



February 13, 2026

Subject: Report on 2026 Accidental Overdose Deaths

The enclosed report includes preliminary data of accidental overdose deaths in the City and County of San Francisco from **January 01, 2026** to **January 31, 2026**. This report satisfies the ordinance's reporting criteria. The preliminary number of accidental overdose deaths from January 01, 2026 to January 31, 2026 is **53**.

The preliminary number of accidental overdose deaths involving **Fluoro Fentanyl, Bromazolam, Medetomidine, Fentanyl, Cocaine, Methamphetamine, Morphine, Methadone, Oxycodone, Codeine, Oxymorphone, Hydromorphone, Heroin** and from January 01, 2026 to January 31, 2026 are as follows:

- Fentanyl, 37
- Cocaine, 31
- Methamphetamine, 30
- Morphine, 5
- Methadone, 5
- Oxycodone, 4
- Codeine, 4
- Oxymorphone, 2
- Hydromorphone, 2
- Heroin, 1
- Fluoro Fentanyl, 3
- Bromazolam, 1
- Medetomidine, 1

The reports are published by the Office of the Chief Medical Examiner (OCME), Forensic Laboratory Division, to comply with local and state reporting guidelines and further OCME's mission to provide neutral data to inform policymakers. Please note, these results are preliminary as of testing to February 13, 2026, and are subject to change as the OCME finalizes the manner and cause of each death.

Pertinent for accurate use of these reports is understanding the source of the data and its subsequent summarization process. Decedent demographic and case information were obtained from the OCME case management system. Additionally, specific details from investigator narratives, forensic toxicology results, and where available, preliminary autopsy findings, were utilized. Collected demographic information included race, gender, age, fixed address status, fixed address location, and death location.

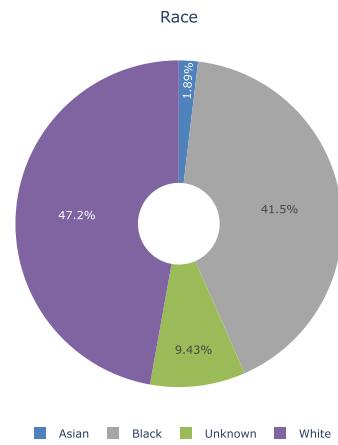
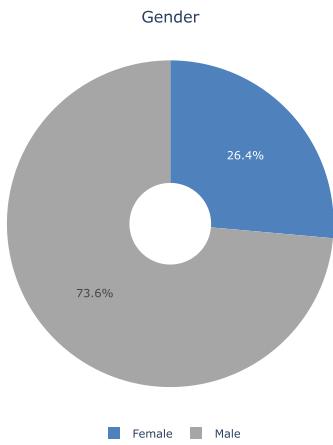
Due to their significance in accidental overdose deaths, the reported drugs for open cases were specific to fentanyl, heroin, medicinal opioids, methamphetamine and cocaine. Their detection in blood was captured to best determine relevance in each case. Medicinal opioid-positive cases required the presence of codeine, hydrocodone, oxycodone, morphine, hydromorphone, oxymorphone, buprenorphine, tramadol, and/or methadone. Heroin-likely determination was more closely evaluated, requiring the presence of specific heroin markers in blood or urine, expected morphine to codeine ratios, and/or case details consistent with heroin use. Closed casework included any drug and alcohol-involved accidental overdose where the death has been certified.

Sincerely,

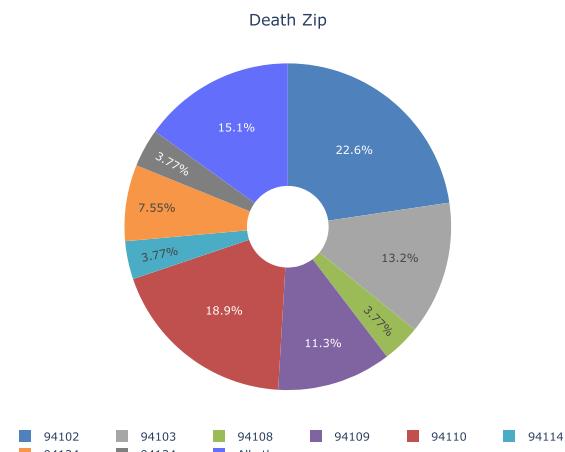
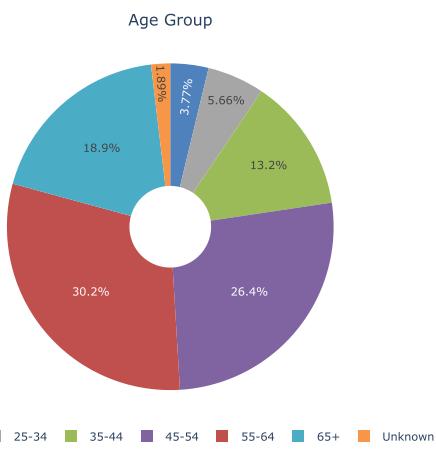
A handwritten signature in blue ink, appearing to read "Luke N. Rodda".

Luke N. Rodda, Ph.D. MRACI CChem
Chief Forensic Toxicologist and Director, Forensic Laboratory Division

cc: Office of the City Administrator
enclosures: Preliminary Accidental Drug Overdose Data Reports for January 2025 through September 2025



"Gender" refers to gender at time of death.

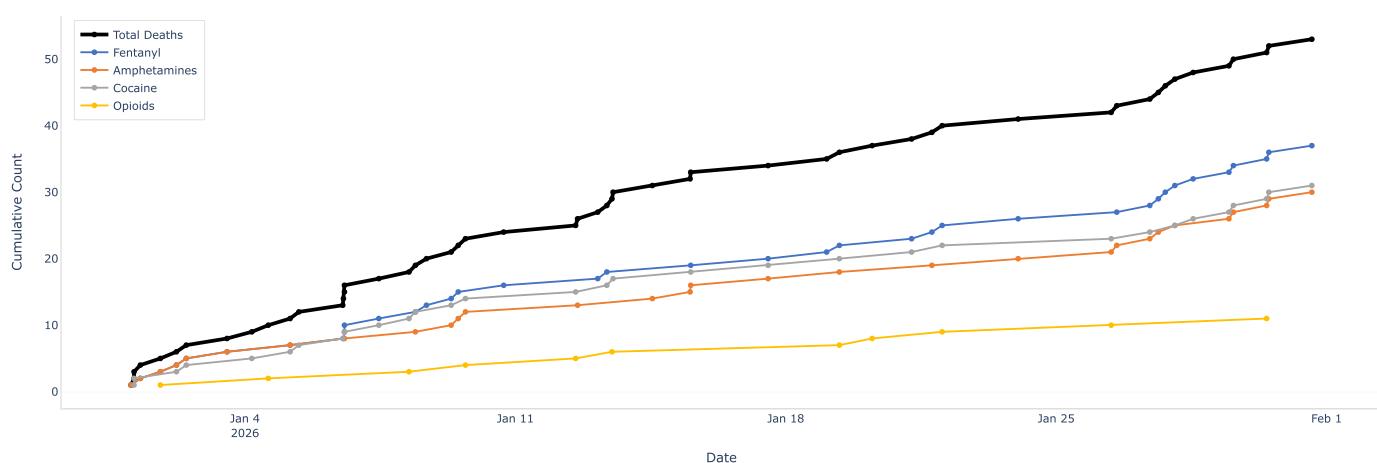


"Death Location" denotes the specific location to which the relevant agencies were called upon to locate the decedent.

For "Death Location", the 4 most affected neighborhoods are represented, the "Others (non-SF)" category refers to all out county addresses, and the "Others (SF)" category refers to all other zip codes within the City and County of San Francisco.

Cumulative Cases

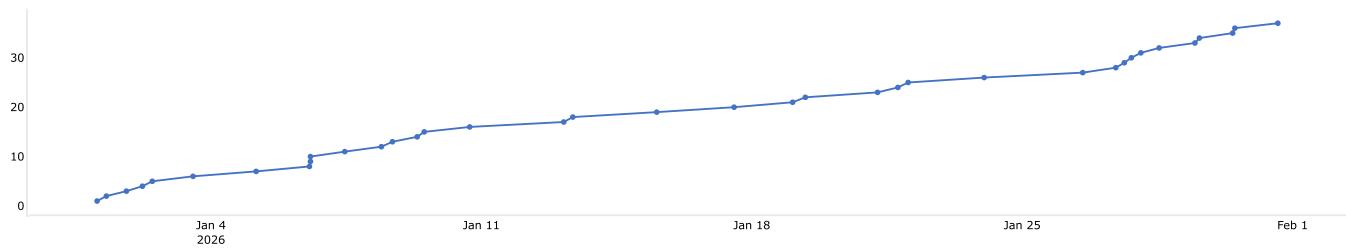
Cumulative Overdose Deaths & Drug Classes



"Total Deaths" denotes Accidental Overdoses where one or more drugs contribute to the cause of death; however, every point for each drug series is inclusive, but not necessarily exclusive, of that drug. "Total deaths" represents all accidental overdoses including ones for drugs not specified above.

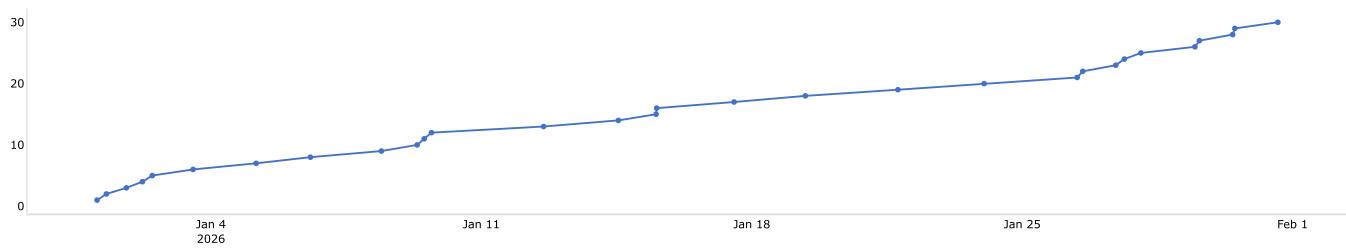
Fentanyl Trends

Breakdown: Fentanyl



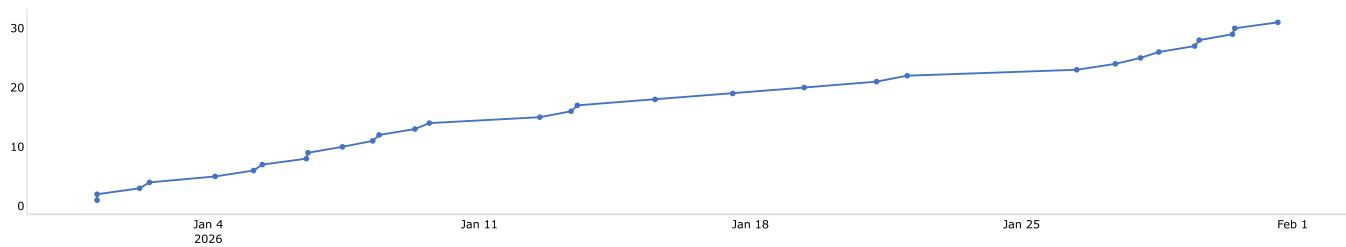
Amphetamines Trends

Breakdown: Amphetamines



Cocaine Trends

Breakdown: Cocaine



Opioids Trends

Breakdown: Opioids

