

DEPARTMENT OF THE MEDICAL EXAMINER
CITY AND COUNTY OF HONOLULU

535 KALIHI ROAD • HONOLULU, HAWAII 96817
TELEPHONE: (808) 527-6777 • FAX: (808) 524-8797 • INTERNET: www.honolulu.gov

MUF HANNEMANN
MAYOR



September 6, 2005

KANTHI DE ALWIS, M.D.
CHIEF MEDICAL EXAMINER

WILLIAM W. GOODHUE, JR., M.D.
FIRST DEPUTY MEDICAL EXAMINER

GAYLE F. SUZUKI, M.D.
DEPUTY MEDICAL EXAMINER

Mr. Thomas W. Spindle
04439-000/B Unit R
FCI Fairton, P. O. Box 420
Fairton, New Jersey 08320

Dear Mr. Spindle:

This is in response to your letter dated August 29, 2005 regarding Case No. 139 handled by this Department on February 6, 1982.

We do not keep photos of latent prints. You need to inquire with the Honolulu Police Department for latent prints. Their mailing address is 801 South Beretania Street, Honolulu, Hawaii 96813.

If you would like a copy of the autopsy report, there is a \$5.00 fee payable to the Department of the Medical Examiner. Please provide us with the name of the decedent.

Dr. Richard Wong retired many years ago and has recently passed away.

With personal regards,

Sincerely,

Handwritten signature of Kanthi De Alwis in cursive script.

Kanthi De Alwis, M.D.
Chief Medical Examiner

KDA:ak

sent letter of appreciation back on 13 Sep. 05

DEPARTMENT OF THE MEDICAL EXAMINER

City and County of Honolulu
 1455 S. Beretania Street
 Honolulu, Hawaii 96814
 Telephone (808) 558-8035

INVESTIGATION OF DEATH

Date: 6 Feb 82 Case No. 139⁺

Name of Deceased: KUSUMOTO, Kerek Yuichi
 Address: 517 McAndrews St.
 Schofield Barracks
 Wahiawa, HI

Age: 14 Sex: Male Race: Japanese Marital Status: Single

Birthdate: 16 Sep 67 Birthplace: Tokyo, Japan Ht: 63 Wt: 100

Occupation: Student SSN: None

Next of Kin: LtCol Howard H. KUSUMOTO Relationship: Father

Address: Same as above Telephone: 624-4391

Pronounced dead by: Capt. Thomas E. MARTYAC Time 1718 hrs. Date: 6 Feb 82

Place of death: Schofield Barracks While at work: Yes ___ No ___
 prior

Place of injury: Unknown Time 1630 hrs. Date: 6 Feb 82

Notified by: Capt. Francis GRESS Time 2000 hrs. Date: 6 Feb 82

Arrival at scene: Time 2115 hrs. Date: 6 Feb 82

Identified by: LtCol Howard H. KUSUMOTO Time 2220 hrs. Date: 6 Feb 82

Relationship: Father

Address: Same as above

Witnessed by: Thomas STUART

Removal from scene: Time 2330 hrs. Date: 6 Feb 82

Attendants: Louis STAUNTON, Island Wide Mortuary Service

Arrival at C&C Morgue: Time 0020 hrs. Date: 7 Feb 82

Police Investigators: Special Agent James R. LEY, Schofield Base CID
 Officer William MENDEZ, Patrol, Honolulu Police Dept.
 Personal property taken: Yes ___ No

Thomas Stuart
 Thomas STUART

Medical Examiner's Investigator

Date of autopsy: 2/8/82 - 1015 hrs.
 Autopsied by: DA Young
 Cause of death: Deceased
 Mortuary released to: /

RECEIVED
 TDS, HI FO
 (INITIAL & DATE BELOW)
 mfb 30 FEB 82
 1015 hrs

DEPARTMENT OF THE MEDICAL EXAMINER
CITY AND COUNTY OF HONOLULU

1695 SOUTH BERETANIA STREET
HONOLULU, HAWAII 96814-6100 (808) 535-2655

SILEEN R. ANDERSON
M.D.

CHARLES E. GOOD, M.D.
CHIEF MEDICAL EXAMINER



February 8, 1982

Re: BEREK YUICHI KUSUNOTO
517 McAndrews Sargeet
Schofield Barracks, Hawaii
(Case No. 139)

A post-mortem examination was performed on February 8, 1982 at 10:25 a.m. on the body of the above received at the City and County Morgue following his death on February 6, 1982. The prodromal history revealed that the deceased was found at the bottom of a steep stairway, consisting of approximately 45 steps, leading down into an old concrete bunker at Schofield Barracks. The body was found on February 6, 1982.

The body was that of a well developed and well nourished fourteen year old Japanese male, measuring approximately sixty-one inches tall and weighing approximately one hundred pounds. The body was in an early state of post-mortem decomposition. There was minimal post-mortem lividity and moderate post-mortem rigidity present. The scalp was covered by a profuse growth of black hair, measuring approximately 11 centimeters in length. The pupils of both eyes were round, equal and dilated and measured approximately 4 millimeters in diameter. The dentition was permanent and in fair repair. There were no thoracic or abdominal scars. The penis was not circumcised. In the right forehead was an abrasion measuring approximately 1.5x1.5 centimeters in size. It was located approximately 3.5 centimeters superior to the midpoint of the right eyebrow. Over the left forehead was an abrasion measuring approximately 1.5x0.5 centimeters in size and was located approximately 2 centimeters superior to the left eyebrow. Over the bridge of the nose and extending cephalad and between the eyebrows was a longitudinal abrasion measuring approximately 4.6x0.6 centimeters in size. In the bridge of the nose was an oval-shaped abrasion measuring approximately 0.5 centimeter in diameter. Over the midpoint of the ridge of the nose was an abrasion measuring approximately 1 centimeter in diameter. Manipulation of the nasal bones revealed no evidence of any crepitation. There were scattered subconjunctival hemorrhages of the left optic orbit. There was reddish-brown contusion of the left upper and lower eyelids with slight swelling. Over the left malar area was a transverse abrasion measuring approximately 5x1 centimeters in size. There were multiple small abrasions over the left side of the face, the largest of which measured approximately 2x0.4 centimeters in size. In the midline of the upper lip was a transverse abrasion measuring approximately 1x0.3 centimeter in size. Lateral to the right corner of the mouth were three abrasions, the largest of which measured approximately 1.1 centimeters in diameter. At the tip of the chin were three abrasions, the largest of which measured approximately 0.8 centimeter in diameter. Over the right submandibular area was an abrasion measuring approximately

2.2x0.6 centimeters in size. In the left submandibular area was a small abrasion measuring approximately 0.3 centimeter in diameter. There was an oval-shaped abrasion over the left side of the neck, measuring approximately 0.5 centimeter in diameter. There was an oblique linear abrasion on the left side of the neck, measuring approximately 3.5x0.3 centimeters in size. There was a faint linear abrasion-contusion that extended from the left side of the neck across the antero-inferior aspect of the neck, onto the right upper anterior chest wall and terminated medial to the right axilla. The abrasion measured approximately 20x0.5 centimeters in size. There was a small area of skin excoriation over the previous abrasion-contusion at the antero-inferior aspect of the neck, measuring approximately 0.5 centimeter in diameter. Over the left sternoclavicular junction were two abrasions, the larger of which measured approximately 0.6 centimeter in diameter. In the left infraclavicular region was a transverse abrasion measuring approximately 3.2x0.3 centimeters in size. In the superior aspect of the left shoulder was a 1.0 centimeter abrasion. On the superolateral aspect of the left deltoid region were two abrasions, the larger measuring approximately 0.4 centimeter in diameter. In the left anterior chest wall adjacent to the midsternal line was a 0.4 centimeter abrasion. In the left anterior chest wall, 2.5 centimeters superior to the left nipple, was an oval-shaped abrasion-contusion, the overall diameter measuring approximately 3.5 centimeters in size. In the superomedial aspect of this area were two crescent-shaped abrasions, one measuring approximately 1.3x0.3 centimeters and the second measuring approximately 1.1x0.4 centimeters in size. In the inferolateral aspect of this area was a 1.5x0.4 centimeter abrasion. The configuration of this area of abrasion-contusion was oval shaped and had the appearance of a bite mark. Inferior and lateral to the left nipple was a small abrasion measuring approximately 0.4x0.2 centimeter in size. Medial to the left nipple was a small abrasion measuring approximately 0.2 centimeter in diameter. The abrasions were located within the areolar areas. In the left lateral chest wall were multiple small abrasions, the largest of which measured approximately 0.5 centimeter in size. Cephalad to the umbilicus was a longitudinal abrasion measuring approximately 2.6x1.2 centimeters in size. There were multiple small abrasions over the left lower abdominal wall, the largest of which measured approximately 0.5x0.2 centimeter in size. In the right anterolateral chest wall, caudal to the right nipple, was a horizontal area of contusion-abrasion, measuring approximately 5 centimeters in length. Over the right iliac crest was an abrasion measuring approximately 0.6 centimeter in diameter. In the right posterior chest wall was a large oval area of abrasion and contusion, measuring approximately 16.5x11 centimeters in size. In the lateral and superior aspects of the right shoulder were multiple small oval-shaped abrasions, the largest of which measured approximately 1.2x0.6 centimeters in size. There was an abrasion in the right anterior elbow, measuring approximately 0.5 centimeter. Over the posterior aspect of the left forearm was a longitudinal abrasion measuring approximately 3.5x0.5 centimeters in size. Over the lateral aspect of the left elbow was an abrasion measuring approximately 0.6 centimeter in size. There were contusions and abrasions on the lateral aspect of the distal third of the left upper arm, the largest of which measured approximately 3.5x0.3 centimeters. In the lateral aspect of the right chest wall along the posterior axillary line were multiple small abrasions, the largest measuring 0.5 centimeter in size. In the lateral aspect of the left iliac crest was a 3.2x2.8 centimeter abrasion. There was an abrasion on the lateral side of the upper third of the left thigh, measuring 1.8 centimeters in size. In the left occipital scalp was a transverse laceration measuring approximately 1.8 centimeters in length, was located approximately 8 centimeters cephalad and approximately

February 8, 1982

4 centimeters posterior to the left ear lobe. Over the foreskin of the penis, arranged along the circumference of the organ, were multiple abrasions, the largest of which measured approximately 0.5x0.2 centimeter in size and was located over the dorsum of the penis. There were multiple superficial abrasions over the right scrotal area, the largest of which measured 1.5x0.4 centimeters in size. There was a small leaf that was adherent to the head of the penis. The leaf was located between the head of the penis and the foreskin. In the anterior aspect of the lower third of the right thigh was a 1.6x0.6 centimeter abrasion. There was a superficial skin excoriation of the anterior aspect of the left knee, measuring 0.7 centimeter in size. There was a longitudinal abrasion measuring 1.1x0.1 centimeters in size over the left knee. Soles of both feet, including the heels, sides and toes, showed no evidence of any pathological changes.

There were multiple ecchymoses over the mucosal surfaces of the upper and lower lips. There was an ecchymosis on the mucosal surface of the left cheek, inside the left corner of the mouth. In the mucosal surface of the lower lip was a transverse superficial laceration measuring approximately 1 centimeter in length. In the midline of the upper lip were two excoriations of the mucosa, the larger of which measured approximately 0.4 centimeter in diameter.

The skin was of average thickness and was lined with a normal amount of subcutaneous adipose tissue. The musculature was fairly well developed.

The pleural cavities, pericardial sac and abdominal cavity contained normal amounts of clear serous fluid. There were no evidences of any adhesions in the body cavities. There was minimal focal hemorrhage in the right cricothyroid muscle. There were no evidences of any subcutaneous hemorrhage of the skin flap of the neck and chest or hemorrhage in the strap muscles bilaterally.

Both lungs were invested in thin, glistening, transparent pleurae. The surfaces of both lungs were purplish blue. The lungs were firm on palpation and pulmonary crepitation was moderately decreased. On section, the surfaces were purplish blue and a marked amount of serosanguineous fluid exuded through the cut surfaces. There was marked pulmonary congestion and edema. The left lung weighed approximately 500 grams. The right lung weighed approximately 540 grams. Examination of the larger air passages and pulmonary vessels revealed no pathological changes. There were scattered petechiae over the visceral pleurae of both lungs. There were petechiae present in the thymus and also in the posterior surface of the epicardium.

The heart lay free in the pericardial sac in a few cc of pericardial fluid. The heart was of normal size and weighed approximately 220 grams. Multiple, parallel, serial sections through the coronary arteries revealed no pathological changes. The foramen ovale was closed. No congenital cardiac abnormalities were noted.

Detailed gross examination of the abdominal viscera, including the liver, spleen, gall bladder, pancreas, adrenal glands, kidneys, ureters, prostate, bladder and the entire gastrointestinal tract from the esophagus down to and including the rectum, revealed no pathological changes. The appendix was present and showed no pathological changes. The anal orifice was dilated. There was no evidence of any injuries in the para-anal or intra-anal region.

The scalp reflected off the calvarium with ease. The calvarium opened with average resistance. Detailed gross examination of the scalp revealed slight localized subgaleal hemorrhage in the right and left frontal scalp, right and left temporalis muscles and left occipital scalp. Examination of the skull revealed no pathological changes. The parietal hemispheres were equal and symmetrical. The gyri and sulci patterns were not remarkable. There were no gross evidences of any subdural or extradural hematoma. Detailed gross examination of the cerebral hemispheres, cerebellar lobes, midbrain, pons, medulla, upper cervical cord, including multiple, parallel, serial sections through the brain, following a period of fixation, revealed no pathological changes. The fixed brain weighed approximately 1595 grams.

X-ray examination of the larynx failed to reveal any gross fracture. The hyoid bones are intact. Laryngeal structures are not ossified or calcified at this age. —

Blood was removed from the left side of the heart and forwarded to the laboratory for blood alcohol, blood barbiturate screening, blood carbon monoxide and blood type. Subsequent chemical analysis revealed a blood alcohol concentration of 0 mgm/dl, a weakly positive blood barbiturate screening, a blood type of "O" Rh positive and a negative blood carbon monoxide.

Sections of various organs were removed for microscopic examination. Subsequent microscopic examination revealed marked pulmonary congestion and edema; slight pulmonary anthracosis; pulmonary bronchial changes suggestive of asthma (thickened basement membranes, hypertrophy of small muscle, eosinophile and plasma cell infiltrate, lumen filled with mucus and desquamated epithelial cells); marked congestion and interstitial hemorrhage of thymus; cerebral congestion; early visceral post-mortem decomposition.

* Anal and oral swabs were submitted for spermatozoa. Subsequent microscopic examination revealed no spermatozoa seen in either the anal or oral swabs.

SUMMARY OF PRINCIPAL PATHOLOGICAL FINDINGS:

1. Multiple abrasions.
2. Subconjunctival hemorrhage - left optic orbit.
3. Contusion with swelling - left upper and lower eyelids.
4. Multiple abrasion-contusions.
5. Laceration - left occipital scalp.
6. Skin excoriation - left knee.
- * 7. Ecchymoses - mucosal surfaces of upper and lower lips, mucosal surface of left cheek.
8. Laceration, superficial - mucosal surface of lower lip.
9. Excoriation - mucosa of upper lip.
- * 10. Hemorrhage, minimal, focal - right cricothyroid muscle.
11. Pulmonary congestion and edema, marked.
12. Pulmonary anthracosis, slight.
13. Pulmonary bronchial changes suggestive of asthma.
- * 14. Pericardial hemorrhage - visceral pleurae of both lungs, thymus, posterior surface of epicardium.
15. Congestion, marked - thymus.

February 8, 1982

16. Abnormal hematopo, focal. ill'ed.
17. Post-mortem decomposition, early.

CAUSE OF DEATH: Asphyxia due to suffocation.

Richard Y. K. Wong, M.D.
RICHARD Y. K. WONG, M. D.
Deputy Medical Examiner

RYKW/act

Basic lab tests from the 1982 period lacked the more modern abilities to detect DNA in trace amounts. Therefore, the real killer's DNA could have been present at undetectable 1982 levels. An independent review of this report was conducted by the Summit County Ohio's medical examiner's office AND is in home files, too.