



OFFICE OF THE JACKSON COUNTY MEDICAL EXAMINER

(816) 881-6600 FAX (816) 881-6641

950 E. 21st St. Kansas City, MO 64108 Diane C. Peterson, M.D.
Chief Medical Examiner
B. Robert Pietak, M.D.
Deputy Medical Examiner
Marius C. Tarau, M.D.
Deputy Medical Examiner
Lindsey J. Haldiman, D.O.
Deputy Medical Examiner

REPORT OF THE MEDICAL EXAMINER

Name	Toni Anderson
Number	17-01473
Age, Race, Sex	
Procedure	Autopsy
Date and Time	
Cause of Death: Contributing Factors:	Drowning and hypothermia Ethanol, cocaine, and amphetamine intoxication
Manner:	Accident
Examination performed by:	
Diane C. Peterson, M.D. Chief Medical Examiner	tesonpo
Date signed	

PERSONS PRESENT AT EXTERNAL EXAMINATION

Investigators Adam Wilcoxen and Christina Hawkins, Sergeant Benjamin Caldwell, Detective Will Majors, and CST Frobenius.

PERSONS PRESENT AT AUTOPSY

Forensic Assistant Holly Cass.

PATHOLOGIC DIAGNOSIS

- I. 20-year-old white female found in vehicle in Missouri River.
 - A. Last known alive 01/15/2017 in North Kansas City.
 - 1. Cell phone last pinged location in English Landing Park in Parkville, Missouri.
 - 2. Temperature 30°F with 23-24°F windchill and light freezing drizzle at time last known alive.
 - B. Vehicle pulled from Missouri River 03/10/2017 near English Landing Park.
 - C. Mild to moderate decompositional changes.
 - D. Changes of the skin of hands and feet consistent with prolonged water exposure.
 - E. Two minor contusions of left knee; no other antemortem injuries identified.
 - F. No significant natural disease to account for death.
- II. Ethanol, cocaine, and amphetamine intoxication (see summary and toxicology report).

CAUSE OF DEATH

Drowning and hypothermia

CONTRIBUTING FACTORS

Ethanol, cocaine, and amphetamine intoxication

MANNER OF DEATH

Accident

CIRCUMSTANCES OF DEATH

According to Investigator reports, the decedent was a 20-year-old white female who was last known alive at 0430 hours on 01/15/2017 when she was pulled over by a North Kansas City Police Officer. Her cell phone last pinged at approximately 0600 hours in the vicinity of English Landing Park in Parkville, Missouri. The temperature was 30°F with 23-24°F windchill and light

freezing drizzle at the time she was last known alive. Sonar searches of the river in January were unsuccessful in locating the subject. She was entered as a missing person on the NamUs database on 01/18/2017. On 03/09/2017, the subject's family arranged for a private company to re-search the river using sonar. Two vehicles were discovered, including one of which that belonged to the subject. When the vehicle was pulled to the north bank of the river, she was found inside the vehicle. When the vehicle was found, it was in fairly good condition with only minor damage. A cable was hooked through the roof of the vehicle and attached to a crane, to pull the vehicle from the river, all windows were noted to be intact when the vehicle was initially found, with the driver's side window being in the down position, per Sergeant Caldwell with KCPD. The car was noted to be in drive with the keys still in the ignition. She was lying prone in the water inside the vehicle without a seat belt on. She was clad in the same clothing she was noted to be wearing the morning of her disappearance. A backpack belonging to the subject was also located in the vehicle. She was pronounced deceased on scene at 1755 hours on 03/10/2017.

IDENTIFICATION

A Medical Examiner Office identification band is around the left wrist identifying the decedent. The body is scientifically identified as "Possible identification" through dental comparison by Dr. John Filippi. Given the possible identification, "Positive identification" as Toni Anderson, date of birth 04/05/1996, was made by Dr. Diane Peterson based on height, weight, similar facial features, and clothing being worn by the subject, when compared to antemortem measurements and photographs.

CLOTHING

The body is received clad in the following:

- 1. A black jacket, "Merona" brand, size Medium. The jacket is free of defect.
- 2. A gray long-sleeved shirt, "Fruit of the Loom" brand, size Medium. The shirt is free of defect.
- 3. A black bra, "Out from Under" brand, unknown size. The bra is free of defect.
- 4. Black sweatpants, "Jerzees" brand, size Small.
 - a. The left front leg panel has a $\frac{3}{4}$ x $\frac{1}{2}$ inch defect that does not correspond to a defect on the subject.
- 5. Black underwear, "Victoria Secret" brand, size Medium. The underwear is free of defect.
- 6. A black garter belt with two black garters, "Victoria Secret" brand, size Medium. The garter belt is free of defect.
- 7. Brown boots, "Xhilaration" brand, unknown size. The boots are free of defect.
- 8. Also received with the body is a black hair band and a false eyelash. Two gray metal body jewelry are also recovered; the jewelry has multicolored stones.

MEDICAL INTERVENTION

None.

EXTERNAL EXAMINATION

General: The unembalmed, mildly to moderately decomposed body is that of a white female that has the reported age of 20 years. The body is 66 inches in length and weighs 165 pounds. Rigor mortis is absent. Livor mortis is indeterminate given the decompositional changes. The body is cold to touch and has been refrigerated. The body is free of tattoo. Decompositional changes include diffuse green discoloration, a foul odor, and multifocal skin slippage. Sand is within the hair as well as on the clothing.

Head and Neck: The scalp is covered by straight apparent light brown hair with a longest estimated length of 12 inches. Arcus senilis is absent. The sclerae are anicteric. Contact lenses are in place. The irides are brown. The conjunctivae exhibit lividity but are free of petechiae. The earlobes have been pierced once. The nares are patent. The oral cavity is free of laceration and contusion. The frenula are intact. The teeth appear healthy. No fracture is palpable in the zygomatic arches. The neck is appropriately mobile and free of mass and scar.

Torso: See "Evidence of Injury". No mass is palpable within the breasts. The nipples have been pierced once bilaterally. The chest, abdomen, back, and anus are free of apparent scar. The external genitalia are those of an adult female and are free of injury.

Arms: No fracture is palpable in the long bones. The arms are free of apparent needle track and scar. Bags cover the hands. Five digits are on each hand. The hands exhibit marked wrinkling due to prolonged water exposure. The acrylic fingernails extend up to ½ inch beyond the tips of the fingers. The nails have been painted pink. Neither tissue nor fabric is beneath the nails. Neither soot nor powder is detected on the hands.

Legs: See "Evidence of Injury". No fracture is palpable in the long bones. The legs are free of edema and apparent scar. Five toes are on each foot. The toenails are covered by worn red polish. The skin of the feet is wrinkled from prolonged water exposure.

EVIDENCE OF INJURY

Torso: The left lower aspect of the abdomen and inguinal area exhibit three postmortem lacerations, which measure 2 inches, 2 ¾ inches, and 1 inch, respectively. The larger laceration contains glass embedded within it. The lacerations are partial thickness, involving the

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subcutaneous fat only. No hemorrhage or other discoloration is noted of the skin or soft tissue of the laceration. The lacerations do not enter the peritoneal cavity, which is free of injury.

Legs: The lateral aspect of the left knee has two faint contusions, which measure $\frac{1}{2}$ x $\frac{1}{2}$ inch and $\frac{1}{4}$ x $\frac{3}{4}$ inch, superiorly and inferiorly, respectively. The contusions are faint brown in color.

INTERNAL EXAMINATION

Body Cavities: The mesothelial surfaces are smooth, dusky, and free of mass. The right pleural cavity contains 300 ml of purge-type fluid, and the left pleural cavity contains 50 ml of purge-type fluid. The pericardial and peritoneal cavities are free of excess fluid. The vital organs exhibit decompositional changes commensurate with those described externally.

Cardiovascular System: The coronary arteries arise normally and follow their usual courses. The circulation is right dominant. The vessels are free of atheroma. Serial sections of the 320 gram heart reveal maroon myocardium that is free of softening, discoloration, and scar. The left ventricular free wall and interventricular septum are of similar thickness. The chambers are not dilated. The septa are free of defect. The endocardium is free of mural thrombi. The valves are thin, pliant, and normal in form. The aorta is free of atheroma.

Pulmonary System: The right lung weighs 330 grams, and the left lung weighs 260 grams. Each lung is composed of spongy maroon tissue that is free of mass, consolidation, thromboemboli, and emphysema. The trachea and bronchi are patent. The tracheal mucosa is smooth and dusky.

Liver and Pancreas: The 1500 gram liver has an intact capsule and is composed of maroon tissue free of mass and scar. The gallbladder wall is thin, pliant, and free of mass. The gallbladder contains no stones. The pancreas is composed of maroon tissue with loss of the usual lobulated architecture. The pancreas is free of cyst, mass, scar, and hemorrhage.

Lymphoid System: The 120 gram spleen has an intact capsule. The spleen is composed of red and white pulp free of mass and infarct. The 40 gram thymus is composed of maroon tissue free of cyst, mass, and scar. The cervical, hilar, and peritoneal lymph nodes are not enlarged.

Endocrine System: The thyroid is composed of maroon tissue free of cyst, mass, and scar. The adrenal glands are composed of yellow cortices and brown medullae and are free of mass.

Gastrointestinal Tract: The esophageal mucosa is smooth and white. Within the stomach is 25 ml of tan mucoid material. The stomach and duodenum are free of mass and ulcer. No mass is palpable within the small or large intestine. The appendix is present.

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Genitourinary System: The right kidney weighs 130 grams, and the left kidney weighs 120 grams. Each kidney is composed of a maroon cortex and maroon pyramids free of cyst, mass, scar, hemorrhage, abscess, and stone. The ureters are not dilated. The bladder mucosa is smooth and cream-colored. The bladder contains 160 ml of clear urine. The uterine wall is 1.7 cm thick and free of mass. The red endometrium is 0.3 cm thick. The fallopian tubes are intact. The ovaries measure 3.8 cm in maximum dimension with corpora lutea. A 0.7 cm firm maroon nodule is noted on the external aspect of the right ovary.

Musculoskeletal System: The ribs and spine are normal in form and free of fracture.

Neck Organs: The tongue is not examined. The pharynx is not obstructed. The strap muscles are free of contusion. The thyroid cartilage and hyoid bone are free of fracture. The laryngeal mucosa is smooth and dusky.

Head and Central Nervous System: The reflected scalp exhibits lividity but is free of transmural contusion. The calvarium is free of fracture. Dark discoloration is noted of the mastoid air sinuses as well as the soft tissue deep to the anterior cranial fossae bones. No thrombus is in the dural sinuses. The meninges are smooth, glistening, and free of mass. No blood is in the epidural, subdural, or subarachnoid space. The hemispheres are symmetric. The 1280 gram brain is free of tonsillar, uncal, and cingulate gyrus herniation. The vessels at the base of the brain are intact and free of dilatation and atheroma. The cerebral hemispheres, midbrain, pons, cerebellum, and medulla are free of cystic scar, hemorrhage, and mass. The distribution of the grey and white matter is normal. The ventricles are not enlarged and contain no blood.

SPECIMENS TAKEN

Toxicology: Chest fluid, blood from the femoral veins, urine, gastric contents, liver, and brain are retained.

Histology: Sections of heart, lungs, liver, kidney, and brain are submitted.

Photographs: Photographs record the appearances of the body as received and of the face.

Radiographs: Radiographs of the body do not reveal apparent fracture or metal fragments.

Cultures: None.

Physical Evidence: Blood samples on filter paper are retained. AccuTrans fingerprints are obtained.

MICROSCOPIC EXAMINATION

Heart (1 section, H&E): The myocardium exhibits mild autolytic change with preservation of architecture. The myocardium is free of inflammatory infiltrate. Accurate evaluation of necrosis cannot be obtained due to the autolytic change. The parenchyma is free of fibrosis.

Lungs (2 sections, H&E): The parenchyma exhibits mild to moderate autolytic change with moderate preservation of architecture. The alveoli appear normal in form. The alveolar spaces contain cellular debris. The parenchyma is free of inflammatory infiltrate. Postmortem bacterial overgrowth is noted. The parenchyma is free of significant birefringent foreign body material.

Liver (1 section, H&E): The parenchyma exhibits marked autolytic change with minimal preservation of architecture. The parenchyma is free of fibrosis. Accurate evaluation of fatty change and inflammatory infiltrate cannot be made given the decompositional changes.

Kidney (1 section, H&E): The parenchyma exhibits moderate to marked autolytic change with mild to moderate preservation of architecture. The parenchyma is free of apparent significant histopathologic change. Postmortem bacterial overgrowth is identified.

Brain (1 section, H&E): The parenchyma of the fragmented section exhibits mild to moderate autolytic change with preservation of architecture. The basophilia of focal neurons is retained. The fragmented section is free of apparent significant histopathologic change. Postmortem bacterial overgrowth is noted. NOTE: The processing of the slide is poor.

CASE SUMMARY

Ms. Toni Anderson was a 20-year-old white female who was last known alive on 01/15/2017. Her cell phone last pinged in the area of English Landing Park in Parkville, Missouri. The temperature was 30°F with 23-24°F windchill and light freezing drizzle at the time she was last known alive. She was found within her vehicle in the Missouri River on 03/10/2017. Autopsy revealed mild to moderate decompositional changes. The skin of the hands and feet had changes consistent with prolonged water exposure. The body exhibited two minor contusions of the left knee. No other antemortem injuries were identified. Notably, the postmortem lacerations of the abdomen, which contained glass, indicating the likely etiology of the lacerations, did not enter the peritoneal cavity. No natural disease was identified to account for death.

A drug screen performed on femoral blood revealed the presence of amphetamines and benzoylecgonine (cocaine metabolite). Toxicological analysis of chest fluid revealed amphetamine at a concentration of 186 ng/mL. No methamphetamine was detected in chest fluid.

Toxicological analysis of femoral blood revealed benzoylecgonine at a concentration of 116 ng/mL and ecgonine methyl ester at a concentration of 58 ng/mL. Neither cocaine nor cocaethylene were detected in femoral blood. Ethanol was detected in Ms. Anderson's femoral blood at a concentration of 144 mg/dL and in her urine at a concentration of 245 mg/dL. Ethanol, cocaine, and amphetamine can all cause confusion, leading to impaired driving. Ms. Anderson was not known to have been prescribed amphetamine.

It is my opinion, based on the circumstances surrounding death and the findings at autopsy, that Ms. Toni Anderson died as a result of drowning and hypothermia. Ethanol, cocaine, and amphetamine intoxication contributed to her death. The manner of death is accident.

TOXICOLOGY REPORT:

Children's Mercy Hospital:

Autopsy Drug Panel-Femoral Blood:

Amphetamines and Benzoylecgonine (Cocaine Metabolite).

Amphetamines Confirmation Blood:

Amphetamine - 186 ng/mL Methamphetamine - < 100 ng/mL

Cocaine Confirmation Blood:

Cocaine - < 50 ng/mL
Benzoylecgonine - 116 ng/mL
Ecgonine Methyl Ester - 58 ng/mL
Cocaethylene - < 50 ng/mL

Volatile Panel-Urine:

Methanol - < 10 mg/dL Ethanol - 245 mg/dL Isopropanol - < 10 mg/dL Acetone - < 10 mg/dL

Volatile Panel-Blood:

Methanol - < 10 mg/dL Ethanol - 144 mg/dL Isopropanol - < 10 mg/dL Acetone - < 10 mg/dL

DCP:acs