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DEPARTMENT OF THE ARMY

U.S. ARMY CRIMINAL INVESTIGATION COMMAND
Camp Cropper CID Office
24th/348th MP DET (CID), Camp Cropper, Iraq APO AE 09342

17 Mar 2009

MEMORANDUM FOR: SEE DISTRIBUTION

SUBJECT: CID REPORT OF INVESTIGATION - 1ST CORRECTED FINAL/SSI -

0036-2008-CID789-53216 - 5H9A

DATES/TIMES/LOCATIONS OF OCCURRENCES:

1. 14 DEC 2008, 0400 - 14 DEC 2008, 0602; TRAUMA ROOM, 115TH COMBAT

SUPPORT HOSPITAL, CAMP CROPPER, IRAQ, APO, AE 09342

DATE/TIME REPORTED: 14 DEC 2008, 0703

INVESTIGATED BY:

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

SUBJECT:

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

VICTIM:

1. HASHIM, LO'Y LAFTA (DECEASED); FRCIV; IRAQ; (DOB); (POB); MALE; WHITE; INTERNMENT SERIAL NUMBER US (6), b(7)(C)CI, THEATER INTERNMENT FACILITY, CAMP CROPPER, IRAQ, APO, ARMED FORCES AFRICA, CANADA. EUROPE & MIDDLE EAST 09342; XZ; [DEATH BY NATURAL CAUSES]

INVESTIGATIVE SUMMARY:

THIS IS AN OPERATION IRAQI FREEDOM INVESTIGATION

The Patient Administration Department, 115th CSH, reported the death of Detainee HASHIM.

1

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

ACLU DDI CID ROI 30031

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Investigation determined Mr. HASHIM died of a cardiac arrhythmia due to the focal dysplasia of the atrioventricular nodal artery. An autopsy conducted by the Office of the Armed forces Medical Examiner, (OAFME) revealed Mr. HASHIM manner of death was of natural causes.

STATUTES: N/A

EXHIBITS:

Attached:

- 1. Agent's Investigation Report (AIR) of SA b(6), b(7)(C) 14 Dec 08.
- 2. AIR of SA b(6), b(7)(C) 14 Dec 08.
- 3. Rough Sketch Depicting Human Remains pertaining to Mr. HASHIM, 14 Dec 08.
- 4. Photographic Packet remains examination pertaining to Mr. HASHIM, 14 Dec 08. (USACRC and file copies only)
- 5. AIR of SAb(6), b(7)(C) 14 Dec 08.
- 6. Medical Records pertaining to Mr. HASHIM, 20 Jul 06 1 Sep 08. (USACRC and file copies only)
- 7. AIR of SA b(6), b(7)(C), 14 Dec 08.
- 8. Rough Sketch depicting Death Scene, 14 Dec 08.
- 9. Death Scene photographic packet, 14 Dec 08. (USACRC and file copies only)
- 10. AIR of SA b(6), b(7)(C) 22 Dec 08.
- 11. Canvass Interview Worksheet, 14 Dec 08.
- 12. Sworn Statement of SGT b(6), b(7)(C) 15 Dec 08.

2

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- 13. CD containing Surveillance video.
- 14. Chronological Records of Medical Care pertaining to Mr. HASHIM, 14 Dec 08. (USACRC and file copies only)
- 15. Statement of Mr. (b(6), b(7)(C) 17 Dec 08.
- 16. Arabic Statement of Mr. (USACRC and file copies only)
- 17. Statement of Mr. b(6), b(7)(C)₁₇ Dec 08.
- 18. Arabic Statement of Mr. b(6), b(7)(C) 17 Dec 08. (USACRC and file copies only)
- 19. Statement of SGT b(6), b(7)(C) 19 Dec 08.
- 20. AIR of SA b(6), b(7)(C) 22 Dec 08.
- 21. CD containing Autopsy Photographs, 22 Dec 08. (USACRC and file copies only)
- 22. AIR of SA b(6), b(7)(C) 29 Dec 08.
- 23. Statement of b(6), b(7)(C) 23 Dec 08.
- 24. AIR of SA b(6), b(7)(C)
- 25. Certificate of Death (Overseas) pertaining to Mr. HASHIM, 4 Mar 09.
- 26. Report of Toxicological Examination pertaining to Mr. HASHIM, 5 Jan 09.
- 27. Autopsy Examination Report, 6 Feb 09.
- 28. Evidence Custody Document, DN 1091-08, 15 Dec 08

Not Attached:

3

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None.

The originals of Exhibits 1 through 5, 7 through 13, 15 through 20, 22, 23 and 24 are forwarded with the USACRC copy of this report. The originals of Exhibits 6 and 14 are retained in the files of 115th Combat Support Hospital, Camp Cropper, Iraq. The original of Exhibits 21, 25 through 27 are retained in the files of the Armed Forces Institute of Pathology, 1413 Research Blvd., Building 102, Rockville, MD. The original of Exhibit 28 is retained in the files of Evidence Depository, 10th MP BN (CID), Camp Victory, Iraq 09342.

STATUS: This is a Final Report. Commander's Report of Disciplinary or Administrative Action is not required.

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

4

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ACLU DDI CID ROI 30034

Law Enforcement Sensitive

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

Cdr, USACIDC, ATTN: CIOP-COP-CO, Fort Belvoir, VA 22060

Cdr, 3D MP GRP (CID), USACIDC, Fort Gillem, GA 30297

Cdr, 10th MP BN (CID), Camp Victory, Iraq APO AE 09342

Commander, 24th/348th MP Det (CID), Camp Slayer, Iraq APO AE 09342

Ops Officer, 34th/348th MP DET (CID), Camp Slayer, Iraq APO AE 09342

Dir, Armed Forces Institute of Pathology, AFIP Annex-Bldg 102, 1413 Research Blvd,

Rockville, MD 20850

CJA, 11th MP BDE, ATTN: LTC b(6), b(7)(C) Camp Cropper, Iraq APO AE 09342

PMO, VBC, IRAQ APO AE 09342

Cdr, 1-114 Field Artillery, ATTN: LTC b(6), b(7)(C) Camp Cropper, Iraq APO AE

09342

Deputy CJA, 300th MP BDE, ATTN: MAJ b(6), b(7)(C) Camp Cropper, Iraq APO AE

09342

FILE

5

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Law Enforcement Sensitive

DEPARTMENT OF THE ARMY

U.S. ARMY CRIMINAL INVESTIGATION COMMAND
Camp Cropper CID Office
24th/348th MP DET (CID), Camp Cropper, Iraq APO AE 09342

15 Mar 2009

MEMORANDUM FOR: SEE DISTRIBUTION

SUBJECT: CID REPORT OF INVESTIGATION - FINAL/SSI - 0036-2008-CID789-53216 - 5H9A

DATES/TIMES/LOCATIONS OF OCCURRENCES:

1. 14 DEC 2008, 0400 - 14 DEC 2008, 0602; TRAUMA ROOM, 115TH COMBAT SUPPORT HOSPITAL, CAMP CROPPER, IRAQ, APO, AE 09342

DATE/TIME REPORTED: 14 DEC 2008, 0703

INVESTIGATED BY:

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

SUBJECT:

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

VICTIM:

1. HASHIM, LO'Y LAFTA (DECEASED); FRMIL; IRAQ; (DOB); (POB); MALE; WHITE; INTERNMENT SERIAL NUMBER US (6). b(7)(C)CI, THEATER INTERNMENT FACILITY, CAMP CROPPER, IRAQ, APO, ARMED FORCES AFRICA, CANADA, EUROPE & MIDDLE EAST 09342; XZ; [DEATH BY NATURAL CAUSES]

INVESTIGATIVE SUMMARY:

THIS IS AN OPERATION IRAQI FREEDOM INVESTIGATION

The Patient Administration Department, 115th CSH, reported the death of Detainee HASHIM.

1

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ACLU DDI CID ROI 30036

Law Enforcement Sensitive

Investigation determined Mr. HASHIM died of a cardiac arrhythmia due to the focal dysplasia of the atrioventricular nodal artery. An autopsy conducted by the Office of the Armed forces Medical Examiner, (OAFME) revealed Mr. HASHIM manner of death was of natural causes.

STATUTES: N/A

EXHIBITS:

Attached:

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- 2. AIR of SAb(6), b(7)(C) 14 Dec 08.
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- 9. Death Scene photographic packet, 14 Dec 08. (USACRC and file copies only)
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- 11. Canvass Interview Worksheet, 14 Dec 08.
- 12. Sworn Statement of SGT b(6), b(7)(C) 15 Dec 08.

2

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- 13. CD containing Surveillance video.
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- 15. Statement of Mr^{b(6)}, b(7)(C) 17 Dec 08.
- 16. Arabic Statement of Mr. ^{b(6), b(7)(C)} 17 Dec 08. (USACRC and file copies only)
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- 27. Autopsy Examination Report, 6 Feb 09.
- 28. Evidence Custody Document, DN 1091-08, 15 Dec 08

Not Attached:

3

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None.

The originals of Exhibits 1 through 5, 7 through 13, 15 through 20, 22, 23 and 24 are forwarded with the USACRC copy of this report. The originals of Exhibits 6 and 14 are retained in the files of 115th Combat Support Hospital, Camp Cropper, Iraq. The original of Exhibits 21, 25 through 27 are retained in the files of the Armed Forces Institute of Pathology, 1413 Research Blvd., Building 102, Rockville, MD. The original of Exhibit 28 is retained in the files of Evidence Depository, 10th MP BN (CID), Camp Victory, Iraq 09342.

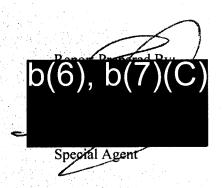
STATUS: This is a Final Report. Commander's Report of Disciplinary or Administrative Action is not required.

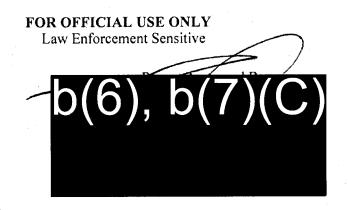
CID reports of investigation may be subject to a Quality Assurance Review by CID higher headquarters.

4

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ACLU DDI CID ROI 30039





DISTRIBUTION:

Dir, USACRC, Ft Belvoir, VA

Cdr, USACIDC, ATTN: CIOP-COP-CO, Fort Belvoir, VA 22060

Cdr, 3D MP GRP (CID), USACIDC, Fort Gillem, GA 30297

Cdr, 10th MP BN (CID), Camp Victory, Iraq APO AE 09342

Commander, 24th/348th MP Det (CID), Camp Slayer, Iraq APO AE 09342

Ops Officer, 34th/348th MP DET (CID), Camp Slayer, Iraq APO AE 09342

Dir, Armed Forces of the Institute of Pathology, Office of the Armed Forces Medical

Examiner, A

CJA, 11th MP BDE, ATTN: LTC b(6), b(7)(C) Camp Cropper, Iraq APO AE 09342

PMO, VBC, IRAQ APO AE 09342

FOB Commander, 1-114 Field Artillery, ATTN: LTC b(6), b(7)(C) Camp Cropper,

Iraq APO AE 09342

Deputy CJA, 300th MP BDE, ATTN: MAJ b(6), b(7)(C) Camp Cropper, Iraq APO AE

09342

FILE

5

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ROI NUMBER

0036-08-CID789-53216

CID Regulation 195-1

PAGE 1 OF 1 PAGE

DETAIL

BASIS FOR INVESTIGATION: About 0703, 14 Dec 08, SA b(6), b(7)(C) was notified by INVb(6), b(7)(C) MPI, 744th MP Bn, Camp Cropper, Iraq APO AE 09342, of a detained death that occurred under medical care in the 115th Combat Support Hospital, Camp Cropper.

About 0715, 14 Dec 08, SA b(6), b(7)(C) arrived on scene at the 115th CSH and interviewed 1LT b(6), b(7)(C) Registered Nurse, 115th CSH, Camp Cropper, who stated she received a call from the Military Police, who reported Mr. Lo'y Lafta HASHIM, ISN US b(6), b(7)(C) CI, had shortness of breath, chest pains, and was unconscious within Compound 1D, Theater Internment Facility (TIF), Camp Cropper. 1LT b(6), b(7)(C) stated medics were sent to evaluate Mr. HASHIM, and reported that Mr. HASHIM was experiencing respiratory distress. Medics on scene were ordered to transport Mr. HASHIM to the 115th CSH, which they did while performing CPR enroute. Medics arrived with Mr. HASHIM at approximately 0435, at which time the resuscitation process was started. 1LT stated that Mr. HASHIM was intubated, monitored with an electrocardiogram, defibrillated, and given intravenous narcotics to aid in his resuscitation. All attempts to revive Mr. HASHIM were unsuccessful, and at 0602, 14 Dec 08, CPT (Dr.) b(6), b(7)(C) 115th CSH, pronounced Mr. HASHIM deceased. 1LT b(6), b(7)(C) stated a toxicology screen was conducted at 0545, 14 Dec 08, but was negative for any foreign substance. ///Last Entry///

TYPED AGENT'S NAME AND SEQUENCE NUMBER

ORGANIZATION

24th/348th MP DET (CID)

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

Camp Cropper, Baghdad, Iraq APO AE 09342

Έ

EXHIBIT

14 Dec 08 DDLCID ROL3004

CID FORM 94 (Automated) FOR OFFICIAL USE ONLY-LAW ENFORCEMENT SENSITIVE

ROI NUMBER

0036-08-CID789-53216

CID Regulation 195-1

PAGE 1 OF 1 PAGE

DETAIL

EXAMINATION OF DECEASED: About 0720, 14 Dec 08, SAb(6), b(7)(C) conducted an examination of the decedent, Mr. HASHIM, in the Trauma Room, 115th CSH.

Characteristics of Decedent: The decedent was identified via digital thumb print scan as Mr. HASHIM. The decedent appeared to be a Middle Eastern male, approximately 5'10", and weighed approximately 170 pounds. The decedent had black hair and brown eyes. The decedent was not clothed, but covered with a bed sheet. Evidence of medical intervention included intra-venous leads in the left and right arm, a catheter inserted into the penis, numerous leads around the chest and abdomen, defibrillation electrodes on the chest, and an endotracheal tube and body temperature probe inserted through the mouth. The decedent was given medication prior to his death to aid in the resuscitation efforts.

Condition of Decedent: The decedent was cool to the touch with liver mortis apparent in the decedent's lower back and the back of his neck. Rigor mortis was not present in the large or small joints. No signs of external blunt or sharp force trauma, except for signs of medical intervention, were observed. The decedent was not wearing any jewelry.

Environmental Conditions: At the time of the examination, the temperature inside the Trauma Room was 78 degrees Fahrenheit. There were no odors out of the ordinary near the deceased during the time of the examination.

Documentation of Decedent: The deceased was documented by SA b(6), b(7)(C) utilizing a NIKON D80 Digital Camera with an external flash. Additionally, a human remains sketch was prepared by SA b(6), b(7)(C) and verified by 1LT b(6), b(7)(C)

Collection of Evidence: A collection of evidence was not performed because the decedent was treated in the 115th CSH prior to his demise, and all clothing had been disposed of by hospital staff. ///Last Entry///

TYPED AGENT'S NAME AND SEQUENCE NUMBER

ORGANIZATION

24th/348th MP DET (CID)

Camp Cropper, Baghdad, Iraq APO AE 09342

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

14 Dec 08

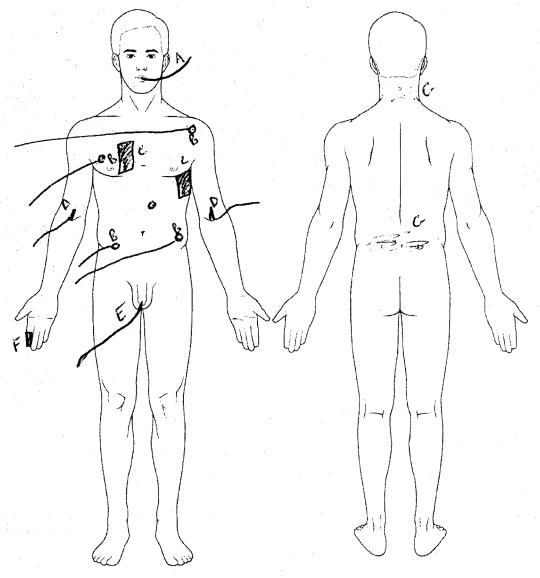
EXHIBIT

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000012

(Automated)

Rough Sketch Depicting Human Remains



<u>LEGEND</u>	TITLE BLOCK:
A: Interaction Table	Case#: 0036-05-CID789-
B: Elephorandlogram Leads	Offense: Undergrined Death
C. Defibrillation Leads	Person Portrayed: Detainer
D: 18 Chage IV	Location. Trauma From, 115th (SH, Pamp Chapper, IRK
E: Foley Catheter	Victim: Loin Lafta HASHIM (ISD) D(6), D(7)(C)
F. O2 Provider	Date/Time: 12 DEC 08 0125
G: Liver Wortis	Sketched By: $54b(6)$, $b(7)(C)$
Н:	Verified By: \(\tilde{b}(6), b(7)(C)
Print and a second	b(0), b(1)(0)

FOR OFFICIAL DE DICH CID ROLS 30043
LAW ENFORCEMENT SENSITIVE

0036-08-CID789-53216

ROI NUMBER

CID Regulation 195-1

PAGE 1 OF 2 PAGE

DETAILS

About 0740, 14 Dec 08, SA b(6), b(7)(C) interviewed Dr. b(6), b(7)(C) who stated he was notified at approximately 0415, 14 Dec 08, that a detainee in Compound 1D was having shortness of breath, chest pains, and was unconscious. Dr. b(6), b(7)(C) stated medics that were dispatched to evaluate the patient reported that he was unresponsive, at which time they were ordered to transport him to the CSH. Dr. b(6), b(7)(C) stated medics conducted CPR while enroute to the CSH, and his staff continued life saving efforts once in the trauma room. Dr. b(6), b(7)(C) stated the patient was shocked one time with an Automatic External Defibrillator (AED) and given intra-venous narcotics to aid in his resuscitation, but never recovered. Dr. b(6), b(7)(C) stated he pronounced Mr. HASHIM deceased at 0602, 14 Dec 08, and was unable to provide a preliminary opine as to the cause and manner of death.

About 0746, 14 Dec 08, SA b(6), b(7)(C) interviewed PFC b(6), b(7)(C) 115th CSH, Camp Cropper, who stated he received the call from the Military Police in Compound 1D at approximately 0415. The Military Police reported that Mr. HASHIM was experiencing shortness of breath, chest pains, and was unconscious. PFC b(6), b(7)(C) coordinated with personnel at the Internee Holding Area (IHA), and dispatched a medic to evaluate Mr. HASHIM. PFC b(6), b(7)(C) stated the medic on scene reported that Mr. HASHIM was unresponsive, at which time the medic was ordered to transport Mr. HASHIM to the CSH for emergency treatment. PFC b(6), b(7)(C) did not recall the name of the Military Police Soldier that initially reported Mr. HASHIM's condition, or the medic that responded and initially evaluated and transported Mr. HASHIM.

About 0806, 14 Dec 08, SAb(6), b(7)(C) coordinated with SPC b(6), b(7)(C) Patient Administration Department (PAD), 115th CSH, Camp Cropper, and obtained all medical records pertaining to Mr. HASHIM since his capture, except emergency records for treatment conducted in efforts to resuscitate him, which were not yet available.

About 1224, 14 Dec 08, SA b(6), b(7)(C) interviewed SGT b(6), b(7)(C)

B Co. 112th Fires Bn, Camp Cropper, who stated sometime between 0400-0500, he heard SGT b(6), b(7)(C)

B Co. 112th Fires Bn, Call over the radio and request medical assistance for a detainee with a medical emergency. SGT b(6), b(7)(C)

Stated when he heard SGT b(6), b(7)(C)

Call a second with more urgency in her voice, he ran over to help. When SGT b(6), b(7)(C)

B Co. 112th Fires Bn, and an Iraqi Correctional Officer (ICO). SGT b(6), b(7)(C) stated SGT b(6), b(7)(C) was able to find a faint pulse, but stated Mr. HASHIM was not breathing. SGT b(6), b(7)(C) and SGT did rescue breathing on Mr. HASHIM until medics arrived and assumed life saving efforts.

About 1235, 14 Dec 08, SA b(6), b(7)(C) interviewed SGT b(6), b(7)(C) who stated sometime after 0400, 14 Dec 08, he heard SGT b(6), b(7)(C) call over the radio and report that several detainees informed her that Mr. HASHIM was unresponsive and not breathing. SGT b(6), b(7)(C) went to assist SGT b(6), b(7)(C) and observed her tell the detainees to bring Mr. HASHIM to the sally port, which they did. SGTb(6), b(7)(C) stated he

TYPED AGENT'S NAME AND SEQUENCE NUMBER

ORGANIZATION

24th/348th MP DET (CID)

Camp Cropper, Baghdad, Iraq APO AE 09342

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

14 Dec 08

0130093

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ROI NUMBER

0036-08-CID789-53216

CID Regulation 195-1

PAGE 2 OF 2 PAGE

DETAILS

assisted an ICO bring Mr. HASHIM out of the sally port, and then began checking for signs of life. SGT b(6), b(7)(C) found a faint pulse in Mr. HASHIM's neck, but could not detect any signs of breath. A Soldier brought SGT b(6), b(7)(C) a face barrier, at which time he began rescue breathing. SGT b(6), b(7)(C) stated the medics assumed life saving efforts when they arrived on scene.

About 1249, 14 Dec 08, SAb(6), b(7)(C) interviewed SGT (b(6), b(7)(C)) who stated at approximately 0410, 14 Dec 08, she was working as the zone representative in Compound 1D, and was trying to get the detainees prepared for their daily appointments. SGT (b(6), b(7)(C)) stated an English speaking detainee reported to her that one of the detainees couldn't breathe. SGT (b(6), b(7)(C)) instructed the detainee to bring him to the sally port, and immediately called the Compound 1 CP and requested a medic. Four or five detainees carried Mr. HASHIM out of the building and into the sally port, at which time SGT (b(6), b(7)(C)) instructed an English speaking detainee to ask Mr. HASHIM what his name was, but he didn't respond. SGT (b(6), b(7)(C)) then called the CP again, who stated they called the hospital and reported that the detainee was unresponsive and not breathing. SGT (b(6), b(7)(C)) stated it took approximately 10 minutes for medics to arrive, but stated SGT (b(6), b(7)(C)) and SGT (b(6), b(7)(C)) conducted rescue breathing while waiting for the medics.

About 1307, 14 Dec 08, SA b(6), b(7)(C) coordinated with SFC b(6), b(7)(C) Compound 1 NCOIC, B Co, 11th Fires Bn, Camp Cropper, who stated the last detainee head count of Compound 1 was conducted at 0930, with 257 detainees present in Compound 1D. SFC b(6), b(7)(C) further stated that Detainee Operations Center (DOC) was notified of Mr. HASHIM's medical emergency at 0415, and again at 0422. SFC b(6), b(7)(C) stated medics arrived on scene at 0428, and the Ambulance arrived on scene at 0438, at which time they transported Mr. HASHIM to the CSH. SFC b(6), b(7)(C) identified the following detainees as those whom carried Mr. HASHIM out to the sally port:

-Mr. b(6), b(7)(C)-Mr. b(6), b(7)(C)

Mr. b(6), b(7)(C) ISN US b(6), b(7)(C)-CI.

About 1320, 14 Dec 08, SA b(6), b(7)(C) with the assistance of Mr. b(6), b(7)(C) interviewed Mr. b(6), b(7)(C) ISN USb(6), b(7)(C). CI, Building D4 Chief, who stated when the lights were turned on at 0400, 14 Dec 08, Mr. HASHIM began moving roughly, but didn't speak. Mr. b(6), b(7)(C) stated he and the other detainees could tell Mr. HASHIM was sick, and when they sat him up, they could tell he wasn't breathing. Mr. b(6), b(7)(C) and other detainees notified the zone representative, SGT b(6), b(7)(C) who called for medics.

TYPED AGENT'S NAME AND SEQUENCE NUMBER

ORGANIZATION

24th/348th MP DET (CID)

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

Camp Cropper, Baghdad, Iraq APO AE 09342

DATE

FXHIRIT

CID FORM 94 FO

FOR OFFICIAL USE ONLY-LAW ENFORCEMENT SENSITIVE

DETAINEE PERSONNEL RECORD For use of this form, see AR 190-8; the proponent agency is ODCSPER. 2. NAME (Last, First, M) (AKA) 3. RANK (35-37) CARDI 1. INTERMENT SERIAL No.(1-15) HASHIM, LO'Y LAFTA 7. DATE OF BIRTH (54-59) 6. DATE OF CAPTURE (48-53) 4. ENEMY SVC NO. (38-46) 5. TYPE (47) 1983/01/01 2006/07/20 8. NATIONALITY (60-61) | 9. EDUCATION (62) | 10. RELIGION (63-64) | 11. MARSTA (65) | 12. PW CAMP UIC | 13. PW PROCESS DT 2006/08/02 SHIIT-ISLAM IRAQ WR8BAA 16. LANGUAGE II (17-18) 14. Sex (14) 15. LANGUAGE I (15-16) CARD II ARABIC-IRAQ Male 18. PW CAMP LOCATION (20-22) 19. ENEMY UNIT (23-24) 17. PHYSICAL CONDITION (19) GOOD 23. UIC-CAPTURE UNIT (46-51) 22. CIVILLIAN OCCUPATION (40-45) 20. ARM OF SVC (35) 21. MOSC (36-39) 27. PLACE OF BIRTH 26. POWER SERVED 24. CORPS AREA OF CAPTURE 25. PLACE OF CAPTURE BAGHDAD IRAQ **BAGHDAD** IRAQ 28. ADDRESS TO WHICH MAIL FOR PW MAY BE SENT 29. FATHER/STEPFATHER 30. MOTHER'S MAIDEN NAME 32. NAME, ADDRESS, AND RELATIONSHIP OF PERSON TO BE 31. PERMANENT HOME ADDRESS OF PW INFORMED OF CAPTURE 34. DISTINGUISHING MARKS 33. OTHER PARTICULARS FROM ID CARD TATTOO TATTOO LEFT FOREARM 35. IMPOUNDED PERSONAL EFFECTS AND MONEY (IAW AR 37-36) Qty Disposition Tag STORE ROOM 25000 IZD STORE ROOM 5000 IZD STORE ROOM 1000 IZD STORE ROOM 500 IZD STORE ROOM 250 IZD STORE ROOM WALLET BLACK, WHITE, RED IN CO. STORE ROOM ID CARD STORE ROOM MISC DOCUMENTS STORE ROOM **BUSINESS CARD** STORE ROOM **ENVELOPE WHITE AND RED IN** COLO STORE ROOM RAZOR BLADE (DORCO) THE ABOVE LIST OF IMPOUNDED ITEMS IS CORRECT **37.PHOTO** 36. REMARKS 7/20/2006 - ILLEGAL WEAPONS POSSESSION / 39. SIGNATURE 38. PREPARED BY (Individual and Unit) lb(6), b(7)(C)

https://mp.pentagon.mil/secured/DRS/Report Peta nee-Personny-RecarDs Port 18/2/2006

EAW ENFORCEMENT SENSITIVE 000079

ROI NUMBER

0036-08-CID789-53216

CID Regulation 195-1

PAGE 1 OF 2 PAGES

DETAILS

Characteristics of Scene: Camp Cropper was a TIF which housed local national, juveniles and adults. Compound 1D was in the Southeast corner of the TIF. It was comprised of 4 sub-compounds referred to as A. B, C, and D. Compound 1D was located at the northeast corner of Compound 1, and consisted of 6 tan concrete and cinder brick type buildings used as the living areas for Internees housed in Compound 1D. A water closet (WC), similar to the other buildings in the compound, was on the south side of Compound 1D and was surrounded by a chain linked fence, approximately 12' high with concertina wire strained across the top. There was an entrance from the sally port in the south central portion of the compound, and a western entrance by the southwest sally port. The sally ports in the southeast corner had a large double gated E/E, which was used by TIF Guards to bring trash out, let food in, and conduct other maintenance functions as needed. The enclosed recreation yard had a lockable gate on the north side, and a primary south central E/E in the southeast corner. The recreation yard was approximately 150' east to west and 30' north to south in size. There was an approximate 12' high fence surrounding all four sides of Compound 1D, with gated E/Es in the southeast corner and central south side. Each E/E entered into separate sally port areas. Each building had tan painted, concrete floors. The walls were gray and of concrete construction. There were approximately 12 windows in the building, with four each in the north and south walls and two each in the east and west walls. The walls and floors appeared to be level. The ceiling was gray concrete, with several fluorescent lights running east to west. The building housed approximately 40 adult Internees.

Condition of Scene: The walkway and common area were made of concrete and in dusty and dirty condition. There were no discernable foot or sandal impressions. There were personal items, cleaning supplies, and various items of trash that lined the walls. Sleeping mats lined and were positioned perpendicular to the interior walls of the building. Several small items of trash were noted outside the E/E and along the outside walls. There was no evidence of blood or obvious indications of foul play or a struggle.

Environmental Conditions: At the time of the death scene verification, the skies were clear and the outside temperature was approximately 75 degrees Fahrenheit. The sky appeared clear. There was no discernable wind. The ground outside of the building, and the floor inside the building were dry. No unusual odors were detected.

Factors Pertinent to Entry/Exit: Access to the TIF was restricted to authorized personnel and

TYPED AGENT'S NAME AND SEQUENCE NUMBER	ORGANIZATION	
(b)(c) (b)(7)(c) (b)(7)(f)	24 th /348 th MP DET (CID)	
$_{SA}(b)(6), (b)(7)(C), (b)(7)(F)$	Camp Cropper, Iraq APO AE 09342	
$\frac{\text{Sign}}{\sqrt{C}}$	DATE EXHIBIT	_
b(6), b(7)(C)	ACLU DDI CID ROI 30125	
AID FAMILAL	Y-LAW ENFORCEMENT SENSITIVE 000092	_

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CID Regulation 195-1

ROI NUMBER

0036-08-CID789-53216

PAGE 2 OF 2 PAGES

DETAILS

interned local nationals. The death scene area could be accessed by any TIF Guard and Internees in Compound 1D. The north E/E of the recreation yard was unlocked for use by the Internees. The south central E/E and southeast E/E of Compound 1D were locked to prevent escape.

Scene Documentation: A death scene sketch was prepared by SAb(6), b(7)(C) SAb(6), b(7)(C) exposed photographs the death scene utilizing a Nikon D80 digital camera with a built in flash.

Search for Latent Print Impressions: A search of latent prints upon the immovable structures and surfaces of Compound 1D was not conducted because the area was accessible to all detainees within Compound 1.

Search Beyond the Scene: A search beyond the scene for items of evidentiary value met with negative results. No bodily fluids or potential weapons were located. ///Last Entry///

TYPED AGENT'S NAME AND SEQUENCE NUMBER

ORGANIZATION

24th/348th MP DET (CID)

Camp Cropper, Iraq APO AE 09342

EXHIBIT

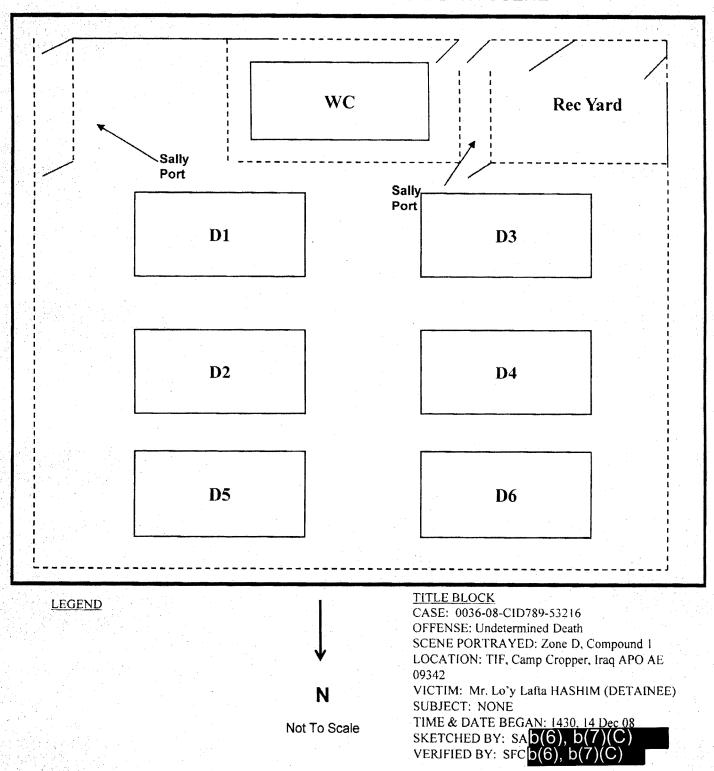
b(6), b(7)(C)

14 Dec 08

BUI 3043

FOR OFFICIAL USE ONLY-LAW ENFORCEMENT SENSITIVE

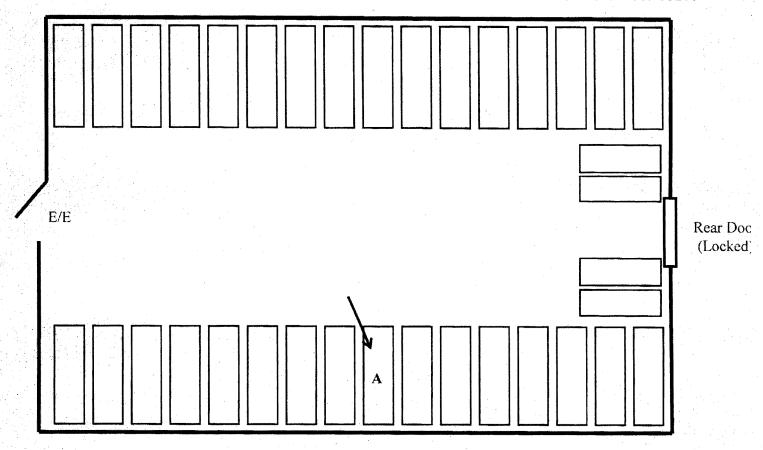
ROUGH SKETCH DEPICTING DEATH SCENE



For Official Use Only

Law Enforcement Sensitive DI CID ROI 3011127

0036-08-CID789-53216



LEGEND

A: Area where Mr. HASHIM slept



Not To Scale

TITLE BLOCK

CASE: 0036-08-CID789-53216 OFFENSE: Undetermined Death SCENE PORTRAYED: Building D4

LOCATION: Compound 1D, TIF, Camp Cropper,

Iraq APO AE 09342

VICTIM: Mr. Lo'y Lafta HASHIM

SUBJECT: None

TIME & DATE BEGAN: 1430, 14 Dec 08 SKETCHED BY: SA b(6), b(7)(C)

VERIFIED BY: SFC b(6), b(7)(C)

FOR OFF A ALUSE ON CID ROI 30128
LAW ENFORCEMENT SENSITIVE 000095 his 000095xhibit_8

FOR OFFICIAL USE ONLY – LAW ENFORCEMENT SENSITIVE

0036-08-CID789-53216 · 5H

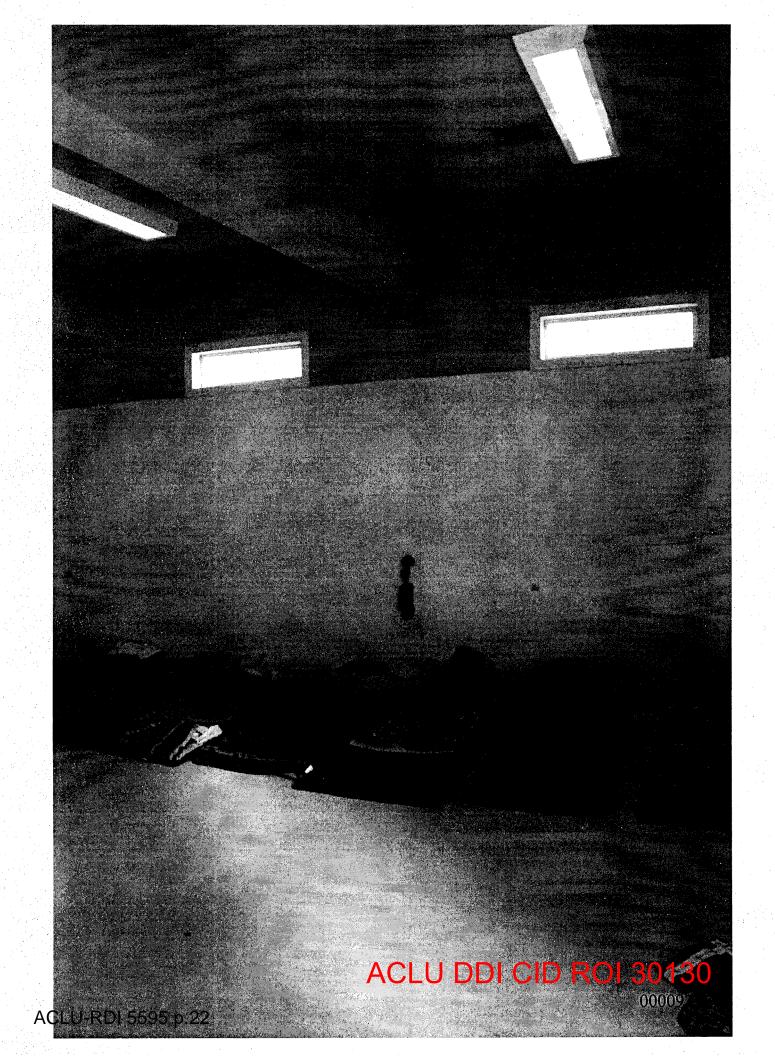


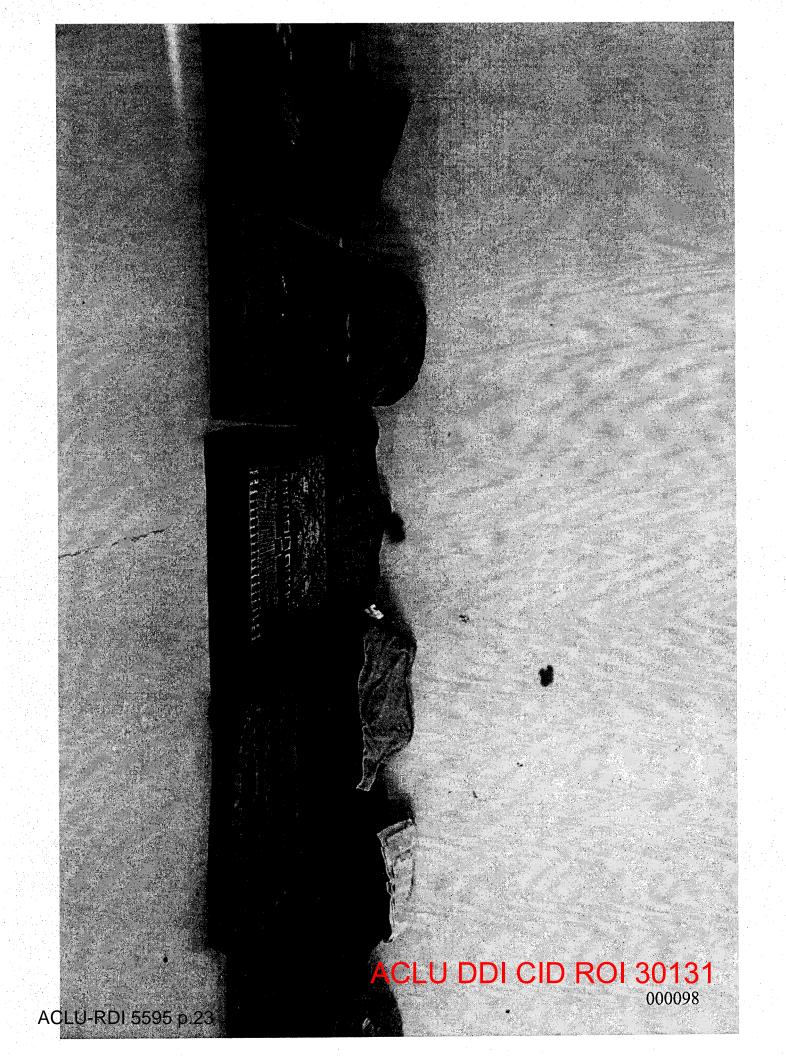
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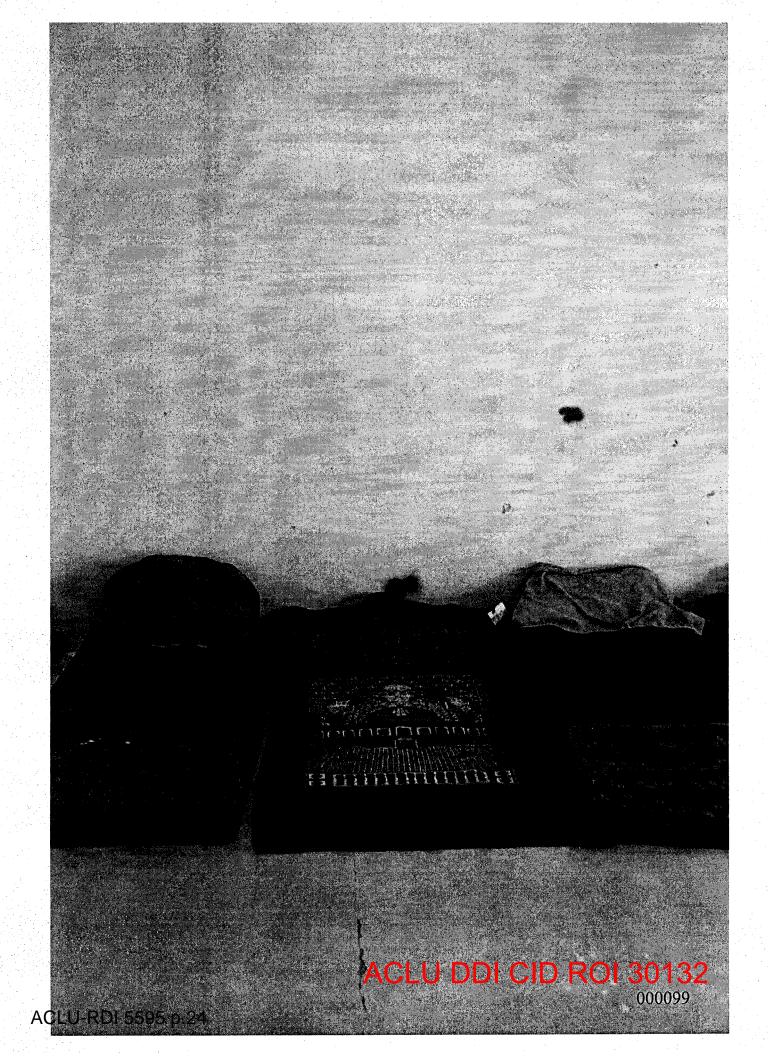
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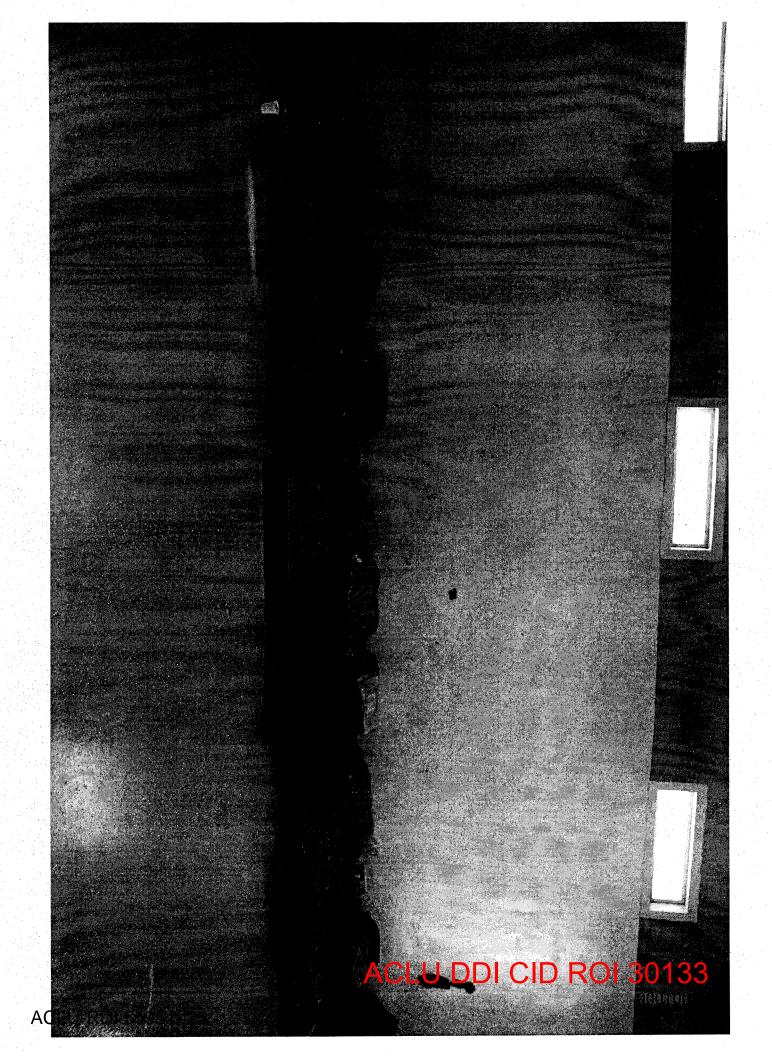
ACLU DDI CID ROI 30129

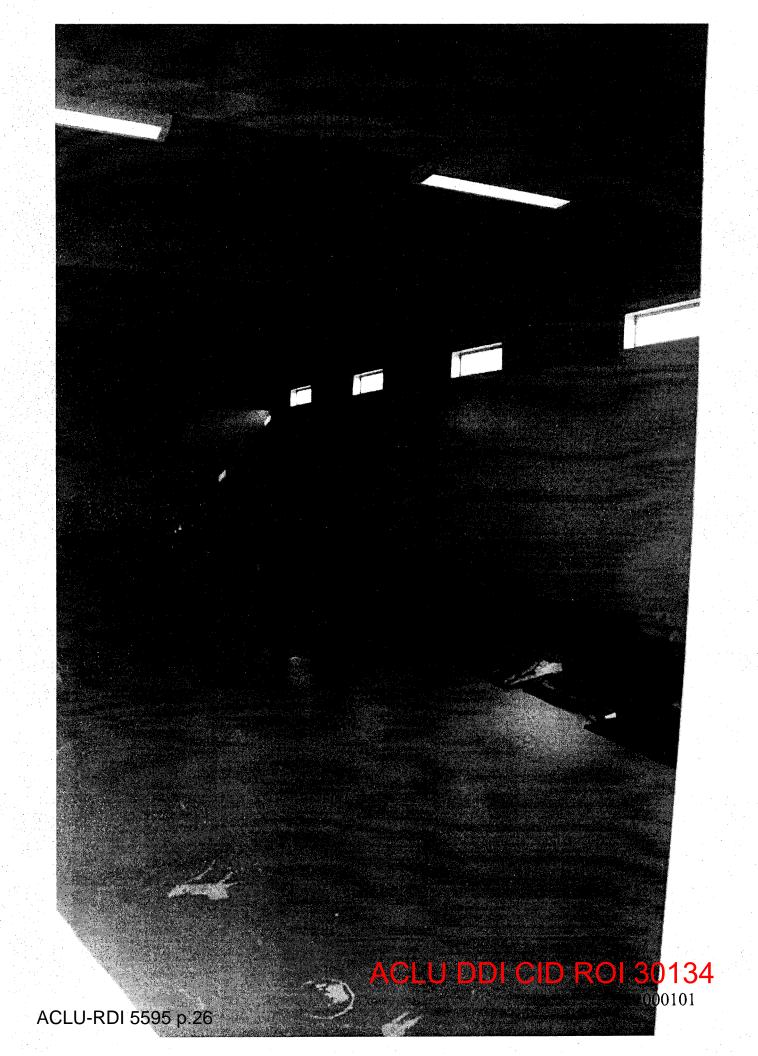
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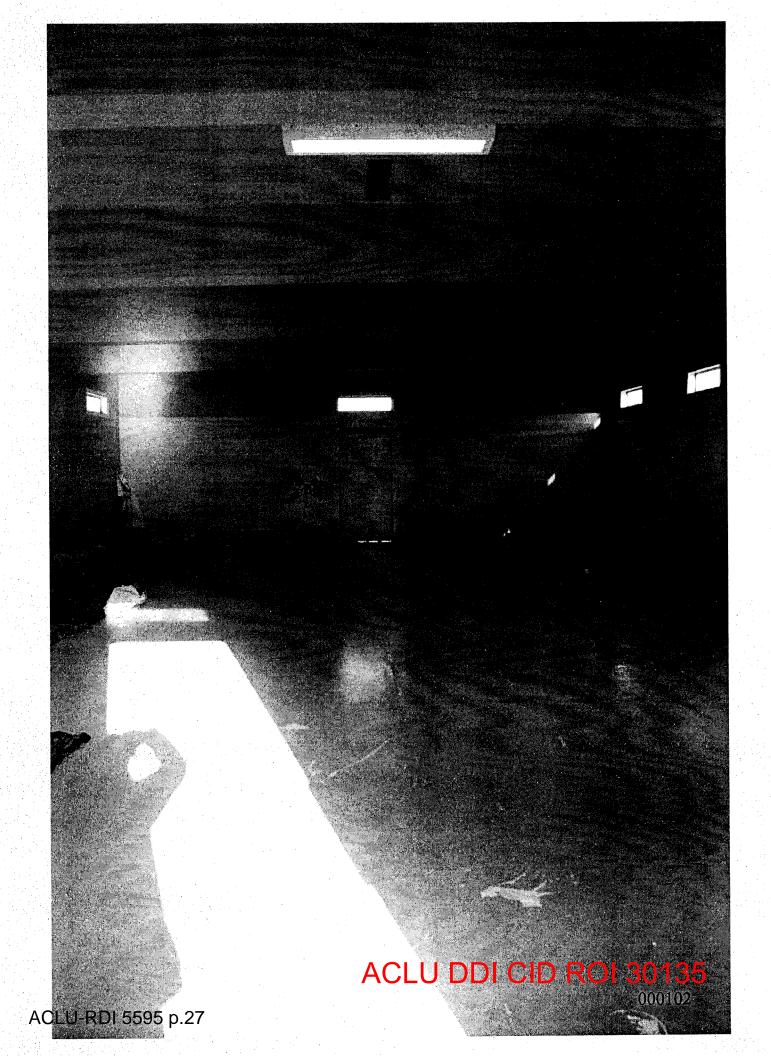


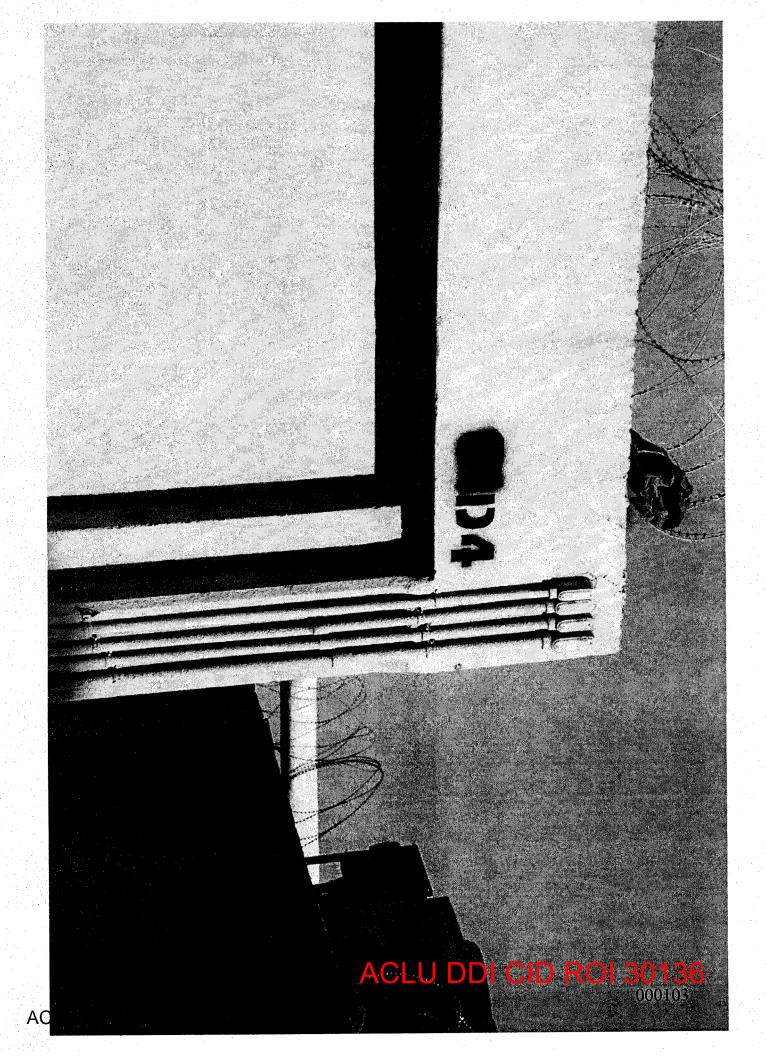




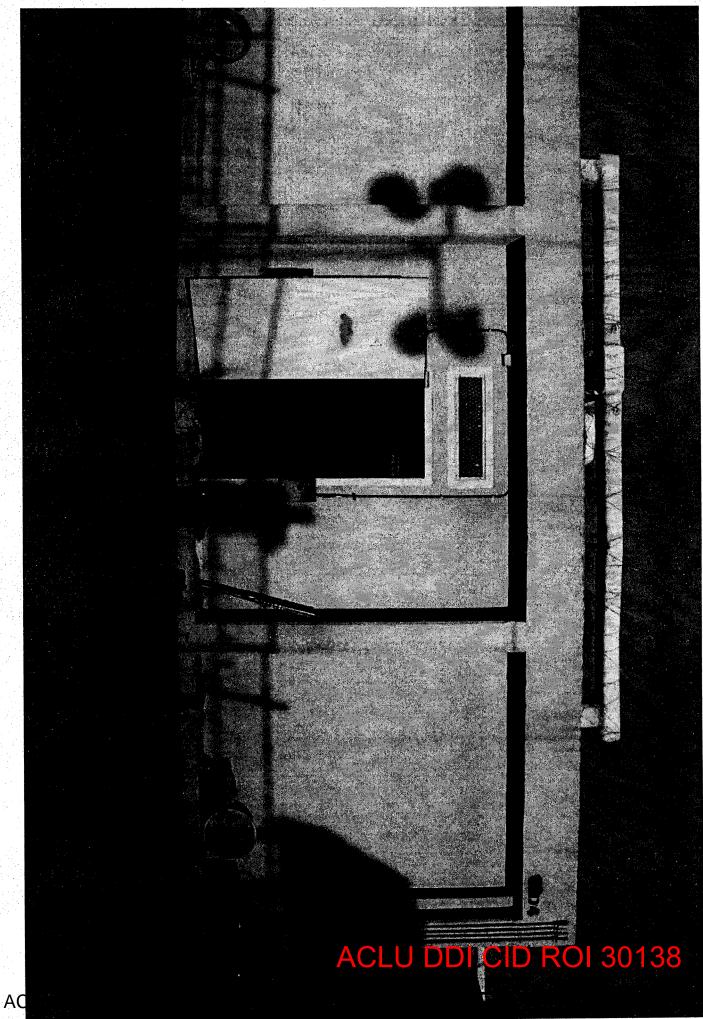












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File Copy

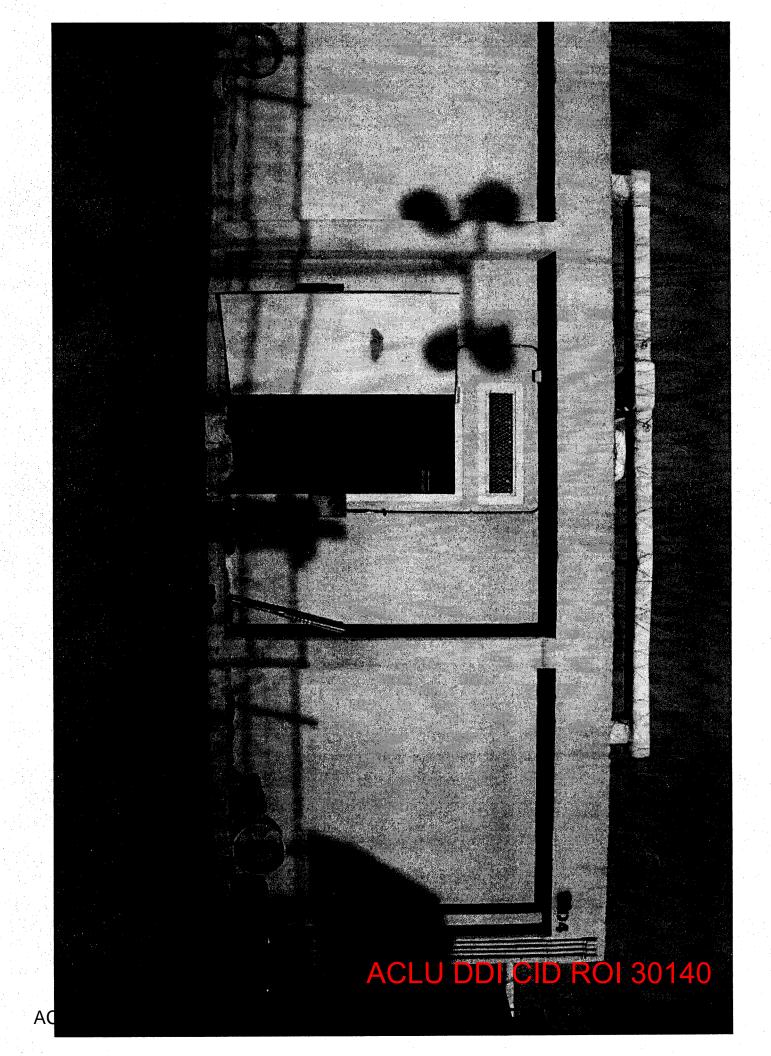
0036-08-CID789-53216

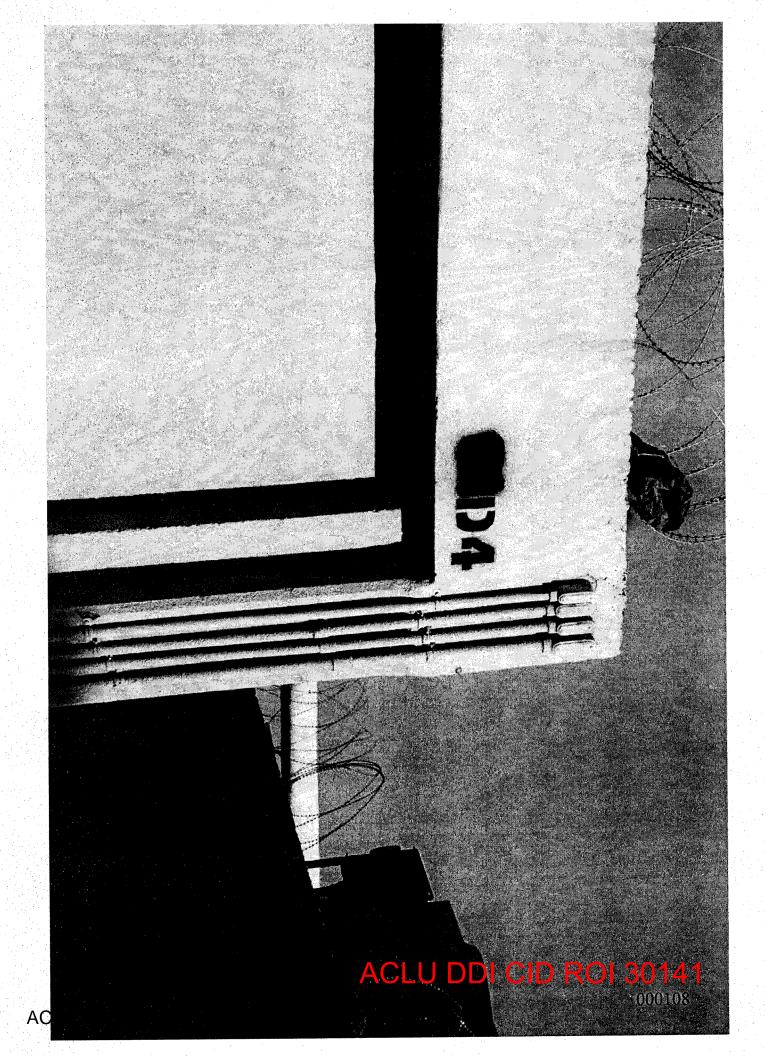


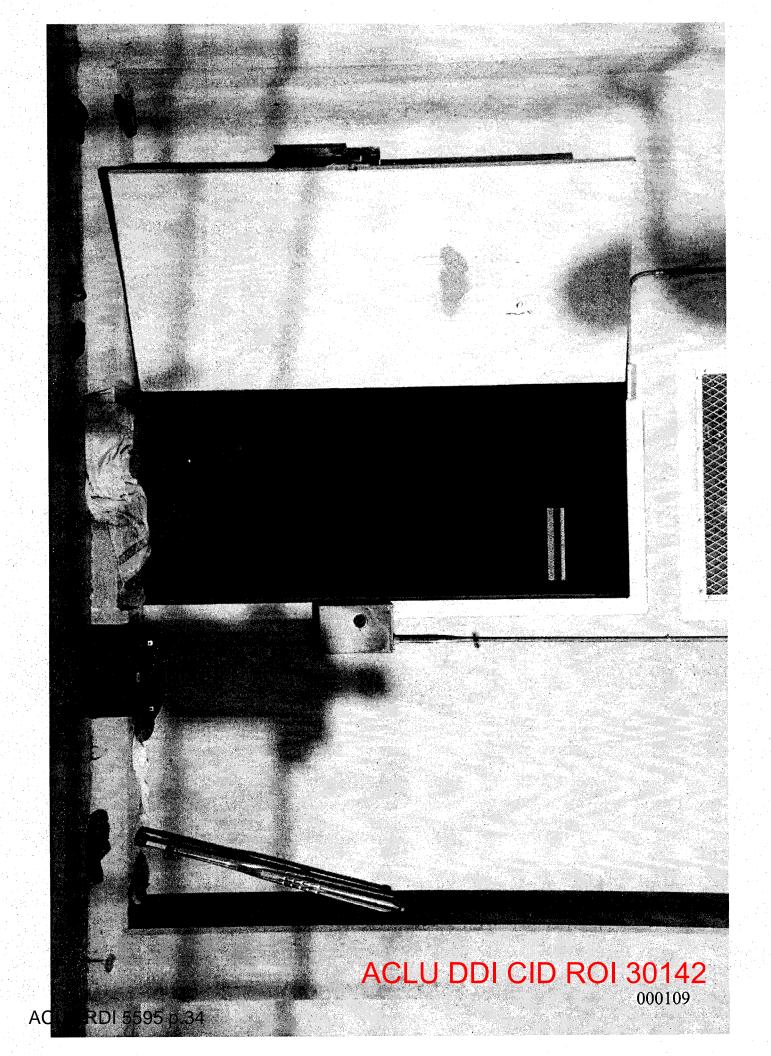
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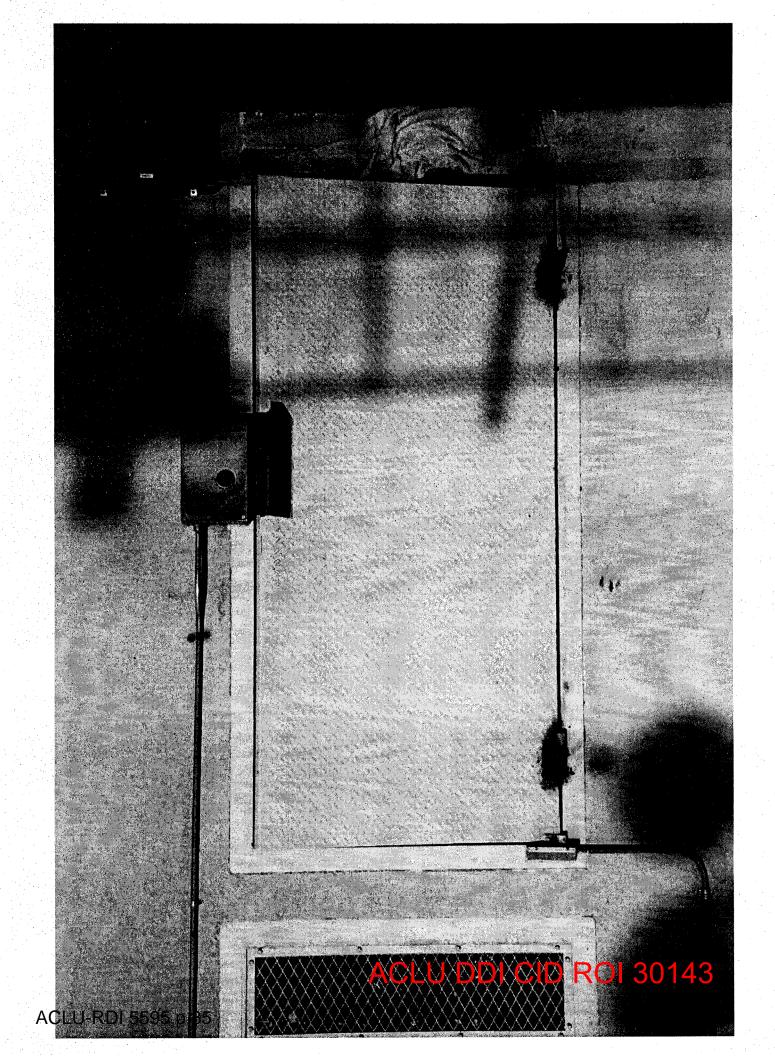
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ACLU DDI CID ROI 301399

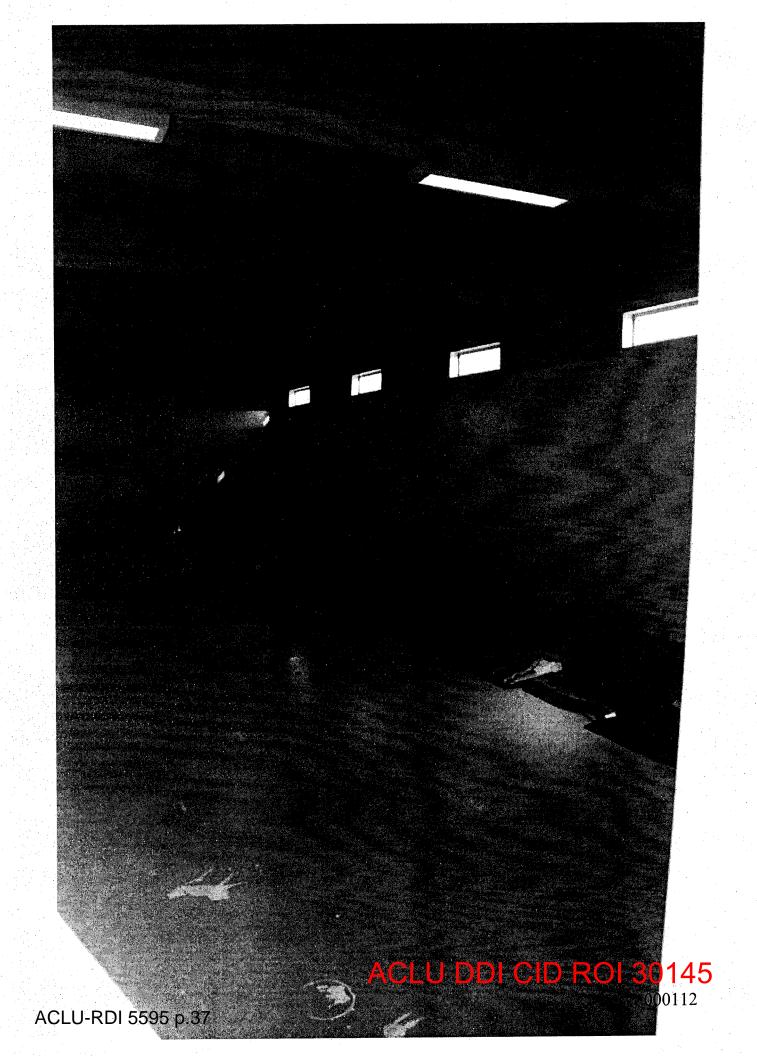




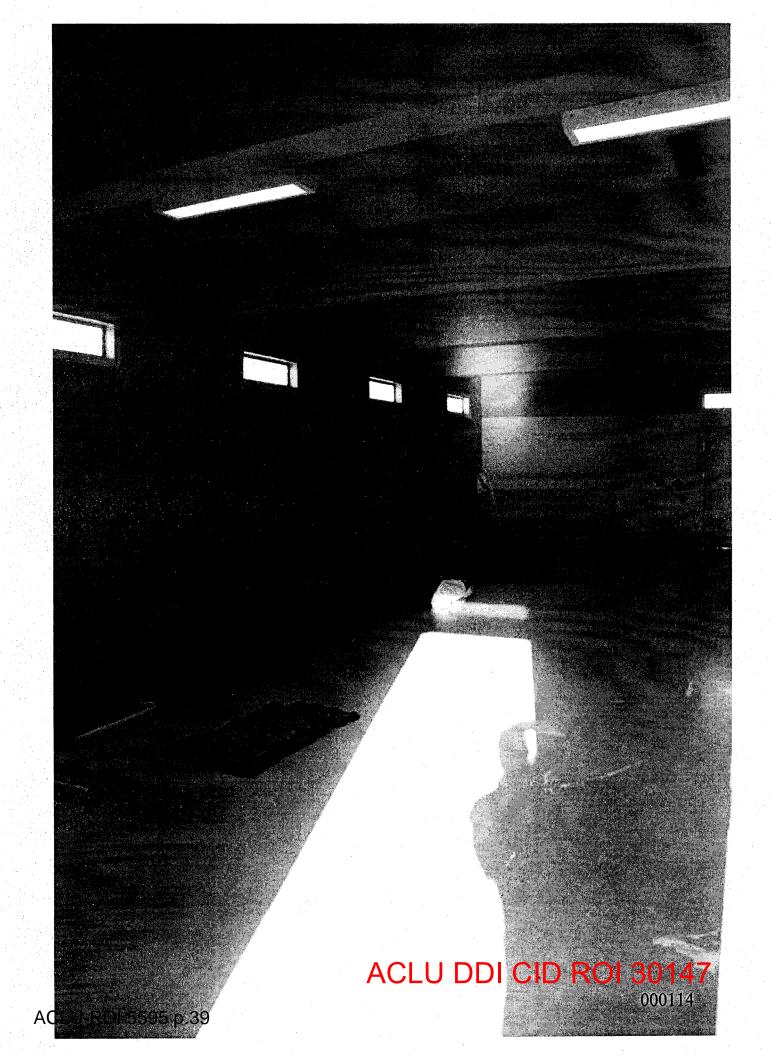




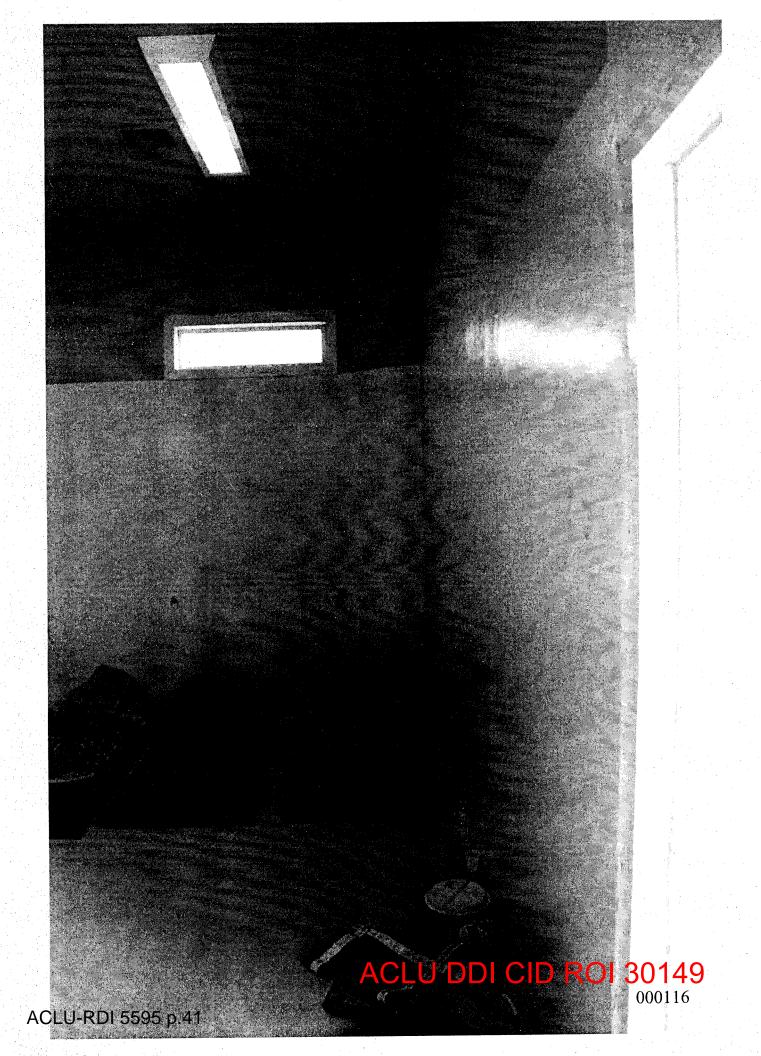


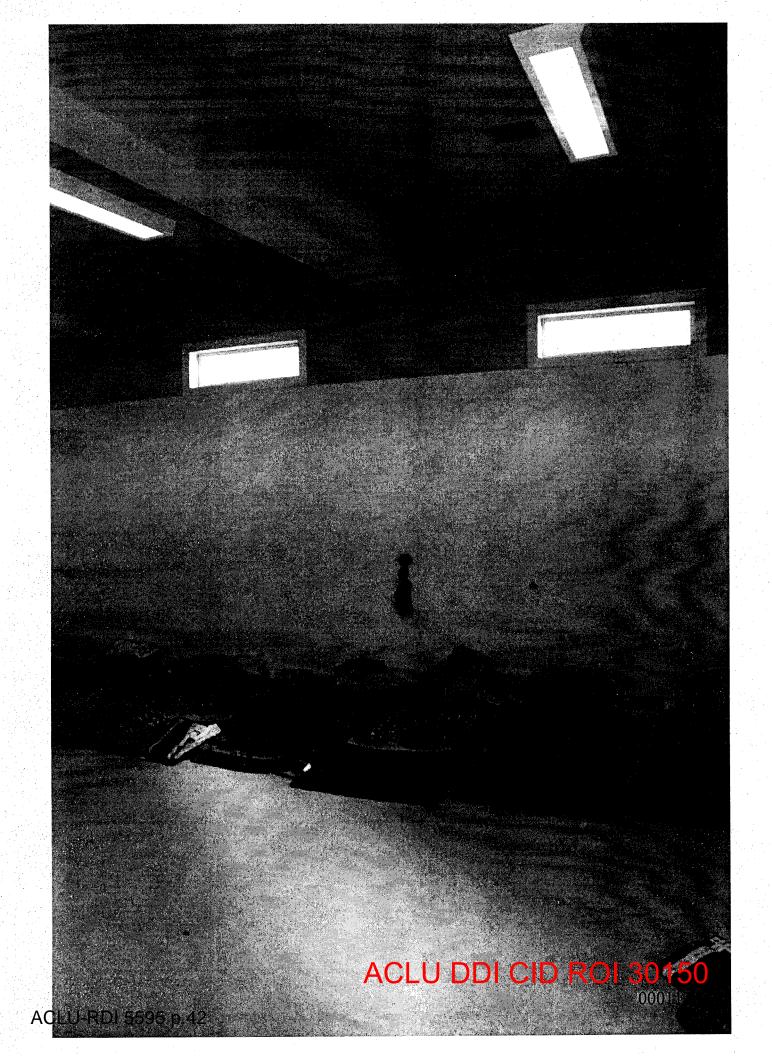


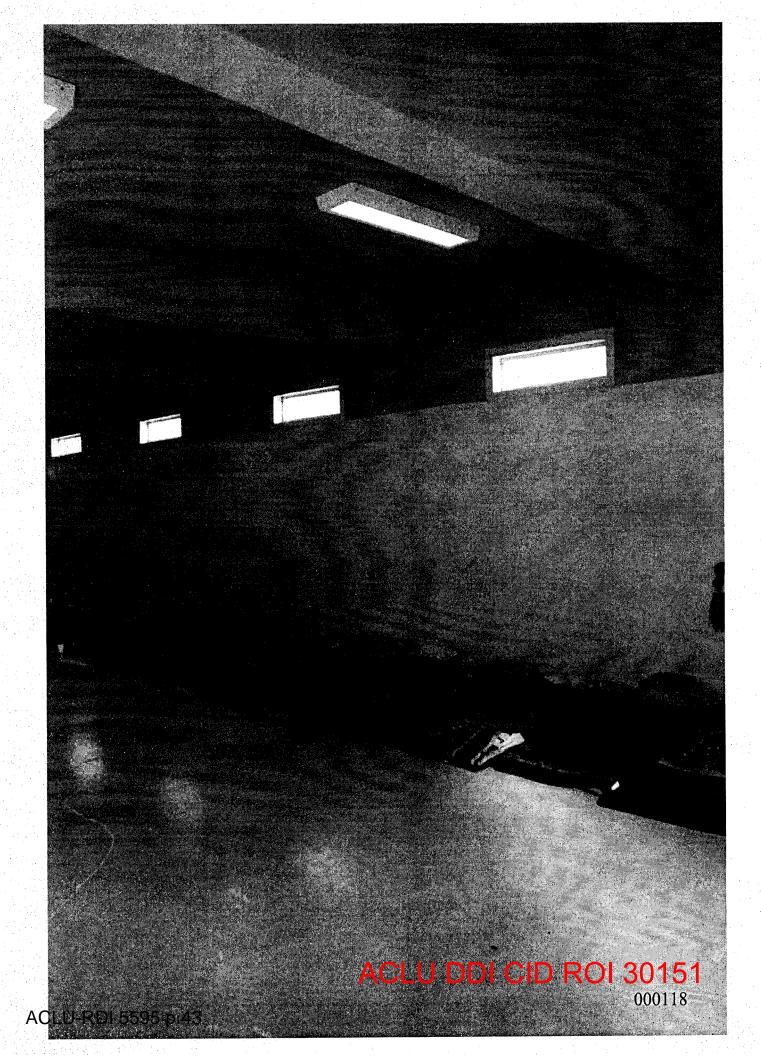


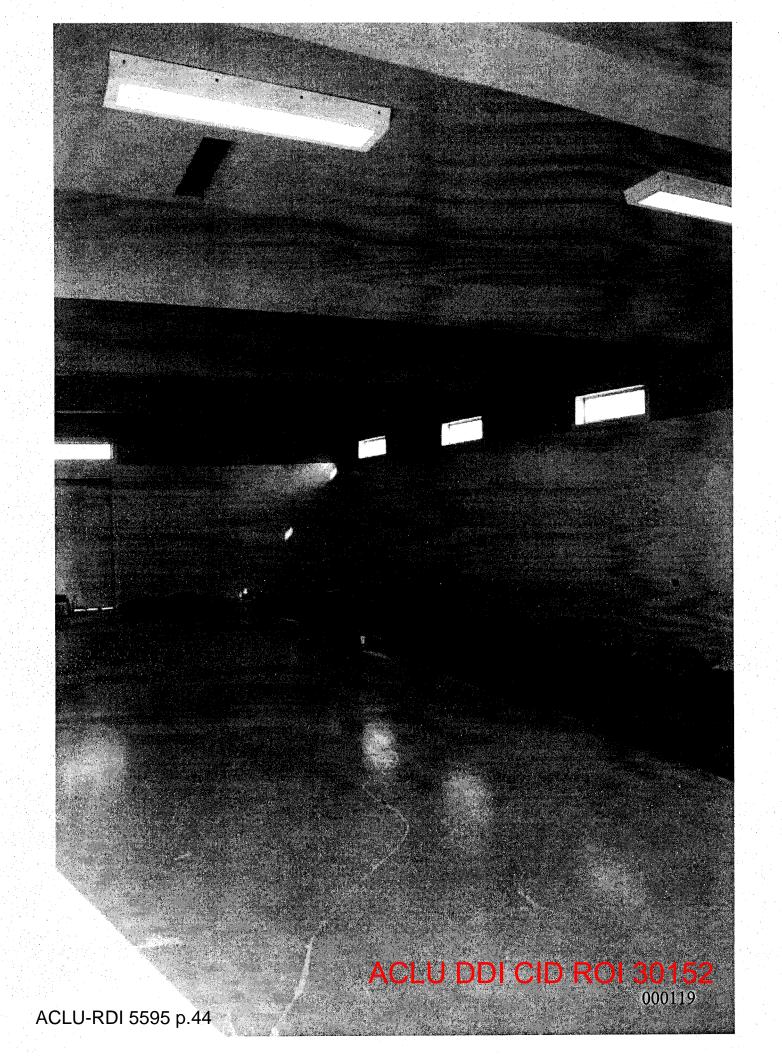






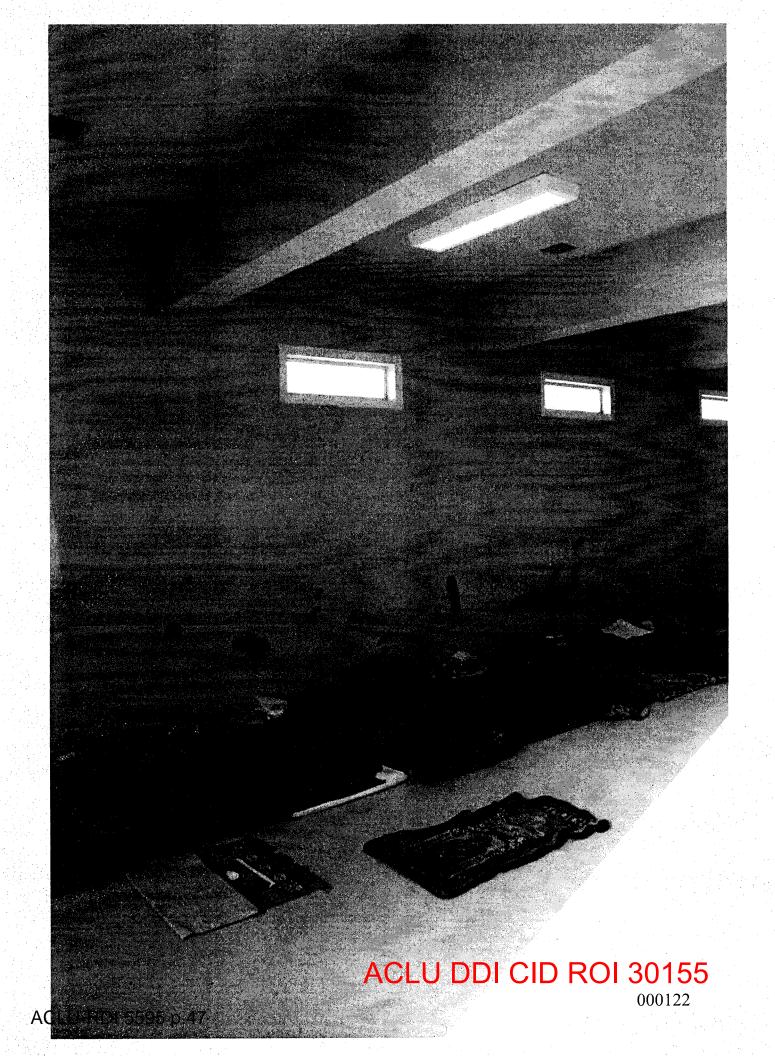


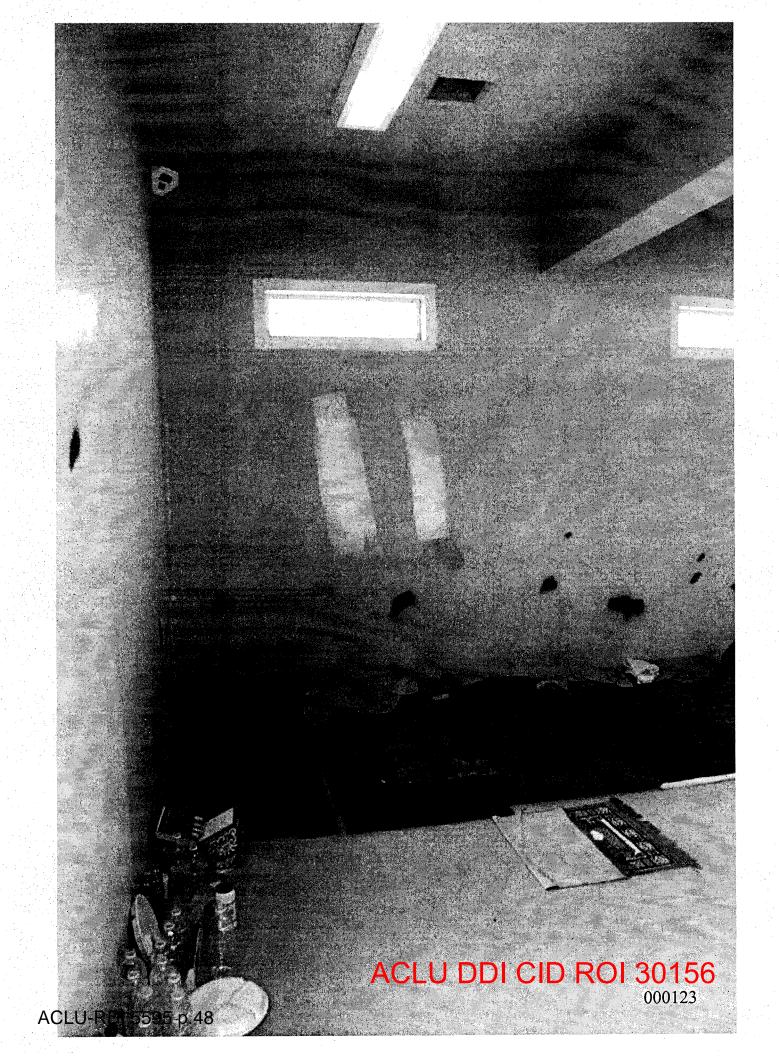




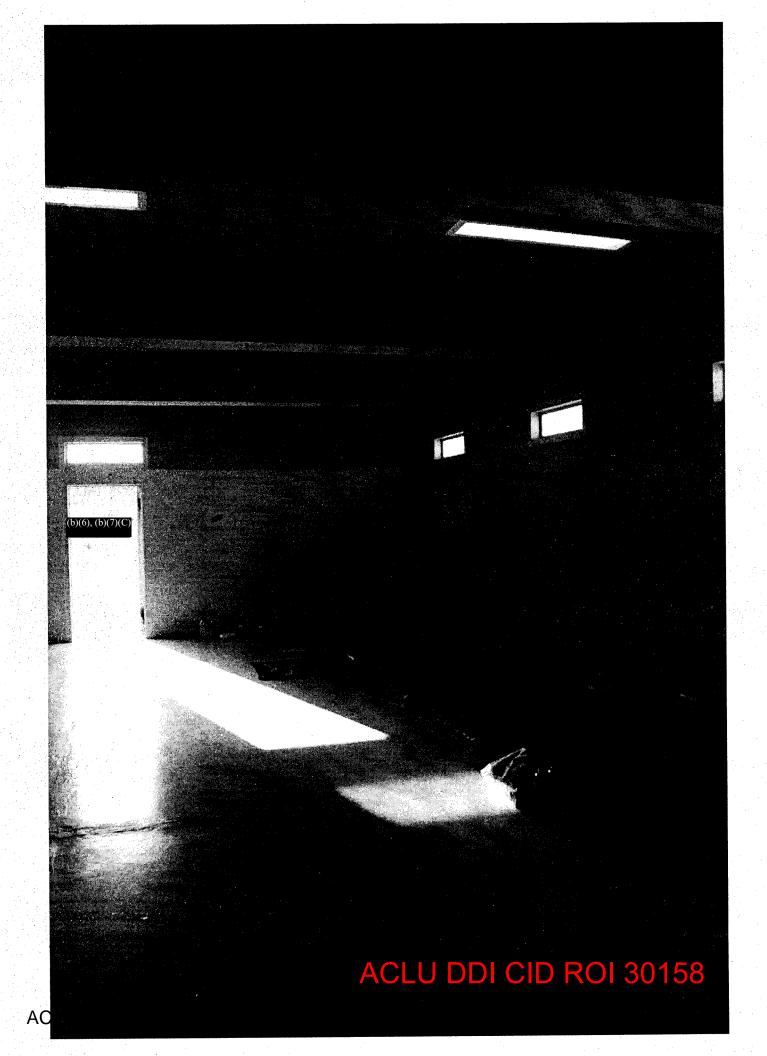






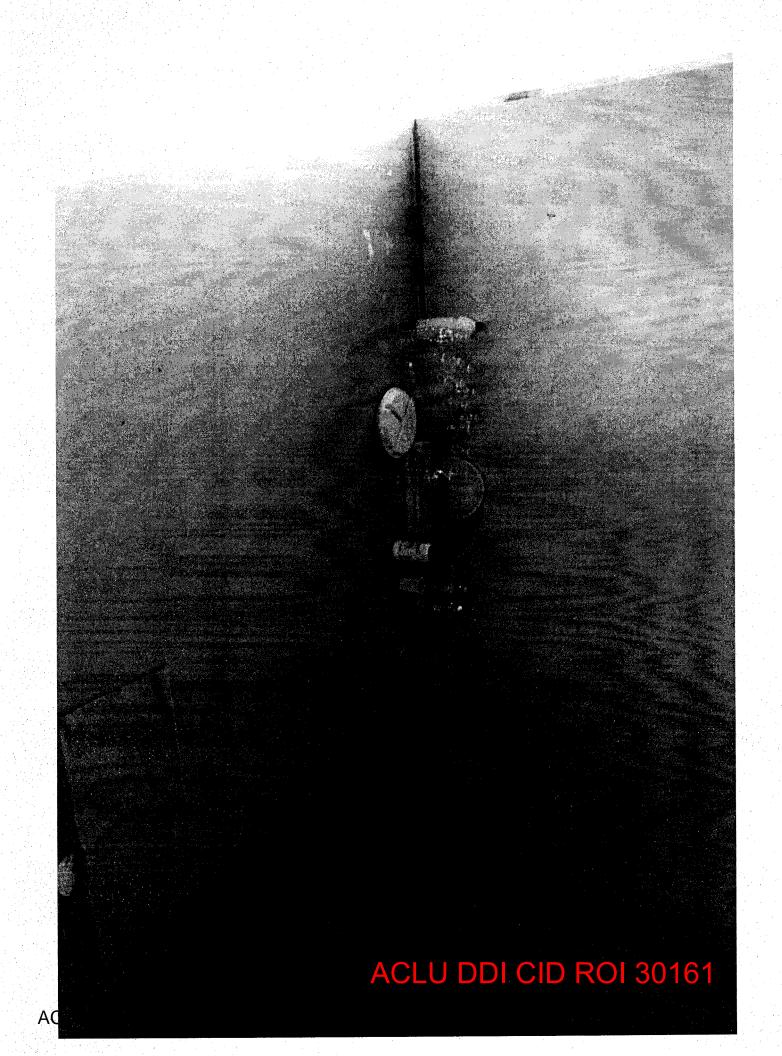


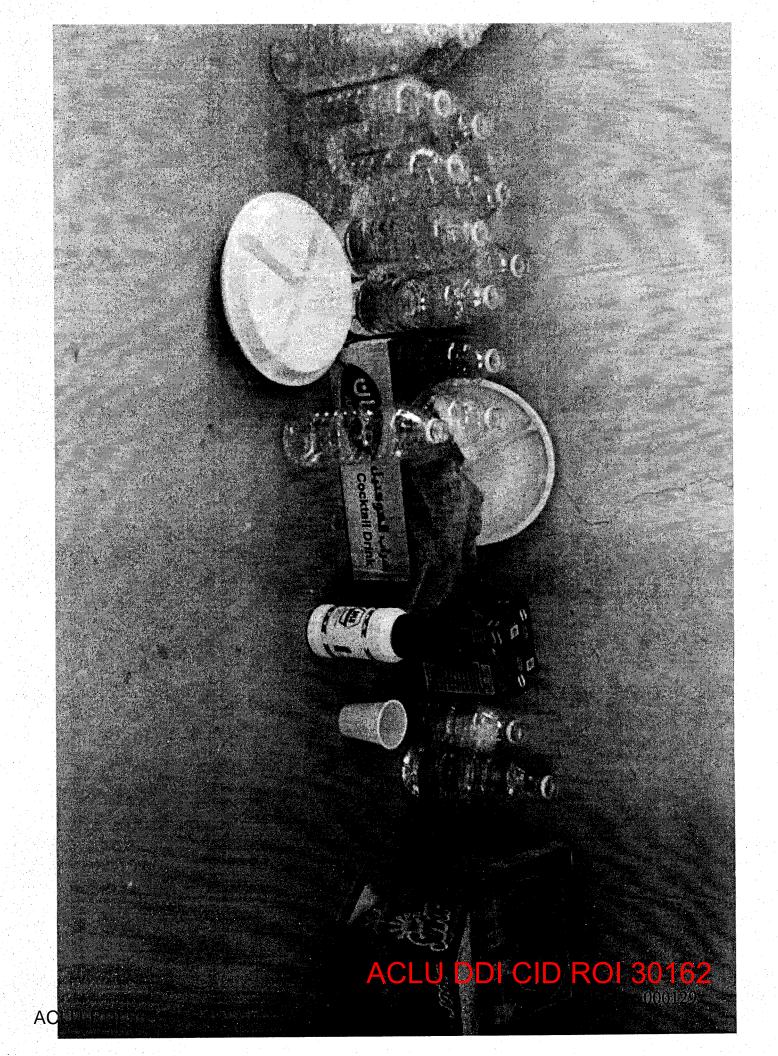


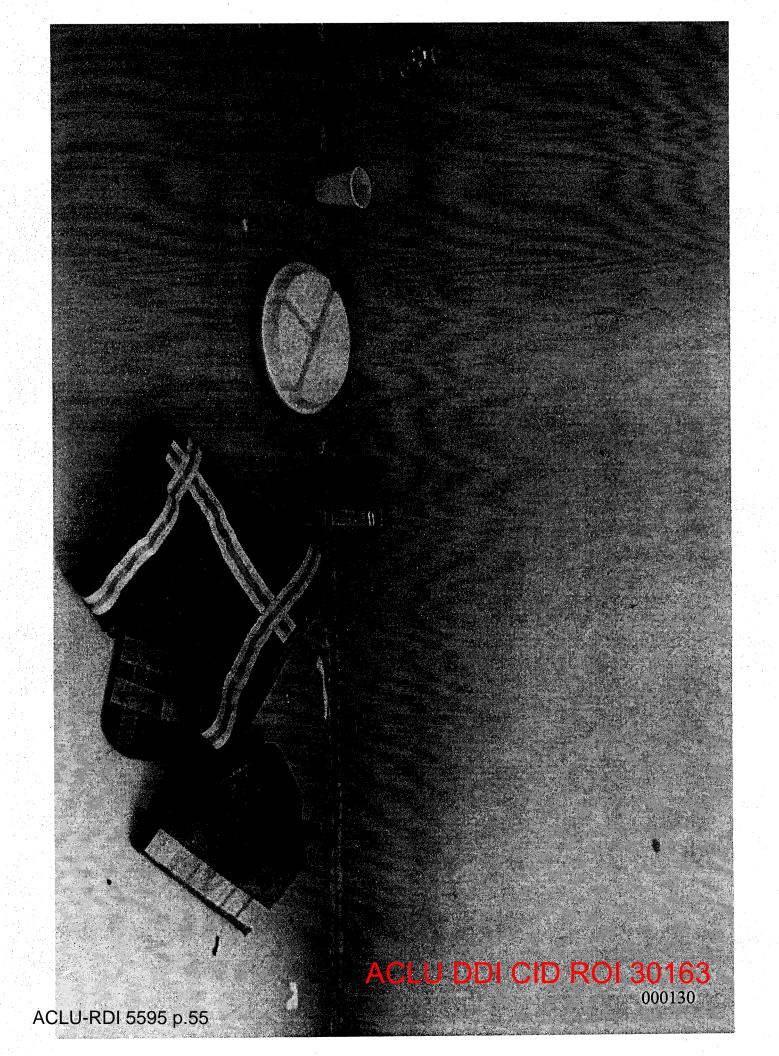




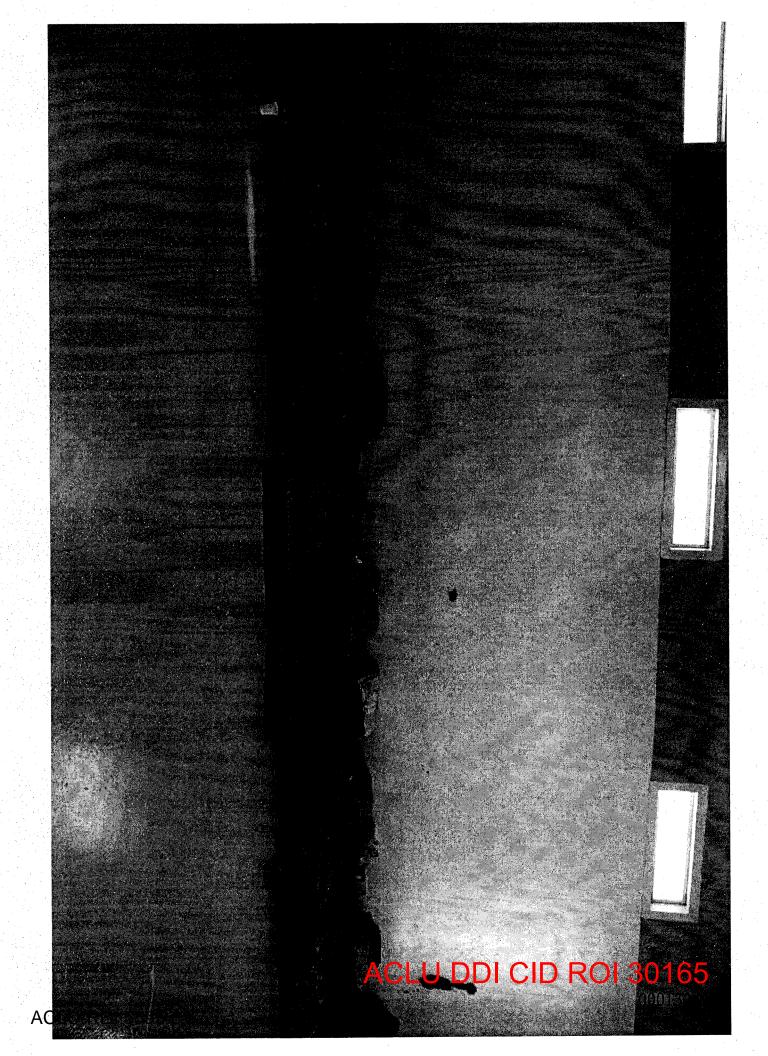


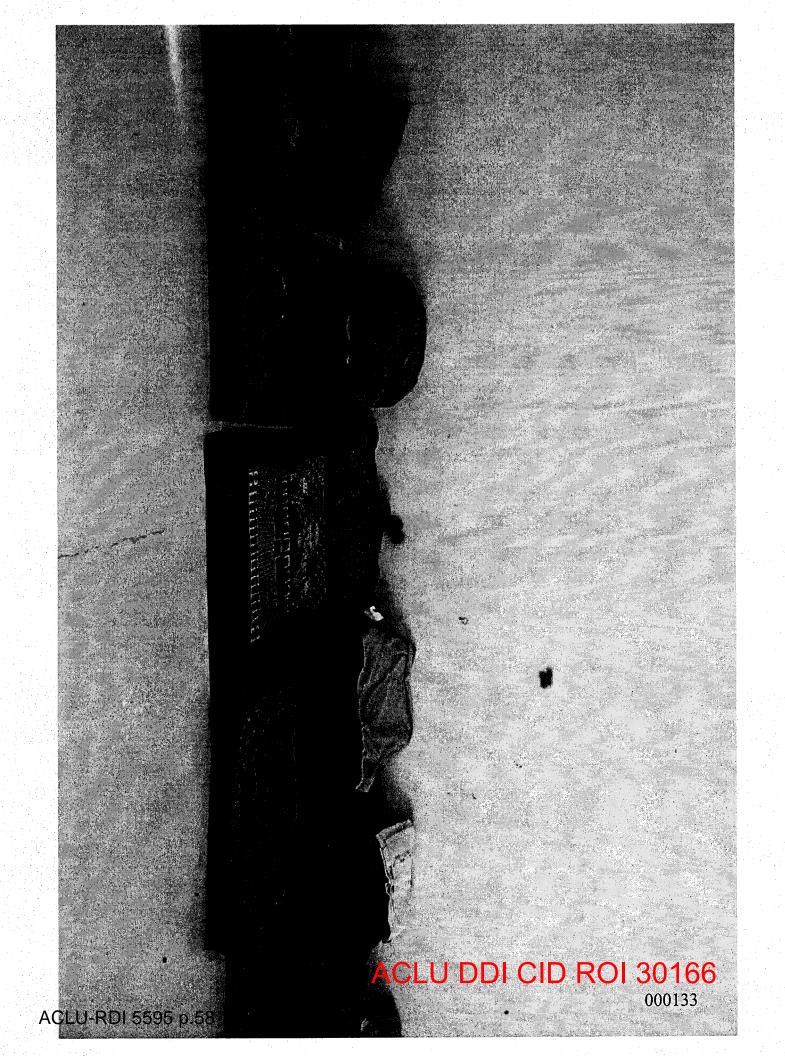


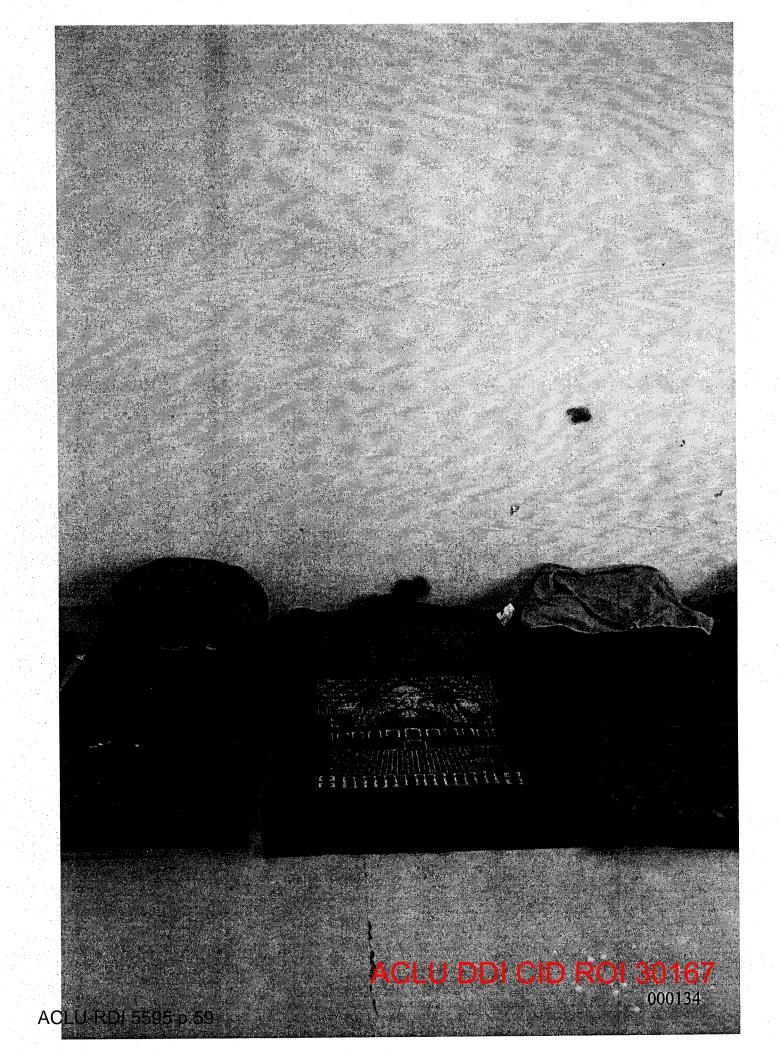




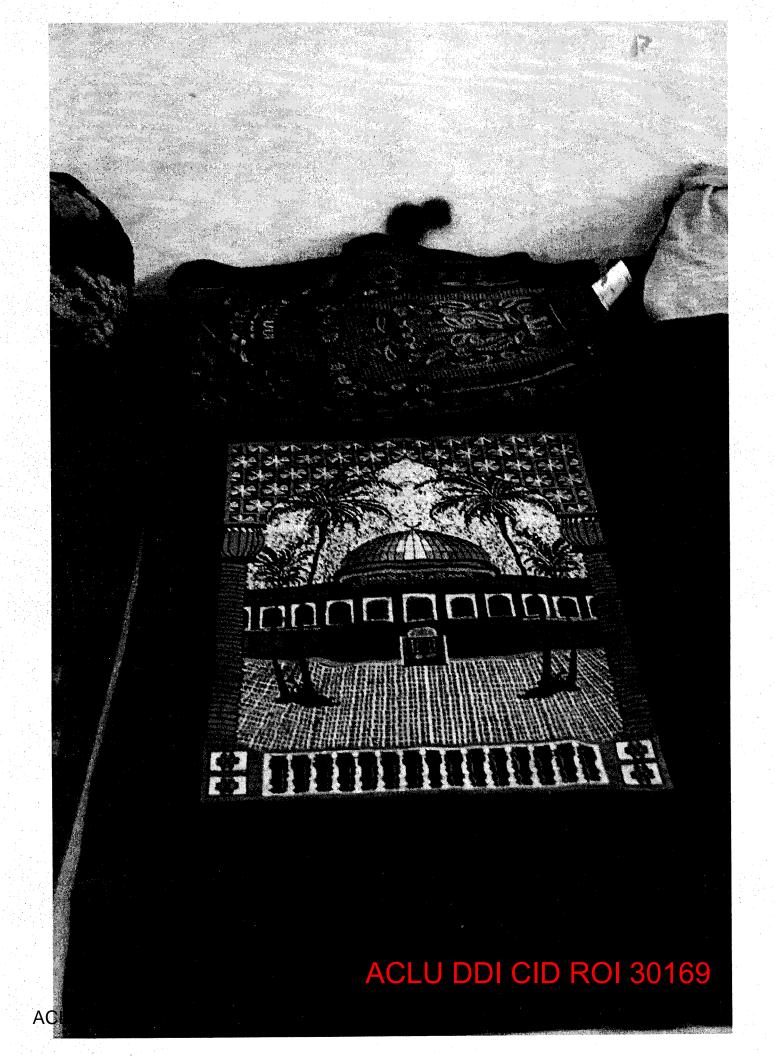
ACLU DDI CID ROI 30164 ACLU-RDI 5595 p.56

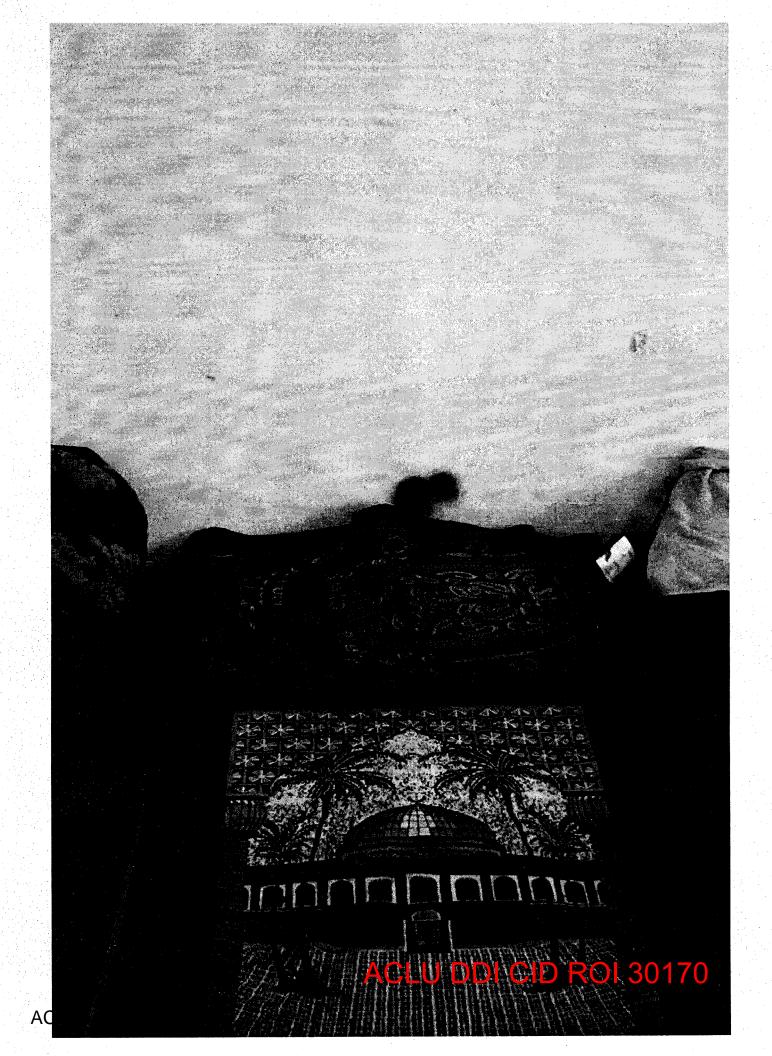


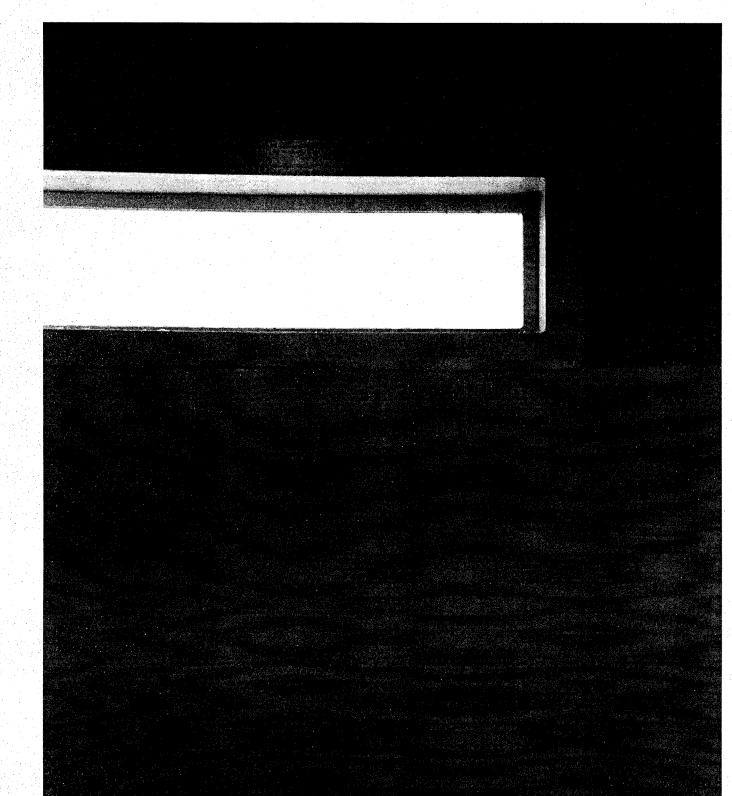


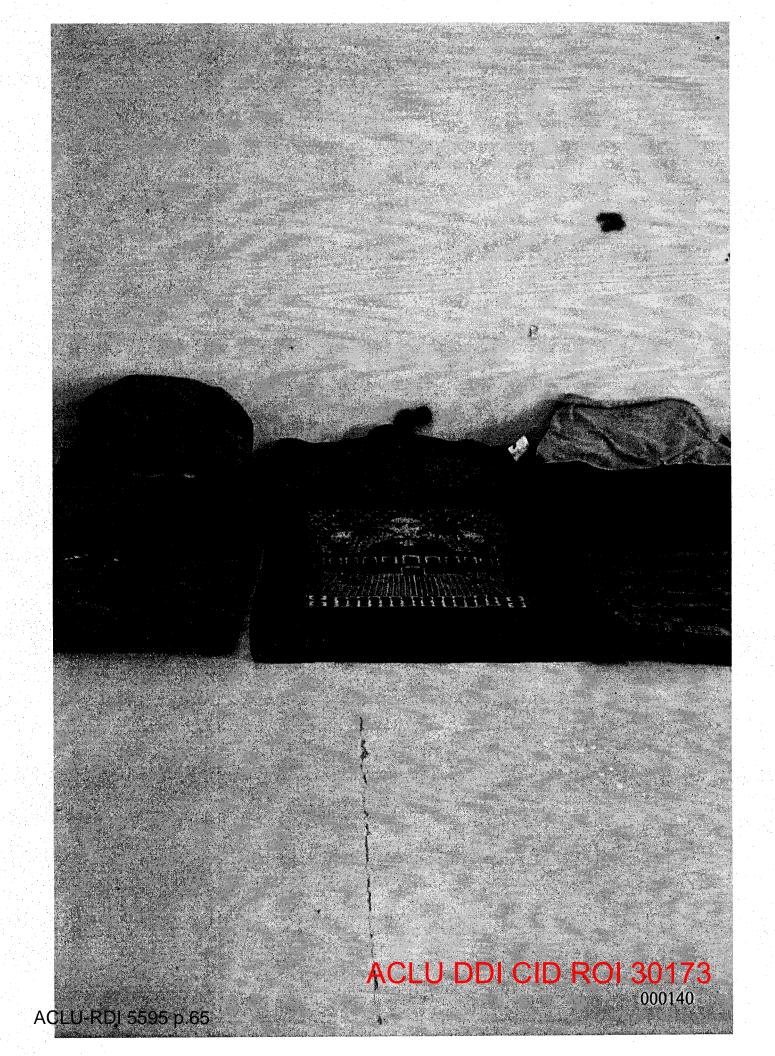


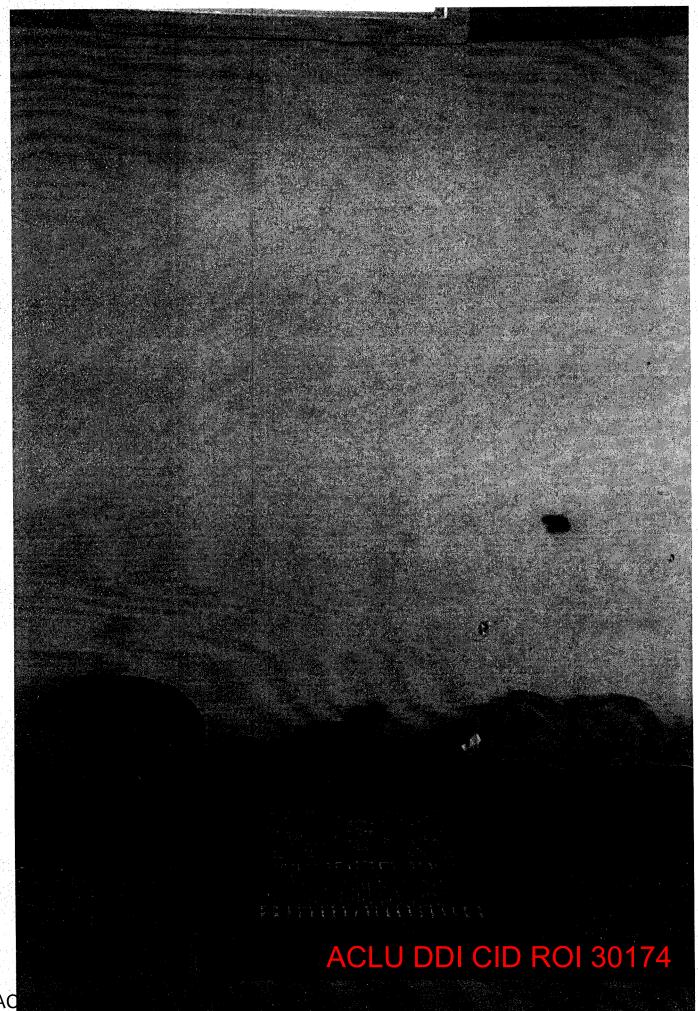


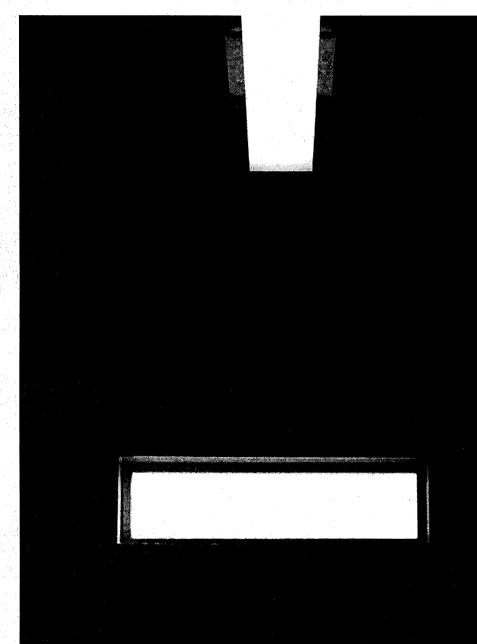














ROI NUMBER 0036-08-CID789-53216 AGENT'S INVESTIGATION REPORT CID Regulation 195-1 PAGE 1 OF 4 PAGE About 1510, 14 Dec 08, SA b(6), b(7)(C) with the assistance of Mr. b(6), b(7)(C) conducted canvass interviews of the following detainees identified as those who carried Mr. HASHIM to the sally port within Compound 1D: -Mr. b(6), b(7)(C) ISN USb(6), b(7)(C)CI: Stated he slept in Building 4, but was awaken when the lights came on around 0400, 14 Dec 08, and heard Mr. HASHIM beating his feet against the floor. Mr b(6), b(7)(C) stated people kept asking Mr. HASHIM what was wrong, but he kept gasping for air. Mr. (6), b(7)(C) stated he went and told the zone representative and came back to find that Mr. HASHIM was still unable to breathe. -Mr. b(6), b(7)(C) ISN USb(6), b(7)(C)CI: Stated he slept in Building 4 and was awaken after the lights came on and he heard very loud breathing, at which time everybody woke up and saw Mr. HASHIM gasping for air. Mr. b(6), b(7)(C) stated he tried to move Mr. HASHIM's body and message his chest. -Mr. b(6), b(7)(C) ISN USb(6), b(7)(C)CI: Stated he slept in Building 4 and awoke when he heard Mr. HASHIM breathing very loudly. Mr. b(6), b(7)(C) stated he helped carry Mr. HASHIM to the sally port for medical attention. -Mr. b(6), b(7)(C) ISN USb(6), b(7)(C) CI: Stated he slept in Building 4 and awoke when he heard Mr. HASHIM breathing loudly. Mr. b(6), b(7)(C) stated Mr. HASHIM began to beat his feet against the ground very hard and loud, and began gasping for air. Mr. b(6), b(7)(C) stated he helped carry Mr. HASHIM out to the sally port for medical attention. -Mr. b(6), b(7)(C)ISN USb(6), b(7)(C)-CI: Stated he slept in Building 4 and awoke when he heard Mr. HASHIM beating his feet on the ground and gasping for air. Mr. b(6), b(7)(C) stated he helped carry Mr. HASHIM to the sally port for medical attention. -Mr. b(6), b(7)(C) ISN USb(6), b(7)(C) CI: Stated he slept in Building 4 to the immediate right of Mr. HASHIM, and awoke when he heard Mr. HASHIM gasping for air. Mr b(6), b(7)(C) said he looked and saw that Mr. HASHIM was suffocating as he had his hands clutched around his throat. Mr. b(6), b(7)(C) stated he helped carry Mr. HASHIM out to the sally port for medical attention. -Mr.b(6), b(7)(C) ISN USb(6), b(7)(C)CI: Stated he slept in Building 4 to the immediate left of Mr. HASHIM, and awoke when he heard Mr. HASHIM beating his feet loudly on the ground. Mrb(6), b(7)(C) stated he helped cover Mr. HASHIM in his blanket and carry him to the sally port for medical attention. About 1600, 14 Dec 08, SAb(6), b(7)(C) coordinated with Mr. b(6), b(7)(C) ISN USb(6), b(7)(C) CI, who provided a handwritten list of detainees that slept in Building 4 the night Mr. HASHIM fell ill. The list consisted of the following ISN numbers: About 1610, 14 Dec 08, SA b(6), b(7)(C) coordinated with CPT b(6), b(7)(C) 115th CSH, who stated she coordinated with all staff that was present and assisted with Mr. HASHIM's treatment, but no one knew the whereabouts of Mr. HASHIM's clothes or blanket he was brought in with. CPT TYPED AGENT'S NAME AND SEQUENCE NUMBER ORGANIZATION 24th/348th MP DET (CID) SA(b)(6), (b)(7)(C), (b)(7)(F)Camp Cropper, Iraq APO AE 09342

EXHIBIT

000144

2 Dec 08

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CID FORM 94

AGENT'S INVESTIGATION REPORT

ROI NUMBER

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CID Regulation 195-1

PAGE 2 OF 4 PAGE

b(6), b(7)(C) assumed somebody came in after Mr. HISHAM was pronounced deceased and collected/disposed of them, but did not know who or when it was done.

About 2136, 14 Dec 08, SA b(6), b(7)(C) dispatched a Request For Assistance (RFA) to the Aberdeen Proving Grounds CID Office, and requested they attend the autopsy of Mr. HASHIM, obtain fingerprints and photographs, and interview the doctor.

About 0243, 15 Dec 08, SA b(6), b(7)(C) interviewed SGT b(6), b(7)(C) who provided a Sworn Statement wherein she described her actions after detainees in Compound 1D informed her that Mr. HASHIM was unresponsive.

About 0307, 15 Dec 08, SA b(6), b(7)(C) coordinated with SFC b(6), b(7)(C) DOC NCOIC, 519th MP Bn, Camp Cropper, IZ, and collected as evidence one DVD containing video footage recorded from the camera within Building 4 of Compound 1D, during Mr. HASHIM's medical emergency.

About 0322, 15 Dec 08, SA b(6), b(7)(C) coordinated with PFC b(6), b(7)(C) Medic, IHA, Camp Cropper, IZ, who stated SPC b(6), b(7)(C) and PFC b(6), b(7)(C) were the medics sent to evaluate and render aid to Mr. HASHIM in Compound 1D. PFC b(6), b(7)(C) stated she was present when PFC b(6), b(7)(C) took the call from the ER instructing them to go to Compound 1D and evaluate Mr. HASHIM. The call came into the IHA Medical at 0415, and reported that a detainee was experiencing chest pains, shortness of breath, and was unconscious at the time. PFC b(6), b(7)(C) stated SPC b(6), b(7)(C) and PFC b(6), b(7)(C) left immediately and were on scene administering aid at 0422. PFC b(6), b(7)(C) stated the procedure for getting medics to the compounds to evaluate detainees when they present with a medical condition is lengthy; guards notify their respective CP, who notifies Detainee Operations, who notifies the ER, who then dispatches the medics from within the TIF. PFC b(6), b(7)(C) further stated SPC b(6), b(7)(C) and PFC b(6), b(7)(C) were currently scheduled off work, and would not return until the evening of 15 Dec 08.

About 0400, 15 Dec 08, SAb(6), b(7)(C) coordinated with PAD, 115th CSH, and obtained medical records specific to Mr. HASHIM's emergency treatment 14 Dec 08.

About 0420, 15 Dec 08, SA b(6), b(7)(C) reviewed video footage from the DVD collected as evidence and noted the following:

The quality of the video is very poor, making it impossible to see faces of individuals or identify detainees present. The video is not recorded in real time and presents a delay between frames, and based on the time line provided by all witnesses and medical staff, the time stamp on the video appears to be fast.

TYPED AGENT'S NAME AND SEQUENCE NUMBER

ORGANIZATION

24th/348th MP DET (CID)

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

Camp Cropper, Iraq APO AE 09342

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

22 Dec 08

1.30178

CID FORM 94

FOR OFFICIAL USE ONLY-LAW ENFORCEMENT SENSITIVE

000145

AGENT'S INVESTIGATION REPORT

0036-08-CID789-53216

ROI NUMBER

CID Regulation 195-1

PAGE 3 OF 4 PAGE

DETAILS

04:18:13-Movement can be seen in the area of where Mr. HASHIM allegedly slept.

04:18:33-An unidentified detainee walks over to the area where Mr. HASHIM allegedly slept, and appears to bend over.

04:18:38-The detainees not already up and moving suddenly began to sit up and move around.

04:18:45-More detainees gather around the area where Mr. HASHIM allegedly slept.

04:23:34-Several detainees appear to pick up a detainee from the area where Mr. HASHIM allegedly slept, and carry him out of the building.

It did not appear that any of the detainees had violent contact with the detainee carried out; however, due to the unclear and choppy video, it is impossible to determine exactly what actions were taken by the detainees within Building 4.

About 0510, 15 Dec 08, SA b(6), b(7)(C) copied the video from the DVD collected as evidence, onto a CD that was added to the case file.

About 0655, 15 Dec 08, SA b(6), b(7)(C) interviewed SPC b(6), b(7)(C) 115th CSH, Camp Cropper, IZ, who stated he and PFC b(6), b(7)(C) 115th CSH, Camp Cropper, IZ, received a call from the ER at 0415, 14 Dec 08, instructing them to go to Compound 1 and evaluate a detainee that was complaining of chest pains and shortness of breath. SPC b(6), b(7)(C) stated that as he and PFC b(6), b(7)(C) were approaching Compound 1, a guard came out and told them to hurry up, that it was serious. SPC b(6), b(7)(C) stated he and PFC b(6), b(7)(C) then began running. They arrived on scene at Compound 1 and evaluated the detainee. They were unable to locate a pulse manually or with a pulse oxygen sensor. At that point, CPR was initiated and continued, even after the ambulance arrived, approximately 10-15 minutes after SPC b(6), b(7)(C) and PFC b(6), b(7)(C) Once in the ambulance, SPC b(6), b(7)(C) and PFC b(6), b(7)(C) continued CPR and shocked the patient one time with an Automatic External Defibrillator. SPC b(6), b(7)(C) stated they arrived at the CSH, at which point life saving efforts continued by the ER staff.

About 0712, 15 Dec 05, SA b(6), b(7)(C) interviewed PFC b(6), b(7)(C) who stated he received the call from a Specialist in the ER at about 0415, 14 Dec 08. PFC b(6), b(7)(C) stated the caller was a male Specialist that instructed them to have medics from the IHA go to Compound 1 and evaluate a detainee. PFC b(6), b(7)(C) stated he and SPC b(6), b(7)(C) arrived on scene at 0422, 14 Dec 08, and began assessing the patient. PFC b(6), b(7)(C) arrived on scene at 0422, 14 Dec 08, and began assessing the patient. PFC b(6), b(7)(C) were unable to identify any signs of life from the patient, at which point CPR was initiated and continued during transport, until life saving efforts were assumed by the ER staff.

About 0910, 17 Dec 08, SA b(6), b(7)(C) with the assistance of Ms. b(6), b(7)(C) interviewed Mr. b(6), b(7)(C) CI, who stated he did not sleep in Building 4 the night Mr. HASHIM died, but rather slept in Building 5. Mr. b(6), b(7)(C) stated he shortly after the lights came on, a detainee came into his building and awoke him. Mr. b(6), b(7)(C) lid not recall which detainee awoke him, but stated the detainee informed him of Mr.

TYPED AGENT'S NAME AND SEQUENCE NUMBER

ORGANIZATION

24th/348th MP DET (CID)

Camp Cropper, Iraq APO AE 09342

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

22 Dec 08

DOI 00017

Y-I AW ENFORCEMENT SENSITIVE

000146

(Automated)

ACLU-RDI 5595 p.71

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AGENT'S INVESTIGATION REPORT

ROI NUMBER

0036-08-CID789-53216

CID Regulation 195-1

PAGE 4 OF 4 PAGE

DETAILS

HASHIM's medical emergency. Mr. [516], 517)(C) stated when he went outside to check on Mr. HASHIM, Mr. HASHIM was already outside of the compound being treated by the American Guards.

About 1042, 17 Dec 08, SAb(6), b(7)(C) with the assistance of Ms. b(6), b(7)(C) interviewed Mr. b(6), b(7)(C)CI, who provided a Sworn Statement wherein he described Mr. HASHIM's medical emergency, and the actions within the building that followed.

About 1130, 17 Dec 08, SA b(6), b(7)(C) with the assistance of Ms. b(6), b(7)(C) interviewed Mr. b(6), b(7)(C) USb(6), b(7)(C) CI, who provided a Sworn Statement wherein he described Mr. HASHIM's medical emergency, and the actions within the building that followed.

About 1025, 19 Dec 08, SAb(6), b(7)(C) interviewed SGT b(6), b(7)(C) who provided a Sworn Statement wherein he described his actions on scene and the life saving measures he performed on Mr. HASHIM.

About 2000, 22 Dec 08, SA b(6), b(7)(C) received the Final Information Report from SA b(6), b(7)(C) Aberdeen Proving Ground Resident Agency, Aberdeen Proving Ground, MD 21005, detailing the conduct of the Autopsy examination of Mr. HASHIM's remains, and pending cause and manner of death. ///Last Entry///

TYPED AGENT'S NAME AND SEQUENCE NUMBER

ORGANIZATION

24th/348th MP DET (CID)

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

Camp Cropper, Iraq APO AE 09342

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

22 Dec 08

DOI 08404

CID FORM 94

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000147

FOR OFFICIAL USE ONLY - LAW ENFORCEMENT SENSITIVE

CANVASS INTERVIEW WORKSHEET

PREPARED BY b(6), b(7)(C) DATE W DECOY FILE # 0030 08-010789-

$\text{NAME}_{\underline{b}(0), b(7)(0)} b(6), b(7)(C) \underline{u_{\text{NIT}}}$
DOB PHONE ADDRESS ADDRESS
ADDRESS_
TIME/REMARKS 5/ept in SLDG 4. Said Mr. Hashim was a very vice any
liked by everyone. When the lights came on, I heard mr. Harring bearing
his feel on the ground. People kept asking what was wrong but he was
despine for all' Thosa he spire and from pack but Mr. Hashim was ptill ma
NAME $b(6), b(7)(C)$ $b(6), b(7)(C)$ UNIT
SSNDOBPHONE
SSNDOBPHONEADDRESS
TIME/REMARKS Sligh in SUC- 4. When the light came on his heard some
food breathing. Everybody works up and we saw Mr. Hashim will garping
world for madies to arrive breated were though the stooged to work the
good useith. Said he suffered waiting to the released.
b(6), b(7)(C)
ADDRESS PHONE
TIMEREMARKS stept in BIDGA awake when they heard her. Hashim browthing landing we took nim to sally Port and told chief. whiled for medic
loudy, we took win to sally Port and told chief, whiled for medic
and him took him outside.
$_{\text{NAME}}^{\text{b(6), b(7)(C)}} b(6), b(7)(C)$ unit
SSNDOB PHONE
ADDRESS PHONE
TIMEREMARKS Slept in Block, awoke when they head someone broadlying seeigloudly.
Mr. Hashim began to beat mys feet on the loss were hard land loud.
beard him grap to an A times. He wastated out and medies were called
b(6), b(7)(C)) (-(7)(C)
SSN DOB PHONE
SOL DOB PHONE
his lest on the Stock and assert louds he heard he fashion beat
The state of the s
anticle and to be the Chief- they caped the hidies
5/291 WAT TO WIM DDI CID ROI 30181
EOD OFFICE COLD INCIDIO FOR COLD INCIDIO
FOR OFFICIAL USE ONLY (b(6), b(7)(C)

FOR OFFICIAL USE ONLY - LAW ENFORCEMENT SENSITIVE

CANVASS INTERVIEW WORKSHEET

PREPARED BY b(6), b(7)(C) DATE W DEC OF FILE # COSU OF CIDITY -

NAME_(b(6), b(7)(C)	3(0), 5(1)(0)	UNIT	
SSN	DOB	PHONE	
ADDRESS			
TIME/REMARKS	Stroll In BLOCK On	the right side of Mr.	Hashim, Heard
Gersbing lond	y locals. I looked	and saw he was suffer	ating-he was c
around his	throat. Thy took 1	sim outside and called 1	or medic
b(6) b(7)(C)	<i>\</i>		
NAME (b(6), b(7)(C)	b(6), b(7)(C	UNIT	
SSN	DOB	PHONE	
ADDRESS Shept	in BLOG A next to	Mr. Nashim on Left sid	e, anohe when
TIME/REMARKS		ng for breath hids	
his Peet 10	oudly. We courted	Who with a blanke	Ward took h
40 Hz C	sell's Bolt.		
	3		
		UNIT	
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FOR OFFICIAL USE ONLY

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is PMG.

p	RIV	/Δ	CY	ACT	STA	TER	JENT

AUTHORITY:

Title 10 USC Section 301; Title 5 USC Section 2951; E.O. 9397 dated November 22, 1943 (SSN)

PRINCIPAL PURPOSE:

To provide commanders and law enforcement officials with means by which information may be accurately identified

ROUTINE USES:

Your social security number is used as an additional/alternate means of identification to facilitate filing and retrieval.

DISCLOSURE:

Disclosure of your social security number is voluntary

1. LOCATION

DATE (YYYYMMD)) b(6), b(7)(0

4. FILE NUMBER

TIF, Camp Cropper, Iraq APO AE 09342

2008/12/15 6. SSN 2.43

7. GRADE/STATUS

19-5 / NG

5. LAST NAME, FIRST NAME, MIDDLE NAME b(6), b(7)(C)

B Co, 112th FIRES Bn, Camp Cropper, Iraq APO AE 09342

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

, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH

About 0410, 14 Dec 08, I was out on D Zone getting the detainees ready for there appointments. While I was trying to get the detainees ready, one of the english speaking detainees came out and told me that one of the detainees was unresponsive. I told him to bring the detainee out to the sally port, and immediately called the CP and requested a medic. About 4 or 5 detainees carried the unresponsive detainee out and put him in the sally port, then called the CP again to verify that medics were notified. I was told that medics were notified and enroute. A Soldier and ICO went into the sally port to pull the detainee out, but it was actually the ICO and detainees that pulled the unresponsive detainee out. After the detainee was put on the ground, I told the english speaking detainee to ask the unresponsive detainee what his name was. When the detainee didn't respond, I again called to check the status of the medics. The CP told me that medics were notified and that they were told that the detainee was unresponsive and not breathing. SG1 (6), b(7)(C) and SG1 came over and assessed the detainee. When they found that he wasn't breathing, they began doing rescue breathing until the medics arrived.

- Q: SA b(6), b(7)(C)
- $A = SG \cap b(6), b(7)(C)$
- Q: How long have you been the zone rep for Delta zone?
- A: A month and a half.
- Q: During your time as the zone rep, do you recall any incidences with this particular detainee?
- A: No.
- Q: Has this detainee ever complained about medical issues to you?
- A: No.
- Q: Have you ever spoken with this detainee?
- A. No.
- Q: Have you ever had a situation like this happen to you in the past?
- A: No, not fall ill like that.
- Q. Did any of the detainees actions strike you as odd or suspicious after this detainee was removed from the Compound?
- A: No:
- Q. What time do you normally turn on the lights for wake-up?
- A. 0400.
- Q: Is that what time you turned the lights on the morning of 14 Dec 08?
- A: Yes.
- Q: What time do the detainees normally start coming out after you turn on the lights?
- A: They are always out. Those who are out before the lights come on wear a vest, but if they don't have a vest on, they can't come out until the lights are turned on.
- Q: Do you remember any of the medical personnel that responded?
- A: I have seen them before, but I dont know their names
- Q: How long did the medies treat the detainee on scene before they transported him?
- A: For a while. It had to be about 10 minutes. They kept working until the ambulance arrived
- O flow long did it take for medics to arrive on the scene after the detained was pulled out of the Compound?
- A: Like 10-15 minutes.
- Q. Have you ever had to call medies for a medical emergency with a detainee?
- A: Yes. A detainee didn't receive his insulin and started feeling light headed.
- Q: Do you know how long it took for medics to respond to that incident?
- A: About 5-10 minutes.
- Q: Does 5-10 seem like a normal response time for the medics to take to respond to a medical emergency?
- A: No, not since they are just on the other side of the TIF.

10. EXHIBIT	11. INITIALS	DE PERSON MAKING b(6), b(7)(C)	STATEMENT	PAGE 1 OF	PAGES
ADDITIONAL PAGES MUST CONTAIN THE HEADING "ST	FATEMENT OF	TAKEN AT	DATED		

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT. AND PAGE NUMBER

DA FORM 2823, DEC 1998

MUST BE BE INDICATED

DA FORM 2 JUL 72 S DB OUT C D RO 3018

FOR OFFICIAL USE ONLY LAW ENFORCEMENT SENSITIVE

EXMPA14

STATEMENT (Continued) De you have anything else you would like in add to this statement? No. #/END OF STATEMENT// BOS BOT (O) AFFIDAVIT	Do you have anything clse you would like to add to this statement? D(6), D(7)(C)	opper, Iraq DATED	2008/12/15
ACCIONALY.	WHICH BEGINS ON PAGE 1. AND ENDS ON PAGE 2 I FULLY UNDERSTAND THE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HO THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE. WITNESSES: Subscribed an administer oaths d'amp Cropt ORGANIZATION OR ADDRESS SA (D)(G). (1)		
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HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT	WHICH BEGINS ON PAGE 1. AND ENDS ON PAGE 2 . I FULLY UNDERSTAND THE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE IN CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE. WITNESSES: Subscribed and administer oaths Camp Cropp ORGANIZATION OR ADDRESS SA (b)(6), (17)	HAVE HAD DEAD TO A	AT THE OTATEMENT
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CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD. WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE. b(6), b(7)(C) WITNESSES: Subscribed and sworn to before me, a person authorized by law to administer oaths, this 15th day of December 2008 The administer oaths, this 15th day of December 2008 The administer oaths are compared to the compared t	W. L. W. A. COMP. A. C.	10 USC 936 (Authority To Adminis	ter Oaths)
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PAGE 3, DA FORM 2823, DEC 1998

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LAW ENFORCEMENT SENSITIVE

HEALTH RECORD

CHRONOLOGICAL RECORD OF

DICAL CARE

0036-08-CID 789-53216

Patient: DETAINEE, 900301026 Facility: TF 115th CSH (NORTH) (WBH6A1)

Date: 14 Dec 2008 0640 AST Clinic: CROPPER HOSPITAL Appt Type: ROUTN Provider: (b)(6)

Co-signer: (b)(6)

AutoCites Refreshed by @ 14 Dec 2008 0641 AST Problems

GENITAL ULCERS - MALE nasal passage blockage (stuffiness) An allergy

Active Medications No Active Medications Found. Allergies No Allergies Found.

Screening Written b

@ 14 Dec 2008 0640 AST

Appointment Reason For Visit: CHEST PAIN;

Selected Reason(s) For Visit: CHEST PAIN (New) Comments:

AP Written by (b)(6)

@ 14 Dec 2008 0644 AST

. CHEST PAIN

Comments: call came into the iha at 0415 hrs (b)(6) responded at 0422, upon arrival pt was unresponsive without both began administering cpr and called for evac to er. (b)(6) pulse and without breathing. (b)(6) also accompanied to the er and continued cpr as well as applied aed.

Disposition Written by

@ 14 Dec 2008 0645 AST

Released Without Limitations

Injury & Illness: Not Work Related; Not Battle Related; Category: All Other, Medical/Surgical Cause: Non-Battle Illness

Appointment Class: Outpatient

E&M Code: 99211 - Established Outpatient Minimal Service

Signed By (b)(6) @ 14 Dec 2008:0645 AST TF 115th CSH (NORTH) (WBH6A1)

Name: DETAINEE, 900301026

FMP/SSN: 20/900301026

DOB:

PCat:

MC Status:

Insurance: No

03 Jun 1980 K78 FOREIGN

NATIONAL-POW/INTERNEE

WS:

Sex:

Tel H:

Tel W:

Sponsor:

PCM:

Rank Unit:

Outpt Rec. Rm:

Tel. PCM:

DETAINEE, 900301026

CHRONOLOGICAL RECORD OF MEDICAL CARE

STANDARD FORM 600 (REV. 5) Prescribed by GSA and ICMR

THIS INFORMATION IS PROTECTED BY THE PRIVACY ACT OF 1914-PL-93-579, ON AUTHORIZADA CCESS U

LAW ENFORCEMENT SENSITIVE

JICAL CARE

0036-08-00789-53216

Patient: DETAINEE, 900301026 Facility: TF 115th CSH (NORTH)

(WBH6A1)

Date: 14 Dec 2008 0746 AST Clinic: CROPPER HOSPITAL

Appt Type: ROUTN Provider: (b)(6)

AutoCites Refreshed by @ 14 Dec 2008 0824 AST

Problems

GENITAL ULCERS - MALE

nasal passage blockage (stuffiness)

An allergy

Active Medications

No Active Medications Found.

Allergies

Patient has no known allergies

Screening Written by

@ 14 Dec 2008 0746 AST

Appointment Reason For Visit: Other: [Use For Free Text]:

Selected Reason(s) For Visit:

Other: [Use For Free Text] (New) Comments: not breathing

Vitals Written by (b)(6)

@ 14 Dec 2008 0806 GST

Comments: Pt arrived with pulse and CPR in progress.

S/O Note Written by (b)(6)

2 14 Dec 2008 0722 AST

History of present illness

The Patient is a 28 year old male.

MP's called the ED at 0415, notified ED that a detainee was complaining of shortness of breath, chest pain, and had a possible LOC. At 0416, IHA was called to have a medic evaluate patient. At approx. 420, the medic called the ED and said the patient was not breathing. An ambulance was dispatched. CPR was initiated, and 1 shock from an AED was delivered. Pt arrived at approx. 0440. CPR was continued, pt was ventilated with a bag valve mask, and IV access was obtained. Pt was intubated with a 7.5 ETT, tube placement was confirmed with direct visualization, capnometry, and auscultation. Pt recieved a total of Epinephrine 1mg x 7, Atropine 1mg x 3, Calcium Chloride x 3, Bicarb x 3, Narcan 2mg x 1, Lidocaine bolus and lidocaine gtt. Pt had multiple rhythm changes. Pt changed from ventricular fibrillation, which he recieved 6 shocks. Pt also changed between PEA, bradycardia, and asystole. Pt eventually remained asystolic. No cardiac activity obtained from ultrasound. Time of death 0602. Physical findings

General appearance:

General appearance: Unresponsive.

Eyes:

General/bilateral:

Eyes: fixed 9mm.

Lungs:

Lungs: Apneic. Lungs CTA with auscultation.

Cardiovascular system:

Cardiovascular system:

AP Written by (b)(6)

@ 14 Dec 2008 0722 AST

1. CARDIAC ARREST

Comments:

Name: DETAINEE, 900301026

Sex:

Sponsor:

DETAINEE, 900301026

DOB:

FMP/SSN: 20/900301026

Tel H: Tel W:

Rank: Unit:

Outpt Rec. Rm:

PCat:

K78 FOREIGN NATIONAL-POW/INTERNEE

03 Jun 1980

CS:

PCM:

MC Status: Insurance: No WS:

Tel. PCM:

CHRONOLOGICAL RECORD OF MEDICAL CARE

STANDARD FORM 600 (REV. 5) Prescribed by GSA and ICMR

F RMB(4TCPR) (0-45)505

TO THIS INFORMATION IS A WOOKFION PETERFALL USE VONTORS WILL BE PROSECUTED. 000154

Page 1 of 2

ACLU-RDI 5595 p.78

LAW ENFORCEMENT SENSITIVE

Facility: TF 115 CSH (NORTH) (WBH6A1)

Clinic: CROPPER HC32ITAL Provider: schwab, harold

Disposition Written by (b)(6)

@ 14 Dec 2008 0723 AST

0036-08-CID 789-53216

Expired

Injury & Illness: Not Work Related; Not Battle Related; Category: All Other, Medical/Surgical Cause: Non-Battle Illness

Appointment Class: Outpatient

E&M Code: 99212 - Estab Outpatient Focused H&P - Straightforward Decisions

Note Written by (b)(6)

@ 14 Dec 2008 0745 AST

Nurse Note

Recieved PT Emergent from comp1. CPR in progress and AED. Pt placed in Trauma bed 1 IV 1g to Right AC started first attempt. PT placed on monitor. CPR continued ambu bag for resp. PTintubated first attempt by (b)(6) Positive placement verification of tube placement. 2nd 18g started to Left AC. Rescusitation drugs given as per MD order and documented above. Time of death called at 0602. Protocol for deceased started at 0603 after PAD made aware.

Signed By (b)(6)

@ 14 Dec 2008 0825 AST

TF 115th CSH (NORTH) (WBH6A1)

Note Written by (b)(6)

@ 14 Dec 2008 0843 AST

(Added after encounter was signed.)

Additional Text Note Information:

Recieved PT Emergent from comp1. CPR in progress and AED. Pt placed in Trauma bed 1 IV 1g to Right AC started first attempt. PT placed on monitor. CPR continued ambu bag for resp. PTintubated first attempt by (b)(6) Positive placement verified. Blood sugar 136. Epi 0445 0450,0500,0505,0520,0538,0600. Narcan 0455. Calcium Chloride 0508,0550,0559. Lidocaine 0526. Lidocaine gtt started at 0528. Atropine 0502, 0503, 0558. Sodium Bicarb at 0458, 0507. Time of death called at 0602, Protocol for deceased started at 0603 after PAD made aware.

Name: DETAINEE, 900301026

Sex:

Sponsor:

DETAINEE, 900301026

DOB:

PCat:

FMP/SSN: 20/900301026 03 Jun 1980

Tel H: Tel W: Rank: Unit:

K78 FOREIGN NATIONAL-POWINTERNEE

Outpt Rec. Rm:

MC Status: No Insurance:

WS:

PCM: Tel. PCM:

CHRONOLOGICAL RECORD OF MEDICAL CARE

STANDARD FORM 600 (REV. 5) Prescribed by GSA and ICMR

THIS INFORMATION IS PROTECTED BY THE

TO THIS INFORMATION IS A VIOLATION OF FEDERAL LAW, VIOLATORS WILL BE PROSECUTED.

File Number 0036-08-CID789-53216

Sworn Statement by Detainee D(6), D(7)(C) - ISN # Dated: 17 DEC 08 – Theater Internment Facility, Camp Cropper, Iraq APO AE 09342

I was asleep in Building 4 when the light turned on, which means it's time to pray. I was awaken to the sound of kicking. When I opened my eyes, I saw Lu'ay sitting on the floor kicking his feet and having difficulties breathing. Several guys had gathered around him, so I got out off my bed to help him. I ran to the main door of the camp to ask the American chief for help, and told her the situation. She asked me to bring him outside. I went back the building and we carried Lu'ay to the main door to the camp. We put him on the bed next to the door and his breathing started to get worse. We asked the chief to open the gate so we can get him outside, but she refused to open the gate, but at the same time she was calling for help on her radio. About 10-15 minutes later, the American guards arrived and got him outside the gate and started performing CPR. Approximately 10 minutes later the medical team arrived and continued to perform CPR. Then they carried him away. All the detainees at the camp were sad, and some of them started saying that he was about to be released. How unfair that he had to go through this, and he probably was affected by the cold shower that he had taken since we had no hot water in the camp, and they made us wait at the Sally Port for a long time in the cold weather. Some other detainees said that it was his time, so let us pray for Lu'ay and ask God for forgiveness.

- (Q) SA b(6), b(7)(C) (A) Mr b(6), b(7)(C)
- (Q 1) How long you have knowing Lu'ay?
- (A 1) About 20 days.
- (Q2) Do you know if had any medical problems?
- (A 2) No.
- (Q3) Was the light on when you heard him kicking?
- (A3) Yes, the light was on.
- (Q4) Where in the building do you sleep?
- (A 4) On the left side of the building.
- (Q 5) Where exactly?
- (A 5) Left side, next to Lu'ay's.
- (Q 6) Do you know the person that sleeps on the other side of Lu'ay?
- (A 6) No, I don't interact with the people in the building.
- (Q 7) How long did it take you to call the Chief?
- (A 7) I went running so it didn't take me that long.
- (Q 8) Did you assist in carrying Lu'ay outside the building?
- (A 8) Yes

Page 1 of 2

Continuation of Mr. b(6), b(7)(6) Sworn Statement:

- (Q 9) What did you use to carry him outside?
- (A 9) We didn't use anything.
- (Q 10) Do you know what happened to the bed he was sleeping on?
- (A 10) No.
- (Q 11) Do you know what Lu'ay ate for dinner?
- (A 11) The usual dinner but I don't know if Lu'ay had any dinner or not.
- (Q 12) Do you known if Lu'ay had any enemies?
- (A 12) No, he was loved by all of us.
- (Q 13) Was Lu'ay moving when he was carried outside?
- (A 13) Yes, but he was having a hard time breathing and also his hands were clutched.
- (Q 14) When did Lu'ay stop breathing?
- (A 14) After we carried him out, near the main gate.
- (Q 15) Do you have any more information that you would like to say or add?
- (A 15) They must have a medical crew close by.
- (Q 16) Do you have anything else to add?
- (A 16) No. ///END OF STATEMENT///

Translated by b(6), b(7)(C)

Linguist 24th/348th MP DET (CID) Camp Cropper, Iraq APO AE 09342

Page 2 of 2

File Number 0036-08-CID789-53216

Sworn Statement by Detainee b(6), b(7)(C) — ISN USb(6), b(7)(C) Dated: 17 DEC 08 — Theater Internment Facility, Camp Cropper, Iraq APO AE 09342

I woke up when the lights came on, it's time to pray. I saw the deceased kicking his feet on the ground and snoring loud (having difficulties breathing). A lot of people had gathered around him trying to help him. We carried Lu'ay outside the building and placed him near the gate. The American Chief called on her radio for help. Lu'ay was then carried outside by the American guards. It took them about 10-15 minutes to perform first aid-CPR. Medical personnel arrived later on and continued performing CPR on Mr. Lu'ay. Later on, they covered his face and carried him off camp. We went inside the building.

- (Q) SAb(6), b(7)(C)
- (A) Mr. b(6), b(7)(C)
- (Q 1) How long have you known Lu'ay?
- (A 1) About 25 days.
- (Q2) Did he have any medical problems?
- (A 2) No.
- (Q3) Where in the building do you sleep?
- (A3) Left side of Lu'ay.
- (Q4) Do you know the person who sleeps on Lu'ay's right side?
- (A 4) b(6), b(7)(C)
- (Q 5) Do you know his ISN?
- (A 5) No.
- (Q 6) When you heard him snoring, was it because he had difficulties breathing?
- (A 6) He was snoring loud.
- (Q7) Does he normally snore?
- (A 7) No.
- (Q 8) Do you know what he ate for dinner?
- (A 8) The usual dinner (Rice, bread and stew)
- (Q 9) Do you known if Lu'ay had any enemies?
- (A 9) No, but he's been detained for a long time.
- (Q 10) What was he doing with his hands?
- (A 10) They were clenched like closed fist.
- (Q 11) Was Lu'ay covered with a blanket when he was taken outside?
- (A 11) Yes, he was wrapped in his own blanket.

Page 1 of 2

ACLU DDI CID ROI 30197

0036-08-00789-53216

Continuation of Mr. b(6), b(7)(C) Sworn Statement:

- (Q 12) When did Lu'ay stop breathing?
- (A 12) When we took him outside to the Sally Port.
- (Q 13) Was Lu'ay alive when he was carried outside the building? (A 13) Yes, but he was paralyzed
- (Q 14) Do you have anything else to add? (A 14) No. ///END OF STATEMENT///

Translated by: b(6), b(7)(C)

Linguist 24th/348th MP DET (CID) Camp Cropper, Iraq APO AE 09342

Page 2 of 2

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is PMG.

PRIVACY ACT STATEMENT

AUTHORITY:

Title 10, USC Section 301; Title 5, USC Section 2951; E.O. 9397 Social Security Number (SSN).

PRINCIPAL PURPOSE:

To document potential criminal activity involving the U.S. Army, and to allow Army officials to maintain discipline,

law and order through investigation of complaints and incidents.

ROUTINE USES:

Information provided may be further disclosed to federal, state, local, and foreign government law enforcement agencies, prosecutors, courts, child protective services, victims, witnesses, the Department of Veterans Affairs, and the Office of Personnel Management. Information provided may be used for determinations regarding judicial or non-judicial punishment, other administrative disciplinary actions, security clearances, recruitment, retention,

placement, and other personnel actions.

DISCLOSURE:

Disclosure of your SSN and other information is voluntary.

1. LOCATION 2. DATE (YYYYMMI 4. FILE NUMBER 1025 Camp Cropper CID Office, Iraq APO AE 09342 2008/12/19 0036-08-CID789-53216 5. LAST NAME, FIRST NAME, MIDDLE NAME 6. SSN b(6), b(7 7. GRADE/STATUS E-5 / ACTIVE b(6), b(7)(C)

8. ORGANIZATION OR ADDRESS

B Co, 112th FIRES Bn, Camp Cropper, Iraq APO AE 09342

, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH:

On December 14, 2008, between 0400 and 0500 hours on Compound 1 where I work as the A Zone Rep, I heard SGT b(6), b(7)(C) Quantet (D Zone Rep) call the Compound CP for a medic for a detainee IS (b) b(7)(C) having a medical emergency. As the call did not pertain to my zone, I did not pay much attention. Some time later, SGT b(6), b(7)(C) called the CP again to inquire about the status of the medic and emphasize the emergent nature of the detainee's status. As before, I did not pay much attention to the radio call as it did not pertain to my zone. A few minutes after that, I heard many angry voices shouting in D Zone and heard what sounded like detainees banging on the fence. I ran down to the area to assist in controlling a possible disturbance and found SGT b(6), b(7)(C) (C Zone Rep) in the process of removing the detainee from the D Zone sally port assisted by at least one ICO and two detainees, while the rest of the guard force in the area provided cover in case of any problems. The detainee was placed on the ground outside the sally port while SGT b(6), b(7)(C) and I attempted to render emergency medical aid. SGT b(6), b(7)(C) check the detainee's breathing while I attempted to find a pulse at the wrist. I was unable to locate any pulse at the wrist, and SGT (6), b(7)(C) said the detainee was not breathing. SGT (6), b(7)(6) said he believed the detainee had a pulse at the carotid (neck) artery. We obtained a body fluids barrier from the first aid kit contained in the guard shack and SGT of began rescue breathing. After SGT b(6), b(7)(C) finished a cycle of rescue breathing, I check the detainee for a pulse at the neck while SGT b(6), b(7)(C) checked his breathing. He was still not breathing and I was unable to locate a pulse at the neck. At this time SGT of the resumed his rescue breathing while I performed chest compressions on the detainee. We ceased administering emergency medical treatment when Compound 1 Day Shift Lead) informed us that the medics had arrived. At that time, I recovered my duty

station as A Zone Rep. Q: SA b(6), b(7)(C) A: SGT b(6), b(7)(C)

- Q: Have you ever had any other notable interactions with Detainee 6(6), 6(7)(0)
- Q: Can you describe the physical condition of the detainee when he was brought out of the Compound?
- A: He was completely limp and absolutely unresponsive. His eyes appeared to be partially opened, and rolled back. I immediately thought that he was either died or about to die.
- Q: Did you observe any type of notable injury to the Detainee's body?
- A: No, and therefore had no reason to suspect that he had been assaulted. He looked like a guy that had a stroke, heart attack or seizure.
- Q: Did you observe any of the other detainees attempt to render medical aid to the Detainee before he was able to be removed from the Compound?
- A: No, but I wouldn't have seen it anyways. By the time I got there, they were already in the process of bringing him out.
- Q: What is Standard Operating Procedure for when a Detainee presents with a medical emergency?
- A: First we verify that the emergency is life, limb, or eyesight. Because we are not medics, our decisions are based on what we are

10. EXHIBIT	11. INITIAb(6), b(7)(C)N MAKING STATEMENT	PAGE 1 OF	3	PAGES
ADDITIONAL PAGES MUST CONTAIN THE HEADING "S	TATEMENT OF TAKEN AT DATED			
THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEA	R THE INITIALS OF THE PERSON MAKING THE STA	TEMENT, AND P	AGE NU	IMBER
MUST BE INDICATED.	ACLU. DDI. CID	ROI 3	A21	DANG DE V

DA FORM 2823, NOV 2006

		936-08-UU /89-JJ2
USE THIS PAGE IF NEEDED. IF THE	HIS PAGE IS NOT NEEDED, PLEASE PROCEED TO	FINAL PAGE OF THIS FORM.
STATEMENT OF $b(6)$, $b(7)(C)$	TAKEN AT Camp Cropper, Iraq	DATED 2008/12/19
9. STATEMENT (Continued)		
I'm not exactly sure who is called at that poir Q: Aside from assisting in removing the deta A: No, not really.	rrants an emergency medical response, I call that. ainee from the Compound, did the ICO's assist GT (6), b(7)(C) performing life saving aid befor	in any other way?
A: I don't know. O: Approximately how long was the detaine	be treated on scene before he was evacuated to t	he hospital?

- A: I don't know. I could not even guess. As soon as the medics arrived, I went back to my zone. Q: Is there any type of First Responder equipment maintained in the CP, i.e. Automated External Defibrillator, oxygen, etc?
- A: No. There is a very basic first aid kit that contains band aids, eye wash, etc. Since this incident happened, an AED was placed in the guard shack on main street though.
- O: When was the AED placed in the guard shack?
- A: I believe two days after the incident. I don't know the time, but I'm pretty sure it happened during my shift.
- Q: Are any of the Soldiers in the Compound trained to operate the AED?
- A: Not that I know of. There may be one or two that have received some type of work training, but I'm not aware of anybody that has any formal training.
- Q: After the detainee was removed from the Compound and taken to the Hospital, do you know if any efforts were made to secure the building where the detainee initially presented his medical emergency?
- A: Not that I know of.
- O: What is the Procedure for when a crime involving a detainee is committed within the Compound?
- A: Priority is to stop the incident if its still occurring, identify and segregate subjects, get everybody into the Rec Cell and conduct a head count. A Spot Report would later be generated.
- Q: When the detainee was removed from the Compound, did you notice any type of personal belongings that accompanied him?
- A: Only his blanket, which they used as a makeshift stretcher to bring him out.
- Q: Do you recall what the detainee was wearing at the time?
- A: No, but it was probably a yellow jumpsuit. He was clothed, and it wasn't a dish dasha.
- Q: If a crime scene is identified and needs to be secured, how is it secured?
- A: All detainees are locked inside the Rec Yard and the compound is cleared with shotguns.
- Q: Who makes the call to secure a possible scene until investigators arrive and are able to conduct an examination?
- A: I think the shift lead or Compound NCOIC would be the lowest level at which that decision is made.
- Q: Do you know what the approximate temperature was at 0400, 14 Dec 08?
- A: I would guess that the outdoor temperature was between 36 and 49 degrees Fahrenheit.
- Q: Is it feasible to lock the detainees in a Rec Yard for several hours in that type of temperature?
- A: I wouldn't advise it considering the amount of clothes they have.
- Q: Is there anything else you would like to add to your statement?
- A: No. ///END OF STATEMENT///

b(6), b(7)(C)F PERSON MAKING STATEMENT

TEMENT OF $b(6)$, $b(7)(C)$	TAKEN AT Camp Cropper, Iraq DATED 2008/12/19
STATEMENT (Continued)	
한글이 말하는 것이 보고 있는 것이 되었다. (<u>)</u> 설립 : 15 - 15 - 15 - 15 - 15 - 15 - 15 - 15	
р(б),	, b(7)(C)
	536
	- 7
	AFFIDAVIT
I, b(6), b(7)(C) WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE	HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE
BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED	D ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE
CONTAINING THE STATEMENT. I HAVE MADE THIS S THREAT OF PUNISHMENT, AND WITHOUT COERCION	STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT
	D(O),D(A)(C)
	(eignosers of Foroin maining diatoment)
WITNESSES:	Subscribed and sworn to before me, a person authorized by law to administer oaths, this 19th day of December , 2008
	at Camp Cropper CID Office, Iraq APOAE 09342
	at Camp Cropper CID Office, Iraq APOAE 09342
ORGANIZATION OR ADDRESS	b(6), b(7)(C)
ORGANIZATION OR ADDRESS	b(6), b(7)(C)
ORGANIZATION OR ADDRESS	sab(6), b(7)(C) (Typed Name of Person Administering Oath)
ORGANIZATION OR ADDRESS ORGANIZATION OR ADDRESS	b(6), b(7)(C)

ACLU-RDI 5595 p.86

FOR OFFICIAL USE ONLY LAW ENFORCEMENT SENSITIVE

EXPIRIT000168

AGENT'S INVESTIGATION REPORT

CID Regulation 195-1

(0254-08-CID112) 0036-08-CID789-53216 Page 1 of 1 Pages

BASIS FOR INVESTIGATION: About 0900, 15 Dec 08, the Aberdeen Proving Ground CID Office, Aberdeen Proving Ground, MD 21005, received a Request for Assistance (RFA), 0036-08-CID789-53216, from the Camp Cropper CID Office, Camp Cropper, Iraq APO AE 09432. The RFA requested a USACIDC Special Agent attend the autopsy of Detainee L'oy L. HASHIM, Internment Serial Number (ISN): USb(6), b(7)(C)CI, Theater Internment Facility, Camp Cropper, Iraq, APO AE 09342 being conducted at The Charles C. Carson Center for Mortuary Affairs, Building 116, Dover Air Force Base, DE 19902 (DAFB).

About 0955, 22 Dec 08, SA [56], b(7)(C) attended the autopsy of Detainee HASHIM (ME#: 08-0881), conducted at The Charles C. Carson Center for Mortuary Affairs, Building 116, DAFB, by Dr (USN CDR) (b(6), b(7)(C) Medical Examiner, Office of the Armed Forces Medical Examiner (OAFME), Armed Forces Institute of Pathology (AFIP), 1413 Research Blvd, Building 102, Rockville, MD 20850 (RMD). Dr (AFIP), 1413 Research Blvd, Building 102, Rockville, MD 20850 (RMD). Dr (AFIP) stated the cause and manner of Detainee HASHIM's death were pending. He further stated during the autopsy he did not identify any external or internal injuries to Detainee HASHIM. Photographers from AFIP exposed all digital photographs of the autopsy and prepared a compact disc (CD) containing all images exposed. SA (CD) obtained from AFIP personnel a copy of the CD containing all images taken during the autopsy of Detainee HASHIM. SA (CD) also obtained major case fingerprints from the remains of Detainee HASHIM during the autopsy. (See CD and Fingerprints 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 NAME AND SEQUENCE NUMBER:

ORGANIZATION:

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

Fort Myer CID Office Fort Myer, VA 22211

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

Date:

22 Dec 08

CID Form 94

FOR OFFICIAL USE ONLY EXHIBIT: 7.0 LAW ENFORCEMENTS IN THE CID ROI 30206 000169

ROI NUMBER AGENT'S INVESTIGATION REPORT 0036-08-CID789-53216 CID Regulation 195-1 PAGE 1 OF 1 PAGE About 1005, 23 Dec 08, SA b(6), b(7)(C) nterviewed SGT b(6), b(7)(C) who provided a Sworn Statement wherein he described his actions on scene and the life saving measures he performed on Mr. HASHIM. About 1000, 29 Dec 08, SAb(6), b(7)(C) researched the Detainees Management System (DMS) and obtained the Iragna phone number for Mr. HASHIM's family: b(6), b(7)(C) SAb(6), b(7)(C) with the assistance attempted to contact Mr. HASHIM's family, but reached an automated voice prompt which indicated the number had been disconnected. About 1100, 29 Dec 08, SAb(6), b(7)(C) researched the DMS and noted the circumstances of Mr. HASHIM's capture. Mr. HASHIM was captured by Coalition Forces at a checkpoint in Baghdad, Iraq, on 20 Jul 06. The capturing unit believed Mr. HASHIM was involved in weapons trafficking, kidnapping, and 'Death Squad" activities. ///Last Entry/// TYPED AGENT'S NAME AND SEQUENCE NUMBER ORGANIZATION 24th/348th MP DET (CID) Camp Cropper, Iraq APO AE 09342

29 Dec 08

000314

CIAL USE ONLY-LAW ENFORCEMENT SENSITIVE

ACLU-RDI 5595 p.88

(Automated)

Angle of the State		SWORN STATEMENT	
	For use of this form	, see AR 190-45; the proponent agency is PMG.	
		PRIVACY ACT STATEMENT	
AUTHORITY:	Title 10, USC Section 301; Title	5, USC Section 2951; E.O. 9397 Social Security Num	her (SSNI)
PRINCIPAL PURPOSE:	To document potential criminal a law and order through investigati	ctivity involving the U.S. Army, and to allow Army offici	als to maintain discipline,
ROUTINE USES:	Information provided may be furtl agencies, prosecutors, courts, ch the Office of Personnel Manager non-judicial punishment, other a placement, and other personnel	ner disclosed to federal, state, local, and foreign govern- nild protective services, victims, witnesses, the Departn nent. Information provided may be used for determinal dministrative disciplinary actions, security clearances, actions.	ment of Veterans Affairs, and
	Disclosure of your SSN and othe	r information is voluntary.	
1. LOCATION	AFFECT INTO A DO A F 00242	D(6), b(7)(C) 3. TIME	4. FILE NUMBER
LAST NAME FIRST	Office, Iraq APO AE 09342 NAME, MIDDLE NAME	2008/12/23 O: 05	
o(6), $b(7)(C)$		b(6), b(7)(C)	7. GRADE/STATUS E-5 / ACTIVE
	n, Camp Cropper, Iraq APO A	SE 00242	
701 1 7517	C V	AC 09342	
o(6), b(7)((C)	, WANT TO MAKE THE FOLLOWING ST	ATEMENT UNDER OATH:
letainee. We picked l	nim up and brought him out o	f the zone. We laid him on the ground, at which	th time myself and SCT0(6), b(7)(0
etainee. We picked legan to administer fi ut a face barrier over nedics arrived on sce b: SAD(6), b(7)(C) L: SGT ^{b(6), b(7)} (C) b: How long have yo	nim up and brought him out o rst aid. I checked for a pulse: the detainees face and began	f the zone. We laid him on the ground, at which at the detainees coratid artery, and felt a faint put to administer rescue breathing. We didn't get a faint put to administer rescue breathing.	of ICO's went inside to grab the ch time myself and SGT b(6), b(7)(6), b(7)
etalist, and they told etalinee. We picked began to administer first a face barrier over nedics arrived on sce or SA (6), b(7)(C) SGT (6), b(7)(G) Or How long have your About two weeks.	nim up and brought him out o rst aid. I checked for a pulse the detainees face and began ne.	f the zone. We laid him on the ground, at which at the detainees coratid artery, and felt a faint put to administer rescue breathing. We didn't get the Zone?	of ICO's went inside to grab the ch time myself and SGT b(6), b(7)(0) b(1), b(7)(0).
etainee. We picked legan to administer fi ut a face barrier over nedics arrived on sce b: SAD(6), b(7)(C) b: SGT ^{b(6)} , b(7)(C) b: How long have yo c: About two weeks. b: Do you remember c: No. b: Do you recall ever	ner to go anead. SGI provident of the control of the control of the detained of the control	f the zone. We laid him on the ground, at which at the detainees coratid artery, and felt a faint put to administer rescue breathing. We didn't get a zone?	of ICO's went inside to grab the ch time myself and SGT b(6), b(7)(6), b(7)
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EXHIBIT 7

INITIALS OF PERSON MAID(6), b(7)(C)ENT

ORGANIZATION OR ADDRESS

ACLU DDI CID POI 303545

(Authority To Administer Oaths)

DA FORM 2823, NOV 2006

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EXHIBITISTS.

AGENT'S INVESTIGATION REPORT

CID Regulation 195-1

0036-08-CID789-53216

PAGE 1 OF PAGE(S)

DETAILS

About 1800, 9 Mar 09, SA b(6), b(7)(C) received from SA b(6), b(7)(C) the Certificate of Death, Report of Toxicology Examination and the Autopsy Examination Report pertaining to Mr. HASHIM. The report stated that Mr. HASHIM died of cardiac arrhythmia due to focal dysplasia of the atrioventricular nodal artery. This cardiac abnormality cannot be detected by screening tests or by physical examination, and has been implicated as the cause of sudden death. The manner of death is natural.///LAST ENTRY///

TYPED AGENT'S NAME AND SEQUENCE NUMBER

(b)(7)(C), (b)(7)(F)

Camp Cropper CID Office, 24th/348th MP DET (CID), 10th MP BN (CID), Unit# 42232, APO AE 09342

EXHIBIT

9 Mar 09

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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 Sequence

(b)(6)

(b)(6)

Name

BTB HASHIM, LO'Y LAFTA

SSN:

(b)(6)

Toxicology Accession #: (b)(6)

Autopsy:

Date Report Generated: January 5, 2009

CONSULTATION REPORT ON CONTRIBUTOR MATERIAL

AFIP DIAGNOSIS

REPORT OF TOXICOLOGICAL EXAMINATION

Condition of Specimens: GOOD

Date of Incident: 12/14/2008

Date Received: 12/24/2008

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.

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.

VOLATILES: The BLOOD and URINE were examined for the presence of ethanol at a cutoff of 20 mg/dL. No ethanol was detected.

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

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

Positive Antihistamine: Diphenhydramine was detected in the urine by gas chromatography and confirmed by gas chromatography/mass spectrometry. No diphenhydramine was detected in the blood at a limit of quantitation of 0.05 mg/L using gas chromatography/mass spectrometry.

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

REPLY TO

Report of Toxicological Examination continued (b)(6) BTB HASHIM, LO'Y LAFTA)

(b)(6)			

Office of the Armed Forces Medical Examiner

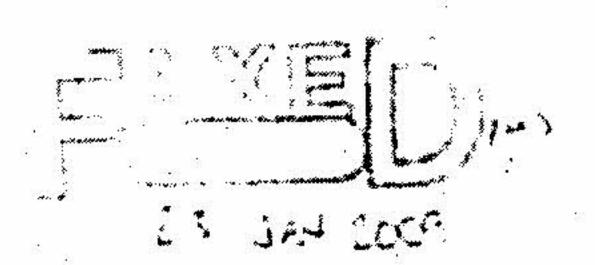
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DEPARTMENT OF DEFENSE ARMED FORCES INSTITUTE OF PATHOLOGY WASHINGTON, DC 20306-6000



AFIP Interdepartmental Consultation Report

AFIP ACCESSION NO. SEQUENCE NO. (b)(6)

HASHIM LO'Y I SSN: APB

January 21, 2009

(b)(6)

AFIP-OAFME 1413 Research Blvd. Bldg. 102 Rockville, MD 20850

DIAGNOSIS: ME^{(b)(6)}

No definitive cardiac cause of death identified Focal dysplasia, atrioventricular nodal artery

History: 24 year old Iraqi male; height 177 cm, weight 83 kg; civilian detaince; began having difficulty breathing and could not be resuscitated

Heart: 440 g (per contributor) (predicted normal value 324 g, upper limit 458 g for 176 cm male); closed foramen ovale; normal cardiac chamber dimensions: left ventricular cavity diameter 30 mm, left ventricular free wall thickness 14 mm, ventricular septum thickness 14 mm, right ventricular from acute angle to septum 30 mm, posterior right ventricle wall thickness 4 mm; valves grossly unremarkable; normal endocardium; no gross myocardial scarring or fibrosis; histologic sections demonstrate no inflammation, scarring, or necrosis

Conduction system: The sinoatrial node and nodal artery are unremarkable. The compact atrioventricular (AV) node and penetrating bundle demonstrate focal fragmentation without inflammation, increased fat, or proteoglycans. The proximal left bundle branch is unremarkable and the right is not seen. There are no discernible bypass tracts between the AV node and the ventricular septum. There is mild AV nodal artery dysplasia with medial and intimal thickening and focal moderate dysplasia of an AV nodal artery branch with medial thickening.

Coronary arteries: Normal ostia: right dominance: no gross atherosclerosis

Comment: Small vessel disease (AV nodal artery dysplasia) as seen in this case has been implicated in sudden death, although causality in an individual case can be difficult to ascertain. We cannot exclude coronary spasm as a cause of death, which has no histologic imprint, or an idiopathic arrhythmia related to ion channel disorder.

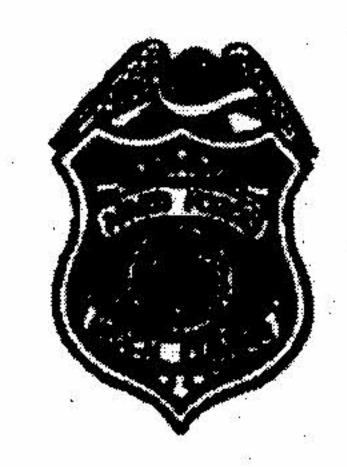
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Telephone: 202-782-2756

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



Autopsy No.: (b)(6)

Place of Death: Iraq

Rank: Civilian Detainee

AFIP No.: (b)(6)

AUTOPSY EXAMINATION REPORT

Name: (BTB) HASHIM, Lo'y Lafta

ISN: US9IZ-301026CI

Date of Birth: (BTB) 01 JAN 1983 Date of Death: 14 DEC 2008

Date/Time of Autopsy: 22 DEC 2008 @ 0930 Place of Autopsy: Port Mortuary, Dover AFB, DE

Date of Report: 19 FEB 2008

Circumstances of Death: This (BTB) 24-year-old male Iraqi Civilian Detainee was noted by his fellow detainees to have difficulty breathing and then became unresponsive. CPR was initiated immediately, and was escalated to full ACLS protocol upon arrival to the CSH. Resuscitative efforts were to no avail.

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

Identification: Presumptive identification is established by an identification band on the left wrist. Positive identification is established by comparison of postmortem DNA examination and antemortem DNA records according to ISN.

CAUSE OF DEATH:

ATRIOVENTRICULAR NODAL ARTERY DYSPLASIA

MANNER OF DEATH: NATURAL

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EXTERNAL EXAMINATION

The body is that of a well-developed, well-nourished Caucasoid male received unclad. The body weighs 184-pounds, is 69 ½-inches in length and appears compatible with the reported age of 24-years. The body is cold. Rigor is passing and present to an equal degree in all extremities. Violaceous lividity is present and fixed on the posterior surface of the body, except in areas exposed to pressure. Green discoloration of the skin of the lower right abdomen is noted. The body is unembalmed.

The head is normocephalic, and the scalp hair is dark and approximately 2-inches in length. Facial hair consists of dark beard stubble and a soul patch. The irides are brown, the pupils are round and equal in size, the corneae are cloudy, the conjunctivae are slightly injected, and the sclerae are white. The external auditory canals, external nares and oral cavity are free of foreign material and abnormal secretions. The earlobes are not pierced. The nasal skeleton and maxilla are palpably intact. The lips and oral mucous membranes are without evident injury. The teeth are natural and in good condition. Examination of the neck reveals no evidence of injury; the trachea is palpably in the midline of the neck.

The chest is symmetric with normally formed male breasts that are free of masses. No evidence of injury of the ribs or the sternum is evident externally. The abdomen is flat without recent trauma. Healed surgical scars are not noted on the torso. The external genitalia are those of a normal adult circumcised male. The posterior torso and anus are without note.

The extremities are symmetric and normally formed without evidence of significant recent trauma. The fingernails appear cyanotic and are trimmed and intact. The toenails are unremarkable. Two indistinct tattoos are noted on the anterior left forearm. There is an identification bracelet around the left wrist.

CLOTHING AND PERSONAL EFFECTS

The following items accompany the body:

- White undershirt (cut)
- White underpants
- White pants
- Yellow jacket
- Yellow shorts
- White towel
- Two prayer rugs

MEDICAL INTERVENTION

- Endotracheal tube (properly located)
- Cardiac pacing pads on the anterior torso (properly located)
- Electrocardiogram electrodes on the anterior torso
- Intravenous lines inserted in both antecubital fossae

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- · Elastic medical bandages around both wrists
- Pulse-oximetry sensor on the right 2nd digit (forefinger)
- Urinary bladder catheter (properly located) with attached reservoir bag containing 50-millilters of clear yellow urine

RADIOGRAPHS

A complete set of postmortem radiographs and CT images are obtained and demonstrates the following:

- Medical therapy as described above
- No metallic foreign bodies
- No fractures are noted

EVIDENCE OF INJURY

There is no evidence of recent significant injury.

INTERNAL EXAMINATION

BODY CAVITIES:

The body is opened by the usual thoraco-abdominal incision and the chest plate is removed. The ribs, sternum, and vertebral bodies are visibly and palpably intact. No adhesions are present in any of the body cavities. All body organs are present in normal anatomical position. There is clear, straw-colored serous fluid in both pleural cavities (right, 200-milliliters; left, 300-milliliters) as well as the peritoneal cavity (200-milliliters).

The subcutaneous fat layer of the abdominal wall is 1-inch thick at the umbilicus.

HEAD AND CENTRAL NERVOUS SYSTEM:

The scalp is reflected. The galeal and subgaleal soft tissues of the scalp are free of injury. There are no skull fractures. The calvarium of the skull is removed. The dura mater and falx cerebri are intact. There is no epidural, subdural or subarachnoid hemorrhage present. The leptomeninges are thin and delicate. The cerebral hemispheres are symmetrical with an unremarkable pattern of gyri and sulci. The blood vessels at the base of the brain are intact and symmetrical without significant atherosclerosis. The cranial nerves are likewise symmetrical and intact.

The brain weighs 1,440-grams and is fixed prior to further examination and submission for expert consultation.

Coronal sections through the cerebral hemispheres reveal no focal lesions in the cortex, white matter or deep nuclear structures. There is no midline shift. The ventricles of the brain are of normal size and contain clear cerebrospinal fluid. Transverse sections through the brain stem and cerebellum are unremarkable. See Addendum A for complete details.

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The upper spinal cord as viewed through the foramen magnum is unremarkable. The atlanto-occipital joint is stable.

NECK:

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 pink-white mucosa. The tongue is free of bite marks, hemorrhage, or other injuries.

CARDIOVASCULAR SYSTEM:

The 440-gram heart is contained in an intact pericardial sac. The epicardial surface is smooth, with minimal fat investment. The coronary arteries arise normally and are present in a normal distribution, with a right-dominant pattern. Cross sections of the major coronary arteries demonstrate no luminal narrowing. Trabeculae are noted in the apex of the right ventricle. The heart is fixed prior to further examination and submission for expert consultation.

The foramen ovale is closed. The cardiac chamber dimensions are normal. The myocardium is homogenous and firm without focal softening, discoloration or fibrosis. The valve leaflets are thin and mobile. The walls of the left ventricle, inter-ventricular septum, and right ventricle are 1.4, 1.4, and 0.3-centimeters thick, respectively. The endocardium is smooth and glistening. See Addendum B for complete details.

The aorta has minimal atherosclerosis and gives rise to three intact and patent arch vessels. The renal and mesenteric vessels are unremarkable.

RESPIRATORY SYSTEM:

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

The right lung weighs 860-grams; the left 720-grams. The pulmonary parenchyma is diffusely congested and edematous, exuding slight to moderate amounts of blood and frothy fluid; no focal lesions are noted. The visceral pleural surfaces are smooth, glistening and unremarkable bilaterally.

The pulmonary arteries are normally developed, patent and without thrombus or embolus.

HEPATOBILIARY SYSTEM:

The 2,220-gram liver has an intact smooth capsule covering congested tan-brown parenchyma with no focal lesions noted.

The gallbladder contains 7-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 40-milliliters of brown fluid.

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The small and large bowels are unremarkable. The pancreas has a normal pink-tan lobulated appearance. The appendix is present.

GENITOURINARY SYSTEM:

The right kidney weighs 160-grams; the left 160-grams. The renal capsules are smooth and thin, semi-transparent and strip with ease from the underlying smooth, red-brown cortical surfaces.

The cortices are sharply delineated from the medullary pyramids, which are red-purple to tan and unremarkable. The calyces, pelves and ureters are unremarkable.

White bladder mucosa overlies an intact bladder wall. The bladder is empty of urine. The testes, prostate gland and seminal vesicles are without note.

LYMPHORETICULAR SYSTEM:

The thymus is small, fatty and otherwise unremarkable. The 340-gram spleen has a smooth, intact capsule covering congested, red-purple, moderately firm parenchyma; the lymphoid follicles are unremarkable.

Lymph nodes in the hilar, periaortic and iliac regions are not enlarged. Marked anthracosis is noted in the hilar lymph nodes.

ENDOCRINE SYSTEM:

The pituitary gland is examined in situ and is grossly unremarkable. The thyroid gland is symmetric and red-brown, without cystic or nodular change. The parathyroid glands are not identified. 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:

Superficial posterior skin incisions are negative for traumatic injuries. No non-traumatic abnormalities of muscle or bone are identified.

MICROSCOPIC EXAMINATION AND SLIDE KEY

Selected portions of organs are retained in formalin, and selected histology slides are prepared.

1. Thyroid (X2): No pathologic diagnosis.

2. Lymph Node (X2): Benign calcification and anthracotic pigment.

Lung (X3): Vascular congestion, focal pulmonary edema and anthracosis.
 Lung (X2): Vascular congestion, focal pulmonary edema and anthracosis.

5. Adrenal (X2): Medullary autolysis, otherwise unremarkable.
 6. Kidney (X2): Autolysis of tubule cells, otherwise unremarkable.

7a. Spleen: No pathologic diagnosis.

7b. Pancreas: Autolysis.

8. Liver & Gall Bladder: Vascular congestion and bile stasis of the liver. Autolysis of the gall

bladder is noted.

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TOXICOLOGY

VOLATILES: The blood and urine are examined for the presence of volatile compounds including ethanol at a cutoff of 20-milligrams per deciliter. No ethanol is detected.

DRUGS: The urine is screened for medications and drugs of abuse including acetaminophen, amphetamine, antidepressants, antihistamines, barbiturates, benzodiazepines, cannabinoids, chloroquine, cocaine, dextromethorphan, lidocaine, narcotic analgesics, opiates, phencyclidine, phenothiazines, salicylates, sympathomimetic amines and verapamil by gas chromatography, color test or immunoassay. The following drugs are detected:

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

<u>Positive Antihistamine</u>: Diphenhydramine was detected in the urine by gas chromatography and confirmed by gas chromatography/mass spectrometry. No diphenhydramine was detected in the blood at a limit of quantitation of 0.05-milligrams per liter using gas chromatography/mass spectrometry.

CARBON MONOXIDE: The carboxyhemoglobin saturation in the blood was less than 1% as determined by spectrophotometry with a limit of quantitation of 1%.

CYANIDE: There was no cyanide detected in the blood. The limit of quantitation for cyanide is 0.25-milligrams per liter.

ADDITIONAL PROCEDURES

- 1. Documentary photographs are taken by (b)(6)
- 2. Autopsy assistance is provided by (b)(6)
- 3. Personal effects are released to the appropriate mortuary operations representatives.
- 4. Specimens retained for toxicology testing and/or DNA identification are: vitreous fluid, blood, urine, bile, gastric contents, spleen, liver, lung, kidney, brain, myocardium, adipose tissue and skeletal muscle.
- 5. The brain and heart are fixed and retained for expert consultation (see Addendums A and B, respectively, below).
- 6. The dissected organs are forwarded with the unembalmed body.
- 7. No trace evidence and/or foreign material are collected by OAFME.

FINAL AUTOPSY DIAGNOSES

- I. Autopsy Findings
 - A. General
 - 1. Serous fluid in body cavities (200-milliliters right pleural, 300-milliliters left pleural, 200-milliliters peritoneal)
 - 2. Vascular congestion of liver, spleen and both lungs
 - 3. There is no evidence of physical abuse

FOR OPACELES OF CHOICE OF 30366

Page 7 of 10

- B. Cardiovascular System
 - 1. Mild cardiomegaly (440-gram heart, 368-grams expected for body weight)
 - 2. No coronary arteriosclerosis noted grossly
 - 3. Trabeculae noted in right ventricular apex
 - 4. Focal dysplasia of the atrioventricular nodal artery
- II. No other significant natural diseases or pre-existing conditions are identified, within the limitations of this examination.
- III. Evidence of Medical Therapy
 - A. Endotracheal tube (properly located)
 - B. Cardiac pacing pads on the anterior torso (properly located)
 - C. Electrocardiogram electrodes on the anterior torso
 - D. Intravenous lines inserted in both antecubital fossae
 - E. Urinary bladder catheter
- IV. Post-Mortem Changes
 - A. Rigor is passing and equal in all extremities
 - B. Lividity is posterior and fixed except in areas exposed to pressure
 - C. The body temperature is cold
 - D. There is green discoloration of the right lower abdomen
- V. Identifying Body Marks: Two indistinct tattoos on the anterior left forearm
- VI. There is no evidence of physical abuse.
- VII. Toxicology
 - A. No ethanol is detected in the blood and urine.
 - B. No drugs of abuse are detected in the urine.
 - C. No cyanide is present in the blood.
 - D. Carboxyhemoglobin saturation in the blood is less than 1%.
 - E. The following medications are detected in the urine but not the blood:
 - 1. Lidocaine
 - 2. Diphenhydramine

Page 8 of 10

OPINION

This (BTB) 24-year-old Iraqi civilian detainee, Lo'y Lafta Hashim, died of a cardiac arrhythmia due to focal dysplasia of the atrioventricular nodal artery. This cardiac abnormality cannot be detected by screening tests or by physical examination, and has been implicated as the cause of sudden death. Other diagnoses considered as the cause of death are coronary vasospasm or ion channel disorder, neither of which can be proven microscopically. All other findings at autopsy were non-specific. Toxicological testing for ethanol, screened drugs of abuse, carbon monoxide and cyanide were negative. Lidocaine (a medication used in resuscitation efforts) and diphenhydramine (an over-the-counter antihistamine) were present in the urine only. The manner of death is natural.

(b)(6)			(b)(6)	206609
		31		
(b)(6)	Medical Examiner			

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ADDENDUM A: Neuropathology Consultation Report

ARMED FORCES INSTITUTE OF PATHOLOGY

NEUROPATHOLOGY REPORT

CASE NUMBER: (b)(6)

PATIENT NAME: HASHIM, LO'YL DATE OF EXAMINATION: 01/08/09

GROSS DESCRIPTION:

Brain weight: 1326 gm

The specimen consists of the brain of an adult.

The leptomeninges are thin, delicate and transparent. The frontal lobe poles have been

removed for toxicology studies.

The brain is pale and moderately, diffusely swollen having widened gyri, compressed sulci and partially effaced perisellar, perimesencephalic and cerebellomedullary cisterns. The

gyri have an otherwise anatomically normal configuration.

There is no sign of herniation or midline shift. Tentorial grooves are not visible on either uncus. The cerebellar tonsils have a slightly swollen configuration. The external aspects of the brainstem and cerebellum are not remarkable. The arteries at the base of the brain follow a normal distribution and are free of atherosclerosis. There are no aneurysmal dilatations or sites of occlusion. The identifiable cranial nerve roots are not remarkable.

Coronal sections of the cerebrum reveal no focal lesions in the cortex, white matter or deep nuclear structures. There is no midline shift. Sections of the midbrain, pons, medulia and cerebellum show no diffuse or focal abnormalities. The substantia nigra end locus coeruleus are

well pigmented.

The ventricular system and aqueduct of Sylvius are patent with a normal size and configuration. The choroid plexus is unremarkable and the ependymal surfaces are smooth and glistening.

PHOTOGRAPHS: yes

MICROSCOPIC EXAMINATION:

Blocks of tissue for microscopic examination are removed from: (1) right lateral frontal lobe, (2) cingulate gyri/anterior corpus callosum, (3) mid right cingulate gyrus/corpus callosum/caudate nucleus/anterior limb of internal capsule, (4) left thalamus/subthalamic nucleus/substantia nigra/posterior limb of the internal capsule, (5) right thalamus/ red nucleus/posterior limb of the internal capsule, (6) right hippocampus, (7) right calcarine cortex/occipital hom of lateral ventricle, (8) right cerebellum, (9) midbrain, (10) pons and (11) medulla.

Sections from each block are stained with H&E, Bielschowsky and LFB techniques and immunostained for β -amyloid precursor protein (β -APP), glial fibrillary acidic protein (GFAP) and β -amyloid.

COMMENT:

The microscopic changes show mild, diffuse edema in the form of perivascular vacuolization of the neuropil and white matter which is consistent with the mild grossly described changes. There is also mild acute gliosis in the form of astrocytic swelling, especially around blood vessels. These changes are agonal and not specific.

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NEUROPATHOLOGIST

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Page 10 of 10

ADDENDUM B: Cardiovascular Pathology Consultation Report

AFIP ACCESSION NO. SEQUENCE NO. (b)(6)

HASHIM. LO'Y L SSN:
ME (b)(6)

January 21, 2009

(b)(6)

AFIP-OAFME
1413 Research Blvd.
Bldg. 102
Rockville, MD 20850

DIAGNOSIS: ME $^{(b)(6)}$ Heart, autopsy: No definitive cardiac cause of death identified Focal dyspiasia, atrioventricular nodal artery

History: 24 year old Iraqi male; height 177 cm, weight 83 kg; civilian detainee; began having difficulty breathing and could not be resuscitated

Heart: 440 g (per contributor) (predicted normal value 324 g, upper limit 458 g for 176 cm male); closed foramen ovale; normal cardiac chamber dimensions: left ventricular cavity diameter 30 mm, left ventricular free wall thickness 14 mm, ventricular septum thickness 14 mm, right ventricular from acute angle to septum 30 mm, posterior right ventricle wall thickness 4 mm; valves grossly unremarkable; normal endocardium; no gross myocardial scarring or fibrosis; histologic sections demonstrate no inflammation, scarring, or necrosis

Conduction system: The sinoatrial node and nodal artery are unremarkable. The compact atrioventricular (AV) node and penetrating bundle demonstrate focal fragmentation without inflammation, increased fat, or proteoglycans. The proximal left bundle branch is unremarkable and the right is not seen. There are no discernible bypass tracts between the AV node and the ventricular septum. There is mild AV nodal artery dysplasia with medial and intimal thickening and focal moderate dysplasia of an AV nodal artery branch with medial thickening.

Coronary arteries: Normal ostia; right dominance; no gross atherosclerosis

Comment: Small vessel disease (AV nodal artery dysplasia) as seen in this case has been implicated in sudden death, although causality in an individual case can be difficult to ascertain. We cannot exclude coronary spasm as a cause of death, which has no histologic imprint, or an idiopathic arrhythmia related to ion channel disorder.

(b)(6)

Department of Cardiovascular Pathology

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USE INK OR BALL-POINT PEN ONLY

HASHIM, LO'Y L

Office Armed Forces Med Examiner

ME (b)(6)

12/29/2008 (b)(6)

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ARMED FORCES INSTITUTE OF PATHOLOGY

NEUROPATHOLOGY REPORT

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PHOTOGRAPHS: yes

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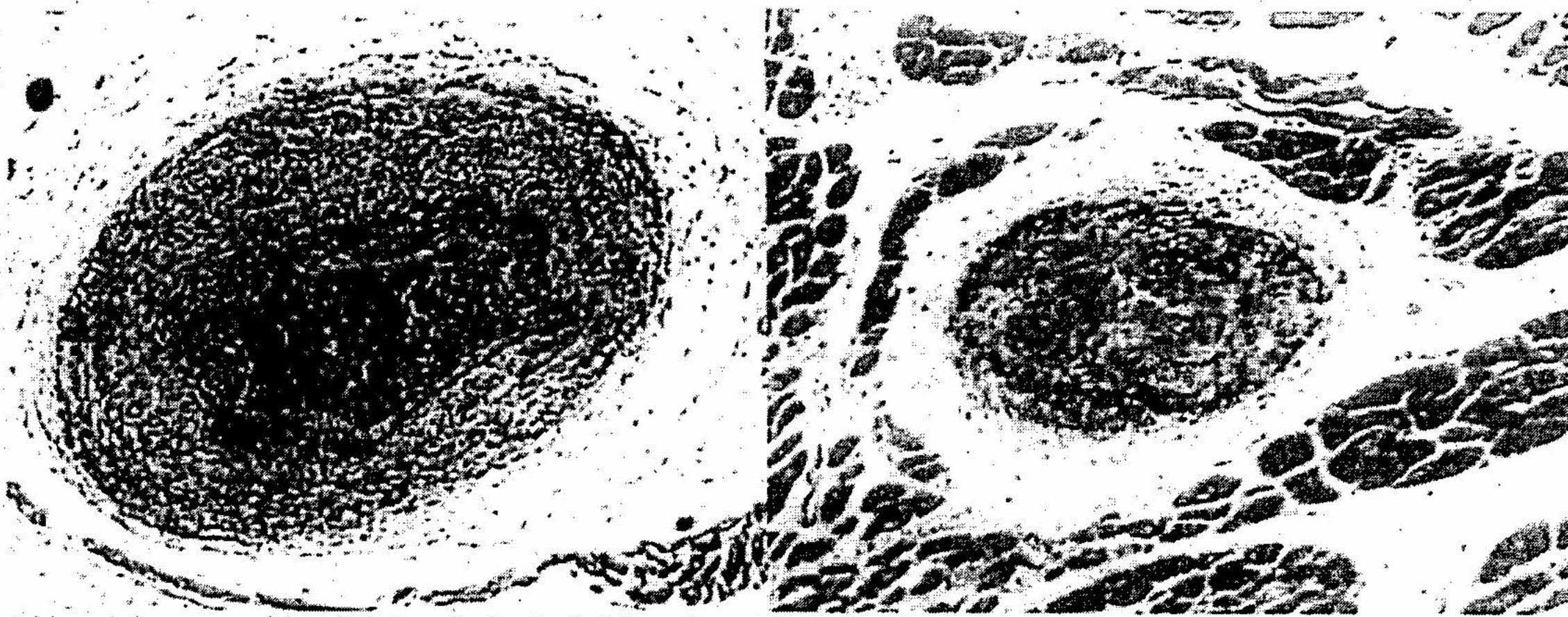
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AFIP ACCESSION NO. SEQUENCE NO. (b)(6)

HASHIM, LO'Y L ME(b)(6)

SSN: APB

January 7, 2009



AV nodal artery with mild dysplasia (left, Movat) and branch with moderate dysplasia (right, Movat)

A copy of this report has been faxed to you at (b)(6)

Blocks made: 12 (5 myocardium, 7 conduction system)

Slides made: 12 (12 H&E, 3 Movat)

(b)(6)

Department of Cardiovascular Pathology

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LAW ENFORCEMENT SENSITIVE

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Replaces DA FORM 4137, 1 Aug 74 and DA FORM 4137-R Privacy Act Statemen 26 Sep 75 Which are Obsolete.

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