

## ***Lewis A. Lazarus, Ph.D.***

Clinical Neuropsychologist

Licensed Psychologist NJ Lic. #3659, PA Lic. #PS-008682-L

2301 Evesham Road, Suite 209

Voorhees, NJ08043

Phone: 856.772.5874

Fax: 856.772.2318

E-mail: [DrLLazarus@gmail.com](mailto:DrLLazarus@gmail.com)

---

September 20, 2019

Thomas P. Brennan, Jr., Consultant  
Criminal Investigative Analysis  
1409 Regency Circle  
Harrisburg, Pennsylvania 17110

Re: Psychological Opinion  
Incident: Death of Ellen R Greenberg  
DOI: January 26, 2011

To Whom It May Concern;

The following is a psychological opinion regarding the nature of the death of Ellen Greenberg that occurred on January 26, 2011. The opinions rendered in this report are based upon this clinician's over 20 years of clinical practice, examination of relevant research on the topic, and information that was provided for review by way of written documentation and photographs. As part of this determination, the following material was reviewed:

1. Report by Detective Scott Eelman dated 04/14/2017. As part of Mr. Eelman's report he noted having reviewed autopsy photos, crime scene photos taken by the Philadelphia Medical Examiner's Office, the Philadelphia Medical Examiner's report, the Philadelphia Medical Examiner's Office Investigator report, and an expert report by Cyril Wecht, M.D.
  - Conclusion – "It is my opinion that the bloodstain evidence in this case is inconsistent with position in which Ms. Greenberg was found. Furthermore, I have serious concerns regarding the patterned bloodstain to the left of Ms. Greenberg's right leg, the minimal amount of bloodstains on the floor in comparison with those found on the clothing of Ms. Greenberg and the flow patterns of the bloodstains on Ms. Greenberg's face relative to the position in which she was found."
  - "It is my opinion, that Ms. Greenberg was not in the position in which she was found at the time that the blood was deposited on her sweatpants, sweatshirt, and shoes. It is also my opinion that Ms. Greenberg's head had been in several positions during the time of blood flow and it remained so for enough time as to have the blood flow across her face and back toward her ear, upward toward her eyes and also downward toward her chin."
2. Report by Elaine M. Pagliaro, MS, JD and Henry C. Lee, PhD.
  - Noted in photo #3 "the blood is flowing in different directions on her face."
  - Suggested that Ms. Greenberg had fallen to the floor after receiving at least some of her wounds while upright.
  - Noted multiple contusions/bruising at various locations on her upper and lower extremities in "various stages of healing."
  - "The number and type of wounds and bloodstain patterns observed are consistent with a homicide scene."

3. Report by Wayne K. Ross, M.D., dated 01/10/2017.
  - “There was evidence of strangulation. There was a mark over the front of the neck which was consistent with a fingernail mark. There were multiple bruises under the neck and in the strap muscles over the right side of the neck. The patterns were compatible with a manual strangulation.”
  - “The scene findings were indicative of a homicide.”
4. Report by Cyril H. Wecht, M.D., J.D., dated 01/11/2012.
  - “A knife was embedded in her left chest. It was a single edged serrated blade approximately 12.5 cm in length and 1.5 cm wide with a handle approximately 12.5 cm in length.”
  - “Ms. Greenberg visited the psychiatrist on January 12, 17 and 19.” “On January 17, it was specifically noted by the psychiatrist: “she starts thinking about everything else – not suicidal.” On January 19, Dr. Berman noted: “way better.” “
  - Blood found on the bathroom floor near the gym of the apartment building [later determined to be a worker’s blood].
  - Death initially ruled a homicide later retracted and declared a suicide.
  - Noted (8) chest wounds, (1) abdomen, (10) back of neck, (1) scalp.
  - “The multiple stab wounds to the back of the upper neck and lower head found at autopsy were unlikely suicidal stab wounds especially the different directions that K, L, Q, R, and S with vertical direction left to right, straight vertical M, N, and T, and, right to left horizontal, O and vertical P.”
  - “The locations of the stab wounds high up the back of neck and lower back of head are also unlikely for self-inflicted wounds.”
  - “it is my professional opinion that the manner of the death of Ellen Greenberg is strongly suspicious of homicide.”
5. Photos of various wounds and bruises with knife in place in chest. Photo of brain with missing vertebral basilar artery system.
6. City of Philadelphia Office of the Medical Examiner report dated 01/26/2011.
  - Noted “analysis of the decedent’s laptop provided no additional information.” No information about the details of the “analysis”
  - Manner of death ruled suicide
  - Stab wound “A” - “edges of the wound are smooth.”
  - Stab wound “B” – “edges of the wound are smooth.”
  - Stab wound “C” – “edges of the wound are smooth.”
  - Stab wound “D” – “edges of the wound are smooth.”
  - Stab wound “E” – “edges of the wound are smooth.”
  - Stab wound “F” – “edges of the wound are smooth.”
  - Stab wound “G” – “edges of the wound are smooth.”
  - Stab wound “H” – “edges of the wound are smooth.”
  - Stab wound “I” – “edges of the wound are smooth.”
  - Stab wound “J” – “edges of the wound are smooth.”
  - Stab wound “K” – “edges of the wound are smooth.”
  - Stab wound “L” – “edges of the wound are smooth.”
  - Stab wound “M” – “edges of the wound are smooth.”
  - Stab wound “N” – “edges of the wound are smooth.”
  - Stab wound “O” – “edges of the wound are smooth.”
  - Stab wound “P” – “edges of the wound are smooth.”
  - Stab wound “Q” – “edges of the wound are smooth.”

- Stab wound “R” – “edges of the wound are smooth.”
  - Stab wound “S” – “edges of the wound are smooth.”
  - Stab wound “T” – “edges of the wound are smooth.”
  - \*NOTE > Police Investigation report dated 04/15/2011 stated “The knife recovered from autopsy is a single edged **serrated blade** approximately 12.5 cm in length and 1.5 cm wide. The handle is also approximately 12.5 cm in length. It is a CUTCO brand steak knife.”
  - Numerous contusions noted.
  - Drug screen yielded “trace” zolpidem and ,<7.5 microgram/L clonazepam
7. Scene photos.
8. Reconstructed 3D Computer Model
- “Eleven posterior head and neck wounds sustained by Ellen Greenberg are not biomechanically consistent with self-infliction. The subject posterior head and neck wounds are consistent with focalized stabbing by an assailant.”
  - “Self-infliction of the multiple posterior oriented head and neck angulated subject wounds would require multiple intentional dynamic motions of the proximal and distal radioulnar joints, which is not biomechanically probable by Ellen Greenberg.”
  - “The location, angulation and various depths of Ellen Greenberg’s eleven posterior head and neck wounds are not consistent with self-inflicted radioulnar motions and the necessity inertia to inflict the subject multiple head and neck wounds upon one’s self.”
  - “Multiple contusions of Ellen Greenberg’s upper and lower extremities of various resolutions are biomechanically consistent with assailant oriented trauma and not self-inflicted injury.”
9. City of Philadelphia Office of the Medical Examiner Investigation Report dated 04/15/2011 (nearly 3 months post incident). Despite a heavy wood block that holds knives being knocked over the report stated “Furniture and items appear in place, nothing is obviously missing or disturbed.” Three laptop computers were noted to be present. The report stated “There is no note found or anything indicative of suicide on the computers or in the rest of the apartment.” Prescription medication was noted to have been recovered in the bedroom for alprazolam, clonazepam and zolpidem. There is no indication in the report of when the prescriptions were filled, who picked up the prescriptions, how many pills were originally in the bottles and how many pills were present at that time. A “paper booklet” was reportedly obtained from inside Ms. Greenberg’s pocketbook in the living room that “resembles a journal of her medications and her state of mind while taking, last dated 1/16.” The report stated “The Rx meds and small booklet was taken as evidence.” Ms. Greenberg’s cell phone was “in the master bathroom.” Dr. Ellen Berman interviewed 01/27/2011 and “there was never any feeling of suicidal thoughts.” The report concluded indicating that “Video is available” regarding surveillance.

#### Impressions and Opinions:

Ellen Greenberg was 27 years-old at the time of her death which occurred at her residence of Venice Loft Apartments 4601 Flat Rock Road, Unit 603 Philadelphia, PA 19127 that was reportedly being shared with her fiancé, Samuel Goldberg. Although initially declared a homicide, that determination was retracted, without noted cause, and deemed a suicide. A search of the internet revealed an article (<https://www.oxygen.com/crime-time/ellen-greenberg-philadelphia-teacher-death-still-stokes-questions-from-family>) that suggested the change in cause of death was associated with reported computer forensic evidence suggesting a search history regarding suicide. There is no evidence, however, that Ms. Greenberg herself did the search. This latter information, in this examiner’s opinion, is more of a red herring than considered to represent anything of validity regarding Ms. Greenberg’s mental state. With the exception of the Philadelphia Medical Examiner Report of 01/26/2011, which delineated 20 stab wounds, many to the back of her neck, all experts reviewed for this report concluded the nature of Ms. Greenberg’s death to be a homicide. Despite requests for records and/or comment by Ms. Greenberg’s psychiatrist, that information was not available for comment directly at this time. Information

available, as noted above, did not note any signs or symptoms indicative of suicidal ideation at or around the time of Ms. Greenberg's death nor at any point in her history. Also unavailable for review is the notebook that was said to have been recovered at the scene from Ms. Greenberg's pocketbook that reportedly contained information regarding her medication and "state of mind" while taking.

Several factors need to be taken into consideration in the providing of an opinion regarding whether or not someone who was allegedly found deceased passed away of their own accord or by the hands of someone or multiple persons. With regards to suicide itself, regardless of the nature of the act, consideration of a person's use of alcohol/drugs, prior notes/writings/comments regarding death and/or suicide, relationships, moods, psychosocial stressors, education, medical history, recent mental state, mental health history, family history, and job status. With respect to the means of committing suicide, it has been noted that suicide by way of sharp instruments accounts for approximately 2-3% of suicides and majority by males. Although the number of sharp wounds has not been predictive of suicide vs. homicide, the nature of the wounds, the location of the wounds, and behaviors surrounding the wounds have been very predictive.

With respect to the nature of the wounds in Ms. Greenberg's situation, there has been a suggestion that some of the wounds were "hesitation wounds," wounds that have been observed in some that have committed suicide by way of sharp objects. None of the wounds described and observed in the records provided would be considered representative of a hesitation wound.

Location of wounds aids in determination of suicide vs. homicide. Review of studies of suicide by stabbing revealed a consistent finding of wounds to the chest, neck, wrists, and abdominal area. In Ms. Greenberg's situation she was noted to have wounds to the back of her neck, top of her head, as well as chest and neck. In fact, the majority of her wounds were to the back of her neck. The trajectory of self-inflicted wounds is typically uniform, unlike what was Ms. Greenberg's situation. As noted in Dr. Wecht's report, there was a variety of trajectories of Ms. Greenberg's injuries.

With respect to behaviors often observed surrounding suicide, the most obvious would be the presence of a suicide note or actions indicating the pattern of behaviors winding up with the ultimate culmination of suicide such as saying goodbye to friends, giving away of possessions, and what many would simply describe as getting their affairs in order. Ms. Greenberg engaged in none of those behaviors. Without more information regarding the alleged internet searches, no validity is going to be provided to that information. Ms. Greenberg's psychiatrist did not indicate any notion of suicide, rather anxiety was suggested. No records were provided for review from her psychiatrist so no comment can be made with respect to any suggested diagnosis, but the information that was available noted that Ms. Greenberg was meeting all of her job responsibilities, maintaining her personal hygiene and grooming, and with no evidence of social withdraw or isolative behaviors that would have suggested a depressive disorder based upon DSM-V criteria. An additional behavior that is often demonstrated in suicides, which was not present in Ms. Greenberg's case, is the removal of clothing and being found in the position in which the inflicted wounds were sustained. In Ms. Greenberg's case, she was stabbed through her clothing and experts have clearly indicated that her final resting position was not the position in which she was positioned when inflicted with the knife wounds. Lastly, there was notable evidence that was highly indicative of wounds that may have been defensive in nature (e.g., the multiple contusions) as well as at least one expert suggesting that Ms. Greenberg had suffered some level of strangulation. The trace presence of zolpidem and clonazepam are not considered to have had a role in her injuries. In fact, the presence of those medications at a higher level would result in lethargy and somnolence and not causing her to contemplate harming herself.

In conclusion, there is a preponderance of evidence that argues against Ms. Greenberg from having taken her own life as suggested by the medical examiner. It is this examiner's opinion that Ms. Greenberg's death **was**

**not** due to suicide. I believe the foregoing narrative clearly outlines the rationale for this opinion including the forensic experts who have consistently suggested that the pattern and number of wounds was not indicative of a suicide.

A handwritten signature in black ink, appearing to read "L. Lazarus". The signature is fluid and cursive, with the first letter of each word being significantly larger and more stylized than the others.

**Lewis A. Lazarus, Ph.D.,  
Clinical Psychologist - Specializing in Neuropsychology  
NJ License #3659**