

1 MR. FOGLEMAN: No, it's DeGuglielmo.

2 MR. CROW: But if we ask Lisa what she found,
3 she's not going to talk about the tee shirt?

4 MR. FOGLEMAN: I'll try to remember -- well,
5 Kermit's the one --

6 MR. CROW: I'm talking about the wrong person.

7 MR. FOGLEMAN: I'll make myself a note to mention
8 it to Kermit.

9 MR. DAVIS: One thing on Doctor Peretti's
10 testimony is we anticipate he'll identify the
11 photographs, introduce the photographs of all three
12 boys first and then ask him to go before the jury and
13 take the first case, Michael Moore, present the
14 photographs, explain it to the jury, then exhibit
15 those photographs to the jury and let them view those
16 photographs while he gets his reports ready for the
17 next one. Then after they view those photographs,
18 take up Steve Branch and do the same thing and then
19 Chris Byers.

20 THE COURT: All right.

21 (RETURN TO OPEN COURT)

22 DOCTOR FRANK PERETTI

23 having been first duly sworn to speak the truth, the whole truth
24 and nothing but the truth, then testified as follows:

25 DIRECT EXAMINATION

1 BY MR. DAVIS:

2 Q Will you please state your name and occupation?

3 A Doctor Frank Peretti. P-E-R-E-T-T-I. Associate Medical
4 Examiner for the State of Arkansas.

5 Q Could you briefly explain what the Associate Medical
6 Examiner for the State of Arkansas does?

7 A I'm a forensic pathologist. I perform medical legal
8 autopsies for the State of Arkansas to determine cause and
9 manner of death.

10 Q Could you briefly tell us about your education, training,
11 background and experience that qualifies you to be the Associate
12 Medical Examiner for the State of Arkansas?

13 A I graduated from medical school in 1984. I began my
14 training in anatomical pathology at Brown University in
15 Providence, Rhode Island, from 1985 to 1988.

16 After completion of my training in anatomical pathology, I
17 went to the office of the Medical Examiner in Baltimore,
18 Maryland, where I did a subspecialty or a fellowship training in
19 forensic pathology. I completed that in 1989.

20 Upon completion of my fellowship training, I was on the
21 staff of the office of the Chief Medical Examiner performing
22 medical legal autopsies for the State of Maryland, and I left
23 Maryland in August of 1992 to come to Arkansas.

24 Q Is one of the primary functions of the Medical Examiner to
25 perform autopsies on individuals?

1 A Yes, it is.

2 Q We would submit Doctor Peretti as an expert in the field of
3 forensic pathology.

4 THE COURT: Do you want to take him any further
5 on voir dire?

6 MR. STIDHAM: No, your Honor.

7 THE COURT: All right. You may proceed.

8 BY MR. DAVIS:

9 Q Doctor, before I go into the specifics of this case, could
10 you tell the ladies and gentlemen of the jury what your job
11 requires in the terms of findings you make when you perform an
12 autopsy -- what you're required to do and what you look for when
13 you perform an autopsy.

14 A What we do is on any body that is brought into the Crime
15 Lab -- we take as is photographs of the person as they come in
16 and take their height and weight.

17 After we document the body, we clean the body up, remove
18 the clothing, any evidence on the body and document it. We then
19 subsequently take clean photographs of the body cleaned up.

20 After that is completed and before we begin the external
21 examination. Depending on the type of case we have; for
22 example, if it's a gunshot case, we do a gunshot residue kit.
23 If it's a rape, we do a rape kit. We focus in on the type of
24 case it is to get evidence off the body.

25 Then what we do is we do an external examination where we

1 note the general features of the body, the height and weight,
2 color of the hair, color of the eyes, any injuries or unusual
3 features situated on the external aspect of the body.

4 After that has been completed and documented, we proceed
5 with the internal examination where we examine the structures of
6 the neck, the chest, the abdomen and the head. During that
7 time, we look for any natural disease or injury. We also at
8 that time take specimens for toxicology to determine the
9 presence of drugs or alcohol in body fluids. We take blood. We
10 take urine if it's available. We take the vitreous humor. That
11 is the fluid behind the eyeball.

12 After that's completed, I issue a death certificate stating
13 the cause and manner of death, and I generate an autopsy report
14 for criminal and civil use.

15 Q Doctor, when you say you issue a death certificate that
16 tells the cause and manner of death, when you say, "cause of
17 death," what do you mean?

18 A There are many different causes of death. For instance,
19 people die of a heart attack or cancer or multiple gunshot
20 wounds, multiple stab wounds or multiple injuries.

21 Q And when you say, "manner of death," what do you mean by
22 that?

23 A Manner of death means the way the person sustained those
24 injuries. Is it natural, is it an accident, is it homicide,
25 suicide or is it undetermined.

1 Q Doctor, I'd like to turn your attention back to May 7th of
2 1993. On that date did you have an occasion to perform
3 autopsies on the bodies of Michael Moore, Steve Branch and Chris
4 Byers?

5 A Yes, I did.

6 Q Did you follow the procedure in that case that you have
7 outlined to the jury as customary?

8 A Yes, I did.

9 Q Are there photographs taken when you perform an autopsy?

10 A Yes, sir.

11 Q What is the reason for taking those photographs?

12 A To document the injuries.

13 Q Doctor, what I would like to do is show you a number of
14 exhibits that have been previously marked. (HANDING) I show you
15 photographs numbered 59A, 62A, 61A, 63A, 64A, 71A, 70A, 67A,
16 69A, 72A, 73A, 65A and 66A and ask if you could look at these
17 photographs and identify those for us, please, sir?

18 A (EXAMINING) Yes. Photographs 59A through 73A are the
19 photographs labeled 329 of Michael Moore.

20 Q Are those photographs taken at the Crime Lab or in your
21 office during the course of the autopsy?

22 A Yes, they are.

23 Q Would those photographs assist you in explaining what the
24 physical findings were when you performed the autopsy?

25 A Yes, they will.

1 Q Do they accurately depict the body of Michael Moore at the
2 time you performed the autopsy?

3 A Yes, they do.

4 MR. DAVIS: Your Honor, we would move for the
5 introduction of those State's exhibits which have
6 previously been read out which are the photographs of
7 Michael Moore.

8 THE COURT: They may be received subject to the
9 rulings of the Court previously.

10 (STATE'S EXHIBITS 59A, 61A, 62A, 63A, 64A, 65A,
11 66A, 67A, 69A, 70A, 71A, 72A, AND 73A ARE RECEIVED IN EVIDENCE)

12 BY MR. DAVIS:

13 Q (HANDING) I'd also like to show you what have been marked
14 photographs 71B, 72B, 73B, 70B, 61B, 62B, 63B, 64B, 65B, 59B,
15 66B, 67B, 68B, 69B and 60B which are a packet of photographs and
16 would ask if you could identify those for us?

17 A (EXAMINING) Yes, I can. These are the photographs of Steve
18 Branch.

19 Q Do those photographs accurately depict the condition of the
20 body of Steve Branch on the day you performed the autopsy?

21 A Yes, they do.

22 Q Would those photographs be beneficial to you and assist you
23 in explaining your findings based on the conducting of the
24 autopsy?

25 A Yes, they would.

1 MR. DAVIS: Your Honor, at this time we would
2 move for the introduction of those photographs which
3 have previously been identified.

4 THE COURT: They'll be received subject to the
5 previous rulings of the Court.

6 (STATE'S EXHIBITS 59B, 60B, 61B, 62B, 63B, 64B,
7 65B, 66B, 67B, 68B, 69B, 70B, 71B, 72B, AND 73B ARE RECEIVED IN
8 EVIDENCE)

9 BY MR. DAVIS:

10 Q (HANDING) Last, Doctor. I have photographs which have been
11 marked as 59C, 64C, 63C, 68C, 67C, 66C, 62C, 71C, 70C, 69C, 61C,
12 65C and 72C and ask if you can look at those photographs and if
13 you can identify those for us?

14 A (EXAMINING) Yes. These are the photographs of Chris
15 Byers.

16 Q Were those photographs taken at the Crime Lab at the time
17 of this autopsy?

18 A Yes.

19 Q Do those photographs accurately depict the condition of the
20 body at the time the autopsy was performed?

21 A Yes, they do.

22 Q Would they be beneficial to you in explaining to the jury
23 your findings as a result of that autopsy?

24 A Yes, they would.

25 MR. DAVIS: Your Honor, at this time we would

1 move for the introduction of those previously listed
2 photographs into evidence.

3 THE COURT: They may be received subject to the
4 previous rulings of the Court.

5 (STATE'S EXHIBITS 59C, 61C, 62C, 63C, 64C, 65C,
6 66C, 67C, 68C, 69C, 70C, 71C, AND 72C ARE RECEIVED IN EVIDENCE)

7 BY MR. DAVIS:

8 Q Doctor, if I could, let me ask you -- do you have a
9 numbering system that you use in order to ensure that you know
10 the person that you are performing the autopsy on and also to
11 identify your reports and photographs?

12 A Yes, sir, I do.

13 Q Was there a number assigned to the case of Michael Moore?

14 A Yes.

15 Q What number was that?

16 A 329-93.

17 Q Do you have a copy of your autopsy report from that
18 particular autopsy?

19 A Yes, I do.

20 MR. DAVIS: Your Honor, may Doctor Peretti refer
21 to that report during the course of his testimony?

22 THE COURT: Yes.

23 MR. DAVIS: Your Honor, at this time I would ask
24 that Doctor Peretti be allowed to step out of the
25 witness box so that he can in the course of his

1 explanation to the jury of his findings that he be
2 allowed to show the photographs and use the
3 photographs in that explanation.

4 THE COURT: All right. That will be permitted.

5 BY MR. DAVIS:

6 Q Doctor, your autopsy report regarding Michael Moore -- does
7 it reflect the size, height and weight of Michael Moore at the
8 time you performed this autopsy?

9 A Yes, it does.

10 Q What does it reflect?

11 A Body weight was fifty-five pounds and forty-nine and
12 one-half inches in height.

13 Q Was the body bound in a particular fashion at the time of
14 the autopsy?

15 A Yes.

16 Q Could you describe that for us, please?

17 A The body was bound in a hog-tied fashion with shoelaces.
18 The wrists were bound to the ankles bilaterally with black
19 shoelaces on both sides.

20 Q Okay, and when you say, "bilaterally," was the right wrist
21 bound to the right ankle and the left wrist bound to the left
22 ankle?

23 A Yes. That's correct.

24 Q If you would, start -- based on your autopsy report -- is
25 the first thing listed a notation of the general description of

1 the injuries?

2 A Yes.

3 Q Could you describe for the jury what injuries you found
4 upon your visual examination of Michael Moore?

5 A Well, there were multiple injuries. We have head injuries.
6 We have neck, chest and abdominal injuries. We have lower
7 extremity injuries and back injuries, upper extremity injuries,
8 and injuries to the inside of the body plus evidence of
9 submersion. And I have them in order -- and I will describe --
10 I will start with the head first.

11 Q Doctor, if you would, when using those photographs identify
12 them by exhibit number and also you may need to move up and down
13 in front of the jury box so they can see the photographs. If
14 you would, describe those head injuries and using the
15 photographs depict those to the jury.

16 A State's Exhibit 59A, 62A, 61A, and 63A will demonstrate the
17 head injuries and some of the chest injuries. State's Exhibit
18 59A shows a laceration over the left forehead region and also we
19 can see an abrasion. When I say, "abrasion," I'm going to use
20 the term abrasion, which is a scrape or scratch and contusion
21 means a bruise. In layman's term, black and blue.

22 On the left side we can see a laceration and also we can
23 see an abrasion on the right side of the forehead.

24 State's Exhibit 62A is a view of the head showing the left
25 side and the hair. We can see --

1 Q Doctor, excuse me. Was the hair shaved back so that that
2 could be photographed?

3 A Yes, I shaved the hair. Here we can see three impact
4 points on the scalp. There are three separate scalp lacerations
5 surrounded by abrasions and contusions surrounding the wound.

6 Above the eyebrow we have an abrasion immediately adjacent
7 to the eyebrow, or a scrape. And also on this photograph we can
8 see the bruise or contusion noted below the left eye -- this
9 dark discoloration here.

10 On State's Exhibit 61A we have two abrasions or scrapes on
11 the top of the head that are ovoid. We have two separate impact
12 sites here.

13 Q Doctor, I noticed that the injuries depicted in Exhibit 61A
14 are different than those that appear in the previous Exhibit
15 62A. Can you explain to the ladies and gentlemen of the jury
16 based on your experience and expertise why we have different
17 type injuries?

18 A Well, we have two different instruments -- ah, weapons
19 being used to inflict these type of injuries.

20 Q What type of instrument would you expect to be used or a
21 general description of the type instrument that would inflict
22 the injury in 61A?

23 A On 61A we are looking for an object with a broad surface --
24 wide surface area.

25 Q Would that be consistent with, say, a log approximately two

1 to three or three to four inches in diameter?

2 A An object of that nature is consistent with inflicting
3 these type injuries.

4 Q The injuries you see depicted in 62A you said would be
5 inflicted by a different type weapon. What could have caused
6 that or what type instrument would you expect --

7 A Well, this one has different characteristics than the
8 previously shown wound. Here we have lacerations or in layman's
9 term, "cuts" on the scalp. Some are irregular, some are
10 straight and some have a stellate appearance.

11 In these type of injuries here would indicate an object of
12 smaller diameter, such as a piece of wood, a two-by-four, a
13 stick or broom handle are capable of inflicting these type of
14 injuries here.

15 Q Something about the size of a broom handle?

16 A Yes.

17 Q Doctor, if you would, continue with the next photograph.

18 A State's Exhibit 64A is showing abrasions, contusions, or
19 bruising behind the ear and some scattered abrasions that were
20 under the scalp on the left side. This dark discoloration here
21 is a bruising behind the ear. You can see this little area here
22 -- this discoloration. This is an abrasion or scrape behind the
23 ear. And also we can see in the hairline an abrasion or scrape.

24 State's Exhibit 71A is showing a similar abrasion on the
25 back of the neck.

1 State's Exhibit 70A is a photograph of the back of the
2 shoulder showing an abrasion and contusion or bruising.

3 State's Exhibit 67A is a photograph of the bindings and the
4 anal region.

5 Q Did -- Doctor, did you make any findings regarding the
6 examination of the anal area regarding dilation?

7 A Yes. There was anal dilatation.

8 Q That means a loosening or slackening of the muscles
9 surrounding the anal area?

10 A That's correct.

11 Q Was there also a purple or -- are there some abrasions on
12 the buttocks?

13 A You can see some abrasions, scrapes and the postmortem
14 lividity. This red discoloration is the postmortem lividity or
15 the settling out of the blood vessels after death.

16 69A is a photograph of the anal orifice. Here we can see
17 abrasions and the focal areas of contusion and lividity.

18 State's Exhibits 72A and 73A show the front and back of the
19 hands showing there's a few abrasions, but what I'm trying to
20 point out here is the "washerwoman" wrinkling of the hands
21 showing that the bodies have been in the water. That's the
22 wrinkling.

23 Q Doctor, you may need to refer to your report. I'm not sure
24 it is clearly shown in the photographs. Did you also find on
25 the hands some what are referred to in your report as defense

1 type wounds?

2 A Page five. Yes. On the right -- this part of the anatomy
3 here I found some cuts, a one-inch cut. There are also some
4 very small lacerations which are about one-eighth of an inch
5 each. On the back of the left hand there was a three-quarter
6 inch scratch. A one-sixteenth inch abrasion was present on the
7 left thumb.

8 Q When you characterize these as defense type wounds, what do
9 you mean by that?

10 A The type of injuries that we normally see when people are
11 trying to defend themselves.

12 Q Do you normally see those injuries to the hands as you've
13 described here?

14 A You can see them to the hands, the forearms, also the legs,
15 the feet, depending on the situation.

16 Q The "washerwoman" wrinkling that you refer to, what does
17 that indicate?

18 A That indicates that the bodies were in water and there's
19 evidence of submersion.

20 Q Doctor, if you could refer to the next photograph?

21 A The next photograph, State's Exhibit 65A and 66A, show the
22 mucosal surface or the inner aspect of the lips -- the upper lip
23 and lower lip respectively. And also the nose. Here on the
24 nose we can see some abrasions or scrapes. Here on the upper
25 lip we can see some cuts, contusions, and edema or swelling.

1 That is 65A.

2 Q Doctor, does that also reflect what you refer to as
3 punctate scratches of the nose?

4 A Yes, sir.

5 Q What are those?

6 A Innumerable, very small scratches or abrasions situated on
7 the entire nose.

8 State's Exhibit 66A is also showing the nose where you can
9 see the abrasions and scrapes and the lower lip where you can
10 see the bruising. The dark discoloration is the bruise.

11 Q Doctor, in your experience as a Medical Examiner, when you
12 see injuries to the ears and injuries to the inside surface of
13 the mouth, what does that indicate to you in a person that is
14 eight years old and has died this type of death?

15 A There's a number of possibilities, but commonly when we see
16 the ears are contused on both sides or bruised with overlying
17 fine linear scratches --

18 MR. CROW: Your Honor, I'm going to object. Can
19 we approach the bench?

20 (THE FOLLOWING CONFERENCE WAS HELD AT THE BENCH
21 OUT OF THE HEARING OF THE JURY)

22 MR. DAVIS: I may need to reformulate my question
23 as to background --

24 MR. CROW: He states -- in the first place
25 there's a background problem. In the second place he

1 states there's a number of possibilities.

2 MR. STIDHAM: The witness shouldn't be allowed to
3 speculate, your Honor.

4 THE COURT: Rephrase your question. I think that
5 probably is overbroad.

6 (RETURN TO OPEN COURT)

7 BY MR. DAVIS:

8 Q Let me ask you, have you seen in your past experience as a
9 Medical Examiner, have you seen similar injuries to the ears of
10 children?

11 A Yes, I have.

12 Q In those cases were they frequently also accompanied by
13 injuries to the inside of the child's mouth?

14 A Yes, they were.

15 Q Based on your past experience, expertise and training, do
16 those type injuries indicate to you based on your expertise and
17 training a particular type trauma that has occurred to cause
18 those injuries?

19 A In my practice these type of injuries I have seen in
20 children that are held by the ears who are forced to perform
21 oral sex. They can also be due to putting the hand over the
22 mouth causing the injuries to the mucosal surface of the lips or
23 they can be by someone grabbing someone by the ear and is
24 pulling them.

25 Q There were injuries consistent with that found in the

1 autopsy of Michael Moore. Is that correct?

2 A That's correct.

3 Q Your report at the end has a list of what is called
4 "Pathologic Diagnoses." Is that kind of a general rundown in
5 what you found in your autopsy?

6 A Yes. It is a summary of the anatomical findings.

7 Q Could you go over that for us and explain a rundown of all
8 the injuries and items you found based on your examination of
9 Michael Moore?

10 A The head injuries consisted of multiple facial abrasions,
11 or scrapes, and contusions, or bruises. He had multiple
12 abrasions and contusions of the lips. He had multiple scalp
13 lacerations and contusions or bruising of the scalp. Multifocal
14 subgaleal contusions and edema of the subgalea. When we do an
15 autopsy, we make an incision and reflect the scalp back -- that
16 is the underlying surface of the scalp -- and we can see from
17 the inside out. There we had edema and swelling and multiple
18 contusions and bruises.

19 We also had multiple fractures of the calvarium and the
20 base of the skull -- the calvarium is the top of the skull --
21 and the base of the skull, or the bottom of the skull. There
22 were multiple fractures there. Associated with these fractures
23 we had subarachnoid hemorrhage involving the brain. We had
24 contusions or bruises involving the brain. Those were the head
25 injuries.

1 Then the other injuries we had, we had the bindings of the
2 wrists and ankles in a hog-tied fashion. We had multiple
3 contusions, abrasions, and lacerations of the torso and
4 extremities. We had defense type injuries to the hands.

5 We had anal dilatation and hyperemia of the anal/rectal
6 mucosa. We had evidence of drowning. This was the
7 "washerwoman" wrinkling of the hands and feet. We had petechial
8 hemorrhages -- small punctate hemorrhages -- on the heart, lungs
9 and thymus. We had pulmonary edema and congestion when your
10 lungs get full of water and we had water in the sphenoid sinus.
11 There was no evidence of disease present and we found signs of
12 terminal aspiration of gastric contents.

13 Q The items you mentioned, the evidence of drowning, what was
14 the cause of death of Michael Moore?

15 A Cause of death of Michael Moore was multiple injuries with
16 drowning.

17 Q The head injuries that you describe -- the skull fractures,
18 injuries to the brain -- would they have caused his death
19 independently of the drowning?

20 A Yes, they would have.

21 Q In this particular case the drowning contributed to those
22 particular factors?

23 A Yes.

24 Q Let me just ask you, in the instance of each child did you
25 remove the bindings that they were tied with when you did your

1 autopsy?

2 A Yes.

3 Q Did you forward those items on to the other area of the
4 Crime Lab?

5 A Yes.

6 Q I'd like to show you what has been marked for
7 identification purposes as State's Exhibit 80 and ask you if
8 that has your name at the bottom indicating those are in fact
9 the ligatures you removed? (HANDING)

10 A (EXAMINING) Yes. That's my signature and initials.

11 Q Does it indicate which individual --

12 A Michael Moore.

13 MR. DAVIS: We move for the introduction of
14 State's Exhibit 80.

15 MR. STIDHAM: No objection.

16 THE COURT: It may be received without objection.
17 (STATE'S EXHIBIT 80 IS RECEIVED IN EVIDENCE)

18 BY MR. DAVIS:

19 Q I show you State's Exhibit 81 and ask if you can identify
20 that for us. (HANDING)

21 A (EXAMINING) State's Exhibit 81 is labeled, circled in blue
22 pen, "ligature from left and right wrist and legs," initialed by
23 me.

24 Q Which of the victims?

25 A Steve Branch.

1 MR. DAVIS: Move for the introduction of State's
2 Exhibit 81.

3 MR. CROW: No objection.

4 THE COURT: It may be received without objection.

5 (STATE'S EXHIBIT 81 IS RECEIVED IN EVIDENCE)

6 BY MR. DAVIS:

7 Q And what is marked State's Exhibit 82. I'd ask if you
8 could identify that for us, please? (HANDING)

9 A (EXAMINING) State's Exhibit 82 is a package labeled
10 "ligature from left and right wrist and right and left legs,"
11 initialed by me.

12 Q And this is in regard to Chris Byers?

13 A Yes, sir.

14 Q All these ligatures were sent to another area of the Crime
15 Lab for purposes of further analysis?

16 A Yes, sir.

17 MR. DAVIS: Your Honor, if we didn't I would move
18 for the introduction of State's Exhibit 82.

19 MR. CROW: No objection.

20 THE COURT: It may be received without
21 objection.

22 (STATE'S EXHIBIT 82 IS RECEIVED IN EVIDENCE)

23 BY MR. DAVIS:

24 Q What case number did you assign to your autopsy examination
25 of Steve Branch?

1 A 330-83.

2 Q Doctor, if you could, generally describe for the ladies and
3 gentlemen of the jury what injuries you found regarding Mr.
4 Branch?

5 A Mr. Branch we found to have had head injuries, chest
6 injuries, genital injuries, lower extremity injuries, upper
7 extremity injuries, and evidence of terminal submersion.

8 Q If you could, utilizing those photographs could you
9 describe for us the head injuries that you found regarding Steve
10 Branch?

11 A On Steve Branch what I found was multiple confluent
12 contusions and abrasions. We have multiple scattered abrasions
13 over the right eye. We have contusion in the right periorbital
14 region, the area generally right in here (INDICATING) or a black
15 eye. We have multiple scratches that were present on the right
16 mandible. Also we have on the right mandible a patterned
17 injury. An injury that has a pattern to it. It was bell-shaped
18 with an abrasion. We had a central area of pallor, an area of
19 clearing and scraping. The lips were abraded with multiple
20 lacerations and cuts. The inner aspects of the lips showed
21 multiple contusions, lacerations and hemorrhage. The gums were
22 extensively hemorrhagic.

23 Also, above and below the left eyebrow we have another
24 bell-shaped patterned abrasion with a small one-quarter inch
25 laceration in the immediate vicinity. Also, the left parietal

1 scalp showed multiple superficial cuts and abrasions. The
2 entire left ear was contused or bruised with overlying linear
3 scratches.

4 Q Doctor, if the photographs would help you describe those,
5 please feel free to use the photographs in your description.

6 A Before I show the photographs, I'd just like to explain so

7 --

8 Q Oh, okay.

9 A -- then I can point them out on the photographs because it
10 would be a lot easier.

11 The entire left side of the face in an area five and a half
12 by five inches showed multiple abrasions and scrapes, with
13 multiple gouging type irregular cutting wounds. These wounds
14 went from one-eighth of an inch to one and three-quarters of an
15 inch and terminated in the oral cavity.

16 State's Exhibit 71B is a photograph of the face showing the
17 abrasions and the gouging type wounds, cutting wounds. Also,
18 you can note on the top here you have the patterned abrasion.
19 It looks like a bell. It almost has the appearance of a belt
20 buckle.

21 State's Exhibit 72B is a photograph of the face showing the
22 abrasions, the gouging, cutting wounds and contusion and
23 bruising and the previously described superficial lacerations
24 and abrasions.

25 Q When you say those "multiple gouge wounds," are those

1 caused by an instrument different than the blunt object you
2 described and then the broom handle size object you described?

3 A Yes.

4 Q We are now talking about injuries caused by yet a third
5 weapon?

6 A Yes, sir. In here you can see the large openings in the
7 skin. Those are the gouging wounds. If you'll notice how
8 irregular they are. The skin has been pulled away, torn out.
9 The underlying soft tissue has been pulled away from the cheek.

10 State's Exhibit 73B is a close-up of those injuries and
11 here we can also see the depth of some of these gouging type
12 injuries, the injuries to the lips, and we can see the patterns
13 that I previously described on the neck.

14 State's Exhibit 70B shows the side of the face with the
15 black eye as I previously described, some abrasions and injuries
16 to the lips.

17 State's Exhibit 61B is a photograph of the back of the
18 skull showing a similar type injury that I showed you on Michael
19 Moore. The back of the head, a large abrasion.

20 Q That is the injury that you indicated in regard to Michael
21 Moore would be consistent with a three to four inch diameter
22 club or log?

23 A Yes. State's Exhibit 62B is showing some of the gouging
24 wounds on the face, showing the left ear, the contusions, the
25 scratches on the back of the left ear and some of the

1 superficial lacerations on the scalp.

2 State's Exhibit 63B is a photograph of the front of the ear
3 showing the contusions, the scrapes and the injuries involving
4 the ear.

5 Q Doctor, were the injuries to the ears of Steve Branch --
6 were they of the same nature and type as the kind you described
7 in regard to Michael Moore?

8 A Yes, they were.

9 Q Were there also injuries to the mouth and lips regarding
10 Steve Branch?

11 A Yes.

12 Q Would these be consistent -- as you indicated earlier based
13 on your experience -- would that be consistent in past cases
14 that you observed?

15 MR. CROW: Object again, your Honor.

16 THE COURT: I'll sustain your objection.

17 Rephrase your question. I think that's a little bit
18 broad.

19 BY MR. DAVIS:

20 Q Can you draw any findings from the injuries or can you give
21 us an opinion as to the cause of injuries when you have injuries
22 to the ears and injuries to the mouth and lips?

23 MR. CROW: Your Honor, we would object if he is
24 going to speak in the alternative of what it is going
25 to be.

1 THE COURT: Doctor, do you have an opinion as to
2 the cause of those injuries and if so, is that opinion
3 based upon a reasonable degree of medical certainty in
4 your experience and training in your field?

5 THE WITNESS: Yes, I have an opinion.

6 THE COURT: Is that opinion based upon your
7 training and education?

8 THE WITNESS: Yes.

9 MR. CROW: I understood what he said before was
10 alternate sources, alternate possibilities.

11 THE COURT: Well, I'm going to allow him to
12 testify as to what his opinion is.

13 BY THE WITNESS:

14 A Injuries noted to the ears can be caused by holding the
15 ears, pulling the ears. The injuries involving the lips could
16 be from having an object, any object inserted inside the mouth
17 or a hand placed over the mouth or a firm object placed over the
18 mouth. It could also be from a punch also or hit with a rock.
19 That is how you sustain those type of injuries.

20 Q Describe what additional injuries you found.

21 A There are injuries to the penis and the anus. The anus
22 showed dilatation and hyperemia of the anal mucosa.

23 Q When you say "hyperemia," Doctor, what do you mean by that?

24 A Redness of the mucosa. It is red. It is not the normal
25 coloration it should be.

1 Q Dilation would be enlargement?

2 A Of the orifice, yes.

3 Q In regard -- if you could refer to the exhibit numbers and
4 explain the additional injuries.

5 A Exhibits 64B and 65B are photographs of the penis. 65B
6 shows the mid-shaft of the penis and the head of the penis with
7 contusions, bruising and overlying scratches. This injury is --
8 you can see there is an area of demarcation of the involved area
9 and the uninvolved area. All this discoloration here is
10 bruising. There are fine scratches overlying the head of the
11 penis along with other focal areas of bruising.

12 Also, State's Exhibit 64B is the back of the penis showing
13 similar injuries and lines of demarcation between the involved
14 and noninvolved area.

15 Q Do you have an opinion as to what type of instrument or
16 what could have caused the bruising, lacerations and injuries
17 you have indicated to the penis?

18 A Well, these injuries could be from oral sex. They could be
19 from also a squeeze, a very tight squeeze. But also with the
20 clear band of demarcation between the involved and uninvolved
21 areas, an object could have been placed around the penis and
22 tightened very fast.

23 State's Exhibit 59B is an injury that was on the thigh, a
24 linear band. You have two linear bands here with an area of
25 pallor and abrasion.

1 State's Exhibit 66B is a photograph of the arm showing some
2 bruising inside the arm and some scratches.

3 Q In these autopsies are you able to tell the difference in a
4 wound that was inflicted before death and a wound that was
5 inflicted after the death?

6 A Some of the injuries we can tell.

7 Q Could you tell in regard to any of these three children
8 whether there were some wounds that were inflicted even after
9 death?

10 A Some of the wounds would be perimortem, around the time of
11 death, and postmortem, after death.

12 Q Using the remaining photographs, if you could explain your
13 findings.

14 A State's Exhibit 67B and 68B show -- on 67 it shows the
15 wrinkling of the hands. We can also see the abrasions from the
16 ligatures on the wrist.

17 State's Exhibit 68B shows a hand with an abrasion, with the
18 ligature abrasion and also Steve Branch had a cloth bracelet on
19 his wrist. It was left on the body so he could be buried with
20 it.

21 State's Exhibit 69B shows the multiple abrasions and
22 contusions and ligature injuries, the binding injuries on the
23 wrist.

24 And 60B shows an abrasion or scrape on the back of the
25 neck.

1270

1 Q You indicate in your report -- you have your pathological
2 diagnosis. You kind of generally go over what your primary
3 findings were regarding the injuries. Could you go over that
4 for us?

5 A Yes. We had multiple facial abrasions, contusions and
6 lacerations. We had subgaleal contusions and bruising
7 underneath the scalp. We also had multiple fractures to the
8 base of the skull. We also had hemorrhaging involving the brain
9 in association with the head injuries.

10 We have the bindings of the hands and feet. We have the
11 contusion of the penis with superficial overlying scratches and
12 dilatation of the anus, multiple contusions, abrasions and
13 lacerations of the torso and extremities.

14 And we had evidence of drowning consistent with the
15 wrinkling of the hands and feet, aspiration of water into the
16 sinuses, pulmonary edema and congestion. There was no evidence
17 of any natural disease which could have contributed to the
18 death, and there was evidence of terminal aspiration of gastric
19 contents.

20 Q Doctor, what is your opinion based on your experience and
21 expertise regarding the cause of death in this particular
22 situation?

23 A Mr. Branch died of multiple injuries with drowning.

24 (RECESS)

25

CONTINUED DIRECT EXAMINATION

1370

1 BY MR. DAVIS:

2 Q If you could, in reference to Steve Branch could you tell
3 us how tall he was and how much he weighed?

4 A He weighed 65 pounds and was 50 inches in height.

5 Q Four foot two and how much did he weigh?

6 A 65 pounds.

7 Q If you would, would you find your autopsy report on Chris
8 Byers?

9 A Yes, sir.

10 Q What number did you assign to that particular case?

11 A 331-93.

12 Q Could you step down from the witness box and with those
13 photographs that have previously been introduced -- could you
14 explain your findings regarding the autopsy?

15 A Here we have head injuries, neck injuries, genital and anal
16 injuries, injuries to the right leg, injuries to the left leg,
17 back injuries, injuries to the right arm and injuries to the
18 left arm.

19 His body was received nude, covered with dry mud and
20 leaves. There was wrinkling of the hands and feet also. The
21 hands were bound to the ankles behind the back in a hog-tied
22 fashion. Strands of hair-like material were found on the left
23 posterior thigh, on the back of the left thigh, and under the
24 bindings of the left ankle. The right wrist was bound to the
25 right ankle with a black shoelace. And the left wrist was bound

1 to the left ankle with a white shoelace.

2 The injuries, we have similar injuries. The right ear was
3 contused and abraded also. On the bridge of the nose there were
4 multiple abrasions. Situated between the upper lip and bridge
5 of the nose, a semi-lunar patterned abrasion. Abrasions were
6 present on the lips, and the mucosal surfaces of the lower lip
7 showed a five-sixteenths inch laceration. The frenulum -- that
8 is the little piece of soft tissue that when you lift up your
9 lips, it is right in the midline. That was bruised and
10 surrounded by a bruise measuring one-half inch. There were
11 multiple bite marks present on the mucosal surfaces of both left
12 and right sides of the cheek, in other words, inside the mouth.

13 Also, internally -- also, the left ear was contused with
14 multiple scratches. On the left parietal scalp region there was
15 a one and one-quarter inch laceration. When we did the autopsy,
16 we reflected the scalp. There was edema, swelling, and multiple
17 bruising. The calvarium, or the top of the skull, was not
18 fractured. However, the base of the skull was extensively
19 fractured like an eggshell. And also on the left posterior
20 medial cranial fossae -- the base of the brain is divided up
21 into regions. We have the interior region, the middle region,
22 and the posterior in the back. And on the back of the base of
23 the skull on the left side we had a one-quarter inch ovoid, or
24 round, fracture that was punched out into the brain, going into
25 the brain. The brain also showed multiple hemorrhage, and there

1 were associated fracture contusions. State's Exhibit --

2 Q Doctor, before you get started, how tall and how much did
3 Chris Byers weigh?

4 A Chris weighed 52 pounds and was 48 inches in height.

5 Q If you could using those photographs, explain your findings
6 to the jury?

7 A 59C is a close up of the face, showing contusions, black
8 eyes and abrasions on the nose. There is a pattern type injury
9 here.

10 State's Exhibit 64C shows the ear with the bruising and the
11 overlying scratches.

12 Q Would those scratches over the bruising -- would that be
13 consistent with fingernail scratches?

14 A Fingernails will cause these type of scratches, yes.

15 Here we can see the side of the face with scratches,
16 bruising of the ears, bruising of the eye. Here we have on the
17 back of the scalp with the lacerations, similar appearance of
18 the other two boys. Linear.

19 Q Doctor, that laceration would be more consistent with the
20 broom handle type weapon you referred to rather than the large
21 four inch club of some sort?

22 A Or a piece of two-by-four, piece of wood.

23 On State's Exhibit 67C and 66C these are the mucosal
24 surfaces of the lips and here is the frenulum which is bruised.
25 You can see the laceration of the lower lip.

1342

1 State's Exhibit 62C here we can see on the face we have
2 these other patterns. They are round and circular and indented
3 the skin.

4 Q Comparatively speaking, can you rate the severity of the
5 head injuries of Chris Byers? How did they compare with the
6 severity of the injuries to the other two boys?

7 A I think they were all equal in degree. Some may have a
8 little more injury, but basically the same types of injuries.

9 State's Exhibit 71C is the buttock region in here. There
10 was evidence of genital mutilation. This is the back, the anal
11 orifice, the multiple cutting wounds here on the anal orifice
12 and the perineum area, which is the area below the anal orifice.

13 Q Doctor, did you also make a finding that the anal and
14 rectal mucosa were hyperemic and injected?

15 A Yes.

16 Q Can you explain what that means?

17 A It was red, injected, some capillary dilatation there.

18 Q And there were signs of physical trauma as far as abrasions
19 and lacerations to the buttocks area and the area immediately
20 surrounding the anus, correct?

21 A There's cutting wounds and abrasions, yes.

22 State's Exhibit 70C is a close-up of the genital
23 mutilation. Here we have multiple gouging type injuries where
24 the skin has been pulled out. The skin overlying the shaft of
25 the penis was carved off. What you see here -- this red part

1 that is in the photograph -- that is the shaft of the penis
2 after the skin has been removed and you can see above -- the
3 scrotal sac and testes are missing. The whole genital area is
4 missing, especially the internal aspect of the shaft and penis.
5 Around these areas you can see the multiple gouging type wounds,
6 stab wounds and cutting wounds.

7 Q The gouge wounds and cutting wounds you referred to around
8 the genital area -- how did those -- in your opinion how would
9 those wounds have been inflicted -- what type of manner would
10 those have been inflicted?

11 A Well, it could be -- you see these type of irregular
12 gouging wounds. Not knowing the instrument, you can get these
13 type of wounds from a knife, piece of glass. Usually the knife
14 or the object is being twisted and the victim is moving to get
15 those irregular edges.

16 State's Exhibit 69C is a photograph showing the legs, the
17 area of the genital mutilation. You can see the binding
18 injuries of the left wrist but also here we can note on the top
19 of the thighs and inner aspect of the thighs we have multiple
20 contusion and bruising inside the thighs, and you can see that
21 here.

22 Q Doctor, what would cause that type of bruising?

23 A These type of injuries we normally see in female rape
24 victims when they are trying to spread the legs for penetration,
25 or they may be hit with an object also. It is a possibility.

1 State's Exhibit 65C is a close-up of the bruises inside the
2 thigh.

3 State's Exhibit 72C is a photograph -- I'm showing the back
4 of the anal region, the thighs, and the bruising situated on the
5 thighs and also on the back of the lower legs. Here you can see
6 all the bruising. There is some sort of pattern, two linear
7 bands of contusion in between here. And there is what is called
8 pallor which is uninvolved. That indicates an object such as a
9 piece of wood, a large object, was inflicted there -- struck
10 there to cause this type of injury. Also on -- you can see on
11 the back of the legs what we would classify as defense wounds,
12 too. Bruising on the back of the legs.

13 State's Exhibit 61C shows a small abrasion at the back of
14 the neck.

15 Q In regard to Chris Byers' autopsy did you find in him
16 injuries to the mouth and to the ears similar to what you found
17 with the other two?

18 A Yes, I did.

19 Q Would your opinion as to a cause of those injuries be the
20 same regarding this particular case?

21 A Yes.

22 MR. CROW: Your Honor, I make the same objection.

23 THE COURT: As to the general broad nature?

24 MR. CROW: Yes, sir.

25 THE COURT: Rephrase your question.

1215

1 BY MR. DAVIS:

2 Q Doctor, based on your experience, background and training
3 do you have an opinion as to the cause of the injuries where you
4 have ear injuries as you have described and injuries to the
5 mouth as you have described?

6 A Yes, I do.

7 Q What is that opinion?

8 A Those injuries you normally see on areas of children who
9 are forced to perform oral sex. You can get those types of
10 injuries from an object placed over the mouth, a firm object,
11 the hand or mouth. Some injuries -- the contusion to the lips,
12 the bruising, may be due to a punch.

13 Q The injuries that were around the genital area -- those
14 were inflicted by some sharp object such as a knife?

15 A A sharp object, yes.

16 Q The injuries to the head of Chris Byers -- were those
17 injuries inflicted by different type weapons?

18 A Yes, sir.

19 Q Which injury by what type of weapon?

20 A The injuries to the head were probably inflicted by an
21 object such as a piece of wood. Could be a large stone. The
22 injuries to the genital area were inflicted by an object such as
23 a knife or piece of glass.

24 Q The laceration to his head or the elongated injury -- was
25 that different than the injury to the back of his skull?

1 A Yes, that was different.

2 Q So would it be fair to say that at least three different
3 weapons -- one causing injury to the top of the head, one to the
4 back and one to the genital area?

5 A Yes.

6 Q Regarding Chris Byers what was your opinion based on your
7 examination, your experience and training as to the cause of
8 death of Chris Byers?

9 A That he died of multiple injuries.

10 Q And those multiple injuries being what?

11 A They consisted of the multiple facial contusions, abrasions
12 lacerations, the contusions and abrasions of the ears, the left
13 parietal scalp lacerations, the fracturing of the base of the
14 skull, the subarachnoid hemorrhage and contusions of the brain,
15 the abrasions that were situated in the front of the neck.

16 We have the genital mutilation with absence of the scrotal
17 sac, testes, skin and head of the penis with multiple
18 surrounding gouging and cutting wounds.

19 We also have the dilated anus, the bindings of the ankles
20 behind the back in hog-tied fashion, the multiple contusions,
21 abrasions, and lacerations of the torso and extremities,
22 terminal aspiration of gastric contents. There was no evidence
23 of disease which would have contributed to his death.

24 Q Any evidence regarding Chris Byers as to drowning?

25 A There was no evidence of drowning in Chris Byers.

1 Q Let me ask you some questions regarding who receives this
2 information that you put in your report after an autopsy is
3 performed. Where does your autopsy report go and who did you
4 send it to after May 7, 1993, when you performed that autopsy?

5 A What happens after we perform any autopsy, we send to the
6 investigating agencies and the coroner a cause of death form so
7 they know exactly what we found at the time of autopsy because a
8 lot of times the investigating agency may not have the time to
9 call us so we communicate with them in written response.

10 We do that with all cases. What I normally do if it is a
11 gunshot wound case, an automobile accident or suicide, I would
12 outline in generalities the type of injuries. If it was a
13 gunshot wound, I would say where the bullet was found.

14 But on this case here because of the intense media coverage
15 and phone calls, I issued a press statement and what I did was I
16 elected to send out the cause of death form just putting the
17 causes of death. I did not list any of the injuries on the
18 initial forms that I sent to the investigating agencies.

19 I sent the cause of death forms to Mr. Kent Hale, the
20 coroner, and Brent Davis, the prosecuting attorney. It goes to
21 the prosecuting attorney regardless if it is a natural -- they
22 will get a cause of death form so he knows what's going on in
23 his jurisdiction -- and the West Memphis Police Department.

24 Q And the initial sheet that you sent out is a one page sheet
25 just listing the cause of death?

1 A Yes.

2 Q And so in an effort to not reveal the specifics of the
3 injuries you made sure you didn't put those specifics in that
4 information, correct?

5 A I felt in the nature of the case and the publicity it was
6 receiving it was best not to divulge those injuries to the media
7 or even the prosecuting attorney.

8 Q And the reason -- with an on-going investigation, why would
9 that be important?

10 A Well, it would be important so it wouldn't be common
11 knowledge so people won't have something to talk about. People
12 in my experience tend to spread rumors about certain types of
13 cases so that on these particular cases here, that would
14 eliminate that. I thought it would be beneficial to keep the
15 communication with -- subsequently with the West Memphis Police
16 Department and Brent Davis and the prosecuting attorney's office
17 -- not give any information out to anyone else, at that time.
18 Subsequently as the investigation took place, I had meetings
19 with the police, the prosecuting attorney and defense counsel.

20 Q Doctor, would that also be for the purpose that only those
21 people who were there when the bodies were retrieved and those
22 who performed the autopsy in the Crime Lab and those who
23 received the autopsy report would know the specific nature --

24 MR. CROW: Object to leading, your Honor.

25 THE COURT: Avoid leading.

1 MR. DAVIS: I'll pass the witness, your Honor.

2 CROSS EXAMINATION

3 BY MR. STIDHAM:

4 Q Doctor Peretti, you don't have to be a pathologist or a
5 Medical Examiner to look at the bodies when they were recovered
6 to determine there were head injuries, injuries to their faces,
7 injuries to other parts of their body including the genital
8 mutilation. You don't have to be a pathologist to see those
9 things, do you?

10 A No, sir.

11 Q Those are obvious? That sounds like a silly question, but
12 it would be obvious to those who had been there and seen it?

13 A That's correct.

14 Q The injuries that you were describing to the victims' ears
15 -- you laid out some possibility about how that could have been
16 caused. Is there any evidence that it was definitely caused by
17 oral sex?

18 A I found no evidence of semen in the oral cavities.

19 Q Doctor Peretti, you talked about the victims' anal orifices
20 being dilated. Isn't it true that that could be caused by the
21 fact that the bodies were in water?

22 A That's correct.

23 Q Was there any evidence whatsoever to indicate that these
24 victims were sodomized or raped anally?

25 A No semen was detected in the anal orifice and canals.

1 Q Was there any evidence of trauma or lacerations or anything
2 of that nature?

3 A There were no injuries noted to the anal orifice or the
4 anal mucosa. The only thing I saw was the hyperemia or
5 reddening of the mucosa.

6 Q Isn't it true, Doctor, if someone were sodomized or raped
7 that you would expect to find these types of injuries?

8 A My experience dealing with the many children of rape I have
9 found anal trauma.

10 Q So you would expect to find that if the victim had been
11 sodomized?

12 A Yes.

13 Q Was there any indication that any of the victims were
14 choked?

15 A There were no -- although there was some abrasions or
16 scrapes on the neck region, there was no evidence of any type of
17 strangulation.

18 Q Doctor Peretti, if you were told that one of the victims
19 was choked -- specifically, victim Byers was choked with a big
20 old stick -- would you expect to find some evidence --
21 abrasions, bruising, a line of demarcation -- something
22 indicating a choking?

23 A I would expect to find a pattern of injuries on the neck
24 and underlying neck muscles.

25 Q Did you find any such patterns?

1 A No.

2 Q Did you find any such patterns on the victim Byers
3 specifically?

4 A No.

5 Q Was there any abrasions or injury to the strap muscles of
6 the neck?

7 A No.

8 Q Were there any fractures of the larynx or the -- how do you
9 say that --

10 A Hyoid bone. No.

11 Q Would you expect to find those had a victim been choked?

12 A You may not find fractures of the hyoid bone because in
13 young children it is difficult to fracture it, but I would
14 expect to find hemorrhage.

15 Q So does there appear to be any evidence of sodomy or
16 choking on any of these victims?

17 A No.

18 Q The most likely source of the dilation of the anus is
19 probably the water?

20 A You get dilatation from being in the water, postmortem
21 relaxation, or a small object such as a finger may have been
22 inserted into the anus, but more so decomposition.

23 REDIRECT EXAMINATION

24 BY MR. DAVIS:

25 Q When you indicate that there was no sign of semen in the

1 anal or oral cavities, all that indicates to you is there was no
2 ejaculation if there was a sexual assault, correct?

3 A That's correct.

4 Q There can be a sexual assault and that evidence does not
5 counter indicate --

6 MR. CROW: Object to leading, your Honor.

7 MR. DAVIS: I'll rephrase.

8 THE COURT: Rephrase your question.

9 BY MR. DAVIS:

10 Q The absence of semen does not rule out sexual assault?

11 A It indicates there was no ejaculation.

12 Q In this case -- if you would, refer to your autopsy report
13 on Chris Byers on page four of that report at the very top of
14 the page. Did you indicate in that report that "the anal
15 orifice was markedly dilated"?

16 A Yes. On Chris Byers it was markedly dilated.

17 Q When you say, "markedly," how is that different from the
18 other ones where you said it was dilated?

19 A It is dilated more than the others.

20 Q You also indicate that the "examination of the rectal and
21 anal mucosa showed them to be diffusely hyperemic"?

22 A Yes.

23 Q "And injected"?

24 A That's correct.

25 Q What does diffusely mean?

1 A I mean all over, involving the entire mucosa surface.

2 Q About five -- or four paragraphs down right before you get
3 to the injuries of the right leg, did you indicate there was
4 "scattered lineal abrasions present about the anal orifice"?

5 A Yes.

6 Q That would be abrasions around the area of the anal
7 opening?

8 A Yes.

9 Q You indicated I believe on cross examination that you found
10 no tears or anything in the anal orifice itself?

11 A That's correct.

12 Q And would whether or not there was trauma of that nature --
13 would that depend on, number one, if there was penetration?

14 A That would depend if there was penetration.

15 Q If there was an attempt to sodomize an individual but no
16 penetration, would you expect to find tears or lacerations?

17 A Well, if the penis enters into the canal, because the canal
18 is tight I would expect to find tearing and bruising and
19 abrasions of the opening.

20 Q But with no penetration would you expect to find the
21 injuries to be to the outer portion of the buttocks?

22 A Well, without penetration -- if there was forceful
23 penetration, you would have some injuries around the external
24 aspect of the orifice.

25 Q Here we had some injuries?

1 A We had some abrasions.

2 Q Also the size of the object penetrating would determine if
3 there was any laceration or tears, correct?

4 A That's correct.

5 RE CROSS EXAMINATION

6 BY MR. STIDHAM:

7 Q If there was a witness to these homicides and that witness
8 purported to say that these victims were sodomized, would you
9 expect to find tears or trauma to their anal orifices, Doctor
10 Peretti?

11 A If there was forceful penetration into the orifice and into
12 the rectum, I would expect to find injuries.

13 Q In the absence of those injuries you would expect that
14 sodomy didn't occur?

15 A I would expect there was no penetration into the canal with
16 ejaculation of semen.

17 REDIRECT EXAMINATION

18 BY MR. DAVIS:

19 Q Doctor Peretti, are you familiar with medical literature
20 that indicates there can be sodomy to young children without
21 evidence of tears or lacerations?

22 A There is published medical literature on those facts, yes.

23 RE CROSS EXAMINATION

24 BY MR. STIDHAM:

25 Q Doctor Peretti, more times than not there would be trauma

IN THE CIRCUIT COURT OF CLAY COUNTY, ARKANSAS
WESTERN DISTRICT
CRIMINAL DIVISION

STATE OF ARKANSAS

PLAINTIFF

VS.

NO. CR-93-47

JESSIE LLOYD MISSKELLEY, JR.

DEFENDANT

PRETRIAL AND TRIAL PROCEEDINGS

CORNING, ARKANSAS

VOLUME 5

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BEFORE THE HONORABLE:

DAVID BURNETT, CIRCUIT JUDGE

BARBARA J. FISHER
OFFICIAL COURT REPORTER
P. O. BOX 521
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1 if that occurred?

2 A My experience in the cases that I have dealt with, I've
3 always seen trauma.

4 Q Always seen trauma?

5 A The cases that I previously autopsied.

6 (WITNESS EXCUSED)

7 MIKE ALLEN

8 having been previously duly sworn to speak the truth, the whole
9 truth and nothing but the truth, then testified further as
10 follows:

11 REDIRECT EXAMINATION

12 BY MR. FOGLEMAN:

13 Q Are you the same Mike Allen who testified earlier?

14 A Yes, sir.

15 Q Detective Allen, I want to direct your attention to June
16 third, 1993. On that date -- well, the first thing that
17 detectives do in the morning -- what do y'all do?

18 A We have a morning meeting.

19 Q What time does that start?

20 A Eight o'clock.

21 Q And in general what takes place in those meetings?

22 A In the general morning meetings -- you're referring to
23 during the time we were investigating this homicide?

24 Q Yes.

25 A Every morning when we went into the morning meeting