

STATEMENT

(b)(6), (b)(7)(C) : Camp Al Asad Iraq  
 Date : February 23, 2008

(b)(6), (b)(7)(C) USN, make the following free and voluntary statement to (b)(6), (b)(7)(C) whom I know to be a Representative of the United States Naval Criminal Investigative Service. I make this statement of my own free will and without any threats made to me or promises extended. I fully understand that this statement is given concerning my knowledge of Walid Tawfiq

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

(b)(6), (b)(7)(C) for the purposes of identification I am a (b)(6) year old male and my social security number is (b)(6), (b)(7)(C). I was born in (b)(6), (b)(7)(C) on (b)(6), (b)(7)(C). I am approximately (b)(6) inches tall and weigh (b)(6), (b)(7)(C) pounds, and have (b)(6), (b)(7)(C) hair and (b)(6), (b)(7)(C) eyes. I am currently assigned as the Independent Duty Corpsman (IDC) at the Al Asad Regional Detention Facility (RDF), Camp Al Asad Iraq (b)(6), (b)(7)(C).

(b)(6), (b)(7)(C) I first came into contact with Detainee (b)(2) who I now know is Walid Tawfiq JABAR, on 12FEB08 at approximately 1608 when he was processed into the RDF. When he was brought to me, I asked him about his medical history. He told me, through our interpreter, that he had a kidney problem. I attempted to get further information, however JABAR just said he was told he had a kidney problem by a local doctor and could provide nothing further. JABAR also had medication on his person that he said was given to him. The medication he had was hydrocortisone, I again asked him why he was taking the medication, and again, he just told me it was given to him to take by a doctor. Since the dosage he had was so low, I decided it was o.k. to keep him on the medication. I was more worried that stopping the medication was more dangerous than letting him continue, due to me not being able to find out exactly why he was taking it. Additionally JABAR denied that he had any additional medical problems while he was being processed into the RDF. Due to his self described kidney problems, I informed him to continue drinking water, and he agreed (b)(6), (b)(7)(C).

(b)(6), (b)(7)(C) next time I saw JABAR was on 14FEB08 at approximately 1055 during sick call. I perform sick call once a day, unless a detainee needs medical treatment sooner. When I got to his cell, one of the USMC Guard Force members told me JABAR had thrown up in his cell I saw the vomit and noticed it appeared to be water. I asked JABAR why he had thrown up, and he told me that he did not know why he threw up. At that point he acted like he passed out. I then entered his cell and held an ammonia inhaler under his nose, and he immediately woke up. JABAR then closed his eyes again, so I placed the same inhaler under his nose again. I could see that JABAR then began holding his breath, so I shook his arm. He did not move after I shook his arm, so I preformed a sternum rub and he woke up (b)(6), (b)(7)(C).

(b)(6), (b)(7)(C) After he woke up I completed a medical examination on JABAR and could find nothing wrong with him. The exam consisted of checking his vitals and a head to toe complete physical exam. Afterwards I asked him why he was acting like he was sick, and he told me his kidneys were tired. At that point I told him to stop acting like he was sick, because I would not be able to accurately tell when he was really sick. JABAR indicated he understood and said he would stop. We then cleaned up his cell and he was taken by the Guard Force guys to take a shower. I watched him as he left and observed that he had no problems. I then left and continued conducting sick call (b)(6), (b)(7)(C).

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

Statement of voluntary sworn statement

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

USN

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

on February 23, 2008

(b)(6), (b)(7)(C) I next saw JABAR the same day at approximately 1223. I wanted to check on his progress and I saw him attempt to make him self throw up. He would put a piece of food on his tongue and attempt to dry heave. I did not actually see him throw up. I went to his cell and asked him why he would do that, he told me his stomach felt funny. I told him that if he ate, I would give him medication to help him not throw up. JABAR agreed to that and began eating. I waited a little bit to see if he would throw up and he did not. Just to be on the safe side I gave him Phenergan so he would not throw up. Once I gave JABAR the medication I told the Guard Force to keep and eye on him because the medication would make him drowsy. At that point I left the cell and went back to work (b)(6), (b)(7)(C)

(b)(6), (b)(7)(C) approximately 1602 the same day the Guard Force guys told me that JABAR was refusing to eat or drink. I went to his cell and examined him. I woke him up and asked him why he refused to eat, however he did not answer. I then checked his mouth, lips, his fingertips, and looked at his urine bottle. I noticed he appeared mildly dehydrated due to his urine being dark yellow, and his mucosal membranes being a bit dry. I told JABAR I could give him an IV to help him get re-hydrated and he agreed. At that point he was brought to my office and I administered the IV. The IV contained normal saline and electrolytes. JABAR took three full bags of IV, and was then brought back to his cell (b)(6), (b)(7)(C)

(b)(6), (b)(7)(C) the next time I dealt with JABAR was during sick call on 16FEB08 at approximately 1035. I asked him how he was feeling and he told me he felt like he had to throw up. I had him drink some water and drink some pepto bismal. A short time after that, JABAR attempted to throw up. I again asked him why he was trying to throw up and he said no. I then asked him to try to eat or drink, and he again said no. I then told him I could give him medication to keep him from throwing up if he ate, and he agreed. I then gave him Phenergan and continued sick call. On my way back he was asleep in his cell. I also noticed he had not eaten (b)(6), (b)(7)(C)

(b)(6), (b)(7)(C) at approximately 2000, the Guard Force told me that he refused all meals. When I went to his cell, I noticed he had only drank one and one half bottles of water. The Guard Force also advised me he had attempted multiple times to make himself throw up through out the day. I told him I could give him and IV to assist with his hydration, and he agreed. So I moved him to my office and administered two bags of the (b)(6), (b)(7)(C) he had received before. Once the IV was administered JABAR was moved back to his (b)(6), (b)(7)(C)

(b)(6), (b)(7)(C) at 2135 the same day I observed him, from the medical office, attempting to make him self throw up. He was doing the, as he commonly did, by sticking his finger down his throat. I went over and asked him why he was attempting to make himself throw up, and he told me because he did not want to eat. I explained to him that he should stop and it was not good for him. At that point he pretended to pass out. He was sitting on his mat and looked over to his side and slowly laid down, then once down, he closed his eyes. I watched him for about 20 seconds when I noticed him open his eyes and look around to see who was watching him. He saw me looking at him and he kept his eyes on me. I had him sit up and drink some water. I told him again to stop pretending because we would not know if he was really sick. He said he understood. Then he just gave me the deer in the headlights look and would not answer anymore questions. So at that point I went back to the medical office (b)(6), (b)(7)(C)

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

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(b)(6), (b)(7)(C) [redacted]  
 (b)(6), (b)(7)(C) [redacted]

on February 23, 2008

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

On 17FEB08 at approximately 1730, I noticed JABAR laying in his cell, and I was told by the Guard Force he had not eaten any of his three meals, and had only drank two bottles of water. I looked at his urine bottle which looked straw colored, which to me meant he was hydrated. I asked JABAR why he was not eating and he told me he did not want to throw up. I told him if he did not stick his finger down his throat he would not throw up. After saying that, he just looked at me and did not say anything. I got a chair and sat it in front of his cell, and told him he needed to eat. He sat up and ate three bags of peanuts and drank a half bottle of water. I gave him an over the counter multivitamin, and he then laid down and went to sleep.

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

On 18FEB08 at approximately 0930, while conducting sick call, the Guard Force again told me JABAR had not been eating. I also saw his food, untouched, in his cell. I asked him why he was not eating, and he responded by saying he felt good. I asked him again why he did not eat, and he again said because he felt good. I sat in front of his cell again, and had him eat one fruit snack and two packages of peanuts. He also drank three fourths of a bottle of water. Afterwards he just laid down and went to sleep. I then went about continuing sick call for the rest of the detainee.

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

At approximately 1248, I sat down with him again and just talked to him. I began to notice a pattern with JABAR, wherein he would only eat if I was sitting with him. I got JABAR to eat two packages of peanuts and one half a bag of bagel chips. JABAR also had one half of a bottle of water. Afterwards I asked him how he was feeling and he said he was feeling better. I noticed his urine bottle was half full and bright yellow. That to me meant he was hydrated. I also noted he had not thrown up for the previous two days.

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

On 1641, I sat down with him again, as the trend I had previously noticed continued, and he ate three bags of peanuts and drank one half bottle of water. He then got up from the seated position with out any problems, he did not act like he was dizzy, or that he had any problems for that matter. JABAR then urinated and filled the bottle approximately halfway. His urine was light yellow, which again indicated he was hydrated. After he was done, I asked him how he was doing and he told me he felt good. I then went back to my duties.

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

On 19FEB08, sometime in the late afternoon I was notified by our react sergeant that I was needed in the RDF immediately. I was in the barracks at the time, so I ran from there to the detention facility. Upon my arrival I asked the guard who let me into the facility what the problem was, and he said I needed to go to the HET compound. I went into the HET compound and noticed Guard Force members standing right outside the interrogation booth. I went inside and saw the other IDC, [redacted] and [redacted] who was the NSW interrogator, performing CPR on a detainee I later learned was JABAR. I asked what happened and was told he had just collapsed. I saw that the AED was attached to JABAR and was reading no shock advised. I felt JABAR for a pulse, and found none. I had the HMI's continue C [redacted]

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

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

...ation of voluntary sworn statement  
(b)(6), (b)(7)(C)

on February 23, 2008

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

I called one of the Guard Force guys to retrieve my advanced airway kit and my heart monitor. Once I had them, I attached the heart monitor, and had them stop CPR so I could see if there was electrical activity in the heart. At that time he was flat lined, so I had the HMI's continue CPR. I then moved to JABAR's head and intubated him with endotracheal tube. (b)(6), (b)(7)(C) began ventilating him with a bag valve mask. I then had (b)(6), (b)(7)(C) switch out with a Guard Force member doing chest compressions, and had him begin an IV. At that point the Ambulance arrived, and I asked the paramedic for one milligram of epinephrine. The paramedic gave me the medication and I then administered it to JABAR. CPR was continued, and the Ambulance crew attached their heart monitor and we removed ours. I gave one milligram of atropine, via IV, to JABAR and CPR was continued. I noticed a rhythm change on the heart monitor, and we stopped CPR and checked for a pulse. JABAR had a pulse, so the ambulance crew checked for blood pressure, however he was still not breathing. At that point I began rescue breathing, JABAR was moved to the Ambulance and was transported to the hospital (b)(6), (b)(7)

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

During transport I continued rescue breathing, via the bag. Once we arrived at the hospital I turned care over to the hospital staff. Once JABAR was in the hospital, I answered several questions the hospital staff had regarding the emergency care JABAR had received up to that point. After answering the questions I went back to work at the RI. (b)(6), (b)(7)

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

This statement, consisting of this page and 3 other page(s) was typed for me by (b)(6), (b)(7)(C) as we discussed its contents. I have read and understand the above statement. I have been given the opportunity to make any changes or corrections I desire to make and have placed my initials over the changes or corrections. This statement is the truth to the best of my knowledge and belief (b)(6), (b)(7)(C)

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

Signature

Sworn to and subscribed before me this 23 day of FEB in the year 2008 at

AL ASAD (RAO)

Witness

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

STEVE ALLEN

Investigative Service  
AUTH: DERIVED FROM ARTICLE 136,  
UCMJ (10 U.S.C. 936) AND 5 U.S.C. 303

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

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# U.S. NAVAL CRIMINAL INVESTIGATIVE SERVICE

562595 13:23 20080312 IN:SSDEMAIL #59540 OUT:CODE0224C #6044

INVESTIGATIVE ACTION

01MAR08

CONTROL: 20FEB08-24IZ-0029-7HMA

V/JABAR, WALID TAWFIQ/CIV  
 M/W/FNIQ/N//31DEC87/IRAQ  
 SUPP: DETAINEE NUMBER (b)(2)

RESULTS OF INTERVIEW OF (b)(6), (b)(7)(C) USMC

1. On 23Feb08, (b)(6), (b)(7)(C) (b)(6), (b)(7)(C) Regional Detention Facility (RDF), Camp Al Asad, Iraq was interviewed (b)(6), (b)(7)(C) (b)(6), (b)(7)(C) said that on 19Feb08, he was tasked with assisting in the movement of V/JABAR from his cell in the RDF to a conex box to be interrogated.

2. (b)(6), (b)(7)(C) works in a different part of the RDF than where V/JABAR was housed, and did not have previous contact with him. (b)(6), (b)(7)(C) noticed nothing unusual about V/JABAR during the move. V/JABAR was moving under his own power and responding to instructions. V/JABAR (b)(7)(E) handcuffed, and tried to sit with no chair beneath him when he entered the conex box. Approximately one in four detainees exhibits similar behavior. V/JABAR then stood back up, partially with help and partially under his own power. Per the interrogator's instructions, V/JABAR's handcuffs were removed and he was seated (b)(6), (b)(7)(C) then went back to work.

3. About fifteen to twenty minutes later (b)(6), (b)(7)(C) located (b)(6), (b)(7)(C) at the RDF and said the interrogator needed a corpsman. Another person (NFI) got a corpsman (NFI), and the group jogged together to the conex box. Once inside, the corpsman took V/JABAR's pulse and said he needed a stethoscope (b)(6), (b)(7)(C) ran back to the RDF and retrieved a stethoscope, returning about one minute later.

4. The corpsman continued to work on V/JABAR, and called for the duty Independent Duty Corpsman (IDC). When the duty IDC arrived and spoke with the junior corpsman, the IDC called a medical code blue. A second IDC arrived (NFI), as well as the Officer In Charge (NFI) and Security Chief (NFI) (b)(6), (b)(7)(C) stood in the back of the conex box, and others were inside and outside the box. The three IDC's worked on V/JABAR, using a machine with leads attached to V/JABAR's torso that read, "Stand back," and, "No shock needed." Someone, possibly the junior corpsman, brought a stretcher into the box (b)(6), (b)(7)(C) helped position V/JABAR on the stretcher. The interrogator performed chest compressions on V/JABAR, relieved by (b)(6), (b)(7)(C)

5. (b)(6), (b)(7)(C) was then informed another detainee needed to be moved in an unrelated matter. (b)(6), (b)(7)(C) left with (b)(6), (b)(7)(C) to attend to the other detainee (b)(6), (b)(7)(C) had no further contact with V/JABAR.

## BIOGRAPHICAL DATA

EMPLOYMENT: U.S. MARINE CORPS

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 PAGE 1

EXHIBIT (9)

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ACLU-RDP-5802-05

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# U.S. NAVAL CRIMINAL INVESTIGATIVE SERVICE

20FEB08-24IZ-0029-7HMA

01MAR08

SUBJ: V/JABAR, WALID TAWFIQ/CIV

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

SSN:

DOB:

POB:

RESIDENCE: SEE CASE FILE

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

REPORTED BY: Special Agent

OFFICE: NCISRA Iraq, Camp Al Asad

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PAGE 2 LAST V2 LNY

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

### WARNING

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ACLU DD II NCIS 1562

Handwritten notes and stamps, including "Date" and "Time" fields with illegible entries, and a large signature or stamp at the bottom right.

STATEMENT

Place : NCIS Office, Al Asad, Iraq (b)(6), (b)(7)  
 Date : February 24, 2008 (b)(6), (b)(7)(C)

(b)(6), (b)(7)(C) I, (b)(6), (b)(7)(C) make the following free and voluntary statement to (b)(6), (b)(7)(C) whom I know to be a Representative of the United States Naval Criminal Investigative Service. I make this statement of my own free will and without any threats made to me or promises extended. I fully understand that this statement is given concerning my knowledge of the death of detainee (b)(2) (b)(2)

(b)(6), (b)(7)(C) For purposes of identification I am a Hospital Corpsman First Class in the United States Navy, assigned to SEAL Team One in Al Asad, Iraq. I was born on (b)(6), (b)(7)(C) (b)(6), (b)(7)(C), and my social security number is (b)(6), (b)(7)(C)

(b)(6), (b)(7)(C) I first learned about detainee (b)(6), (b)(7) on about 17 Feb 08. I knew we had detainees in the RDF, but didn't know their backgrounds at that point. I talked to (b)(6), (b)(7)(C) and we decided I was going to interview 10821. The detainee was related to detainee (b)(6), (b)(7) who admitted to having insurgent ties. We wanted to determine (b)(6), (b)(7) knowledge about this (b)(6), (b)(7)(C)

(b)(6), (b)(7)(C) told me he tried to interview (b)(6), (b)(7)(C) twice before. The first time (b)(6), (b)(7)(C) said the detainee pretended to pass out (b)(6) said he knew he was pretending because he appeared to make sure he didn't hit his head or injure himself when he fell. He said he cut the session to give it 24 hours to make sure the detainee was medically cleared (b)(6), (b)(7)(C)

(b)(6), (b)(7)(C) the next day, he interviewed (b)(6), (b)(7)(C) again (b)(6), (b)(7)(C) said he could get him to talk about day to day stuff related to insurgency. When he tried to talk about insurgency, (b)(6), (b)(7)(C) pretended to pass out again.

(b)(6), (b)(7)(C) On the 18<sup>th</sup>, I tried to interrogate (b)(6), (b)(7)(C) but there was nobody there to sign the interrogation plan. On the 19<sup>th</sup> I got the interrogation plan signed and presented it to the RDF. I waited in the interrogation box with (b)(6), (b)(7)(C) the interpreter, for 10 or 15 minutes until 4 guards came with (b)(6), (b)(7)(C) The guards were telling me that (b)(6), (b)(7)(C) a history of pretending to pass out. I asked if he had been medically cleared today. They said yes (b)(6), (b)(7)(C)

(b)(6), (b)(7)(C) responded to verbal commands. He stepped up when they told him to when entering the box. (b)(7)(E) The guards asked if I wanted his cuffs on or off, and I said to take them off. (b)(6), (b)(7)(C) jumped over as a guard held him up from behind as they were removing his cuffs. After that, he was guided to a chair. He seemed to sit in the chair under his own power. His eyes were open and he was looking at me. He looked at me for a little while, and then he looked at the floor. He looked towards the table. He slid down in his chair, leaned over to the side, and out his head on the table. (b)(6), (b)(7)(C)

(b)(6), (b)(7)(C) I was talking to him, telling him the guard force was gone and he could quit acting. I said we only had a few questions for him and that if he didn't act like he was healthy, we wouldn't be able to release him because we didn't want to release him with a health condition. He was mostly looking at the wall when I was talking to him. Sometimes he looked at me. He didn't say anything (b)(6), (b)(7)(C)

Continuation of voluntary sworn statement

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

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

on February 24, 2008

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

After a while, I stopped talking and watched him. I could see his stomach. I could tell he was still breathing. I thought that if we waited him out, he might quit acting

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

(b)(6), (b)(7)  
(C) (b)(2)

As an interrogator, I am prohibited by SOP from touching a detainee. As a corpsman, I tried to monitor visually. He exhibited no agonal breathing, which would indicate respiratory distress. As I noticed his breaths had slowed down, I timed him for one minute. He had 5 breaths, about half of what I would estimate when he arrived in the box. I immediately went outside and got the guard and told him to bring medical with a pulse oximeter. I went back inside. I saw no change in the detainee. I waited what was probably a couple minutes. The corpsman had not yet arrived. I told the guard we were done with the session because the detainee wasn't looking good and needed medical attention.

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

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

Arrived and he brought the pulse oximeter up. He placed the pulse oximeter on the detainee's finger. It read 95% O2 saturation with a 312 beats per minute pulse. I felt it was a false reading due to the excessive pulse. Also, with the amount of respirations the detainee had, I didn't think he'd be getting 95% O2. I switched to another finger to get a better reading. It didn't get a reading. I tried to take a radial pulse. After he tried to take a radial pulse, he tried to feel for a pulse over the heart, and then he asked a Marine to go and get his stethoscope. When the Marine came back with his stethoscope, I listened for a heartbeat and then asked the guard to get the IDC.

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

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

Continued to work on the detainee. At some point, he left for a while. At some point, the IDC arrived, and at some point, I arrived. The IDC checked for a heartbeat and told the Marines to get the guy out of the chair and put the guy on the floor. He rechecked for a heartbeat and he told me to go get a pocket mask, and told the guard to call a Code Blue. He then asked the Marines if anybody knew how to do CPR. I told the IDC that I was an IDC as well and I could do CPR. At that point, in my mind, I had to act as a medical professional and cease to be an interrogator. I started doing chest compressions and the other IDC was doing respirations.

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

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

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

I asked if they had an AED. Somebody went and got the AED and brought it in. I think I hooked up the AED. I placed the pads on the patient. I turned the AED on and we stopped CPR so the AED could analyze. The AED advised there was no shock necessary and we continued CPR. After about four cycles of CPR, the AED analyzed again. Once again, it said no shock necessary. We continued CPR and then the AED analyzed again and determined there was no shock necessary. Then, a Marine that knew CPR replaced me doing the compressions.

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

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

Another IDC came in. He hooked up a three lead EKG. After that, he had a Marine go get his laryngoscope set so he could intubate the patient. A Marine was intubating, I started an IV of normal saline. I continued to monitor the IV after that to make sure it was still flowing. Then, the ambulance showed up after that.

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

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

The ambulance crew showed up with their defibrillator and I detached his three lead EKG so the paramedics could attach their defibrillator. I asked the paramedic if he had epinephrine, because it was determined that he had a non-shockable rhythm. He gave the epinephrine via the IV and then he followed it up with another medication intravenously as well. I don't know what

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

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(b)(6), (b)(7)(C)  
Continuation of voluntary sworn statement  
(b)(6), (b)(7)(C)

on February 24, 2008

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

medication was. The patient's heart seemed to respond to the drugs and his heart started to beat again. At that time, we lowered him onto the stretcher and put him in the ambulance.

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

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

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

This statement, consisting of this page and 2 other page(s) was typed for me by [redacted] we discussed its contents. I have read and understand the above statement. I have been given the opportunity to make any changes or corrections I desire to make and have placed my initials over the changes or corrections. This statement is the truth to the best of my knowledge and belief

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

Signature: [redacted]

Sworn to and subscribed before me this 24<sup>th</sup> day of February in the year 2008 at

NCIS Camp Al Asad, Iraq

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

Witness:

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

Representative, Naval Criminal Investigative Service  
AUTH: DERIVED FROM ARTICLE 136,  
UCMJ (10 U.S.C. 936) AND 5 U.S.C. 303

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

597

STATEMENT

(b)(6), (b)(7)(C) Place : Camp Al Asad Ira  
 (b)(6), (b)(7)(C) Date : February 24, 2008

(b)(6), (b)(7)(C) (b)(6), (b)(7)(C) Civilia (b)(6), (b)(7)(C) make the following free and voluntary statement to (b)(6), (b)(7)(C) whom I know to be a Representative of the United States Naval Criminal (b)(6), (b)(7)(C) Investigative Service. I make this statement of my own free will and without any threats made to me (b)(6), (b)(7)(C) or promises extended. I fully understand that this statement is given concerning my knowledge of the (b)(6), (b)(7)(C) Detainee death on 19FEB08

(b)(6), (b)(7)(C) For purposes of identification I am a naturalized American citizen and my social security number is (b)(6), (b)(7)(C) (b)(6), (b)(7)(C) I was born in (b)(6), (b)(7)(C) on (b)(6), (b)(7)(C) but moved to the United States in July of 1971. (b)(6), (b)(7)(C) I am approximately (b)(6), (b)(7)(C) feet (b)(6), (b)(7)(C) inches tall and weigh (b)(6), (b)(7)(C) pounds. I am currently employed by L3 (b)(6), (b)(7)(C) Communications as a Category 2 linguist, and am assigned to the NSW Team in Al Asad Iraq.

(b)(6), (b)(7)(C) On 19FEB08, at approximately 1430 (b)(6), (b)(7)(C) picked me up from the NSW compound and (b)(6), (b)(7)(C) told me that we had an interrogation to do at the Regional Detention Facility (RDF). I said O.K. and (b)(6), (b)(7)(C) we left the NSW area and drove to the RDF (b)(6), (b)(7)(C) new about the interrogation of this specific (b)(6), (b)(7)(C) Detainee from orders received from his boss. I assumed that is how (b)(6), (b)(7)(C) knew who we were going to (b)(6), (b)(7)(C) interrogate.

(b)(6), (b)(7)(C) When we got to the RDI (b)(6), (b)(7)(C) signed all the appropriate documentation necessary to conduct an (b)(6), (b)(7)(C) interrogation and we were allowed into the HET compound. We then both went to the interrogation (b)(6), (b)(7)(C) room and set it up in preparation for the interrogation. By set it up, I me arrange the chairs and turn on (b)(6), (b)(7)(C) the heater do to the cold weather.

(b)(6), (b)(7)(C) Once the room was set up, we both waited for the Detainee to enter to room. It was about 10 to 15 (b)(6), (b)(7)(C) minutes later when the detainee was brought in. This was the first time I had ever seen this particular (b)(6), (b)(7)(C) Detainee. It only usually takes 2 guards to bring a Detainee into the room, however this time the (b)(6), (b)(7)(C) Detainee was accompanied by four guards. I attributed this to the Detainees condition, by condition, I (b)(6), (b)(7)(C) mean he looked very weak and was passing out. The guards mentioned this particular detainee had a (b)(6), (b)(7)(C) history of "faking" during interrogations. At that point (b)(6), (b)(7)(C) asked one of the guards if he would stand (b)(6), (b)(7)(C) by right outside the interrogation room just in case the Detainee had a medical issue, and the Marine (b)(6), (b)(7)(C) guard said that he would. I don't remember that Marines name. I also remember (b)(6), (b)(7)(C) asking the (b)(6), (b)(7)(C) guards if the Detainee had been medically cleared for interrogation and the guards said that the (b)(6), (b)(7)(C) Detainee was cleared.

(b)(6), (b)(7)(C) The Detainee was seated and he almost immediately slumped over. His head ended up resting on the (b)(6), (b)(7)(C) table. I took this to mean that the Detainee was faking it, due to what the Marines said and from what I (b)(6), (b)(7)(C) could see from sitting behind him. The guards had already left and it was just me and (b)(6), (b)(7)(C) with the (b)(6), (b)(7)(C) Detainee. (b)(6), (b)(7)(C) looked at the Detainee and told me to tell him to stop faking and that he only wanted (b)(6), (b)(7)(C) to ask a few question, then the Detainee would be able to return to his cell. I repeated this in Arabic a (b)(6), (b)(7)(C) few times; however the Detainee did not answer me. While I was sitting behind him I noticed that (b)(6), (b)(7)(C) liquid was dripping from the Detainee and hitting the floor. I told (b)(6), (b)(7)(C) about the liquid and (b)(6), (b)(7)(C) told (b)(6), (b)(7)(C)

Continuation of voluntary sworn statement  
(b)(6), (b)(7)(C) Civilian (b)(6), (b)(7)(C)  
on February 24, 2008

(b)(6), (b)(7)(C) me it was just saliva from his mouth. I then got up and looked at the Detainee from the side and I (b)(6), (b)(7)(C) could see his eyes moving a little and I could hear him breathing.

(b)(6), (b)(7)(C) went back to my chair and waited for (b)(6), (b)(7)(C) to tell me what to translate next. (b)(6), (b)(7)(C) asked me to tell (b)(6), (b)(7)(C) Jim again to stop faking, which I did, however the Detainee did not respond. I then smelt what I (b)(6), (b)(7)(C) thought was feces, so I looked at the Detainees bottom and I noticed it was wet. I told (b)(6), (b)(7)(C) and he (b)(6), (b)(7)(C) came around and looked at it. After seeing it he went to the door and called for the guards.

(b)(6), (b)(7)(C) The guards came in, looked at the Detainee, and called the medical people. I believe when the medical (b)(6), (b)(7)(C) people arrived they checked his pulse and began CPR. There were several people in the room at that (b)(6), (b)(7)(C) time, so one of the medical guys asked us to leave the interrogation room. I left the room and stood (b)(6), (b)(7)(C) outside. I did notice that (b)(6), (b)(7)(C) was helping the medical people with the Detainee. The ambulance (b)(6), (b)(7)(C) arrived as well as other medical people, and they began working on the Detainee. The Detainee was (b)(6), (b)(7)(C) then taken by the ambulance to the hospital.

(b)(6), (b)(7)(C) At that point and (b)(6), (b)(7)(C) and I went back to the RDF and filled out some reports about what happened. (b)(6), (b)(7)(C) After we were finished we left the RDF and returned to the NSW camp. By the time we got back it was (b)(6), (b)(7)(C) about 6:00 so we went to dinner. Afterwards, we both wondered why the Detainee was he let into the (b)(6), (b)(7)(C) interrogation room. We both guessed it was due to his history, according to the guards, that he was (b)(6), (b)(7)(C) faking it.

(b)(6), (b)(7)(C) This statement, consisting of this page and 1 other page(s) was typed for me by (b)(6), (b)(7)(C) as (b)(6), (b)(7)(C) we discussed its contents. I have read and understand the above statement. I have been given the (b)(6), (b)(7)(C) opportunity to make any changes or corrections I desire to make and have placed my initials over the (b)(6), (b)(7)(C) changes or corrections. This statement is the truth to the best of my knowledge and belief (b)(6), (b)(7)(C)

Signature

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

Sworn to and subscribed before me this 24 day of Feb in the year 2008 at

ALASAD IRAQ (b)(6), (b)(7)(C)

Witnessed: \_\_\_\_\_ Investigative Service

AUTH: DERIVED FROM ARTICLE 136, UCMJ (10 U.S.C. 936) AND 5 U.S.C. 303

599

**STATEMENT**

**Place:** Al Asad, Iraq (b)(6), (b)(7)  
**Date:** 23Feb (b)(6), (b)(7)(C)

(b)(6), (b)(7)(C) make the following free and voluntary statement (b)(6), (b)(7)(C)

whom I know to be a Representative of the United States Naval Criminal Investigative Service. I make this statement of my own free will and without any threats made to me or promises extended. I fully understand that this statement is given concerning my knowledge of events around the death of a detainee at Al Asad Airbase, Iraq (b)(6), (b)(7)(C)

(b)(6), (b)(7)(C) For purposes of identification, I am an HM3 in the United States Navy. I am temporarily assigned to Task Force Military Police, 1/10 Fox Battery, Al Asad Airbase, Iraq. I was born on (b)(6), (b)(7)(C) in (b)(6), (b)(7)(C) and my social security number is (b)(6), (b)(7)(C)

On 19Feb08, I was the duty corpsman in the RDF when some guards brought in detainee (b)(2) for a scars and marks examination. I remember him previously being on the meds list, but there was nothing significant about it. He had been taking a hydrocortisone pill once a day. He came in with the medicine. I don't know what it was for, but it would be on his detainee record. During the scars and marks examination, the detainee seemed normal. He was moving under his own power and was doing what I asked him to do. There were no new scars or marks on his body. After the examination was finished, the guards left with him. and (b)(6), (b)(7)(C)

(b)(6), (b)(7)(C) Less than a half hour later, a guard came to get me. He delivered the message that I needed to bring a pulse ox to the conex box. I immediately got a pulse ox and went to the box. When I got there, I saw the detainee in the chair with his back to me leaning on the table. I used the pulse ox to check the oxygenation of his blood. I didn't get a good reading, so I switched it to the other hand. I got an O2 sat and a pulse reading. I don't remember the numbers. The detainee seemed conscious based on his muscle response, but he was not talking or moving around. I sent one of the guards to get my stethoscope. The detainee had a weak pulse and shallow breathing. I kept monitoring him. The guard came back with my stethoscope. I listened to the detainee's heart and lungs. The sounds were fair (b)(6), (b)(7)(C)

(b)(6), (b)(7)(C) The detainee's condition appeared worse than I first observed. Previously, the interrogator informed me he was an Independent Duty Corpsman. I felt comfortable leaving the detainee in his care while I went to get more equipment and contact our duty IDC, (b)(6), (b)(7)(C) (b)(6), (b)(7)(C) I left the box and had to wait for somebody to open the gate. I don't know how long it took. I was just concentrating on getting equipment as fast as I could. When I got to the office in the RDF, I passed the SOG and told him I needed the Duty IDC to get to the RDF as soon as possible. I grabbed the propaq, our crash bag, and a med bag (b)(6), (b)(7)(C)

(b)(6), (b)(7)(C) and I got to the HET compound at the same time, and we were both waiting for somebody inside to open the gate back up. We went together to the conex box right after that. When (b)(6), (b)(7)(C) got there, he took over. He had us get the detainee out of the chair and onto the floor. He did a sternum rub and listened for breath sounds (b)(6), (b)(7)(C)



STATEMENT

(b) (6) I directed me to get blood pressure. While I was putting the cuff on the detainee's arm, he and the interrogator began CPR. (b)(6), (b)(7) started at the head while the in (b)(6), tor did chest compressions. (b)(6), (b)(7)(C) had me get out the AED. I gave the (b)(6), to the interrogator and he put them on the patient. I continued trying to get a blood pressure while (b)(6), (b)(7) handled the AED. The AED said shock was not necessary. (b)(6), (b)(7)(C) and the interrogator started CPR again (b)(6), (b)

(b)(6), (b)(7)(C) wanted a bag valve mask, and I went to get one. As I was getting out of the gate, (b)(6), (b)(7) and I crossed paths. He was on his way to the box. I looked for a bag valve mask, but couldn't find one. As I continued to look for the mask, runners came to me and asked me for other equipment. I got it for them and they ran back to the box with the equipment (b)(6), (b)(7)

(b)(6), (b)(7)(C) didn't find a mask. As I went back out, I saw an ambulance arrive. One of the Marines came up to me and told me they needed me to go to my office and do a scars and marks examination on another detainee. I continued with my work. I had no further interactions with detainee # (b)(2) until I was was told to write a statement for my OIC to sig (b)(6), (b)(7)(C)

(b) (6), (b)(7)(C) This statement, consisting of this page and 1 other page(s), was typed for me t (b)(6), (b)(7)(C) (b)(6), (b)(7)(C) we discussed its contents. I have read and understand the above statement. I have been given the opportunity to make any changes or corrections I desire to make and have placed my initials over the changes or corrections. This statement is the truth to the best of my knowledge and belie (b)(6), (b)

Signature:  
(b)(6), (b)(7)(C)

Sworn to and subscribed before me this 23rd day of February in the year 2008 at Camp Al Asad, Iraq.

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

Witnessed: \_\_\_\_\_

Investigative, Naval Criminal Investigative Service

AUTH: DERIVED FROM ARTICLE 136, UCMJ (10 U.S.C. 936) AND U.S.C. 303

101

STATEMENT

Place : Camp Al Asad, Iraq  
 Date : February 24, 2008

(b)(6), (b)(7)(C) USN, make the following free and voluntary statement to (b)(6), (b)(7)(C)

whom I know to be a Representative of the United States Naval Criminal Investigative Service. I make this statement of my own free will and without any threats made to me or promises extended. I fully understand that this statement is given concerning my knowledge of Walid Tawfiq

JABAR (b)(6), (b)(7)(C) for the purposes of identification I am a (b)(6), (b)(7)(C) year old male and my social security number is (b)(6), (b)(7)(C). I was born in (b)(6), (b)(7)(C) I am approximately (b)(6) inches tall, weigh (b)(6), (b)(7) pounds, and have (b)(6), (b)(7) hair and (b)(6), (b)(7) eyes. I am currently assigned as one of the Independent Duty Corpsman (IDCS) at the Al Asad Regional Detention Facility (RDF), aboard Camp Al Asad Iraq (b)(6), (b)(7)(C)

I first met detainee (b)(2) who I now know is Walid Tawfiq JABAR, the day after he was processed into the RDF. I can not remember the exact day that was. I remember I was conducting sick call, with the duty interpreter whose name is (b)(6), (b)(7)(C) when I asked JABAR if he had any medical issues. His response to me was that he was fine. I remembered JABAR, and what he said to me then due to the events that unfolded in regards to his medical treatment. The rest of that day I had no further dealings with him (b)(6), (b)(7)(C)

The next time I dealt with JABAR, was my next duty day, which was approximately two days later. I don't remember the exact date. I was told by (b)(6), (b)(7)(C) that he had given JABAR three bags of IV due to JABAR being dehydrated. I asked HM1 if I should be concerned, and HM1 replied that JABAR was not eating properly, however he was eating and drinking small amount (b)(6), (b)(7)(C)

I left the medical office and began my sick call rounds, once I arrived at JABAR's cell, I asked him if he had any medical issues, and he responded by saying he had no medical issues. I then told him that he needed to continually eat and drink so he could keep his strength. He said OK, and I believed that he understood what I told him. I then left his cell and continued sick call (b)(6), (b)(7)(C)

Later that day, which I think was 17FEB08, I was called by (b)(6), (b)(7)(C) and told JABAR was en route to the HET compound when he starting acting weak, and was not able to stand up on his own. I then came in to the medical office, and I did a complete head to toe physical examination. This exam includes cranial nerves test, testing the eyes, looking at the mouth and nose, checking the lungs, the heart, and testing the strength is all of his extremities. My exam proved that nothing medically was wrong with him. After I was done it was explained to JABAR to stop acting the way he was acting and to listen to the guards and do what he was told to do. He indicated he understood and agreed. JABAR was then secured and brought to the HET compound for an interrogation. I heard of no further problems or medical issues with JABAR that day (b)(6), (b)(7)(C)

The next time I saw JABAR was during sick call on 19FEB08, between 1230 and 1300. He stood up when I arrived at his cell, and I asked him if he had any medical issues. JABAR told me he did (b)(6), (b)(7)(C)

*JABAR*

Statement of Voluntary sworn statement

USN

on February 24, 2008

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

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

have any problems. I also did not observe any differences in his movement, actions, or speech during this visit. Nothing stood out at me, and he was acting like he normally did, so I continued sick call

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

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

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

1535 I got a radio call from the duty corpsman [redacted] while I was at the gym. [redacted] told me that JABAR was in the HET interrogation room and was not responding to questions. [redacted] had previously told us that if JABAR had any issues, we were to check him out, so I told [redacted] would come down and check on the situation. I arrived at the HET interrogation room at approximately 1542. When I walked in, I noticed JABAR was slouched down and he was resting his head on the table. I then asked for help to get him stretched out on the floor so I could conduct an exam. Once he was on the floor, I began checking the ABC's and conducted a sternum rub, however received no response. I also noticed he did not have a pulse. I then called a code blue medical, called for [redacted], and for an ambulance. I remember that [redacted]

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

and a few Guard Force Marines were in the room when I arrived.

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

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

After the calls, I told [redacted] to go back to the medical space to get the emergency medical equipment. As soon as [redacted] got back I began rescue breathing, and I instructed [redacted] who I believe is also an HM1 IDC, to begin chest compressions. We continued these medical steps and I requested for someone to attach an AED to JABAR. Once attached, we continued CPR for a full cycle, then stopped and turned on the AED so it could analyze the body. The AED analysis said that no shock was needed, so we continued CPR. [redacted] took over chest compressions, I believe this is when [redacted] arrived and took over the scene. I continued CPR, the breathing part, while I saw [redacted] insert an IV. [redacted] then pulled me aside so he could intubate JABAR, once it was successful, I continued the breaths via the ambu bag, that is when I heard the ambulance arrive.

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

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

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

The next time I looked up I saw the paramedics from the ambulance, and saw [redacted] drawing up one milligram epinephrine. HM1 then administered the medication to JABAR through the IV line at 1602. Before the medication was given, the paramedics attached their heart monitor. Once the medication was given we continued CPR, reassessed, saw there was no pulse, so we continued CPR. At 1605 [redacted] drew up one milligram of atropine and delivered it via JABAR's IV. We continued a full cycle of CPR and re-checked JABAR's pulse. At that time he had a weak pulse, so I let everyone know, and JABAR was moved from the floor of the interrogation room to a stretcher and loaded in to the ambulance. [redacted] got in with the paramedics and the ambulance left the RDF. After the ambulance left I went back into the medical office and wrote down my notes on the events that happened. The notes I wrote reflect what we just talked about in this statement.

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

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

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

This statement, consisting of this page and 2 other page(s) was typed for me by [redacted] as we discussed its contents. I have read and understand the above statement. I have been given the opportunity to make any changes or corrections I desire to make and have placed my initials over the changes or corrections. This statement is the truth to the best of my knowledge and belief.

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

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

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

Signature

Sworn to and subscribed before me this 24 day of Feb in the year 2008 at

103

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

...ation of voluntary sworn statements

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

on February 24, 200

AL ASAD IRAQ

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

Witnessed: \_\_\_\_\_

\_\_\_\_\_  
/ice

FOI/H: DERIVED FROM ARTICLE 136,  
UCMJ (10 U.S.C. 936) AND 5 U.S.C. 303

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

T 104



STATEMENT

(b)(6), (b)(7)(C) Place : Camp Al Asad (b)(6), (b)(7)(C)  
Date : February 23, 2008

(b)(6), (b)(7)(C) I, (b)(6), (b)(7)(C) Civilian, make the following free and voluntary statement to (b)(6), (b)(7)(C) whom I know to be a Representative of the United States Naval Criminal (b)(6), (b)(7)(C) Investigative Service. I make this statement of my own free will and without any threats made to me (b)(6), (b)(7)(C) promises extended. I fully understand that this statement is given concerning my knowledge of the (b)(6), (b)(7)(C) death of Walid Tawfiq JABAR

For the purposes of identification I am (b)(6), (b)(7)(C) 34 year old male, US citizen, employed by Kellogg Brown (b)(6), (b)(7)(C) and Root (KBR) as a paramedic for Camp Al Asad Iraq. I am (b)(6), (b)(7)(C) 5'10" inches tall and weigh (b)(6), (b)(7)(C) 160 pounds. I was born in (b)(6), (b)(7)(C) Algeria, of (b)(6), (b)(7)(C) Algerian and have (b)(6), (b)(7)(C) black hair and (b)(6), (b)(7)(C) yes.

On 19FEB08, at approximately 1600 we were called by the military hospital that they had a man down (b)(6), (b)(7)(C) at building 102300 (b)(6), (b)(7)(C) and I consulted our Al Asad map and determined where the (b)(6), (b)(7)(C) building was, got into the KBR Ambulance and left. Upon arrival to the location we saw that it was (b)(6), (b)(7)(C) the Detention Facility. We drove around to the "medic shack" and saw one USN Independent Duty (b)(6), (b)(7)(C) Corpsman (IDC) (I don't remember his name) and two Navy or Marine guys working on the patient. The IDC already had the AED hooked up, the patient was intubated, and an IV was already established.

The AED advised no shock, and I instructed the non IDC guy to continue CPR. At that point we took (b)(6), (b)(7)(C) off the AED and attached our cardiac monitor to the patient. The patients rhythm was not shockable and he had no pulse, so I gave one milligram of epinephrine to the IDC and he administered the (b)(6), (b)(7)(C) medication. We continued CPR for a few minutes, and I checked his pulse. The patient was found (b)(6), (b)(7)(C) to have no pulse and his rhythm was PEA, or pulseless electrical activity. So the IDC administered one (b)(6), (b)(7)(C) milligram of atropine. We continued CPR and re-checked the patients rhythm, at that time, he had a sinus tachycardia with a pulse. The patient was already on a metal backboard, so we buckled the straps and then moved him onto our stretcher, secured him to our stretcher, and moved him into the ambulance.

We then transported him to the 325<sup>th</sup> CSH. The USN IDC came with us and he maintained ventilatio (b)(6), (b)(7)(C) until we arrived at the hospital. The only other treatment in route was a check and re-check of the (b)(6), (b)(7)(C) patients vital signs. The patients did have vital signs during the ride to the hospital.

Upon arrival to the hospital we turned over all care to the hospital ER staff. The IDC stayed at the (b)(6), (b)(7)(C) hospital to answer questions, and me and (b)(6), (b)(7)(C) left and went back to work.

(b)(6), (b)(7)(C) This statement, consisting of this page and 1 other page(s) was typed for me by (b)(6), (b)(7)(C) as (b)(6), (b)(7)(C) we discussed its contents. I have read and understand the above statement. I have been given the (b)(6), (b)(7)(C) opportunity to make any changes or corrections I desire to make and have placed my initials over the (b)(6), (b)(7)(C) changes or corrections. This statement is the truth to the best of my knowledge and belief.

Signature: \_\_\_\_\_ (b)(6), (b)(7)(C)

[Redacted] uation of voluntary sworn statements [Redacted]  
(b)(6), (b)(7)(C) Civil (b)(6), (b)(7)(C)  
on February 23, 2008

Sworn to and subscribed before me this 23 day of Feb in the year 2008 at

ALASKA DEAG

Witnessed: \_\_\_\_\_

[Redacted]  
(b)(6), (b)(7)(C)

Naval Criminal Investigative Service  
AUTH: DERIVED FROM ARTICLE 136,  
UCMJ (10 U.S.C. 936) AND 5 U.S.C. 303

*[A large diagonal line is drawn across the main body of the page, likely indicating redaction or cancellation.]*

[Redacted]  
(b)(6), (b)(7)(C)

*Jade*

**U.S. NAVAL CRIMINAL INVESTIGATIVE SERVICE**

562596 13:23 20080312 IN:SSDEMAIL #59541 OUT:CODE0224C #6045

INVESTIGATIVE ACTION

23FEB08

CONTROL: 20FEB08-24IZ-0029-7HMA

V/JABAR, WALID TAWFIQ/CIV  
M/W/FNIQ/N//31DEC87/IRAQ  
SUPP: DETAINEE NUMBER (b)(2)

RECEIPT OF AMBULANCE RUN SHEET

1. On 22FEB08, Reporting Agent (RA) met with (b)(6), (b)(7)(C) civilian paramedic for Kellogg Brown and Root (KBR), aboard Camp Al Asad, Iraq. (b)(6), (b)(7)(C) provided RA with the KBR Ambulance run sheet pertaining to V/JABAR's transport and treatment from the Regional Detention Facility (RDF) to the 325th Combat Support Hospital (CSH). Enclosure (A) provides details.

ENCLOSURE(S)

(A) KBR Ambulance Run Sheet/19FEB08

BIOGRAPHICAL DATA

EMPLOYMENT: KBR MEDICAL, AL ASAD, IRAQ

SSN: (b)(6), (b)(7)(C)

DOB:

POB:

REPORTED BY: (b)(6), (b)(7)(C) Special Agent  
OFFICE: NCISRA IRAQ, CAMP AL ASAD

~~FOR OFFICIAL USE ONLY~~

PAGE 1 OF 1 V2 LNY

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

350 12/20/07  
350 EXHIBIT (15) 200

**WARNING**

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ACLU DD II 58026-19

2007/07

**SOAP #183300**

**Practice SOAP (Mark for Deletion)**

**Demographic Data**

<b>Area</b>	<b>Site</b>	
B Area	Site B1	
<b>Clinic</b>	<b>Date of Clinic Visit</b>	<b>Time of Clinic Visit - Military Time</b>
B1 Clinic	FEB-19-2008	16:00

**This is a Dept of State Employee  
(TO BE USED BY USMI MEDICS ONLY)**

**Name (Last, First)**

Detainee (b)(2)

**Employee Assigned Country**

Iraq

**Employee Assigned Area:**

B Area

**Employee Assigned Site**

**Division**

**Subcontractor or Strategic Partner?**

✓

**Subcontractor / Strategic Partner Name**

Local National Detainee

**Badge#**

N/A

**DOB**

01-01-2000

**Sex**

Male

**Job/Craft**

Detainee

**SS#**

N/A

**Length of Service on Project (months)**

N/A

**Supervisor**

N/A

**Pt. Contact Phone#**

**Chief Complaint**

**Chief Complaint:** Cardiac Arrest      **Description of Incident** Just occ'd

**Vital Signs**

**Temp (F): 0    Pulse: 0    Resp: 0**

**BP: 0    SPO2: 0**

**Allergies:** Unknown

**Medications:** Unknown

**Past Med History** Unknown

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

J 108



**SOAP**

**Top Cover (Plan NO 081)**

**Top Cover Notification**

**Subjective** [FEB-19-08 (b)(6), (b)(7)(C)] Called to the Al Asad Detainee Center for a man down. Upon arrival military reported the patient was an Iraqi detainee who has been on a hunger strike for an unknown amount of time. While speaking with the pt. he collapsed and was pulseless and apneic. CPR was initiated by military immediately. Military states they intubated the pt. and started and IV and continued CPR. Pt. was down approximately 15 minutes prior to our arrival.

**Objective** [FEB-19-08 (b)(6), (b)(7)(C)] ~ 25 y/o male unconscious, pulseless, apneic male  
 ABC's: Ventilated via ET tube, no pulse  
 Neuro: Unconscious  
 Head: Atraumatic, normocephalic  
 Eyes: Pupils fixed and dilated  
 Cardiac monitor: Idioventricular then Asystole

Arrived on scene with military medics performing CPR. Pt. intubated with 7.5 ET, and 18g IV LAC. Applied defib pads and found and idioventricular rhythm and then asystole. CPR continued and administered 1mg Epi and 1mg Atropine. CPR was continued. Approximately 1 minute after the Atropine pt. regained a pulse and was showing ST on the monitor. B/P was 143/80 initially. Pt. monitored enroute to the hospital and B/P upon arriving at the hospital was 90/50. No change noted in pt's LOC.

**Assessment:** [FEB-19-08 (b)(6), (b)(7)(C)] 1. Cardiac Arrest  
**Protocol** Asystole 130-2.01

**Reference:**  
**Plan:** [FEB-19-08 (b)(6), (b)(7)(C)] 1. Exam  
 2. Cardiac monitor with defib pads applied  
 3. CPR  
 4. Epinephrine 1mg  
 5. Atropine 1mg  
 6. O2 BVM  
 7. Transport to MMTF

- Medication** Epinephrine (1:10,000) adrenalin injection
- Administered-1**
- OTC**
- Administered-1**
- Dosage** 1mg IVP
- Medication** Atropine sulfate Atropine
- Administered-2**
- OTC**
- Administered-2**
- Dosage2** 1mg IVP
- Medication**
- Administered-3**
- OTC**
- Administered-3**
- Dosage3**
- Medication**
- Administered-4**

5109

**OTC**  
**Administered-4**  
**Dosage4**  
**Medication**  
**Administered-5**  
**OTC**  
**Administered-5**  
**Dosage5**  
**Medication**  
**Administered-6**  
**OTC**  
**Administered-6**  
**Dosage6**  
**Referral to Higher Level Care:** Yes  
**Higher Level Care Plan:** 1. Exam  
 2. 12 Lead EKG  
 3. Calcium  
 4. Bgl  
 5. Chest x-ray  
 6. Admit to ICU  
**Supplemental Documentation:**  
 (.pdf only)

**Administration**

**AMA**  
**FAV** ✓  
**RTW**  
**DV** ✓  
**Ill/Inj Possibly Work Related?** NO  
**Provider Name (Last, First)** (b)(6), (b)(7)(C)  
**Print Pt SOAP** Print Pt SOAP Note...  
**HIR OR MEDICAL LEAVE REQUIRED?**

**Additional Demographic Information**

This additional demographic information is used to gather Medical Leave, AIG, Emergency Evac etc. information

**Number / Street**  
**City**  
**State**  
**Zip Code**  
**Country**  
**Home Phone Number**  
**Country & Passport #**  
**Passport Expiration**  
**Supervisor's Phone Number**  
**Department**  
**Date of Hire**

J 110

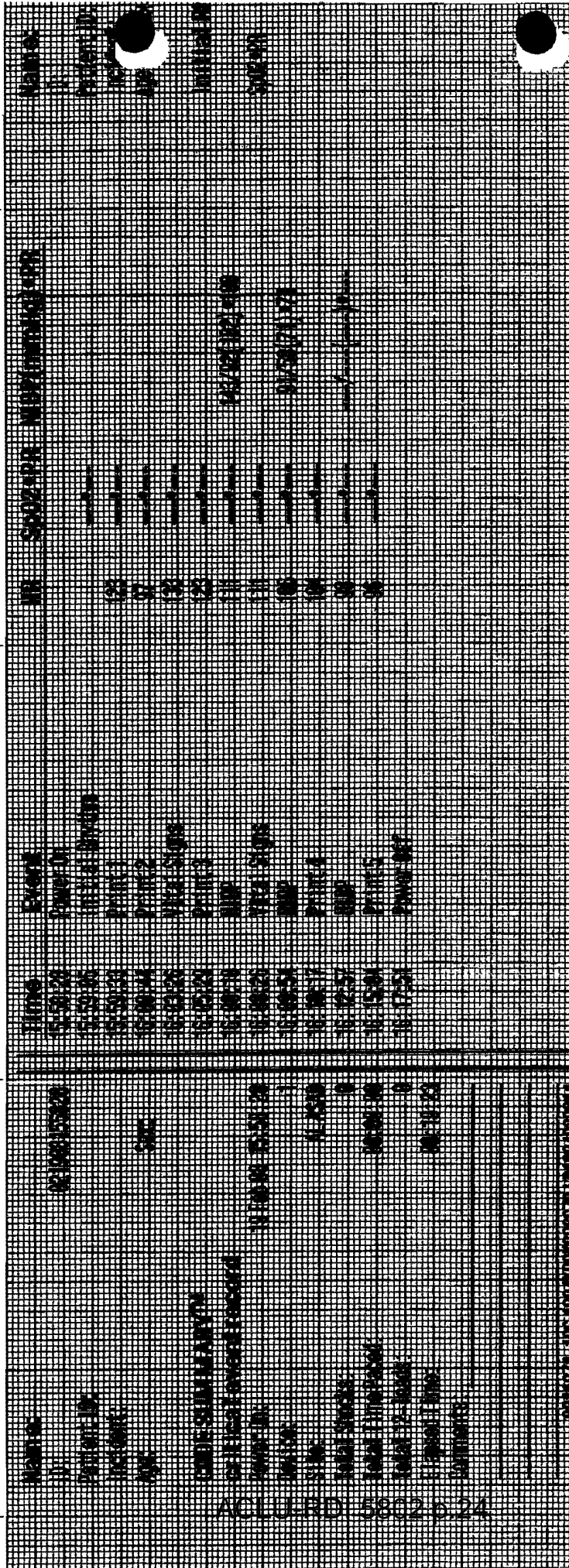
**MEDICAL MGMT QA REVIEW**  
**Other Than OTC Care Used**  
**Recordability**  
**Medical Mgmt / Supervisor Comments**  
**Medical Manager / Supervisor**  
**QA/QC Initiated**  
**Notify Theater Medical**

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

Created: FEB-19-2008 8:26 PM (AST)

Last Modified: FEB-19-2008 8:26 PM (AST) by (b)(6), (b)(7)(C)

JM

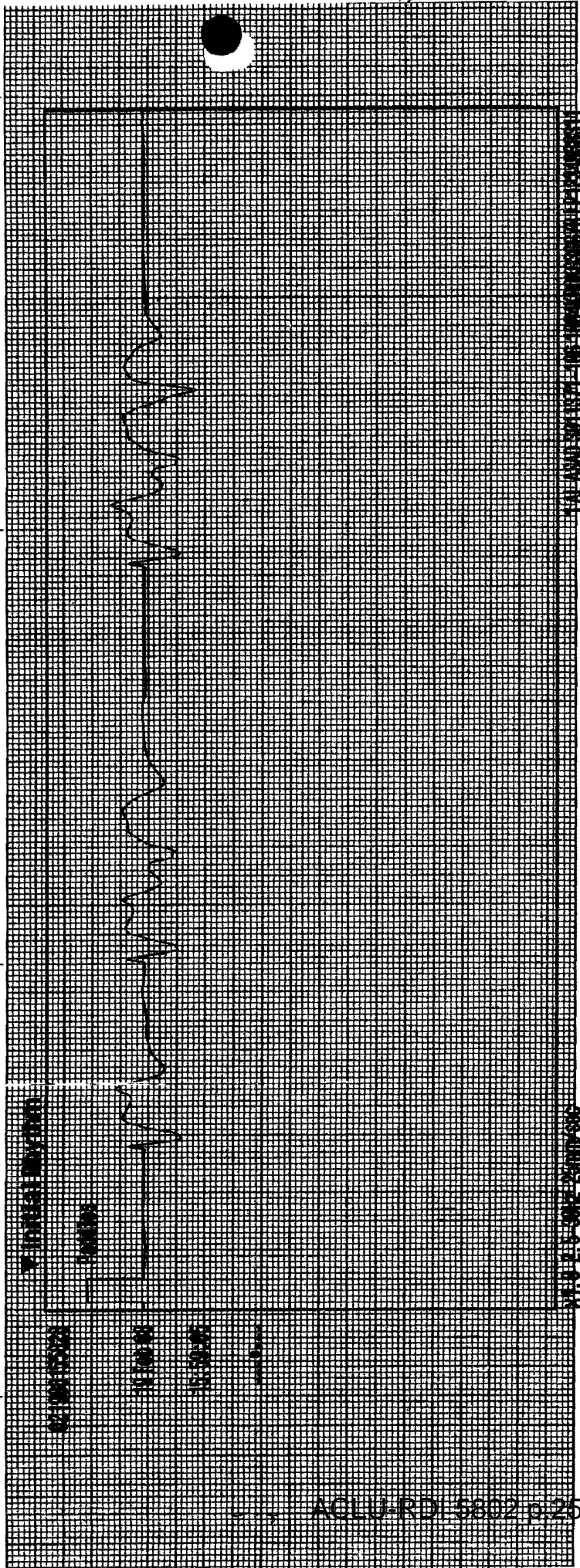


P/N 805319

MEDTRONIC PHYSIO-CONTROL

ACLU DD 5802 p 24

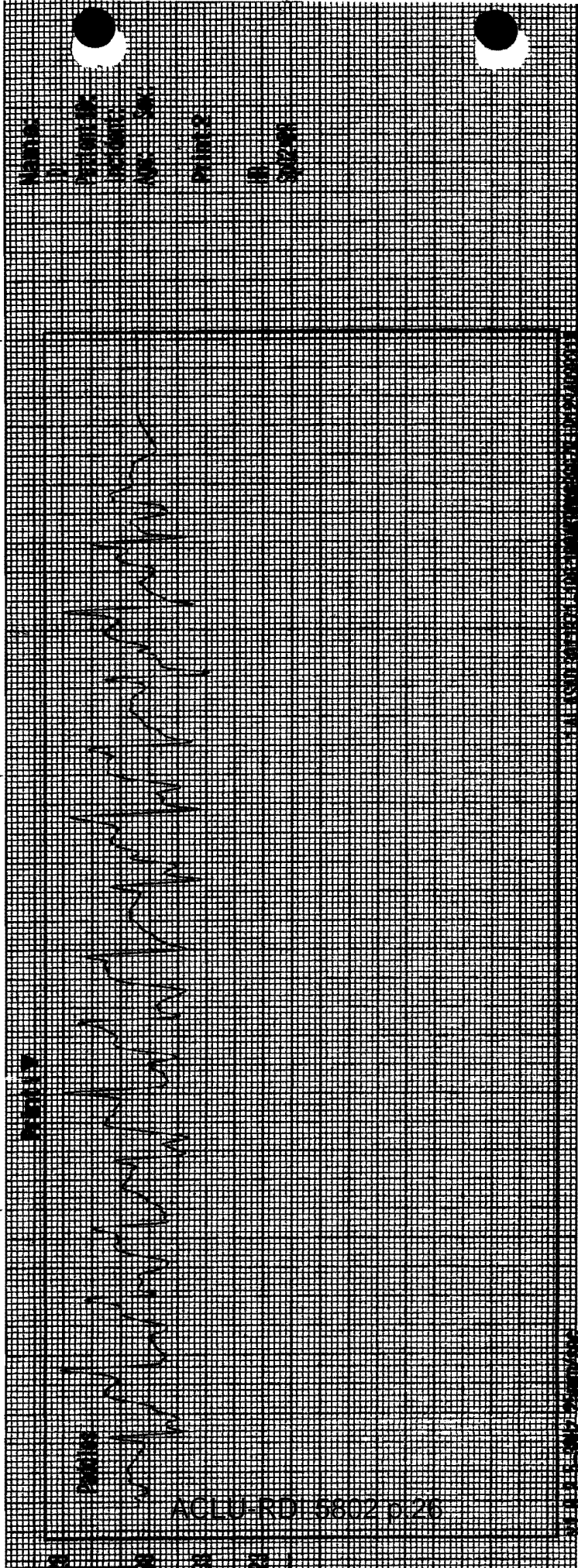
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METRONIC PHYSIO-CONTROL  
 P/N 805319

METRONIC PHYSIO-CONTROL  
 P/N 805319

51B



1111

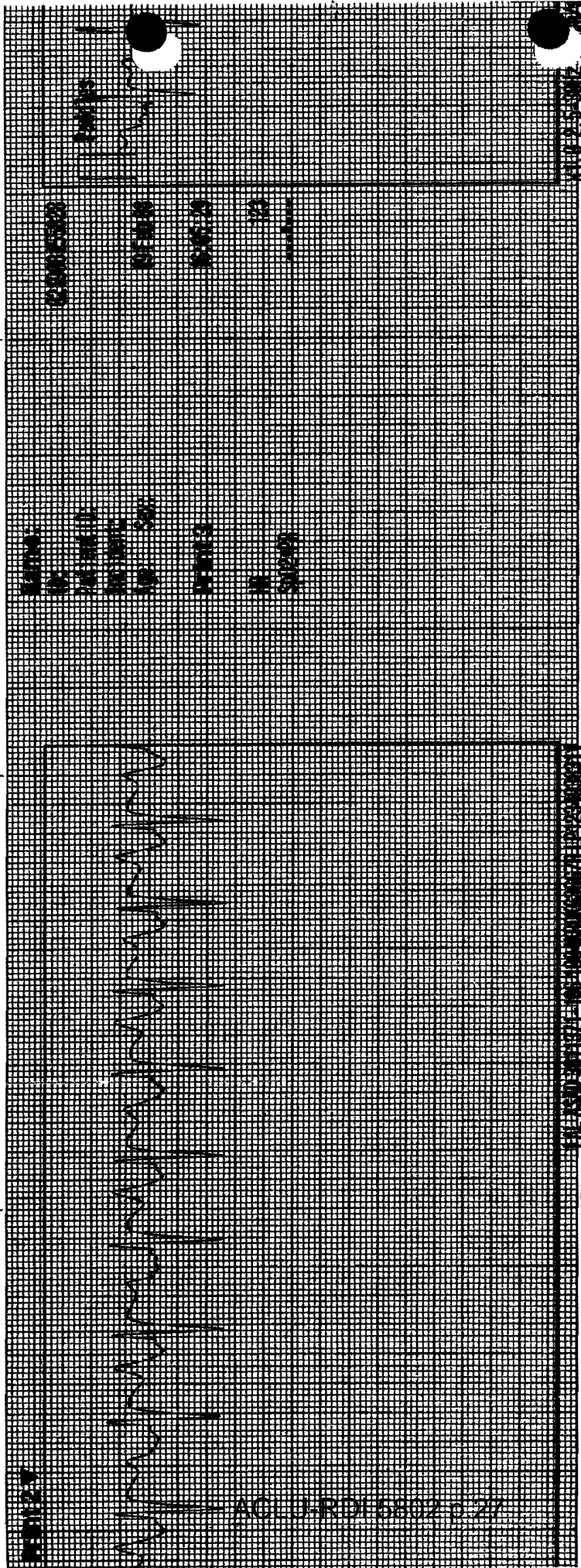
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MEDTRONIC PHYSIO-CONTROL  
P/N 805319

ACLU-RD: 5802 0/26

J 114

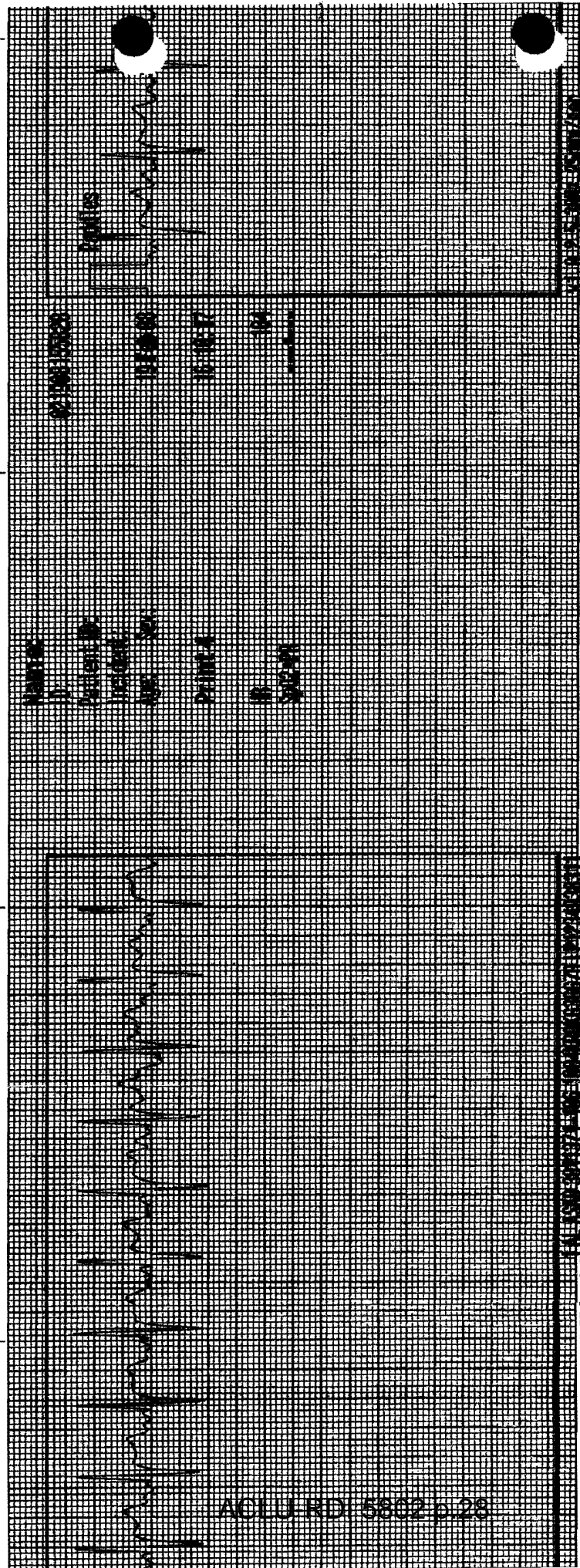




MEDTRONIC PHYSIO-CONTROL

ACU J-RDT 6802-027

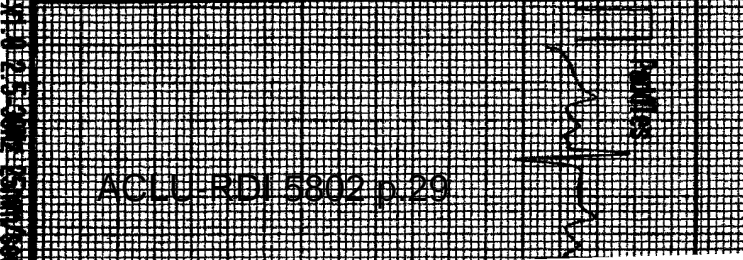
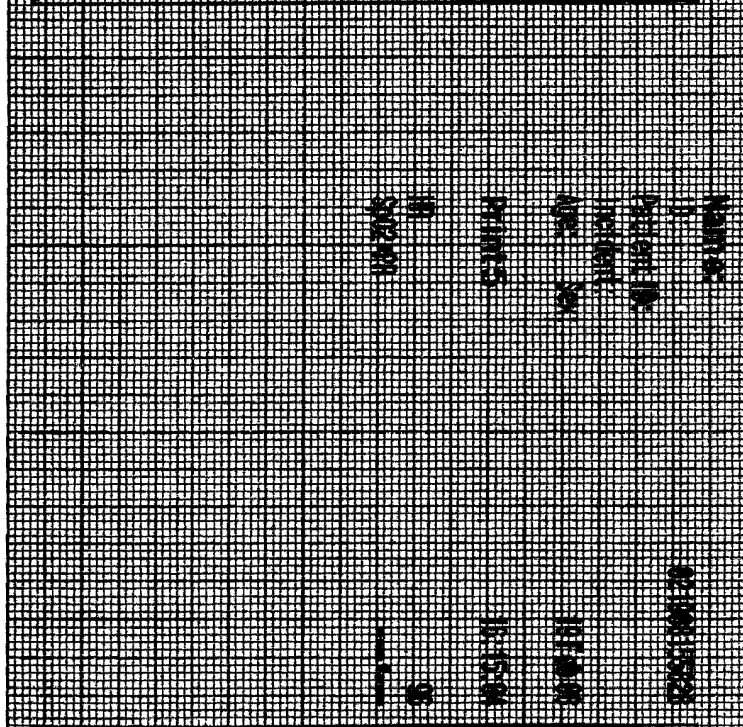
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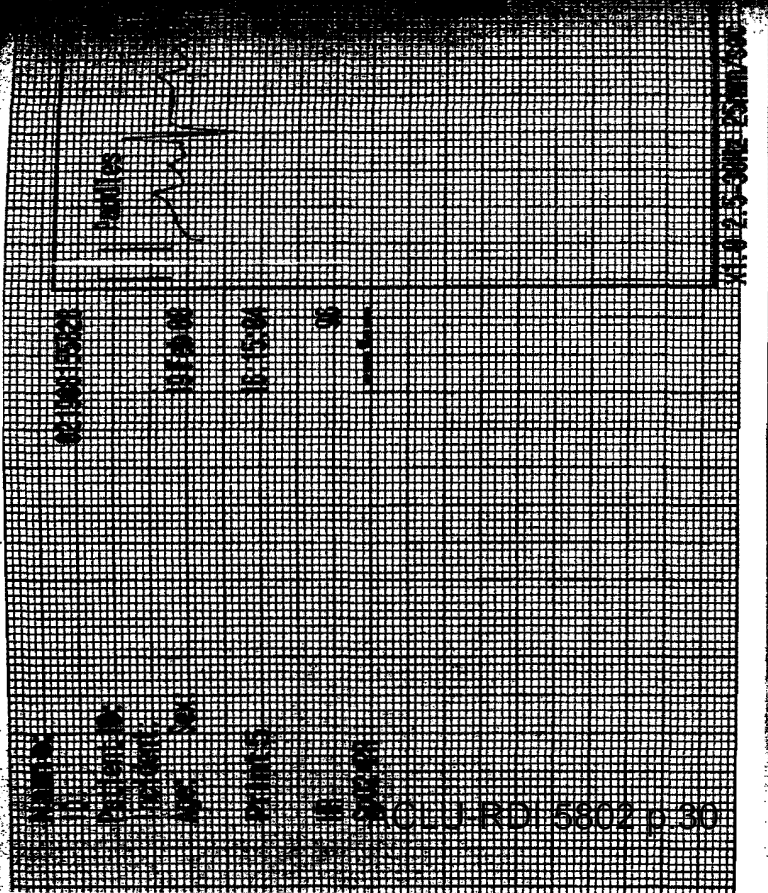
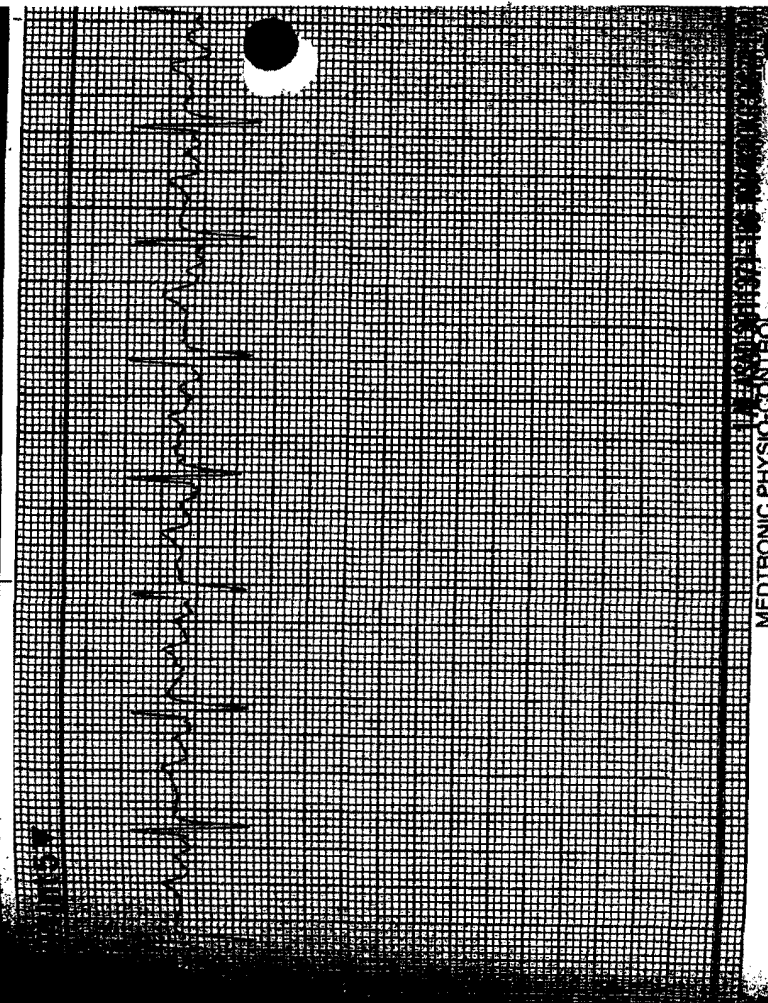
5116

MEDTRONIC PHYSIO-CONTROL  
P/N 805319

P/N 805319



5117



J118



STATEMENT

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

: Camp Al Asad, Iraq  
Date : February 23, 2008

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

I, (b)(6), (b)(7)(C) Civilian (b)(6), (b)(7)(C) make the following free and voluntary statement to Special Agent (b)(6), (b)(7)(C) whom I know to be a Representative of the United States Naval Criminal Investigative Service. I make this statement of my own free will and without any threats made to me or promises extended. I fully understand that this statement is given concerning my knowledge of The death of Walid Tawfiq JABAR. (b)(6), (b)(7)(C)

For the purposes of identification I am (b)(6), (b)(7)(C) year old male US Citizen employed by Kellogg Brown and Root (KBR) as a medical supervisor for Camp Al Asad, Iraq. I am (b)(6), (b)(7)(C) feet (b)(6), (b)(7)(C) inches tall and weigh (b)(6), (b)(7)(C) pounds. I was born in (b)(6), (b)(7)(C) and have (b)(6), (b)(7)(C) hair and (b)(6), (b)(7)(C) eyes. (b)(6), (b)(7)(C)

On 19FEB08, at approximately 1550, I was called by the 325<sup>th</sup> CSH, by radio, in reference to a "man down," who was located at the detention facility. (b)(6), (b)(7)(C) and I got into the KBR ambulance and drove to the location. Upon arrival I walked up and saw a group of people, who I believe were (b)(6), (b)(7)(C) Marines, kneeling around the patient. I asked what happened and was told the patient collapsed and he did not have a pulse.. One Marine was at the patients head, ventilating him, another was at his side giving CPR, and there was another Marine standing at the patients feet holding an IV bag. I believe there was one more Marine at the patients head giving directions to the rest of the Marines providing medical treatment.

At that point I told (b)(6), (b)(7)(C) it was a cardiac arrest. (b)(6), (b)(7)(C) then grabbed his medical bag and headed over to the patient, and I went back to the ambulance and got the cardiac monitor. When I got back to the patient (b)(6), (b)(7)(C) had already given one milligram of epinephrine, and one Marine was continuing to do (b)(6), (b)(7)(C) CRP. I hooked the patient up to our cardiac monitor with the quick combo pads, and began to see his heart rhythm displayed. The patients heart rhythm was not correct, so (b)(6), (b)(7)(C) administered one milligram of Atropine to get his heart rhythm back to normal. After the medication was administered, CPR was continued, until patients displayed a normal heart rhythm. At that point CPR was stopped.

The patients pulse was then checked and a pulse was found. The patient still could not breath on his own, so he was continuously ventilated. The Marines at the Detention Facility began getting the patient ready for transport and I started packing up our gear. I came back to the ambulance and the patient was placed on a stretcher, we loaded him into the back of our ambulance. (b)(6), (b)(7)(C)

At that point I went back to the cab of the ambulance and drove straight to the 325<sup>th</sup> CSH. Upon arrival we were met by the ER Staff, and (b)(6), (b)(7)(C) gave them the report of what happened to that point. We then moved the patient in to the ER. We remained in the ER for a few minutes to answer any questions the ER staff had, however there was a member of the Detention Facility that rode with the us and he answered most of the questions. At that point (b)(6), (b)(7)(C) and I left the ER and went back to the KBR facility. (b)(6), (b)(7)(C)

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

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

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

EXHIBIT (119)





**U.S. NAVAL CRIMINAL INVESTIGATIVE SERVICE**

562597 13:24 20080312 IN:SSDEMAIL #59542 OUT:CODE0224C #6046

INVESTIGATIVE ACTION

23FEB08

CONTROL: 20FEB08-24IZ-0029-7HMA

V/JABAR, WALID TAWFIQ/CIV  
 M/W/FNIQ/N//31DEC87/IRAQ  
 SUPP: DETAINEE NUMBER (b)(2)

RECEIPT OF MEDICAL RECORDS

1. On 22FEB08, Reporting Agent (RA) met with (b)(6), (b)(7)(C) MD, USAR, in reference to V/JABAR's death. (b)(6), (b)(7)(C) provided RA with all the medical records pertaining to V/JABAR's emergency room treatment, and follow on treatment in the Intensive Care Unit (ICU) of the 325th Combat Support Hospital (CSH), Camp Al Asad, Iraq. Enclosure (A) pertains.

2. (b)(6), (b)(7) indicated that when V/JABAR entered the emergency room of the CSH, he was cold and unresponsive. Shortly after V/JABAR's arrival, medical personnel were able to get a pulse. V/JABAR was then put on a ventilator, and was given medication to correct his fluid levels and blood pressure, however, within a few hours V/JABAR died.

3. (b)(6), (b)(7) opined that V/JABAR might have had a pre-existing renal problem, and due to V/JABAR's apparent "starvation campaign," his own actions exacerbated the condition. (b)(6), (b)(7)(C) mentioned that this was only an opinion, and because he did not have access to a full medical history, or the proper laboratory analysis, he was not able to provide further information.

4. According to the 325th CSH, Hospital Report of Death (Overseas), V/JABAR's disease or condition directly leading to death was "In field Cardiac Arrest," and the antecedent causes were due to Hyperkalemia, and Hyponatrenia. V/JABAR was pronounced dead on 20FEB08, at approximately 0651.

ENCLOSURE(S)

(A) 325th CSH Medical Records/19FEB08

BIOGRAPHICAL DATA

EMPLOYMENT: 325 CSH CAMP AL ASAD IRAQ

SSN: (b)(6), (b)(7)(C)

DOF:

POB:

REPORTED BY: Special Agent  
 OFFICE: NCISRA IRAQ, CAMP AL ASAD

~~FOR OFFICIAL USE ONLY~~  
 PAGE 1 LAST (b)(6), (b)(7)(C) V2 LNY

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EXHIBIT (17)

JAL

