

CORONERS ACT, 1980

MEDICAL REPORT UPON THE EXAMINATION OF THE DEAD

BODY of William Anthony ROONEY

I, Vincent Verzosa a legally qualified medical practitioner carrying on my profession at Dept. of Health, NSW

Wollongong in the State of New South Wales, do hereby certify as follows:-

1. At Ten fifteen in the Fore noon, on the 21<sup>st</sup> day of February, 1986, at Wollongong Hosp. Mortuary in the said State, I made an \* Ext-Interna

\* External or internal.

examination of the dead body of a † Man identified to me by

† Man, woman, male child or female child.

(name) Det. Sgt. K. W. WATSON

(address) Wollongong Police

in the State aforesaid, as that of William Anthony ROONEY

aged about 35 years.

‡ Strike out if external examination only.

2. ‡ I opened the three cavities of the body.

§ Particular reference should be made to marks of violence, if any. If an internal examination is made, reference should be made to the condition of the organs.

3. Upon such examination I found § Adult male body with features consistent with his stated age, fairly nourished, medium build, about 5 ft. 11 inches tall, showing some slight bruises on the limbs and chest, and a small sutured scalp incision where a decompression burr hole was done on the right frontal area.

Head region: Scalp - showed a diffuse Haematoma seen across the lower half of the occipital area (back of head) horizontally extending from one side to the other side of the back of the head.  
Skull: showed basal linear fractures, seen on the posterior and middle cranial fossa; The posterior fossa showed a horizontal fracture running around the whole length of the lower portion of the occipital bone extending upwards to the floor of the temporal fossa (middle) on both sides; another fracture on the posterior fossa was seen on the right half, running forwards near the middle of this area, reaching the lower margin of the foramen magnum. The horizontal fracture caused a tear of the branches of the middle meningeal arteries on both sides.

Brain - showed massive blood clot accumulation covering almost the entire surfaces of both cerebral hemispheres and cerebellar lobes. The bleedings were mainly subdural in character, coming from torn meningeal vessels.

Neck - showed no fracture/dislocation or any other abnormality of other structures.

Chest - Heart - flabby and pale. Section of the chamber showed a well defined thrombus, wedged at the opening of the right atrioventricular valve (Tricuspid). None was noted in the pulmonary trunk.

Lungs - Both lungs were edematous and congested. No disease noted or any evidence of trauma.

Note: Chest wall - Showed small oval, greyish green haematoma, about 1 inch in diameter (about 4) arranged in a linear manner on the lower region of the right chest close to the costal arch.

Abdomen - abdominal pelvic organs showed no apparent abnormality or injury.

Extremities - The left upper limb, showed an oval abrasion/contusion, about 3 1/2 inches long, 3 inches wide seen over the medial half of the elbow region.

The right knee - showed contusion/abrasion. (None was noted on the left knee. No fracture of any long or short bones of the limbs noted.)

In my opinion death had taken place about 21 Hours

previously and the cause of death was:-

|  |   | Approximate interval between onset and death |        |      |       |
|--|---|--|--------|------|-------|
|  |   | Years  | Months | Days | Hours |
| I. DIRECT CAUSE-   |   |  |        |      |       |
| Disease or condition directly leading to death   | (a) Massive (Subdural) Cerebral Haemorrhage & Intracardiac Thrombus.                      |  |        |      |       |
| ANTECEDENT CAUSES-   |   |  |        |      |       |
| Morbid conditions, if any, giving rise to the above cause, stating the underlying condition last                   | (b) Torn meningeal vessels (due to)   |  |        |      |       |
|  | (c) Basal skull fractures - most probably due to a fall with head hitting a hard surface. |  |        |      |       |
| II. Other significant conditions contributing to the death but not relating to the disease or condition causing it |   |  |        |      |       |

DATED at Wollongong the 21<sup>st</sup> day of February, 1986

"Diploma should be added."

To the District Coroner,

(Signature) Vincent Verzosa  
Sovt. Medical officer