7-4-1954

54/07/04 (1) Autopsy Protocol of Marilyn Reese Sheppard

Samuel R. Gerber MD
*Cuyahoga County Coroner's Office*

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Autopsy Protocol

NAME ............................................................... Marilyn Reese Sheppard

CASE NO. .......................................................... 76629

AUTOPSY NO. .................................................... M-7280

DATE ............................................................. 7-4-54

S. R. GERBER, M. D.
CORONER
2121 Adelbert Rd.
Cuyahoga County
State of Ohio
REPORT OF AUTOPSY

CASE No. 76629 AUTOPSY No. M-7280

I, _________________________ M.D., Coroner of Cuyahoga County, Ohio,

Certify that at 11:30 P.M. on the 4th day of July, 1954,

in accordance with Section 2855-6 of the General Code of the State of Ohio, made or caused to be made a post-mortem examination on the body of

Marilyn Reese Sheppard, of No. 28924 Westlake Rd., Bay Village, Ohio, and that

the following is a true and correct report of said examination to the best of my knowledge and belief:

SEX Female  AGE 31  COLOR White

COMPLEXION Medium  EYES Hazel  NATIVITY American

WEIGHT 125 lbs  TEETH Good  OCCUPATION Housewife

HEIGHT 67"  HAIR Brown  MARITAL STATUS Married

MARKS AND WOUNDS:

1. There is a contused abraded laceration measuring 1 x 3/4" in the left frontal region, centered 2 1/2" from the midline. It extends from the supra-orbital margin cephalad. The injury extends down to the underlying bone.

2. There is a contused crescentic laceration measuring 1 x 3/4" in the left frontal region, centered 2" from the midline. The lowermost point of the laceration is located 1 1/2" above the supra-orbital margin. The laceration extends down to the underlying bone.

3. There is a contused gaping laceration measuring 1 1/2 x 3/8" in the left frontal region, centered 1" from the midline. It extends from the supra-orbital ridge cephalad. The underlying bone is visible in the depths of the wound.

4. There is a linear laceration measuring 2 x 1/4" in the midfrontal region. The injury originates at the glabella and extends cephalad. The laceration extends through the soft tissue to the underlying bone.

(Cont'd - other side)

CAUSE OF DEATH: The death of the decedent was the result of: MULTIPLE IMPACTS TO HEAD AND FACE WITH COMBINED FRACTURES OF SKULL AND SEPARATION OF FRONTAL SUTURE, BILATERAL SUBDURAL HEMORRHAGES DIFFUSE BILATERAL SUBARACHNOID HEMORRHAGES, AND CONTUSIONS OF BRAIN.

HOMICIDE BY ASSAULT.

_________________________ M.D.
Cuyahoga County Coroner
Decedent said to have been assaulted and found by husband apparently dead on her bed at home, 28924 Westlake Road, Bay Village, at about 5:30 A.M., 7-4-54. She was conveyed to the Coroner's Office where she was officially pronounced dead following arrival at 8:00 A.M., 7-4-54. (Dr. Gerber)

MARKS AND WOUNDS - Cont'd

5. There is a ragged crescentic laceration measuring ½ x 1½" in the right frontal region centered 1" from the midline and 2½" above the supra-orbital ridge. The laceration is located immediately below the hair line. The edges of the laceration are abraded over a zone measuring up to 1/8" in width. The laceration extends down to the underlying bone.

6. There is a contused laceration measuring 1 x 3½" in the right frontal region centered 2" from the midline and 1½" above the supra-orbital ridge. The laceration runs from lateral and posterior medially and anteriorly. The laceration extends down to the underlying bone.

Comminuted fractures of the frontal bone are visible and palpable in the depths of the lacerations described above.

7. There is a gaping contused elliptical laceration measuring 1 x ½" in the right frontal region, centered 2" above the right supra-orbital ridge and 3" from the midline. The underlying bone is exposed.

8. There is a ragged contused laceration measuring 1 x ½" in the right parietal region, centered 4" from the midline and 4½" from the right external auditory meatus. The laceration extends down to the underlying bone.

9. There is a ragged contused laceration measuring ½ x 3½" in the right occiput, centered 3½" from the midline and 5½" from the right external auditory meatus. The laceration extends only partially through the scalp.

10. There is a ragged contused laceration measuring 1½ x 1½" in the mid-fronto-parietal region, centered 3½" above the labella. The posterior aspect of the wound forks to produce a Y each of whose arms measure ½".

11. There is a ragged contused laceration in the left parietal region measuring 2½" in length. The wound extends from the midline to the left, originating at a point 6½" from the left auditory meatus.

12. There is a ragged cruciate contused laceration measuring 1½ x 1 in the left temporal region, centered 3½" from the left lateral canthus and 4½" from the left external auditory meatus. The laceration extends down to the underlying bone. Fractures are visible and palpable in the depths of the laceration.

13. There is a ragged contused laceration measuring 2½ x 5½" in the left parietal region, centered 3½" from the midline and 4½" from the left external auditory meatus. The injury extends from anterior and lateral posteriorly and medially. The anterior aspect of the injury is separated from the preceding injury (12) by a bridge of skin which measures from ½ to 1½".

14. There is a contused crescentic laceration measuring 2½ x 3½" in the left parietal region, centered 3½" from the midline and 5½" from the left external auditory meatus. It is separated from the preceding injury (13) by a bridge of skin measuring ½" in width. The bridge of skin separates the posterior extremity of the preceding injury from the present laceration.

15. There is a ragged crescentic laceration in the left parietal region centered 3½" from the midline and 6½" from the left external auditory meatus. The laceration measures 1½ x 1½" and is separated from the preceding injury (14) by a bridge of skin measuring up to 3½" in width. The underlying bone is exposed.

(Cont'd - next page)
16. There is a laceration measuring 5/16 x 1/8" in the right pre-auricular region over the temporo-mandibular joint. It is centered 1 3/4" from the right external auditory meatus.

17. The right upper and lower eyelids are swollen and discolored a dark purplish brown.

18. There is an area of crusted abrasion in the mid-right upper lid measuring 3/4 x 1/8".

19. There is an area of crusted abrasion measuring 1/4 x 1/8" in the mid-right lower lid.

20. There is swelling and purple-brown discoloration of the left upper and lower eyelids. The discoloration and swelling are less marked than on the right.

21. There is a fracture of the nasal bone with crepitus on manipulation.

22. There is a contused abrasion measuring 1/4 x 1/8" over the bridge of the nose with the long axis of the abrasion following the long axis of the nose.

23. There is a contused abrasion measuring 1 x 3/4" on the left mid-infra-orbital margin.

24. There is a crusted abrasion measuring 1 x 3/8" on the buccal surface of the mucosa of the lower lip.

25. There is a complete fracture of the upper right medial incisor at the junction of the proximal and middle third of the tooth. The fracture is recent and the fractured surface is sharp. The distal fragment of the tooth is not present within the mouth.

26. There is a chip defect on the oclusal-frontal surface of the upper left medial incisor. The defect measures 3/16 x 1/8", and the edges are sharp.

27. There is an area of purple brown contusion measuring 2" in diameter over the superior aspect of the right shoulder. The discoloration is faint.

28. There is a contused abrasion measuring 1/4" over the right radius centered 7/8" proximal to the tip of the right thumb.

29. There is an area of contused abrasion measuring 2 x 3/4" on the lateral aspect of the dorsum of the right wrist.

30. There is a dried abrasion measuring 3/4 x 3/8", over the base of the right thumb on the palmar aspect.

31. There is an abrasion measuring 1/4 x 1/8" over the dorsum of the proximal phalanx of the right index finger immediately distal to the metacarpophalangeal joint.

32. There is an area of crusted abrasion measuring 1/4 x 1/8" over the metacarpophalangeal joint on the dorsum of the right 4th finger.

33. There is hyper-mobility and crepitus on the right 5th finger at the metacarpophalangeal joint.

34. There is a contused abrasion measuring 1 1/8 x 1/8" over the left ulna centered 10" proximal to the tip of the left middle finger.

35. There is partial avulsion of the fingernail of the left 4th finger with the root of the nail exposed.
ANATOMIC DIAGNOSES

1. Multiple impacts to head and face with:
   a) Comminuted fractures of skull and separation of frontal suture.
   b) Bilateral subdural hematomas.
   c) Diffuse bilateral subarachnoid hematomas.
   d) Contusions of brain.
   e) Multiple contused lacerations of forehead and scalp.
   f) Fractures of upper medial incisor teeth.
   g) Fracture of nose.


3. Aspiration of blood.

4. Intra-uterine pregnancy - since 4 months.

5. Adenoma of thyroid.

LABORATORY FINDINGS

Blood: alcohol - 0.00%; barbiturates - negative.
Blood type: O Rh negative type NS
Maril~n Reese Sheppard  Age: 31
28924 Westlake Road
Bay Village, Ohio.
76629 M-7280

Officially pronounced dead at the Coroner's Office following arrival at 8:00 A.M., 7-4-54.
Autopsy performed at the Coroner's Office at 12:30 P.M., 7-4-54.

ABSTRACT OF HISTORY

Decedent said to have been assaulted and found by husband apparently dead on her bed at home, 28924 Westlake Road, Bay Village, at about 5:30 A.M., 7-4-54. She was conveyed to the Coroner's Office where she was officially pronounced dead following arrival at 8:00 A.M., 7-4-54. (Dr. Gerber)

ANATOMIC DIAGNOSES

1. Multiple impacts to head and face with:
   a) Comminuted fractures of skull and separation of frontal suture.
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   d) Contusions of brain.
   e) Multiple contused lacerations of forehead and scalp.
   f) Fractures of upper medial incisor teeth.
   g) Fracture of nose.

2. Multiple abrasions and contusions. Partial avulsion of 4th left fingernail

3. Aspiration of blood.

4. Intra-uterine pregnancy - circa 4 months.

5. Adenomata of thyroid.

CAUSE OF DEATH

The decedent came to her death as a result of: MULTIPLE IMPACTS TO HEAD AND FACE WITH COMMINUTED FRACTURES OF SKULL AND SEPARATION OF FRONTAL SUTURE, BILATERAL SUBDURAL HEMORRHAGES, DIFFUSE BILATERAL SUBARACHNOID HEMORRHAGES, AND CONTUSIONS OF BRAIN.

HOMICIDE BY ASSAULT.

LABORATORY FINDINGS

Blood: alcohol—0.00%; barbiturates—negative.
Blood Group: O Rh negative type M.
8. There is a ragged contused laceration measuring $1 \times \frac{1}{2}''$ in the right parietal region, centered $1''$ from the midline and $\frac{1}{2}''$ from the right external auditory meatus. The laceration extends down to the underlying bone.

9. There is a ragged contused laceration measuring $\frac{1}{2} \times \frac{1}{2}''$ in the right occiput, centered $3''$ from the midline and $5''$ from the right external auditory meatus. The laceration extends only partially through the scalp.

10. There is a ragged contused laceration measuring $1\frac{1}{4} \times \frac{1}{4}''$ in the mid-frontal-parietal region, centered $3''$ above the glabella. The posterior aspect of the wound forks to produce a T each of whose arms measure $\frac{1}{2}''$. 

11. There is a ragged contused laceration in the left parietal region measuring $2''$ in length. The wound extends from the midline to the left, originating at a point $6\frac{1}{2}''$ from the left auditory meatus.

12. There is a ragged cruciate contused laceration measuring $1\frac{1}{2} \times 1''$ in the left temporal region, centered $3''$ from the left lateral centline and $1\frac{1}{2}''$ from the left external auditory meatus. The laceration extends down to the underlying bone. Fractures are visible and palpable in the depths of the laceration.

13. There is a ragged contused laceration measuring $2\frac{1}{2} \times \frac{1}{2}''$ in the left parietal region, centered $3''$ from the midline and $1\frac{1}{2}''$ from the left external auditory meatus. The injury extends from anterior and lateral posteriorly and medially. The anterior aspect of the injury is separated from the preceding injury ($\#12$) by a bridge of skin which measures from $\frac{1}{2}$ to $\frac{3}{4}''$.

14. There is a contused crescentic laceration measuring $2\frac{1}{2} \times \frac{1}{2}''$ in the left parietal region, centered $3''$ from the midline and $5\frac{1}{2}''$ from the left external auditory meatus. It is separated from the preceding injury ($\#13$) by a bridge of skin measuring $\frac{1}{2}''$ in width. The bridge of skin separates the posterior extremity of the preceding injury from the present laceration.

15. There is a ragged crescentic laceration in the left parietal region centered $3''$ from the midline and $6''$ from the left external auditory meatus. The laceration measures $1\frac{1}{2} \times \frac{1}{2}''$ and is separated from the preceding injury ($\#14$) by a bridge of skin measuring up to $\frac{3}{4}''$ in width. The underlying bone is exposed.

16. There is a laceration measuring $5/16 \times 1/8''$ in the right pre-auricular region over the temporomandibular joint. It is centered $1 3/8''$ from the right external auditory meatus.

17. The right upper and lower eyelids are swollen and discolored a dark purplish brown.

18. There is an area of crustad abrasion in the mid-right upper lid measuring $\frac{1}{2} \times \frac{1}{2}''$.

19. There is an area of crustad abrasion measuring $\frac{1}{2} \times \frac{1}{4}''$ in the mid-right lower lid.

20. There is swelling and purple-brown discoloration of the left upper and lower eyelids. The discoloration and swelling are less marked them on the right.

21. There is a fracture of the nasal bone with crepitus on manipulation.

22. There is a contused abrasion measuring $\frac{1}{4} \times 1/8''$ over the bridge of the nose with the long axis of the abrasion following the long axis of the nose.
23. There is a contused abrasion measuring 1 x $\frac{1}{4}$" on the left mid-infra-orbital margin.

24. There is a crusted abrasion measuring 1 x $\frac{3}{8}$" on the buccal surface of the mucosa of the lower lip.

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27. There is an area of purple brown confusion measuring 2" in diameter over the superior aspect of the right shoulder. The discoloration is faint.

28. There is a contused abrasion measuring $\frac{1}{2}$" over the right radius centered 7½" proximal to the tip of the right thumb.

29. There is an area of contused abrasion measuring 2 x 3/4" on the lateral aspect of the dorsum of the right wrist.

30. There is a dried abrasion measuring 3/4 x $\frac{1}{8}$" over the base of the right thumb on the palmar aspect.

31. There is an abrasion measuring $\frac{1}{2}$ x $\frac{3}{8}$" over the dorsum of the proximal phalanx of the right index finger immediately distal to the metacarpophalangeal joint.

32. There is an area of crusted abrasion measuring $\frac{1}{4}$ x 1/8" over the metacarpophalangeal joint on the dorsum of the right 4th finger.

33. There is hyper-mobility and crepitus on the right 5th finger at the metacarpophalangeal joint.

34. There is a contused abrasion measuring 1½ x $\frac{3}{8}$" over the left ulna centered 10" proximal to the tip of the left middle finger.

35. There is partial avulsion of the fingernail of the left 4th finger with the root of the nail exposed.

SECTION: The body is opened through the usual "T" shaped incision. The subcutaneous fat is moderate in amount. The musculature is well developed.

BODY CAVITIES: All the body cavities are smooth and glistening and none contains excess fluid.

VISCERA

HEART: The heart is firmly contracted as it lies in situ. It weighs 225 gm. The epicardial surfaces are smooth and glistening. The myocardium has a uniform pale reddish brown color throughout. The endocardial surfaces are smooth and glistening. Valve cusps and leaflets are thin and delicate. The major vessels leading from the heart are not remarkable. The coronary arteries reveal no atherosomatous changes. Measurements of the heart are as follows:

- Pulmonic: 5.0 cm.
- Mitral: 7.0 cm.
- Aortic: 5.0 cm.
- Tricuspid: 8.0 cm.
- Right ventricle: 4.0 cm.
- Left ventricle: 12.0 cm.
LUNGS: The right lung weighs 550 gms. and the left 570 gms. The pleural surfaces bilaterally are smooth and shiny throughout and the lungs are rubbery to palpation. Cross section reveals a settled reddish purple parenchyma which yields moderate quantities of bloody, frothy fluid on pressure. The tracheas and major bronchi contain a large quantity of blood-stained sero-mucoid froth.

NECK ORGANS: There is no evidence of injury to the soft or bony structures of the neck. The thyroid has a uniform reddish brown color throughout, with an adenomatous nodule measuring 2 cm. in diameter in the lower pole of the left thyroid lobe. The larynx and tracheae are lined by an intact mucous membrane. The thymus is atrophic.

GASTROINTESTINAL TRACT: The gastrointestinal tract is lined by an intact mucous membrane from pharynx to anus. The stomach contains one-half ounce of orange-brown mucoid fluid. The small intestine contains yellowish brown chyme. The colon contains inspissated green-brown stool. The appendix is surgically absent and the cecum is bound to the anterior parietal peritoneum.

LIVER: The liver weighs 1430 gms. Its capsule is smooth and glistening. Cross section reveals good preservation of the usual hepatic architectural landmarks. The gall bladder and bile ducts are patent throughout.

PANCREAS: The pancreas shows no gross abnormalities.

SPLEEN: The spleen weighs 180 gms. It is soft to palpation and the capsule is wrinkled. Cross section reveals fair demarcation between red and white pulp.

ADRENALS: The adrenals are within normal limits.

KIDNEYS: The right kidney weighs 135 gms. and the left 130 gms. The capsules strip readily leaving smooth, shiny reddish brown surfaces. Cross section reveals good demarcation between cortex and medulla with no evidence of any cortical narrowing. Pelves, ureters and bladder are lined by an intact mucous membrane. The bladder is empty.

INTERNAL GENITALIA: The uterus is enlarged and extends to a point 5 cm. above the pubic symphysis. Within it there is a pregnancy with the membranes intact. Within the amniotic sac there is a male fetus measuring 14 cm. from crown to rump and 20 cm. from crown to heel. The placenta shows no gross abnormalities. The cervix is within normal limits. Within the vagina there is a moderate quantity of creamy white exudate. The tubes and ovaries show no gross abnormalities. Within the right ovary there is a corpus luteum of pregnancy.

LYMPH NODES: The lymph nodes are not significantly enlarged in any of the body cavities.

BONE MARROW: The bone marrow has a reddish brown color throughout.

ARTIA: The aorta shows minimal atheromatous changes within its abdominal portion.

HEAD: The scalp is incised from ear to ear and the flaps reflected anteriorly and posteriorly. There is extensive hemorrhagic extravasation through the entire scalp and both temporal muscles are heavily infiltrated by blood. The calvarium reveals severe comminution and splintering of the entire frontal bone with complete separation of the coronal suture. Small fragments of bone can readily be picked from the site of comminution with the fingers. The calvarium is removed by converging saw-cuts which extend from the separated coronal suture posteriorly. The dura is intact. On reflecting the dura 20 cc. of fluid blood are found in each subdural space. The brain weighs 1440 gms. It reveals diffuse hemorrhage through the white matter. The falx and tentorium are everted, and the arachnoid is tense with effusion. The gyri are wide and the sulci deep. There is a gross convulsive disruption of the cerebral cortex with petechial hemorrhages throughout the white matter. The brain tissue is soft and friable and bleeds easily with a glistening appearance. Areas of hemorrhage are found in the substantia nigra and the thalamus. The choroid plexus is involved with hemorrhage.


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subarachnoid hemorrhage over both cerebral hemispheres and over the cerebellar hemispheres. Multiple coronal sections through the brain reveal good preservation of the usual cerebral architectural landmarks. There is contusion with focal and confluent hemorrhages involving the cortex on the undersurface of the temporal and frontal lobes bilaterally. In the right basal ganglia there are focal and confluent areas of hemorrhage. The floor of the cranial cavity reveals severe comminution involving the anterior cranial fossae. The roofs of both orbits are splintered and fragmented and the interior of the frontal sinuses is visible. The parietal bones, occipital bones and the floor of the middle and posterior fossae show no fractures.

PITUITARY: The pituitary gland is not remarkable.

MICROSCOPIC DESCRIPTION

LUNGS: Focal congestion and edema.

THYROID: Follicular adenomata.

BREAST: Secretory changes.

OVARY: Corpus luteum of pregnancy.

UTERUS: Lined by decidual tissue. Hypertrophy of muscle.

VAGINAL SMEARS: Abundant epithelial cells and bacteria.

BRAIN: Focal and confluent cortical hemorrhages with laceration.

Sections of heart, liver, kidney, placenta and umbilical cord are negative.