



2025 INSC 1075

**Non-Reportable**

**IN THE SUPREME COURT OF INDIA  
CIVIL APPELLATE JURISDICTION**

**Civil Appeal No. 6621 of 2025**

**Haseena & Ors.**

**....Appellant(s)**

***Versus***

**The United India Insurance Co. Ltd. & Anr.**

**.... Respondent(s)**

**J U D G E M E N T**

**K. VINOD CHANDRAN, J.**

1. The claimants before the Motor Accident Claims Tribunal<sup>1</sup> were the wife, minor child and the mother of an Excise Guard, who died, allegedly as a result of a motor vehicle accident. The accident occurred on 29.04.2006 when the motorcycle driven by the deceased collided with another motorcycle, owned and driven by the fourth respondent. The accident occurred at about 9 am and the injured victim was taken to a nearby hospital for treatment.

---

<sup>1</sup> for short, 'the Tribunal'

The victim was treated as an inpatient from 29.04.2006 till 03.05.2006 and discharged. The injuries suffered by him were compound fracture of second, third and fourth metatarsals of right foot and a simple fracture of the proximal phalanx of left little finger. He also sustained a wound at the fracture site.

2. After getting discharged, the treatment continued as an outpatient till 12.08.2006, subsequent to which he was referred to a higher medical centre for plastic surgery consultation. On 18.09.2006, the victim was admitted to the higher medical centre with a non-healing ulcer on the right foot. The victim was advised to undergo a surgery after which he abruptly died. The cause of death was pulmonary embolism/acute myocardial infarction. The death occurred on 18.09.2006, almost five months after the date of the accident. The Tribunal found the death to be a direct consequence of the accident which finding was overturned by the High Court. The appeal is by the claimants against the judgment of the High Court.

3. The factum of the accident and the death is undisputed. The controversy arose insofar as the death occurred after five months; whether the accident was a direct causation of the death. The High Court has elaborately considered the evidence of PW-1, the plastic surgeon who carried out the surgical procedure and found the death to be not a direct cause of the accident.

4. We first looked at the order of the Tribunal which was specifically emphasised by Mr. Shaji P. Chaly, learned Senior Counsel appearing for the appellant. The Tribunal found merit in the submissions of the claimants that the non-healing ulcer on the right foot was consequent to the injuries sustained by the victim in the motor accident. The Tribunal also observed that the injuries sustained by the deceased victim were not so serious and though the deceased had undergone grafting of skin in the local hospital on two occasions, the injuries did not heal which prompted the reference to a higher centre for plastic surgery consultation; the local hospital having found themselves unable to further

manage the medical condition. The surgery was carried out at the higher medical centre and the patient was shifted to post operative ward at 12:50 pm on 21.09.2006 but at 04:45 pm he developed sudden breathlessness and restlessness. Exhibit A-1, the certificate issued by the plastic surgeon, who was examined as PW-1 clearly reported the cause of death as pulmonary embolism/acute myocardial infarction.

5. PW-1 affirmed Exhibit A-1 and the Tribunal found that the proximity of the accident in which the injuries were sustained, with the death, clearly showed the nexus between the accident and the death. It was also found that the cross-examination of PW-1 did not elicit any contra indication and there was neither any heart complaint nor hypertension or diabetics. It was hence the Tribunal found the death to be a direct result of the injuries sustained in the accident.

6. The High Court by the impugned judgment elaborately considered the evidence of PW-1. PW-1 while affirming Exhibit A-1 certificate, deposed that the surgery

was conducted by reason of the non-healing ulcer and the skin grafting was done on 21.09.2006 under spinal anaesthesia. The patient was shifted to the ward at 12:50 pm after which he becomes breathless and restless and eventually succumbed at 04:45 pm on the same day. The cause of death was stated to be as seen from Exhibit A-1.

7. In chief examination, he also stated that due to the injuries sustained in the accident and continued treatment, pulmonary embolism/acute myocardial infarction can be caused if the patient continues bed rest for long. In cross examination, PW-1 deposed on the injuries caused by the accident, as has been mentioned above, which by itself are not serious in nature; even according to PW1. In cross examination, PW-1 admitted with reference to Exhibit A-9 that the victim had a history of mild blood pressure and diabetics. Though, no cardiology check-up was held before surgery, and no heart complaint was detected, cholesterol was found at a high level in the preoperative tests. Hypertrophy with strain pattern as detected in the patient

was deposed to be a symptom of cardiac complaint. It also came out in the deposition of PW-1 that postmortem was not conducted on the deceased since his family objected to it. PW1 also deposed that if postmortem had been done, the cause of death could have been ascertained. It was also clarified that in a patient, with the test results of the nature seen from Exhibit A-9, chances of a heart attack will be more. The mere response to the suggestions made, as to the injuries in the accident could have also resulted in myocardial infarction, cannot be taken as a conclusive proof of the death having been caused by reason of the injuries suffered in the accident.

8. Even according to PW-2, the wife of the deceased, the victim had suffered three injuries on the right leg, a wound and a fracture on the ring finger which was followed by skin grafting at the local hospital and a surgical procedure by the plastic surgeon attached to the higher medical centre and then her husband succumbed to death. PW-2 asserted that there was no advise of a postmortem examination and that

her husband had no ailments, but, the non-healing ulcer caused by the injuries in the accident. We cannot but observe that the statement of PW-2 regarding the health condition of her husband runs contrary to the expert opinion given by the Doctor who was examined by the claimants themselves as PW-1.

9. The High Court has elaborately considered the arguments raised on behalf of the claimants regarding the cause of acute myocardial infarction. The contention that such a condition could occur due to a long bed rest, as deposed by the Doctor PW-1 also was negated on the ground that there is no clear evidence as to such a bed rest having been advised for the patient. Admittedly, the inpatient treatment was only between 29.04.2006 and 03.05.2006 and after that the victim was stated to have undergone outpatient treatment till 12.08.2006. Though, it has been contended that on discharge he was advised bed rest, there is no specific period of bed rest spoken of by the witness or substantiated by documentary evidence.

Admittedly, there was a non-healing ulcer on the right foot which did not respond to the treatment at the local hospital which prompted the reference to a higher medical centre. It was at the higher medical centre that the death occurred after a successful skin grafting procedure. The death could very well have been the after effect of the surgery, given the medical parameters of the patient. It cannot have any direct nexus to the accident which was not conclusively established; the expert medical opinion being otherwise.

**10.** The injuries suffered in the accident, as deposed by PW-1, the Doctor and found by the Tribunal were not very serious. The non-healing ulcer could have been for various causes, especially when the victim was known to be a diabetic, which necessitated the skin grafting procedure. The procedure also was carried out successfully but in the aftermath of the surgery, the patient succumbed to death.

**11.** Merely by reason of the proximity of the accident and the death or the possibility of acute myocardial infarction occurring for reason of a long bed rest, it cannot be



assumed, without clear evidence to substantiate the death having been caused as a result of the injuries sustained in the accident that the death occurred by reason of the accident. There cannot be found even a preponderance of probability, going by the Doctor's evidence. We cannot interfere with the well-considered judgment of the High Court, which though rejected the claim for compensation for death, considered the claim for injuries sustained. We are unable to interfere with the findings of the High Court.

**12.** The appeal stands dismissed.

**13.** Pending application, if any, shall stand disposed of.

..... J.  
**(K. VINOD CHANDRAN)**

..... J.  
**(N.V. ANJARIA)**

**New Delhi;  
September 04, 2025.**