

# OFFICE OF THE MEDICAL EXAMINER 701 W. Jefferson St. Phoenix, AZ 85007

#### **MEDICAL EXAMINER REPORT**

**DECEDENT**: William Warneke

**CASE**: 13-04430

DATE OF EXAMINATION: 07/02/2013

TIME: 0935 Hours

PERSONS PRESENT AT EXAMINATION:

Yavapai County Sheriff's Office: Lieutenant Tom Boelts

Arizona Forestry Division: Deputy Jerry Payne

# PATHOLOGICAL DIAGNOSES

I. Fire Related Injuries:

- A. Diffuse 3rd degree burns of the entire body with focal sparing of the distal lower extremities and part of the buttocks.
- B. History of being a firefighter caught in a wildfire.
- C. Soot deposition in the proximal and distal airways.
- II. Toxicology:
  - A. Negative for ethanol, other volatiles, and screened drugs of abuse.
  - B. Carboxyhemoglobin, 6% saturation (cardiac blood).
- III. Vitreous fluid electrolyte analysis: Non-contributory.
- IV. Evidence of Natural Disease: None identified.

CAUSE OF DEATH: Fire Related Injuries

**MANNER:** Accident

Date Signed

MARK SHELLY) DO

MEDICAL EXAMINER

WILLIAM WARNEKE 13-04430

#### REPORTED CIRCUMSTANCES OF DEATH

On July 1, 2013, Yavapai County officials requested assistance from the Maricopa County Office of the Medical Examiner with the medicolegal death investigations of 19 firefighters who died in the Yarnell Hill wildfire on June 30, 2013. Under the Maricopa County Manager's authority and direction, the Maricopa County Office of the Medical Examiner examined the firefighters' remains for the purpose of forensic identification and postmortem evaluation. The Maricopa County Office of the Medical Examiner also agreed to provide consultative services to investigating authorities and the Yavapai County Medical Examiner. The Yavapai County Medical Examiner agreed it will certify the firefighters' death certificates. The following Maricopa County Office of the Medical Examiner case numbers were designated for this incident: 13-04425, 13-04426, 13-04427, 13-04428, 13-04429, 13-04430, 13-04431, 13-04432, 13-04431, 13-04441, 13-04442, and 13-04443.

The decedent was involved in a fighting a forest fire and sustained thermal injuries.

#### **EXTERNAL EXAMINATION**

The body is received in a zippered body pouch secured by evidence seal number 025542.

#### **CLOTHING AND PERSONAL EFFECTS**

The body is clad in the items of clothing as detailed in the property inventory list.

#### **EVIDENCE OF MEDICAL INTERVENTION**

None identified.

#### **EVIDENCE OF TRAUMA**

Fire Related Injuries: There are diffuse 3rd degree burns extending from the head to the distal lower extremities, with partial sparing of the distal lower extremities where a pair of boots was located. There is partial sparing of the buttocks. There is partial sparing of the lower abdomen with green skin discoloration. There is soot deposition in the proximal and distal airways.

#### SCARS, TATTOOS AND OTHER IDENTIFYING BODY FEATURES

None identified.

#### **GENERAL EXTERNAL EXAMINATION**

The unembalmed body is that of a male 68 inches in length and weighing 164 pounds. Rigor mortis and livor mortis cannot be assessed due to thermal changes. The colors of the scalp hair and irides are indeterminate due to thermal changes. Facial hair is not identified. Dentition is good, both upper and lower. The trachea is in the midline. The thorax is well developed and symmetrical. The abdomen is flat with no palpable intraabdominal masses. The external genitalia are those of a normal male. The extremities are well developed and symmetrical.

#### INTERNAL EXAMINATION

The body is opened by a standard Y-shaped thoraco abdominal incision. All viscera occupy their appropriate anatomic relationships. Subcutaneous adipose tissue ranges up to 0.4 cm in thickness over the abdominal wall. Serous surfaces are smooth and glistening throughout. There is no significant free fluid accumulation in the body cavities.

#### **CARDIOVASCULAR SYSTEM**

The 300-gram heart occupies its usual mediastinal site. The external configuration is unremarkable. The epicardial surfaces are smooth and glistening. All major vessels arise in their appropriate anatomic relationships. The coronary arteries arise normally with no significant atherosclerotic stenosis. The myocardium is firm, red-brown without areas of softening, hemorrhage or gross scarring. No abnormal communications exist between the cardiac chambers. The cardiac valves have thin, pliable leaflets. The valve circumferences are appropriate to the caliber of the cardiac chambers. The valve cusps and surfaces are free of fusion or vegetations.

The aorta is of normal caliber with all major arterial branches arising in their appropriate anatomic relationship. Elasticity is normal. The intimal surfaces are smooth without aneurysm formation or dissection. No systemic venous abnormalities or thrombi are present.

#### RESPIRATORY SYSTEM

Please see "Evidence of trauma". The right and left lungs weigh 800 grams and 625 grams, respectively. The upper and lower airways are patent and of normal caliber. The pleural surfaces are smooth and glistening. The parenchyma is well expanded, light pink to dark red-purple, exuding moderate amounts of blood and frothy fluid. There are no areas of induration, consolidation, hemorrhage or gross scarring. The upper airway is patent.

#### DIGESTIVE/HEPATOBILIARY SYSTEM

The oropharynx is grossly normal and unobstructed. The esophagus is of normal caliber with a smooth, white mucosal lining. The gastroesophageal junction is well

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defined. The stomach has intact mucosal surfaces and the lumen contains 200 ml of partially digested food. No areas of ulceration, erosion, or hemorrhage or scarring are present. The small and large intestines are unremarkable. The appendix is present. The lobular tan pancreas is firm, without areas of fat necrosis, gross hemorrhage or space-occupying lesions. The pancreatic ducts are patent and of normal caliber.

The 1500-gram liver has a smooth intact capsule, covering red-brown parenchyma. No localizing masses, lesions or areas of hemorrhage are evident on external or cut surfaces. The intrahepatic and extrahepatic ducts are patent and of normal caliber. The gallbladder contains viscid bile. The gallbladder mucosa is grossly normal.

#### **GENITOURINARY SYSTEM**

The kidneys each weigh 150 grams. They are grossly similar. The capsules strip with ease from the smooth, red-brown cortical surfaces. The cortices are sharply delineated from the medullary pyramids. The calyces, pelves and ureters are unremarkable. The renal vessels are patent and of normal caliber.

The urinary bladder contains approximately 12 mL of yellow urine. The mucosal surfaces are flat and pink-tan. The prostate and seminal vesicles are unremarkable.

#### HEMATOPOIETIC SYSTEM

The 150-gram spleen occupies its usual anatomic site, with an intact, smooth and glistening capsule covering dark purple, moderately firm parenchyma. Regional lymph nodes have their usual distribution and appearance.

## **ENDOCRINE SYSTEM**

The thyroid and adrenal glands are grossly not remarkable.

#### NECK

The cervical spine is structurally intact. The hyoid bone and thyroid cartilage are intact. There are no hemorrhages in the strap muscles or soft tissues of the neck. The upper airway is patent.

## **MUSCULOSKELETAL SYSTEM**

The bony framework, supporting musculature and soft tissues are unremarkable.

#### **NERVOUS SYSTEM**

The scalp is reflected in the usual fashion. There are no contusions, lacerations, or abrasions. There is no skull fracture. The 1500-gram brain is covered by thin, clear, delicate leptomeninges. The dura mater and falx cerebri are intact. There is good

WILLIAM WARNEKE 13-04430

preservation of cerebral symmetry without flattening of gyri or widening of sulci. Convolutional patterns remain intact. External landmarks are readily identified. There is no evidence of herniation or either diffuse or localized swelling. The cerebral vessels are intact with no evidence of aneurysm or thrombosis. Atherosclerotic changes are not identified. Multiple coronal sections of cerebrum, cerebellum, and brain stem reveal no localized hemorrhages, masses, or lesions. The ventricular system is symmetrical, non-dilated and filled with clear fluid. The basal ganglia are grossly normal. The atlanto-occipital articulation is grossly normal.

#### **TOXICOLOGY SPECIMENS**

Samples of the following are collected and submitted for toxicological testing: cardiac blood, vitreous fluid, bile, gastric contents, urine, brain, spleen, liver, kidney, lung, and psoas muscle (see Toxicology Report).

#### FINAL SUMMARY

Based on the autopsy findings and investigative history, as available to me, it is my opinion that William Warneke, a 25-year-old male, died as a result of Fire Related Injuries. Per report and investigation, the decedent was involved in fighting a forest fire and sustained thermal injuries. Autopsy examination demonstrated extensive significant burns, with evidence of inhalation of products of combustion. Toxicology testing was negative.

The manner of death is Accident.

MES/gz D 7/3/13 T 7/1/13

The Maricopa County Medical Examiner's Office is required by statute (A.R.S. § 11-594(A)(2) and (4)) to certify the cause and manner of death following completion of the death investigation of each case over which it assumes jurisdiction, and to promptly execute a death certificate, on a form provided by the state registrar of vital statistics, indicating the cause and manner of death. The form provided by the state registrar of vital statistics includes five manners of death: homicide, suicide, accident, natural, and undetermined. The determination of manner of death is a forensic determination by the pathologist predicated upon the totality of all then-known forensic evidence and other circumstances surrounding the cause of death; it is not a legal determination of criminal or civil responsibility of any person(s) for the death.



# Maricopa County Forensic Science Center

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701 West Jefferson Street Phoenix, Arizona 85007-2908 Phone: (602) 506-3322 Fax: (602) 506-1546

July 8, 2013

Mark Shelly, D.O..

Maricopa County Forensic Science Center
Phoenix, Arizona

Re: Maricopa County Medical Examiner Case # 13-4430

Dear Dr. Shelly,

On July 3, 2013, a dental examination including dental radiographs was completed at the Maricopa County Forensic Science Center on Medical Examiner Case # 13-4430.

Also on July 3, 2013, I received the dental radiographs of Mr. William Warneke from the Department of Veteran Affairs for a comparison to Case #13-4430.

Upon comparing the antemortem dental radiographs of Mr. William Warneke and the postmortem dental radiographs of Case # 13-4430, a positive identification has been established, meaning that the antemortem and postmortem dental radiographs match in sufficient detail to establish that they are from the same individual.

Sincerely,

John Piakis D.D.S., D.A.B.F.O.

Forensic Odontologist

Maricopa County

Phoenix, Arizona

#### MARICOPA COUNTY OFFICE OF THE MEDICAL EXAMINER

REPORT OF TOXICOLOGICAL EXAMINATION

Case Number:

13-04430

Decedent:

WILLIAM HOWARD WARNEKE

Date Submitted:

07/02/2013

Report Date:

07/26/2013

Specimens Collected: VITREOUS, BLOT/FILTER PAPER, NASAL SWAB, CARDIAC

BLOOD, BILE, GASTRIC, CAVITY BLOOD, URINE, LIVER.

KIDNEY, PSOAS MUSCLE, SPLEEN, BRAIN, LUNG

Medical Examiner: MARK SHELLY, DO

RESULTS\*:

Vitreous:

None detected for ethanol, methanol, isopropanol and acetone

Cardiac Blood:

None detected for ethanol, methanol, isopropanol, acetone,

amphetamine, methamphetamine, phencyclidine, cocaine,

benzoylecgonine, methadone, morphine, codeine,

benzodiazepines, barbiturates, antihistamines, phenothiazines, tricyclic antidepressants, fentanyl, oxycodone, acid neutral drugs,

and carboxyhemoglobin saturation

Brain and Lung:

None detected for volatiles by GC/MS

Urine:

None detected for amphetamine, methamphetamine,

phencyclidine, cocaine, methadone, codeine, antihistamines.

phenothiazines, and tricyclic antidepressants

\*If results are not listed for any specimen(s), that/those specimen(s) is/are deemed to be on "HOLD"

Norman A. Wade **Laboratory Director** 

Jurisdictional Agency: YAVAPAI SO By: svp, Tox.1/2000, DAWN