

# OFFICE OF THE DISTRICT MEDICAL EXAMINER DISTRICT 15 – STATE OF FLORIDA PALM BEACH COUNTY 3126 GUN CLUB ROAD WEST PALM BEACH, FLORIDA 33406-3005 (561) 688-4575 (561) 688-4592 FAX

NAME:

KLEIMAN, DAVID A.

**CASE NUMBER:** 13-0467

**CROSS REFERENCE:** 2010-1000

DATE FOUND: April 26, 2013

**AGE:** 46

SEX: M RACE: W

DATE OF AUTOPSY: April 27, 2013 / 1020 hours

#### **FINDINGS:**

1. Decomposition fluid toxicology results.

- a.) Ethanol = 0.107 g/dL.
- b.) Nordiazepam = 0.043 mg/L.
- 2. Left anterior descending artery with critical stenosis.
- 3. Lower gastrointestinal hemorrhage.
- 4. Obese.
- 5. Complicated aortic plaque with bilateral nephrosclerosis and remote bilateral renal cortical infarcts.
- 6. Splenomegaly (660 grams).
- 7. Decubitus ulcers.
- 8. Cholelithiasis.
- 9. Decomposing.

**CAUSE OF DEATH:** 

**CORONARY ARTERY DISEASE** 

**CONTRIBUTING CONDITIONS:** OBESITY, LOWER GASTROINTESTINAL HEMORRHAGE

**MANNER OF DEATH:** NATURAL

Reinhard Motte, M.D.

**Associate Medical Examiner** 

Date Signed:

ne 10,2013

RM;df

#### **EXTERNAL EXAMINATION:**

The body is that of a 5 foot 10 inch, 230 pound, obese, decomposing, white male reported to be 46 years of age. The body mass index is 33.0.

The deceased has advanced decompositional changes, including a foul odor, bloating, marbling, purge fluid, skin slippage, body cavity fluid and decomposing, partly amorphous organs. The refrigerated body is cold. Rigor mortis is absent. Livor mortis is fixed.

The head is intact. X-ray discloses no evidence of a gunshot wound. The decomposing head is covered by wavy, gray hair. The face is covered by a scruffy, gray beard and mustache. The face is without trauma. The teeth are native. The nasal septum is intact.

The neck is free of crepitus and appears symmetric. The chest is symmetric and free of trauma. The abdomen is corpulent. The external genitalia are unremarkable. The upper extremities are symmetric and appear free of trauma. The arms appear fairly well muscled. The lower extremities have decubitus ulcers involving the feet and both buttocks. The decubitus ulcers are deep and full thickness.

The back appears symmetric, normally developed and free of acute trauma.

#### **IDENTIFICATION:**

The deceased wears two black socks, black pants and a black shirt. A midline, long, linear, surgical scar is over the back. He was visually identified.

## **INTERNAL EXAMINATION:**

#### **BODY CAVITIES:**

The mesothelial linings are smooth, tan and free of adhesions. The chest and abdomen contain postmortem decompositional fluids. The soft tissues of the anterior chest and abdomen are free of acute trauma. The ribs, vertebral bodies, pelvis and clavicles have no acute fractures.

#### **HEAD AND CENTRAL NERVOUS SYSTEM:**

The subgaleal is free of trauma. The temporal muscles are symmetric. The cranium is intact. The dura adheres to the internal periosteum and is free of epidural and subdural blood. The fairly amorphous, 1280 gram brain has no subarachnoid hemorrhages. The deep parenchyma is amorphous, without evidence of parenchymal hemorrhage. There is no cerebrospinal fluid. The blood vessels in the circle of Willis are free of aneurysms and have mild atherosclerotic plaque.

#### **NECK:**

The tongue has no contusions or lacerations. The oropharynx is pink-red with no trauma or injuries. The epiglottis is yellow and leaf-like with no swelling. No food or foreign objects obstruct the oropharynx, larynx, trachea or bronchi. The hyoid bone and thyroid cartilages are intact. The anterior cervical neck strap muscles and soft tissues have no contusions or injuries. The prevertebral muscles, fascia and soft tissues have no contusions. The anterior cervical vertebral column is intact. The thyroid gland has its normal anatomic size, shape and location. The thyroid gland has no focal lesions or abnormalities. The cervical lymph nodes are not enlarged.

#### **CARDIOVASCULAR:**

The 290 gram heart has a smooth epicardial surface with no fibrous or fibrinous adhesions. No petechiae or contusions are on the epicardial surface. There is a moderate amount of epicardial fat. The heart is right coronary artery dominant. The coronary arteries arise normally from the aortic root and their ostia are patent. The left anterior descending branch has calcific plaque producing critical stenosis. The left main, left circumflex, and right coronary artery have luminal plaque with no greater than 1/3 stenosis. There are no coronary thrombi. The decomposing myocardium is uniformly red-brown. The valve leaflets are thin and pliable, without vegetations or fenestrations. The chordae tendineae are intact. The papillary muscles are intact. The aorta has complicated atherosclerotic plaque throughout its length, without evidence of aneurysm formation.

#### **RESPIRATORY:**

The 420 gram right lung and 450 gram left lung are collapsed postmortem changes. They are surrounded by decompositional fluids. The pleural surfaces are smooth. The parenchyma is dark, uniform and decomposing. The tracheobronchial tree is patent.

#### **HEPATOBILIARY SYSTEM:**

The 2700 gram liver has a smooth, intact capsule with no trauma or injury. The inferior edge of the liver is firm. The decomposing, Swiss cheese parenchyma has no fatty change or cirrhosis. No infarcts, granulomas or tumors are seen. The thin-walled gallbladder contains a 3.1 centimeter smooth, oval, black stone. The portal vein is normal.

### **HEMOLYMPHATIC SYSTEM:**

The 660 gram spleen has a smooth, intact capsule with no trauma or injury. The decomposing parenchyma is dark and amorphous. Gray-white follicles are not identified.

CASE NUMBER: 13-0467

#### **ENDOCRINE SYSTEM:**

The decomposing pancreas is pale yellow-brown, lobular and firm with no fat necrosis, extravasated blood, tumor or fibrosis. The decomposing adrenal glands have their normal anatomic size, shape and location. The adrenal cortex is yellow and the medulla gray-white. No hemorrhage or tumor is seen in the adrenal glands.

## **GASTROINTESTINAL SYSTEM:**

The esophagus is lined by a smooth, gray-white mucosa with no ulcers, tumors or esophageal varices. The stomach is intact and empty. No aromatic or unusual odors are detected in the gastric contents. No pills, capsules or granular material are seen within the gastric contents. No blood is in the stomach. The gastric mucosa is beige with no ulcers, polyps or tumors. The duodenum has no ulcers. The small and large bowel has no perforation, obstruction or infarction. The appendix is normal. The colon contains bloody stool.

#### **UROGENITAL SYSTEM:**

The right and left kidneys weigh 190 and 170 grams, respectively. Both kidneys have granular, pitted and scarred, red-brown surfaces. There is no trauma or injury to the kidneys. The corticomedullary junction is sharply demarcated. There is no hydronephrosis or renal calculi. A normal amount of peripelvic fat is present. The ureters and bladder are normal. The bladder is intact and contains 300 milliliters of yellow-orange urine.



# **Wuesthoff Reference Laboratory**

6800 Spyglass Court Melbourne, Florida 32940 Julie Bell, M.D., Laboratory Director

Patient: KLEIMAN, DAVID A

Client Patient ID: 15-13-467

Physician: MOTTE, REINHARD

Age: **46** Sex: **M**Account#: VX21849

mq/dL

Client: DIST 15 MEDICAL EXAMINER

15.0

TOXICOLOGY

Test Name Result Units Cutoff/Reporting Limits

VOLATILE PANEL - VOLP

SPECIMEN TYPE

DECOMP FLUID

 ETHANOL
 0.107
 g/dL
 0.020

 ACETONE
 NONE DETECTED mg/dL
 7.5

 METHANOL
 NONE DETECTED mg/dL
 15.0

NONE DETECTED

Analysis by Gas Chromatography (GC) Headspace Injection

BLOOD DRUG SCREEN - BDSME

SPECIMEN TYPE

ISOPROPANOL

DECOMP FLUID

GC/MS

NO DRUGS DETECTED

LC/MS/MS

DIAZEPAM, NORDIAZEPAM

BLOOD IMMUNOASSAY SCREEN

BENZODIAZEPINES 0.050 POSITIVE mg/L CANNABINOIDS NEGATIVE 0.050 mg/L COCAINE METABOLITE NEGATIVE 0.100 mg/L FENTANYL mg/L 0.001 Unable to report due to interfering substance(s) present in the specimen **METHADONE** NEGATIVE 0.050 mg/L **OPIATES** NEGATIVE mg/L 0.050 SALICYLATES NEGATIVE mg/L 50.0 TRICYCLICS NEGATIVE mg/L 0.100

BENZODIAZEPINES PANEL - BNZP

SPECIMEN TYPE

DECOMP FLUID

CHLORDIAZEPOXIDE NONE DETECTED mg/L 0.025

TOXICOLOGY REPORT

KLEIMAN, DAVID A

Form: MM Single RLIT Page 1 of 3

Printed: 05/24/13 07:40



Physician:

# **Wuesthoff Reference Laboratory**

6800 Spyglass Court Melbourne, Florida 32940 Julie Bell, M.D., Laboratory Director

Patient: KLEIMAN, DAVID A Client Patient ID: 15-13-4

ent ID: 15-13-467
MOTTE, REINHARD

Age: 46 Sex: M
Account#: VX21849

Client: DIST 15 MEDICAL EXAMINER

Printed: 05/24/13 07:40

|  |  |  |  | 37 |  |
|--|--|--|--|----|--|
|  |  |  |  |    |  |
|  |  |  |  |    |  |
|  |  |  |  |    |  |

| •                                     |               |       |                         |
|---------------------------------------|---------------|-------|-------------------------|
| Test Name                             | Result        | Units | Cutoff/Reporting Limits |
|                                       |               |       |                         |
| MIDAZOLAM                             | NONE DETECTED | mg/L  | 0.025                   |
| DIAZEPAM                              | NONE DETECTED | mg/L  | 0.025                   |
| DESALKYLFLURAZEPAM                    | NONE DETECTED | mg/L  | 0.025                   |
| NORDIAZEPAM                           | 0.043         | mg/L  | 0.025                   |
| Therapeutic range: 0.100 - 1.000 mg/L |               |       |                         |
| OXAZEPAM                              | NONE DETECTED | mg/L  | 0.025                   |
| TEMAZEPAM                             | NONE DETECTED | mg/L  | 0.025                   |
| LORAZEPAM                             | NONE DETECTED | mg/L  | 0.025                   |
| ALPRAZOLAM                            | NONE DETECTED | mg/L  | 0.025                   |
| ALPHA-OH-ALPRAZOLAM                   | NONE DETECTED | mg/L  | 0.025                   |
|                                       |               |       |                         |

#### Analysis by GC/MS

#### URINE DRUG SCREEN COMPREHENSIVE - UDSME

SPECIMEN TYPE

URINE

GC/MS

## ACETAMINOPHEN

URINE IMMUNOASSAY SCREEN

| AMPHETAMINES       | NEGATIVE | mg/L | 0.500 |
|--------------------|----------|------|-------|
| BARBITURATES       | NEGATIVE | mg/L | 0.200 |
| BENZODIAZEPINES    | POSITIVE | mg/L | 0.200 |
| COCAINE METABOLITE | POSITIVE | mg/L | 0.150 |
| MDMA/MDA           | NEGATIVE | mg/L | 0.300 |
| METHADONE          | NEGATIVE | mg/L | 0.300 |
| METHAQUALONE       | NEGATIVE | mg/L | 0.300 |
| OPIATES            | NEGATIVE | mg/L | 0.300 |
| OXYCODONE          | NEGATIVE | mg/L | 0.100 |
| PHENCYCLIDINE      | NEGATIVE | mg/L | 0.025 |



# **Wuesthoff Reference Laboratory**

6800 Spyglass Court Melbourne, Florida 32940 Julie Bell, M.D., Laboratory Director

KLEIMAN, DAVID A Patient:

Client Patient ID: 15-13-467 Age: 46 Sex: M

VX21849 Account#:

Physician: MOTTE, REINHARD Client: DIST 15 MEDICAL EXAMINER

TOXICOLOGY

Specimen Collected: 04/27/2013 Lab Order No: 282901414 Reg Date: 04/29/13

| Specimen corrected to 1/2//2019 | Dab Oraci No. 2023 | ,01111 | Reg Date: 04/25/15      |  |  |
|---------------------------------|--------------------|--------|-------------------------|--|--|
| Test Name                       | Result             | Units  | Cutoff/Reporting Limits |  |  |
|                                 |                    |        |                         |  |  |
| PROPOXYPHENE                    | NEGATIVE           | mg/L   | 0.300                   |  |  |
| CANNABINOIDS                    | NEGATIVE           | mg/L   | 0.050                   |  |  |
| TRICYCLICS                      | NEGATIVE           | mg/L   | 0.300                   |  |  |

Specimens were intact upon receipt. Chain of custody, specimen security and integrity has been mantained. Testing has been performed as requested

Date: 5-24

FINAL REPORT - THIS COMPLETES REPORTING ON THIS CASE

TOXICOLOGY REPORT

KLEIMAN, DAVID A

Page 3 of 3

Printed: 05/24/13 07:40