OFFICE OF THE MEDICAL EXAMINER
701 W. Jefferson St.
Phoenix, AZ 85007

MEDICAL EXAMINER REPORT

DECEDEENT: Christopher Paul Blackwell
CASE: 13-05985
DATE OF EXAMINATION: 09/13/2013
TIME: 1057 Hours

PATHOLOGIC DIAGNOSES

I. Multiple psychiatric disorders
   A. Long history of recurrent ingestion of foreign materials
      i. Diffuse abdominal pain (7/14/2013)
         1. History of swallowing the rims of a pair of glasses six weeks ago
         2. History of ingestion of a pencil 3 weeks ago
         3. History of ingestion of several screws a few days ago
      ii. History of repeat laparotomy for removal of foreign objects including razor blade, glass, and box cutter
      iii. History of gastrointestinal mucosa and submucosa injury
   iv. Stomach infection
   v. Colonoscopy (7/15/2011)
   vi. Esophagogastroduodenoscopy (8/25/2011)
   vii. Colonoscopy (9/6/2011)

PATHOLOGIC DIAGNOSES CONTINUED

CAUSE OF DEATH: Complications of recurrent foreign body ingestion
OTHER: Panhypopituitarism
MANNER: Accident

9/25/13
Date Signed

JOHN X. HU, MD
MEDICAL EXAMINER
PATHOLOGIC DIAGNOSES CONTINUED

viii. Colonoscopy (9/8/2011)
ix. Colonoscopy with biopsy (9/9/2011)
x. Esophagogastroduodenoscopy with foreign body removal (12/9/2011)
xi. Esophagogastroduodenoscopy (1/27/2012)
 xii. Esophagogastroduodenoscopy (9/14/2012)
 xiii. Esophagogastroduodenoscopy with foreign body removal (11/18/2012)
xiv. Esophagogastroduodenoscopy (12/27/2012)
xv. Upper gastrointestinal endoscopy (1/18/2013)
xvi. Esophagogastroduodenoscopy with foreign body removal (1/29/2013)
xvii. Esophagogastroduodenoscopy (2/7/2013)
xviii. Esophagogastroduodenoscopy with foreign body removal (2/26/2013)
xix. Esophagogastroduodenoscopy (3/26/2013)
xx. Colonoscopy (4/12/2013)
xxi. Esophagogastroduodenoscopy with foreign body removal (5/3/2013)

B. History of gas inhalation
C. History of self-mutilation
   i. History of cutting, stabbing and burning
   ii. Numerous scars present on the neck, chest, upper and lower extremities
D. Many suicidal attempts
E. Schizoaffective disorder
F. Mood disorder
G. Attention deficit hyperactivity disorder
H. Impulse control disorder
I. Borderline personality disorder
J. Post traumatic stress disorder
K. Anxiety

II. Panhypopituitarism
   A. Congenital absence of pituitary gland
   B. Hypoglycemia
   C. Thyroid disease
   D. Replacement therapy

III. Asthma

IV. History of seizures
V. Remote history reactive airway disease
VI. History of microhematuria
VII. History of multiple trauma
   A. History fracture of right hand
   B. History of hand sprain
   C. History of knee pain
   D. History of patellar injury
   E. History of toe laceration
   F. History of laceration of left forearm
   G. History of head trauma due to being hit with a bat
VIII. PPD positive status
      A. Status post INH treatment
IX. Constipation
X. Premature birth
   A. Thirty-four weeks gestational age
   B. Hospitalized first year of life
XI. History of tonsillectomy, right patellar dislocation surgery
XII. History of duodenal surgery for pyloric outlet hypertrophy at age one
      A. Status post Nissen fundoplication and G tube placement
XIII. History of undescended testicle, status post surgery
XIV. History of urinary tract infection
XV. History of deep vein thrombosis with questionable pulmonary embolism

CIRCUMSTANCES OF DEATH

This 23-year-old male, with a history of swallowing foreign objects, was pronounced in a local hospital. Diagnostic imaging and surgery revealed a severe stomach infection and multiple foreign objects that had been removed prior to death.

EXTERNAL EXAMINATION

The body is received in a zippered body pouch secured by evidence seal #0008803.
CLOTHING AND PERSONAL EFFECTS

The body is unclad.

EVIDENCE OF MEDICAL INTERVENTION

There is a nasogastric tube in place. There is an endotracheal tube present in the mouth. There is a central line present on the right neck. There is an open laparotomy incision present on the midline upper chest. There is a Foley catheter in place. There is an intravenous line present in the left wrist.

EVIDENCE OF TRAUMA

There is an elongated contusion present on the left knee and left leg. There is no other acute trauma noted.

SCARS, TATTOOS, AND OTHER IDENTIFYING BODY FEATURES

There is an open laparotomy incision present on the midline abdomen. There are numerous linear to elongated scars present on the left and right forearms, left knee, right knee, left leg, and right leg. There are multiple linear surgical scars present on the left neck, right neck, and the left upper chest. These scars are consistent with known history of self mutilation.

There are multiple tattoos present on the right arm, left arm, and front of right forearm.

GENERAL EXTERNAL EXAMINATION

The body is unembalmed. The body is that of a Caucasian male 72 inches in length and weighing 228 pounds. Rigor mortis is fully developed. Livor mortis is present posteriorly and fixed. The scalp hair is red. The irides are gray. There are no lesions of the sclerae or conjunctivae. Facial hair consists of very short facial hairs on the beard and moustache area. Dentition is natural. There are no acute oral mucosal lesions. The trachea is in the midline. There are no palpable axillary, cervical, or inguinal masses. The thorax is well developed and symmetrical. The abdomen is protuberant with an open laparotomy incision present covered with plastic material. The external genitalia are those of a normal male, with testes in the scrotal sac. The extremities are well developed and symmetrical, with no significant cyanosis, clubbing, edema, or deformity. Fingernails are unremarkable. The toenails are painted purple. The soles of the feet are not remarkable. The posterior aspects of the torso are symmetrical and devoid of any acute injury patterns. General appearance is compatible with the reported age of 23 years.

TOXICOLOGY SPECIMENS

Toxicology specimens are collected and held.
FINAL SUMMARY

Based on the external examination findings, medical records, and investigative history, as available to me, it is my opinion that Christopher Paul Blackwell, a 23-year-old Caucasian male, died as a result of complications of recurrent foreign body ingestion. Panhypopituitarism is contributory to his death.

The manner of death is accident.

JXH/og
D:09/13/2013
T:09/23/2013

The Maricopa County Medical Examiner’s Office is required by statute (A.R.S. § 11-594(A)(2) and (4)) to certify the cause and manner of death following completion of the death investigation of each case over which it assumes jurisdiction, and to promptly execute a death certificate, on a form provided by the state registrar of vital statistics, indicating the cause and manner of death. The form provided by the state registrar of vital statistics includes five manners of death: homicide, suicide, accident, natural, and undetermined. The determination of manner of death is a forensic determination by the pathologist predicated upon the totality of all then-known forensic evidence and other circumstances surrounding the cause of death; it is not a legal determination of criminal or civil responsibility of any person(s) for the death.