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OFFICE OF THE CHIEF MEDICAL EXAMINER
BOARD OF MEDICOLEGAL INVESTIGATIONS

UNIFORM MEDIA STATEMENT
10 July 1998

On August 21, 1995, this agency was called to investigate the death of Kenneth M. Trentadue which occurred in the Federal Transfer Center in Oklahoma City. Following an autopsy later that morning, the cause of death was established to be "traumatic asphyxia" and the manner was initially listed as "pending further investigation" and later classified as "unknown".

Following review of new evidence and information generated in a five month investigation requested by this agency through the Oklahoma County District Attorney and conducted by the Homicide Division of the Oklahoma City Police Department, I have today amended the manner of death from "unknown" to "suicide".

In a letter to the U.S. Attorney for the Western District of Oklahoma on February 26, 1996, I noted that although many questions remained about the mechanism of suspension of Mr. Trentadue and the origin of three significant head injuries no specific evidence had been developed to enable us to classify the death as a homicide, a suicide, or an accident. That situation has now been corrected by the diligence of the Oklahoma City Police.

The ruling of suicide by the medical examiner means that the death is judged to be the result of a self-destructive act. In order to come to this conclusion two major conditions must be met.

First, the death must be the result of an action that can reasonably be accomplished by the victim himself. Past evidence developed by the Office of the Chief Medical Examiner and new evidence supplied by the Oklahoma City Police Department show to our satisfaction that the condition of Mr. Trentadue's cell as we now know it, the reconstruction by the Scientific Division of the Oklahoma State Bureau of Investigation of the torn pieces of the ligature used in the suspension, and the acute lacerations, contusions, and abrasions found on the body can all be reasonably explained theoretically by actions carried out by Mr. Trentadue alone. Parenthetically, the Oklahoma City Police investigation has developed evidence to show that in the 17 hours before his death Mr. Trentadue was by himself.

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Second, there must be evidence of intent. We believe the new evidence shows that Mr. Trentadue experienced a recent sudden irrational change in his affect and behavior. There is every reason to believe that Mr. Trentadue also recognized and realized the lethal consequences of what we feel to be his course of conduct. The evidence and information developed in this case indicates that Mr. Trentadue had experienced very stressful events and faced actual significant losses. New information developed by the Oklahoma City Police with regard to writing not seen by us, but reported to be on the cell wall is judged by a handwriting expert to be not inconsistent with Mr. Trentadue's hand. It suggests an emotional disturbance and possibly a message of farewell.

We now believe that the two major conditions alluded to above have been met and that there is no evidence either to suggest or substantiate that Mr. Trentadue's death should be classified as anything other than "suicide". This agency has only been able to come to this conclusion and resolution through the diligence, perseverance, and expertise of the Oklahoma City Police Department and particularly through the laudable five month efforts of two dedicated homicide investigators.

We deeply regret that the previous investigative problems we encountered have prevented the resolution of this important and painful investigation for nearly three years. A Memorandum of Understanding has recently been developed with the Federal Bureau of Prisons that we hope will prevent such future occurrences.



Fred B. Jordan, M.D.
Chief Medical Examiner, State of Oklahoma

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