AUTOPSY REPORT

Case No: LA-567-20 **Date of Examination:** November 3, 2020

Name: Chapman, Randy

Age: 52 years **Race:** White **Sex:** Male

Investigating Agency: Richland Parish Coroner's Office

FINDINGS:

I. Hypertensive atherosclerotic cardiovascular disease.
   a. Aortic aneurysm rupture.
      i. Massive retroperitoneal hemorrhage.
   b. Coronary artery atherosclerosis, focally severe.
   c. Cardiomegaly with left ventricular hypertrophy.

CAUSE OF DEATH: Ruptured abdominal aortic aneurysm due to hypertensive atherosclerotic cardiovascular disease

OPINION:

This 52-year-old male, Randy Chapman, died due to a ruptured abdominal aortic aneurysm due to hypertensive atherosclerotic cardiovascular disease.

There was no evidence of inflicted injury.

Toxicology analysis was negative; no ethanol (alcohol) or drugs of abuse were detected.

Jennifer Forsyth, M.D.
Forensic Pathologist

Frank J. Peretti, M.D.
Forensic Pathologist

EXTERNAL DESCRIPTION:

The body was that of a well-developed, well-nourished, white, adult male. The body was received clad in: white socks, orange jumpsuit, and white underwear. The body measured 69 inches in length and weighed 161 pounds. The body appeared older than the reported age of 52 years. The body was cool. Rigor mortis was moderately developed. Livor mortis was present on the posterior surfaces of the body, except in areas exposed to pressure. The scalp hair was red and measured approximately 10 cm in length. A red beard and mustache were present. The irides appeared green. The conjunctivae and sclerae showed no petechial hemorrhages or other significant changes. The external ears were unremarkable. The nasal passages and mouth were unobstructed. The teeth were natural and in poor repair with multiple decayed to the gum line. The neck was symmetric and without masses or unusual mobility. The chest was normally developed and generally symmetric. The abdomen was slightly protuberant. There was an umbilical hernia present measuring 8 x 8 x 6 cm. On the left side of the abdomen were two horizontal scars measuring 3 cm in length. On the left lower abdomen was an obliquely-oriented scar measuring 5 cm in length. In the left inguinal region was a slightly puckered scar measuring 7 cm in length. On the right flank was an obliquely-oriented scar measuring 8 cm in length. The external genitalia were those of a normally developed adult male. The upper and lower extremities were normally developed and generally symmetric. The hands were grossly unremarkable with no absence of digits. No tattoos, needle tracks or wrist scars were present. Examination of posterior body surfaces revealed a symmetric back and buttocks. The anus was without evidence of injury or abnormality.

EVIDENCE OF MEDICAL ATTENTION:

None.

EVIDENCE OF OLD INJURY:

Scars noted above.

EVIDENCE OF RECENT INJURY:

None.

INTERNAL EXAMINATION

The subcutaneous fat layer measured up to 3 cm. Omentum and a single loop of small bowel were present in the umbilical hernia. There was no evidence of incarceration or bowel necrosis. There was no internal evidence of inflicted blunt injury or penetrating injury to the thoracoabdominal or craniocervical regions.

CARDIOVASCULAR SYSTEM:

The heart weighed 560 grams. The pericardial surfaces were smooth, glistening and transparent. The pericardial sac contained a normal amount of clear, straw-colored pericardial fluid. The heart was moderately enlarged and slightly globoid in shape. The coronary arteries arose normally and followed the usual course. There was patchy, moderate to severe atherosclerosis with focal areas of occlusion up to 80% most predominant in the right coronary artery. The cardiac valves, papillary muscles and chordae tendineae were unremarkable. The cut surface of the myocardium was red-brown in color and normal in consistency. The atrial and ventricular septa were intact. There was severe atherosclerosis of the aorta. In the abdominal portion of the aorta was a ruptured aneurysm. The aneurysmal sac measured approximately 5 cm in greatest dimension and was filled with typical atherosclerotic debris. There was massive surrounding retroperitoneal hemorrhage.

RESPIRATORY SYSTEM:

The right lung weighed 550 grams. The left lung weighed 580 grams. The pleural surfaces were tan-pink, smooth, and glistening. The pulmonary arteries were normally developed, patent, and without evidence of thrombi, emboli, or other gross abnormalities. The upper and lower airways were clear of debris and foreign material. Hilar lymph nodes were non-prominent. Cut surfaces of both lungs revealed normal respiratory tissue with no focal changes present.

NECK:

Examination of neck structures, including strap muscles, thyroid gland and large vessels, revealed no abnormalities or hemorrhage. The larynx and hyoid bone were intact. The epiglottis and vocal cords were unremarkable.

ALIMENTARY TRACT:

The tongue was without hemorrhage or other abnormalities. The esophagus was lined by intact gray-tan mucosa. The stomach contained scant mucoid fluid and was lined by intact, gray-tan mucosa with normal rugal folds. Serosal surfaces of the small and large bowel were intact with mild adhesions present. Umbilical hernia has been described above. The rectum and anus were without evidence of injury or abnormality.

LIVER AND PANCREAS:

The liver weighed 1320 grams and was covered by an intact capsule. Cut surfaces were a uniform red-brown color and of normal consistency. No focal abnormalities were present. The gallbladder contained a normal amount of bile and was lined by an intact velvety mucosa. The extrahepatic biliary tree was patent. Periportal lymph nodes were non-prominent. The pancreas was of normal size and conformation, displaying the usual lobulated gray-tan appearance. The pancreatic ducts were patent. Peripancreatic lymph nodes were non-prominent.

GENITOURINARY SYSTEM:

The left kidney weighed 110 grams. The right kidney weighed 100 grams. Each was covered by an intact capsule which stripped with ease. Cortical surfaces of the kidneys were brown-red and smooth. Cut surfaces revealed brown-red cortex of normal thickness. A distinct corticomedullary junction was present. The calyces, pelves and ureters were unremarkable. The urinary bladder contained 50 ml of urine and was lined by intact, gray-tan mucosa. The prostate was of normal size and appeared unremarkable on cut surface.

IMMUNOLOGICAL SYSTEM:

The spleen weighed 130 grams and was covered by an intact capsule. Cut surfaces were red-purple in color with a normal consistency. The white pulp was non-prominent. No focal abnormalities were present. Lymphadenopathy was not identified. The thymus was not identified.

ENDOCRINE SYSTEM:

The pituitary, thyroid, and adrenal glands were free of obvious disease.

MUSCULOSKELETAL SYSTEM:

Skeletal muscle was of uniform pale red-tan coloration, with no focal changes present. No gross bone or joint abnormalities were present. The cervical, thoracic, and lumbar spine were free of hemorrhage and other abnormalities.

CENTRAL NERVOUS SYSTEM:

The scalp was free of hemorrhage and edema. The calvarium and basilar skull were intact. There was no epidural, subdural, or subarachnoid hemorrhage present. The brain weighed 1320 grams. The leptomeninges were thin and clear. The cerebral gyri were normally formed and showed no focal lesions. Examination of the vessels at the base of the brain revealed moderate atherosclerotic disease with no evidence of aneurysmal dilation or other abnormalities. Serial coronal sections of the cerebral hemispheres revealed symmetry between anatomic structures of the left and right sides, with no focal changes present. Cut surfaces of the brainstem and cerebellum were unremarkable.