



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



**AUTOPSY EXAMINATION REPORT**

<b>Name:</b> Khalaf Al Fahadawi, Layith Husayn	<b>Autopsy No.:</b> (b)(6)
<b>ISN:</b> (b)(6)	<b>AFIP No.:</b> (b)(6)
<b>Date of Birth:</b> (b)(6) 1980	<b>Rank:</b> Detainee
<b>Date of Death:</b> (b)(6) 2007	<b>Place of Death:</b> Iraq
<b>Date/Time of Autopsy:</b> 17 NOV 2007 @ 1100	<b>Place of Autopsy:</b> Port Mortuary, Dover Air Force Base, Dover, DE
<b>Date of Report:</b> 29 NOV 2007	

**Circumstances of Death:** Initial reports state that this detainee (b)(6) (b)(6) was brought by fellow detainees to security forces with faint signs of life.

**Authorization for Autopsy:** Armed Forces Medical Examiner, per 10 U.S. Code 1471

**Identification:** Accompanying documentation establishes presumptive identification.

**CAUSE OF DEATH:** Asphyxia by Smothering

**MANNER OF DEATH:** Homicide

### **EXTERNAL EXAMINATION**

The body is that of a well-developed, well-nourished Caucasoid male. The body weighs 144 pounds and measures 67-1/2 inches in length. Lividity is fixed on the posterior surfaces of the body. Rigor is passing. The body temperature is cold to touch. Decomposition changes consist of mild skin slippage on the chest, back, right foot, and left ankle.

Injuries of the head are described below. The scalp is covered with straight brown hair of medium length in a normal distribution. The irides are brown, the corneae are hazy, the conjunctivae are pale, and the sclerae are white. The external auditory canals are clear of debris. The ears are unremarkable. The nares are clear of debris. The nose and maxillae are palpably stable. The teeth are natural and in good condition. The neck is straight, and the trachea is midline and mobile.

Injuries of the torso are described below. The chest is symmetric. The abdomen is flat. The genitalia are those of a normal adult circumcised male. The testes are descended. Pubic hair is present in a normal distribution. The back is symmetric. The anus is unremarkable.

Injuries of the extremities are described below. The upper and lower extremities are symmetric. The fingernails are intact and clipped for evidence. Identifying marks are not present.

### **CLOTHING AND PERSONAL EFFECTS**

No clothing items or personal effects are present on the body at the time of autopsy.

### **MEDICAL INTERVENTION**

Medical intervention present on the body at the time of autopsy includes:

- Defibrillator pads on the right chest and left flank
- Cardiac monitor leads on the anterior torso
- Triple lumen catheter, left subclavian region
- Oral endotracheal intubation
- Intravascular catheter, left ante-cubital fossa

### **RADIOGRAPHS**

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

- No bony fractures
- No metallic foreign bodies

**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.

**I. Evidence of asphyxia by smothering**

On the right corner of the upper lip is a 1/2" x 1/8" abrasion. A 1" x 1/9" abrasion is on the left corner of the upper lip. Along the lower lip is a 1" x 1/8" abrasion.

**II. Blunt force injuries**

**A. Head and neck**

A 1/8" abrasion is on the left side of the forehead and a 1/4" x 1/8" abrasion on the front of the neck.

**B. Torso**

A 5" x 3-1/4" contusion is on the upper left chest, 11" below the top of the head. A 1/2" x 1/8" abrasion is on the right groin. A 12" x 2" contusion is on the upper back 9" to 11" below the top of the head. A cluster of abrasions, 1/16" to 1-1/4" in greatest dimension, covers an area of 2-1/2" x 2" on the upper central back. A 10-1/2" x 4-1/2" contusion is on the right side of the back, 11" to 22" below the top of the head. On the left side of the back is an 8" x 6" contusion 15" to 20" below the top of the head. A 10" x 5" contusion is on the left buttock, 27-1/2" to 35-1/2" below the top of the head. Incisions into the contusions reveal hemorrhage confined to the underlying subcutaneous tissues; there is no skeletal muscle necrosis.

**C. Extremities**

A 9" x 5" contusion is on the posterior right arm, 6-1/2" to 13-1/2" below the top of the shoulder. A cluster of contusions, 1/4" to 2-1/2" in greatest dimension, covers an area of 5" x 2-1/2" on the posterior left arm, 6" to 11" below the top of the shoulder. A 1/2" x 1/4" abrasion is on the posterior left wrist and a 1/2" abrasion is on the dorsum of the left hand. A 1/4" contusion (hematoma) is on the palm of the left hand and a 1/2" contusion (hematoma) is on the palmar aspect of the left index finger. A cluster of abrasions, 1/8" to 1/2" in greatest dimension, covers an area of 2" x 1" on the anterior right thigh. Encircling the right thigh and extending up the right buttock is a 22" x 17" contusion, 21" to 37" above the bottom of the heel. A Cluster of abrasions, 1/16" to 1/8" in greatest dimension, covers an area of 1" x 1/4" on the anterior thigh. A 1" x 1/2" abrasion is on the right knee. A cluster of contusions, 1/2" to 8" in greatest dimension, covers an area of 9" x 5" on the anterior right leg, 4-1/2" to 14-1/2" above the bottom of the heel. Two abrasions, 1/2" and 1" in greatest dimension, is on the anterior right leg. A circumferential contusion, 21-1/2" x 11", is on the left thigh, 10" to 29" above the bottom of the heel. A cluster of contusions, 2" to 5-1/2" in greatest dimension, covers an area of 10" x 3" on the anterior left leg, 5" to 14-1/2" above the bottom of the heel. A cluster of abrasions, 1/8" to 1-1/4" in greatest dimension, covers an area of 1-1/2" x 1-1/4" on the anterior left leg. Incisions into the contusions reveal hemorrhage confined to the underlying subcutaneous tissues; there is no skeletal muscle necrosis.

**INTERNAL EXAMINATION**

**HEAD AND CENTRAL NERVOUS SYSTEM:**

The galeal and subgaleal soft tissues of the scalp are free of injury. There are no skull fractures. The dura mater is intact with no evidence of hemorrhage. The leptomeninges are thin and delicate. Clear cerebrospinal fluid surrounds the 1340 gm brain, which has unremarkable gyri and sulci. The cerebral hemispheres are symmetrical and the structures at the base of the brain, including the cranial nerves and blood vessels are intact. Coronal sections demonstrate sharp demarcation between white and gray matter, without hemorrhage or contusive injury. The ventricles are not enlarged. The basal ganglia, brainstem, and cerebellum are free of injury or other abnormalities. The atlanto-occipital joint is stable. The spinal cord is unremarkable.

**NECK:**

Layer-wise dissection of the neck reveals that the anterior strap muscles are homogenous and red-brown, without hemorrhage. The thyroid cartilage and hyoid are intact. The larynx is lined by intact white mucosa. The thyroid gland is symmetric and red-brown, without cystic or nodular change. The parathyroid glands are not identified. The major vessels of the neck are intact. The tongue is free of bite marks, hemorrhage, or other injuries.

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 pleural, pericardial, or peritoneal cavities. The organs occupy their usual anatomic positions.

**MUSCULOSKELETAL:**

(See Evidence of Injury)

No non-traumatic abnormalities of the muscles or bones of the appendicular and axial skeletons are identified.

**RESPIRATORY SYSTEM:**

The airways are clear of debris and foreign material and the mucosal surfaces are smooth, yellow-tan, and unremarkable. The right and left lungs weigh 500 and 420 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. The pulmonary arteries are normally developed and patent. The diaphragm is intact.

**CARDIOVASCULAR SYSTEM:**

The 360 gm heart is contained in an intact pericardial sac. The epicardial surface is smooth, with minimal fat investment. The coronary arteries are unremarkable in distribution, with a right-dominant pattern. Cross sections of the vessels show no luminal narrowing. The myocardium is homogenous, red-brown, and firm. The valve leaflets are thin and mobile. The walls of the left ventricle, interventricular septum, and right ventricle are 1.4, 1.5, and 0.4-cm thick, respectively. The endocardium is smooth and glistening. The aorta gives rise to three intact and patent arch vessels. The renal, mesenteric, and iliac vessels as well as the venae cavae are unremarkable.

**HEPATOBIILIARY SYSTEM:**

The 1150 gm liver has an intact, smooth capsule and a sharp anterior border. The parenchyma is tan-brown and congested, with unremarkable lobular architecture. No mass lesions or other non-traumatic abnormalities are seen. The gallbladder contains a minute amount of green-black bile and no stones. The mucosal surface is green and velvety.

**LYMPHORETICULAR SYSTEM:**

The 210 gm spleen has a smooth, intact, red-purple capsule. The parenchyma is maroon and congested, with distinct Malpighian corpuscles. Lymph nodes in the hilar, periaortic, and iliac regions are unremarkable. Residual thymus is present in the anterior mediastinum.

**ENDOCRINE SYSTEM:**

The pituitary gland is unremarkable. The thyroid gland has been described (see NECK, above). 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 90 and 100 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 and ureters are unremarkable. White bladder mucosa overlies an intact bladder wall. The bladder is empty. The prostate has lobular, yellow-tan parenchyma and is not enlarged. 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, gray-white mucosa. The stomach contains approximately 150 ml of mixed solids and fluids. The gastric wall is intact. The duodenum, distal loops of intestine, and colon are unremarkable. The pancreas is firm and yellow-tan, with lobular architecture. No mass lesions or other abnormalities are seen. The appendix is present.

**ADDITIONAL PROCEDURES**

1. Documentary photographs are taken by OAFME staff.
2. Personal effects are released to the appropriate mortuary operations representatives.
3. Specimens retained for toxicology testing and/or DNA identification are blood, vitreous fluid, bile, gastric contents, brain, adipose tissue, lung, heart muscle, spleen, kidney, liver, and psoas muscle.
4. The dissected organs are forwarded with body.
5. Trace evidence and/or foreign material are collected and retained by Army Criminal Investigation Division Special Agent (b)(6)

**MICROSCOPIC EXAMINATION**

Selected portions of organs are retained in formalin.

**Kidney:** Mild autolysis and generally intact tubules with unremarkable glomeruli, interstitial, and vasculature

**Khalaf Al Fahadawi, Layith Husayn****FINAL AUTOPSY DIAGNOSES:**

- I. Evidence of asphyxia by smothering
  - Multiple (3) abrasions of the lips
  
- II. Blunt force injuries
  - A. Head and neck
    1. Abrasion, left forehead
    2. Abrasions, neck
  - B. Torso
    1. Contusion, upper left chest
    2. Abrasion, right groin
    3. Multiple (3) contusions, back
    4. Cluster of abrasions, back
    5. Contusion, left buttock
  - C. Extremities
    1. Right upper extremity
      - Contusion, posterior arm
    2. Left upper extremity
      - a. Cluster of contusions, posterior arm
      - b. Abrasion, posterior wrist
      - c. Abrasion, dorsum of the hand
      - d. Contusion (hematoma), palm
      - e. Contusion, (hematoma), index finger
    3. Right lower extremity
      - a. Cluster of abrasions, anterior thigh
      - b. Circumferential contusion, thigh and buttock
      - c. Cluster of abrasions, anterior thigh
      - d. Abrasion, knee
      - e. Cluster of contusions, anterior leg
      - f. Multiple (2) abrasions, anterior leg
    4. Left lower extremity
      - a. Circumferential contusion, thigh
      - b. Cluster of contusions, anterior leg
      - c. Cluster of abrasions, anterior leg
  
- III. Natural disease and pre-existing conditions: none identified within the limitations of the examination
  
- IV. Medical intervention
  - A. Defibrillator pads on the right chest and left flank
  - B. Cardiac monitor leads on the anterior torso
  - C. Triple lumen catheter, left subclavian region
  - D. Oral endotracheal intubation
  - E. Intravascular catheter, left ante-cubital fossa

- V. Post-mortem changes
  - A. Mild decomposition
  - B. Passing rigor
  - C. Fixed posterior livor
  
- VI. Identifying marks: none
  
- VII. Toxicology results
  - A. Volatiles (blood and vitreous fluid): no ethanol detected
  - B. Screened drugs of abuse and medications (blood):
    - 1. Positive atropine
    - 2. No other screened drugs of abuse or medications detected
  - C. Carbon monoxide (blood): less than 1%
  - D. Cyanide (blood): none detected



**OPINION**

This detainee (b)(6) died of asphyxia from smothering. Abrasions around the mouth suggest forceful covering of the airways to prevent adequate respirations. He did sustain multiple blunt force injuries, however, these were not severe enough to cause death. Toxicology tests for ethanol and screened drugs of abuse were negative. The manner of death is homicide.

(b)(6)

(b)(6) Medical Examiner

**CERTIFICATE OF DEATH (OVERSEAS)**

**Acte de décès (D'Outre-Mer)**

NAME OF DECEASED (Last, First, Middle) Nom du décédé (Nom et prénoms) <b>BTB Khalaf Al Fahadawi, Layith Husayne,</b>		GRADE Grade	BRANCH OF SERVICE Arme <b>Civilian</b>	SOCIAL SECURITY NUMBER Numéro de l'Assurance Social <b>(b)(6)</b>
ORGANIZATION Organisation <b>Detainee</b>		NATION (e.g. United States) Pays <b>Iraq</b>	DATE OF BIRTH Date de naissance <b>(b)(6)</b> <b>1980</b>	SEX Sexe <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE

RACE Race		MARITAL STATUS État Civil		RELIGION Culte	
<input checked="" type="checkbox"/>	CAUCASOID Caucasique	<input type="checkbox"/>	SINGLE Célibataire	<input type="checkbox"/>	PROTESTANT Protestant
<input type="checkbox"/>	NEGROID Négre	<input type="checkbox"/>	MARRIED Marié	<input type="checkbox"/>	CATHOLIC Catholique
<input type="checkbox"/>	OTHER (Specify) Autre (Spécifier)	<input type="checkbox"/>	WIDOWED Veuf	<input type="checkbox"/>	JEWISH Juf
<input type="checkbox"/>		<input type="checkbox"/>	DIVORCED Divorcé	<input checked="" type="checkbox"/>	OTHER (Specify) Autre (Spécifier)
<input type="checkbox"/>		<input type="checkbox"/>	SEPARATED Séparé		

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
<b>Asphyxia by smothering</b>		
DISEASE OR CONDITION DIRECTLY LEADING TO DEATH Maladie ou condition directement responsable de la mort.		
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
NATURAL Mort naturelle	MAJOR FINDINGS OF AUTOPSY Conclusions principales de l'autopsie	
ACCIDENT Mort accidentelle		
SUICIDE Suicide	NAME OF PATHOLOGIST Nom du pathologiste <b>(b)(6)</b>	
<input checked="" type="checkbox"/> HOMICIDE Homicide	SIGNATURE <b>(b)(6)</b>	DATE <b>17 November 2007</b>
		AVIATION ACCIDENT Accident à Avion <input type="checkbox"/> YES Oui <input checked="" type="checkbox"/> NO Non

DATE OF DEATH (day, month, year) Date de décès (le jour, le mois, l'année) <b>(b)(6) 2007 (b)(6)</b>	PLACE OF DEATH Lieu de décès <b>31st Combat Support Hospital Iraq</b>
--	---

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.

NAME OF MEDICAL OFFICER Nom du médecin militaire ou du médecin sanitaire <b>(b)(6)</b>	TITLE OR DEGREE Titre ou diplôme <b>Medical Examiner</b>
--	--

GRADE Grade <b>(b)(6)</b>	INSTALLATION OR ADDRESS Installation ou adresse <b>Dover AFB, Dover DE</b>
---------------------------------	--

DATE Date <b>11/29/2007</b>	SIGNATURE <b>(b)(6)</b>
-----------------------------------	----------------------------

<sup>1</sup> State disease, injury or complication which caused death, but not mode of dying such as heart failure.  
<sup>2</sup> State conditions contributing to the death, but not related to the disease or condition causing death.  
<sup>3</sup> 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.  
<sup>4</sup> Préciser la condition qui a contribué à la mort, mais si avant aucun rapport avec la maladie ou à la condition qui a provoqué la mort.

REPLACES DA FORM 3668, 1 JAN 72 AND DA FORM 3665-R(PAS), 28 SEP 75, WHICH ARE OBSOLETE.

**DD FORM 1 APR 77 2064**

**MEDCOM 0741**

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

DISPOSITION OF REMAINS			
NAME OF MORTICIAN PREPARING REMAINS	GRADE	LICENSE NUMBER AND STATE	OTHER
INSTALLATION OR ADDRESS (b)(6)	DATE	SIGNATURE	
NAME OF CEMETERY OR CREMATORY	LOCATION OF CEMETERY OR CREMATORY		
TYPE OF DISPOSITION		DATE OF DISPOSITION	
REGISTRATION OF VITAL STATISTICS			
REGISTRY (Town and Country)	DATE REGISTERED	FILE NUMBER	
		STATE	OTHER
NAME OF FUNERAL DIRECTOR	ADDRESS		
SIGNATURE OF AUTHORIZED INDIVIDUAL			

DD FORM 2064, APR 1977 (BACK)

USAPA V1.00