

# Clinical Autopsy vs Medicolegal Autopsy

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## Abstract

Post mortem examination of a dead body is carried out to gain insight into the disease process as well as for forensic application of medical knowledge. Although different specialists viz; pathologists and forensic medicine experts, carry out autopsy for these two purposes, on many occasions there may be overlap of these two fields of medicine. A comparative analysis of both these categories of autopsies, namely clinical autopsy and medico legal autopsy, is done in this article with the intention of equipping the specialists in these two fields of medicine with knowledge about the other.

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Key Words : Clinical Autopsy; Medico-legal Autopsy

## Introduction

Autopsy, literally meaning self study of a dead body, is carried out for clinical as well as medico-legal purposes. Clinical autopsy, loosely termed as pathological autopsy, is carried out to diagnose the disease which has caused the mortality when ante-mortem efforts have failed. Many a times clinical autopsy is done despite the cause of death having been established ante mortem, to study the disease process in situ, thus enriching medical knowledge. Medico-legal (ML) autopsy is performed with the aim of providing answers to questions about the identity, cause of death, time of death, circumstances of death, etc, thus helping the law enforcing agencies to solve the crime. Although the procedure of both the autopsies is same, they differ from each other in many aspects. Usually the clinical autopsy is performed by the pathologist and ML autopsy by a forensic expert. However on occasions, especially in Armed Forces Medical Services (AFMS) setup, the pathologist may have to perform a ML autopsy. On the other hand an autopsy started as ML autopsy by a forensic expert may turn out to be a purely clinical autopsy, e.g. cases of sudden death.

This article aims not only at creating awareness amongst medical officers of AFMS, especially pathologists and hospital administrators, about certain essential aspects of ML autopsy but also compares and highlights the differences, both administrative and technical, between the clinical autopsy and medico-legal autopsy.

## Clinical Autopsy:

### *Aims and Objectives:*

1. To establish the nature of the disease which has caused death, when ante-mortem efforts have failed.
2. To study pathology of the disease which has caused death, even when the diagnosis has been established before death.

### *Documentary pre-requisites:*

1. Detailed clinical record (medical case sheet) of present and past illness.
2. Requisition from the concerned clinician mentioning specific dilemmas/doubts, so that better clinico-pathological correlation can be achieved.
3. Consent from the next of kin or near relative, mentioning the extent of autopsy and collection of material for any investigation. The present practice in Armed Forces of collecting material for investigations under the consent for autopsy is not legally tenable. The consent so obtained is provided to the prosecutor by the hospital administrator along with the letter ordering autopsy.
4. Official letter from the commanding officer of the military hospital to the prosecutor asking him to carry out the autopsy. The commanding officer is empowered to order a clinical autopsy [1]. It is mandatory that the order has to be in writing to avoid future legal complications for the prosecutor. The hospital administrative authority should ensure that the death is not medico-legal before ordering the clinical autopsy.

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### Physical facilities

A well equipped autopsy room with efficient cold storage facility is the basic infrastructure required. The autopsy room should have good natural lighting, exhaust ventilation, fly proofing, running water supply, good drainage and an autopsy table with central drainage. Natural light is best as appreciation of different hues of colours is better. Hence as a rule, autopsy is not to be carried out at night under artificial lighting. However, some state governments (eg. Maharashtra) have permitted autopsy at night provided the lighting is near natural.

### Prosecutor

Clinical autopsy is performed by a qualified pathologist holding at least a post graduate diploma. A medical graduate is not considered qualified to carry out a clinical autopsy. Although in AFMS, surgeons carry out clinical autopsies in the absence of a pathologist, it is not a correct practice as many gross findings are missed while performing the autopsy.

### Procedure

After having studied the clinical records provided, a complete/partial/needle autopsy is carried out as per the consent given by the next of kin. Both external and internal examinations are carried out systematically, noting all the abnormalities as well as relevant negative findings. Throughout the autopsy, the findings which can account for the clinical signs and symptoms recorded by the clinician are specifically looked for so that complete clinico-pathological correlation is achieved. Meticulous recording of all abnormalities present will also help in detection of any other disease which may be present in addition to the cause of death. At the end of the autopsy, the cause of death as decided by gross examination of organs and tissues is intimated to the clinician, thus facilitating early completion of fatal documents. The same is subsequently confirmed by histopathological/microbiological examination of preserved tissues.

In a clinical autopsy the internal examination provides more information than the external examination. Hence the former is more meticulously done. In addition the relevant organs and tissues are always preserved for histopathological/microbiological examination as a routine. Thus the pathologist tends to rely more upon the gross and microscopic examination of internal organs and tissues to decide the cause of death, giving less importance to external examination.

### Medico Legal Autopsy

Medico-legal autopsy is performed, as part of the inquest procedure, when ordered by the investigating

authority in ML deaths. The inquesting authority is usually civil (Police/Magistrate) but military inquest is carried out in areas where civil administrative set up is not available to carry out inquest (2). Under section 174, Cr PC the inquesting authority can order any registered medical practitioner or medical graduate to carry out ML autopsy. However a doctor employed in state govt health services from the primary health centre level to Forensic dept of a govt medical college is approached. Other govt medical officers like those employed by railways, defence services, municipal health services etc are usually not asked to carry out ML autopsy. But in places where a civil govt medical officer is not available the inquesting officer can ask the commanding officer of a military hospital to get the ML autopsy done by a military medical officer. Having considered the request, the commanding officer of a military hospital can order a military medical officer under him, usually the pathologist, to carry out the ML autopsy and give the post mortem report to the inquesting (police) authority [1,2]. The usual conception that a military medical officer (pathologist) is not supposed to carry out ML autopsy is wrong. The commanding officer of a military hospital is empowered to order a clinical as well as ML autopsy under paragraph 58 of RMSAF.

In situations where a military inquest is being carried out, the board of military officers will ask the service medical officer to carry out the autopsy.

A medico legal death is one which is not natural or doubtful. As a dictum, all unattended, undiagnosed, unidentified and un-natural deaths are considered as medico legal and the police are to be informed by the medical officer under section 39 of Cr PC. Since any death in the operation theatre, labour room, during post operative period during / following invasive procedure, and can give rise to doubts in the minds of relatives and public, all such deaths are to be considered as medico legal [3].

### Aims and Objectives of Medico-Legal Autopsy:

1. To determine exact cause and manner of death,
2. To establish identity of the deceased,
3. To determine time since death,
4. To collect trace evidence,
5. Reconstruction of the crime scene

The medical officer carrying out the post mortem is solely responsible for establishing the exact cause of death. He plays a supportive but not less important role by collecting all possible information in fulfilling the remaining objectives, as the investigating officer (IO) is primarily responsible to answer those questions.

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