DMC/DC/F.14/Comp.2709/2/2022/ 29th November, 2022

**O R D E R**

The Delhi Medical Council through its Disciplinary Committee examined a complaint of Shri Himanshu Kaushik, House No. 750, Old Vijay Nagar, Sector-09, Ghaziabad, Uttar Pradesh-201009, alleging medical negligence on the part of Dr. Ravindra Singh Bhadoria of Yashoda Super Specialty Hospital, Nehru Nagar III, Near Nehru Stadium Jogging Park, Ghaziabad, Uttar Pradesh 201001, in the treatment administered to the complainant’s grandmother Smt. Laxmi Devi Sharma, resulting in her death.

The Order of the Disciplinary Committee dated 06th October, 2022 is reproduced herein-below :-

The Disciplinary Committee of the Delhi Medical Council examined a complaint of Shri Himanshu Kaushik, House No. 750, Old Vijay Nagar, Sector-09, Ghaziabad, Uttar Pradesh-201009 (referred hereinafter as the complainant), alleging medical negligence on the part of Dr. Ravindra Singh Bhadoria of Yashoda Super Specialty Hospital, Nehru Nagar III, Near Nehru Stadium Jogging Park, Ghaziabad, Uttar Pradesh 201001 (referred hereinafter as the said Hospital), in the treatment administered to the complainant’s grandmother Smt. Laxmi Devi Sharma, resulting in her death (referred hereafter as the patient).

The Disciplinary Committee perused the complaint, written statement of Dr. Ravinder Singh Bhadoria of Yashoda Super Specialty Hospital, copy of medical records of Yashoda Super Specialty Hospital and other documents on record.

The following were heard in person :-

1) Dr. Ravinder Singh Bhadoria Consultant Nephrologist, Yashoda Super Specialty Hospital

2) Dr. Alok Sehgal Cardiologist, Yashoda Super Specialty Hospital

3) Dr. Ajay Gupta Medical Gastroenterologist, Yashoda Super Specialty Hospital

4) Dr. Mudit Physician, Yashoda Super Specialty Hospital

5) Dr. Sangeeta Garg Medical Superintendent, Yashoda Super Specialty Hospital

The Disciplinary Committee noted that the complainant vide his representation(e-mail) dated 13th September, 2022 has expressed his inability to participate in the Disciplinary Committee’s proceedings.

In the interest of justice, the Disciplinary Committee decided to proceed with the matter in order to determine it on merits.

The Disciplinary Committee noted that as per the complaint, it is alleged that on 23rd December, 2018, the complainant Shri Himanshu Kaushik’s grandmother Smt. Laxmi Devi Sharma (the patient) had undergone routine full body check-up, her reports were normal as per her age. Everything was going normal nearly fine. She was taking only half tablet for blood pressure Amlodipin 5 mg. She could walk till 29th December. But on 29th December, her upper blood-pressure is high approximately 185 as noted at home. They had noted swelling in her legs that may be due to high blood pressure. Also, she was eating very less from two day that is why he took an advice of his nearby doctor (Dr. Rajesh Rajora) in Astha Hospital and he advised for some test again on 28th December. Her cretin level was- 1.33 (note -cretin level was normal on 12th December report) Blood urea was 80. Then, he (the doctor) advised him to go any nephrologist in Ghaziabad. Then, he took a contact number of Dr. Ravindra Singh Bhadoria who is working in Yashoda Super Speciality Hospital, Ghaziabad, Uttar Pradesh. On call, he told him all the details of the patient and discussed about her swelling on legs. The doctor said he (the complainant) need not come with the patient, as her age is 90. He(the doctor) also said that he will prescribe all medicine and the patient would be fine with in some days. As per discussion, he met the doctor on date 29th December, 2018 at 11:00 a.m. at Yashoda Hospital and he (the doctor) prescribed very high dose for one week (the complainant was not aware about these doses) but with in only two days her blood-pressure level drop to very low that is 80 (upper)-50(lower). Due to this, she started to loose her memory and become unconscious and week. Medicine given by him on date 29th December, are as : 1) Dytor 10 mg two times in a day, 2)-Cilacar 10 MG two times, 3) Arkamin 0.1 three times in a day, 4) zytanix 2.5 one time in a day, 5) Nitrolong 2.6 two times a day, 6) cardivas 6.25 mg two times a day. All medicines are used to lower the blood pressure, as he also searched on internet and took some doctor advice. He was thinking that she would be fine after his (the doctor) treatment but the condition got worsened day by day. Her blood-pressure suddenly down at hazardous level within two days that is on 31st December. Her body start swelling again. Then, he stopped the medicine to give her as per her blood-pressure status. His simple question is how a doctor can prescribe such high dose to control her blood-pressure without seeing her and committed that that she will be fine. Is it just because of money? These medicines became the reason of high toxicity level and lower blood-pressure; due to which, the patient died. How can a doctor prescribe such high dose at this age just on the behalf of symptom base discussion by the patient’s family member? He could clearly deny him (the complainant) for doing treatment without seeing her but he did not do that. At-least, he should give her some low dose initially. Further, at evening on 31st December, he (the complainant) admitted her for five days in ICU where their staff’s behaviour was very rude. The patient’s condition got worsened there day by day in ICU. They were just giving high doses to the patient to increase her blood pressure up to normal level at any how, including some other medicine. His question why the blood-pressure drop down to this level? Their staff and other doctors only saying one thing that this was happening because of her advance age where all organs starts failure. They also said that the patient may be on ventilator after some time. They were trying to evade from their responsibility. Let us assume that they are right and age matter most, then, how Dr. Ravindra prescribed her such high dose medicine on 29th December without seeing her. This was the main reason; due to which, the patient died. Also, her previous report on dated 12th December were normal, then, how can he assume that she was suffering from any chronic kidney or liver disease. In LAMA summary where they mention incorrect information about his actual condition like blood-pressure mention In LAMA was 110-60 (but actual blood-pressure was 80-45 at the time of admit), vomiting etc. They were just doing hit and trial methods in ICU. Finally, when he saw that there is no improvement at all and they are doing nothing to save the patient and the patient’s condition became more worsened, then, previously, they brought her at home on 04th January, 2019 from ICU and started giving some treatment through a food feeding tube. After some days, she died on date 08th January, 2019. This was the life threatening treatment given to the patient by such irresponsible doctor. He (Dr. Ravindra Singh Bhadoria) is the only main culprit to give such wrong high dose treatment, due to which, the patient’s blood-pressure got down at hazardous level, due to which, she did not survive and finally she died. He requests the Delhi Medical Council to take action against Dr. Ravindra Singh Bhadoria and Yashoda Hospital as per law as soon as possible.

Dr. Ravinder Singh Bhadoria, Consultant Nephrologist, Yashoda Super Specialty Hospital in his written statement averred that the complainant Shri Himanshu Kaushik called him for the first time on 28th December, 2018 to seek telephonic consultation about his 88 years old maternal grandmother (the patient) with poorly controlled diabetes and hypertensive on single medication which she was taking irregularly. He (the complainant) told the complaint of high grade fever for two days with poor oral intake, worsening leg swelling and reduced urine output for one day. The complainant asked him some quick medicines advice on phone itself which he refused and advised the complainant to bring the patient to Yashoda Hospital for consultation. Next day, on 29.12.2019, the complainant came to his OPD around 11.00 a.m. at Yashoda Hospital, Nehru Nagar, Ghaziabad. The complainant brought some reports without bringing the patient. For this, he expressed his inability to advise any treatment without seeing the patient. However, the complainant said that the patient stayed on the 3rd Floor of the house and he (the complainant) was unable to bring the patient, because of her morbid obesity and her limited mobility. The complainant requested to advise medicines after seeing the reports only and also showed some video featuring of the patient present condition. The complainant further told that the patient had fever for two-three days, burning in urination, poor oral intake, reduced urine output and also worsening leg swelling for 2 days. He also mentioned that her blood-pressure was very high in the range of 180-200/70-80mmHg on several occasions for last two days, due to which, she has some breathing difficulty. Her blood test reports showed mildly deranged kidney function test, serum Creatinine-1.5. He told the complainant to bring her to hospital for immediate hospitalization because of her morbid condition and these serious medical issues. But again, the complainant expressed his inability to bring the patient and repeatedly insisted him to prescribe some blood-pressure medicines and antibiotics on OPD basis only and he also mentioned that he would call some local doctor to his home to supervise her condition and tried for further consultation at home only. The complainant spent almost half an hour in his OPD chamber and kept insisting him to write some medicines for the patient and expressed financial constraints for her hospitalization. Then only, he wrote antibiotics, diuretics and two anti-hypertensive in good faith, with a word of caution for monitoring her BP and sugar level regularly at home under supervision of his (the complainant) family doctor. He also told him to admit the patient in the hospital, if there was no improvement clinically. After one day, the complainant called him informing that the patient’s condition was not improving, for which, he advised for her hospitalisation in emergency. After admitting the patient on 31st December, 2018 in ICU under his care at Yashoda Hospital, she was diagnosed to have oliguric acute kidney injury with urosepsis (urine C/S -E Coli) with shock with multi-organs dysfunction, pancytopenia with electrolyte irribalance with metabolic encephalopathy. The patient was managed with broad spectrum appropriate antibiotics along with vasopressors, diuretics, and I/V fluids and other supportive care. During the patient’s hospitalisation, cardiologist, general physician and ICU intensivist also looked after her condition closely and advised accordingly, for her fast recovery. Gradually, the patient’s BP improved with good urine output (more than 1 litre/day) after 48 hours of hospital stay. Subsequently, she was also diagnosed to have hypothyroidism and chronic liver disease with ascites, for which, gastroenterologist’s advice was also sought. However, her sensorium did not improve much. She remained dull, drowsy, for which, she required further investigations, ICU stay and further medications. The patient’s son Shri Vikas Kumar Sharma and the complainant were constantly counselled about the patient’s critical illness and her prognosis at each and every step of the treatment in details. The patient’s party was never kept in dark regarding the condition of the patient and the treatment required/given. On 02.01.2019, the complainant grandson was told about the chronic liver disease (CLD) and the condition of the liver and the need of regular treatment, which he acknowledged in writing. The patient was advised USG Guided Ascites Tap on 02.01.2019, which was refused by the attendants. Refusal was recorded in the treatment record by Dr. Ajay Gupta on 03.01.2019. She was also advised CT scan chest, but the complainant refused for the same and requested for refund of his money. On 03.01.2019, the blood samples were also refused. On 04.01.2019, the attendants, on their own risk, got the patient discharged against Medical Advice (LAMA). Proper LAMA Summary was given to the patient mentioning ongoing treatment/medicines. Even after discharge, the complainant kept on insisting him for telephonic consultation on several occasions (almost 10-12 times). He kept insisting for her continued hospitalisation for her critical illness. The family continued to keep her at home only and, thereafter, she succumbed to her illness due to ignorance of her family and lack of appropriate medical treatment. Despite all this, the complainant also posted bad review on his Google page and other social networking media, tried to defame him publicly and turmoiled his reputation. He (the complainant) also filed FIR with the Police against him regarding the same and harassed him in every possible way in return reward for treating the patient with his good intention and best efforts.

He further averred that the complainant has levelled one single allegation that the patient died because of the treatment advised by him, but the same is baseless, patently wrong and, hence, specifically and vehemently denied. He had advised antibiotics, diuretics and two antihypertensive in good faith, on persistent request of the complainant for about half an hour, with a word of caution for monitoring the patient’s blood-pressure and sugar level regularly at home with supervision of his family doctor. He also told the complainant to admit the patient in the hospital, if there was no improvement clinically. After one day, the complainant called him informing that the patient’s condition was not improving, for which, he advised for her hospitalisation in emergency. After admitting her on 31st December, 2018 in ICU under his care at Yashoda Hospital, she was diagnosed to have oliguric acute kidney injury with urosepsis (urine C/S -E Coli) with shock with multiorgan dysfunction, pancytopenia with electrolyte imbalance with metabolic encephalopathy. She was managed with broad spectrum appropriate antibiotics alongwith vasopressors, diuretics, and I/V fluids and other supportive care. In her relevant past medical history, she was told to be a known case of hypertension, chronic kidney disease and diabetes mellitus. During her hospitalisation, cardiologist, general physician and ICU intensivist also looked after her condition closely and advised accordingly, for her fast recovery. Gradually, her BP improved with good urine output (more than 1 litre/day) after 48 hours of hospital stay. Subsequently, she was also diagnosed to have hypothyroidism and chronic liver disease with ascites, for which, the gastroenterologist’s advice was also sought. However, her sensorium did not improve much. She remained dull, drowsy, for which, she required further investigations, ICU stay and further medications. But unfortunately, the family members did not want any further investigations, as had been advised by the doctors and on 02.01.2019 and 03.01.2019 they gave in writing that they did not want to get the tests/investigations done (duly documented, as mentioned in the facts of the case hereinabove) and on 04.01.2019, they got the patient discharged LAMA in her critical condition. How the complainant can blame him for causing the death of the patient, when the family of the patient got her discharged LAMA, despite knowing fully well that her condition was critical. The fact remains that the patient died because of the ailments, she had been suffering from for quite long and lack of adequate treatment. The death of the patient, Smt. Laxmi Devi Sharma, 88 years old, with 85 kgs of weight, who had been suffering from multiple ailments, as specified in the LAMA Summary and unfortunately, the family refused to get further investigations/tests done as per medical advice (duly documented in the treatment record of the patient) and got her discharged and taken to home in her critical condition, was the result of her multiple ailments, lack of appropriate treatment and not due to any treatment advised by him, as alleged. It is therefore, most humbly prayed that this Hon’ble Council may be pleased to close and file the present complaint, in the interest of justice.

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

1. It is observed that Dr. Ravindra Singh Bhadoria had been first consulted on 28th December, 2018 by the patient’s grandson for complaint of high blood-pressure, increasing swelling and renal parameters. For which, Dr. Ravindra Singh Bhadoria prescribed diuretics and anti hypertension drugs, by seeing the records alone. On 31st December, 2018, the patient was admitted with hypotension and sepsis requiring admission to ICU, from where, they went LAMA on 04th January, 2019 and she expired on 08th January, 2019.
2. It has been observed that the prescription by Dr. Ravindra Singh Bhadoria on 28th December, 2018, does not mention any details like tele-consult, diagnosis, precautions and intstructions for the patient and the attendants. The course subsequent to the consult could be related to the UTI sepsis.

In light of the observations made herein-above, the Disciplinary Committee recommends that a warning be issued to Dr. Ravindra Singh Bhadoria (Dr. Ravinder Singh Bhadoria, Delhi Medical Council Registration No.38363).

Complaint stands disposed.

Sd/: Sd/: Sd/:

(Dr. Maneesh Singhal) (Dr. Satish Tyagi) (Dr. Sandeep Mahajan)

Chairman, Delhi Medical Association, Expert Member,

Disciplinary Committee Member, Disciplinary Committee

 Disciplinary Committee

The Order of the Disciplinary Committee dated 06th October, 2022 was confirmed by the Delhi Medical Council in its meeting held on 19th October, 2022.

The Council further confirmed the punishment of warning awarded by the Disciplinary Committee to Dr. Ravindra Singh Bhadoria (Delhi Medical Council Registration No. 38363).

The Council further observed that the Order directing the issuance of warning shall come into effect after 60 days from the date of the Order.

This observation is to be incorporated in the final Order to be issued. The Order of the Disciplinary Committee stands modified to this extent and the modified Order is confirmed.

 By the Order & in the name of

 Delhi Medical Council

 (Dr. Girish Tyagi)

 Secretary

Copy to:-

1. Shri Himanshu Kaushik, House No. 750, Old Vijay Nagar, Sector-09, Ghaziabad, Uttar Pradesh-201009.
2. Dr. Ravindra Singh Bhadoria, Through Medical Superintendent, Yashoda Super Specialty Hospital, Nehru Nagar III, Near Nehru Stadium Jogging Park, Ghaziabad, Uttar Pradesh 201001.
3. Medical Superintendent, Yashoda Super Specialty Hospital, Nehru Nagar III, Near Nehru Stadium Jogging Park, Ghaziabad, Uttar Pradesh 201001.
4. National Medical Commission, Pocket-14, Phase-1, Sector-8, Dwarka, New Delhi-110077-w.r.t. erstwhile Medical Council of India’s letter No.MCI-211(2)(Gen.)/2019-Ethics./163565 dated 13th November, 2019-**for information & necessary action.**
5. Registrar, Uttar Pradesh Medical Council, 5, Sarvapally Mall Avenue Road, Lucknow-226001, Uttar Pradesh-w.r.t. letter No. 19526/11 dated 05th August, 2019- **for information**.
6. Registrar, Madhya Pradesh Medical Council, F-7, Sanchi Complex, Opp. Board Office, Bhopal-462016, Madhya Pradesh **(Dr. Ravindra Singh Bhadoria** **is also registered with the Madhya Pradesh Medical Council under Registration No-6960 dated 27.04.2005)-for information & necessary action.**

 (Dr. Girish Tyagi)

 Secretary