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A U T O P S Y

Case No. 5346

Approximate Age 25 years | Approximate Weight 120 lbs. by scale.

Height 5' 9"

Identified by | Residence

Stenographer DJMcI | Residence

I hereby certify that I, DR. CHARLES NORRIS, have performed an autopsy on the body of [redacted] at CITY MORTUARY on the 28th day of October, 1924, at 10 A. M., and said autopsy revealed -

AUTOPSY PERFORMED BY DR. CHARLES NORRIS, CHIEF MEDICAL EXAMINER OF THE CITY OF NEW YORK.

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IDENTIFICATION:

Body identified to Dr. Charles Norris, Chief Medical Examiner of the City of New York, at Morgue, Oct. 28th, 1924, 10:50 A.M., by Dr. Sigmund Mages, Resident Surgeon, Reconstruction Hospital.

DESCRIPTION OF BODY:

Body of young white adult male, appearing to be in his late middle twenties, ht. 5' 9"; wt. by scale 120 lbs. Long, rather narrow chest; somewhat thin, poorly muscled; skin of face has a distinct yellowish tint; clean shaven, abt. a week's growth of beard. Hair of head golden; eyeballs somewhat sunken in appearance. Pupils widely dilated 4/16"; no staining in conjunctivae. Ribs show small bluish contusions at line of contact. Liver abt. 1" above costal margin. Diaphragm left 5th rib; right, upper border 4th.

There is a very pronounced sticky feel to the peritoneum, which is dry; guts still warm; rigormortis well developed.

There is a scar over the lower portion of the rt. kneecap.

Two (2) vaccination marks on rt. arm.

Panniculus practically absent. Glans penis small.

There are a few small abrasions on feet and legs and a few small contusions. There is a peculiar bright-red appearance to the muscles.

Lungs: left lung free, no fluid or adhesions; pleura not sticky. Rt. lung adhesions back of upper lobe. Heavy, wt. 1580 g. Abundant, somewhat cloudy froth in bronchi which are intensely congested, being dark-red in color. Rt. lung poorly aerated except along the ant. border for abt. one-third. Post. surface dark-blue slate in color, and are mottled with darker colored areas, frankly hemorrhagic. Section intensely edematous almost hemorrhagic; does not feel lumpy. Left lung same as right but not so diffusely affected. Shows large areas of an indigo-blue in color beneath the pleura. Pulmonary vessels natural.

Thymus pink in color, glandular, bi-lobed, small in size.

Abt. 5 cc of pale, straw-colored fluid in pericardial cavity.

Heart: natural in size; also as to epicardium; no excess of fat, valves natural, no foramen; left ventricle 18 mm; muscle is somewhat pale, no fibrosis; endocardium left ventricle somewhat opaque; aorta delicate and elastic; at ring 55 mm. Coronaries natural. Wt. 360 g.

Spleen; without adhesions; dark-blue slate; capsule natural, weighs 180 g. Section darkbluish red; numerous small, pinhead size follicles, no excess of fibrous tissue.

Adrenals; flat, broad.

Kidneys; no excess of fat; abt. natural in size, capsule free, surface smooth, bluish red in color; cortex somewhat pale, 6 to 7 mm. Pelves and ureters natural. The rt. pelvis contains abundant amt. of creamy fluid yellowish in color; Kidneys weigh 360 g.

Liver; wt. 1380 g. Medium brown in color mottled in a few places with pale-yellowish areas; capsule natural except over the post. surface left lobe. Section brownish, somewhat cloudy. Gall bladder small pear-sized; very dark bile; muc. mem. natural.

Pancreas; normal in size and configuration, firm.

Oesophagus; contains black thin fluid; muc. mem. somewhat stained, otherwise natural. Stomach contains black dark-colored fluid (bile). Muc. mem. pale, no excess of mucous; duodenum greenish mucous, small amt. and a few sub-mucosal hemorrhages, small in size. The mucosa of the small gut is natural except that along some of the folds there are a few hemorrhagic areas. Large gut, muc. mem. somewhat glassy, few small size fecal hemorrhages, sub-mucosal.

Thoracic and abdominal aorta shows a number of yellowish sub-intimal streaks, possibly slightly sticky. At bifurcation 35 mm.

Urinary bladder; slightly cloudy urine which is natural; prostate small, normal in appearance; testicles small, normal.

Head; Tissues of scalp natural; somewhat pale; calvarium thin, compact bone; dura not adherent, inner surface natural; the pia over both parietal lobes is opaque and milky in color, especially along some of the sulci; cerebral veins are

somewhat engorged; pachial granulations are exuberant; long medial fissure, slight stickiness; several of the convolutions on both sides near the medial fissure are stained yellowish resembling plaque jaune. (Sections kept). Abt. normal amt. of fluid at base; in front of the left olefractory lobe there is a yellowish appearance of the convolutions situated near the medial fissure. Pia at base somewhat opaque; vessels delicate, without focal areas. Wt. of brain 1680 g. Cortex somewhat dark in color, numerous blood spots in white matter. Lateral ventricles not distended, clear fluid; no granulations; no areas of softening seen or felt. Cross-sections of brain natural; basal ganglia are somewhat darker than normal. No fracture of the skull; middle ears and sphenoids normal.

Thyroid gland not colloid, pale-red in color, abt. natural in size.

Bone marrow of the lower half rt. femur shows small hemorrhagic or dark-red foci (kept for chemical exam.)

ANATOMICAL DIAGNOSIS:

GENERAL VISCERAL CONGESTION: INTENSE PULMONARY CONGESTION AND EDEMA: SLIGHT PARENCHYMATOUS DEGENERATION: CHRONIC LEPTO-MENINGITIS SLIGHT: CEREBRAL CONGESTION MODERATE: pending chemical and further investigation.

CAUSE OF DEATH: HEMORRHAGIC BRONCHOPNEUMONIA: GENERAL VISCERAL CONGESTION: pending chem. exam. and investigation.

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JEM
11/12/24