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JUN 16 2008

OFFICE OF THE DISTRICT 10 MEDICAL EXAMINER

1021 Jim Keene Boulevard
Winter Haven, FL 33880-8010

Send Original Form with Body

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AUTHORITY: F.S.S. 406.12 - DUTY TO REPORT

Revised: January 13, 2005

DEATH INVESTIGATION REPORT		INVESTIGATING AGENCY POLK. S.O.	INVESTIGATING AGENCY CASE NUMBER	DATE 10-2-07	TIME 12:00
ADDRESS: [REDACTED]		CITY KISSIMMEE	STATE FL	ZIP CODE 34759	OCCUPATION / EMPLOYER
PLACE OF DEATH:	STREET / LOCATION OSCEOLA REGIONAL HOSPITAL ORLANDO, FL		STATE FL	ZIP CODE 32806	DEATH OCCURRED AT WORK <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
PLACE OF INJURY:	STREET / LOCATION N/A				
DEATH OCCURRED:	IN PRESENCE OF DET. A.C. CAMPBELL		RELATIONSHIP TO DECEDENT	DATE 10-2-07	TIME 12:00
OR FOUND DEAD:	BY N/A		RELATIONSHIP TO DECEDENT	DATE	TIME
LAST SEEN LIVE:	BY DET. A.C. CAMPBELL		RELATIONSHIP TO DECEDENT	DATE 10-2-07	TIME 12:00
IDENTIFIED BY:	[REDACTED]	CITY KISSIMMEE	STATE FL	ZIP CODE 34759	[REDACTED]
AUTO ACCIDENT:	DECEDENT WAS:	<input type="checkbox"/> DRIVER / OPERATOR <input type="checkbox"/> PASSENGER <input type="checkbox"/> PEDESTRIAN <input type="checkbox"/> OTHER <input type="checkbox"/> CAR / MINI VAN <input type="checkbox"/> MOTORCYCLE <input type="checkbox"/> CARGO VAN <input type="checkbox"/> TRANSPORT <input type="checkbox"/> S.U.V. <input type="checkbox"/> PICKUP <input type="checkbox"/> BUS <input type="checkbox"/> OTHER			
	VEHICLE TYPE:				
HISTORY: WHAT HAPPENED JUST PRIOR TO DEATH AND WHEN VICTIM WAS LAST SEEN ALIVE? NOTE: RECORD MEDICATIONS, PRESCRIPTIONS, SUICIDE NOTES, EVIDENCE OF BULLET OR KNIFE WOUNDS.					
The decedent was put to bed on 9/30/07 at 2330 hours within her crib. On 10/01/07 at 0800, The mother, [REDACTED] checked on the decedent and she was Fine. [REDACTED] moved the decedent to the middle of the crib and went back to bed. [REDACTED] went back at 0900 to check on the decedent and found her lying against the padding of the crib with her arm between the padding and rail sides. The decedent's face was against the padding and her skin was bluish. The decedent was not breathing. CPR was performed and she was transported by ambulance to Osceola Regional and then, transported to Arnold Palmer Hospital. The decedent was declared brain dead and removed from life support systems at Arnold Palmer Hospital.					
NEXT OF KIN:	NAME [REDACTED]	TELEPHONE [REDACTED]	RELATIONSHIP MOTHER	NOTIFIED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STATE FL
	STREET [REDACTED]		CITY Kissimmee,		ZIP CODE 34759
VALUABLES AND DISPOSITION					
NAMES AND PLACES OF HOSPITALIZATION IN RECENT YEARS Osceola Regional / where born					
NAME, TELEPHONE NUMBER, AND ADDRESS OF PERSONAL PHYSICIAN IF KNOWN			WILL DECEDENT'S PERSONAL PHYSICIAN SIGN THE DEATH CERTIFICATE? <input type="checkbox"/> Yes / <input checked="" type="checkbox"/> No		
REPORT SUBMITTED BY (PRINT L.E.O. NAME): A.C. Campbell				DATE 10-2-07	TIME 12:00

OFFICE OF THE
DISTRICT MEDICAL EXAMINER

10TH JUDICIAL CIRCUIT OF FLORIDA
In & For Polk, Hardee and Highlands Counties



1021 JIM KEENE BOULEVARD
WINTER HAVEN, FLORIDA 33880-8010

(863) 298-4600
(863) 298-5264 FAX

AUTOPSY PROTOCOL

Name: [REDACTED]

Date/Time of Death:

Tuesday, October 2, 2007
@ 10:00 AM

Date/Time of Autopsy:

Wednesday, October 3, 2007
@ 9:00 AM

Case No. [REDACTED]

Age: 2m Sex: F Race: W
Law Enforcement Agency:
Polk County Sheriff's Office
(Case No. 07-204904)

AUTOPSY FINDINGS

1. Sequelae of Suffocation due to Entrapment
 - a. Anoxic/ischemic encephalopathy
 - b. Acute tubular necrosis
 - c. Acute myocardial necrosis
2. Well Developed and Well Nourished Female Infant

CAUSE OF DEATH: Sequelae of Suffocation
DUE TO: Entrapment
MANNER OF DEATH: Accident

A handwritten signature in black ink, appearing to read "Vera V. Volnikh".

Vera V. Volnikh, M.D.
Associate Medical Examiner

Medical Examiner Case No. [REDACTED]

EXTERNAL EXAMINATION:

The body is that of a well nourished and well developed female infant. The body weight is 5350 grams and body length is 54 centimeters. The crown-to-rump length measures 40 centimeters. The chest circumference is 39 centimeters. The head circumference is 38.5 centimeters. The abdominal circumference is 39 centimeters. Lividity is posterior and unfixated. Rigor mortis is fully developed. The body is cool from refrigeration.

The scalp hair is brown and sparse. The left side of the forehead has a small pink contusion. The right occipital region of the scalp has a small 0.8 x 0.7 red-brown abrasion. The irides are gray. The conjunctivae have no petechiae. The ears and nose are unremarkable. The mouth is edentulous. The lips and the oral mucosa are atraumatic. The frenulae are intact. The neck is straight and free of external injuries.

The chest is symmetric. The abdomen is slightly protuberant and free of visible scars. The upper and lower extremities are normally developed and free of palpable fractures. The medial aspect of the right leg has small pink contusions. The superior aspect of the 5th left toe has pink pinpoint skin discoloration. The back is straight and free of external injuries. The genitalia are those of a normally developed female infant. The anus is unremarkable.

Therapy: A nasogastric tube is in the nose with its tip in the stomach. An orotracheal tube is in the mouth with its tip in the trachea. The left supraclavicular region has an intravascular catheter. The right antecubital fossa has needle marks. The posterior aspect of the right hand has an intravascular catheter. The posterior aspect of the left hand has needle marks surrounded by purple-blue contusion. The right and left inguinal regions have needle marks. The anterior aspects of the legs have intravascular catheters and needle marks. The left heel has needle marks. The urinary catheter is in the urethra with its tip in the bladder.

INTERNAL EXAMINATION:

Body Cavities: The body cavities have no liquid accumulations. The organs are normally situated, minimally congested and have no abnormal odors. The pneumothorax test is negative bilaterally.

Head: The scalp has no wounds except as indicated. The galea aponeurotica has no hemorrhages. The vault and the base of the skull have no fractures. The subdural, epidural and subarachnoid spaces are free of blood. The dura mater is intact. The brain weighs 460 grams and has symmetric cerebral and cerebellar hemispheres. The brain has evidence of anoxic/ischemic encephalopathy characterized by diffuse swelling, with flattening of the gyri and narrowing of the sulci. The brain parenchyma is diffusely softened and has diffuse ischemic changes characterized by dusky gray discoloration of the cerebral cortex with some areas of reperfusion. The cerebellar tonsils are herniated.

The midbrain is necrotic along the midline. The leptomeninges are thin. The cerebrospinal fluid is clear. The cerebral arteries and cranial nerves are unremarkable.

Neck: The cervical spine, the laryngeal cartilages, the hyoid bone, and the strap muscle of the neck have no injuries. The upper airways have no foreign material. The tongue has no contusions or nodules.

Cardiovascular: The aorta has no atherosclerosis. The venae cavae have no thrombi. The pulmonary trunk and arteries have no thromboemboli. The great vessels and the chambers of the heart are filled with dark red liquid and clotted blood. The heart weighs 30 grams. The epicardial surfaces are smooth and soft. The coronary arteries arise normally, distribute in a right dominant pattern and are patent. The valves are thin. The myocardial cut surfaces are dark red. The left ventricle and septum have patchy transmural hemorrhagic friable areas. The chambers of the heart are not dilated.

Pulmonary: The right lung weighs 55 grams and the left lung weighs 35 grams. The pleural membranes are thin. The cut surfaces are pink, crepitant and unremarkable. The bronchi and pulmonary arteries are patent.

Liver, Gallbladder and Pancreas: The liver weighs 200 grams. The capsule is thin. The cut surfaces are brown-red and have no cirrhosis. The gallbladder has liquid bile and no stones. The hepatoduodenal ligament has no fibrosis. The pancreas has tan lobulated parenchyma.

Hemic and Lymphatic: The spleen weighs 10 grams. The capsule is thin. The cut surfaces are dark red. The lymph nodes are not enlarged. The vertebral marrow is dark red. The palatine tonsils are small. The thymus has tan lobulated parenchyma. The thymus weighs 10 grams.

Genitourinary: The right kidney weighs 30 grams and the left kidney weighs 30 grams. The cortical surfaces are dark-red and smooth. The cut surfaces are maroon and have no grit. The ureters have no dilatation. The uterus, cervix, ovaries, fallopian tubes and vagina are unremarkable. The urinary bladder has a few milliliters of urine.

Endocrine: The pituitary, adrenal and thyroid glands have no nodules or hyperplasia.

Digestive: The esophagus, stomach and duodenum have no ulcers. The stomach has 1 milliliter of partially digested food. The small and large intestines are unremarkable.

Musculoskeletal: The ribs, sternum, spine, clavicle and pelvis have no recent fractures. The musculature is unremarkable. Full body radiograph showed no acute or healed fractures.

Medical Examiner Case No. [REDACTED]

MICROSCOPIC EXAMINATION:

Heart: Acute ischemic changes characterized by necrotic myocytes surrounded by an interstitial hemorrhage.

Brain: Acute anoxic/ ischemic changes with moderate reperfusion.

Lungs: Denuded epithelium and cell debris.

Liver: Unremarkable.

Pancreas: Unremarkable.

Spleen: Unremarkable.

Adrenal Glands: Unremarkable.

Thymus: Unremarkable.

Thyroid gland: Unremarkable.

Kidneys: Acute tubular necrosis.

Scalp: Unremarkable.

██████████
Medical Examiner Case No. ██████████

OPINION

The decedent was a well-developed and well-nourished 2-month-old female infant, who was found by her mother in the crib face down. The decedent's body and face were pressed against the padding of the crib and one arm was entrapped between the padding and the rail sides. Emergency medical personnel found her pulseless and apneic. She was resuscitated but developed anoxic/ischemic encephalopathy.

Autopsy reveals a well developed and well nourished female infant and confirmed anoxic/ischemic encephalopathy. Autopsy also reveals acute tubular necrosis and acute myocardial necrosis.

Antemortem serum toxicology is negative for volatiles. Postmortem blood toxicology is negative for volatiles and drugs. Postmortem bile toxicology is negative for volatiles.

Based on all information available to me at this time, it is my opinion that ██████████
██████████ died as a result of suffocation due to entrapment.

The manner of death is Accident.

CASE NO. [REDACTED]

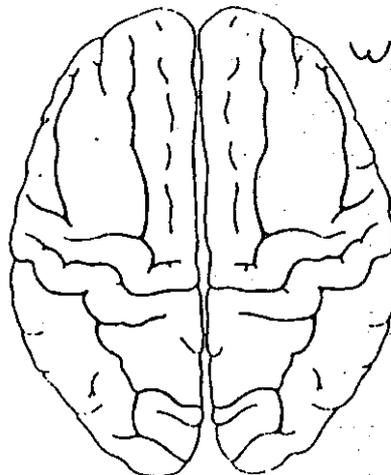
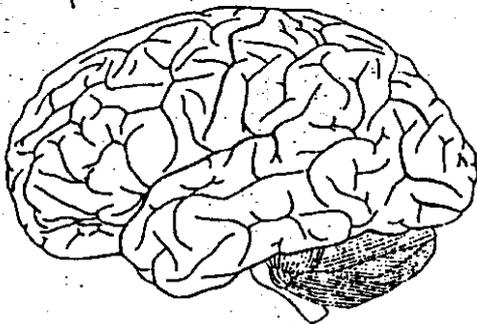
NAME [REDACTED]

Spinal cord:
Left - compressed.

12/12/07

w- 460 gr

12.55 mm

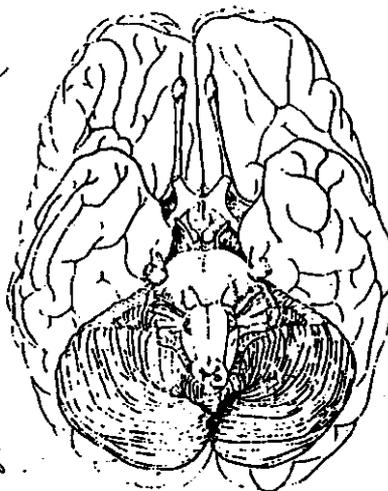
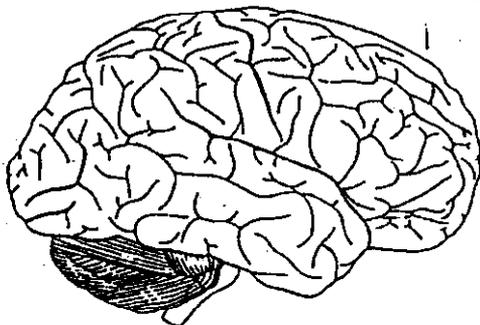


Necrosis of midbrain.

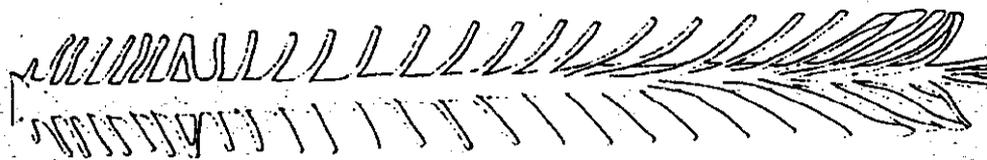
Brainstem infarct??

Micro
Laminar
necrosis

Reperfusion injury: olives,
Brainstem.



Post. cerebral artery infarct
w/ laminar.



10/11/07

PCSD.

10/2/07 1000.

Infant, ventral, dorsal, and left and right lateral views

Name [REDACTED]

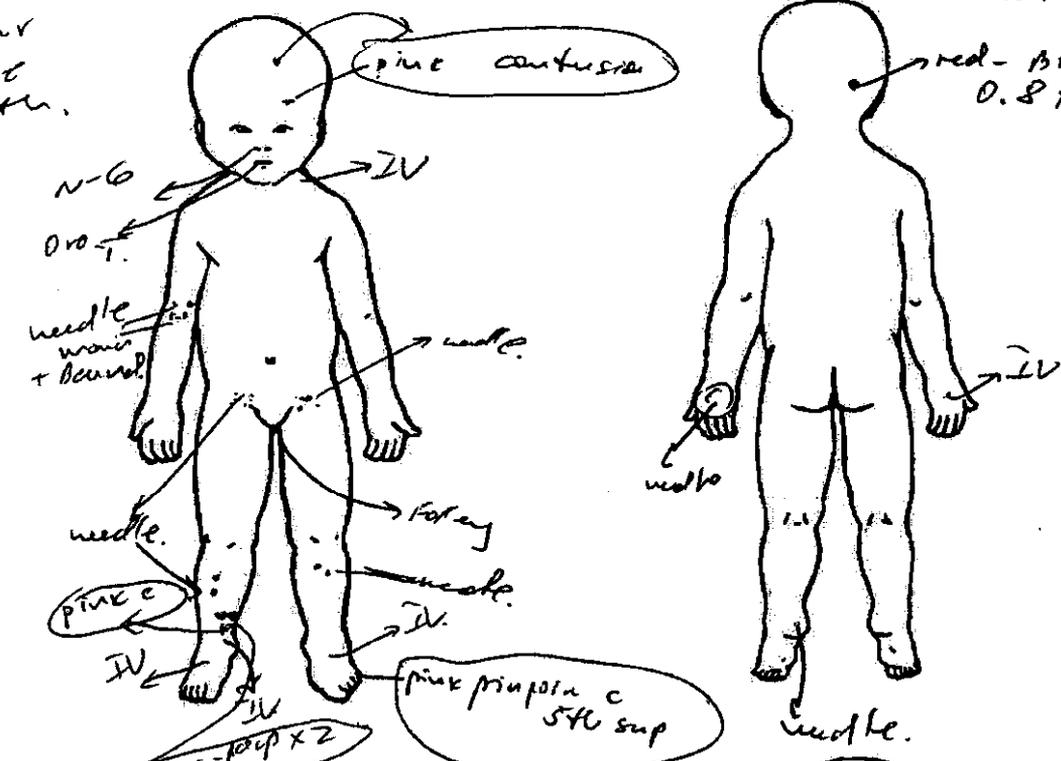
Autopsy No. [REDACTED]

Age 2 months Race Caucasian/White Sex Female
5 days

Date 10/03/07

W: 5350

Protruding
gray eye
no teeth.

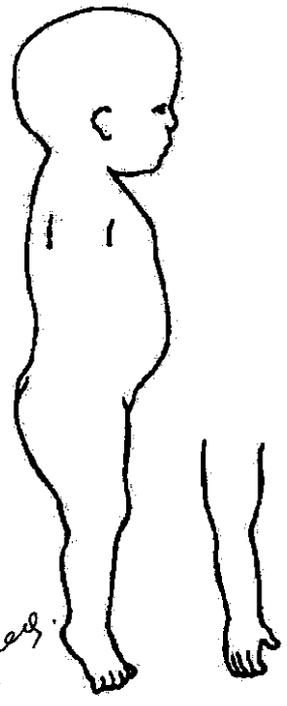
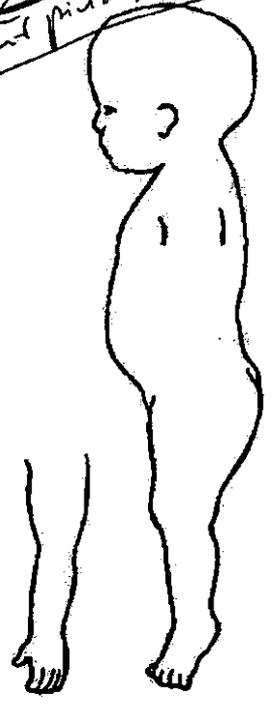


Cont pink prur x 2

CR - 40
CH - 54
Head - 38.5
chest - 39
abd - 39

All box.

NO trauma
Xray OK.
- B culture + cocci neg.
- urine cul. neg.



INFANT AUTOPSY

NAME: _____ AUTOPSY # _____

Age: 2 months Race: Caucasian/White Sex: Female DATE: 10/03/2007
5 days

Wt: 4,460-5350 Gm's

Hair: brown

C.R. 40 Cm's

Eye's: _____

C.H. 54 Cm's

Teeth: _____

Head: 38.5 Cm's-Round

Chest: 39 Cm's-Round

Abd: 39 Cm's Round

Remarks