AUTOPSY REPORT

No. 2018-09806 BURROUS, CHRISTOPHER ROCKY

I performed an autopsy on the body of

.

atTHE DEPARTMENT OF M	MEDICAL EXAMINER-CORONER
Los Angeles, California	on <u>December 28, 2018 0900</u> (Date) (Time)
From the anatomic findings and pertiner	t history I ascribe the death to:
(A) Methamphetamine toxicity	
(B)	
(C)	
OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO Hypertensive and atheros	OTHEIMMEDIATE CAUSE OF DEATH: Clerotic cardiovascular disease

Anatomical Summary:

- I. Hypertensive cardiovascular disease A. Concentric left ventricular hypertrophy
- II. Atherosclerotic cardiovascular disease A. Left anterior descending artery, 60% stenosis
- III. Pulmonary edema, marked
- IV. Rectal mucosa erythema, and serosal hemorrhage
- V. Hepatosplenomegaly

CIRCUMSTANCES:

Please see Investigator's Report.

EXTERNAL EXAMINATION:

The body is identified by toe tags and is that of an unembalmed refrigerated adult male who appears the reported age of 43 years. The body measures 72 inches, weighs 222 pounds, and is normally developed. The nutritional status is unremarkable. Examination of the skin no evidence of jaundice. Scars: right upper back, and underneath chin. Tattoos: not identified. Rigor mortis is absent. Livor mortis is blanching with pressure and posterior.

The head is normal in size and shape. The scalp hair is brown. There is no temporal or vertex balding. Mustache is absent .

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Beard is absent. Examination of the eyes reveals irides that appear to be brown and sclerae that are white. The conjunctivae are not congested. The oronasal passages are unobstructed. There is no foam in the nares or oral cavity. Upper and lower teeth are present. Frenulae and oral mucosa are intact.

There is no chest deformity. There is no increased anterior-posterior diameter. The abdomen is flat. The genitalia are those of an adult male. The external genitalia are without trauma or lesions.

EVIDENCE OF THERAPEUTIC INTERVENTION:

There is an endotracheal tube that traverses the oropharynx, and terminates in the trachea. There is a defibrillator pad of the mid back. There is an intraosseous line of the left shin. There is focal pericardial hemorrhage. Recent needle punctures are not identified. There has not been post mortem intervention for organ procurement.

POST MORTEM CHANGES:

There is no evidence of post mortem changes.

EVIDENCE OF INJURY:

There is no evidence of injury.

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. 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

AUTOPSY REPORT

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visceral fascia. There are no prevertebral fascial hemorrhages. The tongue when sectioned shows no trauma.

CHEST/ABDOMINAL CAVITY:

Pleural effusions are absent. Pleural fibrous adhesions are absent. The parietal pleurae are intact. 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. Ascites is not present. The peritoneal cavity is without evidence of peritonitis. There are no adhesions.

SYSTEMIC AND ORGAN REVIEW:

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

MUSCULOSKELETAL SYSTEM:

No abnormalities of the uninjured bony framework or muscles are identified.

CARDIOVASCULAR SYSTEM:

The thoracic and abdominal aorta have no atherosclerosis. There is no tortuosity or widening of the thoracic segment. 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 minimal fluid.

The heart weighs 450 grams. It has a normal configuration. The cardiac silhouette is not globular and the myocardium is not flabby. The right ventricle is 0.3 cm, the interventricular septum is 1.9 cm in thickness, and the left ventricle is 1.9 cm in thickness. The chambers are normally developed and are without mural thrombosis. The valves are thin, leafy, and competent. No cardiac valve vegetations are present. There is no endocardial discoloration. There is no abnormality of the apices of the papillary musculature. There are no defects of

AUTOPSY REPORT

No. 2018-09806 BURROUS, CHRISTOPHER ROCKY

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the septum. The great vessels enter and leave in a normal fashion. The ductus arteriosus cannot be probed. The coronary ostia are patent, located at or below the sinotubular junction and are relatively centrally located within their respective sinuses. The coronary artery distribution is right dominant. Serial sectioning of the coronary arteries show mid left anterior descending artery concentric tan (60% stenosis) atherosclerosis.

RESPIRATORY SYSTEM:

Scant secretions are found in the upper respiratory and lower bronchial passages. The mucosa is intact and pale. The right lung weighs 1100 grams and the left lung weighs 1000 grams. The pulmonary parenchyma is dark red-purple and the cut surfaces exude a marked amount of blood and frothy fluid. The visceral pleurae are smooth and intact. The pulmonary vasculature is without thromboembolism. There is no evidence of pulmonary infarction.

GASTROINTESTINAL SYSTEM:

The esophagus is intact throughout. Esophageal varices are not present. The stomach contains approximately 50 cc of brown (cannot identify types of food). The mucosa is unremarkable. The small intestine and colon are unremarkable. The perianal region surface shows a thin layer of clear jelly like material. The rectal serosal surface, and associated soft-tissue show diffuse hemorrhage. The mucosa of the rectum is slightly erythematous. The appendix is present. The pancreas occupies a normal position. There is no necrosis or trauma. There is no evidence of pancreatic fibrosis or of pancreatitis.

HEPATOBILIARY SYSTEM:

The liver weighs 2500 grams, and is red-brown. The capsule is intact and the consistency of the parenchyma is firm. The cut surface is smooth. There is no evidence of cirrhosis. There is a normal lobular arrangement. The gallbladder is present. The wall is thin and pliable. It contains a moderate amount of bile and no calculi.

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URINARY SYSTEM:

The right kidney weighs 200 grams and the left kidney weighs 200 Grams. The kidneys are normally situated and the capsules strip easily revealing a surface that is smooth and glistening. 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 approximately 20 mL of yellow urine. The urine is positive for methamphetamine.

GENITAL SYSTEM:

The prostate is not enlarged and is without nodularity. Both testes are in the scrotum and are unremarkable and without trauma.

HEMOLYMPHATIC SYSTEM:

The spleen weighs 600 grams. The capsule is intact. The parenchyma is dark red and soft. There is no increased follicular pattern. The bone is not remarkable. The bone marrow of the rib is unremarkable.

ENDOCRINE SYSTEM:

The thyroid, adrenal, and pituitary glands are unremarkable. The parathyroid glands are not identified. The thymus is the usual appearance for the age.

SPECIAL SENSES:

The eyes are not dissected. The middle and inner ear are not dissected.

HEAD AND CENTRAL NERVOUS SYSTEM:

There is no subcutaneous, subgaleal, or subperiosteal 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.

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The brain weighs 1500 grams. The leptomeninges are thin and transparent. A normal convolutionary pattern is observed. The brain is diffusely softened. Coronal sectioning demonstrates a uniformity of cortical gray thickness. The basal ganglia are intact. Anatomic landmarks are preserved. Cerebral contusions are not present. The ventricular system has a normal appearance 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 cerebral arteries are without arteriosclerosis.

SPINAL CORD:

The cord is not dissected.

EVIDENCE COLLECTION:

No evidence collected.

HISTOLOGIC SECTIONS:

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

HISTOLOGIC KEY:

None.

TOXICOLOGY:

Samples of heart blood, femoral blood, gastric contents, urine and vitreous are submitted to the laboratory. An EDTA tube is collected for blood typing.

SPECIAL PROCEDURES:

None.

PHOTOGRAPHY:

AUTOPSY REPORT

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

RADIOLOGY:

No radiologic examination performed.

WITNESSES:

There were no witnesses.

DIAGRAMS USED:

Diagram form #20 was used during the performance of the autopsy. Coroner diagrams are not intended to be facsimiles nor are they drawn to scale.

SUMMARY & OPINION:

This 43-year-old man, Christopher Rocky Burrous, died of methamphetamine toxicity. Hypertensive and atherosclerotic cardiovascular disease also significantly contributed to death.

According to reports, Mr. Burrous was with a companion in a hotel. He was engaged in various sexual activities with his companion, then he inserted methamphetamine into his rectum. Later on, in the encounter Mr. Burrous inserted a second 'rock' of methamphetamine through his anus and put on a mask and doused the filters with "poppers". His companion inserted his hand through his anus. Mr. Burrous began grunting, then vomited and became unresponsive. Cardiopulmonary resuscitation (CPR) was initiated before paramedics arrived. He was taken to the hospital and pronounced dead in the emergency room.

Autopsy revealed an enlarged heart, with coronary artery disease. Pulmonary edema (fluid in the lungs) was also present. The liver and spleen were enlarged. The rectum showed erythema (redness) with hemorrhage (bleeding) of the outermost layer.

Postmortem (after death) toxicology revealed methamphetamine (see separate report).

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Methamphetamine is a central nervous system stimulant with high potential for abuse. At any dosage it can cause an arrhythmia (lethal heart rhythm) and sudden death.

Hypertensive cardiovascular disease (high blood pressure) increases strain on the heart, which causes it to enlarge. In a large heart is at risk for an arrhythmia and sudden death. Atherosclerotic cardiovascular disease (cholesterol plaques of arteries supplying blood to the heart) decreases the amount of nutrients and oxygen delivered to the heart. Methamphetamine increases the blood pressure and can further narrow coronary arteries by spasm (contraction) therefore hypertensive and atherosclerotic cardiovascular disease also significantly contributed to death.

There was concern for the presence of amyl nitrate (poppers) in the system, however, toxicology testing did not confirm the presence of this substance.

The manner of death is accident.

Odev V. Ukpo, M.D., M.S.

Senior Deputy Medical Examiner

2-22-19

Date

2018-09806

BURROUS, CHRISTOPHER ROCK

ACC

blancing liver with prosure

\$= scar DF= deliberalater paul

I()

E.F.) ET tuhp

ID = introductions line

Date 12-28-18

Deputy Medi

M.D.

Deputy Medical Examiner

(Rev. 9/13)

2018-09806

PURROUS. CHRISTOPHER ROCKY

ACC

SC

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SCALP
                                       PERITONEUM
EXTERNAL EXAM
                                                                           CALVARIUM
                                          Fluid
   Sex
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   Race
                                          Adhesions
                                       LIVER Wt. 2500
                                                                               Dura
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                                           Capsule
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                                          Lobules
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   Hair
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                                                                              Middle ears
   Eves
                                           Calculus
                                                                              Other
   Sclera
                                                                           PITUITARY
                                           Bile ducts
   Teeth
                                       SPLEEN Wt. 600
   Mouth
                                           Color
   Tongue
                                           Consistency
   Nose
                                                                           SPINAL CORD
   Chest
                                           Capsule
                                          Malpigment
   Breasts
                                       PANCREAS
   Abdomen
                                       ADRENALS
   Scar
                                       KIDNEYS Wt.
                                                                           TOXICOLOGY SPECIMENS
   Genitals
                                           R 200
   Edema
                                          L 200
   Skin
                                           Capsule
   Decubitus
                                                                           SECTIONS FOR
HEART Wt. 450
                                           Cortex
                                                                           HISTOPATHOLOGY
                    RV
                                           Vessels
   Pericardium
                    Septum 19
                                           Pelvis
   Hypertrophy
                    LV [,9
                                          Ureters
   Dilation
                                       BLADDER 20 mL
   Muscle
                     Septum
                                       GENITALIA
                                                                           MICROBIOLOGY
   Valves
   Coronaries mLAD 60%
                                           Prostate
                                           Testes
AORTA
VESSELS
                                           Uterus
LUNGS Wt.
                                           Tubes
                                                                           DIAGRAMS
                                           Ovaries
                                                                           X-RAYS
   R //00
                                       OESOPHAGUS
   L 1000
                                       STOMACH
   Adhesions
                                           Contents
   Fluid
                                                                           OTHER PROCEDURES
                                       DUOD. & SM. INT.
   Atelectasis
                                       APPENDIX(+)
   Oedema ~ ~~ K
                                                     Rectal serosal soft tissue hemorrhaye
                                       LARGE INT.
   Congestion
                                       ABDOM, NODES
   Consolidation
                                                                           GROSS IMPRESSIONS
                                       SKELETON
   Bronchi
   Nodes
                                           Spine
PHARYNX
                                           Marrow
                                           Rib Cage
TRACHEA
                                           Long bones
THYROID
                                           Pelvis
THYMUS
LARYNX
HYOID
```

Date

12-28-18

Time

09011

Deputy Medical Examiner

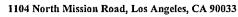
76A878-(REV. 3/05)

ABDOMINAL WALL FAT

COUNTY OF LOS ANGELES	MEDIC	CAL REPOR	e T	DEPARTMENT OF MEDICAL E	EXAMINER-CORONER
AUTOPSY C	CLASS: 🔲 A 🙇 B 🔲 C 🔲 Exa	mination Only D			
	BJECTION TO AUTOPSY				
	8-15 Time: (Max) Dr. Oley (Print), L	Uspo	APPROXI-	5018-04806	
FINAL ON:	2-22-19 By: Odey	Ukpo	MATE INTERVAL BETWEEN	BURROUS, CHRIS	
DEATH WAS CAUSED BY: (En	(Print) (ter only one cause per line for A, B,	C, and D)	ONSET AND DEATH	ACC	S C
IMMEDIATE CAUSE:				Age: 43 Gender: Male	
(A) Methanphetanin DUE TO, OR AS A CONSEQUENCE	le toxicity		Unknow	PRIOR EXAMINATION	
	Æ OF:		3	⊠ BODY TAG	☐ CLOTHING
(B)			1.0	☐ X-RAY (No) ☐ SPECIAL PROCESSING TAG	☐ FLUORO ☐ MED. RECORDS
DUE TO, OR AS A CONSEQUENC (C)	E OF:			AT SCENE PHOTOS (No	
DUE TO, OR AS A CONSEQUENC	ST OF.			CASE CIRCUM	STANCES
(D)	E UF:			☐ EMBALMED ☐ DECOMPOSED	
	TING BUT NOT RELATED TO THE IMME	DIATE CAUSE OF D	CATIL	>24 HRS IN HOSPITAL	, 4. /
t	neroscleratic condionascula		EAIN;	TYPING SPE	
			Mirror Martin Marie (1980)	TYPING SPECIMEN TAKEN BY	
☐ NATURAL	☐ SUICIDE ☐	HOMICIDE		source: femoral bl	
☑ ACCIDENT	☐ COULD NOT BE DETE	ERMINED		TOXICOLOGY S	
If other than natural causes, HOW DID INJURY OCCUR?	Recreational usage			COLLECTED BY: Rosel Maintenant BLOOD Research Maintenant BLOOD Research Maintenant Research R	STOMACH CONTENTS
		100-		TECHNIQUE: PXT BLOOD D	SPLEEN .
WAS OPERATION PERFORME TYPE OF SURGERY:	ED FOR ANY CONDITION STATED A			BLOOD D BILE S CIVER	EDTA feneral blood
	ATECHNICIAN: S Flores	DATE:		URINE URINE URINE GLUCOSE DIPSTICK RESL	U.T
PREGNANCY IN LAST YEAR	7	XI NOT APPLICABL		TOX SPECIMEN RECONCILIAT	
☐ WITNESS TO AUTOPSY	☐ EVIDENCE RECOVERED AT A			HISTOLO	GY
	Item Description:			Histopath Cut: 🔲 Autopsy 🗆	
				TOXICOLOGY R	EQUESTS
•				FORM 3A: YES NO NO TOXICOLOGY REQUI	ESTED
				SCREEN C H 1	г ⊡ѕ Жі́р
				OTHER (Specify drug and t	issue) any(nitme)
				urine (1) methin	phetania
				REQUESTED MATERIAL O	N PENDING CASES
				· ·	MED HISTORY
				! <u>~</u>	☐ HISTOLOGY ☐ INVESTIGATIONS
				☐ MICROBIOLOGY [☐ RADIOLOGY CONS.	☐ EYE PATH, CONS.
				CONSULT ON:	
	4+111	1		☐ BRAIN SUBMITTED ☐ NEURO CONSULT ☐ D	ME TO CUT
		w		CRIMINALISTICS	
RESIDENT	DME (/ /			GSR SEXUAL ASSAL	JLT OTHER
WHITE - Fi	ile Copy CANARY - Forensic L	_ab PINK - Ce	ertificatio	n GOLDENROD - DME	(Rev. 9/13)



Department of Medical Examiner-Coroner, County of Los Angeles



Laboratory Analysis Summary Report

Decedent: BURROUS, CHRISTOPHER ROCKY



Deputy Medical Examiner 1104 North Mission Road Los Angeles, CA 90033

Coroner Case Number: 2018-09806



SPECIMEN SERVICE DRUG RESULT ANALYST Alcohol Quantitation/Confirmation Blood, Heart M. Schuchardt Alcohol-GC/FID-HS Ethanol Negative **Drug Screen** Blood, Heart Cocaine and Metabolites ELISA-Immunoassay ND D. P. Cruz ND D. P. Cruz ELISA-Immunoassay Fentanyl Methadone D. P. Cruz ELISA-Immunoassay ND ELISA-Immunoassay Methamphetamine & MDMA PP D. P. Cruz ELISA-Immunoassay Opiates: Codeine & Morphine ND D. P. Cruz Opiates: Hydrocodone & Hydromorphone ND D. P. Cruz **ELISA-Immunoassay** ND ELISA-Immunoassay Phencyclidine D. P. Cruzi **Drug Screen/Confirmation** Blood, Femoral ND D. Van Cleve Sympath. Amines-GC/MS Amphetamine D. Van Cleve Sympath. Amines-GC/MS Methamphetamine 0.31 ug/mL Sympath. Amines-GC/MS Methylenedioxyamphetamine (MDA) ND D. Van Cleve Methylenedioxymethamphetamine (MDMA) ND Sympath. Amines-GC/MS D. Van Cleve Blood, Heart Outside Test Inhalants Done NMS Labs, Inc. Sympath. Amines-GC/MS Amphetamine ND D. Van Cleve Sympath. Amines-GC/MS Methamphetamine 0.80 ug/mL D. Van Cleve Sympath. Amines-GC/MS Methylenedioxyamphetamine (MDA) ND D. Van Cleve

Methylenedioxymethamphetamine (MDMA)



Print Date:

Sympath. Amines-GC/MS

ND

D. Van Cleve

Decedent: BURROUS, CHRISTOPHER ROCKY Coroner Case Number: 2018-09806

SPECIMEN SERVICE **DRUG** RESULT ANALYST NOTE: *Outside laboratory tested two inhalant panels; see NMS report for details. Legend: SNS ND Not Detected Specimen Not Suitable Grams ng/g Nanograms per Gram TNP Test Not Performed g Gram Percent ng/mL Nanograms per Milliliter Micrograms g% ug Micrograms per Gram Inconclusive PP Presumptive Positive ug/g Milligrams QNS Quantity Not Sufficient ug/mL Microgram per Milliliter mg

The alcohol analysis was performed in accordance to California Code of Regulations "Title 17" compliance by a qualified analyst in the Forensic Toxicology Laboratory, Forensic Laboratories Division, County of Los Angeles Department of Medical Examiner - Corone

Enzyme-linked immunosorbant assay (ELISA) provides only a preliminary analytical result that is contingent upon a confirmatory test. A "presumptive positive" (PP) signifies a detection of a drug class and must be confirmed by additional testing for true identification and/or quantitation of specific drug(s) present in the specimen.

In accordance with the Department's Evidence Retention Policy, the blood specimen(s) will be retained for one-year and all other specimens for six-months from Autopsy.

Final Review By:

Sarah Buxton de Quintana Supervising Criminalist I

The above results have been technically and administratively reviewed and are the opinions and conclusions of the analysts noted. The final review has been certified by the noted Toxicologist to ensure that all standard operating procedures were followed as set by the Forensic Toxicology Laboratory, Forensic Sciences Laboratory Division, County of Los Angeles Department of Medical Examiner-Coroner.

Och 2-22-19



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, F-ABFT, DABCC-TC, Laboratory Director

Toxicology Report

Report Issued 02/01/2019 14:01

10139

Los Angeles County Coroner Medical Examiner

Attn: Mark Schuchardt 1104 N. Mission Road Los Angeles, CA 90033 Patient Name BURROUS, CHRISTOPHER

Patient ID 2018-09806

Chain 19010749

Age Not Given

DOB Not Given

Gender Not Given

Workorder 19010749

Received

01/11/2019 14:46

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.

Sample ID 19010749-001

Matrix Blood

Patient Name BURROUS, CHRISTOPHER

Patient ID 2018-09806

Container Type Gray Top Tube

Collect Dt/Tm 01/09/2019 13:58

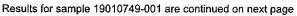
Source Heart Blood

Approx Vol/Weight 2 mL

Receipt Notes

None Entered

Analysis and Comments	Result	Units	Reporting Limit Notes
2411B Inhalants Panel, Solvents, Blood			
Analysis by Headspace Gas Chromatography (GC)			
Acetone Normal: Up to 3 mg/dL. Blood Acetone concentrations are markedly elevated during diabetic or fasting ketoacidosis and may range from 10 - 70 mg/dL.	None Detected	mg/dL	0.50
n-Butanol Synonym(s): Butyl Nitrite Metabolite; Butyl Alcohol	None Detected	mcg/mL	2.0
Amyl Alcohol Synonym(s): Amyl Nitrite Metabolite	None Detected	mcg/mL	· 2.0
Isobutanol Synonym(s): Iso-Butyl Nitrite Metabolite; Isobutyl Alcoho	None Detected	mcg/mL	2.0
Iso-Amyl Alcohol	None Detected	mcg/mL	2.0





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, F-ABFT, DABCC-TC, Laboratory Director

Sample ID 19010749-001 Matrix Blood Patient Name BURROUS, CHRISTOPHER Patient ID 2018-09806 Collect Dt/Tm 01/09/2019 13:58 Source Heart Blood

analysis and Comments	Result	Units	Reporting Limit Notes
Synonym(s): Iso-Amyl Nitrite Metabolite			
enzene	None Detected	mcg/mL	0.050
Following exposure to 25 ppm in air for 2 hours: Approximately 0.2 mcg/mL.			
thanol	None Detected	mg/dL	5.0
Synonym(s): Ethyl Alcohol; Metabolite of Ethyl Aceta	ate		
Ethyl alcohol (ethanol, drinking alcohol) is a central nervous system depressant and can cause effects suc as impaired judgment, reduced alertness and impaired muscular coordination. Ethanol can also be a product of decomposition or degradation of biological samples	I		
thyl Acetate	None Detected	mcg/mL	1.0
thyl Ether	None Detected	mcg/mL	1.0
Synonym(s): Diethyl Ether			
leptane	None Detected	mcg/mL	2.0
exane	None Detected	mcg/mL	2.0
opropanol	None Detected	mg/dL	1.0
Synonym(s): Sopropyl Alcohol		ı	
Three workers exposed to 191 - 200 ppm isopropanol air had blood isopropanol concentrations <1 mg/dL; acetone levels were 4 - 16 mg/dL during the exposure. After a sponge bath with isopropanol, one adult had a blood isopropanol concentration of 10 mg/dL.			
lethanol	None Detected	mg/dL	5.0
Synonym(s): Methyl Alcohol			
Endogenous blood levels of methanol from metabolic a dietary sources are approximately 0.15 mg/dL.	and		
Exposure to 800 ppm methanol for 8 hours produced a maximum average blood methanol concentration of 3.1 mg/dL.	1		
ethyl Ethyl Ketone	None Detected	mcg/mL	0.30
Synonym(s): MEK			
entane	None Detected	mcg/mL	2.0
tyrene	None Detected	mcg/mL	0.50



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e-mail: nms@nmslabs.com
Robert A. Middleberg, PhD, F-ABFT, DABCC-TC, Laboratory Director

Sample ID 19010749-001 Matrix Blood Patient Name BURROUS, CHRISTOPHER Patient ID 2018-09806 Collect Dt/Tm 01/09/2019 13:58 Source Heart Blood

Analysis and Comments	Result	Units	Reporting Limit	Notes
Biological Exposure Index (ACGIH): 0.02 mcg Toluene/mL blood measured in a prior to last shift of workweek specimen.				
o-Xylene	None Detected	mcg/mL	0.30	
m-Xylene	None Detected	mcg/mL	0.30	
p-Xylene	None Detected	mcg/mL	0.30	
2415B Inhalants Panel, Blood				
Analysis by Headspace Gas Chromatography (GC)				
Benzene	None Detected	mcg/mL	0.050	
Following exposure to 25 ppm in air for 2 hours: Approximately 0.2 mcg/mL.				
Toluene	None Detected	mcg/mL	0.30	
Biological Exposure Index (ACGIH): 0.02 mcg Toluene/mL blood measured in a prior to last shift of workweek specimen.				
Xylene	None Detected	mcg/mL	0.30	
Following daily exposure to 100 ppm total Xylenes: Approximately 1 mcg/mL.	ı	ř		
Acetone	None Detected	mg/dL	0.50	
Normal: Up to 3 mg/dL. Blood Acetone concentrations are markedly elevated during diabetic or fasting ketoacidosis and may range from 10 - 70 mg/dL.				
Ethyl Acetate	None Detected	mcg/mL	1.0	
Methyl Ethyl Ketone	None Detected	mcg/mL	0.30	
Synonym(s): MEK				
Iso-Amyl Alcohol	None Detected	mcg/mL	2.0	
Synonym(s): Amyl Nitrite Metabolite				
n-Amyl Alcohol	None Detected	mcg/mL	2.0	
Synonym(s): Amyl Nitrite Metabolite				
Isobutanol	None Detected	mcg/mL	2.0	
Synonym(s): Iso-Butyl Nitrite Metabolite; Isobutyl Alcohol				
n-Butanol	None Detected	mcg/mL	2.0	
ORON US 28th	Resu	its for sample 19010749-0	01 are continued or	next page

NMS LABS

NMS Labs

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Phone: (215) 657-4900 Fax: (215) 657-2972
e-mail: nms@nmslabs.com
Robert A. Middleberg, PhD, F-ABFT, DABCC-TC, Laboratory Director

Sample ID 19010749-001 Matrix Blood Patient Name BURROUS, CHRISTOPHER Patient ID 2018-09806 Collect Dt/Tm 01/09/2019 13:58 Source Heart Blood

Analysis and Comments	Result	Units	Reporting Limit	Notes
Synonym(s): Butyl Nitrite Metabolite; Butyl Alcohol				
Cyclopropane	None Detected	mcg/mL	2.0	
Ethyl Ether	None Detected	mcg/mL	1.0	
Synonym(s): Diethyl Ether				
Chloromethane	None Detected	mcg/mL	2.0	
Dichloromethane	None Detected	mcg/mL	2.0	
Synonym(s): Methylene Chloride				
Exposure to 200 ppm (TLV) in air for two hours produced up to 2.0 mcg/mL Blood.				
Chloroform	None Detected	mcg/mL	2.0	
Toxic: Greater than 70 mcg/mL.				
Carbon Tetrachloride	None Detected	mcg/mL	2.0	
Synonym(s): Tetrachloromethane				
Chloroethane	None Detected	mcg/mL	2.0	
Dichloroethane	None Detected	mcg/mL	2.0	
1,1,1-Trichloroethane	None Detected	mcg/mL	2.0	
Synonym(s): Methyl Chloroform				
1,1,2,2-Tetrachloroethane	None Detected	mcg/mL	2.0	
Trichlorofluoromethane	None Detected	mcg/mL	2.0	
Synonym(s): Freon 11				
Dichlorodifluoromethane	None Detected	mcg/mL	2.0	
Synonym(s): Freon 12				
Trichlorotrifluoroethane	None Detected	mcg/mL	2.0	
Synonym(s): Freon 113				
Methanol	None Detected	mg/dL	5.0	
Synonym(s): Methyl Alcohol				
Endogenous blood levels of methanol from metabolic and dietary sources are approximately 0.15 mg/dL.				
Exposure to 800 ppm methanol for 8 hours produced a maximum average blood methanol concentration of 3.1 mg/dL.				
Ethanol	None Detected	mg/dL	5.0	

Results for sample 19010749-001 are continued on next page



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

Sample ID 19010749-001 Matrix Blood Patient Name BURROUS, CHRISTOPHER Patient ID 2018-09806 Collect Dt/Tm 01/09/2019 13:58 Source Heart Blood

Analysis and Comments	Result	Units	Reporting Limit Notes
Synonym(s): Ethyl Alcohol; Metabolite of Ethyl Acetate			
Ethyl alcohol (ethanol, drinking alcohol) is a central nervous system depressant and can cause effects such as impaired judgment, reduced alertness and impaired muscular coordination. Ethanol can also be a product of decomposition or degradation of biological samples.			
Isopropanol	None Detected	mg/dL	1.0
Synonym(s): Isopropyl Alcohol			
Three workers exposed to 191 - 200 ppm isopropanol in air had blood isopropanol concentrations <1 mg/dL; acetone levels were 4 - 16 mg/dL during the exposure. After a sponge bath with isopropanol, one adult had a blood isopropanol concentration of 10 mg/dL.			



COUNTY OF LOS AN	GELES					CA	SE F	REPORT					DEF	PARTMENT OF CO	RONER
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	And A Company														
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COMPARISON 7	TO CALPH	ото										13	2/27/2	2018 19:51	
PLACE OF DEATH / PLA	ACE FOUND		ADDRES	S OR LOCATION	¥						CITY			ZIP	
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GLENDALE AD PLACE OF INJURY DAYS INN	VENTIST	AT WOR	K DA	TE	TIME			ON OR ADDRESS IONEER DR	IVE#	#608, GLENE	DALE, CA			ZIP 91203	
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OTHER AGENCY INV. C GLENDALE P.D	FFICER	 1BIKYAN			(818) 548	PHONE 8-3987		REP 18-19	ORT NO) .		NOTIFIED BY			NO
TRANSPORTED BY MICHELLE SIEI	RRA							to LOS ANG	ELES	FSC	DA	TE 12/27/2	2018	тіме 19:47	
FINGERPRINTS?	Yes	CLOTHING	3	Yes				PARPT		No		MORTUARY			
MED. EV.	No	INVEST. P	ното #	41				SEAL TYPE				HOSP RPT		Yes	
PHYS. EV.	Yes	EVIDENCE	LOG	Yes				PROPERTY	?	No		HOSP CHART		Yes	
SUICIDE NOTE	No	GSR NO					·	RCPT. NO.	30	7822		PF NO.	101-	479-10	
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County of Los Angeles, Department of Coroner Investigator's Narrative



Case Number: 2018-09806 Decedent: BURROUS, CHRISTOPHER ROCKY

Information Sources:

Detective Kmbikyan #17731: Glendale Police Department, 818-548-3987

Wife,

Medical record: Glendale Adventist Medical Center, 1409 Wilson Terrace, Glendale, CA 91206, medical record

Investigation:

This death was reported to our office on 12/27/2018 at 1430 hours by hospital personnel. It was reported the decedent met with a male friend at a local motel for an apparent "tryst". The decedent was apparently engaged in anal intercourse with a bondage apparatus; a mask that contained amyl nitrate. A substance believed to be methamphetamine was simultaneously inserted in the decedent's rectum. 911 was called and the decedent was transported to the ER where he died.

The decedent was transported from the hospital to the Forensic Science Center by Forensic Attendants Sierra and Garcia on 12/27/2018 at 1947 hours.

I received this case for investigation on 12/27/2018.

Fingerprint return found no record.

Location:

Place of injury: Days Inn, 450 Pioneer Drive #608, Glendale, CA 91203

Place of death: Glendale Adventist Medical Center, 1409 Wilson Terrace, Glendale, CA 91206

Informant/Witness Statements:

Detective Kmbikyan gave me the following information: The investigation into this incident is ongoing and information is subject to change. The decedent checked in to this room in person and alone. He met his male companion through a dating site, Grindr, and set up this meeting; reportedly the decedent and this companion had met up four previous times. The companion arrived to the room at 1230 hours, knocked, and was let in to the room by the decedent who was described as being nude. His companion described the room as being set up with lighting, S&M toys, lubrication jelly, and a massage bench. The decedent and his companion reportedly engaged in various forms of sexual activities including anal sex and oral sex. The decedent then inserted a "rock" of crystal meth in his anus and stated it was supposed to make him "high and loose". The decedent then gave his companion a syringe full of GHB in a bottle of Gatorade. The decedent and his companion continued with their sexual activities and the decedent then inserted a second "rock" of crystal meth in his anus. The companion described inserting his hand into the decedent's anus, before the decedent decided to also put on a mask. The mask had two cloth filters on the side and a rubber portion that completely covered the nose and mouth. The decedent poured "poppers" on the cloth filters and placed the mask on his face. The decedent positioned himself face down into a pillow, while his companion continued to insert his hand into his anus. The companion said he checked with the decedent numerous times to make sure he was ok; each time the decedent stated he was until the last time when he only made a grunting noise. The companion turned the decedent over and noticed he had vomited into the mask. He searched the internet for an overdose hotline and called; he was advised to call 911. The companion performed CPR on the bed prior to paramedic arrival. Once paramedics arrived, the decedent was transported to the hospital. He died in the emergency room. The decedent's companion was cooperative with the police; he told them he was unaware the decedent was a news anchor. He reportedly met the decedent six months ago on Grindr. The decedent had

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



Case Number: 2018-09806 Decedent: BURROUS, CHRISTOPHER RÖCKY

consumed crystal meth in front of him during their past encounters, but had never used the mask before. He stated he did not smoke methamphetamine with the decedent.

gave me the following information: The decedent does not have a history of drug abuse or alcoholism. When told about some of his activities, she stated he possibly only used drugs recreationally. She was not suspicious of him being an addict nor did he exhibit behavior of being a habitual drug user. The decedent went to work today (12/27) and was supposed to go to a work meeting at noon. He told her he was going; once she realized he was missing she contacted his employer and was told by co-workers that he left the meeting, stating he was feeling ill. She thought it was odd that he would've skipped the meeting as it was important for his career. She last spoke to him at noon. When told briefly about the decedent's activities, she stated he used to "go to clubs" in his past, but stated he was not interested in that anymore. She said he did have a history of risk taking behavior. He lost a significant amount of weight in the last year and was not on any medication. There is no medical history.

The medical record had the following information: The decedent was admitted to the hospital at 1355 hours after being brought in by ambulance. He was brought in in full arrest and with CPR being performed. Ventilation was given through bag-valve-mask before he was intubated at 1359 hours. Despite administration of medication and continuous CPR, the decedent was pronounced dead in the ER; by Dr. Paranjpe at 1406 hours.

Scene Description:

No scene investigation by Coroner personnel. Hospital death.

Detective Kmbikyan gave me a CD with photos from the scene; the scene is described as follows: The room number is shown as 608. A plastic bin with a lid, handle, and presumably on wheels is seen in the room, along with a cooler, another compartmentalized cloth container/bag, and a bench with arm and leg rests and a face cradle cushion. The bench appeared to have shiny residue on the body portion. A speaker, compact DJ style lighting, multiple jars of lubrication jelly, electrical tape, a knit ski mask, and various sex toys were seen scattered around the room. Glass pipes with brown residue, bottles labeled "Amsterdam" described as poppers, a white plastic bottle described as containing GHB, a lighter, and a syringe were seen around the room. A pillow with brown residue was seen on the floor.

Evidence:

I collected a filtration mask and metallic sex toy that arrived to the Forensic Science Center with the decedent. Glendale Police Department collected drug paraphernalia from the scene.

Body Examination:

The body exam was performed at the Forensic Science Center. He is a male Caucasian adult with brown eyes, brown hair, and apparent natural teeth. There were coroner and hospital ID tags on his left foot and right wrist. There was an airway tube, an IV in his right arm, an IO catheter in his left lower leg, and a defibrillator pad on his back. There was a linear scar underneath his chin. There was a small round abrasion on his left forehead. There appeared to be clear residue dried on his torso and left upper leg and residue between his buttocks. Rigor mortis was 4. Lividity blanched with light pressure.

Identification:

The decedent was positively identified by visual comparison to his CalPhoto for California driver's license, C5387487, as Christopher Rocky Burrous, date of birth: 01/11/1975.



Date of Report

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

Case Number: 2018-09806

Decedent: BURROUS, CHRISTOPHER ROCKY

Next of Kin Notification:	•
I notified the decedent's wife,	in person, and she confirmed they are legally
Tissue Donation:	
Not addressed.	
Autopsy Notification:	•
Please call Detective Kmbikyan after autopsy contact information.	to discuss findings; see case notes for private
mend	All
MARLEEN NAVARRO	SUPERVISOR
12/28/2018	