Office of the Chief Medical Examiner

CB # 7580 Chapel Hill, NC 27599-7580 Telephone 9199662253

REPORT OF AUTOPSY EXAMINATION

DECEDENT

Document IdentifierB200804269Autopsy TypeME AutopsyNameDevarian Montrell GrossAge1 yrsRaceBlackSexM

AUTHORIZATION

Authorized By Michael J. Papez MD

Received From Wake

ENVIRONMENT

Date of Exam11/16/2008Time of Exam14:30Autopsy FacilityOffice of the Chief Medical Examiner Persons PresentDr. Papez, Ms. Tracy Gurnsey, Mr.Kevin Gerity, Ms. Hilary Sheaves, representatives of the Garner Police Dept. and CCBI

CERTIFICATION

Cause of Death Undetermined Homicidal Violence

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

Digitally signed by Maryanne Gaffney-Kraft DO 01 June 2009 15:09

DIAGNOSES

Body concealed in plastic bags within a storage container Advanced decomposition with partial skeletonization Healing fractures of right rib #11, left rib #7 and left rib #10

IDENTIFICATION

Body Identified By

DNA

EXTERNAL DESCRIPTION

Weight9 poundsBody ConditionDecomposedRigorAbsentLivorNot assessableHairBlackEyesDecomposedTeethNatural, appropriate for age

Received is a rectangular plastic Sterilite-brand 18 gallon storage container which is gray in color; the lid is not present. Within the storage container are children's clothing consisting of a pair of denim shorts, a dress and a shirt all of which show bleach staining and wearing, pieces of white precipitate-like material, and a white plastic trash bag with its opening tied in a knot.

The white plastic trash bag is opened via a cut along its bottom seam. Contained within the bag are a separate white plastic trash bag which partially encloses the body of a child and is focally attached to the outer bag with its bottom seam entangled in the outer bag's knot, a separate unattached white plastic trash bag, and brown decomposition fluid.

The body is that of a black male child. The body is flexed at the hips and knees in a knee-to-chest position with the arms flexed and crossed across the chest. The body is partially clad in a diaper. Advanced decomposition with extensive

softening of the skin, skin slippage, separation of the bones and partial skeletonization of the skull and neck is present. There are no readily identifiable marks or scars. There is no evidence of medical therapy.

INJURIES

<u>Blunt Force Injuries</u>

There is a healing midshaft fracture of the lateral aspect of right rib #11; consolidation of the fracture is present.

There is a healing fracture at the costochondral junction of the sternal end of left rib #7; consolidation of the fracture is present.

There is a midshaft fracture of the lateral aspect of left rib #10; the fracture margins are sharp with adjacent periosteal new bone growth, consolidation is not present.

No acute fractures are present.

DISPOSITION OF CLOTHING AND PERSONAL EFFECTS

The following items are released with the body

None.

The following items are preserved as evidence

Pulled head hair, outer and inner plastic bags, third plastic bag, diaper, sample of fluid from plastic bag, plastic container and children's clothing: shorts, dress and shirt; all evidence is turned over to the CCBI.

PROCEDURES

Radiographs

X-rays are taken of the body within the plastic bags; no acute fractures identified; no metallic foreign bodies identified.

Identification

The decedent's identification is confirmed via comparison of his DNA to his mother's DNA. The testing was performed by the University of North Texas Health Science Center at Fort Worth, Texas.

INTERNAL EXAMINATION

Body Cavities The internal organs are in an advanced state of decomposition. Intravascular blood is not present.

Cardiovascular System Heart Weight 7 grams Advanced decomposition.

Respiratory SystemRight Lung Weight16 gramsLeft Lung Weight14 gramsThe larvngeal cartilages are intact. The by

The laryngeal cartilages are intact. The hyoid bones are separated but intact. The larynx is clear. The upper and lower airways are not obstructed. The parenchyma of both lungs shows advanced decomposition.

Gastrointestinal System

Advanced decomposition; portions of the small intestine are identified.

Liver Liver Weight 43 grams Advanced decomposition; the gallbladder is not identified.

Spleen Not identified.

Pancreas

Not identified.

Urinary

The kidneys, ureters and bladder are not identified.

Endocrine

The thyroid and bilateral adrenal glands are not identified.

NeurologicBrain Weight20 gramsAdvanced decomposition, liquified.

Skin Advanced decomposition.

Immunologic System The thymus is not identified.

Musculoskeletal System Other than previously noted injuries, grossly unremarkable.

MICROSCOPIC EXAMINATION

Microscopic Comment Sections of the heart, liver and lungs show autolysis.

SUMMARY AND INTERPRETATION

The decedent is a 1 year-old black male child who was found concealed in plastic bags within a plastic storage container at his mother's home. Per law enforcement reports the decedent was last known to be alive in early October.

The finding at autopsy is a decomposed male child with blunt force injuries consisting of healing fractures of right rib #11, left rib #7 and left rib #10. The fractures of right rib #11 and left rib #7 show extended healing with fracture consolidation. The fracture of left rib #10 shows early healing with sharp fracture margins and adjacent periosteal new bone growth. These findings are consistent with at least two separate past incidents of injury and at least two but most consistent with three separate impact sites. No acute fractures are present. Given the advanced state of decomposition present soft tissue and organ injuries can not be ruled out.

Toxicological analysis of postmortem liver is negative for cocaine, opiates and organic bases.

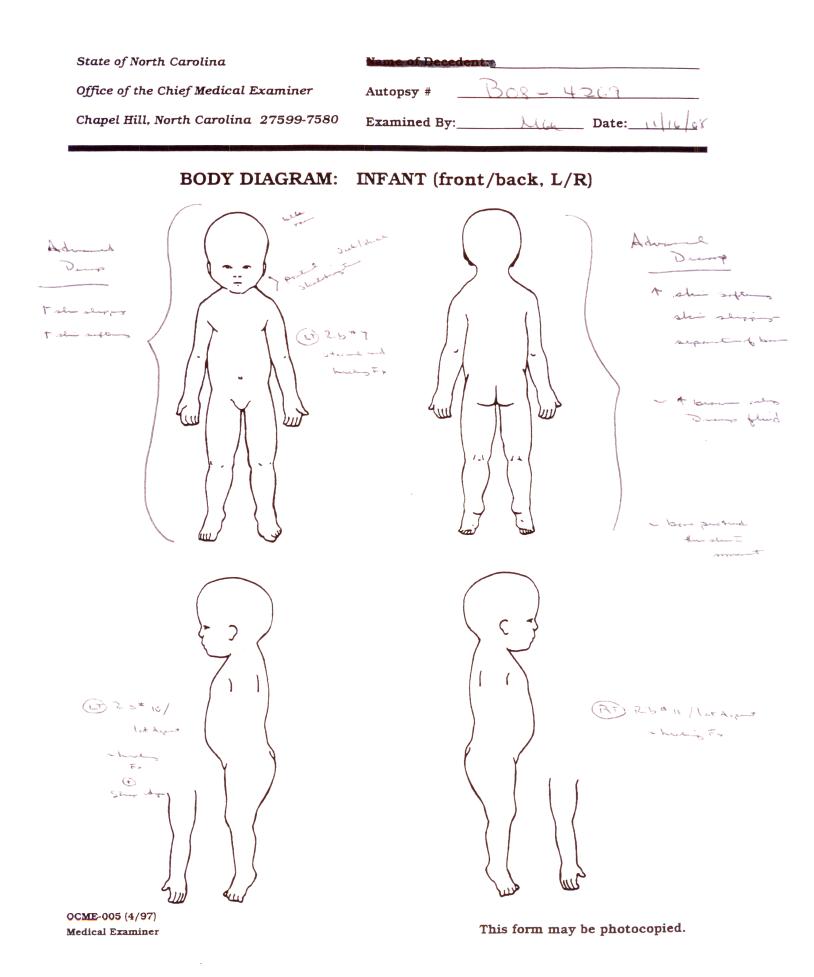
Given the autopsy and investigative findings, it is my opinion the cause of death in this case is undetermined homicidal violence.

DIAGRAMS

1. 1. Infant (front/back, L/R)

APPENDICES

- 1. 1. Anthropology Study
- 2. 2. Anthropology Study



North Carolina State University is a landgrant university and a constituent institution of The University of North Carolina Department of Sociology and Anthropology

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REPORT OF TRAUMA EXAMINATION

NCSU FORENSIC CASE NUMBER: FA-08-06 ME CASE NUMBER: B08-4269

DATE OF RECOVERY AND ANALYSIS OF REMAINS: On 11 December 2008 the skeletal remains of the toddler presumed to be **DEVERIAN GROSS** were examined for trauma by Dr. Ann H. Ross at the Office of the Chief Medical Examiner's, Chapel Hill and left ribs # 7 and 10, right rib #11 and vertebral column were transferred to NC State and the Office State Archaeology Research Center (OSARC) in Raleigh, NC for further analysis.

ANTEMORTEM TRAUMA OR PATHOLOGY: There is evidence of two healed rib fractures of the lateral right 11th rib and at the costochondral junction of the left 7th rib. Because fractures heal at an accelerated rate in all phases of healing in infants and young children these fractures are consistent with timing between 4 weeks - 3 months (O'Connor and Cohen, 1987; Cramer and Green, 2003). A more recent fracture is also evident on the lateral aspect of the left 10th rib consistent with timing between 7 - 14 days based on the observable periosteal new bone adjacent to the fracture site and the sharp fracture margin (O'Connor and Cohen, 1987; Cramer and Green, 2003). These fractures are in different stages of healing suggesting at least two separate episodes of trauma and probably three separate impact occurrences. Accidental rib fractures are rare in young children, particularly when they are at difference stages of healing and are a strong indication of abuse (Cramer and Green, 2003). Lateral rib fractures and fractures at the costochondral junction have been associated with anteroposterior compression and major visceral and abdominal trauma, respectively (Cramer and Green, 2003; Ng and Hall, 1998). See Table.

SUMMARY OF CONCLUSIONS: These remains exhibit three rib fractures at different stages of healing strongly suggesting abuse.

SUMMARY OF ATTACHMENTS: 2 pages

Ann H. Ross, Ph.D. Associate Professor of Anthropology Co-Director North Carolina Program for Forensic Science

22 January 2009

REPORT SUBMITTED TO:

Maryanne Gaffney-Kraft, MD. Office of the Chief Medical Examiner Campus Box 7580 Chapel Hill, NC 27599-7580

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B08-4269 (Gross, Devarian)

Rib	Location	Description	Mechanism	Timing
L 7	Anterior/Costochondral junction	Consolidation, fracture line still evident	Associated with visceral and abdominal injuries	4 weeks – 3 months
L 10	Lateral	Periosteal new bone evident, fracture line margin still sharp	Anteroposterior compression	7-14 days
R 11	Lateral	Consolidation, fracture line still evident	Anteroposterior compression	4 weeks – 3 months