



Sri Guru Ram Das University of Health Sciences, Sri Amritsar

Department of Forensic Medicine & Toxicology

Theory	
Topics	Marks Distribution
A. Basic (Introduction, Legal Procedure and Autopsy Procedure, identification, Death, Changes after Death)	20
B. Clinical Forensic Medicine	35
C. State Medicine including Medical Jurisprudence (legal and Ethical aspect of Practice of Medicine) Forensic Biology & Serology including Recent Advances in Forensic Medicine	23
D. Toxicology	22
Total	100



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Guidelines for question paper as per the Medical Council of India, Competency Based Undergraduate Curriculum for Indian Medical Graduate.

Theory paper should include questions from core competencies and not from Non-Core Competency

BLUEPRINT OF THEORY PAPER

Sr. No.	Type	Explanation	Topics	Distribution of marks as per weightage
1.	MCQ		10 MCQs	10 X 1 = 10
2.	Long essay question	<ol style="list-style-type: none"> The question should pose a Clinical/ Practical problem to the students and require them to apply knowledge and integrate it with disciplines. Avoid giving one liner as questions. Avoid giving one liner as questions. The question stem should be structured and marking distribution should be provided. Use action verbs from higher domains as given in this document. 	Paper A (TWO Questions) From Core Competencies as per competency based undergraduate curriculum for the Indian Medical Graduate, VOLUME 1 <ol style="list-style-type: none"> Structured Question Case Based Question 	2 X 10= 20

3.	Short Notes	These provide opportunity to sample a wider content, albeit in a short time. The questions should be task oriented rather than 'Write a short note on xxx'. Preferably use verbs (as per List attached) in framing questions and structure them as far as possible	(8 Questions) From Core Competencies as per competency based undergraduate curriculum for the Indian Medical Graduate, VOLUME 1 Marks for each part should be indicated separately	8 X 5 = 40
4.	Reasoning Questions	These provide excellent opportunities for testing integration, clinical reasoning and analytic ability of the student	(3 Questions) From Core Competencies as per competency based undergraduate curriculum for the Indian Medical Graduate, VOLUME 1	3 X 5 = 15
5.	Applied Questions	Questions on applied aspect	(3 Questions) From Core Competencies as per competency based undergraduate curriculum for the Indian Medical Graduate, VOLUME 1	3 X 5 = 15

(Total Marks Theory Paper 100)

DIVISION OF TOPICS

**Blueprinting in knowledge domain
(Representative example only. Actual figures may vary with the subject and phase)**

Level	Topic A	Topic B	Topic C	Topic D	Total
Knowledge	1	2	1	1	5(20%)
Comprehension	1	1	1	2	5(20%)
Application	2	1	1	1	5(20%)
Analysis	1	1	2	2	6(24%)
Synthesis		1		1	2(8%)
Evaluation	1		1		2(8%)
Total	6(24%)	6(24%)	6(24%)	7(28%)	25(100%)

Verbs in various levels in Knowledge domain (Bloom's taxonomy)

Knowledge	Define, Describe, Draw, Find, Enumerate, Cite, Name, Identify, List, label, Match, Sequence, Write, State, Choose, Indicate, isolate, Order, Recognize, Underline
Comprehension	Discuss, Conclude, Articulate, Associate, Estimate, Rearrange, demonstrate understanding, Explain, Generalise, Identify, Illustrate, Interpret, Review, Summarise, Extrapolate, Update
Application	Apply, Choose, Compute, Modify, Solve, Prepare, Produce, Select, Show, Transfer, Use
Analysis	Analyse, Characterise, Classify, Compare, Contrast, Debate, Diagram, Differentiate, Distinguish, Relate, Categorise
Synthesis	Compose, Construct, Create, Verify, Determine, Design, Develop, Integrate, Organise, Plan, Produce, Propose, rewrite
Evaluation	Appraise, Assess, Conclude, Critic, Decide, Evaluate, judge, Justify, Predict, Prioritise, Prove, Rank

The question part of the MCQ (item) is called STEM; correct answer is called the KEY and the rest of the options are called DISTRACTORS.

Steps in writing:

1. Select the specific learning objectives which you want to test.
2. Write the stem, it should be self-explanatory and complete, avoid using terms like (NOT, EXPECT, NEVER, ALWAYS, SOMETIMES) in the stem, if the terms are being used they should be in UPPERCASE and **bold** letter.
3. Write unambiguous and unarguably the correct answer to the stem.
4. Select the most plausible alternatives and arrange them in the form of options.
5. Avoid window dressing of the stem. This means adding superfluous and unnecessary words which confuses the student.
6. Abbreviations should be avoided.
7. Options should be grammatically parallel to the key, and should be parallel and have the same relation to the stem.
8. When writing options, avoid duplications or making options all inclusive, e 1-6, 6-10 etc.
9. The options should be arranged in rank order, eg. 256, 266, 280, 290 and not 290, 266, 280, 256.
10. "All the above" and "None of the above" should be avoided as an option.

Distribution of Marks: - Forensic Medicine & Toxicology

Papers		Maximum Marks	Minimum Passing Marks
Theory (Summative Assessment) (100 Marks)	Theory Paper (Sample paper Attached)	100	At least 50% marks
Practical *(Summative Assessment) (60+40= 100 Marks) 1. Practical/clinical examinations will be conducted in the laboratories and /or hospital wards. The objective will be to assess proficiency and skills to conduct experiments, interpret data and form logical conclusion.) 2. Viva/oral examination should assess approach to patient management, emergencies, attitudinal, ethical and professional values. Candidate's skill in interpretation of common investigative data, identification of specimens, etc. is to be also assessed.	Spotting Medico legal case Post mortem case Poisons Examination of bones	60	50% (Practical + viva)
	Viva (oral examination should focus on the application and interpretation) Charts, Photographs, X-Ray, Bones, Slides, Weapons, Poisons & Instruments etc	40	
Internal Assessment (Not added to the marks of the university examinations and should be shown separately in the grade card)	Theory	100	50% Combined in theory and practical (not less than 40% in each for eligibility for appearing for university examination)
	Practical	100	

***During practical examinations you are requested to use different methods of assessment tools to improve authenticity. Please refer to competency-based assessment module for UG medical education for more examples of assessment tools.**

Formative & Internal Assessment: - Internal assessment shall be based on day-to-day assessment. Efforts should be made to use multiple tools even for a given competency to improve validity and reliability of assessment

It shall relate to different ways in which learners participate in learning process which is day to day recorded in record book and log book in the form of :-

- a) Assignments,
- b) Preparation for seminar,
- c) Clinical case presentation,
- d) Preparation of clinical case for discussion,
- e) Clinical case study/problem solving exercise participation in project for health care in the community,
- f) Proficiency in carrying out a practical or a skill in small research project etc.

Regular periodic examination shall be conducted throughout the course as per following schedule: -

	Theory Internal Assessment (Weightage in the form of marks)	Practical Internal Assessment (Weightage in the form of marks)
First assessment test	15	10
Second assessment test	15	10
Send Up test	35	35
Class Test (best two)	10	10
Log Book	10	10
Practical record book	-	10
Attendance	5	5
Professionalism	-	10
ATCOM	10	-
Total	100	100



SRI GURU RAM DAS UNIVERSITY OF HEALTH SCIENCES, SRI AMRITSAR

Maximum Marks: 100

MBBS 3rd Professional Part-I Examination Subject- Forensic Medicine & Toxicology (New Scheme)

Time: 3 Hours

- Notes:**
1. Attempt all questions. Illustrate your answer with suitable diagrams where applicable.
 2. Question No. 1 (Multiple Choice Questions (A-J)) is to be attempted on OMR Sheet in first 15 minutes of the start of exam.
 3. Question No. 2-6 are to be attempted on the main answer book. No supplementary sheet shall be provided.
 4. Students must write QP code in the space provided on OMR sheet as well as on the title page of the main answer book.

QP Code: MBN305A

I. Multiple Choice Questions (MCQs):

[10X1=10]

- 1. A doctor injected syringe which was used before on a patient, who turned out to be HIV positive later. Under which of the following IPC will the doctor be booked for medical negligence:**
 - a. 304 A IPC
 - b. 201 IPC
 - c. 269 IPC
 - d. 270 IPC
- 2. A person was found dead, post-mortem shows nail scratches in the face with area of pallor over the right side of angle of mouth and chin, lip laceration in the inner side of the lip. Hypostasis is fixed. Which of the following cannot be the reason:**
 - a. Cause was throttling
 - b. Post mortem was done within 24 hours
 - c. Due to smothering
 - d. It is homicide
- 3. Paresthesia, Tetany, muscle twitches and muscle cramps are typical symptoms of poisoning with**
 - a. Sulphuric Acid
 - b. Nitric Acid
 - c. Ethylene Glycol
 - d. Carbolic acid
- 4. A 45 years old officer has been arrested after being named by 27 years old employee for harassment. Among the various charges being registered against him, one offence is charged under 509 IPC. What specific offence is he being charged for, under that section?**
 - a. Public nuisance under alcohol influence
 - b. Inquest
 - c. Exhibitionism
 - d. Act intended to insult the modesty
- 5. A dead body of a 50 years old female brought for PME with a history of death with suicidal poisoning, on PME you found a brick red hypostasis on the back sparing the area of contact flattening, what could be the possible mechanism behind this colour of hypostasis:**
 - a. Anaemic anoxia
 - b. Histotoxic anoxia
 - c. Hypoxic hypoxia
 - d. Stagnant hypoxia
- 6. A bullet fired from a gun is not released. It is ejected out with the subsequent shot. It is known as:**
 - a. Tandem cartridge
 - b. Rocketing bullet
 - c. Ricochet bullet
 - d. Tandem bullet
- 7. Leading questions are permitted in all of the following except**
 - a. Cross examination
 - b. Examination in chief
 - c. Hostile witness
 - d. Dying Deposition

8. A Young girl brought to the emergency by parents with her DOB 31/01/2005 and history of peno-vaginal penetration by her friend, she also said that she gave the consent for the same and refused for medical examination, what would you do as medical practitioner attending such patient:

1. Should not inform the police
 2. Should counsel the mother and the daughter
 3. Should call the police
 4. Should do examination with reasonable force
 5. Get informed refusal
- a. 2,3,5 are true
 - b. 1,2,3 are true
 - c. 3,4,5, are true
 - d. 2,3,4 are true

9. Which is the ideal site to collect blood sample for toxicological analysis during autopsy:

- a. Stomach
- b. Femoral Vein
- c. Aorta
- d. Heart

10. Cruelty of Mrs. X for dowry by her husband Mr. Y and in laws is punishable under:

- a. 304 A IPC
- b. 304 B IPC
- c. 498 A IPC
- d. 320 IPC

II. Describe arsenic poisoning under following headings:

[4+3+2+1=10]

- a. Clinical features of chronic arsenic poisoning.
- b. Management in case of arsenic poisoning.
- c. Postmortem findings in a case of acute arsenic poisoning.
- d. Medico legal aspects of arsenic poisoning.

III. A dead body of 24 years old female brought to the mortuary with superficial to deep burns involving head and neck, front of chest, both upper limb, front of abdomen, pus points are present at places, she was declared dead 5 days after the admission in the hospital:

[5X2=10]

- a. Discuss Classifications of burn.
- b. Describe with well labelled diagram the different methods to calculate the extent of burns. What are percentage of body surface affected in the given case.
- c. What are the different causes of death in case of dry heat burns. What is the probable cause of death in this specific case.
- d. How will you determine the age of injury from dry heat burns?
- e. How will you differentiate antemortem and post mortem burns. Write down the findings suggestive of antemortem burns in this case.

IV. Give Reason:

[3X5=15]

- a. During Road Traffic Accident-Aortic rupture (circular, clean cut, appears as if transected with knife)
- b. Healthy person who begins a meal, suddenly collapsed and dies without any further distress.
- c. Dead body of a female and fetus brought for postmortem examination with a history of scuffle between pregnant female and another person which induced the process of delivery, fetus respired for few second and died. How will you justify that fetus belongs to that pregnant woman.

V. Write short notes on:

[8X5=40]

- a. Wischnewsky spots and discuss other postmortem finding suggestive of death due to cold.
- b. Differential diagnosis of opium poisoning.
- c. Duties of a doctor in a case of criminal abortion
- d. Enumerates different types of Paraphilias. Discuss Voyeurism and its punishment
- e. Unknown dead body recovered brought for PME, what measures you will take to establish the identity of dead body. Discuss superimposition
- f. Exceptions of rule of full disclosure
- g. Carbolism
- h. Delusion, discuss types of delusions.

VI. Write short notes on:

[3X5=15]

- a. Legal status of Narcoanalysis tests.
- b. Age and responsibilities.
- c. Discuss principle of Autonomy and Beneficence when both are at conflict with the help of example (specifically in relation to paternalism).