MEDICO LEGAL CASE MANAGEMENT

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MEDICO LEGAL CASE

It’s a medical case with legal implications for attending doctor, where the attending doctor after eliciting history and examining the patient, thinks that some investigation by law enforcement agencies is essential.

Why is this essential???

Every health care provider should have knowledge

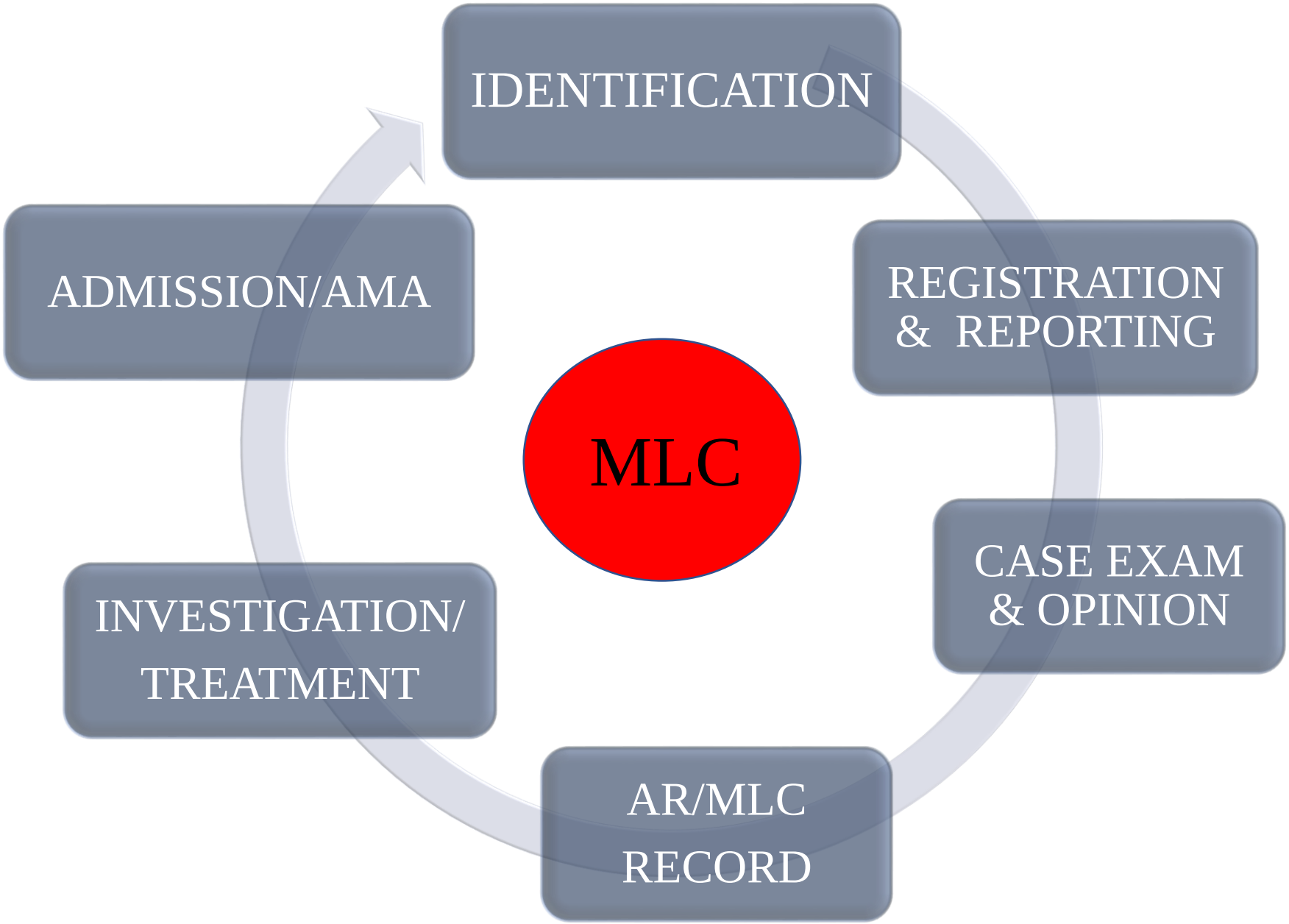
- To facilitate social and legal justice
- Health care provider along with the medical records called to the court as an expert witness is of pivotal importance for the proceedings of the trial
- Any in-competence by the health care provider can result in grave consequences for both the Institution and self.

Category

Poisoning	Brought Dead With Improper History
Sexual Offences, Rape	Case Brought By Police Or Sent By Court For Examination
Suspected Or Evident Criminal Abortion	Unnatural Death Of Young Lady With In 7 years Of Marriage
Trauma (RTA/Assault/Fire arm injuries/Self injury not consistent with History), Burns , Electrocution	All Cases If Alleged By The Patient Or Foul Play
Unconscious Patient Where The Cause Is Not Natural Or Clear	Any Other Cases Of Not Falling Under Above Categories But Has Legal Implications
Hanging Strangulation, Drowning, Attempted suicide	Unnatural Accidents/Calamities
Alcohol intoxication	Requiring Age Estimation

Receiving MLC cases

- RTA victim picked up and brought by unknown/relatives/friends
- Case brought by relative/friends/neighbours
- Case brought by police/court for examination (details to be noted in MLC register with reference of police request letter)
- Referred from another hospital where MLC has already been registered for expert management (inform police giving reference of MLC registered)
- After history taking & thorough examination, if doctor suspects that circumstances/ findings of the case are such that registration of the case as an MLC is warranted


IDENTIFICATION
REGISTRATION & REPORTING
CASE EXAM & OPINION
AR/MLC RECORD
INVESTIGATION/ TREATMENT
ADMISSION/AMA
MLC

Registration & Reporting

- Lives saving measures are always FIRST in priority
- MLC workup is done SOON after it
- Doctor (EMP) who has first contact with patient should prepare an ML case report & give MLC reg no.
  - Any Doctor at any point of their treatment should inform the EMP regarding any suspicion about any foul play suggestive of unnatural means in the case.
  - It is better to register as MLC and later easy to convert into non MLC than vice versa if Doctor is in dilemma.

A) Pre-amble : Name, Age, Sex, fathers name, occupation, complete address, date and time of reporting time of incident, brought by whom, two reliable identification marks (mole/scar/deformity/birth mark). Avoid abbrevations, over writing.
B) Body findings- includes complete description of injuries/any other findings present; any investigations/referral,
C) Post amble: Nature of injury/ weapon used/duration of the injury/opinions obtained from other departments/Any other relevant finding which helps to police

Consent of patient/guardian

Signature of the EM physician with registration no.

AR/MLC entry

- History told by the patient or the relatives has to be entered in the same words preferably, if any doubt regarding the history has to be asked specifically. Avoid guessing, assumptions about the facts.
- All the information written should be legible, understandable and simple in nature. Try to avoid scientific and medical terminologies as much as possible.
- To document, use ballpoint pen preferably. Avoid use of ink or gel pen.
- Avoid over writing, scribbling, etc. and any corrections made must be initialled along with the date.

Reporting MLC Organogram

Once the patient is registered as MLC

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Duty EM physician will inform to PRO

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PRO will contact the concern police station and duly registered the police name and pc no in the MLC book

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PRO will inform once again if the patient dies/discharge/AMA

Examination & Opinion Documentation

- It is preferable that lady doctor should examine the lady or wherever this is not possible a female attendant(nurse,etc)should present at the time of examination.
- If case referred from other hospital with MLC, it should be attached with our MLC.
- If the date of incidence is delayed, and patient brought late the present findings re written in MLC.
- There should be detailed examination and all injuries to be properly described
- Opinion from surgery and Ortho department are mandatory and documented.
- Radiological and other relevant investigation should be done.
- *All investigations/consent /OT/Insurance /other attachments should have MLC seal & Date in the corner*

Investigations To Be Collected & Preserved

- Gastric lavage in unknown poisoning, blood in alcoholic.
- Clothes in assault/injury/firearms/burns cases
- Nail clippings in assault/rape cases
- Pallets and bullets if recovered
- UPT/Vaginal swabs/smears/pubic hair in rape cases
- Nails and hair in chronic poisoning of heavy metals.

Documentation in MRD

- The case sheet along with all the investigation reports enclosed should be handed over to MRD with acknowledgement.
- Never allow the patient or attendees to handle the case sheet nor the investigation reports.
- In discharge summary all the finding should be entered and handed over to the patient. A copy of the same has to be kept in the case file.
- MLC case sheet should not be taken outside the hospital under any circumstances without the knowledge of MRD/MS
- Kept separate from other routine records
- Under lock and key in MRD
- Records should be preserved for life long or until the case is finally settled.
- Lease with the area police to check the status of the case

Discharge/Transfer/AMA	Death
• While discharging/ transferring MLC intimation should be sent to police • Regular discharge summary to be given to the patient • Police to be informed if MLC is absconding/ missing	• Immediate intimation to police • Transfer the body to mortuary • Handover the body to the police never to relatives for autopsy to ascertain the cause of Death • Since cause of Death is not known, No death certificate is to be issued

Brought Dead

- If PROPER HISTORY available
  - If patient was suffering from any chronic ailment has been treated in our hospital, the concerned Doctor/Department can issue the death certificate.
  - If the previous illness is not supportive of the death of the patient, then it should be subjected to PM examination.
- If PROPER HISTORY Not Available
  - Mandatory to make it MLC and inform the police
  - Body should not be released from the hospital without making the protocols and should be sent for PM.

Summary

- MLC Reports legibly filled with relevant details with out any abbreviations/scientific name.
- Should have EM physician Name , Signature with Date and Register No.
- All investigations/consent /OT/Insurance /other attachments should have MLC seal & date in the corner.
- In MRD it should be kept separate from other routine records under lock and key
- Confidentiality should be maintained and Records should be preserved for life long or until the case is finally settled.