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A REVIEW ON DUTIES OF DOCTOR IN CASE OF SUSPECTED POISONING

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Abstract: Duties of registered medical practitioner (RMP) while dealing a suspected poisoning case increases as it is a medical emergency along with the legal issues associated with it. The role of doctor is not only to follow a basic management protocol, but also to handle the legal formalities, following the treatment part. The basic treatment modalities should be supportive care, accurate diagnosis, use of toxidromes, removal of unabsorbed poison, elimination of absorbed poison and antidote administration if available. The legal documentation, following treatment should be clear and accurate. Police information should be given where necessary. The doctor is duty bound to all other legal and ethical work, concerning a poisoning case otherwise liable for punishment as per the current law. So by applying our skill and knowledge and doing our duty correctly, we doctors not only save the life of the patients but also protect the legal rights of individual or the state.

Keywords: Duties of RMP, poisoning case, management, legal formalities, toxidromes.

Introduction

Poisoning cases are a significant contributor to mortality and morbidity throughout the world. According to WHO, there million acute poisoning cases with 2, 20,000 deaths occur annually. Of these, 90% of fatal poisoning occurs in developing countries particularly among agricultural workers. Acute poisoning forms one of the commonest causes of emergency hospital admissions. The exact incidence of poisoning in India is uncertain but it has been estimated that about 5 to 6 persons per lakh of population die due to poisoning every year. [1]

When a poisoning case admitted into a hospital, the responsibility of the treating doctor increases as it a medico-legal

emergency. The doctor not only has to treat the patient as emergency but also maintain the legal formalities following the treatment.

Approach of the doctor for the management of the poisoning case should be to identify the poison, route of administration and amount of poison ingested, time of ingestion and exposure and to assess severity of poisoning. The basic principles of treatment should be to remove unabsorbed poison, use of antidotes, elimination of poison and treatment of general symptoms. [2] There has been gaining popularity of newer methods like use of activated charcoal and a variety of newer antidotes. Attention has also shifted to 'toxidromes' that is the collection of

symptoms and signs that consistently occur after ingestion of a particular toxin or drug, which is helpful in rapid identification of poison and thus saves time in evaluating and managing a poisoned patient. [3].

After the treatment/management of the patient the legal formalities should be done promptly like, accurate documentation, police information, collection and preservation of samples, arrangement for dying declaration if needed etc. according to the situation. [2,4]

Discussion

When a suspected case of poisoning comes to the emergency department of any hospital, the first contact doctors have two duties towards the patients; one is medical care and treatment, followed by the legal care that is helpful or assists the police to determine the manner. [1]

The first and the foremost are the care and treatment of the patient. The doctor in case of poisoning should not refuse to treat the case due to fear of legality. Without wasting any time the doctor should try to save the life of the patient by efficiently treating him/her and also adhere to other legal duties. Diagnosis of a case of poisoning should be based upon symptomology, history, toxi-analysis and not mere suspicion. [4]

Doctor should at once treat the patient after finding out the nature of the poison, so that appropriate and timely treatment is instituted. If the nature of the poison is not known, treatment is instituted on general lines. [5] Stoppage of further poisoning could be done by isolating the patient to the hospital. [4] Doctor must note the preliminary particulars like name, age, sex, address, occupation, date, time, brought by, history, identification mark etc. [1, 5]

Collect the samples where the poison should be likely present i.e. vomitus, urine, blood, saliva, remnants, garments etc. It will not only helpful for toxi-analysis but also help in legal matters if required. [1] Maintain a proper written record of the findings and the treatment given. [2,6] In every case of suspected poisoning a RMP whether private

or government must preserve all the evidence and these should be properly labeled with name of the patient, material preserved, date of examination and should be kept in the doctor's custody until required for transmission or chemical analysis. If the RMP failed in this duty and proved that it was done with the intention of screening the accused; the doctor will be liable to be charged with causing the disappearance of evidence under Sec. 201IPC; otherwise it is merely an error of judgment for which the doctor cannot be held responsible. [2]

So far as the police information in poisoning case is concerned, in a Private hospital / set up if the manner is accidental or suicidal there is no legal obligation to notify the police. But in a Government hospital/set up every case has to inform to the police regardless of nature. [6] In homicidal poisoning, the doctor is bound, under Sec. 39 CrPC to communicate the fact to the nearest police station or magistrate irrespective of the type of hospital/set up. Non-compliance is punishable under Sec. 176 IPC.[2] Suicidal poisoning is not bound to inform police since Sec. 309 IPC is not included in the section of IPC for which information has to be given under Sec. 39 CrPC. [2] The doctor is not liable for giving notice, if the case has already been reported to the police by the village headman, village watchman or any other officer required under the law to give such information under Sec.40 CrPC. [2] Mostly, the doctors will not be in a sound position to label each case to one or the other category (manner). It is therefore, advisable to report each and every case of suspected poisoning to the police and the question of suicide, accident or homicide is to be considered by the police. [5]

If the treating doctor is summoned by the investigating police officer (Sec. 175 CrPC), the doctor is bound to give all information about the patient. Concealing the information is punishable under Sec.202 IPC and giving false information to police is punishable under Sec.193 IPC [1] and Sec.177 IPC. [5]

Recording of dying declaration is necessitated when the patient is serious. It is preferable to call a magistrate for this purpose but, if death appears imminent, or

if there is likelihood of delay in arrival of the magistrate, the attending doctor is duty bound to record the statement himself/herself [5] under Sec.32 IEA. [1] Even when the statement is recorded by the magistrate, the presence of doctor is advocated for certifying the 'compos menti' or the sound mind of the dying patient. [5]

In accidental poisoning, if there is any indication of danger to the general public, for example, food poisoning, contamination of public drinking water, spurious alcohol etc., the doctor must notify the public health authorities immediately.[5]

During the course of treatment, if the patient dies before the exact diagnosis could be made out, or was brought dead to the hospital the doctor must report it to the police without issuing a death certificate. Issuing false certificate by the doctor in these cases is punishable under Sec.193 IPC. The police may prepare an inquest and send the body for autopsy. The doctor conducting the autopsy in such case must exercise care in collecting viscera and fluids for sending it to the chemical examiner for toxicological analysis.[5]

Finally, if required by the court of law as expert witness the treating physician or

the autopsy surgeon must attain the court and give the evidence regarding the case he/she examined under Sec.45 IEA.[1]

Conclusion

So the role of doctor in dealing with a poisoning case is doubled in respect to the patient and also to the state. Keeping in mind the prime duty of a doctor which is better management of patient never omit the legal duty, which the doctor must do. For the management of patient the doctor should be updated himself/herself regarding the recent trends of treatment and also by establishing a clinical toxicology unit, where possible. So far as the legal duty is concerned the doctor must have the detail records of the case, collect the poisoned samples, inform police, magistrate or public health authority where necessary, conduct dying declaration and autopsy according to the situation and produce himself/herself as expert witness whenever asked/summoned by police or court.

In all such cases of poisoning what a registered medical practitioner should do both empirically as well as legally in managing such cases and serving the patient and the state at large.

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