# Hamilton County Coroner

The Frank P. Cleveland, M.D. Institute of Forensic Medicine, Toxicology and Criminalistics
3159 Eden Avenue, Cincinnati, Ohio 45219 2299
Office: 513-946-8700 Fax: 513 946-8727


**KENNETH RHODEN** **CC16-01422**

## OPINION

Diagnoses:

1. Single, intermediate-distance, penetrating gunshot wound to the head:
   a. Entrance: Right eye
   b. Path: Right eyelid, eye, orbital plate, brain and skull
   c. Projectile: Deformed, jacketed lead bullet and lead fragment recovered from posterior cranial fossa
   d. Direction of fire through the body: Front to back
   e. Subgaleal hemorrhage
   f. Extensive skull fractures
   g. Brain lacerations.

2. Postmortem toxicology:
   a. Presence of caffeine
   b. Negative for drugs or ethyl 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 single gunshot wound to the head.

Karen Looman, D.O.
Chief Deputy Coroner, Forensic Pathologist
Hamilton County, Ohio

7/11/2016
Date

# POSTMORTEM EXAMINATION
# OF THE BODY OF

# KENNETH RHODEN

A postmortem examination of the body identified by Pike County Coroner's Office as "Kenneth Rhoden" is performed at the Hamilton County Coroner's Office on Sunday, April 24, 2016 at 12:47 p.m. by Dr. Karen Looman. The morgue attendants are Tyrone Smith and John Hatfield. Agents Rick Ward and Seth Hargerity from BCI (Ohio Bureau of Criminal Identification and Investigation) observed the autopsy.

## HISTORY:
The decedent is a 44 year old white male who was found deceased in his home with a gunshot wound to the head.

## EXTERNAL EXAMINATION
### GENERAL:
The body is that of a normally developed, well-nourished, adult male who is 228 pounds, 70-inches in height, and appears appropriate for the stated age. The body is cool to the touch due to refrigeration. Rigor mortis is minimally present in the extremities only. Livor mortis is very pale red and in a right lateral posterior distribution except over areas exposed to pressure.

The scalp hair is dark brown, straight and of medium length. It is a brown mustache and stubble across the hair-bearing portions of the face. The left cornea is slightly opaque. The left sclera is free of petechia, icterus or hemorrhage. The iris is blue. The right eye has extensive trauma. There is blood coming from the right eye, right ear and nose. The mouth has native dentition. The chest has a normal anteroposterior diameter without costal margin flaring. There are skin tags along the right neck. The abdomen is greatly distended. A mole is in the right groin. The penis is circumcised. The spine is straight. The pelvis is stable to manipulation. The extremities are not edematous. There are white paper bags on each hand. The fingernails are of multiple lengths, some with chips. The palms of the hands are dirty. There are calluses inferior to each patella. The toenails are thickened and discolored. There is an identification tag on the right great toe with name "Kenneth Rhoden".

### CLOTHING:
The body is nude.

### SCARS/TATTOOS:
There is a thick, linear white scar along the right clavicle. There is a spiderweb tattoo over the right elbow.

### MARKS OF THERAPY:
None.

### EVIDENCE OF INJURY:
There is a single, intermediate-distance, penetrating gunshot wound to the head. Entrance: Right eye, consisting of a 1/2-inch round defect through the right upper eyelid, with a 1/2-inch wide rim of gray-black soot around the defect, and red and brown stippling on the skin across the

upper eyelid, right side of the nose, right cheek, forehead and on the medial left upper and lower eyelids. This defect is located 4-inches from the top of the head, 1-1/2-inches right of midline and 1-1/4-inches posterior to the glabella. (The stippling extends 1-3/4-inches superior onto the forehead, 2-1/4-inches leftward to the left medial upper and lower eyelids, 2-inches inferior on the right cheek and 2-1/2-inches rightward to the right cheek approaching the ear.) Path: Right eyelid, eye, orbital plates, brain and skull. Projectile: Deformed, jacketed lead bullet recovered from the right posterior cranial fossa of the skull. Direction of fire through the body: Front to back.

There is a subungual hemorrhage of the right thumb.

X-RAYS:
Films of the head and upper chest are taken.

## INTERNAL EXAMINATION

*The organs and serosal surfaces display mild decomposition changes.*

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 tan and homogeneous upon sectioning.

HEART:
The heart is 440 grams. The coronary arteries arise normally and are right-sided dominant. The right coronary artery has a proximal, focal 5-percent stenosis. The mid left anterior descending coronary artery has a focal 50-percent stenosis. The rest of the coronary branches are free of disease. The myocardium is red, firm and without scars. Both the right and left ventricles are mildly dilated. The left ventricular wall is concentric. The valves are thin, delicate, and unremarkable.

AORTA:
The aorta has mild fatty streaks, plaques and hemolytic staining along its length.

LUNGS:
The right lung is 440 grams, and the left lung is 480 grams. The tracheobronchial tree has blood along its length. The mucosa is stained dark purple. There is no obstruction of the lumen. Both lungs are partially aerated, dark purple with congestion, and have posterior atelectasis. 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 1,565 grams. The capsule is intact and covers a red-brown parenchyma. Upon sectioning, there are no focal lesions. The gallbladder is full of 0.1-centimeter round, brown stones. There is a scant amount of yellow bile present.

**SPLEEN:**
The spleen is 300 grams. The capsule is intact and covers liquefied, dark red-purple parenchyma. The white pulp is not visualized and there are no focal lesions.

**PANCREAS:**
The pancreas has autolytic changes with an orange-brown, lobulated architecture without focal lesions.

**ADRENAL GLANDS:**
The glands have autolytic changes and have yellow cortices and tan-brown medullae without focal lesions.

**GASTROINTESTINAL TRACT:**
The tongue is atraumatic. The esophagus is patent. The gastroesophageal junction and gastric mucosa are autolytic. There are rugal folds present. The stomach contains 50 milliliters of light tan fluid with French fry fragments. The small and large intestines are distended with gas. The appendix is present.

**KIDNEYS:**
The right kidney is 210 grams, and the left kidney is 140 grams. Both capsules strip with ease from each smooth cortical surface. Upon bisection, the calyces are patent and free of stones or hydronephrosis.

**BLADDER:**
The bladder contains 400 milliliters of pale, yellow urine. The mucosa is light tan and unremarkable.

**GENITALIA:**
The penis is circumcised. The prostate and testicles are not examined.

**BRAIN AND MENINGES:**
The brain is 1,230 grams. The brain is soft with decomposition and has a diffuse red-purple-gray discoloration of the surface. There is no epidural, subdural or subarachnoid hemorrhage. The entire inferior surface of the right hemisphere lacerated. The frontotemporal lobes have inferior cortical contusions greater on the left. The leptomeninges have been disrupted by the bullet but are otherwise thin and free of purulent exudate. The cranial nerves and vessels have been disrupted along the right hemisphere. Upon sectioning, the cortical ribbon is thin and even. The inferior right hemisphere has lacerations that extend through the hippocampus, hypothalamus and portions of the inferior caudate nucleus. There are no other lesions within the white matter or

deep gray nuclei. The brain stem and cerebellum are free of surface hemorrhage. The pons has diffuse linear hemorrhagic streaks throughout it. The rest of the brain stem and cerebellum are free of lesions.

SKULL AND SUBGALEA:
There is a linear fracture of the calvarium extending from the right temporal bone across the occipital bone. There is a midline fracture of the frontal bone that extends into the anterior cranial fossa. The cribriform plate and medial right orbital plate have small comminuted fractures, leaving a large hole in the right anterior cranial fossa that extends into the right middle cranial fossa and the right lateral temporal bone. There are comminuted fractures of the entire posterior cranial fossa and occiput. Gray marks on the fractured pieces are suggestive of a bullet strike along the mid occipital wall. A small metallic fragment is recovered from this area. The deformed jacketed bullet is also recovered from the posterior cranial fossa.

There are subgaleal hemorrhages along the lateral right temporal bone, posterior parietal bone and occipital bone, greater on the right. A single focus of subgaleal hemorrhage is along the left lateral temporal bone. The linear fracture of the frontal bone has surrounding purple subgaleal hemorrhage at the vertex.

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 paper bags, a tattoo, a subungual hemorrhage and calluses as previously described.

MICROSCOPIC EXAMINATION
Not performed.

LABORATORY EXAMINATION
Laboratory examinations were ordered, and the results are attached.

07/08/2016 njb

# HAMILTON COUNTY CRIME LABORATORY

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Crime Laboratory 513-946-8750 Fax 513-946-8772


ANAB ACCREDITED ISO/IEC 17025 FORENSIC TESTING LABORATORY

## TOXICOLOGY REPORT

| | | | |
|---|---|---|---|
| SUBJECT NAME(S): | Rhoden, Kenneth | FILE #: | CC16-01422 |
| SUBMITTING AGENCY: | Pike County Coroner | DATE REPORTED: | 05/20/2016 |

### RESULTS:

**Headspace Gas Chromatography:**

| Item # | Specimen | Results | Concentration |
|---|---|---|---|
| 1-2 | 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 |
|---|---|---|---|
| 1-2 | Peripheral blood - A | Amphetamine | Positive |

NOTE: **ELISA POSITIVE RESULTS** are **PRELIMINARY ONLY**, and are **NOT** considered a positive finding in the absence of a confirmatory analysis, as listed below. Presumptively positive ELISA results may not confirm.

**General Drug Screen (GCMS*):**

| Item # | Specimen | Results | Concentration |
|---|---|---|---|
| 1-1 | Heart blood - A | Caffeine | PRESENT |

**Sympathomimetic Amines Confirmation (GCMS*):**

| Item # | Specimen | Results | Concentration |
|---|---|---|---|
| 1-2 | Peripheral blood - A | No Sympathomimetic Amines Detected | |
| 1-2 | Peripheral blood - A | Amphetamine | Negative |

* Gas Chromatography / Mass Spectrometry

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

Rachel M Hamilton

Rachel M. Hamilton
Toxicologist

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