Exhibit 1



COLLIN COUNTY

Office of the Medical Examiner 700B Wilmeth Road McKinney, Texas 75069 (972) 424-1460 • (972) 548-3775 Fax (972) 548-3760



Case No: CC-1648-13

Name: OSBORNE, Matthew Wade

Date and time of pronouncement: June 28, 2013; 9:54 AM

Pronounced at: 3901 West 15th St. Plano, Texas

Age: 55 Race: White Sex: Male

Date and time of examination: June 29, 2013; 12:15 PM

Examination performed at: Collin County Medical Examiner's Office McKinney, Texas

AUTOPSY REPORT

EXTERNAL EXAMINATION: The body is identified by tags. Photographs and fingerprints are taken.

The body is received wearing dark blue sweatpants, which are rolled up above the knees, and a hospital gown. A silvery metal watch is around the left wrist. A blue cloth Crown Royal flask holder is with the body.

The body is that of a normally developed white male which appears consistent with the recorded age of 55 years. It measures approximately 72 inches (183 cm) in length, weighs 246 pounds (111.6 kg), and appears of stocky build. There is good preservation in the absence of embalming. Posterior slightly blanching lividity and partial rigidity are present. The body is cool subsequent to refrigeration.

The scalp has mild frontal receding and thinning, with an otherwise average amount of short straight gray and dark hair. A full short beard and mustache is present with dark hair and some gray at the edges. Abundant body hair is present. The left ear is pierced once. The corneas are clear, the irides are brown with arcus senilis, and the conjunctivae are unremarkable. The mouth has upper dentures and natural lower teeth with some missing. The neck, chest, abdomen, and back show no evidence of disease. The extremities show skin changes below the knees with patches of purple



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mottled skin which is slightly hard and scaly. The genitalia are those of a normal circumcised adult male.

IDENTIFYING MARKS AND SCARS: The lateral right arm has a large tattoo of a tree with roots. The lateral left arm has a multicolored tattoo of a skull with ornate hair. The back of the right forearm has wings with a cross and a word. The forehead has multiple linear and slightly irregular haphazardly arranged scars up to approximately 1 ½ inch long. The right anterior forearm and wrist has a vertical 4 inch linear scar. A similar 3 inch linear scar is on the left anterior forearm and wrist. The left arm just above the antecubital area has 3 irregular ½ inch scars. A vertical curvilinear 5 inch long scar is on the anteromedial aspect of the left knee.

EVIDENCE OF TREATMENT:

- EKG pads.

Defibrillator pads.Oral endotracheal tube.

- Right antecubital intravenous catheter. - Pulse oximeter on the right third finger.
- Intraosseous catheter, anterior right leg.
 Identification band with "Romeo, Male" around the left wrist with an adjacent EZ-IO

- Bag with labeled hospital blood tubes received with the body.

- Hospital chart with name and number corresponding to the ID band and tubes

EVIDENCE OF INJURY: None present.

INTERNAL EXAMINATION:

HEAD: The scalp, subscalpular area, and skull are unremarkable. No epidural, subdural, or subarachnoid hemorrhage is present. The cerebral hemispheres are symmetrical with a normal gyral pattern. The cerebellum and brainstem are externally unremarkable. The blood vessels show no abnormalities. Sections through the cerebrum, cerebellum, and brainstem are unremarkable. The brain weighs 1720 grams.

NECK: The soft tissues in the anterior neck are unremarkable. The hyoid bone and laryngeal cartilages are intact. The upper airways are clear. The proximal esophagus and paravertebral soft tissues are unremarkable.

SEROUS CAVITIES: The pleural, pericardial and peritoneal cavities are free of abnormal accumulations of fluid. All surfaces are smooth and glistening.

CARDIOVASCULAR SYSTEM: The heart is 710 grams and appears both globally enlarged and with disportionate left ventricular hypertrophy. The epicardial surface has an average amount of fat. The coronary arteries show a right dominant distribution with approximately 90% atherosclerotic narrowing of the right, 80% of the left anterior descending, and no significant atherosclerosis of the left circumflex coronary artery. There are no intracoronary thrombi. The atrial and ventricular septa are intact and the



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foramen ovale is closed. The cardiac valves show no abnormalities. The chambers are not dilated. The heart show symmetrical left ventricular hypertrophy with a wall thickness of 2.0 cm without the papillary muscles. The myocardium is firm, red-brown, and uniform. The aorta has a normal course with moderate abdominal atherosclerosis.

RESPIRATORY SYSTEM: The right lung is 760 grams and the left lung is 680 grams. The pleural surfaces are smooth and glistening. The airways are clear and the pulmonary vessels contain no thromboemboli. The sectioned surfaces show diffuse edema and congestion with no focal lesions.

GASTROINTESTINAL SYSTEM: The distal esophagus is smooth and gray-tan. The stomach contains approximately 100 mL of thick slightly lumpy gray-green material with no pills or capsules. The mucosa is unremarkable. The small and large intestines are externally unremarkable. The appendix is present. The pancreas is tan and uniform.

HEPATOBILIARY SYSTEM: The liver is 2420 grams. It has a smooth glistening capsule and normal contours. The parenchyma is red-brown and uniform. The gallbladder contains 30 mL of bile with no calculi.

LYMPHORECTICULAR SYSTEM: The spleen is 250 grams and is unremarkable externally. The sectioned surfaces show no abnormalities. No lymph node abnormalities are noted.

GENITOURINARY SYSTEM: The right kidney is 220 grams and the left kidney is 230 grams. The capsules strip with ease revealing smooth surfaces. The cut surfaces are unremarkable, as are the collecting systems, ureters, and bladder. The urinary bladder contains 230 measured mL of urine and has a normal mucosal surface. The prostate gland is not enlarged or nodular.

ENDOCRINE SYSTEM: The thyroid gland and adrenal glands are unremarkable externally and upon sectioning.

OTHER: No fractures are identified in the clavicles, ribs, sternum, vertebral column or pelvis. The skeletal muscles are unremarkable. The anterior abdominal wall fat is 1 ½ inch in maximum thickness. The tongue has no contusions or other abnormalities.



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FINDINGS:

1. Toxicology (results below) positive for high levels of the opiates morphine and hydrocodone.

2. Arteriosclerotic and hypertensive cardiovascular disease

a. Severe atherosclerotic narrowing of right coronary and left anterior descending coronary arteries (90 and 80% respectively)

b. Cardiomegaly (710 grams) with global and left ventricular hypertrophy

c. Moderate abdominal aortic atherosclerosis

CONCLUSION: I am of the opinion that Matthew Wade Osborne, a 55 year old white man, died as a result of toxic effects of opiates. Another significant and contributory factor was arteriosclerotic and hypertensive cardiovascular disease. Investigative information is consistent with his death being an accident related to drug abuse.

MANNER OF DEATH: Accident

HOSPITAL BLOOD TOXICOLOGY (Collected 6/28/13 at 9:51 AM): Caffeine - Positive Cotinine - Positive Theobromine - Positive Alprazolam - 16 ng/mL Morphine - Free - 81 ng/mL 6-Monoacetyl morphine - None detected Hydrocodone - Free - 79 ng/mL Dihydrocodeine/Hydrocodol - Free 16 ng/mL Alcohols and acetone - None detected

URINE:

Morphine - Free - >500 ng/mL 6-Monoacetyl morphine - None detected

> Valospetowan Sheila D. Spotswood, M.D.

Assistant County Medical Examiner

SDS/mw