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Fishmongers' Hall Inquests: Inquest concerning the death of Usman Khan

Day 38 - UKI Day 8

June 9, 2021

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Phone: +44 (0)20 3008 5900

Email: transcripts@opus2.com

Website: <https://www.opus2.com>

1 Wednesday, 9 June 2021
 2 (10.10 am)
 3 (In the absence of the jury)
 4 JUDGE LUCRAFT: Good morning, Mr Hough. I think we're ready
 5 for the jury?
 6 MR HOUGH: Yes, indeed, sir.
 7 (In the presence of the jury)
 8 JUDGE LUCRAFT: Good morning, everyone. Very nice to see
 9 you all.
 10 Mr Hough.
 11 MR HOUGH: Sir, today's first witness is Dr Fegan—Earl.
 12 DR ASHLEY FEGAN—EARL (sworn)
 13 JUDGE LUCRAFT: Good morning, Dr Fegan—Earl.
 14 A. Good morning, sir.
 15 JUDGE LUCRAFT: Very nice to see you. As I've said to
 16 others, and I know your answer will be you are going to
 17 stand, but if you wish to take a seat at any stage,
 18 please do.
 19 A. Pathologists always stand.
 20 Questions by MR HOUGH QC
 21 MR HOUGH: Would you please give your full name for the
 22 court?
 23 A. Yes, good morning, my name is Ashley William Fegan—Earl.
 24 Q. Dr Fegan—Earl, you understand that I'm asking questions
 25 on behalf of the Coroner, you may then have questions

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1 from other lawyers.
 2 A. Yes, indeed.
 3 Q. By profession, are you a Home Office registered
 4 pathologist and consultant forensic pathologist?
 5 A. Yes, I am.
 6 Q. Could you please summarise for the jury your relevant
 7 qualifications and experience?
 8 A. I hold the degrees of Bachelor of Science, Bachelor of
 9 Medicine, Bachelor of Surgery, the Diploma in Medical
 10 Jurisprudence, I'm a Fellow of the Royal College of
 11 Pathologists, a Fellow of the Faculty of Forensic and
 12 Legal Medicine of the Royal College of Physicians, and
 13 a Medical Examiner of the Royal College of Pathologists.
 14 I work as a Home Office pathologist and that's a doctor
 15 who has trained in pathology which is the study of
 16 causation of injuries and consideration of death in
 17 unnatural circumstances, and I've done that for 25 years
 18 and been on the Home Office list since 2002.
 19 Q. Dr Fegan—Earl, can you confirm that you were instructed
 20 to perform a post mortem examination on the body of
 21 Usman Khan?
 22 A. Yes, I was.
 23 Q. Did you perform that examination on 30 November 2019?
 24 A. I did indeed, yes.
 25 Q. So the day after his death?

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1 A. That's right.
 2 Q. Were you provided with a forensic strategy document
 3 providing background information which you quote from
 4 pages 3–4 of your report?
 5 A. Yes, prior to any post mortem examination we're provided
 6 with information that is known at the time that gives us
 7 an idea as to the nature of the case and may inform us
 8 as to what we might expect to find. Nonetheless, we
 9 appreciate that that's early information, it might
 10 change in the fullness of time, and we keep an open mind
 11 as to our findings irrespective of what we're told.
 12 Q. Did that document inform you of the following matters:
 13 first, that Usman Khan had been struck with a chair,
 14 piece of wood, narwhal tusks, and an ornamental spear?
 15 A. Yes.
 16 Q. Did it inform you further that during the confrontation
 17 with members of the public on the street, Usman Khan had
 18 been kicked and his wrist stamped on to release his grip
 19 on the knife?
 20 A. Yes, indeed.
 21 Q. Did it further inform you that during further
 22 confrontations with armed police, Khan was shot at
 23 multiple times by various armed officers.
 24 A. That's correct, yes.
 25 Q. Now, before I begin asking you about your post mortem

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1 examination report, may I give this notice, sir: we're
 2 going to use body maps to illustrate the various wounds
 3 and wound tracks. They are stylised but they still show
 4 injuries in detail and have, therefore, the capacity to
 5 cause some distress.
 6 JUDGE LUCRAFT: Thank you. I mentioned briefly yesterday
 7 afternoon, Dr Fegan—Earl, in anticipation of your
 8 evidence today, that we would be using such images.
 9 Obviously you've seen them, you have checked that they
 10 are representations, and they are a way of explaining
 11 the detail that you need to cover?
 12 A. Yes.
 13 JUDGE LUCRAFT: But it's right that Mr Hough just reminds
 14 everyone of that health warning, if I can call it that?
 15 A. Yes, but to re—emphasise, there are no post mortem
 16 photographs directly; these are all computer—generated
 17 graphics.
 18 JUDGE LUCRAFT: Thank you.
 19 MR HOUGH: Beginning, Dr Fegan—Earl, with your external
 20 examination, could you please identify the height and
 21 weight of the body?
 22 A. Yes, he was recorded as measuring 1.725 metres in
 23 height, that's 5-foot 8 inches, and he weighed
 24 76 kilograms, which is 12 stone.
 25 Q. Did you note any findings of particular significance in

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1 your survey of his body externally before we get to the
2 actual injuries ?

3 A. The external examination seeks to identify any signs of
4 significant natural disease, substance abuse, or
5 self—harm. Essentially, there were no signs of any of
6 those particular conditions. I did note that the pubic
7 hair had been shaved.

8 Q. The jury will remember hearing evidence you may not have
9 heard yesterday from DCI Brown about the significance of
10 that in a counter—terrorism investigation?

11 A. Indeed so.

12 The only other finding of note externally was that
13 there was no overt development of the muscles to suggest
14 the use of anabolic steroids to develop muscle.

15 Q. Again, a point you note because such has been found in
16 other terrorism cases?

17 A. It has. So it's a point worth considering and
18 emphasising the negative if that's the case.

19 Q. May we then move on to the injuries you identified, and
20 first of all ballistic injuries , which you address from
21 page 7 of your report?

22 A. Yes.

23 Q. Now, we are going to look at a number of injuries by
24 number. Do these numbers indicate anything about the
25 order in which the gunshots struck Usman Khan?

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1 A. No, not at all . In a case such as this , the various
2 wounds are examined and they are ascribed numbers as we
3 come across them, and those numbers are retained for
4 reports. What it does not seek to do is to say that
5 injury 1 was caused before injury 2, was caused before
6 injury 3. Rarely can we do that from a pathological
7 perspective.

8 Q. So with that introduction, may we turn to the first
9 wound, and may we look at the body map at {DC6657/3}.
10 Could you please describe wound 1, which was a ballistic
11 injury to the face, I think?

12 A. Yes, you see there an image of the face. When we
13 examine gunshot wounds, I do that in conjunction with
14 a gun expert, and we agree the injuries , in particular ,
15 issues regarding range of fire , and perhaps most
16 importantly whether injuries are entrance or exit
17 wounds, which then allows us to work out trajectories
18 and what any bullets may have passed through.

19 There may often be quite significant differences
20 between entrance and exit wounds, so to start, we see on
21 the right side of the nose a gunshot entrance wound.
22 That has passed across the right side of the nose before
23 exiting on the left side of the nose and actually raking
24 across the surface of the skin. That is why the injury
25 is so extensive on the left cheek, because it has

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1 followed a fairly shallow track which has then opened
2 the wound. So enter to the right nose, exit to the
3 cheek, no bullet recovered. That's the first injury .

4 Q. If we look at {DC6657/20} of the body map document, do
5 we see there the trajectory of the bullet marked in?

6 A. Yes, so following both external and internal examination
7 we define the tracks and you see there it's passing from
8 his right to his left , fairly straight , and then from
9 above downwards.

10 Q. Now, all of these images where the tracks are marked we
11 will see Usman Khan's body in the stylised image in
12 an upright position?

13 A. Yes, when we perform the post mortem examination, the
14 body lies on its back on the mortuary table, in what is
15 termed the anatomical position, which is on the back
16 with the palms facing forward.

17 It's very important to appreciate that, of course,
18 in real life , these situations are highly dynamic,
19 they're very fast—moving in nature, and the human body
20 can attain a great many different relative positions
21 over a very short period of time, so we need to be aware
22 of that world of difference between the two. So it's
23 very difficult for a pathologist to immediately say the
24 firer must have been on his right—hand side. We can't
25 make those interpretations, it would be speculative.

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1 Q. However, at one stage in the CCTV footage which the jury
2 saw, there is a moment when a wound appears on the side
3 of Usman Khan's face after some bullets have been fired.
4 Would that be consistent with this particular gunshot
5 wound?

6 A. Yes, in terms of the injuries that were present, this
7 was the only gunshot wound to the face, so yes, that's
8 entirely consistent with the CCTV.

9 Q. May we now turn to wound 2 and {DC6657/4} of the body
10 map document. We see here an entry wound in the rear of
11 the right shoulder area.

12 A. Yes, indeed. That is a gunshot entrance wound. You'll
13 see it's somewhat teardrop—shaped in appearance, and the
14 penetrating hole of the bullet is lowermost on the
15 diagram as you see it. The upper part of the tear is
16 a shallow track, and it gives us an idea that that
17 particular bullet is travelling from above, downwards
18 and inwards.

19 Q. May we look at {DC6657/21} to see the track of that
20 wound. Can you describe the track of the wound and its
21 effects on the internal parts of the body as it passed
22 through?

23 A. That gunshot wound was found to enter the right
24 shoulder, passing downwards through the right axilla,
25 that's the right armpit. It was associated with

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1 a fracture of the right shoulder blade, but ultimately
 2 a bullet was recovered from just beneath the skin, which
 3 would be submitted for examination by the gun expert.
 4 So a relatively shallow track through the body from
 5 above, downwards, and from his right to his left .
 6 Q. May we now turn to the third wound or series of wounds,
 7 and look first at {DC6657/5}, so page 5 of the body map
 8 document. What I'm going to do is show you three images
 9 and then the track, and ask you to describe the various
 10 wounds. So this is page 5 showing a wound to the left
 11 upper arm. {DC6657/6}, please, a wound at the left
 12 armpit, and {DC6657/7}, please, a further wound at the
 13 left armpit on the side of the chest. Then {DC6657/22},
 14 please. An image showing all three wounds, and by
 15 reference to this, can you describe what those wounds
 16 were and what track you deduced from them?
 17 A. This wound complex is a good example of how we need to
 18 be aware of how the body can move, and in particular,
 19 our arms are capable of moving away from the body
 20 towards the side of the body.
 21 Bullets have a significant amount of speed and
 22 energy when they exit; unless they are stopped by very
 23 solid structures, often will keep going. So we have
 24 here a group of three linked injuries with an entrance
 25 wound upon the outer aspect of the left arm, passing

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1 fully through that arm, then exiting the arm at the
 2 armpit, and, finally, and perhaps most importantly, then
 3 entering the left side of the chest at wound 3(c).
 4 It's then gone on to fracture the left second rib,
 5 pass through the upper lobe of the upper left lung --
 6 the lung is divided into an upper and a lower lobe -- it
 7 grazed the lower lobe and it finally terminated in the
 8 descending thoracic aorta. The aorta is the largest
 9 blood vessel in our body, it leaves the heart and then
 10 arches over the top and travels down the spine to give
 11 rise to all of our arteries. It's a very large blood
 12 vessel, about the size of a garden hose pipe, and I was
 13 able to identify the presence of a bullet within that
 14 region which was recovered.
 15 Q. Would that injury to the thoracic aorta have resulted in
 16 significant bleeding in your view?
 17 A. Yes, it would. All of these injuries that you see will
 18 bleed. A wound to the aorta will result in profound and
 19 largely internal bleeding, and one would expect
 20 relatively rapid collapse to occur having sustained that
 21 injury, given the amount of blood that would be present
 22 in a vessel of that calibre.
 23 Q. May we then turn to wound number 4 on page 8 of the body
 24 map document. This is divided into two injuries, wound
 25 4(a) and 4(b), and then if we look at {DC6657/23} we'll

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1 see the track that you have deduced connecting them.
 2 Could you please describe these injuries and the track
 3 that the bullet followed in your professional opinion?
 4 A. Yes, of course. As labelled on that diagram there, you
 5 see that there is an entrance wound to the inner right
 6 side of the chest. That bullet then took a fairly
 7 shallow track down through skin, fat and muscle, but not
 8 entering either the chest or the abdominal cavities
 9 before it exited at the wound you see on the lower left
 10 abdomen, so that's one passage of the bullet. No bullet
 11 recovered, and a shallow track passing from above
 12 downwards, and from his right to his left .
 13 Q. So this is an example of a bullet which entered the body
 14 but did not, unlike the previous one that we looked at,
 15 cause significant damage to major internal organs?
 16 A. Absolutely. The wound would undoubtedly bleed, but this
 17 would not be expected to be a fatal injury.
 18 Q. Then {DC6657/9}, please, wound 5. Can we see a wound
 19 there to the left side of the chest identified?
 20 A. Yes, indeed. So that's a gunshot entrance wound.
 21 Q. On {DC6657/24}, please, just for the track, can you
 22 describe how that wound was associated with internal
 23 injury?
 24 A. The bullet passed through the left side of the chest
 25 wall. It was associated with fracture of the left fifth

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1 and sixth ribs. It passed through the left side of the
 2 diaphragm, the muscle that separates our chest organs
 3 from our abdominal organs, passed through the stomach,
 4 through the 10th thoracic vertebra, so one of the bones
 5 of the mid-spine, and it impacted just beneath the skin
 6 of the back where it was recovered, and this is often
 7 the way when a bullet has decelerated, so it would be
 8 significantly decelerated by striking the bone of the
 9 spine and would then not have enough energy to exit the
 10 body. So the track itself from his left to right, and
 11 slightly downwards.
 12 Q. Then may we look at two other wounds in sequence.
 13 First, {DC6657/10}, wound 6. Do we see here an entry
 14 wound at the right abdomen?
 15 A. Yes, we have an entrance wound on the back right--hand
 16 side of the abdominal wall, just beneath the ribs.
 17 Q. {DC6657/11}, please. Do we see a wound on the lower
 18 right chest area, which you've associated with the
 19 previous wound?
 20 A. Yes, so moving round the chest to the front and
 21 right--hand side of the body, we see injury 7, which is
 22 a gunshot exit wound. That wound track passed again
 23 fairly shallowly through the tissues of the chest wall
 24 before exiting, so it was not associated with any
 25 significant injury to internal organs, and no bullet

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1 recovered, it has exited at 7.
 2 Q. May we look at {DC6657/25}. Does this demonstrate the
 3 track of the wound, as you've said, at a relatively
 4 shallow course through the body?
 5 A. Absolutely, and you see the position there from back to
 6 front, and from below upwards.
 7 Q. May we then consider wound 8, {DC6657/12}, please. Can
 8 you describe this wound, please?
 9 A. We then move to the right side of the abdominal wall,
 10 where there's a gunshot wound, that's a gunshot entrance
 11 wound that has gone on to penetrate the abdominal
 12 cavity.
 13 Q. {DC6657/26}, please. Could you describe the track of
 14 the wound?
 15 A. Yes, of course. This is a fairly critical injury. It's
 16 passing, as you see, from the deceased's right to left
 17 and slightly backwards. In doing so, it has passed
 18 across the lower part of the right kidney, across the
 19 lumbar spine, so the large bones towards the base of the
 20 spine, then through the left kidney before lodging in
 21 the muscle of the left abdominal wall from where
 22 a bullet was recovered. The same principle applies:
 23 that bullet will have lost energy, having struck the
 24 spine such that it does not actually exit the body.
 25 Q. Was this another injury affecting significant internal

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1 organs which would have caused substantial blood loss
 2 internally?
 3 A. Yes, the kidneys are well supplied with blood and will
 4 bleed profusely and internally when they are damaged.
 5 Q. I'm now going to show you two further images and a wound
 6 track before asking you to describe them. First,
 7 {DC6657/13}, wound 9(a). {DC6657/14}, wound 9(b). Then
 8 {DC6657/27} for the track. Could you please describe
 9 these injuries and the track which the bullet took?
 10 A. We've got here an entrance and an exit wound. The
 11 entrance wound entering just above the penis, passing
 12 backwards, slightly upwards, across the pelvis, although
 13 not damaging any critical structures within that, and
 14 exiting on the back of the right buttock. No bullet
 15 recovered and no critical structures damaged.
 16 Q. Thank you very much. May we now turn to wound 10, and
 17 again I'm going to show you three images and ask you to
 18 describe the wound and the track of the wound. First of
 19 all, {DC6657/15}, a wound on the outside of the right
 20 elbow?
 21 A. Yes.
 22 Q. {DC6657/16}, a wound on the inside of the elbow. Then
 23 {DC6657/28}, this shows a wound track. Could you please
 24 describe these wounds you found in the area of the right
 25 elbow and the bullet trajectory you deduced?

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1 A. Yes, another pair of injuries representing an entrance
 2 and exit. Entrance to the outer part of the right arm
 3 roughly in the region of the elbow, passing through the
 4 structures of the joint, dislocating that joint and
 5 exiting on the inner aspect in the crook of the arm as
 6 you see there. We need to be again, mindful of the
 7 mobility of the arm when thinking about how that arm may
 8 have come into the way of a bullet.
 9 Q. Then, please, {DC6657/17}, could you please describe
 10 this wound to the upper right shoulder?
 11 A. Yes, at the very top of the chest in the region of the
 12 shoulder and the collarbone we see a gunshot entrance
 13 wound.
 14 Q. May we look at {DC6657/29}, please. Could you describe
 15 the track of the bullet which caused this entrance wound
 16 after entering the body?
 17 A. Yes. The reality is bullets can take rather odd routes
 18 on occasion in the way that they pass through tissues
 19 and between layers of tissues and it can be extremely
 20 difficult to work out the track, but in this case the
 21 bullet has entered just around the region of the right
 22 collarbone and taken a very circuitous route just
 23 beneath the skin of the chest, abdomen, and then
 24 downward, accessing the right leg from where, as you can
 25 see there, the inset shows the structures beneath the

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1 surface of the skin, that's the fat of the thigh, from
 2 where a bullet was recovered.
 3 So a shallow track, albeit a lengthy track, passing
 4 from above, downwards, slightly inwards, with recovery
 5 of a bullet.
 6 Q. Did that wound track involve any injury to significant
 7 internal organs or structures?
 8 A. No, it didn't.
 9 Q. Then finally, wound 12 {DC6657/19}, please. Could you
 10 please describe this pair of injuries to the left hand?
 11 A. Yes, another pair comprising an entrance and exit with
 12 an entrance just at the base of the right thumb there,
 13 and an exit in the webbed space, the fleshy area between
 14 the thumb and the index finger, so a relatively shallow
 15 and short course, through—and—through injury with no
 16 recovery of a bullet.
 17 Q. May we look at {DC6657/30}, please.
 18 A. Yes.
 19 Q. Does that demonstrate the track of the wound as you
 20 deduced it?
 21 A. Indeed it does, informed by the entrance and exit
 22 wounds, you see a direction from backwards, forwards
 23 through the hand.
 24 Q. May we now move on to injuries caused or potentially
 25 caused by the application of the taser. Were you

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1 informed that a taser had been discharged at Usman Khan?
 2 A. Yes.
 3 Q. Were you also made aware of a dislodged taser barb in
 4 an evidence bag?
 5 A. Yes, that was present on the body when I examined it.
 6 It had dislodged, but was nonetheless transported with
 7 the body.
 8 Q. May we look, then, at {DC6657/31} of the body maps. Did
 9 you identify any injuries that were consistent with
 10 taser barbs?
 11 A. Yes, taser barbs can be quite difficult to identify .
 12 They cause relatively small injuries , sometimes with
 13 a little halo of pale area around it. I found three
 14 possible areas of puncture in the small of the right
 15 side of the back, just above the buttocks. No barbs
 16 were in situ at the time of my examination. They were
 17 between 9 cm and 15 cm to the right of midline, which
 18 gives you an idea of the span, and I suspect the jury
 19 will have already heard about the mechanics of taser and
 20 how it works, and spacing of taser barbs.
 21 Q. Yes, indeed.
 22 May we now move on to another section of your report
 23 where you set out the signs of sharp force trauma, so
 24 penetrating non—ballistic injuries identified in your
 25 examination?

17

1 A. Yes.
 2 Q. May we first of all look at {DC6657/32}. Could you
 3 describe the two injuries shown on this image?
 4 A. For the purposes of definition , sharp force trauma is
 5 one of the principal subdivisions of injuries . It's as
 6 it sounds: it's an injury caused by an implement with
 7 a sharp cutting edge or, at the very least , a sharp
 8 point. Most typically that can include things like
 9 knives, but anything with a sharp point may be regarded
 10 as a sharp weapon, so on that basis, the first injury we
 11 see in the midline of the neck, I described it as oval
 12 or cigar—shaped, 2 cm by 1 cm. The edges were very
 13 heavily abraded, that means they were grazed around the
 14 edges. It penetrated down just in front of the trachea,
 15 or windpipe, but it did not actually penetrate the
 16 windpipe itself . The appearance of an injury such as
 17 that suggests a pointed implement sufficient to
 18 penetrate the skin, but with then a rounded and
 19 relatively rough profile , such that you get the shape of
 20 the injury as you see before you, but also the grazing
 21 to the edges, and knowing, as I do, the potential
 22 weapons that were used, absolutely uniquely, this is
 23 an injury caused by penetration by a narwhal tusk.
 24 Q. Then the second sharp force trauma identified on this
 25 image, wound 2.

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1 A. You can see that the second injury in terms of its
 2 relationship to number 1 is really rather close, and
 3 this represents a similar appearing wound, 2.5 cm by
 4 1 cm, once again with heavy abrasion or grazing to the
 5 edges. That wound penetrated backwards through the
 6 muscles of the neck, and it ended adjacent to the left
 7 carotid sheath. The carotid sheath is a collection of
 8 large blood vessels and nerves in our neck. Where you
 9 can feel the pulse in your neck, that's your carotid
 10 artery . Just adjacent to it is the main vein of the
 11 neck, the jugular vein, and there are also major nerves.
 12 The importance here is while it was extremely close,
 13 it did not damage any of those major blood vessels. In
 14 my view, that injury would also be wholly consistent
 15 with an injury caused by the tusk of a narwhal.
 16 Q. If that injury had been inflicted ever so slightly to
 17 one side and had struck the carotid sheath, could it
 18 have caused a devastating and potentially fatal injury?
 19 A. Yes, had it damaged those blood vessels it would have
 20 had the potential to have been an independently fatal
 21 injury . As forensic pathologists we not infrequently
 22 deal with penetrating wounds to the neck and single stab
 23 wounds which prove fatal.
 24 Q. So but for a centimetre or two, we could have been
 25 looking at a very rare case of a fatality with a narwhal

19

1 tusk?
 2 A. A unique and first, yes.
 3 Q. May we then look at {DC6657/33} for the remaining sharp
 4 force trauma injuries , and we are looking here at the
 5 injuries marked 3, 4 and 5; could you please describe
 6 those?
 7 A. If you note once again, we have three injuries which,
 8 relatively speaking, are closely situated to one
 9 another, 3, 4 and 5. All of them are penetrating
 10 puncture wounds, measuring between 1.5 cm and 2 cm, all
 11 show grazing to the edges, although not quite as well
 12 defined and rounded as the injuries identified upon the
 13 neck. Each of those injuries penetrated through the
 14 skin and fat of the abdominal wall, the deepest just
 15 striking the muscle of the abdominal wall, so no damage
 16 to any critical structures within the abdomen.
 17 It's difficult to be entirely sure of what has
 18 caused this, but something like a spear could give rise
 19 to that. It would have the potential to have a sharp
 20 point with some blunting of the edges which causes the
 21 grazing around the edge.
 22 Q. Considering all the sharp force trauma injuries, those
 23 to the neck and those here on the lower abdomen, might
 24 any of those have proved independently fatal?
 25 A. No.

20

1 Q. May we then turn to blunt force trauma injuries that you
2 identified, so injuries consistent with bruising or
3 grazing. First of all, {DC6657/34} you describe this
4 injury over the crown of the head?
5 A. Yes, over the crown of the head just to the right you
6 can see what I've described as a guttered linear
7 superficial laceration. If I can take a step back and
8 just define blunt force trauma, it's the other
9 subdivision of injury, and it is caused by impact either
10 from or against an object with a blunt surface. Now,
11 that can include a vast range of different structures,
12 for example, an iron bar, a shod foot, the ground. All
13 of those are examples of blunt objects which can cause
14 injury, and the injuries they cause are bruises,
15 abrasions -- or grazes, as we've already seen in some
16 examples -- and lacerations, and it's important to
17 define that a laceration is not caused by a sharp
18 implement. That's a very commonly misused term.
19 A laceration is caused when something blunt strikes the
20 skin, stretches the skin, and splits the skin.
21 So on that basis we've got a linear, a straight line
22 superficial laceration, that means it's shallow, it
23 hasn't gone down to the level of the skull passing, as
24 you see. The cause of that could potentially be
25 twofold: impact with a linear object such as, for the

21

1 sake of example, a plank of wood, could give rise to
2 that, because it's blunt, giving rise to a laceration,
3 and it's linear, giving rise to that shape.
4 What couldn't be entirely excluded, because in
5 a sense a bullet is blunt, is the tangential passage of
6 a bullet across the surface of the scalp. Either of
7 those is possible. I favoured probably blunt impact
8 from an object rather than gunshot wound.
9 Q. Now, the jury have heard that a chair, another wooden
10 item, were both used against Usman Khan in
11 Fishmongers' Hall. Could this injury have been caused
12 by either of those?
13 A. Yes, with a chair you have an example of a blunt object
14 with linear components, which, if impacting against the
15 scalp, squeezes the scalp against the skull, stretches
16 and splits it, so entirely consistent with such
17 an explanation, yes.
18 Q. The jury have also heard about blows administered to
19 Usman Khan by the people who were restraining him on the
20 bridge. Would that be consistent with a blow from
21 a foot, a kick or, indeed, a fist?
22 A. It would be most unlikely to be a fist, however, a firm
23 stamp or, indeed, a glancing kick, another blunt object
24 has the capacity to lacerate.
25 Q. Turning then to the face, {DC6657/35}, please. Could

22

1 you describe the two injuries marked 2 and 3 which are
2 distinct from the large injury over the chest caused by
3 the bullet which you've already described.
4 JUDGE LUCRAFT: Cheek, I think.
5 MR HOUGH: Sorry?
6 JUDGE LUCRAFT: Cheek rather than --
7 A. Face, yes. So disregarding that exit wound, number 2,
8 in the left eye there was bruising largely in the lower
9 left eyelid within which were -- I think you can just
10 see on the graphics -- sorry, I've got a bit of glare
11 there -- yes, two shallow lacerations within it. So
12 this, again, is consistent with blunt impact to the
13 region of the eye which has stretched and split the
14 rather thin skin of the eyelid. A typical example of
15 an injury such as that may be a punch with a clenched
16 fist.
17 Q. And at the upper lip?
18 A. Yes, moving down, on the corner between the upper and
19 lower lips on the left --hand side, bruising and
20 superficial laceration to the buccal mucosa of the left
21 upper lip, that's the lining, the inner lining of the
22 left upper lip. Again, blunt impact could cause that
23 such as from a punch.
24 Q. And {DC6657/36}, please. May we see some injuries
25 representing blunt force trauma to the right hand?

23

1 A. Yes, injuries 4 and 5. 4 comprises significant bruising
2 to the knuckles of the right, middle and ring fingers,
3 which, moving onto 5, that bruising extended up the
4 middle finger and onto the second segment with
5 associated, I've described it as skin--tagged abrasion.
6 What I mean by that is that something rough has raised
7 the surface of the skin, leaving small flaps of skin
8 broken to observe.
9 Q. The jury have heard that while Usman Khan was on the
10 bridge, some of those dealing with him stamped on his
11 hands and, on one occasion, the base of a fire
12 extinguisher was struck against one of his hands. Are
13 these injuries consistent with any of those sorts of
14 actions?
15 A. If I was to favour either of those it would be a stamp,
16 in that you not only have the bruising there, you also
17 have the grazing, which would equate potentially either
18 with the roughened sole of a shoe, or equally, if the
19 hand was in the reverse position, with hand down, as the
20 hand is pushed against the roughened pavement. That
21 would be the most likely cause in my view.
22 Q. Next, {DC6657/37}, please. Could you please briefly
23 describe these injuries to the front of each knee?
24 A. So we have grazing to the front of both the right and
25 the left knees. Relatively non--specific injuries, and

24

1 certainly not significant in terms of the cause of
 2 death.
 3 In terms of causation, they could be caused during
 4 the course of a scuffle, or potentially at point of
 5 collapse if the collapse was to the knees.
 6 Q. And finally, {DC6657/38}, please. Do we see here some
 7 blunt force trauma injuries to the left hand?
 8 A. We do. Similar to the right hand, we see bruising and
 9 swelling to the bases of the index and middle fingers
 10 with also some associated abrasion. So in terms of
 11 causation, similar potential causative explanations,
 12 such as a stamp from a shod foot.
 13 Q. May we then look at an overview of all the injuries you
 14 have described, {DC6657/2}. Does this pair of images,
 15 front and back, demonstrate all the various injuries and
 16 their locations which you have taken us through?
 17 A. Yes, I think that broadly demonstration the location and
 18 distribution of the injuries that you can see, and
 19 involve from head down to the legs and front and back of
 20 the body, and limbs.
 21 Q. May we leave that image on screen, because it will
 22 become relevant when we look at your conclusions, but
 23 first turn to your internal examination findings.
 24 A. Yes.
 25 Q. Were there any significant findings in your examination

25

1 of the central nervous system?
 2 A. There was bruising to the undersurface of the scalp in
 3 relation to the laceration that we've just recently
 4 discussed. There was spotty bruising in the left
 5 temporalis muscle, which is the large muscle on either
 6 side of your head that you can feel moving when you open
 7 and close your mouth. There was, however, no fracture
 8 of the skull.
 9 There was a single focus of subarachnoid haemorrhage
 10 to the front left side of the brain. Subarachnoid
 11 haemorrhage refers to an area of bleeding beneath one of
 12 the fine layers that cover the surface of the brain.
 13 Impact to the head may not only give rise to damage
 14 to the scalp, but it may also damage the brain as well.
 15 Subarachnoid haemorrhage is evidence of some degree of
 16 injury, although my view would be that this is
 17 relatively minor, it plays no part in the death.
 18 Q. Thank you. Turning to the respiratory system, you have
 19 told the jury about effects of bullets on the lungs.
 20 Were they reflected, those effects, in your internal
 21 examination?
 22 A. Yes. Both lungs had been penetrated -- sorry, the left
 23 lung had been penetrated by bullets. The result of that
 24 would be collapse of the lung and then bleeding from the
 25 lung, so the lungs would be a -- damage to the lungs

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1 would represent a critical injury.
 2 Q. The cardiovascular system next, please. You described
 3 to the jury the effect of one bullet on the descending
 4 thoracic aorta; was that also reflected in your internal
 5 examination?
 6 A. Yes, it was. You will recall that being the principal
 7 artery of the body, so damage to that would lead to
 8 rapid loss of blood pressure, followed by collapse and
 9 death.
 10 Q. The gastrointestinal system next, please. You described
 11 to the injury how some of the bullets entered the area
 12 of the stomach internally. What findings did you make
 13 internally in this region as a result of the various
 14 bullet injuries?
 15 A. Well, the stomach had been penetrated. There was
 16 bleeding into the area behind the abdominal sac, and
 17 that relates to the bullet passing across both of the
 18 kidneys.
 19 There was also associated damage to the mesenteries
 20 of the bowel. The bowel is supported by fatty tissue
 21 called a mesentery, and in the passage of the bullets
 22 across the kidneys it had also involved those
 23 structures, which were damaged.
 24 Q. Then the hepatobiliary system. Did you find some damage
 25 to the liver?

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1 A. Yes, there was bruising on the undersurface of the
 2 liver, and that would relate to energy dissipation in
 3 the passage of bullets close by.
 4 Q. More significantly, did you find damage to the kidneys
 5 in relation to the bullet which compromised those
 6 organs, as you described?
 7 A. Absolutely, both kidneys damaged. Those would be
 8 expected to bleed extensively, and that is the
 9 retroperitoneal bleeding that I have described, the
 10 bleeding behind the abdominal sac, so that is a critical
 11 injury.
 12 Q. Were there other significant injuries to internal organs
 13 that you found?
 14 A. No.
 15 Q. Then the musculoskeletal system. You have identified
 16 some fractures as you have described the various bullet
 17 tracks.
 18 A. Mm.
 19 Q. Can you summarise the damage to the bony structures?
 20 A. Yes, as you will recall from when we passed through the
 21 various gunshot wounds, there was fractures to the right
 22 shoulder blade, the vertebral column, and the left
 23 second, fifth and sixth ribs. The right elbow joint
 24 itself was dislocated, secondary to passage of a bullet.
 25 The right shoulder itself was dislocated, but that was

28

1 remote from any obvious bullet injury. There was also
 2 deep bruising to the back of the top of the left
 3 shoulder, 5 cm by 4 cm.
 4 Q. May we now move to toxicology, another aspect of your
 5 work.
 6 A. Mm.
 7 Q. Was a toxicology report obtained which made some
 8 findings of use of substances by Usman Khan?
 9 A. Yes.
 10 Q. What were the principal findings?
 11 A. There was no evidence of drug use identified within the
 12 screen. Alcohol was present in both blood and urine at
 13 concentrations of less than 10 milligrams per decilitre .
 14 Just to put that into context, the legal limit for
 15 driving is 80 milligrams per decilitre . This is a very
 16 low level and it is certainly the case that natural
 17 changes that occur in the body after death may result in
 18 the production of alcohol, so one has to consider that
 19 that is a very possible cause for alcohol, even if it
 20 was due to true ingestion of alcohol, he would not have
 21 been intoxicated.
 22 Samples were also taken of hair and toenail, because
 23 that may assist in the analysis for the long-term taking
 24 of drugs, what has been taken historically, so that's
 25 a further specialist examination, and I understand the

1 jury have heard evidence in that regard.
 2 Q. This jury have not; that was in the Inquests of the
 3 victims.
 4 A. Oh, I beg your pardon. I'm so sorry. So analysis of
 5 the hair suggested the occasional use of cocaine over
 6 the more recent time before death. The findings also
 7 suggested occasional exposure to heroin, but external
 8 contamination could not be excluded. A further
 9 specialist test was requested for anabolic steroids,
 10 bodybuilding drugs, and it was stated that in general
 11 terms, there was no evidence that he was using anabolic
 12 steroids over the period of approximately 8-16 months
 13 prior to death.
 14 Q. Just elaborating on those findings that you have
 15 referred to about use of illegal drugs, when you say
 16 that the beard hair findings suggested occasional use of
 17 cocaine over the more recent time, do you mean going
 18 back weeks or possibly months rather than hours or days?
 19 A. The principle is that some drugs will be eliminated from
 20 the body in the hair. The hair grows at, give or take,
 21 a centimetre a month. So if one takes a sample of hair
 22 and divides it into small sections and analyses each of
 23 those sections, it may give you an understanding of drug
 24 use in previous weeks and months, so it's weeks and
 25 months rather than hours.

1 Q. And when you refer to occasional exposure to heroin
 2 being suggested, but external contamination not being
 3 completely excluded, does that mean that it is possible
 4 that Usman Khan had not in fact taken heroin?
 5 A. Yes, this is another individual's report, but my
 6 interpretation would be that if, for example, someone
 7 were to be in the environment where heroin was being
 8 smoked, then that may contaminate the hair, and it's
 9 reasonable to state the limitations of a test when
 10 that's relevant.
 11 Q. May we then, finally, turn to your conclusions, bearing
 12 in mind the images we see on screen, and at point 3,
 13 what was your conclusion as to the cause of death?
 14 A. My view was that death in this case was due to gunshot
 15 wounds and was not related to any injury caused by those
 16 members of the public who engaged him.
 17 Q. Are you able to explain in broad terms the mechanism of
 18 death, how these various gunshot injuries you have
 19 described would have led to death?
 20 A. There are a number of gunshot wounds. All of those
 21 injuries would bleed, to a greater or lesser degree, but
 22 those that penetrated the body and, in particular, those
 23 that damaged the lungs and the kidneys, and most
 24 particularly the thoracic aorta, would have given rise
 25 to very rapid bleeding.

1 The mechanism would be that blood loss would occur,
 2 predominantly internally, his blood pressure would then
 3 start to drop. It would drop to a critical degree, such
 4 that he lost consciousness. At that point none of the
 5 major organs are being supplied with blood or oxygen,
 6 and shortly thereafter, the individual will enter into
 7 a state of cardiac arrest, in other words, the heart
 8 stops beating.
 9 Q. Now, you have referred in particular to wounds which
 10 damaged the major internal organs. Are you thinking
 11 there first of all of wound 3, which affected the lung
 12 and the thoracic aorta?
 13 A. Yes, that's the one that passed through the arm, then
 14 into the chest, going across the lung and into the
 15 aorta.
 16 Q. Were you also thinking in particular of wound 8, which
 17 entered the abdominal cavity and affected the kidneys?
 18 A. Yes. Both of those injuries would have the potential to
 19 be independently fatal.
 20 Q. Turning to your conclusion 4, what conclusion did you
 21 reach as to the range of trajectories described by the
 22 various bullets?
 23 A. I think within general terms there were multiple gunshot
 24 wounds following different trajectories and consistent
 25 with multiple firers from different positions.

- 1 Q. Your point 5., did any of the gunshot wounds show the
2 characteristic features of discharge from contact or
3 near contact locations?
- 4 A. No. By that is meant had any weapon been placed either
5 very close to or in direct contact with the deceased's
6 body? The answer to that is: no, it often leaves
7 characteristic signs, all of these are consistent with
8 a range further than that, but that's the province of
9 ballistics officers but, of course, CCTV and other
10 evidence may be very clear in that regard.
- 11 Q. Then turning to your conclusion 6, the jury have heard
12 that there were two initial shots fired at Usman Khan,
13 at 14.02.
- 14 A. Mm.
- 15 Q. Then Usman Khan continued to move around in an obvious
16 state of injury until 14.10, and at that point, over the
17 space of a little over a minute, a further 18 shots were
18 fired at him, a number of them striking him after he sat
19 up.
- 20 The evidence, therefore, suggests that Usman Khan
21 continued to move after being shot, and to be capable of
22 making a purposeful movement, sitting up some 8 or so
23 minutes after the first two shots were fired?
- 24 A. Yes.
- 25 Q. What was your view of this from a physiological point of

33

- 1 view?
- 2 A. There are very, very few injuries identified in forensic
3 pathology that cause instantaneous incapacitation. It's
4 not as we see in films and on television. Individuals
5 do not drop lifeless to the ground. Pretty much the
6 only gunshot injuries that will do that are those that
7 enter certain parts of the brain which are vital for the
8 basic functions of life. We do not have that here.
- 9 The general examination shows that he was
10 essentially relatively fit at the time of the incident.
11 That will give him some degree of reserve. He would
12 also have been producing adrenaline, the hormone we're
13 all familiar with when we're nervous, stressed or
14 excited. That also gives you reserve, and in the
15 context of a bleeding injury, the heart beats faster, it
16 beats harder to keep blood pressure up. Adrenaline also
17 pushes that. So individuals will, assuming that there
18 hasn't been a shot to a critical structure, be capable
19 of entirely purposeful movement, often for some period
20 of time.
- 21 Q. In your view, were there any of the injuries which you
22 consider could not have been inflicted by the first two
23 shots, given that he then survived for a further
24 8 minutes and more?
- 25 A. I think that's quite a difficult question to answer. We

34

- 1 can certainly see protracted survival with some people
2 with damage to kidneys and to the lungs. That would be
3 less so with damage to the thoracic aorta, given its
4 size and given the extent of bleeding that would occur.
5 So I certainly couldn't exclude that a shot to the
6 kidney had not already occurred, but other than that, it
7 would be speculative, and I mustn't go further.
- 8 Q. Of course.
- 9 Your point 7, could you summarise your conclusions
10 concerning the penetrating sharp force injuries?
- 11 A. So I found that there were a number of penetrating
12 injuries on the body, most significantly to the throat
13 and to the abdomen, and my view, understanding the
14 circumstances as I do, was that they were consistent
15 with the use of a narwhal tusk and what was described to
16 me as a boarding pike.
- 17 None of those injuries have penetrated major blood
18 vessels, and I make reference again to the one that came
19 very close to the carotid artery. Those injuries would
20 have bled. In my view, they are not major contributors
21 to the death.
- 22 Q. Your conclusion 8, what was your summary in relation to
23 the bruising to the hands?
- 24 A. The bruising to the hands is entirely consistent with
25 the deceased having been stamped upon in order to disarm

35

- 1 him of a knife.
- 2 Q. Your point 9 concerning the laceration to the scalp?
- 3 A. Yes, the laceration to the top of the head, consistent
4 with blunt force impact, such as from a chair, a block
5 of wood, a stamp or a kick. However, no associated
6 skull fracture, no significant bleeding into the brain,
7 excepting there was a degree of subarachnoid bleeding,
8 and no traumatic brain injury: this was not a fatal head
9 injury.
- 10 Q. And then your point 10, what conclusion did you reach
11 about the shoulder dislocation that you described?
- 12 A. It is consistent with dynamic and direct physical
13 struggle. So force applied in the region of the
14 shoulder joint has the potential to dislocate that
15 joint.
- 16 Q. Are you aware in relation to your point 11 that a taser
17 was deployed against Usman Khan, and there has been
18 considerable work on the physical effects of tasers on
19 the human body. What was your view about any effect of
20 the taser in this case?
- 21 A. There is a lot of debate about taser. The general
22 perception would be that they do not cause fatal
23 abnormalities of heart rate, they simply cause
24 neuromuscular incapacitation, that's locking up of the
25 muscles causing collapse. Even if one was to accept the

36

1 vague suggestions by some that they can cause cardiac
 2 dysfunction, the very fact that there was significant
 3 bleeding associated with those gunshot wounds, together
 4 with observed physical activity, indicates that taser,
 5 in my view, played no part in the death.
 6 Q. Then point 12, a summary, please, of the toxicological
 7 examinations?
 8 A. He was not intoxicated through the use of drugs or
 9 alcohol at the time of the incident, although there was
 10 some evidence of the historic use of cocaine and
 11 possibly heroin.
 12 Q. Finally, looking at your point 15, what cause of death
 13 did you give, in summary, using the standard notation?
 14 A. The standard notation, we look at it in terms of X is
 15 due to Y. So if I just give the cause first: 1(a),
 16 shock and haemorrhage, due to 1(b), multiple gunshot
 17 wounds to the chest and abdomen.
 18 If I can just qualify those terms. "Shock" here is
 19 used in a medical sense, meaning that the vital organs
 20 are deprived of blood and oxygen. The reason then for
 21 that shock is haemorrhage, bleeding, arising from damage
 22 to internal organs, such as the lung, aorta and kidneys,
 23 and then that's due to, directly related to, the
 24 multiple gunshot wounds.
 25 Q. In this instance, is there any evidence of Usman Khan

37

1 having been shot after he died?
 2 A. When a bullet enters the body, it inevitably damages
 3 blood vessels, which can cause bleeding. However,
 4 bleeding requires blood pressure, and this is why in
 5 principle you cannot bruise a dead body, because you
 6 need the force of a beating heart to push blood out of
 7 already damaged blood vessels. So none of these gunshot
 8 wounds showed an appearance suggestive either of
 9 peri-mortem or post mortem delivery. So peri mortem, at
 10 the point of death, or post mortem, after death.
 11 Q. You are aware that after the second set of shots,
 12 18 shots between 14.10 and 14.11, Usman Khan was seen to
 13 collapse and make no further movement from 14.12.06. By
 14 that stage, were his injuries effectively
 15 non-survivable?
 16 A. Yes, they were unsalvageable.
 17 MR HOUGH: Thank you very much. Those are my questions.
 18 I'll look to my right to see if anyone else has any
 19 questions.
 20 I see not. Thank you very much Dr Fegan—Earl for
 21 giving your evidence.
 22 JUDGE LUCRAFT: Thank you, Dr Fegan—Earl. As always, very
 23 clear, very easy to follow what you have to say. Thank
 24 you very much.
 25 A. Thank you, sir.

38

1 MR HOUGH: Sir, the final witness is DCI Dan Brown, who is
 2 giving evidence for a formal purpose.
 3 JUDGE LUCRAFT: Yes.
 4 DCI DAN BROWN (recalled)
 5 Questions by MR HOUGH QC
 6 MR HOUGH: DCI Brown, you are still under oath and the jury
 7 know who you are.
 8 In the course of your work and your team's work,
 9 have you established the information about Usman Khan
 10 necessary for registration of his death?
 11 A. Yes, I have.
 12 Q. Those are matters such as his date and place of birth,
 13 his occupation and usual address, and so on?
 14 A. Yes.
 15 Q. Have you been provided with a draft Record of Inquest
 16 form containing those details filled in?
 17 A. Yes, I have it in front of me, sir.
 18 Q. Can you confirm that those details are correctly filled
 19 in on that document?
 20 A. They are correct, yes.
 21 Q. I will now pause to see if any other advocate wishes to
 22 ask you any questions about your investigation by way of
 23 sweep-up?
 24 No, thank you very much, those are all the questions
 25 we have for you.

39

1 JUDGE LUCRAFT: Thank you very much indeed.
 2 A. Thank you very much.
 3 MR HOUGH: Sir, that concludes the evidence in the Inquest
 4 of Usman Khan.
 5 JUDGE LUCRAFT: Thank you very much, Mr Hough.
 6 I know that the jury have heard reference on
 7 a number of occasions to a jury bundle, and what
 8 I'm going to suggest we might do, Mr Hough, is we might
 9 distribute those jury bundles now, and between us, just
 10 take the jury through what is contained in those
 11 documents.
 12 Ladies and gentlemen, you will see quite a large
 13 bundle being given to you, please don't concern
 14 yourselves too much about it. We have tried to be as
 15 comprehensive as we can, and they are in A3 format.
 16 Obviously because of Covid times you will have
 17 an individual copy each, and I will simply ask that
 18 those are handed out now. Once you've got copies,
 19 there's an index, as you will see, on the front page.
 20 What I'm going to invite Mr Hough to do is to just talk
 21 you through the contents. By all means — we won't go
 22 through every single page, but really just to explain
 23 the approach that's been taken and what the documents
 24 then contain.
 25 There is, in fact, I think a separate document that

40

1 you'll also get, which is a brief chronology which,
 2 again, I think will help you, particularly when you are
 3 listening to my summary of the evidence, and it will
 4 make a lot of sense to you, I hope, at the end of my
 5 summing-up when I then give you some legal directions as
 6 to what it is I'm asking you to deal with in the course
 7 of your deliberations.
 8 But I'll just ask Mr Hough to just take you through,
 9 very briefly, just the contents of that jury bundle.
 10 MR HOUGH: Sir, thank you.
 11 May we have the bundle on the screen, {DC8000/1},
 12 and members of the jury can follow what I'm going
 13 through either in their hard copy or on the screen,
 14 because it is identical in both. So page 1 is the cover
 15 sheet.
 16 At {DC8000/2}, a map showing Usman Khan's own home
 17 address, the address of his family and
 18 Fishmongers' Hall.
 19 {DC8000/3}, an overview map showing places where he
 20 purchased items used in the attack.
 21 {DC8000/5}, the plan and images referring to the
 22 purchase of the T-Rex tape on 20 November 2019.
 23 {DC8000/7}, the plan and images showing the purchase
 24 of the bag on 22 November 2019.
 25 {DC8000/9}, the plan and image relating to the

41

1 purchase of the padded jacket on the day before the
 2 attack, the 28th.
 3 {DC8000/11}, the plan and image showing the purchase
 4 of the boots and the base layer, again, the day before
 5 the attack.
 6 {DC8000/13}, the plan and images showing the
 7 purchase of the face mask, scissors and other items from
 8 Poundstretcher on the day before the attack.
 9 {DC8000/15}, the plan and images showing the
 10 purchase of the further gaffer tape on the evening
 11 before the attack.
 12 {DC8000/17}, a plan showing Usman Khan's home
 13 address and Stafford station where he took the train on
 14 the morning of the attack.
 15 {DC8000/18}, the image referred to by DCI Brown
 16 yesterday, showing Usman Khan's route to the station and
 17 CCTV captures of him leaving home and arriving at the
 18 station on the morning of the attack.
 19 {DC8000/20}, the plan showing Stafford train station
 20 and Euston, and the two images showing Khan boarding the
 21 train and on the train.
 22 Then {DC8000/22} is the first of a series of images
 23 relating to Khan's journey from Euston to Bank station,
 24 and the people with whom he went, Simon Larmour and
 25 John Crilly. We see further images in this set at

42

1 {DC8000/23} and {DC8000/24}.
 2 Then at {DC8000/26}, a plan and images relating to
 3 Usman Khan's walk from Bank station to
 4 Fishmongers' Hall.
 5 {DC8000/27}, the same plan but with the image of
 6 Usman Khan, Simon Larmour and John Crilly arriving at
 7 Fishmongers' Hall on the day of the attack, just before
 8 10.00 am.
 9 {DC8000/28}, an overview plan of the location around
 10 Fishmongers' Hall, showing it in its surrounding locale,
 11 which we showed in the first evidence of DCI Brown.
 12 {DC8000/29}, a more focused plan of the north side
 13 of London Bridge, showing Fishmongers' Hall,
 14 Adelaide House, the building opposite, the various
 15 locations of CCTV cameras from which the jury saw
 16 footage. In particular, the jury may note camera 115 of
 17 the City of London Police from which a lot of important
 18 footage was seen.
 19 From {DC8000/31}, the jury will see a number of
 20 images from within Fishmongers' Hall. Over on the
 21 right, the entrance to the main staircase and the
 22 landing.
 23 {DC8000/32}, similarly, images on the upper
 24 Fishmongers' Hall showing the Court Dining Room and two
 25 views of the main Banquet Hall where the main session of

43

1 the event took place.
 2 {DC8000/34}, a layout plan of the ground floor of
 3 Fishmongers' Hall, and the red numbers refer to numbers
 4 of photographs which then follow on from {DC8000/35}
 5 onwards. So page 35, a view in the entrance foyer
 6 looking towards the main doors and out of the front of
 7 Fishmongers' Hall.
 8 {DC8000/36}, a view to the left as one enters the
 9 entrance foyer of Fishmongers' Hall.
 10 {DC8000/37}, a view from the location shown in the
 11 last photograph, looking back towards the entrance door
 12 on the right, and showing straight ahead and slightly to
 13 the right the office where Jack Merritt received first
 14 aid.
 15 {DC8000/38} and {DC8000/39} are views of that
 16 reception office.
 17 {DC8000/40}, the main corridor which one enters just
 18 beyond the entrance hall when going into
 19 Fishmongers' Hall, with the main staircase off to the
 20 right. The jury will recall the battle between
 21 Usman Khan and some of those who confronted him, took
 22 place back and forth across this corridor.
 23 {DC8000/41-42} show the area immediately outside the
 24 gent's toilets where Saskia Jones was attacked by the
 25 cloakroom desk, with the steps up to the gent's toilets

44

1 inside which Jack Merritt was attacked.
 2 {DC8000/43}, the urinals area within the toilets
 3 where Jack Merritt was stabbed multiple times.
 4 {DC8000/44}, a view into the entrance foyer through
 5 the right set of double doors, a view through towards
 6 the cloakroom, and through the left set of double doors,
 7 one can see behind the pillar the main staircase. And
 8 just to the right of those left set of double doors, one
 9 can see a bracket with the boarding pike missing, which
 10 Lukasz Koczocik, the porter, used in confronting
 11 Usman Khan.
 12 {DC8000/45}, the main staircase of
 13 Fishmongers' Hall, where Saskia Jones collapsed and
 14 where another attendee, Stephanie Szczotko, was
 15 attacked.
 16 {DC8000/46}, a photograph mid-way up the staircase.
 17 Then {DC8000/47}, we see a plan of the upper floor
 18 of Fishmongers' Hall, once again with numbers for the
 19 photographs which follow, the first of those at
 20 {DC8000/48}, the landing at the top of the stairs from
 21 which the various function rooms lead off.
 22 {DC8000/49}, an overview of the main Banqueting
 23 Hall.
 24 {DC8000/50}, the Court Drawing Room, which led off
 25 the Banqueting Hall and where one of the breakout

45

1 sessions took place.
 2 {DC8000/51}, the Court Dining Room, where the brunch
 3 was served at 11.00 am on the day of the attack.
 4 {DC8000/52}, another view of that room.
 5 {DC8000/53}, the vestibule area immediately outside
 6 the Court Drawing Room, we see on either side brackets
 7 from which the narwhal tusks were taken.
 8 {DC8000/54}, a view from that vestibule area with
 9 the landing on the right, at the top of the main
 10 staircase.
 11 {DC8000/55}, a view back into the main Banqueting
 12 Hall from the Court Drawing Room.
 13 {DC8000/56}, a view further into the main Banqueting
 14 Hall.
 15 {DC8000/57}, another view of the main Banqueting
 16 Hall.
 17 And {DC8000/58}, an overview shot of the main
 18 Banqueting Hall.
 19 {DC8000/59}, a layout of the ground floor, with
 20 purple markers identifying some of the items of
 21 significance.
 22 {DC8000/60}, similarly, a plan of the first floor
 23 with the location of the narwhal tusks pointed out.
 24 {DC8000/61}, a layout plan of the ground floor which
 25 was used in DCI Brown's initial evidence showing the

46

1 movements of Jack Merritt and Saskia Jones after they
 2 had been attacked.
 3 {DC8000/62}, another plan, again using during
 4 DCI Brown's initial evidence, showing the locations of
 5 the attacks on those who were significantly but not
 6 fatally injured.
 7 {DC8000/64}, a plan of the immediate area around
 8 Fishmongers' Hall, showing the entrance to the hall and
 9 the location where Usman Khan was brought to the ground
 10 on the bridge. This helpfully shows the jury the street
 11 level below the bridge, the area where members of the
 12 public were seen, in respect of whom the firearms
 13 officers said they had concerns.
 14 {DC8000/65}, a similar plan and aerial image, but
 15 from a different perspective, directly over
 16 Fishmongers' Hall.
 17 {DC8000/66}, a set of aerial images, showing the
 18 front of Fishmongers' Hall from different perspectives.
 19 {DC8000/67}, a set of aerial images showing the
 20 north end of London Bridge. We can see on the upper
 21 right image Adelaide House on the left,
 22 Fishmongers' Hall on the right. In all the images we
 23 can see the yellow and blue evidence tent covering the
 24 area where Usman Khan was brought to the ground and
 25 initially shot.

47

1 {DC8000/68}, a plan and images showing the last
 2 sightings on CCTV of Jack Merritt and Saskia Jones.
 3 {DC8000/69}, images on the right showing
 4 Jack Merritt in his injured state which allowed us to
 5 time the attack to beginning between 13.56 and 13.57.
 6 {DC8000/71}, a plan showing the front of
 7 Fishmongers' Hall and on the right images of Usman Khan
 8 leaving the hall on the CCTV camera immediately over the
 9 door with his two knives visible, and Steven Gallant
 10 just leaving the doors, Mr Gallant being one of those
 11 who tackled Usman Khan.
 12 {DC8000/72}, two further images showing Usman Khan
 13 leaving the hall in the seconds that followed, again,
 14 the two knives visible.
 15 {DC8000/73}, following the sequence through, images
 16 showing Usman Khan having got down onto the pavement
 17 from the steps of Fishmongers' Hall, and those who
 18 followed him immediately out. Mr Gallant in his purple
 19 jumper with the narwhal tusk in the upper image. In the
 20 lower image, Mr Crilly discharging the fire extinguisher
 21 while Usman Khan was engaged with Mr Gallant on the
 22 street below and, sir, you will recall the narwhal tusk
 23 being wrested away by Usman Khan and thrown back at
 24 Mr Gallant.
 25 {DC8000/74} following the sequence along,

48

1 Mr Darryn Frost in the doorway of Fishmongers' Hall with
 2 the second narwhal tusk. We can see here a pretty good
 3 image of an intact narwhal tusk. Lukasz Koczocik at the
 4 top of the steps, and Mr Crilly just in view, following
 5 Usman Khan down the pavement.
 6 {DC8000/75}, the plan that we've seen on the left,
 7 and this is the first of a series of captures from the
 8 CCTV camera north of Fishmongers' Hall, showing
 9 the confrontation between Mr Frost, Mr Gallant and
 10 Mr Crilly; Mr Frost stabbing at Usman Khan with the
 11 narwhal tusk, Mr Crilly discharging the fire
 12 extinguisher.
 13 {DC8000/76}, a capture from the same CCTV camera
 14 5 seconds later, again, showing the three men
 15 confronting Usman Khan.
 16 Then {DC8000/77}, about half a minute later a screen
 17 capture with Usman Khan now on the floor and Mr Gallant,
 18 Mr Frost and Mr Crilly restraining him.
 19 {DC8000/79}, we can see here a plan of the area
 20 showing Fishmongers' Hall and its main entrance, and
 21 with a large black circle the place where Usman Khan had
 22 been brought down. We see marked in green the locations
 23 of the three City of London armed officers from Trojan
 24 City 2. Their circles show their locations when they
 25 were first confronting Usman Khan when the first shots

49

1 were fired, and the lines with green arrows show the
 2 routes they followed immediately after the first shots
 3 had been fired as they backed away.
 4 We can also see in the bottom left, Trojan City 2
 5 marked, and immediately below, the time of its arrival
 6 and the identities of the officers who were in it using
 7 their pseudonyms.
 8 From {DC8000/80} we'll see a series of CCTV captures
 9 from the camera north of Fishmongers' Hall, showing the
 10 arrival and initial actions of those officers. So on
 11 {DC8000/80}, the moment when YX99 and YX16 had just
 12 approached.
 13 {DC8000/81}, the moment when those officers were on
 14 scene, Mr Frost was still on top of Usman Khan, and was
 15 about to be removed from him by WS5, who was on scene.
 16 {DC8000/82}, a screen capture showing the moment
 17 when Mr Frost had been pulled away, and when YX16
 18 discharged his taser which we can see marked by the
 19 wires running down from YX16, and when YX99 fired his
 20 carbine, we can see that from the smoke just to the left
 21 of WS5.
 22 {DC8000/83}, we see a screen capture from the moment
 23 of those three officers pulling back almost to the black
 24 hostile vehicle mitigation barriers to the north end of
 25 the bridge.

50

1 Then finally in relation to this initial
 2 confrontation, {DC8000/84}, a set of captures from those
 3 officers' body-worn video cameras, which the jury will
 4 recall, which are here marked with the identities of
 5 various people. Mr Meek, the jury may recall, was the
 6 British Transport off duty police officer who got hold
 7 of one of the knives and took it away.
 8 {DC8000/86}, is a plan showing the layout of London
 9 Bridge and the north area but with concentric circles to
 10 show a radius of 50 metres and a radius of 100 metres
 11 around Usman Khan. The jury will be aware of the
 12 significance of the 100-metre radius as the recommended
 13 distance to keep away from a person with an IED.
 14 JUDGE LUCRAFT: I think it was phrased very much as
 15 a minimum, recommended minimum distance.
 16 MR HOUGH: Yes.
 17 JUDGE LUCRAFT: And of course we heard the evidence,
 18 Mr Hough, that if it were in a suitcase or in a car,
 19 that distance expanded to either 200 or 400 metres, but
 20 it gives us a very useful illustration of quite what
 21 100 metres means in the context of what we see in front
 22 of us.
 23 MR HOUGH: It does.
 24 Then from {DC8000/87} we see a series of plans and
 25 images which are used to depict the second phase of the

51

1 confrontation of firing between 14.10 and 14.11. So on
 2 {DC8000/87} we can see marked the various armed response
 3 vehicles, again, each of them with a legend beside it
 4 identifying the vehicle by call sign, the time of its
 5 arrival, and the officers it contained, and with blue
 6 flags to show the locations of the armed officers at the
 7 time of the shots being fired during that second phase.
 8 {DC8000/88}, an image we saw many times. It shows
 9 that plan on the upper left, an overview CCTV image on
 10 the upper right to show police positions, and a sequence
 11 of images at the bottom showing captures from the NPAS
 12 helicopter footage, the first, 14.09, before the firing,
 13 second, 14.10.28 when Usman Khan sat up, just before the
 14 wave of shots began, and on the bottom right, at
 15 14.11.14, during the period of the firing when Khan was
 16 lying on the floor.
 17 {DC8000/89}, an equivalent document, except this
 18 time at the bottom showing a series of screen captures
 19 from the City of London Police camera, camera 115, which
 20 as the jury heard, the tactical firearms commander in
 21 the City of London Police operations room had access to.
 22 {DC8000/90} once again shows the location of the
 23 vehicles and armed officers.
 24 {DC8000/91} shows a number of captures from
 25 body-worn video footage from some of the significant

52

1 officers . We looked at most of those in the course of
 2 their evidence.
 3 {DC8000/92} shows with blue markers the places where
 4 cartridge cases were recovered, and with red markers,
 5 areas of ballistic grazing.
 6 {DC8000/93} shows ballistic grazing points and where
 7 ballistic material was found, illustrating the point
 8 that some of the officers made about the effects of
 9 gunfire on the backdrop area.
 10 JUDGE LUCRAFT: Yes. And again also from the training
 11 evidence we heard yesterday about -- the training
 12 evidence that you have to look to see behind, what the
 13 environment is, et cetera.
 14 MR HOUGH: Yes.
 15 {DC8000/94}, one of the knives used by Usman Khan in
 16 the attack.
 17 {DC8000/95}, the other knife used with a sign of
 18 where the tape was used to connect that to the gloves.
 19 {DC8000/96}, one of the narwhal tusks after the
 20 attack with, as we can see, the front sharp end broken
 21 off.
 22 {DC8000/97}, the apparent IED worn by Usman Khan
 23 after it had been cut off and reconstructed.
 24 {DC8000/98}, at the top, the motorcycle mask he wore
 25 and at the bottom the two gloves he wore.

53

1 {DC8000/99}, The Fortress of the Muslim invocations
 2 or prayers book, found in the urinals area at
 3 Fishmongers' Hall.
 4 {DC8000/100}, the bag found in the cubicle after the
 5 attack, and over on the right its contents, including
 6 tape and scissors, which DCI Brown told us would have
 7 been used to don the apparent IED, and also the third of
 8 the knives, which was bought in that set for which the
 9 packaging was found in the bins outside Usman Khan's
 10 flat .
 11 Then {DC8000/101}, a close-up on that knife found in
 12 the bag.
 13 Sir, that's a run through the contents of the jury
 14 bundle. Obviously some of it more relevant to the
 15 jury's task than others.
 16 JUDGE LUCRAFT: Thank you very much indeed, Mr Hough.
 17 Ladies and gentlemen, we've now got to the stage
 18 where there are some issues of law that I need to talk
 19 about with counsel, so I'm going to do that now, and
 20 then tomorrow morning, I will deal with my summing-up of
 21 the evidence you have listened to over the last few
 22 days. So please, as I have said before, leave
 23 everything where it is, press that magic pause button,
 24 go and enjoy what is left of the British summer, we'll
 25 think of you whilst we're working away in here, but

54

1 we'll look forward to seeing you all, please, for
 2 10 o'clock tomorrow morning. Thank you very much.
 3 (In the absence of the jury)
 4 MR HOUGH: Sir, yesterday evening we circulated written
 5 submissions on determinations and directions to the
 6 jury.
 7 As I indicated yesterday, we have given all
 8 interested persons the facility to put in a responsive
 9 document today, however, we are aware that interested
 10 persons may not wish to, and if no interested person
 11 wishes to put in a responsive document, and if
 12 interested persons are prepared to deal with oral
 13 submissions now, we are ready and willing to do so.
 14 I don't at all wish to rush any interested person and we
 15 can quite readily deal with the submissions first thing
 16 tomorrow morning, but equally, we are aware of the
 17 benefits of you having a clean start with your
 18 summing-up and directions tomorrow morning.
 19 JUDGE LUCRAFT: Yes.
 20 MR HOUGH: So I'll let any interested person who wishes to
 21 just indicate whether they would like to put in
 22 a responsive document or have oral submissions tomorrow.
 23 JUDGE LUCRAFT: Perhaps if I can just ask: does anybody wish
 24 to put in a written document?
 25 I see four nos.

55

1 And in terms of oral submissions, I'm looking at
 2 Mr Bunting simply because he is directly in front of me,
 3 and I don't think he wished to say anything in court.
 4 If I may then turn to Ms Barton and Mr Butt:
 5 anything by way of oral submissions either of you wish
 6 to say?
 7 MS BARTON: No, thank you, sir.
 8 MR HOUGH: Sir --
 9 MR BUTT: Sorry, all I would have said is that all
 10 interested parties have seen how you summed up in
 11 Westminster and London Bridge, and we would simply ask,
 12 as Mr Hough has indicated in his written document, for
 13 a similar direction to that which was given in those
 14 Inquests, that any narrative must reflect the fact that
 15 there has been no criticism of the police officers .
 16 JUDGE LUCRAFT: Yes. I think, Mr Butt, that must be right,
 17 and I'm sure that's endorsed by Ms Barton.
 18 MR HOUGH: Sir, what I was going to do was, if you will bear
 19 with me for 10 or 15 minutes, summarise our
 20 submissions --
 21 JUDGE LUCRAFT: Yes.
 22 MR HOUGH: -- for the record.
 23 JUDGE LUCRAFT: Yes.
 24 MR HOUGH: I will do so relatively briefly, given the degree
 25 of consensus, but it strikes us as important in a case

56

1 of this significance to have a summary of our position
 2 on the record.
 3 JUDGE LUCRAFT: Yes, I'm conscious we have not had a break,
 4 Mr Hough. I'm in your hands. We can either do that
 5 now, or have a short break and then come back, or we can
 6 --- as you have said, if it's going to be 10 or 15
 7 minutes people may prefer to have that and then break at
 8 that stage.
 9 MR HOUGH: Well, I would suggest we deal with it now because
 10 it will be relatively brief.
 11 JUDGE LUCRAFT: I'm perfectly content to do so, but if
 12 somebody who wishes to be present to hear it would like
 13 a short break, I'm happy to accommodate that.
 14 Submissions by MR HOUGH QC
 15 MR HOUGH: Again, I see no enthusiasm.
 16 Sir, before I begin, may I ask you to make an order
 17 under section 4(2) of the Contempt of Court Act 1981
 18 that publication of what I say and any responses to it,
 19 including from you, be deferred until after the jury
 20 have returned determinations, that is necessary to avoid
 21 prejudicing the jury's deliberations by their reading
 22 any record of these submissions.
 23 JUDGE LUCRAFT: I will so direct.
 24 MR HOUGH: Sir, over the last two weeks, there has been
 25 a detailed investigation into the death of Usman Khan,

1 focusing on the confrontation with armed police in which
 2 he died. Under our law, any killing by a police officer
 3 must be subject to the most rigorous and independent
 4 form of inquest. The European Convention on Human
 5 Rights requires an independent investigation compliant
 6 with Article 2 standards, and our domestic law requires
 7 an inquest and requires it to be before a jury.
 8 It is, we submit, a mark of civilised society that
 9 police are subject to such scrutiny, even where a person
 10 is killed after perpetrating a terrible attack. It's
 11 right that every one of the officers who fired his
 12 weapon has had to explain and justify his conduct, as
 13 have the control room officers most directly involved.
 14 It is now for you to decide what determination
 15 should be left to the jury and how they should be
 16 directed to give those determinations. We've provided
 17 detailed written submissions on this topic which,
 18 subject to your direction, will be posted on the website
 19 and supplied to the press.
 20 In outline, our suggested approach is as follows:
 21 first, the determinations can and should resolve the key
 22 issue whether Usman Khan was lawfully killed by the
 23 conventional means of selecting a short-form conclusion.
 24 Second, as Coroner, you have a duty not to leave
 25 conclusions to the jury which would not be safe for them

1 to return. Where only one conclusion is appropriate on
 2 the evidence, the Coroner must direct the jury to return
 3 that conclusion.
 4 Third, on all the evidence in this case, it would be
 5 unsafe for the jury to say anything other by way of
 6 short-form conclusion than that Usman Khan was lawfully
 7 killed. The evidence that the officers acted in lawful
 8 defence of themselves and others is, we submit, all one
 9 way.
 10 Fourthly, therefore you should direct the jury to
 11 return a conclusion of lawful killing, however, you
 12 should explain to them briefly why you are directing
 13 them in that way.
 14 Fifth, the jury should still be given an important
 15 role. As the primary tribunal of fact they should be
 16 asked to produce for each attacker a narrative account
 17 of the means and circumstances of death. We've
 18 identified a series of matters which they could be asked
 19 to address in their narrative, and directions which they
 20 should be given to ensure that it is appropriately
 21 worded.
 22 Addressing briefly the legal principles, we have set
 23 those out in more detail at paragraph 15 of the
 24 document, but the rules governing inquest determinations
 25 can be summarised as follows: under section 10 of the

1 2009 Act, an inquest must produce a determination
 2 answering the four questions: who the deceased was, and
 3 when, where and how he or she came by his or her death.
 4 It shouldn't address other matters and it must not
 5 appear to determine any question of criminal liability
 6 of a named person or any other question of civil
 7 liability at all.
 8 Where a death was due to deliberate use of force by
 9 a State agent as here, the State's procedural obligation
 10 under Article 2 is to establish a convention compliant
 11 investigation is engaged. Accordingly, the "how"
 12 question has the broad meaning: by what means and in
 13 what circumstances the person died. That question may
 14 be answered by a more extended form of narrative
 15 determination than inquests have traditionally used.
 16 Such a narrative may be used as well as or instead of
 17 one of the well known short form verdicts.
 18 Where a coroner sits with a jury, the coroner is
 19 obliged only to leave to the jury conclusions which they
 20 could properly return on the evidence. The relevant
 21 legal test, dubbed Galbraith plus, has two limbs: first,
 22 is there evidence on which the jury could properly reach
 23 a particular conclusion and, second, would it be safe
 24 for the jury to return the conclusion. Unless both
 25 those questions are answered yes, the conclusion should

1 not be left .
 2 The result of that legal rule is that a coroner may,
 3 in some cases, leave only one conclusion to a jury or
 4 direct them to return a particular conclusion as part of
 5 their determination. The Divisional Court confirmed
 6 that point in the case of Ex parte Thomas, upholding
 7 a directed verdict .
 8 The European Court of Human Rights in the Bubbins
 9 case has confirmed that there's no objection in
 10 Article 2 terms to a coroner directing a jury to return
 11 a lawful killing conclusion if it is the only legitimate
 12 conclusion on the evidence. There the Strasbourg court
 13 found no criticism to make of an inquest in which
 14 a lawful killing verdict had been directed.
 15 We address lawful killing at paragraph 16 of our
 16 document and the legal principles. That short-form
 17 conclusion is a finding that death resulted from an act
 18 which would otherwise be a homicide offence, but which
 19 has a legal justification under the criminal law. Both
 20 the defence of self-defence and that of lawful defence
 21 of others involve the application of a two-stage test.
 22 First, did the person using force honestly believe that
 23 it was necessary to do so in defence of self or others,
 24 that's the subjective element. If so, did the person
 25 use no more force than was reasonably necessary in the

1 circumstances as he or she honestly believed them to be,
 2 that's the objective element.
 3 The law does not require people faced with a threat
 4 to calibrate precisely the amount of force to be used.
 5 The use of graduated force in some circumstances may be
 6 unrealistic or impossible.
 7 Furthermore, the law recognises that a person may
 8 act preemptively in defence of self or others. He or
 9 she need not wait passively for an attack or for
 10 a threat to cause harm before using force.
 11 And finally in this context, where force is used by
 12 a trained firearms officer, the legal test does not
 13 change, but training may be taken into account in the
 14 application of the test to the facts.
 15 At paragraphs 18-21 of our submissions we set out to
 16 the authorities governing the content of a narrative in
 17 an inquest determination. In short, a narrative in
 18 an Article 2 case is intended to express succinctly the
 19 conclusions of the coroner or jury on the key factual
 20 issues relating to the means and circumstances of death.
 21 Let me then turn to the application of those
 22 principles to the short-form conclusion in this case.
 23 In our submission, the determination ought to resolve
 24 the issue whether the killing of Usman Khan was lawful.
 25 It is a question which can be answered on the evidence,

1 which has microscopically studied every stage and aspect
 2 of the armed engagement. Secondly, it's a question
 3 which should be answered, both because an Article 2
 4 investigation ought to be capable of resolving such
 5 questions, if possible, and because it is a key issue
 6 relevant to the cause and circumstances of death.
 7 In our submission, there's only one conclusion the
 8 jury could safely reach on this issue, namely that
 9 Usman Khan was lawfully killed. It would be unsafe on
 10 the evidence to hold that the test for self-defence and
 11 self-defence of others was not satisfied in respect of
 12 any individual officer's use of force.
 13 Because it's not possible to say exactly which shot
 14 was fatal, or with precision which officer fired each
 15 shot that we looked at with the pathologist today, it's
 16 necessary to examine the use of force by every officer
 17 at each stage.
 18 Our written submissions address in detail each stage
 19 of the incident and set out all the evidence on which we
 20 rely from paragraph 22 to paragraph 45. Anyone wishing
 21 to review the details should read those submissions when
 22 they go on the website in due course. I will be brief
 23 in summarising our conclusions now.
 24 May I first address the initial engagement at 14.02,
 25 which involved the officers in Trojan City 2 and apply

1 the two-stage test.
 2 It cannot be doubted that YX99, who fired on
 3 Usman Khan twice, honestly believed that it was
 4 necessary to use force in defence of self and others.
 5 He had seen that Usman Khan was wearing a suicide vest,
 6 which he and all other officers on the scene believed to
 7 be genuine. He had issued a warning, to which
 8 Usman Khan apparently did not respond. Given what he
 9 knew of Usman Khan's actions up to that point, it cannot
 10 seriously be suggested that YX99 did not honestly
 11 believe that he had to act to stop a devastating
 12 explosion.
 13 Equally, and turning to the objective element, it is
 14 unquestionable that the level of force was no greater
 15 than reasonably necessary in the circumstances as the
 16 officer perceived them to be. Only the use of a firearm
 17 would have had any prospect of immediately
 18 incapacitating Usman Khan, and the use of force
 19 corresponded with the officer's training.
 20 Turning then to the subsequent decisions to fire
 21 between 14.10 and 14.11, and again, applying the
 22 two-stage test, it is plain that each officer at each
 23 relevant point honestly believed that it was necessary
 24 to use force in defence of himself and others nearby.
 25 Sir, seven short points in that regard.

1 First, each officer was aware that Usman Khan was
 2 wearing what appeared to be an IED. Each said he
 3 believed it to be real. That is plausible, given that
 4 the officers at the scene generally took that view, as
 5 is evident from their shouts audible on the footage.
 6 It's also plausible because the EOD lead,
 7 Mr Middleditch, said that he would have regarded it as
 8 realistic, with all his knowledge, and because the chief
 9 firearms instructors with their knowledge regarded the
 10 belt as a convincing imitation.
 11 Second, even if the officers had had any doubts,
 12 they were trained to treat such belts as real IEDs until
 13 convinced otherwise. Given the potential effects of
 14 such a device, the reasons for such training are not
 15 hard to discern.
 16 Third, before each officer fired on Usman Khan, he
 17 had seen purposeful movements, including movements of
 18 the hands by the belt. In particular, the firing began
 19 when Usman Khan, who had been told repeatedly to stay
 20 back and stay down, suddenly sat up. The chief firearms
 21 instructor said that such a movement by the suspect in
 22 such a situation would justify a critical shot being
 23 taken.
 24 Fourth, it was imperative to prevent any detonation.
 25 The officers themselves would likely have been killed or

1 seriously injured by a real IED detonated in these
 2 circumstances. The blast, as we've seen from that image
 3 earlier today, would have posed a clear risk of death or
 4 serious injury to members of the public in the area,
 5 including beneath the bridge and in buildings nearby.
 6 Fifth, the shots fired between 14.10 and 14.11 were
 7 fired almost simultaneously by multiple officers in
 8 different locations, indicating that different officers
 9 formed independent judgments of the need to use force at
 10 the same time. In particular, over the first
 11 13 seconds, 10 shots were fired by three officers in
 12 different positions: AZ99 at the top of the steps, WS5
 13 at the base of the steps, and R158 across the bridge.
 14 Sixth, the justification for shots being fired at
 15 this time was supported by the fact that the tactical
 16 firearms commander in the control room and the tactical
 17 advisor reached the decision that a critical shot
 18 appeared justified at the moment Usman Khan sat up. On
 19 their evidence they made that decision independently of
 20 the officers on the ground.
 21 Seventh, the officers had not fired in response to
 22 less significant movements between 14.03 and 14.10. At
 23 14.10 there was a more dramatic movement suggesting that
 24 Usman Khan was sufficiently conscious to take
 25 significant action. Furthermore, as the stand off

1 continued, it was impossible to get medical assistance
 2 to any of those critically injured inside
 3 Fishmongers' Hall.
 4 So those points all support the officers' reasonable
 5 belief.
 6 As regards the objective element, once again, the
 7 force used was no more than reasonably necessary in
 8 response to the threat as was honestly — and reasonably
 9 for that matter — understood. The officers had
 10 attempted to contain the threat without force by
 11 covering Usman Khan and issuing oral commands. There
 12 was no realistic means short of the use of firearms to
 13 ensure that the apparent IED could not be detonated.
 14 So that's what we say about the short-form
 15 conclusion. I will be much briefer in relation to the
 16 supplementary narrative.
 17 Although we submit that the jury should be directed
 18 to return a short-form conclusion of lawful killing, we
 19 say that they should be given the important task of
 20 preparing the narrative account of Usman Khan's death
 21 which will form part of the determination. We have set
 22 out in our document at paragraph 48, and indeed also at
 23 paragraph 2(b), a series of topics which we suggest they
 24 can be told they may address in that supplementary
 25 narrative.

1 We should add that this was the approach taken in
 2 the inquests of the attackers in the Westminster Bridge
 3 and the Westminster and the London Bridge and
 4 Borough Market cases. The jury in each of those cases,
 5 you will recall, sir, prepared an excellent narrative.
 6 JUDGE LUCRAFT: I don't think we found a single fault with
 7 a single word in either.
 8 MR HOUGH: No.
 9 We've also set out in paragraph 48 the accompanying
 10 directions which should be given to the jury, again,
 11 based on pretty well known principles.
 12 Furthermore, as we submit in paragraph 49, you may
 13 wish to point out in your more general directions on the
 14 evidence that there has been no evidence suggesting any
 15 basis for criticism of the officers who engaged with the
 16 attackers. Sir, although we recognise that Mr Bunting,
 17 like the representative of any other interested person,
 18 isn't obliged to put a case in the Inquest, it is
 19 telling that he, no doubt acting responsibly and on
 20 instructions, has not challenged any of the officers,
 21 his clients no doubt giving those instructions
 22 consistent with their general position of deploring what
 23 happened on that day.
 24 So in summary, sir, we say that a directed
 25 short-form conclusion of lawful killing is the legally

1 correct way to resolve the issue of whether the officers
2 acted lawfully, and that the jury should be tasked with
3 producing the narrative of the circumstances of death.
4 With that short-form conclusion and that narrative to
5 form the determination of this Inquest.
6 JUDGE LUCRAFT: Thank you, that's very helpful indeed,
7 Mr Hough. I don't think anyone, as I say, indicated
8 they needed to say anything, and it's an approach that
9 I will be taking.
10 MR HOUGH: Thank you very much, sir.
11 In the light of that, I don't think it would be
12 necessary for you to produce a ruling unless anyone
13 suggests otherwise. The rationale will appear in due
14 course on the transcript in accordance with what I've
15 said, and also on the website in the form of our written
16 submissions.
17 JUDGE LUCRAFT: Thank you. It's very likely, Mr Hough,
18 during the course of this afternoon, that I will ask
19 that the directions that I intend to provide to the jury
20 are circulated to IPs so that everyone can see the basis
21 on which I propose to direct the jury in due course, but
22 it will largely follow what is set out in your extremely
23 helpful and comprehensive submissions.
24 MR HOUGH: Thank you, sir.
25 JUDGE LUCRAFT: Thank you. Well, we will meet again

69

1 tomorrow morning. As you know, Mr Hough, I'm not very
2 good at timing when it comes to how long a summing-up
3 will be, but my instinct is that if we start at 10.00,
4 with a fair wind the jury will be in retirement by the
5 lunch break. That's my plan, anyway. We'll see how we
6 do tomorrow.
7 MR HOUGH: Thank you, sir.
8 JUDGE LUCRAFT: Very well. I'll rise.
9 (12.14 pm)
10 (The court adjourned until 10.00 am on
11 Thursday, 10 June 2021)
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17
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19
20
21
22
23
24
25

70

1
2 INDEX
3 PAGE
4 DR ASHLEY FEGAN—EARL (sworn)1
5 Questions by MR HOUGH QC1
6 DCI DAN BROWN (recalled)39
7 Questions by MR HOUGH QC39
8 Submissions by MR HOUGH QC57
9

71

72

A	50:4 53:10 54:7 65:6 67:22 68:9 69:15	associated (10) 8:25 11:22 25 12:18,24 24:5 25:10 27:19 36:5 37:3	below (4) 13:6 47:11 48:22 50:5	bruises (1) 21:14	chief (2) 65:8,20	19:14 21:2 22:16,20 23:12 24:13 32:24 33:7 35:14,24 36:3,12 68:22
a3 (1) 40:15	although (6) 14:12 20:11 26:16 37:9 67:17 68:16	assuming (1) 34:17	belt (2) 65:10,18	bruising (13) 21:2 23:8,19 24:1,3,16 25:8 26:2,4 28:1 29:2 35:23,24	chronology (1) 41:1	consultant (1) 2:4
abdomen (7) 11:10 12:14 15:23 20:16,23 35:13 37:17	always (2) 1:19 38:22	attack (15) 41:20 42:2,5,8,11,14,18 43:7 46:3 48:5 53:16,20 54:5 58:10 62:9	belts (1) 65:12	brunch (1) 46:2	circle (1) 49:21	contact (3) 33:2,3,5
abdominal (11) 11:8 12:3,16 13:9,11,21 20:14,15 27:16 28:10 32:17	amount (3) 9:21 10:21 62:4	attacked (4) 44:24 45:1,15 47:2	beneath (7) 9:2 12:5,16 15:23,25 26:11 66:5	bubbins (1) 61:8	circles (2) 49:24 51:9	contain (2) 40:24 67:10
able (2) 10:13 31:17	anabolic (3) 5:14 30:9,11	attacker (1) 59:16	benefits (1) 55:17	buccal (1) 23:20	circuitous (1) 15:22	contained (2) 40:10 52:5
abnormalities (1) 36:23	analyses (1) 30:22	attackers (2) 68:2,16	beside (1) 52:3	building (1) 43:14	circumstances (1) 2:17 35:14 59:17 60:13	containing (1) 39:16
above (7) 7:9 8:17 9:5 11:11 14:11 16:4 17:15	analysis (2) 29:23 30:4	attacks (1) 47:5	between (16) 6:20 7:22 15:19 16:13 17:17 20:10 23:18 38:12 40:9 44:20 48:5 49:9 52:1 64:21 66:6,22	buildings (1) 66:5	circumstances (1) 2:17 62:1,5,20 63:6 64:15 66:2 69:3	contaminate (1) 31:8
abraded (1) 18:13	anatomical (1) 7:15	attain (1) 7:20	beyond (1) 44:18	bullet (36) 7:3,5 8:14,17 9:2 10:13 11:3,6,10,10,13,24 12:7,25 13:22,23 14:9,14,25 15:8,15,21 16:2,5,16 22:5,6 23:3 27:3,14,17 28:5,16,24 29:1 38:2	city (7) 43:17 49:23,24 50:4 52:19,21 63:25	contamination (2) 30:8 31:2
abrasion (3) 19:4 24:5 25:10	another (13) 13:25 15:1 16:11 17:22 20:9 22:9,23 29:4 31:5 45:14 46:4,15 47:3	attempted (1) 67:10	bins (1) 54:9	bullets (10) 6:18 8:3 9:21 15:17 26:19,23 27:11,21 28:3 32:22	civil (1) 60:6	contempt (1) 57:17
abrasions (1) 21:15	answer (3) 1:16 33:6 34:25	attendee (1) 45:14	birth (1) 39:12	bundle (5) 40:7,13 41:9,11 54:14	civilised (1) 58:8	content (2) 57:11 62:16
absence (2) 1:3 55:3	answered (4) 60:14,25 62:25 63:3	audible (1) 65:5	bit (1) 23:10	button (1) 54:23	clean (1) 55:17	contents (4) 40:21 41:9 54:5,13
absolutely (4) 11:16 13:5 18:22 28:7	answering (1) 60:2	authorities (1) 62:16	black (2) 49:21 50:23	bundles (1) 40:9	clear (3) 33:10 38:23 66:3	context (4) 29:14 34:15 51:21 62:11
abuse (1) 5:4	anticipation (1) 4:7	avoid (1) 57:20	blade (2) 9:1 28:22	bunting (2) 56:2 68:16	clenched (1) 23:15	continued (3) 33:15,21 67:1
access (1) 52:21	anybody (1) 55:23	aware (9) 7:21 9:18 17:3 36:16 38:11 51:11 55:9,16 65:1	blast (1) 66:2	but (3) 56:4,9,16	clients (1) 68:21	control (2) 58:13 66:16
accessing (1) 15:24	anything (6) 5:24 18:9 56:3,5 59:5 69:8	away (7) 9:19 48:23 50:3,17 51:7,13 54:25	bled (1) 35:20	buttock (1) 14:14	cloakroom (2) 44:25 45:6	convention (2) 58:4 60:10
accommodate (1) 57:13	anyway (1) 70:5	axilla (1) 8:24	bleed (5) 10:18 11:16 14:4 28:8 31:21	buttocks (1) 17:15	close (6) 19:2,12 26:7 28:3 33:5 35:19	conventional (1) 58:23
accompanying (1) 68:9	aorta (10) 10:8,8,15,18 27:4 31:24 32:12,15 35:3 37:22	az99 (1) 66:12	bleeding (16) 10:16,19 26:11,24 27:16 28:9,10 31:25 34:15 35:4 36:6,7 37:3,21 38:3,4	button (1) 54:23	closely (1) 20:8	convinced (1) 65:13
accordance (1) 69:14	apparent (3) 53:22 54:7 67:13		blood (20) 10:9,11,21 14:1,3 19:8,13,19 27:8 29:12 32:1,2,5 34:16 35:17 37:20 38:3,4,6,7		closeup (1) 54:11	convincing (1) 65:10
accordingly (1) 60:11	apparently (1) 64:8		blow (1) 22:20		cm (10) 17:17,17 18:12,12 19:3,4 20:10,10 29:3,3	copies (1) 40:18
account (3) 59:16 62:13 67:20	appearance (3) 8:13 18:16 38:8		blows (1) 22:18		collapse (7) 10:20 25:5,5 26:24 27:8 36:25 38:13	copy (2) 40:17 41:13
across (12) 6:3,22,24 13:18,18 14:12 22:6 27:17,22 32:14 44:22 66:13	appeared (2) 65:2 66:18		blue (3) 47:23 52:5 53:3		collapsing (1) 45:13	corner (1) 23:18
acted (2) 59:7 69:2	appearing (1) 19:3		blunt (15) 21:1,8,10,13,19 22:2,5,7,13,23 23:12,22,25 25:7 36:4		collarbone (2) 15:12,22	corner (8) 1:25 58:24 59:2 60:18,18 61:2,10 62:19
acting (1) 68:19	appears (1) 8:2		blunting (1) 20:20		collection (1) 19:7	correct (3) 3:24 39:20 69:1
action (1) 66:25	application (4) 16:25 61:21 62:14,21		boarding (3) 35:16 42:20 45:9		college (3) 2:10,12,13	correctly (1) 39:18
actions (3) 24:14 50:10 64:9	applied (1) 36:13		body (37) 2:20 4:2,21 5:1 6:9 7:4,11,14,19 8:9,21 9:4,7,18,19,20 10:9,23 11:13 12:10,21 13:4,24 15:16 17:5,7,8 25:20 27:7 29:17 30:20 31:22 33:6 35:12 36:19 38:2,5		column (1) 28:22	corridor (2) 44:17,22
activity (1) 37:4	applies (1) 13:22		bodybuilding (1) 30:10		come (3) 6:3 15:8 57:5	couldnt (2) 22:4 35:5
actual (1) 5:2	apply (1) 63:25		bodyworn (2) 51:3 52:25		comes (1) 70:2	counsel (1) 54:19
actually (3) 6:23 13:24 18:15	applying (1) 64:21		bone (1) 12:8		commander (2) 52:20 66:16	counterterrorism (1) 5:10
add (1) 68:1	appreciate (2) 3:9 7:17		bones (2) 12:4 13:19		commands (1) 67:11	course (16) 7:17 11:4 13:4,15 16:15 25:4 33:9 35:8 39:8 41:6 51:17 53:1 63:22 69:14,18,21
address (11) 5:20 39:13 41:17,17 42:13 59:19 60:4 61:15 63:18,24 67:24	approach (4) 40:23 58:20 68:1 69:8		bonny (1) 28:19		commonly (1) 21:18	cover (3) 4:11 26:12 41:14
addressing (1) 59:22	approached (1) 50:12		book (1) 54:2		completely (1) 31:3	covering (2) 47:23 67:11
adelaide (2) 43:14 47:21	appropriate (1) 59:1		boots (1) 42:4		complex (1) 9:17	cover (1) 40:16
adjacent (2) 19:6,10	appropriately (1) 59:20		borough (1) 68:4		compliant (2) 58:5 60:10	crilly (7) 42:25 43:6 48:20 49:4,10,11,18
adjoined (1) 70:10	approximately (1) 30:12		both (12) 7:6 22:10 24:24 26:22 27:17 28:7 29:12 32:18 41:14 60:24 61:19 63:3		components (1) 22:14	critically (1) 67:2
administered (1) 22:18	arches (1) 10:10		bottom (5) 50:4 52:11,14,18 53:25		comprehensive (2) 40:15 69:23	criticism (5) 56:15 61:13 68:15
adrenaline (2) 34:12,16	area (20) 8:11 12:18 14:24 16:13 17:13 26:11 27:11,16 44:23 45:2 46:5,8 47:7,11,24 49:19 51:9 53:9 54:2 66:4		bought (1) 54:8		concomitant (1) 29:13	criticisms (5) 56:15 61:13 68:15
advisor (1) 66:17	armed (8) 3:22,23 49:23 52:2,6,23 58:1 63:2		bowel (2) 27:20,20		concern (1) 40:13	crook (1) 15:5
advocate (1) 39:21	armpit (4) 8:25 9:12,13 10:2		bracket (1) 45:9		concerning (2) 35:10 36:2	crown (2) 21:4,5
aerial (3) 47:14,17,19	arms (1) 9:19		brackets (1) 46:6		concerns (1) 47:13	cubicle (1) 54:4
affected (2) 32:11,17	around (8) 15:21 17:13 18:13 49:14 52:3,22 53:10 57:15 64:21 67:6 68:10 69:25		brain (6) 26:10,12,14 34:7 36:6,8		concludes (1) 40:3	cut (1) 53:23
affecting (1) 13:25	arrest (1) 32:7		break (5) 57:3,5,7,13 70:5		conclusion (25) 31:13 32:20,20 33:11 35:22 36:10 58:23 59:1,3,6,11 60:23,24,25 61:3,4,11,12,17 62:22 63:7 67:15,18 68:25 69:4 35:9 58:25 60:19 62:19 63:23	cutting (1) 18:7
after (17) 2:25 8:3 15:16 29:17 33:18,21,23 38:1,10,11 47:1 50:2 53:19,23 54:4 57:19 58:10	arrival (3) 50:5,10 52:5 42:17 43:6		breakout (1) 45:25		concomitant (1) 29:13	covered (14) 14:4,15 19:19 27:23 28:7 31:23 32:10 38:7
afternoon (2) 4:7 69:18	arrows (1) 50:1		bridge (13) 22:20 24:10 43:13 47:10,11,20 50:25 51:9 56:11 66:5,13 68:2,3		concentrations (1) 29:13	damaged (8) 1:25 19:19 27:23 28:7 31:23 32:10 38:7
again (23) 5:15 12:22 14:17 15:6 19:4 20:7 23:12,22 35:18 41:2 42:4 45:18 47:3 48:13 49:14 52:3,22 53:10 57:15 64:21 67:6 68:10 69:25	arteries (1) 10:11		brief (3) 41:1 57:10 63:22 67:15		concerning (1) 29:13	damages (1) 38:2
against (7) 21:10 22:10,14,15 24:12,20 36:17	artery (3) 19:10 27:7 35:19		briefly (6) 4:6 24:22 41:9 56:24 59:12,22		concerning (1) 29:13	damaging (1) 14:13
agent (1) 60:9	article (5) 58:6 60:10 61:10 62:18 63:3		british (2) 51:6 54:24		concomitant (1) 29:13	dan (3) 39:1,4 71:6
agree (1) 6:14	ascribed (1) 6:2		broad (2) 31:17 60:12		confrontation (5) 3:16 49:9 51:2 52:1 58:1	darryn (1) 49:1
ahead (1) 44:12	ashley (3) 1:12,23 71:4		broadly (1) 25:17		confrontations (1) 3:22	date (1) 39:12
aid (1) 44:14	ask (9) 9:9 14:17 39:22 40:17 41:8 55:23 56:11 57:16 69:18		broken (2) 24:8 53:20		confronted (1) 44:21	day (7) 2:25 42:1,4,8 43:7 46:3 68:23
albeit (1) 16:3	asked (2) 59:16,18		brought (3) 47:9,24 49:22		confronting (3) 45:10 49:15,25	days (2) 30:18 54:22
alcohol (5) 29:12,18,19,20 37:9	asking (4) 1:24 3:25 14:6 41:6		brown (8) 5:9 39:1,4,6 42:15 43:11 54:6 71:6		conjunction (1) 6:13	dc665710 (1) 12:13
allowed (1) 48:4	aspect (4) 9:25 15:5 29:4 63:1		bruise (1) 38:5		connect (1) 53:18	dc665711 (1) 12:17
allows (1) 6:17	assist (1) 29:23				connecting (1) 11:1	dc665712 (1) 13:7
almost (2) 50:23 66:7	assistance (1) 67:1				conscious (2) 57:3 66:24	dc665713 (1) 14:7
along (1) 48:25					consciousness (1) 32:4	dc665714 (1) 14:7
already (5) 17:19 21:15 23:3 35:6 38:7					consensus (1) 56:25	dc665715 (1) 14:19
also (26) 17:3 18:20 19:11,14 22:18 24:16 25:10 26:14 27:4,19,22 29:1,22 30:6 32:16 34:12,14,16 41:1					consider (3) 13:7 29:18 34:22	dc665716 (1) 14:22

dc665723 (1) 10:25
dc665724 (1) 11:21
dc665725 (1) 13:2
dc665726 (1) 13:13
dc665727 (1) 14:8
dc665728 (1) 14:23
dc665729 (1) 15:14
dc66573 (1) 6:9
dc665730 (1) 16:17
dc665731 (1) 17:8
dc665732 (1) 18:2
dc665733 (1) 20:3
dc665734 (1) 21:3
dc665735 (1) 22:25
dc665736 (1) 23:24
dc665737 (1) 24:22
dc665738 (1) 25:6
dc66574 (1) 8:9
dc66575 (1) 9:7
dc66576 (1) 9:11
dc66577 (1) 9:12
dc66579 (1) 11:18
dc80001 (1) 41:11
dc8000100 (1) 54:4
dc8000101 (1) 54:11
dc800011 (1) 42:3
dc800013 (1) 42:6
dc800015 (1) 42:9
dc800017 (1) 42:12
dc800018 (1) 42:15
dc80002 (1) 41:16
dc800020 (1) 42:19
dc800022 (1) 42:22
dc800023 (1) 43:1
dc800024 (1) 43:1
dc800026 (1) 43:2
dc800027 (1) 43:5
dc800028 (1) 43:9
dc800029 (1) 43:12
dc80003 (1) 41:19
dc800031 (1) 43:19
dc800032 (1) 43:23
dc800034 (1) 44:2
dc800035 (1) 44:4
dc800036 (1) 44:8
dc800037 (1) 44:10
dc800038 (1) 44:15
dc800039 (1) 44:15
dc800040 (1) 44:17
dc80004142 (1) 44:23
dc800043 (1) 45:2
dc800044 (1) 45:4
dc800045 (1) 45:12
dc800046 (1) 45:16
dc800047 (1) 45:17
dc800048 (1) 45:20
dc800049 (1) 45:22
dc80005 (1) 41:21
dc800050 (1) 45:24
dc800051 (1) 46:2
dc800052 (1) 46:4
dc800053 (1) 46:5
dc800054 (1) 46:8
dc800055 (1) 46:11
dc800056 (1) 46:13
dc800057 (1) 46:15
dc800058 (1) 46:17
dc800059 (1) 46:19
dc800060 (1) 46:22
dc800061 (1) 46:24
dc800062 (1) 47:3
dc800064 (1) 47:7
dc800065 (1) 47:14
dc800066 (1) 47:17
dc800067 (1) 47:19
dc800068 (1) 48:1
dc800069 (1) 48:3
dc80007 (1) 41:23
dc800071 (1) 48:6
dc800072 (1) 48:12
dc800073 (1) 48:15
dc800074 (1) 48:25
dc800075 (1) 49:6
dc800076 (1) 49:13
dc800077 (1) 49:16
dc800079 (1) 49:19

dc800080 (2) 50:8,11
dc800081 (1) 50:13
dc800082 (1) 50:16
dc800083 (1) 50:22
dc800084 (1) 51:2
dc800086 (1) 51:8
dc800087 (2) 51:24 52:2
dc800088 (1) 52:8
dc800089 (1) 52:17
dc80009 (1) 41:25
dc800090 (1) 52:22
dc800091 (1) 52:24
dc800092 (1) 53:3
dc800093 (1) 53:6
dc800094 (1) 53:15
dc800095 (1) 53:17
dc800096 (1) 53:19
dc800097 (1) 53:22
dc800098 (1) 53:24
dc800099 (1) 54:1
dci (10) 5:9 39:1,4,6 42:15
43:11 46:25 47:4 54:6 71:6
dead (1) 38:5
deal (6) 19:22 41:6 54:20
55:12,15 57:9
dealing (1) 24:10
death (28) 2:16,25 25:2
26:17 27:9 29:17 30:6,13
31:13,14,18,19 35:21
37:5,12 38:10,10 39:10
57:25 59:17 60:3,8 61:17
62:20 63:6 66:3 67:20 69:3
debate (1) 36:21
deceased (2) 35:25 60:2
deceaseds (2) 13:16 33:5
decelerated (2) 12:7,8
decide (1) 58:14
decilitre (2) 29:13,15
decision (2) 66:17,19
decisions (1) 64:20
deduced (4) 9:16 11:1 14:25
16:20
deep (1) 29:2
deepest (1) 20:14
deferred (1) 57:19
define (3) 7:7 21:8,17
defined (1) 20:12
definition (1) 18:4
degree (6) 26:15 31:21 32:3
34:11 36:7 56:24
degrees (1) 2:8
deliberate (1) 60:8
deliberations (2) 41:7 57:21
delivery (1) 38:9
demonstrate (3) 13:2 16:19
25:15
demonstration (1) 25:17
depict (1) 51:25
deploying (1) 68:22
deployed (1) 36:17
deprived (1) 37:20
descending (2) 10:8 27:3
describe (20) 6:10 8:20
9:9,15 11:2,22 13:8,13
14:6,8,18,24 15:9,14 16:10
18:3 20:5 21:3 23:1 24:23
described (14) 18:11 21:6
23:3 24:5 25:14 27:2,10
28:6,9,16 31:19 32:21
35:15 36:11
desk (1) 44:25
detail (4) 4:4,11 59:23 63:18
detailed (2) 57:25 58:17
details (3) 39:16,18 63:21
determination (8) 58:14
60:1,15 61:5 62:17,23
67:21 69:5
determinations (5) 55:5
57:20 58:16,21 59:24
determine (1) 60:5
detonated (2) 66:1 67:13
detonation (1) 65:24
devastating (2) 19:18 64:11
develop (1) 5:14
development (1) 5:13
device (1) 65:14

diagram (2) 8:15 11:4
diaphragm (1) 12:2
didn't (1) 16:8
died (3) 38:1 58:2 60:13
difference (1) 7:22
differences (1) 6:19
different (9) 7:20 21:11
32:24,25 47:15,18
66:8,8,12
difficult (5) 7:23 15:20 17:11
20:17 34:25
dining (2) 43:24 46:2
diploma (1) 2:9
direct (7) 33:5 36:12 57:23
59:2,10 61:4 69:21
directed (5) 58:16 61:7,14
67:17 68:24
directing (2) 59:12 61:10
direction (3) 16:22 56:13
58:18
directions (7) 41:5 55:5,18
59:19 68:10,13 69:19
directly (5) 4:16 37:23 47:15
56:2 58:13
disarm (1) 35:25
discern (1) 65:15
discharge (1) 33:2
discharged (2) 17:1 50:18
discharging (2) 48:20 49:11
discussed (1) 26:4
disease (1) 5:4
dislocate (1) 36:14
dislocated (2) 28:24,25
dislocating (1) 15:4
dislocation (1) 36:11
dislodged (2) 17:3,6
disregarding (1) 23:7
dissipation (1) 28:2
distance (3) 51:13,15,19
distinct (1) 23:2
distress (1) 4:5
distribute (1) 40:9
distribution (1) 25:18
divided (2) 10:6,24
divides (1) 30:22
divisional (1) 61:5
doctor (1) 2:14
document (17) 3:2,12 7:4
8:10 9:8 10:24 39:19 40:25
52:17 55:9,11,22,24 56:12
59:24 61:16 67:22
documents (2) 40:11,23
does (11) 6:4 13:2,24
16:19,21 25:14 31:3 51:23
55:23 62:3,12
doing (1) 13:17
domestic (1) 58:6
don (1) 54:7
done (1) 2:17
dont (6) 40:13 55:14 56:3
68:6 69:7,11
door (2) 44:11 48:9
doors (5) 44:6 45:5,6,8 48:10
doorway (1) 49:1
double (3) 45:5,6,8
doubt (2) 68:19,21
doubted (1) 64:2
doubts (1) 65:11
down (12) 10:10 11:7 18:14
21:23 23:18 24:19 25:19
48:16 49:5,22 59:10 65:20
downward (1) 15:24
downwards (7) 7:9 8:17,24
9:5 11:12 12:11 16:4
dr (10) 1:11,12,13,24 2:19
4:7,19 38:20,22 71:4
draft (1) 39:15
dramatic (1) 66:23
drawing (3) 45:24 46:6,12
driving (1) 29:15
drop (3) 32:3,3 34:5
drug (2) 29:11 30:23
drugs (5) 29:24 30:10,15,19
37:8
dubbed (1) 60:21
due (9) 29:20 31:14

37:15,16,23 60:8 63:22
69:13,21
during (7) 3:16,21 25:3 47:3
52:7,15 69:18
duty (2) 51:6 58:24
dynamic (2) 7:18 36:12
dysfunction (1) 37:2
E
earlier (1) 66:3
early (1) 3:9
easy (1) 38:23
edge (2) 18:7 20:21
edges (6) 18:12,14,21 19:5
20:11,20
effect (2) 27:3 36:19
effectively (1) 38:14
effects (6) 8:21 26:19,20
36:18 53:8 65:13
either (15) 11:8 21:9 22:6,12
24:15,17 26:5 33:4 38:8
41:13 46:6 51:19 56:5 57:4
68:7
elaborating (1) 30:14
elbow (5) 14:20,22,25 15:3
28:23
element (4) 61:24 62:2
64:13 67:6
eliminated (1) 30:19
else (1) 38:18
emphasising (1) 5:18
end (4) 41:4 47:20 50:24
53:20
ended (1) 19:6
endorsed (1) 56:17
energy (4) 9:22 12:9 13:23
28:2
engaged (4) 31:16 48:21
60:11 68:15
engagement (2) 63:2,24
enjoy (1) 54:24
enough (1) 12:9
ensure (2) 59:20 67:13
enter (4) 7:2 8:23 32:6 34:7
entered (4) 11:13 15:21
27:11 32:17
entering (4) 10:3 11:8 14:11
15:16
enters (3) 38:2 44:8,17
enthusiasm (1) 57:15
entirely (6) 8:8 20:17
22:4,16 34:19 35:24
entrance (26) 6:16,20,21
8:12 9:24 11:5,20 12:15
13:10 14:10,11
15:1,2,12,15 16:11,12,21
43:21 44:5,9,11,18 45:4
47:8 49:20
entry (2) 8:10 12:13
environment (2) 31:7 53:13
eod (1) 65:6
equally (3) 24:18 55:16
64:13
equate (1) 24:17
equivalent (1) 52:17
essentially (2) 5:5 34:10
establish (1) 60:10
established (1) 39:9
et (1) 53:13
european (2) 58:4 61:8
euston (2) 42:20,23
even (4) 29:19 36:25 58:9
65:11
evening (2) 42:10 55:4
event (1) 44:1
ever (1) 19:16
every (4) 40:22 58:11
63:1,16
everyone (3) 1:8 4:14 69:20
everything (1) 54:23
evidence (36) 4:8 5:8 17:4
26:15 29:11 30:1,11
33:10,20 37:10,25 38:21
39:2 40:3 41:3 43:11 46:25
47:4,23 51:17 53:2,11,12
54:21 59:2,4,7 60:20,22

61:12 62:25 63:10,19
66:19 68:14,14
evident (1) 65:5
ex (1) 61:6
exactly (1) 63:13
examination (17) 2:20,23
3:5 4:1,20 5:3 7:6,13 9:3
17:16,25 25:23,25 26:21
27:5 29:25 34:9
examinations (1) 37:7
examine (2) 6:13 63:16
examined (2) 6:2 17:5
examiner (1) 2:13
example (7) 9:17 11:13
21:12 22:1,13 23:14 31:6
examples (2) 21:13,16
excellent (1) 68:5
except (1) 52:17
excepting (1) 36:7
excited (1) 34:14
excited (1) 34:14
excluded (3) 22:4 30:8 31:3
exit (13) 6:16,20 7:2 9:22
12:9,22 13:24 14:10 15:2
16:11,13,21 23:7
exited (2) 11:9 13:1
exiting (5) 6:23 10:1 12:24
14:14 15:5
expanded (1) 51:19
expect (2) 3:8 10:19
expected (2) 11:17 28:8
experience (1) 2:7
expert (2) 6:14 9:3
explain (4) 31:17 40:22
58:12 59:12
explaining (1) 4:10
explanation (1) 22:17
explanations (1) 25:11
explosion (1) 64:12
exposure (2) 30:7 31:1
express (1) 62:18
extended (2) 24:3 60:14
extensive (1) 6:25
extensively (1) 28:8
extent (1) 35:4
external (5) 4:19 5:3 7:6
30:7 31:2
externally (2) 5:1,12
extinguisher (3) 24:12 48:20
49:12
extremely (3) 15:19 19:12
69:22
eye (2) 23:8,13
eyelid (2) 23:9,14
F
face (7) 6:11,12 8:3,7 22:25
23:7 42:7
faced (1) 62:3
facility (1) 55:8
facing (1) 7:16
factual (1) 62:19
faculty (1) 2:11
fair (1) 70:4
fairly (5) 7:1,8 11:6 12:23
13:15
familiar (1) 34:13
family (1) 41:17
faster (1) 34:15
fastmoving (1) 7:19
fat (3) 11:7 16:1 20:14
fatal (9) 11:17 19:18,20,23
20:24 32:19 36:8,22 63:14
fatality (1) 19:25
fatally (1) 47:6
fatty (1) 27:20
fault (1) 68:6
favour (1) 24:15
favoured (1) 22:7
features (1) 33:2
feel (2) 19:9 26:6
feganearl (11)
1:11,12,13,23,24 2:19
4:7,19 38:20,22 71:4
fellow (2) 2:10,11
few (2) 34:2 54:21

fifth (4) 11:25 28:23 59:14
66:6
filled (2) 39:16,18
films (1) 34:4
final (1) 39:1
finally (8) 10:2,7 16:9 25:6
31:11 37:12 51:1 62:11
find (3) 3:8 27:24 28:4
finding (2) 5:12 61:17
findings (10) 3:11 4:25
25:23,25 27:12 29:8,10
30:6,14,16
fine (1) 26:12
finger (2) 16:14 24:4
fingers (2) 24:2 25:9
fire (5) 6:15 24:11 48:20
49:11 64:20
firearm (1) 64:16
firearms (7) 47:12 52:20
62:12 65:9,20 66:16 67:12
fired (17) 8:3 33:12,18,23
50:1,3,19 52:7 58:11 63:14
64:2 65:16 66:6,7,11,14,21
69:1 (1) 7:24
firers (1) 32:25
firing (4) 52:1,12,15 65:18
firm (1) 52:22
first (35) 1:11 3:13 5:20 6:8
7:3 9:7 12:13 14:6,18
18:2,10 20:2 21:3 25:23
32:11 33:23 34:22 37:15
42:22 43:11 44:13 45:19
46:22 49:7,25,25 50:2
52:12 55:15 58:21 60:21
61:22 63:24 65:1 66:10
fishmongers (26) 22:11
41:18 43:4,7,10,13,20,24
44:3,7,9,19 45:13,18
47:8,16,18,22 48:7,17
49:1,8,20 50:9 54:3 67:3
fist (3) 22:12,22 23:16
fit (1) 34:10
flags (1) 52:6
flaps (1) 24:7
flat (1) 54:10
fleshy (1) 16:13
floor (7) 44:2 45:17
46:19,22,24 49:17 52:16
focus (1) 26:9
focused (1) 43:12
focusing (1) 58:1
follow (5) 38:23 41:12 44:4
45:19 69:22
followed (6) 7:1 11:3 27:8
48:13,18 50:2
following (6) 3:12 7:16 32:24
48:15,25 49:4
follows (2) 58:20 59:25
foot (3) 21:12 22:21 25:12
footage (6) 8:1 43:16,18
52:12,25 65:5
force (29) 17:23 18:4,24
20:4,22 21:1,8 23:25 25:7
35:10 36:4,13 38:6 60:8
61:22,25 62:4,5,10,11
63:12,16 64:4,14,18,24
66:9 67:7,10
forensic (5) 2:4,11 3:2 19:21
34:2
form (7) 39:16 58:4 60:14,17
67:21 69:5,15
format (1) 39:2
format (1) 40:15
formed (1) 66:9
forth (1) 44:22
fortress (1) 54:1
forward (2) 7:16 55:1
forwards (1) 16:22
found (13) 5:15 8:23 14:24
17:13 28:13 35:11 53:7
54:2,4,9,11 61:13 68:6
four (2) 55:25 60:2
fourth (1) 65:24
fourthly (1) 59:10
foyer (3) 44:5,9 45:4
fracture (5) 9:1 10:4 11:25

26:7 36:6
fractures (2) 28:16,21
front (16) 12:20 13:6 18:14
24:23,24 25:15,19 26:10
39:17 40:19 44:6 47:18
48:6 51:21 53:20 56:2
frost (6) 49:1,9,10,18
50:14,17
full (1) 1:21
fullness (1) 3:10
fully (1) 10:1
function (1) 45:21
functions (1) 34:8
further (16) 3:16,21,21 9:12
14:5 29:25 30:8 33:8,17
34:23 35:7 38:13 42:10,25
46:13 48:12
furthermore (3) 62:7 66:25
68:12
G
gaffer (1) 42:10
galbraith (1) 60:21
gallant (7) 48:9,10,18,21,24
49:9,17
garden (1) 10:12
gastrointestinal (1) 27:10
general (6) 30:10 32:23 34:9
36:21 68:13,22
generally (1) 65:4
gentlemen (2) 40:12 54:17
gents (2) 44:24,25
genuine (1) 64:7
get (4) 5:1 18:19 41:1 67:1
give (13) 1:21 4:1 10:10
20:18 22:1 26:13 30:20,23
34:11 37:13,15 41:5 58:16
given (16) 10:21 31:24 34:23
35:3,4 40:13 55:7 56:13,24
59:14,20 64:8 65:3,13
67:19 68:10
gives (5) 3:6 8:16 17:18
34:14 51:20
giving (5) 22:2,3 38:21 39:2
68:21
glancing (1) 22:23
glare (1) 23:10
gloves (2) 53:18,25
going (16) 1:16 4:2 5:23
9:8,23 14:5,17 30:17 32:14
40:8,20 41:12 44:18 54:19
56:18 57:6
gone (3) 10:4 13:11 21:23
good (8) 1:4,8,13,14,23 9:17
49:2 70:2
governing (2) 59:24 62:16
graduated (1) 62:5
graphics (2) 4:17 23:10
grazed (2) 10:7 18:13
grazes (1) 21:15
grazing (9) 18:20 19:4
20:11,21 21:3 24:17,24
53:5,6
great (1) 7:20
greater (2) 31:21 64:14
green (2) 49:22 50:1
grip (1) 3:18
ground (8) 21:12 34:5 44:2
46:19,24 47:9,24 66:20
group (1) 9:24
grows (1) 30:20
gun (2) 6:14 9:3
gunfire (1) 53:9
gunshot (23) 6:13,21
8:4,7,12,23 11:20 12:22
13:10,10 15:12 22:8 28:21
31:14,18,20 32:23 33:1
34:6 37:3,16,24 38:7
gunshots (1) 5:25
gutted (1) 21:6
H
haemorrhage (5) 26:9,11,15
37:16,21

hair (8) 5:7 29:22
30:5,16,20,20,21 31:8
half (1) 49:16
hall (37) 22:11 41:18
43:4,7,10,13,20,24,25
44:3,7,9,18,19
45:13,18,23,25
46:12,14,16,18
47:8,8,16,18,22
48:7,8,13,17 49:1,8,20
50:9 54:3 67:3
halo (1) 17:13
hand (8) 16:10,23 23:25
24:19,19,20 25:7,8
handed (1) 40:18
hands (6) 24:11,12 35:23,24
57:4 65:18
happened (1) 68:23
happy (1) 57:13
hard (2) 41:13 65:15
harder (1) 34:16
harm (1) 62:10
hasnt (2) 21:23 34:18
having (6) 10:20 13:23 35:25
38:1 48:16 55:17
head (7) 21:4,5 25:19
26:6,13 36:3,8
health (1) 4:14
hear (1) 57:12
heard (11) 5:9 17:19 22:9,18
24:9 30:1 33:11 40:6 51:17
52:20 53:11
hearing (1) 5:8
heart (5) 10:9 32:7 34:15
36:23 38:6
heavily (1) 18:13
heavy (1) 19:4
height (2) 4:20,23
helicopter (1) 52:12
help (1) 41:2
helpful (2) 69:6,23
helpfully (1) 47:10
hepatobiliary (1) 27:24
here (15) 8:10 9:24 12:13
14:10 19:12 20:4,23 25:6
34:8 37:18 49:2,19 51:4
54:25 60:9
heroin (5) 30:7 31:1,4,7
37:11
highly (1) 7:18
himself (1) 64:24
historic (1) 37:10
historically (1) 29:24
hold (3) 2:8 51:6 63:10
hole (1) 8:14
home (6) 2:3,14,18 41:16
42:12,17
homicide (1) 61:18
honestly (6) 61:22 62:1
64:3,10,23 67:8
hope (1) 41:4
hormone (1) 34:12
hose (1) 10:12
hostile (1) 50:24
hough (46) 1:4,6,10,11,20,21
4:13,19 23:5 38:17
39:1,5,6 40:3,5,8,20
41:8,10 51:16,18,23 53:14
54:16 55:4,20
56:8,12,18,22,24
57:4,9,14,15,24 68:8
69:7,10,17,24 70:1,7
71:5,7,8
hours (2) 30:18,25
house (2) 43:14 47:21
however (7) 8:1 22:22 26:7
36:5 38:3 55:9 59:11
human (4) 7:19 36:19 58:4
61:8

idea (3) 3:7 8:16 17:18
identical (1) 41:14
identified (10) 5:19 11:19
17:24 18:24 20:12 21:2
28:15 29:11 34:2 59:18

identify (5) 4:20 5:3 10:13
17:9,11
identifying (2) 46:20 52:4
identities (2) 50:6 51:4
ied (6) 51:13 53:22 54:7 65:2
66:1 67:13
ieds (1) 65:12
ill (4) 38:18 41:8 55:20 70:8
illegal (1) 30:15
illustrate (1) 4:2
illustrating (1) 53:7
illustration (1) 51:20
im (18) 1:24 2:10 9:8 14:5,17
30:4 40:8,20 41:6,12 54:19
56:1,17 57:3,4,11,13 70:1
image (18) 6:12 7:11 9:14
18:3,25 25:21 41:25
42:3,15 43:5 47:14,21
48:19,20 49:3 52:8,9 66:2
images (27) 4:8 7:10 9:8
14:5,17 25:14 31:12
41:21,23 42:6,9,20,22,25
43:2,20,23 47:17,19,22
48:1,3,7,12,15 51:25 52:11
imitation (1) 65:10
immediate (1) 47:7
immediately (8) 7:23 44:23
46:5 48:8,18 50:2,5 64:17
impact (7) 21:9,25 22:7
23:12,22 26:13 36:4
impacted (1) 12:5
impacting (1) 22:14
imperative (1) 65:24
implement (3) 18:6,17 21:18
importance (1) 19:12
important (6) 7:17 21:16
43:17 56:25 59:14 67:19
importantly (2) 6:16 10:2
impossible (2) 62:6 67:1
incapacitating (1) 64:18
incapacitation (2) 34:3 36:24
inches (1) 4:23
incident (3) 34:10 37:9 63:19
include (2) 18:8 21:11
including (4) 54:5 57:19
65:17 66:5
independent (3) 58:3,5 66:9
independently (4) 19:20
20:24 32:19 66:19
index (4) 16:14 25:9 40:19
71:2
indicate (2) 5:24 55:21
indicated (3) 55:7 56:12 69:7
indicates (1) 37:4
indicating (1) 66:8
individual (3) 32:6 40:17
63:12
individuals (3) 31:5 34:4,17
inevitably (1) 38:2
inflicted (2) 19:16 34:22
inform (4) 3:7,12,16,21
information (4) 3:3,6,9 39:9
informed (2) 16:21 17:1
infrequently (1) 19:21
ingestion (1) 29:20
initial (6) 33:12 46:25 47:4
50:10 51:1 63:24
initially (1) 47:25
injured (4) 47:6 48:4 66:1
67:2
injuries (54) 2:16 4:4
5:2,19,20,23 6:14,16 8:6
9:24 10:17,24 11:2 14:9
15:1 16:10,24 17:9,12,24
18:3,5 20:4,5,7,12,13,22
21:1,2,14 23:1,24
24:1,13,23,25
25:7,13,15,18 27:14 28:12
31:18,21 32:18 34:2,6,21
35:10,12,17,19 38:14
injury (44) 6:5,5,6,11,24 7:3
10:15,21 11:17,23
12:21,25 13:15,25 16:6,15
18:6,10,16,20,23
19:1,14,15,16,18,21
21:4,9,14 22:11 23:2,15

26:16 27:1,11 28:11 29:1
31:15 33:16 34:15 36:8,9
66:4
inner (3) 11:5 15:5 23:31
inquest (10) 39:15 40:3
58:4,7 59:24 60:1 61:13
62:17 68:18 69:5
inquests (4) 30:2 56:14
60:15 68:2
inset (1) 15:25
inside (3) 14:22 45:1 67:2
instance (1) 37:25
instantaneous (1) 34:3
instead (1) 60:16
instinct (1) 70:3
instructed (1) 2:19
instructions (2) 68:20,21
instructor (1) 65:21
instructors (1) 65:9
intact (1) 49:3
intend (1) 69:19
intended (1) 62:18
interested (8)
55:8,9,10,12,14,20 56:10
68:17
internal (14) 7:6 8:21 10:19
11:15,22 12:25 13:25 16:7
25:23 26:20 27:4 28:12
32:10 37:22
internally (5) 14:2,4
27:12,13 32:2
interpretation (1) 31:6
interpretations (1) 7:25
into (16) 10:6,24 15:8 27:16
29:14 30:22 32:6,14,14
36:6 44:18 45:4 46:11,13
57:25 62:13
intoxicated (2) 29:21 37:8
introduction (1) 6:8
investigation (6) 5:10 39:22
57:25 58:5 60:11 63:4
invite (1) 40:20
invocations (1) 54:1
involve (3) 16:6 25:19 61:21
involved (3) 27:22 58:13
63:25
inwards (2) 8:18 16:4
ips (1) 69:20
iron (1) 21:12
irrespective (1) 3:11
isnt (1) 68:18
issued (1) 64:7
issues (3) 6:15 54:18 62:20
issuing (1) 67:11
item (1) 22:10
items (3) 41:20 42:7 46:20
its (37) 4:13 5:17
7:7,14,17,22 8:13,20
10:4,11 13:15 18:5,6 19:1
20:17 21:8,16,22 22:2,3
30:24 31:8 34:3 35:3 43:10
49:20 50:5 52:4 54:5 57:6
58:10 63:2,13,15 65:6
69:8,17
itself (4) 12:10 18:16
28:24,25
ive (6) 1:15 2:17 21:6 23:10
24:5 69:14

jack (6) 44:13 45:1,3 47:1
48:2,4
jacket (1) 42:1
john (2) 42:25 43:6
joint (5) 15:4,4 28:23
36:14,15
jones (4) 44:24 45:13 47:1
48:2
journey (1) 42:23
judge (30) 1:4,8,13,15
4:6,13,18 23:4,6 38:22
39:3 40:1,5 51:14,17 53:10
54:16 55:19,23
56:16,21,23 57:3,11,23
68:6 69:6,17,25 70:8
judgments (1) 66:9

jugular (1) 19:11
jumper (1) 48:19
june (2) 1:1 70:11
jurisprudence (1) 2:10
jury (57) 1:3,5,7 2:6 5:8 8:1
17:18 22:9,18 24:9 26:19
27:3 30:1,2 33:11 39:6
40:6,7,9,10 41:9,12
43:15,16,19 44:20 47:10
51:3,5,11 52:20 54:13
55:3,6 57:19 58:7,15,25
59:2,5,10,14
60:18,19,22,24 61:3,10
62:19 63:8 67:17 68:4,10
69:2,19,21 70:4
jurus (2) 54:15 57:21
justification (2) 61:18 66:14
justified (1) 66:18
justify (2) 58:12 65:22

keep (4) 3:10 9:23 34:16
51:13
key (3) 58:21 62:19 63:5
khan (58) 2:21 3:13,17,22
5:25 17:1 22:10,19 24:9
29:8 31:4 33:12,15,20
32:10 37:22
36:17 37:25 38:12 39:9
40:4 42:20 43:6 44:21
45:11 47:9,24
48:7,11,12,16,21,23
49:5,10,15,17,21,25 50:14
51:11 52:13,15 53:15,22
57:25 58:22 59:6 62:24
63:9 64:3,5,8,18
65:1,16,19 66:18,24 67:11
khans (10) 7:11 8:3 41:16
42:12,16,23 43:3 54:9 64:9
67:20
kick (3) 22:21,23 36:5
kicked (1) 3:18
kidney (3) 13:18,20 35:6
kidneys (9) 14:3 27:18,22
28:4,7 31:23 32:17 35:2
37:22
killed (5) 58:10,22 59:7 63:9
65:25
killing (8) 58:2 59:11
61:11,14,15 62:24 67:18
68:25
kilograms (1) 4:24
knee (1) 24:23
knees (2) 24:25 25:5
knew (1) 64:9
knife (4) 3:19 36:1 53:17
54:11
knives (6) 18:9 48:9,14 51:7
53:15 54:8
know (4) 1:16 39:7 40:6 70:1
knowing (1) 18:21
knowledge (2) 65:8,9
known (3) 3:6 60:17 68:11
knuckles (1) 24:2
kocozik (2) 45:10 49:3

labelled (1) 11:4
lacerate (1) 22:24
laceration (9) 21:7,17,19,22
22:2 23:20 26:3 36:2,3
lacerations (2) 21:16 23:11
ladies (2) 40:12 54:17
landing (3) 43:22 45:20 46:9
large (7) 10:11 13:19 19:8
23:2 26:5 40:12 49:21
largely (3) 10:19 23:8 69:22
largest (1) 10:8
larmour (2) 42:24 43:6
last (4) 44:11 48:1 54:21
57:24
later (2) 49:14,16
lawful (9) 59:7,11
61:11,14,15,20 62:24
67:18 68:25

lawfully (4) 58:22 59:6 63:9
69:2
lawyers (1) 2:1
layer (1) 42:4
layers (2) 15:19 26:12
layout (4) 44:2 46:19,24 51:8
lead (3) 27:7 45:21 65:6
least (1) 18:7
leave (5) 25:21 54:22 58:24
60:19 61:3
leaves (2) 10:9 33:6
leaving (5) 24:7 42:17
48:8,10,13
led (2) 31:19 45:24
left (45) 6:23,25 7:8
9:5,10,11,13,25 10:3,4,5
11:9,12,19,24,25 12:1,10
13:16,20,21 16:10 19:6
23:8,9,20,22 24:25 25:7
26:4,10,22 28:22 29:2 44:8
45:6,8 47:21 49:6 50:4,20
52:9 54:24 58:15 61:1
lefthand (1) 23:19
leg (1) 15:24
legal (9) 2:12 29:14 41:5
59:22 60:21 61:2,16,19
62:12
legally (1) 68:25
legend (1) 52:3
legitimate (1) 61:11
legs (1) 25:19
lengthy (1) 16:3
less (3) 29:13 35:3 66:22
lesser (1) 31:21
let (2) 55:20 62:21
level (4) 21:23 29:16 47:11
64:14
liability (2) 60:5,7
lies (1) 7:14
life (2) 7:18 34:8
lifeless (1) 34:5
light (1) 69:11
like (5) 18:8 20:18 55:21
57:12 68:17
likely (3) 24:21 65:25 69:17
limbs (2) 25:20 60:21
limit (1) 29:14
limitations (1) 31:9
line (1) 21:21
linear (5) 21:6,21,25 22:3,14
lines (1) 50:1
lining (2) 23:21,21
linked (1) 9:24
lip (3) 23:17,21,22
lips (1) 23:19
list (1) 2:18
listened (1) 54:21
listening (1) 41:3
little (2) 17:13 33:17
liver (2) 27:25 28:2
lobe (3) 10:5,6,7
locale (1) 43:10
location (6) 25:17 43:9
44:10 46:23 47:9 52:22
locations (8) 25:16 33:3
43:15 47:4 49:22,24 52:6
66:8
locking (1) 36:24
lodging (1) 13:20
london (9) 43:13,17 47:20
49:23 51:8 52:19,21 56:11
68:3
long (1) 70:2
longterm (1) 29:23
look (19) 5:23 6:9 7:4 8:19
9:7 10:25 12:12 13:2 15:14
16:17 17:8 18:2 20:3
25:13,22 37:14 38:18
53:12 55:1
looked (3) 11:14 53:1 63:15
44:6,11 56:1
looking (6) 19:25 20:4 37:12
loss (3) 14:1 27:8 32:1
lost (2) 13:23 32:4
lot (3) 36:21 41:4 43:17
low (1) 29:16

lower (9) 10:6,7 11:9 12:17
13:18 20:23 23:8,19 48:20
lowest (1) 8:14
lucraft (30) 1:4,8,13,15
4:6,13,18 23:4,6 38:22
39:3 40:1,5 51:14,17 53:10
54:16 55:19,23
56:16,21,23 57:3,11,23
68:6 69:6,17,25 70:8
lukasz (2) 45:10 49:3
lumbar (1) 13:19
lunch (1) 70:5
lung (8) 10:5,6 26:23,24,25
32:11,14 37:22
lungs (6) 26:19,22,25,25
31:23 35:2
lying (1) 52:16

M

magic (1) 54:23
main (16) 19:10 43:21,25,25
44:6,17,19 45:7,12,22
46:9,11,13,15,17 49:20
major (7) 11:15 19:11,13
32:5,10 35:17,20
making (1) 33:22
many (2) 7:20 52:8
map (7) 6:9 7:4 8:10 9:7
10:24 41:16,19
maps (2) 4:2 17:8
mark (1) 58:8
marked (9) 7:5,10 20:5 23:1
49:22 50:5,18 51:4 52:2
markers (3) 46:20 53:3,4
market (1) 68:4
mask (2) 47:13 53:24
material (1) 53:7
matter (1) 67:9
matters (4) 3:12 39:12 59:18
60:4
mean (3) 24:6 30:17 31:3
meaning (2) 37:19 60:12
means (9) 18:13 21:22 40:21
51:21 58:23 59:17 60:12
62:20 67:12
meant (1) 33:4
measuring (2) 4:22 20:10
mechanics (1) 17:19
mechanism (2) 31:17 32:1
medical (4) 2:9,13 37:19
67:1
medicine (2) 2:9,12
meek (1) 51:5
meet (1) 69:25
members (5) 3:17 31:16
41:12 47:11 66:4
men (1) 49:14
mentioned (1) 4:6
merritt (6) 44:13 45:1,3 47:1
48:2,4
mesenteries (1) 27:19
mesentery (1) 27:21
metres (5) 4:22
51:10,10,19,21
microscopically (1) 63:1
middle (3) 24:2,4 25:9
middleditch (1) 65:7
midline (2) 17:17 18:11
midspine (1) 12:5
midway (1) 45:16
might (5) 3:8,9 20:23 40:8,8
milligrams (2) 29:13,15
mind (2) 3:10 31:12
mindful (1) 15:6
minimum (2) 51:15,15
minor (1) 26:17
minute (2) 33:17 49:16
minutes (4) 33:23 34:24
56:19 57:7
missing (1) 45:9
misused (1) 21:18
mitigation (1) 50:24
mm (3) 28:18 29:6 33:14
mobility (1) 15:7
moment (6) 8:2
50:11,13,16,22 66:18

month (1) 30:21
months (4) 30:12,18,24,25
more (12) 28:4 30:6,17 34:24
43:12 54:14 59:23 60:14
61:25 66:23 67:7 68:13
morning (12) 1:4,8,13,14,23
42:14,18 54:20 55:2,16,18
70:1
mortem (8) 2:20 3:5,25 4:15
7:13 38:9,9,10
mortuary (1) 7:14
most (10) 6:15 10:2 18:8
22:22 24:21 31:23 35:12
53:1 58:3,13
motorcycle (1) 53:24
mouth (1) 26:7
move (8) 5:19 9:18 13:9
16:24 17:22 29:4 33:15,21
movement (5) 33:22 34:19
38:13 65:21 66:23
movements (4) 47:1
65:17,17 66:22
moving (5) 9:19 12:20 23:18
24:3 26:6
ms (3) 56:4,7,17
much (15) 14:16 34:5
38:17,20,24 39:24
40:1,2,5,14 51:14 54:16
55:2 67:15 69:10
mucosa (1) 23:20
multiple (7) 3:23 32:23,25
37:16,24 45:3 66:7
muscle (7) 5:14 11:7 12:2
13:21 20:15 26:5,5
muscles (3) 5:13 19:6 36:25
musculoskeletal (1) 28:15
muslim (1) 54:1
must (7) 7:24 56:14,16 58:3
59:2 60:1,4
mustnt (1) 35:7

N

name (2) 1:21,23
named (1) 60:6
namely (1) 63:8
narrative (1) 56:14
59:16,19 60:14,16
62:16,17 67:16,20,25 68:5
69:3,4
narwhal (13) 3:14 18:23
19:15,25 35:15 46:7,23
48:19,22 49:2,3,11 53:19
natural (2) 5:4 29:16
nature (2) 3:7 7:19
near (1) 33:3
nearby (2) 64:24 66:5
necessary (10) 39:10 57:20
61:23,25 63:16 64:4,15,23
67:7 69:12
neck (8) 18:11
19:6,8,9,11,22 20:13,23
need (8) 4:11 7:21 9:17 15:6
38:6 54:18 62:9 66:9
needed (1) 69:8
negative (1) 5:18
nerves (2) 19:8,11
nervous (2) 26:1 34:13
neuromuscular (1) 36:24
next (3) 24:22 27:2,10
nice (2) 1:8,15
nonballistic (1) 17:24
none (3) 32:4 35:17 38:7
nonetheless (2) 3:8 17:6
nonspecific (1) 24:25
non survivable (1) 38:15
north (6) 43:12 47:20 49:8
50:9,24 51:9
nos (1) 55:25
nose (4) 6:21,22,23 7:2
notation (2) 37:13,14
note (6) 4:25 5:6,12,15 20:7
43:16
notice (1) 4:1
november (3) 2:23 41:22,24
npas (1) 52:11

number (11) 5:23,24 10:23
19:2 23:7 31:20 33:18
35:11 40:7 43:19 52:24
numbers (6) 5:24 6:2,3
44:3,3 45:18

O

oath (1) 39:6
object (5) 21:10,25
22:8,13,23
objection (1) 61:9
objective (3) 62:2 64:13 67:6
objects (1) 21:13
obligation (1) 60:9
obliged (2) 60:19 68:18
observe (1) 24:8
observed (1) 37:4
obtained (1) 29:7
obvious (2) 29:1 33:15
obviously (3) 4:9 40:16 54:14
occasion (2) 15:18 24:11
occasional (4) 30:5,7,16 31:1
occasions (1) 40:7
occupation (1) 39:13
occur (4) 10:20 29:17 32:1
35:4
occurred (1) 35:6
oclock (1) 55:2
odd (1) 15:17
offence (1) 61:18
office (5) 2:3,14,18 44:13,16
officer (9) 51:6 58:2 62:12
63:14,16 64:16,22 65:1,16
officers (35) 3:23 33:9 47:13
49:23 50:6,10,13,23 51:3
52:5,6,23 53:1,8 56:15
58:11,13 59:7 63:12,25
64:6,19 65:4,11,25
66:7,8,11,20,21 67:4,9
68:15,20 69:1
often (5) 6:19 9:23 12:6 33:6
34:19
oh (1) 30:4
once (6) 19:4 20:7 40:18
45:18 52:22 67:6
onto (3) 24:3,4 48:16
onwards (1) 44:5
open (2) 3:10 26:6
opened (1) 7:1
operations (1) 52:21
opinion (1) 11:3
opposite (1) 43:14
oral (5) 55:12,22 56:1,5
67:11
order (3) 5:25 35:25 57:16
organs (12) 11:15 12:2,3,25
14:1 16:7 28:6,12 32:5,10
37:19,22
ornamental (1) 3:14
others (9) 1:16 54:15 59:8
61:21,23 62:8 63:11
64:4,24
otherwise (3) 61:18 65:13
69:13
ought (2) 62:23 63:4
outer (2) 9:25 15:2
outline (1) 58:20
outside (4) 14:19 44:23 46:5
54:9
oval (1) 18:11
over (17) 7:21 10:10 21:4,5
23:2 30:5,12,17 33:16,17
43:20 47:15 48:8 54:5,21
57:24 66:10
overt (1) 5:13
overview (6) 25:13 41:19
43:9 45:22 46:17 52:9
own (1) 41:16
oxygen (2) 32:5 37:20

P

packaging (1) 54:9
padded (1) 42:1
pages (1) 3:4
pair (4) 15:1 16:10,11 25:14

pale (1) 17:13
palms (1) 7:16
paragraph (8) 59:23 61:15
63:20,21 67:22,23 68:9,12
paragraphs (1) 62:15
pardon (1) 30:4
part (7) 8:15 13:18 15:2
26:17 37:5 61:4 67:21
parte (1) 61:6
particular (14) 4:25 5:6 6:14
8:4,17 9:18 31:22 32:9,16
43:16 60:23 61:4 65:18
66:10
particularly (2) 31:24 41:2
parties (1) 56:10
parts (2) 8:21 34:7
pass (2) 10:5 15:18
passage (5) 11:10 22:5 27:21
28:3,24
passed (10) 6:18,22 8:21
11:24 12:1,3,22 13:17
28:20 32:13
passing (10) 7:7 8:24 9:25
11:11 13:16 14:11 15:3
16:3 21:23 27:17
passively (1) 62:9
pathological (1) 6:6
pathologist (5) 2:4,4,14 7:23
63:15
pathologists (4) 1:19 2:11,13
19:21
pathology (2) 2:15 34:3
pause (2) 39:21 54:23
pavement (3) 24:20 48:16
49:5
pelvis (1) 14:12
penetrate (3) 13:11 18:15,18
penetrated (8) 18:14 19:5
20:13 26:22,23 27:15
31:22 35:17
penetrating (6) 8:14 17:24
19:22 20:9 35:10,11
penetration (1) 18:23
penis (1) 14:11
people (6) 22:19 35:1 42:24
51:5 57:7 62:3
per (2) 29:13,15
percentage (1) 64:16
perception (1) 36:22
perfectly (1) 57:11
perform (3) 2:20,23 7:13
perhaps (3) 6:15 10:2 55:23
peri (1) 38:9
perimeter (1) 38:9
period (4) 7:21 30:12 34:19
52:15
perpetrating (1) 58:10
person (11) 51:13
55:10,14,20 58:9 60:6,13
61:22,24 62:7 68:17
persons (3) 55:8,10,12
perspective (2) 6:7 47:15
perspectives (1) 47:18
phase (2) 51:25 52:7
photograph (2) 44:11 45:16
photographs (3) 4:16 44:4
45:19
phrased (1) 51:14
physical (3) 36:12,18 37:4
physicians (1) 2:12
physiological (1) 33:25
piece (1) 3:14
pike (2) 35:16 45:9
pillar (1) 45:7
pipe (1) 10:12
place (5) 39:12 44:1,22 46:1
49:21
placed (1) 33:4
places (2) 41:19 53:3
plain (1) 64:22
plan (26) 41:21,23,25
42:3,6,9,12,19 43:2,5,9,12
44:2 45:17 46:22,24
47:3,7,14 48:1,6 49:6,19
51:8 52:9 70:5
plank (1) 22:1

plans (1) 51:24
plausible (2) 65:3,6
played (1) 37:5
plays (1) 26:17
please (35) 1:18,21 2:6 4:20
6:10 9:11,12,14 11:2,18,21
12:17 13:7,8,13 14:8,23
15:9,9,14 16:9,10,17 20:5
22:25 23:24 24:22,22 25:6
27:2,10 37:6 40:13 54:22
55:1
plus (1) 60:21
pm (1) 70:9
pointed (2) 18:17 46:23
points (3) 53:6 64:25 67:4
police (10) 3:22 43:17 51:6
52:10,19,21 56:15 58:1,2,9
55:1
posed (1) 66:3
position (6) 7:12,15 13:5
24:19 57:1 68:22
positions (4) 7:20 32:25
52:10 66:12
possible (6) 17:14 22:7 29:19
31:3 63:5,13
possibly (2) 30:18 37:11
post (7) 2:20 3:5,25 4:15
7:13 38:9,10
posted (1) 58:18
potential (7) 18:21 19:20
20:19 25:11 32:18 36:14
65:13
potentially (5) 16:24 19:18
21:24 24:17 25:4
poundstretcher (1) 42:8
prayers (1) 54:2
precisely (1) 62:4
precision (1) 63:14
predominantly (1) 32:2
preemptively (1) 62:8
prefer (1) 57:7
prejudicing (1) 57:21
prepared (2) 55:12 68:5
preparing (1) 67:20
presence (2) 1:7 10:13
present (5) 8:6 10:21 17:5
29:12 57:12
press (2) 54:23 58:19
pressure (4) 27:8 32:2 34:16
38:4
pretty (3) 34:5 49:2 68:11
prevent (1) 65:24
previous (3) 11:14 12:19
30:24
primary (1) 59:15
principal (3) 18:5 27:6 29:10
principle (3) 13:22 30:19
38:5
principles (4) 59:22 61:16
62:22 68:11
prior (2) 3:5 30:13
probably (1) 22:7
procedural (1) 60:9
produce (3) 59:16 60:1 69:12
producing (2) 34:12 69:3
production (1) 29:18
profession (1) 2:3
professional (1) 11:3
profile (1) 18:19
profound (1) 10:18
profusely (1) 14:4
properly (2) 60:20,22
propose (1) 69:21
prospect (1) 64:17
protracted (1) 35:1
prove (1) 19:23
proved (1) 20:24
provide (1) 69:19
provided (4) 3:2,5 39:15
58:16
providing (1) 3:3
province (1) 33:8
pseudonyms (1) 50:7
pubic (1) 5:6
public (4) 3:17 31:16 47:12
66:4

publication (1) 57:18
pulled (1) 50:17
pulling (1) 50:23
pulse (1) 19:9
punch (2) 23:15,23
puncture (2) 17:14 20:10
purchase (6) 41:22,23
42:1,3,7,10
purchased (1) 41:20
purple (2) 46:20 48:18
purpose (1) 39:2
purposeful (3) 33:22 34:19
65:17
purposes (1) 18:4
push (1) 38:6
pushed (1) 24:20
pushes (1) 34:17

Q

q (102) 1:24 2:3,6,19,23,25
3:2,12,16,21,25 4:25
5:8,15,19,23 6:8 7:4,10
8:1,9,19 9:6 10:15,23
11:13,18,21 12:12,17
13:2,7,13,25 14:5,16,22
15:9,14 16:6,9,17,19,24
17:3,8,21 18:2,24 19:16,24
20:3,22 21:1 22:9,18,25
23:17,24 24:9,22
25:6,13,21,25 26:18
27:2,10,24 28:4,12,15,19
29:4,7,10 30:2,14
31:1,11,17 32:9,16,20
33:1,11,15,25 34:21
35:8,22 36:2,10,16
37:6,12,25 38:11
39:12,15,18,21
qc (6) 1:20 39:5 57:14
71:5,7,8
qualifications (1) 2:7
qualify (1) 37:18
question (7) 34:25
60:5,6,12,13 62:25 63:2
questions (13) 1:20,24,25
38:17,19 39:5,22,24
60:2,25 63:5 71:5,7
quite (7) 6:19 17:11 20:11
34:25 40:12 51:20 55:15
quote (1) 3:3

R

r158 (1) 66:13
radius (3) 51:10,10,12
raised (1) 24:6
raking (1) 6:23
range (4) 6:15 21:11 32:21
33:8
rapid (3) 10:20 27:8 31:25
rare (1) 19:25
rarely (1) 6:6
rate (1) 36:23
rather (7) 15:17 19:2 22:8
23:6,14 30:18,25
rationale (1) 69:13
reach (4) 32:21 36:10 60:22
63:8
reached (1) 66:17
read (1) 63:21
readily (1) 55:15
reading (1) 57:21
ready (2) 1:4 55:13
real (4) 7:18 65:3,12 66:1
realistic (2) 65:8 67:12
reality (1) 15:17
really (2) 19:2 40:22
rear (1) 8:10
reason (1) 37:20
reasonable (2) 31:9 67:4
reasonably (4) 61:25 64:15
67:7,8
reasons (1) 65:14
recall (7) 27:6 28:20 44:20
48:22 51:4,5 68:5
recalled (2) 39:4 71:6
received (1) 44:13

recent (2) 30:6,17
recently (1) 26:3
reception (1) 44:16
recognise (1) 68:16
recognises (1) 62:7
recommended (2) 51:12,15
reconstructed (1) 53:23
record (4) 39:15 56:22
57:2,22
recorded (1) 4:22
recovered (10) 7:3 9:2 10:14
11:11 12:6 13:1,22 14:15
16:2 53:4
recovery (2) 16:4,16
red (2) 44:3 53:4
reemphasise (1) 4:15
refer (2) 31:1 44:3
reference (3) 9:15 35:18 40:6
referred (3) 30:15 32:9 42:15
referring (1) 41:21
refers (1) 26:11
reflect (1) 56:14
reflected (2) 26:20 27:4
regard (3) 30:1 33:10 64:25
regarded (3) 18:9 65:7,9
regarding (1) 6:15
regards (1) 67:6
region (7) 10:14 15:3,11,21
23:13 27:13 36:13
registered (1) 2:3
registration (1) 39:10
relate (1) 28:2
related (2) 31:15 37:23
relates (1) 27:17
relating (4) 41:25 42:23 43:2
62:20
relation (6) 26:3 28:5 35:22
36:16 51:1 67:15
relationship (1) 19:2
relative (1) 7:20
relatively (12) 9:4 10:20
13:3 16:14 17:12 18:19
20:8 24:25 26:17 34:10
56:24 57:10
release (1) 3:18
relevant (7) 2:6 25:22 31:10
54:14 60:20 63:6 64:23
remains (1) 20:3
remember (1) 5:8
reminds (1) 4:13
remote (1) 29:1
removed (1) 50:15
repeatedly (1) 65:19
report (6) 3:4 4:1 5:21 17:22
29:7 31:5
reports (1) 6:4
represent (1) 27:1
representations (1) 4:10
representative (1) 68:17
representing (2) 15:1 23:25
represents (1) 19:3
requested (1) 30:9
require (1) 62:3
requires (4) 38:4 58:5,6,7
reserve (2) 34:11,14
resolve (3) 58:21 62:23 69:1
resolving (1) 63:4
respect (2) 47:12 63:11
respiratory (1) 26:18
respond (1) 64:8
response (3) 52:2 66:21 67:8
responses (1) 57:18
responsibly (1) 68:19
responsive (3) 55:8,11,22
restraining (2) 22:19 49:18
result (5) 10:18 26:23 27:13
29:17 61:2
resulted (2) 10:15 61:17
retained (1) 6:3
retirement (1) 70:4
retroperitoneal (1) 28:9
return (8) 59:1,2,11 60:20,24
61:4,10 67:18
returned (1) 57:20
reverse (1) 24:19

review (1) 63:21
rib (1) 10:4
ribs (3) 12:1,16 28:23
righthand (3) 7:24 12:15,21
rights (2) 58:5 61:8
rigorous (1) 58:3
ring (1) 24:2
rise (8) 10:11 20:18 22:1,2,3
26:13 31:24 70:8
risk (1) 69:24
role (1) 59:15
role (9) 43:24 45:24
46:2,4,6,12 52:21 58:13
66:16
rooms (1) 45:21
rough (2) 18:19 24:6
roughened (2) 24:18,20
roughly (1) 15:3
round (1) 12:20
rounded (2) 18:18 20:12
route (2) 15:22 42:16
routes (2) 15:17 50:2
royal (3) 2:10,12,13
rules (1) 59:24
ruling (1) 69:12
run (1) 54:13
running (1) 50:19
rush (1) 55:14

S

sac (2) 27:16 28:10
safe (2) 58:25 60:23
safely (1) 63:8
sake (1) 22:1
same (4) 13:22 43:5 49:13
66:10
sample (1) 30:21
samples (1) 29:22
saskia (4) 44:24 45:13 47:1
48:2
sat (4) 33:18 52:13 65:20
66:18
satisfied (1) 63:11
saw (3) 8:2 43:15 52:8
scalp (6) 22:6,15,15 26:2,14
36:2
scene (4) 50:14,15 64:6 65:4
science (1) 2:8
scissors (2) 42:7 54:6
screen (9) 25:21 29:12 31:12
41:11,13 49:16 50:16,22
52:18
scrutiny (1) 58:9
scuffle (1) 25:4
seat (1) 1:17
second (13) 10:4 18:24 19:1
24:4 28:23 38:11 49:2
51:25 52:7,13 58:24 60:23
65:11
secondary (1) 28:24
secondly (1) 63:2
seconds (3) 48:13 49:14
66:11
section (3) 17:22 57:17
59:25
sections (2) 30:22,23
see (68) 1:8,15 6:12,20
7:5,7,11 8:10,13,15,19
10:17 11:5,9,18
12:13,17,21 13:5,16
15:6,12,25 16:22 18:11,20
19:1 21:6,24 23:10,24
25:6,8,18 31:12 34:4 35:1
38:18,20 39:21 40:12,19
42:25 43:19 45:7,9,17 46:6
47:20,23 49:2,19,22
50:4,8,18,20,22 51:21,24
52:2 53:12,20 55:25 57:15
69:20 70:5
seeing (1) 55:1
seek (1) 6:4
seeks (1) 5:3
seen (10) 4:9 21:15 38:12
43:18 47:12 49:6 56:10
64:5 65:17 66:2

segment (1) 24:4
selecting (1) 58:23
self (3) 61:23 62:8 64:4
selfdefence (3) 61:20
63:10,11
selfharm (1) 5:5
sense (3) 22:5 37:19 41:4
separate (1) 40:25
separates (1) 12:2
sequence (4) 12:12 48:15,25
52:10
series (8) 9:6 42:22 49:7 50:8
51:24 52:18 59:18 67:23
serious (1) 66:4
seriously (2) 64:10 66:1
served (1) 46:3
session (1) 43:25
sessions (1) 46:1
set (16) 17:23 38:11 42:25
45:5,6,8 47:17,19 51:2
54:8 59:22 62:15 63:19
67:21 68:9 69:22
seven (1) 64:25
seventh (1) 66:21
shallow (10) 7:1 8:16 9:4
11:7,11 13:4 16:3,14 21:22
23:11
shallowly (1) 12:23
shape (2) 18:19 22:3
sharp (13) 17:23
18:4,7,7,9,10,24
20:3,19,22 21:17 35:10
53:20
shaved (1) 5:7
sheath (3) 19:7,7,17
sheet (1) 41:15
shock (3) 37:16,18,21
shod (2) 21:12 25:12
shoe (1) 24:18
short (8) 7:21 16:15 57:5,13
60:17 62:17 64:25 67:12
shortform (8) 58:23 59:6
61:16 62:22 67:14,18
68:25 69:4
shortly (1) 32:6
shot (11) 3:22 33:21 34:18
35:5 38:1 46:17 47:25
63:13,15 65:22 66:17
shots (13) 33:12,17,23 34:23
38:11,12 49:25 50:2
52:7,14 66:6,11,14
should (16) 58:15,15,21
59:10,12,14,15,20 60:25
63:3,21 67:17,19 68:1,10
69:2
shoulder (10) 8:11,24 9:1
15:10,12 18:22,25 29:3
36:11,14
shouldnt (1) 60:4
shouts (1) 65:5
show (12) 4:3 9:8 14:5,17
20:11 33:1 44:23 49:24
50:1 51:10 52:6,10
showed (2) 38:8 43:11
showing (34) 9:10,14
41:16,19,23
42:3,6,9,12,16,19,20
43:10,13,24 44:12 46:25
47:4,8,17,19
48:1,3,6,12,16 49:8,14,20
50:9,16 51:8 52:11,18
shown (2) 18:3 44:10
shows (9) 14:23 15:25 34:9
47:10 52:8,22,24 53:6,6
side (22) 6:21,22,23 7:24 8:2
9:13,20 10:3 11:6,19,24
12:1,16,21 13:9 17:15
19:17 23:19 26:6,10 43:12
46:6
sightings (1) 48:2
sign (2) 52:4 53:17
significance (5) 4:25 5:9
46:21 51:12 57:1
significant (17) 5:4 6:19 9:21
10:16 11:15 12:25 13:25
16:6 24:1 25:1,25 28:12

36:6 37:2 52:25 66:22,25
 significantly (4) 12:8 28:4
 35:12 47:5
 signs (4) 5:3,5 17:23 33:7
 similar (5) 19:3 25:8,11
 47:14 56:13
 similarly (2) 43:23 46:22
 simon (2) 42:24 43:6
 simultaneously (1) 66:7
 since (1) 2:18
 single (5) 19:22 26:9 40:22
 68:6,7
 sir (24) 1:6,11,14 4:1 38:25
 39:1,17 40:3 41:10 48:22
 54:13 55:4 56:7,8,18
 57:16,24 64:25 68:5,16,24
 69:10,24 70:7
 sits (1) 60:18
 sitting (1) 33:22
 situ (1) 17:16
 situated (1) 20:8
 situation (1) 65:22
 situations (1) 7:18
 sixth (3) 12:1 28:23 66:14
 size (2) 10:12 35:4
 skin (14) 6:24 9:2 11:7 12:5
 15:23 16:1 18:18 20:14
 21:20,20,20 23:14 24:7,7
 skintagged (1) 24:5
 skull (4) 21:23 22:15 26:8
 36:6
 slightly (6) 12:11 13:17
 14:12 16:4 19:16 44:12
 small (4) 17:12,14 24:7
 30:22
 smoke (1) 50:20
 smoked (1) 31:8
 society (1) 58:8
 sole (1) 24:18
 solid (1) 9:23
 somebody (1) 57:12
 someone (1) 31:6
 something (3) 20:18 21:19
 24:6
 sometimes (1) 17:12
 somewhat (1) 8:13
 sorts (1) 24:13
 sounds (1) 18:6
 space (2) 16:13 33:17
 spacing (1) 17:20
 span (1) 17:18
 speaking (1) 20:8
 spear (2) 3:14 20:18
 specialist (2) 29:25 30:9
 speculative (2) 7:25 35:7
 speed (1) 9:21
 spine (5) 10:10 12:9
 13:19,20,24
 split (1) 23:13
 splits (2) 21:20 22:16
 spotty (1) 26:4
 squeezes (1) 22:15
 stab (1) 19:22
 stabbed (1) 45:3
 stabbing (1) 49:10
 stafford (2) 42:13,19
 stage (8) 1:17 8:1 38:14
 54:17 57:8 63:1,17,18
 staircase (6) 43:21 44:19
 45:7,12,16 46:10
 stairs (1) 45:20
 stamp (4) 22:23 24:15 25:12
 36:5
 stamped (3) 3:18 24:10
 35:25
 stand (3) 1:17,19 66:25
 standard (2) 37:13,14
 standards (1) 58:6
 start (4) 6:20 32:3 55:17
 70:3
 stated (1) 30:10
 states (1) 60:9
 station (6) 42:13,16,18,19,23
 43:3
 stay (2) 65:19,20
 step (1) 21:7

stephanie (1) 45:14
 steps (5) 44:25 48:17 49:4
 66:12,13
 steroids (3) 5:14 30:9,12
 steven (1) 48:9
 still (4) 4:3 39:6 50:14 59:14
 stomach (3) 12:3 27:12,15
 stone (1) 4:24
 stop (1) 64:11
 stopped (1) 9:22
 stops (1) 32:8
 straight (3) 7:8 21:21 44:12
 strasbourg (1) 61:12
 strategy (1) 3:2
 street (3) 3:17 47:10 48:22
 stressed (1) 34:13
 stretched (1) 23:13
 stretches (2) 21:20 22:15
 strikes (2) 21:19 56:25
 striking (3) 12:8 20:15 33:18
 struck (5) 3:13 5:25 13:23
 19:17 24:12
 structure (1) 34:18
 structures (10) 9:23
 14:13,15 15:4,25 16:7
 20:16 21:11 27:23 28:19
 struggle (1) 36:13
 studied (1) 63:1
 study (1) 2:15
 stylised (2) 4:3 7:11
 subarachnoid (4) 26:9,10,15
 36:7
 subdivision (1) 21:9
 subdivisions (1) 18:5
 subject (3) 58:3,9,18
 subjective (1) 61:24
 submit (4) 58:8 59:8 67:17
 68:12
 submitted (1) 9:3
 subsequent (1) 64:20
 substance (1) 5:4
 substances (1) 29:8
 substantial (1) 14:1
 succinctly (1) 62:18
 suddenly (1) 65:20
 sufficient (1) 18:17
 sufficiently (1) 66:24
 suggest (4) 5:13 40:8 57:9
 67:23
 suggested (6) 30:5,7,16 31:2
 58:20 64:10
 suggesting (2) 66:23 68:14
 suggestions (1) 37:1
 suggestive (1) 38:8
 suggests (3) 18:17 33:20
 69:13
 suicide (1) 64:5
 suitcase (1) 51:18
 summarise (4) 2:6 28:19
 35:9 56:19
 summarised (1) 59:25
 summarising (1) 63:23
 summary (6) 35:22 37:6,13
 41:3 57:1 68:24
 summed (1) 56:10
 summer (1) 54:24
 summingup (4) 41:5 54:20
 55:18 70:2
 superficial (3) 21:7,22 23:20
 supplementary (2) 67:16,24
 supplied (3) 14:3 32:5 58:19
 support (1) 67:4
 supported (2) 27:20 66:15
 sure (2) 20:17 56:17
 surface (6) 6:24 16:1 21:10
 22:6 24:7 26:12
 surgery (1) 2:9
 surrounding (1) 43:10
 survey (1) 5:1
 survival (1) 35:1
 survived (1) 34:23
 suspect (2) 17:18 65:21
 sustained (1) 10:20
 sweepup (1) 39:23
 swelling (1) 25:9
 sworn (2) 1:12 71:4

system (6) 26:1,18
 27:2,10,24 28:15
 szczotko (1) 45:14

T

table (1) 7:14
 tackled (1) 48:11
 tactical (3) 52:20 66:15,16
 taken (10) 15:22 25:16
 29:22,24 31:4 40:23 46:7
 62:13 65:23 68:1
 takes (1) 30:21
 taking (2) 29:23 69:9
 talk (2) 40:20 54:18
 tangential (1) 22:5
 tape (4) 41:22 42:10 53:18
 54:6
 taser (12) 16:25
 17:1,3,10,11,19,20
 36:16,20,21 37:4 50:18
 tasers (1) 36:18
 task (2) 54:15 67:19
 tasked (1) 69:2
 teams (1) 39:8
 tear (1) 8:15
 teardropshaped (1) 8:13
 television (1) 34:4
 telling (1) 68:19
 temporalis (1) 26:5
 tent (1) 47:23
 term (1) 21:18
 termed (1) 7:15
 terminated (1) 10:7
 terms (12) 8:6 19:1
 25:1,3,10 30:11 31:17
 32:23 37:14,18 56:1 61:10
 terrible (1) 58:10
 terrorism (1) 5:16
 test (9) 30:9 31:9 60:21
 61:21 62:12,14 63:10
 64:1,22
 thank (23) 4:6,18 14:16
 26:18 38:17,20,22,23,25
 39:24 40:1,2,5 41:10 54:16
 55:2 56:7 69:6,10,17,24,25
 70:7
 thats (31) 2:14 3:1,9,24 4:23
 5:18 7:3 8:7,25 11:10,20
 13:10 16:1 19:9 21:18
 23:21 29:24 31:10 32:13
 33:8 34:25 36:24 37:23
 40:23 54:13 56:17 61:24
 62:2 67:14 69:6 70:5
 themselves (2) 59:8 65:25
 thereafter (1) 32:6
 therefore (3) 4:4 33:20 59:10
 theres (4) 13:10 40:19 61:9
 63:7
 theyre (1) 7:19
 thigh (1) 16:1
 thin (1) 23:14
 thing (1) 55:15
 thinking (3) 15:7 32:10,16
 third (4) 9:6 54:7 59:4 65:16
 thomas (1) 61:6
 thoracic (7) 10:8,15 12:4
 27:4 31:24 32:12 35:3
 threat (4) 62:3,10 67:8,10
 three (10) 9:8,14,24 14:17
 17:13 20:7 49:14,23 50:23
 66:11
 throat (1) 35:12
 through (33) 6:18 8:22,24
 9:4 10:1,5 11:7,24
 12:1,3,4,23 13:4,20
 15:3,18 16:23 19:5 20:13
 25:16 28:20 32:13 37:8
 40:10,21,22 41:8,13
 45:4,5,6 48:15 54:13
 throughandthrough (1)
 16:15
 thrown (1) 48:23
 thumb (2) 16:12,14
 thursday (1) 70:11
 time (16) 3:6,10 7:21 17:16
 30:6,17 34:10,20 37:9 48:5

50:5 52:4,7,18 66:10,15
 times (4) 3:23 40:16 45:3
 52:8
 timing (1) 70:2
 tissue (1) 27:20
 tissues (3) 12:23 15:18,19
 today (4) 4:8 55:9 63:15
 66:3
 todays (1) 1:11
 toenail (1) 29:22
 together (1) 37:3
 toilets (3) 44:24,25 45:2
 told (5) 3:11 26:19 54:6
 65:19 67:24
 tomorrow (7) 54:20
 55:2,16,18,22 70:1,6
 too (1) 40:14
 took (8) 11:6 14:9 42:13
 44:1,21 46:1 51:7 65:4
 topic (1) 58:17
 topics (1) 67:23
 towards (5) 9:20 13:19
 44:6,11 45:5
 toxicological (1) 37:6
 toxicology (2) 29:4,7
 trachea (1) 18:14
 track (27) 7:1 8:16,19,20
 9:4,9,16 11:1,2,7,11,21
 12:10,22 13:3,13
 14:6,8,9,18,23 15:15,20
 16:3,3,6,19
 tracks (4) 4:3 7:7,10 28:17
 traditionally (1) 60:15
 train (4) 42:13,19,21,21
 trained (3) 2:15 62:12 65:12
 training (5) 53:10,11 62:13
 64:19 65:14
 trajectories (3) 6:17
 32:21,24
 trajectory (2) 7:5 14:25
 transcript (1) 69:14
 transport (1) 51:6
 transported (1) 17:6
 trauma (9) 17:23 18:4,24
 20:4,22 21:1,8 23:25 25:7
 traumatic (1) 36:8
 travelling (1) 8:17
 travels (1) 10:10
 treat (1) 65:12
 trex (1) 41:22
 tribunal (1) 59:15
 tried (1) 40:14
 trojan (3) 49:23 50:4 63:25
 true (1) 29:20
 turn (10) 6:8 8:9 9:6 10:23
 14:16 21:1 25:23 31:11
 56:4 62:21
 turning (6) 22:25 26:18
 32:20 33:11 64:13,20
 tusk (9) 18:23 19:15 20:1
 35:15 48:19,22 49:2,3,11
 tusks (4) 3:14 46:7,23 53:19
 twice (1) 64:3
 twofold (1) 21:25
 twostage (3) 61:21 64:1,22
 typical (1) 23:14
 typically (1) 18:8

U

ultimately (1) 9:1
 understand (2) 1:24 29:25
 understanding (2) 30:23
 35:13
 understood (1) 67:9
 undersurface (2) 26:2 28:1
 undoubtedly (1) 11:16
 unique (1) 20:2
 uniquely (1) 18:22
 unless (3) 9:22 60:24 69:12
 unlike (1) 11:14
 unlikely (1) 22:22
 unnatural (1) 2:17
 unquestionable (1) 64:14
 unrealistic (1) 62:6
 unsafe (2) 59:5 63:9
 unsalvageable (1) 38:16

until (4) 33:16 57:19 65:12
 70:10
 upholding (1) 61:6
 upon (3) 9:25 20:12 35:25
 upper (16) 8:15 9:11
 10:5,5,6 15:10
 23:17,18,21,22 43:23
 45:17 47:20 48:19 52:9,10
 upright (1) 7:12
 upwards (2) 13:6 14:12
 urinals (2) 45:2 54:2
 urine (1) 29:12
 used (16) 18:22 22:10 37:19
 41:20 45:10 46:25 51:25
 53:15,17,18 54:7 60:15,16
 62:4,11 67:7
 use (1) 51:20
 using (7) 4:8 30:11 37:13
 47:3 50:6 61:22 62:10
 usman (64) 2:21 3:13,17
 5:25 7:11 8:3 17:1
 22:10,19 24:9 29:8 31:4
 33:12,15,20 36:17 37:25
 38:12 39:9 40:4 41:16
 42:12,16 43:3,6 44:21
 45:11 47:9,24
 48:7,11,12,16,21,23
 49:5,10,15,17,21,25 50:14
 51:11 52:13 53:15,22 54:9
 57:25 58:22 59:6 62:24
 63:9 64:3,5,8,9,18
 65:1,16,19 66:18,24
 67:11,20
 usual (1) 39:13

V

vague (1) 37:1
 various (14) 3:23 4:2 6:1 9:9
 25:15 27:13 28:16,21
 31:18 32:22 43:14 45:21
 51:5 52:2
 vast (1) 21:11
 vehicle (2) 50:24 52:4
 vehicles (2) 52:3,23
 vein (2) 19:10,11
 verdict (2) 61:7,14
 verdicts (1) 60:17
 vertebra (1) 12:4
 vertebral (1) 28:22
 vessel (3) 10:9,12,22
 vessels (6) 19:8,13,19 35:18
 38:3,7
 vest (1) 64:5
 vestibule (2) 46:5,8
 victims (1) 30:3
 video (2) 51:3 52:25
 views (2) 43:25 44:15
 visible (2) 48:9,14
 vital (2) 34:7 37:19

W

wait (1) 62:9
 walk (1) 43:3
 wall (7) 11:25 12:16,23
 13:9,21 20:14,15
 warning (2) 4:14 64:7
 wave (1) 52:14
 way (10) 4:10 12:7 15:8,18
 39:22 56:5 59:5,9,13 69:1
 weapon (3) 18:10 33:4 58:12
 weapons (1) 18:22
 wearing (2) 64:5 65:2
 webbed (1) 16:13
 website (3) 58:18 63:22
 69:15
 wednesday (1) 1:1
 weeks (4) 30:18,24,24 57:24
 weighed (1) 4:23
 weight (1) 4:21
 went (1) 42:24
 westminster (3) 56:11 68:2,3
 weve (10) 14:10 21:15,21
 26:3 49:6 54:17 58:16
 59:17 66:2 68:9
 whilst (1) 54:25

wholly (1) 19:14
 whom (2) 42:24 47:12
 william (1) 1:23
 willing (1) 50:4
 wind (1) 75:3
 windpipe (2) 18:15,16
 wires (1) 50:19
 wish (6) 1:17 55:10,14,23
 56:5 68:13
 wished (1) 56:3
 wishes (4) 39:21 55:11,20
 57:12
 wishing (1) 63:20
 witness (2) 1:11 39:1
 wont (1) 40:21
 wood (3) 3:14 22:1 36:5
 wooden (1) 22:9
 worded (1) 59:21
 wore (2) 53:24,25
 work (7) 2:14 6:17 15:20
 29:5 36:18 39:8,8
 working (1) 54:25
 works (1) 17:20
 world (1) 7:22
 worn (1) 53:22
 worth (1) 5:17
 wound (68) 4:3 6:9,10,21 7:2
 8:2,5,7,9,10,12,20,20,23
 9:6,10,11,12,17,25
 10:3,18,23,24
 11:5,9,16,18,18,20,22
 12:13,14,15,17,19,22,22
 13:3,7,8,10,11,14
 14:5,7,7,10,11,16,18,18,19,22,22
 15:10,13,15 16:6,9,19
 18:25 19:3,5 22:8 23:7
 32:11,16
 wounds (25) 4:2
 6:2,13,17,20 9:6,10,14,15
 12:12 14:24 16:22
 19:22,23 20:10 28:21
 31:15,20 32:9,24 33:1
 37:3,17,24 38:8
 wrested (1) 48:23
 wrist (1) 3:18
 written (6) 55:4,24 56:12
 58:17 63:18 69:15
 ws5 (3) 50:15,21 66:12

X

x (1) 37:14

Y

y (1) 37:15
 years (1) 2:17
 yellow (1) 47:23
 yesterday (6) 4:6 5:9 42:16
 53:11 55:4,7
 youll (2) 8:12 41:1
 yourselves (1) 40:14
 youve (5) 4:9 12:18 13:3
 23:3 40:18
 yx16 (3) 50:11,17,19
 yx99 (4) 50:11,19 64:2,10

I

1 (8) 6:5,10 18:12 19:2,4
 41:14 71:4,5
 10 (9) 14:16 29:13 36:10
 55:2 56:19 57:6 59:25
 66:11 70:11
 100 (2) 51:10,21
 1000 (3) 43:8 70:3,10
 100metre (1) 51:12
 1010 (1) 1:2
 10th (1) 12:4
 11 (1) 36:16
 1100 (1) 46:3
 115 (2) 43:16 52:19
 12 (3) 4:24 16:9 37:6
 1214 (1) 70:9
 13 (1) 66:11
 1356 (1) 48:5
 1357 (1) 48:5

1402 (2) 33:13 63:24
 1403 (1) 66:22
 1409 (1) 52:12
 1410 (7) 33:16 38:12 52:1
 64:21 66:6,22,23
 141028 (1) 52:13
 1411 (4) 38:12 52:1 64:21
 66:6
 141114 (1) 52:15
 141206 (1) 38:13
 15 (6) 17:17 20:10 37:12
 56:19 57:6 59:23
 16 (1) 61:15
 1725 (1) 4:22
 18 (2) 33:17 38:12
 1821 (1) 62:15
 1981 (1) 57:17
 1a (1) 37:15
 1b (1) 37:16

2

2 (15) 6:5 8:9 18:12,25 20:10
 23:1,7 49:24 50:4 58:6
 60:10 61:10 62:18 63:3,25
 20 (1) 41:22
 200 (1) 51:19
 2002 (1) 2:18
 2009 (1) 60:1
 2019 (3) 2:23 41:22,24
 2021 (2) 1:1 70:11
 22 (2) 41:24 63:20
 25 (2) 2:17 19:3
 28th (1) 42:2
 2b (1) 67:23

3

3 (6) 6:6 20:5,9 23:1 31:12
 32:11
 30 (1) 2:23
 34 (1) 3:4
 35 (1) 44:5
 39 (2) 71:6,7
 3c (1) 10:3

4

4 (7) 10:23 20:5,9 24:1,1
 29:3 32:20
 400 (1) 51:19
 42 (1) 57:17
 45 (1) 63:20
 48 (2) 67:22 68:9
 49 (1) 68:12
 4a (1) 10:25
 4b (1) 10:25

5

5 (10) 9:7,10 11:18 20:5,9
 24:1,3 29:3 33:1 49:14
 50 (1) 51:10
 57 (1) 71:8
 5foot (1) 4:23

6

6 (2) 12:13 33:11

7

7 (4) 5:21 12:21 13:1 35:9
 76 (1) 4:24

8

8 (7) 4:23 10:23 13:7 32:16
 33:22 34:24 35:22
 80 (1) 29:15
 816 (1) 30:12

9

9 (3) 1:1 17:17 36:2
 9a (1) 14:7
 9b (1) 14:7