**Case 1 (SCE 5 2011.1)**

**You are the Consultant in an urban ED, on a busy shift. You receive ambulance pre-notification about a domestic dispute. They are transporting 2 patients both with shotgun wounds. ETA is 10 minutes.**

- **Patient 1: 46 year-old male with wounds to his left chest and abdomen.**
  **GCS 12 (E3, V4, M5); HR 110/min and thready**
  **BP 80/p He is on high flow oxygen and has IV saline running.**

- **Patient 2: 43-year-old female with minor wounds to her left forearm. Her vitals are stable.**

**Question 1:** Outline the issues involved in this scenario.

**Question 2:** The ambulance arrives. The male patient is in shock despite 2 litres of normal saline; his GCS has fallen to 8. His chest is hyper-resonant on the right, with bilaterally reduced breath sounds. He has an acute abdomen. Outline your approach to his management.

**Question 3:** You have initiated management of this patient. A CXR is ordered. Describe and interpret this film.

**Question 4:** The male has been transferred to theatre. While you are reviewing the female, the police ring to advise you of her husband's possible arrival. He is the suspected perpetrator, and may be armed. Outline your response.

**Question 5:** In general, outline the principles of forensic evidence collection.