

Office of the West Bengal Clinical Establishment Regulatory Commission

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Case Reference: INT/KOL/2023/187

Present: Justice Ashim Kumar Banerjee (Retired), Chairman

Dr. Sukumar Mukherjee,

Dr. Makhan Lal Saha

Sri. Sutirtha Bhattacharya, IAS (Retd)

Mr. Rakesh Basu ..... Complainant

- Versus -

i) Ramkrishna Sarada Mission Matri Bhavan, (ii) IRIS Multi Speciality Hospital,

(iii) Peerless Hospitex Hospital and Research Centre..... Respondent

Heard on: October 13, 2023

Judgment on: December 5, 2023.



## BACKDROP

Payel Nandy aged about 32 years gave birth to a child on August 26, 2023 at Ramkrishna Sarada Mission Matri Bhavan, the clinical establishment above named (hereinafter refer as CE). The concerned gynaecologist informed the complainant, ill-fated husband of the deceased lady Payel Nandy, both mother and the child were fine and they would be discharged by August 30/31, 2023. At about 10 am on August 30, 2023 the complainant received a call from the hospital that his wife was running at a high temperature and was found to be dengue positive. CE had no infrastructure to treat dengue patient hence, she should be immediately removed from the CE.

The complainant rushed to the CE and was compelled to transfer her to IRIS Multi Speciality Hospital on August 30, 2023 and got his wife admitted under Dr. Anirban Das. On August 31, 2023, when he visited Payel he saw her deteriorating. She was not able to move. Dr. Das assured him that there was nothing to be worried about as it was a common symptom of dengue.

On the insistence of the complainant the patient was discharged and was shifted to Peerless Hospital on the same day. The patient got admitted under Dr. Raja Basu at Peerless. Her blood pressure was low. She was taken to the ICU. During treatment at Peerless Hospital, the patient expired on September 2, 2023 at 3.50 PM.

## COMPLAINT

Being aggrieved Rakesh Basu, the ill-fated husband of the deceased Payel Nandy, filed a complaint before us on September 21, 2023. We gave notice to all the three hospitals and ask for their response.

## RESPONSE

### RAMKRISHNA SARADA MISSION MATRI BHAVAN

According to the first CE, they did not have any infrastructure for management of advanced dengue patient as they do not have any ITU or ICU to treat any critical care patient. The concerned patient was having temperature. Initially she was conservatively managed. On receipt of the blood report the family was advised to take her to a higher setup.

## RELEVANT EXTRACT

*"According to the complainant Mr. Rakesh Basu the patient including her baby was perfectly alright upto 29.08.2023 visiting hours (4.40p.m). According to the hospital record enclosed details of B.H.T from 26.08.2023 to 29.08.2023 evening, the same is being found that patient was quite well but she developed mild fever at 4.40 p.m (99.8<sup>0</sup> F) and developed fever at 5.45 p.m (104.8<sup>0</sup>F) and administered treatment accordingly by providing Pyregesic 650 mg (oral). Also*





Doctor advised for Blood Investigation – **Copy of advice enclosed- Annexure- 2.**

On 30.08.2023 as per hospital record she was pursuing the same high fever  
**Temperature Charet enclosed- Annexure- 3**

Patient was stable, subsequently the Blood Report collected from our own laboratory on 30.08.2023 at about 12.45 p.m and reported Dengue Ns1 - +Ve-  
**Text Report enclosed- Annexure- 4**

As there was no infrastructure for management for advanced Dengue patient in our hospital. i.e, we have no I.T.U or I.C.U, which has already been informed to the guardian of the patient on earlier occasion and Mr. Basu being her husband signed all the terms and conditions of the hospital regarding absence of ITU/ ICU etc during 1<sup>st</sup> registration, admission and finally before operating of his wife--- **Consent copy enclosed- Annexure- 5**

Finally Mr. Basu was briefed about the status of the patient who was diagnosed as the Dengue Fever (NS1 - +ve) on 4<sup>th</sup> post operative days (from 26<sup>th</sup> August 2023 to 29<sup>th</sup> August 2023).

Mr. Basu was also briefed for better management and treatment of Dengue NS1 - +ve mother and for the safety of his wife. He was advised to take her discharge from this hospital and to try for admission in the hospital where they

*will get better treatment of Dengue NSI -+ve mother. Declaration for taking away her wife with his sole responsibility enclosed – Annexure-6*

*Ultimately as per discharge & transfer advice of concerned Doctor, the patient was discharged from this hospital on 30.08.2023 at 2.46 p.m , with the transfer report and relevant treatment records & documents. Mrs. Payel Nandy left our hospital with her husband in a stable and steady condition.*

*Copy enclosed- Annexure-7"*

### **IRIS MULTI SPECIALITY HOSPITAL**

IRIS Multi Speciality Hospital also gave their response. According to them, the patient was admitted on August 30, 2023 under Dr. Anirban Das. She was admitted at 6.40 pm on August 30, 2023 and discharged at 5.12 pm on August 31, 2023. During her stay she was put on IV fluid as per the advice of the doctor and the patient was transferred under DORB note. The LAMA document has also been annexed to the response.

### **PEERLESS HOSPITEX HOSPITAL**

The patient was admitted at Peerless Hospitex Hospital on August 31, 2023 at 6 pm under Dr. Raja Basu. She was found to be on high grade fever since last two days with multiple episode of loose stool. On August 31, 2023 she was conservatively managed. She was seen by Dr. Raja Bose, Consultant Physician,

Dr. Chandramouli Bhattacharya, Consultant Tropical Medicine, Dr. Ajay Sarkar, Intensivist and Pulmonologist, Dr. Souvik Sural, Nephrologist and Dr. Teesta Banerjee, Consultant Gynaecology. Her condition deteriorated at about 3 pm. She was ventilated at about 3 pm on September 1, 2023 she breathed her last on September 2, 2023 at 3.50 pm.

## HEARING

We have heard the complainant. We have also heard all the three hospitals. They reiterated what they had stated in their response. Our esteemed members on the panel including the medical expert evaluated the records. On our request, Dr. Milan Chakraborty, HOD, Medicine, NRS Medical College and Hospital was also present.

## DR. MILAN CHAKRABORTY

Dr. Chakraborty has also evaluated the medical records and has given his opinion that is quoted below:-

*"As per available records Mrs. Payel Nandy, 33Y/F known patient of Hypothyroidism and bad obstetrical history on antenatal check up under Ramkrishna Sarada Mission Matri Bhavan, was admitted in the said hospital for caesarean section. The Patient had undergone caesarean section on 26/08/2023. As per statement of the hospital patient was asymptomatic till 29/08/2023 evening when she developed fever. She was symptomatically treated*



and next day routine blood test along with test for malaria antigen, NS1 antigen for dengue and routine R/E were sent. She was found to be suffering from dengue fever with Transaminitis. The Patient was shifted to IRIS hospital in a clinically stable state for lack of infrastructure in Matri Bhavan.

Subsequently the patient was admitted in IRIS hospital on 30/08/2023. At the time of admission the patient was febrile and complaining of loose motion. But the vital parameters of the Patient were normal. On investigation the patient was found to be anaemic and persistent Transaminitis and the platelet count was normal. Necessary treatment was given according to standard protocol. The patient was clinically stable but suffering from persistent diarrhoea. The patient was shifted from IRIS hospital against medical advice by the patient party due to technical issues and later the patient was admitted to Peerless hospital.

At the time of admission at Peerless hospital on 31/08/2023 the patient was suffering from high fever with multiple episodes loss stool and occasional p/v bleeding with severe anemia and BP was recorded in ER 90/60 mm of Hg. Later after admission in the ward BP became somewhat stable to around 110/70 but with persistent raised pulse rate around 110 per minute. Treatment was started as per standard protocol and investigation were sent. Investigation reveals significant Transaminitis and low platelet count and P time was normal. Then the patient developed hypotension on 31/08/2023 evening and shifted to ICCU

at around 9 Pm. On 01/09/2023 the condition of the patient further deteriorated and developed polyserositis and evidence of dengue shock syndrome was noted. The patient was put on vasopressor and albumin infusion and gynaecologist opinion was sought. At around 3 pm the patient developed Peri Cardiac arrest. The patient was resuscitated and was put on invasive ventilator. On further investigation abnormality of coagulation profile were noted, USG whole abdomen showed polyserositis and empty urinary bladder. ECHO was found to be normal except extreme tachycardia. The opinion of the pulmonologist was taken. The Patient was given blood transfusion and 6 units of platelet were administered. Antibiotic and antifungal were added. What in spite of all effort the general condition the patient started deteriorating and patient developed bradycardia. Standard protocol for resuscitation were continued but in spite of all efforts the patient expired on 02/09/2023 at 3.30 Pm.

In conclusion Mrs. Payel Nandy 33Y/F with Hypothyroidism with bad obstetrical history under went caesarean section. Subsequently developed severe dengue fever with shock. The patient had an early warning of severe dengue though the medical treatment were done according to standard protocol the life of the patient could not be saved. It remains to be seen whether the patient party were properly counselled regarding the prognosis of the patient and possible complications arising out severe dengue infection by the treating doctors."



## OUR VIEW

We have considered the expert report given by Dr. Chakraborty. Dr. Chakraborty has taken immense pain to consider each and every aspect of the treatment protocol that was followed by all the three hospitals.

Since treatment protocol is beyond our scope of reference his opinion must be considered as prima-facie.

Our esteemed members are ad-idem on the issue with Dr. Chakraborty.

In case, the complainant approaches the appropriate authorised body of experts and such complaint receives a logical conclusion it would be easier for us to deal with the erring establishment, if any.

Dr. Chakraborty has observed, it has to be seen whether proper counselling was made at every stage of criticality. We would definitely go into such question once we find, there had been laxity in the treatment protocol. Unless and until the main issue is decided by the authorised body of experts it would be a futile exercise on our part to go into the other issue as to counselling.

We grant liberty to the complainant to approach appropriate body of experts, namely West Bengal Medical Council on the treatment issue. In case he succeeds, he would be at liberty to apply afresh.

The complaint is disposed of.

Sd/-

(ASHIM KUMAR BANERJEE)

We agree,

Sd/-

Dr. Sukumar Mukherjee,

Sd/-

Prof. (Dr.) Makhan Lal Saha

Sd/-

Sri. Sutirtha Bhattacharya, IAS (Retd)

*Authenticated*  
*[Signature]*  
Secretary  
West Bengal Clinical Establishment  
Regulatory Commission