

OFFICE OF THE CORONER  
COUNTY OF SAN DIEGO, CALIFORNIA

## AUTOPSY REPORT

38900

File No.

Medical Dept. No. 486-62

Name of Deceased RAYMOND DAVIS

Age. 29

Place of Death Found in alley, rear of 1926 So. Pacific, Oceanside, Calif.

Date of Death Found 4/11/62 at 1:45 A. M.

Place of Autopsy Seaside Mortuary, Oceanside, Calif.

Date of Autopsy 4/11/62

EXTERNAL EXAMINATION

The body is that of a white male of above stated apparent age. He has good skeletal and muscular development and is well nourished. The height is 5' 9½" and the weight is about 180 pounds. He has dark brown hair. There are psoriasis plaques of varying size on the skin of his chest, abdomen, scrotum and thighs and some on his back. He has echymosis of the right eye lid. There is a small burn abrasion high on his forehead. Dried spots of blood are scattered over the face. There are many scars of acne vulgaris on his face. Blood has flowed from both ears. A very small bullet hole, with powder burns is seen on the left side of the head. Wound of entry is 5 cm superior to the lobe of the left ear and on a line with anterior border of left ear. Wound of exit, 3 cm anterior to front border of right ear and on a level with the top lobe of the ear. Another bullet wound, which is only a few millimeters in diameter is found on the back of the chest to the right of the thoracic spine and at the level of T 4. This wound also has powder burns around it. Photographs were taken of both wounds of entry. The skin around these entry wounds was also cut away for microscopic examination. An area of discoloration is seen on the anterior chest wall about size of a silver quarter at the level of the 2d rib, anteriorly and just to the left side of the sternum and 4 1/16" inferior to the left clavicle.

INTERNAL EXAMINATION

The usual "Y" incision is made. Subcutaneous fat measures 1 cm.

Chest: On exposing the anterior chest wall I find that the exit wound of the bullet of the chest is just external to the costochondral juncture of the 2d rib just at the left sternal border. The small bullet was handed to Detective Floyd R. Flowers, # 4, Oceanside Police Dept. who placed it in a labeled envelope. On removing the anterior section of the rib cage I find the whole right pleural cavity filled with blood. A large quantity of this is saved for toxicology examination.

The lungs are expanded well and the heart is in normal position within the chest. When the blood is removed, the chest is explored. I find that the chest bullet wound entered the right chest at the level of the 4th thoracic

vertebra on its right side near the inferior border of the 4th rib and at its attachment at the vertebra. From this point the bullet went through the pulmonary vein which carries arterial blood from the superior lobe of the right lung to the heart. I find that the bullet had also perforated the right bronchus immediately at the bifurcation of the trachea.

Pericardial sac: This sac is full of blood and is distended like a balloon. When the blood and clots are removed I find the great vessels have the usual return and takeoff pattern. The pulmonary artery is opened and I find no antemortem thrombus. When the heart is removed it weighs 340 grams. Examination of the coronary arteries reveals very little sclerosis and the vessel is quite patent in all sections examined. The heart is opened along the path of blood flow and I find the chambers and valves are normal. Cut section of the heart wall shows the muscle is normal. Portions of wall of each chamber and of the valves are saved for microscopic examination.

The structures of the neck are removed together with the mediastinal tissues and both lungs.

Trachea: Examination of the trachea shows the perforation mentioned above at its bifurcation. A section is saved for pathologic study.

Right lung: When this lung is removed it has a normal texture and a good aerated tissue in most of it. The weight is 310 grams. Cut section shows normal tissue. A portion of each lobe is saved for microscopic.

Left lung: This lung is heavy and boggy and it weighs 530 grams. Cut section reveals marked congestion and edema. A section of each lobe is saved for pathological study.

Peritoneal cavity: On opening the abdomen I find the peritoneum has the usual glistening inner surface. The organs have the usual normal arrangement.

Liver: This organ is normal in size and shape and has a uniform blueish purple color. The superior surface is smooth. Cut section shows normal tissue. A portion is saved for histopathology and another for toxicology examination.

Gall bladder: This organ is small and contains only a small amount of bile. The organ is saved with specimens.

Spleen: The spleen is normal in size and shape. It has a uniform blueish-purple color and weighs 150 grams. Cut section shows normal tissue.

Stomach: This is normal in size and shape and contains about one pint of a recently ingested meal. A portion of this material is saved for toxicology. When emptied, the mucosa appears normal. No ulceration is seen. A section is saved with specimens.

Intestine: Both small and large intestine appear normal. A section of each is saved for pathological study.

Pancreas: This organ is normal in size and shape. Cut section shows normal tissue.

(more)

Adrenals: Both of these glands are normal in size and shape. Cut section shows normal cortex and medulla. A section of each is saved with specimens.

Right kidney: This kidney is normal in size and shape. It has a uniform purple color. The weight is 170 grams. Cut section reveals normal cortex and medulla. A section is saved for microscopic.

Left kidney: This organ is normal in size and shape. It has a uniform purple color. Cut section shows normal cortex and medulla. A portion is saved for toxicology examination.

Urinary bladder: This is partially filled with urine. 60 cc clear straw colored urine is saved for toxicology examination.

Head: The scalp is reflected from the surface of the calvaria in the usual manner. On the right side of the skull, just above and on a level with the front of the ear a bullet has reach just through the bone and is still partly adhered to it. This is removed. Photographs are made of the bullet and also of the wound after the bullet is removed. Then the bullet is given to Floyd R. Flowers, Detective, and placed in labeled container for ballistics test. Finger prints are taken of the deceased by Detective Floyd Flowers.

A window is cut in the calvarium and on removing this I find very little hemorrhage around the brain. When the brain is removed it weighs 1620 grams. Examination of the blood vessels beneath the brain reveals the bullet has perforated the right middle cerebral vein near the Circle of Willis.

The dura mater and the other membranes of the brain are normal.

The pituitary gland is saved with the specimens. Examination of the brain reveals blood in the lateral ventricles of the organ. Portions of the brain from medulla, pons, cerebellum, and cerebrum are saved for pathologic study.

Examination of the floor of the skull shows a fracture which extends along the floor from side to side through the region of sella tursica.

CAUSE OF DEATH: Massive intrathoracic hemorrhage

Due to: Perforated wound through right pulmonary vein

Due to: Bullet wound through the chest.

Contributing: Bullet wound through the brain and rupture right middle cerebral vein.

  
L. H. FAIRCHILD, M. D.  
Autopsy Surgeon for the Coroner

LHF:1

OFFICE OF THE CORONER  
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LABORATORY REPORT

BE 9-7711, Ext. 645

3322 Congress Street  
San Diego 10, Calif.

NAME..... DAVIS, RAY.....

DATE SPECIMEN  
RECEIVED ..... 4/11..... 1962..

MEDICAL DEPT. NO. .... 486-62 ..... 38900.....

TIME ..... 11:50A.M. P.M.

SPECIMEN SUBMITTED..... Blood.....

ANALYSIS REQUESTED..... Barbiturates, Ethyl Alcohol.....

SPECIMEN SUBMITTED BY..... L. H. Fairchild, M. D.....

REPORT

4/30/62 Blood Alcohol - Negative

By *Hironi Nakamura*  
Hironi Nakamura, A.B.  
Assistant Toxicologist

5/22/62 Blood Barbiturates - Negative

By *Richard F. Shaw*  
Richard F. Shaw, B.S.  
Toxicologist

DATE COMPLETED..... May 22, 19 62..... EXAMINER.....