



U.S. Department  
of Transportation  
**Federal Aviation  
Administration**

THESE RECORDS MAY BE RELEASABLE UNDER THE FOIA REQUEST 15  
DAYS AFTER SIGNATURE DATE UNLESS WE HEAR OTHERWISE FROM  
FAA NTSB COUNSEL

Mike Monroney  
Aeronautical Center

P.O. Box 25082  
Oklahoma City, Oklahoma 73125

Tuesday, September 27, 2016

National Transportation Safety Board  
4760 Oakland Street, Suite 500  
Denver, CO 80239

ACCIDENT # 0128    INDIVIDUAL#: 001    NAME: [REDACTED]    MODE: AVIATION  
DATE OF ACCIDENT 07/07/2016    DATE RECEIVED 07/13/2016    PUTREFACTION: No  
N # 967JB    NTSB # CEN16LA260    CAMI REF # 201600128001  
LOCATION OF ACCIDENT Kennett, MO  
SPECIMENS Bile, Blood (Cavity), Brain, Heart, Kidney, Liver, Lung, Muscle, Spleen, Urine

### FINAL FORENSIC TOXICOLOGY FATAL ACCIDENT REPORT

**CARBON MONOXIDE:** The carboxyhemoglobin (COHb) saturation is determined by spectrophotometry with a 10% cut off and confirmed by chromatography.

>> NOT PERFORMED

-Notes:

Insufficient sample for analysis.

**CYANIDE:** The presence of cyanide is screened by Conway Diffusion, when the COHb level is equal to or greater than 10% or upon special request. Cyanides are quantitated by spectrophotometry and confirmed by chromatography. The reporting cutoff for cyanide is 0.25 ug/mL. Normal blood cyanide concentrations are less than 0.15 ug/mL, while lethal concentrations are greater than 3 ug/mL.

>> NOT PERFORMED

**VOLATILES:** The volatile concentrations are determined by headspace gas chromatography at a cut off of 10 mg/dL. Where possible, positive ethanol values are confirmed by Radiative Energy Attenuation.

>> NO ETHANOL detected in Urine

**DRUGS:** Specimens are analyzed using immunoassay, chromatography, GC/MS, HPLC/MS, or GC/FTIR. Concentrations (ug/mL) at or above those in ( ) can be determined for, but not limited to, the following drugs: amphetamines (0.010), opiates (0.010), marihuana (0.001), cocaine (0.020), phencyclidine (0.002), benzodiazepines (0.030), barbiturates (0.060), antidepressants (0.100), and antihistamines (0.020). Drugs and/or their metabolites, that are not impairing or abused, may be reported from the initial tests. See the CAMI Drug Information Web Site for additional information (<http://jag.cami.jccbi.gov/toxicology/>).

>> 118.61 (ug/ml, ug/g) Acetaminophen detected in Urine  
>> Acetaminophen detected in Liver  
>> Acetaminophen detected in Blood (Cavity)  
>> Chlorpheniramine detected in Liver  
>> 0.024 (ug/ml, ug/g) Chlorpheniramine detected in Blood (Cavity)  
>> Citalopram detected in Liver  
>> Citalopram detected in Muscle  
>> Dextromethorphan detected in Liver  
>> Dextromethorphan detected in Muscle

Tuesday, September 27, 2016

**CONTINUATION OF REF#: 201600128001**

- >> Dextrorphan detected in Liver
- >> Dextrorphan detected in Muscle
- >> N-Desmethylocitalopram detected in Liver
- >> N-Desmethylocitalopram detected in Muscle

Russell Lewis, Ph.D.  
TC, FAA, Forensic Toxicology  
Research Team CAMI



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|                      |                                                                                |               |            |               |              |       |          |
|----------------------|--------------------------------------------------------------------------------|---------------|------------|---------------|--------------|-------|----------|
| ACCIDENT #           | 0128                                                                           | INDIVIDUAL#:  | 001        | NAME:         | [REDACTED]   | MODE: | AVIATION |
| DATE OF ACCIDENT     | 07/07/2016                                                                     | DATE RECEIVED | 07/13/2016 | PUTREFACTION: | No           |       |          |
|                      | N # 967JB                                                                      | NTSB #        | CEN16LA260 | CAMI REF #    | 201600128001 |       |          |
| LOCATION OF ACCIDENT | Kennett, MO                                                                    |               |            |               |              |       |          |
| SPECIMENS            | Bile, Blood (Cavity), Brain, Heart, Kidney, Liver, Lung, Muscle, Spleen, Urine |               |            |               |              |       |          |

## CLINICAL REPORT

DNA Genotyping: This assay is performed by comparing PCR fragment lengths generated from 9 autosomal CODIS loci and a sex determination reaction pair. The autosomal short tandem repeat (STR) CODIS loci are: D3S1358, D5S818, D7S820, D13S317, D16S539, FGA, TH01, TPOX, and vWA. All STR loci are variable four-nucleotide tandem repeats. Reactions for each autosomal locus are individual reactions with no multiplexing. The sex determination reaction is a duplex reaction testing for the presence of the Y chromosome-specific SRY locus and the homologous zinc finger protein genes ZFX/ZFY of the X and Y chromosomes. The expected product lengths from these two reactions differ by more than 200 nucleotides. PCR fragment lengths are compared by microfluidic electrophoresis on an Agilent BioAnalyzer 2100 using DNA1000 series 2 chips run under Agilent's DNA1000 series 2 protocol for this instrument. At the expected fragment lengths for these loci, this instrument has four nucleotide resolution. The results from these tests are not suitable for civil or criminal litigation.

>> 8.8 (%) Hemoglobin A1C detected in Blood (Cavity)  
>> 310 (mg/dl ) Glucose detected in Urine

TC, FAA, Forensic Toxicology  
Research Team CAMI



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Thursday, December 08, 2016

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ACCIDENT # 0128    INDIVIDUAL#: 001    NAME: [REDACTED]    MODE: AVIATION  
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### AMENDED FORENSIC TOXICOLOGY FATAL ACCIDENT REPORT

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Thursday, December 08, 2016

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Friday, December 09, 2016

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### CLINICAL REPORT

CLINICAL: Vitreous and Urine are tested for the presence of glucose with reagent strips and by enzymatic spectrophotometric analysis. Postmortem vitreous glucose levels above 125 mg/dL are considered abnormal and postmortem urine levels above 100 mg/dL are considered abnormal. Hemoglobin A1C is analyzed using a latex immunoagglutination inhibition methodology. Hemoglobin A1C blood levels above 6% are considered abnormal. Urine specimens are defined as "dilute" if the creatinine concentration is < 20 mg/dL and the specific gravity is < 1.003. Concentrations of serotonin metabolites 5-hydroxytryptophol (5-HTOL) and 5-hydroxyindole-3-acetic acid (5-HIAA) are measured by LC/MS. A 5-HTOL/5-HIAA ratio value < 15 pmol/nmol is not consistent with ethanol ingestion, while a ratio value > 15 pmol/nmol is indicative of ethanol ingestion.

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