



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



FINAL AUTOPSY REPORT

Name: Muhammad, Khavri Naim

CID#: (b)(6)

Date of Birth: (b)(6) 1972

Date of Death: (b)(6) 07 (Found)

Date/Time of Autopsy: 06 MAR 2007 @ 1100

Date of Report: 06 JUL 2007

Autopsy No.: (b)(6)

AFIP No.: (b)(6)

Rank: Civilian, Detainee

Place of Death: Iraq

Place of Autopsy: Port Mortuary,
Dover AFB, Dover, DE

Circumstances of Death: This 34 year-old civilian detainee was interned at Compound 3-C, Camp Remembrance II, Theater Internment Facility, Camp Cropper, Baghdad, Iraq when, as reported, he was found unresponsive in a latrine stall with a pair of yellow trousers tied around his neck.

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

Identification: Presumptive identification by examination of papers in case file. Post-mortem specimen suitable for DNA analysis is obtained.

CAUSE OF DEATH: Asphyxia due to strangulation

MANNER OF DEATH: Homicide

FINAL AUTOPSY DIAGNOSES

- I. Strangulation:**
- A. A nearly contiguous ligature mark is around the neck
 - B. Petechiae of conjunctivae of the right and left, upper and lower eyelids and the mucosa of the upper lip
 - C. Hemorrhage of the left sterno-hyoid muscle, 1 x 1/4 inch
 - D. Hemorrhage of the soft tissue surrounding the left horn of the hyoid bone, 1/4 x 1/4 inch
 - E. Hemorrhage of the posterior spinous muscle beneath the ligature mark, 1/2 x 1/2 inch
 - F. Additional injuries:
 - 1. Abrasion of the left side of the forehead, 2-1/2 x 1 inch
 - 2. Subgaleal hemorrhage, left parietal, 2 x 1 inch
 - 3. Subgaleal hemorrhage, occiput, 1/4 x 1/4 inch
 - 4. Hemorrhage of the left temporalis muscle, 3 x 2 inches
 - 5. Abrasion of the head of the left clavicle, 1/4 x 1/4 inch
 - 6. Abrasion of the right side of the chest, 3/4 x 1/4 inch
 - 7. Abrasion of the left side of the lower back, 1/4 x 1/4 inch
 - 8. Abrasions (3) of the left elbow, ranging from 1/2 inch to 3/4 inch in greatest dimension
 - 9. Contusion of the sacrum, 2 x 1 inch
 - 10. Contusion of the left buttock, 2 x 1 inch
- II. Other findings:**
- A. Edematous lungs:
 - 1. Right lung, 720 grams (expected 360-570 grams)
 - 2. Left lung, 710 grams (expected 325-480 grams)
- III. Evidence of medical intervention:** None
- IV. Natural disease:** Adhesions of the right lung
- V. Post-mortem changes:**
- A. Lividity is fixed on the posterior surface of the body except in the areas exposed to pressure
 - B. Rigor is resolving in all four extremities
 - C. Cloud corneae
- VI. Recovered evidence:**
- A. Hand bags
 - B. Nail clippings and fingernail clipper
 - C. White fibers from back of white t-shirt and red fiber from yellow shirt
- VII. Toxicology (AFIP):**
- A. VOLATILES: No ethanol detected in the blood and vitreous fluid

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- B. DRUGS: No screened drugs of abuse/medications detected in the urine
- C. CARBON MONOXIDE: The carboxyhemoglobin saturation in the blood was 4% as determined by spectrophotometry with a limit of quantitation of 1%.¹
- D. CYANIDE: None detected in the blood

VIII. Microscopic examination: Lung, right lower lobe – focal intra-alveolus edema and vascular congestion

¹ Carboxyhemoglobin saturations of 0-3% are expected for non-smokers and 3-10% for smokers.

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EXTERNAL EXAMINATION

The body is that of a well-developed, well-nourished male. The body is 68 inches in length, weighs 120 pounds, and appears compatible with the stated age of 34 years old. The body is cold. Lividity is fixed on the posterior surface of the body except in the areas exposed to pressure. Rigor is resolving in all four extremities.

Injury to the head and neck are described in "Evidence of Injury". The head is normocephalic. The scalp hair is grey-black and straight. Facial hair consists of a thin moustache and stubble. The irides are brown. The corneae are cloudy. The conjunctivae are congested with petechiae of both upper and lower eyelids. The sclerae are white. The external auditory canals contain dried blood. The oral cavity and nares are free of foreign material or abnormal secretions. The nasal skeleton is palpably intact. The oral mucosa of the upper lip has petechiae. The teeth are natural and in poor condition. There is a 1 x 1/8 inch scar on the bottom of the chin at the midline.

The chest is symmetric. The genitalia are those of an adult, circumcised male. The upper and lower extremities are symmetric and without clubbing or edema. The fingernails are intact. There is a 2 x 1/4 inch scar on the posterior right arm. There is a 1-1/2 x 1/8 inch scar on the posterior right forearm. There is a 2 x 1/8 inch scar on the posterior left wrist. There is a 1 inch area of hyperpigmented skin on the anterior left hip. There is a 1/4 inch scar on the posterior left leg.

CLOTHING AND PERSONAL EFFECTS

The body is clad a yellow shirt (with blood on the left shoulder), white t-shirt, yellow trousers, and white underwear. Brown paper evidence bags are secured over both hands. On the yellow shirt is a red fiber. On the white t-shirt (between the t-shirt and yellow shirt) is a white fiber. On the left wrist is an ID tag with the name (b)(6)

(b)(6)

MEDICAL INTERVENTION

There is no evidence of medical intervention.

RADIOGRAPHS

A complete set of post-mortem radiographs is obtained.

EVIDENCE OF INJURY**I. Strangulation:**

A nearly contiguous ligature mark is around the neck consisting primarily of a red abrasion. At the anterior midline, the ligature mark is 1/4 inch wide and located 10-1/2 inches below the top of the head. To the left of the anterior midline, the ligature mark is directed upward at a 10 degree angle. To the right of the anterior midline, the ligature mark is directed upward at a 10 degree angle. At the left ear, the ligature mark is 1/2 inch wide and located 9-1/2 inches below the top of the head. The ligature mark continues across the posterior neck. At the posterior midline, the ligature mark is 1 inch wide and 9-1/4 inches below the top of the head. At the right ear, the ligature mark is 1/4 inch wide and located 9-1/2 inches below the top of the head.

Petechiae are noted on the conjunctivae of the right and left, upper and lower eyelids and the mucosa of the upper lip. Separate anterior neck dissection

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shows a 1 x 1/4 inch hemorrhage of the left sterno-hyoid muscle and a 1/4 x 1/4 inch hemorrhage of the soft tissue surrounding the left horn of the hyoid bone. The hyoid bone and thyroid cartilage are intact. A separate posterior neck dissection shows a 1/2 x 1/2 inch hemorrhage of the spinous muscle beneath the ligature mark.

II. Additional injuries:

There is a 2-1/2 x 1 inch abrasion of the left side of the forehead. There is a 2 x 1 inch subgaleal hemorrhage of the left parietal and a 1/4 x 1/4 inch subgaleal hemorrhage of the occiput. There is a 3 x 2 inch hemorrhage of the left temporalis muscle.

On the head of the left clavicle is a 1/4 x 1/4 inch abrasion. There is a 3/4 x 1/4 inch abrasion of the right side of the chest. There is a 1/4 x 1/4 inch abrasion of the lower left back. On the left elbow are three (3) abrasions that range from 1/2 inch to 3/4 inch in greatest dimension. Posterior superficial incisions reveal a 2 x 1 inch contusion of the sacrum and a 2 x 1 inch contusion of the left buttock.

INTERNAL EXAMINATION

HEAD: (CENTRAL NERVOUS SYSTEM)

See "Evidence of Injury". The scalp is reflected. The calvarium of the skull is removed. The dura mater and falx cerebri are intact. The leptomeninges are thin and delicate. The cerebral hemispheres are symmetrical. The structures at the base of the brain are intact. Coronal sections through the cerebellum and transverse sections through the brainstem and cerebellum reveal no lesions. The brain weighs 1520 grams.

NECK:

See "Evidence of Injury". The thyroid cartilage and hyoid are intact. The thyroid is symmetric and red-brown, without cystic or nodular change. The larynx is lined by intact white mucosa.

BODY CAVITIES:

The ribs, sternum, and vertebral bodies are visibly and palpably intact. There is no excess fluid in any of the body cavities. There are multiple dense adhesions of the right lung. The organs occupy their usual anatomic positions.

RESPIRATORY SYSTEM:

The upper airway is clear of debris and foreign material; the mucosal surfaces are smooth, yellow-tan and unremarkable. There are multiple dense adhesions of the lobes of the right lung. The right and left lungs weigh 720 and 710 grams, respectively (expected, 360 – 570 gram right lung and 325 – 480 gram left lung). The pulmonary parenchyma is red-purple exuding moderate amounts of blood. No mass lesions are present. The diaphragm is intact. The pulmonary arteries are normally developed and patent without thrombus or embolus.

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CARDIOVASCULAR SYSTEM:

The heart weighs 390 grams (expected 224 – 446 grams for body length). The pericardial surfaces are smooth, glistening and unremarkable. The pericardial sac is free of significant fluid or adhesions. There is increased epicardial fat. The coronary arteries follow their usual course and are widely patent. The atrial and ventricular septum are intact. The valves are unremarkable. The left ventricular septum measures 1.3 centimeters and the left ventricular free wall measures 1.2 centimeters. The right ventricular free wall is 0.3 centimeters thick. The aorta and its major branches arise normally and follow the usual course. There is mild non-calcific atherosclerotic disease of the aorta. The vena cava and its major tributaries return to the heart in the usual distribution and are free of thrombi.

LIVER & BILIARY SYSTEM:

The 1530 gram liver has an intact, smooth capsule and a sharp anterior border. The parenchyma is moderately congested and tan-brown with the usual lobular architecture. No mass lesions or other abnormalities are seen. The gallbladder contains 8 milliliters of green bile. The extrahepatic biliary tree is patent.

SPLEEN:

The 210 gram (expected 150 - 200 grams) spleen has a smooth, intact, red-purple capsule. The parenchyma is maroon with unremarkable lymphoid follicles.

PANCREAS:

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

ADRENALS:

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

GENITOURINARY SYSTEM:

The right and left kidneys weigh 120 and 130 gm, respectively. The external surfaces are intact and smooth. The cut surfaces are red-tan. The pelves are unremarkable and the ureters are normal in course and caliber. White bladder mucosa overlies an intact bladder wall. The bladder contains 20 milliliters of yellow urine. The prostate gland and testes are unremarkable.

GASTROINTESTINAL TRACT:

The esophagus is intact and lined by smooth, grey-white mucosa. The stomach contains 150 milliliters of partially digested food particles. The stomach, colon, and appendix are unremarkable.

MUSCULOSKELETAL:

Muscle development is normal. No bone or joint abnormalities are identified.

MICROSCOPIC EXAMINATION

Lung, right lower lobe - focal intra-alveolus edema and vascular congestion

ADDITIONAL PROCEDURES

1. Documentary photographs are taken by OAFME staff photographers.
2. Full body radiographs are obtained and demonstrate the injuries as described.
3. Specimens retained for toxicology testing and/or DNA identification are: Blood, vitreous fluid, bile, urine, liver, lung, kidney, spleen, brain, psoas muscle, adipose tissue and gastric contents.
4. The dissected organs are forwarded with the body.
5. Selected portions of organs are retained in formalin.
6. Personal effects are released to the appropriate mortuary operations representatives.
7. Recovered evidence: As described above, released to CID.
8. Superficial incisions of the posterior surface of the body and extremities (See Evidence of Injury)

OPINION

This 34 year-old male (b)(6) died of asphyxia due to strangulation. The toxicology screen was negative. The manner of death is homicide.

(b)(6)

(b)(6) Medical Examiner

(b)(6)

(b)(6) Medical Examiner

CERTIFICATE OF DEATH (OVERSEAS) Acte de décès (D'Outre-Mer)			
NAME OF DECEASED (Last, First, Middle) Nom du défunt (Prénoms et nom de famille) Muhammad, Khayri, Naim		GRADE Grade Civilian	BRANCH OF SERVICE Arme Civilian
ORGANIZATION Organisation		NATION (U.S. United States) Pays Iraq	DATE OF BIRTH Date de naissance (b)(6) 1972
		SOCIAL SECURITY NUMBER Numéro de l'Assurance Sociale (b)(6)	
		SEX Sexe <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
RACE Race		MARRIAGE STATUS Stat. Civ.	
<input checked="" type="checkbox"/> CAUCASIAN Caucasien		<input type="checkbox"/> SINGLE Célibataire	
<input type="checkbox"/> NEGRO Négresse		<input type="checkbox"/> DIVORCED Divorcé	
<input type="checkbox"/> OTHER (Specify) Autre (Spécifier)		<input type="checkbox"/> SEPARATED Séparé	
		<input checked="" type="checkbox"/> PROTESTANT Protestant	
		<input type="checkbox"/> CATHOLIC Catholique	
		<input type="checkbox"/> JEWISH Juif	
NAME OF NEXT OF KIN Nom du plus proche parent		RELATIONSHIP TO DECEASED Rapport du défunt avec le suc	
STREET ADDRESS Adresse à (Rue)		CITY OR TOWN OR STATE (Indiquer ZIP Code Vite (Code postal complet))	
MEDICAL STATEMENT Déclaration médicale			
CAUSE OF DEATH (Enter only one cause per line) Cause du décès (Préciser toute cause per ligne)			INTERVAL BETWEEN ONSET AND DEATH Intervalle entre l'apparition et le décès
DISEASE OR CONDITION DIRECTLY LEADING TO DEATH Maladie ou condition directement responsable de la mort			Asphyxia due to strangulation
ANTECEDENT CAUSES Symptômes précursifs de la mort	MORIBUND CONDITION IF ANY, LEADING TO PRIMARY CAUSE Condition moribonde, s'il y a lieu, menant à la cause principale		
	UNDESIRABLE CAUSE, IF ANY, GIVING RISE TO PRIMARY CAUSE Condition mortelle, s'il y a lieu, menant à la cause principale		
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 survenues par des causes extérieures	
<input type="checkbox"/> NATURAL Mort naturelle	SIGNATURE Signature (b)(6)		AVIATION ACCIDENT Accident d'Avion <input type="checkbox"/> YES Oui <input checked="" type="checkbox"/> NO Non
<input type="checkbox"/> ACCIDENT Mort accidentelle	DATE Date 6 March 2007		
<input checked="" type="checkbox"/> HOMICIDE Homicide	DATE OF DEATH (day, month, year) Date du décès (en jour, le mois, l'année) (b)(6) 2007		PLACE OF DEATH Lieu de décès
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 constaté que le décès est survenu à l'heure indiquée et à la suite des causes énumérées ci-dessus.			
NAME OF MEDICAL OFFICER Nom du médecin militaire ou du médecin sénior		TITLE OR DEGREE Titre ou diplôme	
(b)(6)			
GRADE Grade (b)(6)		INSTALLATION OR ADDRESS Installation ou adresse Dover AFB, Dover DE	
DATE Date 3/6/2007		(b)(6)	

DD FORM 1300 2064

REPLACES DA FORM 1300, 1 JAN 72 AND DA FORM 1300-SP-1, 16 SEP 71, WHICH ARE OBSOLETE.

MEDCOM 0931

(REMOVE, REVERSE AND RE-INSERT CARDS BEFORE COMPLETING THIS SIDE)

DISPOSITION OF REMAINS			
NAME OF MORTICUARY PREPARING REMAINS	CODE	LICENSE NUMBER AND STATE	OTHER
INSTALLATION OR ADDRESS	DATE	SIGNATURE	
NAME OF CEMETERY OR CREMATORY	LOCATION OF CEMETERY OR CREMATORY		
TYPE OF DISPOSITION		DATE OF DISPOSITION	
REGISTRATION OF VITAL STATISTICS			
REGISTRY (FORM 510-500)	DATE REGISTERED	FILE NUMBER	
		STATE	OTHER
NAME OF FUNERAL DIRECTOR	ADDRESS		
SIGNATURE OF AUTHORIZED INDIVIDUAL			

DD FORM 2864, APR 1977 (BACK)

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