



SOUTHWESTERN  
INSTITUTE OF FORENSIC SCIENCES  
AT DALLAS



Office of the Medical Examiner  
In the County of Dallas  
State of Texas

This affidavit is in compliance with Texas Rules of Criminal Evidence, Rule 902(10b).

Case No. IFS-15-08021 in the matter of

Rodriguez, Jesus Delgado, deceased.

Before me, the undersigned authority, personally appeared Rebecca Beshay, who being duly sworn, deposed as follows:

My name is Rebecca Beshay. I am over 21 years of age, of sound mind, capable of making this affidavit, and personally acquainted with the facts herein stated:

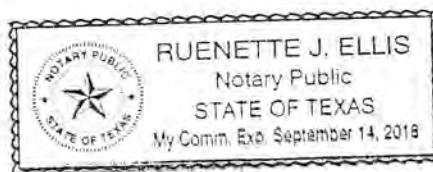
I am the Deputy Custodian of Records of the Dallas County Medical Examiner's Office. Attached hereto are 9 pages of records and xx photographs from the Dallas County Medical Examiner's Office. These said 9 pages of records and xx photographs are kept by the Dallas County Medical Examiner's Office in the regular course of business, and it was the regular course of business of the Dallas County Medical Examiner's Office for an employee or representative, or a doctor permitted to practice in the Dallas County Medical Examiner's Office, with personal knowledge of the act, event, condition, opinion or diagnosis, recorded to make the record or to transmit information thereof to be included in such record; and the record was made at or near the time or reasonably soon thereafter. The records attached hereto are the original or exact duplicates of the original.

  
\_\_\_\_\_

SWORN TO AND SUBSCRIBED before me on July 29, 2015

  
\_\_\_\_\_

Notary Public in and for Dallas County, Texas  
My commission expires



(By statute, the original records are retained by the Dallas County Medical Examiner's Office. See Art. 49.25, Sec. 11, Vernons Texas Statutes, CCP.)



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AT DALLAS



Office of the Medical Examiner  
Autopsy Report

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Case: IFS-15-08021 - CC

Decedent: Rodriguez, Jesus Delgado      65 years Hispanic Male      DOB: 02/27/1950

Date of Death: 05/17/2015 (Actual)

Time of Death: 01:30 PM (Actual)

Examination Performed: 05/18/2015 09:30 AM

Body Weight:      135 lbs      BMI: 23.17

Body Length:      64 in

**ORGAN WEIGHTS:**

Brain: 1,500 g	Right Lung: 290 g	Right Kidney: 130 g
Heart: 320 g	Left Lung: 320 g	Left Kidney: 140 g
Liver: 1,270 g	Spleen: 220 g	Thymus: 3 g

This autopsy is performed at the request of W. H. Peterson, Justice of the Peace, Precinct 1, Place 2, McLennan County, Texas.

**EXTERNAL EXAMINATION**

The body is unidentified at the time of autopsy. Photographs, fingerprints, palmprints, and radiographs of the head and trunk are taken. Positive identification is established via fingerprint comparison.

When first viewed, the hands are bagged. The body is received clad in a black t-shirt, blue jeans with a tooled brown leather belt, black camo-print boxer shorts, white socks, and heavy black boots. A yellow and red bandana with "GRUNT" on the front is tied around the forehead, just above the eyebrows. Remnants of a broken pair of black plastic-rimmed eye glasses are on the face. Around the neck is a white metal chain necklace with a white metal skull pendant and a white metal U.S. Marine Corp tag. Also around the neck is a black cord necklace with beads and a crucifix pendant. Thick black leather cuffs are around each wrist; the left cuff has a watch face. Within the pants pockets are an ink pen, key ring, rubber band, piece of notebook paper, piece of toilet paper, lip balm tube, lighter, one \$20 dollar bill, one \$10 dollar bill, three \$1 dollar bills, and one quarter. Fragments of black and clear plastic are recovered from the clothing. The necklaces, wrist cuffs, and personal property from the pants' pockets are released with the body; the remainder of the items are submitted to the Criminal Investigation Laboratory.

The body is of a normally-developed, light-skinned Hispanic man whose appearance is consistent with the given age of 65 years. When nude, the body measures 64 inches in length and weighs 135 pounds (BMI: 23.2). The scalp is slick-shaved with



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the exception of a thin strip of gray hair in the midline which is partially pulled into a thin ponytail on the top of the head. The gray-black mustache measures 3/4 inch. The hair on the chin is thin, white, and divided into three small ponytails held in place with black rubber bands. The eyes have brown irides and the conjunctivae are pale. The oral cavity has natural teeth in fair repair and is atraumatic. The chest and back are developmentally unremarkable. The abdomen is flat. The external genitalia are of a normal, uncircumcised adult man. The extremities are symmetric and intact. The fingernails are short and well-kempt.

The body is well preserved, unembalmed, and cold subsequent to refrigeration. Moderate symmetrical rigor mortis is present in the upper and lower extremities, neck and jaw. Lividity is faint red- purple, fixed, and posterior.

#### IDENTIFYING MARKS AND SCARS

There are innumerable monochromatic and polychromatic tattoos on most body surfaces including the scalp, axillae, knuckles, and palms. The tattoos include, but are not limited to, skulls; dragons; Chinese lettering and Asian-inspired designs; Christian crosses; US Marine Corp logos, designs, and phrases; words and individual lettering including multiple references to Vietnam. Of note, a set of US Military dog tags with "RODRIGUES J. D." is tattooed on the medial side of the left foot.

A small scar is identified in the umbilicus.

#### THERAPEUTIC PROCEDURES

There is no evidence of emergency resuscitation of medical therapy.

#### EVIDENCE OF INJURY

There are two gunshot wound of the head and trunk which will be described individually below; no sequence is implied.

##### A. Gunshot wound of head:

The left side of the face has a gunshot entrance wound located medial to the inner cantus of the left eye, 4 inches from the top of the head and 1 inch to the left of the midline. The 3/4 inch, round defect has 1/16 inch concentric marginal abrasion which is overlapped by a 1 x 3/8 inch rectangular abrasion on the lateral side of the nose and upper eye lid. Two 1/8th inch superficial lacerations are on the upper left eyelid adjacent to the defect at 2 o'clock. The right side of the bridge of the nose has a faint superficial abrasion and the lateral side of the right nasal ala has a 1/8 inch superficial abrasion. There is no soot or stippling on the skin. Fragments of black and clear plastic are noted near the wound and a pair of broken black-framed eyeglasses are still partially on the face (as above).

After perforating the facial skin, the bullet perforates the medial orbital soft tissue (left globe is intact), continues through the floor of the left anterior cranial fossa, passes medial to the left internal carotid artery and perforates the left side of the sella turcica to enter the posterior cranial fossa. The bullet then perforates the left cerebellar hemisphere, grazes the left side of the medulla, and partially exits the occipital skull through an oval defect with external beveling.

A copper-jacketed, slightly deformed, medium-caliber projectile is recovered from the occipital scalp directly beneath the partial exit, located 4 1/2 inches from the top of the head and 1 inch to the left of the midline. The base of the bullet is inscribed



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with "15-8021" over "CS", photographed, placed in an appropriately-labeled envelope, and submitted to the Criminal Investigation Laboratory.

The trajectory of the bullet is from front to back and slightly downward with minimal right or left deviation.

Associated with the wound track is a left occipital subscalpular hematoma overlying the projectile. The left occipital skull has a linear fracture radiating inferiorly from the exit wound to the foramen magnum. There is a thin layer of subdural hemorrhage coating the left anterior and middle cranial fossae and approximately 20 cc of subdural blood in the posterior cranial fossa. The left cerebral convexity, inferior surfaces of the cerebral hemispheres, brainstem and cerebellum have subarachnoid hemorrhage. The cerebral hemispheres have focal disruptions of the left inferior frontal and temporal lobes associated with the skull base defects. The gyri are otherwise of normal configuration. There are no herniations.

Cut sections of the cerebral hemispheres, brainstem and cerebellum show blood within the ventricular system and slight softening of the inferior temporal lobes. There are no cortical contusions or deep white matter hemorrhages. The wound track through the cerebellum is hemorrhagic.

#### B. Gunshot wound of trunk:

The right side of the back has a gunshot entrance wound located 15-3/4 inches from the top of the head and 3-1/2 inches to the right of the midline. The 1/4 inch, round defect has a 1/16 inch pink, concentric marginal abrasion. There is no soot or stippling on the skin.

After perforating the skin and subcutaneous soft tissue, the bullet sequentially perforates the right 8th intercostal space, lower lobe of the right lung, right pulmonary hilum and pulmonary ligament, left atrium and ventricle, superior segment of the lower lobe of the left lung, and anterolateral left 4th rib.

The bullet exits the subcutaneous soft tissue and skin of the left chest, 14 inches from the top of the head and 6 inches to the left of the midline. The slit-like defect measures 5/8 inch and has slightly irregular margins. There is no marginal abrasion or firearms residue.

The trajectory is from back to front, right to left, and upward.

The wound track is hemorrhagic. The right and left pleural cavities contain approximately 1150 cc and 690 cc of blood, respectively. The pericardial sac is lacerated with approximately 10 cc of residual blood. The heart has a large, gaping defect of the left atrium and basilar left ventricle which involves the left ventricular outflow tract, mitral valve, and left circumflex coronary artery. No fragments are recovered along the wound track.

#### Other:

The left side of neck, below the angle of the jaw, has a 3/4 inch triangular group of widely-spaced angular and punctate abrasions.

The upper right arm has a 3-1/2 x 2-1/2 inch group of widely-spaced linear and punctate abrasions that measure up to 1/4 inch.





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These injuries, having been described once, will not be repeated.

#### EVIDENCE SUBMITTED

The following items are collected, sealed within appropriately labeled containers, and submitted to the Criminal Investigation Laboratory:

- Blood standard
- Bags from hands
- Nail clippings
- Scalp hair standard
- Gunshot residue kit
- Projectile
- Decedent clothing
- Eyeglasses
- Black and clear fragments.

#### INTERNAL EXAMINATION

**BODY CAVITIES:** The thoracic and abdominal organs are in their normal anatomic positions. The peritoneal cavity has bilateral inguinal mesh repairs.

**HEAD:** See EVIDENCE OF INJURY. The spinal cord as viewed from the cranial cavity is unremarkable.

**NECK:** The soft tissue and prevertebral fascia are unremarkable. The hyoid bone and larynx are intact. The lumen of the larynx is not obstructed.

**CARDIOVASCULAR SYSTEM:** See EVIDENCE OF INJURY. The intimal surface of the abdominal aorta has no significant atherosclerosis. The aorta and its major branches and the great veins are normally distributed and unremarkable. The pulmonary arteries contain no thromboemboli. The epicardium has two soft brown pedunculated nodules arising from the anterior left ventricle, near the left anterior descending coronary artery. The coronary arterial system has slight atherosclerosis of the left anterior descending and right coronary arteries. The left ventricle measures 1 cm and the right ventricle measures 0.2 cm.

**RESPIRATORY SYSTEM:** See EVIDENCE OF INJURY.

**HEPATOBIILIARY SYSTEM:** The liver is covered by a smooth, glistening capsule. The parenchyma is dark pale brown and slightly slippery. The gallbladder contains approximately 20 cc of dark green bile, with no calculi.

**GASTROINTESTINAL SYSTEM:** The esophageal mucosa is gray, smooth, and unremarkable. The stomach contains approximately 20 cc of tan liquid. There are no tablets or capsules. The gastric mucosa has normal rugal folds, and there are no ulcers. The small and large intestines are unremarkable. The appendix is present. The pancreas is unremarkable externally and upon sectioning.



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**GENITOURINARY SYSTEM:** The capsules of both kidneys strip with ease to reveal smooth and slightly lobulated surfaces. The cortices are of normal thickness, with well-demarcated cortico-medullary junctions. The calyces, pelves, and ureters are unremarkable. The urinary bladder contains approximately 300 cc of clear yellow urine. The mucosa is gray, smooth, and unremarkable. The prostate gland is unremarkable externally and upon sectioning.

**ENDOCRINE SYSTEM:** The thyroid and adrenal glands are unremarkable externally and upon sectioning.

**LYMPHORETICULAR SYSTEM:** The spleen is covered by a smooth, blue-gray, intact capsule. The parenchyma is dark red. The cervical, hilar, and peritoneal lymph nodes are not enlarged.

**MUSCULOSKELETAL SYSTEM:** The clavicles, sternum, pelvis, and vertebral column have no fractures. The diaphragm is intact.

**MICROSCOPIC EXAMINATION:**

**Epicardial tumor:** Cross-sections of the pedunculated epicardial tumor shows two encapsulated proliferations of benign adipose tissue. The adipose tissue has mature vessels and focally fibrotic septae. There is no hemorrhage or necrosis. Nuclear evaluation is somewhat limited by putrefaction. The capsule is thick and fibrotic. In the absence of nuclear atypia, these findings are most consistent with a benign epicardial/ pericardial lipoma.

**TOXICOLOGY:****Evidence Submitted:**

The following items were received by the Laboratory from Forensic Pathology:

- 008-007: Vitreous - red top tube
- 008-005: Blood, femoral - red top tube
- 008-003: Blood, femoral - gray top tube
- 008: Biohazard Bag
- 008-006: Urine - red top tube
- 008-001: Blood, femoral - gray top tube
- 008-002: Blood, femoral - gray top tube
- 008-004: Blood, femoral - gray top tube
- 008-008: Skeletal muscle - plastic tube



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**Blood, postmortem**

**Acid/Neutral Screen (GC/MS)**

ibuprofen detected (008-004)

**Alcohols/Acetone (GC)**

negative (Item# 008-002)

**Alkaline Quantitation (GC/FID)**

sertraline: 0.15 mg/L (Item# 008-001)

**Alkaline Screen (GC/MS)**

demethylsertraline detected (008-003)

**Vitreous**

**Alcohols/Acetone (GC)**

negative (Item# 008-007)



**FINDINGS:****I. Gunshot wound of head:**

- A. Entrance: Left medial periorbital face.
- B. Injury:
  1. Perforation of left anterior skull base, sella turcica, left occipital bone, and cerebellum.
  2. Subdural hemorrhage and subarachnoid hemorrhage.
  3. Graze, left medulla
- C. Recovery: Left occipital scalp.
- D. Trajectory: Front to back and slightly downward, with minimal right-left deviation.
- E. Range of fire: No firearms residue on skin.

**II. Gunshot wound of trunk:**

- A. Entrance: Right mid back.
- B. Injury:
  1. Perforation of posterior right 8th intercostal space, left anterolateral 4th rib, right and left lungs, heart, and pericardium.
  2. Bilateral hemothoraces and hemopericardium (approximately 1850 cc, total).
- C. Exit: Left anterolateral chest wall.
- D. Trajectory: Right to left, back to front, and upward.

**III. Coronary artery atherosclerosis, slight.****IV. Granular kidneys.****V. Pedunculated epicardial lipoma.**

VI. Investigative information indicates the decedent was shot by another person or persons outside a restaurant during an incident involving multiple motorcycle gangs and police.

VII. This case is related to cases IFS-15-08016, IFS-15-08017, IFS-15-08018, IFS-15-08019, IFS-15-08020, IFS-15-08022, IFS-15-08023, IFS-15-08029, and IFS-15-08875.

**CONCLUSIONS:**

Based upon the autopsy and the history available to me, it is my opinion that Jesus Delgado Rodriguez, a 65 year old Hispanic man, died as the result of gunshot wounds of the head and trunk.

**MANNER OF DEATH:** Homicide





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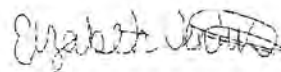
07/13/2015

Candace Schoppe, M.D.  
Medical Examiner



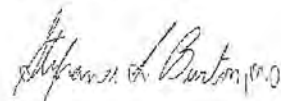
07/13/2015

Tracy J Dyer, M.D., J.D.  
Medical Examiner



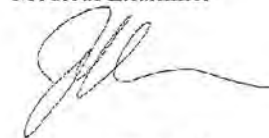
07/14/2015

Elizabeth Ventura, M.D.  
Medical Examiner



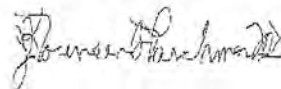
07/21/2015

Stephanie Burton, M.D.  
Medical Examiner



07/13/2015

Jill E Urban, M.D.  
Medical Examiner



07/15/2015

Janis K Townsend-Parchman, M.D.  
Medical Examiner



07/13/2015

Emily Ogden, M.D.  
Medical Examiner



07/16/2015

Chester S Gwin, M.D.



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Medical Examiner



07/20/2015

Reade A Quinton, M.D.

Deputy Chief Medical Examiner



07/13/2015

Jeffrey J Barnard, M.D.

Director and Chief Medical Examiner



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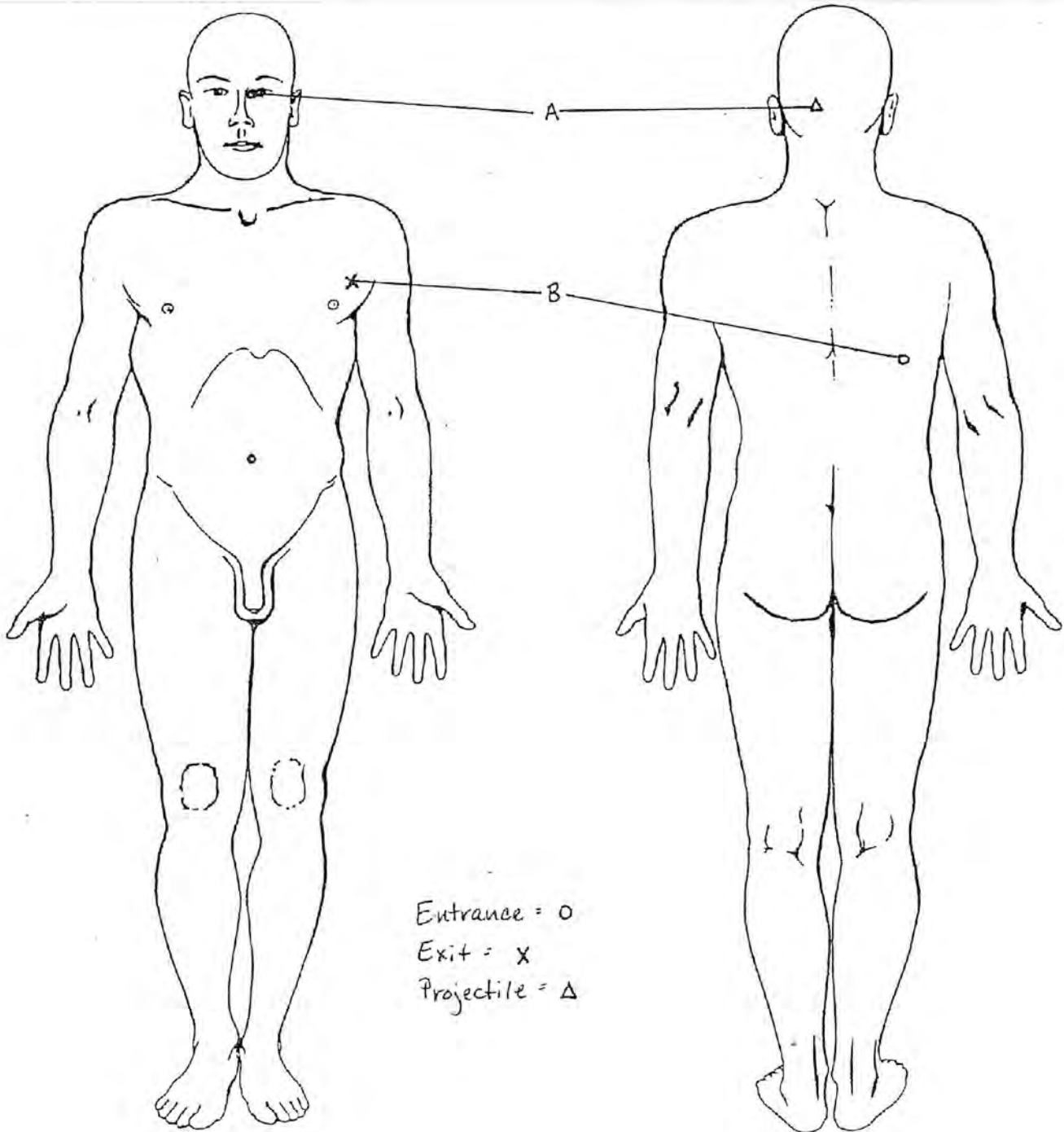
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Name Jesus Dolgado Rodriguez

Case No. 15-08021

Age 65

Date 5/18/15



For report of

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