

Memorandum of a post-mortem examination held at Rural Hospital Umred Dispensary  
on the dead body of Madan Pandlik Bhuleri of Umred Goupari Nagri Hospital  
Taluka Umred, District Nagpur, by Dr S.D. Lotkar.  
City

I. General Particulars—

1. (a) By whom was the corpse sent? PSI PS Umred.
- (b) Name of place from which sent. Balaji Town Highway
- (c) Distance of place from which sent. 2 km
2. By whom was the corpse brought? NPC Mahaj B No 782 P.S Umred.
3. By whom identified? ① Hiteesh Madan Bhuleri 274 Film.  
② Sanjay Pandlik Bhuleri 384 S.P. Bhuleri
4. The date, hour and minute of its receipt. 18/03/2020 10 AM  
18/03/2020 10.15 AM  
18/03/2020 11.30 AM
- (a) The date, hour and minute of beginning post-mortem examination.
- (b) The date, hour and minute of ending post-mortem examination.
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 examination. H/O RTA.  
Police Panchnama & Inquest  
Panchnama attached.



6. If not examined at Dispensary or Hospital—

(a) Name of place where examined

(b) Distance from Dispensary or Hospital—

(c) Reason why the body was not sent to the Dispensary or Hospital

## 8. External Examination—

7. Sex, apparent age, race or caste

Male 52 yrs Hindu

Description of clothes and of ornaments on the body

Wearing Black yellow colour T shirt yellow sandal Bandyan, Blue full pant Blue party, Red kasdoon at waist

8. Condition of the clothes—Whether wet with water, stained with blood or soiled with vomit or faecal matter

clothes torn at some places & stained with blood  
very small glass pieces over face & neck region. Ripped

9. Special marks on the skin such as scars, tattooing etc., any malformations, peculiarities, or other marks of identification. State of the teeth.

Teeth Normal

In newly born infants, the length and if possible, the weight of the body to be recorded together with the state of the hair, nails and umbilical cord, its length, whether protruding or retracted or not, if present, its size and position.



10. **Condition of body**—Whether well-nourished, thin or emaciated, warm or cold.

well nourished fatty

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

Rigor Mortis well marked  
whole body

12. Extent and signs of decomposition, presence 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 s/o decomposition  
postmortem lividity over buttocks  
loins & back of thighs slightly  
marked.

13. **Features**—Whether natural or swollen, state of eyes, position of tongue; nature of fluid (if any) oozing from mouth, nostrils or ears.

Rt eye open, Lt closed.  
Tongue inside mouth,  
No oozing.

14. **Condition of skin**—Marks of blood etc. In suspected drowning the presence or absence of cutaneous anserina to be noted.



15. Injuries to external genitals.  
Indication of purging.

crush injury to external genital  
mention in (17).

16. **Position of limbs—**

Especially of arms and of fingers in suspected drowning the presence or absence of sand or earth within the nails or on the skin of hands and feet.

upper limbs flexed at elbow  
joint both, lower limb  
extended.

17. **Surface wounds and injuries—**Their nature, position, dimensions (measured) and directions to be accurately stated—their probable age and causes 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).

- ① contusion c forehead 2x1cm over forehead Rt side above Rt eyebrow.
- ② contusion Rt lower eye lid 1x1cm
- ③ contusion Rt renal angle back 2x1cm
- ④ abrasion Rt elbow joint 2x2cm
- ⑤ abrasion Rt wrist joint 1x1cm
- ⑥ LW Rt inguinal region 15x12cm.
- ⑦ crush injury scrotum, testis & penis
- ⑧ crush injury left leg.
- ⑨ Lt hip joint c LW Lt thigh 10x5cm
- ⑩ Lt knee joint crush injury.
- ⑪ below knee joint compound #
- ⑫ Lt foot ankle joint # c LW 5x2cm
- ⑬ contusion Lt foot ball of foot 1x1cm.

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?

Above all injuries are ante mortem injuries.



### III. Internal Examination—

#### 19. Head—

(i) Injuries under the scalp, their nature.

no injuries.

(ii) **Skull**—Vault and base—describe fractures, their sites, dimensions, directions, etc.

no #.

(iii) **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 (weight M. 3 grams F. 2.75 grams).

Brain pale slightly

#### 20. Thorax—

(a) Walls, ribs, cartilages

Intact.

(b) Pleura

Intact.

(c) Larynx, Trachea and Bronchi.

(d) Right Lung

(e) Left Lung

} slightly congested.

(f) Pericardium

(g) Heart with weight

} fatty deposition over Heart.

(h) Large vessels

(i) Additional remarks.



21. **Abdomen—**

Walls

Peritoneum

Cavity

Buccal Cavity, teeth, tongue  
and Pharynx.

Esophagus

Stomach and its contents

Small intestine and its  
contents.Large intestine and its  
contents.Liver (with weight) and gall  
bladder.

Pancreas and Suprarenals

Spleen with weight

Kidneys with weight

Bladder

Organs of generations

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.

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

Subject

Normal.

} Stomach normal in size & shape.  
mucosa normal.  
Contents semi-digested food 2-3 gms.  
No abnormal smell & rotous

- gaseous & foecal distensions

- slightly pale.

slightly pale.

slightly pale.

slightly pale.

empty

viscera not preserved for  
chemical analysis



\* Spine and Spinal Cord —

Opinion as to the cause  
probable cause of death.

Cardiac arrest due to Neurogenic &  
Hemorrhagic shock due to crush injury of  
scrotum, testis & left leg.

Dated 18/03/2020.

  
(Signature)

\*The Spinal Cord need not be examined unless there are any indications of disease, Strychnia poisoning or injury.

**Note**—The report must be written and signed immediately after the examination. Medical Officers will at once despatch a duplicate copy to the Civil Surgeon of their district for record in his office.

Great care should be taken not to cut the viscera before they have been inspected *in situ*.



No.

200

Place Dispensary  
Civil Hospital

R. H. Umsted

200

Forwarded to the Police Sub-Inspector

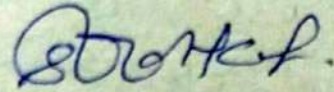
for information with reference to his No.

P. S. Umsted  
MRS Manoj B. MO 782  
of

200

2. Viscera has been preserved. It may please be stated **Immediately** whether examination by the Chemical Analyser is necessary or it is to be destroyed.

Viscera not preserved



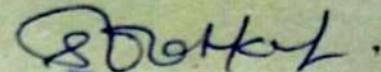
Civil Surgeon or M. M. S. Officer

Medical Officer-  
Hospital Umsted

MS RH Umsted

for information.

Copy forwarded with compliments to the Civil Surgeon,



M. M. S. Officer  
Hospital Umsted

Seen and examined by the Civil Surgeon,

on

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Remarks of the Civil Surgeon,

(if any)

Civil Surgeon