G55 Firearm Deaths by Law Enforcement in New York City

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Upon completion of this presentation, participants should obtain an overview of the circumstances and injury patterns seen with 42 police shootings.

This presentation will impact the forensic science community by demonstrating how although police shootings in which the decedent was unarmed and/or sustained numerous gunshot wounds are widely reported by the lay press, these types of shootings were not typical in our study.

The use of deadly force during law enforcement is a matter that compels public scrutiny. There were 42 gunshot deaths caused by police over a 4-year period in New York City. The decedents' average age was 31 years and ranged from 17 to 64 years. There were 41 males and 1 female; and 26 Black, 9 Hispanic, and 7 White decedents. The majority (90%) of the decedents possessed a weapon. There were 26 handguns, 6 knives, 1 axe, 1 metal pipe, and 1 toy gun (carried by an adult impersonating a police officer). Vehicles were used as weapons in two incidents. Ethanol and/or drugs of abuse were detected in 78% (31/40) of the decedents. The detected drugs of abuse included: 15 cannabinoids, 14 ethanol, 10 cocaine/BE, and 1 amphetamine. Seven decedents had a history of psychiatric illness.

The most common reason for the police presence was a response to a crime and for the shooting was the decedent's possession/use of a weapon. All but one of the decedents had injuries caused by handguns (one involved a handgun and rifle). A total of 177 bullets struck the 42 decedents. Fourteen decedents sustained single gunshot wounds, and the remainder had multiple gunshot wounds ranging from 2 to 21. In the majority of the cases in this study, the number of gunshot wounds of the body was 3 or fewer. There were 112 penetrating, 55 perforating, and 8 graze wounds. Thirteen decedents had at least one gunshot wound of the back or buttocks, accounting for 25 of the total 177 wounds, and four of the twelve had gunshot wounds of *only* the back. With the exception of the upper extremities, gunshot wounds of all locations were more likely to penetrate than perforate.

The location of the entrance wound is sometimes used as evidence to support or dispute the justification for the use of force. A shooting is a dynamic process with split second decisions and movements. It has been demonstrated that a person can turn the torso completely in the milliseconds that it takes for one to decide to fire a gun and pull the trigger. Our data show a wide range of entrance wound locations which would reflect this dynamic process.

Although these deaths may be high profile, the certification is typically straight forward and the cause (i.e., gunshot wound) and manner of death (homicide) are readily apparent. Since the medicolegal definition of homicide is death at the hand of another, the forensic pathologist is absolved of considering intent or the appropriateness of the use of force. Typically, those issues are left to the legal investigation (e.g., grand jury investigation). During this time, the medical examiner may play an important role in the corroboration of witness statements and other evidence by providing information on the direction of the wound tracks, range of fire, and opining on how the injuries may have affected the victim during the course of the event.

Although police shootings in which the decedent was unarmed and/or sustained numerous gunshot wounds are widely reported by the lay press, these types of shootings were not typical in our study. The vast majority of police-shootings occurred with the police responding to a crime in which the decedent was armed. In addition, most of the decedents had 3 or fewer gunshot wounds.

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