

FORENSIC MEDICAL ASPECTS OF GUNSHOT INJURIES INFLICTED BY SPECIAL WEAPONS

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ANNOTATION

Forensic medical examination of gunshot wounds is the most complex problem of domestic and foreign forensic medicine. A large amount of knowledge and practical observations on injuries from standard samples of hand-held firearms has been accumulated. The emergence of new, unique samples of special-purpose weapons requires forensic medical professionals and criminologists to conduct a complex of morphological, spectral, forensic chemical, medical-criminalistic, radiological, and other special laboratory studies of injuries caused by such weapons. A case of performing a commission forensic medical examination with a decision on the differential diagnosis of fatal gunshot wounds caused by a specific sample of a special-purpose handheld firearm is presented.

Keywords: gunshot wound, forensic medical examination, special-purpose weapon, special reconnaissance knife, self-charging special pistol.

The importance and relevance of researching gunshot injuries to human body and clothing are confirmed by the events of recent years, when there has been a significant increase in armed conflicts and the number of crimes committed using various types of firearms worldwide.

The most widespread and diverse among OSOs are handheld firearms with a sound suppression device (SDS) - what are called silent weapons, or "silent and flameless firearms." It allows troops and special units of security forces to carry out counter-terrorism tasks and combat operations under special conditions. Conducting a full-fledged diagnostics of gunshot wounds from the main chamber of the body with a maximum permissible bullet velocity significantly complicates the use of special cartridges (SP) with reduced bullet velocity, as well as SPs in which expanding gunpowder gases are hermetically "locked" inside the cartridge case by a special rod that pushes out the bullet. All of this hinders obtaining the necessary expert information and creates prerequisites for incorrect interpretation of the obtained results and the commission of expert errors. The presence of various design-specific anti-aircraft gunpowder systems in cases of firing from a fixed position or close range significantly affects the properties of incoming firearms, which can serve as an objective prerequisite for differentiating them and similar methods. damages from various types of OSN. In our practice, there was a case of conducting a commission forensic medical examination on the fact of being liquidated. From the case materials, it is known that during the counter-terrorist operation, a. was blocked by a special forces unit in the basement of one of the private houses, he was unable to break free from the encirclement and unnoticedly leave the hiding place. As a result of the special operation, he received a fatal gunshot wound to the head. During the forensic examination of the corpse, traditional for such cases, expert tasks were set. One of the questions concerned the determination of the specific type of weapon that was destroyed. External examination of the corpse revealed:..."on the skin in the area of the right mastoid process (auricular region) 173 cm from the plantar surface of the feet, there is a wound of irregular oval shape with uneven and fine-fistulous edges, total size 0.8×0.7 cm, with a cone-shaped tissue defect in the center measuring

0.5×0.4 cm. Along the edges of the wound, more often in its upper part, there is a dark brown sedimentary band up to 0.3 cm wide and 3 radial tears of the epidermis up to 0.2-0.3 cm in length with local skin dislocation. In the soft tissues surrounding the wound, a dark red hemorrhage of irregular oval shape, measuring 4.5×3.5 cm, was detected, with the largest area located anterior and inferior to the wound itself (near the right auricle). In the central part of the wound fundus, a perforated defect of the skull bone (behind the right mastoid process) was palpated...."

According to specialized literature, copper was found on all contactograms in the wiping belts of cotton wool targets during shots from the PSS. The decrease in airflow velocity and temperature due to the cutting off of gunpowder gases inside the cartridge case led to the appearance of a homogeneous coloring from copper particles only at close distances (support - 15 cm). The diameter of the spot did not exceed 3 cm. At distances of 30-150 cm, only single (1-3) point inclusions of copper appeared. Appearance of an eraser in the belt for injuries caused from a distance to the support, is explained by the insignificant breakthrough of gunpowder gases from the SP 4 casing. The insignificant amount of molybdenum, its elevated melting point compared to copper, caused this metal to be detected in the rubbing belts at distances of 15 cm; in the form of a group of point inclusions at distances of 5-30 cm and 1-3 inclusions at distances of 50-150 cm.

Conclusion:The study showed that currently, domestic forensic medical specialists and criminologists have accumulated sufficient scientific and practical experience that allows for the determination of gunshot injuries to a person's body and clothing from various types of weapons. The large variety of hand-held firearm samples and, accordingly, the signs of their damaging effect create significant difficulties in performing practical examinations of firearms, especially from weapons similar in caliber, power, ammunition, and other parameters.

The forensic medical aspects of injuries inflicted from individual samples of firearms with TBI have not yet been sufficiently studied. Some of them have not been studied at all to this day. The current situation prevents such examinations from being conducted at a high methodological level. All this creates objective difficulties and prerequisites for expert errors or for the refusal of experts to solve such tasks due to their lack of necessary knowledge and approved methodological materials.

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