



Hamilton County Coroner

The Frank P. Cleveland, M.D. Institute of Forensic Medicine, Toxicology and Criminalistics
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DANA RHODEN

CC16-01420

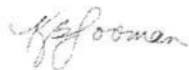
OPINION

Diagnoses:

1. Multiple gunshot wounds to the head and neck:
 - a. Gunshot #1 – single, intermediate-distance, penetrating gunshot wound to the head:
 - 1) Entrance: Right lateral forehead
 - 2) Path: Scalp, bone, brain and epidural space
 - 3) Projectile: Deformed, lead bullet recovered from epidural space inferior to brain
 - 4) Direction of fire through body: Front to back and downward.
 - b. Gunshot #2 – single, indeterminate-distance, penetrating gunshot wound to the head:
 - 1) Entrance: Right mid forehead
 - 2) Path: Scalp, bone, brain and epidural space
 - 3) Projectile: Deformed lead bullet recovered from epidural space inferior to brain
 - 4) Direction of fire through body: Front to back and downward.
 - c. Gunshot #3 – single, indeterminate-distance, penetrating and perforating gunshot wound to the head:
 - 1) Entrance: Mid forehead
 - 2) Path: Keyhole defect, scalp and bone
 - 3) Direction of fire through body: Upward.
 - d. Gunshot #4 – single, indeterminate-distance, penetrating gunshot wound to the head:
 - 1) Entrance: Right temple
 - 2) Path: Scalp, bone, brain and bone
 - 3) Projectile: Deformed lead fragment partly embedded into left temporal bone
 - 4) Direction of fire through the body: Right to left.
 - e. Gunshot #5 – single, intermediate-distance, penetrating gunshot wound to the head and neck:
 - 1) Entrance: Right lateral neck, along jaw line (with stippling and possible soot)
 - 2) Path: Skin, soft tissue, muscle and right mandible with fracture
 - 3) Projectile: Two deformed lead bullet fragments recovered from along jaw line
 - 4) Direction of fire through the body: Right to left.

- f. Minute lead fragments recovered from brain
 - g. Subgaleal and subarachnoid hemorrhage
 - h. Comminuted fractures of skull
 - i. Brain lacerations and perforations
 - j. Two possible bullet strikes along left temporal bone.
2. Postmortem toxicology:
- a. Presence of caffeine
 - b. Negative for drugs and alcohol.

Cause of Death: It is my opinion, based on the autopsy findings and the information available to me at the time of the autopsy that the cause of death is multiple gunshot wounds to the head and neck.



Karen Looman, D.O.

Chief Deputy Coroner, Forensic Pathologist
Hamilton County, Ohio

7/11/2016

Date

AutopsyFiles.org
UNCOVERING THE CAUSE OF DEATH

**POSTMORTEM EXAMINATION
OF THE BODY OF**

DANA RHODEN

A postmortem examination of the body identified by Pike County Coroner's Office as "Dana Rhoden" is performed at the Hamilton County Coroner's Office on Saturday, April 23, 2016 at 1:30 p.m. by Dr. Karen Looman. The morgue attendants are Tony Kimble and Tyrone Smith. Agent William J. Jones Jr. from BCI (Ohio Bureau of Criminal Identification and Investigation) attended the autopsy.

HISTORY:

The decedent is a 37-year-old white female who was found deceased in her home with gunshot wounds.

EXTERNAL EXAMINATION

GENERAL:

The body is that of a normally developed, obese, adult female who is 215 pounds, 66-inches in height, and appears appropriate for the stated age. The body mass index (BMI) is 34.7 kilograms per meter squared with the normal range between 18.5 and 24.9 kilograms per meter squared. The body is cool to the touch due to refrigeration. Rigor mortis is absent. Livor mortis is red and in a posterior distribution except over areas exposed to pressure.

The scalp hair is short, slightly curled and light to dark brown. The right lateral sclera has hemorrhage. Otherwise the sclerae are free of petechia, icterus or hemorrhage. The irides are brown. The mouth has native dentition. The chest has a normal anteroposterior diameter without costal margin flaring. The breasts are free of palpable masses. The abdomen is protuberant with pannus folds and striae around the waistline. The external genitalia are normal for an adult female. The spine is straight. The pelvis is stable to manipulation. The extremities are not edematous and are free of dysmorphic features. Both hands are covered with brown paper bags. The fingernails are short and clean. There is chipped pink nail polish on the toenails. An identification tag within name "Dana Rhoden" is on the right great toe.

CLOTHING:

The body is dressed in a pair of white underwear and an off-white-black-red night gown.

SCARS/TATTOOS:

The medial left leg has a series of interrupted longitudinal scars extending from the distal right thigh to the right ankle. There is a linear scar along the lateral right ankle. Three short straight scars are across the left knee.

The left upper chest has multicolored stars with curled lines. The left upper back has a green star surrounded by the words "beautiful disaster". The right upper lateral arm has a multicolored blue flower. The volar right wrist has the words "love the life you live, live the life you love" in an infinity design. The left volar wrist has "believe" with two stars. The proximal lateral right

lower leg has multicolored flowers and a red skull. There is a tattoo of a beaded anklet on the right ankle. The dorsum of the right foot has three multicolored stars. The lateral left lower leg has a multicolored butterfly and the word "forever" with a heart on the dorsum of the left foot.

MARKS OF THERAPY:

None.

EVIDENCE OF INJURY:

There are multiple gunshot wounds to the head, five, with seven deformed lead bullet fragments recovered. The wounds are numbered for convenience and do not indicate the order in which they were inflicted.

Gunshot wound #1 is a single, intermediate-distance, penetrating gunshot wound to the head. Entrance: Right lateral forehead, consisting of a 1/8-inch round defect with a 1/8-inch concentric abrasion collar, located 3-inches from the top of the head, 2-1/4-inches right of midline and 1-1/4-inches posterior to the glabella. Possible faint stippling, up to 1/2-inch from the defect along the 7 to 9 o'clock margin is present but no soot. Path: Scalp, bone, right frontal lobe in a superior to inferior direction and epidural space. Projectile: Deformed lead bullet recovered from the epidural space in the skull, displaced from final position by manipulation of the brain. Direction of fire through the body: Front to back and downward.

Gunshot wound #2 is a single, indeterminate-distance, penetrating gunshot wound to the head. Entrance: Right mid forehead, consisting of a 1/8-inch round defect with a 1/8-inch wide concentric abrasion collar that is dried and blackened and without soot or stippling on the skin, located 3-1/8-inches from the top of the head, 1/2-inch right of midline and even with the glabella. Path: Scalp, bone, right frontal lobe in a superior to inferior direction and epidural space. Projectile: Deformed lead bullet recovered from the epidural space below the right frontal lobe, displaced from final position by manipulation of the brain. Direction of fire through the body: Front to back and downward.

Gunshot wound #3 is a single, indeterminate-distance, penetrating and perforating (keyhole) gunshot wound to the head. Entrance/Exit: Mid forehead, consisting of a 1-1/2-inch mid-sagittal, linear defect that gapes to 1/4-inch wide with a 7/8-inch long dried abrasion collar from the 3 to 9 o'clock margin and minute 1/8-inch lacerations at the 12 o'clock margin and without soot or stippling on the skin, located 3-1/2-inches from the top of the head, at the midline and even with the glabella. Path: Scalp and bone in a shallow keyhole defect with the exit superior (See Skull and Subgaicula section). Direction of fire through the body: Upward.

Gunshot wound #4 is a single, indeterminate-distance, penetrating gunshot wound to the head. Entrance: Right temple, consisting of a 1/8-inch round defect with an eccentric 1/8-inch abrasion collar at the 4 o'clock margin that is dried and blackened and without soot or stippling on the skin, located 4-inches from the top of the head, 2-3/4-inches right of midline and 2-3/4-inches posterior to the glabella. Path: Scalp, bone, brain and bone. Projectile: Deformed, lead fragment recovered from being partially embedded in the left temporal bone of skull. Direction of fire through the body: Right to left.

Gunshot wound #5 is a single, intermediate-distance, penetrating gunshot wound to the head and neck. Entrance: Right lateral neck, along jaw line, consisting of a 1/8-inch round defect with a 1/8-inch wide eccentric abrasion collar at the 3 o'clock margin, with a possible focus of unburned black-gray gunpowder within the 3 o'clock margin, and with an area of red stippling 1-1/4-inches anterior to the defect and 1/2-inch posterior to the defect. This wound is located 8-1/4-inches from the top of the head, 2-1/2-inches right of midline and 3-inches posterior to the glabella. Path: Skin, soft tissue, muscle and right mandible with fracture. Projectiles: Two deformed lead fragments are recovered from along the jawline. Direction of fire through the body: Right to left.

Several other small, deformed lead fragments are recovered from the brain.

Other Injuries: Both periorbital regions have red-purple-yellow-brown subcutaneous hemorrhages. The right lateral sclera has hemorrhage as previously described. There is blood coming from the ears and nose.

X-RAYS:

Films of the head and upper chest are taken.

INTERNAL EXAMINATION

SEROUS CAVITIES:

There are no fluid collections or adhesions within the pleura, peritoneum or pericardium.

NECK ORGANS:

There are no injuries to the strap muscles, hyoid bone or thyroid cartilage. The thyroid gland is congested and purple. Upon sectioning, there are no focal lesions.

HEART:

The heart is 420 grams. The expected weight based on a lean body weight of 159 pounds is 360 grams. The coronary arteries arise normally and are right-sided dominant. There is no coronary artery disease. The myocardium is red, firm and without scars. The septa are intact. The foramen ovale is sealed. The left ventricular wall is concentric. The valves are thin, delicate, and unremarkable.

AORTA:

The aorta is free of fatty streaks plaques or calcifications. There is red hemolytic staining along its length.

LUNGS:

The right lung is 450 grams, and the left lung is 430 grams. The tracheobronchial tree is free of fluid, foam or obstruction. Both lungs are normally aerated. There is mild anthracotic pigment across the surfaces. Upon sectioning, there is mild pulmonary edema that exudes from the cut surfaces. There are no focal lesions.

LIVER AND GALLBLADDER:

The liver is 1,575 grams. The capsule is intact and covers a red-brown parenchyma. Upon sectioning, there are no focal lesions. The gallbladder contains 5 milliliters of yellow bile. The velvety mucosa has cholesteatosis. There are no stones in the lumen.

SPLEEN:

The spleen is 170 grams. The capsule is intact and covers firm, dark red parenchyma. The inferior margin of the spleen has a cystic lesion suggestive of a hemangioma. The white pulp is easily visualized and is unremarkable.

PANCREAS:

The pancreas has a normal tan-brown, lobulated architecture without focal lesions.

ADRENAL GLANDS:

The glands have yellow cortices and tan medullae without focal lesions.

GASTROINTESTINAL TRACT:

The tongue is atraumatic. The esophagus is patent. The gastroesophageal junction and gastric mucosa are autolytic. There are no rugal folds present. The stomach contains 50 milliliters of tan fluid with white food fragments. The small and large intestines are distended with gas. The appendix is present.

KIDNEYS:

The right kidney is 170 grams, and the left kidney is 175 grams. Both capsules strip with ease from each pale, smooth cortical surface. Upon bisection, the calyces are patent and free of stones or hydronephrosis.

BLADDER:

The bladder contains scant yellow urine. The mucosa is light tan and unremarkable.

GENITALIA:

The uterus, Fallopian tubes and ovaries are present. The uterus is small in size. The serosa, endometrium and myometrium are light tan and free of lesions. The Fallopian tubes are pink-purple and uninterrupted. The ovaries are boggy and upon sectioning have multiple normal follicles.

BRAIN AND MENINGES:

The brain is 1,270 grams. There is no epidural or subdural hemorrhage. There is thin, diffuse, red-purple subarachnoid hemorrhage present. There are bullet perforations through the right frontal lobe and lacerations of the inferior frontal lobe surface. The inferior midline of the frontal lobe, slightly more to the left has surface lacerations but no bullet perforation. A bullet perforation passes through both temporal lobes. The leptomeninges have been perforated by bullets but are thin and free of purulent exudate. The cranial nerves and vessels have been disrupted. Upon sectioning, the cortical ribbon is thin and even. There are lacerations across the

temporal lobes and superior to inferior through the right frontal lobe. There are no other lesions within the white matter or deep gray nuclei. The brain stem and cerebellum are free of hemorrhage and upon sectioning have no focal lesions.

SKULL AND SUBGALEA:

There is a fracture line across the frontal bone with a keyhole defect in the mid frontal bone. The superior aspect of the round hole has external beveling and lead wipe. The inferior aspect is scalloped with internal beveling of the bone edge. Adjacent and part of the right frontal bone fracture line is a partial bullet defect from bullet #2 with internal beveling and bullet wipe on the external surface. Two other bullet defects are in the right frontal bone and right parietal bone each with discoloration suggestive of bullet wipe. There are linear fractures across both right and left frontoparietal bones. The left mid parietal bone has a roughly square focus of fracture with a deformed lead bullet partially embedded in the center of the internal periosteum. There are two possible bullet strikes with scant residual lead on the bone on the left anterior and posterior parietal bone. There are comminuted fractures of the left orbital plate and cribriform plate. A hinge fracture is across the sella turcica and linear fractures extend laterally across the temporal bones. The right lateral mandible is fractures.

There are purple subgaleal hemorrhages of the right and left fronto-temporal-occipital bones. The superior parietal bones have red subgaleal hemorrhage. The scalp is perforated as previously described.

RIBS/STERNUM:

The ribs and sternum are atraumatic and within normal limits.

VERTEBRAE:

The vertebrae are atraumatic and within normal limits.

PELVIS:

The pelvis is atraumatic and within normal limits.

EXTREMITIES:

The extremities have tattoos and scars as previously described.

MICROSCOPIC EXAMINATION

Not performed.

LABORATORY EXAMINATION

Laboratory examinations were ordered, and the results are attached.



TOXICOLOGY REPORT

SUBJECT NAME(S): Rhoden, Dana
SUBMITTING AGENCY: Pike County Coroner

FILE #: CC16-01420
DATE REPORTED: 05/20/2016

RESULTS:

Headspace Gas Chromatography:

Item #	Specimen	Results	Concentration
1-1	Peripheral blood - A	Ethyl Alcohol	Negative

Immunoassay Screen (ELISA) **Presumptive**:

ELISA Screen: Amphetamine, Barbiturates, Benzodiazepines, Cannabinoids, Carisoprodol, Cocaine/Metabolites, Fentanyl, Methadone, Methamphetamine, Opiates, Oxycodone, Tramadol, Tricyclic Antidepressants, Zolpidem.

Item #	Specimen	Results	Concentration
1-8	Serum	Negative	

General Drug Screen (GCMS*):

Item #	Specimen	Results	Concentration
1-2	Peripheral blood - B	Caffeine	PRESENT

* Gas Chromatography / Mass Spectrometry

The Caffeine result for Item #1-2 is qualitatively PRESENT, but has not been confirmed by an alternate analytical method.

Rachel M. Hamilton

Rachel M. Hamilton
Toxicologist