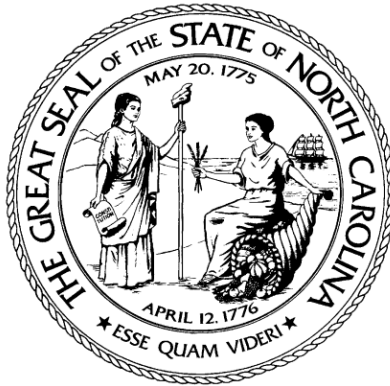


**Comprehensive Toxicology in all Medical Examiner Child
Death Cases**

Session Law 2023-134, Section 9H.7.(c)



Report to the

**Joint Legislative Oversight Committee on
Health and Human Services**

and

Fiscal Research Division

By

North Carolina Department of Health and Human Services

April 14, 2026

BACKGROUND

The North Carolina General Assembly passed the Statewide Medical Examiner Act of 1967 to provide a statewide system for postmortem medicolegal examinations. The Office of the Chief Medical Examiner (OCME) was established in 1968, and the first Chief Medical Examiner was appointed. OCME is responsible for overseeing the operations of the entire medical examiner system in North Carolina and is assisted in that effort by five (5) regional autopsy centers and another four (4) hospital-based pathology practices that are contracted to perform autopsies for the medical examiner system.

Session Law 2023-134, Section 9H.7.(c) requires the Office of the Chief Medical Examiner to submit a report to the Joint Legislative Oversight Committee on Health and Human Services and the Fiscal Research Division by December 30, 2025, on the use of funds for toxicology screening in all medical examiner child death cases and:

- (1) The total number of child deaths during the preceding fiscal year that fell within the jurisdiction of the medical examiner pursuant to G.S. 130A-383 or G.S. 130A-384;
- (2) The total number of child deaths reported under (1) for which toxicology screening was completed pursuant to G.S. 130A-385(a1); and
- (3) An explanation for any delay or failure to complete the toxicology screening required by G.S. 130A-385(a1).

Data on medical examiner jurisdictional child death cases pursuant to G.S. 130A-383 and G.S. 130A-384, the number of child death cases for which toxicology screen was completed pursuant to G.S. 130A-385(a1), and any issues or delay with the completion of toxicology testing on medical examiner child death cases are provided for **SFY July 1, 2024 – June 30, 2025** (the reporting period).

Methods

Data for this report was collected using child death toxicology reports as well as a manual tracking system developed in the toxicology laboratory for cases. OCME is implementing a new information technology system, which will enable OCME to electronically track data on child fatality cases in the future. The data presented in this report is based on the date samples were received by OCME toxicology, not the date of death.

SFY 2024 – 2025 Child Death Medical Examiner Cases

The OCME includes a forensic toxicology laboratory accredited by the College of American Pathologists that provides toxicology testing for the entire ME system.

The following data reflects the months during SFY 2024-2025 where G.S. 130A-385(a1) was in effect (July 1, 2024, through June 30, 2025).

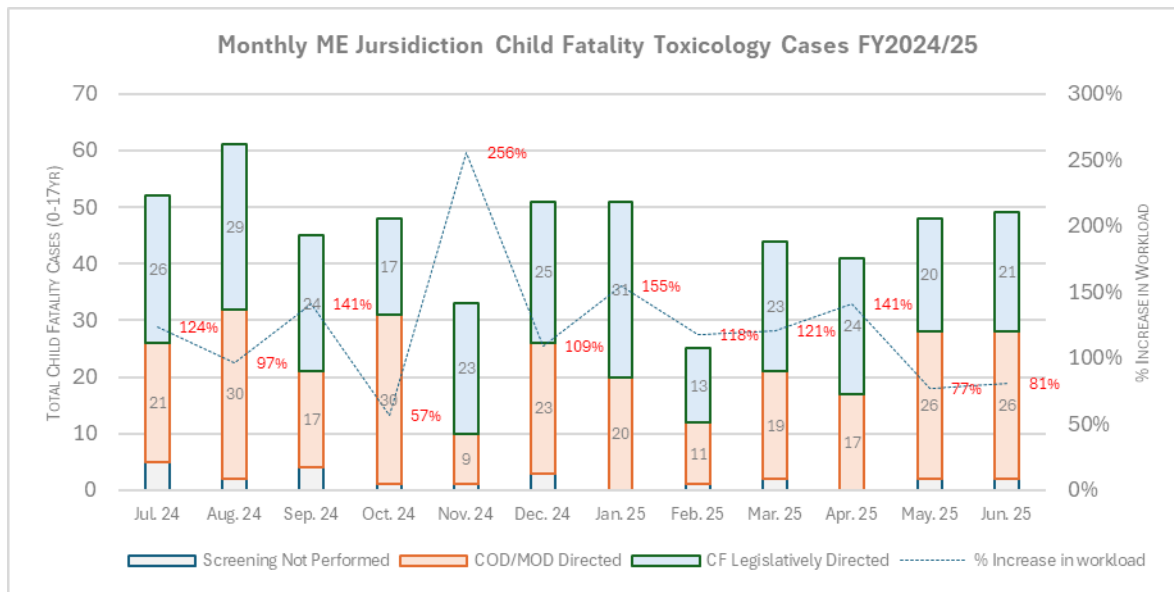
During this time, toxicology specimens were received on **550** child death cases. Comprehensive toxicology was performed on all cases with appropriate and sufficient specimens (as outlined below), resulting in comprehensive toxicology testing for **527** child death cases.

The remaining **23** cases from the reporting period were not tested due to insufficient or inappropriate samples, including:

- Specimens that did not have enough volume to perform comprehensive toxicology testing
- Specimens with a prolonged period between the incident that caused death and sample collection

Inappropriate samples would produce results that would not reflect the drugs/compounds in the decedent’s blood at the time of the incident that caused death.

Figure 1: Monthly ME Jurisdiction Child Fatality Toxicology Cases FY2024-25



Funding for Toxicology Screening in all ME Child Death Cases

SECTION 9H.7.(a) G.S. 130A-385 provided the Office of the Chief Medical Examiner (OCME) with the recurring sum of one hundred sixty-four thousand six hundred ninety-six dollars (\$164,696) for each year of the 2023–2025 fiscal biennium, including the recurring \$5,500 to comply with the toxicology screening requirements of G.S. 130A-385(a1).

As permitted by this legislation, the OCME created a permanent full-time Chemist I position and a permanent full-time Chemistry Technician position. Through reallocation, the OCME created a permanent full-time Chemist I position and a permanent full-time Chemist II position. The Chemist II position was successfully recruited and filled in September 2024. Due to extended delays in the hiring process, the Chemist I position faced significant recruiting challenges, including the loss of qualified applicants because of those delays.

During SFY 2024–2025, \$164,696 in funds were utilized to support toxicology screening in child death cases:

- \$83,825 in recurring funds for approximate salary (\$58,500) and benefits (\$25,325) for the Chemist II position, filled in September 2024.
- \$74,981 for temporary staffing and basic laboratory equipment including:
 - Chemistry Technician II
 - Forensic Administration Specialist I
 - Laboratory bench
- \$5,890 toxicology reagents essential for validated child toxicology methods

In summary, to comply with the toxicology screening requirements of G.S. 130A-385(a1), appropriated funding for this purpose was utilized for the creation of two toxicology positions, temporary staffing, and the purchase of reagents and laboratory equipment.