



**BEFORE THE DISCIPLINARY COMMITTEE OF PAKISTAN MEDICAL COMMISSION**

In the matter of

PF.8-1903/2021-DC/PMC

Patrus Masih Vs. Dr. Shamim Akhtar

Mr. Muhamad Ali Raza	Chairman
Dr. Anis-ur- Rehman	Member
Dr. Asif Loya	Member
<i>Present:</i>	
Mr. Patrus Masih	Complainant
Dr. Shamim Akhtar (28797-P)	Respondent
Dr. Maryam Masood	PIMS, Nephrology Dept
Brig (R) Prof. Dr. Ambreen Anwar	Expert (Gynecologist)
Hearing dated	03.06.2022

**I. FACTUAL BACKGROUND**

1. The instant Complaint was lodged by Mr. Patrus Masih (hereinafter referred to as the “Complainant”) against Dr. Shamim Akhtar (hereinafter referred to as the “Respondent”) on 19.11.2020 alleging negligence and malpractice. The Complainant submitted that:
  - a. His wife (the patient) was admitted to Qasim Zaman Hospital, Islamabad on 22.09.2020 for delivery. After waiting till evening, the Respondent doctor informed that C-section has to be performed to conduct delivery.

- b. The Complainant alleged that the Respondent doctor performed C-section unprofessionally and during the operation inflicted ureteric injury, which led to renal failure and ultimately death of the patient. The Complainant prayed that strict action be taken against the Respondent.

## II. ISSUANCE OF SHOW CAUSE NOTICE

2. In view of allegations levelled in the Complaint, Notice dated 17.03.2021 was issued to the Respondent doctor Shamim Akhtar along with a copy of the Complaint and she was directed to submit her reply/comments.
4. **WHEREAS**, in terms of Complaint, it has been alleged that wife of Complainant Mrs. Samina Masih was brought to your hospital i.e. Qasim Zaman Hospital situated at Golra Road, Islamabad for delivery on 22.08.2020, where a baby was delivered after C-Section, however while operating upon the patient you were unprofessional and inflicted ureteric injury to her; and
5. **WHEREAS**, in terms of the Complaint, it has been alleged that when her condition deteriorated you referred her to PIMS Hospital Islamabad, where it was discovered that both her kidneys have failed and renal impairment had occurred as a consequence of your negligence that resulted in death of the patient at PIMS Hospital on 08.10.2020; and
6. **WHEREAS**, in terms of the facts mentioned in the Complaint, it is failure on your part to fulfill your professional responsibilities towards your patient. Such conduct is a breach of code of ethics amounts to professional negligence/misconduct.

## III. REPLY OF RESPONDENT DR. SHAMIM AKHTAR

3. In response to the notice dated 17.03.2021, Respondent Doctor Shamim Akhtar submitted her reply on 14.04.2021, wherein she stated that:
- i) Patient Samina w/o Pitras Masih was admitted into hospital on 22.09.2021 for induction of labor and had visited day before for initial check-up. The patient wanted C-section procedure but she counselled her for IOL to which patient agreed. Despite IOL and after six hours, patient's situation did not improve.
- ii) Patient denied further trial/ repeat IOL dose, I advised her to go to tertiary hospital but they refused to go to crowded Govt. hospital. On their strong request plan of category 3 lower segment C-section was made. Complainant was asked to arrange one unit of RCC as patient's Hb was low, but he denied & requested me to arrange blood which I did arrange.

- iii) *Patient's preoperative vitals were normal. Successful C-section was performed under Spinal Anesthesia and alive male baby was taken out and handed over, with no congenital anomaly. Patient bled at the time of surgery for which one unit of cross matched blood during surgery was transfused by anesthetist without any side effect at that time and after surgery. Intra-operative findings were also normal.*
- iv) *Post Operation, Patient had 50 ml urine in bag at 08:00 pm with one liter of IV ringer lactate 100%. Postoperatively, Urinary catheter was inspected for its patency, vitals were normal. Patient's general condition was stable, on oral diet, mobilized and happy. Without any renal or abdominal pain, except at incision site, mild tenderness.*
- v) *Afterwards, Patient and her husband started arguing with me to remove the urinary catheter and resisted my further monitoring and evaluation and insisted to send home. They asked me to remove urinary catheter, which I did. Later on, after discussion with my anesthetist, I re-catheterized her and counseled her that her urine output is not satisfactory. I did her ultrasound & there was no ureteric dilatation proximally or distally, kidneys were also looking unremarkable. Same findings were given in ultrasound at PIMS hospital on 26.09.2020, however her urinary bladder was empty with balloon of Foley's catheter visible in it.*
- vi) *As no surgical cause of reduced urinary output was found, so I advised patient to be taken to a good laboratory for renal function test and get consultation of Urologist at PIMS. On 24.09.2020, I didn't get any response so I called her husband time and again, but in vain. On 25.09.2020, a message/ call was received by my assistant from the Complainant that the patient had been examined and ultrasound performed at SARF hospital F10 / Maroof Hospital F10 Markaz, and she was alright, ultrasound report was normal, urinary catheter was removed and patient's urine output was good.*
- vii) *Patient was well and stable when she left, she might have some pre-existing renal issues, but they lost follow up. Patient's body should have been autopsied to know the cause of death which was not done.*

#### **IV. REJOINDER**

4. The reply submitted by the Respondent doctor was forwarded to the Complainant on 25.05.2021 for rejoinder. However, the Complainant did not submit his rejoinder.

#### **V. HEARING**

5. The Disciplinary Committee of the Commission decided to hear the instant complaint and therefore case was fixed for hearing on 03.06.2022. Notices dated 22.11.2021 were issued to

Respondent Dr. Shamim Akhtar and the Complainant, directing them to appear before the Disciplinary Committee on 03.06.2022.

6. On the date of hearing, both Complainant and Respondent doctor were present in person.
7. The Committee asked the Respondent doctor to explain about indication for induction, as C-section category III was performed on the basis of repeat induction of labor dose. Further Respondent doctor was also asked to explain why she did not advise the patient to go to tertiary care hospital. The Respondent stated that the indication for induction was that she was postdate two days. Further, the Complainant requested the Respondent doctor that as the tertiary care hospital are over-crowded, therefore, patient's C-section procedure may be carried out at her clinic. He also requested that he cannot afford to pay more than PKR-35,000/-. The Respondent doctor stated that she agreed and performed C-section and it was a semi elective C-section. Responding to other question of the Committee the Respondent doctor stated that this patient was non-booked patient.
4. The Committee asked the Respondent about blood transfusion to the patient which she responded that the patient had bleeding with about 1200 ml blood loss. Therefore, one unit blood was transfused, and patient was shifted to ward.
5. The Committee enquired the Respondent that when she first noted less urine output, to which she responded that after C-section she noted that there is low urine output of the patient, Lasix was administered, and the urine volume was increased to 400 ml only. On the next morning 23-09-2020 it was again noted that urine output is as low as 10 ml.
6. The Committee asked the Respondent why catheter was removed. She responded that on discharge of patient, she was told have consultation with urologist for management of urinary issue but the Complainant visited her clinic and asked the Respondent to remove the catheter, as the catheter is the reason for blocking the urine output, and upon insistence of the patient the catheter was removed and patient voided afterwards. Later after discussion with another doctor the patient was again catheterized, and once the patient was stable she was referred to PIMS

hospital for management of low urine output. The Respondent doctor tried to contact the patient the next day but the number provided didn't respond, and Complainant didn't contact the Respondent afterwards.

7. The Committee inquired from the Dr. Maryam Masood who was present on behalf of Nephrology Department PIMS hospital, about the condition of the patient when she was presented in nephrology department. Dr. Maryam responded that the patient was referred by their primary physician on 23-09-2020, whereas the patient came to PIMS on 26-09-2020 evening at 6:25 pm. The patient was received in extremely critical condition. Her TLC was over 48000 and Hb was drastically low. She was having severe abdominal pain and diarrhea. Patient was very irritable and the initial diagnosis was Thrombotic Microangiopathy/ Hemolytic Uremic Syndrome (HUS). Femoral catheter was passed and dialysis was started, but there was no good response to the treatment. The abdomen started becoming tense/ tender. The attendants of the patient were informed about the critical condition of the patient from day one. The patient remained under treatment in Nephrology department and passed away on 8<sup>th</sup> October 2020 at 3:15 am.
8. The Committee after listening to both the doctors inquired from the Complainant about the actual grievances, to which he stated that on the second day of operation he visited the Respondent Dr. Shamim Akhtar who told that he needs to pay further PKR 17,000/- to re-open the patient and check what happened. Complainant further stated that the Respondent doctor was called by PIMS but she never came to PIMS as well.
9. The Committee asked the Complainant from where did they have their ante natal checkups for nine months. He responded that he had checkup from the Respondent doctor, however this statement was negated by the Respondent doctor.
10. The Committee asked the Respondent about the ownership of Qasim Zaman Hospital, Islamabad and if it is registered with IHRA or otherwise, to which she responded that Qasim Zaman Hospital is her own hospital and the registration is under process with IHRA. The hospital consists of labor room, O.T, and 2 to 3 beds.

11. The Committee inquired about her training period for MCPS, as she cleared MCPS exam in 2021 after this complaint was filed before Disciplinary Committee. She responded that she completed one and half year's training between 2016 and 2018 from Rawal institute of health sciences and completed the last 6 months' training from Al-Nafees hospital.
12. The Committee inquired the Respondent doctor about her representation as specialist and writing post graduate qualifications such as, gynecologist, obstetrician, general surgeon and ultrasonologist, MBBS, DGO, MPH, CRSM, MCPS, PGT, without having them. The Respondent doctor accepted her such titles/qualifications written on her prescription cause misrepresentation and that she will rectify this mistake.
13. The Committee asked the Respondent about the fee she charges from patients for ultrasound to which she responded that the area where she carries out practice people are poor and she doesn't charge fee for consultation and that she only charges fee of Rs. 600/- when an ultrasound is also required.

#### VI. EXPERT OPINION BY BRIG (R) PROF. DR. AMBREEN ANWAR

14. Dr. Ambreen Anwar (Gynecologist) was appointed as an Expert to assist the Disciplinary Committee. The salient points of the Expert's opinion are as under:

**Fact:**

4. ....
5. *No cause could be identified till her expiry at 08-10-2020. Renal Ultrasound ad CT scan showed no abnormality and renal function tests were only moderately rearranged. There was no free fluid in peritoneal cavity.*
6. *The cause of death was noted as primary post-partum ARF and associated cardiac arrest.*
7. *Complainant alleged that the doctor during the operation inflicted ureteric injury which led to renal failure and ultimately death of patient.*

**Evidence:**

1. *Indication of cesarean was failure to progress and at the request of patient.*
2. *Patient was un-booked at the facility. Operation went uneventful.*
3. *She stayed for 04 days at the primary facility and remained stable with all bio-chemical parameters and ultrasound being normal.*
4. *Ultrasound and CT Scan abdomen and pelvis at PIMS also does not reveal any evidence of ureteric blockade.*
5. *Cause of death is acute renal failure which is a medical condition.*

**Expert Opinion:**

1. *The Obstetric care provided to the patient by Dr. Shamim Zaman does not show any evidence of negligence.*
2. *Though the doctor performing the surgery was not qualified to do so (only MBBS) at the time of the incident. However, she has now attained MCPS degree in Obs. & Gyne.*

## VII. FINDINGS AND CONCLUSION

15. After perusal of the record and submissions of the Respondent doctor, the Disciplinary Committee has observed that on 21.09.2020 the patient visited Qasim Zaman Hospital Islamabad, for delivery purpose. The investigations performed on 21-09-2020 show, Blood group O<sup>+</sup>, Blood Sugar level 85mg/dl, HB- 8.5, Hep B -ve, Hep C -ve and Urine R/E shows normal findings. USG fetal shows single, longitudinal, cephalic/breech, adequate liquor. Other findings include gravida 3 para 2, SVD postdate, Estimated Date of Delivery was 19.9.2020.
16. On 22.09.2020 the patient was admitted to Qasim Zaman Hospital, Islamabad for delivery. After repeated induction of labor and waiting till evening, the Respondent doctor after informing the family conducted C-section. Male baby, weighing 3 kg was delivered. After C-section on 22.09.2020 the doctor noted that the patient is having low urine output. Lasix was administered and the urine volume was increased to 400 ml only. On the next morning (23.9.2020) it was again noted by the Respondent doctor that urine output is as low as 10 ml.
17. The patient was Referred to PIMS by the Respondent on 23-9-2020. On the referral note it was mentioned that patient not affording for second surgery is referred to PIMS for expert management. The patient reached PIMS on 26-9-2020 evening 2:05 pm. The receiving notes are as under;
  - a) *26 years old female from Islamabad, married since 8 years, G3 P2, with history of C-section on 22.9.2020, presented to emergency with complain of, shortness of breath, decreased urinary output and fever since 5 days. According to attendant's patient had C-section at Golra Shareef and later on developed abdominal distension plus pain and decreased urinary output suddenly. Patient had associated loose motion as 8-10 episodes per day, non-blooding, non-bilious.*
  - b) *Patient was diagnosed and treated as post-partum Acute Kidney Injury.*
18. The findings of Ultrasound Abdomen and Pelvis performed at PIMS on 26.9.2020 are:

- a) *Heterogenous, predominantly hypoechoic walled off pelvic collection.*
- b) *Bulky, heterogenous uterus showing intact CECT and increased vascularity.*
- c) *Multiple, echogenic foci in liver likely suggestive of calcifications.*

19. The findings of CT scan Abdomen and Pelvis performed at PIMS on 02.10.2020 are:

- a) *Intrabdominal collection posterior to rectus muscles.*
- b) *Hepatosplenomegaly.*
- c) *Right sided mild hydropneumothorax, left sided mild pleural effusion, patch of consolidation in right lower lobe.*

20. Findings of other blood investigations performed at PIMS are:

- a) *Blood CP done on 27.9.2020 shows (decreasing trend in) RBC-2.81million/uL, HB- 6.8g/dL, HCT- 19.9%, MCV- 70.7fL, MCH- 24.2pg, Platelets count- 24000/uL, Lymphocyte- 9.7%, Eosinophils- 0.1%, Baso- 0%, and (elevating trend in) RDW-SD- 62.4fL, RDW- 26%, Neutrophils- 85.2%, Lymphocytes- 9.7%, Monocytes- 5%.*
- b) *Serum urea creatinine level on 27<sup>th</sup> & 30<sup>th</sup> Sep 2020 were markedly elevated.*
- c) *Liver function test done on 28 Sep & 1<sup>st</sup> Oct 2020 were markedly elevated.*

21. The patient remained under treatment in nephrology department at PIMS and passed away on 8<sup>th</sup> October 2021. The cause to death mentioned on death certificate is post-partum Acute kidney injury/Cardiopulmonary arrest.

22. The Committee has noted that C-Section of the patient was performed by Respondent on indication of failure to progress labor. The patient was not a booked patient and the Complainant has not provided any medical record pertaining to antenatal checkup of the patient. The surgery remained uneventful and a healthy male baby was delivered on 22-09-2020. The patient had no major complication except low urine output. Patient stayed for 04 days at the Respondent's clinic and remained stable with all bio-chemical parameters and ultrasound being normal.

19. On 23-09-2022, patient was referred to PIMS hospital for management of low urine output. Patient reported to PIMS on 26-03-2022. Renal Ultrasound and CT Scan performed at PIMS showed no abnormality. There was no free fluid in peritoneal cavity and renal function tests were only moderately deranged.



20. The Expert gynecologist who was appointed to assist the Disciplinary Committee also opined that care provided to the patient by the Respondent does not show any evidence of negligence. The relevant part of opinion of expert is reproduced below.

1. *The Obstetric care provided to the patient by Dr. Shamim Zaman does not show any evidence of negligence.*
2. *Though the doctor performing the surgery was not qualified to do so (only MBBS) at the time of the incident. However, she has now attained MCPS degree in Obs. & Gyane.*

21. The Disciplinary Committee has noted with concern that although there was no evidence of clinical negligence in this case but the Respondent doctor at the time of incident was not qualified to perform such specialized procedure. It is a matter of record that she got her MCPS registered with the Pakistan Medical Commission in the year 2021 and at the time of operation of wife of the Complainant she was a simple MBBS and no postgraduate/additional/alternate qualification was registered against her name.

22. The Committee has further noted that the Respondent on prescription pad of Qasim Zaman Hospital represents herself as under:

*Dr. Shamim A Zaman  
MBBS, DGO, MPH, CRSM, MCPS (TC)  
Gynecologist, Obstetrician, General Surgeon and Ultrasonologist,*

23. During the hearing the Respondent doctor was confronted regarding her representation and actual qualifications. The Respondent doctor admitted during the hearing that such titles/qualifications may cause deception to patients and misrepresent her as a specialist and that she will rectify the same. Since, this is a clear admission on part of the Respondent doctor, therefore, there is no need to initiate separate legal proceedings on this aspect. Such unauthorized use of titles and qualifications without having attained them, is a conduct of the Respondent which is a clear violation of section 29 of the PMC Act, 2020.



24. The Committee observes that in September 2021, the Pakistan Medical Commission widely circulated through public notice on its website and newspapers and warned all medical practitioners against using misleading titles with their names which cause misrepresentation to the general public and patients as to their qualifications and skills. It was made abundantly clear in the public notice that such misrepresentation as to specialized medical and dental practice is in violation of the Code of Ethics and tantamount to misconduct. In addition, such act is in gross violation of the PMC Act 2020 and mandates a disciplinary action against medical and dental practitioners involved in such deceptive practices.
19. The practice of medicine and its embodiment in the clinical interactions between a patient and a medical practitioner, is fundamentally a moral activity that arises from the obligation to care for patients. This relationship between a patient and a medical practitioner is based on integrity and principles of trust and honesty, which gives rise to a duty of care and the medical practitioners' ethical responsibility to place patients' welfare above the physician's own self-interest. Medical practitioner should not falsify, misrepresent or exaggerate their qualifications or experience which amounts to fraudulently inducing the patient to agree to be treated for his/her ailment or procedure. Medical practitioners are mandatorily required to be honest about their qualifications and skills in their area of expertise when representing the same to a patient. When a medical practitioner is not truthful about his capability and qualification and rather uses innuendos to lure patients to his practice, this constitutes a clear breach of the duty of care of the doctor to the patient and such actions fall in the definition of a legally recognized offence of misrepresentation. Such behavior of practitioner is unacceptable and strictly prohibited under PMC Act 2020.
20. It is important to mention here that in terms of provisions of the PMC Act 2020, a medical or dental practitioner can represent and practice only a specialty which is duly recognized and consequently registered on their license by the PMC. Medical practitioners who have been granted license to practice basic medicine or dentistry as a general practitioner cannot practice a specialty or use specialization or consultant titles with their names as it amounts to deceiving the general public. Section 29 of the Pakistan Medical Commission Act 2020 explicitly prohibits in this regard as under:

### **Section 29. Licensing**

*“(2) A general practitioner may treat all ordinarily recognized common medical or dental ailments and shall not practice in fields or specialties, as recognized by the Commission for which formal training is required . . . . . No practitioner shall represent himself as a specialist or practice as a specialist without having appropriate qualifications, recognized and duly registered by the Commission. ....”*

Sub-section (8) provides:

*“(8) No medical or dental practitioner shall be permitted to represent in Pakistan as having acquired or seek to practice a specialty unless the same is duly registered on his license by the Authority. ....”*

Furthermore, Sub-section (13) provides:

*No registered licensee shall use or publish in any manner whatsoever any title, description or symbol indicating or intended to lead persons to infer that he possesses any additional or other professional qualification unless the same has been duly recognized and registered on his license by the Commission.*

21. Furthermore, to highlight the intention of the Commission to subvert such deceptive conduct of medical and dental practitioners, the PMC Enforcement Regulations, 2021 categorize the false representation of qualifications as a major offence. The regulation 13, is reproduced as under:

*13. (1) a) Major offence to includes offences of false representation of qualifications, gross negligence ...”*

22. Disciplinary Committee aims to emphasize herein that when a medical practitioner misleads patients or the public by professing himself to be more qualified or experienced, such conduct falls under the definition of deception and misrepresentation. By acting in this manner, the medical practitioner compromises the relationship with the patient, which is built on trust and transparency. The misrepresentation of qualifications by medical practitioners carries civil as well as criminal repercussions. Such behavior is treated severely because when a medical practitioner lies about his credentials to his patients or to the public, he effectively destroys the privileged ‘doctor-patient’ relationship based on trust.

23. In view of above discussion and taking into consideration that the Respondent admitted her mistake and has undertaken to ensure it is not repeated, the Disciplinary Committee decides to impose a penalty of PKR 50,000/- (Fifty thousand rupees only) upon the Respondent doctor Dr. Shamim Akhtar and directs her to refrain from such violation in future. Dr. Shamim Akhtar is

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*Decision of the Disciplinary Committee in the matter of Complaint No. PF.8-1903/2021-DC/PMC*

directed to pay the amount of fine to the Complainant within fourteen (14) days from the issuance of this decision and forward a copy of the paid instrument to the office of the Secretary to the Disciplinary Committee, failing which license of the Respondent doctor shall be deemed to be suspended and shall remain suspended until such time the fine is paid.

24. The subject proceedings stand disposed of accordingly.

Dr. Anis-ur-Rehman  
Member

Dr. Asif Loya  
Member

Muhammad Ali Raza  
Chairman

20<sup>th</sup> July, 2022