

**Special Investigations and
Prosecutions Unit**

**Report on the Investigation into
The Death of Dwayne Pritchett**



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EXECUTIVE SUMMARY

On July 8, 2015, Governor Andrew Cuomo signed Executive Order No. 147 (hereinafter the “Executive Order”), appointing the Attorney General as the special prosecutor “to investigate, and if warranted, prosecute certain matters involving the death of an unarmed civilian . . . caused by a law enforcement officer.” The Executive Order also authorizes the Office of the Attorney General (“OAG”) to “investigate and prosecute in such cases where, in her opinion, there is a significant question as to whether the civilian was armed and dangerous at the time of his or her death.” On January 28, 2018, Dwayne Pritchett died following an interaction with members of the New York Police Department (hereinafter “NYPD”). Governor Cuomo subsequently issued Executive Order 147.15, which expressly conferred jurisdiction upon the Attorney General to investigate any potential unlawful acts or omissions by any law enforcement officers relating to Mr. Pritchett’s death and any acts committed by any person “arising from the search” of the apartment that day.¹

The investigation by the OAG included, among other investigative steps:

- (1) Interviews of NYPD officers who responded to the scene and interacted with Dwayne Pritchett;
- (2) Interviews with NYPD officers who responded to the scene but did not interact with Dwayne Pritchett;
- (3) Interviews with NYPD officers and detectives who responded after the incident;
- (4) Interviews with the New York City Office of Chief Medical Examiner (“OCME”) forensic pathologist who performed the autopsy;
- (5) Interviews of FDNY EMS personnel who responded to the scene;
- (6) Review of NYPD and FDNY radio and computerized dispatch communications;
- (7) Review of OCME records including, but not limited to autopsy, microscopy, and toxicology reports;
- (8) Review of Dwayne Pritchett’s medical history;
- (9) Review of forensic reports including but not limited to ballistics and microscopic comparisons;
- (10) Review of NYPD investigative reports;
- (11) Review of NYPD Crime Scene Unit images and reports; and
- (12) Review of NYPD training materials and patrol guidelines regarding use of force.

¹ Executive Order 147.15, attached as Exhibit A, conferred jurisdiction upon the Attorney General to investigate any acts committed by any person “arising from the search, on or about January 28, 2018, of 2767 Reservoir Avenue, Apartment 3F, in Bronx County.”

STATEMENT OF FACTS²

The interaction between Dwayne Pritchett and NYPD officers occurred inside his father's apartment. NYPD officers were dispatched to the home in response to a 911 call that was made by the father, Prentis Pritchett. During this call, Prentis Pritchett reported that his son Dwayne was acting in an irrational fashion. He told the 911 operator that his son was abusing drugs and acting violently. In response to the 911 operator's inquiry, Prentis Pritchett said that his son was not in possession of any weapons.

A radio communication was transmitted, alerting officers to respond to 2767 Reservoir Avenue, Apartment 3F, Bronx County, in regards to a report of an emotionally disturbed person (hereinafter "EDP").³ Multiple uniformed NYPD officers from the 50th Precinct soon responded to the residence.⁴ None of these officers were equipped with body-worn cameras at the time of this incident.⁵

Responding officers observed Dwayne Pritchett on the bedroom floor. Near his right leg, officers observed what appeared to be an ammunition magazine from a semi-automatic handgun. One of the officers yelled, "Mag" and officers charged into the bedroom.

A physical confrontation ensued between Dwayne Pritchett and the officers, resulting in Dwayne Pritchett lying handcuffed on the floor. Dwayne Pritchett was then moved from the bedroom to the living room where he was placed on his side so as to not constrict his breathing. As outlined below, Prentis Pritchett made various statements about what occurred during the confrontation, including at one point, stating that he saw an unknown officer put his knee on Dwayne Pritchett's neck.

EMTs were present in the room after the handcuffing. Emergency Services Unit ("ESU") officers were called to assist in removing Dwayne Pritchett from the apartment. Upon ESU's arrival, all uniformed officers were ordered to leave the room.

Dwayne Pritchett thereafter appeared to stop breathing. CPR was commenced and he was rushed to New York Presbyterian hospital by ambulance where he was pronounced dead in the Emergency Room at 6:49 p.m.

² None of the information referenced in this report was obtained through the use of Grand Jury subpoenas. The OAG issued subpoenas pursuant to New York State Executive Law § 63(8).

³ NYPD Patrol Guide (Procedure No. 216-05) "Mentally Ill or Emotionally Disturbed Persons" section defines an Emotionally Disturbed Person as "a person who appears to be mentally ill, or temporarily deranged, and is conducting himself in a manner which a police officer reasonably believes is likely to result in serious injury to himself or others."

⁴ In addition to these police officers, emergency medical technicians ("EMTs") from both St. Barnabus Hospital, and the FDNY, as well as members of the NYPD's Emergency Service Unit ("ESU") responded to the scene.

⁵ All officers assigned to the NYPD's 50th Precinct were furnished with body-worn cameras in March of 2018, approximately one month after the encounter with Dwayne Pritchett.

On January 29, 2018, Dr. Kristin Roman, a forensic pathologist employed by the OCME, performed an autopsy on the body of Dwayne Pritchett. During the course of the autopsy, Dr. Roman collected and preserved samples of blood and urine for subsequent toxicological forensic analysis.

Dr. Roman concluded that the cause of death was: “sudden death of intoxicated individual (ethanol, phencyclidine, heroin, fentanyl, and cocaine) during physical struggle with police including neck compression.” Dr. Roman identified “hypersensitive cardiovascular disease” and “obstruction of airway by food bolus” as other significant contributors to Dwayne Pritchett’s death. EMS personnel reported some sort of food obstructing Mr. Pritchett’s airway at the time that they were attempting to resuscitate him. The food was removed with the aid of an instrument during intubation. Dr. Roman also noted that Dwayne Pritchett had asthma. Dr. Roman characterized Dwayne Pritchett’s manner of death as “homicide.”

The OAG’s investigation uncovered serious deficiencies in the process of vouchering items in the apartment. It is our understanding that this matter has been investigated by the NYPD’s Internal Affairs Bureau and disciplinary charges are pending.

Conclusions

Based on a review of all the evidence, the OAG finds that it is impossible to conclusively determine three critical factors, preventing us from bringing criminal charges. These factors are summarized briefly below and described in more detail in the report:

1. the specific cause of Dwayne Pritchett’s death;
2. which particular responding NYPD officer(s), if any, caused the injuries to Dwayne Pritchett;
3. whether any of the responding NYPD officers were legally justified in their actions pursuant to New York State Penal Law (hereinafter “PL”) Section 35.30.

Although charges cannot be legally sustained, the OAG nonetheless offers three specific recommendations. Executive Order No. 147 provides that the OAG may offer “any recommendations for systematic reform arising from the investigation.” In accordance with that mandate, the OAG concludes the following:

1. NYPD officers should continue to receive training that emphasizes lawful, proportionate use of force tactics, and, in light of a new law, specifically states that chokeholds and other similar restraints, are unlawful.
2. The Civilian Complaint Review Board should investigate the incident to determine if discipline is appropriate. The OAG will make a referral to the Civilian Complaint Review Board regarding the results of its investigation.
3. Officers must adhere to the procedures set forth in the NYPD Patrol Guide regarding evidence collection and vouchering.

SUMMARY OF INVESTIGATIVE FINDINGS

The description of this incident is divided into five segments: (I) events preceding the interaction between Dwayne Pritchett and law enforcement; (II) law enforcement's interaction with Dwayne Pritchett; (III) events after Dwayne Pritchett was restrained; (IV) issues involving Prentis Pritchett; and (V) the subsequent NYPD investigation.

I. Events Preceding the Interaction between Dwayne Pritchett and Law Enforcement

a. Prentis Pritchett's 911 Call⁶

At approximately 4:50 p.m. on January 28, 2018, Prentis Pritchett called 911 to report that his son, Dwayne Pritchett "had taken drugs," was "going crazy" and had barricaded himself inside of his bedroom. Specifically, Prentis Pritchett reported, "My son, my son. He's on some type of drug he took. He's a psych patient. And he's trying to barge in the room that he's in. Buggin' out...goin'...goin' nuts man."

Prentis Pritchett told the 911 operator that his son had attacked him and that he was frightened. He explained that his son was taking psychiatric medication and requested an ambulance. He also said that his son was frightened. Prentis Pritchett told both the 911 operator and the EMS operator that his son was not armed with any weapons.⁷

b. Prentis Pritchett's Statements to NYPD Investigating Detectives⁸

During the course of an NYPD interview, Prentis Pritchett identified himself as the father of Dwayne Pritchett. He explained that before the incident occurred, he was in the shower and called out for his son to help him shave his head. It was at this time that Dwayne Pritchett started throwing items around the apartment and becoming belligerent. When his son grabbed him by the shirt, Prentis Pritchett interpreted this as an attempt to seek help. Dwayne Pritchett did not say anything audible at this time but was grunting before he went into the bedroom and barricaded himself inside. It was at this time that Prentis Pritchett called 911 for an ambulance for his son.

⁶ Attached as Exhibit B is a transcript of Prentis Pritchett's 911 call.

⁷ During the course of the call, Prentis Pritchett was transferred to an EMS operator.

⁸ On January 28, 2018, after the incident, at approximately 7:45 p.m., Prentis Pritchett was interviewed by NYPD Officer Jermaine Miller of the 50th Precinct.

According to Prentis Pritchett, his son Dwayne had broken up with his girlfriend approximately three weeks earlier and had begun drinking heavily. Prentis Pritchett informed PO Miller that his son used both crack cocaine and heroin and suffered from bi-polar syndrome. According to Prentis Pritchett, his son's condition got worse when he used drugs.

c. “EW’s” Statement to NYPD Detective Kenneth Juart²

“EW” told NYPD Detective Juart that he lived in the apartment at 2767 Reservoir Avenue with his roommate, Prentis Pritchett. Prentis Pritchett’s son, Dwayne, would come to stay in the apartment on occasion but did not officially live there. Dwayne Pritchett had been staying in the apartment for approximately a week because he had been “having trouble with his girlfriend.” According to “EW,” it was not unusual for Dwayne Pritchett to come and stay in the apartment for a few days after breakups with his girlfriend. He would always leave after they worked out their differences and got back together.

Dwayne Pritchett would sleep in his father’s bedroom when he stayed at the apartment. “EW” would sleep in the living room, which served as his bedroom. Dwayne Pritchett would frequently argue with his father. “EW” reported being aware of the fact that Dwayne Pritchett was supposed to be taking psychiatric medications but had been told that he was not taking them.

When asked if he had ever seen Dwayne Pritchett in possession of any kind of weapon, “EW” declined to answer the question.¹⁰ When asked if he had ever seen any kind of drugs or drug paraphernalia inside the apartment, “EW” again declined to answer the question.¹¹ “EW” told Detective Juart that Prentis Pritchett never possessed a gun inside the apartment. When asked if Dwayne Pritchett had ever possessed a gun inside the apartment, “EW” responded, “Well. I know it’s not the father’s.” Asked to clarify why he was so certain about that, “EW” replied, “Cause he never had one any place we lived. Yeah. That’s why I say that.” In response to the detective’s inquiry as to whether he had ever seen Dwayne Pritchett bring a gun into the apartment, “EW” said, “No. I can’t answer that. No. I haven’t seen nothing like that. I know his father. He’s not that kind of a guy. He wouldn’t have a weapon in the house without telling me.” When pressed to speculate as to the owner of the weapon that was ultimately recovered from the apartment, “EW” replied, “Well I can’t answer that. But I say Dwayne. Cause I didn’t

⁹ On January 29, 2018, at approximately 9:50 p.m., “EW” was interviewed by NYPD Detective Kenneth Juart, who was at the time assigned to the NYPD’s Force Investigation Division (“FID”). Attached as Exhibit C is a transcript of “EW”’s audiotaped interview. We have used initials to preserve EW’s privacy.

¹⁰ “EW”’s specific response was “Well. I don’t Uhhh. I don’t have to answer that. ...’cause I don’t have no weapons.” When Detective Juart clarified that he was not asking about whether he was in possession of any weapons in the apartment, but rather whether he had seen any in the apartment, EW responded, “I don’t want to answer that.”

¹¹ “EW”’s specific response was, “Nah. I don’t want to answer that. Cause we not in the court of law. And I don’t want to incriminate myself in saying that I seen or hadn’t seen...I don’t see anything. Yeah. That’s because me and his father has been living in this apartment for over five years.”

bring it in there.” “EW” told Detective Juart that he had never personally seen Dwayne Pritchett in possession of a gun. “EW” acknowledged having seen one bullet inside the apartment, resting on a nightstand in Prentis Pritchett’s bedroom.

According to “EW”, Dwayne Pritchett would always act out and become violent. He would “push up on his father.” Despite the fact that he had never witnessed Dwayne Pritchett punch his father, “EW” reported that he would “push past him and knock him down.” Prentis Pritchett had called the police on two occasions in attempts to get his son help.¹²

“EW” indicated that he was not aware of Dwayne Pritchett’s specific behavior on the day of the incident. When asked where he was at the time that Prentis Pritchett summoned police to the apartment, “EW” replied, “I don’t know. I don’t know.” When asked whether he was inside the apartment at the time of the incident, “EW” answered, “I’m in and out of the house. I don’t be at the...in the house all day.” When asked if there was anything else that he could tell the police, “EW” replied, “No. I just came back to the house to find out the time frame. Cause I be getting the officer’s name. But he told me about after 12. And I just come to check to see if y’all winding up things early.”¹³

2. Law Enforcement’s Interaction with Dwayne Pritchett

In total, ten NYPD officers and a sergeant responded to the apartment.

Six NYPD officers responded to the 911 call, arriving at the apartment at approximately the same time: PO Gregory Goodwin, PO Christopher Camaratta, PO Jake Petrucci, PO Joel Olivencia, PO Rohan Lumsden, and PO Luis Torres. Upon their arrival, Dwayne Pritchett was in the bedroom of the apartment. According to Officer Goodwin, when the door to the bedroom opened, he saw an ammunition magazine (which was later recovered from the room) and yelled “Mag” to alert the other officers. The officers reported that as they attempted to grab Dwayne Pritchett, he reached for PO Goodwin’s gun. The officers sought to restrain Dwayne Pritchett and he struggled, including kicking and spitting at the officers. PO Joel Rodriguez and Sgt. Madeleine Monopoli arrived at the apartment while the officers were attempting to handcuff Dwayne Pritchett. PO Rodriguez assisted the other officers in restraining him.

Prentis Pritchett’s statement, summarized in section IV, diverges from the accounts of the officers in key places. He reported that his son did not resist arrest and cooperated with the officers. He described his son tripping over the threshold while coming out of the bedroom and the officers wrestling him, including one officer who had his knee on the back of Dwayne Pritchett’s neck. The Medical Examiner, whose findings are included below, found evidence consistent with compression of Dwayne Pritchett’s neck. None of the officers reported using

¹² According to “EW”, it had been a week since the previous time that Prentis Pritchett had called police to seek assistance for his son.

¹³ During the course of the investigation, the OAG made numerous attempts to contact “EW” to interview him. “EW” repeatedly communicated to the OAG that he refused to talk or cooperate in any way.

force or seeing anyone else use force on Dwayne Pritchett's neck. As discussed below, despite our efforts to re-interview the officers, we have been unable to determine which officer applied force, where the force was applied, and at what point in the encounter.

Per protocol, Sgt. Monopoli called ESU to come support when she realized that Dwayne Pritchett was resisting arrest. ESU PO Richard Tricario and PO Michael Dennis responded. When they arrived at the apartment, Dwayne Pritchett was restrained and EMS personnel had arrived. EMS personnel started CPR soon after their arrival.

PO Jermaine Miller responded to the apartment as part of the gun investigation. By the time he arrived, EMS staff were already performing CPR on Dwayne Pritchett. PO Miller was not involved in the physical encounter.

a. Police Officers' Statements

Five NYPD officers who initially responded to the apartment and interacted with Dwayne Pritchett agreed to be interviewed with their counsel present. OAG also interviewed a Sergeant and four additional NYPD officers who responded to the scene. All of the summarized interviews of the responding officers preceded the issuance of the autopsy report and also preceded Prentis Pritchett's final statement to the OAG. Despite repeated attempts by our office, the police officers, through counsel, all refused to give additional statements to address the findings of the autopsy report and Prentis Pritchett's description of the incident.

1. Officer Gregory Goodwin

After Prentis Pritchett opened the bedroom door, PO Goodwin saw an ammunition magazine that was laying close to Dwayne Pritchett's right leg. He yelled "Mag" and Officer Lumsden immediately entered the bedroom. Lumsden grabbed Mr. Pritchett's left arm to inhibit Mr. Pritchett's ability to reach for any weapon that may have been within arm's length distance. A scuffle ensued.

During the course of this scuffle, PO Goodwin reported that Dwayne Pritchett fell towards him. He then felt what he described as "a tug on my holster." At this point, PO Goodwin heard his partner, PO Camaratta exclaim, "He's going for your gun." The two officers then proceeded to wrestle Dwayne Pritchett to the ground as PO Goodwin continued to hold onto his right arm.

PO Goodwin described Mr. Pritchett as a "big guy" and could not be certain whether they used one or two sets of handcuffs in securing his hands. He stated that PO Rodriguez assisted them during the handcuffing process.

2. Officer Christopher Camaratta

After the bedroom door was opened by Prentis Pritchett, PO Camaratta heard his partner, PO Goodwin, scream “Magazine.” He immediately observed Goodwin and PO Lumsden “grab for” Dwayne Pritchett. At this point, PO Camaratta reported that “the son fell forward and grabbed for my partner’s weapon” and that Dwayne Pritchett “was forcibly taken to the ground with the assistance of Officers Petrucci and Rodriguez.” According to PO Camaratta, Dwayne Pritchett “continued to spit and kick at us as we attempted to put handcuffs on him.”

Dwayne Pritchett was thereafter placed in a “recovery position ” on his side.¹⁴ A mask was placed on his face to prevent him from further spitting at the officers.

3. Officer Jake Petrucci

PO Petrucci responded to the apartment as a back-up unit along with his partner, PO Olivencia. Officer Petrucci indicated that he and his partner arrived at the scene almost simultaneously with the other uniformed responding officers. After Prentis Pritchett opened the slightly ajar bedroom door, he informed his son that the police were there. With the door now fully open, PO Petrucci was able to see a perspiring Dwayne Pritchett sitting up against a bed.

At this point “the officers attempted to assist the son up from the ground and the son moved towards Officer Goodwin.” PO Petrucci observed Dwayne Pritchett “go for Officer Goodwin’s weapon.”

PO Petrucci immediately removed his handcuffs and placed one handcuff onto Mr. Pritchett’s left wrist. He could not, however, place the second cuff on the right wrist because there was some sort of cast or bandage that was interfering with his ability to do so. PO Rodriguez assisted in trying to get Mr. Pritchett’s right wrist handcuffed. “Officers Lumsden, Camaratta, and Goodwin all struggled” with Dwayne Pritchett.

PO Petrucci said that he had a hold of Dwayne Pritchett’s left hand “which was on Officer Goodwin’s gun.” He “continually yanked at it in efforts to gain control and remove it from Officer Goodwin’s weapon.” Dwayne Pritchett was still fighting; at this point the “struggle moved to the ground.”

After Dwayne Pritchett was handcuffed, he was immediately placed in the “comfort position to assist in his breathing.” PO Petrucci felt light headed as a result of smoke that was in the room and left to get some fresh air. While he was outside of the apartment, PO Rodriguez asked him to come back with some Narcan.¹⁵ Upon returning to the apartment, PO Petrucci observed EMS and ESU personnel now inside. Because the apartment was extremely small, he

¹⁴ <https://www.nhs.uk/conditions/first-aid/recovery-position/>

¹⁵ <https://www.drugs.com/pro/narcan.html>

left the apartment again. After leaving for the second time, he observed PO Rodriguez requesting an AED, or defibrillator.¹⁶

4. Officer Rohan Lumsden

PO Lumsden responded to the apartment as a back-up unit along with his partner, Luis Torres.¹⁷ They arrived at the location simultaneously with other responding units. After Prentis Pritchett opened the bedroom door, he stuck his head inside. PO Lumsden was concerned that Dwayne Pritchett was “going to close the door on the father’s head.” Officers ordered Prentis Pritchett to step back for his own safety. They attempted to persuade Dwayne Pritchett to open the bedroom door. After their third attempt to persuade him to open the door, Dwayne Pritchett complied.

PO Lumsden observed Dwayne Pritchett sweating profusely. Although they wanted to wait and summon EMS before going into the bedroom, they “observed a magazine from a weapon along with ammunition lying on the floor.” Upon attempting to assist him onto his feet, Dwayne Pritchett “lunged at Officer Goodwin and grabbed for his gun.” PO Lumsden said that “the handcuffing procedure was extremely difficult because the son had a cast and bandages on one hand.” A struggle ensued.

After successfully securing the handcuffs on Dwayne Pritchett, “we placed [him] in the recovery position.” EMS was reportedly at the scene at the time that Dwayne Pritchett was placed in this position. At some point after this happened, he “became unresponsive.”

5. Officer Joel Olivencia

On January 28, 2018, PO Olivencia was working with his steady partner of three months, PO Jake Petrucci. At approximately 4:52 p.m., a radio report of an EDP was broadcast over the air. Despite the fact that this job was assigned to another sector, POs Olivencia and Petrucci decided to back up responding units, and went to 2767 Reservoir Avenue in Bronx County. PO Olivencia was familiar with this address, having responded once before for a previous EDP call. He remembered Dwayne Pritchett was very uncooperative at that time, while acting out in the apartment’s bedroom.¹⁸

POs Olivencia and Petrucci arrived at the location at virtually the same time as other responding units did. They walked up to the third floor of the building and noticed two men (later identified as Prentis Pritchett and “EW”) inside the apartment. The apartment was

¹⁶ An Automated External Defibrillator (“AED”) is a portable device that checks heart rhythms and, if warranted, sends an electric shock (i.e. defibrillation) to the heart to try to restore a normal rhythm. The AED analyzes a heart rhythm and tells the operator whether a shock will be effective to administer or not.
<https://www.redcross.org/take-a-class/aed/using-an-aed/what-is-aed>

¹⁷ OAG was unable to interview PO Torres, who was on military leave.

¹⁸ During this previous incident, Officer Olivencia had to call a “10-85” (officer needs assistance) to secure help in bringing Dwayne Pritchett under control. ESU officers responded to this call and ultimately had to place him in a protective blanket before they could transport him to the hospital.

extremely hot and smoky inside. The stove and oven appeared to be on. PO Olivencia asked “EW” to open the windows to allow some fresh air in but “EW” did not do so.

Prentis Pritchett stated that his son Dwayne Pritchett was inside the bedroom and walked with the officers to his closed bedroom door. When Prentis Pritchett opened the door slightly, officers requested him to step back for safety reasons. One of the officers attempted to persuade Dwayne Pritchett to open the door. When the door was eventually opened, PO Olivencia could see Dwayne Pritchett’s feet. As the officers entered the bedroom, one of them yelled, “*Mag.*” Dwayne Pritchett was standing up. He was sweating profusely and appeared to be disoriented. The room smelled “like drugs.” Dwayne Pritchett suddenly lunged for PO Goodwin’s gun. At the time that he did so, PO Olivencia was standing behind Dwayne Pritchett and PO Goodwin was positioned on his side. Dwayne Pritchett began to resist officers’ attempts to handcuff him. The task of fastening handcuffs on Dwayne Pritchett was made more difficult because he had a cast on one of his arms. As a result of this cast, officers could not secure the second handcuff.

PO Olivencia observed a magazine on the ground when he entered the bedroom. It appeared to be loaded with bullets. In addition to the magazine, there was also a single round on the bedroom floor. Officers continued to struggle with Dwayne Pritchett and were eventually successful in securing the second handcuff.

After Dwayne Pritchett was handcuffed, he was placed in the recovery position. He kicked and spat at the officers. PO Olivencia secured Dwayne Pritchett’s feet in efforts to prevent him from continuing to kick. Sgt. Monopoli and EMS personnel were present in the apartment at this time.

At some point, PO Olivencia noticed that Dwayne Pritchett stopped kicking. PO Rodriguez then checked for a pulse. ESU officers were present at the scene when Dwayne Pritchett became unresponsive. ESU requested all responding officers to leave the area because of the confined space. EMS immediately started administering life saving measures.

6. Officer Joel Rodriguez

PO Rodriguez said that he arrived at the scene along with Sergeant Monopoli. They arrived within minutes of the radio transmission. Upon entering the apartment, he observed the bedroom door to be open and PO Rodriguez could see two officers struggling with Dwayne Pritchett on the ground. It appeared to him that they were attempting to handcuff Dwayne Pritchett but were having difficulty doing that. He intervened and started helping the two officers who were trying to get him handcuffed. PO Rodriguez indicated that it was extremely difficult to handcuff him because he had “a cast, or a bandage, on one of his hands.” PO Rodriguez reported that while there was one handcuff already fastened to one of Dwayne Pritchett’s hands, his other arm was still free. He eventually managed to attach his cuffs to the one set of handcuffs that were already fastened to the one hand. According to PO Rodriguez, Dwayne Pritchett was “taken to the ground and placed in the recovery position” during this process. Once on the ground, PO Rodriguez knelt next to Dwayne Pritchett and “urged him to stop resisting and fighting.” In response, Dwayne Pritchett spat on PO Rodriguez’s forehead. PO Rodriguez

indicated that he continued to monitor Dwayne Pritchett by checking his pulse and waving his hands over his face.

Within approximately a minute after successfully applying the handcuffs on Dwayne Pritchett, “became unresponsive and stopped moving.” EMS immediately checked for a pulse and initiated life saving measures. PO Rodriguez stood up from his position at this time and allowed EMS to tend to Dwayne Pritchett.

7. Sgt. Madeleine Monopoli

On January 28, 2018, Sgt. Monopoli was working with PO Rodriguez. At approximately 4:59 p.m., they received a call about an EDP at 2767 Reservoir Avenue in Bronx County. Because she was the patrol supervisor, she was required to respond to the scene.¹⁹

Upon arrival, Sgt. Monopoli observed POs Goodwin, Camaratta, Petrucci, Lumsden, and Olivencia present at the scene. EMS personnel were present as well. She observed a man she later found out was Dwayne Pritchett laying on his left side on the floor. He was kicking his legs and spitting at the officers. PO Goodwin told Sgt. Monopoli that Dwayne Pritchett had previously attempted to get his gun. PO Lumsden told her that there was a clip²⁰ on the floor by the bedroom door.

Sgt. Monopoli spoke to Prentis Pritchett, who told her that his son had been taking drugs in the apartment for the past three days. He explained that Dwayne Pritchett had become violent with him earlier that day. When he attempted to get into his bedroom, Dwayne Pritchett closed the door on his head. Sgt. Monopoli looked into the bedroom and noticed smoke. She described it as “smelling like a chemical.” In addition to the smoke, Sgt. Monopoli observed drugs all over the room. There were pills and white and black substances that were packaged. Upon inspecting the apartment’s kitchen area, Sgt. Monopoli noted the presence of additional drugs and baggies.

When Dwayne Pritchett refused to cooperate with the officers, Sgt. Monopoli requested ESU to respond to the scene.²¹ She then went downstairs to meet them with the intention of advising them what was going on upon their arrival. When she returned upstairs, EMS was performing CPR on Dwayne Pritchett. ESU was assisting.

¹⁹ NYPD Patrol Guide (Procedure No: 216-05) “Mentally Ill or Emotionally disturbed Persons” specifically mandates that if an Emotionally Disturbed Person is violent or armed, “no attempt can be made to take him/her into custody without the specific direction of a supervisor unless there is an immediate threat of physical harm.”

²⁰ A common colloquialism for a magazine that holds ammunition.

²¹ NYPD Patrol Guide (Procedure No. 216-05) “Mentally Ill or Emotionally Disturbed Persons” section specifically mandates that an ESU supervisor report to and confer with the ranking patrol supervisor on the scene in cases involving violent emotionally disturbed people. Their responsibility is to ensure that there is enough personnel and necessary equipment to address the situation, specifically to devise plans and tactics.

After EMS removed Dwayne Pritchett to the hospital, Sgt. Monopoli stayed and secured the scene because there was a gun and apparent narcotics inside of the apartment. While she was there, she had occasion to speak to Prentis Pritchett's roommate ("EW"). "EW" told her that he lived in the apartment and that Dwayne Pritchett was acting up. Prentis Pritchett told his son to stop and that he had to go. When Sgt. Monopoli asked about the gun that was inside the bedroom, "EW" stated that it was not his.

8. Officer Jermaine Miller

On January 28, 2018, PO Miller was assigned to the 50th Precinct's Detective Squad. During the course of his tour, he received a notification from patrol officers about a "gun enhancement" at an apartment located at 2767 Reservoir Avenue.²²

Upon arrival, officers directed PO Miller to the third floor of the building. One of these officers told him that the man who lived there (later identified as Dwayne Pritchett) was in cardiac arrest. After entering the apartment, PO Miller observed EMS and ESU personnel conducting lifesaving measures on Dwayne Pritchett as he lay on his back. He then left the apartment because it was too crowded inside.

PO Miller immediately contacted the Detective Squad to convey both his observations and Dwayne Pritchett's condition. Dwayne Pritchett was later removed from the building via a stretcher and placed into an ambulance.

While still at the scene, PO Miller received a phone call telling him that Dwayne Pritchett had died at the hospital. He went back upstairs to the apartment. He noted that the bedroom area was cluttered. A firearm was halfway sticking out between the mattress and the bed, there was a bullet round and a magazine on the floor. In addition to the magazine and the single round, PO Miller saw what appeared to be narcotics on the floor and the bed. There was drug paraphernalia everywhere.

PO Miller observed a bag filled with a "substantial amount of possible marijuana" on the kitchen table.²³

FID detectives, supervisors, and the Commanding Officer arrived at the scene. PO Miller provided the lead FID case detective, Kenneth Juart, with his contact information. He also advised Detective Juart about everything he had observed inside the apartment.

There were two civilians (later identified as Prentis Pritchett and "EW") inside the apartment. When PO Miller asked Prentis Pritchett why he had called the police, Prentis Pritchett answered that after he had asked for his son's help in the bathroom, Dwayne Pritchett had "a confused look about him" and that he "had been acting out." He explained that his son

²²In a "gun enhancement" investigation, Officer Miller's responsibilities were to photograph a recovered firearm and conduct any necessary interviews with regards to the weapon.

²³ Officer Miller described the contents of the bag as "possible" marijuana because, based on his experience, while it looked like marijuana, it did not have a distinct strong odor.

had been drinking and may also have been using crack. Prentis Pritchett also mentioned that something may have happened between Dwayne Pritchett and his girlfriend.

PO Miller returned to the 50th Precinct and completed his paperwork regarding this incident.

9. Detective Richard Tricario

On January 28, 2018, ESU Detective Tricario was working with ESU PO Michael Dennis when the 50th Precinct Sergeant dispatched them to 2767 Reservoir Avenue.

Upon arrival at the scene, EMS personnel were already present. Detective Tricario and PO Dennis were met outside by Sgt. Monopoli who informed them that a man (later identified as Dwayne Pritchett) had reached for one of the officers' guns. She explained that Dwayne Pritchett was currently in custody.

After walking up to the third floor, Detective Tricario observed Dwayne Pritchett inside the apartment's living room. He was laying on his left side and was rear-cuffed. EMS personnel informed him that Dwayne Pritchett had just been fighting but was now not moving. Dwayne Pritchett did not appear to be breathing. EMS checked for a pulse and immediately began conducting CPR. EMS was doing chest compressions as Detective Tricario helped with the ventilator bag. At some point, the handcuffs were removed.

EMS personnel called for another unit to respond to the location. When the second EMS unit arrived, Detective Tricario stepped aside and assisted them in carrying Dwayne Pritchett down the stairs. One of the members of the second EMS unit mentioned that he was having some difficulty with the patient's airway passage.

Detective Tricario did not observe any apparent injuries to Dwayne Pritchett's body. He may, however, have seen an old scar on his chest.

10. Sgt. Michael Dennis

On January 28, 2018, then-PO Dennis was assigned to ESU and was partnered with Detective Tricario.²⁴ They received a request over the radio to respond to 2767 Reservoir Avenue to restrain an EDP.

Upon arrival, they were met outside by Sgt. Monopoli who did not provide them with any information. After making their way up the stairs to the third floor, PO Dennis and Detective Tricario entered the apartment. They observed a man (later identified as Dwayne Pritchett) lying on the floor. He was rear-handcuffed and was surrounded by two EMTs and a number of uniformed police officers. PO Dennis looked at Dwayne Pritchett and suspected that something was wrong. He asked the EMT if he was okay. The EMT checked Dwayne Pritchett and

²⁴ Officer Dennis was later promoted to the rank of Sergeant.

determined that he was not breathing. The EMT handed Detective Tricario a valve mask for CPR.²⁵ While the EMT conducted chest compressions, Detective Tricario worked the mask for breaths. Officer Dennis did not participate in the CPR process.

Dwayne Pritchett appeared to be unconscious. PO Dennis recalled that at some point, someone asked for a cuff key. He did not observe any visible injuries to Dwayne Pritchett's body.

After helping carry Dwayne Pritchett down the stairs and to the ambulance, PO Dennis and Detective Tricario returned to the ESU base.

While he was inside the apartment, PO Dennis observed ammunition in a bedroom, but did not see any narcotics. He recalled seeing a firearm but was not certain about its specific location. PO Dennis remembered someone saying that Dwayne Pritchett had grabbed an officer's gun. At no time did he hear Dwayne Pritchett say anything about responding officers having used excessive force against his son.

3. Events After Dwayne Pritchett Was Restrained

a. EMTs' and Paramedics' Statements

Eight EMTs and Paramedics responded to the incident. When the first EMTs, Travis Mirchini and Miguel Vargas, arrived, Dwayne Pritchett was lying on his back, rear-cuffed, and still breathing. While they were there, his breathing slowed and he became unresponsive. The EMTs asked the officers to remove his handcuffs and they started CPR. While performing CPR, Dwayne Pritchett went into cardiac arrest. The remaining paramedics and EMTs arrived after Dwayne Pritchett was already receiving CPR. Multiple EMT personnel and ESU officers assisted in CPR, including rescue breathing, intubation, cardiac monitoring, chest compressions, and the insertion of an IV. While intubating Dwayne Pritchett, Paramedic Zalumbide discovered a soft substance in Dwayne Pritchett's throat and removed it.

EMTs removed Dwayne Pritchett from the building and continued CPR until they arrived at the hospital. Emergency room personnel employed lifesaving procedures for approximately thirty to forty-five minutes but were unable to resuscitate him.

1. EMT Travis Mirchini

On January 28, 2018, at approximately 5:02 p.m., EMT Mirchini was working with EMT Miguel Vargas when they were dispatched to a call of an EDP at 2767 Reservoir Avenue in Bronx County. Upon arriving at the building, NYPD officers were already present. EMTs Mirchini and Vargas climbed upstairs and observed a man (later identified as Dwayne Pritchett)

²⁵ https://en.wikipedia.org/wiki/Bag_valve_mask

rear-cuffed and laying on his back. In addition to a number of NYPD officers, the man's father (later identified as Prentis Pritchett) and a female were present in the apartment.²⁶

Prentis Pritchett explained that his son had been in the hospital the day before and had a bandage on his wrist. He said that his son had had psychiatric treatment in the past and had a history of drug use.

EMT Mirchini was made aware of the fact that Dwayne Pritchett was under arrest for drug paraphernalia found inside the apartment's bedroom. He was also informed that Dwayne Pritchett had fought with responding officers and had attempted to grab one of their guns.

EMT Mirchini was also informed that because Dwayne Pritchett had not cooperated with medical personnel's efforts to treat him, officers summoned ESU to respond.²⁷ While waiting for ESU, Dwayne Pritchett's breathing was visibly slowing. After EMT Mirchini observed his chest rise, he took steps to assess his condition. An EMT then made the decision to start CPR.²⁸

EMT Mirchini asked officers to remove handcuffs from Dwayne Pritchett's wrists. ESU representatives arrived when CPR was begun. They immediately summoned Advanced Life Support (hereinafter "ALS").²⁹ EMT Mirchini cut off Dwayne Pritchett's shirt. He did not observe any visible injuries to his body. ESU assisted in administering ventilation as he continued to employ chest impressions. EMT Vargas secured the AED at this time and applied it to Dwayne Pritchett. The AED indicated three instances where a shock would be ineffective. ALS arrived at the scene and intubated Dwayne Pritchett. He was then carried down the staircase on a "scoop"³⁰ and transported to the hospital. EMT Vargas drove the ALS ambulance to the hospital.

2. EMT Miguel Vargas

On January 28, 2018, EMT Vargas and his partner EMT Travis Mirchini were dispatched to an EDP call at 2767 Reservoir Avenue on the third floor in Bronx County. When he arrived, he saw a handcuffed man (later identified as Dwayne Pritchett) lying on the floor of the living room on his right side. Dwayne Pritchett was breathing and moving at this time.

²⁶ The investigation did not discover the identity of this person.

²⁷ https://en.wikipedia.org/wiki/New_York_City_Police_Department_Emergency_Service_Unit

²⁸ <https://www.mayoclinic.org/first-aid/first-aid-cpr/basics/art-20056600>

²⁹ https://en.wikipedia.org/wiki/Advanced_life_support

³⁰ A board with straps, used as a stretcher.

EMT Vargas asked officers at the scene what had happened. He was informed that Dwayne Pritchett had locked himself in a bedroom and was combative. Officers did not elaborate about what that meant.

When EMT Vargas attempted to pick Dwayne Pritchett up, he was grunting, shrugging him off, and slightly combative. In response to this behavior, the Sergeant at the scene called for ESU. When ESU arrived, EMT Vargas left the apartment to secure a stair chair that was located in the hallway.³¹ When he returned to the apartment, his partner EMT Mirchini was administering chest compressions to Dwayne Pritchett. In response to EMT Vargas' inquiry as to what happened, EMT Mirchini informed him that Dwayne Pritchett had no pulse.

EMT Vargas did not notice any physical trauma to Dwayne Pritchett's body. The police officers at the scene mentioned something about a gun being the reason why he was handcuffed. EMT Vargas reported seeing no apparent narcotics in the apartment. He noted observing a man who was present and just stood by and watched as this all happened.

3. EMT Lt. Jennifer Millado-Marin

On January 28, EMT Lt. Millado-Marin was working with EMT Lt. Daniel Burgos when they were dispatched to a location that was a few houses away from where they were. EMT Lt. Millado-Marin could see NYPD and FDNY units up the street as they made their way to the location. Upon arrival, both Lt. Millado-Marin and Lt. Burgos climbed the stairs to the apartment and observed a man (later identified as Dwayne Pritchett) lying on the floor. ESU was performing CPR. BLS personnel³² stated that Dwayne Pritchett was struggling with, and had had a verbal altercation with, responding police officers. BLS also explained that Dwayne Pritchett's father had informed them that he had to call 911 because his son had been using drugs and was getting violent.

EMT Lt. Millado-Marin did not see NYPD officers restrain Dwayne Pritchett but did hear some of them asking for his handcuffs to be removed.

Dwayne Pritchett became unresponsive while BLS was present. He had a blocked airway passage and McGill forceps were used to remove the blockage from his throat.³³ Despite the fact that the airway was cleared, Dwayne Pritchett still needed to be ventilated.

³¹ <https://medical-dictionary.thefreedictionary.com/stair+chair>

³² Basic Life Support from St. Barnabus Hospital.

³³ <https://aam.ucsf.edu/article/magill-forceps>

Although EMT Lt. Millado-Marin heard someone saying something about a gun, she did not see any firearm or narcotics inside of the apartment. She noted that the interior of the apartment smelled as if someone had left something on the radiator.

Dwayne Pritchett was placed on a board equipped with straps that were approximately two to three inches wide, so he could be removed from the building. These straps were fastened around his legs, hips, and chest.

4. EMT Lt. Daniel Burgos

On January 28, 2018, EMT Lt. Burgos was working with EMT Lt. Jennifer Millado-Marin when they were dispatched to an apartment located at 2767 Reservoir Avenue in Bronx County. The primary unit at the scene was BLS. ALS arrived after BLS did. By the time Lts. Burgos and Millado-Marin had made their way to the apartment, there was already a heavy police presence inside. ALS and NYPD representatives were administering CPR to a man (later identified as Dwayne Pritchett) as he lay on the ground. Dwayne Pritchett had no pulse at this time and did not appear to be breathing. EMT Lt. Burgos asked an NYPD officer to remove handcuffs from Dwayne Pritchett's wrists so that they could further work on him. Dwayne Pritchett was then removed to the hospital.

EMT Lt. Burgos did not see any apparent trauma to Dwayne Pritchett's body. He remained in the living room area and never entered any other room in the apartment.

5. Paramedic Diego Zalumbide

On January 28, 2018, Paramedic Zalumbide was working with paramedic Alex Acevedo. At approximately 5:22 p.m., they received a call for a cardiac arrest at 2767 Reservoir Avenue in Bronx County. When they arrived at the scene, BLS and members of the NYPD were already present. Upon walking into the apartment, a man (later identified as Dwayne Pritchett) was laying on the floor. The BLS unit was performing CPR on him while an NYPD officer was assisting by manning the bag.³⁴ Neither Paramedic Zalumbide nor his partner spoke to any civilians at the location.

Paramedic Zalumbide was informed by the BLS unit that Dwayne Pritchett was in cardiac arrest. When he opened Dwayne Pritchett's mouth to intubate him, Paramedic Zalumbide noticed an obstruction in his airway and used McGill forceps to remove a brown soft substance that appeared to be causing this obstruction. While Paramedic Zalumbide was able to remove the substance, it took two tries to extract it as it was mushy, and lodged in the back of Dwayne Pritchett's tongue by his trachea.

³⁴ Administering oxygen.

Paramedic Zalumbide remembered someone saying that Dwayne Pritchett had been treated at St. Barnabus Hospital for a fractured arm and for being an EDP. He also heard that Dwayne Pritchett had peeled the cast that was placed on his arm off by himself.

Paramedic Zalumbide did not see any injuries to the inside of Dwayne Pritchett's throat. He checked his eyes and noted that both pupils were fixed. He did not observe any petechiae³⁵ in the eyes when he examined them at 5:31 p.m.

Dwayne Pritchett was transported to the hospital because his capnography remained high.³⁶ This indicated that he had not been unresponsive for a long time and there was a possibility that he could be resuscitated. Dwayne Pritchett was removed from the building with a scoop.

6. Paramedic Alex Acevedo

On January 28, 2018, Paramedic Acevedo was working with his partner, Paramedic Diego Zalumbide when they received a call for a cardiac arrest at 2767 Reservoir Avenue in Bronx County. It took approximately five minutes for Paramedics Acevedo and Zalumbide to arrive at the scene.

Upon arriving at the apartment, NYPD personnel directed them to the second floor where they observed a man (later identified as Dwayne Pritchett) rear cuffed and face up in the living room. Paramedic Acevedo noticed that the apartment smelled like "fireworks." Paramedic Zalumbide asked officers to remove the handcuffs and they did so.

Because BLS preceded their arrival at the scene, both Paramedics Acevedo and Zalumbide assisted them while they administered CPR. Steps were taken to initiate rescue breathing, intubation, cardiac monitoring, and the insertion of an IV. BLS personnel informed Paramedics Acevedo and Zalumbide that Dwayne Pritchett's father (later identified as Prentis Pritchett) had made statements before their arrival indicating that his son had been in the bedroom acting up and may have taken drugs.

Paramedic Acevedo may have seen a gun in the apartment but was not certain. At a certain point, Paramedic Acevedo went to get equipment. Upon his return, Dwayne Pritchett was in cardiac arrest and they called for assistance. Dwayne Pritchett was not responsive at the scene, and Paramedics Acevedo and Zalumbide transported him to the hospital. It took them approximately five minutes to arrive there.

³⁵ <https://www.mayoclinic.org/symptoms/petechiae/basics/definition/sym-20050724>

³⁶ <https://en.wikipedia.org/wiki/Capnography>

7. Paramedic Justin O'Grady

On January 28, 2018, Paramedic O'Grady was working with his partner, paramedic Allison Shaughnessy, when he heard a BLS unit over the radio request assistance with a patient in cardiac arrest at 2767 Reservoir Avenue in Bronx County. Upon arriving at the location, Paramedic O'Grady walked up to the third floor and observed BLS and ESU personnel administering CPR on a man (later identified as Dwayne Pritchett) as he lay on the apartment's living room floor.

The BLS unit informed Paramedic O'Grady that Dwayne Pritchett's father (later identified as Prentis Pritchett) called 911 because his son was acting erratically. Dwayne Pritchett had reportedly barricaded himself in his room and was potentially under the influence of drugs. NYPD officers had to physically remove Dwayne Pritchett from the bedroom. Paramedic O'Grady was also told that after officers removed Dwayne Pritchett from the bedroom and placed him on the floor, he was spitting, kicking his feet, yelling, and twisting his body around. It was at this time that he went into cardiac arrest. Paramedic O'Grady also heard something about a gun being inside the bedroom.

There was a man in the apartment who Paramedic O'Grady believed to be Prentis Pritchett.

Paramedic O'Grady was told that Dwayne Pritchett's airway had been obstructed and that whatever was causing this was removed using McGill forceps. He was told that the substance looked like mush. There were no apparent injuries to Dwayne Pritchett's body.

Paramedic O'Grady was administering the IV into Dwayne Pritchett's right arm while ESU personnel were doing compressions and BLS was manning the bag. The handcuffs, which were fastened from the rear, were removed prior to the commencement of CPR. Dwayne Pritchett was moist, but not sweating profusely.

8. Paramedic Allison Shaughnessy

On January 28, 2018, Paramedic Shaughnessy was working with her partner, paramedic Justin O'Grady, when she heard the BLS ambulance unit come over the radio reporting a cardiac arrest. Paramedics Shaughnessy and O'Grady immediately responded to 2767 Reservoir Avenue.

Upon arrival in the apartment, at least five or six NYPD officers were already present. Paramedic Shaughnessy had no conversation with these officers. She observed a man (later identified as Dwayne Pritchett) lying on the living room floor. Someone asked for the removal of handcuffs from his wrists and the ALS unit was performing CPR. Paramedics Shaughnessy and O'Grady assisted the ALS team with the IV and ultimately with carrying the patient down the stairs.

Paramedic Shaughnessy did not observe any apparent injuries on Dwayne Pritchett's body.

b. Attending Emergency Room Physician Dr. Rishi Goyal

Dr. Rishi Goyal, an emergency medicine specialist, was the attending Emergency Room physician at the Allen Pavilion Hospital (New York-Presbyterian) on the night that Dwayne Pritchett was brought in via ambulance. Despite the fact that Dwayne Pritchett had no heart rhythm, EMS was actively performing CPR.

Emergency room personnel continued to employ lifesaving procedures for approximately thirty to forty-five minutes in efforts to resuscitate him.³⁷

After Dwayne Pritchett was pronounced dead, Dr. Goyal conducted a visual inspection of his body. He observed no noticeable signs of trauma other than a bruise to the right upper shoulder. There were no bruises to any other part of the body, including the back of his head and throat area. Dr. Goyal explained that despite the fact that one may not be able to see bruises initially, they can take time to develop and be seen externally. When Dr. Goyal examined Dwayne Pritchett's eyes, he did not see any evidence of petechiae. When asked about the Medical Examiner's observations of the presence of petechiae at the time of autopsy, Dr. Goyal opined that it is not unusual for petechiae to appear after death. He added that there is no real rule with respect to how long it would take for them to form. Although no x-rays were taken, Dr. Goyal did not note any fractures.

Dr. Goyal was informed that drugs were found inside the apartment and that it was likely that Dwayne Pritchett was using them.

There were three NYPD officers present during the course of his treatment of Dwayne Pritchett. One officer in particular struck Dr. Goyal as the most involved. This officer was white, tall, and visibly upset. He kept asking if there was any trauma to the body. He asked, "What do you think happened? How did he die?" Dr. Goyal did not note any of these officers' names. He indicated that he would not be able to identify them if asked to do so.

NYPD officers and EMTs told Dr. Goyal that Dwayne Pritchett was either taken, or went, to the ground before he stopped breathing. Dr. Goyal was not advised about any previous obstruction to the throat or the removal of any substance from the airway.

³⁷ Despite efforts, Dr. Goyal explained that Dwayne Pritchett was already dead upon arrival in the emergency room and that there was virtually no chance that he could be revived.

4. Prentis Pritchett

a. Criminal Charges Filed Against Prentis Pritchett

During the search of Prentis Pritchett's apartment, the NYPD found narcotics and a .40 caliber Beretta handgun.³⁸ As a result, the NYPD arrested Prentis Pritchett and the Bronx County District Attorney charged Prentis Pritchett with several felonies in connection with the items recovered in his apartment.

On March 5, 2018, Governor Andrew Cuomo issued Executive Order 147.15, which expressly conferred jurisdiction upon the OAG to investigate any potential unlawful acts or omissions by any law enforcement officers relating to Dwayne Pritchett's death. This Executive Order also expressly conferred jurisdiction upon the OAG to investigate any and all unlawful acts committed by any person "arising from the search, on or about January 28, 2018, of 2767 Reservoir Avenue, Apartment 3F, in Bronx County." As a result of this Executive Order, the OAG asserted jurisdiction in the prosecution of Prentis Pritchett.

After the OAG asserted jurisdiction in this matter, we repeatedly requested, through his attorney, that Prentis Pritchett share his observations of the events surrounding the death of his son. On numerous occasions, Prentis Pritchett declined to be interviewed.

On February 14, 2019, Prentis Pritchett withdrew his previously entered plea of not guilty to the Criminal Complaint filed by the Bronx County District Attorney's Office and agreed to plead guilty to one count of disorderly conduct. One of the conditions of this court-approved plea was that he would agree to be interviewed by OAG representatives. As detailed below, this interview was memorialized by a stenographer, and Prentis Pritchett's attorney was present.

b. Prentis Pritchett's Statement on February 14, 2019³⁹

During his interview, Prentis Pritchett stated the following. On January 28, 2018, Prentis Pritchett "jump[ed] into the shower." After leaving the shower, he noticed that his son Dwayne was "acting strange." Because he was confused by this behavior, Prentis Pritchett invited his son into his bedroom so that they could talk.

After entering the bedroom, Dwayne Pritchett grabbed his father by the arm and stated "Daddy. Daddy. Daddy. Daddy, Daddy." When Prentis Pritchett asked him what the matter was, Dwayne Pritchett "began to barricade himself [in the bedroom]". Prentis Pritchett then called 911 for assistance. When asked if he informed the 911 operator that his son was on drugs at this time, Prentis Pritchett indicated that he had no knowledge of this. He said "I knew he had never acted strange like that before that I could ever remember in my life."

³⁸ Later DNA testing revealed that Mr. Prentis Pritchett's DNA was included in a DNA mixture found on the weapon. Dwayne Pritchett's DNA was also present.

³⁹ The transcribed statement of Prentis Pritchett is attached as Exhibit D.

A female Sergeant arrived at the apartment with “two or three other cops.” These officers pushed the bedroom door open and ordered Dwayne Pritchett to “come out.” “Dwayne got right up.” As Dwayne Pritchett was coming out of the room, he stumbled on a wooden board on the floor that separated one room from the other and fell forward into the living room. It was at this point that the police “engulfed him.”

When asked to elaborate about what he meant by “engulfed,” Prentis Pritchett explained that “they grabbed him, man. They had him wrestling down. He wasn’t even trying to do no wrestling or nothing.” Prentis Pritchett indicated that one of the responding police officers had a knee on the back of Dwayne’s neck. When asked which of the officers had his knee on the back of his son’s neck, Prentis Pritchett replied, “I don’t know which one it was. It was about...I recall three, I think three black officers. A couple of white officers was there at that present minute, and then the Sergeant, and then the two detectives came in, big black detective and another detective. I don’t know if he was Spanish.⁴⁰ I don’t know.”

“Dwayne was laying down” at this point. He “was cuffed,” and “they were trying to get a pulse.” Prentis Pritchett stated his son was never resisting arrest in any way. He denied any suggestion that the officers had had any difficulty whatsoever in handcuffing his son. His recollection of the handcuffing process was as follows: “No, they didn’t have no trouble. When they was getting handcuffs on him, the officers were so forceful, he passed out, and they was trying ...the ambulance, they got there. The ambulance was there immediately, and they was trying to get a pulse.”

The police placed Prentis Pritchett and “EW” in an adjacent hallway. Prentis Pritchett described himself as “popping back” to see how Dwayne was doing. He recalled that his son was handcuffed as they were bringing him out of the apartment on a stretcher. According to Prentis Pritchett, Dwayne was “laying face up and his hands were behind him. He was looking back at me and his eyes were rolling up in his head.” He reported his son declaring, “Daddy, daddy, daddy, daddy, daddy,” as he was being escorted down the building stairs. When asked if Dwayne Pritchett was able to speak, Prentis Pritchett replied, “No. He wasn’t able to speak. He just said, “Daddy, daddy, daddy.” He didn’t say nothing else.”

5. Subsequent NYPD Investigation

a. Physical Evidence Collected From the Apartment and the Mistakes Surrounding the Vouchering Process

There were a number of significant and troubling problems with respect to the collection of, and/or vouchering of physical evidence in this case.

- Despite the fact that a significant amount of suspected marijuana was: photographed by the Crime Scene Unit (hereinafter “CSU”), included in a

⁴⁰ The five responding officers who struggled with Dwayne Pritchett identified themselves as follows: three were Caucasian, one was Latino, and one was African-American.

Search warrant application that was prepared by the Bronx County District Attorney's Office, and ultimately collected from the kitchen area of the apartment, a decision was apparently made at the precinct to discard it.

- Witnesses stated that a small amount of what appeared to be rock crack cocaine was recovered from a couch in the living room. Despite the fact that CSU apparently missed this evidence, a member of FID identified it and photographed the plastic bag with his cell phone. No detective ever vouchered this evidence.
- At the time of autopsy, Dr. Roman asked repeatedly for the clothing Dwayne Pritchett was wearing at the time of the incident. She was informed that the clothing was never collected. It later came to light that the clothing was provided to a member of FID and placed in the trunk of an unmarked NYPD police car. The clothing remained in that trunk for approximately four months before it was discovered.⁴¹ The clothing was thereafter transported to the OCME after the OAG requested that this be done.
- Dr. Roman collected a fossilized bullet (that was in Dwayne Pritchett's body before this incident) and provided to a member of FID. This bullet was not submitted to the NYPD Firearms Analysis section for months.

As a result of this conduct, the NYPD's Internal Affairs Bureau ("IAB") initiated an investigation, which the OAG has been informed is still ongoing.

b. FID Investigators' Statements

1. Detective Kenneth Juart

On January 28, 2018, Detective Juart, who was then assigned to FID, was designated the lead detective on this case.⁴² After being notified of a death in custody, he and Sgt. Gabriel Dobles (also then assigned to FID) responded to 2767 Reservoir Avenue in Bronx County. Upon arrival, Dwayne Pritchett's body had already been removed from the apartment, and 50th Precinct officers were safeguarding the scene. Detective Juart conducted a walk-through of the apartment with Officer Jermaine Miller from the 50th Precinct.

When Detective Juart walked into the apartment's bedroom, he observed a firearm under the mattress. He also observed what appeared to be a small amount of marijuana on top of a bible. He observed a live round on a couch, what appeared to be black heroin on the floor, and

⁴¹ The clothing was formally vouchered on April 8, 2018.

⁴² On March 14, 2018, Detective Juart was removed from FID and transferred to NYPD's 90th Precinct Detective Squad.

white powder on the bed. In addition to the white powder that he saw on the bed, Detective Juart noticed a glass bottle which contained a reddish liquid.

Detective Juart reported never seeing any apparent marijuana in the kitchen area because he never entered the kitchen area. Sergeants Dobles, Karen Resko, and Edward Warren processed that part of the apartment.

Detective Juart spoke to “EW,” Prentis Pritchett’s roommate. According to “EW,” Dwayne Pritchett had mental issues and his father had called police numerous times in the past. When asked about the firearm recovered from the bedroom, “EW” denied ownership of it.

Detective Juart did not speak to Prentis Pritchett at the apartment. He returned to the 50th precinct, and FID Detective Michael Carreras, along with a Bronx County Assistant District Attorney, sought a search warrant for the apartment.

After the search warrant was signed, CSU photographed and processed the apartment. Detective Juart entered the bedroom with CSU personnel and watched as they recovered the firearm and magazine. Detective Carreras recovered the suspected drugs from the bedroom.

After leaving the scene, FID detectives returned to the 50th Precinct, where Detective Michael Carreras started the vouchering process.⁴³ While Detective Juart was preparing Prentis Pritchett’s arrest paperwork, Detective Carreras was removing suspected narcotics that were recovered inside the apartment from a bag in another room. As he was removing the drugs, Detective Carreras announced that he “could not find the crack.” Upon hearing this, Detective Juart “yelled at him.” Detective Juart started moving back and forth from the room he was sitting in with Prentis Pritchett to the room occupied by Detective Carreras. Detective Carreras told Detective Juart that the suspected marijuana that was collected from the apartment was in fact not marijuana and threw the contents of the bag into the garbage. Sergeant Edward Warren then walked into the room, picked up the discarded bag from the garbage, and left. The two small bags of alleged crack that were removed from inside of the apartment were never found.

Detective Juart responded to New York–Presbyterian Hospital (Allen Pavilion) in Upper Manhattan along with FID detectives Carreras and Carlos Santos.

The following morning, Detective Juart attended the autopsy at the OCME. Dr. Kristin Roman never asked him any questions about Dwayne Pritchett’s clothing at this time.⁴⁴ She only asked about the clothing at a later date after having learned that food may have been

⁴³ “Vouchering” means to package evidence. At the time that evidence is vouchered, a corresponding number is assigned to the item.

⁴⁴ According to Detective Juart, the issue of collecting Dwayne Pritchett’s clothing was never discussed in his presence at the hospital. The first time that Detective Juart was confronted with the clothing issue was during his department-compelled interview. At that point, he learned that Dwayne Pritchett’s clothing was ultimately discovered four months later in the trunk of an NYPD patrol car.

blocking his throat. During the course of the autopsy, Dr. Roman did mention bruising to Dwayne Pritchett's neck. When Detective Juart inquired as to what may have caused this, she replied, "...if EMS is working on a patient for a long time." Dr. Roman provided Detective Juart with a bullet that was recovered from Dwayne Pritchett's body. This bullet was identified as associated with an old injury and unrelated to the events that occurred the previous day. This bullet, while secured by Detective Juart at this time, remained locked in his desk drawer at FID until it was later vouchered on February 7, 2018.

2. Detective Michael Carreras

On January 28, 2018, Detective Carreras, who was then assigned to FID,⁴⁵ responded to New York Presbyterian Hospital (Allen Pavilion) with Detective Santos to retrieve clothing from a person (later identified as Dwayne Pritchett) who had died in police custody.

Upon arrival, hospital security provided Detective Carreras with a paper bag containing the clothing. This bag was then placed in the trunk of an unmarked NYPD department vehicle and Detectives Carreras and Santos responded to 2767 Reservoir Avenue in Bronx County.

Detectives Carreras and Santos met with Sergeants Edward Warren and Karen Resko. After Sgt. Warren debriefed Detective Carreras about what had happened, he entered the apartment. Detective Carreras looked into a bedroom and saw the butt of a handgun under a mattress. He also saw what appeared to be drugs. When he walked to the kitchen area, Detective Carreras saw a clear bag which contained a substance that appeared to be marijuana. In addition to this bag, Detective Carreras noted a measuring scale and multiple cellular telephones.

While NYPD patrol officers safeguarded the scene, Detective Carreras made his way to the Bronx County District Attorney's Office. There, with the assistance of an Assistant District Attorney, he drafted and eventually obtained a search warrant for 2767 Reservoir Avenue.

After obtaining the search warrant, Detective Carreras returned to the apartment. There, along with members of the CSU, who photographed the apartment, he collected potential evidence. Items in the kitchen area included: a wallet, a cellular telephone, a bag containing suspected marijuana, and a measuring scale. All of these items were placed in a grocery bag. Detective Carreras collected the following items from the bedroom: possible PCP, a crack pipe, and a firearm. Detective Carreras then went to the 50th Precinct with Detective Santos, Sgt. Resko, Sgt. Warren and Detective Juart to formally voucher the collected evidence.

While processing the evidence in the 50th Precinct, Sgt. Warren walked into the room with the bag containing suspected marijuana and said, "Hey Mikey, this isn't fucking weed, it's

⁴⁵ On March 14, 2018, Detective Carreras was removed from FID and transferred to NYPD's 108th Precinct Detective Squad.

oregano, and we're not vouchering it." Detective Carreras responded, "Okay," and continued to voucher the remaining items. He does not remember where the bag that contained the suspected marijuana went.

Detective Carreras did not voucher any of Dwayne Pritchett's clothing because he "completely forgot about them" after they were placed in the trunk of the unmarked police vehicle. He was only made aware of the failure to voucher the clothing during his department-compelled interview at the end of October 2018.

3. Sgt. Edward Warren

On January 28, 2018, Sgt. Warren, who was then assigned to FID,⁴⁶ responded to 2767 Reservoir Avenue in Bronx County along with Sergeants Karen Resko, Gabriel Dobles, and Detectives Carreras, Juart, and Santos.

Upon arrival, Sgt. Warren learned that the decedent (later identified as Dwayne Pritchett) had already been removed from the scene. He spoke to Sgt. Monopoli, who informed him that she and multiple other officers from the 50th Precinct had responded to a 911 call regarding an EDP who had barricaded himself in the bedroom. According to Sgt. Monopoli, when the man opened the bedroom door slightly, one officer observed an ammunition magazine and immediately alerted the others. Dwayne Pritchett was subsequently removed from the bedroom. After struggling with him in the apartment's living room, officers managed to handcuff him. When it became apparent that they would not be able to get him into a chair because of his resistance, Sgt. Monopoli requested ESU to respond to the scene to assist. While Dwayne Pritchett was on the floor in the living room, he suddenly became unresponsive. EMS personnel were present at this time and they initiated life saving measures.

Sgt. Warren saw Prentis Pritchett sitting in a chair inside the apartment but never spoke to him. When he saw "EW," he asked him if he had somewhere to go, and "EW" replied, "yes."

After Sgt. Monopoli mentioned that there was a firearm inside the bedroom, Sgt. Warren looked and saw the gun lodged between two mattresses. He also noticed an ammunition magazine, a bullet, and a bible. In addition to these items, there were two baggies containing white powder, and a vial which contained a brown liquid substance. After observing these items, Sgt. Warren had the apartment safeguarded. A uniformed officer was posted at the front door to ensure that no one could enter or leave the premises until a search warrant could be secured.

While Detective Carreras took steps to apply for a search warrant, Sgt. Warren went to the 50th Precinct to perform administrative work. This included compiling the responding officers' names, and conducting computer work. Sometime later, Sgt. Warren returned to the scene and participated in the execution of the search warrant on the apartment.

⁴⁶ On March 14, 2018, Sgt. Warren was removed from FID and transferred to NYPD's 32nd Precinct Detective Squad.

After CSU processed and photographed the scene, Sgt. Warren entered the living room and observed a crack pipe and two small baggies containing white powder on a small couch. He immediately photographed these baggies with his phone and told Detective Carreras to voucher them. In the kitchen area, there was a measuring scale and a bag which contained apparent marijuana, a cell phone, and a wallet. Sgt. Warren never entered the bedroom during the execution of the search warrant.

Sgt. Warren is now aware that the suspected marijuana was never vouchered. When Detective Juart told him that it was oregano, he smelled it. It appeared to be coarse and brown. Based upon his prior experience investigating narcotics, Sgt. Warren did not believe that the substance was in fact oregano, but made no determination as to whether it should be vouchered. Sgt. Resko was the person who was responsible for the vouchering process. At the time, Sgt. Warren was not aware of the fact that it was not being vouchered, but remembers that it was already in the garbage at the time that he was talking to Detective Juart in the precinct.

The following day, Sgt. Warren learned that the two baggies of suspected cocaine that were recovered from the couch were never vouchered. When he asked Detective Carreras why this was not done, Detective Carreras told him that he did not see the baggies. Despite the fact that the two baggies were never vouchered, the crack pipe found next to them was vouchered.

4. Sgt. Karen Resko

Sgt. Resko had been assigned to FID since approximately one week before Dwayne Pritchett's death. On January 28, 2018, she and Sgt. Warren responded to 2767 Reservoir Avenue in Bronx County in response to a notification of a death in police custody.

After arriving at the apartment, both Sergeants Resko and Warren perused the scene, then went to the 50th Precinct.

At some later point, Sgt. Resko returned to the scene after a search warrant was secured by other members of FID. She did not participate in the execution of the warrant but did hear someone mention that a firearm was discovered in the bedroom area of the apartment. Sgt. Resko never entered the bedroom but peered in quickly to see the gun. She stood to the side and allowed other officers to process the scene.

Aside from the firearm, Sgt. Resko does not recall anyone pointing out any other evidence or contraband at this time. She does not have any recollection of seeing any narcotics or drug paraphernalia inside the apartment and cannot recall seeing any civilians inside of the apartment at the time that the search warrant was being executed.

Once the search of the premises was completed, FID personnel returned to the 50th Precinct to voucher all collected evidence. Detectives Juart, Carreras, and Sgt. Warren were present at this time.

At the time that Sgt. Resko returned downstairs to the vouchering room, Detective Carreras was in the process of vouchering property and evidence that was recovered from the apartment. As he completed his vouchers, he brought them to her for review. After reviewing each of these vouchers, Sgt. Resko signed them.

Sgt. Resko was not aware of any issues or problems surrounding any of these vouchers. It was not until weeks later that she learned that there was a failure to voucher a bag of suspected marijuana that was collected from inside the apartment.

5. Sgt. Gabriel Dobles

On January 28, 2018, FID Sgt. Dobles responded to 2767 Reservoir Avenue in Bronx County with Detective Juart in response to a reported death in police custody.

Upon arriving at the scene, they were directed upstairs and Sergeants Warren, Resko and Detective Carreras were present. Sgt. Dobles was informed by a detective from the 50th precinct squad that NYPD officers had responded to an EDP call and that upon arrival, the man (later identified as Dwayne Pritchett) had a gun. Sgt. Dobles was also informed that after Dwayne Pritchett reached for one of the officers' guns, they wrestled with him and he went into cardiac arrest.

Sgt. Dobles saw Prentis Pritchett in the back of the apartment but had no conversation with him. Prentis Pritchett appeared to be very calm while he was inside the apartment.

There was a firearm in plain view in a room to his right. It was located under a mattress. A single live round was located near an ammunition magazine which he could see resting on a couch. Sgt. Dobles also saw prescription bottles on a dresser. When he entered the kitchen area, Sgt. Dobles saw a bag which contained a green leafy substance on the top of a table.

After a search warrant was secured, CSU entered the apartment to look for and photograph evidence. The firearm was recovered, and Sgt. Dobles assumed that the bag with the green leafy substance was collected as well. He did not see any crack cocaine on the sofa. Sgt. Resko was in charge of the vouchers.

Sgt. Dobles was not aware of the fact that the bag of suspected marijuana was ultimately not vouchered. He was only made aware of the fact that bags of suspected crack cocaine were never vouchered when he was interviewed by representatives of IAB. Sgt. Dobles was also unaware of the fact that Dwayne Pritchett's clothing was not vouchered until four months after his death. The clothing in question was reportedly discovered when FID Detective Devin Long

was changing a flat tire on a department vehicle and found a bag of clothing in the trunk. After Detective Long brought it to his attention, Sgt. Dobles alerted IAB.

c. DNA –Forensic Biology

PO Goodwin’s gun belt was swabbed for the presence of DNA and those swabs were submitted to the OCME Forensic Biology Unit for DNA analysis.

Swabs were also taken from the .40 Caliber Beretta semi-automatic handgun that was recovered from Prentis Pritchett’s bedroom and submitted to the OCME’s Forensic Biology Unit for DNA analysis. These consisted of: a swab taken from the “frame” of the firearm; a swab taken from the “grips” of the firearm; a swab taken from the “slide” of the firearm; and a swab taken from the “trigger and trigger guard” of the firearm.

In addition to this evidence, the OCME’s Forensic Biology Unit was provided with a sample containing Dwayne Pritchett’s DNA that was preserved at the time of autopsy.

OCME criminalists were able to conclude that the swab collected from PO Goodwin’s gun belt contained a mixture of human DNA and that three people contributed to this mixture.

Criminalists also identified the presence of DNA profile mixtures on each of the swabs submitted from the recovered .40 Caliber Beretta handgun.

Using STRmix, a software that was designed to analyze mixed DNA profiles, criminalists were able to conclude that Dwayne Pritchett was a likely contributor to the sample found on Officer Goodwin’s gun belt. While the data suggested support for the proposition that Dwayne Pritchett was included in the mixture, however, forensic analysis also characterized the amount of genetic material associated with him found on the gun belt as “negligible.” Although there was a minute amount of DNA recovered from the gun belt, these results provide some support to the accounts of the officers about Dwayne Pritchett reaching for PO Goodwin’s gun belt.

SUMMARY OF MEDICAL EXAMINER’S FINDINGS⁴⁷

On January 29, 2018, at approximately 9:15 a.m., Dr. Kristin Roman, City Medical Examiner-II, performed an autopsy on the body of Dwayne Pritchett. The autopsy report states that Mr. Pritchett was 48 years old, 5’10” tall, and weighed 213 pounds. Dr. Roman noted numerous internal and external injuries to Dwayne Pritchett’s body. Dr. Roman also preserved samples at the time of autopsy for further forensic analysis, including toxicological analysis, microscopic analysis, neuropathological analysis and forensic anthropological analysis. Dr. Roman also requested a cardiac pathology consultation about Dwayne Pritchett’s heart.

⁴⁷ The Medical Examiner’s report is attached as Exhibit E.

As detailed below, Dr. Roman concluded that Dwayne Pritchett's cause of death was "Sudden death of intoxicated individual (ethanol, phencyclidine, heroin, fentanyl, and cocaine) during physical struggle with police including neck compression." "Cause of death" is a term used to indicate the medical cause of death. It lists the disease(s) or injuries that caused a person's death. A medical examiner does not opine about why a death occurred.

In addition to these stated causes, Dr. Roman reported two "other significant factors" which included: "hypertensive cardiovascular disease, and obstruction of airway by food bolus."⁴⁸

Dr. Roman characterized Dwayne Pritchett's manner of death "homicide." "Manner of death" is a determination of how the injury or disease led to death. Medical examiners can find five potential manners of death: natural, accident, suicide, homicide, and undetermined. Homicide is defined by medical examiners as the act of one human being causing the death of another. In this context, "homicide" is a non-legal term that requires only a volitional act by another person that results in death. Consequently, a homicide may result from accidental, reckless, or negligent acts even if there is no intent to cause harm.

External Examination

In the external examination, Dr. Roman noted two contusions⁴⁹ and one abrasion⁵⁰ to Dwayne Pritchett's torso.⁵¹ Additional injuries included: contusions to the back of his right forearm, front upper left arm, and left elbow and abrasions on his upper left arm and on the back of his left wrist.

Internal Examination

In the internal examination, Dr. Roman noted multiple abrasions on the inner surfaces of Dwayne Pritchett's upper and lower lips. Dr. Roman also noted hemorrhages (bleeding) within the fat located on both the front and the left side of Dwayne Pritchett's neck.⁵² She also documented hemorrhages in the fat overlying the back of the right side of his neck and shoulder,

⁴⁸ While there was no empirical evidence to suggest this at the time of autopsy, Dr. Roman relied upon information provided to her by investigators regarding the fact that Mr. Pritchett's airway was obstructed by some sort of food mass during resuscitation efforts. She considered this information important enough to include it as a significant contributing factor to his death.

⁴⁹ Contusions refer to any collection of blood outside of a blood vessel. <https://www.healthline.com/health/what-is-a-contusion>

⁵⁰ Abrasions essentially refer to scrapes. See www.healthline.com/health/abrasion

⁵¹ <https://www.merriam-webster.com/dictionary/torso>

⁵² Hemorrhages are commonly known as bleeding. <https://www.merriam-webster.com/dictionary/hemorrhage>

as well as in the parenchyma⁵³ of the right and left sternocleidomastoid muscles of Dwayne Pritchett's neck.⁵⁴ Dr. Roman also observed subcutaneous fat hemorrhages on both of Dwayne Pritchett's arms and shoulders,⁵⁵ intramuscular hemorrhages on his right shoulder and elbows. His right biceps muscle was ruptured and had evidence of hemorrhage. Dwayne Pritchett's right radius and ulna were also fractured.⁵⁶ These fractures were accompanied by soft tissue hemorrhage.⁵⁷

After examining Dwayne Pritchett's right lung, Dr. Roman noted a coiled granular thrombus in a small, peripheral vessel of its upper lobe.⁵⁸ A pulmonary thrombus is commonly known as a blood clot in the lung.

Dwayne Pritchett's eyes showed the presence of petechial hemorrhages.⁵⁹ These were more pronounced in his right eye than in his left.

Microscopic Examination

Samples taken at the time of autopsy were submitted for additional microscopic analysis. Based upon microscopic evaluation of tissue taken from Mr. Pritchett's lung, Dr. Roman included "Chronic bronchial asthma" in her list of final diagnoses.⁶⁰

⁵³ Parenchyma is the essential and distinctive tissue of an organ. <https://www.merriam-webster.com/dictionary/parenchyma>

⁵⁴ The sternocleidomastoid muscle is a cervical muscle which allows rotation of the head and flexion of the neck. https://en.wikipedia.org/wiki/Sternocleidomastoid_muscle

⁵⁵ Subcutaneous means under the skin. <https://www.lexico.com/en/definition/subcutaneous>

⁵⁶ The radius and ulna are bones of the forearm. <https://www.getbodysmart.com/upper-limb-bones/radius-ulna>

⁵⁷ Soft tissue connect, support, or surround other structures and organs of the body. https://en.wikipedia.org/wiki/Soft_tissue

⁵⁸ <https://www.umassmed.edu/strokestop/modules/module-1-stroketia/ischemic-stroke/thrombus-or-embolus/>

⁵⁹ <https://www.encyclopedia.com/science/encyclopedias-almanacs-transcripts-and-maps/petechial-hemorrhage>

⁶⁰ Microscopic analysis revealed thickened bronchial basement membranes (including mostly plasma cells and eosinophils), scant bronchia sub epithelial mixed inflammation, and patchy atelectasis. The microscopic examination report also referenced numerous pigmented and non-pigmented alveolar macrophages, and focal interstitial chronic inflammation.

Forensic Anthropology⁶¹

On January 30, 2018, the Forensic Anthropology Unit received distal⁶² portions of Dwayne Pritchett's right radius (wrist) and ulna area (extending from the forearm from the elbow to the wrist). Analysis of these areas showed that Dwayne Pritchett's right radius (wrist) was fractured in two places. The distal aspect of the wrist contained an orthopedic surgical implant that had been placed in the body during a prior surgical proceeding. This fracture was characterized as "antemortem (old)."⁶³ The second fracture was identified by jagged, irregular edges, and did not exhibit any gross evidence of healing. This fracture was characterized as "perimortem (new)"⁶⁴ and "recent, without gross evidence of healing."

Both of the perimortem fractures to the radius and the ulna were described as exhibiting "tension on the medial and posterior surfaces with compression on the lateral and anterior surfaces."⁶⁵ The fractures were decidedly distal, suggesting that the force applied which caused these breaks was administered towards the wrist rather than the shoulder. Dr. Roman stated that both fractures were consistent with officers attempting to place handcuffs on Dwayne Pritchett.

Evaluation of Dwayne Pritchett's Heart

During the autopsy, as noted in more detail below, Dr. Roman observed signs of cardiovascular disease, chronic asthma, and a blood clot in the lung.

⁶¹ Forensic anthropology is the examination of human skeletal remains. <https://fac.utk.edu/what-is-forensic-anthropology-2/>

⁶² Distal means situated a way from the point of attachment or origin or a central point of the body. <https://www.merriam-webster.com/dictionary/distal>

⁶³ Antemortem means preceding death. <https://www.merriam-webster.com/dictionary/antemortem>

⁶⁴ Perimortem means taking place at or around the time of death. <https://www.merriam-webster.com/medical/perimortem>

⁶⁵ According to the examiner, this suggested "a direction of force from lateral and slightly anterior to medial and slightly posterior", or from front to back. Both fractures were found to be consistent with force that pushed the arm into the body from the front.

A subsequent cardiac pathology evaluation of Dwayne Pritchett's heart revealed the following diagnoses: hypertensive cardiovascular disease,⁶⁶ (cardiac hypertrophy)⁶⁷ and myxomatous degeneration of mitral and tricuspid valves.⁶⁸

Left ventricular hypertrophy refers to the abnormal enlargement, or thickening, of the heart muscle. This thickening of the walls of the heart's main pumping chamber can make the left ventricle work harder. As the workload increases, the muscle tissue in the chamber wall thickens. The enlarged heart muscle thus loses elasticity and eventually may fail to pump with as much force as needed. This phenomenon is more common in people who have uncontrolled high blood pressure. Regardless of a person's blood pressure, however, the development of left ventricular hypertrophy places that individual at a higher risk of a heart attack and stroke.

Myxomatous degeneration of the mitral and the tricuspid valves refers to the progressive physical deterioration of the structure of these specific parts of the heart.

Dr. Roman's final diagnoses included: "Hypertensive and atherosclerotic cardiovascular disease,"⁶⁹ "renal arteriolar sclerosis,"⁷⁰ and "slight aortic atherosclerosis."⁷¹

Hypertensive heart disease refers to heart conditions caused by high blood pressure. Atherosclerosis is also associated with untreated high blood pressure and refers to plaque build-up in the arteries. When blockages occur in arteries that supply blood to the heart muscle, the end result is called coronary artery disease.

Renal arteriolar sclerosis is the narrowing of one or more arteries that carry blood to the kidneys. Narrowing of the arteries prevents normal amounts of oxygen-rich blood from reaching the kidneys which need adequate blood flow to help filter waste products and remove excess fluids. Reduced blood flow may increase blood pressure in the entire body (systemic blood pressure or hypertension) and injure kidney tissue.

Aortic atherosclerosis is defined as the calcification and thickening of an aortic valve.

⁶⁶ A heart condition caused by high blood pressure. www.healthline.com/health/hypertensive-heart-disease

⁶⁷ An increase in cardiac muscle mass when cardiac muscle fibers thicken, or cells become enlarged, due to chronic and increased stress on the heart. <https://www.cardiosecur.com/magazine/specialist-articles-on-the-heart/what-is-cardiac-hypertrophy>

⁶⁸ A disease of the heart valves. <https://www.sciencedirect.com/topics/medicine-and-dentistry/myxomatous-degeneration>

⁶⁹ <https://www.medigoo.com/articles/atherosclerotic-cardiovascular-disease/>

⁷⁰ <https://www.sciencedirect.com/topics/medicine-and-dentistry/arteriosclerosis>

⁷¹ <https://www.mayoclinic.org/diseases-conditions/arteriosclerosis-atherosclerosis/symptoms-causes/syc-20350569>

Toxicology

Dr. Roman submitted samples of Dwayne Pritchett's blood and bodily fluids for toxicological analysis. This analysis showed that Dwayne Pritchett had a blood alcohol content of 0.05g%.⁷² The testing also found the presence of phencyclidine⁷³, morphine⁷⁴, benzoylecgonine⁷⁵, fentanyl⁷⁶ Norfentanyl⁷⁷, cannabinoids⁷⁸, and contine⁷⁹. Included in Dr. Roman's final diagnoses included: "Acute and chronic substance abuse."⁸⁰

Follow Up Interview of Dr. Kristin Roman

After the initial interview of Dr. Roman, the OAG provided her a copy of the transcript of Prentis Pritchett's statement to determine if the additional information might be pertinent to her conclusions.

Dr. Roman pointed to two important portions of Prentis Pritchett's transcribed statement that were relevant to her assessment of the case:

Mr. Prentis Pritchett reported that his son was placed on a stretcher after the interaction with the responding officers. He specifically recalled his son communicating with him as they removed him from the apartment.

Mr. Prentis Pritchett also described one officer placing his knee on one side of his son's neck, below the ear, but he wasn't certain of exactly which side.

⁷² The New York State legal blood alcohol limit for motorists is 0.08 g%. Vehicle and Traffic Law Section 1192(2).

⁷³ <https://www.addictioncenter.com/drugs/hallucinogens/pcp-phencyclidine/>

⁷⁴ <https://www.addictioncenter.com/opiates/morphine/>

⁷⁵ <https://www.sciencedirect.com/topics/biochemistry-genetics-and-molecular-biology/benzoylecgonine>

⁷⁶ <https://www.dea.gov/factsheets/fentanyl>

⁷⁷ <https://pubchem.ncbi.nlm.nih.gov/compound/Norfentanyl>

⁷⁸ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5741114/>

⁷⁹ <https://www.drugs.com/international/contine.html>

⁸⁰ Dr. Roman's final diagnoses also included "acute combined drug intoxication including ethanol, phencyclidine, heroin, fentanyl, and cocaine.

After reviewing these statements, Dr. Roman opined that, if Prentis Pritchett's observations were accurate, the injuries she noted inside of Mr. Pritchett's neck could not have contributed to his death because a compression of the neck necessary to cause death would have invariably rendered Mr. Pritchett unable to speak. Such pressure applied to the neck would have had to cut off air getting through. Consequently, Dr. Roman opined that Dwayne Pritchett's ability to speak the reported words after the confrontation with the officers meant that the knee reported as being placed on Mr. Pritchett's neck could not have caused his death.

Dr. Roman further noted that Prentis Pritchett's description of an officer administering pressure to the side of Dwayne Pritchett's neck was inconsistent with the observed hemorrhages inside of Dwayne Pritchett's neck at autopsy. Specifically, Dr. Roman reported seeing hemorrhaging to the deep front/middle muscles within the neck. Therefore, if Prentis Pritchett's recollection of the area where the pressure was applied was correct, it could not have contributed to Dwayne Pritchett's death.

LEGAL ANALYSIS

Following an extensive investigation, the full circumstances surrounding the death of Dwayne Pritchett remain frustratingly unclear. This lack of clarity is particularly troubling in light of the Medical Examiner's observation of evidence consistent with compression to Dwayne Pritchett's neck and allegations by Prentis Pritchett that one officer pressed a knee into the back of his son's neck. While our inquiry revealed that it was possible that one or more of the responding officers engaged in criminal conduct, we have also found it impossible to establish any culpability beyond a reasonable doubt.

The chief impediment to any criminal charge in connection with Dwayne Pritchett's death is the impossibility of identifying the precise legal cause of his death. While the medical examiner ultimately characterized the manner of death as "homicide" – a medical term, indicating that someone's conduct at least contributed to Dwayne Pritchett's death – Dr. Roman identified two additional significant contributing factors: (1) the substantial amount of narcotics in Dwayne Pritchett's system and (2) the serious cardiac and other conditions from which he was suffering at the time. A homicide charge requires proof that the perpetrator's conduct was the legal cause of another person's death. The medical examiner's own uncertainty as to what role the officers' use of physical force played in bringing about Dwayne Pritchett's death creates an obstacle to any charge of murder, manslaughter, or other homicide crime.

The absence of legal causation would not in and of itself rule out other charges, if it could be proved that officers compressed Dwayne Pritchett's neck, such as criminal obstruction of breathing (PL Section 121.12), assault (PL Article 120) or reckless endangerment (PL Section 120.25). The principal impediment to such charges, or indeed to almost any charges against any of the officers, is the complete uncertainty as to who was responsible for the neck compression –

or, for that matter, for any specific use of force against Dwayne Pritchett.⁸¹ At least six NYPD officers had some physical interaction with Dwayne Pritchett that day. All of the officers have denied that any sort of excessive force was used, and no forensic or other evidence ties any officer to the compression of Dwayne Pritchett's neck. Prentis Pritchett himself has been unable to provide a description of the officer or officers whom he said put a knee on his son's neck. In the absence of an identifiable perpetrator, there is no one against whom charges could even be brought. Nor can this problem be solved simply by charging all the officers; only proof that a particular officer either was responsible for the neck compression or both aided that officer and shared that officer's intent would allow for a charge.

The legal requirements that govern criminal prosecutions combined with the factual uncertainties in this case – which together have made it so difficult to bring accountability to any culpable officer or officers – are discussed in greater detail below.

I. Causation

As noted above, the autopsy report addresses three potential causes for Mr. Pritchett's death: "Sudden death of intoxicated individual (ethanol, phencyclidine, heroin, fentanyl, and cocaine), neck compression," and "hypersensitive cardiovascular disease." Each of these alone (in the absence of the others) could have caused his death. Because each of these potential causes of death cannot be independently excluded, we cannot make a determination with regards to causation.

To be held criminally responsible for a homicide, a defendant's conduct must actually contribute to the victim's death. People v. Stewart, 40 N.Y.2d 692 (1976). In Stewart, there was no question that the defendant stabbed the decedent. However, the Court held that there was no basis for the jury to find that the single stab wound inflicted by defendant caused the death of the victim beyond a reasonable doubt because the decedent died after undergoing an operation in which surgeons closed the wound in question, and also operated upon an unrelated hernia. During the course of this simultaneous, yet unrelated, procedure, an anesthesiologist failed to provide the decedent with the necessary amount of oxygen. Had this not occurred, the decedent would have survived.

The Stewart Court noted that there is generally "no statutory provision regarding the effect of an intervening cause of injury as it relates to the criminal responsibility of one who sets in motion the machinery which ultimately results in [a] victim's death". (People v. Kibbe, 35 N.Y.2d 407 (1974)). At the same time, however, the prosecutor must prove beyond a reasonable doubt that the accused is the individual who caused the death. See People v. Brengard, 265 N.Y.100 (1934). In addition to proving that defendant's conduct was the actual cause of death,

⁸¹ It should be noted that separate and apart from any the neck compression, the use of at least some degree of physical force against Dwayne Pritchett would have been legally justifiable. Pursuant to PL Section 35.30, a police officer is entitled to use reasonable physical force to effect an arrest. In this case, there is ample evidence that Dwayne Pritchett did resist a lawful arrest and likely even reached for one officer's weapon. Insofar as justifiable force to restrain Dwayne Pritchett caused him injury, such a use of force would not provide a legal ground for bringing charges.

in the sense that it forged a link in the chain of causes which actually brought about the death, the Stewart Court held that such proof had to be more compelling: “[T]he defendant’s actions must be a sufficiently direct cause of the ensuing death before there can be any imposition of criminal liability.” Kibbe, supra, at 413.

In light of this standard of proof, assigning criminal culpability for Dwayne Pritchett’s death to any officer’s conduct would be impossible, even if the officer or officers responsible for the neck compression could be identified.

II. Identification

As mentioned above, six uniformed NYPD officers arrived at the apartment in response to Prentis Pritchett’s 911 call. By all accounts, each of these officers interacted with Dwayne Pritchett during the course of the struggle in the bedroom. None of the officers admitted using excessive force during the altercation.

Prentis Pritchett, however, asserted that one of the responding police officers placed his knee on Dwayne Pritchett’s neck. When asked which of the officers had his knee on the back of his son’s neck, Prentis Pritchett replied, “I don’t know which one it was. It was about...I recall three, I think three black officers. A couple of white officers was there at that present minute, and then the Sergeant, and then the two detectives came in, big black detective and another detective. I don’t know if he was Spanish. I don’t know.” These descriptions do not distinguish between the officers who struggled with Dwayne Pritchett: three were Caucasian, one was Latino, and one was African-American. Prentis Pritchett later reiterated that he could not identify the officer who placed his knee on his son’s neck. He reported that other officers were beating his son but could not specifically identify who was involved, or what they were specifically doing during their efforts to subdue his son.⁸²

While the medical examiner observed injuries consistent with neck compression,⁸³ no evidence ties any specific officer or officers to such an act, including the pressing of a knee into Dwayne Pritchett’s neck.

The lack of any evidence pointing to one or more officers being responsible for the neck compression all but forecloses the possibility of charging any officer for a crime arising out of that conduct.

III. Acting In Concert

“Accessorial liability” or “acting in concert” is governed by Article 20 of the Penal Law. Under this theory, a person can be held criminally responsible for the conduct of another individual or individuals. In order to be held liable as an accessory, each defendant must share the mental culpability to commit the crime charged, and while possessing that mental culpability,

⁸² As mentioned above, Prentis Pritchett’s account of the officer’s pressing his knee into Dwayne Pritchett’s neck did not square with the medical examiner’s findings.

⁸³As noted above, the medical examiner could not conclusively state that this was the sole and exclusive potential cause of death.

he must, “solicit, request, command, importune, or intentionally aid” the other person or persons who are also committing the crime and who also possess the same criminal intent. In New York, a defendant is held equally responsible for the commission of a crime regardless of whether he or she could be considered the “principal” actor or an “accessory.” In People v. Duncan, 46 N.Y.2d 74 (1978), the Court of Appeals held that “whether the defendant was the actual perpetrator of the crime or liable as an accessory thereto is irrelevant. There is no distinction between liability as a principal and criminal culpability as an accessory and the status for which the defendant is convicted has no bearing upon the theory of the prosecution” citing People v. Katz, 209 N.Y. 311, 325-326 (1913); People v. Corballis, 178 N.Y. 516, 523 (1904); People v. Henry, 18 A.D.2d 293 (4th Dep’t 1963).

While it is true that multiple defendants may be criminally liable even when it is unclear which of the actors inflicted the ultimate injury, courts have held that there must be at least a modicum of proof to establish a shared mental intent. Before accomplice liability can be imposed, therefore, the circumstances of the case must support the conclusion that each of the participants shared a “community of purpose.” People v. Allah, 71 N.Y.2d 830 (1988). The law is well settled that a person “merely present” at the scene of a crime cannot be found to share an intent with others. See People v. Yarrell, 75 N.Y.2d 828 (1990).

There have been factual circumstances when a shared intent was sufficient to prove criminal liability of multiple actors. For example, in People v. Russell, 91 N.Y. 2d 280 (1998), the Court of Appeals considered a case where multiple defendants engaged in a gun battle with each other which resulted in the death of an innocent bystander. Despite the fact that the People were unable to ascertain which one of the three people actually fired the shot that killed the victim, the Court affirmed each conviction for depraved indifference murder under a theory of acting in concert. The fact that all three defendants were intending to kill or injure each other did not preclude a finding that they had intentionally aided each other in engaging in the combat that caused the victim’s death. The evidence was sufficient to establish that they intentionally “aided and encouraged” each other to create the lethal cross-fire which led to the killing.

Unlike the situation presented in Russell, however, there is no indication here that the responding officers shared the necessary shared purpose. In addition to the fact that each of the participant’s individual actions remain unknown, there was a legal basis for each of these officers to have engaged in a struggle with Dwayne Pritchett at the time of the confrontation. Officers were summoned to the apartment in response to a 911 call stating that Dwayne Pritchett was acting in a violent fashion and that he was under the influence of drugs. Upon arrival in the apartment, officers were confronted with a person in the bedroom who refused to come out. After the door was opened, officers observed an ammunition magazine in close proximity to Dwayne Pritchett as he lay on the floor. As a result, there was now evidence that a criminal act had been committed. Thus, the officers were legally permitted to use necessary force to effectuate an arrest. At this point a violent struggle to take Dwayne Pritchett into custody ensued.

Given the facts outlined above, it is legally impossible to charge any of the officers collectively under a theory of acting in concert.

It should be said that, if the precise circumstances under which Dwayne Pritchett came to sustain the injuries to his neck could be established (and, of course, the responsible officer identified), it would still be necessary to analyze those facts to determine whether all the elements of any crime were satisfied – including whether that conduct was intentional or reckless and was unjustifiable.

Dwayne Pritchett’s death was tragic, and possibly avoidable. The injuries to Dwayne Pritchett’s neck were troubling and perhaps even point to criminal conduct. As stated at the outset, however, the facts and circumstances surrounding Dwayne Pritchett’s encounter with the police remain frustratingly unclear. Unfortunately, these unanswerable questions – particularly with regard to causation and identification – inhibited our ability to definitively determine whether a crime was committed and, if so, who committed it. Consequently, the OAG has no choice but to find that there is no legal basis for criminally charging any of the officers.

RECOMMENDATIONS

1. Training regarding use of force

NYPD’s Patrol Guide states that it is “[t]he primary duty of all members of the service . . . to protect human life[.]” It further expressly prohibits officers from using “chokeholds,” which it defines as including “any pressure to the throat or windpipe, which may prevent or hinder breathing or reduce intake of air.”

Recently, New York passed a law that made it a crime for police officers to “use[] a chokehold or similar restraint, and cause serious injury or death.” The passage of this law underscores that it is critically important for police officers to refrain from the use of tactics that are likely to lead to serious injury or death – and, that officers who engage in such acts should be held criminally responsible. Although this law was not in effect at the time of Dwayne Pritchett’s death, and, therefore, cannot be used to punish the officers involved, the NYPD policies that were in effect clearly directed officers not to engage in force to the throat and to protect human life.

In addition, NYPD’s Patrol Guide Section 221-02 states:

All members of service must intervene to stop another member of the service from using excessive force. Failure to intervene in the use of excessive force, or report excessive force, or failure to request or to ensure timely medical treatment for an individual is serious misconduct that may result in criminal and civil liability and will result in Department discipline, up to and including dismissal.

Our investigation revealed that Dwayne Pritchett’s death was a tragedy, and possibly avoidable. Unfortunately, questions remain surrounding the actions of each responding officer, and it appears, even after countless interviews and years’ long investigation, they will remain

unresolved. Without the answers to those questions, disciplinary action, whether criminal or administrative, holding someone responsible for the death of Mr. Pritchett, is frustratingly elusive.

While they feel inadequate, our recommendations call for all NYPD officers to continue to receive annual training that emphasizes lawful and proportionate use of force tactics, and, in light of the new law, specifically states that chokeholds and other similar restraints are unlawful.

2. Referral to the Civilian Complaint Review Board

As a result of the OAG's investigation into this matter, we will be making a referral to the Civilian Complaint Review Board.⁸⁴ The OAG believes that the conduct of some of the officers involved in this matter was inappropriate. While we cannot pursue criminal charges against any of them, there should certainly be an investigation into whether discipline is necessary.

3. Evidence and vouchering protocols

Finally, in accordance with procedures set forth in the NYPD Patrol Guide, officers should adhere to evidence collection and vouchering protocols.

As indicated above, while there does not appear to be a colorable basis to charge any of the officers with any offenses pertaining to the death of Dwayne Pritchett, our investigation did reveal multiple episodes of unprofessional police conduct with respect to the handling of physical evidence. Despite the fact that these instances of misconduct were not directly related to the death in question, the OAG nonetheless takes this opportunity to make the following recommendations:

- a. All suspected illicit drugs recovered and collected by the Police Department should be appropriately vouchered and submitted to the laboratory for scientific forensic analysis.

In addition to a significant amount of suspected marijuana that was collected and ultimately discarded, FID Detectives failed to collect and voucher identified suspected crack cocaine. The suspected marijuana was thrown out after a unilateral decision was made by an officer or officers that it was oregano. There was no explanation for the failure to collect and voucher the suspected crack cocaine.

This misconduct invites adverse insinuations and implications and could have compromised the integrity of all subsequent investigations. It should go without saying that all suspected illegal drugs must be collected and vouchered in accordance with NYPD

⁸⁴ The New York City Civilian Complaint Review Board (CCRB) is an independent agency empowered to receive, investigate, mediate, hear, make findings, and recommend action on complaints against New York City police officers alleging the use of excessive or unnecessary force, a buse of authority, discourtesy, or the use of offensive language. The Board's investigative staff, composed entirely of civilian employees, conducts investigations in an impartial fashion. The Board forwards its findings to the police commissioner.
<https://www1.nyc.gov/site/ccrb/about/about.page#:~:text=The%20New%20York%20City%20Civilian%20Complaint%20Review%20Board,authority%2C%20discourtesy%2C%20or%20the%20use%20of%20offensive%20language>

protocols. Opinions with regards to what the recovered substances are should be left to the forensic laboratory.

b. Items of potential evidentiary value should not be photographed by officers using their cellular telephones but rather by assigned crime scene personnel

Sgt. Warren reportedly used his cell phone to photograph the suspected crack cocaine rock that was identified but never collected or vouchered. According to both Detective Carreras and Sgt. Warren, this evidence was discovered only after CSU completed their work and had missed it. Instead of summoning CSU back to the scene to photograph the evidence, however, a decision was made to take this photograph with a cellular phone.

CSU should have been called back to the scene. The discovery of potential contraband should have been documented with photos and in subsequent police reports. The decision to ignore these important steps clearly contributed to the failure to ultimately collect and voucher evidence.

c. Clothing collected at the hospital in conjunction with a homicide investigation must be vouchered in a timely fashion and ballistic evidence collected by a medical examiner at the time of autopsy must be vouchered and sent for forensic analysis.

At the time of autopsy, the ME asked repeatedly for the clothing Dwayne Pritchett was wearing at the time of the incident. She was informed that the clothing was never collected. It later came to light that the clothing was provided to a member of FID and placed in the trunk of an unmarked NYPD police car. The clothing remained in that trunk for approximately four months before it was discovered. The clothing was then taken to the OCME after the OAG requested that this be done.

Similarly, the ME collected a fossilized bullet from Dwayne Pritchett's body at the time of autopsy and gave it to a member of the FID. Officers did not submit this bullet to the NYPD Firearms Analysis section for months.

There is no reasonable explanation for any of this. The clothing that a person is wearing at the time of his death can be crucial in a homicide investigation. The failure to provide such clothing to a forensic pathologist can significantly interfere with the ability to form a comprehensive opinion about cause of death. Moreover, the placing of a decedent's clothing in the trunk of a car and leaving it there for an extended period of time can have profound implications with respect to the deterioration of potential scientific evidence. In addition to potentially compromising the chain of custody, simply throwing such evidence into the back of a vehicle could very well cause it to be lost forever.

Similarly, the decision not to voucher a bullet that was collected from a decedent's body is simply unacceptable. In addition to compromising the chain of custody, such misconduct makes it likely that important physical evidence will be lost.

CONCLUSION

The death of Dwayne Pritchett was a tragedy. However, based upon all of the facts and circumstances found during its investigation, the OAG concluded that a properly instructed Grand Jury could not find reasonable cause that a criminal charge is warranted. The unresolvable questions surrounding the actions of each responding officer prevented us from assessing their individual actions under the law. The inability to exclude multiple causes of death also prevented us from determining whether the officers' actions contributed to Dwayne Pritchett's death. As a matter of law, therefore, the officers' use of force in this case could not be conclusively determined to be unlawful. We nonetheless issue this report to assist the public in understanding the basis for the OAG's conclusion in this case and to provide context to our policy recommendations.

EXCELSIOR

State of New York

Executive Chamber

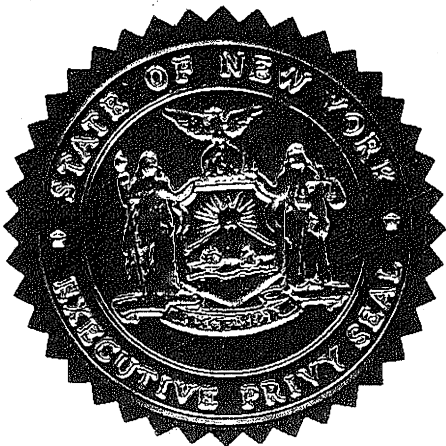
No. 147.15

EXECUTIVE ORDER

In view of the request of Attorney General Eric T. Schneiderman, my order and requirement, embodied in Executive Order Number one hundred and forty-seven, dated July 8, 2015, is hereby amended to include an additional paragraph to the penultimate paragraph as amended by Executive Order Numbers 147.1 - 147.14 to read as follows:

FURTHER, the requirement imposed on the Special Prosecutor by this Executive Order shall include the investigation, and if warranted, prosecution:

- (o) of any and all unlawful acts or omissions or alleged unlawful acts or omissions by any law enforcement officer, as listed in subdivision 34 of section 1.20 of the Criminal Procedure Law, arising out of, arising out of, relating to or in any way connected with the death of Dwayne Pritchett on or about January 28, 2018, and by any person arising from the search, on or about January 28, 2018, of 2767 Reservoir Avenue, Apartment 3F, in Bronx County.



GIVEN under my hand and the Privy Seal of the
State in the City of Albany this fifth day
of March in the year two thousand
eighteen.

BY THE GOVERNOR

Secretary to the Governor

TRANSCRIPT OF PRENTIS PRITCHETT'S 911 CALL – JANUARY 28, 2018

Operator: 911 where is the emergency?

Prentis: Yes... Uh. My son.. he done.. my son he trip me. And he goin' crazy. He try to-

Operator: What happened?

Prentis: My son... he's going crazy. I'm at [unintelligible] 2-7... 2-7-6-7 reservoir

Operator: That's 2-7-6-0?

Prentis: 2-7-6-7 Reservoir... Miss... I need the ambulance here now ... He's ... He's going crazy [unintelligible] himself in the room

Operator: Alright. Sir, sir. You have to listen to my question. Would there be [unintelligible]

Prentis: Excuse me?

Operator: What's the address?

Prentis: It's 2767 Reservoir

Operator: Between what two streets? What's your cross street, there?

Prentis: Between 1-9-6 1-9-5. I need... I need the ambulance. I need an ambulance.

Operator: Ok. What happened to him, Sir? You need to let me know.

Prentis: Miss... He took some drugs something and that got him all crazy. And he's [unintelligible] himself in the room.

Operator: Ok. He's in the roof right now?

Prentis: He's in the room. In the room. And he's [unintelligible] locked holding the door. Moaning.

Operator: How old is he?

Prentis: He's 47 years old.

Operator: You say he's 47?

Prentis: Yeah.

Operator: He's a psych patient, sir? Psychiatric patient?

Prentis: He... he...He takes psych medication.

Operator: Ok. That's what I need to know. So give me a second. Talking to me not delaying anything. Help is on the way. One second.

Prentis: He's got me... I'm so frightened... I'm so frightened.

Operator: No, that's fine. We gonna get some help. Are you outside?

Prentis: He attacked me. Huh?

Operator: Are you outside?

Prentis: No, no. I'm in the house. He just... He just in my bedroom.

Operator: You said he attacked you?

Prentis: [unintelligible] pulling me down [unintelligible]

Operator: Is he violent?

Prentis: No, he's not violent. He's just moaning. He's groaning.

Operator: Any weapons?

Prentis: No, no weapons in there.

Operator: What apartment you guys in, Sir?

Prentis: Third – 3F

Operator: 3F as in Frank? On the third floor?

Prentis: Yeah. Yes ma'am. [unintelligible] He just... he... he... I don't know.

Operator: Ok. Are you home alone?

Prentis: No ma'am. My roommate is here.

Operator: Ok.

Prentis: Please come. Hurry, hurry. Please ma'am. He-

Operator: Sir. Listen to me one second. Talking to me not delaying anything. I have a unit en route, sir. But I have to ask these questions so that I can let my unit know that, ok? You said he's 47 years old and he's inside his room?

Prentis: Yeah, he's inside my room. He's in the bedroom. Got the door bed jammed up now. Sounding like he scared of something.

Operator: Ok. Stay on the line. Let me see EMS for you also. One second. 2760 reservoir avenue, Bronx. Apartment –

Prentis: 2-7-6-7 Reservoir

Operator: 2-7-

Prentis: 2-7-6-7

Operator: 7

Prentis: 6... Uh... 6-7. 2-7-6-7

Operator: Ok. Hold on for EMS please. Stay on the line.

Beeping sound... Ringing

EMS: 0649

Operator: 0649. 2650 Pre-release job number: 2-7-8-6

EMS: 2-7-8-6. Thank you. Hello caller?

Prentis: No, no. It's 2-7-6-7 Reservoir.

EMS: No no no, the job number.

Prentis: Ohhh, ok. Ok.

EMS: Ok. You calling for yourself or someone else?

Prentis: My son, my son. He's on some type of drug he took. He's a psych patient. And he's trying to barge him in the room that he's in. Buggin' out ... goin', goin' nuts, man.

EMS: Ok, and how old is your son?

Prentis: 47

EMS: Ok... One second. He's not violent, right? No weapons?

Prentis: No, man. He just... there ain't no weapons in there. But he got the room goin' jammed up man. please get here, man, and get it.

EMS: Alright. And... one more time. Bronx 2760 Reservoir Avenue Apartment 3F?

Prentis: Yes, sir.

EMS: Ok and that's between Strong street and West 195th street.

Prentis: Right. Right, avenue.

EMS: Telephone number I have here is [REDACTED]

Prentis: That's it.

EMS: Alright. Job's in the system. Help will be there as soon as possible, ok? Just keep an eye on him and if anything changes, give us a call back immediately, ok?

Prentis: Yes.

EMS: Alright, thank you.

Operator: Thank you.

EMS: 2760 Reservoir Avenue, Bronx. Thanks.

**TRANSCRIPT OF “EW’s” INTERVIEW WITH THE NYPD’S FORCE INVESTIGATION
DIVISION (FID) - JANUARY 29, 2018**

“EW”: You sit up there?

FID: You want to sit up there? Whatever is easiest for you.

“EW”: Yeah. Ok.

FID: Careful walking up the stairs.

“EW”: Yep. Thank you.

FID: Sit up over here?

“EW”: Yeah

FID: OK

FID: What’s that?

Other FID: Phone call.

FID: Ok. What’s your name, Sir?

“EW”: “EW”

FID: What’s your date of birth?

“EW”: [REDACTED]

FID: Ok and where do you live?

“EW”: 2767 Reservoir Apt 3F Bronx 10468

FID: Ok. Does anybody else live in that apartment with you?

“EW”: Yeah. Prentis Pritchett.

FID: Ok. Anybody else live in that apartment?

“EW”: Well his son comes to stay but he don’t live there. He just had trouble with his girlfriend. That he got a son by. And when they break up he usually come and stay a few days. And he always go back though.

FID: Ok. How long has he been staying here for this last trip?

“EW”: Uh. I don’t know how long it’s been. About a week.

FID: About a week?

“EW”: Yeah

FID: Where does everybody sleep in that apartment?

“EW”: Well he sleep in the room with his father.

FID: Ok. So it's his father, his son, are in the bedroom. And where do you sleep?

"EW": I sleep out here in the living room. That's my room.

FID: Ok. What's... What's his son's name?

"EW": Dwayne Pritchett.

FID: Dwayne?

"EW": Yeah.

FID: Ok. Does Dwayne have any kind of psychiatric issues or anything that you know of?

"EW": Yes. He's always arguing with his father.

FID: Ok. Do you know if he takes any type of medication?

"EW": Yeah. I know he's on it. They told me that. But they... he didn't been taking it.

FID: Do you know what it was for?

"EW": No. I think psych meds. Mine are in my drawer. [unintelligible] I got enough for two more days.

FID: What are you... what are you-

"EW": And I gotta go to the VA for moods.

FID: For moods?

"EW": Yeah.

FID: Ok. Now have you ever seen uhhhh Dwayne with any kind of uhhh weapons or anything in the apartment?

"EW": Well. I don't uhh. I don't have to answer that.

FID: Ok

"EW": Cause I don't have no weapons.

FID: Oh. I didn't ask if you had it. I just asked if you had seen any in the apartment.

"EW": Yeah.

FID: I'm not saying you're walking around with anything.

"EW": I don't want to answer that.

FID: Ok

"EW": Yeah

FID: Have you seen any kind of drugs or any kind of drug paraphernalia in that apartment?

"EW": Nah. I don't wanna answer that. Cause we not in the court of law. And I don't want to incriminate myself in saying that I seen or hadn't seen -

FID: Well, just cause you say you saw it doesn't mean that you were in possession of it.

“EW”: That’s true

FID: So, did you see anything?

“EW”: I don’t see anything. Yeah. That’s because me and his father has been living in this apartment for over five years.

FID: Five years together?

“EW”: Yeah. He met me when I was living on Bogart. 1731 Bogart Morris Park. And we moved... And we moved here... moved here three years ago.

FID: Now, would Mr. Pritchett, the older man, would he ever have a gun in that apartment?

“EW”: No

FID: Would his son ever have a gun in that apartment?

“EW”: Well I know it’s not his father’s.

FID: And how do you know that?

“EW”: Cause he never had one any place we lived.

FID: Ok, so –

“EW”: Yeah, that’s why I say that.

FID: Have you seen the son bringing it in the apartment, then?

“EW”: No, I can’t answer that. No. I haven’t seen nothing like that. I know his father. He’s not that kind of guy. He wouldn’t have a weapon in the house without telling me.

FID: Ok.

“EW”: Yes.

FID: So if he didn’t have a weapon, and there’s a weapon in there now, who would have brought that weapon in there?

“EW”: Well I can’t answer that. But I say Dwayne. Cause I didn’t bring it in there.

FID: Oh I didn’t... I know you didn’t bring it in there. You’re too busy going out there and getting your whiting (?)

“EW”: Yeah.

FID: ... to eat

“EW”: And I know his father wouldn’t let none of his girlfriends inside with the weapon in there.

FID: Ok.

“EW”: Yeah

FID: Have you ever seen his son with... with a gun?

“EW”: Never.

FID: Never?

“EW”: Never.

FID: Have you ever seen any bullets in the... in the apartment?

“EW”: I saw one on the nightstand.

FID: When did you see that?

“EW”: ... in Prentis' room. Just... Just yesterday or the other day.

FID: Ok. Did you see anything else other than a bullet?

“EW”: Nope.

FID: Just a bullet. One bullet?

“EW”: Yep. I only seen one.

FID: And where was it?

“EW”: On his nightstand.

FID: Umm... When his son is staying in the apartment with you, has he ever acted out?

“EW”: Oh! He always act out. He just called the police on him yesterday.

FID: Does he ever get violent?

“EW”: And... Yeah!

FID: Alright. What does he do?

“EW”: Well he push up on his father. He talk to him. Out of... out of... concern for him being his father.

FID: Does he ever... Have you ever seen him hit his father?

“EW”: No, I never seen him punch him physically.

FID: But does he ever-

“EW”: But I [...] pushed past him. Knock him down.

FID: How many times in the past have you... do you know that Mr. Pritchett has called the police on his son? To try and get him help?

“EW”: Two times to my recollection.

FID: Two times?

“EW”: Just the other day. And I know recently it's been about a week. I don't how for sure how long ago it's been when he called him again.

FID: And what was he doing yesterday?

“EW”: I don't know.

FID: Were you there when he called them?

“EW”: I don’t know. I don’t know.

FID: Were... Were you in the apartment?

“EW”: I’m in and out the house. I don’t be at the... in the house all day.

FID: How do you that he called 911? Did he tell you? Did he tell you that he called the police?

“EW”: Well I know... he bring it up sometimes.

FID: Ok. When he brought it up, what did he say?

“EW”: I don’t know.

FID: ... Specifically.

“EW”: I don’t get involved with them. I don’t get involved. Cause I take it personally... Cause that’s his son. And I told him. I don’t have no children. So I don’t have that problem.

FID: Alright. Anything else that you can help us with?

“EW”: No. I just came back to the house to find out the time frame. Cause I be getting the officer’s name. But he told me about after 12. And I just come to check to see if y’all winding up things early.

FID: Alright. It’s going to be a little while.

“EW”: Ok.

FID: Ok?

“EW”: Alright.

STATEMENT OF: Prentis Pritchett

DATE: February 14, 2019

PLACE: 265 East 161st Street
Bronx, New York 10451

TIME: 2:28 p.m.

PRESENT:

Joshua Gradinger, Assistant Attorney General

Detective Carlos Santos, NYPD

Bryan Mason, Investigator, Office of New York

State Attorney General

Prentis Pritchett

Yana Roy, Esq.

REPORTER: [REDACTED]

[REDACTED]

1

2 P R E N T I S P R I T C H E T T, the Witness
3 herein, having been first duly
4 sworn by a Notary Public in and of
5 the State of New York, was examined
6 and testified as follows:

7 EXAMINATION BY MR. GRADINGER:


8 MR GRADINGER: Good afternoon. My
9 name is Assistant Attorney General
10 Joshua Gradinger. Also present in the
11 room is Detective Carlos Santos from the
12 New York City Police Department, Force
13 Investigation Division; investigator
14 Bryan Mason from the Office of the
15 New York State Attorney General;
16 attorney Yana Roy, and her client,
17 Mr. Prentis Pritchett.

18 Q Is that your name, sir?

19 A Prentis Pritchett.

20 Q I'm going to ask you a number of
21 questionings. I'm going to ask that you answer
22 them. If you don't understand any question that
23 I ask, please feel free to ask me to clarify my
24 question, okay; is that okay?

25 A (No verbal response.)



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P. PRITCHETT

Q Another thing that people do is they say "uh-huh". It's hard for the court reporter, so you have to say yes or no.

A Yes, sir.

Q Okay?

A Okay.

Q It's our understanding that today you're going to be truthful and tell us everything that happened with respect to the events of January 28th, 2018, inside of 2767 Reservoir Avenue, Apartment 3D --

A Yeah.

Q -- with respect to police officers --

A 3F.

Q 3F, thank you.

And your son Dwayne Pritchett; is that right?

A Yes.

[REDACTED]

1

P. PRITCHETT

█ [REDACTED]

█ [REDACTED] [REDACTED]

█ [REDACTED] [REDACTED]

█ [REDACTED] [REDACTED]

█ [REDACTED] [REDACTED]

█ █ [REDACTED]

█ [REDACTED]

█ █ [REDACTED]

10 Q Do you remember January 28th, 2018?

11 A Yes, sir.

12 Q Can you tell me exactly what you
13 remember?

14 A Prior before I called for EMS?

15 Q Let's talk about it. Tell me what
16 happened earlier that day.17 A My son had gone to his girlfriend's
18 house. He came that Sunday morning, and he and
19 I always have a great rapport with each other.
20 That's my baby, and he said, "Daddy, I see
21 clearly now.22 So I said, "Okay." I jump in the
23 shower. When I come out the shower, he's acting
24 strange, like something was -- he was thinking
25 of something. I couldn't figure it out. I

█ [REDACTED]

1 P. PRITCHETT

2 didn't know.

3 I ask my roommate, I said, "What
4 did Dwayne do?"

5 Q Is that ["EW"] ?

6 A Yes, ["EW"] .

7 So ["EW"] said -- he was sitting
8 there in the kitchen.

9 So I got out the shower. I got a
10 towel wrapped around me, and I came in. I said,
11 "Come here."

12 He comes in the bedroom with me,
13 and I'm talking to him, and all of sudden -- so
14 I put my clothes on, and I'm ready to walk out,
15 and he grab me by the arm, "Daddy, daddy, daddy,
16 daddy, daddy."

17 I said, "What's the matter?" I
18 said, "Hold on. I'll be right back." And by
19 that time, he began to barricade himself.

20 Q That's in your bedroom?

21 A In my bedroom.

22 So I jump on the phone. I call
23 911. I called the ambulance to come. I didn't
24 call no police.

25 Q What did you tell 911?



1 P. PRITCHETT

2 A I told them, I said, "He is
3 barricading himself in the room, and I don't
4 know what happened."

5 Q Did you tell them that he had been
6 doing any drugs?

7 A I tell them, I said I didn't know
8 that. I didn't know whether he was doing drugs
9 or not. I went in the shower when he came in
10 the house, so I didn't know what went on. I
11 knew he never acted strange like that before
12 that I could ever remember in my life.

13 Q Well, that's not the first time the
14 police had to come to the house for Dwayne,
15 right; they've been there before?

16 A Yes.

17 Q In past circumstances, he didn't
18 act up --

19 A No.


20 Q -- the same way?

21 A No.

22 Q So you call 911. Is Dwayne
23 barricaded in the room when you call 911?

24 A Yes.

25 Q What's ["EW"] doing at that time?



1 P. PRITCHETT

2 A ["EW"] was in the room right there
3 with me.

4 Q You were in the living room?

5 A I was in the living room. That's
6 ["EW"] bedroom.

7 Q How long does it take for the
8 police to come?

9 A I don't know. It was quite a while
10 because they didn't -- I didn't give out -- it
11 wasn't an alarming call that it was that great
12 of emergency.


13 Q Is Dwayne talking to you from
14 inside your bedroom?

15 A Yeah, he's talking some, but he's
16 mumbling.

17 Q Was he able to say anything?

18 A You know, I really can't remember
19 him speaking plainly to me that he was feeling
20 bad or something was wrong. All I know that
21 expression from his face and the mumbling and
22 that he tried to barricade himself in the room
23 (indicating).

24 Q Let me ask you a question,
25 Mr. Pritchett. I hate to ask you this, did he



1 P. PRITCHETT

2 appear to be intoxicated or high when you saw
3 him that morning or afternoon?

4 A When he came to the house, no. I
5 went in the shower, no sooner he got there, so
6 when I got out the shower, he appeared all that.

7 Q "He appeared all that," what do you
8 mean by that?

9 A Like he was mumbling, not speaking.

10 Q Did he put his hands on you? Why
11 did you call 911?

12 A Oh, no, he didn't. I called for my
13 child because he was acting strange. He
14 wouldn't dare do nothing to me.

15 Q Did there come a time when you
16 asked your son to shave your head?


17 A No.

18 Q That never happened?

19 A No.

20 Q Eventually, the police come, right?

21 A The police come right behind -- I
22 think the sergeant was -- it was a sergeant, a
23 female sergeant. I think she was there before
24 the ambulance. The ambulance stayed downstairs.
25 They didn't come upstairs.



1 P. PRITCHETT

2 Q It was just the female sergeant
3 that was in the apartment?

4 A She had about two, three other cops
5 with her.

6 Q How many cops were there?

7 A At that present minute, I didn't
8 even count them, sir.

9 Q You remember the female sergeant?

10 A Yeah, I remember the female
11 sergeant.

12 Q Did she talk to you?

13 A Yes.

14 Q Tell me about that.

15 A She asked me, she said, well,
16 why -- when Dwayne was barricaded in the room,
17 she looked in the room, and she saw a clip on
18 the floor.

19 Q Tell me about that. Was the door
20 opened or closed before she saw the clip?

21 A No. They pushed it open.

22 Q Did you push the door open at any
23 time?

24 A No.

25 Q Who pushed the door open?



1 P. PRITCHETT

2 A I don't know. One of the officers.
3 They pushed the door; they looked, and they
4 asked -- they said to Dwayne, "Dwayne, come
5 out." He got up, and he was to come out. You
6 know the butt boat, the butt boat in between the
7 doors, like that board where you separate a room
8 from another room in the doorway? They call
9 that a butt boat; is that right?

10 MS. ROY: You're talking about
11 the --

12 THE WITNESS: The butt boat.

13 MR. SANTOS: Like a saddle that
14 separates the threshold?

15 THE WITNESS: Right, when you go
16 from one room to another room.

17 Q I see, like a piece of wood?


18 A Right, it's a piece of wood. He
19 stumbled on that.

20 MS. ROY: Who stumbled on that?

21 THE WITNESS: Dwayne.

22 A They said, "Come out."

23 He got right up. He was coming
24 out, and he stumbled on that boat, and he was
25 falling, you understand, so.



1 P. PRITCHETT

2 Q Falling forward, inside the
3 bedroom?

4 A Forward into the living room.

5 Q Let me ask you, where were you?

6 A Standing right there beside the
7 door.

8 Q Where was ["EW"] ?

9 A ["EW"] was over by the kitchen.

10 Q So he's further away?

11 A Right, he's further away.

12 Q Can he see?


13 A Yeah, he can see.

14 Q Was Dwayne able to communicate with
15 the sergeant?

16 A He -- they just -- when they said,
17 "Come out," he came out, and when he stumbling,
18 the police engulfed him.

19 Q Tell me what you mean by "engulfed
20 him"?

21 A They grabbed him. They grabbed
22 him, man. They had him wrestling down. He
23 wasn't even trying to do no wresting or nothing.
24 The police had his foot -- had his knee on his
25 neck.



1 P. PRITCHETT

2 Q Let's break that down, okay? Who
3 put their knee on his neck?

4 A I don't know which one it was. It
5 was about -- I recall three, I think three black
6 officers. A couple of white officers was there
7 at that present minute, and then the sergeant,
8 and then the two detectives came in, big black
9 detective and another detective. I don't know
10 if he was Spanish. I don't know.

11 Q What was Dwayne doing during --

12 A Laying down. They had him cuffed,
13 and they was trying to get a pulse because
14 they --

15 Q Before we get to that, he had a
16 cast on one of his arms, right?

17 A Yes. It wasn't a cast. It was
18 like a -- what's it name? He just came from the
19 hospital. He had a -- not a real cast --

20 MS. ROY: Soft cast?

21 THE WITNESS: Soft cast.

22 Q Was he resisting in any way?

23 A No, not at all.

24 Q They're on top of him?

25 A Yes.



1 P. PRITCHETT

2 Q Did they appear to have trouble
3 getting the handcuffs on him?

4 A No, they didn't have no trouble.
5 When they was getting handcuffs on him, the
6 officers was so forceful, he passed out, and
7 they was trying -- the ambulance, they got
8 there. The ambulance was up there immediately,
9 and they was trying to get a pulse.

10 So they take me. They force me and
11 put me in the hallway. They pick me up and put
12 me in the hallway, put ["EW"] in the hallway,
13 and they wouldn't let me back.

14 All of a sudden, I'm going back,
15 trying to see how my child is doing, and the
16 police would grab me and throw me back out.

17 Q Did there come a time when there
18 was some indication from either the medical
19 personnel or the police officers in the room
20 that there was something in Dwayne's throat that
21 gave them trouble --

22 A They didn't tell me.

23 Q They said nothing like that?

24 A They didn't say it to me, no.

25 Each time I come in to see about my



1 P. PRITCHETT

2 child, they would throw me back out in the
3 hallway.

4 Q How long do you think this
5 confrontation happened?

6 A How long it took me?

7 Q How long were the police officers
8 on top of him?

9 A The police, with the confrontation,
10 was about five -- was it five minutes?

11 Q 300 seconds?

12 A Yeah. It wasn't even five minutes
13 to subdue him, but they --

14 Q Was it fast?


15 A Yes, it was fast, but they trying
16 to get a pulse was a long time.

17 Q Let's separate the trying to get a
18 pulse from the actual what you described as the
19 engulfing.

20 A That wasn't three minutes.

21 Q When you say three minutes, is that
22 180 seconds, or was it much faster than that?

23 A It was much faster than that. They
24 had him. He stumbled forward, and they grabbed
25 him and put the cuffs on him. I seen the police



1 P. PRITCHETT

2 on his neck, and I tried to -- and that's when
3 they grabbed me up and threw me outside.

4 Q I hate to ask you these questions,
5 but did you know your son to use heroin?

6 A No, not -- I remember him one time
7 another, years and years and years ago, that I
8 never seen him use it. I never know that he
9 using it, but this was a talk of family, you
10 know. I come from a pretty close-knit family,
11 and somebody had said in the family that Dwayne
12 was using.

13 Q When was that?

14 A That was almost a decade ago.


15 Q So it's your understanding that
16 about ten years ago he had experimented with
17 heroin, but never used it again?

18 A No. And me and him was close.

19 Q What about cocaine or crack
20 cocaine?

21 A Cocaine, I don't know was he using
22 it or not because he would go up and stay with
23 his girlfriend. The only time he would come to
24 me is when she kick him out.

25 Q What's his girlfriend's name?



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P. PRITCHETT

A [REDACTED] (phonetic).

Q What about PCP or angel dust, did you know Dwayne was ever --

[REDACTED].
[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]?

A No. He just had got down there. He didn't stay with me. She would kick him out, and he wasn't bringing that with him. They would get in an altercation, and he hung out, and she was so jealous. I don't know whether she was jealous of the money.

Q He wouldn't bring drugs into your house?

A No. No.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]

Q You made some statements to the

[REDACTED]

P. PRITCHETT

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police, correct?

A I don't recall me making a statement to the police. I made a statement

[REDACTED]

MS. ROY: Don't answer. Just listen.

Q -- a statement that's attributed to you about this.

"Mr. Pritchett stated he was in the shower and called out for his son to help him shave his head. He states that his son began throwing things around the house and becoming belligerent. He states that his son grabbed him by the shirt as he was seeking him. He states that his son did not say anything audible, but was grunting and went into bedroom and barricaded himself. At this point, Mr. Pritchett stated he called 911 for an

[REDACTED]

1 P. PRITCHETT

2 ambulance for his son."

3 Do you remember saying that?

4 A I remember saying that he was
5 grunting and growling when I come out the
6 shower, and I asked my roommate what happened,
7 and he said he don't know, so I go to the
8 bedroom. I just told you I don't know, and I
9 told you prior to now, I call 911. I'm the one
10 calling that said he was barricading himself in
11 in the room, and he couldn't talk. He was
12 mumbling. The sergeant got there. That's when
13 I talked to the sergeant.

14 Q I'm going to read you another
15 statement that's attributed to you.

16 "Mr. Pritchett stated that his son
17 broke up with his girlfriend named [REDACTED]
18 approximately three weeks ago, and he began
19 drinking heavily."

20 A Yes.

21 Q "Mr. Pritchett states that he does
22 not know that his son uses crack cocaine --
23 excuse me.

24 "Mr. Pritchett states he does know
25 that his son uses crack cocaine and heroin. He

[REDACTED]

1 P. PRITCHETT

2 stated that his son suffers from bipolar
3 disorder, and when he uses drugs, he gets
4 worse."

5 A I didn't say nothing about drugs.

6 Q Nothing about drugs?

7 A No.

8 Q I want to take you back to the
9 confrontation where you said that one of the
10 officers had their knee on his neck.

11 Can you describe for me exactly
12 what you mean? Where on his neck was his knee?

13 A Like on the side over here
14 (indicating).


15 MR. GRADINGER: Let the record
16 reflect the witness is indicating --

17 A I don't know what side it was, but
18 they said -- they looked in the room, and they
19 said -- the sergeant was there before these
20 officers.

21 Q Was the sergeant present when this
22 was going on?

23 A The sergeant was present standing
24 right beside me.

25 Q So she's not involved in the melee?



1 P. PRITCHETT

2 A No. She didn't get involved in the
3 melee. She had officers with her.

4 Q Was that a white or black officer?

5 A White sergeant.

6 Q No. I'm talking about the police
7 officer --

8 A It was white and black.


9 Q I'm talking about the police
10 officer who had his knee --

11 A I can't recall which one. I
12 don't -- because this was happening so fast that
13 I don't know which officer had his knee -- you
14 know, I didn't even look to see what color he
15 was. All I know you got my son down.

16 Q Understanding that you can't tell
17 which of the officers had their knee on his
18 neck, what were the other officers doing at that
19 time?

20 A They was wrestling him with his
21 legs. They was just like you would take an
22 attacker was on the football and trying to run
23 up.

24 Q Were they trying to subdue him?
25 Were they punching him?



1 P. PRITCHETT

2 A They were beating him up.

3 Q What do you mean?

4 A They was banging him, man. The
5 officer was kneeling with the knee. They were
6 holding him down, man.

7 Q When you say kneeling him with the
8 knee, is that a different person than the person
9 who had his knee on his neck?

10 A I don't know. I don't know. I
11 don't know whether it was a different person
12 or -- listen, I think, like, I can really look
13 up and can visualize how many cops was there. I
14 don't know. It was more than three cops that I
15 can visualize. I don't know how many other cops
16 had got there because at one point the whole
17 house was full of police, and it was two
18 detectives was there.


19 Q When you say detectives, were they
20 in plainclothes?

21 A They're in suits.

22 Q During the confrontation or after?

23 A After, I think it was after the
24 confrontation.

25 Q I want to separate after from



1 P. PRITCHETT

2 during the confrontation. How many police
3 officers were there when this was going on, the
4 confrontation with Dwayne?

5 A I know at least five police
6 officers.

7 Q Were all five struggling with him?

8 A I don't know. I can't swear to
9 that because they was -- they snatched me up and
10 threw me in the hallway.

11 Q Now, I want to talk to you a little
12 bit about your son's medical condition. Did you
13 know if he had any cardiac issues or problems
14 with his heart?


15 A Yes. You know, and that was
16 something that just recently happened.

17 Q Tell me a little bit about that and
18 what you know.

19 A All I knew is that ^{[Dwayne's} had said
20 to me that he had that something, but none of
21 that never occurred around me.

22 Q What did ^{["Dwayne's} tell you about his
23 heart condition?

24 A That he had went to the emergency
25 room, and I think that was about a month or



1 P. PRITCHETT

2 something before, could have been a little bit
3 longer, that he had something with a -- I don't
4 know what you call a heartbeat, a --

5 Q Arrhythmia?

6 A Arrhythmia or whatever, I don't know
7 what the doctor would call it, but it was
8 something concerning his heart.

9 Q Was there a concern it was a heart
10 attack?

11 A No.

12 Q Do you know the circumstances by
13 which he went to emergency room a month before?

14 A No.

15 Q Did Dwayne ever talk to you about
16 any heart problems --

17 A No.

18 Q -- that he had?

19 A No. We never had a conversation
20 like that.

21 Q Did you know about any medication
22 he was taking for high blood pressure?

23 A Yes.

24 Q Tell me about that.

25 A He is taking high blood pressure



1 P. PRITCHETT

2 and lactose intolerance.

3 Q I'm interested in the blood
4 pressure medication. Do you know the name of
5 the medication?

6 A No.

7 Q Was he taking the medication?

8 A I assume he was. I don't know. He
9 just came out there in the morning, so I don't
10 know was he taking it or not.

11 Q That morning was the first time
12 that he had been there in a while?

13 A No. He was there that Friday. He
14 had been there on Friday, and this I can't
15 forget. He and I had the best father-son
16 conversation that I've had a long way with my
17 son.

18 Q When was that?


19 A That Friday.

20 Q And this was what day?

21 A I don't know what day it was, man.
22 The 28th was a Sunday, so that had to be the
23 26th then.

24 Q Two days earlier?

25 A Yes. Friday, Saturday, Sunday, it



1 P. PRITCHETT

2 was two days earlier.

3 Q Did he suffer from bipolar
4 disorder?

5 A I don't know nothing about that. I
6 don't know that.

7 Q Was he under the care of a
8 psychiatrist?

9 A No. I used to tell his mom. I
10 said, "Look, why don't you get him to a
11 psychologist." I don't think he ever went. I
12 don't think he ever been to no psychologist. If
13 he did, I never knew anything about it.

14 MR. GRADINGER: Do you have any
15 questions?

16 MR. MASON: Your son never had any
17 documented psychological history that
18 you know about?

19 THE WITNESS: Not that I know.
20 I've heard that [Dwayne's
girlfriend] was saying about,
21 you know, saying something, but I never
22 knew nothing documented, and I never
23 even -- I talked to -- he had his mom.
24 We was friends, and then sometimes she
25 go into her little moods, and we didn't

1 P. PRITCHETT

2 talk for a minute, but sometimes we used
3 to talk every day, you know, about the
4 kids and about the grandkids, and we
5 used to laugh. We used to laugh, and I
6 say, "All right. You better get him to
7 a nut -- to a shrink." Because you
8 know, that's my baby.

9 I could be walking down the street
10 with him, and I look over, and I say to
11 him, "Tell me something quick."


12 And he would holler, "Daddy's
13 baby, daddy's baby." That's how close
14 he and I were, and his mom talk to him
15 every morning. He could be -- she was
16 going to talk to him.

17 Q Let me ask you a question,
18 Mr. Pritchett. During that confrontation with
19 the police officers on January 28th, 2018, did
20 you see your son reach for any of those police
21 officers' guns?

22 A No. He going to reach for a police
23 officer when he got a .40 caliber in the room.

24 Q How far was the .40 caliber?

25 A I don't know. I know one thing



1 P. PRITCHETT

2 that I saw the police go up under my mattress
3 illegally --

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7 A They said, "Come out." They said,
8 "Dwayne, come out." I repeat that over to you
9 again. He stumbled, and he was falling, and
10 they trumped on him.

11 Q But at any time did he put his
12 hands on one of the officer's gun belts?

13 A No, sir, not at all. I'm standing
14 there.

15 MS. ROY: Ask him about the
16 positioning when he tripped. Did he
17 fall forward, back?

18 MR. GRADINGER: I did ask that,
19 but I'll ask it again.

20 MS. ROY: Just to get the --

21 Q I'll ask you that question again,
22 okay. When you say that he stumbled, did he
23 stumble back into the bedroom --

24 A He stumbled forward into the living
25 room.

■

1 P. PRITCHETT

2 Q Did he fall forward onto his
3 stomach?

4 A Yes.


5 Q Tell me what happens after he falls
6 onto his stomach.

7 A Well, he didn't get a chance to
8 fall. They walking across that butt board. He
9 was stumbling. He didn't even get a chance.
10 They knocked him down to the floor.

11 Q When was it that you saw one of
12 these officers put their knee --

13 A Instantly. They grabbed him. They
14 mauled him. They was standing right there
15 waiting for him to come out the room. They was
16 standing right there, and I'm standing closer to
17 the door -- this is the (indicating) -- okay.

18 Say we use her bag as the butt
19 boat. I'm standing right here on this side of
20 the door (indicating). The police officer is
21 right over here (indicating). The sergeant is
22 standing right here by me (indicating). The
23 sergeant was standing touching to me, and when
24 he goes to stumble to fall, he falls this way
25 (indicating).



1 P. PRITCHETT

2 MS. ROY: When you say "this way,"
3 facedown?

4 THE WITNESS: Facedown. He's
5 falling facedown.

6 Q Towards his right?

7 A Towards his left.

8 Q Towards his left?

9 A Because he was coming out of the
10 room from here (indicating).

11 Q I'm looking from your perspective.

12 A I'm over here near the door
13 (indicating). He's coming from over here, so he
14 was falling this direction into the --


15 MS. ROY: The left.

16 A He was like in the center of like
17 the doorway coming out of the room, and he
18 starts stumbling.

19 MR. GRADINGER: Any other
20 questions?

21 MR. MASON: You had no physical
22 altercation between him and you during
23 the day?

24 THE WITNESS: No. Nothing. He
25 wouldn't dare. That's daddy's boy.



1 P. PRITCHETT

2 MR. SANTOS: He stumbles out of
3 bedroom into the living room?

4 THE WITNESS: No. He stumbled on
5 the butt board.

6 MR. SANTOS: Is his whole body out
7 of the bedroom?

8 THE WITNESS: No. His feet
9 stumbled on the butt board. He fell
10 forward. His whole body was out of the
11 bedroom.

12 MR. SANTOS: So his whole body is
13 out of the bedroom and he is on the
14 floor facedown?

15 THE WITNESS: He didn't get a
16 chance to fall to the floor.

17 MR. SANTOS: At one point, you
18 said they put him down on the floor?


19 THE WITNESS: Right.

20 MR. SANTOS: Is it here that you
21 saw someone put a knee on his neck?

22 THE WITNESS: Yes.

23 MR. SANTOS: So he was facedown
24 when they put --

25 THE WITNESS: And they was trying



1 P. PRITCHETT

2 to -- this was -- once they cuffed him,
3 they was flipping him over, so this is
4 when they began to start to try to get a
5 pulse.

6 Q That's after the knee situation?

7 A Yes.

8 Q Let me ask you a question, okay?

9 Where was his neck at the time that someone put
10 their knee?

11 A Laying forward out of the bedroom.

12 Q Was it outside the bedroom or --

13 A No, it was out.

14 Q How far out was it?

15 A His whole body was outside the
16 bedroom.

17 Q So his neck was not on top of
18 that --

19 MS. ROY: Threshold.

20 A No, sir. His feet weren't even on
21 top of that.

22 Q So there is no question --

23 A He stumbled, and he fell forward.

24 Q I'm going to ask you again. I'm
25 sorry to keep asking you this. Can you be as

1 P. PRITCHETT

2 specific as possible about where that police
3 officer's knee was when you say his neck; what
4 do you mean by that?

5 A Right here (indicating).

6 Q You're indicating the right side?

7 A Yeah.

8 Q Is that under your ear?

9 A I'm putting my head here. I can't
10 recall what side, right side, left side. I'm
11 just putting my hand, giving you a location --

12 MS. ROY: Is that below the ear?

13 THE WITNESS: Yeah, it's below the
14 ear.


15 Q Was it done with force?

16 A Yeah, it was done with force.

17 Q Sir, is there anything else that
18 you would like to add to your statement today?

19 A All I -- okay.

20 When I'm in the hallway, ["EW"] and
21 I, they got us in hallway, so I kept peeping
22 back, trying to see how he was doing. When they
23 was bringing him out on the stretchers, they got
24 him cuffed, and he's laying face up, his hands
25 behind him, okay. He looking back up at me and



1 P. PRITCHETT

2 his eyes rolling up in his head, and he said,
3 "Daddy, daddy, daddy, daddy, daddy." He's going
4 down the steps.


5 Ten minutes later, the detective
6 told the officer in blue to take me to the
7 station. He wanted to question me. So I tried
8 to refuse to go, so he made me go. They didn't
9 put me in cuffs, but they demanded me to go to
10 the station.

11 Now, I stayed around station that
12 was around 7:00, 12:00 at night, after 12:00 is
13 when they told me my son had expired. Nobody
14 told me. They had me in a cell. What did I
15 need to be in a cell for? I ain't charged with
16 nothing.

17 They got me in a cell. I'm saying,
18 "What you got me in the cell?"

19 The detective come running over to
20 me. "Oh, I come run and tell you, your son
21 expired." He's like, "When I found out they
22 didn't tell you, I wanted to be the first one."

23 So I snapped out. I said, "How you
24 going to tell me this crap that my son is dead,
25 and you talk about you telling me now? When did



P. PRITCHETT

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2 he die?" And from then on, ten minutes later,
3 he tell the officer to bring me upstairs to the
4 detective room.

█ [REDACTED]
█ [REDACTED]
█ [REDACTED]
█ [REDACTED]
█ [REDACTED] [REDACTED] [REDACTED]
█ [REDACTED] [REDACTED]
█ [REDACTED]
█ [REDACTED] [REDACTED]
█ [REDACTED]

14 Q Let me go back to Dwayne on the
15 stretcher. You're telling us that he was able
16 to speak?

17 A No. He wasn't able to speak. He
18 just said, "Daddy, daddy, daddy." He didn't say
19 nothing else.

20 Q But he was able to say, "Daddy,
21 daddy, daddy"?

22 A Yes.

23 Q Was he looking at you?

24 A He was looking with his head rolled
25 back, like he was laying like this, like you're

[REDACTED]

1 P. PRITCHETT

2 going away from me, but you're trying to keep
3 eye contact (indicating).

4 Q Did he say anything else to you?

5 A No. He didn't say anything else.

6 Q At that time, did you see any other
7 injuries on him?

8 A I didn't see no injuries at all.
9 They was -- they was taking him out, man. I
10 couldn't see. They had me in a corner, had
11 ["EW"] in a corner.

12 Did you check the apartment how it
13 looked? Did you investigate that?

14 So I'm outside the door. It's not
15 even -- that little hallway is not even as big
16 as this room. It's half size of this room that
17 little hallway there in the house.

18 MR. GRADINGER: The time is now
19 approximately 3:02 p.m., and the
20 statement is concluded.

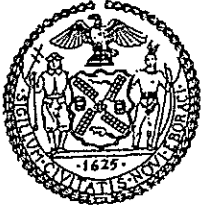
21 Thank you, Mr. Pritchett.

22

23

24

25



OFFICE OF CHIEF MEDICAL EXAMINER
CITY OF NEW YORK



REPORT OF AUTOPSY

Name of Decedent: Dwayne M. Pritchett
Autopsy Performed by: Kristin Roman, M.D.

M.E. Case #: M-18-002833
Date of Autopsy: 01/29/2018

FINAL DIAGNOSES

- I. NECK COMPRESSION
 - A. BULBAR PETECHIAL HEMORRHAGES OF EYES
 - B. HEMORRHAGES IN STERNOCLEIDOMASTOID AND STERNOHYOID MUSCLES
- II. ACUTE AND CHRONIC SUBSTANCE ABUSE
 - A. ACUTE COMBINED DRUG INTOXICATION INCLUDING ETHANOL, PHENCYCLIDINE, HEROIN, FENTANYL AND COCAINE (SEE TOXICOLOGY REPORT)
 - B. HEPATIC STEATOSIS (1600 GM)
 - C. TESTICULAR ATROPHY
- III. ABRASIONS OF INNER SURFACES OF UPPER AND LOWER LIPS
- IV. BLUNT IMPACT OF TORSO, WITH:
 - A. CUTANEOUS AND SUBCUTANEOUS CONTUSIONS
- V. BLUNT IMPACT OF EXTREMITIES, WITH:
 - A. CUTANEOUS AND SUBCUTANEOUS CONTUSIONS
 - B. ABRASIONS
 - C. FRACTURES OF RIGHT RADIUS AND ULNA (SEE ANTHROPOLOGY REPORT)
 - D. RUPTURE OF RIGHT BICEPS
- VI. HYPERTENSIVE AND ATHEROSCLEROTIC CARDIOVASCULAR DISEASE
 - A. SEE CARDIAC PATHOLOGY REPORT
 - B. RENAL ARTERIOLAR SCLEROSIS
 - C. SLIGHT AORTIC ATHEROSCLEROSIS
- VII. OBSTRUCTION OF AIRWAY BY FOOD BOLUS (ANAMNESTIC; SEE AMBULANCE CALL REPORTS AND CASE NOTES)
- VIII. REMOTE BLUNT IMPACT OF HEAD, WITH:
 - A. HEALING SCALP LACERATIONS
 - B. SEE NEUROPATHOLOGY REPORT
- IX. REMOTE GUNSHOT WOUND OF TORSO
 - A. BULLET RECOVERED
 - B. REMOTE LAPAROTOMY (DATE UNKNOWN)
- X. CHRONIC BRONCHIAL ASTHMA (SEE MICROSCOPIC REPORT)

Devin Long

- XI. MYXOMATOUS CHANGE OF CARDIAC MITRAL AND TRICUSPID VALVES (SEE CARDIAC PATHOLOGY REPORT)
- XII. SINGLE RIGHT PULMONARY THROMBUS
- XIII. RESUSCITATION ATTEMPTED (01/28/2018)
 - A. ABRASIONS OF CHEST
 - B. MINIMALLY HEMORRHAGIC RIB AND STERNAL FRACTURES

CAUSE OF DEATH: SUDDEN DEATH OF INTOXICATED INDIVIDUAL (ETHANOL, PHENCYCLIDINE, HEROIN, FENTANYL AND COCAINE) DURING PHYSICAL STRUGGLE WITH POLICE INCLUDING NECK COMPRESSION

OTHER SIGNIFICANT CONTRIBUTORS: HYPERTENSIVE CARDIOVASCULAR DISEASE; OBSTRUCTION OF AIRWAY BY FOOD BOLUS

MANNER OF DEATH: HOMICIDE (SEE ABOVE)

OFFICE OF CHIEF MEDICAL EXAMINER
CITY OF NEW YORK

REPORT OF AUTOPSY

CASE NO. M-18-002833

*I hereby certify that I, Kristin Roman, M.D., City Medical Examiner-II, have performed an autopsy on the body of **Dwayne M. Pritchett** on the 29th of January, 2018, commencing at 9:15 AM in the Manhattan County Mortuary of the Office of Chief Medical Examiner of the City of New York.*

EXTERNAL EXAMINATION:

The body is received in a sealed, labeled, white, plastic body bag (seal number 29212). The body is of a well-developed, large-framed, brown-skinned, 5' 10", 213 lb man whose appearance is consistent with the given age of 48 years. The scalp hair is wiry, dark with a gray patch, and measures up to 1/8". The mustache and beard are dark stubble. The eyes have dark irides and congested conjunctivae. The oral cavity has intact teeth in good repair. The tongue is unremarkable. The fingernails are well groomed, and either have clear polish or are buffed. The toenails are moderately groomed and free of polish. The genitalia are atraumatic and of a normal, circumcised man. The anus is atraumatic.

POSTMORTEM CHANGES:

There is moderate, symmetric rigor mortis of the upper and lower extremities and the jaw. Lividity is not apparent. The body is cool.

SCARS:

On the left side of the forehead and face is a curvilinear, 6", well-healed scar. On the abdomen is a vertical, 13", well-healed, linear, laparotomy scar. On the right side of the torso is a 1/2" x 1", irregular, well-healed scar. On the right side of the torso is a 1/4" x 1/2", irregular, well-healed scar. On the left side of the torso are two, irregular, well-healed scars measuring 1" x 1/2" and 1" each. On the back are multiple, diffusely distributed, irregular, well-healed scars, the largest of which measures 1/2" x 1". On the front of the right wrist is a vertical, 5", well-healed, linear scar. On the back of the right hand is a 1-1/2", curvilinear, well-healed scar. On the medial aspect of the right thigh above the knee is a vertical, 5", well-healed, linear scar. On the thighs, knees and shins are multiple, irregular, well-healed, hyperpigmented and hypopigmented scars ranging from 1/8" x 1" to 2" x 3".

CLOTHING:

The body is received unclad. See also Case Notes.

THERAPEUTIC PROCEDURES:

An endotracheal tube is in the mouth, extending into the upper airway. An orogastric tube is in the mouth, extending into the esophagus and stomach. Intraosseous catheters are in the shoulders. A recent needle puncture is in the right antecubital fossa. On the chest between the nipples are multiple, irregular, red abrasions ranging from 1/8" x 1/8" to 1/8" x 1", covering an area measuring 2" x 3". Internally, the sternum is fractured at the level of the fifth intercostal space and there are multiple, minimally hemorrhagic, anterior rib fractures (artifacts of resuscitative chest compressions).

INJURIES, EXTERNAL AND INTERNAL:

These injuries are described in reference to standard anatomic planes. These injuries are grouped and labeled for descriptive purposes only; no sequence is implied.

A. REMOTE AND RECENT BLUNT IMPACT INJURIES OF HEAD:

REMOTE: On the left side of the back of the head is an oblique, 1/2", healing laceration with peripheral scarring. On the right side the head above and behind the ear is an oblique, 1/2", healing laceration with peripheral scarring.

Internally, there is focal, purple, subscalpular hemorrhage beneath each laceration. There are no skull fractures. See also Neuropathology report.

RECENT: On the inner surfaces of the upper and lower lips are multiple, scattered, irregular, red abrasions measuring up to 1/8 x 1/8".

B. NECK COMPRESSION:

In the bulbar conjunctivae of both eyes are petechial hemorrhages, more marked on the right than on the left.

There is subcutaneous hemorrhage in the fat of the front of the left side of the neck and in the fat overlying the back of the right side of the neck and shoulder.

In the parenchyma of middle segments of the right and left sternocleidomastoid muscles are focal, purple hemorrhages. At the distal ends of the right and left sternohyoid muscles are intraparenchymal, focal, purple hemorrhages. The posterior neck muscles are free of hemorrhage. Diffuse, purple hemorrhage is in the fascia of the right trapezius muscle posteriorly.

The hyoid bone, thyroid cartilage, and cervical vertebrae are without fractures.

C. BLUNT IMPACT INJURIES OF TORSO:

On the chest beneath the left clavicle is a vertical, 1/2", linear, red abrasion. On the right side of the torso near the nipple is a 3 x 4", irregular, purple contusion. On the

left side of the chest near the nipple is a 1 x 1-1/2", irregular, purple contusion.

Internally, there are subcutaneous hemorrhages overlying the shoulders and the lower back. There are no visceral injuries.

D. BLUNT IMPACT INJURIES OF EXTREMITIES:

On the back of the right forearm is diffuse, purple contusion. On the front of the upper left arm is a 4" x 6-1/2", irregular, purple contusion. On the upper left arm near the antecubital fossa is a vertical, 1-3/4", linear, red abrasion. On the medial aspect of the left elbow is a 1-1/2" x 1-1/2", irregular, purple contusion. On the back of the left wrist is an oblique, 1/4", linear, red abrasion. On the left thumb and index finger are two, irregular, red skin defects measuring 1/8" x 1/8" and 1/2" x 1/2" each.

There are subcutaneous fat hemorrhages on both arms and on the shoulders, the right more so than the left. There are intramuscular hemorrhages of the right shoulder and of the elbows. The right biceps muscle is ruptured. The ends of the ruptured muscle are ragged, and there is accompanying, purple hemorrhage. The right radius and ulna are fractured with accompanying soft tissue hemorrhage (see also Anthropology report).

On the front of the right thigh is a 4" x 4", irregular, purple contusion. On the medial aspect of the right knee is a 2 x 3", irregular, purple contusion.

There are subcutaneous fat hemorrhages on the shins and knees. There are no fractures of the long bones of the legs.

E. REMOTE GUNSHOT WOUND OF TORSO:

There are no discernible entrance gunshot wounds. There is scarring on the cranial surface of the liver. There are adhesions in the peritoneal cavity. A bullet is recovered from the subcutaneous soft tissue of the left side of the torso, near the ninth rib. The bullet is dark discolored and possibly jacketed (difficult to discern due to discoloration). The bullet is medium caliber and not deformed. It is now inscribed on its base "X".

These injuries, having been described, will not be repeated.

INTERNAL EXAMINATION:

HEAD: See "Injuries". There is no epidural or subdural hemorrhage. The brain weighs 1320 gm. The brain and dura are submitted for neuropathologic evaluation.

NECK: See "Injuries". There is no fixed obstruction of the upper airway. The trachea and paratracheal soft tissues are free of natural disease.

BODY HABITUS: The abdominal pannus is not measured. The body mass index is 31.

BODY CAVITIES: Adhesions are in the peritoneal and left pleural cavities. The pericardial and right pleural cavities are free of abnormal fluid accumulations and adhesions.

CARDIOVASCULAR SYSTEM: The heart weighs 470 gm. The heart is submitted for cardiac pathology evaluation. The pulmonary vessels and the venae cavae are free of thrombus and embolus. The aorta has slight to moderate atherosclerosis.

RESPIRATORY SYSTEM: The right lung weighs 990 gm and the left weighs 760 gm. Both lungs have edematous, purple parenchyma that is free of masses. The distributions of bronchi and vasculature are unremarkable. In a small, peripheral vessel of the upper lobe of the right lung is a coiled, granular thrombus. The remainder of the pulmonary vasculature is unremarkable. The bronchi are empty.

LIVER, GALLBLADDER, PANCREAS: The liver weighs 1600 gm and has an intact capsule and slightly fibrous, brown parenchyma. The gallbladder is unremarkable and contains approximately 40 mL of brown bile without stones. The pancreas is tan, lobular and free of hemorrhage and mineralization.

HEMIC AND LYMPHATIC SYSTEMS: The spleen weighs 160 gm and has an intact, purple capsule and an unremarkable distribution of red and white pulp. There are no enlarged lymph nodes. There is no thymus. The bone marrow is unremarkable.

GENITOURINARY SYSTEM: The right kidney weighs 200 gm and the left weighs 240 gm. Both kidneys have granular, brown surfaces and otherwise unremarkable architecture and vasculature. The ureters maintain uniform caliber into an unremarkable bladder that contains approximately 80 mL of clear, yellow urine. The prostate is not enlarged. The testes are markedly atrophic.

ENDOCRINE SYSTEM: The pituitary, thyroid and adrenal glands are unremarkable.

DIGESTIVE TRACT: The esophagus and gastroesophageal junction are unremarkable. The stomach contains approximately 350 mL of opaque, green/brown fluid admixed with vegetable material and no recognizable pills. The gastric mucosa is unremarkable. The small and large intestines, vermiform appendix and rectum are unremarkable.

MUSCULOSKELETAL SYSTEM: See also "Injuries" and "Therapeutic Procedures". The vertebrae and clavicles are without fracture. The musculature is well developed and normally distributed.

TOXICOLOGY:

Specimens are submitted for toxicologic analysis. A separate report will be issued.

HISTOLOGY:

Specimens are submitted for microscopic analysis. A separate report will be issued.

FORENSIC BIOLOGY:

A blood spot card and clippings from the right and left fingernails have been submitted.

MOLECULAR GENETICS:

Heart, liver and spleen have been submitted in RNA later.

NEUROPATHOLOGY:

A separate report will be issued.

CARDIAC PATHOLOGY:

A separate report will be issued.

ANTHROPOLOGY:

A separate report will be issued.

RADIOLOGY:

Postmortem radiographs are made and maintained.

PHOTOGRAPHY:

Autopsy photographs are taken.

EVIDENCE:

Clothing is submitted to Evidence.

Kristin Roman, M.D. City Medical Examiner II
Report reviewed by Michele Slone MD
Deputy Chief Medical Examiner

*The information provided above is true and correct to the best of my knowledge and belief.
Electronically signed by Kristin Roman on May 08, 2018 10:32:43 AM*

**THE CITY OF NEW YORK
OFFICE OF CHIEF MEDICAL EXAMINER
520 FIRST AVE
NEW YORK, NY 10016
FORENSIC TOXICOLOGY LABORATORY**

Deceased: Dwayne M. Pritchett	Laboratory No.: FT18-00592	M.E. Case No.: M18-002833
Autopsy by: Dr. Roman		Date of Autopsy: 01/29/2018
Specimens received: Femoral (1,2) Blood X Bile X Urine X Gastric Contents Brain X Liver X Vitreous Humour X Other (specify): Blood (Heart 1,2) Gastric Content (1,2)		
Specimens received in laboratory by: Jia Wen Tan		Date Received 01/30/2018

Equivalents: 1.0 mg/L = 1000 ng/mL = 0.1 mg/dL

1.0 mg/Kg = 1000 ng/g = 1.0 mcg/g

RESULTS

Page 1 of 2

BLOOD (Femoral) (1 of 2)

Ethanol 0.05 g% (HSGC)
 Phencyclidine 0.05 mg/L (GC)
 Phencyclidine - detected (GC/MS)
 Morphine <50 ng/mL (LC/MS)
 Benzoylecgonine 1,066 ng/mL (LC/MS)
 Cocaine 242 ng/mL (LC/MS)
 Ethylbenzoylecgonine 59 ng/mL (LC/MS)
 Fentanyl 1.4 ng/mL (LC/MS/MS)
 Norfentanyl - detected (LC/MS/MS)
 Cannabinoids - detected (IA)*
 Cotinine - detected (GC/MS)*
 Sympathomimetic amines - not detected (GC/MS)
 Oxycodone, oxymorphone, hydromorphone, hydrocodone, codeine - not detected (LC/MS)
 6-monoacetylmorphine - not detected (LC/MS)
 Barbiturates, benzodiazepines, methadone - not detected (IA)

URINE:

Cannabinoids - detected (IA)*

* Unconfirmed screening result. Confirmation available upon request.

This report has an associated Forensic Toxicology case file.

Definitions of terms used in this report can be located at <http://www.nyc.gov/ocme>

CT = Color Test	GC/MS = Gas Chromatography/ Mass Spectrometry
GC = Gas Chromatography	LC = Liquid Chromatography
CA = Chemistry Analyzer	IA = Immunoassay
TLC = Thin Layer Chromatography	
UV/VIS = Ultraviolet/Visual Spectrophotometry	
LC/MS = Liquid Chromatography/ Mass Spectrometry	< = Less than
	HS = Head Space

Signed: Gail Cooper 02/12/18
 Dr. Gail Cooper
 Director, Forensic Toxicology Laboratory

Date: 02/12/2018

EC

**THE CITY OF NEW YORK
OFFICE OF CHIEF MEDICAL EXAMINER
520 FIRST AVE
NEW YORK, NY 10016
FORENSIC TOXICOLOGY LABORATORY**

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RESULTS

Page 2 of 2

VITREOUS HUMOUR:

Ethanol 0.06 g% (HSGC)
 Oxycodone <50 ng/mL (LC/MS)
 6-monoacetylmorphine - detected (LC/MS)
 Benzoylecgonine 658 ng/mL (LC/MS)
 Cocaine 437 ng/mL (LC/MS)
 Ethylbenzoylecgonine <100 ng/mL (LC/MS)
 Morphine, oxymorphone, hydromorphone, hydrocodone, codeine - not detected (LC/MS)

* Unconfirmed screening result. Confirmation available upon request.

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Signed: Gail Cooper 02/12/18
 Dr. Gail Cooper
 Director, Forensic Toxicology Laboratory

Date: 02/12/2018

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