

P.M. 110: 10/84

C.M. 670

Memorandum of a post-mortem examination held at **RURAL HOSPITAL LIMRED** Dispensary Hospital

on the dead body of **KUSTAM. WADGULI** of **Adyalwale Layaut Limred**
MATE Village
City

Taluka **Limred**, District **Naypur**, by **DR. T. B. PACHABHAIYYE**

I. General Particulars—

1. (a) By whom was the corpse sent? **P. C. Pravin Pawar**
B.No. 919
- (b) Name of place from which sent. **Rural Hospital Limred,**
- (c) Distance of place from which sent. **1 km**

2. By whom was the corpse brought? **P. C. Pravin Pawar**
B.No. 919

3. By whom identified?

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

31/3/2018 at 7.45 AM

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

31/3/2018 at 8.00 AM

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

31/3/2018 at 9.00 AM.

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.

According to police inquest, the victim was hit by vehicle when going from Jagitharajeth toward Bypass road while walking, due to which he sustained head injury & died while receiving treatment at Rural Hospital Limred.

(P.T.O)

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.

← NAD →

II. External Examination—

7. Sex, apparent age, race or caste.

Approx 69 yrs, Male, SC

Description of clothes and of ornaments on the body.

① Light brownish grey shirt & black dotted checks pattern & similar to orange white Bahiyah, white grey printed underwear.

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

Ring finger in a middle finger

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

① Black mark on right umbilical region on right lateral aspect.
② Black mark on left lumbar region of abdomen

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.

← NAD →

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.

Rigor Mortis
Present in both upper
& lower limbs

12. 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.

} ← None →

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

Natural.
e/o, Bleeding through both
nostrils.
Tongue inside mouth.
Teeth intact, ears (N)

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

} ← NAD →

15. Injuries to external genitals.
Indication of purging.

} None

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.

Body in supine position
Both upper limbs
extended & abducted
Right wrist - cupinated & flexed at wrist
Both lower limbs extended
& abducted slightly

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.

Superficial
Abrasion of LW right side
of parietal region
(posterior aspect)

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

? ← NAD →

(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).

↓
← NAD →

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

① # compound fracture back of
Rt Parietal region skull

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

} ← yes →

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).

Abasion to low posterior aspect of
 Right parietal region
 skull, irregular
 (compound)
 (3x2)x3 cm
 approximately
 extending towards right
 temporal region of
 skull

← Intact →

Brain tissue damaged superficially
 in right posterior parietal region

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
 & pale

Both lungs shows diffuse
 scattered black pigmentation,
 pale

Intact & pale

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

Teeth intact, tongue inside mouth.

} Intact & pale
contains fluid, NO offensive smell
contains semidigested ^{food} matter
contains faecal material.

pale at cut section

} Intact
& pale

Intact

} ← NAD →

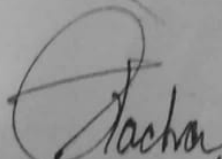
} viscera not preserved

← Not examined →

Opinion as to the cause
probable cause of death.

Probable cause of death is "Sudden
Haemotoxic shock from traumatic
Head injury causing damage to
vital areas of Brain leading to
Sudden cardiorespiratory arrest."

Dated 31/3/2008.


CDR. T. B. Pachabhaiyye (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.

Place Dispensary
Civil Hospital

Rural Hospital 2098.
Umred.

Forwarded to the Police Sub-Inspector

for information with reference to his No.

P.C. Manik Pawar, B.No. 919
218/2018 of 279, 384 (ST) 2764/134

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.

← Not preserved →

Tacha
Civil Surgeon or M.M.S. Officer
(Dr. T. B. Pachabhaiyye)

Copy forwarded with compliments to the Civil Surgeon,

for information.

Tacha
M.M.S. Officer
(Dr. T. B. Pachabhaiyye)

Medical Officer
Rural Hospital, Umred on
Dist- Nagpur

Seen and examined by the Civil Surgeon,

200

Remarks of the Civil Surgeon,

(if any)

Civil Surgeon