

OFFICE OF THE CORONER
CHAMPAIGN COUNTY



DUANE E. NORTHRUP
County Coroner

202 S. Art Bartell Rd.
Urbana, Illinois 61802

(217) 384-3888
FAX: (217) 384-1290

AUTOPSY REPORT

NAME: Azaan Lee

Approximate Age: 21 **Years**

Length: 73 **Inches**

CASE NO: 2023-0242

Sex: Male

Weight: 170 **Pounds**

I hereby certify on the 7th day of February 2023, beginning at 1330 hours, I, **Shiping Bao, M.D.**, pursuant to Section 5/3-3014 of the Illinois Compiled Statutes, performed a complete autopsy on the body of Azaan Lee at the Champaign County Regional Autopsy Facility in Urbana, Illinois and upon essential facts concerning the circumstances of the death and history of the case as known to me, I am of the opinion that the findings and cause of death are as follows:

FINDINGS:

- 1) Pronounced dead at hospital shortly after a gunshot
- 2) No macroscopic disease identified
- 3) Perforating gunshot wound of the left anterior thigh
 - A. Entrance wound: Left anterior thigh, contact with muzzle imprint
 - B. Track: Downward, from the right to left and front to back, with perforations of the left femoral artery and muscles
 - C. Exit wound: Left posterior thigh
 - D. Projectile: None recovered
- 4) Postmortem toxicology study found 0.158 g/dL of Ethanol and 6.9 ng/mL of Delta-9 THC in the femoral blood, and 0.171 g/dL of Ethanol in the vitreous fluid

CAUSE OF DEATH: Gunshot Wound of Left Thigh

Signature

Shiping Bao, M.D.
Coroner's Forensic Pathologist

A complete autopsy was performed at the Champaign County Regional Autopsy Facility.

GROSS ANATOMIC DESCRIPTION

I. THERAPEUTIC INTERVENTION:

1. An I-gel supraglottic airway device
2. A decompression needle on the right chest
3. A right lateral chest tube
4. A left chest surgical incision
5. Bilateral shoulder sticks
6. EKG pads
7. Pacer pads

II. EXTERNAL BODY DESCRIPTION: The body is that of a normally developed adult black male appearing the stated age of 21 years with a body length of 73 inches and body weight of 170 pounds. The body presents medium build with average nutrition, normal hydration, and good preservation. Rigor mortis is complete, and lividity is well-developed on the posterior surfaces of the body and is fixed. The body is cold to touch post refrigeration. The head is covered by black hair. The face is unremarkable. There is average body hair of adult male pattern distribution. The eyes are closed with clear bulbar and palpebral conjunctivae. The irises are brown with white sclera. There are no cataracts or arcus present. Pupils are equal at 5 mm. The orbits appear normal. The nasal cavities are unremarkable with intact septum. The oral cavity presents natural teeth. The ears are unremarkable with no hemorrhage in the external auditory canals. The neck is rigid due to postmortem changes, and there are no palpable masses. The chest is symmetrical. The abdomen is unremarkable.

The upper and lower extremities are equal and symmetrical presenting cyanotic nail beds without clubbing or edema. There are no fractures, deformities, or amputations present.

External genitalia present unremarkable testicles and penis. The back reveals dependent lividity with contact pallor. The buttocks are atraumatic, and the anus is intact. The integument is of normal color.

IDENTIFICATIONS: One identification tag is on the body bag.

SCARS AND TATTOOS: There are symbols and letters on the neck, chest, left abdomen, arms, forearms, and hands

III. EVIDENCE OF INJURY:

Perforating gunshot wound of the left anterior thigh:

The entrance wound is located on the left anterior thigh, 32 inches above the left heel, and 2 inches to the left of the anterior midline. It consists of a $\frac{3}{8}$ -inch diameter round skin defect, with ring abrasion, and an area of 1 x $\frac{3}{4}$ inch muzzle imprint around the wound. No soot or stippling is identified around the wound. This wound is consistent with a contact wound of entrance.

Further examination demonstrates that the wound track passes downwards, from the right to left and front to back, with perforations of the left femoral artery and muscles. The wound of exit is located on the left posterior thigh, 31 inches above the left heel and on the left posterior thigh midline. It consists of a $\frac{1}{2}$ -inch diameter round skin defect. No projectile is recovered.

The injuries associated with the wounds are the entrance and exit wounds, perforations of the left femoral artery and muscles, with massive focal hemorrhage.

IV. INTERNAL EXAMINATION:

- 1. INTEGUMENT:** A Y-shaped thoracoabdominal incision is made and the organs are examined in-situ and eviscerated in the usual fashion. The subcutaneous fat is normally distributed, moist and bright yellow. The musculature of the chest and abdominal area is of normal color and texture.
- 2. SEROUS CAVITIES:** The chest wall is status post a right lateral chest tube and a left chest surgical incision. The peritoneum is congested, smooth glistening and essentially dry, devoid of adhesions or effusion. There is no scoliosis, kyphosis, or lordosis present. The left and right diaphragms are in their normal locations and appear grossly unremarkable. The pericardial sac is opened during the surgery.
- 3. CARDIOVASCULAR SYSTEM:** The heart weighs 400 grams and there is no chamber hypertrophy or dilatation. The left ventricular wall is 1.2 cm and the right 0.2 cm. The cardiac valves appear unremarkable. The coronary ostia are in the normal anatomical locations leading into widely patent coronary arteries. Right dominant circulation is present. The endocardial surface is smooth without thrombi or inflammation. Sectioning of the myocardium presents no gross evidence of ischemic changes either of recent or remote origin. The aortic arch along with the great vessels appears grossly unremarkable.
- 4. PULMONARY SYSTEM:** The neck presents an intact hyoid bone as well as thyroid and cricoid cartilages. The larynx is comprised of unremarkable vocal cords and folds, appearing widely patent without foreign material, and is lined by smooth, glistening membrane. The epiglottis is a characteristic plate-like structure without edema,

trauma, or pathological lesions. Both the musculature and the vasculature of the anterior neck are unremarkable. The trachea and spine are in the midline, presenting no traumatic injuries or pathological lesions.

The lungs appear hyperinflated and together weigh 790 grams. There are no gross pneumonic lesions or abnormal masses identified. The tracheobronchial tree and pulmonary arterial system are intact and grossly unremarkable. The pleural surfaces are pink and smooth with focal mild anthracosis.

- 5. GASTROINTESTINAL SYSTEM:** The esophagus is intact with normal gastroesophageal junctions and without erosions or varices. The stomach is also normal without gastritis or ulcers and contains no food particles. Loops of small and large bowel appear grossly unremarkable. The appendix is unremarkable.

The liver weighs 1350 grams presenting a brown smooth glistening surface. Focal patchy yellow discoloration due to mild fatty metamorphosis is present. On sectioning the hepatic parenchyma is yellow-brown, homogenous and congested. The gallbladder is unremarkable containing approximately 30 mL of greenish bile. There is no cholecystitis or lithiasis. The biliary tree is patent. The pancreas presents a lobulated yellow cut surface without acute or chronic pancreatitis.

- 6. GENITOURINARY SYSTEM:** The left kidney weighs 130 grams, and the right kidney weighs 120 grams. On sectioning the cortex presents a normal thickness above the medulla. The renal columns of Bertin extend between the well-demarcated pyramids and appear unremarkable. The medulla presents normal renal pyramids with unremarkable papillae. The pelvis is of normal size and lined by gray glistening mucosa. There are no calculi. Renal arteries and veins are normal.

The ureters are of normal caliber lying in their course within the retroperitoneum and draining into an unremarkable urinary bladder containing approximately 50 ml of urine. The prostate is unremarkable.

- 7. HEMATOPOIETIC SYSTEM:** The spleen weighs 100 grams, presenting a gray-pink intact capsule and a dark red parenchyma. There is no lymphadenopathy. The thymus gland is involuted.

- 8. ENDOCRINE SYSTEM:** Thyroid gland is of normal size and shape, presenting two well-defined lobes with connecting isthmus and a beefy brown cut-surface. There are no goitrous changes or adenomas present. The adrenal glands are of normal size and shape and sectioning present no gross pathological lesions.

- 9. CENTRAL NERVOUS SYSTEM:** A scalp incision, craniotomy and evacuation of the brain are carried out in the usual fashion.

The scalp is intact without contusions or lacerations. The calvarium is likewise intact without bony abnormalities or fractures.

The brain weighs 1370 grams. Overlying dura is intact and unremarkable. Cerebral hemispheres reveal a normal gyral pattern. The brainstem and cerebelli are normal in appearance with no evidence of cerebellar tonsillar notching. The Circle of Willis is patent, presenting no evidence of thrombosis or berry aneurysm. On coronal sectioning of the brain the ventricular system is symmetrical and contains clear cerebrospinal fluid. There are no space occupying lesions present. Spinal cord is not examined.

SPECIMENS AND EVIDENCE COLLECTED

1. Blood, urine, vitreous fluid, and liver tissues
2. Representative tissue sections in formalin
3. Blood cards
4. Representative photographs
5. Hair
6. Swabs
7. Fingernails
8. GSR

03/02/2023