

**BOARD OF MEDICOLEGAL INVESTIGATIONS
OFFICE OF THE CHIEF MEDICAL EXAMINER**

Central Office
921 N.E. 23rd St
Oklahoma City, OK 73105
(405) 239-7141 Phone - (405) 239-2430 Fax

Eastern Division
1627 Southwest Blvd.
Tulsa, Oklahoma 74107
(918) 295-3400 Phone - (918) 585-1549 Fax

OFFICE USE ONLY

Re _____ Co _____

I hereby certify that this is a true and correct copy of the original document. Valid only when copy bears imprint of the office seal.

By _____

Date _____

REPORT OF INVESTIGATION BY MEDICAL EXAMINER

DECEDENT First-Middle-Last Names (Please avoid use of initials) PATRICK SHANE ANDERSON	Age 51	Birth Date 2/26/1971	Race WHITE	Sex M
---	-----------	-------------------------	---------------	----------

HOME ADDRESS - No. - Street, City, State
128 WEST STREET, EUCHA, OK

EXAMINER NOTIFIED BY - NAME - TITLE (AGENCY, INSTITUTION, OR ADDRESS) JANELLE DAGGETT @ OSBI	DATE 8/18/2022	TIME 4:04
---	-------------------	--------------

INJURED OR BECAME ILL AT (ADDRESS) 122 SUNNYWOOD STREET	CITY EUCHA	COUNTY DELAWARE	TYPE OF PREMISES FRIEND'S HOUSE	DATE 8/18/2022	TIME Unknown
LOCATION OF DEATH 122 SUNNYWOOD STREET	CITY EUCHA	COUNTY DELAWARE	TYPE OF PREMISES FRIEND'S HOUSE	DATE 8/18/2022	TIME 0:28
BODY VIEWED BY MEDICAL EXAMINER 1627 SOUTHWEST BLVD	CITY TULSA	COUNTY TULSA	TYPE OF PREMISES AUTOPSY SUITE	DATE 8/19/2022	TIME 8:40

TRANSPORTATION INJURY DRIVER PASSENGER PEDESTRIAN

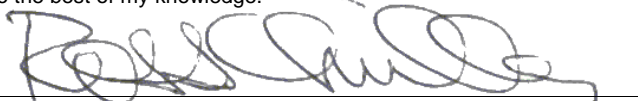
TYPE OF VEHICLE: AUTOMOBILE LIGHT TRUCK HEAVY TRUCK BICYCLE MOTORCYCLE OTHER: _____

DESCRIPTION OF BODY	RIGOR	LIVOR	EXTERNAL OBSERVATION	BLOOD	NOSE	MOUTH	EARS
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EXTERNAL PHYSICAL EXAMINATION	Jaw <input checked="" type="checkbox"/> Complete <input checked="" type="checkbox"/> Neck <input checked="" type="checkbox"/> Absent <input type="checkbox"/> Arms <input checked="" type="checkbox"/> Passing <input checked="" type="checkbox"/> Legs <input checked="" type="checkbox"/> Passed <input type="checkbox"/> Decomposed <input type="checkbox"/>	Color PURPLE Lateral <input type="checkbox"/> Posterior <input checked="" type="checkbox"/> Anterior <input type="checkbox"/> Regional _____	Beard YES _____ Hair BROWN _____ Eyes: Color HAZEL _____ Mustache YES _____ Opacities _____ Pupils: R _____ L _____ Body Length 66 IN _____ Body Weight 245 LBS _____	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
				OTHER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Significant observations and injury documentations - (Please use space below)

The decedent was a 51-year-old obese male with a gunshot wound of the chest, asynchronous minor abrasions and contusions, early, mild changes of decomposition, hypertensive cardiovascular disease, a gallbladder that contained calculi and purulent-appearing material, and toxicology results that are positive for methamphetamine and ethanol (see toxicology report).

<i>Probable Cause of Death:</i> GUNSHOT WOUND OF THE CHEST	<i>Manner of Death:</i> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Suicide <input type="checkbox"/> Homicide <input checked="" type="checkbox"/> Unknown <input type="checkbox"/> Pending <input type="checkbox"/> Not Assigned <input type="checkbox"/>	<i>Case disposition:</i> Autopsy YES _____ Authorized by ROSS MILLER MD _____ Pathologist ROSS MILLER MD _____ Not a medical examiner case <input type="checkbox"/>
	<i>Other significant conditions contributing to death (but not resulting in the underlying cause given)</i>	

MEDICAL EXAMINER: Name, and Address: ROSS MILLER MD 1627 Southwest Blvd. TULSA, OK 74107	I hereby state that, after receiving notice of the death described herein, I conducted an investigation as to the cause and manner of death, as required by law, and that the facts contained herein regarding such death are true and correct to the best of my knowledge.  Signature of Medical Examiner ROSS MILLER MD Computer generated report	8/18/2022 Date Case Initiated 1/19/2023 Date Case Finalize
---	--	---



Board of Medicolegal Investigations
Office of the Chief Medical Examiner
1627 Southwest Blvd.
Tulsa, Oklahoma 74107
(918) 295-3400 Phone
(918) 585-1549 Fax

CERTIFICATION

I hereby certify that this document is a true and correct copy of the original document. Valid only when copy bears imprint of the office seal.

By _____

Date _____

REPORT OF AUTOPSY

Decedent	Age	Birth Date	Race	Sex	Case No
PATRICK SHANE ANDERSON	51	2/26/1971	WH	M	2205381

ID By
FINGERPRINT COMPARISON

Authority for Autopsy
ROSS MILLER, M.D.

Present at Autopsy
BARBARA BASTIAANSE, MORGAN TOBEY, ROSS MILLER, M.D.

PATHOLOGICAL DIAGNOSIS

- I. Gunshot wound of the chest.**
 - A. Entrance: Circular 1/4 inch wound of the left chest that is centered 16 3/4 inches inferior to the vertex of the head; stippling and gunpowder are present; no definitive soot; no muzzle imprint.
 - B. Path: Injuries of the stomach, right renal artery, inferior vena cava, right kidney, and right retroperitoneum.
 - C. Projectile: Exited the body.
 - D. Exit: Horizontally oriented 3/4 x 3/8 inch lacerated wound of the posterolateral right lower back that is centered 26 1/2 inches inferior to the vertex of the head; wound edges reapproximate and are not abraded.
 - E. Course: Primarily front to back with deviation left to right and deviation downward.
- II. Asynchronous minor abrasions and contusions, head, neck, torso, right upper extremity, and bilateral lower extremities.**
- III. Hypertensive cardiovascular disease.**
 - A. Cardiomegaly (446 grams) with concentric left ventricular hypertrophy (1.5 – 1.6 cm) and moderate left ventricular dilatation.
- IV. Cholelithiasis with features suggestive of cholecystitis.**
- V. Obesity (body mass index = 39.5 kg/m²).**
- VI. Early, mild changes of decomposition.**
- VII. Toxicological analyses are positive for methamphetamine and ethanol (see toxicology report).**

CAUSE OF DEATH: GUNSHOT WOUND OF THE CHEST

MANNER OF DEATH: HOMICIDE

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

OCME Eastern Division

8/19/2022 8:40 AM

ROSS MILLER, MD

Pathologist

Location of Autopsy

Date and Time of Autopsy

MEDICOLEGAL INVESTIGATION

- I. Circumstances of Death:** According to Investigator reports, the decedent was a 51-year-old male who was shot with a gun by another person. Emergency personnel were notified, found the decedent in a prone position, and declared him deceased at the scene.

- II. Authorization:** The postmortem examination is performed under the authorization of the Office of the Chief Medical Examiner, Eastern Division, Tulsa, Oklahoma.

- III. Identification:** The body is scientifically identified through fingerprint comparison. Digital photographs and radiographs of the deceased are taken.

POSTMORTEM EXAMINATION

- I. Circumstances of Examination:** The postmortem examination of Patrick Shane Anderson is performed at the Office of the Chief Medical Examiner, Eastern Division, Tulsa, Oklahoma, on 08/19/2022 commencing at 8:40 hours. Assisting in the examination are Barbara Bastiaanse and Morgan Tobey.

- II. Clothing and Personal Effects:** The body is received clad in a black shirt, blue denim pants, black belt, blue plaid underwear, white socks, grey shoes, and accompanied by \$6.09 in U.S. currency (one \$5 bill; \$1.09 in coins/change), two lighters, cigarettes, and miscellaneous cards.

- III. External Evidence of Medical Therapy:** Evidence of medical intervention includes electrocardiogram pads that are present on the back and buttocks.

IV. Collections: Blood samples on filter paper, scalp hair, facial hair, pubic hair, bilateral hand bags, bilateral fingernails swabs, oral swabs, rectal swabs, socks, underwear, shirt, jeans with belt, shoes, personal effects, and money are retained and introduced as evidence.

EXTERNAL EXAMINATION

General: The unembalmed, well-preserved body is that of an adult male that appears the reported age of 51 years. The body is 66 inches in length and weighs 245 pounds (body mass index = 39.5 kg/m²). Rigor mortis has fully developed and is broken with ease. Purple livor mortis which blanches upon manual pressure covers the posterior aspects of the body, except in areas exposed to pressure. The body is cool to the touch and has been refrigerated. The body bears tattoos that are documented photographically and on a body diagram. Early, mild changes of decomposition (scattered dusky discoloration) are present.

Head and Neck: *See Evidence of Injury.* The scalp is covered by straight brown hair that measures up to 3 inches in length over the crown. Arcus senilis is absent. The sclerae are anicteric. The irides are hazel. The corneas are translucent. The conjunctivae are pale pink and free of petechiae. The ears are not unusual. The nares are patent. The oral cavity is free of laceration and contusion. The frenula are intact. The teeth appear natural. The face is covered by a mustache and beard. No fracture is palpable in the zygomatic arches. The neck is appropriately mobile, symmetrical, and free of mass and scar. Head and neck cyanosis/congestion is present and extends onto the upper chest.

Torso: *See Evidence of Injury.* Trivial scars are present across the chest. Three horizontally oriented 1/4 inch linear scars are present on the inferior right chest and right upper abdomen. Striae-type scarring is present on the bilateral flanks and extends onto the bilateral hip regions. The back and buttocks are free of scar. The external genitalia are those of a normal adult male and are free of injury.

Arms: *See Evidence of Injury.* No fracture is palpable in the long bones. The arms are free of needle track. Trivial scars are present on the anterior right forearm. Scattered scars, ranging in measurement from 1/4 – 1 inch in greatest dimension, are present on the anterior left forearm. Bags cover the hands. Five digits are on each hand. Trivial scars are present on the posterior left hand.

Legs: *See Evidence of Injury.* No fracture is palpable in the long bones. The legs are free of edema. A horizontally oriented 1/2 inch scar is present on the right knee. A 1/2 inch linear scar is present on the lateral right knee. An obliquely oriented 4 1/4 inch linear scar is present on the anterior right lower leg just inferior of the right knee. A horizontally oriented 1/2 inch linear scar is present on the anterior left thigh just superior of the left knee. A 2 x 1 inch scar is present on the medial left thigh. The bilateral lower legs demonstrate decreased to no hair and skin hyperpigmentation (right greater than left). Scattered telangiectasias are present on the posterior right lower leg. Five toes are on each foot.

EVIDENCE OF INJURY

The body bears two gunshot wounds caused by one projectile. The 12 o'clock position is superior.

Projectile #1

Entrance: Projectile #1 entered the body at gunshot wound #1, a circular 1/4 inch wound of the left chest inferior of the left nipple that is centered 16 3/4 inches inferior to the vertex of the head and 5 3/4 inches left of the anterior midline plane. The wound is encircled by an abrasion up to 1/2 inch from the wound edge and is most prominent at the 12 o'clock position. The wound is encircled by a 1 3/4 x 1 1/4 inch area of stippling. Within this stippled area is visualized gunpowder as well as an ecchymotic contusion.

Additional stippling and visualized gunpowder are found within a 1 1/2 x 1 inch yellow, dry-based abraded area located on the left chest superior of the entrance wound. The extent of the stippling away from the center of the wound is as follows: 12 o'clock, 1 1/4 inches; 3 o'clock, 1/2 inch; 6 o'clock, 3/8 inch; 9

o'clock, 3/8 inch. Inferior to the entrance wound is a separate 1 1/4 inch purple contused area. Within this contusion are a 1/4 inch laceration, 3/8 inch red, dry-based abrasion, and a 1/2 x 1/4 inch red, dry-based abrasion. Inferior to this contusion on the inferior left chest is a 4 x 1 1/4 inch yellow, dry-based abrasion. Within this abraded area is visualized gunpowder. An additional 2 1/4 x 1 1/4 inch discontinuous yellow, dry-based abraded area is present lateral of the previously described injuries on the left chest near the left axilla. The entrance wound is free of muzzle imprint. The entrance wound is free of definitive soot.

Path: The projectile perforated the skin and soft tissue of the left chest before perforating the anterolateral left 6th intercostal space in the superior aspect of the anterolateral left 7th rib. The projectile briefly entered the left pleural cavity before perforating the left hemidiaphragm. The projectile entered the peritoneal cavity and perforated the stomach, right renal artery near its origin on the aorta, the inferior vena cava, and the right kidney before perforating into the right retroperitoneum inferior of the posterior right 12th rib. The projectile perforated soft tissue and skin of the right lower back before exiting the body. The gunshot wound is associated with blood in the nares and mouth. There is at least 1500 mL of blood and gastric contents within the peritoneal cavity.

Projectile: Exited the body.

Exit: Projectile #1 exited the body at gunshot wound #2, a horizontally oriented 3/4 x 3/8 inch lacerated wound of the posterolateral right lower back. The exit wound is centered 26 1/2 inches inferior to the vertex of the head and 8 inches right posterior midline plane. The edges of the wound reapproximate and are not abraded.

Course: The course of projectile #1 is primarily front to back with deviation left to right and deviation downward.

OTHER INJURIES

Head and Neck: Trivial red and yellow abrasions are present on the forehead and nose. Two 1/4 inch purple contusions are present on the left lateral submentum just inferior of the jawline.

Torso: Scattered faint purple contusions, ranging in measurement from 1/8 – 1 inch in greatest dimension, are present on the central and right chest. A 1 inch purple and yellow contusion is present on the left abdomen. A 1/4 inch yellow, dry-based abrasion is present on the right lower abdomen. A horizontally oriented 3 x 3/16 inch yellow, dry-based linear abrasion is present on the right abdomen and right flank. Scattered yellow to yellow and purple contusions, ranging in measurement from 3/4 – 5 inches in greatest dimension, are present on the left lateral chest.

Arms: A 2 1/4 x 1 1/4 inch purple ecchymotic contusion is present on the anterior right upper arm. A 3/4 inch purple contusion is present on the medial aspect of the right antecubital fossa. A 1/2 inch red abrasion is present on the posterior right forearm.

Legs: A 3/4 inch red and purple abraded contusion and a 1/4 inch brown abrasion are present on the anterior right lower leg. Scattered red abrasions, ranging in measurement from 1/4 – 1/2 inch in greatest dimension, are present on the anterior left lower leg.

INTERNAL EXAMINATION

Body Cavities: *See Evidence of Injury.* The body is opened with the usual Y-shaped thoracoabdominal incision. Apart from mild upper left pleural adhesions, the remaining mesothelial surfaces are smooth, glistening, and free of mass and adhesion. The pericardial and pleural cavities are free of excess fluid. All body organs are present and in their usual anatomic location. The internal organs demonstrate mild changes of decomposition.

Cardiovascular System: *See Evidence of Injury.* The pericardial surfaces are smooth and glistening. The anatomy of the heart and associated vasculature is normal. The pulmonary artery is opened in-situ and is free of thrombo-emboli. The coronary arteries arise normally and follow their usual courses. The vessels are free of significant atheroma. Serial sections of the 446 gram heart reveal maroon myocardium that is free of softening, discoloration, and scar. The left ventricular free wall and interventricular septum are of similar thickness (1.5 – 1.6 cm). The left ventricle is moderately dilated. The septae are intact and free of defect. The endocardial surfaces of the heart are thin, smooth, and free of mural thrombi. The valves are thin, pliant, and normal in form. The aorta is free of atheroma.

Pulmonary System: The right lung weighs 334 grams and the left lung weighs 414 grams. Each lung is composed of congested maroon tissue that is free of mass, consolidation, thromboemboli, and emphysema. Mild anthracosis is present. The trachea and bronchi are patent. The tracheal mucosa is smooth and dusky.

Liver and Pancreas: The 2080 gram liver has an intact capsule and is composed of tan tissue free of mass and scar. The gallbladder wall is thick and free of mass. The gallbladder contains a 5.0 x 4.0 x 1.0 cm aggregate of calculi associated with bright yellow purulent-appearing material. The pancreas is composed of lobular tan tissue free of cyst, mass, scar, and hemorrhage.

Reticuloendothelial System: The 180 gram spleen has a smooth, intact capsule. The spleen is composed of partially liquified maroon tissue that is free of apparent mass and infarct. The regional lymph nodes are not enlarged. The thyroid is composed of tan tissue free of cyst, mass, and scar. The adrenal glands are composed of yellow cortices and brown medullae and are free of mass.

Gastrointestinal Tract: *See Evidence of Injury.* The esophageal mucosa is smooth and white. Within the stomach is 200 mL of residual dark brown to maroon partially digested food. The stomach and duodenum

are free of mass and ulcer. No mass is palpable within the small or large intestine. The appendix is present. The colon contains formed stool.

Genitourinary System: *See Evidence of Injury.* The right kidney weighs 166 grams and the left kidney weighs 166 grams. Each pale kidney is composed of a maroon cortex and maroon pyramids free of cyst, mass, scar, hemorrhage, abscess, and stone. The ureters are not dilated. The bladder mucosa is smooth and cream-colored. The bladder contains 15 mL of urine. The prostate is not enlarged. The testes are unremarkable.

Musculoskeletal System: *See Evidence of Injury.* Apart from previously described changes, the boney framework, supporting musculature, and soft tissues are not unusual. The cervical spinal column is stable on internal palpation.

Neck Organs: The tongue is free of laceration or contusion. The pharynx is not obstructed. Examination of the soft tissues of the neck, including the strap muscles, is free of contusion and other abnormalities. The large vessels reveal no abnormalities. The thyroid cartilage and hyoid bone are free of fracture. The laryngeal mucosa is smooth and purple.

Head and Central Nervous System: The reflected scalp is free of contusion. The calvarium is free of fracture. No thrombus is in the dural sinuses. The meninges are smooth, glistening, and free of mass. No blood is in the epidural, subdural, or subarachnoid space. The hemispheres are symmetric. The 1405 gram brain is free of tonsillar, uncal, and cingulate gyrus herniation. The vessels at the base of the brain are intact and free of dilatation and atheroma. The cerebral hemispheres, midbrain, pons, cerebellum, and medulla are free of cystic scar, hemorrhage, and mass. The distribution of the grey and white matter is normal. The ventricles are not enlarged and contain no blood. The spinal cord is not examined.

TOXICOLOGY

See attached report.

MICROSCOPIC EXAMINATION

A microscopic examination was not performed. Representative samples of tissue have been fixed in formalin for further examination, if necessary.

CASE SUMMARY

In my opinion, based on the circumstances surrounding death and the findings at autopsy, that Mr. Patrick Shane Anderson died as a result of a gunshot wound of the chest.

The manner of death is homicide.

The manner of death is a medical opinion as part of the death certification primarily for the purpose of vital statistics. The manner of death is not a legal determination of culpability or intent as such decisions are outside the scope of the Medical Examiner's role.

The opinion as to the cause and manner of death is based on the information available at the date of this report. If additional objective, probative information becomes available, I reserve the right to consider such information, and if appropriate, amend the report, including the cause and manner of death.



ROSS MILLER, MD

**BOARD OF MEDICOLEGAL INVESTIGATIONS
OFFICE OF THE CHIEF MEDICAL EXAMINER**

921 N.E. 23rd St
Oklahoma City, OK 73105

REPORT OF LABORATORY ANALYSIS

OFFICE USE ONLY

Re. _____ Co. _____

I hereby certify that this is a true and correct copy of the original document. Valid only when copy bear im-print by the office seal.

By _____

Date _____

ME CASE NUMBER: 2205381

LABORATORY NUMBER: 224177

DECEDENT'S NAME: PATRICK SHANE ANDERSON

DATE RECEIVED: 8/22/2022

MATERIAL SUBMITTED: BLOOD, VITREOUS, URINE, LIVER, BRAIN,
GASTRIC

HOLD STATUS: 5 YEARS

SUBMITTED BY: BARBARA BASTIAANSE PT Path Tech

MEDICAL EXAMINER: ROSS MILLER MD

NOTES:

ETHYL ALCOHOL:

Blood: 0.12 g/dL - (Femoral)

Vitreous: 0.12 g/dL

Other:

CARBON MONOXIDE

Blood:

TESTS PERFORMED:

ALKALINE DRUG SCREEN - (Heart Blood)

EIA - (Femoral Blood) - Amphetamine, Methamphetamine, Fentanyl, Cocaine, Opiates, PCP, Barbiturates, Benzodiazepines
(The EIA panel does not detect Oxycodone, Methadone, or Clonazepam)

RESULTS:

METHAMPHETAMINE

POSITIVE - (Less than 0.03 mcg/mL) - (Heart Blood)

01/09/2023

DATE

Kacey D. Cliburn, PhD

KACEY CLIBURN, PhD, D-ABFT-FT, Deputy Chief Forensic Toxicologist