

**OFFICE OF THE MEDICAL EXAMINER
DISTRICT NINE
2350 E. Michigan Street
Orlando, Florida 32806-4939**

REPORT OF AUTOPSY

DECEDENT: KEVIN LOIBL

CASE NUMBER: ME 2016-000904

MANNER OF DEATH: Suicide

IDENTIFIED BY: Photo ID

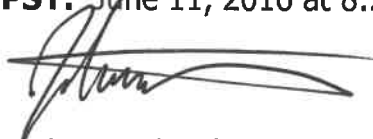
AGE: 27 years

SEX: Male

RACE: White

DATE OF DEATH: June 10, 2016

DATE/TIME OF AUTOPSY: June 11, 2016 at 8:20 am

 , MD 7/21/16

PERFORMED BY: Joshua D. Stephany, MD, Chief Medical Examiner

CAUSE OF DEATH: Gunshot wound of the head

AUTOPSY FINDINGS

- I. Perforating, contact gunshot wound of the head:
 - A. Entrance wound on the left temporal scalp
 - B. Muzzle abrasion/imprint and soot associated with the entrance wound
 - C. Stippling is absent
 - D. Extensive subgaleal hemorrhage
 - E. Extensive linear and comminuted fractures at the base of the skull and calvaria
 - F. Extensive subdural hemorrhage
 - G. Extensive lacerations of the base of the cerebral hemispheres and midbrain
 - H. Exit wound on the posterior right scalp
 - I. Bilateral partial periorbital ecchymoses
 - J. Direction of the path of the wound is left to right, front to back, and upward

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LOIBL, KEVIN
ME 2016-000904
PAGE 2

- II. Blunt force injuries of the neck:
 - A. Superficial abraded contusion of the right posterior neck

- III. Blunt force injuries of the extremities:
 - A. Abrasion of the right knee

TOXICOLOGY ANALYSIS: See laboratory report.

CONCLUSION: In consideration of the circumstances surrounding the death, and after examination of the body and toxicology analysis, it is my opinion that the death of Kevin Loibl, a 27 year old white male witnessed to shoot another and then shoot himself, is the result of a gunshot wound of the head.

The manner of death is suicide.

LOIBL, KEVIN
ME 2016-000904
PAGE 3

The autopsy of the body of Kevin Loibl is performed pursuant to Florida Statute 406.11 by Joshua D. Stephany, MD, Chief Medical Examiner, District Nine at the Orange County Medical Examiner facility, Orlando, Florida on June 11, 2016 at 8:20 am.

IDENTIFICATION: The body of Kevin Loibl is identified by his Florida Learner's License #L140-510-89-090-0. The positive identification is made to by Detective Moreschi of the Orlando Police Department to M.E. Investigator Trisha Clark on June 11, 2016 at 4:00 am at the scene.

CLOTHING AND VALUABLES: At the time of examination, the decedent is dressed in a red plaid shirt, black T-shirt, black jeans with a black belt and two attached gun holsters, black underwear, black sneakers, and black socks. The right front pants pocket contains three \$20 bills, one \$10 bill, and one \$5 bill. The left back pants pocket contains a white cell phone charger. The right front pants pocket contains a wallet. An orange ear plug is in the left ear. A black gun holster with attached knife and padding is around the left ankle.

GENERAL STATEMENT: The body is that of a well-developed, well-nourished, 63 inch, 153 pound, adult white male, consistent with the reported age of 27 years. The hands and feet are sealed in brown paper bags at the scene, and the seals remain intact at the time of examination.

EXTERNAL EXAMINATION

The scalp has anterior balding. The remaining scalp is covered by up to 4 cm long, blonde hair. The facial hair consists of blonde stubble for a beard and mustache. The irides are blue and the sclerae are white. The conjunctivae have no petechiae. The external nose has no trauma and the nasal septum is intact. The frenula are intact and the oral mucosa has no trauma. The teeth are natural and in adequate condition. The neck is unremarkable.

The torso has no injuries, congenital deformities, scars, or tattoos. The chest, axillary regions, and pelvic region have been shaven antemortem. The external genitalia are those of a circumcised adult male. The testes are in the scrotum. The anus is normal.

The extremities have no congenital deformities, scars, or tattoos.

EVIDENCE OF INJURY

Perforating, contact gunshot wound of head:

A 1 cm round entrance gunshot wound with a 0.1 cm red abrasion rim is on the left temporal scalp, 3 ½ inches below the top of head, and 4 ½ inches left of the anterior midline. Black soot is in the soft tissue edges of the entrance wound. A 1 x 1 cm circular muzzle abrasion/imprint with a central circle is adjacent to the entrance wound at the 9 o'clock position. A 1.5 cm wide U-shaped muzzle abrasion/imprint is around the previously described muzzle abrasion imprint also at the 9 o'clock position.

The wound path is hemorrhagic and traverses the soft tissue and musculature of the left scalp, left temporalis muscle, base of the left cerebral hemisphere, midbrain, base of the right cerebral hemisphere, and exits the posterior right scalp.

A 1 x 1 cm stellate exit wound is on the posterior right scalp, 1 ½ inches below the top of the head, and 6 ½ inches right of the anterior midline.

Associated with the path of the wound are lacerations and hemorrhage of the left temporalis muscle, diffuse subgaleal hemorrhage, extensive linear and comminuted fractures of the base of the skull and calvaria, subdural hemorrhage, lacerations of the bases of the cerebral hemispheres, transection of the midbrain, and bilateral partial periorbital ecchymoses.

Direction of the path of the wound is left to right, front to back, and upward.

INTERNAL EXAMINATION

The pleural cavities, pericardial sac, and peritoneal cavity have no excess fluid or adhesions.

CARDIOVASCULAR SYSTEM: The heart is 280 grams and has a normal distribution of epicardial fat. The coronary arteries are patent. The right coronary artery is dominant. The myocardium is dark red, firm, and has no scars. The left ventricle is 1.5 cm thick and 2 cm in internal diameter. The right ventricle is 0.4 cm thick and 4 cm in internal diameter. The tricuspid, pulmonary,

mitral, and aortic valves are thin, pliable, and have no vegetations. The aorta is elastic and has a smooth intimal lining.

RESPIRATORY SYSTEM: The right lung is 240 grams and the left lung is 210 grams. The pleural surfaces are tan-pink smooth, and glistening. The lung parenchyma is tan-pink, soft, and focally congested. The larynx and trachea are patent and have tan, intact mucosa. The pulmonary vessels are patent.

HEPATOBIILIARY SYSTEM: The liver is 1350 grams and has a smooth, tan-brown, and intact capsule. The parenchyma is tan-brown and firm. The gallbladder contains approximately 10 ml of dark green, viscous bile and no choleliths. The gallbladder mucosa is dark green and velvety.

RETICULOENDOTHELIAL SYSTEM: The spleen is 130 grams and has a purple, finely wrinkled, and intact capsule. The parenchyma is dark red and soft. The cervical, mediastinal, and abdominal lymph nodes are not enlarged.

GASTROINTESTINAL TRACT: The tongue has no bite marks or hemorrhage. The esophagus is lined by tan, intact mucosa. The serosa of the stomach is tan-gray and glistening. The stomach contains approximately 20 ml of tan fluid. The gastric mucosa is tan, has unremarkable rugal folds, and is intact. The external surfaces of the intestines are tan-gray and have no palpable masses. The vermiform appendix is tan-gray and glistening.

GENITOURINARY SYSTEM: The right kidney is 90 grams and the left kidney is 100 grams. The capsules are adhered to tan-red, smooth cortical surfaces. The parenchyma is tan-red and has well-defined corticomedullary demarcation. The ureters have a normal course and caliber. The urinary bladder contains approximately 200 ml of pale yellow urine and has a tan, trabeculated, and intact mucosa. The prostate gland is tan, firm, and not enlarged. The testes have tan parenchyma.

ENDOCRINE SYSTEM: The adrenal glands have well-demarcated, thin, golden yellow cortices, and grey medullae. The pancreas is tan and lobular. The thyroid gland is dark red, uniform, and not enlarged. The thymus gland is tan-pink and lobular.

NECK: The anterior muscles and surrounding soft tissue of the neck have no hemorrhage. The hyoid bone and thyroid cartilage are intact.

LOIBL, KEVIN
ME 2016-000904
PAGE 6

HEAD: Injuries to the head are previously described. The brain is 1270 grams. Epidural hemorrhage is absent. The leptomeninges are thin, transparent and have no exudate. The uninjured portions of the vessels at the base of the brain are patent. The uninjured portions of the cerebral hemispheres are symmetric and the gyri and sulci are otherwise unremarkable. Coronal sections of the cerebrum and transverse sections of the cerebellum and brainstem reveal no neoplasm or necrosis.

JDS/crg

Patient: LOIBL, KEVIN
Client Patient ID: 9-16-904
Physician: STEPHANY, JOSHUA

Age: 27 **Sex:** M
Account#: VX82878
Client: DIST 9 MEDICAL EXAMINER

TOXICOLOGY

Specimen Collected :06/11/2016 Lab Order No: 661300934 Reg Date: 06/13/16

Test Name	Result	Units	Cutoff/Reporting Limits
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VOLATILE PANEL - VOLP

SPECIMEN TYPE

PERIPHERAL BLOOD

ETHANOL	NONE DETECTED	g/dL	0.010
ACETONE	NONE DETECTED	mg/dL	7.5
METHANOL	NONE DETECTED	mg/dL	15.0
ISOPROPANOL	NONE DETECTED	mg/dL	15.0

Analysis by Gas Chromatography (GC) Headspace Injection

BLOOD DRUG SCREEN - BDSME

SPECIMEN TYPE

PERIPHERAL BLOOD

GC/MS

CAFFEINE

LC/MS/MS

CAFFEINE, CAFFEINE METABOLITE

BLOOD IMMUNOASSAY SCREEN

AMPHETAMINES	NEGATIVE	mg/L	0.100
BARBITURATES	NEGATIVE	mg/L	0.100
BENZODIAZEPINES	NEGATIVE	mg/L	0.050
BUPRENORPHINE	NEGATIVE	mg/L	0.001
CANNABINOIDS	NEGATIVE	mg/L	0.050
COCAINE METABOLITE	NEGATIVE	mg/L	0.100
FENTANYL	NEGATIVE	mg/L	0.001
OPIATES	NEGATIVE	mg/L	0.050
SALICYLATES	NEGATIVE	mg/L	50.0

A 7/21/16

Specimens were intact upon receipt. Chain of custody, specimen security and integrity has been maintained. Testing has been performed as requested

Reviewed by: *Juan R...* Date: 7-15-16

FINAL REPORT - THIS COMPLETES REPORTING ON THIS CASE

TOXICOLOGY REPORT

LOIBL, KEVIN