

Annexure-14.

Form for Conducting Audit of Death

(To be submitted within one month of sterilization by DQAC and sent to state)

Name of the state/District/Union Territory: Tamil Nadu-Theni District

Details of the deceased		
1	Name	MRS.S.MURUGESWARI
2	Age	38
3	Sex	Female/Male : Female
4	Name of Spouse (his or her age)	SIVASAMI.K.
5	Address of the deceased	W/o, Sivasami, Wd-15, Telephone Exchange Street, SPK Road, Chinnamanur, Uthamapalayam(TK), Theni District-625515.Tamilnadu
6	Number of living children(with details concerning age and sex)	Two Children 1 st Female-6 Years 2 nd Male- 4 Years
7	Whether operation was performed after delivery or otherwise	Interval
8	If after delivery Date of delivery/ Place of delivery Type of delivery Person who conducted the delivery	Nil
9	Whether tubectomy operation was done with MTP	No
10	Whether written consent was obtained before the operation	Yes D/M/Y29/09/2023
11	Whether the operation was done at a camp or as a fixed day static procedure at the institution	
Details of operations		
12	Place of operation	GH.Chinnamanur
13	Date and time of operation(D/M/Y)	29.09.2023 12.20 pm
14	Date and time of death(D/M/Y)	30.09.2023 01.00 am
15	Name of surgeon	Dr.P.Ahlandeswari.MBBS.DGO.,
16	Whether surgeon was empanelled or not	Yes- empanelled
17	If the operation was performed at a camp who primarily screened the client clinically	Yes
18	Was the centre fully equipped to handle any emergency complications during the procedure?	Yes
19	Number of clients admitted and number of clients operated up on the day of surgery	Number of clients admitted -16 Number of clients operated-13
20	Did any other client develop complications? If so, give details of complications?	No other client develop complications

Anaesthesia/Analgesia/Sedation		
21	Name of the Anaesthetist, if present	Dr P Pavithra Devi MD (Anaesthesia)
22	Details of Anaesthesia drugs used	Drug Name and dosage :- Midazolam 5 mg 1cc IV Propofol 50mg IV Glycopyrrolate 0.6 mg
23	Types of anaesthesia/ analgesia/sedation	Short GA
24	Post-operative complications (according to sequence of events)	<p>On 29.09.2023 Lap sterilization under IV anaesthesia (Midazolam+Propofol+Glycopyrrolate) started at 12.20pm. Proceedure completed at 12.28 pm. At 12.30pm Patient developed sudden difficulty in breathing, O/E Patient became dyspnoeic,,bilateral coarse rales++ suggesting Acute Pulmonary Edema.Inj.Lasix +Inj.Hydrocortisone given.SpO2 drops below 60%,Frothy secretions ++;Developed instantaneous Cardio respiratory arrest:Physician by the side started CPR for 15 minutes; Airway secured with Endotracheal Intubation;Frothy secretions sucked out. Inj Morphine 2 mg iv+ Intravenous Lasix drip started following Adrenaline and Atropine injections.Following resuscitation patient revived PR:160/mt Sinus rhythm feeble;BP:?? SpO2<40% Following Inj Dopamine drip then by Inj Nor Adrenaline drip BP 90/60 mmhg.But no improvement in oxygen saturation (SpO2<60%).Hence patient shifted to Government Theni Medical College along with Anaesthetist and Staff nurse at 3pm.Till that time Urine output was 550ml. During transfer the patient connected with ambulance ventilator.</p> <p>29.09.2023 at 3.35pm Patient received in GTMCH in intubated state with ambu Bag ventilation with noradrenaline support and lasix infusion 29.09.2023 at 3.40pm On recieving PACU Patient unconscious Bp ?? PR: ?? Spo2 40% CVS SIS2 muffled heart sounds heard RS b/l crepts + P/A soft LS Wound site no soakage P/v no undue bleeding pv K/c of Hypothyroid on T.ELTROXIN 250mg 1-0-0</p> <p>29.09.2023 at 3.45pm Patient on MV VCV mode With dual inotropic support with Inj.noradrenaline and Dopamine infusion</p> <p>29.09.2023 at 3.50pm Cardiac opinion obtained-Bedside ECHO done-EF 49% To continue inotrope and ventilatory support,-serial ECG monitoring</p> <p>29.09.2023 at 3.55pm Bed side USG done :No free fluid NAD</p> <p>29.09.2023 at 4pm Patient was on continuous Mechanical ventilation VCV mode On dual inotropic support .</p> <p>Patient went for sudden cardiac arrest on 30.09.2023 at 12.40 am. Resuscitated for 20 min.DC shock given.CPR given. Inspite of all resuscitative measures, Patient could not be revived and Declared dead on 30.09.2023 at 1.00 am, Body handed over to the family members</p>
	A. Details of symptoms and signs	
	B. Details of laboratory and other investigations	
	C. Details of treatment given, with timings, dates, etc from time of admission until the death of client	
Details of Death Audit		
25	Cause of death (Primary Cause)	Acute Pulmonary Edema of Uncertain Cause
26	Has postmortem been done? If yes, attach the post mortem report	Not performed as the family members not willing for Postmortem examination
27	Whether first notification of death was sent within 24 hours	Yes

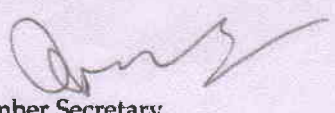
28	Details of the officers from District Quality Assurance Committee (DQAC) who conducted the enquiry	Dr.B.Anbuezhayan.MS.,(GS), Deputy Director of MRHS & Family Welfare, Theni @ Periyakulam
29	In opinion of the chairman of DQAC, was death attributable to the sterilization procedure	Death not attributable to the sterilization procedure
30	What factors could have helped to prevent the death?	Client concealed the irregular medications of hypothyroid status could have precipitated LV dysfunction
31	Were the sterilization standards established by GOI followed?	Yes
32	Did the facility meet and follow up the sterilization standards established by GOI? If no list the deviation(s)	Yes
33	Additional Information	Nil
34	Recommendations made	---
35	Action proposed to be taken	Ventilator facility to be made available


Name :Dr.B.Anbuezhayan.MS.,(GS),
Designation :Deputy Director of MRHS & Family Welfare,
Theni @ Periyakulam
Date:28.12.202

Signature.....

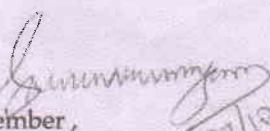
[Note:If any member of the SQAC/DQAC has performed the operation,he/she should recuse himself/ herself from the proceedings of this audit.]


District Collector
Chairperson
The District Quality Assurance
Committee
Theni


Member Secretary,
Deputy Director of Medical and Rural
Health Services and Family Welfare,
Theni @ Periyakulam


Convener
Joint Director of Health
Services, Theni @ Periyakulam

Member, *R. Lakshmi* 29/12/23
Empanelled Gynaecologist,
Government Headquarters Hospital
Periyakulam


Member,
Empanelled Surgeon,
Government Headquarters
Hospital Periyakulam

R. Lakshmi
Member, 29/12/23
Post Partum Project Officer,
Theni Government Medical College
Hospital, Theni

S. Anand
21/12/24