

Internship in Forensic Medicine & Toxicology - A proposed curriculum

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Abstract

The controlling authority for medical education in India has finally taken the much needed decision to increase the course duration of the subject Forensic Medicine & Toxicology (FMT). The subject has been now included in the 3rd Professional MBBS (Part 1) thus increasing the duration of the course by nearly one year. There is now also provision for 15 days of elective internship posting in the subject. However these 15 days of training often are not optimally utilised as there is a lack of clear cut guideline regarding the matter. The MCI/NMC curriculum is vague and too much open for interpretation in this regard.¹ So a standard curriculum which can easily be followed in all Medical Colleges of India is much necessary to ensure uniform standard of training.

Key Words: Forensic Medicine & Toxicology, Internship, Ethics, Medico-Legal, MBBS

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I. Introduction:

In the new MBBS curriculum enacted since 2019 academic year the subject of FMT has been given its due importance. The elective internship posting of 15 days is another step into the right direction. This posting is quite popular among the interns and almost no slots go vacant.

However at present there is no uniform protocol on how to conduct the training of an Intern. **Most of the faculties have never done internship in this subject as it was not available in their time.** This has led to a rather confusing situation resulting in **two extreme scenarios**. In one hand there is the over-zealous department trying to teach each & every aspect of FMT to the intern, treating them like “PROXY JRS”. This cause nothing but frustration to both parties.

On the other hand there is the apathic department which is only concerned with the physical presence of the intern often assigning menial & clerical jobs to him/her thus completely devaluing the purpose of internship.

So it is evident that a clear cut guideline and protocol is needed to address this unfortunate situation. Medico-legal litigations against doctors are on the rise and due to the COPRA ACT², doctors have been essentially become a “service provider”. The internship period can be utilised effectively to warn and train the budding doctors to avoid such pitfalls. It is also a golden opportunity to incite interest in the subject so that one can choose it as a future specialization.

For this a balanced and relevant curriculum is essential as it is useless to introduce the intern to a myriad of complex autopsies and vexing medico-legal problems. It is a proven fact that less than 1% of a standard MBBS batch (150 students) will chose FMT as their specialization.

It is clear then the aim of the training should be focused on the medico-legal aspects and scenarios faced by all practising doctors irrespective of speciality.

The aim and objectives of the said training is multifaceted and can be broadly summarize as below-

II. Aims & Objectives

A) Introduction: This should be done at the beginning of the training period preferably by senior faculty members. Focus should be on the scope of the subject, various medico-legal situation faced by a practising doctors, subtleties of Medical Ethics and Etiquette.

B) Clinical Forensic Medicine : Focus should be on preparation of medico-legal reports and medical certificates commonly encountered in day to day practice. Priority should be given on preparation of Injury reports, sickness/fitness certificate, Death certificate and Police Intimation. How to identify and mark medico-legal cases and subsequent procedures are also covered in this section. Female interns must be sensitised to POCSO³ cases as examination by a lady doctor is mandatory in such cases.

C) Autopsy : Undue emphasis must not be given on autopsy as it is unlikely that the intern will face it in future unless he/she specializes in FMT. Common cases like hanging, burn, RTA, poisoning, Myocardial infarction should suffice. ~~When to send a dead body for autopsy is of equal importance. Proper collection,~~

preservation and dispatch of viscera to FSL should be covered indetail.

D) Self Study : It is a bitter truth that the whole purpose of the MBBS course has been reduced to a mere passport for appearing in PG entrance exams. To deny this hard truth is similar to burying one's head in sand. The interns should be allowed to do self study within the department premises for at least 3/4 days. He/she should be encouraged to solve the MCQs of FMT and may ask for help from the faculty if needed. This will be beneficial for the intern's future and also will create an atmosphere of goodwill.

E) Court visit : This is a unique part of training which is not easily possible in any other department. The interns will learn how to receive a summon and will accompany a faculty member for one day in court to observe the proceedings first hand. This exposure will help him/her for any future court appearance whether as an expert witness or as an accused.

F) Teaching: As the term "Doctor" itself means teacher, it is role for every doctor academically inclined or not. Unfortunately during the hectic internship schedule, teaching opportunities are hard to come by. So to awake the dormant teaching skills, the intern may be allowed to take one practical/demonstration class on a pre assigned topic under the supervision of a junior faculty member. This will surely boost the morale and confidence of the budding doctor and may turn him/her into a skilled teacher.

G) Toxicology: As the intern will gain plenty on hands on training during medicine/casualty postings regarding poisoning cases, separate toxicological training other than what is mentioned under " Autopsy " section is not recommended.

A model curriculum is provided below for ready reference :

Day	Aims & Objective	Focus Area	Co ordinator
1	Introduction	Meet & greet, joining formalities, scope of FMT, Basics of medical ethics & etiquette, medical negligence	HOD/senior faculty
2	Introduction (cont)	Medical negligence, defence against medical negligence, consent taking, duties of a doctor etc	Associate/assistant professor
3	Clinical forensic medicine	Injury report, victim of sexual assault examination ,sickness/fitness certificate	Assistant professor/SR
4	Self study	NA	NA
5	Autopsy	Routine cases as mentioned	Surgeon of the day
6	Clinical forensic medicine	DC writing, police intimation, breaking of the bad news	SR/JR3
7	Self Study	NA	NA
8	Court visit	Summon receiving, court procedures	Faculty of the day
9	Autopsy	Routine cases as mentioned	Surgeon of the day
10	Self Study	NA	NA
11	Teaching	Pre assigned topic for practical/demonstration class	SR/JR3
12	Miscellaneous	Various non academic department work	NA

#3 days have been deducted to account for Sundays/Holidays/Leaves

*can be adjusted according to the departmental need viz ongoing exams etc

The intern will keep a record of the training in the log book which has to be signed by the HOD before completion.

Drawbacks :

- Difficult to follow in the departments where no medico-legal work is done. (A theoretical outlook can be given instead)
- Centres with low faculty strength will not allow proper implementation.
- Apathy from the concerned intern and lack of interest from the concerned faculties.

III. Conclusion

As medico-legal litigations are on the rise and the weakening of the doctor-patient relationship, a young and budding doctor must be always on guard against both legal penalty as well as physical assault. The internship period in Forensic Medicine if utilised properly can impart crucial knowledge and skill to the would be doctor which will help him/her to meet the ever changing and unique challenges associated with the medical profession.

References

[1]. NMC Guidelines regarding internship in forensic medicine https://www.nmc.org.in/wp-content/uploads/2017/10/GME_REGULATIONS-1.pdf page 90-91

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