

**THE WEST BENGAL CLINICAL ESTABLISHMENT
REGULATORY COMMISSION.**

Present: Justice Ashim Kumar Roy, Chairperson.

Smt. Sanghamitra Ghosh, IAS, Vice-Chairperson.

Dr. Sukumar Mukherjee, Member.

Dr. Makhan Lal Saha, Member.

Dr. Madhusudan Banerjee, Member.

Dr. Maitrayee Banerjee, Member.

COMPLAINT ID: NAD/2017/000177.

Alam SekhComplainant.

-versus-

Nadia Maternity and Nursing Home & others.....Respondents.

Date of judgment: 20th April, 2018.

J U D G M E N T .

The case of the complainant as it transpires from the letter of complaint and the affidavit filed by him appears to be as follows.

After the daughter of the complainant conceived, she started staying at his house and a few months after, on July 28, 2017 the complainant took his daughter to the chamber of Dr. P.K. Roy. When Dr. Roy after examining her advised caesarean section for delivery and asked the complainant to get her daughter admitted at Nadia Maternity and Nursing Home. Accordingly, his daughter was admitted at the said nursing home and male child was born after caesarean section. After delivery when the complainant enquired the doctor as to the condition of his daughter, i.e. the service recipient, he did not however disclose anything and asked them to come on the next day. However, at about 10pm at night, complainant got a phone call from the nursing home. Immediately, they rushed to the hospital when the owner of the nursing home and Dr. P.K. Roy informed them that the condition of his daughter is serious, she has to be removed to Kalyani Jawaharlal Nehru Hospital. Since the condition of the daughter of complainant was serious and the Kalyani Jahawarlal Nehru Hospital is situated at a distant place, the complainant requested Dr. P.K. Roy to refer her to Krishnagar State General

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Hospital. Keeping in mind if the blood transfusion was needed the same could be obtained from Shakti Nagar Hospital. However, Dr. Roy and the owner of the Nursing home did not pay any heed to their request and referred the patient to Kalyani Jahawarlal Nehru Hospital. Accordingly, she was taken to the Kalyani Jahawarlal Nehru Hospital, initially the emergency doctor refused to admit such a serious patient but finally agreed. However, due to the delay in transfer and for want of blood at around 11am in the morning on 29 July, 2017 the complainant's daughter expired. It is his specific case that due to the negligence in patient care service on the part of the nursing home and Dr. P.K. Roy, his daughter died survived by a few days old baby. He claimed for awarding compensation.

2. Immediately upon receipt of the complaint notice was issued against the clinical establishment and Dr. P.K. Roy seeking their response against the allegation made against them and the copy of the Bed Head Ticket was called for.

3. Both the proprietor of the nursing home and Dr. Pramatha Kumar Roy filed their response in the form of affidavit. Their case stands as follows.

The patient Kalpana Bibi was in anti-natal checkup under Dr. P.K. Roy. On 18.07.2017, when she came up for check up some tests were advised and also to admit her at Sadar Hospital because her relative disclosed their financial constraints, before expected date of delivery on 17-8-2017. Thereafter, suddenly on 28-7-2017 the patient came to Dr. Roy with complain of less fetal movement and high blood pressure 180/100 mm/hg. Considering emergency she was advised to be admitted at Nadia Maternity and Nursing Home for immediate operation and anti hyper sensitive drug was prescribed. Following his advice, within 2-3 hours the patient was admitted at the said Nursing Home with BP 150/100 mm/hg. On the same day at around 5.35pm LSCS (Lower segment Cesarean section) was done by Dr. Pramatha Kumar Roy and one male baby was born, when her BP was 130/100 mm/hg. At around 6 pm Dr. P.K.Roy once again examined and at that time the patient had no complication, no bleeding per vagina, BP 100/70 mm/hg, pulse 90 pm, urine output 300 ml, oxygen saturation was 99%. Then the patient in stable condition with the baby were shifted to the general ward. At about 7 pm Dr. Roy found BP was rising and accordingly last six injection was administered. At around 8.30 pm one bout of vaginal bleeding was found which was mostly old with some fresh blood and BP was 120/80 mm/hg. Every step was taken for stopping further bleeding and the patient party was also duly informed over phone and they were told that blood may be needed. At 10 pm Dr. P.K.Roy issued immediate blood requisition, but the patient party could not arrange for the same. By that time urine output was also less and that was 200 ml between 7 pm to 10 pm. Accordingly, at about 11 pm the patient was referred to any State Medical College and Hospital for better management as the patient had less urine output and the patient party expressed their inability to arrange blood. There was no sign of internal bleeding or hemorrhage and all

vital parameter were recorded in the referral letter. It is denied that there was either any negligence or deficiency in patient care service. It is submitted that the patient party deliberately suppressed that no payment was taken.

4. Heard the complainant and the Clinical Establishment and Dr. Pramatha Kr. Roy represented by their Learned Counsel. Dr. P.K. Roy also made his submission in person. The complaint in the form of affidavit and the reply in the form of affidavit of the Clinical Establishment and Dr. Pramatha Kr. Roy and the medical file of the patient were also very carefully perused.

5. The members of the Commission with the medical back ground actively participated in the hearing and gave their valuable opinion.

6. Now on perusal of case records, we find Kalpana Bibi was attended by Dr. P. K. Roy as antenatal case. She visited him on 18-07-2017 and was advised some blood tests. The tests were not done and she presented herself to Dr. Roy again on 28-7-2017 with features of preeclampsia and blood pressure 180/100 mm/hg. The patient was admitted at Nadia Maternity and Nursing Home on 28-07-2017 and LSCS was done on same day by Dr. Roy at 6 pm. She was seen by /dr. Roy on same day at 6 pm, 7 pm, 8.30 pm, 8.45 pm, 9 pm, 11 pm and 11.30 pm. From 8 am on 29-7-2017 her condition was deteriorating due to post partum hemorrhage. Blood was requisitioned but patient party could not arrange blood in time. The patient was referred to any of the State Hospitals by the treating physician Dr. P. K. Roy. The patient died on next day on 30-7-2017 at Kalyani JNM Hospital due to shock from post partum hemorrhage.

It appears that this is a case of high risk pregnancy due to severe pre eclamptic toxemia (PET). Post partum hemorrhage (PPH) is a special risk to PET. We further find that no deficiency in patient care service by the Clinical Establishment. The patient was promptly attended by the treating obstretician and in view of PET, urgent LUCS was done on the same day. As the patient developed some post partum hemorrhage, she was attended by the treating doctor at frequent intervals at night. Since blood for transfusion could not be arranged, she was referred to any State Medical Hospital for better management. We do not find from the medical file that she was referred to Jawaharlal Nehru Memorial Hospital. She however died due to partum hemorrhage and shock.

Since, no case of deficiency in service has been substantiated this complaint stands dismissed.

Before parting with, the Commission proposes to give a note of caution to all the Clinical Establishments in the State of West Bengal that before undertaking Caesarean Section

in high risk cases, there should be adequate facilities for proper monitoring, blood transfusion facilities or there should be access to higher centre within a reasonable period of time.

Sd/-

Justice Ashim Kumar Roy
Chairperson.

Sd/-

Smt. Sanghamitra Ghosh, IAS, Vice-Chairperson.

Sd/-

Dr. Sukumar Mukherjee, Member.

Sd/-

Dr. Makhan Lal Saha, Member.

Sd/-

Dr. Madhusudan Banerjee, Member.

Sd/-

Dr. Maitrayee Banerjee, Member.

Authenticated

[Signature]

20/4/2018.

Secretary
West Bengal Clinical Establishment
Regulatory Commission

