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Three hours in an understaffed Bharuch hospital with dying COVID-19 patients

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Paramedical staff conducting ECG on a COVID-19 patient at the General Hospital in Bharuch, Gujarat.
SHAHID TANTRAY FOR THE CARAVAN

COVID-19



(/covid-19)

Bharuch General Hospital is the largest government-run COVID-19 care center in Gujarat's Bharuch district. It has 70 beds, most of which are attached to oxygen supply. On 16 April, there was only one doctor at the hospital—a 26-year-old junior resident—and five nurses. That day, the hospital had seventy-two patients, almost all of whom had severe COVID-19 symptoms. The hospital staff told me that all private hospitals in the district were fully occupied, leaving the general hospital stretched over its capacity despite limited human resources. "On most days, there are at least two doctors attending to patients in one shift, but the past few days it has only been me," the junior resident said as he shuttled

between wards checking on patients' vitals and adjusting their oxygen flow.

In one ward, an elderly woman suspected of having COVID-19 was fiddling with a dial attached to her oxygen mask. "The patients here are so advanced they can change their oxygen inflow setting on their own," the junior resident said. He bent down and whispered to the woman in Gujarati asking her to stop fiddling with the dial and placed the mask back firmly onto her face. "This is how some of them die as well, trying to fix their oxygen setting on their own. If we had more staff, we could monitor them closely, save more lives."

Bharuch, located on the banks of the Narmada river between the cities of Surat and Vadodara, is one of the most industrialised towns in Gujarat. As of 16 April, Bharuch district's official record showed cumulative numbers of 463 COVID-19 cases and 38 deaths. According to data uploaded on a government website

(<https://vmc.gov.in/Covid19VadodaraApp/HospitalBedsRegionDetails.aspx?tid=1>), there were 1,613 beds across more than 40 hospitals in Bharuch district reserved for COVID-19 patients. On 16 April, the website showed 576 available beds. However, relatives of patients admitted at the general hospital told me that they had spent hours, often even days trying to find beds with oxygen supply before coming to the general hospital. In Jambusar taluk, only the Al-Mahmood Hospital, which is a private hospital (<https://indianexpress.com/article/india/jambusar-taluka-non-operational-amid-pandemic-mansukh-vasava-gujarat-deputy-cm-7272179/>) with 90 beds was treating COVID-19 patients.

[↗ \(https://caravanmagazine.in/health/three-hours-in-an-understaffed-bharuch-hospital-with-dying-covid19-patients/attachment-16968\)](https://caravanmagazine.in/health/three-hours-in-an-understaffed-bharuch-hospital-with-dying-covid19-patients/attachment-16968)



COVID-19 patients at the General Hospital in Bharuch, Gujarat which is the largest government-run COVID-19 centre in the district. SHAHID TANTRAY FOR THE CARAVAN

MD Modiya, the Bharuch district collector, claimed that there are more than enough beds in the district to treat COVID-19 patients. “Further, we are working towards enhancing our capacity. We are turning the girls engineering college to a 400-bed COVID-19 care center and adding a 100 more beds as well as additional oxygen piping to the general hospital,” says Modiya. As for addition healthcare staff, the collector told me that he had circulated a recruitment advertisement for doctors last week, and hoped that more staff members will be hired soon. “For now, we have enough resources, but if the patient load keeps increasing at this rate, I am not sure if we will have enough beds in the future.”

The shortage of healthcare workers at the general hospital left patients’ relatives scrambling to get the staff’s attention as patients got sicker. There were only about thirty confirmed cases of COVID-19, while the rest are suspected cases. The cases categorized as suspected were of patients who had tested negative but had severe COVID-19-like symptoms and those who were still waiting for their test results. “We

have been waiting for five days for our son's test report," Kanubhai Chimar said. His 25-year-old son, Sunil Kanu, was on oxygen support. Chimar stood teary-eyed next to his son's bed. He told me that he had seen so many young men die at the hospital in the few days that he had been there that he feared his son might be next. "It has been almost a week and there is no change in his condition. All day he is on oxygen support, the doctors say they can do nothing else for him," he said.

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COVID-19 patients inside a general ward at the government hospital in Bharuch, Gujarat.
SHAHID TANTRAY FOR THE CARAVAN

The junior resident admitted that the hospital's testing capacity was inadequate. The hospital's laboratory was only equipped to conduct the Rapid Antigen Test. "Since we don't have enough staff to operate the lab, it shuts down at five pm, so we can't test those who are admitted to the hospital after five pm," the junior resident said. The staff had put up a notice outside the hospital to inform patients that samples to be tested with using the Reverse Transcriptase Polymerase Chain Reaction, or RT-PCR test, which is the far more accurate gold-standard test for COVID-19, would only be collected between 12 pm and 2 pm in the afternoon.

These samples were sent to Surat, which is about two and a half hours away by road.

“What is the government doing? How long will they keep us in this limbo, not knowing whether our family has COVID-19 or not?” Bharat Gohi asked. Gohi had come to the hospital from the nearby town of Ankleshwar to admit his wife Karishma. She had been on oxygen support for four days. Karishma’s results took two days and both the RAT and RT-PCR tests declared that she was COVID-19 negative. However, a CT scan revealed white pneumonia-like patches in her lungs. Her oxygen saturation fell to 85 per cent on 14 April, well below the minimum saturation level of 95 percent in healthy adults. Gohi told me that the hospital periodically ran out of oxygen at night, leading to patients’ health deteriorating. “It happened with my wife also,” he said. “The oxygen supply stopped in the middle of the night. It took so long for me to find a staff member who could address the issue and put her back on oxygen.”

[↗ \(https://caravanmagazine.in/health/three-hours-in-an-understaffed-bharuch-hospital-with-dying-covid19-patients/attachment-16970\)](https://caravanmagazine.in/health/three-hours-in-an-understaffed-bharuch-hospital-with-dying-covid19-patients/attachment-16970)



A suspected COVID-19 patient and his attendant at the General Hospital in Bharuch, Gujarat. SHAHID TANTRAY FOR THE CARAVAN

As I spoke to Gohi, a nurse went from bed to bed, measuring oxygen levels on a pulse oximeter that hung around her neck. Gohi asked her for a fresh surgical mask for his wife. Before she could respond, commotion in another ward for suspected COVID-19 patients grabbed her attention. “One of the patients is serious,” the nurse said as she ran ahead of me to where 73-year-old Premanand Bhai Parmar, a retired government teacher, was crashing.

Parmar had been admitted to the hospital on the night of 15 April but had not yet been tested for COVID-19. Parmar’s daughter, Rajeshwari Master, was frantically searching for the doctor while her father gasped for air. By the time the doctor and other staff members began attending to Parmar, he had suffered a cardiac arrest. The junior resident quickly began hooking Parmar up to a BiPAP machine, a portable ventilator used to push high flow oxygen into patients’ lungs. “Ideally, we would have liked to intubate him, but we don’t have the resources to treat him for the trauma he might face due to intubation,” the junior resident. Intubation is the invasive process of ventilation in which a tube is inserted into a patients’ trachea to assist breathing. This process often leaves patients with damage and injury which needs to be treated as well. The junior resident stood away from the dying man but watched him closely. A few minutes later, Parmar passed away. The cause of death was attributed to a cardiac arrest.

Outside the ward, Anand Bhutham asked the staff for a stretcher to carry his uncle in from the ambulance parked outside the hospital. Bhutham had brought his uncle Pasthan Lalu Bhai to Bharuch from Ankleshwar. By the time, he found a stretcher, his uncle had died. He used the stretcher to take the body straight to the casualty building next to the main hospital building.

At least three suspected and confirmed COVID-19 patients died in the three hours that *The Caravan* team spent at the hospital. The staff said that between eight and ten people die at the hospital every day. Yet, official data recorded only one COVID-19 death in the district on 15 April and only one on 16 April. Dushyantbhai Patel, the member of legislative assembly from Bharuch, said that at least 32 people had been cremated at the local crematorium reserved for COVID-19 patients. “This is excluding the Muslim population, who are buried in a separate graveyard. I don’t even have the data for that,” he said.

[🔗 \(https://caravanmagazine.in/health/three-hours-in-an-understaffed-bharuch-hospital-with-dying-covid19-patients/attachment-16971\)](https://caravanmagazine.in/health/three-hours-in-an-understaffed-bharuch-hospital-with-dying-covid19-patients/attachment-16971)



A woman mourning her husband who just died in the COVID-19 ward at the General Hospital in Bharuch, Gujarat. SHAHID TANTRAY FOR THE CARAVAN

“Every day the situation is getting worse,” the resident doctor said. “There are young people, in their twenties, dying here. In the last wave mortality was less, especially amongst young people. This wave is something else entirely. We have written to local administration asking for more staff, but I don’t imagine anything will change anytime soon. Till then we will have to manage with what we have. As he finished his sentence, someone came up to him, asking him to check on a patient who was struggling to breathe.

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