

# Office of the Coroner Skagit County



Hayley L. Thompson, D-ABMDI

Coroner

## 2022 Annual Report

*The Skagit County Coroner's Office is an independent agency who serves the residents of Skagit County by investigating the facts and circumstances concerning the deaths of those who have died suddenly, violently, or unexpectedly while in apparent good health within the geographic boundaries of the county. The goal of this office is to serve the citizens of Skagit County with the highest degree of compassion, professionalism, and integrity regarding those who have died within Skagit County.*

While our work is centered about sudden, violent and traumatic death situations, the driving mission of our Office is centered about service to the living family and friends who are the victims of a tragic loss; service directed at understanding the truth about how and why their loved one died; and; service directed at revealing and enacting any means of preventing future, similar deaths with our County.

To achieve this mission, the Skagit County Coroner's Office will:

- \* Treat decedents and their personal effects with dignity and respect and without discrimination.
- \* Conduct investigations and autopsies professionally, scientifically, and conscientiously.
- \* Provide honest information to family members compassionately and courteously, with sensitivity to cultural differences.
- \* Complete reports expeditiously with regard for the concerns of family members, the criminal justice system, and public health and safety.
- \* Research and implement new procedures to better investigate death scenes.
- \* Continual maintenance of adequate staffing levels in order to provide all mandated services.
- \* Promote and maintain a working environment that emphasizes the importance of physical, mental, and emotional health for all Coroner staff.
- \* Promote and provide adequate equipment, training, and support to all Coroner staff.
- \* Render assistance, training, and education to all agencies requesting our services.
- \* Provide a statistical annual report of deaths within the county.
- \* Prepare and plan for mass casualty incidents.
- \* Provide for disposition of unclaimed, indigent citizens in accordance with RCW 36.39.030.
- \* Strive to increase proficiency and professionalism of all Coroner staff members.

The Skagit County Coroner's Office has an important public health role in bringing causes and manners of deaths to the attention of the public and many involved agencies. The Coroner's Office works with community partners to adopt a proactive approach to reducing preventable deaths such as drug-related deaths as well as suicides.

## Introduction

### A Description of Skagit County and its Population

Skagit County encompasses an area over 1,730 square miles which consists of coastal, agricultural and mountain areas. Towns include: Mount Vernon, Burlington, Anacortes, Guemes Island, La Conner, Bow, Alger, Sedro Woolley, Lyman, Hamilton, Concrete, Rockport, and Marblemount. There are also three Native American Tribes in the county: Swinomish Tribe, Upper Skagit Tribe, and Sauk Suiattle Tribe.

Skagit County is home to approximately 131,179 people. Skagit County's population is made up of 75% Caucasian, 19% Hispanic or Latino, 2% American Indian/Alaska Native, 3% Asian, 1% African American, and 85% identifying with two or more races. The median age for Skagit County is 41.6 years and the average life expectancy is 80.2 years.

Skagit County has three hospitals:

- \* Skagit Valley Hospital is located in Mount Vernon, WA and is a 137-bed level III Trauma Center. This hospital offers a full range of services including surgical services, renal dialysis, and advanced diagnostics. The hospital also offers advanced heart and vascular care.
- \* PeaceHealth United General Hospital located in Sedro Woolley, WA is a 25-bed critical access hospital serving those in Burlington, Sedro-Woolley, Bayview, Samish Island, Concrete, Marblemount, Clear Lake, and areas of Mount Vernon.
- \* Island Hospital is located in Anacortes WA and is a level III trauma center with a total of 43 beds.

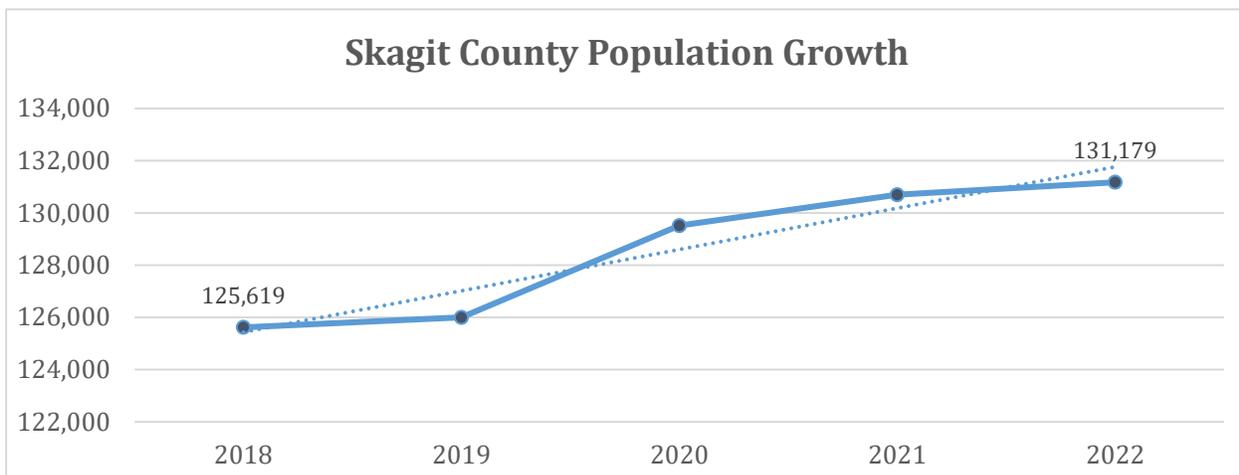


Figure 1. 2022 Skagit County Population Growth

## Jurisdiction and State Statutes

Jurisdiction is assumed only on deaths that occur within the geographical boundaries of Skagit County. This is regardless of whether the decedent is a resident of the county. Those Skagit County residents who die in another county do not fall under the jurisdiction of the Skagit County Coroner and would be investigated by the county in which the death occurred.

The Skagit County Coroner's Office assumes jurisdiction on all sudden, violent, traumatic, or unexpected deaths that occur within Skagit County. This includes deaths from apparent "natural diseases", but only when the individual had no recent physician of record or documented history of an existing medical condition that could credibly have caused the sudden death. Under these circumstances, it becomes the Coroner's responsibility to determine how and why a person died. Those who die of natural causes in a hospital, care facility, or under hospice care are not required by law to be reported to this office.

In accordance with the Revised Code of Washington (RCW 68.50), the following categories of deaths fall under the Coroner's jurisdiction:

- \* Sudden death of an apparent healthy person with no known or significant medical history
- \* Suspected natural deaths in which there is no current physician to certify the death
- \* Deaths in which there are abuse or neglect concerns (Adult Protective Services or Child Protective Services involvement)
- \* Violent or suspicious circumstances
- \* Traffic-related deaths
- \* Suicides
- \* All child deaths
- \* All premature births and still births over 20 weeks gestation
- \* All accidental deaths (falls, industrial, recreational)
- \* Deaths attributed to drug overdose or drug-related
- \* Deaths that occur while in legal/court/jail/prison custody
- \* Deaths due to unforeseen complications of therapy, surgery, or diagnostic procedures
- \* Deaths due to an injury or fracture that either was directly or contributory to decline to death, this includes those injuries that occurred years earlier.
- \* Deaths due to an undiagnosed or possible contagious disease that may be a public health hazard
- \* Indigent or unclaimed bodies

Only the Coroner can certify a death that is not considered to be natural (accident, suicide, homicide, or undetermined).

The role of the Coroner in such deaths is to investigate the facts and circumstances concerning the death for the purpose of determining the cause and manner of death and whether there is sufficient reason for the Coroner to believe that the death may have resulted from a criminal act or criminal neglect of a person other than the deceased. If the investigation does not provide the necessary information to make this determination, then the Coroner may perform an autopsy.

As part of the death investigation, the Coroner shall determine the identity of the deceased and notify the next of kin of the death. Per standards and office policy, a scientific identification will be done on all homicides as well as whenever a visual identification is not able to be performed or is not confirmatory. Current acceptable methods of scientific identification include: fingerprint comparison, dental comparison, imaging comparison, or DNA comparison.

### **Coroner’s Office Staff and Facilities**

The scene, the examination of the body (external examination or internal examination), along with researching the history/background of the decedent all work together to provide the most accurate cause and manner of death. This can only be accomplished with a devoted team of investigators.

In 2022, the Coroner’s Office staff included the Coroner, (1) full time Chief Deputy Coroner (1) Full Time Deputy Coroner and (6) on-call part-time deputy coroners (3 of these on-call deputies resigned due to outside opportunities). The office also had 1-3 interns to assist from time to time. The Coroner or Chief Deputy Coroner, along with the full time or on-call deputy coroner are on duty 24/7/365. The Coroner’s Office is contracted with (2) board certified forensic pathologists. It is the goal of this office, to have all deputy coroner’s certified with the American Board of Medicolegal Death Investigators (ABMDI) within 2 years of being hired.

#### **Staff:**

Hayley Thompson, D-ABMDI	Coroner
Deborah Hollis, D-ABMDI	Chief Deputy Coroner, 2016-present
Brittanna Flickinger, D-ABMDI	Part- time Deputy Coroner (2018 – Oct 2022) Promoted to Full Time Deputy Coroner Oct. 2022
Julia Welch	Part-time Deputy Coroner (2020-present)
Dylan Hartwig	Part-time Deputy Coroner (2020-present)
Radovan Woods	Part-time Deputy Coroner (winter 2021-present)
Caitlyn Borthwick	Part-time Deputy Coroner (Jan 2022-present)
Payton Richards	Part-time Deputy Coroner (March 2022-present)

The office utilizes (2) county vehicles: 2016 Ford Transit Van and 2018 Chevrolet Suburban that can be used in cases where terrain is difficult.

The Skagit County Coroner’s Office is located at 1700 Continental Place in Mount Vernon, WA. In September 2022, the Coroner’s Office completed construction and became a fully functional facility including office space and morgue/autopsy suite. The morgue capacity was upgraded from 5 to 17 and the autopsy suite included (2) autopsy stations, a portable digital x-ray machine, a floor scale, and electric lift. Prior to this remodel, the Skagit County Coroner’s Office shared a morgue and autopsy suite with a local hospital that was 2 miles away from the office.

The Skagit County Coroner’s Office staff are involved in a variety of activities in order to fulfill the required state statutes involving this office. These include responding to and investigating various

death scenes, performing postmortem examinations, confirming identification, certifying the cause and manner of death, and providing information and assistance to families. The Coroner, Chief Deputy Coroner, and Deputy Coroner's work to communicate directly with the families, which includes reviewing the findings and answering the many questions that accompany a sudden or traumatic loss of life.

In all cases, the identification and establishing and locating next-of-kin is necessary. In certain cases, the identification process can be extensive requiring outside assistance from an odontologist, pathologist, or out of state lab to analyze DNA. Finding the next of kin can be complicated as some individuals may have died leaving no next of kin or next of kin cannot be located. The Skagit County Coroner's Office ensures that all leads regarding next of kin are exhausted before establishing the case as indigent. This can be very time consuming but ultimately rewarding.

Occasionally there are individuals who pass away in Skagit County where the next of kin cannot be located or the next of kin declines responsibility for the decedent. In these situations, the Coroner's Office takes possession of the decedent and arranges for a cremation. The cremains of unclaimed individuals are kept by the Coroner's Office for a minimum of one year, after which the cremains are interred in a crypt donated to the county unless a family member or interested party come forward to claim the cremains. Claiming cremains after the County has taken responsibility for disposition requires a fee of \$600 in order to compensate the county for the cost of the cremation. Those unclaimed cremains who are veterans are released and transported down to the Tahoma National Cemetery where they are honored and interred.

All autopsies are performed by a contracted board-certified forensic pathologist at the direction of the Coroner. These pathologists work under the standards set forth by the International Association of Coroners and Medical Examiners (IACME). If an autopsy is required in order to determine the cause and manner of death, then various body fluids (blood and vitreous), tissues for microscopic and toxicological analysis will be taken in addition to the anatomical examination. Photographs are taken during autopsy and are essential to the case and the pathologist. Autopsy reports and related data from individual investigations are provided to law enforcement agencies, prosecuting attorneys, and other agencies such as Occupational Safety and Health Administration, Federal Aviation Administration, National Transportation Safety Board, Board of Consumer Product Safety, and Labor and Industries if they are involved in the case.

The Coroner provides information to local law enforcement and medical personnel as well as various community groups on a regular basis regarding the role and function of the Coroner's Office. In addition, the Coroner's Office collects and analyzes data on various cases to assist the community with prevention. Media releases regarding cases of interest as well as up-to-date statistics are posted on the Coroner's website.

## Strategic Goals of the Coroner's Office

The Skagit County Coroner's Office was awarded a \$250,000 grant through the National Institute of Justice in late September of 2020. The grant as well as additional funds from the County were used towards the improvement of the Skagit County Coroner's Office to include a modernized morgue and autopsy suite in the same building as the current administrative office. This project was completed in September 2022. As part of the grant requirement, the Coroner's Office initiated the accreditation process through the International Association of Coroners and Medical Examiners (IACME). The Skagit County Coroner's Office has identified the following goals and objectives necessary for the Coroner's office to continue to provide timely and legally defensible death investigations:

- \* All Deputy Coroners who have been employed by the Coroner's Office for 2 years will be certified with the American Board of Medicolegal Death Investigators (ABMDI) by the end of 2022.
- \* Shifts will be staffed to handle the daily caseload with little to no effect on the devised budget.
- \* Achieve accreditation with the International Association of Coroner and Medical Examiner's (IACME) by December 2023.
- \* Improve communication by providing monthly up-to-date death statistics on the Coroner's website every month.
- \* Annual report to be completed and displayed on the Coroner's website before the end of June each year.
- \* Expand and continue to provide communication throughout the community regarding the role and functions of the Coroner's Office.

## Death Investigations- An Overview

Death Investigations are categorized into 2 different categories: non-jurisdictional and jurisdictional. **Non-jurisdictional cases** are natural deaths that are reported to the Coroner’s Office when the death is unattended (excludes hospital, care facilities, and in-home hospice), but the decedent is under the care of a physician who has knowledge and awareness of the decedent’s health and will certify the death certificate. **Jurisdictional cases**, which can be natural or non-natural, are deaths where the Coroner certifies the cause and manner of an individual’s death. All non-natural (homicide, suicide, accident, undetermined, or pending) deaths must be certified by the Coroner.

Table 1. 2022 Statistical Summary

Reported Cases	454
Non-jurisdictional Cases	180
Jurisdictional Cases	274
Death Certified by Coroner’s Office	206
Natural Causes	288
Accidental	126
Suicide	25
Homicide	6
Undetermined	4
Skeletal Remains	1
Full Autopsies	70
Partial Autopsies	1
External Examination Only	78
Toxicological Tests Performed	143
Scene Responses	136
Unidentified Bodies	0
Unclaimed/Indigent Remains	8
Exhumations	0

For the year 2022, there were 1,462 deaths in Skagit County. This was a slight decrease from 2021 which had 1,519 deaths. See Figure 3. 2019-2022 Skagit County Total Deaths per year.

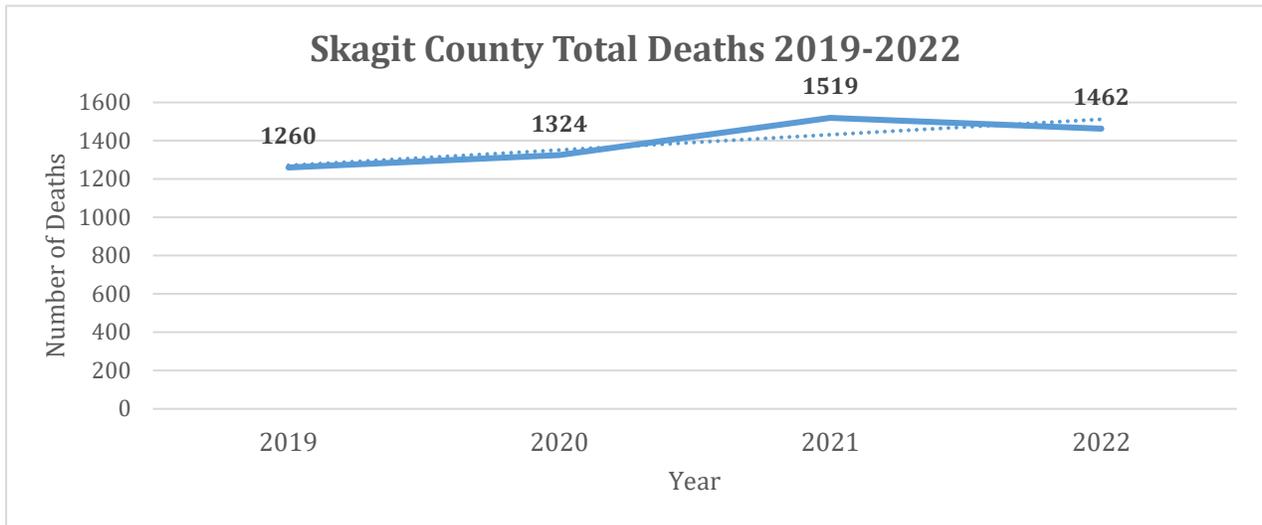


Figure 2. 2019-2022 Skagit County Total Deaths per Year

The Skagit County Coroner’s Office conducted 454 death investigations and assumed jurisdiction on 274 cases in 2022. Of those 274 cases, 206 were certified by the Coroner. The cause and manner of death as well as the decisions for non-jurisdictional and jurisdictional cases are often a matter of judgment and strict comparisons across years are not valid. In review of deaths over the past 4 years (2019-2022), the number of cases reported to the Coroner’s Office has remained between 400 and 500. The average number of autopsies per year has been 65 with an average of 75 external examinations (thorough body examination with toxicology samples). The number of scene responses increased from 102 in 2019 to 136 in 2022. Death certificates in 2019 and 2020 were under 200 cases and for 2021 and 2022, the number of death certificates certified by the office was over 200. This is illustrated in Figure 4. 2022 Skagit County Reported Cases and Coroner Involvement 2019-2022.

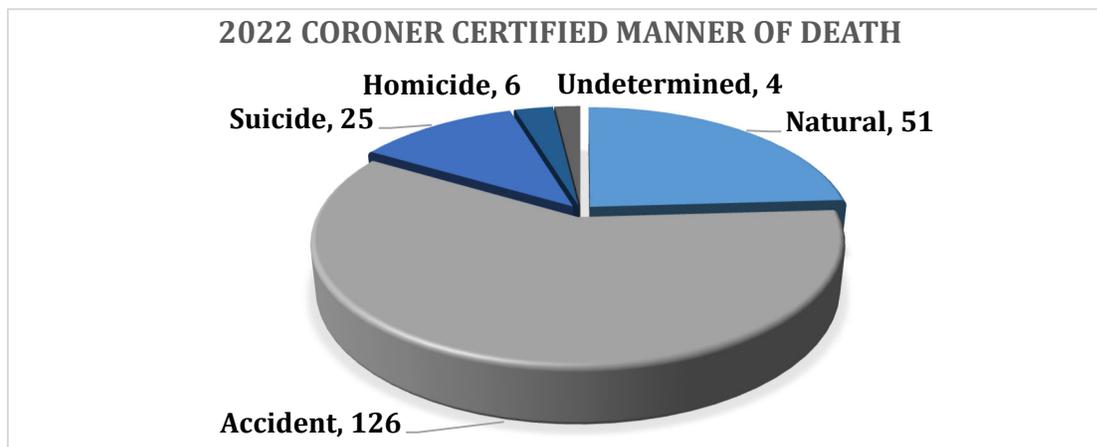


Figure 3. 2022 Skagit County Manner of Death

In the year 2022, there were 149 post-mortem examinations conducted by the Coroner's Office. This was an 11% increase from 2021 (134 post-mortem examinations). Of these 149 examinations, 71 required an autopsy to confirm or determine the cause and manner of death and 78 cases required an external examination of the body for documentation purposes. Toxicological testing was performed on all of these cases unless no samples could be obtained due to the circumstances of the case or the preservation of the decedent. Toxicology results averaged 60-90 days with some cases taking closer to 180 days.

### Reported Cases and Coroner Case Involvement 2019-2022

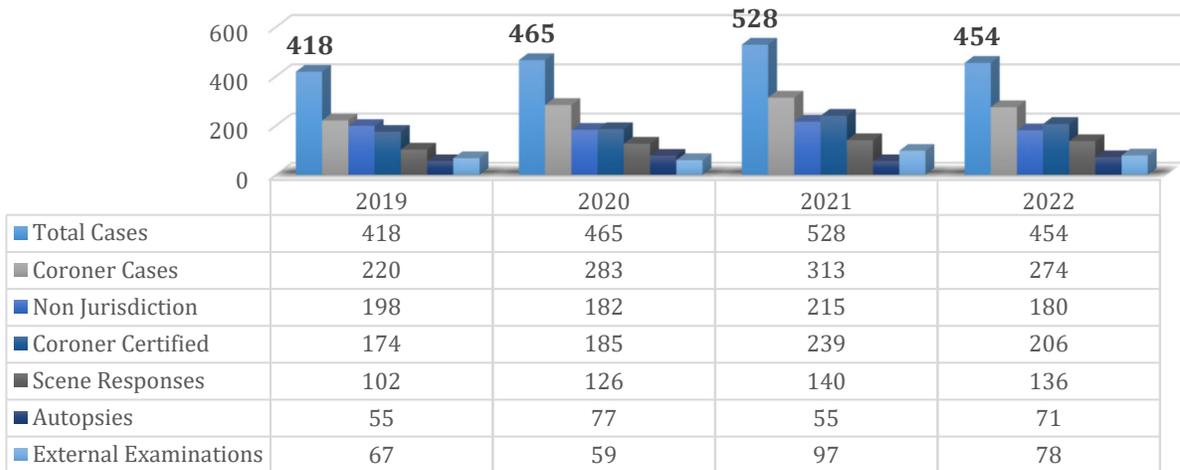


Figure 4. Skagit County Coroner Involvement 2019-2022

### 2022 Coroner Casework by Quarter

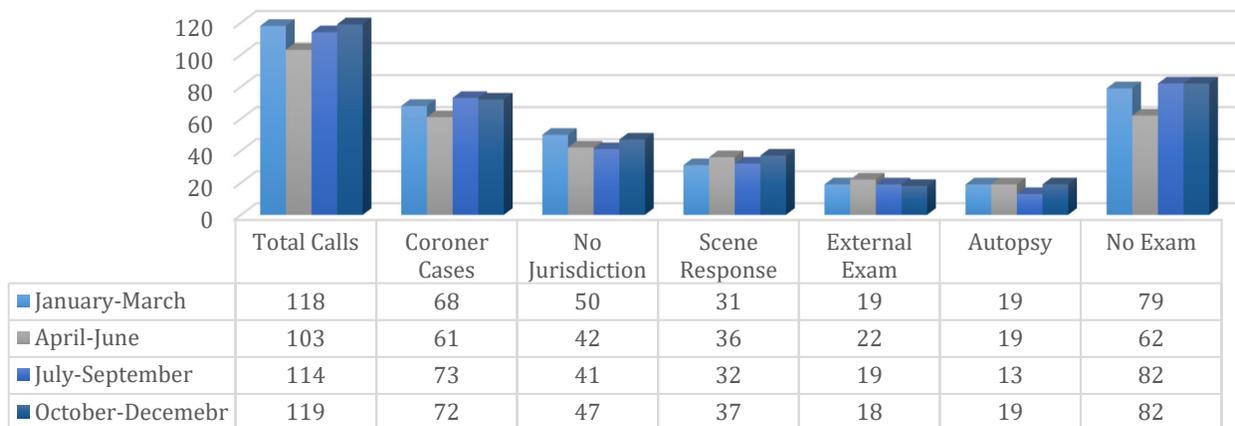


Figure 5. 2022 Skagit County Coroner Quarterly Casework

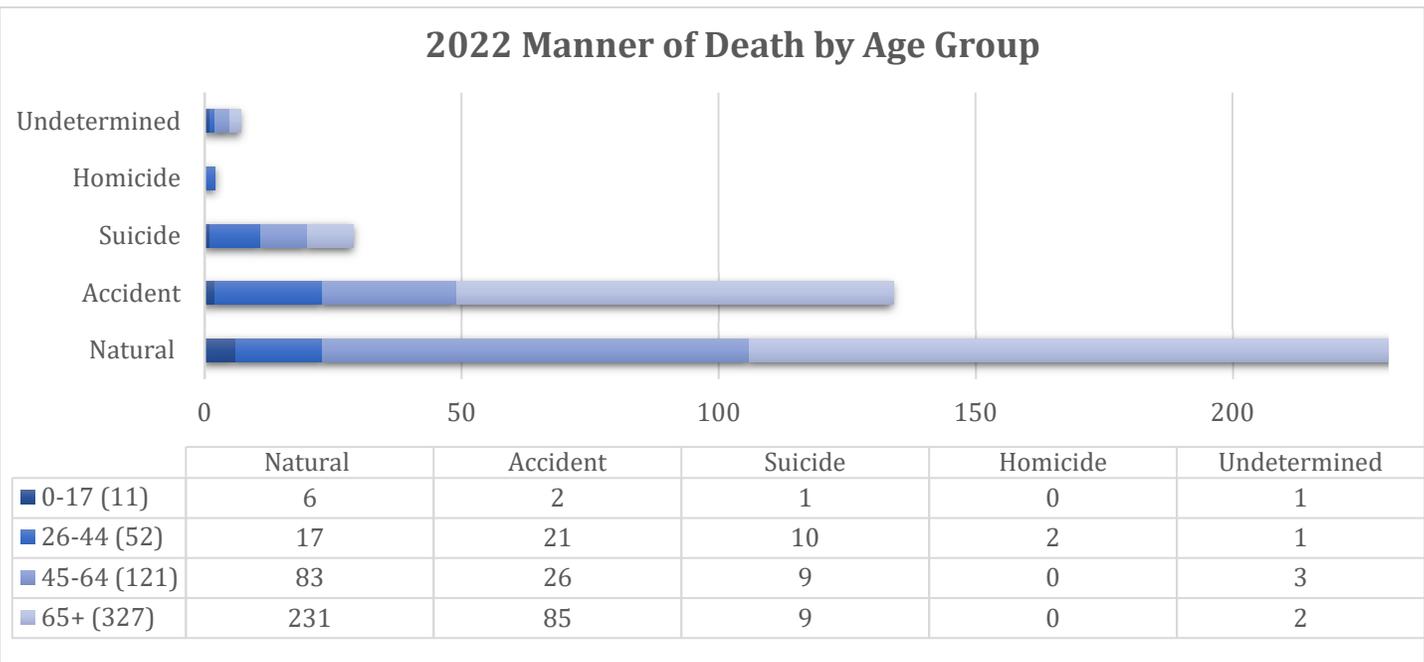


Figure 6. 2022 Skagit County Manner of Death by Age Group

### Manner of Death: Natural

The Coroner may certify natural deaths under many circumstances. These include a sudden and unexpected death in an apparently healthy individual, when there is no physician able or willing to certify the death or when there are suspicious circumstances surrounding the death.

In 2022, there were 288 natural deaths investigated by the Coroner’s Office accounting for 63% of the total deaths reported to the Coroner’s Office. A total of 51 cases (51/206, 24%) were certified by the Coroner’s office. Of these 51 deaths, the primary cause of death was cardiac-related (41/51, 80%) followed by pulmonary (5/51, 10%). Other natural causes included: (1) cancer, (1) renal disease, (1) thromboembolic, (1) aneurysm rupture, and (1) neurologic.

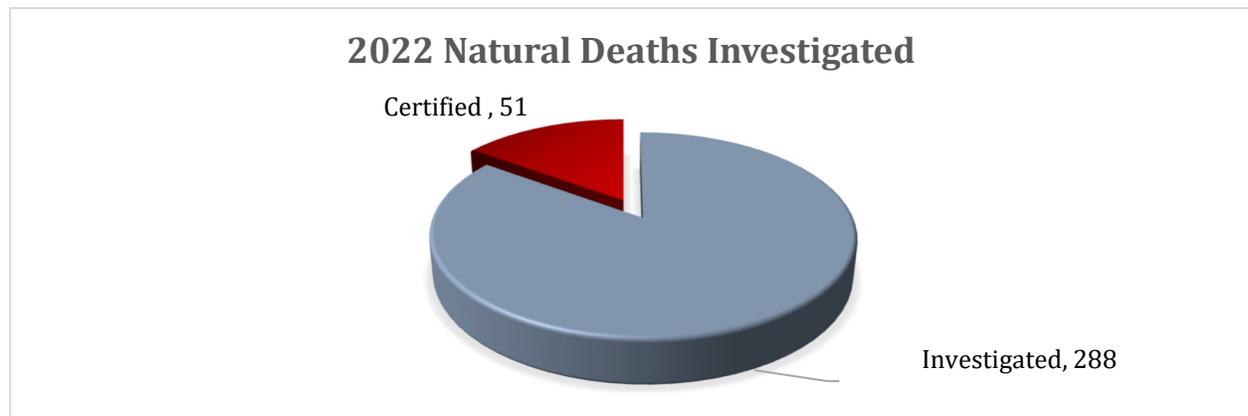


Figure 7. 2022 Skagit County Certified Natural Causes of Death by Coroner’s Office

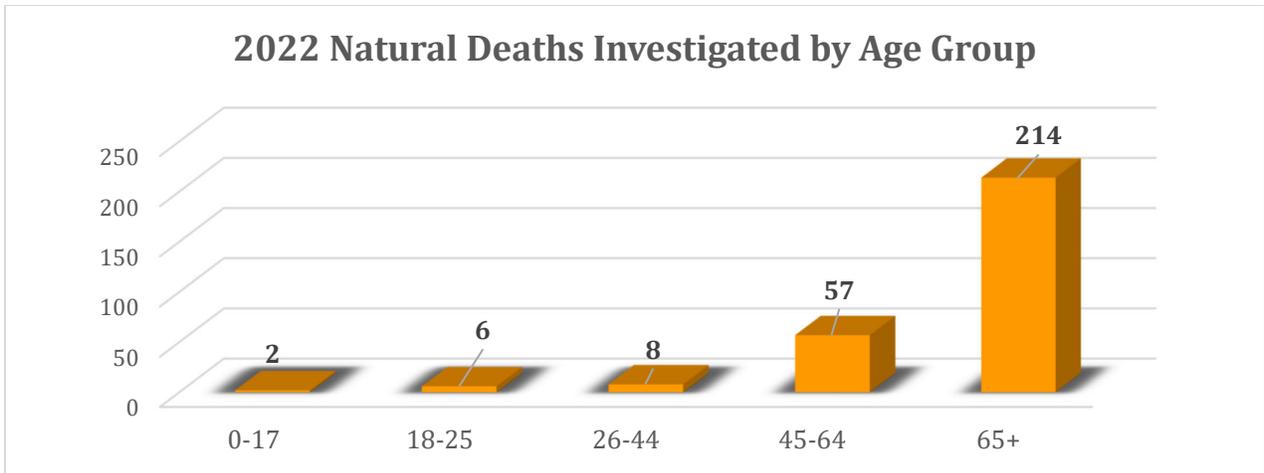


Figure 8. 2022 Natural Deaths Investigated by Age Group

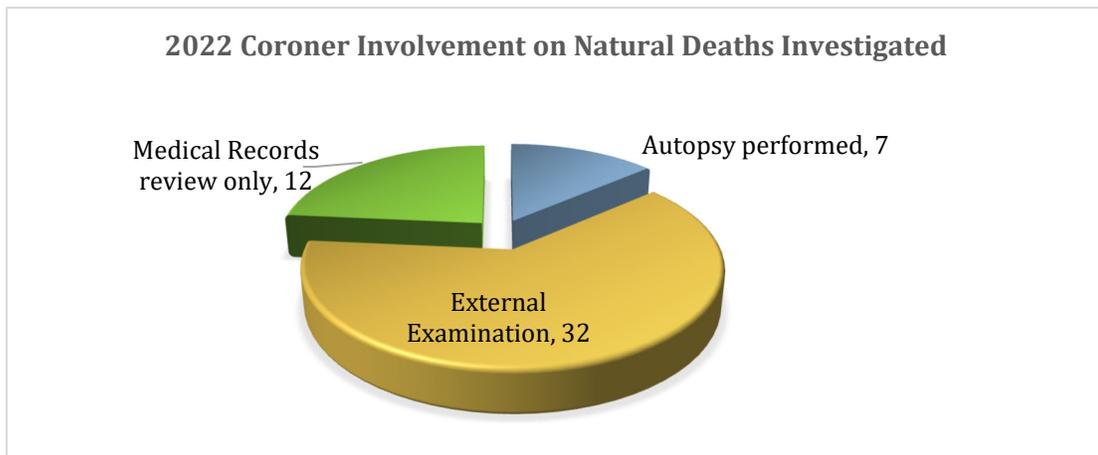


Figure 9. 2022 Skagit County Coroner Involvement on Reported Natural Deaths

## Manner of Death: Accident

The Skagit County Coroner's Office provides reports on all violent deaths to the Washington State Violent Death Reporting System. This includes all deaths where the manner of death was determined to be a homicide, accident, or suicide. Accidents are the second most common manner of death after natural deaths for Skagit County. Accidental deaths include all motor vehicle accidents, falls, industrial accidents, drownings, choking/asphyxiation cases, structural fires, and drug overdoses.

The Coroner certified 126 deaths as accidental in 2022 accounting for 27% of the total deaths reported to the Coroner's Office (45% of jurisdiction assumed cases). Of these 126 accidental deaths, 26% were due to drug overdose (33/126). Falls resulting in trauma including those deaths in which elderly patients had fallen resulting in trauma accounted for 49% of accidental deaths (62/126). Motor vehicle accidents made up 12% of accidental deaths (16/126). In 2022, there were (3) hypothermia cases, (1) drowning, (1) asphyxia related, (1) fire, (1) airplane crash, (1) boat accident, and (1) fetal death due to drug use. Since all accidental deaths are theoretically preventable, each such death is investigated for public health purposes.

### 2022 Accidental Types of Death

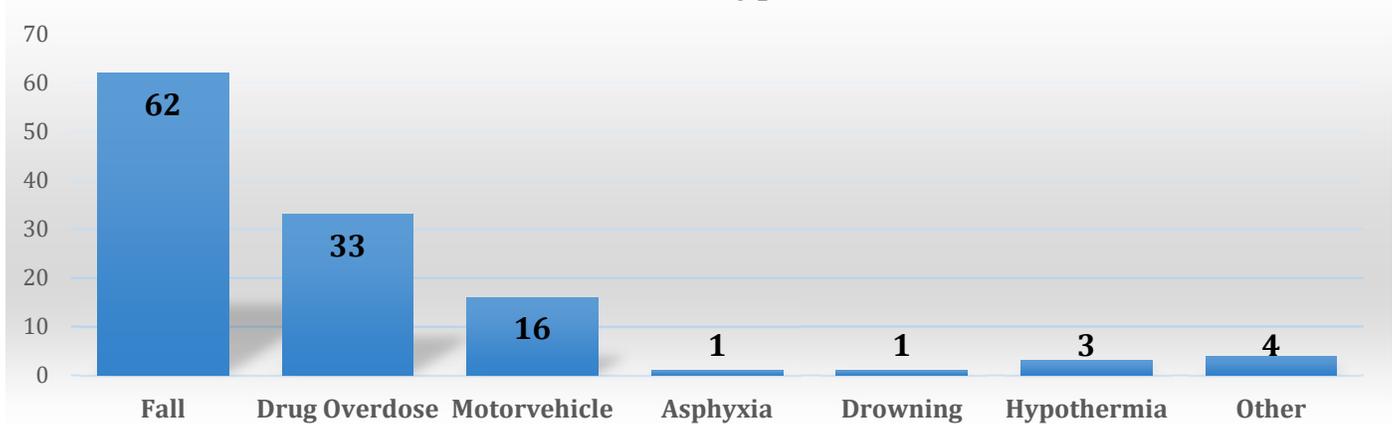


Figure 10. 2022 Skagit County Accidental Deaths

\*Falls include elderly individuals who died from injuries related to falling

### 2022 Accidental Deaths by Age Group

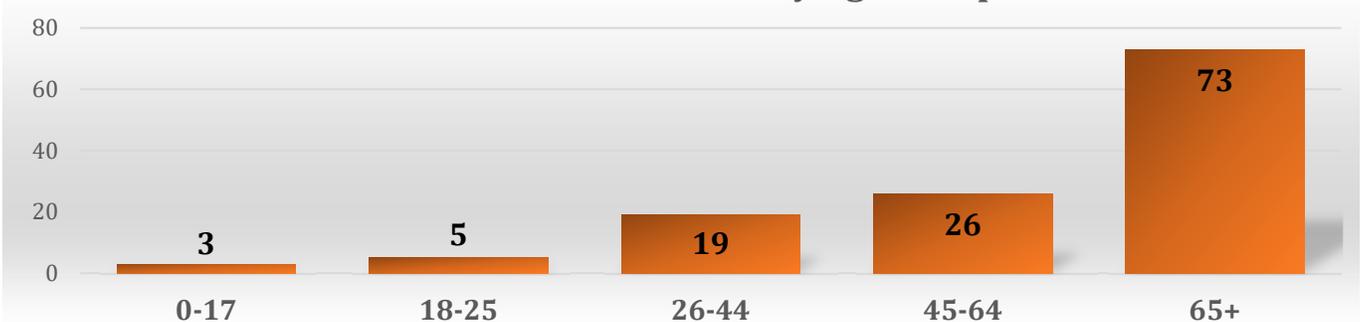


Figure 11. 2022 Skagit County Accidental Deaths by Age Group

## Drug Overdose

Drug overdose deaths are extensively investigated. It is important to note that a drug overdose is a diagnosis of exclusion requiring an autopsy to be performed on those who have little to no medical history in order to rule out other causes of death. The Skagit County Coroner's Office takes an active role in sharing its data and insights regarding overdose deaths with the county and outside partners.

In 2022, 33 deaths were certified by the Coroner's Office as an accidental drug overdose. Expanded forensic toxicology testing was performed on all suspected drug overdose deaths, allowing confirmation of the cause of death and the identification of both illicit and prescription drug abuse trends in Skagit County. The 2 most common drugs seen in Skagit County were methamphetamine and fentanyl.

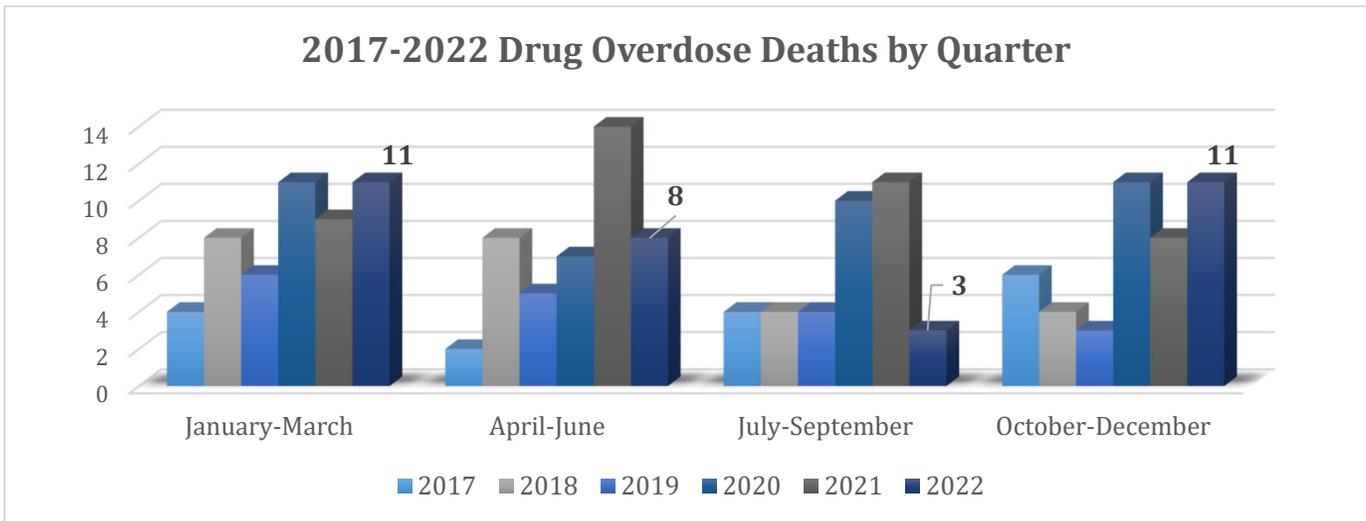


Figure 12: 2017-2022 Drug Overdose Deaths by Quarter

Fentanyl is a synthetic opioid pain reliever that is 50 times stronger than heroin and 100 times stronger than morphine. There are two types of fentanyl: pharmaceutical fentanyl and illicitly manufactured fentanyl. The majority of fentanyl-related deaths are linked to the illicitly manufactured fentanyl and are being seen in pill form (blue round pill with M/30 stamp) as well as mixed with other drugs to make it more powerful, addictive, and dangerous.

In 2017, Skagit County had its first fentanyl-related drug death. In 2018, the number of fentanyl-involved overdose deaths rose to 9. A change in community outreach and support regarding fentanyl resulted in a decrease in the number of fentanyl overdoses (3). Unfortunately, in the year 2020, the outreach and support services offered in the county ceased due to COVID-19. As a result, the total number of drug overdoses reached a record high of 40 cases and of those, 10 involved fentanyl. Since this time, the total number of fentanyl-involved drug overdose deaths has continued to increase. For 2022, 54% of the overdose deaths involved fentanyl (18/33). See Figure 13 regarding Fentanyl overdose deaths from 2017-2022.

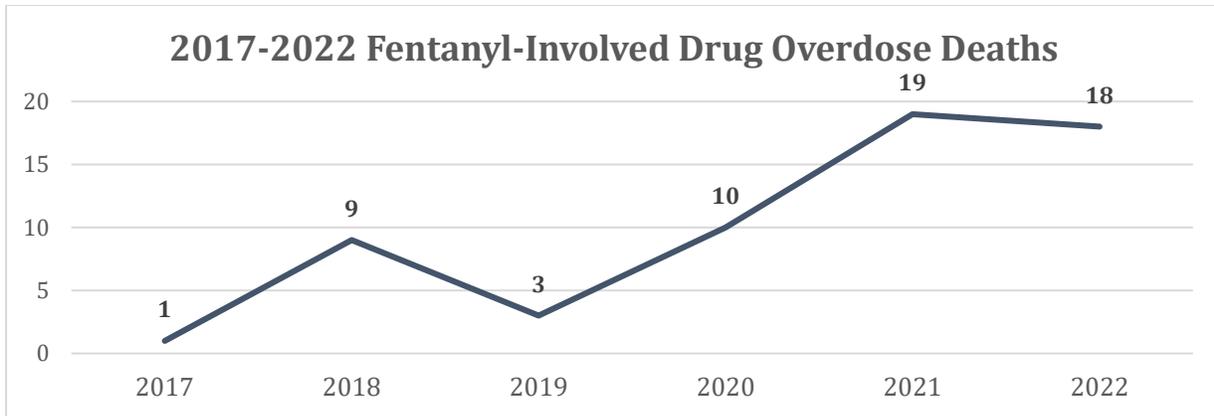


Figure 13. 2017-2022 Fentanyl-involved drug overdose deaths

Of the 33 overdose deaths, 23 (69%) were considered opioid overdoses. Only 1 of these opioid overdoses involved a single opioid (methadone), 3 involved heroin, and the remaining 19 had fentanyl. In majority of the opioid drug overdoses, there were no prescription medications involved. These were from pills or illicit drugs laced with other drugs such as fentanyl, methamphetamine, cocaine, benzodiazepines.

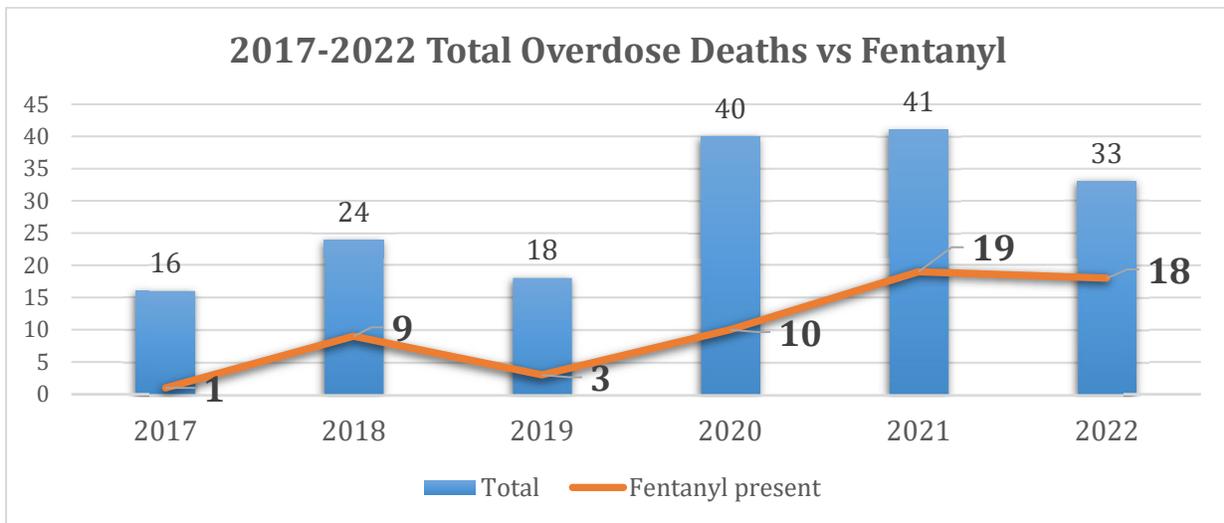


Figure 14. 2017-2021 Skagit County Total Accidental Overdose Deaths

Aside from Fentanyl overdoses, methamphetamine was the second highest drug present in overdose deaths. In 2022, the total number of deaths attributed to acute methamphetamine toxicity was 10, but methamphetamine was involved in 20 out of 33 (60%) drug overdose deaths.

Demographic analysis showed males (26/33, 78%) and Caucasians (24/33, 72%) to be mostly represented in drug overdose death statistics for Skagit County. The age range for overdose deaths was 0-65 years of age with age group 45-64 (16/33, 48%) having the highest number of deaths. There were 12 overdose deaths for the age group 26-44, and only 2 overdose deaths for age group 65 and older. With regards to youth, there was only 1 overdose for age group 18-25 (involved a 25-year-old) and unfortunately 2 overdose deaths involving a 6 year old and a stillbirth. In a large proportion of the overdose deaths (23/33, 69%), the individual was alone at the time of the overdose. Of the 33 drug overdoses, 11 had a previous history of overdose and of those 11, 6 of those individuals had overdosed in the last 12 months.

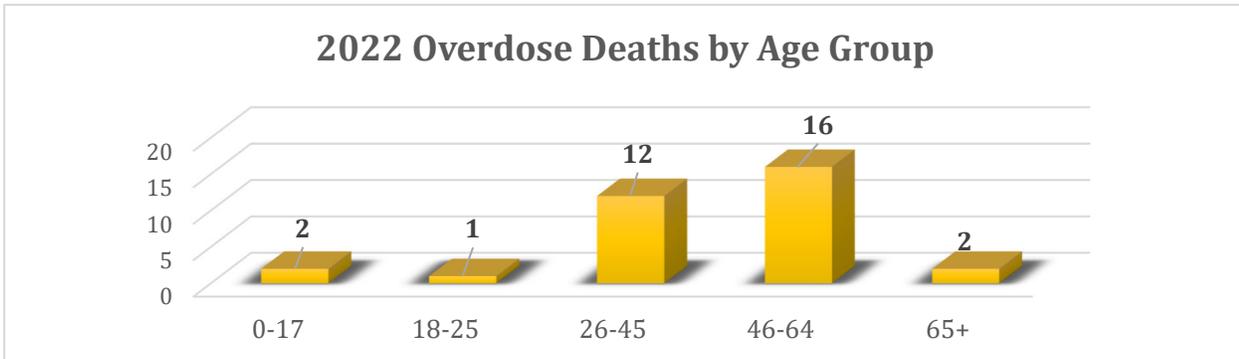


Figure 15. 2022 Overdose Deaths by Age Group

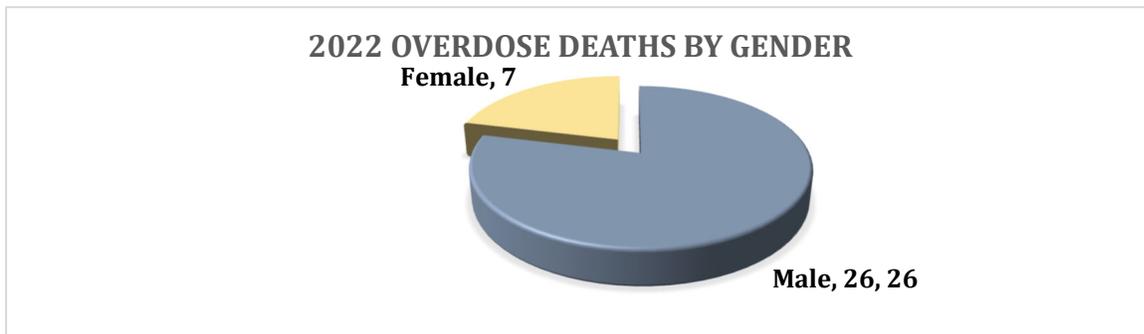


Figure 16. 2022 Overdose Deaths by Gender

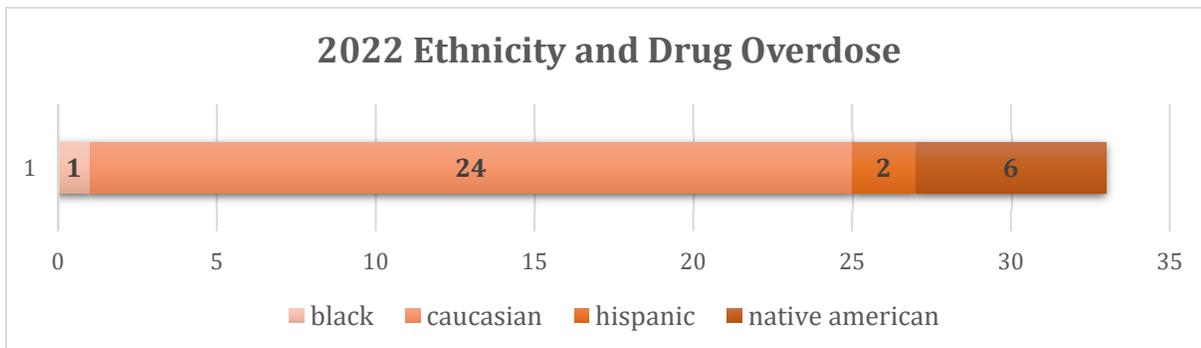


Figure 17. 2022 Drug Overdose Deaths and Ethnicity

### 2018-2022 Drug Overdose Deaths by City

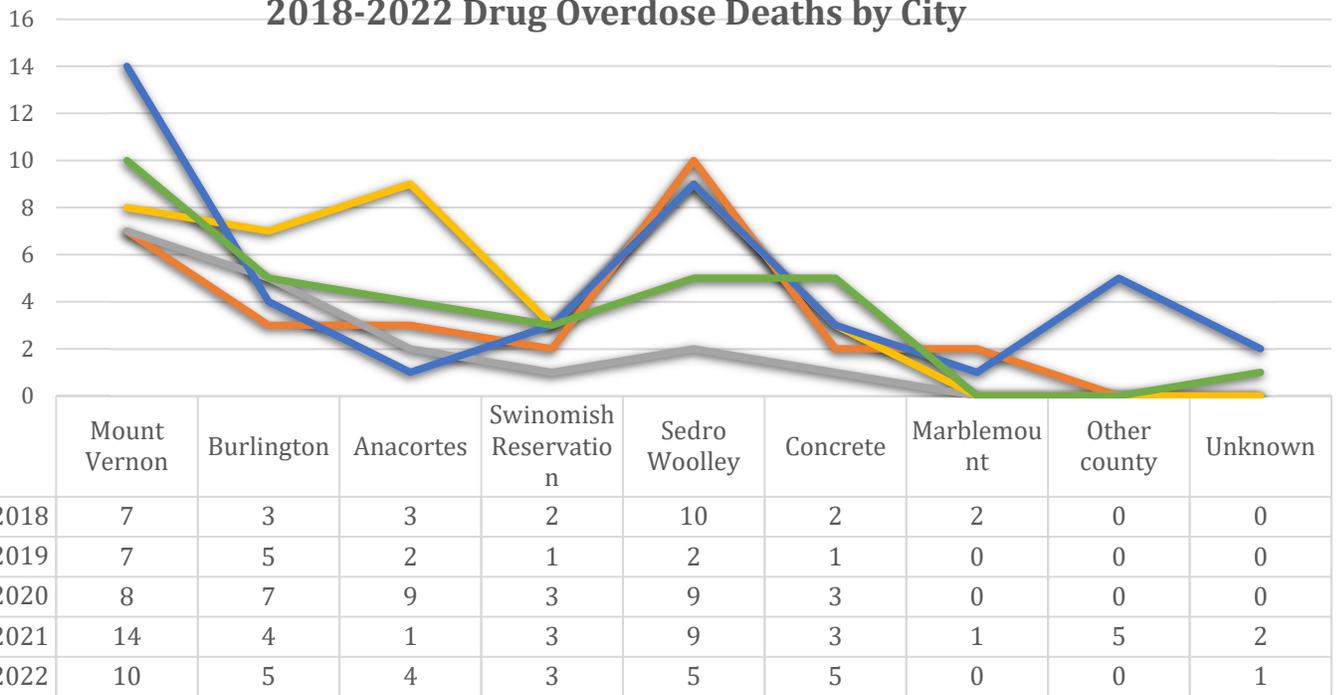


Figure 18. 2018-2022 Drug Overdose Deaths by City

### 2022 REASON FOR DRUG USE

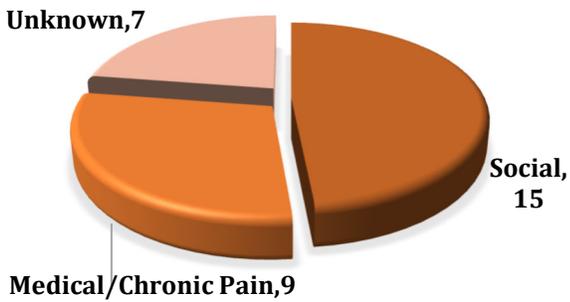


Figure 19: 2022 Reason for Drug Use

### 2022 OVERDOSE DEATHS: USED ALONE

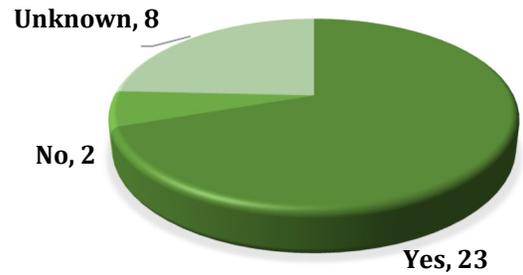


Figure 20. Used Alone?

### 2022 History of Past Overdose

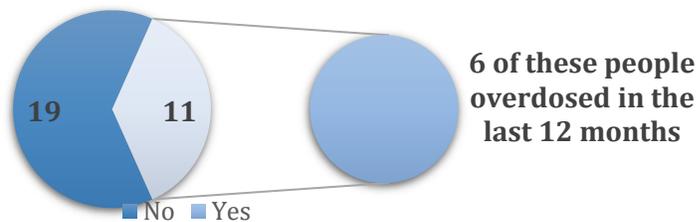


Figure 21: 2022 Skagit County History of Past Overdose

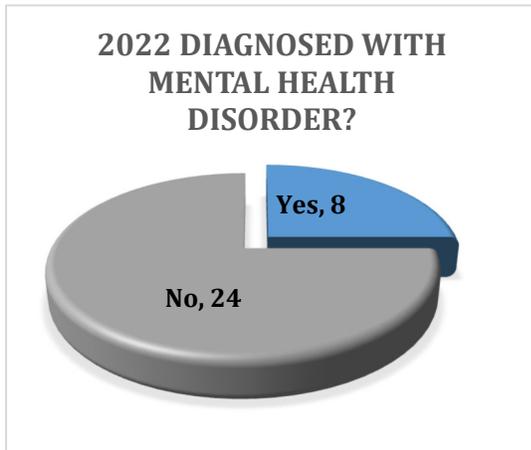


Figure 22: Mental Health Disorder

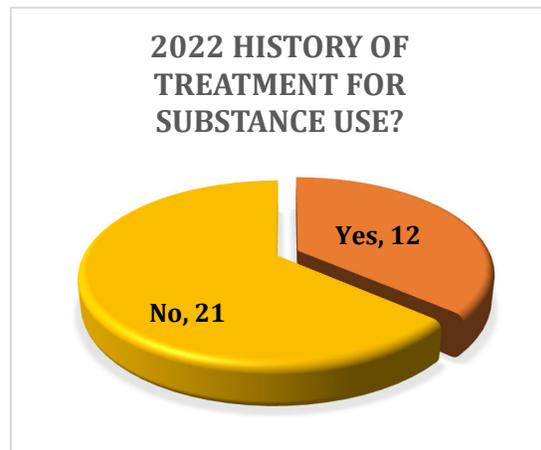


Figure 23: History of Treatment

## Falls

In 2022, there were 62 deaths certified as fall-related accounting for 49% of the accidental deaths in Skagit County. With the exception of 1 case (age 50), all of these deaths were in those aged 65 years and older. Falls were sometimes a direct cause of the death, such as when the fall results in head trauma leading to a subdural hemorrhage. Falls were also an indirect cause of death, especially in the elderly. For example, a fall may result in a fracture that required surgery, and the decedent later develops pneumonia or sepsis. Even though the decedent died of pneumonia, the fracture impacted their overall health and contributed to the death. This requires the manner of death to be an accident. In 2022, all 62 cases were from a ground level fall that resulted in trauma that either contributed directly or indirectly to the death.

## Motor Vehicle Accidents

Motor vehicle accidents accounted for 12% of the accidental deaths in Skagit County for 2022 (16/126 cases). This was the third largest group of accidental deaths. Decedents in the driver's seat accounted for 12 of the 16 deaths. Only 1 of the 16 deaths involved a motorcycle driver and the remaining 3 were pedestrians. Majority of the motor vehicle accidents were unrestrained drivers (7/12, 58%). The one motorcycle accident was helmeted. All cases had toxicological testing performed. Of the 16 motor vehicle accidents, 4 (25%) of those were positive for alcohol with 2 having levels above the legal limit of BAC 0.08. Presence of marijuana was found in 5 of the cases and 4 had illicit drugs in their system. Four of the cases had no drugs or alcohol present in their system. Of the 16 motor vehicle accidents, 12 (75%) died at the scene and the remaining 4 died either at a hospital or several years later.

Outside of motor vehicle accidents, there was 1 boat related accident and 1 single small airplane crash involving the pilot.

## Manner of Death: Suicide

Suicides are those deaths caused by self-inflicted injuries with the evidence of intent to end one's life. Evidence of intent can include explicit expression such as a suicide note or verbal threat, or an act constituting implicit intent, such as deliberately putting oneself on the train tracks in a roadway or placing a gun to one's head.

In 2022, there were 25 suicides, accounting for 5.5% (25/454) of the total deaths reported to the Coroner's Office and 12% (25/206) of deaths certified by the Coroner's Office. This was a decrease from 2021, which had the highest number of suicides recorded in one year (32). The primary method of suicide for 2022 was via firearm (9/25, 36%), followed by intentional overdose (7/25, 28%), and then hanging (4/25, 16%). There were 5 traffic-related suicides in 2022: 3 cases involved a train and 2 were pedestrian versus vehicles. The primary location type was in a private residence (14/25, 56%).

Individuals who committed suicide were between the ages of 16 and 81 years. The primary age group was 46-64 (11/25, 45%) followed by age group 65+ (7/25, 28%). Suicides in 2022 primarily involved males (20/25, 80%) and the predominant race was white (22/25, 88%).

In the majority of suicides for 2022, no note of intent was left (14/25, 56%). The primary type of note left was by letter (4/10, 40%) followed by text message (3) and verbal (3). The main reason for suicide was medical (9/25, 36%) followed by mental health (5/25, 20%). With regards to history of suicide attempts and ideations, only 4 (4/25, 16%) had attempted suicide in the past and 7 had a history of suicidal ideations. Of the 25 suicides, 9 had a history of substance abuse and only 2 ever sought treatment. Most suicides had a history of mental health disorder (16/25, 64%) with 12 (12/16, 75%) of them suffering from depression. In 3 of the suicides, there was a history of a family member or friend who had committed suicide.

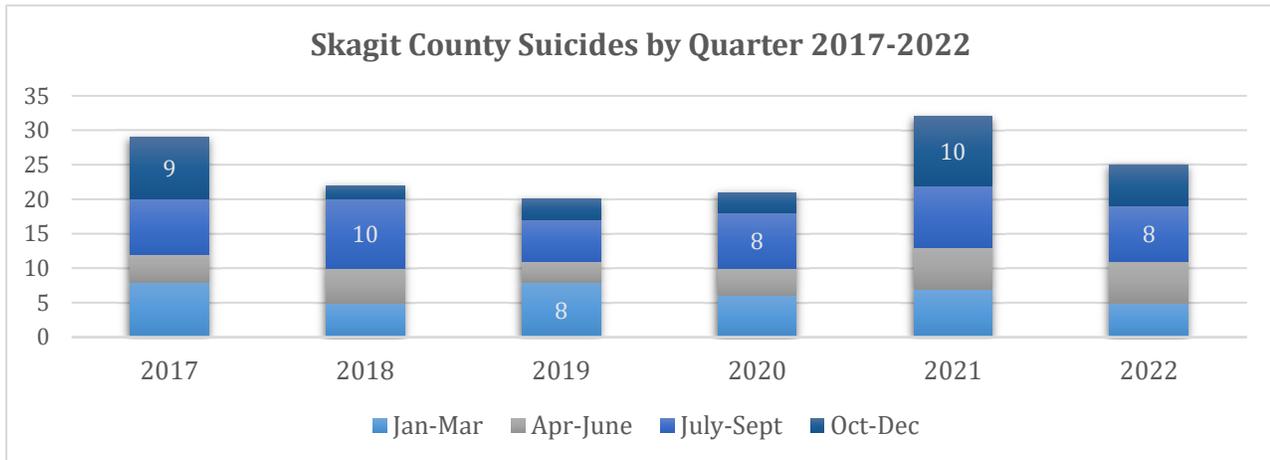


Figure 24. 2017-2022 Skagit County Suicides by Quarter

### Skagit County Suicides by Method 2017-2022

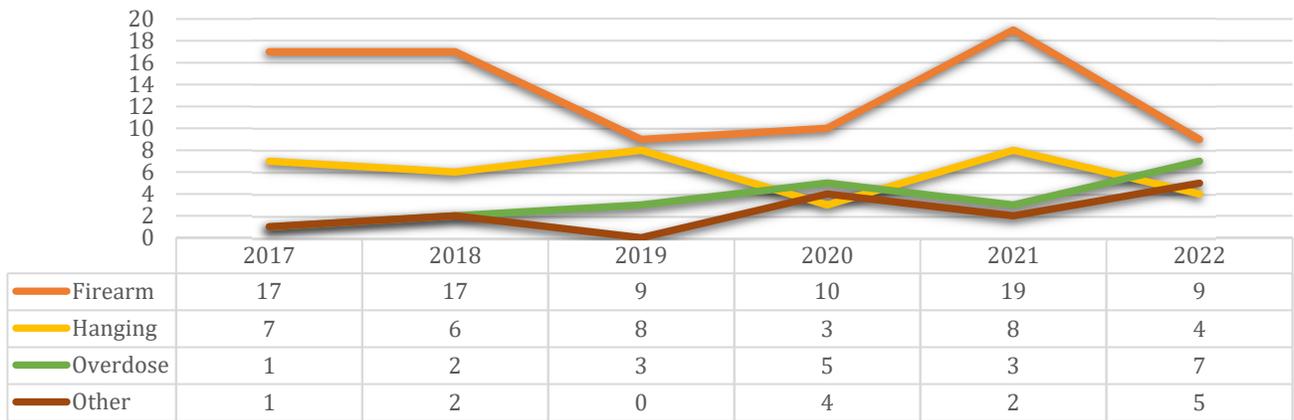


Figure 25. 2017-2022 Skagit County Suicides by Method

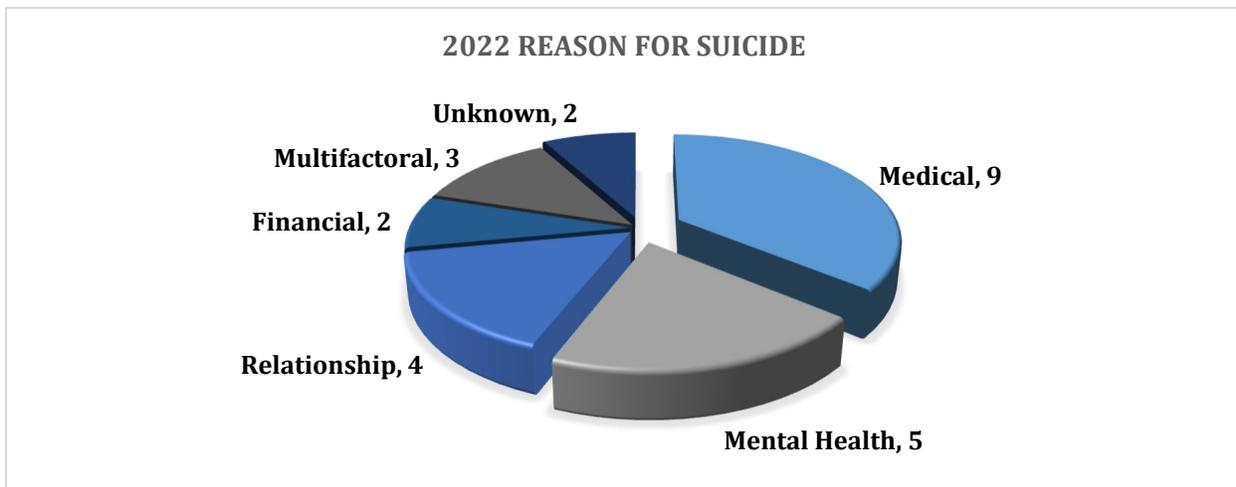


Figure 26: 2022 Reason for Suicide

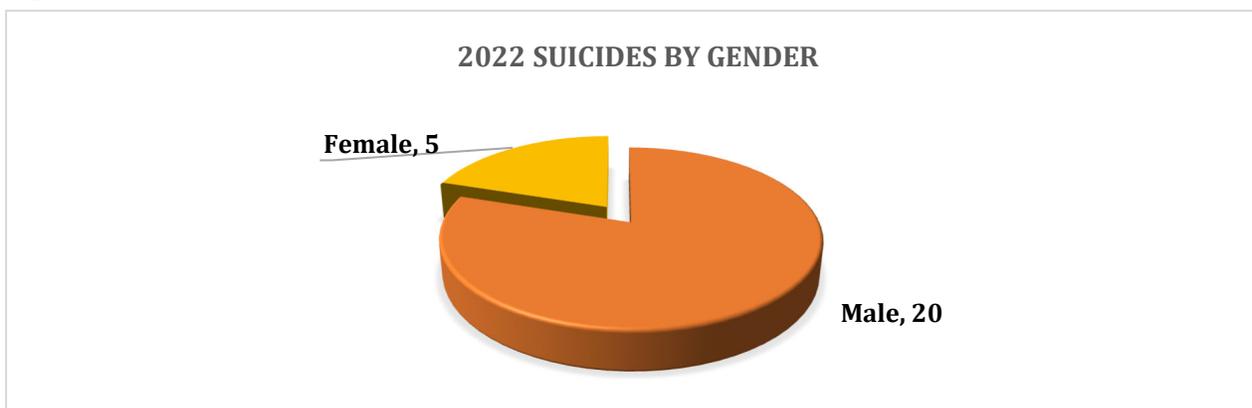


Figure 27: 2022 Suicide by Gender

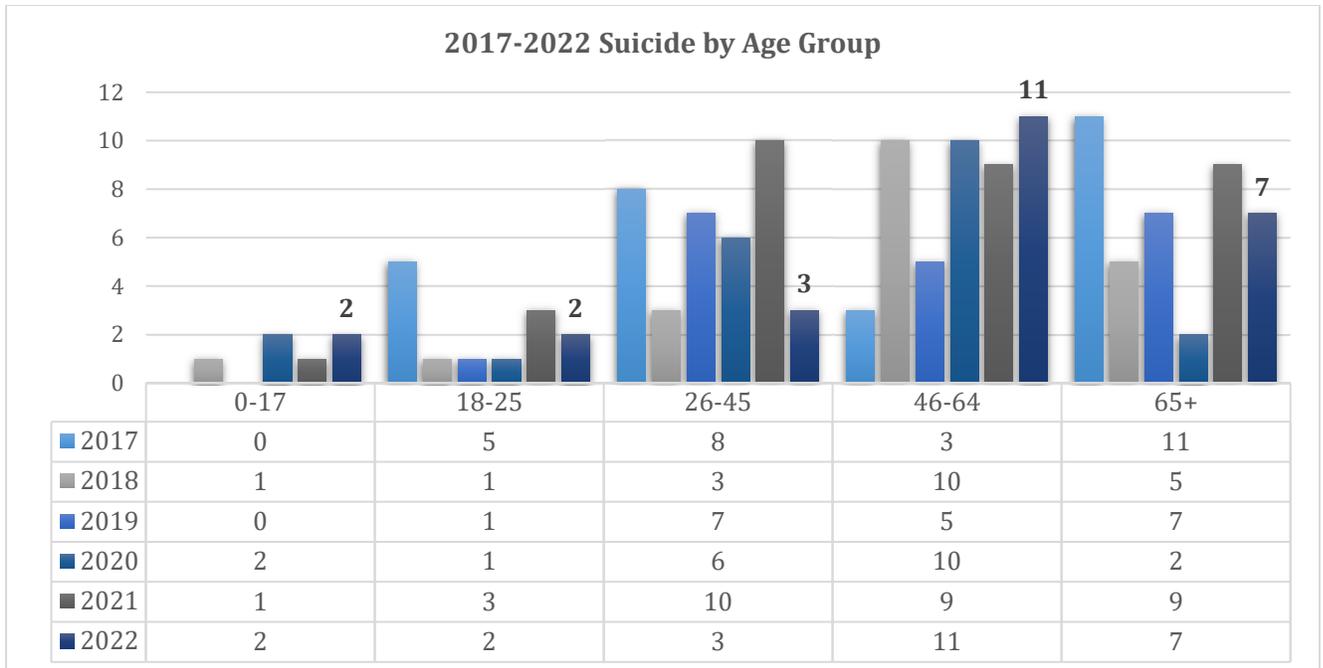


Figure 28. 2017-2022 Skagit County Suicides by Age Group

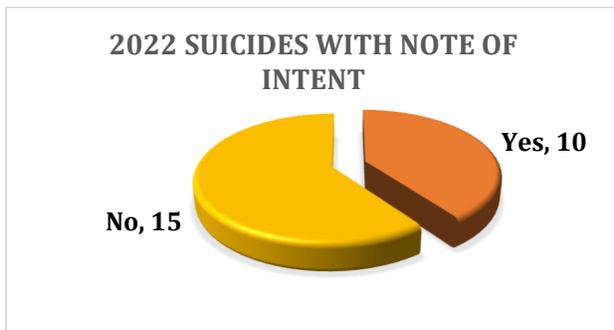


Figure 29: Suicide Note of Intent

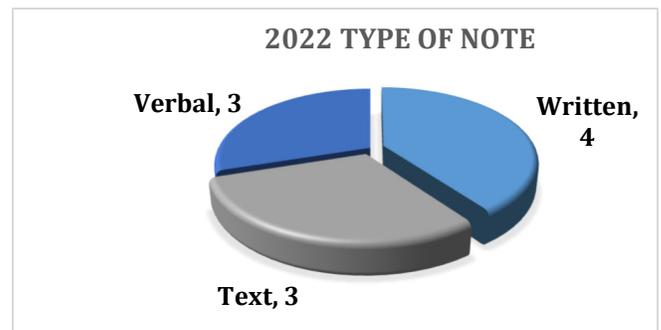


Figure 30. Type of Suicide Note

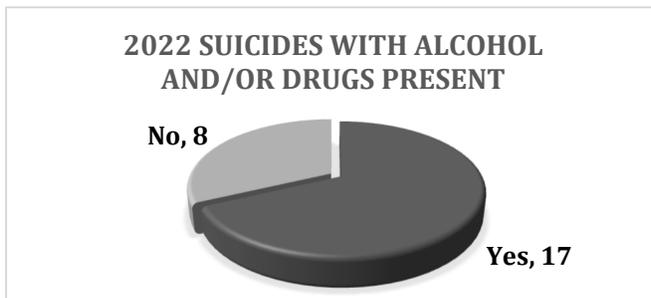


Figure 31. 2022 Skagit County Suicide Presence of Drugs or Alcohol

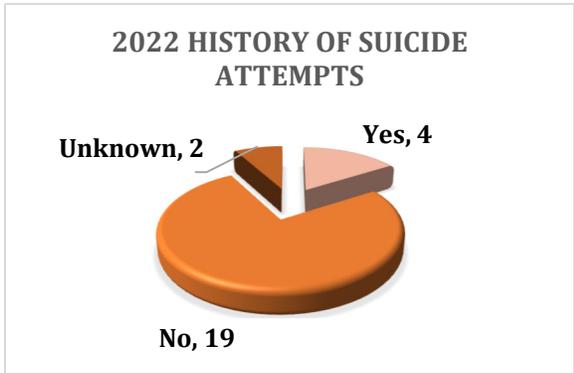


Figure 32. History of Suicide Attempts

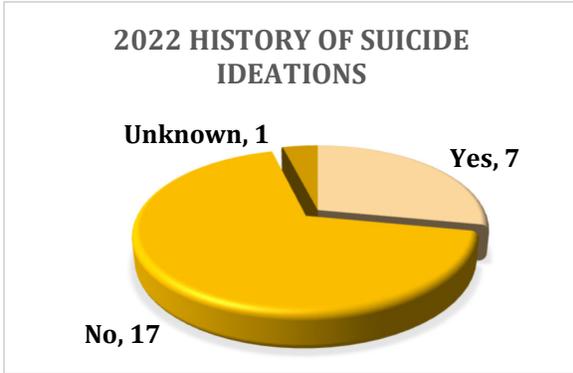


Figure 33. History of Suicide Ideations

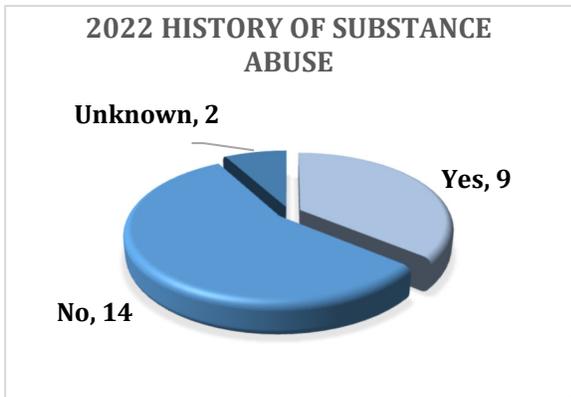


Figure 34. History of Substance Use

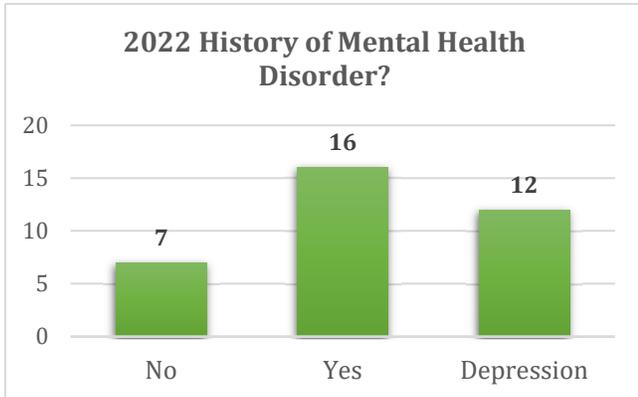


Figure 35. History of Mental Health Disorder

## Manner of Death: Homicide

Classification of Homicide is determined by the Coroner when the death results from injuries inflicted by another person. This does not imply the existence of criminal intent behind the action of the other person. There are cases in which the investigating law enforcement agency will investigate the case as a homicide. It is important to note, that there are certain cases in which this office will certify the death as an accident even though the case is being looked into as a homicide. Traffic fatalities in which a pedestrian is killed and the driver may show negligent behavior, probable intoxication, or fleeing of the scene will be classified as accident even though these causes may meet a legal definition of vehicular homicide. This decision is based on the assumption that there was no intent to kill the individual. Whether or not this type of case meets the legal definition of vehicular homicide, it is better left to the criminal justice system to decide. This goes the same for motor vehicle accidents and deaths resulting from acute drug intoxication. As long as there was no intent to kill the individual, then the manner of death will be classified by the Skagit County Coroner's Office as Accident.

In 2022, the Coroner classified 6 deaths as homicide, which accounts for only 2% of the total coroner cases. This was a sharp increase from the past 5 years in that the average number of homicides per year since 2017 has been 2 (see figure 36). In 5 out of 6 cases, the method of homicide was by firearm.

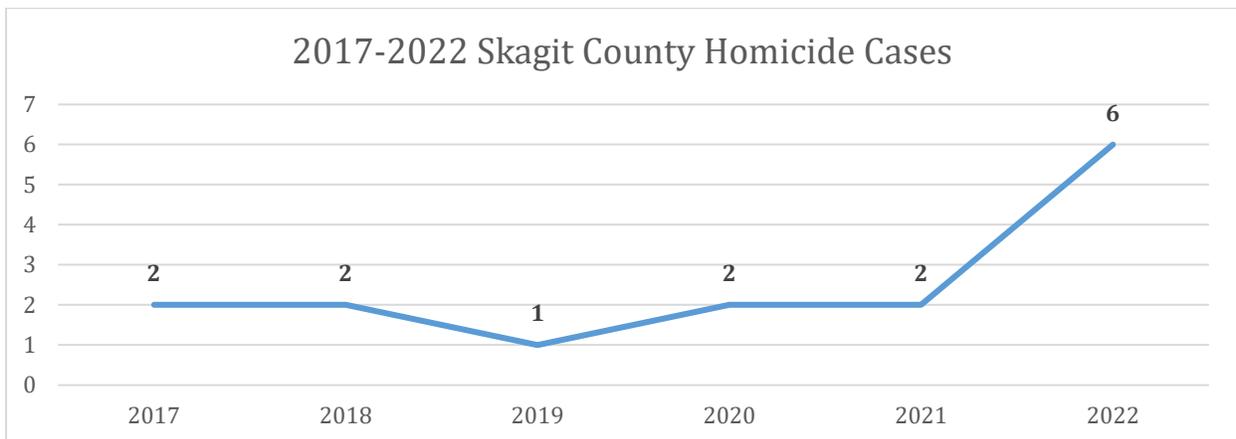


Figure 36. 2017-2022 Skagit County Homicide Cases

## Manner of Death: Undetermined

The Coroner’s Office certifies the manner of death as undetermined when available information regarding the circumstances of the case is insufficient to classify the death into one of the four manners of death: natural, accident, suicide, homicide. In some cases, serious doubt exists as to whether the injury occurred with intent or as a result of an accident. The information obtained from the case, may be lacking due to absence of background information or witnesses, or because of the lengthy delay between the time of death and the discovery of the body. If an extensive investigation and autopsy cannot clarify the circumstances, the death is classified as undetermined. If new credible information regarding the case is provided at a later time, then the manner of death can be changed. In 2022, the Skagit County Coroner’s Office certified 4 deaths as undetermined, which accounted for only 1% (4/274) of coroner involved cases.

## Tissue and Cornea Donation

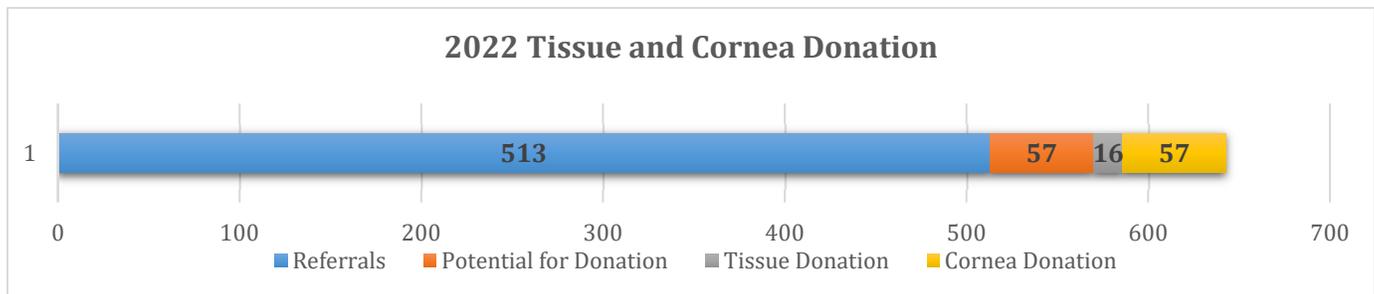


Figure 37. 2022 Skagit County Tissue and Cornea Donation

The Skagit County Coroner’s Office are adamant supporters of facilitating donation within the Skagit County Community. The Coroner’s Office uses a case reporting system that is linked to the Organ Procurement Organizations (OPO’s). This allows the Coroner’s Office to automatically notify the OPO’s of all potential organ, tissue (skin, long bones, heart for valves), and cornea donation cases regardless if the person died in the hospital or at another location. It is important to note, that there are specific criteria that qualifies cases for donation. The time interval between the last known alive time and the time of death as well as the decedent’s age and social history (drug use) are three main determining factors. In 2022, the Skagit County Coroner’s Office and local hospitals referred 449 cases for tissue and cornea donation. Of these 449 cases, the Skagit County Coroner’s Office, referred 64 cases.

### Cornea Donation

For 2022, there were a total of 48 cornea donors for Skagit County. Of those 48 donors, 9 came from the Skagit County Coroner’s Office (18%). The remainder were from the 3 hospitals in Skagit County.

### Tissue Donation

In 2021, a total of 449 tissue donation referrals were made from the local hospitals in Skagit County: Skagit Valley Hospital (377) and Island Hospital (72). Of the 449 referrals, 9 became tissue donors. The Skagit County Coroner’s Office referred 64 cases for potential tissue donation. Of those 64 cases, 30 had potential for donation and only 7 became tissue donors.