

**12****AUTOPSY REPORT**

No.

2009-04415

JACKSON, MICHAEL

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**OPINION:**

Toxicology studies show a high blood concentration of propofol, as well as the presence of benzodiazepines as listed in the toxicology report. The autopsy did not show any trauma or natural disease which would cause death.

The cause of death is acute propofol intoxication. A contributory factor in the death is benzodiazepine effect.

The manner of death is homicide, based on the following:

1. Circumstances indicate that propofol and the benzodiazepines were administered by another.
2. The propofol was administered in a non-hospital setting without any appropriate medical indication.
3. The standard of care for administering propofol was not met (see anesthesiology consultation). Recommended equipment for patient monitoring, precision dosing, and resuscitation was not present.
4. The circumstances do not support self-administration of propofol.

*Christopher Rogers*  
CHRISTOPHER ROGERS, MD, MBA  
CHIEF FORENSIC MEDICINE DIVISION

DATE

8-19-09

*Lakshmanan Sathyavagiswaran*  
LAKSHMANAN SATHYAVAGISWARAN, MD  
FRCP(C), FCAP, FACP  
CHIEF MEDICAL EXAMINER-CORONER

DATE

8-19-09

CR:mtm:c  
D-06/26/09  
T-06/30/09

MEDICAL REPORT

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AUTOPSY CLASS:  A  B  C  Examination Only D

FAMILY OBJECTION TO AUTOPSY

Date: 6-26-09 Time: 1000 Dr. Rogers / Lakshminarayanan  
(Print)

FINAL ON: 6-7-09 By: Rogers / Lakshminarayanan  
(Print)

APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH

DEATH WAS CAUSED BY: (Enter only one cause per line for A, B, C, and D)

IMMEDIATE CAUSE:

(A) Acute Propofol intoxication

DUE TO, OR AS A CONSEQUENCE OF:

(B)

DUE TO, OR AS A CONSEQUENCE OF:

(C)

DUE TO, OR AS A CONSEQUENCE OF:

(D)

OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH:

Benzodiazepine effect

NATURAL  SUICIDE  HOMICIDE  
 ACCIDENT  COULD NOT BE DETERMINED

If other than natural causes, HOW DID INJURY OCCUR? Intravenous injection by another

WAS OPERATION PERFORMED FOR ANY CONDITION STATED ABOVE:  YES  NO

TYPE OF SURGERY: \_\_\_\_\_ DATE: \_\_\_\_\_

ORGAN PROCUREMENT  TECHNICIAN: Sunder / Delacorte  
 PREGNANCY IN LAST YEAR  YES  NO  UNK  NOT APPLICABLE  
 WITNESS TO AUTOPSY  EVIDENCE RECOVERED AT AUTOPSY

Item Description:

Scott Smith, LAPD  
Photo memory  
card given to  
Capt. Kades

Age: 50 Gender: Male / Female

PRIOR EXAMINATION REVIEW BY DME

BODY TAGS  CLOTHING  
 X RAY (No. \_\_\_\_\_)  FLUORO  
 SPECIAL PROCESSING TAG  MED. RECORDS  
 AT SCENE PHOTOS (No. \_\_\_\_\_)

CASE CIRCUMSTANCES

EMBALMED  
 DECOMPOSED  
 >24 HRS IN HOSPITAL  
 OTHER: \_\_\_\_\_ (Reason)

TYPING SPECIMEN

TYPING SPECIMEN TAKEN BY: PR  
SOURCE: Femoral

TOXICOLOGY SPECIMEN

COLLECTED BY: PR  
 HEART BLOOD  STOMACH CONTENTS  
 FEMORAL BLOOD  VITREOUS

TECHNIQUE Int. Arterial  
 \_\_\_\_\_ BLOOD  SPLEEN  
 \_\_\_\_\_ BLOOD  KIDNEY  
 BILE  \_\_\_\_\_  
 LIVER  \_\_\_\_\_  
 URINE (3)  \_\_\_\_\_

URINE GLUCOSE DIPSTICK RESULT: 4+ 3+ 2+ 1+ 0

TOX SPECIMEN RECONCILIATION BY: PR

HISTOLOGY

Regular (No. 2)  Oversize (No. 1)  
Histopath Cut:  Autopsy  Lab (Lakshminarayanan)

TOXICOLOGY REQUESTS

FORM 3A:  YES  NO  
 NO TOXICOLOGY REQUESTED  
SCREEN  C  H  T  S  D  
 ALCOHOL ONLY  
 CARBON MONOXIDE  
 OTHER (Specify drug and tissue)

REQUESTED MATERIAL ON PENDING CASES

POLICE REPORT  MED HISTORY  
 TOX FOR COD  HISTOLOGY  
 TOX FOR R/O  INVESTIGATIONS  
 MICROBIOLOGY  EYE PATH. CONS.  
 RADIOLOGY CONS.  
 CONSULT ON:  
 BRAIN SUBMITTED  
 NEURO CONSULT  DME TO CUT  
 CRIMINALISTICS  
 GSR  SEXUAL ASSAULT  OTHER

RESIDENT

DME

WHITE - File Copy

CANARY - Forensic Lab

PINK - Certification

GOLDENROD - DME

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EXTERNAL EXAM

Sex Male
Race Black
Age 60
Height 6'1
Weight 136
Hair Brown
Eyes Brown
Sclera
Tooth Normal
Mouth
Tongue
Nose
Chest Central adenomas
Breasts Normal
Abdomen Normal
Scar - see Form 20
Genital
Edema
Skin
Decub

HEART WT 240

Pericard
Hypert
Dilat
Muscle
Valves
Coronar

RV 0.2
LV 1.4
Septum
RV 12.5
RV 7.0
MV 0.8
AV 7.2

AORTA

VESSELS
LUNGS WT

R 940
L 1060 - sent to pulmonary path
Adhes
Fluid
Atelectasis
Oedema
Congest
Consol
Bronchi
Nodes

PHARYNX

TRACHEA
THYROID - n/gm
THYMUS
LARYNX
HYOID
ABDOMINAL WALL FAT

PERITONEUM

Fluid
Adhes
LIVER WT 480
Caps
Lobul
Fibros
G B 10 gm bile
Calc
Bile ducts

SPLEEN WT 110

Color
Consist
Caps
Malpig
PANCREAS
ADRENALS - 5 gm each

KIDNEYS WT

R 140 - 0.2 cm medullary mass
L 120
Caps
Cortex
Vessels
Pelvis
Ureter

BLADDER 560 gm urine, trabeculated

GENITALIA

Prost - prominent in middle lobe
Testes - normal
Uterus
Tubes
Ovar

OESOPHAGUS - normal

STOMACH - few mucosal hemorrhages

Contents 10 gm undig. fluid

DUOD & SM INT

APPENDIX

LARGE INT

ABDOM NODES

SKELETON

Spine
Marrow
Rib Cage
Long bones
Pelvis
L anterior chest 2x2 in bruise
R anterior chest 1.5x2 in bruise
L 4th rib, L 5th rib, L 6th rib, L 7th rib, L 8th rib, L 9th rib, L 10th rib, L 11th rib, L 12th rib

SCALP

CALVARIUM - normal
BRAIN WT 1380
Dura
Fluid
Ventric - sent to neuropath
Vessels
Middle ears
Other
PITUITARY - normal

SPINAL CORD

TOXICOLOGY SPECIMENS

Blood, urine, bile, liver, intestines, stomach contents

SECTIONS FOR HISTOPATHOLOGY

2 stomach, 2 liver, 2 lung, 2 kidney

MICROBIOLOGY

DIAGRAMS 20, 22

X-RAYS from body

OTHER PROCEDURES

Prep to neuropathology
L. Lung to pulmonary pathology

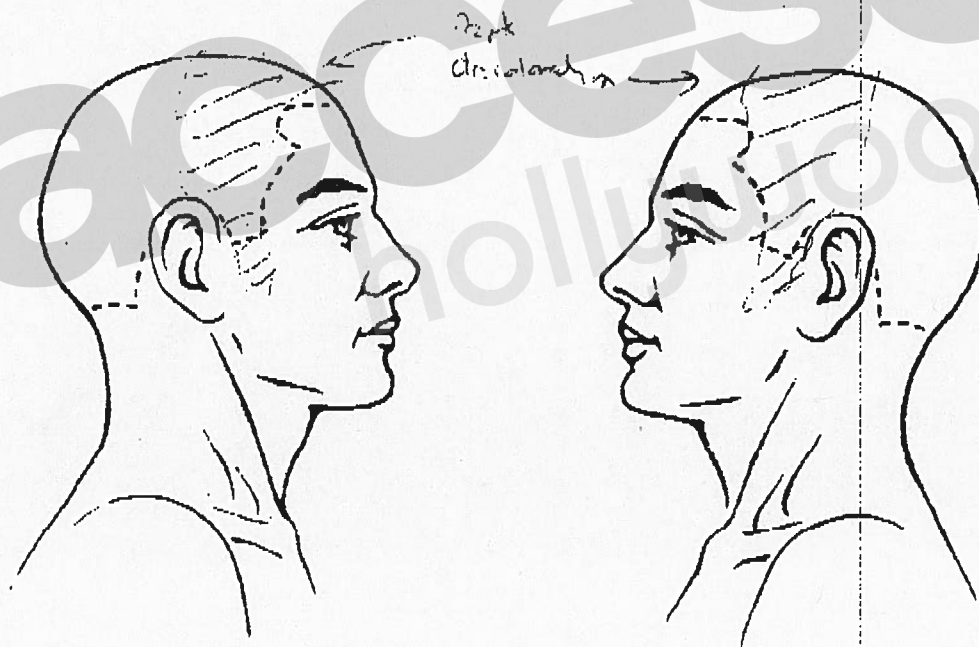
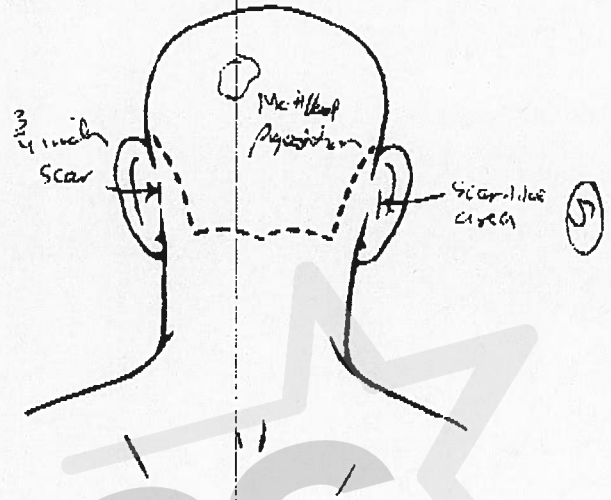
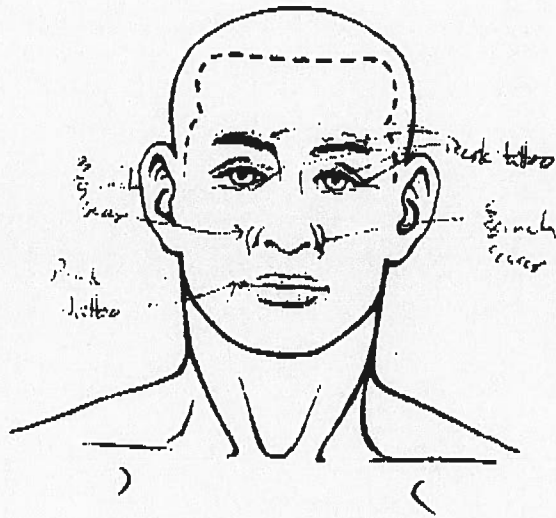
GROSS IMPRESSIONS

1 Nodular prostatic hyperplasia
2 Urinary retention
3 Colonic polyp
4 Evidence of prostatic hyperplasia
A) Enlargement of prostate
B) Irregular contour
C) Nodular surface
D) Presence of stones

Date 6-26-09 Time 1300 Deputy Medical Examiner [Signature]



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10710  
 6-26-09 *[Signature]* M.D.  
 Deputy Medical Examiner

**13**2009-04415  
Jackson, Michael

**Los Angeles County Department of Coroner  
Forensic Science Laboratories  
Medical Evidence Analysis Summary Report**

**Medical Evidence #1** (collected by Coroner Investigator E. Fleak on 6/26/09)

- Propofol and Lidocaine were detected in approximately 0.19g of white fluid from a 10cc syringe barrel with plunger.

**Medical Evidence #2** (collected by Coroner Investigator E. Fleak on 6/29/09)

- 4 components of an IV system tested.
  - Propofol, Lidocaine, and Flumazenil were detected in approximately 0.17g of white tinted fluid from a 10cc syringe.
  - Propofol, Lidocaine, and Flumazenil were detected in approximately 0.47g of yellow tinted fluid from a short section of IV tubing attached to a Y connector.
  - No drugs were detected in approximately 17g of clear liquid from a long section of IV tubing attached to an IV bag plug.
  - No drugs were detected in approximately 0.38g of clear fluid from a 1000cc IV bag.

*Jaime Lintemoot*  
Jaime Lintemoot  
Senior Criminalist

*7/15/09*  
Date



**SUMMARY of POSITIVE TOXICOLOGICAL FINDINGS**  
**2009-04415 - Jackson, Michael Joseph**



Drug	Specimen (ug/ml or ug/g)							
	Heart Blood	Hospital Blood	Femoral Blood	Vitreous	Liver	Gastric Contents	Urine	Urine-Scene
Propofol	3.2	4.1	2.6	<0.40	6.2	0.13 mg	0.15	<0.10
Lidocaine	0.68	0.51	0.84	---	0.45	1.6 mg	Present	Present
Diazepam	<0.10	Present	---	---	---	---	---	---
Nordiazepam	<0.05	---	---	---	---	---	---	---
Lorazepam	0.162	---	0.169	---	---	---	---	---
Midazolam	0.0046	---	---	---	---	---	---	---
Ephedrine	ND	---	---	---	---	---	0.0068 Present	0.025 Present

D. Anderson  
Supervising Criminalist II  
7/15/09

UD  
02-7-15-09

access  
hollywood