

Date of filing : 30-11-2017
Date of disposal :26-10-2022

BEFORE THE DISTRICT CONSUMER DISPUTES REDRESSAL COMMISSION

:: NELLORE ::

Wednesday, this the 26th day of OCTOBER, 2022.

Quorum: Sri Ginka Reddy Sekhar, B.L., M.A., M.C.J., B.Ed., President,
Sri K.Venkateswarlu, B.Com., B.L.,M.L., Member
SmtG.BalaSudha, M.Com., LL.M. Women Member

Consumer Complaint No.51/2018

RasheelaBhanuShaik,
W/o Fatheem P.
Aged about 25 years, Muslim,
Residing at A.S.Pet,
Nellore District.

... Complainant

Vs.

1.Christian Medical College and Hospital,
Rep. by its Director,
Ida Scudder Road,
Vellore – 632 004

2.Dr.Ruby Jose, MD., DGO.,
Professor and Head, OG IV Unit,
Christian Medical College and Hospital,
Vellore, Tamilnadu State,

(Opposite party No.2 is added as per orders in
I.A.No.168/2019 dated 16-10-2019)

... Opposite parties 1 and 2

This complaint coming on 18-10-2022 before us for final hearing in the presence of Sri P. Ayyapa Reddy, Advocate for the complainant and Sri K.Ramesh Reddy, Advocate for the opposite party No.1 and the opposite party No.2 remained absent and having stood over for consideration till this day, this Commission passed the following:

ORDER

(By Ginka Reddy Sekhar, President)

1. The complainant filed this complaint against the opposite parties 1 and 2 under section - 12 of Consumer Protection Act, 1986 prays, to direct the opposite parties 1 and 2 to pay an amount of Rs.19,90,000/- together with subsequent interest @ 18% per annum on Rs.19,90,000/- from the date of this

complaint till the date of realization to the complainant, to pay costs of this complaint to the complainant and grant such other relief and submits to allow the complaint with costs.

2. The brief averments of the complaint are as follows that :-

The complainant was undergone caesarean operation on 27-11-2015 with opposite party-1 hospital. After that she developed stomach-ache etc., and she informed the same to the opposite parties on 02-12-2015, but no improvement. She was also developed other problems. She also approached several hospitals for her stomach-ache but not cured. Finally, the doctor of KIMS hospital diagnosed as Gossypibomaie acute intestinal obstruction (Small bowel obstruction) and it develops infections. The complainant further submitted that the said foreign body is surgical mop. The complainant submitted that the opposite party-1 hospital doctors negligently kept the surgical mop in her body, which resulted severe pain and health complications etc., to the complainant. Hence, the complainant got issued legal notice to the opposite party No.1 on 18-11-2017 demanding to pay an amount of Rs.20,00,000/- for the expenses and compensation for their negligence in doing the operation to the complainant and the said notice was received by the opposite parties on 22.11.2017 and issued reply only and failed to comply with the demand made by the complainant and hence the complainant submits to allow the complaint with costs.

3. The opposite party No.1 filed written version with the following averments that:-

The opposite party No.1 denies all the allegations mentioned in the complaint and it's affidavit except those that are specifically admitted by them to be true.

The opposite party No.1 submitted that this Forum has no jurisdiction to entertain this matter as per the complaint, the alleged treatment was occurred at Vellore Tamilnadu State and that this complaint

is bad for non-joinder of necessary parties as per the complaint, number of Hospitals were involved in the alleged treatment of the complainant and that filing of this complaint is barred by limitation.

The opposite party No.1 further submitted that the total alleged claim of the complainant made in the petition are all false and those are invented for the purpose of the complaint and the same is to harass the opposite party-1 and to get wrongful gains and that the complainant's other allegations are denied. The opposite party No.1 further submitted that there is no cause of action as alleged in the complaint.

The opposite party No.1 submitted that as per their records, the complainant had approached them on 29-05-2015 with 13 weeks of pregnancy. She had total of seven antenatal visits with their hospital, which were uneventful. She was admitted for labour induction at 39+ weeks in view of suspected large baby. She was admitted to labour room in spontaneous labour on 26-11-2015 at 8.00 pm. On 27-11-2015, at 4-30 a.m. cervix was found to be 4 cms dilated. Four hours later, she was found to be 5 cms dilated. The baby had passed meconium in utero, hence labour was augmented with oxytocin drips. After her request epidural analgesia was given. After another four hours, there was no progress in labour and cervix was showed 5 cm dilatation. She was seen by the consultant in charge of labour room and decision for doing caesarean section (LSCS) was made. Indication for doing Lower segment caesarean section (LSCS) was arrest of dilatation.

The opposite party No.1 further submitted that the LSCS was carried out by the senior call and the consultant in charge of labour room of the said hospital. It was a straight forward LSCS as per operation notes and mop counts were correct. A healthy baby girl weighing 3.75 kgs. was born at 4.25 pm on 27.11.2015. As per hospital records, the mop count at the time of closing the abdomen was correct. That on 28-11-2015, catheter was removed and iv fluids were stopped.

The opposite party No.1 further submitted that the complainant passed urine after removal of catheter. In the evening, she developed fever of around 100F and mild abdominal distension, but there was no evidence of peritonitis. She was kept nil per oral and managed on iv drips. Her blood tests showed evidence of infection and urine culture was suggestive of urinary tract infection for which she was started on antibiotics and fever settled with that. She was seen daily in morning as well as evening rounds in the ward by the consultant in charge of hospital.

The opposite party No.1 further submitted that the complainant's bowel distension settled on iv fluids. On post OP day 4, she moved her bowels and there was no abdominal distension. At discharge, she was found to be afebrile for five days with no evidence of infection. She was discharged on 03-12-2015 morning. The complainant did not come back for her suture removal nor her six week postnatal check up.

The opposite party No.1 denies that the allegations stated in the complaint that at the time of discharge, they told the complainant that everything would be alright within few days and it is totally wrong and at the time of discharge she has no fever and she has no evidence of any infection. The opposite party's doctors have advised her to come back for suture removal but she did not turn up and also she failed to come for her postnatal check up after six weeks from the date of discharge. This opposite party denies that the complainant suffered due to the negligence of their doctors who put the 18x17 cm cotton mop while the LSCS is done. This is totally false allegation. As per their hospital records, the mop count at the time of closing the abdomen was correct. Therefore, there is no chance to retain the mop. It is very wonder and surprise to the opposite party-1 that the complainant has visited approximately 9 hospitals but not even a single visit to the hospital of this opposite party who gave the treatment. The opposite party sent their detailed reply dated 10-01-2018 to the legal notice dated 18-11-2017 issued on behalf of the complainant.

The opposite party No.1 further submitted that as detailed above, it is proved beyond any reasonable doubt that they have exercised due care and given correct, proper, necessary and possible treatment to the complainant. There was absolutely no room for any negligence nor any deficiency of service. Hence, there is neither any degree of negligence on medical professional while performing the operation/procedure nor any deficiency in the quality of professional service of opposite party. Therefore, all the allegations mentioned in the complaint are stoutly denied and rejected. Thus, the opposite party further denied that the complainant is undergoing great mental agony and stress because of the so called negligence and deficient service. In these circumstances, the opposite party is not liable to pay any amounts to the complainant as being claimed and hence the opposite party No.1 submitted for dismissal of the complaint against the opposite party No.1 with costs.

4. Opposite party No.2 remained absent. On behalf of opposite party No.2 no written version was filed and documents were filed.
5. On behalf of the complainant, the chief affidavit and additional chief Affidavit of PW1 filed and Exs.A1 to Ex.A21 documents were marked.
6. On behalf of the opposite party-1, the chief affidavit and additional chief affidavit of RW1 filed and Exs.B1 to B24 documents were marked.
7. Written arguments and additional written arguments on behalf of the Complainant filed.
8. Written arguments on behalf of the opposite parties not filed. But synopsis of arguments on behalf of opposite parties is filed.
9. Arguments on behalf of both parties heard.
10. Perused the written arguments filed on behalf of the complainant.
11. Perused the synopsis of written arguments filed on behalf of the opposite Parties.

12. Now, the points for consideration are:

- 1) Whether the complaint filed by the complainant against the opposite parties 1 and 2 is having territorial jurisdiction in this Commission?
- 2) Whether the complaint filed by the complainant against the opposite parties 1 and 2 is having any pecuniary jurisdiction in this Commission ?
- 3) Whether the complaint filed by the complainant is barred by limitation or not
- 4) Whether the complaint filed by the complainant against the opposite parties 1 and 2 under section 12 of Consumer Protection Act, 1986 alleging deficiency of service against the opposite Parties is maintainable?
- 5) To what relief, the complainant is entitled?

13. POINT NO.1: The learned counsel for the complainant by relying upon the evidence affidavit and arguments that the complainant undergone caesarean operation on 27-11-2015 with opposite party-1 hospital. After that she developed stomach ache etc., and she informed the same to the opposite parties on 02-12-2015, but no improvement and further other problems were developed and on visiting several hospitals, finally, the doctor of KIMS hospital, Nellore diagnosed the problem as acute intestinal obstruction (Small bowel obstruction) and it develops infections. The complainant further submitted that the said foreign body is surgical mop. The complainant submitted that the opposite parties hospital doctors negligently kept the surgical mop in her body, while performing surgery which resulted severe pain and health complications etc., to the complainant.

The learned counsel for the complainant argued that the problem was found out in KIMS hospital, Nellore and the cause of action arose at Nellore and this Forum is having territorial jurisdiction. The learned counsel for the complainant further relied on a decision of the Hon`ble High Court of A.P. reported in 2009(3) ALP page 634 (DB of A.P. High Court, the complainant issued notices to the opposite parties from Nellore and the opposite parties also issued reply addressed to Nellore and so when the reply issued to Nellore Ex.A6 comes within the jurisdiction of this Forum.

The learned counsel for the complainant further submitted that the negligence of the opposite parties find out of his notice in KIMS Hospital, Nellore in which the reasons for problem was diagnosed and to cure the problem, surgery was done at Nellore to rectify the medical negligence of the opposite parties and so part of cause of action has arose within the jurisdiction of this Forum.

In the Consumer Protection Act, 1986, Under Sec. 11 (c) the cause of action wholly or in part arises.

As per documents the problem of the complainant was diagnosed (EXA2) surgery was conducted and rectified the problem at Nellore (The documents filed by the advocate commissioner proves the same also). So, in our opinion the part of cause of action arose at Nellore and this Forum is having territorial jurisdiction. So, this point is answered in favour of the complainant and against the opposite parties.

14. POINTNO.2 : The learned counsel for the complainant submitted that he claimed Rs.19,90,000/- in total. Out of which medical expenditure with transport etc. is Rs.6,00,000/- and compensation claimed for mental and physical sufferance is Rs.13,90,000/-. Whereas the learned counsel for the opposite parties vehemently argued that an amount of Rs.67,850/- spent as per Ex. B-23 has not included and if the said amount is included total amount of consideration is Rs.20,57,950/- and so he submitted that this Forum lacks pecuniary jurisdiction.

On perusal of the said Document Ex.B-23 and the entire record and averments, the complainant claimed Rs.19,90,000/- in all. Under these circumstances, we have to read Sec. 11 (1) of the Consumer Protection Act, 1986 which is extracted below ;

The District Forum shall have the jurisdiction where the value of goods and services and the compensation claimed if any does not exceed Rs.20,00,000/-.

On perusal of the complaint, the complainant claimed Rs.19,90,000/- only in total. The counsel for the opposite parties argued that an amount of Rs.67,950/- also to be included in the claim of the complainant. As seen from the complaint, the complainant has not claimed the said amount and the said amount might be included in the medical expenditure or the complainant has not claimed the said amount. In our opinion, it is the choice of the complainant either to include all the bills or to give up some bills. Un claimed amounts does not count for jurisdiction. The complainant claimed in total Rs.19,90,000/- only. So, in our opinion the complaint filed by the complainant is within the pecuniary jurisdiction under Sec.11 (1) of the Consumer Protection Act, 1986.

So, Point No.2 is answered in favour of the complainant and against the opposite parties.

15. POINT NO.3 :

The learned counsel for the opposite party No.1 submitted that the complaint is barred by limitation and is liable to be dismissed on the ground of limitation.

As seen from the record, the complainant filed the complaint in the Forum on 30.11.2017.

Under sec.24 A of Consumer Protection Act, 1986 regarding Limitation period is explained which is extracted as follows;

The District Forum, the State Commission, or the National Commission shall not admit a complaint unless it is filed within two years from the date on which the cause of action has arisen.

The cause of action arose on the day when the problem is found out and the complainant admitted for surgery i.e. on 17.6.2017 and removed the foreign body i.e. surgical mop. So, the cause of action arose on the day when the problem or negligence arose i.e. on 17.6.2017 and the complaint is filed on

30.11.2017, which is within the limitation period of 2 years. The complaint is not barred by limitation.

So, this point is answered accordingly in favour of the complainant and against the opposite parties.

16.POINT NO.4

The learned counsel for the complainant submitted that the complainant is regular visitor to opposite party-1 hospital due to her pregnancy from 4th month of her pregnancy and the opposite parties doctors did primary lower segment caesarean section operation on 27.11.2015 and after the said operation the condition became more deteriorated and she is suffering with fever, vomiting and stomach ache and when informed, after investigations the opposite parties doctors informed that the same is due to infections and continued treatment up to 2-12-2015 and discharged the complainant, stating that her condition will be set right shortly. But as no improvement and she is suffering with fever, cold and stomach ache every day and she is unable to visit opposite parties hospital every time she approached Dr Ramalakshmi nursing home and has no improvement in her health condition and another complication of bleeding developed she took treatment for 2 months from Dr sandhyababu in Vellore by spending lot of money and even though stomach ache and bleeding not controlled she approached different hospitals for treatment but stomach ache and fever is recurring her condition is deteriorating day by day and at last she consulted Lotus hospital Nellore and on their advice consulted KIMS hospital Nellore and admitted as in patient on 17-06-2017 and Dr Vamsi Krishna of KIMS hospital, Nellore after examining the reports advised to undergo operation and the complainant undergone surgery and the KIMS hospital Doctors did the endileostomy and diognised as acute intestinal obstruction (small bowel) due to foreign body of 18 x 17 cm is the source for all the infection and it damaged the intestines and it became the source for all the problems and the foreign body is nothing but surgical mop used while operation is done and the same must have been removed while

suturing is done, but the opposite parties Doctors negligently sutured without removing the said surgical mop.

As per evidence of P.W.2Dr.Vamsi Krishna, it is clearly proved that the complainant got admitted in their hospital on 17.6.2017 and after investigations, she was diagnosed to be given for acute small bowel obstruction due to foreign body. She had history of caesarean (LSCS) during the year 2015 at CMC Vellore. In the evidence of doctor P.W.2, it clearly revealed that 20 x 20 Cms tailed mob was found and it was removed by surgery. In Biopsy report filed through the advocate commissioner, clearly reveals that in Microscopic examination received a mass of cotton sponge measuring 18 x 17 cms and received small bowel measuring 22 cm in length, 6 cm in diameter. Cut section one end shows narrowing of lumen with thickened wall and ulcerated mucosa. Rest of mucosa appears normal. So, it clearly proves that surgical mop was kept in the body of the complainant while performing the caesarean operation by the opposite parties.

Further, Ex.B8 Sponge Account Record is a crucial document, filed by the opposite part-1. On keen perusal of the said Ex.B8 printed sheet there is two parts. First part contains printed matter in several rows containing several details and second part is having some writings and signatures etc. Out of which, in 7th row (1st part in column) it is clearly printed that sponge 9" x 9" six in bundle. But the number six was corrected and striked out and written as "5" in hand writing . So, we understand that the six number was corrected as 5, to cover up the laches of the opposite parties. The said remaining one mop has kept in the body of the complainant and sutured.

Every hospital has to maintain standard recommendations can be decreased by keeping a thorough count at least thrice (pre-operative, intra-operative and post-operative) especially during emergency operation, complete exploration of abdominal cavity by the surgeon before closure if there is any doubt in the counts. As per W.H.O. recommendations count should always be done separately in a consistent sequence by two to similar persons with their

name being noted in the count sheet or nursing record. Methodical exploration of surgical wound by the operating surgeon decreases the livelihood of living sponges. Immediate intra-operative x-rays should be done if there is suspicion in count. Never technologies for detection include two dimensional bar code systems was the first technological approach. It incorporates a specific code to each sponge which prevents double count. But as seen from the record, the opposite parties simply corrected the figures in the count sheet. As per discharge summary the complainant is having 100F, fever. When the patient is in fever condition, the opposite parties have to follow the said recommendations or intra-operative X rays have to be taken. But they did not done it. It is an admitted fact.

On perusal of the entire documents and averments of both counsel, the complainant suffered a lot on roaming several hospitals to cure his problem which arose after the caesarean caused by the opposite parties hospital and after that the KIMS hospital Doctors did the endileostomy and diognised as acute intestinal obstruction (small bowel) due to foreign body of 18 x 17 cm. After the surgery there was no other surgical intervention also. Hence we are of the considered view that the foreign body was left behind the body of the complainant, by the opposite parties hospital at the first instance only during caesarean operation and the doctrine of Res Ipsa Loquitur is also applicable in this case. After the surgery at opposite parties hospital, the complainant has not undergone any surgery, except taking treatment by way of medicines etc. from different hospitals. No foreign body directly enters into the human body. So, it clearly proves that during the surgery, the opposite parties kept the said surgical mop in the body of the complainant. So, the said circumstances, the negligence on the part of the opposite parties is proved.

To support this the complainant cited decision reported in 2017 (1) ALD (Cons.)12 (NC).

In the said decision their lord ship held that patient got cured after removal of foreign body but she was subjected for major surgery, her intestine

was resected. The above said decision is squarely applicable to the facts of the present case.

The opposite parties cited several decisions, but the same are not applicable to the facts of the present case and so we are not explained the same.

In our opinion no amount or money can turn back the time and reverse the harm already done but receiving compensation for unnecessary surgery or surgical errors can at least help the patient to overcome some of the challenges that lie ahead.

Further question arises for determination to ascertain the quantum of compensation for the loss. The complainant had suffered a lot by roaming several hospitals due to negligence of opposite parties without any fault of her. For determination of quantum of compensation, it is necessary to consider the medical expenditure incurred, pain and sufferings both by the complainant and her attendant family members.

We take reliance from the landmark decision of Hon'ble Supreme Court KunnalSahas case (2014) I SCC 384 which discussed the principles involved in determination of compensation in cases of medical cases. The Hon'ble Supreme Court held that there is no restrictions that Courts can award compensation only up to what is demanded by the complainant. It is the duty of Tribunals, Commissions and Courts to consider relevant facts and evidence in respect of facts and circumstances of each and every case for awarding just and reasonable compensation. The principle of just and reasonable compensation is based on RESTITUTIO in INTEGRUM i.e., the complainant must receive the sum of money which would in the same position as he would have been, if he has not sustain the wrong. The complainant incurred medical expenditure in different hospital, she bare physical suffering and mental agony as per records and bills. The patient incurred Rs. 6,00,000/- in different hospitals. It is not denied by the opposite parties.

The Complainant unnecessarily had to roaming around a number of hospitals for her complaint of continuous abdominal pain and health complications, after the surgery.

The sufferings and agony of the patient, huge medical expenditure for medical services already undergone by the complainant, taken into account and the complainant has incurred expensive medical treatment and therefore we feel that just and reasonable compensation is to be awarded to the complainant.

The complainant prayed for Rs.19,90,000/- in all counts. We feel it is on high side. So, in our opinion an amount of Rs.15,00,000/-(Rupees fifteen lakhs only) towards compensation in all counts is sufficient to meet the ends of justice.

17. POINT NO.5: In view of our answering on point No.4 we are of the opinion that the complaint filed by the complainant has to be allowed partly.

In the result, the complaint is allowed in part and the opposite parties 1 and 2 are directed to pay a sum of Rs.15,00,000/- (Rupees Fifteen lakhs only) in all counts towards compensation and damages to the complainant

The opposite parties 1 and 2 are also directed to pay a sum of Rs.5,000/- (Rupees five thousand only) towards the costs to the complainant.

The opposite parties 1 and 2 are directed to comply the order within 45 days from the date of receipt of the order, in default the opposite parties 1 and 2 are directed to pay interest at 9% p.a. on the ordered amount of Rs.15,00,000/- from the date of receipt of the order.

Typed to my dictation by the Stenographer and corrected and pronounced by us in the Open Commission this the 26th day of October, 2022.

Sd/-	Sd/-	Sd/-
MEMBER	W.MEMBER	PRESIDENT

APPENDIX OF EVIDENCE

WITNESSES EXAMINED FOR COMPLAINANT:

PW1	16-07-2018 and 13-01-2020	:	RasheelaBhanuShaik wife of Faheem, aged 25 years, Muslim, House wife at present and residing at A.S.Pet, Nellore District.
PW2	05-02-2019 And 30-04-2019	:	Dr.SriP.R.Vamsi Krishna, S/o.P.Rajendra Prasad, aged 40 years, Hindu, Surgical Gastroenterologist, KIMS hospital, Nellore. (Advocate Commissioner report and Chief/cross examination.

WITNESSES EXAMINED FOR OPPOSITE PARTIES:

RW1	30-05-2019 AND 17-02-2020	:	Dr.K.Prasad Mathews, S/o. P.M.Mathews, aged about 55 years, practicing at Christian Medical College, Hospital Campus, Ida Scudder Road, Vellore – 632004.
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EXHIBITS MARKED FOR COMPLAINANT:

Ex.A1	02-12-2015	:	Photostat copy of Discharge summary issued by the 1 st opposite party.
Ex.A2	24-06-2017	:	Office copy of Department of Surgical Gastro Discharge summary issued by KIMS hospital.
Ex.A3	25-09-2017	:	Office copy of Department of Surgical Gastro Discharge summary issued by KIMS hospital.
Ex.A4	---	:	Compact Disk containing the operation and removal of mop.
Ex.A5	18-11-2017	:	Photostat copy of Legal notice got issued by the counsel for the complainant to the opposite party. Along with one regd.post receipt.
Ex.A6	10-01-2018	:	Office copy of Reply given by the opposite party to the counsel for the complainant.

Ex.A7	21-01-2016 27-12-2015 14-02-2017	:	Photostat copy of Birth certificate and original admission card along with service request receipt.
Ex.A8	25-12-2015 16-03-2016	:	Ultra Sound of pelvis Prescription of Sandhya hospital.
Ex.A9	27-02-2017	:	Medical prescriptions (bunch) by Chittoor hospital.
Ex.A10	27-02-2017	:	Complete Urine Examination by Babu Nursing Home and Medical bill containing.
Ex.A11	10-05-2016	:	Photostat copy of Medical prescriptions of Abhiram Hospital.
Ex.A12	13-05-2016	:	Photostat copy of Medical prescriptions by Abhiram Institute of Medical Sciences.
Ex.A13	upto 16-06-2017	:	Bunch of medical bills issued by Premier hospital.
Ex.A14	Upto 26-09-2017	:	Photostat copy of Bunch of medical bills issued KIMS Hospital, Nellore.
Ex.A15	Upto 24-06-2017	:	Bunch of medical bills issued KIMS Hospital, Nellore
Ex.A16	16-06-2017	:	Photostat copy of Discharge summary issued by Premier Hospital.
Ex.A17	16-06-2017	:	Photostat copy of Department of Pathology report by Premier Hospital.
Ex.A18	15-06-2017	:	Office copy of Department of Bio chemistry report by Premier Hospital.
Ex.A19	03-06-2017	:	Haematology report by Medica Diagnostics.

Ex.A20	15-06-2017	:	CT scan Female Abdomen report issued by Premier Hospital.
Ex.A21	15-06-2017	:	Ultra Sound of Abdomen scan report issued by Premier Hospital.

EXHIBITS MARKED FOR OPPOSITE PARTIES

Ex.B1	---	:	Photostat copy of Outpatient record & antenatal record & labour record of Christian Medical College Hospital, S.INDIA.
Ex.B2	28-11-2015	:	Photostat copy of Admission record & general consent of Christian Medical College Vellore.
Ex.B3	02-12-2015	:	Photostat copy of Discharge summary issued by Christian Medical College, Vellore-4.Obstetrics &Gynaecology Unit IV.
Ex.B4	---	:	Photostat copy of Labour record issued by Christian Medical College, Vellore.
Ex.B5	27-11-2015	:	Photostat copy of Caesarean Consent Form issued by Obstetrics &Gynaecology Unit IV.
Ex.B6	27-11-2015	:	Photostat copy of Perioperative record – nurses issued by Christian Medical College, Vellore .
Ex.B7	27-11-2015	:	Photostat copy of Pre –Anastheti Review &Anaesthesia record issued by Christian Medical College, Vellore.
Ex.B8	27-11-2015	:	Photostat copy of Operation record including sponge account record issued by Christian Medical College, Vellore.
Ex.B9	27-11-2015	:	Photostat copy of Postoperative check list record issued by Christian Medical College, Vellore .
Ex.B10	---	:	Photostat copy of Progress record issued by Christian Medical College, Vellore.
Ex.B11	---	:	Photostat copy of Treatment order and instructions

			issued by Christian Medical College, Vellore .
Ex.B12	---	:	Photostat copy of Doctors Medication orders and nurses administration record issued by Christian Medical College, Vellore.
Ex.B13	04-12-2015	:	Photostat copy of Services provided for the patient – check list record issued by Christian Medical College, Vellore.
Ex.B14	28-11-2015	:	Photostat copy of Direction to billing section and Financial Guarantee issued by Christian Medical College, Vellore .
Ex.B15	---	:	Photostat copy of Intake and output record issued by Christian Medical College, Vellore .
Ex.B16	---	:	Photostat copy of Comprehensive Plan Assessment and Monitoring sheet issued by Christian Medical College, Vellore .
Ex.B17	26-11-2015	:	Photostat copy of Nursing Assessment sheet issued by Christian Medical College, Vellore .
Ex.B18	---	:	Photostat copy of Nursing Care plan record issued by Christian Medical College, Vellore .
Ex.B19	---	:	Photostat copy of Pressure Sore Assessment, care and monitoring form issued by Christian Medical College, Vellore .
Ex.B20	27-11-2015	:	Photostat copy of Patient Health Education Form record issued by Christian Medical College, Vellore .
Ex.B21	---	:	Photostat copy of Nurses Daily Records issued by Christian Medical College, Vellore .
Ex.B22	---	:	Graphic (T.P.R) Chart
Ex.B23	---	:	Inpatient Discharge Bill

Ex.B24	---	:	Sponge account record
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Id/-

PRESIDENT

Copies to:

- 1) Sri P.Ayyapa Reddy, Advocate, Nellore.
- 2) Sri K.Ramesh Reddy, Advocate, Nellore
- 3) Dr.Ruby Jose, MD., DGO., Professor and Head, OG IV Unit,
Christian Medical College and Hospital, Vellore, Tamilnadu State,

Date when order copies were issued:

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