

**Case# 2007-1397****MEDICAL EXAMINER'S REGISTER**

CITY AND COUNTY OF SAN FRANCISCO - RECORD OF DEATH

Name: **SOUSA, CARLOS EDUARDO**Alias: **DOE, JOHN #116**

ADDRESS: 1663 TAMPA COURT SAN JOSE CA 95122
 DATE OF DEATH: 12/25/2007 TIME: 5:20 PM REPORTED BY: EMT-P
 DATE OF REPORT 12/25/2007 TIME: 5:53 PM REPORTED PHONE:
 PLACE OF DEATH: SAN FRANCISCO ZOO ZIP:
 TYPE OF CASE: TIGER MAULING DATE AND TIME OF INCIDENT: 12/25/2007 5:05 PM
 PLACE OF INCIDENT: SAN FRANCISCO ZOO ZIP:
 NEXT OF KIN: DATE NOTIFIED 12/26/2007
 BIRTHDATE 09/26/1990 AGE: 17 SS# SEX: MALE RACE WHITE
 RECEIVED AT MEDICAL EXAMINER: 12/25/2007 TIME: 10:55 PM
 RELEASED TO: Darling-Fischer FUNERAL DIRECTOR
 RELEASED DATE: 12/31/2007 TIME: 15:10
 RECEIVED BY: CLOTHING RECEIVED: no
 RELEASE SIGNED BY RELATIONSHIP:
 POUCH: YES RESIDENCE SEALED:

PROPERTY LISTING	INITIALS	EVIDENCE LISTING	INITIALS
1 IPOD ON RESEARCH	()	1 PHOTO DISK	()

 VERIFIED BY: SG DATE: 12/26/2007
 PUBLIC ADMINISTRATOR: DATE NOTIFIED:
 PLACED IN BOX #: 540 RECEIVED AMOUNT: \$0.00 CHECK#: _____
 RECEIVED BY: RELATIONSHIP: DATE/TIME: _____
 RECEIVED BY: RELATIONSHIP: DATE/TIME: _____
 BODY SEARCHED BY: TIMOTHY HELLMAN #10 AT: SCENE
 PREMISES SEARCHED BY: AT: _____
 PREMISES SEALED BY: DATE: _____
 EXAMINATION: PERFORMED BY: MOFFATT M.D.
 EVIDENCE DISPOSITION: _____
 INVESTIGATORS: TIMOTHY HELLMAN #109 CHARLES CECIL #126

INITIALS
 JUN - 2 AM 11:20
 SAN FRANCISCO
 MEDICAL EXAMINER

APPROVED COPY

m 6/2/08

Case#: 2007-1397 Status: ACTIVE
Name: SOUSA CARLOS EDUARD alias: DOE JOHN #116

Police Notified

Police_Office:
Police_Officer:

Police_At_Scene: YES
Officer: LOZADA #389
Station: TARAVAL
SFPD_Case#: 071-316-282

Homicide_Office:
Homicide Officer:
Notification Date:
Notification Time:

AIB_or_HR_Notified:
Date:
AIB_Officer:
Nature:

Fingerprints_Taken: YES Palprints_Taken: YES

Taken_By: FATS
Taken Date: 12/27/2007
To_SFPD_Date: Match: Match#: NRNS
To_CII_Date: Match: Match#:
To_FBI_Date: Match: Match#:
Photos_Date: Taken_By:



Case#: 2007-1397

MEDICAL EXAMINER / INVESTIGATOR'S REPORT

CITY AND COUNTY OF SAN FRANCISCO - RECORD OF DEATH

NAME: SOUSA **CARLOS EDUARDO** **Date/Time of Death:** 12/25/2007 5:20 PM
PLACE OF DEATH SAN FRANCISCO ZOO **Age:** 17 **Sex:** MALE **Race:** WHITE
POLICE NOTIFIED **POLICE STATION NOTIFIED** **POLICE OFFICER**
HOMICIDE NOTIFIED **DATE** **TIME** **HOMICIDE OFFICER**
MARITAL STATUS: UNKNOWN
IDENTIFIED BY: FATHER **AT:** VISUAL @ SFME **DATE:** 12/26/2007
FINGERPRINTS TAKEN **PALMPRINTS** **PRINTS TAKEN BY** **DATE**
 YES YES FATS 12/27/2007
TO SFPD DATE: **TO CII DATE:**
SFPD MATCH: **SFPD MATCH#:** NRNS **CII MATCH:** **CII MATCH#:**
TO FBI DATE: **PHOTOS DATE:**
FBI MATCH: **FBI MATCH#:** **TAKEN BY:**
POLICE AT SCENE **AT SCENE OFFICER** **POLICE STATION**
 YES LOZADA #389 TARAVAL
SFPD CASE#: 071-316-282
AIB or HR NOTIFIED: **AIB DATE:**
AIB OFFICER: **NATURE:**

CASE HISTORY

The subject 17 years of age, was mauled to death by an escaped four year old Siberian Tiger at the San Francisco Zoo.

According to information received from San Francisco Police Officer Lozada #389, on 12/25/2007 at about 1710 hours, Police were dispatched to the San Francisco Zoo on reports of an exotic animal bite. Once on scene, and on a path approximately 50 yards south of the Tiger's Grotto, the subject was found lying unresponsive suffering from an apparent mauling. Emergency services were called with City Paramedics responding.

Once the subject was determined to be deceased, the Paramedics were told that another individual was being mauled by a Tiger approximately 300 yards north in front of the Terrace Café. Paramedics arrived at the location and found another mauling victim, alive. A Siberian Tiger was next to this person. At that time Police Officers approached and apparently the Tiger started to charge the Officers at which time several shots were fired killing the Tiger.

A third mauling victim was also located, alive. These two were transported to San Francisco General Hospital and at this time are apparently in serious but stable condition. This office was notified at 1936 hours.

Examination at the scene revealed the subject to be lying in a supine position on a path at the aforementioned location. He was dressed in pants and tennis shoes, His shirt and t-shirt were lying on the ground next to him. Noted were multiple puncture wounds to the neck, upper torso,



Case#: 2007-1397

MEDICAL EXAMINER / INVESTIGATOR'S REPORT

CITY AND COUNTY OF SAN FRANCISCO - RECORD OF DEATH

extremities, and back, along with multiple lacerations.

It is still under investigation as to how the Tiger was able to get out of his Grotto.

INVESTIGATOR: TIMOTHY HELLMAN #109

CHARLES CECIL #126

AUTOPSY

THE SUBJECT, 17 years of age, was reported to have been found dead on the sidewalk in front of the San Francisco Zoo. According to information received from San Francisco Police Officer [redacted] on 12/25/07 at about 11:10 hours, Police were dispatched to the San Francisco Zoo on report of an exotic animal bite. Once on scene, and on a path approximately 50 yards south of the Tiger Grotto, the subject was found lying supine, apparently dead. Emergency services were called with City Paramedics responding. Once the subject was determined to be deceased, the Paramedics were told that another individual was being treated by a Tiger approximately 300 yards north in front of the Terrace Cafe. Paramedics arrived at the location and found another man lying on the ground. A Tiger was next to this person. At that time Police Officers approached and apparently the Tiger started to charge the Officers at which time several shots were fired killing the Tiger. A third man lying on the ground was also located. These two were transported to San Francisco General Hospital and at this time are apparently in serious but stable condition. This office was notified at 12:30 hours. Examination of the scene revealed the subject to be lying in a supine position on a path at the aforementioned location. He was dressed in pants and tennis shoes. His left and right arms were on the ground next to him. He had multiple punctate wounds to the neck, upper torso,

Case#: 2007-1397

Status: CLOSED

Name: SOUSA CARLOS EDUARD alias: DOE JOHN #116

Date: 12/26/2007

Time: 6:00

Contact_Person:

Contact_Phone:

Comments:

Staff. Attempted, from 0300 hours, to 0600 hours, on 12/26/07 to make possible contact with the subject's family. General Works Insp Mathews, 553-9090- Cell # 925-705-2355, gave this office Carlos Souza, aged 17 years from San Jose. This Investigator, accurint search, and then went to SFPD, but was unable to get DMV because of no date of birth. I also spoke several times to ward 4D at SFGH to "please" give me the name and phone number's of the two brothers (also mauled by the tiger) parents or family members, so that we could speak to them and establish who our John Doe # 116 was so that we could make contact with his family. GAC.

Investigator: GRAHAM A. COWLEY #117

Date: 12/27/2007

Time: 9:22

Contact_Person:

Contact_Phone:

Comments:

1 IPOD FOUND ON RESEARCH.

Investigator: STEPHEN GELMAN #101

Case#: 2007-1397 Status: CLOSED
Name: SOUSA CARLOS EDUARD alias: DOE JOHN #116

Date: 12/27/2007
Time: 16:00
Contact_Person: Dr. Jeneck, Chief Vet.
Contact_Phone:

Comments:

Dr. Amy Hart and I went to the San Francisco Zoo to photograph the tigers head and paws.

(I observed the tiger on 12/27/07 with Dr. Moffatt ; I noted the following. The teeth were intact. The front claws were intact. The back claws were grated/frayed and abraded to approximately one-half the length of the front claws. No foreign material was grossly visible in the grated/frayed claws. The grated/frayed and abraded tips of the back claws were not heavily soiled or rounded/smoothed. There were focal areas of faint blood-like smears on the fur of the front paws. Dr. Jencek indicated that SFPD Crime Lab has previously swabbed all four sets of claws and blood-like smears on the fur of the front paws. The tail and gastric contents were not examined at this time. Amy P. Hart, M.D. Chief Medical Examiner)

Investigator: ELLEN MOFFATT, MD #106

Date: 01/02/2008
Time: 15:00
Contact_Person: Darling Fisher Mortuaries
Contact_Phone:

Comments:

Per the family, the first name is Carlos EDUARDO, not Carlos as was originally noted here.

Investigator: NINA FIORE

Case#: 2007-1397 Status: CLOSED
Name: SOUSA CARLOS EDUARD alias: DOE JOHN #116

Date: 01/03/2008
Time: 16:00
Contact_Person: Darling & Fischer FH
Contact_Phone:

Comments:

Per the family, the deceased last name on DC should be SOUSA, not Sousa, Jr. as was originally noted.

Investigator: NINA FIORE

Date: 01/03/2008
Time: 18:50
Contact_Person: Insp. G. Mar
Contact_Phone: 553-1506

Comments:

On the above listed date and time, Insp Mar of the SFPD CSI Unit delivered 7 bags containing tiger remains to this Office. The bags were sealed in a pouch with pouch seal #32546 and extra receipt #03654 was issued. This Investigator signed the SFPD chain of custody forms and was provided copies of the forms from Insp. Mar. The forms are submitted with a copy of this writing to Assistant Medical Examiner Dr. Ellen Moffatt for review.

(On 1/5/07 at 8:40 a.m. I removed and retained pouch seal #32546 to allow Forensic Odontologists Drs. Mar, Spencer, Beck, Wood to cast the teeth of the tiger. One x-ray, in duplicate, of the upper incisors were taken. The process was photographed by Dr. Ellen Moffatt. I physically examined and Dr. Moffatt observed the gastric contents and found it to contain small fragments of animal-like bones intermixed and attached to fresh skin and muscle. No tissue or bone fragment(s) consistent with human scalp or human parietal bone(s) was found. No pills, tablets or pill residues were seen. The bag containing the head of the tiger was resealed by Dr. Mar per SFPD policy and procedures. All of the originally sealed bags, resealed bag and gastric contents were placed back in the pouch and resealed with pouch seal #52349. The resealed pouch was place in a freezer (Box #2) by myself and Dr. Ellen Moffatt. Amy P. Hart, M.D. Chief Medical Examiner).

Investigator: JAMES FIORICA #125

Case#: 2007-1397 Status: CLOSED
Name: SOUSA CARLOS EDUARD alias: DOE JOHN #116

Date: 01/05/2008
Time: 9:00
Contact Person:
Contact Phone:

Comments:

The seal on the pouch (#32546) of the tiger was opened. The remains included the head, four paws and tail. Drs. Mar, Spencer, Wood, Berk, Hart and myself examined the head and made tooth impressions of the jaws. While disarticulating the lower jaw, a bullet fragment was found in the left temporalis muscle and submitted into evidence. The bullet fragment appeared to travel from the "forehead" of the tiger leftward into the soft tissue between the skull and the zygomatic arch. We also reexamined the right front paw and tail. The stomach contents were examined by Dr. Hart and myself. The pouch was resealed with seal #52349 at 1600 and placed into the long term storage freezer.

Investigator: ELLEN MOFFATT, MD #106

Case#:	2007-1397	Status:	CLOSED	<input type="checkbox"/> Restricted
Name:	SOUSA CARLOS EDUARDO	alias:	DOE JOHN #116	
Manner of Death:	Accident	DC Done:	12/27/2007	
Method:	Blunt Injuries	Amendment:	05/29/2008	
Rpt_Type:	AUTOPSY			
Doctor:	MOFFATT			
Report Date:	05/27/2008			
Summary:	CAUSE OF DEATH: BLUNT FORCE INJURIES OF THE HEAD AND NECK (PREDATORY CAT BITE(S)) OTHER CONDITIONS: DELTA-9 TETRAHYDROCANNABINOL AND ETHANOL PRESENT			
Detail Report				
Attach Picture	View Photo	Report Type		View Report
				Print Report

CITY AND COUNTY OF SAN FRANCISCO

Office of the Chief Medical Examiner
Necropsy Department

Case No. 2007-1397

Name: **SOUSA, CARLOS EDUARDO**

AKA JOHN DOE #116

Date & Time of Necropsy: **December 26-27, 2007 16:30 Hours**

Age: **17**

Height: **6'1"**

Weight: **272 lbs.**

PRELIMINARY EXAMINATION: The body is received in a plastic pouch and is identified by an appropriately labeled Medical Examiner's tag affixed to the left shoe which is then moved to the left great toe. The tag identified the decedent as "John Doe #116" and the decedent's age as 25+/- years. When first viewed, the decedent is clad in a white t-shirt, white undershirt, black jersey (all of which have been cut prior to examination), denim blue jeans, black underpants (all of the aforementioned with multiple frayed defects), a pair of black/white athletic shoes, a pair of white ankle socks. A black ponytail holder is in the hair. In the right front pocket of the jeans is an MP3 player (Ipod) and in the right hip pocket of the jeans is an admission receipt to the San Francisco Zoo. The clothing and receipt are retained as evidence and the MP3 player is placed in property.

EXTERNAL EXAMINATION: The body is of a well-developed, well-nourished adult man, whose appearance is consistent with the reported age of 17 years.

Multiple white hairs are on the body and clothing.

The face is symmetric. The head is symmetric. The scalp will be described under evidence of Injury. The scalp hair is dark brown/black, curly and measures approximately 8 inches in length over the crown. The mustache and beard areas are covered by a dark brown/black beard and dark brown/black stubble in the mustache area. The eyelids are intact, and unremarkable. The conjunctivae are clear without petechial hemorrhages, pallor, or icterus. The sclerae are white without petechial hemorrhages or icterus. The irides are brown and the pupils are equally dilated at 2 millimeters. The nose is symmetric, and unremarkable. The nasal septum is intact. The mouth has native dentition in good repair. The oral mucosa is tan, moist, and unremarkable. The frenula are intact. The external ears are normally formed, symmetric and intact with a single pierce mark in the left earlobe.

The neck is normally formed. The trachea is palpable in the midline. The chest is symmetric. The abdomen is symmetric, soft, flat, and tympanic to percussion. The external genitalia are those of a normally developed, uncircumcised adult male. The scrotum is intact, and unremarkable. The anus is patent.

The forearms and upper arms are normally formed. The ventral wrists have no scars. The hands, fingers, fingernails, feet, toes, and toenails are normally formed. The lower extremities are free of edema. The lower extremities are normally formed.

The posterior body surfaces have fixed dependent lividity.

EVIDENCE OF MEDICAL THERAPY: Evidence of medical therapy includes three electrocardiogram pads (two on the upper chest and one on the left flank).

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Name: **SOUSA, CARLOS EDUARDO**

AKA JOHN DOE #116

Date & Time of Necropsy: **December 26-27, 2007 16:30 Hours**

IDENTIFYING MARKS AND SCARS: There are no readily identifiable surgical or traumatic scars. There are no readily apparent tattoos.

EVIDENCE OF INJURY:

BLUNT FORCE INJURIES, HEAD AND NECK:

On the left upper eyelid is a red linear measuring 1 inch. On the left temple are multiple linear red abrasions ranging in size from $\frac{1}{2}$ inch to 1 inch. A red linear abrasion is at the left lateral corner of the eye measuring $\frac{1}{2}$ inch. Red linear abrasions are on the left cheek ranging in size from $\frac{1}{2}$ inch to 1 inch. On the superior attachment of the left ear is an irregular laceration also involving preauricular area, the crux of the helix and outer portion of the external ear canal measuring 1- $\frac{1}{4}$ inch. On the left ear is a 1 inch laceration involving the antihelix and the helix. A 1 inch laceration involves the left nares, with a $\frac{3}{4}$ inch red linear abrasion extending from its superior edge. A $\frac{1}{8}$ inch by $\frac{1}{8}$ inch abrasion is near the left side of the bridge of the nose. A red linear abrasion measuring $\frac{5}{16}$ inch is on the right lower cheek/right jawline.

On the posterior scalp is a 1- $\frac{3}{4}$ inch horizontal laceration. Extending from the midpoint of the laceration just described is a vertical $\frac{3}{4}$ inch laceration (creating a "T" shape). A $\frac{1}{2}$ inch laceration is on the left posterior inferior scalp. The scalp is avulsed with an 11 inch laceration which extends from the frontal vertex of the head (as it is reflected anteriorly), extending roughly to each mastoid area and to the nape of the neck (as it is reflected posteriorly), with a roughly trapezoidal shape and exposes the skull (see below).

On the right neck below the inferior attachment of the right ear is a $\frac{1}{2}$ inch by $\frac{1}{2}$ inch puncture laceration. Below the right angle of the jaw are a pair of puncture lacerations each measuring $\frac{1}{2}$ inch by $\frac{1}{2}$ inch and separated by 2- $\frac{1}{2}$ inches. Another pair of puncture lacerations is below the midshaft of the right jaw measuring $\frac{9}{16}$ inch by $\frac{5}{16}$ inch for the more superior puncture and $\frac{1}{4}$ inch by $\frac{1}{4}$ inch and are separated by 3 inches. Another puncture laceration is on the anterior neck just right of the midline measuring $\frac{1}{2}$ inch by $\frac{5}{8}$ inch. On the anterior neck just leftward of the anterior midline near the left anterior jaw is a $\frac{3}{4}$ inch by $\frac{5}{8}$ inch puncture laceration. A pair of puncture lacerations are on the left neck measuring $\frac{1}{2}$ inch by $\frac{5}{8}$ inch (the more superior) and $\frac{5}{8}$ inch by $\frac{1}{4}$ inch (for the more inferior) and separated by 2- $\frac{1}{4}$ inches. Multiple red linear abrasions are on the neck, under the chin, and some extending from the puncture lacerations ranging in size from $\frac{1}{8}$ inch to $\frac{3}{4}$ inch. Interspersed among the injuries just described are multiple red contusions ranging in size from $\frac{1}{2}$ inch by $\frac{1}{2}$ inch to 4 inches by 1 inch.

The skull is exposed and has multiple intersecting generally horizontal linear scratches ranging in size from 1 inch to 3 inches, mainly on the occipital skull. A 8.0 centimeters by 3.0 centimeters portion of the left parietal skull is absent and surrounded by comminuted fractures. The left dura is lacerated. The left parietal/temporal brain, under the portion of

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Office of the Chief Medical Examiner
Necropsy Department

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AKA JOHN DOE #116

Date & Time of Necropsy: **December 26-27, 2007 16:30 Hours**

missing skull just described, is disrupted over and area measuring 8.0 centimeters by 2.0 centimeters. The left side of the brain (mainly on the left frontal and parietal lobes) has subarachnoid hemorrhage. Hemorrhage is around the brainstem of the skull.

The bilateral sternocleidomastoid muscles have hemorrhage with a 0.8 centimeters by 0.8 centimeters puncture on the right sternocleidomastoid muscle and underlying right internal jugular vein measuring 0.8 centimeters. The bilateral diaphragmatic muscles have hemorrhage. Hemorrhage is also in the surround soft tissues of the neck.

The cervical spine has a fractured between the fifth and sixth cervical vertebrae. The underlying spinal cord is removed by anterior approach and is unremarkable. Air is recovered on aspiration of the cerebral spinal fluid.

BLUNT FORCE INJURIES, CHEST, ABDOMEN AND BACK:

Multiple intersecting red curvilinear and linear abrasions are on the chest and abdomen predominately on the left chest. Interspersed among the abrasion are red and red-purple contusions ranging in size from 1 inch by 1 inch to 2 inches by 2 inches. On the right lateral chest is a 1-1/2 inch by 1 inch laceration. A puncture laceration measuring 3/4 inch by 1/2 inch is on the right lateral chest near the right axilla. On the left lateral chest near the axilla is a 1-1/2 inch by 7/16 inch laceration with a red linear abrasion extending from its inferior edge measuring 2-1/2 inches. On the lower abdomen is a laceration measuring 1 inch by 1/2 inch with a red linear abrasion extending from its right edge measuring 4 inches.

On the right upper back near the neck is a 3/4 inch by 3/8 inch laceration. Two puncture lacerations are on the right back (on the right scapula) measuring 1/4 inch by 1/4 inch (the more medial) and 1/2 inch by 1/4 inch (the more lateral) and are separated by 1-1/2 inches. Another pair of puncture lacerations are on the right lateral back near the right posterior axilla (measuring 3/4 inch by 1/2 inch) and on the right dorsal arm near the right posterior axilla (measuring 3/8 inch by 1/4 inch) separated by 2 inches. On the right mid back are a two puncture lacerations each measuring 1/4 inch by 1/4 inch and separated by 1 inch. A puncture laceration is on the left upper back measuring 1/4 inch by 1/4 inch with a red linear abrasion extending from its superior edge measuring 1 inch. On the left upper back at the lateral edge of the left scapula is a 1-1/4 inch by 1/2 inch laceration/puncture. Inferior to the laceration/puncture with red linear abrasions just described are multiple puncture lacerations in a row, ranging in size from 1/8 inch by 1/8 inch to 1/4 inch by 3/8 inch and each separated by 1/2 inch. A laceration/puncture is on the left back near the medial edge of the left scapula measuring 1/2 inch by 3/8 inch with a red linear abrasion measuring 2-1/2 inches extending from the superior edge and a red linear abrasion measuring 1 inch extending from the inferior edge. Multiple red linear and curvilinear abrasions are on the back and buttocks ranging in size from 1/2 inch to 1-1/2 inches.

CITY AND COUNTY OF SAN FRANCISCO

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AKA JOHN DOE #116

Date & Time of Necropsy: **December 26-27, 2007 16:30 Hours**

BLUNT FORCE INJURIES, EXTREMITIES: On the right anterior shoulder, and right lateral arm are a pair of puncture lacerations; one on the right anterior shoulder measuring 5/8 inch by 1/2 inch and one on the right lateral arm measuring 1/8 inch by 1/8 inch separated by 4 inches. On the right elbow is a laceration measuring 1 inch by 1/2 inch. On the right dorsal arm is a laceration measuring 1/8 inch by 1/8 inch. Near the right elbow is a laceration measuring 3/8 inch by 1/8 inch. A puncture laceration is on the right volar arm measuring 1/4 inch by 1/4 inch.

On the left dorsal arm is a laceration puncture measuring 3/8 inch by 1/4 inch. These puncture lacerations are separated by 2 inches and have red linear abrasions extending anteriorly measuring 3/4 inch (on the more superior puncture laceration) and 1 inch (on the more inferior puncture laceration). Inferior to the pair of laceration punctures just described is a laceration puncture measuring 1/2 inch by 3/8 inch. Just above the left elbow is a red abrasion measuring 5/8 inch by 1/4 inch. Just below the left lateral elbow is a laceration measuring 1-1/2 inch by 5/8 inch. On the left lateral dorsal forearm near the elbow is a laceration measuring 1-1/4 inch by 1/2 inch. On the left dorsal hand, between the dorsal thumb and index finger is a laceration measuring 1-1/4 inch by 3/4 inch. On the left volar wrist are laceration punctures measuring 1/8 inch by 1/8 inch each.

On the arms, forearms and hands are multiple red linear and curvilinear abrasions ranging in size from 1/2 inch to 1-1/2 inches.

Just below the right knee is a 1/4 inch by 1/8 inch red abrasion. On the right anterior lower leg is a crusted red-brown abrasion measuring 5/8 inch by 7/16 inch. On the right posterior superior thigh is a 1-1/4 inch abrasion with a central laceration measuring 1/4 inch centered in a blue contusion measuring 1-3/4 inches by 1/2 inch. On the right superior lateral popliteal fossa is a curvilinear red abrasion measuring 3 inches.

A red abrasion/contusion measuring 3/4 inch by 1/4 inch is on the left lateral superior popliteal fossa which seems to be paired with another red abrasion/contusion measuring 1-1/2 inch by 1/4 inch. These red abrasions/contusions may be related to two pairs of red-brown abrasion on the left inferior knee and left anterior lower leg. On the left inferior knee are a pair of red-brown abrasions measuring 1-1/2 inch by 3/8 inch each. On the left anterior lower leg are a pair of red-brown abrasions measuring 1-1/2 inch by 3/16 inch each.

INTERNAL EXAMINATION: The subcutaneous fat is approximately 6.0 centimeters in its maximum thickness at the mid-abdomen. The pleural cavities are free of abnormal collections of fluid, hemorrhage, or adhesions. The visceral and parietal pleurae are intact and unremarkable with a smooth, glistening serosa and no fluid. The pericardial sac is intact and unremarkable with a small amount of straw-colored fluid. The abdominal cavity is intact and unremarkable without excess fluid, hemorrhage, exudates, or adhesions. The thoracoabdominal organs are in their usual positions and have smooth glistening surfaces.

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The diaphragms are intact and normally elevated. The body cavities have no peculiar or aromatic odor.

NECK: The neck is dissected in a layer-wise fashion after the thoracoabdominal and cranial contents are removed. The superficial and deep muscles of the neck are firm, red-brown, intact, and unremarkable without hemorrhage or laceration, except for what is described under Evidence of Injury. The soft, red-brown tongue is unremarkable without intramuscular hemorrhage, laceration, or infiltrate. The hyoid bone is intact without fracture or periosteal soft tissue hemorrhage. The thyroid and cricoid cartilages are intact without fracture or adjacent soft tissue hemorrhage. The mucosa of the larynx and trachea are unremarkable without intraluminal obstructive lesion, ulceration, laceration, or fistula.

CARDIOVASCULAR SYSTEM: The 520 gram heart has a smooth, glistening, unremarkable epicardium. The cardiac contour is unremarkable. The coronary arteries arise from the aorta in a normal fashion and follow their usual anatomic pathways with no significant atherosclerotic disease. The coronary ostia are patent. The posterior interventricular septum receives its blood supply from the coronary arteries. The coronary arteries are patent and have no atherosclerosis. There is no occlusive thrombus of the epicardial vessels. The right and left ventricular myocardium is red-brown and firm without discoloration, infarct, muscular bulges or focal lesion. The left ventricular free wall is 1.5 centimeters and the septal wall is 1.5 centimeters thick. The right ventricular wall is 0.3 centimeter thick. The valve cusps and leaflets are translucent, pliable, and free of vegetations or fenestrations. The chordae tendineae are thin and delicate. The papillary muscles are intact. The cardiac chambers have right ventricular dilatation. The foramen ovale is closed. The endocardium is unremarkable without thickening or fibrosis. The aorta and its major branches have normal pathways and are unremarkable without atherosclerosis or aneurysm. The venae cavae and major veins are all patent, intact, and unremarkable with smooth, yellow-tan intima. The periaortic lymph nodes in the abdomen and mediastinum are inconspicuous.

RESPIRATORY SYSTEM: The right and left lungs are 615 grams and 570 grams, respectively. Both lungs have smooth pleural surfaces and a dark red-blue, subcrepitant, congested, and moderately edematous parenchyma without palpable induration, visible suppuration, granuloma, consolidation, hemorrhage, neoplasm, or emphysema. The tracheobronchial tree has a pink-tan, unremarkable mucosa and is patent without intraluminal obstructive lesion. The pulmonary vessels are patent and have a yellow-tan, smooth intima without thromboemboli. The pulmonary and hilar lymph nodes are soft, black, and inconspicuous.

HEPATOBIILIARY SYSTEM: The 1860 gram liver has a smooth, intact capsule with a sharp anterior margin. The hepatic parenchyma is firm, dark red-brown, and uniform without

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Date & Time of Necropsy: **December 26-27, 2007 16:30 Hours**

laceration, hemorrhage, or mass lesion. The hepatoduodenal ligament is free of lymphadenopathy. The hepatic artery and portal vein are patent and intact.

The gallbladder is intact and contains approximately 20 milliliters of yellow-brown, viscid bile and no calculi. The gallbladder wall is 0.1 centimeter thick with a yellow-green, velvety mucosa. The cystic, common, and hepatic bile ducts are normal in course and caliber and free of calculi.

HEMATOPOIETIC SYSTEM: The 240 gram spleen is intact and has a smooth, grey, translucent capsule. The splenic pulp is moderately firm, purple-red, and unremarkable with conspicuous corpuscles. The gastrosplenic ligament is free of lymphadenopathy. The thymus weighs 50 grams and is unremarkable. The thoracoabdominal and cervical lymph nodes are not enlarged. The visible bone marrow is unremarkable.

ENDOCRINE SYSTEM: The pituitary gland is intact, normally developed, and is unremarkable without laceration, hemorrhage, or mass lesion. The thyroid gland is symmetric and unremarkable with a firm, red-brown, granular parenchyma and no cyst, hemorrhage, fibrosis, or mass lesion. The adrenal glands are normally situated and have soft, yellow cortices and soft, grey-brown medullae. The pancreas has a soft, tan parenchyma with a normal lobular architecture and no saponification, pseudocyst, neoplasm, fibrosis, hemorrhage, or mineralization.

GASTROINTESTINAL SYSTEM: The oropharynx has a tan, smooth, unremarkable mucosa. The esophagus has a smooth, gray-white mucosa. The stomach has a smooth, tan serosa and a smooth, tan mucosa with normal rugal folds. The gastric wall is not thickened or indurated. The gastric contents consist of approximately 500 milliliters of tan-brown, turbid fluid with fragments of partially digested eggs. The stomach does not contain identifiable tablets, capsules, or pill fragments. The duodenum has a smooth, bile-stained mucosa without ulcers. The small intestine has a smooth, tan serosa and is not dilated or obstructed. The mesenteric lymph nodes are inconspicuous. The large intestine has normal haustral markings and a vermiform appendix without descending or sigmoid colonic diverticula. The rectum has a smooth, tan mucosa. There are no mucosal lesions of the small or large bowel.

GENITOURINARY SYSTEM: The right and left kidneys are 150 grams and 140 grams, respectively. The renal capsules are intact and strip with ease from the underlying cortices. Both kidneys have smooth cortical surfaces without persistent fetal lobulations. The renal parenchyma is firm, dark red-brown, and has a good corticomedullary definition with an average cortical thickness of 8 millimeters. The pyramids and papillae are unremarkable. The pelvicalyceal systems are normal without dilatation or obstruction. The ureters are patent and normal in course and caliber to the urinary bladder. The renal arteries and veins are patent without atherosclerosis or stenosis. The urinary bladder is intact with a smooth,

CITY AND COUNTY OF SAN FRANCISCO

Office of the Chief Medical Examiner

Necropsy Department

Case No. 2007-1397

Name: **SOUSA, CARLOS EDUARDO**

AKA JOHN DOE #116

Date & Time of Necropsy: **December 26-27, 2007 16:30 Hours**

tan mucosa without erythema, hemorrhage, ulcer, or mass lesion. The urinary bladder contains approximately 120 milliliters of clear, yellow urine.

The soft, tan prostate gland is not enlarged and has a soft, tan parenchyma without discoloration, induration, or necrosis. The seminal vesicles are normal. The right and left testes are normally situated in the scrotum and have a soft, tan, homogeneous parenchyma without hemorrhage, cyst, or mass lesion.

MUSCULOSKELETAL SYSTEM: The firm, red-brown muscles are well hydrated and free of focal lesions, except for what is described under Evidence of Injury. The skeleton is well developed and without fracture, deformity, or osteoporosis, except for what is described under Evidence of Injury.

HEAD AND CENTRAL NERVOUS SYSTEM: The reflected scalp has been described under Evidence of Injury. The galeal soft tissues and temporalis muscles are intact, normal, and unremarkable. The calvarium and dura mater have been described under Evidence of Injury. The epidural and subdural spaces are free of blood. The dural sinuses are intact and unremarkable. The 1480 gram brain has symmetric cerebral and cerebellar hemispheres covered by thin, transparent leptomeninges. The cerebral cortex is tan, uniform (except for what is described under Evidence of Injury), and free of contusion foci. The cerebral white matter is uniform throughout. The caudate nuclei, basal ganglia, and thalami are tan, uniform, and symmetric. The ventricles are normal in caliber and contain congested choroid plexus. The midbrain, cerebellum, pons, and medulla oblongata are free of internal or external abnormalities. The Sylvian aqueduct and fourth ventricle are normal. The locus ceruleus and substantia nigra are normally pigmented. The cranial nerves and mammillary bodies are symmetric and normal. The cerebral vasculature, including the Circle of Willis, is translucent, patent, and free of atherosclerosis or aneurysm. The anterior, middle, and posterior cranial fossae are free of fractures. The proximal cervical spinal cord is firm, symmetric, and grossly normal.

FINDINGS:

1. BLUNT FORCE INJURIES, HEAD AND NECK

A. COMMINUTED SKULL FRACTURES WITH PORTION OF CALVARIUM MISSING, LEFT PARIETAL SKULL

I. UNDERLYING LACERATION OF DURA AND BRAIN

II. AIR, CEREBRAL SPINAL COLUMN

B. LACERATIONS, SCALP

I. SCRATCHES, OCCIPITAL SKULL

C. FRACTURE, CEREBRAL SPINAL COLUMN BETWEEN FIFTH AND SIXTH VERTEBRAE

I. GROSSLY UNREMARKABLE UNDERLYING CERVICAL SPINAL CORD

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D. MULTIPLE LACERATION PUNCTURES OF THE NECK CONSISTENT OF PREDATORY CAT BITE

- I. LACERATION, RIGHT INTERNAL JUGULAR VEIN
- II. LACERATION PUNCTURE, RIGHT STERNOCLEIDOMASTOID MUSCLE
- III. HEMORRHAGE, BILATERAL STERNOCLEIDOMASTOID AND DIAGASTRIC MUSCLES AND SOFT TISSUE OF NECK

E. MULTIPLE LACERATIONS AND ABRASIONS

2. BLUNT FORCE INJURIES, EXTREMITIES

- A. LACERATION PUNCTURES, BILATERAL DORSAL ARMS CONSISTENT WITH PREDATORY CAT BITE
- B. LACERATIONS AND ABRASIONS

3. BLUNT FORCE INJURIES, CHEST, ABDOMEN AND BACK

- A. LACERATION PUNCTURES, LEFT BACK, CONSISTENT WITH PREDATORY CAT CLAW
- B. LACERATIONS AND ABRASIONS

4. RIGHT VENTRICULAR DILATATION

5. CARDIOMEGALY (520 GRAMS) FOR HEIGHT

Spec. to Pathology: Portions of brain, pituitary, thyroid, heart, lungs, liver, gallbladder, spleen, pancreas, adrenal, kidney, urinary bladder, prostate, testis, gastroesophageal junction, appendix, and psoas muscle.

Spec. to Histology: Frontal cortex, cerebellum, heart, lung, liver, and kidney.

Spec. to Toxicology: Central blood, vitreous humor, liver, spleen, gastric contents, bile, urine, brain, and right quadriceps muscle.

Radiographs: None

Physician(s) Present: J. Melinek, M.D.

Forensic Tech(s): J. Avis and E. Prendel.

Photographer: Ellen Moffatt, M.D., Assistant Medical Examiner, San Francisco Medical Examiner's Office.

Evidence: Pulled scalp hair, right and left fingernails and clippers, hairs from clothing and body, blood spot.

Ellen Moffatt 07/26/2008
Ellen Moffatt, M.D.
Assistant Medical Examiner

A.P. Hart, M.D.
V.J. Azar, M.D.
J.J. Smith, M.D.
E.G. Moffatt, M.D.
J. Melinek, M.D.
egm

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uf 6/2/08

**CITY AND COUNTY OF SAN FRANCISCO
OFFICE OF THE CHIEF MEDICAL EXAMINER
MEDICAL DIVISION**

Name: **SOUSA, CARLOS EDUARDO**
AKA JOHN DOE #116

Case No: **2007-1397**

MICROSCOPIC DESCRIPTION

BRAIN: One (1) hematoxylin and eosin stained slide is examined. It includes sections of frontal cerebral cortex with underlying white matter and cerebellum.

The leptomeningeal and parenchymal blood vessels are unremarkable. The leptomeninges are thin and delicate with a large number of extravasated red cells. The cortical laminations are unremarkable. The neurons in the frontal cerebral cortex and cerebellum are unremarkable. The parenchyma of the brain has no neoplastic process or inflammatory infiltrate.

HEART: The epicardial surface is intact without inflammatory infiltrate or hemorrhage. The myocardial fibers are viable and uniform in size and shape with a linear cytologic architecture without a haphazard, storiform arrangement. There is no intraparenchymal vascular congestion, hemorrhage, contraction band necrosis, or myocardial infarct. Inflammatory infiltrates, fibrofatty intramural infiltration, and fibrosis are absent.

LUNGS: The alveoli are well expanded and the alveolar septa are thin and delicate. Some of the intraalveolar spaces contain amorphous, homogenous, eosinophilic material without hyaline membrane formation (edema fluid). The pulmonary vasculature is congested but otherwise unremarkable. The tracheobronchial tree has sloughed epithelial cells but is otherwise unremarkable. The parenchyma has no diagnostic polarizable material.

LIVER: The intact hepatic parenchyma has normally arranged hepatocytes with an unremarkable architecture without intraparenchymal solid or cystic mass lesion. The portal tracts are unremarkable. The bile ductules and ducts are unremarkable. The hepatocytes have focal macrosteatosis in some centrilobular areas. The sinusoids are unremarkable. The parenchyma has no diagnostic polarizable material.

KIDNEY: The intact renal parenchyma has a normal architecture without intraparenchymal solid or cystic mass lesion. There are no interstitial inflammatory infiltrates. The renal vasculature is unremarkable. The glomeruli seem to have a larger than usual amount of mesangium, but otherwise are unremarkable. The tubules are unremarkable. No diagnostic polarizable material is seen.

MICROSCOPIC DIAGNOSES:

1. SUBARACHNOID HEMORRHAGE, BRAIN, FRONTAL CORTEX
2. FOCAL MACROSTEATOSIS, LIVER

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OFFICE OF THE CHIEF MEDICAL EXAMINER
MEDICAL DIVISION**

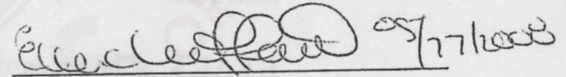
Name: **SOUSA, CARLOS EDUARDO**
AKA JOHN DOE #116


Case No: **2007-1397**

**CAUSE OF DEATH: BLUNT FORCE INJURIES OF THE HEAD AND NECK
(PREDATORY CAT BITE(S))**

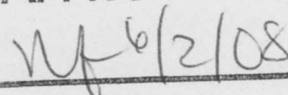
**OTHER CONDITIONS: DELTA-9 TETRAHYDROCANNABINOL AND ETHANOL
PRESENT**

MANNER: ACCIDENT


Ellen Moffatt, M.D.
Assistant Medical Examiner


A.P. Hart, M.D.
V.J. Azar, M.D.
J.J. Smith, M.D.
E.G. Moffatt, M.D.
J. Melinek, M.D.
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City and County
of
San Francisco



Office of the Chief
Medical Examiner

QIA

FORENSIC LABORATORY DIVISION

TOXICOLOGY REPORT

Name: Sousa, Carlos Eduardo
Case No: 2007-1397T

Date of Submission: 12/28/2007 M. E.: EM
Date of Report: 02/15/2008

ANALYTICAL RESULTS:

Blood (Central) Acetone:	None detected
Blood (Central) Ethanol:	0.04% (w/v)
Blood (Central) Isopropanol:	None detected
Blood (Central) Methanol:	None detected
Vitreous Humor Acetone:	None detected
Vitreous Humor Ethanol:	0.03% (w/v)
Vitreous Humor Isopropanol:	None detected
Vitreous Humor Methanol:	None detected
Blood (Central) Amphetamines:	None detected
Blood (Central) Barbiturates:	None detected
Blood (Central) Basic (Alkaline) Drug Screen:	No drugs detected
Blood (Central) Benzodiazepines:	None detected
Blood (Central) Benzoylcegonine:	None detected
Blood (Central) Cannabinoids:	Presumptive Positive
Blood (Central) Cocaine:	None detected
Blood (Central) 11-OH Δ^9 THC*:	None detected
Blood (Central) Δ^9 Carboxy THC*:	21 ng/mL
Blood (Central) Δ^9 THC*:	6.6 ng/mL
Blood (Central) Fentanyl:	None detected
Blood (Central) Methadone:	None detected
Blood (Central) Opiates:	None detected
Blood (Central) Oxycodone:	None detected
Blood (Central) Phencyclidine:	None detected
Blood (Central) Propoxyphene:	None detected
Blood (Central) Tricyclics:	None detected
Urine Amphetamines:	None detected
Urine Barbiturates:	None detected
Urine Basic (Alkaline) Drug Screen:	No drugs detected
Urine Benzodiazepines:	None detected
Urine Benzoylcegonine:	None detected
Urine Cannabinoids:	Δ^9 Carboxy THC Confirmed Present
Urine Cocaine:	None detected
Urine Fentanyl:	None detected
Urine Methadone:	None detected
Urine Opiates:	None detected
Urine Oxycodone:	None detected
Urine Phencyclidine:	None detected
Urine Propoxyphene:	None detected
Urine Tricyclics:	None detected

ABBREVIATIONS

None

COMMENTS

*Performed by NMS Labs, Willow Grove, PA.

This case was first submitted to this Division under the name "Sousa, Jr., Carlos."

Blood not otherwise characterized is assumed to be peripheral.

Report prepared by JAV *JAV*

Report checked by CMW *CMW*

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Nikolas P. Lemos, Ph.D., FRSC
Forensic Laboratory Director/Chief Forensic Toxicologist



NMS Labs

CONFIDENTIAL

3701 Welsh Road, PO Box 433A, Willow Grove, PA 19090-0437

Phone: (215) 657-4900 Fax: (215) 657-2972

e-mail: nms@nmslabs.com

Robert A. Middleberg, PhD, DABFT, DABCC-TC, Laboratory Director

Toxicology Report

Report Issued 01/11/2008 07:01

10218

San Francisco Medical Examiner Office
 Nikolas P Lemos, 850 Bryant St
 Hall of Justice - N. Terrace
 San Francisco, CA 941034603

Patient Name SOUSA JR., CARLOS EDUARDO

Patient ID 2007-1397

Chain 10858600

Age 17 Y

Gender M

Workorder 08006574

Received 01/07/2008 15:11

SAN FRANCISCO
 MEDICAL EXAMINER
 08 JAN 14 AM 10:49

This analysis was performed under chain of custody. The chain of custody documentation is on file at NMS Labs.

Unless alternate arrangements are made by you, the remainder of the submitted specimens will be discarded six (6) weeks from the date of this report; and generated data will be discarded five (5) years from the date of this report.

Sample ID 08006574-001

Matrix Blood

Patient Name SOUSA JR., CARLOS EDUARDO

Patient ID 2007-1397

Container Type Red Top Tube

Collect Dt/Tm Not Given

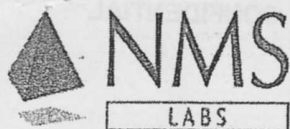
Source Central Blood

Approx Vol/Weight 6.5 mL

Receipt Notes None Entered

Analysis and Comments	Result	Units	Reporting Limit	Notes
0960B Cannabinoids Panel, Blood				
Analysis by Gas Chromatography/Mass Spectrometry (GC/MS)				
Delta-9 THC	6.6	ng/mL	1.0	
Synonym(s): Active ingredient of Marijuana				
The concentrations in Blood are usually about one-half of Serum/Plasma concentrations.				
Usual peak levels in Serum for 1.75% or 3.55% THC marijuana cigarettes:				
50 - 270 ng/mL at 6 to 9 minutes after beginning smoking, decreasing to less than 5 ng/mL by 2 hours.				
Passive inhalation: Up to 2 ng/mL.				
Delta-9 Carboxy THC	21	ng/mL	5.0	
Synonym(s): Inactive Metabolite				

Results for sample 08006574-001 are continued on next page

**NMS Labs**

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Robert A. Middleberg, PhD, DABFT, DABCC-TC, Laboratory Director

CONFIDENTIAL**Sample ID 08006574-001****Matrix Blood****Patient Name SOUSA JR., CARLOS EDUARDO****Patient ID 2007-1397****Collect Dt/Tm Not Given****Source Central Blood**

Analysis and Comments	Result	Units	Reporting Limit	Notes
Usual peak levels in Serum for 1.75% or 3.55% THC marijuana cigarettes: 10 - 101 ng/mL about 32 to 240 minutes after beginning smoking, with a slow decline. Usually not detectable after passive inhalation.				
11-Hydroxy Delta-9 THC Synonym(s): Active Metabolite Usual peak levels: Less than 10% of THC levels after smoking.	None Detected	ng/mL	5.0	

08 JAN 14 AM 10:49
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MEDICAL EXAMINER

**NMS Labs**

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Phone: (215) 657-4900 Fax: (215) 657-2972

e-mail: nms@nmslabs.com

Robert A. Middleberg, PhD, DABFT, DABCC-TC, Laboratory Director

CONFIDENTIAL**Sample ID** 08006574-002**Matrix** Urine**Patient Name** SOUSA JR., CARLOS EDUARDO**Patient ID** 2007-1397**Container Type** Red Top Tube**Collect Dt/Tm** Not Given**Source** Not Given**Approx Vol/Weight** 4 mL**Receipt Notes** None Entered

Analysis and Comments	Result	Units	Reporting Limit	Notes
0964U Cannabinoid Metabolite, Urine				
Analysis by Gas Chromatography/Mass Spectrometry (GC/MS)				
Delta-9 Carboxy THC	>300	ng/mL	10	
Synonym(s): Major THC Marijuana Metabolite				
No reference data available.				

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MEDICAL EXAMINER

0007-1397

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