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AUTOPSY REPORT

No.

2020-08009

KIZZEE, DIJON DURAND

I performed an autopsy on the body of →

at _____ the DEPARTMENT OF MEDICAL EXAMINER-CORONER

Los Angeles, California

on SEPTEMBER 2, 2020 0800 HOURS

(Date)

(Time)

From the anatomic findings and pertinent history I ascribe the death to:

(A) **MULTIPLE GUNSHOT WOUNDS**

DUE TO OR AS A CONSEQUENCE OF

(B)

DUE TO OR AS A CONSEQUENCE OF

(C)

DUE TO OR AS A CONSEQUENCE OF

(D)

OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH

MANNER OF DEATH

HOMICIDE

HOW INJURY OCCURRED

BY LAW ENFORCEMENT

Anatomic Summary:

- I. 29-year-old male; 72 inches, 244 pounds.
- II. Gunshot wounds, sixteen, all indeterminate range of fire.
 - A. Rapidly life-threatening wounds:
 - 1. Gunshot wound #4, torso, right supraclavicular region.
 - a. Injury to right lung.
 - b. Right hemothorax, 250 cc.
 - 2. Gunshot wound #5, torso, left upper chest.
 - a. Injury to left lung, esophagus, and heart.
 - b. Left hemothorax, 400cc
 - 3. Gunshot wound #11, torso, lateral right chest.
 - a. Injury to left lung lower lobe, diaphragm, and liver.
 - b. Left hemothorax, 400cc
 - c. Intraabdominal blood, 100cc, clotted
 - 4. Gunshot wound #12, torso, mid upper back.
 - a. Injury to left hemidiaphragm and left kidney.
- III. Projectiles are recovered associated with gunshot wounds 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, and 16.

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- IV. Additional traumatic injuries:
- A. Abrasions, face.
 - B. Abrasions, shoulders.
 - C. Abrasions, left elbow, and forearm region,
 - D. Abrasions, abdomen and left inguinal region.
 - E. Abrasions, right knee.
 - F. Lateral left back laceration, possible gunshot versus blunt trauma.
- V. See separate toxicology report.

CIRCUMSTANCES:

Please see the Coroner Investigator's Report.

DESCRIPTION OF GUNSHOT WOUNDS:

Note: The numbering of the gunshot wounds is for the purpose of documentation only. It does not indicate the order in which the wounds occurred. Wound measurements and wound path directions within the body are always performed in the standard anatomic position and do not necessarily reflect the body position of the decedent at the time of injury.

I. GUNSHOT WOUND #1, HEAD, POSTERIOR RIGHT PARIETAL OCCIPITAL SCALP REGION, TANGENTIAL WOUND:

- A. Wound: The entrance wound is a 2-3/4 of an inch x 3/4 of an inch wound of the right parietal occipital scalp. There is a region of marginal abrasion at the superior aspect of the wound. The wound is located 1-3/4 inches from the top of the head, 1-1/2 inches to the right of the midline. There is no soot or stippling present. Examination of the margins of the wound reveals marginal skin tears with the skin tags oriented in a superior direction and the tears oriented inferiorly.
- B. Direction: The direction is downward.
- C. Course:

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1. Full thickness scalp and skin soft tissue injury of the right parietal occipital scalp.
2. No evidence of skull or brain penetration.

D. Projectile: There is no projectile recovered.

II. GUNSHOT WOUND #2, HEAD, LEFT CHIN, TANGENTIAL (GRAZE) WOUND:

A. Wound: Located on the left chin is a partial thickness 1-inch x $\frac{1}{4}$ of an inch tangential gunshot wound. The wound is 6- $\frac{3}{4}$ inches from the top of the head and 1- $\frac{1}{4}$ inches to the left of midline.

B. Direction: The direction is indeterminate

C. Course:

1. The gunshot wound involves the skin and underlying subcutaneous tissues only.
2. There is no associated penetration of the oral cavity or fracture of any facial bones.

D. Projectile: There is no projectile recovered.

III. GUNSHOT WOUND #3, TORSO, RIGHT SUPRACLAVICULAR REGION, PENETRATING WOUND:

A. Entrance wound: Located on the right supraclavicular skin is a $\frac{1}{4}$ of an inch skin perforation with a $\frac{3}{16}$ of an inch marginal abrasion in a 9-12-3 o'clock orientation. The wound is 9- $\frac{1}{4}$ inches from the top of the head and 3 inches to the left of midline. No soot or stippling is present.

B. Direction: The direction is front to back, right to left, and downward.

C. Course:

1. Skin and soft tissue.
 - a. No evidence of jugular or carotid injury.
2. Right clavicle fracture.

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3. Right 3rd rib fracture, anterior aspect.
4. Penetration of right chest soft tissues.

D. Exit wound: There is no exit wound.

E. Projectile: A deformed jacketed bullet is recovered from the right chest soft tissues at 0819 hours (top of head 18 inches; right of midline ½ inch).

IV. GUNSHOT WOUND #4, TORSO, RIGHT SUPRACLAVICULAR REGION, PENETRATING WOUND:

A. Entrance wound: The entrance wound is a 1-1/4-inch x ¾ inch atypical gunshot wound with a ¼ inch 12-9-6 o'clock marginal abrasion rim. The wound is located 9-3/4 inches from the top of the head and 3-1/2 inches to the right of midline. There is no soot or stippling present.

B. Direction: The direction is front to back, right to left, and downward.

C. Course:

1. Skin and soft tissues.
2. Right thoracic outlet soft tissue.
3. Right clavicle fracture.
4. Penetration of right lung upper lobe.

D. Exit wound: There is no exit wound.

E. Projectile: Jacket material is recovered from the right lung at 0902 hours.

V. GUNSHOT WOUND #5, TORSO, LEFT UPPER CHEST, PENETRATING WOUND:

A. Entrance wound: Located on the left upper chest is a 5/16 of an inch skin perforation with a 1/16 of an inch marginal abrasion. Adjacent (inferior) to the gunshot wound is a 1/4-inch x 3/16-inch abrasion. The wound is 13-1/2 inches from the top of the head and 4-1/4 inches to the left of midline. There is no soot or stippling present.

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B. Direction: The direction is front to back, left to right and downward.

C. Course:

1. Chest skin and soft tissue.
2. Left 5th intercostal space.
3. Perforation of left lung, upper lobe.
4. Perforation of heart (anterior septal left ventricle to interventricular septum to posterior right ventricle).
5. laceration of esophagus.

D. Exit wound: There is no exit wound.

E. Projectile: A deformed jacketed bullet is recovered from the left chest cavity at 0938 hours.

VI. GUNSHOT WOUND #6, LEFT SHOULDER REGION, PENETRATING WOUND:

A. Wound: Located on the left shoulder region is a 1-1/4-inch x 1/2 inch atypical skin perforation. There is a 1-1/4-inch superior marginal abrasion. The wound is 12-1/2 inches from the top of the head and 8-3/4 inches to the left of midline. There is no soot or stippling present.

B. Direction: The direction is slightly front to back, left to right, and downward.

C. Course:

1. Shoulder skin and soft tissue.
2. Torso soft tissue penetration.
 - a. No penetration of body cavities.

D. Exit wound: There is no exit wound.

E. Projectile: A flattened jacketed bullet is recovered from the lower left chest soft tissues at 0938 hours (top of the head 20 inches; left of midline 4-1/8 inches).

VII. GUNSHOT WOUND #7, TORSO, LEFT UPPER CHEST, PENETRATING WOUND:

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- A. Entrance: Located on the lateral left upper chest is a $\frac{1}{2}$ inch x $\frac{1}{4}$ of an inch skin perforation with a $\frac{1}{8}$ of an inch marginal abrasion in a 12-2 o'clock orientation. The wound is 14 inches from the top of the head and 6- $\frac{3}{4}$ inches to the left of midline. There is no soot or stippling present.
- B. Direction: The direction is slight front to back, left to right, and downward.
- C. Course:
1. Perforation of torso skin and penetration of chest soft tissues.
 - a. No penetration into body cavities.
- D. Exit: There is no exit wound.
- E. Projectile: A flattened jacketed bullet is recovered from the left chest soft tissues at 0833 hours (top of head 18- $\frac{1}{2}$ inches; left of midline 2- $\frac{1}{2}$ inches).

VIII. GUNSHOT WOUND #8, TORSO, RIGHT UPPER CHEST, PENETRATING WOUND:

- A. Entrance wound: Located on the right upper chest is a 1- $\frac{5}{16}$ -inch x $\frac{5}{8}$ of an inch oblong, atypical wound with a 1-inch x $\frac{3}{4}$ inch right sided marginal abrasion. The wound is 13- $\frac{1}{4}$ inches from the top of the head and 3- $\frac{1}{2}$ inches to the right of midline. There is no soot or stippling present.
- B. Direction: The direction is slightly front to back, right to left, and downward.
- C. Course:
1. Chest skin and underlying soft tissue injury only.
 - a. No penetration into the thoracic cavity.

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D. Exit: There is no exit wound.

E. Projectile: A gray metallic bullet is recovered from the right chest soft tissues at 0816 hours (top of head 18 inches; right of midline 3 inches).

IX. GUNSHOT WOUND #9, TORSO, RIGHT UPPER CHEST, PENETRATING WOUND:

A. Entrance wound: The entrance wound is a $\frac{1}{2}$ inch x $\frac{1}{4}$ inch skin perforation with a $\frac{3}{16}$ inch right sided marginal abrasion. The wound is 14 inches from the top of the head and 3 inches to the right of midline. There is no soot or stippling present.

B. Direction: The direction is slightly front to back, right to left, and downward.

C. Course:

1. Chest skin and soft tissue.

a. No penetration into the thoracic cavity.

D. Exit: There is no exit wound.

E. Projectile: Deformed jacket fragments are recovered from the right chest wall at 0814 hours (top of the head 16 inches; right of midline 2 inches).

X. GUNSHOT WOUND #10, TORSO, LATERAL LEFT CHEST, PENETRATING WOUND:

A. Entrance wound: Located on the lateral left chest is a $\frac{5}{16}$ of an inch x $\frac{3}{4}$ of an inch atypical skin perforation. The wound is 19 inches from the top of the head and $7\text{-}\frac{3}{4}$ inches to the left of midline. No soot or stippling is present.

B. Direction: The direction is slightly front to back, left to right, and downward.

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C. Course:

1. Torso skin and soft tissues.
2. Abdominal wall soft tissues.
3. No penetration into the thoracic or abdominal cavities.

D. Exit wound: There is no exit wound.

E. Projectile: A deformed jacketed bullet is recovered from the left abdominal wall soft tissues at 0923 hours (top of head 32-1/2 inches; left of midline 2-1/2 inches).

XI. GUNSHOT WOUND #11, TORSO, LATERAL LEFT CHEST, PENETRATING WOUND:

A. Entrance wound: Located on the lateral left chest is a 5/16 of an inch x 1/4 of an inch atypical skin perforation with a 1/8 of an inch marginal abrasion. The wound is 22 inches from the top of the head and 7-5/8 inches to the left of midline. No soot or stippling is present.

B. Direction: The direction is front to back, left to right, and downward.

C. Course:

1. Skin and soft tissue, left chest.
2. Fracture/perforation of lateral left 7th rib.
3. Perforation of left lung lower lobe.
4. Perforation of left hemidiaphragm.
5. Perforation of left liver lobe.
6. Penetration of abdominal soft tissues (omentum).

D. Exit wound: There is no exit wound.

E. Projectile: A deformed jacketed bullet is recovered from the omentum in the abdominal cavity at 0901 hours (top of head 28 inches; left of midline 1 inch).

XII. GUNSHOT WOUND #12, TORSO, MID BACK, PENETRATING WOUND:

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- A. Wound: Located on the mid upper back region is a $\frac{1}{4}$ of an inch skin perforation. A $\frac{1}{8}$ of an inch marginal abrasion in a 12-3 o'clock orientation is present. The wound is 15 inches from the top of the head and at the midline. No soot or stippling is present.
- B. Direction: The direction is back to front, right to left, and downward.
- C. Course:
1. Back skin and soft tissue.
 2. Fracture perforation of posterior left 9th rib.
 3. Perforation of left hemidiaphragm.
 4. Perforation of colon at the splenic flexure.
 5. Laceration of left kidney.
- D. Exit wound: There is no exit wound.
- E. Projectile: A deformed jacketed bullet is recovered from the left infrarenal soft tissues in the abdominal cavity at 0914 hours (top of head 26 inches; left of midline 3 inches).

XIII. GUNSHOT WOUND #13, LEFT UPPER EXTREMITY, LEFT FOREARM, PERFORATING WOUND:

- A. Entrance wound: A $\frac{1}{4}$ of an inch skin perforation is present on the distal left forearm. The wound has a $\frac{1}{16}$ -inch marginal abrasion. The wound is located 1- $\frac{1}{2}$ inches superior to the left wrist joint. No soot or stippling is present.
- B. Direction: The direction is back to front, left to right, and upward.
- C. Course:
1. Forearm skin and soft tissue.
 2. Fracture of the distal left radius and ulna.
 3. Anterior forearm soft tissue and skin.

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D. Exit wound: Located on the anterior forearm is a $\frac{3}{4}$ of an inch x $\frac{1}{2}$ inch atypical skin perforation. The wound is located 3 inches superior to the left wrist joint.

E. Projectile: There is no projectile recovered.

XIV. GUNSHOT WOUND #14, RIGHT UPPER EXTREMITY, RIGHT HAND, PERFORATING WOUND:

A. Entrance wound: Located on the dorsal (back) of right hand is a $\frac{5}{16}$ of an inch skin perforation of the right 1st metacarpophalangeal joint region. There is no associated soot or stippling.

B. Direction: The direction is back to front, right to left, and upward.

C. Course:

1. Right metacarpal bone perforation fracture.
2. Soft tissue of the first finger/thumb web soft tissues.
3. Perforation of right thumb with proximal phalanx fracture.
4. Right thumb soft tissue and skin.

D. Exit wound: Two regions of probable gunshot wound exit include a $1\frac{5}{6}$ -inch x $\frac{1}{4}$ inch atypical skin laceration of the webbing between the index finger and thumb with marginal lacerations. Additionally, the lateral aspect at the base of the right thumb has a 1-inch x $\frac{1}{4}$ of an inch atypical wound with marginal lacerations.

E. Projectile: There is no projectile recovered.

XV. GUNSHOT WOUND #15, LEFT UPPER EXTREMITY, LEFT THUMB, PERFORATING WOUND:

A. Entrance wound: Located on the dorsal lateral region of the left thumb is a $\frac{5}{8}$ of an inch x $\frac{1}{4}$ of an inch oblong skin perforation with a $\frac{1}{16}$ of an inch marginal abrasion. No soot or stippling is present.

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B. Direction: The direction is back to front and left to right.

C. Course:

1. Thumb skin and soft tissue injuries.

D. Exit wound: Located on the anterior base of the thumb is a $\frac{3}{4}$ of an inch slit like skin laceration.

E. Projectile: There is no projectile recovered.

XVI. GUNSHOT WOUND #16, LEFT HIP BUTTOCK REGION, PENETRATING WOUND:

A. Entrance wound: Located on the left hip/buttock region is a $\frac{3}{16}$ of an inch skin perforation with a $\frac{1}{16}$ -inch marginal abrasion. The wound is 38- $\frac{1}{2}$ inches from the top of the head and 9- $\frac{1}{2}$ inches to the left of midline, and 1- $\frac{3}{4}$ inches above the tabletop.

B. Direction: The direction is back to front, left to right, and upward.

C. Course:

1. Left hip and buttock skin and soft tissues.
2. Left ischium fracture.
3. Penetration of right hip region soft tissues.

D. Exit wound: There is no exit wound.

E. Projectile: A deformed jacketed bullet is recovered from the right hip soft tissues at 0942 hours (top of head 37 inches; right of midline 2 inches; 3- $\frac{1}{4}$ inches above tabletop).

ADDITIONAL TRAUMATIC INJURIES:

I. Facial abrasions:

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- A. 1-1/2-inch x 5/16-inch, mid forehead.
- B. 1-inch x 3/4 inch, above right eyebrow.
- C. 5/8-inch x 3/8-inch, nasal bridge region.

II. Abrasions of shoulders:

- A. 2-1/4-inch x 1-3/4-inch, top of right shoulder.
- B. 4-inch x 2-1/4-inch, top of left shoulder.
- C. Lateral left back laceration, 3-1/4 inches x 1-1/8-inch with avulsed skin tags at the medial side of wound.
 - 1. The characteristics of the laceration do not exclude either a blunt or gunshot wound as the cause of the injury.

III. Abrasions of left upper extremity:

- A. 1/2 inch x 1/4 inch, posterior left upper arm/elbow region.
- B. 2-inch x 1-inch, lateral left elbow-left forearm region.

IV. Abrasions of abdomen and left inguinal region.

- A. A 5-1/2-inch x 3-1/2-inch region of abrasion is seen to the left inguinal region.
- B. 1-1/4-inch x 1-inch, abdomen, superior and to right of umbilicus.

V. Abrasion, right knee, 1/4 inch x 3/16 inch.

VI. Abrasion of chest, 1-1/2-inch x 1/2 inch.

CLOTHING:

The following clothing items are present in the clothing cage room at exam: Two shoes, two socks, one pair of sweatpants, and one tank top.

EXTERNAL EXAMINATION:

The body is identified by toe tags and is that of an unembalmed, refrigerated adult Black male who appears about the reported age of 29 years. Per the Coroner Form 1 data, the body is approximately 72 inches and 244 pounds. The body habitus shows central obesity.

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Hydration and nutritional status appear grossly normal. Numerous tattoos are present on the head, torso and extremities, a representative description of which are included on Diagram #20 (1 of 3). Rigor is present. Lividity is not discernable.

The head appears normocephalic. Scalp hair consists of black braided hair. A beard and mustache are present. Examination of the eyes reveals brown irides. There is no evidence of scleral or conjunctival congestion, icterus or petechiae. Examination of the oral cavity reveals natural teeth and no evidence of trauma or lesions.

Areas of gunshot wound are seen to the extremities and torso, as previously described. Additionally, areas of abrasions to the head, extremities and torso have been previously described. There is an area of left upper shoulder skin slippage. Areas of scars on the body are identified on the lateral lower left abdomen, right knee shin region, right shin, left knee, and left shin. A diffuse region of skin hyperpigmentation is seen spanning the lateral hips to buttock, lower back, and inner thigh area. Examination of the genitalia, perianal, and anus reveal no trauma or lesions. The penis appears circumcised.

INITIAL INCISION:

The body cavities are entered through the standard coronal and Y-shaped incisions.

NECK:

The neck organs are removed en bloc with the tongue. No lesions are present nor is there trauma of the gingiva, lips, or oral mucosa. There is no edema of the larynx. Both the hyoid and larynx are intact without fractures. There is no hemorrhage present of the throat organs, investing fascia, or strap muscles. There is some soft tissue injury associated with gunshot wounds numbers 3 and 4 seen to the lateral left base of neck supraclavicular soft tissues. There are no prevertebral fascial hemorrhages. The tongue when sectioned shows no trauma. There are no fractures of the cervical vertebrae.

CHEST/ABDOMINAL CAVITY:

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The injuries as described in the description of gunshot wound sections are seen upon chest wall reflection. Additionally, a small 2.5 x 0.1 cm focal area of right chest wall fatty tissue hemorrhage is seen on the lateral right chest wall, unassociated with any areas of gunshot wound trauma. The abdominal fatpad is approximately 3 cm in thickness. The organs of the abdominal cavity have a normal arrangement, and none are absent. Following removal of the anterior ribcage there is noted to be 250 cc of blood in the right chest cavity and 400 cc of blood within the left chest cavity. There is 100 cc of clotted blood seen in the left side of the abdominal cavity.

DORSAL HAND DISSECTION:

A midline incision is made from the middle finger metacarpophalangeal region to the base of the wrist on the dorsum (back) of both hands. The skin is undermined and reflected to both sides. Examination of the knuckle regions of the right hand reveals a hemorrhage fracture site of the 1st metacarpal bone associated with a gunshot wound. No other areas of subcutaneous hemorrhage are seen on the knuckles of the right hand. Reflection of the skin on the left in a similar approach, with reflection of the skin reveals no discrete areas of hemorrhage on the metacarpophalangeal joints (knuckles) of the left hand. Representative photographs are taken.

SYSTEMIC AND ORGAN REVIEW

Note: The conditions appearing in the anatomic summary, description of gunshot wound sections and description of traumatic injury sections are not necessarily repeated in the systemic review. The systemic review is essentially a description of the decedent prior to sustaining injuries.

MUSCULOSKELETAL SYSTEM:

No obvious natural disease processes are seen on the examined musculoskeletal systems.

CARDIOVASCULAR SYSTEM:

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The aorta is elastic without significant arteriosclerosis. The great vessels enter and leave in a typical fashion. There are no areas of aortic or great vessel aneurysm or mural thrombosis.

The heart is 390 grams. There is biventricular hypertrophy. The right ventricle is 0.7 cm. The interventricular septum is 2.1 cm and the left ventricle is 1.7 cm. The chambers are normally developed and without mural thrombosis. The valves are thin, leafy, and competent. The open circumferences of the valves are: Tricuspid 11.5 cm, pulmonic 7.0 cm, mitral 11.0 cm, and aortic 7.1 cm. The myocardium is without fibrosis or ischemic change. No congenital septal defects are seen. The great vessels enter and leave in a normal fashion. The coronary ostia are patent and located slightly above the sinotubular junction and are relatively centrally located within their respective sinuses. There is a normal pattern of coronary artery distribution. Serial sectioning of the coronary arteries does not reveal any significant arteriosclerosis.

RESPIRATORY SYSTEM:

The right lung is 410 grams and the left lung is 350 grams. The tracheal mucosa shows a darkened dusky discoloration. The lung visceral pleura is smooth and intact. There is no evidence of parenchymal focal mass lesions. The pulmonary vasculature is without thromboembolism.

GASTROINTESTINAL SYSTEM:

The esophagus is intact throughout without focal mass lesions. The stomach is a tan mucosal surface without focal mass lesions. The gastric contents consist of 100 cc of tan homogeneous chyme. The small intestine and colon are without mucosal focal mass lesions, areas of stricture, or narrowing. The appendix is present. The pancreas occupies a normal position and has a soft pink-tan parenchyma. There is no evidence of pancreatic fibrosis or pancreatic mass lesions.

HEPATOBIILIARY SYSTEM:

The liver is 1610 grams. It has dark brown-tan coloration. The capsule is smooth and translucent. The parenchyma is unremarkable.

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No focal mass lesions are seen. The gallbladder is present. No gallstones are seen.

GENITOURINARY SYSTEM:

The right kidney is 140 grams. The left kidney is 120 grams. The kidneys are normally situated, and the capsule strips easily revealing surfaces without scarring or cortical granularity. The corticomedullary demarcation is preserved. The pyramids are not remarkable. The peri-pelvic fat is increased. The ureters are without dilation or obstruction and pursue their normal course. The urinary bladder has a white-tan trabecular surface without masses. There is an estimated 125cc of yellow urine within the bladder. Prostate and testes are unremarkable.

HEMOLYMPHATIC SYSTEM:

The spleen is 90 grams. The capsule is smooth. The parenchyma is dark red and soft. There are no splenic lesions identified. Lymph nodes throughout the body are small and inconspicuous. The bone marrow is not remarkable. The bone marrow of the rib and cranial vault are unremarkable.

ENDOCRINE SYSTEM:

The thyroid, parathyroid, adrenals and pituitary glands are unremarkable. The thymus is not identified.

HEAD, NECK AND CENTRAL NERVOUS SYSTEM:

There is subcutaneous scalp and periosteal hemorrhage associated with the right parietal-occipital gunshot wound. The external periosteum and dura mater are stripped showing no fracture of the calvarium or base of the skull. There are no tears of the dura mater. There is no intracranial hemorrhage.

The brain is 1330 grams. The leptomeninges are thin and transparent. A normal gyral pattern is observed. Coronal sectioning demonstrates a uniformity of cortical gray thickness. The cerebral hemispheres are symmetrical. There are no lesions or hemorrhage of the white matter. The basal ganglia are symmetric without lesions. Anatomic landmarks are preserved. Cerebral contusions are not present. The ventricular system is without

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dilation or lesions. The brainstem 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 is no evidence of aneurysm or significant arteriosclerosis.

HISTOLOGIC SECTIONS:

Representative sections from various organs are preserved in one storage jar in 10% formalin.

TOXICOLOGY:

Samples of chest blood, femoral blood, liver, urine, stomach contents and vitreous humor are submitted to the lab. A comprehensive screen will be conducted. An EDTA tube of chest blood is retained.

PHOTOGRAPHY:

Photographs have been taken prior to, and during the autopsy.

RADIOLOGY:

A postmortem CT and twenty x-rays are taken prior to autopsy.

EVIDENCE COLLECTION:

1. Projectiles, as previously described.
2. During clothing removal at pre-autopsy photography on September 1, 2020, Forensic Technician Tara White recovered evidence consisting of a white powder/residue.

WITNESSES:

1. Detective M. Boisvert, County of Los Angeles Sheriff's Dept.
2. Detective S. Matlock, County of Los Angeles Sheriff's Dept.
3. Investigator C. Yatman, Los Angeles District Attorney
4. Lt. B Dean, County of Los Angeles Sheriff's Dept.

FORMS/DIAGRAMS USED:

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One form #16, three diagrams #20, one Diagram #21, one diagram #22, and one diagram #23 were used during the performance of the autopsy. Coroner diagrams are not intended to be facsimiles nor are they necessarily drawn to scale.

OPINION:

The cause of death is due multiple gunshot wounds. The rapidly fatal injuries include trauma to the heart, lungs, liver, and left kidney.

Based on the correlation of the autopsy findings with the currently available case circumstances, and for the purposes of Public Health and Vital Statistics, the manner of death is homicide.



J. DANIEL AUGUSTINE, M.D.
DEPUTY MEDICAL EXAMINER

10/1/20
DATE

JDA:bbtt/sp
D:09/02/20
T:09/09/20

15

AUTOPSY CLASS: A B C Examination Only D

FAMILY OBJECTION TO AUTOPSY

Date: 9/2/20 Time: 0800 Dr. Augustine
(Print)

FINAL ON: 9/2/20 By: Augustine
(Print)

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

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KIZZEE DIJON DURAND
HONI 439

DEATH WAS CAUSED BY: (Enter only one cause per line for A, B, C, and D)

IMMEDIATE CAUSE:

(A) MULTIPLE GUNSHOT WOUNDS

DUE TO, OR AS A CONSEQUENCE OF:

(B)

DUE TO, OR AS A CONSEQUENCE OF:

(C)

DUE TO, OR AS A CONSEQUENCE OF:

(D)

OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH:

Age: 29 Gender: Male / Female

PRIOR EXAMINATION REVIEW BY DME

BODY TAG JA/AS CLOTHING
 X-RAY (No. 20/CT) FLUORO
 SPECIAL PROCESSING TAG MED. RECORDS
 AT SCENE PHOTOS (No. 49)

CASE CIRCUMSTANCES

EMBALMED
 DECOMPOSED
 >24 HRS IN HOSPITAL
 OTHER: _____ (Reason)

TYPING SPECIMEN

TYPING SPECIMEN TAKEN BY: As

SOURCE: edta chest

TOXICOLOGY SPECIMEN

COLLECTED BY: As

HEART BLOOD STOMACH CONTENTS
 FEMORAL BLOOD VITREOUS

TECHNIQUE: percent.
 chest BLOOD SPLEEN
 BLOOD KIDNEY
 BILE
 LIVER
 URINE

URINE GLUCOSE DIPSTICK RESULT: 4+ 3+ 2+ 1+ 0

TOX SPECIMEN RECONCILIATION BY: _____

HISTOLOGY

Regular (No. 2) Oversize (No. _____)
Histopath Cut: Autopsy Lab

TOXICOLOGY REQUESTS

FORM 3A: YES NO
 NO TOXICOLOGY REQUESTED
SCREEN C H T S D
 ALCOHOL ONLY
 CARBON MONOXIDE
 OTHER (Specify drug and tissue)
THC

REQUESTED MATERIAL ON PENDING CASES

POLICE REPORT MED HISTORY
 TOX FOR COD HISTOLOGY
 TOX FOR R/O INVESTIGATIONS
 MICROBIOLOGY EYE PATH. CONS.
 RADIOLOGY CONS.
 CONSULT ON: _____
 BRAIN SUBMITTED
 NEURO CONSULT DME TO CUT
 CRIMINALISTICS
 GSR SEXUAL ASSAULT OTHER

NATURAL SUICIDE HOMICIDE
 ACCIDENT COULD NOT BE DETERMINED

If other than natural causes,
HOW DID INJURY OCCUR? BY LAW ENFORCEMENT

WAS OPERATION PERFORMED FOR ANY CONDITION STATED ABOVE: YES NO

TYPE OF SURGERY: _____ DATE: _____

ORGAN PROCUREMENT TECHNICIAN: A. Scott
PREGNANCY IN LAST YEAR YES NO UNK NOT APPLICABLE

WITNESS TO AUTOPSY EVIDENCE RECOVERED AT AUTOPSY
Item Description: projectiles

- 1. Detective M. Boisvert, LASD
- 2. Detective S. Mullock, LASD
- 3. DA Investigator C. Yattman
- 4. Lt. B. Dean, LASD

Form #1 only at exam.

RESIDENT

DME

16

(1/1)

2020-08009

KIZZEE DIJON DURAND

HOMI

439

none within normal limits

EXTERNAL EXAM

- Sex
- Race
- Age
- Height
- Weight
- Hair
- Eyes
- Sclera
- Teeth
- Mouth
- Tongue
- Nose
- Chest
- Breasts
- Abdomen
- Scar
- Genitals
- Edema
- Skin
- Decubitus

see #1 & Diagrams

HEART Wt. 390

- T 11.5 Pericardium
- P 7.0 Hypertrophy
- H 11.0 Dilation
- A 7.1 Muscle
- Valves
- Coronaries ~~SCAD~~

- RV 0.7
- Septum 2.1
- LV 1.7
- Septum

AORTA

VESSELS

LUNGS Wt.

- R 410
- L 350

- Adhesions
- Fluid
- Atelectasis
- Oedema
- Congestion
- Consolidation
- Bronchi
- Nodes

R HTX 250cc
L HTX 400cc

PHARYNX

TRACHEA

THYROID

THYMUS

LARYNX

HYOID

ABDOMINAL WALL FAT 3cm

PERITONEUM

- Fluid 100 cc blood, clot
- Adhesions

LIVER Wt. 1610

- Capsule ^{dark} _{granular}
- Lobules
- Fibros
- G B ~~+~~
- Calculus
- Bile ducts

SPLEEN Wt. 90

- Color
- Consistency
- Capsule
- Malpignment

PANCREAS

ADRENALS

KIDNEYS Wt.

- R 140
- L 120
- Capsule
- Cortex
- Vessels
- Pelvis
- Ureters

BLADDER 125cc yellow urine

GENITALIA

- Prostate ^{normal}
- Testes
- Uterus
- Tubes
- Ovaries

OESOPHAGUS

STOMACH

- Contents 100cc tan ^{orange} me

DUOD. & SM. INT. ^{none}

APPENDIX ~~+~~

LARGE INT. ^{none}

ABDOM. NODES

SKELETON

- Spine
- Marrow
- Rib Cage
- Long bones
- Pelvis
- 2.5 x 1.0cm focal
- R chest Fat
- neurolysis

SCALP

CALVARIUM No Fractures

BRAIN Wt. 1330

- Dura
- Fluid
- Ventricles
- Vessels
- Middle ears
- Other

PITUITARY

normal

SPINAL CORD

not dissected

TOXICOLOGY SPECIMENS

See #15

SECTIONS FOR HISTOPATHOLOGY

Stomach & 2

MICROBIOLOGY ~~+~~

DIAGRAMS ²

X-RAYS ²⁰

OTHER PROCEDURES

GROSS IMPRESSIONS

GSWs; see #12

Date

9/2/20

Time

0800

Deputy Medical Examiner

[Signature]

20
(13)

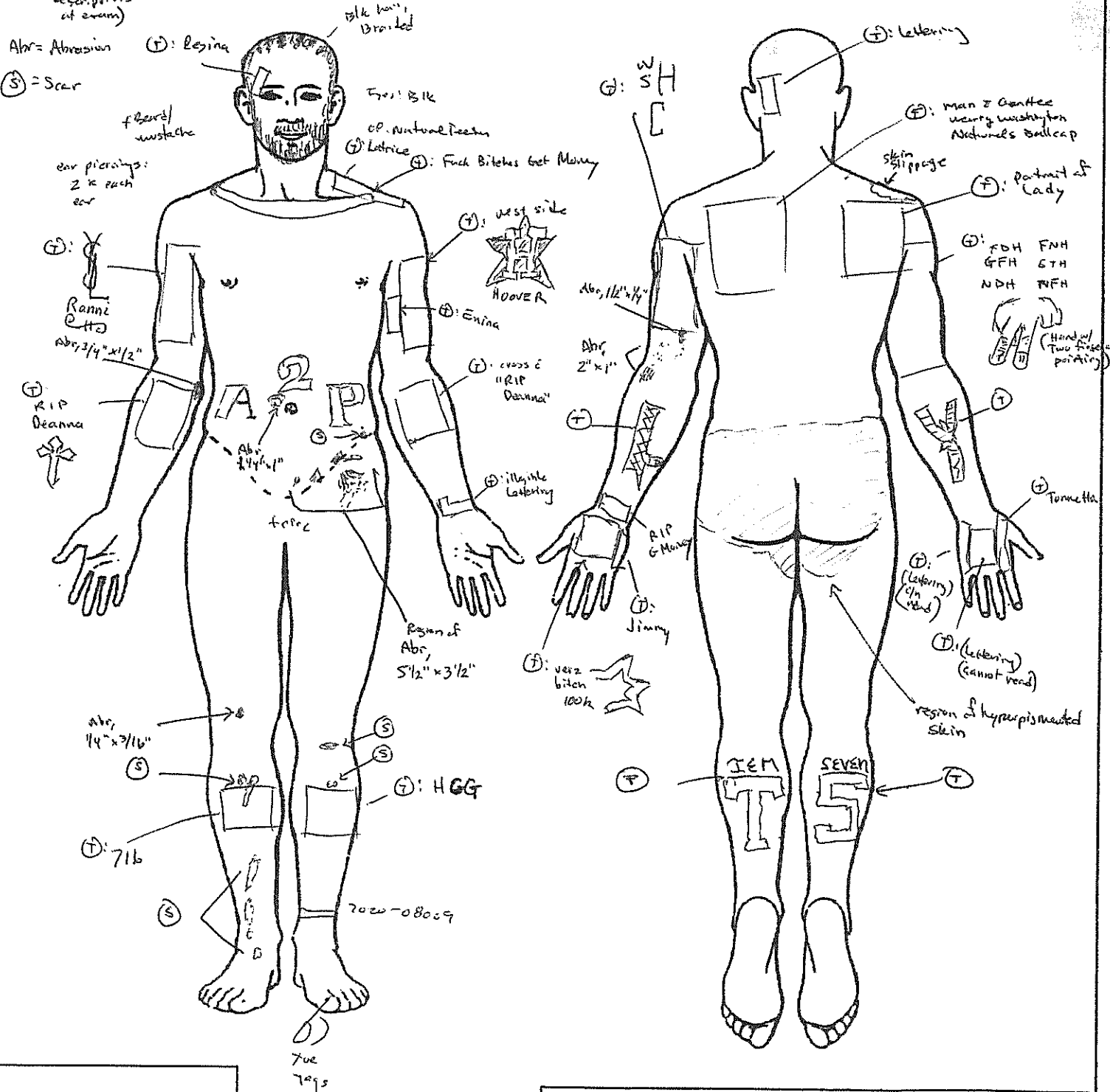
2020-08009
KIZZEE DIJON DURAND
HOMI 439

Adult Black ♂

(T) = Tattoo
(Representative Descriptions at exam)

Abr = Abrasion

(S) = Scar



Right Thumbprint

Date 9/1/20

[Signature] M.D.
Deputy Medical Examiner

20

(2/3)

2020-08009

KIZZEE DIJON DURAND

HOMI

439

Gsw#5

7/16", 1/16" M.A.
Adjacent (Anter) abrasion, 1/4" x 7/16"
Scot Stippling
Tot: 1 3/2 com: 4 1/4"

Dir: L → R, F → B, Downward

course:

- 1. chest skin/s.T. #, heart (Septal W/iv/pstaur rv)
- 2. L Stn ics
- 3. Left Lung, upper lobe

Projectile: A deformed jacketed bullet is recovered from the Left chest cavity at 0938hrs

Gsw#6

1/4" x 1/2" 1-1/4" supra (typical) M.A.
Scot Stippling
Abr, 1/4" x 7/16" Tot: 1 1/2 com: 8-7/4"

Dir: L → R, Down F → B (slight)

course:

- 1) shoulder skin/s.T.
- 2) torso s.T. only (no penetration in body cavity)

Projectile: A flattened jacketed bullet is recovered from the lower 2 chest soft tissues at 0938hrs (Tot 20, com 4 1/2)

Exit: none

Gsw#3 (Entry)

1/4", 3/16" M.A. (12-3)
Scot Stippling

Tot: 9/4
com: 3

Dir:

R → L
F → B
Down

course:

- 1. Skin/s.T.
- 2. no elo jugular/crotid injury
- 3. R clavicle Fr
- 3. R 3rd rib Fr, anterior aspect.
- 4. R chest s.T.

Projectile: a deformed jacketed bullet is recovered from the R chest s.T. at 819hrs (Tot 18, com 1/2)

Exit: none

Gsw#4

1/4" x 3/4" 1/4" 12-9-6 (atypical) M.A.
Scot Stippling

Tot: 9 3/4
com: 3 1/2"

Dir: R → L

Downward
F → B

course:

- 1. Skin/s.T.
- 2. Torso outlet s.T. 3. clavicle Fr
- 4. R lung, upper lobe

Projectile: jacket nuclear recovered from R lung @ 0928hrs.

Exit: none

Gsw#7

1/2" x 1/4" 1/8" M.A. (12-2')

Scot Stippling
Tot: 14 com: 6-3/4"

Dir: L → R, Downward, slight F → B

course:

- 1. Torso skin/s.T. (no penetration into body cavities)

Projectile:

A flattened jacketed bullet is recovered from the left

chest soft tissues at 0833hrs (Tot 12, com 2 1/2)

Exit: none

Date 9/1 - 9/2 /20

[Signature]

M.D.

Deputy Medical Examiner

Right Thumbprint

20

13/3

2020-08009

KIZZEE DIJON DURAND

HOMI

439

Abr = Abrasion

Gsw #10

5/16" x 3/4" (at prim)
Scout Est: p/ly
Tot: 19 Lom: 7 3/4"

Dir: L → R, Downward
F → B (slight)

Course:

- 1. Back skin/sit.
- 2. Abd. wall sit.

Exit: none

Projectile:

A deformed jacketed bullet is recovered from the abdominal wall soft tissues at 0923 hrs (Tot 32 1/2; Lom 2 1/2)

Laceration

3 1/4" x 1 1/8" with avulsed skin tags @ medial side

Abr, 4" x 2 1/4"

Abr, 2 5/4" x 1 3/4"

L
Abr, 1 1/2" x 1 1/2"

Gsw #8

1-5/16" x 5/8" 1" x 1/4" es. sid. mid.
Scout Est: p/ly
Tot: 13 1/4; Rom: 3 1/2

Dir: R → L, Down
Slight F → B

Course:

- 1. Chest skin/soft tissues only (no penetration into thoracic cavity)

Projectile: A metallic bullet is recovered from R chest sit. at 816 hrs (Tot 18; Rom 3)

Exit: none

Gsw #9

1 1/2" x 1/4" 3/16" R-sided
Scout Est: p/ly, M.A.
Tot: 14 Rom: 3

Dir: R → L, Downward
Slight F → B

Course:

- 1. Chest skin/sit. (no penetration into thoracic cavity)

Projectile:

Deformed jacket fragments recovered from R chest wall at 814 hrs (Tot 16 Rom 2)

Exit: none

Gsw #11

5/16" x 1/4" 1/8" M.A. (at prim)
Scout Est: p/ly
Tot: 22 Lom: 7-9/8"

Dir: L → R, F → B
Downward

Course:

- 1. Skin, sit.
- 2. Lateral L 7th rib tx
- 3. Left lung, lower lobe
- 4. Diaphragm
- 5. Liver, Left lobe
- 6. Abdominal soft tissues (omentum)

Projectile:

A deformed jacketed bullet is recovered from the omentum at 090 hrs (Tot 28; Lom 1)

Exit: none

Gsw #13

1/4" 1/16" M.A.
Tot: 1-1/2"
Scout Est: p/ly

Dir: B → F
L → R
upward

Course:

- 1. Forearm skin/sit.
- 2. Fracture, Distal L radius/ulna
- 3. Forearm sit/skin

Projectile: none

Gsw #12

1/4" 1/8" (12-3) M.A.
Tot: 15"; midline

Dir: B → F
R → L Down

Course:

- 1. Back skin/sit.
- 2. Posterior L 9th rib tx
- 3. L hemidiaphragm
- 4. Colon, splenic flexure
- 5. L kidney laceration

Exit: none

Projectile:

A deformed jacketed bullet is recovered from the infra-renal soft tissues in the abdominal cavity at 0914 hrs (Tot 26, Lom 3)

Right Thumbprint

Date 9/1 - 9/2/20

[Signature]

M.D.

Deputy Medical Examiner

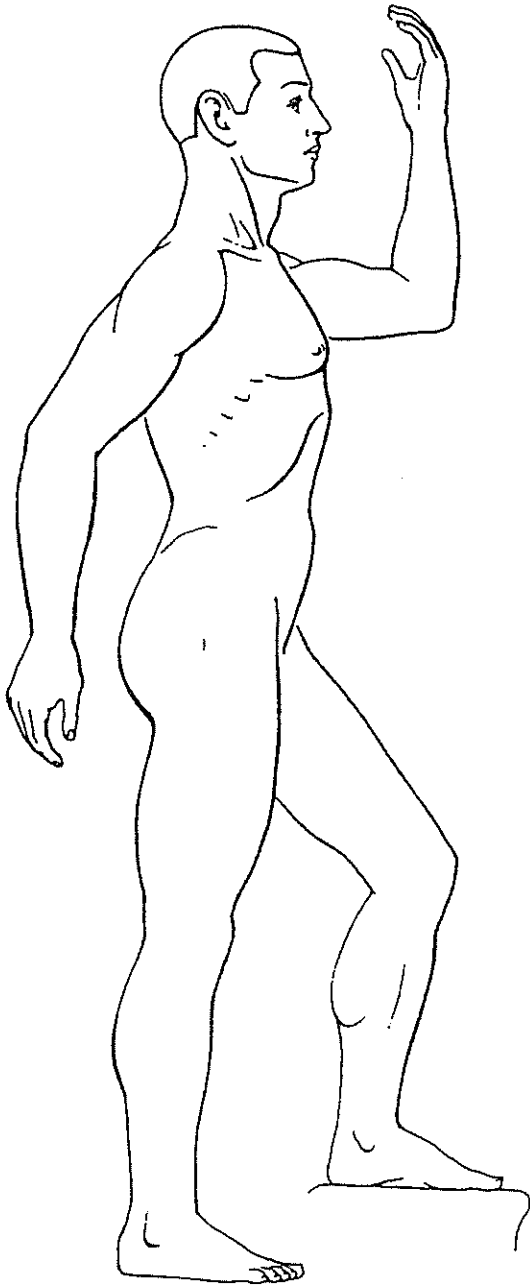
21

(1/1)

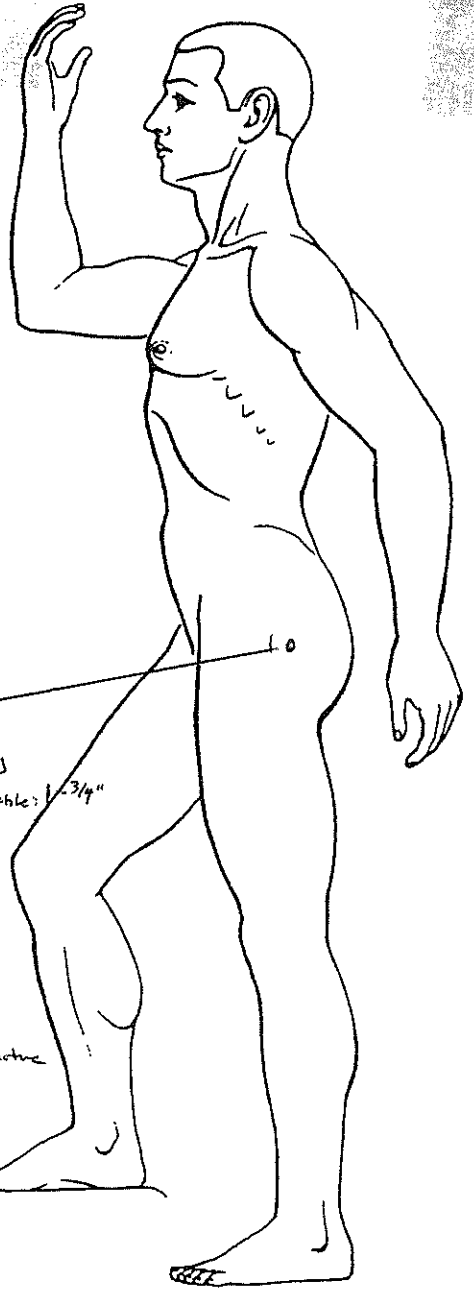
2020-08009

KIZZEE DIJON DURAND
HOMI

439



Rt



Lt

GSW # 16

3/16" 1/16" M.A.

⊙ spot ⊙ slipping

tot: 28 1/2" w table: 1-3/4"

Len: 4 1/2"

Dir L → R
D → F
upward

course?

- 1) E. Napl. Buttock skin, ST.
- 2) L. ischium fracture
- 3) R. hip region soft tissues

projectile:

4 Deformed jacketed bullet is recovered from the

⊙ hip soft tissues

at 0942 hrs (Tot 37; Rom 2)
w table 3/4

9/1 - 9/2/20

Deputy Medical Examiner

M.D.

22

(1/1)

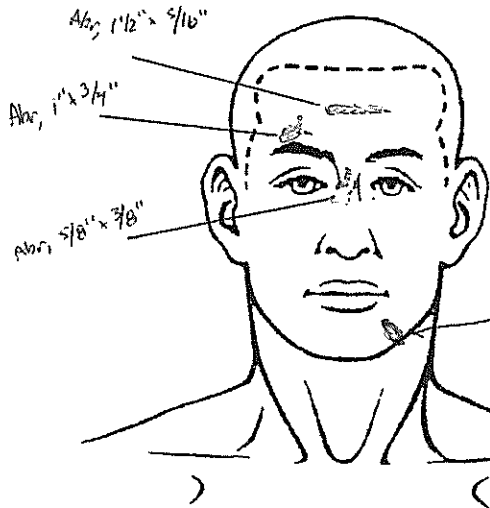
2020-08009

KIZZEE DIJON DURAND

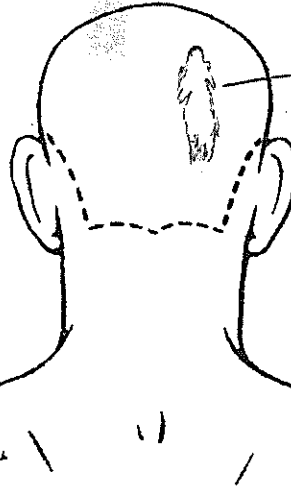
HOMI

439

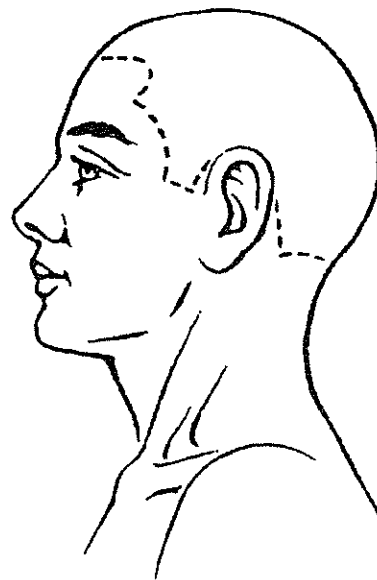
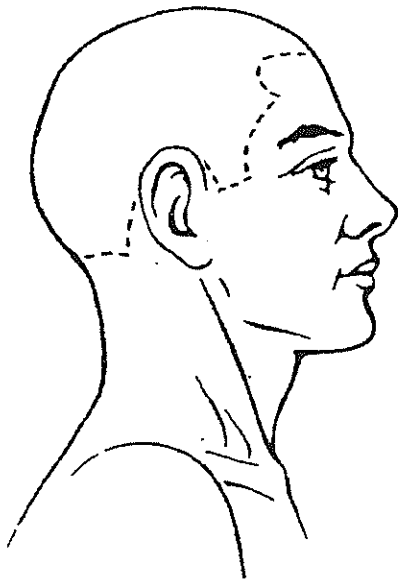
Abr = Abrasion



#2
line (Tangential)
1" x 1/4" @ Scot
@ Stippling
Ret: 6 3/4" Rom: 1-1/4"
Dir: in definite
curve:
1) skin, subcutaneous tissues
only.
projectile: none



line #1 (Tangential)
2 3/4" x 3/4" @ Scot
superior M.A. @ Stippling
Ret: 1-3/4" Rom: 1 1/2"
Dir: Downward
curve
1) scalp skin (S.T. injury
only
- No skull penetration
projectile: none



Date 9/1/20


Deputy Medical Examiner

M.D.

23

(1)(1)

2020-08009

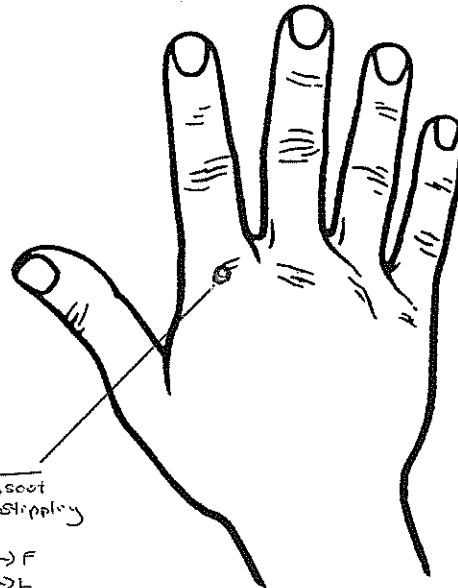
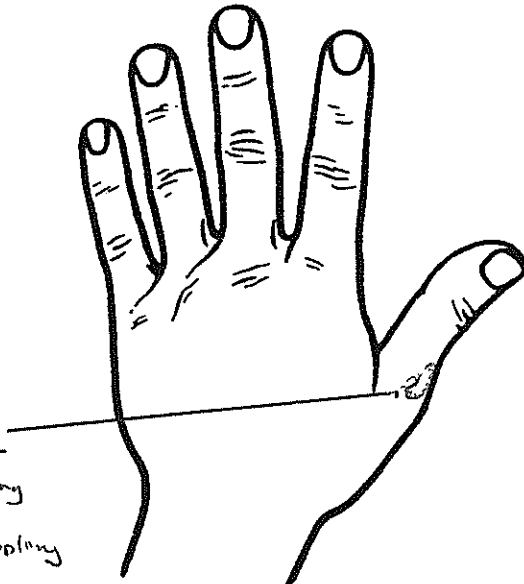
KIZZEE DIJON DURAND

HOMI

439

Left

Right



CSW# 15

5/8" x 1/4" oblong

1/16" r.a.

CSoot CSY ppling

Dir:

Back -> Front

L -> R

CSW# 14

5/16" CSoot

CSY ppling

Dir: B -> F

R -> L

Upward

course:

1. Thumb skin/s.T.

projectile: none

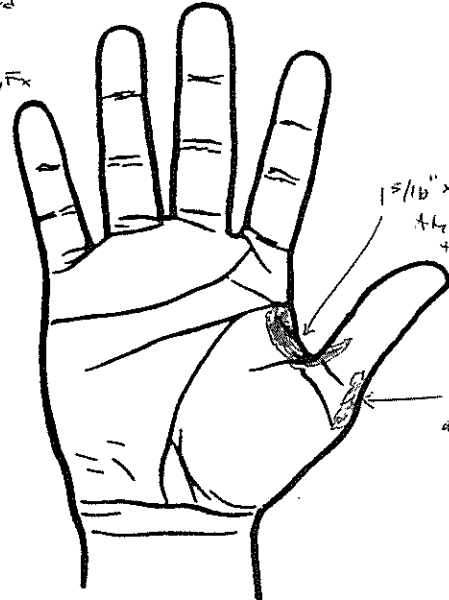
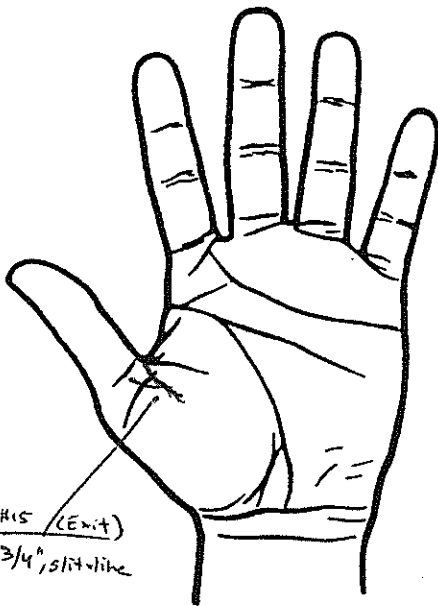
course:

1) R intercapital, Fx

2) ST. 1st/2nd thumb web

3) R thumb proximal, Fx

4) R thumb S.T./skin



CSW# 15 (Exit)

3/4" slit-like

1 5/16" x 1/4" Atypical + marginal tears

1" x 1/4" atypical, + marginal lacunations

9/1 - 9/2/20

Deputy Medical Examiner

M.D.



Department of Medical Examiner-Coroner, County of Los Angeles

FORENSIC SCIENCE LABORATORIES

1104 North Mission Road, Los Angeles, CA 90033

Laboratory Analysis Summary Report



Augustine, Job M.D.

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

PendingTox

Coroner Case Number: 2020-08009 **Decedent:** KIZZEE, DIJON DURAND

SPECIMEN SERVICE DRUG RESULT ANALYST

Alcohol Quantitation/Confirmation

Blood, Chest

Alcohol-GC/FID-HS Ethanol 0.026 g% E. Fu

Blood, Femoral

Alcohol-GC/FID-HS Ethanol Negative E. Fu

Vitreous

Alcohol-GC/FID-HS Ethanol Negative E. Fu

Drug Screen

Blood, Chest

ELISA-Immunoassay	Benzodiazepines	ND	P. PfylCruz
ELISA-Immunoassay	Cocaine and Metabolites	PP	P. PfylCruz
ELISA-Immunoassay	Fentanyl	ND	P. PfylCruz
ELISA-Immunoassay	Marijuana: 11-nor-Delta-9-Carboxy-THC	PP	P. PfylCruz
ELISA-Immunoassay	Methamphetamine & MDMA	PP	P. PfylCruz
ELISA-Immunoassay	Opiates: Codeine & Morphine	PP	P. PfylCruz
ELISA-Immunoassay	Opiates: Hydrocodone & Hydromorphone	PP	P. PfylCruz
ELISA-Immunoassay	Phencyclidine	PP	P. PfylCruz

Drug Screen/Confirmation

Blood, Chest

Bases-GC/NPD &/or MS	Basic Drugs	ND	A. Chavez
Cannabinoids-LC/MS/MS	11-nor-Delta-9-Carboxy-THC, Free	Present	C. Castellino
Cannabinoids-LC/MS/MS	Delta 9-Tetrahydrocannabinol (THC), Free	146 ng/mL	C. Castellino
Cocaine-GC/MS	Benzoylcegonine	0.03 ug/mL	I. Lee
Cocaine-GC/MS	Cocaethylene	ND	I. Lee
Cocaine-GC/MS	Cocaine	ND	I. Lee
Opiates-GC/MS	Codeine, Free & Total	ND	E. Fu
Opiates-GC/MS	Hydrocodone, Free & Total	ND	E. Fu
Opiates-GC/MS	Hydromorphone, Free & Total	ND	E. Fu

Coroner Case Number: 2020-08009 **Decedent:** KIZZEE, DIJON DURAND

<u>SPECIMEN</u>	<u>SERVICE</u>	<u>DRUG</u>	<u>RESULT</u>	<u>ANALYST</u>
	Opiates-GC/MS	Morphine, Free & Total	ND	E. Fu
	Opiates-GC/MS	Oxycodone, Free & Total	ND	E. Fu
	Opiates-GC/MS	Oxymorphone, Free & Total	ND	E. Fu
	Phencyclidine-GC/MS	Phencyclidine	404 ng/mL	P. PfylCruz
	Sympath. Amines-GC/MS	Amphetamine	ND	D. Van Cleve
	Sympath. Amines-GC/MS	Ephedrine	ND	D. Van Cleve
	Sympath. Amines-GC/MS	Methamphetamine	ND	D. Van Cleve
	Sympath. Amines-GC/MS	Methylenedioxyamphetamine (MDA)	ND	D. Van Cleve
	Sympath. Amines-GC/MS	Methylenedioxymethamphetamine (MDMA)	ND	D. Van Cleve
	Sympath. Amines-GC/MS	Pseudoephedrine	ND	D. Van Cleve
Blood, Femoral				
	Cannabinoids-LC/MS/MS	11-nor-Delta-9-Carboxy-THC, Free	Present	C. Castellino
	Cannabinoids-LC/MS/MS	Delta 9-Tetrahydrocannabinol (THC), Free	20 ng/mL	C. Castellino
	Cocaine-GC/MS	Benzoylcegonine	0.04 ug/mL	I. Lee
	Cocaine-GC/MS	Cocaethylene	ND	I. Lee
	Cocaine-GC/MS	Cocaine	ND	I. Lee
	Phencyclidine-GC/MS	Phencyclidine	407 ng/mL	P. PfylCruz
Urine				
	Opiates-GC/MS	6-Monoacetylmorphine	ND	E. Fu
	Opiates-GC/MS	Codeine, Free	ND	E. Fu
	Opiates-GC/MS	Hydrocodone, Free	0.08 ug/mL	E. Fu
	Opiates-GC/MS	Hydromorphone, Free	ND	E. Fu
	Opiates-GC/MS	Morphine, Free	ND	E. Fu
	Opiates-GC/MS	Oxycodone, Free	ND	E. Fu
	Opiates-GC/MS	Oxymorphone, Free	ND	E. Fu
	Sympath. Amines-GC/MS	Amphetamine	0.02 ug/mL	D. Van Cleve
	Sympath. Amines-GC/MS	Ephedrine	ND	D. Van Cleve
	Sympath. Amines-GC/MS	Methamphetamine	0.06 ug/mL	D. Van Cleve
	Sympath. Amines-GC/MS	Methylenedioxyamphetamine (MDA)	ND	D. Van Cleve
	Sympath. Amines-GC/MS	Methylenedioxymethamphetamine (MDMA)	ND	D. Van Cleve
	Sympath. Amines-GC/MS	Pseudoephedrine	ND	D. Van Cleve
Vitreous				
	Opiates-GC/MS	6-Monoacetylmorphine	ND	E. Fu
	Opiates-GC/MS	Codeine, Free	ND	E. Fu
	Opiates-GC/MS	Hydrocodone, Free	ND	E. Fu

Coroner Case Number: 2020-08009 Decedent: KIZZEE, DIJON DURAND

<u>SPECIMEN</u>	<u>SERVICE</u>	<u>DRUG</u>	<u>RESULT</u>	<u>ANALYST</u>
	Opiates-GC/MS	Hydromorphone, Free	ND	E. Fu
	Opiates-GC/MS	Morphine, Free	ND	E. Fu
	Opiates-GC/MS	Oxycodone, Free	ND	E. Fu
	Opiates-GC/MS	Oxymorphone, Free	ND	E. Fu

Legend:

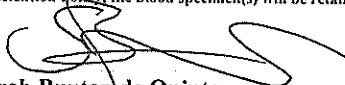
g	Grams	ND	Not Detected	SNS	Specimen Not Suitable
g%	Gram Percent	ng/g	Nanograms per Gram	TNP	Test Not Performed
Inc.	Inconclusive	ng/mL	Nanograms per Milliliter	ug	Micrograms
mg	Milligrams	PP	Presumptive Positive	ug/g	Micrograms per Gram
		QNS	Quantity Not Sufficient	ug/mL	Micrograms per Milliliter

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 - Coroner.

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.

Per the Department's Evidence Retention Policy, the blood specimen(s) will be retained for one year (minimum) and all other specimens six months (minimum) from Postmortem Exam.

Final Review By:


Sarah Buxton de Quintana
 Supervising Criminalist I

Date:

10/1/20

The above results relate only to the items sampled and tested and 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.

1	APPARENT MODE HOMICIDE	CASE NO 2020-08009
	SPECIAL CIRCUMSTANCES Gunshot Wound, Law Enforcement Related, Media Interest, Officer Involved	CRYPT 439

LAST, FIRST MIDDLE KIZZEE, DIJON DURAND	AKA	#
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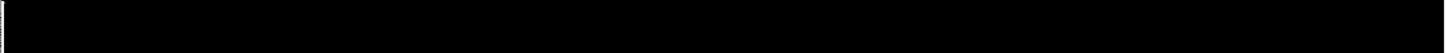
ADDRESS UNK	CITY	STATE	ZIP
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SEX	RACE APPEARS	DOB	AGE	HGT	WGT	EYES	HAIR	TEETH	FACIAL HAIR BEARD AND MUSTACHE	ID VIEW	CONDITION
MALE	BLACK	2/5/1991	29	72 in.	244 lbs	BROWN	BLACK	ALL NATURAL TEETH		Yes	FAIR

MARK TYPE	MARK LOCATION	MARK DESCRIPTION
TATTOO	BACK	FACES
TATTOO	LEFT CALF	LARGE CHARACTERS
TATTOO	RIGHT CALF	LARGE CHARACTERS



ID METHOD FINGERPRINTS



IDENTIFIED BY NAME (PRINT)	RELATIONSHIP	PHONE	DATE	TIME
LACRIS, DOJ, FBI			9/1/2020	01:08

PLACE OF DEATH / PLACE FOUND	ADDRESS OR LOCATION	CITY	ZIP
STREET	1221 W. 109TH PL.	LOS ANGELES	90044

PLACE OF INJURY	AT WORK	DATE	TIME	LOCATION OR ADDRESS	ZIP
STREET	No	8/31/2020	15:14	1221 W. 109TH PL. . LOS ANGELES, CA	90044

DDO	TIME	FOUND OR PRONOUNCED BY
8/31/2020	15:27	ENG14, JEFFERYS #603095

OTHER AGENCY INV. OFFICER	PHONE	REPORT NO	NOTIFIED BY	NO
LASD HOMICIDE - MATLOCK & BOISVERT	(323) 890-5500	020-07618-0375-013		

TRANSPORTED BY	TO	DATE	TIME
JOHN GREEN	LOS ANGELES FSC	9/1/2020	00:25

FINGERPRINTS?	Yes	CLOTHING	Yes	PARPT	No	MORTUARY	
MED EV	No	INVEST. PHOTO #	49	SEAL TYPE	NOT SEALED	HOSP RPT	No
PHYS EV	Yes	EVIDENCE LOG	Yes	PROPERTY?	Yes	HOSP CHART	No
SUICIDE NOTE	No	GSR NO		RCPT NO	314547	PF NO	

SYNOPSIS
 ACCORDING TO THE REPORTED INFORMATION, ON MONDAY 8/31/2020, THE DECEDENT WAS RIDING A BICYCLE AND CARRYING A BUNDLE OF ITEMS. 2 LASD DEPUTIES AT APPROXIMATELY 1514 HOURS ATTEMPTED TO STOP THE DECEDENT FOR A VIOLATION. THE TWO DEPUTIES WHO WERE ON FOOT MOMENTARILY LOST SIGHT OF THE DECEDENT. THEY FOUND HIM A FEW MOMENTS LATER BETWEEN SOME VEHICLES. THE DECEDENT ALLEGEDLY PUNCHED ONE OF THE DEPUTIES IN THE FACE AND DROPPED THE BUNDLE OF ITEMS HE WAS CARRYING. THE DEPUTIES SPOTTED A POSSIBLE FIREARM IN THE BUNDLE OF DROPPED ITEMS. THE DEPUTIES DREW THEIR WEAPONS AND FIRED MULTIPLE TIMES AT THE DECEDENT. 16 APPARENT 9MM CALIBER CASINGS WERE RECOVERED AT THE SCENE. THE TWO DEPUTIES THEN RENDERED FIRST AID TO THE DECEDENT AND SECURED THE SCENE. LA FIRE ENG 14 RESPONDED TO THE SCENE AND DEATH WAS DETERMINED BY PARAMEDIC JEFFERYS #603095 ON MONDAY 8/31/2020 AT 1527 HOURS. THE DECEDENT SUSTAINED APPROXIMATELY 10 APPARENT GUNSHOT WOUNDS. DETECTIVES WOULD LIKE 2 HOUR NOTIFICATIONS. PLEASE SEE CASE NOTES FOR CONTACT INFORMATION.

MASON CHAO 637632		INVESTIGATOR	DATE 9/1/2020 TIME 05:15	REVIEWED BY VANANDA CHOLAKIA	DATE 9/1/2020 TIME 05:53
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FORM #3 NARRATIVE TO FOLLOW?



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



Case Number: 2020-08009

Decedent: KIZZEE, DIJON DURAND

Information Sources:

- (1) Sergeant Boskovich 323.890.5500
Los Angeles Sheriff's Department Homicide #020-07618-0375-013

Investigation:

On Monday 8/31/2020 at 1646 hours, Officer Rodriguez from the Los Angeles County Sheriff's Department Homicide made the first call to the Los Angeles County Medical Examiner-Coroner to report a homicide death of a 30 year-old male. On Monday 8/31/2020 at 2152 hours, Lt. Lee assigned this case to me. I arrived on-scene at 2230 hours and cleared the scene on Tuesday 9/1/2020 at 0015 hours. Prior to my arrival the decedent was moved by the Sheriff's Department to render first aid and to secure the scene. Also prior to my arrival, the firearm dropped by the decedent had been collected. Forensic Attendant John Green transported the decedent from the scene to the Decedent Services Unit. According to the reported information, deputies tried to stop the decedent due to a violation. The decedent allegedly attacked the deputies. During the altercation, a firearm was dropped by the decedent. The deputies then proceeded to fire multiple rounds at the decedent in response. Decedent was pronounced at the scene.

Location:

The incident occurred at and decedent died on the street located in front of 1221 West 109th Place in Los Angeles.

Informant/Witness Statements:

This info is preliminary pending further investigation. I spoke to Sergeant Boskovich at the scene and he told me the following information:

At approximately 1514 hours on Monday 8/31/2020, the decedent was riding a bicycle and carrying a bundle of items. Two deputies attempted to stop the decedent for a violation. The two deputies who were on foot momentarily lost sight of the decedent. They reacquired his location a few moments later between some vehicles. The decedent allegedly then punched one of the deputies in the face and dropped the bundle of items he was carrying. The deputies spotted a possible firearm in the bundle of dropped items. The deputies drew their weapons and fired multiple times at the decedent. 16 apparent 9 mm caliber casings were recovered at the scene. The two deputies then rendered first aid to the decedent and secured the scene. Los Angeles County Fire Department Eng14 responded to the scene. Death was determined by Paramedic Jefferys #603095 on Monday 8/31/2020 at 1527 hours.

Scene Description:

West 109th Place is a residential street running east and west with 1 lane of travel in each direction. The street is bordered by parked vehicles, sidewalks, and residences on both sides. Approximately south of 1221 West 109th Place is a truck parked in the eastbound parking lane. Just north of the truck's rear passenger-side wheel is the decedent lying prone on the street. Several feet east of the decedent was marker #1 for the firearm recovered at the scene per detectives. Several feet west of the decedent were multiple casings.

Evidence:

On Monday 8/31/2020 at 2250 hours, I used a GSR kit on both of the decedent's hands and his face at the scene. On Monday 8/31/2020 at 2255 hours, I used 2 swabs under all of the decedent's fingernails at the scene. On Monday 8/31/2020 at 2300 hours, I collected hair standards from the decedent's head, eyelashes, eyebrows, and arms at the scene. I later booked the GSR kit, the fingernail swabs, and the hair standards at the Forensic Science Center as evidence.



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



Case Number: 2020-08009

Decedent: KIZZEE, DIJON DURAND

Body Examination:

The decedent is a 29 year-old male with brown eyes, short black hair, a mustache, and a beard. He has all his upper and all his lower natural teeth. He is lying prone on the ground. The top of his head is facing west. His right arm is bent at the elbow with his right hand resting on the ground parallel with his torso. His left arm is bent at the elbow with his left hand resting on his lower back. His left leg is straight with his left foot resting on the ground and pointing east. His right leg is straight with his right foot resting on the ground and pointing east. He is wearing a white shirt, black pants, black socks, and black shoes. The white shirt is cut. No scars are noted. A tattoo of a phrase is noted on his chest. Tattoos of large characters noted on his abdomen. Multiple miscellaneous tattoos are noted on his right arm. Multiple miscellaneous tattoos are noted on his left arm. A tattoo of large characters is noted on his right lower leg. A tattoo of large characters is noted on his left lower leg. Multiple tattoos of faces are noted on his back. Cardiac monitor patches are noted on both of his forearms and both of his lower legs. Multiple apparent gunshot wounds are noted to his right clavicle area. An abrasion is noted on his forehead. An apparent gunshot wound is noted on his left chin area. An apparent gunshot wound is noted on his right chest. Multiple gunshot wounds are noted on his left mid axillary area. Multiple apparent gunshot wounds are noted on his left chest. An apparent gunshot wound is noted to his right thumb area. An apparent gunshot wound is noted on his left thumb area. An apparent gunshot wound is noted on his left wrist area. An apparent gunshot wound is noted on his left forearm. An apparent gunshot wound is noted in his left thigh area. An apparent gunshot wound is noted to the back of his head. An apparent gunshot wound is noted on his left rear shoulder area. An apparent gunshot wound is noted on his back. Rigor is noted at a 3 throughout his body. Lividity is not observed.

Identification:

On Tuesday 9/1/2020 at 0108 hours, the Los Angeles County Regional Identification System positively identified the decedent as Dijon Kizzee with a DOB of 2/5/1991 from his fingerprint returns through Livescan. On Tuesday 9/1/2020 at 0114 hours, the Department of Justice positively identified the decedent as Dijon Kizzee with a DOB of 2/5/1991 from his fingerprint returns through Livescan. On Tuesday 9/1/2020 at 0114 hours, the Federal Bureau of Investigation positively identified the decedent as Dijon Kizzee with a DOB of 2/5/1991 from his fingerprint returns through Livescan. Per his California Driver License, he is listed as Dijon Durand Kizzee with a DOB of 2/5/1991.

Next of Kin Notification:

On Monday 8/31/2020 at an unknown time, [REDACTED] was notified of his son's death by other family members. The decedent was not married, did not have a will, and did not have any children. I have not spoken to [REDACTED] at the completion of this report.

Tissue Donation:

I did not discuss tissue or organ donation for this case.

Exam Notification:

Detectives would like 2 hour notification. Please see case notes for contact information.

MASON CHAO #637632

SUPERVISOR



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



Case Number: 2020-08009

Decedent: KIZZEE, DIJON DURAND

9/3/2020

Date of Report

FORM 82

GSR DATA SHEET

CORONER CASE #

2020-08009

DECEDENT'S NAME

KIZZEE, DIJON DURAND

Incoming Mode

HOMICIDE SUICIDE ACCIDENT UNDETERMINED OIS

INVESTIGATOR: MASON CHAO

COLLECTED AT: FORENSIC SCIENCE CENTER SCENE HOSPITAL

COLLECTOR: MASON CHAO

DATE: 8/31/2020

TIME: 2330

WEAPON WAS IN DECEDENT'S: LEFT HAND RIGHT HAND UNKNOWN

NEITHER, THE WEAPON WAS LOCATED: DEPUTIES

FIREARM – MAKE/MODEL:

AMMUNITION – BRAND/CALIBER:

SEMI-AUTO

9MM

DATE OF SHOOTING:

8/31/2020

AT

1514

HOURS

LOCATION OF DECEDENT: INDOORS OUTDOORS AUTOMOBILE

LOCATION SHOOTING OCCURRED:

STREET IN FRONT OF 1221 W. 109TH PL. LA CA 90044

NUMBER OF SHOTS FIRED: 16+

DECEDENT'S ACTIVITY PRIOR TO SHOOTING: UNK

DECEDENT'S OCCUPATION: UNK

DECEDENT'S HANDS WERE TOUCHED PRIOR TO GSR COLLECTION BY: POLICE

FAMILY PARAMEDICS HANDCUFFED BAGGED

BAGS COLLECTED OTHER:

NOTES/COMMENTS :