



G43 Case Study: Identifying Balloon Fatalities in Central Texas

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After attending this presentation, attendees will better understand how to plan and organize local efforts to identify the deceased in the event of a multiple fatality event at the local level.

This presentation will impact the forensic science community by explaining how a mass fatality response team can be created and mobilized in a small community with seemingly minimal resources.

On Saturday morning, July 30, 2016, shortly after 7:00 a.m., 16 people climbed into a hot air balloon at a rural private airfield between San Antonio and Austin, TX, for a “bucket list” pleasure ride over the prairies of Central Texas. The scheduled ride of one hour ended tragically approximately 30 minutes later when the balloon collided with a major power line. The power company reported that its lines were tripped at 7:42 a.m., and the first 911 call came in approximately one minute later. Exact events are unclear, but it is known that the gondola and its contents ignited, and all 16 souls aboard perished. There was an initial response of local fire fighters and law enforcement, followed by numerous federal agencies investigating in their areas of authority.

A private autopsy service within the county was selected to conduct forensic autopsies and identifications. Due to the condition of the remains, it was realized from the outset of the tragic event that odontology support would be needed to complete the identifications. A local odontologist was contacted and his support was requested. The odontologist in turn surveyed resources at a local university forensic anthropology program and a nearby military facility. Three additional experienced team members were willingly recruited (two anthropologists and one military dentist). The blended odontology and anthropology team came together at the morgue on the second day (Sunday) and began dental autopsies in conjunction with the forensic autopsies. On the third day (Monday), dental offices were contacted to begin the collection of antemortem dental records. Postmortem dental data from autopsy and antemortem dental data from private offices were continuously entered into WinID as they were collected to facilitate identifications. Every effort was made to work in a digital world. The first dental identifications were completed on Monday and work continued until completion of the dental data collection on Friday, the sixth day. At the end of work on Friday, 15 of the 16 decedents had been positively identified: 12 by dental means and 3 by other means. The final unidentified individual had a tentative identification by the process of elimination, but dental records were not located until the following week. Identification by familial DNA analysis was initiated. Dental records were finally located early the next week to complete the final identification.

Lessons learned: (1) well-trained individuals from diverse backgrounds can work together very well. The blended team of anthropologists and odontologists performed flawlessly together; (2) preparation and equipment availability are essential to perform well in a stressful environment. Computers, digital radiology, and copy stands or scanners are essential; (3) all phases have their challenges. Dental autopsies, collecting data from offices, putting it all together for comparison, collaborative reviews, and writing final reports are all equal parts in the process; and, (4) prepare for disasters with complementary daily practices. Each single human identification by dental means must be conducted following a meticulous protocol that is exactly the same as a disaster identification. Only the scale of the events differs.

This tragic event unfolded with an expected amount of chaos that was quickly organized into a successful identification process. The local institutions of state and county government benefited from the relatively rapid



Odontology - 2017

response of the odontology team. The ultimate benefactors are the families and loved ones who received a respectful final answer as to the identity of their decedent.

Dental Identification, Balloon Fatality, Local Disaster Response