

Saint Louis
COUNTY
PUBLIC HEALTH

6059 N. Hanley Road
St. Louis, MO 63134
<http://www.stlouis-co.com>

Office of the Medical Examiner

Office: 314-615-0800
Fax: 314-522-0865
TTY: 314-615-8428

Holland, Grace A

2020-6219
Exam Case

Post-Mortem Examination

Name of Deceased: Holland, Grace A
Date/Time of Medical Examiner Notification: 7/22/2020 7:25:38 AM
Date/Time of Pathologist's Examination: 07/25/2020 11:30 AM
Date/Time of Pronounced Death: 7/22/2020 5:23:00 AM
Race: White
Sex: Female
Age: 35 Years
Date of Birth: 9/23/1984
Investigator: Lindsay Trammell
Pathologist: Michael Graham, M.D.
Depth of Investigation (Investigator): Telephone Only
Depth of Investigation (Pathologist): Partial Autopsy
Police Agency: Creve Coeur Police Department (Complaint No.: 20-1158)

External Examination: The body is that of a well-developed well-nourished Caucasian woman whose appearance is consistent with the stated age. The body is 63 inches long and weighs 104 pounds. The body is generally well-preserved. There is some green discoloration of the right lower abdomen. Rigor mortis is well developed. Livor mortis is posterior in distribution and is fixed. The contours of the chest, back and abdomen are unremarkable. There is a 120 mm horizontal surgical scar across the pubic area. The neck is unremarkable. The extremities are normally formed. The scalp hair is black and worn long. The skin and soft tissues of the orbits are unremarkable. The conjunctivae and sclerae are unremarkable. The irides are brown. The nose contains blood. The lips, cheeks, gums, oral cavity and dentition are unremarkable. The ears are pierced. The breasts are unremarkable. The genitalia is unremarkable. No lymphadenopathy is identified.

Injuries: There is a penetrating gunshot wound of the head. The entrance is in the anterior left temporal scalp (9 cm left of the anterior midline, 5.3 cm above the mastoid tip). The entry site is a 10 mm round hole having slightly lacerated edges. The entry hole is surrounded by a 35 x 30 mm area of superficial abrasions and erythema. Soot is present within the initial portion of the wound track. The wound track is rightward and slightly backward. The bullet passed through the scalp, posterior lateral left frontal bone (internal beveling), brain (left frontal lobe, brainstem, tentorial surface of the right temporal lobe) to strike and fracture the right temporal bone and come to rest on the surface of the right side of tentorium (bullet

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recovered). The gunshot is associated with fractures of the skull. There are a few brown contusions 5-30 x 20 mm on the lateral aspect of the right thigh. A 65 x 22 red-brown with yellow contusion is present on the proximal anteromedial right thigh.

May Case MD
Michael A. Graham, MD
Assistant Medical Examiner

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Narrative Report

On Wednesday, July 22, 2020, at 7:25am, I received a call from Detective K Schneider DSN 1014 with the Creve Coeur Police Department reporting the apparent suicide (by gunshot) death of Grace A HOLLAND who was pronounced on this date at her residence located at 623 Fairways Circle, 63141.

Per Det. Schneider, HOLLAND was a 35 year-old white female. She resided at the above address with her fiancé, Robert Daus (herein referred to as "Robert"). HOLLAND has reportedly been depressed in the last few days after a second miscarriage. She and Robert also had recent discussion about how he no longer wanted to attempt to get pregnant and have children.

This morning, HOLLAND came to the living room to give Robert a hug and she went back into the bedroom without speaking with him. Shortly after, Robert heard a single gunshot and located HOLLAND in the bedroom with a gun and apparent blood beneath her head. Emergency services were contacted at 5:10am. HOLLAND was pronounced at 5:23am by members of the Creve Coeur Fire Department.

Det. Schneider advised that HOLLAND was located supine on the bedroom floor, with her hands across her abdomen. HOLLAND was clad in pajama pants and a t-shirt. Her head was turned to the left and a single circular defect was observed to the right side of her head. HOLLAND had not moved or manipulated to look for additional trauma. The weapon was a semi-automatic gun and was "near her right hand" to the right of her body. The weapon had not yet been seized and secured by law enforcement. No casings or projectiles had been located as at this time. No suicide note was discovered on scene.

Det. Schneider indicated their agency had no reason to believe the death was anything other than suicide; however, Robert was at their station currently being questioned per protocol. No other next-of-kin information is known at the time of the call.

I advised Det. Schneider that HOLLAND would need to be conveyed to the St. Louis County Medical Examiner's Office for a forensic examination and requested a return call once HOLLAND had been moved and more information about the weapon and potential trauma was known.

Lonning Mortuary was contacted at 7:38am to arrange for transportation of HOLLAND.

At 9:00am, I received a follow-up call from Detective Schneider. He advised the weapon had been secured and was a .380 caliber Glock 42. The casing failed to eject ("stovepipe" malfunction). There was a second apparent circular defect to the left side of HOLLAND's head but no projectile was located in the bedroom. No obvious holes or defects were observed in the floor or wall near HOLLAND.

No forensic pathologist has been advised of the above details pending case assignment.

A copy of the Creve Coeur Police report 20-1158 will be requested at a future date.

Any additional information will be added in the usual supplementary manner.



Lindsay Trammell
Medicolegal Investigator

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Summary Sheet:

Age: 35 Years

Race: White

Sex: Female

Findings:

- I. Gunshot wound of head
 - A. Entrance, anterior left temple (contact)
 - 1. Track rightward, slightly backward
 - 2. Track via scalp, skull, brain to strike the right temporal bone and come to rest on the right tentorium
 - a. Skull, fractures

Cause of Death:

Immediate Cause: Gunshot wound of head (handgun)

Due to (b):

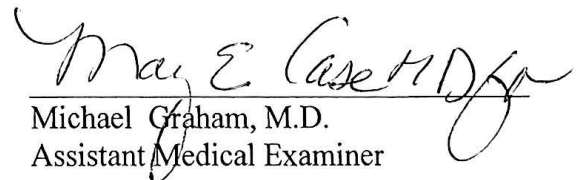
Due to (c):

Due to (d):

Other Significant Conditions: Acute ethanol intoxication

Other Condition (2):

Manner of Death: Suicide


Michael Graham, M.D.
Assistant Medical Examiner



SLUCare
Physician Group

St. Louis University Forensic Toxicology Laboratory

Report of Forensic Toxicology Analysis

Client:	St. Louis County MEO	Name:	Holland, Grace
Requested by:	Michael Graham	DOB:	09/23/1984
Client Case Number:	2020-6219	Gender:	
SLU Tox Number:	2020-1731	Report Issued:	8/19/2020
Request Number:	0001		
Specimens Received:	07/27/2020 8:09 am		

POSITIVE RESULTS

Specimen	Compound	Result	Units	Analytic Method
001.003	Ethanol	141	mg/dL	GC-FID
001.004	Ethanol	143	mg/dL	GC-FID

SLUTOX ID	Specimen Description	Comment
001.001	Blood 30mL Plain bottle heart	
001.002	Urine 20mL Plain bottle	
001.003	Blood 3mL Gray top tube heart	
001.004	Vitreous 1.5mL Red top tube	

Report Certified By:

Sarah Riley, PHD, DABCC, DABTC, Director

Reference Comments:

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Director: Sarah B. Riley, Ph.D., DABCC

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Ethanol (ethyl alcohol, alcohol) is primarily a social drug and is rarely used in therapeutics. It can be administered intravenously to patients poisoned by methanol or ethylene glycol to prevent conversion to toxic metabolites. It is present as an endogenous substance on blood at an average level of 0.00015 g/dL. Ethanol is transformed into acetaldehyde and then to acetic acid by liver enzymes. The range of blood alcohol concentrations in 94 fatal cases was 0.18-0.60 g/dL.

Specimen Source	Analysis Performed
001.001	1009: QTOF, Blood 1075: Drug Screen, Immunoassay
001.002	1075: Drug Screen, Immunoassay 2009: QTOF, Urine
001.003	1002: Blood Alcohol and Volatile Substances
001.004	3002: Vitreous Alcohol and Volatile Substances

Additional Comments:

Other than the above findings, examination of the specimen(s) submitted did not reveal any positive findings of toxicological significance by procedures outlined in the accompanying Analytic Summary and Reporting Limits.

*Specimen weights and volumes are approximate.

Confirmed Present: Compound was identified by two distinct methods, in multiple specimens, or by repeat analysis in accordance with American Board of Forensic Toxicology standards.

Detected: Compound was detected in a single specimen by one analytical method. Additional testing may be necessary for forensic confirmation. Please contact the laboratory for assistance with additional testing.

All analyses were performed under chain of custody. The chain of custody documentation is maintained at St. Louis University Forensic Toxicology Laboratory.

The remainder of the specimens submitted for analysis are scheduled for disposal twenty-four (24) months from the date of this report unless alternative arrangements are made for extended storage.

The data generated in the determination of the results contained in this report are kept on file at St. Louis University Forensic Toxicology Laboratory.

Analytic Summary and Reporting Limits:

Requested analysis: Toxicology Analysis

All of the following tests were performed for this case. For each test, the compounds listed were included in the scope.

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1002: Blood Alcohol and Volatile Substances

Quantitative measurement of ethanol (ethyl alcohol), methanol (methyl alcohol), isopropanol (isopropyl alcohol), and acetone in blood by Headspace Gas Chromatography-Flame Ionization Detection.
Qualitative Analysis of difluoroethane and chloroform.

Compound	Reporting Limit
Ethanol	20 mg/dL
Methanol	20 mg/dL
Isopropanol	20 mg/dL
Acetone	20 mg/dL
Difluoroethane	
Chloroform	

3002: Vitreous Alcohol and Volatile Substances

Quantitative measurement of ethanol (ethyl alcohol), methanol (methyl alcohol), isopropanol (isopropyl alcohol), and acetone in vitreous fluid by Headspace Gas Chromatography-Flame Ionization Detection.
Qualitative Analysis of difluoroethane and chloroform.

Compound	Reporting Limit
Ethanol	20 mg/dL
Methanol	20 mg/dL
Isopropanol	20 mg/dL
Acetone	20 mg/dL
Difluoroethane	
Chloroform	

1009: QTOF, Blood

Drug Screen by High Performance Liquid Chromatography/Time of Flight-Mass Spectrometry

The following is a general list of compound classes included in this screen. The detection of any specific analyte is concentration-dependent. Note, not all known analytes in each specified compound class are included, and some specific analytes outside of these classes are also included. Please contact the St. Louis University Forensic Toxicology Laboratory for a detailed list of all analytes.

Amphetamines, anticonvulsants, antidepressants, antihistamines, antipsychotic agents, benzodiazepines, CNS stimulants, cocaine and metabolites, hallucinogens, hypnotosedatives, hypoglycemic, muscle relaxants, non-steroidal anti-inflammatory agents, opiates and opioids.

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2009: QTOF, Urine**Drug Screen by High Performance Liquid Chromatography/Time of Flight-Mass Spectrometry**

The following is a general list of compound classes included in this screen. The detection of any specific analyte is concentration-dependent. Note, not all known analytes in each specified compound class are included, and some specific analytes outside of these classes are also included. Please contact the St. Louis University Forensic Toxicology Laboratory for a detailed list of all analytes.

Amphetamines, anticonvulsants, antidepressants, antihistamines, antipsychotic agents, benzodiazepines, CNS stimulants, cocaine and metabolites, hallucinogens, hypnotosedatives, hypoglycemic, muscle relaxants, non-steroidal anti-inflammatory agents, opiates and opioids.

1075: Drug Screen, Immunoassay

Qualitative detection of drug classes by immunoassay. Positive results are preliminary and must be confirmed.

Drug Class	Method	Reporting Limit
Barbiturates	EMIT	200 ng/mL
Marijuana (THC)	EMIT	20 ng/mL

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