



CJPN (D 127)-9-2008-50000 (HS-48-PA)
G. R. O. No. 73033 dated 16-8-11 and
G. R. H and L. O. No. 73033 dated 11-12-47
vide Surgeon General with the Govt. of Maharashtra, Bombay's
No. FHM/1462/193571 dated 4-7-62]

Dispensary
Hospital

Memorandum of a post-mortem examination held at

on the dead body of Aryan Village well,
manoj of Saoner
Attankar City
Taluka Saoner District Nagpur by Dr. Banerjee

1. General Particulars—

- 1. (a) By whom was the corpse sent? Police
- (b) Name of place from which sent. Police Station, Saoner
- (c) Distance of place from which sent.

2. By whom was the corpse brought?

3. By whom identified?

Dr. Banerjee
Avinash K. Patil

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

(a) The date, hour and minute of beginning post-mortem examination. 23/12/12, 11:00 am

(b) The date, hour and minute of ending post-mortem examination. 23/12/12, 12 noon

5. Substance of accompanying Report from Police Officer or Magistrate, together with the date of death if known. Suspected cause of death or reason for examination.

Inquest of cause of death

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.

II. External Examination—

7. Sex, apparent age, race or caste

Male, 17 years, Hindu

Description of clothes and of ornaments on the body.

Clothes—
Blue-Jeans
Blue-T-shirt
Blue-Underwear

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

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

I/O mark—
mos over Rt chest

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.

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

Thin, cold

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

Rigor marks ⊕

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 culicle.

Lividity ⊕

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

Eyes, closed
mouth open, tongue inside
Bleedy ⊕ thru nose
Ears.

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

marks of blood on left side of face ⊕

15. Mounds to external genitalia
indication of purging

16. Position of limbs—
Especially of arms and
of fingers in suspected
drugging the presence or
absence of sand or earth
within the nails or on the
skin of hands and feet.

17. Surface wounds and
injuries—The nature, posi-
tion, 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?

I.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 distinctly
that the injuries shown
against serial Nos. 17
and 18 are ante mortem
injuries?

In Anatomical Position

Injuries

Laceration

- Left Eye - lateral
margin - 3x1 cm
- Left maxilla - 2x2cm
- Left knee joint - 5x1cm

Fractures

- RT wrist # ⊕
- Left zygomatic arch # ⊕
- Left Eye - outer orbit # ⊕
- Left thorax 2nd to 5th Rib # ⊕
- Left knee joint # ⊕
- Cervical vertebrae - 2nd to 7th
distorted # ⊕

Admission

- left knee joint - 5x1cm
multiple abrasions all over
body ⊕

Internal Examination

19. Head—

- (i) Injuries under the scalp,
their nature
- (ii) Skull—Vault and base—
describe fractures,
their sites, dimen-
sions, 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)

Injury

Skull - intact

Brain matter - clob ⊕
Haemorrhage ⊕
over basal sites.
Rest is congested

20. Thorax—

- (a) Walls, ribs, cartilages - Left thorax 2nd to 5th Rib #
- (b) Pleura - left pleura torn. clob ⊕
- (c) Larynx, Trachea and
Bronchi - clob ⊕, congested
- (d) Right Lung } congested, torn
- (e) Left Lung } upper lobe crushed, clob ⊕
- (f) Pericardium }
- (g) Heart with weight } Crushed, clob ⊕, congested
- (h) Large vessels }
- (j) 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.

Intact, unopened

mouth - open, teeth clenched

tongue inside

semisolid food material, yellowish, non-smelly, approx 200gms

feces & gas

Intact, unopened

Empty

stool passed, intact

22. Spine and Spinal Cord-

Cervical vertebrae - 2nd to 3rd

distraction - E

teary of spinal cord

Opinion as to the cause probable cause of death

Most probable cause of death is sudden cardiorespiratory arrest due to severe chest & spinal injuries.

Dated 23/11/200

Signature

(Dr. Bhatnagar)

*The Spinal Cord need not be examined unless there are any indications of disease, Stychria poisoning or injury. Note - The report must be written and signed immediately after the examination. Medical Officer must 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.

8

No.

200

Dispensary
Place Civil Hospital

200

Forwarded to the Police Sub-Inspector

for information with reference to his No.

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.

J. N. Bhandari

Civil Surgeon or M. M. S. Officer

केन्द्रीय अस्पताल

प्रधान अस्पताल, अहमदाबाद, गुजरात

20000

Copy forwarded with compliments to the Civil Surgeon,

for information.

M. M. S. Officer

Seen and examined by the Civil Surgeon,

200

Remarks of the Civil Surgeon,

(if any)

on

प.म. ककर बोडी सिव्ही.

प.ए. डॉ. वानखेड.

B.N. 2333

23/12/2017

J. N. Bhandari

Civil Surgeon

प्रधान अस्पताल, अहमदाबाद, गुजरात

20000