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# MARICOPA COUNTY OFFICE OF THE MEDICAL EXAMINER 701 W. Jefferson Street Phoenix, AZ 85007

# MEDICAL EXAMINER REPORT

**DECEDENT:** Helen Elizabeth Jones

**CASE:** 20-13257

**DATE OF EXAMINATION:** 12/29/2020

TIME: 0838 Hours

# PERSONS PRESENT AT EXAMINATION:

Phoenix Police Department: Detective Tim Reese, #8742, Detective Jacob Rasmussen, #9140

**CAUSE OF DEATH:** Multiple gunshot wounds

MANNER OF DEATH:

Homicide

HOW INJURY OCCURRED:

Shot during an encounter with law enforcement

02/04/2021

Date Signed

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ZACHARY MICHALICEK, DO MEDICAL EXAMINER

#### **FINDINGS**

- I. Multiple gunshot wounds:
  - a. See "Evidence of Injury" and "Postmortem Radiography" for additional detail
- II. Toxicology:
  - a. See separate report

#### SUMMARY AND OPINION

The decedent is a 47-year-old female who was shot during an encounter with law enforcement. She was taken to the hospital and pronounced dead after a resuscitative effort including thoracotomy.

At exam, the findings were of an overweight female with multiple gunshot wounds.

Based on the circumstances surrounding the death, the findings at exam and the ancillary studies, it is my opinion that the cause of death is multiple gunshot wounds.

It is further my opinion that the manner of death is homicide.

As with all death investigations, opinions expressed herein are amenable to change should new, reliable, and pertinent information come to light.

The Maricopa County Medical Examiner's Office is required by statute (A.R.S. § 11-594(A) (2) and (4)) to certify the cause and manner of death following completion of the death investigation of each case over which it assumes jurisdiction, and to promptly execute a death certificate, on a form provided by the state registrar of vital statistics, indicating the cause and manner of death. The form provided by the state registrar of vital statistics includes five manners of death: homicide, suicide, accident, natural, and undetermined. The determination of manner of death is a forensic determination by the pathologist predicated upon the totality of all then-known forensic evidence and other circumstances surrounding the cause of death; it is not a legal determination of criminal or civil responsibility of any person(s) for the death.

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### **POSTMORTEM EXAMINATION**

### **CLOTHING AND PERSONAL EFFECTS**

See separate property inventory list.

#### EXTERNAL EXAMINATION

Identification: Morgue ID on right ankle. Hospital ID "Doe, T-20-1341" on right wrist. Seal number: 0039733. Habitus: Normally developed and overweight. Weight: 173 pounds Height: 63 inches Temperature: Cold (refrigerated). Rigor: Firm. Livor: Pink. Posterior. Fixed. Decomposition changes: None. General: Blood is scattered about all body regions. Hands protected in evidence bags. Head (general): Normally formed and without trauma. Skull and facial skeleton: Intact to palpation. Hair: Brown with braided extensions. Eyes: Brown irides. Clear corneas. Unremarkable sclerae and conjunctivae. Ears: Normal. Nose: Normal. Teeth: Lower teeth are natural and in fair condition. Upper dentures in place. Neck: Normal. Chest: Increased A-P diameter. Trauma to be described. Breasts: Well-developed and free of palpable masses. Trauma to be described. Abdomen: Protuberant and soft.

External genitalia: Normal adult female. Atraumatic.

Upper extremities: Symmetrically formed. Trauma to be described.

Fingernails: Artificial aside from missing 4<sup>th</sup> right fingernail. The underlying natural nails are short and in fair condition with debris under the tips.

Lower extremities: Symmetrically formed. Bilateral forefoot deformities. Trauma to be described.

Toenails: Painted purple and intact.

Back and buttocks: Trauma to be described.

External body markings:

Scars:

Tattoos: See photos.

Piercings: Ears, lower lip, left eyebrow.

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# EVIDENCE OF MEDICAL INTERVENTION

- 1. Endotracheal tube with fastener.
- 2. Left chest sewn thoracotomy site between left 7<sup>th</sup> and 8<sup>th</sup> ribs.
- 3. EKG pads on chest and left arm.
- 4. Left groin vascular port.
- 5. Bilateral lower leg intraosseous ports.

## EVIDENCE OF INJURY

The order of injuries listed below is not indicative of their severity, nor is it indicative of the order in which they occurred. Position and trajectory given in reference to standard anatomic position.

### PENETRATING GUNSHOT WOUND OF THE LEFT BREAST/CHEST:

**ENTRANCE:** There is a gunshot wound of indeterminate range of fire to the left breast located 40 cm beneath the top of the head and 15 cm left of the anterior midline. The round defect measures 0.4 cm in diameter and has an eccentric marginal abrasion up to 0.7 cm thick from the 2:00-8:00 positions. There is no soot, stippling or muzzle imprinting.

**PATH:** The wound track of the highly fragmented projectile spans the left breast tissue, the anterior ribcage at the lower sternum and junction of the left ribs, anterior pericardial sac, the right ventricle of the heart, the inferior pericardial sac, the diaphragm and the liver.

EXIT: None.

**ASSOCIATED INJURIES:** Hemorrhage along wound track, fractures of inferior sternum and left ribs 7-8 at sternal junction, pericardial sac lacerations, heart with right ventricle lacerations containing blue surgical sutures, diaphragm lacerations, extensive liver lacerations, right hemothorax 600 mL, non-quantifiable hemoperitoneum, right middle and left upper lobe pulmonary contusions.

**RECOVERY:** A deformed gray metal projectile fragment is recovered from parenchyma of the right liver lobe and is designated "fragment from liver." A deformed gray metal projectile fragment is recovered from the right leaflet of the diaphragm and is designated "fragment from diaphragm." The fragments are retained as evidence.

**TRAJECTORY:** The wound path is primarily left-to-right and downward.

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#### PENETRATING GUNSHOT WOUND OF THE LEFT HIP:

**ENTRANCE:** There is a gunshot wound of indeterminate range of fire to the left hip located 75 cm beneath the top of the head and in the left lateral midline. The round defect measures 0.5 cm in diameter and has an eccentric marginal abrasion up to 0.3 cm thick from the 2:00-8:00 positions. There is no soot, stippling or muzzle imprinting.

**PATH:** The wound track sequentially perforates the skin and subcutaneous tissues of the left hip and the proximal left femur.

EXIT: None.

**ASSOCIATED INJURIES:** Hemorrhage along wound track, extensive fragmented fracture of the proximal left femur.

**RECOVERY:** Multiple small fragments of deformed gray projectile are recovered from around the fractured femur, designated "fragments from left hip" and retained as evidence.

**TRAJECTORY:** The wound path is left-to-right.

### PERFORATING GUNSHOT WOUND OF THE RIGHT THIGH:

**ENTRANCE:** There is a gunshot wound of indeterminate range of fire to the right thigh located 94 cm beneath the top of the head and 6 cm left of the anterior midline of the leg. The round defect measures 0.4 cm in diameter and has an eccentric marginal abrasion up to 0.4 cm thick from the 12:00-6:00 positions. There is no soot, stippling or muzzle imprinting.

**PATH:** The wound track perforates the skin and subcutaneous tissues of the anterior right thigh.

**EXIT:** Centered at 91 cm beneath the top of the head and 6 cm right of the anterior midline of the leg is a gaping, stellate 11 x 7 cm overall exit wound with apposable wound margins and several small surrounding punctate stretch lacerations.

**ASSOCIATED INJURIES:** Hemorrhage along wound track.

**RECOVERY:** None.

**TRAJECTORY:** The wound path is primarily left-to-right.

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# PERFORATING GUNSHOT WOUND OF THE RIGHT CALF:

**ENTRANCE:** There is a gunshot wound of indeterminate range of fire to the posterior/medial right calf located 30 cm above the bottom of the foot and 4 cm left of the posterior midline of the leg. The round defect measures 0.9 cm in diameter and has a concentric marginal abrasion 0.1 cm thick and slightly jagged edges. There is no soot, stippling or muzzle imprinting.

**PATH:** The wound track perforates the skin and subcutaneous soft tissue of the right calf.

**EXIT:** Located 27 cm above the bottom of the foot and 5 cm right of the posterior midline of the leg is a  $3 \times 1.2$  cm exit wound with apposable wound margins and several surrounding radiating lacerations up to 0.4 cm in length.

**ASSOCIATED INJURIES:** Hemorrhage along wound track.

## RECOVERY: None.

**TRAJECTORY:** The wound path is left-to-right and downward.

## ADDITIONAL RECOVERY:

1. A sliver of gray metal possibly representing a projectile fragment is recovered from the groin, designated "fragment from groin" and retained as evidence.

# INJURIES OF THE TORSO:

- 1. Central chest and medial bilateral breasts with three curvilinear dried abrasions up to 8 cm in length.
- 2. Right mid back, three linear abrasions measuring 0.3-0.8 cm in length.

## **INJURIES OF THE UPPER EXTREMITIES:**

- 1. Posterior right upper arm, punctate abrasion.
- 2. Anterior right forearm with a 7 cm linear aggregate of healing, punctate, scabbed wounds.

# INJURIES OF THE LOWER EXTREMITIES:

1. Lower right shin, two healing linear aggregates of punctate abrasions measuring 5 cm and 2 cm in length.

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# INTERNAL EXAMINATION

Evidence of injury, having been described above, will not be repeated in this section.

<u>BODY CAVITIES</u>: Fluids: No additional abnormal collections. Adhesions: None. Organs: Present in their normal and anatomic positions.

HEAD (Central Nervous System): Scalp: Normal. Skull: Normal. Intracranial hemorrhage: Absent. Brain weight: 1300 grams. Leptomeninges: Thin, delicate and intact. Cranial nerves and main vessels: Normal where identified. Cerebral hemispheres: No edema. Normal surfaces and cut sections. Brainstem and cerebellum: Normal surfaces and cut sections.

## NECK:

Soft tissues, including the tongue, strap muscles, and large vessels: Normal. Hyoid bone and larynx: Normal.

### CARDIOVASCULAR SYSTEM:

Heart weight: 375 grams. Coronary arteries: Normal distribution with atherosclerotic narrowing as follows:

Myocardium: Uninjured myocardium is firm and red-tan.

Chambers: Non-traumatic abnormalities not identified.

Walls: Left ventricle: 1.3 cm. Interventricular septum: 1.3 cm. Right ventricle: 0.3 cm. Valves: Normal.

Septa: Intact.

Aorta:

## RESPIRATORY SYSTEM:

Trachea and bronchi: Normal.

Lung weights: 350 grams left; 375 grams right.

Pleural surfaces:

Lung parenchyma:

Pulmonary arteries: Normal and free of intraluminal thromboemboli.

LIVER AND BILIARY SYSTEM:

Liver weight: 1950 grams.

Tissue: Uninjured tissue is firm and red-brown.

Gallbladder:

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#### **DIGESTIVE SYSTEM:**

Esophagus: Normal. Gastric mucosa: Normal. Gastric contents: 5 ml of brown fluid. Small and large bowels: Normal. Appendix: Present. Pancreas: Normal firm,

#### UROGENITAL SYSTEM:

Kidney weights: 150 grams left; 125 grams right. Surface: Smooth and purple-tan. Cut surface: Normal Urinary bladder: No urine. Unremarkable mucosa. Uterus and cervix: Normal. Ovaries and fallopian tubes: Normal.

#### RETICULOENDOTHELIAL SYSTEM:

Spleen weight: 100 grams. General appearance: Lymph nodes: Normal where identified. Bone marrow: Normal where examined.

ENDOCRINE SYSTEM: Pituitary: Normally formed and not enlarged. Thyroid: Normal configuration Adrenal glands: Normal configuration

<u>MUSCULOSKELETAL SYSTEM:</u> Bones and muscle: Non-traumatic abnormalities not identified.

## **MICROSCOPIC EXAMINATION**

Representative portions of the organs are preserved. No tissue is submitted for microscopic examination.

#### TOXICOLOGY

The following specimens are collected: Iliac blood, chest cavity blood, vitreous fluid. See separate toxicology report for results.

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## ADDITIONAL STUDIES

POSTMORTEM RADIOGRAPHY: Full body radiographs are obtained. There are changes of surgical intervention in the torso and multiple minute projectile fragments spanning from the left chest to right upper abdomen. The proximal left femur is shattered and contains numerous fragmented portions of projectile. Minute non-recoverable fragments of projectile are in the right lower leg.

ZDM/jhm

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