

Forensic

Q1

A) Lacerated scalp

B) Chest stab wound

1. Photo A is caused by (blunt force).
2. The depth of wound B relative to the (length) of the causative weapon.
3. The most specific characteristic of the wound in B is (tissue bridging).
4. It was mentioned that a certain amount of blood was found in the thoracic cavity, along with other information about patient B. The question was: What is the complete cause of death?

(Stab wound, hemorrhage)

5. ?

Q2

Pugilistic attitude

1. The cause of this sign: (burn, coagulation of proteins, and dehydration of muscles).
 2. True or false: This sign is antemortem. Briefly justify your answer.
(False, It can be seen in both antemortem and postmortem burns.)
 3. The most specific sign of an antemortem burn: (soot in the lungs).
 4. The laboratory test that will be elevated: (carboxyhemoglobin).
 5. The medicolegal importance of autopsy in this case: (to determine whether there was a cause of death before the burn).
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Q3

A) Eyelid petechial hemorrhage

B) Tache noire

1. The cause of sign A: (increased intracapillary pressure leading to peripheral venous rupture?).
 2. Causes of death in A: (asphyxia, drowning).
 3. Pallor around the mouth and nose is found on the body. The mechanism of asphyxia is (smothering).
 4. Sign A is specific to: (nothing).
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Q4

A) Putrefaction

B) Cherry-red livor mortis

1. Write the 4 D's: (discoloration, distension, degradation, dissolution).
 2. Cause of B: (CO poisoning).
 3. The cause of knee flexion in A: (gas stiffness?).
 4. The most common mode of death in B: (asphyxia).
 5. The most common manner of death in B: (accidental).
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Toxicology

Q1

A farmer developed loss of consciousness (LOC) after using an insecticide, with pinpoint pupils, etc.

1. The causative substance: (organophosphate).
 2. You will give (atropine) to reverse the symptoms.
 3. You should start the management with (oxygen).
 4. The most important test to confirm your diagnosis: (RBC acetylcholinesterase activity).
 5. The affected enzyme: (acetylcholinesterase).
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Q2

IV marks, pinpoint pupils, LOC.

1. Diagnosis: (heroin poisoning).
 2. Antidote: (naloxone).
 3. The most important toxicological test: (6-MAM).
 4. The motility of the GI tract: (inhibited).
 5. Treatment of withdrawal symptoms: (methadone).
 6. Cause of cyanosis: (elevated deoxyhemoglobin).
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Q3

Closed room + isopropane water geyser.

1. Diagnosis: (CO poisoning).
 2. Antidote: (100% O₂ / hyperbaric oxygen).
 3. Findings on ABG: (metabolic acidosis).
 4. The level of deoxyhemoglobin: (low).
 5. ?
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Q4

Methanol poisoning case.

1. Diagnosis: (methanol poisoning).
2. Antidote: (fomepizole).
3. Other antidote: (ethanol).
4. Most common clinical presentation: (blindness?).
5. The elevated metabolite: (formaldehyde).
6. ABG findings: (metabolic acidosis).