



"Workshops on Training of Examiners for OSPE, OSCE & TOACS"

FACILITATORS: Dr. Shahid Hanif (AIMC, Lahore) Dr. Nadeem Hafeez Butt (AIMC, Lahore)
 Dr. Aamir Bashir (LMDC, Lahore) Dr. Robina Sohail (SIMS, Lahore)
 Prof. Sohail Khursheed Lodhi (PGMI, Lahore)

ATTENDANCE SHEET

Sr	Institutions	Name of the Faculty Member	Designation	[Redacted]	Signature
1.	Allama Iqbal Medical College, Lahore			[Redacted]	
2.	Nishtar Medical College, Multan	DR. NIAZ AHMAD BALUCH	Professor	[Redacted]	[Signature]
3.	Punjab Medical College, Faisalabad	DR. AHMAD SAEED	ASSOCIATE PROFESSOR	[Redacted]	[Signature]
4.	Quaid-e-Azam Medical College, Bahawalpur	Syed Iqbal Haider Rizvi	Professor	[Redacted]	[Signature]
5.	Rawalpindi Medical College, Rawalpindi	Dr. Rizwana Baig Dr. Syed Abdul Wahid APMO Shah	Assistant Professor	[Redacted]	[Signature]
6.	Services Institute of Medical Sciences, Lahore.	Dr. Arif Rasheed Malik	Associate Professor	[Redacted]	[Signature]
7.	Sheikh Zayed Medical College, Rahim Yar Khan	DR. SYED MUHAMMAD AJAZ ALI	ASSOCIATE PROFESSOR/HEAD	[Redacted]	[Signature]
8.	CMH Lahore Medical College, Lahore.			[Redacted]	
9.	Lahore Medical & Dental College, Lahore	DR. AAMIR BASHIR	ASSOCIATE PROFESSOR & HEAD	[Redacted]	[Signature]
10.	Wah Medical College, Wah Cantt	Dr. Babar Rashid Chughtai	Assoc Prof & HOD	[Redacted]	[Signature]
11.	Fatima Memorial Hospital College of Medicine & Dentistry Lahore	Dr. M. Khalid-eh	Associate Prof	[Redacted]	[Signature]
12.	College of Medicine & Dentistry, University of Lahore, Lahore.	Dr. Syed Muhammad Zaffar Bukharaev	Asso. Professor/Head of Department	[Redacted]	[Signature]
13.	Faisalabad Medical College, Faisalabad	Dr. Muhammad Aslam	Asso. Prof. HOD	[Redacted]	[Signature]
14.	Independent Medical College, Faisalabad	Dr. Anwar Saad Sagor	Assist. Professor & Head of Forensic Deptt.	[Redacted]	[Signature]
15.	Sargodha Medical College, Sargodha.			[Redacted]	

Format (Practical Examination / OSPE)

MBBS Second Professional

FORENSIC MEDICINE AND TOXICOLOGY

Total OSPE Stations = 10

Non Observed	8 (80%)	
Observed	2 (20%)	
Station Duration	3.5 min	
Allowed Marks	40	
General Viva Voce	40	
		20 (Internal)
		20 (External)

Non Observed Stations	4 marks each i.e. 4 x 8 = 32
Observed Station	4 marks each i.e. 4 x 2 = 8
Internal Assessment	10 marks
Yearly Workbook	10 marks
Total	100

Recommended Text Books:

- 1.** Forensic Medicine and Toxicology by Dr. S. Siddiq Hussain 22nd Edition
- 2.** Parekh's Forensic Medicine.
- 3.** Principles and Practice of Forensic Medicine by Dr. Naseeb R. Awan.

Observed & Non Observed

TABLE OF SPECIFICATIONS

Weightage: 70% Forensic Medicine & 30% Toxicology

1. Traumatology/ Firearms.
2. Traumatology/ Firearms.
3. Personal Identity/ Trace Evidence.
4. Law (Legal aspects of medical practice/ Medical aspects of law).
5. Thanatology/ Sexual Issues in Forensic Medicine.
6. Accidents in Home & Environment.
7. Asphyxia
8. Toxicology.
9. Toxicology
10. Toxicology.

Tools/ Instruments for OSPE

Models.

Weapons.

X-rays.

Microscopic / Photographic Slides.

Poisons.

Laboratory Equipments.

Specimens (Biological & Non-Biological).

Skeleton (Bones).

**OBSERVED STATIONS: ONE FORENSIC MEDICINE STATION
& ONE TOXICOLOGY STATION**

Conduct of OSPE

- The Batches for Major viva voce and Practical / OSPE exam will be the same on any particular day and will be 30 students strong each.
- All OSPE Questions will be sent by the Department of Examinations, UHS in sealed confidential envelopes to each center clearly marked for each day of Examination and shall be kept secure in our Regional Safety Lockers at respective centres.
- For any particular day of Examination the same OSPE questions will be sent to each center to maintain uniformity and standardization.
- The sealed confidential envelope containing the OSPE questions for that particular day will be collected from the UHS regional safe locker by both the Internal and External Examiners in the presence of the Principal or his nominee and the Regional Coordinator up to Two hours before the commencement of Examination.
- Each packet of examination material will contain for that particular day the complete set of 8 Non Observed OSPE Questions with keys and 2 Observed OSPE Questions with Check Lists, Rating Scales, Keys and Instructions for the candidates as well as the examiners and coordinators.
- Instruction/ questions for the candidates will be included in the examination material and should be placed on each station.
- The Practical Answer Books for stations will be sent separately to each centre one for each candidate.
- The candidates are to carry the Practical Answer Books from station to station and are to register their responses to each question at these desks separately on the same Practical Answer Sheet in the designated areas.
- Before leaving the Assessment Hall the candidate should deposit the Answer Book either at the “Marking Desk” or with the organizer as per decision of the convener.
- The answer books will be checked by both the Internal and External (4 Questions by the Internal and 4 by the External) and awards will be transferred to the Award Lists.
- Both the Award List and the Answer Books will be sent to the Examination Department on the same day.
- The candidates leaving the OSPE Hall will not mingle with candidates awaiting assessment, who are to be kept under supervision in a separate holding bay.
- Each batch of the candidates while waiting for the OSPE in the waiting area should be briefed about the OSPE process and the layout of the OSPE hall as well as the flow of candidates through the hall. They are not to bring any mobile phones or any other technology that could be used for communication within the premises of the examination centre.
- Any student found having mobile phone or any other electronic medium should be removed from the OSPE examination centre and an Unfair Means Case registered against him/ her.
- All candidates will complete a mandatory “Feedback Proforma” and deposit the same confidentially in the sealed collection boxes provided.

MBBS Second Professional Examination

FORENSIC MEDICINE AND TOXICOLOGY

Objectively Structured Performance Evaluation (OSPE)

Model Paper

FOR NON-OBSERVED STATIONS

1. **For Examiner/ Coordinator (X-ray Showing "Pellet Pattern")**

- a) Name the type of firearm used. **1**
- b) Briefly describe the features of firearm entry wound by a shotgun when discharged from about one meter. **3**

Key:

- a) Smooth bored firearm. (1 mark)
- b) Single large entry wound (0.5 Mark)
Wad may be found on the entry wound (0.5 Mark)
No burning (1Mark)
No soot deposit. (1Mark)

2. **For Examiner/ Coordinator (Model Showing "Bruise")**

- a) What type of weapon can cause this lesion? **1**
- b) Describe the color changes with approximate timelines through which the lesion may pass. **3**

Key:

- a) Blunt weapon. (1 mark)
- b) Red - Fresh. (0.5 Mark)
Brown - 2-3 days. (0.5 Mark)
Blackish-Greenish - 4-7 days. (1 Mark)
Yellowish to complete healing - 7-14 days. (1 Mark)

3. For Examiner/ Coordinator (Model Showing Finger Print Patterns – Loop)

- a) Name the pattern of fingerprints. 1**
b) What are the various methods of identification? 3

Key:

- a) Loop. (1 Mark)
b) i). Subjective. (1 Mark)
ii). Objective. (1 Mark)
iii). Third party. (1 Mark)

4. For Examiner/ Coordinator (Model of Amputated Limb)

- a) Name the injury according to Qisas and Diyyat Ordinance. 1**
b) Classify hurt according to Qisas and Diyyat Ordinance. 3

Key:

- a) Itlaf-e-Udw. (1 mark)
b) Itlaf-e-Udw, Itlaf-e-salahiyat-e-udw, Shajjah, Jurh.(1 mark each)

5. For Examiner/ Coordinator (Model showing cadaveric spasm)

- a) Write whether the phenomenon is antemortem or not? 1**
b) Describe at least three differentiating features of this phenomenon from "Rigor Mortis". 3

Key:

- a) Antemortem. (1 mark)
b) (1 mark each)

<u>Rigor Mortis</u>	<u>Cadaveric Spasm</u>
i) Occurs in all muscles.	i) Occurs only in voluntary muscles.
ii) Post-mortem phenomenon.	ii) Antemortem phenomenon.
iii) Biochemical basis.	iii) Neurogenic basis.
iv) Preceded by primary flaccidity.	iv) No so.
v) Occurs after all death.	v) Occurs only in violent death.
vi) Affects whole body.	vi) Usually a group of muscles is involved.

6. For Examiner/ Coordinator (Model showing ligature mark of hanging)

Classify death through this process.

4

Key:

- i). Typical - knot at occiput. (1 mark)
- ii). Atypical - knot at any site other than occiput. (1 mark)
- iii). Complete - when weight of whole body acts as constricting force. (1 mark)
- iv). Incomplete - when part of body acts as constrictor. (1 mark)

7. For Examiner/ Coordinator (Poppy fruit)

- a) Identify the poison. 1**
- b) Name atleast three receptors through which this poison exerts its effects. 3**

Key:

- a) Poppy fruit. (1 mark)
- b) mu, Kappa, Delta, Sigma, N/OFQ, epsilon and Zeta. (1 mark each)

8. For Examiner/ Coordinator (Slide showing capsicum)

- a) Identify the poison. 1**
- b) Write its medicolegal significance. 3**

Key:

- a) Capsicum seeds. (1 mark)
- b) For torture by applying on skin, mucous membranes, by inhalation, introduction into natural orifices. (1 mark each)

FOR OBSERVED STATIONS

9. For Examiner/ Observer (Standardized subject)

Being an attending physician, record dying declaration of a victim of fatal firearm injury. 4

Key:

- a) Asks him about the detail of event. (1 mark)
- b) Read it over to him. (1 mark)
- c) Get it signed / thumb impression from victim. (1 mark)
- d) Signature of witness. (1 mark)

10. For Examiner/ Observer (Standardized subject)

Examine the alcoholic driver brought to you by police. Apply various tests to check his co-ordination. 4

Key:

Various tests can be applied:

- a) Finger-nose test with eyes closed. (1 mark)
- b) Walking on straight line. (1 mark)
- c) Button – unbutton test. (1 mark)
- d) Stance. (1 mark)

