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Jacob Mathew v State of Punjab: Reassessing Criminal Liability for Medical Negligence in Contemporary India

Introduction:

Medical Negligence is a unique area of law that lies at the crossroad between the criminal, tort and regulatory framework for healthcare providers. The expectation is that a professional must exhibit a reasonable level of skill and due care when providing patients with treatment; however, not all bad outcomes for patients are considered negligent. When a physician is charged with an allegation of negligent conduct that is so egregious it warrants a criminal prosecution, this can be particularly problematic. In *Jacob Mathew v. State of Punjab*, judges of India's highest court established key principles for determining whether a physician has committed a crime or engaged in conduct that has resulted in criminal liability.¹ The judgment drew a crucial distinction between civil and criminal negligence, holding that criminal liability arises only where negligence is gross or reckless in nature. Nearly two decades later, the decision continues to shape medico-legal jurisprudence in India. This commentary examines the Court's reasoning, evaluates its impact on patient rights and medical practice, and reassesses its relevance in contemporary India.

Facts of the Case and Procedural History:

The case arose from the death of a patient, Ram Bihari Lal, who experienced difficulty in breathing and died at a hospital in Punjab after he was admitted for treatment. The hospital's medical team assigned to care for him did not have an oxygen cylinder to give him at the time. Thus, the patient died as a result of their negligent treatment. Therefore, a criminal case was filed against two members of the medical staff, including Dr. Jacob Mathew, for causing the patient's death by their negligent behaviour under the relevant provisions of the Indian Penal Code (IPC). Specifically, they were charged under Section 304A (causing death by negligence), Section 337 (causing bodily harm by negligence) and Section 338 (causing serious bodily harm by negligent act).²

The accused doctors argued against criminal proceedings, claiming that even if the allegation were proven true, there was nothing in it that rose to the level of negligence necessary for criminal prosecution. Ultimately, the Supreme Court of India had to determine what constitutes criminal negligence against medical professionals. The Court also noted that there was a growing concern on the part of the profession regarding the amount of frivolous criminal

¹ *Jacob Mathew v. State of Punjab*, (2005) 6 S.C.C. 1.

² *Id.*

litigation; therefore, the question arose whether or not there should be some differentiation between a mere lapse of care by a physician and a lapse of care that rises to the level of a criminal offence.³

Legal Issues Before the Court:

The main question considered by the Supreme Court was whether every case of medical negligence that results in injury or death could lead to criminal liability under Section 304-A of the Indian Penal Code, 1860. The Court needed to consider how much negligence is required for a medical professional to be prosecuted for a criminal offence, and whether civil and criminal negligence should be differentiated. The court also needed to determine whether special protections should be established for medical professionals from unwarranted criminal prosecution because of bona fide errors in professional judgment.⁴ These questions formed the foundation of the Court's examination of criminal negligence in the medical profession.

The Supreme Court's Decision:

The Supreme Court held that a medical professional can be subjected to criminal prosecution only when the alleged negligence is so gross or reckless as to amount to a crime. Mere errors of judgment, accidents, or ordinary negligence that may give rise to civil liability are insufficient to attract criminal sanctions. Drawing upon English jurisprudence, particularly the Bolam Test, the Court observed that a doctor would not be negligent if their conduct was consistent with a practice accepted as proper by a responsible body of medical professionals.

The ratio decidendi of the case lies in the Court's distinction between civil and criminal negligence. For criminal liability under Section 304-A of the Indian Penal Code, the prosecution must establish a high degree of negligence amounting to gross neglect or recklessness.³ To prevent frivolous prosecutions, the Court further directed that criminal proceedings against doctors should ordinarily be initiated only after obtaining an independent and competent medical opinion supporting the allegation of negligence.⁴

Critical Analysis: Balancing Patient Rights and Medical Autonomy:

The decision in *Jacob Mathew* sought to strike a delicate balance between protecting patients from negligent medical treatment and shielding healthcare professionals from unwarranted criminal prosecution. By requiring proof of "gross negligence" rather than mere carelessness, the Supreme Court recognized the inherently uncertain nature of medical practice and the dangers of defensive medicine, where doctors may prioritize legal protection over patient welfare.⁵ The requirement of an independent medical opinion before initiating criminal proceedings further protects medical practitioners from frivolous complaints and has continued to influence courts in subsequent negligence cases.⁶

However, the judgment has also attracted criticism for setting a threshold that may be excessively burdensome for victims seeking criminal accountability. Patient-rights scholars argue that the emphasis on protecting doctors can, in some cases, make it difficult to address serious lapses in healthcare delivery. Contemporary literature highlights the need for a balanced

³ Id.

⁴ Id.

⁵ Id.

⁶ Legal Mechanisms and Procedures in Alleged Medical Negligence: A Review of Indian Laws and Judgments, *Nat'l Med. J. India* (2024).

framework that preserves professional autonomy while ensuring transparency, accountability, and access to remedies for patients harmed by medical errors.⁷ In an era marked by increasing healthcare litigation, technological interventions, and evolving patient-rights discourse, the challenge remains to ensure that the law neither criminalizes honest medical judgment nor insulates gross negligence from scrutiny.

Conclusion

The decision in *Jacob Mathew v. State of Punjab* remains a landmark in Indian medico-legal jurisprudence for establishing a clear distinction between civil and criminal medical negligence. By requiring proof of gross negligence or recklessness before imposing criminal liability, the Supreme Court sought to protect medical professionals from unwarranted prosecution while preserving accountability for serious professional misconduct. The judgment recognized that medicine is not an exact science and that adverse outcomes do not automatically imply criminal culpability.

However, the evolving healthcare landscape necessitates a continued reassessment of the principles laid down in *Jacob Mathew*. Rising patient awareness, increased medical litigation, and technological advancements in healthcare have intensified demands for both professional autonomy and patient protection. While the safeguards introduced by the Court remain relevant, they must be balanced against the need for effective remedies in cases of genuine negligence. Ultimately, *Jacob Mathew* continues to serve as the foundation of criminal medical negligence law in India, reflecting an ongoing effort to reconcile patient rights with the realities of medical practice.

⁷ "Judicial Standards in Medical Negligence: The Role of the Bolam and Jacob Mathew Tests in India," *Indian Journal of Forensic and Legal Medicine* (2025).