OFFICE OF THE MEDICAL EXAMINER

Center for Forensic Medicine Nashville, Tennessee

REPORT OF INVESTIGATION BY COUNTY MEDICAL EXAMINER

Davidson County Medical Examiner: Feng Li M.D., J.D., Ph.D.

Judicial District Number: 20

District Attorney: Honorable Glenn Funk

State Number: 16-19-6481

Case Number: MEC16-3140

Name of Decedent		Age	Race	Date of Birth	Sex	
Ashley Michelle Brown		27 Years	White	12/22/1988	Female	
Address						
8640 Old Charlotte Pike, Pe	egram, TN 37143					
Date of Death	Type of Death	of Death Investigating Age		plaint #:		
12/21/2016 7:37 AM	Suspected Homicide	Me	Metro Nashville Police Dept, Complaint #: 2016-1124879			
Place of Death						
1160 Freightliner Dr., Nash	ville, TN					
Narrative Summary						
911 reports, Metro Nashville F Bixenmann, Hermitage Precin- heading to the dump. This inve- scene was documented via ph		e. Investigator Page business is who and pronounced mination was per	atterson was noti ere garbage truck d death at 07:37 formed. The bod	ified via pager by Detec ks dump their loads befo hours on 12/21/2016. T y was then transported	tive ore he	
Jurisdiction Accepted	Autopsy Ordered	To:	cicology Ordered			
Yes	Yes		Yes			
Physician Responsible for Death Cer	tificate			10		
Feng Li, M.D., J.D., Ph.D.						
Cremation Approved	Funeral Home					
No	I	Woodlawn-Roesch-Patton				
	Woodlawn-Roesch-P	atton				
Cause of Death	Woodlawn-Roesch-P	atton				
Cause of Death Multiple blunt force injuries a		atton				
1		ratton				
Multiple blunt force injuries a		ratton				
Multiple blunt force injuries a		atton				

OFFICE OF THE MEDICAL EXAMINER Center for Forensic Medicine 850 R.S. Gass Blvd. Nashville, Tennessee 37216-2640

CASE: MEC16-3140 County: DAVIDSON

AUTOPSY REPORT

NAME OF DECEDENT: BROWN, ASHLEY MICHELLE RACE: White SEX: Female AGE: 27

DATE AND TIME OF DEATH:

December 21, 2016 at 7:37 a.m.

DATE AND TIME OF AUTOPSY:

December 22, 2016 at 10:35 a.m.

FORENSIC PATHOLOGIST:

Feng Li, M.D., J.D., Ph.D.

COUNTY MEDICAL EXAMINER:

Feng Li, M.D., J.D., Ph.D.

DISTRICT ATTORNEY GENERAL:

Honorable Glenn Funk

PATHOLOGIC DIAGNOSES

Adult white female found in a garbage repository with multiple blunt force injuries and strangulation:

- 1. Multiple blunt force injuries:
 - A. Multiple contusions.
 - B. Multiple abrasions.
 - C. Multiple lacerations/cuts.
 - D. Fracture/dislocation, right ankle.
 - E. Patchy subgaleal hemorrhage.
 - F. Extensive skull fractures.
 - G. Bilateral clavicular fractures.
 - H. Multiple rib fractures and sternal fracture.
 - I. Thoracic vertebral column and lumbar vertebral column fractures.
 - J. Pelvic fractures.
 - K. Hemoaspiration with areas of contusions, both lungs.
 - L. Focal contusion, left edge, tongue.
- 2. Strangulation:
 - A. Numerous petechial hemorrhages, eyelids, conjunctivae and sclerae.
 - B. A layered forensic neck dissection demonstrates multiple small areas of soft tissue and muscle hemorrhage with no palpable neck bone fractures.

(Continued)

3. Other findings:

A. Multiple tattoos.

4. Postmortem toxicologic studies indicate the presence of ethanol in the liver tissue and vitreous fluid.

CAUSE OF DEATH:

Multiple blunt force injuries and strangulation

MANNER OF DEATH:

Homicide

CIRCUMSTANCES OF DEATH:

Assaulted and strangled by other(s)

I hereby certify that I, Feng Li, M.D., J.D., Ph.D., have performed an autopsy on the body of Ashley Michelle Brown on December 22, 2016 at 10:35 a.m. at Center for Forensic Medicine. The purpose of this report is to provide a certified opinion to the County Medical Examiner and District Attorney General. The facts and findings to support these conclusions are filed with the Tennessee Department of Health. The autopsy was performed in the presence of Miguel Laboy, M.D.

EXTERNAL EXAMINATION

The body is that of an adult white female measuring 66 inches and weighing 148-1/2 pounds. The body is normally developed and appears consistent with the given age of 27 years. She is received with purple jacket, gray/black shirt, gray undershirt, pink bra, blue jeans, and two blue socks. Postmortem changes consist of early state of decomposition including skin slippage, fixed posterior livor mortis and minimal rigor mortis.

The scalp hair is brown and long. The corneas are cloudy. The sclerae and conjunctivae are hemorrhagic. The irides are brown. The mouth contains natural teeth. The palate is intact. The ears and mouth show no abnormalities. The neck is of normal configuration and there are no palpable masses. The thorax is symmetrical. The abdomen is flat. The axillae, external genitalia, and anus are without trauma. The extremities are symmetrical and normally developed.

Identifying marks include multiple tattoos, a nose ring, nipple rings, and a belly ring, which are documented by digital photography.

EVIDENCE OF INJURY:

External examination reveals multiple red colored contusions on the top of the forehead, right periorbital bruise, contusion on the nasal bridge, neck, chest, back, and on the extremities. There are multiple lacerations/cuts on the right temple, right jaw, right forearm, and on the back with no evidence of reaction.

There are areas of abrasions on the posterior neck, abdomen, back and on the extremities. The mandible is fractured on the right side. The right ankle shows fracture/dislocation.

Internal examination reveals patchy subgaleal hemorrhage, extensive skull fractures including hinge fractures, patchy subarachnoid hemorrhage, areas of cerebrocortical contusions, bilateral clavicular fractures, multiple rib fractures including all the ribs in multiple places on the right side, left first to third, sixth to twelfth ribs at multiple places, some of which have associated soft tissue hemorrhage, sternal fracture at the third intercostal space level with no apparent associated soft tissue hemorrhage, complete transection of the T12 to L1, patchy pelvic fractures, contusions on both lungs, hemoaspiration of the lungs, and contusion on the left edge of the tongue.

There are numerous petechial hemorrhages on the eyelids, sclerae and inferior palpebral conjunctivae. A layered forensic neck dissection, after removal of the internal organs, demonstrates multiple small areas of soft tissue and muscle hemorrhage with no evidence of palpable bone fractures.

Having been mentioned above, these injuries will not be repeated below, except as needed for clarification.

INTERNAL EXAMINATION

The organs occupy normal positions, and all the internal organs are in a state of autolysis. There are no fluid collections, adhesions, or mass lesions.

HEAD AND NECK: There is no epidural or subdural hemorrhage. The brain weighs 1220 grams. The vasculature overlying the cerebral hemispheres is congested. The structures at the base of the brain, including cranial nerves and large vessels, are intact. Serial sections through the cerebral hemispheres, cerebellum, and brain stem reveal no tumor or evidence of infection.

The structures surrounding the upper airway are intact.

CARDIOVASCULAR SYSTEM: The heart weighs 240 grams. The epicardium is intact and smooth. The coronary arteries arise from unobstructed ostia, follow the usual distributions, and are without significant arteriosclerosis. The cardiac valves are normally formed and the chambers are of usual dimensions. The atrial and ventricular septa are intact. The myocardium is red-brown, firm and unremarkable. The aorta and its major branches are intact.

RESPIRATORY SYSTEM: The right lung weighs 330 grams and the left lung, 240 grams. The pulmonary arteries are without thromboemboli on initial incision into the pulmonary trunk and on dissection. On sectioning, the pulmonary parenchyma is otherwise unremarkable.

pligestive system and liver: The esophagus is unremarkable with a recognizable gastroesophageal junction. The stomach is empty. The duodenum, small intestines and large intestines are unremarkable. The appendix is not identified. The liver weighs 840 grams. It is intact. The parenchyma is red-brown and soft without focal lesions. The unremarkable gallbladder contains approximately 3 cc of bile. The extrahepatic bile ducts are patent and unremarkable. The pancreas is unremarkable.

RETICULOENDOTHELIAL SYSTEM: The spleen weighs 100 grams. There is a normal distribution of unremarkable lymph nodes. The thymus gland is unremarkable.

GENITOURINARY SYSTEM: The right and left kidneys weigh 80 grams and 100 grams,

respectively. The subcapsular surfaces are smooth. The cortices are of normal thickness with sharp corticomedullary junctions. The calyces, pelves, and ureters are patent and unremarkable. The unremarkable urinary bladder is empty.

The internal genitalia consists of a uterus, cervix, ovaries and fallopian tubes. They are appropriate for age. There is no evidence of pregnancy.

ENDOCRINE SYSTEM: The pituitary, thyroid, parathyroid, and adrenal glands are unremarkable.

MUSCULOSKELETAL SYSTEM: The musculoskeletal system is unremarkable.

TOXICOLOGY: The following specimens are submitted for possible toxicologic analysis: blood, liver, bile, and vitreous humor. A separate report will be issued.

SUMMARY OF CASE

This 27-year-old white female later identified as Ashley Brown was discovered deceased in a garbage repository on December 21, 2016. An autopsy was performed on December 22, 2016.

Major autopsy findings include an adult white female with multiple contusions, abrasions, lacerations/cuts, fracture/dislocation of the right ankle, numerous petechial hemorrhages, scleral hemorrhage, and multiple tattoos upon external examination. Internal examination reveals patchy subgaleal hemorrhage, extensive skull fractures, patchy subarachnoid hemorrhage, areas of cerebrocortical contusions, multiple fractures including bilateral clavicles, multiple ribs, sternum and pelvis, hemoaspiration and contusions of the lungs, and contusion of the left edge of the tongue. A layered forensic neck dissection reveals multiple small areas of soft tissue and muscle hemorrhage with no palpable neck bone fractures.

Based upon the circumstances surrounding death, as currently known, the cause of death is multiple blunt force injuries and strangulation. The manner of death is homicide.

Electronically signed by Feng Li, M.D., J.D., Ph.D. on Thursday, March 23, 2017

Feng Li, M.D., J.D., Ph.D. Senior Associate Medical Examiner

FL/pc

T: 12/31/2016

LABORATORY REPORT



Client Information

Client: Forensic Medical - Nashville

Report To: Dr. Feng Li

Forensic Medical-Nashville 850 RS Gass Blvd Nashville, TN 37216

Case / Sample Information

Specimen ID: 4633807

Workorder ID: 61215

Client Case ID: 16-3140 Brown, Ashley

Reason for Test: Postmortem

Specimen Type: Liver

Collected: 12/22/2016 11:00 Received: 12/23/2016 15:00

Reported: 12/31/2016 16:45

Test(s) Performed

70511 - Confirmation Amphetamines	40579 - Profile- Comprehensive Tissue	70251 - Confirmation Volatiles		
Tested For	Result	Quantitation	Reporting Threshold	
Alcohol - Volatiles	POSITIVE		10 mg/100g	
Ethanol	POSITIVE	121 mg/100g	10 mg/100g	
Methanol	NEGATIVE		10 mg/100g	
Acetone	NEGATIVE		10 mg/100g	
Isopropanol	NEGATIVE		10 mg/100g	
Amphetamines	NONE DETECTED		150 ng/g	
Amphetamine	NONE DETECTED		150 ng/g	
Methamphetamine	NONE DETECTED		150 ng/g	
MDA	NONE DETECTED		150 ng/g	
MDEA	NONE DETECTED		150 ng/g	
MDMA	NONE DETECTED		150 ng/g	
Phentermine	NONE DETECTED		150 ng/g	
para-Methoxyamphetamine	NONE DETECTED		150 ng/g	
CNS Stimulants	NONE DETECTED		50 ng/g	
Barbiturates	NONE DETECTED		600 ng/g	
Sedatives/Hypnotics	NONE DETECTED		200 ng/g	
Methadone	NONE DETECTED		100 ng/g	
Benzodiazepines	NONE DETECTED		15 ng/g	
Cocaine Metabolite	NONE DETECTED		100 ng/g	
Opiates	NONE DETECTED		100 ng/g	
Synthetic Narcotics	NONE DETECTED		100 ng/g	
Phenothiazines	NONE DETECTED		10 ng/g	
Tricyclic Antidepressants	NONE DETECTED		150 ng/g	
Atypical Antidepressants	NONE DETECTED		6 ng/g	
Antipsychotics	NONE DETECTED		1 ng/g	
Dextromethorphan	NONE DETECTED		100 ng/g	
Miscellaneous	NONE DETECTED			

I certify that the specimen identified by this accession number has been handled and analyzed in accordance with all applicable requirements.

* Examiner: Missy Mathis, M.S.

Date: 12/31/2016



*Electronic Signature represented by plain textual name and date of when individual applied Electronic Signature Certification in Aegis LIMS.

Aegis CRIMES® is an ASCLD/LAB-International Accredited Laboratory Since September 7, 2013 (Cert # ALI-292-T).

pr 1-4-17

LABORATORY REPORT



Client Information

Client: Forensic Medical - Nashville

Report To: Dr. Feng Li

Forensic Medical-Nashville 850 RS Gass Blvd Nashville, TN 37216

Case / Sample Information

Specimen ID: 4633808

Workorder ID: 61215

Client Case ID: 16-3140 Brown, Ashley

Reason for Test: Postmortem

Specimen Type: Vitreous

Collected: 12/22/2016 11:00

Received: 12/23/2016 15:00 Reported: 12/31/2016 16:45

Test(s) Performed

40405 - Alcohol/Volatiles

Tested For	Result	Quantitation	Reporting Threshold
Alcohol - Volatiles	POSITIVE		10 mg/dL
Ethanol	POSITIVE	52 mg/dL	10 mg/dL
Methanol	NEGATIVE	ŭ	10 mg/dL
Acetone	NEGATIVE		10 mg/dL
Isopropanol	NEGATIVE		10 mg/dL

I certify that the specimen identified by this accession number has been handled and analyzed in accordance with all applicable requirements.

* Examiner: Missy Mathis, M.S.

Date: 12/31/2016



1-4-17