

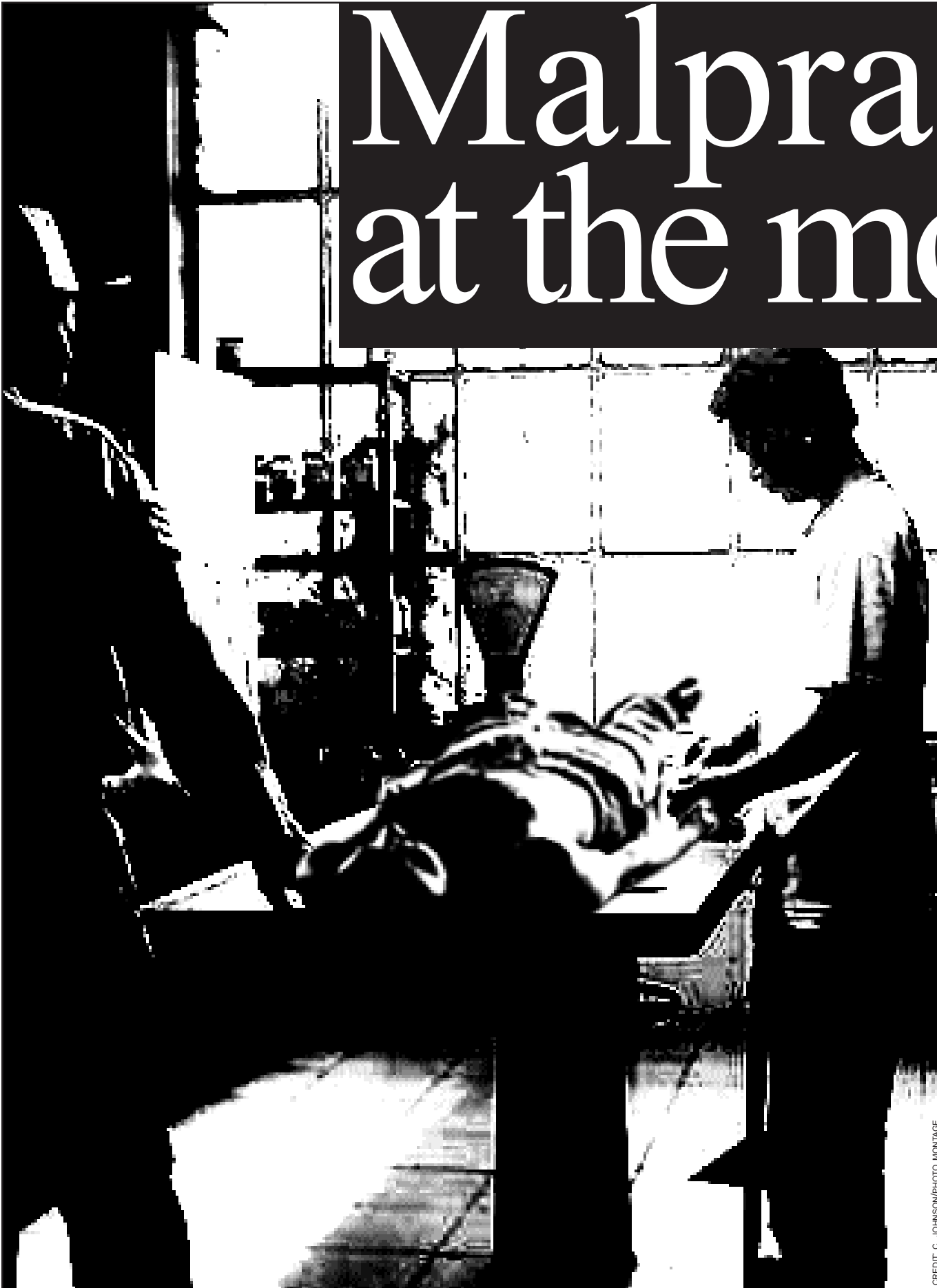


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Malpractice at the morgue



Unqualified attendants perform autopsies in Bangalore government Hospitals

A TWO EXCLUSIVE

to handle the entire process of the autopsy. Any way, these attenders are capable of doing the job well." Dr Indira H. Asangi, also an intern, adds that the attenders are not supposed to cut open the body, but they do it anyway. A senior intern requesting anonymity told *The Weekly Observer* that 10 – 15 bodies arrive for autopsy at the Victoria Hospital mortuary everyday. Manju, an attender in the department said, "Doctors do the postmortem when there is a doubtful case. Simple cases like burns, suicide and poisoning are done by us."

The reporter witnesses the second autopsy in which Nagaraj, another attender, is cutting the liver of a dead body. To give a picture of what happens, and to explain how an attender handles the entire process of autopsy

except writing the post-mortem report, here is a brief account of what this reporter witnessed.

An autopsy is conducted with the doctor standing at a comfortable distance. The case is of poisoning. The attender takes out the stomach and shows it to doctor and says, "Sir, the colour is cherry red and so poisoning is confirmed." The doctor asks him to smell and confirm it. He says it smells of poison. The doctor makes note of this and leaves the room. But the autopsy continues. Another doctor comes back after about two minutes and writes down what the attender says. This is how an autopsy is conducted in a Bangalore government hospital. An illiterate or matriculate attender not only conducts the autopsy, but offers untrained observations to a doctor who is reduced to the level of a note taker.

By rule an autopsy must be conducted in a minimum of one hour. But the reporter and the photojournalist witness that this particular autopsy is done within ten minutes! This laxity in both conducting and reporting an autopsy has serious consequences. V. G. Nayak, Scientific Toxicology Officer at the Bangalore Forensic Science Lab, admits: "The autopsy reports are not written in detail and are not accurate most of the time. Also the samples sent are not enough for us to continue with further investigation. Thus, arriving at a definite conclusion is difficult."

BY BHARGAVI KERUR

A Group "D" attender cuts into a dead body at a government hospital in Bangalore. First, he slices open the skin, then calls the doctor to write down the observations that he (the worker) makes. The doctor stands at a comfortable distance of two metres and hardly comes near the body to examine it.

Dr. P. K. Devdas, Head of the Department of Forensic Medicine at Victoria and Bowring Hospitals, says these Group "D" attenders are illiterates or matriculates. This means they have neither the medical knowledge of the human body nor the technical training to conduct an autopsy.

On a hot Tuesday afternoon, this reporter walks into the mortuary of a local government hospital. A Group "D" attender is removing the small intestine of a body. There is no doctor present. The scene contradicts Dr. Devdas' assertion that

attenders don't open the body but, "only assist the doctor to put the removed organs back in the body."

What, then, is the job of an attender? Dr. Devdas explains: "An attender has to receive the dead body from the mortuary van. Then he arranges instruments used for the autopsy, and washes the body. Later, during the autopsy, the attender assists the doctor by collecting and preserving specimen from the body,

"The attender does the autopsy because there are a large number of bodies coming in every day, and it is not possible for the doctor to handle the entire process...."

and cutting the skull or any hard bones. After completion of the autopsy, the attender packs the body and places it in the cold storage compartment or hands it over to the relatives of the dead person."

Dr. Vinayaka Prasanna, an intern at Victoria Hospital says, "The attender does the autopsy because there are a number of bodies coming in everyday, and it is not possible for the doctor

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