

THE CORONERS ORDINANCE [CHAPTER 41]
REPORT OF MEDICAL PRACTITIONER

1. Date and hour of receipt of corpse at mortuary...30-11-2021.....
2. Condition of corpse on arrival...FRESH.....
3. Mode in which packed.....EMBALMED.....
4. Date and hour of holding examination...2-12-2021...4:00PM.....
5. Name of deceased {if known}...SYLVESTER OGHENENYEROVWO OROMONI...
6. By whom identified.....CHIEF OPUDU BORO.....
7. Approximate age.....TWELVE YEARS.....
8. Sex.....MALE.....
9. Height, colour of hair, eyes, peculiar clothing and any other marks or means of identification.....159cm, Black hair.....
10. Probable date of death.....30-11-2021.....
11. Medical Report:

ANATOMIC/ PATHOLOGICAL SUMMARY

1. Scalded upper lip
2. Bruised flanks/back
3. Acute gastric erosion
4. Acute lung injury
5. Cerebral oedema with raised intra-cranial pressure
6. Enlarged liver

I certify the cause of death in my opinion to be: ACUTE LUNG INJURY due to
?? CHEMICAL INTOXICATION in a background of
BLUNT FORCE TRAUMA

VC

.....10-12-2021.....[Signed].....DR CLEMENT VHRITERHIRE.....
Qualifications.....MBBS, FMCPath.....CONSULTANT PATHOLOGIST.....

APWO12381

C.T.C BY ME AMIOLEME CHARLES



INTRODUCTION

I, Dr Clement Vhritherhire, a consultant pathologist with the Central Hospital Warri was served coroner papers by the police to carry out post-mortem examination on the body of one SYLVESTER OROMONI who was said to have died on the 30th November 2021.

The deceased was a boarding house student of a school in Lagos. The father was called that he was not well as he was said to have sustained a fall while playing football. The guardian came and took him home. He was said to be having pains all over the body. He was attended to by the family doctor the weekend before he died.

IDENTIFICATION

The body of the deceased was identified by the uncle, Chief Opudu Boro prior to commencement of the autopsy.

PERSONS IN ATTENDANCE

1. INSP TIJE AUGUSTINE.....IPO
2. CHIEF OPUDU BORO.....UNCLE
3. BARR FRED ABURU
4. DR CLEMENT VHRITERHIREPATHOLOGIST

CONDITION OF THE BODY

The body is met at the autopsy room of SAFE HAVEN mortuary Warri, naked, embalmed and well preserved.

EXTERNAL EXAMINATION

The body is that of a well developed, well nourished young male, measuring 159cm in length, whose appearance is consistent with the offered age of 12years.

The scalp hair is a well kept natural black hair with a strand length of 1cm. The nose and facial bones are palpably intact. The eyes are brown. There is no conjunctiva pallor, conjunctiva haemorrhage, petechia nor yellowish discolouration.

The nose is normally formed and is unremarkable. The upper lips appear scalded. The ears are normally formed without drainage or bleeding. The neck is symmetrical and unremarkable, showing no evidence of bruising or any other injury. The chest is symmetrical and well developed. The abdomen is full with no evidence of external injury.

The upper and lower limbs are normally developed with no evidence of injury or absence of digits. The genitals are those of a normal well developed circumcised male. The back is unremarkable.

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EVIDENCE OF INJURY

There is no evidence of external injury on the body

Reflection of the skin of the scalp and anterior chest wall/abdominal wall show no evidence of trauma. Reflection of the skin of the back/flank show small areas of bruising/bleeding

INTERNAL EXAMINATIONS

BODY CAVITIES: The organs are in their normal situs, the pleural, pericardial and peritoneal cavities contain no abnormal fluid accumulations or adhesions.

HEAD/CENTRAL NERVOUS SYSTEM: There are no scalp injuries. There is no epidural, subdural or subarachnoid haemorrhage in the greater convexity of the brain. There is no brainstem haemorrhage. The brain show some cerebral oedema with flattening of gyri and narrowing of sulci with grooving of the cerebellar tonsils. Coronal sections show unremarkable brain parenchyma. No intracerebral haemorrhage noted. The cerebral vessels are all unremarkable

THE CARDIOVASCULAR SYSTEM

The heart and great vessels contain normal post-mortem clots. The heart appears normal in size. The epicardial surface has a normal amount of glistening yellow adipose tissue. The coronary arteries are free of atherosclerosis. The cut surface of the brown myocardium show no evidence of haemorrhage or necrosis.

The pulmonary trunk and arteries are opened in-situ and there is no evidence of thromboemboli. The chambers are normally developed and are without mural thrombosis. The tricuspid, pulmonary, mitral and aortic valves are thin, leafy and competent. The circumference of the valve rings are all within normal range. There is no stenotic valve and there is no endocardial discolouration. There is no abnormality of the apices of the papillary muscle. There are no defects of the septum. The right ventricular wall is 0.3cm thick and the left ventricle is 1.2cm thick.

RESPIRATORY SYSTEM

The two lungs appear heavy with firm red parenchyma. The pleural surfaces are free of exudates. The cut surfaces of the lungs show no evidence of neoplasm, consolidation, thromboemboli, fibrosis or calcification.

THE GASTROINTESTINAL TRACT

The stomach contains 20mls of very dark chocolate coloured material admixed with mucus (acute gastric erosion) with no evidence of partially digested food particles and no medications seen. (No tablets or capsules are identified). The intestines and colon show no

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identifiable gross anomaly. The pancreas occupies a normal position. There is no trauma. The parenchyma is lobular and firm.

HEPATOBIILIARY SYSTEM: The liver appears enlarged in size and is red-brown. The capsule is intact and the consistency of the parenchyma is firm. The cut surface is smooth. There are no masses, haemorrhage or cysts seen. The gall bladder is present. The wall is thin and pliable. It contains minimal bile and no calculi.

HAEMOLYMPHATIC SYSEM

The spleen is of average size, the capsule is intact. The parenchyma is dark red and firm. There is no increased follicular pattern. Lymph nodes throughout the body are small and inconspicuous. The bone marrow of the ribs is red and moist.

URINARY SYSTEM: Grossly intact.

PHOTOGRAPHY: In addition to the routine identification photographs, pertinent photos are taken of significant autopsy findings.

HISTOLOGY REPORTS

LIVER: Sections show non-specific hepatitis

KIDNEY: Sections show parenchyma congestion

STOMACH WALL: Sections show vascular congestion and areas of sloughing of superficial mucosa with increased inflammatory cells

PANCREAS: Sections are essentially normal

LUNGS: Sections show alveoli filled with red blood cells and pigment laden macrophages. The septal capillaries and blood vessels are all congested. There is associated alveolar haemorrhage/oedema as well as septal haemorrhage

SPLEEN: Sections show severe congestion and enlarged red pulp/increased red pulp cellularity. The structure of the white pulp is destroyed and the clear marginal zones surrounding the follicles are inapparent.

BRAIN: Sections are unremarkable

TOXICOLOGIC TESTING

The following samples were sent for toxicology and results are being awaited

1. Content of the stomach
2. A slice of the liver

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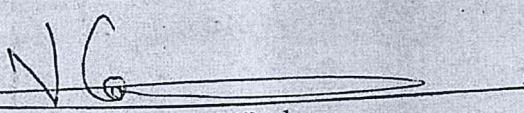
3. Blood clot from the heart
4. Vitreous humour

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NB: RESULT OF TOXICOLOGY SCREEN BEING AWAITED


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