



### F34 The Mother of All Multi Bite Marks

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After attending this presentation, attendees will understand the management of multiple bite marks on a victim.

This presentation will impact the forensic community and/or humanity by providing knowledge via case presentation.

**Learning Objective:** This is an exercise for the attendee odontologist to select the appropriate level of identification terminology from the ABFO bite mark guidelines he or she would choose as compared to the choices of the presenter.

**Outcome:** Bite marks not only have their own forensic value, but can prompt law enforcement creativity to use other investigative techniques to build a case.

This case is unusual in that there were multi-bite marks on the victim, done over a multi-period of time, with multi-suspects, in multi-jurisdictions resulting in multi-criminal charges, and involving multi-forensic odontologists. At the time it was called the worst case of child abuse ever seen in Jacksonville by involved authorities.

A ten-month-old black female was hospitalized in pediatric intensive care with multiple fractures including skull and arm; cellulitis, particularly on the face; and a large number of patterned injuries, many superimposed over each other, in different stages of healing. With the infant on intensive care support a team of nurses and police manipulated the victim so as to obtain reasonable bite mark photography under the circumstances. The infant eventually recovered and was placed in foster care by the State.

While the photographs were deemed suitable for comparison, the challenge was the decision making under ABFO guidelines as to the status of each injury pattern and whether each was suitable for comparison, and at what level. At the request of the odontologist, medical examiners viewing the photographs timed the bites as from 6 days to 6 weeks old, or more. None were timed as "recent," meaning over the last few days.

The only suspect at the time was the mother who had been in Florida for about a week, and who was being held on child neglect charges, having been seen by neighbors carrying the infant around for days in this condition. The mother's dental exemplars were taken by court order. No evidence of her peg upper laterals were seen in any curvature deemed a "possible" or a "probable" bite mark and the odontologist ruled her out as a biter, so that charges against her stood as "neglect" rather than "abuse." While in custody, the mother maintained the abuser/biter was the purported father who remained in the adjacent state of Georgia, and whom she had left about a week before coming to Florida. Since the incarcerated mother remained in phone contact frequently with the father, detectives in Jacksonville began working with the Georgia Bureau of Investigation (GBI) agency in Adel, and, with the mother's cooperation, a legal phone recording strategy was initiated to help build probable cause for taking his dental exemplars.

So as to limit travel time and expenses, the Florida odontologist enlisted the help of a dentist in Adel Georgia, and sent him certain dental materials for use in the protocol for taking evidence from the suspect. Having developed probable cause, the GBI served a search warrant on the suspect and the enlisted dentist obtained the inventory requested. The GBI delivered the inventory to the Florida odontologist via chain of custody through the Jacksonville Sheriff's office.

The father's exemplars were compared to the only two certain human bite marks deemed suitable for comparison for a higher level of identification.

There was evidence of intentional alteration of certain teeth as seen in the models of the father's teeth, particularly the incisal embrasures of the lower anteriors.

The odontologist was not able to demonstrate a material difference between the real bite marks and test bites in skin using the models taken during the search warrant which would have been after intentional alteration.

#### **Bite Marks, ABFO Guidelines, Intentional Alteration**