



**Santa Barbara County Sheriff-Coroner**

Bill Brown, Sheriff-Coroner  
Coroner's Bureau  
66 South San Antonio Road  
Santa Barbara, CA 93110  
(805) 681-4145

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**AUTOPSY REPORT**

Decedent: <b>RODGER, Elliot</b>	Coroner Case No.: <b>14-07606</b>
Date of Autopsy: Thursday, May 29, 2014	Age: 22 years
Time of Autopsy: 0910 hours	Sex: Male
Site of Autopsy: Coroner's Bureau	Length: 69 inches
Santa Barbara, California	Weight: 124 pounds

Coroner's Investigator: Detective Michael Carlson  
Pathologist: Robert M. Anthony, M.D.-Ph.D.

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EXTERNAL DESCRIPTION

1  
2  
3 The decedent is a normally developed, underweight adult, a phenotypic Caucasian male with Asian  
4 features, whose appearance is commensurate with the stated age. The body is received unclothed.  
5 On the body bag containing the remains is a Coroner's tag in the name of the decedent. There is  
6 4+ rigor mortis present in the jaws, neck, back, and extremities. A small amount of fixed purple  
7 livor mortis is present over the posterior aspects of the body surfaces. The body is cold to palpation.  
8

9 The decedent appears normocephalic despite gunshot trauma of the head, which will be described  
10 in detail below. On the scalp is a moderate amount of straight dark-brown hair, approximately  
11 2 - 3 inches in maximum length. Above the left eye in the forehead region is bruising and abrasion  
12 which is discontinuous in nature and superficial and covers an area 3 inches horizontally by  
13 2-1/2 inches vertically. Present in the left upper eyelid is an irregular, superficial abrasion that is  
14 approximately 1-1/2 inches by 1/8 inch in maximum dimensions. The irides are brown, and the  
15 pupils measure 3 millimeters on the left and 4 millimeters on the right. The sclerae are white  
16 without evidence of hemorrhage, injection, or icterus. No conjunctival petechiae are noted. The ears  
17 are symmetrical with hemorrhage noted in both external auditory canals. Along the central bridge  
18 of the nose is a region of superficial abrasion measuring 3/4 x 3/8 inch in overall dimensions. The  
19 nose is symmetrical with hemorrhage present in both nostrils. The bones of the forehead, nose,  
20 cheeks, and jaw are intact to palpation. The face appears cleanly shaven. The native teeth are  
21 present and appear in good condition. There are no obstructing materials or lesions present in the  
22 anterior mouth.  
23

24 The neck is symmetrical without evidence of scars, masses, or trauma. The chest is symmetrical and  
25 intact to external compression. There are no scars, masses, or trauma noted. The ribs are slightly  
26 prominent. The abdomen is scaphoid without evidence of scars, masses, or trauma. There is slight  
27 green discoloration above the pelvic brim bilaterally. There is a normal adult distribution of pubic

28 hair present. The penis appears uncircumcised. Both testes are descended and palpable in the  
29 scrotum. There is mild postmortem drying artifact of the scrotum. The anus appears atraumatic.  
30

31 The lower extremities are thin and without evidence of pretibial or pedal edema. The toenails are  
32 thin and translucent. The soles of the feet are minimally callused. There are occasional nondescript  
33 scars on the bilateral knees and shins. Over the left hip is a region of abrasion and bruising  
34 consistent with a grazing gunshot wound, which will be described in detail below. No other  
35 significant acute traumatic injuries are noted about the lower extremities.  
36

37 The upper extremities are normally formed with the usual number of digits present bilaterally. There  
38 is black ink present on all finger pads bilaterally. The fingernails are short and intact. There is mild  
39 cyanosis of the nail beds. No clubbing of the fingertips is noted. No significant trauma is noted  
40 about the dorsal or palmar aspects of the right hand. There is superficial abrasion about the left wrist  
41 which is discontinuous and covers a region approximately 1-1/2 x 3/4 inch in maximum dimensions.  
42 Superficial abrasion about left elbow measures 1/2 x 1/8 inch in greatest dimensions. There is  
43 superficial abrasion about the right elbow measuring 1/2 inch in diameter. There are no scars,  
44 tattoos, needle tracks, or other identifying marks noted bilaterally about the upper extremities.  
45

46 The posterior torso appears grossly unremarkable.  
47

#### 48 THERAPEUTIC INTERVENTION

49  
50 There are no signs of acute therapeutic intervention on any of the external body surfaces.  
51

#### 52 TRAUMA

##### 53 Sharp-force Trauma:

54  
55  
56 Present on the tip of the left thumb is a thin incision involving the dermis. This cut is noted  
57 to be relatively bloodless. It is 3/16 inch in length and gapes to 1/16 inch in width.  
58

##### 59 Gunshot Trauma:

60  
61 Gunshot Wound No. 1: There are gunshot defects above the right and left ears.  
62

63 Entrance: Present within the bloodsoaked hair on the right side of the scalp above the  
64 right ear is an entrance wound with brain matter exuding from the depths of the wound proper. This  
65 defect is centered 3-1/2 inches down from the top of the head and 6-1/2 inches to the right of the  
66 anterior midline. The defect appears as a large, gaping laceration measuring 1 inch in length by  
67 5/8 inch in width. There are micro- and macro lacerations around this wound measuring up to  
68 1/4 inch in length. The wound margins are irregular with mild drying artifact. No satellite injuries

69 are noted. Around this entrance wound is undertunneling extending up to 2 inches in diameter as  
70 well as mild superficial bruising.

71  
72 Exit: Present above the left ear is an exit gunshot defect. This injury is centered  
73 3-1/2 inches down from the top of the head and 6-1/2 inches to the left of the midline. The wound  
74 is irregularly circular and measures 1/2 inch in diameter. There are small lacerations, up to 1/8 inch,  
75 extending symmetrically around this defect. There is slight abrasion of the epidermis on the skin  
76 tags comprising the edges of this wound. No gunpowder residue is noted on the surface of the skin  
77 surrounding the exit defect. Undertunneling around the exit wound can be appreciated up to a  
78 distance of 1-1/4 inches. No satellite injuries are noted.

79  
80 Wound Track: The wound track passes through the skin and subcutaneous soft tissues.  
81 There is a ring of black carbonaceous sooty material extending approximately 3/16 inch in width  
82 symmetrically around the entrance defect on the outer table of the skull. This injury causes an  
83 inwardly beveled defect through the calvaria in the right temporal region. The wound track then  
84 passes into the right parietal lobe of the brain where a large cavitory defect, on the order of  
85 8 centimeters in diameter, can be appreciated within the cerebrum. Massive hemorrhaging is noted.  
86 Massive disruption of the entire right and left parietal lobes of the brain is noted. The wound track  
87 continues through the skull on the left where a minimally outwardly bevel defect is noted in a region  
88 of intense fracturing. The wound track then exits the head, and no projectile is recovered.

89  
90 Summary: This is a contact-range gunshot wound of the right temple with secondary  
91 destruction of the right and left cerebral hemispheres. No projectile is recovered. The basic  
92 trajectory through the head is right toward left in a horizontal fashion without deviation anteriorly  
93 or posteriorly.

94  
95 Gunshot Wound No. 2:

96  
97 Present on the anterior-upper left thigh just below the pelvic brim is a grazing gunshot  
98 wound. This defect is centered 31 inches down from the top of the head and 6 inches to the left of  
99 the anterior midline. The abrasion on the surface of the skin measures 5/8 inch in length by up to  
100 3/8 inch in width, passing obliquely at an approximate 30-degree angle across the skin of this region.  
101 Noted about this defect is surrounding bruising up to 1 inch in diameter. No directionality can be  
102 readily established for this grazing gunshot wound, which causes epidermal injury only.

103  
104 INTERNAL EXAMINATION

105  
106 PRIMARY INCISION AND BODY CAVITIES: The body is opened with the usual Y-shaped  
107 thoracoabdominal incision. There is no evidence of hemorrhage or contusion in the anterior muscles  
108 or soft tissues of the chest or abdomen. The sternum and ribs of the anterior chest are intact; and  
109 upon incision, there is no evidence of pneumothorax. There are no adhesions or unusual fluid  
110 accumulations involving the pleural spaces, pericardium, or peritoneum. The internal organs

111 demonstrate normal anatomic relationships. None of the internal organs appear to have been  
112 surgically removed in the past. The serosal surfaces are smooth and glistening. The abdominal fat  
113 at the level of the umbilicus measures 1/2 inch in thickness.  
114

115 ORGAN DESCRIPTION  
116

117 NECK ORGANS: There is no evidence of hemorrhage or contusion in the anterior muscles or soft  
118 tissues of the neck. The hyoid bone is intact without evidence of hemorrhage. The thyroid is bilobed  
119 and not nodular. There are no obstructing materials or lesions present in the epiglottis or larynx.  
120 The carotid sheaths and anterior cervical spine appear grossly unremarkable.  
121

122 CARDIOVASCULAR SYSTEM: The heart weighs 300 grams. There is a small amount of smooth  
123 and glistening fat present on the epicardium. There is a right-dominant coronary artery system  
124 without evidence of significant atheromatous disease in any of the major epicardial coronary arteries.  
125 The heart valves appear normally formed with delicate leaflets. No vegetations are noted on any of  
126 the heart valves. The coronary ostia are patent. The chambers are not dilated. There are no  
127 myocardial scars or other focal lesions noted. The left ventricular wall measures 12 millimeters in  
128 maximal thickness, the interventricular septum is 16 millimeters in maximal thickness, and the right  
129 ventricular wall is 5 millimeters in maximal thickness. The great vessels are normally related. The  
130 aorta and its major branches are intact and otherwise grossly unremarkable.  
131

132 PULMONARY SYSTEM: The right lung weighs 500 grams. The left lung weighs 290 grams.  
133 Both lungs are similar in appearance. The pleural surfaces are smooth and glistening without  
134 evidence of apical bullae. There is minimal subpleural anthracosis noted. Sectioning of the lungs  
135 reveals mild congestion and edema. There is no evidence of consolidation, abscess, infarction,  
136 neoplasm, or pulmonary embolus.  
137

138 GASTROINTESTINAL TRACT: The GI tract appears intact throughout its length. The mucosa  
139 of the esophagus is intact and otherwise grossly unremarkable. The stomach has a normal rugal  
140 pattern. The stomach contains 30 grams of tan-brown fluid. No residuals of medication or ethanol-  
141 like odor is noted. No hemorrhages, ulcerations, or mass lesions are encountered. The appendix is  
142 present and not inflamed. The large and small intestines and their contents are grossly unremarkable.  
143

144 HEPATOBILIARY SYSTEM: The liver weighs 1280 grams. The capsule is smooth and intact.  
145 The hepatic parenchyma is light red-brown in color. There is no evidence of fibrosis or focal lesions.  
146 The gallbladder contains an estimated 1 cubic centimeter of bile. There is no evidence of stone  
147 formation. The gallbladder mucosa is unremarkable. The extrahepatic biliary system appears patent.  
148

149 PANCREAS: The pancreas is tan-brown, lobulated, and of the usual configuration. There is no  
150 evidence of necrosis, hemorrhage, calcification, or fibrosis noted.  
151

152 HEMATOPOIETIC SYSTEM: The spleen weighs 110 grams. The capsule is gray, wrinkled, and

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153 intact. The splenic substance is dark red in color without evidence of fibrosis or focal lesions. There  
154 is good development of both red and white pulp. There is no evidence of cervical, mediastinal, or  
155 peritoneal lymphadenopathy.  
156

157 **GENITOURINARY SYSTEM:** The right kidney weighs 120 grams. The left kidney weighs  
158 110 grams. Both kidneys are similar in appearance. The cortical surfaces are smooth, and the  
159 capsules strip with ease. The renal architecture is intact without mass lesions noted. The collecting  
160 systems are patent and not dilated. The blood vessels appear unremarkable. The bladder contains  
161 an estimated 1 ounce of yellow urine. The bladder mucosa is unremarkable. The prostate is grossly  
162 unremarkable.  
163

164 **ENDOCRINE SYSTEM:** The pituitary, thyroid, and adrenal glands are unremarkable without  
165 evidence of hemorrhage or masses.  
166

167 **SKELETAL SYSTEM:** There is an entrance gunshot wound of the head with massive fracturing  
168 of the skull resultant. Basilar fractures of the skull are also present. The remainder of the axial and  
169 appendicular skeleton is without gross evidence of fracture.  
170

171 **CENTRAL NERVOUS SYSTEM:** The scalp is reflected to reveal prominent subgaleal hemorrhage  
172 surrounding the entrance and exit gunshot wounds. The underlying calvaria is prominently fractured.  
173 Upon removal of the calvaria, there is a thin film of subdural hemorrhage noted.  
174

175 The brain weighs 1550 grams. The meninges are clear and glistening. The cerebral gyral pattern  
176 is fully developed. The external configuration of the brainstem and cerebellum is grossly  
177 unremarkable. There is prominent subarachnoid hemorrhage noted throughout the cerebrum. There  
178 is a large cavitory wound track through the brain with massive disruption of both cerebral  
179 hemispheres. The cranial nerves appear intact and otherwise grossly unremarkable. The arteries at  
180 the base of the brain appear intact and otherwise grossly unremarkable. There is no evidence of  
181 edema or herniation.  
182

183 Multiple coronal sections of the cerebral hemispheres reveal undilated ventricles containing  
184 massively hemorrhagic cerebrospinal fluid. There is prominent disruption of both cerebral  
185 hemispheres with a large wound track passing horizontally through the brain. Both parietal lobes  
186 of the brain are massively disrupted secondary to passage of the projectile. No mass lesions are  
187 encountered. Multiple sections of the brainstem and cerebellum reveal diffuse subarachnoid  
188 hemorrhage but no anatomic abnormalities or focal lesions. The dura is stripped and reveals  
189 prominent fracturing of the base of the skull radiating into the middle ear bilaterally.  
190

191 **SPECIMENS FOR TOXICOLOGY** Femoral blood, heart blood, urine, vitreous humor, and  
192 gastric content.  
193

194 **TISSUES FOR PATHOLOGY** Representative portions of the major organs are retained.

195 ASSISTANTS John A. Kolbert and Michael Carlson

196  
197 WITNESSES Detectives Hansen, CID Joe Schmidt, and Kevin Huddle  
198 of the Santa Barbara Sheriff's Department  
199

200 MATERIALS FOR CRIME LAB Blood for typing.

201  
202 PHOTOGRAPHS Detective Hansen

203  
204 DIAGRAMS Dr. Anthony

205  
206 MICROSCOPIC DESCRIPTION

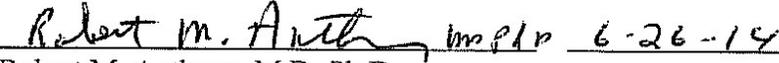
207  
208 Sections of the major organs examined confirm the gross pathologic findings.  
209

210 PATHOLOGIC DIAGNOSES

- 211  
212 I. Contact gunshot wound of right temple with secondary destruction of cerebrum.  
213 A. Multiple fractures of skull.  
214 B. No projectile recovered.  
215  
216 II. Grazing gunshot wound of left upper leg.  
217 A. No projectile recovered.  
218  
219 III. Superficial blunt-force trauma of face.  
220  
221 IV. History of nonspecific psychiatric disorder.  
222 A. Above condition treated with prescription medication.  
223 B. See postmortem toxicology report.  
224

225 CAUSE OF DEATH

226  
227 GUNSHOT WOUND OF HEAD (CONTACT TYPE).  
228

229  
230   
231 Robert M. Anthony, M.D.-Ph.D.  
232 Forensic Pathologist  
233

234 RMA:esa  
235 D: 05-29-14  
236 T: 05-29-14

GUNSHOT WOUND CHART

14 - 7606

Name ROOGER ELLIOT

City or County SANTA BARBARA

		WOUND NO.											
		1		2		3		4		5		6	
		Ent.	Ex.	Ent.	Ex.	Ent.	Ex.	Ent.	Ex.	Ent.	Ex.	Ent.	Ex.
1. Location of wound:	Head	X	X										
	Neck												
	Chest												
	Abdomen												
	Back												
	Right Arm <												
	Left												
	Right Leg <												
	Left			X									
	2. Size of wound:	Diam.		1/2"									
Width		5/8"		3/8"									
Length		1"		5/8"									
3. Inches from wound to:	Top of head	3 1/2"	3 1/2"	3 1"									
	Right of midline	6 1/2"											
	Left of midline		6 1/2"	6"									
4. Powder burns:	On skin												
	Clothing												
	Absent	X	X	X									
5. Direction of bullet through body:	Backward												
	Forward												
	Downward												
	Upward												
	To right	X											
	To left												
6. Bullet found:	Calibre	—		—									
	Shotgun												

Photographs made: Yes  No

X-rays made: Yes  No

REMARKS:

Examined by: R M Auth mch

Date: 5-29-14



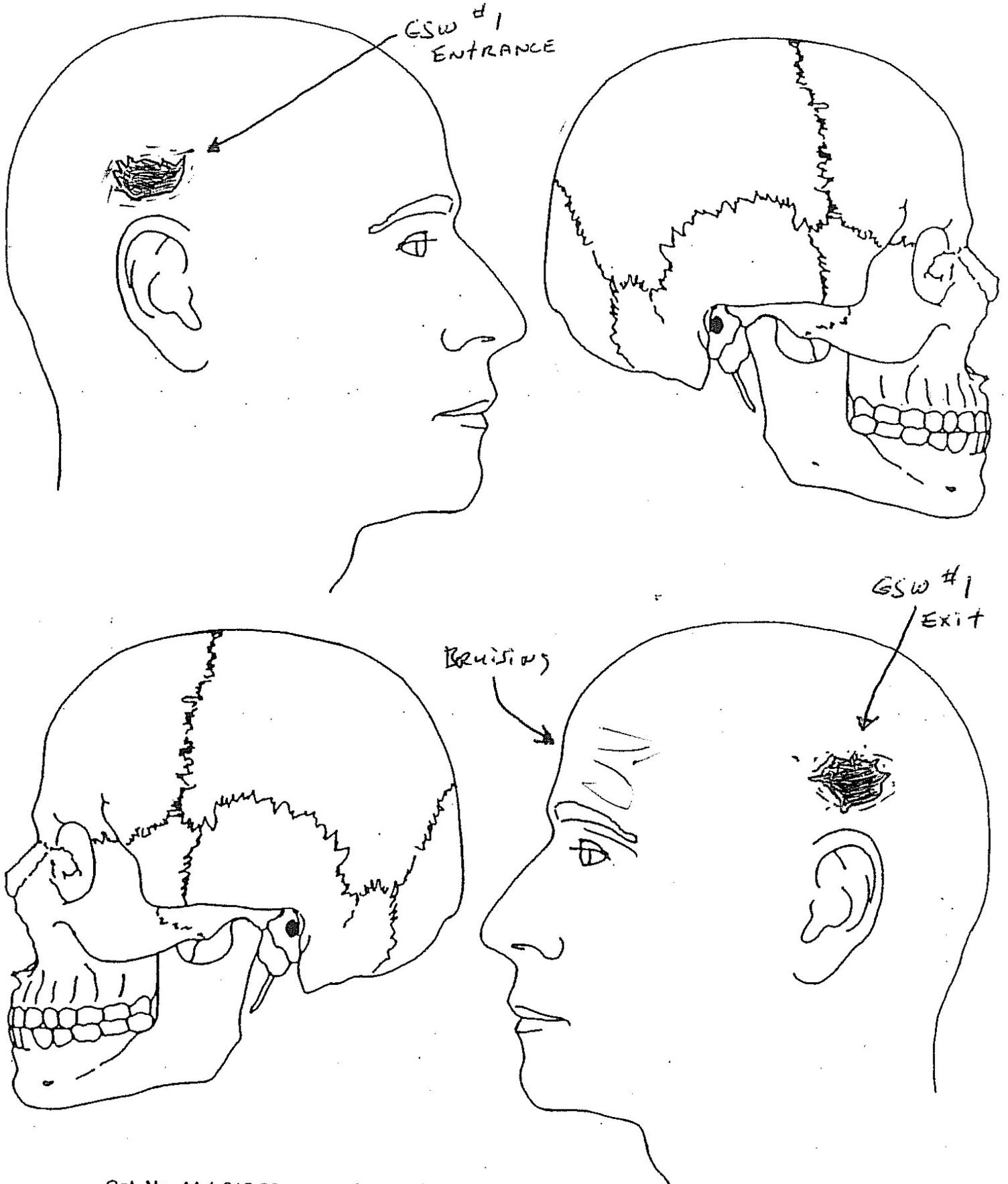
Head, surface and skeletal anatomy, lateral view.

Name RODGER, ELLIOT

Autopsy No. 14-7606

Age 22 Race CAUC Sex male

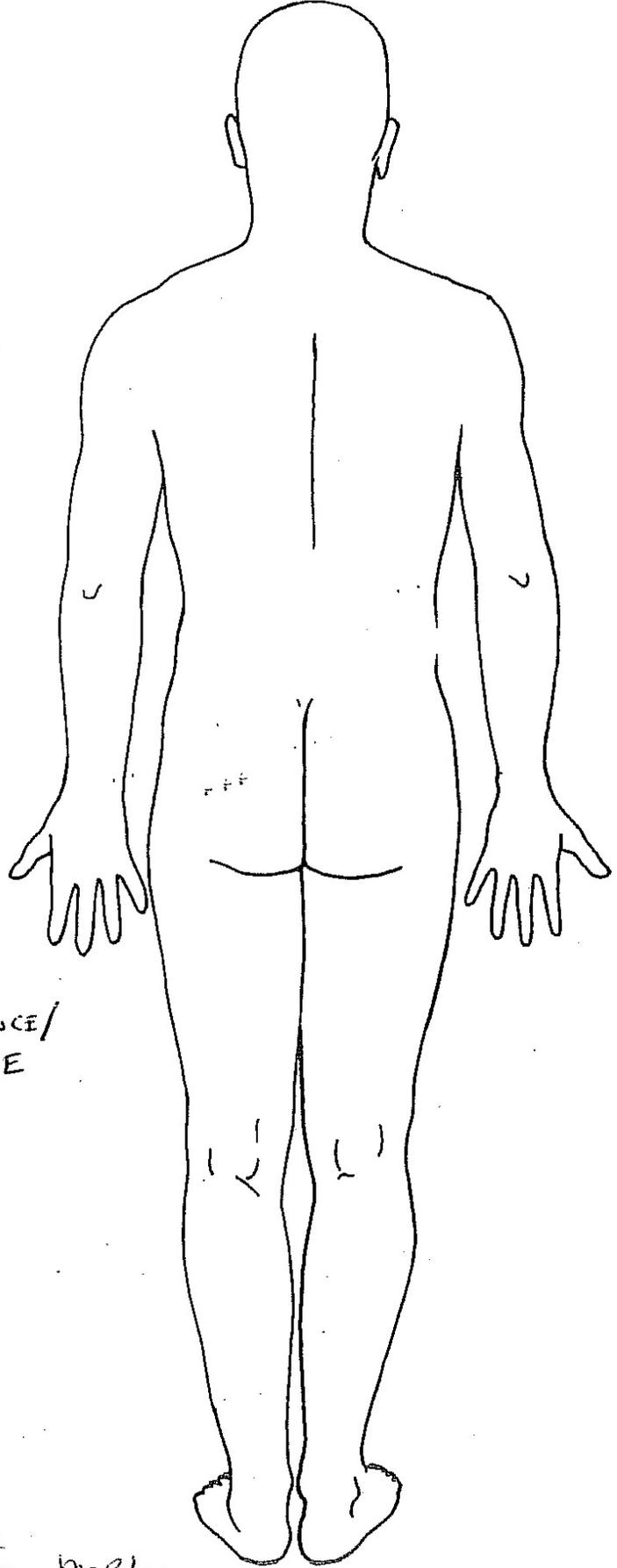
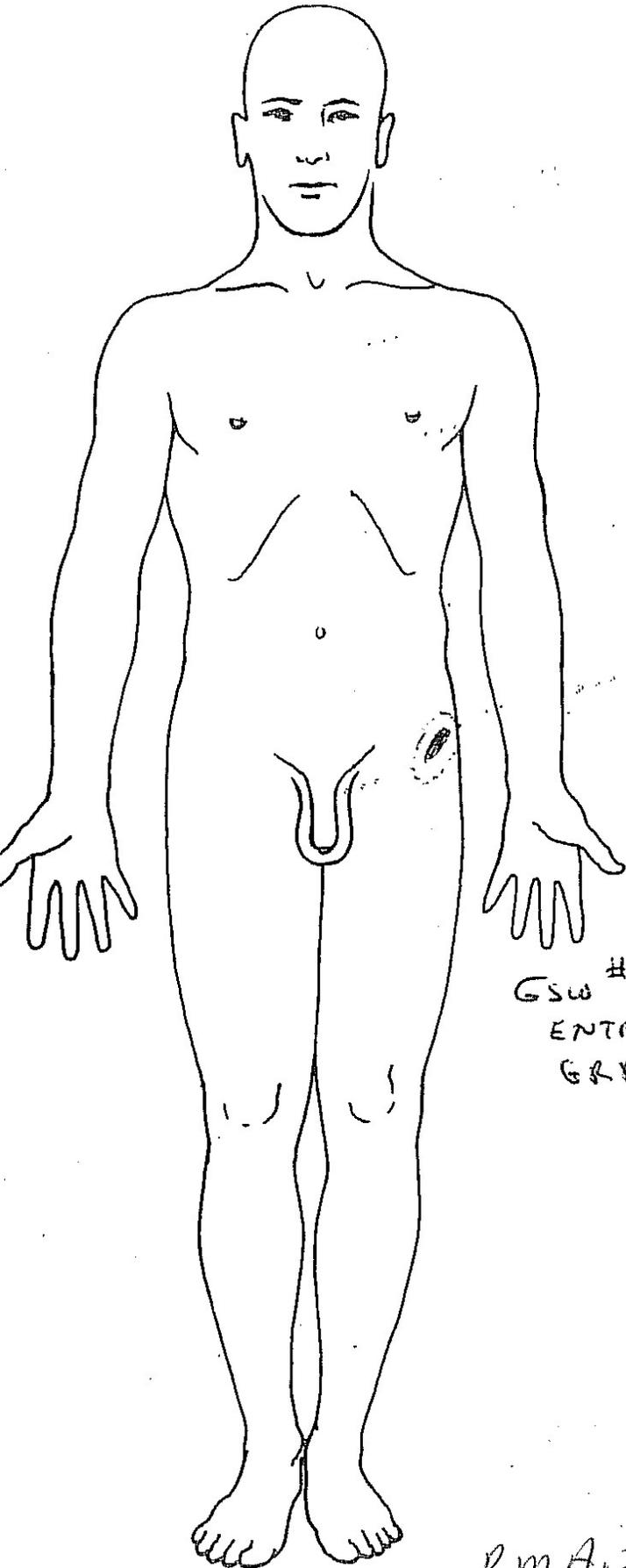
Date 5/29/14



Full body, male, anterior and posterior views (ventral and dorsal).



Name RODGER, ELLIOT Autopsy No. 14-7606  
Age 22 Race CAUC Sex MALE Date 5/29/14



GSW #2  
ENTRANCE/  
GRAZE

RMAuth msh