

IN THE COURT OF PRL. JUDGE, COURT OF SMALL CAUSES AND
MACT., MYSURU.
MVC.NO.170/2024

Witness Name	:	Dr. Harsha A.H.	PW.3
Father Name	:	Dr. A.H. Shivananda	
Age	:	41 years	
Occupation	:	Consultant Neurosurgeon	
Residence	:	Mysuru	

Witness called and duly sworn on: 07.02.2026

EXAMINATION IN CHIEF BY: SRI. NBR LEARNED COUNSEL FOR PETITIONER:

Now I see the affidavit filed in lieu of my examination in chief, the same bears my signatures. The same is prepared as per my instructions and I am aware of the contents of the same. The contents of the affidavit is true to the best of my knowledge, information and belief.

Ex.P15	The entire IP case sheet pertaining to Sri. Shivu H.
Ex.P16	OPD record
Ex.P17	Neurobehavioural and cognitive assessment
Ex.P18	2 MRI Scan films along with one report

CROSS EXAMINATION BY: SRI. JSK LEARNED COUNSEL FOR RESPONDENT NO.2:

1. Though it is true to suggest that the petitioner underwent tracheostomy on 16.01.2024 but I am not aware if it was done by Dr. Smt. Sushma Krishnamurthy. I am not aware as to when the tracheostomy of the petitioner was removed. It is true to suggest that one Dr. Sri. Kalappa has conducted the surgeries in respect of facial injuries sustained by the petitioner. I have not performed any surgeries in respect of the injuries sustained by the petitioner. It is

true to suggest that the very fact that no surgery was performed goes to the show that the injury did not demand any surgery.

2. The petitioner was discharged from the Hospital on 03.02.2024 and at the time of his discharge his condition was stable. Even at the time of discharge I had prescribed necessary medicines. I do not have any document regarding rehabilitation of the petitioner post discharge. I have prescribed MRI Scan on 06.11.2025. I have produced the OPD record to show that the petitioner had consulted me for follow up treatment after being discharged from the Hospital.

3. I have not specified as to when exactly the petitioner experiences issues such as head ache, giddiness etc., noted by me in the affidavit. Though the occasional memory disturbances, increased irritability and reduced academic activities were being experienced by the petitioner post injury but I do not know as to since when exactly the petitioner develop the said issues.

4. I was informed that the petitioner was working as an assistant at a saloon prior to the accident. I referred the petitioner to clinical psychologist for the purpose of subjecting the petitioner to Neurobehavioural and cognitive assessment with an intention to assess his disability. I have assessed the disability on the basis of the Ex.P17 report as well as my own examination results.

5. I have only focused on the VSMS score of the petitioner and I have not gone through the Ex.P17 report in its entirety. I cannot say if the Ex.P17 report is issued mechanically by copy – pasting someone else's report. I have not tried to ascertain from the family members of the

petitioner or the petitioner himself whether he had personally deposed in this matter. It may be true to suggest that during his cross examination the petitioner did not show any signs of memory loss and irritability and has instead faced the cross examination properly. It is true to suggest that I have not specified as to in what occasions the petitioner experiences giddiness and what is the time period between which he experiences the same.

6. It is false to suggest that since the gazette notification provides for assessment of disability where the patient has certain specific issues I have reiterated the said issues just to support the exaggerated percentage of disability assessed by me. It is false to suggest that the petitioner has not suffered disability to the extent of 32% as assessed by me and yet I have falsely assessed the disability and have deposed false facts just to support the claim of the petitioner for higher compensation.

RE-EXAMINATION – NIL

(Typed to my dictation in the open court)

R.O.I. & A.C.

Sd/-

Prl. Judge.

Court of SC., & MACT., Mysuru