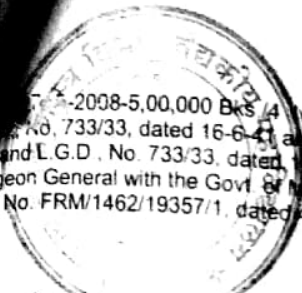


2008-5,00,000 Bks. A vs -PA4\*  
No. 733/33, dated 16-6-47, and  
and L.G.D. No. 733/33, dated 11-12-47,  
Surgeon General with the Govt. of Maharashtra, Bombay's  
letter No. FRM/1462/19357/1, dated 4-7-62]



पोलीस स्टेशन केवद  
आवक / नमूना 98517  
दिनांक 06/08/17  
MLPM No RRF/1680/17  
12/08/2017  
C. M. 67 e.

Memorandum of a post-mortem examination held at Government Medical College and Hospital, Nagpur Dispensary Hospital  
on the dead body of Rukhmabai Jagoji Govane  
Taluka Kedvad of Village Kedvad  
District Nagpur City  
, by Dr. Roshan Fulzele

**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.18 ,Govt. Medical College,Nagpur.
- (c) Distance of place from which sent. -
- 2. By whom was the corpse brought? ASI Baban , B. No. 1358, P.S. Medical Police Booth, Nagpur
- 3. By whom identified?

- 4. The, date, hour and minute of its receipt.
  - (a) The, date, hour and minute of beginning post-mortem examination. 12:05 PM  
12:10 PM  
12/08/2017
  - (b) The, date, hour and minute of ending post-mortem examination. 01:10 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 12/08/2017 at 03:00 AM  
H/O - Accident on 22/7/2017

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 18, Govt. Medical College, Nag. died on 12/8/2017 at 03:00 AM.

## II. External Examination-

7. Sex, apparent age, race or caste.

Female  
Aged about 60 Years

Description of clothes and of ornaments on the body.

Body wrapped in Red colour dari  
Red gown, red peticoat, black thread around neck

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

Intact, 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 ASI on duty  
Teeth-Intact

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-  
or well-nourished, thin  
or emaciated, warm or cold.

Average Built  
Cold

Condition of Mortis - Well marked,  
or absent; whether  
present in the whole body or  
only.

Present and generalized

Signs and signs of decom-  
position, presence post-  
mortem lividity of buttocks,  
chest, back and thighs or any  
other part. Whether bullae  
present and the nature of  
fluid contained. Condition  
of the cuticle.

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

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 : Opened  
Tongue : Inside the mouth  
No oozing from the mouth, nostrils and ears.

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

Upper limbs semi-flexed , Lower 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 Abrasion of size 2x1 cm present over posterior aspect of right scap present .
- 2 Abrasion of size 1 x 1 cm present over posterior aspect of right lateral to injury no 1 , black scab present .
- 3 Abrasion of size 2 x 1 cm present over an area of left zygomatic lateral to lateral canthus of left eye ,black scab present .
- 4 Abrasion of size 3 x 2 cm present over an area of left zygomatic below and lateral to left eye ,black scab present .
- 5 Abrasion of size 2 x 1 cm present over anterior aspect of left below cubital fossa ,black scab present .
- 5 Surgical intervention seen as puncture wound present over right (Intravenous infusion mark)

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

**Final Examination-**

|  |  |
|--|--|
| Injuries under the scalp, their nature.  | No injuries under the scalp.   |
| Skull- Vault and base- describe the fractures, their sites, dimensions, directions, etc.   | Vault and base of skull intact   |
| 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 Brain-Intact , Congested and Oedematous.   |
| Thorax-  |  |
| Walls, ribs, cartilages  | Refer added pages to RRF/1680/17 , dated 12/08/2017 for column no. 20(a).  |
| Pleura   | Intact. 300 ml straw colour fluid present in both pleural cavities .   |
| Larynx, Trachea and Bronchi.   | Mucosa-Congested Thyroid Cartilage-Intact. Hyoid Bone-Intact.  |
| (d) Right Lung   | Intact, congested<br>Multiple contusions present over both lungs with Consolidation present in all lobes of both the lungs |
| (e) Left Lung  |  |
| (f) Pericardium  | Intact   |
| (g) Heart with weight  | Intact. Coronaries are patent. Blood and blood clots present.  |
| (h) Large vessels  | Intact. Blood and blood clots present.   |
| (i) Additional remarks.  | Nil  |

## 21. Abdomen-

|   |   |
|---|---|
| Walls   | Intact.   |
| Peritoneum  | Intact  |
| Cavity  | 500 cc of blood & blood clots present in cavity.  |
| Buccal Cavity, teeth,<br>tongue and Pharynx.  | Mucosa - Congested.<br>Intact.  |
| Oesophagus  | Intact. Mucosa - Congested.   |
| Stomach and its contents  | 100 cc brownish fluid. No peculiar odour., mucosa-congested.                            |
| Small intestine and its<br>contents.  | Intact, brownish fluid present, mucosa - congested.                                     |
| Large intestine and its<br>contents.  | Gases and faeces present  |
| Liver (with weight) and gall<br>bladder.  | Multiple Laceration present over anterior aspect of right lobe of Liver                 |
| Pancreas and Suprarenals  | Intact, Congested   |
| Spleen with weight  | Intact, Congested   |
| Kidneys with weight   | Intact, Congested   |
| Bladder   | Intact, empty   |
| Organs of generations   | Intact, Congested. Uterus-Nongravid, cavity is obliterated and converted<br>solid mass. |
| Additional remarks with<br>where possible, medical<br>officer's deduction from the<br>state of the contents of the<br>stomach as to time of death<br>and last meal. | Nil   |
| State which viscera (if any)<br>have been retained for<br>chemical examination and<br>also quote the numbers on<br>the bottles containing the<br>same.              | Tissues for histopathology - Entire uterus.<br>Routine viscera not preserved.           |

and Spinal Cord-

Intact. Not opened.

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

No

Yes, which of the injuries were individually sufficient in the ordinary course of nature to cause death.


Internal injury mentioned under column no. 20 , 21

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

Conclusion as to the cause of death.

" Blunt Trauma to Chest and Abdomen "

12/08/2017  
Dated

  
Resident Doctor  
Dept. of Forensic Medicine  
GMC, Nagpur.  
(Signature)

\*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.

No. RRF/1680/17  
12/08/2017

Place Dispensary  
Civil Hospital

Government Medical College and Hospital, Nagpur

Forwarded to the Police Sub-Inspector


Medical Police Booth, Nagpur PS

for information with reference to his No.

00/17 U/S 174 CrPC

2. Viscera has been preserved. It may please be stated *immediately* whether examination by the Chemist/Analysers is necessary or it is to be destroyed.

Routine viscera not preserved

Dr.   
Resident  
Dept. of Forensic  
GMC, Nagpur  
Civil Surgeon or M.M.S.

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



SENDER TO  
संख्या ७३

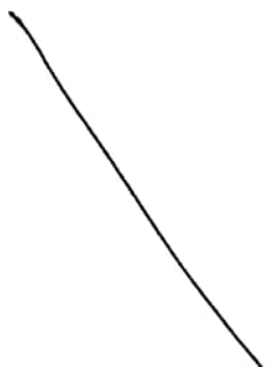
s to RRF/1680/17, dated : 12/08/2017

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PM No. :RRF/1680/17 Dated : 12/08/2017

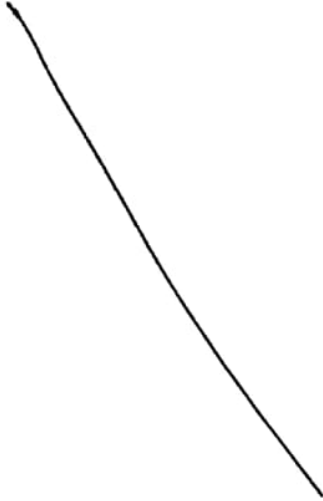
No. 20(a)

Undisplaced fracture of right clavicle bone from its medial 1/3 rd part , fracture of right and left ribs no. 3 - 6 from anterior line with associated intercostal muscle haematoma present .



20(a)

undisplaced fracture of right clavicle bone from its medial 1/3 rd part , fracture of right and left ribs no. 3 - 6 from anterior line with associated intercostal muscle haematoma present .



Resident Doctor  
Dept. of Forensic Medicine  
GMC, Nagpur