



OFFICE OF CHIEF MEDICAL EXAMINER
CITY OF NEW YORK



REPORT OF AUTOPSY

Name of Decedent: Jeffrey Edward Epstein

M.E. #: M-19-019432

Autopsy Performed by: [REDACTED]

Date of Autopsy: 08/11/2019

FINAL DIAGNOSES:

- I. HANGING:
 - A. LIGATURE FURROW OF NECK
 - B. PETECHIAL HEMORRHAGES OF BILATERAL PALPEBRAL CONJUNCTIVAE AND OF ORAL MUCOSA
 - C. CONFLUENT HEMORRHAGES OF RIGHT BULBAR CONJUNCTIVA
 - D. PLETHORA OF FACE AND HEAD WITH PETECHIAL HEMORRHAGES OF FACE
 - E. FRACTURES OF BILATERAL THYROID CARTILAGE CORNUAE AND LEFT HYOID CORNUA WITH ACCOMPANYING SOFT TISSUE HEMORRHAGES
 1. SEE ANTHROPOLOGY REPORT
 - F. RESUSCITATION ATTEMPTED
 1. ABRASIONS OF MOUTH
 2. ANTERIOR PARASTERNAL RIB FRACTURES
 3. HEPATIC LACERATION WITH THIN HEMOPERITONEUM
- II. ABRASIONS OF LEFT FOREARM
- III. CUTANEOUS CONTUSIONS OF WRISTS
- IV. SUBCUTANEOUS HEMORRHAGE OF LEFT DELTOID MUSCLE
- V. HYPERTENSIVE AND ATHEROSCLEROTIC CARDIOVASCULAR DISEASE
 - A. CARDIAC HYPERTROPHY (440 GM)
 - B. LEFT VENTRICLE HYPERTROPHY (1.9 CM)
 - C. RENAL ARTERIOLAR SCLEROSIS
 - D. SLIGHT CORONARY ATHEROSCLEROSIS
 - E. SLIGHT TO MODERATE AORTIC ATHEROSCLEROSIS
- VI. HEPATIC STEATOSIS (2480 GM)
- VII. CERVICAL LYMPHADENOPATHY
- VIII. REMOTE FRACTURE OF RIGHT FIRST RIB
- IX. REMOTE APPENDECTOMY (DATE AND INDICATION UNKNOWN)
- X. SEE TOXICOLOGY REPORT
- XI. SEE NEUROPATHOLOGY REPORT



CAUSE OF DEATH:

HANGING

MANNER OF DEATH:

SUICIDE (HANGED SELF)

New York City Office of Chief Medical Examiner
I certify the attached are true copies of
document(s) in OCME's possession.

Signed

Date

New York City Office of Child Medical Examiner
I certify the attached are true copies of
document(s) in OCM's possession.

Richard
J. Morris
Date

OFFICE OF CHIEF MEDICAL EXAMINER
CITY OF NEW YORK

REPORT OF AUTOPSY

CASE NO. M-19-019432

I hereby certify that [REDACTED] M.D., City Medical Examiner - II, have performed an autopsy on the body of Jeffrey Edward Epstein, on the 11 of August 2019, commencing at 9:21 AM in the Manhattan Mortuary of the Office of Chief Medical Examiner of the City of New York.

EXTERNAL EXAMINATION:

The body is received in a sealed, labeled, plastic body bag (seal #152384). The body is of a well-developed, thin, muscular, light skinned, 5'10", 196 lb man whose appearance is consistent with the given age of 66 years. The scalp hair is wavy, predominantly grey with interspersed dark hairs, has slight male pattern balding, and measures up to 3". The facial hair is cleanly shaven. The eyes have light irides. The oral cavity has intact teeth in good repair. The tongue is free of natural disease. The finger and toenails are well groomed and free of polish. Striae are on the shoulders. The genitalia are atraumatic and of a normal, circumcised man. The anus is atraumatic.

POSTMORTEM CHANGES:

There is moderate, symmetric rigor mortis of the upper and lower extremities and the jaw. Lividity is fixed, purple, and unevenly distributed on the posterior surfaces of the body. The body is cool.

SCARS:

On the back of the left shoulder is an oblique, 1-1/2", well healed, linear scar. On the right lower quadrant of the abdomen is an oblique, 2", well healed, linear appendectomy scar.

THERAPEUTIC PROCEDURES:

An endotracheal tube is in the mouth, extending into the upper airway. On the lips are multiple, focal, red abrasions. A cervical collar encircles the neck. Electrocardiogram electrodes are on the torso. An intravascular catheter is in the left antecubital fossa. An intraosseous line is in the right shin. A blood pressure cuff encircles the upper, right arm. On the chest between the nipples is a 3" x 3", irregular, yellow abrasion. Internally, there are minimally hemorrhagic, parasternal, rib fractures of right ribs #4-6 and left ribs # 5-6, approximately 60 ml of liquid blood thinly coating the serosal

THE UNITED STATES OF AMERICA

DEPARTMENT OF JUSTICE

MEMORANDUM

TO : THE ATTORNEY GENERAL

FROM : THE DEPARTMENT OF JUSTICE

SUBJECT: [Illegible]

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surfaces of the intra-abdominal organs, and an oblique, 6.5 cm laceration of the liver to the left of the falciform ligament (artifacts of resuscitative chest compressions).

CLOTHING:

The body is received clad in a hospital gown.

INJURIES, EXTERNAL AND INTERNAL:

These injuries are described in reference to standard anatomic planes. These injuries are grouped and labeled for descriptive purposes only; no sequence is implied.

A. HANGING:

There is a depressed, focally dried and abraded, noncircumferential ligature furrow of the neck that peaks slightly on both sides of the neck, more steeply on the right side than on the left. On the right side of the neck, the furrow bifurcates anterior to the ear, with one arm that peaks behind the right ear and one arm that extends to the right side of the back of the neck. On the back of the right side of the neck at the end of the lower arm of the furrow is a 1/2" x 1", irregular, red abrasion. The furrow ranges from 13-3/4" to 15" long (measured from both ends of the furrow on the right), and ranges from 1/8" to 1/2" wide. Anteriorly, the furrow passes over the thyroid cartilage. On the upper edge of the right side of the furrow beneath the chin is an adjacent, 3/4 x 1", inverted V-shaped, linear abrasion that ranges in width from 1/8" to 1/4". Beneath the left side of the mandible is a faint, 1/2" x 1-3/4", irregular, red abrasion with multiple, interspersed, deeper, red abrasions that measure up to 1/4 x 3/8".

The face and head are plethoric above the furrow, with petechial hemorrhages of the face that are most marked within the eyebrows. There are multiple, petechial hemorrhages of the palpebral conjunctivae of both eyes, and confluent hemorrhages on the periphery of the right bulbar conjunctiva. There are faint petechial hemorrhages on the mucosal surfaces of the upper and lower lips.

Within the parenchyma of the tongue are multiple, focal, spotty, purple hemorrhages. There is diffuse, purple hemorrhage at the base of the tongue. There are no hemorrhages of the anterior strap muscles of the neck. Posteriorly, there is a single hemorrhage in the left, deep, paraspinal muscles.

Both thyroid cartilage cornuae are fractured, and the left cornua of the hyoid bone is fractured, all with accompanying soft tissue hemorrhages. See also "Anthropology Report." There are no fractures of the cervical vertebrae.

B. OTHER INJURIES:

On the back of the left forearm is an oblique, 1", linear, red, abrasion with an adjacent, 1/2" x 1-1/4", faint, red abrasion. On the medial aspect of the back of the right wrist is a 1/8" x 1/2", faint, red contusion, and on the medial aspect of the back of the left wrist is a

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similar, $\frac{1}{2} \times \frac{3}{4}$ ", faint, red contusion. Internally, there is a deep muscle hemorrhage of the left deltoid muscle.

INTERNAL EXAMINATION:

HEAD: The scalp is without contusion or laceration. The skull is without fracture. There is no epidural, subdural or subarachnoid hemorrhage. The brain weighs 1520 gm. The brain, spinal cord, and dura mater are submitted for neuropathologic evaluation.

NECK: See "Injuries."

BODY HABITUS: The abdominal pannus is 1-1/4" thick. The body mass index is 27.

BODY CAVITIES: The pleural and pericardial cavities are free of abnormal fluid accumulations or adhesions. See also "Therapeutic Procedures."

CARDIOVASCULAR SYSTEM: The heart weighs 440 gm and has a normal distribution of right dominant coronary arteries with slight atherosclerosis (left main and left circumflex arteries, no stenoses; left anterior descending artery, multiple, focal, less than 50% stenoses; right coronary artery, multiple, focal, less than 50 to 60% stenoses). The myocardium is brown and diffusely fibrous. There is no focal fibrosis, hemorrhage, or pallor. The free wall of the left ventricle and the interventricular septum are each 1.9 cm thick, and the free wall of the right ventricle is 0.5 cm thick. The four valves and endocardial surfaces are unremarkable. The pulmonary vessels and the venae cavae are free of thrombus and embolus. The aorta has moderate atherosclerosis.

RESPIRATORY SYSTEM: The right lung weighs 560 gm and the left weighs 510 gm. Both lungs have spongy, maroon and pink parenchyma that is free of masses. The distribution of bronchi and vasculature are unremarkable. The bronchi are empty.

LIVER, GALLBLADDER, PANCREAS: The liver weighs 2480 gm and has soft, brown parenchyma. The gallbladder is unremarkable and contains approximately 30 ml of brown bile without stones. The pancreas is tan, lobular, and free of hemorrhage and mineralization.

HEMIC AND LYMPHATIC SYSTEMS: The spleen weighs 270 gm and has an intact, purple capsule and an unremarkable distribution of red and white pulp. There are multiple, enlarged, cervical lymph nodes, measuring up to 1.5 cm in greatest dimension. The remainder of the lymph nodes is unremarkable. There is no thymus. The bone marrow is unremarkable.

GENITOURINARY SYSTEM: The right kidney weighs 180 gm and the left weighs 160 gm. Both kidneys have granular, brown surfaces and otherwise unremarkable architecture and vasculature. The ureters maintain uniform caliber into an unremarkable

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bladder that contains approximately 5 ml of cloudy, yellow urine. The prostate is slightly and diffusely enlarged, with marked enlargement of the verumontanum. The testes are unremarkable.

ENDOCRINE SYSTEM: The pituitary, thyroid, and adrenal glands are unremarkable.

DIGESTIVE SYSTEM: The esophagus and gastroesophageal junction are unremarkable. The stomach contains approximately 5 ml of opaque, brown fluid without recognizable food or pills. The gastric mucosa is unremarkable. The small intestine and large intestines and rectum are unremarkable. The vermiform appendix is surgically absent.

MUSCULOSKELETAL SYSTEM: See "Therapeutic Procedures." On the anterior, inner surface of the right, first rib is a slightly displaced, healed, fracture callus. The vertebrae, clavicles, remainder of ribs, and pelvis are without fracture. The musculature is well developed and normally distributed.

MICROSCOPIC DESCRIPTIONS:

Tissue or Organ x # of fragments and/or levels (#= slide ID number)

Histology # HT19-003396

HEART x 2 (#2): Myocardial and perivascular fibrosis. Slightly hypertrophied myocytes.

LUNG x 5 (#3,4): Slight patchy emphysema.

LIVER x 1 (#1): Steatosis involving approximately 50% of hepatic parenchyma. Slight periportal fibrosis. Marked congestion.

KIDNEY x 1 (#1): Arteriolar sclerosis. Congestion.

TESTES x 2 (#5,6): No pathologic abnormality.

TONGUE x 1 (#7): Intramuscular and fascial hemorrhages consisting of intact erythrocytes.

MUSCLE ADJACENT TO HYOID BONE x 1 (#8): Intramuscular and fascial hemorrhages consisting of intact erythrocytes.

LEFT POSTERIOR NECK MUSCLE x 1 (#9): Intramuscular and fascial hemorrhages consisting of intact erythrocytes.

