

FORENSIC MEDICINE DEPARTMENT

POST - MORTEM REPORT

Regn.No.Indoor :-----
Outdoor:-----

P.M.No. **/ YEAR
DD/MM/YEAR

Unit:-----
Ward: -----

**Memorandum of a Post Mortem Examination held at XXX Hospital on the dead body of
Mrs. ABC, Female , 32 yrs**

| |
|-----------------|
| .Village |
| City |

Taluka-, District- Ahmedabad

Performed by Dr. XYZ

GENERAL PARTICULARS:

- 1 (a) By whom was the corpse sent. Inv. HC.B no:xxxx /PSI/PI of XXX Police station, AXXXX.
- (b) Name of place from which sent. As per inquest.
- (c) Distance of place from which sent. As per inquest.
- 2 By whom was the corpse brought? Inv. HC.B no:xxxx /PSI/PI of XXX Police
- 3 By whom identified? station, AXXXX and relatives of the deceased.
- 4 (a) The date, hour and minute of its receipt. 9: 00 AM DD/MM/YEAR
- (b)The date, hour and minute of beginning postmortem examination. 9: 10 AM DD/MM/YEAR
- (c) The date, hour and minute of completion of postmortem examination. 11: 00 AM DD/MM/YEAR
- 5 Substance of accompanying Report from police officers or Magistrate together with the date of death, if known supposed cause of death or reason for examination. As per inquest.
- 6 If not examined at Dispensary or Hospital.
 - (a)Name of the place where examined. -----
 - (b) Distance from Dispensary or Hospital. -----
 - (c)Reason why the body was not sent to the Dispensary or Hospital

EXTERNAL EXAMINATION

- 7 Sex apparent age, race or caste. Description of clothes and ornaments on the body. Dead body of a female about 32 years old covered with white cloth. On removing of it, Half sleeve pink T shirt , blue jeans pent, white bra and black underwear worn by deceased.
- 8 Whether wet with water, stained with blood, soiled with vomit or faecal matter. Clothes wet and soiled with sand particles and mud at places.

Page 2 of 4
Hypothetical postmortem note for 2nd MBBS student

- | | | |
|----|---|--|
| 9 | <p>Special marks on the skin such as scars, tattooing etc. any malformations, peculiarities or other marks of Identification, State of the teeth.</p> <p>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.</p> <p>Whether placenta is attached or not, if present, its size and condition.</p> | <p>Identified body. Name slip present over right forearm.</p> <p>-----</p> |
| 10 | <p>Condition of body: Whether well nourished, thin or emaciated, warm or cold.</p> | <p>Well-built body at room temperature.</p> |
| 11 | <p>Rigor Mortis:- Well marked, slight or absent whether present in the whole body or part only.</p> | <p>Rigor mortis present and well developed stage. <u>Note: Rough idea from RM regarding Time since death : Within 12 hr of death RM – Developing stage & after 12 hrs to 24 hrs of death RM – Well developed or fully develop stage. More than 24 hrs of death RM: passing away stage.</u></p> |
| 12 | <p>Extent and signs of decomposition:- Presence of Post Mortem lividity buttocks, loins, back and thighs or any other part. Whether bullae present and the nature of their contained fluid, Condition of the cuticle.</p> | <p>Postmortem lividity present over back side of the body and fixed in nature . <u>Note: Rough idea from PML regarding Time since death : Within 6-8 hrs of death PML present over dependent part of the body & not fixed in nature. After 6-8 hrs its Fixed in nature.</u></p> |
| 13 | <p>Features :- Whether natural or swollen, state of eyes, position of tongue, nature of fluid (if any) oozing form mouth, nostrils or ears.</p> | <p>Both eyes: closed Mouth: semi opened. Tongue present within oral cavity. White copious, leathery, mixed with reddish fluid, persistent foam like froth present around nose and mouth.(surest antemortem sign of Drowning)</p> |
| 14 | <p>Condition of Skin :- Marks of blood, etc., in suspected drowning the presence or absence of cutis anserina to be noted.</p> | <p>Sand particles, weeds and grass adherent at places. Cutis anserina found at places.</p> |
| 15 | <p>Injuries to external genitals, indication of purging</p> | <p>No injury present.</p> |
| 16 | <p>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 or hand or feet.</p> | <p>Washer man's hands and feet appreciable.</p> |
| 17 | <p>Surface wounds and injuries:-Their natural position, dimension (measured) and directions to be accurately stated, their probable age and causes to be noted.</p> <p>If bruises are 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)</p> | |
| 18 | <p>Other injuries discovered by external examination or palpation such as fractures etc.</p> <p>Can you say definitely that the injuries shown against Serial No.: 17 and 18 are ante-mortem injuries?</p> | <p>No limb bone fracture palpable on external examination.</p> <p>Yes, antemortem in nature.</p> |

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Hypothetical postmortem note for 2nd MBBS student

INTERNAL EXAMINATION:

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|----|--|--|
| 19 | Head | |
| | (i) injuries under the scalp and their nature. | No scalp tissue injury present. |
| | (ii) Skull Vault and base, describe fractures ,their sites, dimensions directions etc. | No fracture detected. |
| | (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. | Dura intact. Brain congested and edematous. |
| 20 | Thorax :- | |
| | (a) Walls, ribs, Cartilages ... | Nothing significant. |
| | (b) Pleura ... | Nothing significant. |
| | (c) Larynx, Trachea and Bronchi | Congested and filed with reddish white froth. |
| | (d) Right Lung with weight ... | Both lungs voluminous, doughy feel, rib markings present over anterior surfaces. Lungs congested and edematous. On cut section, copious frothy fluid mix with blood comes out. |
| | (e) Left Lung with weight ... | |
| | (f) Pericardium | Nothing significant. |
| | (g) Heart with weight ... | Nothing significant. |
| | (h) Large vessels ... | Nothing significant. |
| | (i) Additional remarks ... | Nothing significant. |
| 21 | Abdomen ... | Nothing significant |
| | Walls | Nothing significant |
| | Peritoneum..... | Nothing significant |
| | Cavity | Nothing significant |
| | Buccal Cavity, teeth, tongue and pharynx | Nothing significant |
| | Oesophagus ... | Nothing significant |
| | Stomach and its contents | Full, contains dirty watery fluid and semi digested food particles. Mucosa congested at places. |
| | Small intestine and its contents | Fluid and fecal material present |
| | Large intestine and its contents | |
| | Liver (with weight) and gallbladder | Congested.. |
| | Pancreas and Suprarenals | Congested. |
| | Spleen with weight | Congested.. |
| | Kidneys with weight..... | Congested. |
| | Bladder | Empty. |

Page 4 of 4
Hypothetical postmortem note for 2nd MBBS student

Organs of generation

Nothing significant.

Additional remarks wherever 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 number of the bottles containing the same.....

22 Spine and spinal cord*
....

23 Opinion as to the cause or probable cause of death.....

Asphyxia as a result of Drowning

Date:

Signature
Forensic Medicine Dept.
XXX Hospital, Axxxxxx

*** The Spinal cord need not be examined unless there are any indication of disease, Strychnine poisoning or injury.**

If viscera have been preserved it may please be stated immediately whether examination by the Chemical analyser is necessary or they are to be destroyed.

Forwarded to the Police Sub Inspector ___XXXX___ Police Station, Axxxxxx

Professor & Head
Forensic Medicine Dept.
XXX Hospital, Axxxxxx

FORENSIC MEDICINE DEPARTMENT

POST - MORTEM REPORT

Regn.No.Indoor :-----
Outdoor:-----

P.M.No. **/ YEAR
DD/MM/YEAR

Unit:-----
Ward: -----

**Memorandum of a Post Mortem Examination held at XXX Hospital on the dead body of
Mr. ABC, Male , 36 yrs**

| |
|-----------------|
| .Village |
| City |

Taluka-, District- Ahmedabad

Performed by Dr. XYZ

GENERAL PARTICULARS:

- 1 (a) By whom was the corpse sent. Inv. HC.B no:xxxx /PSI/PI of XXX Police station, AXXXX.
- (b) Name of place from which sent. As per inquest.
- (c) Distance of place from which sent. As per inquest.
- 2 By whom was the corpse brought? Inv. HC.B no:xxxx /PSI/PI of XXX Police station, AXXXX and relatives of the deceased.
- 3 By whom identified?
- 4 (a) The date, hour and minute of its receipt. 9: 00 AM DD/MM/YEAR
- (b)The date, hour and minute of beginning postmortem examination. 9: 10 AM DD/MM/YEAR
- (c) The date, hour and minute of completion of postmortem examination. 11: 00 AM DD/MM/YEAR
- 5 Substance of accompanying Report from police officers or Magistrate together with the date of death, if known supposed cause of death or reason for examination. As per inquest.
- 6 If not examined at Dispensary or Hospital.
 - (a)Name of the place where examined. -----
 - (b) Distance from Dispensary or Hospital. -----
 - (c)Reason why the body was not sent to the Dispensary or Hospital

EXTERNAL EXAMINATION

- 7 Sex apparent age, race or caste. Dead body of a male about 36 years old covered with white cloth. On removing of it, full sleeve cream shirt, coffee color pent, white baniyan and BLUE color underwear worn by deceased.
- Description of clothes and ornaments on the body.
- 8 Whether wet with water, stained with blood, soiled with vomit or faecal matter. Nothing significant
- 9 Special marks on the skin such as scars, tattooing etc. any malformations, peculiarities or Identified body.
Name slip present over right forearm.

Page 2 of 4
Hypothetical postmortem note for 2nd MBBS student

| | |
|--|---|
| <p>other marks of Identification, State of the 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.</p> <p>Whether placenta is attached or not, if present, its size and condition.</p> | <p>“ॐ” Tatoo marks present over front of right hand and “VIJAY” tatoo mark present over inner aspect of right forearm .</p> <p>-----</p> |
| <p>10 Condition of body: Whether well nourished, thin or emaciated, warm or cold.</p> | <p>Well-built body at room temperature.</p> |
| <p>11 Rigor Mortis:- Well marked, slight or absent whether present in the whole body or part only.</p> | <p>Rigor mortis present and well developed stage <u>Note: Rough idea from RM regarding Time since death : Within 12 hr of death RM – Developing stage & after 12 hrs to 24 hrs of death RM – Well developed or fully develop stage. More than 24 hrs of death RM: passing away stage.</u></p> |
| <p>12 Extent and signs of decomposition:- Presence of Post Mortem lividity buttocks, loins, back and thighs or any other part. Whether bullae present and the nature of their contained fluid, Condition of the cuticle.</p> | <p>Post mortem lividity present over distal parts of upper and lower limb and fixed in nature. <u>Note: Rough idea from PML regarding Time since death : Within 6-8 hrs of death PML present over dependent part of the body & not fixed in nature. After 6-8 hrs its Fixed in nature.</u></p> |
| <p>13 Features :- Whether natural or swollen, state of eyes, position of tongue, nature of fluid (if any) oozing form mouth, nostrils or ears.</p> | <p>Face congested, puffed up, bluish. Both eyes: closed <u>Note: (note side)Eye remain semi opened and pupil dilated—LA FACIE SYMPATHIQUE</u> Mouth: semi opened and dry salivary mark present over left angle of mouth. Tongue present <u>within/ protruded</u> oral cavity. Petechial hemorrhage present over lower limbs.</p> |
| <p>14 Condition of Skin :- Marks of blood, etc., in suspected drowning the presence or absence of cutis anserina to be noted.</p> | <p>Nothing significant.</p> |
| <p>15 Injuries to external genitals, indication of purging</p> | <p>No injury present.</p> |
| <p>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 or hand or feet.</p> | <p>Nothing significant.</p> |
| <p>17 Surface wounds and injuries:-Their natural position, dimension (measured) and directions to be accurately stated, their probable age and causes to be noted.</p> <p>If bruises are 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)</p> | <p>Dry, high up, hard, parchment like, oblique, dark brownish, hard based ligature mark present above to thyroid cartilage and encircling neck with abraded at places. It was starting 6 cm below mid of chin then going either sides of neck, on right side it goes upward and backward, 3.5 cm below right angle of mandible and 4.5 cm below right mastoid process to end posteriorly in to hairline. On left side it is continuous with that on right side at midline, goes upward and backward, 4.5cm below left angle of mandible and 6 cm below left mastoid process to end posterior in to hairline. Total length of ligature mark 40 cm and varies in width along course 1 cm to 2.5 cm.</p> |
| <p>18 Other injuries discovered by external examination or palpation such as fractures etc.</p> <p>Can you say definitely that the injuries shown</p> | <p>No limb bone fracture palpable on external examination.</p> |

Page 3 of 4
Hypothetical postmortem note for 2nd MBBS student

against Serial No.: 17 and 18 are ante-mortem injuries? Yes, antemortem in nature.

INTERNAL EXAMINATION:

| | | | |
|----|-------------|--|---|
| 19 | Head | <p>(i) injuries under the scalp and their nature.</p> <p>(ii) Skull Vault and base, describe fractures ,their sites, dimensions directions etc.</p> <p>(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.</p> | <p>No scalp tissue injury present.</p> <p>No fracture detected.</p> <p>Dura intact. Brain congested and edematous.</p> |
| 20 | Thorax :- | <p>(a) Walls, ribs, Cartilages ...</p> <p>(b) Pleura ...</p> <p>(c) Larynx, Trachea and Bronchi</p> <p>(d) Right Lung with weight ...</p> <p>(e) Left Lung with weight ...</p> <p>(f) Pericardium</p> <p>(g) Heart with weight ...</p> <p>(h) Large vessels ...</p> <p>(i) Additional remarks ...</p> | <p>Underneath the ligature mark subcutaneous tissue found white, pale and glistening Nothing significant.</p> <p>Nothing significant.</p> <p>Both lungs congested and edematous. On cut section frothy fluid blood comes out.</p> <p>Nothing significant.</p> <p>Nothing significant.</p> <p>Nothing significant.</p> <p>Nothing significant.</p> |
| 21 | Abdomen ... | <p>Walls</p> <p>Peritoneum.....</p> <p>Cavity</p> <p>Buccal Cavity, teeth, tongue and pharynx</p> <p>Oesophagus ...</p> <p>Stomach and its contents</p> <p>Small intestine and its contents</p> <p>Large intestine and its contents</p> <p>Liver (with weight) and gallbladder</p> <p>Pancreas and Suprarenals</p> <p>Spleen with weight</p> <p>Kidneys with weight.....</p> <p>Bladder</p> | <p>Nothing significant</p> <p>Nothing significant</p> <p>Nothing significant</p> <p>Nothing significant</p> <p>Nothing significant</p> <p>Nothing significant</p> <p>About 30 ml of yellowish fluid with semi digested food particles Mucosa congested at places.</p> <p>Fluid and fecal material present</p> <p>Congested..</p> <p>Congested.</p> <p>Congested..</p> <p>Congested.</p> <p>Empty.</p> |

Page 4 of 4
Hypothetical postmortem note for 2nd MBBS student

Organs of generation

Nothing significant.

Additional remarks wherever 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 number of the bottles containing the same.....

22 Spine and spinal cord*

23 Opinion as to the cause or probable cause of death.....

Asphyxia as a result of hanging.

This report is computerized type and verified by the undersigned and found to be correct.

Date:

Signature
Forensic Medicine Dept.
XXX Hospital, Axxxxxx

*** The Spinal cord need not be examined unless there are any indication of disease, Strychnine poisoning or injury.**

If viscera have been preserved it may please be stated immediately whether examination by the Chemical analyser is necessary or they are to be destroyed.

Forwarded to the Police Sub Inspector ___XXXX___ Police Station, Axxxxxxx

Professor & Head
Forensic Medicine Dept.
XXX Hospital, Axxxxxx

FORENSIC MEDICINE DEPARTMENT

POST - MORTEM REPORT

Regn.No.Indoor :-----
Outdoor:-----

P.M.No. **/ YEAR
DD/MM/YEAR

Unit:-----
Ward: -----

**Memorandum of a Post Mortem Examination held at XXX Hospital on the dead body of
Mr. ABC, male , 24 yrs**

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|-----------------|
| .Village |
| City |

Taluka-, District- Ahmedabad

Performed by Dr. XYZ

GENERAL PARTICULARS:

- 1 (a) By whom was the corpse sent. Inv. HC.B no:xxxx /PSI/PI of XXX Police station, AXXXX.
- (b) Name of place from which sent. As per inquest.
- (c) Distance of place from which sent. As per inquest.
- 2 By whom was the corpse brought? Inv. HC.B no:xxxx /PSI/PI of XXX Police
- 3 By whom identified? station, AXXXX and relatives of the deceased.
- 4 (a) The date, hour and minute of its receipt. 9: 00 AM DD/MM/YEAR
- (b)The date, hour and minute of beginning postmortem examination. 9: 10 AM DD/MM/YEAR
- (c) The date, hour and minute of completion of postmortem examination. 11: 00 AM DD/MM/YEAR
- 5 Substance of accompanying Report from police officers or Magistrate together with the date of death, if known supposed cause of death or reason for examination. As per inquest.
- 6 If not examined at Dispensary or Hospital.
 - (a)Name of the place where examined. -----
 - (b) Distance from Dispensary or Hospital. -----
 - (c)Reason why the body was not sent to the Dispensary or Hospital

EXTERNAL EXAMINATION

- 7 Sex apparent age, race or caste. Dead body of a male about 24 years old covered with white cloth. On removing of it, Half sleeve pink T shirt , blue jeans pent, black color underwear worn by deceased.
- 8 Whether wet with water, stained with blood, soiled with vomit or faecal matter. Dry blood stained present over clothes at places.

Page 2 of 4
Hypothetical postmortem note for 2nd MBBS student

| | | |
|----|--|--|
| 9 | <p>Special marks on the skin such as scars, tattooing etc. any malformations, peculiarities or other marks of Identification, State of the teeth.</p> <p>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.</p> <p>Whether placenta is attached or not, if present, its size and condition.</p> | <p>Identified body.</p> <p>Name slip present over right forearm.</p> <p>-----</p> |
| 10 | <p>Condition of body: Whether well nourished, thin or emaciated, warm or cold.</p> | <p>Well-built body at room temperature.</p> |
| 11 | <p>Rigor Mortis:- Well marked, slight or absent whether present in the whole body or part only.</p> | <p>Rigor mortis present and well developed stage <u>Note: Rough idea from RM regarding Time since death : Within 12 hr. of death RM – Developing stage & after 12 hrs. to 24 hrs of death RM – Well developed or fully develop stage. More than 24 hrs of death RM: passing away stage.</u></p> |
| 12 | <p>Extent and signs of decomposition:- Presence of Post Mortem lividity buttocks, loins, back and thighs or any other part. Whether bullae present and the nature of their contained fluid, Condition of the cuticle.</p> | <p>Postmortem lividity present over back side of the body and fixed in nature . <u>Note: Rough idea from PML regarding Time since death : Within 6-8 hrs of death PML present over dependent part of the body & not fixed in nature. After 6-8 hrs its Fixed in nature.</u></p> |
| 13 | <p>Features :- Whether natural or swollen, state of eyes, position of tongue, nature of fluid (if any) oozing form mouth, nostrils or ears.</p> | <p>Both eyes: closed Left eye swollen and black. Mouth: semi opened. Tongue present within oral cavity. Dry blood stained present over face. Injection mark present over right forearm and right cubital fossa.</p> |
| 14 | <p>Condition of Skin :- Marks of blood, etc., in suspected drowning the presence or absence of cutis anserina to be noted.</p> | <p>Nothing significant.</p> |
| 15 | <p>Injuries to external genitals, indication of purging</p> | <p>No injury present.</p> |
| 16 | <p>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 or hand or feet.</p> | <p>Nothing significant.</p> |
| 17 | <p>Surface wounds and injuries:-Their natural position, dimension (measured) and directions to be accurately stated, their probable age and causes to be noted.</p> <p>If bruises are 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)</p> | <ol style="list-style-type: none"> 1. Contused lacerated wound present over left fronto-parietal region, starting from 6 cm above lateral end of left eyebrow, 7x0.5cm and scalp tissue deep. 2. Red, horizontal Abrasion present on left forehead just above middle end of left eyebrow about 3x0.5 cm in size 3. Red, Abrasion present on front of right hand, two in no, just above 4th and 5th finger, size 1x0.5 and 0.5x1cm from inner to outer direction respectively. |
| 18 | <p>Other injuries discovered by external examination or palpation such as fractures etc.</p> <p>Can you say definitely that the injuries shown against Serial No.: 17 and 18 are ante-mortem</p> | <p>No limb bone fracture palpable on external examination.</p> <p>Yes, antemortem in nature.</p> |

Page 3 of 4
Hypothetical postmortem note for 2nd MBBS student

injuries?

INTERNAL EXAMINATION:

| | | | |
|----|-------------|---|--|
| 19 | Head | <p>(i) injuries under the scalp and their nature.</p> <p>(ii) Skull Vault and base, describe fractures ,their sites, dimensions directions etc.</p> <p>(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.</p> | <p>Ecchymoses present over both fronto-tempo-parietal- left occipital with both temporalis muscles</p> <p>Depressed comminuted fracture present over left fronto parieto-temporal bone with depressed 6x5cm of bone piece with extend to involve as linear fracture toward left side left occipital bone, right side right parietal and downward leftACF.</p> <p>Dura intact Subdural hemorrhage and sub arachnoid hemorrhage present over both cerebral hemisphere with undersurface of brain. Contusion present over left temporal lobe. CSF blood stained. Brain congested and edematous.</p> |
| 20 | Thorax :- | <p>(a) Walls, ribs, Cartilages ...</p> <p>(b) Pleura ...</p> <p>(c) Larynx, Trachea and Bronchi</p> <p>(d) Right Lung with weight ...</p> <p>(e) Left Lung with weight ...</p> <p>(f) Pericardium</p> <p>(g) Heart with weight ...</p> <p>(h) Large vessels ...</p> <p>(i) Additional remarks ...</p> | <p>Nothing significant.</p> <p>Nothing significant.</p> <p>Both lungs congested and edematous. On cut section frothy fluid blood comes out.</p> <p>Nothing significant.</p> <p>Nothing significant.</p> <p>Nothing significant.</p> <p>Nothing significant.</p> |
| 21 | Abdomen ... | <p>Walls</p> <p>Peritoneum.....</p> <p>Cavity</p> <p>Buccal Cavity, teeth, tongue and pharynx</p> <p>Oesophagus ...</p> <p>Stomach and its contents</p> <p>Small intestine and its contents</p> <p>Large intestine and its contents</p> <p>Liver (with weight) and gallbladder</p> <p>Pancreas and Suprenals</p> <p>Spleen with weight</p> <p>Kidneys with weight.....</p> | <p>Nothing significant</p> <p>Nothing significant</p> <p>Nothing significant</p> <p>Nothing significant</p> <p>Nothing significant</p> <p>Nothing significant</p> <p>Nothing significant</p> <p>About 100ml of yellowish fluid, with semi digested food particles. Mucosa congested at places.</p> <p>Fluid and fecal material present</p> <p>Congested..</p> <p>Congested.</p> <p>Congested..</p> <p>Congested.</p> |

Page 4 of 4
Hypothetical postmortem note for 2nd MBBS student

| | | |
|--|--|-------------------------------------|
| Bladder | | Empty. |
| Organs of generation | | Nothing significant. |
| Additional remarks wherever 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 number of the bottles containing the same..... | | |
| 22 | Spine and spinal cord* | ----- |
| 23 | Opinion as to the cause or probable cause of death.... | <u>Head injury sustained</u> |

This report is computerized type and verified by the undersigned and found to be correct.

Date:

Signature
Forensic Medicine Dept.
XXX Hospital, Axxxxxx

*** The Spinal cord need not be examined unless there are any indication of disease, Strychnine poisoning or injury.**

If viscera have been preserved it may please be stated immediately whether examination by the Chemical analyser is necessary or they are to be destroyed.

Forwarded to the Police Sub Inspector ___XXXX___ Police Station, Axxxxxxx

Professor & Head
Forensic Medicine Dept.
XXX Hospital, Axxxxxx

FORENSIC MEDICINE DEPARTMENT

POST - MORTEM REPORT

Regn.No.Indoor :-----
Outdoor:-----

P.M.No. **/ YEAR
DD/MM/YEAR

Unit:-----
Ward: -----

**Memorandum of a Post Mortem Examination held at XXX Hospital on the dead body of
Mrs. ABC, Female , 32 yrs**

| |
|-----------------|
| .Village |
| City |

Taluka-, District- Ahmedabad

Performed by Dr. XYZ

GENERAL PARTICULARS:

- 1 (a) By whom was the corpse sent. Inv. HC.B no:xxxx /PSI/PI of XXX Police station, AXXXX.
- (b) Name of place from which sent. As per inquest.
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 - (a)Name of the place where examined. -----
 - (b) Distance from Dispensary or Hospital. -----
 - (c)Reason why the body was not sent to the Dispensary or Hospital

EXTERNAL EXAMINATION

- 7 Sex apparent age, race or caste. Dead body of a female 32 years old covered with white hospital cloth. On removing cloth white T shirt, blue Jens pent, black bra and blue underwear worn by deceased.
- 8 Whether wet with water, stained with blood, soiled with vomit or faecal matter. Dry blood stained present over clothes at places.

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Hypothetical postmortem note for 2nd MBBS student

| | | |
|----|---|--|
| 9 | Special marks on the skin such as scars, tattooing etc. any malformations, peculiarities or other marks of Identification, State of the 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. | Identified body. Name slip present over right forearm. ----- |
| 10 | Condition of body: Whether well nourished, thin or emaciated, warm or cold. | Well-built body at room temperature. |
| 11 | Rigor Mortis:- Well marked, slight or absent whether present in the whole body or part only. | Rigor mortis present and well developed stage <u>Note: Rough idea from RM regarding Time since death : Within 12 hr of death RM – Developing stage & after 12 hrs to 24 hrs of death RM – Well developed or fully develop stage. More than 24 hrs of death RM: passing away stage.</u> |
| 12 | Extent and signs of decomposition:- Presence of Post Mortem lividity buttocks, loins, back and thighs or any other part. Whether bullae present and the nature of their contained fluid, Condition of the cuticle. | Postmortem lividity present over back side of the body and fixed in nature . <u>Note: Rough idea from PML regarding Time since death : Within 6-8 hrs of death PML present over dependent part of the body & not fixed in nature. After 6-8 hrs its Fixed in nature.</u> |
| 13 | Features :- Whether natural or swollen, state of eyes, position of tongue, nature of fluid (if any) oozing form mouth, nostrils or ears. | Both eyes: closed. Mouth: closed. Tongue present within oral cavity. Dry blood stained present over face and other part of body at places. |
| 14 | Condition of Skin :- Marks of blood, etc., in suspected drowning the presence or absence of cutis anserina to be noted. | Nothing significant. |
| 15 | Injuries to external genitals, indication of purging | No injury 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 or hand or feet. | Nothing significant. |
| 17 | Surface wounds and injuries:-Their natural position, dimension (measured) and directions to be accurately stated, their probable age and causes to be noted. If bruises are 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) | 1.Red contused lacerated wound (laceration three dimensional injury LxBxD) present at lower 1/3 rd of back of left arm , two in no 1.5 cm apart 3x2 cm x bone deep and 2x1.5cm x bone deep. 2.Red abrasions present over following area of body(Abrasion two dimensional injury LxB) a. Just below chin, multiple and varying in size from 2x0.5cm to 4x1 cm b. 4 cm above injury no 1), back side of left arm, multiple and varying in size from 5x1cm to 8x2 cm c. Just below back side of left elbow 3x2 cm in size. d. Back of right abdomen, just lateral to midline, multiple, varying in size from 3x1 cm to 12x1 cm. e. 4 cm above injury no 2-c, multiple, varying in size from 1cmx 0.5cm to 2x1 cm size. f. Front of right ankle 3x2 cm in size |

Page 3 of 4
Hypothetical postmortem note for 2nd MBBS student

- | | | |
|----|---|---|
| 18 | Other injuries discovered by external examination or palpation such as fractures etc. | <ol style="list-style-type: none"> 1) Reddish contusion present following area of the body (Contusion two dimensional injury LxB) <ol style="list-style-type: none"> a. Back side of the left half of arm 6x4 cm in size b. Just below back side of right knee 8x4 cm in size 1. Palpable fracture with lacerated and ecchymosed surrounding tissues present at lower third of left humerus underneath injury 1 column 17. 2. Palpable fracture present over right upper third of tibia & fibula with surrounding tissues ecchymosed and contused. |
|----|---|---|

Can you say definitely that the injuries shown against Serial No.: 17 and 18 are ante-mortem injuries?

Yes, ante mortem in nature.

INTERNAL EXAMINATION:

- | | | |
|----|--|---|
| 19 | Head | |
| | (i) injuries under the scalp and their nature. | No injury present. |
| | (ii) Skull Vault and base, describe fractures ,their sites, dimensions directions etc. | No fracture in skull vault appreciable. |
| | (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. | Dura intact. Brain pale and edematous. |
| 20 | Thorax :- | |
| | (a) Walls, ribs, Cartilages ... | Right 2 nd to 6 th ribs, left 2 nd to 7 th ribs, body of sternum bone at middle part and right clavicle shaft found fractured with ecchymosed surrounding tissues. 300 ml fluid blood present in cavity |
| | (b) Pleura ... | |
| | (c) Larynx, Trachea and Bronchi | |
| | (d) Right Lung with weight ... | Both lungs contused and lacerated underneath fractured ribs at places and pale . On cut section scanty fluid blood comes out. |
| | (e) Left Lung with weight ... | |
| | (f) Pericardium | Nothing significant. |
| | (g) Heart with weight ... | Nothing significant. |
| | (h) Large vessels ... | Nothing significant. |
| | (i) Additional remarks ... | Nothing significant. |
| 21 | Abdomen ... | About 1200 ml of blood present in the cavity. Diaphragm torn at places. Fracture with ecchymosed surrounding tissues present at pubic symphysis and both anterior superior pubic rami. |
| | Walls | |
| | Peritoneum..... | |
| | Cavity | |
| | Buccal Cavity, teeth, tongue and pharynx | |
| | Oesophagus ... | |

Page 4 of 4
Hypothetical postmortem note for 2nd MBBS student

| | |
|---|--|
| Stomach and its contents | 150 ml semi digested food particle with fluid present and mucosa healthy |
| Small intestine and its contents | Fluid and fecal material present |
| Large intestine and its contents | |
| Liver (with weight) and gallbladder | Inferior surface of Right lobe of liver found lacerated, about 6x1 cm x tissue deep with surrounding tissue ecchymosed. Pale |
| Pancreas and Suprarenals | Pale. |
| Spleen with weight | Mutiple Laceration present over diaphragmatic surface , varying in size 1x2cm tissue deep to 4x1 cm tissue deep . Pale |
| Kidneys with weight..... | Pale |
| Bladder | Lacerated anterior wall with with surrounding tissue ecchymosed. |
| Organs of generation | Nothing significant. |
| Additional remarks wherever 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 number of the bottles containing the same..... | |
| 22 Spine and spinal cord* | ----- |
| 23 Opinion as to the cause or probable cause of death..... | <u>Shock as a result of injuries sustained.</u> |

Date:

Signature
Forensic Medicine Dept.
XXX Hospital, Axxxxxx

*** The Spinal cord need not be examined unless there are any indication of disease, Strychnine poisoning or injury.**

If viscera have been preserved it may please be stated immediately whether examination by the Chemical analyser is necessary or they are to be destroyed.

Forwarded to the Police Sub Inspector ___XXXX___ Police Station, Axxxxxx

Professor & Head
Forensic Medicine Dept.
XXX Hospital, Axxxxxx

FORENSIC MEDICINE DEPARTMENT

POST - MORTEM REPORT

Regn.No.Indoor :-----
Outdoor:-----

P.M. No. **/ YEAR
DD/MM/YEAR

Unit:-----
Ward: -----

**Memorandum of a Post Mortem Examination held at XXX Hospital on the dead body of
Mrs. ABC, Female , 32 yrs**

| |
|-----------------|
| .Village |
| City |

Taluka-, District- Ahmedabad

Performed by Dr. XYZ

GENERAL PARTICULARS:

- 1 (a) By whom was the corpse sent. Inv. HC.B no:xxxx /PSI/PI of XXX Police station, AXXXX.
- (b) Name of place from which sent. As per inquest.
- (c) Distance of place from which sent. As per inquest.
- 2 By whom was the corpse brought? Inv. HC.B no:xxxx /PSI/PI of XXX Police station, AXXXX and relatives of the deceased.
- 3 By whom identified?
- 4 (a) The date, hour and minute of its receipt. 9: 00 AM DD/MM/YEAR
- (b)The date, hour and minute of beginning postmortem examination. 9: 10 AM DD/MM/YEAR
- (c) The date, hour and minute of completion of postmortem examination. 11: 00 AM DD/MM/YEAR
- 5 Substance of accompanying Report from police officers or Magistrate together with the date of death, if known supposed cause of death or reason for examination. As per inquest.
- 6 If not examined at Dispensary or Hospital.
 - (a)Name of the place where examined. -----
 - (b) Distance from Dispensary or Hospital. -----
 - (c)Reason why the body was not sent to the Dispensary or Hospital

EXTERNAL EXAMINATION

- 7 Sex apparent age, race or caste. Description of clothes and ornaments on the body. Dead body of a female about 32 years old covered with white cloth. On removing of it, Half sleeve pink T shirt , blue jeans pent, white bra and black underwear worn by deceased.
- 8 Whether wet with water, stained with blood, soiled with vomit or faecal matter. Nothing significant

Page 2 of 4
Hypothetical postmortem note for 2nd MBBS student

- | | | |
|----|---|---|
| 9 | Special marks on the skin such as scars, tattooing etc. any malformations, peculiarities or other marks of Identification, State of the 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. | Identified body. Name slip present over right forearm. ----- |
| 10 | Condition of body: Whether well nourished, thin or emaciated, warm or cold. | Well-built body at room temperature. |
| 11 | Rigor Mortis:- Well marked, slight or absent whether present in the whole body or part only. | Rigor mortis present and well developed stage <u>Note: Rough idea from RM regarding Time since death : Within 12 hr of death RM – Developing stage & after 12 hrs to 24 hrs of death RM – Well developed or fully develop stage. More than 24 hrs of death RM: passing away stage.</u> |
| 12 | Extent and signs of decomposition:- Presence of Post Mortem lividity buttocks, loins, back and thighs or any other part. Whether bullae present and the nature of their contained fluid, Condition of the cuticle. | Postmortem lividity present over back side of the body and fixed in nature . <u>Note: Rough idea from PML regarding Time since death : Within 6-8 hrs of death PML present over dependent part of the body & not fixed in nature. After 6-8 hrs its Fixed in nature.</u> |
| 13 | Features :- Whether natural or swollen, state of eyes, position of tongue, nature of fluid (if any) oozing form mouth, nostrils or ears. | Both eyes: closed Mouth: semi opened. Tongue present within oral cavity. |
| 14 | Condition of Skin :- Marks of blood, etc., in suspected drowning the presence or absence of cutis anserina to be noted. | Nothing significant. |
| 15 | Injuries to external genitals, indication of purging | No injury 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 or hand or feet. | Nothing significant. |
| 17 | Surface wounds and injuries:-Their natural position, dimension (measured) and directions to be accurately stated, their probable age and causes to be noted. If bruises are 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) | Injection mark present over right cubital fossa. (seems to be therapeutic) <u>Note: Patient was admitted in hospital please mentioned injection mark if present</u> |
| 18 | Other injuries discovered by external examination or palpation such as fractures etc. Can you say definitely that the injuries shown against Serial No.: 17 and 18 are ante-mortem injuries? | No limb bone fracture palpable on external examination. Yes, antemortem in nature. |

Page 3 of 4
Hypothetical postmortem note for 2nd MBBS student

INTERNAL EXAMINATION:

| | | |
|----|--|--|
| 19 | Head | |
| | (i) injuries under the scalp and their nature. | No scalp tissue injury present. |
| | (ii) Skull Vault and base, describe fractures ,their sites, dimensions directions etc. | No fracture detected. |
| | (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. | Dura intact. Brain congested and edematous. |
| 20 | Thorax :- | |
| | (a) Walls, ribs, Cartilages ... | Nothing significant. |
| | (b) Pleura ... | Nothing significant. |
| | (c) Larynx, Trachea and Bronchi | |
| | (d) Right Lung with weight ... | Both lungs congested and edematous. On cut section frothy fluid blood comes out. |
| | (e) Left Lung with weight ... | |
| | (f) Pericardium | Nothing significant. |
| | (g) Heart with weight ... | Nothing significant. |
| | (h) Large vessels ... | Nothing significant. |
| | (i) Additional remarks ... | Nothing significant. |
| 21 | Abdomen ... | Nothing significant |
| | Walls | Nothing significant |
| | Peritoneum..... | Nothing significant |
| | Cavity | Nothing significant |
| | Buccal Cavity, teeth, tongue and pharynx | Nothing significant |
| | Oesophagus ... | Nothing significant |
| | Stomach and its contents | About 100 ml of brownish fluid, insecticidal like smell with semi digested food particles. Mucosa congested and hemorrhagic at places. |
| | Small intestine and its contents | Fluid and fecal material present |
| | Large intestine and its contents | |
| | Liver (with weight) and gallbladder | Congested.. |
| | Pancreas and Suprarenals | Congested. |
| | Spleen with weight | Congested.. |
| | Kidneys with weight..... | Congested. |
| | Bladder | Empty. |

Page 4 of 4
Hypothetical postmortem note for 2nd MBBS student

Organs of generation

Nothing significant.

Additional remarks wherever possible Medical Officer's deduction from the state of the contents of the stomach as to time of death and last meal....

Following viscera are preserved in saturated solution of common salt in 3 sealed and labeled glass bottles for CHEMICAL ANALYSIS and handed over to police on duty :
1-Stomach & its contents +loop of small intestine with its contents in preservative.
2-Slices of liver and both kidneys in preservative.
3-Blood

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

22 Spine and spinal cord*
....

23 Opinion as to the cause or probable cause of death.....

Kept pending for CHEMICAL ANALYSIS

This report is computerized type and verified by the undersigned and found to be correct.

FINAL OPINION

Name: Mrs. ABC, Female , 32 yrs

FSL Report No: FSL/TPN/2xxx/T/XXX dated received which Shows presences of Chlorpyriphos-type of Organo phosphorus poison detected in the viscera preserved.

Cause of Death –

Death is due to cardio-respiratory failure as a result of Chlorpyriphos- type of Organo phosphorus poisoning.

Date:

Signature
Forensic Medicine Dept.
XXX Hospital, Axxxxxx

*** The Spinal cord need not be examined unless there are any indication of disease, Strychnine poisoning or injury.**

If viscera have been preserved it may please be stated immediately whether examination by the Chemical analyser is necessary or they are to be destroyed.

Forwarded to the Police Sub Inspector XXXX Police Station, Axxxxxx

Professor & Head
Forensic Medicine Dept.
XXX Hospital, Axxxxxx

FORENSIC MEDICINE DEPARTMENT
POST - MORTEM REPORT

Regn.No.Indoor :-----
Outdoor:-----

P.M.No. **/ YEAR
DD/MM/YEAR

Unit:----
Ward: -----

Memorandum of a Post Mortem Examination held at XXX Hospital on the dead body of
Mrs. ABC, male , 32 yrs

| | |
|-----------------|------------------------------|
| <u>.Village</u> | Taluka-, District- Ahmedabad |
| <u>City</u> | |

Performed by Dr. XYZ

GENERAL PARTICULARS:

- | | | |
|---|--|---|
| 1 | (a) By whom was the corpse sent. | Inv. HC.B no:xxxx /PSI/PI of XXX Police station, AXXXX. |
| | (b) Name of place from which sent. | As per inquest. |
| | (c) Distance of place from which sent. | As per inquest. |
| 2 | By whom was the corpse brought? | Inv. HC.B no:xxxx /PSI/PI of XXX Police station, AXXXX and relatives of the deceased. |
| 3 | By whom identified? | |
| 4 | (a) The date, hour and minute of its receipt. | 9: 00 AM DD/MM/YEAR |
| | (b)The date, hour and minute of beginning postmortem examination. | 9: 10 AM DD/MM/YEAR |
| | (c) The date, hour and minute of completion of postmortem examination. | 11: 00 AM DD/MM/YEAR |
| 5 | Substance of accompanying Report from police officers or Magistrate together with the date of death, if known supposed cause of death or reason for examination. | As per inquest. |
| 6 | If not examined at Dispensary or Hospital. | |
| | (a)Name of the place where examined. | ----- |
| | (b) Distance from Dispensary or Hospital. | ----- |
| | (c)Reason why the body was not sent to the Dispensary or Hospital | |

EXTERNAL EXAMINATION

- | | | |
|---|---|--|
| 7 | Sex apparent age, race or caste. Description of clothes and ornaments on the body. | Dead body of a male about 32 years old covered with white cloth. On removing cloth, Cream color full sleeve shirt, Blue pent , black underwear, worn by the deceased. |
| 8 | Whether wet with water, stained with blood, soiled with vomit or faecal matter. | An irregular tear present over front of right side of shirt 14 cm below from right shoulder stitch line and 9 cm away from right side stitch line, about 7.5 cm long. 5 out of 7 plastic black buttons missing from front strip of shirt. Dry blood stained present over Shirt, Pant at places |

Page 2 of 4
Hypothetical postmortem note for 2nd MBBS student

| | | |
|----|--|--|
| 9 | <p>Special marks on the skin such as scars, tattooing etc. any malformations, peculiarities or other marks of Identification, State of the 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.</p> | <p>Identified body. Name slip present over right forearm. -----</p> |
| 10 | <p>Condition of body: Whether well nourished, thin or emaciated, warm or cold.</p> | <p>Well-built body at room temperature.</p> |
| 11 | <p>Rigor Mortis:- Well marked, slight or absent whether present in the whole body or part only.</p> | <p>Rigor mortis present and well developed stage <u>Note: Rough idea from RM regarding Time since death : Within 12 hr of death RM – Developing stage & after 12 hrs to 24 hrs of death RM – Well developed or fully develop stage. More than 24 hrs of death RM: passing away stage.</u></p> |
| 12 | <p>Extent and signs of decomposition:- Presence of Post Mortem lividity buttocks, loins, back and thighs or any other part. Whether bullae present and the nature of their contained fluid, Condition of the cuticle.</p> | <p>Postmortem lividity present over back side of the body and fixed in nature . <u>Note: Rough idea from PML regarding Time since death : Within 6-8 hrs of death PML present over dependent part of the body & not fixed in nature. After 6-8 hrs its Fixed in nature.</u></p> |
| 13 | <p>Features :- Whether natural or swollen, state of eyes, position of tongue, nature of fluid (if any) oozing form mouth, nostrils or ears.</p> | <p>Both eyes: closed Mouth: semi opened. Tongue present within oral cavity.</p> |
| 14 | <p>Condition of Skin :- Marks of blood, etc., in suspected drowning the presence or absence of cutis anserina to be noted.</p> | <p>Dry blood stained present over body at places.</p> |
| 15 | <p>Injuries to external genitals, indication of purging</p> | <p>No injury present.</p> |
| 16 | <p>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 or hand or feet.</p> | <p>Nothing significant.</p> |
| 17 | <p>Surface wounds and injuries:-Their natural position, dimension (measured) and directions to be accurately stated, their probable age and causes to be noted.</p> <p>If bruises are 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)</p> | <p>1) A stab wound, sharp edged, elliptical and cavity deep present on front of right side of chest, obliquely downward and towards right with beveling appreciable at upper right margin. It starting from 4 cm above 2 cm right lateral to right nipple , about 4cm x 1.5cm x cavity deep Size. Upper inner angle found obtuse and lower outer angle found acute.</p> <p>2) Red contusion present over front of right upper third of arm, about 5x3 cm size.</p> <p>3) Multiple, Red abrasion present over front of left arm, variable in size 1x0.5 cm to 2x.1 cm.</p> |

Page 3 of 4
Hypothetical postmortem note for 2nd MBBS student

- | | | |
|----|--|---|
| 18 | Other injuries discovered by external examination or palpation such as fractures etc. | No limb bone fracture palpable on external examination. |
| | Can you say definitely that the injuries shown against Serial No.: 17 and 18 are ante-mortem injuries? | Yes, antemortem in nature. |

INTERNAL EXAMINATION:

- | | | |
|----|--|---|
| 19 | Head | |
| | (i) injuries under the scalp and their nature. | No scalp tissue injury present. |
| | (ii) Skull Vault and base, describe fractures ,their sites, dimensions directions etc. | No fracture detected. |
| | (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. | Dura intact. Brain pale and edematous. |
| 20 | Thorax :- | |
| | (a) Walls, ribs, Cartilages ... | Underneath injury 1, column 17, and track going inward and to right cutting skin, subcutaneous tissues, 5th right rib at upper margin with neuro vascular structures ---> pleura --> passing right lung. About 0.5 cm xo.5cm x lung tissue deep puncture wound present over anterior surface of right lung. About 1200 ml blood present in right thoracic cavity. |
| | (b) Pleura ... | |
| | (c) Larynx, Trachea and Bronchi | |
| | (d) Right Lung with weight ... | Right lung pale and collapsed. Left lung pale and edematous. On cut section, scanty frothy fluid blood comes out from left lung. |
| | (e) Left Lung with weight ... | |
| | (f) Pericardium | Nothing significant. |
| | (g) Heart with weight ... | Nothing significant. |
| | (h) Large vessels ... | Nothing significant. |
| | (i) Additional remarks ... | Nothing significant. |
| 21 | Abdomen ... | Nothing significant |
| | Walls | Nothing significant |
| | Peritoneum..... | Nothing significant |
| | Cavity | Nothing significant |
| | Buccal Cavity, teeth, tongue and pharynx | Nothing significant |
| | Oesophagus ... | Nothing significant |
| | Stomach and its contents | About 40 ml yellowish fluid present. Mucosa congested at places. |
| | Small intestine and its contents | |
| | Large intestine and its contents | Fluid and fecal material present |

Page 4 of 4
Hypothetical postmortem note for 2nd MBBS student

| | |
|--|--------|
| Liver (with weight) and gallbladder | Pale |
| Pancreas and Suprarenals | Pale |
| Spleen with weight | Pale |
| Kidneys with weight..... | Pale |
| Bladder | Empty. |

Organs of generation Nothing significant.

Additional remarks wherever 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 number of the bottles containing the same.....

22 Spine and spinal cord* -----
....

23 Opinion as to the cause or probable cause of death..... **Shock as a result of stab injury sustained**

This report is computerized type and verified by the undersigned and found to be correct.

Date:

Signature
Forensic Medicine Dept.
XXX Hospital, Axxxxxxx

*** The Spinal cord need not be examined unless there are any indication of disease, Strychnine poisoning or injury.**

If viscera have been preserved it may please be stated immediately whether examination by the Chemical analyser is necessary or they are to be destroyed.

Forwarded to the Police Sub Inspector ___XXXX___ Police Station, Axxxxxxx

Professor & Head
Forensic Medicine Dept.
XXX Hospital, Axxxxxxx