



ARMED FORCES INSTITUTE OF PATHOLOGY
Office of the Armed Forces Medical Examiner
1413 Research Blvd., Bldg. 102
Rockville, MD 20850
1-301-319-0000



FINAL AUTOPSY REPORT

Name: Nassir Jabrin, Umar Sa'ad
ISN: (b)(6)
Date of Birth: (BTB) (b)(6) 1985
Date of Death: (b)(6) 2007
Date of Autopsy: 9 Apr 2007 @ 1300
Date of Report: 11 May 2007

Autopsy No.: (b)(6)
AFIP No.: (b)(6)
Rank: Detainee
Place of Death: Iraq
Place of Autopsy: Port Mortuary
Dover AFB, DE

Circumstances of Death: This 22 year-old Saudi detainee was found deceased in a garbage dumpster.

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

Identification: Presumptive identification is established by a wrist identification band. Post-mortem fingerprints, dental examination, and a specimen suitable for DNA analysis are obtained.

CAUSE OF DEATH: **Multiple Blunt Force Injuries Complicated by Manual Strangulation and Chest Compression**

MANNER OF DEATH: **Homicide**

FINAL AUTOPSY DIAGNOSES:

I. Multiple Blunt Force Injuries:

A. Head and Neck:

1. Diffuse bilateral scleral hemorrhage
2. Abrasion of the forehead, $\frac{3}{4}$ x $\frac{1}{2}$ -inch
3. Bilateral periorbital contusions
4. Contusions of the upper and lower lips and oral mucosa
5. Abrasion of the left side of the nose, $\frac{1}{4}$ -inch
6. Abrasions of the right side of the face, 1-inch, and right side of the neck, 2-inches
7. Contusion of the right side of the neck, 1 x $\frac{1}{2}$ -inch
8. Abrasion of the left side of the neck, $\frac{3}{8}$ -inch
9. Contusion of the posterior neck, 2 x 1-inch
10. Diffuse subgaleal hemorrhage
11. Hemorrhage in both temporalis muscles

B. Torso:

1. Contusion of the left side of the chest and abdomen, 9 x 1-inch
2. Abrasion of the left side of the chest, 1-inch
3. Patterned contusion of the left lower quadrant of the abdomen and left hip, 3 x 3-inches
4. Patterned abrasion of the right lower quadrant of the abdomen, $2\frac{1}{2}$ x 1-inch
5. Contusion of the upper right back, $1\frac{1}{4}$ x $\frac{3}{4}$ -inch
6. Patterned contusion of the upper right back, 3 x 2-inches
7. Contusion of the lower mid back, $\frac{3}{4}$ x $\frac{1}{2}$ -inch
8. Right hemothorax, 200 ml
9. Fractures of the anterior left ribs, 2nd-9th
10. Fractures of the left pubis and ischium
11. Fracture of the right ischium
12. Fractures of the left transverse processes of the 2nd-4th lumbar vertebral bodies
13. Fracture of the right sacroiliac joint
14. Rupture of the left and right hemidiaphragm with associated displacement of abdominal contents into the thorax
15. Rupture of the stomach with gastric contents in the left thorax
16. Mesenteric hemorrhage
17. Laceration of the right adrenal gland, 0.5 cm
18. Right periadrenal hemorrhage

C. Extremities:

1. Contusion of the right elbow, 1 x $\frac{3}{4}$ -inch
2. Contusion of the left shoulder, $2\frac{3}{4}$ x 1 $\frac{3}{4}$ -inches
3. Abrasion of the left shoulder, $\frac{1}{4}$ x $\frac{1}{8}$ -inch
4. Contusion of the left arm, $2\frac{1}{2}$ x $\frac{1}{2}$ -inch
5. Abrasion of the left axilla, $\frac{3}{4}$ x $\frac{1}{8}$ -inch

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6. Contusion of the anterior right thigh, 8 x ½-inch
7. Abrasions (2) of the right leg, ¼-inch and 1/8-inch
8. Contusion of the left buttock, 2 x 1-inch
9. Contusions (2) of the anterior left thigh, 3 x 2-inches and 4 x 1 ½-inches

II. Evidence of Manual Strangulation and Chest Compression

A. Neck:

1. Diffuse bilateral scleral hemorrhage (see I. A. 1.)
2. Numerous bilateral petechial hemorrhages of the upper chest
3. Diffuse bilateral hemorrhage of the anterior and posterior neck musculature
4. Diffuse hemorrhage of the thyroid
5. Contusion of the right side of the neck, 1 x ½-inch (see I.A.7.)
6. Abrasion of the left side of the neck, 3/8-inch (see I.A.8.)
7. Contusion of the posterior neck, 2 x 1-inch (see I.A.9.)
8. Hyoid bone and thyroid cartilage intact

III. Evidence of natural disease: See addendum for cardiovascular pathology

IV. No evidence of medical intervention

V. Identifying marks or tattoos: Vertical scar on mid chest, 8-inch

VI. Toxicology (AFIP):

- A. Volatiles: No ethanol is detected in the blood or vitreous fluid
- B. Drugs: No screened drugs of abuse or medications are detected in the blood
- C. Carbon Monoxide: The carboxyhemoglobin saturation in the blood is less than 1%¹
- D. Cyanide: No cyanide is detected in the blood

¹ Carboxyhemoglobin saturations of 0-3% are expected for non-smokers.

EXTERNAL EXAMINATION

The body is that of a well-developed, well-nourished appearing, 65-inch tall, 103 pound male whose appearance is consistent with the reported age of 22 years. Lividity is on the posterior torso and posterior extremities and fixed. Rigor is passing, and the temperature is cool.

The scalp is covered with 1 1/2-inch long straight brown hair in a normal distribution. Facial hair consists of a moustache and beard. The irides are brown, the corneae are cloudy, the conjunctivae are unremarkable, the sclerae are diffusely hemorrhagic bilaterally and the pupils are round and equal in diameter. The external auditory canals are clear. The ears are not pierced. The nares are patent with blood present bilaterally. The nose and maxillae are palpably stable. The teeth appear natural.

The neck is straight, and the trachea is midline and mobile. The chest is symmetric. The abdomen is soft and flat. The genitalia are those of a normal adult male. Pubic hair is present in a normal distribution. The buttocks and anus are unremarkable.

The upper and lower extremities are symmetric and without clubbing or edema. Please refer to the evidence of injury section for injury to the torso and extremities.

CLOTHING AND PERSONAL EFFECTS

The following clothing items and personal effects are present on the body at the time of autopsy:

- Yellow pants
- Three video cameras
- Four cassette tapes
- One USB cable
- Two silver cases labeled "Mobile Disk External Data Storage"
- Two unknown silver electronic accessory items

MEDICAL INTERVENTION

- No evidence of medical intervention

RADIOGRAPHS

A complete set of postmortem radiographs is obtained and demonstrates the following:

- Skeletal trauma to the torso as noted below

EVIDENCE OF INJURY

I. Multiple Blunt Force Injuries:

A. Head and Neck:

There is an abrasion of the forehead, $\frac{3}{4} \times \frac{1}{2}$ -inch. There are bilateral periorbital contusions. There is diffuse bilateral scleral hemorrhage. There are contusions of the upper and lower lips and oral mucosa, $\frac{1}{4}$ -inch to $2 \times \frac{1}{2}$ -inch. There is an abrasion of the left side of the nose, $\frac{1}{4}$ -inch. There is an abrasion of the right side of the face, 1-inch, and an abrasion of the right side of the neck, 2-inches. There is diffuse subgaleal hemorrhage. There is hemorrhage in both temporalis muscles.

B. Torso:

There is a contusion of the left side of the chest and abdomen, 9×1 -inch. There is abrasion of the left side of the chest, 1-inch. There is a semi-circular patterned contusion of the left lower quadrant of the abdomen and left hip, 3×3 -inches. There is a contusion of the right upper back, $1 \frac{1}{4} \times \frac{3}{4}$ -inch. There is a semi-circular patterned contusion of the right upper back, 3×2 -inches. There is a contusion of the mid lower back, $\frac{3}{4} \times \frac{1}{2}$ -inch. There are fractures of the anterior 2nd-9th left ribs. There is a right hemothorax, 200 ml. There is rupture of the left and right hemidiaphragm with associated displacement of the abdominal contents into the thorax. There is rupture of the stomach with gastric contents in the left thorax. There is hemorrhage of the mesentery. There is a laceration of the right adrenal gland, 0.5 cm, and right periadrenal hemorrhage. There are fractures of the left pubis and ischium, right ischium, and right sacroiliac joint. There are fractures of the left transverse processes of the 2nd-4th lumbar vertebral bodies.

C. Extremities:

There is a contusion of the left shoulder, $2 \frac{3}{4} \times 1 \frac{3}{4}$ -inches, and an abrasion of the left shoulder, $\frac{1}{4} \times \frac{1}{8}$ -inch. There is a contusion of the right arm, $2 \frac{1}{2} \times \frac{1}{2}$ -inch. There is a contusion of the right elbow, $1 \times \frac{3}{4}$ -inch. There is an abrasion of the left axilla, $\frac{3}{4} \times \frac{1}{8}$ -inch. There is a contusion of the anterior right thigh, $8 \times \frac{1}{2}$ -inch. There are two (2) contusions of the anterior left thigh, 3×2 -inches and $4 \times 1 \frac{1}{2}$ -inches. There is a contusion of the left buttock, 2×1 -inch. There are two (2) abrasions of the right leg, $\frac{1}{4}$ -inch and $\frac{1}{8}$ -inch.

II. Evidence of Manual Strangulation and Chest Compression:

A. Head and Neck:

There is diffuse bilateral scleral hemorrhage. There is a contusion of the right side of the neck, $1 \times \frac{1}{2}$ -inch. There is a contusion of the left side of the neck, $\frac{3}{8}$ -inch. There is a contusion of the posterior neck, 2×1 -inch. There is diffuse bilateral hemorrhage of the anterior and posterior neck musculature. There is diffuse bilateral hemorrhage of the thyroid. The hyoid bone and thyroid cartilage are intact.

B. Torso:

There are numerous bilateral petechial hemorrhages of the upper chest.

INTERNAL EXAMINATION

HEAD:

See "Evidence of Injury". The calvarium is intact, as is the dura mater beneath it. Clear cerebrospinal fluid surrounds the 1550 gm brain, which has unremarkable gyri and sulci. Coronal sections demonstrate sharp demarcation between white and grey matter, without hemorrhage or contusive injury. The ventricles are of normal size. The basal ganglia, brainstem, cerebellum, and arterial systems are free of injury or other abnormalities. There are no skull fractures.

NECK:

Separate anterior and posterior neck dissections are performed. See "Evidence of Injury". The thyroid cartilage and hyoid bone are intact. The larynx is lined by intact white mucosa. The thyroid gland is symmetric and hemorrhagic, without cystic or nodular change. The tongue is free of bite marks, hemorrhage, or other injuries.

BODY CAVITIES:

See "Evidence of Injury". The sternum and vertebral bodies are visibly and palpably intact. No excess fluid is in the left pleural and peritoneal cavities. The organs occupy their usual anatomic positions.

RESPIRATORY SYSTEM:

The right and left lungs weigh 230 and 210 gm, respectively. The external surfaces are smooth and deep red-purple. The pulmonary parenchyma is moderately congested and edematous. No areas of consolidation are present.

CARDIOVASCULAR SYSTEM:

The heart weighs 390 gm and is adherent to the chest wall. The heart is sent for cardiovascular pathology evaluation (see addendum). The aorta gives rise to three intact and patent arch vessels. The renal and mesenteric vessels are unremarkable.

LIVER & BILIARY SYSTEM:

The 1050 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 10 ml of green-black bile and no stones. The mucosal surface is green and velvety. The extrahepatic biliary tree is patent.

SPLEEN:

The 70 gm spleen has a smooth, intact, red-purple capsule. The parenchyma is maroon and congested, with distinct Malpighian corpuscles.

PANCREAS:

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

ADRENALS:

See "Evidence of Injury". The right and left adrenal glands have bright yellow cortices and grey medullae. No non-traumatic lesions are seen.

GENITOURINARY SYSTEM:

The right and left kidneys weigh 120 and 100 gm, respectively. The external surfaces of the kidneys are intact and smooth. The cut surfaces are pale tan, with uniformly thick cortices and sharp corticomedullary junctions. The pelves are unremarkable and the ureters are normal in course and caliber. Grey-pink bladder mucosa overlies an intact bladder wall. The bladder contains 10 ml of clear yellow 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 "Evidence of Injury". The esophagus is intact and lined by smooth, grey-white mucosa. There are 100 ml of tan semi-solid gastric contents in the left thorax. The duodenum, loops of small bowel and colon are unremarkable. The appendix is present.

MUSCULOSKELETAL SYSTEM:

Dissection of the subcutaneous tissue of the back and both upper and lower extremities is performed. See "Evidence of Injury". There are no non-traumatic bone or joint abnormalities. Skeletal muscle development is normal.

ADDITIONAL PROCEDURES

- Documentary photographs are taken by OAFME staff photographers
- Full body radiographs are obtained
- Specimens retained for toxicological testing and/or DNA identification are: blood, spleen, liver, brain, bile, urine, gastric contents, vitreous, psoas muscle, adipose tissue, lung and kidney
- The dissected organs are forwarded with body
- The heart is retained for consultation
- Selected portions of organs are retained in formalin, without preparation of histological slides
- Personal effects are released to the appropriate mortuary operations representatives

OPINION

This 22 year-old male (b)(6) died of multiple blunt force injuries complicated by manual strangulation and chest compression. There were blunt force injuries to the head, neck, torso, and upper and lower extremities. There were injuries to the head, neck and torso consistent with manual strangulation and chest compression. Toxicological testing for ethanol, drugs of abuse, medications, and cyanide was negative. The carboxyhemoglobin concentration was less than 1%. The manner of death is homicide.

(b)(6)

(b)(6) Medical Examiner

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(b)(6) Medical Examiner

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ADDENDUM

DIAGNOSIS (b)(6) **Congenital heart disease:**

1. **Pulmonic stenosis with subvalvular fibrous band, status post valvuloplasty**
2. **Bicuspid aortic valve**
3. **Patch repair of atrial septal defect**

History: 22 year old Iraqi detainee found in a garbage bag at internment facility; sternotomy scar noted at autopsy

Heart: 280 grams; diffuse fibrous pericardial adhesions and 2 x 1 cm hematoma on posterior surface of left ventricle at apex; patch repair of atrial septal defect; normal left ventricular chamber dimensions: left ventricular cavity diameter 25 mm, left ventricular free wall thickness 13 mm, ventricular septum thickness 15 mm; right ventricular hypertrophy: right ventricle thickness 7 mm; endocardial thickening, right ventricle; pulmonic stenosis: endocardial fibrous band below pulmonic valve extending inferiorly from commissures of anterior and right pulmonic cusps, absent left pulmonic cusp; thickened tricuspid valve leaflets; bicuspid aortic valve: conjoined anterior leaflet with midline raphe between left and right coronary cusps; suture material and fibrosis, anterior right ventricle; histologic sections show mild subendocardial interstitial fibrosis, posterior left ventricle, otherwise unremarkable endocardium; focal bone marrow embolus, epicardial coronary artery, anterior left ventricle

Coronary arteries: Normal ostia; right dominance; no gross atherosclerosis

Comment: The primary abnormality appears to be pulmonic stenosis, possibly arising in a bicuspid pulmonic valve. However, because there has been prior valvuloplasty, the morphology of the pulmonic valve has been altered and the original pathologic condition cannot be determined with certainty. Also, the coincidence of bicuspid pulmonic and aortic valves is extremely rare.

(b)(6)

Cardiovascular Pathologist

Blocks made: 5 heart
Slides made: 5 H&E

CERTIFICATE OF DEATH (OVERSEAS) Acte de décès (D'Outre-Mer)			
NAME OF DECEASED (Last, First, Middle) Nom du décédé (Nom et prénoms) Nassir Jabrin, Umar Sa'ad,		GRADE Grade	BRANCH OF SERVICE Arme Civilian
ORGANIZATION Organisation Iraqi Detainee		NATION (e.g. United States) Pays Saudi Arabia	SOCIAL SECURITY NUMBER Numéro de l'Assurance Social (b)(6)
		DATE OF BIRTH Date de naissance (b)(6) 1985	SEX Sexe <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE
RACE Race		MARITAL STATUS État Civil	
<input checked="" type="checkbox"/> CAUCASOID Caucasique		<input type="checkbox"/> SINGLE Célibataire	<input type="checkbox"/> DIVORCED Divorcé
<input type="checkbox"/> NEGROID Négre		<input type="checkbox"/> MARRIED Marié	<input type="checkbox"/> SEPARATED Séparé
<input type="checkbox"/> OTHER (Specify) Autre (Spécifier)		<input type="checkbox"/> WIDOWED Veuf	<input type="checkbox"/> JEWISH Juif
NAME OF NEXT OF KIN Nom du plus proche parent		RELATIONSHIP TO DECEASED Parenté du décédé avec le sus.	
STREET ADDRESS Domicile à (Rue)		CITY OR TOWN OR STATE (Include ZIP Code) Ville (Code postal compris)	
MEDICAL STATEMENT Déclaration médicale			
CAUSE OF DEATH (Enter only one cause per line) Cause du décès (N'indiquer qu'une cause par ligne)			INTERVAL BETWEEN ONSET AND DEATH Intervalle entre l'attaque et le décès
DISEASE OR CONDITION DIRECTLY LEADING TO DEATH Maladie ou condition directement responsable de la mort.			Multiple blunt force injuries complicated by manual strangulation and chest compression
ANTECEDENT CAUSES Symptômes précurseurs de la mort.	MORBID CONDITION, IF ANY, LEADING TO PRIMARY CAUSE Condition morbide, s'il y a lieu, menant à la cause primaire		
	UNDERLYING CAUSE, IF ANY, GIVING RISE TO PRIMARY CAUSE Condition morbide, s'il y a lieu, menant à la cause primaire		
OTHER SIGNIFICANT CONDITIONS Autres conditions significatives			
MODE OF DEATH Condition de décès	AUTOPSY PERFORMED Autopsie effectuée <input checked="" type="checkbox"/> YES Oui <input type="checkbox"/> NO Non	CIRCUMSTANCES SURROUNDING DEATH DUE TO EXTERNAL CAUSES Circonstances de la mort suscitées par des causes extérieures	
<input type="checkbox"/> NATURAL Mort naturelle	MAJOR FINDINGS OF AUTOPSY Conclusions principales de l'autopsie		
<input type="checkbox"/> ACCIDENT Mort accidentelle	NAME OF PATHOLOGIST Nom du pathologiste (b)(6)		
<input type="checkbox"/> SUICIDE Suicide	SIGNATURE (b)(6)	DATE Date 9 April 2007	AVIATION ACCIDENT Accident à Avion <input type="checkbox"/> YES Oui <input checked="" type="checkbox"/> NO Non
<input checked="" type="checkbox"/> HOMICIDE Homicide			
DATE OF DEATH (day, month, year) Date du décès (le jour, le mois, l'année) (b)(6) 2007 (b)(6)	PLACE OF DEATH Lieu de décès Iraq		
I HAVE VIEWED THE REMAINS OF THE DECEASED AND DEATH OCCURRED AT THE TIME INDICATED AND FROM THE CAUSES AS STATED ABOVE. J'ai examiné les restes mortels du défunt et je conclus que le décès est survenu à l'heure indiquée et à la suite des causes énumérées ci-dessus.			
(b)(6)		Medical Examiner	
GRADE Grade (b)(6)	INSTALLATION OR ADDRESS Installation ou adresse Dover AFB, Dover DE		
DATE Date 5/15/2007	SIGNATURE (b)(6)		
<small>1. State disease, injury or complication which caused death, but not mode of death. 2. State conditions contributing to the death, but not related to the disease or condition causing death. 3. Préciser la nature de la maladie, de la blessure ou de la complication qui a contribué à la mort, mais non la manière de mourir, telle qu'un arrêt du cœur, etc. 4. Préciser la condition qui a contribué à la mort, mais n'ayant aucun rapport avec la maladie ou la condition qui a provoqué la mort.</small>			

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REPLACES DA FORM 3565, 1 JAN 72 AND DA FORM 3565-R(PAS), 26 SEP 76, WHICH ARE OBSOLETE.

MEDCOM 0923