Office of Hamilton County

ME15-194

Alledical Axaminer
3202 AMNICOLA HIGHWAY • CHATTANOOGA, TN 37406
OFFICE: 423-493-5175 • FAX: 423-493-5176

RW15-343

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REPORT OF INVESTIGATION BY COUNTY MEDICAL EXAMINER

DECEDENT	TONY		STEWA		RECTOR				
номе	Pirst Name	First Name Middle Name Last Name							
ADDRESS									
		AGE: 51 DOB:	00.40.4004	,	DATEOFD	EATH: 12-29-2015			
TYPE OF DEATH:		Casualty Suicide [nly when in appar		Found Dead			
(Check one only)		Suspicious, unusual or unnau		remation 🔲					
Comment Beate		11							
If Motor Vehicle Acci	Ü	′	Pedestri	an T Unk	nown		***************************************		
Notification by				nvestigating Agen					
900	DDY DAISY, TN		••		CHATTANOC	GA, TN			
Address									
DESCRIPTION OF	BODY: Clothed	^ ······	Partly Clothed	— ,	cised Yes 🔲 N	(e v	lidzidarnas		
Eyes Blue			Mustache		Beard	<u>Ø</u>			
Weight 123	Length_	() () Inches	Body Temp		Date and	Time 12/30/15@ 0900			
Pound	Rigor: Yes	***************************************			pls Fixe	,			
Marks and Wounds									
					(3)	()			
					شكتسر	<u> </u>			
						(1) (1			
			5	ex B-1		71 /1"//			
		***************************************		3	/// .	11 (1) ~ (h)	١		
					1/1:	·/// /// ` ///	\		
<u></u>					41 Y	113411	4.1		
				·····	W \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\ m m \ \ \ \	₩		
					11	1 / 1			
BODY EXAMINATI	ION BY: SCC/K	MAL	•		\ \	/ \			
TOXICOLOGY	No	Yes			\	Me			
	PROBABLE CAU	JSE OF DEATH			لياليا				
multiple blue					W V				
•		V	-	MANNER OF DEATH DISPOSITION OF CASE					
			-	(Check one only)		1. Not a medical examiner case			
				Accident [Natural	2. Autopsy Yes No No Pathologist			
				Suicide Homicide	Unknown Pending	Pathologist	_		
hereby declare the	u after receiving n	otice of death described i				quiries regarding the cause of deat	h in		
accordance with Sec	ction 38-7-101 thro	ugh 38-7-116 Tennessee (Code Annotat	ed; and that the	information co	ntained herein regarding such dea	th is		
rue and correct to t	, ,	-				St. 10 ml			
/2	/30/15	HAMIL County of Ap				Signature of County Medical Examiner			
	A STATE OF THE PARTY OF THE PAR					James K. Metcalfe, M.D.			
FUNERAL HOME_		TE .	····			Steven C. Cogswell, M.D.			

Domes	DNAL HISTOR	r marital	icide attempts conflicts ployment	Fina	Suicide the ncial or business disease		Dpecify)_	Socia		itude and skills with firear	ms, chemicals, etc. Legal difficulties	
	UCT BEFORE		: Efforts to prev			forts to ob	-	_		icide attempt: Admitted ther (specify) N/A	Denied 🗆	
LAST SEEN ALIVE		INJURY OR II	LNESS	DEATH		DISCOVERY		MEDICAL EXAMINER OFFICE NOTIFIED		VIEW OF BODY		
DATE					12-29-15		12	12-29-15		12-29-15	300.41 (400.62)	
TIME	ie i						1000			1040	, , , , , , , , , , , , , , , , , , , ,	
INJURY ILLNES	OR ONSET OF			LOCAT	TION / ADDRESS				TYPE	of premises (Hospital, H	OTEL, HIGHWAY, ETC.)	
DEATH		11600 HOLLY CIR. S			ODDY DAISY 37379				CEMETERY			
VIEWING OF BODY BY MEDICAL EXAMINER HCFC							FC					
MEDICAL ATTENTION AND HOSPITAL OR INST								NSTITUT	TITUTIONAL CARE			
	NAM	E OF PH	YSICIAN OR INSTI	TUTION						ADDRESS		
	-	***************************************				į						
MEDIC	AL HISTORY	ASS	SAULT - D	OA		L	•					
				***************************************	CIRCUMS	TANCES	OF DE	ATH	***************************************			
				. N	AME					ADDRESS		
FOUND DEAD BY J. WORLEY												
LAST SEEN ALIVE BY										77. 49.2		
WITNESS TO INJURY OR LT. N			T. MIKE SNEED - SDPD				C# 15-028456					
-	RANSPORTED		HCEMS ME	DIC 1	2 TO FC	***************************************	I# 15-032527					
			CIRCUMSTANC a gravel roa				emete	ery in Sc	oddy I	Daisy.		
Deced	ent appeare	ed to b	e the victim o	of an as	sault that o	ccurred	at and	ther loc	ation			
SDPD	Ļt. M. Snee	ed is le	ading the inv	estigati	on.							
Body t	ransported	to the	FC for follow	up exa	mination.							
					C. C			73.842.844				

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	W. T.								.,,,			
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Roger Wilkey, D-ABMDI MEDICAL INVESTIGATOR

Marks and scars: None apparent ____ (PT) professional tattoo (AT) amateur tattoo (X) needle puncture (V) IV site (O) EKG pad (D) Defibrillator pad (III) abrasion (#) contusion (I) laceration (FX) fracture