

6

Forensic

Revision - 2016 - (Traumatology)

3

75

Department of Forensic Medicine & Toxicology

ANMC, Lahore

Third revision test

MCQ: 20

Time allowed : 30 mins

Q 1: The medicolegal exam of a victim of physical assault shows that bruises are brownish in colour, lacerated wound shows pus formation and abrasion have reddish brown scab. The time between exam and infliction of injuries is

- a) 6-12 hrs
- b) 12-24 hrs
- c) 36-48 hrs
- d) 7-10 hrs
- e) 12-14 hrs

Q 2: Multiple irregular deep incised wounds on front of neck suggest

- a) Suicide
- b) Homicide
- c) Accident
- d) Attempted suicide
- e) Fabricated wound

Q 3: Heaping up of epithelium in grazed abrasion denotes the

- a) Type of weapon used
- b) Direction of force
- c) Age of injury
- d) Manner of infliction
- e) Velocity of weapon

Q 4: In run over accident the tyres of heavy truck dragged away skin from the deeper tissues. The injury is known as

- a) A : Split laceration
- b) B : Cut laceration
- c) C : Avulsion
- d) D : Tear
- e) E : Stretch laceration

Q 5: The dislocation of major joints falls under section

- a) Jurh ghair jaifah munaqilah
- b) Jur jaifah

- c) Jurh ghair jaifah Mutalahimah
- d) Jurh ghair jaifah hashimah
- e) Section 337- L1

Q 6: On examination of a victim of physical assault there was a lacerated wound 5cm*2cm, lacerating the flesh on the side of the neck. The injury will be

- a) Shajjah I Mudiah
- b) Shajjah I Khafifah
- c) Shajjah I Damighah
- d) Jurh Ghair Jaifah Mutalahimah
- e) Shajjah I mutalahimah

Q 7: Where does a lacerated wound appear like an incised wound?

- a) Abdomen
- b) Thorax
- c) Hand
- d) Forehead
- e) Spine

Q 8: Greenish color in a contusion is due to

- a) Hemosiderin
- b) Haemotoidin
- c) Biliverdin
- d) Bilirubin
- e) Hemoglobin

Q 9: Tailing signifies

- a) Gaping of wound
- b) Direction of wound
- c) Elasticity of skin
- d) Healing of wound
- e) Wrinkling of skin

Q 10: Clean incised wound heals by

- a) Primary intention
- b) Secondary intention
- c) Excessive scarring
- d) Neutrophil invasion

e) Macrophage invasion

Q11: In deep incised wounds, Langer's lines determine

- a) Direction
- b) Gaping**
- c) Shelving
- d) Healing
- e) Beveling

Q 12 : Pus formation in a wound is seen mostly around

- a) 6-12 hours
- b) 12-24 hours**
- c) 36-48 hours
- d) 3-5 days
- e) 5-6 days

Q 13: A 20 year old male was killed by dacoit. he subsequently put the body on railway track to show his death as an accident. The histochemical examination proved negative vital reaction because of absence of following enzyme activity in wounds:

- a) Creatinine kinase
- b) SGOT
- c) SGPT
- d) Alkaline phosphatase**
- e) Prostate specific antigen

Q 14: Concealed puncture wounds are found in

- a) Firearm
- b) Canthus of the eye**
- c) Foot
- d) Hand
- e) Thighs

Q 15: Bruise present on the following area does not show typical color changes

- a) Ear lobes
- b) Tongue
- c) Conjunctiva**
- d) Genitalia
- e) Nose

Q 16: When the weapon after penetrating the body tissues comes out from other side, injury is termed as

- a) Perforating wound**
- b) Penetrating wound
- c) Double entry wound
- d) Wrinkled wound
- e) Factitious wound

Q 17: Stretch laceration are caused due to

- a) Tangential impact**
- b) Horizontal crushing impact
- c) Irregular direct impact
- d) Blunt perpendicular impact
- e) Vertical impact

Q18: : Tentative cuts occur in which injury

- a) Homicidal
- b) Suicidal**
- c) Fabricated
- d) Self inflicted
- e) Accidental

Q 19:: Postmortem differs from ante mortem wounds by

- a) Gaps on incising
- b) No clots
- c) Absence of erythema and cellular changes**
- d) Contamination of the wound
- e) Coagulation factors increases

Q 20 : An attempt of application of force or violence to any person is called

- a) Hurt
- b) Assault**
- c) Battery
- d) Injury
- e) Wound

TIME: 25 Minutes
DATE: 10-2-2014
1. where d
like an
a) b)

AZRA NAHEED MEDICAL COLLEGE
DEPARTMENT OF FORENSIC MEDICINE AND TOXICOLOGY
MONTHLY TEST 3RD YEAR MBBS

TIME: 25 Minutes
DATE=10-2-2014

TOTAL MARKS: 25
Roll No 32

TRAUMATOLOGY

1. where does a lacerated wound appear like an incised wound

- a) abdomen
- b) thorax
- c) hand
- d) forehead
- e) spine

2. greenish colour in a contusion is due to X

- a) hemosiderin
- b) haemotoidin
- c) bilirubin
- d) biliverdin
- e) haemoglobin

3. tailing signifies

- a) gaping of wound
- b) direction of wound
- c) elasticity of skin
- d) healing of the wound
- e) wrinkling of skin

4. a clean incised wound heals by

- a) primary intention
- b) secondary intention
- c) excessive scarring
- d) neutrophil invasion
- e) macrophage invasion

5. in deep incised wounds, Langer's lines determine

- a) direction
- b) gaping
- c) shelving
- d) healing
- e) beveling

6. scab is formed over an abrasion in about

- a) 4 to 6 hrs
- b) 6 to 12 hrs
- c) 12 to 24 hrs
- d) 2 to 3 days
- e) 4 to 5 days

7. pus formation in a wound is seen mostly around

- a) 6 to 12 hrs
- b) 12 to 24 hrs
- c) 36 to 48 hrs
- d) 3 to 5 days
- e) 5 to 6 days

8. bruise attains green discoloration by

- a) 1 days
- b) 2 to 3 days
- c) 5 to 6 days
- d) 3 to 4 days
- e) 6 to 7 days

9. concealed puncture wounds are found in

- a) firearm
- b) canthus of the eye
- c) foot
- d) hand
- e) thighs

10. bruise present on the following area doesn't show typical colour changes

- a) ear lobes
- b) tongue
- c) conjunctiva
- d) genitalia
- e) nose

11. when the weapon after penetrating the body tissues comes out from other side, injury is termed as

- a) perforating wound
- b) penetrating wound
- c) double entry wound
- d) wrinkled wound
- e) factitious wound

12. brush injury is due to

- a) friction
- b) electric shock
- c) scalds
- d) bullet injury
- e) electrocution

13. tentative cuts occur in which injury

- a) accidental
- b) homicidal
- c) suicidal
- d) fabricated
- e) self inflicted

14. punctate basophilia is diagnostic for

- a) arsenic poisoning
- b) mercury poisoning
- c) lead poisoning
- d) copper poisoning
- e) zinc poisoning

15. postmortem differs from antemortem wound by

- a) gaps on incising
- b) no clots
- c) absence of erythema and cellular changes
- d) contamination of the wound
- e) coagulation factors increases

16. mee's lines are seen in

- a) teeth
- b) nails
- c) bones
- d) cornea
- e) skin

17. milk rose complexion followed by hyperpigmentation is seen in chronic poisoning

- a) mercury
- b) arsenic
- c) copper
- d) lead
- e) phosphorous

18. hatter's shake is seen in chronic poisoning

- a) arsenic
- b) copper
- c) lead
- d) mercury
- e) zinc

19. chemide antidote used in acute mercury poisoning is

1. sodium formaldehyde sulfoxylate

- b) ferric oxide
- c) pot. ferrocyanide
- d) mag. sulphate
- e) pot. permagnate

20. features most commonly encountered in chronic lead poisoning is

- a) lead line
- b) lead palsy
- c) dry belly aches
- d) encephalopathy
- e) hatters shake

21. in chronic lead poisoning diagnostic increase in urinary level are of

- a) coproporphyrin
- b) bile
- c) urobilinogen
- d) calcium
- e) haem

22. specific antidote of copper

- a) potassium permagnate
- b) potassium ferrocyanite
- c) albumin
- d) sodium thiosulphate

e) BAL

23. poison which can be detected in burnt bones

- A) copper
- b) zinc
- c) mercury
- d) arsenic
- e) lead

24. in acute arsenic poisoning the maximum concentration of arsenic is detected in

- A) muscles
- b) liver
- c) kidneys
- d) keratin tissues
- e) hair

25. metal fume fever can be seen in poisoning

- A) arsenic
- b) lead
- c) zinc
- d) mercury
- e) iron