

MLPM NO PSG/379/18

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Dated - 31/03/2018

महाराष्ट्र पोस्टमॉर्टम केंद्र
आवक / अर्थ / ... 29/18
दिनांक 20/04/18

Y.P.P - 1,00,000 - 9 - 04 - PA4 - (0) 137
G.R.G.D. No. 733/33, dated 16-6-41 and
G.R.II and G.D. No. 733/33 dated 11-11-47
Vide Surgeon General with the Govt. Of Maharashtra, Bombay
Letter No. BOM/1462/19937/1 dated 4-7-62

Post-Mortem No. PSG/379/18
Marg No. : 00/18
Police Station : Mayo booth
Date : 31/03/2018

**Memorandum of a Postmortem Examination held at Department of Forensic Medicine,
Indira Gandhi Government Medical College, Nagpur**
On the dead body of **SITARAM SHIVBHAI JAN** Village WCL Colony
KAITHAL / City
Taluka- Saoner District - Nagpur By **Dr. P.S.Gilbe**
(MBBS. MD. FMT)

I General Particulars:-

- 1 (a) By whom was the corpse sent? P.S. - Mayo booth
- (b) Name of the place from which sent. }
- (c) Distance of the place from which sent. } Casualty, Mayo Hospital, Nagpur
- 2 By whom was the corpse brought? } HC Manohar, B. no. 692, PS Mayo booth
- 3 By whom identified? } Mahesh Sitaram Kaithal
- 4 The date, hour and minute of its receipt. On 31/03/2018 at 01.25 pm
- (a) The date, hour and minute of beginning of post-mortem examination. On 31/03/2018 at 01.30 pm
- (b) The date, hour and minute of ending of post-mortem examination. On 31/03/2018 at 02.30 pm
- 5 Substance of accompanying report from Police Officer or Magistrate, together with the date of death, if known supposed cause of death or reason for the examination. As per police inquest and requisition alleged history of road traffic accident. Death & time of death: on 30/03/2018 before 23:00 hrs.

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6. If not examined at Dispensary or Hospital—
- (a) Name of the place where examined.
- (b) Distance from the Dispensary or Hospital
- (c) Reason why the dead body was not sent to the Dispensary or Hospital

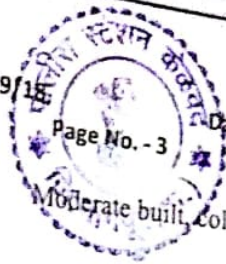
Not Applicable.

II External Examination:

7. Sex, apparent age, race or caste. Description of cloths and of ornaments on the body. 53 years, male
Body covered with white cloth. Sky blue full sleeves shirt, dark blue full pant, sky blue underwear, white banyan with sleeves.
8. Conditions of clothes— Whether wet with water, stained with blood or soiled with vomit or faecal matter. Dry. Dried blood stains seen at places.
9. Special marks on the skin such as scars, tattooing, etc., any malformations, peculiarities or other marks of identification. Identified body.
Teeth – dislocated (refer to injury no. 10 under column no. 17)
- State of the teeth.
- If newly-born infants, the length and (if possible), the weight of the body to be recorded together with the state of hair, nails and umbilical cord, its length, whether placenta is attached or not, if present, its size and condition. Not Applicable.



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10.

Condition of the body-
Whether well nourished,
thin or emaciated, warm
or cold.

11.

Rigor Mortis-
Well-marked, slight or
absent, whether present
in the whole body or part
only.

Well marked & generalized all over the body.

12.

Extent and signs of
decomposition, presence
of post-mortem lividity
of buttocks, loins, back
and thighs or any other
part. Whether bullae
present and the nature of
their contained fluid.
Condition of the cuticle.

No signs of decomposition. Post mortem lividity
present over back & buttocks except pressure points,
fixed.

13.

Features: - Whether
natural or swollen, state
of eyes, position of
tongue, nature of fluid (if
any) oozing from mouth,
nostrils or ears.

Features: natural
Eyes closed, cornea - hazy
Tongue inside mouth
Blood oozing out from mouth, nostrils.
No oozing from ears

14.

Condition of skin: -
Marks of blood, etc. in
suspended drowning the
presence or absence of
cutis anserine to be
noted.

Dry, Pale. Blackish discoloration seen around both
eyes suggestive of black eye.

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15. Injuries to external genitals. No evidence of any injury to external genitalia.
Indication of purging No Purging
16. Position of limbs— Upper Limbs - semi flexed
Especially of arms and of Lower limbs - extended
fingers in suspected drowning the presence or absence of sand or earth within the nails or on the skin of hands and feet.
17. Surface wounds and injuries
Their nature, position, dimensions (measured) and directions to be accurately stated- their probable age and cause to be noted.
If bruises be present what is the condition of the subcutaneous tissues?
(N.B.—When injuries are numerous and cannot be mentioned within the space available they should be mentioned on a separate paper which should be signed.)
18. Other injuries discovered by external examination or palpation as fractures etc.
- a) Can you say definitely that the injuries shown against serial nos. 17 and 18 are ante-mortem injuries?

- 1) lacerated wound over left parietal region of size 3x1 cm, bone deep, oblique
- 2) contused abrasion over right side of face just lateral to lateral angle of eye of size 3x1.5 cm, oblique, reddish
- 3) contused abrasion over right frontal eminence. of size 2x2 cm, reddish
- 4) lacerated wound over left cheek of size 2x0.5 cm, muscle deep, transverse
- 5) graze abrasion over right elbow of size 6x3 cm, oblique, directed downwards & medially, reddish
- 6) contused abrasion over dorsum of left hand of size 2x2 cm, reddish
- 7) lacerated wound over left hand situated between index & middle finger of size 1x0.5 cm, muscle deep, oblique, reddish
- 8) contused abrasion over left knee of size 2x2 cm, reddish
- 9) lacerated wound over dorsum of left foot situated 5 cm distal to ankle on medial aspect of size 3x1 cm, muscle deep, oblique
- 10) lacerated wound over chin in midline on frontal aspect of size 2x2 cm bone deep with underlying mandible fractured, dislocated in midline with upper & lower jaw teeth dislocated

Yes, antemortem



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**Internal Examination: -****19. Head: -**

Injuries under the scalp, their nature.

Underscalp hematoma over left fronto-temporo-parietal region including occipital region, about 150 cc blood & blood clots, dark red

Skull- Vault and base- describe fractures, their sites, dimensions, directions, etc.

Vault - linear fracture arising from left temporal region crossing midline up to right parietal eminence of size 12.5 cm

Base of skull - linear fracture over middle cranial fossa, complete

Brain- The appearance of its coverings, size, weight and general condition of the organ itself and any abnormality found in its examination to be carefully noted.

Dura - intact

Subdural hematoma all over brain, about 90 cc blood & blood clots, dark red

Subarachnoid hemorrhage present all over the brain, reddish

Brain matter - edematous, congested. Contusion present over right temporal region of size 4x4 cm, dark red

20) Thorax: -

Walls, Ribs, Cartilages.

Right side 2 to 7th ribs fractured in midline on posterior aspect & left side 2 to 6th ribs fractured in midclavicular line with extravasations of blood in surrounding tissue.

Adherent to cavity on both sides, no free fluid in the cavity

Intact, no foreign body.

Pleura

Larynx, Trachea and Bronchi

Right Lung

Left Lung

Pericardium

Heart and weight

Large Vessels

Additional Remarks

} Edematous, pale

Intact

Contains blood & blood clots.

Contains blood & blood clots

Nil.

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21. Abdomen: -

Walls	Intact
Peritoneum	Intact
Cavity	No free fluid
Buccal cavity, Teeth, Tongue, and Pharynx.	Intact, no foreign body
Oesophagus	Intact, mucosa pale
Stomach and Its Contents	Contains about 400 cc semi digested food, no peculiar smell present. Mucosa intact, pale
Small Intestine and Its Contents	Intact.
Large Intestine and Its Contents	Gases and feces present.
Liver (with weight) and gall bladder	Intact, congested
Pancreas and Suprarenals	Intact, congested
Spleen with weight	Intact, congested
Kidneys with weight	Intact, congested
Bladder	Intact, empty
Organs of generation	Intact.
Additional remarks with where possible, medical Officer's deduction from the state of the contents of the stomach as to time of death and last meal.	Nil.

State which viscera (if any) have been retained for chemical examination and also quote the numbers on the bottles containing the same.

Routine viscera not preserved


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Head and Spinal Cord -

intact, not opened.

Whether the ante mortem injuries found on the dead body were sufficient in the ordinary course of nature to cause death. Yes

If yes, which of the injuries were individually sufficient in the ordinary course of nature to cause death.

Refer to column no. 19

c) Which of the injuries collectively were sufficient in the ordinary course of nature to cause death.

Opinion as to the cause / probable cause of death

"HEAD INJURY"

[Signature]

Dr. P.S. Gilbe

Dept. of
Medicine

(Signature)

Dated - 31/03/2018

*This report must not be examined unless there are any indications of disease, Strychnine poisoning or injury

Note: - The report must be written and signed immediately after the examination. Medical Officer will at once dispatch the duplicate copy to civil Surgeon of their district for record in his office.
Caution must be taken not to cut the viscera before they have been inspected in situ.

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1. Dispensary Indira Gandhi Government Medical College, Nagpur.
Civil Hospital

Forwarded to the Police Sub Inspector PS - Mayo booth, Nagpur for information with reference to his Marg No. 00/18 u/s 174 CrPc, Dated - 31/03/2018.

1. Viscera has preserved. It may lease be stated immediately whether examination by the Chemical Analyzer is necessary or it is to be destroyed.

Routine viscera not preserved

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Agst. ...
Dept. ...
Indira Dr. P.S. Gilbe ...

Civil Surgeon or M. M.

Copy forwarded with complements to civil surgeon

for information.

M. M. S. Officer.

Total number of pages of this post mortem report is eight (8).

Seen and examined by civil
surgeon.

20 Remarks of the Civil Surgeon (if any)

K. K. K.
(अनिल शा. देरकर)
पो. उप-निरीक्षक
ने. चे. 4026/19