



ARMED FORCES INSTITUTE OF PATHOLOGY
Office of the Armed Forces Medical Examiner
1413 Research Blvd., Bldg. 102
Rockville, MD 20850
1-800-774-8427



AUTOPSY EXAMINATION REPORT

Name: BTB Munthir, Awad Hasan

Internment Serial Number (b)(6)

Date of Birth: 1985

Date of Death: (b)(6) 2005

Date of Autopsy: 24 AUG 2005

Date of Report: 26 OCT 2005

Autopsy No.: (b)(6)

AFIP No.: (b)(6)

Rank: Detainee

Place of Death: Abu Ghraib Prison, Iraq

Place of Autopsy: Port Mortuary

Dover AFB, DE

Circumstances of Death: This believed to be 20 year old Iraqi National was found suspended by his neck (hanging) with his hands tied behind his back in a shower stall while being detained in Abu Ghraib Prison, Iraq. The investigation of the circumstances surrounding the decedent's death indicates that shortly after being accounted for in the morning head count the decedent made his way to the communal shower area. Shortly thereafter, the decedent was discovered hanging by other detainees who alerted the guards. The responding guards initiated CPR after cutting the decedent down and removing the ligature from the decedent's neck. Despite the CPR and rescue attempts in the prison medical facility, the decedent was pronounced deceased. Interviews of the fellow detainees indicate the decedent was depressed about his capture and was "self-treating" his depression by segregating himself from the other detainees and continuously reading the Quran. Some of the other detainees stated the decedent claimed to express a need to be nearer to his God. Scene investigation indicates there was no evidence of a struggle in or near the shower stall the decedent was found in.

Authorization for Autopsy: Office of the Armed Forces Medical Examiner, IAW 10 USC 1471.

Identification: Presumptive identification is established by the Internment Serial Number and prison records.

CAUSE OF DEATH: Asphyxia by Hanging

MANNER OF DEATH: Suicide

FINAL AUTOPSY DIAGNOSES:

I. Asphyxia by Hanging

A. Injuries of the Neck

1. A 30.5 cm long dried brown ligature mark (furrow) of the neck is 6 ¼ inches below the top of the head at its end on the right side of the neck, 9 ¼ inches below the top of the head in the anterior midline of the neck and 7 ¼ inches below the top of the head at its end on the left side of the neck. The furrow width ranges from 0.7 cm (tapered end behind the right ear) to 1.5 cm (right side of the neck). Along the right side of the furrow is a 6.5 x 1.5 cm area of abrasion that contains two vertical 1.5 x 0.2 cm abrasions. The furrow is 0.2 cm deep on the anterior surface of the neck.

Layer by layer neck examination of the neck demonstrates mild congestion of the anterior strap muscles of the neck immediately superior to the furrow and no fractures of the hyoid bone or thyroid cartilage. There are no petechiae of the sclera, eyelids, oral mucosa, tongue or lips. The frenula are intact.

2. A 4.5 x 3.5 cm area of multiple, superficial linear abrasions is in the posterior midline of the upper back, 11 ½ inches below the top of the head. The abrasions have a near vertical orientation.

II. Other Injuries

1. A 2.2 x 0.5 cm vertical abrasion is on the right flank
2. A 2.5 x 1.7 cm erythematous area is on the anterior surface of the left lower leg
3. A ecchymosis is on the parietal pleural surface of the left sixth rib and left seventh intercostal space

III. Other Findings

1. There are no gross injuries of the wrists or injuries of the underlying musculature

IV. Medical Intervention

1. Endotracheal intubation (in right mainstem bronchus)
2. Self adhesive electrocardiogram leads on the chest
3. Venipuncture sites on the right side of the neck (associated with underlying hematoma), right antecubital fossa, right forearm, and right femoral triangle.
4. Substernal puncture site associated with penetration of the posterior right ventricle, hemopericardium (50 ml), and hemoperitoneum (approximately 50 ml)

- V. No significant natural diseases identified, within limitations of the examination
- VI. Identifying Marks
1. A tattoo (b)(6)
 2. A tattoo
 3. A tattoo
 - (b)(6)
 4. Three 1.2 cm in diameter circular scars are on the anterior surface of the left forearm
 5. A 4.2 x 1.8 cm scar is on the anterior surface of the left lower leg and has palpable foreign bodies immediately below the skin (metallic fragments on x-ray)
 6. Scattered scars on each knee
 7. Linear scars on the chin and circular scar on the left cheek
- VII. Toxicology is negative for ethanol and screened drugs of abuse.

EXTERNAL EXAMINATION

The body is that of a well-developed, well-nourished appearing, muscular, 65 inch long, 119 pounds Iraqi male civilian whose appearance is consistent with the reported age of 20 years. Lividity is fixed along the posterior surface of the body with pressure bearing area pallor. Rigor is minimal and easily broken. Brown paper bags cover the hands.

The scalp is covered with black hair in a normal distribution. The irides are brown and the pupils are round and equal in diameter. The conjunctivae and sclera are free of petechiae. The external auditory canals are free of abnormal secretions. The ears are unremarkable. The nares are patent and the lips are atraumatic. The frenula are intact. The nose and maxillae are palpably stable. The teeth appear natural and in fair repair. The upper right central incisor (#8) is broken and has decay present. A 0.7 x 0.2 cm scar and a 2.4 x 0.2 cm scar are on the chin. On the left cheek is a 0.5 x 0.3 cm circular scar.

The neck is straight, and the trachea is midline and mobile. Injuries of the neck are described below. The chest is symmetric. The abdomen is flat. The genitalia are those of a normal uncircumcised adult male. The testes are descended and free of masses. Pubic hair is present in a normal distribution. The buttocks and anus are unremarkable.

The upper and lower extremities are symmetric and without clubbing or edema. The hands and fingers are free of injuries. The fingernails are roughly trimmed secondary to previous evidence collection by US Army CID. There is no gross evidence of ligature marks on the wrists. Areas of blue discoloration on the posterior surfaces of the left and right wrist range in size from 0.5 x 0.5 cm to 5.1 x 0.4 cm. Three-1.2 cm in diameter- circular scars are on the anterior surface of the left forearm. Incision examination of the these areas reveals the discoloration is confined to the skin. A 1.0 x 0.4 cm scar is on the proximal portion of the right knee and a 1.8 x 0.4 cm scar is on the lateral aspect of the right knee. On the left knee are scattered scars that range in size from 1.4 x 0.3 cm to 2.5 x 1.7 cm. A 4.2 x 1.8 cm scar is on the anterior aspect of the left lower leg and overlies a palpable bony deformity that corresponds to a healed remote fracture. The left leg is visibly shorter than the right leg. The hands, legs and feet are free of petechiae.

In addition to the scars noted above, identifying marks include a tattoo (b)(6)
(b)(6) tattoo (b)(6) tattoo (b)(6)
(b)(6)

CLOTHING AND PERSONAL EFFECTS

The decedent was received clad in a white t-shirt.

MEDICAL INTERVENTION

1. Endotracheal intubation (in right mainstem bronchus)
2. Self adhesive electrocardiogram leads on the chest
3. Venipuncture sites on the right side of the neck (associated with underlying hematoma), right antecubital fossa, right forearm, and right femoral triangle.

4. Substernal puncture site associated with penetration of the posterior right ventricle, hemopericardium (50 ml), and hemoperitoneum (approximately 50 ml)

RADIOGRAPHS

A complete set of postmortem radiographs is obtained and demonstrate a remote, healed fracture of the left tibia and fibula with surrounding debris.

EVIDENCE OF INJURY

The ordering of the following injuries is for descriptive purposes only, and is not intended to imply order of infliction or relative severity.

Injuries of the Neck:

A 30.5 cm long dried brown ligature mark (furrow) of the neck is 6 ¼ inches below the top of the head at its end on the right side of the neck, 9 ¼ inches below the top of the head in the anterior midline of the neck and 7 ¼ inches below the top of the head at its end on the left side of the neck. The furrow width ranges from 0.7 cm (tapered end behind the right ear) to 1.5 cm (right side of the neck). Along the right side of the furrow is a 6.5 x 1.5 cm area of abrasion that contains two vertical 1.5 x 0.2 cm abrasions. The furrow is 0.2 cm deep on the anterior surface of the neck.

Layer by layer neck examination of the neck demonstrates mild congestion of the anterior strap muscles of the neck immediately superior to the furrow and no fractures of the hyoid bone or thyroid cartilage. There are no petechiae of the sclera, eyelids, oral mucosa, tongue or lips. The frenula are intact.

A 4.5 x 3.5 cm area of multiple, superficial linear abrasions is in the posterior midline of the upper back, 11 ½ inches below the top of the head. The abrasions have a near vertical orientation.

Injuries of the Torso

A 2.2 x 0.5 cm vertical abrasion is on the right flank. An ecchymosis is on the parietal pleural surface of the left sixth rib and left seventh intercostal space

Injuries of the Extremities

A 2.5 x 1.7 cm erythematous area is on the anterior surface of the left lower leg

INTERNAL EXAMINATION

HEAD:

The galeal and subgaleal soft tissues of the scalp are free of injury. The calvarium is intact, as is the dura mater beneath it. Clear cerebrospinal fluid surrounds the 1350 gm brain, which has unremarkable gyri and sulci. Coronal sections demonstrate sharp demarcation between white and grey matter, without hemorrhage or contusive injury. The ventricles are of normal size. The basal ganglia, brainstem, cerebellum, and arterial systems are free of

injury or other abnormalities. The base of the brain is soft and minimally liquefied. There are no skull fractures. The atlanto-occipital joint is stable.

NECK:

The dissection of the neck is described above. The thyroid cartilage and hyoid bone are intact. The larynx is lined by intact white mucosa. The thyroid gland is symmetric and red-brown, without cystic or nodular change. The tongue is free of bite marks, hemorrhage, or other injuries.

BODY CAVITIES:

The ribs, sternum, and vertebral bodies are visibly and palpably intact. Excess fluid in the pleural and peritoneal cavities is described above. The organs occupy their usual anatomic positions.

RESPIRATORY SYSTEM:

The right and left lungs weigh 410 and 460 gm, respectively. The external surfaces are smooth and deep red-purple. The pulmonary parenchyma is diffusely congested and edematous, consistent with dependent livor. No mass lesions or areas of consolidation are present.

CARDIOVASCULAR SYSTEM:

The 270 gm heart is contained in an intact pericardial sac. The epicardial surface is smooth, with minimal fat investment. A puncture of the right ventricle is described above. The coronary arteries are present in a normal distribution, with a right-dominant pattern. Cross sections of the vessels show no atherosclerosis. The myocardium is homogenous, red-brown, and firm. The valve leaflets are thin and mobile. The walls of the left and right ventricles are 1.0 and 0.2-cm thick, respectively. The endocardium is smooth and glistening. The aorta gives rise to three intact and patent arch vessels. The renal and mesenteric vessels are unremarkable.

LIVER & BILIARY SYSTEM:

The 1500 gm liver has an intact, smooth capsule and a sharp anterior border. The parenchyma is tan-brown and congested, with the usual lobular architecture. No mass lesions or other abnormalities are seen. The gallbladder contains a minute amount of green-black bile and no stones. The gallbladder mucosal surface is green and velvety. The extrahepatic biliary tree is patent.

SPLEEN:

The 210 gm spleen has a smooth, intact, red-purple capsule. The parenchyma is maroon and congested, with distinct Malpighian corpuscles.

PANCREAS:

The pancreas is firm and yellow-tan, with the usual lobular architecture. No mass lesions or other abnormalities are seen.

ADRENALS:

The right and left adrenal glands are symmetric, with bright yellow cortices and grey medullae. No masses or areas of hemorrhage are identified.

GENITOURINARY SYSTEM:

The right and left kidneys weigh 120 and 110 gm, respectively. The external surfaces are intact and smooth. The cut surfaces are red-tan and congested, with uniformly thick cortices and sharp corticomedullary junctions. The pelves are unremarkable and the ureters are normal in course and caliber. White bladder mucosa overlies an intact bladder wall. The bladder contains approximately 30 ml of cloudy urine. The prostate is normal in size, with lobular, yellow-tan parenchyma. The seminal vesicles are unremarkable. The testes are free of mass lesions, contusions, or other abnormalities.

GASTROINTESTINAL TRACT:

The esophagus is intact and lined by smooth, grey-white mucosa. The stomach contains approximately 10 ml of slightly red liquid. The gastric wall is intact. The duodenum, loops of small bowel, and colon are unremarkable. The appendix is present.

ADDITIONAL PROCEDURES

- Documentary photographs are taken by an OAFME photographer.
- Trace evidence and foreign material (sexual assault kit without oral swabs) is collected and given to SA (b)(6) USACID. Fingernail clippings were taken by USACID prior to transport to Dover AFB.
- Specimens retained for toxicologic testing and/or DNA identification are: vitreous, blood, urine, spleen, lung, liver, kidney, brain, bile, gastric contents, adipose tissue and psoas muscle
- The dissected organs are forwarded with body
- Personal effects are released to the appropriate mortuary operations representatives

MICROSCOPIC EXAMINATION

Selected portions of organs are retained in formalin, without preparation of histologic slides.

OPINION

This believed to be 20 year Iraqi male civilian detainee died from mechanical asphyxia caused by hanging. Investigation information to date indicates the decedent was a young detainee that was depressed about his captivity and being separated from his new wife. He was a detainee for approximately 3 months prior to his death. An interview of an Iraqi associate of the decedent by USACID indicates the decedent was considered a "loner" and did not associate with other detainees. The decedent reportedly read the Quran and desired to be closer to his god. The responding MPs did not report any history of struggle or violence at the scene. Autopsy examination revealed only injuries related to the hanging. The decedent's hands were loosely tied behind his back when discovered. It is possible for the decedent to have tied his own hands behind his back to prevent escape from the neck rope. Based on the autopsy and investigation, the manner of death is best classified as suicide.

If additional information becomes available, this case can be re-examined and the cause and manner of death changed if appropriate to do so.

(b)(6)

(b)(6) **Medical Examiner**



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

REPLY TO
ATTENTION OF

AFIP (b)(6)

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)

Name

MUNTHIR, AWAD HASAN

SSAN:

Autopsy: (b)(6)

Toxicology Accession #: (b)(6)

Date Report Generated: September 1, 2005

CONSULTATION REPORT ON CONTRIBUTOR MATERIAL

AFIP DIAGNOSIS

REPORT OF TOXICOLOGICAL EXAMINATION

Condition of Specimens: GOOD

Date of Incident: (b)(6) 2005

Date Received: 8/29/2005

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

None were found.

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| CERTIFICATE OF DEATH (OVERSEAS) Acte de décès (D'Outre-Mer) | | | |
|--|--|--|--|
| NAME OF DECEASED (Last, First, Middle) Nom du décédé (Nom et prénoms) BTB Munthir, Awad, Hasan | | GRADE Grade | BRANCH OF SERVICE Arme Civilian |
| ORGANIZATION Organisation | | NATION (e.g. United States) Pays Iraq | SOCIAL SECURITY NUMBER Numéro de l'Assurance Social (b)(6) |
| | | DATE OF BIRTH Date de naissance | SEX Sexe <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE |
| RACE Race | | MARITAL STATUS État Civil | |
| <input checked="" type="checkbox"/> CAUCASOID Caucasique | | <input type="checkbox"/> SINGLE Célibataire | <input type="checkbox"/> DIVORCED Divorcé |
| <input type="checkbox"/> NEGROID Négride | | <input type="checkbox"/> MARRIED Marié | <input type="checkbox"/> SEPARATED Séparé |
| <input type="checkbox"/> OTHER (Specify) Autre (Spécifier) | | <input type="checkbox"/> WIDOWED Veuf | <input type="checkbox"/> PROTESTANT Protestant |
| | | | <input checked="" type="checkbox"/> OTHER (Specify) Autre (Spécifier) Muslim |
| | | | <input type="checkbox"/> CATHOLIC Catholique |
| | | | <input type="checkbox"/> JEWISH Juif |
| NAME OF NEXT OF KIN Nom du plus proche parent | | RELATIONSHIP TO DECEASED Parenté du décédé avec le sus | |
| STREET ADDRESS Domicile à (Rue) | | CITY OR TOWN OR STATE (Include ZIP Code) Ville (Code postal compris) | |
| MEDICAL STATEMENT Déclaration médicale | | | |
| CAUSE OF DEATH (Enter only one cause per line) Cause du décès (N'indiquer qu'une cause par ligne) | | | INTERVAL BETWEEN ONSET AND DEATH Intervalle entre l'attaque et le décès |
| DISEASE OR CONDITION DIRECTLY LEADING TO DEATH ¹ Maladie ou condition directement responsable de la mort. Asphyxia by hanging | | | Minutes |
| ANTECEDENT CAUSES Symptômes précurseurs de la mort. | MORBID CONDITION, IF ANY, LEADING TO PRIMARY CAUSE Condition morbide, s'il y a lieu, menant à la cause primaire | | |
| | UNDERLYING CAUSE, IF ANY, GIVING RISE TO PRIMARY CAUSE Condition morbide, s'il y a lieu, menant à la cause primaire | | |
| OTHER SIGNIFICANT CONDITIONS ² Autres conditions significatives | | | |
| MODE OF DEATH Condition de décès | AUTOPSY PERFORMED Autopsie effectuée <input checked="" type="checkbox"/> YES Oui <input type="checkbox"/> NO Non | | CIRCUMSTANCES SURROUNDING DEATH DUE TO EXTERNAL CAUSES Circonstances de la mort suscitées par des causes extérieures Mode of Death: Pending |
| <input type="checkbox"/> NATURAL Mort naturelle | MAJOR FINDINGS OF AUTOPSY Conclusions principales de l'autopsie | | |
| <input type="checkbox"/> ACCIDENT Mort accidentelle | NAME OF PATHOLOGIST Nom du pathologiste (b)(6) | | |
| <input type="checkbox"/> SUICIDE Suicide | (b)(6) | | |
| <input type="checkbox"/> HOMICIDE Homicide | DATE 24 August 2005 | | AVIATION ACCIDENT Accident à Avion <input type="checkbox"/> YES Oui <input checked="" type="checkbox"/> NO Non |
| DATE OF DEATH (Hour, day, month, year) Date de décès (Heure, le jour, le mois, l'année) (b)(6) 2005 | | PLACE OF DEATH Lieu de décès Iraq | |
| I HAVE VIEWED THE REMAINS OF THE DECEASED AND DEATH OCCURRED AT THE TIME INDICATED AND FROM THE CAUSES AS STATED ABOVE. J'ai examiné les restes mortels du défunct et conclus que le décès est survenu à l'heure indiquée et à la suite des causes énumérées ci-dessus. | | | |
| NAME OF MEDICAL OFFICER Nom du médecin militaire ou du médecin sanitaire (b)(6) | | TITLE OR DEGREE Titre ou diplôme Medical Examiner | |
| GRADE Grade (b)(6) | | INSTALLATION OR ADDRESS Installation ou adresse Dover AFB, Dover DE | |
| DATE Date 16 SEP 05 | | (b)(6) | |

DD FORM 1 APR 77 2064

REPLACES DA FORM 3565, 1 JAN 72 AND DA FORM 3568-R(PAS), 26 SEP 75, WHICH ARE OBSOLETE.

MEDCOM 0304

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

| DISPOSITION OF REMAINS | | | |
|-------------------------------------|-----------------------------------|--------------------------|-------|
| NAME OF MORTICIAN PREPARING REMAINS | GRADE | LICENSE NUMBER AND STATE | OTHER |
| INSTALLATION OR ADDRESS | DATE | SIGNATURE | |
| NAME OF CEMETERY OR CREMATORY | LOCATION OF CEMETERY OR CREMATORY | | |
| TYPE OF DISPOSITION | | DATE OF DISPOSITION | |
| REGISTRATION OF VITAL STATISTICS | | | |
| REGISTRY <i>(Town and Country)</i> | DATE REGISTERED | FILE NUMBER | |
| | | STATE | OTHER |
| NAME OF FUNERAL DIRECTOR | ADDRESS | | |
| SIGNATURE OF AUTHORIZED INDIVIDUAL | | | |

DD FORM 2064, APR 1977 (BACK)

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