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~~Law Enforcement Sensitive~~

DEPARTMENT OF THE ARMY
U.S. ARMY CRIMINAL INVESTIGATION COMMAND
Camp Bucca CID Office
3rd MP Group (CID), Camp Bucca, Iraq, APO, APO AE 09375

04 Sep 2008

MEMORANDUM FOR: SEE DISTRIBUTION

SUBJECT: CID REPORT OF INVESTIGATION - FINAL/SSI - 0034-2008-CID579-53603 - 5H9A

DATES/TIMES/LOCATIONS OF OCCURRENCES:

1. 23 MAY 2008, 0350 - 23 MAY 2008, 0420; 31ST COMBAT SUPPORT HOSPITAL,
THEATER INTERNMENT FACILITY (TIF), CAMP BUCCA, APO, AE 09375

DATE/TIME REPORTED: 23 MAY 2008, 0515

INVESTIGATED BY:

SA **b(6), b(7)(C), b(7)(F)**
SA
SA

SUBJECT:

I. NONE, ; [DEATH BY NATURAL CAUSES] (NFI)

VICTIM:

1. ABD, FU'AD ALI (DECEASED); FRCIV; IRAQ; (DOB); (POB); MALE; OTHER;
INTERNMENT SERIAL NUMBER (ISN) US9IZ-326605CI, THEATER INTERNMENT
FACILITY (TIF), CAMP BUCCA, APO, ARMED FORCES AFRICA, CANADA, EUROPE &
MIDDLE EAST 09375; FC ; [DEATH BY NATURAL CAUSES]

INVESTIGATIVE SUMMARY:

"This is an Operation Iraqi Freedom Investigation"

1

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ACLU DDII CID ROI 32362

About 0515, 23 May 08, SA **b(6), b(7)(C)** was notified by SPC **b(6), b(7)(C)** **b(6), b(7)(C)** 31ST Combat Support Hospital (CSH), Theater Internment Facility (TIF), Camp Bucca, APO AE 09375, that Detainee ABD died at the TIF Hospital after being admitted on 22 May 08.

Investigation Determined between 0430 and 0500, 22 May 08, Detainee ABD was admitted to the TIF Hospital suffering from a severe headache. Hospital personnel conducted a CAT-Scan and determined Detainee ABD was bleeding in his brain and the condition was inoperable.

Detainee ABD died at approximately 0420, 22 May 08, and was pronounced dead by (CPT) Dr. **b(6), b(7)(C)** 31ST CSH, TIF, Camp Bucca, APO AE 09375. During a review of the body no signs of foul play or unexplained trauma were noted.

An autopsy by the Armed Forces Medical Examiner's Office determined the cause of death to be Spontaneous Intracranial Hemorrhage due to Atherosclerotic Cardiovascular Disease and the manner of death to be natural causes. The results of this investigation are consistent with that opinion.

STATUTES:

None.

EXHIBITS/SUBSTANTIATION:

EXHIBITS:

Attached:

1. Agents Investigation Report (AIR) of SA **b(6), b(7)(C)** 23 May 08.
2. Photographic Packet. (Victim) (USACRC, USACIDC and file copies only)
3. Compact Disc (CD) containing original images associated with Exhibit 2. (USACRC, USACIDC and file copies only)
4. AIR of SA **b(6), b(7)(C)** 21 Jun 08.

5. Medical Records of Detainee ABD.
6. AIR of SA **b(6), b(7)(C)** 31 May 08.
7. Autopsy Photographs of Detainee ABD. (USACRC, USACIDC and file copies only)
8. AIR of SA **b(6), b(7)(C)** 3 Sep 08.
9. Final Autopsy Report, 27 Aug 08.
10. Report of Toxicological Examination, 9 June 08.
11. Certificate of Death, 31 May 08.

Not Attached:

None

The original of Exhibits 1 through 4, 6 and 8 are attached to the USACRC copy of this report. The original of Exhibit 5 is retained in the files of the 115th Combat Support Hospital, Camp Bucca, APO AE 09375. The original of Exhibits 7 and 9 through 11 are retained in the files of the Armed Forces Institute of Pathology, Rockville, MD.

STATUS: This is a final report. Commanders Report of Disciplinary or Administrative Action (DA Form 4833) is not required.

CID reports of investigation may be subject to a Quality Assurance review by CID higher headquarters.

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Report Prepared By:

b(6), b(7)(C)

Special Agent

Report Approved By:

b(6), b(7)(C)

Special Agent in Charge

DISTRIBUTION:

Dir, USACRC, Ft Belvoir, VA

115TH COMBAT SUPPORT HOSPITAL (CSH), CAMP BUCCA, UMM QASR,
IRAQ, APO AE 09375

11th MP BN (CID)(OPERATIONS)

CDR, 3D MP GROUP (CID)(OPERATIONS)

COMMANDER, 400TH MP BN (Vigilance TIF), UMM QASR, IRAQ, APO AE
09375

68th MP DET (CID), ARIFJAN, KUWAIT

COMMANDER, FOB BUCCA, UMM QASR, IRAQ, APO AE 09375

COMMANDER, MNF-I, TASK FORCE 134

CDR, TF-Bucca, Camp Bucca, APO AE 09375

MNC-I- CJI CASUALTY OPS, ATTN: OIC

CAMP BUCCA CID OFFICE, 68th MP DET (CID), APO AE 09375

STAFF JUDGE ADVOCATE, CAMP BUCCA, UMM QASR, IRAQ, APO AE 09375

FILE

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ACLU DDII CID ROI 32365

AGENT'S INVESTIGATION REPORT

CID Regulation 195-1

ROI NUMBER

0034-08-CID579-53603

PAGE 1 OF 1 PAGES

BASIS FOR INVESTIGATION: About 0515, 23 May 08, SA **b(6), b(7)(C)** was notified by SPC **b(6), b(7)(C)** 31st Combat Support Hospital, Theater Internment Facility (TIF), Camp Bucca, APO AE 09376, that Detainee Fu'AD Ali ABD, ISN: 326605, TIF, Camp Bucca, APO AE 09375, died at the TIF Hospital after being admitted on 22 May 08.

About 0610, 23 May 08, SA **b(6), b(7)(C)** coordinated with CPT **b(6), b(7)(C)** 31st Combat Support Hospital, TIF, Camp Bucca, APO AE 09375, to determine the status of Detainee ABD and what treatment he received. CPT **b(6), b(7)(C)** relayed Detainee ABD was admitted between 0430-0500 on 22 May 08 for a pale complexion and what Detainee ABD claimed was the worst headache of his life. Once admitted, Detainee ABD had a computed axial tomography (CAT) scan administered which revealed bleeding in his brain. CPT **b(6), b(7)(C)** coordinated with the neurosurgeon in Balad, and determined Detainee ABD's condition was inoperable. Detainee ABD was given Morphine and eventually started breathing on his own. During the morning on 23 May 08, Detainee ABD stopped breathing and was pronounced dead at 0420 by CPT **b(6), b(7)(C)**

About 0620, 23 May 08, SA **b(6), b(7)(C)** exposed photographs of the body of Detainee ABD utilizing a Nikon Coolpix Digital Camera.

////////////////////////////////////LAST ENTRY////////////////////////////////////

TYPED AGENT'S NAME AND SEQUENCE NUMBER SA b(6), b(7)(C), b(7)(F)		ORGANIZATION 68th MP Detachment (CID), Camp Bucca, APO AE 09375	
SIGNATURE b(6), b(7)(C)	DATE 23 May 08	EXHIBIT	

ACLU DDII CID ROI 32366

CASE NUMBER: 0034-08-CID579-53603

<u>NUMBER</u>	<u>DESCRIPTION OF PHOTOGRAPH</u>
1	Photo depicting the body of Detainee ABD (feet to head)
2	Photo depicting the body of Detainee ABD (Right Side)
3	Photo depicting the body of Detainee ABD (head to feet)
4	Photo depicting the body of Detainee ABD (Left Side)
5	Photo depicting the body of Detainee ABD (Left Side)
6	Photo depicting the body of Detainee ABD (chest and face)
7	Photo depicting the body of Detainee ABD (Right side of head)
8	Photo depicting the body of Detainee ABD (Top of head)
9	Photo depicting the body of Detainee ABD (Left side of head)
10	Photo depicting the body of Detainee ABD (face)

~~ACLU DDII CID ROI 32367~~

AGENT'S INVESTIGATION REPORT

CID Regulation 195-1

ROI NUMBER

0034-08-CID579-53603

PAGE 1 OF 1 PAGES

About 0730, 21 Jun 08 SA **b(6), b(7)(C)** coordinated with PFC **b(6), b(7)(C)** Task Force 115 Medical, Camp Bucca, APO AE 09375, and obtained a copy of Detainee ABD's death packet. ///LAST ENTRY///

TYPED AGENT'S NAME AND ORGANIZATION NUMBER		ORGANIZATION	
SA	b(6), b(7)(C), b(7)(F)	68th MP Detachment (CID), Camp Bucca, APO AE 09375	
SIGNATURE	b(6), b(7)(C)	DATE	EXHIBIT
		21 Jun 08	4

ACLU RDI CID ROI 32380

Exhibit 5

Page(s): 000019 thru 000023 referred to:

COMMANDER
USAMEDCOM
ATTN: FOIA OFFICE, STOP 76
1216 STANLEY ROAD, 2D FLOOR
FORT SAM HOUSTON, TX 78234-5049

ACLU DDII CID ROI 32381

CERTIFICATE OF DEATH

For use of this form, see AR 190-8; the proponent agency is PMG.

INTERMENT SERIAL NUMBER

US9IZ-326605CI

FROM: TF 31ST COMBAT SUPPORT HOSPITAL

TO:

FOUO

LAW ENFORCEMENT SENSITIVE

NAME (Last, first, MI) ABD, FU'AD ALI GRADE SI SERVICE NUMBER ISN: 326605CI

NATIONALITY IRAQI POWER SERVED PLACE OF CAPTURE/INTERMENT AND DATE

PLACE OF BIRTH DAWR, SALAH ad Din, IRAQ DATE OF BIRTH 01JUL1955

NAME, ADDRESS, AND RELATIONSHIP OF NEXT OF KIN FIRST NAME OF FATHER

PLACE OF DEATH TF 31ST CAMP BUCCA, IRAQ DATE OF DEATH 23MAY08@0420 CAUSE OF DEATH INTRACEREBRAL HEMORRHAGE

PLACE OF BURIAL DATE OF BURIAL

IDENTIFICATION OF GRAVE

PERSONAL EFFECTS (To be filled in by Office of Deputy Chief of Staff for Personnel)

RETAINED BY DETAINING POWER

FORWARDED WITH DEATH CERTIFICATE TO (Specify)

FORWARDED SEPARATELY TO (Specify)

BRIEF DETAILS OF DEATH/BURIAL BY PERSON WHO CARED FOR THE DECEASED DURING ILLNESS OR DURING LAST MOMENTS (Doctor, Nurse, Minister of Religion, Fellow Internee). IF CREMATED, GIVE REASON. (If more space is required, continue on reverse side).

DO NOT WRITE IN THIS SPACE CERTIFIED A TRUE COPY

DATE

23MAY08

SIGNATURE OF MEDICAL OFFICER

(b)(6)

SIGNATURE OF COMMANDING OFFICER

(b)(6)

(b)(6)

TF 31ST CSH CAMP BUCCA

WITNESSES

(b)(6)

ADDRESS

(b)(6)

TF 31ST CSH APO 09375 ADDRESS

TF 31ST CSH APO 09375

HOSPITAL REPORT OF DEATH

FOR USE OF THIS FORM, SEE AR 40400, THE PROponent AGENCY, OFFICE OF THE SURGEON GENERAL.

NAME AND LOCATION OF HOSPITAL: **TF 31ST CSH CAM, CCA, IRAQ APO AE 09375**

Instructions - Medical Officer in attendance will Prepare, in one copy only, Items 1 through 10 and sign Item 11. Print or type entries. Send form, without delay to the Registrar or Administrative Officer of the Day, for necessary action and for preparation of required number of copies.

SECTION A - ATTENDING MEDICAL OFFICER'S REPORT

PERSONAL DATA

1. PATIENT DATA (Patient's ward plate will be used to imprint identifying data if available) US91Z-326605IC ABD, FU'AD ALI 20/500-00-1859 INPATIENT REGISTRATION # 27108 Patient's name (Last, first, middle initial) Grade, Social Security Account No., Register Number and Ward Number	2. TIME OF DEATH (Hour-day-month-year) 0420-23-05-2008	3. MEDICAL EXAMINER/ CORONER'S CASE <input type="checkbox"/> YES <input type="checkbox"/> NO
	4. RELIGION ISLAM-SUNNI	5. CHAPLAIN NOTIFIED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
6. NAME, ADDRESS AND RELATIONSHIP OF RELATIVE OR FRIEND PRESENT AT DEATH NONE		

CAUSE OF DEATH

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

7a. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH (This does not mean the mode of dying, e.g., heart failure, asthenia, etc. It means the disease, injury, or complication which caused death)	DUE TO (or as a consequence of) SPONTANEOUS INTRACEREBRAL HEMORRAGE	24 HOURS
7b. ANTECEDENT CAUSES (Morbid conditions, if any, giving rise to the above cause, stating the underlying condition last)	DUE TO (or as a consequence of) (1) MYOCARDIAL INFARCTION (2)	1 MONTH
8. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO THE DEATH, BUT NOT RELATED TO THE DISEASE OR CONDITION CAUSING IT	a.	
	b.	

9. DATE 23 MAY 2008	10. TYPED OR PRINTED NAME AND GRADE OF MEDICAL OFFICER IN ATTENDANCE (b)(6)
------------------------	--

SECTION B - ADMINISTRATIVE ACTION

TYPE OF ACTION	HOUR	DAY	MONTH	YEAR	INITIALS OF RESPONSIBLE OFFICER
12. TELEGRAM TO NEXT OF KIN OR OTHER AUTHORIZED PERSON					
13. POST ADJUTANT GENERAL NOTIFIED					
14. IMMEDIATE CO OF DECEASED NOTIFIED					
15. INFORMATION OFFICE NOTIFIED					
16. POST MORTUARY OFFICER NOTIFIED					
17. RED CROSS NOTIFIED					
18. OTHER (Specify)					
19.					

SECTION C - RECORD OF AUTOPSY

20. AUTOPSY PERFORMED (If yes, give date and place) <input type="checkbox"/> YES <input type="checkbox"/> NO	21. AUTOPSY ORDERED BY (Signature)	
22. PROVISIONAL PATHOLOGICAL FINDINGS		
23. DATE	24. TYPED NAME AND GRADE OF PHYSICIAN PERFORMING AUTOPSY	25. SIGNATURE OF PHYSICIAN PERFORMING AUTOPSY
26. DATE	27. TYPED NAME AND GRADE OF REGISTRAR	28. SIGNATURE OF REGISTRAR

ACLU DDII CID ROI 32383

LAW ENFORCEMENT SENSITIVE

000020 IT 5

0034 08 CID579-53603
0034 08 CID579

STATEMENT OF IDENTIFICATION

For use of this form, see AR 638-2; the proponent agency is ODA 0034 08 CID579

NAME OF DECEASED (Last, First, MI) ABD, FU'AD ALI GRADE SI SSN 000-32-6605 BRANCH OF SERVICE DETAINEE DATE OF INCIDENT 23-MAY-2008

ORGANIZATION AND BASE DETAINEE PLACE OF DEATH/INCIDENT T HOSP CMP BUCCA, IRAQ APO AE 09375

CONDITION OF REMAINS (Describe briefly in Narrative below)

Recognizable	Not Recognizable	Commingled	Mutilated
Burned	Decomposed	Semi-Skeletal	Skeletal

MEANS OF IDENTIFICATION (Check all appropriate boxes. Specify supporting data in Narrative below)

Fingerprint Comparison	Footprint Comparison	Dental Comparison	Anatomical Comparison
Skeletal Comparison	Personal Effects	Visual Recognition	Identification Tag(s)
Other (Explain in Narrative)			

ENCLOSURES

DD Form 565	DD Form 890	DD Form 891	DD Form 892
DD Form 893	DD Form 894	DD Form 897	ID Card
DD Form 369	FD 258	AF Form 137	SF 603
Dental X-Rays	SF 88	SF 93	DD Form 2064
SF 601	<input checked="" type="checkbox"/> Photo	<input checked="" type="checkbox"/> SF 600	<input checked="" type="checkbox"/> DA FORM 2669-R

NARRATIVE AND SUMMARY (Continue on reverse or use additional sheets, if required)

IDENTIFIED THROUGH IRIS SCAN AND PHOTOGRAPHY.

FOUO
ACLU DDII CID ROI 32384

MEDICAL RECORD CHRONOLOGICAL RECORD OF MEDICAL CARE 0034 08 010579

DATE SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)

2008
MAY 23
0513

LAW ENFORCEMENT SENSITIVE
Expiration Note
52 year old male admitted to the ICU for large spontaneous intracerebral bleed with transtentorial herniation that was deemed non-operable in consultation with neurosurgery. Made DNR after an ethics committee meeting. Pt had no respirations at 0420. No pulse. EKG asystole. Time of death 0420.

(b)(6)

UNIT OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	
UNIT'S IDENTIFICATION: (For typed or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of Birth; Rank/Grade)		REGISTER NO.	WARD NO.

US91Z-326605IC
ABD FU AD ALI
20/500-00-1859
INPATIENT REGISTRATION (b)(6)

CHRONOLOGICAL RECORD OF MEDICAL CARE
Medical Record
STANDARD FORM 600 (REV. 6-97)
Prescribed by GSA/ICMR
FIRM (41 CFR) 201-9.202-1
USAPA V2.00

FOUO

ACLU DDII CID ROI 32385

LAW ENFORCEMENT SENSITIVE

ABD, FU'AD ALI

SI 0034 DEDAFNEEC ID 57926603603

SOCIAL SECURITY NUMBER: Numéro de l'Assurance Sociale

ORGANIZATION Organisation

DETAINEE

NATION (e.g., United States) Pays

DATE OF BIRTH Date de naissance

SEX Sexe

IRAQ
FOUO

01 JUL 1955

MALE Masculin
 FEMALE Féminin

RACE Race

MARITAL STATUS État Civil

RELIGION Culte

CAUCASOID Caucasique

SINGLE Célibataire

DIVORCED Divorcé

PROTESTANT Protestant

OTHER (Specify) Autre (Spécifier)

NEGROID Négricide

MARRIED Marié

CATHOLIC Catholique

ISLAM - SUNNI

OTHER (Specify) Autre (Spécifier)

WIDOWED Veuf

SEPARATED Séparé

JEWISH Juif

NAME OF NEXT OF KIN Nom du plus proche parent

RELATIONSHIP TO DECEASED Parenté du décédé avec le susdit

STREET ADDRESS Domicile à (Rue)

CITY OF TOWN AND STATE (Include ZIP Code) Ville (Code postal compris)

MEDICAL STATEMENT Déclaration médicale

CAUSE OF DEATH (Enter only one cause per line) Cause de décès (N'indiquer qu'une cause par ligne)

INTERVAL BETWEEN ONSET AND DEATH Intervalle entre l'attaque et le décès

DISEASE OR CONDITION DIRECTLY LEADING TO DEATH Maladie ou condition directement responsable de la mort

SPONTANEOUS INTRACEREBRAL HEMORRHAGE

24 HOURS

ANTECEDENT CAUSES

MORBID CONDITION, IF ANY LEADING TO PRIMARY CAUSE Condition morbide, s'il y a lieu, menant à la cause primaire

MYOCARDIAL INFARCTION

1 MONTH

Symptoms précurseurs de la mort

UNDERLYING CAUSE, IF ANY, GIVING RISE TO PRIMARY CAUSE Raison fondamentale, s'il y a lieu, ayant suscité la cause primaire

OTHER SIGNIFICANT CONDITIONS Autres conditions significatives

MODE OF DEATH Condition de décès

AUTOPSY PERFORMED Autopsie effectuée YES Oui NO Non

CIRCUMSTANCES SURROUNDING DEATH DUE TO EXTERNAL CAUSES Circonstances de la mort suscitées par des causes extérieures

NATURAL Mort naturelle

MAJOR FINDINGS OF AUTOPSY Conclusions principales de l'autopsie

ACCIDENT Mort accidentelle

NAME OF PATHOLOGIST Nom du pathologiste

SUICIDE Suicide

SIGNATURE Signature

DATE Date

AVIATION ACCIDENT Accident à l'avion YES Oui NO Non

DATE OF DEATH (Hour, day, month, year) Date de décès (l'heure, le mois, l'année)
0420 23 MAY 2008

PLACE OF DEATH Lieu de décès
TF31 CSH CAMP BUCCA IRAQ APO AE 09375

I HAVE VIEWED THE REMAINS OF THE DECEASED AND DEATH OCCURRED AT THE TIME INDICATED AND FROM THE CAUSES AS STATED ABOVE. J'ai examiné les restes mortels du défunt et je conclus que le décès est survenu à l'heure indiquée et à la suite des causes énumérées ci-dessus.

NAME OF MEDICAL OFFICER Nom du médecin militaire ou du médecin sanitaire

TITLE OR DEGREE Titre du diplôme

GRADE Grade

INSTALLATION OR ADDRESS Installation ou adresse

DATE Date

SIGNATURE Signature
(b)(6)

1 State disease, injury or complication which caused death, but not mode of dying such as heart failure, etc.
2 State conditions contributing to the death, but not related to the disease or condition causing death.
1 Préciser la nature de la maladie, de la blessure ou de la complication qui a contribué à la mort, mais non la manière de mourir, telle qu'un arrêt du cœur, etc.
2 Préciser les conditions qui ont contribué à la mort, mais n'évitez aucun rapport avec la manière ou la condition qui a provoqué la mort.

DD FORM 2064 APR 1977

FOUO

ACLU DDII CID ROI 32386

Exhibit 5

Page(s): 000025 thru 000027 referred to:

COMMANDER
USAMEDCOM
ATTN: FOIA OFFICE, STOP 76
1216 STANLEY ROAD, 2D FLOOR
FORT SAM HOUSTON, TX 78234-5049

ACLU DDII CID ROI 32389

FOUO

RECEIPT OF BODY AT MORGUE

The body of ABD, FU'AD ALI was received

at CAMP BUCCA TIP HOSP AM. P.M. on 23 MAY 08

(b)(6)

CERTIFICATE OF REMOVAL

The body of ABW, FU'AD ALI US917-376605 CI was removed

by _____

at _____ AM. P.M. on _____

(Signature of person releasing body to undertaker) (Signature of representative of undertaker)

The following statement shall be completed only when specifically ordered.

PHYSICIAN'S STATEMENT REGARDING CONDITION OF REMAINS AS RELEASED (Describe post-mortem, surface discolorations, abrasions, lacerations, punctures, whether remains were embalmed, etc.)

THIS BODY CONTAINS A MEDICAL IMPLANT WHICH MAY INCLUDE A BATTERY OR POWER CELL YES NO

(Signature of physician)
PATIENT'S IDENTIFICATION (For typed or written entries show Name—last, first, middle; grade; date; hospital or medical facility) REGISTER NO. (VA FORM 100)

DISPOSITION OF BODY

Medical Record

FOUO

STANDARD FORM 523-A (REV. 12-9-11) Prescribed by GSA/ICMP, FORM 101 (310) 2011-1 202-1

ACLU DDII CID ROI 32390

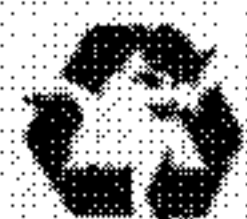
LAW ENFORCEMENT SENSITIVE

0034 08 CID579-53603
0034 08 CID579

MESSAGE

RECEIVED BY	DATE	TIME
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NSN 7540-00-634-4018
50363-111
UNICOR FPI-SST



OPTIONAL FORM 363 (Rev. 7-94)
General Services Administration

MEMORANDUM
OF CALL

Previous editions usable

TO:

YOU WERE CALLED BY— YOU WERE VISITED BY—

OF (Organization)

PLEASE PHONE (Enter area code, if necessary) DSN

WILL CALL AGAIN IS WAITING TO SEE YOU

RETURNED YOUR CALL WISHES AN APPOINTMENT

MESSAGE

*Detainee ~~M...~~
Death Packett Whom
Expired in Flight to
BALAD.*

RECEIVED BY	DATE	TIME
-------------	------	------

NSN 7540-00-634-4018
50363-111
UNICOR FPI-SST



OPTIONAL FORM 363 (Rev. 7-94)
General Services Administration

FOUO

LAW ENFORCEMENT SENSITIVE

FOUO

LAW ENFORCEMENT SENSITIVE

ACLU DDII CID ROI 32391

000026BITS

FOUO

REQUEST FOR PRIVATE MEDICAL INFORMATION For use of this form, see AR 40-66; the proponent agency is the OTSG		1. Date. <i>21 JUN 08</i>
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2. Patient's Name and SSN. Detainee US9IZ-326605-CI	3. Medical Treatment Facility (Name and Location) TIF Hospital, TIF, Camp Bucca, Iraq
--	--

4. Reason for Request.
Involvement in a Criminal Investigation regarding *DETAINEE DEATH.*

5. Private Medical Information Sought (Specify dates of hospitalization or clinic visits and diagnosis, if known)
Copy of Medical Treatment Documents of Detainee US9IZ-326605-CI, relating to treatment received. *DEATH PACKET*

6. Requestor's Name, Title, Organization and SSN.
(b)(6)

FOR USE OF MEDICAL TREATMENT FACILITY ONLY

7. Check applicable box.

Approved Disapproved (State reason for disapproval)

8. Summary of Private Medical Information Released.
COPY OF DEATH PACKET (MAY 08)

9. Signature of Approving Official. (b)(6) <i>TAD NCO</i>	10. Date. <i>21 JUN 08</i>
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FOUO

LAW ENFORCEMENT

ACLU DDII CID ROI 32392

EXHIBIT 5
000027

Exhibit 9

Page(s): 000113 thru 000123 referred to:

COMMANDER
USAMEDCOM
ATTN: FOIA OFFICE, STOP 76
1216 STANLEY ROAD, 2D FLOOR
FORT SAM HOUSTON, TX 78234-5049

ACLU DDII CID ROI 32479

LAW ENFORCEMENT SENSITIVE



ARMED FORCES INSTITUTE OF PATHOLOGY
Office of the Armed Forces Medical Examiner
1413 Research Blvd., Bldg. 102
Rockville, MD 20850



(b)(6)

AUTOPSY EXAMINATION REPORT

Name: BTB ABD, Fu'ad Ali
ISN: 32-6605
Date of Birth: 1 JUL 1955
Date of Death: 22 MAY 08
Date/Time of Autopsy: 31 MAY 08 @1230 hrs
Date of Report: 27 AUG 2008

Autopsy No.: (b)(6)
AFIP No.: (b)(6)
Rank: Civilian Iraqi Detainee
Place of Death: Iraq
Place of Autopsy: Port Mortuary, Dover AFB, DE

Circumstances of Death: This 52-year-old Iraqi detainee who suffered a cerebral vascular accident one month after being diagnosed with a myocardial infarction. He was transferred to the ICU and was deemed non-operable by the neurosurgery team. He was placed on do not resuscitate (DNR) orders after an ethic committee meeting decision. He was pronounced dead shortly thereafter.

Authorization for Autopsy: Armed Forces Medical Examiner, per U.S. Code 10, Section 1471

Identification: Identified by transportation documents. Postmortem fingerprint and dental x-rays were obtained prior to the autopsy.

CAUSE OF DEATH: SPONTANEOUS INTRACRANIAL HEMORRHAGE DUE TO ATHROSCLEROTIC CARDIOVASCULAR DISEASE

MANNER OF DEATH: NATURAL

FOR OFFICIAL USE ONLY and may be exempt from automatic disclosure under FOIA. DoD 5400.7R, "DoD Freedom of Information Act Program", DoD Directive 5230.9, "Clearance of DoD Information for Public Release", and DoD Instruction 5230.29, "Security and Policy Review of DoD Information for Public Release" apply.

FOUO

ACLU-DDH-CID-ROI-32480

FOUO

AUTOPSY REPORT (b)(6)
BTB ADB, Fu'ad Ali

LAW ENFORCEMENT SENSITIVE

EXTERNAL EXAMINATION

The body is that of a well-developed nude male. The body weighs 142 pounds, is 67 inches in length and appears compatible with the reported age of 52 years. The body is cold. Rigor is present to an equal degree in all extremities. Lividity is present and fixed on the posterior surface of the body, except in areas exposed to pressure.

The head is normocephalic, and the scalp hair is black/gray. Facial hair consists of a mustache and a shaven beard. The irides are brown. The corneae are cloudy. The conjunctivae and sclerae are unremarkable. The external auditory canals, external nares and oral cavity are free of foreign material and abnormal secretions. The nasal skeleton and maxilla are palpably intact. The lips are without evident injury. The teeth are natural and in poor condition. Examination of the neck reveals no evidence of injury.

The chest is unremarkable. No evidence of injury of the ribs or the sternum is evident externally. The abdomen is unremarkable. There is a 2 1/2 x 2 1/4 inch well healed surgical scar on the anterior left upper thigh. The external genitalia are those of a circumcised adult. The posterior torso and anus are unremarkable.

There is a 2 x 1 inch contusion of the dorsal surface of the right hand. There is a 1 x 1/2 inch contusion of the right groin. There are two contusions of the anterior left upper thigh measuring up 1/4 inch in maximum dimension. There is a 2 x 1/4 inch contusion with an underlying 7 x 4 centimeter area of hemorrhage. There is a 3 x 1/4 inch contusion on the anterior medial right ankle.¹ The extremities show no evidence of fractures or lacerations. The fingernails are intact. Tattoos are noted on the left forearm and right arm.

CLOTHING AND PERSONAL EFFECTS

None identified.

MEDICAL INTERVENTION

- Six needle puncture marks on the right ante-cubital fossa
- Two needle puncture marks on the left ante-cubital fossa
- One needle puncture mark surrounded by a 1 x 1/2 inch contusion on the left femoral artery/vein region
- Two band-aids on the left palm and left anterior upper thigh

RADIOGRAPHS

A complete set of postmortem radiographs is obtained and demonstrate intra-parenchymal brain hemorrhage and multiple remote ballistic fragments in the left upper thigh which are listed under "Internal Examination."

¹ Contusions are likely a result of emergency medical intervention

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EVIDENCE OF INJURY

None.

INTERNAL EXAMINATION

BODY CAVITIES:

The ribs, sternum, and vertebral bodies are visibly and palpably intact. No adhesions or abnormal collections of fluid are present in any of the body cavities. All body organs are present in normal anatomical position. The subcutaneous fat layer of the abdominal wall is 1 inch thick.

HEAD (CENTRAL NERVOUS SYSTEM) AND NECK:

The brain weighs 1370 grams and appears edematous. The galeal and subgaleal soft tissues of the scalp are free of injury. There are no skull fractures. The dura mater and falx cerebri are intact. There is no epidural or subdural hemorrhage present.

At the base of the anterior right temporal lobe is a 7 x 4.5 centimeter defect revealing an 8 x 5 x 3.5 centimeter intracranial clot with extension of hemorrhage into the ventricular system (right lateral ventricle, third, and fourth ventricles). Subarachnoid hemorrhage surrounds this temporal lobe defect extending to the right occipital lobe and the base of the bilateral frontal lobes and cerebellar hemispheres. The arteries of the circle of Willis are in the usual anatomic configuration and are patent. No aneurysms are identified. The cerebellum is serially sectioned along the sagittal plane, revealing an unremarkable cut surface. The brainstem is bisected sagittally to reveal duret hemorrhages. There is a 2.5 x 0.8 x 0.4 centimeter right temporal lobe laceration along the edge of the right tentorium cerebelli. Coronal sectioning of the cerebral hemispheres reveal a separate focus of intercranial hemorrhage at the gray-white junction in the right parietal lobe measuring 1.0 x 0.8 x 0.5 centimeters. The atlanto-occipital joint is stable.

The anterior strap muscles of the neck are homogenous and red-brown, without hemorrhage by layer-wise dissection. The thyroid cartilage and hyoid bone are intact. The larynx is lined by intact white mucosa. The tongue is free of bite marks, hemorrhage, or other injuries. Incision and dissection of the posterior neck demonstrates no deep paracervical muscular injury and no cervical spine fractures.

CARDIOVASCULAR SYSTEM:

The heart weighs 380 grams and is contained in an intact pericardial sac. The epicardial surface is smooth, with minimal fat investment. The coronary arteries are present in a normal distribution, with a right-dominant pattern. Cross sections of the vessels show severe (greater than 75%) atherosclerotic luminal stenosis of the left anterior descending artery and right coronary artery measuring 5.0 and 6.0 centimeters from the left and right coronary orifice, respectively.

Much of the anterior left ventricular wall is asymmetrically thin (0.5 centimeter on average) with tan/gray discoloration compared to the posterior left ventricular wall (1.0 centimeter on average) with normal appearing homogenous, red-brown myocardial tissue. The valve leaflets are thin and mobile. The walls of the left ventricle, interventricular septum, and right ventricle are 0.5, 1.2, and 0.2 centimeters thick, respectively. The endocardial surface is dull and slightly roughened. The aorta display atherosclerotic changes and gives rise to three intact and patent arch vessels. The renal and mesenteric vessels are unremarkable.

FOUOAUTOPSY REPORT (b)(6)
BTB ADB, Fu'ad Ali

Page 4 of 7

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The upper airway is clear of debris and foreign material: the mucosal surfaces are smooth, yellow-tan and unremarkable. The pleural surfaces are smooth, glistening and unremarkable bilaterally.

The pulmonary parenchyma is diffusely congested and edematous exudes blood and frothy fluid with no focal lesions noted. The pulmonary arteries are normally developed, patent and without thrombus or embolus. The right lung weighs 1100 grams and the left lung weighs 850 grams.

HEPATOBIILIARY SYSTEM:

The liver weighs 1510 grams has an intact smooth capsule covering moderately congested tan-brown parenchyma with no focal lesions noted. The gallbladder contains 40 milliliters of green-brown, mucoid bile; the mucosa is velvety and unremarkable. The extrahepatic biliary tree is patent, without evidence of calculi.

GASTROINTESTINAL SYSTEM:

The esophagus is lined by gray-white, smooth mucosa. The gastric mucosa is arranged in the usual rugal folds and the lumen contains 350 milliliters of tan fluid. The small and large bowels are unremarkable. The pancreas has a normal pink-tan lobulated appearance and the ducts are clear. The appendix is present.

GENITOURINARY SYSTEM:

The right kidney weighs 100 grams; the left weighs 90 grams. The renal capsules are smooth and thin, semi-transparent and strip with ease from the underlying smooth, red-brown cortical surface. The cortices are sharply delineated from the medullary pyramids, which are red-purple to tan and unremarkable. The calyces, pelves and ureters are unremarkable.

The tan bladder mucosa overlies an intact bladder wall. The bladder contains no urine. The testes, prostate gland and seminal vesicles are unremarkable.

LYMPHORETICULAR SYSTEM:

The spleen weighs 100 grams and has a smooth, intact capsule covering red-purple, moderately firm parenchyma; the lymphoid follicles are unremarkable. Lymph nodes in the hilar, periaortic and iliac regions are not enlarged.

ENDOCRINE SYSTEM:

The pituitary gland is left *in situ* and is unremarkable. The thyroid gland is symmetric and red-brown, without cystic or nodular change. The right and left adrenal glands are symmetric, with bright yellow cortices and red-brown medullae. No masses or areas of hemorrhage are identified.

MUSCULOSKELETAL SYSTEM:

No non-traumatic abnormalities of muscle or bone are identified. Multiple remote metallic fragments in the left thigh are identified.

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AUTOPSY REPORT (b)(6)
BTB ADB, Fu'ad Ali

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MICROSCOPIC EXAMINATION

Selected portions of organs are retained in formalin with preparation of histology slides listed below:

Adrenal glands (slide 1): No pathological diagnosis

Prostate (slide 2): No pathological diagnosis

Liver, spleen, left kidney (slide 3): No pathological diagnosis

Right kidney and left lung (slide 4): No pathological diagnosis

Right lung (slide 5): Two out the three lobes of the right lung display sheets of acute inflammatory cells admixed with macrophages and red blood cells consistent with acute pneumonia.

Left anterior descending artery (slides 6) and right coronary artery (slide 7): Sections of the coronary arteries display intimal hyperplasia and atherosclerotic plaques composed of fibrin and cholesterol plaques.

Left ventricle of the heart (slide 8): Section of the heart display vast area of fibrotic stroma with congested blood vessels consistent with a remote myocardial infarction.

ADDITIONAL PROCEDURES

1. Documentary photographs are taken by OAFME.
2. Personal effects are released to the appropriate mortuary operations representatives.
3. Specimens retained for toxicology testing and/or DNA identification are: vitreous fluid, blood, bile, gastric contents, spleen, liver, lung, kidney, adipose tissue and skeletal muscle.
4. The dissected organs are forwarded with body.

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EXHIBIT 9

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AUTOPSY REPORT (b)(6)
BTB ADB, Fu'ad Ali

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FINAL AUTOPSY DIAGNOSIS

- I. Spontaneous Intracranial Hemorrhage:**
 - i. 7 x 4.5 centimeter defect at the base of the anterior right temporal lobe reveals an 8 x 5 x 3.5 centimeter intracranial clot with extension of hemorrhage into the ventricular system (right lateral ventricle, third, and fourth ventricles)
 - ii. Subarachnoid hemorrhage of the right temporal, right occipital, bilateral frontal lobes and both cerebellar hemispheres.
 - iii. Duret hemorrhages of the brainstem
 - iv. 2.5 x 0.8 x 0.4 centimeter right temporal lobe laceration along the edge of the right tentorium cerebelli.
 - v. Separated 1.0 x 0.8 x 0.5 centimeter intercranial hemorrhage at the right parietal lobe gray-white junction

- II. Atherosclerotic Cardiovascular Disease**
 - i. Severe (greater than 75% occlusion) atherosclerotic luminal stenosis of the left anterior descending and right coronary arteries.
 - ii. Extensive old myocardial infarction, anterior wall of left ventricle.

- III. Acute Pneumonia**

- IV. Pre-existing Condition:** Remote ballistic injury to the left upper thigh

- V. Evidence of Medical Therapy:** As described above

- VI. Post-Mortem Changes:** As described above

- VII. Identifying Body Marks:** As described above

- VIII. Toxicology (AFIP)**
 - i. CARBON MONOXIDE: Carboxyhemoglobin saturation in the blood
 - ii. VOLATILES: No ethanol was detected in the blood and vitreous fluid
 - iii. CYANIDE: No cyanide detected in the blood
 - iv. SCREENED MEDICATIONS: Lidocaine was detected in the blood
 - v. SCREENED DRUGS OF ABUSE: No drugs detected in the blood

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EXHIBIT 9

AUTOPSY REPORT (b)(6)
BTB ADB, Fu'ad Ali

Page 7 of 7

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OPINION

This 52-year-old male detainee, Fu'ad Ali Abd, died from a spontaneous intracranial hemorrhage (stroke / cerebral vascular accident) complicated by an old myocardial infarction (heart attack). Toxicology screen revealed presence of Lidocaine, a resuscitative medication. No significant sign of trauma on the body was noted at autopsy. The manner of death is natural.

(b)(6)

(b)(6) Medical Examiner

(b)(6)

(b)(6) Medical Examiner



LAW ENFORCEMENT SENSITIVE
DEPARTMENT OF DEFENSE
ARMED FORCES INSTITUTE OF PATHOLOGY
WASHINGTON, DC 20306-6000

REPLY TO
ATTENTION OF

AFIP-CME-T

TO:

OFFICE OF THE ARMED FORCES MEDICAL
EXAMINER
ARMED FORCES INSTITUTE OF PATHOLOGY
WASHINGTON, DC 20306-6000

PATIENT IDENTIFICATION

AFIP Accessions Number (b)(6) Sequence (b)(6)

Name
BTB ABD, FU AD ALI

SSAN: Autopsy: ME (b)(6)

Toxicology Accession #: (b)(6)

Date Report Generated: June 9, 2008

CONSULTATION REPORT ON CONTRIBUTOR MATERIAL

AFIP DIAGNOSIS REPORT OF TOXICOLOGICAL EXAMINATION

Condition of Specimens: GOOD

Date of Incident: 5/22/2008

Date Received: 6/3/2008

CARBON MONOXIDE: The carboxyhemoglobin saturation in the blood was less than 1% as determined by spectrophotometry with a limit of quantitation of 1%. Carboxyhemoglobin saturations of 0-3% are expected for non-smokers and 3-10% for smokers. Saturations above 10% are considered elevated and are confirmed by gas chromatography.

VOLATILES: The **BLOOD AND VITREOUS FLUID** were examined for the presence of ethanol at a cutoff of 20 mg/dL. No ethanol was detected.

CYANIDE: There was no cyanide detected in the blood. The limit of quantitation for cyanide is 0.25 mg/L. Normal blood cyanide concentrations are less than 0.15 mg/L. Lethal concentrations of cyanide are greater than 3 mg/L.

DRUGS: The **BLOOD** was screened for amphetamine, antidepressants, antihistamines, barbiturates, benzodiazepines, cannabinoids, chloroquine, mefloquine, cocaine, dextromethorphan, lidocaine, narcotic analgesics, opiates, phencyclidine, phenothiazines, sympathomimetic amines and verapamil by gas chromatography, color test or immunoassay. The following drugs were detected:

Positive Lidocaine: Lidocaine was detected in the blood by gas chromatography and confirmed by gas chromatography/mass spectrometry.

(b)(6)

Office of the Armed Forces Medical Examiner

*This document contains information EXEMPT FROM MANDATORY DISCLOSURE under the
FREEDOM OF INFORMATION ACT Exemption No. 6c,d Applies*

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EXHIBIT 10
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DIVISION OF FORENSIC TOXICOLOGY - TOXICOLOGICAL COURSE REPORT

TO: ARMED FORCES INSTITUTE OF PATHOLOGY ATTN: DIVISION OF FORENSIC TOXICOLOGY BUILDING 54 6825 16TH STREET, N.W. WASHINGTON, DC 20306-6000	FORWARD FINAL RBPO OAFM E	Dover AFB Port Mortuary (b)(6) Incident: Of- Remains/Case #: D08-0816 Recovery/TC #: Process Date: 31 May 08 ME # (b)(6) 3 JUN 08
--	---	--

NAME OF PATIENT (Last, First, MI)	SOCIAL SECURITY #	AGE	SEX	RACE
OTB ABD, FU'AD ALI	3 SM US912-326605C1			

DATE OF INCIDENT/ACCIDENT	TIME AND DATE OF DEATH	AUTOPSY
22 MAY 08	22 MAY 08	ME (b)(6)

MEDICATION HISTORY (Prescribed or administered to patient)

1. VITREOUS	5. Lung	9. AILE
2. AIRWAY (Perls)	6. Adipose	10. Spleen
3. MURKIN (Heart)	7. Urine	11. Gastric
4. Blood	8. Liver	12. Kidney

INCIDENT/ACCIDENT DETAILS (Include pertinent information regarding crash site, weather, etc.)

DFT#

(b)(6)

PRINTED NAME OF REQUESTER/TITLE (b)(6)	SIGNATURE (b)(6)	DATE 31 MAY 08
---	---------------------	-------------------

CHAIN OF CUSTODY (CC)

RELEASED BY	RECEIVED BY	DATE	REMARKS
(b)(6)	(b)(6)		
(b)(6)	(b)(6)	JUN 03 2008	Received From Courier
(b)(6)	(b)(6)	JUN 03 2008	TOXICOLOGY TESTING SECURED STORAGE
(b)(6)	(b)(6)		
(b)(6)	(b)(6)		
(b)(6)	(b)(6)		
(b)(6)	(b)(6)		

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CERTIFICATE OF DEATH (OVERSEAS)

Acte de décès (D'Outre-Mer)

NAME OF DECEASED (Last, First, Middle) Nom du décédé (Nom et prénoms) BTB Abd, Fu ad, Ali		GRADE Grade	BRANCH OF SERVICE Arme Civilian	SOCIAL SECURITY NUMBER Numéro de l'Assurance Social ISN-32-6605
ORGANIZATION Organisation		NATION (e.g., United States) Pays	DATE OF BIRTH Date de naissance 1 July 1955	SEX Sexe <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE
RACE Raca		MARITAL STATUS État Civil		RELIGION Culte
<input checked="" type="checkbox"/>	CAUCASOID Caucasique	<input type="checkbox"/>	SINGLE Célibataire	<input type="checkbox"/>
<input type="checkbox"/>	NEGROID Negroïde	<input type="checkbox"/>	MARRIED Marié	<input type="checkbox"/>
<input type="checkbox"/>	OTHER (Specify) Autre (Spécifier)	<input type="checkbox"/>	WIDOWED Veuf	<input checked="" type="checkbox"/>
NAME OF NEXT OF KIN Nom du plus proche parent		RELATIONSHIP TO DECEASED Parenté du décédé avec le sus		
STREET ADDRESS Domicile à (Rue)		CITY OR TOWN OR STATE (include ZIP Code) Ville (Code postal compris)		
MEDICAL STATEMENT Déclaration médicale				
CAUSE OF DEATH (Enter only one cause per line) Cause du décès (N'indiquer qu'une cause par ligne)				INTERVAL BETWEEN ONSET AND DEATH Intervalle entre l'attaque et le décès
DISEASE OR CONDITION DIRECTLY LEADING TO DEATH Maladie ou condition directement responsable de la mort.		Spontaneous intracranial hemorrhage due to atherosclerotic cardiovascular disease.		
ANTECEDENT CAUSES Symptômes précurseurs de la mort.	MORBID CONDITION, IF ANY, LEADING TO PRIMARY CAUSE Condition morbide, s'il y a lieu, menant à la cause primaire			
	UNDERLYING CAUSE, IF ANY, GIVING RISE TO PRIMARY CAUSE Condition morbide, s'il y a lieu, menant à la cause primaire			
OTHER SIGNIFICANT CONDITIONS Autres conditions significatives				
MODE OF DEATH Condition de décès	AUTOPSY PERFORMED Autopsie effectuée	MAJOR FINDINGS OF AUTOPSY Conclusions principales de l'autopsie		CIRCUMSTANCES SURROUNDING DEATH DUE TO EXTERNAL CAUSES Circonstances de la mort suscitées par des causes extérieures
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>			
	NAME OF PATHOLOGIST Nom du pathologiste	DATE Date	AVIATION ACCIDENT Accident à Avion	
	(b)(6)	31 May 2008	<input type="checkbox"/> YES Oui <input checked="" type="checkbox"/> NO Non	
DATE OF DEATH (day, month, year) Date de décès (le jour, le mois, l'année)	PLACE OF DEATH Lieu de décès			
22 May 2008	Iraq			
I HAVE VIEWED THE REMAINS OF THE DECEASED AND DEATH OCCURRED AT THE TIME INDICATED AND FROM THE CAUSES AS STATED ABOVE. J'ai examiné les restes mortels du défunt; je conclus que le décès est survenu à l'heure indiquée et à la suite des causes énumérées ci-dessus.				
NAME OF MEDICAL OFFICER Nom du médecin militaire ou du médecin sanitaire		TITLE OR DEGREE Titre ou diplôme		
(b)(6)		(b)(6)		
GRADE Grade	INSTALLATION OR ADDRESS Installation ou adresse			
(b)(6)	Dover AFB, Dover DE			
DATE Date	(b)(6)			
8/27/2008				

1 State disease, injury or complication which caused death.
 2 State conditions contributing to the death, but not related to the disease or condition causing death.
 3 Préciser la nature de la maladie, de la blessure ou de la complication qui a contribué à la mort, mais non l'heure ou le lieu de la mort, le type de lésion, etc.
 4 Préciser la condition qui a contribué à la mort, mais n'ayant aucun rapport avec la maladie ou la blessure qui a causé la mort.

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0034-08-CID579-97607

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(REMOVE, REVERSE AND RE-INSERT CARBONS BEFORE COMPLETING THIS SIDE)

DISPOSITION OF REMAINS			
NAME OF MORTICIAN PREPARING REMAINS	GRADE	LICENSE NUMBER AND STATE	OTHER
INSTALLATION OR ADDRESS 436 SVC/SVD 116 26th Street, Dover AFB DE 19902	DATE	SIGNATURE	
NAME OF CEMETERY OR CREMATORY	LOCATION OF CEMETERY OR CREMATORY		
TYPE OF DISPOSITION		DATE OF DISPOSITION	
REGISTRATION OF VITAL STATISTICS			
REGISTRY (Town and Country)	DATE REGISTERED	FILE NUMBER	
		STATE	OTHER
NAME OF FUNERAL DIRECTOR	ADDRESS		
SIGNATURE OF AUTHORIZED INDIVIDUAL			

DD FORM 2064, APR 1977 (BACK)

USAPA V1.00

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EX00123T

AGENT'S INVESTIGATION REPORT

CID Regulation 195-1

ROI NUMBER

0123-08-CID112

PAGE 1 OF 1 PAGE

DETAILS

BASIS FOR INVESTIGATION: On 30 May 08, this office received a Request for Assistance (RFA) from Special Agent **b(6), b(7)(C)** Office of Armed Forces Medical Examiner (OFAME), Armed Forces Institute of Pathology (AFIP), 1413 Research Blvd., Bldg 102, Rockville, MD 20850 (RMD). The request required this office to attend the autopsy of Fu'Ad Ali ABD, Internment Serial Number, US91Z-326605CI, Theatre Internment Facility, Camp Bucca, Iraq, who was admitted to the hospital between 0430 and 0500, on 22 May 08 suffering from a severe headache. The hospital personnel performed a CAT-Scan, which revealed bleeding in his brain. A neurosurgeon was consulted and determined the condition was inoperable. Detainee ABD died at approximately 0420 and was pronounced dead by Dr. (CPT) **b(6), b(7)(C)** 31st Combat Support Hospital, TIF, Camp Bucca, Iraq. No signs of foul play or unexplained trauma were noted.

About 0945, 31 May 08, the autopsy of Fu'Ad Ali ABD, was attended by SA **b(6), b(7)(C)** Fort Belvoir CID Office, Fort Belvoir, VA 22060, which was performed by Dr. (CPT) **b(6), b(7)(C)** USAF, OAFME, AFIP, RMD. Dr. **b(6), b(7)(C)** deemed the manner of death as natural with the cause of death resulting from Coronary Artery Disease involving the Left Anterior Descending Aorta and the Right Coronary Artery, a recent Myocardial Infarction in the Left Ventricle as well as Cerebral Vascular Accident involving the Left-Brain. The Brain was sent for further examination but will not change the cause and manner of death. Photographers from AFIP exposed all digital photographs of the autopsy and prepared a compact disc (CD) containing all images exposed. A Fingerprint Analysis report was completed by SA **b(6), b(7)(C)** FBI Fingerprint Physical Scientist, OFAME, AFIP. (See FBI fingerprint report and CD for details.)

Agent's Comment: The official results of the autopsy will be documented in the Final Autopsy Report, which will be provided upon completion. ///LAST ENTRY///

TYPED AGENT S. b(6), b(7)(C), b(7)(F)	ORGANIZATION 75 th Military Police Detachment (CID) Fort Belvoir, VA 22060
SIGN b(6), b(7)(C)	DATE 31 May 08
	EXHIBIT /

ACLU DDII CID ROI 32393

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AGENT'S INVESTIGATION REPORT

CID Regulation 195-1

ROI NUMBER

0034-08-CID579-53603

PAGE 1 OF 1 PAGES

About 2040, 3 Sep 08, SA **b(6), b(7)(C)** received the Final Autopsy Report, Report of Toxicological Examination and Death Certificate pertaining to Detainee ABD. A review of the documents indicated the cause of death was Spontaneous Intracranial Hemorrhage due to Atherosclerotic Cardiovascular Disease and the manner of death as natural.

//////////////////////////////////////LAST ENTRY//////////////////////////////////////

TYPED AGENT'S NAME AND SEQUENCE NUMBER

SA **b(6), b(7)(C), b(7)(F)**

ORGANIZATION

68th MP Detachment (CID), Camp Bucca, APO AE 09375

SIGNATURE

b(6), b(7)(C)

DATE

4 Sep 08

EXHIBIT

ACLU DDII CID ROI 32478

CII