# <...

# OFFICE OF THE MEDICAL EXAMINER

### Center for Forensic Medicine Nashville, Tennessee

# REPORT OF INVESTIGATION BY COUNTY MEDICAL EXAMINER

Obion County Medical Examiner William K Stone M D

Judicial District Number | 27

District Attorney Honorable Thomas Thomas

State Number: 21-66-0006

Case Number: MEC21-0461

		Age	Race		Date of Birth	Sex
ame of Decedent		70 Years	s White		07/24/1950	Male
David Morris Vowell						
ddress	TNI 38237					
2696 Miles Road, Martin, 1	Type of Death	Inv	estigating Agen	cy/Complain	t #:	
Date of Death	Coorfied)				on	
01/30/2021 6:10 PM	Dealitivos (Not officials)					
Place of Death	City TN					
4868 Walnut Log Road, U	nion City, 114					
arrative Summary	ect in double homicide on 01/25/21	11	non coon sini	re the hom	icide Today a hu	nter
Varked the spot and called la	ect in double homicide on 0 (1/25/21) If the homicide. Thought he saw carr aw enforcement. Body was pulled fro	om water a	nd identified	dS IVII VOW	, etc.	
Instinguished	Autopsy Ordered		Toxicology O	rdered		
Jurisdiction Accepted Yes	Autopsy Ordered Yes		Toxicology O	rdered Yes		
Yes Physician Responsible for Death	Yes		Toxicology O			
Yes  Physician Responsible for Death ( William McClain, M.D	Yes		Toxicology O			
Yes  Physician Responsible for Death of William McClain, M.D.  Cremation Approved	Yes	e (Martin)	Toxicology O	Yes		
Yes  Physician Responsible for Death ( William McClain, M.D  Cremation Approved	Yes Certificate Funeral Home	e (Martin)	Toxicology O	Yes	- 0Y-0	
Yes  Physician Responsible for Death of William McClain, M.D.  Cremation Approved	Yes  Certificate  Funeral Home  Murphy Funeral Home	e (Martin)		Yes	FIFE COST	I the
Yes  Physician Responsible for Death of William McClain, M.D.  Cremation Approved  No.  Cause of Death	Yes  Certificate  Funeral Home  Murphy Funeral Home	e (Martin)		Yes	Medical Nashvill	I the
Yes  Physician Responsible for Death of William McClain, M.D.  Cremation Approved  No  Cause of Death  Could Not be Determined	Yes  Certificate  Funeral Home  Murphy Funeral Home	e (Martin)		Yes	Medical Mashvill	I the

# OFFICE OF THE MEDICAL EXAMINER Center for Forensic Medicine 850 R.S. Gass Blvd. Nashville, Tennessee 37216-2640

CASE: MEC21-0461 County: OBION

#### **AUTOPSY REPORT**

NAME OF DECEDENT: VOWELL, DAVID MORRIS RACE: White SEX: Male AGE: 70

DATE AND TIME OF DEATH

January 30, 2021 at 6:10 p.m.

DATE AND TIME OF AUTOPSY:

January 31, 2021 at 10:15 a.m.

FORENSIC PATHOLOGIST:

William D. McClain, M.D.

COUNTY MEDICAL EXAMINER

William K. Stone, M.D.

DISTRICT ATTORNEY GENERAL

Honorable Tommy A. Thomas

#### PATHOLOGIC DIAGNOSES

- Possible drowning or hypothermia
  - A. Discovered in/near water after flood waters receded
  - B. Outdoors during time of low environmental temperatures and rain
  - C. Reportedly jumped, fell or was pushed into the water while escaping from another person
  - D. Reportedly witnessed standing in approximately waist-deep water after falling in
- II. Hypertensive cardiovascular disease
  - A. Cardiomegaly (500 grams)
  - B. Left ventricular hypertrophy
  - C. Nephroglomerulosclerosis
- III. Chronic pulmonary disease:
  - A: Emphysematous changes of the lungs
- Minor blunt trauma; no significant internal injuries
- V Related to cases MEC21-0385 and MEC21-0386

CAUSE OF DEATH:

Undetermined

MANNER OF DEATH:

Undetermined

I hereby certify that I, William D. McClain, M.D., have performed an autopsy on the body of David Morris Vowell on 1/31/2021 at 10:15 a.m. at the Center for Forensic Medicine. The purpose of this report is to provide a certified opinion to the County Medical Examiner and District Attorney General. The facts and findings to support these conclusions are filed with the Tennessee Department of Health.

#### **EXTERNAL EXAMINATION**

The body is that of a well-developed, overweight man whose appearance is compatible with the listed age. As received, he is 251 pounds and 74 inches. The body is clad in green camouflage coveralls, a green camouflage coat, a green camouflage sweater, a green camouflage long-sleeved shirt, a black long-sleeved shirt, gray pants, a black belt, blue underwear, brown boots and white socks. A yellow bandana is in a pocket. A yellow metal ring is on the left fourth finger. The clothing and the body surfaces are wet.

Rigor mortis is present in the extremities and there is well-developed, fixed posterior lividity. The body is well-preserved in the absence of embalming.

The gray scalp hair covers a balding scalp. The irides are blue; the corneae are clear, and the bulbar and palpebral conjunctivae are free of petechiae. The ears, nose and lips are normally formed. The teeth are natural and in good condition.

The neck and chest are normally formed. The lower left side of the chest has a small well-healed scar. The abdomen is soft and slightly protuberant. The external genitalia are those of an adult male. The back is straight and the anus is unremarkable.

The extremities are normally formed and symmetric. The anterior medial aspects of each knee have small well-healed scars. The skin on the hands and the feet is wrinkled. The fingernals are intact.

#### **EVIDENCE OF INJURY**

The apical surface of the head has a  $5 \times 2.5$  cm irregular cluster of pink abrasions along the midline. Reflection of the scalp shows a small area of dark red hemorrhage beneath the abrasions. Otherwise, there is no head trauma.

The dorsal surface of the right hand has a 4 x 2 cm purple contusion at the base of the second finger.

#### INTERNAL EXAMINATION

Having once been described, injuries will not be repeated.

HEAD: The scalp is reflected. The calvarium and the base of the skull are intact. There are no intracranial hemorrhages. The dura is tough and white. The 1,460-gram brain has a normal external configuration and the leptomeninges are glistening and transparent. Coronal sections reveal no evidence of tumor, trauma or infection. The cerebral arteries are free of significant atherosclerosis.

NECK: The tongue and strap muscles of the neck are atraumatic and the hyoid bone and larynx are intact. The airways are unobstructed and are not inflamed. The cervical spine is not fractured.

BODY CAVITIES: The body cavities have smooth, glistening surfaces and contain no abnormal fluid accumulations or blood. The ribs, spine and pelvis are not fractured.

CARDIOVASCULAR SYSTEM: The 500-gram heart has a smooth epicardial surface and a normal configuration. The coronary arteries have mild multifocal atherosclerosis throughout. The myocardium is uniformly red-brown and firm, without scarring or evidence of acute ischemia. The left ventricular wall is concentrically thickened. The cardiac valves are thin and pliable. The great vessels are intact. The aorta has mild atherosclerosis.

RESPIRATORY SYSTEM: The right lung is 600 grams and has smooth pleural surfaces. The left lung is 520 grams and has slight tattering of the pleural surfaces due to adhesions. Both lungs appear hyperexpanded. The cut surfaces are gray and pink with no focal lesions or consolidations. The parenchyma collapses when sectioned and there is no significant edema. The airways and pulmonary vessels are unobstructed.

GASTROINTESTINAL SYSTEM: The esophagus is unremarkable. The stomach contains a large amount of masticated food and has an unremarkable mucosa. The small and large bowels are without note.

HEPATOBILIARY SYSTEM: The 1,700-gram liver has a smooth capsule and a uniform tan-brown, soft cut surface. The gallbladder is absent. The pancreas is of normal size, shape and consistency.

GENITOURINARY SYSTEM: The right and left kidneys are 180 and 190 grams, respectively, and have moderately granular, red-brown cortical surfaces. The collecting systems are not dilated. The bladder contains a moderate amount of urine. The prostate gland is unremarkable.

ENDOCRINE SYSTEM. The adrenal glands and thyroid gland are of normal size and shape, without nodularity.

LYMPHORETICULAR SYSTEM: The 170-gram spleen has an intact capsule and a soft purple pulp.

#### **EVIDENCE RELEASED**

tu se •

The clothing and fingernail clippings are collected and sealed within appropriately labeled containers to be released to the investigating agency.

#### MICROSCOPIC EXAMINATION

S 15 3

The liver has mild portal tract lymphoplasmacytic inflammation but no significant fibrosis or hepatocyte necrosis.

The lungs have expansion of peripheral alveoli with rupture septa-

The kidney has moderate sclerosis of the glomeruli with a few small areas of interstitial lymphoplasmacytic inflammation.

The thyroid gland has a few areas of interfollicular lymphoplasmacytic inflammation.

The heart has mild interstitial fibrosis.

The adrenal gland, spleen, pancreas and brain have no significant histopathologic abnormalities.

#### CONCLUSION

Mr. Vowell was reportedly involved in an altercation with other men during which two of the other men were shot with a shotgun (MEC21-0385 and MEC21-0386). Another man reportedly fought with the decedent after which the decedent was pushed or fell or jumped into the water. The decedent was reportedly last seen standing in the water. The environmental temperatures were low and it was rainy. He was discovered near or in the water approximately five days after last being seen.

The autopsy shows minor abrasions (scrapes of the skin) to the top of the head and a contusion (bruise) on the right second finger. There are no significant internal injuries. He also has cardiovascular disease due to hypertension (high blood pressure) and chronic lung disease.

Toxicological studies identified no substances in his blood.

After a review of the autopsy findings and available investigative information, it is my opinion that David Vowell, a 70-year-old man, died as a result of undetermined causes. The circumstances surrounding his death and discovery suggest that he died as a result of either drowning or hypothermia (low body temperature). His heart and lung disease may have contributed, especially in light of the exertion caused by the physical altercation in which he was involved. Furthermore, it is unclear if he was pushed into the water by another person, or if he went into the water on his own accord as a way to escape the other person. Both the cause and the manner of death are undetermined. Should additional information become available, it will be considered and this report may be amended, if necessary.

\*\*Electronically signed by William McClain, M.D. on Tuesday, April 6, 2021\*\*

WILLIAM D. MCCLAIN, M.D. Forensic Pathologist

WDM/shl T: 3/9/2021



#### **NMS Labs**

CONFIDENTIAL

200 Welsh Road Horsnam, PA 19044-2208 Phone (215) 657-4900 Fax (215) 657-2972 e-mail\_nms@nmslabs.com

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

**Toxicology Report** 

Report Issued 02/15/2021 11:07

Patient Name Patient ID Chain Age 70 Y

Gender

VOWELL, DAVID

21-0461

NMSCP96412 DOB 07/24/1950

Male

21041479 Workorder

10341

To:

Forensic Medical Management Services - Nashville

850 R.S. Gass Blvd.

Nashville, TN 37216

Page 1 of 2

Positive Findings:

None Detected

See Detailed Findings section for additional information

Testing Requested:

Analysis Code

Description

8041B

Postmortem, Basic w/Vitreous Alcohol Confirmation, Blood (Forensic)

Specimens Received:

IĐ	Tube/Container	Volume/ Mass	Collection Date/Time	Matrix Source	Labeled As
001	Gray Top Tube	10.75 mL	01/31/2021 12:48	Femoral Blood	21-0461
	Red Top Tube	7 mL	01/31/2021 12:48	Vitreous Fluid	21-0461
	White Plastic Container	60 mL	01/31/2021 12:48	Urine	21-0461

All sample volumes/weights are approximations.

Specimens received on 02/05/2021

Alley 3/25/21



#### CONFIDENTIAL

 vvorkorger
 21041479

 Chain
 NMSCP96412

 Patient ID
 21-0461

Page 2 of 2

#### **Detailed Findings:**

Examination of the specimen(s) submitted did not reveal any positive findings of toxicological significance by procedures outlined in the accompanying Analysis Summary.

#### Sample Comments:

001 Physician/Pathologist Name: Dr. McClain

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 21041479 was electronically signed on 02/15/2021 10 48 by

Donna M. Papsun, M.S., D-ABFT-FT

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 fisted 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 8041B - Postmortem, Basic w/Vitreous Alcohol Confirmation, Blood (Forensic) - Femoral Blood

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

Compound	Rot. 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	Rot. Limit
Acetone	5.0 mg/dL	Isopropanol	5 0 mg/dL
Ethanol	10 mg/dL	Methanol	5.0 mg/dL

# OFFICE OF THE MEDICAL EXAMINER Center for Forensic Medicine Nashville, Tennessee

## REPORT OF INVESTIGATION BY COUNTY MEDICAL EXAMINER

Obion County Medical Examiner William K Stone M D

Judicial District Number 27

. . . . ,

District Attorney: Honorable Thomas Thomas

State Number: 21-66-0003

Case Number: MEC21-0385

Name of Decedent		Age		Race	Date of Birth	Sex
Chance Lee Black		26 Ye	ears	White	05/02/1994	Male
Address					-	
2429 Highway 124, Greenf	ield, TN 38230					
Date of Death	Type of Death		Investig	ating Agency/Co	mplaint #	
01/25/2021 12:45 PM Suspected Homicide TN Bureau of Investigation						
Place of Death						
4868 Walnut Log Road, Ur	nion City, TN					. <u> </u>
Narrative Summary						
with them. They said sure. He wounds to the chest	nting together. According to witness entered blind and proceeded to sh	oot the	2 deced	dents Both de	cedents received gunsl	not
Jurisdiction Accepted	Autopsy Ordered		Toxi	icology Ordered		
Yes	Yes			Yes		
Physician Responsible for Death Co William McClain, M D	ertificate				·	
Cremation Approved	Funeral Home					
No	Williams Funeral Home	(Green	field, TI	N)		
Cause of Death					1490	
Shotgun wound of the che	st and abdomen			03.00	by Medical Office of Medical Examiner Neckyll	I the AN
Contributory Cause of Death				Certified	Alba Kwawiusi	
Manner of Death				_ (**		
Homicide						

# OFFICE OF THE MEDICAL EXAMINER Center for Forensic Medicine 850 R.S. Gass Blvd. Nashville, Tennessee 37216-2640

CASE: MEC21-0385 County: OBION

. . . .

#### **AUTOPSY REPORT**

NAME OF DECEDENT BLACK, CHANCE LEE RACE White SEX Male AGE 26

DATE AND TIME OF DEATH:

January 25, 2021 at 12,45 p.m.

DATE AND TIME OF AUTOPSY:

January 27: 2021 at 10:30 a.m.

FORENSIC PATHOLOGIST:

William D. McClain, M.D.

COUNTY MEDICAL EXAMINER

William K. Stone, M.D.

DISTRICT ATTORNEY GENERAL:

Honorable Tommy A. Thomas

#### PATHOLOGIC DIAGNOSES

I. Shotgun wound of the chest and abdomen:

A. Enters lower right side of chest

B. Loose contact firing (muzzle stamp abrasion and soot on clothing)

C. Injures ribs, lungs, liver and heart with left hemothorax and hemoperitoneum

D. Shot cup and pellets recovered

E Path right to left

Reportedly shot by another person

II. Associated with cases MEC21-0386 and MEC21-0461

CAUSE OF DEATH:

Shotgun wound of the chest and abdomen

MANNER OF DEATH:

Homicide

CIRCUMSTANCES:

Shot by another person

I hereby certify that I, William D. McClain, M.D., have performed an autopsy on the body of Chance Lee Black on 1/27/2021 at 10:30 a.m. at the Center for Forensic Medicine. The purpose of this report is to provide a certified opinion to the County Medical Examiner and District Attorney General. The facts and findings to support these conclusions are filed with the Tennessee Department of Health. The autopsy is performed in the presence of Emily Dennison, M.D.

#### EXTERNAL EXAMINATION

. . . .

The body is that of a well-developed, well-nourished man whose appearance is compatible with the listed age. As received, he is 206 pounds and 72 inches. The body is clad in green overalls, a green jacket, a green camouflage hooded sweatshirt, a green camouflage long-sleeve shirt, a tan camouflage long-sleeve shirt, green camouflage pants, black and gray thermal underpants, green boots and blue socks. The hands are not covered by paper bags

Rigor mortis is present in the extremities and there is well-developed, fixed posterior lividity. The body is well-preserved in the absence of embalming.

The brown scalp hair covers an atraumatic scalp. Facial hair consists of a beard and mustache. The irides are brown; the corneae are clear; and the bulbar and palpebral conjunctivae are free of petechiae. The ears, nose and lips are normally formed. The teeth are natural and in good condition.

The neck and chest are normally formed. Words are tattooed on the right edge of the chest. The abdomen is soft and flat. The external genitalia are those of an adult male. The back is straight and the anus is unremarkable. A letter is tattooed on the left buttock.

The extremities are normally formed, symmetric and atraumatic. A pattern is tattooed on the lateral aspect of the right upper arm.

#### EVIDENCE OF INJURY

Shotgun wound

The right side of the upper abdomen has a 2.5 cm diameter circular gunshot entry wound centered 57 cm below the top of the head and 7.8 cm right of the midline. A 0.3 cm wide pink-red abrasion rim is on the margin. The margin has no significant scalloping. The verge of the wound has a faint thin rim of apparent soot.

After perforating the skin and subcutaneous tissue the charge passes through the liver, as well as the right inferior costal margin. It continues through the right hemidiaphragm and the inferior edge of the right middle pulmonic lobe. Some of the pellets pass through the pericardial sac and become embedded in the epicardial surface of the heart. Other pellets tunnel through the subcutaneous tissue over the anterior midline of the abdomen, while other pellets continue from the liver through the left hemidiaphragm and through the left lung to become embedded in the anterior-lateral and lateral aspects of the left chest wall between the 7th and 10th ribs.

The lower left side of the chest has a 10 x 10 cm cluster of confluent pink and green contusions overlying the embedded shotgun pellets. None of the pellets exited.

The shotgun wound is associated with a left hemothorax and a hemoperitoneum. The pericardial sac holds a scant amount of hemorrhage.

A white plastic shot cup and a representative sample of birdshot-sized pellets are gathered from the wound path.

The wound path is from right to left with no significant deviation in the anterior to posterior or vertical directions.

Other injuries

The right side of the forehead has a 1 x 0.4 cm red abrasion just above the lateral aspect of the right eyebrow.

Clothing

The green overalls have a slightly oval defect on the front right panel in the lower chest region that is surrounded by black soot.

The camouflage sweatshirt, green camouflage shirt and tan camouflage shirt all have a corresponding round defect in the front lower right chest area. The outermost layer (sweatshirt) also has faint soot deposited around the rim of the defect.

#### INTERNAL EXAMINATION

Having once been described injuries will not be repeated

HEAD. Reflection of the scalp reveals no trauma. The calvarium and the base of the skull are intact. There are no intracranial hemorrhages. The dura is tough and white. The 1.390-gram brain has a normal external configuration and the leptomeninges are glistening and transparent. Coronal sections reveal no evidence of tumor, trauma or infection. The cerebral arteries are free of significant atherosclerosis.

NECK<sup>®</sup> The tongue and strap muscles of the neck are atraumatic and the hyoid bone and larynx are intact. The airways are unobstructed and are not inflamed. The cervical spine is not fractured.

BODY CAVITIES: The body cavities have smooth, glistening surfaces. The spine and pelvis have no fractures.

CARDIOVASCULAR SYSTEM: The 370-gram heart has a smooth epicardial surface and a normal configuration. The coronary arteries are free of significant atherosclerosis. The myocardium is uniformly red-brown and firm, without scarring or evidence of acute ischemia. The cardiac valves are thin and pliable. The great vessels are intact. The aorta is free of significant atherosclerosis.

RESPIRATORY SYSTEM. The right and left lungs are 580 and 380 grams, respectively, and have smooth pleural surfaces. The cut surfaces are dark red and congested, without focal lesions or consolidation. The airways and pulmonary vessels are unobstructed.

GASTROINTESTINAL SYSTEM: The esophagus is unremarkable. The stomach is empty and has an unremarkable mucosa. The small and large bowels are without note.

HEPATOBILIARY SYSTEM: The 1,500-gram liver has a smooth capsule and a uniform tan-brown, soft cut surface. The gallbladder is normally formed and contains no calculi. The pancreas is of normal size, shape and consistency.

GENITOURINARY SYSTEM. The right and left kidneys are 130 and 120 grams, respectively, and have smooth, red-brown cortical surfaces. The collecting systems are not dilated. The bladder contains a moderate amount of urine. The prostate gland is unremarkable.

ENDOCRINE SYSTEM: The adrenal glands and thyroid gland are of normal size and shape, without nodularity.

LYMPHORETICULAR SYSTEM: The 130-gram spleen has an intact capsule and a soft, purple pulp.

#### **ANCILLARY STUDIES**

\* \* \* \* \*

Full body radiographs are obtained prior to autopsy.

#### EVIDENCE RELEASED

The clothing, fingernail clippings from both hands and the shot cup with pellets are sealed within appropriately labeled containers and released to the investigating agency.

#### CONCLUSION

After a review of the autopsy findings and available investigative information, it is my opinion that Chance Black, a 26-year-old man, died as a result of a shotgun wound of the chest and abdomen.

The manner of death is homicide.

\*\*Electronically signed by William McClain, M.D. on Friday, April 9, 2021\*\*

WILLIAM D. MCCLAIN, M.D. Forensic Pathologist

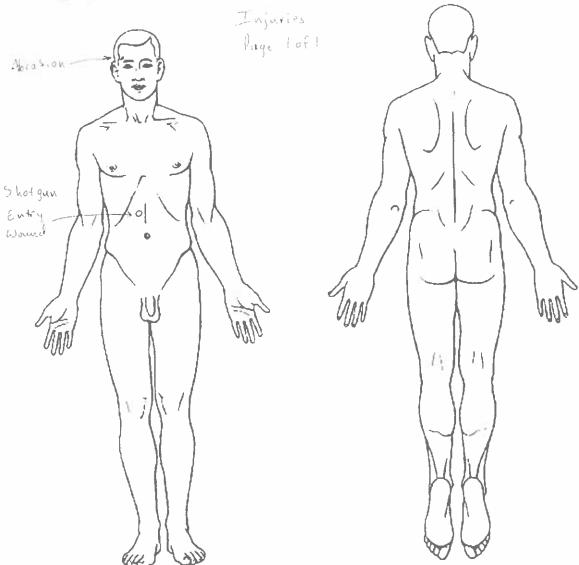
WDM/shl T: 2/25/2021



. . .

NAME\_\_\_\_\_

CASE # 3021-0385



MW



#### NMS Labs

.............

200 Weish Road, Horsham, PA 19044-2208 Phone: (215) 657-4900 Fax (215) 657-2977

e-mail: nms@nnislabs com

Robert A. Middleberg. PhD. F-ABET. DABCC-TC. Laboratory Director.

**Toxicology Report** 

Report Issued 02/15/2021 14:01

To: 10341

Forensic Medical Management Services - Nashville

850 R.S. Gass Blvd.

Nashville, TN 37216

BLACK CHANCE Patient Name

Patient ID Chain

Age 26 Y

21-0385

NMSCP95629 DOB 05/02/1994

Gender Male

21033519 Workorder

Page 1 of 3

Positive Findings:

Compound	Result	<u>Units</u>	Matrix Source
VVIII REPORT			001 - Femoral Blood
Delta-9 THC	3,4	ng/mL	001 - 1 emoral blood

See Detailed Findings section for additional information

Testing Requested:

Description Analysis Code

8041B

Postmortem, Basic w/Vitreous Alcohol Confirmation, Blood (Forensic)

Specimens Received:

ecini	IGII2 Mecelaco:					
1D	Tube/Container	Volume/ Mass	Collection Date/Time	Matrix Source	Labeled As	
			01/27/2021 11:52	Femoral Blood	21-0385	
001	Gray Top Tube	9 mL			24 0205	
	•	4 mL	01/27/2021 11:52	Vitreous Fluid	21-0385	
002	Red Top Tube		-	Urine	21-0385	
003	White Plastic Container	46 mL	01/27/2021 11 52	Office	2.000	

All sample volumes/weights are approximations

Specimens received on 01/29/2021

NMS v.21.0



Chain Patient ID NMSCP95629 21-0385

Page 2 of 3

#### Detailed Findings;

Dotailes /			Rpt.		
Analysis and Comments	Result	Units	Limit	Specimen Source	Analysis By
Delta-9 THC	3 4	ng/mL	0.50	001 - Femoral 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) - Femoral 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: Dr. McClain

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 21033519 was electronically signed on 02/15/2021 13:47 by:

Donna M. Papsun, M.S., D-ABFT-FT

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 50010B - Amphetamines Confirmation, Blood - Fernoral Blood

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

	Rpt, Limit	Compound	Rpt. Limit
Compound		Methamphetamine	5.0 ng/mL
Amphetamine	5.0 ng/mL	Norpseudoephedrine	5.0 ng/mL
Ephedrine	5.0 ng/mL	Phentermine	5.0 ng/mL
MDA	5.0 ng/mL	Phenylpropanolamine	20 ng/mL
MDEA	5.0 ng/mL	* 1	5.0 ng/mL
MDMA	5.0 ng/mL	Pseudoephedrine	0 0 119/11-

Acode 52198B - Cannabinoids Confirmation, Blood - Femoral Blood



Chain

NMSCP95629 21-0385

Patient ID

Page 3 of 3

## Analysis Summary and Reporting Limits:

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

COM IDENTIAL

Compound	Rot Limit	Compound	Rot. 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) - Femoral Blood

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

Compound Amphetamines Barbiturates Benzodiazepines Buprenorphine / Metabolite	Rpt. Limit 20 ng/mL 0.040 mcg/mL 100 ng/mL 0 50 ng/mL	Compound Fentanyl / Acetyl Fentanyl Methadone / Metabolite Methamphetamine / MDMA Opiates	Rpt. Limit 0.50 ng/mL 25 ng/mL 20 ng/mL 20 ng/mL
Buprenorphine / Metabolite Cannabinoids Cocaine / Metabolites		Opiates Oxycodone / Oxymorphone Phencyclidine	20 ng/mL 10 ng/mL 10 ng/mL

-Analysis by Headspace Gas Chromatography (GC) for

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

# OFFICE OF THE MEDICAL EXAMINER Center for Forensic Medicine Nashville, Tennessee

Celifor	/ille, Tennesse	;6	ANNICR	
Nasna	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	MEDICAL E	(AMINE)	
110	ON BY COUNT	AMERICA	mber: 21-66-000	5
TORT OF INVESTIGATION	011	State Nu	mber: Ziso	_
Nashv  REPORT OF INVESTIGATION  Stone M.D.		J.C.	MEC21-0	386
Obion County Medical Examiner: William K. Stone M.D.		Case Nu	imber: MEC21-0:	
Objon County Medical Cha		_		Sex
Obion County  Judicial District Number: 27  District Attorney: Honorable Thomas Thomas			Date of Birth	Male
Judicial District Honorable Thomas		Race	05/05/1995	
District Attorney.	Age 25 Years	White		
	25 160.5			
Name of Decedent				1
Name of Deceded.  Zackary Paul Grooms		vestigating Agency/Co	mplaint #	
Zackar)	In	vestigating Agency, or TN Bureau of Inve	stigation	
Address 1392 Hwy 54, Greenfield, TN 38230 Type of Death	L	TN Buleau		
1392 HWy 3 11 Type of Death Suspected Homicide				
Date of Death Suspected House				
01/25/2021 12.40			and ves, he	entered
place of Death		I bunt with ther	n They said )	
Narrative Summary  Decedent and friend were duck hunting. Suspect report blind and reportedly shot both. Both decedents receive	asked if he o	could fluit		
Narrative Summary	d gunshot wound	s to chest		
Narrative of friend were duck nutrities received	g guil-			
Decedent and modely shot both Both				
blind and reports				
			n dered	
		Toxicolog	y Ordered	
Autopsy Orde	ered	1	Yes	
	Yes			
Jurisdiction Accepted	163			
Ves				
Death Certificate				
Physician Responsible for Death Certificate				CHAPTER STATE
Physician Responsion M.D.  William McClain, M.D.  Funeral H	lome	ne (Greenfield, TN)	-08	919
Admin	oms Funeral Horr	ie (Green	4 NF /5 V	100
Cremation Approved William	ditto		CERITOR	01 "TN
No			Sale CERTIFIED DAY MODICAL EXAMINATION OF THE PROPERTY OF THE	Ollighallle
r poath			Sie Medica	N. N.
Cause of Death			Danie Menin	3
Cause of Death  Shotgun wound of the chest			EOISHON EX	
			Weg.	
a con Death				
Contributory Cause of Death				
Manner of Death				

Homicide

#### OFFICE OF THE MEDICAL EXAMINER Center for Forensic Medicine 850 R.S. Gass Blvd. Nashville, Tennessee 37216-2640

CASE: MEC21-0386 County: OBION

#### **AUTOPSY REPORT**

NAME OF DECEDENT: GROOMS, ZACKARY PAUL RACE: White SEX: Male AGE: 25

DATE AND TIME OF DEATH:

January 25, 2021 at 12.45 p.m.

DATE AND TIME OF AUTOPSY:

January 27, 2021 at 10:15 a.m.

FORENSIC PATHOLOGIST:

William D. McClain, M.D.

COUNTY MEDICAL EXAMINER:

William K. Stone, M.D.

DISTRICT ATTORNEY GENERAL:

Honorable Tommy A. Thomas

#### PATHOLOGIC DIAGNOSES

Shotgun wound of the chest ....

> Enters central upper chest Α.

No evidence of close-range firing (no soot or stippling) B.

Injures aorta, sternum and clavicles with bilateral hemothoraces and C. hemoperitoneum

Shot cup and pellets recovered D.

Path: front to back, right to left and slightly downward E.

Reportedly shot by another person F.

Associated with cases MEC21-0385 and MEC21-0461 11.

CAUSE OF DEATH:

Shotgun wound of the chest

MANNER OF DEATH:

Homicide

CIRCUMSTANCES:

Shot by another person

I hereby certify that I, William D. McClain, M.D., have performed an autopsy on the body of Zackary Paul Grooms on 1/27/2021 at 10:15 a.m. at the Center for Forensic Medicine. The purpose of this report is to provide a certified opinion to the County Medical Examiner and District Attorney General. The facts and findings to support these conclusions are filed with the Tennessee Department of Health. The autopsy is performed in the presence of Emily Dennison, M.D.

#### **EXTERNAL EXAMINATION**

The body is that of a well-developed, well-nourished man whose appearance is compatible with the listed age. As received, he is 236 pounds and 72 inches. The body is clad in green overall pants, a green jacket, a green camouflage hooded sweatshirt, a gray plaid long-sleeve shirt, gray pants, black underwear, black boots and white socks. Paper bags do not cover the hands.

Rigor mortis is present in the extremities and there is well-developed, fixed posterior lividity. The body is well-preserved in the absence of embalming.

The brown scalp hair covers an atraumatic scalp. Facial hair consists of a mustache and goatee beard. The irides are blue; the corneae are clear; and the bulbar and palpebral conjunctivae are free of petechiae. The ears, nose and lips are normally formed. The teeth are natural and in good condition.

The neck and chest are normally formed. A pattern is tattooed on the right side of the upper chest. Roman numerals are tattooed along the right edge of the chest and abdomen. The abdomen is soft and flat. The external genitalia are those of an adult male. The back is straight and the anus is unremarkable.

The extremities are normally formed and symmetric and free of trauma.

#### **EVIDENCE OF INJURY**

Shotgun wound

The central upper chest has a 6 x 4.5 cm oval shotgun entry wound oriented in the 3 o'clock direction and centered 32 cm below the top of the head and 2.5 cm left of the midline. No soot or stippling surrounds the wound. The wound margins are scalloped with multiple abrasions that extend up to 0.4 cm. Additional 0.3 cm diameter satellite defects are scattered along the margins, a maximum of 1 cm at the 1 o'clock position.

The charge passes through the skin and subcutaneous tissue and enters the central chest by obliterating the manubrium of the sternum and the sternal ends of both clavicles and both first ribs. It also obliterates the arch of the aorta and the proximal branches of the brachiocephalic, left common carotid and left subclavian arteries. A few pellets injure the apex of the left lung. Most pellets come to rest within the mediastinal soft tissue and a few come to rest within the left chest cavity.

A pale green plastic shot cup and multiple representative birdshot pellets are recovered.

The shotgun wound is associated with approximately 1,000 mL of blood in the right chest cavity, approximately 200 mL of blood in the left chest cavity and approximately 50 mL of blood in the pericardial sac.

The wound path is from front to back, right to left and slightly downward.

Other injuries

A dry brown 0.3 cm diameter abrasion is on the dorsal surface of the nose.

Clothing

A tattered oval defect is through the front upper left side of the green jacket, near the midline zipper. No soot or obvious gunpowder flakes are around the defect.

The gray plaid shirt and the green camouflage hooded sweatshirt each have a tattered oval defect near the central collar region. No obvious soot or gunpowder is deposited around the defect.

#### INTERNAL EXAMINATION

Having once been described, injuries will not be repeated.

HEAD: Reflection of the scalp reveals no trauma. The calvarium and the base of the skull are intact. There are no intracranial hemorrhages. The dura is tough and white. The 1,600-gram brain has a normal external configuration and the leptomeninges are glistening and transparent. Coronal sections reveal no evidence of tumor, trauma or infection. The cerebral arteries are free of significant atherosclerosis.

NECK: The tongue and strap muscles of the neck are atraumatic and the hyoid bone and larynx are intact. The airways are unobstructed and are not inflamed. The cervical spine is not fractured.

BODY CAVITIES: The body cavities have smooth, glistening surfaces. The spine and pelvis have no fractures.

CARDIOVASCULAR SYSTEM: The 360-gram heart has a smooth epicardial surface and a normal configuration. The coronary arteries are free of significant atherosclerosis. The myocardium is uniformly red-brown and firm, without scarring or evidence of acute ischemia. The cardiac valves are thin and pliable. The aorta is free of significant atherosclerosis.

RESPIRATORY SYSTEM: The right and left lungs are 330 and 350 grams, respectively, and have smooth pleural surfaces. The cut surfaces are pink and spongy, without focal lesions or consolidation. The airways and pulmonary vessels are unobstructed.

GASTROINTESTINAL SYSTEM: The esophagus is unremarkable. The stomach contains a large amount of masticated tan food and has an unremarkable mucosa. The small and large bowels are without note.

HEPATOBILIARY SYSTEM: The 1,480-gram liver has a smooth capsule and a uniform tan-brown, soft cut surface. The gallbladder is normally formed and contains no calculi. The pancreas is of normal size, shape and consistency.

GENITOURINARY SYSTEM: The right and left kidneys are 120 and 130 grams, respectively, and have smooth, red-brown cortical surfaces. The collecting systems are not dilated. The bladder contains a small amount of urine. The prostate gland is unremarkable.

ENDOCRINE SYSTEM: The adrenal glands and thyroid gland are of normal size and shape, without nodularity.

MEC21-0386 GROOMS, ZACKARY PAUL Page 4 of 5

LYMPHORETICULAR SYSTEM: The 240-gram spleen has an intact capsule and a soft, purple pulp.

#### **ANCILLARY STUDIES**

. . . .

Full body radiographs are obtained prior to autopsy.

#### **EVIDENCE RELEASED**

The clothing, fingernail clippings from both hands and the shot cup with pellets are sealed within appropriately labeled containers and released to the investigating agency.

#### CONCLUSION

After a review of the autopsy findings and available investigative information, it is my opinion that Zackary Grooms, a 25-year-old man died as a result of a shotgun wound of the chest.

The manner of death is homicide.

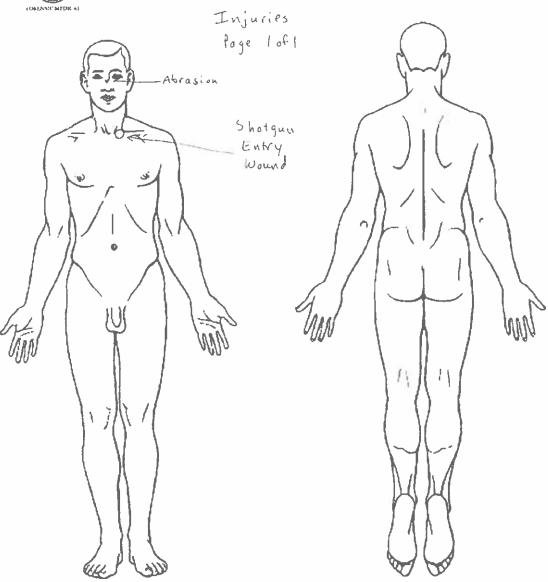
\*\*Electronically signed by William McClain, M.D. on Thursday, April 1, 2021\*\*

WILLIAM D. MCCLAIN, M.D. Forensic Pathologist

WDM/shl T: 2/25/2021 (ON LANGE MITDIK A)

NAME\_\_\_\_

CASE # 2021-0386





200 Welsh Road, Horsham, PA 19044-2208 Phone (215) 657-4900 Fax (215) 657-2972 e-mail nms@nmslabs.com

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

**Toxicology Report** 

10341

To:

Report Issued 02/11/2021 20:03

**Patient Name** 

GROOMS, ZACK

Patient ID

21-0386

Chain

NMSCP95747

Age 25 Y

**DOB** 05/05/1995

Gender

Male

Workorder

21033645

Nashville, TN 37216

850 R.S. Gass Blvd.

Page 1 of 2

**Positive Findings:** 

**None Detected** 

See Detailed Findings section for additional information

Forensic Medical Management Services - Nashville

**Testing Requested:** 

**Analysis Code** 

Description

8041B

Postmortem, Basic w/Vitreous Alcohol Confirmation, Blood (Forensic)

Specimens Received:

ID Tube/Container	Volume/ Mass	Collection Date/Time	Matrix Source	Labeled As	
001 Gray Top Tube	2 mL	01/27/2021 14:07	Femoral Blood	21-0386	
002 Red Top Tube	7 mL	01/27/2021 14:07	Vitreous Fluid	21-0386	
003 White Plastic Container	40 mL	01/27/2021 14:07	Urine	21-0386	

All sample volumes/weights are approximations.

Specimens received on 01/29/2021:

NMS v.21.0



CUNTIDENTIAL

AAOLEOLGEL Chain 21-0386 Patient ID

Z 1000040 NMSCP95747

Page 2 of 2

#### **Detailed Findings:**

Examination of the specimen(s) submitted did not reveal any positive findings of toxicological significance by procedures outlined in the accompanying Analysis Summary.

#### Sample Comments:

Physician/Pathologist Name: MCCLAIN 001

001 County: OBION

Autopsy ID: 21-0386 001

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 21033645 was electronically signed on 02/11/2021 19:42 by

Stephanie M. Marco, Ph.D. 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 - Femoral Blood

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

, , ,			
Compound	Rot, Limit	Compound	Rot. 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) - Femoral Blood

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

Compound	Rpt. Limit	Compound	Rpt. Limit
Amphetamines Barbiturates	20 ng/mL 0,040 mcg/mL	Fentanyl / Acetyl Fentanyl Methadone / Metabolite	0.50 ng/mL 25 ng/mL
Benzodiazepines Buprenorphine / Metabolite Cannabinoids Cocaine / Metabolites	100 ng/mL 0.50 ng/mL 10 ng/mL 20 ng/mL	Methamphetamine / MDMA Opiates Oxycodone / Oxymorphone Phencyclidine	20 ng/mL 20 ng/mL 10 ng/mL 10 ng/mL

-Analysis by Headspace Gas Chromatography (GC) for:

Compound	Rot. Limit	Compound	Rpt. Limit
Acetone	5:0 mg/dL	Isopropanol	5.0 mg/dL
Ethanol	10 mg/dL	Methanol	5.0 mg/dL