



I. On Custodial Deaths/Rapes



**Letter to all Chief Secretaries on the reporting of custodial deaths within
24 hours.**

No. 66/SG/NHRC/93

**National Human Rights Commission
Sardar Patel Bhavan
New Delhi**

14 December, 1993

From: **R.V. Pillai**
Secretary General

To: Chief Secretaries of all States
and Union Territories

Sir/Madam,

The National Human Rights Commission at its meeting held on the 6th instant discussed the problems of custodial deaths and custodial rapes. In view of the rising number of incidents and reported attempts to suppress or present a different picture of these incidents with the lapse of time, the Commission has taken a view that a direction should be issued forthwith to the District Magistrates and Superintendents of Police of every district that they should report to the Secretary General of the Commission about such incidents within 24 hours of occurrence or of these officers having come to know about such incidents. Failure to report promptly would give rise to presumption that there was an attempt to suppress the incident.

2. It is accordingly requested that the District Magistrates/Superintendents of Police may be given suitable instructions in this regard so as to ensure prompt communication of incidents of custodial deaths/custodial rapes to the undersigned.

Yours faithfully,

Sd/-

(R.V. Pillai)



Letter to all Chief Secretaries clarifying that not only deaths in police custody but also deaths in judicial custody be reported.

R. V. Pillai
Secretary General

F.No. 40/3/95-LD
राष्ट्रीय मानव अधिकार आयोग
National Human Rights Commission

June 21, 1995

To

Chief Secretaries of all States and
Union Territories

Sir/Madam,

Vide letter No.66/SG/NHRC/93 dt. December 14, 1993, you were requested to give suitable instructions to DMs/SPs to ensure prompt communication of incidents of custodial deaths/custodial rapes.

2. A perusal of the reports received from DMs/SPs in pursuance of the above mentioned communication reveals that reports are received in the Commission from some of the States, only on deaths in police custody. The objective of the Commission is to collect information in respect of custodial deaths in police as well as judicial custody. May I, therefore, request you to have instructions sent to all concerned to see that deaths in judicial custody are also reported to the Commission within the time frame indicated in my letter of December 14, 1993 ?

Yours faithfully,

Sd/-

(R. V. Pillai)



Letter to Chief Ministers of States on the video filming of post-mortem examinations in cases of custodial deaths.

Justice Ranganath Misra
Chairperson

August 10, 1995

My dear Chief Minister,

The National Human Rights Commission soon after its constitution in October, 1993, called upon the law and order agencies at the district level throughout the country to report matters relating to custodial death and custodial rape within 24 hours of occurrence. Since then ordinarily reports of such incidents have been coming to the Commission through the official district agencies. The Commission is deeply disturbed over the rising incidents of death in police lock-up and jails. Scrutiny of the reports in respect of all these custodial deaths by the Commission very often shows that the post-mortem in many cases has not been done properly. Usually the reports are drawn up casually and do not at all help in the forming of an opinion as to the cause of death. The Commission has formed an impression that a systematic attempt is being made to suppress the truth and the report is merely the police version of the incident.

The post-mortem report was intended to be the most valuable record and considerable importance was being placed on this document in drawing conclusions about the death.

The Commission is of a prima-facie view that the local doctor succumbs to police pressure which leads to distortion of the facts. The Commission would like that all post-mortem examinations done in respect of deaths in police custody and in jails should be video-filmed and cassettes be sent to the Commission along with the post-mortem report. The Commission is alive to the fact that the process of video-filming will involve extra cost but you would agree that human life is more valuable than the cost of video-filming and such occasions should be very limited.

We would be happy if you would be good enough to immediately sensitise the higher officials in your state police to introduce video-filming of post mortem examination with effect from 1st October, 1995.

We look forward for your response within three weeks.

With regards,

Yours sincerely,

Sd/-

(Ranganath Misra)

To
Chief Ministers of all States, Pondicherry & the National Capital Territory of Delhi/
Governors of those States under the President's rule.



Letter to Chief Ministers/Administrators of all States/Union Territories with a request to adopt the Model Autopsy form and the additional procedure for inquest.

Justice M.N. Venkatachaliah

Chairperson

(Former Chief Justice of India)

No. NHRC/ID/PM/96/57

राष्ट्रीय मानव अधिकार आयोग

National Human Rights Commission

March 27, 1997

Dear Chief Minister,

May I invite your kind attention to a matter which NHRC considers of some moment in its steps to deal with custodial deaths? The Commission on the 14th December, 1993 had issued a general circular requiring all the District Magistrates and the Superintendents of Police to report to the Commission, incidents relating to custodial deaths and rapes within 24 hours of their occurrence. A number of instances have come to the Commission's notice where the post-mortem reports appear to be doctored due to influence/pressure to protect the interest of the police/jail officials. In some cases it was found that the post-mortem examination was not carried out properly and in others, inordinate delays in their writing or collecting. As there is hardly any outside independent evidence in cases of custodial violence, the fate of the cases would depend entirely on the observations recorded and the opinion given by the doctor in the post-mortem report. If post-mortem examination is not thoroughly done or manipulated to suit vested interests, then the offender cannot be brought to book and this would result in travesty of justice and serious violation of human rights in custody would go on with impunity.

With a view to preventing such frauds, the Commission recommended to all the States to video-film the post-mortem examination and send the cassettes to the Commission.

It was felt that the Autopsy Report forms now in use in the various States, are not comprehensive and, therefore, do not serve the purpose and also give scope for doubt and manipulation. The Commission, therefore, decided to revise the autopsy-form to plug the loopholes and to make it more incisive and purposeful.

The Commission, after ascertaining the views of the States and discussing with the experts in the field and taking into consideration, though not entirely adopting, the U.N. Model Autopsy protocol, has prepared a Model Autopsy form enclosed as Annexure-I.

In this connection, it was felt that some incidental improvements are also called for in regard to the conduct of inquests. For proper assessment of "Time since death"



or 'the time of death', determination of temperature changes and development of Rigor Mortis at the time of first examination at the scene is essential. This can conveniently be done by following some easily understandable and implementable procedure. The procedure to be followed by those in charge of inquest, is indicated in Annexure-II to this letter. This is a small but important addition to the inquest procedure.

The Commission recommends your Government to prescribe the Model Autopsy Form (Annexure-I) and the additional procedure for inquest as indicated in Annexure-II, to be followed in your State with immediate effect.

I shall look forward to your kind and favourable response.

Yours sincerely,

Sd/-

(M.N. Venkatachaliah)

To

Chief Ministers of all States/Union Territories.



ANNEXURE-I

MODEL POST-MORTEM REPORT FORM
(Read carefully the instructions at Appendix 'A')

NAME OF INSTITUTION _____

Post Mortem Report No. _____ Date _____

Conducted by Dr. _____

Date & Time of receipt of the body
and Inquest papers for Autopsy _____

Date & Time of commencement of Autopsy _____

Time of completion of Autopsy _____

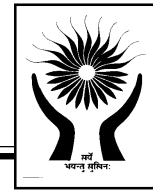
Date & Time of examination of the dead body
at Inquest (as per Inquest Report) _____

Name & Address of the person _____
video recording the Autopsy _____

Note: The tape should be duly sealed, signed and dated and sent to the National Human Rights Commission, Sardar Patel Bhawan, Sansad Marg, New Delhi.

CASE PARTICULARS

1. (a) Name of deceased and as entered
in the Jail or Police record _____
(b) S/O, D/O, W/O _____
(c) Address : _____
2. Age (Approx) : _____ yrs; Sex : Male/Female
3. Body brought by (Name and rank of Police officials)
(i) _____
(ii) _____
of Police Station _____



4. Identified by (Names & addresses of relatives/persons acquainted)

(i) _____

(ii) _____

IF HOSPITAL DEAD BODIES - (particulars as per hospital records)

Date & Time of Admission in Hospital _____

Date & Time of Death in Hospital _____

Central Registration No. of Hospital _____

SCHEDULE OF OBSERVATIONS

(A) GENERAL

(1) Height _____ cms. (2) Weight _____ Kgs.

(3) Physique - (a) lean/ medium / obese

(b) Well built/average built/poor built/emaciated

(4) Identification features (if body is unidentified)

(i) _____

(ii) _____

(iii) Finger prints be taken on seperate sheet and attached by the doctor.

(5) Description of clothes worn - important features:

(6) Post-mortem Changes :

(a) As seen during inquest

- Whether rigor mortis present _____

- Temperature (Rectal) _____

- Others _____

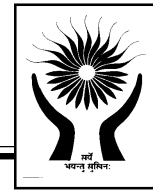


- (b) As seen at Autopsy -
- (7) (a) External general appearance -
 - (b) State of eyes
 - (c) Natural orifices

(B) EXTERNAL INJURIES:

(Mention Type, Shape, Length x Breadth & Depth of each injury and its relation to important body landmark. Indicate which injuries are fresh and which are old and their duration.)

Instructions :-



- (i) Injuries be given serial number and mark similarly on the diagrams attached.
(ii) In stab injuries, mention angles, margins and direction inside body. (iii) In fire arm injuries, mention about effects of fire also.

C) INTERNAL EXAMINATION

1. HEAD

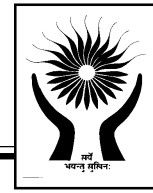
- (a) Scalp findings
- (b) Skull (Describe fractures here & show them on body diagram enclosed)
- (c) Meninges, meningeal spaces & Cerebral vessels
(Hemorrhage & its locations, abnormal smell etc. be noted)
- (d) Brain findings & Wt. (Wt. _____ gms.)
- (e) Orbital, nasal & aural cavities - findings.

2. NECK

- Mouth, Tongue & Pharynx
- Larynx & Vocal cords
- Condition of neck tissues
- Thyroid & other cartilage conditions
- Trachea

3. CHEST

- Ribs and Chest wall
- Oesophagus
- Trachea & Bronchial Tree



5. SPINAL COLUMN & SPINAL CORD (To be opened where indicated)

OPINION

- i) Probable time since death (keep all factors including observations at inquest)

- ii) Cause & manner of death- The cause of death to the best of my knowledge and belief is :-
 - (a) Immediate cause -

 - (b) Due to -

 - (c) Which of the injuries are ante-mortem/post-mortem and duration if ante-mortem ?

 - (d) Manner of causation of injuries

 - (e) Whether injuries (individually or collectively) are sufficient to cause death in ordinary course of nature or not ?

- iii) Any other

SPECIMENS COLLECTED & HANDED OVER (Please tick)

- a) Viscera (Stomach with contents, small intestine with contents, sample of liver, kidney (one half of each), spleen, sample of blood on gauze piece (dried), any other viscera, preservative used)

- b) Clothes

- c) Photographs (Video cassettes in case of custody deaths), finger prints etc)

- d) Foreign body (like bullet, ligature etc.)

- e) Sample of preservative in cases of poisoning.



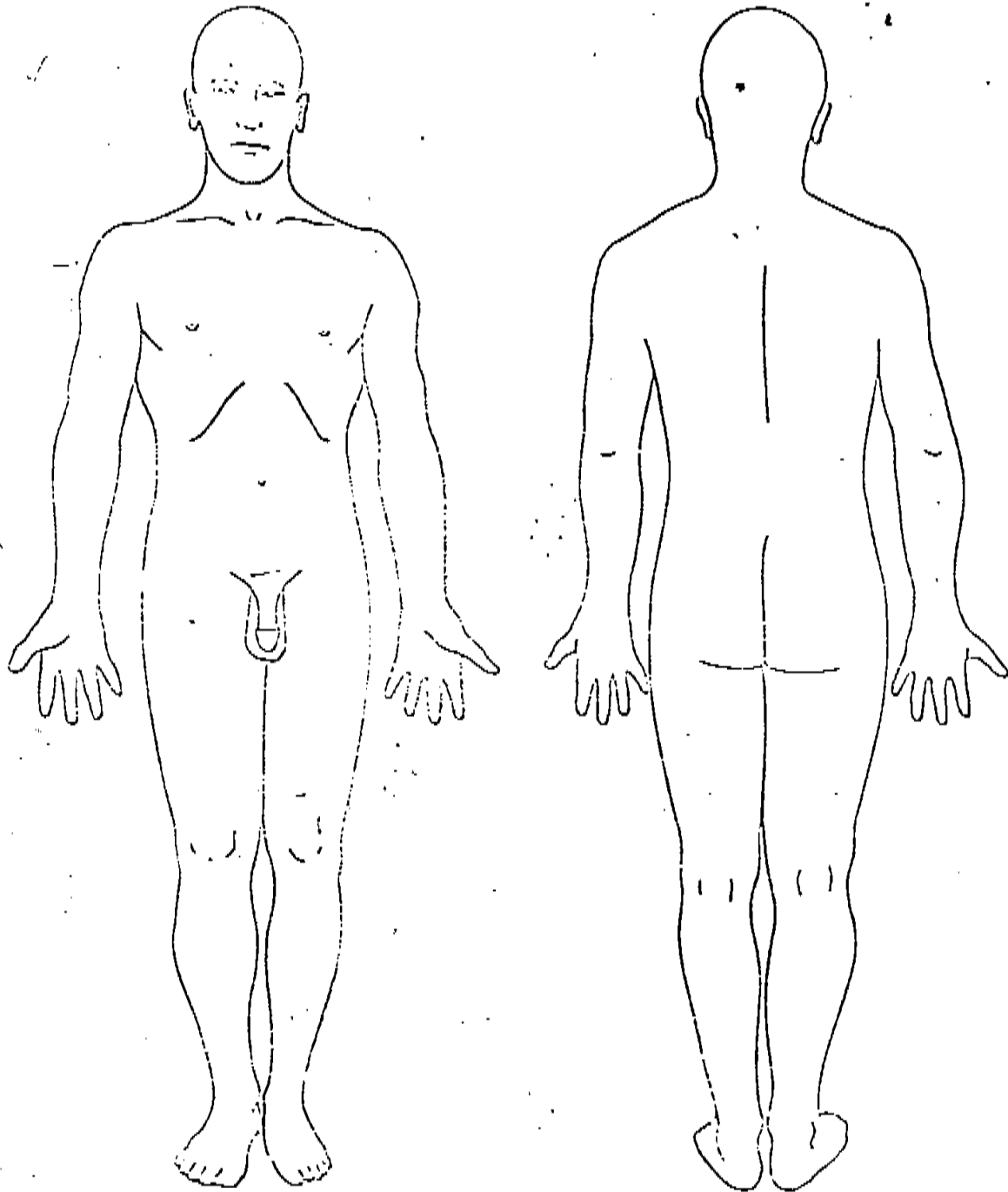
- f) Sample of seal
- g) Inquest papers (mention total number & initial them)
- h) Slides from vagina, semen or any other material

PM report in original, ____inquest papers, dead body, clothings and other articles (mention there) duly sealed (Nos. ____) handed over to police official _____ No. _____ of PS _____ whose signatures are herewith.

Signature : _____
Name of Medical Officer _____
(in block letters) _____
Designation _____
SEAL



Full Body: Male-Anterior and Posterior Views (Ventral and Dorsal)

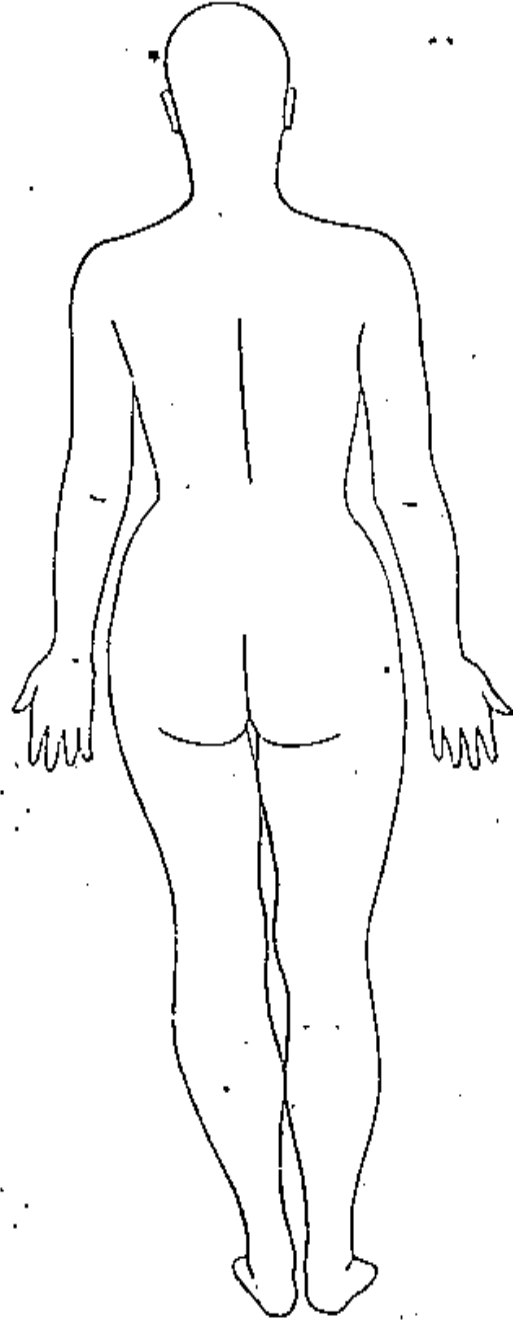
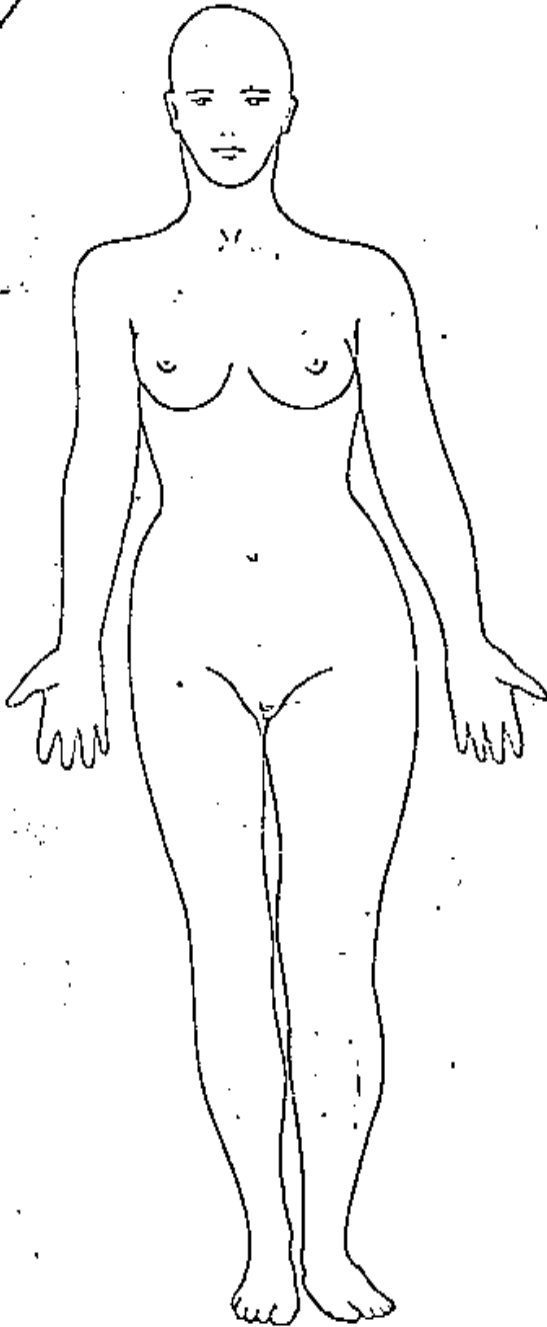


Name _____ Case No. _____

Date _____



Full Body: Female-Anterior and Posterior Views

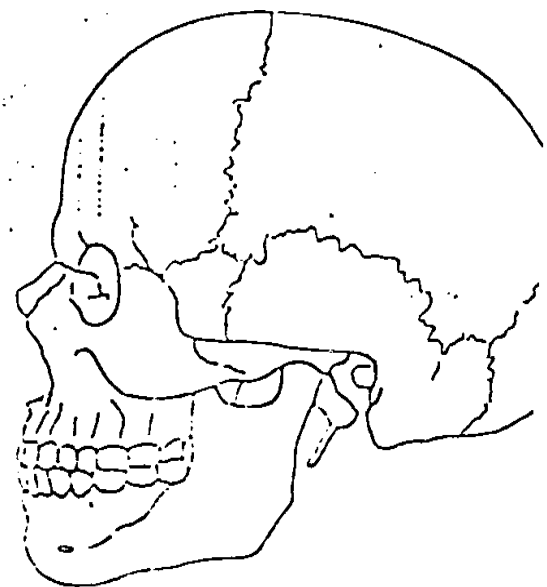
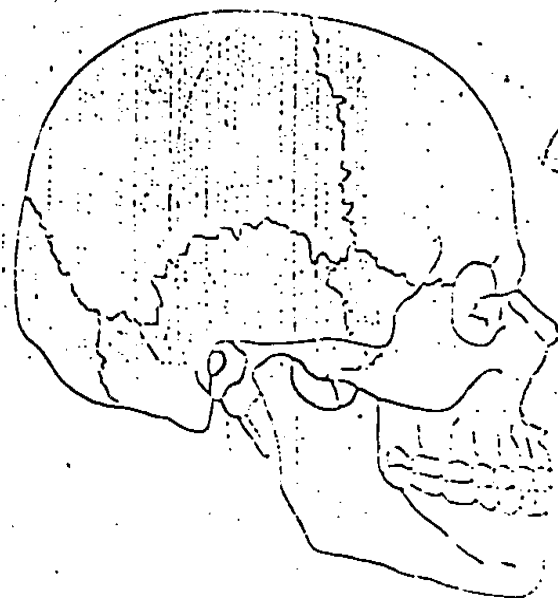
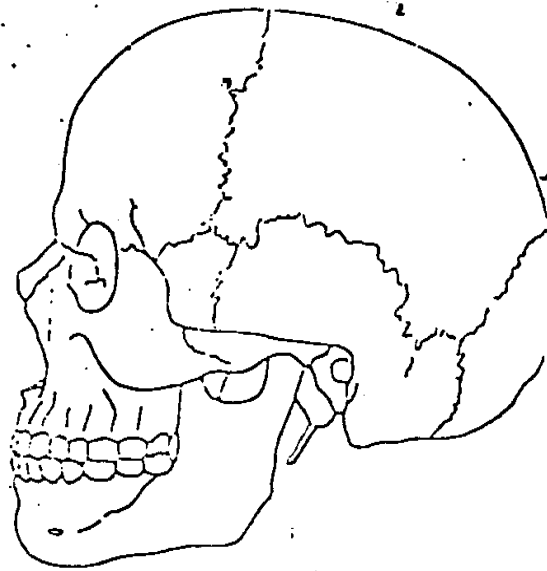
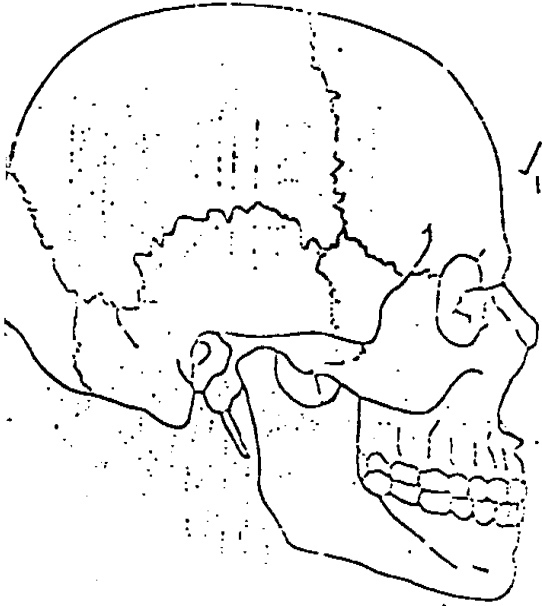


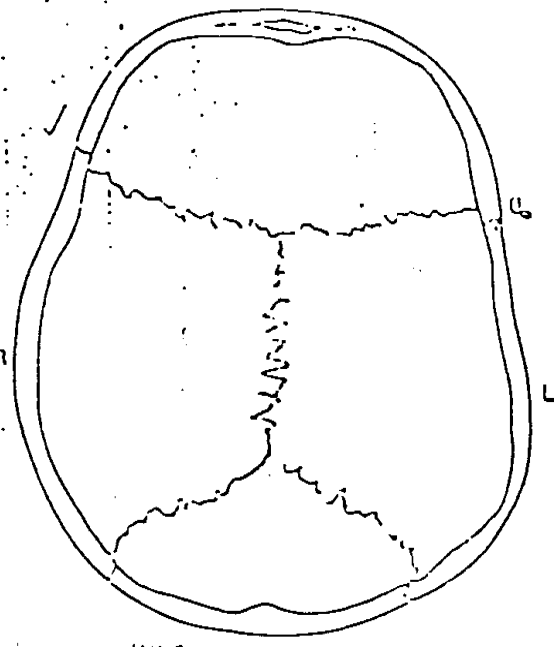
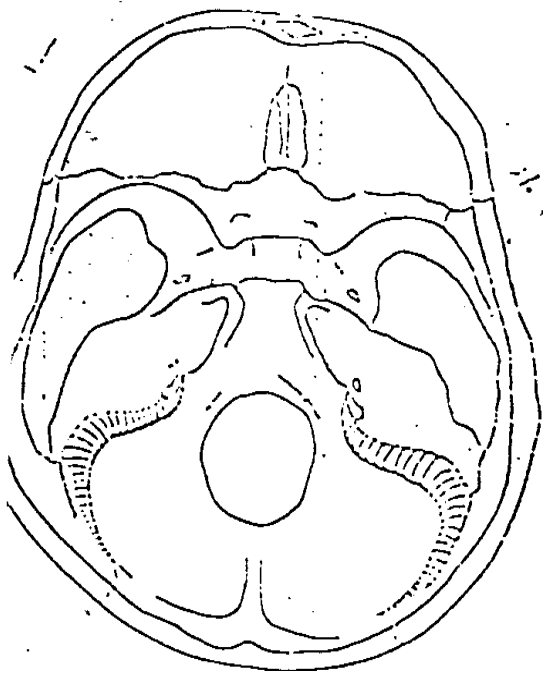
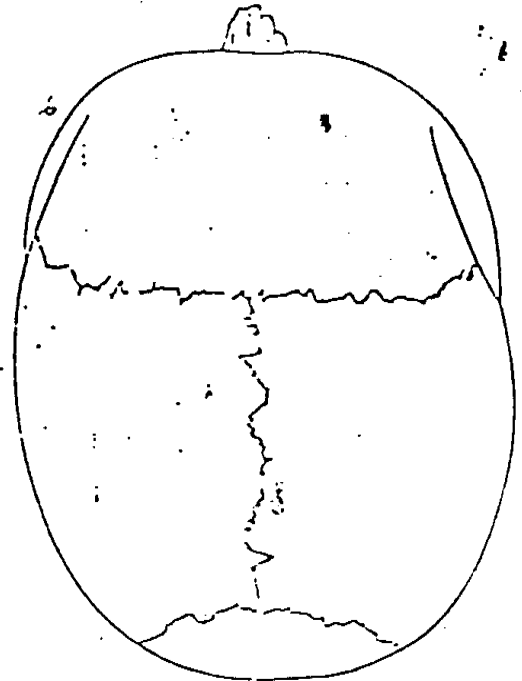
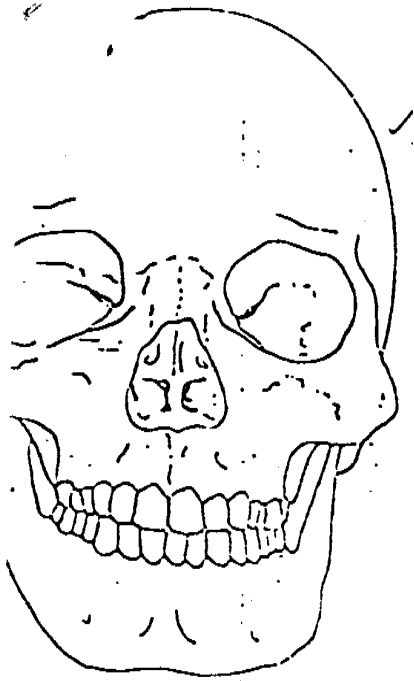
Name _____ Case No. _____

Date _____



Head - Surface and Skeletal Anatomy : Lateral view





Inner View of Skull



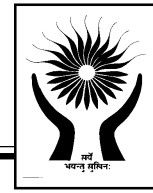
APPENDIX - 'A'

Instructions to be Followed Carefully for Detention or Torture.

	Torture technique	Physical findings
Beating		
1.	General	Scars, Bruises, Lacerations. Multiple fractures at different stages of healing, especially in unusual locations, which have not been medically treated.
2.	To the soles of the feet, or fractures of the bones of the feet.	Haemorrhage in the soft tissues of the soles of the feet and ankles. Aseptic necrosis.
3.	With the palms on both ears simultaneously.	Ruptured or scarred tympanic membranes. Injuries to external ear.
4.	On the abdomen, while lying on a table with the upper half of the body unsupported ("operating table").	Bruises on the abdomen. Back injuries. Ruptured abdominal viscera.
5.	To the head.	Cerebral cortical atrophy, Scars, Skull fractures, Bruises.
Haematomas.		
Suspension		
6.	By the wrists.	Bruises or scars about the wrists. Joint injuries.
7.	By the arms or neck.	Bruises or scars at the site of binding. Prominent lividity in the lower extremities.
8.	By the ankles.	Bruises or scars about the ankles. Joint injuries.
9.	Head down, from a horizontal pole placed under the knees with the wrists bound to the "Jack".	Bruises or scars on the anterior forearms and backs of the knees. Marks on wrists and ankles.



Torture technique	Physical findings
Near Suffocation.	
10. Forced immersion of head in often contaminated “wet submarine”.	Faecal material or other debris in the mouth, pharynx, trachea, esophagus or lungs, Intrathoracic petechiae, Intra-thoracic petechiae.
11. Tying of a plastic bag over the head (“dry submarine”).	Intra-thoracic petechiae.
Sexual abuse.	
12. Sexual abuse	Sexually transmitted diseases, pregnancy, injuries to breasts, external genitalia, vagina, anus or rectum.
Forced posture	
13. Prolonged standing.	Dependent edema, Petechiae in extremities.
14. Forced straddling of a bar (“saw horse”).	Perineal or scrotal haematomas.
Electric shock	
15. Cattle prod.	Burns: appearance depends on the age of the injury. Immediately: red spots, vesicles, and/or black exudate. Within a few weeks: circular, reddish, macular scars. At several months: small, white, reddish or brown spots resembling telangiectasias.
16. Wires connected to a source of electricity.	
17. Heated metal skewer inserted into the anus.	Peri-anal or rectal burns.
Miscellaneous	
18. Dehydration	Vitreous humor electrolyte abnormalities.
19. Animal bites (spiders, insects, rats, mice, dogs)	Bite marks.



Annexure II

Additional Inquest Procedure

In order to help in proper assessment of 'Time Since Death', determination of temperature changes and development of Rigor Mortis at the time of first examination at the scene is essential. This can be attained in the present system of inquest by examining the dead body at the scene scientifically for these two parameters either by a medical officer or a trained Police officer.

Essential requirement for determining Temperature Changes & Rigor Mortis:

The procedure is simple and can be learnt by any police officer if he is trained properly at the Police Training institution by a medical officer. This procedure includes:

- (i) Taking of 'Rectal Temperature' at the first examination of the body at the scene itself while conducting the inquest. A simple Rectal Thermometre can be inserted in the anus of the dead body. After waiting for 3 to 5 minutes temperature should be read. The temperature so read should be mentioned in the inquest report as also the time of its recording.
- (ii) Similarly for determining 'Rigor Mortis', i.e., stiffening of the muscles, the Police officer should bend the limbs and see whether there is any stiffness in them. The observations about stiffness be mentioned as also the time in the inquest report. These observations would be helpful to the doctors conducting post-mortem examination.