



Memorandum of a post-mortem examination held at

RHTC Saoner

Dispensary
Hospital

on the dead body of Dhanraj Raghurath of Village
Vishwakarma Saoner (Vathoda, Nagpur)
Nagpur City

Taluka

Saoner (M)
Nagpur

District

Nagpur

by

Dr. Gaybhiye

I. General Particulars—
सावध
सावध

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

(b) Name of place from
which sent.

(c) Distance of place
from which sent.

Police station
Saoner.

10 km.

2. By whom was the corpse
brought ?

3. By whom identified ?

सरम धरम विश्वकर्मा - 9
सागर धरम विश्वकर्मा - 10

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

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

20/4/18 at
6:30 p.m.

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

20/4/18
7:30 p.m.

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

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.

47yr/male, Hindu

Description of clothes and of ornaments on the body.

white bandyan

white shirt.

Brown underwear.

Black pant.

Black thread on neck and wrist.

Red thread on Rt hand.

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

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

Black mole - Rt shoulder.

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.

well nourished.
cold.

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

trt

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.

trt.

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

eyes are partially open.
tongue inside.
ENT-bleed.

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

15. Injuries to external genitals.
Indication of 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.

for it

And

17. **Surface wounds and injuries**—Their nature, position, 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?

(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.

All ribs of lt side - fractured.

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

III. Internal Examination—

19. Head—

- (i) Injuries under the scalp, their nature.
- (ii) **Skull**—Vault and base—describe 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).

Intact & congested.

Brain material ruptured.

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 & congested.

→ ruptured.

} Intact & congested

21. **Abdomen—**

15. Injuries
Indices

Walls

Peritoneum

Cavity

} intact & congested.

16. Po.
Esp
of
drc
ab
wil
sk

Bucal Cavity, teeth, tongue
and Pharynx.

Desophagus

Stomach and its contents

→ 300ml - semidigested.

17.

Small intestine and its
contents.

Large intestine and its
contents.

} intact & congested.

Liver (with weight) and gall
bladder.

→ lacerated.

Pancreas and Suprarenals

Spleen with weight

Kidneys with weight

} intact & congested.

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.

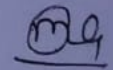
State which viscera (if any)
have been retained for
chemical examination and
also quote the numbers on
the bottles containing the
same.

infert & congested.

Opinion as to the cause
probable cause of death.

RTA \bar{c} Head injury




(Signature)

Dated

20/4/20018.

*The Spinal Cord need not be examined unless there are any indications of disease, Strychnia poisoning
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*.

No.

200

Place Dispensary
Civil Hospital

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.

mq

Civil Surgeon or M. M. S. Officer
वैद्यकीय अधिकारी
ग्रामीण आरोग्य प्रशिक्षण केंद्र,
सावनेर

Copy forwarded with compliments to the Civil Surgeon,

for information.

mq

M. M. S. Officer
वैद्यकीय अधिकारी
ग्रामीण आरोग्य प्रशिक्षण केंद्र,
सावनेर

Seen and examined by the Civil Surgeon,

on

200

Remarks of the Civil Surgeon,

(if any)

8.11.2017 4:15 PM
विक्रम
231

mq

Civil Surgeon
वैद्यकीय अधिकारी
ग्रामीण आरोग्य प्रशिक्षण केंद्र,
सावनेर