# പതിനാലാം കേരള നിയമസഭ ഏഴാം സമ്മേളനം

നക്ഷത്രചിഹ്നമിടാത്ത ചോദ്യം നമ്പർ - 134

07.08.2017 ൽ മറുപടിയ്ക്

# തൃശൂർ ജില്ലയിലെ എങ്ങണ്ടിയൂർ സ്വദേശി വിനായകന്റെ ആത്മഹത്യ

## ചോദ്യം

### ഉത്തരം

ശ്രീ.മുരളി പെരുനെല്ലി

ശ്രീ.പിണറായി വിജയൻ (മുഖ്യമന്ത്രി)

- (എ) തൃശ്ശൂർ ജില്ലയിൽ പാവറട്ടി പോലീസ് (എ) പരാതി ശ്രദ്ധയിൽപ്പെട്ടിട്ടുണ്ട്. കസ്റ്റഡിയിലെടുക്കുകയും പോലീസ് സ്റ്റേഷനിൽ വച്ച് ക്രൂരമായി മർദ്ദിക്കുകയും ചെയ്തതിനെ തുടർന്ന് എങ്ങണ്ടിയൂർ സ്വദേശി വിനായകൻ എന്നയാൾ ആത്മഹത്യ ചെയ്തത് ശ്രദ്ധിയൽപ്പെട്ടിട്ടുണ്ടോ; .
- (ബി) ഈ സംഭവത്തിൽ കറ്റക്കാരായ എസ്. <sub>(ബി)</sub> നടപടി സ്വീകരിച്ചിട്ടുണ്ട്. ഐ. ഉൾപ്പെടെയുള്ള പോലീസ് ഉദ്യോഗസ്ഥർക്കെതിരെ നടപടി സ്വീകരിച്ചിട്ടുണ്ടോ; ഇല്ലെങ്കിൽ നടപടി സ്വീകരിക്കുമോ എന്ന് വ്യക്തമാക്കുമോ;
- (സി) പോസ്റ്റുമോർട്ടം റിപ്പോർട്ടിൽ വിനായകന് <sub>(സി)</sub> ഉണ്ട്. പോസ്റ്റ്മോർട്ടം റിപ്പോർട്ടിന്റെ മർദ്ദനമേറ്റിരുന്നതായി പകർപ്പ് അനുബന്ധമായി ചേർത്തിട്ടുണ്ട്. സ്ഥിരീകരിച്ചിട്ടുണ്ടോ; പോസ്റ്റ് മോർട്ടം റിപ്പോർട്ടിന്റെ പകർപ്പ് മേശപ്പറത്ത് വയ്ക്കുമോ;

സെക്ഷൻ ഓഫീസർ

2

DIRECTORATE OF MEDICAL EDUCATION

Office of the Police Surgeon and Department of Forensic Medicine Govt. Medical College, Thrissur. Date 19.07.2017

P.M.No.793/17

#### POSTMORTEM CERTIFICATE

We, Dr. Balaram.N.A, Professor & Police Surgeon and Dr.Rakhin .K.B. Assistant Professor & Assistant Police Surgeon certify as hereunder:

Regarding the body of a male VINAYAK aged about 18 years, sent by Revenue Divisional Officer & Sub Divisional Magistrate, Thrissur of Crime No. 803 /17 of Vatanappilly Police Station, dated 18.07.2017 and in charge of CPO No. 6335.

The body was first seen by the undersigned at 1:45 PM on 19.07.2017 and was identified by CPO No.6335. The autopsy commenced at 2:05 PM on 19.07.2017 and concluded at 4:05 PM on the same day.

#### A. GENERAL

Body of a moderately built and nourished male of length 167 cm and weight 43 kg covered with a white cotton dhoti having black and grey border. Scalp hairs were seen cut short, eyes partly open, petechial hemorrhages in conjunctivae, more on right side, corneas clear and pupils dilated. Both ear jobules pierced and patent. Multiple piercing with closed holes on pinns of both ears. Fecal staining at anus. External body orifices normal. Finger nails blue. Hyperpigmented fungal infection over the scrotum, otherwise external genitalia normal. Postmortem impression of pattern of mat on back of chest, buttocks and back of both lower limbs. Tattoo of flying birds, six in number, in a vertical row on inner aspect of right forearm over an area 9 x 1.5 cm. Dry blood clots adhering to outer aspect of upper lip, left side of face from left angle of mouth towards lower jaw margin and on left forearm. Tongue protruded, 0.5 cm beyond teeth margin and bitten. Dry vertical blood stained salivary dribble mark and dry vertical blood stains on left side of front of chest. Brown naevus, 9 x 9 cm, flat, non hairy on outer aspect of left hip (mentioned as injury no.4 in KPF 102). Dry blood stain on the crease of underaspect of left big toe (mentioned as injury no.5 in KPF 102). Soft tissue swelling 3.5x2.5x1cm on the inner border of left forearm, 8.5cm below elbow with a hypopigmented linear scar 1.5cm overlying it, which on dissection was seen as an encapsulated soft tissue tumour with dilated blood vessels around it (mentioned as injury no.3 in KPF 102). A wart  $0.5~\mathrm{x}$ 0.5cm, white in colour on back of right leg, 13cm above heel.

Old sears:

- (1) Linear, 3.5 cm, vertical on right side of back of trunk, upper end at the level of top of hip hone and 1 cm outer to midline.
- (2) Linear, 2 cm, vertical on right side of back of trunk, upper end 0.5 cm outer to the upper end of previous scar.
- (3) 9.5 x 1.5 cm, vertical on outer aspect of left thigh, lower end 11 cm above knee.

Mr. 13

(4)  $7 \times 0.2$  to 1 cm, vertical on outer aspect of left thigh, lower end 8 cm above knee and the upper portion 1 cm in front of the previous scar.

(5) Multiple, hypopigmented, over an area 9 x 7 cm, on front of left knee.

(6) Hypopigmented, 2 x 1 cm on front of right knee at its lower inner quadrant.

(7) Curvilinear, healed, in two rows of length 1.2 cm and 1.6 cm, breadth 0.1 cm each. having multiple scars in each row, and the concavity facing each other, smaller one at the front, separated by 1.6 cm at the maximum concavity, on inner aspect of right arm; the lower end of the longer one 15 cm above elbow.

Rigor mortis fully established and retained all over the body. Postmortem staining on back of trunk, not fixed. No sign of decomposition. Body was kept in cold chamber.

Ligature material, a synthetic saree having brown and white check pattern with black border. seen tied around neck with slip knot on right side of neck, having long free portion 27cm with cleanly cut ends and short free portion 22cm, and the loop around the neck measured 45cm.

## B. INJURIES (ANTEMORTEM)

- 1. Pressure abrasion (ligature mark), 23.5 cm in length, obliquely placed on front and sides of neck, over and above the level of thyroid cartilage, 1.5 cm below right angle of mandible (2.5 cm broad), 5 cm below chin (4 cm broad), 4 cm below left angle of mandible ( 4 cm broad) and 5 cm below left ear lobule (3.5 cm broad). There was discontinuity for a length of 16 cm at back of neck. There was postmortem peeling of skin, 0.5 x 0.5 cm at the left lower margin of the injury, 4 cm outer to midline.
- 2. Faint abrasion (ligature mark), 12 cm long on under aspect of chin and lower jaw, across and equidistant from midline, 1 to 2.5 cm broad; broadest in the middle.

Flap dissection of neck done under bloodless field. The subcutaneous tissue underneath the pressure abrasion were pale and that under injury no.2, normal. All other structures in neck including strap muscles, thyroid and other cartilages, hyoid bone, blood vessels, nerves and vertebrae seen intact and normal.

- 3. Scalp contusion 3 x 2.5 x 0.3cm on left side of top of head, inner margin at midline and 8.5 cm above root of nose.
- 4. Scalp contusion 3 x 2 x 0.3cm on top of head across midline, 17cm above root of nose.
- 5. Scalp contusion  $2 \times 1.5 \times 0.3$ cm on left side of top of head at its back aspect. 2cm outer to midline and 5cm above occiput.
- 6. Abrasion, 1.5 x 1 cm, on right side of front of chest, just inner to the nipple; inner margin was 8.5 cm outer to midline and 12 cm below the collar bone.

7. Six abrasions over an area 4 x 3 cm on left side of front chest, of sizes ranging from  $0.3\,\mathrm{x}$ 0.2cm to 0.9 x 0.2 cm, the innermost being 4 cm outer to midline and 14 cm below collar bone. Its outer margin was 3 cm inner to and below the level of nipple. Each abrasion had a parallel stripped pattern, perpendicular to the long axis. The area mentioned in the injury incorporated a skin deep contusion, 0.5 x 0.5 cm adjoining its outer margin.

- 8. Abrasion, 0.3 x 0.3 cm on top of left little toe, adjoining the nail base.
- 9. Linear abrasion, covered with black scab, 6.5 cm, oblique, on left side of back of trunk, upper inner end 4.5 cm outer to midline and 30 cm below root of neck.

# C. OTHER FINDINGS:

Skull was intact. Brain was edematous. Mouth and pharynx were normal. Air passages congested. Lungs congested and edematous with cherry red discolouration at places mainly on upper lobes of both lungs. Ribs and chest wall were intact. Pleural cavities, diaphragm, mediastinum and esophagus were normal. Heart showed epicardial petechial hemorrhages. An area of hyperemia 4 x 2 x 0.6cm involving the interventricular septum and adjoining myocardium of left ventricle. Coronaries normal. Stomach was half full with partially digested unidentifiable food particles, having no unusual smell. Mucosa congested. Urinary bladder empty. All other internal organs were congested otherwise normal

Sample of blood and viscera were preserved and sent for chemical analysis. Tissue bits sent for histopathological examination. The whole postmortem examination was video recorded.

Opinion as to cause of death:

DEATH WAS DUE TO HANGING.

Dr. RAKHIN, K.B. MD Asst. Professor & Asst. Pot to Surgeon Department of Forensic Medicine Govt. Medical College, Trines un

Dr. N. A. BALARAM, M.B.B.S., M.D. Professor and HOD, Police Surgeon Dept of Forensie Medicine
College, Thrissur

Forwarded to: The SubDivisional Magistrate, SDMC, Thrissur

Copy to: RDO and SDM, Thrissur