2025 Annual Report

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Will County Coroner

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The Will County Coroner,

as a member of the Law Enforcement Community,

investigates deaths and

provides critical services to surviving

family members, relatives, and friends

with compassion and dignity.

Should you have any questions

regarding this Annual Report, or this

office, please do not hesitate to contact us.

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ILLINOIS CORONER'S CREED

...Birth and death are the only two universal human experiences...

Birth is the most important biological event in the life of any human being. If it does not occur, there is no being. If there is no person, no legal rights and duties arrive, for the law relates to the rights and duties of living people, not inanimate objects.

Death, on the other hand, is the most important legal event for all human beings. When it occurs all legal rights and duties devolving upon the person during his life span in a civilized jurisdiction are terminated. All persons with whom the deceased had legal relations at that moment in time are also directly affected by the occurrence of death. Moreover, both the deceased and the survivors may be greatly affected legally by how death occurred, what actually happened, why it occurred, and precisely when it occurred. Above all, who died must be absolutely determined, and where death occurred is positively required for legal jurisdiction over the decedent is based upon a geographical location.

The law becomes extremely active when a person dies. Wealth is redistributed. Contracts are altered. A wrongful death may give rise to tortuous claims. Tax obligations are always present. Public social benefits and private insurance policies are paid. Criminal laws may be involved. Creditors must be satisfied, and debtors are located. Spouse and children, heirs and next-of-kin have their attachments rearranged. It is not surprising that for centuries the sovereign state has had an overriding interest in the death of its subjects or citizens. The office of the Coroner, or the office of the Medical Examiner, along with the state-licensed physician is legally charged with significant duties answering the pertinent questions relating to death: WHO, WHERE, WHAT, HOW, WHY? Only when these questions have been answered correctly can all the proper legal issues arising at death be effectively handled for the proper administration of justice.

Although the legal aspects of death are most important, certainly the religious and humanitarian heritages of a civilized society also command a deep concern over the death of a human being. The spiritual faith in a religion as well as the humanitarian concern for a fellow human being demand correct answers to the question of death: WHO, WHERE, WHAT, HOW, WHY? Human death obligates the living to acquire accurate facts on which to apply just laws for each deceased member of the human race.

The obligation for proper death investigation is mandatory for legal and religious/humanitarian satisfactions in the human society. Let those responsible for death investigations take heed, that they labor not only for the State, but also for God.

Our Commitment...Care of the Deceased; Concern for the Living...

2025 Quick Overview

Total Investigations

7992

(669 coroner DC + 6235 Hospice Invest + 1088 Returned to MD)

Total Death Certificates Signed by the Coroner

669

(668 + 1 Pending)

Manner of Death	Autopsy	External Exam	Total Autopsy/Ext. Exam Cases	No Autopsy - Record Review Cases	Total Cases
Natural	254	1	255	59	314
Accident	127	3	130	127	257
Homicide	5	0	5	1	6
Suicide	71	1	72	2	74
Undetermined	9	0	9	8	17
Total	466	5	471	197	668

Natural Death Investigations

Coroner signed Naturals	Hospice Deaths MD signed	Returned to MD (non-hospice)	Total
314	2932	1088	4334

Hospice Investigations

Hospice Admission Investigations	Hospice Death Investigations	Total Hospice Investigations
3303	2932	6235

Cremations

Over 3000

FOIA Requests

1172

ATTENTION:

Physicians
Hospital Personnel
Embalmers
Vital Statistics Registrars
Home Healthcare Agencies

Police Officers
Funeral Directors
Paramedics
Hospice Agencies

DEATHS THAT MUST BE REPORTED

Any person who discovers a body or acquires first knowledge of the death of any person who died as a result of criminal or other violent means, in casualty, or by suicide, or suddenly when in apparent health, or in any suspicious or unusual manner, shall immediately notify the office of the Will County Coroner with the known facts concerning the time, place, manner, and circumstances of such death, and any other information that is required by the coroner.

All suspected or known deaths resulting from accident, homicide, or suicide shall be reported to the Coroner. In such cases, if a request for cremation is made, the funeral director called in attendance should immediately notify the Coroner. No person shall willfully refuse to report such a death, or shall without an order from the Coroner, willfully touch, remove, or disturb the body, clothing, or any article upon or near the body.

NOTIFICATION BY HOSPITAL PERSONNEL

Any person dead on arrival shall be reported immediately to the Coroner. No person shall, without order from the Coroner, willfully touch, remove, or disturb the body, nor should the clothing or any article upon or near the body be disturbed. Any death that occurs within 24 hours after admission is also to be reported. This includes emergency room deaths and inpatient deaths within that time frame.

I. ACCIDENTAL DEATHS

1. Anesthetic Accident (Death on the operating table prior to recovery from anesthetic).
2. Blows and Other Forms of Mechanical Violence
3. Burns
4. Carbon Monoxide Intoxication (Resulting from natural gas, automobile exhaust, or other).
5. Crushing Injuries
6. Cutting or Stabbing Injuries
7. Drowning
8. Electric Shock
9. Explosion
10. Exposure
11. Falls
12. Firearms

13. Fracture of Bones Not Pathological in Nature (Such cases are to be reported even when the fracture is not primarily responsible for the death. All hip fractures, when the patient dies within 1 year and 1 month needs to be reported to the Coroner).
14. Hanging
15. Heat Exhaustion
16. Insolation (Heat Stroke)
17. Poisoning (Food poisoning, occupation, chemical, or other).
18. Strangulation
19. Suffocation
20. Vehicular Accident (Automobile, bus, railroad, motorcycle, bicycle, or other).
21. Drug Toxicity (Illicit, prescription, Alcohol)

II. HOMICIDAL DEATHS

1. Any and all, known or suspected, by any means

III. SUICIDAL DEATHS

1. Any and all, known or suspected, by any means

IV. ABORTIONS: CRIMINAL OR SELF-INFLICTED

1. Must be reported, even if the survival period after onset is 12 months

V. SUDDEN, SUSPICIOUS, OR UNUSUAL DEATHS

1. All deaths that occur at **a residence**
2. All deaths that occur at a **place of employment**
3. All deaths in **public places**, or on the **street**, in the **open**, or **temporary shelter**
4. Deaths involving **alcoholism**
5. **Stillborn infants** where there is suspicion of illegal interference
6. Deaths when the **attending physician is unavailable**
7. Deaths when there is **no attending physician**

VI. DEATHS IN STATE INSTITUTIONS

1. Juvenile Detention Facilities
2. Adult Detention Facilities
3. Prisons
4. Nursing Homes

VII. DEATHS OF WARDS OF THE STATE

1. In private care facilities
2. In programs funded by the Dept. of Mental Health and Developmental Disabilities
3. In programs funded by the Dept. of Children and Family Services

VIII. OTHER

1. While a subject is being pursued, apprehended, or taken into custody.
2. While in custody of any law enforcement agency

IX. CREMATIONS

1. All deaths where a cremation is to take place.

In 2025 the Will County Coroner's Office issued

Over 3000 cremation permits

The coroner must issue a Medical Examiner/Coroner Permit to Cremate when cremation is planned as the final disposition for a body. The Coroner or Medical Examiner of the county where the death has occurred issues the permit. In Will County, funeral directors must submit a signed authorization from the legal next of kin, and if power of attorney is established, that must be turned over to the coroner as well before any permit will be issued.

When the remains to be cremated are not subject to an investigation by the Coroner, a funeral director must present a signed Medical Certificate of Death when requesting a cremation permit. The case is briefly investigated by a staff member to verify that the death should have been certified by a doctor. If all appears in order the cremation permit is issued. If there are questions regarding a death, those questions will need to be resolved before a permit is issued. Sometimes the Coroner pulls the medical death certificate, and the death is investigated further.

When the Coroner is investigating a death, the permit to cremate will only be issued after the coroner is completely satisfied that all investigative procedures necessary for a proper and thorough investigation have been completed. A temporary death certificate is prepared and filed with Vital Records at the Will County Health Department, and a Cremation Permit will also be issued.

NATURAL DEATH INVESTIGATIONS

When a person has an attending physician and dies in a hospital emergency room, or within 24-hours after being admitted to a hospital, or at home, or at any public place, or under any other kind of known circumstance, the coroner's office is notified. The circumstances and details of the death are investigated. If it appears to be a death of natural causes the attending physician will be contacted. The circumstances are reviewed with the attending physician. If the deceased has a medical history that supports a cause of death that is consistent with the circumstances surrounding the death and the physician agrees, the case is released to the doctor. If the attending physician does not have enough medical history to support the cause of death, or if the attending physician is not available, or if the attending physician refuses to certify the death, the death is investigated by the coroner.

Many methods are involved in proper death investigation. Toxicology samples are obtained and sent to a laboratory for analysis. A decision is made as to the necessity for an autopsy. Medical records may need to be subpoenaed from a hospital or doctor.

When the necessary medical records have been obtained and the toxicology and autopsy reports are complete, the death certificate is signed and filed by the coroner.

The coroner also reviews all deaths certified on a Medical Certificate of death when a cremation permit is requested to assure that the death should have been certified as a natural cause of death and there is no need for further investigation.

Natural Death Certificates Signed by the Coroner

314

LEADING CAUSES OF NATURAL DEATHS

Heart disease is leading causes of death among Americans, both MEN and WOMEN. The heart attack that kills is sometimes preceded by years of heart disease that has gone unrecognized, and therefore untreated. Sometimes, however, heart disease has been diagnosed, but the patient is either not compliant with treatment or ignores medical advice. In other words, the heart disease that kills a person in their 50's or 60's has usually been there since those people were in their 30's and 40's. Symptoms may vary. Some feel chest pain; others describe a sensation of chest discomfort. Pain or discomfort anywhere, that cannot be explained, is a red flag and should not be ignored. When in doubt, always consult your physician.

There are many risk factors for heart disease that are not controllable such as age, family history of heart disease, and your race. Some risk factors you can control by making changes in your lifestyle. Controllable risk factors include:

- Quit Smoking
- Improve Cholesterol Levels
- Control High Blood Pressure
- Get Active

- Eat Right
- Achieve and Maintain a Healthy Weight
- Learn to Manage Stress
- Control Diabetes

Stroke is another reason to pay attention to your heart and lifestyle. Stroke occurs when a blood vessel carrying oxygen to the brain bursts or is blocked by a clot. The brain cannot function properly because it is deprived of blood and oxygen.
Just like heart disease, there are many controllable risk factors for stroke. Maintaining healthy blood pressure is one of the most significant. Lowering cholesterol levels, staying fit and active, and avoiding tobacco are other controllable factors as well.

What is Atherosclerosis?

Atherosclerosis is the process where blood vessels become blocked with a build-up of fat and cholesterol, sometimes called plaque. This process narrows the arterial opening and restricts the blood supply to the heart. A person may feel chest pain or angina when this occurs. This is sometimes the first recognized symptom of heart disease. A blood clot can form and block blood flow completely which results in a heart attack. When atherosclerosis leads to blockage in a vessel leading to the brain, then a stroke or cardiovascular accident is the result.

What is Hypertension?

Hypertension is usually without symptoms. Therefore, your blood pressure needs to be checked on a regular basis. When you have your blood pressure taken, the amount of pressure your blood exerts against the arterial wall is what is being measured. Over time, high blood pressure stresses and damages the blood vessels. It can also cause damage to the heart because the heart works harder to pump blood through the damaged vessels. Hypertension can be treated with medication, diet restrictions, and exercise.

DO NOT RESUSCITATE (DNR)

The purpose of cardiopulmonary resuscitation (CPR) is the prevention of sudden, unexpected death. Sometimes people feel they do not want CPR to be initiated, such as cases of terminal, irreversible illness, when death is expected. A physician can issue an order to the effect that no CPR measures be initiated on behalf of the patient. This is usually a decision made by a physician and patient or the physician and the patient's family. The physician and the patient or the physician and the family member that has Medical Power of Attorney for the patient must sign this order. This order is referred to as a DNR, or DO NOT RESUSCITATE ORDER. If the patient is in the hospital the staff is made aware of this order. If the patient is at home, they should have this order readily available so that if 911 is called, the responding agency knows about the order and does not initiate CPR.

HOME DEATHS WHEN ENROLLED WITH A HOSPICE PROGRAM

Some people who have been diagnosed with a terminal illness choose to enroll in a hospice program and stay at home rather than in a hospital setting. There are many hospice programs serving Will County. A hospice staff member can help the patient and family cope with managing care in a home setting. They can also provide support during this stressful and emotional time. They will often be in attendance at the time of death, or immediately after, and will call the doctor and funeral director the family has chosen. The hospice patient has a valid DNR (Do Not Resuscitate) order on file. The funeral director arranges for the removal of the remains in a quiet manner. A police agency is not called to

respond to the scene in this type of situation and the Deputy Coroner on call does not respond to the residence. Either the hospice nurse or the funeral director reports the death to the Will County Coroner's Office. The report is taken over the phone and the Deputy Coroner taking the call releases the body to the funeral director.

NURSING HOME DEATHS WITH HOSPICE

Those who reside in a nursing home may also have the option of enrolling in a hospice program. The hospice agency can provide support for the family and patient in a nursing home setting. If the family cannot visit the patient very often because of distance or other factors, the hospice nurse can provide an invaluable service of providing support for both the family and the patient. If a person is enrolled in a hospice program and dies in a nursing home the hospice nurse usually reports the death to the coroner.

HOSPICE PROTOCOL AND INVESTIGATIONS

All Hospice Admissions and Deaths are investigated by the Will County Coroner's Office. This is to ensure all cases are handled appropriately and filed with the state appropriately. To make hospice investigations less complicated and as easy as possible for families of terminally ill patients, the Will County Coroner's Office, in cooperation with Hospice Associations, has put into place the following procedures:

UPON PATIENT'S ADMISSION TO HOSPICE:

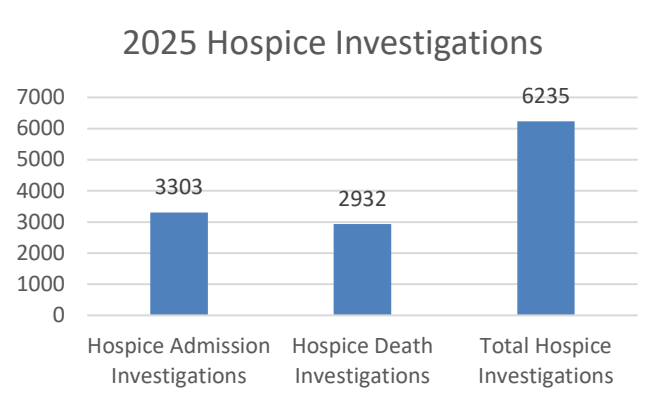
- All terminally ill patients who are enrolled with a hospice program **are required** to register with the Coroner's Office to prevent complications that may occur at the time of death.
- A **Pre-Registration Form** must be completed containing the following information: the patient's name, address, age, date of birth, social security number, next of kin, diagnosis, physician, medications, etc. This form is to be faxed or emailed to the Will County Coroner's Office**, within 24 hours of admission to hospice**.
- **It is necessary** to notify the coroner's office if the terminal diagnosis is due to any falls, injuries, trauma, overdoses, etc. There are boxes on the lower portion of the **Pre-Registration Form** that must be completed for any of these diagnoses.

UPON PATIENT'S DEATH:

- A **Postmortem Form** is required to be completed **within 24 hours of the death,** including the Patient's date and time of death and/or any changes of the Patient's status since the time of pre-registration**.** This form must be faxed or emailed to the Will County Coroner's Office.

PLEASE NOTE:

- The Pre-Registration and Postmortem reporting forms fulfill the law that Will County Coroner's office be notified in the case of all home deaths.
- The Coroner's Office **must** be notified if the patient moves out of Will County, changes physicians, changes hospice programs, or elects to terminate hospice benefits.



HOME DEATHS WITHOUT HOSPICE

Some people choose to take care of a loved one at home and do not want to enroll in a hospice program. Usually, some type of home health professional is involved in their case and visits the home on a regular basis, usually reporting to the attending physician. As the subject's condition deteriorates, they may be hospitalized shortly before death, or they may die at home. If they die at home under these circumstances, 911 should be called and when death has been confirmed the Coroner's Office will be contacted and requested to respond to the scene. The circumstances of the death will be reviewed, and the body examined for signs of injury, abuse, or any type of foul play. The attending physician will be contacted. If all appears in order and the physician is willing to certify the death, the funeral director is called for removal, and the remains are released to the funeral home.

If a person dies at home and the death was not expected, the Coroner's Office will be notified and will investigate the death. When the investigation is completed, the body will be released to the funeral home chosen by the family.

NURSING HOME DEATHS WITHOUT HOSPICE

A nursing facility experiences death often. If the nursing home is considered a state facility, they must report all deaths. Many nursing homes in Will County report all deaths, some do not. However, if a person is in a nursing facility because of injury or they have sustained a recent fall or injury, or any other trauma, the death must be reported.

The Will County Coroner's Office helps to monitor nursing home deaths in such a way as to monitor neglect and abuse. Pressure sores are a particular problem with patients with limited mobility. If neglected, they can become chronic and are a prime source for infection as well as discomfort. Proper treatment includes skin care and changing the position of the patient in bed on a regular basis.

POLICE AGENCIES, DETENTION FACILITIES AND PRISONS

When death occurs while a subject is being pursued, apprehended, or taken into custody, or incarcerated by any law enforcement agency, the death is always reported to and investigated by the coroner. This includes natural and unnatural deaths, even if the person's death was expected because of illness and/or disease, even if the person was hospitalized before death.

WARDS OF THE STATE

The death of someone who is in any program funded by the Department of Mental Health and Developmental Disabilities, or the Department of Children and Family Services must be reported to the coroner. This includes those with disabilities who live in group homes or nursing homes, children who have been placed in foster homes or are otherwise receiving services from the Department of Children and Family Services.

INQUESTS

Effective January 1, 2007:

HB4971 is introduced and passed… allowing an amendment to the Counties Code for Coroners and the inquest process. Language changed from **shall** to **may**.

In all counties, in cases of apparent suicide, homicide, or accidental death or in other cases, within the discretion of the coroner, the coroner **may** summon 8 persons of lawful age from those persons drawn for petit jurors in the county. The summons shall command these persons to present themselves personally at such a place and time as the coroner shall determine and may be in any reasonable form of request for acknowledgement which the coroner deems practical and provides a reliable proof of service. The summons may be served by first class mail. From the 8 persons so summoned, the coroner shall select 6 to serve as the jury for the inquest.

In counties which have a jury commission, in cases of apparent suicide or homicide or of accidental death, the coroner **may** conduct an inquest.

A Coroner's Inquest is fact finding and statistical in nature. The Coroner's Jury Verdict has no civil or criminal trial significance. Usually if more than one person dies from the same incident, such as a traffic accident or fire, there is one inquest including all those deaths. A typical inquest lasts 30-45 minutes or more depending on the circumstances.

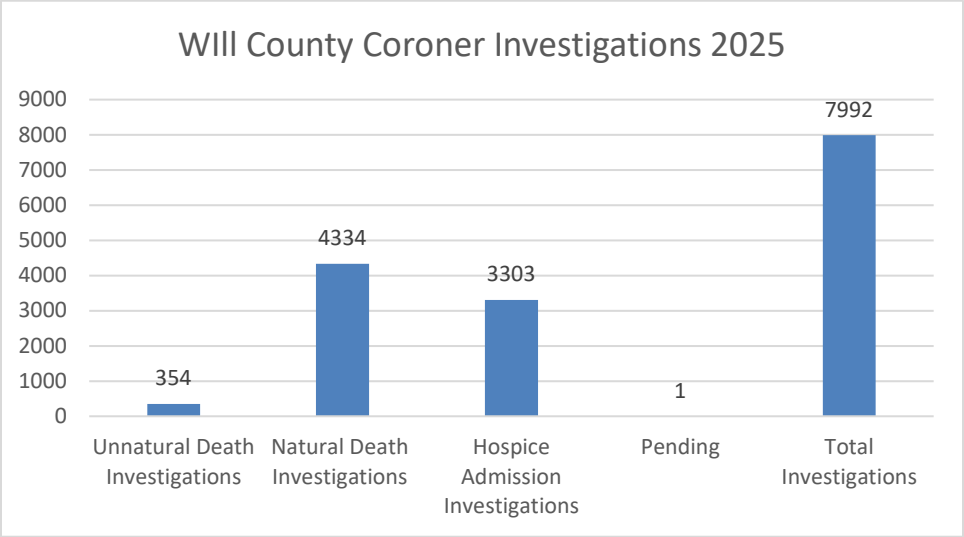
The Coroner, or the Chief Deputy Coroner in the Coroner's absence, serves as a hearing officer for the inquest. A court reporter is present to record all testimony presented. A jury of six (6) is present. The hearing officer presents all pertinent information and reports to the jury. If a law enforcement agency has investigated the circumstances surrounding the death, they are also asked to testify. If the family is present at the inquest, they are asked to testify to confirm the personal history information that has been submitted for the death certificate. The family may also be asked to testify regarding basic questions surrounding the circumstances of the death.

Upon completion of the testimony the Coroner's Jury deliberates in private. When they have concluded their deliberation, they issue a verdict through the foreman as to the cause and manner of death. The manner of death will be ruled an accident, a homicide, a suicide, or undetermined. The permanent death certificate will reflect this ruling. The death certificate is then filed with the Vital Records Division of the Will County Health Department. Death certificates can be obtained from The County Clerk's office. Certificates from 1999 to present can also be obtained from Vital Records.

All testimony presented during the inquest is recorded and transcribed by a court reporter. This transcribed testimony, along with all reports presented during the inquest, are kept together, and become public record. They have been microfilmed since the 1960's and most recently are scanned to keep the records permanent and secure. They are available for public examination and copies of certain reports can be purchased for a fee.

It is ultimately up to the Coroner to decide if he or she would like to conduct an inquest or determine manner of death based on investigation.

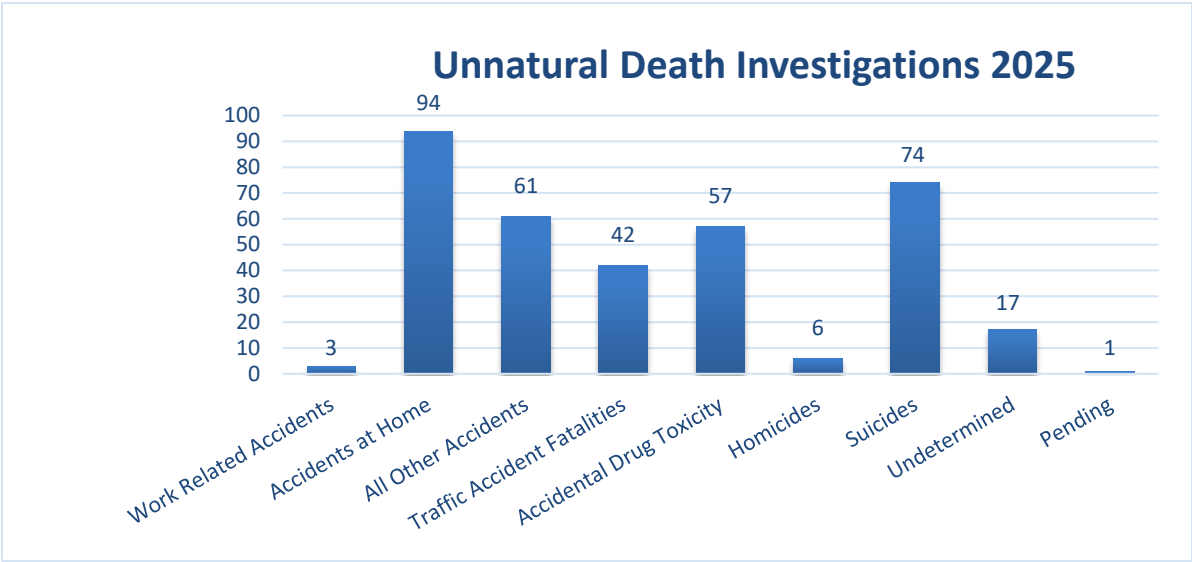
WILL COUNTY CORONER INVESTIGATIONS IN 2025



UNNATURAL DEATHS

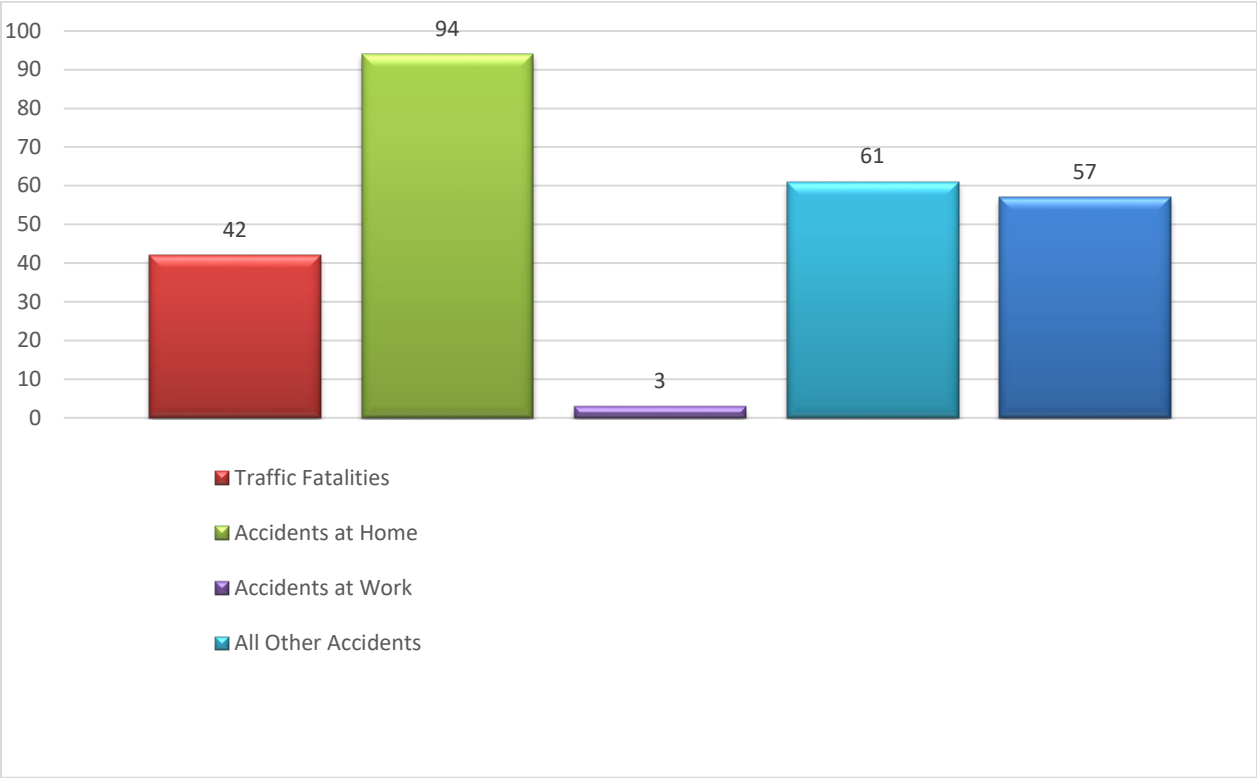
Unnatural deaths include all suicides, homicides, traffic fatalities, work related accidents, all other accidental deaths, and any deaths where the cause and/or manner cannot be determined. An inquest hearing may or may not be held for unnatural deaths.

Total Unnatural Deaths or Pending Cases Signed by the Coroner: 355



All Accidental Deaths in Will County

257



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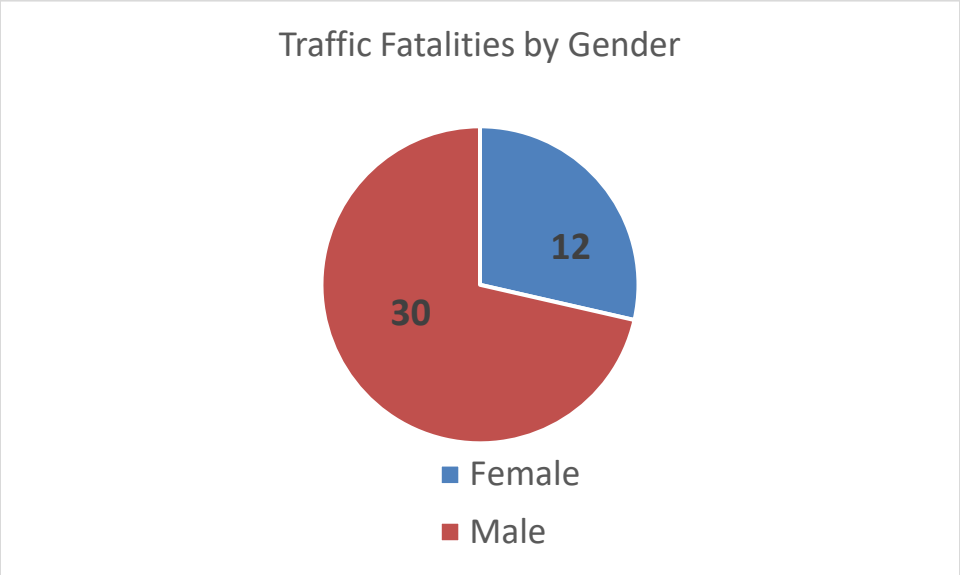
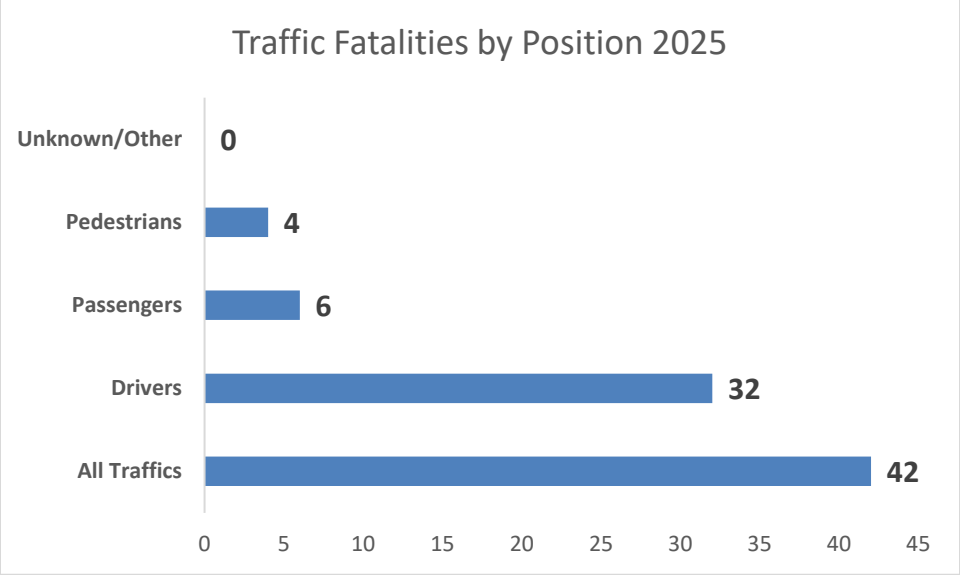
Traffic Fatalities

Law enforcement agencies continue their efforts to reduce traffic fatalities and injuries through safety programs and enforcement of seatbelt and child restraint laws, speed limits and DUI arrests.





ALL TRAFFIC FATALITIES

All Will County Traffic Fatalities	
	2025 (42)
GENDER	
Female	12
Male	30
SAFETY RESTRAINTS	
No/Unknown/Does Not Apply	30
Yes	12
TOXICOLOGY RESULTS	
Negative/Unknown/Does Not Apply	19
Positive Drugs and/or Alcohol	23
AGE RANGE	
age 10-19	3
age 20-29	7
age 30-39	13
age 40-49	5
age 50-59	3
age 60-69	3
age 70-79	4
age 80-89	4
# of VEHICLES INVOLVED	
One	18
Two	18
Three or More	5
Motorcycle	1
RESPONDING AGENCIES	
Bolingbrook	1
Crest Hill	1
Illinois State Police	16
Joliet	9
Lake Cty Sheriff	1
Manhattan	1
Naperville	1
New Lenox	2
Orland Park	2
Will County Sheriff	8

Drivers consistently comprise the largest group of traffic fatalities every year. Many test positive for alcohol and/or not wearing seat restraints. The following charts reflect driver, passenger, and pedestrian fatalities in 2025.

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Driver Fatalities

DRIVER FATALITIES	
	2025 (32)
# of VEHICLES INVOLVED	
One (includes Motorcycles)	13
Two (includes Motorcycles)	15
More Than Two (includes MC)	4
TOXICOLOGY	
Neg. Alcohol and/or Drugs	12
Pos. Alcohol and/or Drugs	20
GENDER	
Female	7
Male	25
USING SAFETY RESTRAINTS	
No/Unknown/Does Not Apply	22
Yes	10
RESPONDING AGENCIES	
Bolingbrook	1
Crest Hill	1
Illinois State Police	13
Joliet	6
Lake Cty Sheriff	1
Naperville	1
New Lenox	2
Orland Park	1
Will County Sheriff	6

6
Passenger Fatalities

PASSENGER FATALITIES	
	2025 (6)
# of VEHICLES INVOLVED	
One	2
Two	3
More Than Two	1
TOXICOLOGY	
Negative BAC/ N/A	4
Pos. Drugs of Abuse &/or Alcohol	2
USING SAFETY RESTRAINTS	
No/Unknown	4
Yes	2
GENDER	
Female	5
Male	1
RESPONDING AGENCIES	
Illinois State Police	2
Joliet	2
Will County Sheriff	2

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Pedestrian/Bicycle Fatalities

PEDESTRIAN/BICYCLE FATALITIES	
	2025 (4)
TOXICOLOGY	
Negative Drug/Alcohol	4
Positive Drug/Alcohol	-
# of VEHICLES INVOLVED	
One	4
GENDER	
Female	-
Male	4
AGE RANGE	
age 0-19	1
age 20-29	1
age 30-39	1
age 40-49	-
age 50-59	1
RESPONDING AGENCIES	
ISP	1
Joliet	1
Manhattan	1
Orland Park	1

BLOOD ALCOHOL CONCENTRATION BY BODY WEIGHT

There is a direct correlation between body weight, the amount of alcohol consumed, and the length of time over which the amount of alcohol is consumed. This translates to the BLOOD ALCOHOL CONCENTRATION or BAC. Basically, the less you weigh, the more you drink and the faster you drink, the higher your blood alcohol level will be. The following chart relates this information in a usable, understandable form.

Approximate Blood Alcohol Content (BAC) In One Hour

Source: National Highway Traffic Safety Administration

Drinks	Body Weight In Pounds								Influenced
	100	120	140	160	180	200	220	240	
1	.05	.04	.03	.03	.03	.02	.02	.02	Possibly
2	.09	.08	.07	.06	.05	.05	.04	.04	
3	.14	.11	.11	.09	.08	.07	.06	.06	Impaired
4	.18	.15	.13	.11	.10	.09	.08	.08	
5	.23	.19	.16	.14	.13	.11	.10	.09	Legally Intoxicated
6	.27	.23	.19	.17	.15	.14	.12	.11	
7	.32	.27	.23	.20	.18	.16	.14	.13	
8	.36	.30	.26	.23	.20	.18	.17	.15	
9	.41	.34	.29	.26	.23	.20	.19	.17	
10	.45	.38	.32	.28	.25	.23	.21	.19	

Subtract .015 for each hour after drinking.

One standard drink is equivalent to:

12 ounces of beer (about 5% alcohol), 1.5 ounces of liquor (about 40% alcohol), 5 ounces of wine (about 12% alcohol)

In 1997 the Illinois DUI/Implied Consent Law was amended to establish the legal level at 0.08. It was previously 0.10. It is important to note that the levels lower than this will impair your thinking and reaction times as well.

PHARMACOLOGICAL EFFECTS OF ALCOHOL

Alcohol affects the brain similar to the way any narcotic does. Reactions include removal of inhibitions, loss of self-control, weakness of willpower, development of euphoria, increased confidence, generosity, altered judgment, slurred speech, tremors, cessation of automatic movements, sweating, dilation of surface capillaries, stupor, coma, and death.

It is important to remember that a large dose of alcohol taken over a relatively short period of time can cause death. This kind of circumstance should be treated the same way a suspected drug overdose is handled: **CALL 911**.

SIGNIFICANT CONTRIBUTING FACTORS

Traffic Accidents and Fatalities

- **ALCOHOL/DRUGS**
- **FAILURE TO YIELD**
- **DRIVING TOO FAST FOR ROAD CONDITIONS**
- **DRIVING TOO FAST FOR WEATHER CONDITIONS**
- **DISTRACTED DRIVING (TEXTING, TALKING ON PHONE, MULTIPLE PASSENGERS)**

Accidental Deaths

Injury Facts:

Unintentional injuries are currently the third leading cause of death behind heart disease and cancer. In 2024, the U.S. experienced 197,449 preventable deaths. The death rate for preventable injury related deaths in 2024 was 58.1 per 100,000 population

The top 3 leading causes of preventable injury-related deaths in the United States are poisoning, falls, motor-vehicle crashes.

**** National Safety Council – Injury Facts***

RECOMMEDATIONS TO REDUCE DEATHS AND INJURIES IN THE COMMUNITY

Make Communities Walkable

- Provide residents with access to safe walking areas
- Provide handrails, grab bars and good lighting
- Safe walking routes to and from school for children

Increase Citizen Education regarding Recreational and Sports Safety

- Alcohol as it Relates to Recreational and Sports Activities
- Boating Safety
- Biking Safety
- Hunting Safety
- Personal Safety
- Swimming Safety

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Accidental Deaths at Home

	2025(94)
CAUSE OF DEATH	
Choking	2
Fall	74
Fire/CO intox	4
infection/drug	1
Hyperthemia (Heat)	5
Hypothermia (Cold Exposure)	6
Medical Mishap	1
Overlay	1
GENDER	
Female	45
Male	49
AGE RANGE	
age 0-9	1
age 10-19	1
age 20-29	-
age 30-39	1
age 40-49	2
age 50-59	6
age 60-69	7
age 70-79	27
age 80-89	36
age 90+	13
TOXICOLOGY	
Negative or Not Available	85
Positive for Alcohol and/or Drugs	9
RESPONDING AGENCIES	
Aurora	1
Elwood	1
Bolingbrook	3
Crest Hill	1
Joliet	7
Lemont	1
Lockport	1
Mokena	1
Moline	1
None	62
Naperville	2
New Lenox	1
Rockdale	1
Shorewood	2
Tinley Park	1
University Park	2
WCSP	4
Wilmington	2

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Other Accidental Deaths

OTHER ACCIDENTAL DEATHS	
	2025 (61)
CAUSE OF DEATH	
alcohol related	1
Anaphylaxis	1
Aspiration/Choking	2
CO intox	1
Cold Exposure	1
Drowning	2
Fall	39
Heat Stress	
Medical Mishap	12
Train	1
Unsafe Sleeping Environment	1
PLACE OF INJURY	
Another's Residence	5
A Business	4
Hospital/Dr. Office/Facility	17
Nursing Home/Assisted Living	27
Outdoors	1
Parking Area/Car/Street	2
Restaurant	2
Truck Stop	1
Train Tracks	1
Unknown	1
GENDER	
Female	32
Male	29
AGE RANGE	
age 0-9	3
age 10-19	1
age 20-29	-
age 30-39	2
age 40-49	-
age 50-59	5
age 60-69	5
age 70-79	14
age 80-89	15
age 90+	16
TOXICOLOGY INFORMATION	
Negative or Not Available	61
Positive/Alcohol &/ or Drugs	-

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Accidental Deaths at Work

ACCIDENTAL DEATHS AT WORK	
	2025 (3)
CAUSE OF DEATH	
Crushing/Blunt Injuries	2
Lifting	1
GENDER	
Female	-
Male	3
AGE RANGE	
age 0-9	-
age 10-19	-
age 20-29	1
age 30-39	-
age 40-49	-
age 50-59	1
age 60-69	-
age 70-79	1
age 80-100	-
Responding Agency	
None	1
Plainfield	1
Woodridge	1

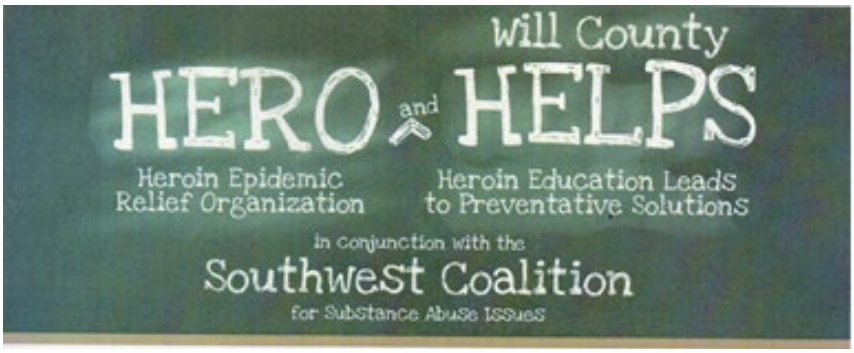
RECOMMENDATIONS TO REDUCE WORKPLACE DEATHS AND INJURIES

by the National Safety Council

- Increase efforts for construction zone safety
- Every company or organization should require employees to buckle up
- All workplaces should have a comprehensive safety and health plan
- Address security issues to prevent workplace violence
- Increase awareness of safe practices

According to the Bureau of Labor Statistics in 2024 there were 5070 fatal work injuries in the United States.

Accidental Drug Related Deaths



We are the **H**eroin **E**pidemic **R**elief **O**rganization. Our mission is to stop the growing heroin epidemic that has rapidly swept across the nation through our own programs and by supporting strategic pieces of legislation all while providing comfort and support to those who have lost a loved one to heroin or are currently helping a loved one who is struggling with this terrible disease.

HERO was founded by John Roberts and Brian Kirk after their two sons, Billy and Matt, were tragically taken from them while battling a heroin addiction. The Two Dads, as the local media took to calling them, set out to call attention to the heroin epidemic spreading throughout similarly affluent middle-class communities, to connect with and build a support network of families who have also lost children to heroin, and to work to see the day when no parent has to experience the loss of a child to addiction again.

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All Accidental Drug Related Deaths

	2025 (57)
CAUSE OF DEATH	
For detailed breakdown of drug combinations please see the website statistics www.willcountyillinois.com	
GENDER	
Female	14
Male	43
AGE RANGE	
age 0-9	-
age 10-19	1
age 20-29	4
age 30-39	14
age 40-49	16
age 50-59	9
age 60-69	10
age 70-79	3
RESPONDING AGENCIES	
Beecher	1
Bolingbrook	8
Channahon	1
Crest Hill	2
Crete	1
Grundy County Sheriff	1
Joliet	17
Manhattan	1
Metra	1
Mokena	1
Monee	1
None/Unknown	3
New Lenox	3
Plainfield	2
Romeoville	2
Steger	1
Tinley Park	1
University Park	3
WCSP	6
WGMCTF	1

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Accidental Opiate (Heroin/Fentanyl) Related Deaths

	2025 (30)
CAUSE OF DEATH	
For detailed breakdown of drug combinations please see the website statistics www.willcountyillinois.com	
GENDER	
Female	7
Male	23
AGE RANGE	
age 0-9	-
age 10-19	1
age 20-29	3
age 30-39	10
age 40-49	6
age 50-59	2
age 60-69	8
RESPONDING AGENCIES	
Beecher	1
Bolingbrook	4
Crest Hill	2
Grundy Cty. Sheriff	1
Joliet	10
Mokena	1
New Lenox	1
None/Unknown	2
Plainfield	1
Romeoville	1
Steger	1
Tinley Park	1
University Park	2
Will County Sheriff	2

SUICIDES

Family and friends left behind after a suicide often feel great guilt and depression. They are called suicide survivors. There are support groups available for suicide survivors. You can call any local hospital or check online for information on support groups.

Will County 590 Crisis Care Program
815-274-2423

The 988 Suicide & Crisis Lifeline is a United States-based suicide prevention network of over 200+ crisis centers that provides 24/7 service via a toll-free hotline with the number 9-8-8. It is available to anyone in suicidal crisis or emotional distress. You will be connected to the closest possible crisis center in your area.

988

It is difficult to predict suicidal behavior in many areas, such as age, race, occupation, social status, and income. Statistics tell us a male is much more likely to succeed in a suicide attempt. When a person talks about or threatens suicide their comments should be taken very seriously. There is a certain set of behavioral characteristics that may suggest impending suicide.

A person may be suicidal if he or she:

- Appears depressed: is sad, tearful, confused, has poor sleep patterns, poor appetite, and expresses lack of hope.
- Threatens suicide.
- Shows marked changes in behavior, appearance, or mood.
- Abuses drugs and/or alcohol.
- Has experienced a significant loss: financial, social status, break-up in a relationship or divorce, death of a loved one.
- Deliberately injures self.
- Gives away possessions.
- Withdraws from social and outside activities.

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Suicide Deaths

	2025 (74)
CAUSE OF DEATH	
Asphyxia	1
Drowning	1
Drug Overdose	9
Gunshot Wound	33
Hanging	23
Jumping	2
Stab/Slash Wounds	1
Traffic Incident	1
Train Incident	3
AGE RANGE	
age 10-19	3
age 20-29	17
age 30-39	5
age 40-49	13
age 50-59	20
age 60-69	8
age 70-79	6
age 80-89	2
GENDER	
Female	12
Male	62
NOTE or MESSAGE FOUND	
No	52
Yes	22
TOXICOLOGY RESULTS	
Negative or N/A	29
Positive Drug and/or Alcohol	45
DAY OF WEEK	
Monday	13
Tuesday	10
Wednesday	10
Thursday	12
Friday	8
Saturday	10
Sunday	11

6
Homicide Deaths

Homicide is the killing of one human being by the act or omission of another. The term applies to all such killings, whether criminal or not. Homicide is considered non-criminal in several situations, including

a) deaths because of war or

b) putting someone to death by the valid sentence of the court.

	2025 (6)
CAUSE OF DEATH	
Fall/Push	1
Gunshot Wound(S)	3
Strangulation	1
Traffic	1
GENDER	
Female	0
Male	6
AGE RANGE	
0-20	1
21-30	2
31-40	2
41-50	-
51-60	-
61-70	-
71+	1
TOXICOLOGY INFORMATION	
Negative, Unknown, N/A	2
Positive for Drug and/or Alcohol	4
RESPONDING AGENCIES	
Chicago	1
ISP	2
Joliet	2
Will County Sheriff	1

17

Undetermined Deaths

Undetermined (or Could Not Be Determined) applies when the evidence does not clearly indicate one Manner of Death over another. A death may be deemed Undetermined if after a thorough investigation and careful consideration of all findings, the Coroner or Medical Examiner concludes there is insufficient information to classify the Manner of Death as an Accident, Suicide, Homicide or Natural Death. Also, when a cause of death cannot be established due to circumstances, i.e. skeletonized remains, etc. the Manner of Death may also be classified as Undetermined.

	2025 (17)
CAUSE OF DEATH	
Blunt Trauma	1
CO Intoxication/Fire	1
Drowning	1
Drug Intoxication	2
Fracture	1
Infection	1
Undetermined	10
GENDER	
Female	7
Male	10
AGE RANGE	
age 0-9	2
age 10-19	3
age 20-29	1
age 30-39	2
age 40-49	-
age 50-59	2
age 60-69	1
age 70-79	1
age 80-89	3
age 90+	2
TOXICOLOGY INFORMATION	
Negative or Unavailable	12
Positive for Drug and/or Alcohol	5
RESPONDING AGENCIES	
Bolingbrook	1
Crest Hill	1
Joliet	4
Lockport	1
Mokena	1
New Lenox	1
None or N/A	3
Romeoville	1
WCSP	3
WGMCTF	1

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Autopsies and External Exams completed

AUTOPSIES

The word "autopsy" comes from a Greek word and means "seeing for oneself". Often what is revealed during an autopsy has not been discovered or even suspected during medical testing, examination, or even surgery. Sometimes these discoveries are helpful for family members of the deceased as they may be genetically linked and/or predisposed for certain diseases/conditions.

An autopsy is the systematic examination of a body using appropriate surgical techniques. It consists of an overall inspection of the body and the examination of the organs within the body. External and internal exams are the beginning of a longer process of investigation, which includes examination of tissue cells, results of toxicological tests, and looking for bacteria or other causes of infection and/or disease.

When the examination and test results are complete, the pathologist prepares a written report that gives all the findings and what was determined to be the cause of death.

The wishes of the family are always kept in mind when deciding as to whether an autopsy should be performed. However, the coroner does have jurisdiction of the body, and, if it is determined that an autopsy is necessary, the coroner does have the authority to order an autopsy, even if this decision conflicts with the family's wishes.

There are times when the coroner determines that an autopsy is not necessary, but the family feels they would like one. In this situation, the family can request a private autopsy through the primary care physician and the hospital affiliation. If this is not possible, then the family can contact a pathologist privately and they are responsible for the pathology fees.

TIME OF DEATH

Determining the exact time of death that is not witnessed is very difficult. The Will County Coroner and Deputy Coroners pronounce the time of death when they arrive at a death scene. This is true even when it is evident that death may have occurred several hours or maybe even days prior to discovery of the body. An autopsy does not reveal the time of death.

ORGAN AND TISSUE DONATION

Advancement in medical technology during the past few years has made tissue and organ transplantation one of the most dramatic and successful techniques available for treating certain medical diseases and conditions that were once considered fatal. Even though Illinois' rate of donation is among the highest in the nation, donation of tissue and organs is behind due to increasing number of patients needing transplants.

Gift of Hope is a federally designated not –for –profit organ procurement organization dedicated to recovering organs and tissue for patients awaiting transplants in the northern three-quarters of Illinois and in northwest Indiana.

Almost anyone can be a donor, regardless of age or circumstances of death. (Since the final decision for donation may rest with your family, it is important to discuss your wishes with your family ahead of time regarding this very important issue.) Families of donors receive information on the donation process, placement of organs and tissue taken, and the progress of the recipient. Follow-up support programs are also provided to the donor's families.

First Person Consent:

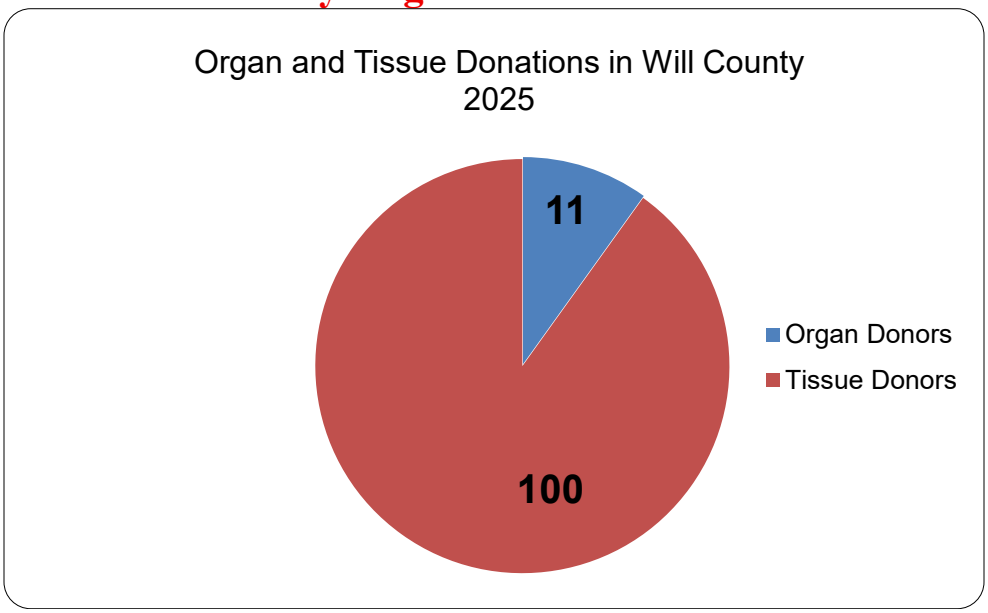
On January 1, 2006, Illinois residents were able to join an Organ/Tissue Donor Registry, which made a person's wish to be a donor legally binding. Previously, family consent was needed before donation could occur. The registry ensures that a person's wish to be a donor is respected upon death.

If a person has not joined the first-person consent registry (effective January 2006) or is under age 18, family consent is still required.

First-person consent legislation was signed into law in June 2005 and became effective Jan. 1, 2006. More than 40 other states have passed similar legislation, sometimes called "donor rights" legislation.

This Law is available under the Illinois State Statute (755 ILCS 50/5-20) (was 755 ILCS 50/5)

Will County Organ and Tissue Donations



These Donations Saved 33 Lives this year!

Freedom of Information Act (F.O.I.A.)

In 2025 the Will County Coroner's Office received and responded to

1172

F.O.I.A requests.

Due to the sensitive nature of the information handled at this office, all requests under the Freedom of Information Act must be reviewed by the designated Freedom of Information Officers. No documents will be made available until that review is completed within the period allotted under the Freedom of Information Act.

All cases presented to this office are thoroughly investigated by the Will County Coroner, deputies, and staff. This can include medical record reviews, autopsy & toxicology, police, fire or other institutions reports, history, family, etc. Cause and Manner of death are determined by the Coroner after completion and review of all investigations. Each case is given the time it needs and is completed with respect and dignity.