



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

Monday, August 06, 2018

National Transportation Safety Board
45065 Riverside Parkway
Ashburn, VA 20147

Pilot

ACCIDENT # 0101 INDIVIDUAL#: 002 NAME: [REDACTED] MODE: AVIATION
DATE OF ACCIDENT 06/13/2018 DATE RECEIVED 06/19/2018 PUTREFACTION: Yes
N # 218BL NTSB # ERA18FA167 CAMI REF # 201800101002
LOCATION OF ACCIDENT Springfield Township, NJ
SPECIMENS Bile, Blood, Gastric, Heart, Kidney, Liver, Lung, Muscle, Spleen

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.

- NO CARBOXYHEMOGLOBIN detected in Blood

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 Blood

DRUGS: Specimens are analyzed using immunoassay, chromatography, mass spectrometry, or spectrophotometry. 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/>).

- NO DRUGS listed above detected in Blood

c=US, o=U.S. Government, ou=AMC, ou=AMC,
cn=RUSSELL J LEWIS
2018.08.09 10:58:26 -05'00'

[REDACTED]
Russell Lewis, Ph.D., F-ABFT
Supervisor, Forensic Sciences
Bioaeronautical Sci. Research Lab
CAMI, FAA



NMS Labs

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Willow Grove, PA
Phone: [redacted] Fax: [redacted]
e-mail: [redacted]

Robert A. Middleberg, PhD, F-ABFT, DABCC-TC, Laboratory Director

Toxicology Report

Report Issued 06/26/2018 08:01

Patient Name WINNER, ROBERT
Patient ID 03-18-0475
Chain 18179229
Age 69 Y [redacted]
Gender Male
Workorder 18179229

To: 10275
Burlington County ME Office
Attn: Andrew Sheganoski
[redacted]
Mount Holly, NJ [redacted]

Page 1 of 2

[redacted]

Positive Findings:

None Detected

See Detailed Findings section for additional information

Testing Requested:

Analysis Code	Description
8051B	Postmortem, Basic, Blood (Forensic)

Specimens Received:

ID	Tube/Container	Volume/ Mass	Collection Date/Time	Matrix Source	Miscellaneous Information
001	Gray Top Tube	8.5 mL	06/14/2018	Blood	
002	White Plastic Container	15 mL	06/14/2018	Gastric Fluid	BROWN FLUID, pH=4

All sample volumes/weights are approximations.

Specimens received on 06/20/2018.

RECEIVED
JUN 26 2018
BY: [redacted]



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Workorder 18179229
Chain 18179229
Patient ID 03-18-0475

Page 2 of 2

Detailed Findings:

Examination of the specimen(s) submitted did not reveal any positive findings of toxicological significance by procedures outlined in the accompanying Analysis Summary.

Unless alternate arrangements are made by you, the remainder of the submitted specimens will be discarded one (1) year from the date of this report; and generated data will be discarded five (5) years from the date the analyses were performed.

Workorder 18179229 was electronically signed on 06/26/2018 07:56 by:



Paul Miller,
Certifying Scientist

Analysis Summary and Reporting Limits:

All of the following tests were performed for this case. For each test, the compounds listed were included in the scope. The Reporting Limit listed for each compound represents the lowest concentration of the compound that will be reported as being positive. If the compound is listed as None Detected, it is not present above the Reporting Limit. Please refer to the Positive Findings section of the report for those compounds that were identified as being present.

Acode 50010B - Amphetamines Confirmation, Blood

-Analysis by High Performance Liquid Chromatography/ Tandem Mass Spectrometry (LC-MS/MS) for:

Compound	Rpt. Limit	Compound	Rpt. Limit
Amphetamine	5.0 ng/mL	Methamphetamine	5.0 ng/mL
Ephedrine	5.0 ng/mL	Norpseudoephedrine	5.0 ng/mL
MDA	5.0 ng/mL	Phentermine	5.0 ng/mL
MDEA	5.0 ng/mL	Phenylpropanolamine	5.0 ng/mL
MDMA	5.0 ng/mL	Pseudoephedrine	5.0 ng/mL

Acode 8051B - Postmortem, Basic, Blood (Forensic)

-Analysis by Enzyme-Linked Immunosorbent Assay (ELISA) for:

Compound	Rpt. Limit	Compound	Rpt. Limit
Amphetamines	20 ng/mL	Fentanyl / Acetyl Fentanyl	0.50 ng/mL
Barbiturates	0.040 mcg/mL	Methadone / Metabolite	25 ng/mL
Benzodiazepines	100 ng/mL	Methamphetamine / MDMA	20 ng/mL
Buprenorphine / Metabolite	0.50 ng/mL	Opiates	20 ng/mL
Cannabinoids	10 ng/mL	Oxycodone / Oxymorphone	10 ng/mL
Cocaine / Metabolites	20 ng/mL	Phencyclidine	10 ng/mL

-Analysis by Headspace Gas Chromatography (GC) for:

Compound	Rpt. Limit	Compound	Rpt. Limit
Acetone	5.0 mg/dL	Isopropanol	5.0 mg/dL
Ethanol	10 mg/dL	Methanol	5.0 mg/dL