

**Office of Chief Medical Examiner
Tarrant County, Texas**

200 Feliks Gwozdz Place, Fort Worth, Texas 76104-4919
(817) 923-4999 FAX (817) 927-0902

NON JURISDICTIONAL AUTOPSY

Case No. 930003#
(930077*)

Name: Malcolm Livingston (MC Doe 02)
Approximate Age: 26 years
Height: 39 inches (residual)

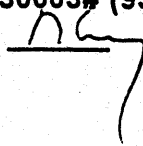
Sex: Male
Weight: 56.5 lbs (residual)

Identified By: Dental Comparison (04-29-93)
Autopsy Authorized By: Honorable Cindy Evans

I hereby certify that I, Nizam Peerwani, M.D., have performed an autopsy on the body of Malcolm Livingston at the Tarrant County Medical Examiner's Morgue on the twenty third day of April 1993, and that the said autopsy revealed:

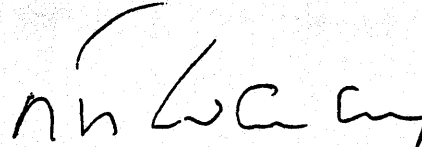
FINDINGS:

- 01 Asphyxiation due to:
 - A. inhalation of smoke with large quantity of carbon deposits in tracheobronchial tree
 - B. inhalation of carbon monoxide (COHb saturation = 26%)
- 02 Global charring with extensive body mutilation
- 03 No evidence of gunshot wounds

Malcolm Livingston (MC Doe 02)
Case No 930003# (930077*)
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CAUSE OF DEATH:

- 01 INHALATION OF SMOKE AND CARBON MONOXIDE DUE TO FIRE
- 02 GLOBAL CHARRING



Nizam Peerwani, M.D.
Chief Medical Examiner

NP/

09-02-93

Revised: 10-07-93

Malcolm Livingston (MC Doe 02)

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This examination is dated April 27, 1993 beginning at 1300 hours.

Regarding the circumstances involved in the demise of the decedent, please refer to the inquest investigation report prepared by the Justice of Peace.

A complete autopsy is carried out by the authority Judge Cindy Evans, Justice of Peace, Pct 1, McLennan County, Texas

EXTERNAL EXAMINATION

Body is presented to the County Morgue wrapped in a white sheet and secured in a black body bag. Large quantity of collapsed and burnt construction debris including dry wall, fragmented glass and nails are adherent to the body. Radiographic studies indicate presence of some of these material as well as fragments of zipper, three exploded cartridge cases and one bullet. Two of the cartridge cases are within adherent debris attached to the left side of the torso whereas the third shell is superficial located in the pelvic area. The bullet is loosely present just beneath surface of adherent debris attached to the medial right thigh. The bullet shows no rifling. There are no injuries identified associated with the exploded cartridge cases or the bullet. A small charred fragment of lightweight fabric is present around the shoulder areas. This will be preserved in tin container for possible arson studies.

Body is that of a young adult black male consisting of a charred torso 39 inches long and weighing 56.5 pounds, articulated from the skull to just proximal to the knee joints. There is global charring with complete burning of flesh from many sites, massive destruction of many bony tissues and with resultant profound mutilation of the body.

A large defect of the head is present with near total trans-calvarial herniation of brain. Scalp is absent. Soft tissues of the face, including nose, ears and eye balls are absent with exposure of partially heat destroyed underlying bony structures including fragmentary frontal bones, left orbit, maxillae, nasal and the mandible. Teeth appear to be relatively well preserved. Neck is rigid with extensive destruction of most of the flesh as well as the underlying anterior neck structures. Torso depicts massive heat damage with extensive charring of the anterior and posterior surfaces. The chest wall is partially incinerated

Malcolm Livingston (MC Doe 02)

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along the anterior upper flank with exposure of brittle fragmenting ribs. Similarly there is loss of tissue along the clavicular area with exposure of the distal half of left clavicle. The right clavicle and the two scapulae are intact. Large segments of abdominal wall are absent exposing the underlying heat damaged viscera, anterior rim of the right pelvis and the head of the left femur. Construction debris is adherent to the left side of the torso are adherent to the abdominal wall. Upper and lower extremities show similar extensive heat damage and charring with absence of upper extremities and presence of proximal half segments of thighs. The stumps of heat amputated left and right femur are evident. External genitalia are not distinguishable.

INTERNAL EXAMINATION

A Y-shaped thoraco abdominal incision is made and the organs are examined in-situ and eviscerated in the usual fashion. Despite the extensive heat damage, the internal organs with the exception of brain are essentially well preserved, although all of these organs are somewhat hardened and dehydrated with loss of weight due to partial cooking.

SEROUS CAVITIES: Chest wall and abdominal walls are partially destroyed with associated segments of pleura and peritoneum. Heat related destruction of the chest wall includes marked charring and incineration of multiple ribs including left anterior 1 and 2, left lateral 4 through 12 and left posterior 6 through 12. The upper right chest wall reveals destruction of soft tissue with exposure of the underlying black brittle ribs. Sternum and right clavicle are intact. Medial half of left clavicle is destroyed. The uninvolved intact pleura and peritoneum are smooth but partially discolored due to heat damage. There are no adhesions or effusion. Pericardial sac is intact presenting smooth reddish surface with minimum amounts of slightly sanguinous serous fluid. There are no adhesions present. There is no kyphosis, scoliosis or lordosis.

CARDIOVASCULAR SYSTEM: The heart weighs 135 grams and contains 265 grams of blood clots with red discoloration. Cardiac chambers show no identifiable chamber hypertrophy or dilatation. The left ventricular wall is 1.0 cm and the right 0.3 cm in thickness. Cardiac valves are unremarkable with the aortic, mitral, pulmonary and tricuspid valves having a circumference of 6.0, 8.2, 6.5 and 9.5 cms respectively. Coronary ostia are in their normal anatomic

location, leading into widely patent coronary arteries without atherosclerosis. Right dominant circulation is present. Cut surface reveals no gross ischemic changes of recent or remote origin. Endocardium is purple stained postmortally. Aortic arch and the great vessels present minimal generalized atherosclerosis with focal subintimal plaques. There is purple intimal staining.

PULMONARY SYSTEM: Neck presents extensive heat damage with destruction of large portions of soft tissues, the hyoid bone, larynx including the thyroid cartilage and the gland, the extra thoracic trachea and the underlying esophagus, exposing the bodies of cervical vertebrae.

Lungs are hyperinflated weighing 329 grams, firm with extensive charring of the left lateral lung. There is marked congestion and edema noted and on sectioning frothy hemorrhagic edema fluid can be easily expressed. Cut surface of the lungs presents generalized black mottling due to presence of carbon within the larger and smaller air spaces. Mucosa of the tracheobronchial tree including the smaller bronchiole is covered with large deposits of black carbonaceous material and the tracheobronchial tree contains profuse amount of frothy hemorrhagic fluid. Pneumonic consolidations are absent. Pulmonary arterial system is unremarkable.

GASTRO-INTESTINAL SYSTEM: Extra-thoracic esophagus is destroyed. Distal esophagus and stomach are intact with a normal GE junction and without erosions, varices, gastritis or ulcers. Stomach is devoid of food particles. Loops of small and large bowel with attached viscera are partially charred as noted above. Liver weighs 833 grams presenting prominent charring along the anterior surface of right lobe. Uninvolved sections are reddish brown and homogeneous. Gallbladder is intact and without bile. Pancreas weighs 52 grams with yellow lobulated cut surface and without evidence of acute or chronic pancreatitis.

GENITO-URINARY SYSTEM: Left kidney weighs 60 grams and the right 66 grams. Capsules strip with ease to reveal somewhat shrunken dehydrated firm pale smooth cortical surfaces. On sectioning the cortex, medulla and pelvic calyceal system are grossly unremarkable. Ureters are of normal caliber draining into unremarkable urinary bladder containing no urine. Prostate gland is identified and is grossly unremarkable.

HEMATOPOIETIC SYSTEM: Spleen is markedly shrunken and partially charred weighing 33 grams with blackish surface and firm reddish cut surface. There is no lymph adenopathy and bone marrow is red and firm.

ENDOCRINE SYSTEM: Adrenal glands are of normal size and shape and reveal no gross pathologic lesions. Thyroid gland is absent.

CENTRAL NERVOUS SYSTEM: Scalp is absent. Calvarium is collapsed with outward bursting of bone flaps and herniation of most of the contents. Only 85 grams of residual cooked brain is present in the relatively more intact posterior fossae. The gaping defect of the calvarium includes a large portion of the frontal, temporal, parietal and occipital bones and measures 12 x 9 inches. Separately present are some residual fragments of frontal, parietal, occipital and temporal bones although large portions are missing. Careful reconstruction reveals no evidence of gunshot wounds of the head.

ANTHROPOLOGY EXAMINATION: Conducted by Douglas H. Ubelaker, Ph.d.

DENTAL EXAMINATION: Conducted by Tarrant County Dental Disaster Team and supervised by Rodney M. Crow, D.D.S.

FINGERPRINT EXAMINATION: Conducted by F.B.I. Latent Fingerprint Section and supervised by Danny W. Greathouse

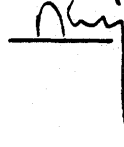
EVIDENCE COLLECTED:

- 01 60 ml of cardiac blood clots, 40 grams of brain, 3 grams bone marrow, 25 grams kidney, 25 grams liver and 10 grams spleen for toxicology
 - 02 Apices of lung for volatiles
 - 03 Segment of first rib, 5 grams of psoas and 25 grams of heart muscle for possible DNA studies
 - 04 Burnt clothing item in tin container
 - 05 Representative tissue in formalin
 - 06 Three exploded cartridge cases and one bullet
 - 07 Multiple photographs including 06 color scene prints and 19 color and slide autopsy prints
 - 08 03 radiographs and fluoroscopy
- NP/

Malcolm Livingston (MC Doe 02)

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**Dental Examination Record
POSTMORTEM RECORD**

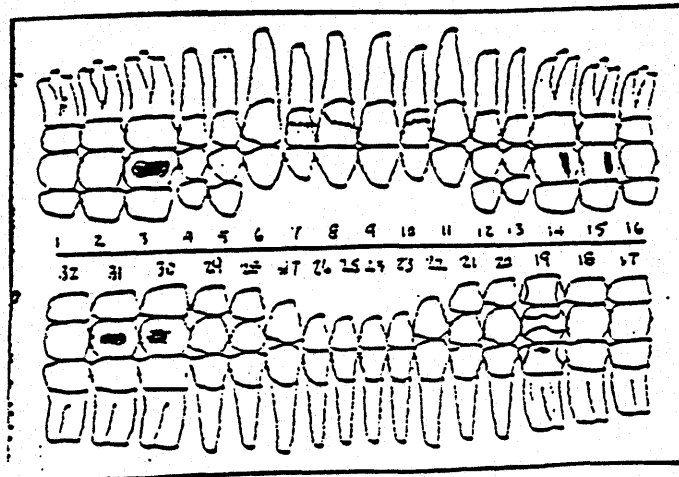
M.E. CASE NO.: 930003#, Livingston, Malcom

PLACE OF EXAM: T.C.M.E.

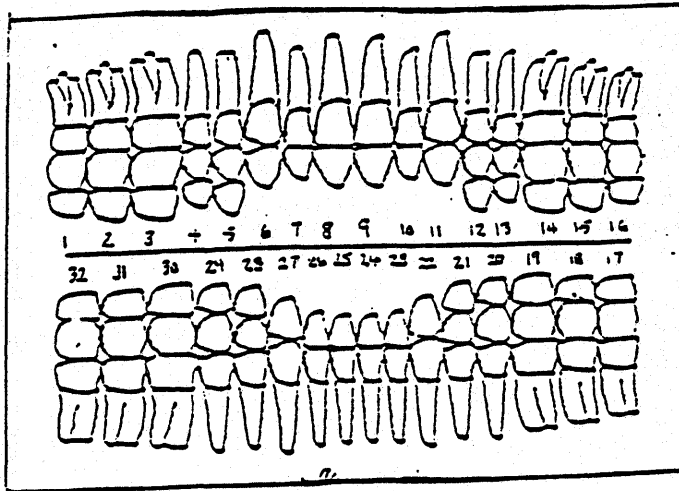
DATE: 04-29-93

RESTORATIONS & MISSING TEETH

- | | |
|---|---------------------------------------|
| | TOOTH NUMBER |
| | 1. Virgin |
| | 2. Virgin |
| | 3. Occluded Amalgam? |
| A | 4. Virgin |
| B | 5. Virgin |
| C | 6. Charred |
| D | 7. Heat broken-incisal 2/3 broken |
| E | 8. Charred broken 1/2 towards distal |
| F | 9. Charred |
| G | 10. Charred-fx @ CEJ |
| H | 11. Virgin |
| I | 12. Virgin |
| J | 13. Virgin |
| | 14. Occlusal prime amalgam |
| | 15. Occlusal prime amalgam? composite |
| | 16. Caries? occlusal |
| | 17. Virgin |
| | 18. Occlusal composite |
| | 19. Buccal-MOD PREP |
| K | 20. Virgin |
| L | 21. Virgin |
| M | 22. Virgin |
| N | 23. Charred |
| O | 24. Heat fx @ CEJ-charred |
| P | 25. Heat Fx @ CEJ charred |
| Q | 26. Charred |
| R | 27. Virgin |
| S | 28. Virgin |
| | 29. Virgin |
| | 30. Occlusal composite |
| | 31. Occlusal composite |
| | 32. Virgin |



DISEASE & ABNORMALITIES



Note: All 3rd molar fully erupted in occlusion Class I Midlines centered. Possibility patient didn't return for final restoration on #19. 3rd molars erupted, 19- endo (poor), occlusal composite on molar.

CONCLUSION: It is my professional opinion that the radiographs and dental structure of ME#930003# and the dental information provided to me as representing Malcom Livingston are indeed one of the same.



Rodney Crow, D.D.S.
Director, Identification Services

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ANTEMORTEM RECORD**

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PLACE OF EXAM: T.C.M.E.

DATE: 04-29-93

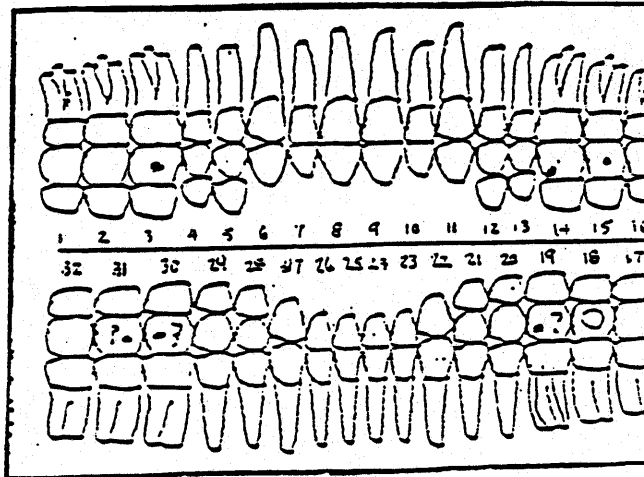
TOOTH NUMBER

- 1.
- 2. Pulpstone
- 3. Occlusal res. pulpstone
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
- 12.
- 13.
- 14. 0
- 15. 0
- 16.
- 17. Erupted and present
- 18. Composite 0
- 19. Root canal
- 20. RO distal of Bcusp
- 21.
- 22.
- 23.
- 24.
- 25.
- 26.
- 27.
- 28.
- 29.
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- 31. Occlusal pit or probable buccal groove
- 32. Occlusal pit or probable buccal groove

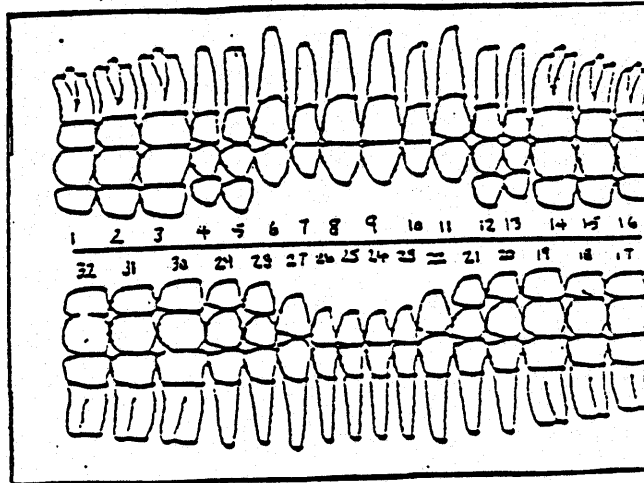
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RESTORATIONS & MISSING TEETH



DISEASE & ABNORMALITIES

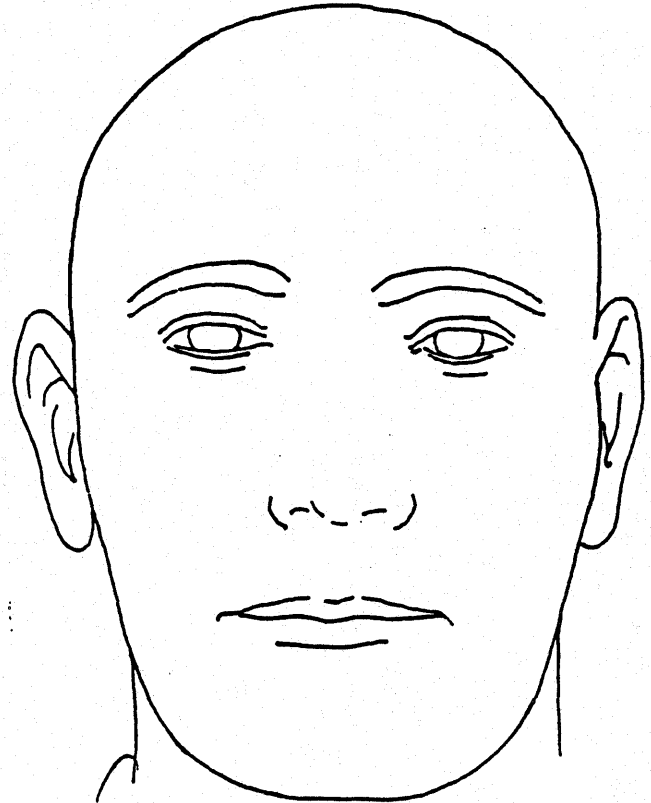
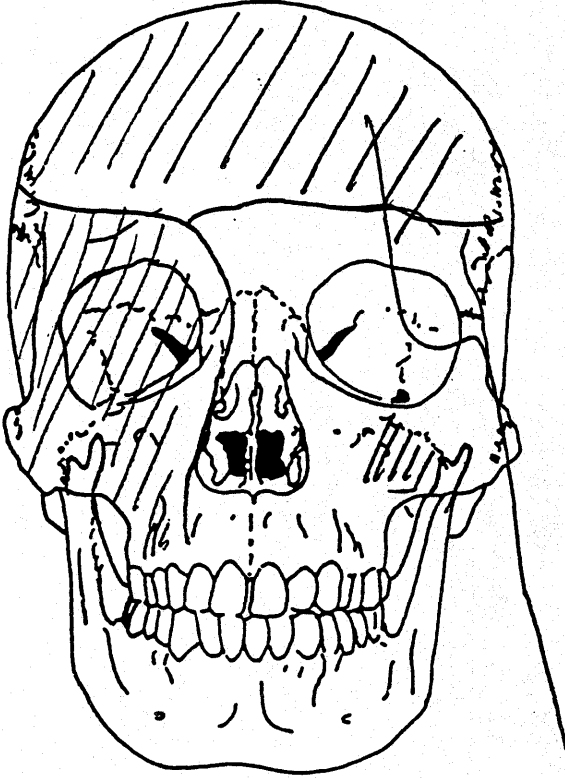


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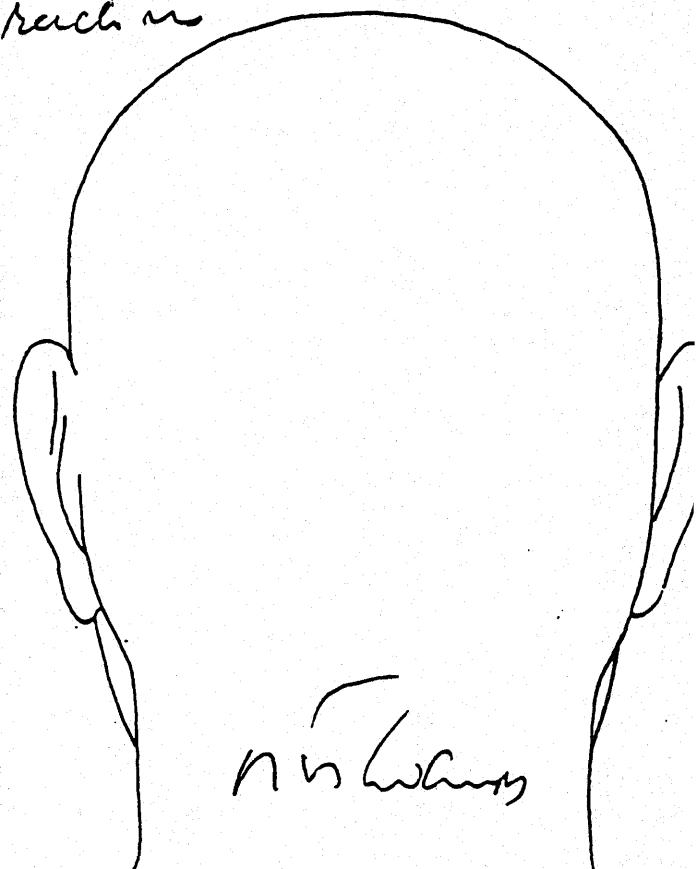
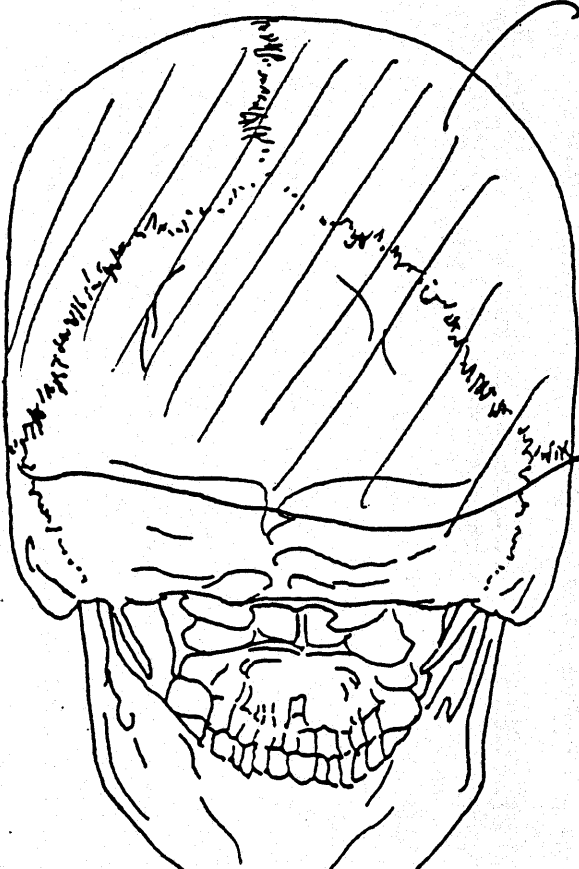
ME No. 930003#

DR. Peerwani

MALCOLM LIVINGSTON
MC DOE 02
CASE NO 930003# (930077*)



*heat
distraction*



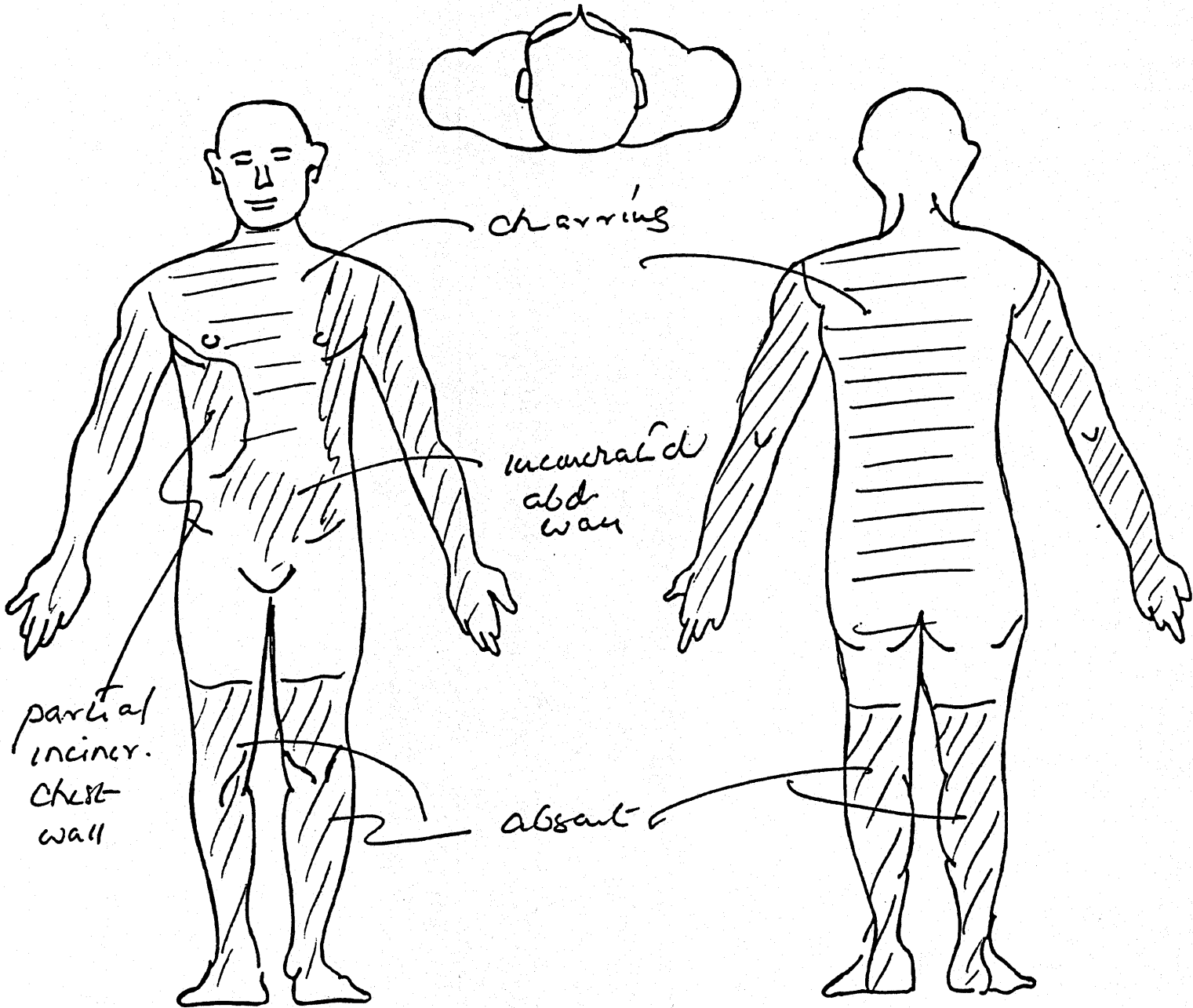
Peerwani

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MALCOLM LIVINGSTON
MC DOE 02
CASE NO 930003# (930077*)

DR. Peerwani



Peerwani

C E R T I F I C A T E O F A N A L Y S E S

OFFICE OF CHIEF MEDICAL EXAMINER
CRIMINALISTICS LABORATORIES
200 FELIKS GWOZDZ PLACE
FORT WORTH, TEXAS 76104

NIZAM PEERWANI, M.D., DABFP
CHIEF MEDICAL EXAMINER
RONALD L. SINGER, M.S.
CHIEF CRIMINALIST

F I R E A R M S L A B O R A T O R Y

NAME: MC-02
CRIME LAB NUMBER: 930244t
M.E. CASE NUMBER: 930077*
COMPLETED BY: RNE

RESULTS OF EVALUATIONS:

- (5A) One 7.62mm. steel jacketed bullet w/core missing
- (5B) One exploded cartridge case
- (5C) One exploded cartridge case
- (5D) One exploded cartridge case

ANALYST:

Richard N. Ernest

APPROVED BY:

APPROVED DATE: 9/18/93

[Signature]

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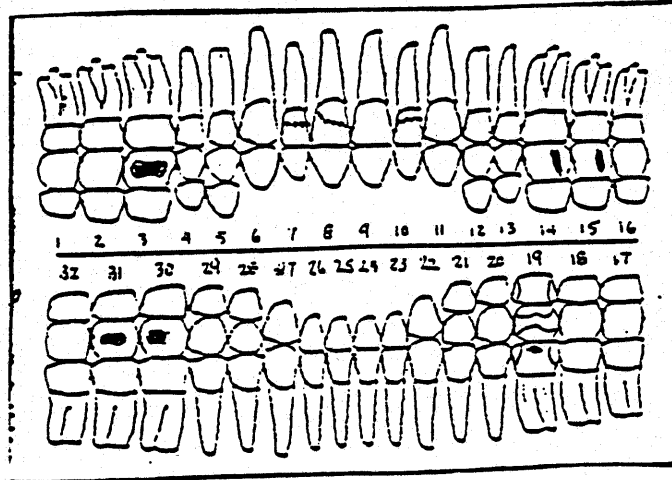
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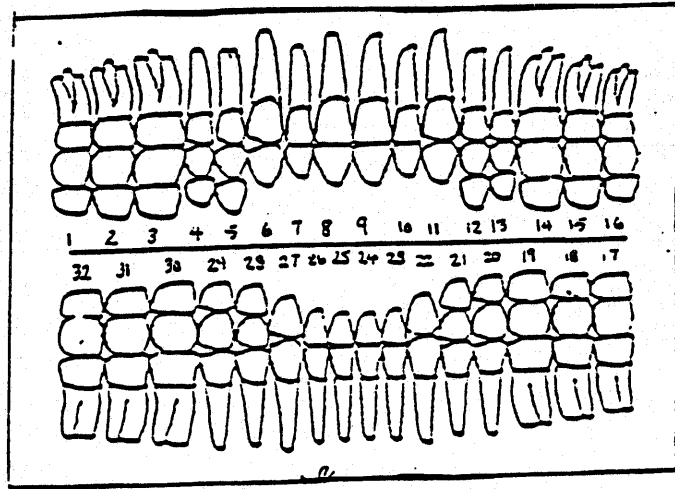
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RESTORATIONS & MISSING TEETH

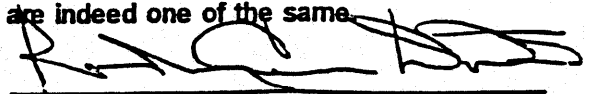


DISEASE & ABNORMALITIES



Note: All 3rd molar fully erupted in occlusion Class I Midlines centered. Possibility patient didn't return for final restoration on #19. 3rd molars erupted, 19- endo (poor), occlusal composite on molar.

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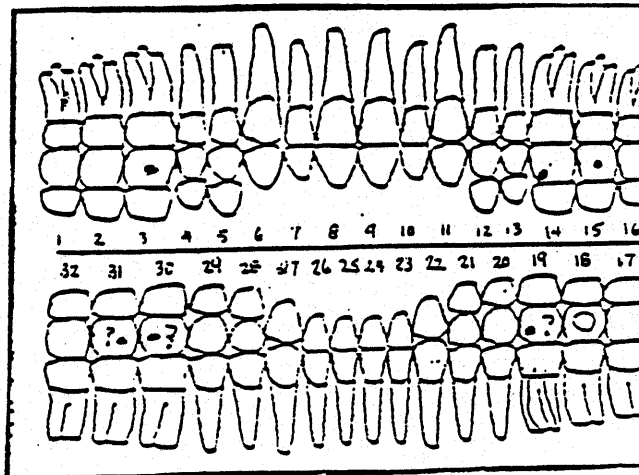
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RESTORATIONS & MISSING TEETH



DISEASE & ABNORMALITIES

