

**CENTRAL ADMINISTRATIVE TRIBUNAL  
ERNAKULAM BENCH**

**O.A. NO.71/2010**

**Dated this the 25<sup>th</sup> day of January, 2011**

**C O R A M**

**HON'BLE MRS. K. NOORJEHAN, ADMINISTRATIVE MEMBER**

N. Padma Kumar  
S/o. G. Neelakandan Nair  
Station Master Grade II  
Trivandrum Central  
Residing at Padmalayam  
Eanikara, Karakkulam (P.O)  
Trivandrum.

..... Applicant

(By Advocate Mr. Martin G. Thottan)

**Vs**

1 Union of India Represented by  
The General Manager  
Southern Railway  
Headquarters Office  
Chennai.

2 The Chief Medical Director  
Southern Railway  
Chennai

3 Medical Superintendent  
Railway Hospital  
Trivandrum

..... Respondents

(By Advocate Mr. Thomas Mathew Nellimoottil)

The application having been heard on 25.1.2011 the Tribunal on the same day delivered the following:

ORDER

HON'BLE MRS. K. NOORJEHAN, ADMINISTRATIVE MEMBER

The applicant, a Station Master Grade-II of the Trivandrum Division, Southern Railway, is aggrieved by the refusal of the respondents for reimbursement of the expenses incurred on his mother's treatment.

2 The facts in brief is as follows: The applicant's mother aged 74 year old felt sudden pain in her chest on 6.9.2008 and she was taken to PRS Hospital, at Trivandrum, a private hospital which is recognised by the Railway as a referral hospital. She was discharged on 10.9.2008 with advice to take medicine for 10 days. On 20.9.2008 she suffered from uneasiness and difficulty in breathing, she was taken to the Railway Hospital Trivandrum. After initial treatment, she was referred to PRS Hospital Trivandrum by the railway doctor for specialised treatment (A-1). She had to undergo revascularisation process by inserting stents to clear the block in the arteries and discharged on 26.9.2008 for which an amount of Rs. 1,40,000/- was incurred. The applicant submitted the bills for reimbursement in the prescribed format. The grievance of the applicant is that the same was rejected by the second respondent on the ground that revascularisation facility is available at railway hospital Perambur and the applicant failed to avail the same (A-3). Though the applicant submitted representation to review the rejection and for reimbursement of the expenses (A-4), there was no response. Hence, he filed this O.A to quash A-2, declare that he is entitled to get reimbursement of the medical expenses and to direct the respondents to reimburse the same with 9% interest till actual payment.

3 The respondents in reply submitted that the mother of the applicant who was diagnosed to have coronary artery disease underwent Angiogram on 6.9.2008 to 10.9.2008 which showed block in two arteries. Subsequently, she

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was readmitted on 20.9.2008 to 26.9.2008 i.e two weeks after the Angiogram and underwent Coronary Angioplasty. Therefore it is evident that there was two weeks time between the Angiogram and interventional procedure. They further stated that the Senior Divisional Medical Officer, Cardiology, Railway hospital, Perembur has opined that as per the material on record it is evident that there was a gap of two weeks between the angiogram and interventional procedure. Therefore, the treatment was not done on an emergency basis and patient could have been referred to Railway hospital, Perembur during the period of two weeks. Therefore, he was of the opinion that the treatment was not of an emergent nature and patient could have been taken to railway hospital, Perembur (Annexure R-1). They further added that since Railway Hospital Perembur is a referral Hospital for railway employees located to all over India, the applicant's mother was also referred to Railway Hospital, Perembur but the applicant preferred to avail the treatment on his own without the advice of the AMA. They further stated that as per the extant rules the case of the applicant was not an emergency.

4 The applicant filed rejoinder reiterating that his mother was taken to the PRS Hospital for specialised treatment on the advice of the railway doctor, and the surgery was done as an emergency and that the railway doctor had not referred her case to the railway hospital, Perumbur.

5 I have heard learned counsel for the parties and perused the records produced before me.

6 The case of the applicant is that his mother was taken to railway hospital and only on the advice of the railway doctor she was admitted in the PRS hospital, Trivandrum as an emergent measure. This was not rebutted by the respondents. A perusal of the facts narrated by the applicant would show that the patient fell ill and she was taken to the PRS Hospital which according



to the applicant, is as referral hospital for the railways. This fact was not disputed by the respondents. When she developed uneasiness after 10 days of discharge, she was taken to the railway hospital and the railway doctor referred her to the PRS Hospital. In the circumstances, the patient cannot be and need not be taken to the Railway hospital. Therefore, the opinion of the Senior DMO Railways that there was a gap of two weeks between the angiogram and interventional procedure cannot be accepted.

7 The emergency clause specified in Para 648 of IRMM 2000 is as follows:-

"Emergency shall mean any condition or symptom resulting from any cause arising suddenly and if not treated at the early convenience be detrimental to the health of the patient or will jeopardize the life of the patient. Some examples are Road accidents, other types of accidents, acute heart attack, etc. under the such conductions when the Railway beneficiary feels that there is no scope of reporting to his/her authorised Railway Medical Officer and avails treatment in the nearest suitable private hospital, the reimbursement claims are to be processed for sanction after the condition of the emergency is confirmed by the authorised railway Medical Officer ex post facto"

It is averred that the applicant's mother felt sudden pain in her chest and taken to PRS Hospital as an emergency. It cannot be stated that it was not an emergency and does not qualify for reimbursement as per extant rules.

8 In more or less identical cases in O.A. 564/2006, 216/2008, 214/2009 etc. where the patients were suffering either from heart ailments or cancer, had undergone treatment in private hospitals and were denied reimbursement of expenditure incurred by them for treatment in private hospitals on emergency on the basis of the opinion obtained from Sr.DMO,

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Railway Hospital, Perumbur, the OAs were allowed and the respondents were directed to reconsider the cases and ordered reimbursement of the expenses treating them as "emergency".

9 In the circumstances, I allow the O.A and direct the respondents to reconsider the claim submitted by the applicant and reimburse the eligible amount spent on the treatment of his mother, treating it as an emergency case.

Dated 25.1.2011

  
(K. NOORJEHAN)  
ADMINISTRATIVE MEMBER

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