

# All India Institute of Medical Sciences Bhopal



## **Medico Legal Manual**

*Prepared by-*

Department of Forensic Medicine & Toxicology  
AIIMS Bhopal

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## **MEDICO-LEGAL CASE (MLC)**

### **a. Definition of Medico-legal Case**

Cases wherever attending doctor after taking history and clinical examination of the patient thinks that some investigation by law enforcing agencies are essential so as to fix the responsibility regarding the case in accordance with the law of land.

### **b. Duty of Registered Medical Practitioner (RMP) in MLC**

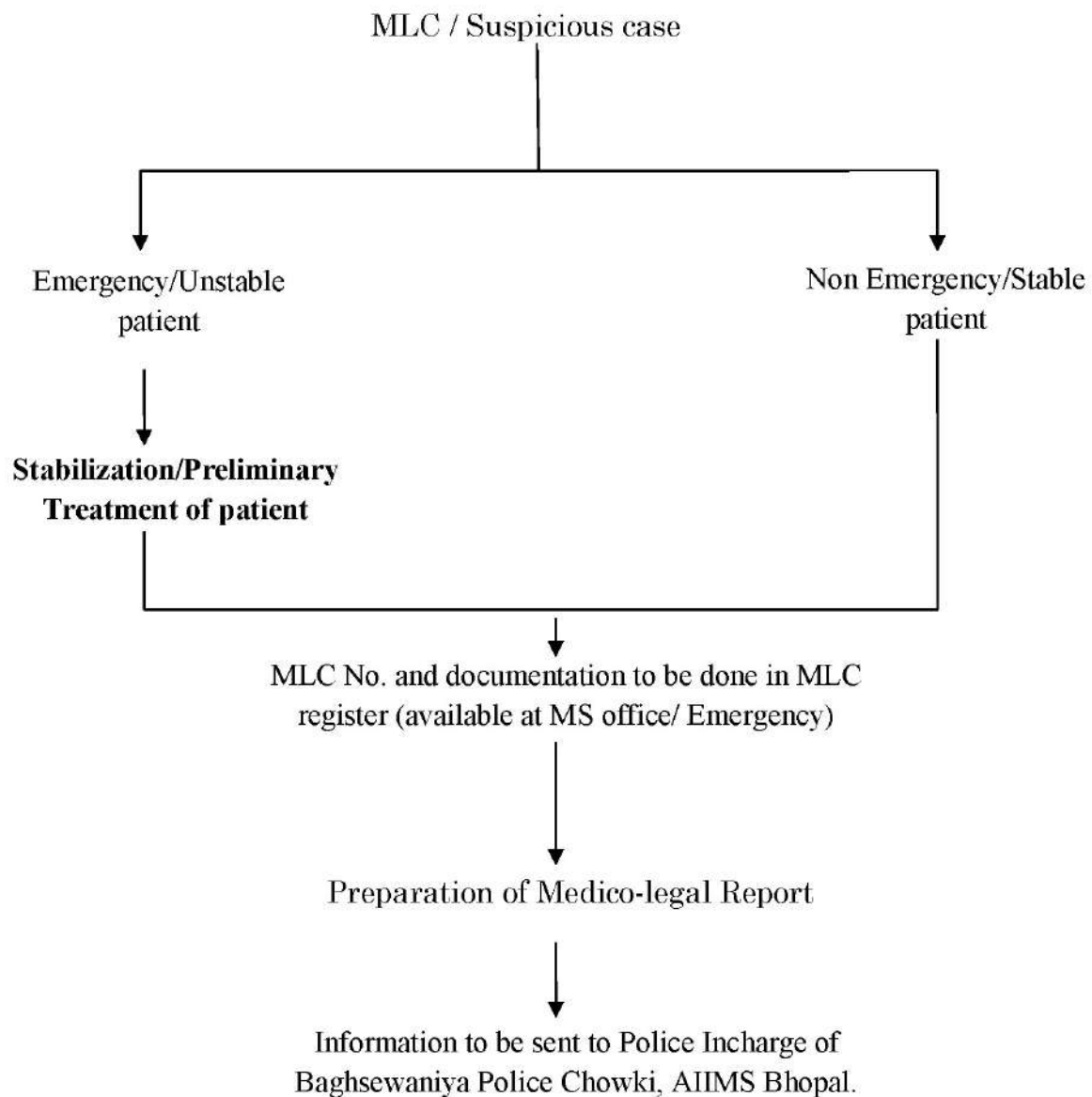
- **To save the life** of a patient and to give primary treatment is the foremost responsibility.
- Registered medical practitioner (RMP) i.e. Emergency Medical Officer (EMO)/ Assistant Emergency Medical Officer (Asst .EMO) at Emergency should decide whether the case is to be registered as MLC or not. .
- **Consent** of family members **NOT** required for registration of a case as MLC.

### **c. List of MLC**

1. Injuries due to Accidents and Assault.
2. Suspected or evident cases of suicides or homicides (even attempted cases).
3. Confirmed or suspected cases of Poisoning.
4. Burns.
5. Cases of injuries with likelihood of death.
6. Sexual Offences.
7. Suspected or evident Criminal Abortion.
8. All patients brought to the hospital in suspicious circumstances/ improper history (ex: found dead on road).
9. Unconscious patients where cause of unconsciousness is not clear.
10. Child Abuse.
11. Domestic Violence.
12. Person under Police Custody or Judicial Custody.
13. Patients dying suddenly on operation table or after parenteral administration of a drug or medication.
14. Case of Drunkenness.
15. Brought Dead.
16. Natural Disaster.

**d. Work Flow for Medico-legal Cases brought to Emergency in AIIMS Bhopal**

- All patients/cases are given hospital Registration No. in Emergency.
- From OPD/IPD if a case is Medico-legal, information must reach Emergency and MLC number is allotted.



e. **Protocol for filling the Medico-legal Report (MLR) is as under.**

I. Preliminary

- a) Information to the police should be sent in proper form.
- b) Take **Consent for examination** of the patient on the MLR Form. If less than 12 years or brought unconscious take the consent of the guardian/accompanying person/ Police Constable.
- c) The Preliminary entries should be complete.
- d) Two Identification Marks have to be noted preferably on accessible parts.
- e) Time and date of examination should be indicated clearly. If the patient is under observation to decide the severity of injury/condition, same should be indicated in Medico-legal Report.
- f) Take proper history in patient/guardian's own words and document correctly.
- g) In cases of poisoning and other cases, General Examination and other signs should be mentioned in detail. Use standard formats wherever possible.
- h) Details of police constable who brought the case should be noted.

II. Examination:

Mention the examination of injuries in detail (type, site, size, shape, colour, age of injury, direction, nature, duration). Use diagram wherever necessary.

III. Opinion

- a) Opinion should be crisp and to the point. Articles preserved should be enumerated.
- b) Prepare three copies of the document, one copy is kept at Emergency room, other as hospital record and the Original is given to the police.

## **GENERAL GUIDELINES**

Important guidelines and Instructions for dealing with Medico-Legal Cases (MLC) are as following-

1. If a **MLC, recorded elsewhere (in other hospital) is referred**, it should be treated as MLC but **NO NEW** MLC number should be issued. Treatment should continue in old MLC number. Neither a new MLR should be prepared nor is it needed to inform the police.
2. If a case is brought several days after the incident, it should be reported and findings to be noted regarding the present condition of the patient.
3. MLC can be written and signed by (EMO)/Asst.EMO /Faculty. Wherever possible, Faculty member should sign along with SR/JR if the report is prepared by them. This will facilitate court procedure when SR/ JR are not available at AIIMS Bhopal and cannot be contacted. In such cases the faculty may be required to give evidence in the court.
4. All treatment papers, investigation reports etc. to be labeled as MLC & record should be maintained for future Medico-legal use (same may be required by court for the case).
5. When Medico-legal case is to be discharged from hospital, police should be informed and information should also be sent to the Emergency to make an entry in Medico-legal register.
6. Belongings of the Medico-legal cases should be handed over to the police officer and proper receipt must be obtained in every case.
7. If a Medico-legal case is not admitted, entry shall be made in the MLC Register.
8. Consent for emergency surgery, when no attendant is available can be given by the Medical Superintendent of the hospital.
9. If (EMO)/(Asst .EMO) in Emergency does not register a case as MLC but the treating doctor thinks that the case is a MLC then it should be recorded as MLC and can be considered as MLC at any point of time, even if missed initially.
10. In case of taking away a patient or body of a Medico-legal case forcibly by the attendant, the Medical Officer should record the same on the file of the patient and Police Station/Post of the area and security staff should be informed immediately.
11. X rays, blood reports, microbiological, pathological investigations etc in Medico-legal case should be labeled as MLC & kept along with other documents of the case.

## RECORD KEEPING

1. Always prepare three copies of the Medico-legal report, one is kept as hospital record, other is kept in the office of Medical Superintendent and the original is given to police after getting proper receipt.
2. Hospital records or file of MLC should be kept as confidential in Record Section till judgment by the court of law pertaining to the case has been issued (for practical purposes, no time limit).
3. If Medico-legal report has already been issued, then duplicate Medico-legal report should not be issued unless specifically requested by the police in writing or by the order of the court.

## DEATH IN MEDICO-LEGAL CASE

1. Whenever there is a death in a Medico-legal case, the police officer should be informed. Death certificate should not be issued in Medico-legal cases and body must be sent for Medico-legal autopsy after filling the appropriate format.
2. **All cases brought dead to the Institution:** In all the cases brought dead, police is informed and body is sent to Mortuary of AIIMS Bhopal after filling the appropriate form.
3. **Cause of death certification in cases other than MLC** can only be issued by Emergency Medical Officer (EMO)/ Assistant EMO/ treating doctor who has attended the case within 7 days and is sure about the cause of death.

## MEDICO-LEGAL AUTOPSY IN MLC

1. Autopsy is done in the Mortuary Complex of AIIMS Bhopal by the Department of Forensic Medicine And Toxicology.
2. Autopsy is conducted Monday to Friday from 10 am to 5 pm.  
Timing on Saturday, Sunday and on all holidays is from 10 am to 2pm.
3. Cold storage facility in the event of death in Medico-legal case is available in the mortuary. Any case for autopsy, if brought to mortuary beyond working hours can be kept in cold storage.

## DYING DECLARATION

1. In case of impending death in MLC, the Medical Officer should immediately ask the police officer on duty in writing to call a magistrate. If there is no time to call a magistrate, the dying declaration should be recorded by the doctor himself in the presence of another doctor or staff member.
2. The primary duty of a doctor in dying declaration is to ascertain and document Compos Mentis(alert mental state ) of the patient at the beginning and at the end of the statement.

## SPECIFIC CASES

(Important Points to be remembered)

- i. **Rape/Sexual Assault Cases (suspect and survivor)**
  - a) Be polite to the suspect and victim.
  - b) Always take consent. In case of suspect, medical examination can be done even if he declines to give consent.
  - c) Take a detailed history and document it in person's own words.
  - d) Examine them properly and fill the prescribed form for suspect and survivor (**Annexure 7 & Annexure 9**, respectively).
  - e) Always provide information regarding psychiatric counseling to the victim.
  - f) All male and female Registered Medical Practitioners are eligible to examine the victim.
  - g) Always examine the victim in presence of female attendees. Victim can have a female acquaintance/relative with her if she wants.
  - h) In case of children, sedative or analgesic may be needed for examining genitalia in painful condition.
  - i) Do not delay the examination. Exact time of commencement and completion must be noted in the report.
  - j) Never attempt to undress the victim for examination. Convince her to undress herself.
  - k) Never pass judgmental remark or comments that might appear unsympathetic.
  - l) Denying examination of the rape victim is unlawful.



**m) Following instructions to be followed depending on the circumstances:-**

- Take history whether she has taken bath and changed the clothes.
- With cotton swab collect vaginal secretion from posterior fornix and prepare 4 slides.
- Place loose pubic hair in a labeled envelope.
- Obtain fingernail scrapings.
- Preserve garments for seminal and blood stain.
- Collect blood sample (15 ml).
- If age estimation required then refer to the Department Of Forensic Medicine.
- If clothes are to be preserved and sealed, always provide proper clothing or inform the relatives to bring one set of clothes.
- **NOTE:** Staining of vaginal smear, examination of slide and opinion in sexual assault cases, is being given by Department Of Forensic Medicine And Toxicology. The slide can be prepared, dried and forwarded to Department Of Forensic Medicine for needful.
- Treatment of victim should be given when needed.

**ii. Fire Arm Injuries**

- a) Bullets, lead shots etc recovered from the wounds or body in fire arm injury should be air dried then put in a bottle(s), padded with cotton, documented sealed and handed over to the police.
- b) Always try to mention about the entry and exit wound.
- c) Always take X-Ray of the track or whole body.
- d) Never pick the bullet using a metal/ toothed forceps, rather use fingers or rubber tipped forceps.
- e) Never wash the bullet.

**iii. Criminal Abortion**

- a) Give proper treatment.
- b) Always perform examination of clothes and take blood sample.
- c) Proper history and documentation.
- d) If patient dies, send for Medico-legal autopsy.
- e) Preserve the remains of product of conception (POC) for Chemical Analysis and DNA Analysis if required.
- f) Clothes are recorded and preserved

- g) If she refuses to make a statement, the doctor should not pursue the matter. He must consult a senior professional colleague.

#### **iv. Burns:**

- a) Proper history and documentation
- b) Give primary treatment.
- c) Extent and degree of the burns to be noted.
- d) Make a proper sketch showing areas involved and state in percentage.
- e) Inflammable agents on the body/cloth are recorded and preserved.
- f) Dying declaration if required should be taken especially in young married females.

#### **v. Hanging/Strangulation**

- a) Ligature mark- Describe its position, nature, width, direction and extent whether complete or incomplete.
- b) Ligature material in-situ should be cut away from the knot so as not to disturb the knot. Then the cut ends and knot have to be secured with threads separately.
- c) Ligature material should be preserved.
- d) Examination of ligature material in respect of its nature, position, type of knot, circumference of loop, length of short and long free ends, foreign bodies and stains.

#### **vi. Poisoning**

- a) Give primary treatment. Take proper history.
- b) History of Substance consumed, amount consumed, when, where & number of people consumed.
- c) **Proper documentation of history, treatment and articles sealed.**
- d) Send properly sealed, labeled samples of vomitus /stomach wash and blood sample to the police and make record wherever possible.
- e) Never allow the entry of unauthorized person near the victim in a case of homicidal poisoning.

#### **vii. Injury Cases**

- a) Give primary treatment.
- b) Examine and record all injuries properly.
- c) Proper documentation (**Annexure 4**).
- d) Opinion should include injury by type of weapon ( sharp/blunt ) , manner (Self-inflicted, homicidal, accidental) and duration of injury.

#### **viii. Drunkenness**

- a) Take proper history and document correctly in the form provided (**Annexure 6**).
- b) Consent should be taken but under Sec 53 (1) CrPC, examination of an accused can be carried out by a doctor at the request of the police, even without his consent.
- c) Examine properly and collect urine, blood sample in a proper way.
- d) Mention the starting and ending time of examination.
- e) Never use rubber stopper in collection of sample. Use screw – capped bottle.
- f) Spirit must not be used for cleaning the skin and the syringe must be free from any trace of alcohol. Chlorhexidine can be used instead.

#### **ix. Child Abuse**

- a) All children should be approached with extreme sensitivity and their vulnerability recognized and understood.
- b) Give proper treatment.
- c) Usually medical examination should be done within 24 hrs or as soon as possible.
- d) Consent from parents/guardians in written should be taken.
- e) Consent from child in form of verbal, expressed or written is to be taken.
- f) Record the child's weight , height and sexual development,
- g) Take proper history and document it correctly.
- h) Always prepare the child by explaining the examination and showing equipment; this has been shown to diminish fears and anxiety. Encourage the child to ask questions about the examination.
- i) If possible, interview the child alone (separately from the attendants) in a separate room.
- j) Psychiatric counseling is advised.
- k) Never put undue pressure on a child for medical examination, if he/she denies even after convincing. But in conditions requiring medical attention, such as bleeding or a foreign body is suspected, consider sedation or a general anesthesia.
- l) Avoid unnecessary painful and invasive procedures.

## **PRESERVATION OF SAMPLES**

1. All samples should be properly labeled (Hospital registration no, Pt's name, age, date, police station), sealed (seal available at MS office) and signed by doctor who prepared the MLC with his designation & full name.
2. All samples requiring toxicological, ballistic, DNA, blood grouping analysis to be sealed and handed over to the police to be sent to specialized labs like forensic lab.

## **APPENDICES**

### **Appendix 1**

**As per section 320 of the Indian Penal Code, following kinds of hurt are designated as "GRIEVOUS"**

1. Emasculation (applicable only for males).
2. Permanent privation of the sight of either eye.
3. Permanent privation of hearing of either ear.
4. Privation of any member or joint.
5. Destruction or permanent impairing of the powers of any member or joint.
6. Permanent disfiguration of the head or face.
7. Fracture or dislocation of a bone or tooth.
8. Any hurt which endangers life or which causes the victim to be in severe bodily pain or unable to follow his ordinary pursuits for a period of 20 days.

### **Appendix 2**

#### **PENAL PROVISIONS RELATED TO MEDICAL PRACTICE**

- **S.39 CrPC-** Every person aware of the commission of, or of the intention of any other person to commit any offence punishable under IPC shall forthwith give information to the nearest Magistrate or police officer of such commission or intention.
- **S. 52 IPC-** Nothing is said to be done in good faith which is done without due care and attention.
- **S. 74 IPC-** Non Attendance, in obedience to summon from court. (6 months imprisonment).
- **S.175 IPC-** Omission to produce the documents to public servant by person legally bound to produce it. (6 months imprisonment).

- **S. 176 IPC-** Omission to give notice or information to public servant by person legally bound to produce it. (1 month imprisonment).
- **S.177 IPC-** Furnishing false information. (Upto 6 months Imprisonment)
- **S.179 IPC-** Refusing answering to public servant authorized to question. (Upto 6 months imprisonment).
- **S. 191 IPC-** Giving false evidence.
- **S.192 IPC-** Fabricating false evidence.
- **S.193 IPC-** Punishment for false evidence (upto 7 years imprisonment).
- **S. 194 IPC-** Giving or fabricating false evidence with intent to produce conviction of capital offences. (upto 10 years imprisonment).
- **S. 197 IPC-** Issuing or signing false certificate. (upto 7 years imprisonment).
- **S. 201 IPC:** Causing disappearance of evidence of offence or giving false information to screen offender. (upto 10 years imprisonment).
- **S.202 IPC:** Intentional omission to give information of offence. (upto 6 months imprisonment)



## **ANNEXURES (FORMS)**

### **ANNEXURE-1**

**All India Institute of Medical Sciences Bhopal, 462020**

(Medico legal Case sheet)

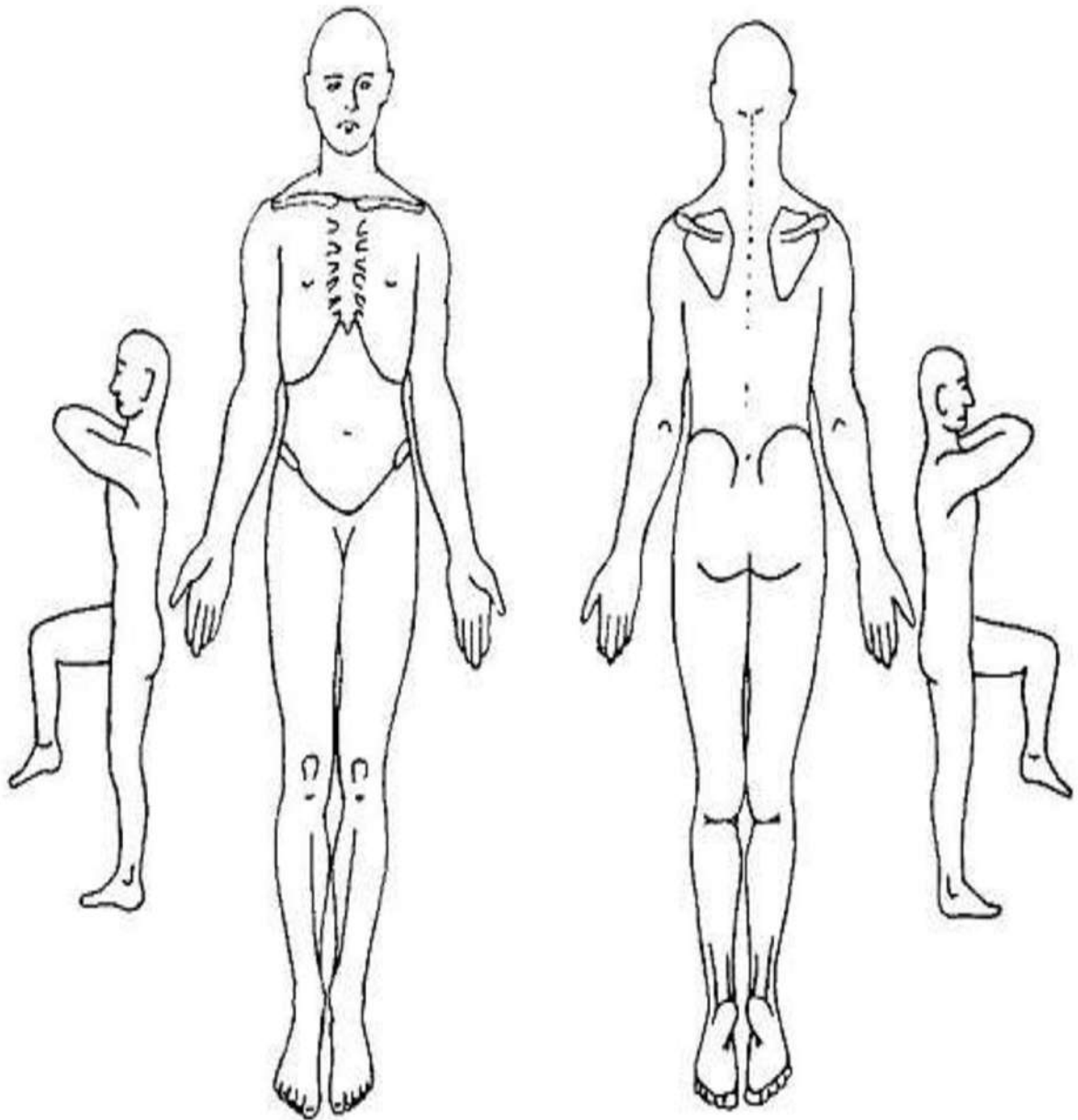
Registration No- (No./Year)  Date-	Name..... S/o/W/o/D/o..... Age..... Sex..... Occupation..... Address ..... ..... Brought by (1)..... (2)..... Police station..... Case DD/ FIR No..... Date..... Investigation Officer (Name and batch No) ..... Police station .....
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**All India Institute of Medical Sciences Bhopal, 462020**

**(Medico legal Case sheet)**







## **ANNEXURE-2**

**All India Institute of Medical Sciences Bhopal, 462020**

**(Intimation of MLC)**

From:

All India Institute of Medical Sciences Bhopal  
Saket Nagar  
Bhopal, Madhya Pradesh  
Pin: 462020

To,

The Sub – Inspector of the police,  
Subject : Information regarding a Medico-legal case

Sir/ Madam,

This is to inform you that patient by name.....  
male/female, aged ..... years, son/daughter/wife of..... resident of  
..... has been brought into the Emergency  
Department / OPD/ Ward at..... am/pm on..... alleged to have  
been.....

(State brief history and condition of the patient)  
at..... am/pm on (date of incident)..... at (place) .....

Attending Doctor's Name And Designation:.....  
Reg No :.....

Signature of Doctor:

Date and Time :.....  
He/She is being treated as out/ in patient in Ward No/ OPD/Ward/Emergency .....

This information was already given on telephone to..... Buckle  
no..... (Name of Police Officer) of police station.....  
on..... at..... am/pm. Please do the needful.

Date:

Yours' Faithfully

Sign:

Time:

Name:

Designation of security personnel:



### **ANNEXURE-3**

**All India Institute of Medical Sciences Bhopal, 462020**

**(Intimation of death in MLC)**

From,  
All India Institute of Medical Sciences Bhopal  
Saket Nagar  
Bhopal, Madhya Pradesh  
Pin: 462020

To,  
The Sub- Inspector of police,  
.....  
(Name and address of police)

Subject – Information of Death in Medico-legal Case.

Sir,

This is to inform you that the patient by name ..... male/female  
aged ..... years, son/daughter/wife of ..... resident  
of ..... who was admitted in this hospital in ward  
No./OPD/Emergency ..... on ..... at ..... a.m. /p.m. as a Medico-legal case has  
expired on ..... at ..... a.m./p.m

OR

is brought dead to this hospital on ..... at ..... a.m./p.m.

The information of Medico-legal registration was already sent on ..... at  
..... a.m./p.m.

Please do the needful.

Yours faithfully

Date:.....

Sign:.....

Time:.....

Name:.....

Designation:.....



## **ANNEXURE-4**

### **All India Institute of Medical Sciences Bhopal, 462020**

#### **PROFORMA FOR EXAMINATION AND REPORT OF A CASE OF INJURY**

Requisition from S.I. of Police ..... vide letter no. .... Dated.....  
for examination of ..... escorted by P.C. no. .... Name .....

Place of Examination:

Date and Time of Examination:

1. Name: .....
2. S/o/ W/o /D/o.....
3. Address: .....
4. Age as stated: .....
5. Religion: .....
6. Occupation: .....
7. Brought and identified by.....
8. Consent given in writing:

I .....s/o,d/o,w/o.....with complete consciousness, free-will and without any pressure give consent for medical examination. I have been clearly explained about the examination and the result/findings could be in my favour or against.

Signature

मैं ..... पुत्र/पुत्री/पत्नी..... अपनी सम्पूर्ण चिकित्सा - विधिक जांच हेतु सम्पूर्ण रूप से तथा स्वेच्छापूर्वक, बिना किसी दबाव के अपनी सहमति प्रदान करता/करती हूँ। मुझे इस जांच के प्रयोजन, प्रक्रिया, परिणाम एवं लाभ के बारे में भली भांति अवगत करा दिया गया है। यह जांच मेरे पक्ष या विपक्ष में जा सकती है।

हस्ताक्षर

9. Examination in presence of :

10. Identification marks: a..... b .....

11. History as given by the patient (if unable to speak by the person accompanying the patient):

- a. How the injury was sustained, if assaulted, no. of persons who assaulted
- b. Whether any weapon was used, if so what type of weapon; if it was hard, blunt or sharp cutting or pointed etc.
- c. Date and time of infliction of injury.
- d. Whether any first aid treatment was given anywhere
- e. Whether dying declaration is/was recorded as required.

12. On Examination:

- a. If unconscious: degree of unconsciousness,
- b. BP/Pulse:
- d. Respiratory rate
- e. Pupils
- f. RS
- g. CVS
- h. P/A

i. Any bleeding from nostrils, ear, mouth etc.

k. Prognosis good/Uncertain

13. Physical examination: Each injury is to be described as follows:

BY TYPE OF WEAPON INFLICTED	
SIMPLE, GRIEVOUS OR DANGEROUS	
DESCRIPTION, DURATION OF INJURY	
SITE	
SIZE	
NATURE OF INJURY	
S. NO	

Materials preserved .....  
.....  
.....

Advice .....  
.....  
.....

Final Opinion: .....  
.....  
.....

Name and Signature of M.O

SEAL





## **ANNEXURE-5**

**All India Institute of Medical Sciences Bhopal, 462020**

### **Examination of Weapon**

Letter No. ....

Date .....

To,  
The Investigating Officer,  
P.S. ....

Subject- Regarding examination of given weapon/ article.

Reference- Your letter no. ...., dated ....., P.S. ....

In reference to above case and PM report no. ...., received a seal packet bearing ..... no. of seal of P.S. .... For examination and subsequent opinion.

Along with sealed packet following document are submitted by police-

1. Case diary.....
2. P.M. report no. ....
3. MLC report no. ....
4. FSL report no. ....
5. Any another document.....

### **Examination of weapon/ articles-**

Before opening the packet, describe seal , date , PM No., MLC.No, Police Station , DD, FIR No.

On opening the packet a .....(name of weapon and article) is recovered.

The detailed examination is as follow:

Name of the weapon: ..... type (heavy/ light).....

Made up of material .....

Part .....

Weight .....

Blunt or sharp .....

Edges – single / double and/ or serrated/ non serrated: .....

Pointed / non-pointed ..... hilt (present /absent).....

In case of lathi, bamboo, rod etc.

Length: ..... width: .....

No. Of nodes: ..... distance between nodes: .....

Any other (stain, foreign material, rust, print, design etc.):

.....

Dimensions : As per diagram.

OPINION: After examination of above mentioned weapon and submitted document,  
I am of the considered opinion that the injury ..... (mention the injury no.,  
if any) found on the body of deceased as mention in the PM / injury report could be / could  
not be possible with the weapon submitted by the police.

Weapon resealed and handed over to the police ..... for further investigation.

Date:

Name and Signature of M.O.  
SEAL



## **ANNEXURE-6**

**All India Institute of Medical Sciences Bhopal, 462020**

### **Examination of Case of Drunkenness**

No.: MLC No./...../20.....

Date: .....

Name : ..... s/o, d/o, w/o ..... Age: ..  
..... Sex: M / F Marital status : .....

Address : .....

Brought by: Name - ....., Batch No. - ....., P.S. - .....

Identification Marks:

(1) .....

(2) .....

Date & Time of examination : .....

Consent :

I .....s/o, d/o, w/o.....with complete consciousness, free-will and without any pressure give consent for medical examination. I have been clearly explained about the examination and the result/findings could be in my favour or against.

Signature

मैं ..... पुत्र/पुत्री/पत्नी..... अपनी सम्पूर्ण चिकित्सा - विधिक जांच हेतु सम्पूर्ण रूप से तथा स्वेच्छापूर्वक, बिना किसी दवाब के अपनी सहमति प्रदान करता/करती हूँ। मुझे इस जांच के प्रयोजन, प्रक्रिया, परिणाम एवं लाभ के बारे में भली भांति अवगत करा दिया गया है। यह जांच मेरे पक्ष या विपक्ष में जा सकती है।

हस्ताक्षर

History : .....



Examination -

General behavior ..... Clothing .....  
Speech ..... Self control .....  
Memory and mental status ..... Writing .....  
Pulse ..... B.P. .... Temp .....  
Skin ..... Mouth ..... Teeth .....  
Conjunctiva ..... Pupil .....  
McEvan's sign ..... Lateral gaze nystagmus .....  
Ears ..... Gait .....  
Stance ..... Reflexes .....  
Muscle co-ordination .....  
C.V.S. ....  
Respiratory system .....  
Abdominal examination .....

Collection of samples - (1). Blood (2). Urine

Opinion -

1. Person has not consumed alcohol
2. Person has consumed alcohol, and
  - (a) not under the influence of alcohol, or
  - (b) under the influence of alcohol, or
  - (c) intoxicated with alcohol

Date :

Signature & Seal of M.O.

Place



## ANNEXURE-7

### **All India Institute of Medical Sciences Bhopal, 462020**

#### SEXUAL OFFENCE- EXAMINATION OF ACCUSED/ EXAMINATION OF POTENCY

No.MLI/sex/...../20.....

To,

P.S. ....

District.....

PHOTOGRAPH

Subject: Regarding medical examination of ..... s/o ..... in  
connection with Cr. No..... U/S .....

Reference : Tour letter No. .... dated ..... P.S.....

Date: .....

Particulars-

Name: ..... S/o .....

Age: ..... Sex:Male Marital Status : .....

Address: .....

B/B : Name- ..... Batch No. .... P/S- .....

Identification mark: 1. .... 2. ....

Date and time of examination: .....

Consent:

I .....s/o .....with complete consciousness, free-will  
and without any pressure give consent for medical examination. I have been  
clearly explained about the examination and the result/findings could be in my  
favour or against.

Signature

मैं ..... पुत्र..... अपनी सम्पूर्ण  
चिकित्सा - विधिक जांच हेतु सम्पूर्ण रूप से तथा स्वेच्छापूर्वक, बिना किसी दवाब के अपनी सहमति  
प्रदान करता/करती हूँ। मुझे इस जांच के प्रयोजन, प्रक्रिया, परिणाम एवं लाभ के बारे में भली भांति  
अवगत करा दिया गया है। यह जांच मेरे पक्ष या विपक्ष में जा सकती है।

हस्ताक्षर

History : [as per.....(name of informant)]

.....

.....

.....

.....

.....

(1) General physical examination –

- i. Built.....
- ii. Height .....
- iii. Weight.....
- iv. Central nervous system:.....
- v. Cardio vascular system:.....
- vi. Respiratory system.....
- vii. Abdomen.....

(2) Seconadry sexual characters-

- i. Voice : feminine/crackling/hoarse
- ii. Adam's apple: prominent/non prominent
- iii. Beard:
- iv. Mustaches:
- v. Chest hair:
- vi. Axillary hair:

(3) Examination of clothing- the person under examination is wearing/not wearing.....(Colour) under garment. Which shows .....stains on .....region on naked eye examination

(4) Genito –perineal examination

- i. Development of genitals.....
- ii. Pubic hair.....
- iii. Penis.....
  - a. Condition.....
  - b. Injuries of frenulum/prepuce/glans.....
  - c. Smegma.....
- iv. Scrotum.....
- v. Testis and epididymis.....
- vi. Cremastric reflex.....
- vii. Superficial abdominal reflex .....
- viii. Signs of venereal diseases.....

(5) Injuries on body

.....

.....

.....

(6) Materials collected for investigation-

- Undergarment/clothing
- Penile smear slide and swab
- Material preserved for DNA
- Any other sample

**Opinion : nothing could be found significant to suggest that the person under examination is not capable / capable to perform sexual intercourse under normal circumstances.**

**Date:.....**

**Seal and Signature of M.O.**

**Place.....**

## **ANNEXURE-8**

FORM NO. 4(See Rule 7)

### **MEDICAL CERTIFICATE OF CAUSE OF DEATH**

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

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

Name of the Hospital .....

I hereby certify that the person whose particulars are given below died in the hospital in Ward No. ....  
on ..... at ..... am/pm.

NAME OF DECEASED					
Sex	Age at Death				For use of Statistical Office
	If 1 year or more, age in years	If less than 1 year, age in months	If less than one month, age in Days	If less than one day, age in Hours	
1. Male 2. Female					
CAUSE OF DEATH				Interval between onset & death (approx)	
<b>I. Immediate cause</b> State the disease, injury or complication which caused death, not the mode of dying such as heart failure, asthenia etc.		a.....  Due to (or as a consequences of)			
<b>Antecedent cause</b> Morbid conditions, if any, giving rise to the above Cause, stating underlying condition last		b.....  Due to (or as a consequences of)			
II. Other significant conditions contributing to the death but not related to the disease or conditions causing II		.....			

Manner of Death How did the injury occur?

1. Natural 2. Accident 3. Suicide 4. Homicide  
5. Pending Investigation

-----  
If deceased was a female, was pregnancy the death associated with? 1. Yes 2. No

If yes, was there a delivery? 1. Yes 2. No

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

Date of verification .....

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

Certified that Shri/Smt/Km ..... S/W/D of Shri. ....

R/O ..... was admitted to this hospital on ..... and expired on .....

Doctor .....  
(Medical Supdt.)  
Name of Hospital

## **ANNEXURE-9**

Form for medical examination of survivor of sexual assault:

<https://mohfw.gov.in/sites/default/files/953522324.pdf>

**Note :** The given forms in the manual must be used by the doctors in respective cases as they are standardized and approved by the experts of Ministry Of Health And Family Welfare.

## **IMPORTANT CONTACTS**

1. Police Chowki/ Post AIIMS Bhopal :  
Mr. V.K Singh(ASD) : 7587601988  
TI-(Baghsewaniya) : 9479990533
2. Emergency: 0755-2672348
3. Medical superintendent: 0755-2970020
4. Director office : 0755- 2672317
5. Mortuary: 0755-2672348