



Police Investigations &
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Investigator I/C Case DSI LITTLE

Officer(s) Seizing INV. SINCLAIR

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Address _____

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Signature _____

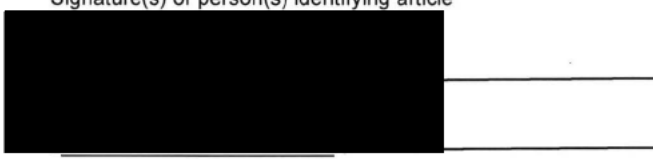
Case Against/Incident _____

Description of Article INITIAL POST MORTEM
REPORT.

Where Found E-MAIL FROM COPPS
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CASE OF

COURT PRODUCTION NO.

PIRC

Print Name
1. GARRY SINCLAIR 6. _____

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Date Issued: 06 May 2015

Autopsy No: F00542/2015

Fiscal Ref: Awaited

Name of Deceased: Sheku Ahmed Tejan BAYOH

Date of Birth: 30 September 1983

Age at Death: 31

Sex: Male

Address: Collette Bell's address at Arran
Crescent
Kirkcaldy
Fife

Place of Death: Resus, A&E, Victoria Hospital, Kirkcaldy

Pronounced Dead At: 09:04 Hours on 03 May 2015

Medical Cause of Death:

1a Unascertained (pending further investigations)

Date of Autopsy: 04 May 2015

Examining Doctors: Dr Kerryanne Shearer/Dr Ralph BouHaidar

Authorising Procurator Fiscal (District): Kirkcaldy

DECLARATION

On the instructions of the Procurator Fiscal at Kirkcaldy we, Kerryanne Shearer and Ralph BouHaidar, registered medical practitioners performed a post mortem examination and dissection on the body of Sheku Ahmed Tejan BAYOH at the Edinburgh City Mortuary, on 04 May 2015.

IDENTIFICATION

The body was identified as being that of the above Deceased by fingerprints. The body was also formally identified to Kerryanne Shearer and Ralph BouHaidar, in person, by the following:

(1) John Ferguson Inv (PIRC)

(2) Peter Grady DC (MIT)

Both scene managers dealing with deceased at
Victoria Hospital

BACKGROUND HISTORY

The general practice notes are awaited.

The hospital notes are awaited.

We were informed that on the 2nd of May 2015 this 31 year old man left for work around 07:00 hours. He was in phone contact with his partner throughout the day, returning home at 16:30 hours. At 17:00 hours he left his home address with his partner to carry out general errands. At 17:50 hours he was dropped off at his sister's address to celebrate a family birthday. He reportedly had made provisional plans to socialise with friends and watch a boxing match that evening. It was anticipated that this would continue into the early hours of the 3rd of May. He spoke to his partner at 20:40 hours that day for a general catch-up. At 21:50 hours with a friend he attended at a supermarket and purchased alcohol before returning to his home address. At this point he was described as happy and not heavily under the influence of alcohol. He spoke to his partner at 23:40 hours stating he was at home and in the company of a friend and appeared in good spirits. This was the last formal contact his partner had had with him.

It is then reported that during the early hours of the 3rd of May he was in the company of other witnesses at their address and watched the boxing match leaving the address around 06:00 hours with his friend. At the locus he reportedly continued to consume alcohol, was not making much sense and appeared confused. He left the locus and his friend went after him but could not find him. His friend returned to Mr Bayoh's home address and found him and he reportedly produced a clear bag but had white/purple tablets within. They were taken from him and the plan was to flush them down the toilet. His mood was described as continually changing and he reportedly punched his

friend in the back of the head. Following this his friend managed to run away. His partner returned to the home address but could not locate him. She did observe that a television was upturned and miscellaneous items were discarded on the floor.

At 07:15 hours Police Scotland received reports that a male was in the area of Henry Street walking in the direction of Hayfield Road in possession of a large knife. Witnesses reported him kicking out and chasing cars and Police Officers were dispatched. Mr Bayoh reportedly engaged with the Officers and a physical confrontation ensued resulting in him being restrained to the ground, handcuffed with leg restraints being applied. During the restraint he became unresponsive and resuscitation was commenced. An ambulance was called and he was conveyed to the Accident and Emergency Department of Kirkcaldy Hospital where resuscitation was continued but he was subsequently pronounced dead there at 09:04 hours.

EXTERNAL FINDINGS

The body was that of a dark brown skinned adult male, of heavy build, measuring approximately 178cm (5ft 10in) in height and weighing 81kg (12st 10lb) – BMI of 25.6. The hair was short and black. The eyes appeared dark brown. The teeth were natural and in good condition. The nose was intact. The fingernails were medium length and clean.

Within the right upper conjunctivae were at least eight fine petechial haemorrhages and in the lower right conjunctivae a collection of coarse and fine petechial haemorrhages, at least four in number and a more confluent haemorrhage over the lower inner border of the conjunctivae measuring 0.3cm in diameter. Over the right side of the sclera just at the border with the pupil was a coarse haemorrhage measuring 0.2cm in diameter. Over the inner aspect of the right side of the sclera was a collection of coarse and pin point haemorrhages, up to eight in number. Within the conjunctivae of the left upper eye was a single coarse petechial haemorrhage measuring 0.2cm in diameter and within the left lower conjunctivae at least seven coarse petechial haemorrhages.

Scars

- Over the right forehead, three circular scars, each measuring 0.2cm in diameter
- Over the left cheek, five circular scars, the largest 0.7cm and the smallest 0.2cm in diameter
- Over the front of the left shoulder, an irregular scar measuring 1.5 across x 1cm up/down
- Over the right upper arm, an ovoid scar measuring 0.7 x 0.5cm
- Over the inner aspect of the upper third of the right forearm, a probable irregular scar measuring 1.5 x 0.5cm
- Over the back of the radial aspect of the right hand, an irregular scar measuring 2cm in diameter

- Over the back of the knuckle of the right index finger, an irregular scar measuring 2cm in diameter
- Over the back of the upper third of the left upper arm, a circular scar measuring 0.5cm in diameter
- Over the outer aspect of the middle third of the left upper arm, a circular scar measuring 0.7cm in diameter
- Over the back of the lower third of the left upper arm, a vertical scar measuring 1.2cm in length
- Over the left thenar eminence, an irregular scar measuring 1.5 x 0.2cm
- Over the right knee, at least four irregular scars, the largest measuring 2cm in diameter
- Over the front of the middle third of the left shin, two white scars, measuring 1cm and 0.5cm in diameter
- 3cm below the scars described directly above, a further white scar measuring 0.2cm in diameter

Rigor mortis was passing and post mortem hypostasis was present over the back of the body.

Signs of medical intervention

- Over the back of the right hand, a needle puncture mark and this was associated with swelling of the hand
- Within the crease of the left elbow, a dressing and underlying this a needle puncture mark
- Over the radial aspect of the back of the right wrist, two possible needle puncture marks
- Within the right groin, stitching and associated with this two puncture marks and two further needle puncture marks

Injuries

A provisional description of the injuries is being described prior to receipt of the post mortem photographs:

Head and Neck

1. Over the left forehead its upper end 1cm in front of the hairline an inner end 3cm to the left of the mid line, an irregular abrasion measuring 3.5cm across x 3.5cm up/down
2. 0.5cm in front of Injury No. 1, directly above the outer half of the left eyebrow, an abrasion measuring 3cm across x 2cm up/down
3. Within the upper mouth at the border of the upper lip and mucosa, a superficial 'S' shaped laceration measuring 1.2cm in length
4. Over the right upper lip just at the border with the mucosa, a collection of up to seven superficial lacerations, in a total area measuring 3.5cm across x 1cm up/down, the longest measuring 1cm in length and smallest 0.1cm in length

5. Over the left upper lip at the border with the mucosa, a red bruise measuring 0.2cm in diameter
6. Within the gum-line at the left upper central incisor tooth, a curved superficial laceration measuring 1cm in length, concave superiorly and following the border of the tooth
7. Within the left side of the lower aspect of the mouth in the mucosa, a superficial laceration measuring 0.2cm in length
8. Within the left side of the lower aspect of the mouth within the mucosa 0.5cm to the left of the mid line, a superficial laceration 0.2cm in length
9. Within the right side of the lower aspect of the mouth within the mucosa, a collection of at least five superficial lacerations in a total area measuring 1.5cm up/down x 1cm across, the largest measuring 0.2cm in length and the smallest 0.1cm in length
10. Over the lower lip in the mid line, three horizontal superficial lacerations, upper measuring 0.3, middle 0.2 and the lower 0.1cm in length

Trunk

11. Over the right mid chest extending from the mid line, its upper end 8cm below the right clavicular head and lower end 20cm above the umbilicus, patchy irregular abrasion measuring 8cm up/down x 5cm across comprising numerous intermittent abrasions, the largest 1.5cm x 0.1cm, and smallest 0.1cm in length

Right Arm

12. Over the back of the hand just proximal to the knuckle of the little finger, an irregular superficial flapped laceration measuring 0.5cm up/down x 0.4cm across and flapped to the left

Left Arm

13. Over the back of the lower half of the upper arm, an irregular abrasion measuring 8cm up/down x 5cm across
14. Over the ulnar aspect of the elbow, an irregular abrasion measuring 4cm across x 2.5cm up/down
15. Over the front of the middle third of the forearm, a horizontal superficial wound measuring 1.2cm in length
16. Around the lower third of the forearm its distal end 5cm from the wrist, a band of brown discolouration extending over the back of the arm and measuring 1.9cm in maximum width. The band appeared to extend around to the front of the arm but there present only as a single line of brown discolouration measuring up to 1 cm in maximum width and this being 2cm proximal to the wrist. At the upper aspect of the band at the ulnar border of the arm there was a line of abrasion measuring 0.2cm in length and at the lower aspect of the band also at the ulnar aspect of the arm was an oblique abrasion measuring 0.3cm in length
17. Over the back of the lower third of the forearm, a horizontal linear abrasion measuring 0.2cm in length

18. Over the ulnar aspect of the front of the lower third of the forearm, two almost horizontal linear abrasions, upper measuring 1.7cm and the lower 1.7cm in length and separated by up to 0.1cm in width
19. Over the back of the proximal phalanx of the index finger, a flapped superficial laceration measuring 0.6cm in length and flapped superiorly

Right Leg

20. Over the front of the middle third of the shin, a healing wound measuring 0.5cm in diameter
21. Over the front of the lower third of the shin, a scabbed wound measuring 0.2cm in diameter

Left Leg

22. Over the inner aspect of the knee, an abrasion measuring 1.5cm in diameter
23. Over the front of the upper third of the shin, an area of superficial skin loss measuring 0.1cm in diameter

INTERNAL FINDINGS

Head and Neck

The scalp and skull were intact. There was an area of left frontal subgaleal haemorrhage underlying injury No. 1 measuring 2cm in diameter and a bruise within the left temporal muscle measuring 0.5cm in diameter. The main arteries at the base of the brain and carotid arteries appeared normal. The brain (1440g) over the superior aspects of both cerebral hemispheres showed cloudy/white discolouration particularly at the mid line and associated with arachnoid granulations. The brain was retained in its entirety for examination by a Neuropathologist and will be examined, sampled and returned to the body prior to its release.

The mouth was as described above. The tongue was normal. The pharynx was normal. A layered neck dissection (front and back) was carried out and there was no evidence of haemorrhage into the strap muscles of the neck and the laryngeal skeleton was intact. The thyroid gland (90g) appeared uniformly enlarged with no focal nodules noted.

A facial dissection was undertaken and over the right cheek within soft tissue and right masseter muscle was an area of haemorrhage measuring 6 x 3cm. Over the left anterior zygoma was an area of soft tissue haemorrhage measuring 1cm in diameter and over the upper orbits bilaterally is an area of subgaleal haemorrhage measuring in total 6cm across x 2cm up/down. There was no obvious bony injury.

Chest

The ribs were intact. Each pleural cavity contained approximately 20 mls of straw-coloured fluid and there were no adhesions. The trachea and major bronchi contained a small volume of dark brown fluid. The lungs (right 860g; left 790g) were congested and oedematous, but showed no other obvious significant gross abnormality. There was no evidence of pulmonary thromboembolism.

The pericardial sac was normal. The heart (430g) was of normal size and configuration. The coronary arteries, myocardium and cardiac valves were normal.

The aorta was normal.

The oesophagus contained a thin film of bilious fluid and the mucosa was normal.

Abdomen

The peritoneal cavity was dry and there were no adhesions. The stomach contained a small amount of dark green fluid and the gastric mucosa was normal. The small and large intestines were normal.

The liver (1800g) appeared congested and showed focal pale areas. The gallbladder was normal and the biliary tract was patent. The pancreas, spleen (90g) and adrenal glands were normal.

The kidneys (combined weights 290g) were normal externally and on sectioning. The bladder contained a large quantity of urine and the mucosa was normal. The genitalia were normal.

MUSCULOSKELETAL SYSTEM

A subcutaneous dissection was undertaken on the trunk and limbs. The results of this were as follows:

- Over the left upper back, an area of subcutaneous haemorrhage extending into muscle and measuring 1cm in diameter
- Over the radial aspect of the right wrist, an area of subcutaneous haemorrhage measuring 0.2cm in diameter
- Underlying the needle puncture mark over the back of the right hand, an area of subcutaneous soft tissue haemorrhage measuring 5cm up/down x 4cm across
- Over the back of the middle third of the left upper arm, an area of subcutaneous haemorrhage measuring 2cm in diameter
- Underlying needle puncture mark within the left elbow, an area of subcutaneous haemorrhage measuring 3cm in diameter

- Underlying the injury described around the left wrist, a rim of subcutaneous haemorrhage measuring in total 11cm across x 1cm up/down
- Over the inner upper third of the right thigh 18cm below the penis, an area of subcutaneous soft tissue haemorrhage measuring 4cm up/down x 1cm across
- Over the outer middle third of the right shin an area of subcutaneous soft tissue haemorrhage which superficially extended into the muscle and measured 7cm up/down x 4cm across
- Over the inner aspect of the lower third of the left thigh 30cm below the penis, an area of subcutaneous soft tissue haemorrhage which extends into muscle and measures 7cm up/down x 4cm across
- Over the front of the upper third of the left shin 19cm above the ankle, an area of subcutaneous soft tissue haemorrhage measuring 3cm up/down x 1cm across

There was no evidence of fracture or deformity.

FURTHER INVESTIGATIONS

Histology – small tissue samples were retained.

Neuropathology – the brain and cervical spinal cord were retained in their entirety for formal neuropathological examination. They will be examined, sampled and returned to the body prior to the release of the body.

Toxicology – two peripheral blood samples, two urine samples, facial swabs (wet and dry), mouth swabs (wet and dry), nasal swabs (wet and dry) and sections of the right and left lung were retained.

Bacteriology – A brain swab and small sample of brain tissue were retained.

Virology – a small sample of brain tissue was retained.

Other productions for Police:

- Body bag
- Other bags – head, right hand, left hand
- Body sheet
- Hair – head (shaved)
- Swabs – mouth (dry)
- Nail scrapings – wet and dry (right and left hands)
- Blood for DNA grouping

OPINION AS TO CAUSE OF DEATH

1a Unascertained (pending investigations)

Death certificate was issued by Dr Kerryanne Shearer.

CONCLUSIONS

Post mortem examination showed the injuries documented above.

No definite cause of death was identified at this stage.

The circumstances surrounding death are noted and various investigations have been undertaken to try and further clarify things. The report will be amended when the results of these investigations are available. The cause of death at this point is best regarded as being unascertained (pending further investigations).

Dr Kerryanne Shearer
MB ChB FRCPath MRCP DipFM
Consultant Forensic Pathologist
GMC No. [REDACTED]

Dr Ralph BouHaidar
BSc MSc MD FRCPath
Consultant Forensic Pathologist
GMC No. [REDACTED]

The information above represents our understanding of the views, opinions and circumstances of this case based on the information received to date, either in writing or by oral communication. We reserve the right to reconsider any aspect of this report should a significant typographical or grammatical error, or factual inconsistency, be identified that could be misinterpreted by a reader. We also reserve the right to reconsider any aspect of this report should further factual information arise that contradicts the information provided at the time of the post mortem examination, upon which we have based our interpretations.

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