A Camilo

COUNTY OF LOS AND	GELES				CASE	REPORT				EPARTMENT OF CORONE
	APAREN	ACC:	IDEN	т						CAME NO
	SPECIAL	CIRCUMSTANCES								2010-01701
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HAIM, CO	OREY	IAN					AKA			#
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PLACE OF DEATH / PLA	CE FOUND	ADDRESS	OR LOCATIO	ON				СПУ		ZIP
HOSPITAL			. BUEN	A VIST	A STRRET			BURBANK		91505
PROVIDENCE S	ST. JOSE	PH MED CNTR		TIME						
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OTHER AGENCY INV. O					PHONE	RES	PORT NO.	NOT	FIED BY	МО
LAPD NORTH H		OD				то		DATE		TIME
JULIE M. BISHO	P	-				LOS ANG	ELES FSC		3/10/201	
FINGERPRINTS?	Yes	CLOTHING	Yes			PA RPT	No		ORTUARY	
MED. EV.	Yes	INVEST. PHOTO #	13			SEAL TYPE		н	OSP RPT	Yes
PHYB. EV.	No	EVIDENCE LOG	Yes			PROPERTY	7 No	н	DEP CHART	Yes
SUICIDE NOTE	No	GBR NO				RCPT. NO.		Pf	NO. NO	000044826
CENTER WHERE COUGH. ON 3/5/. MULTIPLE PRES USED). HISTORY SUSPECTED.	ED ONTO BACK. HIS E DEATH 2010 PRES CRIPTION OF HEAD	HIS KNEES. HIS S MOTHER CALL WAS PRONOUNG SCRIBED DIAZE N MEDICATION A RT MURMUR AN	MOTHE ED 911. CED IN T PAM, CA ABUSE. I ID POSSI	R HELPEI LAFD RA HE EMER RISOPRO DECEDEN	D HIM BACK 60 TRANSPO GENCY ROO DOL, HYDRO T ADMITTEI	INTO BED. ORTED THE M ON 3/10/2 CODONE-A O IN PAST IN NO OBVIOU	HIS BODY BEG DECEDENT TO 2010 AT 0215 HO APAP, HALOPERI VIERVIEWS TO	AN TO SHAKE PROVIDENCE URS. ON 3/9/2 DOL, AND ZY USING COCAL AUMA WERE F	IN ALL DIR SAINT JOSE 010 HAD A PREXA. HIS VE (UNKNO	ECTIONS AND HIS TH MEDICAL FEVER AND TORY OF WN WHEN LAST
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County of Los Angeles, Department of Coroner Investigator's Narrative



Case Number: 2010-01701

Decedent: HAIM, COREY IAN

Information Sources:

Los Angeles Fire Department Emergency Medical Service Report #CD 072378

Providence Saint Joseph Medical Center, (818) 847-4043, Medical record #N000044826

LAPD N. Hollywood Officers Orellana and Castaneda, (818) 623-4016, Inc#100310000443

LAPD N. Hollywood Officers Escobedo and Espinosa, (818) 623-4016, Inc#100310000443

Investigation:

On 3/10/2010 at 0434 hours Marcus Duson from Providence Saint Joseph Medical Center reported this accidental (suspected prescription medication overdose) death to Lt. Larry Dietz of the Forensic Science Center. Lt. Larry Dietz assigned me this field call at 0448 hours. I arrived at Providence Saint Joseph Medical Center at 0520 hours. I completed my investigation there at 0555 hours and arrived at the decedent's residence at 0605 hours. I completed my investigation there at 0640 hours and arrived at LAPD North Hollywood station at 0655 hours. I completed my investigation there at 0750 hours and returned to the Forensic Science Center. Supervising Forensic Attendant Julie Bishop transported the decedent to the Forensic Science Center.

Location:

Injury: unknown

Death: Providence Saint Joseph Medical Center - 501 S. Buena Vista St., Burbank, CA 91505

Informant/Witness Statements:

According to the EMS report, on 3/10/2010 at 0054 hours, LAFD RA 60 was dispatched to 3640 Barham Boulevard, arriving at 0105 hours. Patient in bed supine, multiple "drug use per family". Unknown down time. Patient "in bed all day". At 0104 hours blood pressure 0, pulse 0, respirations 0, in asystole. Fixed/dilated pupils. Blood glucose 162. No trauma, no vomitus. Endotracheal tube placed. Positive chest rise, pulses with CPR. Given normal saline, narcan, epinephrine x4, and atropine x2, bicarb x1. Defibrillated x1. Transported to the hospital at 0125 hours. Arrived at the hospital at 0134 hours. Restoration of pulses at 0138 hours. Medication history of Haldol, Seroquel.

According to the medical records provided by Providence Saint Joseph Medical Center, the decedent presented to the emergency room via LAFD RA 60 on 3/10/2010 at 0134 hours with CPR in progress. No injuries noted. Cardiac rhythm went from agonal to asystolic. CPR stopped at 0158 hours due to return of pulse 160, blood pressure 144/58. Faded back to asystole. CPR continued, however, the decedent remained asystolic. Dr. Pamela Biren pronounced death in the emergency room on 3/10/2010 at 0215 hours. Cut clothing to expose femoral artery. History: recovering drug addict, fracture right tibia, arrhythmia, hypertension. No known allergies. On 2/28/2010 prescribed Carisoprodol and Diazepam by emergency room doctor.

According to the LAPD report, on 3/10/2010 at approximately 0350 hours Officers Orellana and Castaneda received a radio call of a death investigation at St. Josephs Hospital. Upon arrival to the hospital they met RA 60. RA 60 explained that upon their arrival at the subject's residence, Corey Haim was given CPR by his mother in an attempt to revive Corey Haim with negative results. RA 60 observed an empty prescription bottle of Haldol. LAFD Engine 76 arrived approximately 5 minutes prior to RA 60. RA 60 transported Corey Haim to St. Josephs Hospital and continued administering CPR. Upon arrival at the hospital Corey Haim was pronounced dead at 0215 hours by Doctor Pamela Biren. Probable cause of death was from cardiopulmonary arrest.



County of Los Angeles, Department of Coroner Investigator's Narrative



Case Number: 2010-01701

Decedent: HAIM, COREY IAN

According to the LAPD report, on 3/9/2010 (date incorrect) at 0405 hours Officers Escobedo and Espinosa responded with Officers Castaneda and Orellana to Saint Joseph's Hospital for a death investigation. Officers Escobedo and Espinosa conducted a follow-up to the residence of Corey Haim.

stated that her advised that she also resides at the residence. residence. son Corey Haim had been sick in the recent past but she believed he had been getting better. stated that on 3/8/2010 at approximately 1630 hours her son told her that he wasn't feeling well and had a fever. She stated her son went to bed and coughed all throughout the night. Her son stayed in bed all day on 3/9/2010 and she made him some tea and vegetable soup. She gave him Robituson and Advil every 4 hours because he complained of a severe headache, and she gave him Tylenol for his fever. He had a suppository because he was feeling nauseated and a Zophren. His breathing was short and fast and she told him not to lie on his back. Later in the evening he asked her to lay down with him because he wasn't feeling well. She held his hand and fell asleep. She woke up when she heard him get up and walk to the kitchen. She then heard him return to the bedroom where her fell down onto his knees. She helped him up and put him back in bed. She asked him what was wrong and he did not respond. She called 911. He stopped breathing and was unresponsive. She was advised by the 911 operator to conduct CPR until responding units could arrive. She performed CPR until the paramedics arrived. Sgt. McNeil arrived on scene and advised. There were several bottles of prescription medication in the name of Corey Haim in his bedroom in the drawer next to his bed. Zyprexa (4 left in bottle), Diazepam (1 left in bottle), Haloperidol (empty), and Carisoprodol (empty). All prescribed 3/5/2010. Found in the mother's purse, prescribed to Corey Haim, was Hyrocodone APAP (also prescribed 3/5/2010 and empty). All medications filled at CVS Pharmacy and prescribed by Dr. Rod Amiri. His mother stated that she took the Hydrocodone bottle with her to St. Joseph's when her son was transported. That was the only bottle that was completely empty. When she returned from the hospital she emptied the other bottles into the toilet because she didn't want anyone else to get hold of the medication and she didn't know the police would be responding to her residence.

at her residence. She told me that the decedent stayed in bed all day on 3/9/2010 with a fever (101 degrees to 99 degrees) and cough. He stayed in the bedroom most of the day and spent some time on the couch. He complained of a headache from the coughing. She gave him 2 Advil every 4 hours. He vomited and felt nauseous. She gave him 1 Zofran tablet, 1 tablespoon of Robitussin, and a suppository. He complained of a lower backache most of the day. He had been doing well lately. He was not getting "high" (prescription medication high) because he had a fever. At approximately 0030 hours he got out of bed and it appeared he was on his way to the bathroom or the kitchen. He appeared to be disoriented. He fell onto his knees between the television and the bed. She asked him what was wrong. He said he did not know. She helped him onto the bed. His body began to shake in all directions and his eyes rolled back. She called 911 and was instructed to place him on the floor and begin CPR. For a few hours before he collapsed he was not breathing well, it was abnormally fast. The decedent usually took 7 Tylenol PM's every night to help him sleep. He did not take any the night of 3/9/2010. He was in and out of rehabilitation for prescription drug use. No history of alcohol or illegal/illicit drug use except marijuana use - possibly last used 2 days ago. Cigarette smoker. Medical history included a heart murmur diagnosed many years ago, possibly had high blood pressure. No heart attack or stroke history in the family. She flushed 7 Carisoprodol down the toilet after he died. Dr. Rod Amiri gave him 1/2 the amount he usually did, he was trying to take him down, reduce the amount of medication he was prescribing to him. The decedent was not depressed or suicidal. No known history of suicidal ideations or attempts. No suicide note found.

Kr



County of Los Angeles, Department of Coroner Investigator's Narrative



Case Number: 2010-01701

Decedent: HAIM, COREY IAN

Scene Description:

The hospital scene appears to be a typical room within the emergency room. The decedent is located on a gurney in the middle of the room. There is medical equipment throughout the room. The residential scene is a 2 bedroom apartment located in a sprawling complex. The residence is well-furnished and tidy.

Evidence:

From the residence I collected prescription medications diazepam (empty), carisoprodol (empty), hydrocodone-apap (empty), haloperidol (empty), Zyprexa (4 of 7 remained) – all of these were prescribed on 3/5/2010. In the bedroom trashcan I found over the counter medication Tylenol PM (3 of 20 remained), chloraseptic lozenges, phenol oral anesthetic spray, and vaporub. Prescription medication Levaquin (1 in a blister pack) and Bystolic (1 of 7 remained) were found in the bedroom trashcan without prescription information. I booked all the Forensic Science Center.

Body Examination:

The decedent is supine on a hospital gurney and is covered up to his neck with a hospital sheet. An endotracheal tube with mouthblock, right antecubital IV, and left hand dorsum IV are in place. EKG patch and defibrillator pad residue noted on the chest and abdomen. The decedent is wearing a pair of cut dark gray shorts. An unknown light green substance is on his tongue and lips. A scab noted to the inner right index finger. Multiple tattoos were noted: "Thou Shall Not Fall", "LB 12", and a bat on the right shoulder, a set of paws and unknown writing on the right forearm, a bat on the inner left wrist, clown face with flames on the upper left chest, "The Haimster" and design on the upper left arm, design and "2 2 2" on the outer right leg, unknown design on the upper left back. No scars or obvious signs of trauma were found. Rigor mortis was rated as 0 throughout the decedent. Lividity was consistent with the supine position (as seen at the hospital) and blanched with finger pressure.

Identification:

LFIS fingerprints identified the decedent as Corey Haim on 3/10/2010 at 0624 hours.

Next of Kin Notification:

I spoke with

st her residence and verified that she was notified of the death.

Tissue Donation:

Unknown.

Autopsy Notification:

None requested.

KIMBERLEY ARNOLD 498313

SUPERVISOR

3/10/2010

Date of Report

 3_A

CAPSULE C LIQUID L POWDER P SUPPOSITORY S

TABLET

NOTE: IF MEDICATION IS NOT IDENTIFIED, MAKE NOTE OF TABLET COLOR, SHAPE, MARKINGS AND NUMBER.

2010-0701 HAIMI COREY ACC 3/10/2010

PAGE | OF 2

R _X Number	Date of Issue	Drug Name / Description	Number Issued	Number Remaining	Form	Dosage	R _X Directions	Physician	Pharmacy Phone / Comments
C891071	3/5/	DAZEPAM	21	0	T	10me	ITAB 3 KS A DAY.	ROD AMIRI	
891069	3/5/ 2010	ZXPREXA	7	4	T	7.5mG	ITAB AT BEOTIME.	ROD AMIRI	
891073	3/51	CAKISOPRODUL	57	0/7	T	350m6	ITAD 3x5 A DAY.	ROO AMIRI	7 REMAINED, THEN MOTHER FLUSHED THEM DOWN TOLET
		HYDROCODONE- APAP	42	0	4	7.5- 750MG	1-2 TABS EVERY 6 HOURS AS NEEDED	ROO AMIRI	
143693	3151	HALOPERIDOL	7	0	T	10m6	ITAB A DAY AS WEEDED.	ROD AMIRI	
NO RY INFO		LEVAQUN	UNK		T	500mg			
NO RY INFO PROPESSIONAL SAMPLE		BYSTOLIC	.7	١	T	5m6			

PARAPHERNALIA DESCRIPTION: K. alrold
INVESTIGATOR
3/10/2010

 3_A

FORM:

CAPSULE C
LIQUID L
POWDER P
SUPPOSITORY S
TABLET T

NOTE: IF MEDICATION IS NOT IDENTIFIED, MAKE NOTE OF TABLET COLOR, SHAPE, MARKINGS AND NUMBER.

200-0701 HAIM, WEY ACC 3/10/2010

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									PAGEOF
R _X Number	Date of Issue	Drug Name / Description	Number Issued	Number Remaining	Form	Dosage	R _X Directions	Physician	Pharmacy Phone / Comments -
OVER THE COUNTER		TYLENOL	20	3	GEL- CAPS	500m6		,	
OVER THE COUNTER		CHLORASIEPTIC LOZENOES	UNK	3	LORENCE	UNK			
WER THE COUNTER		PHENOL/DRAL ANESTHETIC	1	١	Hand	UNK			
WER THE COUNTER		VAPORUB			A				
PARAPHERNALIA	•								

PARAPHERNALIA DESCRIPTION:

INVESTIGATOR

3/10/200

DATE

DATE

AUTOPSY REPORT

No.

2010-01701

HAIM, COREY

I performed an autopsy on the body of the DEPARTMENT OF CORONER

Los Angeles, California on MARCH 11, 2010 @ 0900 HOURS (Date) (Time)

From the anatomic findings and pertinent history I ascribe the death to:

DIFFUSE ALVEOLAR DAMAGE

DUE TO, OR AS A CONSEQUENCE OF

COMMUNITY ACQUIRED PNEUMONIA

DUE TO, OR AS A CONSEQUENCE OF

(C)

at

DUE TO, OR AS A CONSEQUENCE OF

(D)

OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH:

HYPERTROPHIC CARDIOMYOPATHY WITH CORONARY ARTERIOSCLEROSIS

Anatomical Summary:

- I. Cardiomegaly.
 - A. Enlarged heart 530 grams.
 - B. Adhesion of left ventricle to pericardial sac.
 - C. Biventricular hypertrophy.
 - D. Thickening of mitral and tricuspid valves.
 - E. Atherosclerotic vascular disease.
 - 50% narrowing grossly of proximal anterior descending branch of left coronary artery.
 - 2. Up to 75% narrowing by microscopy.
- II. Pulmonary congestion.
 - A. Heavy congested edematous.
 - B. No masses or lesions.
- III. Hepatomegaly.
 - A. Enlarged liver 2940 grams.
- IV. Abrasion to right elbow.
- V. See Toxicology Report.

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2010-01701

HAIM, COREY

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SUMMARY OF EVENTS:

The decedent is a 38-year-old Caucasian male who reportedly collapsed at home at or around 1254 in the morning on 3/10/10. Ambulance initiated CPR and transported Mr. Haim to Providence St. Joseph Medical Center where despite medical intervention he was pronounced dead on 3/10/10 at 0215 hours.

EXTERNAL EXAMINATION:

The body is identified by toe tags and is that of an unembalmed, refrigerated adult male Caucasian who appears about the reported age of 38 years. The body weighs 200 pounds, measures 67 inches, and appears well built, muscular and well nourished. A $1-1/2 \times 10^{-1}$ 1/4 inch superficial red abrasion is noted to the right elbow. No other injuries, scars or bruises are noted. Multiple tattoos are present consisting of the following: a multicolored face mask is noted to the left chest; a bat is noted to the left ventral wrist; a blue and black band is noted to the left upper arm with a circular design and the words "The Haimster" noted. There is a tattoo of a panther and numerous bats to the left upper superior arm. There is a tattoo of a bat with the words "Thou shalt not fall" on the right upper arm; on the right dorsal forearm is a design with multiple letters which I cannot make out. On the right ventral forearm are tattoos of paws. On the left upper back is a green and black tattoo. On the right lower leg is a black and red design tattoo. Rigor is present. Livor mortis is fixed and dependent.

The head is normocephalic and covered by brown hair. There is no balding and the hair can be described as short and wavy. Stubble is noted along the distribution of a mustache and beard. Examination of the eyes reveals irides that appear to be blue in color and sclerae that are white. There are no petechial hemorrhages of the conjunctivae of the lids or the sclerae. The oronasal passages are unobstructed. Upper and lower teeth are present. The neck is unremarkable. There is no chest deformity. There is no increased anterior-posterior diameter. The abdomen is slightly distended. The genitalia are those of an adult male. The penis appears circumcised. The external genitalia are without trauma or lesions. The extremities show no edema, joint deformity, abnormal mobility, or needle tracks.

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EVIDENCE OF THERAPEUTIC INTERVENTION:

The following are present and are in proper position: endotracheal tube; intravenous lines to the dorsum of the left hand and right antecubital fossa. There has not been postmortem intervention for organ procurement.

CLOTHING:

The body was not clothed and I did not see the clothing.

INITIAL INCISION:

The body cavities are entered through the standard coronal incision and the standard Y-shaped incision. No foreign material is present in the mouth, upper airway and trachea.

NECK:

The neck organs are removed en bloc with the tongue. No lesions are present nor is trauma of the gingiva, lips or oral mucosa demonstrated. There is no edema of the larynx. Both hyoid bone and larynx are intact and without fractures. No hemorrhage is present in the adjacent throat organs, investing fascia, strap muscles, thyroid or visceral fascia. There are no prevertebral fascial hemorrhages. The tongue when sectioned shows no trauma.

CHEST/ABDOMINAL CAVITY:

Both pleural cavities contain minimal serous fluid. The lungs are voluminous. Soft tissues of the thoracic and abdominal walls are well-preserved. The organs of the abdominal cavity have a normal arrangement and none are absent. There is no fluid collection. The peritoneal cavity is without evidence of peritonitis. There are no adhesions.

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SYSTEMIC AND ORGAN REVIEW

The following observations are limited to findings other than injuries, if described above.

MUSCULOSKELETAL SYSTEM:

No abnormalities of the bony framework or muscles are present.

CARDIOVASCULAR SYSTEM:

The aorta is elastic and of even caliber throughout, with vessels distributed normally from it. Both abdominal and thoracic aorta have minimal lipid streaking. There is no dilation of the lower abdominal segment. No aneurysm is present. The major branches of the aorta show no abnormality. Within the pericardial sac there is a minimal amount of serous fluid. An adhesion is noted between the distal left ventricle and to the pericardial sac. The heart weighs 530 grams. It has biventricular hypertrophy. The right ventricle is 0.7 cm thick and the left ventricle is 2 cm thick. The chambers are normally developed and are without mural thrombosis. Both mitral and tricuspid valves show thickening of the leading edge of the cusps. Circumference of valve rings are: Tricuspid valve 12.3 cm, pulmonic valve 6.7 cm, mitral valve 9.5 cm and aortic valve 6.1 cm. There is slight thickening with yellow to white discoloration of the outflow tract of the left ventricle endocardium. There are no lesions of the myocardium. There is slight thickening of the apices of the papillary musculature of the mitral valve. There are no defects of the septum. The great vessels enter and leave in a normal fashion. The coronary ostia are widely patent. There is a balanced pattern of coronary artery distribution. There is segmental atherosclerosis with up to 50% narrowing of the proximal anterior descending branch of the left coronary artery. No focal endocardial, valvular or myocardial lesions are seen. The blood within the heart and large blood vessels is liquid.

RESPIRATORY SYSTEM:

An extremely large amount of edema is found in the lower bronchial passages. The mucosa is severely injected throughout. The lungs are subcrepitant and there is dependent congestion.

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HAIM, COREY

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The left lung weighs 1230 grams, and the right lung weighs 1370 grams. The visceral pleura are smooth and intact. The parenchyma is extremely congested and edematous, however no consolidation is noted. The pulmonary vasculature is without thromboembolism.

GASTROINTESTINAL SYSTEM:

The esophagus is intact throughout. The stomach is not distended by gas. It does contain fluid. It contains approximately 450 cc of green fluid. The mucosa is unremarkable. No tablets or capsules are identified in the stomach, small intestine or colon. The appendix is present. The pancreas occupies a normal position. There is no trauma. The parenchyma is lobular and firm. The pancreatic ducts are not ectatic and there is no parenchymal calcification.

HEPATOBILIARY SYSTEM:

The liver weighs 2940 grams, is enlarged and is red-brown. The capsule is intact and the consistency of the parenchyma is firm. The cut surface is smooth. There is chronic passive congestion. The gallbladder is present. The wall is thin and pliable. It contains 10 cc bile and no calculi. There is no obstruction or dilation of the extrahepatic ducts. The periportal lymph nodes are not enlarged.

URINARY SYSTEM:

The left kidney weighs 220 grams, the right kidney weighs 190 grams. The kidneys are normally situated and the capsule strip easily revealing a surface that is smooth and congested. The corticomedullary demarcation is preserved. The pyramids are not remarkable. The peripelvic fat is not increased. The ureters are without dilation or obstruction and pursue their normal course. The urinary bladder is unremarkable. It contains 50 cc of amber colored urine.

GENITAL SYSTEM (MALE):

The prostate is without enlargement or nodularity. Both testes are in the scrotum, are unremarkable and without trauma.

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HEMOLYMPHATIC SYSTEM:

The spleen weighs 280 grams and is of average size. The capsule is intact. The parenchyma is dark red and mushy. There is no increase follicular pattern. Lymph nodes throughout the body are small and inconspicuous. The bone is not remarkable. The bone marrow of the rib is red and moist.

ENDOCRINE SYSTEM:

The thyroid is unremarkable. The parathyroid glands are not identified. The adrenals are intact without necrosis or hemorrhage. The thymus is unremarkable. The pituitary gland is unremarkable.

SPECIAL SENSES:

The eyes, middle and inner ears are not dissected.

HEAD AND CENTRAL NERVOUS SYSTEM:

There is no subcutaneous or subgaleal hemorrhage in the scalp. The external periosteum and dura mater are stripped showing no fractures of the calvarium or base of the skull. There are no tears of the dura mater. There is no epidural, subdural or subarachnoid hemorrhage. The brain weighs 1390 grams. The leptomeninges are thin and transparent. A normal convolutionary pattern is observed. Coronal sectioning demonstrates a uniformity of cortical gray thickness. The cerebral hemispheres are symmetrical. There is no softening, discoloration or hemorrhage of the white matter. The basal ganglia are intact. Anatomic landmarks are preserved. Cerebral contusions are not present. The ventricular system is unremarkable without dilation or distortion. Pons, medulla and cerebellum are unremarkable. There is no evidence of uncal or cerebellar herniation. Vessels at the base of the brain have a normal pattern of distribution. There are no aneurysms. The cranial nerves are intact, symmetrical, and normal in size, location and course. The cerebral arteries are without arteriosclerosis.

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SPINAL CORD:

The entire cord is not dissected.

HISTOLOGIC SECTIONS:

Representative sections from various organs are preserved in one storage jar in 10% formalin.

TOXICOLOGY:

Bile, blood, liver tissue, stomach contents, urine and vitreous humor have been submitted to the laboratory. A comprehensive screen was requested.

PHOTOGRAPHY:

Photographs have been taken prior to the course of the autopsy.

RADIOLOGY:

The body is fluoroscoped, and x-rays are taken of the head, pelvis, and lower extremities.

WITNESSES:

Dr. Christopher Rogers.

DIAGRAMS USED:

Diagram Forms 20 and 30 were used during the performance of the autopsy. The diagrams are not intended to be facsimiles.

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OPINION:

The cause of death is diffuse alveolar damage due to community acquired pneumonia. Autopsy also revealed an enlarged heart weighing 530 grams (normal average weight is 300 grams) and biventricular hypertrophy of the ventricles. Also identified is an atherosclerotic plaque of the anterior descending branch of the left coronary artery.

Toxicology results of the blood show the presence of the following medications: dextromethorphan, diphenhydramine, ibuprofen, fluoxetine, olanzapine, diazepam, carisoprodol and meprobamate. These medications are present in low levels and are non-contributory to death. Also present is tetrahydrocannabinol in low levels.

There is no evidence of injury. The medications did not contribute acutely to his death therefore the manner of death is natural. Consultation is obtained with the Chief Medical Examiner-coroner, Chief, Forensic Medicine and Supervising Criminalist.

JUAN M. CARRILLO, M.D. DEPUTY MEDICAL EXAMINER

DATE

JMC:mtm:c/f D-3/11/10

T-3/18/10

I performed a microscopic examination on

→

2010-01701

4/30/2010

THE DEPARTMENT OF CORONER

Los Angeles, California

HAIM, COREY

MICROSCOPIC REVIEW

- 1. Cerebral cortex (Slide 2010-1701-1) Unremarkable. No evidence of inflammation of the meninges.
- 2. Lung (Slide 2010-1701-2,3,4) Examination of the lung tissue reveals alveolar walls lined by hyaline membranes. The alveolar spaces contain abundant macrophages, some consistent with carbon laden macrophages and scattered hemosiderin laden macrophages. A focal area shows abundant polymorphonuclear leukocytes in the alveolar space. Anthracotic pigment is present in the peribronchial interstitial tissue. Abundant congestion of the blood vessels noted. Special stains for micro-organisms is negative.
- Liver (Slide 2010-01701-5) Sections of liver shows a normal architecture without bridging fibrosis.
- Kidneys (Slide 2010-1701-6) Sections of renal parenchyma shows numerous obliterated hyalinized glomeruli. Occasional calcified material is noted in a renal tubule. No evidence of inflammatory cell infiltrate noted.
- 5. Heart (Slide 2010-1701-7,8,9,10) Examination of a section of the proximal left anterior descending branch of the left coronary artery reveals an atherosclerotic plaque narrowing the lumen to approximately 75%. The plaque shows a fibrous cap with centrally located calcification. No cholesterol clefts present and no evidence of thrombosis noted. There is a focal area of chronic inflammatory cell infiltration of the epicardium of the distal left ventricle consisting of lymphocytes. It does not extend into the myocardium. The adjacent myocardium shows extensive myofiber disarray. The myocardium of the left ventricle shows hypertrophic changes including enlarged myocardial nuclei.

Diagnosis:

Heart:

Coronary artery atherosclerosis

75% narrowing

Focal chronic epicarditis

Hypertrophic changes

Lungs:

Diffuse alveolar damage

Focal acute pneumonia

Kidneys: Nephrosclerosis

Consultation obtained with Pathologist Dr. Koss of LAC/USC Medical Center.

JUAN M. CARRILLO, M.D.

DEPUTY MEDICAL EXAMINER

5/4/2010 DATE

JMC:mtm/f t-5/3/10

5010-01**J01** HAIN . COREY ACC

S C

9-20/10

10-FV

EXTERNAL EXAM

Sex Race Age Height

Weight Hair Eyes

Sclera Teeth

Mouth Tongue Nose

Chest **Breasts**

Abdomen Scar Genitals

Edema Skin

Decubitus

HEART Wt. 530 Pericardium

Hypertrophy

Dilation
Muscle 7-23
Valves 4-63
Coronaries 6.1

AORTA up.d Streeting

VESSELS -LUNGS Wt.

Heavy, consuled abundant e beun R 1370 1230

RV 0.7

LV 2.0

Septum 1.7

Adhesions

no consolidation Fluid no P.F. Atelectasis

Dedema Congestion

Consolidation Bronchi

Nodes

PHARYNX Cler TRACHEA

THYROID THYMUS LARYNX HYOID

ABDOMINAL WALL FAT

PERITONEUM

Fluid

Adhesions

LIVER Wt. 2940 Capsule

Lobules Fibros

GB / 10 cc

Calculus Bile ducts

SPLEEN Wt. 290

Color Consistency

Capsule

Malpigment PANCREAS

ADRENALS / KIDNEYS Wt.

R 190 L 220

Capsule

Cortex Vessels

Pelvis Ureters

BLADDER Soc. a - her inne GENITALIA

Prostate -

Testes .

Uterus Tubes

Ovaries

OESOPHAGUS

STOMACH 450 11 green fluid Contents

DUOD. & SM. INT. No pills APPENDIX LARGE INT. - no pulls

ABDOM, NODES

SKELETON

Spine Marrow Rib Cage Long bones

Pelvis

CALVARIUM

BRAIN Wt. 1390

Dura Fluid Ventricles Vessels Middle ears

Other PITUITARY ~

SPINAL CORD

TOXICOLOGY SPECIMENS

Blook une Vitreaux ling

Stomuch SECTIONS FOR

HISTOPATHOLOGY

man 5 Lux 2 - Lug 6 xides 1 LAD MOS 8 LAD. DISTA

MICROBIOLOGY

Ward suns Blood culturs

DIAGRAMS

X-RAYS (+) healed Franke & joy

OTHER PROCEDURES

B

GROSS IMPRESSIONS

1. Condivuega ly / a sev) 2. Congestion / Edema of lung 3. Hepa boungaly

Date

3/11/2010

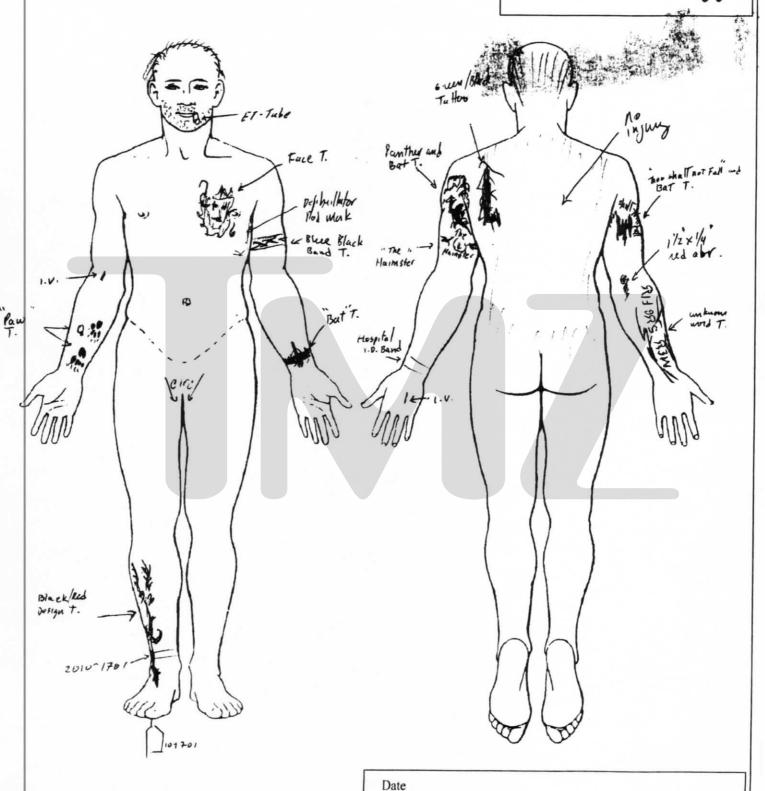
Time

9:00

Deputy Medical Examiner

5710-01701 HAIN. COREY ACC

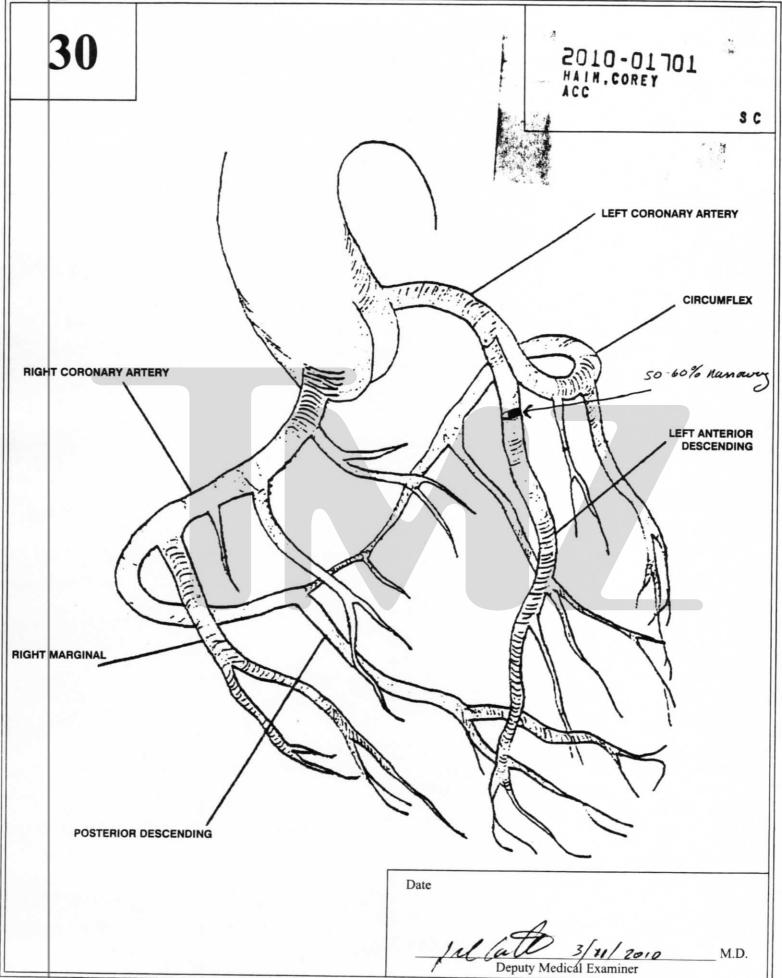
S C



Ti - tattor

(Rev. 7/09)

Deputy Medical Examiner / CK M.D.





Department of Coroner, County of Los Angeles

FORENSIC SCIENCE LABORATORIES



Laboratory Analysis Summary Report

To:

Dr. Carrillo

✓ PendingTox

Deputy Medical Examiner

The following results have been technically and administratively reviewed and are the opinions and interpretations of the Analyst:

Coroner Case Number: 2010-01701 Decedent: HAIM, COREY

SPECIMEN	SERVICE	DRUG	<u>LEVEL</u>	UNITS	ANALYST
Blood, Heart					
	Acetaminophen	Acetaminophen		ND	O. Pleitez
	Alcohol	Ethanol		Negative	M. Schuchardt
	Barbiturate	Barbiturates		ND	J. Lintemoot
	Bases	Dextromethorphan	< 0.50	ug/ml	S. DeQuintana
	Bases	Diazepam		Present	S. DeQuintana
	Bases	Diphenhydramine	< 0.50	ug/ml	S. DeQuintana
	Bases	Fluoxetine	<0.25	ug/ml	S. DeQuintana
	Bases	Haloperidol		ND	S. DeQuintana
	Bases	Nordiazepam		Present	S. DeQuintana
	Bases	Norfluoxetine	0.77	ug/ml	S. DeQuintana
	Bases	Olanzapine	< 0.10	ug/ml	S. DeQuintana
- T	Benzodiazepines	Diazepam	0.21	ug/ml	S. DeQuintana
	Benzodiazepines	Nordiazepam	0.26	ug/ml	S. DeQuintana
	Carbon Monoxide	Carbon Monoxide	<10	% Saturation	M. Schuchardt
	Cocaine	Cocaine and Metabolites		ND	J. Lintemoot
	Cyanide	Cyanide		ND	M. Schuchardt
	ELISA	Oxycodone		ND	J. Lintemoot
	ELISA	Oxymorphone		ND	J. Lintemoot
	ELISA	Salicylate		ND	J. Lintemoot
	Fentanyl	Fentanyl		ND	J. Lintemoot
	Halogenated Hydrocarbons	Ethchlorvynol		ND	S. DeQuintana
	Halogenated Hydrocarbons	Trichlorethanol		ND	S. DeQuintana
	Marijuana	Carboxy-THC	55	ng/ml	B. Waters
	Marijuana	Tetrahydrocannabinol (THC)	<2.5	ng/ml	B. Waters
	Methamphetamine	Methamphetamine		ND	J. Lintemoot
	Neutrals	Carisoprodol	<2.5	ug/ml	O. Pleitez
	Neutrals	Ibuprofen	<2.5	ug/ml	O. Pleitez
	Neutrals	Meprobamate	8.9	ug/ml	O. Pleitez
	Opiates	Codeine, Total		ND	S. Brooks

Date Printed:

Friday, April 23, 2010

4/23/2

Page 1 of 2 4/27/2010

Coroner Case Number: 2010-01701 Decedent: HAIM, COREY

opiates Opiates Outside Test thencyclidine Tolatiles Tolatiles	Hydrocodone, Total Morphine, Total Hemoglobin A1C Phencyclidine Acetone Isopropanol		ND ND Done ND	S. Brooks S. Brooks Quest Diagnostics J. Linternoot M. Schuchardt
Outside Test hencyclidine folatiles	Hemoglobin A1C Phencyclidine Acetone		Done ND	Quest Diagnostics J. Linternoot
hencyclidine 'olatiles	Phencyclidine Acetone		ND	J. Linternoot
'olatiles	Acetone			
			ND	M. Cabushards
olatiles	Isopropanol			M. Schuchardt
			ND	M. Schuchardt
Dipstick"	Glucose		Negative	J. Muto
ases	Fluoxetine		Present	S. DeQuintana
ases	Norfluoxetine		Present	S. DeQuintana
ases	Olanzapine		Present	S. DeQuintana
utside Test	Electrolytes		Done	NMS Labs, Inc.
utside Test	Glucose	45	mg/dL	NMS Labs, Inc.
f total Hgb ram percent (g/100ml) filligram nilligrams per deciliter	ND Not Detected ng/ml Nanogram per Milliliter ug/g Microgram per Gram ug/ml Microgram per Milliliter			4/27/20
a a a u u u u f f ra fii	ises ises ises ises istricted Test itotal Hgb am percent (g/100ml) illigram	Isses Fluoxetine Norfluoxetine Olanzapine Itside Test Electrolytes Itside Test Glucose ND Not Detected Ing/ml Nanogram per Milliliter Ing/g Microgram per Gram Ing/ml Microgram per Gram Ing/ml Microgram per Gram Ing/ml Microgram per Milliliter Ing/ml Microgram per Milliliter	Isses Fluoxetine Norfluoxetine Olanzapine Itside Test Electrolytes Itside Test Glucose 45 ND Not Detected Ing/ml Nanogram per Milliliter Itotal Hgb Image: Am percent (g/100ml) illigram ug/ml Microgram per Milliliter Image: Am percent ug/g Microgram per Milliliter	Isses Fluoxetine Present Isses Norfluoxetine Present Isses Olanzapine Present Itside Test Electrolytes Done Itside Test Glucose 45 mg/dL Itotal Hgb am percent (g/100ml) ug/g Microgram per Milliliter ug/g Microgram per Gram ug/ml Microgram per Milliliter

Administratively reviewed by: Daniel T. Anderson M.S., FTS-ABFT, D-ABC Supervising Criminalist II TOXICOLOGY

Ouest Diagnostics

DIAGNOSTICS INCORPORATED CLIENT \$ERVICE 800.877.2515

SPECIMEN INFORMATION

EN944338V SPECIMEN: REQUISITION: 8443670

< 5.7

COLLECTED: 04/16/2010 13:00 PT RECEIVED: 04/17/2010 04:02 PT REPORTED: 04/19/2010 06:57 PT PATIENT INFORMATION HAIM, COREY

DOB: AGE:

GENDER: FASTING: U

ID: 2010-01701

PHONE:

REPORT STATUS FINAL

ORDERING PHYSICIAN

CLIENT INFORMATION

W90033076 TZ24000

EXAMINER OFFICE (CORONER)

FORENSIC LABORATORY 1104 N MISSION RD

LOS ANGELES, CA 90033-1017

Test Name

In Range

Out of Range

5.7

Reference Range

H <5.7 % of total Hgb

Lab EN

HEMOGLOBIN Alc

Increased risk for diabetes

Non-diabetic

5.7-6.4 Increased risk for diabetes > or = 6.5 Consistent with diabetes

Standards of Medical Care in Diabetes-2010. Diabetes Care, 33(Supp 1): S1-S61,2010.

PERFORMING LABORATORY INFORMATION

EN QUEST DIAGNOSTICS-WEST HILLS, 8401 FALLBROOK AVENUE, WEST HILLS, CA 91304-3226, Laboratory Director: LEE H. HILBORNE, MD CLIA: 05D0642827

HAIM, COREY - EN944338V

Page 1 - End of Report



NMS Labs

3701 Welsh Road, PO Box 433A, Willow Grove, PA 19090-0437 Phone: (215) 657-4900 Fax: (215) 657-2972 e-mail: nms@nmslabs.com Robert A. Middleberg, PhD, DABFT, DABCC-TC, Laboratory Director

Toxicology Report

Report Issued 04/23/2010 10:00

10139 To:

Los Angeles County Coroner Medical Examiner

Attn: Joseph Muto 1104 N. Mission Road Los Angeles, CA 90033 **Patient Name**

HAIM, COREY

Patient ID Chain

2010-01701 11110689

Age

Not Given

Gender Workorder Not Given 10090301

Page 1 of 2

Positive Findings:

Compound	Result	<u>Units</u>	Matrix Source
Sodium	139	mEq/L	Vitreous Fluid
Potassium	12.8	mEq/L	Vitreous Fluid
Chloride	122	mEq/L	Vitreous Fluid
Creatinine	1.0	mg/dL	Vitreous Fluid
Urea Nitrogen	18	mg/dL	Vitreous Fluid
Glucose	45	mg/dL	Vitreous Fluid

See Detailed Findings section for additional information

Testing Requested:

Analysis Code	Description
1916FL	Electrolytes Panel, Fluid
7027FL	Glucose, Fluid

Specimens Received:

ID	Tube/Container	Volume/ Mass	Collection Date/Time	Matrix Source	Miscellaneous Information
001	Red Ton Tube	1.75 ml	04/15/2010 09:00	Vitreous Fluid	

All sample volumes/weights are approximations.

Specimens received on 04/16/2010.

04-13-10



CONFIDENTIAL

Workorder

10090301 11110689

Chain Patient ID

2010-01701

Page 2 of 2

Detailed Findings:

Analysis and Comments	Result	Units	Rpt. Limit	Specimen Source	Analysis By
Sodium	139	mEq/L		001 - Vitreous Fluid	[Not provided]
Potassium	12.8	mEq/L		001 - Vitreous Fluid	[Not provided]
Chloride	122	mEq/L		001 - Vitreous Fluid	[Not provided]
Creatinine	1.0	mg/dL		001 - Vitreous Fluid	[Not provided]
Urea Nitrogen	18	mg/dL		001 - Vitreous Fluid	[Not provided]
Glucose	45	mg/dL		001 - Vitreous Fluid	[Not provided]

Other than the above findings, examination of the specimen(s) submitted did not reveal any positive findings of toxicological significance by procedures outlined in the accompanying Analysis Summary.

Reference Comments:

1. Glucose - Vitreous Fluid:

Analysis for Glucose was performed by: Health Network Laboratories 2024 Lehigh Street Allentown, PA 18103

Urea Nitrogen - Vitreous Fluid:

Analysis for Electrolytes Panel, including Sodium, Potassium, Chloride, Creatinine and Urea Nitrogen was performed by: Health Network Laboratories

2024 Lehigh Street Allentown, PA 18103

Chain of custody documentation has been maintained for the analyses performed by NMS Labs.

Unless alternate arrangements are made by you, the remainder of the submitted specimens will be discarded six (6) weeks from the date of this report; and generated data will be discarded five (5) years from the date the analyses were performed.

Analysis Summary and Reporting Limits:

Acode 1916FL - Electrolytes Panel, Fluid - Vitreous Fluid

-Analysis by [Not provided] for:

Compound	Rpt. Limit	Compound	Rpt. Limit
Chloride	N/A	Sodium	N/A
Creatinine	N/A	Urea Nitrogen	N/A
Potassium	N/A		

Acode 7027FL - Glucose, Fluid - Vitreous Fluid

-Analysis by [Not provided] for:

Compound	Rpt. Limit	Compound	Rpt. Limit
Glucose	N/A		

1 1/23-10 W

To:LOS ANGELES COUNTY CORONER 08/Apr/10 09:36 Page 2 of 4

COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH PUBLIC HEALTH LABORATORY - 12750 ERICKSON AVENUE, DOWNEY, CA 90242 MARY BETH DUKE, M.S., ACTING DIRECTOR (562)658-1330

LOC: L.A. COUNTY CORONERS OFFICE NAME: HAIM, COREY

PATIENT ID# LACCO-201001701 DOB: 12/23/1971 AGE: 38Y SEX: M

REQ'D BY: REFERRED

.

COLLECTED: 03/11/2010 UNK RECEIVED: 03/11/2010 18:00

ACC. NO.: F37956 SUBM. ACC. NO.: DR. CAMLLO

REFERENCE TEST RESULT TEST NAME RANGE

LUMINEE XTAG RESPIRATORY VIRAL PANEL MULTIPLEX PCR

> NOT DETECTED INFLUENZA A

Result date, time: 04/07/2010, 15:24

INFLUENZA A NOT DETECTED

SUBTYPE H1

Result date, time: 04/07/2010, 15:24

INFLUENZA A NOT DETECTED

SUBTYPE H3

Result date, time: 04/07/2010, 15:24

NOT DETECTED INFLUENZA B

Result date, time: 04/07/2010, 15:24

RSV SUBTYPE A NOT DETECTED

Result date, time: 04/07/2010, 15:24

NOT DETECTED RSV SUBTYPE B

Result date, time: 04/07/2010, 15:24

NOT DETECTED PARAINFLUENZA 1

Result date, time: 04/07/2010, 15:24

NOT DETECTED PARAINFLUENZA 2

Result date, time: 04/07/2010, 15:24

PARAINFLUENZA 3 NOT DETECTED

Result date, time: 04/07/2010, 15:24

HUMAN

NOT DETECTED **METAPNEUMOVIRUS**

DEPARTMENT OF ORONER DOCUMENT Result date, time: 04/07/2010, 15

NOT DETECTED RHTNOVIRUS

NOT DETECTED

ADENOVIRUS

Result date, time: 04/07/2010, 15:24

Result date, time: 04/07/2010, 15:24

REFERENCE TEST RESULT RANGE

PANDEMIC AND

TEST NAME

SEASONAL INFLUENZA

CONTINUED HAIM, COREY PAGE 1 CLIENT REPORT ACCOUNT NO.: LACCO PRINT DATE & TIME: 04/08/2010 07:52

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To:LOS ANGELES COUNTY CORONER 08/Apr/10 09:36 Page 3 of 4

COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH PUBLIC HEALTH LABORATORY - 12750 ERICKSON AVENUE, DOWNEY, CA 90242 MARY BETH DUKE, M.S., ACTING DIRECTOR (562)658-1330

NAME: HAIM, COREY

LOC: L.A. COUNTY CORONERS OFFICE

PATIENT ID# LACCO-201001701 DOB: 12/23/1971

REQ'D BY: REFERRED

AGE: 38Y SEX: M

COLLECTED: 03/11/2010 UNK

RECEIVED: 03/11/2010 18:00

ACC. NO.: F37956

SUBM. ACC. NO.: DR.CAMLLO

BY PCR

.

SPECIMEN

OTHER

DESCRIPTION

NASOPHARYNX

Result date, time: 03/12/2010, 10:23

INFLUENZA A ANALYZED BY ABI 7500 FAST DX

PANDEMIC INFLUENZA A AND SEASONAL INFLUENZA A NOT DETECTED BY RT-PCR.

Result date, time: 03/12/2010,14:21

ADDITIONAL COMMENTS

> THE CONFIRMING TEST RESULTS WERE OBTAINED USING CDC REAGENTS PROVIDED UNDER AN EMERGENCY USE AUTHORIZATION (EUA). PLEASE REFER TO THE FDA

FACTSHEETS REGARDING THIS EUA TEST.

PLEASE SEE LINK TO FACT SHEETS REGARDING SWINE INFLUENZA TEST INTERPRETATION: http://www.fda.gov/cdrh/emergency/panel-factsheet1.html

and http://www.fda.gov/cdrh/emergency/panel-factsheet2.html.

Result date, time: 03/12/2010, 14:21

TEST RESULT

REFERENCE RANGE

TEST NAME SEASONAL INFLUENZA B BY PCR

> SPECIMEN DESCRIPTION

OTHER

NASOPHARYNX

Result date, time: 03/18/2010, 15:33

INFLUENZA B ANALYZED BY ABI 7500 FAST DX

> INFLUENZA B VIRUS NOT DETECTED BY RT-PCF Result date, time: 03/18/2010, 15:33

DEPARTMENT OF CORONER DOCUMENT

ADDITIONAL COMMENTS

> THE CONFIRMING TEST RESULTS WERE OBTAINED USING CDC REAGENTS PROVIDED UNDER AN EMERGENCY USE AUTHORIZATION (EUA). PLEASE REFER TO THE FDA FACTSHEETS REGARDING THIS EUA TEST.

PLEASE SEE LINK TO FACT SHEETS REGARDING SWINE INFLUENZA TEST INTERPRETATION: http://www.fda.gov/cdrh/emergency/panel-factsheet1.html and http://www.fda.gov/cdrh/emergency/panel-factsheet2.html. Result date, time: 03/18/2010, 15:33

HAIM, COREY CLIENT REPORT END OF REPORT

PAGE 2

ACCOUNT NO.:LACCO PRINT DATE & TIME: 04/08/2010 07:52

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Th:LBS ANGELES COUNTY CORONER 23/Mar/10 07:52 Page 2 of 4

COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH PUBLIC HEALTH LABORATORY - 12750 ERICKSON AVENUE, DOWNEY, CA 90242 MARY BETH DUKE, M.S., ACTING DIRECTOR (562)658-1330

NAME: HAIM, COREY

LOC: L.A. COUNTY CORONERS OFFICE

PATIENT ID# LACCO-201001701

DOB: 12/23/1971

SEX: M

REQ'D BY: REFERRED

COLLECTED: 03/11/2010 UNK

RECEIVED:03/11/2010 18:00

AGE: 38Y

ACC. NO.: F37956

SUBM. ACC. NO.: DR.CAMLLO

TEST NAME

TEST RESULT

REFERENCE

RANGE

FANDEMIC AND

SEASONAL INFLUENZA

BY PCR

SPECIMEN

OTHER

DESCRIPTION

NASOPHARYNX

Result date, time: 03/12/2010, 10:23

INFLUENZA A ANALYZED BY ABI 7500 FAST DX

> PANDEMIC INFLUENZA A AND SEASONAL INFLUENZA A NOT DETECTED BY RT-PCR. Result date, time: 03/12/2010, 14:21

ADDITIONAL COMMENTS

> THE CONFIRMING TEST RESULTS WERE OBTAINED USING CDC REAGENTS PROVIDED UNDER AN EMERGENCY USE AUTHORIZATION (EUA). PLEASE REFER TO THE FDA FACTSHEETS REGARDING THIS EUA TEST.

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TEST NAME

SEASONAL INFLUENZA B BY PCR

TEST RESULT

REFERENCE RANGE

SPECIMEN

DESCRIPTION

OTHER

NASOPHARYNX

Result date, time: 03/18/2010, 15:33

INFLUENZA B ANALYZED BY ABI 7500 FAST DX

> INFLUENZA B VIRUS NOT DETECTED BY RT-PCR Result date, time: 03/18/2010, 15:33

ADDITIONAL COMMENTS

> THE CONFIRMING TEST RESULTS WERE OBTAINED USING CDC REAGENTS PROVIDED UNDER AN EMERGENCY USE AUTHORIZATION (EUA). PLEASE REFER TO THE FDA FACTSHEETS REGARDING THIS EUA TEST.

PLEASE SEE LINK TO FACT SHEETS REGARDING SWINE INFLUENZA TEST

HAIM, COREY CLIENT REPORT

CONTINUED ACCOUNT NO.: LACCO

PRINT DATE & TIME: 03/23/2010

PAGE 1 07:52

DEPARTMENT OF

CORONER DOCUMENT

Cosmillo

7/31/2010

Td:LCS ANGELES COUNTY CORONER 23/Mar/10 07:52 Page 3 of 4

COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH PUBLIC HEALTH LABORATORY - 12750 ERICKSON AVENUE, DOWNEY, CA 90242 MARY BETH DUKE, M.S., ACTING DIRECTOR (562)658-1330

NAME: HAIM, COREY

LOC: L.A. COUNTY CORONERS OFFICE SEX: M

PATIENT ID# LACCO-201001701 DOB: 12/23/1971 AGE: 38Y

REQ'D BY: REFERRED

COLLECTED: 03/11/2010 UNK

RECEIVED: 03/11/2010 18:00

ACC. NO.: F37956

SUBM. ACC. NO.: DR. CAMLLO

REFERENCE RANGE

TEST RESULT SEASONAL INFLUENZA B (CONTINUED)

BY PCR

TEST NAME

ADDITIONAL COMMENTS

(CONTINUED)

Result date, time: 03/18/2010, 15:33

INTERPRETATION: http://www.fda.gov/cdrh/emergency/panel-factsheet1.html

and http://www.fda.gov/cdrh/emergency/panel-factsheet2.html.

Result date, time: 03/18/2010, 15:33



DEPARTMENT OF CORONER DOCUMENT

HAIM, COREY CLIENT REPORT

END OF REPORT ACCOUNT NO.:LACCO

PRINT DATE & TIME: 03/23/2010 07:52

PAGE 2

(Auullo

LAC + USC Medical Center 1200 N. State St., Los Angeles, CA 90033 Ira A. Shulman, M.D., Director, Laboratories & Pathology 03/14/2010 07:00

Page: 1

H444792 COLL: 03/11/2010 0930

REC: 03/11/2010 1806 PHYS: ILLEGIBLE, PHYSICIAN

FINAL 03/13/2010

WOUND CULT, AEROBIC

MICRO LAB SETUP: UNKNOWN UNKNOWN

SPECIMEN DESCRIPTION: SPECIAL REQUESTS:

LUMG NONE

GRAM STAIN:

Cell debris

1+ POLYMORPHONUCLEAR LEUKOCYTES

2+ MONONUCLEAR CELLS RED BLOOD CELLS NO ORGANISMS SEEN

CULTURE:

NO GROWTH AT 48 HRS.

H445331 COLL: 03/11/2010 0930 REC: 03/11/2010 2135 PHYS: ILLEGIBLE, PHYSICIAN

REC: 03/11/2010 2135 PHYS: ILLEGIBLE, PHYSICIAN

FINAL 03/13/2010

*** PRELIMINARY ***

BLOOD CULTURE - AERO

MICRO LAB SETUP: 03112010 2141

SPECIMEN DESCRIPTION: SPECIAL REQUESTS:

BLOOD NONE

CULTURE:

Staphylococcus epidermidis

H445332 COLL: 03/11/2010 0930

BLOOD CULTURE - ANAE

MICRO LAB SETUP: 03112010 2141

SPECIMEN DESCRIPTION: SPECIAL REQUESTS:

BLOOD

NONE

CULTURE:

NO GROWTH 2 DAYS

DEPARTMENT OF **CORONER DOCUMENT**

END OF REPORT

ACCOUNT #: 9068

CONFIDENTIAL SUMMARY REPORT

HAIM, COREY CC-201001701 CC CORONERS CASE M 12/23/1971

Conmille

To:LOS ANGELES COUNTY CORONER 22/Mar/10 08:34 Page 2 of 2

COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH PUBLIC HEALTH LABORATORY - 12750 ERICKSON AVENUE, DOWNEY, CA 90242 MARY BETH DUKE, M.S., ACTING DIRECTOR (562)658-1330

NAME: HAIM, COREY

170

LOC: L.A. COUNTY CORONERS OFFI

PATIENT ID# LACCO-2010017 DOB: 12/23/1971 AGE: 38Y SEX: M

REQ'D BY: REFERRED OTH. CLINICIAN:

F37956 COLL: 03/11/2010 UNKNOWN REC: 03/11/2010 18:00 PHYS: REFERRED

DR.CAMLLO

PANDEMIC AND SEASONAL INFLUENZA BY PCR

SPECIMEN DESCRIPTION OTHER

NASOPHARYNX

INFLUENZA A ANALYZED BY ABI 7500 FAST DX

PANDEMIC INFLUENZA A AND SEASONAL INFLUENZA

A NOT DETECTED BY RT-PCR.

ADDITIONAL COMMENTS

THE CONFIRMING TEST RESULTS WERE OBTAINED USING CDC REAGENTS PROVIDED UNDER AN EMERGENCY USE AUTHORIZATION (EUA). PLEASE REFER TO THE FDA FACTSHEETS REGARDING THIS EUA TEST.

PLEASE SEE LINK TO FACT SHEETS REGARDING SWINE INFLUENZA TEST INTERPRETATION: http://www.fda.gov/cdrh/emergency/panelfactsheet1.html and http://www.fda.gov/cdrh/emergency/panelfactsheet2.html.

SEASONAL INFLUENZA B BY PCR SPECIMEN DESCRIPTION OTHER

ADDITIONAL COMMENTS

NASOPHARYNX

INFLUENZA B ANALYZED BY ABI 7500 FAST DX

INFLUENZA B VIRUS NOT DETECTED BY RT-PCR THE CONFIRMING TEST RESULTS WERE OBTAINED USING CDC REAGENTS PROVIDED UNDER AN EMERGENCY USE AUTHORIZATION (EUA). PLEASE REFER TO THE FDA FACTSHEETS REGARDING THIS EUA TEST.

PLEASE SEE LINK TO FACT SHEETS REGARDING SWINE INFLUENZA TEST INTERPRETATION:

http://www.fda.gov/cdrh/emergency/panel factsheet1.html and PARTINE TO http://www.fda.gov/cdrh/emergency/panel factsheet2.hCORONER DOCUMENT

HAIM, COREY INTERIM REPORT

ACCOUNT NO: LACCO REPORT DATE AND TIME: 03/22/2010 08:33 END OF REPORT PAGE 1

CARILLO 3/31/2010

To:LOS ANGELES COUNTY CORONER 19/Mar/10 11:85 Page 3 of 4

COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH
PUBLIC HEALTH LABORATORY - 12750 ERICKSON AVENUE, DOWNEY, CA 90242
MARY BETH DUKE, M.S., ACTING DIRECTOR (562)658-1330

NAME: HAIM, COREY 2010-170)

LOC: L.A. COUNTY CORONERS OFFICE

PATIENT ID# LACCO-201001201 DOB: 12/23/1971 AGE: 38Y SEX: M

REQ'D BY: REFERRED

COLLECTED: 03/11/2010 UNK

RECEIVED: 03/11/2010 18:00

ACC. NO.: F37956

SUBM. ACC. NO.:

REFERENCE

TEST NAME SEASONAL INFLUENZA B TEST RESULT (CONTINUED)

range

BY PCR

ADDITIONAL COMMENTS

(CONTINUED)

Result date, time: 03/18/2010 ,15:33

INTERPRETATION: http://www.fda.gov/cdrh/emergency/panel-fact.sheet.1.html

and http://www.fda.gov/cdrh/emergency/panel-factsheet2.html.

Result date, time: 03/18/2010 ,15:33



DEPARTMENT OF CORONER DOCUMENT

HAIM, COREY

END OF REPORT

ACCOUNT NO.:LACCO

PRINT DATE & TIME: 03/19/2010

PAGE 2

07:52

1.5.6

Selser CAnnillo

TO REPORT A DEATH - PHONE (213) 343-0711

COMPLETE ALL LINES, USE INK. IF UNKNOWN OR NOT APPLICABLE, SO STATE.

Providence Saint Joseph Medical Center

cc# 2010-01701

NAME OF PACIETY	
ADDRESS 501 South Buena Vista St, Burbank, CA 91505 (818) 8	347-4043
NAME OF DECEDENT HAIM, COREY I	
HOW IDENTIFIED Drivers Lisense / Fam: 50 DOB_ DATE OF DEATH 3/10/2010 TIME 0215	12/23/71 AGE 38 SEX M RACE
PRONOUNCED BY Dr Biran Pamala MEDICAL RECORD OR PATI	ENT FILE # _NO000 44 \$26
EMERGENCY ROOM PATIENT ORGAN/TISSUE DONATION INFOR	
HOSPITAL IN PATIENT NO YES IF YES WHAT WAS THE	EIR RESPONSE?
2	
DATE ADMITTED 3-10-2011 TIME	04.4
TO HOSPITAL BY: POLICE RELATIVES FRIENDS SELF	AMBULANCE (Name or R.A. #) RAGO
FROM .	ACH THE PART OF THE
(STATE WAETHER HOME, HOSPITAL OR OTHER) GIVE ABBRESS /	(IF HOSPITAL ATTACH THEIR HISTORY)
ADMITTED BY:M.D. PRIMARY ATTENDIN	G PHYSICIAN Siren. M.D.
PHONE #PHONE #	
INJURIES DATE TIME	(TRAFFIC, FALL, ETC.)
DESCRIBE INJURIES: No Injuries Noted.	
CLINICAL HISTORY: per Ems (RA-60) patient was prescribed Empty Bottle found at Bodside.	C Haldol 60 tabs on 3-9-10-
SURGICAL PROCEDURES: STATE TYPE, DATE, TIME AND RESULTS OF ANY OPERATION	OR AMPUTATION PERFORMED
NA	ACCT N008283194 03/10/10
	HAIM, COREY I 38/M Biren MD, Pamela C N. ED
	MR N000044826 DOB 12/23/71
WAS A BULLET OR OTHER FOREIGN OBJECT RECOVERED? SPECIFY NA.	
	ATE & TIME
LABORATORY RESULTS:	
RETAIN LABORATORY SPECIMENS	
X-RAY REPORT:	
REMARKS: ESPECIALLY SYMPTOMS PRECEDING AND DURING TERMINAL EPISODE	
IN MY OPINION, THE IMMEDIATE CAUSE OF DEATH IS:	
8Y M.DOR	
PHONE #	NURSE/HOSPITAL ADMINSTRATOR