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FORENSIC PATHOLOGY LEGAL MEDICINE

January 14, 2000

SUPPLEMENTAL REPORT

Terry H. Gilbert, Esquire Friedman & Gilbert 1700 Standard Building 1370 Ontario Street Cleveland, Ohio 44113

RE: Marilyn R. Sheppard, Deceased

Dear Mr. Gilbert:

Pursuant to your request, I have reviewed the two reports that you recently sent to me in the case of Marilyn R. Sheppard, Deceased.

The first report was prepared by Mr. James T. Wentzel, who appears to be a photographer in the Cuyahoga County Coroner's Office. He examined five items, as follows:

- 1) The scar on the wrist of Mr. Richard Eberling -
 - Mr. Wentzel could not draw a conclusion, and could not rule out whether or not it came from a scratch, as Dr. Michael N. Sobel suggested, and with which opinion I agreed.
- 2) Computer analysis of the crime scene photographs for the purpose of bloodstain analysis -

This is not part of my report and is of no significance to my opinion.

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3) The wristwatch worn by Dr. Samuel H. Sheppard -

Mr. Wentzel feels that the watch was on Dr. Sheppard's wrist when he went outside to chase the assailant, and was apparently removed after the struggle on the beach. Yet, it was found in a green bag near the house. Mr. Wentzel does not explain this. I believe the watch was removed after Dr. Sheppard was first hit on the head in the house. In the description of the watch by Dr. Paul L. Kirk, he notes the watchband is damaged in such a way as if someone had ripped it off Dr. Sheppard's wrist. He feels this damage would not have occurred if Dr. Sheppard had himself removed the watch from his Dr. Kirk disagrees with Mr. Wentzel's interpretation as to the blood on the watch. feels that there were smears or contact blood on the watch, rather than splatter. I would agree as I believe another individual forcibly removed the watch from Dr. Sheppard's wrist, and either at that time, or sometime later, transferred blood onto the watch. Without proper blood typing, one cannot even say whose blood was on the watch.

4) The source of the blood "trail" through the Sheppard home -

Mr. Wentzel implies that only a blood-coated weapon could form drops like this. I disagree. If someone was cut on the wrist and their hand became coated by their own blood, it could drip in similar fashion. Mr. Wentzel tries to imply that Dr. Sobel's theory of copious bleeding from the wound means that blood was gushing out (i.e., an arterial bleed), but that is not correct. Copious bleeding can simply mean that blood continued to flow, not necessarily gush, from the wound and over the hand for a protracted period of time, allowing it to drip off. As far as I know, no analysis of the blood trail was ever made

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to determine if it could have been from Mrs. Sheppard.

5) The "weapon" imprint on the pillowcase -

Mr. Wentzel implies that it had to be from a weapon because he could reproduce it. If you take a can of paint and pour it onto a sheet of paper and repeat it 100 times, you would get 100 different pictures, so it is no wonder Mr. Wentzel could reproduce it. Only Dr. Samuel R. Gerber said it was a surgical instrument, but he could never produce one to match the shape. Also, the description Dr. Gerber made of Mrs. Sheppard's wounds was consistent with blunt force injury (i.e., ragged, contused lacerations). The photographs I now have are of poor quality. The wounds are not adequately shown to see the depth. A few tissue bridges appear to be present in some of them, again arguing against an injury inflicted by a sharp instrument.

The second report was prepared by an anthropologist, C. Owen Lovejoy, Ph.D., who attended the exhumation autopsy. He tried to recreate the wounds, using a skull, clay, enamel, and various implements. I disagree with his methodology because enamel and clay are not the equivalent of skin and soft tissues. Also, Dr. Lovejoy only produced limited blows (one or two) with any specific weapon before making a finding. It is clear from the photographs, and from Dr. Gerber's report, that there were at least 15 separate wounds to Mrs. Sheppard's scalp (not one or two). In his examination of the photographs from the original autopsy, Dr. Lovejoy saw "flaking" of the external cortex that exposed the diploe in two areas of the left parietal bone. He said a sharp instrument had to do this. I disagree. As stated above, the head wounds were due to blunt force injury. Also, I do not believe that this so-called "flaking" can only occur when a sharp instrument is used. Anything can happen when a bone is fractured, even separation of the outer table from the spongy bone, which can be

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characterized as "flaking". This is not representative of any specific force.

Very truly yours,

Cyrol H. Wecht, M.D., J.D.

CHW/mb