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THE K.K. LUTHRA MEMORIAL MOOT COURT, 2026

FEBRUARY 13TH, 2026 TO FEBRUARY 15TH, 2026

Before

COURT OF SESSIONS JUDGE, SAVOCA

IN THE MATTER OF

SESSIONS TRIAL CASE NO. 173 OF 2025

STATE OF SAVOCA V. LUCIO

State of Savoca **…..PROSECUTION**

V.

Lucio **…..DEFENDANT**

CHARGED UNDER SECTION 105 OF THE SERAGIO PENAL CODE

-MEMORANDUM ON *BEHALF* OF THE PROSECUTION-

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BACKGROUND

Anthony Corleone was dependent for his survival on a proprietary, AI-powered cardiac pacemaker system. Its functionality was governed by one non-negotiable rule: the linked mobile transmitter must remain operational. Any prolonged failure would cause fatal cardiac arrest within 60 minutes, a critical risk explicitly communicated to Anthony and his daughter, Isabella.

THE INCIDENT

On 15 January 2025, after Anthony's transmitter was damaged, he and Isabella sought urgent help at Planet Electronics. Isabella explicitly and repeatedly warned the technician, Lucio, of the device's life-sustaining function and the lethal consequences of tampering. She provided him with the manufacturer's Patient Handbook, which contained an unequivocal prohibition: "DO NOT OPEN OR INTERFERE WITH INTERNAL COMPONENTS".

Despite these dire warnings, Lucio, a consumer electronics technician with no authorisation, certification, or schematics for medical devices, chose to ignore the protocols. He pried open the sealed casing and attempted a repair, causing a catastrophic short circuit that permanently disabled the transmitter.

THE DIRECT CONSEQUENCE

Within minutes of Lucio's intervention, Anthony Corleone suffered a fatal cardiac arrest. Certified medical service centers were available within 45 minutes, and a backup transmitter was en route. Lucio's unauthorised and imprudent actions were the direct cause of death.

THE PROCEEDINGS

Lucio has been charged under Section 105 of the Seragio Penal Code for Culpable Homicide. The Prosecution contends that, having been furnished with clear knowledge of the lethal risk, Lucio acted with the requisite *mens rea*, proceeding with a dangerous intervention where safe alternatives existed, thereby causing Anthony Corleone's death.

SUMMARY OF ARGUMENTS

1. WHETHER THE ACCUSED IS GUILTY OF CULPABLE HOMICIDE UNDER SECTION 105 OF THE SPC, HAVING ACTED WITH KNOWLEDGE AND CAUSED DEATH?

It is most humbly submitted that the Accused is guilty under Section 105 Part II of the SPC. His requisite *mens rea* of knowledge is irrefutably established by the explicit, repeated warnings that interference with the life-support transmitter risked fatal cardiac arrest. By proceeding with an unauthorised repair, devoid of schematics, certification, or requisite competence, he grossly deviated from the standard of care expected of a reasonable technician. This very intervention was the *causa causans* of death, his induced short circuit directly precipitating the fatal cardiac arrest. Such conscious disregard of a known, lethal risk transforms his conduct from mere negligence into culpable homicide.

2. WHETHER THE DEFENCE OF ACCIDENT UNDER SECTION 18 IS AVAILABLE TO THE ACCUSED?

It is most humbly submitted that the defence of accident is unequivocally unavailable. The Accused acted with full knowledge of the potentially fatal consequences, as explicitly warned by the victim's representative and the manufacturer's handbook. His act of prying open and manipulating a live, life critical medical device at an unauthorised facility, without technical documentation and in direct violation of prohibitive instructions, was performed with a conscious disregard for a known and lethal risk. This conduct constitutes gross negligence and recklessness, not a lawful act performed with proper care and caution. The resultant death was the direct and foreseeable materialisation of that very risk, not a mere accident."

3. WHETHER THE DEFENCE OF CONSENT UNDER SECTION 26 IS AVAILABLE TO THE ACCUSED?

It is most humbly submitted that the defence fails as consent was expressly conditional on external repair; the Accused vitiated this by manipulating internal circuitry. Furthermore, the act lacked "good faith," as proceeding on a live medical device without authorisation or documentation constitutes a gross failure of "due care." Finally, the Accused's knowledge that failure was likely to cause death, combined with public policy against unauthorised intervention in life-critical systems, explicitly precludes Section 26 protection.

WRITTEN PLEADINGS

1. WHETHER THE ACCUSED IS GUILTY OF CULPABLE HOMICIDE UNDER SECTION 105 OF THE SPC, HAVING ACTED WITH KNOWLEDGE AND CAUSED DEATH?

¶1. The Accused is charged under Section 105 of the Seragio Penal Code, 2021 ("SPC"), [1] pari materia with Section 304 of the Indian Penal Code ("IPC").[2] Section 105 Part II covers acts done with knowledge of likely death, absent intention. It is submitted that the Prosecution has established this requisite mens rea beyond reasonable doubt. Unlike simple negligence, the Accused acted in defiance of explicit, repeated warnings regarding the intervention's fatal nature. When an accused proceeds despite cognisance that an act carries a risk of death, the law imputes the "knowledge" required for Culpable Homicide.

1.1. THAT THE EXPLICIT WARNINGS TRANSFORMED GENERAL RISK INTO ACTUAL "KNOWLEDGE" OF PROBABILITY

1.1.1. THAT THE WARNING COMMUNICATED PROBABILITY, NOT MERE POSSIBILITY

¶2. The Prosecution relies on *State of Andhra Pradesh v. Rayavarapu Punnayya*, establishing that "likely" in Section 105 Part II SPC (Section 304 Part II IPC) implies probability, not mere possibility.[3] The present facts satisfy this threshold.

¶3. PW-1's warning was not a vague caution but a specific alert identifying a precise causal chain: interference leads to death. PW-1 explicitly stated: *"Any malfunction or prolonged disconnection could lead to cardiac failure or even sudden cardiac arrest".* [4] This communicates a probable consequence, mirroring *Empress v. Gonesh Doobey*, where a snake charmer placing a venomous snake on a boy was held to possess knowledge that the act was "so imminently dangerous that it must, in all probability, cause death".[5] Just as the venomous nature of the snake provided the "knowledge" in *Doobey*, the explicit warning

[1] Seragio Penal Code, 2021, s. 105.
[2] Indian Penal Code, 1860, s. 304; Seragio laws stated to be pari materia with Indian laws (Moot Proposition, Notes for Counsel).
[3] *State of Andhra Pradesh v. Rayavarapu Punnayya*, 1976 SCC OnLine SC 316, ¶ 16.
[4] Statement of PW-1, p. 19, ¶ 16.
[5] *Empress v. Gonesh Doobey*, 1879 SCC OnLine Cal 101, at 581-582.

regarding the "life-critical" nature of the device provided the requisite knowledge to the Accused here.

1.1.2. THAT THE WORD "COULD" IN CONTEXT COMMUNICATES PROBABILITY, NOT REMOTE POSSIBILITY

¶4. In the context of dangerous instrumentalities, a warning that an act "could" cause death identifies substantial risk, not remote contingency. In *State v. Sanjeev Nanda*, Section 304 Part II applied where the accused knew his act "might" cause injury likely to cause death.[6] The Hon'ble Court held that knowledge of the consequences can be inferred from the nature of the act and the attendant circumstances.

¶5. The Patient Handbook reinforced oral warnings: *"DO NOT OPEN OR INTERFERE WITH INTERNAL COMPONENTS. DEVICE INTEGRITY IS ESSENTIAL TO CARDIAC LIFE SUPPORT".* [7] The word "Essential" implies device integrity is a non-negotiable prerequisite for life. A technician with 15 years of experience,[8] warned that intervention "could cause cardiac arrest," understands this to mean: "If I fail, the patient will probably die". This specific risk calculation distinguishes *Juggankhan v. State of M.P.*, where the accused acted in ignorance; [9] here, the Accused's proceeding constituted conscious disregard of known, probable danger.

1.1.3. THAT THE ACCUSED UNDERSTOOD AND ACKNOWLEDGED THE WARNING

¶6. The Accused possessed actual, not constructive, knowledge. The record confirms he *"listened attentively"* to PW-1, *"appeared to understand the seriousness,"*[10] and read the *Patient Handbook* shown to him.[11]

¶7. In *Sushil Ansal v. State through CBI*, the Hon'ble Supreme Court held cinema owners knowing of safety norms deviations were not liable for the deaths of patrons because they were not aware those deviations heightened the risk to life.[12] Contrastingly, the Accused was explicitly warned his intervention "could cause cardiac arrest". This bridges the *Sushil Ansal* evidentiary gap: while the Ansals were negligent regarding unappreciated risks, the

[6] *State v. Sanjeev Nanda*, 2012 SCC OnLine SC 582, ¶ 42.
[7] Exhibit 1 (Patient Handbook), 'Warning Signs' p. 14.
[8] Statement of DW-1, p. 21, ¶ 3.
[9] *Juggankhan v. State of M.P.*, 1964 SCC OnLine SC 347, ¶ 11.
[10] Statement of PW-1, *Supra note 4.*
[11] Moot Proposition, Statement of Facts, p. 4–5, ¶17–19; also DW-1, p. 21–22, ¶6.
[12] *Sushil Ansal v. State through CBI*, 2014 SCC OnLine SC 206.

Accused defied a known, likely fatal consequence, establishing the *mens rea* for Culpable Homicide.

1.1.4. THAT THE ACCUSED'S POST-INCIDENT CONDUCT CONFIRMS PRIOR KNOWLEDGE

¶8. The Accused's state of mind is further illuminated by his immediate reaction to the short circuit. He was *"visibly shocked and concerned"* and stated: *"I thought if I didn't reconnect the display, it could damage the device before the backup reaches"*.[13]

¶9. This statement is an admission that the Accused was actively calculating the probability of device failure *before* he acted.[14] He weighed the risk of immediate intervention against the risk of delay. As held in *Alister Anthony Pareira v. State of Maharashtra*, a person is presumed to know the natural and likely consequences of his acts.[15] The Accused's panic confirms that he did not think death was impossible; he gambled that he could avoid it.

1.2. THAT THE CHARACTERISATION OF "INTERNAL COMPONENTS" IS FACTUALLY AND LEGALLY UNAMBIGUOUS

1.2.1. THAT THE "INTERNAL COMPONENTS" PROHIBITION OBJECTIVELY ENCOMPASSED THE IMPUGNED ACT AND CONVEYED FATAL RISK

¶10. The display connector is integral to the device's internal architecture. DW-1 confirmed it sits *"at the edge of the circuit board,"*[16] the fundamental component housing essential processing units. By the Accused's own admission, he opened the casing specifically to access this connector.[17] This directly contravenes the Patient Handbook, which issues a blanket prohibition: "DO NOT OPEN OR INTERFERE WITH INTERNAL COMPONENTS".[18] Since the connector is attached to the motherboard, the Accused's act of breaching the casing to access it violated this absolute prohibition.

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[13] Statement of DW-1, p. 22, ¶ 11.

[14] Sarch, Alexander F., *Knowledge, Recklessness and the Connection Requirement Between Actus Reus and Mens Rea*, 120 Penn. St. L. Rev. 1, 40-44 (2015), https://www.pennstatelawreview.org/wp-content/uploads/2017/11/Offprint__Sarch_-Knowledge-Recklessness_FINAL.pdf, (explaining that a defendant's knowledge is causally active in producing conduct when, in the circumstances, it should have triggered an overriding motivating reason to refrain from acting; the accused's admitted calculation of risk confirms his knowledge was not latent but actively engaged in his decision-making process).

[15] *Alister Anthony Pareira v. State of Maharashtra*, 2012 SCC OnLine SC 36, ¶¶78–79 (presumption of knowledge of natural/likely consequences).

[16] Statement of DW-1, p. 23, ¶ 17.

[17] Moot Proposition, Statement of Facts, p. 5, ¶ 20; Statement of PW-1, p. 19, ¶ 19

[18] Exhibit 1, *Supra note 7.*

1.2.2. THAT THE UNAUTHORISED INTERVENTION WAS THE *CAUSA CAUSANS* OF DEATH

¶11. The Accused's physical interference with these internal components constituted the *causa causans* (immediate, efficient cause) of the victim's death. As held by the Hon'ble Supreme Court in *Sushil Ansal v. State through CBI*, criminal liability attaches to the actor whose conduct constitutes the "last link in the chain of causation," distinguishing it from a mere *causa sine qua non*.[19]

¶12. While the victim's fall at the mall may have damaged the screen (*causa sine qua non*), the record establishes that the device remained stable and the patient alive until the moment of the Accused's intervention. It was the specific act of introducing tools into the live circuitry that precipitated the short circuit, leading immediately to cardiac arrest. By actively intervening on a stable patient, the Accused broke the status quo and became the direct author of the fatal consequence.[20]

1.2.3. THAT THE WARNING PROHIBITED OPENING THE CASING *AB INITIO*

¶13. The prohibition in the *Patient Handbook* is conjunctive and absolute: *"DO NOT OPEN OR INTERFERE"*.[21] This establishes two distinct forbidden acts: (1) Opening the device, and (2) Interfering with internal components. The Accused violated the first prohibition the moment he pried open the casing. This act alone constituted a breach of the safety protocol known to him. The intent of such a warning on a life-support device is manifest: maintaining the sealed integrity of the unit is essential to its function. By opening the casing, the Accused created the very risk (exposure of internal circuitry to foreign tools and environmental variables) that the warning was to prevent.

1.2.4. THAT THE ACCUSED'S FACILITY LACKED AUTHORISATION TO TOUCH THE DEVICE

¶14. The Accused's intervention was rendered culpable by his complete lack of authorisation. Planet Electronics is *"not a Medtech LLC certified service centre,"*[22] and the Patient Handbook explicitly directs users to contact certified hospitals in emergencies.[23] In

[19] *Sushil Ansal*, *Supra* note 12, ¶ 125.
[20] Bansal, Daniel James, *Causation in Criminal Law* (University of Birmingham), at 17, 27, 36-37 (2020), https://etheses.bham.ac.uk/id/eprint/11085/1/Bansal2020PhD.pdf.
[21] Exhibit 1, *Supra note 7.*
[22] Queries & Clarifications, Q50/A50.
[23] Exhibit 1, *Supra note 7.*

Poonam Verma v. Ashwin Patel, the Hon'ble Supreme Court held that a professional practicing in a system in which they are not qualified is guilty of negligence *per se*.[24] Similarly, the Accused trespassed into the prohibited field of proprietary medical device repair without technical documentation or manufacturer authorisation.[25]

1.3. THAT PROFESSIONAL TRAINING IMPUTES KNOWLEDGE OF ELECTRICAL HAZARDS TO LIFE-CRITICAL EQUIPMENT

1.3.1. THAT THE ACCUSED'S 15 YEARS OF EXPERIENCE CREATES IMPUTED KNOWLEDGE

¶15. The Accused is not a layperson acting in ignorance.[26] The law attributes a higher standard of knowledge to individuals possessing specialised skills. In *Sekar v. State of Tamilnadu*, the Hon'ble High Court held that a shot-fire license holder, by virtue of his specialised training, is attributed with knowledge of the dangerous consequences of transporting explosives that a commoner might lack.[27] Similarly, the Accused's extensive experience imputes him with the specific technical knowledge that introducing conductive tools into the exposed circuitry of a powered-on device carries a high probability of causing a short circuit.

¶16. The record establishes that the device was in a "live" or powered-on state during the intervention. PW-1 explicitly requested the repair be performed "without shutting it down,"[28] and the Accused agreed to this condition.[29] The Accused's decision to proceed with invasive repairs on a live life-support device, rather than powering it down, shows a conscious disregard for a known electrical hazard. This technical "knowledge" of the probable consequence (short circuit leading to failure) satisfies the *mens rea* requirement of Section 105 Part II.

[24] *Poonam Verma v. Ashwin Patel & Ors.*, 1996 SCC OnLine SC 237, ¶¶ 41, 42-44, 49.
[25] Moot Proposition, p. 5, ¶ 20; Statement of PW-1, *Supra note 4*; Queries & Clarifications, *Supra note 22*; Exhibit 1, *Supra note 7.*
[26] Statement of DW-1, p. 21, ¶ 3.
[27] *Sekar v. State of Tamilnadu*, Crl. R.C. No. 1661 of 2008 (Madras High Court), decided on 19-08-2009, ¶¶ 10-12.
[28] Statement of PW-1, *Supra note 4*, ¶ 15.
[29] Statement of DW-1, *Supra note 8*, ¶ 9; Statement of PW-1, *Supra note 4*, ¶ 18.

1.3.2. THAT THE "REASONABLE TECHNICIAN" STANDARD REQUIRES REFUSAL TO INTERVENE

¶17. The culpability of the Accused must be measured against the objective standard of a reasonable technician in his position. A reasonable professional, faced with a proprietary life-critical device, an explicit warning of fatal consequences, no technical schematics,[30] and a lack of manufacturer authorisation, will unequivocally refuse to intervene.

¶18. By choosing to proceed despite these deficits, the Accused engaged in conduct that fits the definition of "reckless" as cited by the Hon'ble Supreme Court in *Sanjeev Nanda*. The Court defined reckless conduct as a "gross deviation from what a reasonable person would do," characterised by the creation of a substantial and unjustifiable risk and a conscious disregard for that risk.[31] The Accused did not merely make a mistake; he deviated grossly from the standard of care expected of a professional dealing with life-support equipment. This conscious deviation, coupled with his technical knowledge of the risks involved, constitutes the "knowledge" that his act was likely to cause death.

1.4. THAT THE PRESENCE OF "WARNING" TRANSFORMS THE ACT FROM NEGLIGENCE TO CULPABLE HOMICIDE

1.4.1. THAT KNOWLEDGE DISTINGUISHES THIS CASE FROM *JUGGANKHAN* AND *SUKAROO KABIRAJ*

¶19. The distinction between negligence and culpable homicide lies in "knowledge".[32] In *Juggankhan* and *Sukaroo Kabiraj*, the accused were convicted only of negligence because they acted in ignorance of their intervention's lethal nature.[33&34] It is submitted that the Accused stands on a fundamentally different footing. He did not act in ignorance; he was explicitly warned that his intervention "could cause cardiac arrest and death". [35] This specific communication removes the shield of ignorance and satisfies the "knowledge" requirement of Section 105 Part II.

[30] Moot Proposition, Statement of Facts, p. 5, ¶ 20; Statement of PW-1, Supra note 4, ¶ 19.
[31] *Sanjeev Nanda*, *Supra* note 6, ¶ 38.
[32] *Supra note 14*
[33] *Juggankhan v. State of M.P., Supra note 9, ¶ 11-12.*
[34] *Sukaroo Kabiraj v. The Empress,* 1887 SCC OnLine Cal 3, p. 568-569.
[35] Statement of PW-1, *Supra note 4*, ¶ 16.

1.4.2. THAT THE "DANGEROUS AGENCY" ANALOGY APPLIES: *GONESH DOOBEY*

¶20. The factual matrix is legally analogous to *Empress v. Gonesh Doobey*, where a snake charmer placed a venomous snake on a boy's head. The Court convicted him of Culpable Homicide (Section 304) rather than negligence because, while he had no intention to kill, he possessed the knowledge that the act was so imminently dangerous that it must, in all probability, cause death.[36]

¶21. In the present case, the Accused engaged with the live circuitry of a life-support device. His use of rubber-tipped tools[37] does not negate culpability; it operationally confirms his awareness of the hazard. Insulated tools are industry-recognised safeguards used only when a technician knows the circuit is live and dangerous. By manipulating a powered, proprietary life-support system, the Accused knowingly engaged with a lethal agency. The explicit warning of 'cardiac arrest' established the risk; his reliance on tweezers was a reckless gamble against a known fatal outcome, not a good-faith safety measure.

1.4.3. THAT "KNOWLEDGE" ELEVATES LIABILITY

¶22. As established in *State of Gujarat v. Haidarali Kalubhai*,[38] Section 304-A applies only where the act does not amount to culpable homicide. However, where the rash or negligent act is preceded with the knowledge that such act is likely to cause death, Section 304 Part II IPC [Section 105 Part II SPC] may be attracted".[39] The explicit warnings provided to the Accused furnished precisely this knowledge.

1.5. THAT *JACOB MATHEW'S* FRAMEWORK DOES NOT PROTECT UNAUTHORISED INTERVENTION

1.5.1. THAT PROFESSIONAL IMMUNITY IS LIMITED TO ACTS WITHIN COMPETENCE

¶23. The standard of professional negligence established in *Jacob Mathew v. State of Punjab* confers protection upon professionals for honest errors of judgment only when they exercise skill within their discipline.[40] This protection is inapplicable where a professional acts wholly outside their authorised field. The Accused stands in the position of the practitioner in *Poonam Verma*, not the doctor in *Jacob Mathew*. He is a consumer

[36] *Gonesh Doobey*, *Supra* note 5.
[37] Statement of DW-1, *Supra note 8*, ¶ 11.
[38] *State of Gujarat v. Haidarali Kalubhai*, 1976 SCC OnLine SC 36, ¶ 10.
[39] *Alister Anthony Pareira*, *Supra* note 15, ¶ 47
[40] *Jacob Mathew v. State of Punjab*, 2005 SCC OnLine SC 1137, ¶ 25.

electronics technician who trespassed into the prohibited field of proprietary medical device repair. He possessed no certification from MedTech LLC,[41] no technical schematics,[42] and no training on the specific device. Just as a homeopath cannot claim "professional judgment" when prescribing allopathic drugs, a technician cannot claim "honest error" when servicing a life-support device he is neither authorised nor competent to touch.

1.5.2. THAT "GOOD FAITH" IS LEGALLY IMPOSSIBLE WITHOUT DUE CARE

¶24. The statutory definition of "Good Faith" under Section 52 of the IPC requires an act to be done with *"due care and attention"*.[43] In *Sushil Ansal*, the Hon'ble Supreme Court held that where a risk is heightened (such as by fire safety deviations), the degree of care required increases proportionately.[44]

¶25. It is submitted that proceeding to open a life-critical medical device without a service manual, without schematics,[45] and in direct contravention of the manufacturer's *Patient Handbook* prohibition to *"NOT OPEN OR INTERFERE,"*[46] constitutes a total abdication of "due care". A professional exercising due care would, upon reading the warning *"DEVICE INTEGRITY IS ESSENTIAL,"* refuse the repair and refer the patient to an authorised centre.

1.5.3. THAT NO NECESSITY JUSTIFIED THE INTERVENTION: SAFE ALTERNATIVES EXISTED

¶26. The Accused cannot claim his actions were necessitated by an emergency or a "Catch-22" scenario. The record confirms that safe, authorised alternatives existed. MedTech LLC maintained facilities within Savoca city, located approximately 40–45 minutes away.[47] Given that the device was stable upon arrival at the shop, the Accused had the option to refer the patient to these certified specialists or wait for the backup transmitter. By choosing instead to attempt an unauthorised repair on a live device, the Accused crystallised a risk that was otherwise only potential. This choice was made not out of necessity, but out of a reckless overconfidence that disregarded the fatal probabilities known to him.

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[41] Queries & Clarifications, *Supra note 22.*
[42] Moot Proposition, Statement of Facts, p. 5, ¶ 20.
[43] Indian Penal Code, 1860, s. 52.
[44] *Sushil Ansal*, *supra* note 13, ¶ 118.
[45] Statement of Facts, *Supra note 41.*
[46] Exhibit 1, *Supra note 7*.
[47] Queries & Clarifications, Q9/A9, Q10/A10.

1.6. THAT TECHNICAL TESTIMONY CONFIRMS THE INHERENT DANGER OF THE INTERVENTION

1.6.1. THAT THE GENERAL PROBABILITY OF REPAIR SUCCESS IS IRRELEVANT TO THE SPECIFIC RISK

¶27. The testimony of DW-1 regarding the general safety of display repairs[48] must be contextualised against the specific facts of this case. While DW-1 stated that damage during repair is *"not that common,"*[49] this statement refers to the general probability of failure in standard consumer electronics repairs. It is submitted that general statistics regarding the failure rate of consumer electronics are legally irrelevant when applied to a proprietary life-support device. The specific warning communicated to the Accused that *"interference could cause cardiac arrest and death,"*[50] putting him on notice that this device possessed a unique risk profile distinct from standard electronics. Knowledge of this specific, elevated risk overrides any general assumption of safety derived from repairing non-critical devices. Where a specific warning of fatality exists, reliance on general safety rates constitutes a conscious disregard of that specific warning.

1.6.2. THAT ACTING WITHOUT VERIFIABLE SAFETY, DESPITE WARNINGS, CONSTITUTE THE KNOWLEDGE OF LIKELY DEATH

¶28. Technical evidence confirms safe repair was not verifiably possible. DW-1 admitted: *"I cannot say if it is possible to access and reconnect display without touching or affecting nearby circuits for the Transmitter"*.[51] This establishes that even experienced technicians could not guarantee non-interference. Lacking schematics like DW-1,[52] the Accused proceeded without objective basis to believe repair was safe. Acting blindly regarding safety, despite warnings that failure meant death, constitutes a gross deviation establishing the "knowledge of likelihood" required for Culpable Homicide.[53]

¶29. The Accused's knowledge is irrefutably established by explicit, repeated warnings. Causation is proven by the immediate consequence of violating them: the induced short circuit was the *causa causans* of cardiac arrest. By choosing to proceed and materialising

[48] Statement of DW-1, *Supra note 8*, ¶ 17.
[49] *Id*.
[50] Statement of PW-1, *Supra note 4*, ¶ 16.
[51] Statement of DW-1, *Supra note 8*, ¶ 19.
[52] Statement of Facts, *Supra note 42.*
[53] *Supra note 20.*

the precise risk warned against, his conduct transcends negligence to Culpable Homicide. The charge under Section 105 Part II stands conclusively established.

2. WHETHER THE DEFENCE OF ACCIDENT UNDER SECTION 18 IS AVAILABLE TO THE ACCUSED?

2.1. THAT SECTION 18 OF THE SPC DOES NOT EXTEND PROTECTION TO ACTS PERFORMED WITH KNOWLEDGE OF LIKELY FATAL CONSEQUENCES

¶30. The defence of accident under Section 18 of the Seragio Penal Code, 2021 (hereinafter "SPC")[54] is a limited exception to criminal liability. It shields acts that are truly accidental, devoid of criminal intent or knowledge. To invoke this defence, an accused must satisfy four requirements: (i) the act must result from accident or misfortune; (ii) complete absence of criminal intention or knowledge; (iii) the act must be lawful, performed in a lawful manner, by lawful means; and (iv) done with proper care and caution. The burden of proving these circumstances lies upon the Accused.

¶31. The record establishes that the Accused failed to discharge this burden on every count. The Accused possessed actual knowledge of fatal risks, explicitly communicated through warnings from PW-1 and the manufacturer's handbook. Despite this knowledge, the Accused pried open a life-sustaining medical device and manipulated its circuit board components in direct violation of manufacturer prohibitions, at an unauthorised facility lacking technical documentation, while the device remained powered on.

¶32. Where an accused acts with actual knowledge of fatal consequences, in direct violation of express safety instructions, without authorisation or proper resources, and in total disregard of safety protocols, the resulting death cannot be characterised as accidental. It is culpable conduct attributable to gross negligence and recklessness. The defence of accident is legally unavailable, and conviction under Section 105 Part II of the SPC must be sustained.[55]

[54] Seragio Penal Code, 2021, § 18.
[55] Seragio Penal Code, 2021, § 105 pt. II.

2.1.1 THAT THE STATUTORY FRAMEWORK OF SECTION 18 EXCLUDES ACTS DONE WITH KNOWLEDGE

¶33. Section 18 SPC shields acts done "without any criminal intention or knowledge".[56] In *Tunda v. Rex*, the Court held a wrestling injury was accidental because there was no knowledge that death would result.[57] Contrastingly, the Accused here possessed actual knowledge: PW-1 explicitly warned that disconnection could lead to cardiac arrest,[58] and the Accused admitted understanding the seriousness after reading the handbook.[59] This actual knowledge distinguishes the present case from the pure accident in *Tunda*.

2.1.2 THAT KNOWLEDGE OF RISK NEGATES THE DEFENCE OF ACCIDENT

¶34. In *Emperor v. Omkar Rampratap* and *Syad Akbar*[60&61] courts held that Section 18 applies only where there is a complete absence of knowledge that the act might cause harm. Furthermore, in *Cherubin Gregory*, the accident plea was rejected where the accused created a dangerous condition (naked wire) without proper care.[62] The Accused's decision to proceed despite warnings constitutes a conscious disregard of known risks, mirroring *Cherubin Gregory*, and is antithetical to "proper care and caution."

2.2 THAT THE ACT WAS NOT PERFORMED IN A "LAWFUL MANNER" AS REQUIRED UNDER SECTION 18

¶35. The Patient Handbook categorically prohibits opening internal components.[63] Section 18 SPC requires the act be done "in a lawful manner";[64] in *Jacob Mathew*, the Supreme Court held that deviation from settled safety standards negates any claim of acting lawfully.[65] Applying this, the Accused's act of opening the device in direct violation of manufacturer safety instructions designed to prevent death cannot be characterised as being done "in a lawful manner".

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[56] Statement of Facts, *Supra note 42.*
[57] *Tunda v. Rex, 1949 SCC OnLine All 161.*
[58] Statement of PW-1, *Supra note 4.*
[59] Exhibit-1, *Supra note 7.*
[60] *Emperor v. Omkar Rampratap, (1902) 4 Bom LR 679.*
[61] *Syad Akbar v. State of Karnataka, (1980) 1 SCC 30, ¶ 26.*
[62] *Cherubin Gregory v. State of Bihar*, AIR 1964 SC 205.
[63] Statement of PW-1*, Supra note 4.*
[64] *Supra note 54.*
[65] *Jacob Mathew, Supra note 40.*

¶36. The requirement that an act be done "by lawful means" necessitates that the actor possess legal authorisation and competence. The Patient Handbook explicitly states users should contact their primary cardiologist or visit the nearest MedTech LLC certified hospital or service centre in case of emergency.[66] Planet Electronics was not a MedTech LLC certified service centre; the Accused had no authorisation to repair the AtriaLink System and acted as a general electronics technician outside the permitted sphere.

¶37. In *Poonam Verma v. Ashwin Patel* [67], the Hon'ble Supreme Court held that one who undertakes a professional act without proper qualification/authorisation is culpable for criminal rashness, having knowingly acted beyond competence, and cannot claim legal protection when harm results. The Accused attempted to repair a proprietary, life-sustaining medical device at a facility lacking manufacturer certification. He had no authorisation from MedTech LLC, no specific training on the AtriaLink System, and no access to specialised tools.

2.3 THAT THE ACT WAS NOT DONE WITH "PROPER CARE AND CAUTION" AS REQUIRED UNDER SECTION 18

¶38. Section 18 SPC requires the act be done "with proper care and caution". This imposes an objective standard: the actor must exercise the degree of care a reasonable person in the same circumstances would exercise.

¶39. In *Dr. Suresh Gupta v. Government of NCT Delhi*[68], the Hon'ble Supreme Court held that professionals must exercise the degree of care competent to their task. The Accused violated this by attempting repair without technical schematics or internal layout diagrams.[69] As held in *Kusum Sharma*, performing procedures without proper diagnostic information constitutes negligence.[70] A reasonable technician would recognise that proceeding blindly poses unacceptable risk; the Accused's failure to stop constitutes a lack of due care.

¶40. The Accused knew the AtriaLink System was proprietary and could not locate technical documentation. This absence should have served as a stop sign. A reasonable technician

[66] Exhibit-1, Supra note 7.
[67] *Poonam Verma, Supra note 24, ¶ 16*.
[68] *Dr. Suresh Gupta v. Govt. of NCT of Delhi*, (2004) 6 SCC 422.
[69] Statement of Facts, *Supra note 42*.
[70] *Kusum Sharma v. Batra Hospital & Medical Research Centre*, (2010) 3 SCC 480.

exercising proper care would have recognised that proceeding blindly, without technical documentation, posed unacceptable and unquantifiable risk to the patient's life.

¶41. The requirement of "proper care and caution" is further violated by the Accused's decision to manipulate internal components while the device remained powered on.[71] In *Alister Anthony Pareira v. State of Maharashtra*,[72] the Hon'ble Supreme Court held that reckless conduct is characterised by creation of a substantial and unjustifiable risk and conscious disregard for that risk. Where a professional creates a risk that a reasonable professional would not create, and that risk materialises in harm, the professional cannot claim protection of defences based on accident or good faith.

¶42. The Accused's decision to manipulate internal components of a live life-support device, knowing a short circuit could cause device failure and that device failure could cause cardiac arrest, constitutes reckless conduct. A reasonable technician would have either refused the repair or insisted on powering down the device before opening it.

2.4 THAT THE CAUSAL CONNECTION BETWEEN THE ACCUSED'S ACT AND DEATH PRECLUDES THE DEFENCE OF ACCIDENT

¶43. Even if other elements of Section 18 were satisfied, which is denied, the defence would still be unavailable because death was not the result of accident but rather the direct and foreseeable consequence of the Accused's intervention. "Accident" implies an unforeseen and unintended event occurring despite exercise of proper care. Where death is the natural and probable consequence of a known risk that materialises, it cannot be characterised as accidental.

¶44. In *Sushil Ansal v. State through CBI*,[73] the Hon'ble Supreme Court distinguished between accidental consequences and foreseeable consequences of risky conduct. The Court held that an accident is an event occurring despite exercise of reasonable care and without knowledge that such event was likely. Where the actor knows a particular consequence is likely and proceeds regardless, the occurrence of that consequence is not accidental but rather the materialisation of a known risk.

¶45. The Accused was explicitly warned that interference with internal components could cause device malfunction, leading to cardiac arrest and death. The short circuit occurring

[71] Statement of PW-1, *Supra note 4*, ¶ 15.
[72] *Alister Anthony Pareira, Supra note 15.*
[73] *Sushil Ansal, Supra note 12.*

during the Accused's manipulation was precisely the type of device malfunction warned against. The cardiac arrest and death that followed were the exact consequences PW-1 had warned about.

¶46. The causal chain is unbroken and direct: the Accused opened the device casing despite warnings; manipulated internal components; a short circuit occurred; the device failed; the pacemaker stopped receiving signals; cardiac arrest ensued; death resulted. Each link was foreseeable based on the warnings provided. The death was not an unforeseeable accident but the materialisation of the precisely warned-against risk.

¶47. In *Abdul Waheed Khan v. State of Andhra Pradesh*,[74] the Hon'ble Supreme Court held that where an accused commits an act knowing it to be dangerous and likely to cause death, and death results from that act, the accused is the proximate cause regardless of any intervening factors. The accused cannot break the chain of causation by pointing to the inherent fragility of the victim or complexity of the causal mechanism, where the accused's act remains the substantial factor bringing about death.

¶48. In *Anda Hanmantha Rao v. State of Andhra Pradesh*,[75] the Hon'ble Supreme Court held that under the thin skull rule, an accused must take his victim as he finds him. Where the accused inflicts an injury that would not have been fatal to a healthy person but proves fatal due to the victim's pre-existing condition, the accused is still liable for causing death.

¶49. The fact that Anthony's survival depended on continuous functioning of the AtriaLink System does not absolve the Accused. The Accused knew the device was essential to cardiac life support, knew device failure could cause cardiac arrest and death, and caused device failure through his intervention. The death was the direct consequence of his act, not an accident.

[74] *Abdul Waheed Khan v. State of Andhra Pradesh*, (2002) 7 SCC 175.
[75] *Anda Hanmantha Rao v. State of Andhra Pradesh*,(2003) 10 SCC 121.

3. WHETHER THE DEFENCE OF CONSENT UNDER SECTION 26 IS AVAILABLE TO THE ACCUSED?

3.1 THAT CONSENT UNDER SECTION 26 WAS EXPRESSLY CONDITIONAL AND WAS EXCEEDED.

¶50. *Section 26 of the SPC*[76] provides limited protection only where the act is not intended or known to be likely to cause death, and where consent is given to the specific act performed in good faith with due care and attention. The consent given by PW-1 was expressly conditional, limited to screen repair without internal component interference. The Accused violated this condition by opening the casing and manipulating circuitry. Additionally, the act lacked requisite good faith, demonstrated by absence of technical documentation, unauthorised facility use, manipulation of live circuits, and violation of manufacturer safety instructions.

¶51. The Accused possessed actual knowledge that device failure would likely cause cardiac arrest and death, placing his act outside statutory protection of Section 26. Public policy precludes consent as defence to unauthorised intervention in life-critical medical devices. The consent defence is wholly inapplicable, and conviction under Section 105 Part II of the SPC is warranted.

3.1.1 THAT SECTION 26 REQUIRES CONSENT TO THE ACTUAL ACT PERFORMED

¶52. *Section 26* establishes a defence based on consent, subject to strict limitations; consent must match the act. The first fundamental limitation is that consent must be given to the specific act actually performed, not to a different or more limited act.

¶53. In *Queen v. Poonai Fattemah*, the High Court rejected a snake charmer's defence of consent where victims allowed a bite believing the snake was harmless, but it was actually venomous. [77] The Court held that consent is invalid if there is a material difference between the act consented to and the act performed; consent must be to the actual act, not a misrepresented one.

[76] *Seragio Penal Code, 2021*, § 26.
[77] *Queen v. Poonai Fattemah 12 W.R. Crim. Rul., 7.*

3.1.2. THAT THE ACCUSED EXCEEDED THE EXPRESSLY LIMITED SCOPE OF CONSENT TO SCREEN REPAIR WITHOUT INTERNAL INTERFERENCE

¶54. PW-1 explicitly limited consent to screen repair without *any* internal interference, warning that a malfunction risked cardiac arrest. The Accused accepted these terms, stating he could repair the display without touching internal parts, thereby establishing the specific parameters of consent.[78]

¶55. DW-1 admits on cross-examination that the display was on the front panel and the connector was along the edge of the board, near other components. When asked whether it is possible to access and reconnect display without touching nearby circuits, DW-1 admits he cannot say if it is possible for the Transmitter. This admission highlights the impossibility of separating screen repair from internal interference once the device is opened.[79]

¶56. In *Tuka Ram v. State of Maharashtra*, the Supreme Court held that performing an act in violation of express conditions vitiates consent. [80] The Accused cannot argue his actions were substantially similar to the consented repair, as the consent was expressly conditional on "no interference". By violating this condition, the consent is vitiated and provides no defence.

3.2 THAT SECTION 26 REQUIRES THE ACT TO BE PERFORMED IN "GOOD FAITH" WHICH NECESSITATES "DUE CARE AND ATTENTION"

¶57. Section 26 must be read with Section 52 SPC, which requires "due care and attention".[81] In *Sukaroo Kabiraj* and *Juggankhan*, the Hon'ble Supreme Court held that good faith in life-critical matters requires a high degree of care commensurate with the risk.[82& 83] The Accused's decision to manipulate internal components without technical documentation demonstrates a lack of due care that vitiates any claim of good faith.

¶58. The Accused proceeded to open and manipulate internal components of the AtriaLink System without access to technical documentation, schematics, or service protocols. Before

[78] *Kusum Sharma, Supra note 70.*
[79] Moot Proposition, Statement of DW-1, p. 23, ¶ 19.
[80] *Tukaram Sitaram Gore v. State, 1970 SCC OnLine Bom 30*.
[81] *Seragio Penal Code, 2021*, § 52.
[82] Sukaroo Kabiraj, *Supra note 34.*
[83] *Juggankhan, Supra note 9.*

beginning repair, the Accused attempted to look up the device on his laptop but, given its proprietary nature, could not find any specific internal layout diagrams or service warnings online. A reasonable technician exercising due care would have recognised that absence of such documentation made safe repair impossible. The Accused's decision to proceed demonstrates lack of due care and attention that vitiates any claim of good faith.

3.3 THAT SECTION 26 DOES NOT PROTECT ACTS DONE WITH KNOWLEDGE THAT DEATH IS LIKELY TO RESULT

¶59. Section 26 SPC is expressly confined to acts (i) not intended to cause death or grievous hurt and (ii) not known to the doer to be likely to cause death or grievous hurt; the conjunctive "and" makes both conditions mandatory.

¶60. The statutory language draws a critical distinction: the word "likely" means "probable," not merely "possible". Where a person is explicitly warned that a particular act is likely (i.e., probably) to cause death and proceeds regardless, the person possesses the actual knowledge that Section 26 requires as a condition for the defence's unavailability. In the present case, the Accused was unambiguously warned by PW-1 that "any malfunction or prolonged disconnection could lead to cardiac failure or even sudden cardiac arrest".[84] The Patient Handbook similarly contained explicit warnings: "WARNING: DO NOT OPEN OR INTERFERE WITH INTERNAL COMPONENTS. DEVICE INTEGRITY IS ESSENTIAL TO CARDIAC LIFE SUPPORT".[85]

¶61. Given these warnings, and the Accused's acknowledgement of the device's seriousness after reading the handbook, the record establishes actual knowledge that device failure was likely to cause death, defeating Section 26. In *State of Andhra Pradesh v. Rayavarapu Punnayya*,[86] the Hon'ble Supreme Court held that where a person is explicitly warned of the likely consequences of an act and proceeds to commit that act, the person is deemed to have knowledge of those consequences. Actual knowledge can be established through evidence of warnings received and understood by the accused.

[84] Statement of PW-1, *Supra note 4.*
[85] Exhibit 1, *Supra note 18.*
[86] *Rayavarapu Punnayya, Supra note 3.*

3.4 THAT PUBLIC POLICY PRECLUDES CONSENT AS A DEFENCE TO UNAUTHORISED MEDICAL DEVICE INTERVENTION

¶62. Public policy independently bars the consent defence where the act involves unauthorised intervention in life-critical medical devices, which are governed by comprehensive regulatory frameworks to protect patient safety. In *R v. Brown*,[87] the House of Lords held that consent is not a defence to acts that violate public policy, even where the victim genuinely consents.

¶63. In *Common Cause v. Union of India*,[88] the Hon'ble Supreme Court affirmed that private consent cannot authorise acts implicating wider societal interests in health and safety; the State's interest in preserving life and public health can override individual autonomy where private consent would undermine regulatory frameworks protecting vulnerable populations.

¶64. Allowing consent here would hollow out medical device safety regulation: unauthorised technicians could evade liability for deaths caused by unauthorised repairs merely by procuring consent from patients or families, rendering the servicing framework meaningless.

¶65. In *Consumer Education and Research Centre v. Union of India*,[89] the Hon'ble Supreme Court recognised the State's compelling interest in regulating medical devices and healthcare services and held the State must protect citizens from providers lacking authorisation or competence; such regulatory requirements are public policy and cannot be waived by private agreement.

¶66. It is respectfully submitted that the consent defence under Section 26 SPC is unavailable on multiple independent grounds: (i) PW 1's consent was expressly conditional and was exceeded, (ii) the act lacked good faith as it was done without due care and attention, (iii) the Accused had actual knowledge that device failure was likely to cause death, and (iv) public policy bars consent to unauthorised medical device intervention; therefore the defence fails and conviction under Section 105 Part II SPC is warranted.

[87] *R v. Brown*, [1994] 1 AC 212.
[88] *Common Cause v. Union of India*, (2018) 5 SCC 1 ¶ 199.
[89] *Consumer Education and Research Centre v. Union of India*, (1995) 3 SCC 42.

PRAYER

"Wherefore, in light of the facts presented, arguments advanced, and authorities cited, it is most humbly prayed before that this Hon'ble Court be pleased to:

1. **CONVICT** the Accused, Lucio, for the commission of Culpable Homicide not amounting to Murder under Section 105 of the Seragio Penal Code, 2021;
2. **HOLD** that the Accused acted with the requisite knowledge, thereby satisfying the requirements of Section 105 of the BNS, 2023; and
3. **AWARD** a sentence commensurate with the gravity of the offence and the loss of human life, in the interest of justice.

And

Pass any such order, direction, or relief that this Hon'ble Court may deem fit and appropriate in the interests of justice, equity and good conscience.

All of which is humbly prayed.

Place: Savoca

Date: 13th February, 2026

URN: 1002

Counsels on behalf of the Prosecution