



ARMED FORCES INSTITUTE OF PATHOLOGY
Office of the Armed Forces Medical Examiner
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Rockville, MD 20850
1-800-944-7912



FINAL AUTOPSY REPORT

Name: believed to be **Hamza Hassad Twfeek Najm Byaty Al-Zubydy**

SSAN: n/a, Enemy PW (b)(6)

Date of Birth: Unknown, appears middle aged

Date of Death: (b)(6) 2003 (b)(6)

Date of Autopsy: 24 August 2003

Date of report: 29 September 2003

Autopsy No: (b)(6)

AFIP No. (b)(6)

Rank: n/a

Place of Death: Diwania, Iraq

Place of Autopsy: 54th QM Co,
Baghdad Intl. Airport, Iraq

Circumstances of Death: The decedent was an enemy prisoner of war detainee at the Biap prison who was being transported in a bus when he became short of breath, hypotensive and tachycardic. A medic with the 115th MP Battalion administered an IV bolus, which briefly improved his symptoms and signs, but he soon arrested. When examined later in the day by a physician, rigor and lividity were established, but "no visible markings, wounds, lesions, deformity" were seen. No body temperature was recorded in the records available for review.

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

Identification: Positive identification is not established because of a lack of antemortem exemplars. Postmortem dental exam and x-rays, DNA specimen and fingerprints are obtained for possible future reference.

CAUSE OF DEATH: Undetermined atraumatic cause

MANNER OF DEATH: Natural

FINAL AUTOPSY DIAGNOSES:

- I. No evidence of significant natural disease, within the limitations of this autopsy.
- II. No evidence of trauma
- III. Toxicological examination
 - Blood and urine were negative for ethanol
 - Blood was negative for prescription and illicit drugs

EXTERNAL EXAMINATION

The body is that of a well-developed, well-nourished appearing 72 inch tall, 210 pounds (estimated), middle eastern male who appears middle aged. (Date of birth is unknown.). Lividity is inapparent due to postmortem changes. Rigor is passed, and the temperature is cold.

MI: (b)(6)

(b)(6)

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The scalp is covered with black, straight, long hair in a normal distribution and there is a full beard and mustache. The irides are difficult to determine due to cloudy cornea, but appear brown, and the pupils are round and equal in diameter. The external auditory canals are free of blood and unusual secretions. The ears are unremarkable. The nares are patent and the lips are atraumatic. The nose and maxillae are palpably stable. The teeth appear natural and in fair repair.

The neck is straight, and the trachea is midline and mobile. The chest is symmetric. The abdomen is flat. The genitalia are those of a normal adult male. The testes are descended and free of masses. 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.

CLOTHING AND PERSONAL EFFECTS

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

- Green knee-length shirt
- Buff colored boxer shorts

MEDICAL INTERVENTION

- A 500 mL bag of lactated Ringer's solution connected to an IV cannula that apparently fell out of the right antecubital fossa.

RADIOGRAPHS

Radiographs are unavailable at this location.

EVIDENCE OF INJURY

There is no evidence of injury following a complete postmortem examination.

Decompositional changes consist of skin slippage, marbling, foul odor and a green color to the anterior thorax and abdomen.

INTERNAL EXAMINATION

HEAD:

The galeal and subgaleal soft tissues of the scalp are free of injury. The calvarium is intact, as is the dura mater beneath it. Clear cerebrospinal fluid surrounds the 1400 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. 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, without cystic or nodular change. The tongue is free of bite marks, hemorrhage, or other injuries. There is no soot staining of the larynx or the trachea.

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Incision and dissection of the posterior neck demonstrates no deep paracervical muscular injury and no cervical spine fractures.

BODY CAVITIES:

The ribs, sternum, and vertebral bodies are visibly and palpably intact. No excess fluid is in the right pleural, pericardial, or peritoneal cavities, although there is scant decomposition fluid. The organs occupy their usual anatomic positions.

RESPIRATORY SYSTEM:

The right and left lungs weigh 950 gm and 1050 gm, respectively. The external surfaces are smooth and deep red-purple. The pulmonary parenchyma is diffusely congested and edematous. No mass lesions or areas of consolidation are present.

CARDIOVASCULAR SYSTEM:

The 270 gm heart is contained in an intact pericardial sac. The epicardial surface is smooth, with minimal fat investment. The coronary arteries are present in a normal distribution, with a right-dominant pattern. Cross sections of the vessels show no significant atherosclerotic cardiovascular disease. The myocardium is homogenous, red-brown, and firm. The valve leaflets are thin and mobile. The endocardium is smooth and glistening. The aorta gives rise to three intact and patent arch vessels. The renal and mesenteric vessels are unremarkable.

LIVER & BILIARY SYSTEM:

The 1250 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 15 mL of green-black bile and no stones. The mucosal surface is green and velvety. The extrahepatic biliary tree is patent.

SPLEEN:

The 260 gm spleen has a smooth, intact, red-purple capsule. The parenchyma is maroon and diffluent, with indistinct Malpighian corpuscles.

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 grey medullae. No masses or areas of hemorrhage are identified.

GENITOURINARY SYSTEM:

The right and left kidneys weigh 75 gm and 75 gm, respectively. 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. White bladder mucosa overlies an intact bladder wall. The bladder contains approximately 170 mL of hazy, pink urine. The prostate is normal in size, with nodular, yellow-tan parenchyma.

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The seminal vesicles are unremarkable. The testes are free of mass lesions, contusions, or other abnormalities.

GASTROINTESTINAL TRACT:

The esophagus is intact and lined by smooth, grey-white mucosa. The stomach contains approximately 100 mL of grey, pasty, partially digested, unrecognizable food. The gastric wall is intact. The duodenum, loops of small bowel, and colon are unremarkable. The appendix is present.

ADDITIONAL PROCEDURES

- Documentary photographs are taken by OAFME photographer (b)(6)
- No trace evidence is collected.
- Specimens retained for toxicologic testing and/or DNA identification are: cavity blood, liver, spleen, urine, gastric contents, brain, bile, and psoas muscles.
- The dissected organs are forwarded with the body.

MICROSCOPIC EXAMINATION

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

OPINION

This Middle Eastern male, believed to be (b)(6) died as a result of an unknown non-traumatic and nontoxic cause. The manner of death is natural.

(b)(6)

Armed Forces Medical Examiner System

(b)(6)

CERTIFICATE OF DEATH (OVERSEAS) Acte de décès (D'Outre-Mer)			
NAME OF DECEASED (Last, First, Middle) Nom du décédé (Nom et prénoms) 3TBHamza Hassad, Twfeek Najm, Byaty Al-Zubydy		GRADE Grade	BRANCH OF SERVICE Arme
ORGANIZATION Organisation Detainee in Iraq		NATION (e.g., United States) Pays Iraq	DATE OF BIRTH Date de naissance
RACE Race		MARITAL STATUS État Civil	
<input checked="" type="checkbox"/> CAUCASOID Caucasique	<input type="checkbox"/> NEGROID Nègre	<input type="checkbox"/> SINGLE Célibataire	<input type="checkbox"/> DIVORCED Divorcé
<input type="checkbox"/> OTHER (Specify) Autre (Spécifier)	<input type="checkbox"/> WIDOWED Veuf	<input type="checkbox"/> SEPARATED Séparé	<input 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 Parenté du décédé avec le sué	
STREET ADDRESS Domicile à (Rue)		CITY OR TOWN AND STATE (Include ZIP Code) Ville (Code postal compris)	
MEDICAL STATEMENT Déclaration médicale			
CAUSE OF DEATH (Enter only once 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			Undetermined atraumatic cause
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 Raison fondamentale, s'il y a lieu, ayant suscité la cause primaire		
OTHER SIGNIFICANT CONDITIONS ² Autres conditions significatives ²			
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 checked="" type="checkbox"/> NATURAL Mort naturelle	MAJOR FINDINGS OF AUTOPSY Conclusions principales de l'autopsie		
<input type="checkbox"/> ACCIDENT Mort accidentelle			
<input type="checkbox"/> SUICIDE Suicide			
<input type="checkbox"/> HOMICIDE Homicide			
NAME OF PATHOLOGIST Nom du pathologiste (b)(6)		DATE Date 24 Aug 2003	AVIATION ACCIDENT Accident à Avion <input type="checkbox"/> YES Oui <input checked="" type="checkbox"/> NO Non
DATE OF DEATH (Hour, day, month, year) Date du décès (Heure, le jour, le mois, l'année) (b)(6) 2003		PLACE OF DEATH Lieu de décès Diwania, 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 dé funt et je conclus 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 sanitaire (b)(6)		TITLE OR DEGREE Titre ou diplôme Armed Forces Medical Examiner	
GRADE Grade (b)(6)	INSTALLATION OR ADDRESS Installation ou adresse Dover AFB, DE 19902 (b)(6)		
DATE Date 14 MAIDY			
¹ State disease, injury or complication which ² State conditions contributing to the death. ¹ Préciser la nature de la maladie, de la blessure ou de la complication qui a contribué à la mort, mais n'ayant aucun rapport avec la maladie ou la condition qui a provoqué la mort. ² 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.			

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REPLACES DA FORM 1345, 1 JAN 72 AND DA FORM 1345-RIPAS, 24 SEP 75, WHICH ARE OBSOLETE.

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