

ARMED FORCES INSTITUTE OF PATHOLOGY Office of the Armed Forces Medical Examiner

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FINAL AUTOPSY EXAMINATION REPORT

Name: BTB Abid, Ismail Hammed
ISN:(b)(6)

Date of Birth:(b)(6)

Date of Death:(b)(6)

Date of Autopsy: 5 February 2005

Date of Report: 29 March 2005

Autopsy No.: (b)(6)

AFIP No. (b)(6)

Rank: Civilian

Place of Death: Iraq

Place of Autopsy: Army Mortuary

Camp Victory, Iraq

Circumstances of Death: This 29-year-old male was a civilian detainee shot during a prison disturbance.

Authorization for Autopsy: Office of the Armed Forces Medical Examiner, IAW 10 USC 1471.

Identification: Identification is established by means of the attached identification tags.

CAUSE OF DEATH: Gunshot wound of the chest.

MANNER OF DEATH: Homicide.

FINAL AUTOPSY DIAGNOSES

- Perforating gunshot wound of the chest:
 - A. Entry: left side of the back.
 - B. No evidence of soot or gunpowder stippling is present on the skin around the entrance wound.
 - C. Path: skin of the back, the left 8th rib, left lung, descending aorta, right lung, right 6th and 7th ribs, skin of the right chest.
 - D. Exit: right lateral chest.
 - E. Direction: left to right, back to front and upward.
 - F. Associated injury:
 - 1. Fracture of the posterior lateral aspect of the left 8th rib.
 - 2. Fractures of the lateral aspect of the right 6th and 7th ribs.
 - 3. Perforating laceration of the descending aorta.
 - a. Bilateral hemothoraces (right 500 ml, left 1000 ml).
 - 4. Esophageal laceration.
 - Perforating laceration of the middle and lower lobes of the right lung.
 - 6. Perforating laceration of the lower lobe of the left lung.
- No significant natural diseases identified, within limitations of the examination.
- III. Toxicology: Negative.

EXTERNAL EXAMINATION

The body is that of a well-developed, well-nourished male that weighs approximately 181 pounds, is 67 inches in length and appears compatible with the reported age of 29 years. Lividity is fixed on the posterior surface of the body except in areas exposed to pressure. Rigor is complete. The scalp hair is black. A black beard and mustache are also present. The irides are dark. The corneae are cloudy. The conjunctivae are unremarkable. The sclerae are white. The external auditory canals, external nares and oral cavity are free of foreign material and abnormal secretions. The teeth are natural and in good condition. The neck is straight, and the trachea is midline and mobile. The chest shows evidence of injury to be further described below. The abdomen is flat. The fingernails are intact. The upper and lower extremities are symmetric. Identification tags are present on the 1st toe of each foot, bearing the name BTB (b)(6)

The genitalia are those of a normal adult male. The buttocks and anus are unremarkable.

CLOTHING AND PERSONAL EFFECTS

The following clothing items and personal effects accompany the body:

- A 1000 Dinar bank note.
- 2. An identification card in Arabic.

3. A band with (b)(6) a photo and demographic information.

EVIDENCE OF MEDICAL THERAPY

I. An endotracheal tube.

EVIDENCE OF INJURY

The ordering of the following injuries is for descriptive purposes only, and is not intended to imply order of infliction or relative severity. All wound pathways are given relative to standard anatomic position.

Perforating gunshot wound of the chest:

There is a gunshot wound of entrance situated on the left side of the back located 18 ½ inches below the top of the head and 6 inches left of the posterior midline. The wound measures 1/8 inch. There is eccentric marginal abrasion ranging in width from 1/16 inch to 1/8 inch in the 3 to 12 o'clock position. A 1/16 inch laceration is located in the 2 o'clock position. No evidence of soot or gunpowder stippling is present on the skin around the entrance wound. The wound path passes through the skin of the back, the left 8th rib, left lung, descending aorta, right lung, right 6th and 7th ribs and skin of the right chest. An exit wound is present on the right side of the chest located 16 inches below the top of the head and 6 1/2 inches right of the anterior midline. The exit wound measures 1/4 x ¼ inch. The trajectory of the gunshot wound is left to right, back to front and upward. No projectile or projectile fragments are recovered from the wound track. Associated with the gunshot wound are fracture of the posterior lateral aspect of the left 8th rib, fractures of the lateral aspect of the right 6th and 7th ribs, perforating laceration of the descending aorta, bilateral hemothoraces (500 ml on the right and 1000 ml on the left), laceration of the esophagus, perforating lacerations of the middle and lower lobes of the right lung and perforating laceration of the lower lobe of the left lung.

INTERNAL EXAMINATION

HEAD:

The scalp is reflected. The calvarium of the skull is removed. The leptomeninges are thin and delicate. Coronal sections demonstrate sharp demarcation between white and grey matter. The ventricles are of normal size. The brain weighs 1508 gm. The atlanto-occipital joint is stable.

NECK:

The anterior strap muscles of the neck are homogenous and red-brown, without hemorrhage. The thyroid cartilage and hyoid are intact. The larynx is lined by intact white mucosa. The thyroid is symmetric and red-brown. The tongue is free of bite marks, hemorrhage, or other injuries.

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BODY CAVITIES:

(See above "Evidence of Injury")

The sternum is visibly and palpably intact. No excess fluid is present in the pericardial or peritoneal cavities. The organs occupy their usual anatomic positions.

RESPIRATORY SYSTEM:

(See above "Evidence of Injury")

The right and left lungs weigh 267 and 264 gm, respectively. The uninjured external surfaces are smooth and deep red-purple. The uninjured pulmonary parenchyma is diffusely congested and edematous. No mass lesions or areas of consolidation are present.

CARDIOVASCULAR SYSTEM:

(See above "Evidence of Injury")

The 350 gm heart is contained in an intact pericardial sac. The epicardial surface is smooth, with minimal fat investment. The coronary arteries arise normally, follow the usual distribution and are widely patent without evidence of significant atherosclerosis or thrombosis. The myocardium is homogenous, red-brown, and firm. The valve leaflets are thin and mobile. The endocardium is smooth and glistening. The ascending aorta gives rise to three intact and patent arch vessels. The renal and mesenteric vessels are unremarkable.

LIVER & BILIARY SYSTEM:

The 1295 gm liver has an intact, smooth capsule and a sharp anterior border. The parenchyma is tan-brown and congested, with the usual lobular architecture. No mass lesions or other abnormalities are seen. The gallbladder contains approximately 10 ml of green-black bile. The mucosal surface is green and velvety. The extrahepatic biliary tree is patent.

SPLEEN:

The 126 gm spleen has a smooth, intact, red-purple capsule. The parenchyma is maroon and congested, with distinct Malpighian corpuscles.

PANCREAS:

The pancreas is soft and yellow-tan, with the usual lobular architecture. No mass lesions or other abnormalities are seen.

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ADRENALS:

The right and left adrenal glands are symmetric, with bright yellow cortices and grey medullae. No masses or areas of hemorrhage are identified.

GENITOURINARY SYSTEM:

The right and left kidneys each weigh 122 gm. The external surfaces are intact and smooth. The cut surfaces are red-tan and congested, with uniformly thick cortices and sharp corticomedullary junctions. The pelves are unremarkable and the ureters are normal in course and caliber. Tan bladder mucosa overlies an intact bladder wall. The bladder contains approximately 10 ml of clear amber urine. The prostate is normal in size, with lobular, yellow-tan parenchyma. The seminal vesicles are unremarkable. The testes are free of mass lesions, contusions, or other abnormalities.

GASTROINTESTINAL TRACT:

(See above "Evidence of Injury")

The uninjured esophagus is lined by smooth, grey-white mucosa. The stomach contains approximately 60 ml of tan flocculent material. The gastric wall is intact. The duodenum, loops of small bowel, colon, and appendix are unremarkable.

MICROSCOPIC EXAMINATION

Selected portions of organs are retained in formalin, without preparation of histologic slides.

ADDITIONAL PROCEDURES/REMARKS

- Documentary photographs are taken by the OAFME staff photographer.
- Specimens retained for toxicologic testing and/or DNA identification are: blood, vitreous, bile, gastric contents, spleen, liver and urine.
- Full body radiographs are obtained. No definitive projectile or fragments are identified radiographically.
- The dissected organs are forwarded with the body.
- Personal effects are released to the attending investigative agency and appropriate mortuary operations representatives.

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OPINION

This 29-year-old male civilian detainee died of a gunshot wound to the chest. There was no evidence of close range firing on the skin around the entrance wound. The gunshot wound passed through the thoracic cavity causing hemorrhage and injury to internal organs. A projectile was not recovered.

The m (b)(6)	anner of death is homicide.
(b)(6)	Medical Examiner

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