

ADDITIONAL BENCH
BEFORE THE TELANGANA STATE CONSUMER DISPUTES
REDRESSAL COMMISSION: HYDERABAD.

CC.NO. 116 OF 2015

Between:

- ✓ 1). Smt. P.Chandrakala W/o. Late N.Devender Rao,
Aged 52 Years, Occ: Government Teacher,
Resident of Flat No.103, H.No.12-11-243,
KVR Prasad Apartments, Brahman Colony,
Warasiguda, Secunderabad 500061.
- 2). Mr N. Vinay, S/o. Late N.Devender Rao,
Aged 28 Years, Occ: Software Engineer,
Resident of Flat No.103, H.No.12-11-243,
KVR Prasad Apartments, Brahman Colony,
Warasiguda, Secunderabad 500061.
- 3). Smt.N.Sameera D/o. Late N. Devender Rao,
Aged 29 Years, Occ: House Wife,
Resident of Flat No.103, H.No.12-11-243,
KVR Prasad Apartments, Brahman Colony,
Warasiguda, Secunderabad 500061.

..... Complainants

And

- 1) M/s. Apollo Hospital Enterprises Limited,
Represented by its Managing director,
Smt.Sangeeta Reddy, D/o. Prathap Reddy,
Jubilee Hills, Hyderabad- 500 033
- 2) Ms.Sangeeta Reddy, D/o. Sri.Prathap Reddy,
Aged Major, Occ: Managing Director,
M/s. Apollo Hospital Enterprises Limited,
Jubilee Hills, Hyderabad- 500 033
- 3) Dr. Hari Prasad, S/o. K.V.R. Prasad,
Aged Major, Occ: Chief Executive Officer
M/s. Apollo Hospital Enterprises Limited,
Jubilee Hills, Hyderabad- 500 033

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- 4) Dr. Palepu B.N. Gopal, S/o. Not known,
Aged Major, Occ: I.C.U in-charge,
(Head of the ICU Dept.)
M/s. Apollo Hospital Enterprises Limited,
Jubilee Hills, Hyderabad- 500 033
- 5) Dr. Rajesh, S/o. Not known,
Aged Major, Occ: Nephrologist,
M/s. Apollo Hospital Enterprises Limited,
Jubilee Hills, Hyderabad- 500 033
- 6) Dr. Ravi Andrews, S/o. Not known,
Aged Major, Occ: Nephrologist,
M/s. Apollo Hospital Enterprises Limited,
Jubilee Hills, Hyderabad- 500 033
- 7) Dr. Narender Nath, S/o. Not known,
Aged Major, Occ: Resident Medical Officer,
M/s. Apollo Hospital Enterprises Limited,
Jubilee Hills, Hyderabad- 500 033
- 8) Dr. Sudeep, S/o. Not known,
Aged Major, Occ: ICU in-charge,
M/s. Apollo Hospital Enterprises Limited,
Jubilee Hills, Hyderabad- 500 033
- 9) Dr. Md. Azamuddin, S/o. Not known,
Aged Major, Occ: Duty Doctor,
M/s. Apollo Hospital Enterprises Limited,
Jubilee Hills, Hyderabad- 500 033
- 10) Dr. Priya, S/o. Not known,
Aged Major, Occ: Duty Doctor,,
M/s. Apollo Hospital Enterprises Limited,
Jubilee Hills, Hyderabad- 500 033
- 11) Dr. Karthik, S/o. Not known,
Aged Major, Occ: ICU Duty Doctor
M/s. Apollo Hospital Enterprises Limited,
Jubilee Hills, Hyderabad- 500 033
- 12) Ms.Emami, D/o. Not known,
Aged Major, Occ: Nurse
M/s. Apollo Hospital Enterprises Limited,
Jubilee Hills, Hyderabad- 500 033

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13), Ms.Srisiha, D/o. Not known,
Aged Major, Occ: Nurse
M/s. Apollo Hospital Enterprises Limited,
Jubilee Hills, Hyderabad- 500 033

14) Sri.Mandeep Singh, S/o. Not known,
Aged Major, Occ: Director of Medical Services,
(DMS-Retired Military Officer),
M/s. Apollo Hospital Enterprises Limited,
Jubilee Hills, Hyderabad- 500 033

..... Opposite Parties

Counsel for the Complainants : Ms. Katta Shravya

Counsel for the Opposite Parties 1 to 8, 11 to 13 : INDUS LAW FIRM

**QUORUM: HON'BLE SMT. MEENA RAMANATHAN - PRESIDING OFFICER-
MEMBER- (NON-JUDICIAL)**

HON'BLE SRI. K.RANGA RAO - MEMBER- (JUDICIAL)

&

HON'BLE SRI V.V. SESHUBABU - MEMBER (JUDICIAL)

**MONDAY, THE TWENTIETH DAY OF JULY,
TWO THOUSAND TWENTY SIX**

ORDER : (PER HON'BLE SRI. V.V.SESUBABU, MEMBER - (JUDICIAL))

01. The complaint is filed U/s. 17(1)(a)(i) of C.P. Act 1986 by the wife, son and daughter of Late. Sri. N. Devender Rao claiming in total Rs.1,11,40,560/- but restricted the same to Rs.1 crore under different heads as mentioned in Paragraph-21 of the complaint against Opposite

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Parties 1 to 14, payable with interest at 12 % per annum from the date of complaint i.e., 11.06.2015 till realisation.

02. The brief averments of the complaint are that Opposite Party-2 is the Managing Director and Opposite Party-3 is the Chief Executive Officer of the Opposite Party No.1; that the Opposite Parties 4 to 11 are the Doctors working in the Opposite Party-1 and Opposite Parties 12 to 14 are the employees therein; that on 22.03.2013 Late. Devender Rao(herein after will be referred as patient) after lunch in the House had developed symptoms of brain stroke with blurred speech and taken before Apollo Hospital branch at Secundrabad by 1:30 PM – 2:00 PM; that the duty doctor in the ward suggested to undergo CT –Scan and blood tests and by then patient was conscious; that after collecting money for the tests patient was subjected to investigations and tests; that at about 4:30 PM it was informed that, there was no Neuro Physician or a doctor to attend the patient, and suggested to shift to the Opposite Party-1 Hospital at Jubilee Hills, and also arranged ambulance; that no medical advice or precautions were given to the attendants for safe transport; that patient reached the Opposite Party-1 hospital around the 5:30 PM and was admitted in the emergency ward by collecting Rs.10,000/-; that Dr. Rajesh Reddy a physician came and checked the patient and due to delay caused, the golden hour treatment was denied to the patient; that after few minutes Dr. Ravi Andrews a nephrologist advised to go for dialysis without giving any explanations or

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investigations; that the Doctors proceeded to perform Haemodialysis and it went on till 10:00 PM and then shifted to ICU in the mid-night, where the dialysis was conducted and informed the condition of the patient as stable; that on 23.03.2013 Dr. Narender Nath, RMO informed that, there was no facility of Arogya Badratha in the Opposite Party-1 hospital and so, Complainant No.2 informed them that, the patient is having coverage under the scheme and letter signed by Opposite Party-3 and Sri. Subramanyam was forwarded; that on 24.03.2013, patient was found to be doing good in ICU with little blurred speech; that on 25.03.2013 having received the letter from Opposite Party-7 it was taken to the Arogya Badratha Department Co-ordinator by the Complainant No.2; that on 25.03.2013 patient was alright and spoke with all; that on 26.03.2013 at 10:30 AM, Dr. P.B.N. Gopal in charge of ICU along with Opposite Parties 5 & 6 stated that, the patient had brain stroke on the late night of 25.03.2013 which increased the size of the clot by 50% but no reason was given for the increase of the clot but Opposite Party-4 stated that due to high blood pressure it was increased but the patient was doing good at that time also; that on the same day evening at 6:00 PM it was informed to the complaint; that patient was in drowsy condition and required to be kept on ventilator and Opposite Party-4 also stated that, patient was in coma and the signatures were obtained on consent forms without disclosing the contents that, the patient had second stroke in ICU on 25.03.2013; that in the letter to Arogya

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Badratha Department, the condition of the patient is stated as "due to poor glass coma scale was incubated and put on ventilator on admission", which is false to the core; that since 26.03.2013, the condition of the patient is in deterioration; that in the letter dated 27.04.2013 it is mentioned that, the expenses already crossed Rs.8 lakhs by 27.04.2013; that, the stroke on 25.03.2013 had happened due to the negligence and improper treatment of the Doctors and Nurses; that having dissatisfied with the services of Doctors and staff, the Complainant No.2 thought to shift the patient to another Hospital but as he was in coma, no Hospital would be given an admission dropped the idea; that from 22.03.2013 to 11.04.2013, deliberate misinformation was given about the happenings; that patient had undergone haemodialysis for 8 times in a span of 19 days and it was informed by Opposite Party No.6; that blood is getting clot on veins and they were not informed about other type of dialysis i.e., peritoneal which amounts to deficiency of service; that on 08.05.2013, patient was shifted tracheotomy ward where the monitor was not functioning; that around 6:00 PM patient was continuously coughing but nobody bothered to attend the same and around 7:00 PM Complainant No.2 observed that patient was unable to breath and his oxygen level was decreasing, as the secretion near throat was the reason for difficulty in breathing; that code blue status of the patient was declared in mike and then patient was subjected to CPR, with medication and then patient revived; that the doctors themselves

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declared that the patient is not safe in the hospital but pleaded with Complainant, that it will not happen in future; that patient kept on ventilator in the next 5 days and in total 22 days in ICU; that having lost hope about the services and expertise of the Opposite Parties 1 to 14, the Complainant shifted to fighting mode; that as per the doctors there was no sufficient staff in the Opposite Party-1 Hospital and it is being run with junior doctors but giving a picture that, as if its services are best in nature; that on 23.03.2013 and on 23.04.2013, Opposite Parties 6, 8 and RMO forced the Complainant No.2 to secure the services of special nurse from outside; that as already Opposite Party collected Rs.12 Lakhs Complainant-2 was reluctant to engage a special nurse; that on 03.06.2023 Complainant No.2 when informed to the doctors present in the Arogya Badratha Office about the difficulty faced by them in the Opposite Party-1 hospital, he was advised to file a case on the hospital, once patient is moved out from the hospital; that on 26.05.2013, the patient was found to be on ventilator in ICU at 10:00 AM without consent, and doctors informed on questioning that, the patient had respiration problem and need to watch for 4 or 5 days; that on 28.05.2013 at 5:00PM ICU Doctor informed to shift the patient to the ward from the ICU; that on 10.06.2013 Complaint before Human Rights Commission filed complaint against hospital Management for the improper treatment of the patient; that having learnt about the intention of Complainant No.2 contemplating to approach Human Rights

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Commission, on 08.06.2023 the RMO gave a complaint to the police against Complainant No.2 with false allegations; that DM&HO was directed to inspect the Opposite Party-1 Hospital and also examine the Complainants to secure evidence; that the District Health Medical Officer visited the Complainant No.1 only, to write a letter stating his visit to her, and then after gave a false report; that the Human Rights Commission without seeing the proofs about the medical negligence directed the Complainants to approach consumer court; that on 12.10.2013 Complainant informed to the media about the medical negligence of the Opposite Parties; that on 19.10.2013 at 5:00 AM, Complainant No.1 noticed secretion from the mouth of the patient and she called for the nurses who in turn called the doctors and around 6:00 AM Opposite Party-9 came belatedly, and after CPR declared the patient as dead by 6:40 AM; that in May 2014, Complainant No.2 filed a complaint before IV ACMM, Nampally and FIR 594/14 was registered against the Management and Doctors, but so far which charge sheet is not a filed; that Opposite Party.1 filed O.S.No.24/2014 before vacation civil court, and it was renumbered as O.S.No. 439/2014 before 10th Additional Chief Judge, C.C.C Hyderabad and obtained exparte order of injunction; that it is being contested by the Complainants; that a complaint was lodged before Medical Board, Andhra Pradesh by the Complainant No.2 and it is pending adjudication; that the complainant No.2 recorded the video & audio recordings of the doctors of the Opposite Party-1 Hospital, which

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will prove, not only the medical negligence but also unfair trade practices adopted by the Opposite Party-1 hospital; hence, the Complainant.

03. (a) The brief averments of the written version Opposite Parties 1 to 8, 11 to 13 are that the complaint is not maintainable either on facts or under law; that, the Complainants are put to strict proof of all the averments made in the complaint except those that are admitted; that there is no cause of action to the complaint; that Opposite Parties 2 & 3 are not the Managing Director and Chief Executive Officer respectively in Opposite Party-1 Hospital; that the medical counsel vide its order dated 18.06.2015 found no negligence on the Opposite Parties; that the patient was in the Opposite Party-1 hospital from 22.03.2013 to 19.10.2013 and no case is made out for negligence against the Opposite Parties by the Complainants; that in case, there is dearth of staff in the Opposite Party-1 hospital, the Complainants should not have continued the patient in the hospital for 07 months; that the Complainants have not cleared the dues as such cannot be termed as consumers till the clearance of dues; that the contention that no hospital would admit a coma patient, as put forth by the Complainants is improbable; that the Complainants without any basis fabricated video recordings, to make a wrongful gain; that Opposite Party-1 has earned Joint Commission Internationals Accreditation and Certification as the global gold seal of approval and it maintains high standards on several fields in providing treatment, and safety of patience etc.,

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03. (b) The brief other averments are that on 22.03.2013 at 3:15 PM patient was brought before Apollo Hospital, Secundrabad, as he was having sudden onset of left side weakness and difficulty in speech at 1:30 PM in his house; that he was examined, investigated and found to be suffering from acute ischemic stroke after, excluding haemorrhage by C.T-Scan; that his clinical history suggestive of stroke, and diagnosed as cerebra vascular accident, right middle cerebral artery territory; that thrombolysis was differed for two independent contra indications viz.,

(1) Chronic renal failure and recurrent strokes in the past; that after explaining condition of the patient to the family by Dr. Sharanya, the Complainants decided to shift the patient to the Jubilee Hills Apollo; that the clinical history reveals that, in the year 2000 the patient was admitted in Opposite Party-1 Hospital and got treated for total 'occlusion of right internal carotid artery'; that was admitted in the year 2005 and treated for "deep wain thrombosis"; that in year 2007 was admitted in the Yashoda Hospital, Secunderabad and treated for 'acute cerebra vascular accident- ischemic stroke- right cerebellar infarct' and admitted in June 2007 within a month from the previous admission and was treated for right cerebellar infarct, HTN and DiM; that the patient was on alternative medicine from 2007 to 2012 before getting admitted on 22.03.2013; that patient was diabetic for 23 Years, diabetic kidney disease with CKD stage IV, coronary artery disease; that on neurological examination found to be

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had left hemiplegia, left horizontal gaze paresis and his NIHSS stroke score was 15; that C.T-Scan brain showed old infarcts mainly in right middle cerebral artery territory and no haemorrhage; that blood parameters showed grossly elevated as serum creatinine (10.8 mg/dl) and so, thrombolysis was not considered, so also intra-arterial chemical or mechanical thrombolysis requiring cathlab procedure; that decided to start anti platelet therapy along with low molecular weight heparin since, he was already taken single anti platelet drug; that evaluated by neurologist, nephrologist, cardiologist, intensivist and endocrinologist; that patient was ventilated due to worsening sensorium and had hyper catabolic AKI on CKD and needed aggressive dialysis; that tracheostomy was done on 01.04.2013 due to the need for prolonged ventilation and poor cerebral function; that PEG tube was placed for adequate nutrition; that on stabilization from hemodynamic (cardiac) respiratory and nephrology function, shifted to tracheostomy ward on 08.05.2013; that he suffered a period ASYSTOLE, secondary to poor cardiac function but resuscitated and shifted back to ICU; that on stabilisation again brought back to tracheostomy ward on 30.05.2013 and was maintained on CAPD, PEG feeds, physiotherapy and supportive medication; that he was afebrile and maintain euglycemic, non-uremic and vitals were stable; that on 23.09.2013, patient had developed respiratory distress and shifted to ICU and attended by medical emergency team; that on stabilisation brought back to ward on 04.10.2013; that patient developed peritonitis

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progress into sepsis and DIC, requiring vitamin-K and FFP and escalation of antibiotics and developed septic shock and cardiac arrest and declared as dead after CPR at 7:40 AM on 19.10.2013; that he was treated well as per protocols; that patient was subjected to haemodialysis and peritoneal dialysis; that the family was made to learn peritoneal dialysis to continue the same at home; that the second complainant is always nuisance to the hospital and he started recording videos of other patients and even some patients lodged written complaints against him; that vexed with his incorrigible behaviour, a complaint was lodged to the Banjara Hills Police on 08.06.2023 but, the same did not yield any results; that it is wholly false to allege that, the patient was brought before Opposite Party-1 hospital at 6:40 PM but on the other hand, the stroke team notification was done at 4:57 PM & Opposite Party-5 has seen the patient at 5:00 PM and gave an opinion that, it is not a fit case for thrombolysis; that on 24.03.2013 condition of the patient was drowsy but, hemo-dynamically was stable with impairment of speech; that it is false to allege that due to medical negligence that patient suffered second stroke in ICU on 25.03.2013; that as the patient progressively became drowsy, which is a natural evolution and progression of stroke, was put on ventilator on 26.03.2013; that at the time of admission his blood pressure was 130/80 and subsequently it was fluctuating from 200/90 to 120/17; that in the letter dated, 27.04.2013 to Arogya Bhadratha, it is mentioned that patient was on

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ventilator on 26.03.2013 that nothing is mentioned but he suffered a stroke in ICU on 25.3.2013; that patient was on and off from ICU to TRACHESTOMY ward and vice versa; that the patient succumbed on 19.10.2013 because of Cardio respiratory Arrest, secondary to septic shock and DIC; that the Hon'ble High Court when the order of injunction was vacated for a brief period, restored the order of interim injunction; that there is no negligence, or any deficiency of service or unfair trade practice against the Complainants or in providing treatment to the patient. With this requested to dismiss the complaint with exemplary costs.

04. The second Complainant filed evidence affidavit as CW.1, (it shall be read as PW.1) and got marked Ex.A1 to A17 and in the cross examination of DW1, Ex.C18 to C21 are marked by confronting the witness (they shall be read as Ex.A18 to A21). For the Opposite Parties RWs 1 to 5 (**Dr. Ravindra Babu, Dr. P.B.N. Gopal, Dr. Rajesh Reddy, Dr. Ravi Andrews and Dr. Narendranath** respectively) are examined and Ex.B1 to B11 are marked. Ex.X1 & X2 were also marked.

05. Now the points for discussion are:-

- (i) Whether the patient was treated properly within the Golden hours?
- (ii) Whether the patient suffered any stroke on 25.03.2013?

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(iii) Whether there is any negligence, deficiency of service and unfair Trade practices on the part of Opposite Parties?

(iv) Whether the complainants are entitled for any compensation as claimed?

(v) Relief?

06. Complainants counsel and Opposite Parties counsel filed written arguments and case law. Medical literature is also filed. Opposite Parties 9, 10 & 14 called absent despite taking out the service by publication. For the sake of convenience, the parties will be addressed as they arrayed in the complaint.

07. Points No.(i) to (iii):- Late. Devender Rao is the patient in the case on hand (herein after will be called as the patient). As per the complaint on 22.03.2013, the patient was taken before Apollo Hospital at Secunderabad between 1:30 PM and 2:00 PM and made to wait long time and ultimately subjected to undergo C.T- Scan and Blood Tests. It is the written version of the Opposite Parties, that the patient was taken before Apollo Hospital, Secunderabad at 3:15 PM. As per Ex.A10 dated 11.06.2013, in H.R. Case No.3202/2013 dated 11.06.2013 given by PW1, goes to show that on 22.03.2013 patient was taken before Apollo Hospital, Secunderabad at 2:30 PM; and due to non-availability of Neuro Doctor they moved us to Apollo Jubilee by 5:30 PM, as we started at 4:30 PM from Secunderabad. It means neither the timing given in the complaint nor in the written version is correct.

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08. Ex.A4 are the bills issued by Apollo Hospital, Secundrabad. The bill for "coagulation profile" was generated on 22.03.2013 at 16:00:55 and the bill for "C.T-Scan Brain without contrast" was generated on the same day at 15:14:50. It does not mean that, the patient was taken to the hospital at 15:15 hours. It is mentioned in the complaint that they reached Opposite Party-1 hospital at 5:30 PM, and for the 1st time the patient was seen by 6:40 PM in a casual manner by RW3. The opposite Party Counsel relied upon page-47 of Ex.A1, which shows patient came to Apollo Jubilee at 4:55 PM and Blood sample was drawn at 5:02 PM and Blood report was collected at 5:30 PM and medication was given by 6:30 PM. As per the first page of Ex.A1, the patient was admitted on 22.03.2013 at 06:42:24 PM. At the bottom, the attendant of the patient/PW1 signed the date and time as 22.03.2013 at 6:38 PM. The 1st page relates to '*authorisation and investigation, procedure, treatment, release of information and payments*'. The 2nd page relates to patient '*history and physical record*', Page-3 relates to the same and page-4 relates to '*physical examination*'. The page-4 shows that, patient was examined by Dr. Priya on 20.05.2013 at 1:00 PM. Underneath the same page, the date is noted as 22/03. Exfacie the noting's of Dr. Priya relating to the date and time are false, and the date 22/03 is fortifying the same. Nursing admission assessment at page-5 shows, it was signed on 22.03.2013 at 7:00 PM. It is needless to mention by that point of time, there was no necessity for the attendants/Complainants to

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mention wrong time. "Functional assessment form" in page-7 show physiotherapist put the date 23.03.2013 at 10:10 AM. The 'Nursing assessment' at page-9 shows the temperature readings were recorded on 22.03.2013 at 2:00 PM & 6:00pm. By that time, the patient was not even admitted in the Apollo Jubilee because he was admitted at 6:42:24 hours. *It is difficult to believe that, even before admission, the Patient was examined and medication started.* For the reasons better known to the Opposite Parties, the admission form, the assessment done by the casually Doctor and the other alleged teams of experts etc., is not filed not only relating to Apollo, Secundrabad but also Apollo, Jubilee. Perusal of the two bills, show that Dr. Syed Nabi, of Emergency medicine prescribed the tests. So, it is clear that, the Patient entered into the Emergency Causality Ward. Dr. Sharanya, who said to have referred the Patient to Jubilee Hills, Hospital is not examined and her credentials as doctor also not divulged.

09. It is important to note that the patient was taken before Apollo, Secundrabad as an emergency case, but not to subject for diagnostic tests. It was a full-fledged hospital. Normally, if any patient comes to emergency, will be taken inside, Doctor/Doctors will attend and note down the complaints and assess the condition of the patient and will provide first aid or extend the necessary emergency services. Quite surprisingly, in the case on hand, no record of the hospital at Secundrabad is filed to verify the condition of the patient and the timings

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of the visit. It is not luxury to expect such treatment record, from a hospital which is recognised as *"The Global Gold Seal of approval"* with JCI accreditation and certification as reflecting in Ex.B1 & B2. It is the contention of PW1 that, they were kept at the hospital under the guise that Neuro physician is coming and at last advised them to go Apollo Jubilee as the said expert not turned up. It is for the Opposite Party to confirm whether any said Neuro physician was in fact present in the hospital during those days or no such expert was on the rolls of the hospital. Surprisingly, the Opposite Party-1 kept silent without answering the same. In other words, the best available evidence is not placed before the commission, which amounts to suppression of a material aspect of the case. If really the emergency record of Apollo, Secundrabad is placed, everything would have been clarified; unfortunately, it was not done.

10. The Opposite Party-1 Hospital also not filed its original record to establish the time of arrival of the patient and also the treatment that was provided him during the entire stay in the hospital till his death. Except, the photo copies of the documents filed by the Complainants under Ex.A1 to A5 nothing is there to rely upon, for better appreciation of the facts or contentions and rival contentions of the parties to the complaint. The nursing assessment and clinical chart giving noting's dated 22.03.2013 only. For the dates 23.03.2013 to 27.03.2013, it is noted **"refer to master chart"**. The master chart has

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not seen light of the day. Pages 13 to 86 relates to the dates from 22/03 to 19.10.2013 i.e., from the date of admission till date of the death. The page-13 relates doctor's daily progress report not mentioned the name of the patient and all are loose sheets without serial number of the pages, except the manual numbers that are made in handwriting. In page-13, the date is over written from 20 or 28/03 to 22/03 mentioning the time at 5:00 PM. At page-15, by mentioning the time at 6:00 PM, it is recorded as **"Patient not thrombolysed as patient beyond window period"**. Patient was instructed to shift to ICU. As per drug chart at page-70, "claxane injection" was given at 6:30 PM. I.V.I.Ns was said to have administered at 6:00 PM, but it was scored off. Except, **Dolo** nothing was given up to 10:00 PM though several names of medication are mentioned on 22.03.2013. It means, as per the drug chart, no much treatment was given to the patient on 22.03.2013. In view of the above discussion, *we are of the view that, no proper treatment was given to the patient during the Golden hour period.* Over and above the same, the corrections or over writings on the dates, manipulations and time, is adding fuel to the fire regarding the delay. When the patient said to had symptoms at his house, Warasiguda on 22.03.2013 at 1:30 PM, not starting any treatment by 6:00 or 6:40 PM, leads to an inference that, the Golden hour period was wasted by the Opposite Parties due to their negligence. **As per Ex.A3 chart the first medication was started on the patient on 22.03.2013 only at 7:13 PM.** So, it is very clear that no medication was given to the

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patient prior to that. Since, the Apollo Hospital, Secundrabad is also comes under the Management of Opposite Party No-1 hospital, the time taken at the Secundrabad Hospital also shall be considered. In a case of "acute ischemic stroke" the crucial period is first 60 minutes and maximum time 4.5 hours. The Opposite Parties cannot retreat themselves from the statement made by the Doctor, at the alleged 6:00 PM on 22.03.2013 in page-13 that **window period was lapsed.**

11. The Opposite Parties developed version that as the patient is having comorbidities like k/c/o-HTN+DM+CAD/IHD+CKD, since 10 months on conservative medication with past history of CVA (R-MCA INFRACT) in 2000, 2005 & 2007 with total occlusion of R-ICA, Thrombolysis was not done because if done it has far reaching affects and cause more damage to the patient. It is to be noted that, this version was surfaced only when the golden period of treatment theory was raised by PW1. Nothing is mentioned anywhere in the case sheet, that the thrombolysis was not done for the reasons as stated supra . So, we are of the view that, the present version and the literature as produced before this Commission, is an afterthought to wriggle out from the allegation made in the complaint.

12. PW1 in paragraph-8 of the Complaint stated that, his father had a brain stroke in ICU on the late night of 25.03.2013 as declared by RWs 2 to 4 and for that, reason was given by RW2 as the high Blood

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Pressure and further averred that, the said fact is not noted in the case sheet, which increased the brain clot from 25% to 75%. Nothing is mentioned in the case sheet dated 25.03.2013 about the brain stroke to the patient in ICU. PW1 claimed that in the video recordings made under Ex.A17, RW2 said to have made a statement that the patient had a second stroke on 25.03.2013. RW2 stated in the cross examination that he does not remember of making any statement as stated supra. It may as it be there.

13. In the written version, it is pleaded that patient suffered a period of "asystole secondary poor cardiac function from which he was resuscitated". The case sheet relates to the period 08.05.2013 is not filed to show that, the patient had haemodynamic (cardiac), respiratory & nephrology functions. When we googled what is meant by "Asystole" the answer is "*Asystole, widely known as a cardiac flat line, is the most serious form of cardiac arrest, where the heart completely stops all electrical and mechanical activity. Without immediate cardio pulmonary resuscitation (CPR) and advanced medical care it is fatal within minutes*". It is the allegation of Pw1 that, on 08.05.2013, patient was shifted to tracheotomy ward between 2 – 3 PM and about 6:30 PM, nurse gave one feed to the patient and thereafter patient had continuous coughing but nobody attended the patient till 7:00 PM and due to the same, patient had breathing trouble and cardiac arrest and thereafter he was taken to ICU and life came back after resuscitation. For reasons better known to

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Opposite Parties, case sheet dated 08.05.2013 is not filed to prove that they were alert in providing services to the patient or disprove the allegation that, nobody attended the patient for about more than half an hour.

14. It is important to note that along with case sheet, the hospitals are expected to file the investigation reports relating to the patient performed on time to time. In the case on hand, the C.T- scan report and coagulation report relating to the Ex.A3 & A4 are not filed. The readings of the reports are not extracted in the Ex.A1. Likewise, several investigations conducted on the patient are not made part of the record. Virtually, no record is available before this commission from 28.03.2013 to 17.10.2013. We are reiterating at the cost of repetition; this is not expected from the Opposite Party-1 Hospital which is having international accreditation.

15. The conduct of PW1 is also objectionable. He pleaded that Opposite Party-1 was in dearth of staff; it was being run by junior doctors without specialists, as it claims, and its services are bad/worse. PW1 imagined that on 25.03.2013 that, patient had brain stroke in the ICU basing on the letter addressed to Arogya Bhadratha, dated 27.04.2013 under Ex. A7, though there was no such brain stroke recorded therein. It is nothing but maligning the reputation of the Opposite Party-1 Hospital. PW1 except stating that, the patient was alright from the year 2007 to till

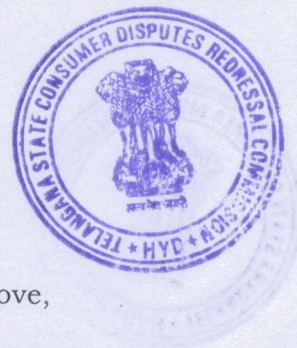
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22.03.2013, no document is filed, more so when he was not disputing the recordings about the history of the health of the patient on the second page Ex.A1. Added to the same, PW1 also not filed previous medical record of his father. When the patient was having DM since 23 years with CKD, it is difficult to imagine that he was not taken any medicines from 2007 to 2012. The Opposite Party-1 also not filed any document show that, the patient was on the alternative medicine during the above period. Such plea of alternative medicine as made in the written version is not even recorded in the history of patient, said to have been informed by the attendants. It shows both sides are not speaking truth.

16. Ex.B10 & B11 are judgment and decree in OS 439/2014 dated 04.06.2018 made by the 10th Additional Chief Judge, CCC, Hyderabad. PW1 herein was restrained by permanent injunction from posting comments or carrying out any reports/articles or comments or advertisements of Three websites or face book on medical negligence or print or electronic media or via-internet against the Opposite Party-1 herein having the effect of defaming or lowering down the image of hospital in public at large. No appeal is preferred by PW1 against the said judgment. So, it became final. The Civil Court also observed that, Ex.B13 & B14 which are videos in the form of CD are not proved. Section 65B certification as required under evidence act is also not filed. Over and above the same, PW1 stated in the cross examination that one doctor informed him about medical negligence in the case but, he could not

VV Sesh Babu



disclose the name of the said doctor. No expert is examined to prove, where exactly the Opposite parties were negligent in providing day to day treatment to the patient. Therefore, we are of the view that the videos in the form of CDs cannot be considered to decide the alleged negligence.

17. Further, it is to be observed that admitted facts need not be proved. DW5/Dr. Narendranath who worked as medical officer in Opposite Party-1 hospital from July 1977 to 2016. He stated that, he has seen the video recordings pertaining to his role. In the cross examination admitted that his presence was there in the videos and he also spoke in the videos; that he only take cares of insurance and junior doctors; that what he has stated in the videos as appearing is 100% correct; that advised to take back the patient back to home otherwise patient would die and volunteered, that in case patient remains in the hospital he may die of inter-current infections; that advised them to appoint private nurses since even children are being treated in the house with tracheostomy by appointing nurses; that Rs.3000/- was paid per day, he would arrange the patient to continue in physiotherapy ward, which is not exclusively belonged to Opposite Party-1 Hospital. Therefore, the contention of PW1 that the doctors informed the patient to leave the hospital, else patient would die; that he was asked to engage private nurses etc., is true. At the same time, PW1 himself performing peritoneal dialysis is not an act of, Opposite Party1 staff refusing to do it. On the other hand, it is clearly stated by RW4, that attendants of the patient was

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trained to perform the same in home after discharge. When once patient is admitted in a hospital under particular Arogya Bhadrata Scheme, the Hospital is expected to discharge its duties, and cannot encourage attendants to engage private nurses to look after a person, who is impatient in the Hospital. No document is filed to show that the bill for the treatment of the patient was crossed more than 15 Lakhs and PW1 was reluctant to get discharge of father or to pay the beyond 15 Lakhs.

18. The counsel for Opposite Parties have relied upon several case law on the aspect of negligence viz.,

- (i) SGS India Ltd. Vs Dolphin International Ltd. in 2021 SCC online SC 897
- (ii) Chairman and MD City Union Bank Ltd. Vs R. Chandramohan (2023 SCC online SC 341)
- (iii) Deep Nursing Home & Another Vs Manmeeth Singh Mattewal & Others
(2025 SCC online SC 1934)
- (iv) Bombay Hospital & Medical Research Centre Vs Aasha Jaiswal & Others
(AIR 2022 SC 204)

The above 4 cases are not applicable to the facts of the present case. In the case on hand, on the face of record, (with the help of available evidence) it is very clear that the Opposite Parties have wasted the golden hour period in providing treatment to the patient. Added to the same, both parties have suppressed the previous record or without support of any documentary evidence, drawn their own conclusions by

V. Seshu Babu



assumptions and presumptions. Due to the failure to provide golden hour treatment, it is obvious reason for deterioration of health condition of a patient, when days progressed, more so when the patient is having so many comorbidities. The points are answered accordingly

19. The Age of patient is record as 52 years, 6 months and 19 days in Ex.A4. He died 6 months thereafter. It means he completed 53 years. The age of super annulation was 60 years by the year 2013. The salary details of the patient are not provided in the form of any certificate. However, in the complaint, the salary for the months of May to December 2013 is noted as Rs.3,64,680/-. If it is divided by 8, the monthly salary will be about Rs.45,585/-. Out of which 1/3rd shall be deducted towards the personal expenditure of the patient. It comes to Rs.30,390/-. *For the persons in the age group of 50 to 55 the multiplier, is '11' as per the judgment of the Sarla Verma reported in Civil Appeal No.3483 OF 2008 dated, 15.04.2009 by Hon'ble Supreme Court of India.* In such case, the annual contribution will be Rs.3,64,716/- and as per multiplier it will be Rs.40,11,876/-.

20. As the patient died just short of 07 years, to the date of super annuation, but entitled for gratuity and pension. Therefore, not entitled for any amount under the said heads. As the multiplier taken care of all aspects, the loss of salary, the earned leaves cannot be taken into consideration. It is to be noted that, the patient had serious health issues since, 2000. Then he might have applied several leaves. Unless

V V Sesh Babu



leave account certified by the Department is filed, one cannot know how many E.L. or medical half pay leaves available to his credit. Towards loss of estate a sum of Rs.1 Lakh, towards loss of consortium to the 1st complainant can be given at Rs.50,000/- and to the Complainants 2 & 3 at Rs.25,000/- each. Funereal expenses will be sanctioned to every Government employee; as such no amount is awarded under the said head. The Opposite parties maintained the records in the shabbiest manner, when compared to the claims made by about its standards; as such shall pay compensation of Rs.1 Lakh. Altogether the Opposite Party 1 hospital is liable to pay the awarded amounts under the principle of vicarious liability of the other Opposite Parties. The amounts are payable within 30 days from the date of receipt of the order. In case of default, the above amounts, except compensation of Rs.1 Lakh, shall carry interest at 9 % from the date of default till realisation. Out of the compensation of Rs.40,11,876/- + Rs.1 Lakh loss of estate & Rs.1 Lakh compensation & Rs.25,000/- towards costs, the Complainant No.1 is entitled for 50 % and complainant 2 & 3 are entitled for each 25 %.

21. In the result, the complaint is partly allowed with costs of Rs.25,000/- against Opposite Party No.1 with the following directions:-

(a) To pay Rs.40,11,876/- towards medical negligence.

(b) To pay Rs.1,00,000/- towards loss of estate.

V. V. S. S. S. S.

- (c) To pay to the Complainants No.1 to 3 @Rs.50,000/-, Rs.25,000/- and Rs.25,000/- respectively towards loss of consortium and paternal affection.
- (d) To pay Rs.1,00,000/- compensation for Shabby maintenance of records.
- (e) Time for compliance is 30 days from the date of receipt of this order.
- (f) In case of default in the payment of Rs.40,11,876/- + Rs.1,00,00/- loss of estate + Rs.1,00,000/- compensation within 30 days as stipulated the amount shall carry interest @ 9% p.a., from the date of default till realization.

Typed to my dictation by the Steno on system, corrected and pronounced by us in the Open Court on this the 20th Day of July, 2026.

Sd/- MEMBER

Sd/- MEMBER

Sd/- MEMBER

APPENDIX OF EVIDENCE
WITNESS EXAMINED

Evidence for the Complainant

PW1.Mr. Vinay. N

Evidence for the Opposite Parties 1 to 8, 11 to 13 :-

RW1:Dr. Ravindra Babu

RW2: Dr. P.B.N. Gopal

RW3: Dr. Rajesh Reddy

RW4: Dr. Ravi Andrews

RW5: Dr. Narendranath

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EXHIBITS MARKED For Complainant:-

- EX.A1: Admission Records, Dt.22.03.2013
- EX.A2: Consent Form, Dt.26.03.2013
- EX.A3: Apollo Pharmacy Records, Dt. 22.03.2013
- EX.A4: Haematology bill, CT.Scan bill & Deposit Receipt, Dt.22.03.2013
- EX.A5: Apollo RMO Request Letter to CEO, Dt.23.03.2013
- EX.A6: FIR, Dt.09.06.2014
- EX.A7: Medical Report from Apollo RMO to Arogya Bhadrata, Dt.27.04.2013
- EX.A8: Special Permission from Arogya Bhadrata, Dt.03.06.2013
- EX.A9: Apollo Hospital reply to H.R.Case No.3202/2013, Dt.04.09.2013
- EX.A10: H.R.Case No.3202/2013 case filing, Dt. 11.06.2013
- EX.A11: H.R.Case No.3202/2013 case Order, Dt. 04.09.2013
- EX.A12: Civil Court Case, Hyderabad-O.S.No.439/2014 (Old O.S.No.25/2014)
- EX.A13: Coverage of patient (petitioner father) medical negligence by media.
- EX.A14: Awareness on social media on Apollo Hospital negligence by the petitioner, Dt.15.07.2014
- EX.A15: Apollo hospital Jubilee hills Medical Negligence cases, online complaints by victims
- EX.A16: Apollo Hospital Medical Negligence cases, online complaint by victims throughout India
- EX.A17: CD Containing Audio and Video Recording
- EX.A18: Order dated 18.06.2015, issued by A.P. Medical Council
- EX.A19 & Ex.A20 : Portions of deposition of DW1 in OS 439/14 before the 10th ACJCCC, Hyderabad
- EX.A21: Judgment and decree dated, 04.06.2018 in OS 439/14



For opposite parties :-

- EX.B1: Certificate of Accreditation from Joint Commission International.
- EX.B2: Joint Commission International Accreditation Standards for Hospitals.
- EX.B3: Letter from RMO, Apollo Hospitals, Jubilee Hills to Secretary, Arogyabhadrata.
- EX.B4: Letter to Apollo Hospitals, Jubilee Hills from D V Annapoorna complaint against 2nd Complainant.
- EX.B5: Letter to Apollo Hospitals, Jubilee Hills from Vijayalakshmi – Complaint against 2nd Complainant. Dt.08.06.2013
- EX.B6: Letter from Arogya Bhadratha. Andhra Pradesh Police Department. Health & Medical Welfare Trust to RMO. M/s.Apollo Hospital, Jubilee Hills patient may be Discharged from hospital with immediate effect. Dt 07.06.2013.
- EX.B7: Death Summary, Dt.19.12.2013.
- EX.B8: Letter from Andhra Pradesh Medical Council to 2nd complainant- No negligence on the part of treating doctors P. Ravi Andrews, Rajesh Reddy, k. Narendranath Reddy, other doctors and management of Apollo Hospitals.
- EX.B9: Cross examination of 2nd Complainant by Counsel for Plaintiff in OS. No.439 of 2014.
- EX.B10: Order of the 10th Additional Chief Judge, City Civil Court, Hyderabad in OS. No. 439 of 2014.
- EX.X1: Portion of deposition of Mr. Nuli Vinay at page-4 in redlines connected to OS 439/14 before 10th ACJ CCC, Hyderabad
- EX.X2: Portion of deposition of Mr. Nuli Vinay at page-10 & 11 in redlines connected to OS 439/14 before 10th ACJ CCC, Hyderabad.

Sd/- MEMBER

Sd/- MEMBER

Sd/- MEMBER

//CERTIFIED TO BE TRUE COPY//

Order pronounced on : 20/07/2021
 Copy made ready on : 04/08/2026
 Despatch number and date : 2649 dt 04/08/2026
 Free copy of order furnished to the Complainant(s) ✓ : 06/08/2026
 Free copy of order furnished to the Opposite party(s) :

Cc TO,
 1. The Complainant
 2. Opposite party/ies.

Chiranjeevi
 ASST. REGISTRAR
 Assistant Registrar-cum
 PB to Hon'ble President
 Telangana State Consumer
 Disputes Redressal Commission
 HYDERABAD - 500 004