

2000

1

संशोधन के 10 दिनों की रीति

21/5/21

1874

10. Description of physical evidence from investigation:

पटनामवल्ल संवत्सम्पत्तौ वेत्त दिनांक

24-12-2019

वेळ 18 | 20 ते 15 | 15 पर्यंत

पंचाभ्यां साहचर्या

संस्थापक सचिव

Full Address

Dr. J. H. H. H. H. H.

हनु सोलार निभजी डेपनि को रीट थेलायुपलवता

Full Address

2) $\gamma\gamma \rightarrow \pi^0 \pi^0$ Burkhov

पत्ता चानामोदा ला मरारिया लि. चिंकादाश. मथहरेवा

हनु सोनार निमडा कुमानि बोट्ट घेरा मजूर

Charall

तपासीक अभिलेखागारी मंडी

दिनांक 24/12/2019

नाव अमृता खा. चवरे

Rank: अ.पो.नि No: पो.से.उ.के

-127)-9-2008-5,00,000 Bks./4 lvs.-PA4*
D., No. 733/33, dated 16-6-41 and
and L.G.D., No. 733/33, dated 11-12-47,
Surgeon General with the Govt. of Maharashtra, Bombay's
Order No. FRM/1462/19357/1, dated 4-7-62.]



C. M. 57 s.

Dispensary
Hospital

morandum of a post-mortem examination held at Indira Gandhi Government Medical College and
Hospital, Nagpur

on the dead body of Afren Mariyanus Kindo

of Village Dumri
City

Taluka Gumla,

District Gumla, Jharkhand,

by Dr. V K Wankhade

I. General Particulars-

1. (a) By whom was the
corpse sent?

P.S. Mayo Police Booth, Nagpur

(b) Name of place from
which sent.

SICU, Indira Gandhi Govt. Medical College, Nagpur.

(c) Distance of place
from which sent.

-

2. By whom was the corpse
brought?

PC Manohar , B. No. 692, P.S. Mayo Police Booth, Nagpur

3. By whom identified?

4. The, date, hour and
minute of its receipt.

12:55 PM

(a) The, date, hour and
minute of beginning
post-mortem exami-
nation.

01:00 PM

19/12/2019

(b) The, date, hour and
minute of ending post-
mortem exami-
nation.

02:00 PM

Substance of accompa-
nying Report from Police
Officer or Magistrate,
together with the date of
death if known. Supposed
cause of death or reason,
or examination

As per Police inquest and requisition.

Date and time of death is 19/12/2019 at 06:45 AM
H/O - Road Traffic Accident

(6) Reason why the body was not sent to the Department of Forensic Medicine or Hospital.

8. External Examination

7. Sex, age, date of birth, race or caste.

Male

Age about 35 Years, caste-Christian

Body wrapped in white bedsheet. One brown pant. One pink shirt. Adult diaper in situ.

Description of clothes and ornaments if any.

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

Dry and intact

9. Special marks on the skin such as scars, lacerations, abrasions, ulcers, or other marks indicating State of the

Dead body identified by PC on duty. Teeth intact.

Not Applicable

DR V K Wankhade

Average Built
Cold

Condition of body - her well-nourished, thin or stunted, warm or cold.

Present and generalized

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

No signs of decomposition present. Post mortem lividity present over back and buttocks except at pressure points.

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

Features : Natural
Eyes : Closed
Cornea : Hazy
Mouth : Partially Open
Tongue : Inside the mouth
No oozing from the mouth, nostrils and ears.

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

Dry and pale.

14. Condition of skin - Marks of blood etc. in suspected drowning the presence or absence of cutis anserina to be noted.

DR V K Wankhade

DR. V K Wankhade

22/2/2020 से 26/2/2020
 पो. एम. प्रकाश उर्फ ब. 0.9662

PM No. VKW/1882/2019 Dated: 19/12/2019

15. Injuries to external genitalia:
 Indication of injury: No injury to external genitalia
 No injury

16. Position of limbs:
 Flexion or extension of fingers is - Assessed during the post-mortem or absence of joint or arm within the rule or on the skin of hand and foot. Semi flexed

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

1. Contused abrasion present over right frontal region, 3cm x 2cm, reddish brown, vertically oblique of size 3cm x 2cm, reddish brown, 5cm below eye-brow.

2. Contused abrasion present over right cheek, 5cm x 1cm, reddish brown, vertically oblique of size 2.5cm x 1cm, reddish brown.

3. Three contused abrasions of size varying from 1cm x 1cm to 1.5cm, reddish brown noted over right side of the chest extending 1st to 6th intercostal space.

4. Contused abrasion present over left side of the chest, 0.5cm x 2cm, reddish brown, vertically oblique of size 3cm x 2cm, reddish brown, 5cm below eye-brow.

5. Surgical intervention seen as wound for drainage tube over right anterolateral aspect in 4th intercostal space. (Drainage Wound)

6. Contused abrasion present over left knee, anterior aspect, vertically oblique of size 3cm x 2cm, reddish brown.

7. Contused abrasion present over right lower limb, posterior aspect, vertically oblique of size 3cm x 2cm, reddish brown.

8. Contused abrasion present over left knee, anterior aspect, vertically oblique of size 3cm x 2cm, reddish brown.

18. If bruises be present what is the condition of the subcutaneous tissues?

19. (K.S. - When injuries are numerous and cannot be mentioned within the space available they should be mentioned on a separate paper which should be signed)

20. Injuries discovered by examination or None

21. Definitely that own against and 16 are Yes, Antemortem

DR. V K Wankhade

Internal Examination -

Injuries under the scalp, their nature.

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

(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)

20. Thorax -

(a) Walls, ribs, cartilages

(b) Pleura

(c) Larynx, Trachea and Bronchi.

(d) Right Lung

(e) Left Lung

(f) Pericardium

(g) Heart with weight

(h) Large vessels

(i) Additional remarks.

Intact.

Intact. 50cc of blood clots noted bilaterally.

Intact, Mucosa-Pale.

Multiple contusions of size varying from 0.5 cm x 0.5 cm to 2.2 cm x 1.5 cm, red noted over all lobes of both lungs.

Intact

Intact. Coronaries and valve patent. Blood and blood clots present.

No abnormality noted.

Nil

DR. V K Wankhade

Peritoneum intact

Chest No free fluid

Abdominal Cavity with organs and Mesentery Intact, Mucosa - Pale

Diaphragm Intact, Mucosa - Pale

Stomach and its contents Intact, 50-60 Yellowish fluid, No peculiar smell, mucosa pale

Small intestine and its contents Mucosa and gases present

Large intestine and its contents Gases and faeces present

Liver with weight and gall bladder Intact, Congested

Pancreas and Suprapancreas Intact

Spleen with weight Intact, Congested

Kidneys with weight Intact, Congested

Bladder Intact, Congested

Organs of generations Empty

Remarks with where medical officers the state of the organs as to meet Intact

Routine viscera not preserved.

DR. V K Wankhade

7

Intact. Not opened.

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

(b) If yes, which of the injuries were individually sufficient in the ordinary course of nature to cause death. Injury no. 1 mentioned under column no. 17 along with its corresponding internal injury mentioned under column no. 19

(c) Which of the injuries collectively are sufficient in the ordinary course of nature to cause death. Injury no. 3 and 4 mentioned under column no. 17 along with its corresponding internal injury mentioned under column no. 20

Opinion as to the cause probable cause of death.

INJURIES TO VITAL ORGANS

19/12/2019

Dated

*The Spinal Cord need not be examined unless there are any indications of disease, must be examined in case of 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.

DR. V K Wankhade

Assistant Professor

Dept. of Forensic Medicine & Toxicology

Dr. V K Wankhade

Assistant Professor

Dept. of Forensic Medicine & Toxicology

Dr. V K Wankhade



फॉर्म कॉम ए.ए. -

फॉर्म २५३ (बी) २५४ (५) (नियमतीन) २५४ (सी) २५५ (१)
(रोमन चार) मोटार वाहन अपघाता बाबत चा फॉर्म.

- १) पोलीस स्टेशन - कळमेश्वर
- २) अपराध क्रमांक/ स्टे.डा. क्र.
- ३) अपघाताचीवेळ, ठिकाण व तारीख
- ४) जखमी/ मृतकाचे नाव व पत्ता
- ५) ज्या दवाखान्यात नेण्यात आलेल्या दवाखानाचे नाव व पत्ता
- ६) वाहनाचाक्रमांक
- ७) वाहन चालविण्याचे तपशिला सह चालकाचे नांव पत्ता आणि वाहणे चालविण्याचे परवाना पत्ता
- ८) सरकारी वाहनाचे बाबतीत बिल्ल्याचा क्रमांक आणि विमा आणि पत्ता
- ९) अपघात झाला त्या तारखेस असलेल्या वाहनाच्या मालकाचा पत्ता आणि नांव
- १०) ज्या कंपनीचा विमा असेल त्या कंपनीचे नाव व पत्ता आणि कंपनीचे विभागीय कार्यालय
- ११) विमा पॉलीसी क्रमांक/ विमा प्रमाण पत्र कोणत्या तारखे पर्यंत विमा पॉलीसी वैध आहे.
- १२) केलेल्या कार्यवाही चे सहपत्र

:- जिल्हा :- नागपुर
:- अप.क्र.९०८/१९ कलम- २७९,३०४(अ)
भा.द.वी.सह कलम-१८४,१३४ मो.वा.का.
:- १५/१२/१९ चे २०/०० वा.
:- मृतक नामे एग्नेन मारीयानुस किंडो वय ३५ वर्ष
रा.ग्राम- रवींद्र नगर, धाना-हुमरी जिल्हा गुमला
राज्य- झारखंड
:- मेयो हॉस्पिटल नागपुर

:- अज्ञात वाहन

:- निरंक

:- निरंक

:- वाहनाचा शोध लागला नाही.

:- निरंक

:- निरंक

:- "अ फायनल क्र.७७/२०" तयार करण्यात आले.

दिनांक - ०२ / ०७ / २०२०

दिनेश साहेबराव गावंडे
पोलीस उपनिरीक्षक
पो.स्टे.कळमेश्वर