

**Annexes for**  
**Postgraduate Diploma in Legal Medicine**  
**programme**

**Postgraduate Institute of Medicine**

**University of Colombo**

**2013**

**Board of study in Forensic Medicine**

## **List of annexes for Postgraduate Diploma in Legal Medicine programme - Postgraduate Institute of Medicine**

	<b>Pg</b>
<b>ANNEX 1 – CURRICULUM</b>	<b>3</b>
<b>ANNEX 2 – PORTFOLIO - Pg.DLM</b>	<b>13</b>
<b>ANNEX 3 – LECTURE SCHEDULE</b>	<b>15</b>
<b>ANNEX 4 – SGD TOPICS</b>	<b>18</b>
<b>ANNEX 5 – WORKSHOPS</b>	<b>19</b>
<b>ANNEX 6 – FORMAT FOR PROGRESS REPORT</b>	<b>20</b>
<b>ANNEX 7 – PEER TEAM RATING FOR ASSESSMENT</b>	<b>21</b>
<b>ANNEX 8 – PORTFOLIO MARKING GRID</b>	<b>23</b>
<b>ANNEX 9 – GUIDELINES FOR PREPARATION OF PORTFOLIO</b>	<b>25</b>

## ANNEX 1 – CURRICULUM

### **General objectives of the Pg. Diploma in Legal Medicine Programme**

On successful completion of this programme the diploma holder should

1. have acquired competencies(knowledge, skills, expertise, attitudes) in the effective medico-legal management of the living and the dead and
2. be able to provide a forensic medical service in keeping with good medical practice,
3. be able to provide competent, independent and impartial expert evidence and
4. be able to disseminate knowledge in the field of forensic medicine to allied health care professionals and other stakeholders in the criminal justice process in Sri Lanka.

### **10 intended learning outcomes to achieve the general objectives**

1. Holistic standard ML management
2. Theoretical knowledge
3. Clinical skills
4. Issuing a quality report
5. Maintenance of records and statistics
6. Testifying in a court of law
7. manager
8. Lifelong learner/scholar
9. Personal development - and professionalism
10. Health promotion and disease prevention

Course objectives or specific learning outcomes(SILO)are identified under the different intended learning outcomes.

### **MODULES**

There are 9 modules arranged in sequence in the taught course. These modules are derived from the inputs identified to fulfil the specific learning outcomes.

#### **9 modules**

1. Introductory module
2. Clinical forensic medicine
3. Forensic Pathology
4. Forensic Science
5. Forensic Toxicology
6. Law related to Medico – legal work and its application
7. Medical ethics: professional ethics
8. Other forensic specialties and subspecialties
9. Forensic procedures

## Specific intended learning outcomes(SILOs)/course objectives

### 1. Holistic Medico legal management (includes referral, case conference and ethical aspects)

#### **The Trainee should be able to:**

Describe and explain the ethical principles of, respect for autonomy, beneficence & non maleficence, justice and equity.

Understand the principles and legal issues surrounding informed consent.

Understand that consent is a process that may culminate in, but is not limited to, the completion of a consent form.

Give appropriate information and conduct a consultation to obtain consent in a suitable setting and at a suitable time.

Obtain consent in a manner that patients and relatives understand.

Assess their comprehension having considered the patient's and the relatives'/carers' level of understanding and mental state and the patient's needs as an individual.

Adopt a patient-focused approach to decisions that acknowledge the rights, values and strengths of the public.

Respect a patient's rights of autonomy even in situations where their decision might put them at risk of harm.

Keep within the scope of authority given by a competent patient.

Outline the procedures for seeking a patient's consent for disclosure of identifiable information.

Recognise the problems posed by disclosure in the public interest, without patient's consent.

Decide when to involve social services/police, and how to do so.

Act with compassion at all times.

Be an empathetic listener towards victims, caregivers, and other personnel coming into contact with trainee

Abide by the professional, legal, and ethical codes of the Geneva Declaration, Sri Lanka medical council

Understand prejudice and preferences within self, others, society and cultures.

Possess a basic knowledge in medical ethics

Possess an understanding of the overview of the medico - legal management in clinical and autopsy work inclusive of prevention

**Referrals** – referrals to forensic practitioners for second opinions and also clinicians non medical etc – know when to refer, what to refer and modes of referrals

Be aware of the importance of Case conferences/mortality meetings/journal clubs to foster good practice and patient/client care and practice accordingly

Be able to ensure patient's best interests without compromising impartiality

#### **Standard Medico - legal management**

Plan and execute management under headings described above.

The ability to practice evidence based medicine

The experience to make clinical decisions regarding medico legal management

## **Ancillary investigations**

Be able to perform a standard crime scene investigation and provide direction to teams and be a member of a team in suspicious deaths and other crimes against the person.

Describe principles of trace evidence management.

Be able to collect pack, label, store and dispatch maintaining chain of custody, the relevant samples for forensic, toxicological, histopathological, biochemical, microbiological, serological investigations according to standard protocols in a given medico legal case.

Be able to interpret the results of above and compile reports to courts including all other expert reports

## 2. Medical (theoretical) knowledge

### **Basic Science**

Adequate knowledge in the basic sciences related to trauma and its complications, sexual abuse and other clinical situations of Forensic significance, causation of death in sudden natural and unnatural deaths

Basic knowledge in anatomy/physiology/pathology and other medical/clinical subjects relevant to medico legal work which includes both forensic pathology and clinical forensic medicine

### **Clinical Forensic Medicine**

Adequate knowledge regarding the sexual development and variations of genital appearance in female and males

### **Law**

Adequate knowledge of the medico – legal framework of the country, different types of courts and their functions and the role of the doctor as an expert witness.

Describe relevant sections of legal documents such as the Penal code and criminal procedure code, court procedures, documentation and understand its relevance in medico - legal problems that are routinely encountered.

Adequate knowledge of the Law relating to sexual offences, homicide, abortion, hurt, relevant sections in the motor traffic act and workmen's compensation act,

Be aware of the evidence ordinance, torture act, Domestic violence act, human tissue transplantation act and relevant laws and circulars related to medico – legal work

### **Medico - legal aspects of Trauma**

An in-depth knowledge and understanding (able to describe) of the characteristic features, mechanisms of causation and medico legal significance and sequel of different types of injuries and other forms of violence.

Describe the different patterns of injury in the living and the dead and reconstruct the event and give independent opinions

Understand and describe the different categories of injury

Discuss the medico legal aspects (causation, categorisation, complications, cause of death, degree of force, volitional activity and other opinions) of head, neck, and thoracic, abdominal, limb, spinal, genitourinary and other injuries.

## **Special topics in trauma**

Describe the spectrum of conditions seen, legal aspects, methods of detection and holistic management of Domestic violence,

Describe the methods, common spectrum of findings, legal aspects, investigation, documentation, opinion formation, report writing and holistic medico - legal management of live and deceased victims of Torture.

Describe the medico – legal issues in abortions, methods, presentations and complications of illegal abortions in the live and the dead, and discuss the medico - legal investigation of such an abortion in Sri Lanka.

## **Practise based**

Describe the methods used in the identification of the living and the dead

Describe the principles in the medico legal management of a mass disaster

Describe the authority and procedure of a medico - legal examination of a patient

Describe the authority and procedure of a medico - legal autopsy

## **Forensic Science**

Describe the principles of crime scene investigation and trace evidence collection

Describe the principles of application of trace evidence in criminal trials, their significance and limitations

## **Autopsy**

Describe the definition, legal framework, personnel involved, objectives and procedure of an inquest

Describe the difference between and know legal requirements for judicial and pathological autopsy

Adequate knowledge regarding the, definition and types of death, confirmation of death diagnosis of brain stem death and medico - legal

Describe the common causes of sudden natural deaths, the clinical presentations with understanding of the basic sciences behind it, and describe and interpret the macroscopic and microscopy features in the organs.

Adequate knowledge regarding the changes after death and application for assessment of time since death

Adequate knowledge regarding the different types of unnatural deaths and their medico legal aspects.

Describe the features, circumstances, presentations and investigations of all types of asphyxial deaths and immersion deaths and the medicolegal significance of the findings

Describe the medico – legal issues in infanticide, methods, presentations and complications and discuss the medicolegal investigation in Sri Lanka.

Discuss the medico legal aspects of sudden infant deaths

Describe the features, circumstances, presentations and investigations of deaths due to starvation and neglect and discuss the medicolegal significance of the findings

## **Toxicology**

Describe the general principles of diagnosis, management and investigation in poisoning

Describe the features, circumstances, presentations and investigation of deaths due to poisoning with agrochemicals, As, Pb, Hg, Cl<sub>2</sub>, CN, CO, H<sub>2</sub>S, NH<sub>3</sub>, and common plant poisons in Sri Lanka and discuss the medicolegal significance of the autopsy and investigation findings

Describe the features, circumstances, presentations and investigations of deaths in acute alcohol intoxication and discuss the medicolegal significance of the findings

Describe the effects of alcohol on the body and describe the features and differential diagnosis of alcohol intoxication and interpret findings according to the law regarding drunkenness in Sri Lanka.

Be able to use protocols in examination for drunkenness

Describe the mechanism of death and autopsy diagnosis of alcohol intoxication and chronic alcohol abuse

List the common groups of substances of abuse in Sri Lanka and discuss the circumstances, presentations and investigations of deaths due to substance abuse (Opioids like Heroin and Morphine, Cannabis, Cocaine, Amphetamines,) and discuss the medicolegal significance of the findings.

Describe the features, circumstances, presentations and investigation of deaths due to poisoning with medicinal drugs (salicylates, paracetamol, Diazepam, ) and discuss the medicolegal significance of the autopsy and investigation findings

Describe the features, circumstances, presentations and investigation of poisoning with corrosives (acids, alkalis) and discuss the medicolegal significance of the clinical features, autopsy and investigation findings.

Name and identify the poisonous and common non poisonous snakes, differentiate the venom types and actions, describe clinical features of envenomation and outline the management.

## **Ethics**

Describe the principles in the Hippocratic Oath and describe the International code of Medical Ethics and be aware of principles governing other relevant oaths and conventions

Describe the principles governing consent, confidentiality, doctor patient relationship, civil and criminal medical negligence and professional misconduct

Have a basic understanding of ethical principles in contraception, abortion, right to live and die, artificial insemination, organ donation and transplantation, euthanasia, human experimentation

Describe the duties of a medical practitioner toward patients, family members, society, fellow doctors.

Describe the principles of patient centred care, obligation to alleviate suffering, undertaking treatment, consent, professional secrecy/medical confidentiality, Duties towards patients (use of optimal skills and knowledge when treating patients)

### **3. Clinical skills (Practical skills/procedures/PM skills)**

#### **Trainee should be able to**

Plan and execute medicolegal management of routine medicolegal problems according to standard procedures.

Acquire knowledge, skills and attitudes necessary to assess victims of crime and other examinees by means of clinical history taking, appropriate physical examination and investigations (where relevant).

Trainee should have developed skills in the diagnosis and management of medico – legal problems

Be able to use scientific methods and maximally utilise the service of other experts in the identification of the living and the dead

Be able to fill up a standard Medico-legal examination form and medico – legal report in all medico – legal presentations using evidenced based approach

Be able to perform a client friendly sexual assault forensic examination and investigation and report, according to guidelines and give evidence and promote holistic management and preventive measures where relevant

Be able to perform a child centred medico – legal examination, investigation, and report, give evidence and promote holistic management and preventive measures where relevant in alleged child abuse incidents according to guidelines.

Be able to perform a standard medico – legal examination, investigation, and report, give evidence in illegal abortion in the living and the dead

Be able to perform a standard medico – legal examination, investigation, and report, give evidence in the alleged mother in infanticide

Be able to perform a standard medico – legal examination, investigation, and report, give evidence in alleged drunken persons or abusers of substances

Be able to perform a standard medico – legal examination, investigation, and report, give evidence in an alleged drunken person, an accused and any other detainee brought for examination according to guidelines.

Be able to perform a standard autopsy and investigation in sudden natural deaths and discuss the medicolegal significance of the findings with special emphasis where there is interplay between trauma and disease.

Be able to perform a standard autopsy and investigation of asphyxial deaths and discuss the medicolegal significance of the findings

Be able to perform a standard autopsy investigation in infants with special attention to cases of alleged infanticide and report/give evidence

Be able to perform a standard post-mortem investigation in alleged torture and write a standard report/give evidence

Be able to collect evidence from a site of a mass disaster using standard protocols

Be able to perform a standard exhumation

Be able to perform a standard autopsy and investigation of poisoning deaths and discuss the medicolegal significance of the findings

#### 4. Issuing a quality report

Be able to write medico legal reports and post mortem reports of acceptable quality with opinions based on scientific reasoning.

Understand the legal requirements, confidentiality issues regarding issuance of reports

Be able to write a quality report for compensation claims and any other reports within the purview of a medicolegal expert

#### 5. Maintenance of records and statistics

Be knowledgeable on record keeping and maintain proper registers in order to retrieve reports with ease

Keep records concisely, accurately and legibly, and protect and keep the data confidentially.

Maintain statistics in the unit for research and audit purposes



6. Testifying in a court of law

Able to describe the laws governing evidence in Sri Lanka, process of court trial and leading evidence and cross examination

Be aware of the duty to be punctual, answer summons, excuse appropriately when needed and liaise with legal professionals before, during and after trial

Able to answer appropriately to questions, explain medical concepts to lay audiences, and communicate in the language used in court trials

Able to give impartial evidence within the expertise

Possess correct attitudes when giving evidence(controlling anger, be impartial and seem to be impartial)

Be prepared with needed documents, references, etc.

Be able to appreciate the need for dress and decorum and proper conduct while in courts and when giving evidence.

7. Manager(includes communicator and collaborator)

Developed skills in the planning and management of a medicolegal unit and evaluate its outcome

Be able to function as a team leader

Be an effective time manager and prioritize problems appropriately

Be able to manage subordinates and relate appropriately with superiors and peers.

**Communicator**

The Trainee should be able to:

Acquire communication skills (with patients, relatives and colleagues, police, lawyers, judicial officers, public, victims and caregivers, accused and any other person/personnel the candidate comes into contact with).

Effectively communicate verbally and non-verbally.

Structure a consultation appropriately.

Break bad news(eg. to a mother of a sexually assaulted victim – the fact that there is damage to the hymen, in a culturally sensitive manner).

Communicate in an appropriate manner in sensitive issues keeping in mind the diverse ethnicity and religious beliefs and their several myths.

Communicate accurately, clearly, promptly and comprehensively with relevant colleagues by means appropriate to the urgency of a situation (e.g. telephone, email, letter etc), especially where responsibility for a patient's care is transferred e.g. sexually abused victim in emergency situations.

**Collaborator**

Effectively collaborate and work in a team

Be able to plan, initiate, organize, conduct and evaluate a case conference

Be able to plan, initiate, organize, conduct and evaluate a scene of crime examination

Be able to plan, initiate, organize, conduct autopsies in disaster settings and collaborate with Specialists in Forensic Medicine other agencies

8. Lifelong learner/scholar/teacher

Recognise the need for audit in clinical practice to promote standard setting and quality assurance.

Use patient feedback questionnaires, hospital sources and national reference data to carry out clinical audits.

Listen to and reflect on the views of patients and relatives, dealing with complaints in a sensitive and cooperative manner.

Conduct a literature search

Abide by the principles of Good Clinical Practice when conducting any research on human subjects.

Ensure the rights, safety well being of trial subjects.

Ensure the research is consistent with ethical principles

**Researcher**

Developed skills in the conduct of audits in Forensic Medicine and Pathology thereby minimising risk and enhancing the services.

Develop, maintain and update an enquiring mind.

**Teaching**

Recognise the importance of the role of the doctor as an educator within the multidisciplinary team and use medical education to enhance the care of patients and their loved ones, care of the dead and bereaved relatives.

Balance the needs of service delivery with education.

Teach healthcare workers in a variety of settings to maximise effective communication and practical skills and to improve patient (client) care.

Encourage discussions with colleagues in clinical settings to share knowledge and understanding

Developed skills required to become a teacher in order to impart medical education to subordinates, allied health care workers, and key players in the criminal justice process

9. Personal development - and professionalism

**The Trainee should be able to:**

Describe and explain the roles and responsibilities of team members involved in medicolegal work.

Be aware of concepts of medical professionalism.

Appreciate the relevance of professional bodies e.g. SLMA, SLMC, CFPSL

Communicate both verbally and in writing with patients, relatives, police, lawyers, judges, social workers, child care professionals, and colleagues.

Appreciate and be sensitive to the ways in which cultural and religious beliefs affect approaches and decisions, and to respond them respectfully.

Break bad or sensitive news appropriately and be compassionate towards distressed patients, the families of patients and colleagues.

Use interpreters appropriately.

Work effectively within a team both as a team member as well as the team leader.

Respect the opinions of others and enable individuals, groups and agencies to implement plans and decisions.

Maintain and routinely practice critical self-awareness, including the ability to discuss strengths and weaknesses with supervisor, recognising external influences and changing behaviour accordingly.  
Facilitate, chair and contribute to meetings.

Deal with problems and difficult colleagues by re-building rapport and articulating own views.

Recognise personal health as an important issue.

Use authority appropriately and assertively; particularly with reference to the resolution of conflicts and disagreements.

Recognise the importance of active participation in multi-disciplinary meetings.

Identify factors that influence and inhibit team development including different leadership and working styles.

Obtain and deal with feedback professionally.

Appreciate the limitations of own professional competence.

Understand the principles of confidentiality that provide boundaries to communication.

manage anger and aggression in self and colleagues.

Communicate effectively with administrative bodies, police, state counsel, and victim support organizations.

Employ behavioural management skills with colleagues to prevent and resolve conflicts, and enhance collaboration.

Recognise the need for a healthy work/life balance for the whole team and only takes any leave after giving appropriate notice to ensure that covering arrangements are in place.

Respect the skills and contributions of colleagues.

Recognise when personal health takes priority over work pressure.

Learn from colleagues and personal experience and seeks advice appropriately.

Maintain the trust of patients, their relatives, colleagues, other members of the staff and trainees.

Promote health and health improvement.

Practice with professionalism including:

- integrity

- compassion

- altruism

- continuous improvement

- aspiration to excellence / perfection

- respect cultural and ethnic diversity

- regard to the principles of justice and equity.

The ability to maintain highest standards of professional, moral and ethical conduct

Developed correct attitudes for good medical practice.

## **Information technology**

The Trainee should be able to:

Search medical literature using PubMed, Medline, WHO RHL and the Internet.

Use IT for patient care and for personal development.

Use databases, word processing techniques, statistical programmes and electronic mail.

Adopt a proactive and enquiring attitude towards new technology.

Understand the principles and be able to use computing systems for data collection, storage, retrieval, analysis and presentation.

Maintain confidentiality of data collected.

Be able to prepare documents and presentations using appropriate computer software Be able to be able to communicate using modern electronic technologies

10. Health promotion and disease prevention

Be aware about the notifiable diseases and familial diseases when whom and how to inform regarding them and to arrange for screening and counselling for family members as appropriate. Be able to disseminate information regarding emerging or changing trends in disease patterns.

**ANNEX 2 – PORTFOLIO**  
**TRAINING PORTFOLIO - Pg. DLM**

The trainee should maintain a Training Portfolio to document and reflect on his training experience and identify and correct any weaknesses in the competencies expected of him, and also to recognize and analyze any significant practice events experienced, so that appropriate changes in management could be adopted in order to reduce the risks arising from such situations in the future. The Portfolio should be maintained from the time of entry to the training programme up to sitting for the examination. The supervisors/Trainers are expected to review the candidate's progress at regular intervals. It is the responsibility of the trainee to obtain the signature of the trainer after these reviews, and submit the Training Portfolio for evaluation by the BOS. for evaluation of his competence to practice independently as a expert witness in Forensic Medicine.

*During the **Pg.DLM** Training Programme the Trainee should maintain the Training Portfolio- Section I. The Trainer needs to conduct regular assessments and certify that the Trainee has satisfactorily acquired the required competencies. The Log of clinical and other activities is the first component of the Training Portfolio .*

The details of the Training Portfolio are given in the document on portfolio and its guidelines:

The main content areas of the Training Portfolio shall include the following, authenticated by the Supervisor/Trainer:

- Log of Clinical activities
  - (minimum number of 20 autopsy reports. There should be a reasonable variety of cases including RTA, homicides, natural, suspicious, paediatrics etc. ). (Out of these 20, at least 10 should have been personally performed autopsies.
  - 20 completed MLR( comprising of child abuse, drunkenness, RTA, assaults,etc. )Out of 20 MLRs there should be mandatory 03 cases of SEXUAL abuse,)
  - 20 completed MLEFs.
  - Miscellaneous- Scene visits, exhumations
- Details of Academic Activities
- Reflective Practice (on significant clinical or pathological events experienced by the trainee) A minimum of 06 should be included
- Teaching (undergraduates / nurses /mortuary attendants etc.) Evidence of activity should be signed by the supervisor
- An Audit at the work place
- Information Technology - certificates of IT courses, self assessment of IT skills, Evidence of activity should be signed by the supervisor
- Ethical Issues - documented reflection on 03 cases with ethical issues
- Professional Development- self reflection on skills and attitudes and values
- Peer Team Ratings
- Record of attendance at essential courses- prove with certificates
- Record of experience obtained in tutorials, journal clubs, Clinico-pathological Conferences and audits- reflection/ supervisor' s certification

- Self-assessment of the Training/ Acquisition of clinical experience by the Trainee  
Assessment of the Trainee's progress by the Educational supervisor  
These assessments should include:
  - Mini Clinical Evaluation Exercises
  - Case-Based Discussions
  - Objective Structured Assessments of Technical Skills(eg. Special v dissection, demonstrating pneumothorax)
  - DOPS(Direct observation of practical skills)

**ANNEX 3 – LECTURE SCHEDULE(includes other teaching methods as well)**

L = lecture, PBL = problem based learning session, SGD = Small group discussion, CBT = Centre based training, FP = forensic pathologist

Module	Contents	Methodology	Hours	Credit allocation
<b>1. Introductory module</b>	Professionalism	L	1	
	Adult learning	L	1	
	Communication skills	L role play	1	
	Attitudes and values	L	1	
	<b>Introduction to forensic medicine and Forensic pathology</b>	L	1	
<b>2. Clinical forensic medicine</b>	• Medico legal aspects of trauma(injury interpretation)	L	3	
	• Sexual assault forensic examination	SGD L PBL	1 4 2	
	• Examination for drunkenness	L	4	
	Examination for impairment of driving	PBL	2	
	• Child abuse	L	2	
	• Domestic violence	L	1	
	• Torture , Examination of detainees Fitness to plead/stand trial	L	2	
	• Medico-legal aspects of Pregnancy and abortion L 1 hours	L	1	
	• Identification of the living (self learning and SGD) 1	SGD	1	
	• Evaluation for purposes of compensation SGD - 1	SGD	1	
<b>3. Forensic pathology</b>	• Pathology of wounds (+Regional injuries, Head injuries)	L	3	
	• Practical demonstration on injury identification and description	SGD	3	
	• Injury patterns(falls, defense, self infliction	L	1	

	<ul style="list-style-type: none"> <li>• Death and Thanatology</li> </ul>	L	2	
	<ul style="list-style-type: none"> <li>• Cause of death(WHO format,), manner, mode and circumstances</li> </ul>	L	2	
	<ul style="list-style-type: none"> <li>• Practical demonstration on writing cause of death</li> </ul>	SGD	2	
	<ul style="list-style-type: none"> <li>• Sudden natural deaths</li> </ul>	L	1	
	<ul style="list-style-type: none"> <li>• Lecture demonstration of important natural COD eg MI, pneumonia tuberculosis etc</li> </ul>	Histopath demonstration	3	
	<ul style="list-style-type: none"> <li>• Infant deaths( SIDS/SUDI, Infanticide)</li> </ul>	L	1	
	<ul style="list-style-type: none"> <li>• PM artefacts</li> </ul>	L	1	
	<ul style="list-style-type: none"> <li>• “Asphyxial deaths”</li> </ul>	L	2	
	<ul style="list-style-type: none"> <li>• RTA</li> </ul>	L	2	
	<ul style="list-style-type: none"> <li>• Firearm</li> </ul>	L	2	
	<ul style="list-style-type: none"> <li>• Explosive injuries</li> </ul>	L	1	
	<ul style="list-style-type: none"> <li>• Electrocutation and lightening (self learning and taught at appointment production of a video/CD )</li> </ul>			
	<ul style="list-style-type: none"> <li>• Burns</li> </ul>	L	1	
		Sgd	1	
	<ul style="list-style-type: none"> <li>• Maternal deaths</li> </ul>	L	1	
	<ul style="list-style-type: none"> <li>• Identification (self learning and taught at appointment</li> </ul>			
	<ul style="list-style-type: none"> <li>• Pathological Changes of organs due to common natural illnesses(macroscopy only)</li> </ul>	L	1	
<b>4. Forensic science</b>	Introduction to Forensic Science	L	1	
	Crime Scene Investigation <ul style="list-style-type: none"> <li>• Physical evidence</li> </ul> Impression evidence Questioned Documents Basic methods of analysis Fingerprints	L	1	



	<b>The Analysis of Body Fluids</b>		L	1	
	<b>DNA investigation</b>				
	Firearms and explosions (under pathology)		L	1	
	Entomology		L	1	
<b>5. Forensic toxicology</b>	Introduction to toxicology Clinical and pathological features of Common poisons encountered in M/L practice Collection and Preservation of poison Evidence		L	3	
<b>6. Law related to ML work and its application</b>	Introduction to legal system Laws related to Homicide, Rash and negligent acts Hurt, Human tissue transplantation Act Sexual offences, drunkenness Motor traffic act section 151 Domestic violence Act, Law relating to Torture, Abortion, Relevant sections of Criminal procedure code'		L	4	
	Diagnosis of death and disposal of body		L	1	
<b>7. Medical ethics: professional ethics</b>	Relevant oaths and conventions	Self learning			
	Principles of medical ethics		L	1	
	Professional ethics(SLMC and SLMA guidelines, professional Misconduct, Medical negligence and related law)		L	1	
	Clinical ethics Related to medical practice –		L	3	
<b>8. Other forensic specialties and subspecialties</b>	Introduction to Forensic Radiology		L	1	
	Forensic Psychiatry		L	1	
	Odontology		L	1	
	Introduction to Forensic Histopathology		L	2	
<b>9. Forensic procedures</b>	PM dissections-autopsy Practical demonstration		To be covered under CBT, SGD and appointment  Role play	3	
	Special dissections Practical demonstration			3	
	Exhumation and recovery of clandestine body disposals including mass graves			02	
	Referral note writing			02	
	Obtaining a relevant history in medicolegal work(autopsy, clinical)			02	
	Collection of trace evidence Crime scene examination		Practical demonstration L 1		

**ANNEX 4 - SGD Schedule with topics - SGD/Tutorial/PBL**

Topic	Method	Time hours	resource
medico – legal management in clinical and autopsy work inclusive of prevention	Case scenario	10 hours	FP
Referrals	Case based SGD	2	FP
scene visit	Mock scene examination	2	FP
Exhumation	Mock exhumation	2	FP
poisoning	Case discussions	01	FP
Report writing(documentary evidence)	Discussion of Case scenarios	2h	FP
Expert testimony and Testifying in courts	mock trials	2h	FP, State counsel
Ethical issues	SGD	2h	FP

**ANNEX 5 - Workshops/study half days/centre based training - Schedule with topics**

Topic	Method	Time - hours	resource
Infant autopsy	Practical demonstration	02	FP
Sexual abuse report writing	Practical demonstration	02	FP
Torture –report writing	Practical demonstration	02	FP
Gender BV	Practical demonstration	01	FP

Centre based training

Topic	Method	Time - hours	resource
(DNA, firearms and explosives, odontology) Institute of Legal Medicine and Toxicology, Colombo and University of Peradeniya	Practical demonstrations	05	FP Forensic dentist Forensic scientist
Trace evidence processing, firearms and explosive investigation -	Practical demonstrations	03	Govt analysts department
PM dissections-	autopsy Practical demonstration	03	FP
Special dissections	Practical demonstration	02	FP
Exhumation and recovery of clandestine body disposals including mass graves	Practical demonstration	02	FP
Obtaining a relevant history in medicolegal work (autopsy, clinical)	Role play	02	FP

**ANNEX 6**

**FORMAT FOR PROGRESS REPORT ON TRAINEES – DURING PG.DLM TRAINING.**

**NAME OF TRAINEE:**

**SPECIALTY: Forensic Medicine**

**PERIOD OF TRAINING:**

**HOSPITAL AND UNIT:**

**NAME OF THE SUPERVISOR:**

	<b>Excellent</b>	<b>Good</b>	<b>Average</b>	<b>Poor</b>
Theoretical knowledge				
Clinical decision making				
Clinical skills				
Dissection skills				
Ability to cope with complicated scenarios				
Thinks independently and rationally				
Seek appropriate consultations				
Ability to follow instructions				
Quality of documentation				
Dedication to work				
Professional attitudes				
Reliability				
Availability/punctuality				
Communication skills				
Doctor-patient relationship				
Relationship with colleagues				
Relationship with other staff				
Supervises and helps support staff				
Relationship with police and other agencies				
Other Comments:				

**Signature of the Supervisor:**

**Date:**

**ANNEX 7 - PEER TEAM RATING FOR ASSESSMENT**



(Rater Assessment 1-20)

**PGIM Roll No.**

PGIM/						/						-								
-------	--	--	--	--	--	---	--	--	--	--	--	---	--	--	--	--	--	--	--	--

**Date of assessment (DD/MM/YY)**

--	--	--	--	--	--

**Year training**

1  2  3  4  5  6

**Name of Rater**

(You can remain Anonymous)
----------------------------

**Please indicate your profession by filling in one of the following circles**

- Consultant                               Registrars                               SHO or HO                               Other Specify  
 Allied Health Professional       SR                               Clerical or Secretarial Staff      .....

Please mark one of the circles for each component of the exercise on a scale of 1 (extremely poor) to 9 (extremely good). A score of 1-3 is considered unsatisfactory, 4-6 satisfactory and 7-9 is considered above that expected, for a trainee at the same stage of training and level of experience. Please note that your scoring should reflect the performance of the trainee against that which you would reasonably expect at their stage of training and level of experience. You must justify each score of 1-3 with at least one explanation/example in the comments box, failure to do will invalidate the assessment. Please feel free to add any other relevant opinions about this doctor's strengths and weaknesses.

**THE PTR IS NOT AN ASSESSMENT OF KNOWLEDGE OR PRACTICAL SKILLS**

<b>1. Attitude to staff: Respects and values contributions of other members of the team</b>
<input type="radio"/> Don't know <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9
UNSATISFACTORY                              SATISFACTORY                              ABOVE EXPECTED
<b>2. Attitude to patients; Respects the rights, choices, beliefs and confidentiality of patients</b>
<input type="radio"/> Don't know <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9
UNSATISFACTORY                              SATISFACTORY                              ABOVE EXPECTED
<b>3. Reliability and punctuality</b>
<input type="radio"/> Don't know <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 6 <input type="radio"/> 8 <input type="radio"/> 9
UNSATISFACTORY                              SATISFACTORY                              ABOVE EXPECTED

<b>4. Communication skills: communicates effectively with patients and families</b>			
<input type="radio"/> Don't know	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3	<input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6	<input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9
	UNSATISFACTORY	SATISFACTORY	ABOVE EXPECTED
<b>5. Communication skills: communicates effectively with healthcare professionals</b>			
<input type="radio"/> Don't know	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3	<input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6	<input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9
	UNSATISFACTORY	SATISFACTORY	ABOVE EXPECTED
<b>6. Honesty and Integrity, do you have any concerns?</b> <input type="radio"/> Yes <input type="radio"/> No			
<b>7. Team player skills: Supportive and accepts appropriate responsibility; Approachable</b>			
<input type="radio"/> Don't know	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3	<input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6	<input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9
	UNSATISFACTORY	SATISFACTORY	ABOVE EXPECTED
<b>8. Leadership skills: Takes responsibility for own actions and actions of the team</b>			
<input type="radio"/> Don't know	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3	<input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6	<input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9
	UNSATISFACTORY	SATISFACTORY	ABOVE EXPECTED
<b>9. OVERALL PROFESSIONAL COMPETENCE</b>			
<input type="radio"/> Don't know	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3	<input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6	<input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9
	UNSATISFACTORY	SATISFACTORY	ABOVE EXPECTED

**Comments about the trainee (BLOCK CAPITALS PLEASE) – Write in English/ Sinhala/ Tamil**

Your

(You can remain Anonymous)

Signature:

**Please place form in the attached self addressed envelope and return to the PGIM (PTMU) named on the envelope. DO NOT return to the Registrar or Senior Registrar.**

**We are very grateful for your independent and honest rating of our trainees.**

## ANNEX 8 – PORTFOLIO MARKING GRID

### ASSESSMENT OF THE PORTFOLIO (F.5)

#### 1. Documentation:

Clarity, Brevity, Correct sequence, Focused presentation

	Marks/10
Fail	3
Borderline	4
Pass	5
Good pass	6
Excellent pass	7+

#### 2. Clinical skills:

Number, different types, competency

	Marks/10
Fail	3
Borderline	4
Pass	5
Good pass	6
Excellent pass	7+

#### 3. Autopsy skills

Workshops, Seminars, Conferences, DOPS

	Marks/10
Fail	3
Borderline	4
Pass	5
Good pass	6
Excellent pass	7+

**4. Reflective Ability**

		<b>Marks/10</b>
<b>Fail</b>	<b>Has not completed Reflective cycle</b>	<b>3</b>
<b>Borderline</b>	<b>Has only described the learning experience</b>	<b>4</b>
<b>Pass</b>	<b>Analyzed the reasons for the experience &amp; the reasons for outcome</b>	<b>5</b>
<b>Good Pass</b>	<b>Evaluated how the outcome could have been different if a different course of action was taken</b>	<b>6</b>
<b>Excellent Pass</b>	<b>Provided high quality evidence for implementing changes</b>	<b>7+</b>

**5. Teaching (undergraduates/ nurses /police )**

	<b>Marks/10</b>
<b>Fail</b>	<b>3</b>
<b>Borderline</b>	<b>4</b>
<b>Pass</b>	<b>5</b>
<b>Good pass</b>	<b>6</b>
<b>Excellent pass</b>	<b>7+</b>

**Total Mark out of 50 Examiner 1=**

**Total Mark out of 50 Examiner 2=**

**Mark out of 100 =**

**Final Mark out of 50 =**

**Signature of Examiner 1: .....**

**Signature of Examiner 1: .....**

**Date: ...../...../.....**



## **ANNEX 9 – Guidelines on preparation of portfolio**

### **General Guideline- how to prepare/ maintain a portfolio**

Collect all documents in A4 size ring binder where evidence of learning is reflected according to the learning objectives given. All documents in the Portfolio should be typewritten/computer printed or should be scanned images or photocopies of articles. As far as possible completely hand-written documents should not be included due to obvious problems of legibility. A CD containing the portfolio should also be handed over simultaneously.

### **The sections**

#### **1. An introduction to self; in the first person**

##### **The following information should be provided in a separate A4 sheet**

- Introduction of self
  - Place of Pg. DLM training
  - Current work place
2. Report on reflective learning outcome related to the objective of “acquiring knowledge and skills in Forensic Medicine in order to conduct the service component and court attendance”. This report should document what the trainee hoped to achieve at the beginning of the Pg. DLM training appointment, and how much of this was achieved and lessons learnt for further improvement. This section should include the following supportive documents as proof of evidence for the reflective learning.
- a. Records of training
    - i. Pg. DLM in-service log book
    - ii. Course work diary/reflective notes maintained by the trainee (Register of clinical and autopsy activities) and reflective practice of significant autopsy or clinical events(minimum 06)
    - iii. 05 case records and commentaries (03 autopsy and min. 02 clinical)
    - iv. Ethical Issues - documented reflection on 03 cases with ethical issues
  - b. Documents/records of professional skills developed
    - i. IPISTA to be conducted by the trainer(formative assessment)
    - ii. Direct Observation of Practical Skills(DOPS 1,2,3a,3b)

3. Report on reflective learning outcome related to personal and professional development with the following supportive documents as proof of evidence.
  - a. Documents/ reports on presentations the trainee has done in academic bodies, mortality meetings, clinical presentations, journal clubs etc
  - b. Records/descriptions of teaching commitments undertaken to postgraduates(peers), undergraduates, nurses, police, attendants, lawyers, and others
  - c. Records of participation of Continuous Professional Development(CPD) activities and others- eg workshops, conferences, symposia
  - d. Evidence of an audit performed by the candidate
  - e. Information technology
  - f. Language and communication –
    - iii. English language proficiency and ability to communicate effectively
    - iv. Other language proficiency to give evidence in courts and to communicate with patients/clients (Sinhala and or Tamil)
  - g. peer team ratings and any other as prescribed by the Board of study.

***Records of training appointment:***

**2.A.i In Service training log book will be provided by the PGIM-** The trainee should complete the log book and the trainer/supervisor should endorse it.

- Log of Clinical activities
  - (minimum number of 20 autopsy reports personally performed by the trainee. There should be a reasonable variety of cases including RTA, homicides, natural, suspicious, paediatrics etc.). (Out of these 20, at least 10 should have been personally performed autopsies.
  - 20 completed MLR( comprising of child abuse, drunkenness, RTA, assaults,etc. )Out of 20 MLRs there should be mandatory 03 cases of SEXUAL abuse (either performed or observed)
  - 20 copies of completed MLEFs doctors copy including contemporaneous notes made.
  - Miscellaneous- Scene visits, exhumations
- Details of Academic Activities

**2.A.ii. Course work diary of (minimum of 6 cases should be in cooperated) to acquire reflective practice**

This is a set of loose sheets maintained by the trainee which can be submitted as a spiral bound book for assessment. The criterion for selecting a case that should be included into course work diary is that the case selected resulted in private reading that changed the perception; an informal discussion with a supervisor/ colleague/ or other experts in a related field that reflected on a problem encountered in forensic

pathology or clinical forensic medicine. The course work diary should include the report prepared to send to the Court.

The proforma for course work diary

- a. Title or description of the experience
- b. What happened?
- c. Lesson/s learnt?
- d. Has this experience highlighted any further learning needs
- e. Has the activity resulted any improvement/change in the work

*( the word count of the each reflective note should be 250 - 500 words- these notes should be accompanied by a copy of the original report prepared to send to the courts and evidence of further reading)*

**3.a. Evidence of presentations- oral or poster presentations** at National or international academic sessions/ morbidity mortality meetings/National or regional maternal death conferences/journal club/clinical case presentation meeting with evidence of presentation. Abstracts with presenter certificate/ summary of the proceedings/or a copy of the slide set / print out of the poster to A4 paper certified by the supervisor, or feedback received from peers or supervisors on such presentations can be included as evidence of presentations.

**3.b. Evidence of teaching commitments undertaken** by the trainee during training (undergraduate, postgraduate, nurses, paramedical, police or others) certified by the supervisor( A lecture note/ slide set/ time table)/ or direct appraisal documentation- eg teacher evaluation reports.

The following will be considered in consideration of marks

**3.c. Evidence of Continuous Professional Development (CPD) activities and others** – conferences / workshops / symposia / academic meetings attended. The certificates of participation/certified letters of participation will be considered as proof.

**3d. A simple work audit with a short report** (how to improve the service based on standards and available reviewable material)

**3e.** Information technology - attendance at workshops/seminars/CAL lab demonstrations organised by the BOS or other institution

**3f.** Language and communication – courses attended, tests of proficiency(IELTS, UTEL) etc.

**3g.** Standard PTR forms will be provided by the PGIM

## Direct Observation of Practical Skill Forms

<b>DIRECT OBSERVATION OF PRACTICAL SKILLS – DOPS-1</b>	
<b>Post-mortem examinations (1<sup>st</sup> 6 Months)</b>	
Trainee's Name	
Training Centre	
Type of the post-mortem	Natural unnatural
Serial number of the post-mortem	
Trainees ability in the organization of the post-mortem (History taking & Mortuary organization)	Circle the Grade - A, B, C, D, E
Trainee's adherence to health & safety issues at dissection room.	Circle the Grade - A, B, C, D, E
Post-mortem dissections	Routine
If there are special dissection, indicate the type	Neck Cervical/spinal Pelvic Muscular skeletal
Trainee's competence in dissection	Circle the Grade - A, B, C, D, E
Trainee's time management at the dissection	Circle the Grade - A, B, C, D, E
Trainee's ability in conveying post-mortem findings and cause of death to authorities and the relatives	Circle the Grade - A, B, C, D, E
Overall competence	Circle the Grade - A, B, C, D, E
Remarks:	
Name of the Trainer: Signature of the Trainer	
Please note – to certify that the person reached the satisfactory skills a C or above C should be obtained.	

A-Excellent, B-Good pass, C-Pass, D- failure, E- bad failure

<b>DIRECT OBSERVATION OF PRACTICAL SKILLS – DOPS-1</b>	
<b>Post-mortem examinations (2<sup>nd</sup> 6 Months)</b>	
<b>Trainee's Name</b>	
<b>Training Centre</b>	
Type of the post-mortem	Natural unnatural
Serial number of the post-mortem	
Trainees ability in the organization of the post-mortem (History taking & Mortuary organization)	Circle the Grade - A, B, C, D, E
Trainee's adherence to health & safety issues at dissection room.	Circle the Grade - A, B, C, D, E
Post-mortem dissections	Routine
If there are special dissection, indicate the type	Neck Cervical/spinal Pelvic Muscular skeletal
Trainee's competence in dissection	Circle the Grade - A, B, C, D, E
Trainee's time management at the dissection	Circle the Grade - A, B, C, D, E
Trainee's ability in conveying post-mortem findings and cause of death to authorities and the relatives	Circle the Grade - A, B, C, D, E
Overall competence	Circle the Grade - A, B, C, D, E
Remarks:	
Name of the Trainer:	
Signature of the Trainer	
Please note – to certify that the person reached the satisfactory skills a C or above C should be obtained. ( 50% or more)	

A-Excellent, B-Good pass, C-Pass, D- failure, E- bad failure

<b>DIRECT OBSERVATION OF PRACTICAL SKILLS – DOPS-2</b>	
CLINICAL EXAMINATIONS (1 <sup>st</sup> 6 months)	
Trainee's Name	
Training Centre	
Type of the clinical case	Assault/RTA/Sexual Abuse/child abuse/Torture
Trainee's ability in the adherence to legal and ethical aspects of the patient	Circle the Grade - A, B, C, D, E
Trainee's ability in taking a medico-legal history	Circle the Grade - A, B, C, D, E
Trainee's ability in selecting appropriate clinical examination /s in the case given	Circle the Grade - A, B, C, D, E
Trainee's competence in conducting of the clinical examination	Circle the Grade - A, B, C, D, E
Trainees competence in carrying out special examinations- eg: genital examination, examination of drunkenness etc	Circle the Grade - A, B, C, D, E
Trainee's ability in conveying finding to authorities and the relatives	Circle the Grade - A, B, C, D, E
Overall competence	Circle the Grade - A, B, C, D, E
Remarks	
Name of the Trainer: Signature of the Trainer	
Please note – to certify that the person reached the satisfactory skills a C or above C should be obtained. ( 50% or more)	
A-Excellent, B-Good pass, C-Pass, D- failure, E- bad failure	

<b>DIRECT OBSERVATION OF PRACTICAL SKILLS – DOPS-2</b>	
CLINICAL EXAMINATIONS (2 <sup>nd</sup> 6 months)	
Trainee's Name	
Training Centre	
Type of the clinical case	Assault/RTA/Sexual Abuse/child abuse/Torture
Trainee's ability in the adherence to legal and ethical aspects of the patient	Circle the Grade - A, B, C, D, E
Trainee's ability in taking a medico-legal history	Circle the Grade - A, B, C, D, E
Trainee's ability in selecting appropriate clinical examination /s in the case given	Circle the Grade - A, B, C, D, E
Trainee's competence in conducting of the clinical examination	Circle the Grade - A, B, C, D, E
Trainees competence in carrying out special examinations- eg: genital examination, examination of drunkenness etc	Circle the Grade - A, B, C, D, E
Trainee's ability in conveying finding to authorities and the relatives	Circle the Grade - A, B, C, D, E
Overall competence	Circle the Grade - A, B, C, D, E
Remarks	
Name of the Trainer: Signature of the Trainer	
Please note – to certify that the person reached the satisfactory skills a C or above C should be obtained. ( 50% or more)	
A-Excellent, B-Good pass, C-Pass, D- failure, E- bad failure	

<b>DIRECT OBSERVATION OF PRACTICAL SKILLS – DOPS-3a</b>					
<b>REPORT WRITING : special emphasis on how to write medico-legal opinions in complicated post-mortem examinations/autopsies</b>					
Trainee's Name					
Training Centre					
PMR: SR Number/Case Number	1	2	3	4	5
Clarity of the PMRs Grade - A, B, C, D, E	A	A	A	A	A
	B	B	B	B	B
	C	C	C	C	C
	D	D	D	D	D
	E	E	E	E	E
Overall organization of the PMR- (diagrams/ photos/ investigations/ annexes) Grade - A, B, C, D, E	A	A	A	A	A
	B	B	B	B	B
	C	C	C	C	C
	D	D	D	D	D
	E	E	E	E	E
Medico-Legal Opinion of PMRs Grade - A, B, C, D, E	A	A	A	A	A
	B	B	B	B	B
	C	C	C	C	C
	D	D	D	D	D
	E	E	E	E	E
Overall assessment of the report Circle the Grade - A, B, C, D, E	A	A	A	A	A
	B	B	B	B	B
	C	C	C	C	C
	D	D	D	D	D
	E	E	E	E	E
Remarks:					
Trainer's Name					
Trainer's Signature:					
Please note – to certify that the person reached the satisfactory skills a C or above C should be obtained. ( 50% or more)					
A-Excellent, B-Good pass, C-Pass, D- failure, E- bad failure					



**DIRECT OBSERVATION OF PRACTICAL SKILLS – DOPS-3b****REPORT WRITING : special emphasis on how to write medico-legal opinions in complicated clinical cases**

Trainee's Name

Training Centre

MLR/Case Number:

1

2

3

4

5

Clarity/legibility of the MLRs  
Circle the Grade - A, B, C, D, E

A

A

A

A

A

B

B

B

B

B

C

C

C

C

C

D

D

D

D

D

E

E

E

E

E

Overall organization of the MLRs- (diagrams/ photos/  
investigations/ annexes)  
Circle the Grade - A, B, C, D, E

A

A

A

A

A

B

B

B

B

B

C

C

C

C

C

D

D

D

D

D

E

E

E

E

E

Medico-Legal Opinion of MLRs  
Circle the Grade - A, B, C, D, E

A

A

A

A

A

B

B

B

B

B

C

C

C

C

C

D

D

D

D

D

E

E

E

E

E

Overall assessment of the report  
Circle the Grade - A, B, C, D, E

A

A

A

A

A

B

B

B

B

B

C

C

C

C

C

D

D

D

D

D

E

E

E

E

E

Remarks:

Trainer's Name

Trainer's Signature:

Please note – to certify that the person reached the satisfactory skills a C or above C should be obtained. ( 50% or more)

A-Excellent, B-Good pass, C-Pass, D- failure, E- bad failure