A Gun-Cleaning “Accident”

Kristin G. Sweeney, MD

A case is presented in which the question of suicide is raised. Several pointers are outlined to help in this differentiation.

An accidental death and dismemberment claim was submitted for a 35-year-old man whose cause of death was listed on the death certificate by the lay coroner as an accidental shotgun wound of the chest. He was found dead at his residence. No note was found and police found no evidence of foul play. The coroner’s report noted that the wound was accidental while cleaning a 12-gauge shotgun. There was no description of the wound other than its location on the chest. No autopsy was performed. It was never clear if a blood-alcohol level had been performed.

Since a gun-cleaning “accident” is almost always an attempt to disguise a suicide, a private investigator was hired to obtain records from the local police and relevant medical care providers, both recent and remote. In addition, the investigator took a statement from the insured’s fiancée (and beneficiary) 6 weeks after the death. Finally, he obtained copies of photographs taken by the police.

The scene photographs showed the insured sprawled face down on his elbows and knees over some gun-cleaning equipment. His left knee was located over the end of the shotgun barrel, which was lying roughly perpendicular to the leg and pointing toward him. A spent shell was nearby. Numerous other long guns were on the floor and in a nearby gun closet. He was wearing a blood-soaked T-shirt, but there was no photograph of the front of the shirt and no description of it.

The photographs of the body demonstrated a large circular wound of the chest between the left nipple and the midline and slightly above the nipple line (Figure 1). The edge of the wound was abraded but not seared. There was a concentric, dense, gray/black rim of soot around the wound.

This photograph (Figure 1) displays a loose or near contact shotgun wound, consistent with firing through the shirt. A contact wound is inconsistent with gun-cleaning activity.

The chest is the second most common location of entrance wounds (29% of cases in
one study) in suicides by men using long guns (shotguns and rifles); the head is the most common location (61% of cases in the same study).

Notes are left in only approximately 25% of all suicides. The following historical information was developed and compared with the Operational Criteria for the Determination of Suicide given below.

- At the age of 18 years, he had attempted suicide by gunshot wound to the abdomen.
- He has periodically abused alcohol dating back to at least the age of 18 years.
- Following an alcohol-related motor vehicle collision at the age of 22 years, he remained sober for 5 years, but he had been drinking again prior to his death.
- He was an avid hunter and was very knowledgeable about guns.
- His relationship with his fiancée, with whom he had lived for approximately 4 years, had drastically deteriorated.
- She and her children had moved out of their joint residence approximately 4 months prior to his death as a result of his drinking.
- She had a dinner date with someone else 2 nights before his death.
- She refused to let him spend the night before and the night of his death at her residence.
- He made a suicide threat to her the day before his death.
- She refused his offer of marriage the night of his death.
- He told her within several hours prior to his death that she would miss him.

OPERATIONAL CRITERIA FOR THE DETERMINATION OF SUICIDE

Self-Inflicted

There is evidence that death was self-inflicted. Pathological (autopsy), toxicological, investigatory, and psychological evidence as well as statements of the decedent or witnesses may be used for this determination.

Intent

There is evidence (explicit or implicit) that, at the time of injury, the decedent intended
to kill self or wished to die and that the decedent understood the probable consequences of his or her actions.

A. Explicit verbal or nonverbal expression of intent to kill self.

B. Implicit or indirect evidence of intent to die such as the following:

1. preparations for death inappropriate to or unexpected in the context of the decedent’s life,
2. expression of farewell or desire to die or acknowledgment of impending death,
3. expression of hopelessness,
4. expression of great emotional or physical pain or distress,
5. effort to procure or learn about means of death or rehearse fatal behavior,
6. precautions to avoid rescue,
7. evidence that decedent recognized high potential lethality of means of death,
8. previous suicide attempt,
9. previous suicide threat,
10. stressful events or significant losses (actual or threatened),
11. serious depression or mental disorder.

REFERENCES