

North Carolina Department of Health and Human Services
Office of the Chief Medical Examiner

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REPORT OF AUTOPSY EXAMINATION

DECEDENT

Document Identifier B201502636

Autopsy Type ME Autopsy

Name Jason Paul Corbett

Age 39 yrs

Race White

Sex M

AUTHORIZATION

Authorized By Larry W. James EMT-P

Received From Davidson

ENVIRONMENT

Date of Exam 08/03/2015

Time of Exam 10:05

Autopsy Facility Office of the Chief Medical Examiner Persons Present Ms. J. Page

CERTIFICATION

Cause of Death

BLUNT FORCE HEAD TRAUMA

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

Digitally signed by

Craig Nelson MD 26 August 2015 17:55

DIAGNOSES

I. Blunt force head trauma.

A. Multiple lacerations, abrasions, and contusions of the head including two large, branched, full-thickness lacerations of bilateral parietal scalp.

B. Extensive skull fractures with hinge fracture of skull base.

C. Epidural, subdural, and subarachnoid hemorrhages.

D. Ventral cerebral cortical contusions.

II. Other blunt force injuries: scattered abrasions and contusions of torso and extremities.

III. Congenital bicuspid aortic valve with associated left ventricular hypertrophy (1.5 cm).

IV. Coronary artery atherosclerosis, mild.

IDENTIFICATION

Body Identified By

Papers/ID Tag

EXTERNAL DESCRIPTION

Length 72 inches

Weight 262 pounds

Body Condition Intact

The body is received in a bag is sealed with a blue, tamper-proof seal bearing the number 3084443. It is retained in save jar. The body is identified by accompanying paperwork.

Evidence of medical therapy:

1. Defibrillator pads are on the chest.

2. EKG pads are on the right arm, left shoulder, and lower legs.

Clothing: Other than a white metal ring on the left 4th finger, the body is unclad and no clothing accompanies the body.

The body is that of a normally developed, heavy-set, light-complexioned male appearing consistent with the listed age of 39 years. The length is 72" and the weight is 262 lbs as received. The body is cold, well preserved, and has not been embalmed. Rigidity is fully developed in the jaw and extremities. Lividity is pink-purple, blanching, and in a posterior distribution. The body has smeared, liquid and dried blood and there is abundant blood in the body bag.

The scalp is covered with straight, dark brown hair measuring up to 2" on the top of the head. A full mustache measures up to 1/2" and the beard up to 1". The ears are normally formed. Blood is in the external auditory canals. The left earlobe has a dimpled scar consistent with remote cosmetic piercing. The irides are hazel, the corneas clear, and the bulbar and palpebral conjunctivae free of petechiae. The sclerae are white. The nose is normally formed; blood is in the nares. The lips are normally formed. The teeth are natural and in good condition. The superior and inferior frenula are intact. The neck is normally formed and symmetrical.

The chest is normally formed, symmetrical, and without palpable masses. Numerous acrochordons are in the axillae. The abdomen is somewhat protuberant, soft, and without palpable masses. The external genitalia are those of an adult male with the testes palpable in the scrotum. The back is straight and symmetrical. The anus is atraumatic.

The arms are normally formed. No needle punctures, track marks, or ventral wrist scars are seen. Smeared blood is on the hands. The fingernails are trimmed short and have blood underneath. The legs are normally formed and without edema, amputation, or deformity. The toenails have overhangs of up to 1/16" and have some blood underneath.

Body markings: On the lateral aspect of the left lower leg is a black tattoo of Asian characters. Inferior to the umbilicus is a 3/4 x 3/8", irregular, hypopigmented and pink, apparently healing scar.

INJURIES

EXTERNAL EVIDENCE OF INJURY

HEAD: The right frontal, bilateral parietal, left occipital, and left temporal scalp has confluent, pink contusion/ecchymosis. On the right side of the forehead is a 1 x 1", raised, purple ecchymosis with overlying 7/8 x 3/4", irregular, superficial, red-brown abrasion and 3/4", linear, superficial, red abrasion. On the right temporal region is a 1 1/2 x 3/8", irregular, superficial, red abrasion. On the right parietal scalp is a 3 1/2 x 2 5/8" coarsely stellate, complex, branched, full-thickness, laceration with partial avulsion. The branches individually range from 1/2" to 2" in length. There is undermining around the wound up to 1" in depth. The edges have abrasion and tissue bridging is evident. Skull fractures are visible in the depths of the wound. Inferior to this wound, on the right parietal-occipital scalp, is a 1 1/4", linear, vertically oriented, partial-thickness laceration with tissue bridging and minimal undermining. On the right occipital scalp is a 1/4 x 3/16", irregular, superficial, red abrasion.

On the left frontal hairline is a 1", curvilinear, superficial, red abrasion with a background of pink contusion. In the left frontal scalp is a 2", curvilinear, full-thickness laceration with two superficial, 1/2", jagged extensions; it has undermining of up to 1" on its lateral side. Just lateral to this full thickness laceration is a 1/2" jagged, partial-thickness laceration. On the left parietal scalp is a 6 1/2 x 4" coarsely stellate, complex, branched, full-thickness laceration with partial avulsion. The branches individually range from 3/4" to 2" in length. Anteriorly, it has is undermining to a length of 2"; posteriorly, there is undermining to a length of 1 7/8". The laceration has extensive tissue bridging. On the left temporal scalp is a 2 1/4", curvilinear, full-thickness laceration with slight marginal abrasion and with evident tissue bridging. It has inferior undermining to a depth of 3/4". On the left occipital

region is a 1 x 3/4", irregular, superficial, red abrasion.

The inferior right orbit has a 2 x 1 1/2" area of raised, purple ecchymosis. Within, overlying the inferior orbital ridge, is a 1/2", curvilinear, superficial, laceration. Also, there is a 3/4 x 3/8", irregular, superficial, red-orange abrasion. The nasal bones are palpably fractured. No other facial fractures are palpable. On the right side of the bridge of the nose is a 1/2 x 1/2", irregular, purple contusion, within which is a 1/2 x 3/16", irregular, superficial, red abrasion. On the tip of the nose is a 5/8 x 3/8", irregular, purple contusion.

On the right upper gums is a 7/8 x 3/8", irregular, red and purple ecchymosis. No other injuries are seen in the oral mucosa.

TORSO: On the right side of the chest are a few scattered, irregular, superficial, red abrasions ranging from 1/16" to 3/8" in greatest dimension; these may be in association with the previously described defibrillator pad. On the right lateral chest is a 3 x 1/2", roughly curvilinear, superficial, red-brown, abrasion. On the right lateral abdomen is a 2 1/2 x 1 1/2" irregular area of discontinuous, pink ecchymoses.

On the superior aspect of the left shoulder is a 1 1/2 x 1/2", irregular, superficial, red-brown abrasion. On the mid upper back is a 1 1/2 x 3/8", irregular, superficially abraded, pink-purple contusion. Inferior to it is a 1 3/8 x 1/2", irregular, superficial, pink abrasion. On the right upper back is a 1 1/4 x 3/16", linear, pink contusion.

RIGHT ARM: On the dorsum of the right hand is a 1/4 x 1/8", irregular, superficial, red abrasion within a 1/2 x 3/8", irregular, blue contusion. On the dorsum of the right 3rd finger are three irregular, superficial, red abrasions measuring 1/16", 1/8", and 1/8" in greatest dimensions. The right arm has no palpable fractures.

LEFT ARM: On the dorsum of the left forearm are a 1 1/4 x 1", irregular, pink contusion and a 1 x 3/4", irregular, pink contusion. On the dorsum of the left hand and 2nd and 3rd fingers is a 5 x 2 1/2", irregular, raised, pink and purple ecchymosis. The left arm has no palpable fractures.

RIGHT LEG: On the medial aspect of the right thigh are a 2 1/8", linear, superficial, red abrasion flanked by multiple punctate, superficial, red abrasions. On the right shin is a 1 x 1", irregular, poorly defined, pink contusion. On the lateral aspect of the right knee is a 2 x 1", irregular, pink contusion. On the dorsum of the right 4th toe is a 1/4 x 3/16", irregular, superficial, red abrasion. The right leg has no palpable fractures.

LEFT LEG: On the anterior aspect of the proximal left thigh is a 4 x 3", irregular, pink-blue-purple contusion, within which is a 4" linear, red component. The left leg has no palpable fractures.

INTERNAL EVIDENCE OF INJURY

The entire scalp has hemorrhage with sparing only of the right frontal region. The calvarium has comminuted, jagged fractures, most extensive on the right parietal region underlying the large, aforementioned laceration. However, fractures also extend through the left parietal bone. Thin, non-displaced fractures extend through the occipital bones. Jagged fractures extend through the middle cranial fossae and sella turcica, creating a hinge fracture. Additionally, there are comminuted fractures of each middle cranial fossa and of the cribriform plate.

In each temporal region, the dura is peeled from the skull and there is a thin film of epidural hemorrhage. Also, there is a thick film of diffuse subdural hemorrhage. Thick subarachnoid hemorrhage is on each lateral cerebral hemisphere and there is diffuse, thin basilar subarachnoid hemorrhage. The cerebellar hemispheres have patchy, irregular, focally thick subarachnoid hemorrhage.

The ventral frontal lobes have patchy, irregular, contusions measuring up to 1/2" in greatest

dimension. The ventral temporal lobes have extensive, discontinuous and confluent, purple contusions covering a 3 x 2" area on the right and a 4 x 1 1/2" area on the left; the contusions are denser on the left than the right. The cerebral cortical contusions are evident on sectioning, but the white matter is uniform and without hemorrhage.

DISPOSITION OF CLOTHING AND PERSONAL EFFECTS

The following items are released with the body
None.

The following items are preserved as evidence
Pulled hair; blood card; ring.

PROCEDURES

Radiographs
Postmortem radiographs are taken.

INTERNAL EXAMINATION

Body Cavities

The abdominal fat layer measures up to 6 cm in thickness. The body cavities have no hemorrhage or abnormal fluid. The serosal surfaces are smooth, glistening, and without adhesions. The organs are normally located. The diaphragm is intact.

Cardiovascular System

Heart Weight 450 grams

The heart has a normal shape. The epicardium is largely smooth and glistening, though has some patchy fibrosis with spans of up to 6.0 cm. The coronary arteries have a normal origin and distribution with left dominance. The proximal left anterior descending coronary artery has focal, non-calcified atherosclerotic stenosis of approximately 30%. The mid portion has similar stenosis. The left circumflex coronary artery is widely patent and free of stenosis. The proximal right coronary artery has focal, non-calcified atherosclerotic stenosis of approximately 30%.

The myocardium is red-brown, firm, and uniform without focal fibrosis, softening, or hyperemia. The ventricles are not dilated. The thicknesses of the right ventricle, left ventricle, and interventricular septum are 0.4 cm, 1.5 cm, 1.5 cm, respectively.

The endocardium is intact, smooth, and glistening. There is congenital fusion and calcification of the junction of the right and left aortic valve leaflets. The non-coronary leaflet is normally formed. The remaining cardiac valve leaflets are of normal number, pliable, intact, and free of vegetations. The atrial and ventricular septa are free of defects.

The aorta follows its usual course and has mild atherosclerotic changes. There are no vascular anomalies or aneurysms. The venae cavae and pulmonary arteries are without thrombus or embolus.

Respiratory System

Right Lung Weight 450 grams

Left Lung Weight 440 grams

The tongue, strap muscles, and other anterior neck soft tissues are free of hemorrhage. The hyoid bone and cartilaginous structures of the larynx and trachea are normally formed and without fracture. The airway contains blood and has smooth, tan mucosa.

The lungs have the usual lobation. The pleura are smooth and glistening; the lungs have mild anthracotic pigment. The lungs are well expanded and crepitant. The parenchyma is dark red and exudes minimal amounts of fluid on sectioning. The lungs have no consolidation, hemorrhage, infarct, tumor, gross fibrosis, or enlargement of air spaces. The bronchi contain no foreign material and have smooth, tan mucosa.

Gastrointestinal System

The esophagus and gastroesophageal junction are unremarkable. The stomach contains approximately 500 ml of thick, tan chyme with masticated fragments of green vegetable matter. The gastric and duodenal mucosae are intact and unremarkable. The small and large intestines and appendix are unremarkable to inspection and palpation.

Liver

Liver Weight 2270 grams

The intact capsule is smooth. The parenchyma is red-brown and uniform without mass, yellow discoloration, or palpable fibrosis. The gallbladder is absent. Surgical clips are in the gallbladder bed.

Spleen

Spleen Weight 190 grams

The intact capsule is smooth. The parenchyma is maroon, firm, and uniform.

Pancreas

The pancreas has a normal size, shape, and lobulated architecture. The parenchyma is tan-brown and uniform.

Urinary

Right Kidney Weight 160 grams

Left Kidney Weight 200 grams

The kidneys have the normal shape and position. The cortical surfaces are smooth. The kidneys have the usual corticomedullary structure without tumors or cysts. The pelves and ureters are not dilated or thickened. The bladder contains approximately 50 ml of clear, yellow urine. The mucosa is uniform and the wall is not hypertrophied.

Reproductive

The prostate gland is of average size and grossly unremarkable.

Endocrine

The thyroid gland is not enlarged and the lobes are symmetrical. The parenchyma is red-brown and uniform. The adrenal glands have the normal size and shape. The cortices are thin, uniform, and yellow and there is no hemorrhage or tumor. The pituitary gland is not enlarged.

Neurologic

Brain Weight 1570 grams

The scalp has hemorrhage as noted. There is epidural and subdural hemorrhage as noted. The dura is thin and pliable. The calvarium and base of the skull are normally formed.

The leptomeninges are glistening and transparent with underlying subarachnoid hemorrhage as described. The cerebral hemispheres are symmetrical with a normally developed gyral pattern. There is no flattening of the gyri, narrowing of the sulci, or evidence of herniation. The arteries at the base of the brain have no atherosclerotic changes.

Sections through the cerebral hemispheres show a normally developed cortical ribbon and white matter. The basal ganglia, thalami, hippocampi, and other internal structures are normally formed. The ventricles are not enlarged and the linings are smooth and glistening. Sections of the brainstem and cerebellum show normal structures.

Immunologic System

There is no enlargement of the lymph nodes of the neck, chest, or abdomen. The thymus has an appropriate size for the decedent's age and has a tan parenchyma.

Musculoskeletal System

The musculoskeletal system is well developed. There are no fractures of the clavicles, sternum, ribs, vertebrae, or pelvis. The skeletal muscle is dark red and firm.

MICROSCOPIC EXAMINATION

Microscopic Comment

One section each of heart, lung, liver, and kidney is processed to the level of block only.

SUMMARY AND INTERPRETATION

According to the case call, Report of Investigation by the Davidson County Medical Examiner, and Davidson County Sheriff's Detective present at autopsy, on 08-02-15, this 39-year-old man was apparently involved in an altercation in which he was possibly struck with a baseball bat and/or landscaping stone. Emergency responders were summoned and pronounced death at the scene.

The autopsy documented multiple blunt force impact sites of the head, notably including two large, complex, branched, full-thickness scalp lacerations, as well as extensive skull fractures including a hinge fracture of the skull base. He had associated epidural, subdural, and subarachnoid hemorrhage as well as associated cerebral cortical contusions. Other injuries included a large contusion of his left hand and a few other scattered abrasions and contusions. Natural disease documented at autopsy included a congenital bicuspid aortic valve, cardiac left ventricular hypertrophy (1.5 cm), and mild coronary artery atherosclerosis. Toxicological testing detected a blood alcohol level of 20 mg/dL (0.02%).

Based on the autopsy findings and circumstances surrounding the death, as currently understood, the cause of death is listed as blunt force head trauma. The manner of death is classified as homicide.

DIAGRAMS

1. Adult MALE autopsy diagram
2. Multiview head and neck

ADULT MALE AUTOPSY DIAGRAM

IDENTIFICATION: ☒ ID checked

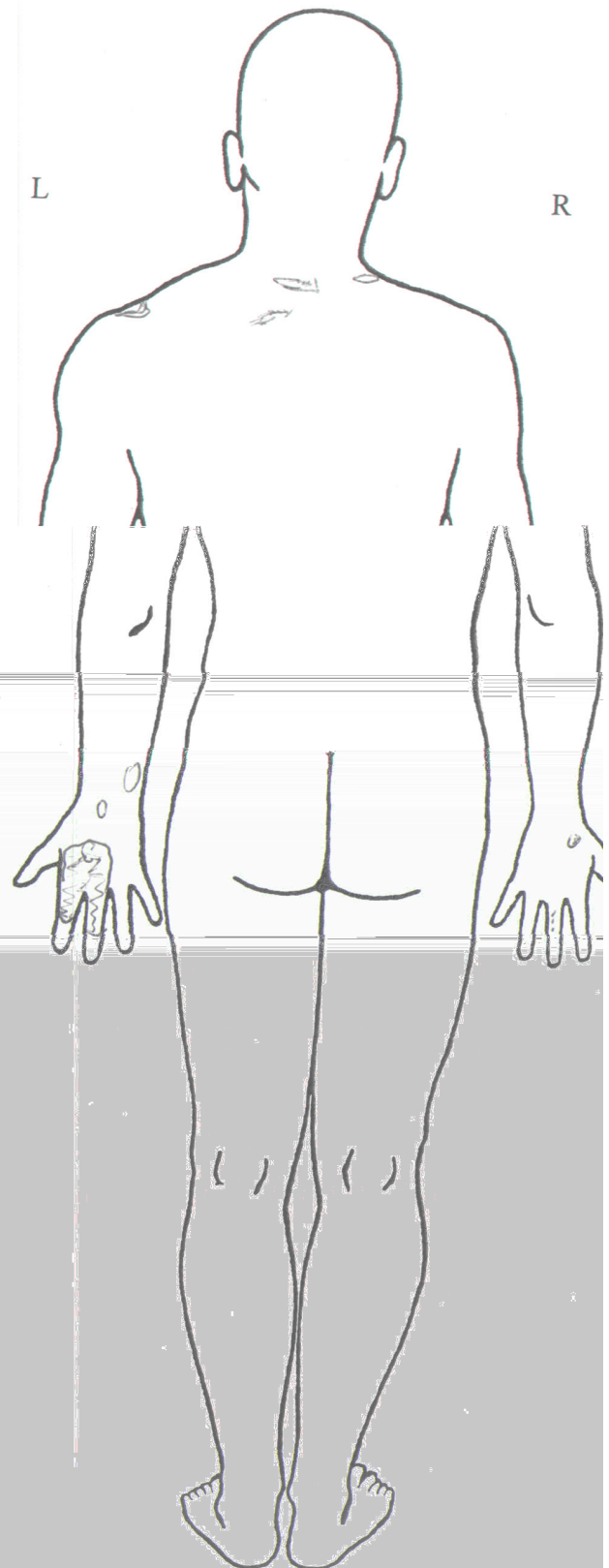
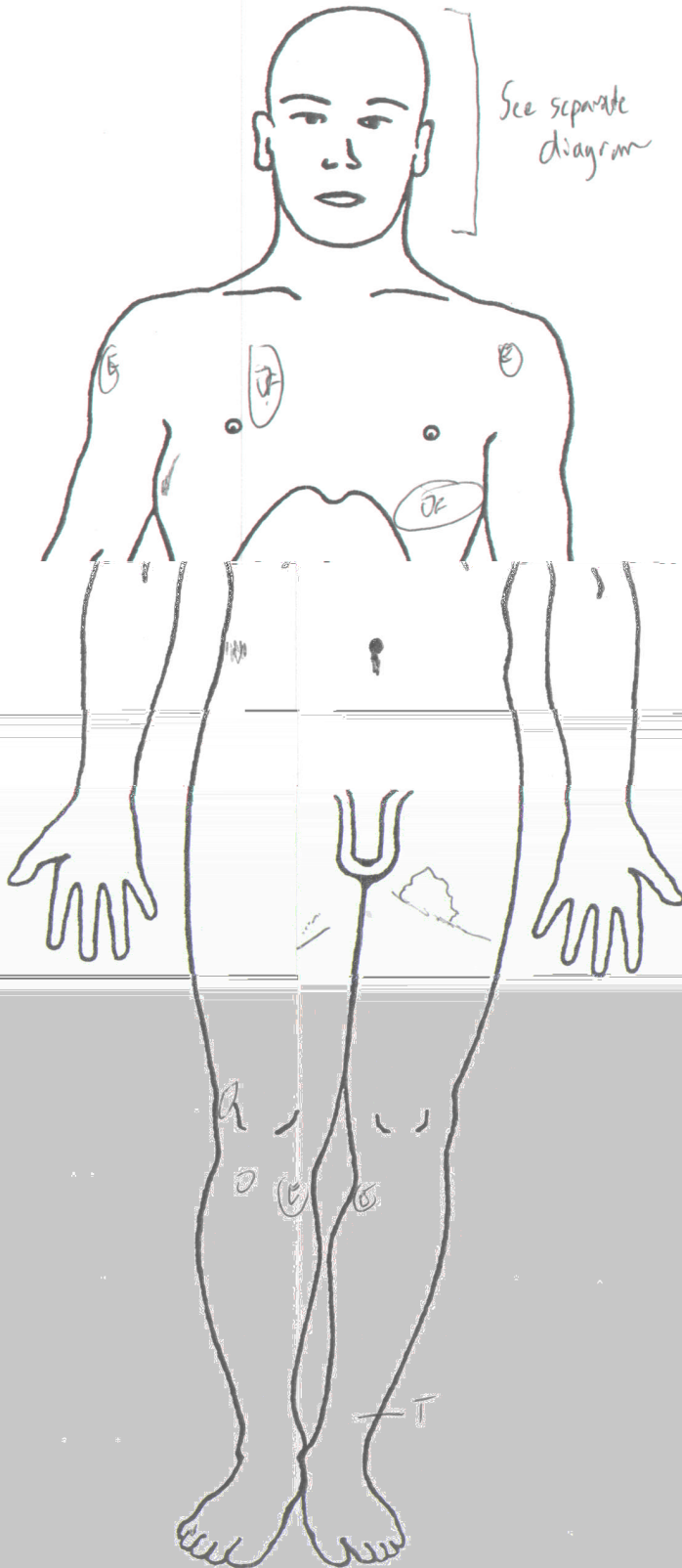
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Examined by LN Date: 8/3/15

See separate
diagram

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B-15-2676

Examined By RLK Date 8/11/15

