Analysis of causes that led to subdural bleeding, skull and rib fractures, and death in the case of baby Averial Buie

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Abstract

A female infant from Texas stopped breathing and her mother took her to the hospital. Blood analysis revealed the baby suffered from severe metabolic and respiratory acidosis, hyperglycemia, hyperkalemia, and lymphocytosis. A chest X-ray showed evidence of pneumonitis. Physical examination revealed no evidence of injury caused by trauma. She was treated with epinephrine, sodium bicarbonate, antibiotic, and other medications. She developed bleeding outside the skull and intracranially. No skull or rib fractures were noted on the CT scans and X-rays taken during the first four days following admission. However, skull and rib fractures were observed on the CT scan and X-rays taken at a later date.

Resuscitation efforts failed and the baby died at 11 days following admission. At autopsy, the medical examiner (ME) found healed skull and rib fractures, bleeding of various ages outside the skull and intracranially, and brain edema and necrosis. His microscopic examination of the H & E stained sections of the lung revealed evidence of bronchopneumonia, hyaline membranes in the alveoli, and bleeding. The ME alleged that the baby’s injuries were caused by trauma and her father was accused of killing her.

My investigation reveals that the infant suffered from acute bronchopneumonia and respiratory distress syndrome on August 6, 2004, which led to hypoxemia, severe metabolic and respiratory acidosis, hyperkalemia, loss of consciousness, respiratory failure, and cardiac arrest. Her bleeding, brain edema and necrosis, and skull and rib fractures occurred in the hospital. These injuries were caused by infection and medications.

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