

STATE OF CONNECTICUT, DEPARTMENT OF PUBLIC SAFETY-INVESTIGATION REPORT (DPS-302-E) (REVISED 2/3/06)

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CFS NO 1200704559	INCIDENT DATE 12/14/2012	TIME 09:41	INCIDENT DATE 12/14/2012		PRIMARY OFFICER EWISS, DANIEL E.		BADGE NO 0336	INVESTIGATING OFFICER VAN NESS, RACHAEL	BADGE NO 1431
INCIDENT ADDRES 00012 Dickinson Dr					APARTMENT NO	TOWN CD	TYPE OF EX	CEPTIONAL CLEARANCE CASE STATU	JS
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by Dr. Begg tha		hs use	ed "are not from	the San	dy Hook massacre,			of a child, and it is clearly statinappropriate to show such pic	
The testimony	has been attach	ed for	inclusion in the	case re	port (see attached).				
The status of t	he case remains	active	ely under invest	igation.					

THE UNDERSIGNED, AN INVESTIGATOR HAVING BEEN DULY SWORN DEPOSES AND SAYS THAT: I AM THE WRITER OF THE ATTACHED POLICE REPORT PERTAININGTO THIS INCIDENT NUMBER.

THAT THE INFORMATION CONTAINED THEREIN WAS SECURED AS A RESULT OF (1)MY PERSONAL OBSERVATION AND KNOWLEDGE: OR (2)INFORMATION RELAYED TO ME BY OTHER MEMBERS

OF MY POLICE DEPARTMENT OR OF ANOTHER POLICE DEPARTMENT:OR (3)INFORMATION SECURED BY MYSELF OR ANOTHER MEMBER OF A POLICE DEPARTMENT FROM THE PERSON OR PERSONS

NAMED OR IDENTIFIED THEREIN, AS INDICATED IN THE ATTACHED REPORT. THAT THE REPORT IS AN ACCURATE STATEMENT OF THE INFORMATION SO RECEIVED BY ME.

INVESTIGATOR SIGNATURE:
/TFC RACHAEL VAN NESS/

INVESTIGATOR I.D.#:

REPORT DATE: 04/18/2013 11:21 am 04531 SUPERVISOR SIGNATURE

SUPERVISOR I.D.#:

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Testimony of Dr. William Begg Director, Emergency Medical Services Danbury Hospital, Danbury Connecticut Before the Senate Judiciary Committee February 27, 2013

Thank you Chairman Feinstein, Ranking Member Grassley and members of the committee for the opportunity to testify today about gun violence in our country. My name is Dr. Bill Begg and I am the Emergency Medical Services Director at Danbury Hospital, which is roughly 10 miles from Newtown, Connecticut. Let me begin by saying that my heart goes out to the 26 families from Sandy Hook Elementary that lost their spouses, their parents, and their children in the worst mass murder of children the US has seen in the last century. Newtown is still hurting badly. Many first responders have not returned to work and many of our children have not returned to school. Many more who have returned to work are receiving counseling or considering counseling services.

In terms of my professional training, I am a board certified ER doctor that trained at The Johns Hopkins Hospital in Baltimore, Maryland. During my residency, I also did some training at the Maryland Shock Trauma Institute and I spent time practicing emergency medicine in the Fort Drum, New York Community while my wife served our country as a US army officer in the Somalia conflict. For the last twenty years, I have practiced emergency medicine at the Danbury Hospital Emergency Room in Connecticut and helped found and develop our region's trauma center. I am the local EMS Medical Director that serves the greater Danbury area, including Newtown. In 2003, I was named physician of the year in Fairfield County, Connecticut, an area which includes Newtown, Connecticut.

My inspiration for coming here today is for several reasons. I am a parent of students in the Newtown school district and I have family members that serve with the Newtown Volunteer Ambulance Corps. I serve as a track coach for one of the elementary schools in Newtown. Yet, what forever changed my life was being the Emergency Room physician that was on shift at Danbury Hospital on December 14th - the day of the horrific shooting at Sandy Hook Elementary School. This event has forever changed our community and my life. In the aftermath of the shooting, I, along with other like-minded physicians, founded United Physicians of Newtown, a group of 101 Newtown doctors that came together with a single platform in response to the Sandy Hook massacre. I also serve as medical advisor for the Newtown Action Alliance, another grass roots organization that formed in response to the Sandy Hook Massacre.

My goal is to bring my background as a doctor and as a parent to convince you that gun legislation that you are considering now will make a difference. It will make a difference in the lives of many and could prevent future tragedies like Newtown. While I am not a ballistics expert, I have seen many gun related deaths over the past 25 years. I witnessed an assault weapons related death my first day in a hospital as medical student in New York City in 1987. My experiences in Baltimore and NYC with assault rifle deaths are vivid memories I will never forget.

Specifically, I am asking that you pass Senator Feinstein's assault weapons ban to take militarystyle assault weapons and large capacity magazines off the streets. I'm a member of the American College of Emergency Physicians and American Medical Association, which has endorsed Senator Feinstein's assault weapons bill, along with most other health organizations that I am familiar with.

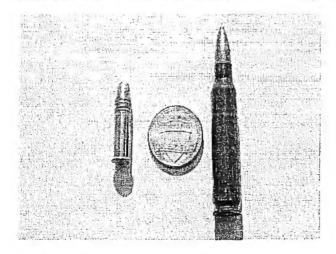
Second, I believe we need universal background checks for all gun purchases. A 2013 Johns Hopkins public opinion poll noted that 69% of all Americans, including 46% of gun owners, would support banning the sale of military-style, semiautomatic assault weapons that are capable of shooting more than 10 rounds of ammunition. The same poll noted that 89% of all Americans, including 84% of gun owners, would support universal criminal background checks.

Third, I believe that we must strengthen our mental health care system by ensuring that students and young adults get the proper treatment they need.

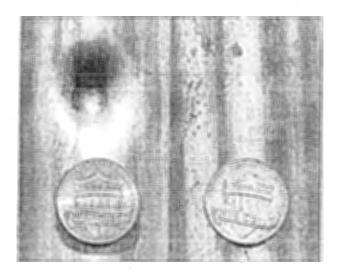
Fourth, please let us do some gun research that is real by ending the freeze on gun-related research at the Centers for Disease Control and other federal agencies. Lastly, preserve the rights of health care providers to protect their patients and communities from gun violence by allowing them to talk to their patients about gun safety.

Since many people outside of law enforcement, the military or the emergency room have never seen the destruction that a gunshot can cause on the human body, I have included several pictures. Note that these pictures are not from the Sandy Hook massacre, as it would be highly inappropriate to show such pictures in deference to the Sandy Hook families and in respect of HIPAA laws.

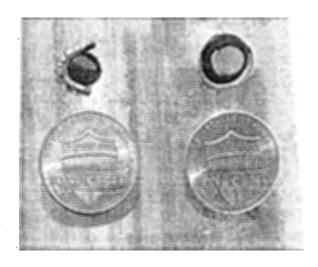
Handgun (.22) damage vs. Assault Rifle (.223) damage:



Handgun (.22) bullet vs. Assault rifle (.223) bullet



Handgun (.22) bullet damage to a metal pipe Left picture is the front of the pipe. Right picture in the back of the pipe.



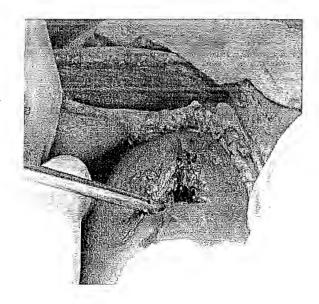
Assault rifle (.223) bullet damage to a metal pipe. Left picture is the front of the pipe. Right picture in the back of the pipe. Photo credits above: Aaron Spuler

Gunshot damage on the human body

1) CT scan of a gunshot to the brain. (Credit: Trauma.org)
The white area going from 9:30 to 3:30 position is the area damaged by the bullet:



2) Gunshot wound to the liver: (Credit: Trauma.org)
The area next to the silver probe is from a gunshot wound.



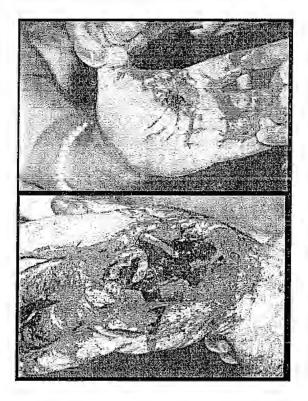
3) Gunshot wound to the chest: (Credit: Trauma.org)
The gunshot wound has blood around it near the nipple.



4) Gunshot wound to the hand (Credit: Trauma.org)

Top slide in the entrance wound from the bullet.

Bottom slide is the exit wound from the bullet.



5) Opening a person's chest after a gunshot (Credit: Connecticut trauma symposium) Final effort to identify and stop bleeding in person in usually in cardiac arrest



Each of the slides above represents gunshot wounds from different parts of the body, representative of wounds I have seen in my 25 year career in the medicine.

Each of the children murdered at Sandy Hook Elementary had reportedly three to eleven bullet wounds per the report of Dr. Wayne Carver, the Connecticut State Chief Medical Examiner on December 15, 2012. These pictures should in no way be construed as representing any of the actual injuries sustained by any of the victims from the Sandy Hook Massacre on December 14, 2012.

Unfortunately, mass shootings have happened all around the world. For example, in 1996, in Dunblane, Scotland, a 43-year-old gunman entered an elementary school and fired his weapons 109 times shooting 27 children and 4 teachers; killing 16 children and one teacher. He then shot and killed himself. Andy Murray (Reining US Open and Olympic tennis champion) survived the massacre.

Another example was again in 1996 but in Port Arthur, Australia. A 28-year-old gunman entered a popular tourist site with an AR-15 rifle and shot 35 people dead and wounded another 23 people.

The difference with these cases and the tragic string of mass shootings at Columbine, Virginia Tech, Aurora, Oak Creek and so many others is that legislators in those countries acted by passing reasonable gun violence measures. In response to the incident in Scotland, meaningful gun legislation was enacted, that still permitted certain sporting guns, historic handguns, and selected other guns. Gun laws in Australia, which had been relatively lenient before the Port

Arthur massacre, were reviewed and tightened significantly after the incident. Australians who want to purchase a gun now must have an extensive background check. Semi-automatic gun and assault type rifles were banned.

Did the legislation make a difference right away? Actually, in some instances, it didn't. After many years though, the effects of real gun legislation did decrease gun related deaths.

According to a December 17, 2012 article in Time World, the results of the Australian law were significant. A widely cited 2010 study in the American *Journal of Law & Economics* showed that gun-related homicides in Australia dropped 59% between 1995 and 2006. The firearm-suicide rate dropped 65%.

While the generation preceding the Port Arthur tragedy there had been over a dozen mass shootings, there has been no mass shooting in Australia since 1996. Furthermore, despite a surge in gun-related offenses in the early 2000s, the past seven years in the U.K. have seen successive drops in gun crimes.

Where do we stand now (2010 data)?

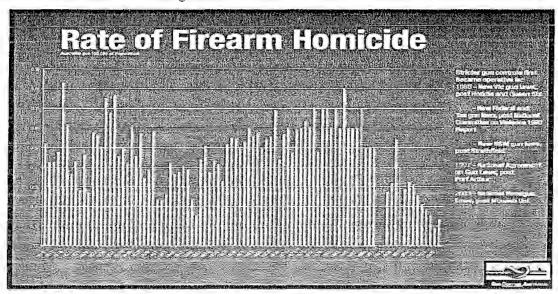
- Mass murders since 1996:
 - o USA: over 20
 - o Great Britain: 1
 - o Australia: 0
- Total gun deaths (2010): GunPolicy.org
 - o USA: 31.672
 - o Great Britain: 155
 - o Australia: 236
- Gun death rate per 10,000

Association between handgun purchase and mortality from firearm injury. Inj Prev. 2003 March; 9 (1):48-52

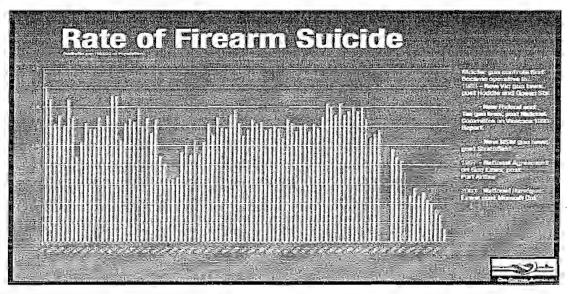
- o USA: 102
- o Great Britain: 2.5
- o Australia: 10.5

It's clear from these numbers that countries that have real gun legislation do actually have a lower chance of gun-related death for their citizens. Additionally, the charts below illustrate the dramatic reduction in homicides and suicides from firearms in Australia after the Port Arthur shooting.

Australian firearm related deaths (1915-2005) that highlight a significant drop in yearly homicide and suicide death rates after legislation was introduced.



Yearly Australian firearm related homicides rates relative to legislation that was introduced.



Yearly Australian firearm related suicide death rates relative to legislation that was introduced. Charts courtesy Gun Control Australia.

Gun legislation takes a while to come to fruition, but it works.

If you want to buy a gun with the idea of protecting yourself and your family, the data is quite clear that you have an *increased* chance of dying from gun related injuries:

- Homicide risk significantly increases if there is a gun in the home.
 - Women are five times as likely to die of gun violence from their partner if there is a gun in the home. July 2003, Vol 93, No. 7 | American Journal of Public Health Two-thirds of women killed by spouses are killed with guns.
 - A gun stored in the home is associated with a threefold increase in the risk of homicide. Gun ownership as a risk factor for homicide in the home. N Engl J Med. 1993;329(15):1084–1091pmid:8371731
- Suicide risk significantly increases if there is a gun in the home.
 - A gun stored in the home is associated with a fivefold increase in the risk of suicide. Gun ownership as a risk factor for homicide in the home. N Engl J Med. 1993;329(15):1084–1091pmid:8371731
 - Victims of suicide living in homes with guns were more than 30 times more likely to have died from a firearm-related suicide than from one committed with a different method. Am. J. Epidemiol. (2004) 160 (10): 929-936.
- Owning any gun significantly increases your risk of being shot.
 - People possessing a gun were more than 4 times more likely to be shot in an assault than those not possessing a gun. *Investigating the link between gun possession and gun assault. Am J Public Health.* 2009;99(11):2034–2040 Branas and colleagues
- Unintentional gun death significantly increased if you own a gun:
 - You are 28 times more likely to die of an unintentional gun death if you own a gun-Gun Policy and Research: Association between handgun purchase and mortality from firearm injury. Inj Prev. 2003 Mar;9(1):48-52).
- Overall risk of firearm death to your family if you own a firearm:
 - You have a significantly increased chance that you or your spouse or your kids are going to be killed from your own gun related to domestic homicide, suicide or accidental death.
 - This data must be available to those who are considering buying a gun out of fear of being killed from a potential intruder.

For all of these reasons, I am urging you to consider the following:

Ban of Military-Style Assault weapons and High-Capacity Magazines (over 10 rounds)

As a result of this growing gun violence epidemic, more than half of the largest mass murders in our countries history have taken place since Columbine. Mass shootings are a slowly growing cancer in our society that must be addressed now.

Folks say, in the big scheme of things there are not that many assault weapons deaths in our country. Please don't tell that to the people from Columbine, from Virginia Tech, from Tucson, from Aurora, from Wisconsin. And definitely do not tell that to the families of Newtown...

Require Background Checks for All Gun Purchases

We need to close the current loopholes that allow an estimated 40 percent of all gun sales to occur without a background check. You should also take steps to strengthen the background check system by requiring states to put more information into the database.

Strengthen Our Mental Health System

Once identified, ensure students and young adults get the proper treatment for mental health issues. What upsets me is the same folks that say we should only look at mental health issues as a cause of gun violence are the same ones that are saying we need to have smaller government. What are the first programs to be cut when we try to balance the budget—programs like mental health

I have little hope that in this fiscal climate that those who want to maintain the status quo for guns will actually vote for more mental health programs. I'm not asking for you to add mental health services, I'm just asking you to please not cut any more in the days to come.

Remove Current Restrictions on Federal Research on Gun Violence

End the freeze on gun related research, as the CDC and other scientific agencies have been barred by Congress from using funds to "advocate or promote gun control".

Assault rifle gun deaths include many that tragically don't even make it to the ER because the bodies are so badly mutilated they are pronounced dead in the field. Comprehensive research would allow governing bodies to collate data from a multitude of agencies.

Conduct research on the causes and prevention of gun violence; including links between video games, media images, and violence. Please let us do gun research that is real.

Education:

Protect the rights of health care providers to talk to their patients about gun safety

Clarify that no federal law prevents health care providers from warning law enforcement authorities about threats of violence.

In 2011, Florida legislation was proposed and signed into law by the governor (eventually rescinded) that wanted to prevent doctors from discussing gun violence with their patients. Doctors would have been fined \$10,000 and would have had their medical licenses suspended. What this did was to send a message to doctors across the country to "watch out". We are being intimidated not to discuss gun violence as a public health issue.

I accept one's second amendment right to own a gun if one goes through the proper channels. On the other hand, when I educate my patients on the effects of unsafe sex, morbid obesity, tobacco use, excessive alcohol use, texting and driving, or seatbelt use; please allow me as a medical doctor to talk to them about the risks of gun ownership - please?

In closing, I want to thank Senator Dianne Feinstein for all her efforts to address this public health issue of unnecessary gun deaths in our country. Since Senator Feinstein became mayor of San Francisco as a result of the assassination of her predecessor, there have been almost one million Americans killed from guns.

I want to also thank my Connecticut leaders, including Newtown First Selectman Pat LLodra, Congresswoman Elizabeth Esty, Governor Dan Malloy, Senator Chris Murphy, and Senator Richard Blumenthal for their tireless efforts to afford gun legislation change since you stood with the Sandy Hook families on December 14th in their darkest hour. The time you have spent with us on nights, weekends and holidays discussing this issue has not gone unnoticed.

I want to recognize the valiant efforts of the multitude of first responders and local residents who responded to Sandy Hook Elementary on December 14th.

To the families of those who lost loved ones, on behalf of the ER, we tried our best.

And to you lawmakers, my mom, and my dad were both elected Connecticut State representatives. I asked mom- mom, why won't they make a change, when most of the country supports gun legislation? Why do you think? She said well- they have their party lines, and they have their lobbies, they may not have seniority to vote their own way. I said, do you think this one time they'll make the right decision? She said- yes, I think this one time they might.

So I'm asking you to please make the right decision on behalf of Newtown, and Connecticut, and the United States.

Thank you.

Please note that my testimony represents the views of Dr. Bill Begg and the United Physicians of Newtown; not Danbury Hospital, nor Western Connecticut Health Network.

William V Begg III, MD, FACEP

Newtown, Connecticut Resident EMS Medical Director, Danbury Hospital Emergency Department Physician & Clinical Practices Coordinator, Danbury Hospital President, Danbury Hospital Medical Staff