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69-8860

OFFICE OF CHIEF MEDICAL EXAMINER-CORONER

Dote AUGUST 4, 1969 Time 11:30 AM

I performed on autopsy on the body of ROSEMARY LA BIANCA

of OFFICE OF CHIEF MEDICAL EXAMINER-CORONER, HALL OF JUSTICE, LOS ANGELES, and from the anatomic findings and pertinent history I ascribe the death to:

> MULTIPLE STAB WOUNDS TO NECK AND TRUNK CAUSING MASSIVE HEMORRHAGE.

> > PINAL: September 16, 1969

ANATOMICAL SUMMARY

- I. MULTIPLE STAB WOUNDS TO NECK AND TRUNK:
 - Perforation of lung. Α.
 - в.
 - Perforation, stomach. Laceration of cervical spinal cord. Laceration of spleen.

SUMMARY OF INJURIES:

Multiple stab wounds of the neck and trunk are present, of which most are on the back, 22 on the upper portion of the back, and 14 on the lower portion. In addition, four are present on the anterior portion of the trunk, and one at the lower margin of the right mandible. The major ones are enumerated as follows:

At the posterior neck, 9 inches from the vertex, slightly to the left of midline, pointing somewhat downward and to the right of the deceased in a downward direction, entering the cervical spinal canal at the junction of the 2nd and 3rd cervical vertebrae and lacerating the spinal cord at that level, causing approximately 2/3 complete transection. This wound is considered fatal.

Major wounds #2,#3,#4, and #5 are on the left side of the back at 9-1/2, 11-1/2, 13, and 19 inches from the vertex, respectively. These lacerations are up to 1 inch in maximum length and approximately 1/8 to 3/16 of an inch in width, has a somewhat hemorrhagic connective tissue surrounding, goes through the intercostal spaces at these levels: the 1st intercostal space, the 4th intercostal space, the 6th intercostal space, and the 10th intercostal space, then penetrating into the lung for distances up to 2-1/2 to 3 inches. Major and minor blood vessels transected as demonstrated by water injection of the vessels. Total depth of penetration of these wounds from skin surface is from 4-1/2 to 5-1/2 inches in total depth. These wounds are considered inevitably fatal.

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Wounds #6 and #7 are on the right back at 11 and 13-1/2 inches from the vertex, respectively, perforates the 6th and the 9th intercostal space, penetrates to depth of 4-1/2 inches from skin, penetrating the lung parenchyma with transection of major and minor vessels as demonstrated by water injection. These wounds are considered inevitably fatal.

Wound #8 is on the left breast just above and lateral to the nipple, approximately 1 inch in length, goes downward through the lower lobe.

In addition to the lung perforation of wound #5, the diaphragm and stomach has also been perforated. A small laceration of spleen is also sustained. Portions of the stomach are herniated into the thoracic cavity, and a slight spill of stomach contents is also present.

Two moderately deep stab wounds are present in the upper midback, one near the midline and one approximately 5 inches to the right of the midline, and penetrate to depths of approximately 5 to 5-1/2 inches and pointed downward and to the right at approximately 45 degrees. These do not penetrate into the abdominal or thoracic spaces.

On the lower portion of the posterior trunk, numerous lacerations - stab wounds whose depths are up to 1-1/2 inches and approximately 3/4 to 1 inch in maximum width. However, these do not show any significant hemorrhage into the connective tissue surrounding. Also present are linear lacerations, very superficial, from 5-7 inches in length, with the lines going from left to right in a downward direction. The abdomen also shows several relatively superficial stab wounds into the connective tissues only, up to 4 inches in maximum depth.

The laceration of the jaw is relatively superficial, extends approximately 1-1/2 inch to 2 inches.

EXTERNAL EXAMINATION:

m

The unembalmed body is that of a Caucasian female who is partially clothed in a blue striped dress-like housecoat with a faint orange gown. The hands are presently in celophane bags. There appears to be pink enamel-like material on the fingernails. The head is covered with a pillowcase type material and a rather loose electric cord ligature is present around the neck. The anterior portion of the orange gown does show slash marks. There is a moderate amount of blood present on the clothing. The toes are also coated with an orange nail polish.

After removal of the outer garments and the hood and the ligature, numerous stab wounds are noted as indicated in the Summary of Injuries above. Large amounts of blood pours out from the wounds in the posterior back, especially in the upper portion. No surgical scars are presently recognizable. The hair is

3

brownish, the eyes are hazel. The teeth are in good condition. The external genitalia are female. The mouth and tongue show no recognizable injury. Small abraided areas are present on the right wrist area. These have a somewhat ecchymotic appearance. The height is 66 inches, and the weight is approximately 128 pounds, and the age appears to be that stated of 38. The skin shows no recognizable abnormality. There is no edema present.

INTERNAL EXAMINATION

INCISION:

The usual Y-shaped incision is employed. The organs appear generally in their usual position. A small portion of stomach is herniated into the thoracic cage on the left. A small amount of blood is present in the tracheobronchial tree and in the oral pharynx.

RESPIRATORY SYSTEM:

The trachea and bronchi contain a moderate amount of bloody material. The lungs weigh 450 grams on the right and 470 grams on the left. Stab wounds as noted previously are noted on both sides with slight hemorrhage into the connective tissue surrounding. There is no recognizable consolidation or evidence of edema. The pulmonary vessels are transected in the peripheral portions by the stab wounds. There is no recognizable tumor.

CARDIOVASCULAR SYSTEM:

The aorta and its branches show no significant atherosclerosis. The heart weighs 290 grams, lies within a smooth pericardial sac. The epicardial and endocardial surfaces are smooth. The cardiovascular spaces are almost completely empty of blood. There is no hypertrophy or dilatation. The coronary arteries show no significant atherosclerosis. The valve appearances and sizes are grossly normal. Cut surfaces of myocardium show no recognizable old, recent, or fresh infarct. The venous system appears grossly normal.

HEMIC AND LYMPHATIC SYSTEM:

The abdominal and mediastinal nodes are not significantly enlarged. The spleen weighs approximately 120 grams, shows a small laceration on the lateral, superior aspect. The capsule is wrinkled. The spleen has a softened parenchyma that is rather pale reddish in color. The vertebral marrow is red-brown in color.

h

DIGESTIVE SYSTEM:

The esophagus shows no recognizable abnormality. The stomach shows several through and through lacerations up to 1-1/2 cm in length. A small amount of granular material is present in the stomach. The small bowel, appendix, and colon are grossly normal.

The pancreas has the usual lobular yellow-tan appearance, shows early postmortem autolytic changes.

The liver weighs 1200 grams, has a smooth capsule. The parenchyma is markedly decongested, shows early postmortem changes, with no accentuation of lobules or fibrosis. The gallbladder and biliary tree are grossly normal.

UROGENITAL SYSTEM:

The kidneys weigh approximately 120 grams each, have easily stripped capsules with cortices up to 4-5 mm in thickness. The pelves, ureters, and urinary bladder are grossly normal. The uterus is approximately 8x6x6 cm, has an endometrium approximately 3-4 mm in thickness. The uterine tubes and ovaries are grossly normal.

ENDOCRINE SYSTEM:

The adrenals show no recognizable abnormality in size, shape, color, or location. The thyroid weighs approximately 25-30 grams. The pituitary shows no gross abnormality.

SKULL AND CENTRAL NERVOUS SYSTEM:

The scalp, calvarium, and dura are free of evidences of hemorrhage or other injury. The brain weighs 1450 grams. The arteries at the base show no significant atherosclerosis. Uncinate shows minimal grooving. There is slight herniation of cerebellar tonsils. Multiple sections through cerebrum, cerebellum, midbrain and pons show no recognizable hemorrhage, infarct, or neoplasm. The ventricular system is slightly diminished in size.

The spinal cord is removed by the anterior approach, and there is a rather extensive area of laceration, somewhat transverse, approximately 2/3 of the cross sectional area being involved at the C level of Vertebrae C-2 and C-3.

MUSCULOSKELETAL SYSTEM:

No gross deformities of the extremities are noted. No evidence of defense marks are noted on the hands.

Brok

5

The thoracic and lumbar vertebrae show no gross abnormality. The ribcage shows no recognizable fractures.

SPECIMENS:

A specimen of blood, liver, bile, urine and kidney are submitted for toxicology study.

SECTIONS:

Routine hold sections are taken.

NOTE

Sargeant Knuckles from Central Homicide present for autopsy.

DAVID M. KATSUYAMA, M.D. DEPUTY MEDICAL EXAMINER

DMK:AMJ::G 9/17/69

44 X 7: 4



File 1 69-8860

OFFICE OF CHIEF MEDICAL EXAMINER-CORONER

Date AUGUST 4, 1969 Time 11:30 AM

I performed an autopsy on the body of ROSEMARY LA BIANCA

at OFFICE OF CHIEF MEDICAL EXAMINER-CORONER, HALL OF JUSTICE, LOS ANGELES,

and from the anatomic findings and pertinent history I ascribe the death to:

MULTIPLE STAB WOUNDS TO NECK AND TRUNK CAUSING MASSIVE HEMORRHAGE.

FINAL: September 16, 1969

SUPPLEMENTAL REPORT

A supplemental report is issued on this 5th day of December, 1969, to correct the following error in the autopsy protocol.

SEE PAGE 1, 2, 3, 4 and 5:

ERROR:

Autopsy Protocol dated August 4, 1969

CORRECTION: Should read: August 11, 1969

DAVID M. KATSUYANA, M.D. DEPUTY MEDICAL EXAMINER

DMK:C 12/5/69

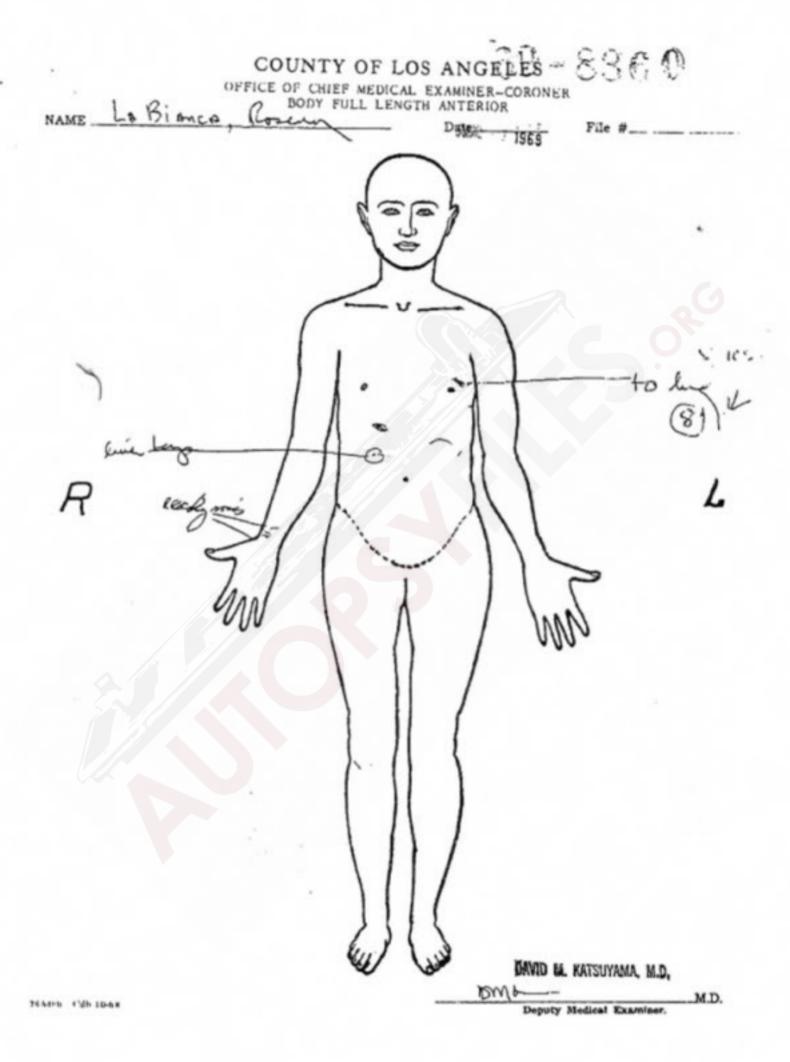
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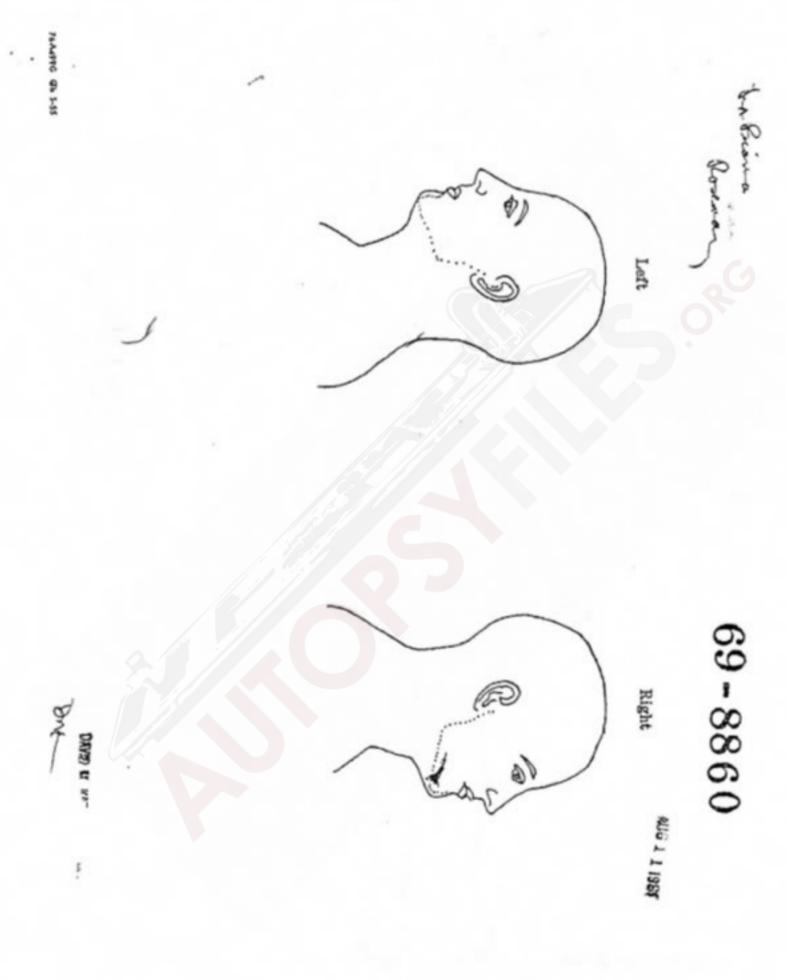
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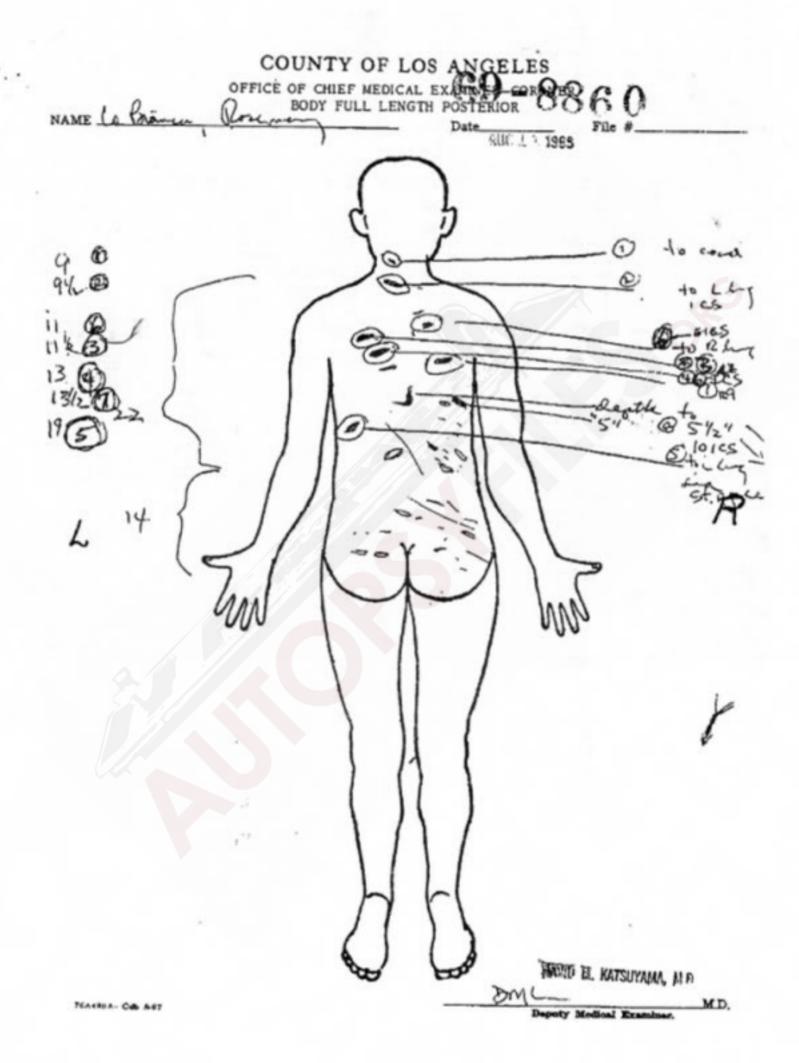
OFFICE OF CHIEF MEDICAL EXAMINER-CORONER 60

AUTOPSY CHECK SHEET

	AUTOPSY CHECK S	SHEET
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THYROID		Du C
THYMUS		Deputy Medical Examiner







TERMOA-TOX 4- C4 (14)

REPORT OF CHEMICAL ANALYSIS. LOS ANGELES COUNTY MEDICAL EXAMINER-CORONER

Toxicology Laboratory
Hall of Justice
Los Angeles, California

	97 . NA	File	No 69-886	50
Name of Deceased	Rosemary LaBina	ÓR	Lab No.	8-216-69
Date Submitted	August 12, 1969	Time	8 A.M.	
Autopsy Surgeon	D. Katsuyama, M	.D.		
Material Submitted:	Blood X Li	ver X	Stomach X	
1	Brain Lu	ing	Lavage	
1	Femur Spi	leen	Urine	
	Kldney X Ste	eraun	Gall bledder	
	Druga Ch	semicals	Bile x	*

Test Desired: Ethanol

Laboratory Findings

Blood: Ethanol absent

Examined By I R.R. Thompson

Box Toxicologist Date August 18, 1969

... . 3E., ...

REPORT OF MICROBIOLOGICAL ANALYSIS CHIEF MEDICAL EXAMINER-CORONER'S OFFICE Bacteriology Laboratory Hall of Justice Los Angeles, California

	File No. 09-8860
Name of Deceased	December 1 - Disease
Name of Deceased	RoseLary La Blanca
Date Submitted	8/11/69
Autopsy Surgeon	D. Aatsuyama, M.D.
Material Submitted_	Vaginal smear for spermatozoa and acid
phosp	hatase.
Laboratory Findings	: /3///
	Acid phosphatase reactive 2/.
	Positive control reactive 4/.
	Negative control nonreactive.
	No spermatozoa found on smear.
1	
Examined By Role	rich S. Lupe Date 8/15/09

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Assigned to Dr.	west yetem	Inquest Deputy	Z.,	Deput

COUNTY OF LOS ANGELES

Leon La Bianca

Name: Rosenary La Bianca

MEDICAL REPORT

Case No. 69-8860

Dr. _______

CONTINUATION SITEET

Department received call from Sgt. D. Galindo, L.A.P.D. Homicide Detail in the early afternoon, requesting the information re above cases:

Radio log shows activity of Mike 24 on August 11, 1969 as follows

10-8 at 0328 from Hall of Justice Code 6 at 0345 at 3301 Waverly Dr., Los Angeles 10-8 at 0458 from 3301 Waverly Dr., Los Angeles Code 6 at 0510 at Hall of Justice

> D. Drynan Act. Chief, Inv. Div.

69-8860		diser:	Rosemary LaBianca
			9F 972 112 13 19 11 15/2
HICUS - THE WESTERS	EZAB GSW		
Back - Upper	22		#1, 2, 3, 4, 5, 6, 7; two (2) moderately deep upper mid back; + 14 not numbered or described.
Back - Lower	14		3/4 to 1" wounds, described but not numbered; some post mortem.
Anterior Trunk	3		Not numbered - indicated on autopsy body chart
Left Breast	1		18 June
Right Lower Jaw	1		1 1/2 - 2"-described- numbered
TOTAL:	41	1/2/1/19	
SHMMARY OF HOUNDS:	41 stab w abrasi		

FATAL WOUNDS;

11. 2. 3. 4. 5. 6. 7. 8

NOUMER NOT DOCUMENTED:

All wounds documented: numbered, described or charted.

0 1	- OFFICE	NTY OF LOS AN OF CHIEF MEDICAL EXAMINER		MED	ICAL REPO
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COUNTY OF LOS ANGELES DEPARTMENT OF CHIEF MEDICAL EXAMINER-CORONER PRELIMINARY EXAMINATION REPORT

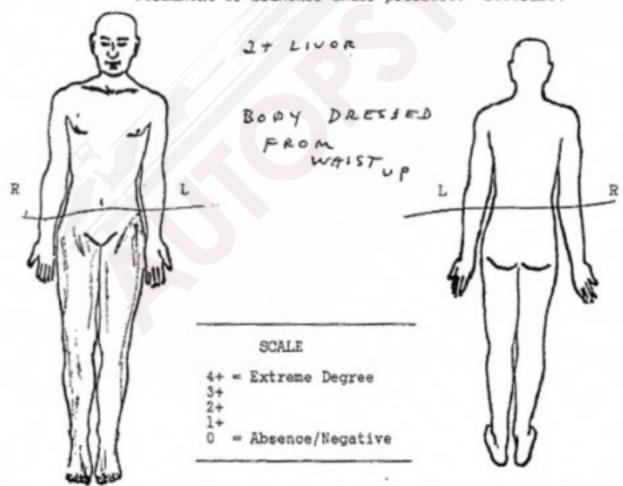
Name ROSEMARY LA	BIANCA Case No. 69-8860
RIGOR MORTIS:	TEMPERATURE: ENVIRONMENT TEMPERATURE = 74 F
Anterior flexion Posterior flexion Right lateral flexion Left lateral flexion JAW: SHOULDER: ELBOW: WRIST: Z HIP: ANKLE: WRIST: Z ANKLE:	DATE $8-11-69$ TIME $3\frac{5}{2}$ PM LIVER TEMPERATURE = $8\frac{4}{9}$ F WHERE TAKEN $4+5$ CENE At DATE $8-11-69$ TIME 3 E PM $\frac{3}{2}$ DATE $8-11-69$ TIME 3 E PM $\frac{3}{2}$

LIVOR MORTIS:

Use shading on diagrams to illustrate location.

Describe intensity of coloration. (use scale)

Permanent or blanches under pressure? Describe.



Remarks:

Jahn c. Vondra Groner's Investigator Date 8-11-69 Time 7 19 AM