

Metropolitan Dade County Office of the Medical Examiner Police Case
No. 77151-S

Name of Deceased: José E. de la Torriente Age: 70 Race: W Sex: M
Address: 709 Cremona Ave. Coral Gables Tel. 666-2272
Death occurred: 12 April 1974 10:21 P.M. in the presence of a doctor.

At approx. 9:00 P.M. the victim was sitting on the living room couch with wife watching T.V. when person(s) unknown fired several shots into the house striking the victim. Victim transported to Doctors Hosp. & pronounced deceased at 10:21 P.M.

Note: bullet went thru window & screen

Clothing: white shirt, black pants, brown socks, black shoes

Trauma: gunshot entrance wound 2" down from top right ear & 2-1/2" to the rear of the ear canal.

Police Investigator G. McGowan Office of the Medical Ex. 906 A

History: On the night of 4-12-74 the deceased was sitting on his living room couch with his wife watching T.V.. At approximately 9:00 P.M. some unknown persons fired several shots into the house striking the deceased. The deceased was taken to Doctors Hospital by Fire Rescue where he was admitted at 9:15 P.M. with GSW to the back of head. There was no exit wound to be found. On admission the deceased was unconscious and found to be in critical condition. In the Emergency Room the deceased received IV sol., Oxygen, ABGA, Jabo, IPPB, and an X-Ray. However, resuscitation efforts failed and the deceased was pronounced at 10:23 P.M. 4-12-74

Autopsy: Elidio C. Fernández M.D. Funeral Director: Caballero
Assistant Medical Examiner

Identification: The body is identified on April 13, 1974, at 4:25 p.m. by Reinaldo Vergara, friend, 10420 N.W. 36 Pl. Miami Tel. 836-7937

External Examination: The body is that of an elderly, white adult male that appears to be the stated age of 70. It measures 5 feet 10 inches and weighs 188 pounds. The body is well developed and in a good state of nutrition. There is a gunshot wound on this body as follows: There is a wound estimated to be the entrance wound measuring approximately 6.16 of an inch in diameter which is located at approximately 4-3/4 inches from the top of the head and approximately 3-1/4 inches to the right of the posterior midline. This wound is located behind the right ear. The skin around the entry wound shows numerous pin-point markings in an area measuring approximately 1-1/2 x 3/4 inches.

Pathway of the bullet:

The bullet entered the posterior cranial fossa of the base of the skull, lacerated the right cerebral hemisphere, the right lateral surface of the brain stem at the lower level of the pons and also lacerated the right temporal lobe and it finally entered the bone right below the anterior end of the petrous ridge and it was lodged in the bone where it was found. The pathway of the bullet is from the right to the left, from posterior to anterior and almost in a horizontal plane or slightly downward. The missile consists of a fully copper jacketed lead bullet consistent with a .38 caliber or similar and it is markedly deformed. It is marked "906".

External Examination:

The head is of normal configuration. The scalp hair is gray, with marked frontal, occipital and parietal balding. There is marked ecchymosis on the soft tissues of the right eyelid. The irides are brown, the pupils are equally dilated. There is arcus senilis bilaterally, marked. There is a small mustache on the upper lip. In the mouth the teeth are permanent with numerous natural fillings. The neck is symmetrical and unremarkable as is the chest. On the right side of the abdomen, there is a diagonal old healed surgical scar on the right iliac fossa measuring approximately 6 inches in length. The genitalia are those of a normal adult male. The extremities are unremarkable.

Internal examination:

The entrance wound in the skull is located in the right side of the posterior fossa of the base of the skull and a number of lines of fracture with the presence of numerous fragments of bone are seen in the middle fossa. The right orbital roof is also fractured. There is a large amount of subarachnoid blood over the surfaces of the cerebellar hemisphere, brain stem and right temporoparietal lobes. Examination of the brain shows laceration of the right cerebellar hemisphere, the brain stem on its right anterolateral surface at the level of the lower edge of the pons and the right temporoparietal lobe. There is hemorrhage of the pons and in the immediate vicinity of the described lacerations. There is hemorrhage of both the gray and white matter associated with the temporoparietal laceration described.

Elidio C. Fernández, M.D.
Assistant Medical Examiner