

Name: Huling III, Walter
Date of Birth: 05/24/1994
Date and Time of Pronouncement: 11/24/2025; 1930 Hours
Date, Time, Place of Autopsy: 11/26/2025; 0700 Hours
Pathologist: Daniel Lingamfelter, D.O.

Autopsy Report # 2025-2082
Age: 31 years
Identified by: Douglas County Coroner
Douglas County Coroner's Office
Authorized by: Douglas County Coroner

OPINION

DIAGNOSIS:

- I. Multiple blunt force injuries:
 - A. Frontal craniocerebral pulverization.
 - B. Generalized cerebral cortical contusions.
 - C. Subarachnoid and subdural hemorrhages.
 - D. Left frontotemporal subscalpular/subgaleal hemorrhages.
 - E. Lacerations of pericardium, right lung, and liver.
 - F. Bilateral pulmonary contusions.
 - G. Bilateral hemothoraces (1050 mL combined) and bilateral renal pallor.
 - H. Bilateral clavicle fractures and multiple bilateral rib fractures.
 - I. Bilateral femoral fractures.
- II. Methamphetamine and ethanol present in postmortem blood (BAC = 0.230 g/100 mL).
- III. History that the deceased was a driver involved in a motor vehicle crash (see related case numbers 2025-2078 through 2025-2081).

TOXICOLOGY:

Cannabinoids, cavity blood	Presump Pos
Ethanol, cavity blood	230 mg/dL
Caffeine, cavity blood	Presump Pos
Amphetamine, cavity blood	20 ng/mL
Methamphetamine, cavity blood	25 ng/mL
Carboxyhemoglobin, cavity blood	2%

Huling III, Walter
2025-2082

OPINION: It is my opinion that Walter Huling III, a 31-year-old Black male, died as a result of multiple blunt force injuries.

MANNER OF DEATH: Accident

A handwritten signature in black ink, reading "Daniel Lutzamfelter, D.O.", is written over a horizontal line.

Forensic Pathologist
December 12, 2025

GROSS EXAMINATION:
GENERAL EXAMINATION

The body is that of a normally-developed, well-nourished, adult Black male who weighs 142 lbs, is 68 inches in length, and appears compatible with the reported age of 31 years. A Douglas County Coroner identification band is around the right ankle.

The body is received clad in two white socks, a pair of black jeans, a pair of blue underwear, and a black short-sleeved shirt.

Multiple radiographic scans are examined, revealing multiple skull fractures, rib fractures, and bilateral femoral fractures.

A 2 ¼-inch fragment of skull in a biohazard bag accompanies the body.

EXTERNAL EXAMINATION

There is good preservation in the absence of embalming. Rigor mortis is fully developed in all extremities and the jaw. Lividity is indistinct. The deceased has black, shortly cropped scalp hair. The irides appear brown; the corneae are clear; and there are no petechiae of the bulbar or palpebral surfaces of the conjunctivae. The ears, nose, lips, and external auditory canals are unremarkable in uninjured areas. The mouth has natural teeth in good condition. The decedent has short black facial hair. The external genitalia and perineum are unremarkable.

The body surfaces bear dark ink tattoos including the peace sign, an angel, doves, and a gremlin.

Besides the evidence of injury to be described, the remainder of the external examination of the body is unremarkable.

EVIDENCE OF INJURY

MULTIPLE BLUNT FORCE INJURIES

I. Head and Neck:

Generalized dark pink-red facial abrasions and superficial facial lacerations are evident. A 3 ¼-inch full-thickness laceration extends down the mid frontal scalp, with marked underlying skull comminution. A 4 ½-inch left frontal scalp avulsion is present, exposing underlying skull fragmentation and hemorrhagic/pulverized brain matter. The lips are severely lacerated. A 1/8-inch laceration is on the upper chin.

Left frontotemporal subscalpular/subgaleal hemorrhages are present.

Generalized subarachnoid and subdural hemorrhages are identified. No epidural hemorrhage is present.

The frontal skull is comminuted.

Frontal cerebral pulverization is evident. Generalized cerebral cortical contusions are identified.

No external or internal injuries of the neck are identified. The prevertebral fascia is unremarkable, and no visible or palpable fractures of the cervical spine are present. The hyoid bone and larynx are intact. The tongue is normal.

II. Trunk:

The chest and abdomen are covered in dark pink-red abrasions and superficial lacerations. A 14-inch area of dark red abrasions is on the upper back. A 4-inch area of dark red abrasions covers the left shoulder.

The pericardium is lacerated. Bilateral pulmonary contusions are present. Scattered right pulmonary lacerations are identified. The right hepatic lobe bears multiple superficial lacerations. Bilateral renal pallor is noted.

The right and left pleural cavities contain 800 mL and 250 mL of frank blood, respectively. The lacerated pericardial cavity and the peritoneal cavity contain no abnormal collections of fluid.

Both clavicles are fractured. Posterior fractures of the right 1st through 6th ribs and left 1st through 5th ribs are identified.

III. Extremities:

The upper and lower extremities bear scattered dark pink-red abrasions, dark pink-gray contusions, and lacerations measuring up to 3 inches.

Closed, complete fractures of the femurs are palpated.

INTERNAL EXAMINATION

HEAD: The scalp is incised and retracted. The scalp, subscalpular area, and skull are unremarkable in uninjured areas. The cranial vault is opened revealing thin, tough, pliable dura. The cerebrospinal fluid is hemorrhagic. The brain weighs 1140 gm and the cerebral hemispheres, midbrain, and pons are symmetrical and grossly unremarkable in areas without injury. On cross-section of the brain parenchyma, there is no evidence of infection or tumor. The dura is stripped from the basilar skull. The cervical spinal column is stable upon internal palpation.

BODY: The body is opened with a Y-shaped incision. The organs occupy their usual positions and relationships. The body cavities are free of adhesions.

NECK: The airway is patent and there is no evidence of infection or tumor. The thyroid gland is unremarkable.

CARDIOVASCULAR SYSTEM: The intimal surface of the abdominal aorta is free of significant atherosclerosis. The heart weighs 360 gm. The epicardial and endocardial surfaces are smooth and glistening. The myocardium is uniformly firm and has a homogeneous, beefy-red appearance. A probe-patent foramen ovale is present. The cardiac valves are thin, delicate, and unremarkable. The coronary arteries are free of significant atherosclerosis.

LUNGS: The right lung weighs 290 gm and the left lung weighs 320 gm. The major bronchi are unremarkable. The pleural surfaces are smooth and glistening and have a purple-red appearance in uninjured areas. On cross-section, the parenchyma appears dark pink-purple in areas without injury. There are no pulmonary emboli.

GASTROINTESTINAL SYSTEM: The esophagus, stomach, small and large bowel, and appendix are unremarkable. The stomach contains approximately 200 mL of tan, partially digested food.

LIVER: The liver weighs 1390 gm. The capsule is smooth and glistening in uninjured areas. The parenchyma is light brown in areas without injury. The gallbladder contains 40 mL of yellow, viscid bile without calculi.

PANCREAS: Unremarkable.

ADRENAL GLANDS: Unremarkable.

SPLEEN: The spleen weighs 80 gm and the capsule is smooth and blue-gray. On cross-section, the parenchyma is unremarkable.

GENITOURINARY SYSTEM: Each kidney weighs 140 gm. The capsules strip with ease revealing smooth, pale cortical surfaces. On cross-section, the cortices exhibit well-demarcated corticomedullary junctions. The collecting systems, ureters, and bladder are unremarkable. The urinary bladder is empty. The prostate is unremarkable.