

# BIHAR HUMAN RIGHTS COMMISSION (BHRC)

*9, Bailey Road, Patna*

**File No. BHRC/Comp. 2756/14**

**Case of Rohit Kumar: Case of amputation of arm of victim.**

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13.04.2017

Applicant present. Dy. Superintendent, PMCH present.

The admitted fact of the case is that petitioner's son Rohit Kumar aged 12 years met with an accident on 11.06.2014. He came to PMCH got treated there and thereafter approached different doctors/institutions and lastly his left arm was amputated. Dispute is on the point of responsibility/and negligence if any on part of PMCH, petitioner or his son. On this point petitioner's assertion is that after the plaster/pop slab by a doctor in PMCH his son was asked to come after a week. Unusual pain was reported to the doctor in PMCH but was not considered nor there was any response.

Petitioner along with his son came back his home due to above pain, plaster/pop slab was cut, some wound with back spot was seen over the hand. Dr. Arvind was approached in Nawada. He advised him to go to Patna. Here petitioner came to Dr. R.N. Singh at Rajendra Nagar where his son's hand was amputated as it was told that life would be at the cost of the hand.

Deputy Superintendent, PMCH appeared to support the report submitted in this Commission filed on behalf of PMCH and Health Department. Report of PMCH as well as of Health Department is clear on the point that patient came to PMCH; he was admitted there, provided temporary plaster/pop slab. Again a doctor in outdoor saw the patient and advised him to approach emergency room no.105 but that was not complied by the petitioner. Papers with Deputy

Superintendent goes to show that patient was advised on 12.06.2014 to approach emergency room no.105 at the same time it is clear that a day earlier when patient was admitted in emergency of the PMCH he was not discharged but allowed to walk free certainly in absence of attendant.

Here the dispute is whether patient was asked to come after a week or he was advised to remain in hospital. Record of 11.6.2014 is against the hospital while paper with patient also of outdoor dated 12.06.2014 is clear about the advice to approach emergency room no.105. The above fact shows half of the fault on behalf of the petitioner and half on behalf of the hospital administration. Once a patient is admitted to hospital without discharge how he came outside the emergency ward. It means that there was none to attend the patient. Second part is non-compliance of the advice which is on part of the patient. The fact about growing of abnormality after use of pop slab is replied by Health Department as well as by the PMCH that earlier to the incident patient was examined by MaxLife Diagnostic & Research Centre where on the study of color doppler of left limb reported:-

“Left axillary artery and proximal left brachial artery shows normal flow with reduced flow in distal brachial artery at cubital fossa showing diaphasic pulsus parvus tardus flow. Proximal radial and ulnar arteries near its origin show significantly reduced flow with reduced PSV and parvus tardus flow pattern. Significantly reduced flow in mid-portion of radial artery with no detectable flow in distal and ulnar arteries near the wrist. No flow could be seen in palm.

Marked edema is seen in forearm and wrist region.

Superficial and deep venous system of distal forearm also show markedly reduced flow.

Impression:-

Reduced flow in distal brachial artery at cubital fossa showing diaphasic pulses parvus tardus flow. Proximal radial and ulnar arteries near its origin show significantly reduced flow with reduced PSV and parvus tardus flow pattern. No detectable flow in distal radial or ulnar arteries in lower forearm or wrist. “

Emphasized on behalf of PMCH was the date of this report i.e. shown in original report 28.01.2013 but later on, on initiation of this Commission same is clarified that date of report 28.01.2013 was a clerical mistake its real date was 16.06.2014. Clearly within the course of treatment which was the liability of the PMCH, no doubt can be reduced by the fault which is committed by the patient only as discussed above. Age of the boy/victim is 12 years nature of the loss of organ is hand/arm.

He, (petitioner's son) is entitled for Rs.two lakh as compensation to be paid within six weeks. Half of the amount shall be deposited in term/fixed deposit in his name withdrawable on his attaining majority.

Copy of order be sent to (i) petitioner (ii) Principal Secretary, Home (iii) Superintendent, PMCH and (iv) Principal Secretary, Health.

Compliance report be submitted by 28.05.2017.

**(Justice Mandhata Singh)**  
***Acting Chairperson***