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About Our Office

Introduction

The Spokane County Medical Examiner’s Office (SCMEO) is tasked with investigating certain deaths occurring in Spokane County, Washington. The criteria defining which deaths must be investigated by the SCMEO are determined by the state; they include deaths occurring by unnatural or unlawful means, deaths occurring in suspicious circumstances, violent or traumatic deaths, and sudden or unexpected deaths in previously healthy persons. Due to a nationwide shortage of forensic pathologists, SCMEO also provides autopsy services to several counties in Eastern Washington and Northern Idaho, as staffing and capacity allow.

Medicolegal death investigation in Spokane County utilizes the medical diagnostic process, in which information about the circumstances of death and the decedent’s medical, surgical, psychosocial, and occupational history are combined with observations from the death scene, postmortem physical examination of the body, and laboratory testing to form conclusions about what injuries and/or diseases caused the death. While we work closely and collaboratively with law enforcement and crime scene investigators, we conduct our investigation and form our conclusions independently of other agencies. The work done by our staff is physically, mentally, and emotionally challenging, and we are grateful to these caring, committed people who serve our community day in and day out.

In addition to providing answers to the families and loved ones of decedents, medicolegal death investigations have broad importance for community health and safety. Death investigations provide evidence to convict the guilty and protect the innocent, generate data to inform public health research and intervention strategies, and document occupational, transportation, and product safety risks. The SCMEO is also dedicated to establishing and/or confirming identification of deceased persons, ensuring families are aware of a loved one’s demise, and managing unclaimed remains.

Red - Spokeane County
Yellow - Referral Counties
Accreditation and Certifications

Our office has been continually accredited by the National Association of Medical Examiners (NAME) since 2004. NAME is the national professional organization of forensic pathologists, physician medical examiners, medical death investigators, death investigation system administrators, and consultants who perform the official duties of medicolegal investigation of deaths of public interest in the United States. Accreditation is a rigorous process, requiring a lengthy and in-depth initial inspection by an independent Medical Examiner trained and appointed by NAME, as well as annual self-inspections and follow-up on-site inspections every 4 years. Less than 4% of all Medical Examiner and Coroner Offices in the country have achieved this accreditation.

All our forensic pathologists have completed specialty and subspecialty medical training and are board certified diplomates of the American Board of Pathology (ABPath), a member board of the American Board of Medical Specialties, which sets professional standards for the medical practice of pathology and its various subspecialties.

All our investigators are board certified diplomates of the American Board of Medicolegal Death Investigators (ABMDI), a national, not-for-profit, independent professional certification board that has been established to promote the highest standards of practice for medicolegal death investigators.
• For more information on NAME and the accreditation process, click the following links:

  https://thename.org
  https://www.thename.org/inspection-accreditation

• For more information on ABPath, click the following link:

  https://www.abms.org/board/american-board-of-pathology/

• For more information on ABMDI or to see the listing of those granted ABMDI certification, click the following link:

  https://abmdi.org/

In 2020, SCMEO moved into a new state-of-the-art facility located at 102 South Spokane Street, Spokane, WA 99202. The facility includes on-site full body and dental imaging systems, seven autopsy stations, a special procedures room, and cooler space for up to 150 decedents. With grant awards from Spokane County, Washington State, and the Federal Government, we have continued to improve the facility and upgrade our equipment to better serve the community and region.
In 2022, SCMEO was staffed by 17 employees and was composed of the following departments: Pathology, Investigations, Morgue, and Administration.

- There are 4 Forensic Pathologist positions at SCMEO, including the Chief Medical Examiner and three Deputy Medical Examiners. One of the Deputy Medical Examiner positions is currently unfilled. The Medical Examiners make decisions about case jurisdiction, decide the scope and course of a death investigation, attend death scenes when appropriate, conduct postmortem examinations, order laboratory studies, review records and test results, formulate medical diagnoses, certify deaths, generate autopsy reports, and provide court testimony.

- There are seven positions in the Investigations department. Investigators gather information about the circumstances of death, obtain medical records and other documents to aid in the medical aspect of death investigation, and evaluate death scenes, serving as the “eyes and ears” of the Medical Examiners. They are usually the first point of contact for the public and others with questions or requests for the Medical Examiner’s Office. An investigator is on staff and available 24 hours per day, 365 days per year.

- In the Morgue department, there are four positions, including the Morgue Supervisor and three Autopsy Assistants. The Morgue staff provides technical support for the examination and identification of bodies; their work includes photography, fingerprinting, forensic imaging, evidence handling, and assistance with autopsy procedures.

- The Operations Manager oversees the Investigations, Morgue, and Administration departments. The Administration department includes two Administrative Support Specialists III. The administrative staff handles business operations and records management, enters data for electronic Death Certificates, releases the decedent’s personal effects to family members or their representatives, and responds to records requests from families, attorneys, law enforcement, insurance companies, and others.
About Our Work

Overview
Not all deaths occurring in Spokane County need to be reported to or investigated by the Medical Examiner; the majority of deaths are natural and are certified by the deceased person’s health care provider. The Spokane County Medical Examiner’s Office is responsible for the investigation of all sudden, unexpected, violent, suspicious, or unnatural deaths occurring in Spokane County, and the certification of cause and manner of death for cases determined to fall under the jurisdiction of the Medical Examiner. Investigation of each reported death begins with careful information gathering about the circumstances of the death and the decedent’s history, and is supplemented, as appropriate, by death scene investigation, autopsy examination, toxicology testing, and other laboratory studies. Once the investigation is complete, the findings are used to formulate a medical opinion about what conditions caused and contributed to the death. If the death is determined to be entirely natural and the decedent is under the care of a health care provider, jurisdiction will be released, and the death will be certified by the health care provider or Regional Health District. If the initial investigation suggests that the death may be due to injury, drugs, or foul play, the case falls under Medical Examiner jurisdiction, and the Medical Examiner will use the investigation and examination findings to certify the cause and manner of death on the Death Certificate.

Deaths That Must Be Reported to the Medical Examiner

- Persons who die suddenly when in apparent good health and without medical attendance within 36 hours preceding death.
- Circumstances that indicate death was caused in part or entirely by unnatural or unlawful means.
- Suspicious circumstances.
- Unknown or obscure causes.
- Deaths caused by any injury whatsoever, whether the primary cause or contributing cause.
- Rapidly fatal contagious disease, with public health risk.
- Deaths occurring in jail or prison
- Unclaimed bodies.
- Premature and stillborn infants where suspicious circumstances exist.
- All deaths in children.
Cause and Manner of Death

The cause of death describes the physical finding in the body that led to death. This may be a natural disease, such as a heart attack or stroke; an injury of some kind, such as a gunshot wound or stab wound; or the toxic effects of a substance, such as a fentanyl overdose. The manner of death is a way to categorize deaths for public health reasons and is determined using Medical Examiner criteria outlined by the National Association of Medical Examiners. The categories are natural, accident, suicide, homicide, and undetermined. Deaths due entirely to natural disease, with no contribution from external factors such as injury or drugs, are classified as natural. If one or more external factors did contribute, the death is considered non-natural and may be categorized as accident, suicide, homicide, or undetermined. Non-natural deaths resulting from the inadvertent outcome of some action are classified as accident. Non-natural deaths resulting from self-inflicted injury are classified as suicide. Non-natural deaths resulting from injuries inflicted by another person are classified as homicide. If there is not enough information about the circumstances of death, or compelling arguments can be made for two or more manners, the death may be classified as undetermined. The manner of death is determined after taking into account all information available at the time of death certification; if relevant information subsequently becomes available, the manner of death may be amended. Manner of death classification was added to the death certificate to assist public health statisticians in compiling and analyzing data, and is a medical opinion independent from any legal determination.

Process

An initial investigation is done on every death reported to the SCMEO, to determine whether the death falls under SCMEO jurisdiction. An investigator will gather pertinent history and medical records for Medical Examiner review. In certain cases, a SCMEO investigator will attend the death scene in person to gather additional information and perform a preliminary examination of the body. Cases in which a scene response will occur include suspected homicides and suicides, suspicious deaths, presumed accidental deaths, and cases in which the person is suspected to have died of natural disease, but was not under the care of a clinician and/or drug use or previous injury may have played a role in the death. In 2022, investigators attended 525 death scenes within the boundaries of Spokane County.

Not all cases falling under Medical Examiner jurisdiction are autopsied. Some deaths can be certified via a review of medical records, and the bodies of those decedents can be released to the funeral home without being brought to the SCMEO. Deaths which occur within the boundaries of Spokane County do fall under SCMEO’s jurisdiction, and require a postmortem examination are transported to SCMEO by a contract body transport company.

If a body is transported to SCMEO, the Medical Examiner may choose to perform a complete autopsy, partial autopsy, or an external examination. In all autopsies and external examinations that do not consist of skeletal remains, specimens are collected for potential toxicology and laboratory analysis.
About our Cases

Deaths Reported

In 2022, there were 6036 deaths in Spokane County, a 9.8% decrease from the year prior. Based on the latest United States Census Bureau data, the estimated population of Spokane County is 549,690. The 6036 deaths thus represent approximately 1.1% of the population. Of these deaths, 2422 or 40.1% of the deaths were reported to the Medical Examiner for investigation. Based upon circumstances of death, the decedent’s medical history, and analysis of the scene, the Medical Examiner assumed jurisdiction in 928 (38.3%) of these reported deaths, or in 15.4% of all deaths in the county. This is a 2.5% decrease over the previous year, largely due to a decline in unattended natural deaths, but still represents a 27.6% increase in cases from 2020 to 2022.

Spokane County Deaths Reported in 2020-2022

<table>
<thead>
<tr>
<th>Year</th>
<th>Jurisdiction Accepted</th>
<th>Jurisdiction Released</th>
</tr>
</thead>
<tbody>
<tr>
<td>2020</td>
<td>727</td>
<td>1457</td>
</tr>
<tr>
<td>2021</td>
<td>952</td>
<td>1922</td>
</tr>
<tr>
<td>2022</td>
<td>928</td>
<td>1492</td>
</tr>
</tbody>
</table>
In addition to the 2422 deaths investigated for Spokane County, the office handled 272 cases for outside counties, a 35% increase over 2021 and a 63% increase over 2020. SCMEO investigators do not physically perform scene investigations on cases that are reported from outside the physical boundaries of Spokane County. For cases from outside Spokane County, the death investigation is conducted by Coroner’s office staff and an autopsy must be ordered by the Coroner of that jurisdiction.

**Referral County Cases - 2022**

![Bar chart showing referral county cases for 2020, 2021, and 2022 with 167 cases in 2020, 201 cases in 2021, and 272 cases in 2022.]

**Exam Types**

The autopsy numbers represent complete, partial, and external examinations. A “complete” autopsy includes a detailed examination of the external surfaces of the body as well as an internal examination, which involves surgical incisions of the head and abdomen, inspection of the body cavities, and removal and dissection of the internal organs. In select cases, only a portion of the internal examination is performed (called a “partial” examination). In certain other cases, only the detailed examination of the external surfaces of the body is performed, without any surgical incisions (called an “external” examination).

![Pie chart showing exam types with 536 complete autopsies (93%), 24 external autopsies (4%), and 15 partial autopsies (3%).]
Notable Trends

• Exposure Deaths

Although Spokane County did experience above-normal temperatures in 2022, there were fewer hyperthermia deaths than in 2021. Hypothermia deaths remained stable over the previous year. SCMEO confirmed a total of three hyperthermia and nine hypothermia related fatalities in 2022. Of the three hyperthermia cases, one was discovered inside their residence, one was discovered outside their residence, and one was discovered in their vehicle. Of the hypothermia deaths, four were discovered in their residence and five were discovered outside.

• Natural deaths due to cardiovascular disease

Among SCMEO cases, there has been a significant increase in deaths due to heart disease in persons aged 20 to 49, an age group not traditionally expected to die of heart disease. These cases fell under Medical Examiner jurisdiction because the individuals were not under the care of a clinician at the time of death and their deaths were initially unexplained and unexpected.

See page 25 for statistical information.

• Fatal drug overdoses

In 2022, there were nearly 5 times as many drug-related deaths as motor vehicle fatalities. From 2021 to 2022, there was a 36.1% increase in fentanyl-related overdose deaths in Spokane County, continuing a trend which has resulted in an astonishing 425% increase from 2020 to 2022. Fentanyl was detected in 72% of all accidental overdoses in 2022. Information from scene investigation in these cases indicates that naloxone (Narcan) was present in less than 25% of cases.

See page 16 for more information.


• Deaths in unhoused persons

In 2022, most deaths in unhoused persons were certified as accidental; the proportion of accidental deaths was higher in this group than in the overall population of SCMEO cases. For those experiencing homelessness, accidental deaths were most commonly drug-related, with overdose on methamphetamine alone or in combination with fentanyl most prevalent. Overall, methamphetamine overdose was more prevalent in this population than in the larger group of all SCMEO drug-related cases.

See page 31 for more information.
Manner of Death Overview

Manner of Death Trend- 2020-2022
Homicides

By Age

By Injury Type
Suicides

By Age

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Number of Cases</th>
</tr>
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<tbody>
<tr>
<td>10-19</td>
<td>5</td>
</tr>
<tr>
<td>20-29</td>
<td>23</td>
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<tr>
<td>30-39</td>
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<td>40-49</td>
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</tr>
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<td>50-59</td>
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<td>70-79</td>
<td>9</td>
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<tr>
<td>80-89</td>
<td>5</td>
</tr>
<tr>
<td>90-99</td>
<td>5</td>
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</table>

By Injury Type

<table>
<thead>
<tr>
<th>Injury Type</th>
<th>Number of Cases</th>
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<tbody>
<tr>
<td>Firearms</td>
<td>52</td>
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<tr>
<td>Hanging</td>
<td>21</td>
</tr>
<tr>
<td>Drugs/Poisons</td>
<td>10</td>
</tr>
<tr>
<td>Jump/Fall</td>
<td>6</td>
</tr>
<tr>
<td>Drowning</td>
<td>5</td>
</tr>
<tr>
<td>Other</td>
<td>4</td>
</tr>
<tr>
<td>Stab/Incised Wound</td>
<td>4</td>
</tr>
</tbody>
</table>
Accidental Deaths

By Age

Falls and drug overdoses accounted for the majority of accidental deaths. Of the fall-related deaths, 210 or 87.5% were in individuals aged 70 and older.
Accidental Deaths >70 Years of Age – Mechanism of Injury

Drug Toxicity Deaths

Multiple Drug Versus Single Drug Toxicity
While much attention has been paid to fentanyl deaths, methamphetamine related deaths also continue to rise. Methamphetamine and/or fentanyl were detected in 93.6% of all accidental overdoses.
Fatalities Involving Fentanyl – 2020-2022

Fatalities Involving Methamphetamine – 2020-2022
Accidental Drug Deaths by Decedent Gender – 2022

- Male, 145
- Female, 59

Accidental Drug Deaths by Decedent Age – 2022

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Number of Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>10-19</td>
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<td>20-29</td>
<td>26</td>
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<td>30-39</td>
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<td>40-49</td>
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<td>50-59</td>
<td>41</td>
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<tr>
<td>60-69</td>
<td>26</td>
</tr>
<tr>
<td>70-79</td>
<td>1</td>
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</table>
Motor Vehicle Fatalities

Motor Vehicle Fatalities by Age

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Number of Cases</th>
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<tbody>
<tr>
<td>10-19</td>
<td>8</td>
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<tr>
<td>20-29</td>
<td>9</td>
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<tr>
<td>30-39</td>
<td>5</td>
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<td>40-49</td>
<td>6</td>
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<td>50-59</td>
<td>9</td>
</tr>
<tr>
<td>60-69</td>
<td>6</td>
</tr>
<tr>
<td>70-79</td>
<td>8</td>
</tr>
</tbody>
</table>
Motor Vehicle Fatalities by Seatbelt Use

- Restrained, 10, 48%
- Unrestrained, 11, 52%

Motor Vehicle Fatalities by Decedent’s Location in Vehicle

- Passenger, 10, 43%
- Driver, 13, 57%
Motorcycle Fatalities by Age – 2022

Pedestrian Fatalities by Age – 2022
Illicit drugs and/or alcohol were detected in 34 out of 51 (66.6%) traffic fatalities that occurred within the boundaries of Spokane County in 2022. This includes drivers, passengers, bicyclist, and pedestrians.

**Drugs Detected in Traffic Fatalities – 2022**

- Alcohol, 10, 30%
- Illicit Drugs, 12, 35%
- Combined Illicit Drugs & Alcohol, 12, 35%

**Traffic Fatalities with Positive Toxicology**

- Driver, 21, 62%
- Passenger, 9, 26%
- Passenger, 3, 9%
- Bicyclist, 1, 3%
Exposure Deaths

3 of the 12 environmental exposure deaths were unhoused persons, 2 living outside and 1 living in a vehicle. 9 of the 12, or 75% of all environmental exposure deaths, occurred inside the individual’s home or in close proximity to their residence.


Beat the Heat- [www.gonzaga.edu/BeatTheHeat](http://www.gonzaga.edu/BeatTheHeat)


Drowning Deaths
Natural Disease Deaths

In 2022, 19% of Spokane County Medical Examiner cases were due to natural disease, and the most common cause of natural death was heart disease.

Natural Disease Deaths by Age

Natural Disease Deaths by Disease Process
Cardiovascular Deaths by Age

Cardiovascular Deaths by Gender
Among cases for which SCMEO accepted jurisdiction, deaths related to heart disease in persons above the age of 50 have remained stable or have declined overall, while heart-related deaths in persons aged 20 to 49 have increased by 130% since 2019. The most commonly documented specific causes were coronary artery disease and high blood pressure. Common contributing factors included obesity and long-term substance abuse.

Resources for Cardiovascular Health

- Cardiovascular Resources - [Cardiovascular Health Resources Resources & FAQs (vmfh.org)](https://www.vmfh.org)
- American Heart Association - [https://www.heart.org/](https://www.heart.org/)
- Cardiovascular Disease - [Cardiovascular health: Heart-healthy, science-backed resources (medicalnewstoday.com)](https://www.medicalnewstoday.com)

Ways to Improve Cardiovascular Health

- Eating healthy
- Exercising often: Aim for at least 30 to 60 minutes of activity daily
- Not smoking
- Watching your cholesterol
- Getting good quality sleep
- Managing stress
- Maintaining a healthy weight
- Getting regular health screening
Child Fatalities

In 2022, SCMEO investigated 10 child fatalities (decedents less than three years of age) in Spokane County.

### Ages at Death

<table>
<thead>
<tr>
<th>Age</th>
<th>Number of Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>&gt;1</td>
<td>9</td>
</tr>
<tr>
<td>1-2</td>
<td>1</td>
</tr>
</tbody>
</table>

### Manner of Death

<table>
<thead>
<tr>
<th>Manner</th>
<th>Number of Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undetermined</td>
<td>5</td>
</tr>
<tr>
<td>Natural</td>
<td>2</td>
</tr>
<tr>
<td>Accident</td>
<td>3</td>
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</tbody>
</table>
Most deaths in this group were related to unsafe sleeping environments such as co-sleeping in adult beds and/or the use of adult-sized bedding materials.

**IS YOUR BABY SLEEPING SAFELY?**

**4 Tips to help baby sleep safely:**

- Place baby on his or her back for all sleep times- naps and at night.
- Use a firm sleep surface, such as a mattress in a safety-approved crib.
- Keep soft bedding such as blankets, pillows, bumper pads, and soft toys out of the baby’s sleep area.
- Have baby share your room, NOT your bed.

**Resource:**

Safe Sleep for Babies: [https://www.cdc.gov/vitalsigns/safesleep/index.html](https://www.cdc.gov/vitalsigns/safesleep/index.html)
Unhoused Persons

Deaths in Unhoused Persons by Jurisdiction Accepted vs. Jurisdiction Released - 2022

Jurisdiction in these cases was released only when the decedent died indoors and under the care of a physician. Of the 18 jurisdiction released cases, 50% were reported from hospitals while the other 50% were in a home or shelter and were under the active care of a clinician. An Investigator responded to the scene to evaluate all home or shelter deaths. Of the cases investigated by SCMEO, most were accidental deaths.

Jurisdiction Accepted Deaths in Unhoused Persons by Manner – 2022
Accidental Deaths in Unhoused Persons by Method – 2022

Illicit Drugs vs. Prescription Drug Deaths in Unhoused Persons – 2022
In-Custody Deaths

An “in-custody” death is the death of a person occurring at any stage of interaction with law enforcement, including the initial confrontation with authorities, the process of arrest, during transport to a facility, or during incarceration. Deaths may also occur as a result of injuries sustained during an interaction with law enforcement. Incarcerated persons may die in a jail, prison, or other institution or may be hospitalized for a health condition while remaining in custody. All deaths in custody must be reported to the medical examiner.

In-Custody Deaths Manner

- Natural, 3, 33% (Hospitalized)
- Homicide, 5, 56% (Pre-arrest)
- Suicide, 1, 11% (Pre-Arrest)

The 5 homicides were the result of officer involved shootings during the initial stage of interaction with law enforcement.
Unidentified Bodies

Determining the identity of the decedent is one of the first steps in a medicolegal death investigation. SCMEO uses a variety of techniques to scientifically identify decedents who are unknown, or for whom identification is tentative. When there is a possible or presumed identity, or the unknown decedent was fingerprinted or had their DNA entered into a government database during life, traditional identification methods can be used. In 2022, traditional scientific identification methods were employed for 70 decedents examined at SCMEO.

Methods of Traditional Scientific Identification of Unidentified Decedents 2022

In some cases, more advanced identification techniques must be used. In 2022, SCMEO began a collaborative effort with law enforcement agencies and a private DNA laboratory to use Forensic Genetic Genealogy for identification of several long-unidentified decedents, with some cases dating back to the 1950s. For those cases, traditional means of identification had failed, and death investigation had been stalled while waiting for scientific advances to make identification possible.
Other Community Involvement

**Education**
In 2022, SCMEO continued to provide a variety of educational programs to area hospitals, hospice agencies, and nursing homes. We also made educational presentations at the statewide conferences of the Washington Association of Coroners and Medical Examiners and the Washington Association of County Officials.

SCMEO participates in educational activities at a variety of area high schools and continues to develop learning activities appropriate for high school outreach.

In 2021, SCMEO established a college internship program and set up affiliation agreements with several local colleges and universities, including Gonzaga University, Eastern Washington University, and Whitworth University. The goal of the internship is to provide opportunities for students to learn about the work performed by the Medical Examiner’s Office and, under the direction of SCMEO staff, develop skills required to perform the duties of a Medical Investigator and/or Autopsy Assistant. Demand for internship spots remained high locally and nationally in 2022, and we welcomed interns from Eastern Washington University and the University of Vermont.

The SCMEO continues to host medical students from the University of Washington and Washington State University Schools of Medicine for 1-day clinical experiences as well as longer clinical rotations.

**Community Service and Public Health Surveillance**
SCMEO pathologists continue to take part in hospital Morbidity and Mortality conferences. The SCMEO also participates in multiple local and statewide public health surveillance programs, providing data on fatal drug overdoses, child deaths, motor vehicle deaths, and consumer product safety deaths to a variety of agencies.

Our office administers the indigent burial program for Spokane County, overseeing efforts to contact family members of the deceased and ensuring that public funds are used responsibly to make final arrangements for unclaimed persons. As part of this process, we also partner with the Washington State Veterans Cemetery, working to identify qualifying unclaimed veterans who can be interred with military honors. In 2022, we arranged disposition for 42 unclaimed decedents and facilitated military burial for 3.

SCMEO has worked to provide access to a room in our facility where tissue donation can take place, and in 2022 we finalized agreements with area donation agencies for use of this room. This has allowed us to honor decedent and family wishes for tissue donation in cases which would otherwise have been unable to proceed.

We continue to provide autopsy services and consultation to multiple counties in the region and are actively engaged in efforts to bolster the Washington State Medical Examiner and Coroner system during a severe nationwide forensic pathologist shortage.

In addition to the above, SCMEO actively participates in mass disaster planning and assists community partners in preparing for a mass fatality event.
Grants

SCMEO has been awarded 5 grants over the past year, totaling over $2,125,000.00. This funding has enabled us to better prepare our office for a Mass Fatality Event, to upgrade our building and equipment, and to incorporate new technology to improve our operations, without requesting additional monies from the Spokane County General Fund.

Grants Overview

- State of Washington Department of Health: awarded for the purchase of racks and trays for Mass Fatality preparedness.
- U.S. Department of Commerce: awarded for equipment upgrades, training materials, and purchase of real-time toxicology testing machines.
- Spokane County American Rescue Plan: awarded for forensic genetic genealogy for unidentified decedents and test kits for toxicology testing machines.
- U.S. Health Resources and Services Administration: awarded for purchase of a CT scanner.
- National Network of Public Health Institutes: awarded for equipment to capture health data for public health surveillance and continual data sharing.
Spokane County Demographics

Spokane County is 1,781 square miles in size. In 2022, the population of Spokane County was approximately 549,960 with a growth of 1.01% from the year prior.

Spokane County Facts According to US Census:

Gender:
Male- 50%
Female- 50%

Race:
Asian- 2.5%
Black or African American- 2.1%
Caucasian- 88.4%
Hispanic- 6.6%
Native American- 1.9%
Pacific Islander- .7%
Two or More Races- 4.4%

Decedent Race and Manner – 2022

![Decedent Race and Manner Chart](image)
Decedent Gender and Manner
2022

Decedent Age and Manner
2022