

Coroner's Journal

FORENSICS AND THE ART OF STALKING DEATH

Louis Cataldie, M.D.

Foreword by Patricia Cornwell



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New York

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“Louis Calaldie is one of the most honorable people I have ever met. And one of the most compassionate. . . . His book is more a journey than a journal. It is a ticket to an inaccessible and unimaginable world, and your guide is a man who is simply remarkable.”

—Patricia Cornwell

“I’ve kept a personal journal, starting in the coroner’s office of East Baton Rouge Parish in 1993. I wrote whenever it struck me, jotting notes in the field and later sketching images on a small pad as I remembered them. I wrote in my journal mostly at night, usually after a particularly troublesome autopsy or a visit to an unsettling crime scene. . . . The journal is about how the lives—and untimely deaths—of the people I investigated crossed my path, and how I tried to bring order and integrity to the aftermath.”

—Louis Calaldie, M.D.

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PUBLISHER'S NOTE:

The events described in this book are the real experiences of real people. However, in some cases, the author has altered their identities and, in some instances, created composite characters. Any resemblance between a character in this book and a real person therefore is entirely accidental.

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To my son, Michael

FOREWORD

I first met Louis Cataldie in the summer of 2002. While doing research at Harvard University for the book I was writing about the infamous serial murderer Jack the Ripper, I came across a newspaper article about similarly vicious multiple murders then occurring in the Baton Rouge area of Louisiana. Already DNA had linked the cases of three women who had been raped and murdered. In time, more victims would be discovered.

The Baton Rouge case—now solved, the killer on death row—would prove to be one of the most difficult and disturbing such cases we had seen in a long while. I suggested to ABC that we do a story on it for *Primetime Live*, hoping that the most important person in the story—East Baton Rouge Parish coroner Louis Cataldie—would agree to tell the truth about what was really happening in his small, violent parish. At the outset it was apparent that scarcely anyone wanted to talk about the murders, including the Baton Rouge police. Not even in the investigation of Princess Diana’s death had I encountered such a hostile news blackout. The Baton Rouge authorities seemed to have no interest in disseminating accurate and helpful information about their latest serial killer (they’ve had more than one), and I began to fear that Dr. Cataldie wouldn’t be any different. But he was. He was open. He didn’t mince words. He was boldly honest.

In the course of doing that story, I saw firsthand how Louis made himself accessible to the devastated family members and friends of the victims, and how he became for them the family doctor they never—not even in their darkest nightmares—would have imagined they might someday need. Throughout a tragedy I began to think would never end, Louis consoled the bereaved and faithfully attended to his dead patients in a morgue fashioned from a trailer and equipped with hand-me-downs from funeral homes and restaurants. All the while having to work with officials who seemed hell-bent on gagging him, even running him out of office.

Three years later, two hurricanes—Katrina and Rita—have ripped through the corner of the world Louis loves so much. The scale of this tragedy—so many victims and such utter devastation for the survivors—would defeat most of us. But not Louis Cataldie. Sometimes sleeping no more than three hours at a time for days, he oversees the identification of the bodies of victims, counsels the suffering survivors, and copes with politicians and bureaucrats who get in his way.

In his native Louisiana, Louis Cataldie is a hero. He is, I think, nothing less than a national hero.

This book is the chronicle of a life spent doing work most of us would find depressing and grim. It is Louis’s account of his passion for his agenda: dignity for the dead. It is told with both compassion and color, in a manner that is sometimes irreverent and never swollen with self-importance, by one of the most honorable people I have ever met.

EDITOR'S NOTE

On August 29, 2005, weeks before *Coroner's Journal* was scheduled to go to press, Hurricane Katrina struck Louisiana and the Gulf Coast of Mississippi. Louis Cataldie was asked to assist in the massive evacuation of patients from Louisiana's State Emergency Operations Center at the New Orleans Superdome, an effort coordinated by Dr. Jimmy Guidry, the state health officer for Louisiana. In addition, Dr. Cataldie helped monitor the setup of field hospitals in and around Baton Rouge, gave medical attention to the injured, and began the arduous process of overseeing that every Katrina-related death was properly investigated. Then Hurricane Rita hit. With a medical system in chaos, and with more than 1,000 deaths associated with the two tragedies, the state appointed him Louisiana Medical Examiner. As of this writing, Dr. Cataldie is heading up the makeshift morgue in St. Gabriel outside New Orleans, where the processes of identifying the victims and assessing cause of death are expected to take months.

—October 2005

ONE

Katrina

“LET THE DEAD TEACH THE LIVING”

St. Gabriel, Louisiana—I am exhausted. I haven't had the luxury to reflect, or even to think—I'm simply on autopilot. My clothes stink and my head hurts, I haven't slept for more than three hours at a time for weeks; haven't seen my wife and my son but twice, and then for only a few precious minutes. My life seems so remote and far away.

It's been a month since Hurricane Katrina slammed into the Gulf Coast and tore a deadly path through the state I call home. I had always feared this day would come, as had anybody who lives around New Orleans, a city in a bowl below sea level.

“What if a cat-five hit N.O.?” De and I talked about it many times. “You don't want to know,” was usually my answer. Actually, we had been preparing and training for such an event since 2004; the ongoing planning, which we had labeled “Hurricane Pam,” was interrupted by the real thing. We implemented that plan, but the component that dealt with the dead was simply “Call in DMORT.” Little did we know that DMORT, the Disaster Mortuary Operational Recovery Team, was not prepared for such a catastrophe either. Over the next several months, I would become acutely aware of the limitations of the DMORT system. It was a tough lesson for us both.

And then, on August 29, it happened. Katrina slammed into the coast with 140-mile-per-hour winds, leaving a path of ruin in her wake. A month later, Mother Nature demonstrated her supreme indifference: on September 24, Hurricane Rita crashed into the Texas/Louisiana coast, deluging the area and pushing water back over the levees around New Orleans, which was still 80 percent covered from Katrina. Though Rita did not take the same deadly toll, the damage was incalculable.

I thought I'd seen everything. But now, as I look here at the remains of the dead and the empty eyes of their survivors, I feel utterly helpless. In the face of the annihilation of whole towns and neighborhoods, I am as lost and confused in this carnage as anyone. But then I ask myself, *Who else will account for the dead?*

I am still in the thick of it—more than 900 deaths in Louisiana alone, and I cannot see quitting anytime soon. In all, the storm has already killed 1,130 people in five states.

I take a reconnaissance helicopter flight over Cameron Parish, a coastal area near the Texas border that, since Rita, does not exist anymore. There is no town of Cameron. The only building left intact is the courthouse. Faint skeletons of what once were homes rise like matchsticks from the water, in a landscape that is desolate and eerie and that stretches as far as the eye can see.

The first person in charge I meet is Army Lieutenant General Russel Honoré, a fellow native appointed to clean up the Katrina mess and bring order to chaos. “Hi, we need tetanus,” he tells me—that is about the extent of the conversation. The general, who said Cameron Parish was the worst he had seen in his survey, would later use a single military term to describe it: *destroyed*.

The only doctor who lives in the parish is Richard Sanders, a coroner and physician. He's a good guy, and he looks like hell—sweaty, tired, haggard, and going at Mach 2. In addition to no meds, no home, and no office—all just *gone*—he has more than a hundred open or floating coffins that have emerged from the ground because of rising floodwaters. We are making a plan to retrieve the coffins when we get news that a shrimp boat is coming in with sick folks on board.

No meds. No vaccine for hepatitis. In New Orleans there were dead bodies floating down the streets

And now we have sick people coming our way. Our best defense is raw dedication—you do the best you can.

I meet an elderly couple whose home was carried about ten miles from its original address; they are on their way to the National Wildlife Refuge, which has become the Emergency Operations Center, and they need to get a tetanus shot. I had just left there, and have to give them the bad news: The Center is out of shots.

Their son gives me a ride. He has lost his home and his shop. He points to a slab where his office was. The hospital, too, is destroyed. He doesn't know how many people will rebuild, and he scoffs a little as we drive by a "hurricane-proof house" that has been decimated. It was featured in *National Geographic*, he tells me—"But that was years ago." Rita caused no deaths here because people were evacuated—in part because they remembered 1957 and Hurricane Audrey. I was nine years old at the time, and I remember that bitch, too. Katrina could have been her twin sister.

Most of the power lines are lying in the mud, and it will likely take months, if not years, to fix them. "We had to cut some wire just to get down the road—I think that may make them mad," the son tells me matter-of-factly. He strikes me as the kind of person who does what has to be done. He points yet again to a slab where relatives used to live, and stares there a little too long, giving himself away. He pretends not to notice the small crack in his veneer.

When we arrive at the courthouse, it is surrounded by military vehicles. The court clerk is there gathering records—he protected many of them before the surge. A surge is the deadliest part of the hurricane. It's basically a big dome, made by winds from the eye of the storm, that comes ashore as a wall of water. The clerk offers his office as a clinic if we need it. Inside, it's wet and already moldy, but it is standing and that is testament to the wills of these people. Some of the metal buildings are sheared off at about twenty feet above the ground. The surge must have been of tsunami proportions.

When I get back to the EOC, I talk to the doc and assure him we will get supplies. I leave with a handwritten list of medications he needs. There is no electricity. Stacks of plastic bottles filled with precious water sit in the sun. Oddly, they remind me of sandbags. The water is tepid if not downright hot, but you are glad to guzzle it down because it is clean. The heat and humidity rob you of your fluids in the merciless sun down here—even in September.

Dr. Sanders needs those meds now, and part of the reason I came here is so that he could look me in the eye and know who I am and have me as a direct contact. I put a lot of faith in seeing a man one-on-one. That's why I respect Stewart Simonson, assistant secretary for Public Health Emergency Preparedness at the Department of Health and Human Services, who met me face-to-face and has stayed true to his word. Imagine, someone from D.C. being a straight guy. He has delivered every time—not so with some of these other cover-your-ass feds. It's disgusting, and disappointing.

I made the decision to have chaplains go into the field with the recovery teams and say a prayer of thanksgiving for each person recovered. Incredibly, somebody from the ACLU had the audacity to take issue with my mixing church and state. My intent was to assure the dignity of the deceased. *No good deed goes unpunished, especially here.*

For many politicians, the point in coming down here isn't to lend a hand or to see for themselves how bad things are—it's all about the photo op! Can you imagine? Who in the hell is interested in token souvenirs when we have dead and dying?

In our makeshift morgue here, about seventy miles west of New Orleans, one of the forens

pathologists has hung a sign that reads: *Mortui vivis praecipant*. It means, “Let the dead teach the living.”

RESCUE ME

During the rescue phase immediately after the first storm, I was transporting a little old lady who was crying because she didn't know where her grandchildren were. The building she lived in was damaged and the kids were missing. I asked her why they stayed during the storm; she told me there had been so many false alarms before. . . .

I tried to calm a young EMT who had promised an elderly woman he would go back to retrieve her when he had the right equipment to extract her. Then he lost her and could not get back, and I assumed she drowned. I fear for him: he cannot rejoice in the lives he saved, because he is stuck on the one he may have lost. We in the medical business tend to focus on the losses and not celebrate the wins. . . .

It's unspeakably sad to walk into a hospital and see the evidence of trauma and step around and even over dead bodies that lie in the hallways and everywhere else. No lights. No water. No ventilation. Then you have to worry about lead poisoning (as in, getting shot), so I carry my .45 caliber Glock as I wade through the sewer and chemical hazmat of the flood. Most of the lead hazard was eliminated by the police. . . .

I opened a hospital door and two big dogs jumped out at me. Thank God they were friendly—scared the crap out of me. I tried to catch them, but they ran off. Some dog packs have taken to hunting the only food around. The smells are horrible: death, decomposition, sewage, toxic chemicals, and black mold. I got a lungful of something bad last week during a door-to-door search in an apartment complex for the elderly. I should have been more careful with wearing a mask, but I got tired and careless; it took two days to breathe right. We had to put one guy in a hyperbaric chamber. Hepatitis is a big worry. When I got my shots, I made the mistake of telling the nurse I was a doc; I think maybe she'd been dumped by a doctor, because she practically did a bone biopsy on me when she gave me my needle. Hurt like hell, but it's better than yellow eyes.

Hurricane Rita complicated things for everybody. Just as we were pumping dry from Katrina, Rita came and reopened the wound—gangrenous at that—so we will go back into the sludge and try to get our dead and help our state heal and reunite our people with their loved ones.

As Rita approached, I had twenty-eight trucks tied together at the forty-acre morgue site—they were full of human remains. It had been suggested that they be moved, but I elected to keep them here rather than have a macabre caravan of dead bodies go north.

STRESS TEST

Some do-gooder chaplain invaded my personal space one evening. I was taking a few minutes to revive myself, enjoying a sloppy joe—army rations, in fact, an MRE, meal ready to eat. Quite fitting now that I think about it, because this is as bad as any battle scene. Anyway, this chaplain comes up and sits a little too close for me to enjoy my slop. What bugs me is he's so clean—clean shirt, clean pants, clean fingernails, his hair neatly combed. He sits down right next to me. I'm on a bench, and I'm trying to go blank for a few minutes, just to get the images out of my head for a while. He interrupts me.

“How are you holding up?” he wants to know.

He gives me that TV evangelical smile—I wonder if he practices it in front of the mirror—and I am instantly irritated by his very existence.

Cool it, Lou, I tell myself. This is exactly what the guy wants.

Against my every natural urge, I'm nice, because if I go off, I'm going to *really* go off, and this guy would misinterpret it as affirmation of his intuitive worth. You know, the kind of guy who goes back and tells his buddies how much stress I was under and how he was blessed to be there for me. He'd be wrong. While he mumbles his rhetoric, I wonder how the hell he's so dry out here in the heat and humidity. You know, I've met lots of chaplains out here, and some are here for the right reasons and some are here for themselves. This guy was not the real thing, so I brushed him off. *Get the fuck away from me.*

Give me the real guy who has reddened eyelids and no smile and smells of death because that's what he's been around all day and he's got the look and his face is greasy and his sunburnt pores are clogged because he dares not wipe his face because his hands have been in gloves and he may have touched places that harbor disease from the wet sewage. He knows the deal, and he says, “Let me know if you need to talk.” He pauses and adds, “I do.” Give me that guy any day. He's the one out there with the shit with me—he knows.

This day started off at the morgue, the biggest in the world, I am told, then off to the Joint Field Office (JFO), with all the politics there, then a visit to a proposed cemetery site, then a review of public record policy, then helping local leaders in Cameron Parish, then debriefing on same, then back to the morgue and more problems re Katrina versus Rita damage, then conversations with various state and U.S. senators regarding missing persons, then prepping for an interview with the press. It has been a long one.

PRESS HERE

I repeatedly refused to speculate on the body count, nor can I understand the media's gruesome obsession with it. It is almost always the first question in every interview, and in some ways, the least relevant. I thought I would lose it with a reporter who had the temerity to ask if the body count would match that of the World Trade Center terrorist attacks. *Who thinks like that?*

I don't lie to the press. I strive to be polite, but I am direct. And I am amazed sometimes that they let me in front of a camera. This is how one interview with a correspondent from the Australian Broadcasting Corporation ended:

REPORTER: There's been talk of upwards of 10,000 bodies. I understand you've set up a morgue for 5,000 in St. Gabriel, can you tell me how big you believe your operation is going to be?

LC: Number one, we're worried about the individual and not about the number, and if there are 500 individuals, we will treat them as individuals. If there are 1,000 individuals, we will treat them as individuals. I don't know how many individuals we're going to find, I don't know how many family members we're going to find. We certainly have prayed for the dead and we're preparing for the worst, and if it's 1,000, or if it's five, we're going to do the right thing, so I don't want to speculate on numbers. As far as I'm concerned, until a body comes to my morgue I will not count that individual as a victim, because I just don't know. So I'm not going to speculate or guess on numbers, but I will tell you, yeah, I'm prepared for 5,000, but I certainly hope that doesn't happen.

The press has been both a help and a hindrance. There have been many questions about crime down here. My crew and I have been inundated with false reports. I heard stories of euthanasia, women being raped, people murdered. Police were supposedly in shoot-outs inside shelters after the storm.

When the smoke cleared and the water receded, four deaths by gunshot wounds were initially confirmed in New Orleans after Katrina. To put that in perspective, four's a typical week in the Big Easy. So while the press deserves credit for arriving at the disaster scene before the federal government did, I nonetheless fault the national media for not following up more aggressively on any of these rumors. Too often they simply accepted rumor as fact. As I told one reporter, "It's not consistent with the highest standards of journalism." In total, ten corpses were recovered from the Louisiana Superdome—contrary to urban legend, not one was a homicide.

DMORT

The tiny town of St. Gabriel, where we are based, was named after the archangel who in the Bible bears good news to people. Gabriel first appears in the Hebrew Bible in the book of Daniel. He is the messenger of God. He has high standing in the Christian faith for having announced the coming of Jesus; some Christians believe his horn will signal the second coming of Christ. In Islam, he is credited with revealing the Koran to Muhammad. He spans many faiths. What better guardian for the Disaster Portable Morgue Unit (DPMU)?

The town is now temporary headquarters for the Louisiana branch of the Disaster Mortuary Operational Recovery Team (DMORT), a mobile disaster squad made up of medical examiners, pathologists, and funeral directors from all over. (There is another in Gulfport, Mississippi.) DMORT was set up so that experts in nearby cities, acting on behalf of the federal government, could quickly relieve overwhelmed local resources in a disaster.

When a body comes through this morgue, it is decontaminated and assigned an ID number, along with an escort who will follow the body through this laborious but necessary process. A forensic pathologist will thoroughly examine the victim for any signs of foul play. To the husbands, wives, brothers, sisters, and children of the deceased, I can assure you: No one will get away with anything on my watch.

At another station, forensic dental experts take photographs and X-rays of the victim's teeth. DNA samples are also taken. Bodies and personal effects are stored in a refrigeration truck until final ID and family notification are made.

The causes of death vary. Many are drownings. We also see chronic illnesses, predisposing illnesses, ventilator-dependent patients who died when electricity was lost, not to mention acute myocardial infarctions related to the stress and the trauma. Each body that comes in is a worst-case scenario for the victim, the family, and the coroner: there's nothing worse than somebody's dying like this.

Families of missing persons call into the Family Assistance Center (FAC) on a daily basis. We've had over 16,000 calls and more than 10,000 missing persons entered into the database. *Where are they?* Some are in the morgue, unidentified. Some have washed into the river and the gulf, some may be in the marshes, some may be in their flooded homes awaiting their family's arrival. What a horribly traumatic event, to go back to a flooded home and find the decomposing human remains of a loved one there.

They find their bodies in the toxic sludge, under furniture that floated about and under the drywall ceilings that crashed down on top of them. *Why weren't they found during the searches? For lots of reasons, there is no one answer.* I am relegated by those reasons to the position of trying to control the damage those families experience. I have been in the field talking to them. It sucks!

There have been problems with the DMORT database. It wasn't set up to handle missing persons and fatalities scattered over an area the size of Great Britain. I'm told it's held together with high-tech Band-Aids. I'm not even sure what that means.

The FAC members collect all the information on an eight-page form. They list the surgeries, prosthetic devices, unique characteristics, tattoos, and personal effects of the victims. Visual identification is a rarity, owing to the condition of the bodies. There will be no open-casket funerals.

need dental records, but many were destroyed in the flood. We send dental teams out into the flooded offices to try to salvage any records. We take photos of the victims' mouths and show them to family members for identification. Forensic dentists match pictures of smiling victims to their dental photos and X-rays here at the morgue. I always have one of the Victim Relief chaplains here for support when we do this. Such reality without compassion is indeed brutality.

I see those victims smiling back at me in those family photos. I hear them say, "Find me and send me home."

Fingerprints are great tools if you can get them, but the sludge and the water and the time and the animals have not been kind to these bodies. In short, some don't have fingers for us to print.

We have the same problem with medical records. Many doctors' offices and hospitals are flooded and out of commission. We have taken total body X-rays on all the victims. I hold a chest X-ray up to the light and look at the wire pattern in the sternum of an elderly man found at a certain address. He had coronary bypass surgery. I have a lead. If I had his old chest X-ray, I could match that wire pattern and make a solid identification. Alas, the X-ray has suffered the same fate as the dental X-rays. We will not give up, we will continue the search. Every day I sit in the "IR" trailer with DMORT investigators, radiologists, forensic pathologists, and forensic dentists. Every day we try to reunite the deceased with their families. DMORT isn't some federal bureaucracy, DMORT is people—dedicated people.

There are a lot of dead folks here, and a lot of families wanting to know whether their missing loved ones are among the deceased. One of the most crucial and difficult parts of the job is to notify the families of victims and deal with their immense grief. Compounding the grief are the facts that families aren't able to view the bodies quickly, and that the bodies aren't released to the families fast enough. It's excruciating for relatives, but there is just no way I can speed the meticulous work of identifying the dead and preserving evidence of possible crimes.

As I told reporters on national television, "We won't take anybody out of the rotation or the process. To take one person out would corrupt the process." And so when folks say, "Can we speed up the process?" the answer is, unfortunately, no.

STAYING SANE

People always ask me how I stay sane doing what I do. I'm not sure what "sane" means in the profession, but it does take an emotional toll. I sometimes wonder whether maybe I've brushed my shoulders so often with Charon, that mythological ferryman of the dead, that it's caused me to question the very nature of humankind. There's a fine line between healthy skepticism and jaundiced cynicism.

If there's one thing that's helped me walk that line, it's the fact that I've kept a personal journal starting in the coroner's office of East Baton Rouge Parish in 1993. I wrote whenever it struck me, jotting notes in the field and later sketching images on a small pad as I remembered them. These were not sketches of any forensic value, but nuances that stayed with me for some reason. I wrote in my journal mostly at night, especially after a particularly troubling autopsy or a visit to an unsettling crime scene, when neither a soft pillow nor the comfort of DeAnn, my loving wife and partner, could induce slumber. The journal is about how the lives—and untimely deaths—of the people I investigated crossed my path, and how I tried to bring order and integrity to the aftermath.

I've become quite aware of the importance of these private journals because, since Katrina, I've been unable to keep up the practice to the degree I'd become accustomed. I simply haven't had the time. Other than the occasional flurry of midnight e-mails (from which this chapter evolved), I've been without my usual coping mechanism to process these experiences privately. The burden that falls, even more than usual, to De and Michael, whom I've barely seen in weeks and weeks. I miss them more than I can say.

Michael, my youngest son, is another reason for keeping these journals. I want him to be able to understand what was going on in his family during his formative years. How many eleven-year-olds go tracking across the shopping mall to describe the "splatter pattern" of a leaky garbage can that has been moved across the floor? "Look, Dad, they stopped here for a second—see how the drops fell straight down? They started back up this way, and hey, look, over here they started speeding up. I guess they figured out they had a leak, huh?" Kids do tend to listen to our conversations, don't they? Michael once accused me of going to the movies without him—he found trace evidence of a popcorn hull on me. Actually, I was innocent: I had had popcorn at the office earlier. At any rate, I just want to give him some perspective as he wanders down life's road and takes his place in society. He may find it helpful later to reflect on how my years on the job affected him.

As coroner, I have served as the state's official witness to the worst that humanity has to offer. I've investigated some of the most despicable crimes and violent deaths imaginable, have held the limbs of bodies of innocent children. Nothing, not even the profound inhumanity of serial killers like Derrick Todd Lee and Lee Boyd Malvo and John Allen Muhammad, can compare to the sheer devastation of Katrina and Rita. Yet in many ways, it seems that everything I've done in my professional life has been training for these last terrible weeks. The stories that come later in this book trace my evolution not just as a doctor but as a human being. The people I met, the families I counseled, the mistakes I made, the crimes I helped solve—these were my training ground, I see now, for the biggest challenge of my life.

I didn't have a survivor's guide when I got into the coroner business. I certainly could have used one, though. I don't think one exists. Maybe this will help some of the other folks who get into the

vocation and have to deal with and reconstruct the details of a person's final minutes or moments before death comes.

Be forewarned. This book is no *CSI: Cajun Country*. I'm not a polished movie star, we don't rely on special effects, and the stories of the people who are left holding the pieces can't fit neatly into a one-hour episode. It's about emotional survival on the battlefield of death investigation. Death will walk with us.

On the surface my job seems quite simple. I pursue the cause, time, and manner of death. My responsibilities are to the deceased, the survivors, and society at large. There are times when I feel it is the survivors who suffer the longest if not the most. The violent or unexpected death of a close friend or loved one can shake the foundations of a person's existence. Some of those left behind in the aftermath of a death may suffer from pathological grief disorders or post-traumatic stress disorders. They live with recurring nightmares and intrusive thoughts that can plunge them downward into an abyss of severe depression and hopelessness.

And as a coroner, I, too, have tasted from that deadly cup. At times, I've come away from crime scenes and autopsies with a tainted worldview: tainted by anger that I strive not to bring home; tainted by skepticism turned to cynicism; tainted by fear. That taint has been lessened in part by people like Caron Whitesides and Wanda Hebert, who have worked with me for years and shown me how to salvage some good from the bad.

There is a truth I accept on this matter: *If you don't deal with a horrible or traumatic event, it will deal with you. There is no escape.* In recent weeks I'm having trouble taking my own advice. I accept the reality of the situation, do my duty to the best of my ability, and deal with the emotional consequences.

NOT OVER YET

I have witnessed unbelievably selfless acts from fellow coroners, rescue workers, and medical teams from around the country. I have been inspired by the downright unflappable spirit of the people around Cameron and the natives of New Orleans—it makes me proud to be from Louisiana. But there is no solace when you look at the hurt in the eyes of the survivors. It is my obligation to do it right; 99 percent is a failing grade. The feds will go away, but I will not.

What went wrong? Why weren't the local, state, and federal governments prepared to cope with a hurricane or disaster of this magnitude? I'm sure politicians will appoint committees to investigate, well they should, and the blame will fly faster than the mud in a political race down here. I sure as hell can't explain it—truth is, I'm not even going to try, at least not here. All I want to do here is to assure the survivors that dignity for the dead is my only agenda.

Finally, I ask readers to forgive such an incomplete accounting. There aren't words invented yet to describe the depth of despair—or courage—in this corner of the world I love so much. No one person can attempt to tell this story. And it is not over yet.

Gotta go.

—*Lou Cataldie*

September 29, 2005

TWO

Coroner

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