

Memorandum of a post-mortem examination held at

R.H.C Saoner

Dispensary  
Hospital

on the dead body of Serita Dhamraj  
Vishwakarma

Village of Saoner (Nathoda, Nagpur)  
City

Taluka Saoner, District Nagpur

, by Dr. Gaybhire

I. General Particulars

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 ?

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

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

20/4/18

at 6 p.m.

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

20/4/18

at 6:30 p.m.

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.

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.

37 ylf., Hindu.

Description of clothes and of ornaments on the body.

Greenwhite saree.

sky blue petticoat.

golden blouse.

Brown underwear.

Green bangles.

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 moles on 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.

well nourished  
cool

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.

lividity 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

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.

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.

Abrasion on rt hand

Abrasion on rt leg.

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.

2nd & 3rd rib #

(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).

Skull intact &

Hematoma + on parietal lobe.

#### 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
- (j) Additional remarks.

} intact & congested

} intact and congested.

→ fully closed

21. Abdomen

Walls

Peritoneum

Cavity

} intact & congested.

Buccal Cavity, teeth, tongue and Pharynx.

Esophagus

Stomach and its contents

→ semidigested, 500ml.

Small intestine and its contents.

Large intestine and its contents.

} intact & congested.

Liver (with weight) and gall bladder.

→ rupture

Pancreas and Suprenals

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.

Spine and Spinal Cord —


~~Broken~~ / Fractured & injured.

Opinion as to the cause  
probable cause of death.

RTA ट Spinal cord injury

Dated

200

  
(Signature)

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

Note—The report must be written and signed immediately after the examination. Medical Officer should at once send 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*.