

Being With My Dying Dad

*The wound on the cover page is not just on his body.
He suffered it. I inherited it.
It will live on my heart until the day I die.
I will never forgive.*



Every night I close my eyes and the same thing happens. One moment I see my dad, alive and laughing. The next, I am back in that hospital, watching Singhvi take him from me. I have PTSD. I will carry this for the rest of my life.



That's my dad on the left. That's also my dad on the right. I will never see him as the man on the left again.

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Preface

My dad signed my birth certificate. I signed his death certificate.

He picked my first outfit. I chose his last.

He witnessed my first breath. I witnessed his last.



One photo I chose to take. One photo I never imagined I would have to.

Mistakes are human. Silence after them is a choice. Suresh Singhvi didn't just make an error, he made a decision to walk

away from it. My father deserved better than that. Every patient deserves better than that.

The goal of this book is not to blame. I am sharing my experience and the trauma I have lived through. I am looking for answers and I am looking for accountability. It took me a year to write this. I have severe PTSD from the trauma I witnessed. The word hospital scares me to the core. For the first six months I could not believe what had happened to me. When I came back to the United States, I went into therapy and stabilized mentally. That is when I realized I had to write this.



This image haunts my dreams. My father, begging me to save him. And I couldn't. I stood there and watched that butcher Singhvi take him from my hands.

Is this the new normal in this country? A doctor can kill someone and feel nothing. He is still actively practicing medicine, probably harming people out of the hundreds he sees every day. No one had the courage, the education, or the platform to speak up. I couldn't hold it in anymore. I am doing my part. Whether this book takes off or not does not matter to me.

Everyone celebrates the doctor who saves hundreds. No one asks about the ones he doesn't. Democracy isn't just majority rule, it's the promise that every single life matters. My father

was your one percent. He mattered. And he was treated like a rounding error.

Losing my father happened in front of my eyes. Every single day I watched his pain and suffering, caused by Suresh Singhvi. I want to document every incident I can remember. This book is that record.

This time, it was my father. Tomorrow, it could be your loved one.

That is not a warning I say lightly. My family is educated in America. I was working at MIT and Harvard at that time. My uncle is a college professor in the United States. We had resources. We had knowledge. We understood medical systems, legal rights, and how to fight. And even with all of that they harassed us. They threatened us. They stonewalled us at every turn.

If they did this to us, ask yourself what happens to a common family in India? A family with no education, no platform, no connections, and no means to fight back? What happens to the mother who cannot quote a law to get her husband's records released? What happens to the son who does not know he even has the right to ask?

The answer is nothing. Nothing happens. And the doctor walks away again.



This was my family. Whole. Happy. Ordinary. Singhvi destroyed all of it and felt nothing. No shame, no guilt, no apology.

I came across multiple families on social media who had gone through something similar. Multiple families with the same grief, the same unanswered questions, the same walls. But no one was ready to take action. They were fearful.

When I decided to speak up, my entire family said no. We don't have the means to stand against a hospital this powerful. We don't have the resources to take on a doctor with this much influence. Your father is gone, they said. He is never coming back. Let it be.

My uncle and I made a decision. We would be that one percent ray of light. The same one percent this hospital thought didn't

matter. We would fight. Not because we were certain we would win. But because someone had to. Because staying silent felt like betraying. Because if not us, then who?

Everyone in my family had a reason to stop. We found one reason to continue: him.

It has been a year since my father passed away. I am still struggling to find closure.

I wake up with it. I go to sleep with it. I will carry what happened in that hospital for the rest of my life. My father lost his life in days. I am still losing mine slowly, every day after.



I tried everything. I contacted Singhvi, Prem Ghai, and others. No response. I emailed the Delhi Medical Council multiple times. No response. I emailed the Delhi Police. No response either. I reached out to every inbox I was supposed to reach out to. Every one of them stayed silent.

While my father was dying, the hospital was sending us payment threats. Not comfort. Not answers. Ultimatums. They used our desperation as leverage. They played every dirty trick to push us to the edge. That is not healthcare. That is extortion wearing a white coat.

Getting documents from Ganga Ram Hospital required multiple emails and quoting actual laws just to pressure them into releasing records that were rightfully mine. They hid the CT scan. They buried reports. They never apologized. They never answered. Every document I received, I had to fight for. If they had nothing to hide, they would have had nothing to hide.

If a family like mine — educated, internationally connected, and aware of our rights — had to fight this hard just to access a dead man's medical records, ask yourself what this looks like for someone who has none of those advantages.



Year 2022 — The school he built. Over a hundred children, a community, a life's work. All of it standing because he was.



Year 2025 — Never imagined I would see him like this. The same man. Three years later. One surgeon's mistake is all it took.

Questions We Are Looking for Answers To

I did not arrive at these questions alone. I consulted multiple healthcare professionals in America, and I worked closely with my dear friend, who works at Newton-Wellesley Hospital in Massachusetts. She is a trained medical professional. She has seen difficult cases. She is not easily shaken.

When I showed her the documentation from Ganga Ram Hospital, she was stunned. She was in tears. The gaps, the omissions, the missing records, the incomplete surgical notes. She could not believe that this was the standard of documentation behind a man's death.

What follows are the questions we arrived at together. They are not born from grief alone. They are medically grounded, professionally reviewed, and they deserve answers.

1. My father's HbA1c was 8.4. The medical standard clearly states not to operate if it is above 7. Was this a decision driven by greed?
2. He was cleared for surgery from a diabetes perspective yet his diabetes was clearly not well controlled. How did that clearance get signed?

5. A chest X-ray was done at 3pm. By 4:30pm he was intubated. The timeline makes no sense. When exactly was the decision made, and when exactly did they act?
6. According to their own documentation, January 11 appears in the intubation notes and January 12 is when they claim the re-exploratory surgery was performed. Did they falsify the documentation or did they wait so long to act that he had to be intubated before they could even operate?
7. The OT notes themselves state that the site of the previously repaired serosal tear gave way, forming an ileal perforation. They knew there had already been a complication. The patient was deteriorating. Why was a CT scan still not ordered?
8. The OT notes are missing how the perforation was repaired. There is no mention of the surgical approach, the type of sutures used, the size or exact location of the tear, or whether a leak test was performed after the repair. These are not optional details. They are the record of what was done to my father's body.

Operation :- Diagnostic laparoscopy + Open adhesiolysis + Open cholecystectomy with CBD exploration

Surgeon :- Dr. Suresh Kr. Singhvi

Assistant :- Dr Nitin Kaushik

Anaesthetist:- Dr. Ajay Sirohi

Operation Start Date/Time:- 9/1/2025 18:30

Operation End Date/Time:- 9/1/2025 21:12

Notes:-

No mention of serosal tear

Scar of previous surgery in the right iliac fossa seen

Diagnostic laparoscopy performed through supra umbilical port

Dense adhesion seen between small bowel, omentum with the anterior abdominal wall extending from upper mid abdomen to pelvis

Some adhesion present between gall bladder, inferior surface of liver with omentum and duodenum

Small contracted tubular gall bladder seen with dilated cystic duct ,which was found adhered with the CBD

CBD found dilated , size 15 mm

Cbd stone found at the CBD-CHD junction extending upto the both right and left hepatic duct filling like a cast

No other hepatolithiasis seen

On opening CBD pus mixed with bile seen draining with plastic stent in situ

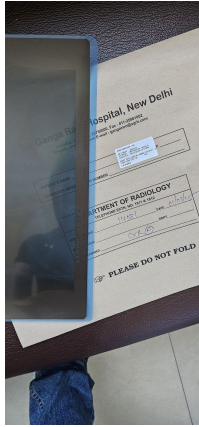
Cholecystectomy done with suturing of the dilated cystic duct with PDS 4.0

CBD exploration done stone removed and stent kept insitu and Choledochotomy closed interruptedly with PDS 4.0

9. Singhvi does not mention his own role in the initial bowel tear in the OT notes. That omission is not accidental. That is a cover-up.



This isn't surgery, this is butchery



This is someone else's MRI report with someone else's name on the label. They handed it to us and claimed it was my father's. I caught it. They replaced it immediately. I took a picture before they could.

10. The CT report we specifically requested was never provided. Another omission. Another wall.
11. If the serosal tear was already known, why was my father not immediately placed on broad-spectrum antibiotics? A known perforation risk, a deteriorating patient — and no antibiotics. Why?

Who My Father Was



Year 2022 — Dad, Grandmother and myself. We were so happy.

My dad, Gurdeep Singh Saluja, was a loving father, husband, brother, son and an integral member of the community. We had a loving relationship. I was always closer to him than my mother.

He was the kind of guy full of energy. Always busy, always running around doing errands, fixing things, never afraid to take chances. He started multiple businesses on his own without

any external help. The kind of guy who is not afraid to get his hands dirty. He grew up poor. My father wasn't very formally educated but he knew enough "that hard work will get you somewhere." And it did.

His primary business was event management and catering, "Saluja Tent House." He took over what my grandfather had started, organizing events, beginning small with parties and weddings. Over the years my father built a small but quality clientele of schools, corporate companies. The business was booming. We didn't have to advertise or do any marketing. People knew him by name. We had events booked a year in advance.



Saluja Eclat Visionary Public School — the school he built from nothing. His pride. His purpose. His life's work.

I have rarely seen my father take a day off for himself. The business operated seven days a week. Even when he was sick, the work continued.

You could spot him from across a room. He had a strong personality. Always dressed in professional attire: a shirt, pants, and the biggest turban. A thick beard. A strong voice. Masculine energy. In his line of business, that mattered. You had to command respect just by standing there, and he did. He was always carrying a set of keys, always on the move. He had a motorbike and would be off in a second — “oh let me just go get that real quick.” And his phone. His cell phone never stopped ringing. The first number I ever memorized as a kid was his 9810788565. I never saw that phone sitting idle. He always picked up. No matter what. He took calls while driving, while eating, while in the shower. That phone was an extension of who he was — always available, always present for whoever needed him.



*2022. My father, always on the go, scooter ready, phone ringing.
That was every day of his life.*

He was especially protective of my sister Mehak. He grew up with an old school mentality and carried it proudly. Daughters need to be protected, kept safe, kept thriving. He made sure to drop her to school and pick her up himself every single day. That was non-negotiable. And even on his death bed, when his voice had been reduced to almost nothing by the ventilator, his first concern was not himself. In his faintest voice he would pull me close and say we need to take care of Mehak. Make sure she gets admitted into a good school. Where is she. Don't let her stay alone. Tell her to go stay with the extended family. That was my father. Dying, and still being a dad.

Looking back, I had a wonderful childhood because of him. He was always there.

My favorite memory. I have many, but one I keep coming back to is from 2022. I went back to India after five years away and I took him on a small trip to Pune. He had never been on a plane before. When we boarded and the plane started its run down the runway, picking up speed, I looked over at him. His eyes were wide. There was this big smile on his face that he couldn't contain. At that moment I felt so proud. That was everything.



Dad's first time on a plane — Pune trip, 2022

Another one: teaching me how to drive. I was the first in my entire circle to know how to operate a vehicle. No automatic

transmission. Just a manual. He would scold me, yell at me, and then in the same breath teach me with patience and love. That's how dads are. They push you because they believe in you.

My father was a great man. He was young — 54 years old. It was my dream to one day bring him to the United States, to show him what I had built, what I had become. I wanted him to see it with his own eyes and feel proud. That dream is gone now. One incident, one act of negligence, destroyed it forever. My family is shattered. I carry PTSD from what I witnessed. All of it, because of one doctor's mistake and his refusal to be accountable for it.

I cry now thinking about going back to Delhi. Who will come to pick me up when I land at the airport?

Whenever I went back to India I would tell him, don't bother coming, don't make the trip. He never listened. He would drive three hours through Delhi traffic, wait in the pickup line for hours, deal with the entire chaos just to be the first face I saw when I walked out of those doors.

That is the kind of love fathers have. They won't say it out loud. But you know it by their gestures.



Year 2022 — Dad and his siblings. He loved to take everyone out.



I was born in this house. My father was raised in this house. One doctor took all of that from me. I am now scared of my own country, my own streets, my own house.

January 8 and 9 — The Phone Calls

On January 8, my dad texted me on WhatsApp asking me to call him. I was at work. When I called back his voice was strong.

“I came to the hospital for surgery. Everything is settled. I will call you once I recover.” We exchanged greetings and prayed everything would go well.

A few months earlier in November, my father had an episode of jaundice. It was treated and he came home. The doctors at Ganga Ram Hospital advised him to follow up with an elective surgery to remove his gallbladder. They assured him it was a minor procedure, he would be in and out within a day or two.

My father planned it deliberately. February is the peak season in the events and catering business. He wanted to get this done early, recover quickly, and be back before the busy season. That was his thinking. So on January 8 he went in after all the consultations. A simple gallbladder removal. He would call me when it was done.

On January 9, around 4 a.m., my mother called me. Her voice was serious. She said only one thing.

“Talk to junior doctor, Nitin.”

Half asleep, I heard him say, “Something isn’t right. We have to operate urgently.” No explanation, no details. Just, “We have to do this to save his life.”

I was numb. I didn’t know how to process this. I just said, “Do what you have to do.” They took him into the Operating Room.

For nearly a month after that, every day was anxiety. My dad was on a ventilator. Even the word itself is terrifying. I was two months into a new job, barely functioning. During my commute sitting on the train I would stare at his pictures, worried, helpless, trying to understand what was happening.



January 8th he called me to say he was at the hospital for treatment.

January 11th this is what I saw on a video call. Three days.

The Damage Control

Singhvi (the surgeon) realized things had gone wrong but he never admitted it. He would call my uncle in the United States on WhatsApp. He never texted. Always calls, because calls are encrypted. No paper trail.

He would start politely. *Namaste sir, Pranam sir.*

My uncle is a healthcare professional. He immediately recognized the pattern. In India, doctors have massive egos. When a surgeon suddenly becomes pleasant and overly reassuring, it is damage control. That turned out to be true.

Singhvi would say things like, “Gurdeep Ji is doing very well. His oxygen levels are improving. He will be off the ventilator soon.”

I have all the call logs and voice recordings.

Singhvi has not responded. He is still practicing medicine today.

The Journey Back

I could not handle the daily anxiety anymore. I decided to take the flight to India.

On Friday January 31, 2025 I left my apartment in Providence. The route was Providence to Newark to New Delhi.



Leaving my apartment in Providence, January 31, 2025.

It was a long flight. I was sitting in the very last row. Next to me was a middle aged American guy traveling to India to meet up with a travel group. We exchanged greetings, had some small talk, shared a drink, talked about life. He asked what was taking me to India. I told him. You find yourself telling

strangers things in those moments that you can't say to the people closest to you.

I landed in New Delhi on February 1, 2025.

When we were deplaning I had a small exchange with the flight attendant. She asked me what I was here for. I teared up. Couldn't hold it. I told her everything. She was shocked but very supportive. She hugged me and said be brave, you are a good son.

I needed to hear that. I didn't know yet how much I would need to hold onto those words in the weeks ahead.

Day 1 in India

I arrived in Delhi on Saturday, February 1, 2025, at 9:51 p.m. After immigration and baggage, I saw my aunt and uncle. We hugged and cried. It had been two years since I last saw them.

The plan was to go home and rest. I couldn't wait. I asked to go straight to the hospital.

It was around 11 p.m. when I entered my dad's room. Seeing him on that bed broke me. I never imagined this day.

Every NRI kid carries this fear. What happens if your parents fall sick while you are thousands of miles away, juggling work, immigration stress, and life?

His feet were wrapped in DVT pumps. I touched them. He woke up.

"Do you remember who I am?" I asked.

"*Mera beta aa gaya,*" he said.

His voice was extremely weak. The ventilator had damaged his vocal cords. He wasn't fully conscious. He kept saying things like, "When I was in the other room, these *madarchods* didn't give me water. I was crying for it."

He didn't even understand what had happened to him.

I stayed until 1 a.m. It was a shared room. We left to give the other family their space.

Day 2 — Seeing the Wound in Daylight

I reached the hospital at 8 a.m. My dad was happy to see me. Oxygen tubes in his nose. Pain everywhere.

In daylight his condition shocked me. The stitches were opening. There was heavy drainage. His hands and feet were weak.



This was the condition of the wound.

I messaged the doctor. He said he would meet me during morning rounds but did not come. Later around 7 p.m. he was there. I had spoken to my uncle beforehand about what to ask. The doctor's words were, "Your father is out of danger and is recovering very well." I asked, "Looking at his condition, won't he be bed-ridden?" He replied, "We will start aggressive physiotherapy soon and before you know it he will be completely normal. This sort of procedure is not new, and once his body heals we will do another small procedure to re-connect his intestines. He will have a healthy, normal life and will be completely able to walk, navigate, and go to work."

His words were utter lies but very reassuring. It was as if that crook had mastered the art of lying. He said in Hindi, "*Aap bhagwan pe bharosa karo, as a doctor we are doing everything right. I can guarantee you that he will be alright. Hum log to yaha aapki sewa ke liye hai. Ye phone aapke liye hi hai, ye phone 24 x 7 chalu rehta hai. Kabhi bhi call karo.*"

While I was getting settled the pressure from hospital administration started. Every morning two people would carry a register showing the previous day's bill for medicines, stay, and hospital staff. This is when the harassment began. "Sir, *aapka bill badh raha hai.*" "You need to deposit some amount to keep continuing the treatment." When I asked what they had done to our patient they replied, "Sir, we don't know anything about that. We are financial staff, you can talk to your doctor. We have no say in this. We are merely doing our job." And then they moved on to the next patient.

A few hours later the dietitian came in. She looked at her charts, had a brief word with my mother about how much he ate by mouth. Okay, we will stick with the same diet. And left. The whole interaction was less than three minutes.

The Wound

Thursday, February 6, 2025 — The Wound Dressing

Seeing that wound. Man oh man, it scared me. I had never seen anything like this in my life.

Initially everything was covered in bandages so I could not tell, but when it was exposed I was in utter shock. I couldn't even imagine the pain my father must have been going through.



The open wound after the dressing was removed, February 6, 2025.

The junior doctor Prem Ghai came in. He was a resident. Always busy on his phone. During the dressing procedure he would have the phone on his ear while working. There were multiple occasions where I caught him touching his phone with the same surgical gloves he was using on my dad. Anyone with basic knowledge knows a cell phone carries thousands of bacteria. How you can use surgical equipment alongside it is beyond me.

The metal stitches could not hold up anymore. There was so much fluid drainage that the bandages would get wet within minutes and they would have to change the dressing again.

The nurses were overburdened. There was a nurse call alarm in the room but it would take on average 30 minutes for someone to come.

When the doctors came in, Prem Ghai wanted me and my mother out of the room. I refused. I said I will stay here and I need to know what is going on.

From the conversation I overheard, they said the word *necrosis*. The doctors said that when he was intubated they had to put him on vasopressors to keep his heart rate up, and that caused the necrosis. This was the first time I was hearing this.

After a brief period a plastic surgeon came in, looked at the wound, and said nothing to us. When I asked for an update he said you will have to talk to your doctor, I was just told to look at this. His attitude was rude. I understand doctors are busy but the least they can do is talk to a family with some compassion.

They did the dressing but it barely survived a day. It started leaking heavily. We would call the nurses and get no response. I couldn't see my father lying there in pain with wet bandages. I would put on the rubber gloves and clean it up myself.

Wednesday, February 12, 2025 — The VAC Wound Dressing

Singhvi came in to follow up. He told me we will do a VAC assisted wound closure. He said this is done by an external company, not part of the hospital. The staples are no longer holding and we need this.

The guy who showed up was named Sahil. He was not a medical professional at all. He looked like a guy off the street. Bike helmet in one hand, the VAC machine in the other. Probably just came off his motorcycle. The VAC was packed in a plastic bag but this is not how you carry medical equipment.

He looked at the wound and said the portable vacuum that comes with this doesn't have enough suction for a wound this large. So they decided to use the VAC connected to the hospital bed instead.

Then came the money conversation. Singhvi quoted us Rs. 8,500 per dressing. We asked why it wasn't added to the hospital bill. He replied, "We can do that but the hospital will charge you three times the amount. This is my guy, I know him well, I will talk to him about discounts." The price became 8,000, then

settled at 7,500 after a lot of haggling. I didn't have the cash at the time. We struggled to arrange the funds.

They kept pressuring us that this dressing was the only way to save him. So we agreed.

I was in the room the entire time watching. I am not a medical professional but even I could see what was wrong.

Sahil did not wear gloves when he opened the package. He only put them on after the nurse pointed it out. While cutting the sponge he placed the scissors directly on the bedsheet. And on at least two separate occasions I overheard them after finishing the dressing whispering to each other, "*Oh, culture lena to bhul hi gaye. Koi baat nai, aaghi baari le lenge.*"

They forgot to take the culture sample. Twice. And just moved on.

Thursday, February 13, 2025

The vacuum connected to the bedside was riddled with issues. The pressure gauge was broken. There were no standards on how much pressure it should be running at — it was just guesswork. When the foam on the VAC started to shrink they called it good. That thing literally sucked blood and discharge out of the wound. You could see it with your own eyes, blood getting pulled up from the stomach wound. It was painful to watch.







The vacuum would drop suction for no reason. The bandage would swell up. We called Sahil and his attitude was rude. “I will come after three days. This is not the kind of service we provide. We are only doing this because Singhvi said so.”

Hearing that I got mad. I called him back and yelled. “Sahil this is not the right way of talking or working. This is highly unprofessional. Someone’s life depends on this.” After five minutes he became compassionate and promised to visit. He came later that evening.

The nurses had no idea how to deal with any of this. Everyone was trying to get off their responsibility. Their response was this VAC is not our standard procedure so we don’t know what to do. You can sit by your father and regulate it yourself. We have too many other patients.

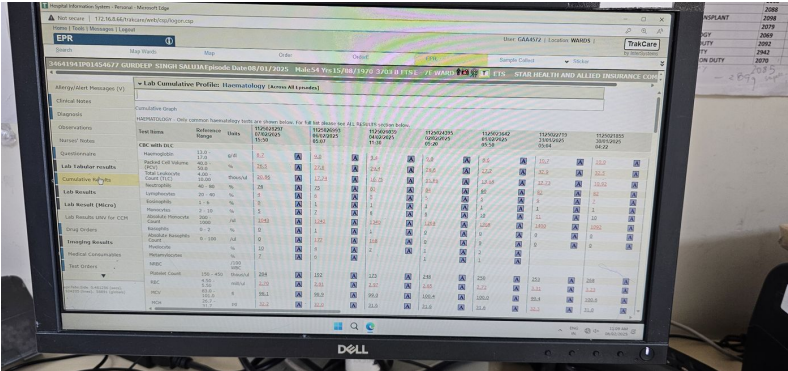
While all this was happening there were also visits from physiotherapists, a dietitian, and a mental health counselor.

I was regularly in touch with my uncle in the US. When I asked to see the daily test reports the nurses told me attendants are not allowed to see them. I let it go the first time.

That night at my aunt’s house something didn’t feel right. I was restless. I googled it and found that in India attendants are legally allowed to see patient reports. Patients have a legal right to their medical records. That gave me armor.

The next day I went in and demanded the reports. Same response. This time I held my ground. I said in plain English it is my legal right to see these reports, call your supervisor if you want. I think being educated and from the US carried

some weight. The nursing supervisor came and showed me the reports.



No electronic records — this is how one has to look at results.

The amount of red in that report was alarming. His TLC count was off the charts. They don't do electronic records properly — everything was on a small computer screen. I took photos on my phone to send to my uncle. Zooming in and out trying to read the numbers, the situation was tense, we were just glad to finally have access.

My uncle noticed a lot of red flags. He asked about my father's diet. I had no idea what they were feeding him through the Ryles tube. It was some white mixture, dropped in twice or three times a day.

When the doctor came in I asked him directly about the diet. Singhvi said the dietitians decide that, they make a blend based on patient needs. He seemed completely disconnected from it. A couple hours later the dietitian came in. I asked her what exactly he was getting, what were the macros. She said she

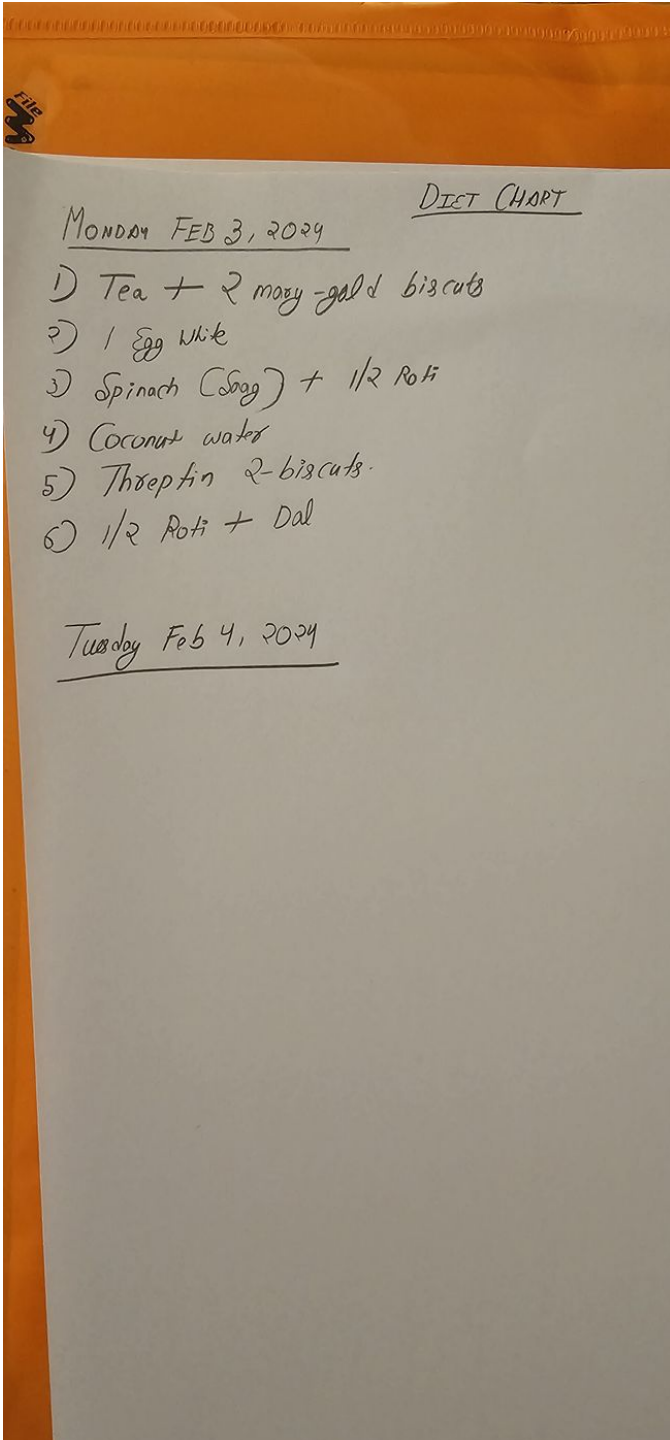
would ask her supervisor. The supervisor came and told me it was a blend of dal, rice, chana, milk and water. I asked for the exact breakdown — carbs, protein, fat. She said “200–300 grams hoga sir.”

I rolled my eyes. I said if he is protein deficient and you are doing albumin transfusions every day shouldn't we be giving him a protein rich diet. Her response was I don't know, I will talk to the doctor. Next day Singhvi comes in and says I have informed the staff to give him a protein rich diet.

I was starting to seriously question everything.

I spoke with my uncle and we decided to take matters into our own hands. Food is a healer. We started tracking everything we fed him every single day. Boiled egg whites. My aunt suggested making *kharoda*, a meat soup that is heavy on protein and very nutritious. She cooked it overnight and I brought it to the hospital the next morning. We kept a log of everything that went into him.

If the hospital wasn't going to take it seriously, we were going to do it ourselves.



The GI Bleeding

During my time in that hospital there were at least 5 to 6 occasions where there would be blood in the stoma bag. This is a critical situation. We would alert the nurses, they would escalate to the doctor, and the response every time was the same.





We are doing continuous pantocid infusions to keep his stomach settled. We know this is worrying but we cannot do an endoscopy — his body is too weak and we cannot give him painkillers.

That was it. That was the answer. Every single time.

The Blood Bank

My dad needed regular blood transfusions. Hospital policy was that during business hours the attendant has to go collect the blood themselves. The staff would test the blood type, prepare the document, and hand it to us. Either my mother or I would have to go to the blood bank.

The blood bank was packed. The woman at the front desk had the rudest attitude I have ever seen from someone working in a hospital. “This is our lunch time, come back after an hour.”

I told her people are literally dying upstairs. I need blood right now.

Even through all of this chaos we remained quiet. These are healthcare professionals, we thought. They know what they are doing. I just wanted my dad out of this mess.

But every time the GI bleeding happened my hopes got shattered. It is like holding desert sand in your fist. The tighter you grip, the more it slips through your fingers. Every small sign of progress, every moment where you let yourself believe things are turning, and then the blood appears again. That

emotional rollercoaster every single day breaks a person down in ways that are hard to describe.



The only thought I had was God, save my dad. Take whatever you want, but get us out of the hands of these butchers.

The Financial Pressure

There were at least six occasions where Singhvi called me to his office saying he wanted to update us on my dad's case. Those meetings were less about updates and more like pressure sessions. He would start nicely. "How are you doing? Gurdeep Ji is making good progress. His voice is now strengthened. Slowly we will start physiotherapy and try to make him sit on a wheelchair." Looking back it was an utter lie. Then casually he would bring up, "By the way, your bill is piling up. I know this is very hard on you but these are hospital rules. I don't have a say in this. We are doing everything we can to minimize the cost."

He seemed less like a doctor and more like a finance person.

I use the word *pressurizing* very carefully. My father's condition was so bad he couldn't move. Completely bedridden, wound wide open. He would complain about excessive pain and sometimes scream and cry saying it would have been better if I were dead. I can't take this pain anymore.

Singhvi would come in on rounds every other morning, walking in with a group of 6 to 7 people. Two junior doctors, a resident nurse, someone from the stoma clinic. He would spend a few minutes, ask the junior doctor to read out the previous day's notes and current medications, think for a moment, then decide what to change. No data driven thinking. Okay what's his

hemoglobin — yeah let's do a blood transfusion. Do one thing, add an albumin while we're at it. And then, "Your bill is piling up, please pay, I am getting pressure from administration."

Then he casually said Gurdeep Ji is stable enough to go home for the next few months. There is no new treatment, just the same wound care. Ganga Ram has services where a nurse and full time attendant can come to your house for cheaper than what the hospital charges.

I ran this by my uncle in the United States immediately. His response was absolutely not. Your father needs continuous blood transfusions. A few minutes delay and we might lose him. He strictly advised against it.

When I took that argument back to Singhvi he said oh no, we can have an ambulance arranged within minutes.

When we declined, he came up with another plan. "I can arrange an apartment near the hospital, 10 to 20 minutes away. You will have a nurse, an attendant, everything your father needs. In case of emergency you call an ambulance." My father was so fragile he couldn't even move in his bed.

I have seen my father cry in front of my eyes. His core was completely torn apart. When I showed pictures of the wound to friends in the United States their reaction said it all. This is not the work of a skilled surgeon.

Singhvi tried everything to get us out of that hospital. It seemed like he just wanted my father off his record so his statistics on paper looked clean and he collected his money.

The General Ward Scam

I use the word *scam* specifically because after my dad passed away and I started doing research, I came across several posts on social media where other families had reported the exact same thing.

The scheme works like this. When the bill gets high enough the doctor will say — Ganga Ram is a charitable organization and we have charity beds where treatment is free and you only pay for consumables.

We got pulled into the same trap. Our daily bed charges were around Rs. 12,000. The daily pressure was getting overwhelming. They came every single day. Your bill is piling up. The longer you wait the more it grows. The meter doesn't stop.

Singhvi would sugar coat it. “If you move to the general ward I can promise the care from our team will remain exactly the same. I am doing this to help you and your family.” And then he added, “Your father will need another surgery to reconnect the intestines and if you're in the general ward I will do it free of cost.”

Our bill was close to 32 lakh INR. Singhvi managed to convince us. That was the worst mistake of our lives.

In the administration department there was a guy named Satendra Katoch. That office was a power play. I watched at least 3

to 4 families come in and practically beg for mercy while I was sitting there. Katoch would make you wait outside while pretending to be busy on his computer. He was on his phone the whole time, hiding behind the screen. When he finally spoke to you his words were harsh. "I have to run this hospital. The bills you pay keep this place running. You always have the option to take your patient somewhere else if you cannot afford the facilities at Ganga Ram."

Sitting in that room watching them laugh and make office jokes while families outside were falling apart showed me exactly what this place was. Their everyday routine. Zero empathy. All they cared about was the money.



Families stand in line for hours for billing at 11pm.

Daily Incidents

There were so many times the stoma bags would leak. My dad would be covered in his own filth. As a son this was the hardest thing to witness. I couldn't just stand there. I would put on gloves and clean the stool myself.

Laying in that bed for so long my dad developed bed sores on his hip area. The anti-bedsore mattress the hospital provided was broken. The air would leak out and it could not hold pressure. I have pictures of it literally taped together. Under my father's weight it could not hold the air inside. Because of this my father developed severe bed sores. When I saw his back while cleaning him I was shocked. Major patches of raw damaged skin.



It was our attendant who first noticed the mattress was failing. That was the moment it clicked for me. When I told the nurses they said this is what we have in stock, the rest are occupied. I spoke to the administration — same response. I spoke to Singhvi — same callous attitude, I will talk to the nurses. Until I got fed up and yelled. Three days later they finally replaced it. That gave my dad some relief.

Three days. For a broken mattress that was causing a bedridden man to develop open sores on his body.

My father also complained constantly about pain in the penile area from the catheter. When I asked the ward boys about it they said he has been bedridden a long time but there is an anesthetic gel we can apply to provide some temporary comfort.

Nobody offered this on their own. Nobody checked on it. We had to ask.

There were several occasions in the middle of the night where I had to apply the anesthetic myself. I couldn't see him lying there in that pain and agony. So I did it. A son applying anesthetic to his father in a hospital bed at 2 a.m. because the staff wasn't there.

These incidents on their own might seem small. But this is what hospitalization looks like from inside that place. This is how they treat people. This is the system.

The Transfer and Three Days Later

Looking back now I understand what happened. In order to force us to pay the outstanding bill Singhvi came up with a plan. He told us we will keep your father in the same room, same bed, same level of care, but your billing will stop. Just close the existing bill and we will take care of the rest.

We walked straight into that trap. I blame myself for this. I was already thinking ahead, thinking my dad may not be able to work for the rest of his life, that even after this hospitalization we would be spending lakhs on his care. When Singhvi offered this I thought he was being compassionate. I thought he genuinely wanted to help a struggling family.

We paid the bill. The file was closed on March 7, 2025 at 12 p.m.

March 8th things seemed okay.

March 9th at 7 a.m. the phone rang while I was sleeping. No context, no explanation. Just — we need to move him to the ICU immediately. He is not responding. We need to start dialysis and may need to put him back on a ventilator.

I told them give me 30 minutes to get there. They said okay. Ten minutes later another call, this time from the ICU doctor. We need to do this now.

I still remember that drive from my aunt's house. She was sitting next to me. I was behind the wheel. Both of us shaking, crying, not speaking.

When we arrived Singhvi came in and said from last night we have been taking measures to correct things. He is in sepsis. He is on inotropes and needs to go on a ventilator. His kidney functions have stopped — no urine output for the last two to three hours. We need to move him to the ICU now. It will be difficult for him to make it even if we take him to the ICU, but we can try.

I called my uncle in the US immediately. He asked to speak directly to the doctor. The moment he heard the words *sodium bicarbonate* my uncle said to me quietly — we are losing him. Let them do what they need to do.

This was a man who came in for a routine gallbladder removal.

Singhvi then did what he had done throughout this entire ordeal — he offloaded everything to someone else. This time to his junior, Shashi. Her words were, if we put him on a ventilator his body is too weak to handle it. He will die during the intubation.

I didn't know what to say. I was terrified.

Then another ICU doctor, Shrinivasan, looked at me and said — do you want him to die in peace or do you want to see him suffer more.

Those were the words. That was the choice they gave me.

My Dad's Final Hours

My dad was unconscious, deep in sepsis. But he was still moving his fingers. Trying to touch his face. Eyes closed, no response, but something in him was still fighting.

I remember every detail of that room.

The ICU noises. The machines. My dad struggling, dying in front of my eyes and nothing I could do about it. Relatives filling the hallway, everyone with moist eyes, everyone looking at me for answers I didn't have. The pressure of that night was unlike anything I have ever felt. My brain stopped functioning. I just stood there. Still. Thinking — he walked into this hospital hoping for a better life. He had a plan. February is peak season, get this done early, be back on his feet. That was the plan.

This is what happened instead.

Then they brought me documents to sign. The papers stated that we are choosing NOT to put him on a ventilator and that we are going against medical advice.

Let me be very clear about what was happening in that moment. Singhvi himself had instructed the ICU staff not to intubate him. He told us to our faces that the ventilator would kill him during intubation. And then in the same breath he handed us paperwork saying we are the ones refusing medical advice.

My dad used to say some people are two faced snakes. Standing in that ICU holding those papers I understood exactly what he meant. On one side Singhvi is telling me your father cannot survive intubation. On the other side he is making me sign a document saying I am the one who chose to walk away from treatment.

I signed it. I didn't know what else to do.

March 10th, 7:15 a.m. The call came from the ICU nurse.

He is no more.



This is the last image I have of my father alive. To this day I cannot close my eyes without seeing this room, these machines, his face. I was standing right there and I could not save him.

Holding His Dead Body

I walked into that ICU and saw him lying there. My dad. Still. The cry that came out of me I cannot describe. My heart was full and empty at the same time. I didn't know what to do with my hands, with my body, with any of it.

The ICU nurse came to me almost immediately. She needed me to sign the death certificate. And then she said — you need to bring clothes to dress him or pay 600 rupees for the hospital gown if you want to take him in that.

She told me his stomach wound was still completely open. We can suture him up she said, but do not open the cloth wrap on his stomach when you get him home. It will bleed everywhere.

In our Sikh tradition before cremation you bathe the body. You tie a turban so a man can go with dignity toward his final journey. We couldn't do any of that. There was no time, no space, no dignity offered to us in that place.

Instead I was running to the billing floor to pay 600 rupees so I could take my own father.

I didn't want to say goodbye to him in a hospital gown. So at 8 a.m. on March 10th I ran out into the chaos of Delhi. Crying, weeping, sobbing, sweating, running full speed through the streets. The first clothing shop I saw I ran in, grabbed a

white kurta, paid, and ran back as fast as I could. I handed it to the staff. They dressed him in it.

I don't know who arranged the ambulance. I don't know how the rest of those hours unfolded. My mind was not there anymore.

When my dad died Singhvi came into the room. He stood there for two minutes, looked at my dad's body, and walked away. My aunt stopped him. She said you have left us empty handed. He said nothing. He just left.

That was it. That was all we got.

The Paper Trail

After my dad passed away and I started going through the documents, I began to understand the full picture of what had been done to us.

When we paid the bill on March 7th and they moved my dad to the general ward, they closed the existing file. On paper it read — patient discharged on following advice. That was the official record. Discharged. Following advice. As if my father walked out of that hospital on his own two feet.

Then they opened a brand new file in the charity ward. A fresh admission. Patient came in with the following conditions. A clean slate. No trace of what had happened in the weeks before. No record of the open wound, the GI bleeding, the broken mattress, the VAC machine running on guesswork. Just a new file, a new start, a new set of numbers for their records.

When I questioned this they said we have to do this because this is the procedure.

This is how hospitals like Ganga Ram maintain their success rates. This is what they show the government. This is how Singhvi's numbers stay clean. My father's death does not appear as a failure in their system. On paper he was a discharge. A success. Following advice.

And the cruelest part of all of it is the document they made me sign in the ICU. The one that said we are choosing not to continue treatment. That we are going against medical advice. My signature. My name. His son.

Singhvi told us with his own mouth that putting my father on a ventilator would kill him during intubation. He instructed the ICU staff accordingly. And then he handed me a pen and made me sign a paper that said this was my decision.

That document exists. My signature is on it. And it will follow our family forever while Singhvi walks free.

He never acknowledged what happened. Never apologized. To him this was all a normal part of the process.

GALI NO-4, L R COLLEGE,
SAHIBABAD GHAZIABAD, UTTAR
PRADESH-201005 UTTAR PRADESH

SIR GANGA RAM HOSPITAL, Rajinder Nagar, New Delhi 110060

	1348908.46	1348908.46
128Medical consumables		
	204352.42	204352.42
129ECG Charges		
	1100.00	1100.00
130Nuclear Medicine Laboratory Charges		
	1340.00	1340.00
131Physiotherapy charges		
	35860.00	35860.00
132Ultrasound Charges		
	1070.00	1070.00
133X Ray Department Charges		
	12120.00	12120.00
134Nebulisation charges		
	3200.00	3200.00
135Ventilator charges		
	35860.00	35860.00
Total		3200582.00

He walked into Ganga Ram Hospital for a routine surgery. They told us two lakh, maximum. We walked out with a bill of 32 lakh rupees and my father's dead body.

Coming Back to America

I came back to Boston empty.

I don't know how else to describe it. I walked back into my apartment and everything was exactly where I had left it the night of January 31st when I rushed to pack a bag and fly home. Same coffee mug. Same jacket on the chair. Same life. Except nothing was the same.

I went back to work because I didn't know what else to do with myself. Sitting on the same train, the same commute where I used to stare at his pictures during that month of anxiety before I flew back. Now I stared at the same pictures and he was gone.

The PTSD is real. I don't use that word lightly. It shows up in small moments. A phone ringing at an odd hour. The smell of a hospital. Someone mentioning Delhi. I am back in that room instantly. Back in that ICU. Back on that drive from my aunt's house, shaking, behind the wheel.

I tried everything to find closure through the system. I contacted Singhvi. No response. I emailed Prem Ghai. No response. I filed complaints with the Delhi Medical Council multiple times. No response. I emailed the Delhi Police. No response. Getting the medical records out of Ganga Ram Hospital required multiple emails, legal citations, and pressure just to get documents that were rightfully mine.

Every door closed. Every institution that was supposed to exist for people like my father, for families like mine, stayed silent.

So I wrote this book.

Not because I think it will fix anything. Not because I expect Singhvi to suddenly develop a conscience. I wrote it because my father deserved to have his story told. Because there are other families sitting in that hospital right now, in that same financial pressure trap, watching that same damage control routine, and they deserve to know what they are walking into.

My father was a great man. He built something from nothing. He drove three hours through Delhi traffic just to pick me up from the airport. He stood on a runway for the first time and smiled so wide I could feel his joy from the seat next to him. He wanted to see America. He wanted to see what his son had built.

That dream is gone. But his story is not.

I am still looking for accountability. I am still looking for someone to say — steps have been taken so this does not happen to another family.

Until that day comes I will keep talking.

I love you, Dad.

Why was he not checked when he was screaming and crying in pain? A delay and a misdiagnosis killed him. This

could have been avoided. If the surgeon had done his job my father would be alive.

It was their mistake. So why did they come to us every single day asking for money? I have since spoken to multiple families who went through the exact same thing at the same hospital. Today it was my father. Tomorrow it could be yours.

I have been diagnosed with PTSD. I am in therapy because of what I witnessed in that hospital over those 60 days. My entire family has shattered. We are each carrying something we did not ask to carry and cannot put down.

The legal system is slow. The hospital has money and power. But we will not pull back. We have a lawsuit filed. This fight will continue until my last breath.

I hope the Indian judicial system does the right thing. We will also be publishing a poster and paper in Indian and American journals. The world needs to know.

About the Author

Prabhjyot Singh Saluja is a first-generation immigrant living in the United States. He was born and raised in New Delhi, India. He wrote this book in memory of his father, Gurdeep Singh Saluja, who passed away on March 10, 2025, following a routine gallbladder surgery at Ganga Ram Hospital, New Delhi.

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