

**OFFICE OF THE MEDICAL EXAMINER
WEST TENNESSEE REGIONAL FORENSIC CENTER**

REPORT OF INVESTIGATION BY COUNTY MEDICAL EXAMINER

Shelby County Medical Examiner: Marco Ross M.D.

Judicial District Number: 30

District Attorney: Honorable Amy Weirich

State Number: 21-79-4134

Case Number: MEC2021-2619

Name of Decedent Adolph Robert Thornton Jr.	Age 36 Years	Race Black	Date of Birth 07/27/1985	Sex Male
Address 1870 Hearst Ave, Memphis, TN 38114				
Date of Death 11/17/2021 12:39 PM	Type of Death Suspected Homicide		Investigating Agency/Complaint #: Memphis Police Department, Complaint #: 2111007652ME	
Place of Death 2370 Airways Blvd, Memphis, 38114, TN				
Narrative Summary Reportedly this 36 year-old male black tentatively identified as Adolph Thornton, Jr. was shot while at a local business. Memphis Fire and Memphis Police Department responded to the scene 2370 Airways Blvd. Paramedic confirmed Sims asystole at 1239 hours. This office was notified of the death at 1512 hours by Memphis Police Sgt. J. Robinson who provided the aforementioned information. [REDACTED] A, Baker responding to the scene. A brief body examination was performed and the decedent and scene documented with photography. The decedent was transported to the West Tennessee Regional Forensic Center for further [REDACTED] m, positive identification, and final disposition. Pamela D. Ware, Investigator 11/17/2021				
Jurisdiction Accepted Yes	Autopsy Ordered Yes		Toxicology Ordered Yes	
Physician Responsible for Death Certificate Juliette Scantlebury, M.D.				
Cremation Approved No	Funeral Home N.J. Ford & Sons			
Cause of Death Gunshot Wounds of the Head, Neck, and Torso				
Contributory Cause of Death				
Manner of Death Homicide				

West Tennessee Regional Forensic Center
Office of the Medical Examiner
637 Poplar Avenue

Memphis, Tennessee 38105-4510

phone (901) 222-4600 Fax (901) 222-4645

REPORT OF AUTOPSY EXAMINATION

CASE NUMBER: 2021-2619

DECEDENT: Adolph Thornton, Jr.

AGE: 36

RACE: Black

SEX: Male

Authorized by: Marco A. Ross, M.D. **Received from:** Shelby County

Date of External Examination: 11/18/2021

Time: 1248

Body Identified by: Fingerprints

Persons present at examination: Jasmine Shorter

PATHOLOGICAL DIAGNOSES

I. Gunshot Wounds of the Torso

i. Gunshot Wounds:

- A. Right back
- B. Right back
- C. Right lower back
- D. Left back
- E. Left back
- F. Left back
- G. Left back

ii. Exit Wounds:

- H. Left chest
- I. Left abdomen (x2)
- J. Left abdomen
 - a. Hemothoraces (750 ml)
 - b. Track, forward
 - c. Injuries: upper lobe of the right lung, left lobe of the liver, spleen, thoracic aorta, small intestine, right 3rd (and 3rd intercostal space), left 9th and 10th ribs, right 7th and 8th ribs, T8-T9 vertebral body, diaphragm. Contusion of the lower lobe of the left lung

- d. Bullet core fragment, right chest
 - i. Largest fragment recovered
- K. Entrance, right back
 - 1. Track, downward, forward and leftward
 - 2. Track via skin, soft tissue to rest in the lower mid back (bullet recovered)
 - i. Fractures, spinous processes of L1-L2 vertebrae
- II. Gunshot Wounds of the Head and Neck
 - L. Right chin
 - M. Right neck x 3
 - a. Track, leftward and backward
 - b. Injuries, tongue, skeletal muscle, right mandible (comminuted fracture), alveolar fractures (multiple)
 - c. Bullet fragments, right jaw (multiple recovered)
- III. Gunshot Wounds of the Upper Extremities
 - N. Right anterior forearm

 - O. Right wrist
 - P. Right wrist
 - 1. Track, undetermined
 - 2. Injuries skin, right radius, right ulna, skeletal muscle

 - Q. Right forearm
 - 1. Track undetermined
 - 2. Track via skin and skeletal muscle
 - R. Left anterior forearm
 - 1. Track, downward, backward and leftward
 - 2. Track via skin to end blindly in the soft tissue
 - S. Left anterior forearm
 - 1. Track, downward, backward, and rightward
 - 2. Track via skin, to end blindly in the soft tissue
 - T. Right posterior arm
 - U. Right axilla
- IV. Other Injuries
 - i. Gunshot Related wounds, head, neck, upper extremities, chest
 - ii. Punctate abrasions, left arm, left forearm
 - iii. Lacerations, multiple
 - iv. Abrasions, multiple

- V. Remote Injuries
 - i. Remote bullets, left thigh and right lobe of liver (recovered)
 - ii. Remote bullet base, right buttock (recovered)

CAUSE OF DEATH: Gunshot Wounds of the Head, Neck, and Torso

MANNER OF DEATH: Homicide

The facts stated herein are correct to the best of my knowledge and belief.

****Electronically signed by Juliette Scantlebury, M.D. on Tuesday, February 22, 2022****

Juliette B. Scantlebury, M.D., Pathologist Date

EVIDENCE OF INJURY

Note: Wound numbering, body landmark descriptions and dimensions of the following injuries are described in the attached table at the end of this document. The assignment of wound numbers is only a representation of the order in which the wounds were assessed.

There is a gunshot entrance wound of the right back. There is a gunshot wound of the right back. There is a gunshot wound of the right lower back. There is a gunshot entrance wound of the right back. There is a gunshot entrance wound of the left back. There is a gunshot entrance wound of the left back. There is a gunshot entrance wound of the left back. There is a gunshot entrance wound of the left chest. There are gunshot exit wounds of the left abdomen. There is a gunshot exit wound of the left abdomen.

There a gunshot wound of the right chin. There are gunshot wounds of right neck.

There is a gunshot wound of the right arm. There is a gunshot wound of the right axilla. There is a gunshot wound of the right anterior forearm. There is a gunshot wound of the right forearm. There is a gunshot wound of the right wrist. There is a gunshot wound of the right wrist.

There is a gunshot wound of the left anterior forearm. There is a gunshot wound of the left anterior forearm.

There is a 2 x 0.9 cm gunshot related wound of the forehead. There is a 3 x 0.9 cm gunshot related wound of the forehead. There is a 2 x 0.3 cm gunshot related wound of the right neck. There is a 1 x 0.4 cm gunshot related wound of the left temple. There is a 1.5 x 0.5 cm gunshot related wound of the left face. There is an 11 x 8 cm area of gunshot related wounds and abrasions of the right shoulder. There is a 2 x 0.9 cm slit like gunshot related wound of the right chest. There is a 3 x 2 cm gunshot related wound of the right chest. There is a 2 x 0.9 cm gunshot related wound of the right upper

back. There is a 0.5 x 0.5 cm gunshot related wound of the center lower back (5). There is a 3.1 x 0.5 cm gunshot related wound of the right lower back.

There is a 2 x 1 cm gunshot related wound of the right forearm. There is a 0.5 x 0.5 cm gunshot related wound of the right forearm. There is an 8 x 8 cm area of punctate abrasions of the left arm. There is a 7 x 1 cm area of punctate abrasions of the left arm. There is a 26 x 11 cm area of punctate abrasions of the left posterior forearm. There is a 4 x 2 cm area of punctate irregular abrasions of the lower back.

There is a 4 x 2 cm area of slit like wounds of the left forearm. There are linear abrasions of the left anterior forearm.

There is a small laceration of the left nose. There is a linear red abrasion of the nose.

There is a 1.2 x 0.5 cm red abrasion of the right back. There is a 1.5 x 1 cm abrasion of the right neck. There is a 6 x 1 cm red abrasion of the right neck. There are fine abrasions of the right arm.

DETAILED DESCRIPTION OF INJURIES

Note: Wound numbering, body landmark descriptions and dimensions of the following injuries are described in the attached table at the end of this document. The assignment of wound numbers is only a representation of the order in which the wounds were assessed.

Gunshot Wounds of the Torso

A. There is a gunshot entrance wound of the right back (1). This wound is located 25.5 cm below the shoulder and 5.5 cm right of the posterior midline. The hole measures 10 x 10 mm. It is round with focally inverted edges. The edges have an abrasion ring measuring 5 mm in greatest dimension and is superior and lateral to the wound. No powder stipple or soot is identified.

B. There is a gunshot wound of the right back (3). This wound is located 27 cm below the level of the shoulder and 12 cm right of the posterior midline. The hole measures 20 x 10 mm. It is irregularly round with minimal to no abrasion ring. No powder stipple or soot is identified.

C. There is a gunshot wound of the right lower back (4). This wound is located 44 cm below the level of the shoulder and 8 cm right of the posterior midline. The hole measures 10 x 10 mm. It is irregularly round with minimal to no abrasion ring. No powder stipple or soot is identified.

D. There is a gunshot entrance wound of the left back (6). This wound is located 29 cm below the level of the shoulder and 9.9 cm left of the posterior midline. The hole

measures 12 x 9 mm. It is round with focally inverted edges. The edges have an abrasion ring measuring 4 mm in greatest dimension and is medial and superior to the wound. No powder stipple or soot is identified.

E. There is a gunshot entrance wound of the left back (7). This wound is located 31 cm below the level of the shoulder and 9 cm left of the posterior midline. The hole measures 10 x 9 mm. It is round with focally inverted edges. The edges have an abrasion ring measuring 5 mm in greatest dimension and is superior and lateral to the wound. No powder stipple or soot is identified.

F. There is a gunshot entrance wound of the left back (8). This wound is located 37.5 cm below the level of the shoulder and 5 cm left of the posterior midline. The hole measures 10 x 9 mm. It is round with focally inverted edges. The edges have an abrasion ring measuring 2 mm in greatest dimension and is superior and medial to the wound. No powder stipple or soot is identified.

G. There is a gunshot entrance wound of the left back (9). This wound is located 42 cm below the level of the shoulder and 11 cm left of the posterior midline. The hole measures 15 x 10 mm. It is round with focally inverted edges. The edges have an abrasion ring measuring 3 mm in greatest dimension and is superior to the wound. No powder stipple or soot is identified.

Note: Wounds A-G have atypical features and varying penetrance. Wound types were assigned whenever possible.

H. There is a gunshot exit wound of the left chest (15). This wound is located 33 cm below the level of the shoulder and 10 cm left of the anterior midline. The hole measures 10 x 10 mm. It is irregular with clean edges.

I. There are gunshot exit wounds of the left abdomen (16). These wounds are located 3 above the level of the iliac crest and 14 cm left of the anterior midline. The superior hole measures 20 x 10 mm. The inferior hole measures 15 x 10 mm. They are irregular with clean edges.

J. There is a gunshot exit wound of the left abdomen (17). This wound is located 1.5 above the level of the iliac crest and 13 cm left of the anterior midline. The hole measures 10 x 10 mm. It is irregular with clean edges.

Note: The injuries related to the previously mentioned wounds are: upper lobe of the right lung, left lobe of the liver, spleen, thoracic aorta (2 x 2 cm hole and 1 x 1 cm hole), small intestine, left 9th and 10th ribs, right 3rd (and 3rd intercostal space), right 7th, right 8th

ribs, T8-T9 vertebral body, and diaphragm. There is a contusion of the lower lobe of left lung.

A bullet core fragment in the right chest wall was recovered. There are smaller bullet fragments with minimal evidentiary value noted but were not recovered.

Some of the posterior wounds have atypical appearances for entrance wounds. All anterior wounds are more consistent with exit wounds. The wound tracks are commingling along the wound path and injuries, thus preventing accurate assignment of gunshot entrance wound to exit wound and/or bullet fragments. However, the assessment of the wounds indicates that the most common trajectory of the bullet wound paths is forward.

K. There is a gunshot entrance wound of the right back (2). This wound is located 26 cm below the level of the shoulder and 7 cm left of the posterior midline. The hole measures 25 x 15 mm. It is elongated and round with focally inverted edges. The edges have an abrasion ring measuring 30 mm in greatest dimension and is superior and lateral to the wound. No powder stipple or soot is identified. X-rays show a bullet in the lower mid back associated with this wound. The bullet is recovered and submitted as evidence. Evaluation of this wound indicates that it is an entrance wound. Significant hemorrhage is present in the wound track. The path of this shot is downward, forward and leftward. The track of this bullet has been traced to have passed via the skin, soft tissue to rest in the lower mid back. There are associated injuries of the spinous processes of the 1st and 2nd lumbar vertebrae.

Note: Bullet fragments were recovered on the skin surfaces of the torso. They have been submitted as evidence.

Gunshot Wounds of the Head and Neck

L. There is a gunshot wound of the right chin (18). This wound is located 5 cm below the level of the mastoid process and 5 cm right of the anterior midline. The hole measures 70 x 60 mm. It is irregularly round with minimal to no abrasion ring. No powder stipple or soot is identified. There is significant comminuted fracturing of the right mandible with alveolar fracturing.

M. There are gunshot wounds of the right neck (19). These wounds are located 9 cm below the level of the mastoid process and 6 cm right of the anterior midline. The medial hole measures 30 x 20 mm. The lateral hole measures 40 x 30 mm. The superior hole measures 15 x 10 mm. They are irregularly round with minimal to no

abrasion ring. No powder stipple or soot is identified. Posterior to these wounds is a 6 x 2 cm area of dark hyperpigmentation of the skin.

Note: The wounds of the right chin and right neck are associated with diffuse distribution of bullet fragmentation of varying size. The largest fragments are recovered from the right jaw and submitted as evidence. There are injuries to the right mandible, skeletal muscle and tongue.

Gunshot Wounds of the Upper Extremities

N. There is a gunshot wound of the right anterior forearm (11). This wound is located 5 cm above the level of the wrist and is at the anterior midline. The hole measures 30 x 20 mm. It is irregular with clean edges. No powder stipple or soot is identified. The wound ends blindly in the soft tissue. No projectile was associated with this wound.

O. There is a gunshot wound of the right wrist (20). This wound is located at the level of the wrist and is 1.5 cm left of the posterior midline. The hole measures 10 x 10 mm. It is irregular with clean edges. No powder stipple or soot is identified. No projectile was associated with this wound.

P. There is a gunshot wound of the right wrist (21). This wound is located at the level of the wrist and is at the posterior midline. The hole measures 30 x 20 mm. It is irregular with clean edges. No powder stipple or soot is identified. No projectile was associated with this wound.

Note: the wounds of the right wrist (20 and 21) are related but they have atypical features preventing accurate assignment of wound types. Therefore, the wound trajectory cannot be determined. The associated injuries to these wounds are: fractures of the right radius and ulna and injury to the skeletal muscle. No projectile was associated with this wound.

Q. There is a gunshot tangential wound of the right forearm (12). This wound is located 15 cm below the level of the elbow and 1 cm right of the anterior midline. The hole measures 55 x 30 mm. It is elongated with irregular edges. No powder stipple or soot is identified. X-rays show no bullet fragments or lead associated with this wound. Evaluation of this wound indicates that it is a tangential wound. The path of this shot is undetermined. The track of this bullet has been traced to have passed via skin and skeletal muscle. No projectile was associated with this wound.

R. There is a gunshot wound of the left anterior forearm (13). This wound is located 21 cm above the level of the wrist and 5 cm right of the anterior midline. The hole measures 15 x 10 mm. It is irregular with clean edges. No powder stipple or soot is

identified. The path of this shot is downward, leftward and backward. The wound ends blindly in the soft tissue. No projectile was associated with this wound.

S. There is a gunshot wound of the left anterior forearm (14). This wound is located 14 cm above the level of the wrist and 3 cm right of the anterior midline. The hole measures 10 x 10 mm. It is irregular with clean edges. No powder stipple or soot is identified. The path of this shot is downward, backward and rightward. No projectile was associated with this wound.

T. There is a gunshot wound of the right posterior arm (10). This wound is located 12 cm below the level of the shoulder and 5 cm left of the right posterior midline. The hole measures 10 x 5 mm. It is irregularly round with clean edges. There is a 1 mm concentric abrasion ring. No powder stipple or soot is identified. The wound ends blindly in the skeletal muscle. No projectile was associated with this wound.

U. There is a gunshot wound of the right axilla (22). This wound is located 14 cm below the level of the shoulder and is at the anterior midline. The hole measures 30 x 15 mm. It is irregular with clean edges. No powder stipple or soot is identified. The wound ends blindly in the skeletal muscle. No projectile was associated with this wound.

Remote Injuries:

A remote bullet from the left thigh, a remote bullet from the right lobe of liver and a remote bullet base in the right buttock were recovered and submitted as evidence.

EXTERNAL EXAMINATION

Rigor:	Mild
Livor:	Not apparent.
Algor:	Cold
Weight:	173 lbs
Length:	73 inches
Eyes:	Brown
Hair:	Black
Scars:	As diagrammed
Tattoos:	As diagrammed and photographed
Clothing:	As inventoried. Inspection of the clothing showed multiple defects correlating with gunshot wound defects.
Personal Effects:	As inventoried.
Therapy:	There are 12 EKG leads.
General	The decedent is received in a sealed body bag. The bag is opened to

External Examination: show the body of a well-developed man. The corneas are slightly cloudy, the conjunctivae and sclerae are tan-white and free of hemorrhage and petechiae. The dentition is natural. The ears are pierced for earrings. The chest and abdomen are symmetrical. The external genitalia are uninjured. The lower extremities are unremarkable.

X-rays: There are bullet fragments in the right jaw, a bullet in the lower mid back, a remote bullet in the right liver, remote bullet of the left thigh, bullet core fragment of the right chest, remote bullet in the right buttock.

INTERNAL EXAMINATION

All organs below are normal except where indicated otherwise.

PLEURA: There is 500 ml of blood in the right pleural cavity and 250 ml of blood in the left pleural cavity. There are adhesions in the right pleural cavity.

PERITONEUM: There is 375 ml of blood in the peritoneal cavity. There are adhesions.

PERICARDIUM: Unremarkable.

NECK ORGANS: Unremarkable.

HEART: The heart weighs 310 gm. Unremarkable.

AORTA: The injury of the aorta has been previously described.

LUNGS: Right 402 gm. Left 414 gm. The injuries of the lungs have been previously described.

LIVER: 1684 gm. The injury of the liver has been previously described. A remote bullet was recovered in the right lobe.

GALLBLADDER: Unremarkable.

SPLEEN: 122 gm. The injury of the spleen has been previously described.

PANCREAS: There is peripancreatic soft tissue acute hemorrhage.

ADRENALS: There is periadrenal soft tissue acute hemorrhage.

GI TRACT: The injury of the small intestine has been previously described. The stomach contains approximately 20 mL of moderately digested food. The appendix is present.

KIDNEYS: Right 112 gm. Left 128 gm. Unremarkable.

BLADDER: Unremarkable. Contains 120 mL of urine.

GENITALIA: Unremarkable.

BRAIN AND MENINGES: The brain weighs 1566 gm.

BONY SKELETON: There are fractures of the right radius and right ulna. There are fractures of the left 9th, left 10th, right 3rd, right 7th, and right 8th ribs. There are fractures of the mandible with associated alveolar fractures.

TOXICOLOGY SPECIMENS

Samples of blood, urine, vitreous fluid, and liver are collected.

SUMMARY

Adolph Thornton, Jr. is a 36-year-old man with gunshot wounds of the head, neck and torso. With consideration of the investigation and the autopsy findings, the cause of death is Gunshot Wounds of the Head, Neck, and Torso and the manner of death is homicide.

Table Key						
Location	Distance from body marker		Distance from midline	Laterality	Wound Description	Wound type
R-Right	MP-Mastoid Process	Ab- Above	R-Right	Sup-superior	Tang- Tangential	E-Entrance
L-Left	Sh-Shoulder	Bel-Below	L-Left	Inf/I-Inferior	Irreg- Irregular	X-Exit
Ant-anterior	E-Elbow	@-at the level of	AM-Anterior midline	Lat- Lateral	GSRW- Gunshot related wound	Gr- Graze
Post-Posterior	IC-Iliac Crest		PM- Posterior Midline	Med-Medial	Roun/d-round	Tan-Tangential
	K- Knee		@-at the midline	Conc-Concentric	Irreg. roun/d- irregularly round	Ind- Indeterminate
	An-Ankle				ST- involves soft tissue	A-atypical
					SKM- involves skeletal muscle	GSRW-Gunshot related Wound

Case #: 2021-2619

#	Location	Distance from body marker	Distance from midline	Dimensions (mm)	Abrasion ring (mm) and laterality	Description of wound	Soot (mm) And laterality	Stipple (mm) And laterality	Wound type
1.	R back	26 Bsh	5 SRPM	10x10	5 sup lat	round	-	-	E
2.	R back	26 Bsh	7 L RPM	25x15	30 sup lat	elong round	-	-	E
3.	R back	27 Bsh	12 RPM	20x10	-	irreg	-	-	GSW
4.	Lower R back	44 Bsh	8 RPM	10x10	-	irreg	-	-	GSW
5.	Center Lower back	49 Bsh	@ PM	5x5	-	irreg	-	-	GSRW
6.	L Back	29 Bsh	9.9 RPM	12x9	4 med sup	round	-	-	E
7.	L Back	31 Bsh	9 LPM	10x10	5 med sup	round	-	-	E
8.	L Back	37 SBsh	5 LPM	10x9	2 sup med	round	-	-	E
9.	L Back	42 Bsh	11.5 LPM	15x10	3 sup	round	-	-	E
10.	POST R arm	12 Bsh	5 RPM	10x5	1 conc	irreg round	-	-	GSW
11.	POST FA	5 AW	@ AM	30x20	-	irreg	-	-	GSW
12.	R FA	15 BB	1 RAM	55x30	-	irreg	-	-	Tang?
13.	L Ant FA	21 AW	5 RAM	15x10	-	irreg	-	-	GSW
14.	L Ant FA	14 AW	3 RAM	10x10	-	irreg	-	-	GSW
15.	L chest	33 Bsh	10 LAM	10x10	-	irreg	-	-	X
16.	L Abd	3 AIC	14 LAM	20x10 sup 15x10 inf	-	irreg	-	-	X
17.	L Abd	1.5 AIC	13 LAM	10x10	-	irreg	-	-	X
18.	R Chin	5 Bsh	5 RAM	70 x 60	-	irreg	-	-	GSW
19.	R Neck	96 MR	6 RAM	30x20 med 40x30 lat	1.5 sup	irreg	-	-	GSW
20.	R wrist	@ wrist	1.5 RPM	10x10	-	irreg	-	-	GSW
21.	R wrist	@ wrist	@ Post mid	30x20	-	irreg	-	-	GSW
22.	Raxilla	14 Bsh	@ AM	30x15	-	irreg	-	-	GSW



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Robert A. Middleberg, PhD, F-ABFT, DABCC-TC, Laboratory Director

Toxicology Report

Report Issued 12/20/2021 14:09

Patient Name THORNTON, JR., ADOLPH
Patient ID 2021-2619
Chain NMSCP148384
Age 36 Y **DOB** 07/27/1985
Gender Male
Workorder 21412911

To: 10505
University of Tennessee Forensic Center
Attn: Marco Ross
637 Poplar Avenue
Memphis, TN 38105

Page 1 of 3

Positive Findings:

<u>Compound</u>	<u>Unit</u>	<u>Units</u>	<u>Matrix Source</u>
Delta-9 THC	1.2	ng/mL	001 - Iliac Blood

See Detailed Findings section for additional information

Testing Requested:

<u>Analysis Code</u>	<u>Description</u>
8041B	Postmortem, Basic w/Vitreous Alcohol Confirmation, Blood (Forensic)

Specimens Received:

<u>ID</u>	<u>Tube/Container</u>	<u>Volume/ Mass</u>	<u>Collection Date/Time</u>	<u>Matrix Source</u>	<u>Labeled As</u>
001	Gray Top Tube	3.75 mL	11/18/2021	Iliac Blood	MEC# 2021-2619
002	Gray Top Tube	11 mL	11/18/2021	Heart Blood	MEC# 2021-2619
003	Red Top Tube	5 mL	11/18/2021	Vitreous Fluid	MEC# 2021-2619
004	White Plastic Container	40 mL	11/18/2021	Urine	MEC# 2021-2619
005	White Plastic Container	46.5 g	11/18/2021	Liver Tissue	MEC# 2021-2619

All sample volumes/weights are approximations.
Specimens received on 11/24/2021.



Detailed Findings:

Analysis and Comments	Result	Units	Rpt. Limit	Specimen Source	Analysis By
Delta-9 THC	1.2	ng/mL	0.50	001 - Iliac Blood	LC-MS/MS

Other than the above findings, examination of the specimen(s) submitted did not reveal any positive findings of toxicological significance by procedures outlined in the accompanying Analysis Summary.

Reference Comments:

- Delta-9 THC (Active Ingredient of Marijuana) - Iliac Blood:
 Marijuana is a DEA Schedule I hallucinogen. Pharmacologically, it has depressant and reality distorting effects. Collectively, the chemical compounds that comprise marijuana are known as Cannabinoids.

 Delta-9-THC is the principle psychoactive ingredient of marijuana/hashish. It rapidly leaves the blood, even during smoking, falling to below detectable levels within several hours. Delta-9-carboxy-THC (THCC) is the inactive metabolite of THC and may be detected for up to one day or more in blood. Both delta-9-THC and THCC may be present substantially longer in chronic users.
 THC concentrations in blood are usually about one-half of serum/plasma concentrations. Usual peak levels in serum for 1.75% or 3.55% THC marijuana cigarettes: 50 - 270 ng/mL at 6 to 9 minutes after beginning smoking, decreasing to less than 5 ng/mL by 2 hrs.

Sample Comments:

- 001 Physician/Pathologist Name: J. Scantlebury
- 001 Autopsy ID: 2021-2619

Unless alternate arrangements are made by you, the remainder of the submitted specimens will be discarded one (1) year from the date of this report; and generated data will be discarded five (5) years from the date the analyses were performed.

Workorder 21412911 was electronically signed on 12/20/2021 13:12 by:

Brianna L. Peterson, Ph.D., F-ABFT
Forensic Toxicologist

Analysis Summary and Reporting Limits:

All of the following tests were performed for this case. For each test, the compounds listed were included in the scope. The Reporting Limit listed for each compound represents the lowest concentration of the compound that will be reported as being positive. If the compound is listed as None Detected, it is not present above the Reporting Limit. Please refer to the Positive Findings section of the report for those compounds that were identified as being present.

Acode 52198B - Cannabinoids Confirmation, Blood - Iliac Blood

-Analysis by High Performance Liquid Chromatography/ Tandem Mass Spectrometry (LC-MS/MS) for:

Compound	Rpt. Limit	Compound	Rpt. Limit
11-Hydroxy Delta-9 THC	1.0 ng/mL	Delta-9 THC	0.50 ng/mL
Delta-9 Carboxy THC	5.0 ng/mL		

Acode 8041B - Postmortem, Basic w/Vitreous Alcohol Confirmation, Blood (Forensic) - Iliac Blood

-Analysis by Enzyme-Linked Immunosorbent Assay (ELISA) for:



Analysis Summary and Reporting Limits:

Compound	Rpt. Limit	Compound	Rpt. Limit
Amphetamines	20 ng/mL	Fentanyl / Acetyl Fentanyl	0.50 ng/mL
Barbiturates	0.040 mcg/mL	Methadone / Metabolite	25 ng/mL
Benzodiazepines	100 ng/mL	Methamphetamine / MDMA	20 ng/mL
Buprenorphine / Metabolite	0.50 ng/mL	Opiates	20 ng/mL
Cannabinoids	10 ng/mL	Oxycodone / Oxymorphone	10 ng/mL
Cocaine / Metabolites	20 ng/mL	Phencyclidine	10 ng/mL

-Analysis by Headspace Gas Chromatography (GC) for:

Compound	Rpt. Limit	Compound	Rpt. Limit
Acetone	5.0 mg/dL	Isopropanol	5.0 mg/dL
Ethanol	10 mg/dL	Methanol	5.0 mg/dL