Government of Karnataka
(C.R.P.67)

IN THE COURT OF 1st ADDL. DISTRICT AND SESSIONS JUDGE, CHIKKAMAGALURU.

SPL.C.24/2022

PW-20

CW-18

Duly Sworn on: 05-03-2026

Witness Name	:	Dr.Lohith Kumar.R.
Father's Name	:	Rudranaik S
Age	:	41 years
Occupation	:	Associate Professor, Department of Forensic Medicine and Toxicology, Chikkamagaluru Institute of Medical Science, Chikkamagaluru
Place of Residence	:	Chikkamagaluru

(The accused is in judicial custody and today he is produced through video conferencing from District Prison, Chikkamagaluru and before recording the evidence of witness, it is got confirmed from the accused that the voice is clearly audible to him.)

Examination in Chief by Public Prosecutor:-

1. I am working as Associate Professor at Department of Forensic Medicine and Toxicology,

Chikkamagaluru Institute of Medical Science, Chikkamagaluru from 21.02.2021.

2. On 19-11-2021 at 3.30 p.m., I received requisition from Inspector of Police, Rural Police Station, Chikkamagaluru to conduct postmortem examination on deceased by name Sheshappa @ Shashi S/o Shanthappa, male, aged about 34 years, resident of Bidarahalli Village, Mudigere Taluk along with said dead body and it was identified by HC 41 Hallappa.M.S i.e., PW17. Now I see said requisition and report and the same are already marked as Ex.P40 and Ex.P41 the signatures of witness is now marked as Ex.P40(c) and (d) and 41(b).

3. I conducted postmortem examination of said dead body from 3.35 p.m to 5.00 p.m on the same day.

4. On external examination, I noticed that the dead body was of fair complexioned adult male, moderately built and nourished, measuring 168 c.m in length and the rigormortis was in passing off stage. Livor mortis was present over the back except over pressure areas and was fixed. No

signs of putrefaction. I noticed the presence of sub-conjunctival hemorrhage in both eyes.

5. I noticed following external injuries on the dead body:-

1. An incised wound measuring 5 c.m x 1 c.m, bone deep was present obliquely over left side of occipito temporal region. Its lower end was 8 cm above the hairline and upper end was 1 cm below the left parietal eminence. The wound was bleeding with tailing of the wound was present at the lower end. Scalp hairs around and above the wound are clean cut. Underlying outer table of the skull bone showed cut corresponding to the wound.
2. An incised wound measuring 4.8 c.m x 0.5 c.m, muscle deep was present horizontally over left side of occipital region, 4 cm above the hairline. The wound was bleeding with tailing of the wound was present at the left side. Scalp hairs around and above the wound are clean cut. Underlying outer table of the skull bone showed cut corresponding

to the wound.

3. An incised wound measuring 6 c.m x 0.4 c.m., bone deep was present obliquely over left side of occipital region and neck, along the hairline. The wound was bleeding with tailing of the wound was present at the left side. Scalp hairs around and above the wound are clean cut. Underlying outer table of the skull bone showed cut corresponding to the wound.

4. An incised wound measuring 1.8 c.mx 0.4 c.m., muscle deep was present obliquely over inter-parietal eminence, 1 c.m. right to lower end of injury No.1. The wound was bleeding with tailing of the wound was present at the right side. Scalp hairs around and above the wound were clean cut.

5. A spindle shaped stab wound measuring 2 cm x 0.5 cm, cavity deep was present obliquely over upper back, 1 cm left to the spinal groove. Wound was situated 17 cm from hairline and was bleeding. Edges of

the wound were clean cut. Shirt was having corresponding cut and was stained with blood.

6. A spindle shaped stab wound measuring 1.9 cm x 0.5 cm, cavity deep was present obliquely over left side of upper back, 6 cm left to the spinal groove. Edges of the wound were clean cut. Shirt was having corresponding cut and it was stained with blood.
7. An incised wound measuring 13 cm x 0.2 cm., subcutaneous deep was present obliquely over upper back going downwards between injuries No.5 and 6. Tailing of the wound was present on left side.
8. Reddish contusion measuring 3 cm x 2 cm, 2 cm x 0.5 cm, 6 cm x 2 cm and 1.8 cm x 0.4 cm were present over left side of upper back over shoulder blades.
9. An incised wound measuring 6 cm x 0.5 cm, subcutaneous deep was present obliquely over lower part of nape of neck. Tailing of the wound was present on left

side.

10. An incised wound measuring 8 cm x 0.5 cm, subcutaneous deep was present obliquely over lower part of nape of neck, 2 cm below injury No.9. Tailing of the wound was present on left side.

11. An incised wound measuring 9 cm x 0.5 cm, subcutaneous deep was present obliquely over postero-lateral aspect of left knee and upper part of leg. Tailing of the wound was present on upper side.

12. Chop wound measuring 13 cm x 7 cm was involving right side of lower part of cheek, chin and upper part of neck, exposing fractured fragments of maxilla and mandible bones. Multiple sharps cuts were present within the wound.

13. Bluish contusion measuring 14 cm x 10 cm over right and lateral aspect of neck and upper part of right side of the chest.

14. An incised wound measuring 4 cm x 0.4 cm, muscle deep was present horizontally over right side of neck along the thyroid

prominence. The wound was bleeding with tailing of the wound was present at the right side.

15. An incised wound measuring 2 cm x 0.4 cm, muscle deep was present obliquely over right side of cheek. The wound was bleeding with tailing of the wound was present along the angle of the mandible.

16. An incised wound measuring 7 cm x 0.6 cm, muscle deep was present horizontally over right side of neck along the thyroid prominence. The wound was bleeding with tailing of the wound was present at the right side.

17. Chop wound measuring 5 cm x 1.5 cm was involving right side of bridge of nose, lower part of right eye and going obliquely over right eyebrow, exposing fractured fragments of nasal and maxillary bone.

18. Reddish contusions measuring 4 cm x 3 cm, 2 cm x 1.5 cm, 1 cm x 1 cm, 1.5 cm x 0.3 cm, 0.7 cm x 0.1 cm were present over upper part of right side of chest and

shoulder girdle region.

19. A spindle shaped stab wound measuring 2.5 cm x 0.6 cm, cavity deep was present obliquely over left side of upper abdomen, 7 cm above the umbilicus. Edges of the wound are clean cut. Shirt was having corresponding cut and it was blood stained.

20. A spindle shaped stab wound measuring 2.8 cm x 0.8 cm, cavity deep was present horizontally over upper abdomen along the midline, 5 cm above the umbilicus. Edges of the wound were clean cut. Shirt was having corresponding cut and it was blood stained.

21. A spindle shaped stab wound measuring 3 cm x 2.2 cm, cavity deep was present horizontally over right side of upper abdomen, 2 cm right to the umbilicus. Edges of the wound were clean cut. Shirt was having corresponding cut and it was blood stained.

22. A spindle shaped stab wound measuring 2.8 cm x 1 cm, 2.2 cm x 0.8 cm, 1.5 cm x 0.5 cm and 1.2 cm x 0.5 cm were present

obliquely over right ileac fossa region. Edges of the wound were clean cut. Shirt was having corresponding cut and it was blood stained.

23. A spindle shaped stab wound measuring 2.5 cm x 0.8 cm, cavity deep was present obliquely over right side of upper abdomen, 2 cm below the right nipple. Edges of the wound were clean cut. Shirt was having corresponding cut and it was blood stained.

24. A spindle shaped stab wound measuring 2.8 cm x 0.9 cm, cavity deep was present obliquely over left side of upper abdomen, 5 cm below the left nipple. Edges of the wound were clean cut. Shirt was having corresponding cut and it was blood stained.

6. On internal examination on dissection, I noticed the presence of sub-scalp extravasation of blood in both temporo-parieto-occipital region of the scalp. Scull showed linear fracture of left temporo-parieal bone extending into the base of skull, fracture of outer table of occipital bone

corresponding to external injury No.1 to 3. The membranes were torn below the fractured area. The brain was congested. Thin film of subdural hemorrhage was present in both temporo-parieal lobe. Patchy sub-arachnoid hemorrhage was present over cerebrum and cerebellum.

7. On dissection of thorax I noticed that the walls were contused at places, fracture of ribs along directions of stab wounds. Pleura contained about 20 ml blood. Larynx and trachea showed thick copius froth. Both lungs were congested, heavy and edematous and showed penetrating wound corresponding to stab wounds. On dissection of lungs showed dark blood mixed with froth was oozed out.

8. On dissection of abdomen, I noticed that the walls were contused at places, cavity contained about 100 ml of blood, mouth pharynx and oesophagus contained froth and blood. Stomach contained about 100 ml of semi digested food particles and smell of alcohol was noted. Both intestines were intact and contained gas and mucus. Coils of intestine showed penetrating

wound corresponding to stab injury to abdomen. All other organs were congested.

9. On dissection of neck, I noticed that extravasation of blood in dermis, superficial fascia, deep fascia and muscles over front and right side of the neck. Fracture of the right greater cornue of thyroid bone and greater horn of hyoid bone was present. Extravasation of blood was present surrounding the fractured area. The time since death was about 36 to 48 hours prior to the commencement of postmortem examination.

10. I collected the specimens i.e., blood in gauze piece for cross matching and blood sample in sodium florid to rule out any intoxication and for cross matching. I also collected and preserved the cloths found on the dead body and handed over the same to the investigating officer through HC 41 Halappa.M.S in sealed manner and instructed to submit the samples to forensic science laboratory for analysis at the earliest. I can identify the cloths which were found on the dead body and collected by me.

11. Witness identifies a blue coloured

underwear, a black coloured dirty chaddi/shorts, blue and white dotted full sleeve blood stained shirt, multi coloured thread over neck and abdomen as the one noted by him over the dead body and collected and handed over to the investigating officer. Out of said cloths, a blue and white dotted full sleeves shirt is already marked as MO.12. A blue coloured underwear, a black coloured dirty chaddi/shorts and multi coloured thread over neck and abdomen are now marked as MO.15 to MO.17 respectively.

12. Witness identifies blood in gauze piece and blood sample preserved in sodium fluoride and the same are already marked as MO.13 and MO.14.

13. After examination, I issued my provisional opinion regarding cause of death to that effect the death was due to cranio-cerebral damage as a result of injury sustained to head consequent upon sharp heavy cutting force impact. All the injuries were ante-mortem in nature and fresh at the time of death. The above mentioned injuries to the head were sufficient to cause death in the ordinary

course of nature. However I kept my final opinion pending for receipt of forensic sceince laboratory report. In the said regard I issued postmortem examination report on 21.11.2021. Now I see postmortem examination report and it bears my signatures on each page. Said postmortem examination report is already marked as Ex.P48 and the signatures of the witness are now marked as Ex.P48(b) to Ex.P48(g). The said report was counter signed by the District Surgeon of our hospital.

14. Later on 22.02.2026, I received a requisition from the investigating officer along with a FSL report seeking my final opinion regarding cause of death. I have gone through the findings given in said report. On the basis of findings given in said report and on the basis of my examination I am of the opinion that the provisional cause of death mentioned by me in Ex.P48 report remained unchanged. In the said regard I issued my final opinion on the same day i.e., on 22.02.2026. Now I see said opinion and it bears my signature. Said opinion is marked as Ex.P55 and the signature of

the witness is marked as Ex.P55(a).

15. By showing the weapons identified as MO.8 and MO.9 to the witness, the Public Prosecutor asked him weather the injuries mentioned by him in the postmortem examination report are possible if assaulted with said weapons. With the permission on the court, witness examined said weapons and compared the same with the injuries noted in the postmortem examination report for about 15 minutes and states that on the basis of my examination, I gave my opinion that the death was due to cranio-cerebral damage as a result of injury sustained to the head consequent upon sharp heavy cutting force impact. By going with said opinion, I am of the opinion that out of 24 external injuries present on the body of the deceased, 13 injuries i.e., injury No.1, 2, 3, 4, 7, 9, 10, 11, 12, 14, 15, 16, 17 could be possible if assaulted with the kind of the weapon now shown to me which is marked as MO.8, a machete (Katti). The injury No.5, 6, 19, 20, 21, 22, 23, 24 could be possible if assaulted with the kind of the weapon now shown to me

which is marked as MO.9, a knife.

16. The injury No.8, 13 and 18 could be possible due to blunt force impact.

Cross Examination by Sri.PES., Advocate for accused:

17. It is true to suggest that in the inquest papers submitted by the police, they mention the details of case number.

Question: While conducting the autopsy you will make rough note of the external injuries present over the deadbody?

Ans: Yes.

Question: After the completion of postmortem examination, you will note down the injuries noted by you in the postmortem register?

Ans: No, because we use the rough note for our own reference.

18. While conducting autopsy I had not taken assistance of any medical person like health inspector, compounder, D group employee.

Question: In Karnataka Medical Manual, they are be guidelines regarding conducting autopsy and

you have not followed it?

Ans: I have not gone through said manual but, I have followed all prescribed procedures.

Question: In the month of november there will be cold climate in Chikkamagaluru?

Ans: Relatively low temperature will be there in the month of november.

Question: In cold climate, rigor-mortis sets early but it takes long time to pass off?

Ans: It is an internal finding, as it depends on body condition.

Question: All the MBBS Students have to refer Dr.Narayana Reddy's medical jurisprudence?

Ans: No. More than thousands of forensic medicines books are available, we do not recommend specific books the students or graduates.

Question: Which book you have referred while pursuing your studies?

Ans: I have referred many books.

Question: Chop wounds could be caused by weapons such as sword, axe and any other heavy sharp weapon?

Ans: Chop wounds can be caused due to any sharp heavy cutting force producing weapons or instruments.

Question: The depth of punctured or stab wounds would be more comparing to its width and length?

Ans: It depends upon the elasticity of the skin and the site of the impact.

Question: Are you aware of Dr.Narayana Reddy's and Modi's medical jurisprudence?

Ans: Yes.

Question: In those medical jurisprudence, it is stated that the depth of punctured or stab wounds would be more comparing to its width and length?

Ans: It depends upon the elasticity of the skin and the site of the impact.

Question: Generally in case of stab wounds, the skin would be inverted?

Ans: It depends upon the elasticity of the skin and the site of the impact.

Question: In MLC cases, you have to mention the details of the all the injuries?

Ans: Yes.

Question: You have not mentioned the depth of

the injuries in Ex.P48 report?

Ans: It is false to say that.

Question: You have not mentioned the depth of the injuries in measurement?

Ans: It is false to say that as the injuries involved thorasic and abdomen cavity, where it is difficult to identify the depth and as such we mention as cavity depth in such cases.

Question: The instrument to take measurement of all the injuries are very much available in all the hospitals?

Ans: The scales will be available to measure the injuries.

Question: You have not mentioned the weight of the dead body in Ex.P48 report?

Ans: Generally we will not mention the weight of the deadbody in the report as it is not relevant to this case.

Question: On dissection whether you have mentioned the length of the skin?

Ans: No format is issued from the Government to measure the length of the skin and mention the same in the report.

Question: The nature, width and length of all the injuries would be different?

Ans: It depends upon nature, mode, site and force of infliction.

Question: Contusion can be caused by a club?

Ans: Contusion can be caused by any weapon with blunt force.

Question: Incised wound can be caused by any sharp edged weapon?

Ans: Yes.

Question: Generally rigormortis starts with two limbs?

Ans: It is false to say that because rigormortis starts with smaller joints first followed by larger joints.

Question: After the passing of rigormortis, putrefaction and decomposition starts?

Ans: Yes, but in the present case at the time of examination, rigormortis was in passing stage.

Question: The digestion process stops immediately after the death?

Ans: Yes

Question: You have mentioned about the presence

of 100 ml semi digested food particles in stomach and its contents, based on the same the deceased might have taken his last food 2-3 hours prior to his death.

Ans: It depends upon the quantity and the nature of the food.

Question: Can say the nature of food last consumed by the deceased?

Ans: As it was semi digested, I cannot say its nature.

Question: There are guidelines which says that you have to mention the nature of food particles noted in the stomach?

Ans: There are no such guidelines.

Question: If the deceased had consumed non vegetarian food and if it was noted in his stomach then you could have mentioned the same in the report?

Ans: If the food is undigested, we can mentioned the nature of the food consumed by the deceased, but in the present case the stomach contained semi digested food particles.

Question: Even in semi digested condition like in

case of vomiting you can make out the nature of food consumed?

Ans: In case of vomiting, undigested food would come out and the person vomited would know the last meal he had consumed.

Question: The evidence given by you is against the Medical Jurisprudence?

Ans: It is false to say that.

Question: The injuries mentioned in Ex.P48 report could have been caused by different weapons?

Ans: Yes.

Question: The injuries mentioned in Ex.P48 report could have been caused by different persons by using different weapons?

Ans: I cannot say.

Question: When the deadbody was brought to your hospital?

Ans: I am not aware of the date and time when the deadbody was first brought to our hospital.

Question: When the deadbody was brought before you for autopsy?

Ans: It was brought before me on 19.11.2021 at 3.30 p.m.

Question: In the report and the requisition submitted by the police as per Ex.P40 and Ex.P41, there is mention of gist of the case.

Ans: Yes.

Question: The time since death mentioned by you is not exact?

Ans: It is only approximate.

Question: It is only oblige the police, you have mentioned the time since death as 36 to 48 hours and therefore in the bracket you have mentioned without knowing the time and quantity of last antemortem consumption of food, approximate time since death could not be ascertained based only on postmortem changes?

Ans: It is false to suggest that.

Question: The deceased had died more than 48 hours prior to the examination, but you have mentioned the time since death only to please the police?

Ans: It is false to suggest that.

Question: You have no difficulty to issue the autopsy report on the same day when it was conducted?

Ans: Multiple injuries were noted on the deadbody and the articles collected from the deadbody had to be packed after drying the same, the postmortem examination was completed only by 5.00 p.m on 19th and as such I issued the report on 21.11.2021.

Question: When you have prepared Ex.P48 report?

Ans: It was prepared on 20.11.2021.

Question: You have not forwarded the rough note about the injuries noted by you during autopsy to the investigating officer?

Ans: Rough note is only for our reference.

Question: You have not mentioned the date below your signature in Ex.P48 report?

Ans: It is false to say that as the date is mentioned on last page of the report.

Question: The date is not found below your signature even on the last page?

Ans: As it is computerized, we mentioned the place and date next to the signature.

Question: Who prepared Ex.P48 report?

Ans: I prepared it.

Question: The report at Ex.P48 is prepared by the

police and not by you and you have only affixed your signature to it?

Ans: It is false to suggest that.

Question: Only to oblige the investigating officer, today you have given false opinion about the weapons?

Ans: It is false to suggest that.

Question: You have not conducted postmortem examination on the deadbody of Sheshappa but you have only affixed your signature to the report prepared by the police?

Ans: It is false to suggest that.

Question: You have not mentioned in your report whether the deadbody was kept in cold storage or not?

Ans: There was no need to mention as the deadbody was handed over to me after the completion of inquest by the police.

Question: The observation of time of death may vary in case the body is kept in cold storage or room temperature?

Ans: Yes.

Question: It is only the basis of presence of

rigormortis, one can say the approximate time since death?

Ans:It is false to suggest as it is the one of the parameters considered to ascertain the approximate time since death.

Question: If the body is kept in cold storage, the duration of rigormortis continues for 3-4 days?

Ans: It is false to suggest that.

Question: Rigormortis and decomposition process depends on climatic condition?

Ans: Depends upon whether condition and nature of body.

Question: The purpose of keeping the body in cold storage is to avoid early decomposition?

Ans: To avoid only early external decomposition but not internal decomposition.

Question: You said you have collected the blood sample of the deceased, whether it was requested by the police?

Ans: Yes.

It is false to suggest that I have not collected the cloths from the deadbody as per MO.12, 15 to Mo.17 and any specimens as per MO.13 and

MO.14.

Re-examination: Nil.

(Typed to my dictation in Open Court)

R.O.I. & A.C.

Sd/-
(BHANUMATHI. B.C.)
1st Addl. District and Sessions Judge,
Chikkamagaluru.