

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

1413 Research Blvd., Bldg. 102 Rockville, MD 20850 1-800-944-7912



FINAL AUTOPSY EXAMINATION REPORT

Name: BTB Tawfeeek,	Salmany
ISN(b)(6)	
Date of Birth: (b)(6)	1977
Date of Death (b)(6)	2005
Date of Autopsy: 5 Feb	ruary 200
Date of Report: 05 Apr	

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 27-year-old male was a civilian detainee who was 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 head.

MANNER OF DEATH: Homicide.

FINAL AUTOPSY DIAGNOSES

- Perforating gunshot wound of the head:
 - A. Entry: right posterior parietal region of head
 - B. No evidence of soot or gunpowder stippling is present on the skin around the entrance wound.
 - C. Path: skin of right posterior parietal scalp, right posterior parietal region of the skull, right cerebral hemisphere of the brain, right parietal region of the skull.
 - D. Projectile: yellow metal fragment recovered.
 - E. Exit: right parietal region of the head.
 - F. Direction: back to front and upwards.
 - G. Associated injuries:
 - Multiple linear fractures of the right parietal and vertex regions of the calvarium.
 - Perforating laceration of the right cerebral hemisphere.
 - 3. Subgaleal hemorrhage in the biparietal and occipital regions.

- II. Additional injuries:
 - A. Circular abrasions on left lateral chest, left upper arm, right forearm and the left thigh.
- III. Toxicology: Negative.

EXTERNAL EXAMINATION

The body is that of a well-developed, well-nourished male that weighs approximately 182 pounds, is 67 inches in length and appears compatible with the reported age of 27 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. Facial hair consists of a black beard and mustache. 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 is unremarkable. The abdomen is flat. The upper and lower extremities are symmetric. The numeral "2" is written on the dorsum of the right hand. The fingernails are intact. A 2 ½ x ½ inch band-like hyperkeratotic area is present on the dorsal surface of both feet. An identification tag is present on the right 1st toe bearing "BTB (b)(6)

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

CLOTHING AND PERSONAL EFFECTS

The following personal effects accompany the body:

A 5000 Dinar bank note.
 A band with (b)(6)
 demographic information.
 a photo and

EVIDENCE OF MEDICAL THERAPY

- 1. An endotracheal tube.
- A nasogastric tube.
- Intravascular catheters are present in the left antecubital fossa and right inguinal region.
- 4. A therapeutic needle puncture site in the right antecubital fossa.
- 5. A Foley catheter.
- Defibrillator pads on the right upper and left lateral chest.

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 head:

There is an atypical gunshot wound of entrance situated in the right posterior parietal region of the head located 1 ½ inches below the top of the head and 2 ¼ inches right of the posterior midline. The wound measures ¾ x 1/8 inch. There is eccentric marginal abrasion located infero-medially having an average width of 1/8 inch. No evidence of

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soot or gunpowder stippling is present on the skin around the entrance wound. The adjacent internally beveled skull defect measures ½ x ¼ inch. The wound path passes through the skin of the right posterior parietal scalp, right posterior parietal region of the skull and the skull, right cerebral hemisphere of the brain, right parietal region of the skull and the right parietal scalp. A stellate exit wound is present in the right parietal region of the head located on the top of the head, centered 2 ½ inches right of the anterior midline. The exit wound measures 4 ½ x 2 ½ inches. The trajectory of the gunshot wound is back to front and upward. A 1 mm yellow metal fragment is recovered from the right parietal subgaleal region. Associated with the gunshot wound are multiple linear fractures of the right parietal and vertex regions of the calvarium, perforating laceration of the right cerebral hemisphere and subgaleal hemorrhage in the biparietal and occipital regions.

Additional injury:

There are multiple circular abrasions averaging 1/4 inch in diameter distributed as follows:

- 1. Left mandibular region of the face.
- 2. Left lateral surface of the chest (2).
- Posterior surface of the right forearm.
- 4. Anterior surface of the left upper arm.
- 5. Posterior lateral surface of the left thigh.

INTERNAL EXAMINATION

HEAD:

(See above "Evidence of Injury").

The scalp is reflected. The calvarium of the skull is removed. The leptomeninges are thin and delicate. Coronal sections demonstrate sharp demarcation between the uninjured white and grey matter. The ventricles are of normal size. The brain weighs 1550 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.

BODY CAVITIES:

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

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RESPIRATORY SYSTEM:

The right and left lungs weigh 385 and 291 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 324 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 1184 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 less than 5 ml of green-black bile. The mucosal surface is green and velvety. The extrahepatic biliary tree is patent.

SPLEEN:

The 61 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.

ADRENALS:

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

GENITOURINARY SYSTEM:

The right kidney weighs 70 gm; the left 103 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 is empty. 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:

The esophagus is lined by smooth, grey-white mucosa. The stomach contains approximately 100 ml of tan gray 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 OAFME staff photographer (b)(6)

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- Specimens retained for toxicologic testing and/or DNA identification are: blood, vitreous, bile, gastric contents, spleen and liver.
- Full body radiographs are obtained and demonstrate the injuries as described.
 Scattered minute metallic fragments are seen radiographically in the region of the head wound.
- The dissected organs are forwarded with the body.
- The recovered metallic fragment is placed in a labeled container and released to the attending investigative agents.
- Personal effects are released to the appropriate mortuary operations representatives.

OPINION

This 27-year-old male civilian detained died of a gunshot wound to the head. There was no evidence of close range firing on the skin around the entrance wound. The gunshot wound passed through the head causing extensive injury to the skull and brain. A single projectile fragment was recovered.

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