



Alameda County Sheriff's Office

Gregory J. Ahern, Sheriff / Coroner
Coroner's Bureau, 480 4th Street, Oakland, CA 94607-3829
(510) 268-7300 / (510) 268-7333 (fax)

Coroner Investigator's Report

CALL INFO	NAME OF DECEDENT (LAST, FIRST MIDDLE) AGU, Ted Obinna			TENTATIVE ID UNIDENTIFIED <input type="checkbox"/> <input type="checkbox"/>		CASE NUMBER 2014-00432	
	REPORTED BY Gary Colclasure		REPORTED BY PHONE NO. (510) 204-4444		REPORTING AGENCY Alta Bates Medical Center-Ashby Campus		REFERENCE NUMBER 14-00374
	INVESTIGATOR Rebecca Lorenzana		CALL DATE AND TIME 2/7/2014 8:16		CASE TYPE Removal Case		
	DATE AND TIME OF DEATH 2/7/2014 7:52		DATE OF BIRTH 5/8/1992	AGE 21 Years	GENDER Male	RACE African-American	MARITAL STATUS Never Married
DECEDENT	HGT 76	WGT 258	EYE COLOR Brown	HAIR COLOR Black	OCCUPATION Student	EMPLOYER	
	Preliminary Summary Undetermined manner of death reported by Alta Bates-Ashby Campus. The decedent was a 21 y/o male that was witnessed to collapse while running during football practice (CAL BERK). CPR was started and continued until paramedics arrived. He was transported to the ER where death was pronounced. there was no trauma, foul play, etoh or drugs reported. It is unknown if the decedent used performance enhancing drugs. NOK was notified of the death.						
DEATH	LOCATION OF DEATH Alta Bates Medical Center-Ashby Campus					MOD TYPE Hospital - ER/OP	
	ADDRESS (STREET, CITY, STATE, ZIP) 2450 Ashby Avenue Berkeley CA 94705					COUNTY Alameda	
	Manner Natural			Death Certificate Signed By: D. Wilson #29, Deputy Coroner			
	Cause A Hypertrophic cardiomyopathy			Interval Years			
	Cause B			Interval			
	Cause C			Interval			
	Cause D			Interval			
Other Significant Conditions		None					
NOTIFICATION	LEGAL NEXT OF KIN Ambrose & Emilia AGU			RELATIONSHIP Parents		TELEPHONE NO. [REDACTED]	
	NOTIFIED BY			METHOD		DATE AND TIME	
	IDENTIFICATION METHOD Personal Identification			DATE AND TIME 2/7/2014 7:52			
	LOCATION OF INCIDENT AT WORK <input type="checkbox"/>						
INCIDENT	ADDRESS (STREET, CITY, STATE, ZIP)					COUNTY	
	INVESTIGATING AGENCY University of California Police					INV AGENCY PHONE NUMBER	
						OFFICER H. BENNINGSON	
DISP	FUNERAL HOME Green Lawn South West			BODY RELEASED TO FUNERAL HOME ON 2/11/2014 8:45			
	Full Autopsy <input checked="" type="checkbox"/> Partial Autopsy <input type="checkbox"/> Inspection <input type="checkbox"/> Record Review <input type="checkbox"/> Inspection w/Specimen <input type="checkbox"/>			EXAM BY Tom Beaver			

Date Printed Monday, August 04, 2014



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Investigator Narrative

Decedent: AGU, Ted Obinna
Case Number: 2014-00432
Investigator: Rebecca Lorenzana

First Call Information:

On Friday, February 7, 2014, about 0816 hours, Registered Nurse G. COLCLASURE, of the Alta Bates Medical Center-Ashby Campus, called and reported the undetermined manner of death of 21 y/o male, Ted Obinna AGU. AGU was a University of California-Berkeley student witnessed to collapse while running during football practice. Cardio pulmonary resuscitation was initiated by his teammates and continued until paramedics arrived. AGU was transported to the emergency room where death was pronounced at 0752 hours by Dr. CALMENSON. There was no trauma, foul play, alcohol or drug abuse reported. It was unknown if AGU used performance enhancing drugs. COLCLASURE said there was no known medical history other than sickle cell anemia. The next of kin was notified of the death and were enroute from Bakersfield, CA. (RL1702)

Medical Summary:

AGU had a history of sickle cell anemia. He was not known to abuse alcohol or drugs or use performance enhancing drugs.

I spoke to AGU's sister, Cindy AGU and Emilia AGU, the decedent's mother, and asked if AGU had any medical history the Coroner's Bureau should know of. Cindy said her mother said no, he only had issues with allergies. I asked if AGU had the sickle cell trait and they said not to their knowledge. AGU had never really gone to the doctor for any problems and was healthy. The only reason he ever saw a doctor was for allergies now and as a child. (RL1702)

Description of the Death/ Injury Scene:

AGU was pronounced deceased in the emergency room at Alta Bates Ashby Campus. (RL1702)

On Friday, February 7, 2014, about 0955 hours, Deputy EASLING and I (LORENZANA) arrived at the Alta Bates Medical Center-Ashby campus to make the removal of AGU. We were met by Nurse G. COLCLASURE who led us to AGU in room #2. The room was a standard, emergency room with a curtain dividing the room with medical therapy equipment throughout. AGU was in the center of the room on a hospital gurney covered with a sheet. I removed the sheet and saw he was completely nude. I saw no visible trauma when I examined AGU's body. Livor mortis was not discernible and there was slight rigor mortis in the extremities that was easily broken. There was medical therapy in place. We moved AGU to the coroner gurney and into the van without incident. Prior to our departure, I issued receipt 34157 for AGU, his clothing, a purple bracelet and 2 tubes of hospital specimen.



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While at the hospital, I spoke to AGU's family. I explained the Coroner's involvement and the need to contact a funeral home as soon as possible. The family was hysterical, so I provided them a pamphlet which explains our involvement, mortuary involvement and fees associated with Coroner cases, should they have questions later. They also identified AGU prior to our departure.

At 1035 hours, we arrived to the Coroner's Bureau and processed AGU into the morgue which included intake photos. The hospital specimens were attached to his foot. (RL1702)

Body Identification:

AGU was personally identified by family members at the hospital. (RL1702)

Next of Kin Investigation:

AGU was never married and had no children. His legal next of kin are his parents, Ambrose and EMILIA AGU. They were notified of the death by family members. Kency AGU is the decedent's brother and he will be assisting his parents with arrangements. (RL1702)

Other Agency Reports:

This death occurred within the jurisdiction of the University of California Police Department. Detective BENNINGSON was assigned to this case and report 14-14-00374 was issued. I reviewed a copy of the report. In summary, the head football coach, Damon HARRINGTON was interviewed and reported that AGU was running with a group and was the head of the group the entire time until the final lap where it was evident AGU appeared tired. AGU eventually stopped running and took a knee to catch his breath. While his teammates continued the run, AGU was escorted by cart down to where he can be further accessed. AGU lost consciousness and CPR was initiated. Paramedics arrived and transported AGU to the emergency room.

Also in the report was an interview with AGU's roommate, Austin HINDER. HINDER reported noticing AGU appeared "extra tired" earlier in the week during the completion of practices and was winded when running. HINDER said AGU did not abuse drugs but drank alcohol on occasion. HINDER did not know of AGU using performance enhancing drugs. HINDER said AGU couldn't stop sneezing for 3 days prior to his death which was odd, but HINDER attributed it to AGU's allergies. (RL1702)

Property and Evidence:

Coroner receipt 34157 was issued for this case. (RL1702)

Coroners Fees:

Removal and body preparation fees of \$321.00 apply. The fees were paid in full on February 21, 2014 by Greenlawn Mortuary when they removed AGU from the Coroner's Bureau. Accounting receipt 4659 was issued to reflect the payment. (RL1702)

Other Investigative Details/ Supplemental Information:



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On February 11, 2014, Central Valley Toxicology performed a complete drug screen on the femoral blood sample and vitreous humor sample obtained at autopsy. The screen revealed there were no common acidic, neutral or basic drugs detected. There was no ethyl alcohol detected. The vitreous panel revealed glucose 36 mg, sodium 138mmo, potassium 17.2mmo, and chloride 114mmo. (RL1702)

On Monday, April 21, 2014, about 1100 hours, I (Sgt. GRAVES) spoke with Emilia AGU, the mother of Ted AGU. I told her Chief Forensic Pathologist, Dr. T. BEAVER, rendered a cause of death, "hypertrophic cardiomyopathy." She informed me it was her wish we did not release this information to anyone. I attempted to explain the information was subject to release pursuant to The California Public Records Act. Additionally, Alameda County Coroner's Bureau Policy number 2.25 encourages timely release of public information to the news media, unless the information is in conflict with a law enforcement agency investigation. I further explained she could obtain a court order (injunction) to prevent the release of such information. As of 4/21/14, no court order (injunction) was received by this office. (PRG#1660)

On Tuesday, April 22, 2014, about 0910 hours, the "Press Hold" was released on this investigation. A court order (injunction) has not been received by the Alameda County Coroner's Bureau as of the time and date listed. (PRG#1660)

Findings:

On Saturday, June 7, 2014, I reviewed this case to determine a manner of death and to prepare it for closure. Upon my review of the police report, medical records and autopsy protocol, I have determined the manner of death to be natural. The cause of death as given by Coroner Pathologist, Dr. T. BEAVER was hypertrophic cardiomyopathy. (RL1702)

Supervisor Review:

On June 9, 2014, I (Lt. Bowers) reviewed this report for closure. I agree with the content and findings. I consider this case closed. (rmb#906).



CENTRAL VALLEY
TOXICOLOGY, INC.

Case Name:

Agu,

Ted

O.

TOXICOLOGY NUMBER:

CVT-14-2744

20 ml femoral blood & 3.5 ml vitreous humor each labeled "Agu, Ted; 2014-00432;
02/10/2014"

Specimen Description:

Delivered by Tricor

Date 11-Feb-14

Received by Bill Posey

Date 11-Feb-14

Request: Complete Drug Screen

Agency Case # 2014-00432

Requesting Agency

Alameda Co. Coroner's Office

Attn: Acct's Payable

480 4th Street

Oakland CA 94607

Report To

Alameda Co. Coroner's Office

Attn: Dr. Beaver

480 4th Street

Oakland CA 94607

Specimen: Femoral Blood Sample

RESULTS

Complete Drug Screen: No common acidic, neutral or basic drugs detected.
No Ethyl Alcohol detected.

Specimen: Vitreous Humor Sample

Vitreous Panel: Glucose = 36 mg/dL

Sodium = 138 mmol/L

Potassium = 17.2 mmol/L

Chloride = 114 mmol/L

ENTERED
2/25/14

B. L. Posey

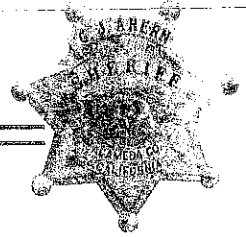
February 18, 2014

B.L. POSEY
S.N. KIMBLE
Directors

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Clovis, California 93611
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Gregory J. Ahern, Sheriff

Director of Emergency Services
Coroner - Marshal

M E M O R A N D U M

DATE: February 10, 2014
FROM: Thomas R. Beaver, M.D.
TO: Case File 2014-00432
SUBJECT: AUTOPSY PROTOCOL

Autopsy performed upon the body of Ted Obinna Agu at the Coroner's Bureau, 480 4th Street, Oakland, California, on February 10, 2014, at 9:35 a.m.

AUTOPSY FINDINGS

- I. HYPERTROPHIC CARDIOMYOPATHY (SEE COMMENT):
 - A. PULMONARY EDEMA, ACUTE, BILATERAL, MILD.
- II. POSTMORTEM TOXICOLOGICAL ANALYSIS OF LEG VEIN BLOOD REPORTED NEGATIVE.
- III. POSTMORTEM ANALYSIS OF VITREOUS REPORTS: GLUCOSE = 36 MG/DL, SODIUM = 138 MMOL/L, POTASSIUM = 17.2 MMOL/L, CHLORIDE = 114 MMOL/L.
- IV. HISTORY OF SICKLE CELL HEMOGLOBINOPATHY.

COMMENT: A COMPLETE AUTOPSY WAS PERFORMED INCLUDING POSTMORTEM TOXICOLOGY AND MICROSCOPIC EXAMINATION. THE ONLY SIGNIFICANT PATHOLOGY DEMONSTRATED AT AUTOPSY WAS AN ENLARGED HEART. CARDIAC BIOPSIES OBTAINED AT AUTOPSY DEMONSTRATED A HISTOLOGICAL PATTERN CONSISTENT WITH HYPERTROPHIC CARDIOMYOPATHY. DURING THE MICROSCOPIC EXAMINATION OF TISSUE OBTAINED AT AUTOPSY, ABNORMAL ERYTHROCYTE MORPHOLOGY WAS APPARENT. SOME OF THE RED BLOOD CELLS WITHIN SOME OF THE BLOOD VESSELS HAVE MORPHOLOGY CONSISTENT WITH "SICKLE CELL DISEASE." HOWEVER, THIS COULD BE THE RESULT OF LOW OXYGEN TENSION EITHER ANTEMORTEM OR POSTMORTEM. THEREFORE, BASED ON THE INFORMATION AVAILABLE TO ME AT THIS TIME, IT IS MY OPINION THAT THE CAUSE OF DEATH IS BEST CERTIFIED AS HYPERTROPHIC CARDIOMYOPATHY.

CAUSE OF DEATH: HYPERTROPHIC CARDIOMYOPATHY.
cc: EMS