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

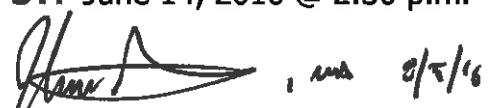
REPORT OF AUTOPSY

DECEDENT: JONATHAN CAMUY VEGA **CASE NUMBER:** ME 2016-000943

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 @ 2:30 p.m.



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

CAUSE OF DEATH: Gunshot wounds

AUTOPSY FINDINGS

I. Perforating gunshot wound of the neck:
   - A. Entrance wound on the right lateral neck
   - B. Stippling, soot, and muzzle imprint are absent
   - C. Lacerations and hemorrhage of the subcutaneous soft tissue and musculature of the posterior neck
   - D. Fractures of the 2nd and 3rd cervical vertebrae
   - E. Lacerations of the cervical spinal cord
   - F. Exit wound on the left lateral neck
   - G. Direction of the path of the wound is right to left, back to front, and upward

II. Penetrating gunshot wound of the upper extremities and chest:
   - A. Entrance wound on the lateral right upper arm
   - B. Stippling, soot, and muzzle imprint are absent

continued...

Findings continued ...

C. Lacerations and hemorrhage of the musculature of the right upper arm
D. Exit wound of the medial right upper arm
E. Re-entrance gunshot wound of the right lateral chest
F. Lacerations and hemorrhage of the soft tissue and musculature of the chest
G. Exit wound on the left lateral chest
H. Re-entrance wound of the left upper arm
I. Fractures of the left humerus
J. Deformed copper jacketed projectile recovered from the musculature of the left upper arm
K. Direction of the path of the wound is right to left and downward

III. Penetrating gunshot wound of the chest and left upper extremity:
A. Entrance wound on the right upper back
B. Lacerations and hemorrhage of the musculature and soft tissue of the back
C. Fractures of the 7^{th} cervical vertebra and 1^{st} thoracic vertebra
D. Fractures of the left scapula
E. Lacerations and hemorrhage of the soft tissue and musculature of the left upper arm
F. Fractures of the left humerus
G. Deformed copper-jacketed projectile recovered from the musculature of the left upper arm
H. Direction of the path of the wound is right to left, back to front, with no significant up or down trajectory

IV. Perforating gunshot wound of the left lower extremity:
A. Entrance wound on the medial left upper thigh
B. Stippling, soot, and muzzle imprint are absent
C. Lacerations and hemorrhage of the soft tissue and musculature of the left thigh
D. Exit wound on the superior left lateral shin
E. Direction of the path of the wound is right to left and downward

V. Perforating gunshot wound of the right upper arm and right chest:
A. Entrance wound on the medial right upper arm
B. Stippling, soot, and muzzle imprint are absent

Findings continued ...

C. Lacerations and hemorrhage of the subcutaneous soft tissue and musculature of the right upper arm and right upper chest
D. Exit wound of the right upper chest
E. Direction of the path of the wound is right to left, back to front, and upward
F. Comment: This gunshot wound is in line with the previously-stated apparent gunshot wound of the neck (I.) and may represent one single wound path

VI. Lacerations and abrasions of the lateral right lower extremity

VII. Fragmented projectile recovered from the shroud

VIII. Fragmented projectile recovered from the right pants leg

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 Jonathan Camuy Vega, a 24-year-old white male shot by another, is the result of gunshot wounds.

The manner of death is homicide.

The autopsy of the body of Jonathan Camuy Vega 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 2:30 p.m.

IDENTIFICATION: The body of Jonathan Camuy Vega is identified via comparison of decedent to photograph associated with Florida Driver License #C512-421-91-221-0. The identification is made by Special Agent Matt Walsh, of the FDLE, to M.E. Investigator Carla Sundvall on June 12, 2016, at the Orange County Medical Examiner facility.

CLOTHING AND VALUABLES: At the time of examination, the decedent is dressed in a black Polo-style shirt, blue jeans with a tan belt, white socks, white sneakers, and underwear. A blue watch is around the left wrist. White metal earrings with clear stones are in each earlobe. A paper nightclub band is around the right wrist.

GENERAL STATEMENT: The body is that of a well-developed, well-nourished, 69 inch, 190 pound, adult white male, consistent with the reported age of 24 years.

EXTERNAL EXAMINATION

The scalp is covered by up to 7 cm long, brown hair. The irides are brown and cloudy. The sclerae are white. The conjunctivae have no petechiae.
The external nose has no trauma and the nasal septum is intact. Each earlobe is pierced once. The frenula are intact and the oral mucosa has no trauma.
The teeth are natural and in adequate condition.

The torso has no congenital deformities, scars, or tattoos. The external genitalia are those of an uncircumcised adult male. The testes are in the scrotum.
The anus is normal.

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

EVIDENCE OF INJURY

Perforating gunshot wound of the neck:

A 1 x 1 cm round entrance gunshot wound of the right lateral neck, 8½ inches below the top of the head and 2½ inches right of the midline. Stippling, soot, and muzzle imprint are absent.

The wound path is hemorrhagic and traverses the soft tissue and musculature of the neck, 2nd and 3rd cervical vertebrae, cervical spinal cord, and exits the left lateral neck.

A 1 x 0.2 cm stellate exit wound is on the left lateral neck, 6 inches below the top of the head and 2 inches left of the midline.

Associated with the path of the wound are lacerations and hemorrhage of the soft tissue and musculature of the neck, fractures of the 2nd and 3rd cervical vertebrae, and transection of the cervical spinal cord.

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

Penetrating gunshot wound of the upper extremities and chest:

A 0.5 x 0.5 cm entrance gunshot wound is on the lateral right upper arm, 10 inches below the top of the head and 10 inches right of the anterior midline. Stippling, soot, and muzzle imprint are absent.

The wound path is hemorrhagic and traverses the soft tissue and musculature of the right upper arm, and exits the medial right upper arm. A 1 x 0.5 cm stellate exit wound is on the medial right upper arm, 12¼ inches below the top of the head and 9½ inches right of the anterior midline.

A 1 x 0.5 cm re-entrance gunshot wound is on the lateral right chest, 12½ inches below the top of the head and 7½ inches right of the anterior midline.

The wound path is hemorrhagic and traverses the soft tissue and musculature of the chest and exits the lateral left upper chest.

A 0.5 x 0.5 cm exit wound is on the lateral left upper chest, 14 inches below the top of the head and 6¼ inches left of the anterior midline.

A 0.5 x 0.2 cm re-entrance gunshot wound is on the medial left upper arm, 14 inches below the top of the head, and 6½ inches left of the anterior midline.

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

Associated with the path of the wound are lacerations and hemorrhage of the soft tissue and musculature of the right upper arm, lacerations and hemorrhage of the soft tissue of the chest, lacerations and hemorrhage of the soft tissue and musculature of the left upper arm, and fractures of the left humerus.

A deformed copper-jacketed projectile is recovered from the musculature of the left upper arm.

The overall direction of the path of the wound is right to left and downward.

Penetrating gunshot wound of the chest and left upper extremity:

A 0.5 x 0.5 cm round, entrance gunshot wound is on the right upper back, 11 inches below the top of the head and 6 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 upper back, 7th cervical vertebra, 1st thoracic vertebra, soft tissue and musculature of the left upper arm, and left humerus. A deformed copper-jacketed projectile is recovered from the musculature of the left upper arm.

Associated with the path of the wound are lacerations and hemorrhage of the soft tissue and musculature of the upper back, fractures of the 7th cervical vertebra, fractures of the 1st thoracic vertebra, fractures of the left scapula, lacerations and hemorrhage of the musculature of the left upper arm, and fractures of the left humerus.

The direction of the path of the wound is right to left, back to front and with no significant up or down trajectory identified.

Perforating gunshot wound of the left lower extremity:

A 1 x 1 cm round entrance gunshot wound is on the medial left upper thigh,

24 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 and exits the lateral left superior shin.

A 1 x 1 cm stellate exit wound is on the lateral left superior shin, 20½ 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 lower extremity.

The direction of the path of the wound is right to left and downward.

Perforating gunshot wound of the right upper extremity and chest:

A 1 x 1 cm round entrance gunshot wound is on the medial right upper arm, 14 inches below the top of the head and 10 inches right of the anterior midline. Stippling, soot, and muzzle imprint are absent.

The wound path is hemorrhagic and traverses the soft tissue and musculature of the right upper arm and right upper chest.

A 1 x 1 cm round exit wound is on the right upper chest, 10 inches below the top of the head and 5¼ inches right of the anterior midline. A 0.5 x 0.5 cm abrasion is adjacent to the exit wound at the 1 o'clock position.

Associated with the wound are lacerations and hemorrhage of the soft tissue and musculature of the right upper arm and right upper chest.

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

Comment: The path of this gunshot wound is in line with the previously-described perforating gunshot wound of the neck. It is possible that both these wounds represent one wound path.

Lacerations and abrasions of the lateral right lower extremity:

A 25 x 4 cm area of superficial lacerations and abrasions are on the lateral right lower extremity. These injuries may be caused by a fragmented projectile either from striking an intermediate object or ricochet.

A partially-deformed, fragmented projectile is recovered from the shroud.

A partially-deformed, fragmented projectile is recovered from the right pants leg.

INTERNAL EXAMINATION

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

CARDIOVASCULAR SYSTEM: The heart is 350 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 6 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 550 grams and the left lung is 450 grams. The pleural surfaces are tan-pink to dark red, smooth, and glistening. The lung parenchyma is 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.

HEPATOBILIARY SYSTEM: The liver is 1900 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 270 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 tan, has unremarkable rugal folds, and is intact. The external surfaces of the intestines are tan-gray and have no palpable masses. The vermiform appendix is tan-gray and glistening.

GENITOURINARY SYSTEM: The right kidney is 120 grams and the left kidney is 120 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 gray medullae. The pancreas is tan and lobular. The thyroid gland is dark red, uniform, and not enlarged.

NECK: The anterior muscles have no hemorrhage. The injuries to the neck are previously described. The hyoid bone and thyroid cartilage are intact.

HEAD: The skull has no fractures. The brain is 1440 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.

JDS/st

Wuesthoff REFERENCE LABORATORY

Wuesthoff Reference Laboratory
6800 Spyglass Court
Melbourne, Florida 32940
Julie Bell, M.D., Laboratory Director

Patient: CAMUY VEGA, JONATHAN Age: **24** Sex: **M**
Client Patient ID: 9-16-943 Account#: VX83016
Physician: STEPHANY, JOSHUA Client: DISTRICT 9 MEDICAL EXAMINER MISC

TOXICOLOGY

Specimen Collected :06/14/2016 Lab Order No: 661501217 Reg Date: 06/15/16

Test Name	Result	Units	Cutoff/Reporting Limits
VOLATILE PANEL - VOLP			
SPECIMEN TYPE			
PERIPHERAL BLOOD			
ETHANOL	**0.115**	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			
HEART BLOOD			
GC/MS			
CAFFEINE			
LC/MS/MS			
CAFFEINE, CAFFEINE METABOLITE			
BLOOD IMMUNOASSAY SCREEN			
SPECIMEN TYPE			
PERIPHERAL BLOOD			
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

7/21/16

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Julie Bell, M.D., Laboratory Director

Patient: CAMUY VEGA, JONATHAN Age: **24** Sex: **M**
Client Patient ID: 9-16-943 Account#: VX83016
Physician: STEPHANY, JOSHUA Client: DISTRICT 9 MEDICAL EXAMINER MISC

TOXICOLOGY

Specimen Collected :06/14/2016 Lab Order No: 662300900 Reg Date: 06/15/16

Test Name	Result	Units	Cutoff/Reporting Limits
VOLATILE PANEL, VITREOUS - VOLPV			
SPECIMEN TYPE			
VITREOUS			
ETHANOL	**0.123**	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

7/21/16

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

Reviewed by: _____ Date: 7/18/16

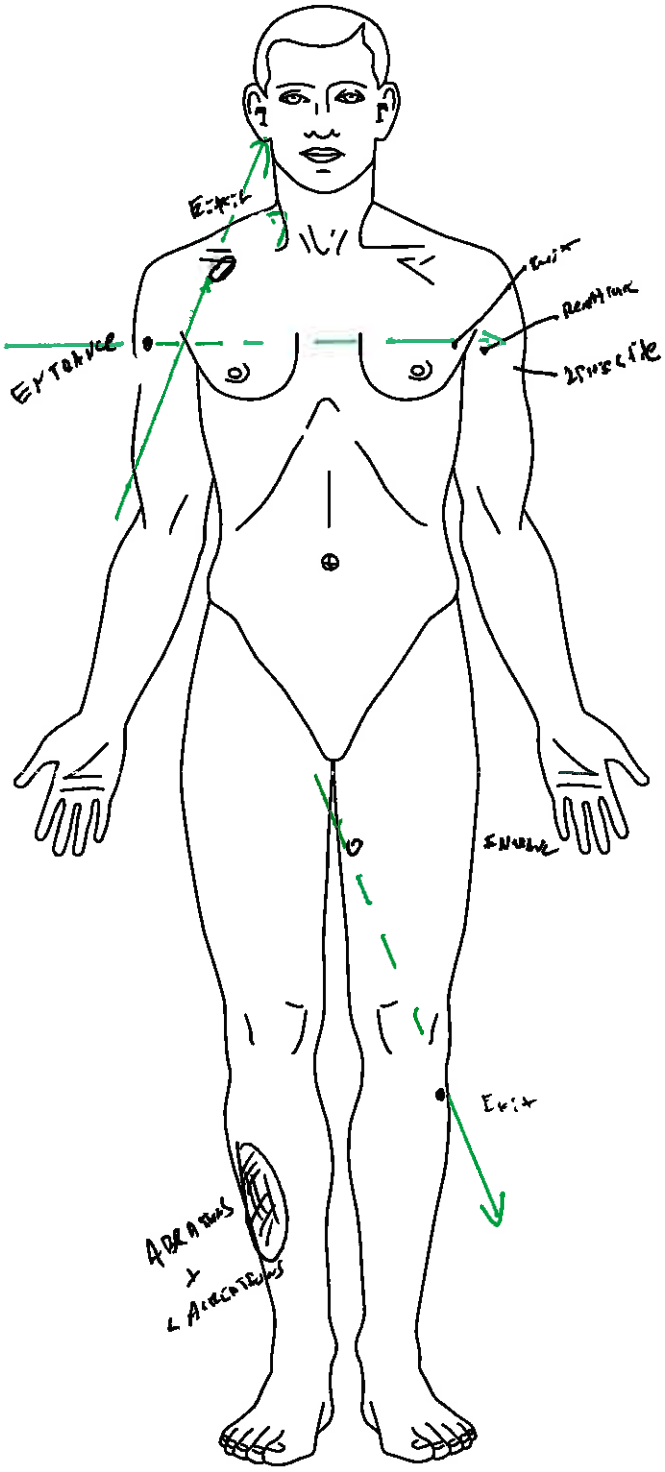
FINAL REPORT - THIS COMPLETES REPORTING ON THIS CASE

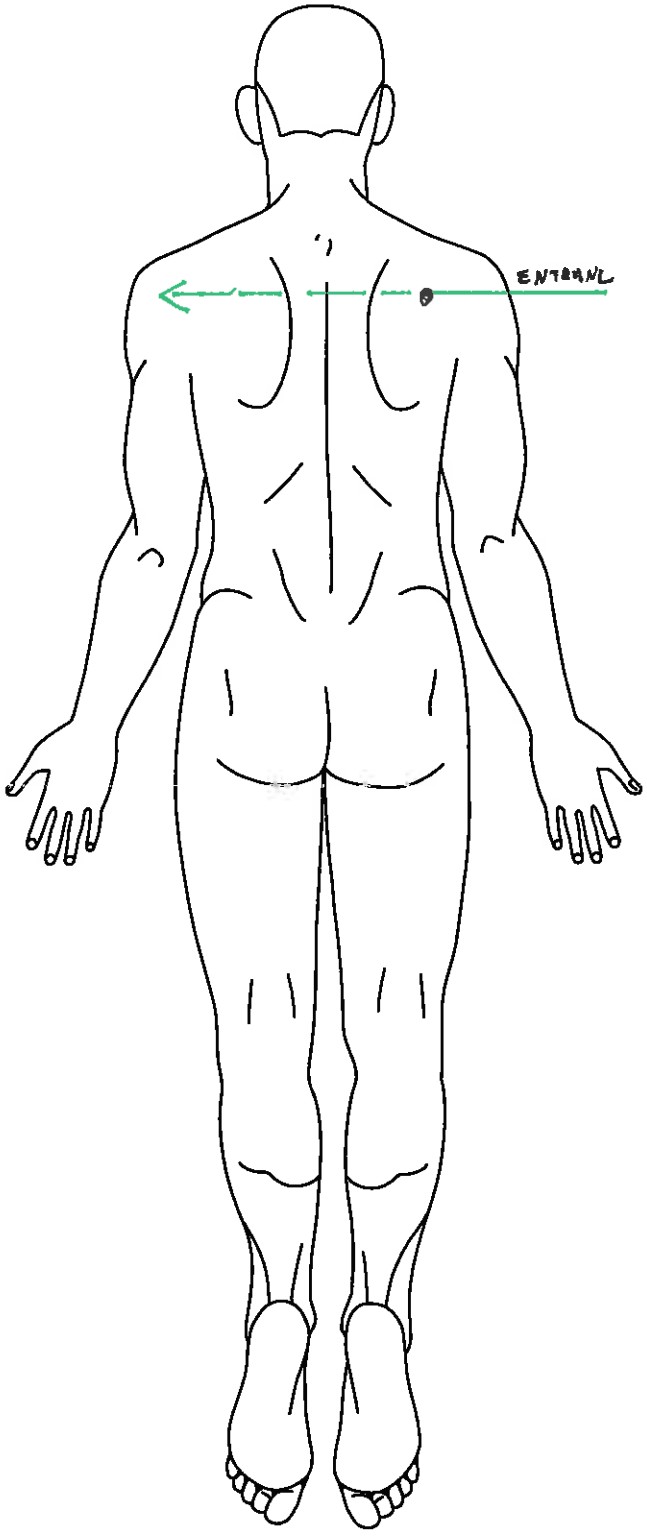
ME16-00943

Camuy Vega, Jonathan

24 Years - M 6/12/2016

ME Case Number: _____



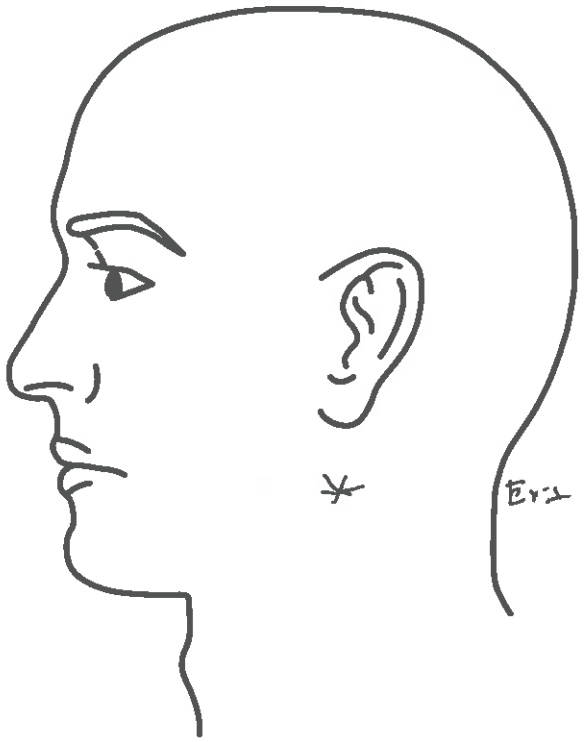


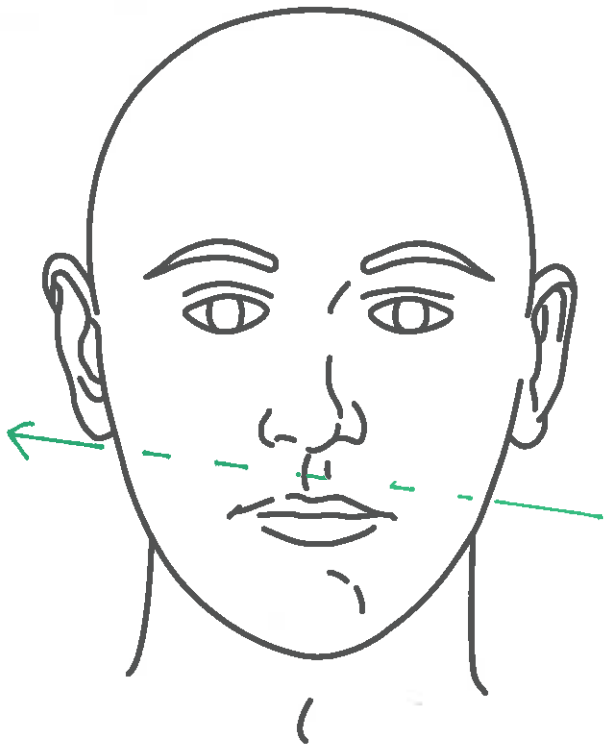
CLARIFICATION DIAGRAM

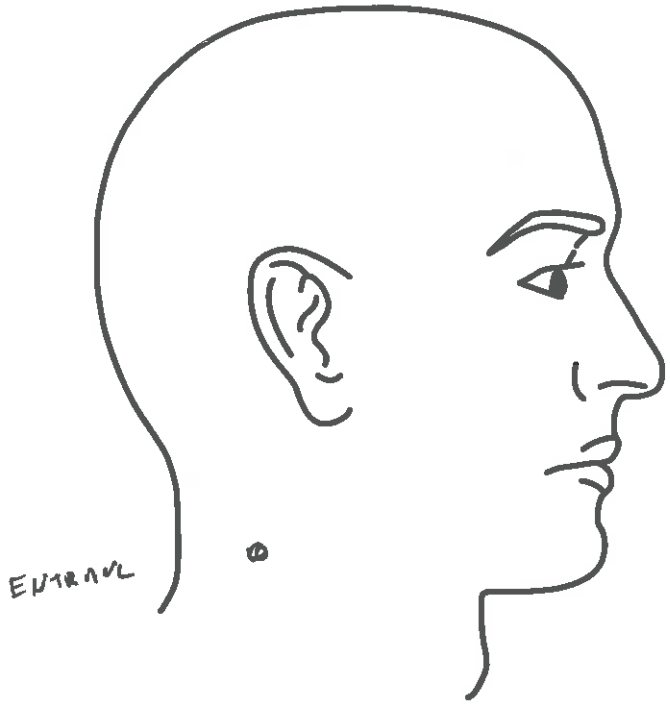
ME16-00943

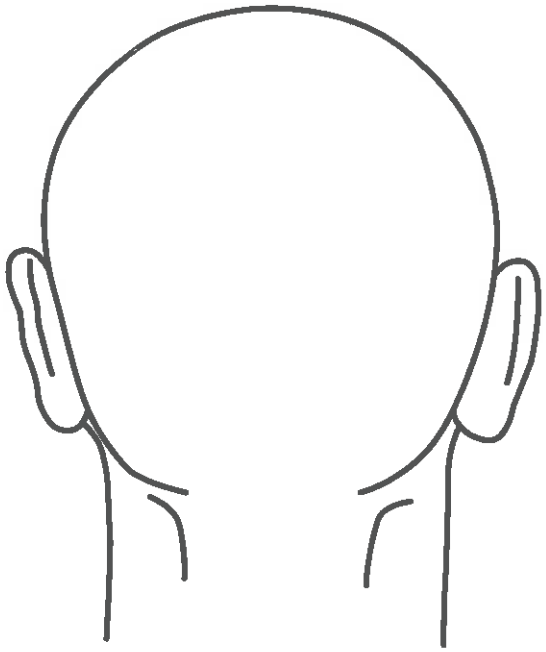
Camuy Vega, Jonathan

24 Years - M 6/12/2016









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CLARE FRACTURE DIAGRAM