



New Mexico Office of the Medical Investigator

# Annual Report 2010



*“Wherever the art of medicine is practiced there is also a love of humanity.” –Hippocrates*

---

NM Office of the Medical Investigator  
MSC07 4040  
1 University of New Mexico  
Albuquerque, NM 87131-0001  
(505) 272-3053



**2010 Annual Report  
Office of the Medical Investigator  
State of New Mexico**

Ross E. Zumwalt, MD  
Chief Medical Investigator

Kurt Nolte, MD  
R. Ross Reichard, MD  
Assistant Chief Medical Investigators

Michelle Aurelius, MD  
Erin Brooks, MD  
Clare Bryce, MD  
Clarissa Krinsky, MD  
Ian Paul, MD  
Medical Investigators

**Board of Medical Investigations**

Paul B. Roth, M.D., Dean  
University of New Mexico/School of Medicine  
VP: Health Sciences Center  
Associate Vice President: Associate Dean Clinical Affairs  
Professor: Emergency Medicine Department

Alfredo Vigil, M.D., Secretary  
New Mexico Department of Health

Faron Segotta, Chief  
New Mexico State Police

Rodney May, Chairman  
State of New Mexico, Board of Thanatopractice

Alvin H. Warren, Secretary  
State of New Mexico Indian Affairs Department

Office of the Medical Investigator  
MSC 07 4040  
1 University of New Mexico  
Albuquerque, New Mexico 87131-0001  
Telephone: (505) 272-3053  
Fax: (505) 925-0546  
<http://omi.unm.edu>





**This annual report is dedicated to our friend and colleague Homer R. Campbell, DDS, who passed away September 23<sup>rd</sup>, 2010.** Dr. Campbell's dental career started as a Navy dentist, on active duty from 1956 to 1959. He kept his commission as a naval reserve officer retiring with the rank of Captain in 1987. He maintained a dental practice in Albuquerque for nearly 30 years and served as the Chief Forensic Odontologist at the NM Office of the Medical Investigator from 1972 until he retired in 2006. He was an associate professor of pathology at the UNM school of Medicine, Department of Pathology, and administered the Forensic Pathology Fellowship program at OMI. He was known for his pioneering work in patterned injury analysis using photographic enhancement techniques and testified throughout the country on pattern injury. His work allowed for the identification of missing persons and provided closure for families searching for lost loved ones

Dr. Campbell was active in the American Academy of Forensic Sciences for many years. He was the Odontology Section representative on the Academy Executive Committee, had served continuously since 1987 on the Editorial Board of the Journal of Forensic Sciences, was Chairman of the Academy's 1986 Annual Meeting Program and in 1988 he served as the Chairman of the Academy's Delegation to the USSR. Dr. Campbell was elected to the offices of Academy Treasurer, Vice President and was the Academy President from 1991 to 92. He has been awarded the honor of Distinguished Fellow of the Academy and was posthumously given the Lester Luntz award in February 2011.

We dedicate this report to the memory of Dr. Campbell and his years of service to OMI and New Mexico. He is missed.

**Office of the Medical Investigator (OMI)  
2010 Annual Report**

**Table of Contents**

**Introduction..... 1**  
    Preparation of the Annual Report..... 1

**Overview – Office of the Medical Investigator – 2010..... 1**  
    Reportable Deaths ..... 2  
    Statutory Duty ..... 2  
    Program Summary and Highlights for 2010..... 4  
        *Investigative Activity*..... 4  
        *Additional Investigation Facts* ..... 4  
        *OMI Toxicology*..... 4  
        *“Doe” and/or missing person cases* ..... 4  
    Training and Education ..... 5  
        *Forensic Pathologist Fellowship Program* ..... 5  
        *Certification Training* ..... 5  
        *Death Investigation Training* ..... 5  
        *Law Enforcement Education* ..... 5  
        *Public Education* ..... 6  
        *OMI Newsletter and website*..... 6  
    Grief Services Program..... 6  
    Donor Services Program ..... 6  
    Organizational Chart – Office of the Medical Investigator..... 7

**Total Cases ..... 8**  
    Figure 2 – Total Cases – 2001 – 2010..... 8  
    Figure 3 – Total Cases by Race/Ethnicity – 2010 ..... 9  
    Figure 4 – Total Cases by Age and Gender ..... 10  
    Table 1 – Total Cases – Autopsy Status – 2010..... 11  
    Table 2 – Total Cases – Case Distribution – 2010 ..... 11

**Cause and Manner of Death ..... 12**  
    Figure 5 – Total Cases – Manner of Death – 2010 ..... 12  
    Table 3 – Total Cases – Manner of Death by Gender – 2010..... 13  
    Table 4 – Total Cases – Manner of Death by Race/Ethnicity – 2010 ..... 13  
    Table 5 – Total Cases – Manner of Death by Age/Gender – 2010..... 14  
    Figure 6 – MAP – Deaths by County of Injury – 2010 ..... 15

Table 6 – Total Cases – County of Injury – 2010.....	16
Figure 7 – MAP – Deaths by County of Residence – 2010 .....	17
Table 7 – Total Cases – County of Residence – 2010.....	18
Cause of Death Summary.....	19
<b>Overview – Manner of Death – Natural Deaths .....</b>	<b>20</b>
Figure 8 – Natural Deaths – 2001 – 2010.....	20
Figure 9 – Natural Deaths by Race/Ethnicity – 2010.....	20
Figure 10 – Natural Deaths by Age and Gender – 2010 .....	21
Natural Deaths – Summary.....	21
<b>Overview – Manner of Death – Accidental Deaths .....</b>	<b>22</b>
Figure 11 – Accidental Deaths – 2001 – 2010.....	22
Figure 12 – Accidental Deaths by Race/Ethnicity – 2010 .....	22
Figure 13 – Accidental Deaths by Age and Gender – 2010.....	23
Table 8 – Accidental Deaths – County of Injury – 2001 - 2010.....	24
Table 9 – Accidental Deaths – County of Pronouncement - 2001 – 2010.....	25
Accidental Deaths – Summary.....	26
<b>Overview – Manner of Death – Suicide Deaths .....</b>	<b>27</b>
Figure 14 – Suicide Deaths – 2001 – 2010.....	27
Figure 15 – Suicide Deaths by Race/Ethnicity – 2010 .....	27
Figure 16 – Suicide Deaths by Age and Gender – 2010 .....	28
Figure 17 – Suicide Deaths by Month – 2010.....	28
Figure 18 – Suicide Deaths by Day of the Week – 2010 .....	28
Table 10 – Suicide Deaths by County of Injury - 2001 - 2010 .....	29
Table 11 – Suicide Deaths by County of Pronouncement – 2001 - 2010.....	30
Suicide Deaths – Summary.....	31
<b>Overview – Manner of Death – Homicide Deaths .....</b>	<b>32</b>
Figure 19 – Homicide Deaths – 2001 – 2010 .....	32
Figure 20 – Homicide Deaths by Race/Ethnicity – 2010 .....	32
Figure 21 – Homicide Deaths by Age and Gender – 2010 .....	33
Table 12 – Homicide Deaths – County of Injury – 2001 - 2010 .....	34
Table 13 – Homicide Deaths – County of Pronouncement – 2001 - 2010.....	35
Homicide Deaths – Summary .....	36
Figure 22 – NVDRS Summary.....	36
<b>Overview – Manner of Death – Undetermined Deaths .....</b>	<b>37</b>
Figure 23 – Undetermined Deaths – 2001 – 2010 .....	37
Figure 24 – Undetermined Deaths by Race/Ethnicity – 2010 .....	37
Figure 25 – Undetermined Deaths by Age and Gender – 2010.....	38
Undetermined Deaths – Summary.....	38

<b>Deaths of Children (19 Years of Age and Younger).....</b>	<b>39</b>
Figure 26 – Children Deaths – 2001 – 2010.....	39
Figure 27 – Children – Deaths by Race/Ethnicity – 2010.....	39
Figure 28 – Children – Deaths by Age and Gender – 2010.....	40
Figure 29 – Children – Total Cases – Manner of Death – 2010 .....	40
<b>Overview – Children – Manner of Death – Natural Deaths .....</b>	<b>41</b>
Figure 30 – Children – Natural Deaths – 2001 – 2010 .....	41
Figure 31 – Children – Natural Deaths by Race/Ethnicity – 2010 .....	41
Figure 32 – Children – Natural Deaths by Age and Gender – 2010 .....	42
<b>Overview – Children – Manner of Death – Accidental Deaths .....</b>	<b>43</b>
Figure 33 – Children – Accidental Deaths – 2001 – 2010 .....	43
Figure 34 – Children – Accidental Deaths by Race/Ethnicity – 2010 .....	43
Figure 35 – Children – Accidental Deaths by Age and Gender – 2010 .....	44
Table 14 – Children – Accidental Deaths – Cause of Death – 2010 .....	44
<b>Overview – Children – Manner of Death – Suicide Deaths .....</b>	<b>45</b>
Figure 36 – Children – Suicide Deaths – 2001 – 2010 .....	45
Figure 37 – Children – Suicide Deaths by Race/Ethnicity – 2010 .....	45
Figure 38 – Children – Suicide Deaths by Age and Gender – 2010.....	46
Figure 39 – Children – Suicide Deaths by Month – 2010 .....	46
Figure 40 – Children – Suicide Deaths by Day of the Week – 2010 .....	46
Table 15 – Children – Suicide Deaths – Cause of Death – 2010.....	47
Suicide in Children – Summary .....	47
<b>Overview – Children – Manner of Death – Homicide Deaths .....</b>	<b>48</b>
Figure 41 – Children – Homicide Deaths – 2001 – 2010 .....	48
Figure 42 – Children – Homicide Deaths by Race/Ethnicity – 2010 .....	48
Figure 43 – Children – Homicide Deaths by Age and Gender – 2010 .....	49
Table 16 – Children – Homicide Deaths – Cause of Death – 2010 .....	49
Homicide Deaths of Children – Summary .....	49
<b>Overview – Children – Manner of Death – Undetermined Deaths .....</b>	<b>50</b>
<b>Deaths of Children in New Mexico – 2010 Summary .....</b>	<b>50</b>
<b>Overview – Children – SIDS Deaths</b>	
Figure 44 – Children – SIDS (Natural) Deaths – 2001 – 2010 .....	51
Figure 45 – Children – SIDS (Natural) Deaths by Race/Ethnicity .....	51
<b>Overview – Ethanol Related Deaths .....</b>	<b>52</b>
Figure 47 – Ethanol Related Deaths – 2001 – 2010 .....	52
Figure 48 – Ethanol Related Deaths – Manner of Death – 2010 .....	52
Figure 49 – Ethanol Related Deaths by Race/Ethnicity – 2010 .....	53
Figure 50 – Ethanol Related Deaths by Age and Gender – 2010 .....	53

Ethanol Related Deaths – Undetermined – 2010 ..... 54

Ethanol Related Deaths – Summary.....54

**Motor Vehicle Related Deaths (Ethanol Present in Decedent) ..... 55**

Figure 51 – Motor Vehicle Deaths – 2001 – 2010 ..... 55

Figure 52 – Motor Vehicle Deaths by Race/Ethnicity – 2010 ..... 55

Figure 53 – Motor Vehicle Deaths by Age and Gender – 2010 ..... 56

Table 17 – Motor Vehicle Related Deaths – Method – 2010 ..... 56

Table 18 – Motor Vehicle Related Deaths – Seat Belt Use – 2010 ..... 57

Table 19 – Motor Vehicle Related Deaths – Air Bag Use – 2010..... 57

**Drug Caused Deaths ..... 58**

Figure 54 – Drug Caused Deaths – 2001 – 2010..... 58

Figure 55 – Drug Caused Deaths by Race/Ethnicity – 2010 ..... 58

Figure 56 – Drug Caused Deaths by Age and Gender – 2010 ..... 59

Drug Caused Deaths – Summary ..... 59

Table 22 – Drug Caused Deaths – Counties of Injury and Pronouncement – 2010 ..... 60

**Glossary ..... 61**



## **Introduction**

---

The Office of the Medical Investigator (OMI) investigates any death occurring in the State of New Mexico that is sudden, violent, untimely, unexpected or where a person is found dead and the cause of death is unknown. OMI performed services for a total of 5,249 deaths. A detailed breakout of the case distribution can be found in this report.

This report is presented in two sections. The first section of the report summarizes the activity of the OMI. The second presents data routinely collected by the OMI in a manner that answers questions related to mortality and public health from a medical examiner's perspective. The tables and figures included in the report are designed to be self-explanatory, and we hope you find them easy to read and understand. Definitions can be found in the Glossary and may provide assistance with the terminology encountered in the report. Readers with special interests, needs, or whose questions are not answered by this report may contact the Computer and Information Services Section of the OMI. Additionally, we encourage interested researchers to contact the Bureau of Vital Statistics for complete mortality statistics.

Comments or suggestions concerning the content, format or clarity of the report are always welcome.

## **Preparation of the Annual Report**

---

The OMI data from which this report was compiled are maintained on a web-based database management system located at the New Mexico Scientific Laboratories in Albuquerque. OMI faculty Sarah Lathrop, DVM, PH.D and, J&J Technical Services staff Greta Freienmuth and contractor Michelle Gibson, using Microsoft Office 2000 Professional prepared this report. UNM Health Sciences Center – Digital Printing and Document Services printed and bound the final distribution copies. Electronic copies of this report may be downloaded in .PDF format from the OMI website: [omi.unm.edu](http://omi.unm.edu)

## **Overview – Office of the Medical Investigator – 2010**

The Office of the Medical Investigator (OMI) was created by the New Mexico State Legislature in 1972 and became operational in 1973. Replacing the county coroner system, the OMI was tasked<sup>1</sup> with investigating all reportable deaths occurring in New Mexico, to subsequently determine the cause and manner of death in such cases, and to provide formal death certification.

---

<sup>1</sup>NMSA Statute 24-11-1, et seq., and 7-NMAC 3.2.8

## **Reportable Deaths:**

---

Those deaths to be reported to the OMI include all deaths occurring in New Mexico as outlined below regardless of where or when the initial injuring event occurred.

- Any death that occurs suddenly and unexpectedly, that is, when the person has not been under medical care for significant, heart, lung or other disease.
- Any death suspected to be due to violence, i.e., suicidal, accidental or homicidal injury, regardless of when or where the injury occurred.
- Any death suspected to be due to alcohol intoxication or the result of exposure to toxic agents.
- Any death of a resident housed in a county or state institution, regardless of where death occurs. This refers to any ward of the state or individual placed in such a facility by legal authorization.
- Any death of a person in the custody of law enforcement officers.
- Any death of a person in a nursing home or other private institution without recent medical attendance.
- Any death that occurs unexpectedly during, in association with, or as a result of diagnostic, therapeutic, surgical or anesthetic procedures.
- Any death alleged to have been caused by an act of malpractice.
- Any death suspected to be involved with the decedent's occupation.
- Any death unattended by physician.
- Any death due to neglect.
- Any stillbirth of 20 or more weeks' gestation unattended by a physician.
- Any maternal death to include death of a pregnant woman regardless of the length of the pregnancy, and up to six weeks post delivery, even where the cause of death is unrelated to the pregnancy.
- Any death of an infant or child where the medical history has not established some pre-existing medical condition.
- Any death, which is possibly, directly or indirectly, attributable to environmental exposure, not otherwise specified.
- Any death suspected to be due to infectious or contagious disease wherein the diagnosis and extent of disease at the time of death are undetermined.
- Any death occurring under suspicious circumstances.
- Any death in which there is doubt as to whether or not it is a medical investigator's case should be reported.

## **Statutory Duty:**

---

The OMI Policy Manual, derived from statute, requires the OMI to perform the following duties in all cases of reportable deaths:

- Receive all reports of sudden, unexpected or unexplained deaths.
- Respond to all sudden, unexpected or unexplained deaths.
- In the absence of a physician, pronounce death.
- Take custody of the body and all articles on or near the body.

- Maintain the chain of custody of the body and all articles obtained there from.
- Conduct an investigation leading to the determination of the cause and manner of death.
- Obtain toxicology samples from the body when indicated, and arrange for necessary tests upon those samples that will aid in the determination of cause and manner of death; maintain the proper chain of custody and evidence on those samples; store those samples for an appropriate period of time.
- Certify the cause and manner of death and forward written certification to designated agencies.
- Properly dispose of human remains through release to family or designated and authorized entities.
- Provide accurate identification of all human remains when possible.
- Cooperate with authorized agencies having involvement with death investigation.
- Provide professional, objective testimony in state and local courts of law.
- Define procedures that establish fees for services and material provided by the Office of the Medical Investigator.
- Define procedures to reimburse all parties providing services to the Office of the Medical Investigator.
- Establish and maintain a disaster plan outlining the role of OMI staff.
- Maintain records of each official death investigation and provide reports to official agencies.

The above duties are exclusive of deaths that occur on tribal or federal land. The OMI provides consulting services for requesting agencies such as the Bureau of Indian Affairs (BIA), Federal Bureau of Investigation (FBI), Tribal Law Enforcement or neighboring state jurisdictions.

The OMI is designated as a special program within the Department of Pathology at the University of New Mexico School of Medicine. A Board of Medical Investigations comprised of the Dean of the UNM School of Medicine, the Chief of the New Mexico State Police, the Secretary of Health and Environment Department, the Chairman of the New Mexico Thanatopractice and the Chairman of the New Mexico Indian Affairs Commission was established to oversee and develop policy. The Board appoints the Chief Medical Investigator, a physician licensed in New Mexico, trained in Pathology and Forensic Medicine, who has responsibility for operations.

The program operates out of the Central Office located in the UNM Health Sciences Center in Albuquerque, New Mexico. The Central Office directs all investigative activities statewide. Specially trained and certified Field Deputy Medical Investigators (FDMI) conduct field investigations. Every county in New Mexico has FDMI's who conduct investigations at the scene of death to collect information used to determine jurisdiction, possible cause and manner of death, and in the absence of a physician provide the pronouncement of death. The FDMI's contact the Central Office and present the results of each investigation to Central Office Deputy Medical Investigators who make the ultimate decisions regarding jurisdiction and the need for further medicolegal investigation. All autopsy services are conducted in the Central Office and are performed by forensic pathologists with the assistance of morphology services. The New Mexico State Laboratory provides the majority of toxicology services with some specialized tests sent to other laboratories. All documentation is archived by the Central Office and is available as provided for by public record statutes and regulations.

Such a strongly defined and professionally staffed system provides investigative agencies, the medical community and the citizens of New Mexico with standardized death investigation protocols and a

central repository for the information compiled during those medicolegal investigations. The centralization of these services has proven valuable in many areas of public concern including:

- Criminal investigations such as homicide or child abuse
- Protection of public health from environmental hazards and the spread of infectious disease
- Surveillance and reporting of deaths that may represent bioterrorist activities
- Medical and statistical research contributing to positive preventative measures (Seat Belt Laws)
- Expert testimony in court cases
- Proper certification of death
- Services to families of the deceased persons (Grief Services Program)

## **Program Summary and Highlights for 2010**

---

### **Investigative Activity:**

In 2010, New Mexico had 5,249 deaths that met the criteria to become a reportable death. The OMI provided investigative services for each of these 5,249 deaths. Following these investigations, OMI retained jurisdiction of 3,586 deaths and relinquished jurisdiction of 1,455 deaths to private physicians. An additional 208 deaths were investigated as a consultation services resulting in a total caseload of 5,249 medicolegal investigations. A granular examination of the case distribution is presented in the section Overview – Total Cases – 2010 beginning on page 8.

### **“Doe” and/or missing person cases:**

Each year OMI receives 150-200 “Doe” cases, where remains are initially unidentified. 98% of these cases are successfully identified through OMI’s investigative efforts. In 2010 this included 165 postmortem forensic dental examinations (using dental records to help identify remains).

## **Training and Education**

---

At the OMI, the activity of training and education is an integral part of day-to-day operations. The OMI is designated as a special program within the Department of Pathology at the University of New Mexico School of Medicine. The staff pathologists are faculty members with the School of Medicine and are expected to participate in training of medical students, residents and fellows, as well as conduct research activity to further advance the science of forensic medicine.

### ***Forensic Pathologist Fellowship Program***

The OMI Forensic Pathology Fellowship Program is considered one of the best in the country. The fellowship is a one-year, in-depth training program in the subspecialty of forensic pathology. Applicants must have completed an accredited pathology residency program. Four positions for this competitive program are available each year and are generally filled two to three years in advance.

### ***Certification Training***

All OMI deputy medical investigators are required to become certified to perform a death investigation. The OMI provides this training for the deputy medical investigators throughout New Mexico and in the past year, 30 individuals successfully completed the training and received certification as new Field Investigators. 69 current Field Investigators participated in training and were recertified. Upon request, OMI will provide the certification training to other medical investigators, coroners and law enforcement agencies for adaptation to the needs of their local systems. (Ex. Native American police officers)

### ***Death Investigation Training***

Death Investigation Training was conducted by the OMI as two training sessions in Albuquerque, in March and October. 64 representatives from the medical examiner, law enforcement and health care professions from throughout the nation participated in the training with a curriculum designed to present the most current facets of death investigations.. Participants were from Washington, DC, Montana, New Jersey, Washington, Arizona, Colorado, Texas, Oklahoma, Idaho, Ohio, Indiana, California, Alabama, Delaware, Tennessee, Illinois and of course, New Mexico. New Mexico personnel included representatives from the New Mexico Department of Public Safety, Bureau of Vital Statistics, Albuquerque Police Department, EMS Academy, and through Career Fairs for Elementary, Middle and High Schools.

### ***Law Enforcement Education***

Death investigation training is provided at the New Mexico State Police Academy, the New Mexico Law Enforcement Academy, the Bernalillo County Sheriff's Office Training Academy, APD Citizen's Police Academy and the Albuquerque Police Academy. In addition, specialized training is provided to individual police departments at their request.

## ***Public Education***

OMI Staff conducts in-service training throughout the state for a wide variety of agencies. Examples of agencies include Department of Health, funeral homes, hospitals, correction facilities, the EMS training site, state search and rescue groups and professional/advanced degree classes at New Mexico Universities. OMI also provided tours and presentations to middle and high school students from throughout New Mexico in 2010, as well as Central New Mexico Community College and UNM medical and health programs.

## ***OMI Newsletter and website***

The OMI Newsletter is published quarterly and sent to OMI field and central office staff, funeral homes and hospice and home health care. The newsletter conveys information regarding updates in legislation and/or investigation and personnel issues.

The OMI website at <http://omi.unm.edu> provides instant access to information concerning OMI, staff, operating procedures and services offered. Through the website, users can download forms needed for requesting OMI documents.

## **Grief Services Program**

---

The Grief Services Program (GSP) was established in 1975. Initially, the program provided crisis intervention and education to families whose child died as a result of Sudden Infant Death Syndrome (SIDS). The program has continually expanded its mission and now provides its services to all New Mexico families following the sudden and unexpected death of a family member. These services include: crisis intervention, psychotherapy, education, consultations, and referrals. Additionally, the GSP provides grief education and training throughout New Mexico for agencies such as law enforcement, emergency responders, nurses, mental health providers, teachers and other groups who request such training.

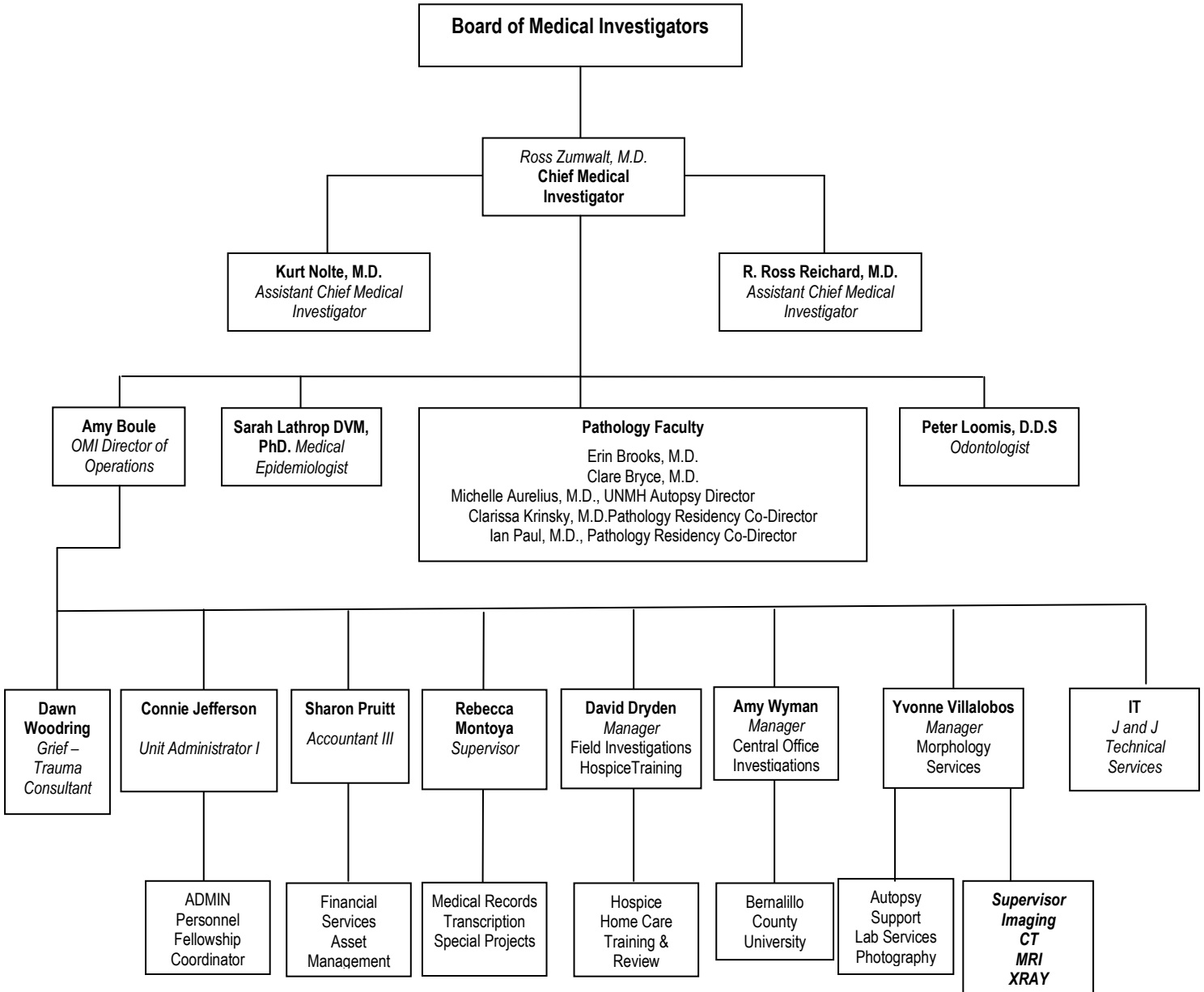
## **Donor Services**

---

In 2010, OMI ensured that 100% of potential organ donors and their families were allowed to give the gift of life. OMI works closely with Donor Services to provide life-saving organs from transplantation, in New Mexico and across the country. Our thanks to the families whose loved ones became an organ or tissue donor, providing an enhanced quality of life to hundreds of transplant recipients.

# Office of the Medical Investigator Organizational Chart as of December 2010

Figure 1



## Total Cases

---

The remainder of this report will present data routinely collected by the OMI in a manner that answers questions regarding mortality and public health. The tables and charts summarize data collected on every medicolegal investigation, including consultation cases that the OMI conducted for this reporting period. The data, a subset of total mortality figures, represent findings on cases that come to the attention of forensic pathology. Readers who need complete mortality figures are encouraged to contact the State Center for Health Statistics – Office of New Mexico Vital Records and Health Statistics, New Mexico Department of Health.

Figure 2 – Total Cases – 2001 - 2010

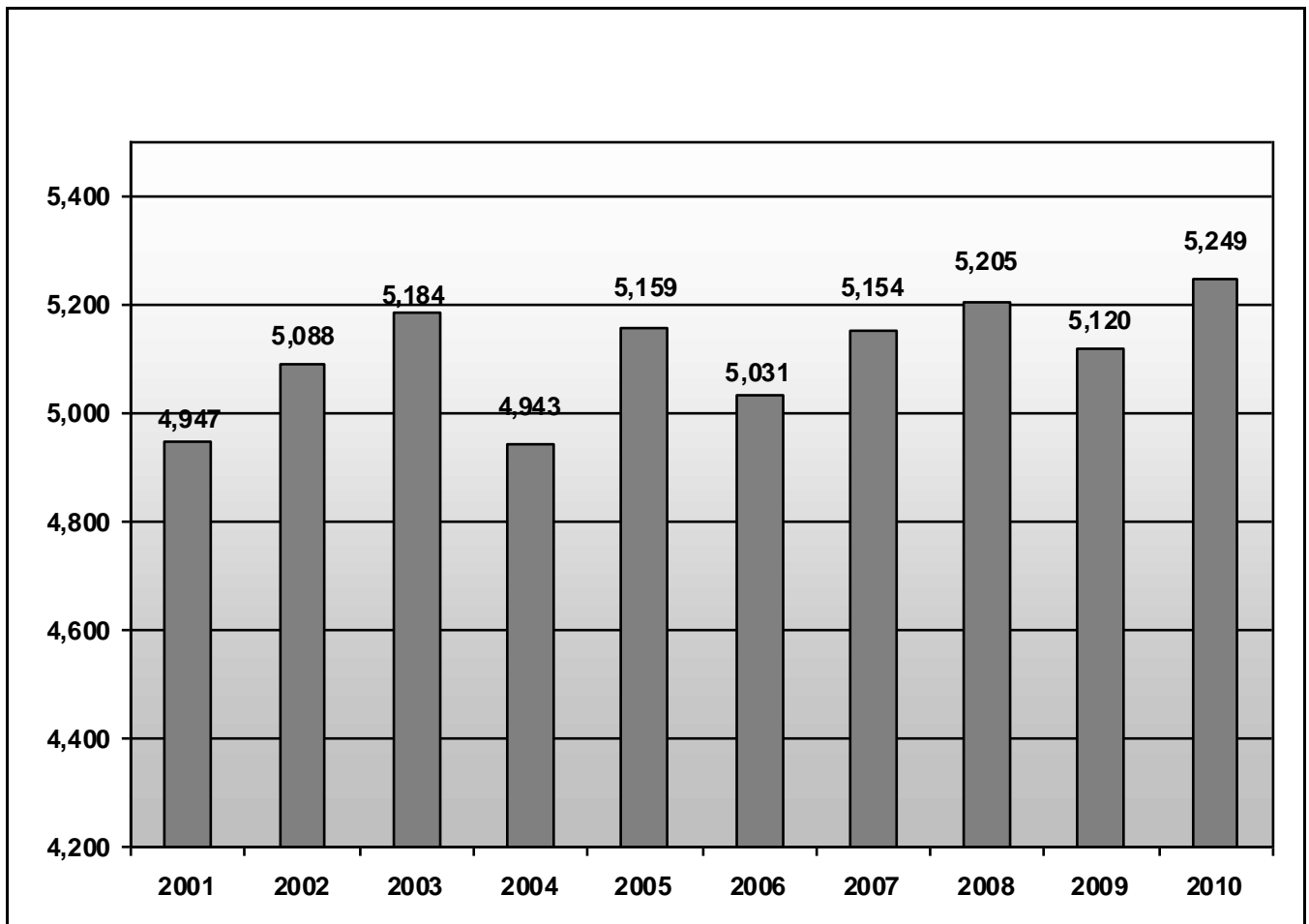
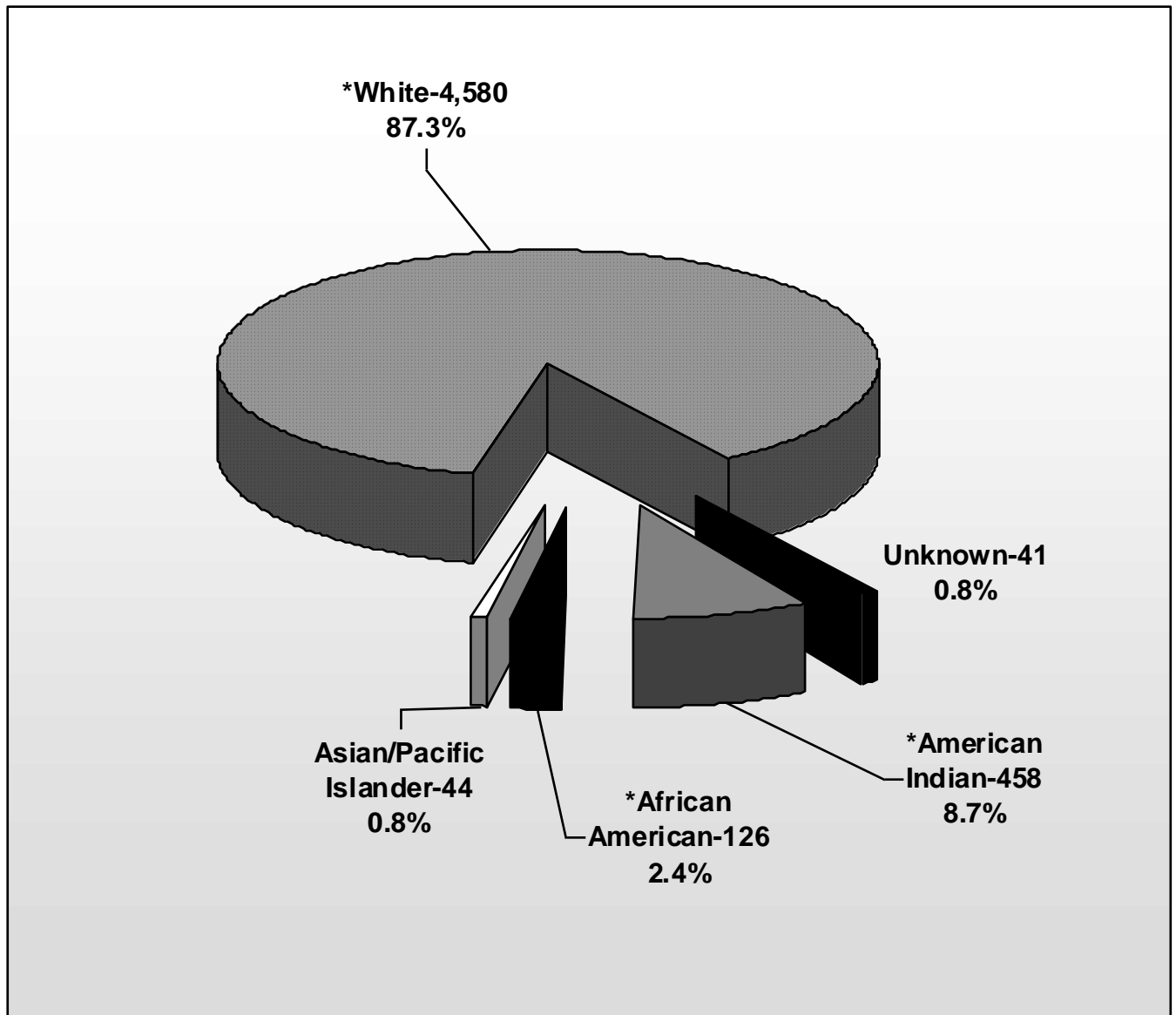


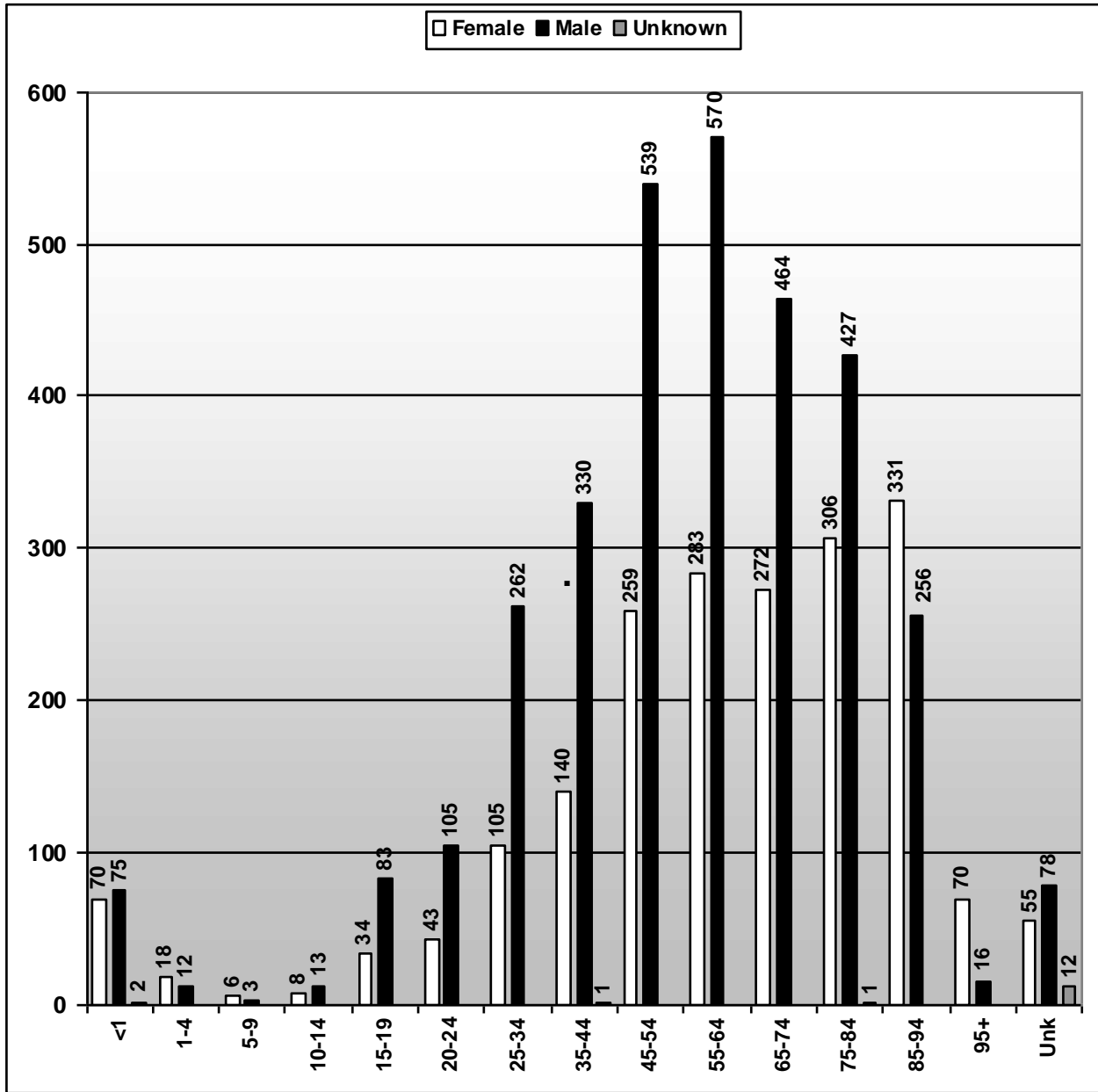


Figure 3 – Total Cases by Race/Ethnicity – 2010



\* White includes 1,562 Hispanic, \* American Indian includes 6 Hispanic, \*Asian/Pacific Islander includes 2 Hispanic, African American includes 2 Hispanic

Figure 4 – Total Cases by Age and Gender – 2010



**Table 1 – Total Cases – Autopsy Status – 2010**

Autopsy	Manner of Death					Total
	Natural	Accident	Suicide	Homicide	Undetermined*	
Yes	491	705	335	190	269	<b>1,990</b>
No	2,553	538	71	3	94	<b>3,259</b>
<b>Total</b>	<b>3,044</b>	<b>1,243</b>	<b>406</b>	<b>193</b>	<b>363</b>	<b>5,249</b>

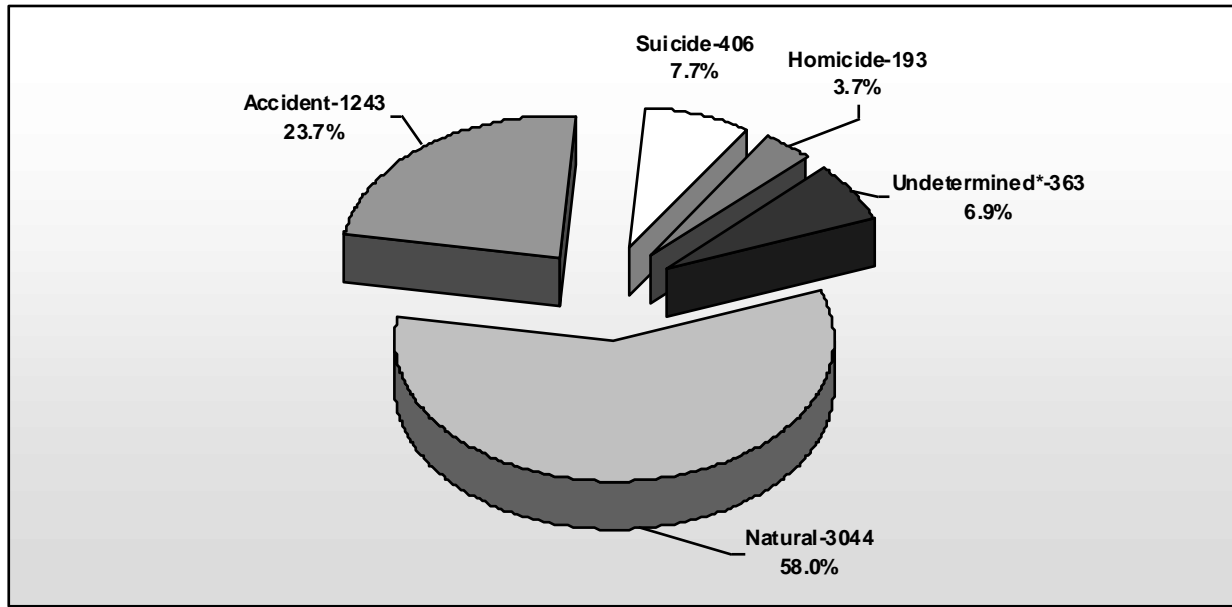
\*48 Other, 208 Pending, 31 Uncoded, 71 Undetermined, 5 Unknown included in Undetermined

**Table 2 – Total Cases – Case Distribution – 2010**

Type of Case	Manner of Death	Autopsy		Percent Autopsied	Total
		Yes	No		
<b>Medical Investigator</b>	Natural	438	1,082	12.21%	1,520
	Accident	666	534	18.57%	1,200
	Suicide	323	68	9.01%	391
	Homicide	164	3	4.57%	167
	Undetermined	238	70	6.64%	308
	<b>Subtotal</b>		<b>1,829</b>	<b>1,757</b>	<b>51.00%</b>
<b>Terminated Jurisdiction</b>	Natural	0	1,447	0.0%	1,447
	Accident	0	0	0.0%	0
	Suicide	0	0	0.0%	0
	Homicide	0	0	0.0%	0
	Undetermined	0	8	0.0%	8
	<b>Subtotal</b>		<b>0</b>	<b>1,455</b>	<b>0.0%</b>
<b>Reported Deaths</b>		<b>1,829</b>	<b>3,212</b>	<b>.56%</b>	<b>5,041</b>
<b>Consultation Cases</b>	Natural	53	24	25.48%	77
	Accident	39	4	18.75%	43
	Suicide	12	3	5.77%	15
	Homicide	26	0	12.50%	26
	Undetermined	31	16	24.90%	47
	<b>Subtotal</b>		<b>161</b>	<b>47</b>	<b>77.40%</b>
<b>Total</b>		<b>1,990</b>	<b>3,259</b>	<b>37.91%</b>	<b>5,249</b>

## Cause and Manner of Death

Figure 5 – Total Cases – Manner of Death – 2010



\* 71 Undetermined, 208 Pending, 84 Other included in Undetermined

In 2010, OMI investigated 5,249 deaths, representing 35% of the estimated total deaths in New Mexico in 2010. Of the deaths investigated by OMI in 2010:

The total number of deaths investigated represents a 2.5% increase from the 2009 total, and an 8.3% increase since 2001.

The ratio of male to female deaths, when gender was clearly determined, was 1.61. Decedents classified as non-Hispanic white represented 57% of the total, Hispanic 29.5%, American Indian 8.7%, African American 2.4% and Asian 0.8%. The racial-ethnic composition of New Mexico was listed in the 2010 census as: 41% non-Hispanic white, 46% Hispanic, 9.4% American Indian, 2.1% African American and 1.5% Asian.

While natural deaths contributed the largest portion of OMI deaths investigated (58%), most natural deaths did not fall under the jurisdiction of the OMI. Data presented regarding natural deaths should not be interpreted as representative of all natural deaths in New Mexico.

**Table 3 - Total Cases – Manner of Death by Gender – 2010**

<b>Gender</b>	<b>Accident</b>	<b>Homicide</b>	<b>Natural</b>	<b>Suicide</b>	<b>Undetermined</b>	<b>Total</b>
<b>Female</b>	505	37	1,225	104	129	<b>2,000</b>
<b>Male</b>	738	154	1,817	302	222	<b>3,233</b>
<b>Unknown</b>	0	2	2	0	12	<b>16</b>
<b>Total</b>	<b>1,243</b>	<b>193</b>	<b>3,044</b>	<b>406</b>	<b>363</b>	<b>5,249</b>

**Table 4 - Total Cases – Manner of Death by Race/Ethnicity – 2010**

<b>Race/Ethnicity</b>	<b>Accident</b>	<b>Homicide</b>	<b>Natural</b>	<b>Suicide</b>	<b>Undetermined</b>	<b>Total</b>
<b>American Indian</b>	135	44	196	28	55	<b>458</b>
<b>Asian /Pacific Islander</b>	8	1	29	4	2	<b>44</b>
<b>African American</b>	31	8	77	3	7	<b>126</b>
<b>White/Hispanic</b>	414	79	876	106	87	<b>1,562</b>
<b>White</b>	652	59	1,864	264	179	<b>3,018</b>
<b>Unknown</b>	3	2	2	1	33	<b>41</b>
	<b>1,243</b>	<b>193</b>	<b>3,044</b>	<b>406</b>	<b>363</b>	<b>5,249</b>

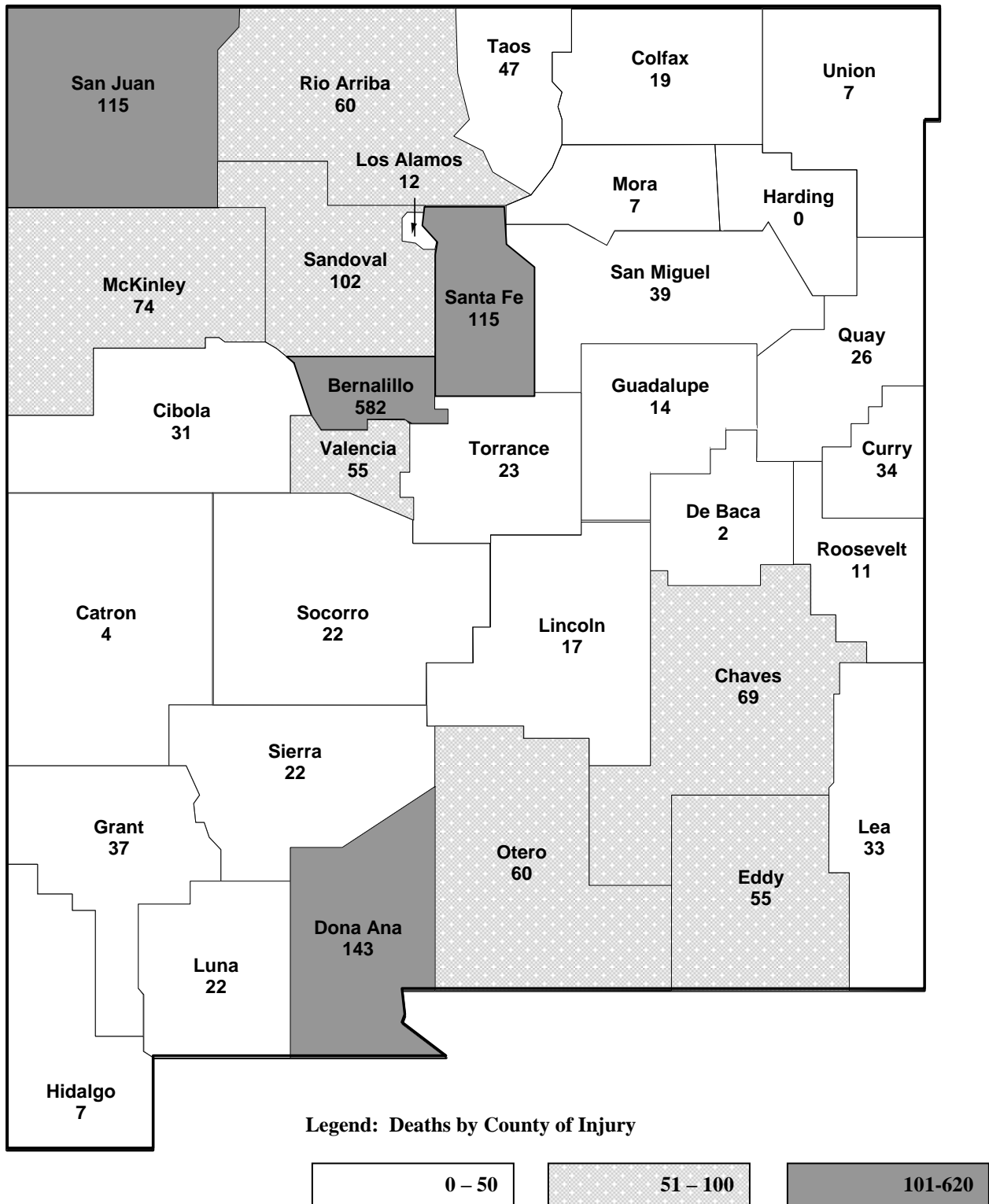
\* American Indian includes 6 Hispanic, \*Asian/Pacific Islander includes 2 Hispanic, African American includes 2 Hispanic

**Table 5 - Total Cases – Manner of Death by Age and Gender 2010**  
**Age at Death**

Gender	Age	Natural	Accidents		Suicide	Homicide	Undetermined	Total
			MVA*	Non-MVA				
<b>Female</b>	<1	57	0	1	0	1	11	69
	1-4	3	5	4	0	2	4	18
	5-9	1	2	2	0	0	1	6
	10-14	3	3	0	1	1	0	8
	15-19	5	15	5	7	2	0	34
	20-24	11	8	10	8	3	3	43
	25-34	14	21	36	11	7	16	105
	35-44	41	15	41	18	8	17	140
	45-54	142	13	53	25	4	22	259
	55-64	200	14	29	22	2	16	283
	65-74	208	5	33	9	2	15	272
	75-84	241	7	46	3	1	8	306
	85-94	208	3	113	0	2	5	331
	95+	48	0	20	0	1	1	70
Unknown	43	1	0	0	1	10	55	
<b>Subtotals</b>		<b>1,225</b>	<b>112</b>	<b>393</b>	<b>104</b>	<b>36</b>	<b>129</b>	<b>2,000</b>
<b>Male</b>	<1	51	2	6	0	2	14	75
	1-4	4	3	2	0	3	0	12
	5-9	0	2	1	0	0	0	3
	10-14	5	2	2	1	3	0	13
	15-19	7	23	11	17	19	6	83
	20-24	7	20	24	22	21	11	105
	25-34	29	38	76	67	27	25	262
	35-44	105	35	78	53	30	29	330
	45-54	292	29	98	54	29	37	539
	55-64	378	19	73	37	15	48	570
	65-74	350	17	46	29	3	19	464
	75-84	340	9	56	10	0	12	427
	85-94	182	4	53	11	1	5	256
	95+	10	0	5	0	0	1	16
Unknown	57	1	3	1	1	15	78	
<b>Subtotals</b>		<b>1,817</b>	<b>204</b>	<b>534</b>	<b>302</b>	<b>154</b>	<b>222</b>	<b>3,233</b>
<b>Unknown</b>	<1	1	0	0	0	0	1	2
	35-44	0	0	0	0	1	0	1
	65-74	0	0	0	0	0	0	0
	75-84	1	0	0	0	0	0	1
	Unknown	0	0	0	0	1	11	12
<b>Subtotals</b>		<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>12</b>	<b>16</b>
<b>Total</b>		<b>3,044</b>	<b>264</b>	<b>979</b>	<b>406</b>	<b>193</b>	<b>363</b>	<b>5,249</b>

\* MVA = Motor Vehicle Accidents

**Figure 6 - Deaths by County of Injury – 2010**  
Includes Accidents, Suicides, Homicides and Undetermined Deaths

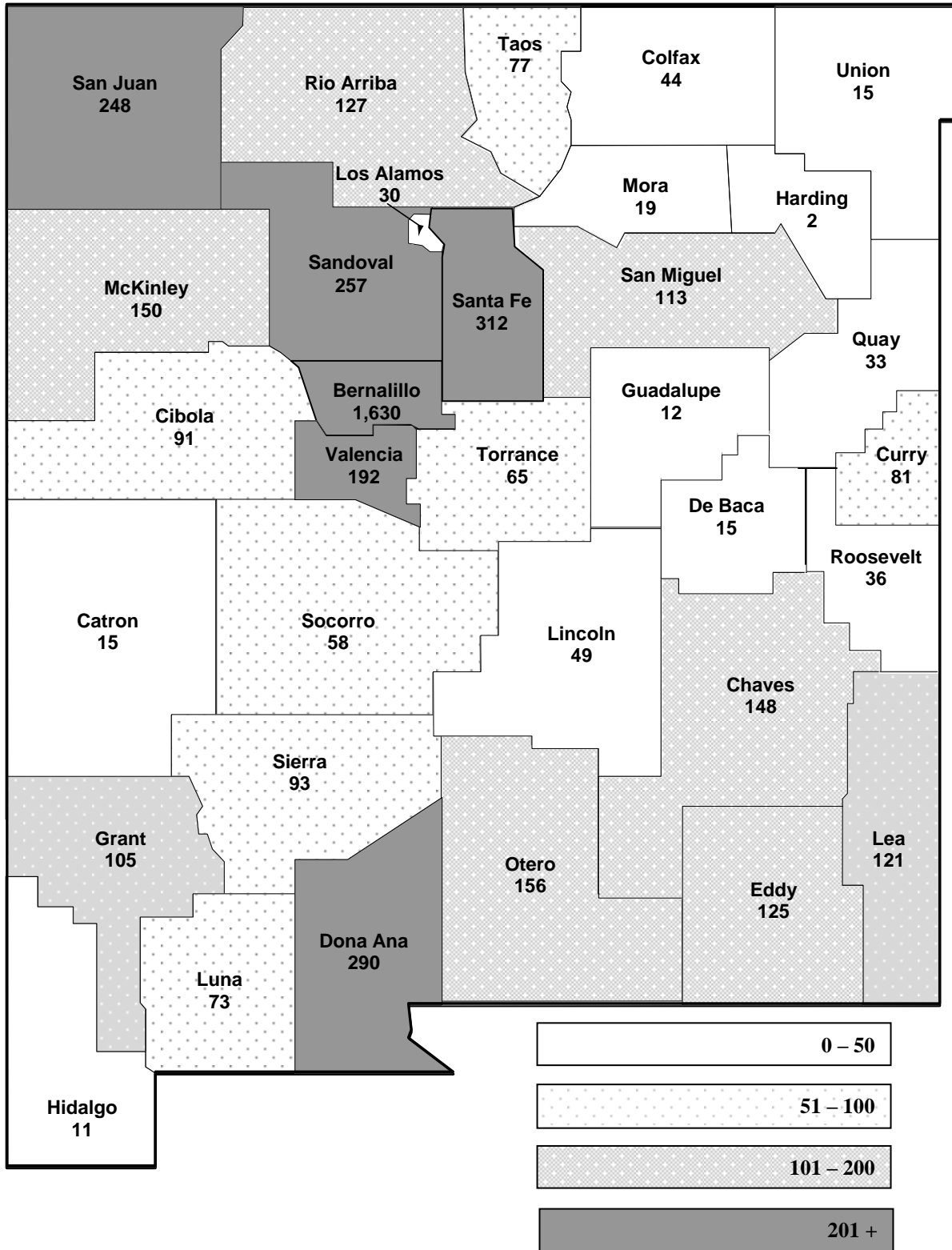


**Table 6 – Total Cases – County of Injury – 2010**

Manner of Death by County of Injury					
County of Injury	Accident	Homicide	Suicide	Undetermined	Total
Bernalillo	379	64	114	25	582
Catron	2	0	2	0	4
Chaves	53	6	9	1	69
Cibola	21	3	2	5	31
Colfax	12	1	4	2	19
Curry	24	2	6	2	34
De Baca	0	0	2	0	2
Dona Ana	79	14	36	14	143
Eddy	35	3	12	5	55
Grant	14	1	14	6	35
Guadalupe	12	0	2	0	14
Harding	0	0	0	0	0
Hidalgo	7	0	0	0	7
Lea	33	12	14	2	61
Lincoln	12	1	2	2	17
Los Alamos	10	0	1	1	12
Luna	14	1	6	1	22
McKinley	52	9	9	4	74
Mora	4	0	3	0	7
Otero	33	4	20	3	60
Quay	19	1	5	1	26
Rio Arriba	39	7	8	6	60
Roosevelt	8	2	1	0	11
San Juan	63	13	35	4	115
San Miguel	26	3	7	3	39
Sandoval	67	5	27	3	102
Santa Fe	72	10	23	10	115
Sierra	18	0	2	2	22
Socorro	11	1	7	3	22
Taos	29	6	6	6	47
Torrance	11	3	9	0	23
Union	5	0	2	0	7
Valencia	40	1	10	4	55
Non-Resident/Unknown	39	20	6	248	313
<b>Subtotals</b>	<b>1,243</b>	<b>193</b>	<b>406</b>	<b>363</b>	<b>2,256</b>
Natural Deaths	0	0	0	0	3,044
<b>Total</b>					<b>5,249</b>



Figure 7 – Deaths by County of Residence  
All Manners of Death



**Table 7 – Total Cases – County of Residence – 2010**

**Manner of Death by County of Residence**

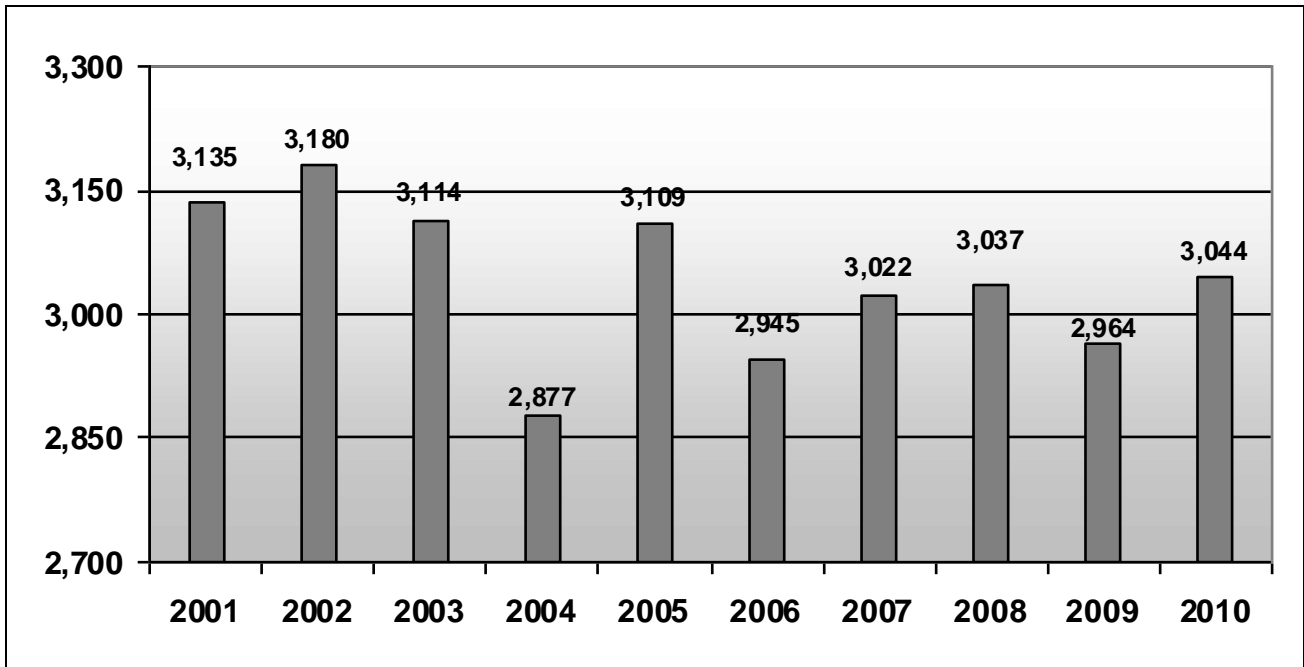
County of Residence	Natural	Accident	Homicide	Suicide	Undetermined	Total
Bernalillo	976	377	49	121	107	1,630
Catron	9	2	0	1	3	15
Chaves	83	48	5	9	3	148
Cibola	55	18	6	4	8	91
Colfax	30	8	1	4	1	44
Curry	48	21	2	6	4	81
De Baca	9	1	2	2	1	15
Dona Ana	153	76	10	31	20	290
Eddy	70	30	2	12	11	125
Grant	74	11	0	13	7	105
Guadalupe	9	3	0	0	0	12
Harding	2	0	0	0	0	2
Hidalgo	9	2	0	0	0	11
Lea	70	25	11	13	2	121
Lincoln	35	5	3	2	4	49
Los Alamos	15	9	0	2	4	30
Luna	54	11	1	5	2	73
McKinley	88	34	11	7	10	150
Mora	11	5	0	3	0	19
Otero	99	29	3	20	5	156
Quay	16	11	2	3	1	33
Rio Arriba	62	42	7	6	10	127
Roosevelt	24	9	2	1	0	36
San Juan	128	67	10	34	9	248
San Miguel	76	25	3	6	3	113
Sandoval	153	61	5	21	17	257
Santa Fe	186	71	10	24	21	312
Sierra	72	15	1	2	3	93
Socorro	36	6	1	7	8	58
Taos	39	21	6	5	6	77
Torrance	45	8	3	7	1	64
Union	10	3	0	2	0	15
Valencia	122	44	3	9	14	192
Out of State/Unknown	176	145	34	24	78	457
<b>Total</b>	<b>3,044</b>	<b>1,243</b>	<b>193</b>	<b>406</b>	<b>363</b>	<b>5,249</b>

## **Summary**

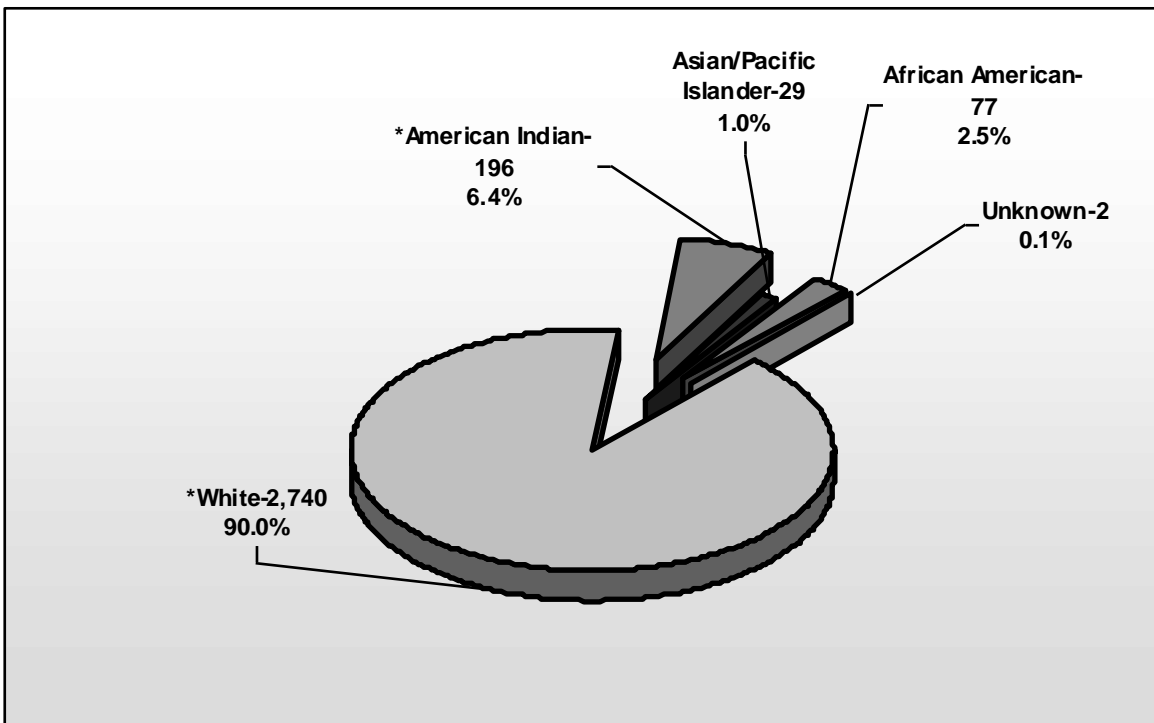
Five manners of death are used to classify deaths at the OMI: natural, accident, suicide, homicide and undetermined. The remainder of the annual report will present information on these specific manners of death, as well as certain categories of deaths investigated by the OMI, including deaths of children, ethanol (alcohol) related deaths, and drug involved deaths. Ten-year summaries will be followed by presentations of the current cases by race/ethnicity, and age/gender, then a breakdown by method of death and county of residence.

**Overview – Manner of Death – Natural Deaths**

**Figure 8 – Natural Deaths – 2001 – 2010**

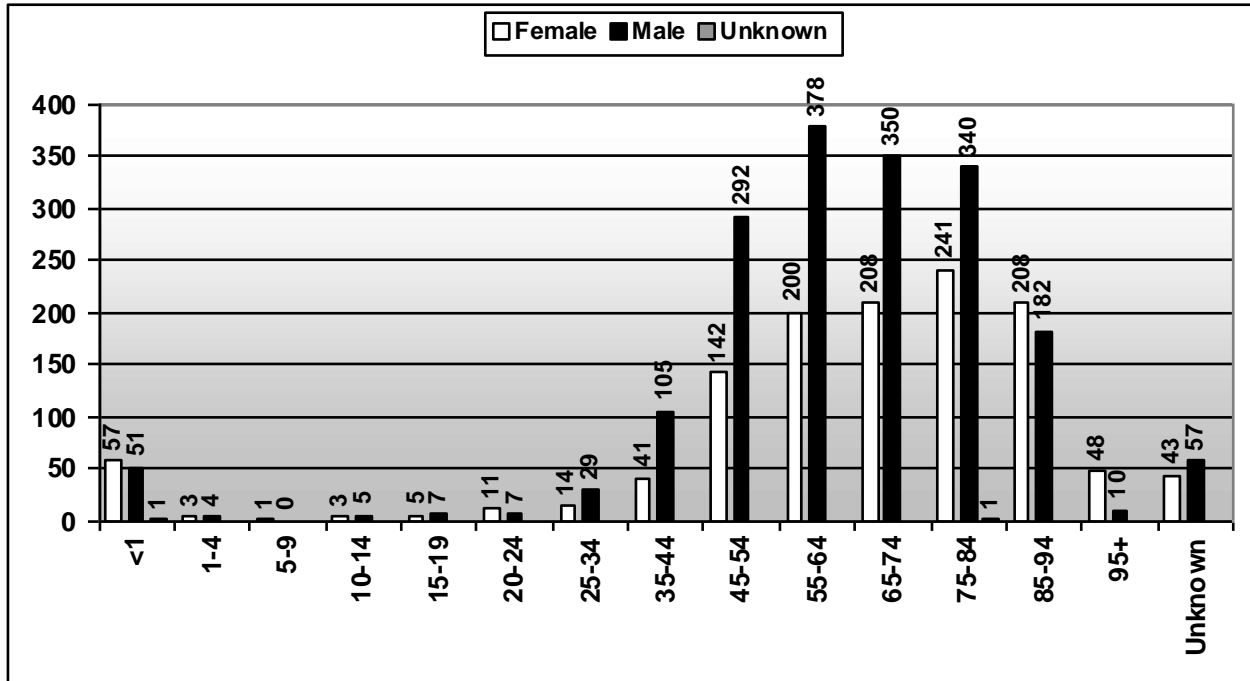


**Figure 9 - Natural Deaths by Race/Ethnicity – 2010**



\* White includes 876 Hispanic, \* American Indian includes 2 Hispanic, Asian/Pacific Islander 2 Hispanic

Figure 10 - Natural Deaths by Age and Gender – 2010



## Natural Deaths – Summary

Deaths classified as a “natural” manner of death, as compared to suicides, homicides, accidents and undetermined manners of death, represent the largest number of deaths investigated by OMI. However, most natural deaths that occur in New Mexico do not fall under the jurisdiction of OMI and are therefore not represented in this report. An excellent resource for all mortality statistics in the state is the publication “New Mexico Selected Health Statistics Annual Report,” published by the State Center for Health Statistics at the Office of New Mexico Vital Records & Health Statistics, Public Health Division, Department of Health, 1105 St. Francis Dr., PO Box 26110, Santa Fe, NM 87502-6110.

## Overview – Manner of Death – Accidental Deaths

Figure 11 - Accidental Deaths – 2001 – 2010

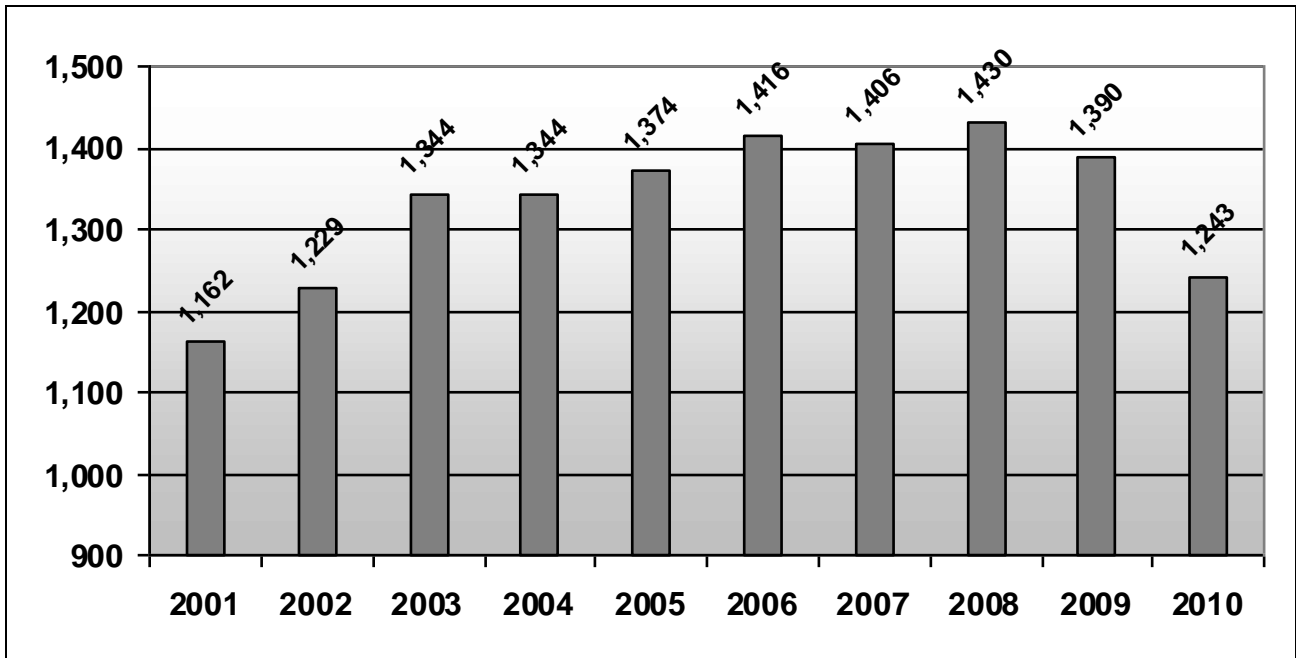
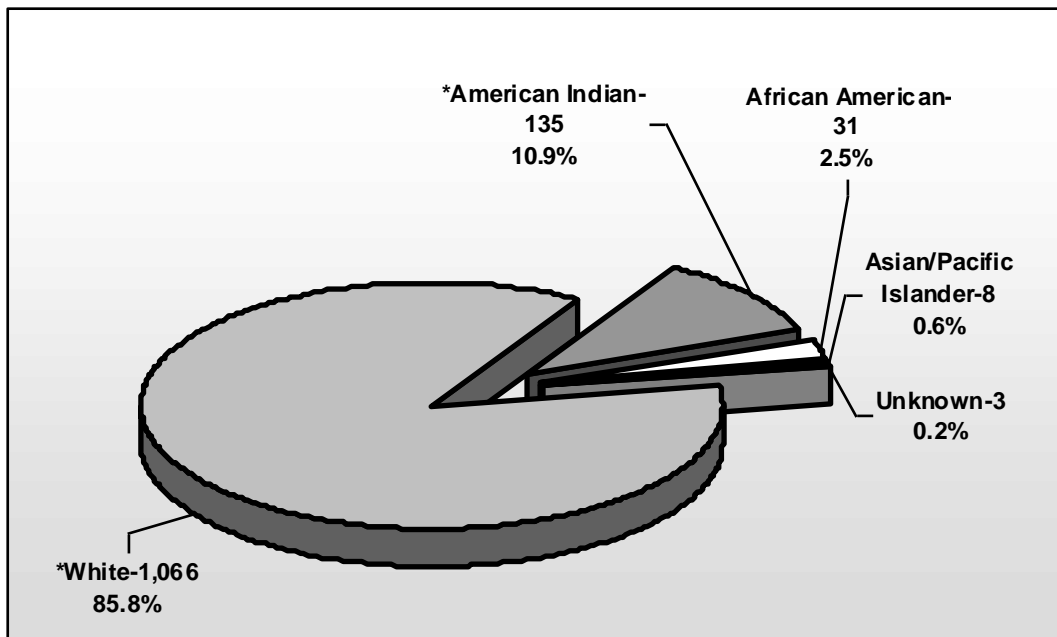
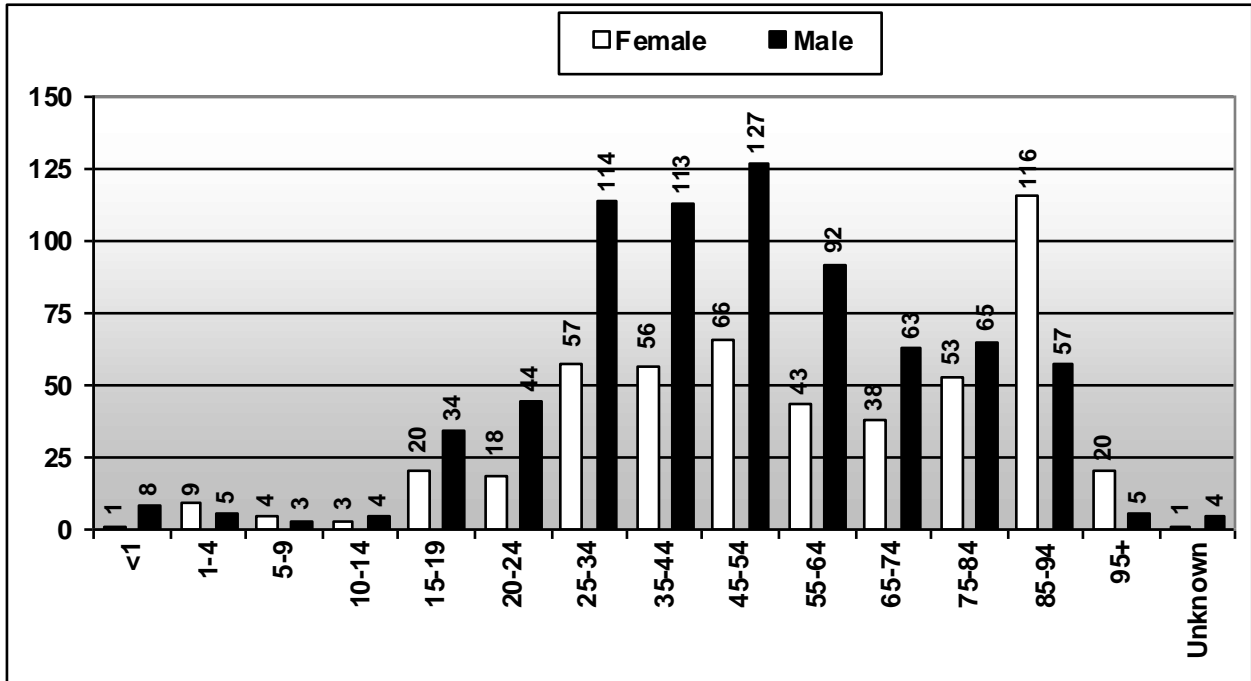


Figure 12 - Accidental Deaths by Race/Ethnicity-2010



\* White includes 414 Hispanic, American Indian includes 2 Hispanic

Figure 13 - Accidental Deaths by Age and Gender – 2010



**Table 8 - Accidental Deaths – County of Injury – 2001 – 2010**

County of Injury	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
<b>Bernalillo</b>	318	359	406	403	389	433	422	477	430	379
<b>Catron</b>	5	3	6	2	7	2	3	3	1	2
<b>Chaves</b>	36	29	42	41	37	48	30	48	35	53
<b>Cibola</b>	16	19	27	25	41	22	31	20	20	21
<b>Colfax</b>	18	12	23	9	17	9	12	18	8	12
<b>Curry</b>	13	13	15	15	22	20	26	16	21	24
<b>De Baca</b>	2	5	3	1	3	1	3	2	2	0
<b>Dona Ana</b>	56	55	62	80	63	77	87	72	102	79
<b>Eddy</b>	22	27	31	33	39	39	38	41	34	35
<b>Grant</b>	9	18	23	25	17	19	20	31	20	14
<b>Guadalupe</b>	14	17	8	16	10	18	15	18	10	12
<b>Harding</b>	1	2	1	0	0	0	1	0	1	0
<b>Hidalgo</b>	9	10	2	6	14	7	12	4	5	7
<b>Lea</b>	24	20	29	21	30	38	37	36	18	33
<b>Lincoln</b>	21	31	14	14	14	15	24	3	23	12
<b>Los Alamos</b>	9	6	10	6	6	5	6	4	10	10
<b>Luna</b>	23	18	25	22	37	33	27	15	15	14
<b>McKinley</b>	57	71	73	99	80	77	62	58	65	52
<b>Mora</b>	4	4	5	8	7	5	6	5	4	4
<b>Otero</b>	24	25	31	28	30	35	22	30	33	33
<b>Quay</b>	13	18	26	14	10	16	8	16	5	19
<b>Rio Arriba</b>	37	54	46	57	48	49	56	61	50	39
<b>Roosevelt</b>	7	9	8	7	14	7	10	9	5	8
<b>San Juan</b>	76	85	79	76	72	80	90	74	62	63
<b>San Miguel</b>	19	26	30	33	25	23	27	33	23	26
<b>Sandoval</b>	39	33	42	47	52	61	55	71	77	67
<b>Santa Fe</b>	72	89	78	75	101	96	91	102	99	72
<b>Sierra</b>	13	15	16	12	12	9	15	13	22	18
<b>Socorro</b>	27	13	18	21	22	15	19	21	25	11
<b>Taos</b>	38	30	26	30	27	28	36	29	30	29
<b>Torrance</b>	19	12	20	19	18	21	20	16	21	11
<b>Union</b>	16	4	3	4	7	7	4	3	4	5
<b>Valencia</b>	35	34	45	38	41	52	55	46	37	40
<b>Out of State/Unknown</b>	70	63	71	57	62	49	36	35	73	39
<b>Totals</b>	<b>1,162</b>	<b>1,229</b>	<b>1,344</b>	<b>1,344</b>	<b>1,374</b>	<b>1,416</b>	<b>1,406</b>	<b>1,430</b>	<b>1,390</b>	<b>1,243</b>



**Table 9 - Accidental Deaths – County of Pronouncement – 2001 – 2010**

County of Pronouncement	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Bernalillo	415	442	505	503	476	552	512	572	549	484
Catron	4	2	6	2	7	1	3	3	0	1
Chaves	36	27	42	41	34	47	31	48	36	48
Cibola	11	20	20	14	34	12	24	20	18	17
Colfax	15	12	20	9	19	9	12	14	8	9
Curry	17	14	17	18	22	20	27	17	21	24
De Baca	1	5	3	0	2	1	3	2	2	0
Dona Ana	58	53	62	82	61	83	95	75	112	84
Eddy	24	28	30	32	39	39	37	40	34	36
Grant	14	13	24	24	19	18	19	29	19	11
Guadalupe	12	14	6	15	8	14	14	17	8	9
Harding	1	2	1	0	0	0	1	0	1	0
Hidalgo	10	9	2	6	10	7	11	5	4	6
Lea	24	20	29	21	31	40	37	35	18	33
Lincoln	19	23	12	13	13	16	21	5	18	9
Los Alamos	9	4	8	5	5	5	6	5	10	9
Luna	17	17	25	23	37	27	23	14	15	12
McKinley	50	65	73	83	69	67	60	51	58	40
Mora	2	1	4	8	4	3	5	4	1	4
Otero	20	25	30	28	30	33	20	25	33	34
Quay	10	17	24	13	10	16	11	15	4	18
Rio Arriba	30	54	40	53	39	42	52	41	43	31
Roosevelt	4	8	8	6	14	8	11	9	5	9
San Juan	90	89	78	87	79	82	99	79	67	67
San Miguel	18	24	26	26	22	22	24	31	23	23
Sandoval	21	27	24	28	40	33	30	47	58	43
Santa Fe	80	93	87	78	100	97	92	108	94	80
Sierra	13	13	14	9	11	6	11	13	20	17
Socorro	23	11	15	15	22	12	17	17	22	7
Taos	33	24	19	27	25	22	33	26	29	23
Torrance	16	9	9	12	14	17	15	14	14	7
Union	15	4	3	2	6	7	4	3	5	4
Valencia	19	21	34	29	32	37	34	27	24	25
Out of State/Unknown	31	39	44	32	40	21	12	19	17	19
<b>Totals</b>	<b>1,162</b>	<b>1,229</b>	<b>1,344</b>	<b>1,344</b>	<b>1,374</b>	<b>1,416</b>	<b>1,406</b>	<b>1,430</b>	<b>1,390</b>	<b>1,243</b>

## **Accidental Deaths – Summary**

Accidental deaths accounted for 23% of the deaths investigated by OMI in 2010, second only to natural deaths (57.4% of OMI-investigated deaths) as a manner of death. The highest number of accidental deaths was in males 45-54 years of age.

## Overview – Manner of Death – Suicide Deaths

Figure 14 - Suicide Deaths – 2001 - 2010

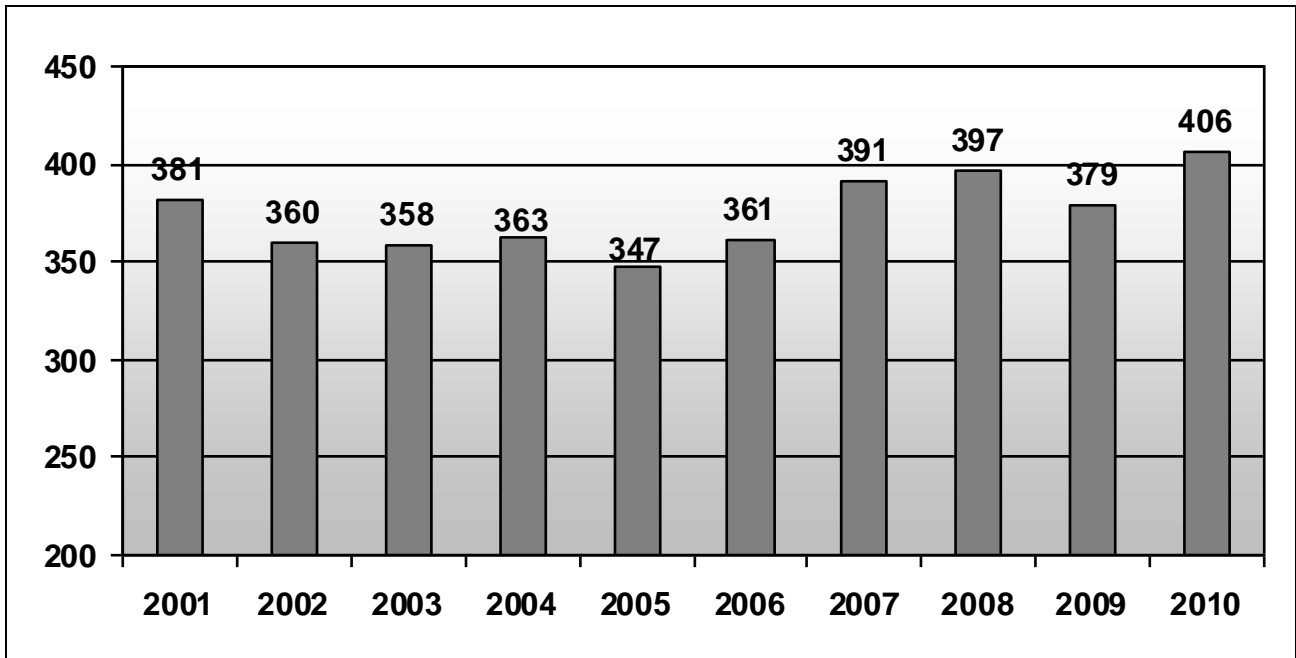
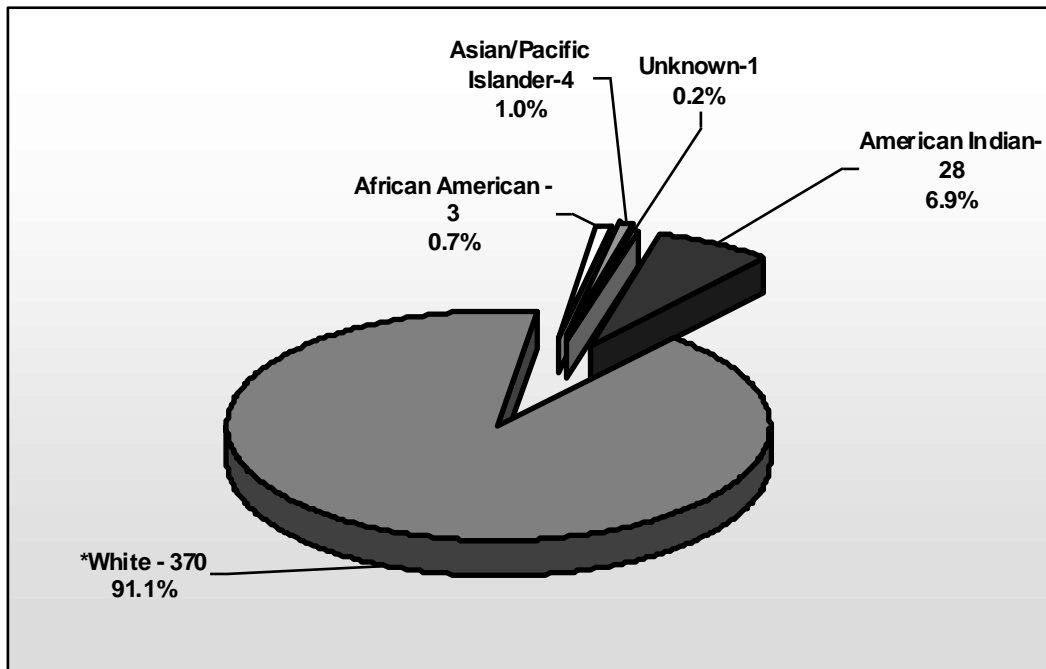


Figure 15 - Suicide Deaths by Race/Ethnicity – 2010



\* White includes 106 Hispanic

Figure 16 - Suicide Deaths by Age and Gender – 2010

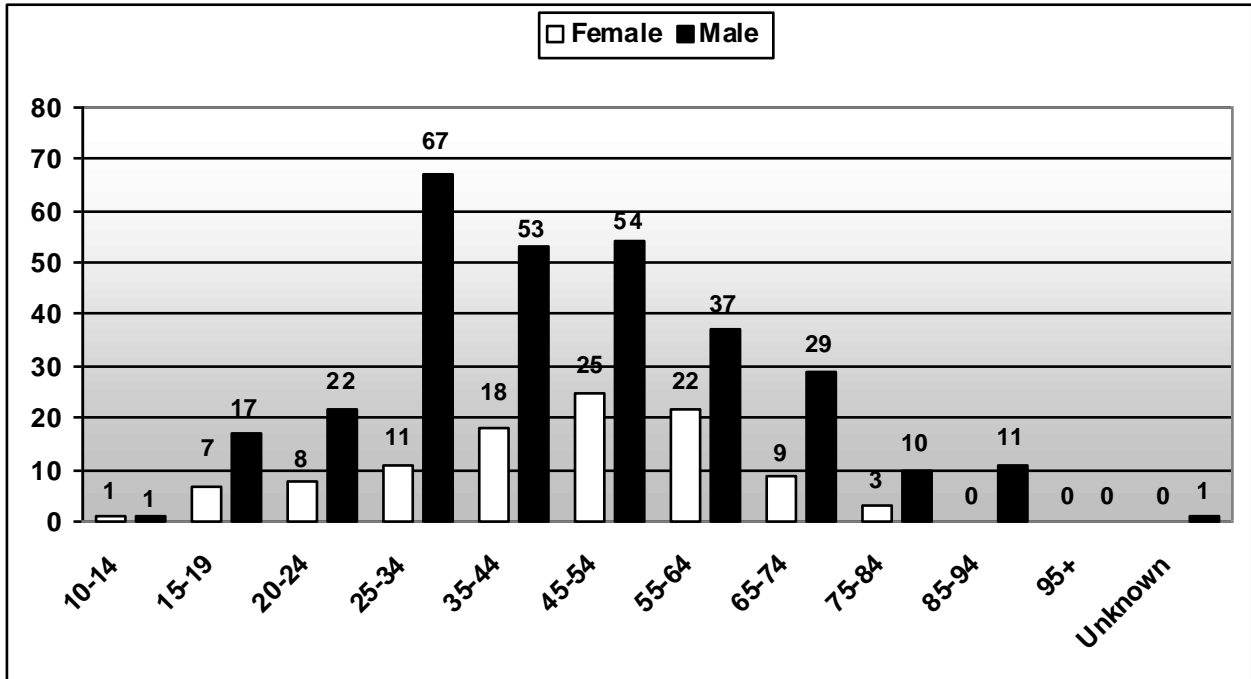


Figure 17 - Suicide Deaths by Month – 2010

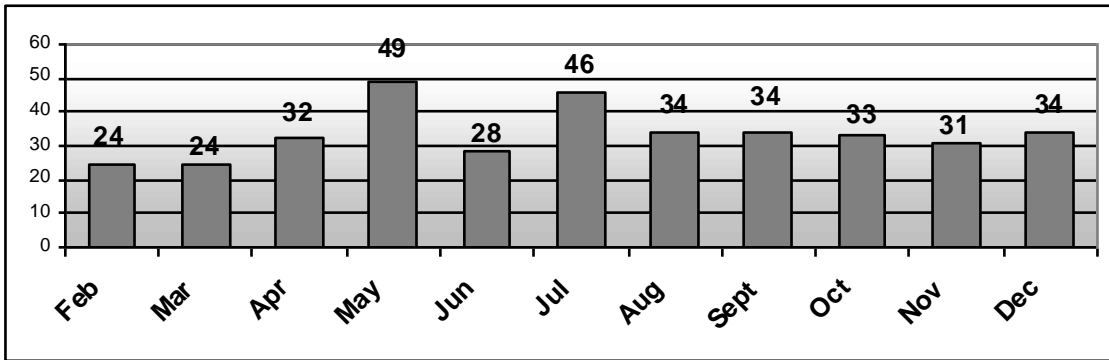
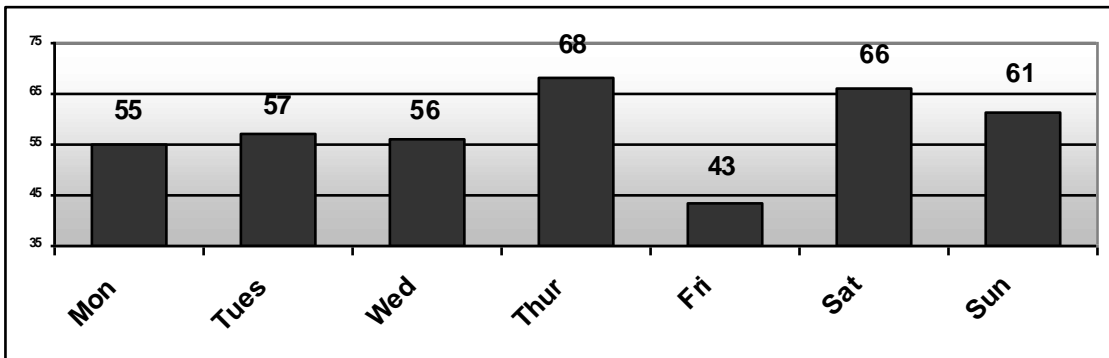


Figure 18 – Suicide Deaths by Day of the Week – 2010



**Table 10 – Suicide Deaths by County of Injury – 2001 - 2010**

County of Injury	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Bernalillo	124	112	107	102	99	110	120	123	130	114
Catron	1	2	1	3	0	1	3	2	2	2
Chaves	14	10	17	18	8	10	11	11	11	9
Cibola	8	4	5	3	2	5	7	6	10	2
Colfax	4	6	4	7	2	4	6	3	3	4
Curry	7	3	6	5	1	6	3	3	4	6
De Baca	2	2	0	0	1	1	1	0	0	2
Dona Ana	23	27	13	26	36	24	27	35	28	36
Eddy	5	13	9	9	13	10	10	10	7	12
Grant	4	7	9	6	10	9	6	12	10	14
Guadalupe	2	1	0	0	0	2	1	4	0	2
Harding	2	0	0	1	0	0	0	0	2	0
Hidalgo	2	1	0	0	1	0	2	3	2	0
Lea	9	7	11	9	8	12	8	7	5	14
Lincoln	6	10	3	7	6	2	7	5	3	2
Los Alamos	4	0	3	3	4	4	4	2	1	1
Luna	5	11	9	7	3	6	5	5	3	6
McKinley	15	9	16	19	13	16	11	7	14	9
Mora	4	1	4	0	0	2	1	2	4	3
Otero	13	13	14	15	13	13	17	15	11	20
Quay	5	0	3	1	3	2	2	2	2	5
Rio Arriba	11	11	12	9	10	5	15	9	8	8
Roosevelt	2	2	0	3	1	4	1	4	0	1
San Juan	19	19	19	14	20	25	18	24	22	35
San Miguel	13	8	11	9	6	8	6	7	3	7
Sandoval	14	15	7	13	13	16	25	22	17	27
Santa Fe	22	26	35	30	23	23	27	37	24	23
Sierra	5	6	4	4	7	5	2	2	4	2
Socorro	7	5	4	6	3	2	7	3	6	7
Taos	6	9	5	7	20	12	13	6	9	6
Torrance	6	5	3	4	2	7	6	5	4	9
Union	0	0	0	1	2	1	1	0	1	2
Valencia	10	11	11	17	10	11	17	16	10	10
Out of State/Unknown	7	4	13	5	7	3	0	5	19	6
<b>Totals</b>	<b>381</b>	<b>360</b>	<b>358</b>	<b>363</b>	<b>347</b>	<b>361</b>	<b>390</b>	<b>397</b>	<b>379</b>	<b>406</b>

**Table 11 – Suicide Deaths by County of Pronouncement – 2001 - 2010**

County of Pronouncement	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Bernalillo	129	120	119	107	104	118	131	134	142	124
Catron	1	2	1	3	0	1	3	2	2	2
Chaves	14	10	16	18	8	10	11	10	11	9
Cibola	8	3	4	2	3	4	7	6	9	4
Colfax	4	6	3	7	1	4	5	2	3	3
Curry	7	3	6	5	1	6	3	3	4	6
De Baca	2	2	0	0	1	1	1	0	0	2
Dona Ana	23	27	13	26	36	23	27	34	30	36
Eddy	5	13	9	9	13	10	10	9	11	12
Grant	4	6	9	6	8	9	5	12	9	14
Guadalupe	2	1	0	0	0	2	1	4	0	2
Harding	2	0	0	1	0	0	0	0	1	0
Hidalgo	2	1	0	0	1	0	3	3	2	0
Lea	9	7	11	8	8	12	8	7	5	14
Lincoln	6	10	3	7	7	2	7	5	3	2
Los Alamos	4	0	2	3	3	4	4	2	1	1
Luna	5	10	9	7	3	6	4	5	2	6
McKinley	13	9	14	19	12	16	9	7	12	5
Mora	4	1	4	0	0	2	1	1	2	3
Otero	12	13	14	15	12	13	16	16	15	20
Quay	5	0	3	1	3	2	2	2	1	5
Rio Arriba	10	10	11	9	10	4	15	9	9	6
Roosevelt	2	2	0	3	1	4	1	4	0	1
San Juan	20	20	19	14	20	25	19	24	23	36
San Miguel	12	7	10	9	6	8	6	7	3	7
Sandoval	12	15	6	12	11	16	20	20	18	24
Santa Fe	24	26	35	30	22	23	25	38	24	23
Sierra	5	6	4	4	7	5	2	2	4	2
Socorro	6	5	4	6	3	2	7	1	5	6
Taos	6	8	5	6	20	12	12	6	8	6
Torrance	6	5	2	4	2	6	6	4	6	9
Union	0	0	0	1	2	1	1	0	2	2
Valencia	10	7	9	16	9	7	16	15	9	8
Out of State/Unknown	7	5	13	5	10	3	2	3	3	6
<b>Totals</b>	<b>381</b>	<b>360</b>	<b>358</b>	<b>363</b>	<b>347</b>	<b>361</b>	<b>390</b>	<b>397</b>	<b>379</b>	<b>406</b>

## **Suicide Deaths – Summary**

New Mexico's suicide rate is consistently higher than the national average, comprising 2.6% of all deaths in New Mexico, compared to 1.3% of all deaths in the U.S. The rate in 2007 was 19.5 per 100,000 people, compared to a rate of 10.9 per 100,000 people in the rest of the U.S. (2007 New Mexico Selected Health Statistics, State Center for Health Statistics, Department of Health).

Deaths from suicide in 2010 occurred most frequently among non-Hispanic whites (65.0%) and males (74.4%). More men between the ages of 25 and 34 years (16.5% of all suicides) committed suicide than other age group by gender. More people committed suicide on Thursday (68/406, 16.7%) than any other day of the week. More suicides occurred in May than any other month (49/406, 12.1%). The fewest occurred in February and March (24/406, 5.9% in each month). The total number of suicides increased from 2009 (7.1%).

Overview – Manner of Death – Homicide Deaths

Figure 19 - Homicide Deaths – 2001 – 2010

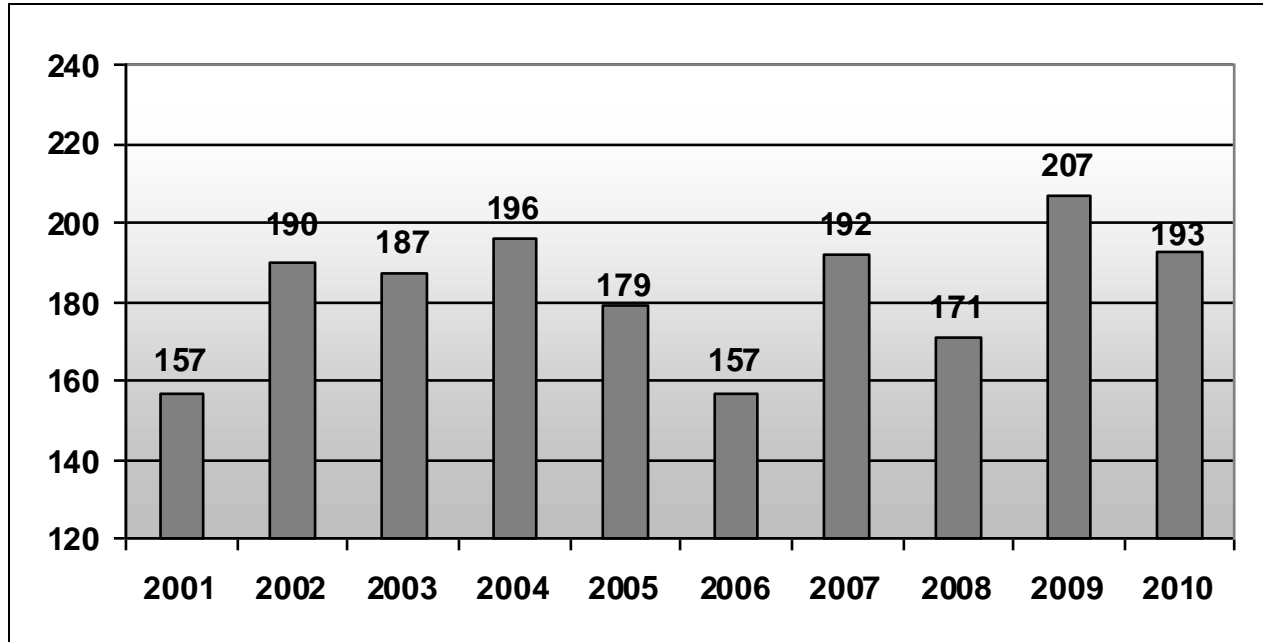
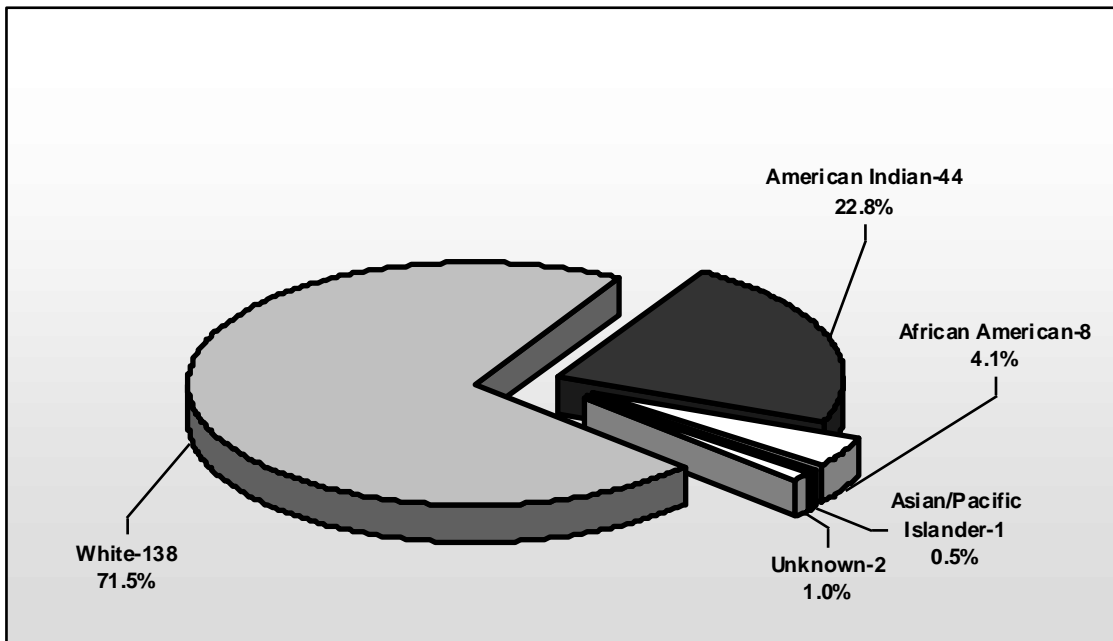


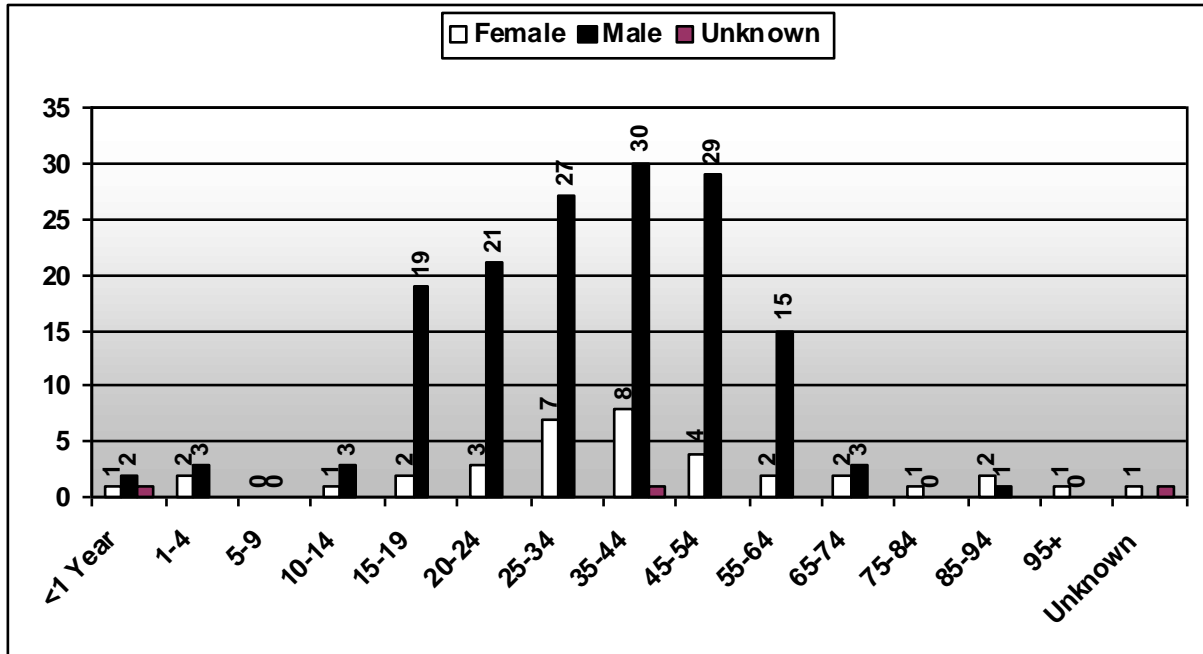
Figure 20 - Homicide Deaths by Race/Ethnicity – 2010



\* White includes 90 Hispanic



Figure 21 - Homicide Deaths by Age and Gender – 2010



**Table 12 - Homicide Deaths – County of Injury – 2001 - 2010**

County of Injury	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Bernalillo	46	66	64	62	69	52	60	53	51	64
Catron	0	2	1	0	0	0	1	0	0	0
Chaves	6	9	6	8	15	6	9	9	10	6
Cibola	6	2	4	2	1	2	1	0	2	3
Colfax	0	2	3	0	0	2	2	0	1	1
Curry	5	5	5	11	4	4	2	4	2	2
De Baca	0	0	0	1	1	0	0	0	0	0
Dona Ana	9	9	6	9	8	6	9	11	11	14
Eddy	2	6	4	5	3	3	4	2	6	3
Grant	2	2	3	1	1	3	4	3	1	1
Guadalupe	0	0	2	0	0	0	2	0	0	0
Harding	0	0	0	1	0	0	0	0	0	0
Hidalgo	0	0	0	1	0	0	1	0	0	0
Lea	6	5	7	6	7	6	7	4	6	12
Lincoln	1	1	0	5	2	1	1	1	0	1
Los Alamos	0	0	0	1	0	0	0	1	0	0
Luna	0	5	3	4	0	1	2	3	1	1
McKinley	14	11	8	7	7	7	11	8	10	9
Mora	0	1	0	0	0	1	0	0	2	0
Otero	1	4	5	9	0	4	3	4	8	4
Quay	0	0	0	1	0	0	4	1	1	1
Rio Arriba	4	4	8	8	8	2	6	5	2	7
Roosevelt	1	1	0	2	3	0	2	1	1	2
San Juan	8	6	8	7	11	11	19	12	7	13
San Miguel	3	6	7	2	4	1	8	2	5	3
Sandoval	3	6	5	8	4	3	3	7	7	5
Santa Fe	9	6	5	6	4	9	4	9	8	10
Sierra	7	1	1	1	3	2	1	0	1	0
Socorro	2	2	3	1	1	1	1	4	2	1
Taos	0	4	7	6	2	3	2	2	0	6
Torrance	1	1	2	0	2	1	2	3	0	3
Union	0	0	2	1	0	0	0	0	0	0
Valencia	5	3	4	12	8	6	6	11	7	1
Out of State/Unknown	16	20	14	8	11	19	14	11	55	20
<b>Totals</b>	<b>157</b>	<b>190</b>	<b>187</b>	<b>196</b>	<b>179</b>	<b>156</b>	<b>192</b>	<b>171</b>	<b>207</b>	<b>193</b>

**Table 13 - Homicide Deaths – County of Pronouncement – 2001 - 2010**

County of Pronouncement	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
Bernalillo	55	72	72	74	73	62	70	61	81	73
Catron	0	1	1	0	0	0	0	0	0	0
Chaves	4	9	6	9	14	5	9	8	10	6
Cibola	8	2	3	1	1	2	1	0	3	4
Colfax	0	2	3	0	0	2	2	0	1	1
Curry	6	6	5	11	3	3	2	3	4	2
De Baca	0	0	0	1	1	0	0	0	0	0
Dona Ana	7	7	5	6	7	6	10	9	9	12
Eddy	2	6	4	4	3	0	3	2	6	3
Grant	2	2	3	1	1	2	3	2	1	1
Guadalupe	0	0	2	0	0	0	2	0	0	2
Harding	0	0	0	1	0	0	0	0	0	0
Hidalgo	0	0	0	1	0	0	0	0	0	0
Lea	5	4	7	5	6	6	6	4	8	10
Lincoln	1	3	0	6	1	1	1	1	1	0
Los Alamos	1	0	0	1	0	0	0	1	0	0
Luna	1	6	3	2	1	2	4	4	2	1
McKinley	10	11	7	6	5	6	8	7	10	7
Mora	0	1	0	0	0	0	0	0	2	0
Otero	1	3	4	8	0	3	3	4	5	4
Quay	0	0	0	1	0	0	4	1	0	1
Rio Arriba	4	4	8	7	8	2	5	0	4	8
Roosevelt	0	0	0	2	3	0	1	5	1	1
San Juan	9	7	9	7	13	15	20	0	10	11
San Miguel	1	6	7	2	3	1	6	11	5	2
Sandoval	2	4	5	7	4	4	3	2	11	3
Santa Fe	8	5	5	7	4	9	5	7	8	11
Sierra	7	1	0	1	2	1	1	10	0	1
Socorro	2	1	2	1	1	1	1	0	2	1
Taos	0	4	7	5	2	3	2	2	1	6
Torrance	1	1	1	0	2	1	2	1	0	2
Union	0	0	1	1	0	0	0	2	0	0
Valencia	7	3	5	7	6	4	4	0	4	1
Out of State/Unknown	13	19	12	11	15	15	13	9	18	19
<b>Totals</b>	<b>157</b>	<b>190</b>	<b>187</b>	<b>196</b>	<b>179</b>	<b>156</b>	<b>192</b>	<b>171</b>	<b>207</b>	<b>193</b>

## Homicide Deaths – Summary

Homicides decreased by 6.8% from 2009 to 2010. Homicide victims were most frequently male (80%) and Hispanic (47%). As with suicide rates, homicide rates in New Mexico tend to be higher than the national rate, 8.0 per 100,000 in 2007 compared to a national rate of 6.1 per 100,000 (2007 New Mexico Selected Health Statistics, State Center for Health Statistics, Department of Health).

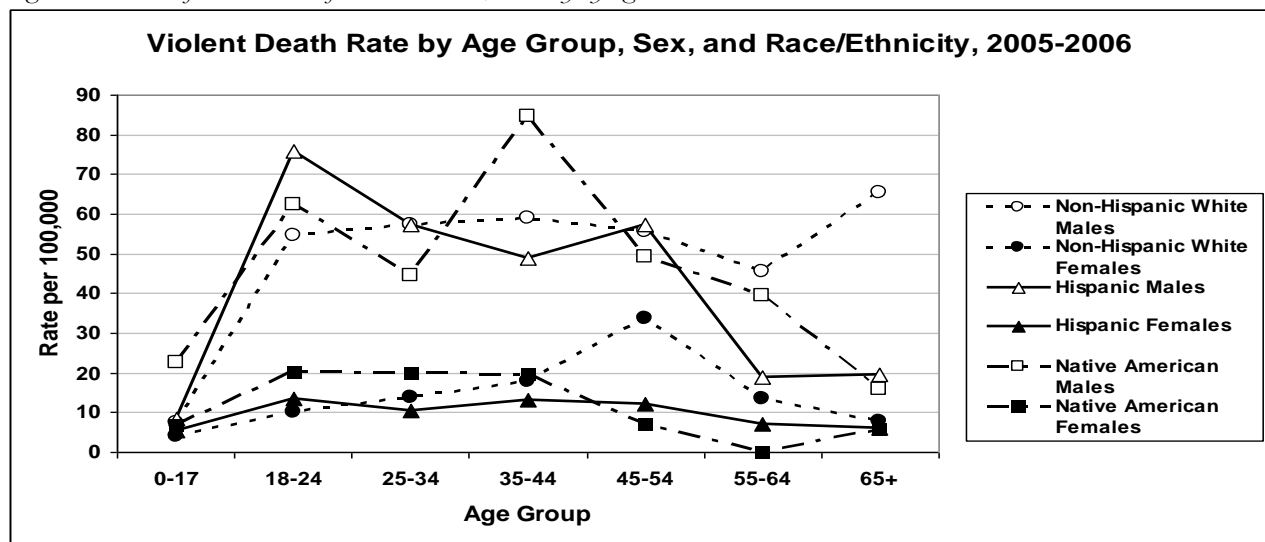
## New Mexico Violent Death<sup>†</sup> Reporting System (NM-VDRS) Update

New Mexico is one of 17 states currently participating in the National Violent Death Reporting System (NM-VDRS) in cooperation with the Centers for Disease Control and Prevention. The primary purpose of this surveillance system is to increase the understanding of circumstances that contribute to violent deaths in order to encourage development and implementation of more effective violence prevention strategies. Violent deaths include suicides, homicides, deaths from legal intervention (excluding executions), deaths due to undetermined intent, unintentional deaths due to firearms, and terrorism-related deaths.

The Office of the Medical Investigator has been part of NM-VDRS since its inception in 2004, working closely with the New Mexico Department of Health. Data collection began on January 1, 2005. NM-VDRS personnel at OMI combine data from numerous sources including medical examiner records, police reports, death certificates, the state crime laboratory, and child fatality review records. For each violent death incident, information is abstracted on all victims, suspects, circumstances, relationships, and weapons. Collecting information from numerous sources allows for more certainty in the identification of deaths due to violence, as well as more reliability and completeness in the information collected.

From 2005 through 2006, 1,128 violent deaths were recorded in New Mexico; of these 1,060 were residents of New Mexico. The state's overall violent death rate is one of the highest in the nation. Males accounted for 78% of all the violent deaths incidents captured by NM-VDRS and Native American males aged 35-44 years had the highest rate of violent death. The graph below shows the rate of violent death for males and females of Non-Hispanic White, Hispanic White and Native American origins by age group (e.g., 56 out of every 100,000 Non-Hispanic White males aged 45-54 died in a violent manner).

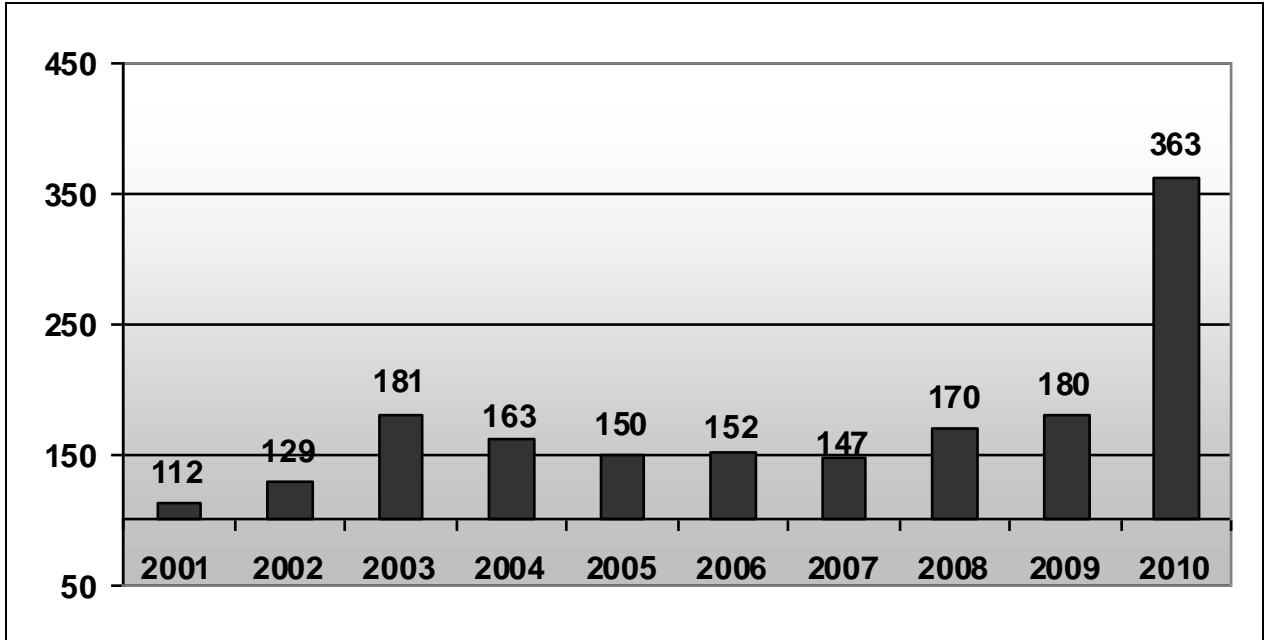
Figure 22. Rate of violent death for sex and race/ethnicity by age, New Mexico, 2005-2006



Note: N=1060; The rates were calculated using population estimates for 2005 and 2006 from the University of New Mexico Bureau of Business and Economic. Source: NM-VDRS, 2005-2006 data obtained June 20, 2008.

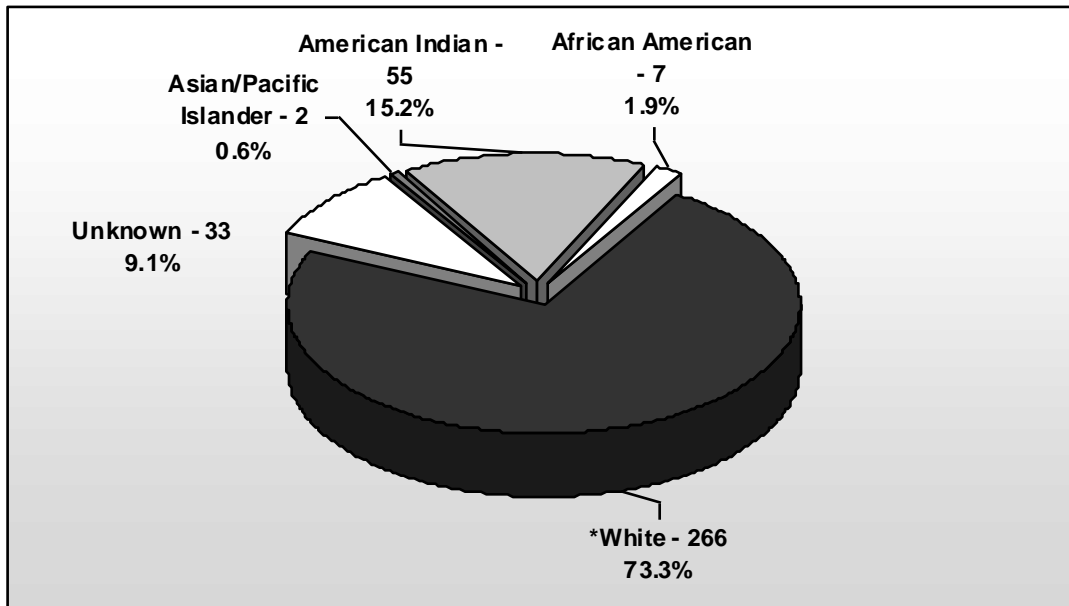
## Overview – Manner of Death – Undetermined Deaths

Figure 23 - \*Undetermined Deaths – 2001 – 2010



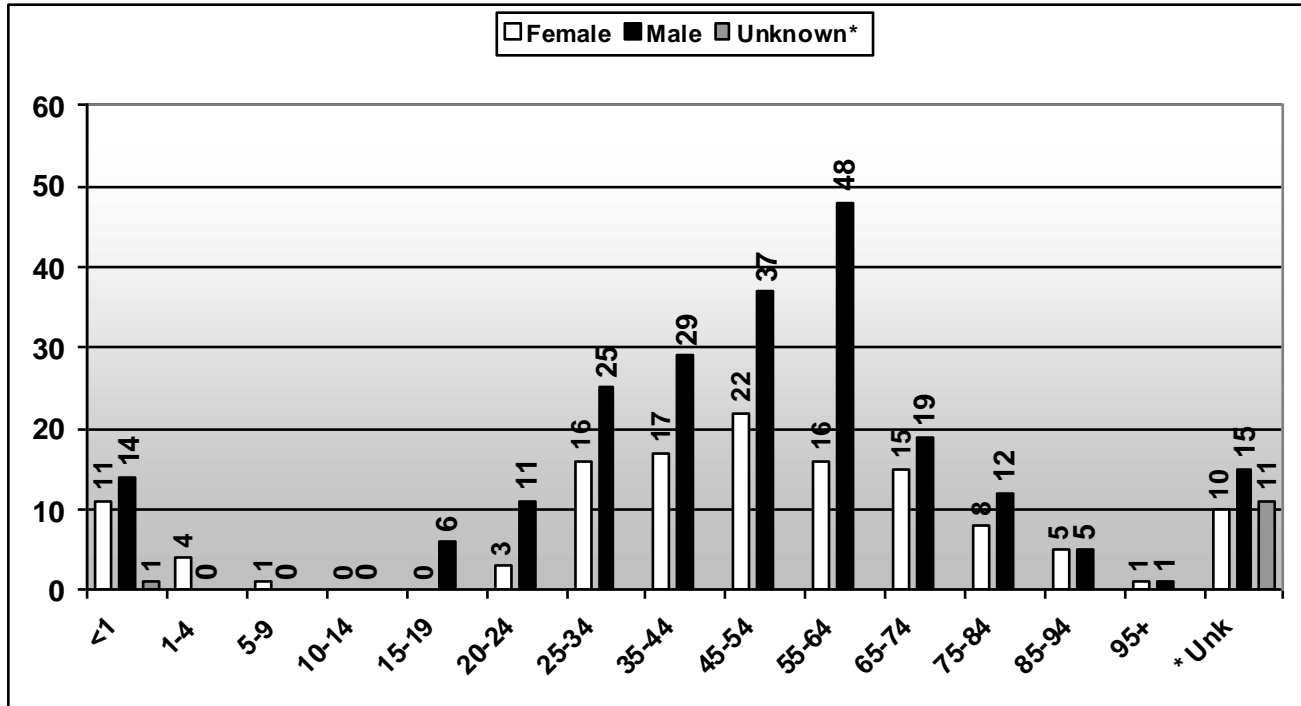
\* 48 Other, 31 Uncoded, 71 Undetermined, 5 Unknown, **208 Pending** included in Undetermined. This report has been prepared earlier in the year than previous reports, meaning more cases are still pending test results, which accounts for the unusually high number of undetermined cases in 2010.

Figure 24 - Undetermined Deaths by Race/Ethnicity – 2010



\* White includes 28 Hispanic, African American includes 1 Hispanic

Figure 25 - Undetermined Deaths by Age and Gender – 2010



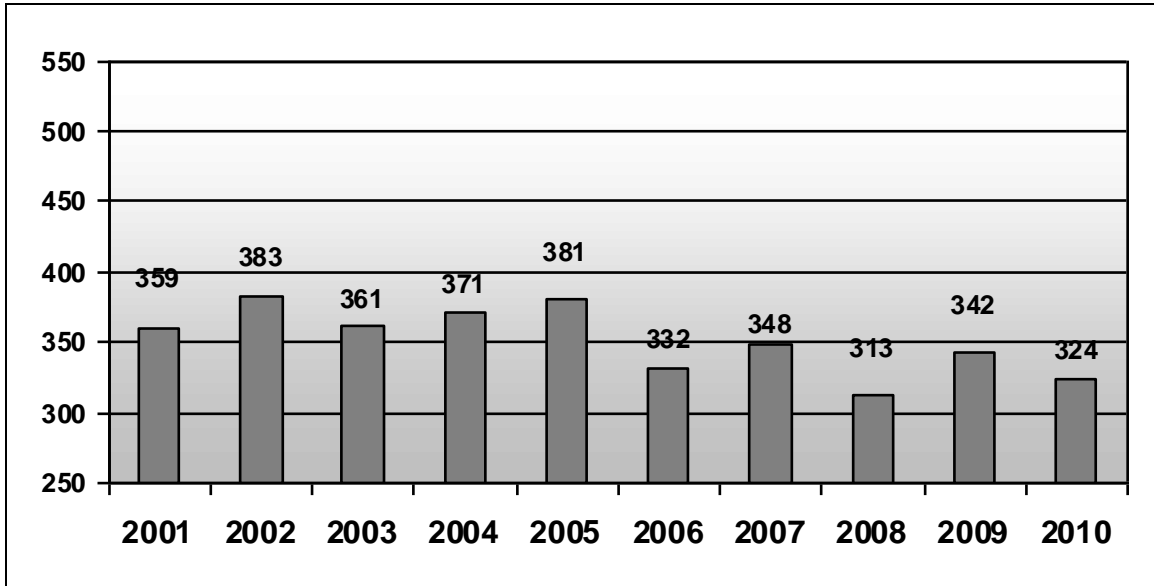
\* Gender and/or Age unknown

## Undetermined Deaths – Summary

All possible efforts are made to determine both a manner (accident, suicide, homicide, natural) and a cause of death for all deaths investigated by OMI. In a very small percentage of cases (between 0.4% and 0.9% most years) neither the manner nor cause of death can be determined, even with a complete autopsy, scene investigation, and laboratory testing. In other cases only skeletal or mummified remains were found, or a request for an autopsy was withdrawn.

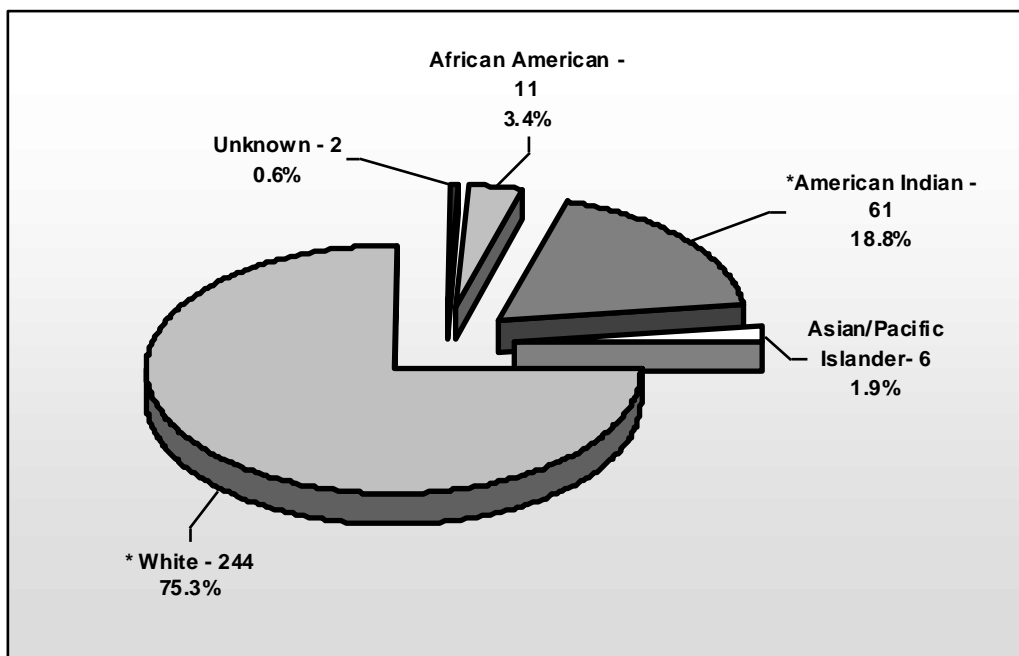
## Deaths of Children (19 Years of Age and Younger)

Figure 26 – Children\* – Deaths – 2001 – 2010



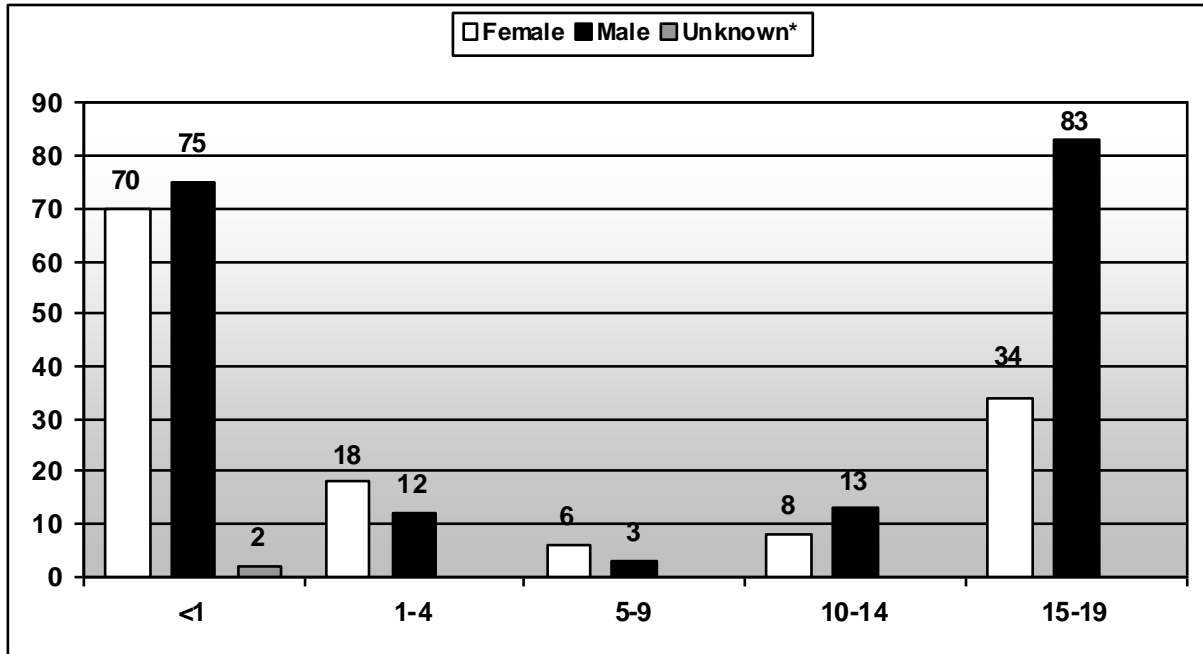
\* 19 Years old and younger.

Figure 27 – Children - Deaths by Race/Ethnicity – 2010



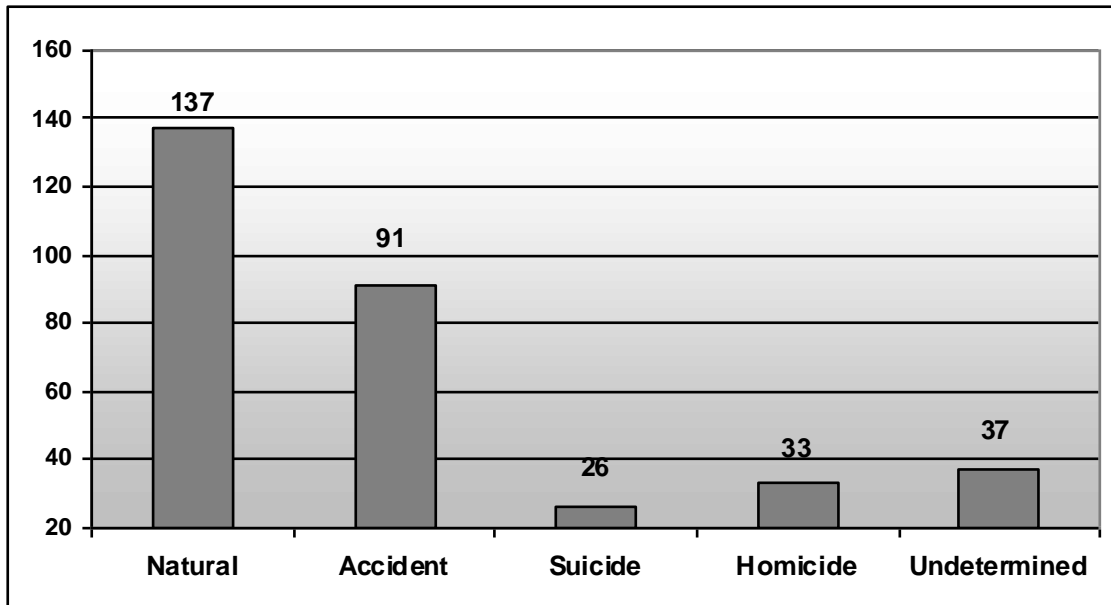
\* White includes 120 Hispanic

Figure 28 – Children – Deaths by Age and Gender – 2010



\* Gender unknown

Figure 29 – Children – Total Cases - Manner of Death – 2010





## Overview – Children – Manner of Death – Natural Deaths

Figure 30 – Children – Natural Deaths – 2000 – 2010

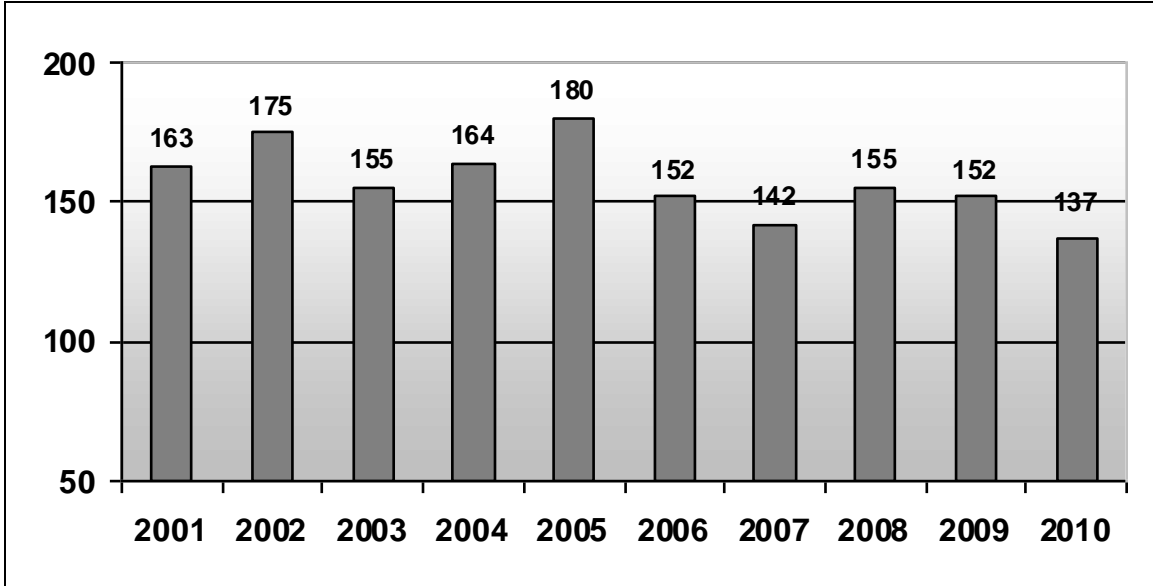
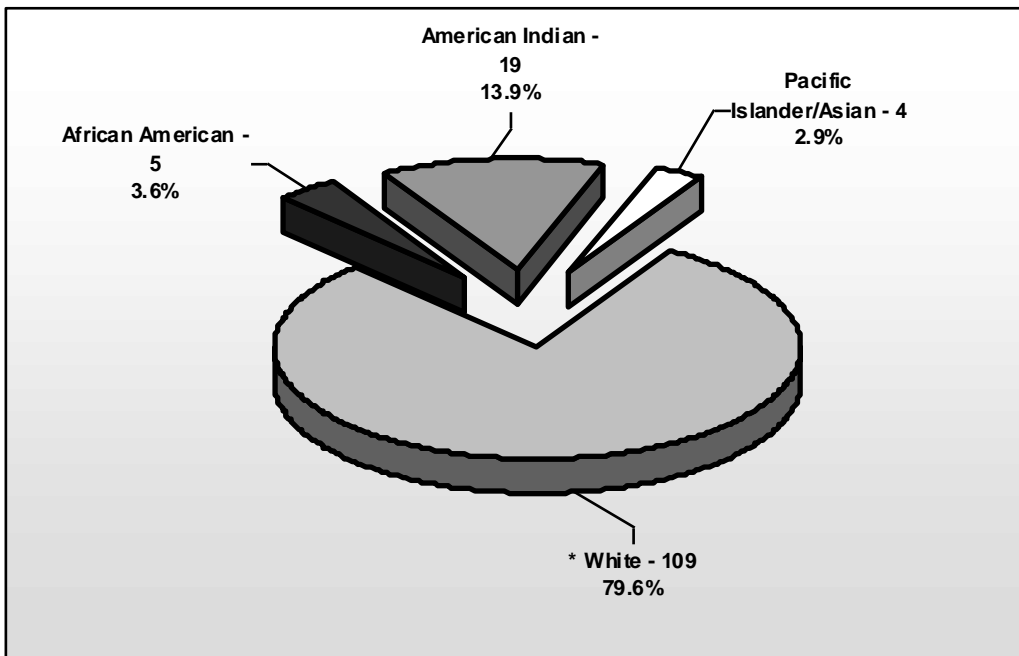
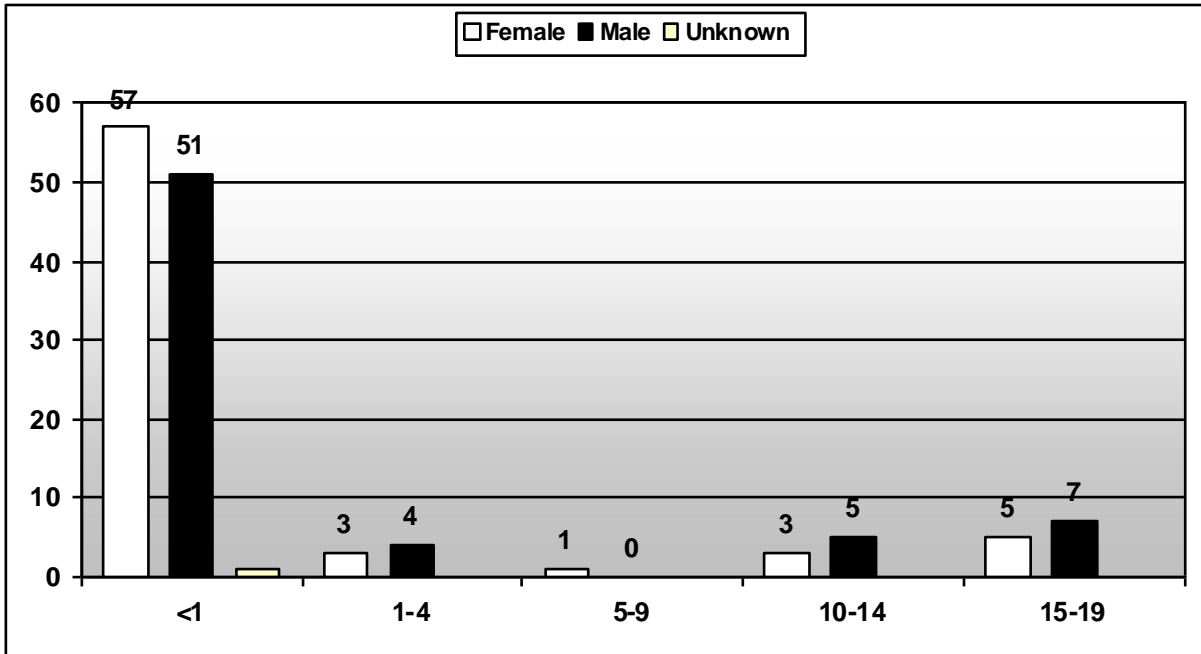


Figure 31 – Children – Natural Deaths by Race/Ethnicity – 2010



\* White includes 43 Hispanic

Figure 32 – Children – Natural Deaths by Age and Gender – 2010



## Overview – Children – Manner of Death – Accidental Deaths

Figure 33 – Children – Accidental Deaths – 2000 – 2010

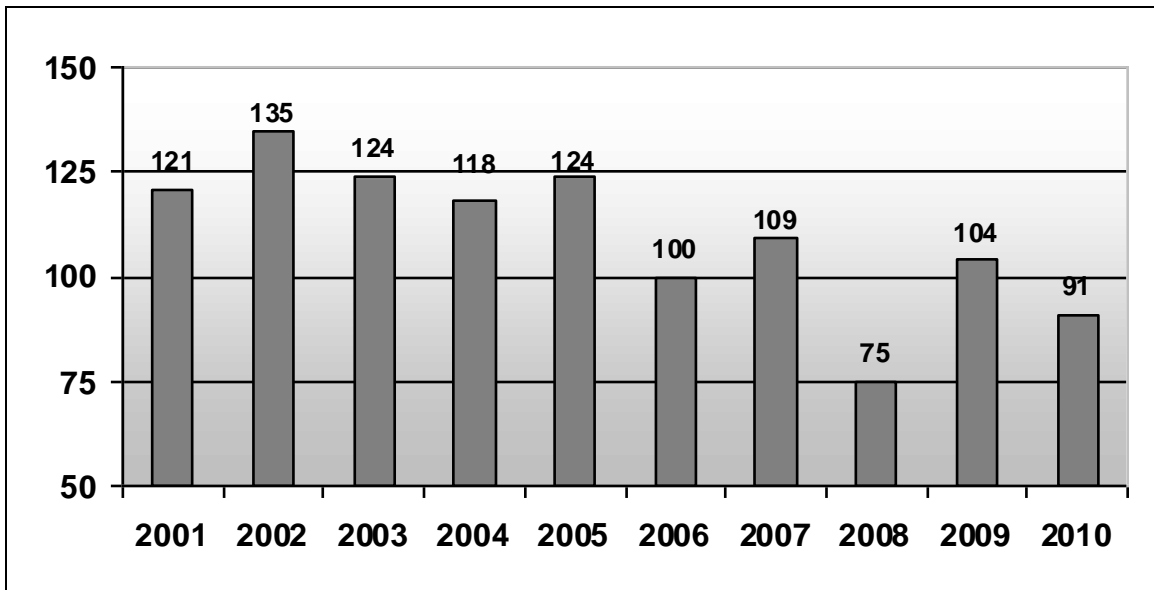
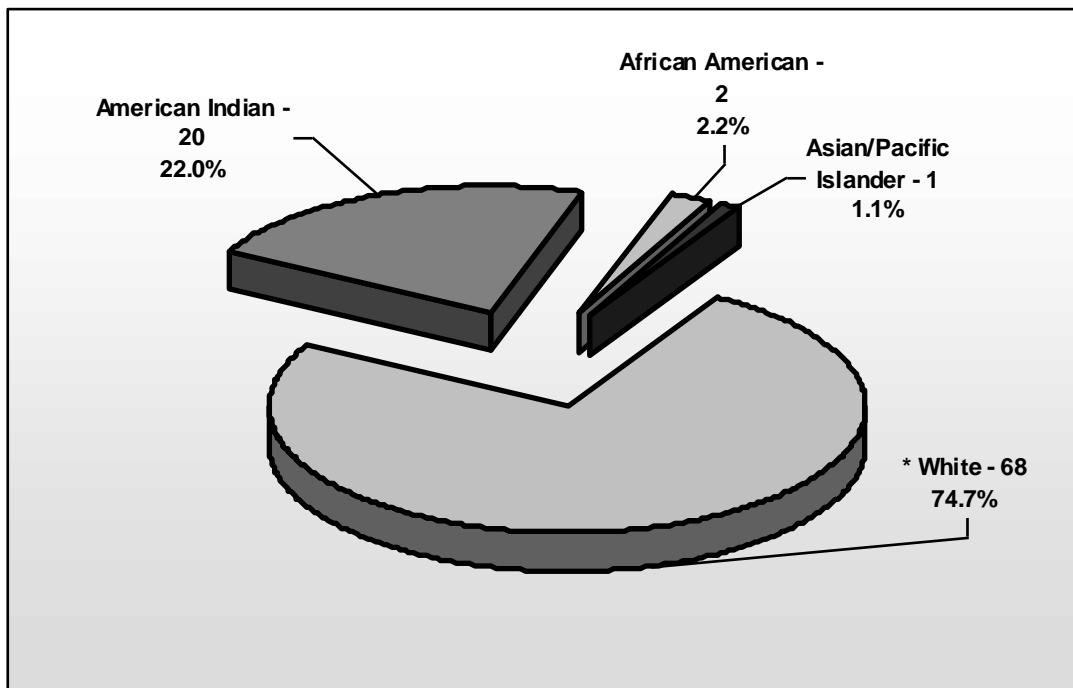
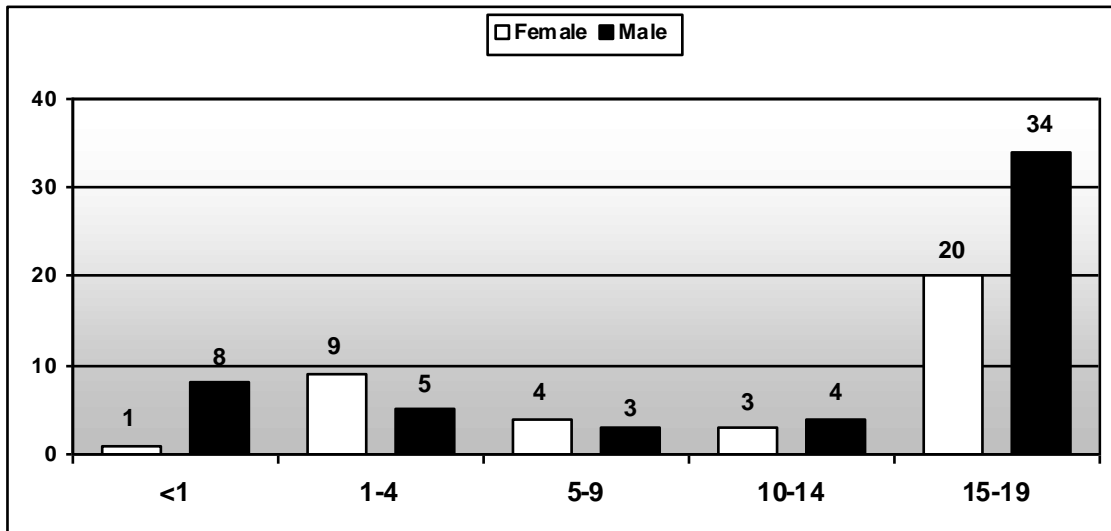


Figure 34 – Children – Accidental Deaths by Race/Ethnicity



\* White includes 36 Hispanic

**Figure 35 – Children – Accidental Deaths by Age and Gender – 2010**



**Table 14 – Children – Accidental Deaths – Cause of Death -- 2010**

Cause of Death	Total Cases
Multiple injuries	44
Head and neck injuries	19
Narcotic Abuse	8
Substance intoxication	3
Drowning	4
Asphyxia	3
Ethanol Intoxication	3
Gunshot Wound	3
Other	2
Hyperthermia	1
Smoke Inhalation	1
<b>Total</b>	<b>91</b>

## Overview – Children – Manner of Death – Suicide Deaths

Figure 36 – Children – Suicide Deaths – 2000 – 2010

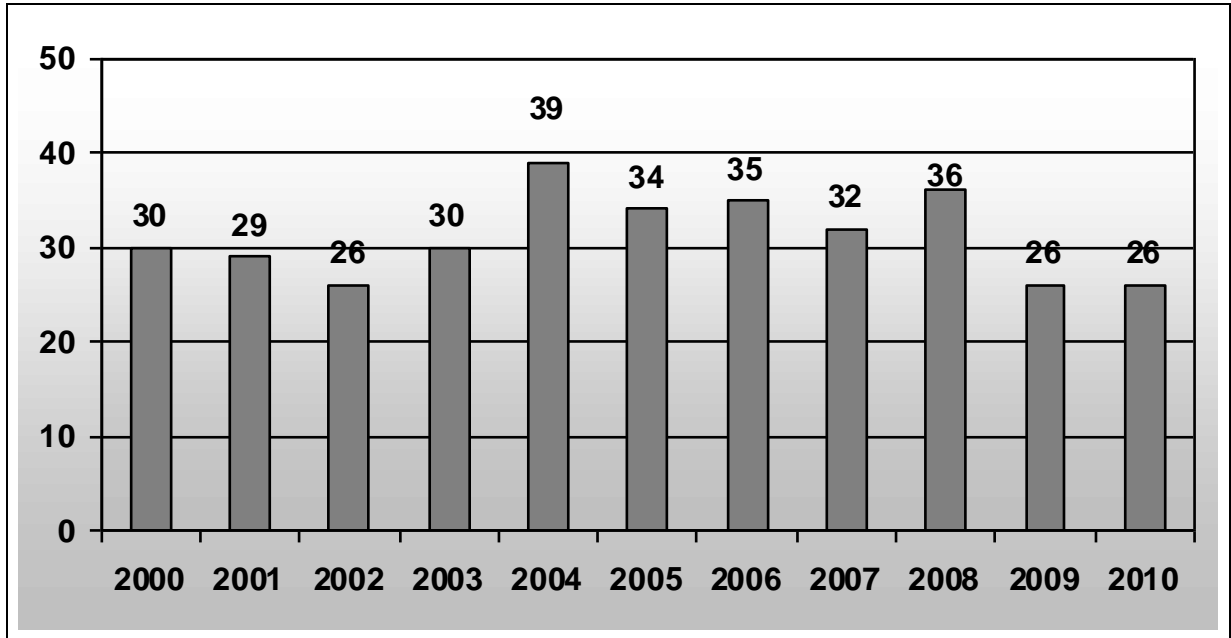
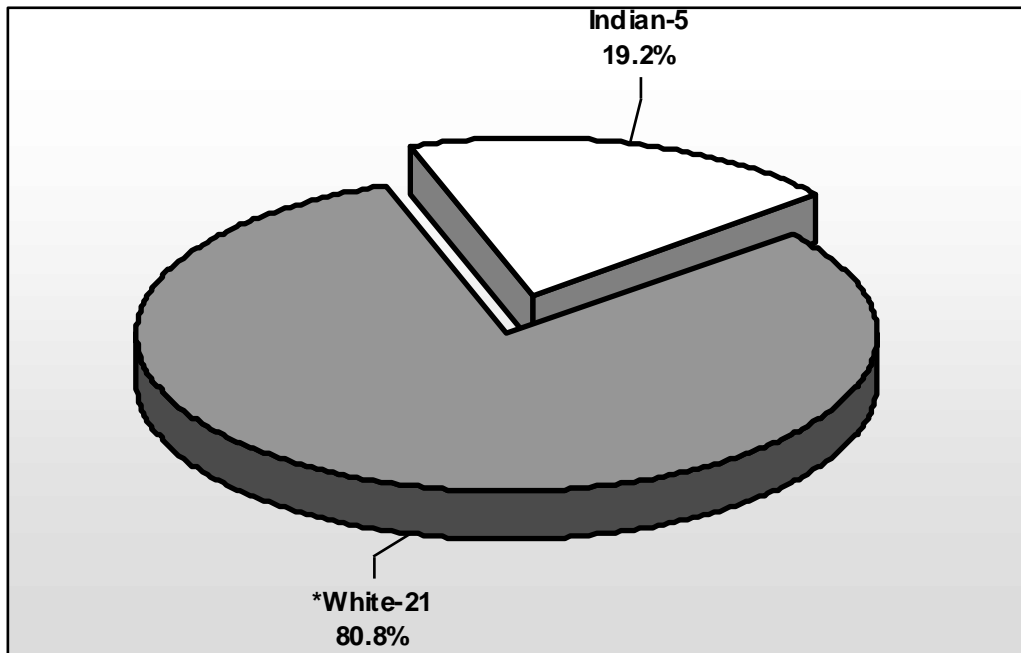


Figure 37 – Children – Suicide Deaths by Race/Ethnicity – 2010



\* White includes 12 Hispanic

Figure 38 – Children – Suicide Deaths by Age and Gender – 2010

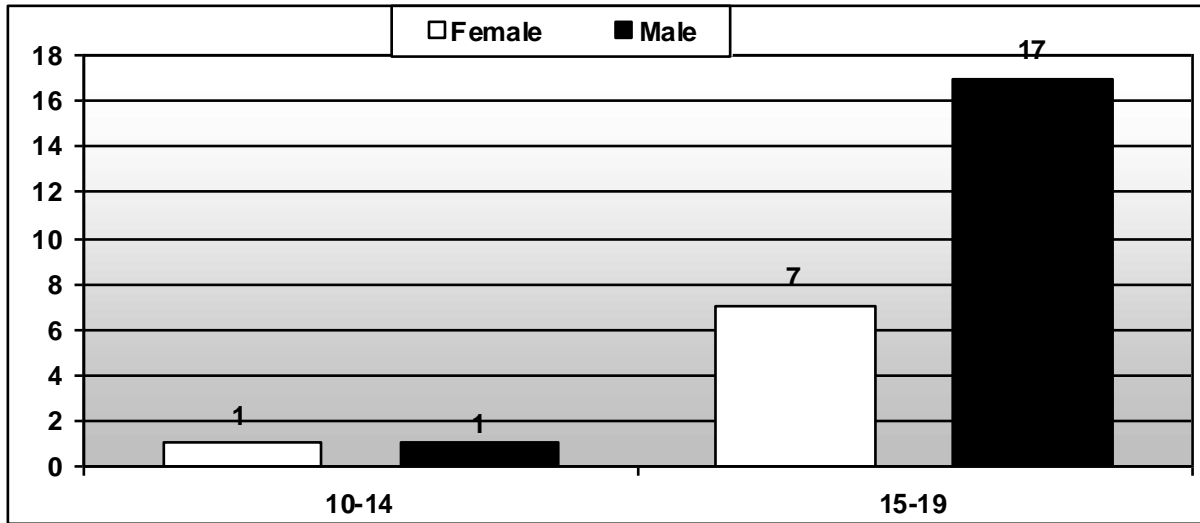


Figure 39 – Children – Suicide Deaths by Month – 2010

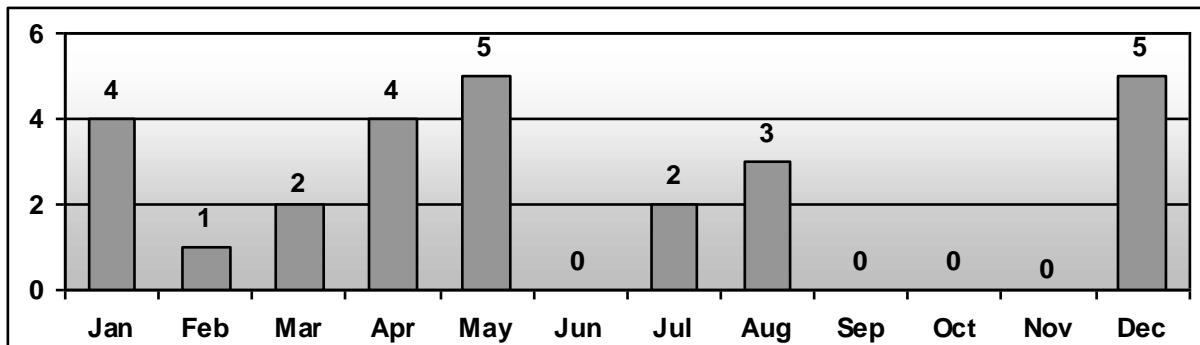
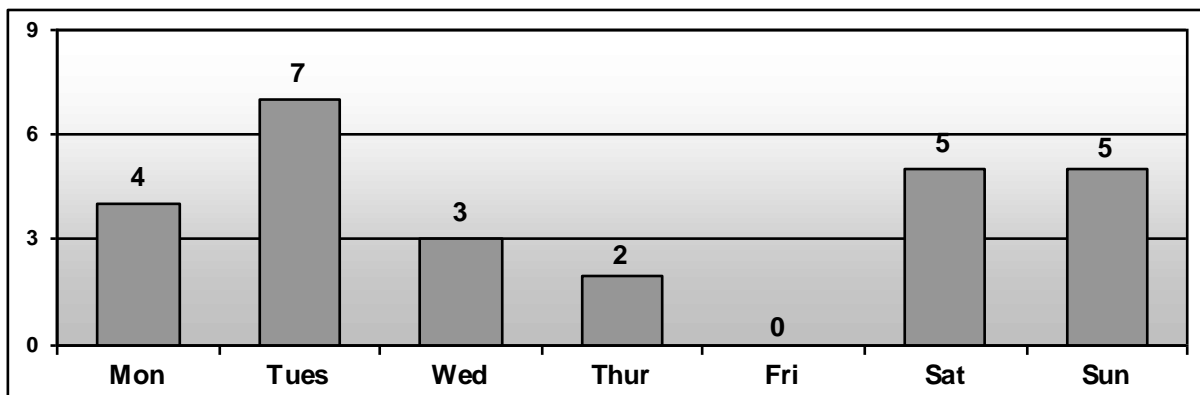


Figure 40 – Children – Suicide Deaths by Day of the Week – 2010



**Table 15 – Children – Suicide Deaths – Cause of Death -- 2010**

<b>Cause</b>	<b>Total Cases</b>
Hanging	14
Gunshot Wound	8
Multiple Injuries	2
Carbon Monoxide Intoxication	1
Substance Intoxication	1
<b>Total</b>	<b>26</b>

### **Suicide in Children – Summary**

The 10-year summaries presented in this report for childhood deaths all include ages 19 and younger. There were 26 suicides in children in 2010. Suicide deaths were more common among young males (69%) than females (31%). Self-inflicted gunshot wounds and hanging were the most common method of suicide in children. More suicides were committed by youth during January, May and December when compared with other months, and Tuesdays were the most common day for youth suicides.

## Overview – Children – Manner of Death – Homicide Deaths

Figure 41 – Children – Homicide Deaths – 2000 – 2010

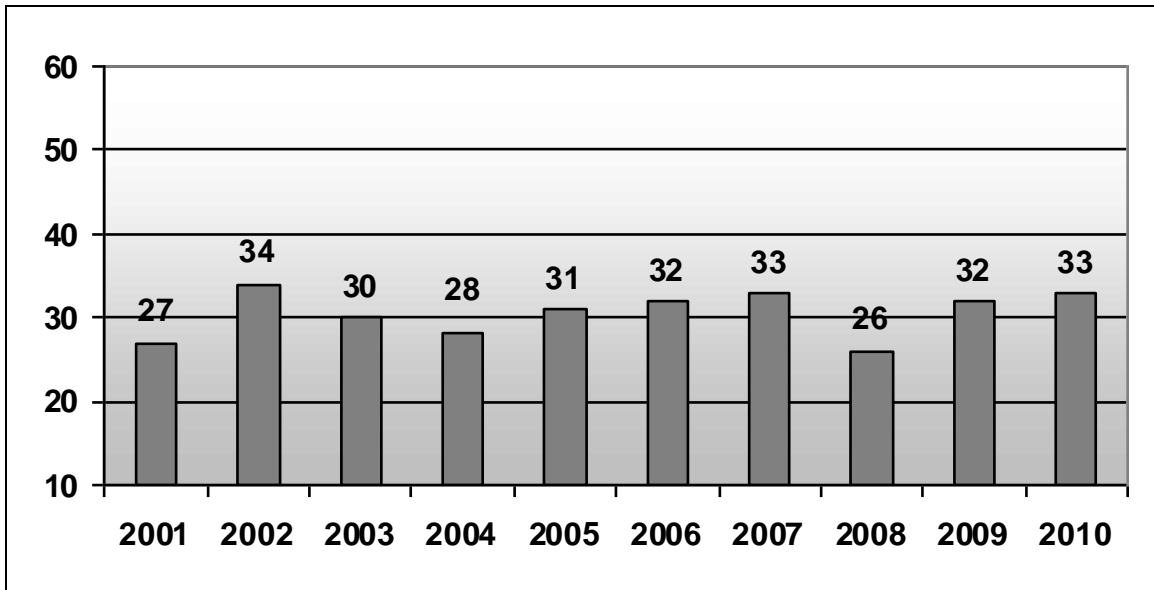
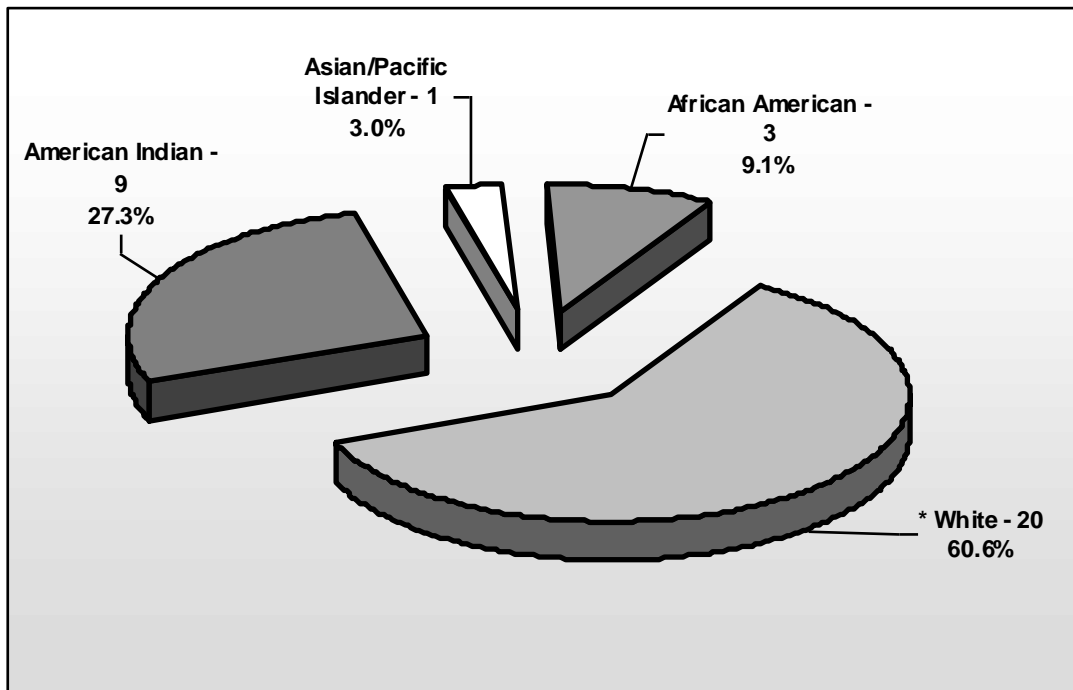


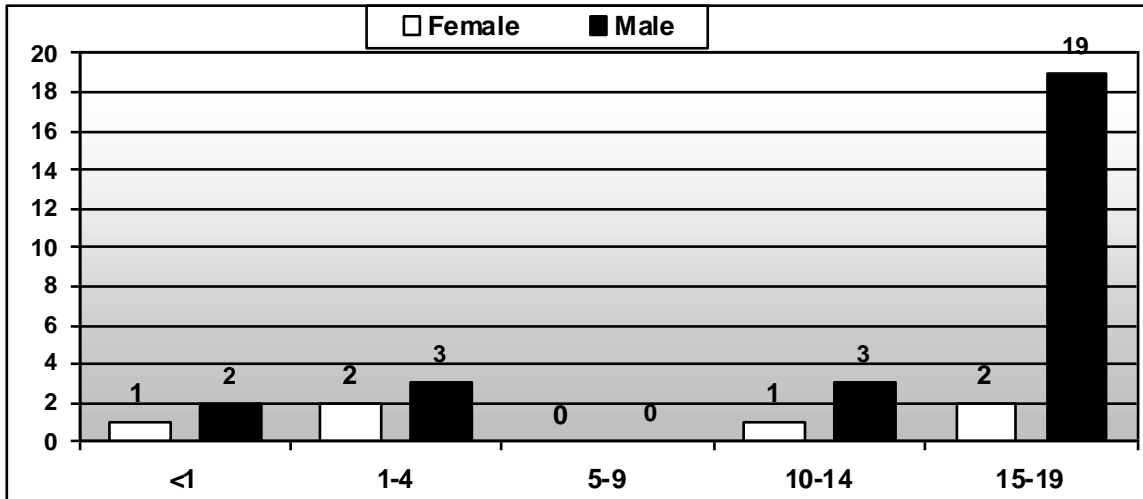
Figure 42 – Children – Homicide Deaths by Race/Ethnicity – 2010



\* White includes 16 Hispanic



**Figure 43 – Children – Homicide Deaths by Age and Gender – 2010**



**Table 16 – Children – Homicide Deaths – Cause of Death – 2010**

Cause of Death	Total Cases
Gunshot wound	18
Head and Neck Injuries	3
Multiple Injuries	2
Other	2
Stab Wound	8
<b>Total</b>	<b>33</b>

### Homicide Deaths of Children – Summary

As with the suicides, the total number of childhood homicides, both for this year’s cases and in the 10-year summaries, now includes anyone aged 19 years or younger. Childhood homicides increased by 3.1% from 2009. Murdered children tended to be male (84%), Hispanic (50%) and killed by a firearm (55%). The majority of childhood murder victims (58%) were between the ages of 15 and 19.

## **Overview – Children – Manner of Death – Undetermined Deaths**

During 2010, 37 people 19 years old or younger were classified as Undetermined manner of death.

## **Deaths of Children in New Mexico – 2010 Summary**

The 324 deaths of people aged 19 and younger represented 6.2% of all deaths investigated by the OMI in 2010. Male decedents comprised 57% of the total deaths in children. The most common manner of death among children was accidental, contributing 33% of the total. Firearms played a role in 8 suicides (5.9%) and 18 homicides (8.6%), 15% of all unnatural deaths in children.

An excellent resource for additional information about the deaths of children in New Mexico, their circumstances, risk factors, and opportunities for prevention is the Annual Report of the New Mexico Child Fatality Review (NMCFR), published by the New Mexico Department of Health Public Health Division, Maternal and Child Health Epidemiology Program. NMCFR consists of volunteers from many state and local agencies organized into six panels: Homicide, Suicide, Transportation, Sudden Infant Death Syndrome (SIDS), Unintentional Injury, and Child Abuse and Neglect. The experts on these panels review the circumstances of childhood deaths in order to identify risk factors and develop prevention strategies, and their findings are presented in their annual report

## Overview – Children – SIDS Deaths

Figure 44 – Children – SIDS (Natural) Deaths – 2000 – 2010

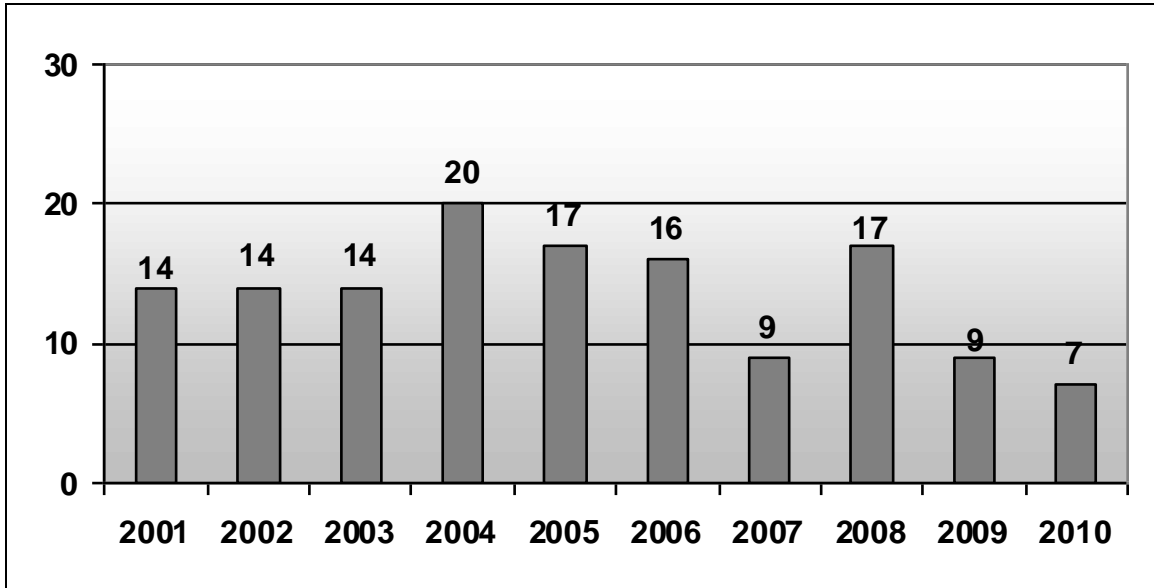
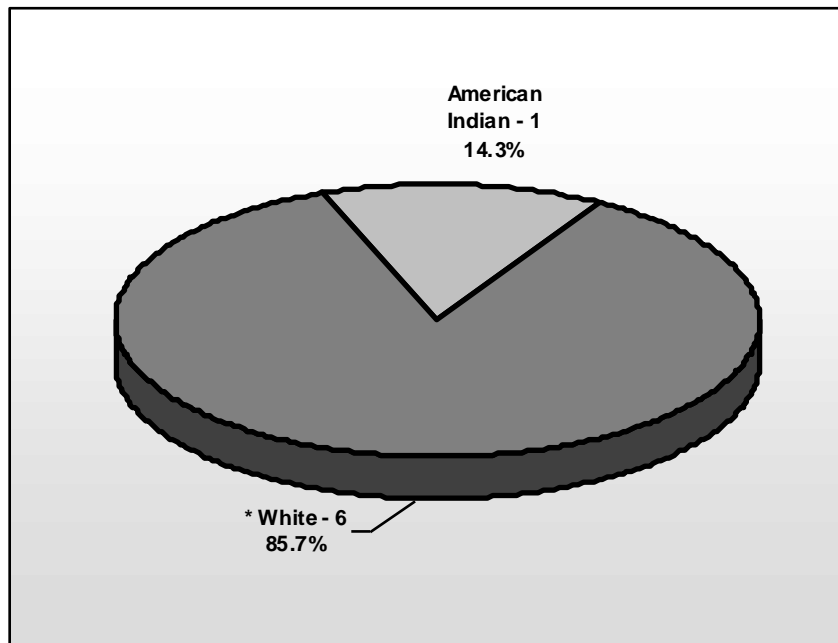


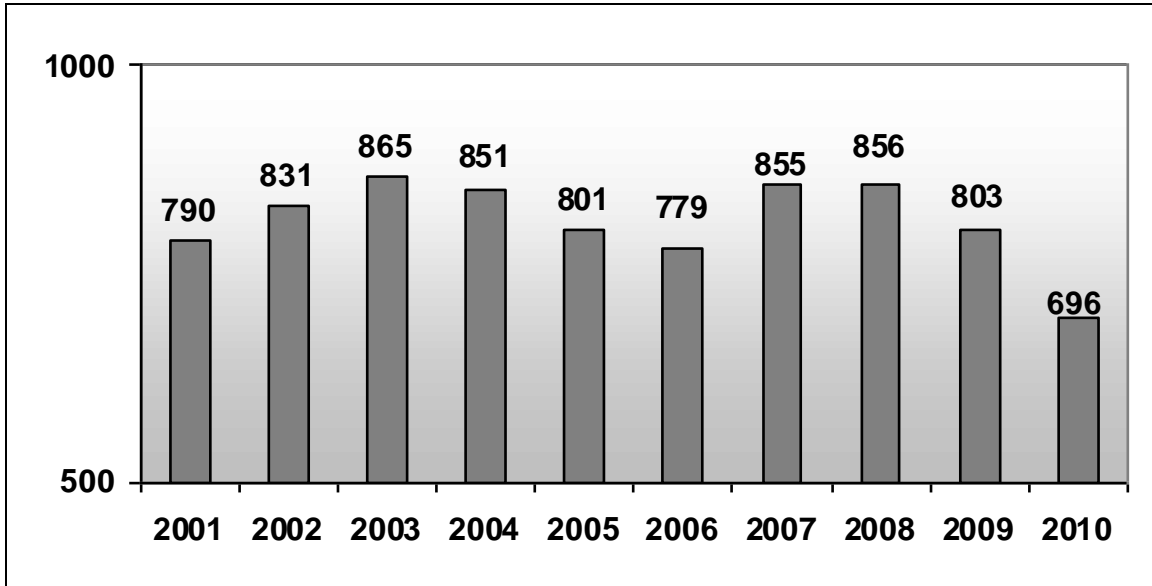
Figure 45 – Children – SIDS (Natural) Deaths by Race/Ethnicity – 2010



\* White includes 2 Hispanic

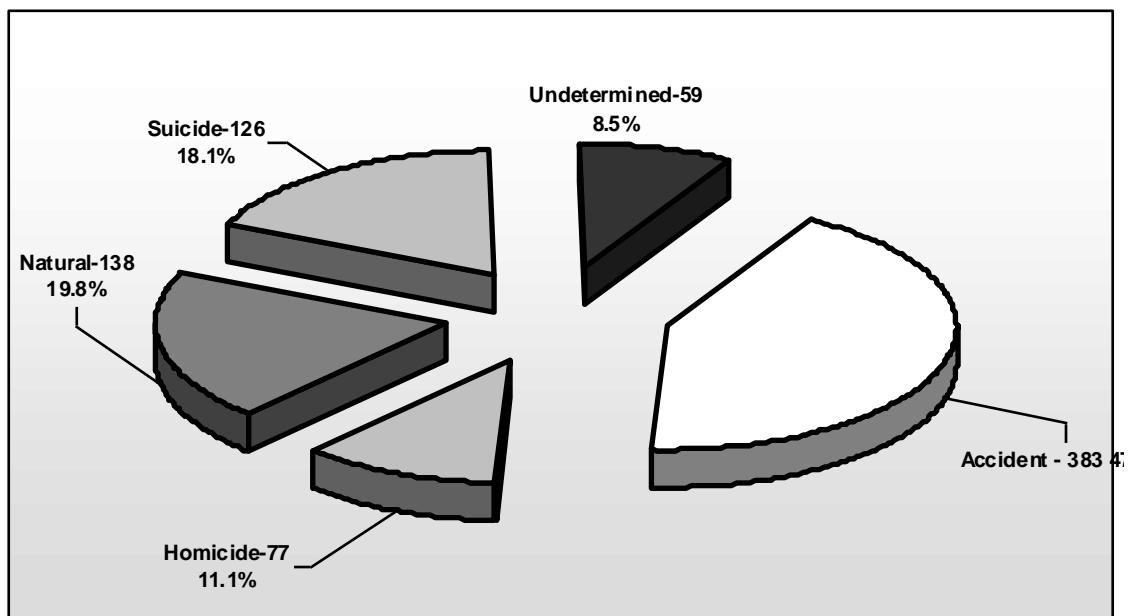
## Overview – Ethanol Related Deaths

Figure 47 – Ethanol Related Deaths – 2001 – 2010  
Ethanol Present in Decedent (> 0.005%)

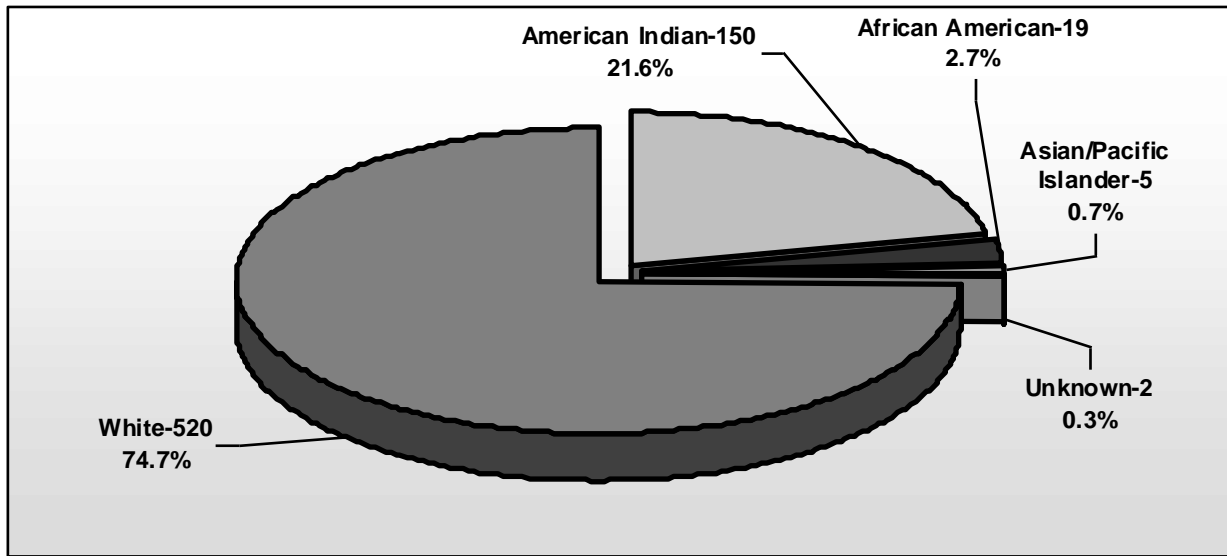


*The total for 2010 will probably increase once all cases with pending toxicology are completed later this year.*

Figure 48 – Ethanol Related Deaths – Manner of Death -- 2010  
Ethanol Present in Decedent (> 0.005%)

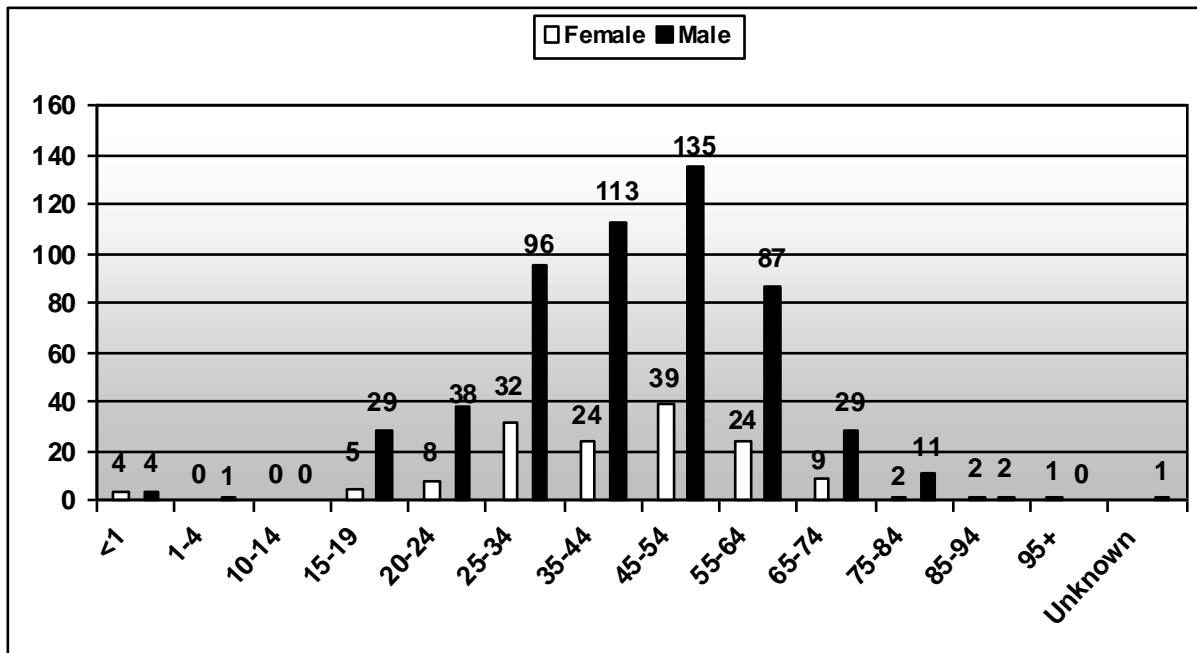


**Figure 49 – Ethanol Related Deaths by Race/Ethnicity – 2010**  
Ethanol Present in Decedent (> 0.005%)



\* White includes 225 Hispanic, \* American Indian includes 1 Hispanic, \*African American includes 1 Hispanic

**Figure 50 – Ethanol Related Deaths by Age and Gender – 2010**  
Ethanol Present in Decedent (> 0.005%)



**There were 59 Undetermined Deaths where Ethanol was present in the decedent in amounts greater than 0.005%.**

### **Ethanol Related Deaths – Summary – 2010**

There were 696 alcohol (ethanol) related deaths investigated by OMI in 2010, 13.1% of the total and a 13% decrease from 2009. Alcohol was most frequently related to accidental deaths (47.7% of all alcohol-related deaths) but was found in people dying from all manners of death. Alcohol was present in 18% of all suicide fatalities and 11% of all homicide victims. The most alcohol related deaths were seen in males ranging in age from 45 to 54 years.

## Motor Vehicle Related Deaths

Figure 51 – Motor Vehicle Deaths – 2001– 2010  
Ethanol Present in Decedent (> 0.005%)

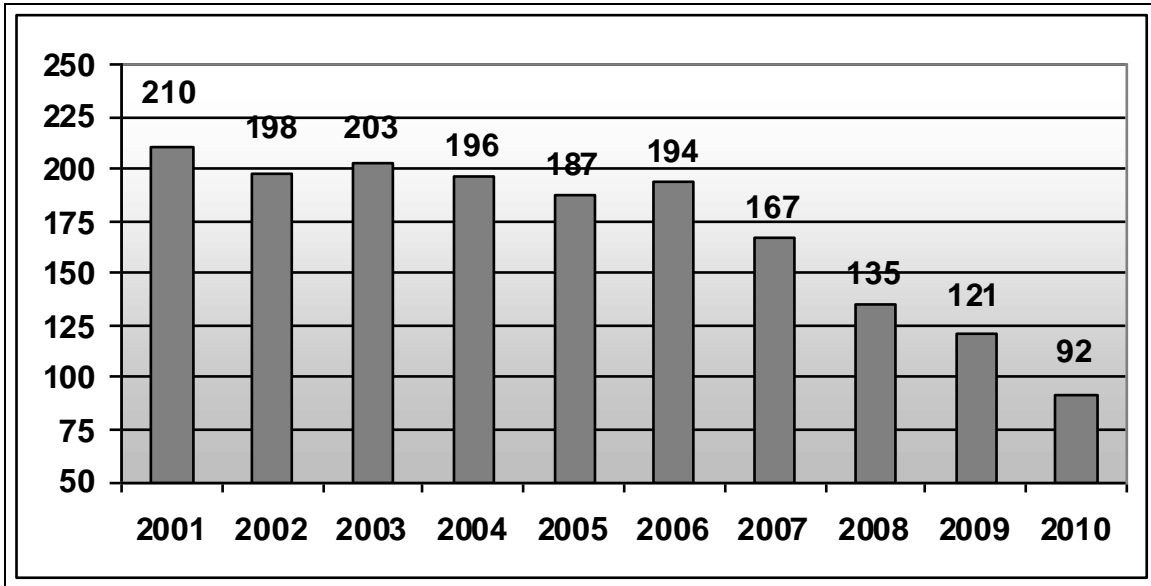
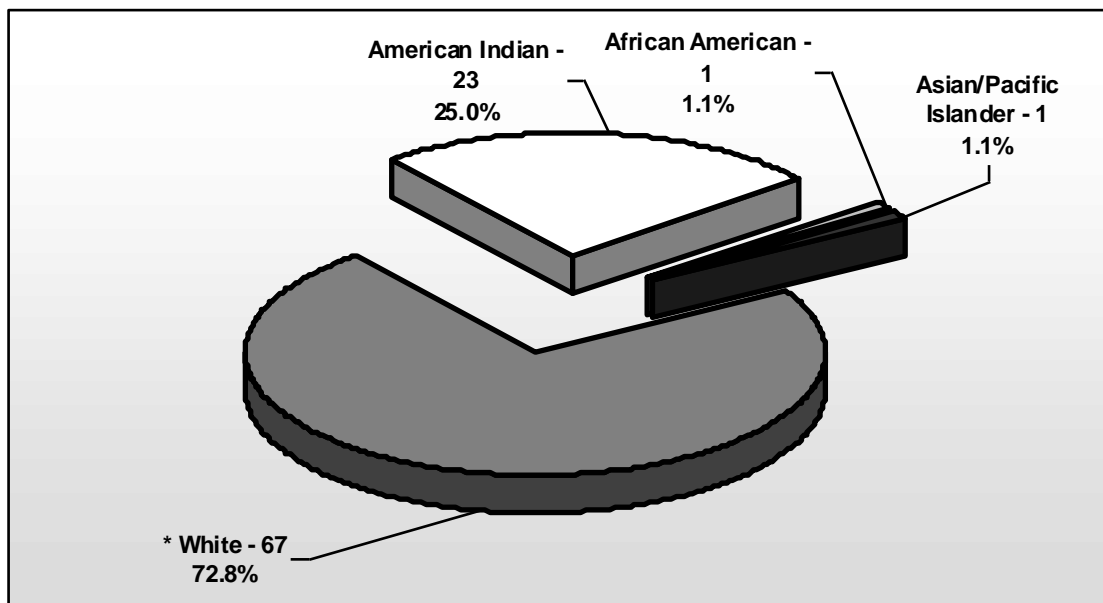
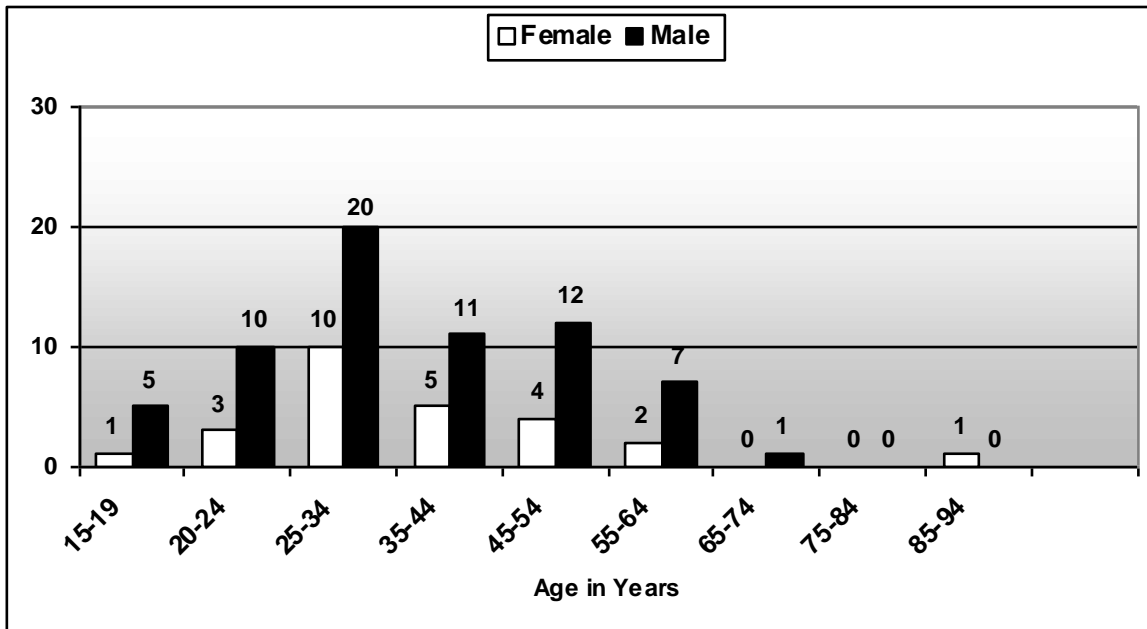


Figure 52 – Motor Vehicle Deaths by Race/Ethnicity – 2010  
Ethanol Present in Decedent (> 0.005%)



\* White includes 37 Hispanic

**Figure 53 – Motor Vehicle Deaths by Age and Gender – 2010**  
**Ethanol Present in Decedent (> 0.005%)**



**Table 17 – Motor Vehicle Related Deaths – Method 2010**  
**Ethanol Present in Decedent**

Circumstances	Total Cases	Presence of Ethanol > 0.005%		
		Yes	No	Not Tested
Driver	204	64	84	56
Passenger	80	15	37	28
Pedestrian	37	12	15	10
Occupant	10	4	2	4
Skateboarder	1	1	0	0
Cyclist	5	2	3	0
<b>Totals</b>	<b>337</b>	<b>98</b>	<b>141</b>	<b>98</b>



**Table 18 – Motor Vehicle Related Deaths – Seat Belt Use  
Ethanol Present in Decedent**

	Ethanol >0.005%	Seat Belt Use			Unknown	Total
		Belt Used	Belt Not Used	Not Installed		
<b>Motor Vehicle Driver</b>	Yes	21	24	0	19	64
	No	23	34	1	26	87
	Not Tested	18	20	1	17	56
	<b>Subtotal</b>	<b>62</b>	<b>78</b>	<b>2</b>	<b>62</b>	<b>204</b>
<b>Motor Vehicle Passenger</b>	Yes	6	4	0	5	15
	No	13	16	0	8	37
	Not Tested	7	13	0	8	28
	<b>Subtotal</b>	<b>26</b>	<b>33</b>	<b>0</b>	<b>21</b>	<b>80</b>
<b>Motor Vehicle Occupant*</b>	Yes	2	2	0	0	4
	No	0	1	0	1	2
	Not Tested	1	3	0	0	3
	<b>Subtotal</b>	<b>3</b>	<b>6</b>	<b>0</b>	<b>1</b>	<b>10</b>
<b>Totals</b>		<b>91</b>	<b>117</b>	<b>2</b>	<b>84</b>	<b>294</b>

\*Occupant means the person was either the driver or a passenger, but was not confirmed.

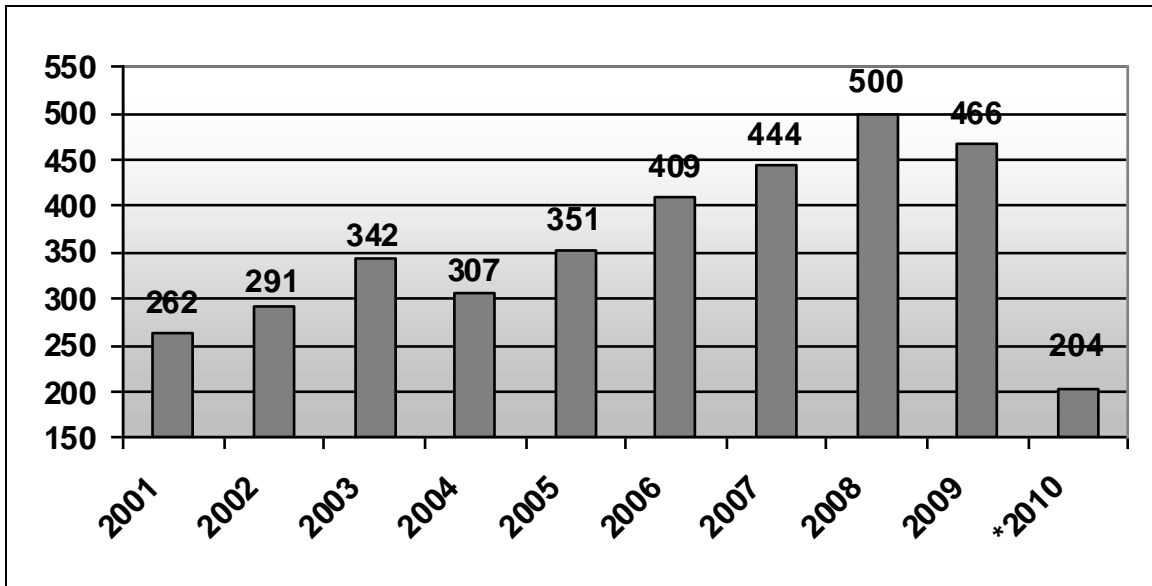
**Table 19 – Motor Vehicle Related Deaths – Air Bag Use  
Ethanol Present in Decedent**

	Ethanol >0.005%	Air Bag Use			Unknown	Total
		Inflated	Not Inflated	Not Installed		
<b>Motor Vehicle Driver</b>	Yes	14	8	3	39	64
	No	15	10	2	57	85
	Not Tested	8	6	4	38	56
	<b>Subtotal</b>	<b>37</b>	<b>24</b>	<b>10</b>	<b>133</b>	<b>204</b>
<b>Motor Vehicle Passenger</b>	Yes	5	2	1	7	15
	No	6	6	2	23	37
	Not Tested	6	0	2	20	28
	<b>Subtotal</b>	<b>17</b>	<b>8</b>	<b>5</b>	<b>50</b>	<b>80</b>
<b>Motor Vehicle Occupant*</b>	Yes	0	3	0	7	10
	No	0	0	0	0	0
	Not Tested	0	0	0	0	0
	<b>Subtotal</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>7</b>	<b>10</b>
<b>Totals</b>		<b>54</b>	<b>35</b>	<b>15</b>	<b>190</b>	<b>294</b>

\*Occupant means the person was either the driver or a passenger, but was not confirmed.

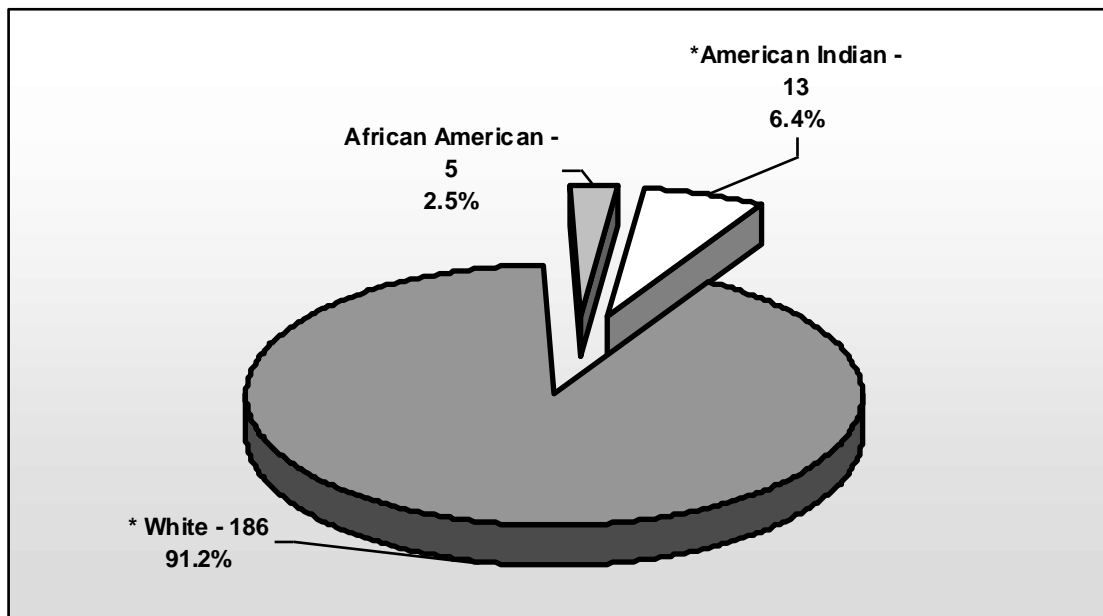
## Drug Caused Deaths

Figure 54 – Drug Caused Deaths – 2001 – 2010



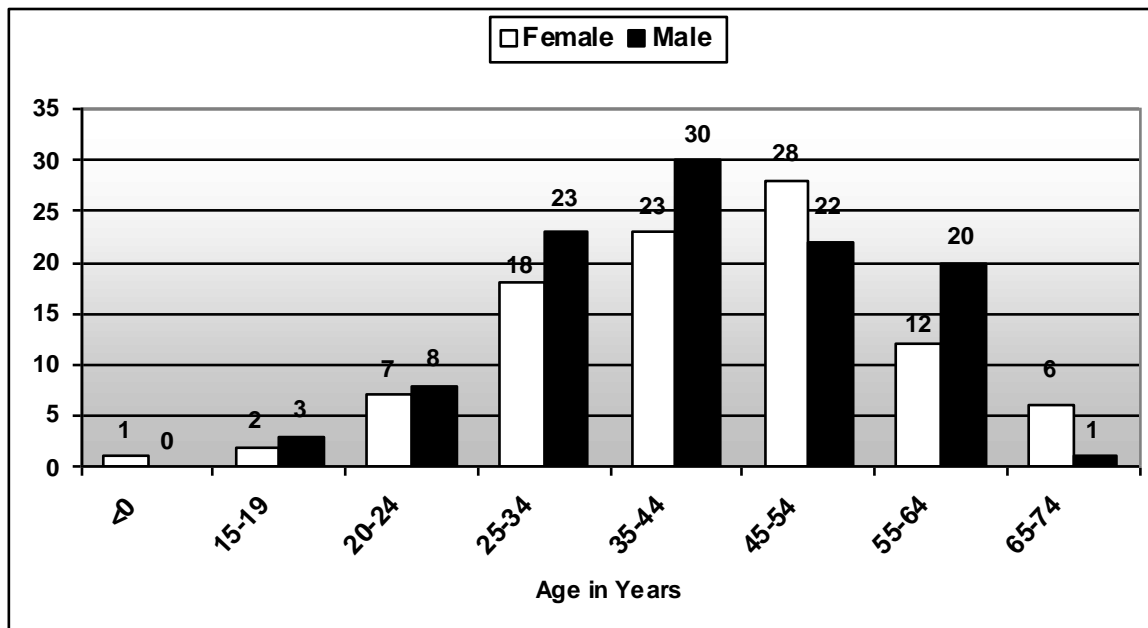
*\*Please note: There are 208 “Pending” cases not reflected in this data. This number will increase once the toxicology results for these pending results are completed. The lower number seen here is an artifact of writing this report earlier in the year than previous reports.*

Figure 55 – Drug Caused Deaths by Race/Ethnicity – 2010



\* White includes 188 Hispanic

Figure 56 – Drug Caused Deaths by Age and Gender – 2010



## Drug Caused Deaths – Summary – 2010

Drug overdose deaths continue to be a problem in New Mexico. As this annual report is being prepared earlier in the year than usual, a large number of cases are still pending, awaiting toxicological analysis. An updated summary of drug-caused deaths will be released in the fall of 2011, when a more accurate picture of drug-caused deaths will be available. A wide variety of drugs, both illegal and prescription, contributed to the 204 drug-caused deaths, with the most commonly involved being narcotics, with 716 isolations of a narcotic substance. Many decedents had more than one drug present at the time of death. Young males were most at risk, as with other types of OMI-investigated deaths, with the most drug-caused deaths being seen in males ages 35-44 years. The OMI designation of ‘drug-caused deaths’ includes both intentional (suicide, homicide) and unintentional (accidental) drug overdoses. The total number may increase as additional toxicology results become available.

Additional information regarding unintentional drug overdose deaths in New Mexico is available annually in the newsletter *New Mexico Epidemiology*, published by the New Mexico Department of Health. An issue containing detailed information on unintentional drug overdose deaths will be available from NMDOH this fall.

Table 22 – Drug Caused Deaths – Counties of Injury and Pronouncement– 2010

County	County of Injury	County of Pronouncement
Bernalillo	82	86
Catron	0	0
Chaves	4	4
Cibola	2	2
Colfax	0	0
Curry	2	2
De Baca	0	0
Dona Ana	14	14
Eddy	5	5
Grant	4	4
Guadalupe	1	0
Harding	0	0
Hidalgo	0	0
Lea	2	2
Lincoln	1	1
Los Alamos	1	1
Luna	2	2
McKinley	4	4
Mora	2	2
Otero	6	6
Quay	3	3
Rio Arriba	7	7
Roosevelt	3	3
San Juan	11	11
San Miguel	2	2
Sandoval	8	6
Santa Fe	12	12
Sierra	4	4
Socorro	4	3
Taos	3	3
Torrance	1	2
Union	0	0
Valencia	11	11
Out of State/Unknown	3	2
<b>Totals</b>	<b>204</b>	<b>204</b>

## Glossary

---

**Accident** – The *manner of death* used when, in other than *natural deaths*, there is no evidence of intent.

**Autopsy** – A detailed postmortem external and internal examination of a body to determine cause of death.

**Cause of Death** – The agent of effect that results in a physiological derangement or biochemical disturbance that is incompatible with life. The results of postmortem examination, including autopsy and toxicological findings, combined with information about the medical history of the decedent serves to establish the cause of death. The cause of death can result from different circumstances and manner of death. For example, the same cause of death, drowning, can result from the accidental immersion of a child in a swimming pool or from the homicidal immersion of a child in a bathtub.

**Children** – Individuals 19 years of age or younger. (Normally this is 18 years of age or younger, but to keep with industry standard age divisions, 19 year-olds are included in our tables.)

**Circumstances of Death** – The situation, setting, or condition present at the time of injury or death.

**County of Injury** – The county where the injury leading to death occurred.

**County of Pronouncement** – The county where the decedent was pronounced dead.

**County of Residence** – The county where the decedent resided. If not a legal resident of New Mexico, the decedent is listed as “out of state.” A single case may have all three county definitions applied. For example, a decedent may be a resident of Rio Arriba county and be injured in an automobile accident in San Juan county (County of Injury) where, upon transfer to a hospital in Albuquerque, be pronounced in Bernalillo county.

**Deputy Medical Investigator** – An investigator, not necessarily a physician, appointed by the *State Medical Investigator* to assist in the investigation of deaths in the *jurisdiction* of the OMI. There is at least one deputy medical investigator in each county in New Mexico.

**Dictated External** – A detailed postmortem external examination of a body.

**Drug Caused Death** – A death caused by a drug or combination of drugs. Deaths caused by *ethanol*, poisons and volatile substances are excluded.

**Ethanol** – An alcohol, which is the principal intoxicant in liquor, beer and wine. A person with an alcohol concentration in blood of 0.08 grams percent (0.08g%) is legally intoxicated in New Mexico.

**Ethanol Present** – Deaths in which toxicological tests reveal a reportable level of *ethanol* (0.005% or greater) at the time of death.

**Homicide** – The *manner of death* in which death results from the intentional harm of one person by another.

**Jurisdiction** – The extent of the Office of the Medical Investigator’s authority over deaths. The OMI authority covers reportable deaths that occur in New Mexico, except for those occurring on federal reservations (American Indian and military) and in Veteran’s Administration hospitals. New Mexico Statute 24-11-5NMSA 1978 and descriptions in the OMI policy manual define reportable deaths. The OMI may be invited to consult or investigate cases over which it has no jurisdiction.

**Investigation/Field Examination** – An investigation and external examination conducted at the scene to determine cause of death.

**Manner of Death** – The general category of the condition, circumstances or event, which causes the death. The categories are *natural, accident, homicide, suicide and undetermined*.

**Method of Death** – The *method of death* describes the physical means leading to a cause of death. For example, *the cause of death* in a case is *Asphyxia*, but an *accidental hanging* brought on the asphyxia and would be the *method of death*.

**Motor Vehicle Accident Related Deaths** – An accidental death involving a motor vehicle. Motor vehicles include automobiles, vans, motorcycles, trucks and all terrain vehicles. Excluded are bicycles, tricycles, aircraft and trains. The decedent is usually a driver of, a passenger in, or a pedestrian struck by a motor vehicle. The death of a bicyclist struck by a motor vehicle is considered to be a motor vehicle accident related death.

**Natural** – The *manner of death* used when solely a disease causes death. If death is hastened by an injury, the *manner of death* is not considered natural.

**Non-Motor Vehicle Accident** – An *accidental death* that does not involve a motor vehicle.

**Office of the Medical Investigator** – The state agency in New Mexico that is responsible for the investigation of sudden, violent or untimely deaths. The office of the Medical Investigator was created by legislation in 1973 to replace the county coroner system (see also, *Deputy Medical Investigator*).

**Pending** – The *cause of death* and *manner of death* are to be determined pending further investigation and/or toxicological, histological and/or neuropathological testing at the time of publication.

**State Medical Investigator** – The head of the *Office of the Medical Investigator*. The State Medical Investigator must be a licensed physician licensed in New Mexico and may appoint Assistant Medical investigators, who must be physicians and *Deputy Medical Investigators*.

**SIDS** – Sudden Infant Death Syndrome is characterized by the death of an infant less than one year of age that is unexpected by history and remains unexplained after a thorough forensic autopsy and a detailed death scene investigation.

**Undetermined** – The *manner of death* for deaths in which there is insufficient information to assign another manner.

“Autopsy Yes” includes only complete autopsies. When the 2010 reports were originally compiled, data which should not have been included in the “Autopsy Yes” data were included. This Addendum corrects the error.

**Table 1 – Total Cases – Autopsy Status – 2010**

Autopsy	Manner of Death					Total
	Natural	Accident	Suicide	Homicide	Undetermined*	
Yes	491	705	335	190	269	<b>1,990</b>
No	2,553	538	71	3	94	<b>3,259</b>
<b>Total</b>	<b>3,044</b>	<b>1,243</b>	<b>406</b>	<b>193</b>	<b>363</b>	<b>5,249</b>

\*48 Other, 208 Pending, 31 Uncoded, 71 Undetermined, 5 Unknown included in Undetermined

**Table 2 – Total Cases – Case Distribution – 2010**

Type of Case	Manner of Death	Autopsy		Percent Autopsied	Total
		Yes	No		
<b>Medical Investigator</b>	Natural	438	1,082	12.21%	1,520
	Accident	666	534	18.57%	1,200
	Suicide	323	68	9.01%	391
	Homicide	164	3	4.57%	167
	Undetermined	238	70	6.64%	308
	<b>Subtotal</b>		<b>1,829</b>	<b>1,757</b>	<b>51.00%</b>
<b>Terminated Jurisdiction</b>	Natural	0	1,447	0.0%	1,447
	Accident	0	0	0.0%	0
	Suicide	0	0	0.0%	0
	Homicide	0	0	0.0%	0
	Undetermined	0	8	0.0%	8
	<b>Subtotal</b>		<b>0</b>	<b>1,455</b>	<b>0.0%</b>
<b>Reported Deaths</b>		<b>1,829</b>	<b>3,212</b>	<b>.56%</b>	<b>5,041</b>
<b>Consultation Cases</b>	Natural	53	24	25.48%	77
	Accident	39	4	18.75%	43
	Suicide	12	3	5.77%	15
	Homicide	26	0	12.50%	26
	Undetermined	31	16	24.90%	47
	<b>Subtotal</b>		<b>161</b>	<b>47</b>	<b>77.40%</b>
<b>Total</b>		<b>1,990</b>	<b>3,259</b>	<b>37.91%</b>	<b>5,249</b>