Forensic Autopsy for Conviction in Indian Criminal Justice System

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Abstract

Postmortem examination, also known as forensic autopsy, plays an important role in the analysis and investigation of crime. It is useful in establishing the element of the crime. At homicide scenes, forensic autopsy determines the manner of death and points to the potential causes leading to the death of the victim by categorizing it into accidental, suicidal, or homicidal cases. Evidence collected from autopsies can also act as associative evidence leading to convictions in the cases. While it is an important part of investigation, not much has been said about the medicolegal aspect of such autopsies especially in context to the Indian Criminal Justice System. Data suggests two major back draws – a) Lack of sufficient infrastructure for such analysis. This includes a shortage of labs and professionals who can perform the analysis and administer reports as evidence in courts. And b) the legal channel of how the autopsy report becomes evidence and the process through which it could be administered in courts and during investigations. Both point to a larger concern of interpretation of these case reports by investigators and law enforcement agencies. This paper aims to shed light on the process of forensic autopsies and how it is used in criminal investigations.

Introduction

The primary purpose of a forensic autopsy is to ascertain the cause and manner of death. Other questions may be posed, and whether a certain office has the legislative authority to assume jurisdiction of that type of matter will often decide whether it can answer them. When a death is unexpected, not due to natural causes, or in any other way unusual, suspicious, of public health concern, or possibly the result of criminal activity, authority is usually granted to the appropriate agency (medical examiner or forensic pathologist) to investigate the circumstances surrounding that type of death, which may include performing a forensic autopsy if necessary.

If the person is a patient in a hospital who died of natural causes (the cause of death and the method of death will be explained in detail later), the usual route of pathological examination is an autopsy performed by a hospital pathologist in the hospital. Ideally, an autopsy should be performed with the help of a forensic pathologist if a person dies unexpectedly outside the hospital or for reasons other than natural illness. These cases often include more than just medical investigations and are often done in conjunction with death situation investigations. Due to their large social impact (compared to patient-specific hospital autopsy), these cases are called forensic (treatment of public problems) autopsy, a pathologist specially trained in this area, i.e. It is preferably performed by a forensic pathologist.

The main task of a forensic pathologist is to perform an autopsy (autopsy) of the corpse. The Greek word autopsy means "see for yourself." An autopsy is a detailed health examination of the body and its organs after death to determine the cause of death. There are two types of autopsy: medical autopsy and forensic (forensic) autopsy. Medical autopsy cases are given to people who have died of natural illness. Therefore, doctors use autopsy to find out more about this natural death. However, in special circumstances such as suspicious death, forensic autopsy is performed to comply with the law. Therefore, the history of forensic pathology and autopsy is closely linked to the development of the legal system and court proceedings.

Early Developments

The history of autopsy is intertwined with anatomy and medicine. Early anatomical descriptions come primarily from observations of the anatomical structure of animals. This practice dates to the 4th century BC and spread in

ancient times. In Babylonia. However, during this period, autopsy was limited to animals. Scholars believed that no autopsy was performed in ancient times because the corpse was considered sacred. Also, in ancient Asia, dissection was not allowed for religious reasons. During this period, the humoral theory of illness dominated ancient Greek medicine and discouraged research into correlating anatomy with illness. According to the body fluid theory, it was believed that four body fluids, black bile, yellow bile, sputum, and blood, make up the body. All illnesses and disorders were seen because of an imbalance in the relationship between fluid and body elements. This medical philosophy has been accepted in Europe for centuries. Therefore, early forensic practices were limited to examining the situation without specifically examining the corpse. However, there were some exceptions in ancient times.

Alexandria allowed the autopsy of the deceased. King Ptolemy I of Egypt (367-282 BC) supported pathological anatomy and established a wonderful university and library in Alexandria. Herophilos of Calcedon (335-280 BC), a Greek doctor widely considered to be the first anatomist, performed regular autopsies in Alexandria and wrote a dissertation on human anatomy. Another contributor at this time was Erasistratus (310-250 BC), who denied humoral theory and related diseases associated with organ changes. During the Roman Empire, the doctor Galen of Pergamum (AD 129-201) performed anatomical dissection of animals and created a large amount of written work on the human body. However, his text was based on the doctrine of humorality. Most Roman doctors followed Garen's teachings, and his influence lasted until the late Middle Ages. However, Greek and Roman physicians were more interested in the principles of close clinical observation than the nature of the disease and its effects.

In the second half of the 16th century, as a result of many pioneer knowledge advances, European judicial authorities and police began to consult doctors to help resolve deadly crimes, with most major jurisdictions being experts. Established the Forensic Institute to provide for their research. Giovanni Battista Morgani (1682-1771) is considered the founder of the autopsy. His argument that there is a link between pathological findings and clinical manifestations has contributed significantly to the understanding of the disease in medicine. Morgani research is considered to be the most influential in the history of medicine, and many doctors have begun to study more thoroughly the internal changes associated with the disease. In England, William Hunter (1718-1783) and John Hunter (1728-1793) established the first British museum for the study of pathology. Matthew Baillie (1761-1823) published the first atlas of pathology in 1793. Postmortem examinations also became common at Guy`s hospital in London, and the findings were used to advance the field of medicine.

Modern Developments

Pathology was first recognized as a scientific discipline in itself when the University of Strasbourg appointed Jean Lobstein (1777-1835) as a professor of pathology. In the second half of the 19th century, pathology emerged as a field of medicine. At the same time, other related fields of forensic medicine, such as chemistry, physics, biology, and microscopy, began to develop. Matthew Joseph Bonaventure Orfira (1787-1853), the father of toxicology, sought to incorporate chemistry into forensic medicine. By chemically examining human body fluids and tissues, pathologists were able to detect signs of medical disability and the presence of alcohol and other drugs in the body. The healing Edmondo Card (18771966) was a pioneer in French and forensic science. He has developed a "leaving trajectory" legal medicine theory known as a locomotive exchange principle. One of his biggest works was the creation of a crime laboratory in 1910.

Lyon's Crime Laboratory was the first laboratory that brought all these specialists for the purpose of criminal investigation. The success of Lokard Laboratory brought about similar laboratory formation in Europe and other areas of America. The microscope was first used by pathologists in the mid-19th century. German pathologist Rudolf Wilhyo (1812-1902), known as the "father of pathology," recognized the importance of microscopy in pathological research. He also developed the Virchow method for autopsy. This is one of the most important techniques used by forensic pathologists today. Another contributor to forensic pathology during this period was the Ph.D. Bernard Spilsbury, who became a pathologist at the Interior Ministry in Scotland Yard in 1908 and convinced people of the importance of having a specialist in medicine at the murder scene.

Autopsy Requests

Forensic autopsy is performed at the request and direction of the legal authority responsible for investigating sudden, unexpected, suspicious, ambiguous, unnatural, professional, litigation or criminal deaths. Depending on your jurisdiction, the legal body that decides whether a court death is required may be a forensic pathologist, a forensic pathologist, a prosecutor, a judge, a justice of the peace, or the police. Systems vary widely from country to country. As a general rule, no relative consent is required.

Forensic autopsy is done for the public good and is often said to be related to the general interests of the entire population. This term is a bit misleading and confusing, as it often ends up in the interests of the individual. Therefore, if an autopsy is ordered and executed, there is no knowledge of persons who will actually benefit from the company, and there is a person who is actually benefiting.

Medical autopsy, unless there is a death or possible disease or death or death or death or death, unlike hospital autopsy, it is dead without death. Therefore, useful natural deaths can be prepared for every accident because it can be proved virtually anything, even murders can be proved. According to the Swedish National Certification Committee (1994) survey, about 8% of Swedish murderers were identified after the Saukko survey after being carried out in medical autopsy and at about 4% of Finland. Basically, the results of a medicinal autopsy may be used as evidence for the court, which may be used as a criterion for appropriate quality and procedure in each step. Such customs are rarely used unless it is the beginning of the investigation that it is obvious, or death is associated with crimes.

Role of Forensic Autopsy in investigation

As with any medical procedure, an autopsy should begin with a medical history followed by physical examination, including clinical and medical examinations that may be required. Moreover, as with most clinical situations, medical history is usually the most important factor in making a diagnosis. A physical examination, or here an anatomy of the body, is often confirmatory. Laboratory research is a source of confirmation or more detailed and specific additional information.

For hospital autopsy, medical history is most often derived from the patient's file or sometimes supplemented by a short note or a conversation with one of the treating physicians. In most cases, there is a practical clinical diagnosis based on the patient's symptoms, previous hospitalization, response to treatment, and scrutiny and clinical course of the overall diagnosis. In forensics, death often occurs outside the hospital, and the medical history provided to forensic pathologist s thoroughly investigates police reports, witnesses, friends, colleagues, and family interviews, especially the scene of death. Often comes from making decisions. A situation that has led to or caused death.

This "story" usually sets the focus for the autopsy. Although each organ system needs to be thoroughly examined, "known" or "estimated" general thinking often determines the most appropriate approach and technique for a particular case. Microscopy is performed when histopathological diagnosis is required or to confirm that structures that look "normal" are actually disease-free. Toxicity tests may be required if a pharmacological or chemical (xenobiotic) cause of death is suspected. Radiology, photography, and professional examination can be used as part of the autopsy to supplement the anatomy, more clearly define the cause of death, and answer other questions related to the patient's condition.

The corpse is the legal property of a close relative, so a final disposal of the corpse must be decided. Hospital autopsy is performed only with the consent of the family, and if the autopsy is permitted, you can choose to return all or some organs or not at all. You can specify whether the hospital can hold samples for diagnostic, educational, and/or research purposes. Family consent is required if the doctor wants to perform an autopsy or if the researcher needs a sample. Forensic autopsy does not require family consent, but by the specific law of the jurisdiction in which the death occurred, as the situation of death is usually part of the highest priority public interest, or the parties need to be prosecuted. With a big crime that can only be committed if it falls into the defined category. Many jurisdictions have provisions for families who oppose autopsy, limiting dissection to the "most disturbing" ones and focusing only on specific areas that justify the urgent need for autopsy. can do. In these cases, histology and toxicology are often minimal. Under no circumstances should the material of the forensic case be retained solely for educational or research purposes without written consent.

Reasons for justification of autopsy

The main purpose of forensic autopsy is usually to identify the cause and method of death. However, other questions may also be asked, and in many cases the ability to answer these questions depends on whether a particular office has the legal authority to accept jurisdiction over that type of case. increase. In most cases, an unexpected or somehow abnormal or suspicious death, rather than a natural cause, causes potential public health problems or may be the result of criminal activity. Appropriate institutions (forensic pathologist s or forensic pathologist s) authorized forensic pathologist s) include investigating the circumstances surrounding this type of death and conducting forensic autopsies as necessary.

The 'question-and-answer exercise,' or dialog with the dead, is the pathologist's interrogation of the cadaver, as king specifically (1) Who are you? (2) When did you die? (3) Where did you die? (4) Why did you die? (5) What happened? and if it is a homicide (6) Who did it?

The first three questions (who, when, where) are of little concern in hospital autopsy due to death due to natural causes. However, in a forensic setting, the identity, time, and location of the corpse can make all the differences in holding the suspect accountable and supporting the alibi. The next two questions (why and what happened) essentially ask about the cause and method of death. The final question (who did it) is both fatal and "accidental" in an attempt to recreate the fatal event and its physical relationship with the victim's environment and/or the perpetrator which are answered by interpreting the injury.

Limitations of Autopsy

Limitations in the diagnosis and interpretation of autopsy findings occur in postmortem through the nature of the cause of death (ie, whether there is a detectable anatomical or toxicological substrate), or through biological, chemical, and physical processes change (ie, post-mortem artifacts).

Many of these post-mortem artifacts are well known and well documented. Many are not. The ideal autopsy is done shortly after death, hoping that the findings of the corpse will be representative of the person at the time of death. For practical reasons, an autopsy is rarely done 12 to 24 hours before death, and often takes days to months or years if the body is not found immediately after death. Refrigeration can delay many of the biological and chemical processes that produce postmortem artifacts, but when the body is placed in the refrigerator, how quickly the body cools (corpse size and fat content), And there is a big difference in the relative humidity inside the cooling system. Some organs and organizations are quite stable at relatively long intervals. Some are not people who require microscopic analysis of the fine nuclear nuclear detail.

While others are being canceled quickly, some chemicals (therapeutically or otherwise) are stable. It was distributed by the spray of their origin after the place they were being used during life. Some autopsy insights to interpret the interpretation of the relevant confusion to draw attention to readers. Postmortem's artifacts can affect data, but not only to prevent diagnostic or misdiagnosis, but also enable verification of diagnostics produced by Cadaver.

In general, autopsy is an excellent device for diagnosing the pathological condition that the interpretation in the correct context surrounds the time of death. If the crime is classified into an anatomical category, autopsy may be an excellent tool for diagnosis. If the pathology is due to infectiousness, exposure to harmful substances, or due to the disadvantages at the time of the required substance, autopsy is consistent, and the substance is consistent; it can be a very good device for determining the cause of death. Consistency, substances can be tested reliably. If the task is metabolically or genetic, it is only necessary to provide only the indicator of crimes when anatomical or verifiable chemical correlation is connected to a crime. If the cause of death is due to acute physiological distribution, traditional autopsy is not affected by the decision of cause of death. If the autopsy result is negative, there is a rich useful information that eliminates the possibility of all fatal processes with any of the anatomical findings or strict metabolic disorders of the request. This can also lead to a revisit of the death scene, and heightened awareness reveals the presence of electrocution, hypoxia, or other causes of death that are not always detected by anatomical and toxicological autopsy.

Conclusion

By carrying out an autopsy in a criminal investigation process, the cause of death, the mechanism of death, the manner of death, and the time of death of a body or victims suspected of having died as a result of a crime can be figured out. In the results of the examination a conclusion will be drawn containing the cause of death of the body or victim which will be used by the investigator as evidence whether it is a criminal offense or not a criminal offense. The product of the forensic expert`s examination is objective and scientific material evidence and is one of the pieces of evidence that is difficult for the defendant to refute later in court.

This evidence helps aid in the investigative process and results in quick trials, prosecutions or convictions. It is important that justice is based on fair and scientific evidence, one which is aided by forensic autopsy in criminal cases that involve death.

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