G32 Suicide by Multiple Gunshots From Automatic Weapons

Paul Uribe, MD, 7807 Mineral Springs Drive, Gaithersburg, MD 20877*

After attending this presentation, attendees will be able to describe the characteristics of selective fire and "full-auto" weapons and become familiar with the patterns of injury associated with self-inflicted injuries using these types of weapons.

This presentation will impact the forensic science community by providing a case series of a self-influcted pattern of injury that has rarely been discussed in the forensic literature.

Eight cases of suicide from multiple gunshot wounds by use of automatic weapons will be discussed. Automatic weapons are either solely automatic or have selective fire mechanisms. Selective fire mechanisms include settings for semi-automatic, three round burst, and "full-auto" modes of fire. Weapons with either selective fire settings or that are solely automatic can rapidly discharge multiple rounds in immediate succession when the trigger is pulled. In this case series, there was a strong predilection for wounds of the head (7/8) and only one (1/8) had recovery of the projectile fragments. The recoil produced from firing an automatic weapon can produce considerable distance between entrance wounds. In all of the cases studied, two or more rounds discharged and each had at least two entrance wounds; however, in two cases the number of rounds discharged could not be determined due to the extent of the injuries, co-mingling of trajectory paths, and shared entrance and exit wounds. Thorough scene investigation is essential in these cases to in an effort to determine how many shots were fired, what type weapon was used, and if a selective fire setting was used. Reconstructive computed tomography can also be useful in illustrating wound paths and assisting the determination of how many shots were fired.

Suicide, Gunshots, Automatic

 ** Presenting Author*