Utah Office of the Medical Examiner



What does the OME do?

The Utah Office of the Medical Examiner (OME) investigates all sudden, unexpected, violent, suspicious, or unattended deaths in Utah. This includes deaths related to accidents, homicides, suicides, and those without clear medical explanations.

The OME investigates cases of unidentifiable remains. They partner with forensic anthropology experts to investigate partially decomposed or skeletal remains. They also work with law enforcement and the state crime lab to help identify remains from cold cases by using DNA testing and imaging.

The OME is a part of the Utah Department of Health and Human Services. It was established in 1972 under <u>Title 26</u>, <u>Chapter 4 of the Utah Health Code</u>: <u>Utah Medical Examiner Act</u>. The office is accredited by the National Association of Medical Examiners.

What makes Utah's OME unique?

The Utah OME is a centralized, statewide medical examiner system.

This means it's a single office that investigates deaths for the entire state. We are one of only 11 states in the nation that have a centralized medical examiner system (Source).

- Other states have county or district-based systems where each county or district has a different medical examiner or coroner.
- Our statewide system gives us more uniform and high-quality data. This helps us identify public health concerns early.

The Utah OME has an epidemiology team in-house.

Utah is one of the few states with an epidemiology team as a part of the OME. The team monitors and analyzes data about suicide and drug overdose deaths. They also provide outreach and grief support for families of people who die by suicide or drug overdose. We have one of the nation's few suspected drug overdose alert systems, and the only state which does family interviews related to overdoses.

Quick facts:

- Investigated 7,899 deaths (about 35% of the deaths in the state) in 2023.
- There are 12 forensic pathologists who work at the OME. They can perform up to 24 autopsies on Mondays and up to 16 on other days. This averages to about 10 autopsies each day over a year.
- It takes about 1 hour to do an autopsy, if there are no complications with the case.
- It can take 3-4 weeks to get toxicology results back from the lab.
- Helped law enforcement identify people from 3 cold cases so far this year.



Death investigations in Utah use a medical examiner, instead of a coroner.

Coroners are elected officials, while medical examiners are highly trained, licensed physicians. The requirements to be a coroner depend on the area. Some areas don't require coroners to be doctors, forensic pathologists, or to have any experience with death investigations.

Medical examiners in Utah are board-certified forensic pathologists. Forensic pathologists are medical doctors who complete residencies in pathology and fellowships in forensic pathology. They must complete continuing education credits and stay up-to-date on current research and best practices for the field.

• The quality of death investigations and data is better with a medical examiner than with a coroner. This is because medical examiners are the most qualified professionals to determine the manner and cause of deaths.

Who works for the OME?

- Forensic pathologists
 (also called medical examiners)
- Epidemiologists
- Medicolegal death investigators (also called medical examiner investigators)
- Morgue operations team
- Front office staff
- Operations and finance team

OME staff deal with the weight of their jobs in many ways—spending time with their pets, volunteering, exercising, being outdoors, enjoying music and the arts, birdwatching, coaching youth sports, and more. OME staff pets include dogs, cats, turtles, snakes, and a lobster!

What happens in a death investigation?

The medical examiner determines the cause and manner of death during a death investigation.

- **Scene investigation.** A death investigation starts at the scene where someone died. It provides snapshots of their death and information about their life. This information helps the medical examiner determine the manner and cause of death. Investigators take pictures of the scene and the body and collect evidence for the medical examiner.
- **Postmortem exam.** This is a thorough physical exam of the body, what the person is wearing, and any clear injuries. Sometimes X-rays of the body or an autopsy are done too.
- **Autopsy.** During an autopsy, the medical examiner will open the body and examine the internal organs. They're looking for disease or injury that may have caused or contributed to the death. They may also take blood and tissue samples for drug, alcohol, or genetic testing.
- Other records. The medical examiner will look at the person's medical records or law enforcement records. OME staff will contact the person's family and friends to learn more about the decedent and their social history. Getting a full picture of the person's life helps the medical examiner make the most accurate decisions about how they died.

The cause of death is the injury, illness, or disease that made the person die. The manner of death can only be one of these categories: natural, accident, homicide, suicide, or undetermined.



The OME also helps with:

- Organ and tissue donation such as skin, bone, corneas, and heart valves. The OME works closely with DonorConnect and the Utah Lions Eye Bank.
- Research, epidemiological studies, and data reports.
- The justice and law enforcement systems (forensic pathologists and medical examiner investigators will sometimes testify in court as expert witnesses).
- Grief support for families.
- Training students. The OME partners with the University of Utah to provide a forensic pathology fellowship program.

The OME identifies threats to the public's health.

Utah was one of the first states to call attention to the opioid epidemic—and continues to be a leader in drug-related epidemiology studies.

In the early 90s, the chief medical examiner (Dr. Todd Grey) noticed an increase in the number of deaths that involved prescription opioids. The OME began to systematically collect this data in 2008, calling it the Prescription Pain Medication dataset. OME staff work closely with state and local prevention partners to share data in a timely manner. This work has led to many prevention efforts over the past 2 decades—and a decrease in the number of Utahns who die from prescription opioids.

- Education campaigns such as Stop the Opidemic, Use Only As Directed, and Know Your Script.
- Increase access to safe sites to dispose of medication you didn't use, such as drop boxes or take-back events.
- Increase access across the state to substance use treatment.
- Policies and education to help medical providers use best practices when they prescribe opioids.
- Expand access to harm reduction services, like syringe exchange programs, naloxone, and fentanyl test strips.

The Utah OME is a leader in suicide epidemiology.

OME staff have studied suicide deaths for decades. Staff worked with Dr. Douglas Gray, a psychiatrist at the University of Utah, starting in the late 90s on the Utah Youth Suicide Study. The <u>research was groundbreaking</u>—63% of Utah youth who died by suicide in their study had contact with Juvenile Justice and Youth Services.

Today, Dr. Michael Staley, suicide prevention research coordinator at the OME, continues this work. He and his team conduct psychological autopsies with family members, friends, and other people close to youth who die by suicide. This work is changing the understanding of risks leading to suicide death, focusing on the interactions of underlying genetic vulnerabilities and the clinical, social, and environmental factors of these risks. The OME's work is critical for public health, healthcare, education, and state and local suicide prevention.

- <u>SafeUT app</u>, a free, confidential crisis chat and tip line for students, parents, and educators.
- Education campaigns such as Live On Utah.
- <u>988 Suicide and Crisis Lifeline</u> which provides immediate emotional and mental health support from trained crisis workers. 988 is free, confidential, and available 24 hours a day, 7 days a week, every day of the year.
- Increase access to mental health treatment and support, mobile crisis outreach teams, youth stabilization programs, receiving or crisis centers, and more.
- Laws and policies that support and fund mental health treatment, resources, education, and prevention work.

Learn more: https://ome.utah.gov/

