

REPORT OF INVESTIGATION BY MEDICAL EXAMINER

OCME USE ONLY

Case number

AUG 28 2001

Date received

Res NR

DECEDENT: [REDACTED]

RESIDENCE: [REDACTED] HUBERT ONSLOW

AGE: 3M SEX: Male Female Unknown

RACE: Black Native American Oriental White Unknown

HISPANIC ORIGIN: Yes No Unknown

INFORMATION ABOUT OCCURRENCE

	DATE	TIME	ADDRESS OR FACILITY	COUNTY
ONSET OF INJURY OR ILLNESS			[REDACTED] HUBERT, NC	ONSLOW
DEATH	08-09-01	±2200	[REDACTED] HUBERT, NC	ONSLOW
VIEW OF BODY	08-10-01	0815	<input type="checkbox"/> Scene of death <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> Funeral home <input type="checkbox"/> Other _____ <input type="checkbox"/> Not viewed	
M.E. NOTIFIED	08-09-01	2300	LAW ENFORCEMENT AGENCY: ONSLOW CO. SHERIFF'S DEPT. OFFICER: DEPUTY MORRIS TELEPHONE: 910-455-3113	
LAST KNOWN TO BE ALIVE	08-09-01	2100	Death occurred while in custody: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	

AUTOPSY: None M.E. Authorized Non-M.E. Autopsy facility: _____

BLOOD SAMPLE: Mailed Obtained by pathologist Reason not obtained: _____

IF CLINICAL ALCOHOL DONE, RESULT: _____ By whom: _____

PROBABLE CAUSE OF DEATH: Pending

- SUDDEN INFANT DEATH SYNDROME
-
-
-

OCME REVIEW

1. ASPHYXIA

2. WEAPED BETWEEN PULW AND CRIB BUMPER

3.

4.

CONTRIBUTING CONDITIONS

Natural Accident Homicide Suicide Undetermined

Reviewer: [Signature] Date: 8/28/01

Information in this block supersedes that contained in space at left.

SDC

None

AL

Dictated

COG

CONTRIBUTING CONDITIONS

MANNER OF DEATH:

Natural Accident Homicide Suicide Pending

I hereby certify that after receiving notice of the death described herein I took charge of the body and made inquiries regarding the cause of death in accordance with Article 16 of Chapter 130A of the N.C. General Statutes and the information contained herein regarding such death is true and correct to the best of my knowledge and belief.

MEDICAL HISTORY

- Alcoholism Diabetes IV drug abuse Ischemic heart disease Smoking
 Seizure disorder Cancer Hypertension Depression HIV/ AIDS
 Other _____
Attending Physician _____ City _____

MEANS OF DEATH

- VEHICLE: Type of vehicle associated with this decedent:
 Passenger car Pickup truck Truck--more than 2 axles Motorcycle
 Bicycle Farm vehicle ATV Moped Other _____
Position: Driver Passenger Pedestrian Unknown
Devices: Seat restraints Air bag Helmet Child restraint None Unknown
Number of vehicles involved _____
- GUN: Rifle--Caliber _____ Handgun--Caliber _____ Shotgun--Gauge _____
 Other _____ Unknown
- INSTRUMENT: Blunt Sharp Description: _____
 TOXIC AGENT(S) SUSPECTED: Alcohol Others _____
 DROWNING: Pond Lake or river Ocean Pool Bathtub Other _____
Life preserver: Yes No Unknown Able to swim: Yes No Unknown
Activity _____
- FIRE: Suspected cause _____ Smoke detector: Yes No Unknown
 FALL: From _____ to _____ Approximate distance _____ feet

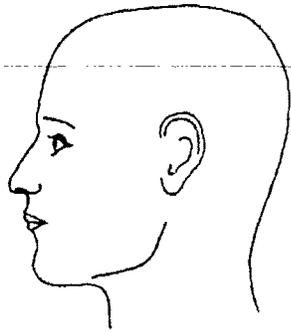
ACTIVITY OF DECEDENT AND PREMISES

- FATAL INJURY OR ILLNESS: Activity SLEEPING
Type of place HOME Specific location CRIB
- Fatal injury or illness occurred on a job: Yes No Unknown
If yes, was employment: Primary job Secondary Volunteer work Unknown
Name of this employing firm or agency _____
Type of business or industry _____ Decedent's occupation _____
- DEATH: Type of place HOME Specific location CRIB
- Examples:
Activity: Running, lifting hay bales, eating, typing letter, driving commercial truck, sleeping, bathing, watching television, fighting, *et cetera*.
Type of place: House, apartment, trailer, school, jail, bar or tavern, hotel, restaurant, store, street, hospital, farm, highway, factory, *et cetera*.
Specific location: Bathroom, assembly line, kitchen, front yard, office, parking lot, emergency room, roadside, ambulance, car, *et cetera*.
On a job: Any activity that is income generating regardless of age of decedent including farming or part time work; also include non-income generating volunteer or charity work.

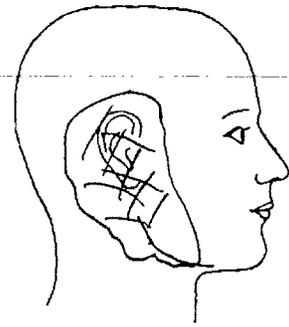
DESCRIPTION OF BODY

- CONDITION: Intact Decomposition Skeletonized
 Embalmed Charred Prolonged immersion Exhumed
- RIGOR: None 1+ 2+ 3+ LIVOR: None Anterior Posterior Laterals
- HEIGHT: 24 1/2 inches Estimate WEIGHT: 5160 GRAMS Estimate
- BODY TEMPERATURE: Warm Cool Cold HAIR: Color RED Beard Mustache
- EYES: Color BLUE Abnormalities _____
- TEETH: Upper Natural Dentures Abnormalities N/A
Lower Natural Dentures Abnormalities N/A
- CLOTHING: DISPOSABLE DIAPER AND T-SHIRT TOP Not clothed
 No value

BODY DIAGRAMS



LIVOR



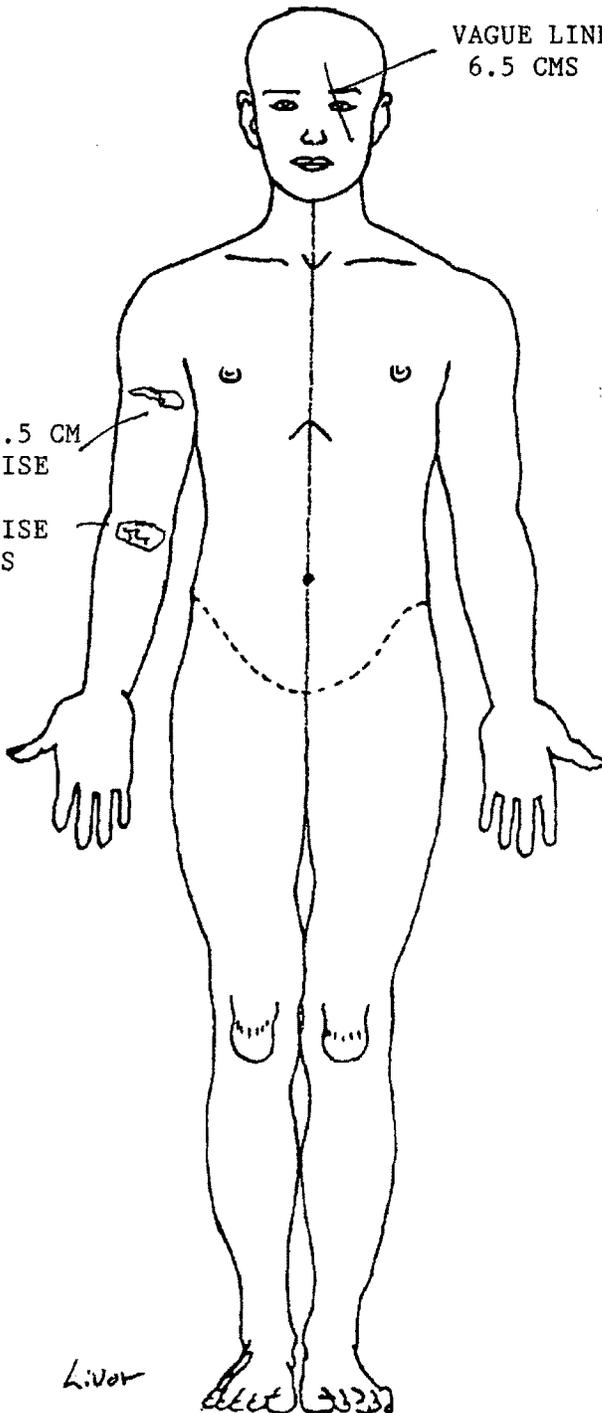
VAGUE LINE
6.5 CMS

PATTERNED
DARK LIVOR

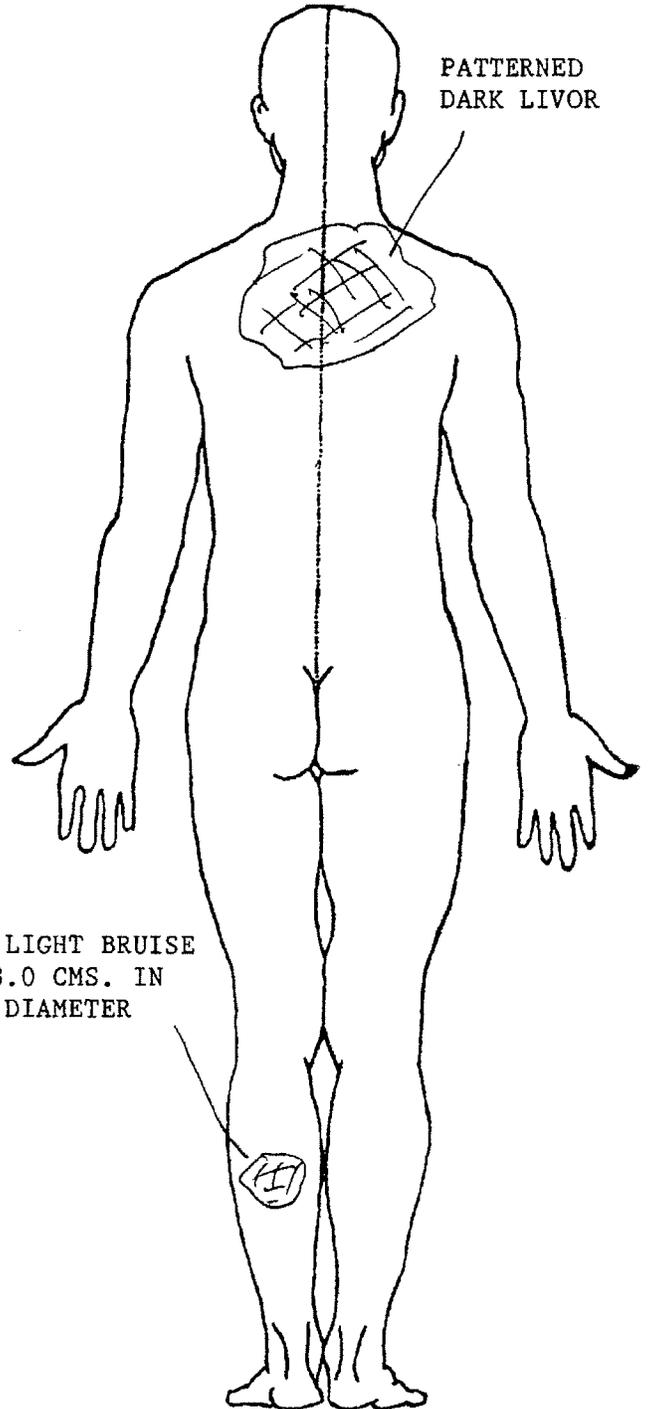
3.0 X 1.5 CM
BLUISH BRUISE

LIGHTER BRUISE
4 X 2.5 CMS

DIAPER RASH



LIGHT BRUISE
3.0 CMS. IN
DIAMETER



NARRATIVE SUMMARY OF CIRCUMSTANCES SURROUNDING DEATH

THE MOTHER OF THIS INFANT STATES SHE PUT THE BABY TO BED AT APPROXIMATELY 1945 HOURS ON
08-09-2001. THE BABY WOKE UP CRYING LATER - MAYBE 2100 HOURS. THE BABY WAS FOUND
AT 2230 HOURS WEDGED BETWEEN ADULT PILLOWS AND A CRIB BUMPER. THE BABY HAD ORIGINALLY
BE PLACED TO SLEEP ON HER SIDE AND WAS FOUND ON HER STOMACH. IT WAS A HOT NIGHT AND
THE HOUSE TRAILER THEY LIVED IN HAD NO AIR CONDITIONING. THE HUSBAND IS NOT THE
FATHER OF THE CHILD.

JLA:SM

JLA
8/16/01

NOV 13 2001

COASTAL PATHOLOGY ASSOCIATES, P.A.
Onslow Memorial Hospital

P. O. Box 1358
317 Western Blvd.
Jacksonville, North Carolina 28546
Telephone: (910) 577-2239 or (910) 353-3498

6784

REPORT OF AUTOPSY EXAMINATION

AUTOPSY NUMBER: [REDACTED]

DECEDENT: [REDACTED]

AGE: 3 MONTHS RACE: CAUCASIAN SEX: FEMALE

Authorized by: [REDACTED] M.D. Received from: ONSLOW CO

Date of Autopsy Examination: 08/10/01 Time: 0815 HOURS

Body identified by: HOSPITAL TAG RIGHT ANKLE

Persons present at autopsy: [REDACTED] - DIENER; DET. MAJOR OF THE
ONSLow COUNTY SHERIFF'S DEPARTMENT

PATHOLOGICAL DIAGNOSIS

1. NO EVIDENCE OF DISEASE.
2. NO EVIDENCE OF FATAL TRAUMA.
3. EVIDENCE OF HISTORY OF BEING WEDGED IN CRIB.
4. BLOOD ETHANOL - NEGATIVE.

[Handwritten signatures]

CAUSE OF DEATH: ASPHYXIA SECONDARY TO SUFFOCATION DUE TO BEING
WEDGED BETWEEN PILLOW AND BUMPER OF CRIB.

The facts stated herein are correct to the best of my knowledge and belief.

[REDACTED]

10/25/01
10/24/01
Date

Pathologist

AUTOPSY NUMBER: [REDACTED]

DECEDENT: [REDACTED]

EXTERNAL DESCRIPTION

Body condition: INTACT
Length: (inches) 24 ½
Weight: 5160 GRAMS
Body heat: COLD
Rigor: BROKEN
Livor: RIGHT SIDE FACE AND POSTERIOR
Hair: RED
Eyes: BLUE
Teeth: NONE
Facial hair: NONE

EVIDENCE OF INJURY

THE BODY IS THAT OF AN INFANT FEMALE APPEARING CONSISTENT WITH THE STATED AGE OF 3 MONTHS. IT IS CLOTHED IN A SLEEPER, T-SHIRT AND DISPOSABLE DIAPER. THERE ARE SEVERE VAGUE BRUISES ON THE BODY WHICH INCLUDE A VAGUE BLUISH GRAY LINE ACROSS THE FACE AND THE LEFT EYE. THIS IS A STRAIGHT LINE AND 6.5 CMS IN LENGTH. THERE IS DARKER GRAY-BLUE LIVOR OF THE RIGHT SIDE OF THE FACE INVOLVING THE RIGHT EAR AND UPPER NECK AND JAW. THERE IS A BLUISH APPEARING OVAL BRUISE OF THE RIGHT BICEPS, 3.0 X 1.5 CMS. THERE IS A LIGHTER BRUISE OF THE RIGHT ANTECUBITAL FOSSA, 4.0 X 2.5 CMS. THERE IS DEEP BLUISH PURPLE LIVOR WITH A PATTERN CONSISTENT WITH CLOTH MATERIAL ON THE CENTER OF THE BACK. THERE IS A SLIGHT LIVOR ON THE LATERAL ASPECT OF THE RIGHT FOOT. THERE IS A LIGHT, APPARENT BRUISE, BLUISH GRAY AREA ON THE POSTERIOR ASPECT OF THE LEFT CALF. THIS IS 3 CMS. IN DIAMETER. NO PETECHIAL HEMORRHAGES ARE NOTED ON THE SKIN OR SCLERA.

EVIDENCE OF MEDICAL ATTENTION

NONE

ADDITIONAL PROCEDURES

Photographs: YES - ONSLOW CO. SHERIFF'S DEPT AND OMH DIGITAL CAMERA
Radiographs: YES - ONSLOW MEMORIAL HOSPITAL, TOTAL BODY
Microbiology: NONE
Chemistry: TWO BLOOD SPECIMENS AND A SAMPLE OF LIVER ARE SENT TO THE OCME FOR ETHANOL
Evidence collected: NONE
Personal Effects Disposition: RETURNED TO FUNERAL HOME

AUTOPSY NUMBER: [REDACTED]

DECEDENT: [REDACTED]

INTERNAL EXAMINATION

SEROUS CAVITIES: THERE IS NO APPRECIABLE FLUID WITHIN THE PLEURAL OR ABDOMINAL SPACES.

PLEURA: SMOOTH AND UNREMARKABLE. THERE IS MILD CONGESTION. NO SIGNIFICANT PETECHIAL HEMORRHAGE IS NOTED.

PERITONEUM: UNREMARKABLE.

PERICARDIUM: UNREMARKABLE.

HEART: THE HEART WEIGHS 30 GRAMS AND HAS A NORMAL CONFIGURATION WITH NORMAL LARGE VESSELS AND DISTRIBUTION OF CORONARY ARTERIES.. THERE IS PETECHIAL HEMORRHAGE OVER THE SURFACE OF THE HEART. NO SEPTAL DEFECTS ARE NOTED. THE VALVES APPEAR DELICATE AND FUNCTIONAL.

LUNGS: THE RIGHT LUNG WEIGHS 70 GRAMS AND THE LEFT LUNG WEIGHS 66 GRAMS. THE LUNGS ARE MILDLY CONGESTED BUT OTHERWISE UNREMARKABLE. NO EVIDENCE OF INFECTION IS NOTED.

LIVER: THE LIVER WEIGHS 256 GRAMS AND THE CAPSULE IS SMOOTH AND INTACT. IT IS UNREMARKABLE ON SECTION. THE GALLBLADDER IS UNREMARKABLE.

SPLEEN: THE SPLEEN WEIGHS 23 GRAMS AND IS UNREMARKABLE ON SECTION.

PANCREAS: UNREMARKABLE.

ADRENAL GLANDS: THE ADRENAL GLANDS APPEAR SMALL AND PALE.

G I TRACT: THE GASTROINTESTINAL TRACT IS PROPERLY ARRANGED. THE STOMACH IS FILLED WITH WHITE APPARENT FORMULA.

KIDNEYS: THE RIGHT KIDNEY WEIGHS 19 GRAMS AND THE LEFT KIDNEY WEIGHS 18 GRAMS. THEY ARE WELL DEVELOPED AND UNREMARKABLE ON SECTION.

BLADDER: THE BLADDER IS EMPTY.

INTERNAL GENITALIA: THE GENITALIA IS THAT OF AN INFANT FEMALE.

AUTOPSY NUMBER: [REDACTED]

DECEDENT: [REDACTED]

INTERNAL EXAMINATION CONTINUES

NECK ORGANS: THERE IS NO EVIDENCE OF TRAUMA ON DISSECTION OF THE NECK. THE LARYNX AND HYOID BONE ARE INTACT. THE POSTERIOR OROPHARYNX IS UNOBSTRUCTED. THE THYROID GLAND IS UNREMARKABLE ON SECTION. THE THYMUS GLAND WEIGHS 27 GRAMS AND HAS PETECHIAL HEMORRHAGES ON THE SURFACE.

BRAIN AND MENINGES: THE BRAIN WEIGHS 660 GRAMS AND THE MENINGES ARE CLEAR. THERE IS NO EVIDENCE OF HEMORRHAGE, NEOPLASIA OR INFECTION ON SECTION.

SKULL: THE SKULL IS INTACT. THERE ARE NO FRACTURES OR HEMORRHAGES NOTED.

VERTEBRAE: POSTERIOR DISSECTION OF THE CERVICAL VERTEBRAE REVEALS NO EVIDENCE OF TRAUMA.

RIBS: THE RIBS ARE INTACT AND SHOW NO EVIDENCE OF FRACTURE.

PELVIS: INTACT.

Dictated 08/10/01
Transcribed 08/27/01
JLA:SM

AUTOPSY NUMBER: [REDACTED]

DECEDENT: [REDACTED]

MICROSCOPIC EXAMINATION

CORONARY ARTERIES: UNREMARKABLE.

HEART: SECTIONS OF HEART SHOW WELL DEVELOPED MYOCARDIAL FIBERS WITH NO EVIDENCE OF INFLAMMATION OR FIBROSIS.

LUNGS: SECTIONS OF LUNGS SHOW VASCULAR CONGESTION BUT NO EVIDENCE OF MALFORMATION, INFECTION OR NEOPLASIA.

HILAR LYMPH NODES: UNREMARKABLE.

LIVER: UNREMARKABLE.

SPLEEN: UNREMARKABLE.

PANCREAS: UNREMARKABLE.

ADRENAL GLANDS: UNREMARKABLE.

KIDNEYS: UNREMARKABLE.

BRAIN AND MENINGES: UNREMARKABLE.

Other Additional Sections:

THYROID GLAND: UNREMARKABLE.

THYMUS GLAND: UNREMARKABLE.

AUTOPSY NUMBER: [REDACTED]

DECEDENT: [REDACTED]

CASE SUMMARY

THIS 3 MONTH OLD FEMALE INFANT WAS REPORTED TO HAVE BEEN WELL ON THE EVENING OF HER DEATH. SHE WAS PUT TO BED AT APPROXIMATELY 1945 HOURS ON HER SIDE ON AN ADULT PILLOW IN HER CRIB. SHE AWOKE AT APPROXIMATELY 2100 HOURS. SHE WAS FOUND LIFELESS AT 2230 HOURS AND WAS REPORTED BY HER MOTHER TO BE WEDGED BETWEEN THE PILLOW AND THE BUMPER OF THE CRIB ON HER STOMACH.

AT AUTOPSY, THERE WERE VAGUE INSIGNIFICANT BRUISES AND AN APPARENT COMPRESSION LINE ACROSS THE LEFT EYE AND FOREHEAD. THERE WAS NO EVIDENCE OF INFECTION, NEOPLASIA OR TRAUMA NOTED ON THE AUTOPSY. FULL BODY X-RAYS FAILED TO REVEAL EVIDENCE OF TRAUMA. NO CERVICAL OR INTERCRANIAL HEMORRHAGE WAS NOTED.

BLOOD ETHANOL WAS NEGATIVE.

IT IS MY OPINION THAT DEATH RESULTED FROM ASPHYXIATION DUE THE INFANT WEDGING HERSELF BETWEEN A PILLOW AND A CRIB BUMPER.

JLA:SM

JLA
10/25/01

