be released to a funeral home, pending further investigation. Hospice care decedents totaled 1,037.

There were 18 cases of natural fetal demise reported to the office. These reports are preliminarily investigated to determine if further investigation or action is required. If so, those deaths are classified in accordance with the investigative findings.

2018 "Undetermined Death" Statistics

In 2018, the Charleston County Coroner's Office deemed thirteen (13) deaths were of an "Undetermined" manner.

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.