

OFFICE OF THE MEDICAL EXAMINER

2500 North Fort Valley Road
Flagstaff, Arizona 86001

REPORT OF AUTOPSY

PATHOLOGIC DIAGNOSES

- I. Blunt force injuries, head and neck**
 - a. Abrasions and contusions
 - b. Multifocal closed skull fractures with cerebral/cerebellar lacerations and partial extrusion of brain parenchyma
- II. Blunt force injuries, thorax and abdomen**
 - a. Abrasions
 - b. Rib fractures, anterior
 - c. Fracture of sternum
- III. Blunt force injuries, extremities**
 - a. Abrasions, contusions and lacerations
 - b. Fracture of left humerus
 - c. Dislocation of left hip

CAUSE OF DEATH: Multiple blunt force injuries

MANNER: Suicide

REPORTED CIRCUMSTANCES OF DEATH

According to reports, on May 13th 2019, this 42-year-old male was witnessed to jump off an overpass on Interstate 40, where he was then struck by a pickup truck. He was pronounced dead at the scene at 0748 hours on May 13th, 2019.

INTRODUCTION

An autopsy is performed on a body identified as Isaac Kappy at the Coconino County Office of the Medical Examiner on the 14th day of May, 2019 at 1115 hours. The body is received in a sealed plastic pouch with the seal number 2094473.

The autopsy assistant is Maisie Kulpinski.

EXTERNAL EXAMINATION

The body is that of a well-developed, well-nourished adult Caucasian male who weighs 132 pounds, is 70 inches in length, and appears compatible with the reported age of 42 years.

The body is received clad in 2 black shoes, white pants, multicolored belt, white and black sweater, and light blue shirt. Personal effects include pack of cigarettes.

There is a red Coconino County Office of the Medical Examiner identification band, bearing the decedent's name and case number, around the left ankle.

The unembalmed body is cool to the touch. Rigor mortis is set. Fixed red purple livor mortis extends over the posterior surfaces of the body, except in areas exposed to pressure.

The scalp hair is brown and measures approximately 9 inches in length over the crown. The decedent wears a 1 inch in length, brown mustache and beard. The irides are blue. The left pupil measures 0.5 cm, and the right pupil measures 0.7 cm. The corneas are translucent. The ears, nose, and lips are not unusual. The teeth are natural. The neck is unremarkable.

The thorax is well developed and symmetrical. The abdomen is flat. The back is unremarkable. Around the anus are external hemorrhoids measuring up to $\frac{3}{4}$ inches. The penis is circumcised. The testes are bilaterally descended within the scrotum.

The upper and lower extremities are well developed and symmetrical without absence of digits.

Identifying marks and scars are not readily apparent.

Evidence of recent medical intervention includes defibrillator pads, oral brace, and intraosseous catheter within left shin connected to 1000 ml bag a 0.9% sodium chloride.

EVIDENCE OF INJURY

HEAD AND NECK: The head is misshapen due multifocal palpable skull fractures. There is a fracture of the midline maxilla which extends into the cranial vault, and there is brain parenchyma within and extruding from the oral and nasal cavities. Over the left aspect of the forehead is a 2 $\frac{1}{4}$ x 1 inch red abrasion. Over the right aspect of the forehead are 3 red abrasions measuring up to 1 inch. Over the right orbital region are red abrasions measuring up to $\frac{1}{4}$ inch and purple contusions measuring up to $\frac{1}{2}$ inch. Over the medial aspect the left orbit is a $\frac{1}{2}$ inch

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purple contusion. There are scleral contusions measuring up to $\frac{1}{4}$ inch with focal petechiae. There is blood emanating from the ear canals. Internal examination reveals hemorrhage associated with multifocal skull fractures with sparing of the mandible. Portions of the frontal lobes are missing (brain parenchyma at scene) and there are deep cerebral lacerations of the residual frontal lobes, inferior temporal lobes and cerebellum.

THORAX AND ABDOMEN: Over the lower left aspect of the chest and upper left aspect of the abdomen is a 9 x 6 inch roughly rectangular red brush abrasion with areas of black grease-like material. On the mid-aspect of the back is a $\frac{1}{4}$ inch red abrasion. Internal examination reveals anterior fractures of left ribs 4-8 and right rib 4. There is a fracture the sternum at intercostal space 3.

UPPER EXTREMITIES: On the top of the right shoulder is a $\frac{3}{4}$ inch red abrasion and $\frac{1}{4}$ inch red abrasion. On the right elbow is a $\frac{1}{2}$ inch red abrasion. On the tip of the right thumb is a $\frac{1}{4}$ healing red abrasion. On the front of the left upper arm is a $3\frac{1}{2}$ x 3 inch area of red abrasion with an overlying $1\frac{1}{4}$ inch laceration and an underlying fracture of the left humerus. Over the left elbow is a $1\frac{1}{4}$ inch abraded laceration. Over the back of the left wrist and hand are red abrasions measuring up to $1\frac{1}{8}$ inch. On the front of left forearm is a $1\frac{1}{2}$ inch red abrasion. On the front of the left wrist is a $\frac{1}{2}$ inch red abrasion.

LOWER EXTREMITIES: Over the right hip is a $3\frac{1}{2}$ x 2 inch area of contused red abrasion. Above the right knee is a 1 x $\frac{1}{2}$ inch red abrasion. Below the right knee is a $1\frac{1}{2}$ x $\frac{3}{4}$ inch red abrasion. On the left knee is a $2\frac{1}{4}$ x 1 inch area of red abrasion. On the back of the left thigh is a 9 x 7 inch semicircular area of red and white abrasions. On the back the right thigh is a $1\frac{1}{8}$ inch red abrasion. On the back of the right ankle is a $2\frac{1}{2}$ x 1 inch area of red abrasion. On the lateral aspect of the right ankle is a $\frac{1}{2}$ inch red abrasion and a $\frac{3}{4}$ inch red abrasion. On the left ankle is a $\frac{1}{2}$ inch red abrasion. Over the top of the left foot are red abrasions measuring up to $\frac{1}{4}$ inch. The left hip is dislocated.

INTERNAL EXAMINATION

BODY CAVITIES: No adhesions are in any of the body cavities. All body organs are present in normal and anatomic position. The subcutaneous fat layer of the abdominal wall is 1 cm thick.

HEAD: The injuries have been previously described. The leptomeninges are thin and delicate. The residual brain weighs 1260 grams. The Circle of Willis is normally distributed and appears patent. Sections through the residual cerebral hemispheres reveal no natural disease within the cortex, subcortical white matter, or deep parenchyma of either hemisphere. The spinal cord is not examined.

NECK: Examination of the soft tissues of the neck, including strap muscles and large vessels, reveals no abnormalities. The hyoid bone and larynx are intact. The oropharynx is grossly normal and unobstructed. The laryngeal mucosa is smooth and unremarkable without petechiae. The tongue is normal.

CARDIOVASCULAR SYSTEM: The heart weighs 260 grams. The pericardial sac is free of significant fluid or adhesions. The epicardial and pericardial surfaces are smooth and glistening. The coronary arteries arise normally and follow the distribution of a right dominant pattern with

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no significant atherosclerotic stenoses. The chambers and valves bear the usual size/position relationship and are morphologically normal. The valve ring circumferences measure: tricuspid valve, 7.5 cm; pulmonic valve, 5 cm; mitral valve, 8 cm and aortic valve 6 cm. The valves are free of vegetations. The myocardium is dark red-brown, firm and unremarkable; the atrial and ventricular septa are intact. The left ventricle measures 1.1 cm, and the right ventricle measures 0.3 cm in thickness at 1 cm below the valve annulus. The interventricular septum measures 1.2 cm. The aorta arises normally and follows the usual course with no significant atherosclerosis. The vena cava and major tributaries return to the heart in the usual distribution and are unremarkable. There is no saddle embolus on in situ examination of the pulmonary trunk.

RESPIRATORY SYSTEM: The right and left lungs weigh 910 and 550 grams, respectively. The pleural surfaces demonstrate mild to moderate anthracotic streaking. The upper and lower airways are patent and the mucosal surfaces are smooth, yellow-tan, and unremarkable. The pulmonary parenchyma is dark red-purple and the cut surfaces exude moderate amounts of blood and frothy fluid. The pulmonary arteries are normally developed and patent.

HEPATOBIILIARY SYSTEM: The liver weighs 1130 grams. The hepatic capsule is smooth, glistening and intact, covering dark red-brown parenchyma. The gallbladder contains 3 mL of viscid bile. The extrahepatic biliary tree is patent.

DIGESTIVE SYSTEM: The esophagus is lined by gray-white smooth mucosa. The gastric mucosa is arranged in the usual rugal folds, and the lumen contains approximately 75 mL of light brown fluid. The appendix is present. The small bowel has a smooth and glistening serosa and contains yellow fluid. The colon is unremarkable and contains light brown semi-formed stool. The pancreas has a normal yellow-white lobulated appearance, and the ducts are clear.

GENITOURINARY TRACT: The right and left kidneys weigh 100 and 110 grams, respectively. The renal capsules strip with ease from the underlying smooth, red-brown, firm cortical surfaces. On the superior surface of the right kidney is a 0.4 cm smooth lined serous filled cyst. The cortices are of normal thickness and delineated from the medullary pyramids. The calyces, pelves, and ureters are unremarkable. The urinary bladder contains approximately 350 mL of clear, yellow urine; the mucosa is gray-tan and smooth. The prostate gland and seminal vesicles are unremarkable.

RETICULOENDOTHELIAL SYSTEM: The spleen weighs 120 grams and has a smooth intact capsule covering red-purple, soft parenchyma. The splenic lymphoid follicles are unremarkable. No abnormal lymph nodes are identified. The bone marrow of a thoracolumbar vertebral body is red-purple and homogeneous without evidence of focal abnormality. No thymus remnant is identified.

ENDOCRINE SYSTEM: The pituitary, thyroid and adrenal glands are unremarkable.

MUSCULOSKELETAL SYSTEM: Other than the previously described injuries, the bony framework, supporting musculature and soft tissues are not unusual.

MICROSCOPIC EXAMINATION

Not performed.

ADDITIONAL STUDIES

TOXICOLOGY: Postmortem toxicological analysis of femoral blood is positive for cannabinoid metabolite (THC-COOH: 4.0 ng/mL), nicotine and cotinine and is negative for other drugs tested (see toxicology report). Postmortem toxicological analysis of urine is negative for drugs tested (see toxicology report).

EVIDENCE

The following items are collected and preserved: blood tube, dried blood sample, pulled scalp hair.

OPINION

Based on the autopsy findings and investigative history that is available to me, it is my opinion that, Isaac Kappy died as a result of multiple blunt force injuries. Reportedly, the decedent was witnessed to jump off an overpass on Interstate 40 and was subsequently struck by a pickup truck.

The manner of death is suicide.

7/14/2019

Date Signed

Lawrence A. Czarniecki, D.O.

Lawrence A. Czarniecki, D.O.
Medical Examiner