

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

REPORT OF AUTOPSY

DECEDENT: DARRYL BURT

CASE NUMBER: ME 2016 – 000929

MANNER OF DEATH: Homicide

IDENTIFIED BY: Photo ID

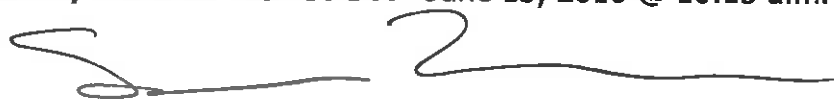
AGE: 29 years

SEX: Male

RACE: Black/African-American

DATE OF DEATH: June 12, 2016

DATE/TIME OF AUTOPSY: June 13, 2016 @ 10:15 a.m.

 DO. 05 AUG 16
PERFORMED BY: Sara H. Zydowicz, DO, Associate Medical Examiner

CAUSE OF DEATH: Gunshot wound of the torso

AUTOPSY FINDINGS

- I. Gunshot wound of torso
 - A. Penetration of aorta
 - B. Left hemopneumothorax
 - C. Indeterminate range
 - D. Projectile recovered

- II. Gunshot wound of left upper extremity
 - A. Hemorrhagic wound path
 - B. Indeterminate range
 - C. No projectile recovered

TOXICOLOGY ANALYSIS: See laboratory report.

continued...

CONCLUSION: In consideration of the circumstances surrounding the death, and after examination of the body, and review of the pertinent medical records, histology and toxicology results, it is my opinion that Darryl Burt, a 29 year old man, died as the result of penetration of the aorta with left hemopneumothorax, due to a gunshot wound of the torso.

The manner of death is classified as homicide.

The autopsy of the body of Darryl Burt is performed pursuant to Florida Statute 406.11 by Sara H. Zydwicz, DO, Associate Medical Examiner, District Nine at the Orange County Medical Examiner facility, Orlando, Florida on June 13, 2016, at 10:15 a.m.

IDENTIFICATION: The body of Darryl Burt is identified by FDLE Special Agent Walsh via comparison to photo ID. The identification is made to ME Chief Investigator Hicks on June 12, 2016.

CLOTHING AND VALUABLES: At the time of examination, the body is dressed in a pair of denim pants, a black and white striped t-shirt, and maroon colored underpants. Black shoes are on the feet. The remaining personal effects are inventoried and personally verified.

GENERAL STATEMENT: The body is that of a well-developed and nourished, adult man, compatible with the above-stated age. At the time of the exam, the body measures 68 inches in length and weighs 209 pounds. Body build is average and overweight. The body is cold from refrigeration. The rigor mortis is relenting. Livor mortis is fixed, purple-red, extends over the posterior surfaces of the body, and is confined to the back. Fixed lividity is also on the chest, neck and face area. A few Tardieu spots are scattered across the chest. The body is neither decomposed nor embalmed.

EXTERNAL EXAMINATION

The scalp hair is black, coarse with a tight curl, and measures an estimated 5 cm in maximal length. Facial hair consists of a black beard. The irides are brown. The pupils have equal diameters. The corneas are slightly clouded. The conjunctivae are unremarkable, with no hemorrhages. The sclerae are white. The external nares contain mucus and liquid blood. The nasal skeleton is palpably intact. The lips have no injuries. The oral cavity has natural dentition in a good state of repair. The oral mucosa has no injuries, intact frenula and no petechial hemorrhages in the oral vestibule. It is lined with clear mucus and a small amount of blood-streaked foam. The external auditory canals are free of foreign material.

The neck is symmetrical and has no palpable masses or external injuries.

The thorax is well-developed and symmetrical and is remarkable for injuries as described. The abdomen is slightly protuberant and soft, with no palpable masses.

The external genitalia are those of a normally developed, adult circumcised man without injuries. The testes are descended into the scrotal sac and palpably unremarkable.

The lower extremities are symmetrical and have no anatomic abnormalities. The arms, forearms, wrists and hands have no nontraumatic abnormalities. The fingernails are intact. The left upper extremity is remarkable for injuries as described below.

The back is unremarkable. The anus has no abnormalities.

SCARS AND TATTOOS

The body has no apparent surgical scars. The body has no tattoos.

THERAPY

None.

EVIDENCE OF INJURY

Gunshot wound of torso:

- 1) An entrance gunshot wound perforation is located on the left side of the chest just below the level of the nipple line. Its central portion lies 46 cm below the vertex of the head. It is oval in shape measuring 1.1 cm x 0.6 cm. It has an eccentric 0.3 cm abrasion lying on the medial aspect. The adjacent skin has no soot, stippling or muzzle imprint.
- 2) The hemorrhagic wound path involves the skin, subcutaneous adipose tissue, and then continues in the intercostal space between ribs 4 and 5. It then penetrates the aorta where the wound path ends.
- 3) Retrieved from the right femoral artery is an intact projectile. It is photographed on filter paper and sealed in an evidence container. (Comment: Migration of projectile secondary to body being moved.)
- 4) The wound path with respect to the standard anatomic position is from left to right and back to front.

5) Associated injuries include retrieval of 1700 ml of dark red bloody fluid admixed with clot retrieved from the left pleural cavity and tracking of dark red blood along the paravertebral soft tissues estimated at greater than 200 cc.

Gunshot wound of left upper extremity:

- 1) An entrance gunshot wound perforation lies on the ventral medial aspect of the left forearm. Its central portion is located 51 cm from the tip of the left index finger. It is slightly oval in shape measuring 1.1 cm x 0.8 cm. It has a regular 0.1 cm margin of abrasion. The hemorrhagic wound path sequentially runs through the skin, subcutaneous adipose tissue and skeletal muscle before exiting on the ventral aspect of the left forearm.
- 2) The exit wound perforation lies on the lateral aspect of the ventral portion of the left forearm. The wound lies 54 cm from the tip of the left index finger. It is oval in shape measuring 0.7 cm x 0.4 cm.
- 3) The wound path with respect to the standard anatomic position is from left to right and back to front.
- 4) Associated injuries include hemorrhage along the entire wound path.

INTERNAL EXAMINATION

The usual Y-shaped incision is made and reveals a small amount of hemorrhage associated with the above described gunshot wound of the torso. There is no hemorrhage of the subcutaneous tissue of the abdomen. The serosal cavities have no adhesions. With the exception of the left pleural cavity, the body cavities have no abnormal collections of fluid. The pneumothorax test is negative for gas on the right. The organs are minimally congested, pale, in the expected anatomic positions, and have no decomposition.

CARDIOVASCULAR SYSTEM: The aorta has injuries as described and has no other anatomic abnormalities. The vena cavae and their major tributaries return to the heart in the usual distribution and are unremarkable, with no thrombosis. The pulmonary trunk and pulmonary arteries are patent, have no thromboemboli, and have smooth intimal surfaces. The large vessels collapsed and contain a minimal amount of liquid and clotted blood.

The heart weighs 410 grams. The epicardial surface is smooth. The coronary arteries arise normally, have patent orifices and follow a right dominant distribution. They have no atherosclerosis or other abnormalities. The myocardial cut surfaces are firm, brown-red, and have no discernible lesions. The parietal and valvular endocardium is smooth, thin and unremarkable. The valvular rings, leaflets and cusps are normal. The atrial and ventricular septae are intact. The chambers of the heart are not chronically dilated.

RESPIRATORY SYSTEM: The upper and lower airways are patent and lined with clear mucus streaked with blood. The distal bronchial tree contains a small amount of froth. The mucosal surfaces are yellow-red, smooth, and have no petechiae. The right and left lungs weigh 420 and 250 grams, respectively. They have smooth pleural surfaces. The cut surfaces of the pulmonary parenchyma are pink-red anteriorly and red-purple posteriorly with aspirated and passive blood. Due to a limited amount of bloody liquid and froth, the peripheral pulmonary vessels have smooth intimal surfaces and no thromboemboli.

HEPATOBIILIARY SYSTEM: The liver weighs 1520 grams and has a smooth, intact capsule. The liver parenchyma is moderately firm, brown-red, and congested, and has no lesions. The gallbladder contains viscid green-brown bile without gallstones. Its mucosa is velvety and unremarkable. The extrahepatic biliary tree is patent. The pancreas has tan-brown, lobulated parenchyma, clear ducts and no lesions.

RETICULOENDOTHELIAL SYSTEM: The spleen weighs 70 grams and has a smooth, intact capsule. The cut surfaces of the splenic parenchyma are maroon, soft, and have inapparent lymphoid follicles. The lymph nodes and tonsils are not enlarged and have unremarkable cut surfaces. The thymus gland is partially atrophic and fat-replaced with residual tan-pink lobulated parenchyma with no lesions.

GASTROINTESTINAL TRACT: The esophagus is lined by smooth, gray-white mucosa with no lesions. The gastric mucosa has the usual rugal folds. The stomach lumen contains less than 100 ml of dark brown fluid with suspended food particles including chicken and beans. The duodenum has no lesions. The small and large bowels are unremarkable.

GENITOURINARY SYSTEM: The right kidney weighs 140 grams; the left kidney weighs 130 grams. They have smooth thin renal capsules that strip with ease. The cortical surfaces are tan-brown and smooth. The cortices are pale and well-delineated from the underlying medullary pyramids and have no lesions. The calyces, renal pelves and ureters are not dilated and have unremarkable

lining mucosa. There is no increase in hilar adipose tissue. The urinary bladder contains a measured 100 ml of pale urine. Its mucosa is white-tan, smooth, and has no lesions. The urethra is unremarkable.

The prostate gland has a normal size and monomorphic cut surfaces. The seminal vesicles are unremarkable. The testes are descended into the scrotal sac and palpably unremarkable.

ENDOCRINE SYSTEM: The pituitary and adrenal glands have no abnormalities. The thyroid gland is tan-pink, with monomorphic, granular cut surfaces and no lesions.

NECK: The cervical spine, laryngeal cartilages and hyoid bone have no fractures or other abnormalities. The strap muscles of the neck have no hemorrhages. The tongue is normal, with no hemorrhages, bite marks or other lesions. The epiglottic and laryngeal mucosa has no petechiae or edema and is lined with clear mucus and bloody fluid.

HEAD: The galeal aponeurosis is unremarkable. The vault and base of the skull have no fractures. There are no epidural or subdural hemorrhages. The dura mater and falx cerebri are intact. The brain weighs 1550 grams and has symmetrical cerebral hemispheres. The external surfaces of the brain are not edematous. The arachnoid membrane is thin and delicate, with congested arachnoid vessels. The cerebrospinal fluid is clear. The cerebral arteries have no atherosclerosis or other abnormalities. The external and cut surfaces of the cerebral hemispheres, brainstem and cerebellum reveal no structural lesions. The cerebral ventricles have a normal caliber and shape.

MUSCULOSKELETAL SYSTEM: The clavicles, sternum, spine, ribs and pelvis have no recent fractures. The musculature is normally developed.

SHZ/alm

Patient: **BURT, DARRYL** Age: **29** Sex: **M**
Client Patient ID: **9-16-929** Account#: **VX82954**
Physician: **ZYDOWICZ, SARA** Client: **DISTRICT 9 MEDICAL EXAMINER MISC**

TOXICOLOGY

Specimen Collected :06/13/2016 Lab Order No: 661401243 Reg Date: 06/14/16

Test Name	Result	Units	Cutoff/Reporting Limits
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VOLATILE PANEL - VOLP

SPECIMEN TYPE

PERIPHERAL BLOOD

ETHANOL	0.035	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

LEFT CHEST BLOOD

GC/MS

CAFFEINE

LC/MS/MS

CAFFEINE, CAFFEINE METABOLITE

BLOOD IMMUNOASSAY SCREEN

AMPHETAMINES	NEGATIVE	mg/L	0.100
BARBITURATES	NEGATIVE	mg/L	0.100
BENZODIAZEPINES	NEGATIVE	mg/L	0.050
BUPRENORPHINE	NEGATIVE	mg/L	0.001
CANNABINOIDS	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

Patient: **BURT, DARRYL** Age: **29** Sex: **M**
Client Patient ID: **9-16-929** Account#: **VX82954**
Physician: **ZYDOWICZ, SARA** Client: **DISTRICT 9 MEDICAL EXAMINER MISC**

TOXICOLOGY

Specimen Collected :06/13/2016

Lab Order No: 661900675

Reg Date: 06/14/16

Test Name	Result	Units	Cutoff/Reporting Limits
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VOLATILE PANEL, VITREOUS - VOLPV

SPECIMEN TYPE

VITREOUS

ETHANOL	0.030	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: Janell Date: 7/19/16

FINAL REPORT - THIS COMPLETES REPORTING ON THIS CASE

TOXICOLOGY REPORT

BURT, DARRYL

ME16-00929

Burt, Darryl

29 Years - M

6/12/2016

Sub

