

C.I.P. No. 2008-5,00,000 Bys./4 Ivs.-PA4*
 G.O. No. 733/33, dated 15-8-41 and
 L.G.D. No. 733/33, dated 11-12-47,
 Vice Surgeon General with the Govt. of Maharashtra, Bombay's
 Letter No. FRM/1462/1935/1, dated 4-7-62.]

MLPM No. YBG/590/18
 17/03/2018

695
 31418
 M. 67 e

Memorandum of a post-mortem examination held at Government Medical College and Hospital, Nagpur Dispensary Hospital
 on the dead body of Sau Sunita Gedraj Gharat of Village hari Ukadvai
 Taluka Umred, District Nagpur, City, by Dr. Y B Gawande

I. General Particulars-

1. (a) By whom was the corpse sent? P.S. Medical Police Booth, Nagpur
- (b) Name of place from which sent. Ward No. Trauma SICU, Govt. Medical College, Nagpur.
- (c) Distance of place from which sent.
2. By whom was the corpse brought? NPC Praveen, B. No. 1797, P.S. Medical Police Booth, Nagpur
3. By whom identified?
4. The, date, hour and minute of its receipt. 12:35 PM
- (a) The, date, hour and minute of beginning post-mortem examination. 12:40 PM → 17/03/2018
- (b) The, date, hour and minute of ending post-mortem examination. 1:40 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 17/03/2018 at 10:00 AM
 H/O - Road Traffic Accident on 11/3/18 at 4.00 pm

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 admitted in ward Trauma SICU, Govt. Medical College, Meerut 11/3/18 and died on 17/3/18 at 10.00 AM.

II. External Examination-

7. Sex, apparent age, race or caste.

Male
Aged about 35 Years, caste-Hindu

Description of clothes and of ornaments on the body.

Body wrapped in Brown Chadder, White Chadder, Grey half shirt, Pink Patkot.

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

Dry

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

Dead body identified by NPC on duty
Teeth-16/16

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

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

Average Built
Cold

On

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

Partially present over face and upper limbs.

12. Extent and signs of decom-
position, 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 over back and
buttocks except at pressure point.

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

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

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

Dry and pale.

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.

Both limbs extended

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.

- 1 Surgical intervention seen as stitched wound with 11 stitches . pre
frontal region in midline . . .
- 2 Four Surgical intervention seen as stitched wound with 5,8,9,13
present over right breast .
- 4 Two Surgical intervention seen as stitched wound with 6,7 stitches
over right leg upper 1/3 antero-lateral aspect .
- 5 Multiple Contused abrasion of size 1x1 to 3x1 cm present over right
1/3 lateral aspect . vertically oblique, brownish scab.
- 6 Surgical intervention seen as puncture wound present over right wrist .
(Intravenous infusion mark)
- 7 Surgical intervention seen as wound of tracheostomy present over
aspect of neck.

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.

None

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

Yes , Antemortem

Internal Examination-

Head

a) Injuries under the scalp, their nature.

Under-scalp haematoma present over frontal region of size 5x6 cm. Brownish colour.

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

Vault and base of skull intact

b) 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).

Meninges - Intact Subdural haematoma present over both cerebral hemisphere, about 130 cc, blood and blood clots present, brown in colour. Subarachnoid haemorrhage present as a thin film of blood both cerebral hemisphere, red in colour. Brain- Congested and Oedematous

Thorax-

a) Walls, ribs, cartilages

Intact

b) Pleura

Intact

c) Larynx, Trachea and Bronchi.

Mucosa-Pale Thyroid Cartilage-Intact. Hyoid Bone-Intact.

d) Right Lung

congested and oedematous

Both lungs adherent to pleura, non crepitant. Lungs, firm, gritty to cut, cut surface red, shiny, granular with blood tinged pus oozes out on cut section.

e) Left Lung

Pericardium

Intact

f) Heart with weight

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

Large vessels

Intact. Blood and blood clots present.

Additional remarks.

Nil

21. Abdomen-

Walls	Intact
Peritoneum	Intact
Cavity	No free fluid
Buccal Cavity, teeth, tongue and Pharynx.	Mucosa - Pale. Intact
Oesophagus	Intact Mucosa - Congested
Stomach and its contents	240 cc yellowish fluid. No peculiar odour., mucosa pale
Small intestine and its contents.	Clases and faeces present
Large intestine and its contents.	
Liver (with weight) and gall bladder.	Intact, Congested
Pancreas and Suprarenals	Intact, Congested
Spleen with weight	Intact, Congested
Kidneys with weight	Intact, Congested
Bladder	Empty
Organs of generations	Intact, Congested Uterus-Nongravid

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.

No. YBG/590/18
17/03/2018

Government Medical College and Hospital, Nagpur

Place Dispensary
Civil Hospital

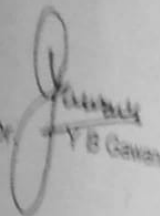
Medical Police Booth, Nagpur PB

Forwarded to the Police Sub-Inspector

for information with reference to his No. 00/18

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. Y.B. Gawande

Civil Surgeon or M.M.S. Officer
Resident Doctor
Dept. of Forensic Medicine
GMC, Nagpur

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

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