DMC/DC/F.14/Comp.3817/2/2024/ 15th July, 2024

**O R D E R**

The Delhi Medical Council through its Disciplinary Committee examined a representation from Police Station Chandni Mahal, seeking medical opinion on a complaint of Shri Mohd. Adil s/o Mohd. Shafi r/o H.No. 2244, Gali Dakotan, Turkman Gate, Delhi, alleging medical negligence on the part of the doctors of Sahara Nursing Home 1864, Main Bazar, Turkman Gate, Delhi-110006, in the treatment of the complainant’s wife Smt. Sania.

The Order of the Disciplinary Committee dated 12th June, 2024 is reproduced herein-below:-

The Disciplinary Committee of the Delhi Medical Council examined a representation from Police Station Chandni Mahal, seeking medical opinion on a complaint of Shri Mohd. Adil s/o Mohd. Shafi r/o H.No. 2244, Gali Dakotan, Turkman Gate, Delhi (referred hereinafter as the complainant), alleging medical negligence on the part of doctors of Sahara Nursing Home 1864, Main Bazar, Turkman Gate, Delhi-110006 (referred hereinafter as the said Nursing Home), in the treatment of the complainant’s wife Smt. Sania (referred hereinafter as the patient).

The Disciplinary Committee perused the representation from Police, complaint, written statement of Dr. Nusrat Nisa (Director), Sahara Medical Centre, enclosing therewith written statement of Dr. Vedpal Singh, copy of medical records of Sahara Medical Centre and other documents on record.

The following were heard:-

1) Shri Mohd. Adil Complainant

2) Dr. Vedpal Singh Surgeon, Sahara Nursing Home

3) Dr. Nusrat Nisa Medical Superintendent Sahara Nursing Home

4) Dr. MD Ali Rabbani Anaesthetist, Sahara Nursing Home

The Disciplinary Committee noted that Dr. MD Ali Rabbani, Anaesthetist, Sahara Nursing Home, participated in the proceedings of the Disciplinary Committee through video conferencing.

The complainant alleged that his wife Smt. Sania 23 years old female was admitted in Sahara Nursing Home for surgery of stones in the gall bladder. She underwent surgery on 29.11.2022 and was discharged on 30.11.2022. Post discharge the patient suffered from pain, developed jaundice for which Dr. Nusrat Nisa administered injections, however, patient’s condition continued to worsened. Hence, patient was taken to Max Hospital Vaishali, where she was admitted on 14.02.2023. The doctors diagnosed her with biliary stricture and obstructive jaundice. She underwent another surgery (Roux-en-Y hepatico-jejunostomy) on 15.02.2023 and thereafter she was discharged on 20.02.2023. The patient had incurred substantial expenditure and suffering due to medical negligence of Dr. Nusrat Nisa and other doctors of Sahara Nursing Home. It is therefore, requested that strict action be taken against them.

Dr. Vedpal Singh MS General Surgery, Sahara Nursing Home in his written statement averred that he received a call at around 7.30 pm on 29.11.2022 from Dr. Nusrat Nisa, the Director of Sahara Medical Centre and she informed him that a patient namely Smt. Sania was brought in to the hospital at 6.30 pm with complaint of pain in the abdomen and had also brought an ultrasound report and medical report with her. Dr. Nusrat Nisa further informed him about the patient that she had seen the reports and found that there had been stones in the gall bladder and needed to be operated. He immediately rushed to the hospital at around 8.00pm and examined the patient and on seeing all the reports advised for surgery for removal of the stones from gall bladder, the patient and the attendant/husband of the patient agreed for the same and accordingly they planned for the surgery. That with great precaution and administration of the necessary medicine he (Dr. Vedpal Singh) conducted the surgery of the patient at around 12.15am and after the surgery the condition of the patient was good, there was no complaint from the patient. At the time of treatment of the patient, proper precaution was taken by him and the medical attendant staff. They have provided all medical care which was possible at their hospital. Even after the discharge all the necessary precautions were taken and patient was advised necessary medicine.

On enquiry by the Disciplinary Committee, Dr. Vedpal Singh stated that in the present case, histopathology examination of the gall bladder specimen removed on 29th November, 2022 was not done, as the patient who was handed over the specimen did not submit the specimen for the histopathology examination. He, however, admitted handing over the specimen for histopathology examination, has not been documented in the medical records of Sahara Nursing Home.

Dr. Nusrat Nisa, Director, Sahara Medical Centre in her written statement averred that patient Smt. Sania was brought in to their hospital on 29.11.2022 at 6.30pm with complaint of pain in the abdomen. The patient also brought with herself an ultrasound report and some medical reports. That after thorough study of the patient condition and seeing the scan and medical reports it was analyzed that it was a case of surgery as there was stone in the gall bladder of the patient. She called Dr. Vedpal Singh MS (General Surgery) for medical supervision. Dr. Vedpal Singh reached at their centre at 8.00pm. After seeing the condition of the patient thorough study of the reports, the patient was advised for removal gall bladder stone by Dr. Vedpal Singh. The attendant/husband of the patient was duly informed about the need for surgery for removal of stone in the gall bladder. The attendant/husband of the patient duly agreed for the surgery and gave his consent for the surgery. At the time of admitting the patient and planning of the surgery it was specifically informed to the attendant/husband of the patient that there are risks of the operation which includes: bleeding, fever, sepsis, jaundice, clip dislodge, injury to adjacent structures like CBD, etc. Further on the request and on the consent of the attendant/husband, the patient was admitted for operation for removal of stones from the gall bladder. That at the time of admission one admission record was prepared and a consent letter attached with it was signed by the attendant/husband of the patient. With great precaution and administration of the necessary medicine the operation was done by Dr. Vedpal Singh on 29.11.2022 during later hours. It is pertinent to mention that during the operation of the patient, the required number of nursing staff and supporting staffs were also present for proper assistance of the doctor. The operation was successful and the patient was fit and healthy. Post operation of the patient, the doctor advised the necessary medicine to the patient. After the surgery, the condition of the patient was good; there was no complaint from the patient. She was kept admitted in the hospital till 30.11.2022. After the surgery of the patient was properly examined and routine check-ups were also done at several times a day. On 30.11.2022 in the evening, the patient was discharge and a discharge summary was prepared and given to the attendant of the patient. At the time of the discharge of the patient her vitals were okay and there was no complaint about pain or anything from the patient. On 08.12.2022, the patient alongwith her attendant/husband came to their hospital for removal of her stitches. The patient was thoroughly studied and it was found that there was no post –surgery complication, the wound of the patient near the surgery had healed and accordingly stitches were removed. That in the month of February 2023, the husband of the patient came to their hospital with an ultrasound report and further stated that the patient was having vomiting. After seeing the ultrasound report, Dr. Nusrat Nisa contacted Dr. Vedpal Singh and discussed with him and found the report was okay and there was no problem in the report at all. Thereafter she asked the attendant/husband to bring the patient for check-up. However, neither the patient nor the attendant turn up after that. In the month of 22.03.2023, she received a call from PS Chandni Mahal who informed that one complaint was filed by Mohd. Adil wherein allegation of medical negligence was levelled against the hospital. She stated all the true facts to the police officer and she also asked for the copy of the complaint for filing of reply to the same, however, the copy of the same has not been given to her. Infact, the police officer told her to settle the matter with the attendant/husband of the patient by paying Rs. 15,00,000/- to him. She expressed her annoyance as to why she has to pay him the amount when their hospital has not done anything illegal. They have treated the patient to the best of medical facility at their hospital. Thereafter, the investigation officer being satisfied with the reply did not contact her again.

Dr. MD Ali Rabbani stated that he was the anaesthetist involved in the laproscopy cholecystectomy surgery done on 29th November, 2022. The surgery was done under spinal anesthesia because the patient opted for the same. He further stated that there were no anaesthesia related complications during surgery.

In light of the above the Disciplinary Committee makes the following observations:

1. The patient, Smt. Saniya, a 23-year-old female, was diagnosed with symptomatic cholelithiasis. She was admitted to Sahara Nursing Home on 29-11-22 for further evaluation and treatment.

Upon examination by Dr. Ved Pal Singh, a laparoscopic cholecystectomy was advised and subsequently performed on the same day under spinal anesthesia. The surgery was conducted by Dr. Ved Pal Singh, and anesthesia was administered by Dr. Md. Ali Rabbani.

Following the surgery, the patient was discharged on 30-11-22. However, it is noted that the patient did not follow-up with the operating surgeon, Dr. Ved Pal Singh, after removal of stitches on 8-12-22. No post discharge follow up treatment records of Sahara Nursing home have been made available to the Committee.

Despite the initial discharge, the patient experienced persistent pain abdomen and jaundice. Seeking further medical attention, she consulted Max Hospital, where she was diagnosed with a common bile duct (CBD) injury.

 To address the CBD injury, Smt. Saniya underwent hepaticojejunostomy on 15-02-23 at Max Hospital. Following the procedure, she was discharged in a satisfactory condition.

1. The Committee opines that a common bile duct (CBD) injury is a recognized complication of gall bladder surgery, including laparoscopic cholecystectomy, as evidenced by the patient's subsequent diagnosis and treatment at Max Hospital.

 It is emphasized that postoperative follow-up appointments with the operating surgeon are crucial for monitoring the patient's recovery progress, identifying any emerging symptoms or complications, and initiating timely interventions as necessary.

 In the present case, the patient's failure to follow-up with Dr. Ved Pal Singh after discharge from Sahara Nursing Home resulted in a missed opportunity for the operating surgeon to evaluate the patient's postoperative condition and address any concerning symptoms or complications that may have arisen.

1. The Committee acknowledges that performing laparoscopic cholecystectomy under spinal anesthesia, as was done in the present case, is not a common practice. While it is not absolutely contraindicated, the preferred approach for this procedure, especially in elective cases, is typically under general anesthesia.

 In elective surgeries like laparoscopic cholecystectomy, the choice of anesthesia should prioritize patient safety, comfort, and procedural feasibility. General anesthesia provides better control over the patient's airway, depth of anesthesia, and intraoperative conditions, which are often advantageous in laparoscopic procedures.

 While spinal anesthesia may be suitable for certain surgical procedures, its use in laparoscopic cholecystectomy poses potential challenges such as inadequate muscle relaxation, difficulty in patient positioning, and limited intra-abdominal workspace, which can affect the surgical technique and outcome.

 The Committee underscores the importance of judiciously selecting the appropriate anesthesia technique for each surgical case, taking into account factors such as patient comorbidities, surgical complexity, and anticipated intraoperative challenges.

In light of this case, it is recommended that the surgical team carefully evaluate the risks and benefits associated with different anesthesia options and prioritize the use of general anesthesia for laparoscopic cholecystectomy whenever feasible and appropriate.

 The Committee, therefore, advises caution and recommends the preferential use of general anesthesia for this procedure, particularly in elective cases, to optimize patient outcomes and procedural efficiency.

1. The absence of histopathological examination of the gall bladder in the present case is in contravention of established surgical protocol. Histopathological examination of the gall bladder specimen is a standard practice following cholecystectomy, aimed at confirming the diagnosis, assessing for the presence of malignancy, and guiding further management, if necessary.

 Histopathological examination provides valuable information regarding the underlying pathology of the gall bladder, including the presence of gallstones, inflammation, and potential malignancy. This diagnostic step is essential for ensuring accurate diagnosis and appropriate postoperative care planning.

 It is emphasized that histopathological examination of the gall bladder specimen is considered an integral part of the surgical protocol for cholecystectomy, regardless of the indication for surgery or intraoperative findings. This protocol is designed to safeguard patient interests and ensure comprehensive evaluation of the surgical specimen.

1. The Committee noted the absence of a separate consent for the administration of anesthesia in the present case. In surgical procedures requiring anesthesia, it is standard practice to obtain informed consent from the patient for both the surgical intervention and the anesthesia administration.

Informed consent is a fundamental principle of medical ethics and legal practice, aimed at ensuring that patients understand the nature of the proposed medical treatment, including the associated risks, benefits, and alternatives. Separate consent for anesthesia is crucial as it involves its own set of risks and considerations distinct from those of the surgical procedure itself.

After careful consideration of the observations made hereinabove, the Disciplinary Committee has reached the decision that no medical negligence can be attributed on the part of doctors of Sahara Nursing Home in the treatment administered to Smt. Saniya. However, the Committee advises Dr. Ved Pal Singh and Dr. Md. Ali Rabbani to exercise due diligence in future laparoscopic procedures. Additionally, they are directed to be mindful of the importance of proper record-keeping as part of good medical practice.

Matter stands disposed.

 Sd/: Sd/: Sd/:

(Dr. Maneesh Singhal), (Dr. Alok Bhandari) (Dr. Subodh Kumar)

Chairman, Delhi Medical Association, Expert Member,

Disciplinary Committee Member, Disciplinary Committee

 Disciplinary Committee

The Order of the Disciplinary Committee dated 12th June, 2024 was confirmed by the Delhi Medical Council in its meeting held on 24th June, 2024.

 By the Order & in the name

 of Delhi Medical Council

 (Dr. Girish Tyagi)

 Secretary

Copy to:-

1. Shri Mohd. Adil s/o Mohd. Shafi r/o H.No. 2244, Gali Dakotan, Turkman Gate, Delhi-110006.
2. Dr. MD Ali Rabbani, Moriya Ghat, River Side Road, Bihar-823001.
3. Dr. MD Ali Rabbani, Through Medical Superintendent, Sahara Nursing Home, 1864, Main Bazar Turkman Gate, Delhi-110006,
4. Dr. Vedpal Singh, Through Medical Superintendent, Sahara Nursing Home, 1864, Main Bazar Turkman Gate, Delhi-110006.
5. Medical Superintendent, Sahara Nursing Home, 1864, Main Bazar Turkman Gate, Delhi-110006.
6. Station House Officer, Police Station Chandni Mahal, Delhi-w.r.t. letter 127/local/SHO dated 31.03.2023.

 (Dr. Girish Tyagi)

 Secretary