Salient features of the representation and the Writ Petition (titled Dr. Indrajit Khandekar Vs Union of India-2012), filed for revamping the curriculum of Forensic Medicine of MBBS course. The study report (464 pages) in the form of representation was submitted to MCI in year 2011.

- 1. As per the law of the land, MBBS doctor is duty bound to perform all types of medico-legal work i.e., clinical forensic work and forensic postmortem work. Therefore almost 90% medico-legal work is done by MBBS doctors all over the country. Hence, it becomes the duty of the agencies regulating and imparting medical education in the country to equip MBBS graduates with necessary knowledge and skills to handle all types of medico-legal work.
- 2. It has been observed that because of lack of bedside practical teaching of clinical forensic work and forensic postmortem (FPM) work like other clinical subjects half-baked & inadequately trained MBBS doctors are being produced in the country. Peeved by such inadequate and irrational curriculum of forensic medicine in the MBBS course, the petitioner had approached first to MCI and then to the judiciary seeking its immediate revamp.
- 3. Government expects all types of medico-legal work (MLW) from such MBBS doctors when they join as Casualty Medical officer (CMO) or Medical officer in Government hospitals as well as from the private practitioner those who deal with the cases having medico-legal overtone. A quality medico-legal work cannot be expected from such pseudo-experts; that's why, at present quality of medico-legal work in the country is very poor and abysmal that helps in acquittal of accused in majority of cases & also leads to miscarriage of justice.
- 4. There are various instances where Judiciary has passed strictures against the doctors and even government has taken serious actions against them for poor quality of medico-legal

work. But, unfortunately, all concerned agencies including government, never tried to correct the actual reason (i.e., only theoretical teaching of forensic medicine & lack of bedside practical teaching) behind this. It is submitted that, till the curriculum is revamped, amended & properly implemented no one should expect good quality of medico-legal work from MBBS doctors.

- 5. This representation has pointed out shortcomings in medico-legal examination in assault cases, recording of dying declaration, sexual violence exam, injury report preparation, age estimation, alcoholic and weapon exams, informing the cases to police, preservation of stomach wash, vomited material etc at the time of treating the poisoning patients, history writing in medico-legal cases, problems in writing identification marks, name and signature of doctors over the report, giving evidence in the court of law, preservation of biological material for DNA testing, burns and dowry cases including postmortem (PM) exam etc. The report further highlights that there is clear cut violation of various guidelines and rules framed under the laws, by the medicos while handling medico-legal cases, which are helping the accused to get scot-free.
- 6. In this respect it is further submitted that, **Hon'ble Apex Court as well as Hon'ble High Courts** across the country has recorded their disappointment/ grief over the medico-legal examination, medico-legal reports, and the evidence of the doctors given in the court, in their Judgments while acquitting the accused due to lack of proper medical evidence and failure on the part of the prosecution to corroborate medical evidence with other evidence.
- 7. After observing the problems in health care and medico-legal care, Hon'ble Judiciary of India has given various guidelines, recommendations, and directions pertaining to medical profession. But, it is unfortunate that, the Medical Council of India and other concerned universities have not given due attention, to them while formulating curriculum of medical education.

Why revamp of curriculum needed? It is needed due to, the following problems, in the curriculum.

PROBLEMS IN THE MEDICAL REGULATION/CURRICULUM (Regarding the subject of Forensic Medicine) PRESCRIBED BY MCI:

- 1. As per the MCI (for UG education), it is not mandatory for faculties from department of forensic medicine & toxicology to do any medico-legal work (Clinical forensic & postmortem work) of the hospital. Only teaching is made mandatory. Clinical forensic work of the hospital is at present done by the clinicians and casualty medical officers, but they don't have any responsibility to teach these aspects to the MBBS students. However, for all clinical departments it is mandatory to do clinical work as well as teaching....... Can MCI allow any clinical department to only teach the students without getting involved in actual handling of the patients?????
- 2. Even most of the Forensic Medicine Departments of Private medical colleges in the country including Government Medical Colleges of Uttar Pradesh (UP) are not even authorized to handle Forensic Medical Post Mortem work, therefore, the faculties from such colleges are not even get routinely exposed to such cases.
- 3. It has been observed by renowned Forensic Pathologist Bernard Knight that "such type of separation of those who practice forensic pathology from those who profess to teach in universities (medical college) is a serious defect. He further observed that it is impossible to be credible & convincing teacher unless one has continuing practical experience of the subject."
- **4.** At MBBS level, no scope for bedside practical teaching (in batches) of medico-legal work like other clinical subjects. Therefore, students from most of the medical colleges qualify MBBS without witnessing and examining even a single medico-legal case. Therefore, medical graduates are becoming "pseudo experts" in relation to

- medico-legal work. For clinical subjects fixed duration of clinical posting in batches, for about 15 subjects including dentistry has been prescribed.
- 5. Some parent universities in the country has recommended in the curriculum, to show the undergraduates 10 autopsies; but, at the same time they failed to prescribe the practical training hours in the schedule of the time table prescribed for bed side practical teaching. At some places department is imparting practical teaching at their own. But, if it is made mandatory by MCI, then we can ask MCI for extra staff to combat the extra workload.
- 6. Curriculum does not prescribe autopsy table side practical examination in university practical examination at MBBS level in relation to Forensic Postmortem work. Even for clinical forensic cases students are given hypothetical data (not actual case, as it is not mandatory) in university practical exam. Therefore, there is no scope to assess the practical skills of MBBS students in relation to medico-legal work like other clinical subjects where they are allotted clinical short and long cases.
- 7. No provision for Court Visit in batches for MBBS students.
- **8.** No mandatory Internship in Forensic Medicine Department.
- **9.** Only one theory paper and less mark allotted for the university theory & practical examination, as compared to the other clinical subjects.
- 10. Though the clinical forensic teaching of the subject directly deals with the patient; just like other clinical subjects, it has not been included as a clinical subject in Final MBBS.

## PETITIONER'S SUGGESTIONS TO MCI:

1. Like other clinical departments; handling of all types of medico-legal work (Clinical Forensic & Forensic Postmortem work) by the forensic department, should be made

- mandatory before recognizing the forensic department as a teaching / academic department to run the medical college/institute in the country.
- 2. It shall be ensured that, the faculties of the department of forensic medicine involved in teaching medico-legal aspects must also be involved in actual handling of the routine medico-legal work; so that they can teach the students practical implications.
- 3. To insist upon the existing medical colleges/institutions and prospective institutions for a functional "CLINICAL FORENSIC MEDICINE UNIT" (CFMU) in the casualty/ Emergency Medicine Department to handle medico-legal work of casualty, wards, trauma centres, OPDs, ICU etc under the department of Forensic Medicine and functional "FORENSIC MEDICAL POSTMORTEM UNIT" (FMPMU) to conduct medico-legal autopsy in the interest of the students (would be doctors) & for the larger interest of the society.
- **4.** To provide adequate space, infrastructure, facilities, and instruments for CFMU in Casualty/ EMD and for FMPMU in the hospital premises.
- **5.** Clinical forensic and Forensic autopsy posting schedule in syllabus itself for bedside practical teaching like prescribed for other 15 clinical specialties.
- **6.** Handover all medico-legal work of casualty, trauma Centre, and hospital to the department of forensic medicine under CFMU.
- 7. Provision for court visits for MBBS students in batch (10 students per batch). 5-10 visits, each of 2 to 3 hours duration (depending on distance from college to court) are to be planned by the departments of Forensic Medicine. Adequate transport (both for staff and students) shall be provided by the medical college to take medical graduates to Courts for carrying out teaching and training activities by the department of Forensic Medicine.
- **8.** Bedside practical teaching hours, court visit hours, clinical forensic work and forensic postmortem work should be taken into consideration while prescribing staff requirement

- for department of Forensic Medicine. (Example: in clinical subjects staffing pattern is based on beds as well number of units).
- **9.** To prescribe adequate trained "Forensic Nurses" to work in CFMU and other non-teaching staff for the department.
- 10. To prepare a brochure/module which will contain the various guidelines issued by the Indian Judiciary along with summary and directions passed by the Hon'ble Supreme Court and Hon'ble High Courts of the Country pertaining to medical profession and handling of medico-legal cases by the doctors. This brochure shall be made part of the curriculum of medical education, under the Subject of Forensic Medicine.
- 11. Compulsory internship in CFMU and forensic autopsy units for period of 1 month.
- **12.** Teaching of the subject should be taken up in the later part of the clinical years (Final year of MBBS) to facilitate a better understanding of nuances of Forensic Medicine along with its applied aspects.
- **13.** Full-fledged university examination of Forensic Medicine & Toxicology with 2 separate theory papers (Clinical Forensic Medicine, forensic autopsy, toxicology etc.).
- **14.** Curriculum should be applied, and that part of the subject, the department would be practically doing as per MCI (like clinical forensic work, forensic autopsy work etc) should only be taught by the department of forensic medicine.
- **15.** To amend the inspections forms of MCI to evaluate the concept of practical teaching of clinical forensic and forensic autopsy work.
- 16. As far as possible, like other clinical subjects all types of university practical examination must be bedside at least regarding clinical forensic work. Exercise on simulation cases may be used whenever required.
- **17.** To direct all the Universities imparting medical education to incorporate authorized medico-legal forms of respective states, various government resolutions, circulars,

standing orders and rules framed, and directions issued by the government from time to

time for handling medico-legal cases and collection of medico-legal samples, in

curriculum of Forensic Medicine.

18. Medical college should be given the target of clinical MLCs (medico-legal cases) and

forensic postmortem work, as has been given for daily OPD attendance and bed

occupancy to the clinical departments To fulfill the said requirement, department/ college

should be directed to get attached with number of police stations as per the need.

**19.** To amend the Objective of Medical Graduate Training Programme to:

"The undergraduate students coming out of a medical institute should be able to

provide basic medical health care and basic medico-legal care" which is entrusted as

per the law of the land and Indian Judiciary" as the present objective seems to be

inadequate and appears to have ignored the law of the land.

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