Alfredo Pimienta was a married 44 year old Hispanic male who resided with his wife and two minor daughters in a home in the Paradise Hills community of San Diego. On the morning of 05/24/11 he was discovered unresponsive in the swimming pool at the home. Despite resuscitative efforts he was pronounced dead. His two daughters and wife were also found at the home and all died.

Medical Examiner's jurisdiction was invoked under CA Government Code 27491: deaths due in whole or in part to known or suspected homicide or suicide.
INVESTIGATIVE NARRATIVE

Decedent: Alfredo Pimienta

Antemortem Events:
I obtained the following information at the scene on 05/24/11 from San Diego Police Department (SDPD) Homicide Team 5 Detective J. Sanchez. The decedent resided with his wife Georgina [M.E. Case 11-1140] and minor daughters Emily [M.E. Case 11-1138] and Priscilla [M.E. Case 11-1139]. He and his wife reportedly owned a towing business. On the evening of 05/23/11 Alfredo called his nephew Richard Nuno Jr and discussed with him that he wanted to transfer business accounts to him. He asked Richard to come to the home on the morning of 05/24/11 at 0500 hours and enter the home by the gate to the side yard. [Apparently it was known that the home’s front door was not functional so everyone would usually use the gate to the side yard.] Richard indicated that he couldn’t come that early but would stop by around 0800 hours. Richard then spoke with his father and the two agreed that the phone call was odd. They thought about contacting the police, but they took no action.

On the morning of 05/24/11 in the 0500 hour Richard Nuno Jr and Alfredo again spoke about the transfer of the accounts and that Richard should enter the house by the side yard gate. Later in the morning Richard Nuno Jr went to the Pimienta home and entered by the side yard gate. He discovered bodies in the swimming pool and contacted 911. The SDPD Dispatch received the call at 0640 hours as a transfer call from the San Diego Fire Department (SDFD). Officers Heinz and Owens responded arriving at 0645 hours and SDFD, San Miguel Fire Department, and Bonita Fire were all on scene. Two bodies, Alfredo’s and Priscilla’s were removed from the pool; Emily was removed from the hot tub portion of the pool. At the same time, the officers entered the unlocked home through a sliding door into the dining room and discovered a locked interior door (a hallway bathroom), they kicked in the door and at 0647 hours discovered Georgina dead in the bathtub. Priscilla was assessed by paramedics and noted to have rigor mortis. Her death was confirmed at 0647 hours. Both Emily and Alfredo were reportedly without rigor mortis and paramedics initiated lifesaving measures. It was reported that Alfredo had a yellow rope tied around his ankles and a wire, attached to a tow hitch, around his neck; he was also handcuffed. The rope and wire were removed from Alfredo’s body. Emily was pronounced dead at 0715 hours and Alfredo at 0718 hours. Homicide protocol was initiated and Detectives responded to conduct an investigation. It was reported that other than the bathroom door being kicked in by the responding officers, there was no forced entry noted to the home and “items of value” were visible throughout the home.

Inside the home numerous handwritten notes indicating suicidal intent were discovered; there appeared to be two authors of the notes. Discovered in the master bathroom were Georgina’s open prescription bottles of oxycodone, methocarbamol, and ibuprofen 800 mg; there was also an open prescription bottle of methocarbamol prescribed to Georgina’s father Jose Villa. In the kitchen was an open bottle of Tylenol Sore Throat containing acetaminophen and diphenhydramine.

Past Medical, Surgical, and Social History:
Alfredo’s medical history was not investigated.
Scene Description:
On 05/24/11 at 1111 hours I viewed the scene in the company of Deputy Medical Examiner (DME) Mena and numerous officials with the San Diego Police Department. The scene was a single story, single family detached residence located on a residential cul-de-sac. There were vehicles parked in the driveway. We gained entrance to the property by way of a gate to the right of the front door. At the rear of the property was a covered patio connected to the rear of the home/dining room. There was an overhang of the house, creating a patio, to the rear of the home/living room. There was also an in-ground swimming pool with attached circular hot tub. There was a separate covered patio in the rear yard, behind the home and pool. The pool appeared clear and aqua blue. There were a few items visible on the bottom of the pool: a burgundy appearing strap or belt and various papers and cards. Lying around the pool were Alfredo lying near the kitchen window; Emily [ME Case 11-1138] lying near the hot tub; and Priscilla [M.E. Case 11-1139] lying on the far (south) side of the property. Near Alfredo’s feet was a metal tow hitch wrapped with wire. Tied to the support beam of the overhang of the house was a yellow braided rope. It was knotted at a height of 58 inches from the ground and the distance from the base of the post to the nearest pool edge was 72 inches. The body examinations of Alfredo, Emily [ME Case 11-1138], and Priscilla [ME Case 11-1139] were then conducted.

At 1237 hours I then viewed the interior of the home: kitchen, Priscilla’s bedroom, Emily’s bedroom, bathroom in the same hallway with the girls’ room, living room, entryway, master bedroom, and master bathroom. The hallway bathroom door jam was splintered-open. It was reported that the first arriving SDPD Officers found the door locked and forced entry into the bathroom, discovering Georgina [ME Case 11-1140] dead in the bathtub.

The interior of the home was appropriately furnished. In the kitchen was an easel with a white board on one side and a black board on the other. Notes written in both English and Spanish were on both sides of the easel. Taped to the easel were additional handwritten notes. A notebook on the floor under the easel also had handwritten notes. These notes appeared to indicate suicidal intent. As previously noted, in the kitchen was an open bottle of Tylenol Sore Throat containing acetaminophen and diphenhydramine. On a TV table in the living room were additional handwritten notes. On the couch was a garment bag apparently containing a dress. Atop the bag was a handwritten note identifying the garment as “Pris” graduation dress, “for funeral.” All notes appeared to contain directions for the family’s estate and final disposition.

In the days following my scene investigation, I was provided with a disk containing photographic images of the writings in the notebook and the other notes. On 07/26/11 upon review of the notes, they were noted to be handwritten and gave instructions for how to handle various property and estate issues after death. There were also specific burial and cremation instructions for all of the family members.

Body Description:
Alfredo was viewed lying supine on the concrete between the pool and the kitchen window at the rear of the home. For the complete body description, please refer to the Autopsy Report. His body was partially shaded by the house. His hands were not visible as they were behind his back. He was clad in dark pants with the right leg torn, socks, loafers, and dark patterned shirt which was cut/torn open. Items of medical intervention included intravenous access in the left neck, defibrillator pads, chest compression depth pad, and adjunct airway. There was a small amount of dried yellow froth at his lips. He was rolled to his side and it was noted that his hands were secured behind his back with rusty handcuffs. They were removed and turned over to SDPD personnel. His clothing was also removed and turned over to SDPD personnel.
The Medical Examiner’s contract removal service employees S. Scott and R. Hank placed Alfredo onto a new sheet atop a new vinyl body pouch. At 1131 hours Alfredo’s head, hands, and feet were secured into paper evidence bags. At 1139 hours I sealed the pouch with red tamper-evident seal #0107192.

**Special Requests:**
An agreement was made between DME Mena and the SDPD personnel regarding the date/time for the autopsy.

**Identification:**
Alfredo Pimienta was identified by SDPD personnel through his CA Commercial Driver License A4886676.

**Tissue Donation:**
Not applicable.

**Antemortem Specimens:**
Not applicable.

**Public Administrator:**
Not applicable.

**Other Important Factors:**
None.

Signed: _____________________________
Gretchen B. Geary
Medical Examiner Investigator

Date Signed: 29 July 2011

Approved by: _____________________________
July 30, 2011
AUTOPSY REPORT

Name: ALFREDO PIMIENTA  ME#: 11-1137

Place of death: Pool deck,  Age: 44 Years
162 Parkcreek Court
San Diego, CA 92114

Sex: Male

Date of death: May 24, 2011; 0718 Hours
Date of autopsy: May 25, 2011; 1001 Hours

CAUSE OF DEATH: DROWNING
MANNER OF DEATH: SUICIDE

AUTOPSY SUMMARY:

I. Drowning.
   A. Found submerged in swimming pool while handcuffed, weighted, and bound.
   B. Posterior neck curvilinear abrasion consistent with ligature mark.
   C. Multiple notes of suicidal and homicidal intent found in home.
   D. Bodies of other family members (wife and daughters) found in home.

II. Minor external injuries.

III. No evidence of natural disease.
OPINION: According to the Investigator’s Report and scene investigation, this 44-year-old male who lived with his wife and two minor daughters on 5/24/11 was found unresponsive in the swimming pool by a family member. 911 was called and he was pronounced dead following resuscitative efforts. Please see “Scene Note” for further details. The decedent’s wife (Medical Examiner’s case number “11-1140”) and two daughters (Medical Examiner’s case numbers “11-1138” and “11-1139”) were also pronounced dead at the scene.

The autopsy demonstrated a well-developed and well-nourished male with minor injuries and no anatomic explanation for the death. Findings consistent with drowning were pulmonary edema and fluid within the sphenoid sinus. The posterior neck had a curvilinear abrasion consistent with a ligature mark. Toxicological testing did not detect alcohol, common drugs of abuse, or common medications (base screen).

Based on the autopsy findings and the circumstances surrounding the death, as currently understood, the cause of death is drowning, and the manner of death is suicide.

OTHON J. MENA, M.D.
Deputy Medical Examiner

Date signed:
SCENE NOTE

On the morning of 5/24/11, the Medical Examiner’s Office received a request from the San Diego Police Department Homicide Division for presence at a probable homicide scene. Medical Examiner Investigator (MEI) G. Geary and I, the above signed, arrived at 1042 hours to the death scene located at 162 Parkcrest Court, San Diego, 92114. The separate residential home was located at the end of a cul-de-sac and we made it to the back of the home via a side gate. We were met and briefed at 1053 hours by Det. Juan Sanchez and other law enforcement personnel already present at the scene.

Preliminary information indicated that at 0640 hours the homeowner’s nephew received a phone call to arrive at the home in order to transfer some accounts. After he arrived at the home and entered the home via the side gate, he saw two bodies in the backyard pool and called 911. Four people lived in the home, consisting of the male and female parents and two daughters. Responding medical personnel attempted resuscitation on the father and youngest daughter since both had no evidence of rigor at that time. The mother and older daughter were pronounced dead without medical intervention due to full rigor. Throughout the home there were multiple items with written instructions indicating whom to call, wishes for body disposition, and other notes of suicidal nature, all appearing to have been written by the parents. The father was found submerged and bound at the north end of the pool, the older daughter was found submerged at the south end of the pool, the younger daughter was found in the hot tub, and the mother was found partially submerged within the hallway bathroom bathtub after forced entry.

The decedent was examined starting at 1111 hours. A hitch with attached wiring was reportedly around his neck, which I viewed on the ground to the east of the pool. A yellow rope was reportedly around his ankles and knotted to a post in the rear patio. The height at which it was knotted was 58 inches, the distance from the base of the post to the edge of the pool was 72 inches, and it appeared to have been looped although it had already been cut. Within the bottom of the pool was a red strap or bathrobe belt.

The man’s body was near the northeast end of the pool, with the head pointing north, supine, fully-clothed, and handcuffed behind the back. The soaked clothing consisted of black pants, black loafers, brown socks, and black with gray shirt with buttoned collar. The pants had been previously cut at the right pant leg and the shirt was open. Medical paraphernalia consisted of a plastic airway device, defibrillator pads on the right upper chest and left side of the abdomen, and vascular catheter at the left side of the neck. He had black hair and wore a moustache. The body was warm at the sun-exposed areas and otherwise cool. Rigidity was mild and lividity was slight, posteriorly distributed, unfixed, and with slight mottling at the neck and upper chest. Dry foam was present within the mouth. The hands, feet, and hair were moist. He was identified by comparison to a California driver’s license.
The clothing was removed and provided to the custody of the SDPD. Keys to the handcuffs were present within the right front pocket and the cuffs were removed and given to SDPD. A mild amount of rusty brown deposit was present on the wrists, consistent with cuff marks. No mark or injury was noted in the neck. The right bicep had a brown-yellow contusion. The right shin had a brown-yellow ecchymosis. Further examination was deferred until the autopsy scheduled to take place on 5/25/11. A yellow MEI identification band was placed around the right ankle. The head, hands, and feet are covered by paper bags that were secured with adhesive tape. The body was placed on a white sheet, placed within a white vinyl body bag, and then sealed with a red MEI tag number 0107192 at 1139 hours. The scene was left at 1344 hours, following examination of all bodies.

**AUTOPSY**

**WITNESSES:** I am assisted by Forensic Autopsy Specialist Russell Pryor, Sr. Outside witnesses from the San Diego Police Department are Detective J. Sanchez, Crime Scene Specialist H. Herbert, Crime Scene Specialist Volunteer K. Dubras, and Criminalist Amy McElroy.

**WITNESSING PATHOLOGIST:**

CRAIG NELSON, M.D.
Deputy Medical Examiner

**IDENTIFICATION:** On the surface of the body bag is a blue Medical Examiner’s tag bearing the decedent’s name and case number that is subsequently affixed around the right ankle. The body is identified by a yellow Medical Examiner’s tag around the right ankle bearing the decedent's name and case number.

**BODY COVERINGS AND CLOTHING:** The body is received within a white vinyl body bag sealed with red Medical Examiner’s Investigator tag number “0107192”. Within the bag the body is covered by a white sheet tied at the head and feet. The head, hands, and feet are covered by paper bags secured with adhesive tape. The clothing was removed at the death scene and given to the custody of the San Diego Police Department.

**EVIDENCE OF MEDICAL INTERVENTION:**

1. Inserted into the mouth is an orange plastic airway device.
2. A vascular catheter is inserted into the left side of the neck and secured with an adhesive bandage. It is connected via plastic tubing to a bag with saline solution.
3. Defibrillator pads are on the right upper chest and left side of the abdomen.
4. The proximal right shin has a 2-3/4 x 2 inch oval red-pink ecchymosis within which is a puncture site.

**POSTMORTEM CHANGES:** There is marked, symmetric rigor mortis of the upper and lower extremities, neck, and jaw. Livor mortis is posterior, red, and unfixed. The body is cold (refrigerated).

**SCARS:** The dorsolateral right hand has three curvilinear hypopigmented scars that range in length from 1/4 - 3/4 inch. The dorsal left forearm has a 5/8 inch hypopigmented linear scar. The dorsal left third finger has a 1/2 inch curvilinear hypopigmented scar. The dorsal right thumb has a 3/8 inch linear hypopigmented scar. The dorsoproximal right second finger has a 1 inch irregular area of hypopigmentation.

**TATTOOS:** None.

**EXTERNAL EXAMINATION**

The body is that of a well-developed, well-nourished male who measures 70 inches, weighs 171 pounds, and appears compatible with the given age of 44 years.

The scalp hair is dark brown with gray on the sides and measures up to 1-1/4 inches at the vertex. The decedent wears a moustache and is unshaven. The nose and facial bones are palpably intact. The ears are normally formed. The eyes have blue-gray irides, round equal pupils, and translucent corneae. The sclerae and conjunctivae are without hemorrhage, petechiae, or jaundice. The nose is normally formed. The nares are unobstructed. The lips are normally formed. The teeth are natural and in good condition. Within the mouth is a marked amount of white foamy fluid. The neck is symmetrical. The anterior and left anterior aspects of the neck have red-purple lividity/discoloration along the folds of the neck, not specific for a ligature furrow.

The thorax is well developed and symmetrical. The abdomen is slightly protuberant, but soft. The surface of the back is free of lesions. The external genitalia are those of a normal adult male. The testes are palpable within the scrotum. The anus is unremarkable. The upper and lower extremities have no needle track marks, edema, or amputations. The hands have increased lividity, right side greater than left. Each wrist has circumferential curvilinear red-pink areas of discoloration with pallor between the lines, consistent with handcuff marks also noted at the scene. The medial right wrist cuff mark is partially abraded. The fingernails are slightly dirty and somewhat irregular at the edges, but shortly trimmed. The toenails are clean and shortly trimmed. The hands and feet feel moist, although there are no immersion-type changes.

**EVIDENCE OF INJURY**
DESCRIPTION OF BLUNT FORCE INJURIES:

HEAD AND NECK:
Just lateral to the right eye are two small red-brown abrasions that measure 1/16 inch each in greatest dimension. Lateral to the left eye is a 3/4 inch oval pink somewhat abraded patch. The right occiput has a 3/4 inch mild scalp-subgaleal hematoma. Suctioning of the sphenoid sinus recovers 2 ml of tan clear fluid.

The posterolateral left side of the neck has a curvilinear 3-1/2 inch long thin red-brown abrasion consistent with a ligature mark. The superior left sternohyoid muscle, just to the left of the anterior midline, has a 1/4 inch faint pink hematoma.

EXTREMITIES:
The right biceps has a 1 x 3/4 inch brown contusion. The dorsal right hand, from the wrist to the proximal fingers, is contused and discolored red-pink. Incision of the dorsal hand demonstrates mild subcutaneous hemorrhage.

The medial right knee has a 1/2 inch oval pink-red contusion and a 5/16 inch brown round contusion. The medial right ankle has a 3/8 inch elliptical brown scabbred abrasion. The left shin has a 1/4 inch irregular brown partially scabbred abrasion.

INTERNAL EXAMINATION

BODY CAVITIES: The subcutaneous abdominal fat layer measures 2.7 cm in thickness. The pleural cavities have a mild amount of fibrous pleural adhesions, left side greater than right. There is generalized visceral congestion. No abnormal fluid collections are in any of the body cavities. The serosal surfaces are otherwise smooth and glistening. The diaphragm is intact. The organs are normally located.

CARDIOVASCULAR SYSTEM: The heart weighs 400 grams and has a normal overall shape and smooth, glistening epicardial surface. The coronary arteries arise normally, follow a right dominant course, and have no significant atherosclerotic stenosis. The myocardium is uniformly dark red and firm without pallor, hemorrhage, softening, or fibrosis. The ventricles are not dilatated. The right ventricle, left ventricle and interventricular septum measure 0.4 cm, 1.6 cm and 1.5 cm in thickness, respectively. The endocardial surfaces and four cardiac valves are unremarkable and without vegetations. The coronary ostia are normally placed and widely patent. There are no interatrial or interventricular septal defects.

The aorta and its major branches follow the usual course, with minimal atherosclerotic
changes. There are no vascular anomalies or aneurysms. The vena cava and pulmonary arteries are without thrombus or embolus.

**RESPIRATORY SYSTEM:** The right and left lungs weigh 685 and 635 grams, respectively. They have the usual lobation. The pleural surfaces are smooth and glistening with minimal anthracosis, aside from a mild amount of fibrous pleural adhesions. The airways contain a moderate amount of tan-white frothy fluid. The pulmonary parenchyma is pink-red and exudes a moderate amount of blood and moderate amount of frothy fluid, especially at the upper lobes. There is no consolidation or enlargement of the airspaces.

**HEPATOBILIARY SYSTEM:** The liver weighs 1950 grams. The intact capsule is smooth and glistening. Cut surfaces are red-brown and uniform without palpable fibrosis, hemorrhage, yellow discoloration, or masses. The gallbladder contains an estimated 20 ml of bile and no stones. Its mucosa is unremarkable.

**HEMOLYMPHATIC SYSTEM:** The spleen weighs 260 grams and has a smooth intact capsule. Cut surfaces are maroon, firm and uniform. There is no enlargement of the lymph nodes.

**GASTROINTESTINAL SYSTEM:** The esophagus and gastroesophageal junction are unremarkable. The stomach is empty. The gastric and duodenal mucosae are unremarkable. The small and large intestines are unremarkable to inspection and palpation. The appendix is present and unremarkable.

The pancreas has unremarkable, lobulated, tan-brown parenchyma without fibrosis, masses, or calcification, and has mild hemorrhage.

**GENITOURINARY SYSTEM:** The right and left kidneys weigh 165 and 205 grams, respectively. The capsules strip with ease from the underlying smooth, red-brown, firm cortical surfaces. The corticomedullary architecture is unremarkable. The pelves are not dilated. The ureters maintain uniform caliber into an unremarkable bladder without thickening. The bladder contains 3 ml of cloudy yellow urine. The prostate gland is not enlarged.

**ENDOCRINE SYSTEM:** The thyroid gland is not enlarged, and the lobes are symmetrical. Cut surfaces show a uniform, firm, red-brown parenchyma. The adrenal glands have the usual golden cortical ribbon and unremarkable medullae. The pituitary gland is unremarkable.

**MUSCULOSKELETAL SYSTEM:** The bony framework and supporting musculature are
not unusual. The ribs are not brittle. The cervical spinal column is stable on internal palpation.

**HEAD:** The scalp is atraumatic. The skull has no fracture. There is no epidural or subdural hemorrhage. Removal of the dura from the base of the skull reveals no fractures.

**CENTRAL NERVOUS SYSTEM:** The unfixed brain weighs 1400 grams. The dura mater and falx cerebri are intact, and not adherent to the brain. The leptomeninges are thin and transparent. There is no subarachnoid hemorrhage. There are no cortical contusions. The cerebral vessels are without aneurysms or atherosclerosis.

The cerebral hemispheres are symmetrical with unremarkable sulci and gyri. The white and gray matter, deep nuclei, and ventricles are symmetrical and unremarkable. The brainstem and cerebellum have the usual patterns. The substantia nigra is normally pigmented. There are no focal hemorrhages, masses, infarcts, or other lesions.

**NECK:** The trachea and larynx are patent and lined by glistening, pink-tan mucosa and are empty. The cervical vertebrae, hyoid bone, and tracheal and laryngeal cartilages are without fracture. The unremarkable tongue and paratracheal soft tissues are without hemorrhage.

**SPECIMENS**

**TOXICOLOGY:** The following specimens are submitted for toxicology: central and peripheral blood, vitreous humor, urine, and liver.

**HISTOLOGY:** Representative portions of major organs and tissues are retained in formalin. Sections of heart (2), lungs (4), liver (1), kidneys (2), and pancreas (1) are submitted for microscopic examination.

**PHOTOGRAPHS:** Facial identification, overall external, and injuries digital photographs are taken.

**X-RAYS:** None.
MICSROSCOPIC EXAMINATION

HEART: There is no significant histopathology.

LUNGS: There is no significant histopathology.

LIVER: There is no significant histopathology.

KIDNEYS: There is no significant histopathology.

PANCREAS: The section demonstrates a mild to moderate amount of erythrocyte extravasation, especially of the interstitium.
TOXICOLOGY REPORT

Name: PIMIENTA, Alfredo
Medical Examiner Number: 11-01137
Date of Death: 05/24/2011
Pathologist: Othon Mena, M.D.
Specimens Received: Central Blood, Liver, Peripheral Blood, Urine, Vitreous

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End Results

Approved and Signed: 06/10/2011 Iain M. McIntyre, Ph.D. Forensic Toxicology Laboratory Manager (All Inquiries/Correspondence)
Reviewed: Phyllis Mallett Toxicologist II