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CASE REPORT

Forged Wound Alleged to be Caused with Firearm Weapon: An Injury Case Report from Clinical Forensic Medicine Unit Presented at Tertiary Care Level Teaching Hospital in Malwa Region of Punjab

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ABSTRACT

Fabricated and self-inflicted injuries are often encountered in medico legal practice. These injuries are usually produced to mislead investigating agencies, create false evidence, or support forged allegations. The present case highlights an instance where a fabricated injury was falsely alleged to be caused with firearm weapon, but medical examination revealed characteristics of an incised wound caused by a sharp-edged weapon, not by a projectile as alleged by the patient.

KEYWORDS

• Firearm Weapon • Fabricated Wound • Medico-Legal Examination • Injury Report

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INTRODUCTION

Fabricated wounds (fictitious, forged or invented wounds) are those produced by a person on his own body (self inflicted) or by another with his consent. Fabricated wounds are usually superficial injuries, produced by a person on his own body (self-inflicted) or by another person acting in agreement with him (self-suffered). The fabricator usually produces or make someone to inflict that much injury as he thinks necessary to support his version of story/incident of assault. The injuries are, therefore, usually multiple, superficial and not situated over vital parts of the body. Such wounds are commonly on the front of the body, but may be on those parts of the back that can easily be approached by hands or on the top of the head. The direction varies according to the site; for example, from above down wards and inwards on upper arm or multiple oblique or vertical interlacing superficial incisions on the abdomen. Though incisions are the usual wounds, yet punctures or other wounds can be there. If sustained by friendly hands with hep of someone location can be anywhere on the body.

Key characteristics of a fabricated firearm injuries are:

1. **Superficial:** The wounds are usually skin deep.
2. **Absence of typical features suggestive of injuries sustained with firearm weapon:** such as an abrasion collar, blackening, tattooing and singeing of hairs.
3. **Pattern of injuries:** symmetrical or parallel or crisscrossing linear incisions suggestive of a sharp object (Dangerous weapon).
4. **Location of injury:** on Non-Vital or near vital parts of body parts.
5. **Absence of defensive wounds:** Absence of struggle marks raise suspicion of fabrication.
6. **Doubtful History:** The motive is often to create a false accusation of assault against an enemy, to make a minor injury seem more serious, or to feign self-defense.
7. **Age of Injury:** Disparity between alleged time of incident by the Victim and carefully estimated time since assault by the examining Doctor can reveal the facts.

CASE REPORT

Alleged History/Gist: A young male aged 42years old came to emergency of Guru Gobind Singh Medical College and Hospital at Faridkot in Punjab in the midnight, accompanied by family members and a few friends. On arrival, patient alleged history of assault with firearm weapon when he was going to open his shop. He was allegedly attacked by a person with a baseball bat and firearm weapon on his left thigh. Victim allegedly saved himself by running away and subsequently visited a nearest Primary care level Govt. Hospital where he was offered first aid treatment and then was referred to tertiary care level hospital.

Medico-legal Examination: After obtaining due consent for examination, Patient was found to be cooperative, conscious and well oriented to the time, place and person with pulse rate 92 per minute and Blood Pressure 118/92 mm of Hg.

Examination of clothing: Linear cut was found to be present over corresponding area of lower worn by the patient at the time of examination. Clothing preserved and handed over to police duly labeled, signed and sealed for further examination by the Baliistic expert for detection of presence of Gun powder if any.

Two Injuries reported to be present on the Patient:

1. T-shaped lacerated wound measuring 3.2 cm x 0.2 cm was present over right side forehead, 4 cm lateral to the midline. Margins were irregular. Clotted blood was present in and around the wound.

2. Incised wound, 1 cm x 0.3 cm, elliptical in shape with both angles acutely angulated, was obliquely placed over left thigh, 21.5 cm below the level of left A.S.I.S. (anterior superior iliac spine). No signs suggestive of of blackening, tattooing or singeing was found to be present around the wound.

Opinion: Probable Duration of Injuries was opined to be within 6 hours. Kind of Weapon used for infliction of injury number 1 was declared as blunt and for injury number 2 as sharp edged. Nature of injuries based on x-ray examination revealing no bony injury and treating surgeon's notes was declared as simple. Additionaly x-ray film examination of left thigh was evident of presence of a well-defined hyper dense opacity, suggestive of a Metallic density foreign body lying in soft tissue of the middle of left thigh with No evidence of any injury to the femur bone.

Figure 1: Showing presence of Injury with clean cut regular margins present over the left thigh region

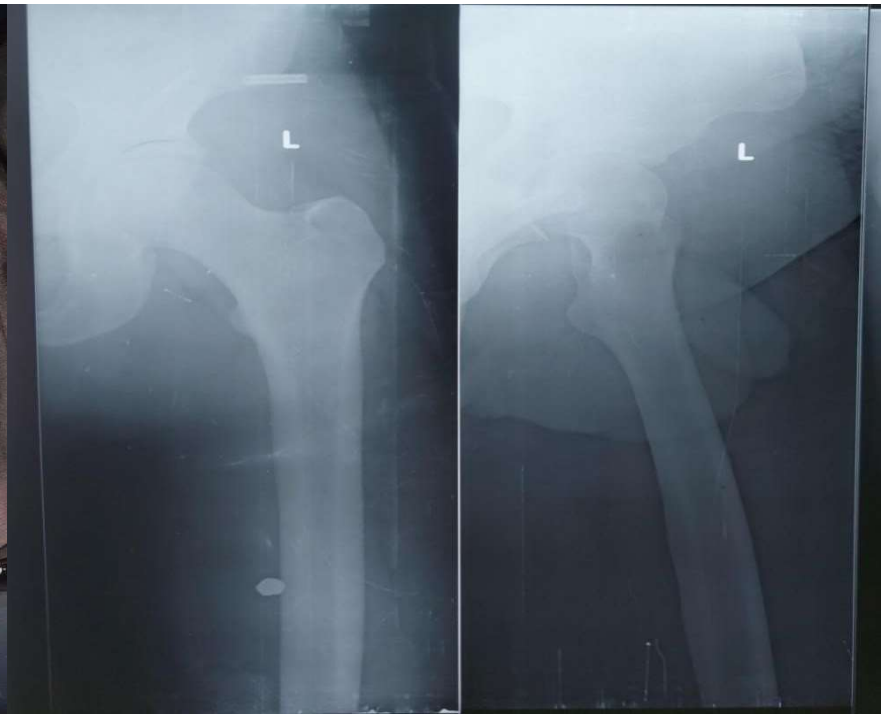

Figure 2: Showing presence of metallic density foreign body implanted in left thigh soft tissue corresponding to injury no. 2 of Injury report

DISCUSSION

Fabricated firearm wounds are often encountered to meet objective of falsely implicating someone. Genuine firearm wounds exhibit key features like blackening, tattooing, inverted or everted wound margins, and burning of hair or skin depending on the firing range. In contrast, incised or stab wounds show clean-cut margins with acute angles and absence of surrounding soot or tattooing. In this case, the alleged 'firearm' injury on the thigh displayed characteristics of injury caused with sharp edged weapon instead of a firearm projectile entry wound. The absence of firearm gunshot residues or associated features like abrasion collar, confirmed fabrication. Such cases highlight the importance of careful medicolegal examination of a wound, clothing and correlation with the alleged history.

CONCLUSION

This case illustrates the medicolegal importance of differentiating fabricated injuries from genuine firearm wounds. A detailed wound examination, proper documentation, and correlation with the alleged circumstances are essential to arrive at a correct medico-legal opinion and prevent false implication.

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