

Office of the West Bengal Clinical Establishment Regulatory Commission

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Case Reference: ID- INT/KOL/55/2025-2026

Present: Justice Ashim Kumar Banerjee (Retired), Chairman

Dr. Sukumar Mukherjee,

Prof. (Dr) Makhan Lal Saha

Dr. Maitrayee Banerjee,

Smt. Madhabi Das.

Ms. Kajal Shaw Complainant

vs

CMRI Hospital.....Respondent/ Respondents

Heard on: June 18, 2025

Judgment on :December 04, 2025 .

On about April 24, 2025 Ms. Kajal Shaw, 31 year old female patient was admitted at CMRI Hospital for delivery. On the same day she gave birth to twins at 6.10 a.m. and she was informed that the babies were healthy and in good condition.

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The first baby had a urinary issue while the second baby was shifted to NICU due to complication of sub-coastal and inter-coastal retraction and multiple tests were conducted.

The present complaint would relate to the second child. The second child was discharged on May 4, 2025. The discharge summary would show that the baby had swelling noted in lumbo sacral region. The baby had vaccination of BCG, Hepatitis B and OPV during his stay at the hospital. After reaching home, the mother found that there had been a swelling which was having a little elevation. The baby came back for check-up on May 7, 2025 when for the first time it was noted that a syringe needle had already pierced lumbo sacral region.

The baby was admitted. She was taken to the OT and the needle was removed. He was kept on observation and discharged on May 9, 2025.

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The mother would now complain, this piercing of syringe needle on the new born was a result of hospital negligence whereas the CE would deny by contending, at the time of discharge it was not there.

From the rival contentions, it appears that the hospital authority would try to establish that the swelling region could have been interfered with at home and they did not have any response for the same.

We heard the parties in detail. We reserved our decision with a direction to the CE to refund the cost of in-house treatment of the baby on and from between May 7, 2025 to May 9, 2025 amounting to Rs. 87,063/-. The CE has already complied with our direction.

Dr. M.L. Saha, our esteemed medical member, present on line has visited the CE with Dr. Rishavedev Patra, pediatrician and examine the records. His views are extracted below:-

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Enquiry in respect of 2nd twin baby of Kajal Shaw at

CMRI on 14.11.2025

"The enquiry team of following members visited CMRI on 14.11.25 to conduct enquiry with respect to 2nd twin baby of Mrs Kajal Shaw admitted at CMRI on two occasions.

Dr. Ruchi Golash pediatrician is present but Dr. Anupam Golash is out of station. The sister on duty of NICU is present.

As per the birth record the baby was born at CMRI on 24.04.2025 at 06.10 a.m. The birth record did not show any pathology in the spin and limbs. However, this birth record was not signed by Pediatrician.

Baby was examined by Dr. Dipan at 07.05 a.m. on 24.04.2025 and as per discussion with Dr. Ruchi Golash the new born 2nd twin was advised for shifting to NICU.

On 26.04.2025 at 01.00 p.m. patient was seen by Dr. Ruchi Golash and noted a bony prominence on sacral region and

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advised for USG of Lumbo Sacral region. USG done on the same day revealed a track of 4 mm. length and suggested acute inflammatory etiology. A repeat USG was done on 03.05.2025 which revealed focal liquefaction of the prior noted fat necrosis volume of less than 1 ml. No foreign body was seen on those USG examination done. Baby was treated with antibiotics and Biotin dressing.

The baby was discharged on 04.05.2025 with a biotin dressing.

On 06.05.2025, mother of the child took a picture and sent it to Dr. Ruchi Golash where intact skin was seen. No foreign body was seen projecting out from the skin at the inflamed site

On 07.05.2025, Dr. Ruchi Golash got a call from patient's mother that something is coming out from the swelling site.

On the same day the baby was brought to the emergency and Dr. Ruchi Golash took serial pictures. These picture showed a hypodermic needle was protruding out from the wound and

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the needle was almost lying outside. Patient was admitted and surgery was done for removal of that hypodermnic needle.

Patient was taken to the operation theatre and the needle was removed. The next date baby was discharged.

After wards the baby did not come for follow-up.

As per judgment of the Commission the CE has informed that they have already refunded the charges for the second admission to the complainant.

During admission apart from plain x-ray and two USGs, no intervention was done at the same region.

OBSERVATION

During first admission of the 2nd twin baby apart from plain x-ray and two USGs, no intervention was done at the same region.

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As per hospital records, presence of foreign body inside the swelling could not be ascertained. The two USG done on 1st admission did not reveal any foreign body at this site. As such the needle has entered into the swelling during first hospital admission is unlikely. The first picture sent by the mother to the pediatrician did not show any foreign body protruding out of the skin. The dressing was changed once at home. It is very difficult to ascertain whether anyone at home tried to drain the pus by inserting this needle. Benefit of doubt should go to the CE."

We have considered the issue. The swelling at the region was admittedly not detected during birth. From the BHT it would appear, the baby had various pathological tests that would involve drawing of sample through syringe. The baby also had injections that were advised on April 24, 2025 when he was at NICU. Pertinent to note, there was no noting about the swelling of the Lumbo Sacral region. This was for the first

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time noted on April 26, 2025. It was shown to the mother on April 27, 2025 at 8.10 a.m. and this continued till his discharge. Discharge summary would also note the swelling as discussed above.

He was discharged on May 4, 2025. His mother had constant discussion with the hospital authority as informed to us during hearing. When she was asked to bring back the boy the boy came to the OPD on May 7, 2025 and he was immediately admitted at that time needle was visible coming out of the wound and through the procedure at OT the same was removed.

From the circumstantial evidence that we gather from the records we are absolutely clueless particularly after going through the observations of Dr. Saha.

According to the medical records evaluated by the medical team led by Dr. Saha, during stay at the CE, no foreign body could be located in the two USG reports. The mother of the

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child sent a photograph to the doctor that also had swelling but not a foreign body. On May 7, 2025 the foreign body appeared and the patient was immediately brought to the Emergency and procedure was done by extracting the needle.

Question would now arise, how the needle could pierce the boy. Dr. Saha has observed, it might have been done by someone after discharge for removing the pus that might have been in the swelling region.

We cannot take a definite view in absence of appropriate evidence. At the same time, the images taken by the hospital through USG before discharge, did not show any existence of foreign body.

The CE immediately took steps and removed the foreign body as soon as it surfaced as reported by the mother. However, the CE should have done it free of cost for doing the procedure which should be a day-care procedure. They charged Rs. 83,000/-.



We deprecate such practice.

The CE already refunded the amount in deference to the desire of the Commission as expressed on the date of hearing.

The direction to refund the cost of the second admission is made absolute.

We give a benefit of doubt to the CE and exonerate them from the charge.

The complaint is disposed of accordingly.

Sd/-

(ASHIM KUMAR BANERJEE)

We agree,

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Dr. Sukumar Mukherjee,

Sd/-

Prof. (Dr) Makhan Lal Saha

Sd/-

Dr. Maitrayee Banerjee,

Sd/-

Smt. Madhabi Das.

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Authenticated
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Secretary
West Bengal Clinical Establishment
Regulatory Commission