Contents

1-45

Preface

1.	Medical Negligence and Consumer Protection:
	An Introduction
	1.1 Medical Services and Health
	1.2 Consumer Protection in Medical Services
	1.3 Conceptual Framework and Developments in
	Patient Care
	1.3.1 Patient-Doctor Relationship
	1.3.1.1 An Implied Contract
	1.3.1.2 Fiduciary Concept
	1.3.1.3 A Partnership
	1.3.1.4 A Legal Contract
	1.3.1.5 Ethical Aspect
	1.3.1.6 Change in Relationship
	1.3.2 Medical Negligence
	1.3.2.1 Major Types of Medical Negligence
	1.3.2.2 How to Prove Negligence?
	1.3.3 Consent
	1.3.4 Deficiency in Medical Services
	1.3.5 Perception
	1.3.6 Service Quality
	1.3.7 Patient Satisfaction
	1.4 Developments in Patient Care and International
	Trends in Consumer Protection
	1.4.1 Developments in Patient Care
	1.4.1.1 Patient-centred Approach
	1.4.1.2 Medical Audit
	1.4.1.3 Quality Control Circle
	1.4.1.4 Medical Ombudsman
	1.4.1.5 No fault Compensation Programme
	1.4.1.6 Patients' Charter

1.4.2 International Trends in Consumer Protection 1.5 Conclusion

2.	Studies on N	Medical	Services:	Global	and
	Indian Expe	eriences			

46-58

- 2.1 Studies Conducted Outside India
 - 2.1.1 Studies Based on Patients' Perception
 - 2.1.2 Studies on Quality of Patient Care
 - 2.1.3 Studies on Patients' Satisfaction
 - 2.1.4 Studies on Factors Influencing Physician's Choice
 - 2.1.5 Study on Patients' Complaining Behaviour
 - 2.1.6 Studies on Practice of Defensive Medicine
- 2.2 Studies Conducted in India
 - 2.2.1 Studies Based on Patients' Satisfaction
 - 2.2.2 Study on CPA's Benefits to Consumers
 - 2.2.3 Studies on Consumers' Awareness of CPA
 - 2.2.4 Study on Professional Indemnity Insurance
- 2.3 Conclusion

x

3. Medical Services in India: Regulatory Measures

59-210

- 3.1 Relevant Provisions of the Indian Contract Act, 1872
- 3.2 Provisions of the Indian Penal Code, 1860
- 3.3 Relevant Provisions of the Law of Torts
- 3.4 Relevant Provisions of the Indian Medical Council Act, 1956
- 3.5 The Consumer Protection Act, 1986 and Medical Services
 - 3.5.1 Relevant Terms
 - 3.5.2 Enforcement Machinery under the Consumer Protection Act
 - 3.5.3 Machinery for Redressal of Consumer Disputes
 - 3.5.4 Limitation Period

`
3.5.5 Time Limit of Disposal
3.5.6 Reliefs for Deficiency in Service
3.5.7 Action against Frivolous or Vexatious
Complaints
3.5.8 Penalties
3.5.9 The Supreme Court Judgement in Indian
Medical Association v. V.P. Shantha
3.5.10 Functioning of the Consumer Courts
3.5.11 Approach of the Consumer Courts

3.6 Conclusion

4. Patients' Perception of Medical Services in India 211-242

- 4.1 Profile of the Sample: Patients
- 4.2 Patient's Perception Regarding Medical Services
 - 4.2.1 Reasons for Patients' Choice of a Health Institution
 - 4.2.2 Patients' Expectations from Medical Profession
 - 4.2.3 Patients' Opinion about the Services Rendered at OPD
 - 4.2.4 Patients' Satisfaction with the Quality of Medical Services
 - 4.2.5 Perception as to Behaviour of Staff of Health Institution
 - 4.2.6 Information about Illness and Treatment Provided by Doctors
 - 4.2.7 Perception as to the Necessity of Information Regarding Treatment
 - 4.2.8 Patients' Satisfaction over Doctor's Response to Queries
 - 4.2.9 Patients' Awareness about Grievance Redressal under CPA
 - 4.2.10 Patients' Overall Satisfaction with Medical Services
 - 4.2.11 Action Taken by Dissatisfied Patients

Medical Services

4.2.11.1 Patients Dissatisfied and Suffering
Specific Damages
4.2.11.2 Aggrieved Patients Needing
Compensation
4.2.11.3 Action Taken by Patients
Suffering Damages
4.2.11.4 Patients' Satisfaction with
Remedial Measures
4.2.11.5 Action Proposed by Patients
Dissatisfied with Remedial
Measures
4.2.12 Perceived Injustice to Patients by Doctors
4.2.13 Perception Regarding Doctors'
Professional Accountability
4.2.14 Patients' Grievances against Doctors and
Health Institutions
4.2.15 Perception Regarding CPA's Role for
Grievance Redressal
4.2.16 Indoor Patients' Perception:
Additional Aspects
4.2.17 Perception of Patients Having Undergone
Surgery: Additional Aspects
4.3 Conclusion
5. Grievance Redressal under Consumer
Protection Act
5.1 Profile of the Sample: Doctors
5.2 Profile of the Sample: Experts
5.3 Viewpoints of the Doctors' and Experts About

5.3.1 Perceived Injustice to Patients by Doctors

5.3.3 Patients' Grievances against Doctors and

5.3.2 Perception Regarding Doctors' Professional Accountability

Health Institutions

243-268

- 5.3.4 Awareness about Avenues for Action against Deficiency in Medical Services
- 5.3.5 Existing Legal Measures for Grievance Redressal
- 5.3.6 Perception Regarding Inclusion of Free Medical Services under CPA
- 5.3.7 Perception Regarding Redressal Mechanism under the CPA
- 5.3.8 Perception Regarding Basis of Patient-Doctor Relationship
- 5.3.9 Effect of CPA on Patient-Doctor Relationship
- 5.3.10 Effect of CPA on Quality of Medical Services
- 5.3.11 Implications of Application of CPA to Medical Services for Patient-doctor Relationship
- 5.3.12 Perception Regarding CPA's Role in Grievance Redressal of Patients
- 5.3.13 Doctors' Views on Additional Aspects 5.4 Conclusion

6. Conclusions

- 6.1 Approach of Consumer Courts under CPA
- 6.2 Patient's Perception of Medical Services and Grievance Redressal under CPA
 - 6.2.1 Patients' Satisfaction with Medical Services
 - 6.2.2 Reasons for Patients' Dissatisfaction
 - 6.2.3 Communication of Information about Line of Treatment
 - 6.2.4 Accountability of Doctors
 - 6.2.5 Factors Affecting Patients' Choice of a Hospital
 - 6.2.6 Patients' Expectations from Medical

269-288

Profession
6.2.7 Perception about Performance of Duties
by Doctors
6.2.8 Action Desired to be Taken by Dissatisfied
Patients
6.2.9 Patients' Awareness of CPA
6.3 Doctors' and Experts' Viewpoints: CPA
as a Means of Grievance Redressal Against
Deficiency in Medical Services
6.3.1 Awareness of Regulatory Measures
for Medical Services
6.3.2 Desirability of Inclusion of Free Medical
Services under the CPA
6.3.3 Redressal Mechanism under the CPA
6.3.4 Quality of Medical Service Provided
and the CPA
6.3.5 Perception about the Basis of
Patient-Doctor Relationship
6.3.6 Necessity of Continuing Medical Education
6.3.7 Maintenance of Adequate Patient's Record
6.3.8 Implications of Application of CPA to
Medical Services for Patient-Doctor
Relationship
6.4 CPA's Relevance for Patient's Grievance
Redressal
Appendices
Bibliography
Index
THREY

289-302

303-318 319-320