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Current position: Chief Medical Examiner and Coroner, Washoe County Regional Medical Examiner's Office, Reno, NV

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Education history:

BS - Chemistry, Murray State University, Murray KY

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<u>AP/CP Pathology Residency</u> – Medical University of South Carolina, Charleston SC

<u>Forensic Pathology Fellowship</u> – Office of the Medical Investigator/University of New Mexico, Albuquerque NM

HOW DID YOU INITIALLY BECOME INTERESTED IN FORENSIC PATHOLOGY?

I read too many interesting books at an impressionable age, essentially. Tom Noguchi's "Coroner" for example, obtained from my high school library, left me with a fascination for the field. I read everything I could get my hands on regarding coroners and medical examiners, and I found the topics of anatomy and physiology the most interesting of my high school education. I also had a level of curiosity and inquisitiveness that impressed some of my instructors and annoyed others; I have found this trait to serve me well to this day. I attended medical school knowing I had a strong interest in forensic pathology, but kept my mind open to other specialties. I was nearly equally interested in High-Risk OB and Maternal-Fetal Medicine, and briefly considered choosing that field. But, when I finally was able to complete my elective in Forensic Pathology at the KY Office of the State Medical Examiner in Louisville, I was hooked! Working with Drs. Tracey Corey, Donna Stewart, Barbara Weakley-Jones, Amy Burrows-Beckham, and their team was the highlight of my medical school career, and I also completed a research project (regarding infant deaths and bed sharing) with the office that I was able to present at the NAME meeting. These experiences were key in solidifying my commitment to FP, such that I knew throughout residency that I would be completing an FP fellowship and practicing FP for my career. I maintain special interest in maternal-fetal issues, obstetrical deaths, and sudden infant deaths to this day, which I credit to my medical school rotations and research project.

WHAT ADVICE DO YOU HAVE FOR ASPIRING FORENSIC PATHOLOGISTS, INCLUDING RECOMMENDATIONS TO MATCH INTO A PATHOLOGY RESIDENCY PROGRAM AND ACCEPTANCE INTO A FORENSIC PATHOLOGY FELLOWSHIP?

Seek out mentors in forensic pathology. As early as the first year of medical school, I wrote letters to prominent Chiefs asking their advice on choosing a pathology residency. and entering the field of forensic pathology. Connect with your local Medical Examiner/Coroner office, and take advantage of any lectures in the medical school pathology course given by forensic pathologists as an opportunity to meet them and ask for shadowing opportunities. Observe autopsies whenever you have the opportunity in medical school, whether by shadowing at the ME Office, attending hospital autopsies with residents or hospital pathologists during a pathology elective, and especially, attending the autopsy of any patient who dies during your clinical rotations as this is a critical learning opportunity. During medical school and residency, seek out opportunities for research or publishing a case report relevant to forensic pathology; present your work at the annual meeting of the National Association of Medical Examiners, a fantastic opportunity for networking. Attend the NAME meeting and AAFS meetings and become a member of both organizations. Apply to residency programs that have good availability of a large number of hospital and forensic autopsies for your education, and that have a forensic pathology elective rotation. Choosing a residency program that has an affiliated forensic pathology fellowship is not necessary, but could be beneficial if you have a family and would wish to stay in the same geographic location for the duration of training. Look for a residency program that has a solid reputation for both AP and CP, with excellent boards pass rates, and happy residents with a good esprit-de-corps. During residency, consider completing "away" rotations if available at potential fellowship programs to get a feel for what type and size of office might best suit you; every program has something to offer, it is just a matter of finding a match for your interests. For me, a larger number of cases for broad exposure, in a Medical Examiner (as opposed to coroner) setting was important, while not wishing to live in the largest cities.

WHAT IS THE MOST REWARDING ASPECT OF BEING A FORENSIC PATHOLOGIST?

Being able to provide answers to grieving families, and bringing science to bear in important legal matters, I find to be the most rewarding aspects of being a forensic pathologist. Solving a puzzle with highly refined skills and knowledge is also extremely satisfying.

WHAT IS THE GREATEST CHALLENGE OF BEING A FORENSIC PATHOLOGIST?

We are constantly in the public eye with high profile cases, and our opinions may be challenged publicly. We live in a time where even the most scientifically-proven concepts are routinely questioned, and even more so, scientific opinions. We are coming full circle from the "CSI Effect" in which juries thought forensic evidence nearly infallible, to a new era

in which medical science is being scoffed at by some during a pandemic. It is my hope that as a society we may end up somewhere in the middle: with a healthy skepticism and intellectual curiosity, but continuing to value what science has to offer us.

WHAT DO YOU THINK ARE THE MOST IMPORTANT ISSUES/CHALLENGES OF FORENSIC PATHOLOGY TODAY?

The forensic pathologist workforce shortage, combined with increasing workloads, represents an unprecedented challenge to our specialty. We must retain those already in the workforce and recruit more students and residents to the field. A multi-pronged approach that addresses compensation, educational paths, incentivization, and the culture of our specialty is likely necessary to accomplish this.

Emerging toxicologic threats, such as illicit fentanyl and fentanyl analogs, and the opioid epidemic in general, have driven caseloads for the past decade in many locales. We can anticipate continuing evolution of synthetic opioids and other types of drugs, and must find ways to deal with waxing and waning caseloads; approaches include being flexible in our working models (full time vs. part time vs. locum tenens), and advocating for greater public funding for ME/Coroners and toxicology labs developing new testing.

Finally, vicarious trauma and burnout related to high caseloads, emotionally-charged incidents, mass fatality, and the otherwise sometimes stressful nature of this career are challenges that have not been much addressed until recently. I am heartened to see this unspoken truth being talked about, in presentations at the NAME meeting, and committees formed (including in NAME) to address these issues, prevent burnout, and keep our colleagues well and working rather than experiencing negative effects silently, retiring early or changing career paths.

WHAT HAS BEEN YOUR MOST MEMORABLE CASE AND WHY?

I have always had a hard time choosing a "favorite" of anything, whether it be favorite food, book, or movie. I feel the same way about my cases—many are memorable, for different reasons. In some it is the circumstances—the naked man found trussed in ropes around his torso and neck and hanging from the corner of the garage, a broken plastic chair just to the side of him, with a bloody great toe. He had not intended to die during his activity, and closer inspection of the scene revealed a strategically cut hole in the shrubs that allowed him to see into a neighboring home. In others, it is a unique and rarely seen medical finding or toxicological agent—like the two men who died of hydrogen sulfide toxicity after opening a manhole while surveying. One opened a manhole, yelled, and fell in; his work partner ran over to rescue him, and was also overcome and immediately fell in. Both died as they could not be quickly removed from the toxic environment. In others, it is the challenging nature of the case—decomposed or charred bodies, which may turn out to have evidence of homicidal trauma, and in which I am still able to determine cause of death despite the condition of the body. A fire rapidly devoured a tent in a homeless encampment; the charred body of a man found inside came to my autopsy table, where I discovered depressed occipital skull fractures unrelated to the thermal damage on the

skull, and a subsequent search of the scene yielded a weapon bearing apparent hair and blood.

WHAT DO YOU ENJOY MOST ABOUT WORKING WITH YOUR TEAM?

Being able to rely on talented, qualified colleagues is one of the great joys of a professional career. Having forensic pathologist peers to discuss cases with and obtain different perspectives is extremely valuable. Locum tenens pathologists also bring practical experience from other offices across the U.S., and often suggest new and interesting ways to look at things or to complete mission-critical tasks. There is also a certain camaraderie amongst pathologists and investigators in our office; all of us know the realities of death investigation and have a common experience to draw from. It makes for a very special peer group.

WHO IS YOUR ROLE MODEL AND WHY?

I have had many excellent mentors over the years, but specifically Tracey Corey, Kim Collins, and Erin Presnell are strong women forensic pathologists who helped shape who I am today as they guided my education and training. They each exemplify a way of being and professional demeanor that I admire. One of Kim Collins' best pieces of advice to me was to get involved in professional organizations as soon as possible, which I did as a resident; I now am a member of the Board of Directors and Executive Committee of NAME. Marcus Nashelsky, Jonathan Arden, and Sally Aiken have also been mentors and models to me in NAME, and helped to guide me to serve in committee chair roles and the Executive Committee; they have each demonstrated that leading is not ruling but rather serving, by their selfless dedication to NAME.

WHAT ARE YOUR HOBBIES AND HOW DO YOU MAINTAIN A WORK-LIFE BALANCE?

I enjoy being outdoors, whether in the forest or by a lake or ocean; I find a camping trip, beach vacation, or just a long hike restorative. I am an avid swimmer and enjoy swimming laps in quiet solitude. I am an intermittent exerciser in other modes—walking, jogging, yoga, cycling—going in phases as the mood strikes me, but always finding it moodenhancing and balance-restoring. I recently tried stand-up paddleboarding for the first time and loved it. I listen to audiobooks and podcasts and read voraciously, enjoy cooking and entertaining, love Halloween and all things associated, collect (and enjoy) wines, play hand drums and other percussion, and am a singer and was in a small band (before the pandemic).