

**IN THE COURT OF THE IIND ADDL. DISTRICT & SESSIONS**  
**JUDGE, U.K. KARWAR.**

**Sessions Case No. 36/2014**

C.W. 35    P.W. 36  
Duly sworn on: 08-07-2025

Name : Dr. Nandakumar G.  
Father's name : P. Gopal  
Age : 61 Years  
Occupation : Rtd. Senior Specialist  
Residence : Bangalore

**Examination in Chief by PP:**

1. From January 2010 to July 2014, I worked in Karwar District Hospital as a Senior Specialist. During my tenure in the said Hospital, I have conducted several Post mortems and I have submitted P.M reports to the Court and I have deposed for the Courts.
2. On 15-02-2014 between 3.30 to 5.30 pm I conducted the post mortem examination of Velu S/o Illangudi on the request of C.W.57 which was received through C.W.48 along with the dead body of Sri Velu. The history was that the body was found with multiple wounds and they have requested to collect the viscera for DNA analysis. Now I am seeing the requisition and same is already marked as Ex.P.63 and the signature of the witness is marked as Ex.P.63(a). As per standard procedure in the mortuary, the cloths worn by the deceased namely 1) blood stained full sleeves brown and white with vertical and horizontal stripes, 2) Blood stained white lungi with yellow border and 3) Green colour underwear. The general examination of the body revealed that an adult male moderately built and nourished with post amputation stump left upper 1/3rd of thigh. Rigor mortis present in upper and lower limbs. Left arm extended at elbow

palm facing forward and fingers clained over the wound no.4. The following injuries are found on the body.

1) Chop wound neck, extending from the left lateral border of neck across the midline to right anterolateral border of neck measuring 24 cm. left to right and extending from the chin to the lower 1/3rd of the neck measuring 14 centimeter vertically and depth of the wound being 8 centimeter. The wound has cut all skin, muscles, blood vessles and bone and organs in its path, cutting both jugular veins and carotid arteries, chopping through the floor of the mouth cutting through the larynx, trachea, oesophagus and cervical spine transecting the spinal cord at the level of C4-C5 margins bruised, everted and blood clots seen. These features describes an antemortem injuries.

2) Chop wound back of neck, from middle of right external ear across and to the left at the sub-occipital region on back of neck extending to the left lateral angle of neck, measuring 16 cm across and 3 cm wide and 5 cm deep cutting skin, muscles, blood vessles and occipital bone at its base margins bruised, everted and blood clots seen. These features describes an antemortem injuries.

3) In incised like wound- chop wound left fronto parietal region of scalp 11 cm long, 1 cm wide and 5 cm deep cutting scalp and causing depressed fracture of parietal bone and cutting through the meninges and tearing the cerebral cortex with sub-arachnoid and intracerabral hamerage margin everted and blood clots seen. These features describes an antemortem injuries. I have stated this wound as incised like wound- chop wound because, it appears like incised wound but considering the depth of the wound and the fracture of the parietal bone, I have classified as chop wound.

4) Incised – like chop wound left hand palm extending from base of thumb to the webspace between middle and ring fingers measuring 8 cm in length, 1 cm wide and 2 cm deep margins bruised, everted and blood clots seen. These features describes an antemortem injuries. I have stated this wound as incised like wound- chop wound because, of the position of the body wherein the left arm is extended at elbow with the palm facing forward and fingers clinched.

5) Incised-like wound left cheek extending to left ear 5 cm X ½ cm X ½ cm margins bruised. These features describes an antemortem injuries.

3. The atopsy of the body revealed in the skull that left parietal bone depressed fracture cervical spine transected at C4 – C5 level. Membranes tone at fracture side sub-arachnoid and intera cerebral hamerage seen. Brain stem transected bleeding seen around mid brain and base of the skull.

4. The chest wall was intract. Larynx and trachea transected. Both lungs collapsed. Both carotid arteries and jugular veins transected. Aorta and venacava intact and empty. Heart intact pale and empty.

5. Abdominal wall intact. Stomach contains 200 gm of semi digested food materials in semi solid condition. Rectum contains faecel matter. All other organs were intact.

6. As per the requisition of C.W.57, I have collected tuft of scalp hair with roots, right 2<sup>nd</sup> premolar and right 1<sup>st</sup> molar teeth, guaze, soaked in body fluids and blood and shade dride. Same are sent to FSL for DNA analysis. In this regard, I have written letter to FSL. Now I am seeing the

said letter and same is marked as Ex.P.77 and the signature is marked as Ex.P.77(a). I have used seal on the package and I have sent sample seal. Now I am seeing the sample seal and it bears my signature. The same is marked as Ex.P.78 and signature is marked as Ex.P.78(a). As no further investigation were required, I have given my opinion as to cause of death. In my opinion death is due to shock due to hamerrage due to injuries no.1, 2 and 3. The probable time of death is 12 to 24 hrs at the time of post morterm. Now I am seeing the post morterm report issued by me and it bears my signature. The post morterm report is marked as Ex.P.79 and signatures are marked as Ex.P.79(a) and Ex.P.79(b).

7. On 07-05-2014, the investigating officer has produced the weapon with requisition wherein he has questioned whether the injury is shown in Ex.P.79 could have been caused by this weapon. Now I am seeing the requisition and same is already marked as Ex.P.70 and signature of the witness is marked as Ex.P.70(a). At that time, my colleague officer C.W.34 who has also conducted post morterm of Sathyanarayan Murthy in the same crime. I examined the weapon and submitted my opinion as the injuies no. 1, 2, 3, 4 and 5 could have been caused by the produced weapon. Now I am seeing my opion and same is marked as Ex.P.80 and signature is marked as Ex.P.80(a).

8. Again on 20-05-2014, I have drawn the weapon on white paper which I had examined on 07-05-2014. Now I am seeing the drawing of the weapon and same is marked Ex.P.81 and signature of the witness is marked as Ex.P.81(a). When I examined the weapon, the lower edge was sharp and upper was blunt. I can identify the weapon which I had examined. The witness identifies the weapon which is already marked as MO.26. The defect at the lower edge was not found at the time of the examination. After the post morterm, I have handed over the cloths to the

concerned Police. Now I am seeing the cloths which I had handed over to the Police and same are already marked as MO.19 to 21. According to me, the nature of the injuries are homicidal in nature.

**Cross examination: By Sri AAA., Counsel for Accused:**

1. Whether have you collected any residual particle from the wound.?

Ans: No such particle are found in the wounds.

2. Whether injury shown in the atopsy can be caused by iron rod.?

Ans: It cannot be caused by a blow with iron rod.

3. All the injuries are different dimensions.?

Ans: Injury no.1 to 5 are different dimensions.

4. Whether the injuries can be occurred in the same time or simultaneously.?

Ans: Yes.

5. Whether these injuries are possible by multiple assailants with different sharp object.?

Ans: The injuries shown in the PM report could have been caused if more than one assailant with different similar weapons.

6. The injury mentioned in the Ex.P.79 can be possible by assaulting with weapons like machette or sword.?

Ans: It is possible with the curve sword and not possible with the machette.

7. Whether apart from MO.26 injury can be caused by any other weapon.?

Ans: Any weapon with sturdy handle with curved sharped blade like MO. 26 injuries can be caused.

8. Have you mentioned the age of the injury.?

Ans: As the deceased is died due to gravity of the injury on the spot itself giving no time to react to the insult the body, we could not ascertain the age of the injury.

9. Whether the single injury is sufficient to cause death with in a seconds on the spot.?

Ans: Injury no.1 to 3 are sufficient to cause death.

10. Whether you have signed on the MO. 26. ?

Ans: I have not signed on the MO. 26.

2. It is false to suggest that, dimensions mentioned in Ex.P.81 and dimension of Ex.P.26 are not same. It is false. It is false to suggest that I am seeing the weapon for the first time in the Court. It is false to suggest that I have not conducted post mortem and also I have not examined the weapon. It is false to suggest that I have given false report and also deposing falsehood before the Court.

**Re-examination – Nil -**

(Typed to my dictation in the open court)

R.O.I. & A.C.

Sd/-

(Mayanna B L.)

IInd Addl. District & Sessions Judge,  
Uttara Kannada, Karwar.