

Marion County Coroner's Office

ANNUAL REPORT

2024

Alfarena T. McGinty, MBA
Marion County Coroner



A Message from the Coroner

As Coroner of Marion County, it is both an honor and a deep responsibility to lead an office that serves our community with integrity, professionalism, and compassion. For the past 27 years—18 of those as Chief Deputy—I have dedicated my life's work to the field of medicolegal death investigation. At the heart of my mission lies a deep commitment to uncovering the truth and providing answers with dignity and compassion to both the decedent and their loved ones during life's most difficult moments.



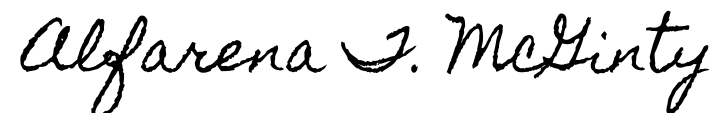
I am proud to present the Marion County Coroner's Office (MCCO) 2024 Annual Report, which reflects the exceptional work and unwavering commitment of our team. This year, I've embraced a theme that truly embodies the spirit of our staff: **bright stars**. Just as stars shine the brightest in the darkest skies, our staff members bring light, clarity, and guidance to families navigating moments of grief and loss. Each investigator, administrative professional, and support staff member plays a vital role in ensuring our office remains a beacon of excellence and compassion.

Included in this year's report is expanded data that provides insight into deaths among individuals experiencing housing instability. By collecting and sharing this information, we aim to support community organizations and decision-makers in understanding these challenges and directing resources where they are most needed. Our hope is that the annual report becomes not just a record of our work, but a catalyst for community engagement, violence prevention, and systems of care that build a stronger, safer Marion County.

Finally, as we release this report in May of 2025—Mental Health Awareness Month—we are reminded of the importance of mental wellness and grief support in the aftermath of loss. We are proud to offer free mental health services and grief counseling for families impacted by a sudden or unexpected death. These services reflect our continued commitment not only to forensic excellence, but also to the emotional care and well-being of our community. No one should navigate this journey alone, and we are here to ensure that support is available when it is needed the most.

To the families we serve, we extend our deepest condolences and gratitude for your trust. You remain the heart of our work. And to my staff—our bright stars—thank you for continuing to shine with excellence, empathy, and purpose. Your light guides this office forward every single day.

With respect and resolve,

A handwritten signature in black ink that reads "Alfarena T. McGinty". The script is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

Alfarena T. McGinty, MBA

Marion County Coroner



AGENCY MISSION

The Marion County Coroner's Office serves the community by investigating deaths with professionalism, compassion and integrity. Our work focuses on determining cause and manner of death while collaborating with law enforcement, medical professionals, and families. We strive to ensure public health and safety through thorough investigations and transparent communication. The office upholds the highest standards in forensic science, delivers certified services, and supports families through difficult times.

Our mission is to provide closure and justice while maintaining a commitment to excellence and community service.

Office Overview

As both a public health and public safety agency, the MCCO provides information on the state of health of the residents of Marion County and identifies any threats impacting our community. As a result, we conduct death investigations in an independent manner and without bias. The MCCO routinely conducts epidemiological research and partners with multiple agencies to detect, investigate, and notify about novel illnesses, as well as to predict trends to better support at-risk populations.

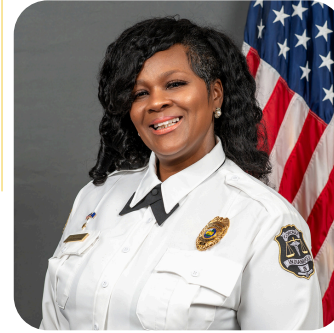
Agency Leadership



Marche K. Hall
Administrator of Finance & Operations



Michele Kratz
Administrator of Investigations



Dominique Battles
Administrator of Pathology



Christopher Poulos, M.D.
Chief Forensic Pathologist



Mallory Malczewski, M.S.
Chief Financial Officer & IT



Amanda Wells
Operations Manager



Jennifer Suarez
Quality Assurance Deputy



Anthony McDaniel
Facilities Manager

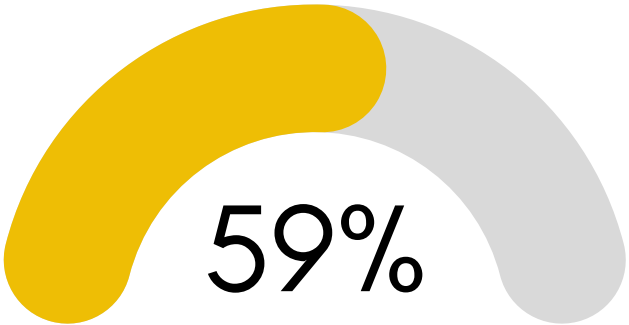
Annual Report Executive Summary

Data presented in this report resulted from the 4,090 deaths that were reported and/or investigated during the calendar year (CY) 2024, a .4% decrease from the previous calendar year.

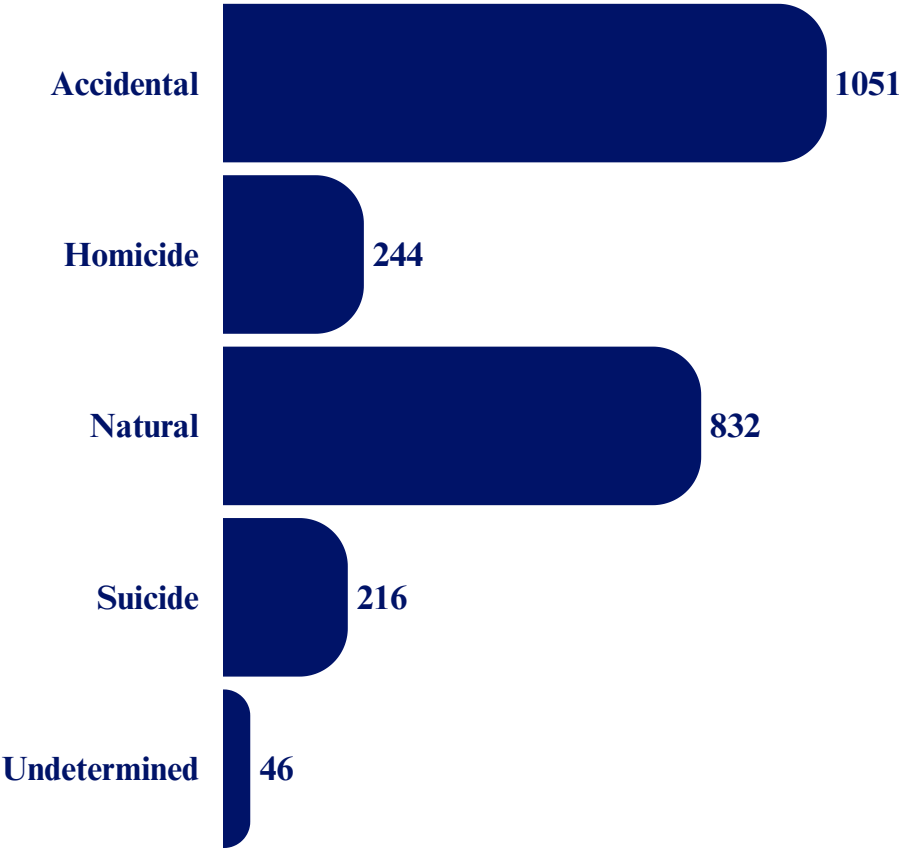
Annual Highlight
Accepted Cases: 2,411 <i>Cases accepted for further forensic investigation</i>
Autopsies: 1,429 <i>Total performed includes full, partial and external exams</i>
Annual Budget: \$6.9mil Increase of \$1.1mil from prior fiscal year <i>\$976k of increase due to grant funding (federal and state)</i>

Percentage of Accepted Cases

When compared
to total reported:
-1% change from
the prior year



Totals in All Manners of Death 2024



As the leading experts in forensic post-mortem investigation within the county, the Marion County Coroner's Office works diligently adheres national standards and continually enhances forensic investigation techniques through education for all staff.

The MCCO is governed under Indiana Code § 36-2-14 and is charged with investigating deaths when/of: (1) sudden death of a healthy child, (2) physician is unable to state a cause of death, after careful review of the medical chart, or the deceased does not have a physician, (3) known or suspected homicide, (4) known or suspected suicide, (5) related to or following known suspected self-induced or criminal abortion, (6) following an accident or injury primary or contributory, either old or recent, (7) accidental poisoning (food, chemical, drug, therapeutic agents), (8) occupational disease or hazard, (9) all deaths of unidentified persons, (10) person in the custody of the state (incarcerated, foster care, adult protective services), (11) has died by casualty.

The MCCO is comprised of three divisions dedicated to serving the Marion County community: (1) Investigations, (2) Administration, and (3) Forensic Pathology.

10 Administrative Staff

17 Investigations Staff

17 Pathology Staff

6 Transportation Staff

Our Values

Integrity

The MCCO fosters a culture of pride and peer accountability, upholding the highest ethical standards.

Compassion

We are committed to serve the local community as an advocate for the deceased and their families in times of need and sorrow.

Excellence

Our office is a proud, professional organization with an emphasis on continuous personal and professional improvement.

Unclaimed Decedents

In 2024, the Marion County Coroner's Office handled 53 unclaimed decedents, a 5% decrease from the prior year. Decedents with no known Next of Kin or no one to arrange their final care are classified as unclaimed in Marion County. We treat each case with the same thorough investigation to determine the cause of death. Once our work is finished, we coordinate with local charity groups to ensure every person receives a respectful and dignified final arrangements. Our office is committed to honoring each life by providing careful, compassionate stewardship even when no family is present.

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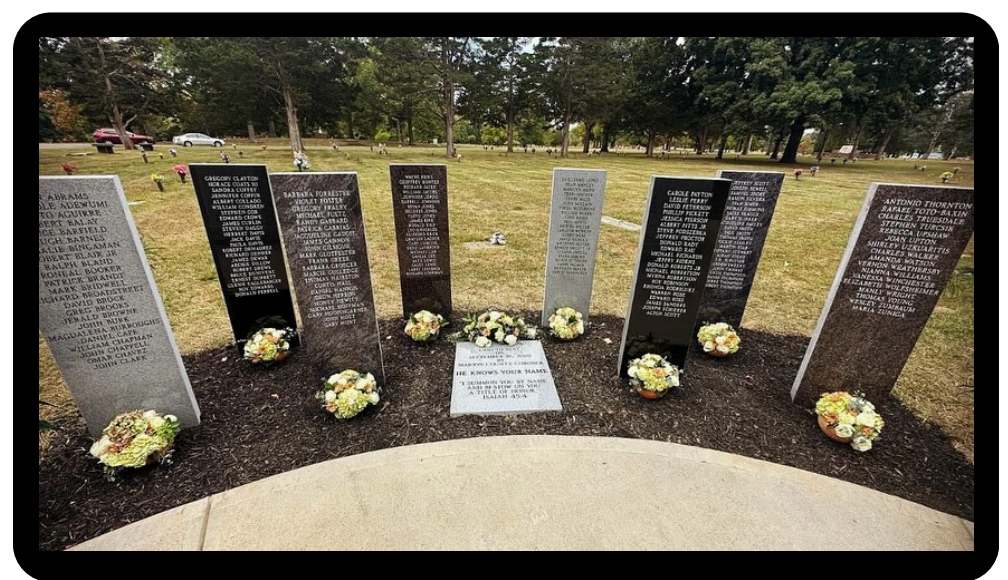
The Marion County Coroner's Office, along with He Knows Your Name Ministry, is changing the way our city honors those who have been unclaimed in death.

I believe coroners and their teams are the unsung heroes of our county. They see so many hard things, have so many hard conversations, their dedication is incredible.

The MCCO is leading the way in effecting changes in policy to make sure that all are given dignified burial and celebration of life.

*-Linda Zhnacko
Founder and Author*

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ORGAN AND TISSUE DONATION

The MCCO works diligently with all organ and tissue donation organizations to ensure donations can occur.

FORENSIC FELLOWSHIP

We offer one ACGME-accredited Forensic Pathology fellowship in partnership with IU School of Medicine's Pathology Dept. on a variety of forensic investigations.

Collaborations

INTERNSHIPS

We value furthering of education and partner with multiple college institutions throughout Indiana to help current undergraduate and graduate students pursue their education in forensic science.

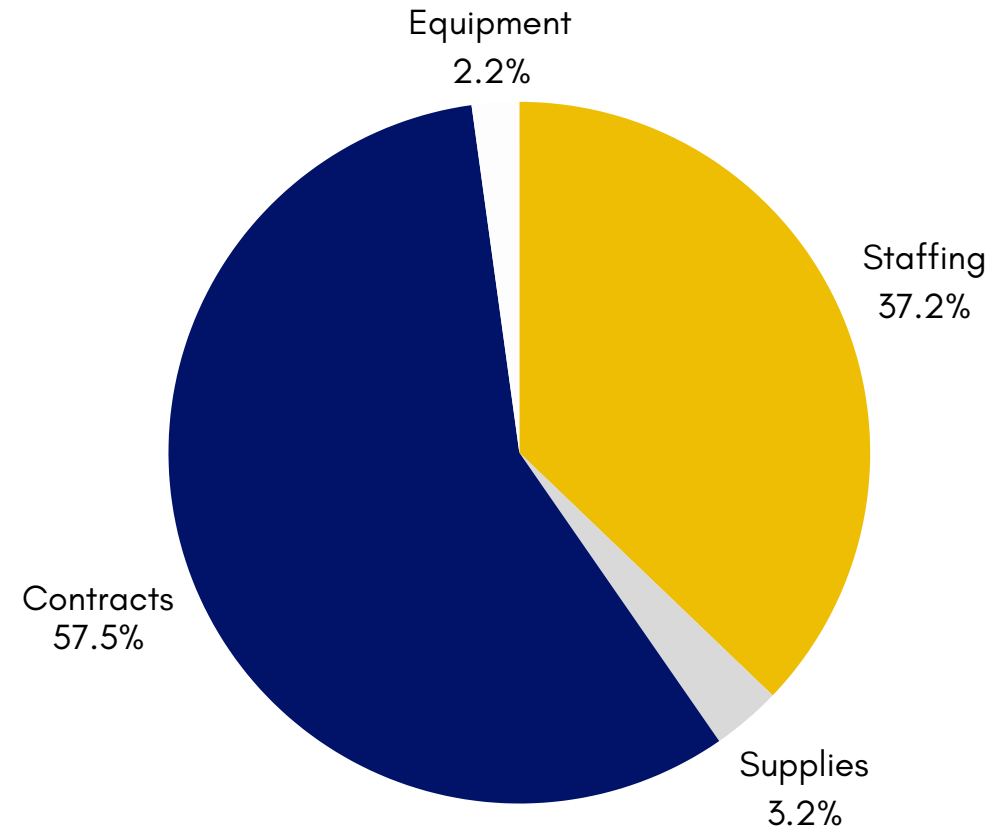
COMMUNITY EDUCATION

We believe community education is critical to prevention. Our education coordinator, social workers and staff provide education within our community from schools to events to help all residents better understand forensic science.

Budget Overview

Fiscal Year 2024

In 2024, the MCCO lost some grant funding (mainly attributed to American Rescue Plan Act) but retained a steady general budget for staffing, supplies and contracts. In CY24, the MCCO also was preparing to relocate to a newly constructed state of the art facility. The equipment budget was larger for CY24 due to the new facility move in order to purchase state of the art equipment.



Grants

The MCCO receives a combination of federal and state grants. In CY24, approx. 14% of the total budget was funded through grant projects aimed at overdose and violent crime reduction.

14%

2025 Initiatives

Community Outreach

Implementing community outreach and education programs to raise awareness about the role of the Coroner's office, death investigation and public health.

Mental Health Support

Offer a dedicated long-term mental health support program for families who have experienced the loss of a loved one under the jurisdiction of the Coroner's Office.

Data Dashboard

Through grant funded projects with the Centers for Disease Control, local/state health department and Information Services Agency developers to improve data classification and provide an online real time dashboard on caseloads and overdose deaths.

Opioid Settlement

The MCCO continued to utilize Opioid Settlement funds in CY24. These funds were used to fund contracts towards a mental health voucher program and social workers aimed at addressing substance use disorder and mental health issues impacting Marion County residents. The MCCO also added a mental health provider for minors to help address generational trauma following the loss of a parent or care giver due to substance use disorder or violent crime. The MCCO also oversaw the distribution of \$800,000 in community grants to providers of treatment and mental health services within the county.



319

Number of
Referrals made
through the
“Restoring our
Mental Health”
program in 2024.

New Facility

In September 2024, the MCCO moved in to our new state of the art facility. It houses spacious autopsy suites equipped with the latest imaging and safety systems, private consultation rooms for families, and integrated technology for security and seamless information sharing across all departments.











2024 DATA ANALYSIS

The next section of the report shows the trends in deaths investigated by the Marion County Coroner's Office. The data contained in the annual report only represents the cases where we accepted jurisdiction and further investigation was required to determine the cause and manner of death. This report does not contain data on all deaths which may have occurred within Marion County during 2024.

Use or reproduction of this data requires approval from the Marion County Coroner.

2024 Cases: Data Analysis

During CY24, a total of 4,090 deaths were reported to the MCCO which was a .4% decrease from the prior calendar year.

		Year over Year Change
Total cases accepted	2,411	 2.5%
Total Autopsies	1,429	 7%
Total reported declined for further investigation	1,679	 3%
Total transported for Storage only	119	 57%
Unclaimed Decedents	53	 5%
Number of Scene Visits by Deputy	1,799	 1%

2024 Cases by Manner of Death

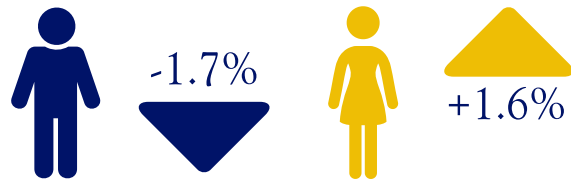
In CY24, Accidental deaths remained the highest category accounting for 44% of the total, which is a slight decline (6%) from the prior year. Suicides increased by 2.5% and Naturals by 5% when compared to the total distribution from the prior year.

Manner	Full Autopsy	Partial Autopsy	External Exam	Medical Record Review	Total
Accident	367	12	258	414	1,051
Homicide	239	0	1	4	244
Natural	158	15	124	535	832
Suicide	35	37	120	24	216
Undetermined	40	0	3	3	46
Pending	15	0	5	2	22
Total	854	64	511	982	2,411

2024 Cases Gender and Age Distribution

In CY24, the most impacted age groups remained the same as the prior year. There were marginal changes observed among the age group distributions. The most impacted were: (1) 60 to 69, (2) 50 to 59, & (3) 40 to 49 & 30 to 39. Decedents aged under 18 increased by 13% from the prior year.

Gender Distribution



The data from CY24 continues to show that males remain the most impacted group, maintaining the highest percentage among affected demographics; however, there was a slight decrease of 1.7% in 2024.

Age Group	Male	Female	Unknown/ Fetal	Total	Percentage
< 1	24	17	2	43	2%
1 to 12	26	22	0	48	2%
13 to 19	61	19	0	80	3%
20 to 29	205	49	0	254	11%
30 to 39	232	90	0	322	13%
40 to 49	247	73	0	320	13%
50 to 59	271	110	0	381	16%
60 to 69	291	137	0	428	18%
70 to 79	191	94	0	285	12%
80 to 89	90	91	0	181	8%
90 +	33	36	0	69	3%
Total	1,671	738	2	2,411	
Percent	69.3%	30.6%	.1%		100%

2024 Cases: Most Prevalent Cause of Death

Cardiovascular Deaths 541

Drug Intoxication Deaths 509

Blunt Force Trauma Deaths 470

Firearm Deaths 377

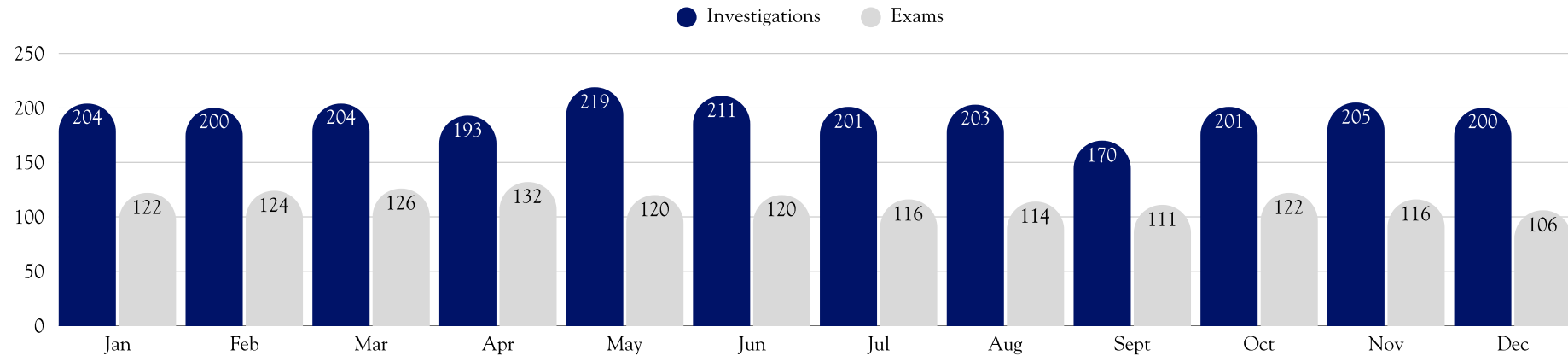
There was a significant change in the most prevalent cause of death in CY24. **For the first time in five years, drug intoxication fell to the second most prevalent cause of death. Drug intoxication deaths across all manners (includes where drug intoxication contributed to the death) decreased by 27% from the prior year. Combined over two years, there was a total 45% decrease in this cause of death.** The Marion County Coroner's Office is encouraged by the steady decline observed over the past two years and remains committed to ongoing community efforts and initiatives aimed at further reducing drug intoxication deaths in the coming years.

Cardiovascular related deaths increased by 16% over the prior year.

However, firearm related deaths increased across all manners by 16% from the prior year. Over two years, firearm related deaths has increased by 20% which is a concerning trend and requires future monitoring.

2024 Cases Distribution by Month

Unlike prior years, the month with the highest number of accepted cases compared to exams in CY24 was not the same month. Accepted cases peaked in May while exams peaked in April.

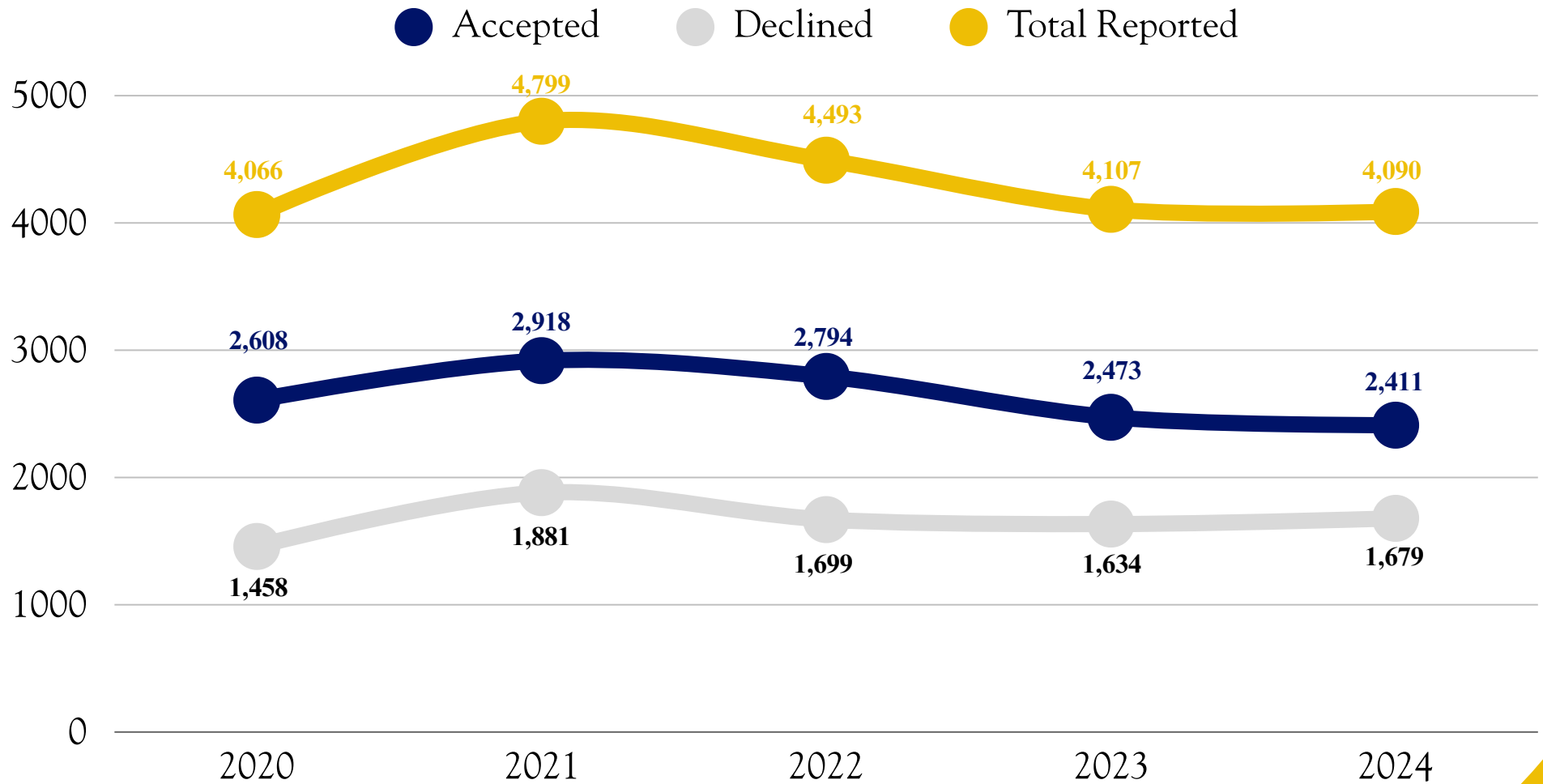


Distribution of Manner by Race

Manner	Asian	Asian Indian	Black	American Indian	Other	Unknown	White	Total
Accident	18	1	292	1	3	1	735	1,051
Homicide	0	1	165	0	2	0	76	244
Natural	6	8	275	2	0	0	541	832
Suicide	1	0	36	0	0	0	179	216
Undetermined	1	0	18	0	0	0	27	46
Pending	0	0	12	0	0	1	9	22
Total	26	10	798	3	5	2	1,567	2,411

Annual Trends in Deaths Reported

While overall annual totals have been on a steady decline for the last three years, the total numbers in reported and accepted cases in CY24 have not fallen below pre-2020 numbers.



2024:

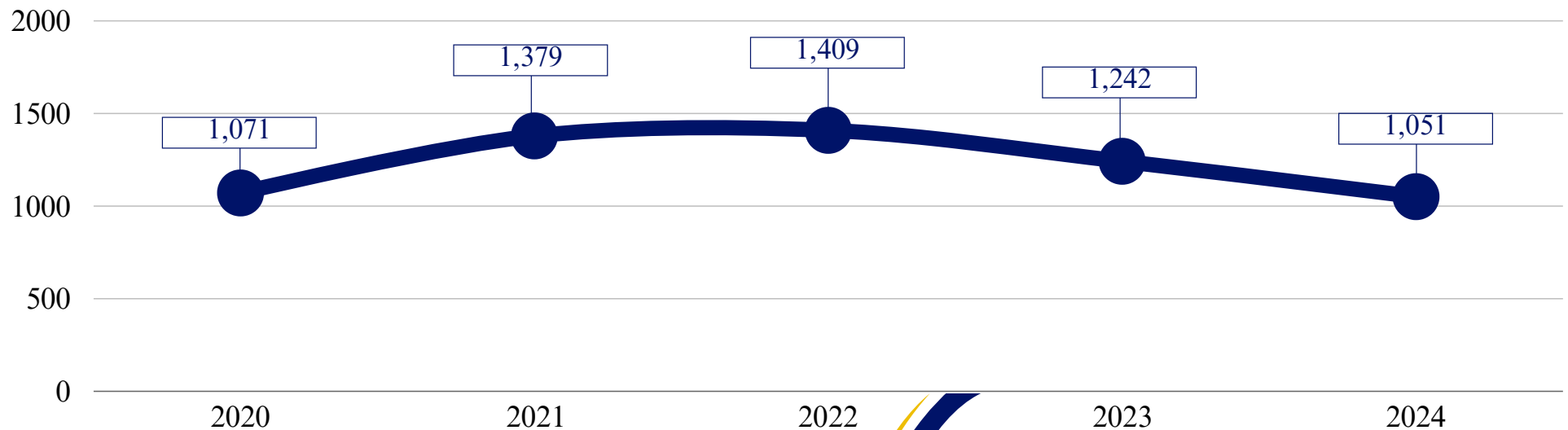
Accidental Deaths

Summary:

In CY24, the MCCO investigated 1,051 accidental deaths, representing a 16% decrease compared to the previous year. Accidental deaths include various circumstances, including: falls, motor vehicle accidents, drug intoxication, and other unintentional accidents. Among the 1,051 cases, the primary causes of death were: accidental drug intoxication (44%) and blunt force injuries (43%) which is a similar trend to prior years. However, drug intoxication deaths declined by approx. 10% from the previous year, showing a two year consecutive decline. White males continue to be the most impacted demographic, similar to prior years. The most impacted age group changed slightly from the prior year with the two highest in CY24 being 30 to 39 and 50 to 59, both at 16% of the total. Peak incidents occurred in both June and November.

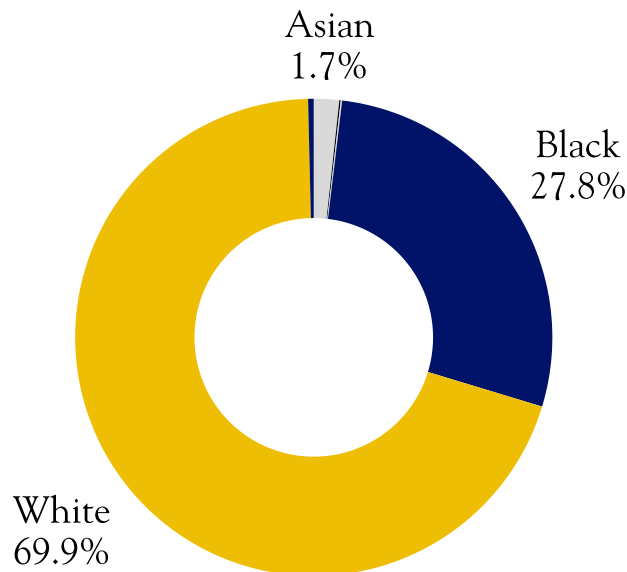
Yearly Trends of Accidental Deaths

Total accidental deaths have fallen below 2020 numbers for the first time in four years by 2%.

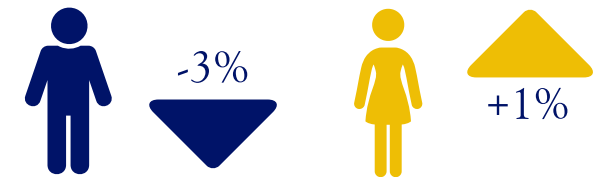


Race Distribution

Race distribution among decedents in CY24 showed a 2% decline in White decedents, conversely there was a 2% increase among Black decedents.



Gender Distribution



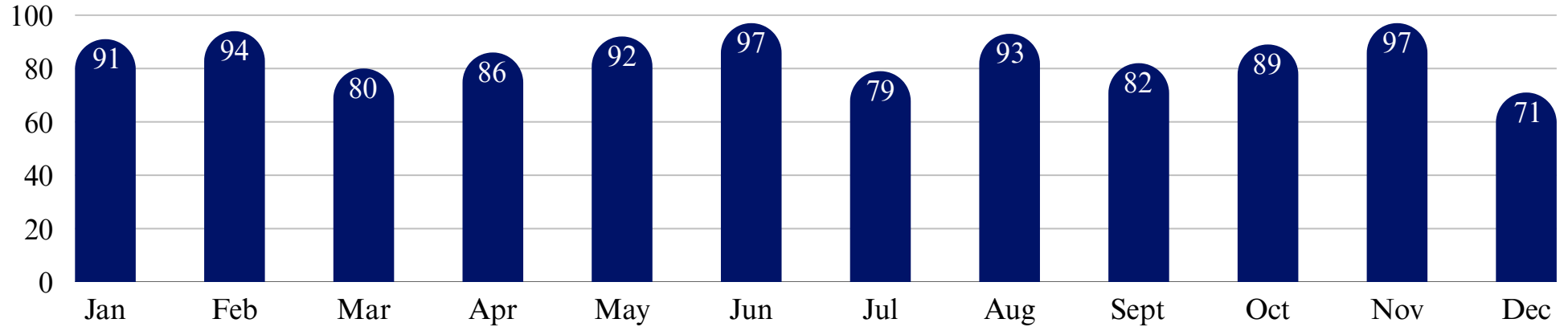
While males were still the majority of decedents at 70% in CY24, their percentage distribution declined by 3% while females increased by 1% from the prior year to a total of 30% for CY24.

Accidental Deaths by Cause

Drug intoxication remained as the primary cause of death in CY24, though the prevalence did decrease from the prior year by 10% when compared to the total causes. However, drug use or drug intoxication being a secondary factor did increase by 1.4% from the prior year. These instances include a positive drug screen at a toxic level but cannot be ruled as the sole, primary cause. Blunt force injuries also increased by 4% from the prior year.

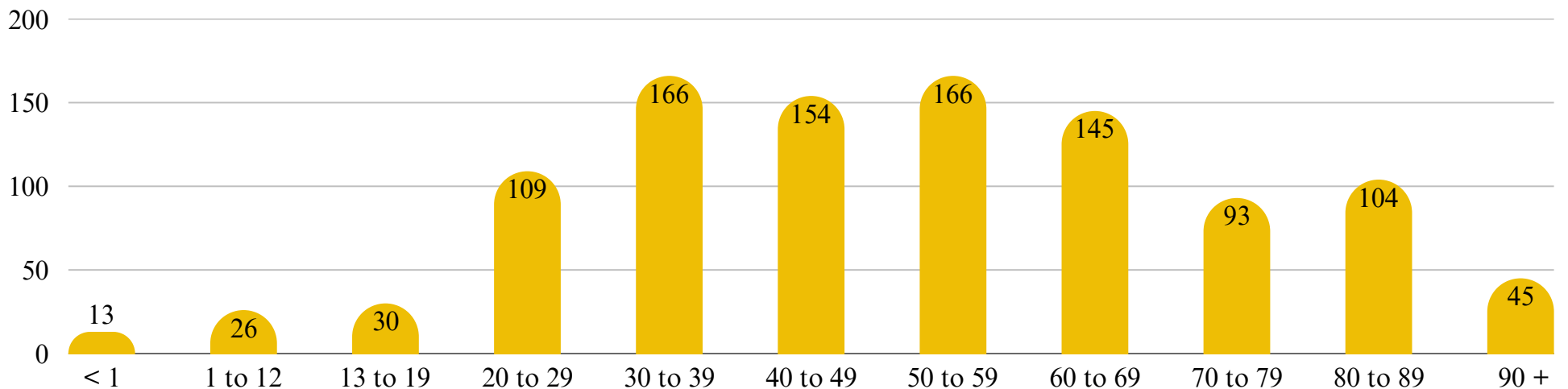
Cause of Death	Total	Percentage
Drug Intoxication	466	44%
Blunt Force	447	43%
Fire/Thermal	25	2%
**Drug Use Contributing	25	2%
Asphyxiation	23	2%
Drowning	22	2%
Choking	15	1%
Environmental	9	1%
Gunshot Wound	5	0.5%
Aspiration	2	0.2%
Other	12	1.1%
Total	1,051	100%

Accidental Deaths by Month



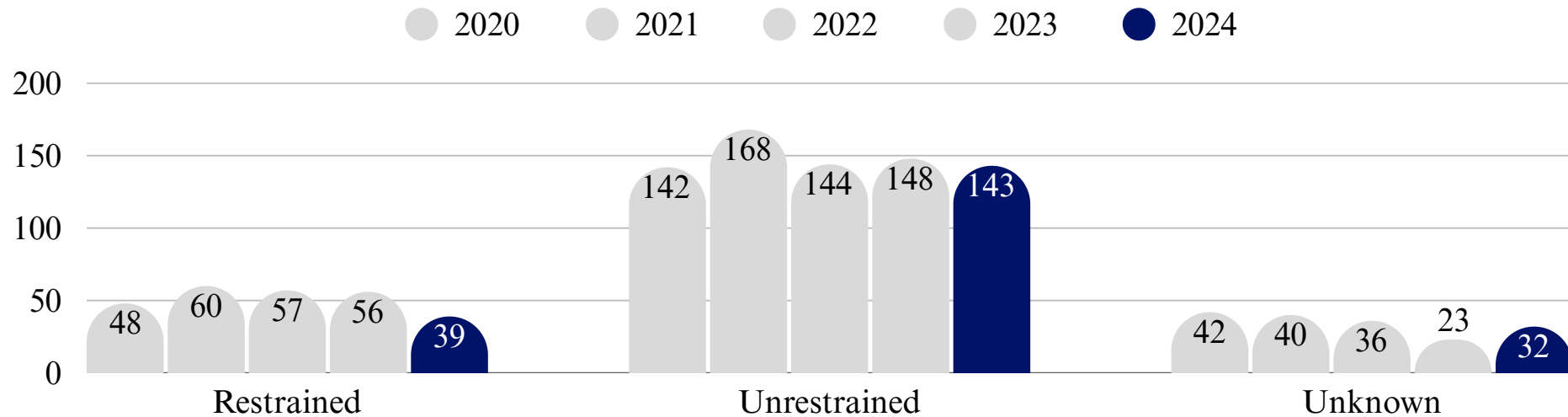
Accidental Deaths by Age

In CY24, two age groups were the highest impacted: 30 to 39 and 50 to 59. These two groups accounted for 32% of the total accidental deaths for the calendar year. Additionally, the age group 80 to 89 increased by 3% over the prior year distribution, suggesting an aging population among accidental deaths year over year in Marion County.



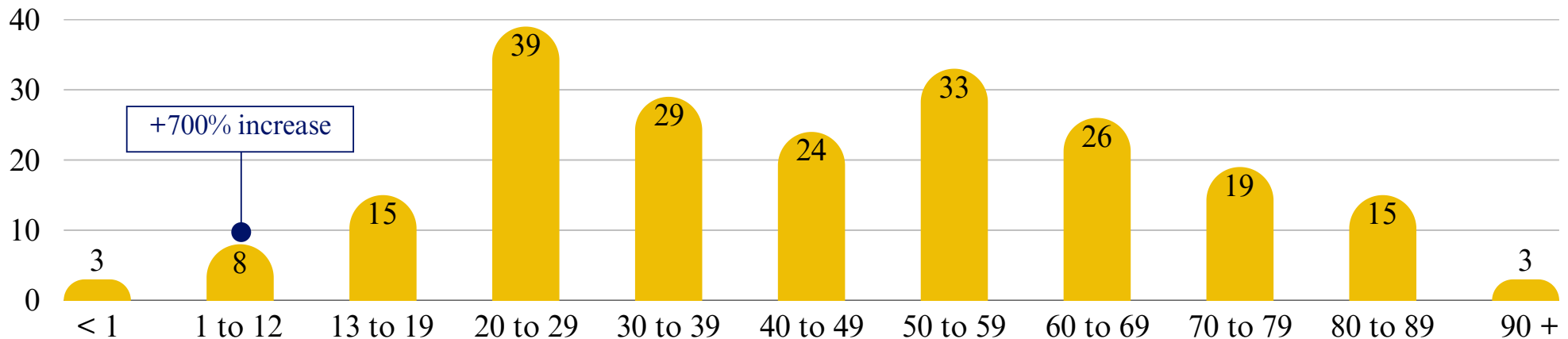
Motor Vehicle Deaths

In CY24, motor vehicle deaths declined by 6% from the prior year.



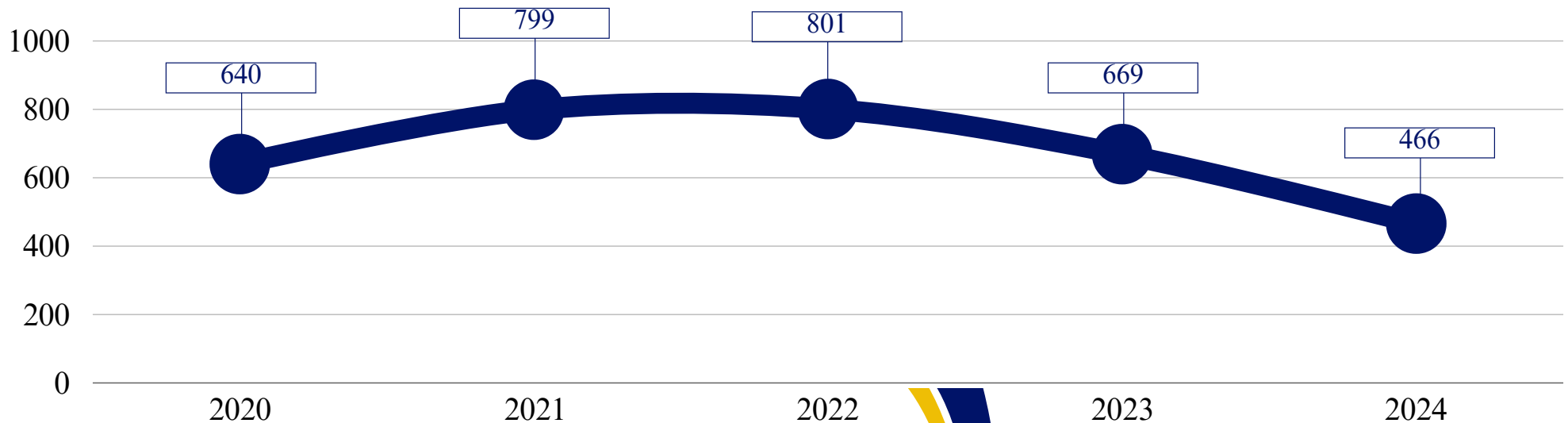
Motor Vehicle Deaths by Age

In CY24, there was a significant increase in MVA related deaths in decedents aged 1 to 12 years.



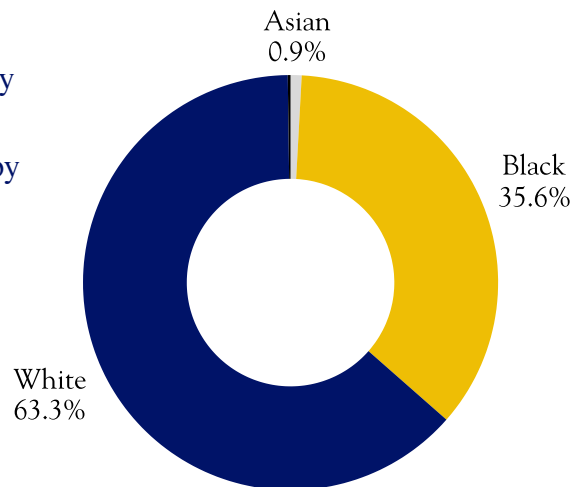
Drug Intoxication Deaths

In CY24, accidental drug intoxication deaths decreased by 30%, and have fallen below pre-2020 numbers.

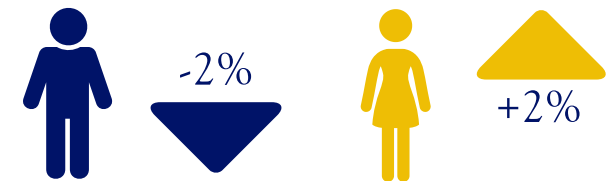


Race Distribution

In CY24, Black decedents increased by 3.6% while White decedents decreased by 3.6%.

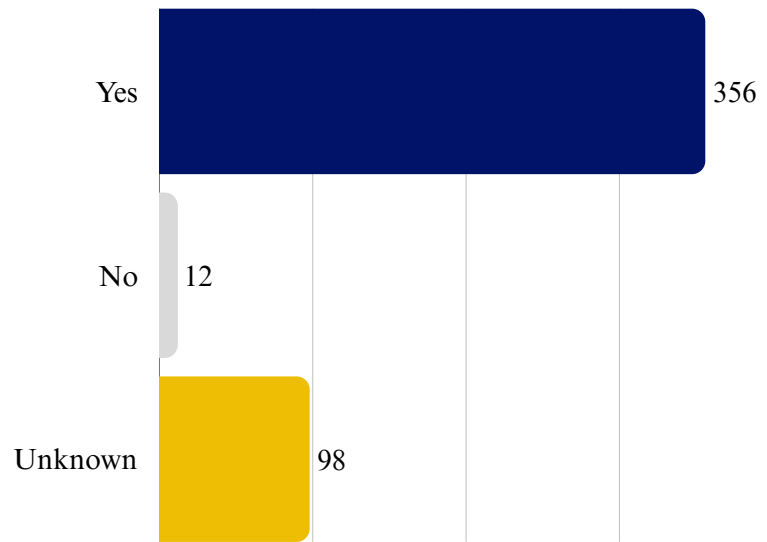


Gender Distribution



While males (70%) were still the majority of decedents in CY24, their percentage distribution declined by 2% while females (30%) increased by 2% from the prior year.

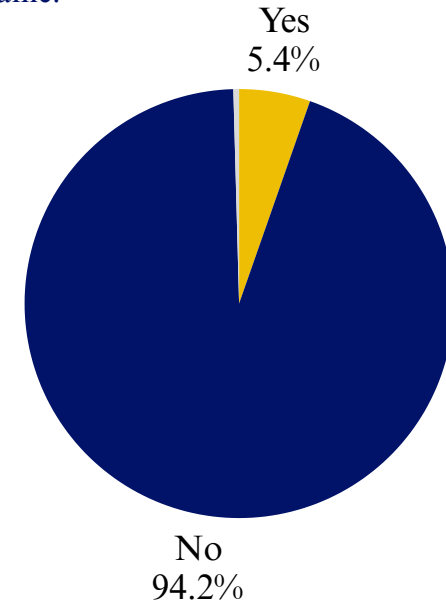
History of Illicit Substance Use



In CY24, there was a 3% increase in the number of individuals who had a history of illicit substance use.

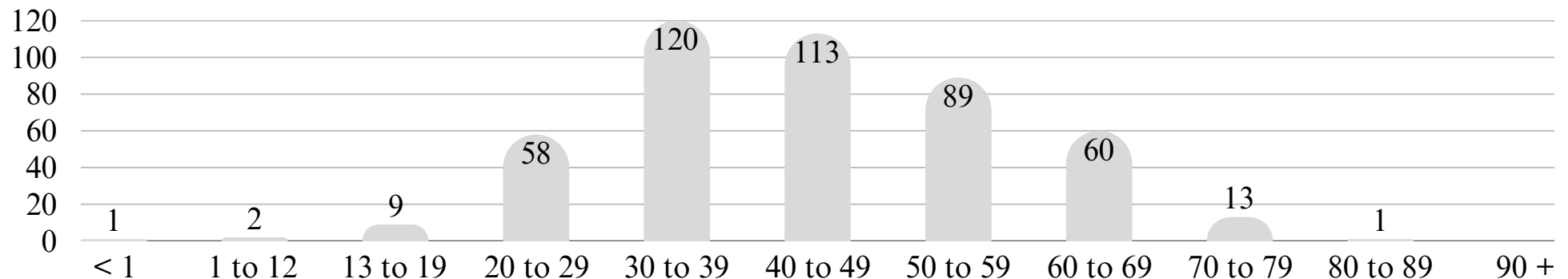
Ethnicity

There was a decline in reported ethnicity among drug intoxication deaths in CY24. Approx. 5% of decedents were identified as Hispanic.



Drug Intoxication Deaths by Age


The most impacted age group for drug intoxication deaths changed in CY24 back to 30 to 39, representing 26% of all drug intoxication deaths.



2024: Homicide Deaths

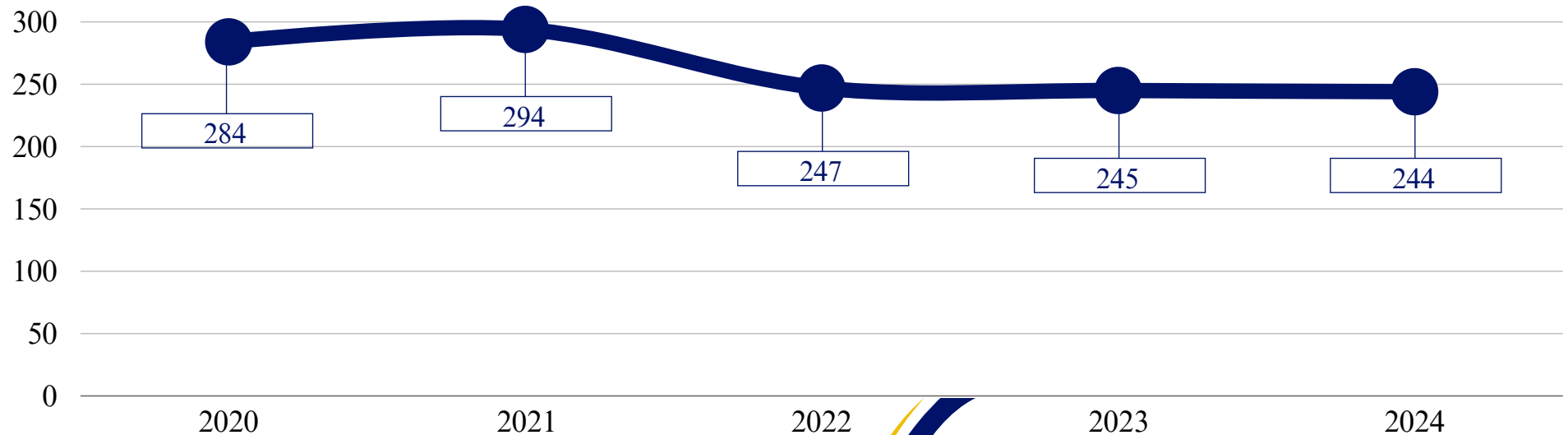
Summary:

In CY24, the MCCO investigated 244 homicide deaths, representing no significant change compared to the previous year. Gunshot wounds were the leading cause of death, accounting for 87% of all homicides. While this has remained consistent for seven years, the prevalence fell by 3% among all homicide deaths. Black males continue to be the most impacted demographic, similar to prior years, representing 68% and 83% (respectively) of all homicide deaths. The most impacted age group saw no change in CY24 from prior years, with 20 to 29 accounting for 33% of all homicide deaths. Peak incidents occurred in October.



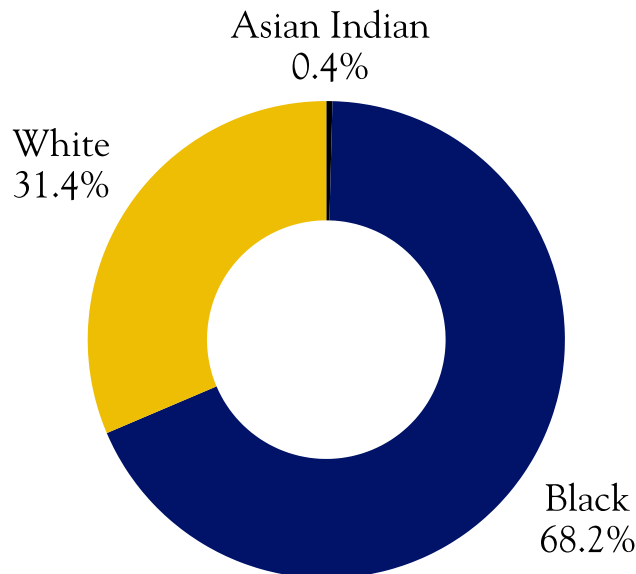
Yearly Trends of Homicide Deaths

Total homicide related deaths remained stagnant from the prior year.

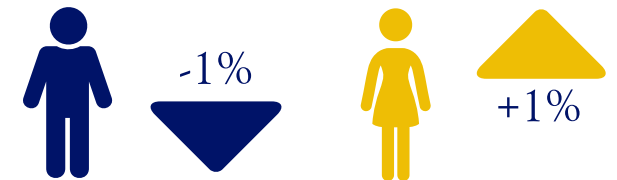


Race Distribution

There was no statistical change among the race distribution of homicides in CY24 from the prior year.



Gender Distribution



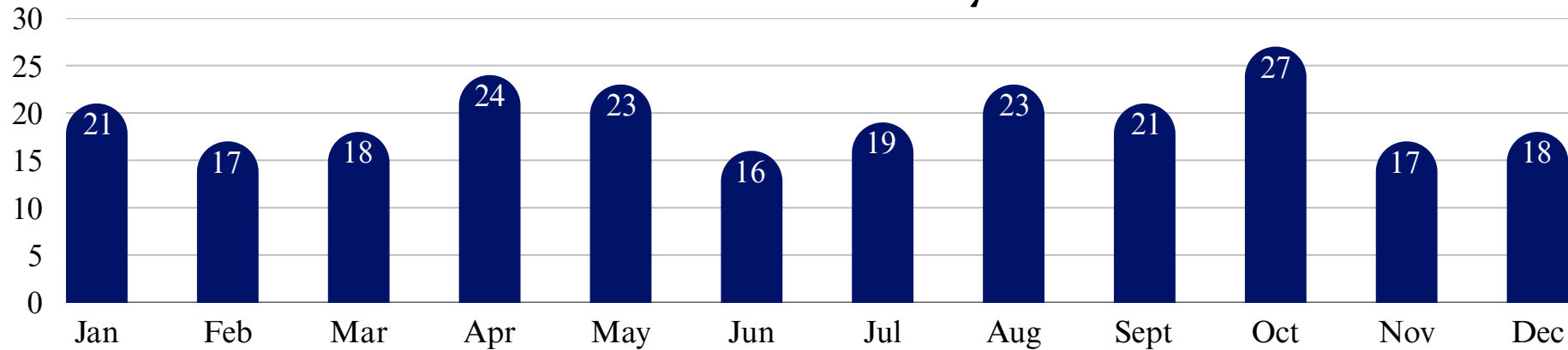
Black (68%) males (83%) were still the majority of decedents in CY24, their percentage distribution declined by 1% while females (17%) increased by 1% from the prior year.

Homicide Deaths by Cause

Gunshot wound(s) remained the top cause of death among homicides in CY24. The prevalence fell 3% from the prior year. Sharp force trauma increased by 4% from the prior year, while blunt force injuries decreased by 3%, and mixed modality trauma increased by .6%

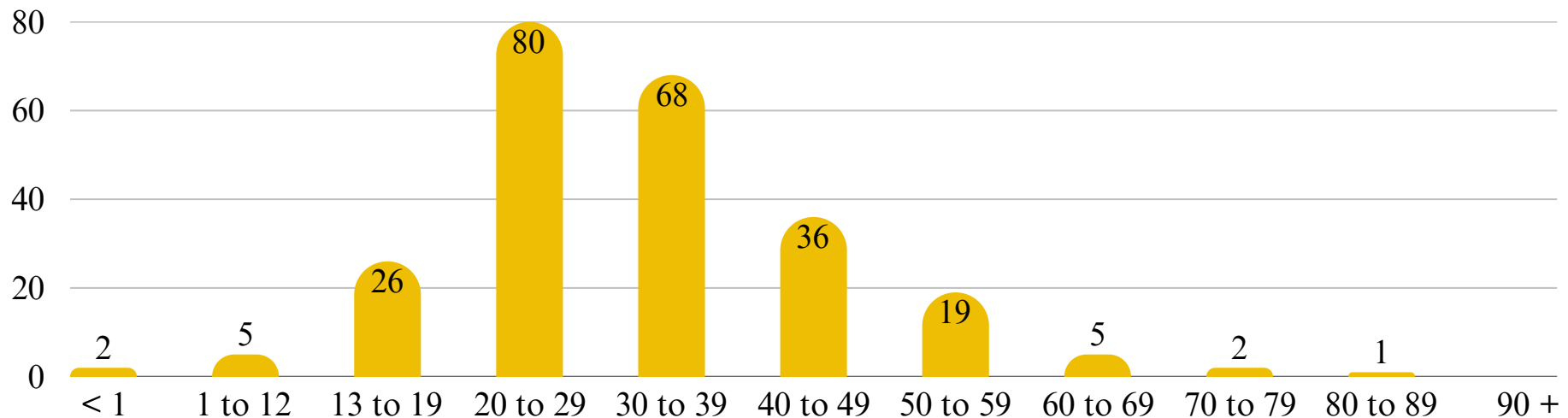
Cause of Death	Total	Percentage
Gunshot Wound	212	87%
Sharp Force	10	5%
Blunt Force	12	4%
Mixed Modality	5	2%
Strangulation/Asphyxiation	2	1%
Other	3	1%
Total	244	100%

Homicide Deaths by Month

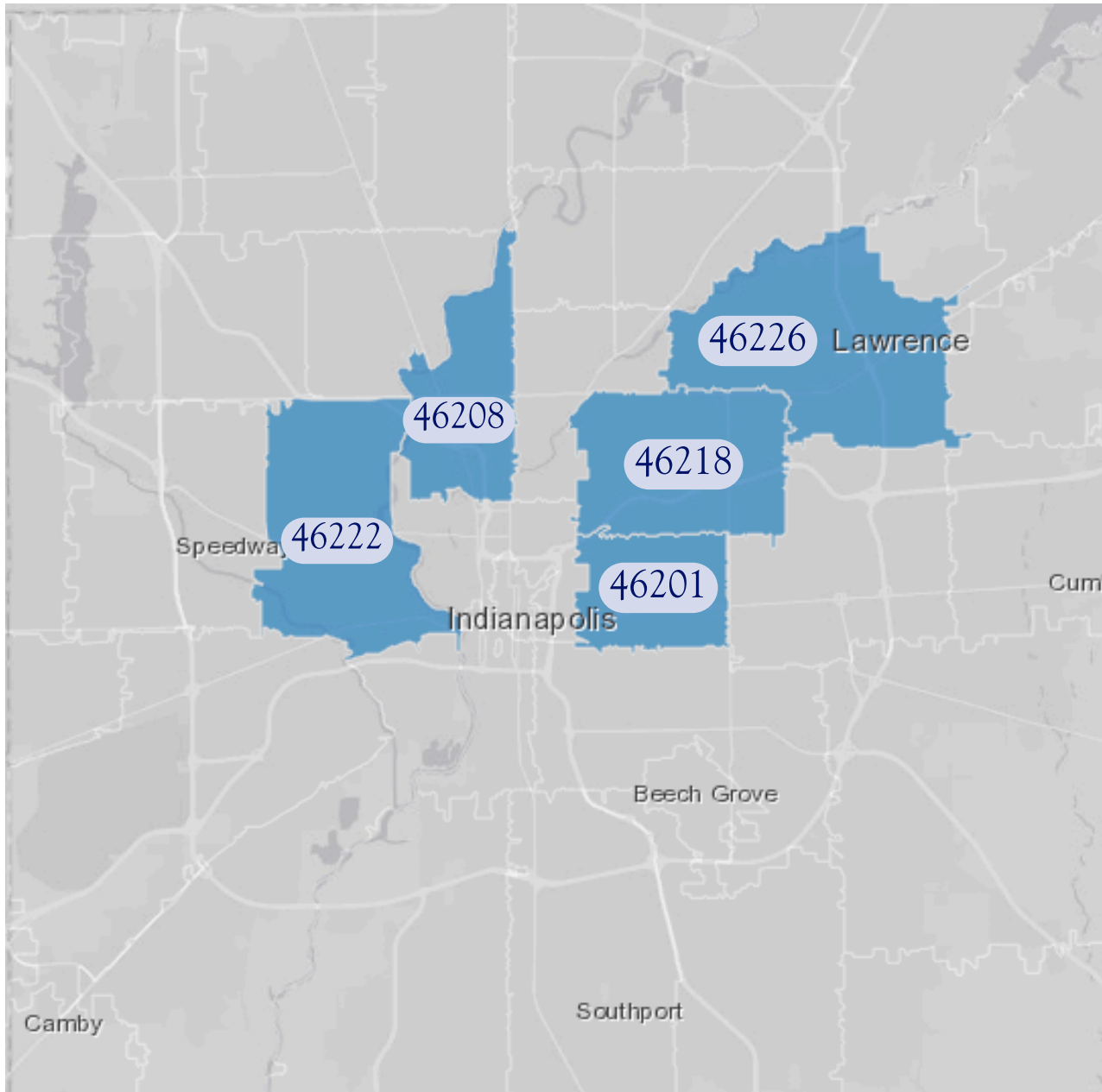


Homicide Deaths by Age

In CY24, the most impacted age group did not change from the prior year (20 to 29 years old) but saw a 4% increase. However, age group 1 to 12 years old saw a 1% increase and the 13 to 19 age group saw a decrease of 10% from the prior year.



2024 Homicides by Zip Code



Of the 244 homicides which occurred in CY24, **227 (93%)** were incidents which occurred within Marion County.

Based on the injury information, the top five most impacted zip codes accounted for 41% of incidents inside Marion County:


Zip Code	Total Count	Percentage
46201	21	9.3%
46226	19	8.4%
46218	19	8.4%
46222	18	7.9%
46208	15	6.6%
Total	92	41%

2024:

Natural Deaths

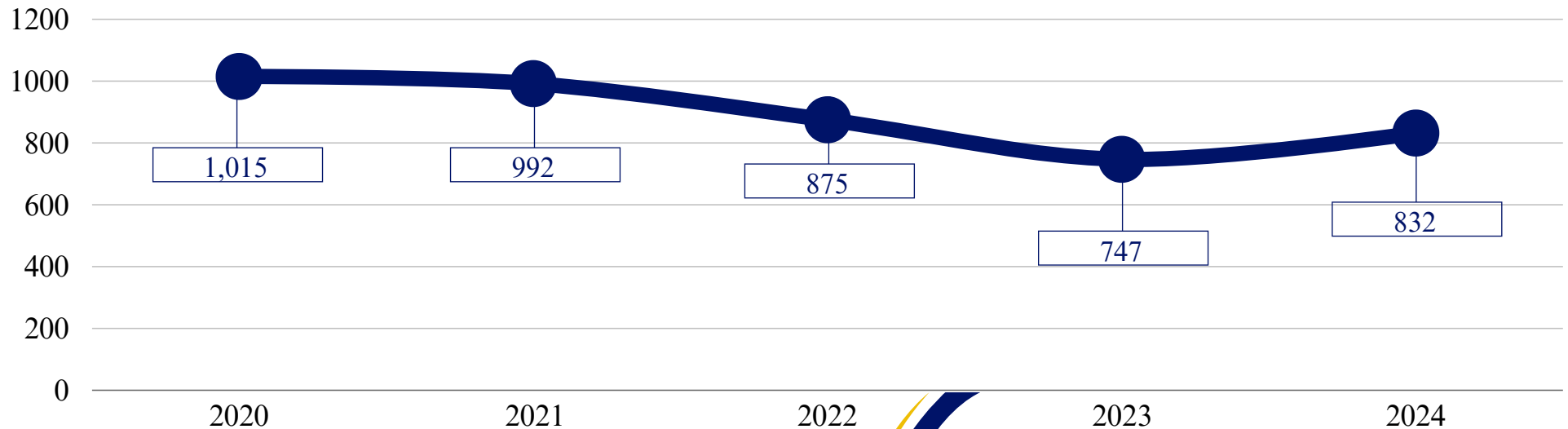
Summary:

In CY24, the MCCO investigated 832 natural deaths, marking an 11% increase from the previous year . The leading cause of death was found to be cardiovascular disease accounting for 541 deaths, which was a 3% increase over the prior year. The most affected age and race group remained consistent from years prior at 65% White males aged 60 to 69. Peak incidents also remained consistent from the prior year with the most natural deaths being investigated in March.



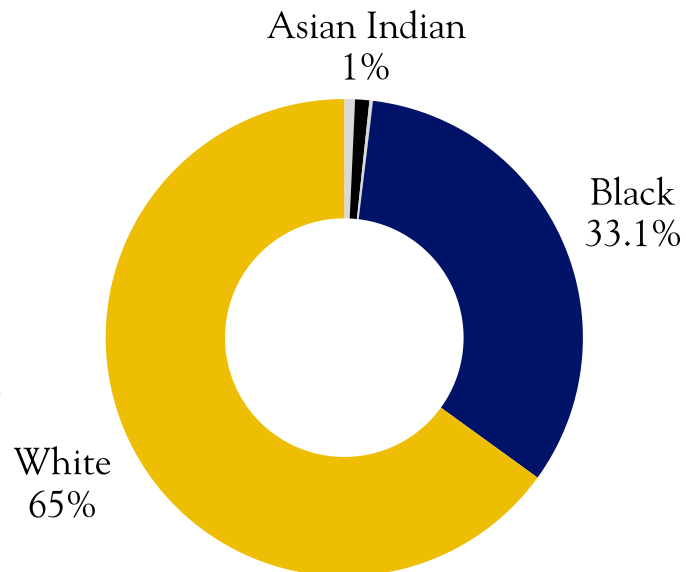
Yearly Trends of Natural Deaths

Total natural related deaths increased by 11% over last year.

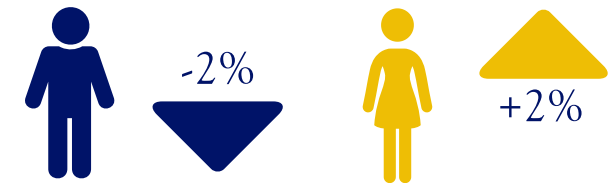


Race Distribution

There was no statistical change among the race distribution of naturals in CY24 from the prior year.



Gender Distribution



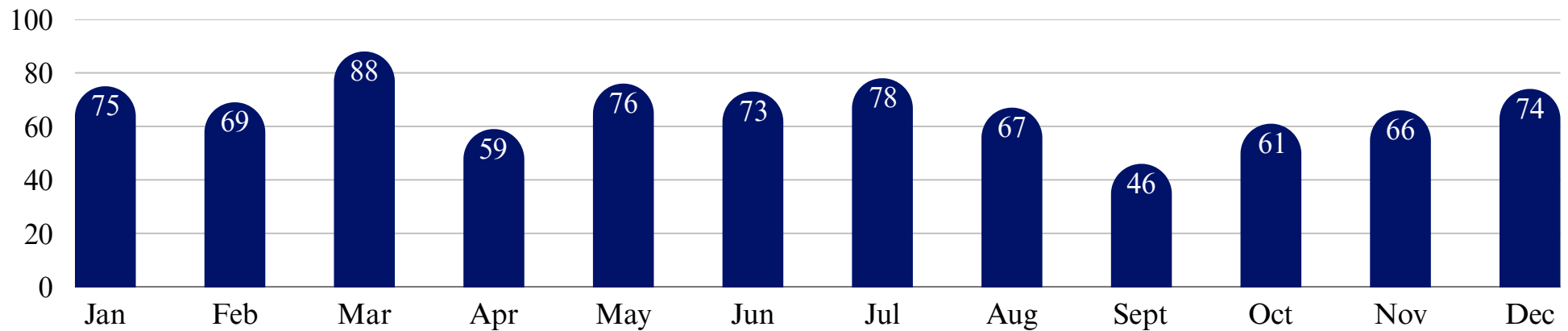
While males (65%) were still the majority of decedents in CY24, their percentage distribution declined by 2% while females (35%) increased by 2% from the prior year.

Natural Deaths by Cause

Cardiovascular related deaths remained the top cause of death in CY24, similar to prior years. The prevalence increased by 3% over the prior year, while alcohol-related deaths remained the same, and chronic illicit substance use declined by .3%.

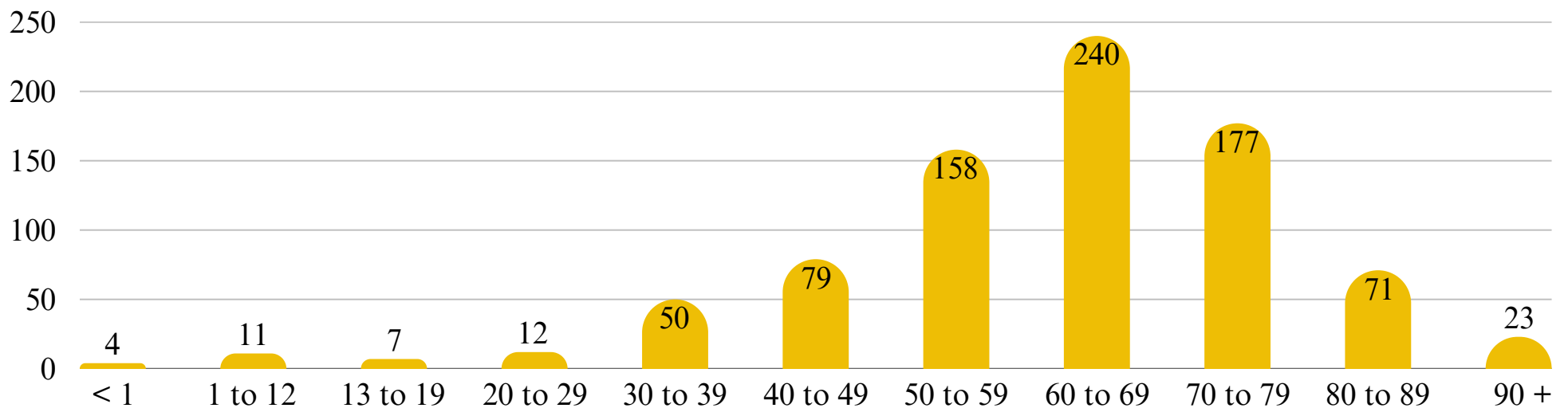
Cause of Death	Total	Percentage
Cardiovascular Disease	541	65%
Alcohol Related	76	9%
Respiratory Disease	58	7%
Diabetes Related	43	5%
Cancer	28	3%
Infection	21	2.5%
Renal/Hepatic	21	2.5%
Neurological	17	2%
Obesity	8	1%
Congenital/Autoimmune	8	1%
Gastrointestinal	5	0.6%
HIV/AIDS	1	0.1%
COVID-19	1	0.1%
Chronic Illicit Drug Use (Contributory)	2	0.2%
Other	2	0.2%
Total	832	100%

Natural Deaths by Month



Natural Deaths by Age

In CY24, there was no significant change to the age group distribution, with 60 to 69 remaining the most impacted, similar to the prior year.




2024:

Suicide Deaths

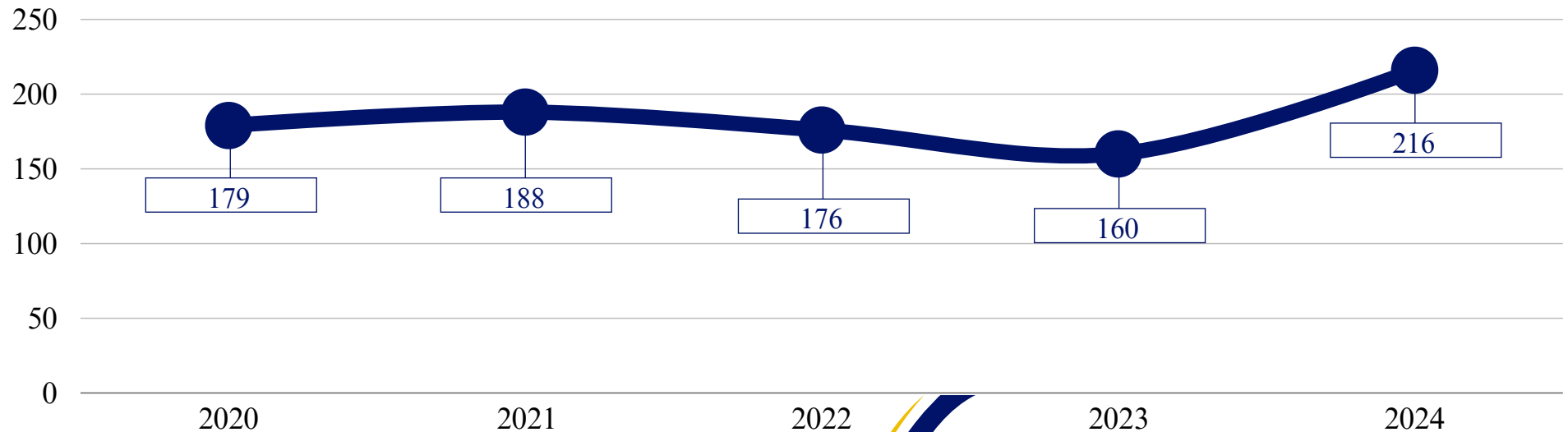
Summary:

In CY24, the MCCO investigated 216 suicide deaths, representing a 35% increase compared to the previous year. Gunshot related injuries remain as the leading cause of death among suicides which is similar to prior years. The most impacted age and race group for suicide deaths also remained consistent from prior years as White (86%) males (83%) aged 20 to 29 (23%). Peak incidents occurred in June.



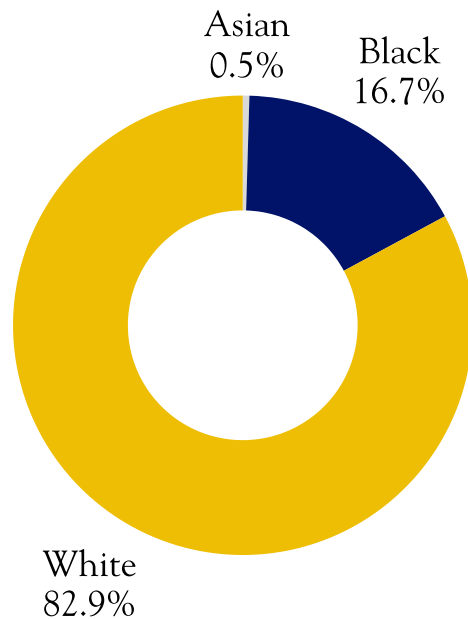
Yearly Trends of Suicide Deaths

Total suicide related deaths increased by 35% over last year.



Race Distribution

In CY24, White decedents increased by 1.9%. Black decedents also increased by 1.7%, while Asian decedents decreased by 3.5%.



Gender Distribution



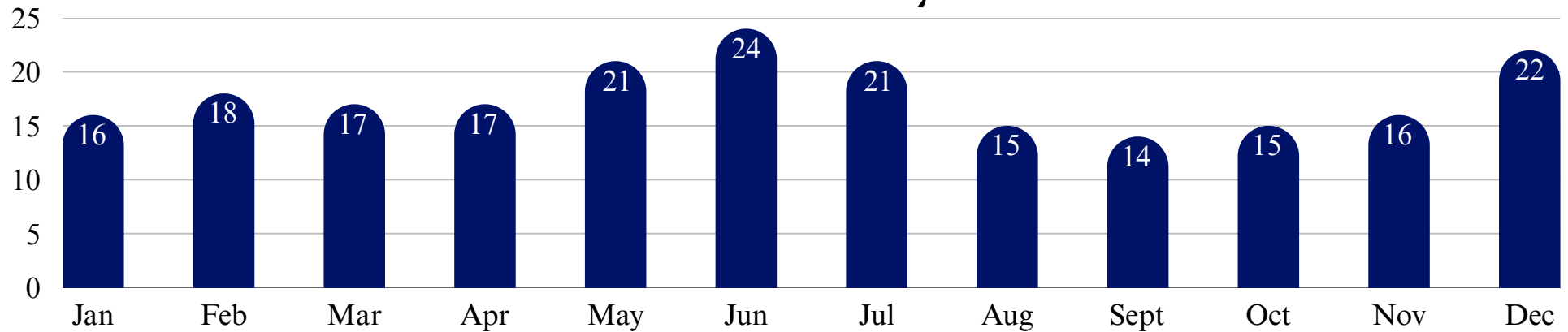
While males (86%) were still the majority of decedents in CY24, their percentage distribution increased by 9% while females (14%) decreased by 9% from the prior year.

Suicide Deaths by Cause

No significant shift in the most prevalent cause of death amount suicides in CY24. Firearm related increased by 14%, while hanging/ligature declined by 7% & drug intoxication declined by 3%.

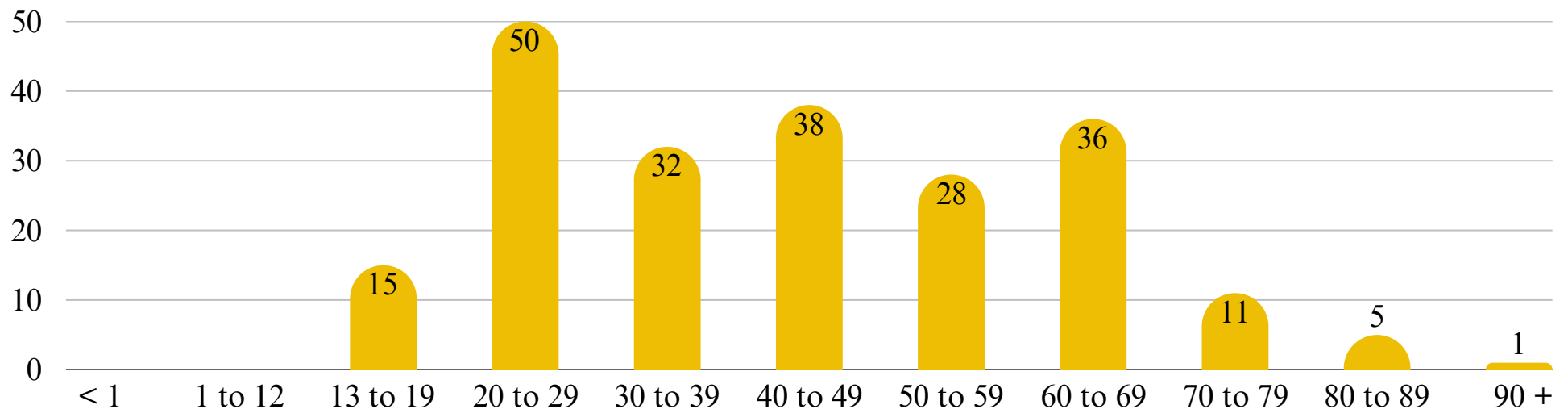
Cause of Death	Total	Percentage
Firearm	156	72%
Hanging/Ligature	36	17%
Intoxication (OTC &/or Narcotic)	10	5%
Blunt Trauma	5	2%
Inhalation/Thermal	3	1%
Asphyxiation	3	1%
Sharp Force	2	1%
Other	1	0.5%
Total	216	100%

Suicide Deaths by Month



Suicide Deaths by Age

In CY24, there was no significant change to the age group distribution. Age group 13 to 19 showed a 1% increase, while the 30 to 39 age group showed a 6% decrease from the year prior.




2024:

Undetermined Deaths

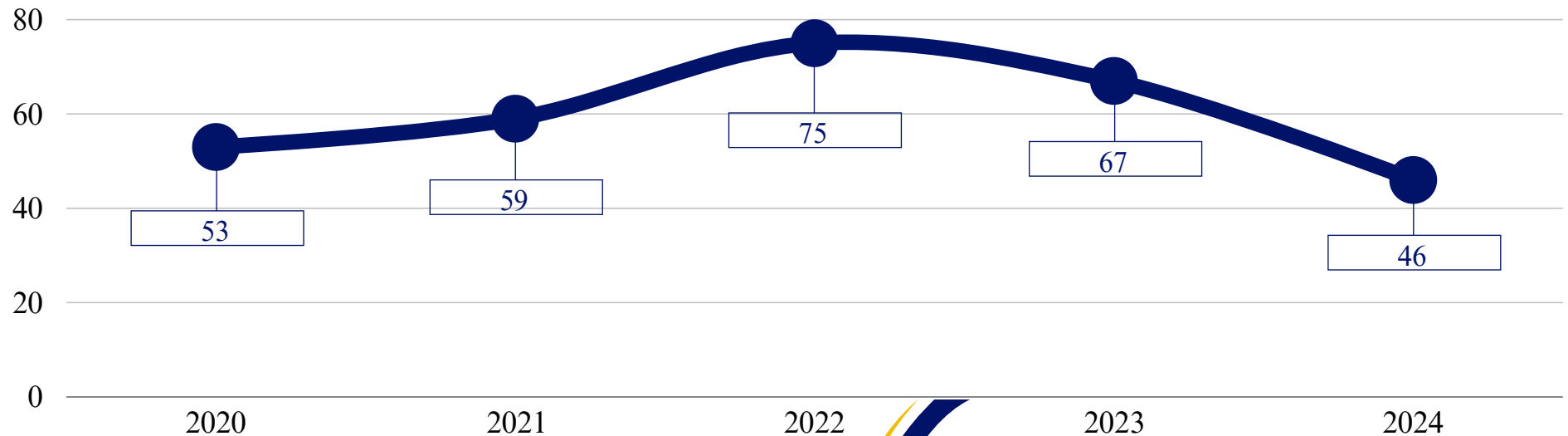
Summary:

In CY24, the MCCO investigated 46 deaths classified as undetermined, reflecting a 31% decrease from the previous year. Undetermined deaths occur when there is insufficient medical or social history to establish a definitive manner of death. The primary causes of these types of deaths were: sudden unexplained infant death, blunt force trauma, and undeterminable. The most affected age and race group for undetermined deaths remained consistent from the previous calendar year, being White (59%) males (70%) under 1 year of age. Peak incidents occurred in April, May, and September.



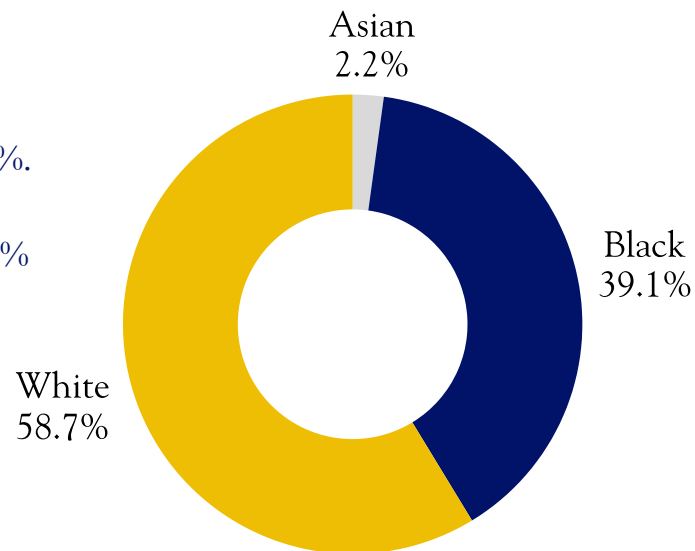
Yearly Trends of Undetermined Deaths

Total undetermined related deaths decreased by 31% over last year.

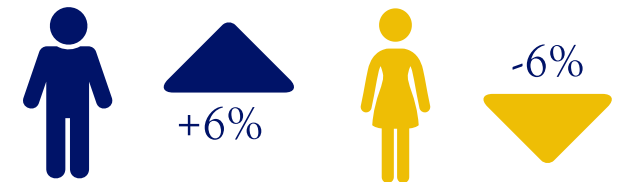


Race Distribution

In CY24, White decedents increased by 1.7%. Black decedents decreased by 2.9%.



Gender Distribution



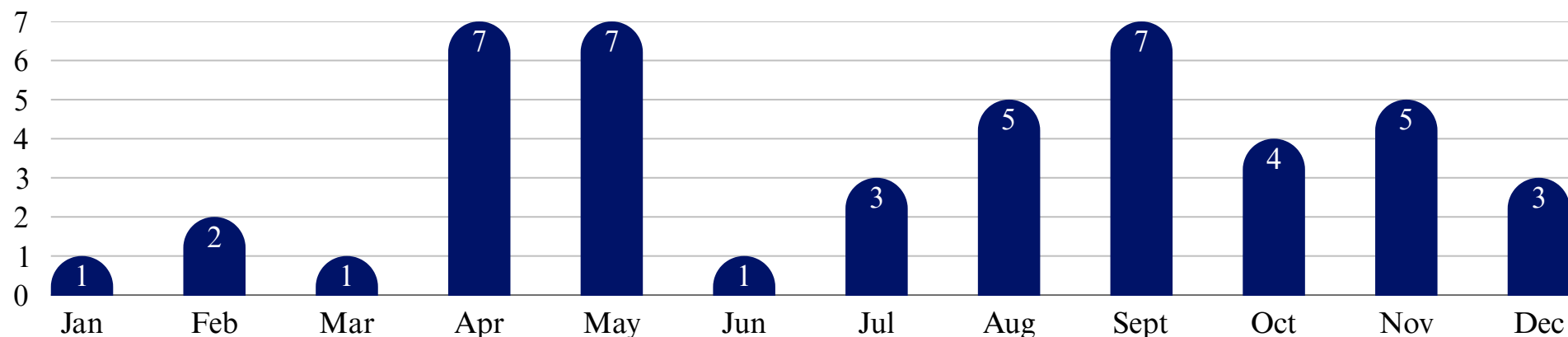
While males (70%) were still the majority of decedents in CY24, their percentage distribution increased by 6%, while females (30%) decreased by 6% from the prior year.

Undetermined Deaths by Cause

No significant shift in the most prevalent cause of death among undetermined deaths in CY24. While Sudden and Unexplained Infant Death remained the most prevalent cause of death, these were ruled with both intrinsic and extrinsic factors being contributing factors. For example, this could include an unsafe sleeping environment.

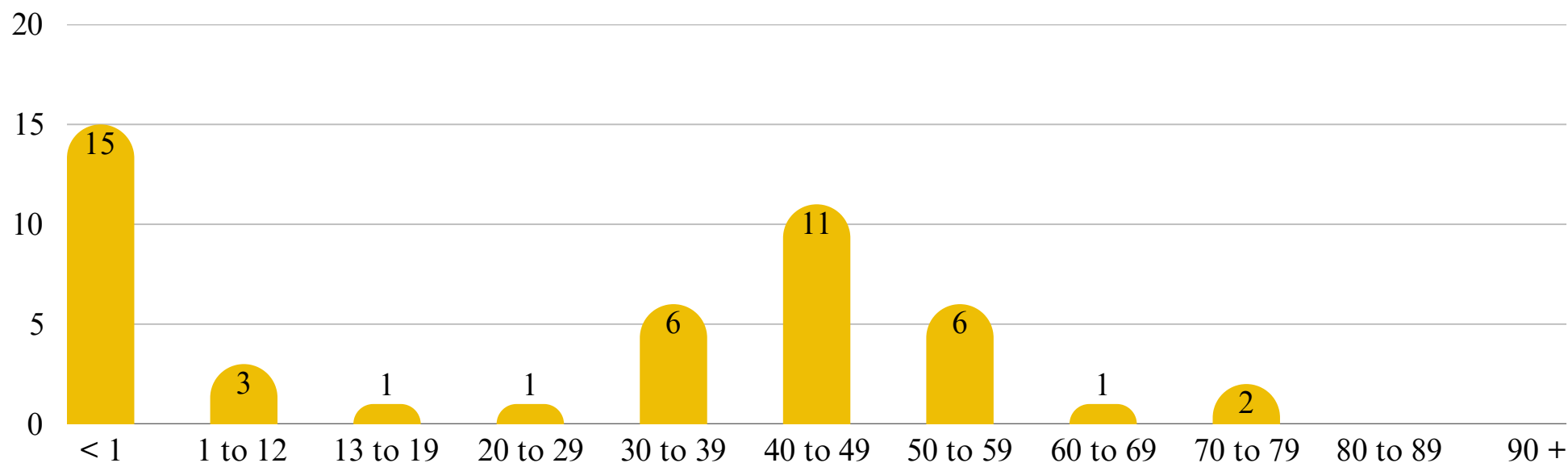
Cause of Death	Total	Percentage
Sudden Unexplained Infant Death*	11	24%
Undetermined	10	22%
Blunt Force Trauma	8	17%
Drug Intoxication	4	9%
Gunshot Wound	4	9%
Drowning	3	7%
Fetal	2	4%
Asphyxiation	1	2%
Fire/Thermal	1	2%
Other	2	4%
Total	46	100%

Undetermined Deaths by Month



Undetermined Deaths by Age

In CY24, there was no significant change to the age group distribution.



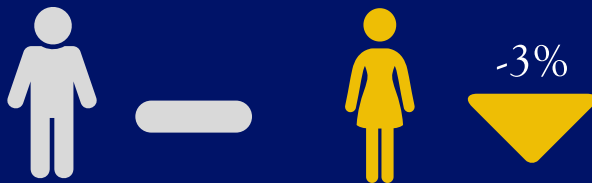
Special REPORTS

2024

Homicides involving Firearms

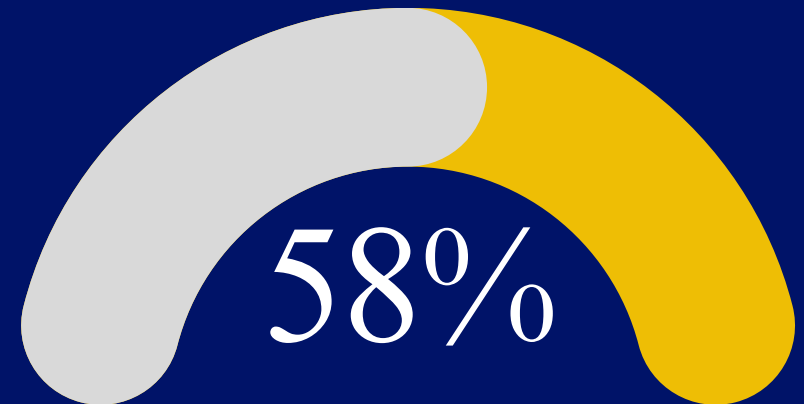
In CY24, the MCCO investigated 244 homicides, of which 87% (212) involved firearms. This is a 4% decline from the year prior.

Gender Distribution



The percentage of firearm homicides involving male decedents remained stagnant at 86%, while female decedents decreased by 3% from the prior year.

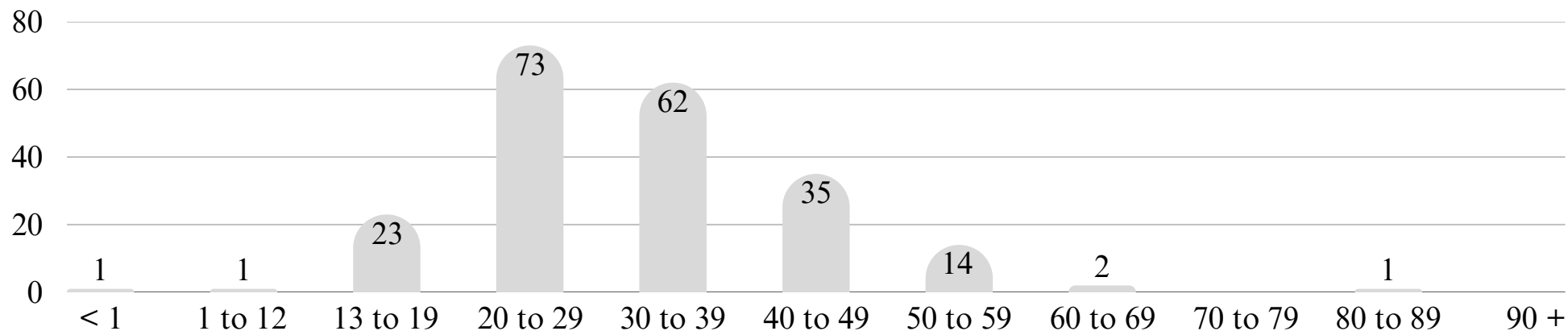
Multiple Gunshot Wounds per Incident



The disparity between single and multiple gunshot wounds further widened compared to the previous year. Multiple gunshot wound incidents increased by 4% over the prior year. This is an 8% increase over two years.

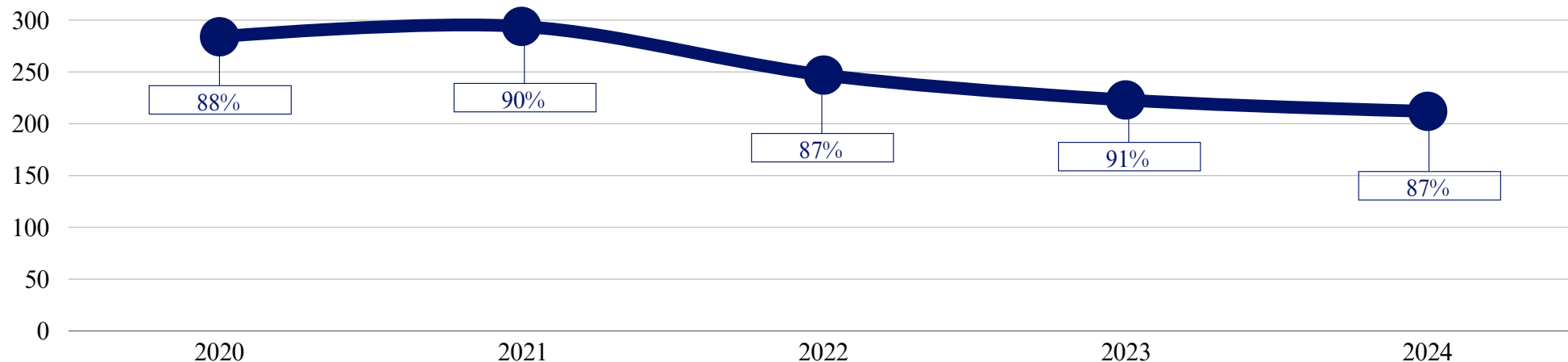
Firearm Homicide Deaths by Age

The distribution among age groups for firearm related homicides remained relatively consistent with a minor fluctuation in the 50 to 59 group (-4%) and in the 13 to 19 group (-12%) from the prior year.

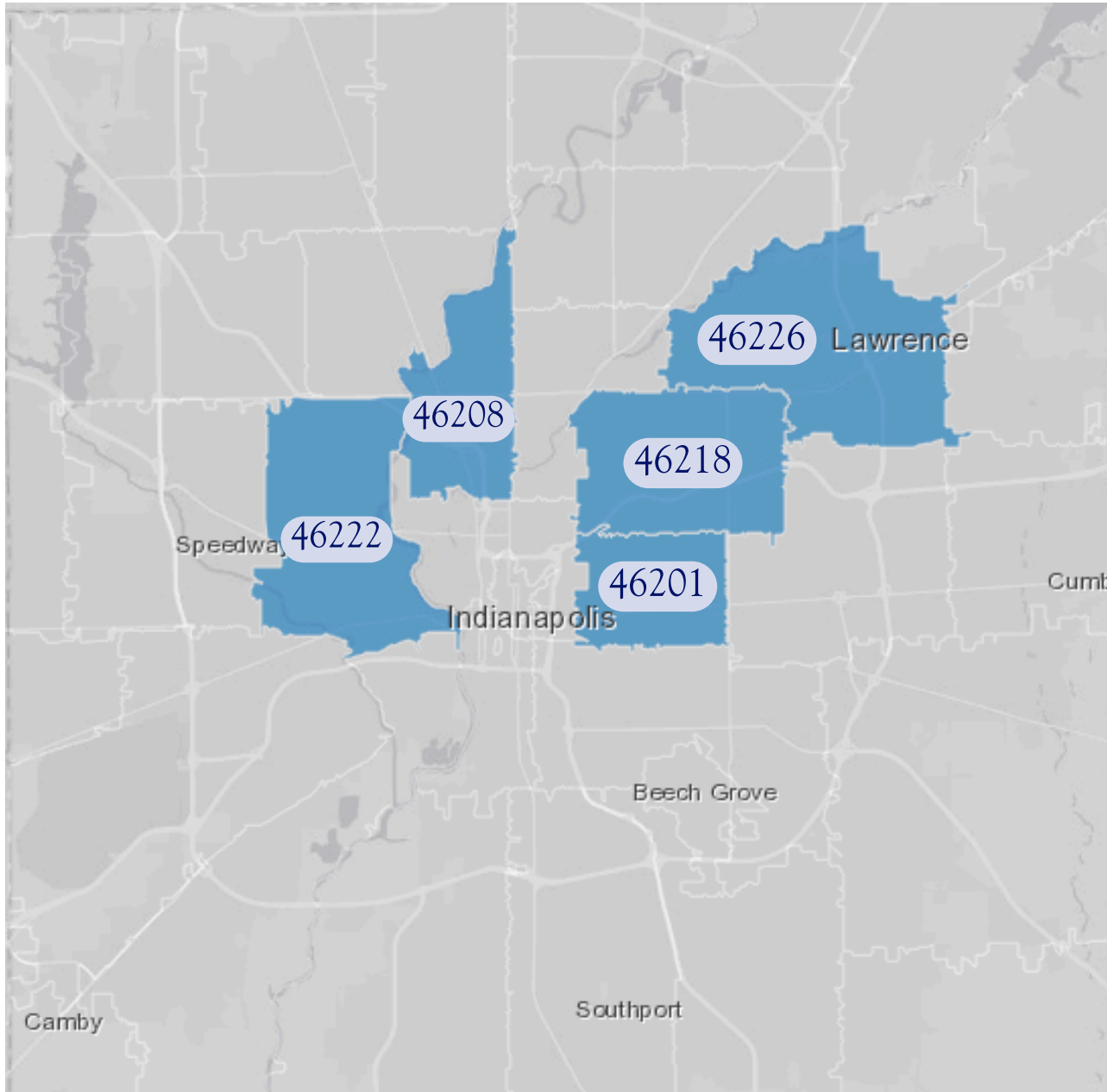


Percent of Firearm Homicides per Year

In CY24, the percentage of firearm related homicides decreased 4% from the prior year.



Firearm Homicides by Most Impacted Zip Codes



Of the 212 firearm related homicides which occurred in CY24, 202 (95%) of those occurred within Marion County.

Based on the injury information, the top five most impacted zip codes in 2024 for firearm homicides were:

Zip Code	Total Count	Percentage
46201	20	9.9%
46218	19	9.4%
46226	18	8.9%
46222	17	8.4%
46208	14	6.9%
Total	88	44%

There was a change in the impacted zip codes. In CY24, there was a change from 46235 to 46222.

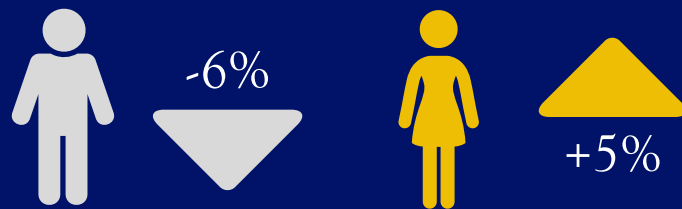
Infant and Child Death Investigations

In CY24, the MCCO investigated 151 child (0-18) deaths, which was a 13% increase over the prior year.

Child 0-18 Deaths by Manner



Gender Distribution



While males (64%) were still the majority of decedents in CY24, their percentage distribution increased by 6% while females (35%) decreased by 6% from the prior year.

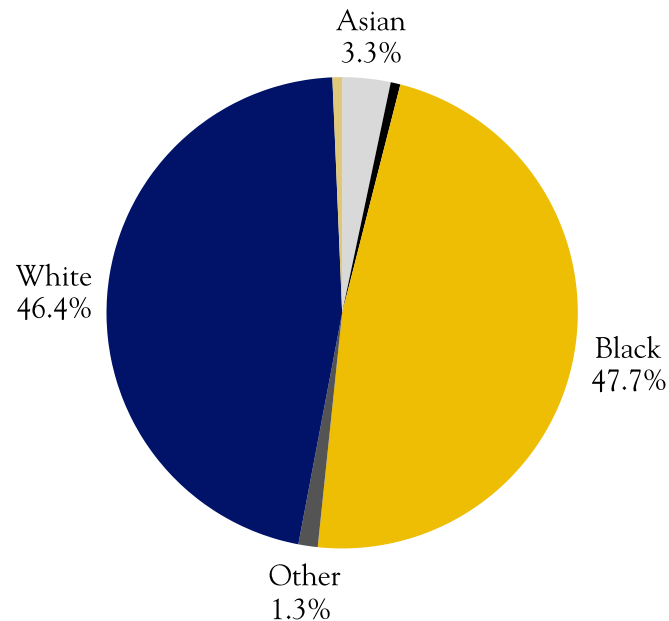
The distribution among manners changed from the prior year with Accidental deaths becoming the majority among child (0 to 18). At the time of report, there are 9 pending further testing. There were 11 fetal deaths in CY24 which is a 450% increase over the prior year.

Child (0 to 18) Deaths by Cause

Gunshot wound and blunt force trauma remained at the top causes of death among children in CY24. SUDI (Sudden Unexplained Death of Infant) declined by 9% while drowning increased by 3% and congenital/pre-existing condition related deaths increased by 5%.

Cause of Death	Total	Percentage
Gunshot Wound	30	20%
Blunt Force Trauma	27	18%
Asphyxiation	11	7%
Drowning	11	7%
Congenital/Pre-Existing Medical	11	7%
Infection	10	7%
Drug Intoxication	10	7%
Sudden Unexplained Death of Infant (SUDI)	9	6%
Unsafe Sleep (Infant)	4	3%
Ligature/Hanging	3	2%
Fetal Demise	3	2%
Other	6	4%
Undetermined	4	3%
Pending	12	8%
Total	151	100%

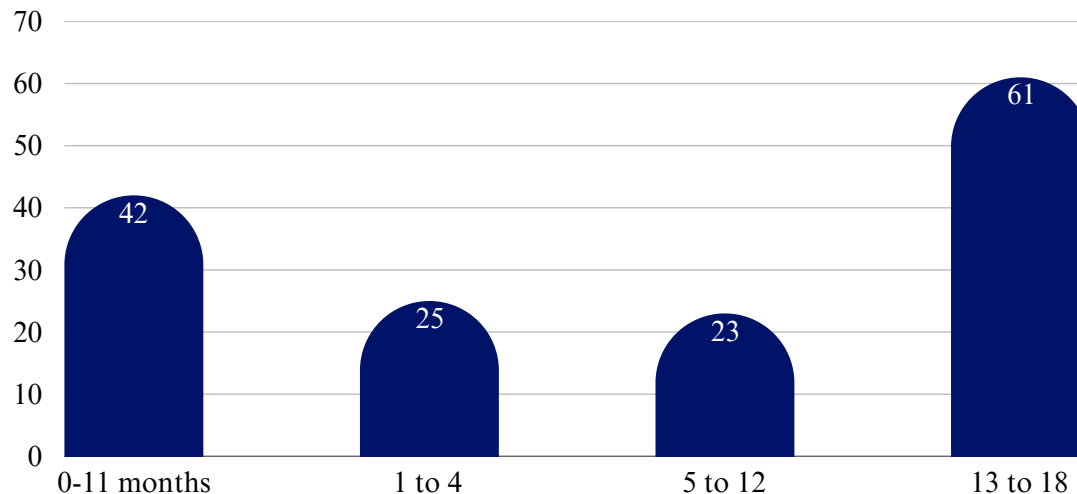
Child (0 to 18) Race and Ethnicity



In CY24, showed a disparity among race with minorities showing an over representation in child deaths; however, Asian decedents increased by 2.3% and Black decedents decreased by 5.3% from the prior year.

Ethnicity showed the same disparity as Hispanic decedents were higher among children (10%) than the total distribution (5%).

Child (0 to 18) Deaths by Age

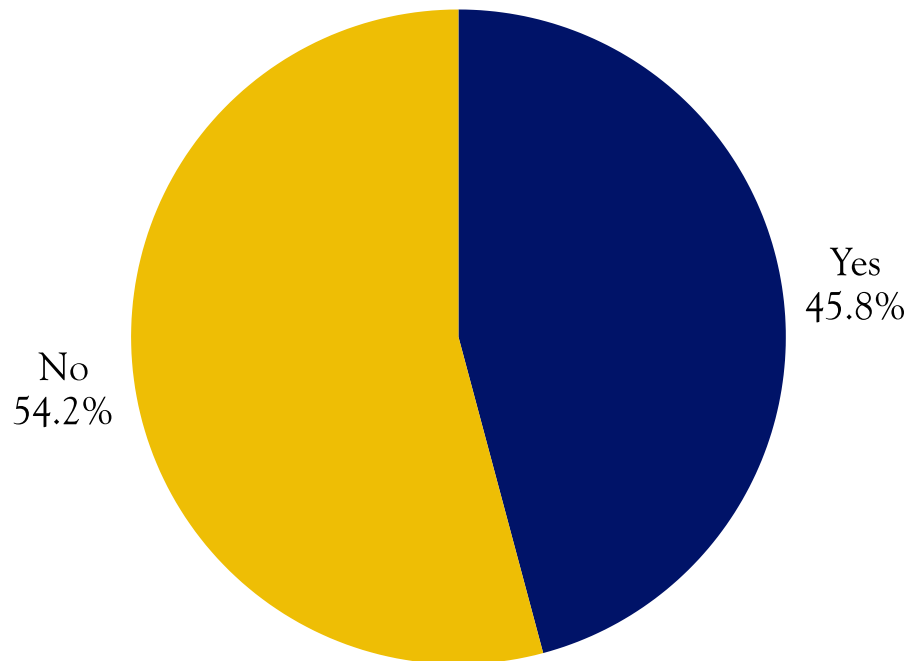


The distribution among child deaths remained consistent in CY24. The majority (40%) were between the ages of 13 to 18; however, children under 12-months increased by 5%. This in part is due to the increase in fetal deaths in CY24. Child deaths between ages 5 and 12 also increased by 11% over the prior year, approx. 30% of these deaths were found to be from congenital or pre-existing medical conditions.

Child (0 to 18) Homicide Deaths

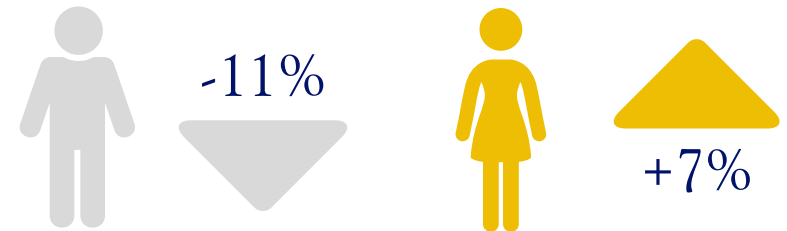
Homicide related deaths accounted for 16% of all child (0 to 18) deaths in CY24, an 18% decline from the previous year.

Injured at Residence



There was a significant increase of 28% in child homicides being injured within their residence from the prior year.

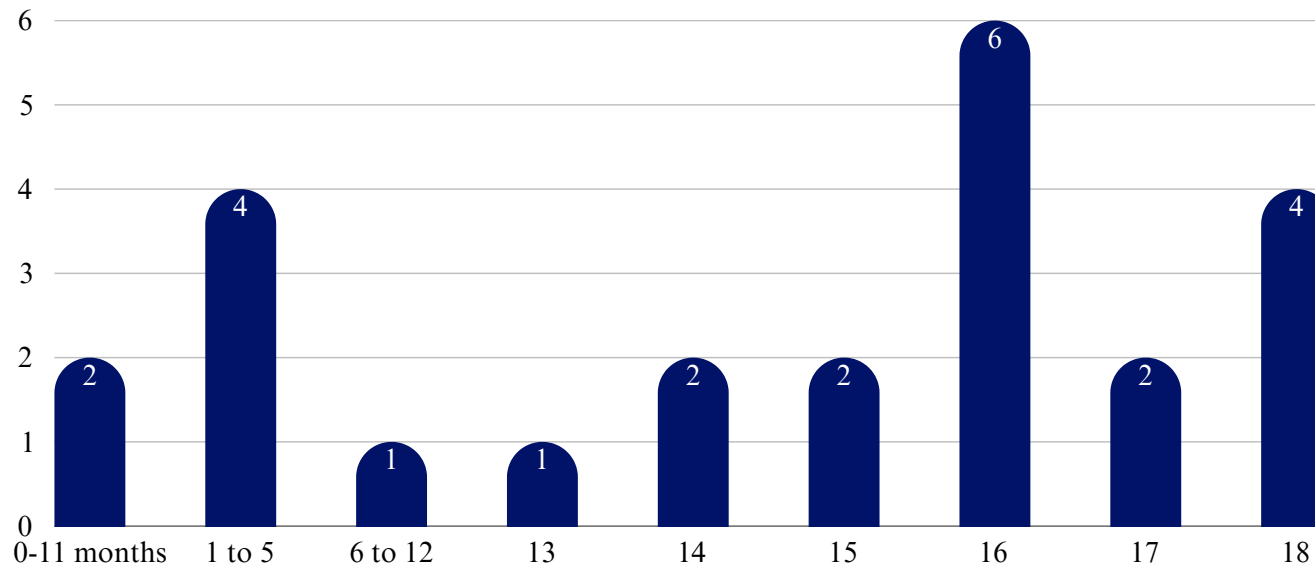
Gender Distribution



Black males (63%) were still the majority of child homicides in CY24, their percentage distribution decreased by 11% while females (33%) increased by 7% from the prior year.

Child (0 to 18) Homicide Deaths

Deaths by Age



The distribution among child homicide deaths remained similar to the prior year, with the age range of 15 to 18 being the most impacted. However, there was a 15% increase in the number of children aged 16 who died as the result of homicide when compared to the prior year, while children aged 17 and 18 declined -7% and -13% (respectively).

Firearm Related

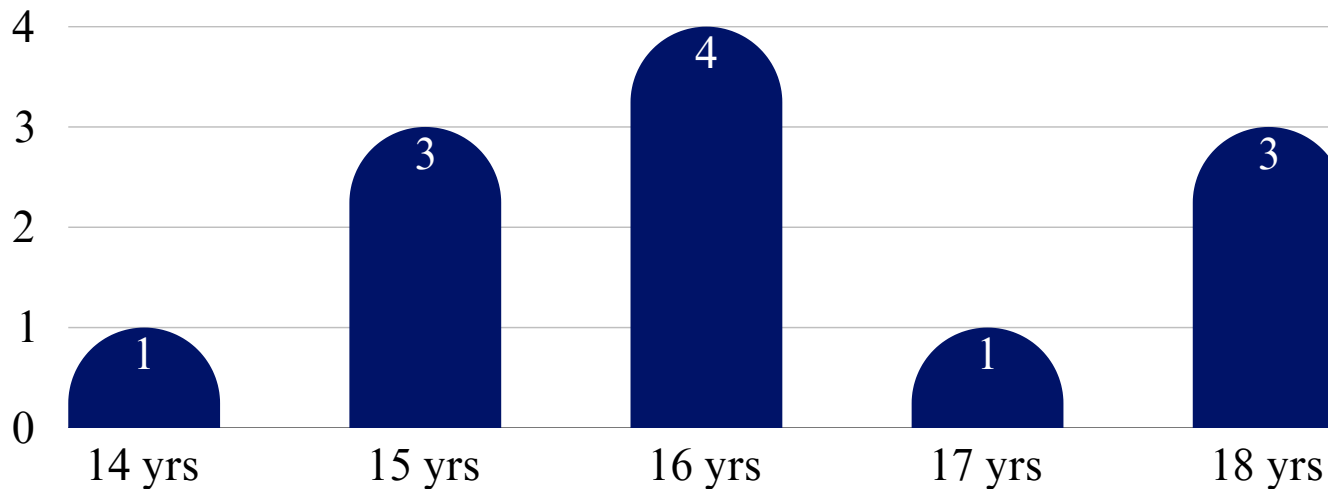
71%

Gunshot related deaths declined by 18% from the prior year but blunt force trauma increased by 11% and abuse increased by 4%.

Child (0 to 18) Suicide Deaths

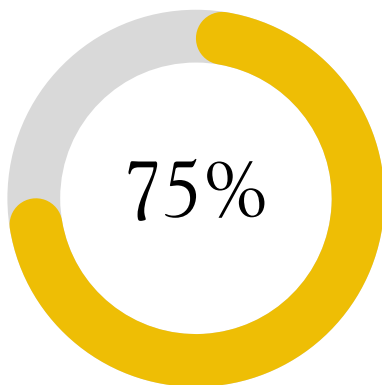
Suicide related deaths accounted for 8% of all child (0 to 18) deaths in CY24, a 3% increase from the prior year.

Deaths by Age



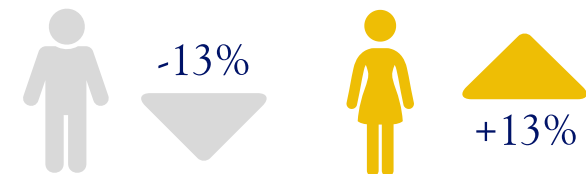
The distribution among child suicide deaths remained consistent with the impacted ages at 14 to 18 years old. There was an increase among 15 (+11%), 16 (+33%) and 18 (+11%) year old compared to the prior year.

Cause of Death



Firearm related suicides remained as the primary cause of death for child suicides in CY 24, accounting for 75% (9) of the total. This is an increase of 18% over the prior year.

Gender & Race Distribution



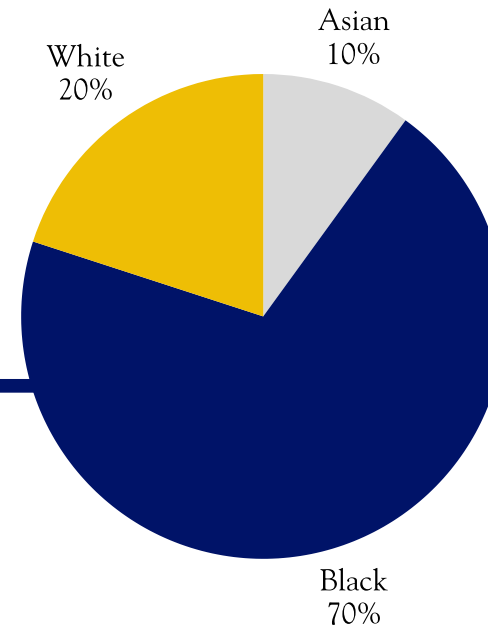
White (83%) males (58%) were still the majority of child suicides in CY24, their percentage distribution decreased by 13% while females (42%) increased by 13% from the prior year.

Child (0 to 18) Overdose Deaths

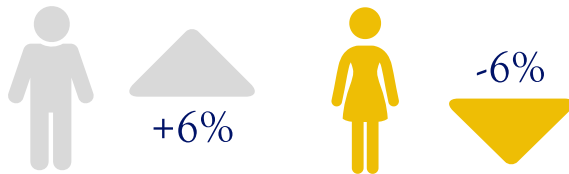
Drug intoxication deaths accounted for 7% of all child (0 to 18) deaths, a 5% decline from the prior year.

Race

There was a significant change in race demographics compared to the prior year. White decedents declined by 53% while Black decedents increased by 43%.

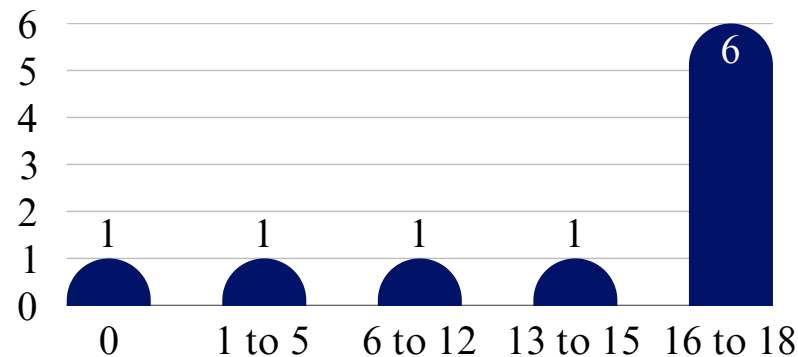


Gender Distribution



Males (70%) were still the majority of child drug intoxication deaths in CY24, their percentage distribution increased by 6% while females (30%) decreased by 6% from the prior year.

Deaths by Age



The distribution among child drug intoxication deaths remained consistent with the impacted ages at 15 to 18 years old (70% of total).

Child (0 to 18) Overdose Deaths

80%

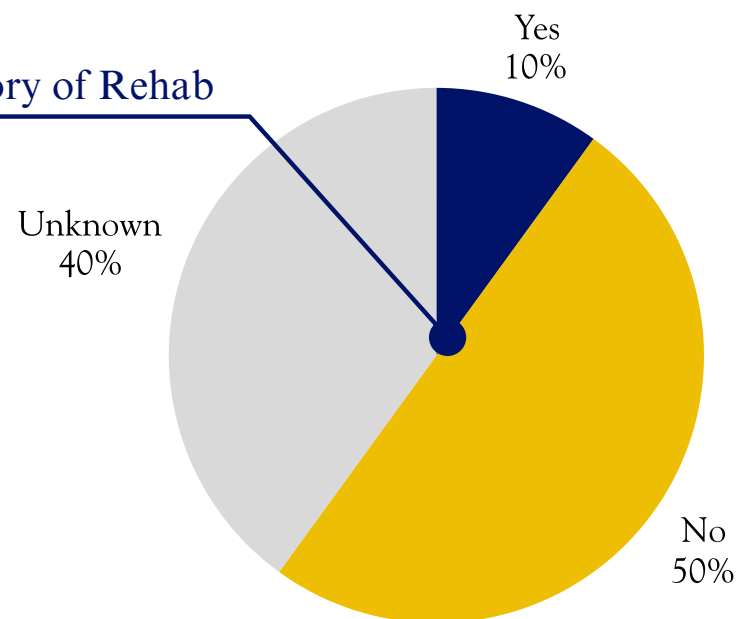
INVOLVE FENTANYL

Of the 10 drug intoxication deaths, eight (8) cases involved Fentanyl. Two cases involved accidental ingestion of substances within the residence.

History of Use

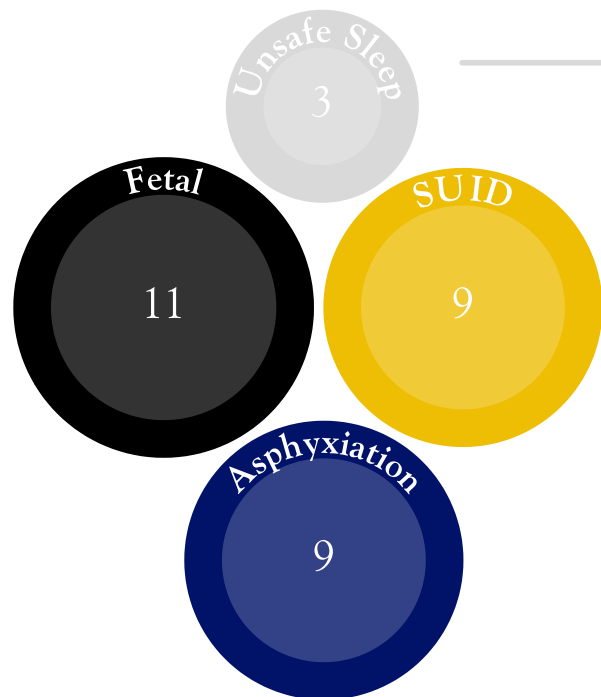
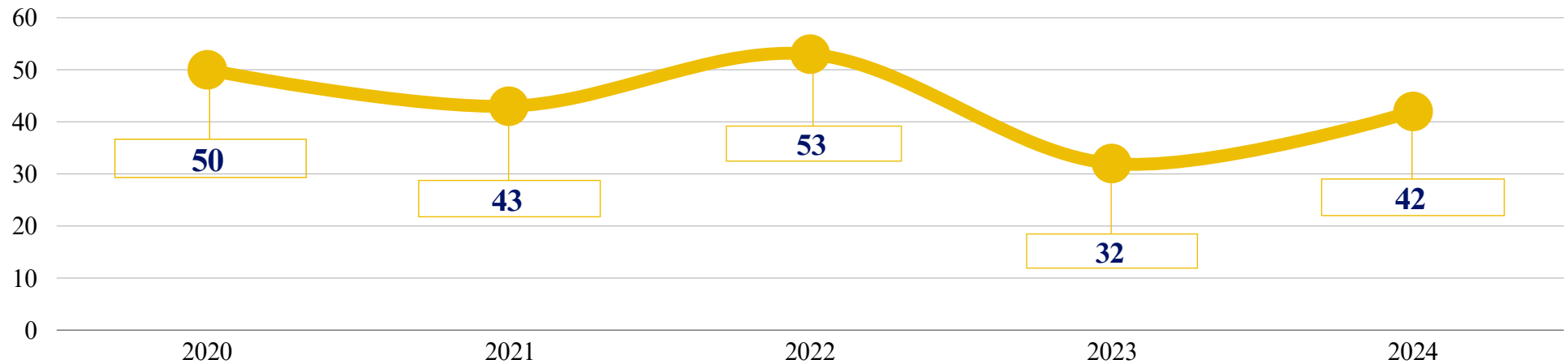
Approx. 60% (6) children were found to have a history of illicit substance use prior to death.

Prior History of Rehab



Child (0 to 18) Infant Deaths

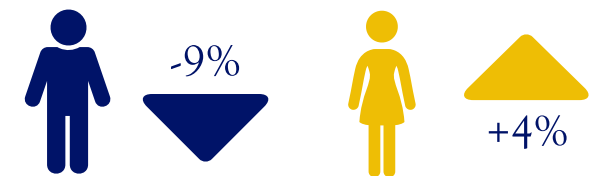
Infant deaths accounted for 27% of all child (0 to 18) deaths in CY24. There was a 31% increase in total number compared to the prior year.



Top Causes of Death

Among infant deaths, Sudden Unexplained Infant Death, Asphyxiation and Unsafe sleep were in the top four, with fetal deaths accounting for the largest percentage (26%). *These are highlighted in more detail on the next page.*

Gender Distribution



Males (57%) were still the majority of infant deaths in CY24, their percentage distribution decreased by 9% while females (38%) increased by 4% from the prior year.

Child (0 to 18) Fetal Deaths

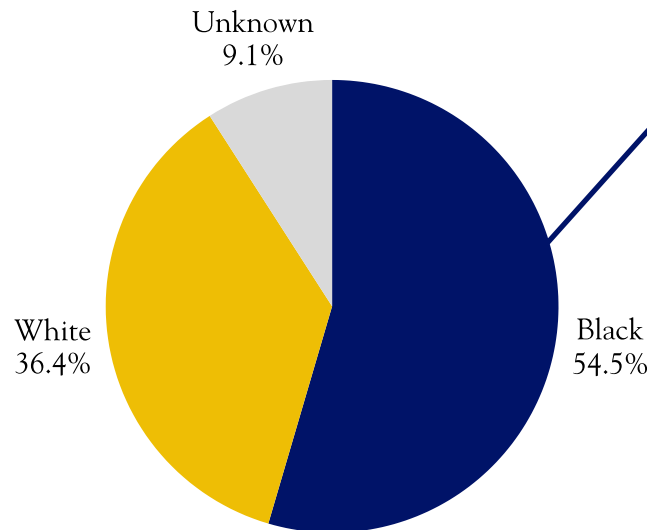
Fetal deaths increased from the prior year by over 400% from the prior year.

Cause of Death	Total	Percentage
Motor Vehicle Accident	3	27%
Maternal Homicide	2	18%
Drug Use by Mother	2	18%
Undetermined	1	9%
Pending Further Investigation	3	27%
Total	11	100%

While MVA related causes result in fetal deaths year over year, the MCCO is seeing a consistent number of fetal deaths due to homicide of the mother or maternal drug use.

81%

Maternal residence within Marion County at time of fetal death.



There is a disproportionate representation of Black decedents among fetal deaths in CY24, suggesting concerns regarding accessible pre-natal care or violence reduction programs.

Drug Intoxication Death Investigations

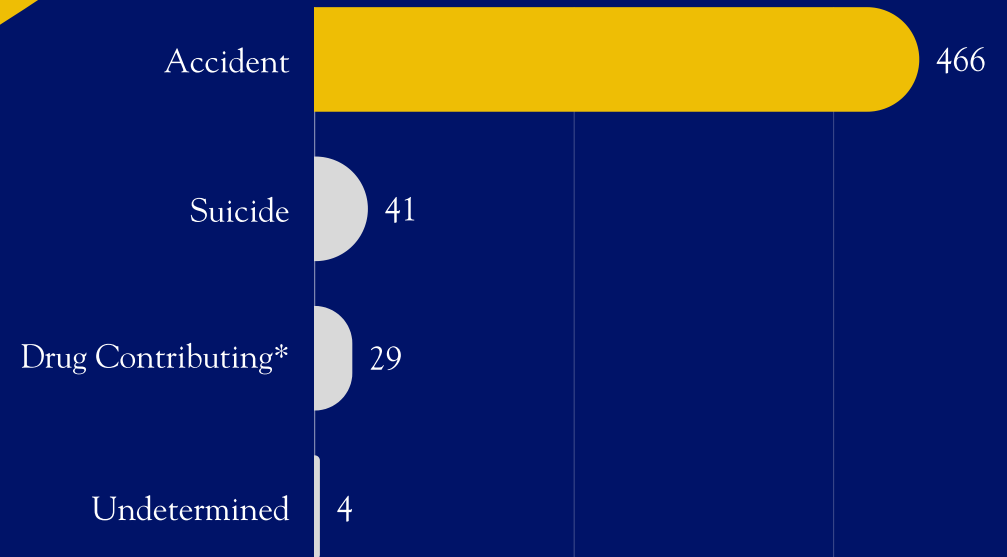
In CY24, the MCCO investigated 509 drug intoxication deaths across all manners, which was a -27% decrease from the year prior.



Fatal drug
intoxication deaths
per day

Declined by .6

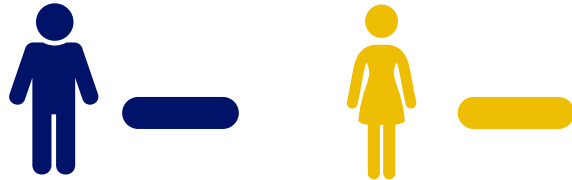
Manner of Death



*Drug contributing is when a positive toxicology result was found to be a significant factor in the death but not the primary cause.

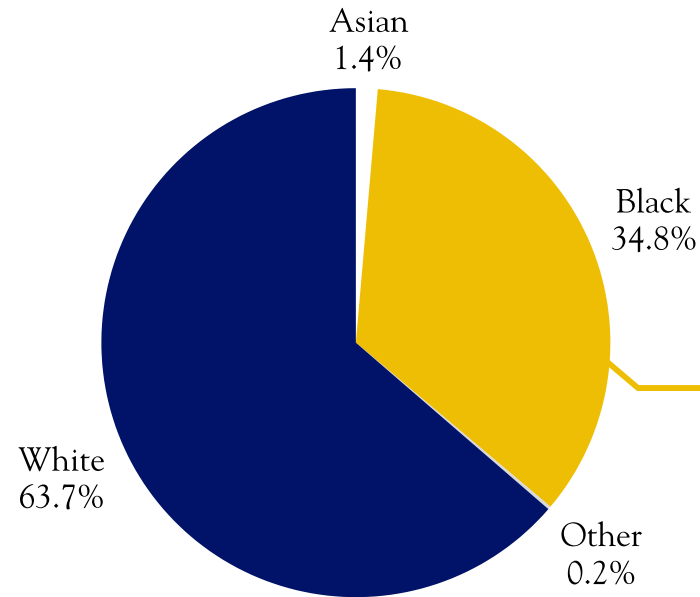
Drug Intoxication Deaths

Gender Distribution



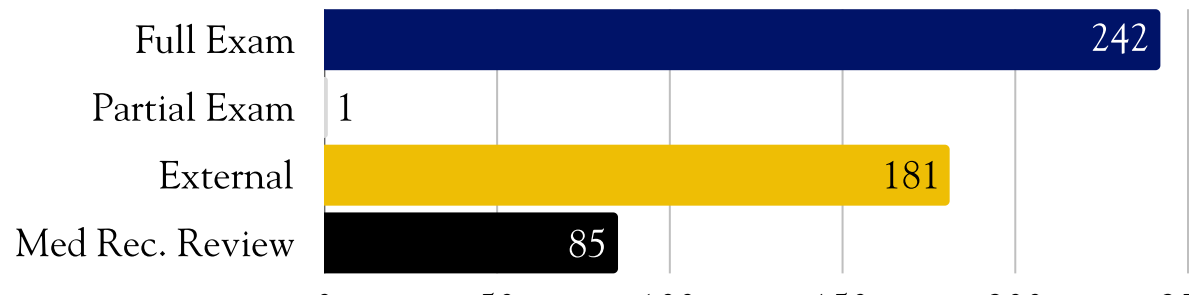
There was no change from the previous year for gender distribution. Males (70%) still represent the majority among drug intoxication deaths.

Race Distribution



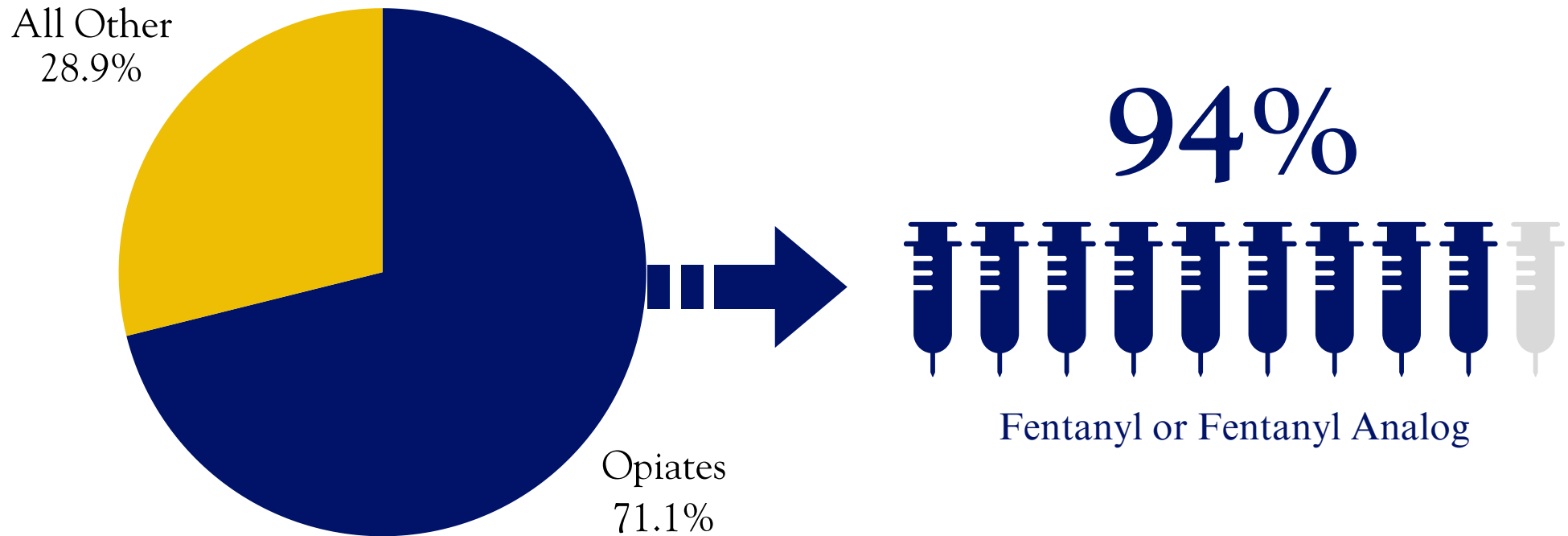
There was a decline among White decedents (-3.3%) while there was an increase among Black decedents (+2.8%).

Exam Type



Full exams declined by -3.3% compared to the prior year. External and medical record review only cases increased by a combined 3.5%.

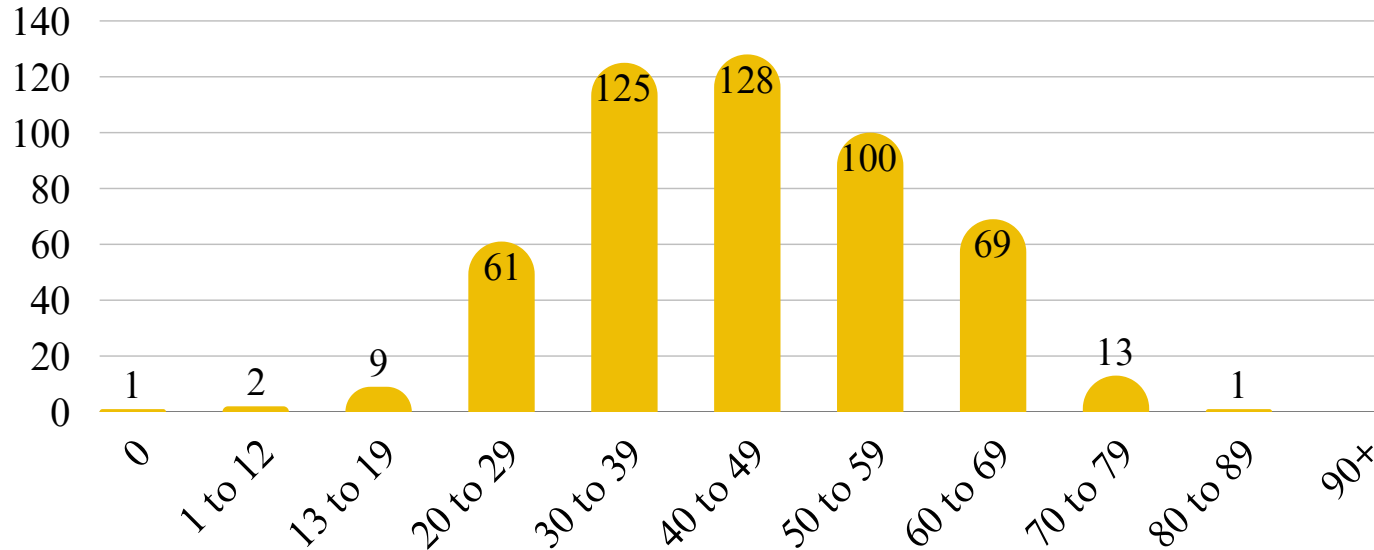
Drug Intoxication Deaths



In CY24, Fentanyl remained (for the 3rd year in a row) as the most prevalent opiate in all toxicology results for both unintentional and intentional drug intoxication deaths. Opiates accounted for 71%, which is a decline of -9% from the prior year. Fentanyl and Fentanyl Analogs declined slightly in their prevalence (-3%).

Drug Intoxication Deaths

Deaths by Age



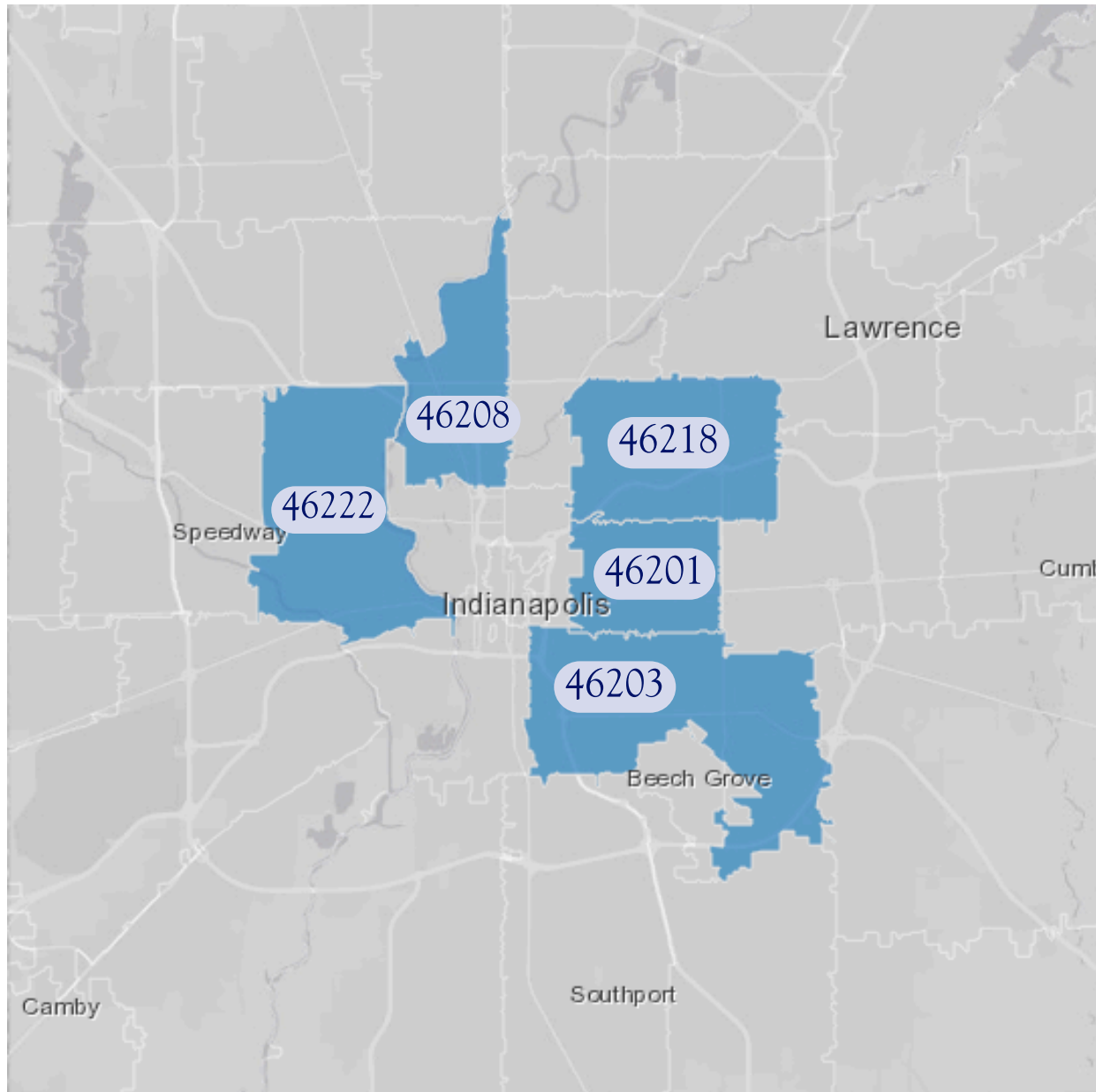
The distribution of ages among drug intoxication deaths remained consistent with prior years. Ages 40 to 49 as the highest at 25.1% of all drug intoxication deaths, followed by 30 to 39 at 24.6%.

History of Illicit Drug Use

Of the 73% of all drug intoxication deaths found to have a history of use, only 21% had a documented history of prior treatment.

73%

2024 Drug Intoxication Deaths by Zip Code



There was a shift in the most impacted zip codes when compared to the prior year. In the prior two years, 46219 had been present in the top zip codes. However, in CY24 it fell out of the top ranking and was replaced by 46208. For three years in a row, 46201, 46203 and 4622 have consistently ranked as the top impacted zip codes within Marion County.

Zip Code	Total Count
46201	56
46218	34
46203	34
46222	29
46208	29
TOTAL	182

Toxicology Results

In CY 24, a total of 1,302 substances were detected in drug intoxication deaths. The MCCO collaborated with the DEA, local law enforcement and local/state health department to monitor trends through the year.

Substance	QTY
1-Difluoroethane	2
4-ANPP	7*~
7-Aminoclonazepam	4
Acetylfentanyl	80*~
Alcohol/Ethanol	89
Amphetamines/ Methamphetamines	192
Antidepressants	1
Benzodiazepine	6
Bromazolam	22
Buprenorphine	1*
Buprenorphine	4*
Bupropion	2
Cannabinoids	6
Carbamazepine	1
Carfentanyl	10*
Chlordiazepoxide	1

Substance	QTY
Citalopram	1
Clonazepam	11
Clonazepam	1
Cocaethylene	6
Cocaine	167
Codeine	1*
Cyclobenzaprine	6
Desalkylidazepam	1
Dextromethorphan	8*
Diazepam	2
Dihydrocodeine	1*
Diphenhydramine	13
Doxepin	1
Doxylamine	2

*Opiate

*~Fentanyl Analog

+Nitazene(s)

++Emerging

Toxicology Results

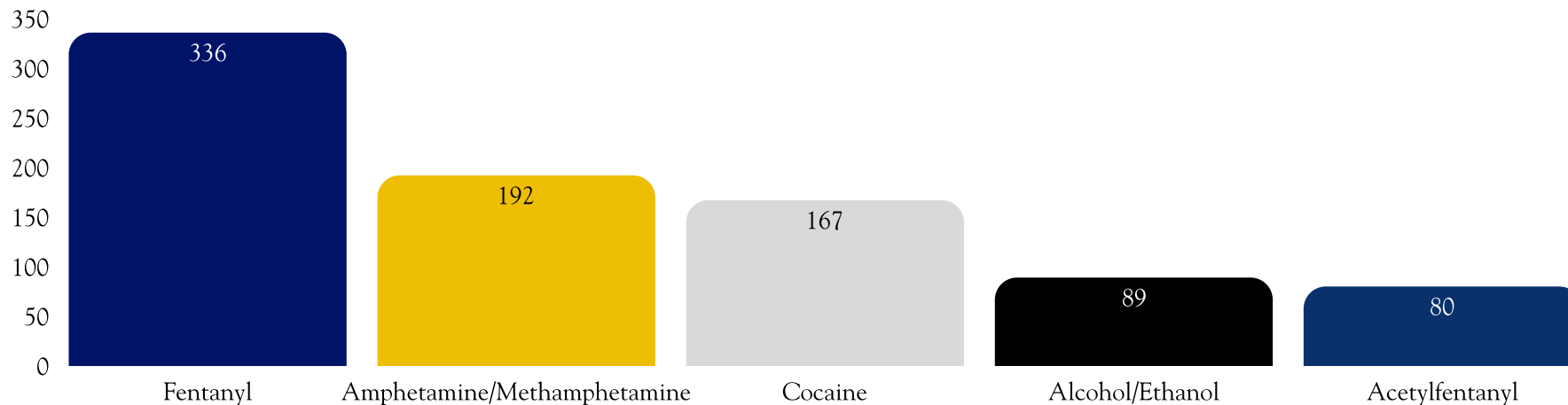
Substance	QTY
Duloxetine	5
Ecstasy	1
Escitalopram	2
Ethylene Glycol	1
Fentanyl	336*
Flecainide	1
Flubromazepam	1
Fluorofentanyl	62*~
Fluoxetine	4
Gabapentin	34
Heroin	2*
Hydrocodone	6*
Hydroxyzine	12
Ketamine	1
Lacosamide	1
Levetiracetam	1
Levomethorphan	5*
Loperamide	1*
Lorazepam	2

Substance	QTY
MDMB-4en-PINACA	11
Methadone	17*
Metoprolol	2
Mirtazapine	1
Mitragynine (Kratom)	6++
Morphine	10*
Naproxen	1
Norfentanyl	10*~
N-Pyrrolidino Etonitazene	1+
O-Desmethyltramadol	1*
Olanzapine	3
Opioid	4*
Oxcarbazepine	1
Oxycodone	14*
Paroxetine	1
Phenacetin	1
Phencyclidine	1
Phentermine	1
Pregabalin	2

Substance	QTY
Promethazine	4
Protonitazene	1+
Pseudoephedrine	1
Quetiapine	3
Risperidone	1
Sertraline	5
THC	1
Thioridazine	1
Topiramate	3
Tramadol	1*
Trazodone	7
Venlafaxine	1
Xylazine	43
Ziprasidone	1
Zolpidem	1

Toxicology Results

The top five substances have not changed in three years; however, there have been fluctuations among their prevalence of toxicology findings. Fentanyl declined by 3%, Acetylfentanyl declined by 4% and Alcohol/Ethanol declined by 1%. Amphetamines/Methamphetamines increased by 2% and Cocaine increased by 3%. These top five substances accounted for 66% of the total quantity of substances found.



Emerging Trend

Kratom

Herbal substance which can produce effects similar to opioids.

Emerging trends refer to a new pattern or a shift which gains momentum. In Marion County, Kratom specifically has not been identified within toxicology finds in the last three years. This is cause for concern as the substance is not regulated by the FDA nor is it classified as a controlled substance. The National Institute of Health has identified Kratom as a concerning substance which may have addictive properties when used as a substitute for opioids.

Unhoused Person(s)

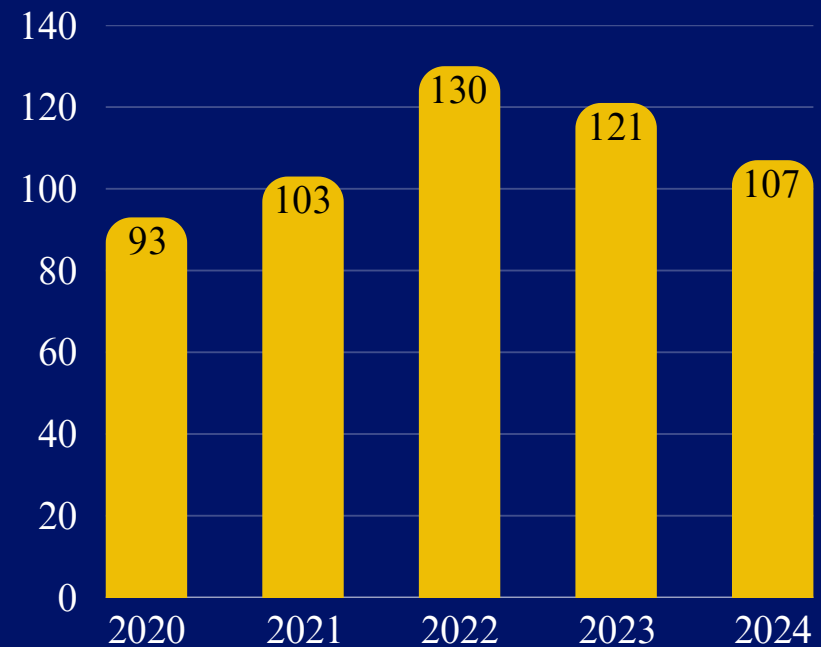
MCCO continued to monitor and analyze the deaths of those who were found or reported as unhoused at time of death.

Classification Criteria

True/Confirmed: documented, observed or verbally confirmation of unhoused status.

Partial: residing at or confirmed to be in transitional housing, i.e. shelter, treatment, incarcerated, etc.

In CY24, unhoused decedents declined by 12% from the previous year. The total number within the year has not fallen below pre-pandemic numbers.

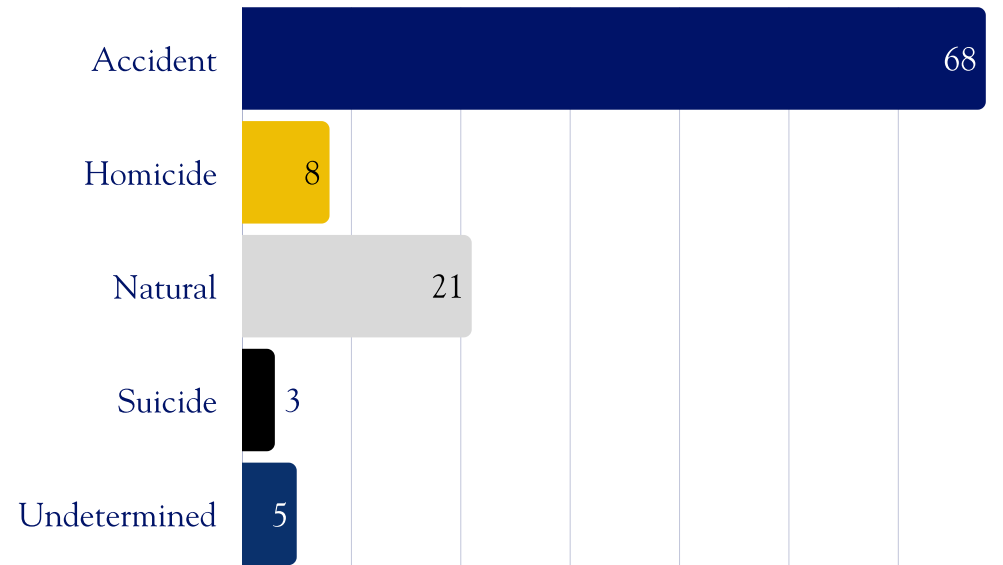


Unhoused Person(s) Deaths

Gender Distribution

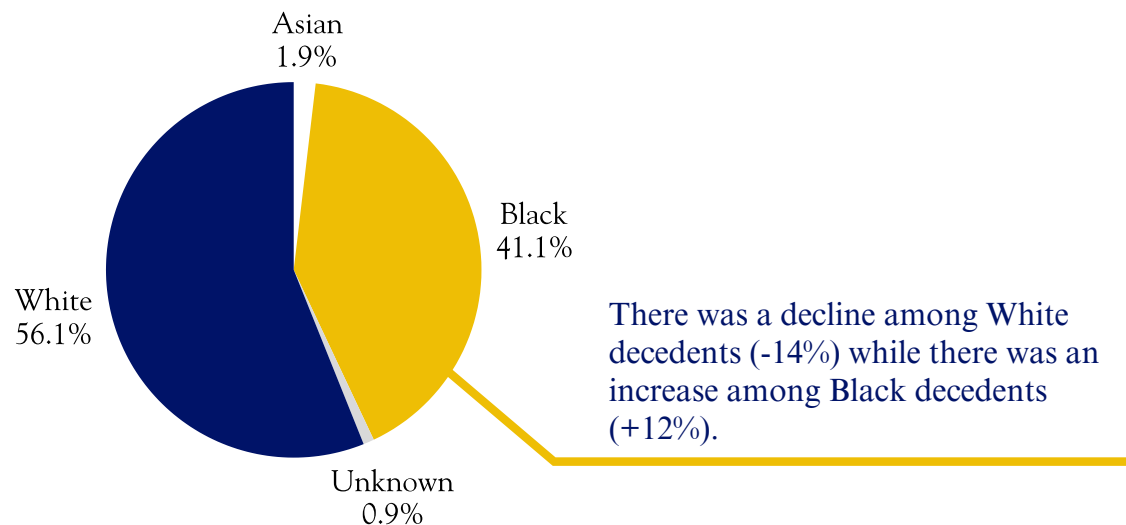


While males (67%) were still the majority of decedents in CY24, their percentage distribution decreased by 8% while females (33%) increased by 8% from the prior year.

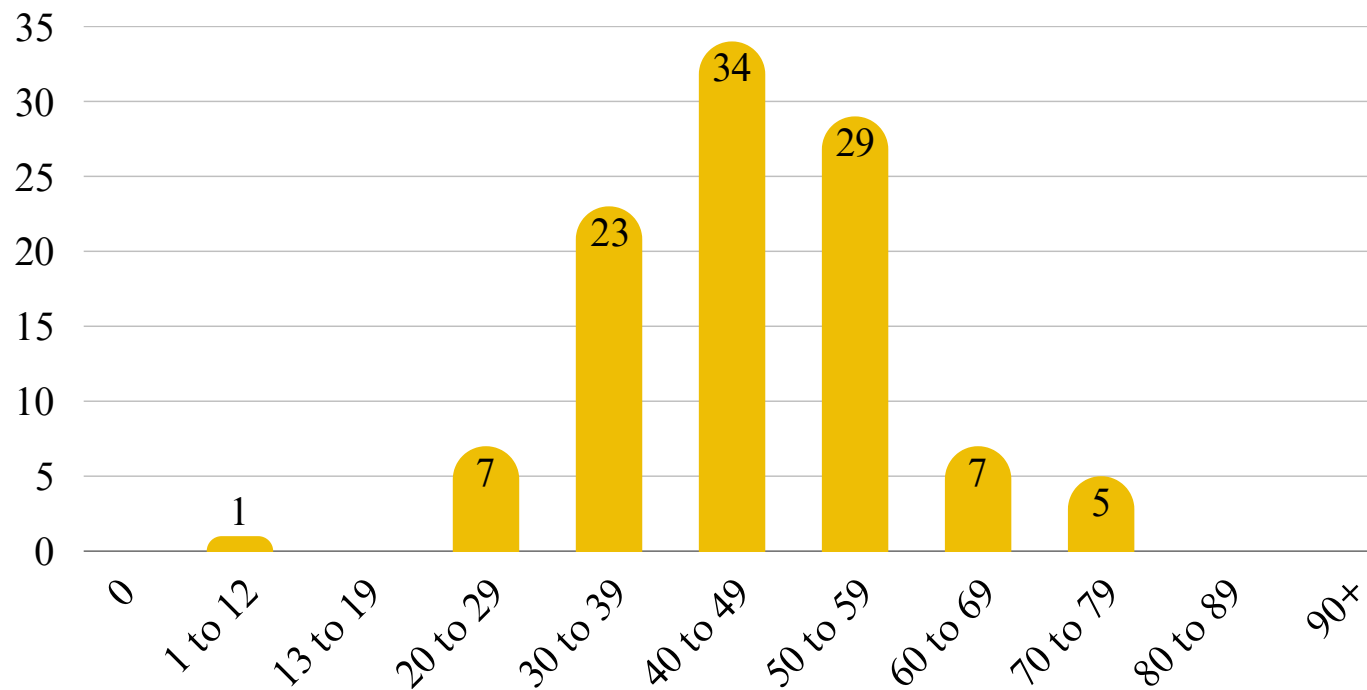


The distribution among manners remained consistent from the prior year with Accidental deaths being the majority followed by Naturals.

Race Distribution



Unhoused Person(s) Deaths



Deaths by Age

The distribution of ages among unhoused decedents shifted in CY24, with the 40 to 49 age group becoming the most impacted. There was one (1) where age was unable to be determined.

In CY24, we identified better data entry methods for documenting the housing status for decedents. In CY25 through CY26, we plan to add data fields to our database to allow for more consistent classification for the unhoused status of decedents.

Unhoused Person(s) Deaths: Accidental

For deaths among unhoused person(s) in CY24, accidental causes accounted for 64% of the total. The race and gender distribution of accidental deaths among unhoused person(s) is similar to all accidental deaths: White (56%) males (67%) were the majority with the 40 to 49 age group being the most impacted.

Cause of Death	Total
Drug Intoxication	53
Blunt/Sharp Force Trauma	7
Drug Use Contributing	4
Environmental/Exposure	1
Asphyxia	1
Drowning	1
Other	1
Total	68

In CY24, 50% of all unhoused person(s) deaths were the result of drug intoxication. Of the 53 drug intoxication deaths, 87% had a past history of illicit drug use, while only 21% had a history of prior history of rehabilitative treatment.

Blunt/Sharp Force injuries among unhoused person(s) deaths accounted for 10% of the total accidental rulings. However, 83% of those were the result of pedestrian versus motor vehicle. For the 2nd year in a row, this high percentage would indicate that unhoused person(s) are at significant risk as pedestrian travelers along roadways.

Unhoused Person(s) Deaths: Homicide

For deaths among unhoused person(s) in CY24, homicide accounted for 8% of the total. The race and gender distribution of homicide deaths among unhoused person(s) is similar to all homicide deaths: Black (63%) males (75%) were the majority; however, among unhoused person(s) the age group is older than all homicides with 40 to 49 as the most impacted.



100%


All homicide deaths among unhoused person(s) were the result of gunshot wounds in CY24.



34%

The highest number of incidents occurred in January.

Incident Type



The most significant incident type in CY24 was an unwitnessed event at 88% of the total, similar to prior years. The second most prevalent (13%) involved trespassing.

Years of Service Recognition

40
YEARS

Marchele Hall

Admin. of Finance &
Operations
47 years

30
YEARS

Connie Fulp

Administrative Clerk
35 years

20
YEARS

Dave Grannan

Deputy Coroner
29 years

Michele Kratz

Admin. of Investigations
25 years

10
YEARS

Dominique Battles

Admin. of Pathology
19 years

Wilma Owens-Lacefield

Sen. Medical Transcriptionist
19 years

Amanda Wells

Operations Manager
19 years

Michael Battee

Autopsy Technician
14 years

Mallory Malczewski

CFO & IT
13 years

5 years

Jennifer Suarez - Quality Assurance Deputy (9 years)

Rebecca Rico - Training and Education Coordinator (7 years)

Acknowledgments

The Marion County Coroner's Office extends heartfelt gratitude to the dedicated team members, forensic pathologists, investigators, administrative professionals, and community partners whose unwavering commitment makes our work possible. Each agency professional plays a critical role in ensuring that we collect accurate data, every case, every time to make the Annual Reports possible.

*I would like to express a special thank you to **Mallory Malczewski**, our Chief Financial Officer and IT Coordinator, for her tireless work in managing the data system, enhancing data efficiency, and ensuring the integrity of our technology infrastructure. Her attention to detail has been instrumental in supporting both our internal processes and our ability to share this very valuable information.*

I also appreciate our collaborative partners across public health, law enforcement, emergency services, and funeral care. Your support and coordination are vital to delivering timely and thorough investigations with dignity and respect.

This report reflects the collective dedication of a team committed to truth, service, and community. Thank you for being an essential part of our continued progress.

Alfarena T. McGinty

Alfarena T. McGinty, MBA
Marion County Coroner

End of Report



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