



State of Florida Medical Examiners Commission

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July 9, 2020

MEMORANDUM

To: Stephen J. Nelson, M.A., M.D., F.C.A.P.
Chairman
Medical Examiners Commission

From: PROBABLE CAUSE PANEL
Barbara C. Wolf, M.D., Districts 5 & 24 Medical Examiner, Chair *Barb Wolf M.D.*
Honorable Charlie Cofer, J.D., 4th Judicial Circuit Public Defender
Honorable Carol Whitmore, Manatee County Commissioner

Subject: Report of the Panel – Complaint against Sajid S. Qaiser, M.D. (District 18)

On November 13, 2019, Mrs. Kathleen Edwards, along with community leaders, friends, and family, filed a formal complaint against District 18 Medical Examiner Sajid S. Qaiser, M.D., regarding the autopsy of her husband, Gregory L. Edwards, in December 2018. The complaint questioned Dr. Qaiser's thoroughness and methodology during the autopsy as well as his legal and medical professional standard of care.

Staff thoroughly reviewed the information in the complaint, as well as all case documents provided by the District 18 Medical Examiner's Office. Lacking in-depth medical knowledge, staff requested that a probable cause panel be convened to review the case and make the final determination of any violations of the Practice Guidelines, Florida Statutes, or Florida Administrative Code.

The Probable Cause Panel convened virtually on June 22, 2020, at 10:00 a.m. via GoToMeeting. The panel members present were Barbara C. Wolf, M.D., Public Defender Charlie Cofer, J.D., and Manatee County Commissioner Carol Whitmore. Also present were Commission staff members Vickie Koenig, Chad Lucas, and Megan Neel. Staff had previously provided the panel members with all documents supplied by the District 18 Medical Examiner's Office including medical records from the Orlando VA Hospital and Rockledge Medical Center. Additional reference materials provided were the *National Association of Medical Examiners (NAME) Position Paper: Recommendations for the Definition, Investigation, Postmortem Examination, and Reporting of Deaths in Custody* and excerpts from Dr. Vincent DiMaio's books Forensic Pathology: Second Edition and Excited Delirium Syndrome: Cause of Death and Prevention, which speak directly to Excited Delirium Syndrome deaths. Additionally, a deputy from the Brevard County Sheriff's Office met with each panel member individually to show body camera, transport, sally port, and jail footage from the incident, an example of the spit hood placed on Mr. Edwards while he was in the custody of the Sheriff's Office, and provide the

Brevard County Sheriff's Office Criminal Investigative Services report. Dr. Wolf was provided with and reviewed additional medical records from Rockledge Regional Medical Center. Dr. Wolf also spoke with Linda Sullivan, the supervisor of toxicology and forensic services at the Steward Reference Laboratory, about the testing they performed for this case and the District 18 Medical Examiner's Office provided her with recuts of all histology slides prepared from autopsy tissues for review.

The Panel elected Dr. Wolf as the chair and reviewed the statutory reference that established the Panel as well as the procedures that the Panel and the Commission use in these proceedings. The authority of the Probable Cause Panel is established in section 406.075(3), F.S., and is limited to a determination of whether the facts establish a violation of Chapter 406, Florida Statutes, Chapter 11G Florida Administrative Code, or the Practice Guidelines for Florida Medical Examiners.

Dr. Wolf discussed the allegations submitted by the complainant and potential violations of Chapter 406, Florida Statutes, Rule 11G, Florida Administrative Code, and the Practice Guidelines for Florida Medical Examiners. She also pointed out that the purpose of the Panel was to review, discuss, and act on only the actions of the medical examiner, and not any actions of the officers and/or deputies associated with the incident. The Panel agreed that Dr. Kaiser was extremely thorough in his investigation by performing secondary subcutaneous dissections of the wrists, hands and ankles, histology and toxicology examinations, reviewing records from the hospital where the death occurred as well as previous medical history records from Veterans Affairs, examining the spit hood and restraints used during the incident, and reviewing recorded video footage of the incident from the Brevard County Sheriff's Office and the West Melbourne Police Department. Dr. Kaiser was also provided with verbal updates about the internal investigation of the death by the Brevard County Sheriff's Office, although he never received a copy of the final written report. All of above information was considered in Dr. Kaiser's final determination as to the cause and manner of death of Mr. Edwards.

Dr. Wolf summarized the findings of the autopsy report as well as the decedent's medical history. She reported that the autopsy findings as well as the decedent's medical history of mental illness and a recent combative and violent behavioral state combined with use of physical restraint mostly supported the opinion of a death caused by Excited Delirium Syndrome. However, she went on to describe how in most Excited Delirium Syndrome deaths, the decedents do not respond to cardiopulmonary resuscitation (CPR) measures, which is contrary to what happened in Mr. Edward's case where circulation and heart rhythm were restored, but consciousness was not. These statements are supported by Dr. DiMaio in his book Forensic Pathology: Second Edition. She stated that while Mr. Edwards was in the hospital, following his episode at the jail, he developed complications including bleeding from disseminated intravascular coagulation as well as clotting issues, both of which are consistent with complications of a hypoxic brain injury. Additionally, there is literature documenting cases of Excited Delirium Syndrome, where the individual experienced a psychotic episode and the toxicology was negative for drugs of abuse, as in the case of Mr. Edwards.

Dr. Wolf felt that, while the Medical Examiners Commission typically does not address complaints relating to cause and manner of death, the Panel needed to address these issues as this is the basis of the complaint. In the forensic pathology field, the determinations that a death was caused by Excited Delirium Syndrome is somewhat controversial, as is the classification of the manner of death. This is addressed in Dr. DiMaio's book Excited Delirium Syndrome: Cause of Death and Prevention. In the book he states:

“Designation of manner of death is more difficult. Because of the effects of a struggle, one cannot classify a case of excited delirium syndrome as a natural death. One is left with homicide or accident. Since a violent struggle has occurred with interaction between two or more individuals, the best classification of the manner of death is probably homicide. A good argument for an accident can be made, however. It is at this point that local custom may determine how the manner of death is designated. If the case is called a homicide, one must explain to the public and press that the designation of the case as a homicide does not indicate that there was necessarily any criminal activity involved, that there is a difference between homicide and murder.”

Dr. Qaiser certified the manner of death as an accident. The Panel agreed that there is no right or wrong determination in this case, and even if the manner of death were to be changed to homicide, this is pathological terminology and not a legal terminology.

The Panel also noted a discrepancy between the autopsy report’s external examination, therapeutic interventions, and photographs, specifically relating to the circular pattern on the decedent’s torso and abdomen. These marking are indicative of a cooling blanket being placed on the decedent during the course of his hospitalization.

Finally, the Panel noted that any organs retained by the District 18 Medical Examiner’s Office would have been to preserve sections for the histology slides. This is the standard of practice for forensic pathologists, and does not violate statute, rule, or the practice guidelines.

Conclusions

After extensive discussion of the case, the Panel found that there was no probable cause for disciplinary action regarding the complaint lodged against Sajid S. Qaiser, M.D., in that there were no violations of statute, rule, or the practice guidelines in his death investigation of this case.

The Panel noted that Excited Delirium Syndrome is a cause of death that is recognized by the National Association of Medical Examiners, and while there were other alternatives that could have been used for the cause of death, Dr. Qaiser’s determination based upon his professional opinion was supported by his investigation. The Panel did unanimously agree to recommend that Dr. Qaiser have Mr. Edwards’ blood tested for sickle cell trait/disease as the presence of sickle cell trait, if found, could help further explain this death.

The Panel also felt that Dr. Qaiser could have included a description of patterned marks on Mr. Edwards’s torso from medical intervention at the hospital by way of a cooling blanket. Although these marks are artifacts of therapeutic intervention and not contributory to Mr. Edwards’ death, they may raise questions from those who are not medically trained professionals. However, a lack of description of the marks in the autopsy report does not rise to the level of a violation of Florida Statutes, Administrative Code, or the Practice Guidelines for Florida Medical Examiners.

The Panel is prepared to discuss this matter and the reasoning behind their conclusions. In the meantime, please contact staff if you have any questions or if the panel can be of further assistance.