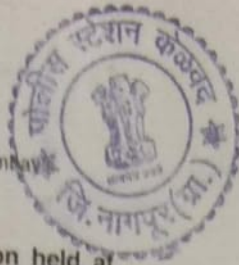


GO-1271-9-2008-5,00,000 Bks./4 Vols. -PA4*
G. O., No. 733/33, dated 16-6-41 and
G. O. and L. G. D., No. 733/33, dated 11-12-47,
[Section General with the Govt. of Maharashtra, Bombay
No. RM/1462/19357/1, dated 4-7-62.]



C. M. 67 e

Memorandum of a post-mortem examination held at

on the dead body of **Rajesh**
Sukhran
Khubele
Taluka **Chandwara**, District **Chandwara**, by **D. Borellye**
Village of **Bihua**, City
Dispensary Hospital

I. General Particulars—

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

2. By whom was the corpse brought?

3. By whom identified? **1) Mohanish Khubale**
2) Mahesh Khubale

(Signature)
(Signature)

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

(a) The date, hour and minute of beginning post-mortem examination. **6/11/18, 11:10 am**

(b) The date, hour and minute of ending post-mortem examination. **6/11/18, 12:10 noon**

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.

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.

44 years, male, Hindu

Description of clothes and of ornaments on the body.

Clothes—

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

Dark Grey - Jeans

Blue - shirt

Grey - underwear

White - Panjtan

Green - Inner

Black - Sweater

Socks - white-cream

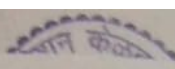
Black thread - around waist

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

I/D mark—

Black mark on Right High

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
 emaciated, warm or cold.

Thin, cold

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

Rigor mortis (+)

2. 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.

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 - Open, pupils-dilated, fixed
 mouth - closed, tongue inside,
 bloody oozing from nostrils &
 ears, mouth (+)

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

marks of blood over face (+)
 & chest

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.

In Anatomical Position

17. Surface wounds and injuries—Their nature, position, dimensions (measured) and directions to be accurately stated—their probable age and causes to be noted.

Injuries -

① Crush Injury - over neck,
just below mandible
aprox. 20 x 15cm
Extending from Rt to Lt ear lobes

If bruises be present what is the condition of the subcutaneous tissues?

② Laceration -

- Below - left eyebrow - 1 x 1cm
- Below Rt eyebrow - 0.5 x 0.5cm
- Rt maxilla - face - 0.5 x 1cm

(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).

③ Fractures -

18. Other injuries discovered by external examination or palpation as fractures etc.

- C2-C3 dislocation # ⊕
- Rt knee joint # ⊕

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

Multiple abrasions over limbs & hands ⊕

III. Internal Examination—

9. Head—

(i) Injuries under the scalp, their nature.

Intact

(ii) **Skull**—Vault and base—describe fractures, their sites, dimensions, directions, etc.

Skull Intact

(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).

Haematoma ⊕ at basal lobes.
Rest material is unjerked, intact.

20. Thorax—

(a) Walls, ribs, cartilages — Intact, unjerked

(b) Pleura — Intact, unjerked

(c) Larynx, Trachea and Bronchi. — Crushed upper 1/3rd of trachea, lungs ⊕, clots ⊕

(d) Right Lung }
(e) Left Lung } Always unjerked, Intact

(f) Pericardium }
(g) Heart with weight } Clots ⊕, unjerked, pale

(h) Large vessels

Additional remarks.

Abdomen

Walls

Parietoneum

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, ungested

mouth closed, teeth - Intact, tongue - inside, Pharynx - Intact

Approx. 200ml yellowish food material, semi-digested, non-smell

feces & gases ⊕

Intact, ungested

Empty

Semen ⊕, stool passed

Intact

Spinal Cord —

7

C2-C3 vertebral (linear # ⊕)

Spinal cord dislocation
and tearing at that level.

Rest is congested, intact.

Opinion as to the cause
probable cause of death.

Sudden cardiorespiratory arrest due
to severe spinal & neck injuries,
most probably.



Dated 6/1/18 200

J. B. [Signature]
(Signature)
(Dr. B. [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 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

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
Analyser is necessary or it is to be destroyed.

J. M. S.
Civil Surgeon or M. M. S. Officer

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)

P.M. - 10/10/2018

[Signature]
PC 2332
6/10/2018

[Signature]
(अनिल शां. देरकर)
पोलीस उप-निरीक्षक
पो.स्ते. *[Signature]*

J. M. S.
Civil Surgeon

