



Office of the Chief Medical Examiner Annual Report 2024

VDH VIRGINIA
DEPARTMENT
OF HEALTH

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Executive Summary

The Virginia Office of the Chief Medical Examiner (OCME) is proud to release the 2024 Annual Report. Although this report was scaled down substantially from previous annual reports, the contents within this report meet or exceed the accreditation metrics required by the National Association of Medical Examiners (NAME).

Some of the notable trends in 2024 include:

- The total number of cases accepted under OCME jurisdiction (n=8,206) decreased 9.7% from 2023 (n=9,085) and represented 10.7% of all deaths that occurred in Virginia for the year.
- The Central OCME District remained the busiest OCME district in 2024, accounting for 31.0% of all accepted cases and conducting both the largest number of autopsies and external exams compared to the other three OCME offices.
- Accidents represented the largest portion of cases (50.3%), followed by natural deaths under OCME jurisdiction (26.6%), suicides (14.8%), homicides (6.0%), and undetermined manners (2.3%).
- Fatal drug overdoses (20.6%), gun-related deaths (14.4%), and motor vehicle fatalities (11.9%) were the top three leading methods of death in Virginia in 2024 as well as over the last ten years (2015-2024).
- The three most common cause and manners of death in 2024 were accidental blunt force trauma (26.2%), accidental drug overdose (19.1%), and natural cardiovascular diseases/disorders (18.6%).

Office of the Chief Medical Examiner

Annual Report 2024

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Introduction

This report represents the deaths investigated by the Virginia Department of Health (VDH), OCME in 2024 with some trends covering the last ten years (2015 – 2024). Data is based upon both Virginia residents and non-Virginia residents that died in Virginia, whose deaths have come under the jurisdiction of the Virginia OCME.

About the Office of the Chief Medical Examiner

The OCME is a model statewide death investigation system with four district offices regionalized across the state and fulfills a core function mandated by Code of Virginia, § 32.1-283. When deaths are reported to one of the four district OCME offices, the case information is entered into the Virginia OCME database, Moon, and is managed through this statewide data system allowing for consistent, reliable data that can be reviewed, interpreted, and reported upon.

Jurisdictional Authority

Pursuant to § 32.1-283 of the Code of Virginia, the following deaths are investigated by the OCME:

- Any death from trauma, injury, violence, or poisoning attributable to accident, suicide or homicide
- Sudden deaths of persons in apparent good health and deaths unattended by a physician
- Deaths of persons in jail, prison, or other correctional institutions, as well as deaths in police custody. This includes deaths during legal intervention such as a death following a police pursuit
- Deaths of patients/residents of state mental health facilities
- Sudden death of any infant less than eighteen months of age whose death might be attributable to sudden infant death syndrome (SIDS)
- Any other suspicious, unusual, or unnatural death

Changes From Previous Annual Reports

Virginia OCME migrated to a new database, Moon, in spring 2026. Information in this new database is housed differently and therefore, previous analytical methodology developed to report out statistics required revision to reflect changes within Moon. This report was developed utilizing revised methodology similar to previous reports.

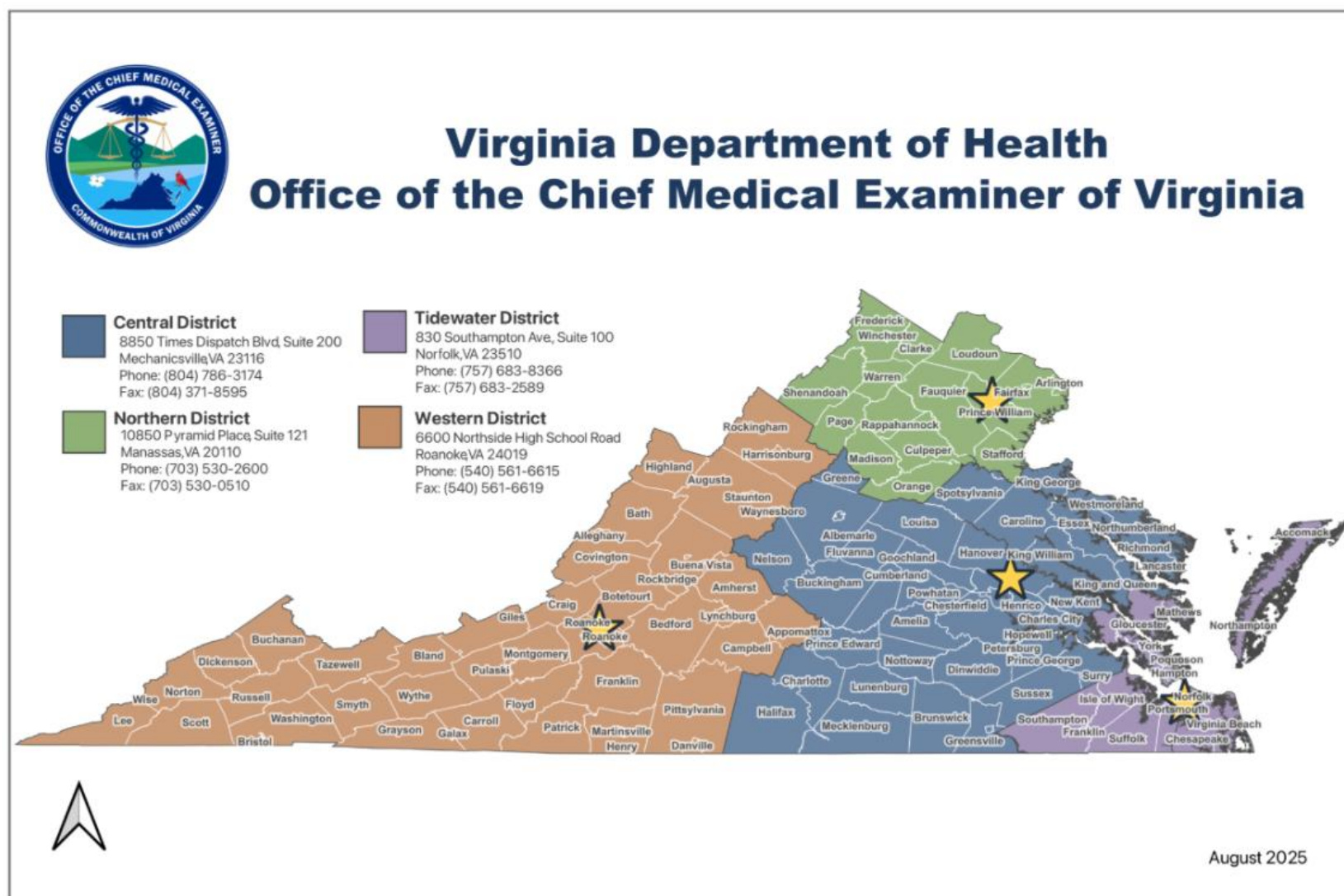
Additionally, the OCME database migration in 2026 provided an opportune time to transition previously printed/paper reports into interactive dashboards that will present even more granularity

and detail for readers. Therefore, this Annual Report for 2024 and next year's Annual Report for 2025 will specifically outline NAME metrics required for accreditation as Virginia OCME staff build, validate, and transition data outputs to electronic reporting and interactive dashboards for the public in the coming year. These Annual Reports for 2024 and 2025 will outline all of the metrics required by the NAME Checklist.

Link:<https://name.memberclicks.net/assets/docs/NAME%20Accreditation%20Checklist%202024%20-%20202029%20-%2024-21-2026.pdf> ; A.9. Annual Report starting on page 5.

Ad-hoc requests for OCME data can still be fulfilled by reaching out to the OCME district office (<https://www.vdh.virginia.gov/medical-examiner/district-offices-contact-us/>).

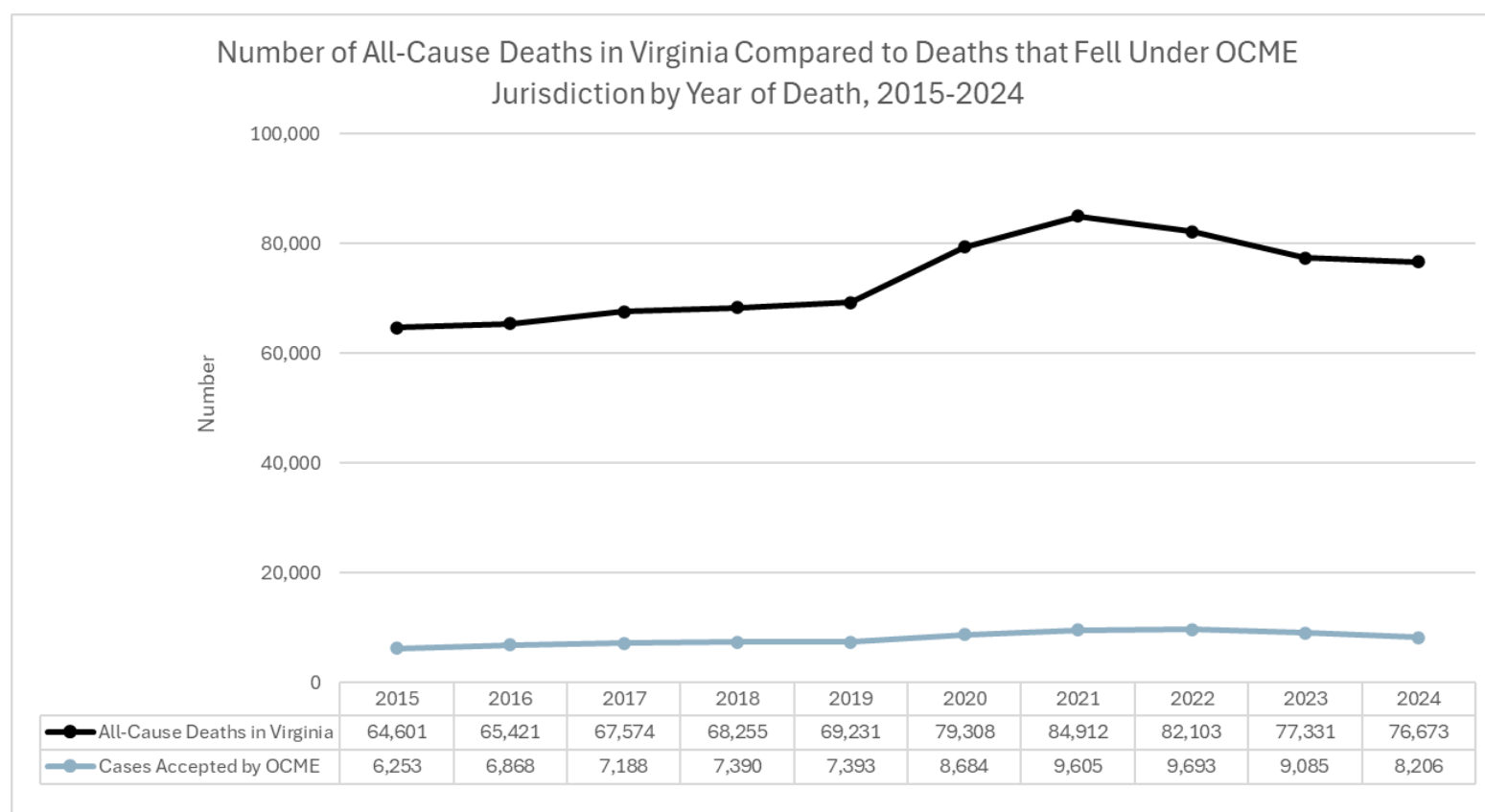
OCME Regions and District Offices



Graph 1. Number of All-Cause Deaths in Virginia Compared to Deaths that Fell Under OCME Jurisdiction by Year of Death, 2015-2024

The VDH, Office of Vital Records (OVR), manages all death certificates filed in the state of Virginia. For deaths that do not fall under OCME jurisdiction, the physician in charge of the patient's care for the illness or condition which resulted in death is primarily responsible for completing the death certificate. For deaths that fall under OCME jurisdiction, the OCME is responsible for determining the cause and manner of death and completing the death certificate.

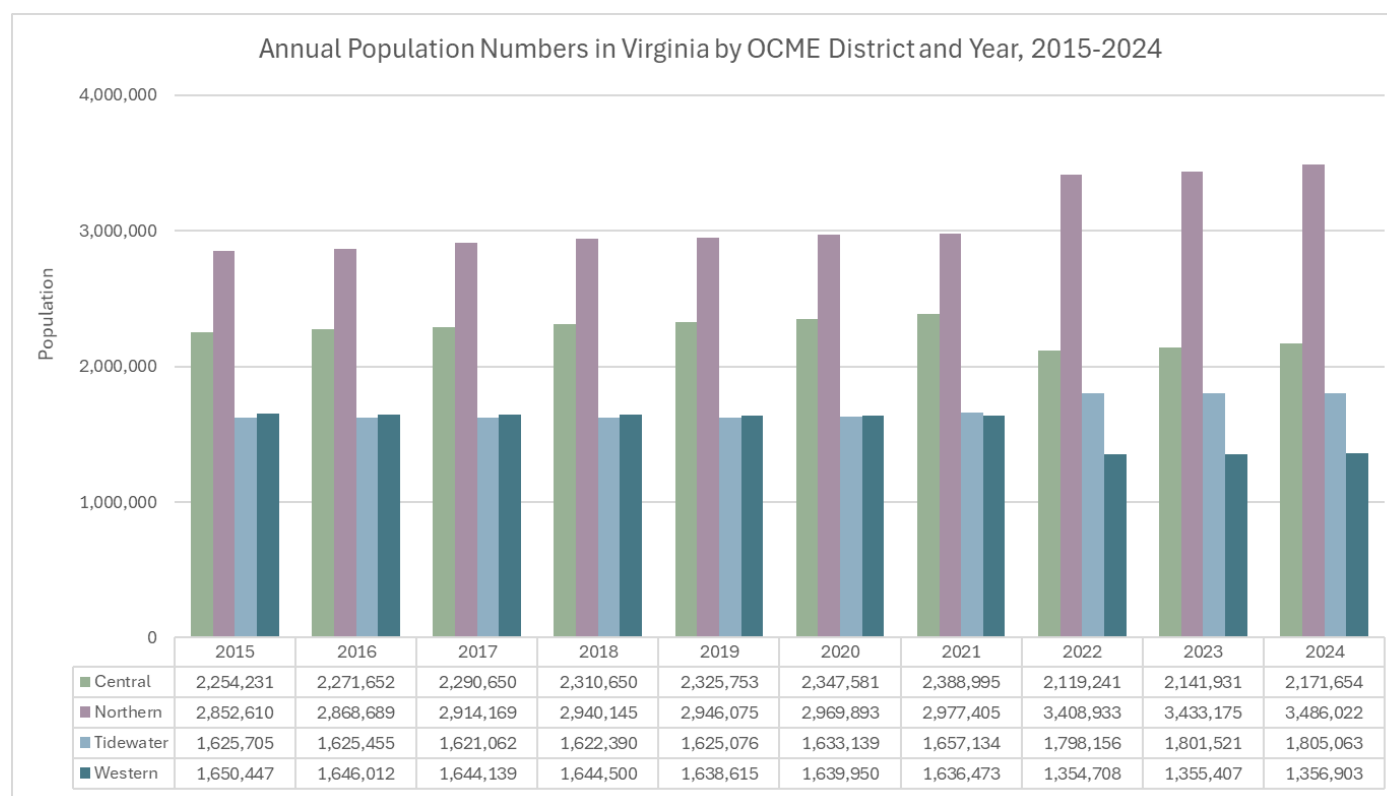
Annually, the OCME accepts roughly 10% of the deaths that occur in Virginia per year. The other 90% of deaths that do not fall under OCME jurisdiction are natural deaths. In 2024, the OCME accepted 8,206 of the 76,673 deaths (10.9%) that occurred in the state.



Graph 2. Virginia Population by OCME District, 2015-2024

The Virginia OCME is a statewide medical examiner system comprised of four regionalized district offices (see page 5). Population density, the geographical area covered, caseload, and staffing are all factors taken into account when assessing which Virginia localities would be served by which OCME office. These factors were reviewed in 2022 and some localities were redistricted.

Population is a very important metric that is not only utilized for assisting in OCME district divisions, but also for denominator values in rate per capita calculations, among many others. From 2007 to 2020, Bridged-Race Population Estimates from the National Center for Health Statistics were used for population estimates; however, these estimates were discontinued in 2020. From 2021 forward, population estimates were calculated using Single-Race Population Estimates from the US Census. These population estimates were stratified by OCME district (locality and year), including the redistricting update in 2022, to aggregate annual population totals.



Graph 3. Number of OCME Cases by Case Type and Year of Death, 2015-2024

Since 2020, slightly under twenty-thousand deaths were reported to the OCME each year. Roughly half of those deaths were investigated and deemed to be turn down cases as they do not meet Code of Virginia to become an OCME case. Among deaths accepted as OCME cases, about one-third of cases were autopsied and two-third received an external exam. Retrospective cases, or retros, are not included in the accepted total case counts. Retrospective cases are deaths that are not reported to the OCME at the time of death but are discovered upon later review and are therefore investigated by the OCME retrospectively.

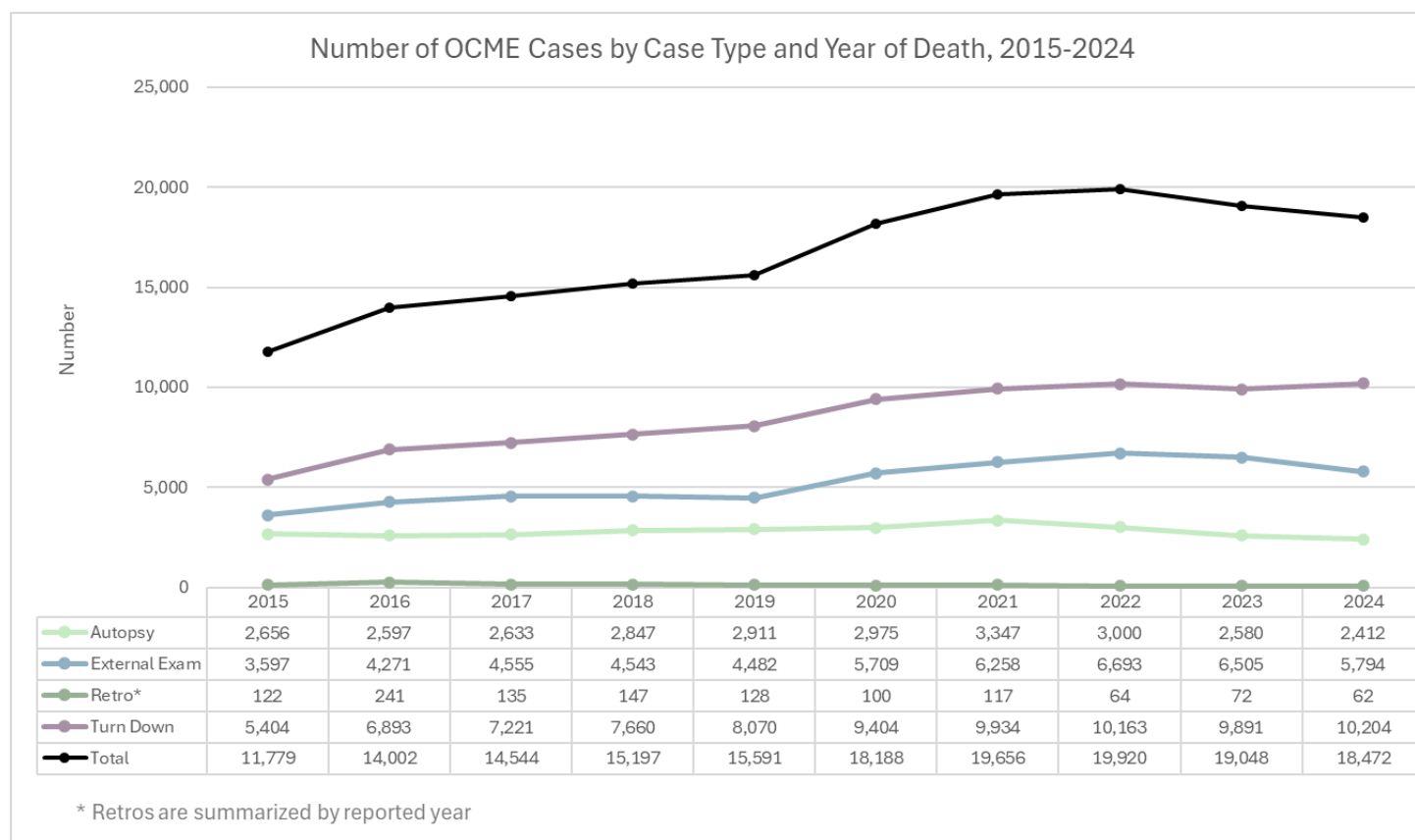


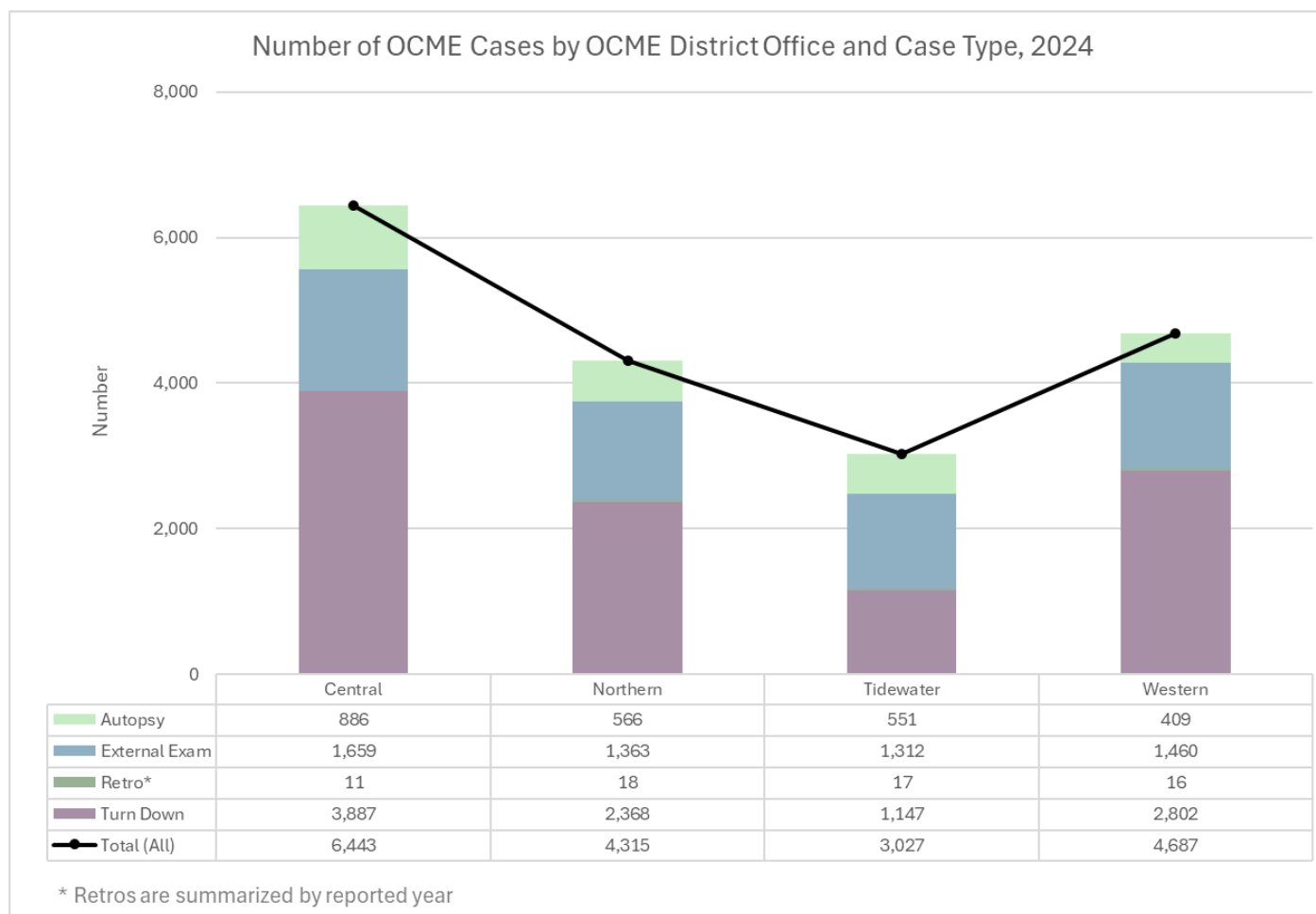
Table 1. Number of OCME Cases by OCME District and Case Type, 2024

Similar to previous years, the Central OCME District investigated the largest number of cases out of the four district offices in the state. Central District had the largest number of autopsies, external exams, and turn down cases in 2024.

OCME District	Autopsy	External Exam	Retro*	Turn Down	Total Accepted (Autopsy and External Exam)	Total (All)
Central	886	1,659	11	3,887	2,545	6,443
Northern	566	1,363	18	2,368	1,929	4,315
Tidewater	551	1,312	17	1,147	1,863	3,027
Western	409	1,460	16	2,802	1,869	4,687
Total	2,412	5,794	62	10,204	8,206	18,472

* Retros are summarized by reported year

Graph 4. Number of OCME Cases by OCME District and Case Type, 2024



Graph 5. Number of OCME Cases by Manner and Year of Death, 2015-2024

Although the number of accidental deaths began to decline in Virginia in 2024, due mostly to the substantial decrease in fatal drug overdoses, accidents continue to be the most common manner of death among OCME cases (50.3%). Next were natural deaths under OCME jurisdiction (26.6%), suicides (14.8%), homicides (6.0%), and undetermined manners (2.3%). Fetal deaths are not given certificates of live birth and thus, are omitted from manner of death classifications. The OCME took jurisdiction of five fetal deaths in 2024 out of the 3,493 reported to OVR.

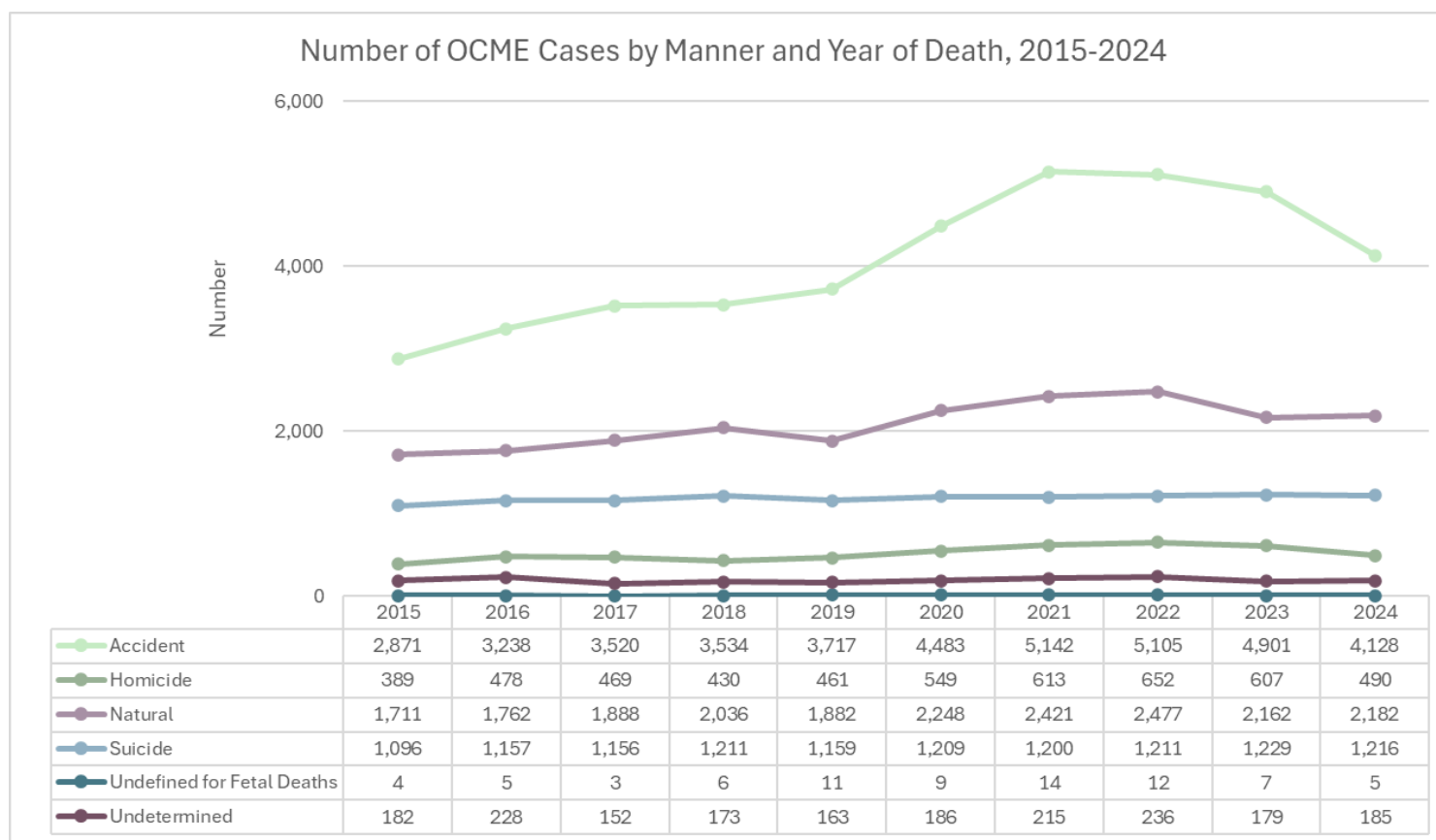


Table 2. Number of OCME Cases by OCME District, Manner of Death, and Case Type, 2024

In 2024 statewide, 29.4% of OCME cases (n=2,412) received an autopsy and 70.6% cases (n=5,794) received an external exam. The Central OCME District had the largest number of autopsies (n=886) and external exams (n=1,659).

When comparing manners of deaths, the Central OCME District had the largest number of accidents (n=1,319) and came in a close second with the Tidewater OCME District (n=174) with the largest number of homicides (n=168). The Northern OCME District had the largest number of suicides (n=355) and the Central OCME District coming in a very close second (n=330).

OCME District	Manner of Death	Autopsy	External Exam	Total
Central	Accident	234	1,085	1,319
	Homicide	168	0	168
	Natural	165	500	665
	Suicide	256	74	330
	Undefined for Fetal Deaths	0	0	0
	Undetermined	63	0	63
	Total	886	1,659	2,545
Northern	Accident	167	763	930
	Homicide	69	1	70
	Natural	131	400	531
	Suicide	156	199	355
	Undefined for Fetal Deaths	2	0	2
	Undetermined	41	0	41
	Total	566	1,363	1,929
Tidewater	Accident	118	741	859
	Homicide	172	2	174
	Natural	87	449	536
	Suicide	130	120	250
	Undefined for Fetal Deaths	0	0	0
	Undetermined	44	0	44
	Total	551	1,312	1,863
Western	Accident	126	894	1,020
	Homicide	78	0	78
	Natural	64	386	450
	Suicide	103	178	281
	Undefined for Fetal Deaths	3	0	3
	Undetermined	35	2	37
	Total	409	1,460	1,869

Total	Accident	645	3,483	4,128
	Homicide	487	3	490
	Natural	447	1,735	2,182
	Suicide	645	571	1,216
	Undefined for Fetal Deaths	5	0	5
	Undetermined	183	2	185
	Total	2,412	5,794	8,206

Table 3. Number of Accidental Deaths by Drug Overdose, Motor Vehicle-Related, and All Others (Grouped) by OCME District and Case Type, 2024

One metric required for NAME accreditation includes the stratification of accidental manner of death by drug overdose, motor vehicle-related death, and all others by case type.

Cause/Method of Death	Central OCME			Northern OCME			Tidewater OCME			Western OCME			Total		
	Autopsy	External Exam	Total	Autopsy	External Exam	Total	Autopsy	External Exam	Total	Autopsy	External Exam	Total	Autopsy	External Exam	Total
Accident; Drug Overdose	128	369	497	77	240	317	29	327	356	52	342	394	286	1,278	1,564
Accident; Motor Vehicle-Related	31	346	377	20	224	244	11	79	90	29	224	253	91	873	964
Accident; All Others (Not Drug or Motor Vehicle-Related)	75	370	445	70	299	399	78	335	413	45	328	373	268	1,332	1,600
Total Accidents	234	1,085	1,319	167	763	960	118	741	859	126	894	1,020	645	3,483	4,128

Table 4. Number of OCME Cases by Grouped Cause and Manner of Death, 2024

The OCME utilizes an internal coding schema to classify, aggregate, and report upon cause and manner of death. This schema was developed by the Virginia OCME and is different from other national coding schemas like ICD-10 codes utilized by death certificate data analysis and reporting. The three most common cause and manners of death in 2024 were accidental blunt force trauma (26.2%), accidental drug overdose (19.1%), and natural cardiovascular diseases/disorders (18.6%).

Grouped Cause of Death	Accident	Homicide	Natural	Suicide	Undefined for Fetal Deaths	Undetermined	Total
Asphyxia (Various)	188	12	0	279	0	8	487
Blunt Force Trauma	2,153	25	0	39	0	10	2,227
Cardiovascular Diseases/Disorders	0	0	1,529	0	0	0	1,529
Central Nervous System Diseases/Disorders	0	0	86	0	0	3	89
Drug Overdose	1,564	3	0	117	0	8	1,692
Electrocution	5	0	0	0	0	0	5
Environmental Exposure	33	0	0	0	0	0	33
Fire/Inhalation Injuries	93	1	0	4	0	1	99
Gastrointestinal Diseases/Disorders	0	0	70	0	0	2	72
Genitourinal Diseases/Disorders	0	0	15	0	0	0	15
Gunshot Wound	9	418	0	746	0	9	1,182
Other Natural Diseases/Disorders	0	0	27	0	0	0	27
Other Unnatural	80	4	0	1	0	0	85
Perinatal and Pediatric Diseases/Disorders	0	0	1	0	2	0	3
Pulmonary Diseases/Disorders	0	0	138	0	0	2	140
Sharp Force Injuries	3	26	0	29	0	2	60
Systemic Diseases/Disorders	0	0	314	0	0	1	315
Undetermined	0	1	2	1	3	139	146
Total	4,128	490	2,182	1,216	5	185	8,206

Graph 6. Top Three Leading Methods of Death Among OCME Cases by Year of Death, 2015-2024

Among unnatural manners of death, three categories continually remain as the three leading methods of death in Virginia: fatal drug overdoses, gun-related fatalities, and motor vehicle-related fatalities (all manners of death). Over the last ten years, fatal drug overdoses rose dramatically and became the category with the largest number of deaths; however, these numbers begin to decline in 2022 and 2023 with a substantial decrease in 2024. Similarly, gun-related fatalities and motor vehicle-related fatalities increased slightly 2020-2022 but have since begun to decline slightly (2023-2024).

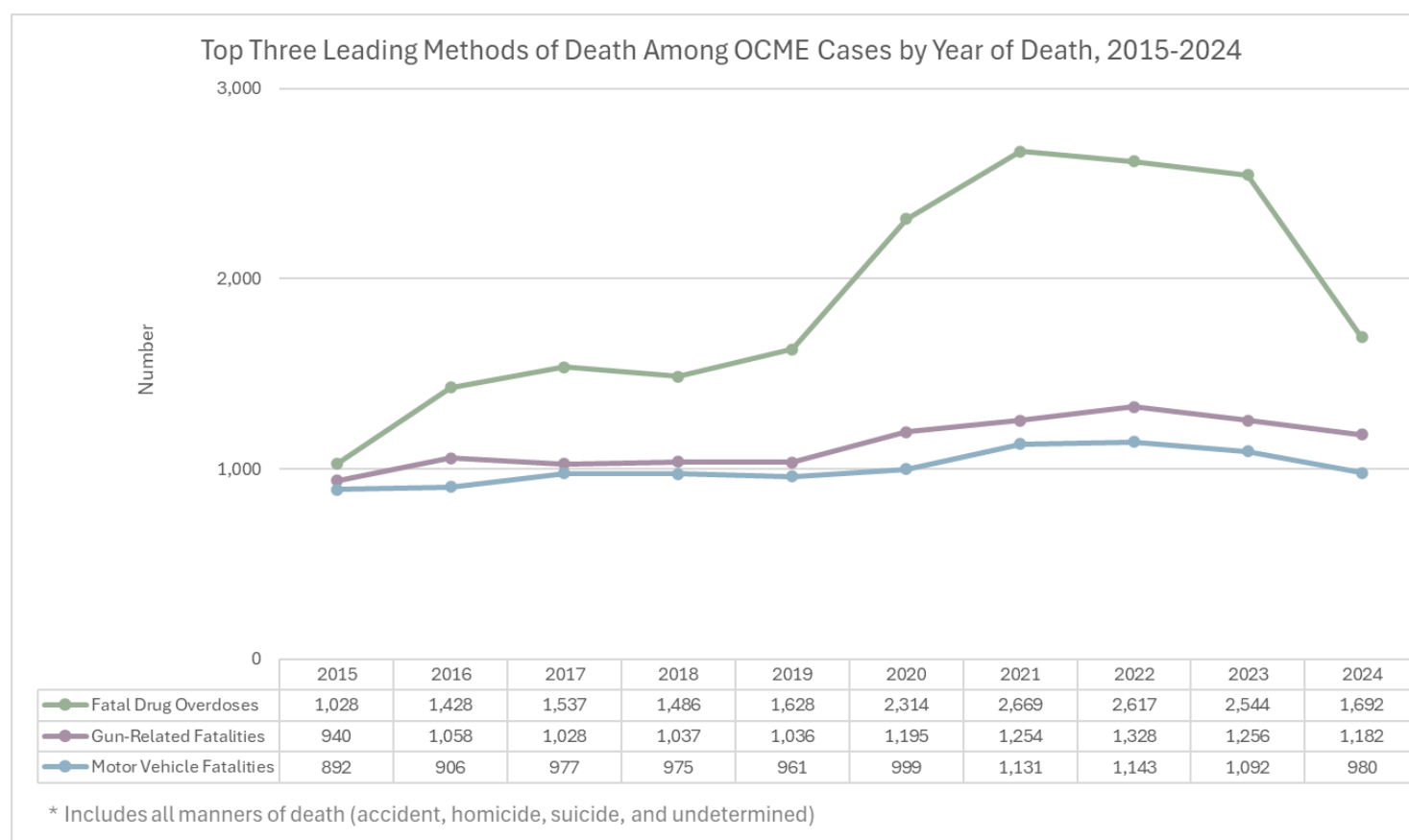


Table 5. Number of OCME Cases by Age Group, OCME District, and Case Type, 2024

In 2024, the largest number of autopsies (n=471) were done among persons 25-34 years of age while the largest number of external exams (n=1,079) were done among persons 55-64 years of age.

Age Group	Central OCME			Northern OCME			Tidewater OCME			Western OCME			Total		
	Autopsy	External Exam	Total	Autopsy	External Exam	Total	Autopsy	External Exam	Total	Autopsy	External Exam	Total	Autopsy	External Exam	Total
<1	44	5	49	20	0	20	31	0	31	29	1	30	124	6	130
1-4	10	4	14	4	1	5	7	3	10	3	0	3	24	8	32
5-9	1	6	7	1	1	2	3	0	3	2	2	4	7	9	16
10-14	4	5	9	7	2	9	9	1	10	4	4	8	24	12	36
15-19	48	23	71	34	26	60	37	14	51	17	19	36	136	82	218
20-24	71	47	118	56	64	120	57	39	96	38	28	66	222	178	400
25-34	199	98	297	98	122	220	101	124	225	73	96	169	471	440	911
35-44	145	217	362	97	156	253	92	174	266	66	182	248	400	729	1,129
45-54	78	244	322	78	180	258	63	187	250	37	238	275	256	849	1,105
55-64	111	315	426	61	217	278	54	285	339	51	262	313	277	1,079	1,356
65-74	87	300	387	52	235	287	45	205	250	45	269	314	229	1,009	1,238
75-84	56	218	274	37	202	239	37	152	189	29	184	213	159	756	915
85+	29	176	205	18	157	175	13	128	141	11	175	186	71	636	707
Unknown	3	1	4	1	0	1	2	0	2	1	0	1	7	1	8
Fetus	0	0	0	2	0	2	0	0	0	3	0	3	5	0	5
Total	886	1,659	2,545	566	1,363	1,929	551	1,312	1,863	409	1,460	1,869	2,412	5,794	8,206

Table 6. Number of OCME Cases by Age Group and Manner of Death, 2024

In 2024, the largest number of accidents (n=607) were among persons 35-44 years of age, among homicides (n=127), persons 25-34 years of age, and among suicides (n=223), persons 25-34 years of age.

Age Group	Accident	Homicide	Natural	Suicide	Undefined for Fetal Deaths	Undetermined	Total
<1	18	11	7	0	0	94	130
1-4	18	2	4	0	0	8	32
5-9	12	1	3	0	0	0	16
10-14	12	9	5	9	0	1	36
15-19	99	53	11	54	0	1	218
20-24	195	69	20	111	0	5	400
25-34	447	127	102	223	0	12	911
35-44	607	109	200	198	0	15	1,129
45-54	568	44	316	169	0	8	1,105
55-64	600	34	508	199	0	15	1,356
65-74	490	13	572	147	0	16	1,238
75-84	518	15	299	79	0	4	915
85+	542	2	135	27	0	1	707
Unknown	2	1	0	0	0	5	8
Fetus	0	0	0	0	5	0	5
Total	4,128	490	2,182	1,216	5	185	8,206

Table 7. Number of OCME Infant Deaths (Under One Year of Age) by Manner of Death, Grouped Cause of Death, and OCME District, 2024

One of the required NAME metrics includes statistics of infant deaths (under one year of age) under OCME jurisdiction broken down by cause and manner of death. In 2024, the Central OCME District had the largest number of infant deaths (37.2%). The most common cause of infant deaths was due to sudden unexpected infant death (SUID), an undetermined manner, which represented 88.3% of all infant deaths in 2024. The OCME certified zero sudden infant death syndrome (SIDS) deaths in 2024.

Manner of Death	Grouped Cause of Death	Central	Northern	Tidewater	Western	Total
Accident	Asphyxia (Various)	4	1	0	7	12
	Blunt Force Trauma	4	0	0	1	5
	Fire/Inhalation Injuries	0	0	0	1	1
	Total	8	1	0	9	18
Homicide	Blunt Force Trauma	0	1	1	3	5
	Drug Overdose	2	0	1	0	3
	Other Unnatural	2	0	0	0	2
	Systemic Diseases/Disorders	0	1	0	0	1
	Total	4	2	2	3	11
Natural	Cardiovascular Diseases/Disorders	0	0	1	0	1
	Central Nervous System Diseases/Disorders	0	0	0	1	1
	Gastrointestinal Diseases/Disorders	0	0	0	1	1
	Perinatal and Pediatric Diseases/Disorders	0	0	0	1	1
	Pulmonary Diseases/Disorders	1	0	1	0	2
	Undetermined	1	0	0	0	1
	Total	2	0	2	3	7
Undetermined	Asphyxia (Various)	0	0	1	0	1
	Drug Overdose	1	0	0	1	2
	Sudden Unexpected Infant Death (SUID)	29	16	24	14	83
	Undetermined	5	1	2	0	8
	Total	35	17	27	15	94

Table 8. Number of Other Required NAME Metrics by OCME District, 2024

NAME also requires various other annual metrics unique to medical examiner offices. These statistics are utilized to assess both common and uncommon activities that occur within the office during the calendar year.

Required NAME Metric	Central OCME	Northern OCME	Tidewater OCME	Western OCME	Total
Bodies transported by OCME office	2,545	1,929	1,863	1,869	8,206
Bodies transported to OCME office	1,603	1,005	864	831	4,303
Cases that received toxicology	1,599	1,264	1,250	1,101	5,214
Corneal donations	62	61	15	11	149
Exhumations	0	1	0	0	1
Hospital autopsies under OCME jurisdiction	0	0	0	0	0
Organ donations	72	32	7	2	113
Partial autopsies (head-onlys)	18	85	71	30	204
Scene visits	362	193	258	188	1,001
Unclaimed cases	135	73	38	24	270
Unidentified cases	1	3	2	0	6

Additional Information

Please see the Virginia OCME website for additional information on office activities, previous annual reports, the Virginia State Anatomical Program, the Division of Death Prevention, contact information, and much more.

<https://www.vdh.virginia.gov/medical-examiner/>

