



County of San Diego

GLENN N. WAGNER, D.O.
CHIEF MEDICAL EXAMINER

OFFICE OF THE MEDICAL EXAMINER
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CHRISTINA STANLEY, M.D.
CHIEF DEPUTY MEDICAL EXAMINER

INVESTIGATIVE REPORT

8/3/2011

CALL INFO	NAME OF DECEASED (LAST, FIRST MIDDLE) PIMIENTA, Emily Aliyah			AKA		HIO <input type="checkbox"/>	CASE NUMBER 11-01138	
	INVESTIGATOR Gretchen B. Geary		REPORTED BY Detective Howie		REPORTING AGENCY San Diego Police			PREVIOUS WAIVE #
	CALL DATE AND TIME 05/24/2011 0942		ARRIVAL DATE AND TIME 05/24/2011 1040			RETURN DATE AND TIME 05/24/2011 1420		
DECEDENT	DATE AND TIME OF DEATH 05/24/2011 0715		DATE OF BIRTH 10/31/2001		AGE 9 Years		GENDER Female	
	RACE Hispanic Mexican		RESIDENCE (STREET, CITY, STATE, ZIP) 162 Parkcreek Court San Diego, CA 92114			COUNTY San Diego		LAST SEEN ALIVE Unk
	SOCIAL SECURITY NO. 616-29-5068		CITIZENSHIP USA		OCCUPATION Student			PAID AUTOPSY <input type="checkbox"/>
DEATH	LOCATION OF DEATH Home (pool deck)				TYPE OF PLACE Decedent's Home			
	ADDRESS (STREET, CITY, STATE, ZIP) 162 Parkcreek Court San Diego, CA 92114							
	<p>SUMMARY</p> <p>Emily Pimienta was a 9 year old Hispanic female who resided with her parents and older sister in a home in the Paradise Hills community of San Diego. On the morning of 05/24/11 she was discovered unresponsive in the swimming pool at the home. Despite resuscitative efforts she was pronounced dead. Both parents and her older sister also died at the home that morning.</p> <p>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.</p>							
INCIDENT	LOCATION OF INCIDENT Home (pool)				INCIDENT PLACE TYPE AT WORK <input type="checkbox"/> AT RESIDENCE <input type="checkbox"/>			
	ADDRESS (STREET, CITY, STATE, ZIP) 162 Parkcreek Court San Diego, CA 92114				COUNTY San Diego			
	DATE AND TIME OF INCIDENT 05/24/2011 Unk		INVESTIGATING AGENCY San Diego Police		OFFICER Det J. Sanchez		BADGE #	REPORT #
	DECEDENT WAS		BELTED	HELMETED <input type="checkbox"/> Yes <input type="checkbox"/> No	POSITION		ON PRIVATE PROPERTY <input type="checkbox"/> Yes <input type="checkbox"/> No	
	VEHICLE				LICENSE NUMBER		STATE	
NOTIFICATION	IDENTIFIED BY SDPD				METHOD		DATE AND TIME 05/24/2011 1200	
	FUNERAL HOME El Camino National City				PROPERTY <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		PUBLIC ADMINISTRATOR <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	TYPE OF EXAM Autopsy
	NAME OF NOK OR OTHER Jose & Lydia Villa		RELATIONSHIP Grandparent		DATE NOTIFIED 5/24/2011 10:00:00 AM		NOTIFIED BY Other	
	NAME OF NOK OR OTHER 4 total Pimienta Aunts/Uncles		RELATIONSHIP Aunt		DATE NOTIFIED 5/24/2011 8:00:00 AM		NOTIFIED BY Other	

San Diego Medical Examiner
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San Diego, CA 92123-1206
(858) 694-2895

Case Number : 11-01138
Investigator : Gretchen B. Geary
Date of Death : 05/24/2011
Date Today : 08/03/2011

INVESTIGATIVE NARRATIVE

Decedent: Emily Aliyah 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. Emily resided with her mother Georgina [M.E. Case 11-1140], father Alfredo [M.E. Case 11-1137], and older sister Priscilla [M.E. Case 11-1139]. Her parents reportedly owned a towing business. On the evening of 05/23/11 her father 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:

Emily'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 [M.E. Case 11-1137], lying near the kitchen window; Emily 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 [M.E. Case 11-1137], Emily, and Priscilla [M.E. 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 T.V. 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:

At 1145 hours we began Emily's body examination. For the complete body description, please refer to the Autopsy Report. Emily was lying prone on the concrete near the hot tub; her feet pointed in a southwesterly direction. Her body was shaded by a palm tree. She was clad in a cut red shirt and cut jeans. A sweatshirt was near her head. Items of medical intervention included an intraosseous line in her right shin, defibrillator pads, cardiac monitor tabs, cervical collar, endotracheal tube with tube tamer, and nasal trumpet. Her clothing was removed at the scene and transferred to SDPD personnel.

The Medical Examiner's contract removal service employees S. Scott and R. Hank placed Emily onto a new sheet atop a new vinyl body pouch. At 1157 hours Emily's head, hands, and feet were secured into paper evidence bags. At 1200 hours I sealed the pouch with red tamper-evident seal #0107772.

Special Requests:

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

Identification:

Emily Pimienta was identified by SDPD personnel.

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



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AUTOPSY REPORT

Name: EMILY ALIYAH PIMIENTA **ME#:** 11-1138
Place of death: Pool deck,
162 Parkcreek Court
San Diego, CA 92114 **Age:** 9 Years
Sex: Female
Date of death: May 24, 2011; 0715 Hours
Date of autopsy: May 25, 2011; 1254 Hours

CAUSE OF DEATH: DROWNING

MANNER OF DEATH: HOMICIDE

AUTOPSY SUMMARY:

- I. Drowning.
 - A. Body found in hot tub attached to swimming pool.
 1. Bodies of other family members (sister, father, and mother) found in swimming pool and bathtub.
 2. Notes written by parents indicating homicidal intent.
 - B. Pulmonary congestion/edema, mild (right lung 450 grams; left lung 470 grams).
 - C. Trace mucoid material in sphenoid sinus.
- II. Blunt force injuries.
 - A. Small abrasion of nose.
 - B. Contusions of chest with petechial hemorrhages of left side of neck and chest.
 - C. Small abrasions of right elbow.
 - D. Small contusion of right shin.
 - E. Small contusion of right trapezius muscle (back).
- III. Acute acetaminophen, diphenhydramine, and trazodone intoxication; see Toxicology Report.
- III. No significant pre-existing natural disease.

OPINION: According to the Investigator's Report and scene investigation by Deputy Medical Examiner Dr. Othon Mena, on the morning of 5/24/11, the body of this 9-year-old girl was found in the hot tub portion of the backyard swimming pool of her family's home. Emergency responders removed her from the hot tub and initiated resuscitative efforts, but death was pronounced at the scene. The body of her father (Medical Examiner's case 11-1137) and sister (Medical Examiner's case 11-1139) were found in the swimming pool. Her mother's body (Medical Examiner's case 11-1140) was found in a bathtub inside the home. Notes were found in the home indicating that the daughters had been killed by at least one of their parents. For further investigation, see Dr. Mena's "Scene Note" below.

The autopsy documented a well-developed, well-nourished girl with contusions of the right side of her chest and shoulder and arrays of petechial hemorrhages of the left side of her chest and shoulder. However, her injuries were relatively minor and were insufficient to explain her death. She had pulmonary congestion/edema consistent with drowning. She had no significant pre-existing natural disease.

Toxicological testing detected a markedly elevated level of acetaminophen. However, the liver had no microscopic findings of centrilobular necrosis, indicating that death occurred before hepatotoxicity could manifest. An elevated level of diphenhydramine was also detected; while the level was not within reported fatal ranges, it was within levels reported to cause negative reactions in children. Notably, a partly empty bottle of "Tylenol Sore Throat Nighttime" over-the-counter medication was found at the scene. This liquid medication contains both acetaminophen and diphenhydramine. It also has a bright blue color, which likely corresponded to the unusual blue-green color of the gastric contents found during autopsy. These findings suggest intentional administration of excess medication to the decedent prior to her death, with enough time for much of the acetaminophen and diphenhydramine to be absorbed. Testing also detected trazodone. While the level of trazodone was within reported therapeutic ranges in adults and only a small amount of residual trazodone was detected in the gastric contents, it is not expected that a 9-year-old child would be administered this medication for therapeutic reasons. Although these medications are unexpected and potentially causative of negative reactions, they are not felt to be contributory to her death other than to represent intent by another to cause sedation prior to forcible drowning.

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The decedent was found in a hot tub and had findings consistent with drowning. There was not enough trauma and no natural disease to otherwise explain her death. Toxicological findings were felt to be insufficient to cause death in view of microscopic findings. However, the scene had notes of homicidal intent written by her parents. It appears that she was forcibly drowned, by one or both of her parents. Therefore, 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 homicide.

CRAIG NELSON, M.D.
Deputy Medical Examiner

Date signed:

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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 below 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 approximately 1145 hours. The girl's body was to the east of the hot tub, with the head pointing northeast, supine, and fully-clothed. The soaked clothing consisted of blue jeans that were cut anteriorly along the legs, red shirt, purple underpants, and a black sweatshirt beside the head. Irregular black polish was present on some of the nails. Medical paraphernalia consisted of electrocardiogram pads on the shoulders and left side of the abdomen, defibrillator pads on the mid chest, lateral left torso, left wrist, and back, an intraosseous line at the proximal right shin, endotracheal tube secured with a tamer, and a right nasal trumpet. She had long, light brown, wet hair. The body was at ambient temperature to slightly cool, with posteriorly distributed unfixed lividity, and marked symmetric rigidity of the lower extremities and jaw, with mild to moderate rigidity in other areas. Clear fluid emanated from the nose.

The clothing was removed and provided to the custody of the SDPD. Injuries noted were a red-brown abrasion of the bridge of the nose and small brown abrasions of the right elbow. No oral trauma was present. The abdomen was taut and appeared distended. 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 were covered by paper bags that were secured with adhesive

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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 0107772 at 1159 hours. The scene was left at 1344 hours, following examination of all bodies.

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

Date signed:

AUTOPSY

IDENTIFICATION: The body is received in a white vinyl body pouch sealed with red tag 0107772. The tag is retained in the stock jar. A blue Medical Examiner's identification band bearing the decedent's name and case number is on the outside of the bag and is affixed to the right ankle following opening of the bag. Already on the right ankle is a yellow identification band bearing the decedent's name.

WITNESSES: Present are San Diego Police Department Detective Jana Beard and Crime Specialist Jennifer Sanders. Assisting is Senior Forensic Autopsy Specialist Ted Nilsen.

WITNESSING PATHOLOGIST:

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

Date signed:

CLOTHING AND BODY COVERINGS: The body is wrapped in a white sheet. Paper evidence bags are on the head, hands, and feet. The body is otherwise unclad. No clothing accompanies the body, as it was removed at the scene.

EVIDENCE OF MEDICAL THERAPY:

1. In the right naris is a nasal trumpet.
2. In the mouth is an endotracheal tube, 20 cm at the teeth. A tube tamer is with the body, but has been partly removed.
3. A cervical collar is in place.
4. EKG pads are on the chest and abdomen.
5. Defibrillator pads are on the chest and back (total of 3 pads).
6. An intraosseous catheter is in the right shin.

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EMILY PIMIENTA 11-1138

EXTERNAL EXAMINATION

Injuries are described in a separate section below.

GENERAL: The body is that of a normally developed, well-nourished, medium-complexioned female appearing consistent with the listed age of 9 years. The length is 53 inches, and the weight is 82 pounds as received. The body is cold, well preserved, and has not been embalmed. Rigidity is fully developed in the jaw, hips, and knees, and mild in the elbows. Lividity is pink-purple, blanching, and in a posterior distribution.

HEAD: The scalp is covered with wavy, brown hair measuring up to 14 inches at the vertex. The ears are normally formed and without drainage. Each earlobe has a single piercing. The irides are brown, the corneas slightly cloudy, and the bulbar and palpebral conjunctivae free of petechiae. The sclerae are white. The nose is intact, and the nares unobstructed other than the aforementioned nasal trumpet. There are fly eggs in the left naris. The lips are normally formed. The teeth are natural and in good condition. The superior and inferior frenula are intact. No buccal mucosal injuries or petechiae are seen. Some teeth have white metal dental work. No foreign material other than the aforementioned endotracheal tube is in the mouth.

NECK: The neck is normally formed and symmetrical.

CHEST: The chest is normally formed, symmetrical, and without palpable masses.

ABDOMEN: The abdomen is flat and soft. No masses are palpable.

EXTERNAL GENITALIA: The atraumatic external genitalia are those of a prepubescent female.

ARMS: The arms are normally formed. No needle punctures, track marks, or ventral wrist scars are seen. The fingernails are trimmed short and clean.

LEGS: The legs are normally formed and without edema. The toenails are trimmed short and have brown dirt underneath. Additionally, there is chipped, black polish on the right 1st, 3rd, 4th, and 5th toes and the left 1st toe.

BACK: The back is straight and symmetrical. The anus is atraumatic.

BODY MARKINGS (SCARS AND TATTOOS): No tattoos or significant traumatic or surgical scars are seen.

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INJURIES, EXTERNAL AND INTERNAL

On the left side of the nose is a 1/2 x 1/4 inch, irregular, superficial, red-orange abrasion.

On the right side of the chest is a 2-1/2 x 1-3/4 inch area of multiple punctate, discontinuous and confluent, red hemorrhages measuring up to 1/8 inch in greatest dimension, as well as a few purple hemorrhages measuring up to 1/8 inch in greatest dimension. Focal hemorrhage underlies this area and overlies the midportion of the right clavicle. There is a 1 x 1 inch area of irregular, purple hemorrhage of the anterior portion of the right trapezius muscle in addition.

On the left side of the chest is a 1/2 x 1/4 inch, irregular, blue contusion. Additionally, on the left upper chest and shoulder are several curvilinear arrays of punctate, red hemorrhages that, individually, measure less than 1/16 inch in greatest dimension; the arrays measure up to 1-1/2 inch in length. Additionally, on the left side of the neck is an approximately 2 x 1-1/2 inch area of fine, punctate, red petechial hemorrhages.

Posterior dissection of the musculature of the back reveals an approximately 1/2 x 1/2 inch hemorrhage of the medial portion of the right trapezius muscle.

On the posterior aspect of the right elbow are three linear, superficial, red abrasions each measuring 3/16 inch in length, and a 1-1/16 x 1/16 inch, irregular, superficial, red abrasion. On the right shin is a 3/8 inch, round, pink contusion.

INTERNAL EXAMINATION

BODY CAVITIES: The abdominal fat layer measures 2 cm in thickness. Each pleural cavity contains approximately 25 ml of watery, yellow, transparent fluid. The pericardial sac contains approximately 10 ml of similar-appearing fluid, as does the peritoneal cavity. The serosal surfaces are smooth, glistening, and without adhesions. The organs are normally located. The diaphragm is intact.

CARDIOVASCULAR SYSTEM: The heart weighs 150 grams. It has a normal shape with a smooth, glistening epicardium. The coronary arteries have a normal origin and distribution with left dominance. They are widely patent and free of stenosis. The endocardium is intact, smooth, and glistening. The cardiac valve leaflets are of normal number, intact, and free of vegetations. The ventricles are not dilated or hypertrophied. The atrial and ventricular septa are free of defects, although the foramen ovale is probe patent. The myocardium is red-brown, firm, and uniform without focal fibrosis, softening, or hyperemia. The right ventricle, left ventricle, and interventricular septum measure 0.3 cm, 1.1 cm, and 1.1 cm, respectively.

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The aorta follows its usual course and has an elastic, smooth, tan intima. There are no vascular anomalies or aneurysms. The vena cavae and pulmonary arteries are without thrombus or embolus.

RESPIRATORY SYSTEM: The right and left lungs weigh 450 and 470 grams, respectively. (Expected right and left lung weights for a 9-year-old female are 156.3 – 259.0 grams and 136.4 – 214.6 grams, respectively.) They have the usual lobation. The pleura is smooth and glistening with no appreciable anthracotic pigment. The lungs are well expanded, crepitant, and edematous. The parenchyma is pale red anteriorly with posterior dependent, purple congestion. The parenchyma exudes moderate to marked amounts of bloody, frothy fluid on sectioning. The lungs have no consolidation, hemorrhage, infarct, tumor, gross fibrosis, or enlargement of the airspaces. The bronchi have smooth, tan mucosa and contain white froth.

HEPATOBIILIARY SYSTEM: The liver weighs 1090 grams. The intact capsule is smooth and glistening. The parenchyma is red-brown and uniform without mass, hemorrhage, yellow discoloration, or palpable fibrosis.

The gallbladder contains an estimated 10 ml of bile and no stones. Its mucosa is uniform and the wall is not thickened.

The pancreas has a normal size and shape. The parenchyma is pink-tan, firm, and has the usual lobulated architecture.

HEMOLYMPHATIC SYSTEM: The spleen weighs 80 grams. The capsule is smooth and intact. The parenchyma is maroon, firm, and uniform.

There is no enlargement of the lymph nodes in the neck, chest, or abdomen.

The thymus is of the appropriate size for the decedent's age and has a purple, lobulated parenchyma.

ENDOCRINE SYSTEM: The thyroid gland is not enlarged, and the lobes are symmetrical. The parenchyma is uniform, firm, and red-brown.

The adrenal glands have the usual size and shape. The cortices are thin, uniform, and yellow and there is no hemorrhage or tumor. The pituitary gland is not enlarged.

GASTROINTESTINAL SYSTEM: The esophagus and gastroesophageal junction are unremarkable. The stomach contains approximately 50 ml of bright blue-green fluid with fragments of what appear to be citrus fruit. The gastric and duodenal mucosae are intact and unremarkable. The small and large intestines and appendix are unremarkable to inspection and palpation.

GENITOURINARY SYSTEM: The right and left kidneys weigh 80 and 100 grams, respectively. They have the normal shape and position. The capsules strip with ease, revealing smooth cortical surfaces with persistent fetal lobulations. The renal parenchyma has the usual corticomedullary structure without tumors or cysts. The pelves and ureters are not dilated or thickened. The bladder contains no urine. The mucosa is intact, and the bladder wall is not hypertrophied.

The uterus, tubes, and ovaries are of expected size for the decedent's age and are externally unremarkable. The cervix is patent with a round os. The myometrium is uniform and the endometrium is tan. The sectioned ovaries are unremarkable. The vagina is unremarkable.

NECK: The tongue, strap muscles, and thyroid and pharyngeal constrictors have no hemorrhage. There is mild focal hemorrhage of the posterior pharynx in association with intubation. The hyoid bone and the cartilaginous structures of the larynx are normally formed and without fracture. The airway is unobstructed, lined by smooth, pink-tan mucosa, and contains no foreign material other than the aforementioned endotracheal tube. The cervical vertebrae have no displacement, hypermobility, or crepitus. There are focal hemorrhages of the proximal trachea in association with intubation.

MUSCULOSKELETAL SYSTEM: The musculoskeletal system is well developed and free of deformity. There are no fractures of the clavicles, sternum, ribs, vertebrae, or pelvis. The skeletal muscle is dark red and firm. Posterior dissection of the back and musculature of the neck reveal no hypermobility of the neck anteriorly or posteriorly and no paraspinal hemorrhage.

HEAD: The scalp is free of hemorrhage. The calvarium is intact and normally configured. The base of the skull has no fractures. The dura is intact, and there is no epidural or subdural hemorrhage. A trace amount of brown, mucoid fluid is aspirated from the sphenoid sinus.

CENTRAL NERVOUS SYSTEM: The unfixed brain weighs 1390 grams. The leptomeninges are glistening and transparent without underlying subarachnoid hemorrhage, exudate, or cortical contusions. The hemispheres are symmetrical with a normal gyral pattern. There is no flattening of the gyri, narrowing of the sulci, or evidence of herniation. The arteries at the base of brain are intact and have no significant atherosclerotic changes or aneurysms.

Coronal sections through the cerebral hemispheres show a uniform, intact cortical ribbon. The basal ganglia, thalami, hippocampi, and other internal structures are symmetrical and without focal changes. The white matter is uniform. The ventricles are not enlarged, and the linings are smooth and glistening. Sections of the brainstem and cerebellum show an intact structure without focal lesions.

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EMILY PIMIENTA 11-1138

SPECIMENS RETAINED

TOXICOLOGY: Samples of central and peripheral blood, vitreous humor, gastric contents, urine, and liver are retained for toxicology.

HISTOLOGY: Representative sections of organs and tissues are retained. Sections of the heart (1), lungs (5), liver (1), and kidney (1) are submitted for histology.

PHOTOGRAPHS: Digital identification photographs, overall external body photographs, and photographs of injuries are taken.

RADIOGRAPHS: Postmortem radiographs together encompassing the entire body show medical equipment and evidence of dental work. There are no unexpected radiopaque foreign objects.

MICROSCOPIC EXAMINATION

HEART: One section shows unremarkable cardiomyocytes without inflammation. No necrosis, fibrosis, or hypertrophic changes are present. Vessels are unremarkable.

LUNGS: One section of each lobe shows normal alveoli without inflammation. Septa are congested, but thin and delicate. Some alveoli contain extravasated red blood cells. Several alveoli and many of the larger airways contain foreign material, which may represent aspiration of gastric material. Some of this material has associated large fragments of crystalline material, which is refractile under polarized light. Larger airways have no basement membrane thickening, eosinophilia, muscular hyperplasia, or mucosal gland hyperplasia.

LIVER: One section shows normal hepatocytes without steatosis. There are a few foci of parenchymal mononuclear inflammatory cells that appear to be associated with single, necrotic hepatocytes.

KIDNEY: One section of kidney demonstrates normocellular glomeruli without inflammation. Tubules are unremarkable and without inflammation or casts. No interstitial inflammation or fibrosis is present. Vessels show no thickening.

CN:OJM:lcb

D: 5/25/11 T: 5/26/11

Rev. 7/13/11 lcb



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CHIEF DEPUTY MEDICAL EXAMINER

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5570 OVERLAND AVE., Ste #101, SAN DIEGO, CALIFORNIA 92123-1206
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TOXICOLOGY REPORT

Name: **PIMIENTA, Emily**

Medical Examiner Number: **11-01138**

Date of Death: **05/24/2011**

Pathologist: **Craig Nelson, M.D.**

Specimens Received: **Central Blood, Gastric, Liver, Peripheral Blood, Vitreous**

<u>Test Name (Method of Analysis)</u>	<u>Specimen Tested</u>	<u>Result</u>
<u>Alcohol Analysis (GC)</u>	Peripheral Blood	
Alcohol (Ethanol)		Not Detected
Acetone, Methanol, Isopropanol		Not Detected
<u>Drugs of Abuse Screen (ELISA)</u>	Central Blood	
Cocaine metabolites		Not Detected
Amphetamines		Not Detected
Opiates		Not Detected
Benzodiazepines		Not Detected
Fentanyl		Not Detected
Cannabinoids		Not Detected
<u>Base Screen (GC/MS)</u>	Peripheral Blood	
Diphenhydramine		Detected
Trazodone		Detected
Acetaminophen		Detected
<u>Acid/Neutral Screen (HPLC-DAD)</u>	Peripheral Blood	
Acetaminophen		110 mg/L
Diphenhydramine		Detected
Trazodone		Detected
<u>Acid/Neutral Screen (HPLC-DAD)</u>	Gastric	
Acetaminophen		150 mg
Trazodone		Detected
Diphenhydramine		Detected

Diphenhydramine (GC-NPD)	Peripheral Blood Gastric	1.6 mg/L 7 mg
Trazodone (HPLC-DAD)	Peripheral Blood Gastric	1.0 mg/L 4 mg

End Results

Approved and Signed: _____
06/30/2011 Iain M. McIntyre, Ph.D.
Forensic Toxicology Laboratory Manager
(All Inquiries/Correspondence)

Reviewed: _____
Phyllis Mallett
Toxicologist II