



# Description of Clinical Forensic Cases Examined in UNS Hospital Period 2017–2021 for Supporting Law and Order Enforcement

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**Abstract. Introduction:** The high crime rate in Surakarta and its surroundings has led to the need for legal protection. Forensic medicine, including clinical forensics, plays a role in solving cases related to the human body. The results of this study are expected to be used as reference material related to clinical forensic cases in Surakarta and its surroundings.

**Methods:** This observational descriptive study used VeR record files at UNS Hospital in 2017–2021. Sampling was done by total sampling.

**Results:** The clinical visum at UNS Hospital in 2017–2021 totaled 41 cases, namely 39 VeRs for injuries, 2 VeRs for sexual crimes, and 0 VeRs for mental disorders. SPV for VeRs for injuries, 41.03% issued by Kartasura Police. Contusions occurred in 69.23% of VeRs for injuries. Blunt force trauma occurred at 92.31% VeRs for injuries. The moderate injury occurred at 33.33% VeRs for injuries. SPV for VeRs for sexual crimes 100.00% issued by Sukoharjo Police. Victims of VeRs for sexual crimes were 100.00% female, conscious, and had signs of sexual intercourse, 50.00% aged <15 years, and had signs of violence.

**Conclusion:** The most clinical forensic cases were in 2019. The majority of VeRs need to be issued by Kartasura Police, have contusions, due to blunt force trauma, and include the moderate injury. All SPV of VeRs for sexual crimes issued by Sukoharjo Police. All victims of VeRs for sexual crimes are female, conscious, and have signs of sexual intercourse. Half of the victims of VeRs for sexual crimes were aged <15 years and had signs of violence.

**Keywords:** Clinical visum · injury · sexual crime · forensic

## 1 Introduction

According to data retrieved from the National Police, the total number of criminal incidents between 2018 and 2020 experienced a decline that tended to fluctuate, from 294.281 incidents in 2018 to 247.218 incidents in 2020. Meanwhile, according to data on criminal incidents reported by the Regional Police in 2020, the province of Central Java was

placed seventh as the province with the highest number of crimes. However, in terms of crime rate, Central Java placed second last [1]. This is due to the high population count in the province.

Of the various types of crime, crimes against decency, i.e. rape and obscenity, is one of the types of crime which still has a high number of incidents. In the period of five years from 2016 to 2020, 2020 had the highest number of incidents, with 6.872 incidents, while the previous year had 5.233 incidents [1]. The data also details statistics by province, where Central Java placed fourth for the highest number of crimes against decency.

In 2020, the City of Surakarta placed third in the highest number of criminal incidents, after the City of Semarang and Banyumas Regency, with 650 incidents. For the crime rate itself, the City of Surakarta placed first in 2020, with a figure of 125.102. This indicates the high vulnerability towards crime in the city. Meanwhile, municipalities near the City of Surakarta such as Sukoharjo Regency has a crime rate of 25.30 in 2020 with several incidents at 226 incidents [2].

Based on the data, legal protection for the community is needed to achieve a safe and secure society. In this case, forensic medicine can help the community in accessing legal protection.

Legal medicine is a branch of medicine that studies the benefit of medicine in law enforcement [3]. Legal medicine holds an important role for law enforcement authorities such as judges, investigators, and prosecutors as it aids them in solving cases related to the human mind or psyche because they are not knowledgeable in every field of science [3]. The branch of forensic science that discusses examinations on dead victims is forensic pathology and clinical forensics is the branch of forensic science that studies examinations on live victims.

As explained in Article 133 Paragraph (1) of the Indonesian Code Of Criminal Procedure, an investigator has the authority to submit a request for expert testimony, e.g. an expert on forensic science, when handling a criminal case involving an injured, poisoned, or dead victim. As such, a doctor of forensic medicine or a doctor or other expert is obligated to give testimony regarding the examination of an injured, poisoned, or dead victim [4].

According to Afandi [5], *visum et repertum* is a letter of written testimony made by a doctor related to a request by an investigator for the sake of justice. The letter is made by the result of a medical examination of a human either alive or dead or part of a human body. Meanwhile, according to Ohoiwutun [4], *visum et repertum* is a written report made by a doctor that is made on the results of examining a human who died or was injured presumably because of an event constituting an offense. Such events in which a *visum et repertum* is usually requested are when the criminal suspect is presumed to suffer from a mental disturbance, determinations of the age of the victim or criminal suspect, crimes against decency, crime against life, maltreatments, and negligence which causes death or bodily harm of another person including traffic accidents. Aside from criminal cases, a *visum et repertum* (VeR) is also needed in civil cases such as when approving requests for a change of legal sex, claiming insurance, and proving the status of a child [4].

The VeR that has been made can later be used as a means of proof admissible in court. As laid out in Article 184 of the Code Of Criminal Procedure, legal means of proof include the testimony of an expert and documents, equivalent to a VeR [5]. Other than the result of the examination, a VeR also includes a doctor's opinion regarding the aforementioned result so that a VeR can easily bridge between law and medicine [5].

According to Petrus [3], depending on the examined object, a VeR can be classified into two, which are psychical objects and physical objects. A psychical object in this context is a person with a mental disturbance (psychosis) or a person with mental retardation. A VeR that includes the result of an examination of a physical object is called a psychiatric VeR. In physical objects, the objects in question are an alive person and a dead person. A VeR of an alive person can be divided further into a VeR of an injury or poisoning and a VeR of a victim of a crime against decency.

## 2 Methods

The type of research is a descriptive observational study from a cross-sectional approach (Fig. 1).

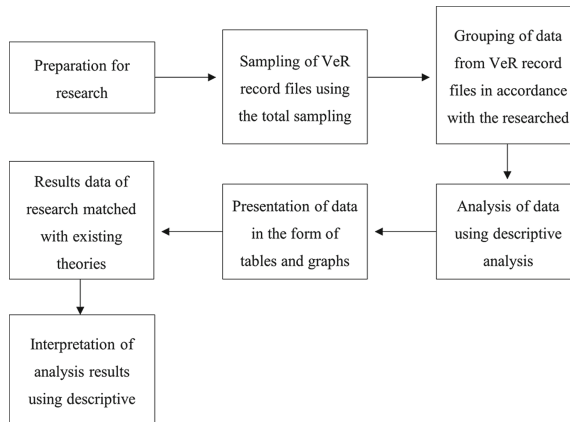
This research is conducted in the UNS Hospital.

The subject of the research is all clinical forensic cases available on the VeR record files in the UNS Hospital from 2017 to 2021.

The sampling in this research uses the total sampling technique, which utilizes secondary data from all VeR record files in the UNS Hospital from 2017 to 2021.

The sample is grouped by the researched variables. Those researched variables are visum et repertum request letters, type of injury, type of violence, degree of severity of the injury, age of the victim, the consciousness of the victim, signs of coitus, signs of violence, and mental disturbances (Table 1).

Data from the research was analyzed using descriptive analysis. It was then recapitulated and presented using tables and graphs, along with the relevant narration from existing theories (Fig. 2).



**Fig. 1.** Research Plan.

**Table 1.** Operational Definitions [1][2]

Variable	Definition	Result of measurement
Visum et repertum request letter	Letter issued so that a visum et repertum can be made by a doctor	Original requester of visum
Type of injury	The injury suffered by the victim	<ul style="list-style-type: none"> <li>• Incisional wound</li> <li>• Puncture wound</li> <li>• Chop wound</li> <li>• Abrasion</li> <li>• Contusion</li> <li>• Laceration</li> <li>• Gunshot wound</li> <li>• Burn</li> <li>• Electrical burn</li> <li>• Bone fracture</li> </ul>
Type of violence	Violence experienced by the victim according to the wound or other conditions in the body of the victim	<ul style="list-style-type: none"> <li>• Sharp violence</li> <li>• Blunt violence</li> <li>• Gunshot violence</li> <li>• Physical violence</li> <li>• Chemical violence</li> </ul>
Degree of severity of the injury	Injury in the body of the victim according to the Penal Code	<ul style="list-style-type: none"> <li>• Light injury</li> <li>• Moderate injury</li> <li>• Serious injury</li> </ul>
Age of victim	Hitherto lifespan of the victim according to the day, month, and year of birth	<ul style="list-style-type: none"> <li>• &lt;15 years</li> <li>• ≥15 years</li> </ul>
Consciousness of victim	The ability of the victim to respond to outside stimuli	<ul style="list-style-type: none"> <li>• Conscious</li> <li>• Unconscious</li> </ul>
Signs of coitus	Signs that appeared due to the occurrence of coitus	<ul style="list-style-type: none"> <li>• Tearing of hymen due to penile penetration</li> <li>• Abrasion or contusion from friction with penis</li> <li>• Pregnancy</li> <li>• Transmission of sexually transmitted infection</li> </ul>
Signs of violence	Physical signs in the form of injury during coercion of victim in sexual crime	<ul style="list-style-type: none"> <li>• Abrasion from nails</li> <li>• Bite mark</li> <li>• Contusion</li> <li>• Other injuries</li> </ul>
Mental disturbance	Condition in which a person's mind is impaired in development or disturbed due to illness	<ul style="list-style-type: none"> <li>• Mental illness</li> <li>• Mental disorder</li> </ul>



**RESEARCH ETHICS COMMITTEE**  
**KOMITE ETIK PENELITIAN**  
**Faculty of Medicine Universitas Sebelas Maret**  
 Fakultas Kedokteran Universitas Sebelas Maret

**ETHICAL CLEARANCE**  
**KELAIKAN ETIK**

No : 53 /UN27.06.11/KEP/EC/2022

The Research Ethics Committee of Faculty Medicine Universitas Sebelas Maret after reviewing the research protocol, here with to certify that the research protocol titled:

Komite Etik Penelitian Fakultas Kedokteran Universitas Sebelas Maret setelah menilai dokumen protokol penelitian yang diusulkan, dengan ini menyatakan bahwa usulan penelitian dengan judul :

Deskripsi Kasus Forensik Klinis yang Diperiksa di RS UNS Tahun 2017-2021

Protocol ID : 01/02/04/2022/47  
 Nomor Protokol

Principal Investigator : Aufa Adila Yasmin Fitri  
 Peneliti Utama : NIM. G0019034

**is Ethically Approved**  
**Dinyatakan Laik etik**

The ethics approval expire 1 (one) year after issued and the Principal investigator must send progress report and/or final report to REC by 30 November.

Sertifikat kelaikan etik ini berlaku 1 (satu) tahun sejak diterbitkan dan Peneliti Utama wajib memberikan laporan kemajuan dan/atau laporan akhir penelitian selambat-lambatnya 30 November.

Surakarta, 11 Mei 2022



**Fig. 2.** Ethical Clearance.

## 3 Results

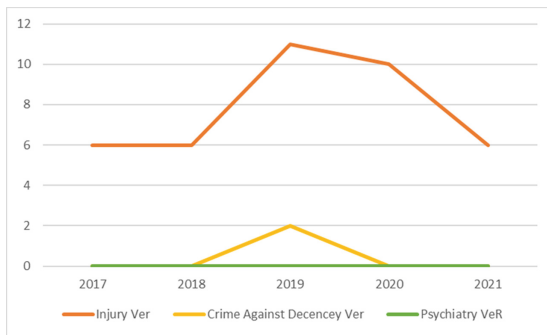
The results of the research were retrieved from VeR record files of clinical forensic cases in the UNS Hospital from 2017 to 2021. VeR record files are split into 3 types of cases, which are injury VeR, crime against decency VeR, and psychiatry VeR. As shown in Table 2, there were 41 clinical forensic cases with 39 injuries VeR, 2 crime against decency VeR, and 0 psychiatry VeR. Also shown in Table 2 is that 2019 had the highest number of clinical forensic cases, i.e. 13 cases with 11 injuries VeR and 2 crimes against decency VeR (Fig. 3).

### 3.1 Breakdown of Injury VeR by Origin of SPV

Visum request letters (SPV) for injury VeR for UNS Hospital from 2017 to 2021 were most commonly issued by Kartasura Sectoral Police, with 16 letters or 41.03% of all SPVs for injury VeR. It was then followed by Sukoharjo Municipality Police with 12 letters (30.77%), Karanganyar Municipality Police with 4 letters (10.26%), Boyolali Municipality Police with 3 letters (7.69%), and Sragen Municipality Police, Laweyan Sectoral Police, Banyudono Sectoral Police, and Colomadu Sectoral Police each with 1 letter (2.56%) (Fig. 4 and Table 3).

**Table 2.** Breakdown of Clinical Forensic Cases in UNS Hospital from 2017 to 2021

Year	Injury VeR	Crime Against Decency VeR	Psychiatry VeR	Total
2017	6	0	0	6
2018	6	0	0	6
2019	11	2	0	13
2020	10	0	0	10
2021	6	0	0	6
Total	39	2	0	41
%	95.12%	4.88%	0.00%	100.00%



**Fig. 3.** Graph of Injury VeR, Crime Against Decency VeR, and Psychiatry VeR in UNS Hospital From 2017 To 2021.

**Table 3.** Breakdown of Injury VeR in UNS Hospital from 2017 to 2021 by Origin of SPV

	2017	2018	2019	2020	2021	Total	%
Polres Karanganyar	0	1	1	1	1	4	10.26%
Polres Sukoharjo	1	2	2	5	2	12	30.77%
Polres Sragen	0	0	1	0	0	1	2.56%
Polres Boyolali	0	0	0	1	2	3	7.69%
Polsek Kartasura	4	2	7	2	1	16	41.03%
Polsek Laweyan	1	0	0	0	0	1	2.56%
Polsek Banyudono	0	1	0	0	0	1	2.56%
Polsek Colomadu	0	0	0	1	0	1	2.56%
Jumlah	6	6	11	10	6	39	100.00%

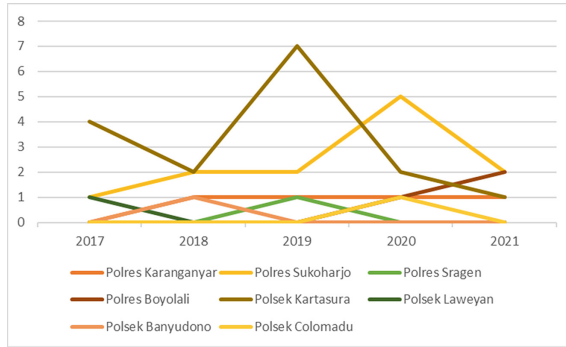


Fig. 4. Graph of Injury VeR in UNS Hospital from 2017 to 2021 by Origin Of SPV.

### 3.2 Breakdown of Injury VeR by Origin of SPV

For injury VeR in the UNS Hospital from 2017 to 2021, the most common type of injury was contusions that appear in 27 injuries VeR (69.23%). After contusions, it was followed by abrasions which appear in 14 injuries VeR (35.90%), lacerations in 8 injuries VeR (20.51%), bone fractures in 2 injuries VeR (5.13%), incisional wound and burn each appear in 1 injury VeR (2.56%), and there were no injury VeR with puncture wounds, chop wounds, gunshot wounds, and electrical burns. Other than that, there was 1 injury VeR (2.56%) with no discovered wounds from the violence that occurred and 1 injury VeR (2.56%) with no examinations conducted on the injuries which meant that there were no data listed because the victim had died upon arrival in UNS Hospital Emergency Department (Fig. 5 and Table 4).

### 3.3 Breakdown of Injury VeR by Type of Violence

The most common type of violence in injury VeR in UNS Hospital from 2017 to 2021 was blunt violence, appearing on 36 injuries VeR (92.31%). After blunt violence, it was followed by sharp violence which appears on 2 injuries VeR (5.13%), physical violence on 1 injury VeR (2.56%), and no injury VeR with gunshot or chemical violence. Other than that, there was 1 injury VeR (2.56%) with no signs of violence in the form of wounds dan 1 injury VeR (2.56%) with no examinations conducted on the injuries in the victim's body because the victim had died upon arrival in UNS Hospital Emergency Department (Fig. 6 and Table 5).

### 3.4 Breakdown of Injury VeR by Degree of Severity of Injury

The most common degree of severity of injury in injury VeR in UNS Hospital from 2017 to 2021 was moderate injuries which appeared on 13 injuries VeR (33.33%). It was then followed by light injuries on 11 injuries VeR (28.21%) and serious injuries on 2 injuries VeR (5.13%). Other than that, there was 1 injury VeR (2.56%) with no wounds so it could not be classified by the degree of severity of the injury and there was 12 injury VeR with no information on the degree of severity of the injury. All injury VeR that did

**Table 4.** Breakdown of Injury VeR in UNS Hospital from 2017 to 2021 by Type of Injury

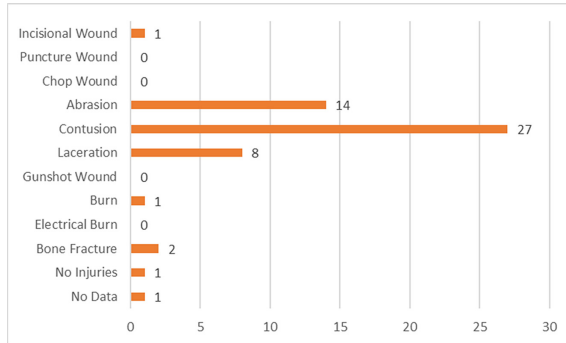
Type of Injury	Total	%
<b>Incisional Wound</b>		
Present	1	2.56%
Absent	38	97.44%
<b>Puncture Wound</b>		
Present	0	0.00%
Absent	39	100.00%
<b>Chop Wound</b>		
Present	0	0.00%
Absent	39	100.00%
<b>Abrasion</b>		
Present	14	35.90%
Absent	25	64.10%
<b>Contusion</b>		
Present	27	69.23%
Absent	12	30.77%
<b>Laceration</b>		
Present	8	20.51%
Absent	31	79.49%
<b>Gunshot Wound</b>		
Present	0	0.00%
Absent	39	100.00%
<b>Burn</b>		
Present	1	2.56%
Absent	38	97.44%
<b>Electrical Burn</b>		
Present	0	0.00%
Absent	39	100.00%
<b>Bone Fracture</b>		
Present	2	5.13%
Absent	37	94.87%
<b>No Injuries</b>		
Present	1	2.56%

(continued)



**Table 4.** (continued)

Type of Injury	Total	%
Absent	38	97.44%
<b>No Data</b>		
Present	1	2.56%
Absent	38	97.44%

**Fig. 5.** Graph of Injury Ver in UNS Hospital from 2017 to 2021 By Type of Injury.

not provide the degree of severity of the injury is injury Ver which were issued in 2017 and 2018 (Fig. 7 and Table 6).

### 3.5 Breakdown of Crime Against Decency Ver by Origin of SPV

From 2017 to 2021, there were 2 visum request letters (SPV) for crime against decency Ver for the UNS Hospital. These letters were issued by Sukoharjo Municipality Police in 2019. Other than those 2 letters, there were no letters issued to the UNS Hospital in 2017, 2018, 2020, and 2021 and there were no letters issued by Karanganyar Municipality Police, Sragen Municipality Police, Boyolali Municipality Police, Kartasura Sectoral Police, Laweyan Sectoral Police, Banyudono Sectoral Police, and Colomadu Sectoral Police (Fig. 8 and Table 7).

### 3.6 Breakdown of Crime Against Decency Ver by Sex of Victim

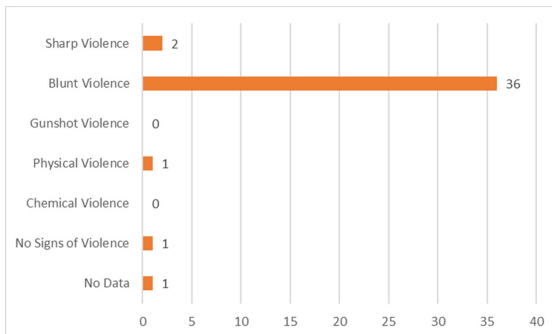
All victims which were issued a crime against decency Ver in the UNS Hospital from 2017 to 2021 were female, with 2 people, and no victims were male (Fig. 9 and Table 8).

### 3.7 Breakdown of Crime Against Decency Ver by Age of Victim

Crime against decency Ver in the UNS Hospital from 2017 to 2021 had 1 victim (50.00%) of the age of fewer than 15 years old and there was 1 victim (50.00%) who was more than 15 years old (Fig. 10 and Table 9).

**Table 5.** Breakdown of Injury VeR in UNS Hospital from 2017 to 2021 by Type of Violence

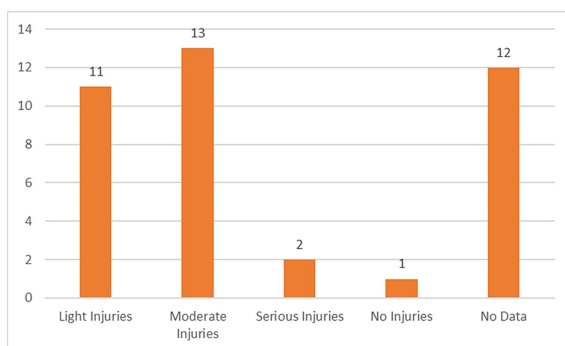
Type of Violence	Total	%
<b>Sharp Violence</b>		
Present	2	5.13%
Absent	37	94.87%
<b>Blunt Violence</b>		
Present	36	92.31%
Absent	3	7.69%
<b>Gunshot Violence</b>		
Present	0	0.00%
Absent	39	100.00%
<b>Physical Violence</b>		
Present	1	2.56%
Absent	38	97.44%
<b>Chemical Violence</b>		
Present	0	0.00%
Absent	39	100.00%
<b>No Signs of Violence</b>		
Present	1	2.56%
Absent	38	97.44%
<b>No Data</b>		
Present	1	2.56%
Absent	38	97.44%



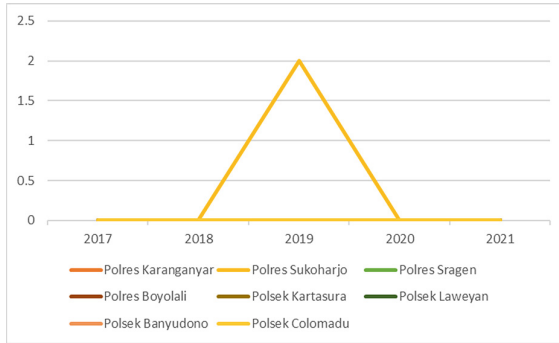
**Fig. 6.** Graph of Injury VeR in UNS Hospital from 2017 to 2021 by Type of Violence

**Table 6.** Breakdown of Injury VeR in UNS Hospital from 2017 to 2021 by Degree of Severity of Injury

Degree of Severity of Injury	Total	%
Light injuries	11	28.21%
Moderate injuries	13	33.33%
Serious injuries	2	5.13%
No injuries	1	2.56%
No data	12	30.77%

**Fig. 7.** Graph of Injury VeR in UNS Hospital from 2017 to 2021 By Degree of Severity of Injury**Table 7.** Breakdown of Crime Against Decency VeR in UNS Hospital from 2017 to 2021 By Origin of SPV

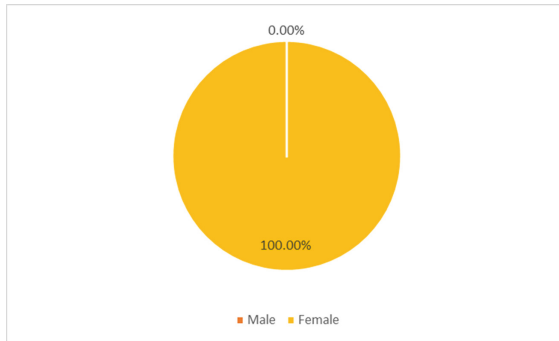
	2017	2018	2019	2020	2021	Total	%
Polres Karanganyar	0	0	0	0	0	0	0.00%
Polres Sukoharjo	0	0	2	0	0	2	100.00%
Polres Sragen	0	0	0	0	0	0	0.00%
Polres Boyolali	0	0	0	0	0	0	0.00%
Polsek Kartasura	0	0	0	0	0	0	0.00%
Polsek Laweyan	0	0	0	0	0	0	0.00%
Polsek Banyudono	0	0	0	0	0	0	0.00%
Polsek Colomadu	0	0	0	0	0	0	0.00%
Total	0	0	2	0	0	2	100.00%



**Fig. 8.** Graph of Crime Against Decency VeR in UNS Hospital from 2017 to 2021 By Origin Of SPV

**Table 8.** Breakdown of Crime Against Decency VeR in UNS Hospital from 2017 to 2021 by Sex

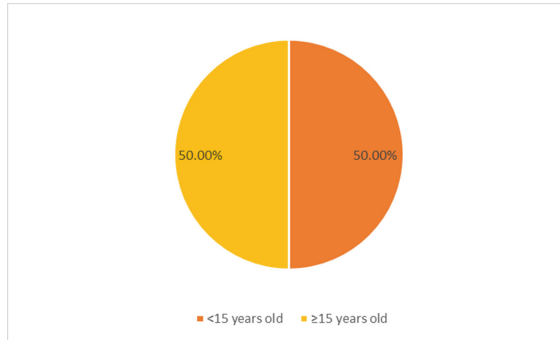
Sex	Total	%
Male	0	0.00%
Female	2	100.00%



**Fig. 9.** Graph of Crime Against Decency VeR in UNS Hospital from 2017 to 2021 by Sex

**Table 9.** Breakdown of Crime Against Decency VeR in UNS Hospital from 2017 to 2021 by Age of Victim

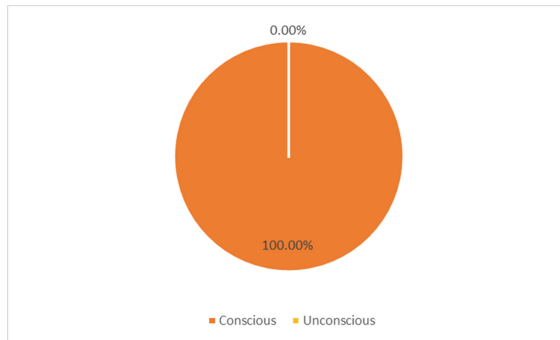
Age of Victim	Total	%
<15 tahun	1	50.00%
≥15 tahun	1	50.00%



**Fig. 10.** Graph of Crime Against Decency VeR in UNS Hospital from 2017 to 2021 By Age of Victim

**Table 10.** Breakdown of Crime Against Decency VeR in UNS Hospital from 2017 to 2021 by Consciousness of Victim

Consciousness of Victim	Total	%
Conscious	2	100.00%
Unconscious	0	0.00%



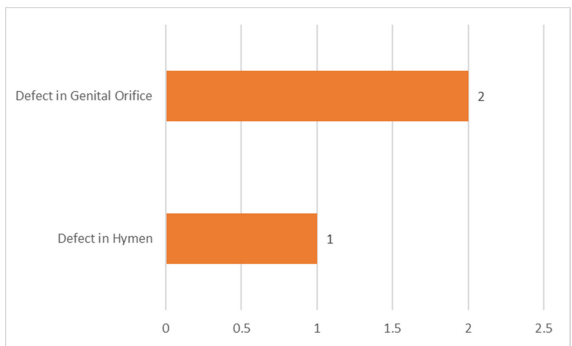
**Fig. 11.** Graph of Crime Against Decency VeR in UNS Hospital from 2017 to 2021 by Consciousness of Victim

### 3.8 Breakdown of Crime Against Decency VeR by Consciousness of Victim

All victims which were issued a crime against decency VeR in the UNS Hospital from 2017 to 2021 arrived while conscious, with 2 people and no victims arriving while being unconscious (Fig. 11 and Table 10).

**Table 11.** Breakdown of Crime against Decency VeR in UNS Hospital from 2017 to 2021 by Signs of Coitus

Signs of Coitus	Total
<b>Defect in Genital Orifice</b>	
Present	2
Absent	0
<b>Defect in Hymen</b>	
Present	1
Absent	1



**Fig. 12.** Graph of Crime against Decency VeR in UNS Hospital from 2017 to 2021 by Signs of Coitus

**3.9 Breakdown of Crime Against Decency VeR by Signs of Coitus**

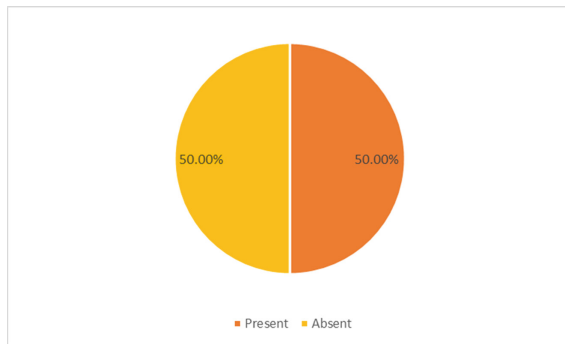
From all crimes against decency VeR made in the UNS Hospital from 2017 to 2021, both criminals against decency VeR had signs of coitus in the form of a defect in a genital orifice and there was 1 crime against decency VeR (50.00%) with signs of coitus in the form of a defect in the hymen (Fig. 12 and Table 11).

**3.9.1 Breakdown of Crime Against Decency VeR by Signs of Violence**

From all crimes against decency VeR made in the UNS Hospital from 2017 to 2021, there was 1 crime against decency VeR (50.00%) with signs of violence and there was 1 crime against decency VeR (50.00%) with no signs of violence. These signs of violence were physical signs in the form of injury during coercion of the victim in crimes against decency (Fig. 13 and Table 12).

**Table 12.** Breakdown of Crime against Decency VeR in UNS Hospital from 2017 to 2021 by Signs of Violence

Signs of Violence	Total	%
Present	1	50.00%
Absent	1	50.00%

**Fig. 13.** Graph of Crime against Decency VeR in UNS Hospital from 2017 to 2021 by Signs of Violence

## 4 Discussion

### 4.1 Discussion of Research Data

The total number of clinical visum conducted in the UNS Hospital from 2017 to 2021 was 41 VeR with 39 injuries VeR, 2 crime against decency VeR, and 0 psychiatry VeR. In the span of those five years, clinical visum were most commonly conducted in 2019, totaling 13 VeR with 11 injuries VeR and 2 crimes against decency VeR. In other words, the total number of clinical visum conducted in 2019 was higher than in the two preceding years and one succeeding year. This is in line with the decline in the percentage of residents who became victims of crime in Indonesia between 2019 and 2020, from 1.01 to 0.781. Moreover, the percentage of residents who became victims of sexual harassment in Indonesia between 2019 and 2020 also experienced a decline, from 1.25 to 1.241.

However, looking at the types of criminal activity outlined by the Directorate of Social Resilience Statistics<sup>1</sup> in its publication, which is Criminal Statistics 2021, clinical visum is only conducted for maltreatment, theft with force, and sexual harassment. Clinical visum is not conducted for fraud, theft, extortion, etc. As such, there may be some differences in trends of cases for victims of crime in Indonesia and clinical visum conducted in the UNS Hospital. Moreover, the data published by the Directorate of Social Resilience Statistics<sup>1</sup> covered all incidents in Indonesia so it is considered to be too broad if compared to clinical visum conducted in the UNS Hospital.

Visum request letters or SPV from 2017 to 2021 that are issued to the UNS Hospital originated from various police departments, including Karanganyar Municipality

Police, Sukoharjo Municipality Police, Sragen Municipality Police, Boyolali Municipality Police, Kartasura Sectoral Police under the jurisdiction of Sukoharjo Municipality Police, Laweyan Sectoral Police under the jurisdiction of Surakarta Municipality Police, Banyudono Sectoral Police under the jurisdiction of Boyolali Municipality Police, and Colomadu Sectoral Police under the jurisdiction of Karanganyar Municipality Police. When matched with the total number of reported crimes in each municipality in the Province of Central Java from 2018 to 2020, the number of SPVs issued to the UNS Hospital is in line with the increase in total crime number in Boyolali in 2020 from 2019, the decline of total crime number in Sragen in 2020 from 2019, the increase of total crime number in Karanganyar in 2020 from 2019 when looking at SPVs issued by the Colomadu Sectoral Police, and the increase of total crime number in Sukoharjo in 2019 from 2018 as well as the decrease of total crime number in Sukoharjo in 2020 from 2019 when looking at SPVs issued by the Kartasura Sectoral Police [2].

The most commonly discovered injury in injury VeR in the UNS Hospital from 2017 to 2021 was contusions. According to Bardale<sup>10</sup>, a contusion is the extravasation or collection of blood due to the rupture of blood vessels caused by the application of mechanical force of blunt nature without loss of continuity of tissue. Examples of an incident that can cause a contusion to form are marks of a wheel of a motor vehicle, collision with a whip, collision with a rubber sole of a shoe, manual strangulation with a fingertip, and so on [10]. It can therefore be concluded that contusions can form due to maltreatment and traffic accidents. This is in line with the increase in the percentage of residents who became victims of maltreatment between 2019 and 2020, from 3.08 to 3.241. Other than maltreatment, there is also an increase in the number of traffic accidents in Indonesia in 2019 which reached 116.411 cases with 12.475 people experiencing serious injuries and 137.342 people experiencing light injuries [11]. These numbers are higher when compared to 2017 and 2018.

In contrast with the research conducted in Dr. R. M. Djoelham Binjai Regional General Hospital in 2020, the most common injury in the examinations of live victims was abrasions, followed by contusions<sup>12</sup>. Meanwhile, abrasions were the second-most commonly discovered injury in injury VeR in the UNS Hospital from 2017 to 2021. According to Bardale<sup>10</sup>, abrasion is the loss of the epidermis or mucous membrane due to the application of mechanical force. This abrasion can form due to friction with a sharp and narrow object, such as a safety pin, thorn of a plant, barbed wire, and the tip of a sharp weapon, or due to friction with the surface of a broad object, marks of a wheel of a motor vehicle or marks of car grille in traffic accidents, marks of the whip in maltreatments using a whip, marks of ligature strangulation or hanging, and so on [10].

The most common type of violence in injury VeR in the UNS Hospital from 2017 to 2021 is blunt violence. The characteristic of blunt violence is the formation of an abrasion, contusion, or laceration [9]. This matches the previous statement that the most common type of injury in injury VeR in the UNS Hospital from 2017 to 2021 is contusions and followed by abrasions and lacerations. Similar to the research conducted in Dr. Soeroto Ngawi Regional General Hospital from 2015 to 2020 and in Dr. R. M. Djoelham Binjai Regional General Hospital in 2020, the most common type of trauma is blunt trauma [6][12].



Injuries described in injury VeR can be divided into 3 degrees, which are light injuries, moderate injuries, and serious injuries [9]. In injury VeR in the UNS Hospital from 2017 to 2021, the most common degree of severity of the injury is moderate injuries and followed by light injuries and serious injuries. Research conducted by Prof Dr. R. D. Kandou Manado Central General Hospital between January and July of 2019 also showed similar results, with the most common degree of severity of injury being moderate injuries, followed by light injuries, and the least common being serious injuries [13]. A probable cause for this is that light injuries are injuries that do not obstruct someone from performing daily activities and thus victims tend not to report maltreatment that they experienced to the authorities, whereas serious injuries have one of the characteristics of potentially causing death and thus victims are reported using pathology visum, instead of clinical visum.

Crime against decency VeR made by the UNS Hospital from 2017 to 2021 has a total number of 2 VeR. The first VeR is a female victim aged 18 years old with the examination results being an abnormal genital orifice or vagina and a hymen with a mark from an old laceration, but no new injuries. The conclusion from this VeR is that it cannot be determined whether the laceration was the result of coitus. Moreover, there were no signs of violence in the body of the victim so it cannot be classified as a case of rape. As explained by Aflanie et al. [8], rape is sexual intercourse accompanied by violence or threat of violence. Meanwhile, the second VeR contains information on a female victim aged 7 years old with the examination results being a genital orifice or vagina with redness and signs of violence being a reddish abrasion at the perineum. In conclusion, the abrasion on the genitals was caused by blunt trauma. As explained in Article 287 of the Penal Code, this female can be classified as a child rape victim because the intercourse was with a victim who had not reached fifteen years old [14].

## 4.2 Research Limitations

The results of this research were retrieved from what is available in clinical VeR in the UNS Hospital from 2017 to 2021. This leads to research limitations caused by the incompleteness of VeR data. An example of this is regarding the degree of severity of the injury. There was 30.77% out of all injury VeR that had no information on the degree of severity of the victim's injury, even though this is important for a judge to determine the sentence that would be imposed on the perpetrator. A good VeR should be able to be evidence in helping to solve the criminal act that occurred [15]. There are a few factors that can influence in determining the degree of severity of the victim's injury, such as the experience and skills of the doctor who performed the examination. Research conducted in Asahan Regency from 2015 to 2018 which assessed the quality of injury VeR of live victims showed that the quality of the conclusions of injury VeR, including the degree of injury, in Asahan Regency, was 29.75% or Not Good and all available injury VeR did not include information on the degree of injury [16]. This indicates that the inclusion of the degree of severity of injury in an injury VeR is still very rarely executed.

## 4.3 Suggestions

The researcher presents some suggestions, which are,

1. For Doctors  
To create a standardized VeR to help judges in determining the sentence for the perpetrator of a crime.
2. For Research  
To conduct further research on the quality of VeR in the UNS Hospital.
3. For General Public  
To increase vigilance on the various forms of crime.  
Always exercise caution while driving to avoid involvement in traffic accidents.
4. For Government  
To implement policy related to preventive measures, especially in common criminal cases.

## 5 Conclusion

A study into the description of clinical forensic cases examined in the UNS Hospital using a sample of 41 VeR with 39 injuries VeR and 2 crime against decency VeR showed that between 2017 and 2021, cases most commonly occurred in 2019. Visum request letters for injury VeR were most commonly issued by the Kartasura Sectoral Police and the Sukoharjo Municipality Police for crime against decency VeR. The most commonly found injury in injury VeR was contusions. The most commonly experienced type of violence in injury VeR was blunt violence. Injuries in injury VeR were most commonly classified as moderate injuries. Victims who were issued a crime against decency VeR were all of the female sex. The age of victims who were issued a crime against decency VeR was one person who were less than fifteen years old and one person who was greater than or equal to fifteen years old. All victims who were issued a crime against decency VeR arrived at the UNS Hospital Emergency Department in a state of consciousness. All victims who were issued a crime against decency VeR had defects in their genital orifice and one of two victims had a defect in the hymen. One crime against decency victim had signs of violence and the other victim did not.

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