



Board of Medicolegal Investigations
Office of the Chief Medical Examiner
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CERTIFICATION
 I hereby certify that this document is a true and correct copy of the original document. Valid only when copy bears imprint of the office seal.
 By _____
 Date _____

REPORT OF AUTOPSY

Decedent	Age	Birth Date	Race	Sex	Case No
NOAH ALEXANDER NICHOLS	19	5/14/2004	WH	M	2305608

ID By
VISUAL/TAG

Authority for Autopsy
LEONARDO ROQUERO, M.D.

Present at Autopsy
JESSICA GARY (INVESTIGATOR), JASON ROBERT PARKS (PATHOLOGY ASSISTANT)

FINDINGS

- I. Multiple blunt force injuries
 - a. Head and Neck:
 - i. Abraded avulsion-laceration on the left top of the head
 - ii. Subjacent abrasions on the lateral left eyebrow, corner of the left eye and left cheek, front of the left ear, left ear with associated lacerations and left side of the neck
 - iii. Abrasions on the right back of the head behind the right ear, and subjacent posterior right neck
 - iv. Broken upper and lower teeth with abrasions on the midline mucosa of the upper lip and laceration on the midline mucosa of the lower lip
 - v. Laceration on the left surface of the tongue
 - vi. Subcutaneous scalp and subgaleal hemorrhages on the parietal, occipital bilateral temporal and left frontal regions of the head
 - vii. Left temporalis muscle laceration and hemorrhage
 - viii. Fractures of the left parietal-temporal and frontal bones
 - ix. Basal skull fractures splitting the middle base of skull into two (i.e., anterior and posterior), and extending to the left temporal and sphenoid bones, and around the occipital bone
 - x. Additional separate fractures of the occipital bone extending into the edges of the foramen magnum and occipital condyles
 - xi. Subdural hemorrhage of approximately 20 millimeters
 - xii. Bilateral subarachnoid hemorrhage
 - xiii. Swelling of the brain with lacerations of the inferior surface of the left temporal lobe, brainstem and its adjacent cerebral vessels, and left cerebellum
 - xiv. Cervical (neck) fracture at C1, C2, C6 and C7
 - xv. Misalignment of C1 and occipital condyle
 - xvi. Pneumocephalus and pneumorrhachis

(Continued on page 2)

CAUSE OF DEATH: MULTIPLE BLUNT FORCE INJURIES

MANNER OF DEATH: UNDETERMINED

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

LEONARDO ROQUERO, M.D. Pathologist

OCME Central Division 9/5/2023 1:00 PM

Location of Autopsy

Date and Time of Autopsy

FINDINGS (Cont'd)

- b. Torso
 - i. Broad abrasions on the upper back containing black material
 - ii. Abrasions showing combined linear and varisized pinpoint to round to irregular individual patterns involving the left upper back, shoulder, posterior left arm, and left side of the torso
 - iii. Abrasions on the right buttock
 - iv. Abrasion with the varisized pinpoint to round to irregular abrasions on the side of the left buttock
 - v. Lacerations of the right and left lungs with contusions, left pulmonary vessels, left atrium of the heart, spleen, and proximal stomach
 - vi. Soft tissue hemorrhage of the posterior upper chest cavity
 - vii. Bilateral hemothoraces of at least 1200 mL in toto
 - viii. Hemopericardium of at least 150 mL
 - ix. Hemoperitoneum of at least 200 mL
 - x. Bilateral scapular fractures
 - xi. Bilateral posterior rib fractures as follows
 - 1. Right 1-5 and 8 ribs
 - 2. Left 2- 5 ribs
 - 3. Thoracic vertebral fractures (T1, T2, T4-T9 and T11)
 - xii. Bilateral pneumothoraces with left more than the right

- c. Extremities
 - i. Abrasions on the right arm and forearm, left elbow, thighs, knees, legs and right foot, side of the right ankle, and side of the right hip
 - ii. Contusion on the back of the right heel
 - iii. No evidence of fractures

OPINION:

In consideration of the circumstances surrounding the death, autopsy examination, and toxicology result, the death of Noah Alexander Nichols is due to multiple blunt force injuries. The decedent was found naked wearing only a pair of shoes on the side of a highway on the morning of September 4, 2023. There were no vehicle parts or debris observed on the scene. At this time, what transpired on how the body was found on the road having multiple blunt force injuries is unknown. Therefore, the manner of death is deemed undetermined.

An autopsy was performed on the body of Noah Alexander Nichols at the Office of the Chief Medical Examiner at Oklahoma City, Oklahoma, on September 5, 2023, at 1300 hours.

CIRCUMSTANCES OF DEATH:

The decedent was a 19-year-old male who was found on the southbound side of a highway by a passing truck driver on September 4, 2023, at approximately 0553 hours. He was naked and was only wearing unmatching shoes. There was a pair of shorts found several feet from the decedent and was reported to be his. Additionally, there were three pieces of a white metal chain as well as part of a tooth present several feet from the decedent. Also, there was a clump of hair found within one of the lanes of the highway several feet from the decedent. Additionally, a clump of hair was observed on the right buttock without blood or tissue. The paved highway consisted of two lanes with shoulders on both sides and a speed limit of 65 mph. The highway was poorly lit at night. There were no vehicle parts or debris observed on the scene. Further investigation revealed that the decedent was at a house party and drinking on September 3, 2023. Then he rode an ATV ranger vehicle with several men that had a roll over incident. The decedent was alive following the incident and returned to the party where he got into an argument with his girlfriend. The decedent left the house party and was not found until the morning of September 4, 2023, on the side of the highway.

IDENTIFICATION:

Subsequent scientific identification of the decedent was made by Visual/Tag.

EXTERNAL EXAMINATION:

The body was received sealed with a seal number 1422735 along with the Oklahoma Office of the Chief Medical Examiner identification tag. The body was that of a normally developed and nourished Caucasian male appearing about the recorded age of 19 years. The body measured 73 inches in length and weighed 175 pounds (BMI = 23.1 kg/m²). Rigor mortis was complete. The pink-purple livor mortis was present posteriorly and fixed, except in areas exposed to pressure. The body was received wearing only an unmatched pair of shoes. The right shoe was a "Hey Dude" brand with a speed lacing shoelace containing minimal debris and grass inside. The left shoe was an "Adidas" brand with a regular tied shoelace containing more debris and grass inside. There was no observable damage to the shoes. Also received were three separate brown bags labelled as follows: "shorts" containing a pair of white printed shorts without observable damage; "white metal chain" containing three pieces of white metal chains, and "tooth" containing a broken half of a tooth consistent with a molar tooth. The scalp hair was brown. The eyes had white sclerae, pale conjunctivae, and brown irides having 5-millimeter dilation of the right and left pupils, respectively. There was no evidence of petechiae, hematoma, injuries or lesions present. The dentition was natural. There was stubble. There was no evidence of petechiae or lesions identified in the oral mucosa. There were no masses discernable in the neck and the larynx was in the midline. The thorax was symmetrical. The abdomen was flat. The external genitalia were those of a normal adult circumcised male. There was drying artifact of the scrotum. The back and extremities showed no significant deformities. There was a drawing in black ink of a stick-figure person on the side of the right thigh. There was a cluster of parallel linear scars on the posterior left arm and elbow. There were additional scars of different shapes on the rest of the extremities. There were scabs present on the right upper lip and palmar surfaces of the right thumb and index finger. There were scabs and healed abrasions on the right side of the nose, back of the right hand including the third through fifth knuckles, middle phalanges of the index to the fifth fingers and distal phalanx of the middle finger. There were healed abrasions on the lower back, back of the left hand including the fifth knuckle and middle phalanx of the fifth finger, posterior left ankle, medial heel of the left foot, and dorsum of the left foot. There was a round healing ulcer on the posterior right thigh. There was drying of the palmar surfaces of the hands. There was skin slippage and bullae on the right upper back, and left knee. There was a cluster of tan horizontal linear interrupted abrasions on the left abdomen. Swabs (oral, penile and anal), hair (scalp and pubic hair), fingernail clippings and photographs were obtained.

EVIDENCE OF TREATMENT:

There was no evidence of treatment.

EVIDENCE OF POSTMORTEM TISSUE DONATION

There was no evidence of postmortem tissue donation.

EVIDENCE OF INJURY:

MULTIPLE BLUNT FORCE INJURIES

A. Head and Neck:

External examination revealed a 4-inch x 2-inch abraded avulsion-laceration having a fish-like appearance having drying artifact on the left fronto-parietal scalp with exposure of the bone. There were subjacent abrasions on the lateral left eyebrow, corner of the left eye and left cheek, front of the left ear, left ear with associated lacerations on the antihelix and concha, and left side of the neck. There were abrasions on the right back of the head behind the right ear, and subjacent posterior right neck. There was bleeding coming out from the right and left ears. The upper and lower teeth were broken with few fragments found inside the mouth. There were white abrasions on the midline mucosa of the upper lip. There was a laceration on the midline mucosa of the lower lip. There was laceration of the tongue at the left ventral surface

Internal examination revealed subcutaneous scalp and corresponding subgaleal hemorrhages on the parietal, occipital, bilateral temporal and left frontal regions of the head. There was left temporalis muscle laceration and hemorrhage. There was fracture of the left parietal-temporal and frontal bones. There was fracture of the base of the skull that run across the lateral end of the petrous ridge of the right temporal bone, through the sella turcica and the lateral end of the petrous ridge of the left temporal bone (hinge-type fracture) that extended to the left temporal bone and greater wing of the sphenoid, and that extended around the occipital bone at the area of the falx cerebri. There were additional separate fractures of the occipital bone at the falx cerebelli extending into the edges of the foramen magnum. There was subdural hemorrhage of approximately 20 millimeters of clotted blood in the posterior cranial fossa. There was bilateral subarachnoid hemorrhage. The brain was swollen with lacerations of the inferior surface of the left temporal lobe, brainstem involving the midbrain, pons and medulla and its adjacent cerebral vessels, and left cerebellum. There was fracture of the neck.

Postmortem radiology revealed fractures of the occipital condyles. There were additional fractures of the C1 (left lateral mass of the occipital condyle), C2 (right articular facet), C6 (spinal process) and C7 vertebrae (left transverse process). There was misalignment of C1 and occipital condyle whereby the C1 is displaced anteriorly. There were pneumocephalus and pneumorrhachis. See also above injuries.

EVIDENCE OF INJURY (Cont'd):

B. Torso

External examination revealed broad abrasions on the upper back containing black material. There were abrasions showing combined linear and varisized pinpoint to round to irregular individual patterns involving the left upper back, shoulder, posterior left arm, and left side of the torso. There were abrasions on the right buttock. There was abrasion with the varisized pinpoint to round to irregular abrasions on the side of the left buttock.

Internal examination revealed contusions and lacerations of the right and left lungs. There were lacerations of the left pulmonary vessels, left atrium of the heart, spleen and cardia of the stomach. There was soft tissue hemorrhage of the posterior upper chest cavity. There was right hemothorax of at least 700 mL. There was left hemothorax of at least 500 mL. There was hemopericardium of at least 150 mL. There was hemoperitoneum of at least 200 mL. There were bilateral upper posterior rib fractures.

Postmortem radiology revealed bilateral scapular fractures. There were bilateral rib fractures involving the right 1-5 and 8 ribs at the spinal end (head) and posterior shaft and left 2- 5 ribs at the spinal end (head) and posterior shaft. There were thoracic vertebral fractures involving the spinal processes of T4-T9 and T11, and transverse processes of T1 (bilateral), and T2 (right). There were bilateral pneumothoraces with left side more than the right side. See also above injuries.

C. Extremities

Examination of the extremities revealed abrasions of linear to irregular shapes on the on the anterior right arm and forearm, left elbow anterior and posterior thighs, anterior and posterior right knee, anterior left knee, anterior right leg, anterior-lateral left leg, dorsum of the right foot, and lateral right ankle, and lateral right hip area. There was contusion on the posterior right heel. There was no evidence of fractures on examination and in postmortem radiology.

INTERNAL EXAMINATION:

ORGAN WEIGHTS (in grams):

Brain:	1476
Heart:	385
Right Lung:	464
Left Lung:	411
Liver:	1220
Spleen:	254
Right Kidney:	128
Left Kidney:	126

An autopsy was performed utilizing the normal thoraco-abdominal and posterior coronal scalp incisions. The pleural, pericardial, and peritoneal cavities had smooth serosal surfaces and the viscera were in their normal anatomical positions. An anterior neck dissection with internal examination of the underlying muscles, vessels, and structures was performed. **Except for the above previously described injuries**, the internal systems were as follows:

Head:

The 1476 gm brain was free of neoplastic lesions.

Neck:

No abnormality was noted in the anterior cervical muscles, hyoid bone, laryngeal cartilages, or trachea.

Cardiovascular System:

The 385 gm heart had a normal configuration with an unremarkable epicardial surface and a moderate amount of epicardial fat. The coronary arteries had no significant atherosclerotic disease. No acute thrombi were present. The left ventricle, septum and right ventricular wall measured 1.0 cm, 1.5 cm and 0.2 cm in thickness, respectively. No focal endomyocardial lesions were present. The papillary muscles and chordae tendineae were not thickened, and the heart valves were unremarkable. The aorta had no atherosclerosis. The major arteries and great veins showed normal distribution.

Respiratory System:

The larynx and trachea were unremarkable without foreign object. The pleural surfaces were smooth. The right and left lungs weighed 464 gm and 411 gm, respectively. The pulmonary parenchyma was pink-purple and congested without lesions or pulmonary emboli.

Hepatobiliary System:

The 1220 gm liver had firm and smooth surface having mildly yellow-tan parenchyma without lesion. The gallbladder and biliary tracts were unremarkable.

Hemolymphatics:

The 254 gm spleen had smooth surfaces and dark purple firm pulp. There was no significant lymphadenopathy.

Alimentary System:

The esophagus, stomach, small bowel, appendix and colon were unremarkable. The remainder of the stomach content was approximately 40 milliliter of mucoid tan fluid.

Pancreas:

The pancreas showed an unremarkable tan lobulated pattern.

Endocrine System:

The thyroid gland had a normal bilobed configuration. The adrenal glands were each unremarkable with golden-yellow cortices.

Genitourinary System:

The right and left kidneys weighed 128 gms and 126 gms, respectively. Each kidney had dilatated calyces with few cortical cysts. There was no renal stone. There were no changes in the calyceal systems, pelves, ureters, bladder, or prostate gland.

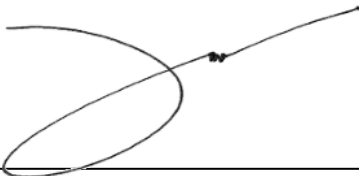
Musculoskeletal System:

Except for the above noted injuries, all the muscles and axial skeleton were free of any significant abnormalities.

RADIOGRAPHS:

Anterior postmortem radiographs together encompassing the head, torso and extremities were taken and findings were included in the evidence of injury. There was no radiopaque object.

April 26, 2024
LRA/kg



LEONARDO ROQUERO, M.D.

**BOARD OF MEDICOLEGAL INVESTIGATIONS
OFFICE OF THE CHIEF MEDICAL EXAMINER**

921 N.E. 23rd St
Oklahoma City, OK 73105

REPORT OF LABORATORY ANALYSIS

OFFICE USE ONLY

Re. _____ Co. _____

I hereby certify that this is a true and correct copy of the original document. Valid only when copy bear im-print by the office seal.

By _____

Date _____

ME CASE NUMBER: 2305608

LABORATORY NUMBER: 234326

DECEDENT'S NAME: NOAH ALEXANDER NICHOLS

DATE RECEIVED: 9/6/2023

MATERIAL SUBMITTED: BLOOD, VITREOUS, URINE, LIVER, BRAIN

HOLD STATUS: 1 YEAR

SUBMITTED BY: JASON ROBERT PARKS

MEDICAL EXAMINER: LEONARDO ROQUERO M.D.

NOTES:

ETHYL ALCOHOL:

Blood: 0.14 g/dL - (Heart)

Vitreous: 0.18 g/dL

Other:

CARBON MONOXIDE

Blood:

TESTS PERFORMED:

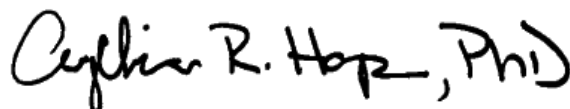
EIA - (Femoral Blood) - Amphetamine, Methamphetamine, Fentanyl, Cocaine, Opiates, PCP, Barbituates, Benzodiazepines
(The EIA panel does not detect Oxycodone, Methadone, or Clonazepam)

RESULTS:

NONE DETECTED

09/26/2023

DATE



ANGELICA HARPER, PhD., Forensic Toxicologist