

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	Tamsa dist.Nanded
2	CR.NO./TAR No./SDE No.	40/2024 U/S 279, 304(a) of I.P.C
3	Date, Time and Place of the accident.	23/04/2024 at 20.00 hrs Tamsa to Himayatnagar road near Shetmajurwadi Tq. Hadgaon dist. Nanded.
4	Name of the Injured / Deceased	Suresh Laxman Gaikwad age 50 year r/o Shetmajurwadi Tq. Hadgaon 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 29 CC 2547 Motor cycle
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.	Amol Madhavrao Shete age 30 year r/o Shetmajurwadi Tq. Hadgaon dist. Nanded. MH 26 20230020853 RTO Nanded
8	Name and Address of the Owner of the vehicle as it stands on the date of the accident.	Rahul Shriram Kanakpure r/o Bramhanwada tq. Umarkhed dist. Yavatmal
9	Name and address of the insurance Company with whom the vehicle was insured and the Divisional office of the said insurance Company.	SBI General Insurance comp. ltd.
10	Number of Insurance Policy/ Insurance Certificate and the date of Validity of the insurance Policy/ Insurance Certificate.	HERO/1643313 15/10/2028
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 Tamsa
Dist. Nanded (M.S)

10

N.C.R.B (एन.सी.आर.बी)
I.I.F.-I (एकीकृत अन्वेषण फॉर्म - १)

FIRST INFORMATION REPORT

(Under Section 154 Cr.P.C.)

प्रथम खबर अहवाल
(कलम १५४ फौजदारी प्रक्रिया संहिता)

1. District (जिल्हा): नांदेड

P.S.(ठाणे): तामसा

FIR No.(प्रथम खबर क्र.): 0040

Year (वर्ष): 2024

Date and Time of FIR (प्र. ख. दिनांक आणि वेळ): 05/05/2024 20:36

S.No. (अ.क्र.)	Acts (अधिनियम)	Sections (कलम)
1	भारतीय दंड संहिता १८६०	२७९
2	भारतीय दंड संहिता १८६०	304-A

3. (a) Occurrence of offence (गुन्ह्याची घटना):

1. Day(दिवस): मंगलवार

Date From (दिनांक पासून): 23/04/2024

Time Period (कालावधी): पहर 7

Date To (दिनांक पर्यंत): 23/04/2024

Time From (वेळेपासून): 21:00 बजे

Time To (वेळेपर्यंत): 21:15 बजे

(b) Information received at P.S. (माहिती मिळालेले पोलीस ठाणे):

Date (दिनांक): 05/05/2024

Time (वेळ): 19:30 बजे

(c) General Diary Reference (रोजनामचा संदर्भ):

Entry No. (नोंद क्र.): 015

Date & Time (दिनांक आणि वेळ): 05/05/2024 20:27 बजे

4. Type of Information (माहितीचा प्रकार): लेखी

5. Place of Occurrence (घटनास्थळ):

1.(a) Direction and distance from P.S.(पोलीस ठाण्यापासून दिशा व अंतर):

पूर्व, 02 किमी

Beat No. (बिट क्र.):

(b) Address (पत्ता): शेतमजूरवाडी तामसा, हदगाव

(c) In case, outside the limit of this Police Station, then

(या पोलीस ठाण्याच्या हद्दीबाहेर असल्यास):

Name of P.S.(पोलीस ठाण्याचे नाव):

District(State) (जिल्हा(राज्य)):

6. Complainant / Informant (तक्रारदार/माहिती देणारा):

- (a) Name (नाव): शिवाजी सुरेश गायकवाड
 (b) Father's/Husband's Name (वडील / पती चे नाव) :
 (c) Date/Year of Birth (जन्म तारीख/वर्ष): 1994
 (d) Nationality (राष्ट्रीयत्व): भारत
 (e) UID No. (यु.आय.डी. क्र.):
 (f) Passport No. (पारपत्र क्र.):

Date of Issue (दिल्याची तारीख):

Place of Issue (दिल्याचे ठिकाण):

- (g) ID details (Ration Card, Voter ID Card, Passport, UID No., Driving License, PAN) ओळखपत्र विवरण (राशन कार्ड, मतदाता कार्ड, पासपोर्ट, यूआईडी सं., ड्राइविंग लाइसेंस, पॅन कार्ड)

S.No. (अ.क्र.)	ID Type (ओळखपत्राचा प्रकार)	ID Number (ओळखपत्राचा क्रमांक)
1		

(h) Address (पत्ता):

S.No. (अ.क्र.)	Address Type (पत्त्याचा प्रकार)	Address (पत्ता)
1	वर्तमान पत्ता	शेतमजूरवाडी तामसा, हदगाव, तामसा, नांदेड, महाराष्ट्र, भारत
2	स्थायी पत्ता	शेतमजूरवाडी तामसा, हदगाव, तामसा, नांदेड, महाराष्ट्र, भारत

(i) Occupation (व्यवसाय):

(j) Phone number (फोन नं.):

Mobile (मोबाइल नं.): 91-9309476141

7. Details of known/suspected/unknown accused with full particulars (माहित असलेल्या / संशयित / अनोळखी आरोपीचा संपूर्ण पत्ता):

S.No. (अ.क्र.)	Name (नाव)	Alias (उर्फनाव)	Relative's Name (नातेवाईकाचे नाव)	Present Address (वर्तमान पत्ता)
1	मो.सा. क्र. MH 29 CC 2547 चा चा			1. माहित नाही, तामसा, नांदेड, महाराष्ट्र, भारत

8. Reasons for delay in reporting by the complainant/informant (तक्रारदार/माहिती देणा-याकडून तक्रार करण्यातील विलंबाची कारणे):

9. Particulars of properties of interest (संबंधीत मालमत्तेचा तपशील):

S.No. (अ.क्र.)	Property Category (मालमत्ता वर्ग)	Property Type (मालमत्ता प्रकार)	Description (वर्णन)	Value (In Rs/-) (मुल्य (रु.))

10 Total value of property (In Rs/-)
(चोरीस गेलेल्या मालमत्तेचे एकूण मुल्य (रु. मध्ये)):

11. Inquest Report / U.D. case No., if any
(इन्क्वेस्ट अहवाल/ अकस्मात मृत्यू प्रकरण क्र., जर असल्यास):

S.No. (अ.क्र.)	UIDB Number (यु.आय.डी.बी.क्र.)
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12. First Information contents (प्रथम खबर हकीकत):

जबाब

दि. 05/05/2024

मी शिवाजी सुरेश गायकवाड वय 30 वर्ष व्या. मजुरी रा. शेतमजूरवाडी तामसा ता. हदगाव जि. नांदेड मो. न.
9309476141

समक्ष पोलीस स्टेशन तामसा येथे हजर येवून तक्रारी जबाब नोदवून घेण्यास सांगतो की, मी वरील ठिकाणी माझ्या कूटूबासोबत राहतो. मी मोलमजुरी करून कूटूबाची उपजिवीका भागवितो. माझा मयत वडील नामे सुरेश लक्ष्मण गायकवाड वय 50 वर्ष हे मजे तामसा येथे हमाली करत असत.

दि. 23/04/2024 रोजी सकाळी 09.00 वा. नेहमीप्रमाणे माझे वडील सुरेश गायकवाड हे तामसा येथे हमाली करण्याकरीता गेले होते. रात्री 08.00 वा. सू. काम करून माझे वडील आमचे घराकडे तामसा ते हिमायतनगर रोडवरून पाई चालत येत असतांना मोटार सायकल क्र. MH 29 CC 2547 च्या चालकाने पाठीमागून जोराची धडक दिल्याचे मला संदीप बबन गायकवाड याने सांगितले. सदरची माहीती मला समजल्याने लागलीच मी व माझे नातेवाईक घटनास्थळी जावून पाहिले असता त्यांचे डोक्याला मार लागल्याने रक्त जात होते. म्हणून आम्ही त्यांना सरकारी हॉस्पिटल तामसा येथे घेवून गेलो. तेथे प्रथमीक उपचार करून पूढील उपचार कामी शेटे हॉस्पिटल नांदेड येथे दाखल केले असता उपचारा दरम्यान दि. 01/05/2024 रोजी दुपारी 04.35 वा. मृत्यू पावला आहे.

तरी दि. 23/04/2024 रोजी रात्री 09.00 वा. माझे वडील नामे सुरेश लक्ष्मण गायकवाड वय 50 वर्ष व्या. हमाली रा. शेतमजूरवाडी हे तामसा येथून हमाली करून घराकडे तामसा ते हिमायतनगर रोडवरून पाई चालत येत असतांना मोटार सायकल क्र. MH 29 CC 2547 च्या चालकाने पाठीमागून जोराची धडक दिल्याने डोक्यास मार लागून गंभीर जखमी करून मृत्यूस कारणीभूत झाला आहे. तरी त्याचेविरुद्ध माझी कायदेशीर तक्रार आहे.

माझा वरील जबाब माझे सांगने प्रमाणे पोस्टे. च्या संगनकावर टंकलीखित केला तो मी वाचून पाहीला बरोबर व खरा आहे.

हा

जबाब दिला सही

N.C.R.B (एन.सी.आर.बी)

I.I.F.-I (एकीकृत अन्वेषण फॉर्म - १)

13. Action taken: Since the above information reveals commission of offence(s) u/s as mentioned at Item No. 2. (केलेली कारवाई: बाब क्र.२ मध्ये नमूद केलेल्या कलमान्वये वरील अहवालावरून अपराध घडल्याचे.)

(1) Registered the case and took up the investigation: (प्रकरण नोंदविले आणि तपासाचे काम हाती घेतले):

shivram rajaram tugave(I (Inspector)) /

or (किंवा)

(2) Directed (Name of I.O.) (तपास अधिका-याचे नाव):

Rank (पद):

No.(क्र.):

to take up the investigation (ला तपास करण्याचे अधिकार दिले) or (किंवा)
(3) Refused investigation due to (ज्या कारणामुळे तपास करण्यास नकार दिला):

or (ज्या कारणामुळे तपास करण्यास नकार दिला)

(4) Transferred to P.S.

(गुन्हा दुसरीकडे पाठविला असल्यास त्या पोलीस ठाण्याचे नाव):

District (जिल्हा):

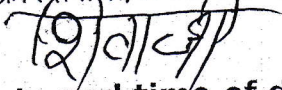
on point of jurisdiction (को क्षेत्राधिकार के कारण हस्तांतरित) .

F.I.R. read over to the complainant / informant, admitted to be correctly recorded and a copy given to the complainant / informant free of cost. (प्रथम खबर तक्रारदाराला/खबरीला वाचून दाखविली, बरोबर नोंदविली असल्याचे त्याने मान्य केले आणि तक्रारदाराला/खबरीला खबरीची प्रत मोफत दिली.)


R.O.A.C.(आर. ओ .ए .सी.)

14 Signature/Thumb impression of the complainant / informant.

(तक्रारदाराची/खबर देणा-याची सही/अंगठा):



15. Date and time of dispatch to the court (न्यायालयात पाठवल्याची तारीख व वेळ):


पोलिस ठाणे आमलदार
पो.स्टे.तामसा

Signature of Officer in charge,
Police Station

(ठाणे प्रभारी अधिका-याची स्वाक्षरी)

Name (नाव): shivram rajaram tug

Rank(पद): I (Inspector)

No.(सं.):

CRIME DETAILS FORM

घटनास्थळाचा पंचनामा/गुन्हयाचा तपशिल नमुना

1. राज्य-महाराष्ट्र, जिल्हा-नांदेड, पोलीस स्टेशन-तामसा पहीली खबर/कार्यवाही क्रं. 40/2024 दिनांक 05/05/2024

2 अधिनियम व कलम :- सादवी - कलम - 279, 304 (अ)

3. घटनेचे ठिकाण दाखविण्याच्या :-

नांव :- शिवानी गायकवाड वडीलाचे/पतीचे नांव :- सुबेश

वय 25 वर्ष, धंदा :- मनुषी जात :-

रा. शेतमजुरवाडी तालुका - हदगाव जिल्हा - नांदेड राज्य - महाराष्ट्र

4. गुन्हयाचा प्रकार (गुन्हयाचे सर्व पध्दतीसह) :-

i) प्रधान शिर्ष :- अपघात

ii) प्रधान शिर्षचे वर्गीकरण

iii) पध्दती

घातिल मधतास पापी जावन जात अक्षतवा
मो.वा.ने पाविसागुन लोपाची चडक देवत गोपदि
जखमी कलम मरु.

iv) वापरलेली वाहणे

MH-29 EC 2647

v) केलेले वेषांतर/केलेली बतावणी :-

vi) वापरलेली भाषा/बोली भाषा :-

vii) विशेष वैशिष्ट्य-1 :-

विशेष वैशिष्ट्य-2 :-

विशेष वैशिष्ट्य-3 :-

viii) घटनेच्या ठिकाणाचा प्रकार :-

मौजे शेतमजुरवाडी, गूडळक चिकण झोप
मज शेत लसादे, तामसा - हिमायतनगर रोडवर

ix) अंतर्भूत मालमत्तेचा प्रकार :-

1) ----- 2) -----

3) ----- 4) -----

5. बळीचा तपशील (आवश्यक असल्यास स्वतंत्र कागद जोडावा) :-

अ.क्र.	संपुर्ण नांव	जन्म तारीख /वय	लिंग	राष्ट्रीयत्व	धर्म	जाती/ जमाती	व्यवसाय	पत्ता	दुखापत गंभीर/ साधी	साधने/ हत्यार
1	2	3	4	5	6	7	8	9	10	11
1)	सुरेश भट्टमण गायकवाड	50	पु	भारतीय हिंदू	मातंग	मजुरी	रा. शेतमजुर- वडी, तामसा	शुल्य		

6. गुन्ह्याचा हेतु :- ---क्षपणात

7. चोरीच्या/अतंभुत मालमत्तेचा तपशील :-

8. घटनेच्या जागेचे वर्णन :-

आज शेती आम्ही पोटपति नरवटे, पो. शेट, तामसा येथे हजर असताना पो. शेट, तामसा येथे गुन्हा दाखल होवून सदर गुन्ह्याचा तपास आम्हाकडे देण्यात आला आहे. सदर गुन्ह्याचा तपासात घटनास्थळ पंचनामा करणे अत्यंत गरजेचे असल्याने आम्ही यातील दोन पंचनामांमार्फत शेतमजुरवाडी येथील घटनास्थळावर होलावुन दाखल गुन्ह्याची माहिती आणून सदर गुन्ह्यात घटनास्थळ पंचनामा करणेची क्षमता पंच स्थान हजर राहण्याची विनंती केली. तिथली नामने शिवाजी सुरेश गायकवाड हे सदर घटनास्थळी हजर असून त्यांनी आम्हाक व पंचनामा गुन्ह्याची थोडक्यात सफिकत आणून गुन्ह्याचे घटनास्थळ दाखवले. सदर गुन्ह्याचा घटनास्थळ पंचनामा केला तो पुढील प्रमाणे.

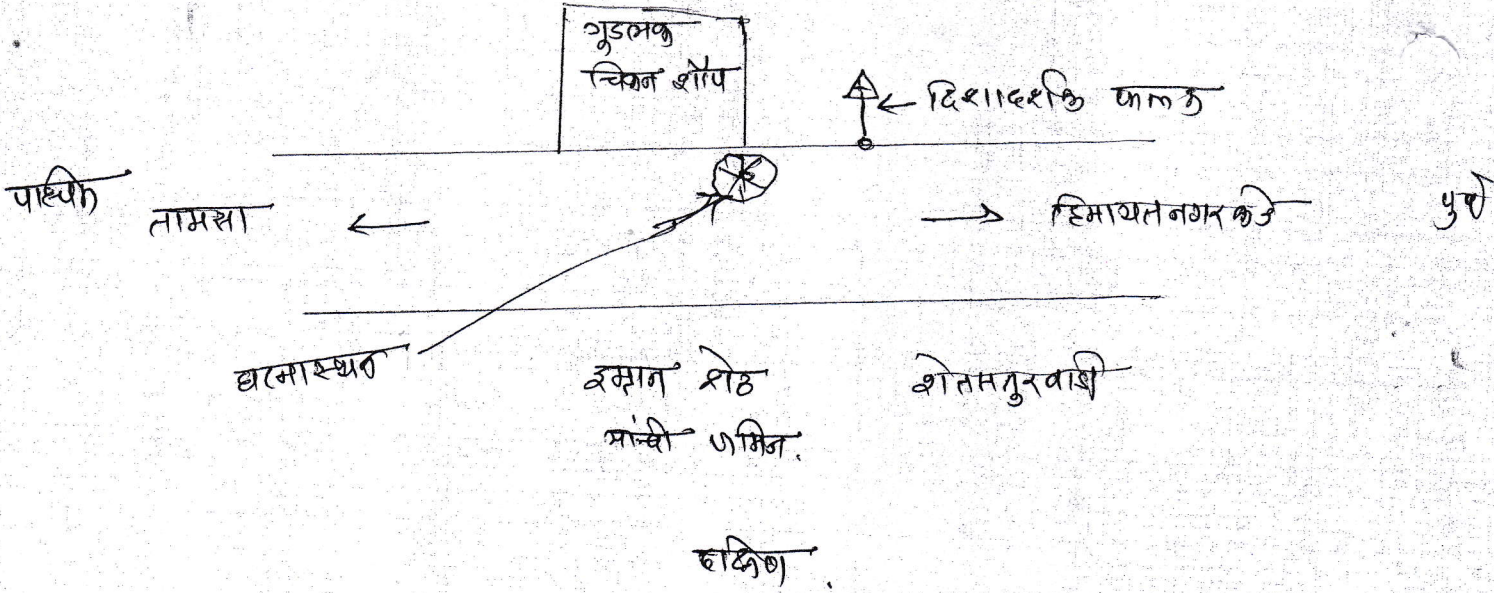
तामसा - हिमायतनगर मोजे शेतमजुरवाडी येथे आर्वाजनिक रोडवर गूडलक चिफन ग्रेड मध्य बायप धमोर रोडवर डोवे बाजुस रिवत आहे. तसेच डोवे बाजुस पिबे रोगाचे लोखंडी दिशादर्शक फलक दिवत असून घटनास्थळापलुन 10 फुट अंतरावर आहे. सदर घटनास्थळाचे आधी व पंचनामे बांधकाम पाहणी केली असता पुढीलप्रमाणे

8. घटनेच्या जागेचे वर्णन (पुढे चालू) :-

कोणतेही चिजवस्तु मिळुन आली नाही.
शहर घटनास्थळाची चतुर्दिशा पाहता स्थानिकप्रमाणे -

पुर्वेक - हिमाचलनगरकडे जाणारा कार्बनिक रोड
पश्चिमेक - तामसा कुडे जाणारा सार्वजनिक रोड
दक्षिणेक - दत्तान शिब यांची जमिनी
उत्तरेक - गूडलक चिकन झेड मध्ये झोप कुकान.

शहर गुन्थाच्या घटनास्थळाचा पंचनामा
फरतेवेडी पंच मुकदानी पासून रोवटपर्यंत हजर होते.
घटनास्थळाचा पंचनामा विशेष व खरा आहे.
शहर गुन्थाचे अशील मोजमाप - 19.36556 व
वेवोश मोजमाप - 7.6303 आहे.



10. तपासकामी प्रत्यक्ष पुरावा म्हणुन गुन्ह्याचे जागेवरून मिळविलेल्या / जप्त केलेल्या मालमत्तेचे वर्णन :-

 ----- निरंरु -----

11. घटनास्थळ पंचनाम्याची दिनांक 06 / 05 / 2024 वेळ 12:10 ते 13:15 वार सोमवार

12. पंचाची नांवे व संपुर्ण पत्ता आणि सही :-

1) रिशाज युसुफ खुरेशी वय-25
 व्यव- चिबन शॉप रा. शेतमजुरवाडी ता. ६६१११
 मो. 7499779699

(Signature)

2) प्रारोती भागिळ वाखभारे वय-22
 व्यव- मजुरी रा. शेतमजुरवाडी
 ता. ६६गाव मो. 9529858851

मा/रानी

(Signature)

तपास अधिकारी यांची सही :-

नाव :- सि. के. नरवटे

पदनाम :- पोडपनि

उप विभाग :- पो. व्हे. तामसा

दिनांक 06/05/2024

Memorandum of a Post-mortem examination held at Dr S.C.G.M.C & H, Nanded.

Dispensary
Hospital

On the dead body of SURESH LAXMAN of Village TAMSA
GAIKWAD City

Taluka HADGAON District NANDED by Dr Anirudh Singh
Dr Krishnappa Rathod.

I. General Particulars—

1. (a) By whom was the corpse sent? P.H.C M.B. Paudegi [B.no-152]
P.S - Vazirabad, Nanded.
- (b) Name of place from which sent. }
(c) Distance of place from which sent. } Shete Hospital, Nanded.
2. By whom was the corpse brought? }
3. By whom identified? } P.C H.N. Boinwad [B.no-220]
P.S - Vazirabad, Nanded.
4. The date, hour and minute of its receipt. 01/05/2024 at 08:10 p.m.
(a) The date, hour and minute of beginning post-mortem examination. 01/05/2024 at 08:20 p.m.
(b) The date, hour and minute of ending post-mortem examination. 01/05/2024 at 09:20 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.

As police inquest and requisition letter alleged history of
dashed by a motorcycle from backside while walking from
Tamsa to home on 23/04/2024 around 20:00 hours,
injured to head for treatment purpose admitted at Shete
Hospital, Nanded, where he died during treatment on
01/05/2024 at 16:35 hours. Supposed cause of death
due to injuries due to accident.

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, 50 years.

Description of clothes and of ornaments on the body.

Body covered in purple, black and grey colour printed bedsheet, blue, yellow and white colour check patterned shirt, white colour therapeutic bandage present over scalp, anterior aspect of neck and right side of abdomen.

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

Dry, intact and handed over to police constable on 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 police on duty.

Teeth =

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.

Thin built, cold.

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

Well marked in whole body.

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 over posterior aspect of back except pressure areas, fixed.

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

Facial features = Natural and identifiable.

Eyes = Partly open

Pupils = Dilated and fixed.

Mouth = Partly open

Tongue = Inside mouth.

No oozing from mouth, nostrils and ears.

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

Dry.

15. Injuries to external genitals. Intact, no injuries to external genitals.
Indication of purging. 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.

→ Straight.

17. Surface wounds and injuries—Their nature, position, dimensions (measured) and direction 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.

Intact, no evidence of fracture.

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

Yes, antemortem.

① S-shaped sutured wound present over scalp, extending from right side frontal bone region, lateral aspect to left side frontal bone region, lateral aspect, with total length of 33cm with 61 stapled sutures present, on removing suture incised wound, of size 33cm x 1cm x bone deep, on further dissection, bone piece of size 25cm x 1cm missing from right side of skull and another bone piece of size 18cm x 8cm missing from left side of skull, margins clean clean cut, underlying meninges clean cut, suggestive of operative procedure [craniotomy].

② Sutured wound present over right side of abdomen anterior aspect, ~~not~~ vertically placed, of length 12cm with 13 black colour sutures present in situ, on removing sutures, incised wound of size 12cm x 2.5cm x muscle deep, on further dissection, creamy yellowish colour fluid with foul smell, bone piece of size 25cm x 10cm and 18cm x 8cm present in situ bone margins clean cut. * Evidence of burr hole surgical procedure marks present over bone pieces. * ~~Antemortem~~

③ Incised wound present over neck, anterior aspect in midline, of size 1cm x 1cm x tracheal ring deep suggestive of therapeutic tracheostomy procedure red in colour

④ Puncture wound present over right side, below the junction of medial 2/3rd and lateral 1/3rd of cle, suggestive of therapeutic intravenous catheter mark, red in colour.

⑤ Puncture wound present over right forearm in cubital fossa, suggestive of therapeutic intravenous cannula mark, red in colour

⑥ Puncture wound present over right forearm, middle 1/3rd part, lateral aspect, suggestive of therapeutic intravenous cannula mark, red

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).

→ Refer to injury no ① in column no 17.

→ ① Refer to injury no ① in column no 17

② linear fracture line present over occipital bone; running downward and anteriorly towards right side posterior cranial fossa, fracture margins irregular and infiltrated with blood.

Meninges :- Refer to injury no ① in column no 17.

Extradural haemorrhage present over occipital bone region, right side, in posterior cranial fossa about 20 grams, dark red in colour

Brain :- Subdural haemorrhage and sub arachnoid haemorrhage present over both sides of occipital lobe.

:- liquefactive necrosis present over frontal lobe and parietal lobe of both side, and over base of fronto-temporo-parietal lobe of both sides.

20. Thorax—

(a) Walls, ribs, cartilages

Intact, no evidence of fracture present.

(b) Pleura

Intact, about 100ml pleural fluid in amber colour present in each side cavity.

(c) Larynx, Trachea and Bronchi.

Intact, no foreign bodies present

(d) Right Lung

(e) Left Lung

Both lungs present, intact, congested and oedematous, multiple pus flakes present over surfaces of lungs, patches of consolidation present, on cut section froath mixed blood oozing out.

(f) Pericardium

↳ Intact, no free fluid

(g) Heart with weight

(h) Large Vessels

↳ Intact, blood and blood clots present

(i) Additional remarks.

Nil.

21. Abdomen—

Walls }
Peritoneum } Refer to injury no (2) of column no (17).
Cavity }

Buccal Cavity, teeth, tongue and Pharynx. }
Oesophagus } Intact no free fluid present.

Stomach and its contents } About 250ml, greenish colour fluid present, medicinal smell perceived, mucosa haemorrhagic at places.

Small intestine and its contents. }
Large intestine and its contents. } Intact, partly filled with gases and faeces.

Liver (with weight) and gall bladder. } Intact and congested.

Pancreas and Suprarenals } Intact and congested.

Spleen with weight } Intact, subcapsular pus pockets present.

Kidneys with weight } Intact and congested.

Bladder } Intact and 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. } Not commentable.

State which viscera (if any) have been retained for chemical examination and also quote the numbers on the bottles containing the same. } Viscera and other than viscera articles not present for chemical analysis.

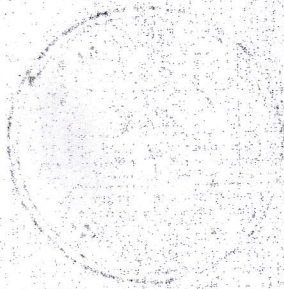
Intact and not opened.

Opinion as to the cause
probable cause of death.

“Septicemia due to head injury.”

Anirudh Singh
[Dr Anirudh Singh]
Resident Doctor
Dept. Of Forensic Medicine
Dr.S.C.Govt.Medical College.
Vishnupuri,Nanded-431606

Krishna
[Dr Krishnappa Ratnod]
Resident Doctor
Dept. Of Forensic Medicine
Dr.S.C.Govt.Medical College.
Vishnupuri,Nanded-431606



Dated

01/05/2024.

(Signature)

*This 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.

MLPM No. 554/2024

Date :- 01/05/2024.

Dispensary
Place Dr S.C.G.M.C & H, Nanded.
Civil Hospital

Forwarded to the Police Sub-Inspector Vazirabad, Nanded.
for information with reference to his No. _____ of _____ 20

Viscera has been preserved. It may please be stated *Immediately* whether examination by the Chemical Analyser is necessary or it is to be destroyed.

Dr. Anirudh Singh
Resident Doctor
Dept. Of Forensic Medicine
Dr.S.C.Govt.Medical College.
Vishnupuri,Nanded-431606

Dr. Krishnappa Rathod
Resident Doctor
Dept. Of Forensic Medicine
Dr.S.C.Govt.Medical College.
Vishnupuri,Nanded-431606

Copy forwarded with compliments to the Civil Surgeon.

for information.

M. M. S. Officer

Seen and examined by the Civil Surgeon.



2)

Remarks of the Civil Surgeon.

(if any)

R.
03/7/2024
[Signature]
bc 426

Civil Surgeon

DR. SHANKARRAO CHAVAN GOVERNMENT MEDICAL COLLEGE AND HOSPITAL, VISHNUPURI, NANDED.

ANNEXURE-V

FORM NO. 4

MLPM.No - 554/2024.

(See Rule 7)

Date - 01/05/2024.

MEDICAL CERTIFICATION OF CAUSE OF DEATH

(Hospital in-patient. Not to be used for still births)

To be sent to Registrar along with Form No. 2 (Death Report)

Name of the Hospital Dr. S.C.G. M.C.H. Nanded. I hereby certify that the person whose particulars are given below died in the hospital in Ward No. Bas at..... on..... at A.M./P.M.

Table with columns: NAME OF DECEASED (Suresh Lanman Galkwad), Sex (Male), Age at Death (50 years), Cause of Death (Septicemia due to head injury), Interval between onset and death approx.

Manner of Death

How did the injury occur? A/H/O PTA and died during treatment

- 1] Natural 2] Accident 3] Suicide 4] Homicide 5] Pending investigation

If deceased was female, was the death associated with pregnancy? 1] Yes 2] No

If yes, was there a delivery? 1] Year 2] No

Name and signature of the Medical Attendant certifying the cause of death

Date of verification Dr. Krishnaappa Ratt Dept. Of Forensic Medicine Dr.S.C.G.Govt.Medical College Vishnupuri,Nanded-431606

SEE REVERSE FOR INSTRUCTIONS

(To be detached and handed over to the relative of the deceased)

Certified that Shri / Smt./Kum

S/W/D of Shri

R/O was admitted to this hospital on

..... and expired on

Doctor

(Medical Supdt. and Name of Hospital)