EXTERNAL EXAMINATION:

Pursuant to the Georgia Death Investigation Act, an autopsy is performed on the above decedent at the Georgia Bureau of Investigation Coastal Regional Crime Lab Medical Examiner Office in Pooler, Georgia, at 1250 hours on February 24, 2020.

Assisting with the examination are Death Investigation Specialists Shannon Walden, Adrienne Lawhorne, and Alexis Brown of the Georgia Bureau of Investigation Crime Laboratory Medical Examiner Office.

The body is identified by body labels, fingerprints, and by the Glynn County Coroner’s Office.

The body is received in a zippered black body bag with the zipper pull secured by a plastic tie and with identification tags “Ahmaud Arbery” affixed to the zipper pulls. The body is received clothed in a camouflage bandana, a tan bandana, a white T-shirt, an olive-green web belt, tan cargo shorts, black boxer shorts, and gray athletic shoes. All clothing is blood stained. A white sheet and three (3) white disposable wipes accompany the body.

The body is that of a muscular, adult Black male, weighing 164 pounds, measuring 5 feet 10 inches in length, and appearing the stated age of 25 years. The body is cold to touch. Rigor mortis is present to an equal extent in all joints. Postmortem lividity is present over the posterior dependent portions of the body.

The hair is black with twists and faded on the sides. The eyes are open. The corneas are clouded. The irides are brown. The sclerae are without special note. The ears display no abnormalities. The skeleton of the nose is intact. There is a black mustache and beard. The teeth are natural. The right upper central incisor tooth (#8) displays a remote chip. The lips and frenula display no abnormalities. The neck is without special note.

Hair is present over the chest and abdomen. The abdomen is scaphoid. The external genitalia are normal male and circumcised.

The fingernails are medium length and dirty. Multiple monochromatic tattoos are present over the right and left upper extremities.

On the left upper back, just to the left of the midline, there is a vertical scar, 2.2 inches. The buttocks are without special note.
On the anterior left leg, just below the knee, there is a vertical scar, 2.1 inches. The toenails are long and very dirty.

EVIDENCE OF INJURY:

1. On the lower chest, in the midline, 19.2 inches beneath the top of the head, there is a gaping, shotgun wound of entrance measuring 1.9 by 1.5 inches overall. The central wound defect measures 1.3 by 1.0 inches. Abrasion is present about the wound, 0.5 inches to 0.9 inches. Yellow particulate material is present on the skin of the chest surrounding the wound. The wound course involves the skin and subcutaneous tissue in the area; the inferior end of the sternum; the anterior 5th right rib, 5th right intercostal space, and 6th right rib; the right middle lobe of the lung; the right lower lobe of the lung; and the lateral 6th through 10th right ribs and the corresponding lateral 6th through 9th intercostal spaces. Multiple (6) buckshot pellets are recovered from beneath the skin of the lateral right chest. On the lateral right chest and extending to the lateral right back, between 15.0 to 19.0 inches beneath the top of the head, there are six (6) shotgun pellet exit defects ranging in size from 0.3 by 0.1 inches to 0.8 by 0.4 inches. The wound courses left to right and front to back. Residual blood in the right chest cavity measures 50 cc.

2. On the lateral left upper chest and left axilla, 15.2 inches beneath the top of the head, 7.5 inches to the left of the midline, there is a gaping shotgun wound of entrance, 2.3 by 1.5 inches overall. The central wound defect measures 2.2 by 1.7 inches. Yellow particulate matter is present on the skin of the lateral left upper chest and left axilla. Abrasion is present on the medial margin of the wound, 1.9 by 1.2 inches. The wound edge is scalloped. Numerous injured nerves and blood vessels are visible in the left axilla. The wound course involves the left axillary artery, the left axillary vein, the left brachial plexus, the head of the left humerus, and the left scapula. Black plastic foreign fibers, a plastic shot cup, a shotgun wadding, and multiple (5) buckshot pellets are recovered from the wound. On the left upper back, there are seven (7) shotgun exit defects extending from 9.5 inches beneath the top of the head to 12.5 inches beneath the top of the head, and from 6.7 inches to the left of the midline to 8.4 inches to the left of the midline. The wound courses from front to back and upward.

3. On the anterior right wrist, just above the hand, there is a deep, gaping, shotgun graze wound, 2.5 by 2.5 inches. The wound involves the skin and subcutaneous tissue in the area, the musculature of the right wrist, the right ulnar artery and vein. Multiple small abrasions are present on the skin above the wound. The wound courses on the wrist from radial to ulnar.

4. On the right forehead, just above the medial eyebrow, there is a brown abrasion, 0.2 inches.

5. On the right forehead, just above the lateral eyebrow, there is a slanting, brown abrasion, 1.3 by 0.2 inches.

6. On the right face, at the lateral margin of the eye, there is a brown abrasion, 1.5 by 1.2 inches.

7. On the right lower eyelid and right face, there is a brown abrasion, 1.5 by 1.2 inches.

8. On the right tip of the nose, there is a brown abrasion, 0.3 by 0.3 inches.

9. Just above the upper lip, to the right and left of the midline, there is a laceration, 1.1 by 0.3 inches.

10. On the right elbow crease, there is a brown abrasion, 4.2 by 2.0 inches.

11. On the posterior right wrist, there is a horizontal brown abrasion, 1.2 by 0.3 inches.

12. On the posterior right hand, there is a brown abrasion, 0.2 inches.
13. On the posterior right hand, at the base of the little finger, there is a brown abrasion, 0.2 inches.

14. Over the posterior, distal interphalangeal joints of the right index through little fingers, there are multiple, brown abrasions 0.3 inches to 0.5 inches.

15. On the posterior, proximal interphalangeal joint of the right middle finger, there are multiple, brown abrasions, 0.1 inches each.

16. On the posterior base of the right middle finger, there is a brown abrasion, 0.2 inches.

17. On the posterior, proximal, interphalangeal joint of the right ring finger, there is a brown abrasion, 0.4 by 0.2 inches.

18. On the posterior left hand, there are multiple, brown abrasions, 0.1 inches each.

19. On the posterior base of the left ring finger, there is a brown abrasion, 0.5 by 0.3 inches.

20. On the posterior base of the left little finger, there are multiple, brown abrasion, 0.1 inches to 0.2 inches.

X-RAY EXAMINATION:

1. A buckshot pellet group projects beneath the skin of the lateral right chest on the AP view. The lateral 6th through 10th ribs are fractured.

2. A buckshot pellet group projects over the left clavicle, scapula, and humerus on the AP view. The left scapula and proximal left humerus are fractured.

3. Dental restorations are present in the mouth.

4. A belt and zipper project over the pelvis.

5. A zipper projects over the lateral right thigh.

INTERNAL EXAMINATION:

BODY CAVITIES: The body is entered by a Y-shaped incision. All organs are present in their usual anatomic positions and present their usual anatomic relationships. In the right chest cavity, there is 50 cc of residual blood. The abdominal panniculus measures 1.0 cm.

NECK ORGANS: The anterior muscles of the neck reveal no evidence of hemorrhage. The cartilages of the larynx and epiglottis display no abnormality. The hyoid bone is intact. Examination of the tongue reveals no evidence of injury. The thyroid gland displays multiple small tan white nodules consistent with Hashimoto’s thyroiditis.

RESPIRATORY SYSTEM: The right lung weighs 260 grams. The left lung weighs 280 grams. There are shotgun wounds of the right middle and lower lobes of the lungs as previously noted. The lungs are tan. Anthracotic pigment is present over the surfaces of the lungs. No thromboemboli are present in the pulmonary arteries. The trachea and bronchi display no abnormalities. On cut section, the lungs are bloodless except for hemorrhage around the shotgun wound of the right middle and lower lobes.

CARDIOVASCULAR SYSTEM: The heart weighs 240 grams. The coronary arteries pursue their usual anatomic course and display no atherosclerosis. The left ventricle measures 0.7 inches beneath the mitral valve. The right ventricle measures 0.3 inches. The mitral valve leaflets display moderate myxoid change. Serial sections of the myocardium reveal no focal
areas of pathologic change. The aorta is without special note.

HEPATOBILIARY SYSTEM: The liver weighs 1080 grams. The liver is light red brown with smooth surfaces and sharp margins. On cut section, the hepatic parenchyma is red brown. The gallbladder and biliary track pursue their usual anatomic course and display no pathologic change.

HEMOLYMPHATIC SYSTEM: The spleen weighs 80 grams. The spleen is gray with a smooth surface. On cut section, the splenic parenchyma is light red brown with prominent follicles. No lymphadenopathy is noted.

GASTROINTESTINAL SYSTEM: The esophagus is without special note. The stomach contains 125 cc of yellow liquid. The duodenum, small, and large intestine are without special note. The appendix is present.

GENITOURINARY SYSTEM: The right kidney weighs 100 grams. The left kidney weighs 100 grams. The kidneys are light red brown with smooth surfaces. On cut section, the renal parenchyma is light red brown. The renal pelves, ureters, and urinary bladder are without special note. The urinary bladder contains 20 cc of urine. The prostate gland is without special note. The testicles display no abnormalities.

ENDOCRINE SYSTEM: The pituitary, pancreas, and adrenal glands display no abnormalities.

MUSCULOSKELETAL SYSTEM: There are shotgun wounds involving the lower portion of the sternum, the anterior 5th and 6th right ribs, the lateral 6th through 10th right ribs, the proximal left humerus, and the left scapula as previously noted.

CENTRAL NERVOUS SYSTEM: The scalp displays no lacerations or hematomas. On reflecting the scalp, there is no subgaleal hemorrhage. The skull is intact. On entering the cranial cavity, there is no evidence of hemorrhage; specifically, there is no subdural or epidural hematoma. The leptomeninges are without special note. The brain weighs 1520 grams. The brain displays cerebral edema manifested by flattening of the cortical convolutions, hippocampal gyrus notching, and cerebellar tonsillar herniation. Serial sections of the brain reveal no focal areas of pathologic change. The arteries at the base of the brain display no abnormalities. Fluid blood is present in the dural sinuses.

SPECIMENS:

Heart blood is submitted to the Georgia Bureau of Investigation Toxicology Laboratory for analyses for alcohol and drugs of abuse. A blood card, a fingerprint card, pulled head hair, the recovered shotgun pellets, shot cup, wadding, and the black plastic foreign fibers from the left axilla are submitted to the Georgia Bureau of Investigation Crime Lab. A tissue stock jar and two (2) X-rays are retained.

ANATOMIC DIAGNOSES:

1. Close range shotgun wound of the lower chest involving the right middle lobe of the lung and the right lower lobe of the lung

2. Residual blood in the right chest cavity, 50 cc.

3. Close range shotgun wound of the lateral left upper chest and left axilla involving the left axillary artery, the left axillary vein, the brachial plexus, the head of the left humerus, and the left scapula

4. Shotgun graze wound of the right wrist involving the right ulnar artery and vein

5. Moderate myxoid change of the mitral valve leaflets of the heart
6. Hashimoto's thyroiditis

OPINION:

This 25-year-old Black male, AHMAUD ARBERY, died of multiple shotgun wounds sustained during a struggle for the shotgun.

Cause of Death: Multiple Shotgun Wounds

Manner of Death: Homicide

Only those items discussed in the results above were analyzed for this report. The above represents the interpretations/opinions of the undersigned analyst. Unless noted above, evidence analyzed in this report will be returned to the submitting agency. Biological evidence (body fluids and tissues) and proof determination evidence will be destroyed after one year. This report may not be reproduced except in full without written permission of the laboratory.

Technical notes and data supporting the conclusions and findings in this report are maintained within the laboratory case records.

This case may contain evidence that must be preserved in accordance with O.C.G.A. § 17-5-56.

Edmund Donoghue
Regional Medical Examiner
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Related Agencies:
Glynn Co. Police Department ACN: G2011303
Waycross Judicial Circuit
Glynn Co. District Attorney
GBI-Medical Examiner Coastal ACN: DR. DONOGHUE
Brunswick Judicial Circuit

End of Official Report
Requested Service: Blood Alcohol - Postmortem  
Agency: Glynn Co. Police Department  
Agency Ref#: G2011303  
Requested by: Stephan Lowrey

Case Individuals:  
Victim: Ahmaud Arbery

Evidence:  
On 02/25/2020, the laboratory received the following evidence from the GBI-Medical Examiner Coastal via Lockbox.  
2020-6001183-008 Sealed package containing three tube(s) containing HEART blood identified as collected from AHMAUD ARBERY

Results and Conclusions:  
Subm#: 008  
1) Ethyl Alcohol Result by Gas Chromatography: negative

Measurement Uncertainty:  
Estimations of measurement uncertainty for ethyl alcohol, methyl alcohol, isopropyl alcohol and acetone concentrations are reported at a coverage probability of 99%.

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Glynn Co. District Attorney  
GBI-Medical Examiner Coastal  
Brunswick Judicial Circuit  
Glynn Co. Coroner  
ACN: DR. DONOGHUE

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Glynn Co. Coroner

ACN: DR. DONOGHUE

End of Official Report