

Office of the Chief Medical Examiner

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REPORT OF AUTOPSY EXAMINATION

DECEDENT

Document Identifier B200804518

Autopsy Type ME Autopsy

Name Reginald Lee Witcher

Age 54 yrs

Race White

Sex M

AUTHORIZATION

Authorized By Leslie L. Taylor, III MD

Received From Johnston

ENVIRONMENT

Date of Exam 11/23/2008

Time of Exam 9:25

Autopsy Facility Office of the Chief Medical Examiner **Persons Present** Mr. Clyde Gibbs, Dr. Jonathan Privette, Ms. Molly Hupp

CERTIFICATION

Cause of Death

Gunshot wounds of the chest

The facts stated herein are correct to the best of my knowledge and belief.

Digitally signed by

Deborah L. Radisch MD 10 December 2008 15:13

DIAGNOSES

Gunshot wound of the left thigh

Fracture, left femur

Gunshot wound of the left upper chest

Fracture, left 2nd rib

Perforations of left lung, left atrium, right atrium, main pulmonary artery, ascending thoracic aorta, and left main coronary artery

Hemopericardium and hemothorax, left

Atelectasis, left lung

Gunshot wound of the left posterior chest (back) with exit wound of the right upper anterior chest

Perforations of left lung, descending thoracic aorta, and esophagus

Hemopericardium and hemothorax, right

Contused abrasions, posterior neck

Abrasions, right forehead

Abrasions, right elbow and right antecubital fossa

Contusions and abrasion, posterior right hand

Coronary atherosclerosis, focally severe

IDENTIFICATION

Body Identified By

Papers/ID Tag

EXTERNAL DESCRIPTION

Length 72 inches

Weight 183 pounds

Body Condition Intact

Rigor 4+

Livor Purple - posterior

Hair Brown with gray

Eyes Blue-green

Teeth Natural in fair to good repair.

The body is that of a well developed, well nourished white man clothed in a blue long sleeve shirt which is on backwards and has been partially cut down the front, a pair of blue jeans with a fastened black belt, a black clog on the right foot, a pair of light blue socks, and a pair of blue jockey shorts. Valuables consist of three \$20 bills and six \$1 bills (\$66) in the left back pocket of the jeans, and a Powerball ticket and a recipe in the left front pocket of the jeans. There is an apparent linear well healed scar of the right upper outer thigh.

INJURIES

BLUNT FORCE INJURIES:

There are short fine linear abrasions over the mid upper forehead, in the hairline, and two above the right eyebrow. There are fine contusions, almost petechial hemorrhages, of the right upper abdominal skin. Multiple abrasions are present of the medial right antecubital fossa and around the right elbow. There is a horizontal linear scabbed abrasion of the anterior left lower leg, and there is an oval dried abrasion of the top of the left foot.

There are four to five oval light purple-red contusions of the back of the right hand, and there is a linear abrasion of the back of the 4th finger of the right hand.

There are three short linear horizontal contused abrasions over the posterior neck.

GUNSHOT WOUND #1:

A gunshot entrance wound is present in the left upper lateral thigh located 38" down from the top of the head. The entrance hole measures 3/8" in diameter and there is a circumferential abrasion collar bringing the total diameter of the wound to 1/2". No powder residue is present on the skin around the wound or in the proximal wound track. A corresponding hole is present in the overlying blue jeans. An exit wound is not present.

Internally, the wound travels through the skeletal muscle of the left thigh and causes a complete fracture of the shaft of the left femur. Four large projectile and jacket fragments are recovered from around the fractured femur in this area and are submitted as evidence.

In summary, this is a gunshot wound of the left upper lateral thigh that travels in a left to right and slightly front to back direction.

GUNSHOT WOUND #2:

A gunshot entrance wound is present in the left upper chest located 14" down from the top of the head and 3 3/4" to the left of the anterior midline. The entrance hole measures 5/16" in diameter and has an abrasion around it, especially prominent laterally, bringing the total dimensions to 1/2" x 5/16". No powder residue is present on the skin around the wound or in the proximal wound track. A corresponding hole is present in the shirt. An exit wound is not present.

Internally, the wound track enters the left pleural cavity through the left anterior 2nd rib, fracturing this rib. It then perforates the medial upper lobe of the left lung and then perforates the left upper pericardium. It causes extensive damage and destruction to the left atrium of the heart and the main pulmonary artery, and there are lacerations of the internal walls of the pulmonary veins. The left main coronary artery is also transected in this wound track. It travels along the back of the right atrium. A large caliber slightly distorted jacketed lead projectile is recovered from the right side of the 8th thoracic vertebral body which is fractured, but the spinal canal is not entered. The injuries created in this gunshot wound track include collapse of the left lung, left hemothorax, and hemopericardium.

In summary, this is a gunshot wound of the left upper chest that travels in a left to right, downwards, and front to back direction.

GUNSHOT WOUND #3:

A gunshot entrance wound is present of the left posterior chest (back) located 20 3/4" down from the top of the head

and 4 1/2" to the left of the posterior midline. The entrance hole measures 1/4" in diameter and has a surrounding abrasion collar, more prominent laterally, bringing the total dimensions to 7/16" x 5/16". No powder residue is present on the skin around the wound or in the proximal wound track. A corresponding hole is present in the shirt. A corresponding exit wound is present on the right upper anterior chest located 12 1/2" down from the top of the head and 4 1/2" to the right of the anterior midline. This wound has irregular edges with short lacerations and measures 3/8" x 1/4" in greatest dimensions. There are focal abrasions around this wound, bringing the total dimensions to 5/8" x 3/4".

Internally, the wound track enters the left pleural cavity between the left posterior 9th and 10th ribs, fracturing the inferior aspect of the 9th rib. It then perforates the posterior lower lobe of the left lung, and then creates large perforations through the descending thoracic aorta and the adjacent esophagus. There is contusion/hemorrhage with a shallow pleural laceration of the posterior medial lower lobe of the right lung. There is a perforation of the medial upper lobe of the right lung and the wound track exits the right pleural cavity between the right anterior-lateral 1st and 2nd ribs, fracturing the superior aspect of the 2nd rib. A slightly distorted large caliber jacketed lead projectile is recovered as the shirt is removed from the body. Injuries in the wound track include hemopericardium and right hemothorax. The wound tracks of gunshot wounds #2 and 3 are individually probed and they cross in the area of the posterior atria of the heart.

In summary, this is a gunshot wound of the left posterior chest (back) that travels in a left to right, upwards, and back to front direction, exiting the right upper anterior chest.

DISPOSITION OF CLOTHING AND PERSONAL EFFECTS

The following items are released with the body

Money and receipts.

The following items are preserved as evidence

Blood stain on paper, shirt, jeans/belt, shoe, socks, jockey shorts, projectile pieces from left thigh (gunshot wound #1), projectile from right side of spine (gunshot wound #2), and projectile from between body and shirt (gunshot wound #3) received by Ron Mazur of the Johnston County Sheriff's Office on November 25, 2008.

PROCEDURES

Radiographs

Postmortem radiographs of the chest and left thigh show radiodensities consistent with the recovered projectiles.

INTERNAL EXAMINATION

Body Cavities

Blood is present in the pleural and pericardial cavities as described. No adhesions are present in any of the body cavities.

Cardiovascular System

Heart Weight 340 grams

The epicardial aspect is remarkable for the injuries in the wound track. The valves are normally formed with delicate leaflets. The chambers are not dilated and the walls are not hypertrophied. There are no myocardial scars. There is a small patent foramen ovale. There is a co-dominant coronary artery system with 60% stenosis of the proximal to mid left anterior descending coronary artery. At the bifurcation to the left diagonal branch, each of the arteries shows approximately 80% stenosis. The aorta and its major branches are injured in the wound tracks, and show slight to moderate atherosclerosis of the infrarenal segment.

Respiratory System

Right Lung Weight 480 grams

Left Lung Weight 350 grams

The hyoid bone is intact. The thyroid gland is bilobed and non-nodular. The pleural surfaces are smooth and glistening and interrupted by the gunshot wound track. The parenchyma of both lungs shows no consolidation, and there are lacerations and hemorrhage along the wound tracks. The left lung is markedly atelectatic. The tracheobronchial tree is lined by a very small amount of blood.

Gastrointestinal System

The appendix is present. The esophagus shows a perforation in the gunshot wound track. The stomach contains 1/2 cup of thick green-gray liquid with beans. The small intestine is unremarkable and the colon contains a moderate amount of green stool.

Liver

Liver Weight 1420 grams

The capsule is intact and the parenchyma is unremarkable. The gallbladder contains a moderate to large amount of green-yellow bile and the extrahepatic biliary tree is patent.

Spleen

Spleen Weight 80 grams

The capsule is intact and the parenchyma is unremarkable.

Pancreas

Normal anatomic location and configuration. The gland is autolyzed.

Urinary

Right Kidney Weight 130 grams

Left Kidney Weight 160 grams

Both kidneys are similar. The cortical surfaces are smooth and the capsules strip with ease. The renal architecture is intact without focal lesions. The ureters are patent and not dilated. The renal arteries and veins are unremarkable. The bladder contains a very large amount of clear, colorless urine. The wall and mucosa are grossly unremarkable.

Reproductive

Normal adult male with non-nodular prostate gland.

Endocrine

The thyroid gland is bilobed and non-nodular.

Both adrenal glands are grossly unremarkable.

Neurologic

Brain Weight 1500 grams

The meninges are intact and there is no blood in any meningeal compartment. The cerebral gyral pattern is fully developed. There is no evidence of edema or herniation. The vessels at the base of the brain are thin and delicate. Multiple coronal sections reveal no gross abnormalities.

Skin

No scalp lacerations or contusions are present.

Immunologic System

The lymph nodes are grossly unremarkable.

Musculoskeletal System

Ribs and the left femur are fractured in wound tracks as described.

MICROSCOPIC EXAMINATION

Cardiovascular

A section of myocardium shows no fibrosis or inflammation. Cross sections of the left anterior descending and left diagonal branch show at least 75% and 80% stenosis of their lumens caused by atherosclerotic plaque.

Respiratory

Sections from both lungs are examined. A section from a peripheral area shows focal slight to moderate atelectasis of the parenchyma. There is one focus of septal fibrosis, creating a microscopic scar. A section from a central area shows mucous in the larger airway branch lumens.

Liver

Occasional portal tracts show slightly increased numbers of chronic inflammatory cells. There is one small area of bile duct proliferation within fibrous tissue, possibly a bile duct hamartoma.

Genitourinary

Rare sclerotic glomeruli are present throughout the cortex. There is slight thickening of the intima of the arterioles.

Neurologic

A section of hippocampus shows no hemorrhage, neuronal drop-out, or other abnormality.

SUMMARY AND INTERPRETATION

The decedent was a 54-year-old white man who was shot. Due to the violent nature of death, Dr. Les Taylor, Johnston County Medical Examiner, assumed jurisdiction of the body and authorized autopsy.

Autopsy examination showed multiple minor blunt force injuries, with abrasions of the forehead, around the right elbow, of the left lower leg and top of the left foot, and contusions of the posterior right hand and contused abrasions of the posterior neck. Three gunshot wounds were present on the body. One wound was a gunshot wound of the left upper lateral thigh which traveled into the thigh, fracturing the left femur. Multiple large projectile pieces were recovered from within the fracture site. A second wound was a gunshot entrance wound of the left upper chest that traveled in a front to back, left to right, and downwards direction, fracturing the left 2nd rib and perforating the left lung, pulmonary artery, left and right atria of the heart, and aorta, leading to hemopericardium, left hemothorax, and atelectasis of the left lung. A slightly distorted large caliber jacketed projectile was recovered from the right side of the body of the thoracic vertebra at the end of this wound. A third wound was a gunshot wound with its entrance of the left posterior chest (back) that traveled in left to right, upwards, and back to front direction, exiting the right upper anterior chest, and leading to perforations of the left lung, descending thoracic aorta, esophagus, and right lung, and leading to hemopericardium and right hemothorax. A minimally distorted large caliber projectile was recovered as the shirt was removed. An incidental finding at the time of autopsy was focal moderate coronary atherosclerosis of the left anterior descending coronary artery, with short segments of severe stenosis of the left anterior descending and left diagonal branch at the bifurcation. A blood ethanol (alcohol) concentration of blood obtained at the time of autopsy was 300 mg/dL (.30%). In my opinion, the cause of death in this case was due to gunshot wounds of the chest.

DIAGRAMS

1. Adult (front/back)

State of North Carolina

Name of Decedent: Reginald Lee Wichter

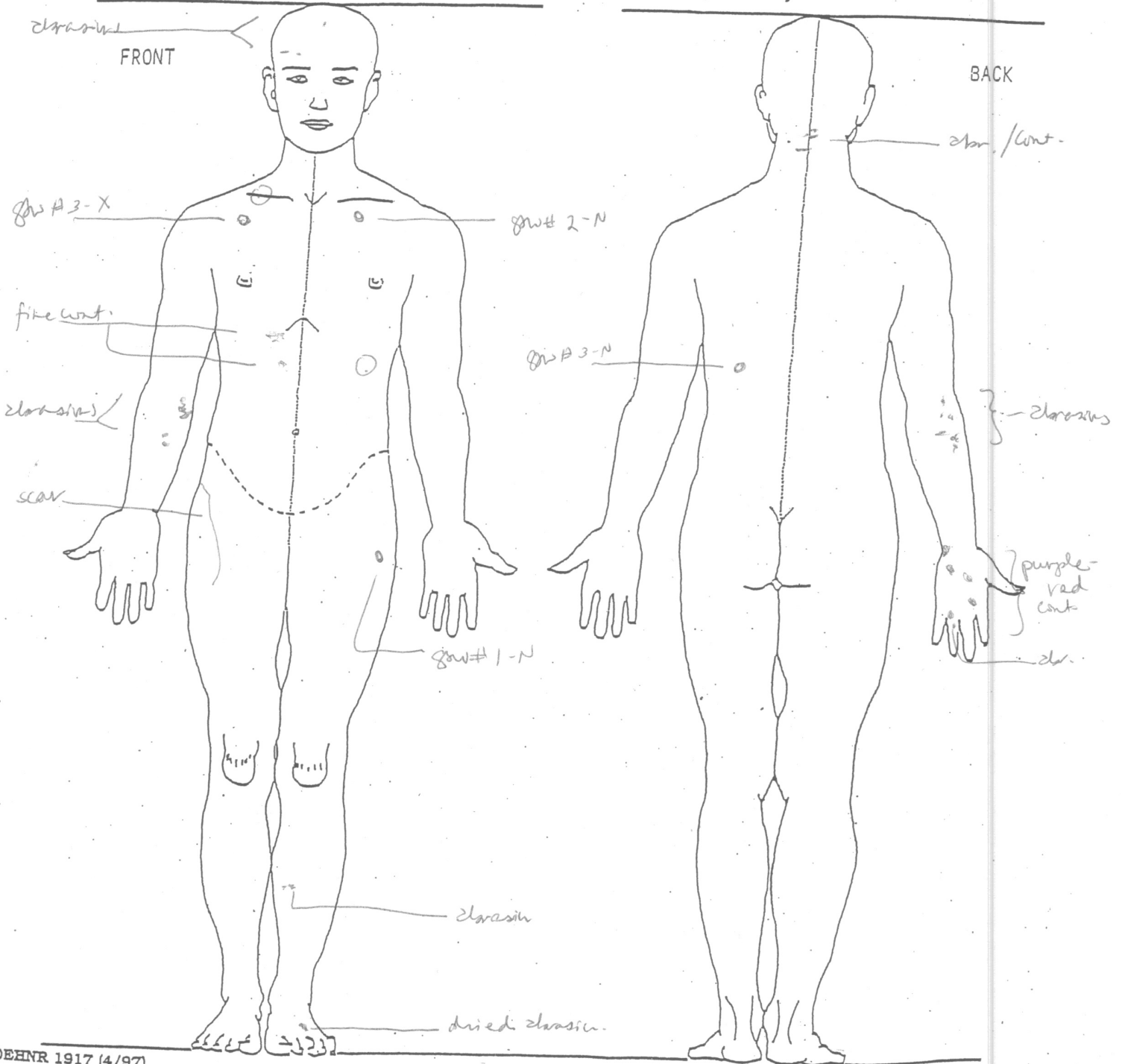
Office of the Chief Medical Examiner

Autopsy # B08-4578

Chapel Hill, North Carolina 27599-7580

Examined By: D. Redschmidt Date: 11/23/08

BODY DIAGRAM: ADULT (Front/Back)



DEHR 1917 (4/97)
Medical Examiner

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