

BEFORE THE DISCIPLINARY COMMITTEE OF PAKISTAN MEDICAL COMMISSION

In the matter of

Complaint No. PF. 8-1829/2019-Legal-DC

Mr. Muhammad Zeeshan Vs. Dr. Raheel Hussain (4854-S)

Professor Dr. Naqib Ullah Achakzai

Chairman

Mr. Jawad Amin Khan

Member

Barrister Ch. Sultan Mansoor

Secretary

Expert of Cardiac Surgery

Present:

Mr. Muhammad Zeeshan

Complainant

Dr. Raheel Hussain (4854-S)

Respondent

Hearing dated

26.10.2022

I. FACTUAL BACKGROUND:

- Mr. Muhammad Zeeshan (the "Complainant") filed a Complaint on 21.03.2019 against Dr. Raheel Hussain (the "Respondent") working at Liaquat National Hospital, Karachi (the "Hospital"). Brief facts of the complaint are that:
 - a) The patient was taken to Liaqat National Hospital Karachi where he was initially informed that he has no severe problem. Later on, after Angiography, Dr. Kaleem Ullah advised Angioplasty. Respondent Dr. Raheel Husain was also consulted who advised immediate bypass surgery, which was performed on 21.12.2018 by the Respondent.



- b) The next morning, the patient was well oriented but in evening complained about shortness of breath. The attendants instantly informed about the condition of the patient to Respondent, who after checking medical record available in the ICU, informed the Complainant that he oversaw the clots in the veins of the patient, and second surgery is required which he will perform on 24.12.2018.
- c) The Complainant further alleged that second surgery was performed by Respondent on 24.12.2018 negligently and even without consent of attendant. The Patient remained unconscious post-operation, was in coma and died on 26.12.2018.

II. NOTICE TO RESPONDENT, DR. RAHEEL HUSSAIN

 In view of the allegations leveled in the Complaint, Notice dated 11.07.2019 was issued to the Respondent doctor, directing him to submit comments, record of the patient along with the copy of his registration certificate.

III. REPLY OF RESPONDENT, DR. RAHEEL HUSSAIN

- 3. Respondent, Dr. Raheel Hussain submitted his reply on 27.08.2019, wherein he stated that:
 - a) Patient, Mohammed Asif, had coronary bypass surgery, from which he partly recovered and also spoke to the family. Subsequently, patient developed various problems which were timely addressed. Various strategies were used from CPAP to facilitate breathing, to re-exploration for dot removal and graft inspection, to using higher doses of inotropes, intra-aortic balloon counter pulsation and additional venous graft insertion to reinforce cardiac performance.
 - b) Patient's CABO operation performed on 21.12.2018 whereby four grafts were placed. The surgery was uneventful, patient was extubated same evening and was running low O2 saturations on and off and needed CPAP support intermittently to improve oxygenation.
 - c) CXR on the 23.12.2018, showed slight widening of mediastinum. There was some drop in Hemoglobin and it was contemplated that probably clots had developed in the upper mediastinum. These were probably causing problems with oxygenation and hemodynamics, moreover, it was a risk factor for later infection. Reopening for clot evacuation and surgical toilet was planned and explained to the family. On re-opening, scattered clots were removed from around Right atrium and grafts. Grafts were examined and found patent. Right ventricle was found distended and sluggishly contracting.



- d) In view of this RV distention, and dysfunction lonotropes were introduced and gradually increased to encourage substantial diuresis and improve myocardial contractility. Intra-aortic balloon was inserted to augment myocardial perfusion and to improve cardiac contractility. This trial continued for over 3-4 hours. Response was slow and it was then decided to use another vein graft on LAD to improve left ventricular perfusion.
- e) Subsequently, the ICU & Surgical team decided to sedate and paralyze the patient to improve hemodynamics and oxygenation. By the evening on 25.12.2022 his pressures began to plummet and he needed more and more ionotropic support. Later in the night patient developed frequent cardiac arrhythmias and became further unstable. Patient gradually drifted to low cardiac output syndrome and finally died in the evening of 26.12.2018.
- f) All these measures were timely and there was no delay. Unfortunately, patient did not respond to these measures against our expectation. The family was on board with all the clinical situations during the course of treatment. I personally had detailed counseling sessions with the son.
- g) After the very sad demise of the patient, I explained in detail the events to the entire available family, assuring them as much as I could that there was no fault, negligence or delay in the decision making an execution of decisions and that a human being cannot dictate the destiny of any person. I equally share the family's grief. I am prepared to meet and re-explain to them the events if they so wish.
- h) Family were all the time keep very well informed about the happenings in OR and in the ICU.

IV. REJOINDER OF THE COMPLAINANT

Reply received from the Respondent doctor was forwarded to Complainant through a letter dated
17.06.2020 for his rejoinder. The Complainant, however, has not submitted any rejoinder till date.

V. HEARING

- The matter was fixed for hearing before the Disciplinary Committee on 26.10.2022. Notices dated 24.10.2022 were issued to the Complainant and Respondent Dr. Raheel Hussain directing them to appear before the Disciplinary Committee on 26.10.2022.
- On the date of hearing, the Respondent and Complainant along with his paternal uncle were present in person. The Complainant, with the help of his paternal uncle, reiterated the averments



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against the Respondent. They stated that the Respondent doctor failed to properly treat the patient and did not counsel the family regarding the patient's condition.

7. The Respondent doctor was provided an opportunity to present his case. However, the Respondent doctor stated that since the case was from 2018, he did not accurately remember the complete facts. The Respondent doctor was further subjected to detailed questioning by the Expert Consultant Cardiac Surgeon Dr. Riffat Tanveer. The Expert asked the Respondent that there have been two x rays with two days' gap in that case why the x ray was not performed after or in between. The expert further asked that the Hb seems to have dropped so what was its reason and how was it treated.

VI. EXPERT OPINION

8. A Consultant Cardiac Surgeon was appointed as expert to assist the Disciplinary Committee in this matter. The Expert opined as under:

"It was found that the data (clinical as well as of investigations, ABG's-HS, X-ray, Isotopes) was not found of 21/12/2018 and till 23/12/2018 and the respondent was also not able to give answers that would satisfied the members of Committee."

VII. FINDINGS AND CONCLUSION

- The Disciplinary Committee has gone through the record, submissions of the parties and the expert opinion in the instant Complaint.
- 10. The Disciplinary Committee notes that the Respondent doctor did not monitor the patient within the appropriate time and there was considerable unexplained delay between the bypass surgeries that took place on 21.12.2018 and 24.12.2018, respectively. Furthermore, the Respondent doctor had failed to furnish relevant record to support his claim before the Disciplinary Committee despite a lapse of almost (03) three years. Being the treating doctor and Respondent in this case it was his responsibility to maintain and produce the medical record of the patient. Furthermore,

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as highlighted by the expert the Respondent was not able to give satisfactory reply to the queries, like whether necessary investigations were conducted on 22.12.2018 and 23.12.2018.

- 11. In view of the foregoing, we find that the Respondent doctor had failed to provide due care to the patient and mishandled the treatment provided to the patient. The Disciplinary Committee thus imposes a fine of Rupees One Million (Rs. 1000000/-) to be deposited into designated bank account of PMC with proof provided to Secretary of DC and suspension of his License to Practice for a period of five (05) years.
- 12. The instant Complaint stands disposed.

Mr Jawad Amin Khan

Member

Barrister Ch. Sultan Mansoor

Secretary

Professor Dr. Naqib Ullah Achakzai

Chairman

22nd November, 2022