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***AUTOPSY REPORT***

**Case No.** 2013-2277

**Name:** Robert Cameron Redus **Age:** 23 **Race:** W **Sex:** M

**Date & Time of Autopsy:** 7 Dec 2013 @ 9:30 a.m.

**GENERAL EXAMINATION**

The decedent is first examined at Bexar County Forensic Science Center on 12/7/13. When first examined, the decedent is clad in black, white and gray athletic shoes, blue socks, gray slacks, a woven fabric belt, a striped pullover sweater, and a white t-shirt. Present around the right wrist are four woven cloth bracelets. The decedent is further clad in gray boxer shorts. Present in the pants pocket are a key ring with three keys, a key ring with two keys, a turquoise flash drive, a one-dollar bill, \$0.38 in coins, one business card, and one receipt.

**EXTERNAL EXAMINATION**

The body is that of an adult male, whose appearance is compatible with the recorded age of 23 years. As submitted, the body weighs 160 lbs and is 69 ½ inches long. Preservation is good in the absence of embalming. There is fixed posterior lividity of normal color and full rigidity of the extremities and jaw. The body is cool to the touch having been refrigerated prior to examination.

The hairline is normal. The scalp hair is light brown, curly, and a maximum of 2 inches long. The right eye is closed and the iris is green. The left eye contains injuries to be described presently. The lower face is clean shaven. The teeth are natural and in good repair and hygiene.

The neck contains injuries to be described presently. The chest and breasts are symmetrical with injuries to be described presently. The abdomen is of normal contour. The left upper extremity contains injuries to be described presently. Otherwise, the limbs are equal and symmetrically developed. The external genitalia are those of an adult male. The upper back contains injuries to be described presently.

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### IDENTIFYING MARKS AND SURFACE FEATURES

There is a large tattoo in multiple colors of a snail and a moon over the left flank. There is a tattoo over the right lateral scapula depicting an eye and a four-point star. There is a 1 ½ inch café-au-lait spot over the anterior distal left thigh.

### EVIDENCE OF MEDICAL ATTENTION

There are three EKG pads present on the surface of the body.

### EVIDENCE OF INJURY

There are a number of gunshot wounds present. These wounds are numbered for identification purposes, and this numbering system is not intended to represent sequence of occurrence.

Gunshot Wound #1: There is a gunshot wound of the left eye. The wound is centered at a point 3 ½ inches below the top of the head and 1 inch to the left of anterior midline. The defect is just below the lower lid and ½ inch in dimension. There are widely scattered gunpowder flakes extending from the hairline to the lower cheek over an area measuring 4 inches in vertical dimension and 2 ½ inches in lateral dimension.

Associated with this injury is extensive fracturing of the facial bones and laceration of the lateral zygomatic region. This wound track travels sharply downward, through the bones of the face, and without injuring the right mandible or great vessels and exits the right neck. The exit wound is centered at a point 8 inches below the top of the head in the lateral midline, over the distal aspect of the right sternocleidomastoid muscle. From this area a predominately horizontal, ½ inch defect with stellate tears at the margins is identified. No radiopaque materials are identified along the path and none are recovered.

With the body in anatomic position this wound track traveled left to right and sharply downward, without significant front-to-back deviation.

Gunshot Wound #2: There is a gunshot wound of entry in the upper anterior chest, just right of midline. The wound of entry is centered a point 11 ½ inches below the top of the head and 1 ½ inches to the right of anterior midline. The defect is round and ½ inch in dimension. No gunshot residue is found around the wound.

This wound track travels sharply downward, left to right, exterior to the left thorax. Along the wound path, mid portion of the wound path, there is an oblique and elliptical tearing of the skin involving the right nipple and superior and medial to the nipple. This defect measures 2 ½ inches. The wound path continues exterior to the thorax. A subcutaneous large-caliber projectile is recovered from beneath the skin of the right lower thorax at a point 19 inches below the top of the head and 5 inches to the right of anterior midline. As a result of this injury, there is contusion of the anterior right upper and middle lobes of the lung, without perforation.

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Gunshot Wound #3: There is a gunshot wound of entry in the upper back. The wound of entry is centered at a point 12 ½ inches below the top of the head and 2 inches to the right of posterior midline. The defect is round, 3/8<sup>th</sup> inch in diameter, with a few widely scattered stippling marks, predominately above and lateral to the defect over an area measuring 3 inches in overall dimension.

After penetrating skin, subcutaneous tissue, and skeletal muscle, this wound track perforates the 3<sup>rd</sup> thoracic vertebra, causing complete transection of the cord. It continued through the upper portion of the heart involving the aorta and pulmonary outflow tract and is found within the pericardial sac amidst liquid and partially clotted blood.

With the body in anatomic position this wound track travels back to front, right to left, and slightly downward. It additionally produced contusion of the apex of the left lung without perforation.

Gunshot Wound #4: There is a gunshot wound of entry in the tip of the left elbow. The wound of entry is oval, ½ x ¼ inch in diameter. There is no gunshot residue surrounding the wound.

This wound path produces extensive shatter fracturing of the elbow joint and distal humerus. It continues through the left biceps area and exits over the mid belly of the biceps region. It produces an elliptical defect measuring 1 ¼ inch in dimension. No radiopaque material is seen along this path and none is recovered.

With the body in anatomic position this wound track traveled upward and back to front.

Gunshot Wound #5: There is a gunshot wound of entry in the lateral right hip. The wound of entry is centered at a point 28 inches below the top of the head and 7 ½ inches to the right of posterior midline. The central defect is slit-like and is surrounded by an area of friction abrasion measuring 1 ½ inches in overall dimension.

This wound path travels through skin and gluteal muscle only. It exited the right buttock at a point 31 inches below the top of the head and 4 ¾ inches to the right of posterior midline. The defect is oblique, slit-like, and ½ inch in maximal dimension. Along the wound path a small jacket fragment is recovered.

With the body in anatomic position this wound path traveled front to back, slightly downward, and slightly right to left.

Other Injuries: Over the top of the right shoulder, medial to the chromium process and in line with the distal end of the right clavicle, there is an oblique, slightly rhomboid abrasion measuring 1 inch in overall dimension. There is an irregular band of contusions over the anterior neck, predominately right of midline and between the midline and the sternocleidomastoid muscle. This area measures 2 ½ inches in overall dimension and consists of linear and punctate defects. There is an oblique and linear abrasion over the distal left neck, in line with a superficial linear abrasion below the entry to gunshot wound #2.

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The hands are bagged when first examined. No gunshot residues or trace evidence is identified with removal of the bags, and the nails are clipped for evidence.

Recovered: Removal of the shirt reveals one deformed projectile. Removal of the t-shirt reveals a deformed projectile. The pericardial sac contains one projectile. There is a jacket fragment recovered from the right buttock.

#### **INTERNAL EXAMINATION**

**HEAD AND CENTRAL NERVOUS SYSTEM:** The scalp, skull, and dura are unremarkable. The brain weighs 1,600 g. The cerebral hemispheres and ventricles are symmetrical with normal gyri and sulci. The intracranial nerves and vessels are symmetrical, and the vessels contain no atherosclerosis. Sectioning of the cerebral hemispheres, cerebellum, and brainstem demonstrate normal deep brain structures. The thoracic spinal cord is interrupted as described above.

**NECK:** An anterior layer-by-layer neck dissection is undertaken revealing no injury to the bony, cartilaginous, and soft tissues of the anterior neck. Posterior neck dissection of the cervical spine reveals no injury to vessels in the region.

**BODY:** The body is opened through a standard Y-shaped incision. The organs are in their normal anatomic positions. The pericardial sac is open due to trauma and still retains approximately 120 ml of liquid and partially clotted blood. The left thorax contains approximately 300 cc of liquid and partially clotted blood.

**CARDIOVASCULAR SYSTEM:** *See section on injuries above.* The coronary arteries are normally distributed and are free of atherosclerosis or hypertensive change. Sectioning away from the area of injury reveals normal, firm, tan-red pericardium. The aorta is interrupted as described above but is otherwise smooth and glistening on the intimal surface. The heart weighs 260 g.

**RESPIRATORY SYSTEM:** *See section on injuries above.* Both lungs are contused and the pleural surfaces are all intact. The right and left lungs weigh 550 and 340 g, respectively. Sectioning reveals normal airways, vessels, and pulmonary parenchyma.

**HEPATOBIILIARY SYSTEM:** The liver is uninjured and weighs 1,850 g. The gallbladder is intact and contains liquid bile without stones.

**ALIMENTARY SYSTEM:** The mid portion of the esophagus along the wound path contains a tangential defect. The stomach contains no blood and contains approximately 30 ml of gray mucous only. The serosa of the small bowel and colon are unremarkable. The appendix is absent. The pancreas is normal externally and with sectioning.

**GENITOURINARY SYSTEM:** The right and left kidneys weigh 140 and 120 g, respectively. Longitudinal sectioning reveals normal cortex, medulla, and collecting systems. The urinary bladder is intact and contains approximately 120 ml of colorless urine and an unremarkable urothelial lining. The prostate gland and seminal vesicles are normal for the decedent's age.

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**LYMPHORETICULAR SYSTEM:** The spleen weighs 120 g and is normal externally and with sectioning. The thymus is present over the upper anterior mediastinum and weighs 50 g; it is unremarkable with sectioning.

**ENDOCRINE SYSTEM:** The thyroid gland and adrenal glands are unremarkable.

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## FINDINGS

- I. Multiple gunshot wounds
  - A. Gunshot wound #1
    - 1. Entry: left eye
    - 2. Range: stippling present
    - 3. Track: left globe (eyeball), bones of mid face, exit right neck
    - 4. Recovered: none
    - 5. Direction: sharply downward, left to right
    - 6. Associated injuries: abrasion of right shoulder
  - B. Gunshot wound #2
    - 1. Entry: upper chest
    - 2. Range: no evidence of close range firing
    - 3. Track: skin, subcutaneous tissue, graze wound of anterior right chest
    - 4. Wound path did not enter right thorax
    - 5. Recovered: projectile from subcutaneous right lower thorax
    - 6. Associated injuries: contusion of mid right lung
  - C. Gunshot wound #3
    - 1. Entry: upper back, right of midline
    - 2. Range: small amount of stippling present
    - 3. Track: skin, subcutaneous tissue, 3<sup>rd</sup> thoracic vertebra with complete transection of cord, heart involving pulmonary outflow tract and aorta
    - 4. Recovered: projectile from within pericardial sac
    - 5. Associated injuries: hemopericardium, contusion of left upper lobe of lung, and left hemothorax
    - 6. Direction: back to front, downward, right to left
  - D. Gunshot wound #4
    - 1. Entry: tip of left elbow
    - 2. Range: no gunshot residue identified
    - 3. Track: skin, subcutaneous tissue, elbow joint, biceps muscle, exit over mid left biceps
    - 4. Associated injuries: extensive shatter fracturing of left humerus and elbow joint with interruption of nerves and vessels
    - 5. Direction: upward, back to front
  - E. Gunshot wound #5
    - 1. Entry: right lateral hip
    - 2. Range: no gunshot residue identified
    - 3. Track: skin, subcutaneous tissue, gluteal muscle, and skin
    - 4. Recovered: none
    - 5. Direction: front to back, downward, right to left

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**CONCLUSION**

Based on anatomic findings at autopsy and investigation available at this time, it is our conclusion that Robert Cameron Redus, a 23 year old male, died as a result of multiple gunshot wounds. Gunshot wound #3 is the most immediately lethal and gunshot wound #1 could be classified as fatal. Gunshot wounds #2, 4, and 5 are not considered fatal.

Clothing is to be submitted separately for evaluation for range.


**MANNER OF DEATH:** Homicide.



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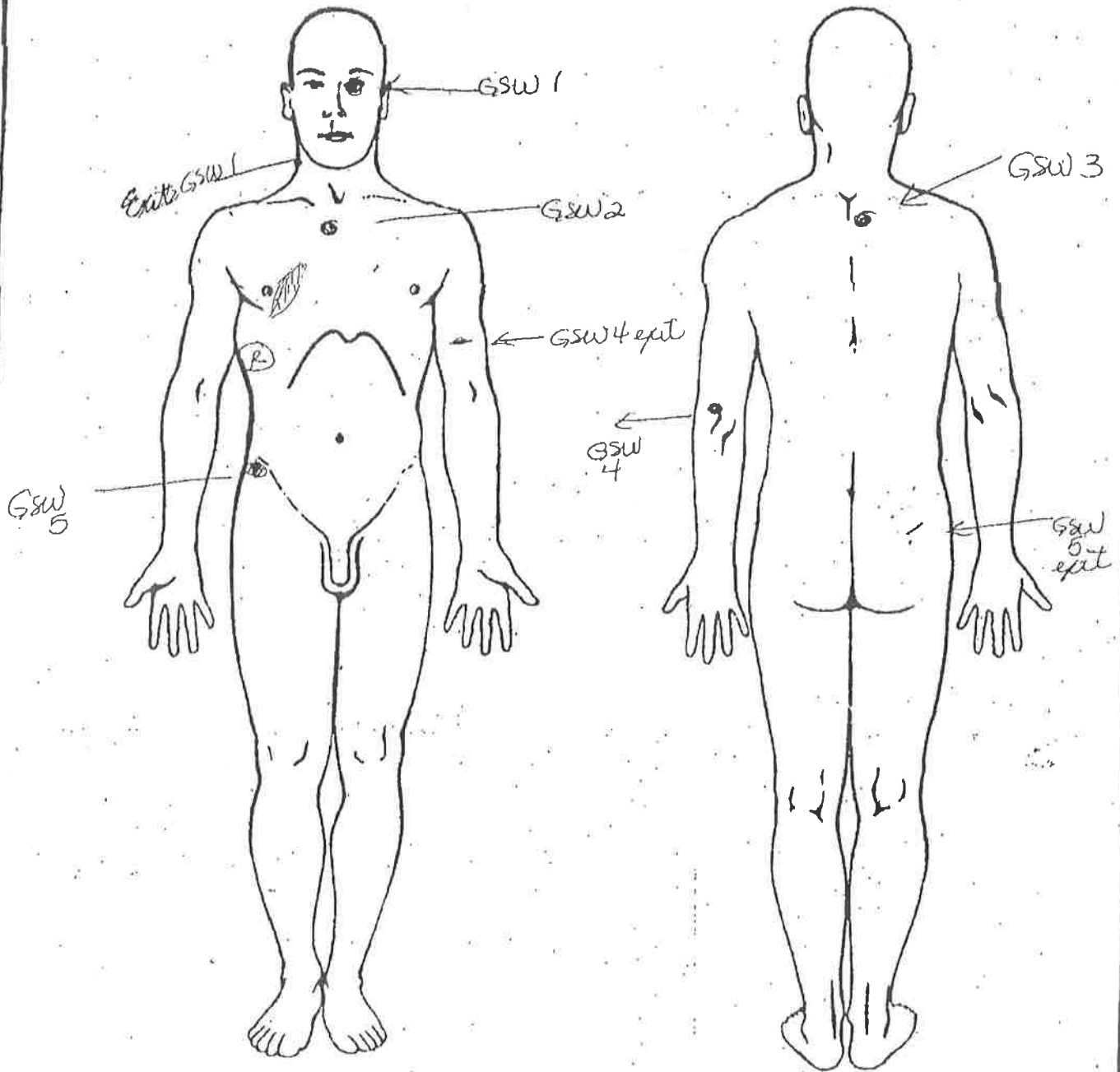
xc: District Attorney's Office

Name Reolis, Robert

Autopsy No. 13-2277

Color W Age 23

Date 12-7-13



For protocol only:





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**TOXICOLOGY REPORT**

ME Case #: 13-02277 Age: 23 Years  
Decedent: Redus, Robert C. Type: Autopsy  
Exam Date: 12/7/2013 Completed Date: 1/9/2014  
Staff Pathologist: Elizabeth A. Peacock, M.D.

No toxicology testing requested

Assay	Sample	Analyte	Amount	Instrument
Acid/Neutral	Blood-Femoral	Acid/Neutral	None Detected	GC/MSD
Alcohols	Blood-Femoral	Ethanol	0.155 g/dL	GC/FID
Alcohols	Vitreous	Ethanol	0.186 g/dL	GC/FID
Alkaline	Blood-Left Chest Cavity	Alkaline	None Detected	GC/FID; GC/MSD
Cannabinoids	Blood-Femoral	Tetrahydrocannabinol	0.001 mg/L	LC/MS/MS
Cannabinoids	Blood-Femoral	Tetrahydrocannabinol-carboxylic acid	Detected, Less than Limit of Quantitation	LC/MS/MS
ELISA	Blood-Femoral	Cocaine Metabolite	None Detected	Spectrophotometer
ELISA	Blood-Femoral	Opiates (class)	None Detected	Spectrophotometer
ELISA	Blood-Femoral	Fentanyl	None Detected	Spectrophotometer
ELISA	Blood-Femoral	Oxycodone/Oxymorphone	None Detected	Spectrophotometer
ELISA	Blood-Femoral	Benzodiazepines (class)	None Detected	Other
ELISA	Blood-Femoral	Cannabinoids (class)	Positive	Spectrophotometer
Enzymatic	Blood-Femoral	Ethanol	Confirmed	Spectrophotometer