FINAL AUTOPSY REPORT

CASE #:	MS-02-506
DECEDENT:	HUTCHINSON, Gina R.
DATE OF BIRTH:	January 8, 1969
DATE OF DEATH:	October 11, 2002, 11:00 PM
DATE OF AUTOPSY:	October 12, 2002, 10:00 AM
PLACE OF AUTOPSY:	Kingston Hospital, Kingston, NY
PROSECTOR:	Michael Sikirica, M.D.
ASSISTING:	Mr. Wilbert DeWitt
MEDICAL EXAMINER:	Dr. Walter Dobushak, Ulster County

Cause of Death: Multiple skull fractures and brain injuries due to shotgun wound (1) of head (intraoral)

Manner of Death: Suicide

Michael Sikirica, M.D./sl
DATE: December 19, 2002

COUNTY OF ULSTER
Department of Health
L. Raquel Pallak
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External Description

The body is received in a heavy-duty blue plastic body pouch. The body is identified by police personnel present at the autopsy and scene. The body is that of a approximately 67", 110 pound normally-developed, normally-nourished adult Caucasian female appearing the reported age 33 years with moderate to full rigor mortis and irregular mottled posterior fixed livor mortis. The body temperature is cool to the touch after refrigeration. The general appearance notwithstanding the severe injuries is of good health and hygiene. The body is also identified by a pink mortuary slip accompanying the body with the decedent's name and permission for autopsy circled as "yes" and the medical examiner case circled as "yes."

The body is received wearing numerous layers of black clothing. The clothing is damp to the touch. The decedent is wearing a pair black pants over a pair of black long-John style pants. There are white metal buttons on the front of the pants. The decedent is also wearing a black cloth jacket, a black sweatshirt, a black shirt and black thermal T-shirt. The jacket also has hood and there is a large amount of cerebral tissue trapped in the inner aspect of the hood and trapped underneath a black scarf with white print present along the posterior scalp. The decedent is wearing a white sports bra and white panties along with black shoes with white metal buckles and black socks. There is a loose quarter present in the clothing. There is a yellow metal ring with a circular face present on the right middle finger and a tubular beaded necklace in place around the neck.

The scalp hair is blonde with darker appearing roots and cut above the shoulders. There are extensive injuries to the calvarium and face to be described under "Evidence of Injury." The irides are blue, the right and left pupils measure 3 mm in diameter, the cornea are clear and the sclerae are unremarkable except for conjunctival hemorrhage. The face is asymmetric due to injuries to be described. The teeth are natural in fair to good condition with multiple fracture sites. There is bloody fluid in the external auditory canals, nostrils and oral cavity. The neck is free from masses. There are no unusual marks or lesions on the skin of the neck. The larynx is midline and the thyroid not palpable. The chest is of normal contour. The breasts are those of an adult female. The abdomen is flat. The posterior torso shows no significant abnormalities. The upper extremities are symmetric, and the fingernails are intact and show no foreign material. The skin of the fingers and hands has a slightly shriveled washer woman's-type appearance consistent with exposure to cold water. There is no evidence of clubbing or cyanosis. The external genitalia are those of a mature female. There is no evidence of injury or abnormal secretions. The buttocks and anus are unremarkable. The skin is white in color and smooth. There is no evidence of acute or chronic intravenous narcotism. There is a star-type multicolored tattoo along the midline of the upper back and a large scroll tattoo with a flower in the center along the lower back above the buttocks. Passive motion of the neck and extremities reveals severe crepitus along the face and head but no evidence of crepitus of the neck or extremities. There is no unusual odor about the body. The body hygiene is good.

Evidence of Recent Medical Therapy

None

Evidence of Injury

Gunshot Wound of Head:

The entrance of this wound is located within the oral cavity. There is extensive destruction of the posterior portion of the maxilla and sooty residue along the posterior palate. There is extensive fracturing of the maxilla bilaterally and fractures of the mandible with loose fragments of teeth and alveolar bone.

There is an approximate 6 x 6 cm defect extending upward into the basilar skull from the palate involving the sella turcica and cribriform plate and extensive fracturing of the basilar skull and calvarium. There is a complete avulsion of the brain at the level of the pons. Most of the brain is trapped beneath the scarf and the hood of the decedent's outer most hooded-type black jacket. There is a severe laceration extending in a circumferential pattern around the upper portion of the scalp and inferiorly along the lateral right forehead. The laceration is irregular in contour. There is complete destruction of the calvarium and portions of loose boney tissue are also found trapped in the scarf and hood material. There are pellets measuring up to 18 x 15 x 4 mm in size with many displaying severe flattening found embedded in the cerebral tissue. There are two portions of felt-type wadding the largest measuring 2.4 cm in diameter. The smaller in diameter is thicker but also consistent with the diameter of a 20 gauze shotgun. The pellets and wadding are retained along with biologic tissues in

the stock jar. There are perforations noted in the decedent's scarf and the hood of outer cloth coat consistent with pellet tracts.

Present along the right mid calf is a 2 cm pink ecchymosis.

There is an area of pink discoloration on the dorsal aspect of the medial left foot.

There is leafy debris adherent to the left hood and outer areas of the decedent's clothing.

Procedure and Specimens

The chest and abdominal organs are exposed utilizing the standard Y-shaped thoracoabdominal incision. No scalp incision is required. There is a small amount of blood, which along with bile, vitreous fluid and urine are taken for toxicologic evaluation and submitted to the Forensic Toxicology Laboratory at the Albany Medical Center. Representative portions of the major viscera are retained in formalin. Pertinent findings at autopsy are recorded by digital, Polaroid and 35 mm photographs (Dr. Sikirica). Additional photographs are taken by Inv. William Manley from the New York State Police. The jewelry is transferred to Inv. Manley and are returned with additional personnel affects also recovered. The pellets and wadding are retained in the stock jar but no additional material is retained. The autopsy is assisted by autopsy assistant Wilbert DeWitt. A/P and lateral X-rays of the head are taken and evaluated. The projectiles are lead-type pellets of approximately size 3 buckshot.

Internal Examination

Thoracoabdominal incision reveals 2 cm of panniculus. The thoracic and abdominal viscera have normal anatomic relationships with no evidence of trauma.

Body Cavities

There are no significant fluids in the pleural or peritoneal cavities. There are no adhesions.

Musculoskeletal System

The skeletal muscles are firm and normally developed. There are no fractures of the ribs or extremities.

Neck Organs

The larynx and thyroid gland are unremarkable. The thyroid is homogeneously tan/brown without nodularity. The laryngeal cartilages and hyoid bone are intact. There are no laryngeal hemorrhages or hemorrhages in the soft tissues of the neck. The carotid arteries and jugular veins are intact. The spine is intact.

Respiratory System

The right lung weighs 310 grams, the left 240 grams. The pleural surfaces are smooth and glistening. There is mild anthracotic pigment deposition with a slightly increased amount of normal crepitus. The tracheobronchial and arterial trees are unremarkable. No aspirated material or thromboemboli are found.

Cardiovascular System

The pericardial sac is intact and contains a few cc of normal serous fluid. The heart weighs 200 grams and has a normal external configuration with a glistening epicardial surface and a normal amount of epicardial fat. The myocardium is firm and red/brown and shows no focal lesions. The cardiac chambers are of normal size and contain clotted blood. The right and left ventricles are of normal thickness. The cardiac valves are normally formed and appear in good functional condition with thin pliable valve leaflets and thin discrete tendineae chordae. The endocardium is smooth, glistening and transparent and shows no fibrosis or petechiae. The coronary arteries arise normally through unobstructed ostia and pursue their usual anatomic course. Serial sections at 2 mm intervals reveal no significant atheromatous occlusion. The atria and their appendages are normal. The aorta is of normal caliber and branching distribution with no significant atherosclerosis. The vena cavae is intact.

Liver and Biliary Tree

The liver weighs 1050 grams and has a smooth capsule and normal brown lobular architecture. There is no evidence of cirrhosis or fibrosis. There are no focal lesions. The gallbladder is intact and contains 20 cc of green/brown bile without stones. The extrahepatic biliary system is unremarkable.

Spleen

The spleen weighs 80 grams and has a smooth thin intact capsule. The parenchyma is firm with indistinct white pulp.

Pancreas

Firm lobulated tan parenchyma

Adrenals

Thin bright yellow/orange cortical ribbons and tan medullae

Genitourinary System

The right kidney weighs 70 grams, the left 90 grams. The capsules strip easily to reveal smooth purple cortical surfaces. There are no parenchymal lesions. The ureters are patent into the bladder which contains 200 cc of yellow urine and is otherwise unremarkable. The internal reproductive organs are present and normal for age without disease or injury. The uterus is opened and no masses are noted.

Gastrointestinal System

The esophagus is unremarkable. The stomach contains approximately 50 cc of brown watery fluid without identifiable digestate. There are no recognizable fragments of tablets or capsules. The mucosa and rugae are unremarkable. The small and large intestines and appendix have a normal configuration and are otherwise unremarkable.

Brain

As noted the brain is completely avulsed from the cranial vault. The fragments of brain are collected from the scarf and hood and have a combined weight of approximately 840 grams. There are multiple lacerations through the brain parenchyma which is severely disrupted and the remaining gyri and sulci appear unremarkable. There is spotty subarachnoid hemorrhage but no evidence of significant subdural or epidural hemorrhage. There are no focal lesions. As noted numerous pellets are recovered. The pituitary gland and sella turcica are completely destroyed.

Anatomic Diagnoses

I. Multiple skull fractures and brain injuries due to shotgun wound (1) of head

a. Evidence of intraoral discharge of a weapon with passage of projectiles into the cranium through the region of the sella turcica and cribriform plate

b. Avulsion of majority of brain

c. Massive fracturing of the calvarium and irregular lacerated exit site of the majority of the upper scalp

d. Pellets recovered consistent with #3 buckshot

e. Portions of wadding also recovered from cerebral tissue

f. History of 20 gauge shotgun recovered loaded with buckshot

g. Reported clinical history of depression

h. Passage of projectiles: straight and upward

i. Corresponding small defects noted in decedent's scarf and hood of decedent's outer coat

II. No other evidence of significant antemortem injury or significant natural disease

FORENSIC TOXICOLOGY LABORATORY

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ACCREDITED BY THE AMERICAN BOARD OF FORENSIC TOXICOLOGY

CERTIFYING TOXICOLOGISTS
Thomas G. Rosano PhD, DABFT (Director) Thomas A. Swift PhD (Associate Director)

SUBJECT NAME:	HUTCHINSON, GINA R	LABORATORY CASE NUMBER:	8368
COUNTY/REQUESTING AGENCY:	ULSTER	SPECIMEN COLLECTION DATE:	10/12/02
COUNTY AUTOPSY NUMBER:	MS-02-506	REPORT DATE:	12/11/2002

PATHOLOGIST:
DR. MICHAEL SIKIRICA
FORENSIC MEDICAL SERVICES, PC
58 BROAD STREET
WATERFORD, NEW YORK 12188

REQUESTING AGENCY/AGENT:
DR. WALTER DOBUSHAK
ULSTER COUNTY MEDICAL EXAMINER
(c/o NANCY PALEN)
300 FLATBUSH AVE
KINGSTON, NY

SPECIMEN	TEST	RESULT	POSITIVE THRESHOLD/UNITS	METHODOLOGY
Blood	Amphetamines	NEG	Threshold 250 ng/ml	Immunoassay
	Barbiturates	NEG	Threshold 250 ng/ml	GC/MS
	Benzodiazepines	NEG	Threshold 150 ng/ml	Immunoassay
	Benzoylecgonine	NEG	Threshold 150 ng/ml	Immunoassay
	Methadone	NEG	Threshold 150 ng/ml	GC/MS
	Opiates	NEG	Threshold 150 ng/ml	Immunoassay
	Phencyclidine	NEG	Threshold 50 ng/ml	GC/MS
	Propoxyphene	NEG	Threshold 150 ng/ml	GC/MS
	Tetrahydrocannabinol	NEG	Threshold 10 ng/ml	GC/MS/MS
	Tricyclic Antidepressants	NEG	Threshold 100 ng/ml	GC/MS
	Salicylate	NEG	Threshold 10 mg/dl	Colorimetric
	Acetaminophen	NEG	Threshold 10 mg/L	Immunoassay
	Ethanol	NEG	Threshold 0.010% w/v	Gas Chromatography
	Acetone	NEG	Threshold 0.010% w/v	Gas Chromatography
	Isopropanol	NEG	Threshold 0.010% w/v	Gas Chromatography
	Methanol	NEG	Threshold 0.015% w/v	Gas Chromatography
	Ibuprofen	4	ug/ml	HPLC

General drug screen by GC/MS: ibuprofen detected.

DFS 12-28-02

I certify that the specimen identified by the name and I.D. number above has been examined upon receipt, handled and analyzed in accordance with New York State Health Department regulations, and that the results set forth are for that specimen. Chain of custody and confidentiality was maintained throughout collection, testing, and reporting, unless otherwise noted. Positive specimens are retained for a minimum of one year and all other specimens for a minimum of one month, unless otherwise requested.

Thomas A. Swift PhD	Thomas Swift	12-11-02
Certifying Toxicologist (Print)	Certifying Toxicologist (Signature)	Date
Thomas G. Rosano PhD. DABFT		12-11-02
Laboratory Director (Print)	Laboratory Director (Signature)	Date