

TASK FORCE HEADQUARTERS

3 February 1977

Pathologist Report

Dr. Robert J. Sillery, Chief Pathologist, Oakland County Medical Examiner's Office

Sgt. Krease: This is Dr. Sillery and he can have the floor now and we will get right into our program. I don't know if you want to start with the slides first?

Dr.: Well, now here you people have seen these slides, right? Alright, let me tell you my impressions and my thoughts about the whole thing. I went to the scene. Now, as you know, you know the position she was found in. Now when I went to the scene and I examined the body, I was fooled from this standpoint. The exposed portions of her body, her hands and her face, were frozen solid. Now we took her back to the morgue and I said to put her in the autopsy room, don't put her in the cooler because if she's frozen solid, it will take three days for her to thaw out in the cooler. Now we put her in the autopsy room and the people there called me the next morning, Saturday morning, and they said, "She's thawed out." I said that's strange. That was the first thing. Okay, now when we got to the body and we did the autopsy, let me tell you what we found. The body was thawed out. Now in a thoroughly frozen body, frozen solid through, when you get inside and you get into, like under the liver and that sort of thing, you feel ice crystals. Your fingers get cold. There was no such thing here. When we looked at the blood, the blood looked in pretty good shape. When we got the blood in our lab, the blood was not hemolyzed. The blood was in very very good condition. We could separate cells from serum. You can't do this with a thoroughly frozen body. The red cells will hemolyze, they will break down.

Question: Even after the blood thaws?

Dr.: Yes, when the blood thaws, you got an even red mess in a frozen body. So I have, this is my opinion, that she was not there very long. I would say no more than 24 to 48 hours. If she had been there longer, the temperatures that we had, she would have been frozen through. She was not. I was fooled at the scene. She was superficially frozen but not frozen through. Everything, I've gotten microscopic sections on all the organs, the heart, the lungs, everything else and they are beautifully preserved. Almost like the sections you'd get on an autopsy on a person that died in the hospital and they took him down to the morgue and did the autopsy. They are that well preserved. So the body was not frozen through. If she was out there for the 3 weeks, she would have had to have been frozen through, had to with the kind of temperatures that we experienced.

Question: Dr., I have one question that came to mind. If she was in the trunk of a car and the car was kept in a garage and the temperature in the garage, say, with the temperatures that we had then, was around 30-32 degrees, something like this, would this hold back any deterioration on the body, would this kind of preserve the body at that temperature but yet not fully freezing it?

Dr.: Yes, because in our cooler at the morgue, we keep it at about 40 degrees and we can preserve a body for a number of weeks at that temperature. But at 32, you're at the freezing mark. Now for a long period of time at 32, she would freeze.

Question: Solid?

Dr.: Just about, if not totally solid at least close to being solidly frozen.

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Question: Say, fluctuating like say in a 10 day period where the temperature would be 28, then it would be 35 in the garage and so forth and then finally, maybe 3 or 4 days before the body is found, say if it was placed outside, just to freeze. Now this could cause, what I'm thinking as far as the organs being maintained in good order, yet not thoroughly frozen but yet the outside of the body being frozen, could this be conceivable or no?

Dr.: Let me tell you what my experience has been in a cooler. If you get the temperature much below 35, the body fluids would freeze. Now that's been my experience in a cooler so this is why, as I say, this is my opinion. I'm giving it to you for whatever it's worth to you but I do not, I do not feel she was there for a very long time. She was there just long enough for the surface of the body to freeze.

Question: Dr., how long would it take for the body to freeze in that condition? Being out in that type of temperature?

Dr.: In that type of temperature, well, if I recall the day she was found, the temperature was about 26.

Comment: No colder than that. It was about 16, I think. That night it went below zero - 5 below.

Dr.: At minus zero a body will freeze at less than 16 to 20 hours.

Question: Totally freezing (cannot understand)?

Dr.: No, I'm talking about freezing right through. Just like you would take a 25 lb. turkey and put it in the freezer; it will freeze over night and your freezer isn't that temperature.

Question: If she was alive and warm, in a warm place and everything, up to 12 to 16 hours prior and placed there, would her body have frozen to the point that you examined it?

Dr.: It could have.

Question: Otherwise, if she was killed an hour before she was placed there, then placed there, would it have frozen in 12 to 16 hours period of time to the point that you examined her?

Dr.: Very easily, very easily.

Question: But what do you get?

Dr.: I doubt if it would freeze through. As I say, my opinion is that she was there between 24 and 48 hours and probably less than that, probably less than that.

Question: Less than 24 hours?

Dr.: Less than 24 hours. Now the position she was found in, again to my way of thinking, the position she was found in, I picked her up and the morgue. Now what do you do when you pick somebody up, one arm in under the knees, one arm under the shoulders. She was in perfect position of somebody had picked her up that way

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Dr.: and just taken her and deposited her, that's again my thinking. Now  
(Continuing) as to the marks on her body, as you well know, there are very very few marks. Now we went over her body before we did the autopsy, before we did anything after we took her clothes off, with a black light and we found nothing but little specks of lint and as far as the appearance of her genitalia, her vagina and her rectum there was no gross evidence of sexual molestation. But I have found sperm in the vagina and in the rectum.

Question: How about the throat?

Dr.: Not in the buccal cavity or the pharynx but in the vagina and in the rectum. We're going to have a little go-a-round about that but I think I can...

Charlotte: I have only one question though, how is it possible on such a young child without any external damage? How often would you run into this?

Dr.: We can be dealing with a number of things. We can be dealing with somebody who did not make penetration, partial penetration. We can be dealing with somebody who is sexually inadequate whose able to get an erection, whose is able to ejaculate and has a very very small diameter penis.

Charlotte: How would you account for the fact that the semen was deposited as high as it was, if it was high, I don't know where you found it.

Dr.: I found the semen up in the vagina. Now the reason for that is that again and this is why I think we're dealing with a younger person, a younger person when he ejaculates, there is a considerable amount of force behind it and the ejaculate can be injected farther on up than the penetration.

Charlotte: But you think even in the rectum there would be no lacerations; there would be no injury externally.

Dr.: There wasn't, there wasn't. We looked at that rectum very carefully.

Charlotte: And you still think it's consistent that the sperm would be found on the interior.

Dr.: On the interior? Is it consistent? I found it; they're there.

Charlotte: I don't doubt that. I just (cannot understand) you explain it that there is absolutely no exterior evidence. It had to get in there somehow, even if it was an eyedropper.

Dr.: As I say, no, it could be the situation where there was not penetration.

Charlotte: It had to get up there.

Dr.: They would have to be in contact. A young person, a young virile male can inject semen into an orifice, a body orifice, without actually penetrating that orifice if they are close to that orifice. That will inject; there is that much force behind it.

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Question: Then we have the problem if you do that, I'm assuming you that you would have some spillover, if you want to call it that?

Dr.: As I say, we went over the entire body. Now her clothes were clean, everything, her underpants, all of her clothes were clean, really clean. So to me means that somebody kept her somewhere that was clean. Now there is nothing to say that this person tried whatever and then told her, okay, wash up and get dressed and then sometime after that, killed her. That's a distinct possibility because how would she get that clean.

Question: Dr., could it be possible that the ejaculation was on the outside and the sperm could have been forced in with an object, say a finger without causing damage?

Dr.: This is a possibility. But I can't imagine anyone like this being quite that fastidious that there wasn't something that we could exteriorally.

Question: If he had it on his hand and then entered with the finger, coming off his hand on the interior of the cavity there, would that not explain or be a possibility?

Dr.: It's a possibility but I would consider that a very remote outside possibility because we found this sperm high up in the vagina vault. It wasn't just at the opening or within a couple of millimeter or a centimeter; it was high up in the vagina vault because, in fact, I had to use a speculum, spread the labia in order to get in to get the specimens.

Question: Would it be possible to fake the thing and place the sperm in there with a syringe?

Comment: He's got a reason for asking that.

Comment: Yeah, I have a reason for asking that. There is a film that is showing at a local theatre in the area and I don't know if you have seen it or not but there is one scene in there where the person ejaculates in his hand, draws it up in a plastic syringe and places it into the vagina.

Dr.: That certainly is a possibility, I can't rule that out.

Question: Dr., you said a young, virile man. What are you speaking about in age?

Dr.: I'm talking about somebody, probably under 30.

Question: What about an older, excitable person?

Dr.: Well, again this is variable, you just can't make a general rule. As far as sexual activity is concerned, who is to say. There are people in their 60's and 70's that still have sexual activity. You can't rule it out. Okay, you want to get to the marks on her face? She had a slight excoriation on the tip of her nose. She had a little punctate lesion here on the side that was red that somebody thought might be a needle injection. Well the slides on that show it to be a cyst, it's a

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Dr.: (Continuing): sebaceous cyst. Then there is another area about the size of a nickle that is sort of a yellowish, tan on her left cheek. Well, I have a microscopic section of it, okay. It shows this, it shows the epidermis partially absent in the dermis, coagulated. Now there's no cellular reaction about it whatsoever. So it's my opinion that this is post-mortem and there are two things that will do this to skin, extreme heat or extreme cold. Now, it is, I cannot buy it as a frostbite because why would one little nickle-shaped area on her face be frostbitten and not her hand which was exposed. I think it's heat. I think that her face came in contact with some sort of pipe or heater or something of this sort.

Question: Dr., we talked to some people that have seen Kristine on January 1st. She did have a bruise that she obtained on her face from sliding in the snow with these people's daughter. Would that have been something that could have continued that long?

Dr.: If she had gotten it during life, there would be some reaction but there's no reaction to it. See the body immediately sets up a defense against any injury. The cells will migrate outside of blood vessels to the injured area to try to wall it off. There is no much thing. Even the blood vessels in the area are in tact.

Question: But what temperature of heat would take to do this?

Dr.: Umm, anything over 100 degrees fahrenheit which isn't very hot cause I think it's direct contact, brief direct contact against something hot that caused this on her face.

Question: A light bulb?

Dr.: A light bulb, yeah.

Question: How about a heater of an automobile?

Dr.: Heater of an automobile and, of course, I thought about this. A lot of these people with vans have auxilliary heaters in the back.

Question: Exhaust pipe?

Dr.: Exhaust pipe, yeah. Now, we found a little, just under 9% carbon monoxide in her blood. Now that's about normal for a smoker but she's not a smoker. Now, of course, it's not significant as far as causing her death or anything.

Question: But it's more than normal?

Dr.: Oh yeah, yeah, even in our polluted atmosphere you'd expect, maybe 5%-6% at the most.

Question: None of this would come in if she were dead as far as what happened; she has to be alive?

Dr.: She has to be alive, yeah. You don't get carbon monoxide in the blood unless your alive.

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Question: Dr., at sometime obviously she was killed and apparently from what we heard, in the past, from suffocation. Then, if we go by that, she would in all probability, anybody no matter from the lowest form of animal, would put up a struggle, somekind of a struggle. Yet there seems to be nothing on her, her clothing is completely in tact, no tears, rips, buttons on, no bruises, scratches or anything, anyway to explain that away?

Dr.: Well, she's not a very big child, I mean she is a child, and it wouldn't be difficult for a full grown man to put one arm around her and pinion both of her arms and take something and put it over her face.

Question: But would that not bruise, where he grabs her? You know, she's going to fight against that. Would that not put some sort of a bruise, be on her arms, her chest or something of that sort?

Dr.: Not necessarily, she had all those clothing on, that heavy jacket she had on would be a beautiful cushion.

Question: Dr., would that amount of carbon monoxide, could she have been made unconscious by carbon monoxide, yet not enough to cause death when taken out although unconscious, her normal breathing, would it bring it back to that level before death?

Dr.: The lowest level of carbon monoxide<sup>I've seen</sup>/that produced unconsciousness is in about 15%, not quite enough to produce unconsciousness.

Question: Yes, but if she was taken from that, still breathing but unconscious, would that bring your level back down?

Dr.: Carbon monoxide leaves the human body very very slowly. It takes anybody who has been overcome by carbon monoxide and lives; it takes a matter of days before that's dissipated because carbon monoxide binds to hemoglobin very tenaciously and it doesn't give up very easily.

Comment:

I just wanted to say, Dr., there was a couple marks on her hand, I think it was her left hand. I have some photographs of it, kind of gouge type that was the only marks that I think she had.

Dr.: The left hand, the right hand was the hand that was sticking out of the snow and showed some post-mortem changes. The marks on her right hand; they're recent. They could have been defense marks, you know, this is a possibility.

Comment: There are some colored photographs of that if you want to see it.

Dr.: Yeah, and it's strange how these marks show up better in the color photographs than they did at the time of the autopsy.

Question: Do you have any opinion on how long she had been dead?

Dr.: How long she been dead? As far as I'm concerned, she'd been dead somewhere around 24 to 48 hours.

Question: Could she have been dead longer?

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Dr.: I seriously doubt it. I seriously doubt it.

Question: While we are on that, we are talking some 15 days that she was missing before she was dead. By looking at the body, could you tell whether she was eating, I know apparently the stomach was empty, but is there anyway to tell of any malnutrition, anything of this sort?

Dr.: No, she was in good shape that way. She was certainly not dehydrated from lack of fluids and whether she got anything to eat, I don't know but the stomach contents, all we got out of the stomach, was sort of some greenish fluid.

Question: If she had not eaten for the 15 days, would there be any obvious signs on the body?

Dr.: If she had been without any nutrition at all for that period of time, it would indicate some, yeah, that's a long time to go without eating.

Question: Wouldn't you be able to tell by the urine? Doesn't the urine become darker in color, other words, when the body is drawing on it's own reserve why wouldn't there be a breakdown (cannot understand) Instead of being a clear, say, watery fluid wouldn't it have decomposition (cannot understand).

Dr.: Well, you'd find your blood chemistries, your blood electrolytes would be of more value than urine.

(Unable to pick-up question on this part of tape)

Dr. No, because people do urinate and they get rid of it.

Question: Okay, the blood, if she had been sedated at all, would that show up in the blood (cannot understand) if they used chloroform or ether or something of this nature?

Dr.: Alright, let me tell you, we ran alcohol and we ran it on through<sup>all</sup>the volatiles and usually any hydrocarbon, such as chloroform or ether, will show up. We didn't find any.

(Unable to pick-up question on this part of tape)

Dr.: I know, we thought of that one too and we ran it through and we didn't get any peak on the curve that would indicate that there was any volatile there at all. Now we ran drug streams; we haven't come up with any drugs, any barbiturates.

(Changed to the other side of tape; lost part of questions/answers)

Comment: But if she were alive for 15 days, if we want to go by that, and she did have some nutrition, then she certainly would have some toilet problems. Even if she had the facilities there if them pants were worn continuously for 15 days, then I would think that there would be some staining because I don't think that a 10 year old girl could keep herself that clean.

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Dr.: Well, I've discussed this with our toxicologist and as far as I'm concerned, she either got cleaned up herself or somebody cleaned her up and somebody cleaned her clothes.

Question: Could she have been without her clothes for 15 days?

Dr.: She could have been kept someplace, been disrobed and kept someplace without her clothing.

Charlotte: In your experience how long after death would you expect to find the sperm in the rectum?

Dr.: How long? I found ghost-like remnants of sperm for several days after death.

Charlotte: This would be extended if the weather were cold, right?

Dr.: Yes.

Question: There was no way that she was warmed up or stayed warm after she was slain? She was slained, then frozen or at least kept cold immediately after being slained?

Dr.: If she had been in a more or less room temperature atmosphere, there would be a lot more decomposition and it was very minimal.

Question: So then, you could assume that immediately upon being slain, where ever that was, she was chilled?

Dr.: Within a short time, yeah.

Question: Was there any voiding at all? With asphyxiation is it common for an individual to void the bowel or the bladder?

Dr.: It happens sometimes and other times it doesn't. I've seen a lot of hangings, suicidal hangings where they will void urine and feces and I've seen others where they don't. That's not a hard fast rule. It doesn't always happen.

Question: From the study of the body, do you feel she was in that position shortly after being murdered or could she have been in various positions prior to being put out?

Dr.: She could have been in any position after she was killed. As I say, it's my opinion that she was picked-up and deposited the way she was found; it has all of those characteristics. The one thing that bothered me at the scene was that although the body was frozen and the thought went through my mind that maybe she did freeze to death and maybe she was alive when she was deposited there. Even an unconscious human being will move and try to assume a fetal position and there was no indication of this whatsoever. Now I understand that under the body, there was a crusting of the snow. There was some residual heat; there had to have been some, yeah that outlines the body very nicely. Now there was some residual heat. Now whether she was deposited there very shortly after she was killed or she was killed and kept at room



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Dr.: (Continuing): temperature for a few hours and then taken there and dumped, it's hard to say but there was residual body heat because that's about only thing that would do that and the other thing about this, is her clothes are so clean and so tidy, I just can't imagine another person dressing her and being quite that neat. I think she dressed herself.

Question: If she were killed somewhere else, what about the lividity; as far as changing the position of the body?

Dr.: She had some dependent lividity (cannot understand). And, of course, lividity can change. Now this is another thing, whenever she was killed, it appears to me that she was killed and just layed on her back and then picked-up and deposited cause if she had been on her face, you would, there's no unusual lividity about the face or the interior part from the body.

Comment: This would also, then support the theory then that she wasn't kept that long before she was deposited along side the road.

Dr.: No, she was deposited there shortly after she was killed but in my opinion, she wasn't killed much before she was deposited there.

Question: Could she have been laying against a heater where ever she was transported and her clothing was warm. She might have occurred the damage to her cheek and when she was picked up and placed in the snow, the heat created from whatever she was transported in, then allowed some of this to happen?

Dr.: That retained the body heat. In a 70 degree room, body temperature won't drop more than about a degree to a degree and a half an hour.

Question: How much did she weigh?

Dr.: 80 lbs.

(Tape continues; specific questions/answers were unable to be picked-up)

Dr.: Yeah, that's a definite possibility but it's my opinion that this sexual activity had been shortly before death. I mean if I was on the witness stand and I was asked that question, that's would I would say, that's my opinion that this happened before death and shortly before death.

Comment: Well, if he were doing that, then you would still think that she would struggle somewhat while this attack was going on.

Dr.: Well, you know as well as I do that a person put in a stress situation may or may not struggle and there are people who get frightened enough, their immobilized and I think this is more true than not.

Question: Dr., out of the evidence that we have now, what you have seen, what you have heard, are you able to come up with any type of person that we might be looking for or what would be your final analysis at this point of what we have? What do you think we're looking for, I mean, considering the condition of how the body was found, considering the whole thing, are you able to come up with any type of theory or opinion?

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Dr.: I'm not a psychiatrist but, I think, we're dealing with a person, a male who is under the age of 30 who has some history of sex deviation, may have had some contact with the police regarding sex deviate type of activities. I just, because it's the vogue these day, I just have a feeling we're dealing with a guy that has a van that's well equiped because where is he going to keep a young girl like this, hidden away from the rest of society without anybody noticing anything. Now, he also could have a place of his own, a small house out someplace with a garage where he keeps the van and maybe that garage is heated because very frankly, I see in many ways, a lot of similarities between this case and Jill Robinson. The big difference between the two cases is the gunshot wound and I think that is a panic reaction.

Question: Was she examined for sperm?

Dr.: Yeah, she didn't have any but she had a tampax in place, maybe he didn't, for some reason or other, didn't try anything but here she was missing for a period of time, a couple of weeks and her clothes were just like this Kristine's clothes, clean, neat, everything in tact.

Question: How old was she?

Comment: 12.

Question: Is that normal, does anybody know, is that normal for her to use tampax?

Dr.: Yeah.

Comment: But then she would have change if you were going for a two week period if she didn't change the tampax.....

Comment: She was only gone for 4 days.

Comment: Jill Robinson was gone for 3½ days and the box of tampax was found at her home. We checked and it was found there.

Dr.: Now, at least what I heard, the report was that her mother didn't even know she was menstruating.

Comment: Right, this is true (cannot understand).

Dr.: But her uterus was developed well enough that there definitely could have been menstruating, no question about that.

Comment: Back to Mihelich and the thing with the van, even if what you say, the man had a van, I can't see him keeping her in there, in a van, for two weeks because then you're going to have her again being very dirty. There's not the facilities in a van and besides that he's got to leave that van at some time so then he would have to secure her in someway.

Dr.: Well that's why, I say, I'm just speculating that he has a van and he's got a place of his own.

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Comment: I really think everything that's said will have to be put under that speculation. The facts were presented, what we have and it could be anyone of a many things, and I don't think anything should be overlooked.

Question: Dr., did you personally handle the Robinson girl? The autopsy?

Dr.: Yeah, that was the day after Christmas, I believe.

Question: Was the throat checked also for sperm (cannot understand)?

Dr.: Well, her pharynx was destroyed.

Comment: Dr., in my understanding earlier, you said that neither one of these girls, at least Kristine, could not have been kept under drugs or sedated or something like that so she couldn't struggle.

Dr.: Well, she could have been and then eliminated them but you would have to eliminate them during life and barbiturates or anything of that sort, take 8 to 12 hours to be completely eliminated from the body.

Question: So then she could have been kept sedated?

Dr.: If she was missing 3 weeks, maybe she was kept sedated for 2 weeks, that's possible.

Question: This has been one of the questions of the group. No matter what pretext you use to get the child in the car, say that your going down to that section of town, or whatever, you normally have only about half a mile until you have to take some type of force to control that child.

Dr.: Yeah but this also maybe a person that this child was acquainted with, I mean, not well but knew.

Comment: Then if that was the case and Jill is somewhat similar, they would have to have a common place.

Dr.: Yeah.

Question: What was the condition of her bladder (cannot understand)?

Dr.: As I say, I didn't bring my autopsy report and I don't recall that we found any urine in Kristine.

Comment: We originally heard that the bladder was full.

Dr.: I'm remembering off the top of my head and I don't recall right off. If you would have said bring, I would have brought everything with me.

Question: Let's take, if it was full would that mean anything?

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Dr.: I'm just thinking back, I'm going back while your talking in my mind and if I remember correctly, yes, there was urine in her bladder.

Question: Does it mean anything?

Dr.: It only means that she hadn't urinated recently, that's all.

Question: In the panic of somebody trying to suffocate, wouldn't it be common to urinate?

Dr.: Yeah, that was the question that was asked before. It does happen but it doesn't always happen; it's not one of those hard and fast universal rules that it would always happen.

Charlotte: Then we also have the other problem that if there was a sexual assault, it would seem to me that that would be a natural (cannot understand).

Dr. No, sometimes the urethral sphincter will go into spasm and they can't urinate.

Comment: Dr., the other cases you were saying the bladder hadn't emptied, those were in hanging type situations, which is normally pretty rapid.

Dr.: Yeah, right.

Comment: But this is somewhat different than where there is a period of struggle, time wise and reaction wise.

Dr.: I just, from the condition of her body, I just can't imagine that there was very much struggle at all. She's not a big child, she's only 80 lbs. and it wouldn't take a male of any great strength to overpower her quickly.

Question: But if he suffocated her whether by hand or fingers over the nose or pillow case of something, wouldn't there still be a period of time regardless of how strong he was?

Comment: Well, he could have had her wrapped in a blanket. Just as simple as pie, she couldn't move.

Comment: Well she couldn't move but it still takes a period of time to die from suffocation versus the possible hanging (cannot understand).

Dr.: Well, now she had a lot of pulmonary edema and that means there was fluid in her lungs which is frequently seen, which is one of the reactions of shock. Now if he was smothering her and she went into neurogenic shock, she wouldn't last very long, your talking seconds. We can run through the slides, if you wish but I know you've all seen them already.

Comment: The only thing, maybe some of the autopsy, you might...I don't think there's any reason unless you wanted to see some of the scenes.

Comment: Anybody have any questions in regards to the body, anything that was on the body that we haven't commented on, maybe just show one.

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Comment: We will run it through fast and if somebody wants us to stop, we'll stop.

Dr.: They know about the footprints, don't they? Yeah, okay. One other thing I wanted to comment on, in this case and the Robinson case, both of these children were found almost the same distance from the road and they both had their heads toward the road for whatever.

Comment: In Robinson's case, though, if I recall correctly, there was some movement of the body after it was placed on the ground. Mechanic type situation or whatever you want to call it but, I mean, when you place somebody on the ground like she was, there was no outside movement, as if the foot had moved or I don't know what part of the body had moved.

Comment: Probably the shock from the shotgun.

Dr.: Her head was completely blown off and with that kind of a blast the size of that body, that blast alone could have moved the body.

Comment: Well, their saying, one of the officers at the scene had told them that there wasn't any movement, I had heard that there was but evidently (cannot understand

Comment: I asked George Reed about that and he said, absolutely no movement, there was only one set of tracks in and out indicating that the party that took her out, carried the shotgun with him.

Dr.: The pictures that I got at my office that our investigators took of the scene, don't indicate any movement at all.

Question: Was there any indication of suffocation in the Robinson case?

Dr.: Well, no, no.

Comment: There was no indication of suffocation but there was no movement of the body indicating that apparently she was unconscious or dead at the point she was layed

Dr.: No, she wasn't dead. She was killed by the shotgun blast right there on the spot

Question: Well, then she would either be unconscious or in complete shock where she couldn't move which would be a little unusual, wouldn't it?

Dr.: Yeah, I've speculated that where the Robinson girl was found was right, from the entrance from Big Beaver onto 75 and it looked like the kind of spot that if she was in the car with somebody and somebody would say, okay we're on the expressway, why don't you get out here, this is a good spot to pick-up another ride. And that she panicked and ran and he chased her down that little incline and she slipped and fell and he blasted her. I don't know, that's, because it wasn't contact, she's got powder embedded in her skin around the wound.

Comment: Again, according to the investigators, there was only one set of tracks going in and those of a large shoe, going in and going out, no tracks of hers indicating that she was carried there. So with no movement she would have had to have been unconscious from possibly a blow on the head, it's kind of hard to tell with that shotgun blast.

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Dr.: Very very difficult to tell.

Question: Can I ask how much carbon monoxide was in her blood, sir?

Dr.: In the Robinson girl - to tell you the truth, I don't <sup>recall</sup> off hand.

Question: Could we get those figures?

Dr.: When I go back, I'll check, yeah.

Comment: So we can see what similarities and dissimilarities we have.

Question: Could she have been on drugs, the Robinson girl, when she was layed there?

Dr.: No, we found no evidence of any drugs.

Comment: Well the girl that was dumped in the river down in (cannot understand) her cause of death of carbon monoxide poisoning (cannot understand). And she was last seen on I-75.

Comment: We're just wondering on the carbon monoxide content (cannot understand).

Dr.: This is a little sebaceous cyst in the skin, naturally occurring. This is not traumatic.

Question: Any significance to the marks on the nose?

Dr.: Probably another picture will show this mark on her upper lip, that's linear.

Comment: I don't have a slide of that but there are pictures.

Dr.: Right here, between the nose and the upper lip, on the upper lip, there is a little red linear mark that runs over this way. Now that mark could have been a mark produced by something being pressed up against the cheek at that point.

Question: Her left side?

Dr.: Yeah, on her left side, this is the left side of her face.

Question: Is that mark on her cheek one mark? It looks almost as though <sup>there</sup> were two.

Dr.: There's this and then there's this other linear mark.

Question: Is that other linear mark just this side of the nose?

Dr.: It runs from just under the nose up in this direction, diagonally.

Question: Would that be caused by the pressure of the hand or the article that was placed over?

Dr.: Yes, I'm quite sure it was.

Question: The hand?

Pathologist Report (Continued)

Dr.: Well I don't know if it was a hand but something was pressed up against that area. And it would have to be part of what was put over her mouth and nose.

Question: The burn mark area is what I was referring to. It looks almost as if there were two lines there rather than one circle.

Dr.: This is not quite circular; it's almost elliptical. But there's a separate mark that is farther away from this.

Comment: The reason I was asking, those of you that saw the mark on Stebbins' head, looked as though there were two items but it opened. And they were thinking the possibility of pliers or something that hit him on the top of the head. This looks almost like two close lines.

Comment: That could have been a hot plate, a circular plate that she layed right against, couldn't it?

Dr.: This other mark is different from this one.

Comment: This is what I'm talking about is the burn.

Dr.: Almost any hot object would have done that.

Comment: But if you take a round object, your going to have sort of a longer mark than your going to have circular.

Dr.: Well it is somewhat elliptical; it's longer this way than it is this way.

Question: Is that close enough to the cheekbone that that could have affected the shape of that? I mean the bone, itself.

Dr.: Oh definitely, yeah.

Question: If she was sleeping, 1 o'clock in the morning, deep sleep, murderer approached her and suffocated her then, what time span would her to come out of her deep sleep to go into death? What are we talking about?

Dr.: She may not have ever woken up.

Comment: This could account for no bruises, scratches (cannot understand).

Dr.: Right.

Question: That shock you talked about earlier would still occur?

Dr.: Oh yeah.

Question: Do you feel that the carbon monoxide may have been in some vehicle?

Dr.: Or some structure where the ventilation wasn't that good. Now, like a house trailer where they have space heaters and maybe it's not vented too well.

Pathologist Report (Continued)

Dr.: (Continuing): Now here, these markings on the legs and on this hand are the superficial staining of the skin by the release of blood pigments from the blood vessels and this is a post-mortem change and usually happens in a 70 degree room in 48 to 72 hours after death.

Question: Are the two on the arm just above the elbow the same thing? It's a little hard to tell from the (cannot understand).

Dr.: Up here?

Comment: Yes.

Dr.: I don't know, maybe we have another picture of that and we'll show that a little bit better.

Comment: It looks almost like a band mark.

Dr.: She had a shirt on; she had a green shirt on.

Question: With tight sleeves?

Dr.: It was a snug fitting shirt, yeah. Now it's amazing how much more redness shows up in the slides than it did at the time we were doing the autopsy but you can see her vagina and rectum. There's no gaping whatsoever and there's no lacerations at all.

Question: How about the mark on the right rib cage?

Dr.: This mark, that's clothing fold. Now at the time of the autopsy that mark was almost invisible. Shows up much more here than it did at the time of the autopsy.

(Tape completed on this side; changed to another tape for continuing report)

Comment: There appeared to be a redness type thing here.

Dr.: Yes and this shows up more than it did at the time of the autopsy, much more and, of course, that could mean something like a wool muffler or something of that sort. Now, you know, these lined boots, this lining was dry and her clothes, as you can see, are clean.

Question: Dr., again on these marks on the nose if that had been done with a cloth fiber, would you have the impressions of that left or would you just have the bruises that you have? In other words if he wore gloves or had some material.

Dr.: Well I can recall a case, about 20 years ago, a little girl that was murdered down in the Southern part of Wayne County, DeCosen, I don't know if you remember that case or not and this fellow had murdered this little girl and dumped her in a burlap sack and then taken her out and dumped her again and she had marks on her cheek that he couldn't figure out that looked like a waffle iron until we found the burlap sack and it matched perfectly. But she doesn't have enough marks there to give you a hint of type of material or instrument we're dealing with. I mean those shoes just show, you know, a little wear, or the boots.



Pathologist Report (Continued)

Comment: I think that's about it.

Dr.: That's about it? Well see I've got slides of the autopsy too.

Charlotte: There's two things that I wonder about and I don't mean this necessarily directed the question to you but one is that if someone had held her for this period of time, wouldn't it be reasonable to assume that there had been numerous sexual attacks and even if there had not been numerous ones, if there were only the two that occurred shortly before her death, where is all this semen? Where did it all go?

Dr.: That's a reasonable assumption but again, that's why I say, I don't think we're dealing with what I would call "normal" person.

Charlotte: But wouldn't it also be reasonable to assume there had been numerous attacks over the period of the 2 or 3 weeks that she was held?

Dr.: There may or may not have been.

Charlotte: It would seem like a reasonable assumption.

Comment: It could work in reverse, though, couldn't it? I mean couldn't we possibly assume that this was a direct result prior to the death, that he finally made his move and in so doing...

Dr.: Panicked.

Charlotte: Why would he keep her for two weeks?

Comment: Maybe he just layed on her, brushed up against her, liked to look at her, photographed her (cannot understand). Maybe he got his jollies just by looking at her.

Dr.: And it gave him some sort of vicarious thrill just to have somebody in his custody.

(Tape continues; unable to pick-up question)

Dr.: Well that's why I say, we're dealing with somebody that's quite deviate.

Question: Could the sex have taken place after she was suffocated?

Dr.: It's a possibility, it's a possibility we're dealing with necrophilia but...

Comment: There again the dressing, how would he get her dressed so perfectly and cleaned up?

Question: Wasn't Stebbins dressed after he was killed?

Comment: Yeah but did you see the difference between the way he was dressed, the belt was one notch off, the clothes were disarrayed. It wasn't as meticulous as this girl.

Pathologist Report (Continued)

Dr.: This girl, the way she's dressed, just looked like she dressed herself. This is the way she would dress herself. Whose going to tuck those pants into the boots?

Question: Now one other thing, Dr., is there anything as far as the investigation goes that we should be looking for, as far as your concerned, as far as your role as a pathologist, in the death and so forth? Are we looking for anything specific, obviously we are not looking for a gun or a knife. Is there anything that you might have in mind that we could be looking for that just maybe hasn't entered our minds? Are you able to draw anything up or is there nothing?

Dr.: I really couldn't give you any leads there at all because whatever was used to suffocate her could have been any soft object or semi-soft object, the possibilities are unlimited.

Comment: As far as our position in the lab as far as the prints, we have fingerprints we have palmprints and we also have footprints. We completed printed her body. If you find something, it be a van or house or whatever you wish, just call anytime if you feel that there's something that we could do. But as it stands right now, we have really nothing to compare against as far as the prints go but in toxicology they have something to work with but we're available.

Question: One more question, do we have enough of the semen or sperm to blood type?

Dr.: I don't know, you have those swabs, don't you?

Charlotte: I have some and I saw some at your office which I did not want to take without you being there. Now I don't know (cannot understand).

Dr.: Have you tried at all...

Charlotte: I have not because I didn't want to do it until I got the control swabs (cannot understand).

Dr.: But now you told me that you did get an acid phosphatase reaction.

Charlotte: I did not get a normal reaction that's why I wanted the control (cannot understand).

Dr.: Well, I'm sorry, you lose me there when you say normal. What's a normal reaction?

Charlotte: A normal reaction with an acid phosphatase if you have enough, let's say that your going to have sperm present, you will normally get an immediate dark blue color with a (cannot understand). What I got with the swabs that were given to me, every single swab whether it was from the mouth or what, is an identical reaction; it was a very delayed reaction. It was not the characteristic blue-purple (cannot understand).

Question: There is enough to test? Is that correct?

Dr.: Well, I think, probably because we're dealing with such a small amount of material what we're going to have to wind up doing is I'm going to have to give you all the swabs that we've got so you can allude them all and maybe get a concentrate.

Pathologist Report (Continued)

Charlotte: Right anything that your finished with but I did not want to take them without you being there.

Comment: In the event that we come up with another deal like this where we have another body found or something happens like that as far as we're concerned at the lab, we're available and we want to see it protected as best as it can be protected and we'll go to work on it and try to get as much as we can and present as much as we can to you.

Dr.: And apropos of that, our office will work/as <sup>with you</sup> closely as we possibly can, in any regards.

Comment: I wanted to say as far as some of these notes that have been coming in on these tips, processing them for prints, there's very little coming up on them. I've gotten some that might be identifiable but there isn't too much coming up on them. I got a real good one off the outside of one of the envelopes, off a piece of tape but that could have been put on there by the mailman.

Comment: Is there anymore questions?

Question: How did they come out in Toronto? Did they have anything there yet?

Comment: We're still waiting.

Comment: Because if he comes up with one we should be printing all of these suspects instead of worry too much about the polygraph if he has something that's identifiable.

Comment: Of what I have read and what we have, limited experimenting I have done with iodine fuming, the success rate on that is very minimal, maybe half a percent. They have obtained prints and, I believe, any of the prints they have matched have been accountable prints that were ambulance attendants or something like this here. To my knowledge, I don't believe they have made any suspect on this type of thing. As far as it being worthwhile, definitely it was worthwhile to go through the process for anything that we could get but the success rate is not...

Question: Do you have any idea of his time table when we'll know?

Comment: I don't know, personally I do not know.

Dr.: He was supposed to have gotten his results back last week sometime and I have heard nothing about it.

Comment: We'll probably recheck again today.

Comment: Cause if we go by prints and by hospital blood type, we can save ourselves (cannot understand).

Dr.: And I think as far as that goes, the first ones that used that was Scotland Yard and their success rate is less than one-tenth of one percent.

Comment: Right, very very low. There's that possibility and as far as, I think, the completeness and the thoroughness of the autopsy and as far as the investigation of the body, I think, I've never been to one that was more thorough as this one here.

Pathologist Report (Continued)

Comment:(Continuing): In fact I've never seen them U-V the body before, this is the first time I've been on a deal where they've used a light and so forth and x-rays. You name it and it was done. If there was anything forgotten, I'm sure it would be picked-up if we have another thing to do like this.

Comment: I'm just wondering about the prints because we're running a lot of people on polygraph which is taking a lot of time and if you don't get their approval then your in trouble again.

Comment: You've got very little in the way of prints, like the only prints we've got on prints so far, is going to be off these tips, okay. Maybe the suspect is the one sending the tips. If he's that psychotic, maybe this is the way of his asking for help, I don't know.

(Tape continues; unable to pick-up specific questions/answers)

Comment: The prosecutor's office has been in contact with them and as soon as we get the word. I understand there's some possibilities and he's got partials. We had the word that he had a few points on one print, of course, he's not going to commit himself and you can understand his point. He's not going to say, yes I've got it and we get all hepped up and then he says, no I don't.

Dr.: Well he's aware of the sperm being found and that hasn't been given out and that deliberately wasn't given out.

Comment: I want to reemphasize that to the investigators here; we went over this once before and we go over it just about everyday, that what you hear here, stays here because we don't want the findings as far as the doctor's report going out in the newspaper and it's given us the psychological advantage because they printed it from paper upon paper that she wasn't sexually molested and this is really going to help our investigation.

(Tape continues; no specific questions/answers)

(End of pathologist report)