



BEFORE THE DISCIPLINARY COMMITTEE OF PAKISTAN MEDICAL COMMISSION

In the matter of
Complaint No. PF.8-1914/2021-DC/PMC
Muhammad Zahid Niaz Vs. Dr. Muhammad Saleem Akhtar, Dr. Irfan Ashraf , Dr. Khurram Shafiq
Khan

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| Mr. Ali Raza | Chairman |
| Dr. Anis-ur- Rehman | Member |
| Dr. Asif Loya | Member |

Present:

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| Muhammad Zahid Niaz | Complainant |
| Dr. Muhammad Saleem Akhtar (1950-N) | Respondent no. 1 |
| Dr. Irfan Ashraf (47097-P), | Respondent no. 2 |
| Faisal Nadeem | Representative of MS, BVH, Bahawalpur |
| Dr. Jamil Tahir | Deputy Administrator, Sheikh Zayed hospital. |
| Prof. Dr. Tanwir Khaliq | Expert (Surgery) |
| Hearing dated | 11.12.2021 |

I. FACTUAL BACKGROUND

Complaint

1. The instant complaint filed by Mr. Zahid Niaz (hereinafter referred to as the “Complainant”) was received at the Pakistan Medical Commission on 19.11.2020. The Complainant alleged that

Dr. Muhammad Saleem Akhtar and Dr. Irfan Ashraf (hereinafter referred to as “Respondent no. 1” and the “Respondent no. 2” respectively) working at Saleem Poly Clinic, Mian Chanu performed laparoscopic surgery of his father on 31.12.2016 without consent which remained unsuccessful. Later on, Dr. Irfan Ashraf shifted the patient to Bahawal Victoria Hospital (BVH), Bahawalpur where laparotomy was performed on 04.01.2017 but condition of the patient did not improve.

2. Subsequently, patient was shifted to Sheikh Zayed Hospital, Lahore where Dr. Khurram Shafiq (hereinafter referred to as the “Respondent no. 3”) instead of treating the patient in the hospital advised to shift him in a private hospital where operation was performed negligently. Resultantly patient died on 04.03.2017.

Findings of Punjab Healthcare Commission

3. The Complainant also attached the proceedings and decision of the Punjab Healthcare Commission (PHC) where had filed similar complaint on 25.04.2017 against the hospital. PHC decided the matter on 19.06.2019 in the following terms:-

- a. *“The Board after hearing the parties and perusing the record holds that Saleem Polyclinic, Mian Channu the respondent HCE is deficient in facilities including requisite infrastructure and qualified HR and is functioning without license from the Punjab Healthcare Commission. Dr. Muhammad Saleem Akhtar (owner of respondent HCE) present in person be fined Rs. 150,000/- and directed to deposit the amount of fine within 15 days.*
- b. *Case of Dr. Muhammad Saleem Akhtar and Dr. Irfan Ashraf be referred to the PMDC for appropriate legal action. The Medical Superintendent of Bahawal Victoria Hospital, Bahawalpur, be directed to caution the staff to be more vigilant in dealing with the patients. Disposed Of.”*

II. SHOW CAUSE NOTICES

4. In view of the allegations leveled in the complaint, show cause notice dated 17.03.2021 was served to Dr. Muhammad Saleem Akhtar (Respondent No.1) in the following terms.

4. **WHEREAS**, in terms of complaint, it has been alleged that complainant on 31.12.2016 took his father for gall stones problems at your clinic i.e. Saleem Polyclinic Mian Channu, where you advised immediate

operation which was out-rightly refused by the attendant but you, however, went ahead to conduct Laparoscopic Operation along with Dr. Irfan Ashraf (your nephew) without seeking consent of the attendants; and

5. **WHEREAS**, in terms of the complaint it has been alleged that you conducted the said operation at your clinic that imparts substandard services and a non-functional theatre with rusted surgical instruments in the absence of trained staff, without conducting basic investigations like ultrasound and further without even admitting the patient formally; and
 6. **WHEREAS**, in terms of complaint it has been alleged that you mal-operated the patient by damaging hepatic veins and common bile duct and as the condition of the patient deteriorated you, in order to conceal failure on your part transferred the patient to Bahawal Victoria Hospital (BVH), Bahawalpur, where another operation was conducted by him; and
 7. **WHEREAS**, in terms of the fact mentioned in the Complaint, such conduct is a breach of code of ethics and service discipline and amounts to Professional Negligence and Misconduct.
 8. **Now therefore**, you are hereby served such notice, explaining as to why the penalty shall not impose on you under the Pakistan Medical Commission (Enforcement) Regulations, 2021. You are directed to submit your response within the period of thirty days.
5. In view if the allegations leveled in the complaint, show cause notice dated 17.03.2021 was served to Dr. Irfan Ashraf (Respondent-2) in the following terms.
4. **WHEREAS**, in terms of complaint it has been alleged that the complainant took his father to Saleem Poly Clinic Hospital on 31.12.2016 for gallstones problem, where you conducted Laparoscopic Operation along with Dr. Muhammad Saleem Akhtar (your uncle) without seeking consent of the attendant and you mal-operated the patient by damaging hepatic veins and common bile duct; and
 5. **WHEREAS**, in terms of complaint it has been alleged that in order to conceal the failure on your part, when the condition of the patient deteriorated you took him to BVH, Bahawalpur, where you performed duties as Senior Registrar and where you along with Dr. Javed Iqbal performed Open Laparotomy but the same resulted in further complications including bleeding from various orifices and led to critical situation of the patient's; and
 6. **WHEREAS**, in terms of facts mentioned in the complaint such conduct is a breach of code of ethics and service discipline and amounts to professional negligence and misconduct.

7. **Now therefore**, you are hereby served such notice, explaining as to why the penalty shall not impose on you under the Pakistan Medical Commission (Enforcement) Regulations, 2021. You are directed to submit your response within the period of thirty days
6. In view of the allegations leveled in the complaint, show cause notice dated 17.03.2021 was served to Dr. Khurram Shafiq Khan (Respondent -3) in the following terms.
4. **WHEREAS**, in terms of complaint it has been alleged that the complainant took his father to Shaikh Zayed Hospital, Lahore and approached you for repairing of damaged hepatic veins and instead of admitting him in liver transplant Unit at the said Hospital, you referred him for private treatment at Lahore Medical Complex, where you work as private consultant and performed Embolization of the patient; and
5. **WHEREAS**, in terms of complaint it has been alleged that you performed the said operation at your private hospital instead of well-equipped tertiary care public sector hospital that failed miserably and the patient's condition deteriorated with the passage of time, resultantly the patient could not survive and passed away on 04.03.2017; and
6. **WHEREAS**, in terms of facts mentioned in the complaint such conduct is a breach of code of ethics and service discipline and amounts to misconduct; and
7. **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 and service discipline and amounts to professional negligence and misconduct.
8. **Now therefore**, you are hereby served such notice, explaining as to why the penalty shall not impose on you under the Pakistan Medical Commission (Enforcement) Regulations, 2021. You are directed to submit your response within the period of thirty days

III. REPLY TO SHOW CAUSE NOTICE

7. Dr. Muhammad Saleem Akhtar (Respondent No.1) submitted his reply on 19.04.2021 wherein he stated that:-
- a. The Answering Respondent is the owner of Saleem Poly Clinic Mian Channu, which is a well-equipped hospital. He has not operated on the father of the Complainant rather he was operated by competent and well trained surgeon Respondent No.2 Dr. Irfan Ashraf on

31.12.2016, after seeking consent of the patient as well as his nephew who was accompanying him.

- b. Complaint of similar nature was filed by the Complainant before the Punjab Healthcare Commission. The Punjab Healthcare Commission presented the case to Expert of General Surgery for opinion. The said expert opined as under:-

“Mr. Niaz Ahmad sustained CBD injury during cholecystectomy. It is a known complication which can happen even in the hands of experts in this field. Complication was duly recognized and appropriate referral was made. He was subsequently operated by another experienced and senior surgeon. Unfortunately, patient developed aneurysm of right hepatic artery. Patient subsequently underwent angiographic obliteration of aneurysm. In my considered opinion, there is no evidence of negligence throughout his management. All invasive procedures have inherent risk and this unfortunate patient died as a consequence.”

- c. Punjab Healthcare Commission was legally bound to exonerate the Answering Respondent and other, on the basis of opinion rendered by an independent, impartial and upright expert but the Punjab Healthcare Commission illegally and unlawfully imposed the penalty of fine of Rs. 150,000/- vide order dated 19.06.2019 and illegally and unlawfully referred the case of the answering Respondent to PMC for appropriate legal action.
- d. Dr. Saleem Akhtar further submitted that decision of the Punjab Healthcare Commission was assailed by him through writ petition No. 13663 before the Honorable Lahore High Court, Multan Bench which is sub-judice and the PMC cannot issue show cause notice during pendency of above mentioned writ petition.
8. Dr. Irfan Ashraf (Respondent No.2) submitted his reply on 26.05.2021 to the show cause notice wherein he contended:-
- a. That the Answering Respondent conducted operation of the patient (father of the Complainant) on 31.12.2016 with due care and caution after seeking permission of the patient as well his nephew Muhammad Arshad.
- b. That Saleem Poly Clinic Mian Channu, is a well-equipped hospital. The surgical instruments in the hospital were not rusted and the same were properly sterilized. It is further submitted that Answering Respondent has been working as Senior Registrar Surgery at Bahawal Victoria Hospital, Bahawalpur since 2014. He has 13 years experience in general surgery from 2008 to-date. He does private practice as general surgeon at Saleem Polyclinic, Mian Channu on weekend basis.
- c. The Answering Respondent operated on patient Niaz Ahmad on 31.12.2016 for gallstone. The patient was put under general anesthesia for laparoscopic cholecystectomy. Operative findings revealed complication of gallstone disease (cholecystocholedocal fistula, resulting in CBD injury). This complication was detected during the surgery and necessary initial management (external biliary drainage) was done at the spot. No hepatic veins were

damaged. The patient became fully conscious after surgery. The patient and his attendants were counseled about the disease and informed about the definite procedure at Bahawal Victoria Hospital, Bahawalpur. The patient was shifted to Bahawal Victoria Hospital, Bahawalpur on 02.01.2017 at 07:00 pm for repair of CBD injury and was planned on elective list after anesthesia fitness.

- d. On 04.01.2017, his definitive surgery was performed by Professor Dr. Javed Iqbal, MBBS, FCPS, FRCS (UK), FACS (US), Head of Surgery department at BVH, Bahawalpur at that time. The patient was discharged home in stable condition, 7 days after the surgery. The patient was re-admitted at BVH, Bahawalpur on 16.01.2017 due to complaints of bleeding per rectum for which he was managed conservatively and discharged in satisfactory condition, after 5 days on 21.01.2017.
 - e. The patient did not come for follow up. Later on, it came to our knowledge that the patient was taken to Lahore, where he was treated in different hospitals. The patient underwent some procedure by intervention radiologist, after which his condition deteriorated and he was operated upon in Sheikh Zayed Hospital, Lahore. Soon after operation, he passed away on 04.03.2017.
 - f. Previously, the Complainant filed a complaint of similar nature before the Punjab Healthcare Commission, who hold an inquiry into the allegations and sought opinion from Expert of General Surgery and the Expert after considering the contents of complaint gave opinion in my favor. The Punjab Healthcare Commission illegally and unlawfully vide order dated 19.06.2019 referred the case of the Answering Respondent to PMC for appropriate legal action.
9. Dr. Khurram Shafiq Khan (RespondentNo.3) submitted his reply 13.04.2021 wherein he stated that:
- a. Two charges have been leveled against me in this complaint; 1. Procedure done outside of Shaikh Zayed Hospital (SZH). 2. Unsuccessful procedure. A detailed inquiry in this regard had been conducted by Punjab Healthcare Commission.
 - b. Patient Mr. Niaz Ahmad had two prior surgeries and had been bleeding from an injury to his Right Hepatic Artery which was evident from his CT angiography performed at Shaikh Zayed Hospital, Lahore. I was contacted with CTA images on 14.02.2017 to discuss the possibility of embolization of the injured artery. Because of the Government and Hospital Administration instructions, no vendors were allowed on the premises of Angio Labs of Government Hospital and also no inventory was allowed to be kept in Angio suites in those days. So I was not able to perform the procedure at SZH. Also, I was leaving on the same night for USA. The attendants of the patient contacted me and requested to do procedure where ever it was possible. I explained to them that even if I do the procedure outside Shaikh Zayed hospital, I would not be able to keep patient there overnight as I was going

abroad. It was then decided that patient will be transferred back to Shaikh Zayed hospital few hours after the procedure. So they brought the patient to Lahore Medical Complex without getting discharged from Shaikh Zayed hospital and he was transported back to Shaikh Zayed hospital at night, after a successful procedure on 14.02.2017.

- c. Now I would like to explain about my part of the care that was provided to the patient as he had two prior surgeries and one major surgery after my procedure. I was asked to do the embolization of Right Hepatic Artery which was bleeding profusely with a large pseudoaneurysm formation. The Right Hepatic Artery was replaced to Superior Mesenteric Artery (SMA) which was approached with the help of Cobra C2 catheter. The bleeding was stopped according to standard guidelines of the embolization procedure. First the lesion was crossed to occlude the part of the artery distal to lesion so that it does not keep on bleeding through retro filling by collaterals. Then the aneurysmal sac was packed, followed by embolization of proximal portion of artery and consequently bleeding was stopped. After that the patient, was shifted back to Shaikh Zayed hospital. The stable condition of patient can be verified from the receiving notes of the resident doctor at Shaikh Zayed hospital. According to the SZH record, after observation for a couple more days, patient was discharged as being stable and not bleeding on 18.02.2017.
- d. When patient came back to hospital in sick state on 22.02.2017, his CT Angio was repeated which showed perfectly closed artery by my procedure. The Liver Transplant Unit (LTU) decided to perform Right Hemihepatectomy which is a major surgery with a high mortality rate. The patient expired few days after the surgery with multiple comorbidities on 04.03.2017.
- e. On my return, when I saw repeated CT Angio it showed perfectly closed vessel by my procedure and there was no recurrence or any short coming in my procedure. I must clarify here that embolization procedure was to stop the bleeding, which it did. I neither treated the already damaged liver or the ongoing infective processes due to large blood collections or any other dysfunctions, nor is it the scope of my specialty to deal with those things.

IV. REJOINDER

10. Reply received from Respondents were shared with the Complainant for rejoinder. The Complainant submitted his rejoinder on 10.06.2021 wherein he reiterated allegations leveled in the complaint. He further stated that he is not satisfied with the comments of the Respondent doctors.

V. HEARING

11. After completion of codal formalities the matter was fixed for hearing on 11.12.2021. Notices dated 29.11.2021 were issued to Muhammad Zahid Niaz (Complainant) and Dr. Mohammad Saleem, Dr. Irfan Ashraf and Dr. Khurram Shafiq Khan (Respondent/s), directing them to appear before the Disciplinary Committee on 11.12.2021. Medical Superintendent of Bahawal Victoria Hospital, Bahawalpur and Administrator of Sheikh Zayed Hospital were also directed vide separate notices dated 29.11.2021 to appear before the Disciplinary Committee along with medical record of the patient
12. On the date of hearing the Complainant, Respondent No.1, Respondent No. 2, appeared in person. Mr. Faisal Nadeem, representative of MS Bahawal Victoria Hospital, Bahawalpur and Dr. Jamil Tahir, Deputy Administrator, Sheikh Zayed hospital also appeared before the Disciplinary Committee whereas Dr. Khurram Shafiq Khan (Respondent No.3) remained absent despite service of notice.
13. Dr. Saleem Akhtar (Respondent No.1) stated that he is the owner of Saleem Poly Clinic, Mian Chanu which is six (6) bed hospital. He practices as GP at the said clinic. His sister-in-law namely Dr. Zareena Naeem practices gynae at the clinic and his brother Dr. Naeem Akhtar also practices as GP at the said clinic. He further submitted that Dr. Irfan Ashraf, his nephew performs surgeries on the weekend at Saleem Poly Clinic. His other nephew Dr. Farhan Ashraf MCPS (anesthesia) is working as anesthetist in Kasur, he is available on weekend at Saleem Poly Clinic.
14. Dr. Saleem Akhtar further submitted that patient Niaz Ahmad was brought to Saleem Poly Clinic by brother of the Complainant namely Shahid Niaz and his cousin Arshad. They requested to perform operation on the patient for gallstones. They had prescriptions of two three hospitals and ultrasound report of patient with them.
15. The Disciplinary Committee asked Dr. Saleem Akhtar that being a GP, how he can advise the patient regarding surgery, he responded that he checked the medical record brought by the attendants and informed Dr. Irfan Ashraf who was present in the clinic at that time. Dr. Irfan Ashraf reviewed the record and admitted the patient for laparoscopic cholecystectomy. Consent

was obtained before the procedure which was signed by the patient himself and cousin of the Complainant namely Mr. Arshad.

16. Dr. Saleem Akhtar further submitted that thereafter operation was started by Dr. Irfan Ahsraf and anesthetist was also available in OPD at that time. Later on, during the operation Dr. Irfan Ashraf identified injury in the Common Bile Duct (CBD) of the patient. Dr. Irfan Ashraf contacted his senior Professor at BVH, Bahawalpur and discussed the case with him.
17. Dr. Irfan Ashraf stated that he is working at Bahwal Victoria Hospital, Bahawalpur. He is employee of Government of the Punjab. He further stated that he performs surgeries at Saleem Poly Clinic Mian Channu on weekend.
18. Responding to question put by the Disciplinary Committee; Respondent Dr. Irfan Ashraf stated that it was a diagnosed case of gall disease. The Committee asked whether it was diagnosed by him, he replied no and further stated that the patient had ultrasound reports and other investigations conducted at some other hospital in Khanewal and it was already a diagnosed case. Remaining investigations were performed and elective procedure i.e. laparoscopic cholecystectomy was planned.
19. Respondent Dr. Irfan Ashraf further submitted that he started the procedure under general anesthesia. There were dense adhesions in the gallbladder. He removed the adhesions and started a section to find Hartmann pouch. During dissection, a structure which appeared as cystic duct was found which was dissected and a window was created behind that structure which was going inside the gallbladder. After all precautions, he clipped the cystic duct. When he cut the cystic duct he noticed fresh yellowish bile coming out which was alarming for him as the gallbladder usually has concentrated bile which is greenish in color. It appeared to be coming from the liver's side. It was suspected that there was Common Bile Duct injury.
20. He further stated that he did the cholecystectomy and put the drain inside and planned definite procedure to be conducted at BVH, Bahawalpur where such procedures are performed in routine. The patient was stable at that time and was shifted to BVH hospital very next day for

repair of CBD. On third day at the BVH pre-op anesthesia assessment of the patient was done and on fourth day hepaticojejunostomy was done by Professor Dr. Javed Iqbal at BVH. The surgery was uneventful. The patient started oral medication third post op day and was discharged in a satisfactory condition on eighth postoperative day.

21. Respondent Dr. Irfan further stated that after six days of discharge, one of the attendants of the patient called him and told that patient had severe bleeding per rectum and he had tachycardia. He advised the attendant to go to a local hospital and get the patient's vital checked. After that he advised the attendants to shift the patient to BVH. The patient was shifted to BVH the same day. The patient was resuscitated, fluids were given and samples for investigations were sent. Ultrasound was also performed and no fluid was noticed in the peritoneal cavity. Two pints of blood were transfused. By that time bleeding had stopped. The bleeding site was thought to be enteroenterostomy or some ulcer. A call for endoscopy was sent which was done at BVH, Bahawalpur. As per endoscopy, report there was no bleeding site. The patient improved and he started orally, his stool was clear and all other investigations were also clear. On fifth day of admission the patient was fine and he requested for discharge, therefore he was discharged from the hospital with normal vitals.
22. After four days he again received a call from the attendant that same episode of bleeding per rectum occurred, he advised the attendant to bring the patient to BVH but they did not bring the patient to BVH, Hospital.
23. The expert enquired from Respondent Dr. Irfan Ashraf regarding his qualification as a surgeon, he stated that he has done FCPS (General Surgery). The expert further asked Respondent Dr. Irfan Ashraf whether he has any training in laparoscopic surgery. The Respondent stated that in the year 2013, there was no separate training program regarding laparoscopic surgery at BVH, Bahawalpur.
24. The expert further enquired from Respondent Dr. Irfan Ashraf regarding age of the patient, he stated that patient was 56 years old and he had no other co-morbidity at the time of surgery. The expert further asked whether facilities were available at Saleem Poly Clinic to handle emergencies

arising during such surgeries as happened in this case, which he could not give satisfactory answer. He further stated that blood facility is available at Saleem Poly Clinic but no ICU is available to handle emergencies of this nature. The expert further enquired about the standard course of treatment for Bile Duct injury recognized during laparoscopic surgery. The Respondent Dr. Irfan Ashraf stated that there was option to do hepaticojejunostomy but he did not perform that because as per literature there are less chances of success of such repair surgery when primary surgeon performs it. The better option was to refer the patient to some senior and more experienced surgeon therefore, he shifted the patient to BVH, Bahawalpur.

25. The expert further asked were there any symptoms of sepsis, he replied no there were no such symptoms. He further stated that white cell count of the patient was normal. The patient had no fever and his abdomen was not tender as well.
26. The Committee enquired from Respondent Dr. Irfan Ashraf that why did he not advise the patient to go to Bahawal Victoria Hospital in Bahawalpur for elective procedure which was near to his hometown and had all the requisite facilities. The Respondent replied that the patient was willing to undergo surgery at Saleem Poly Clinic therefore on the request of patient surgery was conducted at the said clinic in Mian Chanu. However, on enquiry by the Committee as to adequate facilities at Saleem Poly Clinic the Respondent Dr. Irfan Ashraf admitted that facilities to manage complication as occurred in this were not available at Saleem Ploy Clinic.
27. The Committee enquired whether laparoscopy was included in the curriculum of his FCPS, he stated that he does not remember. He was asked specific question whether he has done laparoscopic surgery training in his FCPS. Dr. Irfan Ashraf stated that he has done about 50 laparoscopic procedures during his FCPS training at BVH Bahawalpur.

VI. EXPERT OPINION BY DR. TANWIR KHALIQ

28. Dr. Tanwir Khaliq, general surgeon, was appointed as an expert to assist the Disciplinary Committee in the matter. He has opined that:

Patient (NA) presented with features of gallstones (Cholelithiasis) Laparoscopic converted to open cholecystectomy was done on 31.12.2016 Surgery performed by a qualified surgeon in a relatively depleted small hospital without ICU and other back up facilities. Lap cholecystectomy was attempted and a choledochal fistula was identified leading to common bile duct injury. Simple external drainage without formal hepatico Jejunostomy was contemplated and patient was shifted to a tertiary care teaching hospital.

On 04.01.2017 a definite procedure (hepatico Jejunostomy) was performed at BVH by a senior qualified surgeon.

Patient developed pseudo aneurysm of right hepatic artery which was embolized by a qualified radiologist later on in a private setup.

Observation

- 1) Procedure was done in a setting, which was not up to the mark for laparoscopic cholecystectomy lacking in ICU and other key facilities.*
- 2) Though procedure was done by a qualified general Surgeon but he was not very proficient in laparoscopic surgery particularly in managing complications of this technique.*
- 3) He also could not appreciate the standard facilities required in a hospital offering laparoscopic surgeries.*

FINDINGS AND CONCLUSION

29. After perusal of the record and submissions/statement of Respondent No. 1 and 2 it is noted that father of the Complainant namely Niaz Ahmed 56 years of age was taken to Saleem Poly Clinic, Mian Chanu on 31.12.2016 where Dr. Saleem initially examined him. As per the Complainant the patient was admitted by Dr. Saleem Akhtar and he started surgery without obtaining consent. The Respondent Dr. Saleem Akhtar has denied this allegation and took the stance that he only initially examined the patient and referred him to Dr. Irfan Ashraf surgeon, who admitted the patient for surgery.

30. The surgery was carried out on 31.12.2016 and during the surgery Common Bile Duct injury occurred. After the injury, the patient was shifted to Bahawal Victoria Hospital, Bahawalpur for repair of CBD where Dr. Irfan Ashraf works as registrar. As per admission sheet of Bahawal Victoria Hospital the patient was admitted on 02.01.2017 at 10:00 pm. As per statement of Dr. Irfan Ashraf he identified CBD injury during surgery on 31.12.2016. Record shows that the patient was brought to BVH, Bahawalpur after 2 days of surgery and not the next day as claimed

by Dr. Irfan Ashraf. At BVH, Professor Dr. Javed Iqbal did hepaticojejunostomy. The patient was discharged after the surgery.

31. The patient again reported to BVH, Bahwalpur after 6 days with complaint of per rectum bleeding. He was resuscitated and necessary investigations were performed. Later on, he was discharged from the hospital. After some days the patient again had the same episode of per rectum bleeding but this time attendant took the patient to Lahore. The patient underwent embolization of pseudo aneurysm of Right Hepatic Artery on 14.02.2017 at Lahore Medical Complex by Dr. Khurram Shafiq Khan. He later expired in Sheikh Zayed Hospital on 04.03.2017.
32. During the hearing the Respondents have produced a consent form reportedly signed by the patient. The Complainant has denied that any consent form was signed by the patient. In this regard, the copy CNIC of the deceased patient has been perused. Apparently, signature on CNIC co-relates the signature on consent form. Therefore, we do not find any irregularity with respect to the consent form.
33. Dr. Irfan Ashraf performed surgery of the patient at Saleem Poly Clinic where facilities to manage complications arising of such nature of surgery were not available. Dr. Irfan Ashraf during hearing stated that *“he admits that facilities to manage complication were not available at Saleem Poly Clinic”*.
34. The expert has also given his opinion wherein he highlighted that although the surgeon was qualified but he performed the procedure at a setup where facilities were not available. Furthermore, the Respondent Dr. Irfan Ashraf was not proficient in handling complication of surgery. Relevant portion of expert opinion is reproduced below.

- 1) *Procedure was done in a setting, which was not up to the mark for laparoscopic cholecystectomy lacking in ICU and other key facilities.*
- 2) *Though procedure was done by a qualified general Surgeon but he was not very proficient in laparoscopic surgery particularly in managing complications of this technique.*
- 3) *He also could not appreciate the standard facilities required in a hospital offering laparoscopic surgeries*

35. Furthermore, as per statement of Dr. Irfan Ashraf he is available at the said clinic only on weekend. Admittedly it was not prudent on his part to perform surgeries on a weekend basis and leave the patient postoperatively in the hands of staff of the hospital without proper follow up by the consultant and represents a failure on the part of the consultant in terms of the obligation of duty of care to the patient.
36. In this case during laparoscopic cholecystectomy of the patient Niaz Ahmed performed at Saleem policy Clinic, Common Bile Duct injury occurred. During the hearing this fact was admitted by the Respondent Dr. Irfan Ashraf who carried out the procedure of the patient that he recognized/identified the said injury during the surgery. It is also on record in terms of statement of Respondent Dr. Irfan Ashraf that facilities to handle complication of this surgery were not available at Saleem Poly Clinic. Furthermore, as opined by the expert, Respondent Dr. Irfan Ashraf was not very proficient in laparoscopic surgery particularly in managing complications of this technique. Lack of skills and proper facilities lead to deterioration of the patient due to the complication resulting from such surgery. The conduct of the Respondent Dr. Irfan Ashraf is also a matter of concern in that it was an elective procedure and the Respondent Dr. Irfan Ashraf opted to carry out the surgery knowingly at a deficient healthcare facility rather than referring the patient to a better facility; BVH which was admittedly closer to the patient's home town. The explanation given that the patient made the choice is contrary to the consultants obligation to even offer what to say of performing a surgery at a facility which is not properly equipped. Hence it is either a failure of proper counselling by the consultant or wrongfully accepting a case which should have been referred to a proper facility; and in this case being one where the Respondent doctor himself worked full time.
37. The Committee required the Respondent Dr. Irfan during the course of hearing to provide the logbook of his four years training at CPSP to verify his experience in laparoscopic procedures in view of the Respondent claiming he had done over 50 such procedres during his training. The Respondent Dr. Irfan Ashraf vide letter dated 17-12-2021 submitted his logbook which contained data only with respect to first two years of training. He took the stance that CPSP has regretted to provide him the logbook for third and fourth year. He was required to provide complete data as per the instructions of the Committee through letter 31-12-2021. Further,



CPSP, Karachi was also requested vide letter dated 31-12-2021 to provide the complete logbook of the Respondent doctor which was received from CPSP on 06-01-2022. As per logbook of Dr. Irfan Ashraf he had carried out the following laparoscopic procedures during training:

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| One (01) Laparoscopic Procedure : | Level I |
| Thirty four (34) laparoscopic procedures: | Level II |
| Six (06) laparoscopic Procedures: | Level III |
| One (01) laparoscopic procedure: | Level IV |

Requirements for Fellowship Training by the College of Physician and Surgeons Pakistan for the duration of four years have also been submitted by the Respondent Doctor vide letter dated 17-12-2021 which provide for the requisite laparoscopic procedures as under:

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|--|-----------|
| Ten (10) Laparoscopic Procedures : | year 1 &2 |
| Twelve (12) laparoscopic Cholecystectomy and | |
| Eight (08) laparoscopic hernia repair: | year 3&4 |

Out of these 30 mandatory procedures 26 have to be specifically in the following Levels;

| | |
|---------------------------------------|--------------|
| Twelve (12) Laparoscopic Procedures : | Level I & II |
| Eight (08) Laparoscopic Procedures: | Level III |
| Three (03) Laparoscopic Procedures: | Level IV |
| Three (03) Laparoscopic Procedures: | Level V |

38. It is important to note here that as per the syllabus guidelines given in the logbook submitted by the Respondent doctor, Level 1 has status as an “observer”, whereas Level 2 has status of “Assistant”. Level 3 means procedure conduct under direct supervision and Level 4 indicates procedures conducted under indirect supervision. Level 5 is the independent level i.e. procedures taken independently without any supervision.

39. Considering the experience gained by the Respondent doctor as per his logbook, he has conducted only six procedures instead of eight at Level III, only one laparoscopic procedure at Level IV as compared to the requirements of three procedures at this Level. Whereas he did not acquire any experience at Level V which establishes that the trainee doctor is capable of handling laparoscopic procedure independently without any supervision. The procedures at Level III, IV and V are critical for completion of training and having done extra procedures at Level 1 or Level II which are purely at assisting level cannot be deemed to translate to a surgeon training in

laparoscopic procedures. Therefore, the record confirms that the Respondent Dr. Irfan Ashraf was not properly trained for laparoscopic procedures and was aware of the same and yet proceeded to undertake such procedures which amounts to a misrepresentation on his part to the patient as well as a gross violation of the code of ethics incumbent on a licensee. Furthermore, in view of his lack of training he caused an injury during the procedure, which may not be considered as negligence had he been properly trained as it is a risk with such invasive procedures.

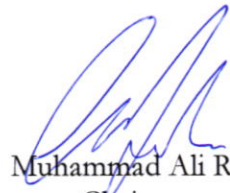
40. In view of foregoing Dr. Irfan Ashraf is hereby penalized for false representation as to his training and capabilities and conducting procedures without the requisite training and his license is suspended for a period of one year along with a fine of Rs. 100,000. He is barred from carrying out any laparoscopic procedures until such time as he acquires proper certified training.
41. No negligence was found on the part of the Respondent No.1 Dr. Muhammad Saleem, who is however warned to ensure that he does not allow his owned facility to be used for surgical procedures which are beyond the capacity of the facility as well as consultants working at such facility.
42. Disciplinary proceedings in the instant complaint are disposed of in the above terms to the extent of the show cause notice no. PF -4-WM-519/2020/LEGAL/383 issued to Respondent No. 1, Dr. Muhammad Saleem and show cause no. PF -4-WM-519/2020/LEGAL/384 issued to Respondent No. 2, Dr. Irfan Ashraf.
43. Dr. Khurram Shafiq Khan has failed to appear despite service of notice. Therefore, proceedings against him shall continue and he is directed to appear at the next hearing failing which his license shall be suspended.
44. Before parting with this Order we would direct the Authority to communicate to the CPSP that when granting fellowships in General Surgery or other specialties if a trainee has not properly completed the entire training such qualification be either withheld till training is completed or issued with a clear caveat as to what the consultant is qualified in respect of. The CPSP may also



be requested to revisit the qualification of Dr. Irfan Ashraf in view of the admitted fact that he never completed the requisite training in laparoscopic procedures yet was granted a fellowship in General Surgery which enabled him to falsely represent his ability in laparoscopic procedures.


Dr. Anis-ur-Rehman
Member


Dr. Asif Loya
Member


Muhammad Ali Raza
Chairman

28 February, 2022