

CJPN (C-127)-9-2008-5,00,000 Bks./4 Ivs.--PA4*
G.R., G.D., No. 733/33, dated 16-6-41 and
G.R., H. and L.G.D., No. 733/33, dated 11-12-47,
vide Surgeon General with the Govt. of Maharashtra, Bombay's
Letter No. RM/1462/19357/1, dated 4-7-62.]

MLPM No

SSG/104/2021

24/01/2021

C. M. 67 e.

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

Dispensary
Hospital

on the dead body of Umesh Ravi Movade

of Village Umari
City

Taluka Savner,

District Nagpur,

by Dr. S S Giri

I. General Particulars-

1. (a) By whom was the corpse sent? P.S. Mayo Police Booth, Nagpur
- (b) Name of place from which sent. Casualty, Indira Gandhi Govt. Medical College, Nagpur
- (c) Distance of place from which sent. -
2. By whom was the corpse brought? NPC Gupta, B. No. 1031, P.S. Mayo Police Booth, Nagpur
3. By whom identified?
4. The date, hour and minute of its receipt. 01:40 PM
- (a) The date, hour and minute of beginning post-mortem examination. 01:50 PM
- (b) The date, hour and minute of ending post-mortem examination. 02:50 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 examination. As per Police Inquest and requisition. Date and time of death is 23/01/2021 before 17:00 Hrs H/O - Road Traffic Accident

पोलीस स्टेशन.. २४/०१/२०२१
आवक/जावक... ३०७/२०२१
दिनांक... १८/०२/२०२१...

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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.

▶ Patient was initially taken to PHC Savner hospital on 23/01/2021 Then he was referred to IGGMC Nagpur, where he declared as brought dead on 23/01/2021 at 05.00 pm

II. External Examination-

7. Sex, apparent age, race or caste.

Male
Aged about 22 Years

Description of clothes and of ornaments on the body.

Body wrapped in Body bag, Plastic sheet White bedsheet
Blue color t-shirt, Blue jeans pant, Blue buniyan, White bandages present over both thigh region and over left forearm.

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

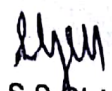
Not Applicable
Dry and Intact

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

Teeth-Intact, Daed body identified by PC on duty.

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 placenta is attached or not, if present, its size and condition.

Not Applicable


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

Average Built
Cold

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

Present and generalized

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.

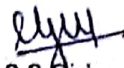
No signs of decomposition present. Post mortem lividity present overback and buttocks except at pressure point.

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
Mouth : Partially Open
Tongue : Inside the mouth
No oozing from the mouth, nostrils and ears.

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

Dry and pale.


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15. Injuries to external genitals.
Indication of purging

No injury to external genitals
No purging

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.

Semi flexed

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

Refer added pages to SSG/104/2021, dated 24/01/2021 for column no. 17.

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.

Refer to column no. 17

- (a) Can you say definitely that
the injuries shown against
serial Nos. 17 and 18 are
ante mortem injuries?

Yes, Antemortem


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III. Internal Examination-**19. Head-**

- (i) Injuries under the scalp, their nature.
- (ii) 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).

No injuries under the scalp.

Vault and base of skull intact

Meninges - Intact

Brain matter - congested and edematous

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.

2-5th ribs of both side fractured in midclavicular line corresponding with injury no. 1,2 mentioned in column no. 17.

150 cc of blood and blood clots present in both side of pleural cavity.

Intact, Mucosa-Pale.

Lacerations present over upper lobe of right lung and lower lobe of left lung of sizes 04x01cm and 05 x0 1cm respectively corresponding to injury no 1,2,3 of column no 17

Intact

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

No abnormality noted.

Nil

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21. Abdomen-

Walls	Intact.
Peritoneum	Intact.
Cavity	500 cc of blood & blood clots present in cavity.
Buccal Cavity, teeth, tongue and Pharynx.	Intact, Mucosa - Pale
Oesophagus	Intact, Mucosa - Pale.
Stomach and its contents	Intact, about 100 cc Semisolid material, No Peculiar odour, mucosa-congested.
Small intestine and its contents.	<div style="border: 1px solid black; width: 30px; height: 40px; display: inline-block; vertical-align: middle;"></div> Gases and faeces present
Large intestine and its contents.	
Liver (with weight) and gall bladder.	Congested
Pancreas and Suprarenals	Congested
Spleen with weight	Laceration present anteriorly of size 05x02 cm.
Kidneys with weight	Congested
Bladder	Empty
Organs of generations	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.

22. *Spine and Spinal Cord-

Intact. Not opened.

23.(a) Whether the ante-mortem injuries found 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. 1-4 mentioned under column no. 17 along with its corresponding internal injury mentioned under column no. 20,21

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

Opinion as to the cause probable cause of death.

INJURY TO VITAL ORGAN


24/01/2021

Dated


*The Spinal Cord need 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 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. S S Giri

Assistant Professor (Signature)
Dept. of Forensic Medicine & Toxicology
Indira Gandhi Govt. Medical
College, Nagpur.


DR. S S Giri

Assistant Professor
Dept. of Forensic Medicine & Toxicology
Indira Gandhi Govt. Medical
College, Nagpur.

No SSG/104/2021
24/01/2021

Place Dispensary
Civil Hospital

Indira Gandhi Government Medical College and Hospital, Nagpur

Forwarded to the Police Sub-Inspector

Mayo Police Booth, Nagpur PS

for information with reference to his No

13/2021

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.

Routine viscera not preserved.

Dr. S. S. Giri

Assistant Professor
Dept. of Forensic Medicine & Toxicology
Indira Gandhi Govt. Medical
College, Nagpur.
Civil Surgeon or M.M.S. Officer

Copy forwarded with compliments to the Civil Surgeon, for information.

Total number of pages in this Postmortem Report are (9)

M.M.S. Officer

Seen and examined by the Civil Surgeon, on

Remarks of the Civil Surgeon,

NIL

Submitted to concerned clerk, LMJ office,

Civil Surgeon

Dr. S. S. Giri
Assistant Professor
Dept. of Forensic Medicine & Toxicology
Indira Gandhi Govt. Medical
College, Nagpur.

Column No. 17

- 1 Graze abrasion present over right side of chest at mammary region extending to right hypochondriac region, vertically oblique, of size 15x10 cm , reddish.
- 2 Contused abrasion present over left hypochondriac region of chest, transversely oblique, of size 08x03 cm , reddish.
- 3 Contused abrasion present over left hypochondriac region of chest at 6th intercostal space, 6 cm below injury no 2, transversely oblique, of size 05x04 cm , reddish.
- 4 Contused abrasion present over left lumbar region of abdomen, transversely oblique, of size 04x03 cm , reddish.
- 5 Contused abrasion present over right forearm anteriorly at middle 1/3rd region, vertically oblique, of size 07x04 cm , reddish.
- 6 Contused abrasion present over right arm posteriorly at upper 1/3rd region, vertically oblique, of size 05x02 cm , reddish.
- 7 Contused abrasion present over left hand palmar aspect at hypothenar region, transversely oblique, of size 06x04 cm , reddish.
- 8 Contused abrasion present over left elbow region, transversely oblique, of size 06x02 cm , reddish.
- 9 Graze abrasion present over left forearm posteriorly at upper 1/3rd region, vertically oblique, of size 08x04 cm , reddish.
- 10 Contused abrasion present over right thigh region antero-medially at lower half region, vertically oblique, of size 07x04 cm , reddish.
- 11 Graze abrasion present over shin of right leg anteriorly at upper 1/3rd region, vertically oblique, of size 15x10 cm , reddish.
- 12 Lacerated wound present over shin of right leg anteriorly at upper 1/3rd region, of size 05 cm X 02 cm bone deep, Underlying bone fractured, margins irregular. Blood and blood clot adherent to wound margins.
- 13 Contused abrasion present over shin of right leg anteriorly at middle 1/3rd region, transversely oblique, of size 06x03 cm , reddish.
- 14 Graze abrasion present over shin of right leg anteriorly at lower 1/3rd region, vertically oblique, of size 08x06 cm , reddish.
- 15 Lacerated wound present over left knee anteriorly, of size 06 cm X 02 cm bone deep, margins irregular. Blood and blood clot adherent to wound margins.
- 16 Contused abrasion present over left leg dorso-medially, transversely oblique, of size 04x02 cm , reddish.


DR. S S Giri