NAME

N/A

Griffin, Tommy M.

Appellate Court Clerk

Raymond A. Finney, Jr., M.D., Pathologist William E. Elliott, M.D., Pathologist Eric P. Ellington, M.D., Pathologist Robert M. Potter, M.D., Pathologist

AUTOPSY REPORT

Department of Pathology and Laboratory Medicine Blount Memorial Hospital 907 East Lamar Alexander Parkway Maryville, Tennessee 37801-5193

CONDITIONS OF AUTOPSY

RACE W

SEX 25?age M

AGE

IDENTIFICATION OF BODY Sheriff's department

CLASSIFICATION OF AUTOPSY Medical Examiner's Autopsy authorization

AUTOPSY AUTHORIZATION (NAME/RELATIONSHIP) ATTENDING PHYSICIAN(S) District Attorney General, Mike Flynn N/A

AUTOPSY LIMITATIONS None

PERSON(S) PRESENT DURING PROSECTION Larry Muncy, representative of Sheriff's Department

Unknown

٩ **CLINICAL IMPRESSION(S):** N/A

DATE OF FINAL ADMISSION

SURGICAL PROCEDURE(S): N/A

PERTINENT ANATOMIC PATHOLOGY STUDIES PRECEDING DEATH: N/A

DATE AND TIME OF DEATH February 24, 1992, time uncertain

DATE AND TIME OF AUTOPSY February 25, 1992, 8:00 a.m.

Blount County PLACE OF AUTOPSY

PLACE OF DEATH

Blount Memorial Hospital Morgue

PROSECTOR E. P. Ellington, M.D.

PHOTOGRAPHS TAKEN: By Sheriff's Department TOXICOLOGY SPECIMEN(S) COLLECTED: None MICROBIOLOGIC CULTURES COLLECTED: None **OTHER STUDIES PERFORMED: None** OTHER INFORMATION: X-rays of skull. (See attached report)

FINAL ANATOMIC DIAGNOSES

DIAGNOSES:

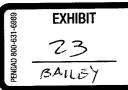
- Clesk JUN ²³ 1997 1. Shotgun wound to head, with extensive trauma to the brain, soft tissue, and skull
- Right below-knee-amputation, remote 2.
- 3. Laparotomy, with possible insertion of vena cava clip, remote
- 4. Polycystic disease, liver suggested
- 5. Emphysema

AUTOPSY SUMMARY AND CLINICOPATHOLOGIC CORRELATION

The autopsy findings confirm the impression of death due to shotgun wound to head. There is extensive damage to the brain, soft tissue, and skull.

CLINICAL ABSTRACT

The decedent was found on a river bank in Blount County with an apparent gunshot wound to the hea



CODE:

Attachment C

ACCESSION NO. 92ME06

RECORD NO.

OCCUPATION OF DECEDENT

GROSS EXAMINATION

The body is that of a young white male having short hair and a short beard and moustache. The height is approximately 6 feet, the weight approximately 150 ibs. The decedent is clothed in a plaid shirt, jeans, jockey shorts, socks, and footwear. A thorough examination of the body is performed after removal of clothing. There is an artificial leg on the right, the leg previously having been amputated 21.5 cm below the inferior surface of the patella. The lower left leg contains a flattened scarred area on the medial aspect measuring 21.0 cm in length. The central aspect of the lower right arm contains an 8.0 cm tattoo. There is a 27.5 cm scar in the abdomen running from just below the xlphold to just above the symphysis publs. A 4.0 cm superficial abrasion is present in the lower left chest wail. The external genitalia are those of an uncircumcleed adult male. There is an abrasion to the left pinna, measuring 1.5 cm. At the base of the skull in the superior portion of the neck is a 3.8 cm oval horizontally oriented ragged wound showing some stipping around the wound. The face is edematous with some subcutaneous air present. There is blood in the mouth and nose. The mandible is unstable, suggesting fracture. The right pupil measures 5.0 mm, the left pupil measures 5.5 mm.

The chest and abdomen are opened in the usual fashion. No significant collections of fluid are seen in the abdomen, pleura, or pericardial spaces.

CARDIOVASCULAR SYSTEM: The Inferior vena cava appears to have had a previously placed clip. The large arteries and heart are grossly unremarkable. The heart weighs 420 grams. Sectioning reveals no obvious abnormality of valves, chambers, myocardium, blood vessels.

RESPIRATORY SYSTEM: The right lung weighs 500 grams. There is some cystic cavitation in the upper lobe, grossly suggestive of emphysema. The left lung weighs 440 grams. Both lungs show slight edema and congestion.

HEPATOBILIARY SYSTEM: The liver and attached gall bladder weigh 1710 grams. Beneath the dome of the liver is a 5.0 cm area containing multiple cysts, the largest measuring 1.0 cm in diameter. No other focal lesions of the liver are seen. The gall bladder is grossly unremarkable.

GASTROINTESTINAL TRACT: No gross abnormalities of the GI tract are noted. A small amount of partially digested food is present within the stomach.

GENITOURINARY SYSTEM: The left kidney weighs 140 grams and the right kidney weighs 145 grams. Neither kidney shows significant gross abnormalities. The bladder and prostate are not removed. The testicies are not removed.

ENDOCRINE SYSTEM: The pancreas has gross features of autolysis but no focal lesions. The left adrenal gland is grossly normal. The right adrenal gland is not identified grossly. The thyroid and parathyroid glands are not removed. The pituitary gland is not recovered.

HEMATOPOIETIC SYSTEM: The spleen weighs 240 grams but otherwise appears grossly normal. No focal lesions are identified.

CENTRAL NERVOUS SYSTEM: The skull is opened in the usual fashion. There is extensive fracturing of the skull, worse posteriorly. Extensive hemorrhage over the surface of the brain is noted. The brain is removed with some difficulty. There is extensive destruction of the brain stem, portions of the cerebral cortex, and much of the right lobe of the cerebellum. Recovered from soft tissues and within the destroyed areas of the cranial cavity are two relatively intact peliets (marked with "X"). Two pieces of wadding are also recovered. A bone fragment is removed from the right cerebral hemisphere. Photographs are taken of these pieces of evidence. The spinal cord is not removed. No evidence of tumor is seen in the brain.

MICROSCOPIC EXAMINATION

CARDIOVASCULAR SYSTEM: Sections of the heart are generally unremarkable. No significant vascular disease is noted in sampled sections.

RESPIRATORY SYSTEM: Both lungs show changes of decomposition. The cystic area in the right upper lobe shows features suggestive of emphysema.

HEPATOBILIARY SYSTEM: Sections of the liver show rather extensive decomposition. The cystic areas do not suggest neoplasia, but the decomposition makes cytologic assessment difficult.

GENITOURINARY SYSTEM: Sections of both kidneys reveal no significant histopathology.

ENDOCRINE SYSTEM: Sections of the left adrenal giand show some decomposition but otherwise unremarkable. Sections

Attachment C

of the pancreas show extensive autolysis.

GASTROINTESTINAL TRACT: Sections of the stomach and Intestines show autolysis but otherwise unremarkable. Sections of appendix is unremarkable.

HEMATOPOIETIC SYSTEM: Sections of the spleen show some expansion of the red pulp but no focal abnormalities are detected.

CENTRAL NERVOUS SYSTEM: The brain is sampled in areas of trauma. Microscopic sections confirm the presence of tissue disruption and hemorrhage.

SKIN: Sections of skin taken in the region of the gunshot wound shows hemorrhage and the presence of particulate matter embedded within the superficial skin.

EPE/bjm May 18, 1992

SIGNATURE OF PATHOLOGIST:

E. P. Ellipoton. M.D.

M.D., DATE OF FINAL REPORT: 18 May 1992

Attachment C