

Saving lives on road: Supreme Court told states to put in five key measures; none has all of them

Among measures proposed were an emergency phone number, GPS ambulances, good samaritan law and a trauma registry

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INDIA'S DISMAL road safety record of 1.77 lakh fatalities a year has a revealing backstory. Not a single state has a complete trauma care architecture the Supreme Court sought for saving lives,

according to data submitted to it by 34 states and Union Territories over the last nine months.

A common emergency phone number, GPS-equipped ambulances, a Good Samaritan law, a trauma registry and a rescue protocol — these are the five most important measures of the total nine the Supreme Court had asked states to put in place in its May 26 order. These five measures form a crucial framework to prepare for the “Golden Hour” — the first 60 minutes after an accident critical to saving lives.

The top court’s order came in a petition filed by SaveLIFE Foundation, a [Delhi](#)-based road safety organisation, which had recommended a uniform trauma care system across states.

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A comprehensive reading of the 1,200 pages of court submissions shows that of the eight states — Uttar Pradesh, [Tamil Nadu](#), Maharashtra, Madhya Pradesh, Karnataka, Rajasthan, Bihar and Andhra Pradesh — that account for two out of every three accident deaths in the country, seven are yet to merge all their emergency numbers into 112; one state Karnataka did not provide information.

The phone number 112 was launched by the Union Home Ministry in 2019 as a Nationwide Emergency Response System that would subsume all emergency numbers for police, fire, medical, ambulance, highways, women, etc. With so many numbers for different emergencies, NERS was conceived to do away with the confusion about which number to call.



Another important aspect which holds back people from offering help on the road is the fear of being harassed by the police or hospital with a lot of questioning. But of the eight states which accounted

for two-thirds of 1.77 lakh fatalities in 2024, only two — Maharashtra and Karnataka — have a grievance redressal system for good samaritans. Four states do not have it, and two states did not provide the required information in the submission to the Supreme Court.

More than 10 years ago, on March 30, 2016, the Supreme Court passed a significant order recognising the rights of Good Samaritans or bystanders or Rah-Veer. Later, the Ministry of Road Transport and Highways (MoRTHs) notified the Good Samaritan Rules in 2020 under Section 134A of the Motor Vehicles (Amendment) Act, 2019 to provide protection to people helping out accident victims. Under the scheme, anyone who helps an accident victim receive medical attention within the Golden Hour is eligible for a Rs 25,000 reward.

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However, even 10 years after the court order, the states are dragging their feet on building key trauma-response infrastructure to save lives lost on the country's road network. This matters because at least 30% of all trauma-related deaths in the country are attributable to delays in emergency care, according to a 2021 NITI Aayog-AIIMS Emergency and Injury Care Report.

The documents further show that states with high fatality also lag behind in building trauma registry, and many are still working on the basis of manual databases. A trauma registry is a clinical database that tracks a patient's journey from the scene of an injury through ambulance, hospital treatment and discharge. It is a key requirement to audit medical care, monitor outcomes, and policy decisions. But five out of these eight states do not have a trauma registry. Three states Tamil Nadu, Maharashtra and Madhya Pradesh said they have a trauma registry system. Tamil Nadu's trauma care registry records pre-hospital ambulance details, transit case details in hospital reception and resuscitation details outcome of patient on a real time basis.

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Seven of these eight states meet the criteria for having established a protocol for rescuing victims from the incident site. However, Karnataka does not have a rescue protocol for medical and non-medical rescue and transfer of road crash victims from the site to the hospital.

Overall, of all 34 states and UTs, only eight have a grievance system for Good Samaritans, 17 have a rescue protocol for road victims. As many as 22 states do not have a trauma registry and 13 states either have no GPS or GPS in few ambulances, that too in government ones only.

The Supreme Court, through a letter issued by the Attorney General of India R. Venkataramani on September 2, 2025, asked all states to submit information on whether all registered ambulances, including private ones, were equipped with GPS. Although eight high-fatality states responded “Yes,” the data provided does not cover private ones, which make it partial information.

On the question of whether the dashboard to track these ambulances have been made public, six states said that though they have a dashboard, it has not been made public. Under such circumstances, for a road accident victim’s family, it is difficult to verify whether the nearest ambulance was actually dispatched. Uttar Pradesh and Tamil Nadu said they have made ambulance tracking dashboard open for the public.

Apart from this, seven of the eight states do not track ambulance movements real-time by integrating it with the 112 NERS system. Due to this, it is difficult to rightly calculate the time taken by the ambulance to take the victim to a hospital.

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States’s responses

The roads in Uttar Pradesh are most unsafe and tops in road deaths. It recorded 24,118 or 13.61% of the total fatalities in 2024. On average in every second accident, there was a death.

The state said it has integrated most of the emergency number with 112 NERS, with only 102 emergency medical services remaining to be integrated. This was done between 2018 to 2025. It also does not have a separate grievance redressal system for Good Samaritans.

“A general grievance redressal system in the form of a complaint/suggestion box exists in health care facilities regarding all health services provided by the facility. The grievance is addressed necessarily within 24 hours. The Nodal authority for grievance redressal is in-charge/superintendent of the concerned facility,” said the state in its recent February 19 reply.

The state has a standard SOP for medical rescue of road crash victims. However, it is yet to establish a centralised statewide trauma care registry. “Trauma-related patient data is being captured at the facility level in major government medical colleges, trauma centres and district hospitals through hospital information systems/manual records,” said UP in its letter to the supreme court.

The state is still examining the feasibility of developing a standardised trauma data framework and centralised reporting mechanism.

Tamil Nadu is the number one state in total road accidents and second in fatalities. It has only partially integrated the various emergency numbers. In its September 25, 2025, letter, the state highlighted its comprehensive protocol for rescue of injured victims, which prescribes scene safety measures such as use of reflective jackets, warning triangle cones, blinkers, turning on ambulance hazard lights, at scene triage protocols tagged as critical/ based on canadian triage acuity scale (CTAS), pre-arrival notification systems for medical facilities, pre-arrival intimation is given by the EMT to the receiving hospital through mobile application.

Maharashtra said its emergency medical services (MEMS 108) or ambulances only are fitted with a GPS system. Madhya Pradesh said its grievance redressal system for good Samaritans is under process. The state recently developed a comprehensive trauma care policy, which specifies roles and responsibilities of different stakeholders (police, health, road patrol, road owning agency) for victim's rescue.

Karnataka said it does not have a trauma care registry and it will do so on the basis of the Centre's policy. The state said only those ambulances operational under 108 Arogya Kavacha are monitored through a central dashboard.

Rajasthan said that a SOP for trauma care registry is under process. With regards to the Good Samaritan grievance system, Bihar said it has a similar system which caters to complaints regarding medical assistance. On the trauma care registry, it said, "Trauma care registration not registered separately. However, in the accident and emergency, trauma is one of the data elements."

On the 112 NERS integration, Andhra Pradesh said it had launched 108 numbers as ERS in 2005, much before 112 was launched.

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