Office of the West Bengal Clinical Establishment Regulatory Commission

1st Floor, 32 B.B.D Bag, West Bengal, Kolkata – 700001.

Phone:- (033) 2262-8447 , Email: wbcerc@wb.gov.in Website: www.wbcerc.gov.in

Case Reference: INT/KOL/2024/088

Present: Justice Ashim Kumar Banerjee (Retired), Chairman

Dr. Sukumar Mukherjee,

Dr. Makhan Lal Saha

Smt. Madhabi Das.

Mr. P K Janaray .....Complainant

- Versus-

AMRI, Salt lake & Peerless Hospital .....Respondent

Heard on: April 12, 2024

Judgment on: June 13, 2024.

BACKDROP

The complainant Sri P K Jana Ray is 72 years old. He is a Chartered Accountant by profession. He had already pacemaker implanted as per suggestion of the cardiologist. He approached

AMRI, Salt Lake on March 09, 2024 with the complaint of loose motion and probable gastro infection. He was evaluated at the Emergency by the Emergency Medical Officer. He was admitted at ITU. The CE did all investigations that were suggested by the treating doctor including Holter Monitor.

On the next day i.e. March 10, 2024 when Holter Monitor was running Dr. Susrut Bondhyopadhya the ITU doctor came to see him at about 3.08 pm when Dr. Bondhyopadhya pushed his neck for a while and patted the Holter Machine from out side that resulted in abnormal report. The patient relatives were immediately called and was advised pacemaker to be implanted immediately.

The patient had some doubt particularly in view of the tampering of the machine from out side as referred to above.

On the next day he got himself discharged on DAMA. He subsequently visited Peerless Hospital and consulted cardiologist there who also advised, apart from other investigations, Holter Monitor that gave a normal result.

Mr. Jana Ray has now come up with the complaint, AMRI, Salt Lake did so only for financial gain.

We asked for response from AMRI, Salt Lake. We also requested Peerless to share the medical records pertaining to Mr. Jana Ray on his visit subsequent to discharge from AMRI, Salt Lake referred to above.

AMRI, Salt Lake, in their response dated April 10, 2024, admitted the incident. According to them, pushing of the neck as stated by Mr. Jana Ray was actually carotid therapy that the patient needed to have correct reading. However, patting on the machine was denied. According to AMRI, Salt Lake in view of Pause reading calibrated by Holter machine as mentioned therein as well as noting of normal EEG, a diagnosis of Carotid Sinus Syndrome was reached at pause of Seven and Eight tenth seconds. Due to such reason, the patient was advised for a permanent pacemaker. He had similar episode in the past and any further episode of syncope could have led to "**Life threating consequence**".

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For three days admission the patient was billed for Rs. 1,23,865/- , TPA approved Rs. 1,20,150/- having a difference of Rs. 3, 715/- that was discounted.

Peerless, in their letter dated April 8, 2024, informed that Mr. Jana Ray visited the CE on March 15, 2024 for seeking for a second opinion from Dr. Devanu Ghosh Roy in OPD. According to the history given by Mr. Jana Ray, he had an episode of acute gastroenteritis, diarrhea and vomiting after taking some irregular food from out side. While at home he was feeling drowsy following severe dehydration. After repeated passing of watery stool he was feeling uneasy, confused and had a transient episode of syncope. He was a known diabetes and hypertensive patient and had no such episode of syncope in memorable past. He visited AMRI, Salt Lake closed to his home on March 9, 2024 . The patient was asked to repeat Holter Monitor and Holter Monitor did not have any significant pause and prolonged R-R and N-N interval which can indicate implantation of permanent pacemaker. He was advised routine medication at home for diabetes and hypertension.

HEARING

We have heard the parties at length. At the hearing Dr. Susrut Bondhyopadhya was present online. He admitted the incident. He would explain the situation by contending, such external intervention was required to have the correct reading of the machine. However, he would deny patting of the Holter Machine. Mr. Jana Ray, was however, consistent in contending, abnormality found out in the Holter Machine was due to the external intervention by Dr. Bondhyopadhya. It was done only to create a situation that would need implant of pacemaker. To buttress his contention, he would also contend, soon after the incident and till he was discharged on DAMA there has been constant phone calls from the CE and /or the treating doctors persuading the patient family to go for permanent pacemaker. In fact the supplier also got involved in the process. He was however, candid to say, such process stopped once he left the CE after taking DAMA.

OUR VIEW

Dr. Pradip Kumar Ghoshal

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"Patient's Name- Prodosh Kr Jana Ray

Age- 70 Years

History:- Known diabetic and hypertensive. History of treatment episode of Syncope after passing of stool. This information is obtained from the report of Peerless Hospital.

24 hours Holter monitoring in AMRI Hospital on 9.3.24 shows significant Sinus pause (max 7.8 second) at 3.08 P.M. However Holter training done in Peerless Hospital on 18/3/24 did not show any pause. This discrepancy can happen in sinus mode dysfunction.

In view of significant sinus pause, as per guideline implantation of permanent pacemaker is indicated."

Opinion of Dr. Sukumar Mukherjee,

"Complaint against Dr. Nikhil Prasun and AMRI, Salt Lake Hospital, Kolkata

Background:

A. <u>Presenting complaints</u>: Patient himself (self version)

"Myself and my wife are senior citizens. Due to loose motions and vomiting I admitted at AMRI Salt Lake emergency on 09/03/2024. They admitted me to ITU and started all testing and treatment. On 10th when Holter Machine was running (start at 11 am) at about 3.08 am.

one doctor came and pushed in my neck illegally for some seconds..... After that, within an hour, doctors from hospital calling my family members and telling that Pace Maker to be needed immediately for me..... "

B. *Presenting complaints: AMRI at the time of admission on 09/03/2024*

"Admitted with sudden onset of syncope followed by involuntary passing of urine and stool along with multiple episodes of vomiting.

Diagnosis: Cardiogenic syncope in a case of T2DM O/E. Conscious, pulse 87/min BP 120/80 mm Hg. SpO2 100% in RA, CBG 270 mg. Carotid massage done with precaution and shows 7 seconds pause. As per verbal report of Holter there is maximum pause of 7.9 seconds and multiple pause of 6 seconds. Need urgent permanent pacemaker for life saving.... Patient refused to give consent for permanent pacemaker .... Wants to take second opinion. He took discharge against medical advice on 11/03/2024."

C. Presenting complaints : Peerless Hospitex Hospital and Research Centre Limited on 15/03/2024.

"Mr. Pradosh Kumar Jana Roy 71 years male bearing registration no OP/24/044627 visited our hospital on 15/03/2024 for seeking a second opinion from senior cardiologist Dr. Devanu Ghosh Roy in OPD. According to the history given by the complainant Mr. Pradosh Kumar Jana Roy he had an episode of acute gastroenteritis, diarrhea and vomiting after taking some irregular food from out side. After repeated passing of watery stool in his washroom he was feeling uneasy, confused and had a transient episode of syncope. He was known diabetes and hypertensive and had no such episode of syncope in the memorable past……."

2nd fresh Holter was advised on OPD basis. After doing a 24 hours Holter monitoring it is concluded he is having no significant pause and prolonged R-R and N-N interval which can indicate implantation of permanent pace maker. He was advised to go home and to follow the medicines of

one Dr. J Banerjee for diabetes and hypertension which he is taking routinely. He was assured and sent home safely. He was again followed up in OPD on 15/03/2024 and again on 18/03/2024. As there were no events of syncope he was advised on 18/03/2024 a) observation b) continue medicines for DM. HTN and lipids c) review 6 months / SOS.

Analysis and Remarks:

There is divergence of opinion regarding pacemaker implantation between AMRI on 10/03/2024 and Peerless Hospital 16/03/2024.

However the patient himself denied any syncope proceeding vomiting and diarrhea.

One should not deny abnormal Holter indicating carotid sinus syncope on 10/03/2024 at AMRI which demands pacemaker implantation. The carotid hypersensitivity or prolonged carotid massage to induce transient syncope remains a vexed question as it could not be proved on subsequent follow up.

In view of considerable clinical improvement on fluid resuscitation at Peerless Hospital and normal Holter findings conservative approach has been adopted and subsequent follow up on 15/03/2024 and 18/03/2024 prompted to keep the patient under observation unless there is pressing emergency of syncope observed over a period of 6 month follow up.

It appears "time" only would reveal real state of affairs of the patient with regular follow up. "

We have considered the rival contentions as also valued opinion of two experts.

On a combined reading of the medical records as well as the opinion given by two experts it would be difficult to blame the treating doctors at AMRI Salt Lake.

Something happened at AMRI Salt Lake, at least apparent on the face of the record, that we have to rely on. Subsequent status of the patient with six days interval in between, at Peerless, would have a complete different picture.

Our esteemed member Dr. Mukherjee would opine, *time would reveal real state of affairs with regular follow-up over a period of six months.* Hence, we have to give benefit of doubt to the treating team of AMRI Salt lake.

Before we part with, we can not but be prompted to mention, this unpleasant situation followed by complaint before the Commission, is a result of lack of proper counselling of the patient and/or the patient relatives.

When Dr Bandopadhyay gave a Carotid massage followed by patting on the Holter machine (although he denied patting) a proper thorough counseling should be had before the procedure could take place. The patient family was approached after such procedure with the advice of a permanent pacemaker. This should not be the real approach that would definitely give a scope where patient would doubt as to whether the opinion was honest or not.

We hope and trust, AMRI Salt Lake and/or their treating team should take note of our observation and try to avoid such unpleasant situation to happen creating unnecessary doubt in the

mind of the patient and/ or the patient family as to the sincere approach of the treating team.

With this observation we dispose of the complaint.

Sd/-

(ASHIM KUMAR BANERJEE)

We agree,

Sd/-

Dr. Sukumar Mukherjee,

Sd/-

Dr. Makhan Lal Saha – Member

Sd/-

Smt. Madhabi Das.

Authenticated

Secretary
West Bengal Clinical Establishment
Regulatory Commission