

Northern Kentucky Regional Medical Examiners' Office
St. Luke Hospital

85 North Grand Avenue
Fort Thomas, Kentucky 41075
(859) 572-3559

AUTOPSY REPORT

--- FINAL REPORT ---

NAME: Robert McCafferty	Received: June 26, 2007
AGE: 44 yrs old	Requested by: Coroner Campbell Co. Kentucky
Sex: M	Completed: July 16, 2007
Case#: A07-174	

FINAL DIAGNOSIS

- BODY AS A WHOLE:
 - PENETRATING GUNSHOT WOUND TO LEFT FRONTAL AREA.
 - RANGE: INTERMEDIATE.
 - TRAJECTORY: FRONT TO BACK, RIGHT TO LEFT, ABOVE TO BELOW.
 - PROJECTILE: RECOVERED.
 - INJURIES: PERFORATION OF SKIN, PERFORATION OF SKULL, SUBGALEAL HEMATOMA OVER LEFT FRONTAL AREA, FRACTURE OF SKULL, SUBARACHNOID HEMORRHAGE, SUBDURAL HEMORRHAGE, CONTUSION, LACERATION AND MACERATION OF CEREBRAL TISSUE.
 - REFER TO COMMENT.

COMMENT: DEATH IS DUE TO GUNSHOT WOUND OF HEAD.

THIS REPORT IS FORWARDED WITHOUT TOXICOLOGY. I DO NOT BELIEVE TOXICOLOGY WILL ALTER THE CAUSE OR MANNER OF DEATH.

THE TOXICOLOGY REPORT, WHEN COMPLETE, WILL BE DELIVERED TO THE CORONER AND PLACED IN THE MEDICAL EXAMINER FILE. IF TOXICOLOGY IS SIGNIFICANT, THE AUTOPSY REPORT WILL BE MODIFIED.

ICD CODE: E985 INJURY BY FIREARMS

GROSS DESCRIPTION

A postmortem examination is performed on the body of Robert McCafferty, at the Medical Examiner's Office of Northern Kentucky, St Luke Hospital East, Ft Thomas, Kentucky, on June 26, 2007. The autopsy is begun at 0900 and finished at 1130. Permission for a complete autopsy is granted by the signature of Al Garrick, Deputy Coroner of Campbell County, Kentucky. The body is identified by name tags on the body bag. The identification is confirmed by the Ft. Thomas Kentucky Police Department, and the Coroner's Office of

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EXHIBIT

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Campbell County Kentucky. The autopsy is performed by Charles L. Stephens, M.D., assisted by Angie Kirk and Doris Field. Present during the autopsy was Brad Adams, Detective, Ft. Thomas KY Police Department; Ray Metz, Detective, Ft. Thomas KY Police Department; Mike Daly, Chief, Ft. Thomas KY Police Department; Al Garrick, Deputy Coroner, Campbell County KY, and Dr. Greg Wanger, M.D., Medical Examiner of Northern Kentucky.

The body is received clad in black training shorts, white briefs, white T-shirt with the legend "UK Basketball". The shirt is stained with blood. All the garments are turned over to the Ft. Thomas KY Police Department.

There is no jewelry.

EXTERIOR OF THE BODY

The body is that of a mesomorphic white man which measures 76 inches and weighs 200 pounds. The body is normally developed, well nourished, well preserved, and unembalmed. Rigidity is fully established in all major muscle groups including the lower extremities, upper extremities, head, and neck. Hypostasis is centered about the head and neck and is over the back except in areas exposed to pressure. The body is cool to touch having been in refrigeration. The physical appearance is consistent with the stated age of 44 years.

The skin is unremarkable. The scalp hair is gray and measures up to 4 cm over the crown. The hairbearing area of the face is clean shaven. The body hair has a typical male distribution. The corneas are translucent. The pupils are bilaterally equal and measure 0.3 cm. Irides are gray. The sclerae are white. The conjunctivae are pale. Nostils are filled with liquid blood. The nasal septum is intact. The septum does not grate upon manipulation. Ears are normally placed about the head. They are free of trauma. Blood is not present. Earlobes are not creased. External auditory canals are free of foreign material. Lips and gums are pale. The teeth are natural and in good repair. They are clutched tightly about the tongue. The neck is symmetrical, supple, without masses. No abnormal motion or bony crepitus is elicited. There is no lymph node enlargement in the clavicular or axillary area.

The chest is normally developed, symmetrical, and without masses. No abnormal motion is elicited. The abdomen is flat, tense, without masses. There is no lymph node enlargement in the inguinal area. The upper extremities are normal. All digits are present. There is no clubbing. Nails are trimmed with 1 mm overhang. The hands are received without bagging. Fingerprints and gunshot residue are obtained. The lower extremities are normal. All digits are present. The nails are unremarkable.

The external genitalia are those of a normal, mature circumcised man. The testes are bilaterally descended within the scrotum. The back and anus are unremarkable.

IDENTIFYING MARKS AND SCARS

No identifying marks and scars are noted.

EVIDENCE OF MEDICAL ATTENTION

EKG monitor pads are over the chest.

EXTERNAL/INTERNAL EVIDENCE OF INJURY

GUN SHOT WOUND OF ENTRY:

A gun shot wound of entry over the left side of the forehead is centered 73.5 inches (186 cm) above the heels, 2.5 inches (6 cm) to the left of midline. The wound measures 1 cm in the horizontal diameter and an abrasion cuff is eccentric and is over the left margin of the wound. Near the central portion of this wound is a .3 cm defect. There is no grease. Surrounding the gunshot wound is a zone of stippling which measures 6 cm in the horizontal plane and 5 cm in the sagittal plane. The projectile perforates the integument, the skull, the left frontal lobe, and impacts on the temporal occipital area of the left side of the skull where it is deflected (ricochets) to the right side of the skull. (See x-rays).

The gray, deformed projectile is cleaned, photographed, placed in a labeled container and handed off to the Ft. Thomas Kentucky Police Department.

SUMMARY:

Penetrating gunshot wound to left forehead.

RANGE:
Intermediate.

TRAJECTORY:
Front to back, right to left, above to below.

Not on direct movement

PROJECTILE:
Recovered.

OTHER INJURIES:

Perforation of skin, perforation of skull, subgaleal hematoma over the left frontal parietal area, fracture of skull, subarachnoid hemorrhage, subdural hemorrhage, periorbital contusion, a second laceration to skin of forehead is lateral to gunshot wound. It is a sagittally oriented slit, measures 1 cm, and is positioned approximately 2 cm to the left of the perforation.

The perforation of the skull is sharply round and measures 1 cm in diameter. The wound is somewhat unique, with an irregular bevel. The skull has multiple hairline fractures over the occipital surface and the orbital plate.

BODY CAVITIES

The body is well larded with yellow fat. The abdominal panniculus measures 2 cm. The bony chest is symmetrical. The organs are in their normal position and have a normal relationship to one another. The lungs are separated by 4 cm. The right and left lung occupy 80% of the

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pleural space. The mediastinum is unremarkable. The liver extends to the costal margin. The body cavities, other than the cranial cavity, contain a physiological amount of fluid. There are no adhesions.

CARDIOVASCULAR SYSTEM

The pericardial surface is smooth, glistening, and unremarkable. The pericardial sac is free of significant fluid and adhesions. The epicardium is normal. The heart weighs 460 grams. The valves and chambers are normal. The septae are intact. The right atrium receives the superior and inferior vena cava normally. The right atrium is not dilated. The right atrial appendage contains no thrombi. The tricuspid valve measures 12.5 cm and is architecturally normal. The right ventricle is not dilated and the wall measures 0.3 cm in thickness. The pulmonary valve measures 7.5 cm and is architecturally normal. The pulmonary artery arises normally and bifurcates immediately. No thrombi are noted. The left atrium receives the pulmonary veins normally. The left atrial appendage is free of thrombi. The mitral valve measures 10 cm and is architecturally normal. The valve leaflets are pliable, and do not balloon. There are no vegetations. The chordae tendinae are thin and delicate. The left ventricle wall measures 1.9 cm. in thickness. The myocardium is brown, firm, and homogeneous. The endocardium is smooth and glistening. The aortic valve measures 7.5 cm and is architecturally normal. The coronary arteries arise normally and are equally distributed about the heart. No atherosclerosis is present. The lumen is widely patent. The aorta arches normally to the left giving rise to expected branches. The intimal surface is not altered by atherosclerosis. Superior and inferior vena cava and their tributaries drain normally and are free of thrombi and/or emboli.

RESPIRATORY SYSTEM

The trachea is in the midline. The lumen is patent without mucosal abnormalities. It is clear of debris and foreign material.

The right lung weighs 840 grams. The left lung weighs 720 grams. Pleural surfaces are smooth and glistening. The bronchi are patent and are free of mucosal abnormalities. Pulmonary arteries are free of thrombi and/or emboli. Pulmonary parenchyma is dark purple, noncepticant, homogeneous, and congested. Bloody fluid is expressed from the bulging cut surface.

HEPATOBIILIARY SYSTEM

The liver weighs 2350 grams. The hepatic capsule is smooth, glistening, intact, and transparent. Hepatic parenchyma is homogeneous, firm, and brown.

The gallbladder contains 15 ml of green liquid bile without stones. The mucosa is autolyzed. The extra hepatic bile ducts, hepatic artery, and portal vein are of normal caliber and patent.

ENDOCRINE SYSTEM

The pituitary gland is in its normal position and has a normal relationship to the base of the brain. It is grossly unremarkable.

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The thyroid gland is in its normal position and has a normal relationship to the larynx. It is symmetrical and weighs 20 grams. The capsule is transparent. The parenchyma is homogeneous, firm and lavender.

The pancreas is in its normal position and has a normal relationship to the second portion of the duodenum. The pancreatic parenchyma is homogeneous, soft, tan, with early autolytic change. The ducts are unobstructed.

The adrenals are in their normal position and have a normal relationship to the superior poles of the kidney. They are of normal size. The expected yellow lipid content of the cortices is diminished. Medullae are autolyzed.

DIGESTIVE SYSTEM

The mucosa of the tongue is intact but stained with blood. The striated muscle is normal. The oropharynx is patent. The esophagus traverses the mediastinum in the usual fashion. The distal portion is not dilated. The esophageal mucosa falls into gray/white, loose longitudinal plications. The stomach is appropriately located in the left hypochondrium and epigastrium. It is flaccid. The mucosa has lost its usual rugal folds. The lumen of the stomach contains approximately 50 grams of brown fluid. Pills and capsules are not identified. The small bowel and large bowel are free of extrinsic lesions. The appendix is in the right lower quadrant.

GENITOURINARY SYSTEM

The right kidney weighs 220 grams. The left kidney weighs 250 grams. The capsules are smooth, thin, semitransparent, and strip with ease to reveal smooth, red/brown, firm cortical surfaces. The corticomedullary junction is poorly demarcated. Glomeruli are not discernible. Calyces are intact. Medullae are expanded. Renal vessels and ureters show no evidence of obstruction. The urinary bladder contains approximately 50 ml of amber urine. The mucosa is flat.

The prostate weighs 40 grams and is symmetrical. Prostatic parenchyma is tan and homogeneous. Testicles are not removed.

RETICULOENDOTHELIAL SYSTEM

The spleen weighs 200 grams. The capsule is opaque, smooth, and intact. The parenchyma is homogeneous, purple, intact, and soft. Lymphoid follicles are unremarkable.

There is no regional lymph node enlargement.

The tissue of the thymus area weighs 50 grams. It is in its normal position and normal relationship to the superior mediastinum. It is formed of fibrous tissue and fat.

The exposed bone marrow is red, homogeneous, and grossly unremarkable.

MUSCULOSKELETAL SYSTEM

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The skeletal muscle is normally developed. The diaphragms are intact and in their normal position. The exposed skeleton, with the exception of the skull, is normal.

NECK

The strap muscles are intact and free of evidence of trauma. The larynx is in the midline, intact, symmetrical, and without mucosal abnormalities. The hyoid bone is intact and without hemorrhage. There is no hemorrhage in the neck including the anterior cervical fascia and superior mediastinum.

HEAD AND CENTRAL NERVOUS SYSTEM

The scalp is perforated. Subgaleal hematoma is noted over the left side of the skull. The defect of the bony skull is described above. The dura mater is perforated over the impact site of the bullet. A small subdural hematoma is identified. The brain weighs 1480 grams. Subarachnoid hemorrhage is noted over all surfaces of the brain. The brain is placed in formalin for fixation and study at a later time.

BRAIN AFTER FIXATION:

The partially formalin fixed brain weighs 1500 grams. A subarachnoid hemorrhage is once again noted. The area of the frontal lobe and temporal lobe are contused. Horizontal sections across the cerebrum reveal the course of the gunshot wound. The projectile perforates the left frontal lobe, tracks through the left cerebrum, and in the area of the temporal lobe it is deflected anteriorly and to the right, extending through the right cerebral hemisphere. The wound tract in the formalin fixed brain, at its widest point, measures 2 x 3 cm. Tissues about this wound are lacerated and macerated.

TOXICOLOGY:

Harvested for study are heart blood, peripheral blood, urine, vitreous and DNA card, gunshot residue, and finger prints.

MICROSCOPIC DESCRIPTION

INDEX OF SLIDES (1) Brain; (2) Brain; (3) Heart; (4) Lung; (5) Liver; (6) Spleen; (7) Kidney/prostate; (8) Pituitary/thyroid; (9) Pancreas; (10) Adrenal; (11) Tongue.

CARDIOVASCULAR SYSTEM:

Heart

The myocardial fibers are of normal caliber, have intact nuclei. Fields are seen in which the fibers are shortened, have squared ends, with contraction band change.

RESPIRATORY SYSTEM:

Lungs

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A section of lung demonstrates pulmonary congestion with filling of alveolar spaces by protein rich eosinophilic fluid and intact erythrocytes.

HEPATOBIILIARY SYSTEM:

Liver

Minimal fatty metamorphosis is identified. Less than 10% of hepatocytes show cytoplasmic lipid vacuoles. The liver is congested.

RETICULOENDOTHELIAL SYSTEM:

Spleen

No histologic abnormality.

GENITOURINARY:

Kidney

No histologic abnormality.

Prostate

No histologic abnormality.

ENDOCRINE SYSTEM:

Pituitary

No histologic abnormality.

Thyroid

No histologic abnormality.

Pancreas

Autolytic change.

Adrenal

The adrenal is congested with autolytic change.

GASTROINTESTINAL SYSTEM:

Tongue

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No histologic abnormality.

CENTRAL NERVOUS SYSTEM:

Brain

Sections of brain show disruption of parenchyma and cerebral hemorrhage. The latter is manifest by sharply circumscribed perivascular hemorrhages and blood filled microlacerations.

LABORATORY DATA

TOXICOLOGY:

CABINET FOR HUMAN RESOURCES, DIVISION OF LABORATORY SERVICES

Routine toxicology studies are pending.



Charles L. Stephens, MD

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