## Case: State of Missouri v. Darren Wilson

Transcript of: Grand Jury

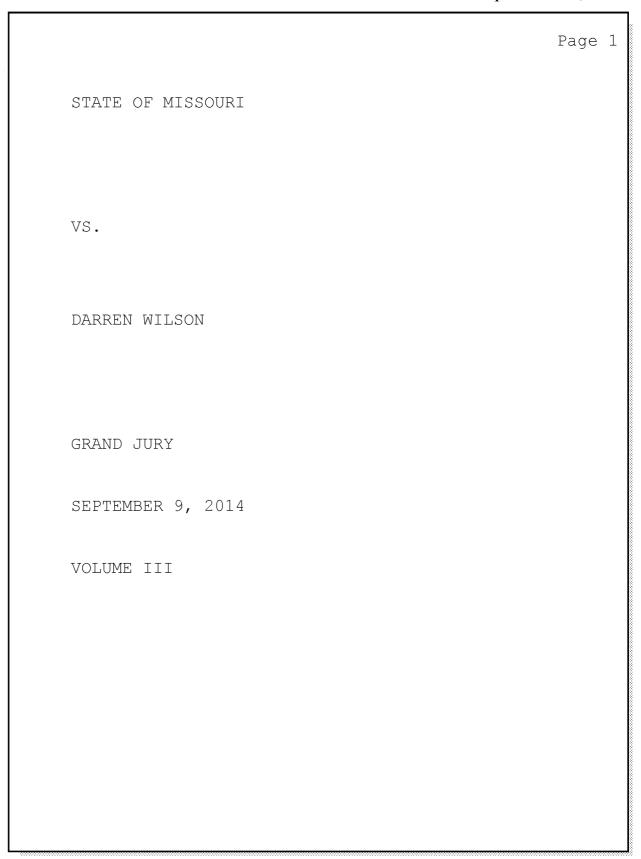
Date: September 9, 2014

This transcript is printed on 100% recycled paper



515 Olive Street, Suite 300 St. Louis, MO 63101 (314) 241-6750 1-800-878-6750 Fax: (314) 241-5070

Email: schedule@goreperry.com
Internet: <<www.goreperry.com>>



FAX 314-241-6750

Gore Perry Reporting and Video 314-241-6750

```
Page 2
 1
           IN THE CIRCUIT COURT OF ST. LOUIS COUNTY
 2
                       STATE OF MISSOURI
 3
     STATE OF MISSOURI
 7
     VS.
 8
     DARREN WILSON
10
11
12
          The following is a hearing before the Grand
     Jury of St. Louis County, at the offices of St.
13
     Louis County Prosecuting Attorney's Office, 100
14
15
     South Central Avenue, in the City of Clayton, State
16
     of Missouri, on the 9th day of September, 2014,
17
     before
18
19
20
21
22
23
24
25
```

FAX 314-241-6750 314-241-6750 www.goreperry.com

```
Page 3
 1
     APPEARANCES OF COUNSEL:
 2
 3
      FOR THE STATE:
         Ms. Kathi Alizadeh & Ms. Sheila Whirley
         Assistant Prosecuting Attorneys for St. Louis
         County
 7
         100 South Central Avenue, 2nd Floor
 8
         Clayton, MO 63105
         (314) 615-2600
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
```

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

Page 5 1 GRAND JURY HEARING 2 MS. ALIZADEH: Good afternoon. For the 3 record, I'm Kathi Alizadeh with the Prosecutor's Office. Also present is Sheila Whirley with the 4 Prosecutor's Office, and all 12 jurors are present 6 today and as well as the court reporter who is 7 taking down everything that's being said as well as 8 audio recording the proceedings that are going on this afternoon. 10 As you can tell, we've kind of rearranged. 11 We're trying to figure out how to best work the room 12 with the equipment that we have. 13 As you can see this screen kind of moves. 14 Do you see the wind, the air blowing on it? It is 15 blowing on the screen, but not on you, 16 unfortunately. So we're going to try this out. 17 If this is too annoying, we'll next time 18 try something else out, but this is a bigger screen 19 and we thought maybe it would be easier for 20 everybody to see it. If everybody gets car sick 21 because pictures are kind of wiggling on there, we 22 will figure something out. 23 Also, and we have some additional fans, 24 I'm going to try to bring another fan in tomorrow to 25 make it a little more comfortable. I'm doing the

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

```
Page 6
     best I can as far as the heating and cooling.
 1
 2
               So my understanding that you all are going
 3
     to be able to be seated today from 1:00 to 5:00; is
     that correct? And so for today we've scheduled two
 5
                 The first witness is here and it will be
     witnesses.
 6
     another crime scene detective.
 7
               His name is Detective
 8
                   And then the second witness that's
 9
     going to testify is the medical examiner who
10
     conducted the autopsy, his name is Dr.
                                                      and
11
     because of his schedule, I'm going to tell
12
                  probably isn't going to be here until
13
     two, he's going to get here as soon as he can.
14
               If we're not done with Detective
15
     we are just going to interrupt his testimony because
16
     he can very easily come back on another day.
17
     hard for me to get the doctor here. He is going to
18
     be going out of town, so we might have to interrupt
19
     Detective
                      and bring him back to finish up
20
     with whatever questions or additional we have with
21
     him, okay?
22
               So with that being said.
23
24
25
```

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

```
Page 7
 1
                    DETECTIVE
 2
     of lawful age, having been first duly sworn to
 3
     testify the truth, the whole truth, and
 4
     nothing but the truth in the case aforesaid,
 5
     deposes and says in reply to oral
     interrogatories, propounded as follows, to-wit:
 7
                         EXAMINATION
 8
     BY MS. ALIZADEH:
               Can you start out by stating your name and
10
     spelling it so the court reporter can put it in the
11
     record?
12
          Α
13
              And how are you employed?
          Q
14
              I'm a police officer.
          Α
15
          Q
              How long have you been a police officer?
16
          Α
               33 years.
17
                     Now, Detective
               Okay.
                                             you are kind
          0
18
     of a soft spoken person a little bit.
                                             I want to
19
     make sure that everybody back here can hear him and
20
     if you cannot hear him, please raise your hand and
21
     let us know if you can't hear him.
22
                    I don't think the microphone
23
     amplifies, it is recording actually. So you
24
     probably just have to keep your voice up a little
25
     bit.
```

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

Page 8 1 What do you do, what department do 2 you work for? 3 For the past 22 years I've been with St. Α Louis County Police Department. 5 Q And currently, what is your job assignment with the St. Louis County Police Department? 7 For the past 14 years I'm a crime scene 8 detective. Now, we've already heard from a Detective 10 about what crime scene detectives do. 11 that be similar to what you do with your job 12 responsibilities? 13 Α Yes. 14 Are you a training officer for crime scene 15 detectives? 16 Yes, both in division patrol and also the 17 crime scene unit. For the past 27 years, I've been 18 a field training instructor. 19 I also teach the basic and advance 20 crime scene schools at our police academy and I also 21 lecture at four area schools and universities. 22 And is there a board certification for 0 23 crime scene investigators? 24 Yes, I hold currently the highest 25 certification level that's possible through the

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 9 1 International Association of Identification. I'm a 2 Board Certified Senior Crime Scene Analyst. 3 Were you working then as a crime scene investigator for St. Louis County on August 9th of 4 5 this year? 6 Α I was. 7 And did you receive a call sometime in the 8 early afternoon of that day to respond regarding a police involved shooting? 10 Α I did. 11 About what time did you get that call? 12 Uh, about 1:00 p.m. I was notified at home 13 by my supervisor to respond to our office, which is 14 in north county, to retrieve a crime scene van and 15 then contact one of our crimes against person 16 detectives at Christian Northwest Hospital. 17 So did you go from your home to the office to pick up a crime scene van? 18 19 I did. Α 20 Now, we've also heard Detective talk 21 about his crime scene van, were you in your 22 separation van? 23 Yes, ma'am. 24 And is your van outfitted or equipped with 25 basically the same things that Detective van

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

```
Page 10
     would have been equipped with?
 1
 2
          Α
               Exactly the same thing, yes.
 3
               And so about what time did you arrive at
     your office in north county?
          Α
               Probably about 2:00 p.m.
               And then after retrieving the crime scene
          0
 7
     van, did you go directly to Christian Northwest?
 8
               I did, I arrived about 2:20 p.m.
          Α
               And did you make contact with a detective,
10
     now you say crimes against person, are you all
11
     familiar with the bureau in St. Louis County?
12
     detective bureau is divided up into separate
13
     distinct units, crimes against persons is a unit
14
     that deals with, obviously, crimes against persons,
15
     but it would be homicides, assaults, rapes and so
16
     forth.
17
                    So Detective
                                          when you got to
     the hospital, who did you contact?
18
19
          Α
               One of our detectives by the name of
20
21
          Q
22
          Α
               I'm sorry,
                                         Mr. Wilson was
23
     there, the assist chief of Ferguson Police
24
     Department and an attorney for the paternal order of
25
     police for Mr. Wilson.
```

FAX 314-241-6750

314-241-6750

```
Page 11
               Now, you and I met yesterday and talked
 1
     about your testimony and we went over things because
     I don't have a report from you, is that fair to say?
 3
               Yes, ma'am.
 4
          Α
 5
               And so when we talked about this, did I
     talk to you about the fact
 7
 8
                                  the police officer who
     is involved in the shooting, correct?
10
          Α
               Yes, ma'am.
11
          Q
               If at all possible,
12
13
     would that be okay?
14
15
          Α
               Of course.
16
               So when you arrived at Christian
17
     Northwest, Detective
                                        was there?
18
               Yes.
          Α
19
              Darren Wilson was there with an attorney?
20
          Α
              Yes, ma'am.
21
               And who else was there?
          Q.
22
               The assistant chief of Ferguson Police
          Α
23
     Department,
24
               Did you have a conversation with Detective
25
           about what had happened?
```

FAX 314-241-6750

314-241-6750

```
Page 12
 1
               He gave me an overview, yes.
 2
               What did you understand your role was in
 3
     responding to Christian Northwest Hospital?
               Based on the information that I received,
 4
          Α
 5
     I was to document visible injuries or complaint
 6
     sites of injury on Darren Wilson. We were to
 7
     document his clothing. I was going to seize his
 8
     clothing and also the weapon that he carried that
 9
     day.
10
                    At some point in time I was also
11
     tasked with the processing of the Ferguson police
12
     vehicle, which was a fully marked Tahoe.
13
               So, Detective
                                      you said you were
          0
     also then tasked with processing the vehicle, the
14
15
     fully marked Ferguson police car, which was a
16
17
          Α
               Tahoe.
18
               Tahoe, okay. And so about what time did
19
     you arrive at the hospital?
20
          Α
               2:20 p.m.
21
               And where was Darren Wilson?
          Q.
22
               He was in the ER room.
          Α
23
               And did you have a conversation, did you
24
     introduce yourself to him?
25
          Α
               Of course.
```

FAX 314-241-6750

314-241-6750

Page 13 Were you dressed similarly to how you are 1 Q 2 today? 3 Α No, ma'am. I was in my normal daily uniform, which consist of a polo shirt and what we 4 5 refer to as BTU pants, they are cargo. The rest of 6 my accouterments, department issue badge, obviously 7 my side arm, handcuffs, magazine holder, and then on 8 the polo shirt itself it is marked St. Louis County Police Department with our badge, Crimes Against 10 Unit and on the back is pretty much glow in the dark 11 letters that says St. Louis County Police 12 Department. 13 Q Have you met Darren Wilson before this 14 date? 15 Α No, ma'am. 16 And so when you saw him in the emergency 17 room, how was he dressed? 18 He had his department issued Navy blue uniform pants on, his boots, but he was wearing a 19 20 T-shirt. He was not carrying a sidearm or his duty 21 leather and he did not have his uniform shirt on. 22 Did you tell him what you were there for? Q 23 Yes, ma'am. 24 And did you ask him any questions that 25 would assist you in knowing what to photograph?

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 14 I asked him what areas hurt other than 1 2 what I was seeing. He went through several sites 3 that he complained of injuries. I retrieved the ER 4 charge nurse to make sure that I wasn't missing 5 anything as far as the ER staff doing their initial assessment of Darren Wilson. 7 So you spoke with the charge nurse, do you recall his name? 8 No, I do not. Α 10 Did he indicate to you that there were 11 additional injuries that you did not assess or not 12 see? 13 No, we walked through with Darren Wilson A his injury complaint sites, consisting of mainly his 14 15 facial area, the back of his neck and he said his 16 head hurt. 17 Did you photograph the areas that he 18 indicated hurt? 19 I did. Α 20 Now, we also heard Detective 21 yesterday, not yesterday, I keep saying yesterday, 22 previously, about when he photographs crime scenes, 23 are you all instructed similarly that you would 24 have, I guess, a procedure that you follow in how

Gore Perry Reporting and Video

FAX 314-241-6750

you do photographs?

25

314-241-6750

Page 15 1 There's a standard format that 2 we teach in the crime scene school and we also teach 3 during our field training program. 4 There's a normal sequencing event. In 5 this case you take overall pictures, you take what's 6 called midrange pictures to tie in that location to 7 something else that's recognizable, you will take a 8 specific image and in these kind of circumstances you'll also put a measuring device or a scale in 10 your information to give you an idea of how large 11 this area is or how small this area is. 12 Did you do that when you were Q 13 photographing the injuries on Darren Wilson? I did. 14 Α 15 Q And then after you completed all of your 16 investigation in this case, did you remove the 17 memory card from your camera? 18 T did. Α 19 And did you have those, I can't remember, 20 do you burn it onto a desk or do you take the memory 21 card to the lab? 22 Α No, the memory card is placed in, in the 23 old days referred to as a film envelope, and then 24 that was hand carried by myself to our photo lab.

Gore Perry Reporting and Video

The photo lab will download the original images from

FAX 314-241-6750

25

314-241-6750

```
Page 16
 1
     the media card onto a disc and then after that's
 2
     completed, on homicide cases, officer involved
 3
     shootings and other cases of note, they will print
 4
     the photo lab, meaning they, will print 8 X 10
 5
     photographs. This was done in this case.
 6
                    I will respond back to the photo lab,
 7
     those images are reviewed my me and then they are
 8
     stamped with official photographs and for the
     prosecuting attorney's set. I will circle the image
10
     number on the back of the 8 X 10s and put my
11
     initials and DSN on the back of them.
12
               All right. Did you do that in this case?
          Q
13
               T did.
          A
               When you examined the photographs after
14
15
     the lab had printed them out, did the lab print each
16
     and every image that you had snapped during your
17
     investigation?
18
               They did.
          Α
19
               So there is no images that you deleted
20
     from the camera or images that might have been
21
     developed that you discarded?
22
          Α
               Absolutely not.
23
              Do you in any way crop these photographs?
          Q
24
               Absolutely not.
          Α
25
               Do you in any way edit them or use a
          Q
```

FAX 314-241-6750

314-241-6750

```
Page 17
     filter when you are photographing or change or
 1
 2
     enhance color?
 3
          Α
               No, ma'am.
               Do you recall how many photographs you
 4
     took in this case?
 5
 6
               I believe around 50.
          Α
 7
                          (Deposition Exhibit Number 10
 8
                         marked for identification.)
               (By Ms. Alizadeh) I'm going to hand you
          0
10
     what I have marked as Grand Jury Exhibit 10.
11
     you and I get this envelope yesterday, did you
12
     recognize this from my office yesterday?
13
               We did.
                        When I stamp these photographs, I
          Α
     fill out the front of this with a header information
14
15
     as far as date, complaint number, what type of
16
     incident it is, and in this scenario since I went to
17
     three different locations, those three different
18
     locations are also marked on front of the envelope.
19
                    In addition to that, I put my
20
     information on there as far as crime scene unit,
21
     Detective
                          my DSN.
22
                    We also stamp in front, which matches
23
     what's on the back of the photographs so it is
24
     marked official photograph. And as far as the
25
     dissemination, in this case this was marked PA,
```

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

```
Page 18
 1
     standing for the prosecuting attorney's office.
 2
               All right. And I want you to remove the
 3
     photographs that are inside Grand Jury Exhibit 10.
     And just briefly leaf through them. Do those appear
 4
 5
     to be the photographs that you took during your
 6
     investigation of this case?
 7
          Α
               They are.
 8
               And do they, each photograph bear your
 9
     markings where you stamp them as an official
10
     photograph and you circle the image number and place
11
     your initials there?
12
               Yes, ma'am.
                            It is reflected here.
13
               Okay. Can you tell me what the last
          0
     photograph that is in that stack is numbered?
14
15
          Α
               Number 50.
16
               Okay. So you have 50 photographs in your
17
     hand there?
18
               Yes, ma'am.
          Α
               And so for the sake of ease, if you want
19
20
     to sit in that chair right there, and I will have
21
     you one by one we're going to go through each
22
     photograph and you are going to describe what is
23
     depicted in that photograph. So this is Image
24
     Number 1, correct?
25
          Α
               It is.
```

FAX 314-241-6750

314-241-6750

	Page 19
1	<b>Q</b> We already have testimony from Detective
2	about the placard that is photographed, is
3	that your habit to do that as well?
4	A Every time, yes, ma'am.
5	<b>Q</b> And that contains the date that the
6	photograph, what date, is that the date of the
7	incident always or the date that the photographs are
8	being taken?
9	A Usually both. If I respond to a scene to
10	photograph that, if it is the original scene, at
11	this point it was, then the original date here.
12	Now, if I had been involved in this
13	with further investigation, if I have another aspect
14	of this investigation, I will put in parentheses
15	next to the complaint number the date of the
16	original incident. Let's say we had to go back and
17	do something today, okay.
18	The date of the original incident
19	would be here next to the county complaint number,
20	but the date of the image that I took, these would
21	be in the first part.
22	Q So in this case, your investigation?
23	A Occurred on 8/9/14 yes, ma'am.
24	<b>Q</b> That was the date of the shooting?
25	A Correct.

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

Page 20 And then we've already had some testimony, 1 2 the top number is the county complaint number? 3 Α It is. 4 And below that is the Associated Ferguson Q 5 Police Department generated complaint? 6 Yes, ma'am. Α 7 And then the incident as it was called in 0 originally, correct? 8 Α Correct. 10 Q And then is that your department serial 11 number? 12 Α Yes. 13 And your initials? Q 14 Α And DSN. 15 Q All right. And can you go to Image Number 16 I will take these from you as we go. 17 Can you then go ahead and describe 18 for the jurors what appears in that image? 19 This is an overall view of Darren Wilson 20 at the time of my investigation. As I described to 21 you folks earlier, this is how he was dressed. 22 Hang on a second, I don't want to put Q 23 anybody to sleep, but I'm going to try and see if it 24 goes totally dark. 25 For the record, I was just adjusting

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

```
Page 21
     the light to make it easier to see that image on the
 1
 2
     screen. And is that how he appeared in the
 3
     emergency room dressed in a T-shirt and the pants
     he's wearing, those are his department issued pants?
          Α
               Yes, ma'am.
               All right. And Image Number 3?
 6
 7
               Image Number 3 is an overall view of the
          Α
     back of him from the rear.
 8
               I think push it up?
10
          Α
               I'm trying to lose that glare.
11
               MS. WHIRLEY: Can you zoom it in some?
12
               (By Ms. Alizadeh) I don't know how to make
     that different. Again, if you want the photos
13
     passed around because it is easier to see the actual
14
15
     photograph, but for the purposes of this testimony.
16
17
                                                   I want
18
     to see the first picture.
19
               MS. ALIZADEH: You want to see Image
20
     Number?
21
                                 I personally, if you can
22
     give me the picture.
23
               MS. ALIZADEH: And when this is done, if
24
     you want, we'll just pass them through you, okay,
25
     because there aren't a whole lot of these
```

Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750

```
Page 22
     photographs.
1
 2
               Image Number 3 again, this is the back of
 3
     Officer Wilson, correct?
               It is.
          Α
 5
          Q
               (By Ms. Alizadeh) And are you aware of the
     T-shirt that he is wearing, is that the T-shirt he
7
     had on that day?
 8
               It is.
          Α
               And when you, I know you didn't examine
10
     him like a doctor, did you see anything on him that
11
     indicated that he had been bleeding?
12
          Α
               No, ma'am.
13
               No open wounds?
          Q
14
               None that I observed, no.
          Α
15
          Q
               Did you ask him if he had been bleeding or
16
     if he was cut?
17
               I did.
          Α
18
               And what was his response?
19
          Α
              He said no.
20
          Q
               Okay. Now Image Number 4. No, wait, that
21
     was Image Number 4, isn't it?
22
          Α
               Correct.
23
               And just for the record, we have to make a
24
     record, Image Number 4 is?
25
          Α
               Overall view of the facial area of Darren
```

FAX 314-241-6750

314-241-6750

```
Page 23
 1
     Wilson.
 2
          Q
               Image Number 5?
 3
               Overall view of the left side of his face.
          Α
               Image Number 6?
          Q
 5
          Α
               Overall view of the right side of his
     face.
 7
               Image Number 7?
          Q
 8
               It is a part of a series of two, the first
          Α
     part of this is a close-up view of the left side
10
     facial area without a measuring device.
11
                     The next image is one with the
12
     measuring device.
13
               And the next image is Number 8?
14
          Α
               Yes.
15
          Q
              All right.
16
                                          What is it you
17
     are measuring there?
18
               That was one of the injury complaint sites
19
     by Darren Wilson. He complained that his face was
               So when I asked him specifically, he
20
21
     pointed to these sides of his face. We'll get to it
22
     shortly, but also the back of his neck.
23
                                Okay, thank you.
24
               (By Ms. Alizadeh) That is Image Number 9?
          Q
25
          Α
               It is. Again, part of a series of two,
```

FAX 314-241-6750

314-241-6750

Page 24 1 this is a close-up of the right side of his face 2 without a measuring device and then one with a 3 measuring device. 4 And with the measuring device is Image Number 10? Α Correct. 7 Image Number 11 overall view of the 8 back of his neck. Again, part of one, two series of 10 images, close-up view of the back of his neck 11 without a scale. 12 And that's Image Number 12? It is. And 13 reflects one with the 13 Α 14 scale. 15 Next Image 14 is the left rear side 16 of his neck without a scale and 15 with the scale. 17 MS. WHIRLEY: Sheila Whirley. What are 18 you measuring on there? 19 Again, Miss Whirley, just a complaint site 20 that he complained of. 21 MS. WHIRLEY: So that line of demarcation 22 does not have anything to do with the complaint 23 site? No, ma'am, that's a natural crease in his 24 25 neck area.

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

_	
	Page 25
1	Q (By Ms. Alizadeh) Next Image Number?
2	<b>A</b> 16.
3	Q Okay.
4	A Is the right rear side of his neck without
5	a scale, and then 17 is with a scale.
6	18 is the left side of his neck
7	without a scale, and then 19 is with a scale.
8	${f Q}$ All right. So those 18 total photographs
9	were how Darren Wilson appeared when you
10	photographed him on August 9th shortly after 2:20,
11	or about what time did you actually photograph him?
12	A At 2:20 that's when I initiated my, I
13	turned my back to you folks, I'm sorry, that's when
14	I initiated my investigation and documentation as I
15	stated earlier of the injury sites that Darren
16	Wilson complained of.
17	<b>Q</b> Did you photograph any other parts of his
18	body?
19	A No, ma'am.
20	Q Did he complain of any other injuries?
21	A No, ma'am.
22	Q Did you examine his hands?
23	A I looked at them, I did not examine them.
24	Q Okay. Did he complain that his hands were
25	injured or hurting in any way?
1	

FAX 314-241-6750

314-241-6750

			Page 26
۱	1	A	No, ma'am.
	2	Q	When you looked at his hands, did you see
	3	the backs	of his hands?
	4	A	I did.
	5	Q	And did you notice anything that appeared
	6	to you tha	at might indicate an injury to the backs of
	7	his hands	?
	8	A	No, ma'am.
	9	Q	Now, at the hospital, did you seize
	10	anything :	from Darren Wilson?
	11	A	I did not.
	12	Q	And you had indicated previously that you
	13	were also	charged with the duties of seizing his
	14	clothing?	
	15	A	Correct.
	16	Q	And his gun?
	17	A	Correct.
	18	Q	And now you said that he had his
	19	department	t issue pants on in the hospital; is that
	20	correct?	
	21	A	Yes.
	22	Q	Did you talk to him about those pants?
	23	A	I did.
	24	Q	And did he show you anything on the pants?
	25	A	He said there was blood on his left thigh.
1			

FAX 314-241-6750

314-241-6750

	Page 27
1	Q And did you look at the pants?
2	A I did.
3	${f Q}$ Did you see something that was some type
4	of stain on the left thigh of his department
5	trowsers?
6	A I did. There was a reddish stain on the
7	upper thigh area.
8	${f Q}$ And did you photograph those pants in the
9	hospital?
10	A No, ma'am, we did that at Ferguson Police
11	Department.
12	Q Did you seize his pants at the hospital?
13	A No, ma'am.
14	${f Q}$ Why is it that you just have him take his
15	pants off right then and give it to you?
16	A He had nothing else to wear. I didn't
17	want him traveling in just a hospital gown back to
18	Florissant Police Department.
19	Q So was there a decision made for you, as
20	well as Darren Wilson and others to go back to the
21	Ferguson Police Department?
22	A Yes.
23	Q And was there a discussion about somebody
24	bringing clothing for him?
25	A Yes. I did discuss with Lieutenant

FAX 314-241-6750

314-241-6750

```
Page 28
 1
    Colonel
                      from Ferguson Police Department to
 2
     see if we could make arrangements from
 3
 4
                 whoever, to make arrangements if they
 5
    could bring clothes to Ferguson Police Department so
 6
     that Darren Wilson had something to wear home that
7
    day.
 8
               All right. Now, did you travel directly
     from the hospital to the police department?
10
          A
               I did.
11
               Now, let me ask you this, getting back at
12
     little bit at the hospital, did you ask Darren
13
     Wilson any questions about what happened that day?
14
               No, ma'am.
          Α
15
          Q
               You didn't ask him about, tell me what
16
    happened or anything of that nature?
17
               No, ma'am.
          Α
18
               Did you hear him talking to anybody else
19
     about what happened that day?
20
          Α
               No, ma'am, not while I was photographing.
21
               All right. So did you go by yourself in
          Q.
22
     your crime scene van to Ferguson?
23
               I did.
          Α
24
               To your knowledge, did Darren Wilson
25
    travel there with another officer?
```

FAX 314-241-6750

314-241-6750

	Page 29
1	A Lieutenant Colonel I believe,
2	yes.
3	$oldsymbol{Q}$ Did you all arrive at the Ferguson Police
4	Department at around the same time?
5	A Yes.
6	Q When you got there, what's the first thing
7	you did?
8	A After meeting with Detective Darren
9	Wilson, Lieutenant Colonel we entered
10	Ferguson Police Department and went to their
11	detective bureau.
12	I was told that's where Officer
13	Wilson or Darren Wilson's department issued firearm
14	was, his uniform shirt and that's where we were
15	making arrangements to have clothes brought to him
16	so I could document the uniform that he was wearing
17	and also seize those uniform pants from him.
18	Q And so when you went into the detective
19	bureau, did you locate the weapon?
20	A Yes, I inquired of its whereabouts and I
21	was told that someone had placed Darren Wilson's
22	department issued side arm in an evidence envelope,
23	which wasn't sealed. It was on a desk there in the
24	detective bureau with other detectives from that
25	department present.
1	

Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750

Page 30 And did you locate that envelope with the 1 2 firearm inside of it? 3 Α I did. 4 And you said it wasn't sealed, did you remove the contents of the envelope? 5 6 I did. Α 7 What was inside the envelope? 8 His department issued Sig Saur firearm, Α 9 the magazine and one live round, and that's how the 10 firearm was placed in that envelope. I did not 11 download that weapon when I inquired about it. Ι 12 was told that Darren Wilson had downloaded the 13 weapon and then probably at the direction of the 14 supervisor, it was placed in that envelope and 15 merely for conveyance purposes, I assumed from the 16 scene back to Ferguson Police Department until I 17 arrived. 18 But that was not your firsthand knowledge, 0 19 correct? 20 Α No, ma'am. 21 So the gun, the empty magazine and one 22 live round was in that envelope? 23 Α Correct. 24 And you were told that the gun was 25 downloaded by Darren Wilson?

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 31 1 Α Yes. 2 And you all know what that means, 3 downloading, other than like on the internet, can 4 you explain what that means for the jurors? 5 Α Sure. When you download a semiautomatic 6 weapon for our terminology, that means that the 7 magazine is removed, all rounds that are in the 8 magazine and whatever is chambered is removed and the slide is locked back. That's a safe way to 10 store a weapon. 11 So was that in the condition it was when Q 12 you got it out of the envelope? 13 Yes, ma'am. Α 14 Okay. And now you are not a ballistics 15 person; is that correct? 16 I am not a certified ballistics expert, Α 17 no, ma'am. 18 Are you familiar with this weapon? 19 Α Very. 20 Q And is it, in fact, the same weapon that 21 you carry? 22 Α Yes, ma'am. 23 And so did you, when you removed the 24 weapon from the envelope, did you photograph it in 25 the state it was in?

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

```
Page 32
          Α
               Yes, ma'am.
 1
 2
               Okay. Let's go through those. Your first
 3
     is Number 20, I believe?
 4
          Α
               It is. Once I removed the weapon, it was
 5
     laid on top of the Ferguson Police Department's
 6
     evidence envelope in exactly the condition that I
 7
     removed it from.
 8
               You and I talked about this yesterday,
     what's this thing right here?
10
               That is just part of the seal on the back
11
     of their evidence envelope. I did not apply that
12
     and nor was it sealed.
13
               Okay. And this portion of the weapon,
     that's the slide of the weapon?
14
15
          Α
               It is.
16
               And it is locked in the pulled back
17
     position?
18
          Α
               Correct.
19
          Q
               Can you --
20
               MS. ALIZADEH: We have a question?
21
                                           When you handle
22
     this evidence, are your hands gloved?
23
               Always.
          Α
24
                             : Even when you are
25
     photographing?
```

FAX 314-241-6750

314-241-6750

```
Page 33
 1
          Α
               Always, yes, ma'am.
 2
                                Okay.
 3
          Α
               As a general rule, I always wear two sets
     of gloves. If the first set becomes contaminated or
 4
 5
     in this case, if I was to swab this for any other
 6
     potential forensic evidence. That first set is
 7
     removed before I move onto the next step and then
 8
     another set of gloves is put on so I don't run the
     risk of cross-contamination.
10
               (By Ms. Alizadeh) So you are double gloved
11
     when you are handling this firearm?
12
          Α
               Always.
13
               All right, yes?
          Q
14
                                          So the envelope,
15
     it was your understanding that was the first time it
16
     had been used was when that gun was put in?
17
               I was just told it was placed in the
18
     envelope.
19
                                By that picture, it looked
20
     like the envelope has been used before?
21
               It's possible, I don't know.
          Α
22
               (By Ms. Alizadeh) And, Detective, did you
23
     seize the envelope?
24
               No, ma'am.
          Α
25
                                                  Just
```

FAX 314-241-6750

314-241-6750

Page 34 1 clarification. What is the protocol for when you 2 seize a weapon and it is placed in the evidence bag 3 to be inspected, what's the protocol as far as putting it in there and everything else after that? 4 5 Α I can speak for the County Police 6 Department, I can't speak for another agency, okay. 7 We do not package firearms in this manner. 8 If I go to a scene and there's a 9 firearm laying there, okay. There's a standard 10 protocol that we always follow, and I think you may 11 have seen some of those from Detective 12 We'll take an overall view, we'll 13 take what is called a midrange view to tie in that 14 firearm, if we are talking about bag this, where it 15 is on this section of the table. The overall view 16 would be the entire room, okay. Midrange view would 17 say, well, it is near these two jurors and these two 18 microphones. Then we would take a close-up view of 19 20 it, but it is still in place. We have not 21 manipulated it, we have not touched it and then what 22 you folks will see here shortly we follow the same 23 protocols as far as images. 24 Once it is photographed in place, 25 then wearing gloves, we will pick it up, usually lay

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

FAX 314-241-6750

Page 35 1 it on another surface, whether it is an evidence 2 envelope or evidence box, which would be the County 3 Police Department. We don't put fires arms in a 4 package. And then we would lay that firearm, 6 we would photograph both sides, we would take an 7 image of the serial number, we would remove the 8 magazine, photograph all of these things as they are, and then we would unload the magazines and 10 whatever rounds in the magazine. We would display 11 them next to the magazine to document, well, these 12 are the rounds that we found in there. 13 We would then lock the slide back and 14 whatever is in the chamber or not in the chamber 15 then we would document that. 16 We would package those items 17 separately, but they all go into one gun box. 18 If we were to seize this and render 19 it safe, then it would be inspected by another 20 detective or one of my supervisors to confirm 21 Detective looked at this gun and he cleared 22 it, and I'm checking to make sure that it is cleared 23 so everyone is safe. 24 We would then put what's called a 25 lead seal, which has a number on it through the

Gore Perry Reporting and Video
314-241-6750 www.goreperry.com

FAX 314-241-6750

```
Page 36
 1
     trigger guard, which would be this section right
 2
     here. And per our firearms unit, we would put in
 3
     essence, it is a orange zip tie that runs from, if I
 4
     can change images, Miss Alizadeh?
 5
               MS. ALIZADEH: Sure, just identify the
 6
     image you are going to put up there.
 7
               The next image is Number 21. This is the
 8
     other side of the weapon. Again, our normal
 9
     sequence. And right here would be the ejection
10
     port, that orange zip tie would initiate going
11
     through here, it comes out of the bottom of the
12
     magazine, goes in and then we would secure that.
13
                    Then it is sent to the firearms unit
14
     to verify when that gun gets there, that it couldn't
15
     have accidently slide, go forward, it could have
16
     been knocked around or something. And we want to
17
     confirm when it goes to our crime lab personnel that
18
     that gun is safe, has been inspected and has been
19
     confirmed.
20
                    So come back to your original, I
21
     can't speak for other departments, I can only share
22
     with you what is our protocol policy and procedure.
23
                               One more question.
24
     you take a picture of the envelope while the weapon
     is in the envelope?
25
```

Gore Perry Reporting and Video
FAX 314-241-6750 314-241-6750 www.goreperry.com

Page 37 1 No, ma'am. Α 2 I have the question about 3 the clothing. Is it common practice to have 4 somebody travel from one spot to another before you 5 take the clothing, I mean, I'm wondering is there a 6 reason why somebody couldn't bring that to the 7 hospital where he was instead of having him travel 8 somewhere else before he got there for his clothing. Again, ma'am, I can't address that, that 10 was Ferguson's decision. If I was to work, and I've 11 worked hundreds, if that was a County Police 12 Department employee, we would have made arrangements 13 to get clothes to him or her. 14 (By Ms. Alizadeh) Does anybody, the first 15 image of the weapon was Photograph Number 20, does 16 anybody need that back up? We are moving back now 17 for 21, which has been on the screen. Describe what 18 you are seeing? 19 That is the other side or the right side Α 20 of the weapon, the slide locked back. Visible in it 21 serial number, as I explained earlier. 22 And Image 22 is a close-up view of 23 that serial number. You folks may not be able to 24 see that. We can certainly pass that around. 25 don't know how to make that clearer.

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

Page 38 Can you, just with the pointer, point out 1 2 where the serial number is? 3 Right in the center of the image is the Α serial number of that firearm. 5 Q Now, also not clearly visible on the screen, but again, we will pass these around, there 7 is, there is something right there? 8 There's a red stain right here. And also Α in this area on the slide. 10 All right. Were there any other red 11 stains that you found anywhere else on the gun? 12 Yes, they're on the slide also. 13 Okay. And now before we get to, I know you depleted your photographs, but while we have 14 15 this up, let's go forward to you swabbing the gun. 16 Α Okay. 17 We also heard Detective talk about these kits that you are equipped with in your crime 18 19 scene van? 20 Α Yes. 21 They are prepackaged and sterile swabs, Q 22 correct? 23 Correct. Α 24 Did you swab that gun? Q 25 Α I did.

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

```
Page 39
               What area, if we could maybe just use 20
 1
 2
     and 21 again, instead of that close-up, just point
 3
     with the pointer the areas of that weapon that you
     swabbed?
               The entire slide area, all three sides of
     it and this area on both sides.
 7
               And so that would include the reddish
 8
     stains or the reddish substances that you could see
     on that weapon?
10
          Α
               Yes.
11
               Now, let you resume with the next image.
          Q
12
               The next image is 23. Again, we're
13
     documenting the condition of the contents from that
14
     firearm that was in the envelope placed by Ferguson
     Police Department personnel.
15
16
               And that magazine is empty?
          Q
17
               It is.
          Α
18
               All right.
          Q
19
20
          Α
               Yes, ma'am.
21
                                 Do you check for
22
     fingerprints in the gun?
23
               No, it is the officer's gun.
24
                                 You don't check for
25
     fingerprints?
```

FAX 314-241-6750

314-241-6750

```
Page 40
               No, the magazine in light of these
1
 2
     circumstances.
 3
                                No, the magazine, in the
 4
     gun, when he holds the gun?
 5
               MS. ALIZADEH: Let me address that because
 6
     that's a good question.
7
                                I'm sorry.
 8
          Α
               That's great.
               (By Ms. Alizadeh) I kind of skipped over
10
     that, let's talk about that right now.
11
          Α
               Sure.
12
               So when you were, were you told that there
          Q
13
     was a physical struggle over this weapon?
14
          Α
               I was.
15
               And were you told that Michael Brown may
16
     have had his hands on the weapon?
17
          Α
               Yes.
18
               So was there some discussion between you
19
     and other officers about swabbing versus
20
     fingerprinting?
21
          Α
               There was.
22
               Okay. Have you all had a fingerprint
          Q
     expert testify before you before?
23
24
               (All jurors indicate no.)
25
          Q
               (By Ms. Alizadeh) On a surface like this
```

FAX 314-241-6750

314-241-6750

Page 41 1 firearm, how would you go about examining that, do 2 you want those firearm pictures again? 3 Α Just let me have one of them please, ma'am. 5 0 How would you go about looking on that weapon for fingerprints? 7 Okay. Based on the information that I was Α 8 told regarding the incident, I was informed that Darren Wilson while holding his firearm, his 10 department issue pistol, while he's holding it, 11 there was a struggle between Mr. Brown and 12 Mr. Wilson while the officer was seated in his 13 police vehicle and Mr. Brown was outside. 14 So if you take that and say okay, 15 well, the officer is holding his gun, he never 16 relinquished it, the gun was never taken away, 17 however, we are wrestling over this gun. 18 Common sense would tell you that if 19 I'm holding the handle of the gun here, then what 20 opportunity or what else is the other person 21 struggling over. Probably this area of the gun. 22 The magazine was never released from 23 the gun during the incident, it was never dropped or 24 picked up, the officer never lost control of his 25 qun.

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

```
Page 42
1
                    If you have a violent event like
 2
     that, you have to make a decision whether you are
 3
     concerned about hopefully getting a DNA profile or
     the possibility of retrieving latent fingerprint
 4
 5
     evidence.
               Let me stop you really quick here.
7
     going to finish him up describing this because our
 8
     doctor is here, but I'm going to let him finish this
     area about the fingerprint versus swabbing.
10
                    Now, I want to clarify that the
11
     things that you are talking about concerning a
12
     struggle over the gun, that is not from your
13
     firsthand knowledge, correct?
14
               Absolutely not.
          Α
15
          Q
               That's information that came to you from
16
     other sources?
17
               Yes.
               And not Darren Wilson?
18
19
          Α
               Correct.
               And then you are making some assumptions
20
21
     about where you might fingerprint based upon just
22
     common sense and your experience?
23
          Α
               Yes.
24
               Okay. So this is not to say that this is
25
    how it happened, but this is based upon your
```

FAX 314-241-6750

314-241-6750

Page 43 experience and what you have been told at this point 1 2 where you might expect to find fingerprints? 3 Α Correct. 4 Okay. You can then go ahead and talk 5 about, you have to make kind of a decision between 6 whether to swab for DNA or to look for fingerprints? 7 Α Correct. 8 So why did you make a decision to swab for DNA? 9 10 Α Based on training and experience, and also 11 based on the information that I was given, you're 12 not going to have fine ridge detail during a violent encounter. It would be different if this gun was 13 14 like this and someone just came up, other than the 15 officer, and touched it. 16 When we process that, yes, you can 17 get fine ridge detail. So the decision was made 18 between myself and the crimes against person 19 detective, homicide detective, that it would be 20 better to swab the weapon. 21 Now, if you are going to swab it, 22 then you need to swab all the relevant areas that 23 could be touched by someone other than Darren 24 Wilson. 25 Because, of course, you know Darren Wilson Q

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

			Page 44
	1	has touch	ed that gun?
	2	A	Exactly, he was holding it.
	3	Q	It would tell you nothing if his DNA is on
	4	it?	
	5	A	Absolutely not.
	6	Q	We know he touched the gun?
	7	A	Right, it is his gun.
	8	Q	All right.
	9	A	Once that decision is made and you swab,
	10	then you'	re going to have to swab those areas that
	11	were desc	ribed earlier. If there was fingerprint
	12	evidence,	you are going to be swabbing through them,
	13	so that's	why you need to make a decision whether
	14	you want	to process this for fingerprints or do you
	15	want to p	rocess this for DNA.
	16	Q	And in processing this weapon for
	17	fingerpri	nts, could you after that swab it for DNA?
	18	A	No.
	19	Q	So you had to pick one or the other?
	20	A	Right.
	21	Q	And based upon your information and
	22	consultin	g with the detective, crime scene
	23	detective	, not crime scene, crimes against person
	24	homicide	detective, was a decision made to swab for
	25	DNA?	
- 1			

Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750

-241-6750 www.goreperry.com

```
Page 45
               Yes, ma'am.
 1
          Α
          Q
               And that's what you did?
 3
          Α
               Yes.
               Did you package those swabs in the regular
          Q
 5
     manner?
 6
          Α
               I did.
 7
               MS. ALIZADEH: Do you have any questions
 8
     about his processing this gun or about the gun
     itself or anything like that?
10
                                        : Did you
11
     describe what type of gun is it again?
12
               It is a Sig Sauer P229. It is a .40
13
     caliber weapon.
14
               MS. ALIZADEH: Just so you know and, of
15
     course, he is familiar with this weapon, but we will
16
     be calling, you know, someone from the crime lab
17
     that is an expert on ballistics and can answer all
18
     kind of questions about this weapon and how it fires
19
     and so forth.
20
                                          Once you swab
21
     the critical areas for DNA, is all of the DNA at
22
     that point removed from the object basically, it is
     rendered clean?
23
24
               You might have a trace only because these
25
     are cotton swabs and when we swab something, we do
```

FAX 314-241-6750

314-241-6750

```
Page 46
 1
     two at one time. One for the prosecuting attorney's
 2
     office, that's going to end up going to the lab and
 3
     potentially a defense attorney so we keep one on
     file.
 5
                    When you are holding these two cotton
 6
     swabs, if you folks can picture Q-Tips, okay.
7
     are holding two of them together, unless you're
 8
     going back and forth and completely swabbing every
     little spot on this thing, you're not going to
10
     remove all of the DNA, all right.
11
                    You're trying to get the most profile
12
     or profiles that you can by swabbing those areas
     back and forth. Kind of like painting a first coat,
13
14
     you're not going to paint, you're not going to cover
15
     everything with your first coat. The same thing
16
     applies when we're swabbing for DNA. So potentially
17
     could be DNA left on there, but we try to get the
18
     largest sample as we can.
19
20
          Α
               Yes, ma'am.
21
                                I just need to know this.
22
     When the weapon was seized, before you got to the
23
     weapon.
24
               Okay.
          Α
25
                                It was in the envelope?
```

Gore Perry Reporting and Video
FAX 314-241-6750 314-241-6750 www.goreperry.com

Electronically signed by

```
Page 47
 1
               Uh-huh.
          Α
 2
                                The protocol that the
 3
     envelope is supposed to be sealed, you know, like
     you collect evidence and you get the bag, all the
 4
 5
     evidence is in the bag and you seal the bag until
 6
     the right person comes and inspects the bag?
 7
          Α
               Again, I can speak for the County Police
 8
     Department, yes. What I was told, the information
     that I was given is that it was just placed there
10
     for, in essence, conveyance or storage until I got
11
     there.
12
                    And then, obviously, when I arrived
13
     and I processed or I seized or I package something,
14
     then I follow what the County Police Department
15
     crime scene unit and our crimes lab protocol as far
16
     as how we package things.
17
                                Was it locked away or
18
     sitting out?
19
               It was in the detective bureau on a desk.
20
               (By Ms. Alizadeh) Just for clarification,
21
     do you know does Ferguson Police Department have
22
     their own crime scene detective?
23
          Α
               They do.
24
               Were any of them that you know of involved
25
     with processing anything involved with this
```

FAX 314-241-6750

314-241-6750

Page 48 1 shooting? 2 No, ma'am. Α 3 In fact, Ferguson had asked county to come in and take over this investigation within maybe an 4 5 hour of the shooting, would that be your 6 understanding? 7 Yes, ma'am. Α 8 And so to your knowledge, did any Ferguson 9 crime scene detectives have anything to do with 10 seizing evidence, processing any scenes? 11 No, ma'am, that's why they requested my 12 unit to respond. 13 And so I'm only guessing or speculating, had a Ferguson crime scene detective actually seized 14 15 this weapon, he might have handled it in a different 16 manner than what was done in this case, would that 17 be a guess or fair to say? 18 That would be accurate because Ferguson 19 Police Department has sent some of their officers to 20 the crime scene school that I teach at our academy. 21 I'm confident in stating that they would probably 22 have followed protocols if they were actually 23 seizing pieces of evidence. 24 MS. ALIZADEH: Okay. Any other clarifications? 25

Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750

```
Page 49
 1
                                Yes.
                                                        You
 2
     may have said it, who actually put the gun into the
 3
     envelope?
               I have no idea.
          Α
 5
                                Okay. Would there be an
     issue when you do the swab of somebody else's DNA on
 7
     the gun.
 8
               What I was told is that Darren Wilson had
          A
 9
     unloaded his own weapon, so if he handed it to
10
     someone else, I was never informed of that.
11
               MS. ALIZADEH: Now, I will tell you we
12
     will have DNA people testify and they will tell you
13
     what DNA was found on that gun and if they can
14
     identify whose DNA it was.
15
               So as far as that goes and let me ask you,
16
     Detective
                       did you take a swab from Darren
17
     Wilson at the hospital.
18
               Yes, ma'am.
          Α
19
               (By Ms. Alizadeh) So there was a sample of
20
     Darren Wilson's DNA taken by you at the hospital?
21
               Yes.
          Α
22
               And that is done by rubbing something on
23
     the inside of his cheek?
24
               Yes, it is called a buccal swab.
          Α
25
               And you are fully gloved?
          Q
```

FAX 314-241-6750

314-241-6750

Page 50 1 Α Uh-huh. 2 Do you have a protocol on how to take that 3 swab and package it so that there is no contamination? Α We do. Q You do not want your DNA on that swab in 7 any way? 8 Α No. MS. ALIZADEH: So at any rate, there will 10 be some testimony sometime down the road about what 11 was discovered on the swabs that Detective 12 used when he processed that gun and then, you know, 13 any conclusions to be drawn from that. 14 Anybody else about the gun? 15 We're going to have to break with him and 16 Detective I'm sorry, you will get an invite 17 back on another day. 18 I love to come chat again. 19 MS. ALIZADEH: We'll go ahead and have him 20 finalize the disc and while the disc is finalizing, 21 because we all know that takes a couple minutes, how 22 about if we take a break. And in shifts, I'll start 23 these photographs over here so if you all want to 24 like, if you need a restroom break and then come 25 back as these are getting passed around, and you

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

```
Page 51
     might be able, you will be able to see. We're not
 1
 2
     going to do the ones we haven't talked about yet,
 3
     just the ones we identified.
                            (Recess)
                    DR.
 7
     of lawful age, having been first duly sworn to
 8
     testify the truth, the whole truth, and
     nothing but the truth in the case aforesaid,
10
     deposes and says in reply to oral
11
     interrogatories, propounded as follows, to-wit:
12
                         EXAMINATION
13
     BY MS. ALTZADEH:
14
               For the record, this is Kathi Alizadeh
15
     present in the grand jury room with Sheila Whirley
16
     we are both with the St. Louis County Prosecutor's
17
     Office. All 12 jurors are present and, as well as
18
     the court reporter who is taking down the testimony
19
     and also audio recording the proceedings today.
20
                    For our next witness, would you state
21
     your name, please?
22
          Α
               Name Dr.
23
               Could you spell for the court reporter
24
     your first and last name?
25
          Α
```

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Electronically signed by

	Page 52
1	<b>Q</b> And what is your profession?
2	A I'm a forensic pathologist.
3	<b>Q</b> And can you describe for the jurors your
4	education and how you obtained the degrees to become
5	a pathologist?
6	A For starters, I obtained my bachelor of
7	science degree at Xavier University at Louisiana,
8	that was a four year education. I then attended
9	medical school four years at Louisiana State
10	University. College medical school down in New
11	Orleans, which was a four year training. And then I
12	did a four year anatomical and clinical pathology
13	residency at St. Louis University here in St. Louis.
14	I did one additional of pediatric
15	pathology, which was a one year fellowship and
16	fellowship specifically in forensic pathology at St.
17	Louis City Medical Examiner's Office.
18	${f Q}$ Can you explain for the jurors what is,
19	what is a pathologist, what does he do?
20	A The basic definition of a pathologist is
21	someone who is a medical doctor who is in the
22	profession of studying disease.
23	${f Q}$ Can you describe for the jurors what is a
24	forensic pathologist?
25	A A forensic pathologist is a specialized
1	

FAX 314-241-6750

314-241-6750

```
Page 53
     doctor in the field of pathology who is dealing with
1
     determining the cause and manner of death.
 3
               And you are a forensic pathologist?
          Q
              Yes, I am.
          Α
          Q
               Are you board certified?
               Yes, I am board certified in anatomical
          Α
7
     pathology as well as forensic pathology.
 8
               Are you employed as a forensic
     pathologist?
10
          Α
               Yes, I am.
11
               Where are you employed?
          Q
12
               I'm currently employed as an assistant
13
     medical examiner at the St. Louis County Medical
     Examiner's Office.
14
15
               Is that the office, is the chief medical
16
     examiner for St. Louis Dr.
17
              Yes, she is.
          Α
18
              You work under her supervision?
19
          Α
              Yes, I do.
20
          Q
               How long have you worked for the County
21
     Medical Examiner's Office?
22
               A little over two years.
          Α
23
               Prior to that, did you work for any other
     medical examiner's office?
24
25
          Α
               No.
```

FAX 314-241-6750

314-241-6750

Page 54

- 1 Q And so when you began working for the
- 2 County Medical Examiner's Office, was there any
- 3 training that you underwent or any on-the-job
- 4 training that you had to go through when you first
- 5 began?
- 6 A Um, I mean, the main thing that's
- 7 important is that you've done a certified or
- 8 approved forensic fellow, which I did do at St.
- 9 Louis University through their system at the St.
- 10 Louis City Medical Examiner's Office. So that's the
- 11 main thing that you do need, plus your medical
- 12 degree and eventually being board certified to be
- 13 able to practice what I practice at.
- And so in probably, what I would say in
- 15 layman's terms, one of your chief duties and
- 16 responsibilities is to perform autopsies, correct?
- 17 A Correct.
- 18 Q And just we all think we know what an
- 19 autopsy is, but can you explain for the jurors in
- 20 general when you have a deceased person how you
- 21 begin an autopsy?
- 22 **A** The autopsy itself, it is kind of layman's
- 23 terms just for the general examination that occurs
- 24 that I have for a case and it entails a lot of
- 25 features depending on the circumstances, some things

Gore Perry Reporting and Video 314-241-6750

Page 55 are not done or done, but in a complete sense of an 1 2 autopsy, you do an external examination, which is 3 looking at the external features of the body with the clothes on and then removed. 5 Once they are removed, you want to 6 look at any type of identifying characteristic, any 7 kind of scar, any type of wounds, any type of 8 tattoos, anything that you can physically see on the body that may be an abnormality or be something 10 different, that's the external portion of the 11 examination. 12 That is then ultimately followed with 13 an internal examination where you are actually 14 assessing all of the organs, weighing the organs 15 looking at the organs to see if you see any type of 16 pathological or disease type changes, any type of 17 injuries on the inside of the body. 18 In terms of different ancillary 19 studies that would be things that are in addition to 20 external, as well as the internal examination we do 21 toxicology, that's taking fluids from the body just 22 in a general sense, blood, urine, fluid from the 23 (listen) eyes where that fluid is tested to see if 24 there is any type of drugs, any type of toxins 25 within the body.

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Electronically signed by

```
Page 56
 1
                    The body is x-rayed some time to look
 2
     for any type of fracture, in homicide to see if
 3
     there is any type of projectiles within the body or
     any type of knives or things of that nature.
 4
          Q
               And by projectile, you mean like a bullet?
               Correct, like a bullet. Other things that
 7
     are done, sometimes I do cultures, that is just
 8
     looking for any type of bacteria or viral packaging
     that may be in the body, that may be the cause of
10
     death. Medical records, if they are present, I will
11
     review those as well and sometimes I have to use
12
     histology, which is looking at actual tissue that
13
     has been processed to be able to look under a
14
     microscope, where I look under the microscope and
15
     then I can make a diagnosis of different type of
16
     disease changes.
17
                    So those are kind of the basic things
18
     that go into an autopsy and as I said, sometimes all
19
     of those things are used, and sometimes bits and
20
     pieces are used, but more the most part complete
21
     external examination, internal examination and the
22
     toxicology, that's pretty much routine on all cases.
23
               And now you are not the toxicologist; is
24
     that correct?
25
          Α
               That is correct.
```

Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750

		Page 57
1	Q	You just collect the samples that are then
2	tested by	a toxicologist?
3	A	That is correct.
4	Q	Now, prior to your beginning and autopsy,
5	do you re	ceive information from anyone about the
6	deceased -	that may assist you in knowing what you are
7	looking a	t and what to look for?
8	A	Yes, I did.
9	Q	And in this case did you have a
10	conversat	ion with
11	A	Yes, I did.
12	Q	Is he one of the investigators from the
13	Medical E	xaminer's Office?
14	A	Yes, he is.
15	Q	Now, in this particular case, did you
16	examine th	ne body of Michael Brown?
17	A	Yes, I did.
18	Q	What day did you examine him?
19	A	August 10th.
20	Q	So this would be the day after the
21	shooting,	correct?
22	A	Correct.
23	Q	Now, in every autopsy that you perform,
24	are there	police officers there during the autopsy?
25	A	Not every autopsy I perform.

FAX 314-241-6750

314-241-6750

Page 58 In a situation where there might be 1 2 criminal activity involved in this person's death, 3 is there always a police officer who is present for 4 the autopsy? Α Yes, there is. 6 And are you familiar with some of the St. Q 7 Louis County crime detectives, crime scene 8 investigators? Yes, I'm familiar with them. 10 And are those generally, well not 11 generally, do they on occasion attend the autopsies? 12 Yes, they do. 13 And are you present when a police officer is photographing the autopsy? 14 15 Α Yes, I am. 16 Do you at times direct the officer, you 17 know, get a picture of this because this shows this? 18 Yes, I do. 19 And then if you are removing anything 20 foreign from the body, do you then, does the officer 21 document that object? 22 Yes, he does. Α 23 Does typically the officer would then 24 seize those objects if there was anything seized 25 from the body that might be evidentiary in nature?

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 59 Yes, they do. 1 2 So you're not, your job is not collection 3 of evidence? No. Α 5 Q But there is someone present during the entire autopsy whose job is there to collect 7 evidence? 8 That is correct. Α Okay. Now, in this particular case, this 10 autopsy performed on Michael Brown, what information 11 did you have from that was something 12 that you considered prior to beginning the autopsy? 13 Um, when I was contacted by Α he called me on my personal cell phone to let me 14 15 know what particular cases came in on his shift and 16 he informed me of the cases that came on his shift, 17 and one of the cases was Mr. Michael Brown. 18 The circumstances that I got from him were very brief and minimal. At that particular 19 20 time he informed me that there was a police 21 shooting. He mentioned to me that there appears to 22 have been a struggle and that was kind of the extent 23 of the information that I had at that particular 24 time. 25 So from that point, I know that the

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

Page 60 body is going to have to come in for examination due 1 to the nature of the particular type of event. 3 There is certain cases that are under my jurisdiction as a medical examiner and that 4 5 particular case of Mr. Michael Brown fit that 6 jurisdiction, so I knew that that case was going to 7 come in for examination. 8 Are you aware that Missouri has a statute that says that the actual body and its possessions 10 of a deceased person are the property of the Medical 11 Examiner's Office? 12 Α Yes, I am. 13 And so in this particular case, well, let me back up. 14 15 You're aware that 16 ultimately prepared a report, correct? 17 Α Yes. 18 But he didn't have his report prepared 19 when you first began your examination; is that 20 correct? 21 Correct. Α 22 Okay. And did you see any other police 23 reports or any other reports about this incident 24 before you began your examination? 25 Α No, I did not.

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 61 1 Did you get any other information from 2 anywhere else, whether it be a police officer or 3 witnesses or anybody else? Before I started my examination, Detective Α was present at my autopsy examination and I did ask him about the 7 circumstances that he knew at that particular time. 8 What did he tell you about what he knew at that time? 10 Α Trying to remember exactly, it is a while 11 back, but it was just basically similar situation of 12 there were two gentlemen in the street, police 13 officer responded to that particular area, from that 14 point in time a struggle ensued and then after that 15 things were difficult to determine at that point in 16 time, but ultimately it ended in the result of 17 Mr. Michael Brown obtaining fatal wounds. 18 Okay. And so jumping forward now, at the 19 conclusion of an autopsy, do you prepare a report? 20 Α Yes, I do. 21 And is that report reviewed by anyone else 22 in your office? 23 Um, there's a secretary who transcribes 24 the information that I speak into a digital 25 recorder, but it is my words and she transcribes my

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

```
Page 62
 1
     words, I get it back, I correct it.
 2
               Okay. And so did you, you prepared the
 3
     report after your autopsy of Michael Brown?
               Yes.
 4
          Α
 5
               And did you approve the final report as
 6
     correct, in other words, those were the words that
 7
     you had dictated?
 8
          Α
               Yes, yes, I did.
                          (Deposition Exhibit Number 6
10
                         marked for identification.)
11
               (By Ms. Alizadeh) I'm going to hand you
          Q
12
     what I marked as Grand Jury Exhibit Number 6. And
13
     is that a copy of your report of the post-mortem
14
     examination, post-mortem examination just another
15
     term for like an autopsy?
16
          Α
               Correct.
17
               Is that your report of the autopsy of
          0
     Michael Brown?
18
19
          Α
               Yes, it is.
20
               All right. And I'm going to pass around
21
     to all of you a copy of the report. Again, as I
22
     have mentioned before, if you are reading a document
23
     when a witness is testifying, just keep in mind that
24
     you might be missing something that's being said.
25
     These reports are yours to keep in your folders that
```

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

```
Page 63
 1
     we've provided for you to review at any time.
 2
     if at a later date after reviewing the report you
 3
     have additional questions, we will try to get those
 4
     questions answered for you.
                    I'm also handing you a document, I
 5
 6
     didn't mark this, Dr.
                                     did I show you that
7
     prior to your testimony today?
 8
               Yes, you did.
          Α
               This is a list of terms of anatomic
10
     orientation. In your report, you use terms that I
11
     would say a layperson isn't going to be familiar
12
     with, would that be fair to say?
               That's fair.
13
          Α
               And when you are autopsying a body, is it
14
15
     one of your jobs and responsibilities to describe
16
     the location of a wound?
17
               Yes, it is.
          Α
18
               And if it is some kind of piercing wound,
19
     whether it be from a knife or projectile, you
20
     describe the path of that wound or the trajectory so
21
     to speak of that wound?
22
               That is correct.
          Α
23
               You use terms that might not be common
          Q
24
     everyday terms that laypeople would understand?
25
          Α
               That is correct.
```

FAX 314-241-6750

314-241-6750

```
Page 64
               Do you agree that these terms that I
 1
 2
     showed you on this list are accurate?
 3
          Α
               Yes, I do.
 4
               And do you think it would assist the grand
 5
     jurors if they have a copy of this if they later
 6
     want to use the report?
 7
               Yes, I did.
          Α
 8
               MS. ALIZADEH: So I will pass those around
 9
               Again, if you will write your grand juror
     as well.
10
     number on the upper corner of these documents,
11
     please do not write on them. If you have notes to
12
     take, go ahead and take those notes in your
13
     notebook, but these are going to be, do we already
14
     have somebody that wrote on it? Did you write on
15
          If need be, I can get you a clean one. I want
16
     to make sure that the notes that you take are in
17
     your notebook.
18
               So, Dr.
                             are you assisted during
19
     the autopsy?
20
          Α
               Yes, I am.
21
               (By Ms. Alizadeh) And is it someone who is
22
     employed by the Medical Examiner's Office who assist
23
     you?
24
            Yes, that is true.
          Α
25
               And do you recall, you said Detective
          Q
```

FAX 314-241-6750

314-241-6750

```
Page 65
 1
                      was present for the autopsy?
 2
          Α
               (Nods head.)
 3
               He is a detective with the County Police
          Q
 4
     Department?
 5
          Α
               That is correct.
 6
               And was there another detective there who
          Q
 7
     was photographing and seizing evidence?
 8
               There were two other detectives there, but
          Α
     I don't know their names specifically.
10
               All right. And so when you, after your
11
     autopsy is completed, is it a standard, I'm sorry,
12
     and in the case when the police are also involved in
13
     the autopsies as far as documenting things, does the
14
     Medical Examiner's Office receive a complete copy of
15
     the photographs that the police took at the autopsy?
16
          Α
               Yes, we do.
17
                      Now, I'm going to show you what
               Okay.
18
     I've marked as Grand Jury Exhibit Number 7.
19
                          (Deposition Exhibit Number 7
20
                          marked for identification.)
21
               (By Ms. Alizadeh) I am going to ask you to
          Q.
22
     just remove what's in there. And this is a stack of
     photographs and just real quickly just leaf through
23
24
     them?
25
          Α
               Okay.
```

FAX 314-241-6750

314-241-6750

```
Page 66
               And tell me do you recognize these as the
 1
 2
     photographs that were taken during the autopsy of
 3
     Michael Brown?
               Yes, I do.
          Α
 5
          Q
               Now, we've already done this a couple of
     times and I think the easiest way to do this is if
 7
     you would sit in that chair there and take those and
 8
     have them on your lap.
                    And when we talk about these, now we
10
     have already had some testimony from some crime
11
     scene detectives about these photographs, and
12
     including the fact that each photograph has a number
13
     on the back of it. And so when I refer to the
14
     photographs, since I haven't marked these
15
     individually, we will just say this is Image Number
16
     1, okay?
17
          Α
               Okay.
               And so forth.
18
19
               Okay.
          Α
20
               So let me turn down the lights again.
21
     Makes it easier for people to see.
22
                    So, Dr.
                                       I know you're not
23
     necessarily the author of this and not familiar with
24
     what is depicted in Image Number 1, but the jurors
25
     have heard testimony about this. This is the
```

FAX 314-241-6750

314-241-6750

Page 67 1 placard that was prepared by the officer who took 2 these photographs and that would be his DSN down at 3 the bottom And my knowledge is that that is Detective And if necessary he can 5 testify about taking these photographs if you need 6 to hear from him about what he's done. 7 But, of course, it is going to have 8 to be the doctor who testifies about what we are 9 seeing in these photographs for the most part. So 10 Image Number 1 is the placard. 11 Can you put Image Number 2 up there, 12 please? I think it goes towards you on the thing, 13 there you go. Can you describe what you are seeing 14 in that image? 15 Α On the table is Mr. Michael Brown, the 16 decedent in question, and this is the way that the 17 body was presented to me after removal of the body 18 bag, which is the white bag that you see draped over 19 the table. And there's the placard identifying the 20 particular case and that's myself off into the 21 background in the back. 22 So that placard, and here is a laser Q 23 pointer right next to you right there, can you just 24 point to where the placard is you are talking about? 25 Α This is the placard, identifying placard

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

www.goreperry.com

Electronically signed by

```
Page 68
 1
     for this particular case.
 2
               And that's prepared, that's not the one
 3
     that the county detectives prepared, that's
     something that the medical examiner does, correct?
 4
 5
          Α
               Correct.
 6
          Q
               Okay.
 7
               Actually, sorry, this one is St. Louis
          Α
 8
     County, sorry.
 9
               MS. ALIZADEH: Okay.
10
                                          So when the body
11
     leaves the scene, is it taken directly to your
12
     offices or where is the examining on the 10th, what
13
     happens between when it is collected and this day?
14
               The body is picked up from a delivery
          Α
15
     service, delivery service is responsible for picking
16
     the body up from the scene. At that point when the
17
     body is picked up from the scene, it is brought
18
     directly to the St. Louis County Medical Examiner
19
     and it is placed in the morque, in a cooler, until
20
     eventually I'm going to come for the examination.
21
                    Let me back up a step. When the body
22
     comes in and it is checked in by the morque staff or
23
     it is given a number, and just to make sure that it
24
     is logged in appropriately and put into the morgue,
25
     but the body goes into the cooler to wait until the
```

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Electronically signed by

```
Page 69
     next day. We will take initial round of pictures
 1
 2
     and then we will get to the point where we are right
 3
     now.
                                Thank you.
 5
          Α
               You are welcome.
                (By Ms. Alizadeh) So when the body was
          Q
 7
     removed from the cooler, was it still locked in the
 8
     baq?
          Α
               Correct.
10
          Q
               We heard
                                 talk about the fact that
11
     there is a lock placed on the bag at the scene by
12
     him?
13
               That is correct.
          Α
14
               After the body is received at the Medical
15
     Examiner's Office, does anyone before your autopsy
16
     begins unlock that bag?
17
          Α
               No.
18
               If that lock had been disturbed or broken
19
     or opened when you began your autopsy, would you
20
     have noted that?
21
               Yes.
          A
22
               And so when you open the body bag, this is
23
     the body of Michael Brown as it appeared when you
24
     open the body bag?
25
          Α
               That is correct.
```

FAX 314-241-6750

314-241-6750

1			
		Page 70	
	1	<b>Q</b> We see in the image that we have heard	
	2	testimony from that there is paper	
	3	bags that are placed on the hands of the deceased?	
	4	A That is correct.	
	5	Q And that was done by at the scene?	
	6	A That is correct.	
	7	${f Q}$ And would it be protocol for to	
	8	have used latex gloves while he is handling any of	
	9	the body while he is at the scene?	
	10	A That is correct.	
	11	${f Q}$ So after that has happened and the officer	
	12	has photographed what we see in Image Number 2, what	
	13	happens next?	
	14	A Um, at this point, in theory and in terms	
	15	of normal protocol or in terms of how I approach the	
	16	case, at this point I will eventually myself start	
	17	looking at the body, start the initial external	
	18	examination that I spoke with you all at the	
	19	beginning where I am looking at the clothing that	
	20	the particular decedent has on. And just stating	
	21	how the body appears to me, at least initially, in	
	22	terms of clothing and that would be the next step.	
	23	Q Okay. And so let's move through the	
	24	photographs as we go and Image Number 3?	
	25	A Yes, this is Image Number 3.	
	ı		

Gore Perry Reporting and Video
314-241-6750 www.goreperry.com

FAX 314-241-6750

Page 71 So just describe, if you briefly want to 1 2 describe what we are seeing here? 3 This is just the decedent, Mr. Michael Α Brown, from the other side of his body, looking from 4 5 the other angle before the angle is just flip 6 flopped. So it is just the other side, you are 7 looking at the right side of his body as opposed to 8 the first image which was the left side of his body. Image Number 4? Okay. 10 Α Image Number 4 is just kind of an overall 11 view of Mr. Michael Brown's face as he is as soon as 12 the bag is removed to expose his face and rest of 13 his upper body. 14 And this up here, that's the placard that 15 you were talking about? 16 That's the identifying placard that was 17 prepared by St. Louis County Police Department, this 18 is Mr. Michael Brown's face. 19 Okay. And Image Number 5? 20 Α Image Number 5. So this is, we actually 21 have a ladder in the actual morque suite where you 22 are able to get a higher vantage point to be able to 23 get a larger view of the body. 24 So the officer in this particular 25 case has got on top of the ladder, he is doing an

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750 v

Page 72

- 1 overall of Mr. Michael Brown where you can see at
- 2 least down to the mid thigh, from the head down to
- 3 the mid thigh and seeing the arms and the torso, and
- 4 here is the identifying placard again.
- 5 Q Let me stop you here. As you say the body
- 6 was, you know, the bag was opened and you examined
- 7 it, are the clothes disturbed for the purposes of
- 8 these photograph?
- 9 A No, the clothes were not disturbed. This
- 10 is how they are maintained within the bag as soon as
- 11 it is opened.
- 2 So nobody lifted up the shirt, nobody
- 13 pulled the pants down, that's how it was when you
- 14 first saw it?
- 15 **A** Correct.
- Okay. At this point, are you the one who
- 17 puts the body onto the table?
- 18 **A** Um, so from here, he was placed on this
- 19 table initially within the morgue cooler, it is on
- 20 wheels. So when it comes out, he is staying on here
- 21 the entire time. So the entire autopsy is going to
- 22 start coming from the cooler, to this part where you
- 23 are seeing the pictures, to me actually doing my
- 24 incisions and remove organs, so he stays on this
- 25 table the entire time.

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

FAX 314-241-6750

	Page 73		
1	Q And Image Number 6, I believe?		
2	A Image Number 6. So this is still a view		
3	from the ladder where the officer is taking		
4	pictures, here is that identifying placard and here		
5	is a shot from the head would be here, the feet are		
6	down here and you can see the hands and you can see		
7	the rest of the lower extremities of Mr. Michael		
8	Brown and what he was wearing.		
9	Q Now, there is a white object that's		
10	affixed to his right ankle, do you know what that		
11	is?		
12	A These are added to the body just as		
13	identifiers to make sure we know whose who when they		
14	are coming in for examination.		
15	<b>Q</b> So that was placed on there by someone		
16	from the Medical Examiner's Office?		
17	A Correct.		
18	Q Not prior to him being		
19	A Correct.		
20	Q deceased?		
21	A Correct.		
22	Q And then the next one, Number 7?		
23	A Image Number 7, this is Mr. Michael Brown.		
24	Again, we can see the face and you can see the shirt		
25	that he was wearing, just a closer image of the face		

Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750

41-6750 www.goreperry.com

```
Page 74
     and upper body.
 1
 2
          Q
               Okay. Number 8?
 3
          Α
               This is number 8. So we are looking at
     the right side of Mr. Michael Brown's face and you
 4
 5
     can see the shirt that he's wearing and you can see
 6
     the right side of his face.
 7
               Number 9?
          0
 8
          Α
               This is Image Number 9. And this is
     predominantly, you know, this is the right side of
10
     the face here, the left side would be here off of
11
     the view of the picture. So you can see some of the
12
     injuries here to the right side of the face.
13
               Now, before I get too far ahead of
     ourselves here, do you have other images in this
14
15
     stack that better document the injury that you
16
     documented?
17
               Yes, I do.
          Α
18
               So you haven't, in other words, you
19
     haven't cleaned him up?
20
          Α
               No, that is correct.
21
               And at some point do you clean him up?
          Q.
22
               Yes, I do.
          Α
23
               And is it easier to visualize the injuries
24
     after that?
25
          Α
               That is true.
```

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 75 Okay. So we'll go through these and then 1 2 we will talk about the injuries when we have the 3 other photographs. And that is Number 9 is next, I think? Yes, it is. This is Number 10. 6 Yes, that's right. This one is Number 9, Q 7 you've got Number 10 up there on the screen? 8 Α This is similar image to what I just 9 showed. We are still looking at the right side of 10 the face and what has been introduced here by the 11 officer who is taking the photos. He has introduced 12 a ruler, the ruler is important for scale in order 13 to if you want to go back in time to say how big or 14 how small things are, that's the purpose of the 15 ruler that has been introduced into this picture. 16 Okay. And the next would be Number 11? Q 17 So this image is flip flopped a little 18 bit, mouth and the nose would be up here, the top of 19 the head is here, we are still looking at the right 20 side of the face and then you still have this ruler 21 that has been introduced into the picture. 22 Okay. Number 12? Q 23 This is Image Number 12. Now, we're 24 seeing a little bit more of the left side of the 25 face, but still predominantly focused on the right

Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750 314-241-6750 www.goreperry.com

Page 76

- 1 side of the face and once again the ruler is here
- 2 for scale.
- 3 **Q** Number 13?
- A This is Image Number 13. And here we're
- 5 looking at the right side of the face, getting a
- 6 little bit lower near the draw line, jaw line
- 7 depicting an injury here on the right side of the
- 8 face.
- 9 **Q** Number 14?
- 10 **A** This is Image Number 14. Similar to the
- 11 last image that I just showed you. The only
- 12 difference is the ruler has been inserted into the
- 13 photograph for scale. So we are looking at the
- 14 right side of the face, again, focusing on this
- 15 wound.
- 16 **Q** Number 15?
- 17 A Image Number 15. Flipped upside down, but
- 18 the mouth would be here, the top of the head is down
- 19 here, once again focusing on the right side of the
- 20 face depicting injuries.
- Image Number 16. So we're looking at
- the right side of the body, there was a similar
- 23 image of this before, but the feet are down here,
- 24 the head is up here, this is the right side of the
- 25 body.

Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750

Page 77 Now, in this image, the shirt of Michael 1 2 Brown, the shirt is actually above his --3 Α Nipple line. -- nipples? That was actually manipulated 4 5 prior to the photograph? 6 The shirt has been manipulated prior to 7 this point to better get an assessment of the body 8 looking for other injuries. Okay. Q 10 Α This is Image Number 17. So what we're 11 looking at here is once again, we are still looking 12 at the right side of the body, the feet would be 13 here, the head is up here, you have the right arm 14 being extended kind of perpendicular in a 90 degree 15 angle from the table. The hand is up here, the 16 shoulder would be down there. And we have these 17 wounds here near the forearm, this is the forearm. 18 Image Number 18, I believe? Okay. 19 This is Image Number 18. This is the 20 right forearm and we are looking at a wound here, 21 that is what is being depicted at this point. 22 Number 19? Q. 23 This is Number 19. We are looking at, do 24 you want me to just go through the picture or you 25 want me to reference them to my report at this

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Electronically signed by

Page 78 point, what is the best way? 1 2 This is prior to being cleaned up or not? 3 It is kind of in between. It is a little Α bit cleaned off in order to get a better shot. 4 Okay. 5 Q But we're still, the shirt is still on. 7 Let's go through these and then we will 8 start with the injuries as you've documented them. Okay. I can just go back and pull them A 10 out. 11 We can pull them out? Q 12 Α Okay. 13 And, Doctor, is it your habit when you 14 begin to describe injuries, do you like start from 15 the head and work your way down, or do you just pick 16 a certain way to describe them? 17 Um, my usual approach is, I kind of go in 18 terms of more significant injuries to the least 19 significant. So I typically will start with the things that look to me to be, you know, more 20 21 immediately impactful to the life of an individual. 22 So when I get to the situation where 23 I have wounds of the arms and things of that nature, 24 those would be further down in my report. That's my 25 typical approach when I do cases.

Gore Perry Reporting and Video
314-241-6750 www.goreperry.com

FAX 314-241-6750

d0e125b1-3744-4b93-80e6-f9de22cfbddf

Page 79 1 Okay. So we've scene the photographs of 2 the head and the side of the body, and now we are 3 looking at injuries to the right arm? 4 Α To the arm, yes. So this is the right 5 forearm and there is an injury right here where they 6 introduce the ruler scale in this particular photo. 7 This is Image Number 20. We're still 8 looking at the right forearm and this is on that previous photo, that's the wound that you were 10 seeing and this is a new wound here on the right 11 forearm. 12 MS. WHIRLEY: This is Sheila Whirley. 13 When you say the forearm, where are you speaking of? 14 The forearm, particularly is the region of Α 15 your arm between your wrist and your elbow. 16 MS. WHIRLEY: Okay. And those are two 17 separate wounds did you say? 18 Yes, they are two separate wounds. is one here and there is one here. 19 20 MS. WHIRLEY: Okay. 21 (By Ms. Alizadeh) At some point we will 22 describe them and what you conclude from those 23 wounds? 24 Yes, I will. Α 25 We are just going through the photographs Q

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 80 in order just so we can get them all in, all right? 1 2 And the next Number is 21, I think, 21, yeah? 3 Yeah, 21, and similar photos to what you Α just saw, but there's rulers here. You still have 4 5 that wound here on the forearm and then here is 6 another one on the right forearm. 7 Is this 22? Yeah. 8 0 This is Image 22. So we're backing up a 10 little bit and it is kind of hard, I can see it on 11 my picture, we will get a little bit closer. 12 head of Mr. Michael Brown is here, this is still his 13 right arm, and this is like his torso here. 14 I'm going to be focusing on there is a wound right 15 here on the middle part of his upper right arm. 16 There is a wound right here. 17 Number 23? 0 18 This is Number 23. And this is a closer Α 19 picture of the wound that I couldn't really show too 20 well on the overhead projector, but this is the 21 wound in question right here. So it is on the upper 22 portion of his right arm, but it is on the inside 23 portion of the arm, medial. 24 MS. WHIRLEY: That's the medial. 25 Α Yeah.

Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750

```
Page 81
 1
               MS. WHIRLEY: We talking about the armpit
 2
     area.
 3
          Α
               Close to that.
 4
                    This is Image Number 24.
                                               This is
 5
     just the same picture again, but you see the ruler
 6
     inserted for scale and this is the wound.
 7
                    This is Image Number 25, so the head
 8
     of Mr. Michael Brown is here, the hand, the right
     hand is out here, this is the shoulder area and we
10
     are looking at the medial or kind of the inner
11
     aspect of the right arm, but what I'm focusing on
12
     right here there's another wound right here in the
13
     bicep region on the right arm. And then there is
14
     also a tattoo here on the forearm that reads Big
15
     Mike.
16
               (By Ms. Alizadeh) This is 26 now?
          Q
17
               This is Image 26. And this is just a
18
     closer picture of that wound that I was showing
19
     before on this part of the bicep and on the right
20
     arm.
21
                    Image 27. Same image, again, of the
22
     wound of right bicep. You have a ruler introduced
23
     for scale.
24
                    This is Image 28. Backing up a
25
     little bit, but it is still the right arm,
```

Gore Perry Reporting and Video
FAX 314-241-6750 314-241-6750 www.goreperry.com

```
Page 82
 1
     Mr. Michael Brown's head is here and there is a
 2
     wound right here on the upper part of the right arm.
 3
                    So here, and specifically this region
     would be, we call it the ventral surface or anterior
 4
     surface or the front surface of the arm, but there
     is a wound here that I'm depicting right here.
 7
               Which arm is this?
          0
 8
          Α
               This is the right arm.
               So there is a tattoo we saw in an earlier
10
     photograph on the right forearm?
11
          Α
               Yes.
12
               That read downward, correct?
          Q
13
          Α
               Correct.
               And in this image there is another tattoo,
14
     that's not the same tattoo, correct?
15
16
          Α
               This is a different tattoo on the upper
17
     portion of the right arm. When I say the upper
18
     portion of the right arm, I'm talking from the elbow
19
     to the shoulder. So where your bicep would be and
20
     this is a different portion of the right arm, but
21
     there's a different identifying tattoo here.
22
               30?
          Q.
23
               Image Number 30. Showing that same wound
24
     on the front portion of that upper right arm, but
25
     the only difference is the ruler has been introduced
```

Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750

Page 83 into the photo for scale. 1 2 31. Q 3 Α Image 31. So now we are looking, the 4 shirt has been raised, we are still looking at the 5 right sides of the body. So over here on the right 6 lateral side of his chest, lateral is to the 7 outside, you have a wound right here and that's the 8 main thing that I'm focusing on at this point. 9 So this would be 32. This is just a 10 closer up view of that wound that I just showed you 11 previously here on this lateral part of the right 12 chest. And this is the nipple on right side. 13 33, it should be? Image Number 33. The only thing different 14 Α 15 in this photo is, the ruler has been introduced per 16 scale. Still looking at the same wound I just 17 showed you. 18 This will be Image Number 34. 19 here is Mr. Michael Brown's head, the shirt has been 20 raised up further in this particular situation. 21 That previous wound that I was just showing you was 22 down here, there is a new wound here on the, kind of 23 the upper part of right chest, and that's what I'm 24 focused on right now, a different wound? 35. 25 Q

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Electronically signed by

```
Page 84
               This is a close-up view of that wound that
 1
 2
     I showed you on the upper part of that right chest.
 3
               36.
          Q
               Image 36. The only difference is a ruler
 4
          Α
 5
     has been introduced per scale and there is also a
 6
     wound out here, this is like an abrasion here on the
 7
     right side of the chest. So there is two things of
 8
     interest here and here.
                    Image 37. We have switched over to
10
     Mr. Michael Brown's left arm and what, so his head
11
     is here, this is the left side of his body, this is
12
     the left arm and left hand that is still bagged with
13
     a brown paper bag. And there's an injury here on
14
     left forearm as well as there is a tattoo right next
15
     door.
16
                    So this close-up image of the left
17
     forearm showing that injury that I just mentioned as
18
     well as the identifying tatoo.
19
               Just for the record, that was Image 38.
20
          Α
               Image 39. Only thing different is the
21
     introduction of the ruler, still showing that injury
22
     on left forearm as well as the identifying tattoo.
23
                                                   Now,
24
     you are classifying this as an injury rather than an
25
     wound, any significance to that?
```

Gore Perry Reporting and Video 314-241-6750 www.goreperry.com

FAX 314-241-6750

Page 85 1 I'll do a little better with kind of 2 keeping things consistent once I get to one place, 3 but injury and a wound, they are similar. eventually when I get to the point I will be able to 4 5 break it down for you, like this is an abrasion, 6 this is a gunshot wound, and I will separate all of 7 those out for you guys so you won't be confused. 8 I'm just trying to get through them, I'm sorry. 9 Thank you. 10 Q (By Ms. Alizadeh) At this point you are 11 documenting any injuries, no matter how they 12 occurred? 13 Or defects. They are all kind of the same Α 14 There are things that is happening to the thing. 15 body that he wasn't born with, so. 16 If he had an appendectomy scar --Q 17 I would mention that. 18 With a heal injury, you would still 19 document that? 20 Α I would mention that, yes. 21 So I think we just did that one, didn't Q 22 I probably handed it back to you. I thought 23 you would want it. 24 Number 40. So this is still the left arm, Α 25 the bag has now been removed from the hand and

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 86 that's the main difference with this photo. 1 2 This is Image 41, this is still left 3 arm, the head is here, this is showing the dorsal, or the back side of the hand after the bag has been removed. This is 42. Now, I'm flipping back 7 over to the other side of the body and this is going 8 to be his right hand and the bag has been removed and here you can see an injury. 10 I think 43? Q 11 Yes, 43. Image 43. This is the back side 12 of the right hand and this is the, you know, the 13 right forearm, right hand, this is after the bag has 14 been removed from the hand. 15 Image 44. This is just a closer view 16 of the injury to the right hand and this is the 17 ventral surface of the hand or the palmar surface of 18 the hand. And that's the particular part that we 19 are looking at. 20 This is a close-up of the ventral or 21 palmar surface of the hand. This is the right hand, 22 this is the thumb and this is the particular area of 23 interest, there is an injury. 24 Image 46. Only thing different here 25 is the introduction of a ruler. We are still

> Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750

Page 87 looking at the right hand looking at that surface 1 2 where this injury is. 3 This is 47. So in terms of getting a 4 different take on the hand and the injury, the hand 5 has been cleaned off at this point. So I have 6 removed some of that blood and material that was 7 stuck to the hand. So this is a cleaner image of 8 the hand after the bag has been removed and after it has been kind of cleaned off and we are still 10 looking at the palmar surface or ventral surface or 11 front surface of the right hand. 12 Before 13 you washed the hand, you collect under his nails or 14 whatever it is he has gunpowder or skin? 15 Α A good question. The question raised was, 16 before I am starting to wash or clean the hand, do I 17 do any type of forensics or other biological 18 evidence from the hands, and I do. 19 Once the bags are removed, they are 20 documented with pictures and in this particular 21 case, I did do scraping underneath the nails to get 22 material which is then submitted for analysis. 23 I also took fingernail clippings from both hands, 24 which is submitted for evidence. 25 And the actual clipper that I

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Electronically signed by

Page 88 actually used to remove the finger nails, that is 1 2 also submitted as evidence. So all of those things 3 are done before the hand has been altered or washed. And then at that point once I have taken the 4 5 fingernail clippings and the scrapings, then I go ahead and wash the hands and then continue my 7 process. 8 (By Ms. Alizadeh) So the clippers that you 0 9 used to clip the nails, those are one use clippers, 10 they are sterile, correct? 11 Α Correct. 12 And then regarding, let's talk about that injury to the right palm. We have seen in the 13 photograph that you have washed it off so you can 14 15 get a better look at the injury, correct? 16 Α Correct. 17 Now, at some point you took, you cut a piece of that wound out; is that right? 18 19 Α That is correct. 20 Q But you haven't done that at this point? 21 Α No, I have not. 22 What do you wash the wound with? Q 23 Usually just water, warm water and a towel 24 or a rag, or sometimes they have like kind of like a 25 bristle type brush to be able to scrub off that

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

```
Page 89
     blood that is kind of stuck to the hand.
 1
 2
     pretty resilient, sticks pretty good. So just using
 3
     water, warm water and scrubbing, that's how we
     remove it.
               No chemicals?
          Q
          Α
               No.
 7
               Nothing like that?
          Q
               No.
 8
          Α
               Okay.
          Q
10
                                             Water from
                              :
11
     the sink or?
12
               Water from the sink.
          Α
13
               (By Ms. Alizadeh) Okay. So now back to
     the image that you last showed?
14
15
          Α
               We are at 48 now. So this is still the
16
     right hand, the hand has been cleaned, it is just a
17
     closer view of that injury to the palmar surface of
18
     the right hand.
19
                    This is Image 49. So only thing
20
     different, a ruler has been introduced for scale.
21
                    So this is Image 50 and now we are
22
     back on the left side of the body. And this is the
23
     left hand and that's that wound or injury I was
24
     showing you guys earlier. I'm trying to focus on
25
     the thumb here, there is a little abrasion there.
```

Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750

314-241-0730

Page 90 Now, let me ask you, let me put this back 1 2 up here. We see the position of the arm and the 3 wrist and the hand is bent. Uh-huh. Α 5 0 Is that being held in that position or is 6 that the way the body is fixed? 7 Most likely some of it is me putting a Α little bit of tension onto the hand to be able to 8 better see the particular injury that I'm looking 10 for, but at the same time there is also particular 11 ways that the body, it is called rigor mortis, the 12 body will be kind of fixed in a certain position. So there is mixtures of kind of these two events 13 14 happening at the same time. 15 The natural fixation or rigor mortis 16 of the body, plus me putting tension on it to get a 17 better look at the injury that I'm trying to show in 18 this photograph. 19 Okay. So the next photo is? 20 This is Image 51. So this is a close-up 21 of that left hand and it is just this little injury 22 right here. Technically it is an abrasion, this is what I'm focusing on right here. 23 24 51? Q 25 Α This should be 52.

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 91 52, I'm sorry. 1 Q 2 Α Image 52. Still showing that little 3 injury/abrasion there on the hand. And the only difference is the introduction of the ruler for scale. This is 53. So we are still looking 7 at the left hand and I've, I'm starting to pull this 8 fifth finger or the pinky finger on the left hand, I'm trying to expose a little area of discoloration 10 on that hand. 11 Showing you 54. So this is that 12 fifth finger, that pinky finger on the left hand and this is this little area of discoloration, that's 13 14 all I'm focusing on in this photo. 15 Q Just so we know, did you determine was 16 that an injury, that little area of discoloration? 17 No, I don't feel that it is. Α 18 Okay. Q 19 This is 55. Α 20 Q It is getting tired. 21 There it is. That's just that little area 22 of discoloration on the left hand right here by the 23 pinky finger. For anatomical purposes, this is the 24 dorsal surface of the finger, the posterior or back 25 side of the finger.

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

```
Page 92
                    Image 56. So we're looking at
 1
 2
     Mr. Michael Brown's head is here, we are looking at
 3
     the dorsal or the back side of the left hand and
     there's an injury right here.
 4
 5
          Q
               And for the record, or just so we go
 6
     through this, would you consider this an abrasion?
 7
               Yes, I do.
          Α
 8
          0
               Okay.
               As previously mentioned, this is just a
          A
10
     closer, I'm sorry, Image 57. This is a close-up
11
     view of that previous abrasion here on the dorsal
12
     aspect of the posterior of the back side of the left
     wrist and there's an abrasion there.
13
14
                    Same image again of that abrasion on
15
     the left wrist, back side posterior, just only thing
16
     different is the introduction of a ruler.
17
               And that's 58?
          0
18
          Α
               Sorry.
19
          Q
               That's okay. I'm trying to catch it when
20
     I can.
21
               59.
          Α
22
               Okay. Now, let me stop you here.
          Q
23
     this point you have documented all the injuries that
24
     you can see and?
25
          Α
               There is still one that I can see right
```

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

```
Page 93
 1
     now.
 2
               Okay.
          Q
 3
          Α
               There is another one that I have to
     expose.
 5
          Q
               Okay. But at this point now, you remove
     the clothing?
 7
          Α
               Yes.
 8
               All right. And is the clothing seized and
     packaged by a police officer?
10
               Yes, the clothing is seized and packaged
11
     as evidence to the officer.
12
               Now, let me ask you this. At some point
          Q
13
     is his clothing searched while he is in the morgue.
14
              Yes, it is.
          Α
15
          Q
               And who does that?
16
               Usually the morque attendant will search
          Α
17
     the clothing.
18
               Were you present when that was done?
19
          Α
               I do not remember.
20
               Okay. And so if there was anything that
21
     was inside the clothing or attached to the clothing,
22
     that would have been removed by the morque
23
     attendant?
24
              That is correct.
          Α
25
               And so who actually removed the clothing
          Q.
```

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

```
Page 94
 1
     from the body?
 2
          Α
 3
               And is the clothing removed by cutting it
          Q
     off?
 5
          Α
               Um, it depends, but in this situation it
     was just removed normally as you and I would take
7
     off our clothing. The only time the clothing is cut
 8
     is if it is too difficult to remove it, but in this
     situation the clothing was not too difficult to
10
     remove, so it was not cut.
11
               Okay. And after the clothing is removed
12
     and that's seized and packaged by someone else, any
13
     items that were inside the clothing is taken care of
     by someone else, do you then clean up the body?
14
15
          Α
               Yes, yes, I do.
16
               And so this next image, which I can't
17
     remember what number that is?
18
               We are on 59.
          Α
               Okay. This is now the body after the
19
20
     clothing is removed and the body has been cleaned of
21
     excess blood and so forth, correct?
22
               It is the best possible attempt to do so.
          Α
23
               Okay. Now, let me ask you this. I don't
24
     know if I'm jumping back or forward here, but
25
     initially in your examination, I don't know if you
```

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Electronically signed by

```
Page 95
     do this with clothing on or without the clothing on,
 1
 2
     but do you weigh the body?
 3
          Α
               Yes, I do.
               How much did he weigh? Do you have your
 4
     report there if you want to refer it?
 5
               Specifically 289 pounds.
          Α
 7
               Is that without clothing or with clothing?
          Q
 8
          Α
               That's with clothing.
               And then do you also measure the height of
10
     this person?
11
          Α
               Yes, we do.
12
               And how tall was Michael Johnson?
          Q
               77 inches.
13
          Α
14
               And I'm not good at math, but is that
     6 feet 5 inches?
15
16
          Α
               Yes.
17
               I had to use a calculator before when I
          0
     did that, I'm a lawyer.
18
19
          Α
               Yes, it is.
               6'5". Were you told how old Michael Brown
20
21
     was or his date of birth?
22
               I was told how old he was.
          Α
23
               And how old was he?
24
          Α
               18.
25
               Okay. And in examination of his body, do
          Q
```

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 96 you make any type of conclusion about does he appear 1 2 to be his stated age? 3 Α Yes. And developmentally? 5 Α Yes, I do. That's the general approach. I do make that reference one, there are some facial 7 injuries, but there is still enough to be able to 8 make that assessment. Okay. Now, as we go forward with these 10 photos, the wounds that you already documented will 11 be photographed again and now we will go and 12 describe them. 13 Α Okay. 14 Q And you document them in your report, 15 correct? 16 Α Yes. 17 And so when you get a photograph, let's 18 say the name of the image, and then in your report 19 you have these injuries as number one, number two 20 and so forth. So let's refer to them like that. 21 if you want to go along in the report, ladies and 22 gentlemen, if it makes it easier. 23 I'm trying to see when I get, we're still 24 kind of going back through and looking at tattoos 25 and cleaning off stuff.

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

			Page 97	
	1	Q	Okay.	
	2	A	When I get there I'll do that.	
	3	Q	All right.	
	4	A	This is 59.	
	5	Q	59, and this is the first picture that	
	6	we've see	n where his clothing is removed, correct?	
	7	A	Correct. So here we have the head, there	
	8	is the fe	et, Mr. Michael Brown's clothing has been	
	9	removed.	Once again we have that identifying	
	10	placard and this is his body without the clothing.		
	11		This is Image 60. We have the	
	12	identifying placard, this is Mr. Michael Brown, this		
	13	3 is looking at the right side of his body with his		
	14	clothing removed, feet are here, head is here, that		
	15	right arm is extended coming out at you.		
	16	This should be Image 61. This is		
	17	Mr. Michael Brown, clothing removed and then once		
	18	again the officer who is taking the photos, he has		
	19	ascended upon the stair step ladder to get an		
	20	overall view of Mr. Michael Brown without his		
	21	clothing.		
	22		Image 62. This is showing the lower	
	23	half of M	r. Michael Brown's body without the	
	24	clothing	and here is the legs and the lower portion	
	25	of the ab	domen.	
I				

Gore Perry Reporting and Video 314-241-6750 www.goreperry.com

FAX 314-241-6750

```
Page 98
 1
                    This is Image 63. Looking at the
 2
     right side of the body and in here getting a better
 3
     visualization of one of those identifying tattoos on
     the, kind of the upper portion of the right arm.
 5
          Q
               Now, just for clarification sake, what is
 6
     this thing right here?
 7
               That's just a paper towel that is
 8
     sometimes used to remove blood or to get rid of
     anything that's obscuring anything that I'm trying
10
     to see.
11
                    This is Image 64. And this is just a
12
     close-up of that tattoo, you know, with the blood
13
     that was obscuring it removed from the upper right
14
     arm.
15
                    This is Image 65. This is a better
16
     image of the forearm with that identifying tattoo,
17
     still see a wound here near the bicep and this is
18
     the right arm and then that wound of the right hand.
19
                    This is 66. This is just a better
20
     image of that identifying tattoo on the right
21
     forearm, Big Mike.
22
                    This is 67. This is the left arm
23
     now, the head is here, the feet would be out here,
24
     this is the left arm and we are looking at the
25
     forearm with the identifying tattoo and that injury
```

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

```
Page 99
 1
     that you guys saw earlier.
 2
                    This is 68. So this is the left
 3
     forearm with the identifying tattoo and then there
     is this linear abrasion out here on the left
     forearm. And this is the front part or ventral part
     or anterior part of the forearm.
 7
                    This would be 69. And with all cases
 8
     we have it is important to look at the back side of
     the body as well as the front, and that involves the
10
     external examination. So here Mr. Michael Brown's
11
     body is being rolled by the autopsy technician
12
                  so we can document that there are no
13
     injuries to the back side of the torso.
14
               You did not find any injuries to the back
     side of his torso?
15
16
               No, I did not.
          A
17
               How about the back side of his buttocks or
          0
18
     his legs?
19
          Α
               No, I did not.
20
               Now, just for descriptive purposes, you
21
     talk about front side and the back side or anterior,
22
     posterior, ventral, dorsal, those are all
23
     interchangeable terms?
24
          Α
               Yes.
25
               When you are talking about your arms,
          Q
```

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 100

- 1 because your hands can move from one way or another
- 2 anatomically, would it be correct that in an
- 3 anatomical diagram the person would be standing
- 4 upright and their palms would be forward?
- 5 **A** That is correct.
- 7 palm, that would be a front injury to the front of
- 8 the hand, anterior, ventral?
- 9 **A** It is still ventral. The front would be
- 10 anterior, it could be ventral, all of those are
- 11 interchangeable terms or palmar, they are all the
- 12 same, all the same thing. Just depicts the front
- 13 portion of that body part in the standard anatomical
- 14 position. And when I document the injury, it is
- 15 always from this position. This is my reference
- 16 point. (indicating)
- 17 **Q** So when you're talking about, for example,
- an injury to the forearm, your forearms move when
- 19 you turn your palms outward, correct?
- 20 **A** Correct.
- 21 **Q** So when you are talking about front or
- 22 anterior, you have to imagine that this is a person
- 23 whose palms is facing out. We might think this is
- 24 the inside of our arm, he doesn't describe it that
- 25 way. So for clarification, imagine that your arms

Gore Perry Reporting and Video 314-241-6750

Page 101 are in this position like he describes where the 1 2 wounds are on the arms, not so for the legs because 3 the legs just stay the way they are. Α The way they are, yeah. Q Sorry. No, that's fine, excellent point. Α 7 I think I can start trying to describe some of these. 8 So we're going to start with some wounds 10 now? 11 This is Image 70. And the wound I will be 12 talking about first will be Number 9. 13 The next photo is going to be closer, 14 but just to kind of let you know, so this is Number 15 9 that we're looking at. Specifically I term this 16 is medial ventral right forearm. 17 So what that means is, I will stand 18 up so you guys can see. So the normal anatomical 19 position is like this. So when I'm saying medial, 20 medial is in reference to, you know, draw an 21 imaginary line down the middle of that particular 22 extremity, medial is to the inside, lateral is going 23 to be to the outside of that imaginary line. 24 Ventral, as we have already discussed 25 before, is talking about the front part of that

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

Page 102

- 1 particular extremity or whatever we are looking at.
- 2 It is also synonymous with anterior, front or
- 3 whatnot.
- 4 When I say medial ventral, or right
- 5 forearm, so talking about something that is off the
- 6 midline inside, which makes it medial. Ventral
- 7 meaning it is on the front and depicting a
- 8 particular area which is the right forearm. So
- 9 that's the terminology. So, and we're talking about
- 10 this wound right here.
- 11 So this next image, which will be 71,
- 12 showing a close-up of wound Number 9.
- So a lot of this is just jargon for
- 14 me to be able to say where it actually is on the
- 15 body in terms of reference points. So with all of
- 16 my gunshot injuries, I like to have two reference
- 17 points.
- One of them is a fixed point, so in
- 19 this particular situation, I find something is going
- 20 to be the right elbow and I'm going to say how far
- 21 above or down it is to be able to specify, you know,
- 22 the upper dimension or the lower dimension, which is
- 23 kind of just your natural body axis.
- 24 So in this particular situation this
- 25 wound is 15 centimeters below this right elbow, and

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Electronically signed by

Page 103 then you want to be able to say where in the midline 1 2 that is and that lets me know medial or lateral. 3 So in this particular situation, this particular wound is 5 centimeters to the left of the 4 anterior midline of the right forearm. 6 So when I say left, it is from my 7 left, not from you looking at me. 8 From the body's left? From the body's left. So this is the 10 right side of my body, since I'm going to the left, 11 I'm going over here, that's how it gets to where it 12 is supposed to be. 13 So from that point, what I want to do after that is, I measure all of the wounds in terms 14 15 of dimensions to see how big it is. In this 16 particular situation it is about 2 centimeters wide 17 as it is long. So it is 20 millimeters by 20 18 millimeters or 2 centimeters by 2 centimeters, 19 whatever you want to use. It is the same changeable 20 amount. 21 Once you do that, you want to look at 22 the edges of the wound, meaning why that is 23 important, with exit wounds as well as entrance 24 wounds, there is particular identifying 25 characteristics that you can see on a case by case

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Electronically signed by

FAX 314-241-6750

Page 104

- 1 basis. They are not always there, but there is
- 2 certain things that kind of give me inside track to
- 3 kind of figuring out what it is.
- 4 So in this particular situation when
- 5 I'm looking at the edge of this wound, it is more
- 6 irregular, it is kind of like, you know, someone
- 7 kind of took a bite out of it, it is not a nice
- 8 smooth circle or oval, it is more irregular. These
- 9 edges are kind of tattered and look different.
- 10 So I specify how that looks to me.
- 11 So in this particular situation I say that there's
- 12 irregular edges, the wound is irregular and it is
- 13 also clean, meaning that I don't see any type of
- injury to the actual edge of the wound.
- Exit wounds, classically, this is
- 16 kind of how they look. So once all of that is done,
- 17 I'm able to say at this point that this is an exit
- 18 wound.
- 19 So once I'm familiar with this as an
- 20 exit wound, eventually I'm going to want to try to
- 21 find out where the entrance wound is.
- So we know where we are on the arm,
- on the right arm, we are on the inside portion of
- 24 the arm and we are off medially of that midline. So
- 25 this is the exit wound of that right forearm.

Gore Perry Reporting and Video 314-241-6750

Page 105 Let me ask you, Dr. this 1 2 discoloration right here at about 10:00 on that 3 picture, what does that mean? That's just blood, dried blood. 5 Q Okay. When the blood coagulates, it darkens, 7 that is what a clotted piece of blood looks like 8 after it sits there too long, that is what that is. In your report when you describe these 10 various wounds or injuries, you talk about there 11 being no stippling and no soot present? 12 That is correct. 13 And you didn't find any stippling or soot on this wound, but why don't you explain to them 14 15 what that is and what that means to you? 16 All right. So the concepts of stippling Α 17 and soot. Stippling, so let's just take a step 18 back. 19 You have a bullet and it's fired out 20 of a gun, a bullet is made up of like a primer, it 21 is kind of the igniting substance that's within the 22 actual bullet. And when that hammer of that gun strikes that primer, kind of combusts and kind of 23 24 explodes, for lack of a better word, and then lights 25 the gunpowder that's within the actual bullet. That

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

Page 106 ends up being propelled and that's what allows the 1 2 bullet to come out of the barrel of the gun. 3 The concept with stippling is that 4 when that primer ignites that gunpowder, in theory 5 it all combust or burn, thus ultimately turning into 6 soot, but when it doesn't turn into soot, you still 7 have unburned particles that are real small, but due 8 to the fact that they are being projected or shot out of that barrel of the gun, they are able to 10 injure the skin. And those injuries of the skin is 11 called stippling. So you will see little small 12 individual dots around a wound. 13 What is important about the stippling is it helps you with the range of where that weapon 14 15 is fired from. 16 So just roughly it depends on gun to 17 gun, bullet to bullet, but roughly if you see 18 stippling, you can say that that gun was fired a 19 foot and a half to 3 feet to that particular part of 20 the body. So that's what stippling is good for. 21 Now soot is, what I just kind of 22 briefly mentioned, is when that primer kind of 23 combusts, then lights that gunpowder, that gunpowder 24 thus combusts and then it turns into soot, that's 25 going to come out of the gun as well. When that

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Electronically signed by

Page 107

- 1 comes out of the barrel of the gun that can be
- 2 deposited on the skin.
- 3 The concept of soot is when you see
- 4 soot on the body, you are looking at something
- 5 that's closer than a foot and a half. You start to
- 6 look and say that particular bullet was probably
- 7 fired within 6 to 9 inches, or 6 to 12 inches of the
- 8 actual body. So that's the importance of mentioning
- 9 do I see soot, do I see stippling, so I describe
- 10 what they are, and I describe what the importance of
- 11 them is.
- 12 So at the end of the day, it is
- 13 really helpful with range of where that particular
- 14 projectile was fired from the gun.
- 15 **Q** And in this case, you do describe in each
- 16 wound whether there was present stippling or soot,
- 17 but this being an exit wound Number 9, you wouldn't
- 18 expect to see any soot or stippling knowing it is an
- 19 exit wound, correct?
- 20 **A** Correct, wouldn't expect to see that, so
- 21 that's another thing to let you know that okay, this
- is most likely an exit wound. We don't see those
- 23 features, you don't always have to see them. That
- 24 is something that kind of puts you in that category
- 25 we are not dealing with a close wound.

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Electronically signed by

```
Page 108
1
                                                 Is there
 2
     any question ever at this particular point in the
 3
     examination that those wounds were caused by a
    bullet or anything else?
 4
 5
          Α
               Um, for me for the amount that I've seen,
     I've seen enough that I myself know that it was a
7
    projectile, yeah.
 8
               (By Ms. Alizadeh) You will describe in a
    minute the corresponding entrance wound, but
10
     sometimes it is probably just a layman's term, we
11
     call that a through and through where a projectile
12
    passes entirely through the body. Is that something
13
     you've seen in gunshot wounds?
14
          Α
               Yes.
15
          Q
               Okay. And knife wounds would look
16
    different to you, correct?
17
               Yes, that is correct.
18
               All right. So now have you described
     everything?
19
20
               Yes, so we've described all of the
21
     important features for this particular wound.
22
     convinced that this is an exit wound, so I know that
23
    there is an entrance wound somewhere else on the
24
    body, so that's my next step eventually when I get
25
     there.
```

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

Page 109 This is 72. This is just showing 1 2 that same wound of the medial ventral right forearm, 3 like the ruler has just introduced into this picture 4 just for scale. 5 I apologize, these things are hopping 6 all over the place when we take pictures, we just 7 kind of take and keep going. We will get it 8 altogether. For the sake of going through this and 10 we've already discussed it, we are going to show 11 every photograph and they are numbered. 12 Okay. Α 13 So these numbers don't necessarily depict the numbers that you are photographing, or 14 15 describing, so obviously we started with Wound 16 Number 9. So I apologize, it might get kind of like 17 a puzzle. 18 If you have something you want to talk 19 about, just write it down and we can pull it back 20 out and talk about that, I have no problem. 21 All right. Number 73. So we're 22 looking just to give you reference before I find the 23 right number on our sheet, this is his right arm we are looking at this wound here, there is a right arm 24 25 pit. And that one is actually, this should be

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

```
Page 110
 1
     Number 7.
 2
          Q
               Seven or Six?
 3
               MS. WHIRLEY: Is that an exit wound?
               This is Number 7.
          Α
               MS. ALIZADEH: Okay.
               MS. WHIRLEY: And that's an exit wound?
 7
          Α
               Yes, I'm about to describe it. So we're
 8
     looking at Number 7. So the particular location is
 9
     the upper dorsal right arm.
10
                    So what we are talking about is,
11
     remember I was telling you about the forearm is
12
     going to be from the wrist to the elbow, the upper
13
     arm is going to be from the elbow to the shoulder.
14
     So upper arm, that's where we are at. And then when
15
     I say dorsal, and dorsal means the back part.
16
                    So we are looking, you know,
17
     anatomically speaking, if you turn around like this,
18
     if you look back here, this is kind of where this
19
     wound is. It is here. So that's the dorsal part of
20
     the upper part of the right arm. And then that's
21
     where we are at right now in terms of position.
22
                    Now, once you look at it, what is
23
     important is now I go through that same type of
24
     algorithm that I had before. You want to look at
25
     the contour of it, so this one is a little more
```

Gore Perry Reporting and Video 314-241-6750 www.goreperry.com

FAX 314-241-6750

Page 111 stretched out, more linear as opposed to that other 1 2 wound, which is a little more irregular. Not really 3 a big deal, but you still want to take the same type of approach in describing what you see. 5 So this particular one, that's kind 6 of the shape and it's length is 18 millimeters by 10 7 milliliters. In terms of location, I do that again, 8 two fixed points. When I say how far it is from the shoulder and say where it is from the midline, I've 10 done that. 11 Then you want to assess the edges, 12 meaning assessing the edges is determining how they 13 appear to you because that is going to be important 14 to determine whether it is entrance or exit. 15 In this particular situation, they 16 are a little bit irregular, but there is no type of 17 additional margin around it, it is still a clean 18 wound. 19 So when I say clean, there is no contusion, there is no abrasion around it, it is 20 21 just coming, coming right back out the skin, making 22 really no abnormalities to it. 23 So with me seeing that, this once 24 again let's me know that this is another exit wound, 25 but on a different part of the body. I know that I

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Page 112 1 have an entrance wound someplace else. So this 2 would be Number 7 where it is located. Do I have 3 any questions about that? 4 So what explains 5 the elongated hole rather than a round hole? 6 A lot of times it is the actual tissue of 7 where it is. So if you have an area where there is 8 more fat on the arm, this particular area you can get a more elongated wound. 10 You have different types of soft 11 tissue make up there. So depending on where you get 12 hit, you are going to see different types of orientation of the wound or contours of the wound. 13 14 So that is kind of a more fatty area of the body, so 15 it is going to stretch out a little bit more as 16 opposed to a place that's tighter, where the skin is 17 tighter, you are likely going to see a different 18 type of wound and more irregular. 19 If you feel your forearm yourself and 20 you kind of tense it up, your forearm is lot tighter 21 as oppose to the back side of your arm. 22 This is Image 74. And this is the 23 same exit wound and we're looking, only difference 24 is we just introduced the ruler for scale. 25 This is Image 75. So we're looking

Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750

Page 113

- 1 at Wound Number 11 on the autopsy report. We are
- 2 looking at the ventral surface of the right thumb,
- 3 or near the ventral surface of the right thumb. So
- 4 anatomical position like this. So we are looking at
- 5 the front part, anterior part of the ventral part of
- 6 the hand. We are looking at the right hand is where
- 7 we are at right now.
- 8 This is 76. There is a lot going on
- 9 here and I will just try to do it step by step.
- 10 Wound number, so this is 76, Wound Number 11. So we
- 11 are looking at the ventral surface of the right
- 12 thumb.
- So in terms of describing this one,
- 14 this wound has looked a little bit different than
- 15 the two that I just kind of showed you guys earlier.
- 16 This one is more elongated, meaning it is more
- 17 stretched out as opposed to being like a circle.
- 18 When you look at it, what is
- 19 important to realize is appreciating the elongating
- 20 nature and then two, there's these little tags that
- 21 you see, kind of like little sharks teeth. These
- 22 tags are ultimately going to be important for
- 23 determining the direction that you can say the
- 24 bullet is coming out of the gun and how it struck
- 25 his hand, but I will get to that part after I kind

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Page 114

- 1 of describe it.
- 2 The fact that I'm looking at this
- 3 kind of elongated wound, I'm seeing this kind of
- 4 shark teeth, call them skin tags. I know that this
- 5 is like a graze wound or a tangential wound.
- 6 Tangential just means that it is going parallel to
- 7 the surface of whatever it is striking.
- 8 So in this particular situation, got
- 9 that, and then you want to measure it, which we've
- 10 done. And the measurement is just five centimeters
- 11 by two centimeters, and it is orientating kind of a
- 12 12 o'clock to 6 o'clock fashion. It is 12 o'clock
- 13 to 6 o'clock based off the anatomical position. So
- 14 we are kind of going from down, or down to up or
- 15 however you want to do it, it is no big deal.
- All right. What is important about
- 17 these skin tags is how it lets you know what
- 18 particular way the bullet is coming from. The skin
- 19 tags point towards where the gun, the barrel of the
- 20 gun is.
- 21 I'll come up here and show you. If
- 22 the gun, the barrel of the gun is pointed this way,
- 23 this is the way that the bullet is going to be
- 24 traveling. These skin tags point back towards the
- 25 barrel of the gun. You can't refute it. It is what

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Page 115 These tags are pointing back this way. They 1 2 are pointing towards this. 3 So I know for a fact that the bullet is coming this way. It is going like that. (indicating) 6 Now, in terms of the anatomical 7 position of the body, in order to keep both 8 reference points the same, I'm still like this. the reason that my trajectory is up is because it is 10 just going up based on what the body is going 11 towards the head because I'm like this. 12 In real life did it go up? Can't 13 really say that, but just having the anatomical 14 position of how I have to stay static so that I can 15 have a reference point every time that I can discuss 16 these, you have got to keep yourself like this and 17 my direction of upward is purely based off of being 18 like this. I want you to make sure that you 19 understand that. 20 So what I know at this point is I 21 have a tangential wound, I know which way it is 22 going, I know which way it is coming from. 23 Now other things that are important 24 at this point with this wound, I can see it better 25 on here. It is better to see the discoloration that

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

```
Page 116
     you have. You can kind of see, it is kind of dark
 1
 2
     here, kind of black, but here is it is a lot darker.
 3
     Can I show?
 4
                    If you look at the hand, and I will
 5
     kind of walk around. If you see that material in
 6
     there, you can't really appreciate it too well on
 7
     the screen, but that's something where we are
 8
     talking about soot and talking about stippling, this
     is where this is coming into play. This isn't
10
     stippling, the stippling, I told you, is unburned
11
     particles that cause the little dots on the skin.
12
     This is soot, which is the burned gunpowder that's
13
     coming out of the barrel of the gun and it is being
14
     deposited on the skin discoloring it and leaving it
15
     there. So there is soot there on the hand.
16
               MS. WHIRLEY: So what does soot look like?
17
                                So that means that it was
18
     a close range to the gun? This entered his body or
19
     grazed his body at a closer range to the gun than it
20
     would be if it was stippling or nothing at all?
21
               Correct.
          Α
22
               MS. WHIRLEY: What does soot look like?
23
               Soot looks like, like you get charcoal and
24
     kind of the stuff that you have left over that is
     just black matter. That's what, it is just
25
```

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750 v

```
Page 117
     particle. So it is an organic particle left over.
 1
 2
     It is going to leave a smearing or something on the
 3
     hand.
               (By Ms. Alizadeh) Kathi Alizadeh. Dr.
          Q
 5
               you did examine a piece of that tissue
     from that wound under the microscope; is that
 7
     correct?
 8
          Α
               Yes, I did.
               I mean, we can go ahead and talk about
10
     that now since we are talking about this wound.
11
               Can I make sure they all see good, so then
12
     I will talk about that.
13
                                                 So front
     of the body facing this way, it can also that it
14
15
     entered, can it be entered this way too?
16
               Well, just how you did it, it has to be
          Α
17
     like that. If you are sitting there, I have to be
18
     above like that for it to come.
                                       That's the only way
19
     it can come, it can't come any other way, or if you
20
     are like this or you are like that or you are like
21
     this. There's lots of different ways regardless, it
22
     has to be coming at you that way, you can't get it
23
     coming this way.
24
                               Okay.
25
          Α
               It has to come from this way, this way,
```

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

```
Page 118
 1
     something like that.
 2
                                                 What
 3
     again is the maximum distance you would expect to
     see soot?
 5
               Soot, it depends, it is a gun by gun
 6
             It is a primer, gunpowder thing, but about 6
 7
     to 9 inches roughly where the discharge of that
 8
     material would be left on the body.
                                Is there a middle
10
     distance, like if his hand was on the end of the
11
     barrel, would you still see the soot, so it is up to
12
     that 6 to 9 inches?
13
               You would still get some discharge of
     material if his hand was there, but the problem with
14
15
     that is, so when you say hand, you mean like?
16
                               He was reaching out
17
     struggling for the gun?
18
               You are like that, the wound is going to
19
     look different. Now we are dealing with a contact
20
     wound. If you are talking about actually physically
21
     holding something, that's something extra and
22
     different.
23
                    And for myself, let me take a step
24
     back about the soot and stippling. Stippling, when
25
     I see it, that lets me know that I'm dealing with an
```

Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750 314-241-6750 www.goreperry.com

Page 119 1 intermedia type of wound, meaning that it is like 2 maybe like a foot and a half to 3 feet away. 3 have indeterminate wounds where I don't see stippling, don't see soot, I do know it's an 4 5 entrance wound, so there is nothing extra on the 6 wound to let me know about closeness. So in that 7 situation, those are called indeterminate. 8 probably 3 feet or further away, that's all I can 9 say. 10 Soot, like we just discussed, we're 11 talking about 6 to 9 inches. Contact wound, if it 12 is a contact wound, so we are talking about we are 13 up close and personal to whatever it is. 14 So with that you are going to see 15 different type of characteristics on the scene, you 16 are going to see more searing or burning of that 17 skin because there is hot particles and gas escaping 18 from that weapon that are going to cause alterations 19 of that skin surface. 20 And when you actually examine the 21 wound, you may see that soot type material deposited 22 deep into the tissue or be black and deeper on the 23 inside than the outside, or you may see a muzzle 24 imprint. A muzzle imprint is where the end of the 25 gun actually is so close to the skin surface or body

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

www.goreperry.com

Page 120 surface where it leaves the end part of that barrel 1 2 imprint on the hand. So those are some of the 3 things you look for a contact wound. So closest thing you've got of a 4 5 contact wound, next is a close range wound with the 6 stippling, I'm sorry, soot. And then intermediate 7 is where we are dealing with stippling, and then the 8 last thing is indeterminate, too far away, you can't determine. That's kind of my range of wounds and 10 what the actual terms of contact, close, 11 intermediate and indeterminate mean. 12 This is 13 telling us that it was a closer range and that the 14 hand was open, not around --15 Α All I can say it is a close range wound. 16 For him to get that, he is within 6 to 9 inches of 17 however scenario you want to create in your head, 18 that's all that that means. (By Ms. Alizadeh) And you also know the 19 20 angle that the bullet traveled across the skin? 21 Yes, we know that too. Α 22 And the direction? Q 23 We do know the direction. 24 Okay. Q 25 Α So the next thing is, is there another way

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 121 1 for me to determine that it is soot. 2 So as I said before, when I'm doing 3 an autopsy, part of a complete autopsy examination is sometimes you have histology. Histology is the 4 5 preparation of tissues that you take from the body, 6 you process through some dehydration steps, alcohol 7 step, you eventually put it into a block of paraffin 8 Where you then take microtone, which is just a blade and cut off a very thin silver of that tissue, 10 put it on a glass slide and then using different 11 type of dyes, pink dye, a blue dye, you are able to 12 stain it. And then I get a slide back and then I 13 put that under my microscope and then I can see the 14 histology. That's just the study of tissues under a 15 microscope. 16 In this situation I took some small 17 pieces of skin from those areas of discoloration and 18 I did histology on them. I got those back, and I 19 looked under there, under the microscope. And when 20 I can see in my actual skin sample is, I see foreign 21 particles of matter, and what that means is, there 22 is some of them are pigmented, some of them have different colors, but there is material there that 23 24 he wasn't born with that had to be introduced into 25 his skin as foreign material. I know that much.

Gore Perry Reporting and Video
314-241-6750 www.goreperry.com

FAX 314-241-6750

d0e125b1-3744-4b93-80e6-f9de22cfbddf

```
Page 122
 1
                    So I'll let you hop in if you want
 2
     to.
 3
               No, I think you covered that well. I'm
          Q
     not a doctor, but I play one on TV.
 5
          Α
               So at that point that's all I can truly
     say that this is what I have, it is foreign
 7
     particulate matter that had to be introduced into
 8
     his skin.
                    Now the next step is well, okay,
10
     where did it come from.
11
                    I can at this point say from what
12
     I've seen from textbooks that I have looked in
13
     histology and from what I have seen in the past, the
14
     material that I'm seeing is consistent with products
15
     that are discharged from the barrel of a firearm.
16
                    So that's why I can look at that
17
     picture on my eye, it looked concerning for some
18
     type of extracorporeal, meaning something that is
19
     coming from outside of the body. Some extra matter
20
     that I wanted to figure out what it was.
21
                    It is not something that he woke up
22
     in the morning with or something like that, but
23
     taking those samples with my pictures as well as
24
     looking at the histology, was consistent with
25
     products that are discharged from the barrel of a
```

Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750 314-241-6750 www.goreperry.com

```
Page 123
 1
     firearm.
 2
                    And lots of products come out of a
 3
     firearm. You have primer material, you have metal
     fragments, gunpowder, soot, you get all kind of
 4
 5
     things. There is mixture of things that are in
 6
     there, that are foreign. That's why I say it is
 7
     consistent with products discharged from the barrel
 8
     of a firearm, does that make sense?
                    So did everybody get, I didn't get to
10
     specifically say the areas I'm concerned about, you
11
     can see the dark.
12
                                I have one question,
                      So that wound, the hand wound, so
13
     basically the projectile, there was no exit wound?
14
15
          Α
               Exactly, it is just running along the skin
16
     surface.
               It is a graze wound.
17
                                It is a graze wound?
18
               Just running along the skin.
          Α
19
               MS. ALIZADEH:
                                      , are you Juror
20
21
                                I'm sorry,
22
               MS. ALIZADEH: He wanted to be promoted.
23
               We are on 77. The only thing different,
          A
24
     we are just introducing the ruler for scale.
25
                    This is going to be Wound Number 10
```

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 124

- 1 that I'm going to talk about next. And specifically
- 2 the region on the body is, it is the right bicep,
- 3 which is here, the bicep is just the muscle that is
- 4 in between your elbow and attached to your muscle
- 5 here, the deltoid, which is your shoulder muscle,
- 6 that's the area that we are talking about. We are
- 7 talking about this wound right there.
- 8 In particular this one too is similar
- 9 to the other one that I just described, this is also
- 10 a graze wound or a tangential wound, meaning that it
- is just running along the surface of the skin.
- Now, what is different about this one
- is, this is going to be Image 79. So I'll just
- 14 describe it first and then we will get to the
- 15 differences between the two.
- So this one is located 6 centimeters
- 17 above the level of the right elbow, so it is a flat
- 18 fixed point, so it is up above the elbow and then it
- 19 is just to the left of the anterior midline. So it
- 20 is more kind of medial than anything. It is going
- 21 close to here as you saw in the picture.
- So the wound is measuring 3
- 23 centimeters by 1 centimeters. In terms of how it is
- 24 positioned, it is kind of going, you know, I guess
- 25 you say this is 9 o'clock. So the face of the clock

Gore Perry Reporting and Video 314-241-6750

Page 125 1 is here, this would be 12, this would be 6, so it is 2 going 9 to 3. So it is going in kind of a 3 horizontal fashion. 4 Now, this one, what's different is, 5 the other one had nice skin tags, we could determine 6 the directionality of the wound because it went deep 7 enough and it also hit a part of the body where the 8 skin on your hand is pretty tight. So it is more resilient to being disrupted. So it is going to 10 pick up more changes of damage. 11 With this particular situation, you 12 don't see any of those skin tags and what you do see 13 is a drying or an area of discoloration here on the 14 outside of this particular wound. 15 And when I palpated it, meaning touched it with my fingers, this wound was very hard 16 17 and was very firm. 18 So in this situation, this is not soot, this is not any gunpowder, this is just the 19 drying of the edge of the wound where some blood 20 21 starts to leak out around the edges and interactions 22 with air and interaction with clotting, it turns 23 dark. 24 So this is just discoloration from 25 dry blood, this is not soot or anything like that.

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

Page 126 So in terms of determining distance on this one, I 1 2 can't. In terms of trying to determine 3 directionality, I cannot. This is something that came from greater that 3 feet away. I don't have 4 5 any characteristic things of stippling or soot or searing or muzzle imprint to determine how close it 7 So this thing is farther than 3 feet. I don't 8 know exactly even which way it is coming, but I do on, you know, you do mention the directionality of 10 it, the three, I can't even say. There is nothing 11 to let me know which way it is coming from. 12 that's that wound and that is how it is different 13 from the hand wound, but it is still a gunshot wound 14 nonetheless, but a different type. 15 Questions about that one? 16 Number 80. This same image, still 17 the right bicep, still that tangential graze wound. 18 This one, just a second, let me get 19 my bearings. 20 Q (By Ms. Alizadeh) Can I stop you for a 21 I'm not peeking, but I don't know if you 22 need to take a break to return the call? 23 Α Yeah. 24 MS. ALIZADEH: We'll take a quick five 25 minute break. We are going off the record.

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

```
Page 127
 1
                            (Recess)
 2
          Α
               This is 81.
 3
               MS. ALIZADEH: Okay, hang on, are you
 4
     ready?
            We just took a brief break and the witness
 5
     is still testifying, you are still under oath, Dr.
 6
               all 12 grand jurors are present as well as
 7
     Miss Whirley, myself and the court reporter. Please
 8
     continue.
          Α
               So this is Image 81. On your paper, on
10
     the report where I have Wound Number 6, the I
11
     specific area of this injury is the upper ventral
12
     right arm. So what I'm talking about here is
13
     roughly, you know, kind of here in the area of the
14
     bicep.
15
                    You have a gunshot wound here, so it
16
     is the upper part, meaning in between the elbow and
17
     the shoulder. The right arm, and then dealing with
18
     the ventral portion, which is the front part of the
19
     arm. So that's where this wound is.
20
                    And as I said before, I go through
21
     the same process of documenting the size and the
22
     actual location on the body were two fixed points.
23
     So this one is 20 centimeters below the level of the
24
     right and 1 centimeter to the right of the anterior
25
     midline of the upper arm. This particular wound
```

Gore Perry Reporting and Video
314-241-6750 www.goreperry.com

Page 128 measured about 10 millimeters by 10 millimeters, or 1 2 1 centimeter by 1 centimeter. 3 Now, what is different about this one 4 and what I was showing you guys before is, I showed 5 you one wound that was more irregular, some tissue was kind of coming out, there was a little piece of 7 clotty blood, it was more elongated, it had clean 8 exits. This one is more oval in shape. And what I can see here on the 10 picture, which is demonstrated a lot better than 11 here, but the difference between this one, first 12 thing is oval in shape. You can make right here a 13 little bit of pink tissue right here. You can make an argument is that an abrasion. A definition of an 14 15 abrasion is just the superficial layers of your skin 16 are rubbed off and it exposes the pink of the white 17 meat of your hand and that's what an abrasion is. 18 So when these bullets come in, they 19 don't always go straight in, they can come in at 20 different angles. So when it comes in and it starts 21 to rub that tissue off, that's what an abrasion ring 22 or an abrade is on a gunshot. 23 If you see that, that's kind of 24 indicative of an entrance wound. So in this 25 particular situation you can make an argument is it

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

FAX 314-241-6750

Page 129

- 1 there or not. I said it wasn't really definitive,
- 2 but you can see a little bit there. But around it,
- 3 it is kind of like a little bit of a reddish hue and
- 4 that's kind of like a contusion ring.
- 5 So there is an injury to the skin
- 6 from the outside going in. And so this part, when
- 7 you see that, these kind of features together this
- 8 lets me know this is an entrance wound.
- 9 And then the flip side of the exit
- 10 wound, the exit wound just pretty much it will stay
- 11 the same color, brown color of the skin, you can see
- 12 a little bit of purple around it, you can see a
- 13 little bit of pink, but it is pretty much just the
- 14 wound. That's the difference between the two and
- 15 those are the little small differences that you are
- 16 trying to look for to be able to appreciate when you
- 17 are trying to separate out an entrance wound from an
- 18 exit wound. So that being said, this is an entrance
- 19 wound.
- Now at this point, what I do now is
- 21 that, take a step back.
- 22 With cases I can also do x-rays with
- 23 gunshot wound cases where people are dying from
- 24 wounds or gunshot wounds. You want to be able to
- 25 x-ray the body to be able to one, determine where

Gore Perry Reporting and Video 314-241-6750

Page 130

- 1 there are projectiles, to also see any type of
- 2 injures that may have fragmented the bullet, or to
- 3 be able to help with the path of the bullet. Main
- 4 thing is to see you still have evidence in the body.
- 5 So the whole body in this case has to
- 6 be x-rayed from head to toe. So this particular
- 7 part of the arm that we're looking at has been
- 8 x-rayed. So when you look here at what I'm talking
- 9 about. Eventually I say, x-ray showed bullet
- 10 fragments associated with that wound, that's what
- 11 that means.
- So in terms of also looking at range
- in this case, I said that there is no stippling
- 14 identified, there is no soot identified. So that
- 15 lets you know that we're dealing with another one of
- 16 these wounds that is at least 3 feet away or
- 17 greater. I don't know, I can't tell. I just can't
- 18 assess it because I don't have those distortional
- 19 changes of soot, gunpowder or stippling. They are
- 20 just not there, that's that part.
- Now, once that's done, you want to be
- 22 able to say, okay, I've got the entrance wound now,
- 23 I should have an exit. So this story now completes
- 24 that exit wound that was up here by the, kind of the
- 25 fat up in the armpit, that this entrance wound is

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Page 131 1 related to that exit wound. So once I know these 2 two are related, now I have determined the path and 3 the path is based off of what I told you all before is off of the anatomical position of the body. 5 Now I know I have the in, got the 6 out, then I can say what is trajectory of the body. 7 So in this particular situation this 8 bullet is going slightly upward, instead of backward, and it is going up, meaning that where it 10 comes out at is a little higher than where it comes 11 That's the upward, upward talking from the 12 feet to the head like this. So it is coming out a 13 little bit higher than where it came in at, that's 14 upward. 15 Backward means this is the front part 16 of the body, this is back part of the body. 17 it is coming in here, going out there, you know it 18 is going front to back, so it is backwards. 19 In terms of the actual left to right, 20 it is coming back a little bit this way on the body. 21 So it is coming to my left and coming that way. 22 that's the trajectory of this bullet. A little up, 23 a little to the left and it is going backwards 24 that's the trajectory. It is based off of like this 25 not, you know, jumping around, it is just like this.

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

1		
		Page 132
	1	Now, once that's done, you need to
	2	say the actual path in terms of the layers of the
	3	skin, soft tissue, everything in between you want to
	4	say what will it track through. So in this
	5	particular situation, underneath the arm of the
	6	skin, it went through soft tissue and then it came
	7	out of the skin on the back side on the right arm.
	8	So that's the actual path going
	9	through the body that it went. So soft tissue, so
	10	skin outside, soft tissue is everything like muscle,
	11	fibrous tissue, all of that stuff that is on the
	12	inside of your arm that is not bone, even blood
	13	vessels always needs to be considered soft tissue.
	14	So it went through there and came
	15	back out the skin, so it did not hit the bone. Hit
	16	everything else in between there except the bone.
	17	So that is what I mean by going skin, soft tissue,
	18	exit wound skin.
	19	So now we have one of those tracks
	20	kind of together. So we have the in and we have got
	21	the out, and that is what is going on right here.
	22	Questions?
	23	I have a
	24	question. So given the elevation of the entrance
	25	wound to the vehicle, does that tell you anything
	i	

Gore Perry Reporting and Video
FAX 314-241-6750 314-241-6750 www.goreperry.com

Page 133 about the elevation of the weapon used? The injury 1 and exit describe the upper going through the back, 3 I assume it does not necessarily give you any idea where the elevation of that weapon was? 5 Α Exactly. You have to think about it an 6 arm, this arm can be in so many different type of 7 It is very difficult to be able to say 8 exactly what elevation you are dealing with, that's why the arm is very difficult. 10 The fact that you've got you have an 11 elbow joint, you have a shoulder joint and then the 12 wrist, you have a lot of mobility within that arm and it can be in a lot of different scenarios. 13 14 is very tough and even impossible for me to say. 15 Q (By Ms. Alizadeh) And, Dr. not 16 necessarily with this wound, but have you found in 17 your experiences that often with projectiles that 18 enter and pass through the body, it is not always 19 necessarily a straight path, depending on if they 20 hit bone or if they pass through other types of 21 tissue, you can't necessarily say if it went 22 straight through, that that was the angle that the 23 bullet entered from and so forth? 24 And that's correct. You have to be Α 25 cognizant of that fact that there are things that it

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

Page 134 is hitting and going through that can alter the 1 2 flight or trajectory of that bullet. 3 This is 82. Same wound, only difference is there is a ruler for scale. 4 5 This will be 83. We are looking at 6 Number 8. Should be the dorsal right forearm. When 7 I'm saying dorsal, anatomical position. This is the 8 front of the forearm, and the forearm is between the wrist and the elbow. This is the front, dorsal is 10 the back. So we are dealing with a wound here on 11 the back side of the right forearm, and that's right 12 here. 13 And I've already talked about its associated exit wound which is here on the ventral 14 15 part of the forearm, which is medial. Here is the 16 entrance and here is the exit, I'm going to talk 17 about the entrance now. So we are at Image 84. This is just 18 19 a close-up view of this gunshot wound here on the 20 dorsal part of the right forearm. 21 So doing same thing again, always 22 want to measure from a fixed point as well as 23 imaginary line, it separates left to right, which is 24 the medial from the lateral. 25 So in this particular situation, it

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Page 135 is 16 centimeters below level of right elbow and 2.0 1 centimeters of the posterior midline of right 3 forearm. The hole itself was 11 centimeters by 5 10 centimeters. So it is very similar in size to that last exit wound that I showed you that was part 7 of the ventral arm. 8 Looking at these edges, which is important to do every time. These look, the shape 10 is kind of oval, but what you can start to see now, 11 if you look at this little edge, there is a little 12 bit of a rim of kind of red tissue right here to the 13 outside, a little bit brown. This is kind of a good 14 classical abrasion margin. So the abrasion margin 15 is the thing I talked about before, kind of almost 16 definitive, it lets you know this is an entrance 17 wound, in the right situations. 18 There is some other situations where 19 you can see this, but it is not an entrance. 20 not going to confuse you with all of that right now. 21 But this has the classical features 22 of kind of being round to oval, having a nice 23 abrasion collar right there on the outside, that's 24 kind of critical and that's key. 25 So when I see that, without getting a

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

Page 136 probe, I also probe the wound with just kind of a 1 2 little flexible rod to make sure my entrances and 3 exits they are communicating together as they pass 4 through the skin. 5 Sometimes the rod won't pass through 6 and I may have to open up the arm or whatever to see 7 the actual wound track just to verify. Most times 8 they will communicate and I probe these wounds to make sure that they are connected so they are not 10 just a hole here and here. I'm just assuming they 11 are together. I make sure I probe them, I make sure 12 they are in communication whichever. This is the 13 entrance wound here on the right dorsal forearm. 14 So once that's being said, this 15 particular body part, and in this situation when it 16 is being x-rayed, there is little small metallic 17 fragments that are showing up on an x-ray. And most 18 likely these metallic fragments are fragmented 19 bullet and the reason that it's fragmented is, is 20 when this passes through the arm, it hits a bone in 21 the forearm. 22 You have two bones in your forearm, 23 you have the radius and you have an ulnar. Your 24 ulnar, if you feel your arm, you kind of feel the 25 bone that is on the medial part of your arm, that's

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Page 137 1 your ulnar. The other part of the forearm out here, 2 that's your radius. So it kind of makes sense that 3 this exit wound that came out of that medial part of the ventral forearm, that it hit that bone. 5 So when it came from out here, kind 6 of where it is. When it passes through, went 7 through those soft tissues, it hits that ulnar bone, 8 shattered it and then that bullet came out. So going back to your question, why 10 do exit wounds look different and look odd? So if 11 you have a projectile that has now lost its normal 12 shape and it is fragmented when it comes out of that 13 skin, it is going to have a different shape as 14 opposed to something that stayed intact. 15 So that could be an additional reason 16 for why you may see something elongated, some more 17 irregular, you have to take into account the fact of 18 what that bullet's actually doing when it strikes 19 objects within an actual body. And a bone is a hard 20 substance and it can be deflected some, so the 21 actual trajectory is going to be, is going to be 22 slightly upward, forward and left. 23 So once again, it is going, this one 24 in this situation is because the entrance wound is 25 on the back side of the body, which the trajectory

Gore Perry Reporting and Video
314-241-6750 www.goreperry.com

```
Page 138
     is now forward because I'm like this, but it is
 1
 2
     coming from the back and going to the front, so that
     is why it is forward. That makes sense it is just
 3
     purely based off of this position, not like this or
 4
 5
     anything like that, just like this. So it is coming
     back to front, and so that's the forward part.
 7
                    And in terms of the actual things
 8
     that it hit, I have actually kind of said it a
     little bit, it is going through the skin, soft
10
     tissue, hitting that right ulnar and hitting the
11
     soft tissue again and coming out of the skin, an
12
     exit wound. So now we have another communication of
13
     a wound path.
14
                    So we have entrance and exit right
15
     here on the back and the dorsal part to the ventral
16
     part, and we just talked about the one that's coming
17
     in here on the ventral part of the upper arm and
18
     coming out of the dorsal part of the arm, so got
19
     that both taken care of.
20
                    Image 85. Same wounds, just
21
     introducing the ruler for scale.
22
          Q
               Just so we are clear too, right here, is
23
     that an injury or just dried blood?
24
               That's just dried blood.
          Α
25
               Okay.
          Q
```

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Page 139

- 1 A new wound here, 86. We are at Number
- 2 4, the right front chest. We are specifically
- 3 talking about this wound right here.
- 4 Just to describe the image, you have
- 5 Mr. Michael Brown's feet here, his head here,
- 6 instead of laying on his back you can see another
- 7 wound here and this is one of interest. You can see
- 8 the entrance to the right side of his face.
- 9 This should be 87. So this is a
- 10 gunshot entrance wound to the upper right chest.
- 11 And as usual, I always do two fixed points to
- 12 determine where he's at on the body. So in this
- 13 particular situation it is 16 centimeters below the
- 14 level of the hole of your ear going down this way,
- and then it is to the right of the imaginary midline
- 16 of the chest, so kind of right there.
- 17 In terms of the actual dimensions of
- 18 the actual wounds, it is 15 centimeters, 15
- 19 millimeters by 10 millimeters. It is oval in shape,
- 20 meaning it is pretty round.
- Now the edges, I always assess those
- 22 to determine entrance or exit. When you look at
- 23 this one, you can see a little bit on the edge,
- 24 there is a little bit of a defect there, right there
- on the side, so that's the abrasion once again.

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Page 140

- 1 Just letting you know that this is an entrance
- 2 wound. This one, I just want to show, just show
- 3 them real quick, this is kind of hard.
- 4 MS. ALIZADEH: Sure.
- 5 **A** See that area right there on the edge?
- 6 That's the abrasion that I'm talking about.
- 7 Q (By Ms. Alizadeh) You know when you are
- 8 talking to them, keep your voice up because he has
- 9 to take down what is being said, okay?
- 10 A I'm sorry. So this little area on the
- 11 side of the skin, that's the abrasion, right, that
- 12 I'm talking about, the abrasion collar.
- 13 So we have an abrasion collar.
- 14 MS. ALIZADEH: Is this the same picture?
- 15 **A** It is this the same one.
- 16 MS. ALIZADEH: I think you flipped it. Is
- 17 this the orientation that we did before? Yeah,
- 18 yeah, yeah, yeah.
- 19 A Yeah, okay.
- 20 Q (By Ms. Alizadeh) It confuses me.
- 21 A Sorry. So his head is here, feet would be
- 22 here, this is his neck right there.
- Okay. So we've dealt with the fact
- 24 that we are looking at the abrasion collar or the
- 25 abrasion ring, so that is letting me know that this

Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750

Page 141 is most likely an entrance wound. At that point you 1 2 want to be able to look for any additional injuries 3 that need help with range. 4 So there is no soot, meaning kind of 5 that discoloration that you see around wounds and 6 there is to no stippling, that would be those little 7 small dots that you see around a wound, you don't 8 have that. So once again, I'm looking at a wound 10 where there is an indeterminate distance, is the 11 body greater than 3 feet away. So that is all I can 12 say. 13 Once I know that, I move to the next 14 part saying what's the, you know, looking at my 15 x-rays to see if there is any fragmented bullets, 16 any projectiles I need to get for evidence, that's 17 the next point. 18 So in this particular situation, when 19 I did the x-rays, there actually was a bullet 20 associated with this wound that I knew that I had to 21 get on the inside of the body that I end up doing 22 when I do my internal examination. 23 So like when I told you all at the 24 beginning when I said external and then internal, so

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

when I take all the organs out and looking at all

www.goreperry.com

25

Page 142 the damages that happens to the organs, at that 1 2 point I start looking for that bullet. 3 So before anything even happens when 4 I look at the x-rays before the case starts, I know I have a bullet there okay. 6 If we can, go ahead and describe, I know, Q 7 you know, they all know that you opened up the body 8 and assess the injury to the various organs. you go ahead and talk about that in relation to this 10 wound generally and then there will be later 11 photographs and discussions about that? 12 All right. So when this one passed 13 through, went through the skin and hit the collar 14 bone right there and then went through, hit the 15 upper portion of the right lung and then it went in 16 between, so your rib cage, you have to think of it 17 like a bare front part. Your ribs wrap all the way 18 back to your spine. So when it passed through, your 19 body is three dimensional looking from the side, it 20 comes in here, passed through that skin, soft 21 tissuing, hitting that collar bone right there, 22 hitting the upper portion of the lung and then 23 burying itself in between the intercostal space of 24 the third rib. 25 So intercostal means, so you have 12

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

FAX 314-241-6750

Page 143 ribs total. Think of that as a ladder. 1 So you have 2 rib one, you've got rib two. In between rib one and 3 rib two that's called the intercostal space. 4 is just the spot in between two ribs. So in between 5 ribs three and four, that's where I got the bullet 6 from this particular wound. 7 So when this bullet went through the 8 lung, it damaged the lung and created a defect. think the defect is 2 centimeters in dimension. 10 then at the same time there was blood present within 11 the thoracic cavity. The thoracic cavity are the 12 chambers, you have two on both sides of your chest 13 cavity. You've got a left side, you've got a right side. 14 15 So within that right side, 16 400 millimeters worth of blood, which is a decent 17 amount filled up within that side of his body. 18 those are all the main kind of injuries associated 19 with the path of this bullet going through, hitting 20 that bone, hitting that lung and then burying itself 21 in the back part of the thoracic cap area. 22 MS. WHIRLEY: Sheila Whirley. With that 23 wound, would he have been able to survive that 24 wound? 25 Α Eventually, it would have, it would need

Gore Perry Reporting and Video

FAX 314-241-6750 314-241-6750 www.goreperry.com

```
Page 144
     surgical attention. If it is not addressed, it
 1
 2
     could have been a lethal wound.
               MS. WHIRLEY: But it was not the fatal
 3
     wound in this case?
 4
 5
          Α
               No, it is not. Not the immediately.
 6
               (By Ms. Alizadeh) Could someone who have
          Q
 7
     sustained this type of injury, would they be
 8
     immediately disabled?
               No, they would not.
          Α
10
          Q
               So they could continue to stand?
11
          Α
               Correct.
12
               They could be mobile for a while?
          Q
13
               Correct.
          A
14
               Okay.
          Q
15
                                          The trajectory
16
     entered here is that it hit the collar bone, did the
17
     collar bone deflect it downward, you think, the path
18
     of the bullet?
19
               It is possible, but it is hard to tell
20
     exactly what role that is going to play with the
21
     bullet. It is a wild card. You know, if it wasn't
22
     there, it went straight through the body, came out
23
     the back we all know, but the main thing you can say
24
     about it is, it is going to slow it down. It did
25
     fragment the bullet, it kind of broke it up a little
```

Gore Perry Reporting and Video
1-6750 314-241-6750 www.goreperry.com

FAX 314-241-6750

d0e125b1-3744-4b93-80e6-f9de22cfbddf

Page 145 bit and it is going to slow it down, but that is 1 2 about all you can really say. It is kind of an 3 intermediate thing in between where it stops. 4 : You can't say it is a 5 downward shot, it could have been a straight edge 6 shot? 7 Α It could be straight or down. 8 Okay. You have to think about your head too, A 10 your head is on a pivot, so pivot, you know, like 11 that. And say something is passing through it is 12 possible it could do that or it could be a straight 13 on shot. 14 That's the variability that you have 15 with wounds when you are dealing with something 16 close to a joint or something, close where something 17 can pivot around because you can get an exit from 18 something from someplace else and reenter another 19 place in the body. And that's what makes it 20 difficult when you weren't actually there. 21 (By Ms. Alizadeh) So I'm not saying this 22 is true in this case, but you are saying you can 23 have a bullet that would pass through someone's arm, 24 so you have an entrance wound and exit wound of the 25 upper arm, for example. And then the bullet can

Gore Perry Reporting and Video 314-241-6750 www.goreperry.com

FAX 314-241-6750

Page 146 then reenter the chest cavity? 1 2 Α That is correct. 3 And do you have any way to know whether Q that was the case in any of these wounds? 4 5 Α No, I do not. 6 It was mentioned 7 earlier, do you have any indication that the grazing 8 from the hand could have been one of the chest entered wounds? 10 Α It is possible if your hand is in the 11 right way for that to happen, it is possible. 12 all I can say about that wound is that, I have an 13 idea of range and I have an idea of directionality, 14 but that's really all that I can -- I definitely 15 know from my examination, but after it left there, 16 there is a lot of possibilities. 17 This is 88. And the only difference 18 with this one is the introduction of the ruler. 19 A new wound here. This is going to be Number 5, lateral right chest. So as always, 20 21 this is a gunshot entrance wound, it is located 22 20 centimeters below the level of the right auditory 23 meatus and then it is to the right of this imaginary midline of the chest. That is how you know where it 24 25 is located.

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

```
Page 147
 1
                    In terms of the size, it is
 2
     12 millimeters by 12 millimeters, and this one kind
 3
     of has a little kind of a teardrop or somewhat of a
 4
     oval type shape to it.
 5
                    There is a very small abrasion ring
     around it and that is just that defect that you see
 7
     associated with wounds and when bullets pass through
 8
     the skin, it rubs off that little area as it is
     entering. So that is kind of letting me know that
10
     this is an entrance wound.
11
                    As I always do, want to try to help
12
     yourself with range if you can. So I look for soot
13
     and I look for stippling. There isn't any on this
14
     wound, so now I'm dealing with another wound that is
15
     most likely greater than 3 feet away. I don't know
16
     how close, it is an indeterminate distance.
17
                    So x-rays are done, so there is a
18
     bullet associated with this wound as well.
19
     is further down in the body and I recovered it from
     the lateral part, which is kind of out here, of the
20
21
     right back. So it is kind of coming up here, but I
22
     end up getting the bullet out around down here, just
23
     so you know.
24
                    So that kind of lets you know there
25
     is a downward trajectory with this particular wound
```

Gore Perry Reporting and Video
FAX 314-241-6750 314-241-6750 www.goreperry.com

```
Page 148
 1
     that is based off of this position. So it is coming
     in here and getting here, you already know it is
 3
     going down.
               MS. ALIZADEH:
                                               has a
 5
     question, Doctor.
 6
                                 I notice on both of these
 7
     that there is other like bruising and other stuff?
 8
               What are you referring to?
          Α
                                 The other picture, just
     the last wound that we saw.
10
11
               MS. ALIZADEH: You want to point with
12
     this?
13
               This picture.
          Α
14
                                 Both of them around the
15
     wound. All of this stuff around here, is that
16
     normal, is that bruising?
17
              Are you talking, like this?
18
                                 Yeah
19
               That is just kind of smeared blood.
          Α
20
                                I know it was worse on the
2.1
     last one.
22
               That is not bruising. So bruising, the
          Α
23
     technical means contusion. So bruising, contusion
24
     these are kind of synonymous words.
25
                    The difference between that, and this
```

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 149

- 1 is just kind of being an artifactual thing, this is
- 2 something on the outside of the skin, it is on the
- 3 surface. A contusion or a bruise, that's blood
- 4 underneath the skin surface. So it is like, you
- 5 know, someone punches you, kind of turns blue, green
- 6 whatever over time, you have blood underneath your
- 7 skin that is going through the process of changing
- 8 colors.
- 9 So in this situation, this stuff
- 10 that's here, this is just some artifact and just
- 11 kind of cleaning off the wound and it is blood that
- 12 kind of transfers from here out to the skin so that
- 13 is not a contusion.
- Okay. Now, so we got the trajectory,
- 15 you know, in turn, what did this pass through. It
- 16 went through the skin, it went through the soft
- 17 tissue, and as it is going down, you have got to
- 18 once to think about your rib cage, kind of like a
- 19 barrel.
- When it goes down through that skin,
- 21 you have ribs kind of jetting out there, it kept
- 22 going down and that rib, that eighth rib, you have
- 23 12, it is kind of sticking out and the bullet hit
- 24 that. It fractured that rib and it kind of bounced
- off a little bit and just stayed in the soft tissue.

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

```
Page 150
 1
                    The problem with that injury is, when
 2
     that rib fractured, it fractured to the inside and
 3
     the lung, the bottom portion of the right lung he
 4
     had got punctured because of the breaking of the
 5
     bone.
                    So there is an additional injury to
 7
     the lung further down. You have got one at the top
 8
     too, one in the upper chest, now you have one
     further down. So there is a puncture wound from a
10
     bone breaking from a bullet hitting it, and you have
11
     got one that's just a gunshot wound that is actually
12
     hitting the lung.
13
                    So there is going to be a little bit
     of blood coming out of that wound as well. So these
14
15
     two gunshot wounds technically of the chest, that
16
     400 millimeters of blood is going to be associated
17
     with both of those wounds. And so it is important
18
     to know that those can be ruled the same, they are
19
     both causing injuries to the body that if not
20
     corrected, it could end someone's life, but in this
21
     situation there is another wound to the head that
22
     I'm going to talk about. I just want to make sure
23
     that you understand the separation of the two.
24
               (By Ms. Alizadeh) So, Dr.
                                                    this
25
     wound then, without medical care could be fatal, but
```

Gore Perry Reporting and Video
314-241-6750 www.goreperry.com

FAX 314-241-6750

```
Page 151
     not immediately so?
 1
 2
          Α
               Exactly.
 3
               And again, with this type of wound, a
     person sustaining that would they be able to stand
 4
     and be mobile for a while?
 6
          Α
               Yes.
 7
               Okay.
          Q
 8
                                          There is nothing
     else sequencing of these events, correct?
10
          Α
               For this wound here, no.
11
                                Fatally, you know what the
12
     final one was, you don't really know --
13
               Right.
          Α
14
               (By Ms. Alizadeh) So far, just to be
15
     clear, and we don't, you can't say so far the
16
     sequence of these wounds?
17
               Not right now, no.
          Α
               Which one happened first, but none of
18
19
     these wounds would immediately incapacitate someone?
20
          Α
               Correct.
21
          Q.
               Okay.
22
               So this is the same wound that we are
          Α
23
     looking at. The only thing different is the
24
     introduction of the ruler. I'm sorry, I didn't say
25
     a number. This is 90, I'm sorry.
```

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 152 1 91. So the head of Mr. Michael 2 Brown, we are looking at the right side of the face. 3 And the wound that I'm going to be getting to next is going to be Number 3. It is going to be right 4 5 here, it is going to be an exit wound of the right 6 jaw. 7 This is just showing from the top 8 down, just showing some more wounds of the face. 9 This is 93. So this is his neck, 10 this is the top part of his head here and you have 11 this exit wound here of his right jaw. So let's 12 walk through this one. 13 So this one is located about 14 5.5 centimeters below the level of the right ear 15 hole and then it is to the right of the anterior of 16 midline of the head, which is like that. So it is 17 to the right. The hole measures 15 millimeters by 9 18 millimeters. 19 Now looking at the contours of it, 20 the contours meaning the edges, I do that on every 21 wound that I see, the gunshot wounds. If you look 22 at this one, you kind of see this little edge is 23 kind of flapping over a little bit. You don't see 24 those good little peak margins that are around it, 25 it is a little more irregular, it is not as smooth.

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750 w

Page 153 And you kind of actually see a little bit of tissue 1 2 kind of streaming out there and a little bit 3 flopping out of the wound to the outside. So when I look at all of the 4 5 constellation of all of these things, this is 6 letting me know this is consistent with an exit 7 wound. 8 I don't see any stippling, I don't 9 see any soot, shouldn't see that in an exit wound, 10 but the thing is it is a little more irregular, 11 don't see a good abrasion ring, don't see a good 12 contusion, don't see any bruising, don't see 13 anything that I typically see in a situation of an 14 entrance wound, so I know that's an exit wound. 15 This is going to be in relationship 16 to another wound that I will get to eventually. 17 So this is 94. And the only thing 18 different about this is the introduction of the 19 ruler. 20 Q This is 95? 21 This is 95. This is the right side of 22 Mr. Michael Brown's face. I am wanting you to focus 23 on this wound right here, which is a gunshot 24 entrance wound. This stuff here, these are 25 abrasions. I'll just describe them.

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

Page 154 1 So up here on the right forehead, 2 this kind of irregular area right here. This is an abrasion, as I said before, an abrasion is just 3 where that superficial layer of the skin rubbed off 4 5 and exposes that underlying soft tissue. That 6 particular abrasion right there measures about 7 7 centimeters at its greatest dimension, kind of the 8 longest point. 9 Then there is one over here on the 10 lateral part of his face, it is kind of dried, 11 meaning when I say dried, see how it is kind of 12 discolored, this is more pink, this is dried. 13 That's an abrasion right there on the right side of 14 the face. 15 And then let's see. And then over 16 here, you will see it later, out there on the lip he 17 has got some abrasions here on the inside of this 18 lip. 19 But back to the gunshot wound which 20 is going to be the main thing I'm going to talk 21 about next and that's going to be number two on your 22 autopsy report. This is 96. Only thing different 23 24 about this photo than the last one is just the 25 introduction of the scale with the ruler.

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

Page 155 This is 97. So this is this gunshot 1 2 entrance wound of the central forehead. So it is 3 located 7 centimeters above the right ear hole and 2 centimeters to the right of the anterior midline of 5 the head. So the imaginary midline of the head is 6 here, it is 2 centimeters off to the side. So that 7 just kind of locates the wound. 8 The whole measures 15 millimeters by 10 millimeters. The wound itself is somewhat oval, 10 I can see better on the photo here, but right there, 11 there is kind of an abrasion ring out here on the 12 outside. 13 What that is kind of helpful with is, it is kind of letting me know that it is going 14 15 downward because when this, when this bullet came in, the abrasion ring is more irregular to this 16 17 side, it is bigger on this side than it is there. So when it is rubbing in, I know that it is coming 18 19 in a downward fashion. One, just because of the 20 abrasion ring and two, because of where it 21 ultimately went on his face. 22 So it is coming here, think of the 23 anatomical. It is here and when it is coming down 24 passing there and it is going to come out of the 25 face. So that you've got two reasons for how you

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

```
Page 156
1
     know it is down. The abrasion collar and also just
 2
    the starting here and ending up there. It is coming
 3
    from the top to here.
                                  did you determine that
 4
          Q
               And, Dr.
 5
    path not only, I mean, possibly via x-rays, but did
 6
     you probe that wound as well?
7
               Yes, I probe all of my wounds to make sure
 8
     that the entrances and the exits do coordinate.
 9
                                         Does vour
10
     assumption in talking about how body parts move
11
     that, or like when his head was down, and the
12
     officer was standing above him.
13
               That's a possible scenario.
          Α
14
                               Thank you.
15
          Α
               So we got that. So now we dealt with the
16
     abrasion collar, we know there is an entrance wound.
17
     So now you want to look at your x-rays to see if you
18
     see any type of bullets associated with this.
19
     are little tiny fragments, but no large intact
20
    bullets, I can't recover those. Those are not good
21
    for ballistics, you need kind of an intact chunk to
22
    be good for ballistics.
23
                    All right. So in terms of soot or
24
     any type of stippling, there is nothing around it,
25
     only thing that is nearby are these abrasions.
```

Gore Perry Reporting and Video
FAX 314-241-6750 314-241-6750 www.goreperry.com

```
Page 157
 1
                    So in terms of trajectory, how far
 2
     away, I can't determine this, this is an another
 3
     indeterminate wound that is going to be greater than
     3 feet away.
 5
                    In terms of the actual trajectory
 6
     itself, it is downward, slightly backward and going
 7
     to the right. It is going down, going back, meaning
 8
     this is the front part of the head, it is coming
     back over here, so it is backward down and going to
10
     the right because this is the center, this is right
11
     side and it is going that way.
12
                    All right. Now in terms of the
13
     actual tissue planes that it passes through, it is
14
     going from the skin, it's going through the soft
15
     tissue and the things that is interesting about this
16
     one is, so when it is passing through, there is
17
     like, there is defect here, call it a laceration,
18
     call it a defect.
19
                    In my particular situation, I called
20
     it gunshot related defect because as this bullet
21
     passed through, there is enough meat and skin here
22
     on the front of Mr. Michael Brown's forehead that
23
     this bullet is tunneling underneath that skin.
24
     it got right here where the eyebrow was resting over
25
     that ridge of bone that we all kind of have right
```

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750 wv

Page 158 1 there, it disrupted that tissue, continued to travel 2 underneath and then went by his eye here. There is 3 another defect, it passed through the actual globe 4 of the eye. 5 Then you have a bone here, right 6 underneath your eye, it went through that bone, 7 passes through there, you have a bunch of soft 8 tissue here in your jaw and cheek, it passes through there and then eventually comes out of the jaw right 10 here on the side. So that's the particular path of 11 this particular shot. 12 (By Ms. Alizadeh) Now, does this Q projectile travel through any portion of the brain? 13 14 No, it does not. Α 15 Q And now I know you said it went through 16 some bone that was below the eye, does it fracture 17 the bone at the entrance site? 18 No, it does not. 19 So it goes into the skin and the soft 20 tissue and then almost travels along the bone, along 21 the, just underneath the skin? 22 Α Correct. 23 Going through the globe of the eye? 24 Correct. Α 25 And then breaking a bone? Q

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

```
Page 159
 1
          Α
               Correct.
 2
               Now, would this type of wound immediately
 3
     render someone disabled?
               No.
 4
          Α
 5
          Q
               If someone sustained this type of wound,
     could they continue to stand up for a while?
 7
          Α
               Yes, they could.
 8
               Could they continue to be mobile?
          0
          Α
               Yes, they could.
10
               And, obviously, I'm sorry, Sheila, with
          Q
11
     the eye being pierced in this case, they would lose
12
     this vision from their right eye, correct?
13
               Correct, the eye is no longer going to
          Α
14
     function, it is totally disruptive.
15
               MS. WHIRLEY: Shirley Whirley. Would the
     combination, you said you can't talk about the
16
17
     sequence of the shots which occurred first, but the
18
     combination of the shots that we've seen before the
19
     fatal shot, it still would not render this person
20
     disabled.
21
          Α
               Correct.
22
                                          You talked about
23
     the abrasions, anything that you conclude from the
     abrasions, how they occurred?
24
25
          Α
               Well, an abrasion, all that is to me is
```

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 160 1 that particular part of your body came in contact 2 with another force. So to get an abrasion, I fell 3 right now, I hit my head right there, I could scrape off skin. I fell down on the ground and collapsed 5 on the ground that could cause those abrasions. 6 From the way he's positioned where 7 he's found after he's rendered disabled, his face is 8 in contact with the ground and that's consistent with that position. 10 There need to be forward 11 motion on that face to scrape it like that. 12 Α You would need some sliding. 13 Some sliding For it to rub off. You need a frictional 14 A 15 force. You can't just plop straight down, plop 16 straight down and cause more bleeding, you get more 17 contusions from things just stopping and don't 18 When things slide with friction, that's when 19 it gets rubbed off, and that's when you get your 20 frictions. 21 I don't 22 recall, or not speaking about the abrasions, did you 23 find any evidence of any type of burn to the skin or 24 anything, any type of injury like that because we 25 all know, I mean, this happened at 12:00, and the

Gore Perry Reporting and Video 314-241-6750 www.goreperry.com

FAX 314-241-6750

```
Page 161
 1
     young man laid there on the ground in one of the
 2
     hottest days of the year. Any type of wounds such
 3
     as that, any evidence of anything of that nature?
               There's really no burning per se, but
 4
          Α
 5
     there is one wound on the cheek that had a dry
 6
     appearance, that's about the only thing that, you
 7
     know, contact could be a drying affect or something
 8
     where the pavement is warmer, who knows, but that
     feature is there. There is no burning of anything.
10
                                Okay, thank you.
11
                                          Are the
12
     abrasions severe enough that you think the victim
     would have been in motion at the time of the fatal
13
14
     shot or could have been standing at the time of the
15
     fatal shot, absorbs that amount of friction just by
16
     simply falling from a standing position?
17
               Eventually falling and hitting the ground,
18
     and the ground and his face, that's how that
19
     happened in my opinion.
20
                    I think we've got those taken care
21
     of.
22
                    This is 98. And the only thing
23
     different about this is the introduction of the
24
     ruler.
25
                    We're at Image 99. So we're looking
```

Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750

Page 162 at the top of Mr. Michael Brown's head. This is the 1 2 top portion of his scalp. So what is happening here 3 when he originally came in, I documented the body how it is, I shaved the hair off of his head to 4 5 expose the wound, so this is what I created when he 6 came in. He didn't look like this was all black 7 hair here, you couldn't even see the wound. 8 reason why I knew it was there is from my x-rays, as well from palpating the head, I could feel a wound 10 and I saw blood coming from there, that's why I knew 11 there was something there. 12 Once I identify a wound like that on 13 the head, it is standard protocol and procedure for 14 me to remove the scalp, not the scalp, the hair in 15 order to one, be able to assess the collar, the 16 abrasion collar, to help with distance and to also 17 look for any type of stippling or soot. 18 Kind of, you know, in a classical 19 sense, typically the hair can block these things 20 from being deposited on the skin, but proper 21 protocol to be able to wipe away that hair to see if 22 you can see anything that may have penetrated the 23 hair and got to the skin to be able to help with the 24 range. 25 So that's the reason why you have to

Gore Perry Reporting and Video
314-241-6750 www.go

FAX 314-241-6750

d0e125b1-3744-4b93-80e6-f9de22cfbddf

Page 163 remove the hair to be able to assess wounds to help 1 2 you with distance and to also be able to 3 characterize the nature of the wound. (By Ms. Alizadeh) You know that brings up 5 a question regarding the deposit of the soot or 6 stippling. If the projectile enters through a piece 7 of clothing, could that also affect whether or not 8 soot or stippling is deposited on the skin? Α That is correct. 10 And in this case, the clothing was removed 0 11 off of the body, correct? 12 Α Correct. 13 And do you recall having a short sleeve shirt on, correct? 14 15 Α Correct. 16 Now, did you examine the clothing yourself 17 to determine if there were any holes in the 18 clothina? I do look at the clothing to look for 19 Α 20 defects and that's what I refer to them as. 21 Did you see any defects in the shirt? Q 22 Yes, I saw defects in the shirt. Α 23 Okay. And you don't document those in 24 your report, correct? 25 No, I don't specifically say where they Α

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 164 I generalize and say there are defects present 1 2 in the shirt. 3 Q Okay, all right. Thank you. All right. So this particular one I think 4 Α 5 is probably Number 1. We are going to be looking at 6 Wound Number 1 on the autopsy report. This is the 7 gunshot entrance wound to the vertex of the scalp. 8 So positioning as I always do, it is 9 20 centimeters above the level of the ear, we are 10 also going up from here. And it's, and it's near 11 the actual midline of the head. So if you look, it 12 is pretty much in the center, kind of dead on. 13 The hole measures 10 millimeters by 14 8 millimeters. It's roughly round and it has pretty 15 level edges. 16 Now, when you look at the edges as I 17 always do, you can kind of see this little bit of 18 pink tissue around there, that's that abrasion 19 collar that is going to let you know theoretically 20 this is an entrance wound. 21 Now I have to caveat with gunshot 22 entrance wounds to the head. You should never just 23 purely go by the classical thing that we talked 24 about, abrasion rings and contusions. The problem

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

with it is the head is a skull that's underneath and

www.goreperry.com

Electronically signed by

25

Page 165 that bone creates a different type of resistant path 1 2 for the bullet to pass through. 3 The best way to determine if there is 4 an entrance or an exit wound of the skull is on my 5 examination, when I reflect the scalp, which is a 6 normal part of the procedure and remove the skull 7 When you look at the actual hole, and I think 8 there will be some pictures eventually, we'll get to 9 that. 10 When you actually look at the hole, 11 there is a concept called beveling. Beveling is 12 where you will see an outpouching of the bone. 13 if the outpouching of the bone is to the inner table 14 of the gunshot wound, that's an entrance wound. 15 the beveling or outpouching is on the outside of the 16 outer table of the skull, that's called external 17 beveling, that's an exit wound. 18 So when I get to it, this particular 19 wound had internal beveling, so that lets me know 20 for sure that this is an entrance wound to the head. 21 It is pretty much every time, I just want to make 22 sure you understand that. 23 MS. WHIRLEY: Sheila Whirley. I know you 24 can't tell us exactly what position would Michael 25 Brown have been in to have the shot to the top of

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Page 166

- 1 his head?
- 2 A The shot fired has to be above the head.
- 3 So in theory, if I'm sitting here and somebody's up
- there and shoots down, you have to be above, the
- 5 shot has to be fired above his head in order for
- 6 that to happen.
- 7 Q (By Ms. Alizadeh) Kathi Alizadeh. When
- 8 you say above, you're talking the anatomical
- 9 diagram?
- 10 A Right.
- 11 Q I'm just theorizing here, just theorizing.
- 12 So if someone in this position, in other words, is
- 13 bent over at the waist and the top of my head is
- 14 facing the wall, that could account for a bullet
- 15 that would enter the top of the head, correct?
- 16 **A** That is correct.
- 17 **Q** In this case you have no way of knowing
- 18 where, what position his body was in when he
- 19 sustained that gunshot wound?
- 20 A No, I do not know specifically, correct.
- 21 MS. WHIRLEY: But it would be
- inconceivable for him to be standing at 6'4",
- 23 straight up and have that shot to the top of his
- 24 head from someone not as tall as him, taller than
- 25 him?

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

FAX 314-241-6750

Page 167 Α 1 Correct. 2 MS. WHIRLEY: Okay. 3 Α So as we always do, we want to see if there is any stippling or soot. That's not soot, 4 5 that's just his hair. That wasn't scraped all the 6 way off with a scapple. There is no soot, there is 7 no stippling. So in terms of range, that is a wound 8 that is greater than 3 feet away again. 9 An x-ray, full body x-ray on this 10 particular situation, there is a bullet associated 11 with this wound that I ultimately recovered within 12 the soft tissue on the right side of his face that's 13 associated with this wound, there is a projectile. 14 All right. There is internal 15 beveling of this bone of the skull, which I was 16 telling you about before, that lets me know that 17 this is an entrance wound. 18 The path or trajectory on this one 19 based on the anatomical position is going downward, 20 it is going from the top of the head towards the 21 feet and it is going right. Meaning that when it 22 passes through the head and goes through the brain, 23 you got your outer part of your skull here, it is 24 going that way and burying itself. You can see it 25 is down and to the right. So that is how you know

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

Page 168 1 that part. 2 In terms of the actual tissue that it 3 is passing through, going through the scalp, the skin surface of the head, soft tissue, the parietal 5 bone of your skull, that's the particular location 6 of the skull cap specific for me, but just layman's 7 term, just your skull. 8 Once it went through the skull, it 9 hit the brain and your brain is separated in 10 hemispheres. So you have a parietal bone, you have 11 a parietal lobe. So it went through the parietal 12 lobe of the brain, then it went through the temporal 13 lobe of the brain. This is all on the right side. 14 Then it passed through the right 15 temporal bone of the skull, which is out here and 16 punched through there and buried itself right here 17 in the skin, the soft tissue beneath the skin on the right side of his head. So that's the path of the 18 19 bullet. 20 So when it goes through there, it is 21 going to create injuries to the brain. There are 22 small little tears or contusions that are happening 23 to the brain as this bullet is punching its way 24 through the white matter of the brain. You have 25 gray matter on the outside and white matter on the

Gore Perry Reporting and Video
314-241-6750 www.goreperry.com

Page 169 1 inside. 2 The white matter is responsible for 3 your, the nervous impulses that are going to go 4 through your brain. So those tracks, there is 5 little small contusions there, that's just from the 6 pathway of the bullet going through the brain. 7 There is also hemorrhage associated 8 with the wound. You have multiple spaces in your brain. You have an epidural space, which is, you 10 know, you have your skull, beneath your skull 11 there's a space and then you have your dura. 12 dura is kind of like, for lack better of a better 13 word, the skin of the brain. In between that 14 imaginary space is called the dural space, there's a 15 space there. 16 You can get the dural, then you start 17 getting to another space and then you get to the 18 brain. So beneath that dural space is the subdural 19 space. 20 There is blood there and there is 21 actual blood on the surface of the brain, which is 22 the subarachnoid space. There is two areas where 23 there is blood, you have defects of where the bullet 24 is entering and then kind of exiting out on the 25 brain and staying in the soft tissue.

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

www.goreperry.com

```
Page 170
 1
                    So those are the main injuries that
 2
     you have associated with this wound that's passing
 3
     through the skull and burying itself right there in
     the soft tissue.
 5
          Q
               (By Ms. Alizadeh) Now, Dr.
                                                      if
     someone who sustained that type of injury to his
 6
7
     brain, would that immediately incapacitate him?
 8
          Α
               Yes, it would.
               So this person would not be able to stand
10
     or walk or be mobile in any way?
11
          Α
               No, they would not.
12
               Would they be conscious?
          Q
13
              No, they would not.
          Α
            And is this a fatal injury?
14
          Q
15
          Α
            Yes, it is.
16
               And is there any amount of medical
          Q
17
     intervention that would, could possibly save the
     life of someone sustaining that injury?
18
19
          Α
               Highly unlikely.
20
          Q
               All right.
21
               MS. ALIZADEH: Does anybody have any
22
     questions about this injury?
23
                                                 You said
24
     that you had to remove the hair from that area.
25
     it possible to get any kind of soot or anything, any
```

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 171 kind of sampling of that or was anything sent in to 1 2 be examined or is it even possible to get any type 3 of evidence out of that? 4 Α It is always possible, but nothing was 5 sent off with regard to the hair. 6 Q (By Ms. Alizadeh) So the hair that you 7 shaved off the scalp was not collected and kept? 8 Α No. Or tested in any way? 10 Α No, it was not. 11 Q Okay. 12 Any other questions about this wound? 13 Same wound, but just the Α introduction of the ruler. 14 15 Q And just so I'm clear on this, the bullet 16 that we're talking about is Wound Number 1 in your 17 report, entered the brain, traveled through the 18 brain and then you said was in the temporal region just beneath the skin or the soft tissue? 19 20 It is a little bit, it is coming right 21 through the bone of the skull, it is sitting in the 22 soft tissue right there. 23 In photographs, is there an injury to the 24 side of his face where that bullet rest beneath the surface? 25

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

1		
		Page 172
	1	A It did not make an injury on the outside
	2	of the face that would correlate to the inner
	3	injury.
	4	Q Just for the sake of these, all of these
	5	injuries that you talked about, there was a
	6	projectile that was found in his brain, correct?
	7	A Well, it is more the soft tissue.
	8	Q You're right. Wound Number 1, you
	9	recovered that projectile?
	10	A Correct.
	11	$oldsymbol{Q}$ Did you give that to the police officer?
	12	A Yes, I did.
	13	Q He packaged that?
	14	A Yes, he did.
	15	${f Q}$ And then you also indicated you retrieved
	16	a projectile in his chest cavity?
	17	A Correct.
	18	Q Was that given to the police officer?
	19	A Yes, it was.
	20	<b>Q</b> Was that packaged?
	21	A That was packaged.
	22	<b>Q</b> Any other projectile or foreign object
	23	that you retrieved from his body?
	24	A There was another. So the one projectile
	25	back out here and one further down here, so there

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

Page 173 were three projectiles that I recovered. 1 2 Okay. And then regarding any other 3 samples that you took, you've already testified that you took a sample from that thumb area? Α Histology. And did you take a blood sample from him? Q 7 Like for a blood stain card for DNA? Α 8 For DNA, but also for toxicology? 0 Α Yes. 10 So those are separate samples? Q 11 Α Yes. 12 There is a stain card that is made for Q 13 DNA? 14 Yes. Α 15 Q And then there is a sample of blood put in 16 a tube or something? 17 Yeah, there is two types of tubes. 18 have a red top tube, which is just basically a tube 19 with no preservatives in it, just going to be pure 20 blood and then we do a gray top tube has a 21 preservative, like sodium chloride. It is important 22 for dealing with testing for like cocaine, things of 23 that nature. 24 Cocaine is kind of volatile and kind 25 of breaks down if you don't put the fluoride in

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

```
Page 174
     there to stop the activity of the enzymes in the
 1
 2
             That is what the gray top tube is for.
 3
                     So we do a red top and gray top for
 4
     toxicology, and the specific blood that I used was
 5
     chest cavity fluid that was sitting from that
 6
     gunshot wound.
                     There is a lot of blood there.
                                                       Ι
 7
     used that for my toxicology because the other
 8
     locations to try to get blood was very difficult.
     He had lost blood, it is difficult to get sometimes,
10
     so you get it where you can get it from.
     biggest reservoir of blood was the chest cavity.
11
12
               And did you also take a sample of the
          Q
     vitreous fluid from his eye?
13
14
          Α
               Yes.
15
          Q
               He was missing his right eye, correct?
16
               That's correct, it came from the left.
          Α
17
               You do that by a syringe, drawing off some
          0
     fluid?
18
19
          Α
               Correct.
20
               And that's preserved for toxicology?
          Q
21
          Α
               Correct.
22
               And then you also said earlier you had
          Q
23
     mentioned urine. Did you take a sample of urine
24
     from him?
25
          Α
               Yes, I did.
```

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

	Page 175
1	Q Is that also with the syringe?
2	A That is with a syringe.
3	Q Is that taken from his bladder?
4	A Yes, it is.
5	Q And so the cavity blood, the urine and the
6	vitreous fluid, you know those samples were
7	subsequently sent to a toxicology lab?
8	A Correct.
9	<b>Q</b> And is that lab also a part of the Medical
10	Examiner's Office?
11	A Physically it is located in the same
12	building.
13	Q But that's run by St. Louis University,
14	correct?
15	A Correct.
16	<b>Q</b> And other than sending those things off,
17	you don't have any role in testing those?
18	A No, I do not.
19	${f Q}$ Okay. I want to try to go through these
20	quicker so that, I don't want to, again, I don't
21	want anybody to not ask questions they want to ask.
22	We've talked about the major wounds that he's
23	documented in his report. He has some additional
24	photographs of some of those tangential wounds and
25	also there is some autopsy photos where there is

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

www.goreperry.com

```
Page 176
     cutting done. All of these photographs are going to
 1
 2
     be available for you.
 3
                    If you want, we can have him go
     through them one by one. I prefer him to testify
 4
 5
     about what he saw when he opened up the body and so
 6
     forth. I will tell you they are graphic and that is
 7
     going to be up to you guys, okay?
 8
                    And so also let's go through the rest
 9
     of these injuries that are photographed and then
10
     when we get to the cutting part, I'll ask you guys
11
     if you want to start going through those
12
     photographs. If you want to look at them on your
13
     own at a later time.
14
                                                     Ι
15
     have one question for you. I need to understand,
16
     all of the injuries with the exception of number
17
     one, accumulatively he could have still survived and
18
     been mobile?
               He could have been mobile, I wouldn't
19
20
     necessarily say survive. Those chest wound
21
     injuries, those would have eventually become fatal
22
     if not addressed.
23
                                He would have been
24
     mobile, but this one absolutely?
25
          Α
               Absolutely.
```

Gore Perry Reporting and Video FAX 314-241-6750 314-241-6750

```
Page 177
 1
                                                   Those
 2
     thorax wounds if treated, he could survive that?
 3
          Α
               Unlikely, the chest wound.
                                           The problem
 4
     with chest wounds, this is going to be the
 5
     physiological problem with it. You need your lungs
 6
     to breathe. When those bullets went into his lung,
 7
     it punctured it, it squeezed it down, so now he is
 8
     only working on one lung. At the same time what
     happens is there is vessels in there that he
10
     injured.
11
                    So as that chest cavity fills up with
12
     blood, it is going to get to the point where it
13
     fills up with so much that it shifts all of those
14
     organs on the inside of your body to the other side.
15
     And the problem with organ shifting is you have a
16
     major organ in the middle of your chest, which is
17
     your heart.
18
                    So think of it kind of like a garden
19
          You put too much pressure on one end of it,
20
     it stops the flow of the water. So the stop of the
21
     flow of the water, in this situation is the blood.
22
     When that thing starts filling up and pushing over
23
     to the side, those vessels get squished, squished
24
     and eventually get squeezed off to where now the
25
     blood can no longer get returned to the heart to get
```

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Page 178 pump to other areas. And then that's the main 1 2 problem is your head is not getting blood, now you 3 are going to become unconscious. You are going to have two problems, you're not getting blood, your 4 5 blood carries your oxygen. So you are not getting 6 any oxygen to the brain, you are physically not 7 getting blood to the brain, you are also losing 8 blood out of your body, inside of your body. So you kind of got a lot of problems there. 10 But he could not 11 immediately, the hemothorax could be reversed? 12 Α If you had some medical intervention. 13 That's what I mean. (By Ms. Alizadeh) Would you say, 14 Q 15 Dr. that medical attention would have to 16 be immediate? 17 Α I agree. Like if he were shot in the hospital, then 18 19 possibly if there was a doctor at his elbow, 20 possibly he could have medically then have survived 21 those injuries? 22 Α Correct. 23 Without immediate medical attention, he 24 eventually would have died, alone of the internal 25 thoracic injuries?

Gore Perry Reporting and Video

FAX 314-241-6750 314-241-6750 www.goreperry.com

Page 179 1 Α Correct. 2 And just to clarify because you talked 3 about bullets passing through his lung. And I thought maybe I misunderstood. I thought one of the 4 5 injuries to the lung was caused by the rib that 6 punctured the lung? 7 Α Correct. 8 Was there more than one bullet know 9 through the lung? 10 One bullet went through the lung, the 11 other bullet struck the rib, the eighth rib, which 12 is nearby, so your right lung is in three pieces. 13 It has got an upper lobe, it's got a middle lobe and 14 it's got a lower lobe. So the first, that bullet 15 that's up here by the clavicle by the collar bone, 16 that hit the upper part of the lung. 17 So when that other bullet passes 18 through and hits the eighth rib, it snapped it, it 19 fracture it. So say this is a rib cage, your lung 20 is sitting there, when it broke it, it snapped it to 21 the inside and when it broke, the bone punctured 22 that lower portion of the rib causing additional 23 injuries to the lung. So the bullet itself didn't 24 do it, but the bullet hit the bone and snapped and 25 did puncture the wound.

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

```
Page 180
 1
          Q
               Okay.
 2
               MS. WHIRLEY: Sheila Whirley. Can you
 3
     tell, is there any way to know how quickly he would
     have been incapacitated due to all of these injuries
 4
     prior to the fatal shot?
 6
               That's going to be difficult, difficult to
 7
     determine. It is just pure speculation.
 8
               MS. WHIRLEY: Okay.
                                                  I just
10
     need some clarification. The wound to the head, did
11
     you say that was a far distance?
12
               That one is an indeterminate, so it is
     greater than 3 feet.
13
14
                                It is greater than 3 feet?
15
          Α
               Correct.
16
               MS. ALIZADEH: Any other questions about
17
     those wounds so far?
18
                                                 The
19
     wounds to the top of the head, could he have been
20
     already falling forward?
21
          Α
               It is possible.
22
                                So let's say like the
23
     first wound he received, I know you said --
24
               What is the first one we are talking
          Α
25
     about?
```

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

```
Page 181
 1
                               Let's just say to the
 2
     chest.
 3
          Α
               All right.
                               Could that wound have
 4
 5
     like, I know you said that he could of still been
 6
     mobile, could he have not been mobile as well?
 7
     Could you just like get shot?
 8
               You can stop walking, that wound is not
     going to prevent you from using your legs.
10
     consciously chose to stop moving, you still would
11
     have the ability to move with sustaining a shot like
12
     that. It is not going to render you unconscious,
13
     that's the point I'm trying to make. The wound to
14
     the head, he's going to be unconscious, he can't
15
     move if he wants to.
16
                    But you get hit here in the chest,
17
     you are going to have some time to be able to move
18
     around and it is depending on a variety of factors.
19
     How quickly you use blood. The main thing that will
20
     make you collapse is, once you block off that blood
21
     return, you've got maybe like 10 to 15 seconds of
22
     reserve of oxygen going to your brain before you
23
     pass out.
24
                    So when you reach that critical
25
     level, each person is going to have a different
```

Gore Perry Reporting and Video
FAX 314-241-6750 314-241-6750 www.goreperry.com

Page 182

- 1 critical level with body masses, being different
- 2 sizes, people have different kind of levels of blood
- 3 reserve, different levels of volume.
- 4 So someone smaller or bigger maybe
- 5 last a little bit longer. Also the activity that
- 6 you are doing before is also going to impact. Say,
- 7 for instance, if you have been running and your
- 8 heart was going really, really fast, you're going to
- 9 pump blood out quicker as oppose to someone really
- 10 calm, just kind of sitting there, you are not going
- 11 to bleed as fast. So all of these factors play a
- 12 role in determining how quickly you are going to be
- 13 responsive or immobile.
- 14 Q (By Ms. Alizadeh) Okay. Let's go ahead
- 15 and somewhat quickly if you can run through those
- 16 other photos. If you go ahead and identify them and
- 17 put them on what it says, what it shows abrasion?
- 18 **A** This is 102, I believe. So this is his
- 19 left arm, this is just showing a linear abrasion on
- 20 the left arm.
- 21 You characterize that before as being like
- 22 a grazing wound?
- 23 **A** I wouldn't say it is in that category.
- 24 This one is some type of blunt force injury caused
- 25 that. I wouldn't say it is necessarily a

Gore Perry Reporting and Video 314-241-6750

Page 183 projectile. The characteristic of it is different. 1 2 You could have rubbed on something, it is hard to 3 It is nonspecific, but it is not a classical 4 graze wound like you saw on the bicep on the right 5 arm or that graze wound. 6 This is different. This is just an 7 It is not specific and I can't say what 8 it is from. My thought was 10 whether with glasses on, if you were able to tell if 11 it was a clean cut? 12 That's something you can argue about, but 13 the fact that it is so dry and, you know, it is kind 14 of firm, it is kind of difficult to say is it a cut 15 or incise wound. I can definitely say that is a 16 superficial layer of skin has been rubbed off, but 17 it is difficult to say was it a sharp or was it, you 18 know, rubbing on some keys or who knows, a door, I 19 don't know. It is kind of in between and it is 20 difficult to specifically say what caused that. 21 there is definitely an injury there, the top part of 22 the skin is gone. 23 Thank you. 24 This is just a close-up, same thing Α 104.

Gore Perry Reporting and Video

FAX 314-241-6750

25

with the showing of that.

314-241-6750

Page 184 1 (By Ms. Alizadeh) Just out of curiosity 2 lower in the photograph, is this also an abrasion? 3 Yes. This is just showing that right palm again, showing that graze wound of the hand. 4 5 106. Showing close-up of the graze 6 wound of the hand. 7 Same thing, graze wound of the 107. 8 right hand with the ruler. 9 On 108. There is a very, I'm going 10 to get a little bit closer, but it is a little bit 11 of an abrasion here on his right here which is right 12 there. 13 109. This is close-up of that little 14 tie any abrasion on his right hip right there. 15 This should be 110. This is just the 16 same thing, but with ruler inserted for scale. 17 For those, the abrasion to his right hip 18 again, you can't say what caused that? 19 Α No, I cannot. 20 Q Can you even say if that happened during 21 the same time he sustained the other injury? 22 No, I cannot. Α 23 Okay. Q 24 111. There is an abrasion here to this Α 25 upper right chest, that's what I'm focusing on here.

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

```
Page 185
 1
                    112.
                          This is the abrasion here in
 2
     the upper right chest right there and that bullet
 3
     hole from the upper right chest from earlier.
                          Same picture up, but insertion
 4
                    113.
 5
     of the ruler for scale of that abrasion on the upper
 6
     right chest.
 7
                    This is 114. This is where I'm
 8
     trying to focus in on his lip. I told you he had
     some abrasions on the inner portion of his lip.
10
               Can you tell what caused the abrasions on
11
     the inner portions of his lips?
12
               Not specifically.
          Α
13
               Would it be consistent with some, with an
14
     impact like involving his teeth or dental work?
15
          Α
               That's possible.
16
                    That's a close-up here showing these
17
     defects or abrasions or shallow lacerations,
18
     whatever you want to call it, here on the left.
19
               Let me just ask the possibilities here.
     Those injuries to the insides, they are injuries on
20
21
     the inside of his mount?
22
          Α
               Correct.
23
               Correct?
          Q
24
          Α
              Correct.
25
               Could it be caused by getting punched in
          Q
```

FAX 314-241-6750

314-241-6750

```
Page 186
 1
     the mouth?
 2
          Α
              Possible.
 3
               Could it be caused by someone falling on
          Q
     their face on pavement?
 4
 5
          Α
               It is possible.
 6
               You have no way of knowing how that
          Q
7
     happened?
 8
          Α
               I do not.
                     116.
                           Showing the same thing, but
10
     with the ruler for scale. I'm getting to the point.
11
               Let me ask you some other things here.
12
     Regarding his face, was there any injury to his
13
     teeth, any chipped or broken teeth or anything?
14
          Α
               No.
15
          Q
               Did you notice on his face, other than the
16
     injuries to the wound that you've described, were
17
     there any contusions?
18
               No contusions.
19
               Contusions, again, is like a bruise.
20
     any swelling to the face, other than what was
21
     associated with the wound you talked about?
22
          Α
               Correct.
               And then I'm going to ask you specifically
23
24
     about his neck. I am going to show you Image 111,
25
     which we already talked about. So this is an image
```

FAX 314-241-6750

314-241-6750

```
Page 187
     of, he's on his back on the table, correct?
 1
 2
          Α
               Correct.
 3
               And --
          Q
               His head is here, his feet is here.
          Α
 5
          Q
               His head is the lower right -- left-hand
     portion. This defect right here, that's an exit
 7
     wound in the jaw, correct?
 8
          Α
               Correct.
               And these are the chest wounds you've
10
     talked about?
11
          Α
               That's one of the abrasions next to it.
12
               So his chin is up a bit; is that right?
          Q
13
          Α
               Correct.
14
               You can fully see his neck in that
          Q
15
     picture?
16
          Α
               Correct.
17
               Did you notice anything when you examined
          Q
     his body, was there any bruising of his neck?
18
19
          Α
               No.
20
          Q
               Any abrasions on his neck?
21
          Α
               No.
22
               Have you ever seen an injury, and injury
          Q
     to a person who has been choked?
23
24
          Α
               Yes.
25
               Okay. Can you describe someone who has
          Q
```

FAX 314-241-6750

314-241-6750

Page 188 1 been choked? 2 Α Well, I would like to clarify for me. 3 Strangulation is a better term, choking is different. 5 Q Choking is like I got something, I swallowed something wrong or whatever? 7 Α Right, right. 8 So you are right, so you've seen someone who has been strangled? 10 Α Correct. 11 What kind of injury would you see on 12 someone who has been strangled? 13 Externally you may see abrasions from, you Α know, people have nails or whatnot and the rough 14 15 nature of the event, you can create abrasions on the 16 outside of the neck. You don't always see them, but 17 you can. 18 Then once you open the neck, when I 19 do a dissection of the neck, you have multiple 20 layers of soft tissue as well as muscle. 21 If enough force is applied there, you 22 can see hemorrhaging within the soft tissues of the 23 neck and then also you have a bunch of structure 24 within your neck called the hyoid bone can be

Gore Perry Reporting and Video 314-241-6750

fracture or injured. And in a strangulation, those

FAX 314-241-6750

25

Page 189 are some of the things I look for in the neck and 1 2 situations where someone has been strangled or has 3 an injury to the neck. In this case you found no injuries to his 4 5 neck, correct? Α Correct, correct. 7 And I know when we are talking, when I say 8 strangulation, I think of that as being like someone who is a cause of death, they are dead from 10 strangulation, but people can be strangled, but then 11 survive, correct? 12 Α Correct. 13 And in some occasions, will you notice bruising to the neck? 14 15 Α Correct. And then, obviously, you're not going to 16 17 cut a living person open to look at the tissue 18 inside? 19 Α Right. 20 But someone who has been grasped very 21 tightly around the neck, you might see bruising? 22 Α Correct. 23 Okay. One more thing about, and at some 24 point, the police department, the police officers, 25 they fingerprint the deceased; is that correct?

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

```
Page 190
 1
          Α
               Correct.
 2
          Q
               And that's just standard protocol,
 3
     correct?
               Correct.
 4
          Α
 5
          Q
               Now, do you ever observe in your
     autopsies, do the police ever dust the body for
7
     prints?
 8
               I haven't specifically seen that unless
          Α
     there is a question or certain circumstance for it
10
     to happen. It is not part of routine procedure, I
11
     guess that's what I'm trying to say.
12
               I guess you've never seen someone, a
13
     police officer try to lift a latent fingerprint off
     of the skin of a deceased person?
14
15
          Α
               I have not, no.
16
               Have you ever heard of that being done?
          Q
17
               Not specifically, no.
          Α
18
                          (Deposition Exhibit Number 8
19
                         marked for identification.)
20
          Q
               (By Ms. Alizadeh) Okay. So another thing
21
     so we can possibly, I don't want to shortcut
22
     anything. I'm going to hand you Grand Jury Exit
23
     Number 8.
24
                    For the record, this is a CD.
                                                    Did
25
     you bring that to me at my requests?
```

FAX 314-241-6750

314-241-6750

```
Page 191
 1
          Α
               Yes, I did.
 2
               Okay. And that CD contains a number of
 3
     photographs and some x-rays; is that correct?
               That is correct.
 4
          Α
 5
          Q
               Have you looked at the photographs and
     x-rays that are on that disc?
 7
               Yes, I have.
          Α
 8
               Now, the photographs that are on those
          0
     discs, on that discs, were taken by who?
10
          Α
               Um, by the autopsy morgue assistant
11
12
               So those are not police photographs?
          Q
13
               No, they are not.
          Α
14
               And so those photographs are taken for a
          Q
15
     different purpose?
16
               It is more for just kind of documentation
17
     of the body, just getting a general overall of what
18
     we are seeing for lack of a better word.
19
               And some of those photographs that are on
20
     that disc are after the autopsy is completed and
21
     body has been closed up.
22
                     In this case you removed the top of
23
     his head and eventually that's been closed up,
24
     correct?
25
          Α
               Correct.
```

FAX 314-241-6750

314-241-6750

Page 192 And have you seen those photographs on 1 Q 2 there? 3 Α Yes, I have seen the photos. 4 And then the x-rays that are contained on Q 5 those discs, are those the x-rays that you took and 6 examined in relation to the injuries that you've 7 testified to as far as when you can see a projectile 8 and so forth? Α Correct. 10 MS. ALIZADEH: Is there anyone here who 11 wants me to put on, to go through these xx rays with 12 Anybody have any questions about that? We can 13 put them in the player right now and bring up, how 14 many x-rays are there? 15 Α I don't know, 42. 16 MS. ALIZADEH: The disc says how many photographs and how many x-rays. 17 18 (By Ms. Alizadeh) How many photographs? 19 Α Photographs 39. 20 MS. ALIZADEH: Is there anyone who has a 21 desire, if we can't do it today, we'll bring him 22 back after his vacation and go through these. 23 there anyone who wants to see these x-rays now, or 24 have any questions about a particular injury or 25 bullet that he might be able to see in an x-ray?

> Gore Perry Reporting and Video 314-241-6750

FAX 314-241-6750

```
Page 193
 1
     Okay.
 2
               MS. WHIRLEY: Just for the record, it is
 3
     about 5:00.
               (By Ms. Alizadeh) I'm trying to finish up.
 5
     I know Dr.
                         is on vacation for a couple of
             I want to get as much as we can. If we have
 6
 7
     to bring you back, we'll worry about that later.
 8
                    And then, so now the rest of his
 9
     testimony about his autopsy is going to be about him
10
     cutting into the body and examining each organ.
11
                    Let me ask you, Dr.
                                                    did you
12
     find anything other than the injuries that you
13
     talked about to the lung and to the tissue and to
14
     the brain, was there anything remarkable about any
15
     of his organs?
16
          Α
               No.
17
               There wasn't any heart disease?
          Q
18
          Α
               No.
19
               No ulcers of the stomach or anything like
20
     that?
21
               No.
          Α
22
               And you are cutting and retrieval of the
     projectiles that's all documented in these
23
24
     photographs; is that correct?
25
          Α
               Correct.
```

FAX 314-241-6750

314-241-6750

```
Page 194
 1
               MS. ALIZADEH:
                              Is there anyone here who
 2
     wants right now to go through those photographs, or
 3
     have any particular question about them?
 4
               All right.
                           They are going to be here,
 5
     they are part of the exhibit and they are something
 6
     that you can examine at a later time. And if at
 7
     all, there is a question later on down the road,
 8
     specifically about something, that I didn't have him
 9
     actually testify about, we will bring him back and
10
     have him testify again. Yes.
11
                                                 The
12
     photographs that we are talking about, they are from
13
     the same string timeframe and same situation that
14
     we've seen up to this point, correct?
15
               MS. ALIZADEH: Yes, they are also
16
     photographs that are taken by a police officer
17
     during the autopsy and so, for example,
18
                   when you are retrieving a projectile,
19
     you have to cut into the body. In this case you
20
     did, and that is actually photographed that you have
21
     cut into the body and in some of these photographs
22
     you can see the projectile laying in the tissue of
23
     the body.
24
               Correct.
          Α
25
               (By Ms. Alizadeh) And then in some of
          Q
```

FAX 314-241-6750

314-241-6750

Page 195 these photographs the projectile is removed from the 1 2 body and sitting on a paper towel, photographed 3 after it is removed? Α Correct. 5 Q But these are all photographs that are taken that day during your autopsy? 7 Α Yes. 8 And in conclusion for today, were you able to determine within a reasonable degree of medical 10 certainty the cause of death of Michael Brown? 11 Yes, gunshot wound to the head and chest. 12 Were you able to determine within a 13 reasonable degree of medical certainty the manner of death of Michael Brown? 14 15 A The manner of death is homicide. 16 So that would be homicide as opposed to a Q 17 suicide or accidental or anything like that? 18 Α Correct. 19 Homicide just means at the hands of 20 another, it doesn't indicate there is any kind of 21 criminal liability, that is a term that's used in 22 forensic pathology, correct? 23 Α Correct. 24 MS. ALIZADEH: Anybody have any other 25 questions about the autopsy or what he did in the

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

```
Page 196
 1
     autopsy?
 2
               Let me look at my notes real quick.
 3
                                                    Can you
     tell me how many exit wounds there were?
 4
 5
          Α
               I'd say three.
 6
                                 How many entrance wounds?
 7
          Α
               I don't include the graze wound as one of
 8
     these things that is in between say 1, 2, 3, 4, 5,
     6.
10
                                And two graze wounds?
11
          Α
               That's 8.
12
                                 Thank you.
13
               (By Ms. Alizadeh) And those again, those
          0
14
     wounds, each of them is documented in your
15
     post-mortem examination report that I provided
16
     copies to the jurors and also is there any way that,
17
     do you have any opinion as to the order in which
     these gunshots were, these wounds were sustained on
18
19
     Michael Brown's body?
20
          Α
               From what I do, the investigation is
21
     ongoing. There is things I'm privilege to. There
22
     is things I do know and things that can be shared
23
     with you later as the process goes on.
24
                     In my opinion in terms of what I can
25
     say the wound to the hand has to occur at a time
```

Gore Perry Reporting and Video
FAX 314-241-6750 314-241-6750 www.goreperry.com

1 AX 314-241-0/30

Page 197 when Michael Brown is close enough to the officer 1 2 for that to have happened. So depending on the 3 circumstances that you guys hear from what I know, 4 there is a point in time where they are in close 5 approximation to each other at the vehicle. 6 In my opinion I feel that's the 7 closest they are for it to happen from the 8 circumstances that I know that that injury occurred. So that has to be early on in the event. In terms 10 of the end of the event, the wound to the top of the 11 head is going to be the last wound that he is going 12 to receive. So in terms of the beginning part 13 with the thumb wound and the part at the end, those 14 15 two I can feel good about saying that I know when 16 those happened, but the ones in between, it is to 17 difficult to say. 18 And given the entrance and exits of the wounds that you've described, and I know that we've 19 20 said there is no entrance wounds on his back? 21 Correct. Α 22 Or on his buttocks? Q 23 Correct. Α 24 Or on the back of the his legs? Q 25 Α Correct.

Gore Perry Reporting and Video

FAX 314-241-6750

314-241-6750

```
Page 198
 1
               No bullet wounds on his legs at all?
          Q
          Α
               Correct.
 3
               And then there is some wounds to the
     anterior portion of his torso?
          Α
               Correct.
               And then the wounds to his arms are kind
          Q
7
     of like all over the joint, right?
 8
          Α
               Right.
               Any way of telling what position that body
10
     was in when those wounds were sustained?
11
          Α
               No.
12
               Given that they're arms, it just depends
     on where his arms were?
13
14
          Α
              Correct.
15
          Q
               And in relation to where the gun was?
16
          Α
               Correct. But I can say to sustain wounds
17
     to the chest, the chest is fixed, those with the
18
     arms it can be in a number of positions.
19
               MS. ALIZADEH: I don't have any other
20
     questions. Does anybody else have anything they
21
     want to cover today?
22
                               Just one. He did have an
     entrance wound to the back of his --
23
24
               Anatomical correction, the anatomical
          Α
25
     position, the dorsal on the back side, posterior
```

FAX 314-241-6750

314-241-6750

```
Page 199
     portion of that right forearm there is a wound
 1
 2
     there.
 3
               (By Ms. Alizadeh) So if someone in this
     position and it is a gunshot wound, the gun could
 4
     have been fired from behind them?
 6
          Α
               Correct.
 7
               Someone in this position, the gunshot come
     from the front of them, correct?
 8
          Α
               Correct.
10
          Q
               Or in this position, or in this position?
11
          Α
               Correct.
12
               It is difficult to say, correct, or
          Q
13
     impossible to say?
14
          Α
               Correct.
15
                                              The reason
16
     that you are saying most likely the last is because
17
     the wounds to the chest and the wounds to the arm he
18
     would of had to be somewhat upright to have those
19
     somewhat?
20
          Α
               What's more of an issue he could still be
21
     mobile, he could be moving around, once he got this,
22
     he's going to be unconscious.
23
                                 He's going to be down and
24
     there is no way to get to his chest if he were down.
25
          Α
               Right, that is true.
```

FAX 314-241-6750

314-241-6750

```
Page 200
               MS. ALIZADEH: Anybody else?
 1
 2
                                                  The
 3
     police officer that was there present with you as
     you were doing your examine.
          Α
               There were three there.
                                There were three there?
 7
          Α
               Which one?
 8
                                The one who takes the
     photos.
10
          Α
               There were two kind of crime scene
11
     officers and then there was a detective.
12
                                Okay.
13
               But one guy was taking pictures.
          Α
14
                                As you are doing your
     exam, like you said before, you are speaking, right,
15
16
     you are talking while you are doing your examine?
17
               What do you mean?
18
                                Are you speaking while you
19
     are --
20
                                Transcribing.
21
               I do it after I finish the autopsy.
          Α
22
                                Oh, okay. So there is no
23
     talking, you are just taking pictures?
24
               It is just pictures, I'm directing them
          Α
25
     saying what I want them to take pictures of.
```

FAX 314-241-6750

314-241-6750

```
Page 201
 1
                                Oh, okay.
 2
          Α
               As I am going through the autopsy, I want
 3
     pictures of this, I need a picture of this, this is
     important I think, I need that, that's the extent of
 4
 5
     the talking. I'm not, the generation of this
 6
     report, this is happening once I complete
 7
     everything, I go back to my office with all of my
 8
     notes and then I do this on my Dictaphone after
     everything is done.
                                They were there also, they
10
11
     were present also when the x-rays were going on?
12
               X-rays, no, they came, once you saw that
13
     picture when he's out of the bag, he has his clothes
14
     on and the placard, that's when they were showing up
15
     and that's when it started. The x-rays are done
16
     before, the process of the body being processed for
17
     me to do my examination, that's happening.
18
                                Okay.
19
               (By Ms. Alizadeh) And, in fact, some of
20
     the x-rays, the x-rays are done with his clothing
21
     on, correct?
22
          Α
               Correct.
23
               And like in some x-rays you can see the
     belt buckle on his pants and so forth?
24
25
          Α
               Correct.
```

FAX 314-241-6750

314-241-6750

```
Page 202
               The zipper of his pants, I can't remember?
 1
          Q
 2
          Α
               The clothes are on.
 3
               X-rays are done before the clothes are
          Q
 4
     removed and you begin the examination, correct?
 5
          Α
               Correct.
 6
                                            I think this
 7
     might be the last question. So in essence, while
 8
     you are doing your examine and you have the
     onlookers or the people that watch, they take the
10
     photographs, no one actually knows what you are
11
     going to put into your report until your report is
12
     done, is that correct?
13
               Right.
          Α
14
                                Thank you.
15
          Q
               (By Ms. Alizadeh) Just then for the
16
     record, I know this, your report was done in, I
17
     would say in my experience with the Medical
18
     Examiner's Office, in a little speeder fashion,
19
     sometimes it takes six weeks for me to get your --
20
          Α
               And even longer.
21
               And in this case there was, there was a
          Q
22
     directive that this was going to be a priority?
23
          Α
               Right.
24
               This was to be done?
          Q
25
          Α
               Correct.
```

FAX 314-241-6750

314-241-6750

Page 203 1 Did you feel that you didn't have 2 sufficient time to complete your report at all? 3 No, I felt in terms of the adequacy of my report, I was done with it, the only thing that I 4 5 wasn't finished with when I was told that I needed 6 to finish the report was the histological section of 7 tissue, that takes awhile for that to be processed. 8 It can take four weeks sometimes, but I had to speed 9 that along too. 10 So I had to finish the bulk of the 11 report, and then if you look at my last statement. 12 I comment at the time, the histology examination 13 will be issued as a supplemental report. 14 That portion I was not able to 15 include at the time of this. So this, until the 16 histology, which I testified to you guys about this 17 happened after I did this, so that's an additional 18 important information which helped me understand 19 better that gunshot wound to the hand. 20 At this time, I was suspicious of it 21 being a close range wound until histology came 22 through, I couldn't definitively say. So in my 23 report I say, hey, I see these, I see these 24 discolorations, I have to my histology to confirm.

Gore Perry Reporting and Video 314-241-6750

So now I'm testifying I got that

www.goreperry.com

25

Electronically signed by

```
Page 204
     back, I can now say that wound is a close range
 1
 2
     wound so, but outside of the rest of everything
 3
     else, everything was just fine.
 4
          Q
               So, Dr.
                                  you had a supplement
 5
     where you talked about the examination of that
 6
     tissue?
 7
               Yes, I issued that is supplemental report.
          Α
 8
               Is that completed yet?
          0
          Α
               That is not completed.
10
               Okay. When that is completed, would you
          Q
11
     provide that to me as soon as it is done?
12
          Α
               Yes, I will.
13
               And so I just want to make clear, this was
     done in a speedy manner, was there anything about
14
15
     this that you felt that if you had more time or were
16
     given, you know, more time to write your report,
17
     that it would be a better report or more accurate?
18
          Α
               No.
19
               Did you just put everything else on the
20
     back burner and you did this first, is that how that
21
     happened?
22
          Α
               No, I'm kind of multitasking.
23
          Q
              Okay.
24
            I made sure I got it done.
          Α
25
               So is there a date on your report, the
          Q
```

FAX 314-241-6750

314-241-6750

```
Page 205
 1
     date that it was completed?
 2
          Α
               It just says a start time.
 3
               Do you sign it and date it?
          Q
 4
          Α
               No, I just sign it. I do know, was that
 5
     Friday, whatever that.
 6
               So the shooting happened a Saturday.
          Q
 7
          Α
               I want to say that Friday I was done with
 8
     it.
               Okay.
          Q
10
               I signed it that day. And then I gave it
11
     to the officer, Monday an officer came and picked up
12
     my report, which would have been what, the 18th of
13
     that month.
14
               Until the officer picked up that report,
15
     you did not discuss this with any police officers
16
     what your findings were?
17
                            The only people who were
               No, no one.
18
     privy to what I was seeing, what I was dealing with
19
     were the officers who were in the autopsy with me,
20
     that's it.
21
               But as far as like them knowing what the
22
     gunshot entrance and exit is --
23
          Α
               No.
24
               -- you didn't explain any of that to them?
25
          Α
               No.
```

FAX 314-241-6750

314-241-6750

```
Page 206
 1
                                                   Ιt
 2
     talks on the last page here about fingernail
 3
     clippers and scrapings?
               Yes.
          Α
 5
                                Is that in your report or
     is that done by someone else?
 7
                                      The lab is going to
          Α
               That is someone else.
 8
     be responsible for processing that, I just procure
     the items and I pass it to St. Louis County Police
10
     Department as evidence and just take it to the lab,
11
     which process it.
12
               MS. ALIZADEH:
                             Anyone else?
13
               Sheila, do you have any questions?
14
               MS. WHIRLEY: I think we are probably all
15
     questioned out.
16
               MS. ALIZADEH: It has been a long day and
17
     thank you for being patient. I don't want anybody
18
     to feel like I'm trying to leave something out here,
19
     we are not rushing you in any way.
20
               I'm fine. If you got a question, feel
21
            I'm not upset. I'm glad I had the
22
     opportunity.
23
               MS. ALIZADEH: All I'm saying the photos
     are here and available. I just, I know from being a
24
25
     layman myself, I can look at these and, you know,
```

www.goreperry.com

d0e125b1-3744-4b93-80e6-f9de22cfbddf

Electronically signed by

```
Page 207
     but, you know, he can explain them if you want him
 1
          If you later look at them, but he has already
 3
     testified about what he found and where he found
            So I didn't feel it would be a good use of
     your time to go through each of the photographs
 5
     right now, but they are here for you to examine,
 6
 7
            This will conclude the testimony for today.
     okay.
 8
                (End of the hearing for September 9,
 9
     2014.)
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
```

```
Page 208
 1
 2
     State of Missouri
 3
                         SS.
     County of St. Louis
 4
 5
                            a Licensed Certified Court
          I,
     Reporter by the Supreme Court in and for the State
 7
     of Missouri, duly commissioned, qualified and
 8
     authorized to administer oaths and to certify to
     depositions, do hereby certify that pursuant to
10
     Notice in the civil cause now pending and
11
     undetermined in the County of St. Louis, State of
12
     Missouri.
13
          The said witness, being of sound mind and being
14
     by the grand jury first carefully examined and duly
15
     cautioned and sworn to testify to the truth, the
16
     whole truth, and nothing but the truth in the case
17
     aforesaid, thereupon testified as is shown in the
18
     foregoing transcript, said testimony being by me
19
     reported in shorthand and caused to be transcribed
     into typewriting, and that the foregoing page
20
21
     correctly sets forth the testimony of the
22
     aforementioned witness, together with the questions
23
     propounded by counsel and grand jurors thereto, and
24
     is in all respects a full, true, correct and
25
     complete transcript of the questions propounded to
```

```
Page 209
 1
     and the answers given by said witness.
 2
               I further certify that the foregoing pages
 3
     contain a true and accurate reproduction of the
     proceedings.
          I further certify that I am not of counsel or
     attorney for either of the parties to said suit, not
 6
7
     related to nor interested in any of the parties or
 8
     their attorneys.
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
```

```
Page 210
 1
     COURT MEMO
 2
 3
     State of Missouri vs. Darren Wilson
 6
 7
     CERTIFICATE OF OFFICER AND
 8
     STATEMENT OF DEPOSITION CHARGES
10
11
     DEPOSITION OF Grand Jury
12
     9/9/2014
13
     Name and address of person or firm having custody of
14
15
     the original transcript:
16
17
     St. Louis County Prosecuting Attorney's Office
18
     100 S. Central Ave.
19
     Clayton, MO 63105
20
21
22
23
24
25
```

FAX 314-241-6750 314-241-6750 www.goreperry.com

```
Page 211
 1
     ORIGINAL TRANSCRIPT TAXED IN FAVOR OF:
 2
 3
     St. Louis County Prosecuting Attorney's Office
     100 S. Central Ave.
     Clayton, MO 63105
 5
     Total:
 7
 8
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
```

Gore Perry Reporting and Video 314-241-6750

www.goreperry.com

Electronically signed by

	Page 212
1	Upon delivery of transcripts, the above
2	charges had not been paid. It is anticipated
3	that all charges will be paid in the normal course
4	of business.
5	GORE PERRY GATEWAY & LIPA REPORTING COMPANY
6	515 Olive Street, Suite 700
7	St. Louis, Missouri 63101
8	IN WITNESS WHEREOF, I have hereunto set
9	STATEMENT OF DEPOSITION CHARGES
10	my hand and seal on this day of
11	Commission expires
12	
13	Notary Public
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	