

**IN THE COURT OF II ADDL. DISTRICT AND SESSIONS JUDGE,
UDUPI**

CASE No: S.C 1/2021

PW:10

CW:15

Name of the Witness	: Dr. Vikram Palimar
Father's Name	: Mohan Rao Palimar
Age	: 46 years
Occupation	: Professor and head of forensic Medicine
Address	: Depart of Forensic Medicine & Toxicology, KMC, Manipal.

Witness is called out and duly sworn on: 22-03-2024

Chief examination : by Public Prosecutor.

1. I am working as professor and head of forensic medicine, KMC, Manipal since 2004.

2. On 13-02-2020 at about 2-30 pm I received requisition from the investigating officer to conduct postmortem of Smt. Malathi Kamath, Female, aged 68 years with history of on 12-02-2020 between 8-00 pm to 7-30am on 13-02-2020 she was suffocated by using pillo over her face and nose in the coat and the ornaments from her ear and neck and ornaments kept in cupboard and Rs.60,000/- stolen from her house.

3. On her external examination, the following injuries were found:

1) Multiple abrasions, with pale base, over an area of 60 x 24 cm, varying in sizes from 0.5 x 0.2cm to 2 x cm X 0.1 cm, were present over the entire right upper limb at places, starting from tip of right shoulder (Ant bite marks).

2) Multiple abrasions, with pale base, over an area of 40 x 14 cm, varying in sizes from 2x 0.1cm to 0.1 cm X0.1 cm, were present over

the entire left upper limb at places, starting at point 5 cm above left elbow (Ant bite marks)

3) Abrasion, reddish, measuring 20 x 12cm was present over the front of abdomen and front of right thigh, starting at a point 6 cm below the umbilicus.

4) Abrasion, reddish, measuring 5 x 3cm was present over the front of left arm, situated 4 cm above the left elbow joint.

5) Abrasion, reddish, measuring 12 x 6 cm, was present over the back on the right side, situated at a point 12 cm below the inferior angle of right scapula.

6) Abrasion, reddish, measuring 5 x 3cm was present over the back on the right side, situated at a point 17 cm below the inferior angle of right scapula.

7) Abrasion, reddish, measuring 5 x 2cm was present over the back of left shoulder, situated at a point 4 cm below the left shoulder tip.

8) Multiple abrasions, reddish, over an area of 5 X 3 cm, varying in sizes from 0.8 X 0.5 cm to 0.5 cmX0.3 cm were present over the left side of the neck, starting at a point 6 cm below the left angle of jaw.

9) Abrasion, reddish, measuring 3 X 0.5 cm, obliquely placed, over the right side of the neck, situated at a point 7 cm below the right pinna.

10) Contusion, reddish, measuring 3 X 1cm was present over the inner aspect of the right side of the upper lip corresponding to canine, 1st premolar and 2nd premolar teeth, associated with contusion in the gingiva of those tooth and loosening of canine teeth.

11) Abraded contusion, reddish, measuring 6 X 4 cm, was present over the left side of the neck, situated at point 5 cm below the left angle of jaw.

12) Abraded contusion, reddish, measuring 3 X 2 cm, was present over the dorsum of the nose, situated at a point 5 cm below the root of the nose.

13) Multiple abrasions, reddish, over an area of 26 X 8 cm, varying in sizes from 10 X 5cm to 4 cm X 2 cm. were present over the outer aspect of the right forearm, starting from right elbow.

14) Laceration, measuring 2 X 0.5 cm X cartilage deep, was present over the left ear lobe, situated at a point 4 cm below and 2 cm inner to left tragus.

15) Laceration, measuring 1.2 X 0.5 cm X cartilage deep, was present over the right ear lobe, situated at a point 4 cm below and 2 cm inner to right tragus.

16) Ligature mark: Faintly visible pressure abrasion, reddish brown in colour, was present over the right side of the neck. It was situated 1 cm below the thyroid cartilage, incompletely encircling the neck, with width being 2.5 cm at that point. It ran obliquely upwards and backwards on the right side and terminated at a point 2 cm below the right angle of jaw with width being 1 cm at that point.

4. Neck circumference was 34 cm.

5. Total length of ligature mark was 15 cm. The aforementioned injuries were antemortem and fresh except injuries No. 1 and 2. Injuries no 3-15 can be produced due to blunt force trauma.

6. On internal examination I found the following;

I) Cranium: Skull and Vertebrae, Membranes, Brain and spinal cord

Scalp skull and membranes covering the brain were intact and unremarkable.

Brain Weighed 1000 g. It was congested and oedematous. Cut section was unremarkable.

Base of skull Intact and unremarkable.

(II) Spine and Neck

Bloodless and layer by layer flap dissection of neck revealed multiple contusions, reddish, was present over the both site of the strap muscles of the neck.

Inward compression fracture of greater cornu of hyoid bone on the right side noted and fracture of body of hyoid bone on the left side noted. Thyroid cartilage, blood vessels, cartilages of larynx and trachea were intact and unremarkable. Spine was intact and unremarkable.

(III) Thorax:

1) **Walls, ribs and cartilages** : intact and unremarkable.

2) **Right Pleura**: Intact and unremarkable.

3) **Left Pleura** : intact and unremarkable.

4) **Larynx and trachea**: Airways lumen contained blood stained frothy fluid. Airways mucosa was congested.

5) **Right lung**: Weighed 425 gms.

6) **Left lung**: Weighed 360 gms.

Both lungs were soft, congested and oedematous. Blood stained fluid oozed out on cut section.

7) **Pericardium**: Intact and unremarkable.

8) **Heart**: Weighed 260 gms: Walls were intact and valves were competent. Left ventricular wall thickness was 1.0 cm and right ventricular wall thickness was 0.6 cm. All the coronaries were patent on cut section.

9) **Large vessels** Aorta: Multiple atheromatous streaks and plaques were present over aortic intima at several places.

Inferior venacava. Intact and unremarkable.

(IV) Abdomen and Gastrointestinal tract:

1) **Walls** : Intact and unremarkable.

2) **Peritoneum** : Intact and unremarkable.

- 3) **Mouth, Pharynx and Oesophagus:** Oesophageal lumen contained scanty mucoid fluid. Oesophageal mucosa was congested.
- 4) **Stomach and its contents:** Weighed 480 gms: Contained 150 ml of yellowish mucoid fluid with no abnormal odour. Stomach mucosa was haemorrhagic at several places.
- 5) **Pancreas :**Contusion, reddish in colour was present over peripancreatic region.
- 6) **Small intestine & its contents :** Nothing significant.
- 7) **Large intestine & its contents :**Nothing significant.
- 8) **Adrenals :**Both the adrenals were unremarkable on cut section.
- 9) **Liver:** Weighed 1245 gms. Congested on cut section.
- 10) **Spleen:** Weighed 80 gms, Congested on cut section.
- (V) **Genito Urinary Organs:**
- 1) **Right Kidney:** Weighed 75 gms. Congested on cut section.
- 2) **Left Kidney :**Weighed 80 gms Congested on cut section.
- 3) **Bladder:** Empty
- 4) **Organs of generation, external and internal:** Intact and unremarkable. Uterus with its adnexae weighed 135 gms and measured 5x4x3 cm. Endometrial cavity was empty. Both the ovaries were unremarkable on cut section.

7. As per my opinion the cause of death is deceased died due to asphyxia as a result of cumulative effects of smothering, constriction of neck structures due to throttling and ligature strangulation consistent with assault. The time since death is 6 to 12 hours prior to autopsy. During postmortem, I have collected viscera of the deceased for chemical analysis. Accordingly I issued postmortem report now shown to me marked as Ex.P31, signature of the witness is marked as Ex.P31(a).

8. On 03-07-2020 I received a requisition from the investigating officer along with a sealed article for my opinion on the alleged article used for offence. On opening the article I found navy blue coloured pillow cover inside which multi coloured (red, brown and orange) pillow. Now I see a material object which is a pillow examined by me

is already marked as MO.1. I have answered the queries raised by the investigating officer in my report. The injury No.10 and 12 mentioned in postmortem report produced by the above mentioned weapon/article. It is possible to suffocate (to smother) the victim using the above mentioned weapon/article.

9. Accordingly, I issued the report marked as Ex.P32, signature of the witness is marked as Ex.P32(a).

10. On the same day I received RFSL report from the investigating officer. After perusal of the RFSL report my opinion on the cause of death remains unaltered. My final opinion annexed to postmortem report is marked as Ex.P31(b).

Cross-examination by Sri SPN advocate for accused:

Due to lung disease also suffocation can be caused. Generally aged people may have lung disease. Fresh injury means up to 24 hours we call as fresh injury. Age of the injury can be ascertained only in live person based on the healing. The age of the injury can be ascertained based on time of survival of the victim after sustaining injury. We have to give the range of time of death in the autopsy based on the postmortem changes. According to me times since death is 6 to 12 hours prior to autopsy. It is false to suggest that I issue postmortem report based on the information given by the investigating officer. Ligature marks can be seen by use of ligature material. Investigating officer has not produced ligature material to me. It is false to suggest that injury No.3 to 15 can be caused if a person sleeps for longer period. Name of my P.G. students/assistants not mentioned in the report. It is false to suggest that I have not examined any such

weapon/article. It is false to suggest that I have not collected viscera of diseased. It is false to suggest that I did not see any such injuries on the dead body.

Re-examination: NIL.

(Dictated and typed in open court)

R.O.I. & A.C

II Addl. District & Sessions Judge,
Udupi.