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# THE OULEEN'S UNIVERSITY OF BELFAST NORTHEAN ISELAND OFFICE

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TEGOTA OF AUTOPBY

1 (a) JUNSHOT WOUNDS OF HEAD AND CHEST

On the instructions of H.M. Coroner for County Armagh, Mr. P. G. Curran, I. John R. Press, MB, BCh, DMJ, registered medical practitioner, Assistant State Pathologist for Northern Ireland and Consultant in Pathology to the Northern Ireland Health and Social Services Boards, made a postmortem examination of the body of -

> RODERICK MARTIN GARROLL agod 22 years

identified to me at The Mortuary, Craigavon Area Hospital, on 13th December, 1982 by Detective Sergeant Speers, R.U.C. Armagh.

During the course of the examination photographs were taken at my direction by Constable dilligan, d.U.C. Shotography Branch.

The Collowing clothing was first removed from the body -

- 1. A marcon coloured anorak.
- 2. A grey sweater.
- 3. A striped shirt.
- 4. A pair o' nuy blue jeans.
- 5. A pair of underpants.
- 6. A pair of dark brown socks.
- 7. 1 prir o' blue laced shoes.

## External Examination:

The body of a young man of average build, weighing about 10 stones and 66 inches in height. Higor mortis was present. Hypostasis of purple colour stained the back of the body.

There were gunshot wounds in the following situations -

### Head:

1. An entrance wound on the back of the scalp, centred 4 cm. above and 7 cm. to the right of the occipital protuberance. It was a round hole, about 5 mm. diameter, with slightly ragged margins and bordered by a zone of abrasion about 2 mm. broad. From its upper margin a laceration, 3 mm. long, extended upwards.

2. An entrance wound on the back of the scalp, centred 3 cm. above and 1 cm. to the left of the occipital protuberance. It was an oval hole, 10 mm. x 8 mm., with its long axis vertical. Its right margin was bordered by a zone of abrasion, 2-3 mm. broad, and shelved outwards whilst its left margin was undermined. From it a track extended upwards into the left to -

3. An exit wound on the back of the scalp, centred 7 cm. above and 6 cm. to the left of the occipital protuberance. It was a roughly oval hole, 13 mm. x 7 mm., with its long axis upwards and to the left. Its margins were slightly ragged.

4. A laceration, 6 mm. on the back of the scalp, centred 52 cm. above the occipital protuberance. In it was embedded a fragment of metal.

### Trunk:

1. An entrance wound on the right side of the back, centred 26 cm. below and 10 cm. to the right of the 7th cervical spine. It was a round hole, about 1 cm. diameter. Its lower margin shelved outwards whilst its upper margin was undermined. Its lower margin was also bordered by an arc of abrasion up to 5 mm. broad. 2. A bullet graze on the centre of the back, centred 34 cm. below the 7th cervical spine. It was an oval wound, 10 mm. x 7 mm., with its long axis horizontal. It hardly penetrated the skin. Its lower margin was bordered by a zone of abrasion, up to 4 mm. broad. From its right margin a band of abrasion, up to 5 mm. broad, extended to the right for 1 cm.

3. An abrasion,  $\frac{1}{2}$  cm. diameter, on the right side of the back, centred 34 cm. below and  $5\frac{1}{2}$  cm. to the right of the 7th cervical spine.

4. An entrance wound on the right flank, centred 35 cm. below and 18 cm. to the right of the 7th cervical spine. It was an oval hole, 8 mm. x 5 mm., with its long axis downwards and forwards. It was bordered by a zone of abrasion. 2-5 mm. broad.

5. An entrance wound on the right flank, centred 37 cm. below and 13 cm. to the right of the 7th cervical spine. It was a roughly round hole, about 7 mm. diameter, and it was surrounded by a zone of abrasion, up to 7 mm. broad.

6. An exit wound on the front of the chest, centred 3 cm. below the sternal notch. It was an oval hole, 10 mm. x 7 mm., with its long axis horizontal. Its margins were slightly ragged.

7. An exit wound on the right side of the front of the chest, centred 5 cm. below and 1 cm. to the left of the nipple. It was a laceration, 14 mm. long and gaping by up to 4 mm., with its long axis horizontal. It was bordered by a sone of bruising, up to  $2\frac{1}{2}$  cm. broad.

### Right Upper Limb:

1. An entrance wound on the outer side of the forearm, centred 17 cm. below the elbow. It was a roughly round hole, about 7 mm. diameter, with somewhat ragged margins. Its upper margin was bordered by an arc of abrasion, up to 2 mm. broad. It was also surrounded by a zone of bruising, up to 1 om. broad. A track extended backwards to -

2. An exit wound on the ulnar side of the back of the forearm, centred 18 cm. below the elbow. It was a laceration, 1 cm. long, and gaping by up to 4 mm.

3. A bullet graze, 1 cm.  $x \ge cm$ ., on the palm of the hand at the base of the little finger.

#### Left Lower Limb:

1. An entrance wound on the outer side of the upper thigh, centred 40 cm. above the knee. It was a roughly oval hole, about 10 mm. x 5 mm., with its long axis horizontal. Its posterior margin shelved outwards and was bordered by an arc of abrasion, up to 5 mm. broad. From it a track extended forwards to -

2. An exit wound on the front of the groin. It was a roughly oval hole, 12 mm. x 5 mm., with its long axis downwards and to the right. Its upper margin was bordered by a zone of bruising, up to 1 cm. broad.

Face: There was bruising of the right upper eyelids and also some bruising of the left lower eyelid.

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Ears: Normal.

Nose: There was some blood in each nostril.

Neck: Normal.

Left Upper Limb: Normal.

Right Lower Limb: Normal.

Scrotum: Testes present.

#### Internal Examination:

#### HEAD:

Skull: Of normal thickness and density. There was a hole, about 1 cm. diameter, in the right side of the occipital bone. Its margins were bevelled, the greatest damage being on the inner table. There was also an area of fracturing, about 1 cm. diameter at the posterior margin of the left middle fossa in the region of the middle ear. There was also some comminution of each anterior fossa.

Brain: There was a little subarachnoid and subdural haemorrhage over its surface. A lacerated track extended forwards across the under surface of the right occipital lobe and the upper surface of the right lobe of the cerebellum. The brain stem was severed. There was also laceration of the under surface of the anterior half of the left temporal lobe and here a deformed copper jacketed bullet was found lodged. No disease was seen.

Mouth: Contained a little blood. There were natural teeth in good condition in each jaw.

Tongue, Pharynx: Normal.

# NECK AND CHEST:

Hyoid Bone and Laryngeal Cartilages: Intact.

Thyroid Gland: Normal.

Perioardial Sac: Normal.

Heart: 350 gm. Of normal size. There was no congenital abnormality or disease. The left ventricle was 13 mm. thick. The right ventricle was 4 mm. thick. Both were normal on section.

Aorta: Healthy.

<u>Pleural Cavities:</u> The left was normal. The right contained a few ounces of fluid blood. There was a hole, 1 cm. diameter, just below the 2nd right costal cartilage and another hole, 1 cm. diameter, just below the 8th rib about

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4 cm. to the right of the spine. There was a further hole,  $l\frac{1}{2}$  cm. diameter, over the 9th rib in the mid-axillary line, the rib was fractured. There were fractures of the 6th, 7th, 8th and 9th ribs close to their junctions with their costal cartilages caused by the bullet, which entered wound 5 on the trunk and lodged beneath skin just below wound 7 on the front of the chest.

Larynx, Trachea and Main Bronchi: Normal.

Lungs: The left was normal. A lacerated track extended upwards from the posterior surface of the right lower lobe to emerge in the anterior surface of the upper lobe. It otherwise appeared healthy.

Oesophagus: Normal.

### ABDOMEN:

Abdominal Cavity: Normal.

Stomach: Normal. It contained some digesting food.

Intestines: Externally appeared normal.

Duodenum, Rectum, Appendix: Normal.

Liver: A lacerated track extended forwards across the lateral surface of the right lobe. It otherwise appeared normal.

Gall Bladder, Spleen: Normal.

Panoreas, Suprarenal Glands: Normal.

<u>Kidneys</u>: The right was normal. The left was about half normal size and the cortex and medulla were very much thinner than normal due to a hydronephrosis. The ureter was also widely dilated.

Bladder: Normal. It contained some urine,

Prostate: Normal.

The autopsy concluded at 5.30 p.m. and I handed clothing, two samples of blood and two copper jacketed bullets from the body and a copper jacketed bullet from the clothing to Constable Grompton, Scenes of Crime Officer.

# MICROSCOPT:

Left Ventricle: The muscle fibres were of normal size. There was no significant fibrosis. No recent necrosis was seen,

Kidneys: The right was normal. There were areas of scarring with lymphocytic infiltration in the left.

# REPORT OF FORENSIC SCIENCE LABORATORY:

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Analysis of a sample of blood excluded the presence of alcohol.

Examination of the bullets from the body revealed that they were 9 mm. parabellum.

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# THE QUEEN'S UNIVERSITY OF BELFAST NORTHERN IRELAND OFFICE

# OPINION

on

the autopsy findings of -

RODERICK MARTIN CARROLL

The young man was healthy. There was some damage to one kidney due to pressure on the ureter, which drains urine from the kidney. However, this would not have caused or accelerated death although it might have required treatment in the future.

Death was due to gunshot wounds of the head and trunk. Two bullets had struck the head. One had passed superficially upwards and to the left through the scalp whilst the other had entered the right side of the back of the scalp and had passed forwards to the left lacerating the brain and brain stem before lodging in the left side of the base of the skull.

Four bullets had struck the trunk. One had grazed the centre of the back whilst the others had entered the right side of the back. One had passed forwards lacerating the right lung before passing through the upper end of the breast bone and making its exit on the centre of the front of the chest. Another had passed forwards fracturing four ribs before lodging beneath the skin on the front of the chest whilst a further bullet had passed forwards lacerating the liver before making its exit on the front of the chest.

A bullet had also traversed the right forearm and another had grazed the palm of the right hand. A further bullet had also passed from left to right through the soft tissues on the front of the left groin.

The injuries to the head and chest would have caused his rapid death.

The injuries were of a type caused by bullets of low velocity. There was nothing to indicate that any of the bullets had been fired at close range. The appearance of some of the entrance wounds would indicate that the bullets had struck some object such as a car door before striking this man.

He had been struck by at least seven, and possibly nine, bullets most of which appeared to have come from behind and to his right.

The report of the Forensic Science Laboratory shows that at the time of his death there was no alcohol in the body.

# THE QUEEN'S UNIVERSITY OF BELFAST NORTHERN IRELAND OFFICE

REPORT OF AUTOPSY

Name: Peter James Martin GREW Aged: 31 years Sex: Male No.F: 28,640 Date of Death: 12th December, 1982. IL Date and Hour of Autopsy: 13th December, 1982. 1.30 p.m.

Place of Autopsy: The Mortuary, Craigavon Area Hospital.

CAUSE OF DEATH:

1 (a) GUNSHOT WOUNDS OF HEAD AND CHEST

On the instructions of H.M. Coroner for County Armagh, Mr. P. G. Curran, I, John R. Press, MB, BCh, DMJ, registered medical practitioner, Assistant State Pathologist for Northern Ireland and Consultant in Pathology to the Northern Ireland Health and Social Services Boards, made a postmortem examination of the body of -

> PETER JAMES MARTIN GREW aged 31 years

identified to me at The Mortuary, Craigavon Area Hospital, on 13th December, 198 by Detective Sergeant Speers, R.U.C. Armagh.

During the course of the examination photographs were taken at my direction by Constable Milligan, R.U.C. Photography Branch. The following clothing was first removed from the body -

- 1. A navy blue anorak.
- 2. A blue sweater with grey and navy blue stripes.
- 3. A checked shirt.
- 4. A white cotton vest.
- 5. A pair of fawn trousers.
- 6. A pair of white underpants.
- 7. A pair of fawn socks.
- 8. A pair of light brown, laced, rubber soled shoes.

# External Examination:

The body of a middle-aged man of average build, weighing about 11 stone and 71 inches in height. Aigor mortis was present. Hypostasis of purple colour stained the back of the body.

## There were gunshot wounds in the following situations -

# Head:

1. An entrance wound on the left side of the back, centred 9 cm. above and 9 cm. to the left of the occipital protuberance. It was  $67\frac{1}{2}$  inches above the soles of the feet. It was a roughly round hole, about 5 mm. diameter. From its posterior and upper margin three lacerations, 2-7 mm. long, radiated outwards.

2. An exit wound on the right side of the scalp, centred 8 cm. above and 5 cm. behind the outer opening of the ear. It was 68 inches above the soles of the feet. It was an oval hole, 13 mm. x 5 mm., with its long axis roughly horizontal. Its margins were somewhat ragged and from it five lacerations, 2-7 mm. long, madiated outwards. It was surrounded by a zone of purple bruising up to 2 cm. broad.

# Trunk:

1. An entrance wound on the centre of the back, centred 18 cm. below the seventh cervical spine. It was 54 inches above the soles of the feet. It was an oval hole, 6 mm. x 3 mm., with its long axis upwards and to the right. It was surrounded by a sone of abrasion, up to 5 mm. broad.

2. An entrance wound on the left side of the back of the chest, centred 19 cm. below and 14<sup>±</sup>/<sub>2</sub> cm. to the left of the seventh cervical spine. It was 54 inches above the soles of the feet. It was an oval hole, 5 mm. x 3 mm., with its long axis roughly horizontal. It was bordered by a zone of abrasion, 2-3 mm. broad.

3. An entrance wound on the left side of the back, centred 8 cm. above the level of the level of the iliac crest and 11 cm. to the left of the midline.

It was 45<sup>1</sup> inches above the soles of the feet. It was an oval hole, 13 mm. x 5 mm., with its long axis upwards and to the right. It was surrounded by a zone of abrasion, 3-5 mm. broad.

Exploration of the wound revealed a track extending upwards and to the right for about 3 inches to a deformed copper jacketed bullet lodged in the muscles close to the spine.

4. An exit wound in the right mid-axillary line, centred 3 cm. below the top of the armpit. It was about 55 inches above the soles of the feet. It was an oval hole, 7 mm. x 5 mm., with its long axis roughly horizontal. Its margins were slightly ragged.

5. An exit wound also in the right mid-axillary line, centred 4 cm. below the previous wound. It was an oval hole 15 mm. x 7 mm., with its long axis vertical. Its margins were slightly ragged.

Each of these wounds were within a zone of reddish bruising about 8 cm. diameter.

#### Right Upper Limb:

1. An entrance wound on the inner side of the arm, centred 3 cm. below the axilla. With the arm pressed to the side of the chest it overlay the upper exit wound in the axillary line. It was an oval hole, 5 mm. x 3 mm., with its long axis downwards and forwards. From it a track extended downwards and outwards to a bruise, about 12 cm. diameter, on the outer side of the arm, centred 20 cm. below the top of the shoulder. Deep to this a copper-jacketed bullet was found lodged.

2. An entrance wound on the front of the forearm, centred 8 cm. above the wrist. It was a round hole, about 5 mm. diameter, and its lower margin was bordered by an arc of abrasion, up to 3 mm. broad. From it a track extanded upwards to -

3. An exit wound on the front of the forearm, centred 11 cm. above the wrist. It was an oval hole, 7 mm. x 5 mm., with slightly ragged margins. Its upper margin was bordered by an arc of abrasion, up to 5 mm. broad.

### Left Upper Limb:

1. An entrance wound on the back of the hand. It was an oval hole, 15 mm. x 7 mm., with its long axis roughly vertical. It was bordered by a zone of abrasion, 1-2 mm. broad. A track extended through the hand to -

2. An exit wound on the hypothenar eminance. It was a laceration,  $l_2^1$  cm. long.

Left Lower Linb: A bullet graze on the outer side of the back of the left buttock, centred 22 cm. below the level of the iliac crest. It was 34 inches above the soles of the fect. It measured  $l_2^{\frac{1}{2}}$  cm. x l cm., with its long axis horisontal and was bordered by a zone of bruising up to  $l_2^{\frac{1}{2}}$  cm. broad.

lose: There was some blood in each mostril.

Neck: hormal.

Right Lower Limb: Normal.

Left Lower Limb: There was an abrasion, 8 mm. x 4 mm., on the front of the thigh, centred 4 cm. below the anterior superior iliac spine.

Scrotum: Testes present.

## Internal Examination:

### HEAD:

Skull: Of normal thickness and density. There was an entrance hole in the left parietal bone. It measured about 1 cm. diameter. Its margins were bevelled, the greatest damage bein; on the inner table. From it fissure fractures radiated outwards, one to an exit wound in the right parietal bone, which measured about 14 cm. diameter. Its margins were bevelled, the greatest damage on the outer table.

Brain: A lacerated track extended from the outer surface of the left occipital lobe to emerge on the outer surface of the right parietal lobe. There was considerable haemorrhage into the track, which measured up to 4 cm. diameter. No disease was seen.

Mouth: There were natural teeth in good condition in each jaw and a partial denture in the upper jaw.

Tongue, Pharynx: Normal.

NECK AND CHEST:

Hyoid Bone and Laryngeal Cartilages: Intact.

Thyroid Gland: Normal.

Pericardial Sac: Normal.

<u>Heart:</u> 350 gm. Of normal size. <u>Valves: Normal.</u> <u>Coronary Irteries: Healthy.</u> <u>Atria: Normal.</u> <u>Left Ventricle:</u> 13 mm. thick. On section normal. <u>Right Ventricle:</u> 4 mm. thick. Normal.

Aorta: Healthy. The arch was lacerated.

<u>Pleural Cavities</u>: The right contained about 1 pint of fluid blood and blood clot. There was a hole, about 1 cm. diameter, over the 4th rib in the mid-axillary line, the lower margin of the rib being fractured. There was a further hole, over the 5th rib also in the mid-axillary line. The rib was fractured. There was a hole,  $1^{\circ}$  cm. x l cm., over the 6th rib close to its junction with the spine, the rib being fractured and the fragments protruding inwards. The left contained about two pints of fluid blood and blood clot. There was a hole, about  $1^{\circ}_{2}$  cm. x l cm., over the 5th rib in the posterior axillary line. The rib was fractured, the fragments protruding inwards.

# Larynx, Trachea and Main Bronchi: Normal.

Lungs: There was a lacerated track through the right upper lobe and another through the right middle lobe. There was also a track through the lower part of the lost upper lobe. They otherwise appeared healthy.

Desophagus: Normal.

## ABDOMISM:

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Abdominal Cavity: Normal.

Stomach: Normal. It contained some digesting food.

Intestines: Externally appeared normal.

Duodemum, Rectum, Appendix: Normal.

Liver, Gall Bladder, Spleen: Normal.

Panereas, Suprarenal Clands: Normal.

Kidneys: Healthy.

Bladder: Normal. It contained a little urine.

Prostate: Normal.

The autopsy concluded at 3.30 p.m. and I handed clothing, two samples of blood and two copper-jacketed bullets from the body to Constable Crompton, Scenes of Crime Officer.

# REPORT OF FORENSIC SCIENCE LABORATORY:

Analysis of a sample of blood excluded the presence of alcohol.

Examination of the bullets from the body revealed that they were 9 mm. parabellum,

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# THE OUSEN'S UNIVERSITY OF BELFAST

NORTHERM IRELAND OFFICE

# OPINION

on

the autopsy findings of -

PETER JAMES MARTIN GREW

The man was healthy. There was no natural disease to cause or accelerate death.

Death was due to gunshot wounds of the head and trunk. A bullet had entered the left side of the back of the head and had passed to the right fracturing the skull and lacerating the brain before making its exit on the right side of the scalp. Three bullets had struck the trunk. One had entered the left side of the back of the chest and had passed to the right fracturing the fifth left rib and had lacerated the left lung, the aorta and the right lung before fracturing the fifth right rib and making its exit on the right side of the chest. A second bullet had entered the centre of the back and had passed forwards to the right fracturing the sixth right rib, lacerating the right lung and fracturing the fourth right rib before making its exit in the region of the armpit. It had then entered the inner side of the right arm and has passed through the muscles to lodge beneath the skin on the outer side of the arm. The third bullet which had entered the back passed upwards to the right for about three inches and lodged in the muscles close to the spine. The combined effect of these injuries would have caused his rapid death.

A bullet had also traversed the right forearm and another had passed through the left hand whilst a further bullet had grased the left buttock. These injuries, however, were not serious and would not have accelerated death.

The injuries were of a type caused by bullets of low velocity. There was nothing to indicate that any of the bullets had been fired at close range.

He had been struck by seven bullets most of which could have come from behind and to his left.

The report of the Porensic Science Laboratory shows that at the time of his death there was no alcohol in the body.

The bullets from the body were 9 mm. parabellum.