

1 A. My name is Dr. Pramod Gumpeni, P-r-a-m-o-d,
2 last name, Gumpeni, G-u-m-p-e-n-i.

3 Q. Dr. Gumpeni, how are you employed?

4 A. I'm one of the Assistant Medical Examiners for
5 Harris County.

6 Q. How long have you worked as an Assistant
7 Medical Examiner?

8 A. Approximately two and a half years.

9 Q. And what are some of your education and
10 training you've had to prepare you for that position?

11 A. I completed my undergraduate training at Duke
12 University followed by medical school at Cornell
13 University in New York City. I did my anatomic and
14 clinical pathology residency at New York Presbyterian
15 Hospital, followed by a forensic pathology fellowship in
16 New York City.

17 Q. And some of your -- what are your duties as a
18 Medical Examiner?

19 A. Our main function as a Medical Examiner in
20 this jurisdiction is to determine the cause and manner
21 of death of decedents that die within Harris County.

22 Q. And what procedure do you use to determine
23 that?

24 A. We use several procedures, including autopsy,
25 investigation, lab work, blood work.

1 Q. How long have you been performing autopsies?

2 A. Since doing my residency since 2003.

3 Q. Exactly what is an autopsy?

4 A. An autopsy is a scientific tool and procedure
5 that we use that consists of doing an external
6 examination of the body looking for signs of disease, of
7 injury to the body, followed by an internal examination
8 of the body which involves making scientific incisions
9 on the body and then removing of organs, examination of
10 the organs both visually and then looking at sections
11 under the microscope, as well as taking samples for
12 toxicology and microscopic studies.

13 Q. Now, I want to refer you to Case No.
14 ML-080256. Did you perform that autopsy?

15 A. Yes, I did.

16 Q. And what date did you perform that autopsy?

17 A. The autopsy was performed on January 23rd,
18 2008.

19 Q. And what was the name of the person who was --
20 the autopsy was done on?

21 A. I believe it was Whitt Edward Bruney.

22 Q. Now, what are some -- what's the procedure for
23 doing an autopsy? What steps do you take?

24 A. Well, as I previously described, the body is
25 received by our -- in our investigation division. And

1 then we accession the body. We bring it into the
2 autopsy suite. Begin with an external examination,
3 which I review the investigational information as well
4 as doing an external examination of the body detailing
5 any injuries that I see on the body, any disease states
6 I see of the body, as well as determining any physical
7 characteristics of the body, tattoos, scars, hair color,
8 eye color, et cetera.

9 Then I proceed to do a collection of evidence
10 that is present on the body, removal of the clothing.
11 I'll take multiple photographs along this procedure.
12 And then we proceed with opening the body and removing
13 organs as well as removing foreign objects, bullets, any
14 objects that we see inside the body and photographing
15 and documenting as we go along.

16 MR. MOSS: May I approach the witness,
17 your Honor?

18 THE COURT: Sure.

19 Q. (BY MR. MOSS) Let me show you what has been
20 previously marked as State's Exhibits 31 through 43.
21 Would you look at those for me, Doctor?

22 A. All right.

23 Q. As for 31 through 42, do you recognize those?

24 A. Yes.

25 Q. And what are they?

1 A. They are the photographs taken during the
2 course of the autopsy.

3 Q. Are they true and accurate representations of
4 the way the body was depicted on that date?

5 A. Yes, they are.

6 Q. As for 43, what is that?

7 A. Forty-three is the copy of the autopsy report
8 that I generated pursuant to this autopsy.

9 Q. Was it at or near the time that you performed
10 the autopsy?

11 A. Yes, it was.

12 Q. Did you sign and date that?

13 A. Yes, I did.

14 MR. MOSS: Tender to Defense counsel
15 State's Exhibits No. 31 through 43 for any objection and
16 ask they be put into evidence.

17 (State's Exhibit Nos. 31 through 43 offered)

18 MR. ALFORD: Your Honor, we have no
19 objection to State's Exhibits 31 through 42.

20 THE COURT: All right. I'm sorry. For
21 the court reporter, 31 through 42 are admitted.

22 (State's Exhibit Nos. 31 through 42 admitted)

23 MR. ALFORD: I object to the final page of
24 State's Exhibit 43 as hearsay, your Honor.

25 THE COURT: All right. That will be

1 sustained.

2 MR. MOSS: For the record, 43 may come in?

3 THE COURT: Yes.

4 (State's Exhibit No. 43 admitted)

5 THE COURT: And then what about 44 and 45?

6 MR. MOSS: I'll go ahead and enter them.

7 Q. (BY MR. MOSS) Do you recognize these two
8 documents, Doctor?

9 A. Yes, I do.

10 Q. And what are they?

11 A. I believe they're enlargements of my autopsy
12 diagrams.

13 Q. And are they replicas of your report?

14 A. Yes, they are.

15 MR. MOSS: Tender to Defense counsel
16 State's Exhibits No. 45 -- 44 and 45 and ask they be put
17 into evidence.

18 (State's Exhibit No. 44 and 45 offered)

19 MR. ALFORD: No objection.

20 THE COURT: Okay. Thank you very much.

21 State's 44 and 45 are admitted.

22 (State's Exhibit Nos. 44 and 45 admitted)

23 MR. MOSS: May I publish to the jury, your
24 Honor?

25 THE COURT: Yes.

1 Q. (BY MR. MOSS) Okay. Looking at State's
2 Exhibit No. 31, what is this?

3 A. It's an identification shot of the decedent.

4 MR. MOSS: May I have the witness step
5 down?

6 THE COURT: Sure.

7 Just keep your voice up, Doctor.

8 THE WITNESS: No problem.

9 THE COURT: You can step down.

10 Q. (BY MR. MOSS) So, when viewing the body, did
11 you find any characteristics or abnormalities in the
12 body?

13 A. Yes, we did.

14 Q. What did you find?

15 A. We found a total of 9 gunshot wounds of the
16 body.

17 Q. If you wouldn't mind stepping up here, Doctor?
18 Now, which of the gunshots wounds are present on the
19 diagram?

20 A. On this diagram is present five of the gunshot
21 wounds, which are composed of entrance and exit gunshot
22 wounds.

23 Q. Can you point out those gunshot wounds that
24 you see on there?

25 A. On this diagram is shown the entrance for

1 Gunshot Wound D as marked in my autopsy report where the
2 bullet was lodged for Gunshot Wound D in my autopsy
3 report, the entrance for Gunshot Wound E on the left
4 hip, the exit for Gunshot Wound E on the right lower
5 quadrant of the abdomen and the exit for Gunshot Wound A
6 on the left upper back.

7 Q. So, just to be sure, there's one gunshot wound
8 that goes from this point near the upper left of the
9 chest and is lodged inside his body?

10 A. That's correct.

11 Q. And there's a second gunshot wound that enters
12 through the back and comes out the front of the
13 decedent?

14 A. Yes, correct. Entrance from the back of the
15 left hip and exits to the right lower quadrant of the
16 abdomen.

17 Q. And finally, are the entrance wounds shown on
18 this for A in this diagram?

19 A. On this diagram, no.

20 Q. On State's Exhibit No. 45, is the entrance
21 wound on this diagram for A?

22 A. Yes, it is.

23 Q. Where is it?

24 A. It's located here on the anterior aspect of
25 the left shoulder.

1 Q. You said there were two other gunshot wounds.
2 Are they shown on this diagram?

3 A. That is correct, they are.

4 Q. Where are they?

5 A. Again, there's an entrance gunshot wound on
6 the back of the right hand which exits the palmar
7 surface of the right hand. There is an entrance gunshot
8 wound on the back of left hand which exits the palmar
9 surface of the left hand.

10 Q. Okay. Now, if you don't mind, Doctor, if you
11 could go back to the original diagram and just maybe
12 point out on me where exactly, let's say, for example,
13 D, where is that wound?

14 A. D entered approximately above the left nipple
15 and at a downward trajectory and becomes lodged in the
16 subcutaneous tissue in the right flank right around
17 here.

18 Q. And as for Entrance E, is that found on the
19 back of the decedent?

20 A. The back of the left hip, correct. Its
21 entrance is approximately here and it exits on the
22 anterior service approximately, I believe, right here.

23 Q. As for A, where does A enter at?

24 A. A enters here in the left shoulder and exits
25 the left upper back.

1 Q. And finally as for C?

2 A. C is on the right hand. Enters approximately
3 here and exits on the palmar surface.

4 Q. And finally, the last gunshot wound, B?

5 A. Enters approximately here and exits here near
6 the thumb.

7 Q. Okay. You can have a seat, Doctor?

8 A. Okay.

9 Q. Now, only one of the bullets was lodged in the
10 Complainant?

11 A. That is correct.

12 Q. Let me show you State's Exhibits No. 32 and
13 34. And what are those?

14 A. Thirty-two and 34 depict Gunshot Wound A
15 entrance and the Gunshot Wound A exit.

16 Q. Just for clarification, the entrance to
17 Gunshot Wound A is where on this diagram?

18 A. Here.

19 Q. And exits?

20 A. Here on the left upper back.

21 Q. Okay. Now, what type of trajectory does this
22 bullet have?

23 A. Trajectory of A was front to back slightly
24 left to right and slightly downward.

25 Q. Okay. Looking at State's Exhibits No. 33 and

1 35, what is shown on this?

2 A. In 33 is shown the entrance of Gunshot Wound
3 D. And 35 shows the -- where the bullet is lodged in
4 the tissue from D and also the -- I believe it's the
5 exit from E.

6 Q. Let's talk about B for right now. So, we're
7 on this chart as D again, the entrance wound?

8 A. D enters in the left upper chest and the
9 bullet is lodged in the tissue in the right upper
10 quadrant of the abdomen.

11 Q. What type of trajectory does this bullet have?

12 A. D's trajectory was slightly front to back,
13 left to right and markedly downward.

14 Q. You said "markedly downward"?

15 A. Correct.

16 Q. What do you mean by "markedly downward"?

17 A. I estimate it to be more than -- approximately
18 50 degrees downward angle.

19 Q. Again looking at 35 and now 36, talking about
20 the Gunshot Wound E, is that portrayed in here?

21 A. Yes. The entrance is on State's Exhibit 36 on
22 the back portion of the left hip and the exit is on the
23 State's Exhibit 35 in the right lower quadrant of the
24 abdomen.

25 Q. Just for, again, for reference, where is the

1 entrance wound on this chart?

2 A. Here on the back of the left hip.

3 Q. And the exit wound?

4 A. Right lower quadrant of the abdomen.

5 Q. What type of trajectory did the bullet have?

6 A. This one's back to front, left to right and
7 slightly upward.

8 Q. Now, looking at State's Exhibits No. 37 and
9 38, what is shown in this photograph?

10 A. Let me refer to my notes. One second.

11 Q. Okay.

12 A. I believe this is Gunshot Wound B. On State's
13 Exhibit 37 is shown the entrance on the back of the left
14 hand. And State's Exhibit 38 is shown the exit on
15 the -- near the thumb of the left hand.

16 Q. Looking at State's Exhibit No. 45, can you
17 show the jury where those are?

18 A. Here's the entrance on the back of the left
19 hand and the exit near the thumb of the left hand.

20 Q. What type of trajectory did this bullet have?

21 A. We described it as being back to front and
22 slightly right to left.

23 Q. Looking at State's Exhibit No. 39 and 40.
24 What are depicted in those photos?

25 A. On State's Exhibit No. 39 is shown the

1 entrance for Gunshot Wound C. And State's Exhibit 40
2 shows the exit for Gunshot Wound C.

3 Q. Again, can you show the jury on this chart
4 where those are?

5 A. Entrance is shown here on the back of the
6 right hand and the exit is here on the palmar surface of
7 the right hand.

8 Q. What type of trajectory did this bullet have?

9 A. C was back to front and slightly downward.

10 Q. And finally, looking at State's Exhibits
11 No. 41 and 42, what is this a picture of?

12 A. This is a picture of the only article of
13 clothing that came with the decedent. It's a glove of
14 the left hand.

15 Q. Are there any marks on this glove?

16 A. Yes. There was a perforating gunshot wound
17 through the glove which is marked by the red arrow.

18 Q. Did it go in and out of the glove?

19 A. That is correct. It did.

20 Q. And again, which hand is this?

21 A. It was of the left hand.

22 Q. Just for the jury, which hand is the left
23 hand?

24 A. This one here -- sorry. This one here.

25 Q. That's no problem. All right.

1 The trajectory of the bullet on the entrance
2 and exit on the glove matched with the wound on the
3 hand?

4 A. Yes, it did.

5 Q. After you did an examination of the body, did
6 you come to any conclusions about the cause of death?

7 A. Yes, we did.

8 Q. What was the cause of death?

9 A. The cause of death was multiple gunshot wounds
10 of the torso and extremities with a perforation of the
11 heart, liver and intestines.

12 Q. And which bullet was the one that perforated
13 the heart?

14 A. That would be Gunshot Wound D.

15 Q. The one that entered at the shoulder and was
16 lodged in the body?

17 A. It entered on the left chest and was lodged in
18 the right upper quadrant of the abdomen.

19 Q. Did you come to any conclusions about the
20 manner of death?

21 A. Yes, we did.

22 Q. And what was that manner?

23 A. Homicide.

24 MR. MOSS: Pass the witness.

25 THE COURT: All right.

1 Mr. Alford?

2 MR. ALFORD: Thank you, Judge.

3 CROSS-EXAMINATION

4 BY MR. ALFORD:

5 Q. Dr. Gumpeni, my name is Matt Alford. We have
6 met before, correct?

7 A. Yes, we have.

8 Q. I came over to the Medical Examiner's a while
9 back and we talked about this case itself, correct?

10 A. Yes, we did.

11 Q. Thank you for being here today.

12 If we look at the -- the -- you said there's a
13 total of nine wounds, correct?

14 A. Nine wounds, correct.

15 Q. And when you say "nine wounds," you're not --
16 you're just talking about the entry and the exit of the
17 various injuries, correct?

18 A. Correct.

19 Q. Therefore, there is not any way for you as --
20 to testify to the fact that as a medical doctor and a
21 medical -- Assistant Medical Examiner as to how many
22 missiles or projectiles or bullets caused those nine
23 wounds, correct?

24 A. That is correct. I cannot.

25 Q. Is -- therefore, is it possible that there

1 were -- as we discussed before, it is possible that
2 three bullets or projectiles could have made all these
3 nine wounds, correct?

4 MR. MOSS: Object to speculation, your
5 Honor.

6 MR. ALFORD: He's an expert, your Honor.

7 THE COURT: Overruled.

8 A. (CONTINUING) I believe it is possible that
9 three bullets could have caused this number of injuries.

10 Q. (BY MR. ALFORD) Doctor, you were able to
11 remove one bullet, spent round or bullet from the body
12 of the Complainant, correct?

13 A. That is correct.

14 Q. And do you have that with you here today?

15 A. I do not have it with me.

16 Q. Do you know where that is?

17 A. It was submitted to evidence.

18 Q. Okay. Do you recall what type of bullet that
19 was? Was it a fully jacketed round or can you look in
20 your report --

21 A. I have it in my report. Please, one second.
22 I described the intact bullet as being fully copper
23 jacketed and of medium caliber.

24 Q. All right. And like we discussed before, the
25 fully jacketed round is going to travel or is able to

1 pass through tissue and bone more easily than a hollow
2 pointed round, correct?

3 A. In general, that's correct.

4 Q. And, therefore, when a fully jacketed round
5 can travel through the -- in this case, for instance, it
6 traveled through the hand and then on into the body and
7 even through the body, correct?

8 A. It is possible, that's correct.

9 Q. Absolutely. Of course, it could stop or lodge
10 as one of them did, correct?

11 A. That's correct.

12 Q. And that's how we're not able to say -- you
13 can't say to any specific medical certainty as to how
14 many shots actually caused nine wounds or 12 wounds or
15 20 wounds, correct?

16 A. I cannot.

17 Q. Do you check -- let me ask you this: Are you
18 familiar with what is commonly referred to as stippling,
19 powder stippling?

20 A. Yes, I am.

21 Q. Would you explain to the jury what that is?

22 A. Stippling is what happens when a gun is
23 discharged at a certain range and the burning gunpowder
24 that's eject from the casing can hit skin and cause a
25 kind of a burn pattern.

1 Q. Are you familiar with what range stippling is
2 often present?

3 A. Depending on the type of weapon, the range can
4 be anywhere from 6 inches up to 18 or 20 inches.

5 Q. So, fairly close range?

6 A. Fairly.

7 Q. Did you find any stippling on the body -- on
8 the Complainant's body?

9 A. There was one gunshot wound that did have
10 stippling around it.

11 Q. Okay. Which was that?

12 A. That was the entrance for Gunshot Wound C. I
13 believe it was on the back of the right hand.

14 Q. Doctor, based on the -- on your examination of
15 Mr. Bruney's body, you are unable to state or you can't
16 testify as to which of any of these wounds occurred
17 first or second or third in any sequence whatsoever; is
18 that correct?

19 A. No, I cannot.

20 Q. Doctor, I wanted to ask you if you could,
21 could you -- I was looking at your report that's been
22 entered into evidence. And I was trying to figure out
23 with the gunshot wound on Page 4 of your report under
24 No. 4C --

25 A. I'm sorry. Yes. I just realized I made a

1 mistake in my previous statement. It was actually
2 Gunshot Wound B that had the stippling around it. It
3 was the gunshot wound on the back of the left hand.

4 Q. Okay. Thank you. So, there was no stippling
5 around Gunshot Wound C?

6 A. No, there was not.

7 Q. Doctor, also on the same page under Gunshot
8 Wound B, could you direct me as to where there was --
9 where you state there was stippling on Gunshot Wound B?

10 A. Well, I call it -- there's an eighth of an
11 inch up to a quarter inch area of red punctate
12 discoloration around the entrance wound.

13 Q. Uh-huh.

14 A. And it's suggestive of stippling.

15 Q. Okay. I understand. It's suggestive of
16 stippling. But you can't say whether or not there was
17 actually stippling?

18 A. That is correct. The glove was on this hand.

19 Q. Okay. Did you examine the glove for any
20 stippling or burns?

21 A. The glove was very dark-colored. It was very
22 difficult to see if there was actual stippling on the
23 glove.

24 Q. So, what we actually have is a wound that's
25 suggestive of that, but you don't actually have any

1. stippling on Wound B either, correct?

2. A. That's correct.

3. Q. So, to make it clear as we go back, if we get
4. everything cleared up here, there was no stippling that
5. was actually found on any of the wounds of Mr. Bruney,
6. correct?

7. A. Not definitively, no.

8. Q. So, the answer's "No"?

9. A. No.

10. MR. ALFORD: May I approach the witness?

11. THE COURT: Yes, sir.

12. MR. ALFORD: May the witness step down.

13. THE COURT: Yes.

14. Q. (BY MR. ALFORD) Would you come down with me,
15. Doctor?

16. A. Sure.

17. Q. In response to the prosecutor's questions,
18. Doctor, I wanted to go through a little bit more in
19. detail about the wounds that you found on Mr. Bruney.
20. Okay?

21. A. Okay.

22. Q. If we look at -- again, we look at -- we'll
23. start -- we'll go in alphabetical order. Wound No. A or
24. Letter A?

25. A. Okay.

1 Q. Right there entering on -- where was the --
2 where did that enter again?

3 A. Anterior surface of the left shoulder.

4 Q. Okay. And that's why it's on the arm diagram
5 as opposed to the body diagram?

6 A. Correct.

7 Q. So, would you point to me where that would be?

8 A. Right here on the left shoulder.

9 Q. All right. And if we look on this diagram,
10 the exit wound for Wound A is where?

11 A. In the left upper back.

12 Q. Okay. And that would be on me again?

13 A. Approximately here in this area (indicating).

14 Q. That's what's referred to as a
15 through-and-through?

16 A. A perforating wound.

17 Q. Perforating wound. Go in, goes out, goes
18 through tissue and heads on to wherever.

19 We look at -- let's go on and talk about --
20 actually I want to skip from the hand wound and go on to
21 the body wounds as well. So, we'll go to Wound D.
22 Entrance is left above the left nipple?

23 A. Correct.

24 Q. Okay. And travels downward and lodges in the
25 right abdomen?

1 A. Correct.

2 Q. So, the path being, as you said, downward at
3 about 50 degrees?

4 A. Estimated approximately 50 degrees, correct.

5 Q. When you have an angle, for instance, of 50
6 degrees, you are not -- for instance, I could be
7 standing on this jury railing, for instance, and
8 shooting down at a 50-degree angle and have an entrance
9 here and more or less the bullet track that you have in
10 a situation like that. Would you agree with that?

11 A. That is correct, sir.

12 Q. Right. And -- or, for instance, in a
13 hypothetical if someone were here and were to shoot
14 closer at this angle without having being higher up,
15 they could be close and shoot down at that angle, that
16 could create a 50-degree angle, correct?

17 A. Yes, it could.

18 Q. If I was doing that, though, you would
19 probably expect to see some stippling at that point if I
20 were this close to the wound depending on all factors
21 being relevant, correct?

22 A. I didn't have any clothing. So, I can't say
23 for sure.

24 Q. Okay. They didn't -- you weren't able to
25 check the clothing?

1 A. I never received any clothing from the
2 hospital.

3 Q. Okay. But let's say if I were here
4 hypothetically doing that, you would expect to see
5 stippling depending on the type of weapon that it was?

6 A. It could be there, yes.

7 Q. Right. So, further, if you were to lean
8 forward, change the angle of your body, for instance,
9 like this, the gun -- would you bend over for me like
10 that? And the gun -- bend over a little bit further.
11 Thank you, Doctor. And the gun were here and shooting,
12 it could create a 50-degree angle, correct?

13 A. That's correct.

14 Q. The point being is from the path the bullet
15 track to the paths that were made by these projectiles,
16 there's no way to determine specifically, or you can't
17 say with any medical certainty where the bullet was
18 fired from or anything of that nature, correct?

19 A. That's apparent. I cannot.

20 Q. There's no way to determine what the location
21 of the victim was at the time he was hit by a bullet,
22 correct?

23 A. I cannot determine that.

24 Q. Or the location of the shooter at the time
25 that the person was shot. You can't state anything

1 about that?

2 A. No I cannot.

3 Q. All right. Now, if we look at Bullet Wound E
4 again, the entrance is in the --

5 A. Left lower back.

6 Q. Okay. And the exit wound is?

7 A. Approximately the right lower quadrant of the
8 abdomen.

9 Q. Okay. So, it's here heading front -- back to
10 front --

11 A. Left to right.

12 Q. -- left to right across here?

13 A. That's correct.

14 Q. Okay. Thank you, Doctor.

15 Doctor, I want to show you what's previously
16 been admitted into evidence as State's Exhibits 37, 38,
17 39 and 40.

18 A. Okay.

19 Q. Would you pick out for me, please, of these
20 exhibits the -- put together the right hand entrance
21 wound photo with the right hand exit wound photo,
22 please.

23 A. Repeat that again.

24 Q. Right -- both pictures of the right hand and
25 then both pictures of the left hand.

1 A. Okay.

2 Q. All right. So, what we have in State's
3 Exhibit 37 is the entrance wound on the left hand,
4 correct?

5 A. That's correct.

6 Q. And State's Exhibit 38 is the exit wound on
7 the left hand?

8 A. Yes.

9 Q. And what we have in State's Exhibit 39 is the
10 entrance wound of the right hand?

11 A. Uh-huh, that's correct.

12 Q. And State's Exhibit 40 is the exit wound on
13 the palm area of the right hand --

14 A. Yes.

15 Q. -- correct? If we look at those photographs
16 of the left and right hand, there's no way to determine
17 where the hands of Mr. Bruney were located at the time
18 that they were struck by a bullet, correct?

19 A. No, there is not.

20 Q. But you have no doubt that both the bullet
21 strikes in the left and right hand occurred -- the
22 entrance wound is to the back of the hand and not the
23 front of the hand?

24 A. As far as I can tell, yes. They're from the
25 back of the hand.

1 Q. As far as you can tell, that is your expert
2 opinion?

3 A. That's my expert opinion that it's the back of
4 the hand.

5 MR. ALFORD: Moment, your Honor?

6 THE COURT: Sure.

7 Q. (BY MR. ALFORD) Doctor, if I could, on the
8 entrance -- this is a two-dimensional drawing, correct?

9 A. Yes.

10 Q. Therefore, you only have the ability to put
11 something either on the front or the back of this
12 diagram, correct?

13 A. Yes.

14 Q. I just want to verify, when you've drawn
15 this -- the entrance wound for Wound E, it appears that
16 as though -- since this is a front or back option, it
17 appears though it's more in -- it would be in the back
18 of Mr. Bruney, correct, on this diagram?

19 A. On that diagram, yes.

20 Q. Right. But if we look at State's Exhibit 36,
21 if you'd look at that, wouldn't you agree with me that
22 that shows that it's not actually like a shot in the
23 back. It's more to the side?

24 A. It's on the back of the left hip.

25 Q. Back of the left hip as opposed to saying the

1 back, correct?

2 A. Correct.

3 Q. Now --

4 MR. ALFORD: That's all I have right now.

5 Thank you for your time, Doctor.

6 Pass the witness.

7 MR. MOSS: No further questions.

8 THE COURT: All right. May he be excused,
9 the doctor?

10 MR. MOSS: As far as the State's
11 concerned, your Honor.

12 MR. ALFORD: Yes.

13 If we could get a contact number for you,
14 Doctor, if we needed to have you come back, I would like
15 to do that. We can excuse you.

16 THE WITNESS: Okay.

17 THE COURT: Thank you, Doctor. You're
18 excused for now.

19 All right. State, call your next.

20 MR. MOSS: State rests, your Honor.

21 (State rests)

22 THE COURT: All right. State of Texas
23 rests.

24 What says the Defense?

25 MR. ALFORD: Judge, we have a motion.