



# 1990 ANNUAL REPORT

FOR THE

# MEDICAL EXAMINER

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**1990 BOARD OF COMMISSIONERS**

Dennis M. Aaron (D), District 19  
Donald E. Bishop (R), District 6  
G. William Caddell, D.C. (R), District 25  
John P. Calandro (R), District 24  
Mark W. Chester (R), District 10  
Larry Crake (R), District 5  
James D. Ferrens (D), District 7  
Marilynn E. Gosling (R), District 14  
Donna R. Huntoon (R), District 4  
Donald W. Jensen (R), District 22  
Ruth Johnson (R), District 1  
Richard D. Kuhn, Jr. (R), District 3  
Susan G. Kuhn (R), District 12  
Thomas A. Law (R), District 26

A. Madeline Luxon (D), District 18  
Nancy McConnell (R)\*\*, District 23  
Michael D. McCulloch (R), District 11  
Ruel E. McPherson (D), District 9  
David L. Moffitt (R), District 15  
Lillian Jaffe Oaks (D), District 21  
John E. Olsen (R), District 17  
John G. Pappageorge (R), District 13  
Lawrence R. Pernick (D), District 20  
Hubert Price, Jr. (D), District 8  
Roy Rewold (R)\*, District 16  
Richard G. Skarritt (R), District 2  
Donn L. Wolf (R), District 27

\*Chairperson

\*\*Vice Chairperson

**COUNTY EXECUTIVE**

Daniel T. Murphy

**DEPUTY COUNTY EXECUTIVE  
ADMINISTRATION**

Patrick M. Nowak

**DEPUTY COUNTY EXECUTIVE  
OPERATIONS**

Kenneth Q. Burchill

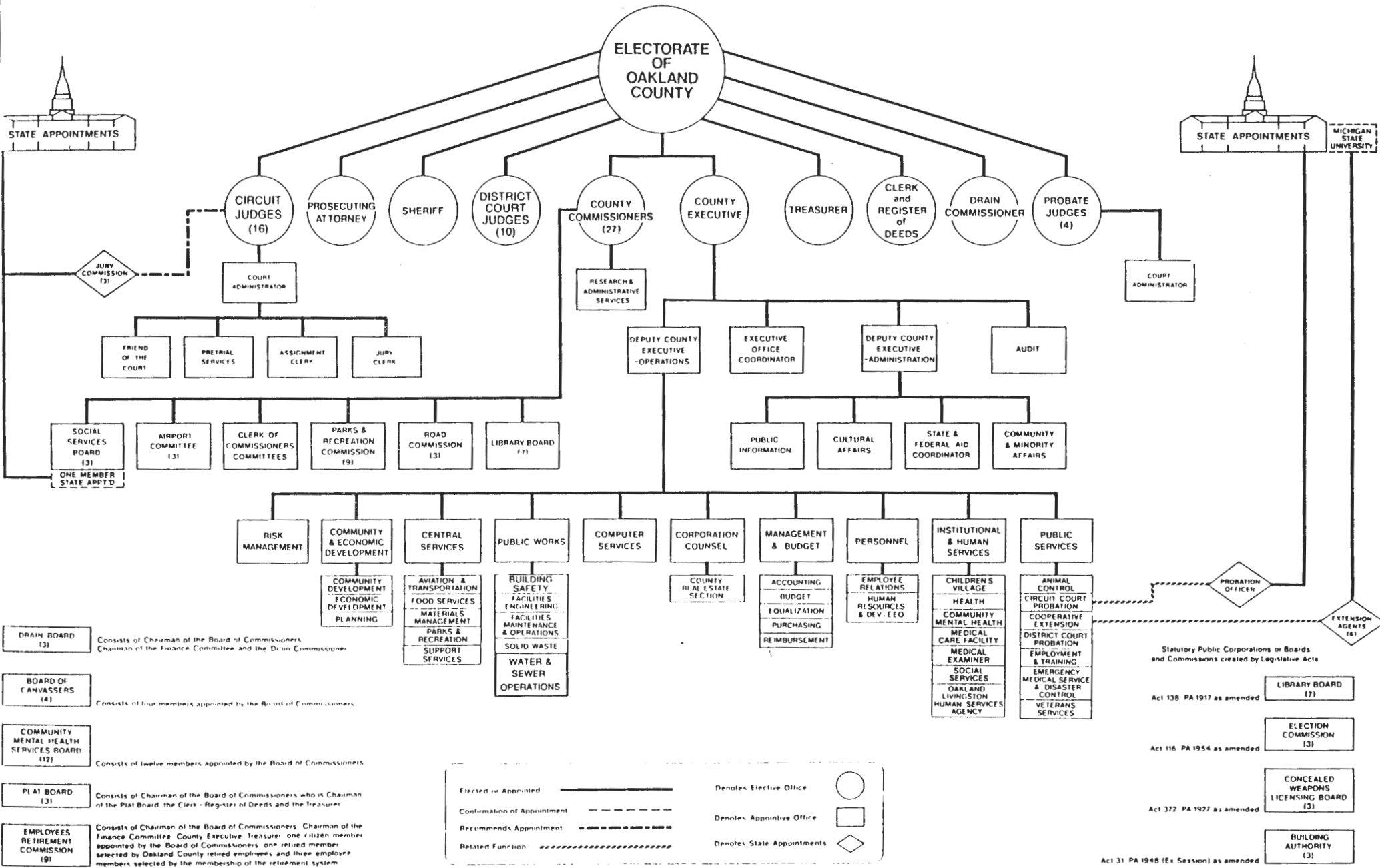
**OAKLAND COUNTY**

JUL 5 1991

Reference Library

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PONTIAC, MICHIGAN 48341-0453

# OAKLAND COUNTY GOVERNMENT ORGANIZATION CHART



**DRAIN BOARD (3)** Consists of Chairman of the Board of Commissioners, Chairman of the Finance Committee and the Drain Commissioner.

**BOARD OF CANVASSERS (4)** Consists of four members appointed by the Board of Commissioners.

**COMMUNITY MENTAL HEALTH SERVICES BOARD (12)** Consists of twelve members appointed by the Board of Commissioners.

**PIAT BOARD (3)** Consists of Chairman of the Board of Commissioners who is Chairman of the Piat Board, the Clerk - Register of Deeds and the Treasurer.

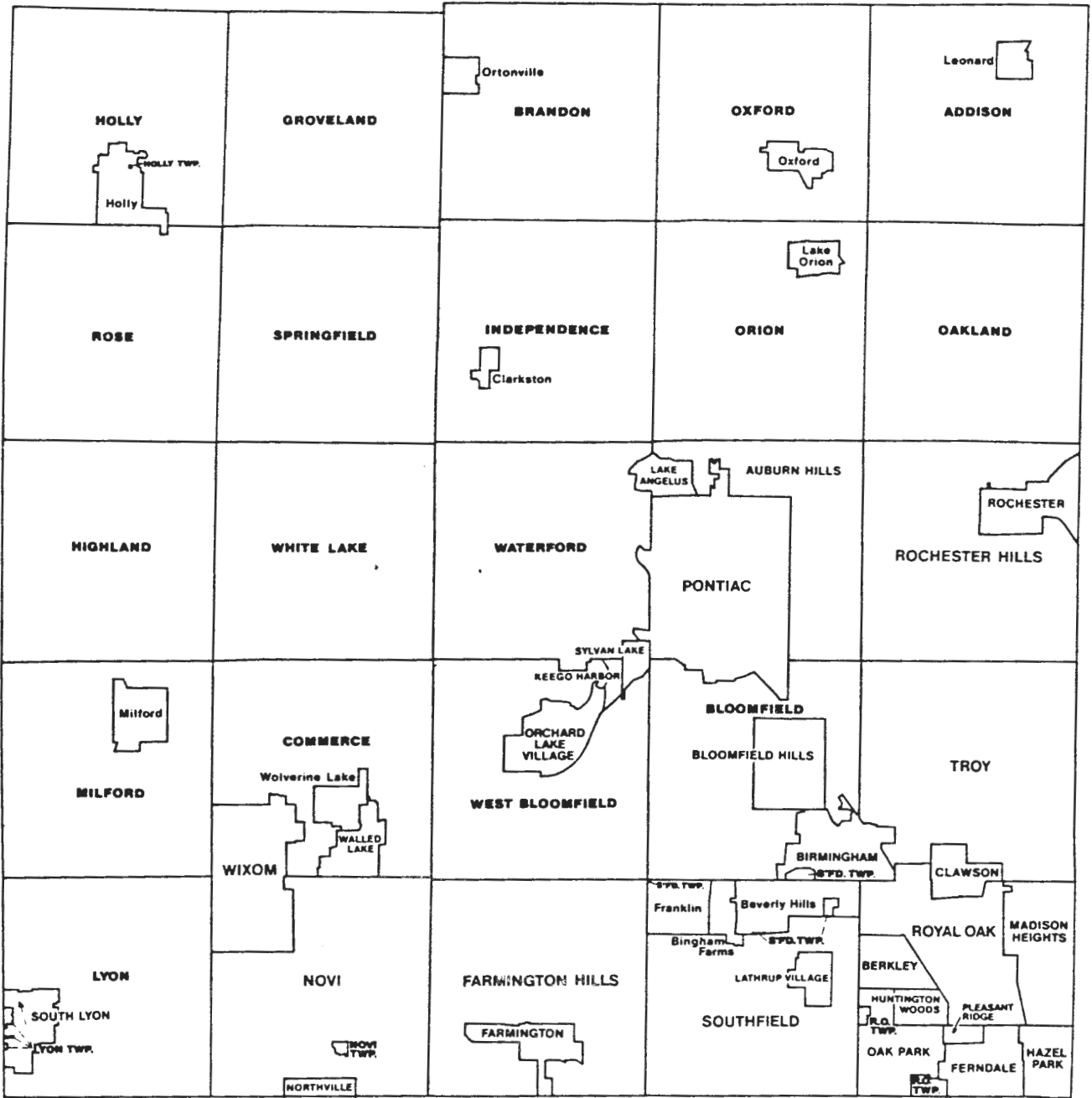
**EMPLOYEES RETIREMENT COMMISSION (9)** Consists of Chairman of the Board of Commissioners, Chairman of the Finance Committee, County Executive, Treasurer, one citizen member appointed by the Board of Commissioners, one retired member selected by Oakland County retired employees and three employee members selected by the membership of the retirement system.



Statutory Public Corporations or Boards and Commissions created by Legislative Acts

- Act 138 PA 1917 as amended: LIBRARY BOARD (7)
- Act 116 PA 1954 as amended: ELECTION COMMISSION (3)
- Act 372 PA 1927 as amended: CONCEALED WEAPONS LICENSING BOARD (3)
- Act 31 PA 1948 (Ex Session) as amended: BUILDING AUTHORITY (3)

# OAKLAND COUNTY MICHIGAN



CITY  
Village  
TOWNSHIP

Oakland County Planning Division





## HISTORY

The coroner's office originated in the 10th century because of the need for a new method to protect and collect the Crown revenue. Over the years the coroner's office changed in many ways and the sheriff took over many functions of the coroner until finally the coroner's duties were largely confined to the determination of causes and manner of deaths under certain circumstances. Coroner's jury and inquest procedure were retained and the procedure incorporated both legal and medical determination. The Medical Examiner's system originated in the 13th-16th centuries in Italy. Qualified physicians were considered expert in legal medicine.

As permitted by 1945 Legislative Act 143, the Oakland County Board of Supervisors in 1946 abolished the **elected** office of coroner and transferred the duties to the County Health Officer who became Chief Medical Examiner. The Medical Examiner Division was established within the Health Department. The Medical Examiner Law, Act 181, was passed in 1953. This law allowed each county to establish and **appoint** a Medical Examiner. On November 5, 1968 the Oakland County Health Officer was appointed as Medical Examiner.

Most Medical Examiner cases were taken to local hospital where service space and facilities were limited due to regular hospital cases. Many doctors were reluctant to perform Medical Examiner autopsies. The establishment of a central County Morgue Facility was essential. Provisions were made in the new Law Enforcement Complex, which was under construction, for a central County Morgue. On July 1, 1970, an interim office was established at the Pontiac State Hospital on Elizabeth Lake Road in Pontiac. In July 1972 the move was made to the new facility at the Oakland County Service Center, Law Enforcement Complex.

In December 1978 a reorganization of the Medical Examiner's office was undertaken. Since the Chief Pathologist was performing all of the duties of the Medical Examiner, a resolution was passed which discharged the Public Health Director and appointed the Chief Pathologist as Medical Examiner for Oakland County. This appointment took effect January 1, 1979.

## **DIVISION FUNCTION**

The Medical Examiner operates under the mandates of the Medical Examiner Law, Act 181, P.A. of 1953, as amended.

The Medical Examiner is charged with the responsibility of determining the manner and cause of death of all sudden, unexpected, accidental or violent deaths. In addition, the Medical Examiner must determine the manner and cause of death of all police prisoners, abortions, suspicious circumstances, administration of drugs, therapeutic procedures, anesthesia, etc. Also deaths without medical attention within 48 hours preceding death.

The results of these investigations provide evidence relating to injuries for prosecutions and settlement of estates. It also provides public health authorities with information relating to communicable disease and other causes of mortality, for program direction purposes.

The Medical Examiner and staff must appear in court to give testimony in both criminal and civil proceedings.

The Medical Examiner must approve all cremations for death occurring in Oakland County.

**INSTITUTIONAL AND HUMAN SERVICES DEPARTMENT**

**DIRECTOR**

Robert P. Locey, M.D.

**MEDICAL EXAMINER DIVISION**

**PERSONNEL**

** *BROOKS, Bill G., M.D.	Medical Examiner
** *BIEDRZYCKI, Lynda, M.D.	Chief Deputy Medical Examiner/ Acting Medical Examiner
MacDONALD, William	Administrator
** DRAGOVIC, Ljubisa, M.D., Deputy Med. Exam.	Pathologist
** KURTZMAN, Robert A., D.O., Deputy Med. Exam.	Pathologist
PREDMORE, Philip D.	Toxicologist
** DANIELSON, Margaret	Histologist
ALLEGRINA, Robert	Investigator
* BARANSKI, Irvin	Investigator
DOWD, Michael	Investigator
GARRISON, Charles	Investigator
* OSGOOD, Mary Sue	Investigator
PODESZWIK, Michael	Investigator
RODGERS, Marline	Investigator
ROSSI, Robert	Investigator
SUN, Patrick	Investigator
SMITH, Charles	Supv. Autopsy Attendant
KILLIANE, Curtis	Autopsy Attendant
HOYES, Thomas	Autopsy Attendant
* KIRSCHENBAUER, Edna	General Helper
HILL, Pamela	Secretary
STINSON, Mary Lou	Account Clerk
CONRAD, Michele	Typist
CALVIN, Marie	Clerical Trainee (Part-Time)

\*Separated employment with Medical Examiner's Office in 1990

\*\*Contractual Employee



## DEPUTY MEDICAL EXAMINERS

ARANOSIAN, Robert D.O..	HUDDLE, Luther, Sr., D.O.	REY, Jaime L., M.D.
BERNSTEIN, Jay, M.D.	INWALD, Samson, D.O.	RIGGS, Harry L., M.D.
BERRY, Andrew H., D.O.	ISAAC, Herbert, M.D.	ROSELLA, John A., D.O.
BIEDRZYCKI, Lynda, M.D.	KURTZMAN, Robert A.	SAR, Alan M., D.O.
BORIS, Henry, D.O.	LASSER, Howard S., M.D.	SAUDER, Marilyn A.J., M.D.
BOXMAN, Donald, D.O.	LePERE, Ronald R., D.O.	SCHER, Alan D., M.D.
BRATTON, Richard, D.O.	LOPEZ, Gerald L., M.D.	SCHILLINGER, E.A., D.O.
DENTON, Allen, D.O.	MAINSTER, Harris, D.O.	SCHOEN, Paul F., D.O.
DOYLE, Michael Q., D.O.	MALICKE, David, D.O.	SHEKERJIAN, Armen, M.D.
DRAGOVIC, Ljubisa, M.D.	MASTERNICK, Joseph, D.O.	SHUMAKER, Bryan, M.D.M.D.
ENGELMANN, Theodore, D.O.	McINERNEY, Thomas, M.D.	SIKORSKI, Eugene L., D.O.
FRANCKOWIAK, Charles, D.O.	McNEIL, Harold G., D.O.	SPOHN, E.W., M.D.
FRIEDMAN, Stephen, D.O.	OSTER, Claude, D.O.	STOLTE, Jon L., M.D.
GOLICZ, Gregory, D.O.	PEARL, Conrad, D.O.	WEINER, Seymour, D.O.
GRADOLPH, Paul L., M.D.	PENN, William, D.O.	WILLYERD, Gary L., D.O.
HAMILTON, Alfred S., D.O.	PETINGA, Thomas J., M.D.	WYLIN, Robert, M.D.
HAYDEN, John C., D.O.	PURSLEY, C. Scott, D.O.	ZALEZNAK, Howard, M.D.
HERSCHMAN, Barry, M.D.		

## DENTAL CONSULTANTS

HENDERSON, Richard, D.D.S.	FOX, Richard P., D.D.S.	WARNICK, Allan J., D.D.S.
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## PROGRAM DESCRIPTION

The investigation of death as mandated by Michigan Statute Act 181, P.A. 1953 shall include an examination of the scene, a thorough postmortem examination including, when indicated, a complete autopsy and certification of the cause and manner of death. The results of these investigations provide evidence for criminal prosecution and settlement of estates. It also provides public health authorities with information relating to communicable disease and other causes of mortality.

The combined efforts of the Medical Examiner's staff are all essential to the final determination of the cause and manner of death and are therefore impossible to prioritize. Staff training and development is an on-going process involving courses in homicide investigation, attendance at medico-legal seminars, and annual participation in several national organizations.

To meet the changing patterns of substance abuse, we have significantly increased drug testing, especially for cocaine and marijuana, in homicide and accident cases. Increased death scene and autopsy photographic documentation and the introduction of mannequins to demonstrate the location and direction of wounds during court presentations have been favorably received by the Prosecutor's office.

We are consciously attempting to improve both the quality and the timeliness of the services we provide to the families of the deceased and to the law enforcement community.

## PROCEDURE

Act 181, P.A. 1953, as amended, provides for the Medical Examiner to investigate and determine "the cause and manner of death in all cases of persons who have come to their death" under any of the following circumstances:

VIOLENCE - Asphyxiation, shooting, stabbing, poisoning, etc.

ACCIDENT - Traffic, falls, drownings, industrial, drugs.

WHILE IN CUSTODY - Prisoners.

ABORTION - Under any circumstances.

SUDDEN AND UNEXPECTED - Where deceased was in apparent good health.

WITHOUT MEDICAL ATTENDANCE WITHIN 48 HOURS PRIOR THERETO - In cases of chronic illness the attending physician may sign the death certificate if he can be reasonably certain of the cause of death. However, he should examine the body to satisfactorily determine that no foul play is involved.

SUSPICIOUS CIRCUMSTANCES - Including unidentified bodies.

ADMINISTRATION OF DRUGS, THERAPEUTIC PROCEDURES, ANESTHESIA, ETC.

Immediate reporting of any Medical Examiner case is required by the statute.

Evaluation and disposition will be made by the Medical Examiner. The need for autopsy examination in certain cases will be determined by the Medical Examiner.

Transfer, removal and release of the body will be made by the Medical Examiner.



# **TOXICOLOGY LABORATORY**

## **EMIT URINE DRUG ANALYZER**



## **FPIA SERUM DRUG ANALYZER**

## MEDICAL EXAMINER CASES DEFINED

According to Act No. 92, of the Public Acts of 1969, any physician, any person in charge of any hospital or institution (jail, convalescent home, etc.) or any person who has first knowledge of a reportable death will immediately notify the Medical Examiner's Office by phone (858-5097).

Reportable Medical Examiner's cases are:

1. Deaths by violence (shooting, stabbing, beating, drowning, poisoning, etc.).
2. Accidental deaths (auto, burns, falls, etc.).
3. Sudden and unexpected deaths from causes unknown (where deceased was in apparent good health).
4. Death occurring without medical attendance by a physician within 48 hours prior thereto unless a reasonable natural cause of death can be certified.

A person, however, who has been seen by a physician within 48 hours of death is not a Medical Examiner's case, unless the death falls within other categories enumerated.

5. Prisoners (dying while in custody).
6. Deaths under suspicious or unusual circumstances. All individuals who are admitted to a hospital unconscious and remain unconscious until death are also considered Medical Examiner's cases.
7. Deaths resulting from or associated with any therapeutic procedures. Deaths during anesthesia shall also be reported.

In any cases described under No. 7, a body may not be removed until after notice of death is given to and removal of the body approved by the Medical Examiner. Failure to give proper notice may have serious consequences.

In doubtful cases, report to the Medical Examiner for his determination and advice.

Any retained portions of blood or urine samples collected during the subject's hospital or institution stay should accompany the body to the Medical Examiner's Office (for toxicological analyses) whenever possible. All pills and pill containers are required.

Medical Records of individuals who come under the jurisdiction of the Medical Examiner's Office should be available when the body is transferred from the hospital.

## **ACCOMPLISHMENTS**

Participated in the Oakland County recycling program.

Requested and received a fax machine which has greatly improved the efficiency and productivity of the office.

Investigators Robert Rossi and Michael Dowd coordinated the "Oakland County Police Academy Investigation of Violent Death" seminar. Dr. Dragovic and Dr. Kurtzman lectured at this seminar which took place in December.

The "Michigan Association of Medical Examiners" seminar was coordinated by Dr. Biedrzycki, Acting Medical Examiner, who was assisted by Michele Conrad of the Oakland County Medical Examiner's office. Dr. Dragovic and Dr. Kurtzman both lectured at this function.

## **GOALS**

Reconstitute the professional image and recruit the appropriate professionals that will be available and accountable to the public and their representatives.

Apply for certification by the "National Association of Medical Examiners".

Organize forensic services for other counties.

## **LONG TERM GOAL**

Establish the Oakland County Medical Examiner's Office as a Regional Forensic Center.

## STATISTICS

	<u>1986</u>	<u>1987</u>	<u>1988</u>	<u>1989</u>	<u>1990</u>
<u>NATURAL CAUSES</u>					
Infective & Parasitic	1	4	5	7	3
Neoplasms	14	12	13	16	18
Endocrine, Nutri. & Metabolic	3	3	9	4	4
Blood & Blood Forming	0	1	0	1	0
Mental Disorders	7	7	8	4	3
Nervous System & Sense Organs	6	10	8	8	7
Circulatory System	346	365	371	349	330
Respiratory System	14	26	22	25	18
Digestive System	10	21	18	12	13
Genitourinary System	2	0	2	2	1
Complications/Preg. & Childbirth	0	0	0	0	1
Muscle & Connective Tissue	1	0	1	1	0
Congenital Anomalies	1	1	2	5	4
Perinatal & Mortality	0	0	1	0	4
Symptoms and Ill-defined	<u>16</u>	<u>27</u>	<u>15</u>	<u>26</u>	<u>20</u>
Total	<u>421</u>	<u>477</u>	<u>475</u>	<u>460</u>	<u>426</u>
<u>ACCIDENTAL CAUSES</u>					
Railway	2	1	2	1	1
Motor Vehicle	149	130	147	141	121
Motor Vehicle, Non-Traffic	4	9	1	3	1
Water Transport	2	1	1	0	0
Air & Space Transport	3	2	4	2	3
Drugs & Medications	6	6	2	1	3
Solid/Liquid/Gases/Vapors	11	5	3	5	7
Misadv. During Surg. & Med. Care	0	0	0	2	2
Falls	23	32	17	29	36
Fires & Flames	6	21	5	13	8
Natural & Environmental Factors	3	3	3	4	2
Drowning, Suff. & Foreign Bodies	9	14	18	24	15
Other	13	12	14	7	8
Adverse Eff. in Therapeutic Use	<u>1</u>	<u>1</u>	<u>3</u>	<u>0</u>	<u>0</u>
Total	<u>232</u>	<u>237</u>	<u>220</u>	<u>232</u>	<u>207</u>

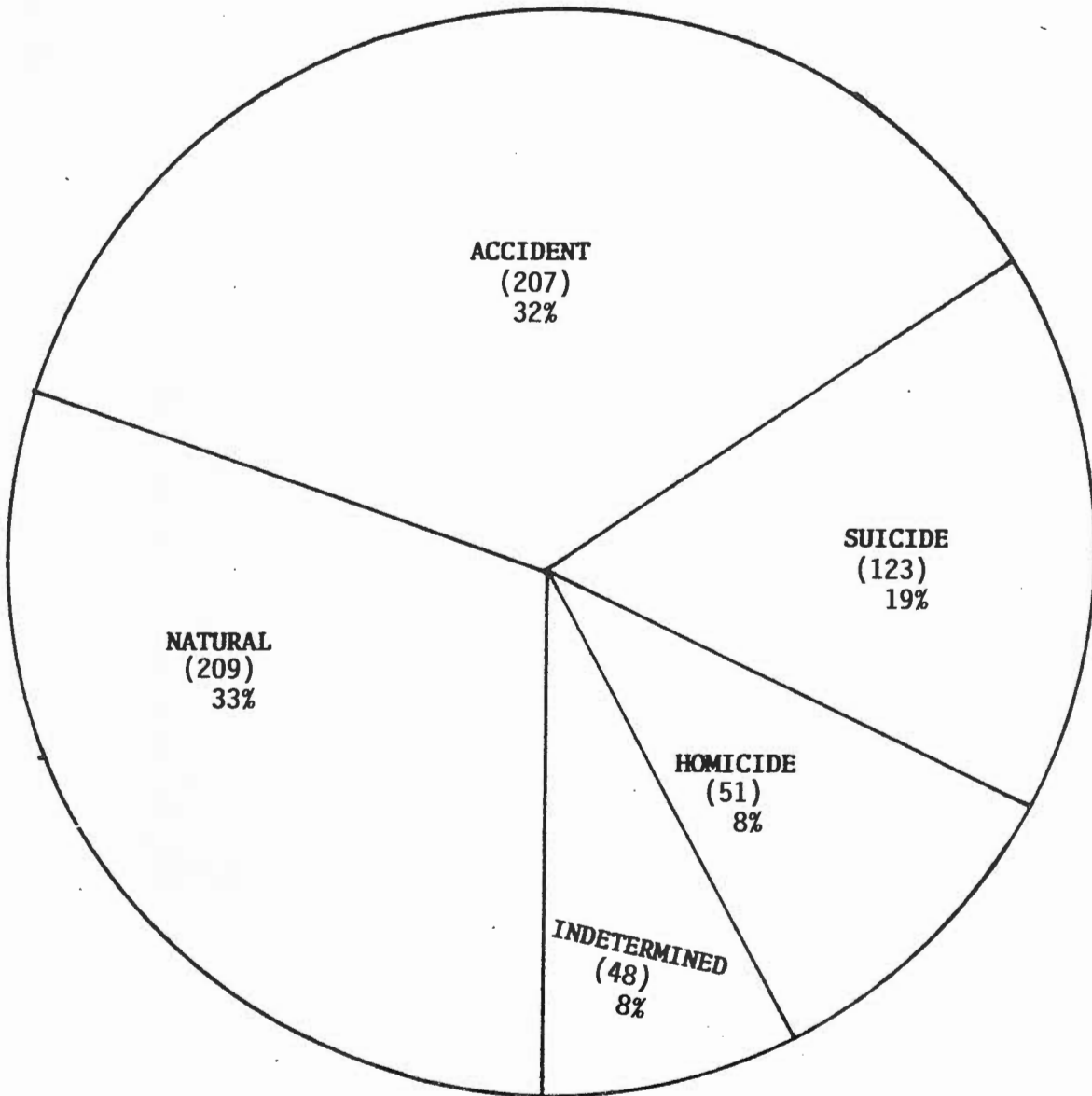
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## STATISTICS

	<u>1986</u>	<u>1987</u>	<u>1988</u>	<u>1989</u>	<u>1990</u>
<u>SUICIDE</u>					
Solid or Liquid Substances	20	9	16	24	14
Other Gases and Vapors	28	16	21	17	20
Hanging, Strangulation	20	16	20	15	21
Drowning	1	0	2	0	1
Firearms	64	73	76	54	62
Cutting & Piercing	4	4	1	4	2
Jumping from High Place	1	1	2	1	0
Other & Unspecified	<u>3</u>	<u>3</u>	<u>2</u>	<u>4</u>	<u>3</u>
Total	<u>141</u>	<u>122</u>	<u>140</u>	<u>119</u>	<u>123</u>
<u>HOMICIDE</u>					
Fight, Brawl	2	1	1	0	0
Hanging, Strangulation	2	8	3	2	2
Drowning	0	0	0	1	0
Firearms	27	45	36	36	31
Cutting & Piercing	2	8	3	5	12
Other & Unspecified	<u>3</u>	<u>7</u>	<u>6</u>	<u>15</u>	<u>6</u>
Total	<u>36</u>	<u>69</u>	<u>49</u>	<u>59</u>	<u>51</u>
<u>UNDETERMINED</u>	<u>33</u>	<u>41</u>	<u>58</u>	<u>47</u>	<u>48</u>
<u>TOTAL DEATHS REPORTED</u>	2468	2573	2704	2947	3201
<u>TOTAL MED. EXAMINER CASES</u>	1880	2071	2253	2353	2466
<u>TOTAL AUTOPSIES</u>	579	660	619	580	522
<u>TOTAL POSTMORTEM EXAMS</u>	95	88	118	80	116
<u>TOTAL CREMATIONS</u>	1165	1335	1531	1627	1766
<u>TOTAL COUNTY DEATHS</u>	8525	8634	8356	8479	8460



**MEDICAL EXAMINER  
AUTOPSIES AND POSTMORTEM EXAMINATIONS**



522 AUTOPSIES AND 116 POSTMORTEM EXAMINATIONS

## COURT TESTIMONY

Models used in court by the doctors to demonstrate trauma. Very important in showing entrance and exit wounds. Life size body mannequins are also used.



Subpoenaes Received - 200

Court Appearances - 56

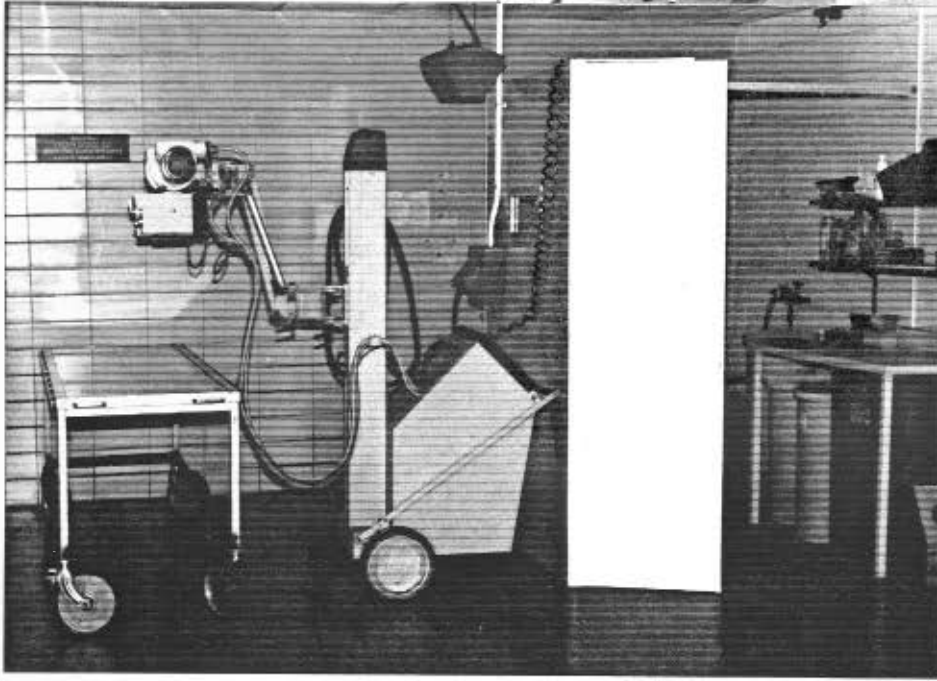
Consultations - 35

Depositions - 8



**AUTOPSY  
ROOM**

**AUTOPSY  
ROOM**



**X-RAY  
ROOM**

## **MEETINGS AND SEMINARS ATTENDED**

International Association of Coroners and Medical Examiners

American Academy of Forensic Sciences

National Association of Medical Examiners

National Association of Clinical Pathologists

Michigan Association of Medical Examiners.

Association of Military Surgeons of the United States

American Society of Clinical Pathologists

Southeastern Michigan Association of Chiefs of Police

Hewlett-Packard Seminar

Perkin-Elmer Seminar

Forensic Pathology Seminar

St. Louis University, Medico-Legal Death Investigator Training Course

Oakland County Police Academy, Forensic Pathology, Investigation of Violent Death



**TYPICAL  
DRUG  
PARAPHERNALIA**



**INSTRUMENTS  
OF  
DEATH**

## RETIREES

<u>NAME</u>	<u>POSITION</u>	<u>YEAR RETIRED</u>
BAYNES, Goebel	Administrator	1988
BISHOP, Bill	Investigator	1989
BOLAND, John*	Investigator	1980
BURTON, John*	Medical Examiner	1976
GARTON, Robert	Investigator	1982
HILL, Harry*	Investigator	1988
JUBELT, Elmer*	Investigator	1980
PIOTROWSKI, William	Investigator	1979
STANIEC, Chester	Investigator	1985
VOORHEES, Betty*	Typist II	1975
WHALEY, Howard	Administrator	1979

\*Deceased