

North Carolina Department of Health and Human Services  
**Office of the Chief Medical Examiner**

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**REPORT OF AUTOPSY EXAMINATION**

**DECEDENT**

**Document Identifier** B201701579  
**Autopsy Type** ME Autopsy  
**Name** Rhonda Lynn Jones  
**Age** 36 yrs  
**Race** Unknown  
**Sex** F

**AUTHORIZATION**

**Authorized By** Karen L. Warwick RN                      **Received From** Robeson

**ENVIRONMENT**

**Date of Exam** 04/19/2017                      **Time of Exam** 10:10  
**Autopsy Facility** Office of the Chief Medical Examiner **Persons Present** Ms. Tracy Yorkdale; Evan Whitley  
and Derrick Evans, Lumberton Police Department, and Justin L. Jacobs, Special Agent, SBI

**CERTIFICATION**

**Cause of Death**  
UNDETERMINED

**The facts stated herein are correct to the best of my knowledge and belief.**

**Digitally signed by**

Susan E. Venuti MD 31 August 2018 14:18

**DIAGNOSES**

Putrefactive decomposition  
Minor facial injuries with nasal bone fracture  
Pulmonary anthracosis  
Cocaine and metabolite detected in pleural cavity fluid

**IDENTIFICATION**

**Body Identified By**

Radiographs

**EXTERNAL DESCRIPTION**

**Length** 62 inches  
**Weight** 108 pounds  
**Body Condition** Decomposed  
**Rigor** Rigor mortis is not present.  
**Livor** Livor mortis is not present.  
**Hair** The scalp hair is long and appears brown.  
**Eyes** The irides are indiscernible.  
**Teeth** The teeth are natural with several anterior upper teeth absent.

The body is received supine in two body bags. The outer black bag has an identification tag with "Unidentified #2 Robeson County" and the zipper pulls are secured with a red seal #0000136 with a metal wire.

Within the inner white body bag is a segment of bone that appears non-human with linear striations.

**CLOTHING AND PERSONAL EFFECTS:** The body is received unclad and is not accompanied by any articles of

clothing. The body is not accompanied by any personal effects.

**IDENTIFYING MARKS, SCARS AND TATTOOS:** Over the inferior abdomen is a 6", horizontal scar. At the right anterior-lateral thigh is a professional, polychromatic tattoo of "Bobby Ta Ta for now and forever" with a red heart. Over the right lateral upper arm is a professional, monochromatic tattoo of a probable heart with wings.

**EVIDENCE OF MEDICAL/SURGICAL INTERVENTION:** None.

The body is that of a decomposing female reported to be 36 years of age. The body surfaces are covered with varying-sized maggots. The scalp hair is sloughing. The skin surfaces are brown-green-tan and moist with multifocal areas of skin slip, partial degloving of the hands and feet, and tissue bloating. Areas of blanched pallor are present at the left abdomen, below the left breast, anterior to the left axilla, and on the left pelvis and upper thigh. The head is normocephalic. The face is distorted with central darker black discoloration. The soft tissues of the eyes, including the palpebral conjunctivae, are indiscernible secondary to decompositional changes. The ears are normally formed with earlobe piercings x1 each identified. The left ear has pink discoloration. No obvious oral mucosal injuries are discerned. No external injuries are seen on the front, back and sides of the neck in the setting of postmortem discoloration and skin slip. The chest is symmetrical. The abdomen is round and tympanic with abdominal striae. The upper and lower extremities are symmetrical. A penetrating defect is present at the left antecubital fossa. The distal fingers and toes are desiccated. The fingernails appear trimmed. Fingernail clippings are obtained. No injuries are observed on the hands and forearms. The toenails are irregular and covered with some red-orange polish. A small amount of dark brown pubic hair is evident. The external genitalia are those of an adult female with decompositional changes, extensive bloating and tan discoloration. The perianal tissues are edematous and tan. No perianal stool is seen.

## **INJURIES**

At the midline forehead, located 2 1/2" below the top of the head, is a small, diagonal cut or laceration, measuring 3/8", which is not full thickness through the scalp. At the right lateral nose is a similar, diagonal, cut-like wound, measuring 1/2". A small, superficial, linear cut is noted at the left paramidline upper nose. An nasal bone fracture is present with a small amount of red-purple hemorrhage in the surrounding subcutaneous soft tissues. At the upper attachment of the right ear is a 1/2 x 1/2", superficial tear without underlying hemorrhage. At the inferior chin is a small, open, bland, elliptical defect, measuring 3/8", with a 1 3/4" scar extending to the left.

The predominantly midline deep scalp has darker purple discoloration. Outer scalp contusions are not discernible. No craniocerebral injuries are identified; however, the examination of the brain is severely compromised by the decompositional changes.

On the upper back are two abrasions, on the left is a brown abrasion, measuring 3/8 x 1/4", and on the right is a pale yellow abrasion, measuring 1/4 x 3/16", with associated small, superficial, bland cuts. The underlying subcutaneous tissue has slight hemorrhage. No deep hemorrhage is identified. On the right paramidline lower back are multiple, horizontal, superficial, yellow incisions with desiccation that appear postmortem.

## **DISPOSITION OF PERSONAL EFFECTS AND EVIDENCE**

**The following items are released with the body**

None.

**The following items are preserved as evidence**

Pulled head hair, a blood spot card, right and left fingernail clippings, a sexual assault evidence kit and the probable (non-human) bone are released to Evan Whitley, Lumberton Police Department.

## **PROCEDURES**

### **Radiographs**

Full body radiographs are taken.

### **Identification**

Positive identification is made by comparison of postmortem radiographs and antemortem radiographs received from Southeastern Health.

## **INTERNAL EXAMINATION**

### **Body Cavities**

The body cavities are examined by the customary Y-shaped incision. The abdominal panniculus measures up to 1 3/4" in thickness. A small amount of serosanguineous decompositional fluid is present in the bilateral chest cavities, measuring less than 25 mL each. The diaphragm is intact.

### **Cardiovascular System**

**Heart Weight** 160 grams

The heart is softened. Decompositional changes are present with pallor and gaseous putrefaction. The coronary arteries have their usual origin and distribution with patent lumina. The myocardium is soft and brown. The posterior left and right ventricular walls measure 1.2 and 0.3 cm in thickness, respectively. The cardiac valves are normally formed, thin and flexible. The aorta is of normal caliber with a smooth intimal surface.

### **Respiratory System**

**Right Lung Weight** 190 grams

**Left Lung Weight** 190 grams

The lungs have prominent anthracotic spotting on the pleural and cut surfaces. Gaseous and bullous changes are present. The parenchyma is diffusely red-purple. The airway is patent. The pulmonary arteries are free of emboli.

### **Gastrointestinal System**

The esophagus is lined by smooth, pale tan mucosa without visible ulceration or varices. Gastric rugae are absent. The stomach is empty. The small and large bowel loops are unremarkable. The appendix is present and unremarkable.

### **Liver**

**Liver Weight** 720 grams

The liver is light to medium brown with a smooth capsular surface. The gallbladder contains yellow-green bile with a very scant amount of bile. Calculi are not present.

### **Spleen**

**Spleen Weight** 60 grams

The spleen is fragile with an intact capsule. The parenchyma is pale pink-purple and softened.

### **Pancreas**

The pancreas is yellow-tan and lobulated without gross lesions.

### **Urinary**

**Right Kidney Weight** 90 grams

**Left Kidney Weight** 110 grams

The renal cortical surfaces are smooth and pink-brown. A few coarse scars are noted. The corticomedullary junctions are distinct. The urinary bladder contains no urine.

### **Reproductive**

The uterus has a pink-tan myometrium without gross lesions. One ovary is identified.

### **Endocrine**

The thyroid gland is atrophic and pink-tan. The adrenal glands have yellow-orange cortices and gray-tan medullae with little disruption.

### **Neurologic**

**Brain Weight** 1030 grams

The calvarium and basilar skull are intact and without fractures. The dura mater is intact. When the dura mater is incised, the brain tissue is reduced to a gray-tan-red paste. The left side is darker red-gray-tan than the right. The presence or absence of subdural or intraparenchymal blood cannot be discerned due to the putrefactive decomposition. A discrete blood clot is not seen. Some white and gray matter is discernible.

### **Musculoskeletal System**

The musculature is pale red-brown. The ribs are intact. The subcutaneous tissues over the left-sided chest plate are darker red than over the right side. The spine and pelvis are intact and free of fractures. Extremity fractures are not palpated. The tongue is free of intramuscular hemorrhage. The strap and paraspinal muscles of the anterior neck are

free of hemorrhage. A fracture involves the left superior horn of the thyroid cartilage without overlying hemorrhage visible in the intact soft tissue, likely due to postmortem manipulation of the calcified cartilage. A small amount of light pink soft tissue, possibly representing hemorrhage, surrounds the right hyoid bone; however, no fractures involve the hyoid bone. The posterior upper back and neck are incised revealing no subcutaneous or deep intramuscular hemorrhages of the posterior neck.

## **MICROSCOPIC EXAMINATION**

### **Microscopic Comment**

Representative sections of heart, liver, kidney, lung and skin are submitted for microscopic examination. Extensive decompositional changes are present with poor preservation of architecture, loss of cellular details, diffuse tissue eosinophilia and gaseous changes, precluding the visualization of any anomalies or tissue pathology.

## **SUMMARY AND INTERPRETATION**

Rhonda Lynn Jones, a 36-year-old woman, was found face down and unclad inside a residential trash can containing trash. Upon opening the lid, a foot was initially seen. The body was decomposed with discoloration, skin slip, sloughing of scalp hair, bloating, partial degloving of the hands and feet, and the presence of maggots. Positive identification was confirmed by comparison of antemortem and postmortem radiographs. This case is associated with another female (OCME NC B17-1578) who was found on the same day in a television cabinet in a nearby abandoned house.

Facial injuries were present, including small cuts of the face and nasal bone fracture. Due to the location and position of the body when found, it is unclear whether or not these injuries occurred when placed in the trash can. No natural disease contributory to death was identified.

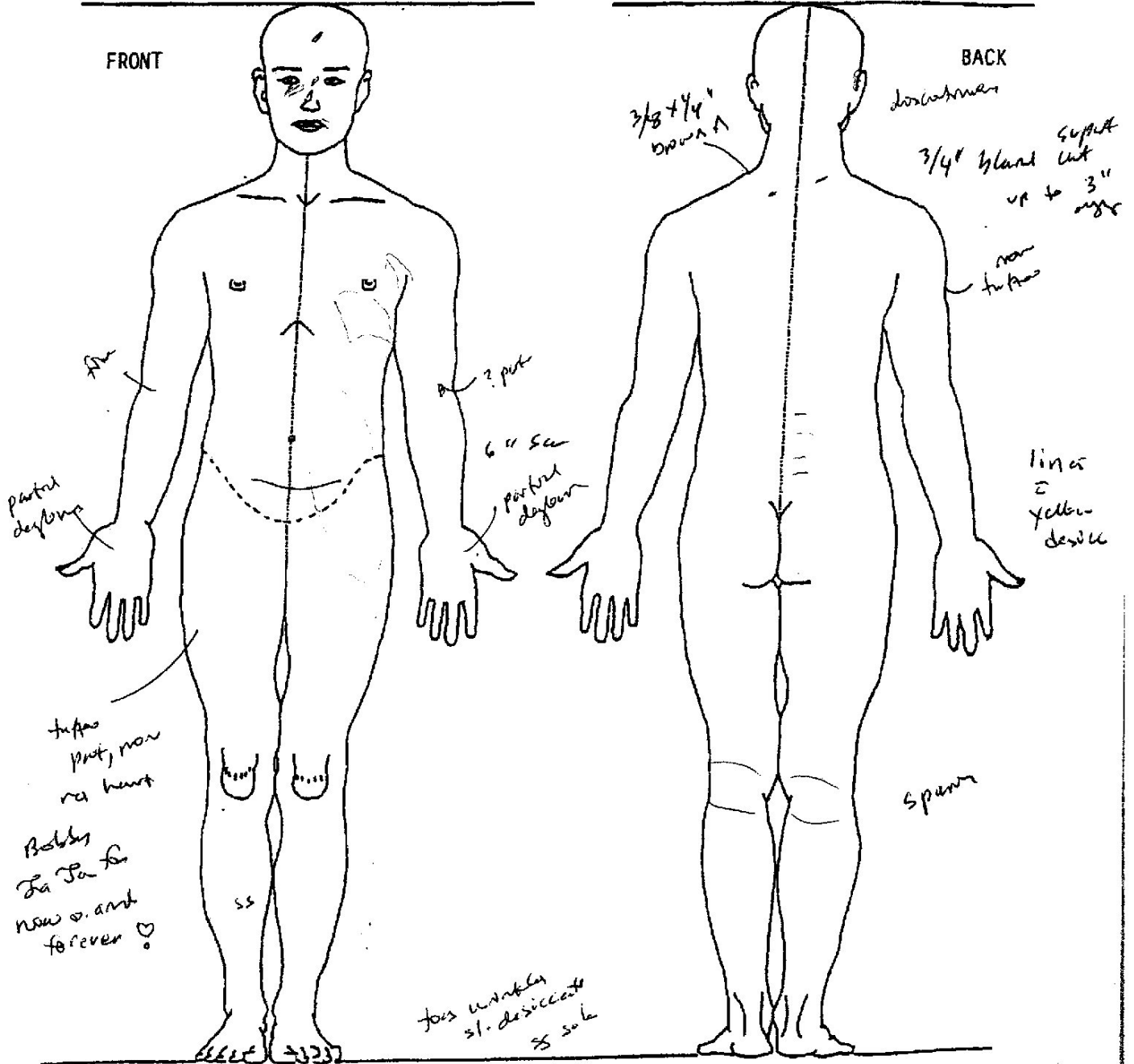
Toxicological analysis of pleural cavity fluid revealed cocaine and benzoylecgonine (metabolite of cocaine). Chlorpheniramine, dextromethorphan, fluoxetine, norfluoxetine, nicotine and a small amount of ethanol (possibly due to postmortem production in the setting of decomposition) were also detected. The collection of intravascular blood for toxicological analysis was not possible due to the decomposition.

In consideration of the available death investigation findings to date, including the covert disposal of the body, and the overall postmortem findings which are limited by the decomposition, the cause of death remains uncertain. Although illicit use of cocaine was confirmed by the toxicological analysis, a direct association to the cause of death cannot be concluded with certainty. The possibility of external factors contributing to the death, such as an asphyxial injury by neck or chest compression or covering the nose and mouth, cannot be excluded. At this time, the cause and manner of death are best classified as undetermined.

## **DIAGRAMS**

1. Body Diagram: Adult (Front/Back)

**BODY DIAGRAM: ADULT (Front/Back)**



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