

Autopsy Report of Marilyn Chambers

CASE REPORT

1	APPARENT MODE ACCIDENT/ NATURAL		CASE NO 2009-02652										
	SPECIAL CIRCUMSTANCES Celebrity, Media Interest		CRYPT 90										
	LAST, FIRST MIDDLE TAYLOR, MARILYN ANN		AKA MARILYN BRIGGS										
ADDRESS 16274 VASQUEZ CANYON #27		CITY CANYON COUNTRY	STATE CA	ZIP 91351									
SEX FEMALE	RACE CAUCASIAN	DOB 4/22/1952	AGE 56	HGT 65 in.	WGT 163 lbs	EYES BLUE	HAIR BLOND	TEETH ALL NATURAL	FACIAL HAIR NONE	ID VIEW Yes	CONDITION FAIR		
MARK TYPE IMPLANTS		MARK LOCATION BILATERAL BRE		MARK DESCRIPTION									
NOK SEE CASE NOTES		ADDRESS		CITY		STATE		ZIP					
RELATIONSHIP		PHONE		NOTIFIED BY		DATE 4/13/2009		TIME					
SSN		DL ID C7093037		STATE CA		PENDING BY							
ID METHOD FINGERPRINTS FROM DOJ													
LA #		MAIN #		CII # A07859460		FBI # 541266EA4		MILITARY #		POB			
IDENTIFIED BY NAME (PRINT) CII, FBI #'S				RELATIONSHIP		PHONE		DATE 4/13/2009		TIME 05:10			
PLACE OF DEATH / PLACE FOUND TRAILER		ADDRESS OR LOCATION 16274 VASQUEZ CANYON SP # 27				CITY CANYON COUNTRY		ZIP 91351					
PLACE OF INJURY UNKNOWN		AT WORK No		DATE		TIME		LOCATION OR ADDRESS		ZIP			
DOB 4/12/2009		TIME 21:05		FOUND OR PRONOUNCED BY LACO PD SQUAD 132									
OTHER AGENCY INV. OFFICER LASD SANTA CLARITA - DEP CULOTTA				PHONE		REPORT NO. 009-06304-0670-496		NOTIFIED BY		NO			
TRANSPORTED BY LARRY CERVANTES				TO LOS ANGELES ESC		DATE 4/13/2009		TIME 01:50					
FINGERPRINTS? Yes		CLOTHING Yes		PA RPT No		MORTUARY							
MED. EV Yes		INVEST. PHOTO # 12		SEAL TYPE NOT SEALED		HOSP RPT No							
PHYS. EV No		EVIDENCE LOG Yes		PROPERTY? Yes		HOSP CHART No							
SUICIDE NOTE No		GSR NO		RCPT. NO. 239969		PF NO.							
SYNOPSIS THE DEC'D IS A 56-YR OLD CAUCASIAN FEMALE WITH A KNOWN MEDICAL HISTORY OF HIGH CHOLESTEROL, CHRONIC KNEE PAIN AND SUBSEQUENT SURGERIES FROM A FALL APPROX (20) YEARS AGO, AND NECK AND BACK PAIN OF UNKNOWN ORIGIN. SHE HAD A HISTORY OF COCAINE ABUSE AND REPORTED SOBRIETY SINCE EARLY 90'S. APPROX (2) YEARS AGO, SHE STARTED ABUSING ALCOHOL AND WAS DRINKING APPROX (2) BOTTLES OF WINE EACH NIGHT. SHE WAS REPORTED TO BE ADDICTED TO AMBIEN AND VICODIN DUE TO NECK AND BACK PAIN. SHE WAS FOUND DECEASED IN HER LOCKED MOBILE HOME AT APPROX 2030 HRS ON 04/12/09. NO OBVIOUS TRAUMA FOUND/FOUL PLAY IS NOT SUSPECTED.													
KELLI BLANCHARD 496863				INVESTIGATOR <i>Kelli Blanchard</i>				DATE 4/13/2009		REVIEWED BY <i>[Signature]</i>		DATE 4/13/09	
				TIME 23:45						TIME			

FORM #3 NARRATIVE TO FOLLOW? ☒



County of Los Angeles, Department of Coroner
Investigator's Narrative



Case Number: 2009-02652

Decedent: TAYLOR, MARILYN

Information Sources:

1-Deputy Culotta, LASD Santa Clarita

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Investigation:

At 2200 hrs on 04/12/09, Lt Dietz assigned me the apparent ACCIDENT/NATURAL death of Marilyn Taylor for investigation. I departed the FSC with FA Cervantes at 2235 hrs, arrived at the scene at 2321 hrs, and completed my investigation at 0050 hrs on 04/13/09.

Location:

Injury: Unknown

Death: Mobile Home- 16274 Vasquez Canyon #27, Canyon Country 91351

Informant/Witness Statements:

According to Deputy Culotta, the decedent was the sole resident of the mobile home at the above location.

At approximately 2030 hrs on 04/12/09, her 17-yr old daughter came by to visit her but received no answer to her knocks. Since she did not have a key, she went next door to her mother's neighbor and got the spare key that her mother had left with the neighbor on a previous occasion. The daughter then entered the residence and found the decedent face down and unresponsive on the living room floor.

911 was called and LACO FD Squad #132 responded to the location and rolled the decedent into a supine position. They found no signs of life and pronounced her death at 2105 hours. They did not leave a runsheet.

Deputy Culotta advised that family and friends at the location indicated that the decedent had a history of abusing alcohol and prescription pain medications and that she had no known medical history.

According to Peggy McGinn, she and the decedent had been longtime friends for close to (30) years and spoke daily. She last spoke to her on the phone at 1730 hrs on 04/11/09 and the decedent had no medical complaints at that time.

She advised that Taylor had a medical history of high cholesterol and chronic neck and back pain of which the decedent did not know the origin of. She had shattered her knee climbing on rocks in Greece over (20) years ago requiring several subsequent surgeries. She still complained of pain to her knee.

She took Ambien due to sleep difficulties and took Vicodin due to her chronic neck and back pain. The decedent had admitted to McGinn over the years that she was addicted to both. She never sought treatment for the addiction. She had been addicted to cocaine for years but had been sober since the early 90's. Approximately (2) years ago, she started abusing alcohol and was up to (2) bottles of wine a night.

McGinn advised that she would notice from time to time that the decedent would slur her speech and figured this was due to the decedent drinking alcohol and taking her medications.

She advised that the decedent was not depressed, suicidal and had never attempted suicide in the past. She had not suffered any recent falls, accidents, or traumas.



County of Los Angeles, Department of Coroner
Investigator's Narrative



Case Number: 2009-02652

Decedent: TAYLOR, MARILYN

Scene Description:

The scene is a mobile home in a mobile home park in Canyon Country during nighttime hours. The mobile home is a two-bedroom, two-bathroom home and it appears that the smaller of the two bedrooms may have been used by the decedent's daughter at one time and now primarily is used to store personal items.

The front door is located on the south side of the home and opens directly into the living room. I see two couches situated catty corner to each other in the center of the living room (one couch faces the front door and the other faces the front living room window located on the east side of the home). There is an overturned red side table on the floor next to the couch that faces the east window. There is a TV tray situated against the couch that faces the door. There is an ashtray, two packs of cigarettes, remote control, and a drinking glass (with possible wine in it) on the tray.

The decedent is found lying on the floor in front of both of the couches. There is a small box of animal toys on the ground a few inches north of her. There is a dog chew bone on her stomach.

I go into the kitchen and see her purse on the countertop. There is a prescription bottle in her purse. I see an open bottle of white wine on another countertop. There is a box of several prescription bottles in the decedent's name on the counter which Deputy Culotta advises he found in one of the cupboards. I do not see any other open or empty alcohol bottles in plain sight.

I check both bathrooms and find no obvious prescription medications.

I enter the decedent's bedroom located at the west end of the home. I see a prescription bottle of Vicodin on top of a chest of drawers at the north wall.

I do not see any obvious narcotics in the home.

Evidence:

I collected several prescription medication bottles in the decedent's name from her residence and booked them at the FSC as "Medical Evidence".

Body Examination:

The decedent is found lying supine on the living room carpet, covered with a white blanket. There are two bright red blood stains on the carpet a few inches to the north of the left side of her face.

She appears as a Caucasian female in her mid 50's with long blond hair, blue eyes, and natural teeth. She appears to have breast implants. She is wearing a long white robe, no bra, no underwear, gray sleep pants, and white socks. Bright red blood is seen to the left side of her robe.

There is clear purge and red blood on her face. Her face is colored by lividity and is contorted due to her original prone position. I do not feel any obvious trauma to her head and see no obvious trauma to her face.

The front of her body is deeply discolored with lividity. I see no obvious signs of incontinence. I see no obvious signs of trauma.

I then check the rear of her body and also see no obvious signs of trauma.

At 2358 hrs, her body is cold to the touch. Rigor mortis is heavy to her legs (4) and lighter to her arms (2). Lividity is fixed to the front of her body. At 0006 hrs, the ambient temperature measures 65 degrees and at 0010 hrs, her liver temperature measures 77.2 degrees.



County of Los Angeles, Department of Coroner
Investigator's Narrative



Case Number: 2009-02652

Decedent: TAYLOR, MARILYN

Identification:

The decedent was identified as: Marilyn Ann Taylor, DOB 04/22/52, CII #A07859460, through DOJ fingerprints at 0510 hrs on 04/13/09.

Next of Kin Notification:

According to _____, he and the decedent were divorced and have a _____. The decedent's parents are deceased and she has a brother and a sister. The decedent's sister, _____, was subsequently notified by other family members of the decedent's death.

Tissue Donation:

The decedent is no longer a candidate.

Autopsy Notification:

None requested.

Kelli Blanchard

INVESTIGATOR

SUPERVISOR

4/13/09
Date of Report

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No.

2009-02652

TAYLOR, MARILYN ANN

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RADIOLOGY:

No x-rays are obtained.

WITNESSES:

None.

DIAGRAMS USED:

Diagram Forms 16, 20 and 29 are used during the performance of the autopsy. The diagrams are not intended to be facsimiles.

OPINION:

The cause of death is due to the effect of hemorrhage (bleeding) around the brain due to a ruptured cerebral artery aneurysm, also known as a berry aneurysm. Toxicological examination shows no evidence of drug or alcohol toxicity. The manner of death is natural.


RAFFI S. DJABOURIAN, M.D.
DEPUTY MEDICAL EXAMINER

DATE

5/25/09

RSD:am/jm:c/f
D-04/14/09 @ 1145 hours
T-04/16/09

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AUTOPSY CLASS: ☐ A ☒ B ☐ C ☐ Examination Only DDate 4/14/01 Time 2335 Dr. D. J. JaramilaFINAL ON 5/18/01 By D. J. Jaramila
print printAPPROXIMATE
INTERVAL
BETWEEN
ONSET
AND
DEATH

DEATH WAS CAUSED BY: (Enter only one cause per line for A, B, C, and D)

IMMEDIATE CAUSE

(A) Effects of cerebral hemorrhage Unk

DUE TO, OR AS A CONSEQUENCE OF

(B) Ruptured cerebral artery being aneurysm Unk

DUE TO, OR AS A CONSEQUENCE OF

(C)

DUE TO, OR AS A CONSEQUENCE OF

(D)

Other conditions contributing but not related to the immediate cause of death:

hypertensive heart disease☒ NATURAL ☐ SUICIDE ☐ HOMICIDE
☐ ACCIDENT ☐ COULD NOT BE DETERMINEDIf other than natural causes
HOW DID INJURY OCCUR?WAS OPERATION PERFORMED FOR ANY CONDITION STATED ABOVE: ☐ YES ☒ NO

TYPE SURGERY _____ DATE _____

☐ ORGAN PROCUREMENT☒ TECHNICIAN M. Currier☐ WITNESSES TO AUTOPSY☐ EVIDENCE RECOVERED AT AUTOPSY

Item Description:

56yo CFruptured ACA
cerebral aneurysm
due to atherosclerotic
fatigue

PRIOR EXAMINATION REVIEW BY DME

☒ BODY TAG 101 ☐ CLOTHING
☐ X-RAY (No. _____) ☐ FLUORO
☐ SPECIAL ☐ MED. RECORDS

PROCESSING TAG

☒ AT SCENE PHOTOS (No. 12) 101TYPING BLOOD TAKEN BY _____
SOURCE _____

TOXICOLOGY

☐ NO BLOOD
☐ Embalmed
☐ >24 hr in hospital
☐ Decomposed
☐ Other _____
Reason _____

SPECIMENS

Collected by D. J. Jaramila
☒ HEART BLOOD ☒ STOMACH CONTENT
☒ FEMORAL BLOOD 2 ☐ BRAIN
☐ _____ BLOOD ☐ SPLEEN
☐ _____ BLOOD ☐ KIDNEY
☒ BILE red top ☒ VITREOUS
☒ LIVER ☐ _____
☒ URINE ☐ _____

STORAGE JARS

☒ Regular (No. 2) ☐ Oversize (No. _____)Histopath Cut: ☐ Autopsy ☐ Lab☐ NO TOXICOLOGY REQUESTED

TOXICOLOGICAL ANALYSES ORDERED

SCREEN: ☒ C ☐ H ☐ T ☐ S☐ ALCOHOL ONLY
☐ CARBON MONOXIDE
☐ NEOGEN SCREEN
☐ OTHER (specify drug and tissue) _____

REQUESTED MATERIAL ON PENDING CASES

☐ Police Report ☐ Med History
☒ Fox ☐ Histo
☐ Microbiology ☐ Investigations
☐ Radiology Cons. ☐ Eye Path. Cons.
☐ Consult on _____
☐ Brain Submitted
☐ Neuro Consult ☐ DME to Cut
☐ Criminalistics
☐ GSR ☐ Sexual Assault ☐ Other

Resident

DME

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EXTERNAL EXAM

Sex *Male*
 Race *W*
 Age *46*
 Height *5'8"*
 Weight *163*
 Hair *Black*
 Eyes *Blue*
 Sclera
 Teeth
 Mouth
 Tongue
 Nose
 Chest
 Breasts
 Abdomen
 Scar
 Genital
 Edema
 Skin
 Decub
HEART Wt. *450*
 Pericard *SS* *RV 0.4*
 Hypert *SS* *LV 1.4*
 Dilat *SS* *Septum 1.4*
 Muscle *SS*
 Valves *A7.5 P8 DM 12.2 T5*
 Coronar *11 mm 2.3 2.3 2.3*

AORTA *in*VESSELS *etc*

LUNGS Wt

R *550*
 L *470*
 Adhes *e*
 Fluid *e*
 Atelectasis *SS*
 Oedema *SS*
 Congest *B*
 Consol *e*
 Bronch *SS*
 N. lvs *SS*

PHARYNX *SS*TRACHEA *SS*THYROID *SS*THYMUS *SS*LARYNX *SS*HYOID *SS*

PERITONEUM

Fluid *e*
 Adhes *e*

LIVER Wt *1450*

Caps
 Lobul *if fatty*
 Fibros
 G B *SS*
 Calc
 Bile ducts

SPLEEN Wt *140*

Color
 Consist *e*
 Caps
 Malpig

PANCREAS *e*ADRENALS *e*

KIDNEYS Wt

R *120*
 L *120*
 Caps
 Cortex *SS*
 Vessels *SS*
 Pelvis
 Ureter

BLADDER *SS*

GENITALIA

Prost *SS*
 Testes *SS*
 Uterus *SS*
 Tubes *SS*
 Ovar *SS*

OESOPHAGUS *SS*

STOMACH

Contents

DUOD & SM INT *SS*APPENDIX *SS*LARGE INT *SS*ABDOM NODES *e*

SKELETON

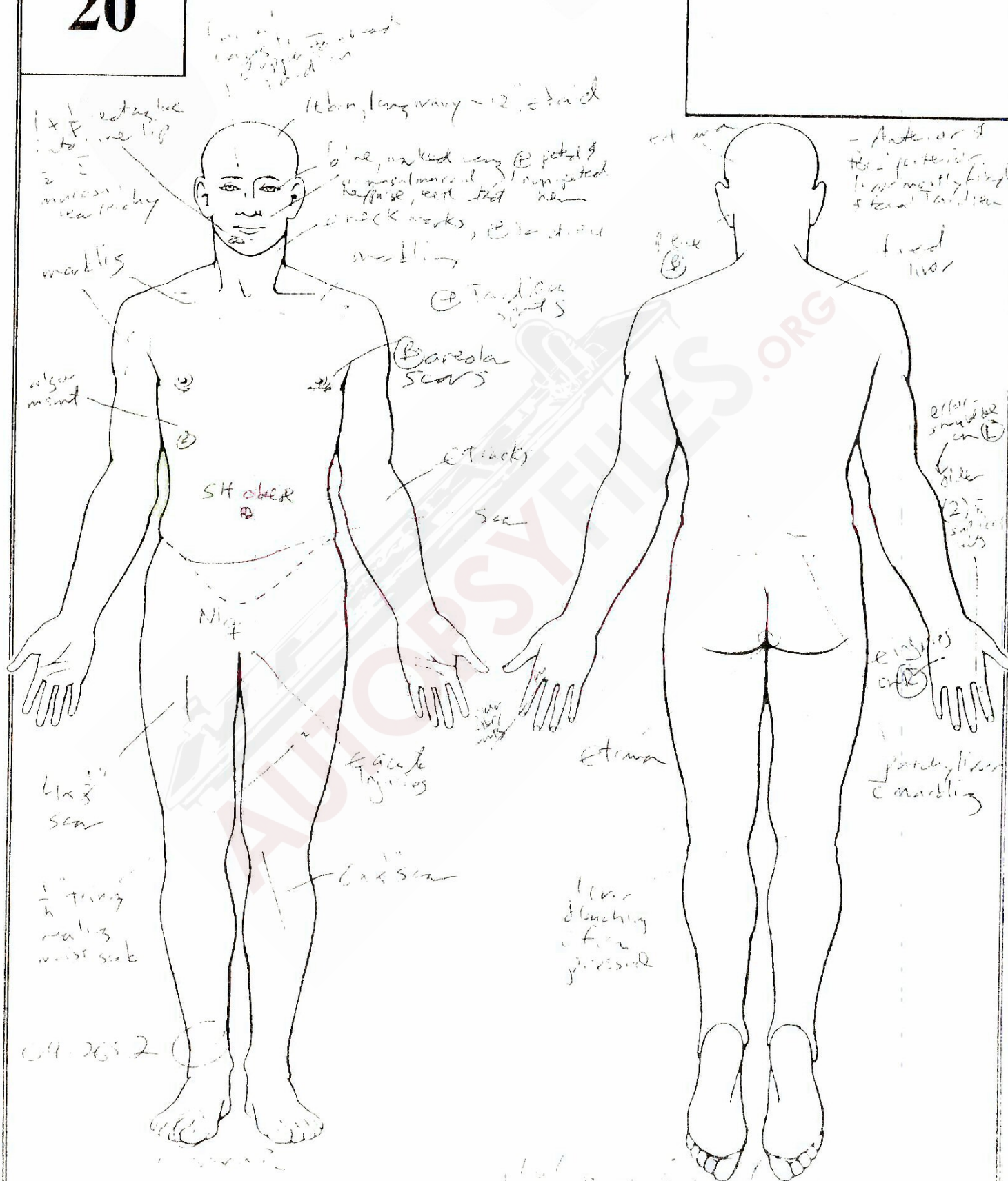
Spine *SS*
 Man. w
 Ribs *SS*
 Hips *SS*
 Feet *SS*

SCALP *SS*CALVARIUM *SS*BRAIN Wt *1250*

Dura *SS*
 Fluid *SS*
 Ventric *SS*
 Vessels *SS*
 Middle ears *SS*
 Other *SS*

PITUITARY *SS*SPINAL CORD *SS*TOXICOLOGY SPECIMENS *SS*SECTIONS FOR HISTOPATHOLOGY *SS*MICROBIOLOGY *SS*DIAGRAMS *SS*X-RAYS *SS*OTHER PROCEDURES *SS*GROSS IMPRESSIONS *SS*

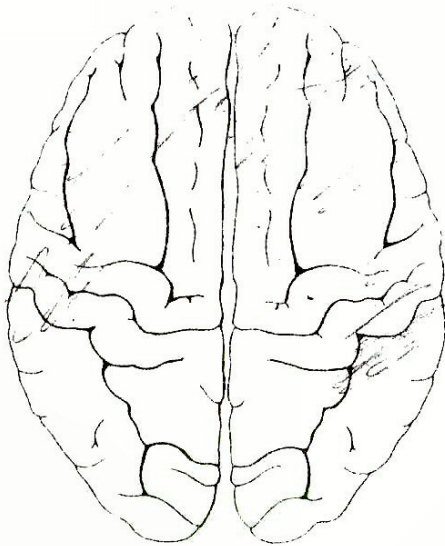
20



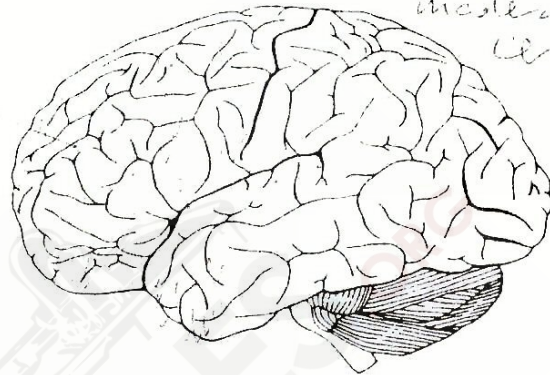
M.D.

Deputy Medical Examiner

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SAH

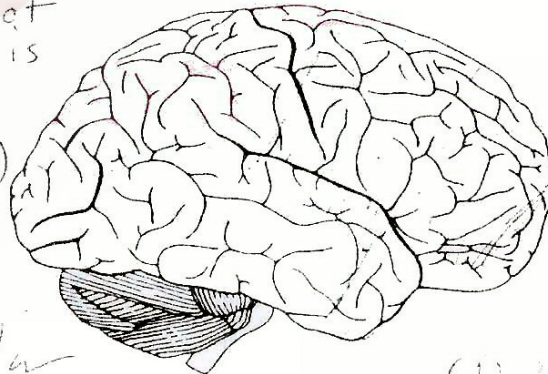


Diffuse, mild to moderate cerebral swelling



SAH

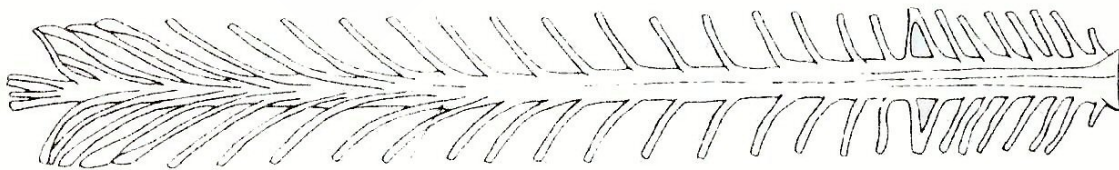
location of aneurysm - Anterior communicating artery, 5mm, with 2mm tear/rupture inferior surface (circle of willis is saved in storage)



SAH

early tonsillar herniation

① 2nd/3rd ventricle hern



Signature
Deputy Medical Examiner M D