

**OFFICE OF THE MEDICAL EXAMINER
DISTRICT NINE
2350 E. Michigan Street
Orlando, Florida 32806-4939**

REPORT OF AUTOPSY

DECEDENT: CHRISTOPHER SANFELIZ **CASE NUMBER:** ME 2016-000948

MANNER OF DEATH: Homicide **IDENTIFIED BY:** Photo ID

AGE: 24 years

SEX: Male

RACE: White

DATE OF DEATH: June 12, 2016

DATE/TIME OF AUTOPSY: June 14, 2016 at 10:10 am.

 6/15/16

PERFORMED BY: Joshua D. Stephany, MD, Chief Medical Examiner

CAUSE OF DEATH: Gunshot wound of torso

AUTOPSY FINDINGS

- I. Penetrating gunshot wound of the torso:
 - A. Gunshot wound of the left lower back
 - B. Stippling, soot, and muzzle imprint are absent
 - C. Fractures of the superior posterior aspect of the 9th left rib
 - D. Lacerations of the liver
 - E. Lacerations of the diaphragm
 - F. Lacerations of the left lower lung lobe
 - G. Laceration of the posterior aspect of the heart
 - H. Lacerations of the right 8th intercostal musculature
 - I. Bilateral hemothoraces (right 1200 mL, left 400 mL)
 - J. Hemoperitoneum (200 mL)
 - K. Deformed copper jacketed projectile fragment recovered from the subcutaneous tissue of the right abdomen
 - L. Fragment of projectile recovered from the liver

continued...

- M. Direction of the path of the wound is back to front, left to right, and slightly upward
- II. Perforating gunshot wound of the right shoulder
 - A. Entrance wound on the right upper back
 - B. Exit wound on the anterior superior right shoulder
 - C. Lacerations and hemorrhage of the musculature of the right upper back and right shoulder
 - D. Direction of the path of the wound is back to front, and slightly downward
- III. Perforating gunshot wound of the left shoulder:
 - A. Entrance wound on the left shoulder
 - B. Stippling, soot, and muzzle imprint are absent
 - C. The exit wound is on the superior left shoulder
 - D. Lacerations and hemorrhage of the soft tissue and musculature of the left shoulder
 - E. Direction of the path of the wound is left to right and upward
- IV. Perforating gunshot wound of left lower extremity:
 - A. Entrance wound on the posterior lateral left calf
 - B. Stippling, soot, and muzzle imprint are absent
 - C. Laceration and hemorrhage of the musculature and soft tissue of the left lower extremity.
 - D. Exit wound on the anterior medial left lower extremity
 - E. Direction of the path of the wound is back to front, left to right, and downward
- V. Penetrating wound of the left thigh
- VI. Fragment of projectile recovered from the shroud
- VII. Blunt force injuries of the head and neck:
 - A. Abrasions of the posterior neck
 - B. Abrasions of the face and lips

SANFELIZ, CHRISTOPHER
ME 2016-000948
PAGE 3

TOXICOLOGY ANALYSIS: See laboratory report.

CONCLUSION: In consideration of the circumstances surrounding the death, and after examination of the body, and toxicology analysis, it is my opinion that the death of Christopher Sanfeliz, a 24 year old white male who was shot by another, is the result of a gunshot wound of the torso.

The manner of death is homicide.

SANFELIZ, CHRISTOPHER
ME 2016-000948
PAGE 4

The autopsy of the body of Christopher Sanfeliz is performed pursuant to Florida Statute 406.11 by Joshua D. Stephany, MD, Chief Medical Examiner, District Nine at the Orange County Medical Examiner facility, Orlando, Florida on June 14, 2016 at 10:10 am.

IDENTIFICATION: The body of Christopher Sanfeliz is identified by FDLE Special Agent Walsh. The positive identification is made via his Florida Driver's License #S514-110-91-417-0 on 6/12/2016 at 10:08 pm, at the Orange County Medical Examiner facility.

CLOTHING AND VALUABLES: At the time of examination, the decedent is dressed in a black T-shirt, underwear, blue jeans, and black shoes. A yellow metal watch and a yellow paper bracelet are around the right wrist.

GENERAL STATEMENT: The body is that of a well-developed, well-nourished, 70 inch, 195 pound, adult white male, consistent with the reported age of 24 years.

EXTERNAL EXAMINATION

The scalp is covered with up to 2.5 cm long, brown hair. The facial hair consists of a thin mustache, and beard. Each earlobe is pierced once. The external nose has no trauma. The nasal septum is intact. The frenulum is intact and the oral mucosa has no trauma. The teeth are natural and in adequate condition. The neck is unremarkable.

The torso has no congenital deformities, scars, or tattoos. The chest is shaven antemortem. The external genitalia are those of a circumcised adult male. The testes are in the scrotum. The anus is normal.

The extremities have no congenital deformities, scars, or tattoos.

EVIDENCE OF INJURY

Penetrating gunshot wound of the torso:

A 0.5 x 0.5 cm round entrance gunshot wound is on the left lower back, 17 ½ inches below the top of the head, and 6 inches left of the posterior midline. Stippling, soot, and muzzle imprint are absent.

The wound path is hemorrhagic and traverses the skin of the left lower back, superior posterior aspect of the 9th left rib, left lower lung lobe, posterior aspect of the heart, diaphragm, liver, right 8th intercostal musculature, and subcutaneous soft tissue and musculature of the right abdomen.

A partially deformed projectile is recovered from the subcutaneous soft tissue of the right abdomen. A partially deformed projectile is recovered from the liver.

Associated with the path of the wound are fractures of the superior posterior aspect of the 9th right rib, perforation of the left lower lung lobe, lacerations of the liver, laceration of the posterior aspect of the heart, lacerations of the right 8th intercostal musculature, approximately 1200 mL of blood in the right pleural cavity, approximately 400 mL of blood in the left pleural cavity, approximately 200 mL of blood in the abdomen, and lacerations and hemorrhage of the subcutaneous soft tissue and musculature of the right abdomen.

The direction of the path of the wound is back to front, left to right, and upward.

The superior posterior aspect of the 9th right rib, perforation of the left lower lung lobe, lacerations of the liver, laceration of the eighth intercostal musculature, approximately 1200 mL of blood in the right pleural cavity, approximately 400 mL of blood in the left pleural cavity, approximately 200 mL of blood in the abdomen, and lacerations and hemorrhage of the subcutaneous soft tissue and musculature of the right abdomen. The direction of the path of the wound is front to back, left to right, and upward.

Perforating gunshot wound of the right shoulder:

A 1 x 0.4 cm oval entrance gunshot wound is on the right upper back, 9 ½ inches below the top of the head, and 3 ½ inches right of the posterior midline. Stippling, soot, and muzzle imprint are absent.

The wound path is hemorrhagic and traverses the soft tissue and musculature of the right upper back and right shoulder.

A 6 x 4 cm irregular jagged exit wound is on the superior anterior right shoulder, 10 inches below the top of the head, and 3 ½ inches right of the anterior midline.

Associated with the path of the wound are lacerations and hemorrhages of the subcutaneous soft tissue and musculature of the right upper back and right shoulder.

Direction of the path of the wound is back to front, and slightly downward.

Perforating gunshot wound of the left shoulder:

A 1 x 1 cm round entrance gunshot wound on the lateral left shoulder, 14 inches below the top of the head, 5 inches left of the anterior midline. Stippling, soot, and muzzle imprint are absent.

The wound path is hemorrhagic and traverses the musculature and soft tissue of the left upper shoulder.

A 1 x 1 cm round exit wound is on the superior left shoulder, 13 ½ inches below the top of the head, and 9 inches left of the anterior midline.

Associated with the path of the wound are lacerations and hemorrhage of the subcutaneous soft tissue and musculature of the left shoulder.

Direction of the path of the wound is left to right and upward.

Perforating gunshot wound of the left lower extremity:

A 0.5 x 0.5 cm round entrance gunshot wound is on the posterior lateral left calf, 13 inches above the bottom of the left heel. Stippling, soot, and muzzle imprint are absent.

The wound path is hemorrhagic and traverses the musculature and soft tissue of the left lower extremity.

A 14 x 8 cm irregular jagged exit wound is on the anterior medial left lower extremity, centered 10 inches above the bottom of the left heel.

Associated with the path of the wound are lacerations and hemorrhage of the soft tissue and musculature of the left calf.

Direction of the path of the wound is back to front, left to right, and downward.

Penetrating wound of the left thigh:

A 0.4 x 0.4 cm round entrance wound is on the anterior left thigh, 32 inches below the top of the head, and 8 inches left of the anterior midline. Stippling, soot, and muzzle imprint are absent.

The wound penetrates the skin but does not penetrate deeper into the subcutaneous soft tissue or musculature.

Blunt force injuries of the head and neck:

The posterior neck is abraded. A 1 x 0.5 cm abrasion is on the right upper lip. A 1 x 1 cm triangular abrasion is on the right lower lip. The right chin has a 7 x 4 cm area of abrasions.

Blunt force injuries of the extremities:

The lateral left upper extremity is contused.

COMMENT: A fragment of projectile is recovered from the shroud the decedent was transported in.

INTERNAL EXAMINATION

The pleural cavities, pericardial sac, and peritoneal cavity have no adhesions.

CARDIOVASCULAR SYSTEM: The heart is 400 grams and has a normal distribution of epicardial fat. The coronary arteries are patent. The right coronary artery is dominant. The myocardium is dark red, firm, and has no scars. The left ventricle is 1 cm thick and 5 cm in internal diameter. The right ventricle is 0.3 cm thick and 5 cm in internal diameter. The tricuspid, pulmonary, mitral, and aortic valves are thin, pliable, and have no vegetations. The aorta is elastic and has a smooth intimal lining.

RESPIRATORY SYSTEM: The right lung is 250 grams and the left lung is 250 grams. The pleural surfaces are dusky tan-pink to dark red, smooth, and glistening. The lung parenchyma is dusky tan-pink to dark red, soft, and focally congested. The larynx and trachea are patent and have tan, intact mucosa. The pulmonary vessels are patent.

HEPATOBIILIARY SYSTEM: The liver is 1150 grams and has a smooth, tan-brown, and intact capsule. The parenchyma is tan-brown and firm. The gallbladder contains approximately 10 ml of dark green, viscous bile and no choleliths. The gallbladder mucosa is dark green and velvety.

RETICULOENDOTHELIAL SYSTEM: The spleen is 210 grams and has a purple, finely wrinkled, and intact capsule. The parenchyma is dark red and soft. The cervical, mediastinal, and abdominal lymph nodes are not enlarged.

GASTROINTESTINAL TRACT: The tongue has no bite marks or hemorrhage. The esophagus is lined by tan, intact mucosa. The serosa of the stomach is tan-gray and glistening. The stomach is empty. The gastric mucosa is dusky tan, has flattened rugal folds, and is intact. The external surfaces of the intestines are dusky gray and have no palpable masses. The vermiform appendix is dusky gray.

GENITOURINARY SYSTEM: The right kidney is 110 grams and the left kidney is 110 grams. The capsules are adhered to dark red, smooth cortical surfaces. The parenchyma is dark red and has well-defined corticomedullary demarcation. The ureters have a normal course and caliber. The urinary bladder contains approximately 50 ml of yellow urine and has a tan, trabeculated, and intact mucosa. The prostate gland is tan, firm, and not enlarged. The testes have tan parenchyma.

ENDOCRINE SYSTEM: The adrenal glands have well-demarcated, thin, golden yellow cortices, and grey medullae. The pancreas is tan and lobular. The thyroid gland is dark red, uniform, and not enlarged.

NECK: The anterior muscles and surrounding soft tissue of the neck have no hemorrhage. The hyoid bone and thyroid cartilage are intact.

HEAD: The skull has no fractures. The brain is 1510 grams. Epidural and subdural hemorrhage are absent. The leptomeninges are thin, transparent and have no subarachnoid hemorrhage or exudate. The vessels at the base of the brain are normally formed and are patent. The cerebral hemispheres are symmetric and the gyri and sulci are unremarkable. Coronal sections of the cerebrum and transverse sections of the cerebellum and brainstem reveal no neoplasm, hemorrhage, or necrosis.

Patient: SANTELIZ, CHRISTOPHER
Age: 24 Sex: M
Client Patient ID: 9-16-948
Account#: VX83020
Physician: STEPHANY, JOSHUA
Client: DISTRICT 9 MEDICAL EXAMINER MISC
TOXICOLOGY

Specimen Collected :06/14/2016

Lab Order No: 661501222

Reg Date: 06/15/16

Test Name	Result	Units	Cutoff/Reporting Limits
-----------	--------	-------	-------------------------

VOLATILE PANEL - VOLP

SPECIMEN TYPE

RIGHT CHEST BLOOD

ETHANOL	0.181	g/dL	0.010
ACETONE	NONE DETECTED	mg/dL	7.5
METHANOL	NONE DETECTED	mg/dL	15.0
ISOPROPANOL	NONE DETECTED	mg/dL	15.0

Analysis by Gas Chromatography (GC) Headspace Injection
BLOOD DRUG SCREEN - BDSME

SPECIMEN TYPE

RIGHT CHEST BLOOD

GC/MS

CAFFEINE

LC/MS/MS

CAFFEINE, CAFFEINE METABOLITE
BLOOD IMMUNOASSAY SCREEN

BENZODIAZEPINES	NEGATIVE	mg/L	0.050
BUPRENORPHINE	NEGATIVE	mg/L	0.001
CANNABINOCIDS	NEGATIVE	mg/L	0.050
COCAINE METABOLITE	NEGATIVE	mg/L	0.100
FENTANYL	NEGATIVE	mg/L	0.001
OPIATES	NEGATIVE	mg/L	0.050
SALICYLATES	NEGATIVE	mg/L	50.0

TOXICOLOGY

Specimen Collected :06/14/2016

Lab Order No: 662300906

Reg Date: 06/15/16

Test Name	Result	Units	Cutoff/Reporting Limits
-----------	--------	-------	-------------------------

2 7/26/16

Patient: SANTELIZ, CHRISTOPHER**Age:** 24 **Sex:** M**Client Patient ID:** 9-16-948**Account#:** VX83020**Physician:** STEPHANY, JOSHUA**Client:** DISTRICT 9 MEDICAL EXAMINER MISC**TOXICOLOGY**

Specimen Collected : 06/14/2016

Lab Order No: 662300906

Reg Date: 06/15/16

Test Name	Result	Units	Cutoff/Reporting Limits
-----------	--------	-------	-------------------------

VOLATILE PANEL, VITREOUS - VOLPV

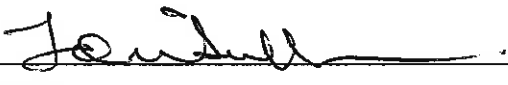
SPECIMEN TYPE

VITREOUS

ETHANOL	0.040	g/dL	0.010
ACETONE	NONE DETECTED	mg/dL	7.5
METHANOL	NONE DETECTED	mg/dL	15.0
ISOPROPANOL	NONE DETECTED	mg/dL	15.0

Analysis by Gas Chromatography (GC) Headspace Injection

Specimens were intact upon receipt. Chain of custody, specimen security and integrity has been maintained. Testing has been performed as requested

Reviewed by: Date: 7/20/16**FINAL REPORT - THIS COMPLETES REPORTING ON THIS CASE**

TOXICOLOGY REPORT

SANTELIZ, CHRISTOPHER

ME16-00948

Sanfeliz, Christopher

ME Case Number: _____

24 Years - M

6/12/2016

