

SOUTHWESTERN
INSTITUTE OF FORENSIC SCIENCES
5230 Medical Center Drive
Dallas, Texas 75235

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Case No. JP4207-07-3054Z

Name: Wages, Austin Taylor

Age: 16 Race: White Sex: Male

Date of Death: 11 DEC 2007 Date of Examination: 12 DEC 2007
Time of Death: Found 9:16 am Time of Examination: 7:30 am

Pronounced at: 1146 North Highway 37
Quitman, Wood County, Texas

AUTOPSY REPORT:

ORGAN WEIGHTS:

Brain	1480 g	R. Lung	460 g	R. Kidney	130 g
Heart	290 g	L. Lung	280 g	L. Kidney	120 g
Liver	1180 g	Spleen	140 g		

This autopsy is performed at the request of Clarence Holmes, Justice of the Peace, Precinct 3, Wood County, Texas.

EXTERNAL EXAMINATION:

The body is identified by tags. Photographs, fingerprints, palm prints, and radiograph of the head are taken. The hands are bagged.

The body is received clad in a red sweat shirt, a pink T-shirt, blue jeans, black socks, and black boxers. The clothing is retained and submitted to the Criminal Investigation Laboratory. The personal effects consist of bedding recovered from around the body including a blue and gray sleeping bag, a white quilt, a white plaid sheet, and a blue denim comforter. The bedding is retained and submitted to the Criminal Investigation Laboratory. No jewelry is on the body.

The body is that of a normally developed, white male which appears consistent with the recorded age of 16 years. When nude, the body measures 70 inches (177.8 cm) in length and weighs 174 pounds (78.9 kg). There is good preservation in the absence of embalming. Rigor mortis is full. Lividity is red-purple and blanching over posterior body surfaces. The body is cool subsequent to refrigeration.

The hairline is normally located and the scalp is covered with up to 3 inches in maximum length, straight, brown hair. No facial hair is present. The irides appear green, the corneae are clear, and there are no petechiae of the bulbar or

Name: Wages, Austin Taylor

COPY
DALLAS COUNTY
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palpebral surfaces of the conjunctivae. The mouth has natural dentition in fair condition. The chest and back are unremarkable. The abdomen is flat. The extremities are symmetric. The external genitalia, perineum, and anus are unremarkable. The penis is circumcised and the testes are descended into the scrotum. The right axilla to the tip of the right thumb measures 23-1/2 inches. The right axilla to the tip of the right middle finger measures 26 inches. The left axilla to the tip of the left thumb measures 23-1/4 inches. The left axilla to the tip of the left middle finger measures 25-3/4 inches.

IDENTIFYING MARKS AND SCARS:

None present.

EVIDENCE OF TREATMENT:

Cardiac monitoring pads are adherent to the extremities.

EVIDENCE OF INJURY:

I. GUNSHOT WOUND OF THE HEAD:

Entrance: The entrance wound is located on the lateral aspect of the upper lip, 6 inches below the top of the head and 3/4 inch left of midline. The wound consists of a 1/4 inch in diameter round defect with multiple radiating lacerations originating between 12 and 4 o'clock measuring up to 1/2 inch in maximum length. A thin layer of soot is eccentrically deposited around the entrance wound, predominantly inferiorly on the lower lip extending up to approximately 1 inch from the center of the entrance wound. Dense stippling surrounds the entrance wound on the neck and face, extending 3-3/4 inches superior, 3 inches left of, 4 inches inferior, and 3 inches right of the center of the entrance wound.

Pathway: After perforating the skin of the upper lip, the bullet sequentially perforates the left side of the maxilla, left side of the hard palate, left orbital plate, left frontal lobe, right parietal lobe, right occipital lobe, right occipital bone, and right occipital scalp before exiting.

Exit: The exit wound is located on the right occipital scalp 2-1/2 inches below the top of the head and 3/4 inch right of midline. The wound is stellate with an overall dimension of 1 x 1 inch. The margins fully reapproximate. Multiple small metallic lead fragments are within the calvarium, but are too small and deformed to have evidentiary value.

Associated injuries: The facial bones have crepitus. The left side of the maxilla has comminuted fractures with multiple traumatically avulsed upper teeth. The upper left incisor is fragmented with a residual attached root. The left side of the tongue is lacerated. The frontal, bilateral parietal, and bilateral occipital bones have linear fractures. Linear fractures extend through the bilateral orbital plates, left middle cranial fossa floor, and right posterior cranial fossa floor. The occipital bone surrounding the exit wound exhibits multiple comminuted fractures. The subdural space contains 10 ml of blood. The brain parenchyma around the wound tract is pulpified.

Name: Wages, Austin Taylor

Direction: The direction of the bullet is front to back, upward, and slightly left to right.

II. ADDITIONAL INJURIES:

Reflection of the scalp reveals a 4 x 2 inch focus of subscalpular hemorrhage overlying the right frontal and parietal skull.

EVIDENCE SUBMITTED:

The following items are collected, sealed within appropriately labeled containers, and submitted to the investigative agency at the time of autopsy.

- Blood specimen standard
- Head hair standard
- Gunshot residue kit
- Fingernail clippings.

The following items are submitted separately to the Criminal Investigation Laboratory: clothing and bed sheets.

INTERNAL EXAMINATION:

BODY CAVITIES: The thoracic and abdominal organs are in their normal anatomic positions. The body cavities contain no adhesions or abnormal collections of fluid.

HEAD: See EVIDENCE OF INJURY. The spinal cord, as viewed from the cranial cavity, is unremarkable.

NECK: The soft tissues and prevertebral fascia are unremarkable. The hyoid bone and laryngeal cartilages are intact. The lumen of the larynx is not obstructed.

CARDIOVASCULAR SYSTEM: The intimal surface of the abdominal aorta is free of significant atherosclerosis. The aorta and its major branches and the great veins are normally distributed and unremarkable. The pulmonary arteries contain no thromboemboli. The pericardium, epicardium, and endocardium are smooth, glistening, and unremarkable. The endocardium is free of mural thrombi. The foramen ovale is closed. The coronary arterial system is free of significant atherosclerosis. The atrial and ventricular septa are intact. The cardiac valves are unremarkable. The myocardium is dark red-brown and firm, without focal abnormalities.

RESPIRATORY SYSTEM: The upper airway is not obstructed. The laryngeal mucosa is smooth and unremarkable, without petechiae. The pleural surfaces are smooth and glistening. The major bronchi are unremarkable. Sectioning of the lungs discloses a dark red-blue, moderately congested parenchyma.

HEPATOBIILIARY SYSTEM: The liver is covered by a smooth, glistening capsule. The parenchyma is dark red-brown and moderately congested. The gallbladder contains approximately 40 ml of dark green bile.

Case No: JP4207-07-3054Z

Name: Wages, Austin Taylor

COPY
DALLAS COUNTY
INSTITUTE OF FORENSIC SCIENCE

Page 4

GASTROINTESTINAL SYSTEM: The esophageal mucosa is gray, smooth, and unremarkable. The stomach contains approximately 20 ml of thin, tan liquid. There are no tablets or capsules. The gastric mucosa has normal rugal folds, and there are no ulcers. The small and large intestines are unremarkable externally. The appendix is present. The pancreas is unremarkable externally and upon sectioning.

GENITOURINARY SYSTEM: The capsules of both kidneys strip with ease to reveal smooth and slightly lobulated surfaces. The cortices are of normal thickness, with well-demarcated corticomedullary junctions. The calyces, pelves, and ureters are unremarkable. The urinary bladder contains approximately 10 ml of clear, yellow urine. The mucosa is gray, smooth, and unremarkable. The prostate gland is unremarkable both externally and upon sectioning.

ENDOCRINE SYSTEM: The thyroid and adrenal glands are unremarkable externally and upon sectioning.

LYMPHORETICULAR SYSTEM: The spleen is covered by a smooth, blue-gray, intact capsule. The parenchyma is dark red. The cervical, hilar, and peritoneal lymph nodes are not enlarged.

MUSCULOSKELETAL SYSTEM: The clavicles, ribs, sternum, pelvis, and vertebral column have no fractures. The diaphragm is intact.

MICROSCOPIC EXAMINATION:

Heart: No specific histopathologic abnormality is identified.

Name: Wages, Austin Taylor



FINDINGS:

1. Gunshot wound of the head:
 - a. Entrance: upper left lip.
 - b. Injuries: fractures of facial bones, calvarium and basilar skull; perforation of brain parenchyma; subdural hemorrhage (10 ml).
 - c. Exit: right occipital scalp.
 - d. Direction: front to back, upward, and slightly left to right.
 - e. Range: 7-3/4 inches in maximum spread of stippling; soot on skin.
2. Subscalpular hemorrhage.
3. History that the decedent was found supine on his bed with a .30-30 long gun rifle near his right leg, and that his mother (related case #JP4206-07) was found dead in another room of the house.

CONCLUSION:

Based upon the autopsy findings and the history available to us, it is our opinion that Austin Taylor Wages, a 16-year-old white male, died as the result of a gunshot wound of the head. At this time, investigation is ongoing as to the manner of death and, therefore, the manner remains undetermined. If subsequent investigation reveals additional information, this report may be amended.

MANNER OF DEATH: Undetermined.

TOXICOLOGY:

Blood: Alcohols and Acetone - negative.
 Cannabinoid Screen - negative.
 Drug Screen - negative.

Vitreous: Alcohols and Acetone - negative.

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Protocol typed by Maybelle Doughty