ROLE OF GENERAL PHYSICIAN IN MEDICO-LEGAL CASES (POISONING)

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ABSTRACT
All the doctors are come across certain medico legal problems at least once in his life. General physician should know about medico legal cases. Cases of injury, illness, snake-bite, burns or cases having legal implications etc, should be treated as medico-legal cases. It is important to understand the implication of the cases, sometimes it leads to make mistakes, which may leads in trouble to the physician. In such cases doctor should inform to police or magistrate without any delay, if he fails, it may invite trouble to him. Preservation of human life is important. It is duty of all medical practitioner to make available immediate & timely medical care to every injured person whether it is accidental or homicidal, the life of person is more important than the legal formalities. Whenever such cases come to the hospital, the doctor on duty must inform to the duty constable or police station giving the preliminary data as name, age, sex, of the patient and place of occurrence of incidence, giving false information is punishable under section, 193 IPC. A medico-legal register should be maintained in the casualty of every hospital, details of all medico-legal cases noted in register, preliminary data as complaint, and condition of the patients, examination, treatment progress and prognosis should be maintained by physician this would be immense help for future reference.

KEYWORDS: medico-legal, physician, hospital, injury, IPC.

INTRODUCTION
It is where a person is injured or harmed in any intention and needs medical attention medico-legal cases classified Where Burn injuries, vehicular accidents, suspected homicide/murder, poisoning, sexual assault and criminal abortion is the legal duty of the dr. first give primary lifesaving medical care., then all above MLC cases. inform to nearest police station immediately.¹ⁱ In simple word it is medical case with legal implication for the attending doctor, after examining and taking history of patients to do such work that, some investigation by law enforcement agencies is essential. The general belief that the doctor doing work in the government hospital would be involved with such MLC has now been dispelled by the recent decision of the hon’ble courts. Reporting and examining MLC is one the legal responsibility of all the physician working in all the hospital, each and every physician under a law bound by contract to severe its patient and cannot refuse treatment. The better way to deal with these cases is to understand them clearly, analyze them and act accordingly. A MLC register should be maintained in the casualty of every hospital and details maintained, including the time and date of examination, the name of the doctor and lastly who is dealing with the case.²³ The physician should never give written or verbal opinion, on mere suspicion, he must be try to find out the nature of the suspicion poisoning case, so he can administer the appropriate treatment and save patients life.³ Some examples of medico-legal cases are undiagnosed coma, chemical injury, custodial deaths, hanging, drowning, strangulation, suffocation, attempted suicide, sexual offence, burns and scalds, accidents like road traffic accidents-industrial accidents, electrical injuries, poisoning, alcohol intoxication, cases of trauma with suspicion of foul play, drug abuse, drug overdose fire arm...
injuries, unnatural death, death due to snake bite or animal bite, fire arm injuries and death in operation theatre, these all are medico-legal cases but this review article deals with role of general physician in poisoning cases.

AIM – To study the duties of physician in poisoning cases.

OBJECTIVE
1) To study the preliminary role of physician in poisoning cases.
2) To study the clinical role of physician in poisoning cases.
3) To study the legal procedures required for physician in poisoning cases.

METHODS
My review article contains following point
1) Treatment
2) Preliminary data
3) History
4) Examination
5) Judge
6) Information to authorities
7) In homicidal poisoning
8) In all cases of poisoning
9) Material for chemical analysis
10) Records.

1) Treatment
The important role of physician is to treat the patient and not to allow him die because of poisoning. The physician must try to find out the nature of the suspected poison so that he can at once administer the appropriate treatment and save the life of patients.\[4\]

2) Preliminary data\[4\]
   a) Full name of patients
   b) Occupation of patients
   c) Sex
   d) Age of patient
   e) Address of the patient
   f) Time and date
   g) Brought by whom
   h) Dying declaration necessary or not.

3) History of patient
The brief history should be taken, in that time of consumption, which type of poison, which type of manifestation occurred, if vomitus it has any smell, any treatment received as first aid, history of any drugs sensitivity.

4) Examination
All general and systemic examination should be performed, such as level of consciousness of patients, behavior of the patients, blood pressure, pulse rate, respiration rate and condition of skin like sweating, colour, condition of the pupil, if any smell of breath, vomitus stains on clothes, all details should be observe.

5) Judgment of poisoning – Whether it is,
   a) Suicidal
   b) Homicidal
   c) Accidental

6) Information to authorities
If the doctor is in private practitioner is certain that his patient is suffering from poisoning of suicidal or accidental, he is not bound to supply any information of his own accords to the magistrate or police. if summoned by the magistrate or investigating officer for information then he should do so, in accidental, if there is any indication of danger to the public from food poisoning, in that physician must inform to public health authorities at once, in all homicidal poisoning physician must inform the magistrate or nearest police officer.\[6\] In all cases of homicidal poisoning, as per section 39 criminal procedure code, the physician is bound to inform to magistrate or police officer, non-compliance is punishable under 176 Indian Penal Code.\[7\] If the police officer or magistrate require information on any case suicidal or homicidal poisoning in nature, the attending doctor has to divulge it, there is no scope for professional secrecy in such matters according to 175 criminal procedure code, if information is withheld or wrong information is provided, the doctor becomes punishable under section 202 and 193 Indian Penal code respectively.\[8\]

7) In homicidal cases
Firstly admit the patient. Always consult a colleague for treatment. No relatives or friend permitted to meet the patients. If the patients cannot be removed and if he can afford the expenses, two trained and trustworthy nurses must be employed to take charge of the patient in his house and also preparation and administration of food and medicine for the day and the night will be a safeguard against further administration of poison, if the arrangement is not possible, the only alternative left for the physician is to take some close relative or friend in his confidence and inform him of his suspicion, the patient may also be warned against danger.\[9\]

8) In all cases of poisoning
In all cases of suspected poisoning, observe the patients and if turns serious inform the police, if the patient is likely to be dying, arrange for dying declaration or dying deposition. If the patients dye due to suspected poisoning, first inform the nearest police officer for necessary investigation and should never grant a death certificate.\[10\]

9) Material for chemical analysis
Stomach washing, samples of vomit, urine-faeces passed, blood and any suspicion article of food,
drink, medicine in separate wide-mouthed glass jars or bottles with tightly fitted plug, these bottles or jars should be properly labeled with name, what material preserved and date of examination, should be kept safely, a physician must also preserve any other evidence of the suspected poisoning, like cup or tumbler, bottle, mortar or pestle, piece of paper, if he fails to do so he is punishable and charged with causing disappearance of evidence under 201 IPC.\[11\]

Any suspicious article such as
a) Utensils used for preparing the poison,
b) Clothes or bed sheet soiled by vomit,
c) Bottles or containers of solid or liquid medicine found at the scene,
d) Food or drink lying near the patients.\[12\]

10) Records
In every case of suspected poisoning, the physician must keep the records of the case with all precaution, detailed record should be, from with complaints, examination, treatment, condition, prognosis and progress of the patients.

Current Scenario
1) No limit on the Maximum Liability,
2) Complex Laws,
3) Lack of Structured Documentation,
4) Lack of Medico Legal Expertise,
5) No information sharing amongst the community,
6) No support at Critical Stage,
7) Media glare
8) Aggressive increase in Patient Activism.\[13\]

CONCLUSION
Medical science is not profession, it is service to the nation, physician should treat the patient sympathetically, it is our duty and we should try our level best to save the life of patient, while attending emergency in a hospital. All the precaution, proper documentation and proper medication including all investigation, timely information and referral all these things are most needful in medico-legal cases. Identification of patient, in that which is suicidal or homicidal is important thing in todays practice. There is no big issue or problem if one uses proper caution and due care and attention while dealing with such cases. In the hospital while attending emergency, the physician should know his first priority is to save the life of patient than legal formalities. All the records regarding with such cases should be kept safely at-least 10 years. In referred cases if MLC sheet has been prepared there is no need for fresh MLC.

REFERENCE
5. Dr. C. K. Parik’s textbook of medical jurisprudence, forensic medicine and toxicology sixth edition, Parikh CBS publication and distributer pvt. Ltd. pp – 8.08.
7. Modi’s Medical Juries prudence and toxicology twenty third edition by Dr. K Mathiharan and Dr. Amrit K Patnaik, Lexis Nexis, New Delhi 2006; pp-30