

AIIMS
MANGALAGIRI

**Standard Operating Procedures
to deal with
Medico – Legal Cases in
Casualty / OPD & IPD**

**Department of
Forensic Medicine & Toxicology
AIIMS - Mangalagiri**

PREFACE

Hospital is an institution which provides multiple services having various complexities involving health care providers of different specialties. People attending the hospital present themselves not only with medical issues but many a times with inherent legal problems.

To handle those medico-legal cases, the doctor has to be very cautious and well oriented with legal formalities. Department of Forensic Medicine and Toxicology have designed, framed and compiled Standard Operating Procedures (SOP) for handling Medico-Legal Cases at our hospital. It is expected that the health care providers can utilize the SOP to handle the Medico-Legal issues arising in the scope of their duties as and when warranted. This comprises of various protocols that has to be followed in casualty as well as in IPD along with various standard proforma, in the form of annexure so that it can be easily applied while handling those cases.

This SOP will be updated on time to time basis as per the requirement of the institute. We hope this will definitely help our doctors to tackle all the medico-legal works while delivering their services.

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SOP for handling Medico-Legal cases in Casualty / OPD

1. Labeling a case as Medico Legal Case:

- 1.1 Whenever a patient comes to emergency department, the attending doctor should decide whether it should be labeled as MLC or not. Labeling a case as MLC does not require patient/ family members consent (**Annexure A**).
- 1.2 If MLC, after initial registration; he/she have to be registered in a specially designed MLC register (**Annexure B**).
- 1.3 Start treatment immediately with parallel ML works (However, treatment should be given priority).
- 1.4 Send Police Information (P.I.) to the nearest PS or attached outpost (**Annexure C**).
- 1.5 If it's a referred patient and MLC status from referring center is not known (no documents available), it will be considered a fresh case and MLC has to be registered.
- 1.6 If it's a referred patient and MLC has already been registered with proper documentation, send PI to nearest PS/OP for tracing purpose; no need of fresh MLC.

2. Examination of Medico Legal Cases:

- 2.1 One of the accompanying persons (if any) should be asked not to leave the place until the examination process is over. Identify him/her and note contact number.
- 2.2 If accompanying person is police personnel, he should not leave hospital until the process is over.
- 2.3 Before starting ML examination and collection of samples for legal purpose; consent from the patient has to be taken (**Annexure D**).
- 2.4 If patient refuses for ML examination, it should not be performed and same has to be noted in the OPD registration slip (**take refusal consent in same form – Annexure D**)
- 2.5 If patient is unconscious, consent has to be taken from family members or in their absence from the accompanying person
- 2.6 If patient is unattended and unconscious, ML examination may be continued without his/her consent for the benefit of the patient.
- 2.7 ML examination should be completed as early as possible (**Annexure E**)

SOP for handling Medico-Legal cases in Casualty / OPD

3. Issuing Medico Legal Report:

- 3.1 Once medico-legal examination is finished, report has to be prepared in duplicate; original being sent to concerned police authority at the earliest keeping the duplicate for official purpose (**Annexure F**).
- 3.2 Separate register has to be maintained for MLR dispatch.

4. Dealing with brought dead cases:

- 4.1 All brought dead cases are labeled as MLC.
- 4.2 Send PI immediately.
- 4.3 Transfer the body to mortuary for further proceeding along with thoroughly filled up Dead body transfer form (**Annexure G**).
- 4.4 Waiver of post mortem examination lies on the investigating authority, not doctors.

5. Dealing with attempt to suicide cases:

- 5.1 If the patient is conscious, take detailed history regarding the incidence. If required ask family members to stay outside during the *process to gain* full confidence of the patient.
- 5.2 If patient is unconscious, record history given by accompanying person and collect necessary samples as required. However, once the patient is conscious; detailed history has to be received from him/her.
- 5.3 If investigating authority asks for any report on the case, it has to be issued immediately (**Annexure F**)

6. Referring Medico Legal Cases:

- 6.1 Before referring a patient to other centers, proper MLC has to be done with documentation of injuries, if any.
- 6.2 Mention the MLC number on the referral sheet.
- 6.3 Send PI with a copy of provisional MLR as per the findings.

SOP for handling Medico-Legal cases in Casualty / OPD

7. Absconding cases:

- 7.1 All absconding MLCs should be intimated to police (even if MLC intimated previously).
- 7.2 If non-MLC patients are absconded, the same intimation should be sent to police without labeling it as MLC.

8. Examination of victims of sexual offences:

- 8.1 It is a team work comprising representatives from various departments (FMT, OBG, Surgery, Pediatrics, Psychiatry etc., as per requirement of the situation).
- 8.2 All required samples will be collected, preserved and handed over to investigating authority in a standard manner prescribed by Government of India under their departmental seal.
- 8.3 The report will be prepared immediately after examination and will be handed over to the appropriate authority by the concerned department who has examined the victim.

SOP for handling Medico-Legal cases in IPD

1. General:

- 1.1 While receiving the patient, confirm whether MLC has been registered in emergency or not.
- 1.2 Mention the MLC No. with date (**bold and red seal**) over the bed head ticket of the patient.
- 1.3 In all forms of investigation, MLC number should be written clearly.
- 1.4 High risk consent should be taken in all critically ill patients.
- 1.5 Dying Declaration, if not recorded in emergency department; should immediately be completed in relevant cases.
- 1.6 Check whether all the relevant samples have been collected in emergency or not, if not inform the doctor at casualty and co-ordinate to finish it at an earliest.
- 1.7 In case of referral of patient for investigation/ procedure to other departments the relevant documents should be handled by the hospital staff.
- 1.8 If investigating authority request for progress report, it should be issued immediately by the treating doctor.
- 1.9 All ML documents are confidential and to be kept under safe custody to avoid any tampering.

2. Discharge:

- 2.1 At the time of discharge, duly signed police intimation should be sent by treating doctor.
- 2.2 Discharge summary (original) is issued to the patient/family members.
- 2.3 Duly completed bed head ticket should be submitted to MRD at the earliest.
- 2.4 On demand a copy of the file can be issued after approval from the competent authority (Medical Superintendent).

SOP for handling Medico-Legal cases in IPD

3. On death of the patient:

- 3.1 If patient dies, body is transferred to mortuary and police should be informed.
- 3.2 Duly completed Death summary and Dead body transfer form should accompany with the body.

4. Death of the patient on OT table or during Procedure:

- 4.1 PI should be sent immediately.
- 4.2 Body to be sent to mortuary ASAP along with relevant documents (copy of OT notes).
- 4.3 A detailed Death summary to be prepared and sent with dead body.
- 4.4 Do not remove any instruments (iv cannula, Foley's catheter, Ryle's tube, ET tube, ICD, etc..) which are attached to the body.
- 4.5 Take photographs of room / area, anaesthetic machines, dead body, medications etc.,
- 4.6 All instruments, medicines, empty vials, blood transfusion sets, etc., should be kept as such without any alterations.
- 4.7 Surgeon & anaesthetist should accompany during scene visit along with investigating team.

5. Late Registration of MLC:

- 5.1 If MLC has to be registered for a patient which was not registered earlier due to whatever reasons, the number should be generated on that date when it was first noticed/required (not back dated)
- 5.2 A note should be made on the bed head ticket along with MLC register with proper reasoning, counter signed by the treating doctor.

6. Absconding:

- 6.1 If patient absconds, police should be informed (P.I) irrespective of MLC status.

7. LAMA:

- 7.1 No discharge summary to be issued.
- 7.2 Take signature of patient and relatives as required.

Cases to be labeled as MLC*

1. All road traffic accidents (even if there is no involvement of 3rd party)
2. Poisoning
3. Brought deaths (On arrival dead)
4. Burn
5. Attempt to suicide
6. Physical assault
7. Attack by wild animals
8. Snake bite/ scorpion and insect stings
9. Unconscious patient
10. Sexual offences
11. Fall from height
12. Drowning
13. Industrial accidents
14. Electrocution/ Lightning
15. Drug overdose
16. Child abuse

***This list is not exhaustive and any case can be labeled as MLC as per the physician's decision.**

MLC Register

Sl. No.	MLC No. with Date	IP No.	Name & address of the patient / deceased	Date & Time of arrival	Date & time of discharge / death	Brief history	Probable cause of death	Accompanying person with phone number	Identification mark (at least two)	Concerned Department	Signature of doctor

Police information (P.I.) form

All India Institute of Medical Sciences, Mangalagiri (Andhra Pradesh)
Guntur-522503 (A.P.)

To, _____ Serial no.
O I/c
.....P.S./O.P., Guntur (A.P.)

Subject: Information regarding medico-legal cases admission / referral / leaving against medical advice / absconding / death during treatment / brought dead etc.

Dear Sir/Madam,

This is for your information that the below mentioned patient was brought to the _____ department of All India Institute of Medical Sciences (AIIMS), Mangalagiri (A.P.) on _____ at _____ am / pm.

Name of the patient: _____ Age/Sex: _____,

Father's/Husband's name: _____,

I.P.D./M.R. No.: _____, MLC No.: _____,

Village/Town _____, District _____,

PO: _____, PS: _____,

Name/address/relationship of the accompanying person: _____

Phone No: _____

He/she is,

- Admitted in _____ department
- Discharged on _____ at _____
- Left hospital against medical advice on _____ at _____
- Absconded on _____ at _____
- Died on _____ at _____
- Brought dead on _____ at _____
- Dead body kept in mortuary.
- Any other remark (s) _____

The above details are for your information and necessary action.

Date & Time: _____ Signature with full name of doctor
Office seal:

Consent for Medico Legal Examination

I _____ S/D/W/o _____

R/O _____

have been informed about the process of examination and sample collection thoroughly by the examining doctor. They have also informed about my right for refusal of the whole process along with its consequences (without hampering my treatment). All doubts have been cleared by the doctor in the language understood by me. Nobody has pressurized me for the examination/collection of samples.

Hereby, I am giving my full, free and voluntary permission for the following:

Medico-legal examination YES/NO

Collection of samples YES/NO

Signature of doctor:

Signature of patient:

(Guardian for minors)

Date:

Date:

Signature of witness:

Date:

Procedure for Medico Legal Examination

1. History to be recorded in detail especially with respect to time, date and place. If the history narrated by adult patient differs from other accompanying persons, the former should be considered final.
2. Take necessary consent in prescribed format.
3. Note at least two identification marks.
4. All the injuries should be documented in a chronological way with their nature, dimension (Length x Breadth x Depth), location and any other relevant information.
5. In view of treatment priority if examination cannot be performed immediately, it should be recorded and second examination to be done at the earliest.
6. It is the duty of the concerned doctor to collect all relevant specimens (blood, urine, gastric lavage, etc.,) in specific sterile containers, duly labelled (MLR number, Patient name and date), sealed and handed over to police.
7. Examine all parts of the body to rule out any concealed injuries.
8. In case of referred patient without documented MLC, examine all the injuries as a fresh case even if some plaster/bandage has been applied.
9. If alteration of injuries is made elsewhere before reporting to this hospital, it should be recorded in the report.
10. Take photograph of all the injuries for future reference and maintain utmost confidentiality.
11. In final opinion, nature of the injuries (as a whole or individual, if differ) along with possible type/nature of weapon has to be given.

Medico Legal Report

**All India Institute of Medical Sciences, Mangalagiri (Andhra Pradesh)
Guntur-522503 (A.P.)**

MLR No		UHID/CR No.	
Date		MLC No & Date	

Name		Age	
S/D/W of		Sex	
Resident of			
Police station		Occupation	
Brought by		Mobile No	
Details of request letter, if any			
DD / FIR No., Date, U/s of IPC			
Particulars of police official			Signature:

Consent	Taken on a separate form (attached)
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Date & Time	Arrival	
	Examination	
Details of admission (date, time, department, ward / bed No., etc.,)		
Identification Marks 1. 2.		
Left Thumb Impression	Right Thumb Impression	

Additional notes, if any:

Particulars of injuries / symptoms:

Informant				
Brief history				
Complaints/Symptoms				
General examination				
Pulse:	BP:	RR:	GCS:	Pupils:
Injuries (if any)				
Clinical findings				
Investigation(s) advised				

Opinion:

Nature of injuries	
Probable duration of injuries	
Kind of weapon used or poison suspected	

Date:

Signature of Doctor:

Place:

Name & Designation (with seal)

Received the following in original :

- MLR
- Consent
- Body outline diagram sheet

(Signature of police official)

Name: _____

Belt No: _____

PS: _____

Dead body transfer form (MLC/ Non MLC body)

MLC No. & Date: _____

UHID/CR No.: _____

Name of the deceased: _____

S/D/W of: _____

Age & Sex: _____

Address: _____

From where the body has been transferred: _____

Date & time of admission (arrival date & time if in Casualty/OPD): _____

Date & time of death: _____

Provisional diagnosis (by treating doctor): _____

Any relevant information: _____

Reason for sending the dead body to mortuary: (Mark the appropriate reason)

- MLC
- Non-MLC with a request (not for autopsy)
- Unidentified dead body with no claimant available (MLC/Non-MLC)
- Diagnosis & Cause of death not known (clinical autopsy)

Whether Form No. 2 and 4 (RBD) issued to relatives: YES/NO

Whether police have been informed: YES/NO

Signature of informing doctor:

Name & designation:

Date:

In case of Emergency or Medico Legal Assistance

Contact us:

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