



City and County of Denver

OFFICE OF THE MEDICAL EXAMINER

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AUTOPSY REPORT

Name of Decedent: HYUN KIM **ME#:** 2018-2019
Date and Time of Death: JUNE 1, 2018; 0312 HOURS **Age:** 45 YEARS
Date and Time of Autopsy: JUNE 1, 2018; 0835 HOURS **Sex:** MALE

FINDINGS

- I. Gunshot wounds (two) of trunk
 - a. Lacerations of skin of back, chest and neck
 - b. Lacerations of soft tissues of right back, right shoulder, right intercostal spaces, anterior and left neck, and mediastinum
 - c. Lacerations of right subclavian artery, thyroid gland, left sternocleidomastoid muscle and diaphragm
 - d. Fractures of right scapula, right clavicle, and right 5th and 6th ribs
 - e. Hemorrhage with hematoma along the wound paths
- II. Gunshot wounds (four) of right lower extremity
 - a. Lacerations of skin and soft tissues of right buttock, right inguinal region, right calf, right knee and right thigh
 - b. Fractures of right femur
 - c. Hemorrhage along the wound paths
- III. Laceration of left forearm with fracture of left radius
- IV. Contusions of right elbow and fingers
- V. Abrasions of lower extremities
- VI. Therapeutic intervention

TOXICOLOGY

REFERENCE LABORATORY: National Medical Services, Inc.
Willow Grove, PA


Basic postmortem blood panel results:

<u>Compound</u>	<u>Result</u>	<u>Units</u>	<u>Matrix Source</u>
Ethanol	308	mg/dL	001 - Leg Blood
Blood Alcohol Concentration (BAC)	0.308	g/100 mL	001 - Leg Blood

Other than the above findings, examination of the specimen submitted did not reveal any positive findings of toxicological significance.

OPINION

Based on the examination findings and history available to me at this time, it is my opinion that Hyun Kim, a 45-year-old male, died as a result of gunshot wounds of trunk and extremities. The manner of death is homicide.

 7.17.2018
Krista L. Timm, M.D.
Forensic Pathologist
City and County of Denver

KLT:GS 06/27/2018

CIRCUMSTANCES OF DEATH: The decedent is a 45-year-old male (DOB: 4/27/1973) who was the passenger in a vehicle and was shot by another person. He was transported to the hospital, where he was pronounced dead shortly after arrival.

IDENTIFICATION: Digital photographic images, fingerprints, and a DNA card are obtained at the time of the autopsy. Identification is confirmed via fingerprints.

CLOTHING AND PERSONAL EFFECTS: The body is received nude. Personal effects on the body consist of a white metal ring, white metal bracelet, black/brown bracelet and a blue cloth band. Also received with the body are a blue sheet, a white sheet, and a white blanket.

EXTERNAL EXAMINATION

A postmortem examination on the body of Hyun Kim is performed at the Denver Office of the Medical Examiner, beginning at approximately 8:35 a.m. on June 1, 2018. L. McNaughton is assisting. Representatives from Denver Police Department are present for the external portion of the examination. Radiographs are obtained.

The unembalmed body is that of an adult male with a weight of 150 pounds and a body length of 65 inches. The body is normally developed and adequately nourished. The body is in full rigor mortis. Lividity is blanching on the dorsal surfaces, except in areas exposed to pressure. The skin temperature is warm.

The scalp hair is long, brown-red, and has a normal distribution. There is dark stubble on the face. The conjunctivae are pale, the corneas are glazed, and the irides are brown. There is no icterus. The ears, nose, and mouth show no abnormalities. The teeth are natural and in good condition. The neck is of normal configuration, and there are no palpable masses. The thorax is symmetrical and normal in configuration. The breasts are of male configuration, and there are no palpable masses. The abdomen is flat. The external genitalia are of male circumcised conformation, and there are no external lesions. The extremities appear normally developed, and the joints are not deformed. All digits are present. The skin is of normal pliability and texture and presents no significant lesions. An identification band is around the right ankle, and there are two on the right wrist. There is blood on the cutaneous surfaces.

SCARS AND IDENTIFYING MARKS: None noted

EXTERNAL AND INTERNAL EVIDENCE OF RECENT THERAPY:

1. An oroendotracheal tube
2. An orogastric tube
3. Intraosseous catheter in the left shin
4. A single lumen catheter in the bilateral anterior chest
5. A 12 inch sutured incised wound of the anterior and lateral left chest, traversing the fifth intercostal soft tissues with an open pericardial sac and scant serosanguineous fluid in each chest cavity
6. A black Velcro strap around the right thigh
7. A chest tube in the lateral right sixth intercostal space
8. A single lumen catheter in the right antecubital fossa
9. A 1 x 1 inch irregular non-hemorrhagic laceration of the left axilla

EXTERNAL AND INTERNAL EVIDENCE OF RECENT INJURY:

1. Perforating gunshot wound of the right back
 - I. Entrance: A 5/8 x 1/4 inch laceration with an eccentric pink abraded margin measuring up to 1/8 inch at the 4 to 7 o'clock position, is centered on a point 48-3/4 inches above the sole of the right foot and 6 inches right of the posterior midline on the lateral right back. There is no soot or stippling.
 - II. Path of projectile and injuries associated: The bullet sequentially perforates the skin and soft tissues of the right back; the right scapula; soft tissues of the right shoulder, including the right subclavian artery and the clavicle; soft tissues of the anterior neck and mediastinum; the right lobe of the thyroid gland; the cartilage of the larynx just below the vocal cords; the left sternocleidomastoid muscle and soft tissues of the left neck; and the subcutaneous soft tissues and skin of the left neck. There is extensive hemorrhage with hematoma along the wound path.
 - III. Exit and recovery of projectile:
 - A. A single fragment of irregular copper metal is recovered within the posterolateral right first intercostal soft tissue, measuring 3/16 inch in greatest dimension. An additional similar appearing irregular fragment of copper metal, measuring 5/16 inch in greatest dimension is recovered from the soft tissues of the anterior left neck.
 - B. The exit is a 3/4 x 3/8 inch laceration eccentrically located within a 2-1/2 x 2-1/4 inch purple ecchymosis, centered on a point 52-1/2 inches above the sole of the

left foot and 1-3/4 inches left of the anterior midline on the lateral lower left neck.

- IV. Course and direction: Right to left, back to front, and upward

2. Perforating gunshot wound of the right chest

- I. Entrance: A 3/16 x 1/8 inch laceration with eccentric dried purple marginal abrasion measuring up to 3/16 inch at the 4 to 11 o'clock position, is centered on a point 44-1/4 inches above the sole of the right foot and 9 inches right of the posterior midline on the lateral right lower chest. There is no soot or stippling.
- II. Path of projectile and injuries associated: The bullet sequentially perforates skin and subcutaneous soft tissues of the lateral right chest, fractures the lateral sixth rib, lacerates the fifth intercostal soft tissues, lacerates the dome of the diaphragm with comminuted fractures of the anterior fifth rib, lacerates the soft tissues and skin of the right anterior chest wall with associated hemorrhage along the wound path.
- III. Exit: A 1/2 x 1/4 inch laceration with irregular dried brown marginal abrasion up to 1/8 inch is centered on a point 46 inches above the sole of the right foot and 1-3/4 inches right of the anterior midline on the anterior right chest.
- IV. Course and direction: Right to left, back to front, and upward

3. Perforating gunshot wound of the right buttock

- I. Entrance: A 5/8 x 1/4 inch laceration with circumferential 1/16 inch dried brown marginal abrasion, is centered on a point 31-1/2 inches above the sole of the right foot and 8 inches right of the posterior midline on the lateral right buttock. There is no soot or stippling.
- II. Path of projectile and injuries associated: The bullet sequentially perforates the skin and soft tissues of the right buttock and right inguinal region, with associated hemorrhage along the wound path.
- III. Exit: A 1 x 1/2 inch irregular laceration with a 1-1/4 x 3/4 inch purple ecchymosis medial and inferior to it is centered on a point 27-1/2 inches above the sole of the right foot and 3-1/2 inches right of the anterior midline in the right groin.
- IV. Course and direction: Right to left, back to front and, downward

4. Perforating gunshot wound of the posterior right calf
 - I. Entrance: A $\frac{3}{4}$ x $\frac{1}{4}$ inch oval laceration is centered on a point 14 inches above the sole of the right foot and 1 inch lateral to the posterior midline of the right calf. There is no soot or stippling.
 - II. Path of projectile and injuries associated: The bullet sequentially perforates skin and subcutaneous soft tissues of the upper posterior right calf with associated hemorrhage.
 - III. Exit: A 1- $\frac{1}{4}$ x $\frac{3}{4}$ inch irregular laceration with up to $\frac{1}{4}$ inch pink marginal abrasion superior and laterally, is centered on a point 15- $\frac{1}{2}$ inches above the sole of the right foot and $\frac{1}{2}$ inch lateral to the posterior midline of the right calf.
 - IV. Course and direction: Lateral to medial and upward
5. Perforating gunshot wound of the posteromedial right knee
 - I. Entrance: A $\frac{3}{4}$ x $\frac{5}{8}$ inch laceration with up to $\frac{1}{2}$ inch pink marginal abrasion superior and laterally, is centered on a point 17 inches above the sole of the right foot and $\frac{3}{4}$ inch lateral to the midline of the posterior right thigh. There is no soot or stippling.
 - II. Path of projectile and injuries associated: The bullet sequentially perforates the skin and subcutaneous soft tissues of the posterior right thigh, the musculature of the right thigh, the right femur, and exits the anterior right thigh.
 - III. Exit: A $\frac{3}{4}$ x $\frac{3}{4}$ inch stellate laceration is centered on a point 20- $\frac{1}{4}$ inches above the sole of the right foot and 4- $\frac{1}{2}$ inches medial to the midline of the anterior right thigh. There is surrounding 3- $\frac{3}{4}$ x 2- $\frac{1}{2}$ inch area of purple ecchymosis.
 - IV. Course and direction: Back to front, right to left and upward
6. Perforating gunshot wound of the posterolateral right knee
 - I. Entrance: A $\frac{1}{2}$ x $\frac{1}{4}$ inch laceration is centered on a point 16- $\frac{1}{4}$ inches above the sole of the right foot and 2- $\frac{1}{4}$ inches lateral to the midline of the posterior right thigh. A 1 x $\frac{5}{8}$ inch oval abrasion is inferior and lateral to this. There is no soot or stippling.
 - II. Path of projectile and injuries associated: The bullet sequentially perforates the skin and subcutaneous soft tissues of the posterior right thigh, the musculature of the right thigh, the right femur, and exits the anterior

- right thigh.
- III. Exit: A $\frac{1}{2}$ x $\frac{1}{2}$ inch stellate laceration is centered on a point 21-1/2 inches above the sole of the right foot and 2-1/2 inches medial to the midline of the anterior right thigh.
- IV. Course and direction: Back to front, right to left and upward

NOTE: Also recovered from the anterior right thigh, are two irregular fragments of gray metal, and a fragment of irregular copper metal aggregating to $\frac{3}{4}$ x $\frac{1}{2}$ x $\frac{1}{4}$ inch; they are photographed and retained. Dissection of this region reveals that the neurovascular bundle is intact, but there is extensive comminuted fracture of the femur and hemorrhage.

7. A $\frac{1}{2}$ x $\frac{1}{2}$ inch irregular laceration with dried brown marginal abrasion with associated purple ecchymosis is on the radial surface of the left wrist, and there is fracture of the left radius
8. A 2 x $\frac{1}{2}$ inch purple-pink contusion on the right elbow
9. Multiple 1/4 inch in greatest dimension purple contusions on the dorsal aspects of the right 3rd-5th fingers
10. A 5-1/2 x 1/2 inch area of interrupted pink abrasions on the right knee and shin
11. A $\frac{3}{4}$ x $\frac{1}{4}$ inch area of pink abrasion on the left knee

The above injuries, once having been described, will not be referred to below. The remainder of the external examination of the head, neck, trunk, and extremities is unremarkable.

INTERNAL EXAMINATION

The body is opened by means of the usual "Y" and biparietal incisions. The majority of the viscera of the thoracic and abdominal cavities occupy their normal sites. The serosal surfaces are smooth and glistening. No fluids are present within the abdominal cavity. There are no abnormal masses present. The diaphragmatic leaves are normally situated. The margins of the liver and spleen are in proper relationship to their costal margins. The weights of the organs are as follows and, unless specified below, show no additional evidence of congenital or acquired disease.

Heart - 320 grams
Right lung - 370 grams
Left lung - 370 grams
Spleen - 90 grams
Liver - 1370 grams
Right kidney - 100 grams
Left kidney - 110 grams
Brain - 1520 grams

NECK: The neck organs are excised en bloc and examined separately. The surface of the tongue and serial cross sections through the tongue show no gross abnormalities. The larynx and trachea have a normal caliber and are free of obstruction. The laryngeal and tracheal mucosa is soft and pink. The paravertebral musculature is unremarkable. The cervical spine, hyoid bone, and tracheal cartilage are intact.

CARDIOVASCULAR:

Heart: The heart is normal in configuration. The coronary arteries have a normal anatomic distribution, and longitudinal sectioning shows no significant narrowing of lumina and no evidence of thrombosis. The epicardium is smooth and glistening. There is a normal amount of epicardial fat and its distribution is normal. The great vessels enter and leave the heart in a normal manner. The cardiac chambers have a normal configuration. The septa are intact, and there are no congenital abnormalities. The myocardium is of normal consistency and appearance. The left and right ventricles, and interventricular septum are 1.2 cm, 0.3 cm and 1.4 cm thick, respectively. The heart valves are thin, pliable, and delicate, and are free of deformity. The valve cusps and surfaces are free of fusion or vegetations. The valve circumferences are appropriate to the caliber of the cardiac chambers.

Aorta and its major branches: The aorta and its principal branches are patent throughout. There are no thrombi, areas of erosion, or zones of significant narrowing present.

Venae cavae and their major tributaries: The superior and inferior venae cavae and their major tributaries are patent throughout. No areas of extrinsic or intrinsic stenosis are present.

RESPIRATORY: The major bronchi have a normal caliber and are free of obstruction. The right and left lungs have a normal lobar configuration. The visceral pleura is smooth and glistening and mottled mildly with black streaks. There are no subpleural

emphysematous bullae. The pulmonary arteries are free of emboli and thrombi. The lungs are crepitant throughout with a red-brown parenchyma.

RETICULOENDOTHELIAL: The spleen has a normal configuration. The capsule is blue-gray and smooth, without areas of thickening. On section, the splenic pulp is of normal consistency and appearance. No abnormal lymph nodes are encountered.

DIGESTIVE: The esophagus is free of lesions. The stomach has a normal configuration. The serosa is smooth and glistening. The wall is of normal thickness and the mucosa is thrown into rugal folds. There are no areas of ulceration. The stomach contains approximately 250 mL of gray-brown pasty substance. The duodenum is free of ulceration and other intrinsic lesions. The remainder of the small bowel, the colon, and the rectum are normal in appearance. The appendix is present and is unremarkable.

HEPATOBIILIARY:

Liver: The capsule is smooth and glistening. The liver configuration is normal. Multiple cross sections through the liver reveal a normal lobular pattern.

Gallbladder: The gallbladder is of normal size and configuration. The wall is thin and the mucosa is bile-stained. It contains bile. No calculi are present.

PANCREAS: The pancreas is firm and normally lobulated. Multiple cross sections through the pancreas reveal tan-pink parenchyma without intrinsic lesions.

GENITOURINARY SYSTEM:

Kidneys: The right and left kidneys are similar with smooth subcapsular surfaces. The renal arteries and veins are patent and free of stenosing lesions. On section, the renal cortices are of normal thickness and the corticomedullary demarcations are distinct. The medullae are unremarkable. The pelvicaliceal systems and ureters are unremarkable.

Bladder: The bladder is of normal configuration. The mucosa is intact and free of ulcerations or other lesions. It contains approximately 220 mL of urine.

Prostate and seminal vesicles: Multiple cross sections through the prostate reveal rubbery, firm, gray-white parenchyma, free of

lesions. The seminal vesicles are unremarkable.

Testes: The testes are both present within the scrotal sac, and bivalve sections show a normal parenchyma.

ENDOCRINE SYSTEM: No abnormalities are present in the pituitary, thyroid, or adrenal glands.

MUSCULOSKELETAL: The axial and appendicular skeleton show no abnormalities. The exposed musculature is unremarkable.

HEAD/BRAIN: The scalp shows no evidence of contusions or galeal hemorrhages. The skull is intact. The dura is smooth and glistening. The convexities of the cerebral hemispheres are symmetrical. The leptomeninges are thin and transparent. The subarachnoid space does not contain any hemorrhage. The cerebrum presents normal convolutions, with no flattening of the gyri or deepening or widening of the sulci. There is no evidence of subfalcial, uncal, or cerebellar tonsillar herniation present. The major cerebral arteries show no significant atherosclerosis or congenital anomalies. The roots of the cranial nerves are unremarkable. Serial coronal sections through the cerebral hemispheres show a grossly normal cortical ribbon and underlying white matter. The basal ganglia and diencephalon show no gross abnormalities. Serial cross sections through the brainstem and sagittal sections through the cerebellum fail to show any gross lesions or abnormalities. The ventricular system is symmetrical and of normal size and configuration. After removal of the brain, the base of the skull does not demonstrate any fractures.

SPINAL CORD: Serial cross sections through a small portion of the cervical spinal cord show no gross abnormalities.

SPECIMENS RETAINED

TOXICOLOGY: Samples of postmortem blood (leg), vitreous humor, and urine are retained.

STOCK: Samples of organs are collected and retained in formalin.

EVIDENCE: Pulled scalp hair, fingernail clippings and clippers, a DNA card, and oral swab are obtained and retained, as are the recovered fragments of projectiles.

-END OF REPORT-