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

U.S. Department of Transportation Federal Aviation Administration

Mike Monroney Aeronautical Center

Tuesday, April 22, 2003

P.O. Box 25082 Oklahoma City, Oklahoma 73125

National Transportation Safety Board

Du Page Airport

West Chicago, IL 60185

 ACCIDENT #
 0083
 INDIVIDUAL#:
 001
 NAME:
 BATTLE,
 CHRISTIE
 M.

 DATE OF ACCIDENT
 03/22/2003
 DATE RECEIVED
 03/25/2003
 N # 6211E
 NTSB #
 CHI03FA088

MODE: AVIATION PUTREFACTION: No CAMI REF # 200300083001

LOCATION OF ACCIDENT North English, IA

SPECIMENS Bile, Blood, Brain, Gastric, Heart, Kidney, Liver, Lung, Muscle, Spleen, Urine, Vitreous

## FINAL FORENSIC TOXICOLOGY FATAL ACCIDENT REPORT

CARBON MONOXIDE: The carboxyhemoglobin saturation is determined by spectrophotometry with a 10% cut off.

>> NO CARBON MONOXIDE detected in Blood

CYANIDE: The presence of cyanide is screened by Conway Diffusion. Positive cyanides are quantitated using spectrophotometry. The limit of quantitation of cyanide is 0.25 ug/mL. Normal blood cyanide concentrations are less than 0.15 ug/mL, while lethal concentrations are greater than 3ug/mL.

>> NO CYANIDE detected in Blood

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

>> NO ETHANOL detected in Vitreous

DRUGS: Immunoassay and chromatography are used to screen for legal and illegal drugs which include: amphetamine (0.010), opiates (0.010), marihuana (0.001), cocaine (0.020), phencyclidine (0.002), benzodiazepines (0.030), barbiturates (0.060), antidepressants (0.100), antihistamines (0.020), meprobamate (0.100), methaqualone (0.100), and nicotine (0.050). The values in () are the threshold values in ug/mL used to report positive results. Values below this concentration are normally reported as not detected. GC/Mass Spec, HPLC/Mass Spec, or GC/FTIR, is used to confirm most positive results.

>> QUININE present in Blood >> QUININE present in Urine

2003

Dennis V. Canfield, Ph.D. < Manager, Toxicology and Accident Research Laboratory