



F9 Just Another Routine Day in the Office

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The attendee will learn how juggling a general dentistry practice and performing forensic odontology can be anything but “routine.” The purpose of this lecture is to demonstrate how daily office routine can be interrupted by having to perform an “emergency” comparison.

It is well known that things can occur at the most inconvenient times and sometimes extreme measures to solve a case are necessary. In this case of skeletal remains, a skull from a missing person of three years was brought over to the dental office for comparison. If the detective’s investigation was correct the missing person was murdered and the suspect who had known dealings with the deceased was under surveillance. The arrest warrant was pending the positive identification of the remains. Thus, time was of the essence in order to obtain a warrant and arrest the suspect prior to him fleeing.

The case had been pending for over three years. The police were very anxious to solve the case due to the fact that the victim was a minor who was brutally beaten via blunt impact injuries to the head and part of the body was charred. During an interrogation of a burglary investigation, new leads were obtained which led the detectives to the suspect who had sexual relations with the minor. Upon obtaining the name of the minor all the pieces of the three-year-old puzzle fell into place. All the while, steps were taken by missing person’s detectives to identify the skeletal remains of this minor. The skull was sent to the FBI lab in Washington, DC, for fabrication of a computer generated photo based on specific facial points on the skull. However, this was to no avail and the case was still open. This new lead could possibly solve the missing person’s case as well as the homicide.

The detectives were anxious for the results of the dental identification. The examination and radiography of the skull were performed in the dental office in between patients with the detectives waiting. To complicate the issue of time constraints, this was not a routine identification. There were issues with the antemortem records, e.g., discrepancies between charting and radiographs. Possible insurance fraud committed by the treating dentist or some type of charting error had to be considered.

What conclusions can be met with a match on radiographs but very specific charting with contradicting information? Is this enough evidence to make a positive identification to subsequently obtain a search warrant? What about the patient in the next operator mid root canal procedure? Is a treating dentist contacted? Will that dentist sign an affidavit stating he committed Medicaid fraud? What is to be done?!?!

This case study will highlight some of the difficulties a forensic odontologist may encounter. It will exemplify how things are never as easy as they seem, how routine identifications aren’t always routine, how nuts and bolts always get thrown in to the system and how the forensic community needs to adapt and modify.

Dentistry, Comparison, Skeletal Remains