

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

REPORT OF AUTOPSY

DECEDENT: MARTIN BENITEZ TORRES

CASE NUMBER: ME 2016-000941

MANNER OF DEATH: Homicide

IDENTIFIED BY: Photo ID

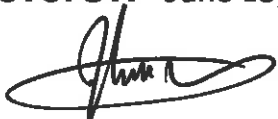
AGE: 33 years

SEX: Male

RACE: White (Hispanic)

DATE OF DEATH: June 12, 2016

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

 , M.D. 6/15/16

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

CAUSE OF DEATH: Multiple gunshot wounds

AUTOPSY FINDINGS

- I. Perforating gunshot wound of the chest:
 - A. Entrance wound on the right back
 - B. Stippling, soot, and muzzle imprint absent
 - C. Fractures of the posterior aspects of the 1st through 4th right ribs
 - D. Perforations of the right upper lung lobe
 - E. Fractures of the right scapula
 - F. Exit wound on the superior right shoulder and superior right back
 - G. Direction of the path of the wound: Back to front, slightly right to left, and upward

- II. Perforating gunshot wound of the right lower extremity:
 - A. Entrance wound on the superior anterior right thigh
 - B. Stippling, soot, and muzzle imprint are absent

continued...

- C. Lacerations and hemorrhage of the musculature of the right thigh and right calf
 - D. Exit wound on the posterior inferior right thigh
 - E. Partial re-entrance and defect associated with the exit wound on the posterior right calf
 - F. Direction of the path of the wound: Front to back, right to left, and downward
- III. Perforating gunshot wound of the right lower extremity:
- A. Entrance wound on the right lateral shin
 - B. Stippling, soot, and muzzle imprint absent
 - C. Exit wound on the right anterior shin
 - D. Direction of the path of the wound: Front to back, right to left, and downward
- IV. Penetrating gunshot wound of the left lower extremity:
- A. Entrance wound on the medial left calf
 - B. Stippling, soot, and muzzle imprint absent
 - C. Lacerations and hemorrhage of the subcutaneous soft tissue and musculature
 - D. Fragmented projectile recovered from the left calf
 - E. Direction of the path of the wound: Front to back, right to left, and downward
- V. Perforating gunshot wound of the buttocks:
- A. Entrance wound on the medial right buttock
 - B. Stippling, soot, and muzzle imprint absent
 - C. Exit wound on the midline of the buttocks
 - D. Lacerations and hemorrhage of the subcutaneous soft tissue and musculature
 - E. Direction of the path of the wound: Right to left with no up or down, or back to front trajectory
- VI. Fragment of projectile recovered from the hair of the decedent

TOXICOLOGY ANALYSIS: See laboratory report.

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CONCLUSION: In consideration of the circumstances surrounding the death, and after examination of the body, toxicology analysis and review of available medical records, it is my opinion that the death of Martin Benitez Torres, a 33 year old white male, is the result of multiple gunshot wounds.

The manner of death is homicide.

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The autopsy of the body of Martin Benitez Torres 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 13, 2016, at 10:10 a.m.

IDENTIFICATION: The body of Martin Benitez Torres is identified by FDLE Special Agent Walsh via comparison to the photograph on his Florida driver's license #B532-560-83-027-1. The identification is made 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 mesh t-shirt, black pants with a black belt, black socks, black shoes, and underwear. An earring with a black stone is in each earlobe. A white metal necklace with a circular white metal pendant is around the neck. A white metal ring with clear stones is on the 4th digit of the left hand. A white metal watch is around the left wrist. A beaded blue bracelet is around the left wrist. A paper bracelet is on the right wrist.

GENERAL STATEMENT: The body is that of a well-developed, well-nourished, 72 inch, 163 lb, adult, white male consistent with the reported age of 33 years.

EXTERNAL EXAMINATION

The scalp is atraumatic and covered by up to 8 cm long, brown hair. The irides are brown and 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 neck is unremarkable.

The torso has no congenital deformities or scars. A tattoo in black ink of "Si Dios me quita la pista es porque me la dejado ver todo lo bello del mundo" is on the left flank. The left abdomen has focal green discoloration. The external genitalia are those of an uncircumcised adult male. The pelvic area is shaven antemortem. The anus is unremarkable.

The extremities have no congenital deformities or scars. A tattoo in black ink of a design is on the 4th digit of the left hand. A tattoo in black ink of scissors and roses is on the left upper arm.

EVIDENCE OF INJURY

Perforating gunshot wound of the chest:

A 1 x 1 cm round entrance gunshot wound is on the right back, 17 inches below the top of the head, and 4 inches right of the posterior midline. Stippling, soot, and muzzle imprint are absent.

The wound path is hemorrhagic and traverses the musculature of the right back, right scapula, posterior aspects of the 1st through 4th right ribs, right upper lung lobe, and exits the right upper back and right upper shoulder.

A 0.2 x 0.2 cm slit-like exit wound is in the right upper back, 11 inches below the top of the head, and 3 inches right of the posterior midline.

A 0.2 x 0.2 cm round exit wound is on the superior right shoulder, 8-1/2 inches below the top of the head, and 4 inches right of the anterior midline.

Fragments of projectile are recovered along the path of the wound.

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

Perforating gunshot wound of the right lower extremity:

A 1.5 x 1 cm oval entrance gunshot wound is on the superior anterior right thigh, 30 inches above the bottom of the right heel. Stippling, soot, and muzzle imprint are absent.

The wound path is hemorrhagic and traverses the musculature of the right thigh and exits the posterior inferior right thigh.

A 7 x 6 cm irregular stellate exit wound is on the posterior inferior right thigh, 21-1/2 inches above the bottom of the right heel.

A 3 x 4 cm stellate partial re-entrance wound and associated defect is on the posterior right calf, 16-1/2 inches above the bottom of the right heel. Both the exit wound and the defect have irregular abrasions around the edges of the

wounds. These abrasions are similar and are consistent with the right extremity being flexed at the time the decedent was shot; therefore, the posterior right thigh and posterior calf were adjacent to one another at the time the decedent was shot.

Associated with the path of the wound are lacerations and hemorrhage of the musculature of the right thigh and right calf.

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

Perforating gunshot wound of the right lower extremity:

A 0.6 x 0.6 cm round entrance gunshot wound is on the lateral right calf, 15-1/2 inches above the bottom of the right heel. Stippling, soot, and muzzle imprint are absent.

The wound path is hemorrhagic and traverses the musculature of the right calf and exits the anterior shin.

A 4 x 2 cm irregular exit wound is on the anterior right shin, 14 inches above the bottom of the right heel.

Associated with the path of the wound are lacerations and hemorrhage of the musculature of the right calf.

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

Penetrating gunshot wound of the left lower extremity:

A 1 x 1 cm round entrance gunshot wound is on the medial left calf, 14 inches above the bottom of the left heel. Stippling, soot, and muzzle imprint are absent.

The wound path is hemorrhagic and traverses the musculature of the left calf.

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

A fragment of copper-jacketed lead projectile is recovered from the musculature of the posterior left calf.

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

Perforating gunshot wound of the buttocks:

A 0.3 x 0.3 cm round entrance gunshot wound is on the medial right buttock, 36 inches below the top of the head, and 1/2 inch right of the posterior midline. Stippling, soot, and muzzle imprint are absent.

The wound path is hemorrhagic and traverses the superficial soft tissue of the buttocks.

A 1 x 0.3 cm slit-like exit wound is on the midline of the buttocks, 36 inches below the top of the head.

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

Other findings:

A fragment of projectile is recovered from the decedent's hair.

INTERNAL EXAMINATION

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

CARDIOVASCULAR SYSTEM: The heart is 280 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 2.5 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 280 grams and the left lung is 450 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 dusky tan-grey, intact mucosa. The pulmonary vessels are patent.

HEPATOBIILIARY SYSTEM: The liver is 1500 grams and has a dusky brown, smooth, and intact capsule. The parenchyma is dusky brown and soft. The gallbladder contains approximately 5 ml of dark green, viscous bile and no choleliths. The gallbladder mucosa is dark green and velvety.

RETICULOENDOTHELIAL SYSTEM: The spleen is 190 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-grey and glistening. The stomach contains approximately 100 ml of tan fluid. The gastric mucosa is tan, has unremarkable rugal folds, and is intact. The external surfaces of the intestines are tan-grey and have no palpable masses. The vermiform appendix is tan-grey and glistening.

GENITOURINARY SYSTEM: The right kidney is 120 grams and the left kidney is 130 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 is empty of urine and has a tan, trabeculated, intact mucosa. The prostate gland is tan, firm, and not enlarged. The testes have tan parenchyma.

ENDOCRINE SYSTEM: The adrenal glands have dusky yellow cortices and grey medullae. The pancreas is dusky 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 1350 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

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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/alm

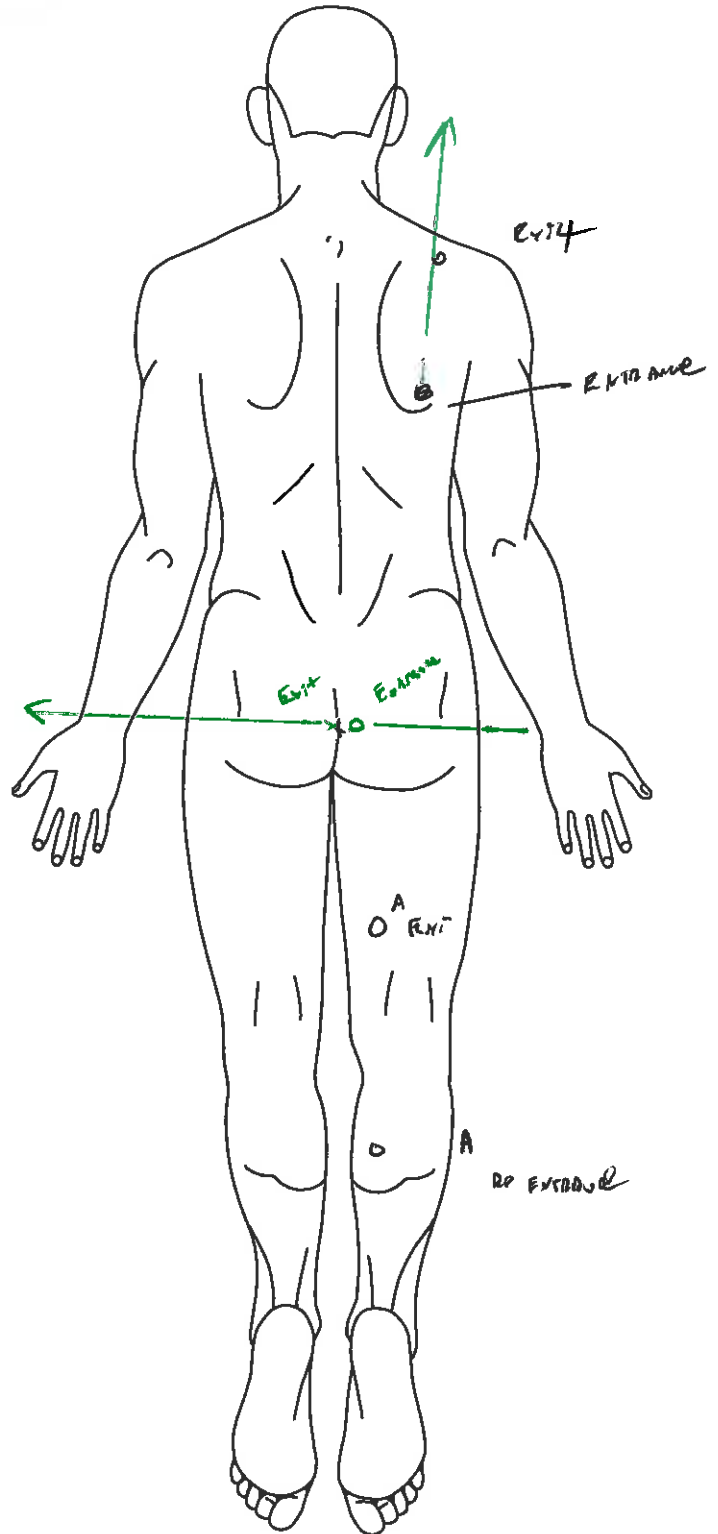
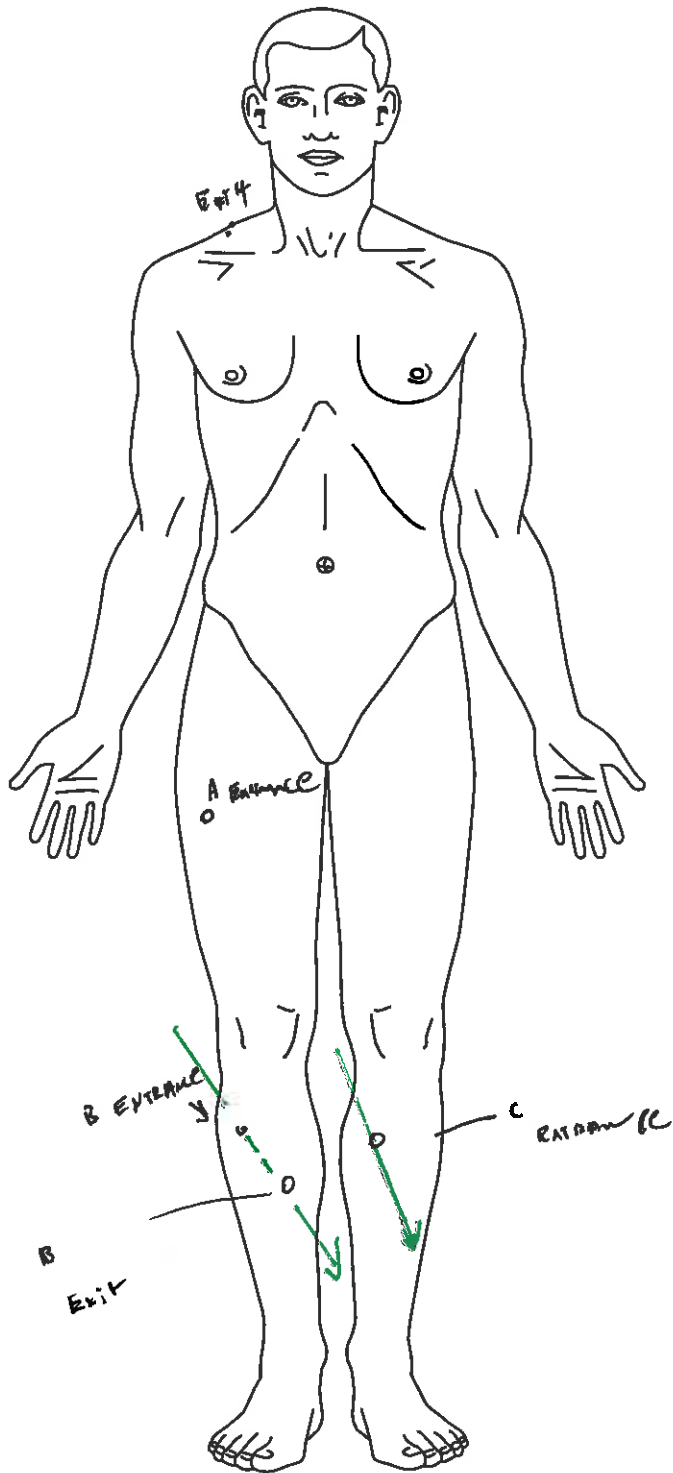
ME16-00941

ME Case Number: _____

Benitez Torres, Martin

33 Years - M

6/12/2016



Patient: BENITEZ TORRES, MARTIN
Age: 33 Sex: M
Client Patient ID: 9-16-941
Account#: VX82957
Physician: STEPHANY, JOSHUA
Client: DISTRICT 9 MEDICAL EXAMINER MISC
TOXICOLOGY

Specimen Collected :06/13/2016

Lab Order No: 661401246

Reg Date: 06/14/16

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

SPECIMEN TYPE

CHEST BLOOD

ETHANOL	0.043	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

CHEST BLOOD

GC/MS

CAFFEINE

LC/MS/MS

ACETAMINOPHEN, CAFFEINE, CAFFEINE METABOLITE
BLOOD IMMUNOASSAY SCREEN

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

TOXICOLOGY

Specimen Collected :06/13/2016

Lab Order No: 661900681

Reg Date: 06/14/16

Test Name	Result	Units	Cutoff/Reporting Limits
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Patient: BENITEZ TORRES, MARTIN
Age: 33 Sex: M
Client Patient ID: 9-16-941
Account#: VX82957
Physician: STEPHANY, JOSHUA
Client: DISTRICT 9 MEDICAL EXAMINER MISC
TOXICOLOGY

Specimen Collected :06/13/2016

Lab Order No: 661900681

Reg Date: 06/14/16

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

SPECIMEN TYPE

VITREOUS

ETHANOL	0.012	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

7/20/16

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

Reviewed by: *[Signature]* Date: *7/20/16*
FINAL REPORT - THIS COMPLETES REPORTING ON THIS CASE
TOXICOLOGY REPORT
BENITEZ TORRES, MARTIN