

Office of the West Bengal Clinical Establishment Regulatory Commission

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Case Reference: MISC/NPG/2019/000021

Chandrima Chatterjee Complainant

vs

Genesis Hospital, Kolkata..... Respondent/ Respondents

ORDER SHEET

Office Note	Order No.	Date	Order
	1.	15/01/2020	<p>The complaint would pertain to anomaly in the discharge summery. However, in course of hearing we are apprised of another irregularity on the part of the Clinical Establishment that we would be discussing herein.</p> <p>The complainant Chandrima Chatterjee was under treatment of treating doctor for her gynaecological complication. The complainant is E Beta Thalassemia Carrier patient since her birth and is already under treatment of the haematologist. She was advised to go for surgery by her treating doctor and She was advised to take admission in the Clinical Establishment for operation. The treating doctor, being gynaecologist, would however contend, before admission she wanted clearance from the concerned haematologist under whom the complainant was under treatment and after getting proper clearance from the haematologist she advised the complainant for being admitted in the Clinical Establishment for surgery. As per the advice of the haematologist on the day before the surgery could be done she was transfused packed cell blood product that caused complications:</p>



fever and joint pain. The Clinical Establishment did not have any haematologist on their roll to manage the situation and they ultimately asked the patient party to get her discharge and go for a higher set up. The complainant would complain, initially the discharge summery would record, the patient developed sickling crisis 8 –10 hours after transfusion. However, the second discharge summery issued by the hospital would omit such observation as recorded earlier and described her complication as a post transfusion delayed hypersensitive transfusion reaction (HTR). The gynaecologist would say, as per the request of the patient party the discharge summery was corrected however, the patient party did not destroy the earlier one which was meant to be destroyed. With regard to anomaly, she would explain, from the clinical evaluation she initially thought of sickling crisis as recorded in the discharge summery. However, after going through her treatment record pertaining to haematology, she corrected it.

The explanation so offered by the gynaecologist is prima facie acceptable. However, the complainant would be free to approach West Bengal Medical Council if she is not satisfied with such explanation.

With regard to the other complaint as against the Clinical Establishment, we would find laxity on the part of the Clinical Establishment. The Clinical Establishment knew before hand, they did not have haematology set up. They should have thought it before getting the patient admitted at their establishment. They should have foreseen such complication before hand. They did not do so.



Moreover, when the complication arose they should have arranged for haematologist. We are told, in fact they tried but failed and then they referred for higher set up.

It is total mismanagement on the part of the Clinical Establishment.

We impose a token compensation of Rs.20, 000/- to be paid to the complainant by the Clinical Establishment within a period of one month from date.

With this direction, the complaint is disposed of.

Sd/-

The Hon'ble Chairperson

Sd/-

Sri. Binod Kumar, IAS, Vice-Chairperson

Sd/-

Prof. (Dr.) Sukumar Mukherjee – Member

Sd/-

Prof. (Dr.) Madhusudan Banerjee – Member

Sd/-

Smt Madhabi Das - Member

Authenticated

ARSHAD HASAN WARSI
WBCS (Ex)
Secretary
West Bengal Clinical Establishment
Regulatory Commission
&
Joint Secretary
Health & F.W. Department