

TIMOTHY WEILER LINICK
ML 89-0592
AUTOPSY REPORT
PIMA COUNTY, ARIZONA
TUCSON POLICE DEPARTMENT
CASE #8906040325
5 JUNE 1989

ML 89-0592

Re: Timothy W. Linick

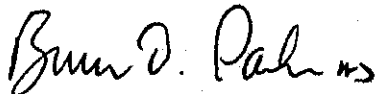
Page 2

PATHOLOGIC DIAGNOSES:

1. Gunshot wound of head
 - A. Lacerations, brain, extensive
 - B. Contusions, brain, multiple
 - C. Fractures, skull, multiple
 - D. Aspirated blood
2. Clinical history of depression

OPINION:

This 42 year old man died of a gunshot wound of the head.



Bruce O. Parks, M.D.
Deputy Medical Examiner
Pima County, Arizona

BOP/aef

ML 89-0592

Re: Timothy W. Linick

Page 3

MEDICOLEGAL INVESTIGATION

CIRCUMSTANCES OF DEATH:

The deceased is a 42 year old man (DOB: 29 October 1946) who apparently shot himself in the head. He was pronounced dead at 2014 hours on 4 June 1989 by Tucson Police Department Officer Webb (Badge #23528).

AUTHORIZATION:

The postmortem examination is performed under the authorization of the Pima County Medical Examiner.

IDENTIFICATION:

The body of Timothy Linick is identified by Tucson Police Department personnel. An identification photograph and fingerprints are taken.

ML 89-0592

Re: Timothy W. Linick

Page 4

POSTMORTEM EXAMINATION

CIRCUMSTANCES OF THE AUTOPSY:

The postmortem examination of Timothy Linick is performed at the Office of the Medical Examiner, 190 West Pennington Street, Tucson, Arizona, commencing at 1450 hours on 5 June 1989. Assisting in the examination are Mr. Chuck Nagore and Ms. Maria Romero.

GENERAL INSPECTION:

The partially clad unembalmed body is received on a mortuary cart within a white body bag. Brown paper bags are over the hands and forearms and are held in place with white tape. Abundant blood is within the body bag, particularly, in the region of the head. The bag of the right hand is stained with blood.

CLOTHING AND PERSONAL EFFECTS:

The clothing consists of the following:

- 1) One pair of multi-colored blue, green, yellow, and white short pants
- 2) One blue short sleeved shirt
- 3) Clenched within the left hand is a blood stained white tissue.

EXTERNAL EVIDENCE OF MEDICAL THERAPY:

None.

EXTERNAL EVIDENCE OF INJURY:

(See "GUNSHOT WOUND").

- 1) Over the dorsolateral right forearm is a faint purple-yellow ovoid 3.5 x 2.5 cm contusion.

EXTERNAL EXAMINATION:

The body is that of a well-developed, well-nourished man measuring 167.6 cm (66 inches) and weighing 61.4 kg (135 pounds). Rigor is well-developed in the jaw and extremities and there is dependent posterior non-blanchable purple livor. The body is cool to palpation.

Re: Timothy W. Linick

Page 5

Head and Neck:

Scalp hair is black with longest hairs of 12 cm. There is bilateral frontal balding. There is occipital balding. The eyes are blue and each pupil measures 0.3 cm in diameter. The nose is slightly deviated to the right. The ears are symmetrical. A black to red-brown to gray mustache and beard shows longest hairs of 3 cm. The natural teeth are present. There is no evidence of injury to the oral mucosa. The neck is symmetrical and the trachea is in the midline.

Trunk:

The chest is symmetrical and is covered with black hair. The abdomen is sunken and covered with black hair. The genitalia are that of a normal circumcised male. Both testes are descended in the scrotal sac. The back, buttocks and anus are unremarkable.

Extremities:

The upper extremities are symmetrical. The fingernails are short and thin. A black material is focally over the palm of the left hand especially over the left index finger. The lower extremities are symmetrical. There is no peripheral pitting edema. The toenails are short and thin.

IDENTIFYING SCARS, MARKS, TATTOOS:

None.

GUNSHOT WOUND

Entrance Wound:

A somewhat stellate 3 x 1.5 cm gunshot wound is over the right temporal scalp just above the right ear. The center of the wound is 5.5 cm from the top of the head and 11 cm posterior to the medial eyebrow ridges. A marginal brown abrasion measures up to 0.2 cm in width. Soot is visible along the inner aspects of the wound. Lacerated brain and fractured skull are visible within the depths of the wound.

Exit Wound:

A stellate 2.2 x 2 cm exit wound is located over the left temporoparietal scalp 2.5 cm from the top of the head and 13 cm posterior to the medial eyebrow ridges.

ML 89-0592

Re: Timothy W. Linick

Page 6

Wound Track:

The path of the bullet is right to left, slightly backward, and slightly upward. A purple 1.5 x 1.5 cm contusion is over the medial left upper eyelid and a more faint purple 1 x 1.5 cm contusion is over the medial right upper eyelid. The bullet enters the cranial cavity over the right temporal skull through a 0.9 cm round opening. Soot is over the external table around the entrance defect. The bullet passes through the right temporoparietal lobe and exits the left temporoparietal lobe. The bullet then exits the left skull through an irregular defect. Multiple fractures are over the skull convexity. Irregular fractures radiate to the base of the skull with some sparing of the middle posterior occipital bone. The temporo-parietal lobes are lacerated extensively. Multiple cortical contusions are over the inferior temporal lobes bilaterally. There is diffuse subarachnoid hemorrhage. Minimal epidural and subdural hemorrhage is present. Multiple areas of hemorrhage are within the basal ganglia and thalamic regions. A few contusions are within the cerebellar tonsils. Blood is within the tracheobronchial tree.

INTERNAL EVIDENCE OF MEDICAL THERAPY:

None.

INTERNAL EVIDENCE OF INJURY:

(See "GUNSHOT WOUND").

INTERNAL EXAMINATION:

Body Cavities:

The usual Y-shaped incision is made and the organs of the thorax and abdomen are in their normal anatomic relationships. There is no peritoneal or pleural fluid. 5 ml of amber fluid is within the pericardial sac. Cranial blood is present.

Neck:

The neck musculature is free of hemorrhage. The organs of the neck are in their normal anatomic relationships. The hyoid bone and thyroid cartilage are intact.

Re: Timothy W. Linick

Page 7

Cardiovascular System:

The heart weighs 390 gm and is in the normal configuration. Epicardial surfaces are yellow to brown. The endocardium is brown. The myocardium is brown without fibrosis or discoloration. The thicknesses of the left and right ventricles are 1.5 and 0.3 cm, respectively. Valve leaflets are thin and flexible and are of the appropriate number. There is no chamber dilatation. The right coronary artery is predominant. The coronary arteries show mild to moderate atherosclerosis with approximately 40% stenosis of the left anterior descending and circumflex branches. No thrombi are present. There is mild atherosclerosis of the aorta.

Respiratory System:

Blood coats the laryngeal, tracheal, and bronchial mucosa. The left lung weighs 420 gm, and the right 450 gm. Pleural surfaces are pink-tan to red-blue with mild patchy black discoloration. Sections are pink-tan to red-blue without abscesses or masses. The hilar lymph nodes are of normal size and shape. The pulmonary vasculature is free of thromboemboli.

Gastrointestinal Tract:

The esophagus is free of hemorrhage and ulceration. The stomach contains approximately 200 ml of partially digested tan-yellow food material. The gastric mucosa is normally folded. The stomach and small intestine are free of hemorrhage and ulceration. The appendix is present. The large intestine is unremarkable.

Liver:

The liver weighs 1480 gm. The liver capsule is brown. Sections are brown without abscesses or masses. The gallbladder is present and contains 25 ml of brown bile. The gallbladder wall is of normal thickness. No calculi are present.

Pancreas:

The pancreas is of normal size and shape. Sections are lobular and tan without fat necrosis or hemorrhage.

Hematopoietic System:

The spleen weighs 260 gm. The spleen capsule is blue-grey and smooth. Sections are red-blue without infarcts or masses. The thymus is not identified. Systemic lymph nodes are of normal size and shape. The bone marrow is red-brown and unremarkable.

ML 89-0592

Re: Timothy W. Linick

Page 8

Genitourinary Tract:

Each kidney weighs 110 gm. Capsules strip easily from each kidney revealing smooth brown surfaces. Sections show no cysts or scars. The collecting system of each kidney is unremarkable. The ureters are of normal caliber. The urinary bladder contains 125 ml of amber urine. The urinary bladder mucosa is tan. The prostate is of normal size and shape. Sections are tan without masses. The testes are of normal size and shape. Sections are soft and brown without masses.

Endocrine System:

The pituitary is of normal size and shape. Each adrenal weighs approximately 4 gm. The cortices are orange-yellow and are of normal thickness. No masses are present. The thyroid weighs 15 gm. The lobes are symmetrical and are brown. Sections are brown without cysts or nodules.

Musculoskeletal System:

The general musculature is well-developed. Other than skull fractures no skeletal abnormalities are appreciated.

Central Nervous System:

(See "GUNSHOT WOUND"). The brain weighs 1300 gm. Multiple injuries are present. The circle of Willis shows minimal atherosclerosis. The brain is sectioned coronally.

ML 89-0592

Re: Timothy W. Linick

Page 9

MICROSCOPIC EXAMINATION

Kidney:

Section is unremarkable.

Thyroid:

Section shows a small nest of well differentiated squamous cells.

Adrenal:

Section is unremarkable.

Lung:

Section shows vascular congestion and alveolar hemorrhage. Red blood cells are within bronchi.

Heart:

A section of left ventricle shows no evidence of myocardial necrosis.

Pancreas:

Section shows autolytic change.

Liver:

Section shows minimal fatty change. There is no evidence of cirrhosis or hepatitis.

Spleen:

Section is unremarkable.

Brain:

Sections of cerebellum and hippocampus show subarachnoid hemorrhage. A section of cerebral cortex shows irregular parenchymal hemorrhage and subarachnoid hemorrhage.

Re: Timothy W. Linick

Page 10

TOXICOLOGIC EXAMINATION

Autopsy Blood: Ethanol, methanol, isopropanol and acetone undetected.

Urine: Ethanol, methanol, isopropanol and acetone undetected.

Vitreous: Ethanol, methanol, isopropanol and acetone undetected.

sodium	140	mM/L	urea nitrogen	14	mg/dL
potassium	11.0	mM/L	creatinine	0.5	mg/dL
chloride	127	mM/L	glucose	12	mg/dL
CO ₂	11.0	mM/L			

Urine:

SUBSTANCES ROUTINELY SCREENED FOR BY TLC:

acetaminophen	cyclobenzaprine	meprobamate	propoxyphene
amitriptyline	desipramine	methadone	propranolol
amoxapine	dextromethorphan	methamphetamine	quinidine/quinine
amphetamine	diphenhydramine	methaqualone	salicylate
barbiturates	dimenhydrinate	methocarbamol	spironolactone
benzodiazepine	doxepin	methyprylon	strychnine
benztropine	doxylamine	morphine (free)	sympathomimetic
caffeine	ethchlorvynol	nicotine	amines
carbamazepine	glutethimide	nortriptyline	terpin hydrate
metabolites	hydroxyzine	pentazocine	trazodone
cimetidine	imipramine	phenacetin	triarterene
cocaine	lidocaine	phencyclidine	trimethobenzamide
cocaine metabolite	loxapine	phenothiazines	trimethoprim
codeine	mepredine	phenytoin	trimipramine

Urine TLC Results: Substances consistent with diphenhydramine/dimenhydrinate and metabolites and trazadone metabolite(s) were detected.

Urine Substance of Abuse Screen: Ethchlorvynol, salicylates, opiates, cocaine/metabolite undetected. Benzodiazepines, positive.

Nasal Swab: Cocaine and/or metabolite undetected.