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Dr Liliana Schwartz

9 July, 1997

Det. Sgt Popplewell
Homicide Unit



Dear Sgt Popplewell

Re: Advice on the death of Mr Crispin Dye (PM No 93/2466)

In response to your letter and verbal discussion I have prepared the following report.

The information available to me at the time of completing this report were:

1. A letter dated 13 June, 1997
2. Attached copy of the relevant section of a taped conversation between Mr Leonard and 1269
3. A C-A-F 16 baton
4. Verbal discussion with you on the 30 June, 1997 at the N.S.W. Institute of Forensic Medicine.
5. Post mortem report
6. Post mortem photographs.



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Mr Dye was assaulted in the early hours of the morning of the 23 December, 1997. He was found unconscious on the foot path outside of 193 Campbell St, Darlinghurst. Mr Dye was conveyed to St Vincents Hospital and later on transferred to St George Hospital where he died on the 25 December, 1993.

I understand the questions you asked were:

1. Was the alleged weapon (baton) capable of inflicting the wounds received by Mr Dye on the 23 December, 1993?

Mr Dye suffered multiple blunt injuries which were mainly concentrated on the head; these injuries were caused by a blunt object.

Immediately above the left eye and temple there was an area of abrasions with two components,

- a) a squared shaped abrasion above the left eye brow
- b) a blurred abrasion on the left temple.

The squared shaped abrasion may have been caused by a baton or by one of the edges of a cricket bat or other blunt object of similar characteristics.

It may be possible that a baton was used to cause these injuries, however, it is not possible to be certain as other objects (e.g. a cricket bat) may inflict similar injuries.

2. What was the comparison between frequency and location of blows (according to transcript) and frequency and location of wounds according to the post mortem examination?

There were three main groups of injury on the head which were concentrated on the face and left side of the head. No injuries were noticed on the top or back of the head.

The three areas of injuries were the following:

- a) A bruise on the upper and lower eyelid of the left eye, a healing wound immediately to the left of the left eye and an abrasion on the bridge of the nose. These injuries were most likely caused by a direct impact to these areas. However, it may be possible that blood leakage from a fracture of the base of the skull contributed to the formation of the bruise on the upper eyelid of the left eye.
- b) An abrasion on the area between the nose and the upper lip, bruising and abrasion of the lips, abrasion on the chin and a scratch on the left side of the jaw. These injuries were most likely caused by a direct impact to these areas.
- c) On the left side of the forehead, immediately above the left eyebrow, an area of abrasions. This is most likely due to direct impact.

Based on the information in the transcript, the number of injuries on the back of the head is less than might be expected.

3. Considering the injuries Mr Dye sustained, was he able to walk five hundred metres after the assault?

I am not able to answer your last question, this is outside of my area of expertise. This question may be better directed to a neurosurgeon.

In addition, minor injuries were also noticed on the limbs (bruising and abrasions). The possible mechanisms of causation are as follow:

- 1(a) An abrasion located on the left elbow may have been caused by a fall or by a direct impact with a blunt object.
- 2(b) An area of bruising and abrasions located on the back and inner aspect of the left wrist and an area of abrasions and discolouration of the skin located on the inner aspect of the left hand. These two injuries, which have the characteristics of a defensive type of wounds, were most likely caused by a direct impact with a blunt object. Defensive wounds are injuries located particularly on the arms and occasionally on the legs and are caused when an individual is trying to protect himself/herself from wounding to vital areas (e.g. head, face, chest).
- 3(c) The following injuries may have been caused by a fall: an abrasion located on the outer aspect of the right shin and areas of discolouration located on the left shin and foot.
- 4(d) Other bruises were most likely caused by the medical treatment.

In conclusion, it may be possible that a baton was used to inflict these injuries but other blunt objects can not have been excluded. Mr Dye was hit at least three times on the face and left side of the head and no injuries were noticed on the top or back of the head.

Please do not hesitate to contact me if you require further assistance.

Yours sincerely



L. Schwartz