Case history: A 33 year old plumber sustained high-tension electrocution from overhead cables as an occupational hazard while climbing up to the third floor of a building under construction. He was thrown on to the concrete slab of the second floor with multiple extensive burns. Though hurriedly taken to hospital, he remained unconscious for nearly two hours almost unattended. CT scan done at a later date showed cerebral infarctions. He was treated for neurological and other complications in the ward for two months. Other complications such as blindness were discovered subsequent to his discharge from the ward. He was re-admitted to the same ward only to die few hours after admission. The post-mortem examination revealed yet undiscovered complications and the cause of death was attributed to the complications of electrocution.

Discussion: Though short-term complications of electrocution are quite heard of, long-term sequele are under-reported in the medical literature. Neurological, psychological, ocular and pain-related complications are not uncommon. The term diffuse electrical injury is used to designate combinations of such complications not directly related to the theoretical pathway of the current inside the body. Doctors working in emergency care and surgical units should be made aware of such complications and the importance of proper initial care in preventing or minimizing the above should be emphasized which might otherwise amount to medical negligence.