

In the High Court of Punjab and Haryana at Chandigarh.

**CWP-17068 of 2015
Decided on 23.8.2017**

Honey Gupta

--Petitioner

Vs.

State of Punjab and others

--Respondents

CORAM: HON'BLE MR.JUSTICE RAKESH KUMAR JAIN

Present: Mr. Naveen Batra, Advocate, for the petitioner

Ms.Sunint Kaur,AAG, Punjab.

Rakesh Kumar Jain,J: (Oral)

This petition is filed for seeking a direction to respondent Nos. 1 to 4 to take appropriate action against respondent Nos. 10 to 13 allegedly for causing the death of the wife of the petitioner by indulging in unfair practice.

After notice, the respondents have filed their reply,

On 05.05.2017,this Court had passed the following order:-

“A perusal of the reply filed by

respondent No.3-Chief Medical Officer, Hoshiarpur, indicates that on account of petitioner having not joined inquiry, inquiry report (Annexure R-1) has been prepared observing that no definite opinion could be concluded regarding the negligence on the part of treating doctors, by Gynaecologist & Anaesthetist.

I have gone through the report. It is apparent that the inquiry has been conducted casually.

Before issuing notice to the other respondents, it is directed that the Director, Health Punjab, will constitute a committee of doctors to inquire into the complaint of the petitioner and submit its report regarding conduct of the alleged negligence of the treating doctors.

Taking into consideration the provisions of the Indian Medical Council (Professional Conduct, Etiquette and Ethics) Regulation, 2002, record of Charan Kamal Hospital and Aman Hospital be also considered to see the nexus of two hospitals and determine the partum as alleged in the complaint i.e. sending new born child to the other hospital for post natal care.

To come up on 23.08.2017 for filing the report of the committee”.

Pursuant thereto, the respondents have produced in a sealed cover the proceedings of the meeting of the Committee dated 09.08.2017. The Committee has opined that there is no negligence on the part of the doctors and the same is reproduced below:-

PROCEEDINGS OF THE MEETING OF THE
COMMITTEE OF DOCTORS HELD ON 09.08.2017 IN THE
OFFICE OF DIRECTOR HEALTH AND FAMILY WELFARE
PUNJAB FOR CONDUCTING AN INQUIRY.

In pursuance of Court orders in CWP No.17068 of 2015 Honey Gupta Versus State of Punjab constituted a committee of following doctors to inquire into the complaint of the petitioner regarding conduct of alleged negligence of the treating doctor:-

Sr No.	Officer	Status
1	Dr. Rajiv Bhalla, Director Health & F.W. Punjab	Chairman
2	Dr. Jasmeet Bawa, Deputy Director, O/O Director, Health & F.W. Punjab (Incharge PMH)	Member
3	Dr. Avneet Kaur, Gynecologists, Deputy Director, O/O Director, Health & F.W. Punjab	Member
4	Dr. Paramvir Singh, Ortho Surgeon, Assistance Director, O/O Director Health & F.W. Punjab	Member
6	Dr. Amrik Singh Cheema, Medicine, Civil Hospital, Mohali	Member
7	Dr. H.S. Cheema, Surgery, Civil Hospital, Derabassi	Member
8	Dr. Vega, Specialist Anaesthesia, Civil Hospital, Mohali	Member

The committee reviewed all the made available record by the respondent and the concerned hospital Gur Charan Kamal Hospital, Aman Hospital, Hoshiarpur and CMC, Ludhiana.

The committee also recorded statement of Dr. Kanwaljit Kaur, Dr. Charanjit Singh, Dr. Taru Kapoor and complainant Honey Gupta.

As per the record of Gur Charan Kamal Hospital, Hoshiarpur the following sequence of events was verified.

1. Patient Shifali Gupta was admitted on 08.03.2015 at 12.30 PM.

2. At the time of admission the patient was 39 weeks and 6 days and her expected date of delivery was 09.3.2015. She was admitted with the chief complaint of pain abdomen. The Hospital conducted all the required investigations which were within normal limits. She was put on the treatment.

3. At 5.00 PM the same day the patient was reexamined and the Gynecologist decided to conduct a caesarian section because meconium stained amniotic fluid was noticed after artificial reapture of membranes.

4. Regular monitoring of the vital parameters was carried out from the time of admission.

5.At 5.30 PM caesarian section (LSCS) under spinal Anaesthesia was carried out.

6.An underweight (1.6 kg) female child was delivered. The newborn was referred to Aman Hospital, Hoshiarpur as the condition of the child was critical due to aspiration of meconium. Intervention and care of highly specialized nature was warranted. Dr. Taru Kapoor of Aman Hospital, Hoshiarpur is neonatologist and the child was put under her care.

7.At 8.30 PM patient felt restless and had headache. Blood Pressure was recorded as 160/100 and pulse rate was 100/min. Urine albumin was 1+. The doctor suspected "Imminent eclampsia".

8.Required treatment for the same was started with injection MgSO₄. Vitals were continuously monitored.

9.By 10.30 PM patient showed signs of improvement BP came down to 130/90 mm of mercury and pulse rate was recorded as 90/min. The treatment for this condition continued till 9.30 AM, 09.03.2015, when the doctor noticed pallor. BP was recorded as 110/70 mm and pulse rate was 108/min. Hb was 6.3 grams. Doctor felt the need for blood transfusion.

10.AT 11.00 AM three units of blood were arranged and blood transfusion was started. Injection Oxytocin was also started in a drip.

11.Patient's vitals kept fluctuating.

12.At 1.30 PM the doctor explained the condition of the patient to her relatives. At this point of time injection dopamine was also started for stabilization of BP.

13.The supportive treatment continued till 3.30 PM when the doctor again explained the patient's condition to the relatives and told them that the patients needed to be referred out to some tertiary care centre for further management.

14.At 4.30 PM the patient was finally put on an ambulance with their accompanying doctor and referred to CMC Ludhiana.

15.AT 6.50 PM, 09.03.2015 patient arrived at

CMC Ludhiana, where she was admitted in emergency with a diagnosis of “Post Partum eclampsia with status of LSCS done outside with Hypovolemic shock, with Post Partum haemorrhage (PPH) and Disseminated Coagulation (DIC).

16.The patient was immediately taken up for Exploratory Laprotomy under General Anaesthesia (GA) on emergency basis.

17.On 11.03.2015 patient complained of weakness of lower limbs, for which opinion of neuro surgery department was sought. An MRI of spine was carried out and an Epidural Haematoma measuring 16 cm was found at the level of D4 to D10.

18.On 12.03.2015 a surgery of spine was performed under GA to evacuate Haematoma.

19.Patient was kept in ICU CMC Ludhiana for her post surgical care and management as per available record.

20.As per the hospital of CMC Ludhiana the relative of the patient took their patient away from hospital on 20.03.2015 against medical advice (LAMA).

After diligent examination of all the record available to the committee made the following observations:-

1. The patient unfortunately suffered from the complication of pregnancy/delivery.
2. These complications are “known complication” as per medical books.
3. The attending doctors at Gur Charan Kamal Hospital, Hoshiarpur, Aman Hospital Hoshiarpur and CMC Ludhiana gave every possible treatment which was warranted and deemed fit for the mother and child at all stages of the morbid condition timely.
- 4 The occurrence of “Epidural Haematoma” at level D4 and D10 of spine, which caused neurological deficit could be possible consequence of DIC.
5. There seems to negligence on the part of treating doctors at all levels as timely treatment was provided to patient for all complications.

In view of the above, I do not find any ground to interfere in this petition for the purpose of granting the prayer made by the petitioner. Hence, this petition is hereby dismissed.

23.8.2017
rr

(Rakesh Kumar Jain)
Judge

Whether Speaking/Reasoned:

Yes/No.

Whether Reportable:

Yes/No.