

MEDICAL EXAMINERS OFFICE
FOURTH MEDICAL EXAMINER DISTRICT OF FLORIDA

March 18, 2013

Consult on the death of Todd Shane Truman
Date of birth: 5th September 1980
Autopsy case number: AZ1251-03911
Autopsy pathologist: Dr. Wu Jia Hao
Date of death: 24th of June 2012
Date of autopsy: 25th of June 2012
Forensic consultant: Dr. Wee Keng Poh

Documents received via email:

1. Police report on unnatural or sudden deaths
2. Scene photographs
3. Autopsy photographs
4. Autopsy report
5. Body diagrams
6. Toxicology report
7. Suicide notes (2) from the decedent
8. Family consultant (Dr. Adelstein)
9. A letter addressed to the investigating officer: Sgt. Muhd Khaldun by the funeral director Mr. Richard Todd
10. An email from Sgt. Khaldun to Dr. Poh on 15th October 2012 regards Dr. Adelstein's opinion on the death of Mr. Truman.
11. A letter from Dr. Poh explaining to Sgt. Khaldun the reasons for the cause and manner of death of Mr. Truman.
12. An email from Dr. Poh dated 17th October 2012 requesting a conference to discuss Dr. Adelstein's opinion.
13. An email from Sgt. Khaldun dated January 14th 2013 regarding the autopsy report and the coroner's inquiry.
14. A letter from Dr. Poh to Sgt. Khaldun regarding Dr. Adelstein's opinion and the opinion of the funeral director Mr. Todd

I have reviewed all the information provided by you on the death of Mr. Truman and have no doubt based on my training and experience for the past 32 years as a board certified Forensic pathologist that the decedent hanged himself. I have performed hundreds of suicidal hangings, homicidal ligature strangulations and other hangings that come under the auto-erotic sexual asphyxia category over the long period that I have been a medical examiner.

Let us examine the social and medical history of the deceased:
He is a successful, highly educated young man who was prone to bouts of depression and was even prescribed anti- depressant medication.

There are 2 suicide notes in his handwriting addressing the good times he had that are very personal and intimate. Such events are only known to him.

Am I to postulate based on Dr. Adelstein's opinion that these notes are forged? This is not a robbery. There is nothing stolen from his place of residence.

Now let us look at the autopsy:

The autopsy is typical for that seen in a hanging suicide. The ligature and the subjacent ligature mark are consistent with each other. The dependent lividity on both the upper and lower extremities is what one sees in hanging. The "bruises" on the back of the hands is a result of dependent lividity and the subsequent postmortem passive oozing of blood out of the distended vessels giving that dusky hue to the skin and leading to the misinterpretation by Dr. Adelstein as resulting from trauma. There are no conjunctival petechiae nor are there petechiae around the eyes or on the face. It is very unusual to find petechiae in either site in suicidal hangings. There is no trauma to the body or in the head that is documented by the autopsy pathologist. The photographs taken at the autopsy document the lack of trauma other than that caused by the ligature mark. This is a well nourished young man and if this was a garroting or a homicidal strangulation he would have fought back and there would be evidence of a struggle which is not described by the pathologist who performed the autopsy.

There is not a single abrasion, contusion or laceration on the deceased face or body to suggest a physical altercation between him and any other party. There are no restraint injuries whatsoever. The ligature mark is classical for that seen in hangings and "dissecting" out the ligature mark to fit an opinion is not possible. The hyoid bone and thyroid cartilage are intact. The strap muscles of the neck have no hemorrhage. I have never seen ligature strangulation where there was no hemorrhage in the strap muscles or in the soft tissue of the neck. Oftentimes the hyoid bone and or the thyroid cartilage are fractured.

The toxicology does not reveal the presence of illegal drugs of abuse or abuse of prescription medication which theoretically could have incapacitated him rendering him incapable of a struggle.

As an embalmer whose job it is to prepare bodies for viewing the funeral director is in no position to render an expert opinion in this case. He has no specific education or experience or training in this highly specialized field and his opinion should not be expressed at the coroner's inquest.

If there are any other questions that I can address please forward them to me and I will assist in this matter.

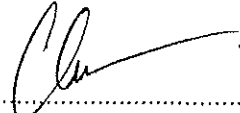
Thank you,

Dr. Valerie Rao M.D.,
Chief Medical Examiner, District 4 medical Examiners Office,
Jacksonville, Florida 32206

Valerie Rao M.D.

3/18/13

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f. Director
Forensic Medicine Division
Health Sciences Authority