



THE ASSAM GAZETTE

অসাধাৰণ

EXTRAORDINARY

প্ৰাপ্ত কৰ্তৃত্ব দ্বাৰা প্ৰকাশিত

PUBLISHED BY THE AUTHORITY

নং ৪৫০ দিশপুৰ, বৃহস্পতিবাৰ, ২০ আগষ্ট, ২০২৬, ২৯ শ্ৰাবণ, ১৯৪৮ (শক)
No. 450 Dispur, Thursday, 20th August, 2026, 29th Sravana, 1948 (S. E.)

GOVERNMENT OF ASSAM
ORDERS BY THE GOVERNOR
POLITICAL (A) DEPARTMENT ::: DISPUR

NOTIFICATION

The 18th August, 2026

No. eCF-647016/194.- In pursuance of the objective to streamline medico-legal processes, the Governor of Assam is pleased to notify the format at **Annexure-A** as the Customized MedLEAPR Format for Post Mortem Reports in the state of Assam for purpose of testing, application and production in the Medico Legal Examination and Post Mortem Reports (MedLEaPR) System.

DITHAKA NANDA HAZARIKA,
Secretary to the Government of Assam,
Home & Political Department.



Main Report
MedLEaPR – ASSAM
<Hospital Name>
<Hospital Address>
<FORM – VI>

POST MORTEM EXAMINATION REPORT

PMR No.:
Date:
Station:
Ref:

Section-A: PREAMBLE

(1) Name, Age, Sex & Address of the deceased.		
(2) Caste, Marital Status & Occupation (as applicable)		
(3) Place of Occurrence (Site of Death / Incident)		
(4) Identification of deceased before Medical Officer conducting the Postmortem Examination	(a) Identifying Police Personnel with Designation	
	(b) Accompanying Person/Relatives identifying the Body of deceased (if available)	
	(c) Identification marks in case of unidentified body if present (may not be possible in case of decomposed bodies or skeletal remains)	
(5) Date And Hour of	(a) Dispatch by Police Authority	
	(b) Arrival at the place of Postmortem examination	
	(c) Commencement of Postmortem Examination	
(6) Relevant Documents furnished by Statutory Authority		
N.B. Observe the state of all the organs and when no disease injury is found write "Healthy". Weight of organs shall be mentioned as and when required and relevant in the place of the respective organs.		



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Section- B : EXTERNAL APPEARANCE

(7) Description of the body in relation to built, complexion, wearing apparels, postmortem changes, external orifices etc. and deformities if any.	
(8) External Injuries - Site, Side, Size, Shape & Colour	
(9) Condition of the Neck including injuries, External & Internal	

Section - C : CRANIUM AND SPINAL CANAL (Brain must be exposed in every case, Spinal cord not to be examined except in case of injury to Vertebral Column/ Spinal Cord)

(10) Scalp, skull	
11) Membrane & Brain	
12) Vertebrae & Spinal Cord	

Section- D : THORAX

(13) Walls, Ribs and Cartilages	
(14) Pleurae & Pleural Cavity	



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(15) Larynx & Trachea	
(16) Lungs	
(17) Pericardium & Heart including condition of the Coronaries	
(18) Vessels	

Section-E : ABDOMEN

(19) Walls	
(20) Peritoneum & Peritoneal Cavity	
(21) Mouth, Pharynx, Oesophagus	
(22) Stomach and its contents	
(23) Small intestine and its contents	
(24) Large intestine and its contents	
(25) Liver & Gall Bladder	
(26) Pancreas	

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(27) Spleen	
(28) Kidneys & Ureters	
(29) Bladder & Urethra	
(30) Organs of generation, external and internal	

Section-F : BONES AND JOINTS

(31) Fracture and /or Dislocation	
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Section-G : MORE DETAILED DESCRIPTION OF INJURY OR DISEASE OR ESSENTIAL REMARKS IF ANY

(Additional information which may be required to be conveyed to the investigating agency can also be described here)



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Section H : Opinion of Postmortem Examination

Name, Designation & Signature of the Doctor(s) performing postmortem examination

- 1.
- 2.
- 3.

(Report is to be represented by the seniormost Doctor by designation in case of team of Doctors)



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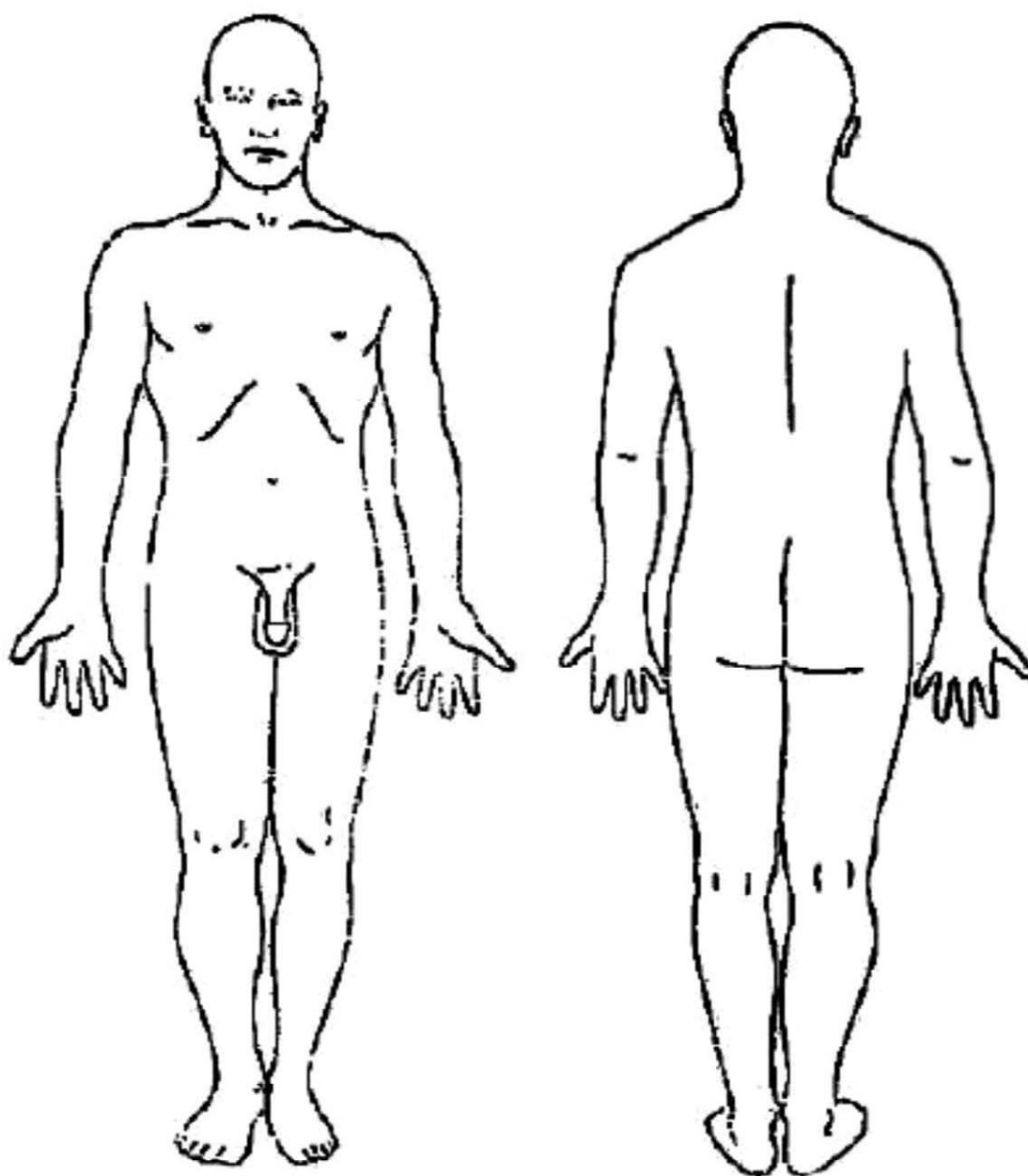
POST MORTEM EXAMINATION REPORT

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Sketch of the Injuries (Male)

To mention injury serial number as described in relevant section of the report
Option to repeat this diagram is to be kept as there might be more injuries



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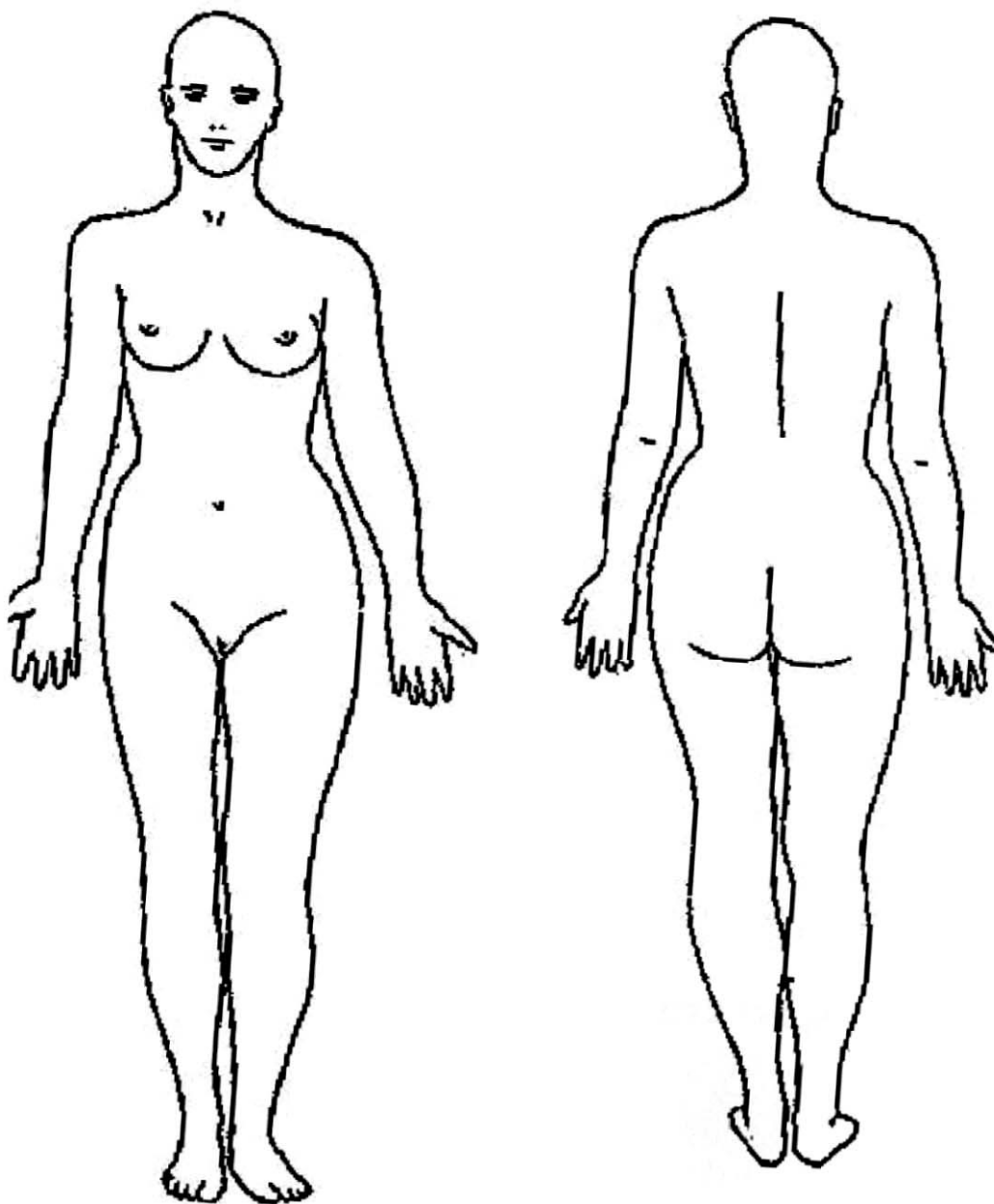
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Sketch of the Injuries (Female)



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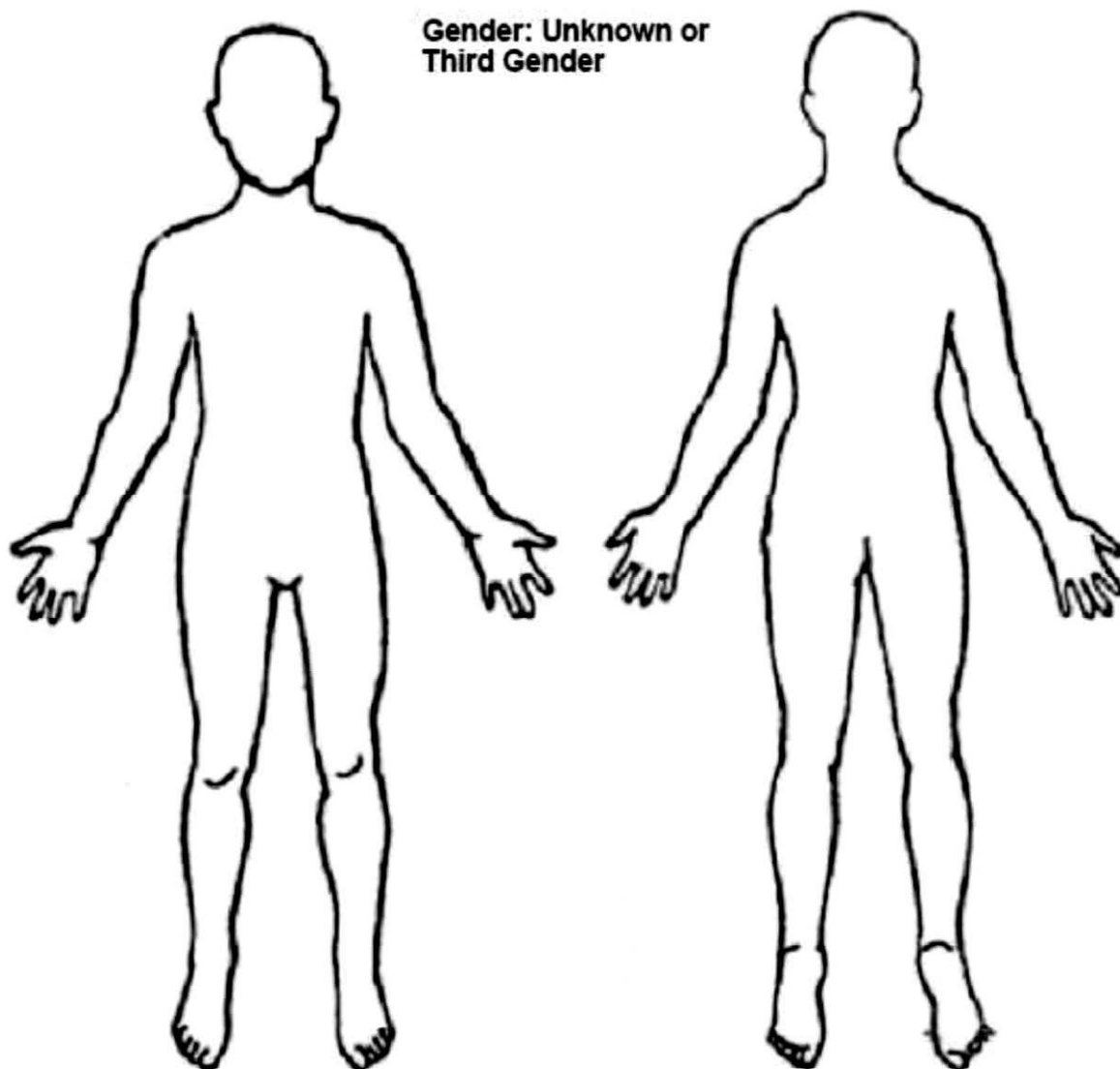
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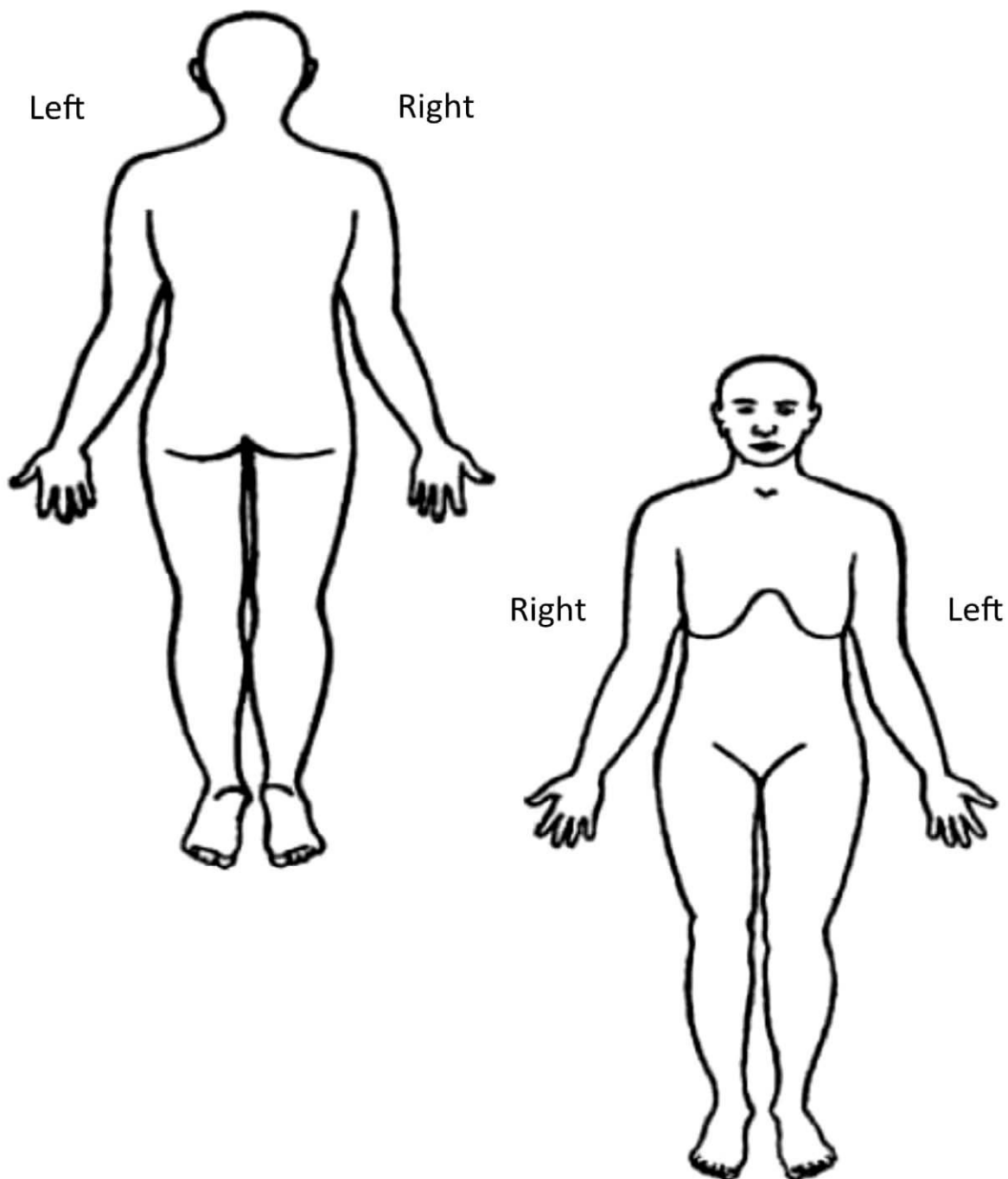
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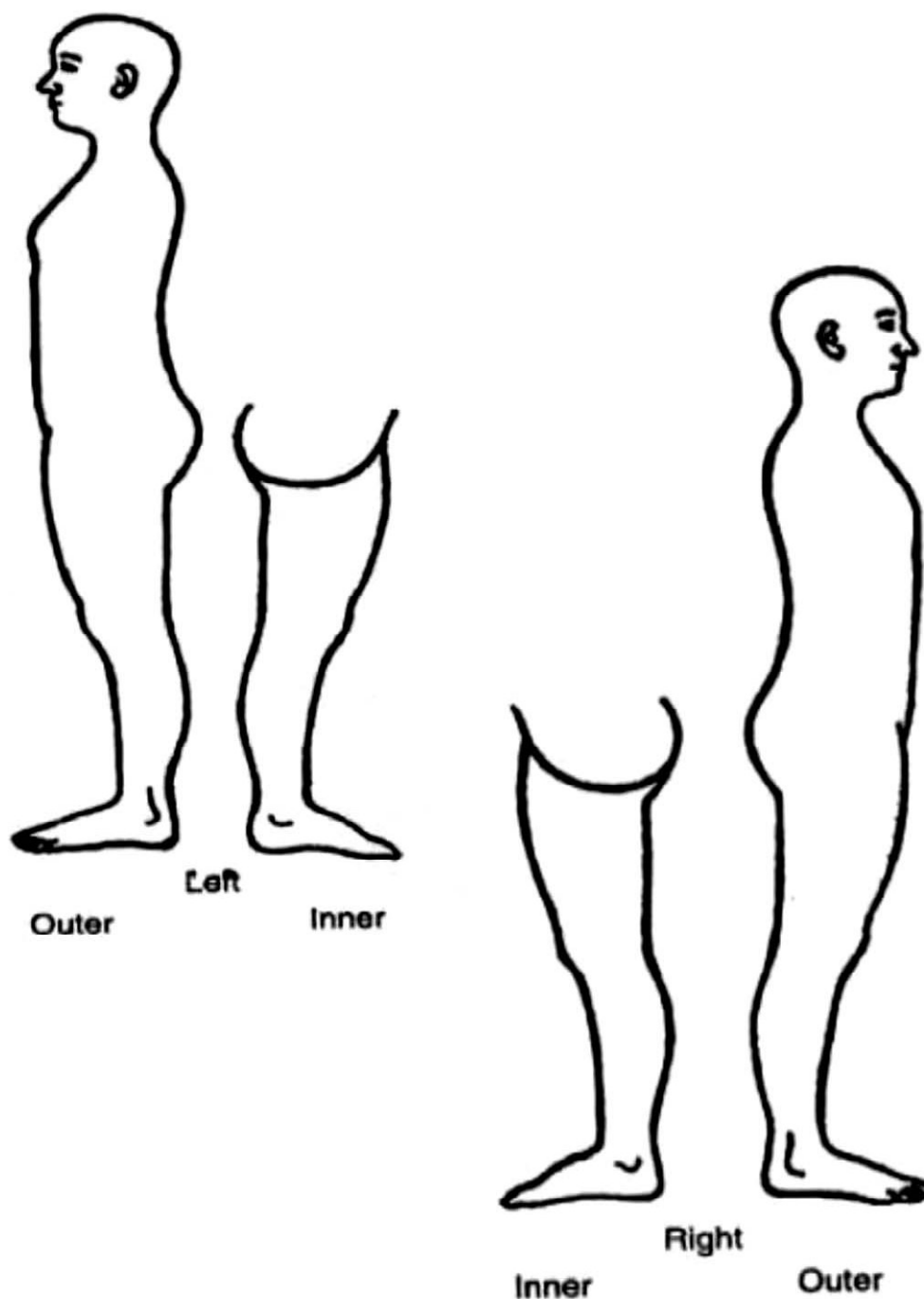
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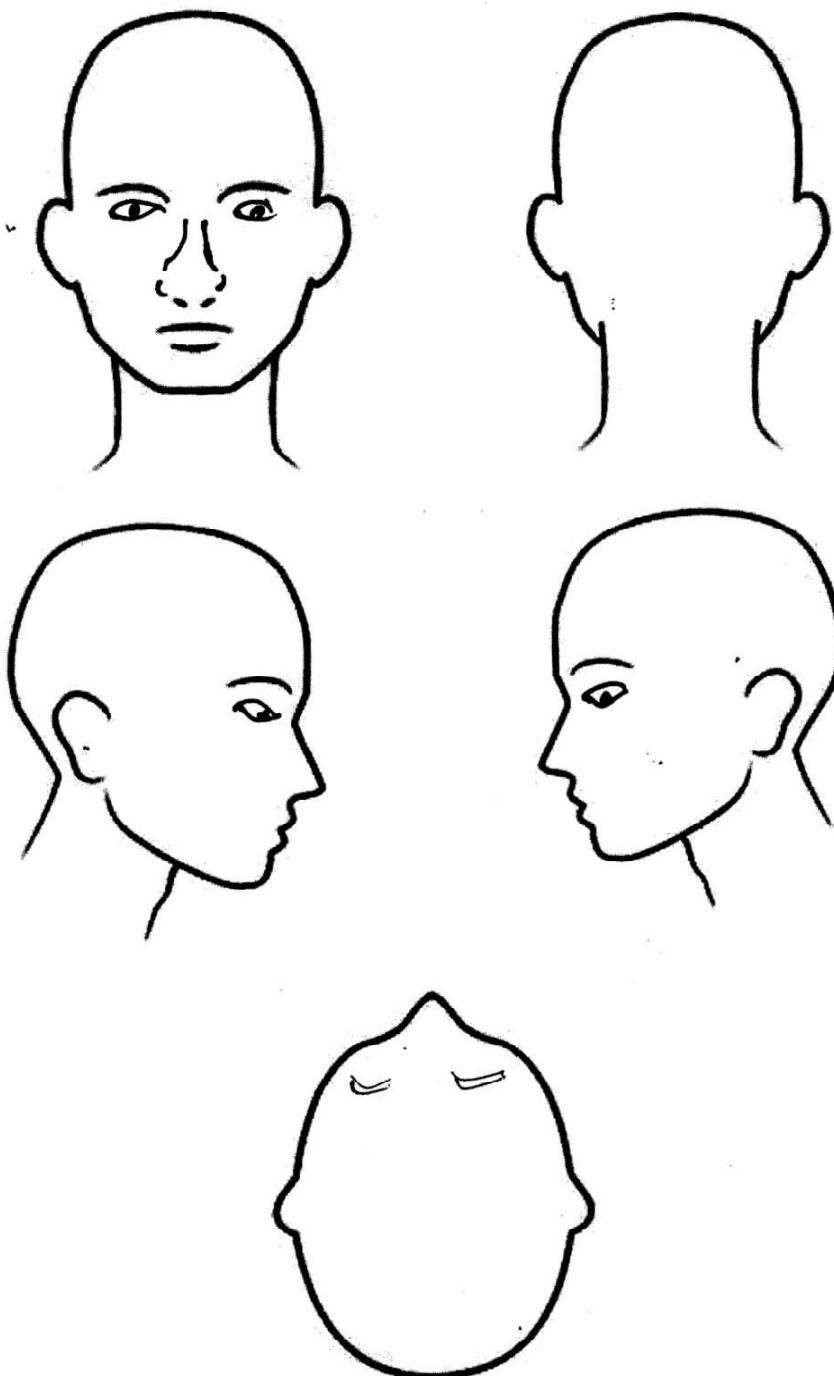
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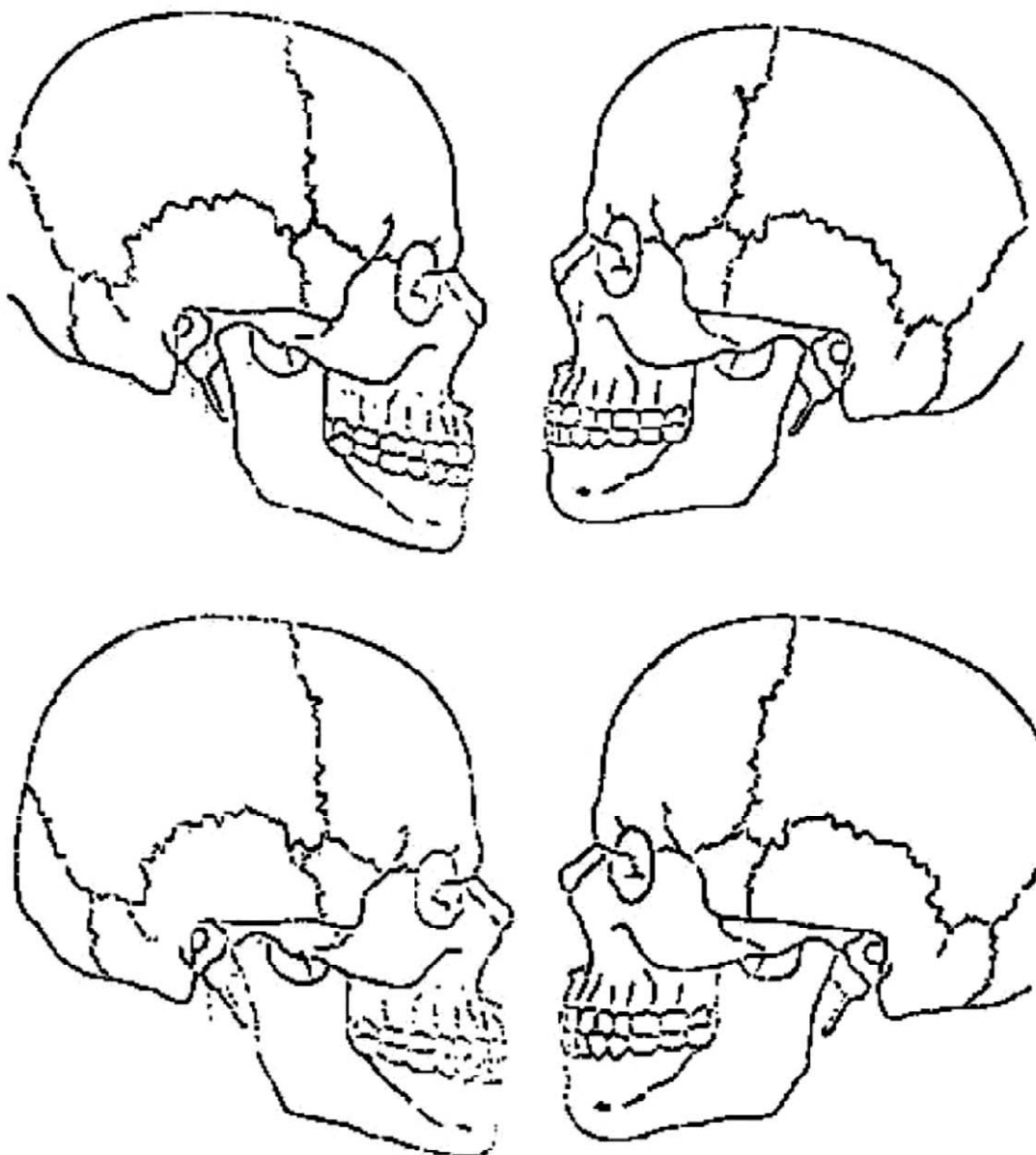
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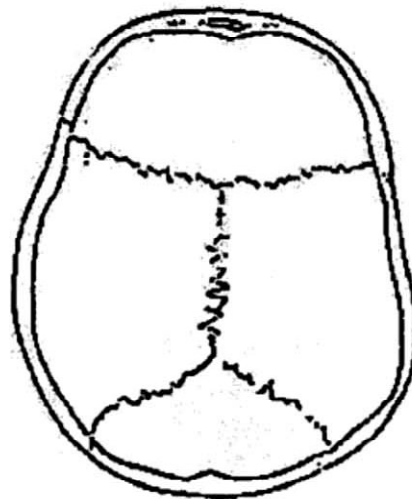
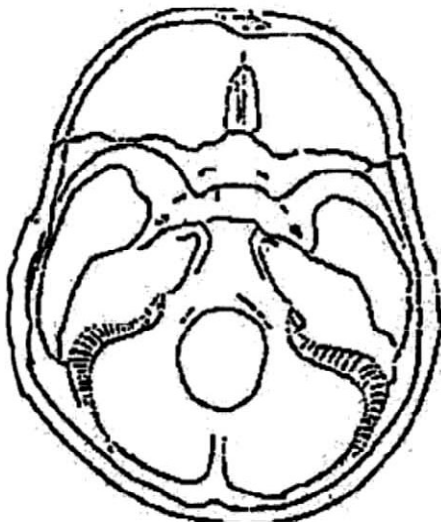
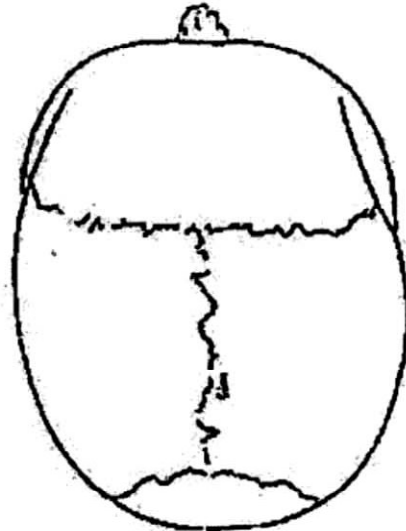
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Section : I

32. Handing-Over & Taking-Over of Materials preserved during Postmortem Examination Dead body restored to best possible anatomical continuity after postmortem examination

Materials handed over by - (Doctor) Name, Designation, Address, Phone No. with Date & Time	Materials received by - (Police Personnel) Name, Designation, Address, Phone No.
Signature / eSign	Signature / eSign