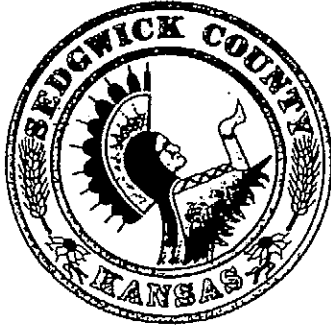


# SEDGWICK COUNTY, KANSAS

## REGIONAL FORENSIC SCIENCE CENTER



Mary H. Dudley, M.D. — District Coroner-Medical Examiner  
Jaime L. Oeberst, M.D. — Deputy District Coroner-Medical Examiner  
Timothy P. Rohrig, Ph.D. — Director, Forensic Science Laboratories  
Shari L. Beck — Forensic Administrator

### REPORT OF LABORATORY ANALYSIS

NAME: STONE, Rebecca

TOXICOLOGY NO: 03-0465

SPECIMENS SUBMITTED: Blood, Vitreous, Urine, Liver,  
Brain, Gastric Contents

DATE RECEIVED: 23 Jun 03

SUBMITTED BY: Lawrence Czarnecki, D.O.

AGENCY NO: 13-03-1107

#### RESULTS:

Blood (Heart):

Ethanol — 0.17 gm%

Vitreous:

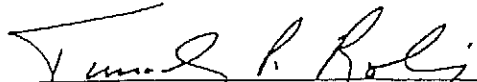
Ethanol — 0.13 gm%

Urine:

Negative for Amphetamine, Barbiturates, Benzodiazepines, Benzoylcegonine, Cannabinoids, Codeine, Methadone, Methamphetamine, Morphine, Phencyclidine, and Propoxyphene.

Date: 14 July 03

Results Certified by:

  
Timothy P. Rohrig, Ph.D., DABFT  
Director, Forensic Science Laboratories  
And Chief Toxicologist

**COPY**



**SEDGWICK COUNTY, KANSAS**

**REGIONAL FORENSIC SCIENCE CENTER**

MARY H. DUDLEY, M.D. — DISTRICT CORONER-MEDICAL EXAMINER  
JAIME L. OEBERST, M.D. — DEPUTY DISTRICT CORONER-MEDICAL EXAMINER  
LAWRENCE CZARNECKI, D.O. — DEPUTY DISTRICT CORONER-MEDICAL EXAMINER  
TIMOTHY P. ROHRIG, PH.D.— DIRECTOR, FORENSIC SCIENCE LABORATORIES  
SHARI L. BECK — INTERIM FORENSIC ADMINISTRATOR/CHIEF MEDICAL INVESTIGATOR

**AUTOPSY REPORT**

CASE: 13-03-1107

DECEDENT: Stone, Rebecca

DATE: 06-22-03

ADDRESS: 1110 Ohio Street, Augusta, KS 67010

TIME: 1000 Hours

24 - year - old Caucasian female

PERSONS PRESENT AT AUTOPSY: Mike Stueven and Bart Brindle, Augusta Department of Safety

Forensic Assistants: Mark Sloyer

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**PATHOLOGIC DIAGNOSES**

- I. Gunshot wound of head, with exit
  - A. Entrance: Right temple, with soot, contact range
  - B. Perforation of skull, brain and mid brain
  - C. Exit: Behind left ear
  - D. Projectile not recovered
  - E. Trajectory: Right to left, slightly front to back and slightly downward
- II. Linear abrasion of right aspect of chest, minor
- III. Contusion of left and right forearms, minor
- IV. Contusions and abrasions of lower extremities, minor
- V. Acute alcohol intoxication (See Toxicology Report)

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CAUSE OF DEATH: Gunshot wound of head

MANNER: Suicide

*Lawrence Czarnecki, D.O.*  
Lawrence Czarnecki, D.O.  
Deputy Coroner-Medical Examiner

## CIRCUMSTANCES OF DEATH

According to reports, while at home, the decedent's husband was in the shower and heard a sound consistent with a gunshot, shortly after him and his wife had an argument. Reportedly, he then exited the shower and found her in the hallway with an apparent gunshot wound of the head. Emergency Medical Services arrived and she was pronounced dead at the scene. A medium caliber handgun was found next to the decedent and alcohol was present at the scene.

## POSTMORTEM EXAMINATION

An autopsy is performed on the body of Rebecca Stone at the Sedgwick County Regional Forensic Science Center, Wichita, Kansas on June 22, 2003.

## CLOTHING

The body is received clad and there is jewelry: *See Property Inventory List*

## EXTERNAL EXAMINATION

The body is received in a body bag. There are paper bags over the hands secured with tape around the wrists. Body identification includes a yellow Medical Examiner's identification band bearing the decedent's name on the left ankle. The body is fingerprinted and photographed.

The body is that of a well-developed, well-nourished adult Caucasian female who weighs 159 pounds, is 67 ½ inches in height and appears compatible with the reported age of 24 years.

The unembalmed body is cool to touch. Rigor mortis is fully fixed in the extremities and the jaw. Unfixed purple livor mortis extends over the posterior surfaces of the body, except in areas exposed to pressure. The scalp hair is brown with blonde highlights and measures 7 inches in length over the crown. The irides are brown. The corneas are translucent. The sclerae and conjunctivae are unremarkable. The nose and ears are not unusual. The natural teeth are in good repair. The neck is unremarkable. The thorax is well-developed and symmetrical. The abdomen is flat. The anus and back are unremarkable. The genitalia are those of a normal adult female. The upper and lower extremities bilaterally are well-developed and symmetrical, without absence of digits. From the tip of the right middle finger to the acromion process is 31 inches.

## IDENTIFYING MARKS AND SCARS

Identifying marks and scars include 3 x 2 ½ inch green ink tattoo of a four leaf clover and "Lucky You" on the left inguinal region, a 2 ½ x 1 ½ inch multicolored tattoo of a dolphin on the lateral

lower aspect of the right calf, a  $\frac{1}{8}$  inch scar superior to the umbilicus, a  $\frac{1}{2}$  inch scar on the left gluteal region near midline, and a  $\frac{1}{8}$  inch scar on the left knee.

## **MEDICAL INTERVENTION**

Evidence of medical intervention includes four electrocardiograph patches and two defibrillator pads on the anterior torso.

## **EVIDENCE OF INJURY**

### **HEAD AND NECK**

#### **Description of Gunshot Wound**

**Entrance:** On the right temple, 63  $\frac{1}{2}$  inches above the heels and 4  $\frac{1}{4}$  inches right of the anterior midline is an entrance gunshot wound consisting of a 1 x  $\frac{3}{4}$  inch irregular defect with focal areas of soot at the edges measuring up to  $\frac{1}{16}$  inch and soot which extends into the wound. There is a red curvilinear muzzle imprint extending from approximately the 1:00 to 8:00 position. With the edges of the muzzle imprint approximated, a central  $\frac{3}{16}$  inch defect with a  $\frac{1}{16}$  inch abrasion ring becomes apparent. The muzzle imprint is from  $\frac{1}{8}$  inch to  $\frac{3}{16}$  inch away from the edge of the central defect.

**Path:** The hemorrhagic wound track sequentially perforates the right temporal bone creating a  $\frac{1}{2}$  x  $\frac{7}{16}$  inch ovoid defect with a  $\frac{3}{16}$  inch rim of soot and a  $\frac{1}{8}$  inch rim of internal beveling. The hemorrhagic wound track, which is up to 2 inches in width, perforates the right temporal lobe of the brain, mid brain and the left temporal lobe of the brain exiting through the left temporal bone creating a 1 x  $\frac{3}{4}$  inch defect with a  $\frac{1}{4}$  inch ring of external beveling. There are comminuted fractures extending from the skull defects and across the right and left middle cranial fossae and left anterior cranial fossa creating a comminuted hinge fracture. There is a 14 x 5 inch crown of subscalpular hemorrhage extending over the bilateral frontotemporal occipital regions. There is clotted subdural hemorrhage within the anterior and middle cranial fossae extending focally around the basilar region measuring approximately 30 ml. There is subarachnoid hemorrhage over the right hemisphere. The projectile is not recovered.

**Exit:** Posterior to the superior attachment of the left ear, 62  $\frac{3}{4}$  inches above the heels and 7  $\frac{1}{2}$  inches left of the anterior midline is an exit gunshot wound consisting of a  $\frac{3}{4}$  inch stellate laceration without marginal abrasion. There is a 1 x 1  $\frac{1}{4}$  inch contusion of the upper ear and a  $\frac{3}{4}$  x  $\frac{1}{2}$  inch avulsion of the skin overlying the medial upper aspect of the left ear cartilage.

**Trajectory:** The wound track travels from the decedent's right to left, slightly front to back and slightly downward.

### THORAX AND ABDOMEN

Inferior to the right breast at the bra line is a horizontally aligned 2 inch red linear abrasion. On the lateral right gluteal region is a ½ inch brown contusion.

### UPPER EXTREMITIES

On the upper lateral aspect of the left forearm is a ⅛ inch blue contusion. On the posterior distal surface of the right forearm is a ¼ inch brown contusion.

### LOWER EXTREMITIES

On the lateral upper front of the right thigh is a ¼ inch brown contusion. On the front of the right shin are multiple faint brown contusions ranging in size from ⅛ to ½ inch. On the lateral upper posterior aspect of the right thigh is a 1 ½ inch brown contusion. On the back of the right ankle is a ¼ inch red abrasion. On the medial upper front of the left thigh are a ¼ inch brown contusion, a ½ inch brown contusion, and a ¼ inch blue contusion. On the mid front of the left thigh is a ⅛ inch blue contusion. On the front of the left ankle are three brown contusions ranging from ¾ to ¼ inch in greatest dimension. On the upper left calf is a ¼ inch red crusty abrasion.

### INTERNAL EXAMINATION

#### BODY CAVITIES

No adhesions are in any of the body cavities. All body organs are present in normal anatomic position. The subcutaneous fat layer of the abdominal wall is 3 cm thick.

#### HEAD (CENTRAL NERVOUS SYSTEM)

The brain weighs 1210 grams. The injuries have been previously described. Sections through the cerebral hemispheres reveal no natural disease within the cortex, subcortical white matter, or deep parenchyma of either hemisphere. The cerebral ventricles are normal caliber. Except as noted, sections through the brainstem and cerebellum are unremarkable. The spinal cord is not examined.

#### NECK

Examination of the soft tissues of the neck, including strap muscles and large vessels, reveals no abnormalities. The hyoid bone and larynx are intact.

### CARDIOVASCULAR SYSTEM

The heart weighs 260 grams. The pericardial surfaces are smooth, glistening, and unremarkable. The pericardial sac is free of significant fluid or adhesions. The coronary arteries arise normally, follow the usual distribution with a right dominant system, and are widely patent and show no evidence of atherosclerosis. The chambers and valves bear the usual size/position relationship and are unremarkable. The myocardium is dark red-brown, firm, and unremarkable. The atrial and ventricular septa are intact. The aorta and its major branches arise normally, follow the usual course, and show no evidence of atherosclerosis. The vena cava and its major tributaries return to the heart in the usual distribution and are unremarkable.

### RESPIRATORY SYSTEM

The right and left lungs weigh 450 and 590 grams, respectively. There is blood within the upper and lower airways. The mucosal surfaces are otherwise, smooth, yellow-tan and unremarkable. The pleural surfaces are smooth, glistening, and unremarkable. The pulmonary parenchyma has a checkered pattern consistent with hemoaspiration. The pulmonary parenchyma is otherwise, dark red-purple, exuding moderate amounts of blood and frothy fluid with no focal lesions noted. The pulmonary arteries are normally developed and patent.

### LIVER AND BILIARY SYSTEM

The liver weighs 1350 grams. The hepatic capsule is smooth, glistening, and intact. It covers red-brown parenchyma with no focal lesions noted. The gallbladder contains 10 ml of viscid bile. The extrahepatic biliary tree is patent without evidence of calculi.

### ALIMENTARY TRACT

The esophagus is lined by gray-white smooth mucosa. The gastric mucosa is arranged in the usual rugal folds, and the lumen contains 650 ml of dark brown partially digested fragments. The small and large bowel are unremarkable. The appendix is present. The pancreas has a normal gray-white, lobulated appearance, and the ducts are clear.

### GENTOURINARY TRACT

The right and left kidneys weigh 125 and 110 grams, respectively. The renal capsules are smooth, thin, semitransparent, and strip with ease from the underlying, smooth, red-brown, firm, cortical surfaces. The cortex is sharply delineated from the medullary pyramids. The calyces, pelves, and ureters are unremarkable. The urinary bladder contains 360 ml of light clear yellow urine. The mucosa is gray-tan and smooth. The fallopian tubes, ovaries, and vagina are unremarkable. Within the myometrium of the uterus is a 5 cm multi lobated white whorled leiomyoma.

Name: Stone, Rebecca

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### RETICULOENDOTHELIAL SYSTEM

The spleen weighs 140 grams and has a smooth, intact capsule covering red-purple, moderately firm parenchyma. The splenic lymphoid follicles are unremarkable. The regional lymph nodes appear normal. The bone marrow is red-purple and homogeneous without evidence of focal abnormality.

### ENDOCRINE SYSTEM

The thyroid and adrenal glands are unremarkable.

### MUSCULOSKELETAL SYSTEM

Except as noted, the bony framework, supporting musculature, and soft tissues are not unusual.

### EVIDENCE

The following items are collected and preserved: A cloth swatch containing a sample of the decedent's blood.

### MICROSCOPIC DESCRIPTION

SKIN: Black material on the stratum corneum surface and within the wound track.

### TOXICOLOGY

Postmortem toxicological analysis of heart blood and vitreous fluid is positive for ethanol (0.17 gm% and 0.13 gm%, respectively).

Postmortem toxicological analysis of urine is negative for drugs tested. (See Toxicology Report)

### OPINION

In my opinion Rebecca Stone died as a result of gunshot wound of the head.

The manner of death is suicide.

LC:jf