

MVC 214/2024 PW2
Duly sworn on :-13.03.2026

Chief examination by Sri.NBR learned counsel for Petitioner:-

I am the petitioner in this petition and I have filed my affidavit in lieu of my examination in chief, which contains my signatures.

I have produced the following documents i.e.,

- 1). I have produced the recent clinical examination note and it is marked as ExP11.
- 2) I have produced the disability evaluation form and it is marked as ExP12.
- 3) I have produced the inpatient admission record and it is marked as ExP13.
- 4) I have produced the 12 x-rays which are collectively marked as Ex.P14.

Cross examination by Sri.BK learned counsel for respondent No.2:-

It is true to suggest that I am the treating orthopedician of the claimant, not a member of medical board. It is true to suggest that I am appearing as a witness for the claimant, not a court witness.

It is true to suggest that at the time of assessment the fractures had united and the implants i.e., in situ. It is true to suggest that I have advised another surgery for implant removal. It is true to suggest that after implant removal and

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structured physiotherapy function typically improves to certain extent. It is false to suggest that permanent disability should be assessed only after maximum medical improvement with implants in situ and further surgery pending the patient had not yet reached MMI, Disability could not be assessed.

Q My opinion represent temporary bar interval impairment. At best not a final permanent disability.

Answer: It is final permanent disability.

I have produced complete case sheet, operative notes, physiotherapy records, serial X-rays which I have relied on. It is true to suggest that there is no documented complications such as infection, non-union, mal-union or implant failure. It is true to suggest that I have stated in my chief examination affidavit that fractures are united with implants in situ i.e. the bones have united satisfactorily. It is true to suggest that guidelines for evaluation of permanent physical impairment issued by Government of India require measurements with a goniometer, comparison with the contralateral normal limb, averaging multiple readings and using prescribed weightages and the combined values formula. It is false to suggest that I did not document all three aforesaid serial readings for each joint in my certificate. It is false to suggest that I did not record the

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contra lateral limb measurement.

It is true to suggest that I have recorded claimant's knee motion as 0 — 100 degree. I took the loss as 20 percent of normal and then multiplied by knee weightage of 0.35 to get 7 percent.

It is true to suggest that I did not study the job description, travel requirements, or employer accommodations. It is true to suggest that I cannot give an expert opinion on “functional disability affecting earning capacity”; I only gave a medical impairment percentage.

It is true to suggest that assessment relied on the claimant’s subjective complaints of pain.

It may be true to suggest that after implant removal and a supervised rehab protocol (quadriceps strengthening, ankle mobilization), ROM and strength typically improve. It is true to suggest that improvement of knee flexion beyond 100° and ankle mobility after hardware removal. It is difficult to say that my present figures are likely to decrease after the next surgery and rehabilitation.

It is false to suggest that petitioner had not suffered 54 % disability to the right lower limb and 18 % to the whole body. It is false to suggest that petitioner does not required another surgery for removal of implants and does not require

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future medical expenses of Rs. 50 to 60 thousand. It is false to suggest that I have not assessed the disability basing on the guidelines for assessment of disability of 2024. It is false to suggest that I have exaggerated the disability to help the petitioner.

(Re examination nil).

(Computerized my dictation in open court hall.)

R O I & A C,

sd/-

(B.S.JAYASHREE)

I Addl. Dist. & Sessions Judge,
Kola