

Docket No. SA-539

Exhibit No. 18-B

NATIONAL TRANSPORTATION SAFETY BOARD

Washington, D.C.

FAA Bioaeronautical Laboratory
Forensic Toxicology and Clinical Report

(4 Pages)



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

Friday, September 30, 2016

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

ACCIDENT #	0154	INDIVIDUAL#:	001	NAME:	[REDACTED]	MODE:	AVIATION
DATE OF ACCIDENT	07/30/2016	DATE RECEIVED	08/03/2016	PUTREFACTION:	Yes		
	N # 4691D	NTSB #	DCA16MA204	CAMI REF #	201600154001		
LOCATION OF ACCIDENT	Lockhart, TX						
SPECIMENS	Bile, Blood, Brain, Gastric, Heart, Kidney, Liver, Lung, Muscle, Spleen, Urine, Vitreous						

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 specimen 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), marijuana (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/>).

>> 32.72 (ug/ml, ug/g) Acetaminophen detected in Urine
>> Dextromethorphan detected in Lung
>> Dextromethorphan detected in Liver
>> 0.03 (ug/ml, ug/g) Diazepam detected in Lung
>> 0.087 (ug/ml, ug/g) Diazepam detected in Liver
>> Diphenhydramine detected in Lung
>> Diphenhydramine detected in Liver
>> 40.433 (ug/mL, ug/g) Fluoxetine detected in Liver
>> 0.298 (ug/mL, ug/g) Fluoxetine detected in Blood

Friday, September 30, 2016

CONTINUATION OF REF#: 201600154001 [REDACTED]

>> Methylphenidate detected in Lung
>> Norcyclobenzaprine detected in Liver
>> Norcyclobenzaprine detected in Blood
>> 0.047 (ug/ml, ug/g) Nordiazepam detected in Lung
>> Norfluoxetine NOT detected in Blood
>> Norfluoxetine detected in Liver
>> Oxycodone detected in Blood
>> 0.977 (ug/mL, ug/g) Oxycodone detected in Urine
>> Oxymorphone NOT detected in Blood
>> Oxymorphone detected in Urine

[REDACTED]

2016.09.30 13:53:11 -05'00'

TC, FAA, Forensic Toxicology
Research Team CAMI



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

Mike Monroney
Aeronautical Center

P O Box 25082
Oklahoma City, Oklahoma 73125

Friday, September 30, 2016

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

ACCIDENT # 0154 INDIVIDUAL#: 001 NAME: [REDACTED] MODE: AVIATION
DATE OF ACCIDENT 07/30/2016 DATE RECEIVED 08/03/2016 PUTREFACTION: Yes
N # 4691D NTSB # DCA16MA204 CAMI REF # 201600154001
LOCATION OF ACCIDENT Lockhart, TX
SPECIMENS Bile, Blood, Brain, Gastric, Heart, Kidney, Liver, Lung, Muscle, Spleen, Urine, Vitreous

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.

>> 38 (mg/dl) Glucose detected in Urine
>> 7.3 (%) Hemoglobin A1C detected in Blood

[REDACTED]
[REDACTED]
2016.09.30 13:52:56 -05'00'

TC, FAA, Forensic Toxicology
Research Team CAMI