1. How is the term “Doctor’s patient” defined? If a doctor has seen a patient once, and the patient comes again after few weeks for a different complaint, can a doctor refuse his services to him?

2. If the request for home visit is for a different complaint, unrelated to the complaint of original visit, can the home visit be refused?

3. How can anybody qualify “an emergency” based on vague facts given by the patient’s attendents over the phone? Most of the times, the parents perceive any minor problems as an emergency and pester the doctor to hurry up. In such cases, how is the emergency be defined? Is it right to define the emergency on retrospect, when vague history is given to the doctor over the phone?

4. Is it legally correct to print “house calls regretted” on the prescription, even though that is the policy of the doctor?

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Reply

(1) A Doctor’s patient means, once the doctor has accepted to treat the patient. This means a doctor-patient relationship is established (Laxman B Joshi v. Trimbak B Godbole AIR 1969 SC 128). The doctor-patient relationship is not established in certain situations like: (a) examination in emergency with subsequent referral (b) examination for insurance purposes, (c) examination in medicolegal cases for assessment of injuries, sexual offenses, disability, etc. (1) The relationship is usually for the present illness only. It does not extend to subsequent unrelated, different complaints/illnesses.

(2) If the request for home visit is for different complaint unrelated to original visit, the home visit may be refused.

(3) The emergency situation is to be decided by the actual condition of the patient. It can’t be decided by the vague facts. But it is always possible that what patient/relatives think as emergency may be minor symptom. If the case goes to court of law then of course it is the expert’s opinion which shall be deciding that whether it was emergency or not.

(4) The mode and extent of private practice is the privilege of the consultant as per his qualifications and experience. There are no legal compulsions/guidelines for the practice. For example, a pediatrician can treat only outdoor patient, avoid giving injections, avoid attending home visits etc. If a physician does only office practice, he is not held negligent in refusing home visits (2). This may not be the situation in Government/Semi-government/Corporate hospitals. According to law, a doctor should not exceed the services or care which are beyond the scope of his (or, any prudent man’s) experience, qualification or competence. It is always better to
print that particular services are not available.

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REFERENCES
