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Foundation Day Special Celebrations Galore



"Empathise with patients"-message from the Director

Sanjay Gandhi Postgraduate Institute of Medical Sciences celebrates its Foundation Day on December 14th every year. On this day in 1980, Sri Neelam Sanjeeva Reddy, the then President of India had laid the Foundation stone of this Institute. Over the past two decades SGPGIMS has become a prominent landmark in Lucknow. Today SGPGIMS ranks among India's top medical institutions, delivering state-of-art medical care, specialty teaching, training and research. SGPGIMS is recognized for its focused outlook and high standards of medical care. It endeavors to provide quality medical education and training and has been adapting to the changing environment and demands of its patients.

The first Foundation Day of SGPGIMS was formally celebrated in 1994 with an oration by Prof. Asis Dutta. This tradition has been followed since then & over the years many eminent scientists, renowned academicians, distinguished intellectuals have delivered the prestigious Foundation Day Orations. This year, on the 32nd Foundation Day, Prof Anil Kumar Gupta from IIM Ahmedabad, shared the success story of his most accomplished project 'Honey Bee Network'. (Report on Page-4)

The gathering was welcomed by Prof Rakesh Kapoor, Director, SGPGIMS. In his welcome message, he said that "Medical practioners are treated as next to God as they bring back life and hope to an ailing person and his family. People do not remember the scar or pain but remember the behavior of the treating doctor and his team, hence we should always try to

render that extra solace and kindness to the ailing."

The Chief Guest of the occasion was the Chief Secretary of Uttar Pradesh & President of the Institute Sri Alok Ranjan. He addressed the gathering and urged the staff, students and doctors to strive hard to bring SGPGIMS to the level of top superspeciality Medical Institute of not only India but world. He said that the State Government is ready to render all possible help to the Institute in its future endeavor.

The President of Institute gave away the awards to the employees and student. This year the proud recipients were Ms Deepshikha Sachan, Mrs Joyce Atish Urunkar from Nursing Cadre, Mr. Ashish Mishra from the Technician Cadre and Dr. Shakti Bedanta Mishra and Dr. Anubhav Raj were the best adjudged Senior Residents.

The Annual Report 2014-15 was also formally released during the occasion. Prof Rajan Saxena Dean, SGPGIMS proposed the vote of thanks.



The welcome rangoli at the entrance of the auditorium

Earlier during the day a voluntary blood donation camp was organized by the Transfusion Medicine Department in the Institute's Blood Bank. Sports event between staff and faculty members was also organized on Sunday to mark the occasion. The day ended with a lively cultural program courtesy Akashvani, Lucknow which was enjoyed by one and all.

Monalisa Chaudhari

(Turn to last page for pictorial glimpses)



We are the Best

The Week-Nielson survey 2015 has adjudged SGPGIMS Lucknow to be the 13th best multi speciality hospital in India and number one in Lucknow. Awards and acknowledgments are great encouragement to strive for further excellence. This survey was published in "The Week" magazine in its 29 November 2015

issue. The parameters taken into account were competency of doctors, quality of patient care, availability of multi specialty facilities, overall reputation, infrastructure, innovation and hospital environment.



Every cog in the wheel matters and therefore this ranking is a matter of pride to each and every person associated with SGPGIMS. At the same time, it is an onus on each and everyone to put in that extra effort to take the Institute to greater heights. Technology and Experience must be delivered with a humane touch to improve patient care and in this endeavor each and every employee must play his part to perfection.



Perna Kapoor

STINGRAY

(A New Technique to Open 100% Blocked Arteries in Heart)
First Successful Case of the Country Performed at SGPGIMS

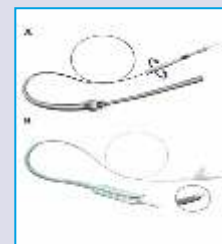
100% blockade of arteries of heart are to a large extent not amenable to angioplasty and call for open heart surgery. Surgery involves opening of the chest with general anesthesia and longer hospital stay with higher morbidity and risk with long waiting times, an option not preferred by several.

Opening totally blocked arteries has been a part of standard treatment offered at department of Cardiology at SGPGIMS by Dr PK Goel HOD Cardiology and his team. In continuation of this effort the first case of the country of opening a chronic total blocked vessel with a new technique of "Antegrade dissection and re entry" using a new device called the "STINGRAY" was performed by Dr Goel and his team on 9th December 2015 successfully.



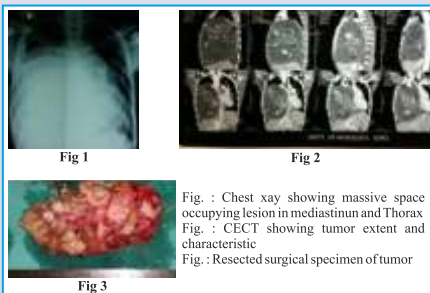
The Stingray system

uses a percutaneous (needle hole) approach through which the stingray system which includes a tube like catheter and a flat stingray shaped balloon, is negotiated into the blocked heart artery as in regular angioplasty. But the system here on travels the arterial vessel wall rather than the vessel lumen which is blocked chronically with hard calcified material giving lot of resistance to the usual available angioplasty wires. Once the system reaches beyond the occlusion/ blockage the distal vessel is entered with a stiff angled wire like the stings of a stingray through the "stingray" balloon and access is gained to the true vessel distally. Then the in-between track is stented giving a final flowing vessel. The procedure saves the patient from incision in the chest, general anaesthesia and risks of open heart surgery and all surgical waiting period. The addition of this new technique to the armamentarium of interventional cardiology could provide a possibility of achieving success in patients with almost any type of 100% blockage without resorting to open heart surgery, especially in the hands of experts.



Largest Mediastinal Teratoma Operated

Cardiovascular & Thoracic surgeon Dr Gauranga Majumdar, Additional Professor from the Department of CVTS, SGPGIMS along with his team comprising of Prof Prabhat Tewari & Dr Sajas, Senior Resident Anaesthesia together with Dr. Nilesh Srivastava & Dr Navneet, Senior Residents CVTS operated upon a case of Giant mediastinal I teratoma in a 18 yrs old male patient having chest pain and heaviness since preceding 03 yrs. This was one of the largest mediastinal teratoma reported in literature.



The patient was primarily diagnosed as a case of pulmonary tuberculosis and empyema Thoracis outside SGPGIMS and was even put on Anti tubercular treatment regime for 9 months. During work-up and subsequent evaluation at SGPGIMS, it turned out to be a teratomatous mass occupying the right side of chest cavity with profound pressure symptoms. It was 30 cm in longest dimension. Covering right hemithorax, whole mediastinum, and partial left hemithorax and weighed nearly 15 kg. It resembled small baby in chest. It had all three germ line derivative like bone, hair, intestine, muscle etc. Patient was operated upon under general anaesthesia and the mediastinal teratoma was taken out and other surgical corrections were resorted to, in order to repose the surrounding organs and to restore the normal structure. Patient was discharged on 7th post operative day and he is still doing well, after more than 3 months of surgery.

Kids Care Department of Pediatric Surgery

The department of Pediatric Surgical Superspecialties is one of the five new departments created as a part of phase 2 development of the Institute under the Pradhan Mantri Swasthya Suraksha Yojana. It serves as a tertiary care referral centre which provides comprehensive & holistic care to children with complex surgical diseases age ranging from newborns till 18 years. It offers one year post M.Ch. Post Doctoral Fellowship in Pediatric Surgical Gastroenterology

The inpatient services comprise of 30 bedded ward inclusive of 9 well equipped beds of Pediatric & Neonatal Intensive care unit. It has two state of the art Operation Theatres dedicated to Pediatric Surgery.

The department is recognized as a high volume centre for quality Pediatric hepatobiliary surgery and surgery for portal hypertension at the national level. As the horizons of the department are expanding, the other emerging areas of interest are Pediatric Oncosurgery, Neonatal surgery and Pediatric Endoscopic Surgery.

The thrust areas for clinical & academic work are Pediatric hepatobiliary surgery: Biliary reconstructive procedures for Biliary Atresia, Congenital Choledochal malformation, unusual causes of biliary obstruction, Partial internal biliary diversion, Liver resections; Portosystemic shunt surgery for portal hypertension; Pancreatic surgery; Esophageal replacement operations; Restorative proctocolectomy, Surgical



management of non variceal gastrointestinal bleed; Surgical management of inflammatory bowel disease; Pediatric Oncosurgery ; Re-operative surgery; Neonatal Surgery; Pediatric Endoscopic surgery.

With the concomitant activation of the department of Maternal & Reproductive Health (MRH) & the department of Neonatology, SGPGIMS as an institution offers a unique model wherein surgically correctable congenital anomalies are diagnosed antenatally by the department of

MRH, the family is offered an appropriate counselling in the antenatal period itself and appropriate postnatal medical & surgical care is provided by the department of Pediatric Surgery and the department of Neonatology.

The other strengths of the department are allied supportive specialties like i) Pediatric interventional Radiology, ii) dept. of Pediatric Gastroenterology state of art facilities for diagnostic and intervention Endoscopies and GI physiology studies; iii) Neonatology with well equipped Neonatal intensive care unit; iv) Maternal & reproductive health which specializes in antenatal diagnosis of surgical anomalies.

The department runs outpatient services all 6 days a week. The specialized out-patient services are Pediatric stoma care clinic and OPD based day care pediatric chemotherapy clinic for pediatric solid tumors.

Richa Lal



Eye to Eye Department of Ophthalmology

Since its inception in 2013, the Department of Ophthalmology it is growing gradually, both in academics and patient care presently with three faculty members and five senior residents. The department has started one Post-doctoral certificate course in Neuro-Ophthalmology and is slowly but steadily marking its niche into various state of art ophthalmic procedures.

Latest Phacoemulsification techniques with wide array of complicated, traumatic and paediatric cataracts are being done here. Surgical and non-surgical glaucoma manoeuvres such as Selective laser trabeculoplasty, which still offer a novel non interventional tool after the maximum medical therapy has been exhausted, are being performed here.

Laser treatment for proliferative retinopathies existed here since 1989, but with recently acquired Fundus camera with indocyanine angiography and HD-OCT machine and Pattern laser photocoagulation, the department has evolved itself with its latest foray into all

forms of Laser procedures, for treatable retinopathies such as Diabetic retinopathies, Wet ARMD, Eale's disease etc. Surgical vitreoretinal procedures for Retinal detachment, Proliferative

Diabetic retinopathies, Macular hole and other traumatic injuries are also being done here with state of the art 7000 cut rate Constellation vitrectomy machine.

Neuro-ophthalmic procedures such as Optic nerve fenestration, Orbital decompression and Trans frontal craniotomy with orbitotomy is hall mark of department, being the only centre to perform this in the region.

With the generous grant from U.P. Government a new building is coming up which would be equipped with 3 Modular Operation Theatres, one emergency O.T. and one Refractive procedure O.T. It would be 40 bedded with 5 private wards to cater the need of the people coming from neighbouring states and countries. On the academic front the department is all set to start M.S. Ophthalmology.

Vikas Kannaujia





Foundation Day Oration

SGPGIMS formally celebrated its First Foundation Day in 1994 with an oration by Prof. Asis Dutta. Since then the tradition of Foundation Day Oration has continued &

over the years many eminent scientists, renowned academicians, distinguished intellectuals have delivered the prestigious Foundation Day Orations. This year's orator was Prof Anil Kumar Gupta from IIM Ahmedabad. Prof Gupta established Society for Research and Initiatives for Sustainable Technologies and Institutions (SRISTI, 1993, www.sristi.org) and Grassroots Innovation Augmentation Network (GIAN, 1997, www.gian.org), two voluntary organizations to support the Honey Bee Network and to scale up and convert grassroots innovations into viable products respectively. He was instrumental in setting the National Innovation Foundation (NIF, 2000, www.nifindia.org) assisted by Department of Science and Technology, Government of India to make India innovative and creative society and a global leader in sustainable technologies. NIF has mobilized more than 200,000 innovations and traditional knowledge practices from over 545 districts of India, the largest database of its kind anywhere.

While deliberating upon his brain child, the Honey Bee Network, he dwelled upon the concept, started in 1988-89, stating that the philosophy of the Honey Bee Network derives its birth from one's commonplace experience of a honey bee, which gathers nectar from a flower, and, facilitates pollination of the other flowers, thereby helping the flowers to bloom. However, in the entire process, the flower, whose nectar had been disseminated by the honey bee, does not complain at all! Ploughing back the same theme, the Honey Bee Network's philosophy facilitates the development of a knowledge ecosystem, where the knowledge holder gets due share of acknowledgement and recognition for the dissemination of his knowledge/innovation with his neighbours.

Padamshree Dr. Anil Kumar Gupta, in his illustrious style of rendition went on to explain what sharing of knowledge is all about and how the fertile minds if brought together will bring in sea change in the perspective of livelihood and advancement of society. He gave various examples and said that, "through student volunteers and without much external support, established a portal of 204, 315 tech student projects at www.techpedia.sristi.org or www.techpedia.in to link the needs of informal sector and small and cottage industry with the young technology students besides increasing Innovation Quotient of the country by preventing students do a repetitive project."

Rajesh Harshvardhan



SGPGIMS Participates in Lifeline Express

Lifeline Express is the world's first hospital on a train, also known as the Magic Train of India. It celebrates 24 years of service to the poor and underprivileged masses of rural India. Brightly colored on the outside with rainbows and flowers, the hospital is equipped with state-of-the-art medical facilities and equipment to cater to the needs of the rural patients. The train, which is the flagship of Impact India Foundation, in partnership with the Indian Railways, has medically served more than 10,00,000 poor in rural India, restoring

sight, movement, hearing and correction of cleft lips with dental and neurological treatment and more, completely free of cost.

This was the first time breast screening and counseling was done. Dr Sabaretnam M of Surgical Endocrinology Department visited Lalitpur to screen Breast cancer patients in the Lifeline Express. He along with his team screened 1000 women and taught them the importance of Breast Self Examination. Each Lady was requested to teach another 5 women in the community.



HPS System Inaugurated

The human patient simulator lab was inaugurated by Prof. Rakesh Kapoor, Director SGPGIMS and Prof. PK Singh, CMS, in November 2015 at Animal House of

the ability to rerun their decisions in the event of their "clinical decisions having an "adverse impact" on the patient's clinical course without the patient having to actually suffer on account

SGPGIMS. The human patient simulator (HPS) is a tool to teach students about complex clinical situations using lifelike examples. The main purpose of HPS is to train medical professionals to reduce accidents during anesthesia and surgery, intensive care management and in emergencies. This can be used as a solution to ever-changing educational challenges. The HPS actually enhances knowledge, facilitates skill acquisition, decreases anxiety, and assist in promoting clinical judgment. However it is now used to train medical, nursing and paramedical students in Anesthesiology, Critical Care Medicine, Emergency Medicine and many allied medical branches.

This requires a flight simulator like training on Human Patient Simulator with different types of patients and scenarios so that the patient's lives are not put at risk at the hands of trainees during this learning curve in managing situations with the skills and knowledge that they have already obtained. This allows them to gain experience in handling situations with

of these errors. With a simulator, trainees can successfully master parts of the anesthesia machine before needing to understand the whole unit. Early application of simulator training of anesthesia technician and nurses similarly showed improved clinical performance among those initially using simulators.

Teamwork training has made a fundamental impact on error reduction and human performance improvement in Emergency department. HPS also facilitates training of the members of emergency department in behavioral modeling through review of professionally produced videotaped segments, illustrating good and poor teamwork, practical table top exercises. Trauma resuscitation on critically injured patients are in effect a controlled crisis management activity, albeit one practiced on a routine basis at busy centers. It is a learned skill that improves over time, and the HPS may decrease that learning time.

Devendra Gupta



Swine Flu: Everything One Should Know

H1N1 pandemic influenza commonly known as “Swine Flu” is an acute viral illness caused by a novel reassorted influenza virus which was first identified in March-April 2009 in Mexico and it spread all over the world by rapid human to human transmission and resulted in considerable morbidity and mortality. It arose from reassortment of 4 distinct genetic elements, i.e. swine, human, avian, and Eurasian swine genetic components. The virus was found to be antigenically unrelated to human seasonal influenza viruses but genetically related to viruses known to circulate in pigs and hence the name “Swine Flu”. The World Health Organization officially declared the epidemic to be over on 10 August 2010 but the virus continues to circulate as seasonal influenza with variable degree of activity all over the world.

Symptoms and Signs

Symptoms of novel H1N1 flu are similar to those associated with seasonal flu, fever, cough, sore throat and runny nose which is usually associated with headache, chills, extreme fatigue and weakness. In addition, vomiting and diarrhea have also been reported. It has been seen that it disproportionately affects children and young adults as compared to the older age groups. Common risk factors for occurrence of severe disease are presence of cardiovascular disease, respiratory diseases including asthma and COPD, auto-immune disorders, obesity, diabetes or cancer, transplant recipients and patients on any kind of immunosuppressive therapy. The most dreaded complication of swine influenza is respiratory failure hence being the common reason for admission to intensive care unit and need for assisted ventilation. Than timely majority of patients suffer from mild illness similar to seasonal influenza and recover spontaneously without any specific intervention. A small number of patients require hospitalization for specific antimicrobial therapy and supportive management.

Overall hospitalization rates are far less and mortality rates are 0.1 to 1% only. So an important message for everyone is that there is no need to panic when someone is diagnosed as swine flu because most of the time the disease is either self-limited and rarely it may require hospitalization.

Diagnosis

The diagnosis of Swine flu can be made by RT-PCR (polymerase chain reaction) from nasopharyngeal swab specimens and respiratory secretions, which is readily available round the clock in the department of microbiology of our Institute.

Treatment

From the point of view of triage and management of patients with suspected swine flu the WHO has categorized these patients on the basis of clinical presentation at base line



into three main groups of A, B & C. This has been adopted and laid down in the guideline issued by the Ministry of Health and Family Welfare also.

Patients with mild fever plus cough/ sore throat with or without bodyache, headache, diarrhea and vomiting were categorized as 'A'. These patients do not require testing for H1N1 and should be treated as per symptomatology and monitored as well as reassessed at 24-48 hours. Oseltamivir is not required in these patients. Patients should confine themselves at home.

Patients with high grade fever and severe sore throat may require home isolation and Oseltamivir. Children with mild illness but with predisposing risk factors; pregnant women; people aged 65 years or older; patients with lung diseases, heart disease, liver disease, kidney disease, blood disorders, diabetes, neurological disorders, cancer and HIV/AIDS; patients on long term cortisone therapy are considered as high risk conditions and are categorized under 'B' to be treated with Oseltamivir, however do not require tests for H1N1.

In addition to the above signs and symptoms of Category-A and B, if the patient has one or more of the following will be considered in Category 'C' and they would require testing, immediate hospitalization and treatment.

1. Breathlessness, chest pain, drowsiness, hypotension, hemoptysis, cyanosis
2. Children with influenza like illness and **red flag signs** (somnia, high and persistent fever, inability to feed well, convulsions, shortness of breath, difficulty in breathing, etc).
3. Worsening of underlying chronic conditions.

Currently all patients with confirmed/highly probable diagnosis of swine flu are admitted to swine flu ward of our institute which is equipped for management of patients who require close monitoring and intensive care.

Prevention

Annual influenza vaccination is the most effective method for preventing influenza virus infection and its complications. Trivalent Inactivated Vaccine

(TIV) Vaccine is now available for prevention of Swine Flu, which has been recommended by WHO/CDC as well as MOHFW, New Delhi. **The vaccine has not been recommended for children less than 6 months of age.**

Annual influenza vaccination is strongly recommended for:

1. Chronic pulmonary (including asthma), cardiovascular (except hypertension), renal, hepatic, neurologic, hematologic, or metabolic disorders (including diabetes mellitus);
2. Immunosuppressed state
3. Pregnancy
4. Residence at nursing homes and other chronic-care facilities;
5. Morbid obesity (body-mass index ≥ 40);
6. Health-care personnel;
7. Household contacts and caregivers of persons with high risk medical conditions.

For general public the above recommendations are reasonable in a resource limited countries like India. For all practical purposes apart from above situations, it is recommended that, all health care personnel working in hospital and involved with direct dealing with patients and their caregivers should receive annual influenza vaccination. All school going children should also be preferably vaccinated.

Pharmacological prophylaxis with oseltamivir (Tamiflu) should be given to people who have direct exposure to a confirmed case of swine flu and family members. Strict isolation of the patient and personal protection measures should be observed.

General protective measures may be observed by general public during period of outbreaks to minimize human to human transmission and containment of epidemic such as:

1. Good personal hygiene-habits such as using handkerchief/tissue while sneezing or coughing and disposing it properly into the wastebasket and wearing simple triple layered surgical masks when having an “influenza like illness”.
2. Regular Hand-Washing/Cleansing with soap or with Alcohol-based sanitizers.
3. Environmental Hygiene i.e. ensuring regular cleaning and sterilizing of home and work place.
4. Avoiding to go to crowded places
5. Wearing simple triple layered surgical masks when visiting crowded areas.
6. Confining oneself to home during an undiagnosed “influenza like illness”. This includes avoiding to send children with similar illness to schools.
7. Using Indian style of greeting each other i.e. “Namaste” rather than hand shake, hugging or kissing.

Alok Nath

12th PG Course in Endocrine Surgery



The "12th Postgraduate course in Endocrine surgery along with International Course in Minimally Invasive Course in Endocrine Surgery", was held from 29th Oct to 1st Nov 2015. The Postgraduate course in Endocrine Surgery is the biennial event of department since 1989. During the course the emphasis was to provide knowledge on practical application of the contemporary technology in management of endocrine tumors via interactive sessions, video demonstrational and case discussion. The topics deliberated during the course covered all the recent advances in the field of Endocrine surgery from diagnosis until the state-of art management. This year's theme was "Contemporary Management of Endocrine Tumors". Sessions had live surgical workshop, followed by discussions on various topics of endocrine surgery.

The event was well attended by over 100 national delegates and more than 60 Faculties. There were seven participants from overseas including Prof. Martin Walz from Germany, Prof. Soh & Prof. Lee from South Korea, Prof. Radan from Serbia and Prof. Riyaz Ahamad from Oman.

The participants from reputed institutes and medical college from all over India including AIIMS, New Delhi, PGI Chandigarh, BHU Varanasi, CMC Vellore, Madras Medical College, Chennai, Grant Medical College, Mumbai, Bangalore Medical College, Bangalore, King George Medical University, Lucknow, SCB Medical College Cuttack etc. attended the 4 day PG Course.

Managing Pain

The department of Anaesthesiology, organized the 4th International Conference of Pain Management from 7th to 9th November. The conference was supported by Society for Ultrasound in Anaesthesia, an UK based organization.

Control of post operative pain is one of the first priorities of an anaesthesiologist. The goal of acute pain management is to control post operative pain at optimum level with minimal discomfort to the patient. Besides, incidence of chronic pain like knee osteoarthritis, low back pain, hip pain, facial pain and cancer pain, head ache etc is also on the rise due to unhealthy life style, prolonged working hours, stress, etc. The aim of this conference was to familiarize the treating medical professionals with latest developments in the field of acute and chronic pain managements and train them to provide the same at their door steps so that this benefit is passed to larger group of patients in their near vicinity.

Workshops on "ultrasound in peri-operative and critical care area including nerve blocks" and "Interventional pain management" were conducted. The conference was attended by more than 300 International and national delegates.

Hair Transplantation Workshop

Hair transplantation is the most successful surgical treatment for baldness. It involves taking out hairs with roots from the posterior part of the head which are then put on areas where hair are required.

The department of Plastic Surgery & Burns organized a "National Workshop on Hair Transplantation" on November 13th & 14th, 2015. The latest techniques of hair transplantation were demonstrated in this workshop. The two common techniques for hair transplantation are FUT (follicular unit transplantation) and FUE (follicular unit extraction). FUT involves taking a strip from the back of the head which is then cut into pieces so that single or double hair follicles are separated. These follicles are then implanted into the sites. FUE involves taking individual hair follicles from the donor sites which are then transplanted into the recipient sites.

Dr. Rajendra Singh Rajput, renowned hair transplant surgeon from Mumbai was the



guest faculty. He along with local faculty, Dr. Rajiv Agarwal operated and performed hair transplantation using the latest FUE technique.

UPASICON 2015

The departments of surgical super-specialities along with General Hospital and department of Anaesthesia organised the 41st Annual Conference of Association of Surgeons of India (UP Chapter) UPASICON 2015 from 19th to 22nd November 2015. Theme for this year's conference was "Future of General Surgery – Competence by Design".

A first in the history of UPASICON was the Postgraduate Course for General Surgery residents which was attended by doctors from all over UP. The course was developed as an extension of the existing training program for PG Surgeons. It consisted of case based interactive teaching session followed by videotaped surgical procedures.



Live operative workshop where three simultaneous OT's were run and 12 cases were transmitted live to Shruti Auditorium. Many stalwarts from UP and across India were the operating surgeons including Dr. Narvaria, Prof. Mandhani, Prof V.S. Bedi, Prof Sanjiv Mishra and Prof S.D. Maurya.

Multiple orations, lectures, seminars and symposia along with Quiz, best paper and best poster competition for postgraduate students were organised on the last day. More than 150 free papers and posters were presented by the delegates. A symposium on how to deliver lectures and orations was conducted by Dr S. Bhattacharya which was widely appreciated.

The event was attended by more than 350 delegates including 100 Postgraduate students from different medical colleges of the state. As a mark of respect the senior surgeon's registrations was completely free for all surgeons over 70 years of age.

Prof Amit Agrawal, Organising Chairman and Dr Brajesh Singh Organising Secretary were assisted by Dr Ankur Bhatnagar, Dr Vijay Upadhyaya and Dr Sabaretnam to organise the conference.

Dr Vashistha President Association of

Surgeons of India, inaugurated the conference and Prof Rakesh Kapoor, Director SGPGIMS and Prof Ravi Kant Vice Chancellor KGMU were guest of honour. On this occasion a souvenir and conference abstract book was released by the chief guest.

Therapeutic Aspects of Acute Stroke

Department of Radiodiagnosis in collaboration with eminent Neurologists & Neurosurgeons from Lucknow organized a half day CME on Therapeutic Aspects of Acute Stroke on 28th November, 2015 at a local hotel. Department of Radiodiagnosis of SGPGIMS is well known for Neuro-interventional therapeutic procedures in cerebrospinal vascular pathologies. Duly supported by Neurosciences, it routinely carries out Intracranial Aneurysm Coiling



including the flow diverter treatment, AvM embolization, carotid stenting and many other neurointerventional procedures. The department has active interest in acute stroke management and has been imparting knowledge in stroke workshops held in the city from time to time. It is said that "Time is Brain" and early recanalization of occluded cerebral vessels preferably in the 3-6 hours window period in acute stroke is the key to improved neurological outcome. The CME included talks by Dr. Hardeep Singh Malhotra on thrombolysis in stroke. Dr. Vimal Paliwal spoke on how to get the patient in window period on table. Dr. Rashmi Saraf from KEM Hospital, Mumbai highlighted the mechanical clot retrieval while Dr. Vivek Singh spoke on carotid stenting.

The purpose of the CME was to stress the need to put an organized multispecialty set up and a mechanism to undertake acute stroke treatment thus creating awareness regarding importance of prompt identification and treatment in cerebral stroke as well as about the available options in treatment.

SRNMCON'15

First International Conference of Society of Renal Nutrition and Metabolism SRNMCON'15 was an update on the chronic



kidney disease, dialysis, transplantation and immuno-nutrition. The scientific curriculum revolved around "prevention of malnutrition in patients with CKD" with the intention to spread this message to non nephrologist physicians. The highlight of SRNMCON'15 was release of "Manual On Approach To Chronic Kidney Disease - Key To Success. Protocols From Society Of Renal Nutrition and Metabolism (SRNM)" edited by Dr Anita Saxena, Dr AK Bhalla, Dr DS Rana and Dr Amit Gupta.

CME on Abdominal Imaging

The department of Radiodiagnosis organized "DR R K Goulatia CME" on Abdominal Imaging, under the aegis of The UP State Chapter of Indian Radiological and Imaging Association and Indian College of Radiology and Imaging on 5th and 6th December 2015.

Dr. R.K. Goulatia, Past President of Indian Radiological & Imaging Association, is an internationally acclaimed academician and known to be the pioneer in the field of Neuroradiology. The CME was thus named after him.

Eminent speakers from across the country participated in the event and deliberated on diagnostic as well as interventional techniques in abdominal Imaging. Current concepts and recent advances pertaining to common abdominal diseases of liver, pancreas, intestines, kidneys and pelvis were discussed in the forum, which will go a long way in improving diagnosis and management of patients, as well as promoting useful research.



Guest speakers included Dr S. Kulkarni from TMH, Mumbai; Dr N. K. Khandelwal and Dr Naveen Kalra from PGI, Chandigarh; Dr Rakesh Gupta from Fortis Hospital, New Delhi; Dr S. S. Bajjal from Medanta, Gurgaon; Dr Sunil Puri from GB Pant Hospital, Dr Chandramohan, Dr M K Narula, Dr Amar Mukund, Dr Sabnum Grover, New Delhi and Dr Shiva Nand from AIIMS. The CME also included workshops on USG and interventional techniques. More than 250 delegates attended the scientific event from all over the country. The conference provided an opportunity to participants to interact and update knowledge and new techniques in various fields of radiology and imaging. An ultrasound machine was also launched during the convention.

Highlighting Medical Ethics

Bioethics and Research Cell of SGPGIMS organized the 3rd National Conference of Forum for Ethics Review Committees in India (FERCI) on 11th and 12th December 2015 at Telemedicine Auditorium of the Institute.



The theme of the conference was 'Accreditation and Quality Ethics Review'. It was attended by more than 150 delegates from all over the country especially by the researchers of various government and private hospitals and by Ethics Committee members of various Institutes.

The 2 days witnessed deliberations on various issues of bioethics and suggestion to improve the ethical review process. Speakers from USA, Philippines and prestigious Institute from India like Tata Memorial Hospital and KEM Hospital Mumbai, ICMR New Delhi and SGPGIMS Lucknow were guest faculties.

Delegates exchanged their views, ideas and experiences in field of Bioethics. It was an opportunity for ethics committee members to interact with their counterpart from other Institutes. Young researchers involved in human research presented their works in field of bioethics.

जयन्ती अनुष्ठान

दिनांक 02 अक्टूबर को संस्थान के मिनि प्रेक्षागार में गाँधी जयन्ती समारोह, अत्यन्त श्रद्धापूर्वक मनाया गया। संस्थान के कार्यकारी निदेशक डा. आर.वी. फड़के ने राष्ट्रपिता महात्मा गाँधी व भारत के द्वितीय प्रधानमंत्री श्री लाल बहादुर शास्त्री की चित्रों पर माल्यार्पण किया। उन्होंने महात्मा गाँधी के जीवन दर्शन व उनके सिद्धान्तों पर भी चर्चा की। उनके सत्य व अहिंसा के सिद्धान्तों की आज के समय में प्रासंगिकता पर भी चर्चा की गई।



भारत के पूर्व प्रधानमंत्री श्री लाल बहादुर शास्त्री जी, के “जय जवान, जय किसान” का नारा आज के संदर्भ में अत्यन्त जीवन्त व प्रासंगिक है। अत्यन्त

कठिन परिस्थितियों में इनका बचपन बीता, अभावों में ही इन्होंने शिक्षा-दीक्षा प्राप्त की, पर इनका मनोबल इतना ऊँचा व इच्छा शक्ति इतनी प्रबल थी कि इन विषम परिस्थितियों के बावजूद ये स्वतन्त्र भारत के दूसरे प्रधानमंत्री बने।



भारत के इन दोनों महान सपूतों को इस दिन याद किया गया। इस अवसर पर संस्थान के कार्यकारी डीन डा. वी.के. कपूर, अन्य संकाय सदस्य व संस्थान के अधिकारी गण व कर्मचारी गण भी उपस्थित थे।

स्मृति शेष



अशोक कुमार भारती

सन् 2015 जाते-जाते संस्थान परिवार के कुछ सदस्यों को हमसे छीन कर ले गया। संस्थान परिवार के इन सदस्यों के असामयिक निधन से सभी स्तब्ध रह गये।

दिनांक 30 अक्टूबर 2015 को अधिष्ठान में अटेन्डेन्ट के पद पर अशोक भारती का आकस्मिक निधन हो गया। उन्होंने 17 दिसम्बर 1991 को संस्थान में कार्य-भार ग्रहण किया था। अपनी मृदुभाषिता व व्यवहारकुशलता के कारण श्री भारती संस्थान कर्मियों में अत्यंत लोकप्रिय थे।

अभी इस सदमे से हम उबरे ही नहीं थे कि 30 नवम्बर को यूरोलॉजी विभाग के स्टोर सेन्टर में उपचारिका श्रेणी-2 के पद पर कार्यरत श्री अरविन्द वर्मा के असामयिक निधन का समाचार मिला। श्री अरविन्द अपने गृह क्षेत्र कानपुर में थे, जब उनका देहान्त हुआ। वे 21 फरवरी 2014 को ही संस्थान परिवार में जुड़े थे। उनके इस तरह अचानक चले जाने से संस्थान का प्रत्येक कर्मि शोक संतुप्त है।

यह आघात ज्यों का त्यों बना हुआ था तभी 01 दिसम्बर 2015 को संस्थान की लाइब्रेरी में अटेन्डेन्ट के पद पर कार्यरत ओम प्रकाश का निधन हो गया।



ओम प्रकाश

उन्होंने 06 अक्टूबर 1988 को ग्रेड AA के पद पर न्यूरोसर्जरी विभाग में कार्य-भार ग्रहण किया था। अपने सेवाकाल में उन्होंने विभिन्न विभागों में कार्य किया। संस्थान परिवार के इन सदस्यों के असामयिक निधन से हम सब शोक संतुप्त हैं।

परमपिता परमात्मा से हमारी प्रार्थना है कि वह दिवंगत आत्मा को शान्ति प्रदान करे और इनके परिजनों को इस आघात को सहने की शक्ति प्रदान करे।



अरविन्द वर्मा

उल्टी खोपड़ी के लोग ही करते हैं कुछ नया

प्रो. अनिल कुमार गुप्ता से संजय द्विवेदी की विशेष बात-चीत

देशज ज्ञान से सबको मिल सकती है कम पैसे में सुविधा

हनी बी नेट वर्क के जरिए गांव, देहात, कस्बों में पढ़े-अनपढ़, बड़े और बच्चे के साधारण खोज को विज्ञान से जोड़ने वाले और देश के सामने लाने वाले प्रो. अनिल कुमार गुप्ता ने विशेष बात-चीत में कहा कि, “हर जगह कुछ उल्टी खोपड़ी वाले लोग होते हैं वही लोग कुछ नया करते हैं। इनके पास नया करने का जज़्बा होता है। ऐसे ही उल्टे लोगों को हम गांव-गांव जा कर खोजते हैं। इसके लिए शोध यात्रा करते हैं। 36वीं शोध यात्रा अरुणाचल और नागालैंड के लिए करने जा रहे हैं। कई बार इनकी खोज विज्ञान एवं तकनीक स्तर पर व्यावहारिक नहीं होती है इनके खोज को इस स्तर पर व्यवहारिक बनाते हैं। देशज ज्ञान के जरिए ही सबके लिए कम लागत सुविधाजनक सुविधाएं लोगों को प्रदान की जा सकती है। हमने इस नेट वर्क के जरिए दो लाख से अधिक आइडिया और खोज को एकत्र किया है। तमाम खोज को पेटेंट कराया है।” एक उदाहरण देते हुए कहा कि, “हमारे यहां टेबिल पर लिटा कर प्रसव कराया जाता है लेकिन आदिवासी इलाके में बैठा कर प्रसव कराते हैं जो सुविधाजनक है। खोज और आइडिया में पैसे नहीं लगते हैं एक बच्ची ने कहा कि लंच बाक्स पर लिखा हो कि हाथ धुलने के बाद और खाने के बाद हाथ धोएं तो इसमें पैसा भी नहीं खर्च होगा और स्वच्छता का संदेश भी जाएगा। इस आइडिया के लिए बच्ची को राष्ट्रपति से सम्मान मिला। पटना की शालनी ने एडजेस्टेबिल वांकर का आइडिया दिया जिससे सीढ़ी पर चढ़ा जा सके इस आइडिया को एक कंपनी ने लागू किया इससे शालनी को रायल्टी मिल रही है। हरदोई के तरुण आनंद एवं लखनऊ की कुलसुम रिजवी ने कुर्सी पर बैठने का तरीका बताया कि गलत तरीके से बैठने पर कुर्सी चेतावनी देगी ऐसा सेंसर फिट किया इसके लिए भी उन्हें राष्ट्रपति से एवार्ड मिला है।”

आगे बढ़ने के लिए मन में होनी चाहिए बेचैनी

“आगे बढ़ने के लिए मन में बेचैनी होनी चाहिए। जब तक आप कुछ अलग

नहीं करेंगे तब तक पहचान नहीं बनेगी। अलग करने की भावना वहां के संस्कृति से आती है।” आगे बढ़ने का यह मंत्र संजय गांधी पीजीआई के 32 वें स्थापना दिवस के मौके पर आईआईएम अहमदाबाद के प्रोफेसर एवं हनी बी नेट वर्क के स्थापक प्रो. अनिल



कुमार गुप्ता ने देते हुए कहा कि, “कुछ नया करने के लिए मन में बेचैनी होनी चाहिए। यदि व्यक्ति संतुष्ट हो गया तो वह कुछ नया नहीं कर सकता है। खुद को नियंत्रित करके अपने को डिजाइन करना पड़ता है। यह सब अकेले करना संभव नहीं है। इसके लिए लोगों का सहयोग लेने की जरूरत है। इस लिए जो भी आप सीख रहे उसे सिखाएं और सीखें, तभी नए आइडिया आप में पैदा होंगे।” प्रो. गुप्ता ने कहा कि, “एसजीपीजीआई के शोध करने वाले लोगों को भी चाहिए कि वह लोगों से मिले सबसे नजदीक आईआईटी कानपुर के साथ मिल कर वह नए मेडिकल व सस्ते मेडिकल डिवाइस बना सकते हैं।” प्रो. गुप्ता ने कहा कि, “समाज में कई तरह के लोग होते हैं कुछ न सीखते न सिखाते हैं-इनसे ज्ञान का विस्तार संभव नहीं है। ज्ञान का विस्तार करने के लिए बड़ा दिल-बड़ा दिमाग होना चाहिए। खोज कर्ता को सांप सीढ़ी और शतरंज की बीच संतुलन बनाए रखने की जरूरत है। सांप सीढ़ी कब नीचे आ जाएं पता नहीं लेकिन शतरंज में प्लानिंग होती है।” पीजीआई को सलाह दी वह इनोवेटर क्लब और इनोवेशन गैलरी बनाएं जिससे नए छात्रों को काम करने के लिए आइडिया मिले।

अतीत का आज

हमारा सामान्य चिकित्सालय



बहुधा ऐसा देखा गया है कि हम किसी भव्य इमारत का अवलोकन करते समय उसके नींव की ईंट का स्मरण नहीं करते। संजय गांधी स्नातकोत्तर आयुर्विज्ञान संस्थान की जिस विशालता, भव्यता, विशिष्टता एवं ख्याति के हम आज साक्षी हैं वस्तुतः इन सभी का मूल स्रोत हमारा आज का सामान्य चिकित्सालय (जनरल अस्पताल है)। इस भवन में प्रवेश करते ही बायीं ओर एक पट्टिका पर अंकित है— 30.08.1984 को उच्चकृत चिकित्सालय का शिलान्यास माननीय लोकपति त्रिपाठी द्वारा किया गया है। इस छोटे से भवन की विशालता आज हमारे सम्मुख संजय गांधी स्नातकोत्तर चिकित्सालय के रूप में विद्यमान है।

निर्माण अवधि के पश्चात् इस संस्थान के परिसर में रहने वाले लोगों के स्वास्थ्य सम्बन्धी देखभाल और उपचार के लिये सामान्य चिकित्सालय 1986 में ही पूर्ण हो गया था और 1988 तक की इस अवधि में जन-सामान्य के हितों एवं रोगियों के उपचार की सुविधा इसी चिकित्सालय द्वारा प्रदत्त की जाती रही। यह उपचार की सुविधा एवं कई बार आपात स्थिति में की गई छोटी-2 शल्य क्रियाओं की सुविधा भी तब तक चलती रही जब तक मुख्य चिकित्सालय के शेष भाग का निर्माण पूरा न हो गया।

अतीत का वह छोटा सा भवन आज अपने में कई इतिहास समेटे हुये है। किसी समय उसी भवन में न्यूरोसर्जरी का आप्रेशन थियेटर भी स्थित था। जब हम आज के आईने में इस भवन को देखते हैं तो हमें कई परिवर्तन दृष्टिगोचर होते हैं। आज इस भवन में चिकित्सकों एवं शल्य चिकित्सकों का एक छोटा सा समूह अपने अथक परिश्रम और अटूट लगन के साथ संस्थान के कर्मियों के साथ-साथ संस्थान के आस-पास रहने वाले रोगियों के उपचार में भी तत्पर है। इस समूह में जनरल फीजिशीयन, जनरल सर्जन, बाल-रोग विशेषज्ञ, त्वचा रोग विशेषज्ञ, स्त्री रोग विशेषज्ञ, अस्थि रोग विशेषज्ञ एवं यहाँ तक कि दन्त चिकित्सा के विशेषज्ञ भी अपनी उत्कृष्ट सेवाएँ प्रदान कर रहे हैं। हाल ही के आँकड़े बताते हैं कि औसतन एक माह में विभिन्न चिकित्सकों द्वारा प्रदत्त सेवाओं का प्रतिबिम्ब क्या है?

जनरल फीजिशीयन	—	1200	—	1300	रोगी
जनरल सर्जन	—	500	—	600	"
बाल रोग विशेषज्ञ	—	200	—	500	"
स्त्री रोग विशेषज्ञ	—	800	—	1000	"
त्वचा रोग विशेषज्ञ	—	800	—	900	"
डॉट्स कार्यक्रम	—	अनुमानतः	200	"	
दन्त चिकित्सक	—	300	—	350	"
अस्थि रोग विशेषज्ञ	—	600	—	700	"

इसके साथ-साथ इसी भवन से प्रति माह अनुमानतः 150 — 200 टीकाकरण भी सम्पादित किये जाते हैं। जिसका संचालन सिस्टर ए.एन. एस. शशिकला दास करती है। एक समय था जब वहाँ देखे गये रोगियों को अपने रक्त परीक्षणों के लिये, शुल्क जमा करने के लिये मुख्य चिकित्सालय तक आना पड़ता था। किन्तु आज परिदृश्य भिन्न है। आज उसी सामान्य चिकित्सालय में रोगी का 'सम्पल' भी संग्रहित कर लिया जाता है, उसी भवन में लेखा-पटल के क्रियाशील होने और 'कम्प्यूटरीकरण' के कारण यहाँ देखे जाने वाले रोगियों का पंजीकरण भी अब वहीं हो जाता है। कुछ अन्य बातों पर भी गौर करना उचित प्रतीत

होता है। इसी भवन में दो आप्रेशन थियेटर हैं। प्रथम तल पर नेत्र विभाग का आप्रेशन थियेटर है जिसमें विभिन्न प्रकार के नेत्र सम्बन्धी शल्य क्रियाएँ प्रतिपादित की जाती हैं। कई बार नेत्र रोग से सम्बन्धित मोतियाबिन्द के आप्रेशन के लिये निःशुल्क शिविर भी आयोजित किये जाते हैं। भूमितल पर स्थित आप्रेशन थियेटर का उपयोग स्त्रीरोग विशेषज्ञों एवं जनरल सर्जन द्वारा किया जाता है किन्तु कई अवसरों पर इसका उपयोग प्लास्टिक सर्जन एवं अस्थि रोग विशेषज्ञ द्वारा भी किया जाता है।

संस्थान के सभी कर्मचारियों के लिये औषधि-वितरण की व्यवस्था भी इसी सामान्य चिकित्सालय से क्रियान्वित होती है। रोगियों एवं यहाँ कार्यरत सभी सदस्यों के लिये कैन्टीन की भी व्यवस्था है।



यह सत्य है कि संस्थान के सभी अतिविशिष्ट विभागों ने अपनी खूब ख्याति अर्जित की है किन्तु साथ-साथ यह भी प्रशंसनीय है कि एक छोटे से भवन में एक छोटे से चिकित्सक समूह और एक छोटे से सहायक कर्मियों के समूह की कर्मठता ने सामान्य चिकित्सालय की सेवाओं को भी विशिष्ट एवं सराहनीय बना दिया है। सच ही तो है—छोटा सा उठाया गया कदम ही भविष्य में एक सफल एवं वृहत् नेतृत्व प्रदान करता है।

राम प्रमोद मिश्र

समय

वक्त के पार समय से परे,

खुद को ढूँढते तुम और मैं.....

समय की लम्बी सूनी सड़कों पर

चलते, छाँव तलाशते

संबल बनते, कभी,

कल की आस में आज गंवाते

भूत में ढलते तुम और मैं.....

रेत की तरह मुट्ठी से फिसलता

समय, और इससे जीतने की होड़ में

हारते, पिछड़ते, थकते, ऊबते

तुम और मैं.....

बेरहम वक्त की मार झेलते

वज्र बनते तुम और मैं.....

मरती संवेदनाएँ, दम तोड़ती जिजीविषा

बौने होते आदर्श, छिछले सम्बन्ध

खोती दिशाएँ, बस बहता है तो समय

अजेय, अखण्ड, अमर, सबसे परे

सबसे ऊपर।

कुसुम यादव

Awards



Dr Rajesh Harshvardhan was awarded the Best Research Paper Award in the Oral Paper Presentation (out of 143 papers from 43 countries) at 5th International Patient Safety Congress organized by Apollo Group of Hospitals, Bengaluru, India held during 16-17 Oct 2015 for his Paper on "A study on assessment of KAP status vis-a-vis patient safety across the complete spectrum of healthcare delivery in the Regional Cancer Centre, SGPGIMS, Lucknow" along with Dr S. Gogoi, Prof. Hem Chandra & Prof. Shaleen Kumar.

The International Society for Infectious Diseases (ISID) has selected **Dr. Richa Mishra**, Assistant Professor in the Department of Microbiology, for a Travel Grant Award for Young Investigators from India to help her present her work at the 17th International Congress on Infectious Disease (ICID) at Hyderabad, India. In addition, for the same conference her abstract has been nominated for the Wellcome Trust/DBT India Alliance Poster awards for high quality research.



Prof S P Ambesh of Emergency Medicine department was conferred with Fellowship of National Academy of Medical Sciences.



Prof. Shantanu Pande of Cardiovascular and Thoracic Surgery department has been honoured with Membership of National Academy of Medical Sciences.

Letters to Editor

Dear Newsletter Editorial Team,

Received your newsletter. Thanks a lot for giving me the opportunity to be the part of it. Totally loved the style and coverage. Best of luck for the future issues as well.

Regards
Ankur Bhatnagar

An Appeal

Can we in the New Year take a resolution to make our campus a clean and green MODEL CAMPUS? For this I have a few suggestions. To start with, let us save water. Ration the water supply to particular hours. Care to mend the leaking taps and pipes in your home/work place.

Water your garden in the evening; it is good for the plants also. While watering the lawn or flower beds, care not to leave the pipes at one end to let the beds overflow. Why to wash the driveways, when we can sweep them clean. Again washing your vehicles can be done in limited amount of water. Water is precious, let us be careful not to waste it.

Apposite garbage disposal indicate how well we are educated. Garbage should go into the bin and not strewn near it. Can we ensure necessary gloves and tools for the sanitation workers to pick up the garbage, so that they do not handle it with their bare hands.

Let us evolve a system to clean the campus. For example, Organizing a centralised disposal of plastics, batteries, electronic goods, glassware and toxic items. Let us designate an area to dump the leaves and dry wood which can turn into manure/organic manure for use. As a gift for all employees on foundation day let the administration present 2 cloth bags of sturdy material with an institute emblem saying 'Swachh Bharat', to be used for shopping instead of plastic bags.

Conscious efforts by denizens of the campus and also by the administration can bring in amazing results. I think if we put our minds and heart to these things we can make our campus a model campus.

Preeti Dabaghao

Book Review

Financial Management For Hospital Administrator

Author : **Dr. Harendra Kumar**

Finance and its management has become one of the most demanding aspect of health care industry. The managers responsible for managing finance with non-finance background, find it difficult without specialized knowledge, in easy to understand format. The book 'Financial Management for Hospital Administrators' apparently seems to be one such attempt which covers the three fundamental domains of accounting i.e. Financial, Cost & Management Accounting.

The author has given importance to few topics of Cost Accounting, wherein main objectives are ascertainment of cost and possible containment but without compromising on quality. Budget being one of the thrust areas for managers, one would find the topic covered in this book very interesting more so the practical examples with note of justification against any deviation. Chapter on Audit & Vouching said to be the watch dog, may help the managers to hone their professional skill, while handling financial matters.

The book has fairly good reflection of author's rich experience in the super specialty tertiary care center, who is presently working as Sr. Accounts Officer at SGPGIMS. I feel this book would be of great help to the administrators, students, researchers and academicians who are part of health care industry.

Rajesh Harshvardhan



Forthcoming Events

- 13th -14th February, 2016 : SGPGI Breast Course 2016
- 18th -21st February, 2016 : IACTSCON 2016- Indian Association of Cardiovascular & Thoracic Surgeon
- 26th -28th February, 2016 : 4th SGPGI PG Anesthesia Refresher Course (SGPGI PG-ARC 2016)
- 27th -28th February, 2016 : Update in Clinical Microbiology-II

Best Moments in a Doctor's Life

- * The sound of restarting heartbeats when resuscitating a patient.
 - * Closure after a difficult surgery where only the surgeon knows how he / she has saved a life.
 - * A perfect surgery / procedure / stenting without complication.
 - * Seeing the beautiful cute face of a healthy newborn.
 - * Managing a major bleeder successfully.
 - * Reversal of paralysis after thrombolysis (clot-buster injection).
 - * Waking up of a comatose patient.
 - * The genuine "Thank You" of a patient relieved of pain / stress / illness.
 - * When someone random recognizes you in public and thanks you in front of your kids / family.
 - * When the poorest of the poor collect enough money and gift you sweets for treating them free.
 - * When a patient too educated to believe your truth goes to your professional competitors and many others, and is told the same, so returns to you with a greater faith.
 - * When you can answer all questions asked by students after a lecture / clinic (without Herapheri / bluffing).
 - * When you silently prove your clinical argument with good results.
 - * When you know that it's not only the medical skills, but also your passionate involvement, speed and coordination that saved the patient.
 - * When traffic police "Let you go" for minor offences just because you are a doctor, especially on the way to an emergency.
 - * When someone says "I want to become a Doctor like you".
- There are many more. Every day is filled with both tears and smiles, and the doctor has to balance these by using his/her soul as the fulcrum. At the end of the day, death humbles everyone, but it is the doctor who stands to defend everyone else's life without thinking if they are good or bad, friend or enemy.

The Show Goes On



After a grand finale with daandiya Raas, an audio visual show recapturing the fun events held throughout the year was enjoyed by all which was followed by “Tanoura” dance performance by Mr. Ahmed mesmerizing the audience.

Dr. Aditya Kapoor, the outgoing President of Faculty club along with an accomplished squad of Drs. Brajesh Singh, Vijay Upadhyay, Harshvardhan, Prashant, Rahul, Neetu Soni, Meenal Aggarwal and Dharmendra held a series of events of Sports, Cultural, Festivals, Quizzes for the faculty members and their families throughout the year.

The enthusiastic new executive team of faculty club under the Presidentship of Prof. Uday C Ghoshal are Drs. Arun Srivastava, Mohan Gurjar, Samir Mohindra, Ujjala Ghoshal, Anupama Kaul, Supriya Sharma, D Bhadauria, Ankur Bhatnagar, Vikas Kanojia alongwith Bhavana Arya and Shilpi Singh as Co-opted Members. The new Faculty Club made their debut with a rocking Deewali Mela with fun, food and games. Dr. Aanchal Kesri and Dr. Asha Bharti won prizes for the first and second best food stalls respectively.

Prerna Kapoor



Nursery School

Drawings were made by tiny tots to celebrate Children's Day. The drawing and colouring were done by the little ones and the outline were done by the teachers thereafter to give a finishing touch.



Children at Crèche

The children at the crèche, Hobby center are always involved in some activity or other as a part of their holistic development. They celebrated graduation day, sports day and a day of festivities performed in a kaleidoscope. Santa visited them on the eve of Christmas and distributed gifts, much to the delight of these tiny tots.



Glimpses of 32nd Foundation Day



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