

FORM COMP AA

(sec Rules 253 (c)] 254 (c) (iii), 254 (80 255 (1) (iv))

REPORT ABOUT THE MOTOR VEHICLES ACCIDENTS

1	Name of the Police Station	Ardhapur Dist. Nanded
2	CR.NO./TAR No./SDE No.	251/2019 U/s 279, 304(a) of IPC
3	Date, Time and Place of the accident.	02/10/2019 at 1345Ardhapur to Tamsa Road by pass chouk Ardhapur Tq Ardhapur Dist Nanded
4	Name of the Injured / Deceased	1) Balaji Gunaji Kokate age 42 years 2) Pundlik Damaji Shinde age 55 yers r/o Tirkaswade tq.Mudkhed Dist Nanded
5	Name of Hospital to Which he/she was removed	Govt. Hospital Nanded
6	Number of vehicles and type of the vehicle	MH 35 K 3690 Truck
7	Name and address of the Driver of the vehicle with particulars or Driving License of the said Driver and the address of the Issuing Authority of the said Driving License. The number of Badge in case of Public Service Vehicle and the address of the Issuing Authority of the said Badge.	Sureshkumar Kapurchad Dhomne age 40 years r/o Mundirpar tq.dist.Gondia MH 35 201000044790 RTO Gondia
8	Name and Address of the Owner of the vehicle as it stands on the date of the accident.	Surjeetkumar Tejendrasing Chhabda r/o kudwa line ganj eard Gondia tq.dist.Gondia
9	Name and address of the insurance Company with whom the vehicle was insured and the Divisional office of the said insurance Company.	Chola MS General Insurance Copmany
10	Number of Insurance Policy/Insurance Certificate and the date of Validity of the insurance Policy/Insurance Certificate.	3379/01969794/000/01 01/03/2020
11	Action taken if any and the result there of	An offence has been registered against the accused. After completion of investigation Charge-sheet has been submitted.

Inspector of Police
Police Station Ardhapur
Dist. Nanded

जबाब

मी, श्रीपती शेवंतराव येळणे वय 30 वर्षे, व्यवसाय- चालक रा. तिरकसवाडी ता. मुदखेड जि. नांदेड मो.नं. 8007593860

समक्ष पो.स्टेला हजर येवून जबाब देतो की, मी वरील ठिकाणचा राहणारा असून मला दोन मामा असून नामे माझा मोठा मामा नामे बालाजी गुणाजी कोकाटे हा आचारी काम करतो व छोटा मामा रामराव हा शेती करतो.

आज दि. 02/10/2019 रोजी दुपारी पावणे दोन वाजताचे सुमारास मी व शिवाजी अंबाजी खुपसे, गजानन चिंतामण येळणे असे मिळून माझी कार क्र. MH-13-BN-2011 ने अर्धापुर येथून तिरकसवाडीकडे जात आसताना माझा मोठा मामा बालाजी गुणाजी कोकाटे व आमचे गावातील पुंडलिक दामाजी शिंदे रा. तिरकसवाडी ता. मुदखेड हे त्यांचे स्पलेंडर मोटार सायकल क्र. MH-26-U-5440 ने अर्धापुर ते तामसा रोडने तिरकसवाडीकडे जात असताना बायपास रोड चौकात, ट्रक क्र. MH-35-K-3690 च्या चालकाने वारंगा फाटा बायपास कडून येत असताना त्याचे ताब्यातील ट्रक हयगई व निष्काळजीपणे चालवून माझा मोठा मामा चालवित असलेल्या स्पलेंडर मोटार सायकल क्र. MH-26-U-5440 यास जोराची धडक दिली त्यामुळे माझ्या मामा व त्यांची मोटार सायकल ट्रकचे डिझेल टांकीला अडकून ट्रकसोबत फरकटत गेले व रोडचे दुभाजक वट्याला अडकून माझा मामा बालाजी गुणाजी कोकाटे याचे डोक्यास, पायाला, हाताला गंभीर मार लागून जागीच मरण पावला त्यास महामार्ग सुरक्षा पथक वसमत फाटा येथील ऑम्बुलन्सने प्रा. आरोग्य केंद्र, अर्धापुर येथे शवविच्छेदन करणेकामी दाखल केले. तसेच त्याचे सोबत असलेला आमचे गावातील पुंडलिक दामाजी शिंदे याचे डोक्यास मार लागल्याने त्यांना उपचारकामी 108 ऑम्बुलन्स ने सरकारी दवाखाना विष्णुपुरी नांदेड नेले असता तेथे डॉक्टरांनी तपासून पुंडलिक दामाजी शिंदे मयत झाला असल्याचे सांगितले सदरची घटना मी प्रत्यक्ष पाहिली असून सदर घटनेस ट्रक क्र. MH-35-K-3690 चा चालक नामे सुरेश कपुरचंद डोमणे वय 41 वर्षे, रा. गोंदिया जि. गोंदिया हा कारणीभूत असून त्यास आम्ही प्रत्यक्ष पाहिले असून त्यास पाहून ओळखतो.

तरी दि.02/10/2019 रोजी पावणे दोन वाजताचे सुमारास बालाजी गुणाजी कोकाटे व पुंडलिक दामाजी शिंदे रा. तिरकसवाडी ता. मुदखेड ह्यांचे मरणास ट्रक क्र. MH-35-K-3690 चा चालक नामे सुरेश कपुरचंद डोमणे वय 41 वर्षे, रा. गोंदिया जि. गोंदिया याने त्याचे ताब्यातील ट्रक हयगई व निष्काळजीपणे चालवून त्यांचे मरणास कारणीभूत झाला आहे म्हणून त्याचेवर योग्य ती कायदेशीर कार्यवाही करावी हि विनंती.

समक्ष

हा जबाब दिला सही

[Signature]

[Signature]

दि 2/10/2019
5 PM - 30 वर
वेळ 17.58 वा.
भाग 1 ते 5
बु.र.न.
251/2019
कलम 279,
304(C) I.P.C.
प्रमाणे जुद्धा
पुर्वत कृष्ण
पुर्वत तपास
भा.पो.नि.
भा.भा.चे
श्रीकांत P.S.I
आगलावे सा.
याचे बडे दिसा
साहे

[Signature]
ठाणे अंमलदार
पोलीस स्टेशन अर्धापुर

CRIME DETAILS FORM

घटनास्थळाचा पंचनामा/गुन्हयाचा तपसील नमुना

i) राज्य महाराष्ट्र जिल्हा नांदेड पोलीस स्टेशन अर्धापुर पहीली खबर/कार्यवाही क्र. 25/2019 दिनांक 02/10/2019

ii) अधिनियम व कलम :- 279, 304(A) भा.द.वि

iii) घटनेचे ठिकाण दाखविण्याचे :-

नांव :- सीपती फेळो वडीलाचे/पतीचे नांव :- जेवंतराव फेळो
वय 30 वर्ष, व्यवसाय :- च्यतण जात :- मोबाईल नंबर :- 8007593860
रा. निरकस वडी तालुका मुदफे जिल्हा नांदेड राज्य महाराष्ट्र

iv) गुन्हयाचा प्रकार (गुन्हयाचे सर्व पध्दतीसह) :-

i) प्रधान शिर्ष :- अपघात

ii) प्रधान शिर्षचे वर्गीकरण :-

iii) पध्दती :- मातुड K उडुक ये चानकांनी आपले ताळ्यातील वाळन
छपगडिने व निष्काळी पनात्रे च्यतण लम 26 प 5440 प मो सा.ला
दडक देवून. सपड मो.सा. च्य च्यतण व इतर एक आणव्या मृत्पुस.
काळीभुत.

iv) वापरलेली वाहणे :-

v) केलेले वेषांतर/केलेली बतावणी :-

vi) वापरलेली भाषा/बोली भाषा :-

vii) विशेष वैशिष्ट्य-1 :-

विशेष वैशिष्ट्य-2 :-

विशेष वैशिष्ट्य-3 :-

viii) घटनेच्या ठिकाणाचा प्रकार :-

सदस्ये घनास्थळ हे राष्ट्रीय महामार्ग 16 वरिल
पडि ले वसतुपाच वापपावडिल. नामखा चोरस्थाव
माहे.

ix) अंतर्भूत मालमत्तेचा प्रकार :-

1) :-

2) :-

5. वळीचा तपशिल (अवश्यक असल्यास स्वतंत्र कागद जोडावा) :-

अ. क्र	संपुर्ण नांव	जन्म तारीख / वय	लिंग	राष्ट्रीयत्व	धर्म	जाती/ जमात	व्यवसाय	पत्ता	दुखापत गंभीर/ साधी	साधने/ हत्यार
1	2	3	4	5	6	7	8	9	10	11
१)	धानाजी गुवाठी कोकार	५२ वर्षे	पुरुष	भारतीय	हिंदू		मदारी	य. गिरेकर वाडी ता. मुदकेड जि. नांदेड	मदारी	
२)	पुंजिके दामाजी शिंदे	७७ वर्षे	पुरुष	भारतीय	हिंदू		मदारी	य. गिरेकर वाडी ता. मुदकेड जि. नांदेड	मदारी	

6. मुन्हयाचा हेतु :-

मम ३६१८ ३६९० चे चानवानी भापने ताळ्यातील हूक धगणीने व गिरेकरवाडीपनाचे चानवून मम २६ प ७५५० चा स्नेड मो. वा. ना. वरून सपर मो. वा. चानक वरुता वकठाण प्रये घालून कारणीवून माना.

7. चोरीच्या/अतंभुत मालमत्तेचा तपशील :-

8. घटनेच्या जागेचे वर्णन :-

भासा मुमुद पंचाना जोखे भवशिले पोखीत कपीन भागनाचे चांगी कळविले की, तातुला बापपाम चोखपावर हूक क्र. मम ३६१८ ३६९० चे चानवानी वाटेला फाव बापपाम कडून मुन भलताना व्याप. ताळ्यातील हूक धगणीने व गिरेकरवाडीपनाचे चानवून सपर मो. वा. ना. वरून सपर मो. वा. ना. वरुता वकठाण प्रये घालून कारणीवून माना.

चानाडी गुणाडी कोकाटे व पुंडलिक दापाडी शिंदे रा. निरक्षरपडी
 ता. मुफळेड यांचे मूलक कारणीभूत ठरल्यावस्तु पो. रे. मद्यप्रिद. क्षेत्रे.
 गुरत २५/११ कलम २५१, ३०५ (अ) मा.द.क्रि. प्रमाणे गुन्ध दाखल प्रामु
 सदरिल गुन्धामध्ये धनास्थळांचे डिपॉजिट परिसीती प्रमाणे धनास्थळ पंचनामा
 करावयाचा आहे प्रमाण पंच म्हणत व्हात रथ भले कळविलेपसून गांधी
 सदर ठिकाणी व्हात गांधी. धाकेची सदर धनास्थळावर पोडपक्रि कापित
 प्रामाणिके व प्रिप्रापि क्षीपती वेवतगाव प्रेवणे व्हात प्रामुन शालीय
 प्रिप्रापि याने धाकेची प्रेडव्याने व्हीकत सांगुन धनास्थळ वळविले.
 सदरच्या धनास्थळांचे भयलेकन कोणे शलता सदरचे धना
 हे राष्ट्रीय महामार्ग क्र. ७६ वरिल पडिले ते वतमत फाटा बापपास
 वरिल नामसा बापपास चारस्थपावर भक्षुन बापपासमधिल नामना गुणोड
 कौमुवर मो.सा. व हूक. एकमेकांल धडकेनेच्या रिवाजापासून भवणे
 १०० ते १५० फुट अंतरपर्यंत रोडवर फाटा दिलुन हेत भक्षुन सदरिल रिवाज-
 पासुन २४ फुट अंतरावर पसमत फाटा कोडे जाणारे रोडचे वळवला.
 भक्षुनेले त्रिकोणी डिक्कपडर हे वस्थकडिल वळवते पूर्णपणे उरून
 सदरिल डिक्कपडरमध्ये हूकचे पोन्ही रापर धुवुन हूकचे चाकाचे
 गांधी पुडलेल्या डिपॉजिट भक्षुन सदरिल डिक्कपडर हे डापीनीपासून
 भवणे दोन फुट उंचीचे भक्षुन सदरिल डिक्कपडर वर मध्यमागी
 भात फेरेक्षीपम ची भवणे ०१ ते ०४ फुट उंचीची पापी पावलेली
 डिक्कपडर भक्षुन सदर त्रिकोणी डिक्कपडर वाढलेले छिलेक
 पण फिले पेंत भक्षुन. सदर डिक्कपडरच्या वळवला मो.सा. पुडले
 डिक्कपडर भक्षुन. सदर मो.सा. चे.स.रा.पड, व्हडल हे मो.सा.
 चे.सि.स. पासुन वेमके झालेले डिक्कपडर भक्षुन तसेच सदरिल मो.
 चे व्हाकभप पण गांधीचे चेपिल पासुन वेमके झालेचे डिपॉजिट भात
 सदरिल मो.सा. हूकचे धडकेने पूर्णपणे व्हीलेली भक्षुन मो.सा.
 उतापार हे रोडवर पुडलेले डिक्कपडर भक्षुन. सदरिल हूकच्या

चाकाचे व्रण पडलेल्या काजुल रेषेवर रवताचे तरेडे डाग दिलेले
येत आहे.

संपर धव्नासध्वाची चतुःलीला पुढीलप्रमाणे.

- १) पूर्वेत : प्रवण्य धारणे भांचे कांधलेली बाजूची दुवाणे.
- २) पश्चिमेत : अधोपेकडे जाणारा अक्षी रेष.
- ३) दक्षिणेत : नांडेकडे जाणारा अक्षी रेष (वसमतानाए)
- ४) उत्तरेत : दिगामीकडे जाणारा रेष. (पडि)

प्रमा प्रव्याच्या धव्नासध्वाच्या चतुःलीला मनुज
सध्या पंचनामा मनुज पंचालमधु दिव्या परिष्पीतीप्रमाणे स्वच्छ
सुपप्रव्याच्यात केना कक्षत एावर भातच्या ५ पंचाच्या सध्या
आहे.

शकामे - १९° ११' १३"

रेखात - ७७° २०' ११"

(5)

FORM - V

A series of horizontal dashed lines for writing, with a diagonal line drawn across the page from the top center towards the bottom left.

Faint, illegible text at the bottom left corner, possibly a stamp or signature.

CJPN (O-127)-9-2008-5,00,000 Bks./4 lvs.--PA4*
G. R., G. D., No. 733/33, dated 16-6-41 and
G. R., H. and L. G. D., No. 733/33, dated 11-12-47,
[As Surgeon General with the Govt. of Maharashtra, Bombay's
Order No. FRM/1462/19357/1, dated 4-7-62.]



Memorandum of a post-mortem examination held at Primary Health Centre
of the dead body of BALAJI GUNAJI KOKATE
Taluka MUDKHED, District NANDED, by Dr. R. S. MORE
Village Ardhapur
of TIRKASWADI
City

मा.क्र./प्रा.आ.के.सं/438/आ.सं/अ.सं/२०१९
न्यायालय प्रथमिक आ.के.सं. अर्धपुर
ता. अर्धपुर, जि. नांदेड
दिनांक 02/11/2019

Dispensary
Hospital

I. General Particulars—

1. (a) By whom was the corpse sent? PSI Mr. K. M. AAGLAVE police station Ardhapur
- (b) Name of place from which sent. Brought dead by Highway Ambulance Ardhapur
- (c) Distance of place from which sent. on 2/10/2019 at 2:50 pm
2. By whom was the corpse brought? ASI Mr. G. N. PANPATTE police station Ardhapur
3. By whom identified? ASI Mr. G. N. PANPATTE police station Ardhapur
4. The date, hour and minute of its receipt. 02/10/2019 4:05 pm
- (a) The date, hour and minute of beginning post-mortem examination. 02/10/2019 4:10 pm
- (b) The date, hour and minute of ending post-mortem examination. 02/10/2019 5:10 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 to know exact cause of death, post-mortem examination is requested.

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.



NOT APPLICABLE

II. External Examination—

7. Sex, apparent age, race or caste.

Male, 42 years, Hindu.

Description of clothes and of ornaments on the body.

White colored shirt, Black brown colored pant, maroon colored underwear, red colored Kardora around waist with key tied to it, beaded string around neck.

8. Condition of the clothes—

Whether wet with water, stained with blood or soiled with vomit or faecal matter.

Shirt stained with blood and mud, pant torn at knee joint

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

Body duly identified by the investigating officer. Identification mark - Mole over 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.

Not Applicable

15. Injuries to external genitals.
Indication of purging

Intact, no injury
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.

Body in supine position with
1) Right upper extremity adducted at shoulder joint, extended at elbow joint & Flexion at interphalangeal joints.
2) Left upper extremity adducted at shoulder joint, extended at elbow joint. Forehand abducted with Flexion at interphalangeal joints
3) Both lower extremities straight with laterally rotated feet.

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

- ① CLW over Left parieto-temporal area 4x2x2cm banded oblique, irregular margin.
- ② Extensive crush injury seen over right axilla exposing underlying muscles and bone with irregular shape & size.
- ③ Extensive crush injury seen over left popliteal area involving upper calf exposing underlying muscles and bone, irregular in shape and size.
- ④ Extensive crush injury seen over medial side of left scrotum and left inguinal area exposing underlying muscles & bone, irregular in shape & size.
- ⑤ Extensive crush injury over left foot exposing underlying muscles & bone irregular in shape & size. Skin over foot hanging.
- ⑥ Extensive print abrasion over right Hypochondriac area 20x10 cm.
- ⑦ Print abrasion over left scapular area 5x10cm
- ⑧ Print abrasion over left humeral area 6x5cm.
- ⑨ Print abrasion over left bicep 10x5cm.
- ⑩ Print abrasion over left tricep 3x4cm
- ⑪ Abrasion over left elbow 2x2cm
- ⑫ Print abrasion over left thigh anterior aspect 10x3

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).

Above injuries caused in Road Traffic Accident

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

- ① Fracture of right forearm in midarea.
- ② Fracture of Left Upper tibia.

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

Yes, injuries shown against serial Nos. 17 and 18 are ante-mortem injuries.

15. Injuries to external genitals.
Indication of purging

Intact, no injury
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.

Body in supine position with
1) Right upper extremity adducted at shoulder joint, extended at elbow joint & Flexion at interphalangeal joints.
2) Left upper extremity adducted at shoulder joint, extended at elbow joint. Forehand abducted with Flexion at interphalangeal joints
3) Both lower extremities straight with laterally rotated feet.

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

- ① CLW over Left parieto-temporal area ^{Rms} 4x2x2cm bone deep oblique, irregular margin.
- ② Extensive crush injury seen over right axilla exposing underlying muscles and bone with irregular shape & size.
- ③ Extensive crush injury seen over left popliteal area, involving upper calf exposing underlying muscles and bone, irregular in shape and size.
- ④ Extensive crush injury seen over medial side of left scrotum and left inguinal area exposing underlying muscles & bone, irregular in shape & size.
- ⑤ Extensive crush injury over left foot exposing underlying muscles & bone irregular in shape & size. Skin over foot hanging.
- ⑥ Extensive print abrasion over right Hypochondriac area 20x10 cm.
- ⑦ Print abrasion over left scapular area 5x10 cm.
- ⑧ Print abrasion over left lumbar area 6x5 cm.
- ⑨ Print abrasion over left bicep 10x5 cm.
- ⑩ Print abrasion over left bicep 3x4 cm.
- ⑪ Abrasion over left elbow 2x2 cm.
- ⑫ Print abrasion over left thigh anterior aspect 10x3 cm.

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).

Above injuries caused in Road Traffic Accident.

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

- ① fracture of right forearm in midarea.
- ② fracture of Left upper tibia.

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

Yes, injuries shown against serial Nos. 17 and 18 are ante-mortem injuries.

Condition of body.—
Whether well-nourished, thin
or emaciated, warm or cold.

Average nourished and built.
Cold body.

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

Rigor Mortis present upto neck area
Rigor Mortis absent lower down.

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.

No signs of decomposition seen.
Post-mortem lividity absent.

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

features natural
Both Eyes closed, Tongue within oral cavity,
Mouth partly opened, Bleeding from both nostrils
Bleeding from left ear.
No oozing from mouth.

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

face smeared with blood.

21. Abdomen—

Walls Intact

Peritoneum Intact, no injury.

Cavity Intact, no injury.
No blood or free fluid present in peritoneal cavity.Buccal Cavity, teeth, tongue
and Pharynx. Intact, no injury.

Esophagus Intact, no injury.

Stomach and its contents Intact, distended with semidigested food, no
peculiar smell perceived, mucosa - pale.Small intestine and its
contents. Intact, distended with gases.Large intestine and its
contents. Intact, distended with gases and feces.Liver (with weight) and gall
bladder. Intact, no injury, pale.

Pancreas and Suprarenals Intact, no injury.

Spleen with weight Intact, no injury, pale.

Kidneys with weight Intact, no injury, pale.

Bladder Intact, no injury, empty.

Organs of generations No abnormality detected.

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.

As per stomach content time of death is
within 4 to 6 hours of his last meal
consumed.

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

Viscera not retained for chemical examination.

III. Internal Examination—

19. Head—

- (i) Injuries under the scalp, their nature. Underscalp haematoma present over left parieto-temporal area 10x6 cm.
- (ii) **Skull**—Vault and base—describe fractures, their sites, dimensions, directions, etc. Intact, no fracture
- (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).
 - Subdural haemorrhage present over left parieto-temporal area
 - Patchy subarachnoid hemorrhage present over right parietal area.
 - Brain matter congested, oedematous with blood clot present in corpus callosum area.

20. Thorax—

- (a) Walls, ribs, cartilages Fracture of ribs on right thoracic cage in 2, 3, 4, 5, 6 ribs
 fracture of ribs on left thoracic cage in 6, 7, 8, 9 ribs
- (b) Pleura Pleura disrupted due to inward pointing ends of fractured ribs over both sides
- (c) Larynx, Trachea and Bronchi. Intact, no injury.
- (d) Right Lung Intact, no injury
- (e) Left Lung Intact, no injury.
- (f) Pericardium Intact, no injury
 No abnormal collection in pericardium
- (g) Heart with weight Intact, no injury
- (h) Large vessels Intact, no injury
- (j) Additional remarks. Nil


22. *Spine and Spinal Cord—

Intact

Opinion as to the cause
probable cause of death.

4 HAEMORRHAGIC SHOCK due to injury to vital organ
Brain with POLYTRAUMA in Road Traffic Accident.

Dated 25/10/2019 200


Dr. R. S. MORE
Medical Officer
Primary Health Centre Ardhapur.

*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*.

P. M. No. 21/2019

200

Place Dispensary
Civil Hospital

Primary Health Centre
Ardhapur

200 2019

Forwarded to the Police Sub-Inspector Police station Ardhapur

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.



Medical Officer
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

on

Remarks of the Civil Surgeon,

(if any)

Civil Surgeon

CJPN (O-127)-9-2008-5,00,000 Bks./4 lvs.--PA4*
G. P. O. D., No. 733/33, dated 16-6-41 and
G. P. O. D., No. 733/33, dated 11-12-47,
and L. G. D., No. 733/33, dated 11-12-47,
vide Surgeon General with the Govt. of Maharashtra, Bombay's
Letter No. FRM/1462/19357/1, dated 4-7-62.]

MLPM NO. 941/19

Dispensary
Hospital

Memorandum of a post-mortem examination held at Dr. S. C. GMC Nanded 02/10/19

on the dead body of Pundlik Damaji of Village Tirakaswadi
Shinde of City

Taluka Mudkhed, District Nanded by Dr. S. B. Madewad
Dr. A. A. Chavan

I. General Particulars—

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

N. P. C. W. K. Kamble B. no. 2801
Nanded Gramin Police Station

(b) Name of place from
which sent.

Casualty
Dr. S. C. GMC Nanded

(c) Distance of place
from which sent.

2. By whom was the corpse
brought?

P. C. Patil B. no. 3327
Nanded Gramin Police Station

3. By whom identified?

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

02/10/19
04:25 PM

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

02/10/19
04:40 PM

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

02/10/19
05:40 PM

5. Substance of accompa-
nying Report from Police
Officer or Magistrate,
with the date of

AS per police inquest and requisition, deceased
had history road traffic accident on 02/10/19 at
13:30 hr for that he was brought to Dr. S. C. GMC
Nanded, doctors on duty declared brought
dead on 02/10/19 at 15:10hr
of death: Road traffic accide

6. If not examined at Dispensary or Hospital—

ELIPE OUMQJM

(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.

not applicable

II. External Examination—

7. Sex, apparent age, race or caste.

Male, 55 years

Description of clothes and of ornaments on the body.

white coloured dhoti
white coloured shirt
white sanda baniyan
white coloured kiceha
Red waist thread

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

dry intact, handed over pcon duty

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

Body identified by investigating officer on duty.
teeth-16/16

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

10. Condition of body—Whether well-nourished, thin or emaciated; warm or cold.

Average built/cold

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

Partially present on whole body parts

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.

No signs of decomposition
Post mortem lividity present on posterior aspect of body except pressure area

not fixed

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

Features: natural
eyes - closed
mouth - closed
tongue - inside the mouth
oozing of blood from left nostril and left angle of mouth

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

dry pale

15. Injuries to external genitals.
Indication of purging.

No injury to external genitals
Purging in the form of semen present

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.

Straight

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 lacerated wound present over left temporal region
of size 3cm x 0.5cm x tissue deep, red
- ② lacerated wound present over left ear pinna
on upper side of size 1cm x 0.5cm x tissue deep, red
- ③ multiple abrasions present over right cheek of
varying size from 1cm x 0.5cm to 2 x 0.5cm, red
- ④ contused abrasion present below ^{right} nostril of
size 2cm x 1cm, red
- ⑤ graze abrasion present over tip of right shoulder
on posterior aspect of size 5cm x 2cm directed
upwards, red
- ⑥ contused abrasion present over right elbow
on lateral aspect of size 4cm x 2cm, red
- ⑦ contused abrasion present over right knee
on lateral aspect of size 3cm x 2cm, red.
- ⑧ 2 circular imprint abrasions present over left
thigh on upper part separated about 4cm apart
from each other of size 2cm in diameter, red
- ⑨ lacerated wound present over mid part of
left thigh on lateral aspect of size 6cm x 0.5cm x
tissue deep, red
- ⑩ Abrasion present over left knee on lateral aspect
of size 2cm x 0.5cm, red.

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.

(a) Can you say definitely

II. Internal Examination

19. Head

(i) Injuries under the scalp, their nature.

underscap haematoma present over both temporal region and occipital region

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

Fracture present over sutural line at right temporo parietal region extending upto left temporo parietal region
fracture margins irregular infiltrate with blood.

(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).

Meninges: Intact, congested.

Brain: multiple contusions present over both cerebral cortex & cerebellum at places.

20. Thorax

(a) Walls, ribs, cartilages

linear fracture present over left 2nd, 3rd, 4th ribs at posterior axillary line. Fractures margins irregular and infiltrate with blood. Haemorrhages present in surrounding intercostal muscles

(b) Pleura

Intact no fluid

(c) Larynx, Trachea and Bronchi.

Intact, no foreign body

(d) Right Lung

Intact, congested

(e) Left Lung

(f) Pericardium

Intact

(g) Heart with weight

Intact, blood and blood clots present

(h) Large vessels

15. Injuries to external genitals.
Indication of purging.

No injury to external genitals
Purging in the form of semen present

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.

Straight

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.

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of size 3cm x 0.5cm x tissue deep, red
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on upper side of size 1cm x 0.5cm x tissue deep, red
- ③ multiple abrasions present over right Cheeze of
varying size from 1cm x 0.5cm to 2 x 0.5cm, red
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size 2cm x 1cm, red
- ⑤ Contused abrasion present over tip of right shoulder
on posterior aspect of size 5cm x 2cm directed
upwards, red
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- ⑦ contused abrasion present over right knee
on lateral aspect of size 3cm x 2cm, red.
- ⑧ 2 circular imprint abrasions present over left
thigh on upper part separated about 4cm apart
from each other of size 2cm in diameter, red
- ⑨ lacerated wound present over mid part of
left thigh on lateral aspect of size 6cm x 0.5cm x
tissue deep, red
- ⑩ Abrasion present over left knee on lateral aspect
of size 2cm x 0.5cm, red.

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.

(a) Can you say definitely
that the injuries shown
against serial Nos. 17.

Yes, Antemortem

II. Internal Examination

19. Head

(i) Injuries under the scalp, their nature.

underscap haematoma present over both temporal region and occipital region

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

Fracture present over supraorbital line of right temporo parietal region extending up to left temporo parietal region
fracture margins irregular infiltrate with blood.

(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).

Meninges: Intact, congested.

Brain: multiple contusions present over both cerebral cortex & cerebellum at places.

20. Thorax

(a) Walls, ribs, cartilages

linear fracture present over left 2nd, 3rd, 4th ribs at posterior axillary line. Fracture margins irregular and infiltrate with blood. Haemorrhages present in surrounding intercostal muscles

(b) Pleura

Intact no fluid

(c) Larynx, Trachea and Bronchi.

Intact no foreign body

(d) Right Lung

Intact, congested

(e) Left Lung

(f) Pericardium

Intact

(g) Heart with weight

Intact, blood and blood clots present

(h) Large vessels

21. Abdomen—

Walls

Intact

Pitoneum

Intact, no free fluid

Cavity

Buccal Cavity, teeth, tongue and Pharynx.

Intact, no foreign body

Oesophagus

Intact

Stomach and its contents

Intact, about 800ml yellowish coloured fluid with semidigested food material present no abnormal smell perceived

Small intestine and its contents.

Intact, partly loaded with faeces and gases

Large intestine and its contents.

Liver (with weight) and gall bladder.

Intact, congested

Pancreas and Suprarenals

Intact, congested

Spleen with weight

Kidneys with weight

Bladder

Intact, empty

Organs of generations

Intact

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.

Nil

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

Viscera not preserved

22. Spine and Spinal Cord —

Intact, not opened

बोबनरी ३१/१०/१९

मृतक को निम्नलिखित कारणों से मृत्यु हुई

३१/१०/१९

Opinion as to the cause probable cause of death.

"Head injury"

(Dr. S.B. Madewad)

Asst. Professor
Dept. Of Forensic Medicine & Toxicology
Dr. Shankarrao Chavan Govt.
Medical College, Nanded

(Dr. A.A. Chavan)

A.A. Chavan

(Dr. A.A. Chavan)
Resident
Dept. of Forensic Medicine
Dr. S.C.G.M.C. Vishnupur
Nanded-431608



(Dr. S.B. Madewad)
Asst. Professor
Dept. Of Forensic Medicine & Toxicology,
Dr. Shankarrao Chavan Govt.
Medical College, Nanded.

(Signature)

Dated 02/10/19 200

*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.
Do not cut the viscera before they have been inspected in situ.

MLPM No. 941/19

8

No. 02/10/19

200

Place Dispensary
Civil Hospital

Dr. S.C.G.M.C. Nanded

200

Forwarded to the Police Sub-Inspector Nanded Gramin Police station

for information with reference to his No. FmLC/4257/19 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.

A. A. Chavan
(Dr. A. A. Chavan)
Resident
Dept. of Forensic Medicine
Dr. S.C.G.M.C. Vishnupur
Nanded-431608

S. B. Madewar
(Dr. S. B. Madewar)
Asst. Professor
Civil Surgeon of M. M. S. Officer
Dept. of Forensic Medicine & Toxicology
Dr. Shankarrao Chavan Govt.
Medical College, Nanded.

Copy forwarded with compliments to the Civil Surgeon.

for information.



Seen and examined by the Civil Surgeon,

on

200

Remarks of the Civil Surgeon,

(if any)

मूळ प्रत मिळाली -----
वेगान्याचे नांव/हद्दा -----