Editorial Board:

Chairman : Prof. Sanjeev Misra
Chief Editor : Dr. Arvind Sinha
Editors : Dr. Rajesh Sharma, Dr. Poonam Elhence
Dr. Koushik Sinha Deb, Dr. Pankaj Bhardwaj
Dr. Pushpinder S. Khera, Dr. Amit Goyal, Dr. Neeraj Gupta
Students' Representatives : Sarthak
Nagma Sheenam
On behalf of AIIMS, Jodhpur, I am happy to know that the second issue of the Institute magazine has been released. Rohida strives to give a glimpse of the ongoing journey of AIIMS, which we started about two years back. We began our journey on the 17th of September, 2012 with the starting of our MBBS Course and later, the Nursing course in 2013. As the Institution continues to grow, Rohida will continue to document the progress.

As I had shared my views on education in my last communication with you in the first edition of Rohida, I want to reiterate once again that education, whether in receiving or delivering, is the best apprenticeship of life. Our students will be the future building blocks of our society and we are focused on providing the best of education to our students. I sincerely thank all the faculty and staff for their efforts towards the development of the Institution.

Since we started our patient care services in the OPD last year, it gives me immense pleasure to note that we have made a strong impact in the area of providing quality healthcare at a minimum cost. Till date, we have attended to around 60,000 patients in our OPD and these numbers are growing every day. We are providing patients attending our OPD, the best of services, in terms of easy access to the best of human resources and state of the art investigative services, all with a robust support of IT infrastructure.

We have started our IPD services (three general wards) from the 4th of February, 2014 and our first patient was admitted on the 5th of February. We are in the process of starting three more general wards. A ten-bedded day case ward with two minor operation theatres (with anaesthesia back-up) and a bronchoscopy suite will also be opened shortly. This will allow the clinicians more leeway in managing challenging cases and will, at the same time, allow proper ward teaching for our students. The work on major operation theatres, intensive care unit (ICU) and neonatal and pediatric ICU is also underway.

It gives me immense pleasure to state that the faculty at AIIMS, Jodhpur has participated and contributed substantially in fostering academic and research bonds with Institutes of National and International repute and I feel as enthusiastic as them in their endeavor.

I congratulate all the Faculty, Administration and supporting staff at AIIMS, Jodhpur for working tirelessly in bringing the Institute to where it is today.

I also extend my heartiest congratulations to the Editorial Board of “Rohida” for taking out invaluable time from their busy schedules to make this second issue of Rohida a success and also all the faculty members and students who have actively contributed to the magazine.

Dr. Sanjeev Misra
Director & CEO
MESSAGE

Dear Readers,

It has been more than six months since the maiden issue of Rohida, the college newsletter of All India Institute of Medical Sciences (AIIMS) Jodhpur, was published. The aim of the issue remains the same: To document the progress the Institution has made over time and to provide a creative outlet for the students and staff. We have added some invited articles which we thought would be useful for students and staff alike.

We have incorporated an article on Stress Management which details out various ways to manage stress and briefly touches upon various relaxation techniques which are very useful. We have included an article on Memory and Recall which also gives tips about how to construct a study session to maximize the potential for recall.

The new logo of the Institute has been finalized after a lot of hard work and we thought it was imperative to document the thinking and rationale behind the various components of the logo, something which is missed in the usual official documentations!

The article on IT services in AIIMS, Jodhpur spells out the IT Infrastructure that has been established in the OPD and IPD to allow a paperless health care delivery system which is both fast, as well as efficient. This allows us the luxury of having a fully searchable database of all OPD and IPD patients since the start of these services at the Institute.

A High School “Yearbook” type of section has been introduced in this edition. I think, as the Institution grows and expands, it will be a good idea to look back on the alumni of the Institute via the medium of Rohida. The photographs of the students have been captioned with small one liners which are supposed to be in jest and are not supposed to be taken too seriously!!

I thank our Director, Dr Sanjeev Misra, for providing an enabling atmosphere that allows both the faculty and students to flourish. I also thank the editorial team for putting in long hours in bringing out this issue. I hope with these changes, Rohida keeps pace with the Institution and evolves as the Institute grows.

Happy Reading

Dr. Arvind Sinha
Chief Editor
MILESTONES

August 2013
MOU signed between MOHFW & Harvard School of Public Health to establish School of Public Health at AIIMS, Jodhpur and AIIMS, Raipur

22nd August, 2013
Community based outreach Immunization services started in three areas by Department of Community Medicine & Family Medicine to cover the children left out in Routine Immunization (RI)

10th September, 2013
Workshop on Suicide Prevention

24th September, 2013
Inauguration of OPD Services at AIIMS, Jodhpur by Shri Ghulam Nabi Azad, Union Health Minister and Shri Ashok Gehlot, Chief Minister, Rajasthan

26th September, 2013
HIS Services for the OPD at AIIMS, Jodhpur

25th October, 2013
Sleep Symposium, NAMSCON

25th - 27th October, 2013
53rd Annual Conference of National Academy of Medical Sciences - NAMSCON 2013

9th - 10th December, 2013
National Conference on Ethics in Medical Research - ETHICSCON 2013

13th -14th December, 2013
CME by Department of Microbiology- Hospital Setting: Infection Control & Hygiene

January 2014
Printing of in-house New Year Calendar 2014 of AIIMS, Jodhpur, designed by Dr. Arvind Sinha & Dr. Koushik Sinha Deb

9th January, 2014
Lecture on Research Methodology by Dr. G K Singh, Director, AIIMS, Patna

10th January, 2014
Lecture on GATT by Dr. G K Singh, Director, AIIMS, Patna

11th - 12th January, 2014
1 st Annual Pelvi-Acetabular Cadaveric Workshop by Department of Orthopaedics

17th January, 2014
Started Clinical Grand Rounds, the first case taken by Dr. Neeraj Gupta, Department of Paediatrics

19th January, 2014
Started the first Clinico-Pathological conference, case discussed by Dr. Ramkaran Chaudhary, Dr. Poonam Elhence, Dr. Pushpinder Khera & Dr. Puneet Pareek

30th January, 2014
Fourth Dimension- Beyond Medicine; 1st lecture by Dr. Murad E. Lala, Senior Consultant Surgical Oncologist at P D Hinduja Hospital, Mumbai

1st February, 2014
4 th Annual National Conference on “Consortium against Rabies” - CARCON by Department of Community Medicine & Family Medicine

4th February, 2014
Saraswati Puja celebrated

5th February, 2014
1st IPD Admission
Departments' Achievements

Department of Anaesthesia and Critical Care

Department Activities:
Indian Society of Anaesthesiologists (ISA) city branch CME on “Anaesthetic management of patient with perforation peritonitis” presented by Senior Resident, Dr. Vandana Sharma, was organised at AIIMS by our Department on 25th Jan, 2014.

Dr. PK Bhatia:
Conference/ Workshops/Trainings:
1. API-DIAS (Dissemination of Updated Information through API Speakers) at Jodhpur (29th Dec, 2013) Lecture: Management of Non-Cancer Pain: From Guidelines to Practice
2. CME Hospital Infection 2013 at AIIMS Jodhpur (13th-14th Dec, 2013) Participated in Panel Discussion on VAP
3. XVI RAJISACON (Rajasthan State ISA Conference) and 10th WISACON (West zone ISA Conference) at Udaipur (27th – 29th Sept) Workshop on Mechanical Ventilation and lecture on Patient-Ventilator Asynchrony; Conducted PG Quiz
4. EZCCCON 2013 at Shillong (19th-22nd Sept) – Current Status of Albumin in Critical Care

Book Author/ Chapter contribution:

Dr. Nikhil Kothari:
Conference/ Workshops/Trainings:
1. XVI RAJISACON (Rajasthan State ISA Conference) and 10th WISACON (West zone ISA Conference) at Udaipur (27th – 29th Sept) Workshop on Mechanical Ventilation

Book Author/ Chapter contribution:

Dr. Shilpa Goyal:
Article Published: 1
Conference/ Workshops/Trainings:
1. Invited faculty for guest lecture during East Zone Critical Care Conference 2013 (EZCCCON 2013) at NEIGRIHMS, Shillong

Department of Anatomy

Department Activities:
1. Organized cadaveric workshop on Pelvi-Acetabular Trauma in collaboration with Department of Orthopaedics, AIIMS, Jodhpur
2. Twenty five people registered themselves for voluntary body donation
3. Nine human cadavers were received & embalmed for teaching purposes
4. A cadaveric workshop on Anterior & Lateral Skull base Surgery has been planned in March 2014 in collaboration with Dept. of Otorhinolaryngology, AIIMS, Jodhpur
5. Three STS projects reports were submitted to ICMR
6. Five STS project proposals were submitted and are under consideration by ICMR
7. Faculty members of Department of Anatomy have presented four oral and 2 poster presentations in national and international conferences
8. Eight scientific papers - published in national and international journals
9. Prepared and distributed Histology and Dissection manual among the students
10. Installed 12 bodies - Mortuary Chamber for preservation of cadavers
11. Carrying out tissue processing for histology slides

Dr. Surajit Ghatak:
Articles Published/ Accepted: 2
Editorials: 2

Training, Workshops and Conferences:
1. Chaired a session on “Medical Education” at National Conference of the Anatomical Society of India in Nov 2013 held at PGIMER, Chandigarh
2. Chaired a session on “plagiarism” at ETHICSCON held in Dec 2013 at AIIMS, Jodhpur
3. Chaired two sessions during Cadaveric workshop on “Pelvi-acetabular Trauma” in Jan 2014 at AIIMS, Jodhpur
4. AIIMS- APASI Cadaveric Workshop on Pelvi-Acetabular Trauma at AIIMS, Jodhpur
5. 53rd Annual Conference of National Academy of Medical Sciences, India (NAMSCON) 2013
6. 61st National Conference of Anatomical Society of India (NATCON-2013)
7. Presented a paper titled, 'Variation in origin and insertion of biceps brachii' in 'NATCON-61

Administrative/Academic responsibilities:
1. Appointed member of the editorial board of the Journal of the Anatomical Society of India
2. Elected member of the Executive Committee of the Anatomical Society of India

Dr. Brijendra Singh:

Book Published:

Training, Workshops and Conferences:
1. Chaired session in UP ASICON 2013 at Rama Medical College (RMC), Kanpur
2. Chaired session in ASI NATCON 2013 at PGIMER, Chandigarh
3. Chaired session in NACO Stem Cell 2014 at AIIMS, Raipur
4. Presented a paper titled, 'Low formation of Median nerve in arm-an interesting case'-NATCON, 2013 at Chandigarh
5. Presented a paper titled 'Human Foetal Pancreases- Electron Microscopic Study' UPASICON 2013 at RMC, Kanpur
6. National Conference on Ethics in Medical Research (ETHICSCON 2013) at AIIMS, Jodhpur from 9th-10th Dec, 2013
7. 53rd Annual conference of National Academy of Medical Sciences, India (NAMSCON) 2013 at AIIMS, Jodhpur from 25th – 27th Oct, 2013

Administrative/Academic responsibilities:
1. Selection Board Member for Anatomy in Public Service Commission (UP-Allahabad)
2. Post Graduate External Examiner for Anatomy at Baba Farid University of Health Sciences, Punjab

Dr. Shilpi Gupta Dixit:

Articles published/ Accepted: 2

Training, Workshops and Conferences:
1. Participated in International Conference on Research Methodology and Scientific Writing (ICRMSW) 2013
2. National Conference on Ethics in Medical Research (ETHICSCON) 2013
3. 53rd Annual Conference of National Academy of Medical Sciences, India (NAMSCON) 2013

Research Projects:
1. ICMR- STS (2013): titled - A study to analyze relationship between radiological morphometric measurements of knee joint and symptomatology of osteoarthritis

Dr. Dushyant Agrawal:

Training, Workshops and Conferences:
1. AIIMS- APASI Cadaveric Workshop on Pelvi- Acetabular Trauma at AIIMS, Jodhpur
2. 53rd Annual Conference of National Academy of Medical Sciences, India (NAMSCON) 2013
3. 61st National Conference of Anatomical Society of India (NATCON-2013)
4. 39th Annual meeting of ISHG (Indian Society of Human Genetics) and International Conference of Human Genetics
5. Presented a paper titled, 'Classification of Scapulae Based on Variations in Shape and Dimensions of Suprascapular Notch : A Study on Dried Scapulae' at NATCON-61
6. Attended Twelfth ICMR Course on Medical Genetics and Genetics Counseling at SGPGI, Lucknow

Research Projects:
1. Evaluation of Size of Lower Intervertebral Spaces and Its Relation With Severity of Low Back Pain in Housewives of Jodhpur City

Dr. Ashish Nayyar:

Articles published: 1

Training, Workshops and Conferences:
1. Participated in International Conference on Research Methodology and Scientific Writing (ICRMSW) – 2013
2. National Conference on Ethics in Medical Research (ETHICSCON) 2013
3. 53rd Annual Conference of National Academy of Medical Sciences, India (NAMSCON) 2013
4. AIIMS- APASI Cadaveric Workshop on Pelvi- Acetabular Trauma from 11th - 12th Jan, 2014 at AIIMS, Jodhpur
5. Presented a paper titled “Multimedia Teaching learning module of Human developmental anatomy in comparison to traditional approach” in ICRMSW – 2013

Department of Biochemistry

Department achievements (since September 2013)
1. Department has been recognized as the National Referral Centre for Lead Toxicity
2. Department has participated in the organizing of ETHICSCON 2013
3. Department shall be organizing the 41st Annual Conference of Association of Clinical Biochemists of India (ACBI), in Dec 2014 at AIIMS, Jodhpur
4. ACBI has won the bid for organizing the 15th APFCB Congress in 2019 and Dr. Praveen Sharma has been nominated the Organizing Secretary

Dr. Praveen Sharma:
Publications: 08

Conferences & Workshops attended:
1. Invited speaker at 13th APFCB Congress 2013, Bali, Indonesia from 27th - 30th Oct, 2013
3. Delivered Oration (Awadhesh Saran Oration Award) at 40th Annual Conference of Association of Clinical Biochemists of India (ACBICON 2013) 3rd – 6th Dec, 2013 at New Delhi
4. Chaired session ”IFCC Young Scientist Task force session” at 40th Annual Conference of Association of Clinical Biochemists of India (ACBICON 2013) on 5th Dec, 2013
5. Organizing Chairman, ETHICSCON 2013
6. Nominated the Organizing Secretary for 41st ACBICON, Dec 2014
7. Nominated the Organizing secretary for 15th APFCB Congress, 2019

Book or Book Chapter:

Dr. Vanita Lal:
Conferences & Workshops attended:
1. ACBICON 2013- Presented a poster at the 41st ACBICON 2013, New Delhi
2. NAMSCON 2013, AIIMS, Jodhpur from 25th to 27th Oct, 2013
3. Presented a poster in the 53rd NAMSCON 2013 at AIIMS, Jodhpur
4. ETHICSCON 2013, AIIMS, Jodhpur from 9th to 10th Dec, 2013

Dr. Indu Saxena:
Papers Published: 02

Conferences & Workshops attended:
2. NAMSCON 2013- 2 Posters presented at 53rd Annual Conference of National Academy of Medical Sciences 2013, Oct 25th-27th at AIIMS, Jodhpur
3. ETHICSCON 2013 from 9th to 10th Dec, 2013

Dr. Purvi Purohit:
Publications: 04

Conferences & Workshops attended:
1. 13th APFCB Congress at Bali Indonesia from 27th -30th Oct, 2013. Poster presented at 13th Asia Pacific Federation of Clinical Biochemistry and Laboratory Medicine Congress held at Bali, Indonesia
2. ETHICSCON 2013 from 9th to 10th Dec, 2013

Book or Book Chapter:
Co-Author for Biochemistry - An Illustrated review by Thieme Publishers. (In Process)

Department of Community Medicine & Family Medicine

Department Activities:
1. Integrated Vector control Programme for AIIMS Jodhpur Campus: Continuation of Implementation, Monitoring
2. Screening of I year B.Sc. Nursing students for Hypertension and other Cardiovascular Risk factors
3. Hepatitis B Vaccination Programme for Medical Students and Nursing students
4. Conducted Visit of NIHFW team from New Delhi for 18th Professional Development course (PDC) in Management, Public Health & Health Sector Reforms for District Medical Officers from 2nd to 6th Sept, 2013
5. Outreach Immunization activity started on 22nd Aug, 2013

Celebration of World Health Days:
1. Celebrated World Heart Day: “Take the road to a healthy heart” on 28th Sept, 2013 Seminar on Cardio Vascular Diseases by II MBBS students
3. Delivered Health Talk to School Children and Teachers at Haddi Mill, Jodhpur on the Occasion of World Leprosy Eradication Day on 30th Jan, 2014

Dr. Pankaja Raghav:
Articles published: 2

Research projects:
1. Determining competencies for undergraduate curriculum of Community Medicine and Family Medicine
2. Providing immunization to dropped out children in urban slum population of Jodhpur: concept note is shortlisted for funding by Millennium Alliance
3. Management of Animal Bite cases in different Health settings of Jodhpur

Administrative/ Academic responsibilities:
1. Member of ‘Consultation Group’ of experts and stakeholders to understand epidemiology of re-emerging H1N1 in the region and other communicable diseases
2. Member of National Academy of Medical Sciences
3. Vice President, Indian Public Health Association, Rajasthan Chapter
4. Member of Task force on Community Medicine and Family Medicine Curriculum Development for Six AIIMS

Conferences & Workshops/Trainings:
1. Organizing Chairperson for the “4th National Conference of Consortium Against Rabies-CARCON 2014” held on 1st Feb, 2014 at AIIMS Jodhpur
2. Resource person for a training program for the community on water borne diseases and preventive measures at Jal Bhagirathi Foundation, Jodhpur on 17th January, 2014
3. Conducted a session as resource person on “Challenges and Opportunities in Control of Vector Borne Diseases” in the National Conference on Recent Trends in Applied Entomology (NCRTAE-2014) at Lachoo Memorial College of Science and Technology, Jodhpur on 11th Jan, 2014
5. Resource person on ‘Faculty Development Programme and focus areas of research’ during Conclave on Community & Family Medicine at New Delhi from 17th - 20th Dec, 2013
6. Conclave on Community & Family Medicine in Institutes of National importance with special emphasis in new AIIMS at NIHFW, New Delhi from 17th-20th Dec, 2013
7. CME – Hospital Setting: Infection Control & Hygiene at AIIMS Jodhpur from 13th - 14th Dec, 2013
8. National Conference on “Ethics in Medical Research” (ETHICSCON 2013) at AIIMS Jodhpur from 9th - 10th Dec, 2013
9. 53rd Annual Conference of National Academy of Medical Sciences, India (NAMSCON 2013) “NAMS Regional Symposium on Sleep Medicine” at AIIMS Jodhpur from 25th - 27th Oct, 2013
10. “Suicide Prevention” workshop at AIIMS Jodhpur on 10th Sept, 2013

Dr. Ranabir Pal
Articles Published: 14

Editorial board Member:

Books/ Chapters contributed: 03

Conference/ Workshop/Trainings:
1. Joint Organizing Secretary and Member, Scientific Programme Committee: International Conference on ‘Research methodology and Scientific Writing’ Dec 2013 , MG University, Kottayam
2. Treasurer, Organizing Committee and Member Scientific Programme Committee: 4th Annual Conference of Consortium Against Rabies CARCON-2014 on 1st Feb, 2014 at AIIMS, Jodhpur
3. Member, Organizing Committee (Scientific team), 53rd Annual Conference of National academy of Medical Sciences (NAMSCON-2013) October 2013 at AIIMS, Jodhpur
4. Faculty development programme: 68th National Course on Educational Science for Teachers of Health Professionals Feb 2014 JIPMER, Puducherry
5. Resource Person: Workshop on Medical Education Technology at Medical Education Unit, AIIMS, Jodhpur from 2013-2014
6. Resource Person: Symposium ’Medical Ethics’ International Conference on ‘Research methodology and Scientific Writing’ Dec 2013, Mahatma Gandhi University, Kottayam
7. Resource Person: ‘How to present a scientific paper’ organized by West Bengal Government College of Nursing, SSKM Hospital campus, Kolkata, Nov 2013
8. Invited as Resource Person: Chief Analyst and Expert in Injury Epidemiology on the issues related to researches at level one
international meet on Emergency Medicine, Trauma & Disaster Health 9th INDUS-EM 2013, Kerala


11. Rajasthan Conclave: Desert Medicine Research Centre, Jodhpur. Theme: Collaborative Research in July 2013

12. Resource Person: Workshop on Medical Education Technology organized by Midnapore Medical College, Paschim Medinipur, West Bengal, July 2013

Reviewer/Adjudicator/Examiner/paper setter of PhD Doctoral/Post-graduate (MD/MPH) courses and entrance examinations:
1. Rajshahi University, Bangladesh
2. West Bengal University of Health Sciences, India
3. Nizam’s Institute of Medical Sciences, Andhra Pradesh
4. King George’s Medical University, Lucknow

Founder Member: Indian Academy of Pediatrics (IAP) Subspecialty Chapter on ‘Research in Child Health’
Life Member: John Snow Society; Confederation of Epidemiological Associations; White Ribbon Alliance; International Nepal Epidemiological Association, Consortium Against Rabies

Dr. Pankaj Bhardwaj
Articles Published: 5

Conferences & Workshops/Trainings:
1. Organizing Secretary for 4th National Conference on Rabies CARCON 2014 at AIIMS Jodhpur on 1st Feb, 2014
2. Resource person for dissemination workshop on ICMR funded study on “Critical evaluation of negative studies published in Indian Medical Journals” at IIPH Gandhinagar, Jan 2014
3. Consultation workshop on National Water Policy with Jal Bhagirathi Foundation at Jodhpur in Dec 2013
4. Member of Task force on ‘Faculty Development Programme and focus areas of research’ during Conclave on Community & Family Medicine at New Delhi from 17th - 20th Dec, 2013
5. Resource Person in Basic Medical Education Workshop at Era’s Medical College, Lucknow in Nov 2013
6. Indian Public Health Conference-DSB at VMMC & Safdarjang Hospital, New Delhi, 2013
7. Conclave on Community & Family Medicine in Institutes of National importance with special emphasis on new AIIMS at NIHFW, New Delhi, 2013
8. National Conference on Ethics in Medical Research-ETHICSCON 2013 at AIIMS Jodhpur
9. 53rd Annual Conference of NAMS-NAMSCON , 2013 at AIIMS, Jodhpur

Administrative/ Academic responsibilities:
1. Joint Secretary, Indian Public Health Association, Rajasthan

Dr. Neeti Rustagi:
Selected for FAIMER Fellowship 2014 at CMC, Ludhiana

Conference/Workshops/Trainings (SR/JR):
1. Dr. Dewesh Kumar and Dr. Shikha attended a 5 day workshop at NIHFW, New Delhi on Public Health Nutrition from 18th - 22nd Nov, 2013
2. Dr. Mahendra Singh, Dr. Dewesh Kumar and their team won 1st prize in Quiz Competition in “CME-Hospital Settings Infections and Control” organized by Department of Microbiology, AIIMS Jodhpur, from 12th - 13th Dec, 2013
3. Dr. Dewesh Kumar won 3rd prize in Poster Competition at NCRTAE 2014, Jodhpur. Dr. Mahendra Singh, Dr. Shikha and Mrs. Preeti Mathur also presented 3 posters in CARCON 2014 at AIIMS Jodhpur
4. Dr. Mahendra Singh, Dr. Dewesh Kumar, Dr. Shikha and Mrs. Preeti Mathur participated in NAMSCON 2013, CME-Hospital Settings Infection and Control 2013, NCRTAE 2014 and CARCON 2014.

Department of Dentistry

Department Activities:
Has a fully functional OPD and have performed 2935 procedures for 1971 patients who have visited Dental OPD since 27th July, 2013. Commonly done procedures include Extractions, third molar removal, RCT, Apisectomy and restorations.

Dr. Ankita Chugh:
Conferences & Workshops/Trainings:
1. Attended a 3 day workshop on Principles in Craniomaxillofacial Fracture Management in New Delhi from 18th-20th Oct, 2013 conducted by Association of Craniomaxillofacial Fracture management (AOCMF)
2. 53rd Annual Conference of NAMS-NAMSCON, 2013 at AIIMS, Jodhpur

Department of ENT- Otorhinolaryngology

Dr. Amit Goyal:
Articles Published: 2

Conferences & Workshops/Trainings:
1. Invited talk on Cochlear Dysplasias during 33rd Annual Conference of Neuro-otological & Equilibriometric Society of India at Ujjain in Feb, 2014
3. Attended Stapes Carnival at Jaipur in Aug, 2013
4. Reviewed papers for International Journal of Pediatric Otolaryngology and British Journal of Medicine & Medical
Research
5. Member, Organizing Committee, NAMSCON, 25th to 27th Oct, 2013 at AIIMS, Jodhpur

External Examiner:
MBBS Examiner for North East Hill University, Shillong and Kachchh University, Bhuj

Department of Forensic Medicine & Toxicology

Department Activities:
Students made outstanding charts and models as part of their teaching programme.

Dr. Puneet Setia:
Article published: 1

Conferences & Workshops/Trainings:
1. Treasurer in the conference "ETHICSCON 2013", AIIMS Jodhpur, 9th to 10th December, 2013

Department of General Medicine

Dr. Vikram Singh:
Article Published: 1

Conferences/Workshops/Trainings:
1. CME on Hospital Setting: Infection Control and Hygiene, AIIMS Jodhpur
2. 9th International Symposium on Diabetes 2014 from 18th to 19th Jan, 2014 at Gurgaon
3. Delivered a talk on Prevention and Management of Diabetes Mellitus and Hypertension at Jodhana Senior Citizens Society on 26th Jan, 2014 at Jodhpur
4. Part of Panel Discussion on CME on Hospital Setting: Infection Control & Hygiene

Department of General Surgery

Dr. Ramkaran Chaudhary:
Conferences & Workshops/Trainings:
1. Participated in workshop on "Pharmacovigilance in clinical trials" on 6th July, 2013, Organised by Deptt. of Pharmacology, AIIMS, New Delhi
2. Participated in ASIRAJ 2013 (Annual conference of Rajasthan chapter of Association of Surgeons of India) from 18th to 20th Oct, 2013 at SMS Medical College, Jaipur
3. CPC presentation on Gastrointestinal stromal tumors (GIST) on 17th Jan, 2014

Dr. Mahendra Lodha:
Conference/Workshops/Trainings:
1. Participated in 8th AMASICON (National conference of association of minimal access surgeons of India) at Indore from 22nd to 25th Aug, 2013
2. Participated in ASICON 2013 (Annual conference of Association of Surgeons of India) from 24th to 29th Dec, 2013 held at Ahmedabad

Dr. Mahaveer Singh Rodha:
Conferences & Workshops/Trainings:
1. Participated in ASIRAJ 2013 from 18th to 20th Oct, 2013 at SMS Medical College, Jaipur
2. Participated in Trauma 2013 from 8th to 10th Nov, Organised by JPNA Trauma Centre at AIIMS, New Delhi
3. Participated in IAGES Fellowship Workshop from 16th to 19th Jan at Shriram Hospital, Jodhpur
4. Attended the National Conference of IAGES 2014 at SRM University, Chennai from 13th to 16th Feb, 2014
5. Selected as Fellow, IAGES

Department of Microbiology

Department Activities:
A two day CME “Hospital Setting- Infection Control and Hygiene” was organized by Department of Microbiology from Dec 13th to 14th, 2013 at AIIMS, Jodhpur. The aim of the CME was to provide a common platform to Microbiologists, Clinicians, Nursing staff, Students, other Health care associated staff to share the latest developments in various aspects of Hospital Acquired Infections and to get a solution and direction to control/reduce these infections.

Dr. T D Chug, National Emeritus & Professor of Microbiology, National Academy of Medical Sciences, India was the Chief Guest for the Inaugural session & Dr. Kamal Kant, Principal, S N Medical College, Jodhpur was the Guest of Honour. Dr. Sanjeev Misra, Director, AIIMS, Jodhpur welcomed the Chief Guest & all the delegates.

The opening talk of CME was delivered by Dr. T D Chug on “An Overview of Infection Control in a Newly Established Hospital Setting”. The two day CME included 14 guest lectures on various aspects of Hospital infection & control; two panel discussions; one Quiz session and one Poster session with 16 Poster presentations.

Presentations in CRP/CRC’s of Institute:
The Department of Microbiology presented a talk on “Sample collection & transport” keeping in mind that most of the clinical OPDs are running actively & Indoor facility will also be starting soon.

Dr. Vijaya Lakshmi Nag:
Papers presented/ Published/ Accepted: 07

Conferences & Workshops attended:
1. 4th National Conference of Consortium against Rabies; 1st Feb, 2014 at AIIMS, Jodhpur
2. ETHICSCON 2013, 9th-10th Dec, 2013
3. 3rd Biennial ECTA meeting from 6th-9th Nov, 2013 at Singapore
4. NAMSCON 2013, 25th to 27th Oct 2013 at AIIMS, Jodhpur
5. First Advanced Training on Data Analysis using SPSS 22nd & 24th Aug, 2013 at AIIMS, Jodhpur
6. Rajasthan CONCLAVE, 27th June, 2013 at DMRC, Jodhpur
7. Delivered Guest Lecture on “New diagnostic tools for Rabies: Aids for early detection” on 1st Feb, 2014 at CARCON, AIIMS, Jodhpur

Dr. Anuradha Sharma:
Paper presented/ Published/ Accepted: 01

Conferences & Workshops attended:
1. NAMSCON 2013, 25th to 27th Oct, 2013 at AIIMS, Jodhpur
2. Laws applicable to Hospitals 26th to 27th Sept, 2013 at Chandigarh
3. First Advanced Training on Data Analysis using SPSS 22nd & 24th Aug, 2013 at AIIMS, Jodhpur
4. Rajasthan CONCLAVE; 27th June 2013, DMRC, Jodhpur
5. Delivered Guest Lecture on Hospital Acquired Viral Infections & their Control

Dr. R S Gadepalli:
Paper presented/ Published/ Accepted: 02

Conferences / Workshops attended:
1. MICROCON, 20th -24th Nov, 2013, Hyderabad
2. NAMSCON 2013, 25th to 27th Oct 2013 at AIIMS, Jodhpur

College of Nursing

Department Activities:
1. Students participated in Pulse Polio Immunization campaign from 19th-21st Jan, 2014
2. Personality Development classes were organized for students at AIIMS, Jodhpur from 25th-27th Nov, 2013
4. Faculty and students of College of Nursing attended a scientific session on “Suicide Prevention” at AIIMS, Jodhpur on 10th Sept, 2013
5. Articles published/ accepted (Department): 10

Prof. Raj Rani:
Training, Workshops and Conferences:
1. Participated in Panel Discussion, CME: Hospital Infection-Hospital setting: Infection Control & Hygiene, AIIMS, Jodhpur on 13th & 14th Dec, 2013
4. As President, North zone attended Pre-conference NRSI Executive Meeting at 17th Annual Conference on ‘Epidemiology of chronic diseases: Nursing Research Perspective” organized by Manikaka Topawala Institute of Nursing, Chauga in collaboration with Nursing Research Society of India, 24th Oct, 2013
5. Organized 2nd NRSI North Zone workshop on “Qualitative Vs Quantitative Research Methodology”, Adesh University, Bathinda on 19th Oct, 2013 as President NRSI : North Zone

Book/ Chapter contributed:

Dr. Ashok Kumar
Training, Workshops and Conferences:
1. Attended International Conference on Multidisciplinary Health Care, AIIMS, New Delhi on 11th & 12th Jan, 2014
2. Attended CME: Hospital Infection- Hospital setting: Infection Control & Hygiene, AIIMS, Jodhpur on 13th & 14th Dec, 2013
3. Participated in National Conference on Ethics in Medical Research: ETHISCON, AIIMS, Jodhpur on 9th-10th Dec, 2013
4. Completed Post Graduate Diploma in Hospital Management from NIH&FW, New Delhi, 2013
5. Presented a paper titled “Risk factors of Pressure Ulcer Among Patients” at International Conference on Multidisciplinary Health Care, AIIMS, New Delhi on 12th Jan, 2013

Department of Obstetrics & Gynaecology

Dr. Pratibha Singh:
Conferences & Workshops/Training:
1. Attended conference in Lucknow ‘ UPCOG -2013’ from 30th Nov to 1st Dec, 2013
2. Delivered a lecture as Faculty on ‘Cholestasis of pregnancy’ at SGPGI Lucknow in a CME on “At risk mother & fetus” from 18th Jan to 19th Jan, 2014

Dr. Shashank Shekhar:
Conferences & Workshops/Training:
1. Workshop of observational studies at SGPGI Lucknow from 29th Sep to 2nd Oct, 2013
2. Conference “fertivision 2013” in Delhi from 7th-9th Dec, 2013
3. Workshop on “protocolled development for Cochrane systemic review” at CMC Vellore from 3rd -7th Feb, 2014

Dr. Archana Mishra:
Conferences & Workshops/Training:
1. Joined the Editorial board of Advanced Medical Sciences
Attended 35\textsuperscript{th} annual conference of AOGD in Delhi from 20\textsuperscript{th} - 23\textsuperscript{rd} Sep, 2013

\textbf{Department of Ophthalmology}

Dr. Suwarna Suman:
Article Published/Accepted: 1

\textbf{Department of Orthopaedics}

Department Activities:

Articles Published (Department): 5
1. International Publications: 2
2. National Publications: 2
3. Review Article: 1

Research Projects (Department): 3
1. ICMR Project: 1 submitted
2. STS Project: 2 submitted

Dr. Abhay Elhence:

Conference/Workshops/Training:
1. Faculty at the American Academy of Orthopaedic Surgeons (AAOS)\textsuperscript{'s} Pre-Conference Workshop on Pelvi-Acetabular Trauma at the Annual Conference of Indian Orthopaedic Association at Agra in December, 2013.
2. Faculty at “Pelvi-Acetabular Workshop at GOACON” in February, 2014 at Ahmedabad.
3. Conducted the AIIMS-APASI Cadaveric Pelvi-Acetabular International Workshop from 11\textsuperscript{th} to 12\textsuperscript{th} January, 2014 at AIIMS Jodhpur
4. Member, Organizing Committee, NAMSCON, 25\textsuperscript{th} to 27\textsuperscript{th} Oct, 2013 at AIIMS, Jodhpur

Administrative/Academic responsibilities:
1. Appointed “Secretary” of the “Association of Pelvi-Acetabular Surgeons of India”

Dr. Divesh Jalan:
Fellowship:
1. Attended the “Johnson and Johnson Inland Travelling Fellowship” as a Fellow in December, 2013.

Conferences & Workshops/Training:
1. Conducted the AIIMS-APASI Cadaveric Pelvi-Acetabular International Workshop from 11\textsuperscript{th} to 12\textsuperscript{nd} January, 2014 at AIIMS Jodhpur
2. Member, Organizing Committee, NAMSCON, 25\textsuperscript{th} to 27\textsuperscript{th} Oct, 2013 at AIIMS, Jodhpur

\textbf{Department of Pathology & Laboratory Medicine:}

Department Activities:
The Department of Pathology has started a state-of-the-art museum for teaching Undergraduate students and has procured these specimens from various centres. We have mounted about 90 specimens till date which include rare lesions like Amyloidosis, GIST, Hypertrophy of Heart etc. Recently, Tutorials with Clinical Histories simulating real life scenarios were started for the 2012 Batch of Undergraduate students with the aim of amalgamating Etiopathogenesis with Patient Care.

We have been providing regular services to the patients visiting the OPD at AIIMS, Jodhpur and have performed about 2,000 Haemograms (on 6 part Beckman Coulter Analyser LH 750), 1,305 Urine Microscopic exams, 934 automated ESR analysis (Roller 20 Analyser), 400 Pap smears, 300 Peripheral Blood Smear reporting, 127 Malarial Parasite examinations, 111 FNACs (including Ultrasound guided FNACs in conjunction with Department of Radiodiagnosis) and more than 15 second opinion cases till the 1st week of February.

The first CPC was held on 17\textsuperscript{th} of January on GIST and various aspects of the case were discussed by Departments of Surgery, Pathology, Radiodiagnosis & Radiation Oncology.

Dr. Shilajit Bhattacharya:
Member, Expert Advisory Committee, CME on Hospital Setting-Infection Control & Hygiene, 13\textsuperscript{th} – 14\textsuperscript{th} Dec, 2013 at AIIMS, Jodhpur
Member, Organizing Committee, 53\textsuperscript{rd} Annual Conference of National Academy of Medical Sciences, 25\textsuperscript{th} – 27\textsuperscript{th} Oct 2013, AIIMS, Jodhpur
Member, Panel Discussion Session, CME on Hospital Setting-Infection Control & Hygiene, 13\textsuperscript{rd} Dec, 2013
Member, Organizing Committee, ETHICSCON, 9\textsuperscript{th} – 10\textsuperscript{th} Dec, 2013, AIIMS, Jodhpur
Member, Organizing Committee, CARCON, 1\textsuperscript{st} Feb, 2014
Incharge, CPCs 2014 at AIIMS, Jodhpur

Dr. Poonam Elhence:
Member, Organizing Committee, 53\textsuperscript{rd} Annual Conference of National Academy of Medical Sciences, 25\textsuperscript{th} – 27\textsuperscript{th} Oct, 2013, AIIMS, Jodhpur
Member, Organizing Committee, ETHICSCON, 9\textsuperscript{th} – 10\textsuperscript{th} Dec, 2013, AIIMS, Jodhpur
Member, Organizing Committee, 1\textsuperscript{st} Annual Pelvi-Acetabular Cadaveric Workshop, 11\textsuperscript{th} -12\textsuperscript{th} Jan, 2014
Participated as Delegate in Annual Cytology Conference CYTOCON at JIPMER, Puducherry from 3\textsuperscript{rd} to 6\textsuperscript{th} Oct, 2013
Attended CME on Hospital Setting: Infection Control and Hygiene from 13\textsuperscript{rd} to 14\textsuperscript{th} Dec, 2014 at AIIMS, Jodhpur

Senior Residents: Dr. Meenakshi Rao participated as a Delegate in HAEMATOCON 2013 and attended Workshop held from 6\textsuperscript{th} to 10\textsuperscript{th} Nov, 2013, at Mumbai. She was Member, Organizing Committee, 53\textsuperscript{rd} Annual Conference of National Academy of Medical Sciences, 25\textsuperscript{th} – 27\textsuperscript{th} Oct, 2013, AIIMS, Jodhpur, attended Symposium on Sleep Medicine held on Oct 25\textsuperscript{th}, 2013, at AIIMS
Jodhpur and attended CME on Hospital Setting: Infection Control and Hygiene from 13th to 14th Dec, 2013.

Dr. Sudeep Khera was Member, Organizing Committee, 53rd Annual Conference of National Academy of Medical Sciences, 25th–27th Oct, 2013, AIIMS, Jodhpur and attended Symposium on Sleep Medicine held on Oct 25th, 2013, at AIIMS, Jodhpur.

Department of Paediatric Surgery:

Dr. Arvind Sinha:

Conferences & Workshops/Training:
1. Attended the National Conference of IAGES 2014 at SRM University, Chennai from 13th to 16th Feb, 2014
2. Member, Organizing Committee, ETHICSCON, 9th – 10th Dec, 2013, AIIMS, Jodhpur
3. Member, Organizing Committee, 53rd Annual Conference of National Academy of Medical Sciences, 25th – 27th Oct 2013, AIIMS, Jodhpur
4. Member, Organizing Committee, 1st Annual Pelvi-Acetabular Cadaveric Workshop, 11th – 12th Jan, 2014
5. Attended CME on Hospital Setting- Infection Control & Hygiene, 13th – 14th Dec, 2013 at AIIMS, Jodhpur
6. Member, Panel Discussion Session, CME on Hospital Setting- Infection Control & Hygiene, 13th Dec, 2013

Others:
1. Nominated as Fellow of The Indian Association of Gastrointestinal Endo Surgeons (FIAGES)
2. Designed & contributed photographs for the 1st in-house Calendar for AIIMS, Jodhpur
3. Co-Coordinator, Clinical Grand Rounds 2014, AIIMS, Jodhpur

Department of Pediatrics

Dr. Kuldeep Singh:

Articles published /accepted: 5

Conferences & Workshops/Training:
1. Organizing Secretary, 53rd Annual National Conference of National Academy of Medical Sciences (India) 25th – 27th October, 2013
2. Organizing Secretary, CME-Symposium on Sleep Medicine at Dr. S N Medical College, Jodhpur sponsored by NAMS on 6th December, 2013
3. Organizing Basic course in Medical Education Technology as Member, Jan 2014
4. Organizing Committee member for 51st Annual Conference of Indian Academy of Pediatrics, Indore, 8th to 12th January, 2014

Administrative/Academic responsibilities:
1. Member, Research Advisory Committee, Department of Health Research, MOHFW, GOI for MRHRU, Rajasthan
2. Coordinator, Clinical Grand Rounds 2014, AIIMS, Jodhpur
3. Editorial Board Member
   a. Indian Journal of Pediatric Education
   b. Indian Journal of Genetic and Molecular Research
4. Reviewer:
   a. BMJ Case reports
   b. Indian Journal of Pediatrics

Conferences & Workshop/Training:
1. Presented 2 papers on Sleep symposium evaluation on 27th October, 2013 at NAMSCON 2013
2. Invited as speaker on “Prenatal Diagnosis and Genetic Counseling in Down syndrome” At Frontiers in Medical Genetics & Hands on workshop on DNA Diagnostics , 28th November, 2013 at SGPGI, Lucknow
3. Talk on “Inappropriate Authorship” at National Conference on Ethics in Medical Research ETHICSCON 2013, 10th December, 2013
4. Guest Lecture on “Genetic Counseling” at Course in Medical genetics and molecular toxicology, SAIMS, Indore on 18th December, 2013
5. Panel member for “Newer Modalities in managing Genetic disorders: Excitable options for incurable maladies” on 11th January, 2014 in PEDICON 2014 at Indore
7. Guest speaker for talk on “Karyotype, FISH, QF-PCR, Micro-array: What Obstetrician should know” delivered at Symposium “At risk Mother and Fetus” on 18th January 2014 at SGPGI, Lucknow
8. First Meeting of MRHRU, Jaipur, 1st February 2014 for inauguration and finalizing research projects for Bhanpur Kalan, District Jaipur
9. Proceedings of Conferences:
   a. Singh K, Misra S. Medical Education in Rajasthan. Souvenir NAMSCON 2013
   b. Singh K. Tackling Childhood disorders: Giving healthy start to life, NAMSCON 2013

Dr. Neeraj Gupta:

Conferences & Workshop/Training:
1. Faculty at ‘CPAP workshop’ at 6th National Conference of Neonatology Chapter of IAP (IAP NEOCON 2013) held at Ahmedabad from 19th-20th Oct, 2013.
2. Faculty at ‘Basic Neonatal Ventilation Workshop’ at Rajasthan Neoncon (RAJNEOCON) held at Kota, Rajasthan from 7th-9th Nov, 2013. Gave talk on ‘CPAP’ followed by case discussion.
4. (RAJNEOCON) held at Kota, Rajasthan from 7th-9th Nov, 2013.
5. Faculty at “Workshop on Neonatal Ventilation” being
organized by TATA MOTORS in collaboration with WHO Collaboration Centre for Newborn, AIIMS, Delhi at Jamshedpur from 29th Nov-1st Dec, 2013. Gave talks on ‘ABG analysis’ and Persistent ‘Pulmonary Hypertension in Newborn’ along with four workstations and panel discussion.

6. Faculty at Workshop on ‘Infection control, Antibiotic usage & Kangaroo mother care’ at XXXIII Annual convention of NNF (NEOCON 2013) held at Hyderabad, AP from 12th – 15th Dec, 2013. Also participated as faculty in panel discussion.

7. Faculty for panel discussion on ‘Nutrition beyond TPN-A case based management’ at XXXIII, Annual convention of NNF (NEOCON 2013) held at Hyderabad, AP from 12th – 15th Dec, 2013.


Dr. Daisy Khera:
Conferences & Workshops/Training:
1. Participated as a delegate in Annual conference of Rajasthan IAP Raj Pedicon 2013’ held at Barmer on 18th Oct, 2013
2. Participated as a delegate in NAMS-AIIMS Regional Symposium on Sleep Medicine on 25th Oct, 2013 held at AIIMS, Jodhpur
3. Participated as a delegate in 53rd Annual Conference of Medical Sciences, India- NAMSCON 2013 from 25th to 27th Oct at AIIMS, Jodhpur
4. Member of organizing committee for various conferences held at AIIMS, Jodhpur
   b. ETHICSCON 2013 (9th – 10th Dec, 2013)
   AIIMS-APASI Cadaveric workshop on Pelvic-acetabular trauma (11th–12th Jan, 2013)

Department of Pharmacology

Dr. Sneha Ambwani:
Articles Published: 9

Research Project:
1. A cross sectional questionnaire-based study to evaluate the attitude and practices of physicians regarding prescription of antidiabetic medications in Type 2 Diabetes Mellitus patients in India

Conferences & Workshops/Training:
1. 4th National Conference of “CONSORTIUM AGAINST RABIES” at AIIMS, Jodhpur on 1st Feb, 2014
2. CME-Hospital Infection 2013; Hospital setting: Infection Control & Hygiene, organized by Department of Microbiology, AIIMS, Jodhpur from 13th to 14th Dec, 2013
3. NAMS- AIIMS Regional Symposium on Sleep Medicine, AIIMS, Jodhpur, 25th Oct, 2013
4. 53rd Annual Conference of National Academy of Medical Sciences, India (NAMSCON 2013) at AIIMS, Jodhpur, 25th-27th Oct, 2013
5. National Conference on Health Professions Education, organized by Medical Education Unit & MCI Regional Center for Faculty Development, Seth GS Medical & KEM Hospital, Mumbai, 25th to 28th Sept, 2013
6. Lecture delivered on “Rational use of Antimicrobials in Hospital Settings” in CME at CME-Hospital Infection 2013; Hospital setting: Infection Control & Hygiene, organized by Department of Microbiology, AIIMS, Jodhpur, on Dec 13th & 14th, 2013
7. Lecture delivered on “Clinical trials” in Foundation workshop on Clinical and Laboratory Medicine Research conducted by Moving Academy of Medicine & Biomedicine, Pune and Dr. S.N. Medical College, Jodhpur from March 12th-15th, 2013
8. Delivered lecture on “Drugs used in elderly” in the training organised by Department of Geriatrics, Dr. S. N. Medical College, on 20th Sept, 2013
9. Co-author in paper titled “Question making- an interesting way of learning!” presented during National Conference on Health Professions Education, organized by Medical Education Unit & MCI Regional Center for Faculty Development, Seth GS Medical & KEM Hospital, Mumbai, 25th to 28th Sept, 2013

Dr. Pramod Kumar Sharma:
Articles Published: 2

Conferences & Workshops/Training:
2. National Conference on Ethics in Medical Research (ETHICSCON 2013) at AIIMS, Jodhpur from 9th-10th Dec, 2013
3. 53rd Annual conference of National Academy of Medical Sciences, India (NAMSCON 2013) at AIIMS, Jodhpur from 25th – 27th Oct, 2013

Dr. Surjit Singh:
Conferences & Workshops/Training:
1. National Conference on Ethics in Medical Research (ETHICSCON 2013) at AIIMS, Jodhpur from 9th-10th Dec, 2013
2. 53rd Annual conference of National Academy of Medical Sciences, India (NAMSCON 2013) at AIIMS, Jodhpur from 25th – 27th Oct, 2013

Department of Physical Medicine and Rehabilitation:

Dr. Navita Purohit:
Conferences:
Part of Organizing Committee of NAMSCON, Oct 2013; ETHICSCON Dec 2013; CME on Hospital Infection, Dec 2013
and APASI Pelvi-Acetabular Workshop, Jan 2014
Delivered Guest Lecture on "Post stroke shoulder pain" in IAPMRCON (Indian Association of Physical Medicine and Rehabilitation) held in Chennai from 23rd to 26th Jan, 2014

Department of Physiology

Dr. Sabyasachi Sircar:
Articles published: 5
Training, Workshops and Conferences:
1. APPICON 2013, 28th-30th Nov, 2013 at NIMHANS, Bengaluru
2. ICON-BAP 2013, Dec 19th-22nd, 2013 at SMS Medical College, Jaipur
3. ETHICSCON 2013, 9th-10th Dec, 2013 at AIIMS, Jodhpur. Member of the Organizing Committee
4. NAMSCON 2013, 25th-27th Oct, 2013 at AIIMS, Jodhpur. Member of the Organizing Committee
Oration:
1. Delivered the Dr. A.C. Duarte Monteiro Oration at Seth GS Medical College and KEM Hospital, Mumbai, on the occasion of "Oracon – 2013"- the Congress of Orations on Dec 11th, 2013

Administrative/Academic responsibilities:
1. Editor of the Indian Journal of Physiology & Pharmacology (IJPP) at APPICON 2013, 28th-30th Nov, 2013 at NIMHANS, Bengaluru

Dr. Rajesh K Sharma:
Articles published: 3
Training, Workshops and Conferences:
1. International Conference on Trauma and Medicine, Jan 19th - 21st, 2014 at AIIMS, Patna
2. National NMCN Workshop at SGPGI, on March 20th, 2013 at Lucknow
3. NKN Workshop from Oct 11th to 14th, 2013 at IIS, Bengaluru
4. ETHICSCON 2013, 9th-10th Dec, 2013 at AIIMS, Jodhpur
5. NAMSCON 2013, 25th-27th Oct, 2013 at AIIMS, Jodhpur

Administrative/Academic responsibilities:
1. Assistant Editor of Indian Journal of Physiology and Pharmacology (IJPP)
2. Appointed as Nodal officer of National Knowledge Network (NKN)

Dr. Abhinav Dixit:
Article published: 1
Training, Workshops and Conferences:
1. Organizing Secretary, ETHICSCON 2013, 9th-10th December, 2013 at AIIMS, Jodhpur
2. NAMSCON 2013, 25th-27th Oct, 2013 at AIIMS, Jodhpur
4. Attended the 53rd Annual Conference of National Academy of Medical Sciences, India, 25th-27th Oct, 2013, at AIIMS, Jodhpur
5. Attended the ICMR workshop for Advancement of Physiological Sciences, Dec 22nd-23rd, 2013 at AIIMS, New Delhi
6. Delivered a Guest lecture on "Auditory Evoked Potentials" at the 2nd International Conference on Basic and Applied Physiology, 19th – 20th Dec, SMS Medical College, Jaipur

Dr. Bharti Mehta:
Articles published: 4
Training, Workshops and Conferences:
1. ETHICSCON 2013, 9th-10th Dec, 2013 at AIIMS, Jodhpur
2. NAMSCON 2013, 25th-27th Oct, 2013 at AIIMS, Jodhpur
4. Attended Hands-on workshop in Neurochemistry and Electron Microscopy-2013 from 15th-20th July at NIMHANS, Bengaluru
5. Attended CME on Hospital Infection, 13th – 14th Dec, 2013 at AIIMS, Jodhpur
6. Delivered an Invited lecture titled, 'Brain-gut axis dysfunction in inflammatory bowel disease'. Symposium on Gastro-Intestinal Physiology: Research Opportunities at Indian Scenario at All India Association of Physiologists and Pharmacologists (APPICON - 2013), 26th -30th Nov at NIMHANS, Bengaluru
7. Delivered an Invited talk on “Calcium Ion Influx in Microglial Cells: Physiological and Therapeutic Significance” at the National Conference on Diversity and Physiology of Desert Fauna, Feb 7th -8th, 2014 at Department of Zoology, J. N. V. University, Jodhpur

Dr. Purnima Sharma:
Articles published: 4
Training, Workshops and Conferences:
1. APPICON 2013, 28th-30th Nov, 2013 at NIMHANS, Bengaluru
2. ETHICSCON 2013, 9th-10th Dec, 2013 at AIIMS, Jodhpur
3. NAMSCON 2013, 25th-27th Oct, 2013 at AIIMS, Jodhpur
5. Attended "Hands-on workshop in Neurochemistry and Electron Microscopy-2013" from 15th-20th July at NIMHANS, Bengaluru
6. Attended CME on Hospital Infection, 13th – 14th Dec, 2013 at AIIMS, Jodhpur
7. Delivered an Invited lecture titled, 'Brain-gut axis dysfunction in inflammatory bowel disease'. Symposium on Gastro-Intestinal Physiology: Research Opportunities at Indian Scenario at All India Association of Physiologists and Pharmacologists (APPICON - 2013), 26th -30th Nov at NIMHANS, Bengaluru
8. Delivered an Invited talk on “Calcium Ion Influx in Microglial Cells: Physiological and Therapeutic Significance” at the National Conference on Diversity and Physiology of Desert Fauna, Feb 7th -8th, 2014 at Department of Zoology, J. N. V. University, Jodhpur

Dr. Bharti Bhandari:
Dr. Om Lata Bhagat:
Articles published: 6

Training, Workshops and Conferences:
1. APPICON 2013, 28th-30th Nov, 2013 at NIMHANS, Bengaluru
2. NCHPE 2013, 25th-28th Sept, 2013 at Seth GSMC & KEM Hospital, Mumbai
3. ETHICSCON 2013, 9th-10th Dec, 2013 at AIIMS, Jodhpur
4. NAMSCON 2013, 25th-27th Oct, 2013 at AIIMS, Jodhpur
6. Attended Symposium on Sleep Medicine, 25th Oct, 2013 at AIIMS, Jodhpur
7. Attended Workshop on ‘Comprehensive multiparametric evaluation of Autonomic functions’ at NIMHANS, Bengaluru on 26th Nov, 2013
8. Attended CME on “Challenges and opportunities in Medical Education”, at NIMHANS, Bengaluru, 27th Nov, 2013

Dr. Naresh Nebhinani:
Articles published: 13

Presentations and conference abstracts: 25

Book/ Chapter contributed: 1

Training, Workshops and Conferences:
1. 7th Congress of the Asian Society for Child & Adolescent Psychiatry & Allied Professions and 12th Biennial Conference of Indian Association for Child and Adolescent Mental Health (IACAMH) (New Delhi, India, Sept 25th-28th, 2013)
2. 7th SAARC Psychiatric Federation International Conference (Mysore, Nov 29th- Dec 1st, 2013)
3. 5th Annual International Scientific Conference of Indo Global Psychiatry Initiatives (IGPI) (Pune, 19th-20th Jan, 2014)
4. 53rd Annual Conference of National Academy of Medical Sciences (Jodhpur, 25th-27th Oct, 2013)
5. 20th National Conference of Indian Association for Social Psychiatry (Kolkata, 8th-10th Nov, 2013)
6. National Conference on Ethics in Medical Research, Jodhpur (9th-10th Dec, 2013)
7. CME Hospital Infection-2013, Hospital Setting: Infection Control & Hygiene, Jodhpur (13th-14th Dec, 2013)
8. 66th Annual National Conference of Indian Psychiatric Society-ANCIPS (Pune, 16th-19th Jan, 2014)
9. 38th Annual Conference of Indian Psychiatric Society: North Zone (New Delhi, 26th-27th Oct, 2013)
11. Chaired Oral Presentation Session at 66th Annual National Conference of Indian Psychiatric Society-ANCIPS (Pune, 16th-19th Jan, 2014)
12. Organized Workshop on Suicide Prevention on World Suicide Prevention Day at AIIMS Jodhpur (10th Sept, 2013)

Administrative/ Academic responsibilities:
1. Mentorship Program for MBBS 1st and 2nd Year students: Coordinator and Mentor
2. Assistant Editor- Indian Journal of Geriatric Mental Health
Dr. Koushik Sinha Deb:
Articles published: 2

Book Chapters written: 1

Conferences attended:
1. Nominated as delegate for the 2nd NKN (National Knowledge Network) Annual Workshop at Bengaluru from 17th -19th Oct, 2013
2. Appointed as a Technical Expert by the NACO (National AIDS Control Organization, MOHFW), Government of India, for Accreditation of De-addiction Centres by NABH (National Accreditation Board for Hospitals) on 29th Nov, 2013
3. Selected as a fellow for the “Ramachandra N Moorthy foundation for Mental Health And Neurological Sciences at NIMHANS” and participant of the 2nd Early Career Mental Health Professional’s Workshop, organised at NIMHANS from Jan 9th -11th, 2014

Department of Pulmonary Medicine

Dr. Naveen Dutt:
Article Published: 1

Conferences & Workshops/Training:
1. Delivered a presentation on Quality of life in OSA in National Academy of Medical Science (NAMS) Symposium on Sleep Medicine on 25th Oct, 2013 at AIIMS, Jodhpur
2. Paper titled “Inhalation technique assessment in rural COPD patients in India and effect of inhaler technique training program on Inhaler technique and airway resistance” accepted for presentation in Chest World Congress-2014 at Madrid, Spain

Dr. Nishant Chauhan:
Article Accepted: 1

Training, Workshops and Conferences:
Attended the Update in Pulmonary, Critical Care and Sleep Medicine along with Workshop in both basic and Advanced Mechanical Ventilation in Feb 2014 at AIIMS, New Delhi in association with ACCP, USA
Member, Organizing Committee, NAMSCON 2013

Department of Radio-Diagnosis

Department Activities:
The Department of Radiology is equipped with three Ultrasound and Doppler machines and one analogue 600 mA X-ray machine.
1. Ultrasound services were started on 20th Sep, 2013 and till 1st week of Feb, about 2000 examinations have been performed for abdominal, gynaecological, musculoskeletal, breast and thyroid region
2. Ultrasound guided procedures: About 30 Ultrasound guided FNAs (Fine needle Aspirations) have been performed from various sites such as thyroid nodules, mediastinum, liver masses, peri-articular swellings etc.
3. About 40 Doppler examinations have been performed for indications such as limb ischemia, deep venous thrombosis, varicose veins, portal hypertension etc.
4. Plain radiography services were started from 1st Feb, 2014 and an average of 25 skigrams (X-rays) are being done every day.

Dr. Pushpinder Khera:
Article published: 1

Training, Workshops and Conferences:
1. 66th Annual conference of Tamil Nadu and Pondicherry chapter of Indian Radiology and Imaging Association(IRIA),held from 13th to 14th Dec, 2013 at Christian Medical College, Vellore
2. Hands-on training workshop for endovenous ablation of varicose veins, organised by Chikitsa Ultrasound Research Centre, Mumbai from 17th to 18th Jan, 2014

Department of Radio-Therapy/Radiation Oncology

Department Activities:
1. Patient Care: Started providing consultation to OPD patients
3. Presented ‘Radiation Oncology - An Overview’ at the Clinical Grand Rounds at AIIMS, Jodhpur

Dr. Puneet Pareek:
Articles Published: 2

Training, Workshops and Conferences:
1. Completed course in Palliative Care conducted by Indian Association of Palliative Care at Tata Memorial Hospital (TMH), Mumbai
2. Attended Workshop on Tobacco Prevention and Control conducted by the Department of Preventive Oncology, TMH, Mumbai
3. Attended Workshop on Radiation Oncology in Gastro Intestinal tumors conducted by ESTRO & TMH at Tata
Memorial Centre, Mumbai
4. Attended the Basic and Advanced Course in SPSS conducted at AIIMS, Jodhpur
5. Member of the Organizing Committee of NAMSCON 2013 - Annual Conference of National Academy of Medical Sciences, India
6. Attended the 1st Indian Cancer Congress conducted at New Delhi
7. Member of the Organizing Committee of the National Conference on "Ethics in Medical Research" conducted by AIIMS, Jodhpur
8. Member of the Organizing Committee of the 1st Annual Pelvic-Acetabular Cadaveric Workshop conducted by AIIMS, Jodhpur
9. Attended the Workshop on Developing a Protocol for a Cochrane Systematic Review conducted by CMC, Vellore

Department of Transfusion Medicine

Dr. Saptarshi Mandal:
Papers Published/ Accepted: 02

Presented CPC on 7th Feb, 2014 on “Pulmonary Complications of Sickle Cell Disease”
Member, Organising Committee, NAMSCON, 25th to 27th Oct, 2013

Dr. Archana Bajpayee:
Paper Accepted: 01

Member, Organising Committee, NAMSCON, 25th to 27th Oct, 2013
The National Academy of Medical Sciences (India) is a unique institution which fosters and utilizes academic excellence as its resource to meet medical and social goals. The Academy encourages and sponsors nation-wide CME programmes, Symposia, Workshops etc. The Academy recognizes outstanding achievements made by Indian scientists in the field of medicine and allied sciences and confers Fellowships as well as Memberships on the selected persons through a peer reviewed process and finally voting by all the Fellows.

The NAMSCON this year was unique in many ways. The Academy, through a series of deliberations, formed a Collegium earlier this year termed NAMS-AIIMS Collegium, a group whose members pursue shared goals while working within a framework of mutual trust and respect for the Academy and the new AIIMS Institutions. National Academy of Medical Sciences (India) reposed enough confidence in AIIMS Jodhpur to allow it to hold this coveted Annual National Conference at this budding Institute, still in its infancy, so as to encourage its efforts to emerge as a Centre of Excellence in Health care and Medical Education in Western India. It has given AIIMS Jodhpur an opportunity to update the health workforce in this part of the world in the new and emerging field of Sleep disorders by organizing “NAMS Regional Symposium on Sleep Medicine” on 25th October, 2013. It is also a matter of pride that the Academy is organizing this conference for the first time in Rajasthan. In contrast to other conferences which are speciality based, NAMSCON has a wider perspective and involves bio-medical experts and scientists from diverse backgrounds for sharing knowledge and expertise for providing better healthcare to society.

The preparations for the conference started in May 2013 when we got the final letter from the Academy. The Scientific Programme was planned and organised by the Academic Council of NAMS. It included named orations, a scientific symposium and free communication session. The Academic Council, on the recommendation of the Orations and Awards Committee, selects the persons who would be delivering the orations.

Some of the unique features of NAMSCON 2013 at AIIMS Jodhpur were as follows:
1. A website was created which contained all the information including brochure, registration and accommodation details. The synopses of all presentations were available in a clickable link with the pdf opening in a new window giving succinct information as to what may be expected out of the talk or presentations. This was the first time this pre-information was available widely to the public.
2. The Academy has started a sponsorship for students from Government Medical Colleges of Rajasthan to participate in this conference and get first-hand information about the emerging concepts in diverse fields of Medicine. 6 students from Rajasthan availed of this - 2 were from Kota and 4 were from Jodhpur.
3. The Organizing Committee introduced a format for abstract for Poster presentation which was highly appreciated by the Academy. They have decided to make Poster presentation, earlier an optional for organizers to decide as per their logistics, a regular feature of the conference and have adopted this format for future conferences.
4. Full High-Definition videography of all sessions was carried out through twin-positioned video cameras. The video feed was put into an AV mixer and output was recorded on hard disk with picture-in-picture so that both speakers and their power point presentations were seen synchronized in the same frame. The video feed with pip (picture in picture) constituted the multimedia based learning material which is being used by the Academy for devising an innovative method for cost effective Continuing Medical Education program in the future.
5. All videos are now available online through website through YouTube repository.
6. Participation of students with high level of questions.

The Sleep symposium covered topics ranging from Physiology of Sleep, Pharmacology, Obstructive Sleep Apnea, its management and...
quality of life. Deliberations were held on Childhood sleep disorder, sleep and its relation to endocrine aspects, epilepsy, stroke and also excessive sleepiness. The symposium also featured interactive sessions with few conditions as problem triggers. The students were encouraged to participate and judges selected overall best performing student among them. Mr Abhijeet Singh Barath was declared winner of Prof. J S Bajaj award for overall best performing student and was given a certificate and Book award of Rs. 5,000.

The second day started with oration by Dr. Mohan Kameshwaran on Auditory Neural Prosthesis followed by role of education in Pediatric Critical Care and recent advances in molecular imaging. It is now possible to culture and grow various tissues outside our body with its application to alleviate dreadful conditions especially, myocardial infarction, stroke and eye disorders. This was the theme of a NAMS Symposium on Regenerative medicine. Experts from AIIMS and Hyderabad discussed these issues. This was followed by Golden Commemoration lecture by Dr. Ashok Kumar on- Nutrient: Women need most.

The evening saw the most awaited part of the conference- The Convocation. The Chief Guest was Prof. R Chidambaram, Principal Scientific Advisor, Government of India, who played a very crucial role in 1974 nuclear explosion experiment in Pokhran and also led the team in May 1998. The Guest of Honour was Prof. J S Bajaj. Dignitaries on Dias were President NAMS, Prof. C S Bhaskaran, Dr. Padmawati and Secretary NAMS, Dr. Sanjay Wadhwa. Our Director, Prof. Sanjeev Misra, welcomed the dignitaries and briefed about the conference and AIIMS Jodhpur. Dr. Sanjay Wadhwa then called upon the Fellows and Members to receive the scroll. 38 and 53 biomedical scientists were conferred Fellowships and Memberships respectively. This was followed by address by Dr. Bajaj who advised young scientists to rise against obstacles. He also introduced the Chief Guest, Dr. Chidambaram, who shared his vast experience and stressed that doctors should collaborate and innovate to develop indigenous technology to make medical care more affordable to the masses. He also brought out, to the attention of an engrossed and captive audience, the recent advances in India and abroad which have greatly enhanced our research. His talk was followed by Vote of Thanks by Dr. Kuldeep Singh, Organizing Secretary. The program was followed by Cultural function and Dinner.

The 3rd day of the conference started with presentations by the recipients of award papers which included 7 talks. There were 5 orations on different aspects like molecular genetics of drug resistance in epilepsy, viral infections in kidney transplants, life style disorders, *Bacopa monniera* and its nootropic effects, and mission to reduce neurological disorders in children. Eminent speakers from India talked about these conditions and shared their vast experience with the audience.

There were more than 220 participants including Fellows, Members, delegates from all over the country, faculty members, residents and students of AIIMS and students and residents of other medical Institutions.

The conference concluded with Valedictory function on 27th October with certificate distribution to awardees, appreciation for the Organizing team and encouraging remarks by President NAMS, Dr. C S Bhaskaran and Chairman, Academic Council, Prof. J S Bajaj. Most importantly, the conference saw the great leadership skills of our Director, Dr. Sanjeev Misra and the team spirit shown by each and every faculty member of the Institute, who despite their many commitments, contributed immensely to this conference to such an extent that the Academy has accepted the 2013 conference held at AIIMS Jodhpur as a Benchmark against which future conferences will have to prove their merit.
AIIMS Jodhpur organized National Conference on Ethics in Medical Research, "ETHICSCON 2013", from 9th-10th December 2013.

The Conference was inaugurated by Hon'ble Justice Nirmaljit Kaur, Rajasthan High Court, who emphasized the importance of ethical practices in not only research, but also in patient care. The Guest of Honor was Prof. Richard Cash, Director, Program on Research Ethics, Harvard School of Public Health and Visiting Professor and Advisor, Global, at Public Health Foundation of India. The inauguration was also graced by Directors of AIIMS Patna and Rishikesh, Dr. GK Singh and Dr. Raj Kumar respectively.

The conference was host to a plethora of speakers of International and National fame in medical ethics. Prof. BN Dhawan, Former director, CDRI, Lucknow shed light on the history of evolution ethics in medical research from the times of Charak Samhita to the modern day practices. Prof. Richard Cash enlightened the delegates on the standards of bioethics with emphasis on the opportunities and constraints of conducting research in developing countries.

Dr. Thuppiel Venkatesh, Principal Advisor, Quality Council of India, apprised the audience on Ethics in Lab medicine including organizational and laboratory ethical audits.

The important aspect of Consent was covered in detail by Dr. Dasari Harish, Prof. & Head, Dept. of Forensic Medicine, GMC, Chandigarh and Dr. Amar Jesani, Editor, Indian Journal of Medical Ethics. Dr. Jesani also spoke on Integrity in Research including Plagiarism and data falsification. The topic on authorship ethics was discussed by Dr. Kuldeep Singh, Additional Professor & Head, Dept. of Paediatrics, AIIMS, Jodhpur.

Dr. Nalin Mehta, Additional Prof, Dept. of Physiology, AIIMS, New Delhi, stressed on the optimum utilization of resources for both healthcare and research so that both activities can progress simultaneously especially in education institutes.

The conference was attended by more than 100 delegates from all over the country.

Dr. Thuppiel Venkatesh, Principal Advisor, Quality Council of India, apprised the audience on Ethics in Lab medicine including organizational and laboratory ethical audits.

The important aspect of Consent was covered in detail by Dr. Dasari Harish, Prof. & Head, Dept. of Forensic Medicine, GMC, Chandigarh and Dr. Amar Jesani, Editor, Indian Journal of Medical Ethics. Dr. Jesani also spoke on Integrity in Research including Plagiarism and data falsification. The topic on authorship ethics was discussed by Dr. Kuldeep Singh, Additional Professor & Head, Dept. of Paediatrics, AIIMS, Jodhpur.

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A two day CME "Hospital Setting- Infection Control and Hygiene" was organized by Department of Microbiology from Dec 13th to 14th, 2013 at AIIMS, Jodhpur. The aim of the CME was to provide a common platform to Microbiologists, Clinicians, Nursing staff, Students, other Health care associated staff to share the latest developments in various aspects of Hospital Acquired Infections and to get a solution and direction to control /reduce these infections.

Dr. T D Chug, National Emeritus & Professor of Microbiology, National Academy of Medical Sciences, India was the Chief Guest for the Inaugural session & Dr. Kamal Kant, Principal, S N Medical College, Jodhpur was the Guest of Honour. Dr. Sanjeev Misra, Director, AIIMS, Jodhpur welcomed the Chief Guest & all the delegates.

The opening talk of CME was delivered by Dr. T D Chug on “An Overview of Infection Control in a Newly Established Hospital Setting”. The two day CME included 14 guest lectures on various aspects of Hospital infection & control; two panel discussions; one Quiz session and one Poster session with 16 Poster presentations.
On, 11th and 12th January, 2014, the Department of Orthopaedics at AIIMS Jodhpur in collaboration with the Department of Anatomy put its first steps on to the academic platform of the country’s academia, when the AIIMS - APASI Cadaveric Pelvi-Acetabular Workshop was successfully hosted at AIIMS Jodhpur.

Pelvis and acetabular fractures result predominantly as a consequence of high speed vehicular accident trauma and are considered a major cause of morbidity, disability and mortality, often resulting in long recovery periods. This provided the perfect validation for organizing a training workshop aimed at discussing the various complexities of this devastating injury. The compelling need for such an academic event was obvious from the fact that all the registrations for the workshop were taken up two months prior to the event.

The workshop boasted of the finest International faculty from across the globe and the biggest names from the Indian subcontinent. Prof. Ulrich Holz from Germany, Prof. Laurent Sedel from France, Prof. Osama Farouk from Egypt, Dr. Rahul Vaidya from USA, Mr. Mehool Acharya from UK, Prof. C.J. Thakkar from Mumbai, Prof. R. Sen from Chandigarh and Prof. N.K. Magu from Rohtak alone have over 7000 pelvi-acetabular procedures and 10,000 hours of International training time to their credit. 50 orthopaedic surgeons from all over India and from neighbouring countries like Bangladesh registered for the workshop as delegates.

The academic event included two high-impact workshops. The cadaveric workshop focused on demonstration of the surgical exposures by faculty followed by surgical exercise by delegates. The saw-bone workshop involved demonstration of fixation strategy and fixation techniques by faculty followed by hands on training of delegates on saw bones.

The meeting was set into motion by decorated academicians from all over the country viz. Prof. S. Misra, Prof. G. K. Singh, Prof. P.P. Kotwal, Prof. Shiv Kumar, Dr. C.J. Thakkar, Dr. N.K. Magu and Dr. S. Ghatak.

All in all, this was a good beginning towards setting up a state of the art Orthopaedics Department, built on a solid foundation of hard work, dedication, patient care and academics of the highest quality.

Dr. Abhay Elhence
Organizing Secretary
AIIMS-APASI Cadaveric Pelvi-Acetabular Workshop
AIIMS, Jodhpur
The 4th National Conference of 'Consortium against Rabies' - CARCON 2014 was organized by the Department of Community Medicine and Family Medicine on 1st February, 2014. The conference was supported by ICMR, Academy of Family Physicians of India (AFPI) and Indian Public Health Association (IPHA), Rajasthan Chapter. This conference was organized under the guidance of Prof. Sanjeev Misra, Director, AIIMS Jodhpur as Patron; Prof. Pankaja Ravi Raghav, as Organizing Chairperson and Dr. Pankaj Bhardwaj as Organizing Secretary.

The Conference was inaugurated by Chief Guest, Dr. Veena Mittal, Additional Director and Head, Division of Zoonoses, NCDC, Delhi. The Guest of Honor for the inauguration ceremony was Dr. Arvind Nath from ICMR.

The theme of the conference was “Rabies Prevention in Primary Care”. The CARCON 2014 provided an important forum for communicating invaluable information and person to person interaction for the dissemination of knowledge and updating with recent advances in the field of Rabies control.

The conference attracted 133 delegate registrations. Delegates included Academicians, Family Physicians, State Health Authorities, Health specialists, Policy makers, Postgraduate Medical Students, General practitioners, People from animal husbandry as well as Nursing and allied health professionals from all over the country.

Presentations covered topics such as Rabies control in India: National Policies, Challenges, Strategies and Recent Advances, Animal Rabies: sharing experiences, Effective immunization- the only solution for Rabies control etc. In Panel discussion, experts from different parts of the country shared their experience on Rabies control scenarios in different states and different health care settings like Defence, Private clinics etc.

The conference also helped to support collaboration within and between medical colleges as well as encourage multi-disciplinary and multi-sectoral linkages.

It was also decided that multicentre trials will be undertaken to generate valid data regarding animal bites and their prevention and initiation of National Rabies Control Programme to achieve Rabies elimination by 2020.

Dr. Pankaja Ravi Raghav
Organising Chairperson
CARCON-2014
AIIMS, Jodhpur
REDESIGNING THE LOGO FOR AIIMS JODHPUR

A logo is a design or a graphic mark that symbolizes the identity of an organization or a product. The Institute logo represents the first visual identity for the Institute and therefore, needs to be simple, memorable, timeless, versatile and appropriate. With a growing young Institute, there is always a wonderful opportunity to change things for the better. So, in the second half of 2013, we embarked upon this journey to redesign the logo of our beloved Institute, to make it better. Six months, multiple discussions and innumerable iterations later, we are now ready to unveil our new logo and what it means. At the outset, thanks are due to Dr. Sanjeev Misra, Dr. Arvind Sinha and Dr. Saptarshi for their invaluable suggestions, which we incorporated in this process. More importantly, thanks are also due for their innumerable suggestions that we didn’t and couldn’t incorporate, citing the magic words of “creative liberty” and “artistic dictatorship”!

In design terms, all logos consist of three major parts: ideograms, emblems and logotypes. Ideograms are the abstract shapes and graphics that convey the overall idea of the logo. For example, circles represent inclusivity, squares represent stability, while triangles represent power in logo ideograms. Emblems in logos are patterns or symbols that represent principles or values. For example, the principles of medicine are symbolized in the staff of Aesculapius. Finally, the lettering and the typeface used in a logo forms an integral part of the logo identity and are known as logotypes.

An additional challenge in logo design stems from the fact that logos need to be versatile, implying that the same design must be reproducible in various formats. While it is easy to design a full colored and attractive concept for the web, it becomes impossible to use the same for stamps, Institute seals and monograms. Therefore, monochrome convertibility (the same logo in black and white) and reversibility (logo on a black background should be as legible as on a white background), are important considerations while designing a logo.

While we did have a wonderful logo of AIIMS Jodhpur designed at the time of the inception of the Institute, we ran into problems trying to convert it to a monochrome for stamps. Therefore, we decided to take this opportunity to recreate a new logo for our Institute, which, while being visually and philosophically similar to our old logo, will uphold the principles of logo design.
The Process of Designing: The figure above, describes the multiple line-art versions that were considered before it was converted into 3D model for the gold logo.

After few rounds of deliberations, we settled down on the final logo shape for AIIMS Jodhpur. Subsequently, a 3D rendering of the line-art was done, from which the color version of our logo was designed, with a target to keep it as close to the original as possible.

While redesigning the logo, we were careful to ask ourselves why we were creating each element, and what ideas, morals and goals we want to uphold. Our logo has a meaning, and each component was carefully chosen to form a part of the whole.

A benediction from the Vedas, perhaps the most ancient of living literature, forms our maxim. The phrase “सर्व निरालमया” meaning “All Must Be Without Sickness”, beautifully expresses not only our ideal, but also our primary responsibility. The “shloka” from which this line is derived reverberates deeply with the ethos of medicine and what is required from each one of us. It fiercely and firmly orders the world - “All Must Be Happy, All Must Be Without Sickness, All Must See Good In Others And May No One Have To Share In Sorrow”. We hope that our Institute becomes that beacon which will boldly tell the world that we will do what the “shloka” commands us to do.

शर्वे भवन्तु सुखमि: सर्वे निरालमयाः।
शर्वे भवाभि परायणां गा कुशलवदुःशास्तरयेत।।
The central emblem of our logo is a reworked “Staff of Caduceus” or the “Staff of Aesculapius”. The Staff of Aesculapius represents the personification of medical or healing art and its ideals. Aesculapius was a fabled physician who practiced in Greece around 1200 BC (and described in Homer’s Iliad). Eventually, through myth and legend, he came to be worshipped as Asclepius, the (Greek) God of Healing. Aesculapius’s staff consisted of a central rod, which was entwined by a single snake symbolizing knowledge. In its single snake form, it is still used as the emblem of WHO (World Health Organization) and many medical organizations. Over the course of time and due to consideration for symmetry, many medical organizations started using the motif of a staff with two snakes entwining. The snakes embody knowledge and the wings represent angelic protection, a symbol very similar to the staff of Caduceus. According to researchers, the link between Caduceus and medicine seems to have arisen by the seventh century A.D., when Caduceus came to be linked with alchemy. By the end of the sixteenth century, the study of alchemy included not only chemistry, mining and metallurgy but also medicine and pharmaceuticals. Despite learned opinion that it is the single snake staff of Asclepius that is the proper symbol of medicine; many medical groups adopted the twin serpent symbol of Caduceus as their motif during the nineteenth and twentieth centuries. The emblem of AIIMS, Delhi also uses the symmetrical motif of two snakes entwining a lotus, and therefore, it was decided to use a twin snake motif for all other AIIMS’ logos.

Our central motif has additional modifications. The tail of both the snakes taper to suggest the nib of a pen, symbolizing knowledge and its power. The crown of the staff bears the motif of the sun with rays of light emanating from it, suggesting life and the dispelling of darkness and also, the fact that Jodhpur is considered the Sun city of India. The fine filigree work around the crown of the staff and below the lettering of Jodhpur suggests the royal heritage of the place.

The wreaths of leaves at the bottom of the logo suggest new growth and embody the spirit of life’s victory over death. Anecdotally, in ancient Greece, conferring laurel wreaths (a circular wreath made of interlocking branches and leaves of the bay laurel plant) meant the completion of a bachelor degree and, newly qualified doctors received a laurel crown since it was considered a cure-all plant. In modern usage, it refers to glory and victory. Each wreath on our logo contains 11 leaves, referring to the 11 sense organs (indriyas) of Indian mythology. Five are organs of organs of sense or wisdom (Jnanendriyas), five are organs of work or action (karmendriyas) while the eleventh represents our organ for conscious thought (manas).

Finally, the outer and inner circles represent the motto of inclusivity and celebrates the coming together of people from all spheres and strata of society, who have emerged triumphant in alleviating the pain and suffering of all those who have placed their trust and lives in the hands of the practitioners of this noble profession.

We had set out with the goal of creating something better and, we do hope to have achieved something worthwhile. We feel proud that the logo of our beloved Institution was designed completely in-house and feel honored to be a part of the endeavor. After all, life is short, but, logos live forever.

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there anything wrong with the age-old pen paper system?” And “does
the advantage justify the additional cost?” Well, the first question was
easy to answer. We have all worked in the traditional pen and paper
system and have felt the frustration of repeatedly entering the same
information for prescription, investigation, discharge, clinical notes
etc. Viewed in a larger perspective, coordination between billing,
treatment, in-patient and out-patient is so rudimentary with a pen-
paper system that the patient and their caregivers often spent
majority of their time doing paperwork rather than focusing on what
they came to do in the hospital in the first place, that is, getting
treatment. From a research perspective, we all have despaired about
the loss of patient data, which we could have used for various clinical
and epidemiological studies.

As for the point of justifying the cost of IT- enabled services, there are
now indexed publications (Yes. It is a topic of research!) which report
that costs are justified for large institutions. For smaller treatment
centers and individual clinicians, the cost may not be recoverable in
short-term, but it may still be preferred for convenience.

With this in mind, our OPD-IT committee went through multiple
brainstorming sessions; meetings with IT vendors; and discussions
with our Director to formulate our essential targets for developing
IT enabled services in the hospital OPD. The following are the
essential goals that IT services at AIIMS, Jodhpur should be able to
deliver.

- Our own server: Although it would have been far easier to have a
  web based service (often called SAAS, standing for Software As A
  Service) and buy server space on the internet, the nature of
  hospital services are such that we cannot afford to suffer internet
  outages for even a second. Additionally, patient images and
  radiology PACS (Picture Archiving & Communication System)
  require huge amount of data to be transmitted, which means
  internet-enabled services might suffer from bandwidth
  bottleneck. Therefore, we had to define an intranet for our
  hospital with our own server running and providing
  connectivity. Having an intranet also enhances data security and
  confidentiality, in that, the patient data remains strictly within
  the hospital and cannot be breached from outside.

Introduction

Information Technology (IT) is the applied science that deals with
large volume information. While IT solutions have been used for
managing “big data” in business for quite some time, the technology
is finding use in other sectors only recently. We all appreciate the
benefits of online bookings for hotels, flights, railways, movie tickets;
and internet banking and these are examples of innovative use of IT.
Anywhere, when information is exchanged repetitively in the same
manner, IT can be used to make the process simpler, easier and less
tiresome for users at both ends of the system.

Medical Institutes, world over, are embracing IT solutions because
medical education and medical consultation are both classic models
of information exchange. Every Medical College needs a system for
identifying details of students, departments, faculty and a method of
providing training, teaching and conducting examinations; a process
that repeats almost yearly. Medical consultation also is essentially
information exchange between patient and doctor, either in the form
of advice or prescription. It is not the fact that computers have
become a ubiquitous part of our lives thereby mandating their use in
teaching and managing patients, rather, teaching and patient
management are classic examples of information exchange, which
can significantly benefit from IT.

However, the needs of the college and that of the hospital are hugely
different from IT perspective. College IT services are mostly NOT
mission critical or time critical (except for examinations) and these
systems are generally used as and when their need appears. The
student module gets updated once a year and the faculty module,
perhaps, even less frequently. In contrast, everything that runs in the
hospital through IT needs to be always working, provide instant and
on-demand services and will be heavily accessed 24 X 7. This essay
details our journey of the forming of IT services for the hospital
OPD, and while the IT-Cell is heavily involved in college services, we
will talk about them at some other time.

Planning the IT Services for OPD:

Two questions that we often asked ourselves while planning were: “Is
• Wired versus wireless network: A complete wireless network has the advantage that the end devices need not be tied to their physical location, but suffers from the fact that data transmission speed becomes very low. On the other hand, a complete wired network has more stability and increased network speed, but it hampers the addition of new devices to the network. Therefore, it was decided to provide a wired backbone, which will provide secure, reliable and high speed data connectivity to each room; while also having a wireless network at the same time so that other devices like laptops, mobile phones, i-pads, and tablets can be used on ad-hoc basis, as and when the need arises.

• End-user Devices: Hospital information system software can run on a simple web browser and therefore, the end-user device could have been made cheaper by using LAN client, THIN client or ZERO client (which are basically small machines that connect to the server), but it was realized that consultants would be spending a large part of their day in the OPD, where they will have a need to use their terminal for various other activities, e.g., internet browsing, writing word documents etc. Therefore, we defined our need for full- fledged desktops at each consultation point even though it significantly increases the cost.

• Centralized printing versus Distributed printing: Many hospitals that use Hospital Information System use large, centralized printers to print patient’s clinical notes, prescriptions etc., for ease of management and decreasing running costs. We, however, felt that it would be difficult for the clinician to explain to the patient, after consulting, that the consultation record will be printed someplace else. Therefore, we decided to have individual printers at each consultation point so that the records can be handed over to the patient there and then. However, as for the purpose of scanning and storing patient’s old records, we decided to create centralized data/upload center with a large scanner to minimize wastage of consultant’s time.

• Automated Patient Identification: Though each patient has a Unique Identification Number or UID, we wanted a system where a patient would be recognized automatically by the system. This would decrease time of operation and minimize chances of human error. After deliberating on many options like fingerprint, face-recognition, we ultimately settled for the humble bar-code system. Facial recognition may not work if the patient has facial edema or has suffered an injury. And fingerprint, although an excellent method of identification, might be unnecessarily time-consuming in cases of emergency. Barcodes are useful in the sense that they provide identification even in absence of a patient, for example, in cases of severely ill patients where a caregiver generally does the paperwork. To this regard, barcode scanners were provided at every consultation point.

• Digitization of past and outside Records: We quickly realized that although we would be generating our own data in a digital format, we will be losing out a huge amount of data which includes the patient’s past treatment records, outside investigations and even in some cases, detailed notes that we have ourselves made using pen and paper. Therefore, we setup record upload centers, which not only has large format scanners for rapid scanning, but also a specialized device for scanning outside MRI and CT films.

• Seamless Integration of Diagnostic and Clinical Departments: On principle, we wanted complete integration between the diagnostic and clinical Departments, with the diagnostic Department being able to review patient history when needed for corroboration of test results and the clinical departments being able to see the status of the tests; from whether ordered, paid for, processed and report completed. To this regard, we developed network components and instrument interface systems that can communicate with machine output.

• Other Ancillary and Managerial Services: We wanted the same patient UID to be carried over for prescriptions, bills, payments, all further OPD visits, OPD consultations to other Departments and so on. Similarly, we wanted our clinicians to know the state of pharmacy stock, bed availability etc. While many of these features would be software dependent, we have defined a single, large network so that every terminal starting from the registration counter to bill desk, to stock and pharmacy can be accessed from any other terminal in the network.

• Need for Off-campus Access: The clinician/ consultant will definitely need to access patient data from outside our intranet, for example, from home, college office, out of station etc. For this purpose, we have defined domain-networking, where the consultant can log in from any off-center location and see all his patients’ details. Although, we have not yet implemented domain networking; as a first step, we have been able to provide internet and intranet running simultaneously in our network so that the consultants can have internet access at their terminal.

• Need for Software: Ultimately, we are in need of a software that will be highly customizable, and would provide us with the flexibility to make modification on the go as our Institute is rapidly developing and we might need to add new features in the software on priority basis as and when the services develop.

Implementation

While planning seemed to be a difficult task initially; implementation of the plan proved to be even more daunting. Being clinicians, neither were we accustomed to drawing specifications and uploading tenders, nor were we comfortable with the technical jargon of the IT solution-providers. Despite of our relatively “advanced IT knowledge!”, terms like “Jack panel”, “Jelly field riser cable”, “Active directory service” left us cleanly bowled and innumerable nights were spent in reading what networking solutions would best suit us. Our miseries were further compounded by the fact that everything was being constructed simultaneously, at a breakneck speed, which resulted in operational nightmares.
We went through funny situations: we ordered an air-conditioner and got it delivered but could not install it because the wall was not yet built! We ordered computers, but could not install them, as there were no tables! We went through fearful situations: the network cables were laid but we could not test them as there was no electricity! So, we kept on building the network purely on guesswork. But, we were also fortunate to get the support of many dedicated people. Every time we hit a bottleneck, we got the support from Construction, Electrical and Administration and came up with innovative ideas to bypass the hurdles. The Electrical Department provided us generator power at night-time to put up our network. The construction people altered floor plan to accommodate our devices and we converted a balcony to a full-fledged server room with A/C, ventilation and light in two days flat. A vendor provided us with extension boards by working overnight and saved our empire from falling over a horse shoe nail. Over and above everything was the iron-will of our Director to get things done and when situations became desperate, he was our rescuer.

Ultimately, we got ready with our system about two days before the starting of the OPD services. We held a hands-on demonstration for all faculty members for using the computers and the network and the remaining kinks were ironed out over the next two nights. With a fair bit of luck bestowed by the Almighty, our system was fully functional on the day the OPD services started and although it was supposed to be a trial system, it successfully managed a load of 600-700 new registrations per day. The first three days were the most exhausting for our IT team, when we spent late hours in troubleshooting “connectivity problems” and then again, had to rush at 7 AM to find out why the whole patient registration system was refusing to “start”. As happens in any new system, the clinicians also had to bear with multiple problems, which stemmed both from software glitches and also from the inexperience of using such a system. We all devised ingenious ways to bypass such problems (too numerous to be listed here) and created a Clinical-IT Committee which could handle such issues. Now, after a very exciting six months, we feel happy that majority of the hardware issues have settled down and we have a fully-functional intranet where patient registration, clinical visit, follow-up, inspection and investigations are seamlessly tied. We have also started providing internet services at all OPD terminals and are currently working to provide the same services for the In-Patient departments and the expanded OPD services.

Conclusion- The Way Ahead

The current system is far from perfect. Many parts of the hardware and network are running on temporary basis and would be completed as and when construction of the whole building occurs. For example, we are still relying on the slower copper-wire (CAT) network for intranet while the high-speed fibre optic cable is being laid. Similarly, we have a temporary 8mbps broadband line/connection while the 1gbps line is being constructed. The software errors are being continuously worked upon and till those solutions are made available, consultants have to accommodate. But, I guess, such things happen with every new endeavor. These are our initial teething problems and with time, they will settle down. What makes me really glad is what we have achieved in this short time. The convenience and ease of use it provides to the patients makes it well worth the effort. We have a huge task ahead of us of increasing the network to about five-fold with the OPD expansions and IPD services and we also intend to create additional network features like domain networking, off-campus access, integration of PACS according to the original plan. It’s a never-ending list, but it is said that “a job well begun is half done” and I feel that we definitely are on a solid start here.

Acknowledgement: This endeavor would have never seen the light of the day without the vision of our Director and the help of staff from Administration, Construction and Electrical departments. Also, our heartfelt gratitude goes to the staff of the IT cell and the consultants who have spent tireless hours to help this project come to a timely completion.

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Introduction
Nursing is an art as well as a profession of scientific care. Nursing is a unique profession with primary focus on care of the sick in the hospital and providing preventive, promotive and rehabilitative health care services to the community at large, too. The College of Nursing is committed to prepare competent nurses who will confidently take care of patients in any adverse condition.

The domain of Nursing is based on the synthesis of biological, behavioural, social and cultural sciences with a focus on the population across their life span to maximize their potential for optimal health. As a practice discipline, Nursing enters the lives of individuals, families and communities for the purpose of healing, maintenance and adaptation. Nursing continues to be an indispensable service in the health care sector. Nursing practice is also dynamic as it grows continuously through health care research, education, quality improvement and advocacy. Nursing personnel work independently, collaboratively and assume accountability and responsibility for the delivery of evidence based, cost effective quality client care. The turbulent swirl of change within the health care industry, the increased consumer awareness and increased health care cost has provided challenges and opportunities for Nursing. Competent nurses are in demand all over the world.

The College of Nursing, AIIMS, Jodhpur has been established to become a Centre of excellence in the field of Nursing Education and Research in India. The first batch of B.Sc (Hons) Nursing started on 2nd September, 2013 with an intake of 60 students. The College of Nursing, AIIMS Jodhpur is striving hard to prepare technically advanced professional nurses to cater to the need of the country, in specific and global, in general. The faculty of this College not only teaches students, but also guides and mentors them. The College of Nursing is committed to establish a state of the art Lab for Nursing skills development. These labs are equipped with advanced modern manikins, simulators and other nursing care equipment which are helpful in student learning and safe nursing practice before doing it in actual hospital setting. These labs provide an atmosphere where students are given real hands-on practice and build self confidence. Setting up of Obstetrics and Gynaecology lab, Paediatric Nursing lab and Community Health Nursing lab is in progress and very soon, these will start functioning.
Future Plans:
In near future, the College of Nursing will be providing higher levels of education and training through an improved education system that promotes seamless academic progress. The College will expand in the field of education through various courses such as - B.Sc Nursing and M.Sc Nursing courses in various Departments like Medical, Surgical, Community Health, Obstetrics & Gynaecological, Paediatric and Psychiatric Nursing. Post graduate diploma courses, CME, In-service education programmes and Community education programmes (health camp, health education, Immunization, role plays etc.) would be incorporated in the future. Research in various fields of Nursing is also high on the agenda of the Nursing college. All these activities will further add to the academic achievement through academic excellence in the preparation of nurses for different positions as bedside nurses, nurse educators, nurse administrator and nurse researchers.

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New AIIMS have been established under PMSSY with the aim of correcting regional imbalances in quality tertiary level healthcare and attaining self-sufficiency in graduate and postgraduate medical education and training in underserved areas of the country. As a premier Institute, AIIMS Jodhpur not only needs to be a leader in Health services but also a Centre of excellence in Medical Education Technology (MET) in Western India. This task can very well be achieved with the help of faculty development programs. The Faculty Development modules at AIIMS Jodhpur strive to provide an institutional framework which includes a broad range of activities to help renew and assist faculty in their multiple academic roles. These activities are designed to improve the knowledge and skills essential to their performance as educators and to assist faculty members in gaining a better understanding of academic career development, mentoring and leadership.

Globally, qualitative educational research is transforming the way we teach the present Gen Y students who are multi-taskers, prompt, eager and curious. Medical educators worldwide are keenly observing the development of medical education scenario in India. Our sincere efforts in keeping pace with our counterparts worldwide and also enhancing our learning environment for the physicians of tomorrow will definitely reap rich dividends in the form of a healthier society. A teacher in general, and Medical teacher in particular, needs to be a lifelong learner. Every teacher needs to keep updating herself/himself with new and contemporary technology. There are many pedagogical principles and techniques which a medical teacher is required to know in order to facilitate his/her student’s learning. Hence, there is a need for medical faculty to be trained in these technologies through faculty development programs. National Teachers Training Centres at JIPMER, Puducherry; IMS BHU, Varanasi; MAMC, New Delhi; Medical Council of India (MCI) through its 18 Regional training centres and 3 FAIMER Regional Institutes are already making huge strides in this direction, in India.

We envisage AIIMS Jodhpur to be a leader in MET since we now have sizeable faculty who are well trained in Medical Education and many more have shown their inclination towards medical Education and therefore, we should harness their full potential. With this vision and with the help of faculty support, our Director, Prof. Sanjeev Mistra, has introduced the following activities:

1. Basic Course workshop module in Medical Education Technology:

   Course Objectives:
   - To sensitize faculty members about new concepts in teaching and assessment methods
   - To develop knowledge and clinical skills required for performing the role of competent and effective teacher, researcher, mentor and leader in Education
   - To assist clinicians to acquire competency in communication and behavioral skills
   - To update knowledge using modern information and research methodology tools.

   To start with, the Basic Course was introduced in May 2013 with a motive to sensitize and apprise faculty members to the concepts of Pedagogical principles in multiple sessions spread over several days, providing flexibility as well as giving sufficient time to imbibe newer concepts through mutual discussions onsite, offline as well as online through google groups. Moreover, faculty was also sensitized on newer curricular reforms and teaching elements like Foundation Course, Early Clinical Exposure, Integrated teaching and Skills development. Importance of Educational Research and giving effective feedback was also discussed, apart from the standard module which comprised of the following topics:

   a. Group Dynamics, Adult Learning Principles, effective teaching and learning, framing SMART educational objectives
   b. Teaching-Learning strategies- Teaching methods, teaching Media, innovative teaching methods including small group method, OMP
   c. Assessment principles and technology- theory- (MCQs, LAQ, SAQ, MEQ), Practical examinations (Long Case, short case, OSLER, OSPE, OSCE, Viva, MiniCEX etc)
   d. Hands-on demonstrations were given for OMP, OSCE and Feedback using Pendleton’s methodology
   e. Feedbacks were taken through multiple methods including survey monkey.

   Despite their busy schedule, faculty and resource persons both enjoyed the experience. The future modules on Assessment
technology and Research methods seems to be in great demand besides modules on e-learning.

2. Clinical Grand Rounds:
With the aim of evolving our knowledge, skills and keeping each one of us updated irrespective of the Department or speciality we belong to, Clinical Grand Rounds have been initiated on Wednesdays between 8-9 AM. Expecting everyone to be very busy in the next few months with the introduction of in-patient services, this program will be flexible in nature, to start with. But, in the coming years, it is expected to become a more competitive and collaborative meeting point for academic community with brilliant brains of the Institute. The meeting will be limited to 40 minutes with sufficient time for interaction and discussion.

Till now, 4 meetings have been held with thought provoking topics presented by Pediatrics (Dr. Neeraj- Cystic Fibrosis), Radiation Oncology (Dr. Punnet Pareek- Overview of Radiation Oncology), Physiology (Dr. Om Lata Bhagat- Autonomic functions in CVS, with a very interactive discussion between faculty members of AIIMS Jodhpur and Dr. K K Deepak from AIIMS, Delhi; connected through Skype call), Psychiatry (Dr. Koushik Sinha Deb- Medically Unexplained Physical Symptoms) and Pulmonary Medicine (Dr. Naveen Dutt- Allergic Bronchopulmonary Aspergillosis).

3. Clinico-Pathological Conference:
Held every Friday from 8-9 AM, coordinated by Prof. Shilajit Bhattacharya, the first case was presented together by Departments of Surgery, Radiation Oncology, Radiology with final impression by Pathology. Second session was by Microbiology on sample collection. An interesting autopsy was discussed on 31st January and then cases of sickle cell disease were elaborated on by Dr. Saptarshi Mandal.

4. Sleep symposium as a framework for innovations in CME delivery methods: NAMS-AIIMS Regional Symposium, held on 25th October, 2013 as part of NAMSCON 2013 with its state-of-art video recording through twin-HD cameras, provided the basic framework for delivering Continuing Medical Education in a cost effective manner. Furthermore, Sleep medicine appears to be one of the candidate courses which fits very well into evolving integrated teaching since the topic goes beyond the super specialist and leads us back to basics. The Video and power point presentations are being exploited for enhancing skills and knowledge among healthcare professionals through innovative methods.

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Year Book
MBBS 1st Year

AADITYA KATYAL
Captain Katy

AATHIRA SURENDRAN
lovely but mischievous

ABHISHEK KUMAR
Hard Disk!

AISHWARYA VENUGOPALAN
The pretty dancer

AJEY SINGH RATHORE
Roll no. 5, khade ho jao!!

ALA RAM
Vastav mein shandaar, hai ki nahi???

AMAL MOHANDAS
Our very own NETTER

AMRUTHA VARSHINI R
Studiously HUMERUS

ANANTHA NARAYAN CS
I'll follow my instincts and be myself for good

ANITA KUMARI
Quiet

ANKIT KR RAI
I let my work speak for me

ANKUSH ASHWANI
Hard working hai yeh!!

ANN NAYANA SAJI
studious

ANSHU ARORA
Helping and active
ARUN EJ
Full of thankfulness!

ASHOK KUMAR
Captain of cricket and ………

AVIRAL SRIVASTAVA
Bachha, will always be

BALU S
Keen observer….

BIBIN CHANDRAN
Naughty bibs!

DEEKSHA PATKAR
Simple & sporty

DEEPAK VERMA
Shining hamesha

DEEPAK VERMA
Shining hamesha

DHANESH MOTEN
Dhanno!! – guitar-wala

DIVYA BHATIA
OCD: Obsessive Compulsive Dancer

DIVYA TARACHANDANI
Fun loving

GOKUL S
Go cooill……!

ASHOK
All rounder Dugu!

ATHUL PRAKASH P
I put my trust in myself

AYUSHI AGARWAL
Mischievous

BHUVNESH KR MALAV
The Malav

DANY JOSE
Classic

DEVANSH RASTOGI
Devon ke DEV
GOVIND RAM SARAN
Cool!

HARDIK VEERWAL
Simply simple !!!

HEMANT THANNA
A learner

HIMANSHU
The always smiling clown

ISHA KAUR ARORA
Outrageously chocoholic

JITEN YADAV
A Different one

KAMAKSHI KAUL:
Naughtiest egg in the basket..... lolzz

KKOMAL SUVARNA :
Confident

KRISHNA KANT SINGH:
K.K. – the dumble boy

GUNJAN SANWAL
Very silent

HARIGOVIND V
Mutthu Swami

HENUKA VERMA
Child-like

HITESH GAUTAM
Nature lover

ISHITA MISURYA
Fun loving, foody

JITENDRA SINGH KHORWAL
Evening Boss

KARTIKEY SAINI:
In pursuit of happiness

KRATI SRIVASTAVA:
The nice one

KRITI KUNDU:
Singer
KUNAL GARG
Kuch bhi poochh lo

LOKY AGGARWAL
Loves to party.....playful idiot

MOHAMMED RAGIB KHAN
Good orator

NAZNEEN BANO
Sweet as sugar...

NIRBHAY NARAYAN SINGH
Sweet and saucy as Banarasi paan

PARUL SANWARIA
Observant

PRAKASH KUMAR
Simple Living

PRAVIN SHINDE
Adventurous

R. VAISHALI
Chennai express

LOKESH KUMAR
Genius!!

MANVEER SINGH
Smiling desi JAT boy

MUHAMMED FAIHAD M.A.
Independent

NIDHI YADAV
Cute

NIRBHAY NARAYAN SINGH
Sweet and saucy as Banarasi paan

PANKAJ VERMA
Unpredictably innocent

POONAM VERMA
Doe-like shyness

PRASHANT KR SHARMA
Enjoy life

PRITAM YADAV
Creature loving... All creatures!!!

RAGHVENDRA SINGH
Crazy for Maths & numbers
RAJAT RANKA
Rajjo- The CR!

RAKESH JAUNDA
Idiot?? Monk!

RAKSHITA JONWAL
Smart

RAMESH VERMA
Music lover

RAVI KANT MARU
Loves to study

REVATHY MENON
Doe eyed dancer

RIA SHARMA
Soft spoken

RICHA ASHTHANA
Witty

RITUL CHOUHARY
No limits!!

SABAHAT JAFAR
Child-like

SAKSHI KHYALIA
Darr ke aagey jeet hai...

SAMARTH GUPTA
Sports, sports and only sports

SANDEEP KRISHNAN
Gamer from God's own country..

SANJAY KR SAMARIA
Open hearted

SHARON KHADIYA
Simple

SHEFALI
Cool
SHIVAM GARG
Free spirit

SHREYA KRISHNA
Affectionate

SIMRANJEET SINGH
Hard core simplicity

SONAM BERWA
Studious

SURBHI VALMIKI
Frank and cool

VANDANA SWAMI
Ambitious

VINAYA SUDHEENDRAN P
Love to read

SHRADDHA KIRAN S
Ms. Gray’s (Anatomy Gray’s)

SIMI BRIDJIT G
Sincere

SONALI DAGAR
Shy

SOPHIA RAO
Always smiling

SWARAN SINGH YADAV
Living life, making choices

VIDUR SHARMA
Born performer

VISHAL NAGAR
Patriotic. JAI HIND!
ABHIJEET SINGH BARATH
Born to win

AKSHIT BUDHIRAJA
Tall, Taller, Tallest

AMIT KUMAR MEENA
Silence of the lambs

ANUBHAV RAJ
Live, laugh, love and enjoy

AYUSH JAKHAR
Fun to be with

DHARMENDRA ISHRAN
Dare not dare him

GALIB MIRZA N I
Passion for technology

AJAYPAL SINGH RAPAL
Trustworthy

AMIT GUPTA
Technical solutions @ AIIMS, JODHPUR

ANKIT GREWAL
Wants to have fun

AVINASH SHARMA
Sarpanch sahab

BHARAT VARDHAN
My life, my rules

DHARMENDRA KR JATAV
Hardworking

GAURAV KR TAILOR
Carefree chap
HARGOVIND SINGH
His mouth seldom expresses what his heart feels

HIMANSHU SWARNKAR
Cute

KAMLESH KUMAR
The Great Gambler

KULDEEP MEENA
Sincere

MANVENDRA SINGH TANWAR
Wickedly Charming

NIKHIL RAJVANSHI
Always Flirting

POOJA YADAV
Senti-Mental

PRAKRATI YADAV
The Nature- Caring & Sharing

RAJAT CHAUDHARY
The Dark Horse

HIMANSHU BANSAL
Sports are his lifeline

JYOTI KUMARI
Angelic

KARTIK JAIN
Jack of all trades, master of none

MAHENDRA KUMAR
The Experienced

NAGMA SHEENAM
The best actor

PARAG VIJAYVERGIA
The Naughty Neonate

PRADHAN KR MEENA
A Gentle Giant

PRIYA SINGHMOR
Loves to care

RAJNEESH DHIMAN
The Pretty Lass
RILSHAD A K
My name calls upon guns in mind (AK 47)

SHREY GOLE
Versatile

SONAM BHATI
Talking Doll

SUBHASH CHAND B
A true entertainer

SUMITA MANOHARI
Radiant

SWAPNIL TRIPATHI
The smart sprinter

TUSHAR MITTAL
Born to live

VEENA LAXMI
A rainbow personality

VIKRANT BARDHAN
Passionate about automobiles…. vrooommmm

SARTHAK SHARMA
A poetic genius

SIDDHARTH KUSHWAHA
The K.K. of AllMS, Jodhpur

SONITH PETER GEORGE
Awesome singer

SULOCHANA SARSwat
Simply sweet

SURESH KUMAR
Mad about cricket

TULSI APPAT
The Dark fantasy

VARTIKA KESARWANI
Sparkling

VIJETA PRASAD
Day dreamer

YASH KR PARIHAR
Amazing Composer
We all are very particular about our daily needs which are vital for the preservation of self. We FORGET that memory is one of the vital needs for preservation as well. Our brain, though hardwired, has the plasticity to improve upon this function as well as many others. Learning and memory have been one of the most extensively studied and researched topics because of the simple fact that all of us want to perform our daily duties efficiently, be it professional, academic or social. Memory has three components, as elaborated on by the Physiologists and Psychologists. First one is Acquisition, next comes Consolidation and last but not the least, is Retrieval. As is mentioned above, our brain with its millions of connections is flexible and plastic. So, are there means to enhance our memory? Let us take a journey and look for the ways and means to do it. Welcome aboard.

They say that you can’t teach an old dog new tricks. But, when it comes to the brain, scientists have discovered that this old adage simply isn’t true. The human brain has an astonishing ability to adapt and change—even into old age. This ability is known as neuroplasticity. With the right stimulation, your brain can form new neural pathways, alter existing connections and adapt and react in ever-changing ways.

The brain’s incredible ability to reshape itself holds true when it comes to learning and memory. You can harness the natural power of neuroplasticity to increase your cognitive abilities, augment your ability to learn new information and improve your memory.

**Improving memory tip 1: Don’t skimp on exercise or sleep**

Just as an athlete relies on sleep and a nutrition-packed diet to perform his or her best, your ability to remember increases when you nurture your brain with other healthy habits.

*When you Exercise, you exercise your brain as well*

Treating your body well can enhance your ability to process and recall information. Physical exercise increases oxygen to your brain and reduces the risk for disorders that lead to memory loss, such as diabetes and cardiovascular disease. Exercise may also boost the effects of helpful brain chemicals and protect brain cells.

*Sleep on it*

When you’re sleep deprived, your brain can’t operate at full capacity. Creativity, problem-solving abilities and critical thinking skills are compromised. Whether you are studying, working or trying to juggle life’s many demands, sleep deprivation is a recipe for disaster. But, sleep is critical to learning and memory in an even more fundamental way. Research shows that sleep is necessary for memory consolidation, with the key memory-enhancing activity occurring during the deepest stages of sleep.

**Improving memory tip 2: Take out time for friends and fun**

When you think of ways to improving memory, do “serious” activities such as wrestling with the crossword puzzle or mastering chess strategy, or more light-hearted pastimes such as hanging out with friends or enjoying a funny movie, come to mind? For most of us, it is probably the former. But, countless studies show that a life that is full of friends and fun comes with cognitive benefits.

Human beings are highly social animals. We are not meant to survive, let alone thrive, in isolation. Relationships stimulate our brains. In fact, interacting with others may be the best kind of brain exercise.

Having meaningful relationships and a strong support system are vital not only to emotional health but, also to brain health. In a recent study from the Harvard School of Public Health, researchers found that people with the most active social lives had the slowest rate of memory decline.

*Laughter is the best Medicine (for memory too, so laugh and learn)*

You’ve heard that laughter is the best medicine and that holds true for the brain as well as the body. Unlike emotional responses, which are limited to specific areas of the brain, laughter engages multiple regions across the whole brain.

Furthermore, listening to jokes and working out punch lines activates areas of the brain vital to learning and creativity. As psychologist Daniel Goleman notes in his book Emotional Intelligence, “laughter…seems to help people think more broadly and associate more freely.”

Looking for ways to bring more laughter in your life? Start with these basics:

1. **Laugh at yourself.** Share your embarrassing moments. The best way to take ourselves less seriously is to talk about the times when we took ourselves too seriously.
2. **When you hear laughter, move towards it.** Most of the time, people are very happy to share something funny because it gives them an opportunity to laugh again and feed off the humor you find in it. When you hear laughter, seek it out and ask, “What’s funny?”
3. **Spend time with fun, playful people.** These are people who laugh...
3. It’s fun. Physical and emotional enjoyment is important in the activity you choose, as long as it meets the following three criteria:

N. Surround yourself with reminders to lighten up. Keep a toy on your desk or in your car. Put up a funny poster in your office. Choose a computer screensaver that makes you laugh. Frame photos of you and your family or friends having fun.

• Pay attention to children and emulate them. They are the experts on playing, taking life lightly and laughing.

Improving memory tip 3: Keep stress in check
Stress is one of the brain’s worst enemies. Over time, if left unchecked, chronic stress destroys brain cells and damages the hippocampus, the region of the brain involved in the formation of new memories and the retrieval of old ones.

Improving memory tip 4: Give your brain a workout
By the time you’ve reached adulthood, your brain has developed millions of neural pathways that help you process information quickly, solve familiar problems and execute familiar tasks with a minimum of mental effort. But, if you always stick to these well-worn paths, you aren’t giving your brain the stimulation it needs to keep growing and developing. You have to shake things up from time to time! Try taking a new route home from work or the grocery store, visiting new places on the weekend or reading different kinds of books.

Memory, like muscular strength, requires you to “use it or lose it.” The more you work out your brain, the better you will be able to process and remember information. The best brain exercising activities break your routine and challenge you to use and develop new brain pathways. Activities that require using your hands are a great way to exercise your brain. Playing a musical instrument, juggling, enjoying a game, making pottery, knitting or needlework are activities that exercise the brain by challenging hand-eye coordination, spatial-temporal reasoning and creativity.

The brain exercising activity you choose can be virtually anything, so long as it meets the following three criteria:

1. It’s new. No matter how intellectually demanding the activity, if it is something you are already good at, it is not a good brain exercise. The activity needs to be something that is unfamiliar and out of your comfort zone.

2. It’s challenging. Anything that takes some mental effort and expands your knowledge will work. Examples include learning a new language, instrument, sport or tackling a challenging crossword or Sudoku puzzle.

3. It’s fun. Physical and emotional enjoyment is important in the brain’s learning process. The more interested and engaged you are in the activity, the more likely that you will continue doing it and the greater the benefits you will experience. The activity should be challenging, yes, it should also be something that is fun and enjoyable. Make an activity more pleasurable by appealing to your senses—playing music while you carry out the activity or rewarding yourself afterwards with a favorite treat, for example.

Tips for enhancing your ability to learn and remember:
• Pay attention. You can’t remember something if you never learned it and you can’t learn something, that is, encode it into your brain if you don’t pay enough attention to it. It takes about eight seconds of intense focus to process a piece of information into your memory. If you are easily distracted, pick a quiet place where you won’t be interrupted.

• Involve as many senses as possible. Try to relate information to colors, textures, smells and tastes. The physical act of writing information can help imprint it on to your brain. Even if you are a visual learner, read out loud what you want to remember. If you can recite it rhythmically, even better.

• Relate information to what you already know. Connect new data to information you already remember, whether it is new material that builds on previous knowledge, or something as simple as an address of a person who lives on a street where you already know someone.

• For more complex material, focus on understanding basic ideas rather than memorizing isolated details. Practice explaining the ideas to someone else in your own words.

• Rehearse information you have already learned. Review what you have learned the same day you learn it and at intervals, thereafter. This “spaced rehearsal” is more effective than cramming, especially for retaining what you’ve learned.

We sincerely hope that you all will REMEMBER the tips and improve your memory by assimilating learning, consolidation and retrieval process.

How to construct a study session to improve memory and recall!
Ramesh has a terminal examination on Monday and it is Saturday morning already. He has not gone through the syllabus till now and is really getting desperate. He starts studying on Saturday morning and goes through a ten hour session on Saturday and an 8 hour session on Sunday stretching well into the night. He reads over each chapter from beginning to end. But, when he sits down to take the exam the next day, he can’t seem to remember a thing that he read. What happened? Does this sound familiar to you?

Ramesh went about studying the wrong way. Without a properly structured study session and without active learning, a retention rate of only about 20 percent is attained, no matter how smart you are. Unfortunately, Ramesh’s study methods are pretty common among students.

The following methods will help to improve your recall:
1. Pegs to the rescue
   a. Pegs are for hanging coats! Right? Wrong!! Human memory is fundamentally associative, implying that a new piece of information is remembered and assimilated better if it can be associated with previously acquired knowledge which is already firmly anchored in memory. Thus, recalling a fact or a figure is definitely easier when correlated with previous memories. It is these previous memories which act as pegs on which you hang the new memories. Whenever you start reading a new chapter or disease, it is worthwhile to recollect whatever you remember about that topic from previous classes. For example, while reading about Diabetes mellitus, you can draw upon your experience/memory of relatives/cases with the disease. You can remember the anatomy of the pancreas and the physiology lessons on Insulin before starting the chapter. This will bring the learning exercise into proper perspective and allow you to create a “memory peg” on which to hang all the new information.

   It also helps to flip through the material briefly. Read the preface, table of contents and chapter summaries. Preview a chapter by studying its outline and skimming the chapter (especially the headings, photographs and charts). The object being to get an overview of the book or chapter (this shouldn’t take more than a few minutes).

2. Marathon or a sprint?!
   a. Do a simple test. Make a list of 20 items and give it to a friend for a few minutes and ask him/her to recall the material. Studies have shown that most of the items recalled will either be at the beginning or at the end of the list. The same also happens in a study session. You tend to recall the material you read at the beginning and at the end of the session. Almost everything in the middle is forgotten.
   b. This augurs poorly for one marathon study session. The ideal study session should be brief with breaks (also known as a Sprint!!). A thirty minute study session is ideal. This should be followed by a small break from studies. While reading complex topics where the flow of the material is necessary for in-depth understanding, the session can be extended up to an hour. But, these should be the exceptions rather than the rule.

3. Let there be breaks!!
   a. As already mentioned, marathon sessions are counterproductive. It helps to break these sessions into smaller “sprints” separated by breaks from studies. The breaks should be small, no more than 5 minutes and should be utilized for an activity unrelated to the studying or reading. Physical activities like walks/dance or listening to music are recommended. However, do not allow the breaks to extend beyond the stipulated five minutes.

4. Recall
   a. Before beginning the next “sprint” session, it is useful to recall the highlights of the previous session. This prepares the mind to focus on to the next session and brings continuity to the session.

5. Review/Revision
   a. On a new day, it is useful to review the material studied the day before by flipping over the material. This hardly takes more than a few minutes but is very helpful in committing the new facts to memory.
   b. Subsequent revisions of the chapter should be done weekly. This revision should be continued till the chapter is committed to memory. This is known as “overlearning”, a material beyond bare mastery. These methods will be useful for planning a study session. It always helps to follow the PQRST method during the “sprint” sessions which comprises of Preview, Question, Read, State and Test.

6. Preview
   As already discussed, previewing the material by glancing through the chapter on hand with emphasis on the diagrams and headings is very useful.

7. Question
   Ask important questions about the chapter you are reading. I often visualize an examiner asking me questions in a viva, for eg. What is Diabetes mellitus? How do you diagnose it? How do you treat it? What are its complications? etc.

8. Reading
   It is just not enough to read a chapter passively. It is important to follow the line of reasoning of a chapter and question what is being read. Underlining/highlighting can be a useful tool if it is confined to the most important facts in the chapter. Used sparingly, underlining helps to highlight important points which are very useful during a revision session. However, many students fall into the trap of underlining the entire text while reading.

9. State
   State the answers to key questions out loud. Reread the chapter and ask yourself questions and answer them out loud and think about what you are saying. You should spend about half of your study time reaffirming the information out loud.

10. Test
    Test yourself to make sure you remember the information. Go through the chapter again and ask questions. Space out your self-testing so that you are doing it during a study session, after a study session and immediately before a test. If you would like, enlist the help of a friend to quiz you.
    With these simple tools, anyone can study more effectively with much more efficient recall. Smaller study sessions with breaks are the keys to break the monotony of longer sessions and hence, to improve memory and recall.

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Are you stressed? Do you know anybody who is free of stress? Yeah!!
There is only one group of people who have no stress: RIP (resting in
peace). So, it is good to acknowledge your stress here and have a
happy reading.

**What is Stress?**
Stress is the body’s response to a perceived threat. It is an adaptation
process in which human beings react both physically and mentally to
changes, events and situations in their lives. It is a state when
demands exceed the resources and disturb homeostasis. It is natural
but becomes a problem only when it exceeds the individual’s
capacity to cope.

There are two types of stress. Positive stress or 'eustress' helps a
person to perform at a higher level and achieve goals. Negative stress
or 'distress' generates anxiety and hinders performance and overall
well-being.

Stress is a fact of life. So, we can’t avoid stress but, we can learn to
manage it so that it doesn’t manage us. Stress management is an
important skill for everyone to have a better control on one’s life.
Here, my purpose is to give an overview on the prevention and
management of stress.

**General strategies of stress management**
- First, recognize stress and attempt to understand its cause/s
  and possible solution/s
- Talk about it; write about it to understand it better
- Eat well
- Sleep well
- Spend some time in humor- movies, comedy clubs, or with
  friends
- Develop hobbies to rejuvenate yourself
- Take regular exercise and play a sport of your choice
- Avoid unhealthy ways to cope: alcohol, smoking and other
  substances
- Prepare a problem list for anticipated stress: problem, step/s I
  can take, when, progress

**Specific strategies of stress management**

**Problem Solving Skill**
It is a technique to solve various problems and is very important
for managing stress. Following are the steps to solve a problem:
- Define the problem with clarity and be specific
- Analyze the problem
- Brainstorm possible solutions
- Evaluate each solution and select the best possible option
- Implement the best solution
- Evaluate the outcome

**Active coping**
'Problem focused coping’ is the most effective coping strategy in
which the individual faces a situation as a problem and attempts to
solve it, considering that the situation can be changed. On the other
hand, 'emotion focused coping' is less effective in which an
individual’s focus is primarily on reduction of the emotional strain
rather than actively working on it.

**Communication skills**
Stress is commonly perceived from interactions we have with other
people such as conflicts with other people, feeling of not being heard,
working in a group that is not functioning well and needing help but
not knowing how to ask for it. Effective communication skills can
reduce stress by decreasing demands or increasing resources. There
are three general communication styles: aggressive, passive and
assertive. The most effective of these is the assertive style. The goal of
assertive communication is to honestly communicate your thoughts
and needs in a respectful manner.

**Deep breathing**
It is a very easy and effective relaxation technique. It releases tension
from the body and clears the mind, and also improves both physical
and mental wellness. It emphasizes on abdominal breathing which
should be as slow as possible and as deep as feasible. It can be done
any time except after heavy meals. One should practice it regularly as
well as when distressed.

**Progressive Muscle Relaxation**
It is a two-step process in which you tense and relax different muscles
in the body. It reduces overall body tension and relaxes body and
mind. It involves following four main muscle groups: 1) face 2) neck,
shoulders and arms 3) abdomen and chest and 4) the buttocks, legs
and feet.

**Guided imagery**
It is a convenient technique that can help you manage stress quickly
and reduce tension in the body. It involves imagining a scene like
beach, a favorite spot, quiet place in the woods or an idol of a deity in
whom one feels at peace.

Mindfulness
Mindfulness is the quality of being fully engaged in the present moment, without over-thinking or analyzing the experience. Rather than worrying about the future or dwelling on the past, mindfulness meditation switches the focus on what is happening right now. It provides a potentially powerful antidote to the common causes of daily stress such as time pressure, distraction, agitation and interpersonal conflicts. The following mindfulness meditation techniques can also be helpful for stress relief.

Mindful breathing
Find a comfortable place to sit. Keep your posture straight but relaxed and now focus completely on your breathing. Become aware of the sensations inside your air passages as the air enters the nose. Just become aware of that feeling as your breath goes in and out. Do not attempt to influence or check your breathing. Just allow yourself to be aware of the air going in and out, nothing else.

When a thought or feeling arises, simply observe and acknowledge it. There is no need to interpret it or to use it. If you feel yourself drifting away on a thought, then just return and refocus on your breathing. Use your breathing as the anchor for your mindfulness.

Body Scan
It promotes mindfulness by focusing your attention on various parts of your body as you can start with your feet and work your way up. Here, you simply focus on the way each part of your body feels, noticing any sensations without labeling them as “good or bad”.

Walking Meditation
In this technique, stay focused on the physicality of each step; the sensation of your feet touching the ground; the rhythm of your breath while moving and feeling the wind against your face.

Mindful Eating
Sit down and focus your full attention on the meal. This means no TV, reading the newspaper or other distractions. Eat slowly, taking time to concentrate on each bite, noticing the texture and taste of the food. E.g. juicy sensation, sweet taste and smell of watermelon with every bite.

Massage
Getting a massage provides deep relaxation and as the muscles in your body relax, so does your overstressed mind. It involves scalp, eyes, face, shoulder and foot.

Time Management
Time is the only resource we all have in equal shares. Lack of time is the most commonly stated reason for stress. For effective time management, first set goals, make a schedule and revise and revisit your plan. Following are a few strategies to use your time more efficiently:

- Have a balance in types of activities (mental, social, physical & spiritual)
- Have free time to reflect and plan on regular basis (Personal reflection)
- Make written lists of daily tasks to be done
- Set priorities and adhere to established priorities
- Learn self organization and assertiveness
- Overcome undue frustration and manage stress effectively

Positive attitude
It believes in ‘seed of equivalent benefit’ i.e. fixed purpose to make every experience, whether it is pleasant or unpleasant, yield some form of benefit. It helps to maintain equanimity and to nurture resilience.

Rational thinking
It includes clarity of thinking and proper appraisal and emphasizes balancing our expectations and setting realistic goals.
Stress is very common in day to day life. Use stress in a positive and healthy manner. Attempt to limit but certainly not to eliminate stress. Learn effective ways to manage stress. Hope, by now, you have learnt some measures to stay stress-free!
I am finally concluding this somewhat long discourse with beautiful quotes:

- Stress is not in our environment, it is what we perceive in our mind and body.
- There are some lessons you learn best in calm and some in storm (Willa Cather)
- Serenity Prayer: ‘God grant me the serenity to accept the things I cannot change; courage to change the things I can; and wisdom to know the difference.’
- You may not be able to smooth out the surf, but you can learn to ride the waves! So stop stressing, start living.

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**DRUG WATCH**

**Heightened risk for permanent peripheral neuropathy with fluoroquinolones**

Systemic fluoroquinolone antibiotics pose the risk for permanent peripheral neuropathy, US Food & Drug Administration (FDA) has issued a new safety warning. However, the topical fluoroquinolones, applied to the eyes or ears, are not known to be associated with this risk. Fluoroquinolones are among the most widely prescribed antibiotics and are used for a variety of infections.

A recent analysis of reports showed that the onset of neuropathy may occur often within a few days after initiation of treatment and may be permanent. The symptoms of nerve damage may continue for more than a year despite stopping the drug treatment.

It is advisable to switch to nonfluoroquinolone class of antibiotics if a patient develops symptoms of peripheral neuropathy, unless the benefits of fluoroquinolone treatment outweigh the risks. Patients should be given the Medication Guide with every prescription. Patients should contact the prescriber if they experience symptoms including pain, burning, tingling, numbness, weakness or a change in sensation to light touch, pain or temperature, or the sense of body position.

Peripheral neuropathy has been included on the labeling for fluoroquinolones going back to 2004 as a warning, but there is a paucity of medical literature about this association. Now, FDA has recommended that the drug labels and Medication Guides for all fluoroquinolone antibacterial drugs be updated to better describe the serious side effect of peripheral neuropathy. The other antibiotics capable of causing neuropathy include isoniazid (INH), linezolid, chloramphenicol, metronidazole, sulfonamides, colistin and dapsone.

**Tigecycline: Increased Risk of Death**

An analysis by the U.S. Food and Drug Administration (FDA) shows an increased risk of death among patients receiving tigecycline compared to other antibacterial drugs: 2.5% vs. 1.8%, respectively when intravenous (IV) tigecycline is used for FDA-approved uses as well as for non-approved uses. The adjusted risk difference for death was 0.6% with corresponding 95% confidence interval (0.0%, 1.2%). These results are based on a meta-analysis of 13 (phase 3 & 4) clinical trials in tigecycline-treated patients versus comparator-treated patients.

As a result, FDA has recommended and approved a new Boxed Warning about this risk to be added to the tigecycline drug label. A Boxed Warning is the strongest warning given to a drug. The cause of this mortality difference has not been established. Generally, deaths were the result of worsening infection, complications of infection or underlying co-morbidities. Health care professionals should reserve tigecycline for use in situations when alternative treatments are not suitable.

Tigecycline is FDA-approved to treat complicated Skin and Skin Structure Infections (cSSSI), complicated Intra-abdominal Infections (cIAI), and Community-acquired Bacterial Pneumonia (CABP). Tigecycline is not indicated for treatment of diabetic foot infection or for hospital-acquired or ventilator-associated pneumonia.

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**The boxed warning that appears on tigecycline label**

**WARNING: ALL-CAUSE MORTALITY**

An increase in all-cause mortality has been observed in a meta-analysis of Phase 3 and 4 clinical trials in tigecycline-treated patients versus comparator. The cause of this mortality risk difference of 0.6% (95% CI 0.1, 1.2) has not been established. Tigecycline should be reserved for use in situations when alternative treatments are not suitable.

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MY EXPERIENCE AS AN MCI INSPECTOR

It was exactly at four-o-clock on a summer evening a few years ago. I received a phone call from the office of the Medical Council of India (MCI): “Sir, are you interested in going for an MCI inspection? It is a medical college down south, about two-hour’s drive away from the city.”

- “When?” I asked.
- “At eight pm tonight. Your ticket is booked.”
- “Okay”, I confirmed.

“What’s the mad hurry about?” my wife asked, “You should have refused. They would have found someone else.”

“I have always wanted to know what MCI inspectors do and I do not want to miss this chance”, I insisted.

The flight was on time. Seated next to me were the two other inspectors. One of them was the permanent inspector of MCI: She was a lady who was a lecturer when I was an undergraduate student. I remembered her for the wrong reason: she had shouted at a boy who was restless in her class saying, “If you do not behave, we know how to get back at you”, a veiled threat that she had the power to detain him in the examinations. I was not surprised: permanent inspectors of MCI are required to be very strict.

When we landed at the airport at around 10:00 pm, we were welcomed with shawls and bouquets and driven down to Radisson hotel where we were lodged for the night. Our team leader, the permanent inspector, fiercely opposed the idea – she wanted to reach the medical college the same night and it took us a lot of persuasion to make her relent. If she had her way, we would have reached the college past midnight and started the inspection at 8:00 am sharp. However, she did ensure that we started very early the next morning and reached the medical college by 9:00 am.

It was a new medical college and it needed the permission of the MCI to start regular undergraduate classes from August. When the inspection started, I was given the task of physically inspecting the Anatomy, Physiology and Biochemistry Departments – the so called preclinical departments. The Head of the Anatomy Department introduced herself and her entire faculty to me and took me around through the Departments, showing me the lecture halls, demonstration rooms, the museum and the mortuary. I had with me a list that mentioned everything that a new Anatomy Department was required to have and I was supposed to verify them all. We began by counting the number of chairs in the Anatomy lecture hall. There were five chairs short of the stipulated hundred and the Head pleaded to me in supplication that the five chairs must be somewhere nearby. The consternation created by the presence of the MCI team was palpable and it was painful to see a senior professor of Anatomy thus humbled. I smiled and moved on. It was an ordeal for me to do what I did not believe in. The infrastructure that was deemed mandatory by the MCI was to me a colossal waste of money: I knew there were much less expensive and more efficient ways of imparting a far superior education in Anatomy. I felt the same as I was taken around through the Physiology and Biochemistry departments.

When I was through, I was escorted to the Principal’s office where my madam had created mayhem – shrieking and throwing everyone into a tizzy. She was going through the papers of the faculty members, who were standing by her table, to verify if they had adequate teaching experience. She did not consider it necessary even to ask them to be seated even though most of them were grey-haired professors who had retired from other colleges. After completing the verification of the preclinical department, she called the faculty of the paraclinical departments of Pathology, Microbiology, Pharmacology and Forensic Medicine. As the Head of the Pathology department walked in, our eyes met and I saw her face flush. To spare her embarrassment, I quickly looked the other way. She was none other than the same lady who had taken me around in the Anatomy Department, posing as the Head of the Anatomy Department!

The verification of papers continued rather uneventfully till madam stumbled upon the papers of a young lecturer-to-be in Forensic Medicine. She looked up to see the person – a young, sly-looking guy with a mischievous smile on his face. His very sight seemed to
infuriate her. “You have done your MD? What do you know of Forensic Medicine? What are the differences between a male and a female pelvis? … Between a male and a female jaw bone? How do you tell a homicide from a suicide...”, she hurled a flurry of questions at the hapless guy who continued to smile impishly. Peeved by his do-what-you-like smile, she flew into a fit of rage. “Show me your MD degree … it must be fake…I will get it cancelled right away...” she yelled. I knew she couldn’t be more wrong and decided to intervene. “Madam, it is of your own making”, I said firmly, “Do not probe it deeper or it will boomerang on the MCI. Rest assured, the certificate is genuine” Even at the peak of her tantrum, she could see reason and relented. She knew, and we all know, how terribly easy it is to get a genuine MD/MS degree under the watchful eyes of the MCI.

In the afternoon, when madam took me along for the outdoor inspection, I could feel a difference in her attitude towards me: Probably, following my firm intervention in the morning, she wasn’t taking me lightly anymore. When madam was shown the animal house, she wanted to see the animals too but quickly retracted her statement realizing its absurdity: animals are brought in only weeks before some experiments are to be performed on them. She did, however, take a serious note of the fact that there were no mattresses on the hostel beds. She was also extremely fastidious about the boundary wall. “These people also have an engineering college”, she explained to me, “and it is quite possible that they are trying to deceive us by showing us the boundary wall of the engineering college… these people are very clever…you know?” I gave an appreciative nod that seemed to please her. Though I couldn’t help wondering how it mattered if the engineering and medical colleges shared a vast, common campus with shared facilities where the would-be engineers and doctors could rub shoulders and make friends – medical students barely get enough time for extracurricular activities anyway.

In the evening, she sat on the computer in the Principal’s room to write her report on the inspection. Finding her to be very slow on the keyboard, I volunteered to type it out for her. She wanted perfect secrecy and I showed her how to lock an MS-Word document. As I typed out the detailed report, I knew it was a negative report: She hadn’t twisted the facts but had highlighted the negatives. She had also included that the hospital did not have adequate equipment and enough patients. I couldn’t see how these were immediately relevant because it would be a full year before students would visit the hospital. I felt sad to see the officials of the college tense and loitering nearby nervously. They wanted to know the results. I had a mischievous idea: madam would never know if I saved a copy of the document on the desktop with a different name for the benefit of the college officials. I decided against it. When the report was complete, madam copied it to her pen drive and asked me to delete the file from the computer and empty its recycle bin. She then made me search the entire computer twice over through the “search command” to ensure the file was really gone. She was paranoid: “You know, these people are very clever”, she told me, “They would do some tricks in the computer so that it retains a copy of the report in it”. I wished I had gone ahead with my little mischief!

Late in the evening, the owner of the college – a smart young surgeon with an FRCS, the son of a state minister – came to meet me in my hotel room. He wanted to know the verdict. My whole-hearted sympathies were with him and I gave him the hint. He was crestfallen but he opened up to me. The story he told me made me sit up. They had filed the application for MCI inspection of their college about three days before March-end – the stipulated deadline. Due to postal delay, MCI received the application on the first of April and refused to come down for inspection. The college appealed to the High Court and won. MCI appealed to the Supreme Court and lost. The court directed the MCI to inspect the college. The verdict was delivered in the court at 3:45pm. MCI had called me at 4:00pm. The plan was to rush down to the college at the shortest possible notice and catch the college administration unawares. His story explained, among others, madam’s urgency to rush to the college at night, straight from the airport and the absence of the Anatomy HOD during inspection. “Sir, I have spent 300 crores of rupees on this college”, he said, “Can I afford to wait for another year for the college to start? I am willing to pay any amount for hiring the best faculty for my college, but anyone I invite to join this college asks me if it is MCI-recognized, while the MCI wants me to have only MCI-recognized faculty.” His entreaty still rings in my ear.

I came back to Delhi with a heavy heart. It was insulting to do such a menial job and I wondered why doctors hanker for a chance to go on an MCI inspection. Money, it is widely believed, is the motivation but that may be true only of the permanent inspectors. For temporary inspectors like me, the lure of staying in a 5-star hotel, the food, the drinks, the gifts and the overall VIP treatment seem to be adequate inducements. As for myself, I have never accepted another offer for going on an MCI inspection though I keep receiving them, like other senior professors, with routine regularity. I had seen what I wanted to. A couple of years later, I was also offered the ultimate reward – the post of a permanent MCI inspector – but that is another story!

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THE DAY OF GODDESS SARASWATI

To the great Goddess of wisdom and knowledge, to the one from whom we derive our intellect, O holy lady in white, seated on a swan and playing out your symphonies on the veena, to you, we surrender ourselves...

Such was the serene and calm atmosphere on the occasion of Basant Panchami, 4th February, 2014 as more than 150 medical and nursing students, over 50 faculty members and many other staff members gathered with hands folded in reverence holding flowers between their palms, amidst the delicately wafting fragrance of incense sticks as the incantations of the Pandit rose high in the air. The Panditji then asked everyone to recite a prayer after him towards the end of which, he called out for ‘Pushpanjali’. Flowers showered from all around on the idol of Goddess Saraswati as the prayer ceremony culminated.

Such is the reverence of this day of Goddess Saraswati- ‘Basant Panchami’ at AIIMS Jodhpur. A tradition which began last year in 2013 with just a handful of students and faculty members continued with an ever increasing fervor into its second year. After attending the morning lectures for two hours, the students gathered in the examination hall for the puja. The hall had already been decorated by an enthusiastic and artistic group of students, ably led by Dr. Saptarshi Mandal. Honorable Director, Dr. Sanjeev Misra, Heads of various Departments and other faculty members graced the occasion with their presence and sought blessings from Ma Saraswati.

After the morning puja and Prasad distribution, special lunch had been arranged for all the faculty and students in the mess complex. The very thought of the delicious kheer made that day, makes our mouths water. In the evening, we all assembled for prayers at 7’o clock. It was a short ritual followed by Pushpanjali.

This was followed by an impromptu session of ‘Antakshari’, girls vs. boys. Girls were led by Dr. Shilajit Bhattacharya and Dr. Om Lata Bhagat while the boys were led by Dr. Surajit Ghatak. Nothing could have been more interesting and fun filled as the string of melodies that followed for the next one hour. No one wanted to leave. But, every beautiful thing comes to an end and end it must, for then comes a new beginning. With this thought, we all dispersed, our hearts still lingering on to the memories of the day.

- Abhijeet Singh Barath
(MBBS batch, 2012)
AWAKENING EXPERIENCES

It is the presence of this force of this spiritual and supreme power that gives us the sense of sacredness of the world. With this spirit pervading them, all things become divine in nature.

A passage from Wordsworth describes his sense of something far more deeply interfused:

Whose dwelling is the light of setting sun,
And the round ocean and the living air,
And the blue sky and in the mind of man:
A motion and a spirit, that impels
All thinking things, all objects of all thought,
And rolls through all things.

The sun was setting and I was watching it go down. I felt everything in the world was here, at this moment. The sunlight was so incredibly bright and pure and beautiful. The blue of the sky was the smoothest and purest blue I have ever seen. I could see everything about the clouds, as if they had acquired a whole new dimension. The trees seemed almost conscious, as if they were intelligent beings overlooking and observing the street scenes. As I looked at this, someone or something said to me, ‘That is beautiful’ and immediately, the whole scene lit up as though a BRIGHT LIGHT HAD BEEN TURNED ON, IRRADIATING EVERYTHING. The meadow was a more vivid green, a pear tree glowed and the black bird’s song was louder and sweeter. It seemed so simple and so right. I felt how easy it would be, to be happy.

At this intensity, awakening experiences reveal to us that the world isn’t the empty and indifferent place it appears to our ordinary consciousness. There is a sense of meaning, a sense of an atmosphere of harmony and benevolence. We have the beginning of a sense that is well, that the world, far from being a cold and indifferent place that science tells us it is, does “mean well” by us and is a benign place. No matter what problems fill our life and how full of violence and injustice the world is, there is a sense that, in some strange way, everything is good and that the world is somehow, perfect.

The Religious Experience Research Unit at Oxford University describes the same intensification of perception:

The phenomenon invariably occurs out of doors, more often than not when I am alone, although it has occurred when I am in the company of others. It is generally prefaced by a general feeling of “gladness to be alive”. I am never aware of how long this feeling persists, but, after a period, I am conscious of an awakening of my senses. Everything becomes suddenly more clearly defined; sights, sounds and smells take on a whole new meaning.

We all can achieve this level of consciousness. One that we have begun is the Fourth dimension—beyond medicine. It can be achieved in any form. Meditation, yoga, music, sport, any outdoor activity, attending satsangs or anything that makes you feel ecstatic and happy eternally. It at once recharges you for several coming days...

(Partly Adapted from the famous Book by Steve Taylor - Waking from Sleep)
WHERE THE MIND IS WITHOUT FEAR

Where the mind is without fear and the head is held high
Where knowledge is free
Where the world has not been broken up into fragments
By narrow domestic walls
Where words come out from the depths of truth
Where tireless striving stretches its arms towards perfection
Where the clear stream of reason has not lost its way
Into the dreary desert sand of dead habit
Where the mind is led forward by thee
Into ever-widening thought and action
Into that heaven of freedom, my Father, let my country awake.

Rabindranath Tagore

Contributed by : Dr. Vanita Lal
(An evergreen poetry - always so fresh in our minds.
One of the best poetry ever written by a sage,
then told, sung and admired and retold across schools of India, especially mine.)

AN EPILOGUE

I have seen flowers bloom in stony places,
And kind things done by men with ugly faces,
And the gold cup won by the worst horse at the races,
So, I trust too.
I know I have to go through tortuous mazes,
But, I believe in the saying of those sages,
Which still are true,
And from where each one’s aspirations drew.
So, I trust too.

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दिन दो मिर्ची बचपन के, जो तेरे संग मुझे नसीब हुए।
साल गुस्से, मोसम बदले, बचपन छोड़ हम बढ़े हुए।
कहाँ गये दो दिन, जो संग में तेरे बीते थे।
बचपन की दो मस्ती, जब तेरे संग हम हिस्से हो।

जो बैठने को दादी की गोद में, महासंग्राम हम लड़ते थे।
जो छुपी मिठाई के चक्के में सच सच मिशन हम करते थे।
यदि है मुझे सारी रहते जब फिर चंद मेरे स्वर्ग मारा सा तुम करती थी।
उस पत्त मेरे उठ जाने पर, झूठी मीठी का नाटक तब तुम करती थी।

मिल जाये जब दिन फिर से, यही हुआ में अब करता हूं,
तो हो फिर हम कभी बड़े, यही हुआ में अब करता हूं।

बॉ छुपकर मेरे लिये, तेरा तोहफे बनाना।
बॉ तेरी हर चीज पर मेरा हक जताना।
बॉ जब बोलकर माँ की बाप से मुझे बचाना।
बॉ द्वारे से छुड़ी के नये नये बढ़ाने सुझाना।

हां, तुम मेरी सबसे अच्छी दोस्त थी।
मेरी रस-रा का जानती थी।
तभी तो मुझे सलाह का हर मोका तुम जानती थी।
तभी तो मुझे मनहाने का हर मरीज तुम जानती थी।

बॉ तेरा मेरा बार-बार ख़ाल्ला, फिर कई दिनों तक बॉ बात ना करता।
तेरा मुझे हर बार बनाना, बॉ तेरा भाई बहार करके बुलाना।
बॉ दिन भी कहते हमारी कंधे, जब बॉ बात नहीं हम करते थे।
बॉ संग में तेरे, गलियों में छुपन छुपाई हम खेलते थे।

मिल जाये जब दिन फिर से, यही हुआ में अब करता हूं।
ना हो फिर हम कभी बड़े, यही हुआ में अब करता हूं।

यश कुमार परिहार
MBBS Batch 2012
मरती जिंदगी

खुले से दिन है
राते युग्मसान सी....
शुकरी सी चल रही
सांते मेहमान सी.....
दिल की घड़क
शुभंगी सी पड़ रही....
चल दी है होख़ा देके जिंदगी इंसान सी....

मौत का गम नही….
यादो का साथ है....!
बार भी खो गए....
बा दो मातृक मेरे साथ है....!
अब रब का साथ या
खुली हैतान की किताब है....
बार दोस्त प्यार परिवार ...
पुष्प पाप होमा सबका हिसाब है....!
दर्रे लिखता रहा... ...
भयोषत कागज कलम से....
इसने छुड़ाए अपने....
दिया अकॊलॉपन का खिताब है....!

अब अंधेरा है रोशन ....
रोशनी काली स्याह सी....
चल दी है देके होख़ा जिंदगी इंसान सी....

कोई जलाएगा, कोई देजा दफ़ना.....
जन्म की जात पात का इतना सा काम है....
कफ़न मे जेब की बातें हैं करते सब....
कोई बताए मुझको!!
सरने के बाद इंसान की जात क्या है?
हैतान की दया या रब की दरिंदगी....
शुकरी सा कारवां ये मेरी जिंदगी ....
मरते से पारी की आविर्द्ध उड़ान सी....
चल दी है देके होख़ा जिंदगी इंसान सी....

मानवेन्द्र सिंह तेक्का
MBBS Batch 2012

(P.S. बहोरस्त = बदशाहुबी = मनुष्कु)
क्या हम कर्त्तव्य निभाते हैं?

माता-पिता ने जन्म दिया,
अपना सूख हम पर न्योछाय किया,
कई मेहनत व बड़े प्यार से हमें पाल पोस बढ़ा किया,
हर मुशिके में आगे बढ़ना सिखाते हैं,
क्या हम कर्त्तव्य निभाते हैं?

गुरुजी ने ज्ञान दिया,
जीवन जीने का मार्ग दिया,
हमें लड़की की ओर अग्रसर कर अपनी जिम्मेदारी को पूरा किया,
विश्वास छोड़कर परिश्रम करना सिखाते हैं,
क्या हम कर्त्तव्य निभाते हैं?

हमें कितनां को वचन दिया,
कितने बच्चों को पूरा किया,
सब भूल आनंद ग्रहण कर, कितने लोगों को भोजन दिया,
लड़की छोड़कर अपनी आत्मा को मूर्ख बनाते हैं,
क्या हम कर्त्तव्य निभाते हैं?
क्या हम कर्त्तव्य निभाते हैं?

नगमा शीलम
MBBS Batch 2012
ये कैसी विदंबना....

मैं तैनी प्यारी बेटी, तैनी आँखों की दुलारी,
आज है लाचार, इस हालात की मार्दी।
तेरे अंगुल के छोव में, जो नाजुक से थी पत्ती बड़ी,
आज है उलझान में, इस दुनिया में अंकली खड़ी।

हर लड़का सुखा होने का, जो सपना तमने दिखाया था,
हाथ फेंककर सिर पर प्यार कर, जब होँगी में सुखे बैठकर था।
कह़ा था उस समय तूने, उस घर को हर सुख बेदना,
हो गये हे तुं हुए घर से निकले, अब उस मैं को ही अपना कहना।
फिर ये में हमी दुलारी में चयी आज ये कहती हैं,
तेरी कोक में बंधा का अंक नहीं, एक मनहूँ सी बेटी है।

में आपसी प्रशंसक पाति जो फलकों पर सुखी सरकता था,
जीवन में, हर दुलारी को खवाब जो दिल में भरता था।
यो अवस्था जिसके रंगों में तितनी समाई रहती है,
जिन नज़रों के लिए हर पल में सजी हुई रहती थी।

फिर क्यों मेरे इस अज्ञाते दुकाने को दिखे, मैं उन कुलों में घिर गयी,
क्यों आज मैं तेरी बेटी, इस घर से भी निकला हो गयी।
तुं तेरी चहती थी मैं कि तेरा में नहीं रहता है सबसे बड़ा,
मैं रहती है 9 माह के बाद में, कहती है आपने अद्वित में बढ़ा।
ताकि उसकी बेटी किसी और का अन्न खाना सके,
किसी और का घर बंधा, वो आगे बढ़ना सके।
फिर क्यों ये समाज सौंपता है, लोटियों घर पर बोझ बढ़ती हैं,
फिर तीनों हो समाज कहता है, कि बंधा टो बेटा ही बढ़ता है।
देती हूं अब तो ये तुझे धर्म,
इनके घर अब बन्हे पत्ता ही रखके,
पाल पोसतकर बढ़ा करे उसे लेक्कर,
बंधा बढ़ने को कोई लड़की ना मिले।

सोचती हूं कि अब इस दुलिया में बस आकस्मिक ही आगे बढ़ा,
लखर इस समाज से बेटी की निवेर्जन से बढ़ा करता।
ताकि पढ़-लिखवर वो मजबूत बन सके,
इस जाति में आगे बढ़कर इस सुलिया में लग सके।
बस तुझे आवश्यकता तुम्हारी, आवश्यक हर पल संयम हो,
दे शक्ति तुम्हारी मुक्त, मन में अब कोई झरा जा हो।

वश कृष्ण परिहार
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