DMC/DC/F.14/Comp.2681/2/2022/ 14th March, 2022

**O R D E R**

The Delhi Medical Council through its Disciplinary Committee examined a complaint of Shri Sanjay Tiwari s/o Shri Chander Bhan, r/o House No. 79, Pocket-I, Sector-A6, Narela, Delhi-110040, alleging medical negligence on the part of Dr. Reena Janana & Surgical Hospital, Gali No. 2 Rajeev Colony, Arya Samaj Road, Narela, Delhi-110040, in the treatment administered to the complainant’s wife Smt. Meenakshi, resulting in her death.

The Order of the Disciplinary Committee dated 11th February, 2022 is reproduced herein-below:-

The Disciplinary Committee of the Delhi Medical Council examined a complaint of Shri Sanjay Tiwari s/o Shri Chander Bhan, r/o House No. 79, Pocket-I, Sector-A6, Narela, Delhi-110040 (referred hereinafter as the complainant), alleging medical negligence on the part of Dr. Reena Janana & Surgical Hospital, Gali No. 2 Rajeev Colony, Arya Samaj Road, Narela, Delhi-110040 (referred hereinafter as the said Hospital), in the treatment administered to the complainant’s wife Smt. Meenakshi (referred hereinafter as the patient), resulting in her death.

The Disciplinary Committee perused the complaint, written statement of Dr. Nisha Singh, Consultant Gynaecologist, written statement of Dr. Naresh Morya, Medical Director of Dr. Reena Janana & Surgical Hospital, copy of medical records of Reena Janana & Surgical Hospital, post mortem report no. 282/2018 dated 04.04.2018, subsequent opinion in respect of post mortem no. 282/2018, and other document on record.

The following were heard :-

1. Shri Sanjay Tiwari Complainant
2. Dr. Nisha Singh Consultant Gynaecologist, Dr. Reena Janana

 & Surgical Hospital

The Medical Superintendent, Dr. Reena Janana & Surgical Hospital failed to appear before the Disciplinary Committee, inspite of notice.

The complainant Shri Sanjay Tiwari alleged that on 02nd April, 2018, the patient namely Smt. Meenakshi, who was nine months pregnancy, went to Dr. Reena Janana & Surgical Hospital with her father-in-law for a routine check-up, as she was complaining of headache. She walked on foot and was absolutely normal. She was admitted in the above said hospital around 03.30 p.m. On examining her, the attending staff said that the delivery is likely anytime the same day till evening. The doctor gave some injection to the patient. Within two to three minutes of giving of this injection to the patient, the condition deteriorated and froth/foam started coming out of her mouth and nose. When her family members raised the alarm, two nurses and two three other people came and laid her on the stretcher and took her to the operation theatre. The complainant kept enquiring about the condition of the patient but they asked the complainant to wait outside the operation theatre. After ten minutes, they were told that the patient is no more and the nine months foetus who was about to be born is also dead in the mother’s womb. The complainant in shattered state of mind, made a call on 100 number around 04.30-5.00 p.m. The police arrived and took the statement of the husband (the complainant) of the patient and her father-in-law and seized the body of the patient, which was sent for the post-mortem to the department of Forensic Medicine of Maulana Azad Medical College and Lok Nayak Hospital, New Delhi-110002. An oral complaint was also made in the Narela Police Station by the family members of the patient around 07.00 p.m. The ECG report which carries two different dates again proves a grave negligence on the part of all the concerned authorities; the printed date on the report is 2012-10-01 and the time is 20:14:16. This date and time is manually crossed/struck off and is replaced with date: 2/4/18 and time: 4.50 p.m. Therefore, it’s a humble request to take strict actions according to medical rules and the regulations again the said hospital, doctors and the above said hospital staff whose inhuman grave negligence caused an untimely and unfortunate loss of two precious life.

Dr. Nisha Singh, Consultant Gynaecologist, Dr. Reena Janana & Surgical Hospital in her written statement averred that that the patient Smt. Meenakshi, wife of the complainant had been taking the treatment from gynaecology & obstetric department of their hospital under her care for pregnancy and Pregnancy Induced Hypertension (PIH). The patient was primigravidae due on 29th March, 2018. The patient was advised elective termination of pregnancy due to PIH on 28th March, 2018 (at OPD prescription dated 24.03.2018). The patient did not come on 28th March, 2018. The patient reported on 02nd April, 2018 at around 03.40 p.m. in OPD with complaint of leaking per vaginum and headache since night. The patient’s blood-pressure in OPD at time of presentation was 146/88 mmHg and the patient’s urine albumin was +2. After due counseling of all associated risk and complication, the patient was admitted for the blood-pressure and labour monitoring with anti-hypertensive and supportive drugs. The consent was taken and cannula was put. No drug was administered to the patient till then. The patient had ghabrahat at around 03.50 p.m. and had seizure and immediately turned sideward. The senior anaesthetist Dr. Naresh More and she immediately shifted the patient to the ICU which is well equipped. The patient had lot of froth coming from mouth and became BP and pulse less. CPR was done and immediate endotracheal intubation was done with all required medications. Resuscitation was done for more than forty five minutes. She and Dr. Naresh More and their team responded in second and did their best to save her life. Unfortunately, they lost the patient and the patient was declared dead at around 04.55 p.m. Therefore, she submits that they did their best in the present case and there was no negligence or deficiency in service on her part and her team. The patient was suffering from PIH, hence, due to the complication of the said dreaded disease, the patient succumbed to death, inspite of the best treatment. She requests to this Hon’ble Council that the complaint filed by the complainant deserves to be rejected, being a false and frivolous complaint.

Dr. Naresh Morya, Medical Director, Dr. Reena Janana & Surgical Hospital in his written statement averred that the patient had been taking treatment from gynaecology & obstetric department of their hospital under the case of Dr. Nisha Sigh for pregnancy and PIH (Pregnancy Induced Hypertension). On 02nd April, 2018, the patient came to their hospital with the problem of headache, hypertension, chakkar and ghabrahat at 03.40 p.m. The patient was admitted after examination by the gynaecologist. The patient had hypertension and term pregnancy. The doctor had explained to the patient and the relatives that the patient might develop convulsion anytime. As per the medical journals, seizure in the mother is one of the complication among other complications, such as, placental abruption, complication that occur when the placenta pull away from the wall of the uterus, causing maternal bleeding and fetal distress, seizures in the mother; temporary kidney failure; lever problems; blood clotting problems and other complications. These complications were duly explained to the patient as well as to her relatives. After obtaining written consent, the treating doctor of his hospital started the treatment. Unfortunately, even before starting any treatment (only IV line was resorted) convulsion was set, which was accompanied by vomiting. Time of events was around 03.55 p.m. The patient was immediately intubated and airway had got secured by the team of the doctors. Endotracheal suction and ventilation was started immediately using bains circuit with oxygen. The pulse was not palpable so cardiac resuscitation was also started. Cardiopulmonary resuscitation was continue for approximately forty five minutes but no effective cardiac activity restored and also no spontaneous respiratory activity gained. The patient was declared dead and the body sent for postmortem to confirm causes of death. There was no negligence or deficiency in service on the part of the treating doctors of his Hospital, as they performed their duty with due care and caution. The patient was suffering from PIH, hence, due to the complication of the said dreaded disease, the patient succumbed to death, inspite of the best treatment. He requests to this Hon’ble Council that the complaint filed by the complainant deserves to be rejected, being a false and frivolous complaint.

In view of the above, the Disciplinary Committee makes the following observations :-

1. The patient Smt. Minakshi a 28 years old prmigravidae with history of one previous medical termination of pregnancy, was under treatment at the said Hospital during antenatal period and Pregnancy Induced Hypertension. On 02nd April, 2018 with pregnancy of nine months, the patient came to the said Hospital for routine check-up with complaints of headache. At the time of the admission on 02nd April, 2018 at 03.40 p.m., the blood-pressure was 146/88 mmHg, pulse was 90/minute. Per vaginal examination, OS was 3-4 cm dilated, membranes intact, 80% effaced and vertex at -3 station. The patient was advised for the admission, IV drip, blood-pressure monitoring and injection Monocef after sensitivity testing. At 03.55 p.m., the patient complained of ghabrahat with chakkar, oxygen saturation was 98%. She had fits and was immediately shifted to the ICU. Endotracheal intubation was done. The pulse and the blood-pressure were not recordable. At 04.00 p.m., CPR was started and continued till 04.45 p.m. when she was declared dead. At 04.30 p.m., the delivery of the baby was tried after episiostomy with the help of vacuum device, but as OS was 5.0 cm and vertex was high-up and, hence, it could not be done successfully.

The cause of death as per post-mortem report No.282/2018 dated 04th April, 2018 of Maulana Azad Medical College was “Death in this case occurred due to respiratory failure as a result of ante-mortem aspiration of stomach content into the respiratory passages. The aspiration is likely to be precipitated by seizure episode which is a known complication of eclampsia. However, the possibility of amniotic fluid embolism being present and contributing to death cannot be ruled out”.

1. As per the documents on records and the statement of Dr Nisha Singh, the treating gynaecologist, the patient Smt Meenakshi had been taking treatment from dept. of OBG of Dr. Reena Janana & Surgical Hospital, under care of Dr Nisha Singh, for pregnancy and PIH. On 24-03-2018,the patient was advised to come to the hospital for admission on 28-03-18 for termination of pregnancy, but the patient did not turn up. The patient reported to the hospital on 02-04-2018, with full term pregnancy and complaints of headache, hypertension, vertigo and ghabrahat on 3.40 p.m. and was admitted for the treatment and delivery. Foetus was full term and alive at that time. The patient was treated with antihypertensives and other supportive treatment. At around 3.55 p.m. in the hospital premises, the patient developed convulsions and vomited, which was confirmed by Dr Nisha Singh. An Anaesthesiologist Dr Naresh More was also present at that time. The patient was intubated immediately; endotracheal suction and ventilation was done. The patient collapsed and pulse disappeared and cardiac resuscitation was started by the team of the doctors present there, including Dr Nisha Singh and the Anaesthesiologist Dr Naresh More. Despite resuscitation attempts for around 45 minutes, cardiac activity and spontaneous respiration could not be restored, and the patient was declared dead. As per the Post-mortem done at MAMC and LN Hospital, New Delhi by a team of forensic experts on 04-04-2018 and findings reported by the forensic experts viz., evidence of food particles in pharynx, larynx, trachea and up to tertiary bronchi, likely hood of pulmonary aspiration following vomiting could not be ruled out. In the facts and circumstances of this case, it seems that the patient in all likelihood aspirated the gastric contents following vomiting during happening of convulsions, which led to the death of patient. The doctors made efforts to manage the medical condition through intubation, endotrachial suction; unfortunately, the patient could not be salvaged. We are of the considered opinion that aspiration can prove to be catastrophic, which happened in the present case, inspite of being administered adequate treatment.

In light of the observations made herein-above, it is the decision of the Disciplinary Committee that no medical negligence can be attributed on the part of Dr. Reena Janana & Surgical Hospital, in the treatment administered to the complainant’s wife Smt. Meenakshi.

Complaint stands disposed.

Sd/: Sd/: Sd/:

(Dr. Maneesh Singhal) (Shri Bharat Gupta) (Dr. Ashok Kumar)

Chairman, Legal Expert, Expert Member

Disciplinary Committee Member, Disciplinary Committee Disciplinary Committee

 Sd/:

(Dr. A.K. Sethi)

Expert Member,

Disciplinary Committee

The Order of the Disciplinary Committee dated 11th February, 2022 was confirmed by the Delhi Medical Council in its meeting held on 24th February, 2022.

 By the Order & in the name of

 Delhi Medical Council

 (Dr. Girish Tyagi)

 Secretary

Copy to :-

1. Shri Sanjay Tiwari s/o Shri Chander Bhan, r/o House No. 79, Pocket-I, Sector-A6, Narela, Delhi-110040.
2. Dr. Nisha Sinh, Through Medical Superintendent, Dr. Reena Janana & Surgical Hospital, Gali No. 2 Rajeev Colony, Arya Samaj Road, Narela, Delhi-110040.
3. Medical Superintendent, Dr. Reena Janana & Surgical Hospital, Gali No. 2 Rajeev Colony, Arya Samaj Road, Narela, Delhi-110040.
4. Station House Officer, Police Station Narela, Delhi-110040-w.r.t. DD No.79B, Dt. 02.04.18, U/S 176 CrPC, PS Narela, Delhi-**for information**.

 (Dr. Girish Tyagi)

 Secretary