Editorial Board:

Chairman : Prof. Sanjeev Misra
Chief Editor : Dr. Arvind Sinha
Editors : Dr. Rajesh Sharma, Dr. Poonam Elhence
          Dr. Pankaj Bhardwaj, Dr. Pushpinder S. Khera,
          Dr. Amit Goyal, Dr. Neeraj Gupta
Students' Representatives : Sarthak, Nagma Sheenam
MESSAGE

I am extremely happy to learn that the third edition of ROHIDA is being published and I am sure this issue will also serve to satisfy and enthral all the readers as it has been in its previous editions.

In my last two messages I had highlighted the importance of an Institute like AIIMS to achieve four major milestones. Academics, Patient care, Research and outreach to the community. I again emphasize the importance of these pillars upon which a great Medical teaching and health providing Institute is built and at AIIMS Jodhpur we all strive for that and I take pride in sharing my satisfaction with one and all in the effort to achieve these goals.

Success in any medical stream involves two distinct phenomena. First one is the thorough understanding of various core concepts and the second is the application of the concepts in applied sciences. It requires a planned and methodical preparation for the best results in the available amount of time. To achieve this we have to identify these areas and come out with strategic solutions and scientifically proven techniques for them. Our faculty in concert with the Medical education Unit at AIIMS Jodhpur have identified these areas of modern learning and doing an arduous effort. I sincerely acknowledge their active participation in this direction.

I further envisage to incorporate the following qualities to add rock to our pillar and they are: Organization, Distinctiveness, Effort & Elaboration.

Over the last one year we have cared for more than one lakh patients in our outdoor department which includes consultation as well as diagnostic care. Apart from the outdoor support, we have had more than 700 patients in the IPD & more than 200 major surgeries successfully undertaken in our operation theaters. With the commissioning of five more major operating theaters & the video bronchoscopy unit, we expect these numbers to grow in the future.

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 third issue of Rohida a success and also all the faculty members and students who have actively contributed to the magazine.

Lastly I wish that the achievements of our Institute should be "HEARD" through the progress in the fields of Health, Education, Administration, Research & Development.

Dr. Sanjeev Misra
Director & CEO
MESSAGE

It gives me immense pleasure to present the third issue of Rohida, the college magazine of All India Institute of Medical Sciences, Jodhpur. It would be released on the occasion of the 2nd Annual Day of AIIMS on 9th Oct 2014. I wish to congratulate the editorial board for the immense effort in bringing out the magazine. It’s time, however, that the students now take a more active part in bringing out the magazine.

It was two years back when our first students started trickling into the college. However, with the student strength exceeding 350, the campus now has a more vibrant and active outlook. AIIMS Jodhpur is fast gaining a reputation for excellence in medical education and the brightest students in medical field are opting for the Institution from across the country. I hope that in the near future, AIIMS Jodhpur becomes more cosmopolitan in nature as diversity is a great asset for an Institute.

AIIMS Jodhpur is also making immense progress in the field of patient care. There are six operating theaters which have been commissioned with five fully furnished major operating theaters and one general anesthesia enabled minor operating theaters (for day care surgeries). More than two hundred cases have been performed at the Hospital. One State of the art video bronchoscopy suite has also been established. Fully functional Intensive care unit, Pediatric ICU and Neonatal ICU have also been set up and is expected to be functional within a fortnight.

Rohida documents the achievements of the Institute over the last six months. It also includes various literary articles which speaks highly of the creative instincts of the students and the staff. As before, an year book type of pages have been included for the newly joined students, which, I hope, will be a constant source of fond memories for these students when they leave the portals of the Institute.

Happy Reading
Yours truly

Dr. Arvind Sinha
Chief Editor
<table>
<thead>
<tr>
<th>Date</th>
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<tr>
<td>22nd March</td>
<td>World Water Day Celebration at Bayatu (Barmer)</td>
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<td>24th March</td>
<td>World Health Day, Community awareness &amp; Fever Survey</td>
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<td>2nd April</td>
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<td>1st National Inter college Quiz Competition</td>
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<td>International Nurses day celebration</td>
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<td>18th July</td>
<td>Online access started to e-journals at e-library, AIIMS, Jodhpur</td>
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<td>1st-4th August</td>
<td>First Responder pre-hospital trauma care training course</td>
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<td>8th August</td>
<td>1st Public Awareness Lecture</td>
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<td>15th August</td>
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<td>16th August</td>
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<td>24th August</td>
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<tr>
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<td>12th-13th September</td>
<td>CME on Immunology, Department of Microbiology</td>
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<td>17th September</td>
<td>Tree Plantation Drive</td>
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<tr>
<td>25th September</td>
<td>Major Operating Theater Block Commissioned</td>
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<tr>
<td>27th September</td>
<td>CME on Current Concepts in Hip Arthroplasty, Department of Orthopedics</td>
</tr>
</tbody>
</table>
Departments' Achievements

Department of Anatomy
Dr. Surajit Ghatak
Articles Published/Accepted: 5
Abstracts published/accepted: 4
Editorials: 2
Conferences/Workshops/Trainings
1. Organizing chairman for Hands on Cadaver dissection workshop on anterior and lateral Skull base surgery held in March 2014 at AIIMS Jodhpur.
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
3. Appointed member of the Editorial Board of Indian Journal of Clinical Anatomy and Physiology
4. Theory Paper setting for Undergraduate Medical students at various colleges in India.
5. Practical Examiner for various UG & PG exams.

Dr. Brijendra Singh:
Articles Published/Accepted: 7
Abstracts published/accepted: 4
Book Author/Chapter contribution: Author of two books. (Exam success review-MCQs for MBBS 1st Prof & PG Entrance-Head, Neck & Brain Vol.1 published May 2014, Exam success review-MCQs for MBBS 1st Prof & PG Entrance-Upper Limb & Thorax Vol.2 under publication)
Editorials: 2
Conferences/Workshops/Trainings:
1. Chaired session in NACO Stem Cell 2014 at AIIMS, Raipur
2. Basic Life support (BLS) Course American Heart Association in coordination with Indian Institute of Emergency Medical Services (IIEMS) at AIIMS, Jodhpur on 2nd April 2014
3. Member of organizing committee in Hands on Cadaver dissection workshop on anterior and lateral Skull base surgery held at AIIMS Jodhpur from 29th-30th March 2014.
4. Elected as Editorial Board Member of Indian Journal of Clinical Anatomy & Physiology
5. Became member of Indian Society of Human Genetics

Administrative/Academic responsibilities
1. Subject expert for anatomy for National Board of Examinations.

Dr. Shilpi Gupta Dixit:
Articles published/accepted: 2
Abstracts published/accepted: 3
Conferences/Workshops/Trainings:

Administrative/Academic responsibilities
1. Examiner for undergraduate students at various colleges in India.
2. Subject expert for anatomy for National Board of Examinations.

Dr. Renu Gupta:
Articles published: 4
Abstracts published: 5
Training, Workshops and Conferences:
1. Invited lecture by Central Wool Development Board on Food habits and increment in Immunity in Jodhpur on 5th March 2014
2. Obtained membership of Anatomical Society of India (ASI).

Dr. Dushyant Agrawal:
Articles published: 3
Abstracts published: 4
Training, Workshops and Conferences:
2. Basic Life support (BLS) Course by American Heart Association in coordination with Indian Institute of Emergency Medical Services (IIEMS) at AIIMS, Jodhpur on 2nd April 2014
4. Elected as Editorial Board Member of Indian Journal of Clinical Anatomy & Physiology

Administrative/Academic responsibilities
1. Subject expert for anatomy for National Board of Examinations.

Dr. Ashish Nayyar:
Articles published: 2
Abstracts published: 3
Training, Workshops and Conferences:
1. Hands on Cadaver dissection workshop on anterior and lateral Skull base surgery, at AIIMS Jodhpur from 29th-30th March 2014
3. Basic Life support (BLS) Course by American Heart Association in coordination with Indian Institute of Emergency Medical Services (IIEMS) at AIIMS, Jodhpur on 2nd April 2014
4. Member of organizing committee in Hands on Cadaver dissection workshop on anterior and lateral Skull base surgery held at AIIMS Jodhpur from 29th-30th March 2014.

Administrative/Academic responsibilities
1. Subject expert for anatomy for National Board of Examinations.
2. External Examiner for BSc (hons.) Nursing at All India Institute of Medical Sciences, Rishikesh.

Department of Anesthesiology
Dr. Pradeep Bhatia
Publications: 3
Conferences/Workshops/Trainings

Departments’ Achievements

Department of Anatomy
Dr. Surajit Ghatak
Articles Published/Accepted: 5
Abstracts published/accepted: 4
Editorials: 2

Conferences/Workshops/Trainings
1. Organizing chairman for Hands on Cadaver dissection workshop on anterior and lateral Skull base surgery held in March 2014 at AIIMS Jodhpur.

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
3. Appointed member of the Editorial Board of Indian Journal of Clinical Anatomy and Physiology
4. Theory Paper setting for Undergraduate Medical students at various colleges in India.
5. Practical Examiner for various UG & PG exams.

Dr. Brijendra Singh:
Articles Published/Accepted: 7
Abstracts published/accepted: 4

Book Author/Chapter contribution: Author of two books. (Exam success review-MCQs for MBBS 1st Prof & PG Entrance-Head, Neck & Brain Vol.1 published May 2014, Exam success review-MCQs for MBBS 1st Prof & PG Entrance-Upper Limb & Thorax Vol.2 under publication)

Editorials: 2

Conferences/Workshops/Trainings:
1. Chaired session in NACO Stem Cell 2014 at AIIMS, Raipur
2. Basic Life support (BLS) Course American Heart Association in coordination with Indian Institute of Emergency Medical Services (IIEMS) at AIIMS, Jodhpur on 2nd April 2014
3. Member of organizing committee in Hands on Cadaver dissection workshop on anterior and lateral Skull base surgery held at AIIMS Jodhpur from 29th-30th March 2014.
4. Elected as Editorial Board Member of Indian Journal of Clinical Anatomy & Physiology
5. Became member of Indian Society of Human Genetics

Administrative/Academic responsibilities
1. Subject expert for anatomy for National Board of Examinations.

Dr. Shilpi Gupta Dixit:
Articles published/accepted: 2
Abstracts published/accepted: 3

Conferences/Workshops/Trainings:

Administrative/Academic responsibilities
1. Examiner for undergraduate students at various colleges in India.
2. Subject expert for anatomy for National Board of Examinations.

Dr. Renu Gupta:
Articles published: 4
Abstracts published: 5

Training, Workshops and Conferences:
1. Invited lecture by Central Wool Development Board on Food habits and increment in Immunity in Jodhpur on 5th March 2014
2. Obtained membership of Anatomical Society of India (ASI).

Dr. Dushyant Agrawal:
Articles published: 3
Abstracts published: 4

Training, Workshops and Conferences:
2. Basic Life support (BLS) Course by American Heart Association in coordination with Indian Institute of Emergency Medical Services (IIEMS) at AIIMS, Jodhpur on 2nd April 2014
4. Elected as Editorial Board Member of Indian Journal of Clinical Anatomy & Physiology

Administrative/Academic responsibilities
1. Subject expert for anatomy for National Board of Examinations.

Dr. Ashish Nayyar:
Articles published: 2
Abstracts published: 3

Training, Workshops and Conferences:
1. Hands on Cadaver dissection workshop on anterior and lateral Skull base surgery, at AIIMS Jodhpur from 29th-30th March 2014
3. Basic Life support (BLS) Course by American Heart Association in coordination with Indian Institute of Emergency Medical Services (IIEMS) at AIIMS, Jodhpur on 2nd April 2014
4. Member of organizing committee in Hands on Cadaver dissection workshop on anterior and lateral Skull base surgery held at AIIMS Jodhpur from 29th-30th March 2014.

Administrative/Academic responsibilities
1. Subject expert for anatomy for National Board of Examinations.
2. External Examiner for BSc (hons.) Nursing at All India Institute of Medical Sciences, Rishikesh.

Department of Anesthesiology
Dr. Pradeep Bhatia
Publications: 3
1. Panel Discussions on “Preventing Hospital Associated Infections” at 20th Annual Conference of Indian Society of Critical Care Medicine and 18th Asia-Pacific Congress of Critical Care Medicine at Jaipur.
2. Panel Discussion on Closed ICU Multidisciplinary Care at 20th Annual Conference of Indian Society of Critical Care Medicine and 18th Asia-Pacific Congress of Critical Care Medicine at Jaipur.
3. CME on “Gastrointestinal and Hepato-pancreatic-biliary interventions” at AIIMS Jodhpur in August 2014.

Administrative/Academic Responsibility
1. Organizer of AHA Certified BLS Course at AIIMS Jodhpur
2. Organizing Chairman of Workshop on Ultrasound Guided Nerve Blocks and Palliative Care at AIIMS Jodhpur
3. Organizer and Instructor of First Responder and Prehospital Trauma Care Training Course at AIIMS Jodhpur

Dr Nikhil Kothari
Publication: 1
Conferences/Workshop/Trainings
1. Invited Lecture at FCCS 2014 ISCCM Jaipur on 16th Aug 2014
2. Perioperative care: Improving Outcomes after Surgery at Tata Memorial Hospital on 28th Feb- 2nd Mar 2014
3. Best of Brussels 2014 at ISCCM Pune on 9th-12th Sep 2014

Administrative/Academic Responsibility
1. Organizer of AHA Certified BLS Course at AIIMS Jodhpur
2. Co-Organizing Secretary of Workshop on Ultrasound Guided Nerve Blocks and Palliative Care at AIIMS Jodhpur
3. Veer Durga Das Award for Medical Research by Veer Durga Das Samiti, Jodhpur on 08th Aug 2014

Dr Shilpa Goyal
Conferences/Workshop/Trainings
1. Perioperative care: Improving Outcomes after Surgery at Tata Memorial Hospital on 28th Feb- 2nd Mar 2014
2. Best of Brussels 2014 at ISCCM Pune on 9th-12th Sep 2014

Administrative/Academic Responsibility
1. Organizer of AHA Certified BLS Course at AIIMS Jodhpur
2. Co-Organizing Secretary of Workshop on Ultrasound Guided Nerve Blocks and Palliative Care at AIIMS Jodhpur
3. Organizer and Instructor of First Responder and Prehospital Trauma Care Training Course at AIIMS Jodhpur

Department of Biochemistry:
Department activities:
• Department has organized a “National Symposium on Lead Awareness and Sensitisation Program” under the aegis of Indian Society for Lead awareness and research.
Research Projects:
• Ongoing Project - NRCLPI Principal investigator Project titled 'Lead levels in water, water containers and plumbing materials and its association with blood lead levels of children: A multi-centric study'
• Intramural Projects approved
  • 4 Projects with Principle investigators from the Department.
  • 7 Projects in collaboration with other departments at AIIMS Jodhpur.

Dr Praveen Sharma
Article published: 5
Book Chapters: 3
Training, Workshops and Conferences:
1. Attended the Annual Meeting of American Association of Clinical Chemistry, Chicago in 27 to 30th July 2014 and presented 2 posters -
   a. Insulin resistance and secretory functions in Pre-diabetics and newly diagnosed diabetics of north-west India: role of adipocyte mediators.
   b. A Comparison of CVD risk in newly diagnosed hypothyroid and type 2 diabetes mellitus subjects using Framingham risk score sheet.
2. Delivered talk - "Lead and Organ Function" at the National Symposium on Lead Awareness and Sensitisation Program under the aegis of Indian Society for Lead awareness and research.

Research Projects:
1. NRCLPI Principal investigator Project titled ‘Lead levels in water, water containers and plumbing materials and its association with blood lead levels of children: A multi-centric study’
3. A Pilot study of screening for inborn errors of metabolism in sick neonates and children in Western Rajasthan. [Principal investigator - Dr Vanita Lal]
5. To establish the reference range of urinary Protein Creatinine Ratio in normal and malnourished Indian children of different age groups. [Principal investigator - Dr Indu Saxena]
6. Role of Aspirin in reducing inflammatory mediators in Type 2 Diabetes Mellitus. [Principal investigator - Dr Vikram Singh]
7. Study of vitamin D level and metabolic abnormalities in patients with depressive disorders. [Principal investigator - Dr Naresh Nebhinani]
8. Exploration of microRNA as biomarker of muscle wasting in hemodialysis patients. [Principal investigator- Dr Saptarshi Mandal]

Administrative/ Academic responsibilities:
• Examiner, Paper setter for M.Sc. / MD/ PhD examinations at various universities of India.
• Editor – in – Chief Indian Journal of Clinical Biochemistry, Chairman, APFCB Communication Committee, Chief Editor, APFCB News, NABL Assessor, Director National Lead Referral Centre Jodhpur, Organizing Secretary ACBICON 2014.
• Reviewer of many National and International Journals

Dr Vanita Lal
Article published/ Accepted: 3
Training, Workshops and Conferences:
1. Participated in the immunology conference held at AIIMS, Bhopal in March 2014.
2. Observer in NIMHANS in the Department of Neurochemistry for Child Biochemistry and Inborn Errors of Metabolism in April 2014.
3. Attended the 2 day Lead awareness CME at AIIMS Jodhpur.
Presentation:
  b. Evaluation of empathy in freshmen to internship by The Jefferson Scale of Physician Empathy—Student Version (JSPE-S), NCHPE 2014 at WARDHA. (accepted )

Research Projects:
1. A Pilot study of screening for inborn errors of metabolism in sick
neonates and children in Western Rajasthan.

2. To access the prevalence of Non-alcoholic fatty liver disease in general adult population in tertiary care hospital and to see its correlation with Diabetes mellitus, hyperlipidemia and obesity. [STS Project - Shrey Gole]

Dr Purvi Purohit

Article published/ Accepted: 3
Training, Workshops and Conferences:
1. Attended 5 days hands-on Workshop on Molecular Biotechnology and Bioinformatics at International Centre for Stem Cells, Cancer and Biotechnology (ICSCCB), Pune, India.
2. Attended the 2 day Lead awareness CME at AIIMS Jodhpur.
3. 2 Posters accepted at Annual meeting of American Association of Clinical Chemistry, Chicago and presented by co-author Dr Praveen Sharma.
   a. Insulin resistance and secretory functions in Pre-diabetics and newly diagnosed diabetics of north-west India: role of adipocyte mediators.
   b. A Comparison of CVD risk in newly diagnosed hypothyroid and type 2 diabetes mellitus subjects using Framingham risk score sheet
Administrative/ Academic responsibilities:
Research Projects:
1. A correlation study of Cardio metabolic risk parameters and Urinary Opiates in opiate dependent patients of Western Rajasthan.
2. Serum levels of interleukin - 10 and interleukin - 17 in acute cerebral ischemia patients. [Principal investigator - Dr Purmina Sharma]

Dr Indu Saxena

Conferences/ workshops:
1. Attended the 2 day Lead awareness CME at AIIMS Jodhpur.
Research Projects:
1. To establish the reference range of urinary Protein Creatinine Ratio in normal and malnourished Indian children of different age groups
2. Knowledge, attitude and perceptions about voluntary blood donation in Rajasthan and extended antigen phenotyping in prospective regular voluntary blood donors. [Principal investigator - Dr Archana Bajpai]
3. To study the incidence of obesity in young adults in educational institute of North India with undiagnosed Hypertension, Adiposopathy, Metabolic syndrome, Diabetes Mellitus and Proteinuria. [Principal investigator - Dr Navita Purohit]

Department of Community Medicine & Family Medicine

Department Activities:
2. One day workshop on “Water and Hygiene” was jointly organised by CMFM department and Larsen & Turbo Limited at Bayatu (Barmer) on the occasion of World Water Day 2014 on 22nd March 2014.
4. Outreach health services with an emphasis on Maternal and Child Health (MCH) services started.

Research Projects:
1. Principal investigator, Dr. PankajaRaghav for the research project “Comparative study on traditional teaching vs teaching by concept mapping in Community Medicine & Family Medicine”.
2. Principal Investigator Dr. Ranabir Pal, ‘Development of a Module for training second year MBBS students in pre-hospital burn management’- 68th NITTC, JIPMER, Puducherry project
3. STS ICMR project awarded to MBBS student Sarthak Sharma, Guide: Dr. Pankaj Bhardwaj.

Dr. Pankaja Raghav:

Articles published: 05
Conferences & Workshops/Trainings: 25
To enumerate a few,
1. Participated in 68th National Course on Educational Sciences for Teachers of Health Professionals at Jawaharlal Institute of Post Graduate Medical Education & Research (JIPMER) on 20th-23rd March 2014
2. As a Panelist and expert in the Retreat on Public Health for establishment of School of Public Health at INIs, JIPMER Puducherry from 10th-11th March 2014.
3. Part of team of national assessors for cold chain National Institute of Health & Family Welfare, MOHFW, New Delhi on 27th March 2014 and Nagpur (Maharashtra) and Gadchiroli (Maharashtra) on 19th - 21st May 2014.
4. Attended BLS Course by “American Heart Association” Dept. of Anesthesiology at AIIMS, Jodhpur on 2nd April 2014.
5. As a resource person in First Aid awareness organized by Sardar Patel Police University, Jodhpur and AIIMS, Jodhpur on 2nd May, 2014.
6. Invited lecture on “Current Scenario of Tuberculosis” for the Symposium on sharing the vision of TB Elimination at AIIMS, Jodhpur on 24th March 2014 (World TB Day).
7. Guest of Honour on World No Tobacco Day organized by BK Medical wing at Umed hospital, Jodhpur on 31st May 2014.

Administrative/ Academic responsibilities:
Examiner for PhD Doctoral/ Post-graduate (MD/MPH) courses
Editorial board Member and Reviewer: In 04 International and National Journals

Dr. Ranabir Pal

Articles Published: 35
Chapters contributed: 04
Conference/ Workshop/ Trainings: 21
To enumerate a few,
1. Coordinator and Instructor: First Responder and Pre- Hospital Trauma Care Training Course Jointly organized by Michigan State University USA, AIIMS Jodhpur, and Dr. S. N. Medical College, Jodhpur on 1-4 August 2014 at AIIMS, Jodhpur


6. Invited Lecture in Insights into Writing A Research Protocol, jointly organized by Divyajyoti College of Dental Sciences & Research, and Dental Student Welfare Association of India on 10 May 2014.

7. Lecture in First Aid Awareness organized by Sardar Patel Police University, Jodhpur and AIIMS, Jodhpur 2nd May, 2014.


Administrative/Academic responsibilities:
Examiner for PhD Doctoral/ Post-graduate (MD/MPH) courses
Editorial board Member and Reviewer: In 09 International and National Journals

Dr. Pankaj Bhardwaj

Articles Published: 06

Conferences & Workshops/Trainings: 08


2. Participated in 68th national course on educational science for teachers of Health Professionals at JIPMER Puducherry on 17/02/14 to 01/03/2014.

3. Panelist in Retreat on Public Health for establishment of School of Public Health at INIs at JIPMER Puducherry on 10/03/2014 to 11/03/2014.

4. Participated in workshop on “Developing a protocol for a Cochrane systematic Review” at CMC Vellore at CMC Vellore on 29/04/2014 to 01/05/2014.

Dr. Neeti Rustagi:

Articles Published: 02

1. Participated at WONCA South Asia Regional Conference at Chennai on 16-17th August 2014.

2. Coordinator and Instructor for Pre – Hospital and First Responder trauma care workshop, jointly organized by Michigan State University USA, AIIMS Jodhpur and Dr. S.N. Medical College, Jodhpur at AIIMS Jodhpur on 01/08/2014 – 04/08/2014.


4. Part of the Faculty Development Program: 68th National course on Educational Science for Teachers of Health Professionals at Dept. of Medical Education JIPMER Puducherry, on 20th February 2014 – 01st March 2014.


6. Attended development of Pre-hospital response to Disasters and Medical Emergencies at AIIMS Patna on 24th May, 2014

Department of Dentistry

Dr. Ankita Chugh

Research Publications


Conference/Workshops/Trainings Attended:

1. FACE 2014 - Orthognathic Surgery Workshop , Forum for the Advancement of Craniofacial Esthetics (FACE) SGT University, Gurgaon from 27th-29th March 2014.

2. Fundamental of Biostatistics, Principles of Epidemiology & SPSS: Short Course Biostatistics Resource and Training Centre at Christian Medical College, Vellore, India from 18th-22nd August 2014.

3. CME on Gastrointestinal and Hepato-Pancreatic-Biliary Interventions, Department of Radiology, AIIMS, Jodhpur on 24th August 2014.

4. Lecture for Awareness of General public on “General dentistry for Geriatric patients” on 9th March 2014 organised by Varisht Nagrik Seva Sansthan, Ratnada, Jodhpur.

5. Was part of faculty panel on CME on First Aid Management for Dental emergencies for Police Academy Jodhpur at AIIMS Jodhpur.

6. Intramural project titled “Randomized Placebo Control Open label trial for evaluation and comparison of effect of Submucosal Injection of Dexamethasone and Methylprednisolone on Postoperative Discomfort after Third Molar Surgery" was approved.

Department of ENT:

Dr. Amit Goyal

Articles Published: 7

Conferences/Workshops/Trainings:

1. Attended Moderated Live Surgical session on Surgery for Sleep Apnoea in Comprehensive Workshop on snoring and sleep apnoea at Adinath E.N.T. Hospital, Jaipur with AOI Rajasthan on 3rd May, 2014.

2. Invited talk on “Surgical Anatomy & Physiology of Cochlea” in Hands-on cadaver Dissection Workshop on Cochlear Implant Surgery at Department of E.N.T., AIIMS Patna on 17th & 18th May, 2014.


5. Attended Rhinology Symposium and 10th Endoscopic Endonasalkullbase Workshop conducted Jointly by Bombay Hospital, Mumbai and B.L. Nair Hospital, 5th & 6th June, 2014.


7. Attended Lead Awareness programme at Department of Biochemistry, AIIMS Jodhpur under the aegis of ACBICON-2014 in AIIMS.
Jodhpur on 16th July, 2014.


10. Reviewed papers for International Journal of Pediatric Otolaryngology and British Journal of Medicine & Medical Research.

DEPARTMENT ACTIVITIES:
1. Conducted Hands on Cadaver Dissection Workshop on Anterior & Lateral Skull base Surgery (In association with Skull Base Surgery Society of India) at AIIMS Jodhpur on 29th and 30th March 2014.


Administrative/Academic responsibilities:
- Examiner for North Eastern Hill University, Shillong., Kutch University, Bhuj, Maharshtra University of Health Sciences, Nashik, Saurashtra University, Rajkot.

**Department of Forensic Medicine**

Dr. Puneet Setia

Publications: 3

Conferences and workshops/Trainings:

**Department of General Medicine:**

Dr. Vikram Singh

Articles published/Accepted: 02

Conference/Workshops/Trainings:
1. Selected for American diabetes Association scholars Program and completed the program on 12th June 2014 in San Francisco.

2. Invited by ADA to attend 74th conference of ADA at San Francisco (USA)

3. Speaker in two Public awareness lectures held at AIIMS Jodhpur.

**Department of Microbiology:**

Department Activities:

Dr. Vijaya Lakshmi Nag:

Papers presented/ Published/ Accepted: 07

Conferences & Workshops attended:
1. Organizing Chairman of CME on Immunology held at AIIMS Jodhpur on 12th to 13th September 2014

Dr. Anuradha Sharma:

Paper presented/ Published/ Accepted: 01

Conferences & Workshops attended:
1. Delivered Guest Lecture on “Hospital Acquired Viral Infections & their Control” at CME on Immunology held at AIIMS Jodhpur on 12th to 13th September 2014.

Dr. R S Gadeppalli:

Paper presented/ Published/ Accepted: 05

**College of Nursing:**

Prof. Rajan Rani:

Articles published/accepted: 1

Training, Workshops and Conferences:
1. Attended CME on “Nosocomial Infection – Protecting self and others” at Mai Khadija Institute of Nursing Sciences, Jodhpur on 10th April 2014.

Administrative/Academic responsibilities:
1. Received “Shiksha Gaurav Puraskar” from Centre for Education Growth & Research for Excellence in Nursing Education on 17th July 2014.

2. Was Paper setter and External Examiner at AIIMS, Rishikesh from 21st -23rd July 2014


4. Member in Centre for Education Growth & Research since July 2014

5. Member of Editorial Board in International Journal of General Medicine and Pharmacy since April, 2014

Dr. Ashok Kumar

Articles published/accepted: 8

Training, Workshops and Conferences:
1. Invited lecture on “Barrier Techniques” in CME on “Nosocomial Infection – Protecting self and others” at Mai Khadija Institute of Nursing Sciences, Jodhpur on 10th April 2014.

2. Paper setter of subject Nursing Foundations at AIIMS, Patna on 7th June 2014

3. Paper setter of subject Nursing Education at Maharaj Vyayak Global University, Jaipur on 9th Sep 2014

**Department of Pathology**

The following tests were carried out by the Department of Pathology from Feb 2014 to September 15, 2014: 4700 CBC, 1600 ESR, 770 PBF, 2900 Urine Microscopy, 200 HPE (which includes 171 in- house biopsies and specimens), 1070 Pap smears, 334 FNAC (including USG guided FNAC) and more than 50 other miscellaneous tests.

The IPD Pathology Laboratory has been commissioned in its permanent place in the hospital. It is equipped with a Cryostat for Frozen Sections, Fully automated microtome, Embedding machine with cooling chamber, Walk-away Autostainer for H&E, Automated Cover Slipper, Tissue processor, Immunohistochemistry stainer and LBC (SurePath). The LBC and the Immunohistochemistry analyser will be made operational after installation and validation.

5 CPCs carried out by Department of Pathology: 3 by Dr. Shilajit Bhattacharya and 2 by Dr. Poonam Elhence

Dr. Poonam Elhence:


Did a Basic Life Support Workshop on 2nd of April, 2014 and was awarded an AHA certificate for the same.
Delivered an invited Orientation Lecture on Humanities in Medical Education for the 1st MBBS students

Attended a 5 days workshop on Fundamentals of Biostatistics, Principles of Epidemiology and SPSS from 18th to 22nd August, 2014 at CMC, Vellore

Organizing Committee Member, CME on Current Concepts in Hip Arthroplasty, 27th September, 2014, AIIMS, Jodhpur

Reviewer, International Journal of Surgery Online (Elsevier)

Department of Pediatrics
Dr. Kuldeep Singh
Publications: 5
Abstracts: 3
Conferences/Workshops/Trainings:
1. Presented paper on Social aspects of Thalassemia patients in Symposium on Thalassemia at IAP Indore with SAIMS, Indore on 31st Aug 2014

Administrative/Academic Responsibilities:
1. Dr Shyam Lal Saksena Memorial Award by National Academy of Medical Sciences (India) for Using Technology to deliver cost-effective Continuing Professional Development.

Dr. Neeraj Gupta
Publications: 3
Abstracts: 1
Conferences/Workshops/Trainings:
1. Delivered talk on “Total Parenteral nutrition in Newborns’ at “ Paediatric academic Sunday’s for success” TATA Motors Hospital, Jamshedpur on 21st Feb 2014
2. Cardiac diseases by IAP Marwar Branch, Jodhpur on May 2014.
5. Chelation therapy in Thalassemia and bone marrow transplantation by IAP Marwar Branch, Jodhpur on 30th Aug 2014

Dr. Daisy Khera
Conferences/Workshops/Trainings:
1. Basic Biostatistics and SPSS course at CMC Vellore on 19-23rd May 2014.

Administrative/Academic Responsibilities:
1. Member of Indian Association of Pediatrics

Department of Pediatric Surgery
Dr. Arvind Sinha
Conference Attended:
1. 4th Pediatric Urology Conference (Pedurocon 2014) in Bangalore from 1st to 3rd August 2014
3. Chaired a session in CME on Gastrointestinal and Hepato-pancreatic-biliary interventions on 24th August 2014 at AIIMS Jodhpur
4. Presented a Clinical Grand Round on Esophageal Atresia at AIIMS Jodhpur

Administrative/Academic Responsibility:
1. Reviewer for Journal of Indian Association of Pediatric Surgeons

Department of Pharmacology
Dr. Sneha Ambwani
Articles published: 10
Conferences and workshops/training:

Administrative/Academic responsibilities:
1. PhD-Jodhpur national university, Jodhpur.
2. U.G.- Dr.SN medical college, Jodhpur, SMS medical college, Jaipur.
3. M.D.- SP medical college, Bikaner, Rajasthan.

Dr. Pramod Kumar Sharma:
Articles Published: 2
Conferences & Workshops/Training:
1. CME on Gastrointestinal and Hepato-Pancreatic-Biliary Interventions by Department of Radiology, All India Institute of Medical Sciences, Jodhpur on 24th Aug 2014.

Dr. Surjit Singh:
Conferences & Workshops/Training:

Department of Physiology:
Dr. Sabyasachi Sircar:
Articles published: 5
Training, Workshops and Conferences:
1. Impact of IPR on Access to Medicine by NLU, Jodhpur on 22nd Feb 2014
2. CME, Jodhpur Chapter APPI at AIIMS, Jodhpur on 3rd May 2014.

Administrative/Academic responsibilities:
1. Editor of the Indian Journal of Physiology & Pharmacology (IJPP) from April 2014

Dr. Rajesh K Sharma:
Articles published: 3
Training, Workshops and Conferences:
1. Impact of IPR on Access to Medicine by NLU, Jodhpur on 22nd Feb 2014

Administrative/Academic responsibilities:
1. Associate Editor of Indian Journal of Physiology and Pharmacology (IJPP) from April 2014
2. Examiner for undergraduates at PMCH, Patna on 12th-14th August
3. Guide for ICMR STS project proposal “Comparison of autonomic functions in patients suffering from neck pain and low back pain”.

Dr. Abhinav Dixit:

Administrative/ Academic responsibilities:
1. Subject Expert in Physiology in National Board of Examinations (NBE), India in June 2014
2. Member of National advisory board in Indian Journal of Medical Specialties since Jan 2014

Dr. Bharti Bhandari:

Articles published: 5
Training, Workshops and Conferences:
1. CME, Jodhpur Chapter APPI at AIIMS, Jodhpur on 3rd May 2014
2. Invited lecture on palliative care in Workshop on USG Guided nerve blocks & palliative care on 17th May 2014 at AIIMS, Jodhpur

Dr. Dr. Purnima Sharma:

Articles published: 1
Training, Workshops and Conferences:
2. CME, Jodhpur Chapter APPI at AIIMS, Jodhpur on 3rd May 2014

Dr. Nishant Chauhan:

Articles published: 2
Training, Workshops and Conferences:
1. Invited lecture on current status of NIV in clinical practice & overlap syndrome in RAJPULMOCON on 30th March, 2014 at SN Medical College, Jodhpur
2. Invited lecture on palliative care in “Workshop on USG Guided nerve blocks & palliative care” on 17th May 2014 at AIIMS, Jodhpur

Dr. Dr. Naveen Dutt:

Article Published: 2
Training, Workshops and Conferences:
1. Video Bronchoscopy started in August 2014
2. Had a short term training (3rd June to 31st July 2014) in advanced techniques in Autonomic Functions testing from AFT Lab, Department of Physiology, AIIMS, New Delhi

Department of Pulmonary Medicine:

Departmental activities:
1. Spirometry started in July 2014
2. Video Bronchoscopy started in August 2014

Dr. Nishant Chauhan:

Article Published: 2
Training, Workshops and Conferences:
1. Invited lecture on Clinical Diagnosis & Management of Pulmonary Tuberculosis on world TB day on 24th March 2014 at AIIMS, Jodhpur
2. Invited lecture on palliative care in “Workshop on USG Guided nerve blocks & palliative care” on 17th May 2014 at AIIMS, Jodhpur
3. Attended “A short course in Biostatistics” on 18-22 August 2014 at CMC, Vellore
4. Member, American Thoracic Society since 2nd March, 2014

Department of Radiology

Department Activities:
1. Ultrasound and doppler examination started from 20th Sept 2014.
2. Ultrasound guided interventions (FNACs, biopsies, nerve blocks) Feb 2014
3. Sclero therapy for venous malformations from May 2014
4. Laser ablation for varicose veins from 12th Aug 2014

Eminent Visitors to the Department
Dr. Shyamkumar NK, Head, Department of Radiology, Christian Medical College, Vellore, Tamil Nadu visited the department. He also delivered invited lecture at the CME organized by Department of Radiology, AIIMS Jodhpur from 23rd and 24th August 2014

Dr. Pushpinder Khera:
Article published: 1
Training, Workshops and Conferences:
1. Delivered a invited lecture on Training in IR: A Fellow’s Perspective in 16th Annual Conference of Indian Society of Vascular and Interventional Radiologists(ISVIR) at Mumbai from 3rd-6th Apr 2014
2. Organizing Secretary of CME on Gastrointestinal and Hepato-pancreatic-biliary interventions at AIIMS Jodhpur from 24th Aug 2014.
3. Short course in Biostatistics and SPSS by Department of Biostatistics, Christian Medical College, Vellore, TN from 19th-23rd May 2014.

Department of Transfusion Medicine

Dr. Saptarshi Mandal:
Papers Published/Accepted: 01
Training/workshop/conferences:
2. CME on “Gastrointestinal and Hepato-Pancreatic-Biliary Interventions organized by Dept. of Radiology, AIIMS Jodhpur from 24th August, 2014.
4. Guest Editor for International Journal of User Driven health Care
5. Member of American Society for Apheresis (ASFA), American Society for Clinical Pathology (ASCP), College of American pathologists (CAP).
6. Mentored student STS project proposal accepted by ICMR in 2014

Dr. Archana Bajpayee:
Paper published/Accepted: 01
Training/workshop/conferences
1. Appointed as Reviewer of ISBT Science Series
2. Member of Indian Society of Transfusion Medicine (ISTM)
Hands-on Cadaver Dissection Workshop on Anterior & Lateral Skull Base Surgery

Departments of Otorhinolaryngology and Anatomy jointly organized Hands-on Cadaver Dissection Workshop on Anterior & Lateral Skull Base Surgery on 29th & 30th March, 2014 at AIIMS Jodhpur in association with the Skull Base Surgery Society of India (SBSSI). It was first such activity in this part of India.

Skull Base is conventionally an extremely ‘difficult to access’ region, sitting at the cross roads of various important regions. In the last few decades, this access has been immensely facilitated by the use of Endoscopes and Microscopes during surgery with High Definition Cameras. This calls for proper training courses for use of these sophisticated equipments in these areas and importance of such workshops cannot be overemphasized.

This workshop was financially supported by the Indian Council of Medical Research and was accredited six credit hours by the Rajasthan Medical Council.

Over 100 participants from India & abroad attended the workshop. It was contributed by some marvellous and mesmerizing dissection of anterior & lateral skull base by Dr. Satish Jain. It continued uninterrupted for more than 8 hours. He demonstrated few of the finest and most sophisticated surgical techniques for surgery of this difficult region. Special arrangement was made for undergraduate students of the institute to see and learn the endoscopic & microscopic anatomy of skull base on cadaver.

It was followed by Didactic lectures on various aspects of Skull Base Surgery like Evolution of Skull base Surgery by Dr. K.P. Morwani, Complications in Skull Base Surgery – Avoidance & Management by Prof. Deepu Banerji, Management of intractable nasal bleeding by Prof. Ishtayagi, Radiology of Skull Base by Dr. Pushpinder S. Khera, Anterior Clinoidectomy by Prof. S.N. Mathuriya and New frontiers in Acoustic Neuroma Surgery by Prof. Suresh Nair. It was followed by an informative panel discussion moderated by Dr. Narayan Jayashankar on Decision making in Skull Base Surgery, where the masters of the field illuminated audience by their vast experience on management of tricky situations in skull base surgery. A Post Graduate Quiz was also organized so as to inculcate them with interest in this field.

Prof. SC Sharma graced the occasion as the Chief Guest during the inaugural ceremony, along with Prof. Manprakash Sharma, Prof. S.N. Mathuriya and Prof. Ravi Kant accompanying him on dais.

Later, 20 participants practiced the various techniques of Skull Base Surgeries on cadavers, using latest available equipments & instruments under the supervision of the masters. Another 20 participants assisted them in that. The prizes were distributed to the best dissectors and quiz winners.

Release of Workshop Manual by Prof. SC Sharma, Prof. Sanjeev Misra & Prof. Manprakash Sharma

Live Endoscopic & Microscopic Dissection of Cadaver Skull Base by Dr. Satish Jain

- Dr. Amit Goyal
Assistant Professor
Department of Otorhinolaryngology
Basic Life Support Workshop & Workshop on Ultrasound Guided Nerve Blocks & Palliative Care

Basic Life Support (BLS) course was conducted by the Department of Anesthesiology on 2nd April 2014. In this one day course, 30 participants including Faculty and Resident Doctors were trained for giving CPR as per guidelines laid by American Heart Association (AHA), and were issued AHA certificates on successful completion of the course.

A hands on Workshop on Ultrasound guided Nerve Blocks and Palliative care was conducted by the Department on 17th May 2014 in co-ordination with Prof. Sushma Bhatnagar and Prof. Sanjay Thulkar of AIIMS New Delhi. A total of 60 delegates from Jodhpur and all over Rajasthan participated in the workshop. Delegates were given hands on experience (on healthy volunteers) to locate the nerve plexus using ultrasound probe, which was appreciated by the delegates.

- Department of Anaesthesiology
First Pre-hospital Trauma Care Program

The first prehospital trauma care program was conducted at AIIMS Jodhpur in association with Michigan State University, USA and S.N. Medical College Jodhpur from 1st - 4th August, 2014. This prehospital trauma course was an intensive four days program which comprised of nearly 50 first responders, including policemen, firemen, ambulance drivers, taxi drivers, emergency medical technicians, hospital staff, nursing staff and students.

The training workshop involved an exhaustive 12 hour program starting at 7am in the morning and finishing at 6 pm in the evening. The course had 12 interactive audio and video sessions. After each session there was a hands-on-practical training exercise. Extensive self-learning videos and hi-fidelity simulation provided a unique educational experience to the first responders. Participants had the opportunity to practice key prehospital trauma management skills, such as vital signs assessment, airway management, CPR, tourniquet application, IV line placement, and cervical spine stabilization. They were presented with various exercises to aid developing an understanding of triage and communication skills in an accident and mass casualty situation.

The organizing committee at AIIMS Jodhpur intends to conduct this workshop / course regularly at 3 monthly intervals to develop and reinforce skill development amongst first responders.

Dr. Ranbir Pal, Dr. Mahaveer Singh Rodha, Dr. Shilpa Goyal. Dr. Neeti Rustagi, were team coordinators and instructors of prehospital course.

- Dr. Shilpa Goyal
  Assistant Professor
  Department of Trauma & Emergency

- Dr. Mahaveer Singh Rodha
  Assistant Professor
  Department of Trauma & Emergency
Infectious diseases constitute the most significant burden of health problems especially in tropical countries like India. Even the cancers are now being significantly associated with various infectious etiologies. The immune response plays a critical role in preventing and clearing the infection.

To sensitize everyone with the current trends in immunology, a two days continuing medical education programme was conducted by Department of Microbiology, AIIMS Jodhpur, from 12 -13th September 2014. The theme of CME was "Infectious diseases and Immunology: An overview". The Guest speakers from various eminent institutes like AIIMS, Delhi; PGIMER, Chandigarh; National Institute of Immunology, Delhi & SGPGIMS, Lucknow were invited to share their work and illuminate the delegates from all over India, with their insight and views on currently debated topics.

Dr Sanjeev Misra, Director AIIMS, Jodhpur, inaugurated the CME on opening day and in his inaugural address, he stressed upon the importance of understanding immunological principles among the clinicians and their applications in their daily practices. Dr T D Chug, National Emeritus Professor Microbiology, talked about innate & acquired immunity & their role in pathogenesis of diseases. He also briefed about current advances including immunomodulation & immunotherapy. Dr S C Parija talked about advances in the field of malaria vaccine research & also the challenges being faced by the scientific community in development of malarial vaccine. He also talked about recently completed phase III trial of malaria vaccine. Dr S K Arora discussed about viral hepatitis & immunotherapy used in treatment of HCV. He talked about his research work on importance of dendritic cells in sustained virological response in hepatitis.

Organ transplantation & challenges associated with it were discussed by Dr N R Dash from AIIMS, Delhi. He stressed on diagnosis of graft rejection & its prevention. Dr Vijaya Lakshmi Nag, Prof & Head, Microbiology, from AIIMS, Jodhpur discussed about the newer vaccines & their immunological perspectives. Apart from this, there were many lectures on topics like, tuberculosis, dengue, Toll like receptors, fungal vaccines etc.

During two days, various delegates presented their research work during the oral & poster presentation. A quiz was organized as a part of the CME.

- Dr. Vijaya Lakshmi Nag
  Professor & Head
  Department of Microbiology
Current Concepts in Hip Arthroplasty

The 'Science' and 'Art' of Hip Arthroplasty has grown leaps and bounds but the volume of hip surgeons in the country is still in its infancy. In an endeavour to delve into the nuances of this enthralling sub-speciality, the Department of Orthopaedics at AIIMS Jodhpur organized a CME on "Current Concepts in Hip Arthroplasty" on 27th September, 2014.

The meeting was a conglomeration of master hip surgeons from across the country; burning issues revolving around all aspects of hip arthroplasty were discussed threadbare in didactic lectures, panel discussions and debates.

The CME was attended by delegates from the states of Rajasthan, New Delhi, Gurgaon, Uttar Pradesh and Punjab in very good numbers who made good use of the knowledge on offer by actively participating in the academic discussions and deliberations of the scientific meeting.

- Dr. Abhay Elhence
  Associate Professor
  Department of Orthopedics

Lamp Lighting & Inauguration of CME

Faculty at the CME
Tree Plantation Day

The second annual day function of AIIMS Jodhpur to be held on 17th September 2014 was postponed due to sad demise of second year student Mr. Hitesh Gautam. However, to commemorate the day, a tree plantation drive was organized with the help of Lion’s Club Paota, in the residential complex of AIIMS Jodhpur. The drive was inaugurated by Dr Sanjiv Misra, Director, AIIMS Jodhpur in the presence of various heads of departments, faculty members, representatives of district administration, Jodhpur development authority and members of Lion’s Club, Paota Jodhpur. The drive witnessed plantation of various tree saplings by those present. The representatives of Lion’s club and district administration spoke briefly about the necessity of preserving our environment and their commitment to the cause. Dr Sanjiv Misra in few measured words briefed the gathering about the role of clean and green surroundings for living a healthy life. The sprawling clean & green campus of AIIMS Jodhpur bore testimony to Dr Sanjiv Misra’s words as various guests could not help but praise the greenery and cleanliness in the campus. They congratulated Dr Sanjiv Misra and the administration for the worthy effort.

- Dr. Shashank Shekhar
  Assistant Professor
  Department of Obstetrics & Gynecology
The heady period of joining was followed by a month of boring days. All the newly recruited clinical faculty would sit in the library with no real work. As surgeons, we wanted the OT complex to be ready so that we could start doing work for which we were trained.

It all started innocuously enough one warm July afternoon, when our Director called all clinical faculty for a meeting. We were asked to prepare a list of items/equipment we would be requiring to start services in the Inpatient department. We were also asked to prepare specifications for those equipment.

Thus started our journey towards the starting of OT services. Most of us did not have extensive experience with procurement of equipment and drafting of specifications. We saw faculty members desperately scrounging the internet for tenders for their equipment so that some starting point could be copied and modified so as to be ready for submission for at the short deadline which was given to us.

The more resourceful faculty members called up their friends and foes in other institutes in search for specifications. After a week of hectic activity, we finally managed to submit the specifications and all of us probably heaved a sigh of relief.

This relief was shortlived, as we were asked three simple questions by the Director—

1. What is the price of this equipment?
2. How do these specifications ensure that we get world class equipment without being extravagant?
3. Are you sure that you have the necessary accessories that we don’t have downtime due to its shortage?

Hectic phone calls to vendors and friends ensued. We found different vendors quoted widely varying prices for the same equipment and we were at our wits ends to find an estimate that would be acceptable and not turn out to be ridiculously off the mark. After all the final “specs” sheets were submitted and approved, it was
the turn of the tendering process, which started in August 2013. These were followed by hectic prebid meetings, extensions, representations and rounds and rounds of parleys.

Slowly and surely the equipment started arriving at the Institute. We had already started our OPD services and were itching for some “cutting” work. As the IPD block of the hospital was not expected to be completed till 2016, we decided to start our surgical work in the OPD complex itself. However, the OPD complex was designed as, well, an OPD complex. The task of creating an OT out of OPD rooms certainly appeared daunting.

It was decided to convert the Block 1C as the minor OT complex so that some minor procedures could be started. The waiting area was designed to be converted into Day Care Ward and one of the larger OPD rooms was converted into a minor OT. Lots of engineering work was needed so that we could partition the ward area from the minor OT area. Equipment, OT Tables, Anaesthesia machine, consumables, medicines, and lights were procured so that the minor OT complex could be started at the earliest. The minor OT complex was started on 31st Mar 2014 with a case done by Dr. Sanjeev Misra. Increasingly complex cases requiring General anaesthesia started getting operated in the minor OT complex as both the surgeons and the anaesthetists started trusting the “system”. Till date we have managed to operate more than 200 cases in the Minor OT complex which have included many complex surgical procedures including malignancies, nephrectomies, parotidectomies, thyroidectomies and urethroplasty. A video Bronchoscopy unit was also set up in the Minor OT complex on 16th August 2014.

The decision was taken to convert the third floor of the OPD Complex into a dedicated OT and ICU complex. The C Block was partitioned to create an eight bedded adult intensive care unit and a Pediatric and neonatal ICU. The ICU complex is nearing completion and is expected to be functional soon.

The A and the B Block were planned to be converted into an OT complex with five large sized operating theatres. Engineering work, power supply, lights, installations etc were expedited. After months of hectic preparation, the OT complex was inaugurated on the 25th September 2014 by Dr Sanjeev Misra in the presence of all faculty members. All operating theatres have state of the art equipment with the latest anaesthesia machines, a high end operating table and ceiling mounted shadowless LED lights. The oxygen supply is being provided by large medical grade cylinders and is expected to continue till the medical gas pipeline system is in place a few months’ time.

A five bedded high dependence unit (HDU) has also been set up in the complex to take care of the immediate post-operative period of the patient.

Increasingly complex cases are being planned in the OT complex and the OT lists are showing an increasing trend.
Introduction
College of Nursing, AIIMS, Jodhpur, established in September 2013, has entered into its 2nd year and has earned a distinct name for itself. Currently, the college is running two batches of B.Sc (Hons) Nursing, a 4 year course with an intake of 60 students in each batch. The College has been shifted to its new building in the last week of June 2014 and this is one of the first College of Nursing among the six new AIIMS which has its own separate college building. With each passing moment & day, students are learning new skills and trying to translate those skills into practice. The combination of an excellent professional training and value inculcation will enable those graduating from the college to get placed in institutions of high repute, both in the country and abroad.

Facilities at their best:
College of Nursing is fully equipped with state of art lecture theatres, well lit and ventilated class rooms, examination halls and lab facilities for students where the students are given hands-on practice on simulators, nursing training manikins, CPR manikins, First aid manikins, and adult multi-veined arm for infusion training before doing actual patient care in hospital.
The College has also developed a fully equipped Community Health Nursing Lab where students are given demonstrations of various procedures before they do the same in an actual setting. College is attached to the AIIMS Hospital where the students are being posted for their clinical postings which helps them to enhance their skills by translating their theoretical knowledge into actual patient care.

Activities at a glance:
Pulse polio immunization programme: Students of B.Sc (Hons) Nursing, 2013 batch participated in pulse polio immunization programme in two phases in Dec 2013 and Apr 2014. Five students Ms. Ankita, Ms. Celina, Ms. Devki, Ms. Pooja Panwar, Ms. Pushpa Choudhary and Ms. Lata were felicitated for their outstanding performances. They were given certificates of appreciation by SMO, ESI hospital, Jodhpur on 15th Aug, 2014.
Nurses Day Celebrations: Nurses day was celebrated in the college campus with full enthusiasm on May 12, 2014. The faculty of College of Nursing, students and the nursing staff of the hospital participated actively in the celebrations. The programme was initiated with a welcome note by Prof (Dr) Raj Rani, Principal, College of Nursing. A quiz and poster competition were organized and the winners were given prizes for the same. The students enthralled the audience with their beautiful dance skills and mellifluous voices. The celebrations ended with the vote of thanks proposed by Dr. Ashok Kumar, Assistant Professor, College of Nursing.
Orientation programme: A two days orientation programme was organized in August this year for new entrants of B.Sc (Hons)
Nursing 2014 batch. The new students were familiarized with the College, its policies, the hospital, rules and regulations.

Teacher’s day celebrations: Teacher’s day was celebrated on 5th September, 2014 in the college campus. Heart warming performances were given by students of 1st and 2nd year B.Sc (Hons) Nursing.

COLLEGE OF NURSING:
Prof (Dr) Raj Rani:
Awards
Awarded with Shiksha Gaurav Puraskar by Centre for Education Growth & Research on 17.07.2014 for her excellent work in Nursing Education
Papers presented/published:
International Publication: 1
Training, workshop & conferences:
1. Participated as a delegate in CARCON 2014, Rabies prevention in primary care, AIIMS, Jodhpur on 01.02.2014
2. Invited as a Chief Guest for Conference on nosocomial infections- protecting self & others at Mai Khadija Institute of Nursing Sciences, Jodhpur on 10.04.2014

Memberships/ member of editorial board:
Joined the editorial board of members, International Journal of General Medicine & Pharmacy.

Ashok Kumar:
Papers published/presented:
International Publication: 3
Training, workshop & conferences:
1. Attended Research Methodology Course at Baba Farid University of Health Sciences, Faridkot, Punjab on 30th Jan and 1st February 2014
2. Invited lecture on Barrier techniques : Nosocomial infection-protecting self and others at Mai Khadija Institute of Nursing Sciences, Jodhpur, 10th & 11th April 2014

NURSING TUTORS:
Mr Himanshu, Mrs Mamta & Mrs. Vandna have qualified and enrolled in PhD Nursing programme. Mrs. Mamta attended CARCON 2014, Rabies prevention in primary care, AHIMS, Jodhpur on 01.02.2014

Paper published:
Mr. Aashish: 2, Mr. Himanshu: 4, Mrs. Mamta: 5 & 3 accepted, Mr. Naveen: 3, Mrs. Vandna:2

- Dr. Ashok Kumar
Assistant Professor
College of Nursing
DRUG WATCH

Dabigatran: Lower Risk for Stroke and Death, but Higher Risk for GI Bleeding Compared to Warfarin

Dabigatran is a direct thrombin inhibitor used as an anticoagulant. Dabigatran is used to reduce the risk of stroke and blood clots in patients with a common type of abnormal heart rhythm called non-valvular atrial fibrillation (AF).

A new study by FDA compared Dabigatran to warfarin, for risk of ischemic or clot related stroke, bleeding in the brain, major gastrointestinal (GI) bleeding, myocardial infarction (MI), and death in more than 134,000 Medicare patients, 65 years or older.

FDA found that among new users of blood-thinning drugs, Dabigatran was associated with a lower risk of clot-related strokes, bleeding in the brain, and death, than warfarin.

The study also found an increased risk of major gastrointestinal bleeding with use of Dabigatran as compared to warfarin. The MI risk was similar for the two drugs. The study is based on a much larger and older patient population than those used in FDA's earlier review of post-market data. This study's findings, except with regard to MI, are consistent with the clinical trial results that provided the basis for Dabigatran approval. As a result of these latest findings, the FDA still considers Dabigatran to have a favorable benefit to risk profile and have made no changes to the current label or recommendations for use.

Patients should not stop taking Dabigatran (or warfarin) without first talking with their health care professionals. Stopping the use of blood-thinning medications such as Dabigatran and warfarin can increase the risk of stroke and lead to permanent disability and death.

Health care professionals who prescribe Dabigatran should continue to follow the dosing recommendations in the drug label.

Clobazam: Risk of Serious Skin Reactions

Clobazam is a benzodiazepine medication used in combination with other medicines to treat seizures associated with a severe form of epilepsy called Lennox-Gastaut Syndrome.

US Food & Drug Administration (FDA) is warning the public that the anti-seizure drug Clobazam can cause rare but serious skin reactions that can result in permanent harm and death.

These skin reactions, called Stevens-Johnson syndrome (SJS) and toxic epidermal necrolysis (TEN), can occur at any time during Clobazam treatment. However, the likelihood of skin reactions is greater during the first 8 weeks of treatment or when Clobazam is stopped and then re-started. All cases of SJS and TEN in the FDA case series have resulted in hospitalization, one case resulted in blindness, and one case resulted in death.

Based on this, FDA approved changes to the Clobazam drug label to describe the risk as “serious skin reactions (eg, Stevens-Johnson syndrome, toxic epidermal necrolysis) reported in both children and adults; monitor closely, especially during the first 8 weeks of treatment initiation or when reintroducing therapy; discontinue at the first sign of drug related rash and do not resume.”

Patients should be closely monitored for signs or symptoms of SJS/TEN, especially during the first 8 weeks of treatment or when re-introducing therapy. Health care professionals should discontinue use of Clobazam and consider an alternate therapy at the first sign of rash, unless it is clearly not drug-related. Patients taking Clobazam should seek immediate medical treatment if they develop a rash, blistering or peeling of the skin, sores in the mouth, or hives. Patients should not stop taking Clobazam without first talking to their health care professionals. Stopping Clobazam suddenly can cause serious withdrawal problems, such as incessant seizures, hallucinations, shaking, nervousness, and stomach or muscle cramps.

- Dr Pramod Kumar Sharma
  Associate Professor
  Department of Pharmacology
Public Lectures for creating Health Awareness

World Health Organization (WHO) defines health as “A State of complete physical, mental and social well being and not merely the absence of disease or infirmity”. A medical professional’s responsibility is not only to treat diseases but also to maintain and promote the health of the community which he/she serves. The six new All India institute of Medical Sciences have been created with the aim to correct regional disparity in healthcare, provide services to underserved population besides serving as a model for Medical Education Technology and as Institutes of national importance. While the MBBS curriculum takes into consideration elements required for producing competent and compassionate professionals who will then serve the society, it is also imperative for the Institute itself to create awareness and educate the public at large.

With this thinking and aim, AIIMS Jodhpur has taken an initiative to embark on Public education for common problems prevailing in the community and to take a step forward to mitigate emerging health problems through its “Public Awareness Lectures”. Prof. Dr. Vijaya Laxmi Nag volunteered to shoulder the responsibility as the Convenor of the Committee. The first lecture in the series was held on 8th August, 2014 titled “Timely First Aid - Saves Precious Lives, (समयनुसार प्रथम राहत - एक जीवनसान)”. It consisted of 4 talks delivered by Dr. Nikhil Kothari, Dr. Abhay Elhence, Dr. Mahaveer Singh and Dr. Vikram Singh on various aspects of First Aid followed by a Panel Q &A session by these experts who were later joined by Dr. Pradeep Bhatia, Dr. Mahendra Lodha and Dr. Amit Goyal. Anchoring was done by Dr. Poonam Elhence. The entire session is now available on YouTube at www.youtube.com/aiimsjodhpur. There was massive response from the public.

The second theme selected was based on WHO slogan for the year 2014 and was titled “Dengue: small bite- BIG threat “. The talks were delivered by Dr. Kuldeep Singh, Dr. Daisy Khera and Dr. Pankaja R Raghav. This was followed by Q & A session where questions from public were addressed aptly by the speakers. The sessions were recorded and available online at www.youtube.com/aiimsdengue.

AIIMS Jodhpur is committed to its mission, vision and goals of promoting better health care in society by serving as an authentic source of medical information. It has been planned by the Committee headed by Prof. Dr. V L Nag and guided by our Director,

- Dr. Kuldeep Singh
Additional Professor & Head
Department of Paediatrics

Prof. Dr. Sanjeev Misra to continue this series on Public Awareness with monthly lectures on contemporary topics relevant to our society.
A world connected

Suicide is a major public health problem with complex psychological, social, biological, cultural and environmental factors involved. The psychological pain that leads an individual to take one’s own life is unimaginable. These deaths leave families and friends bereft and often have a major ripple effect on communities. Every year, over 800,000 people die from suicide; this roughly corresponds to one death every 40 seconds. The number of lives lost each year through suicide exceeds the number of deaths due to homicide and war combined.

India has by far the largest number of suicides in the world, accounting for nearly a third of the global total and more than twice as many as China, which is second on the list. It also has the highest rate of suicides among young people aged 15 to 29 years, as stated in WHO report released on 4th September, 2014.

Connectedness is crucial to individuals who may be vulnerable to suicide. Studies have shown that social isolation can increase the risk of suicide and, conversely, that having strong human bonds can be protective against it. Reaching out to those who have become disconnected from others and offering them support and friendship may be a life-saving act.

Connectedness is a psychological state of belonging in which individuals perceive that they are valued, cared for, trusted and respected by the individuals and communities with whom they are in regular contact (e.g., peers, family, romantic relationships, groups) or in which they are socially or geographically embedded (such as a university, college or fraternal community).

Connectedness has the following beneficial effects on individuals and society: overall psychological well-being, reducing stress levels; having more ties to adults, peers and groups benefit; having better exposure to normative social influences; promoting positive coping practices such as seeking formal and informal support and reducing maladaptive coping practices (e.g., drinking).

Efforts to prevent suicide have been celebrated on World Suicide Prevention Day – September 10th, each year since 2003. In 2014, the theme of World Suicide Prevention Day is ‘Suicide Prevention: One World Connected.’ The theme reflects the fact that connections are important at several levels (individual, family, institutional, societal, national and universe level) if we are to combat suicide.

Connectedness can also be understood in terms of clinical care. Mental illness, particularly depression, is an important risk factor for suicide. Internationally, treatments for mental illness have improved, but access to these treatments remains unequal. Primary care providers, often the first port of call for people with mental illness, are not always able to diagnose and treat mental illness. Specialist mental health care providers are not always available, so referral options may be limited. Even when services are available, they are not always sufficiently well-coordinated to provide optimal care.

Connectedness and collaboration between services is also important at this level in preventing suicide. The right service or individual clinician must be available at the right time for someone with mental health problems and must be able to offer and deliver effectively, the full range of treatment options.

Connectedness is necessary at a national and international level. Many clinical and nonclinical organizations are working towards the goal of preventing suicide. But, their efforts are not always synchronized. World Suicide Prevention Day has proved to be very successful in encouraging organizations to coordinate their efforts and learn from each other. It has also assisted those who have been bereaved by suicide in making themselves heard in discussions about suicide prevention. This has sharpened the focus on activities that are effective in preventing suicide.

Connectedness has been found to be a promising avenue for suicide prevention with the main emphasis on promotion of positive (i.e., health promoting, protective) connectedness. While on the other hand, too many dependents in a person’s life can lead to role overload which can increase psychological distress and also, connectedness with negative social influences may contribute to suicidal behavior (e.g., suicide pacts, gang involvement). Therefore, the goal is not simply to increase the number of social ties or connections among persons or groups but, to enhance availability of and access to supportive connections.

By being a part of the connectedness of World Suicide Prevention day this year and by joining with others around the globe who are working towards the common goal of preventing suicide, we can highlight this major public health problem and ensure that it receives the policy attention for effective suicide prevention that it warrants.

Acknowledgement: I am deeply grateful to International Association for Suicide Prevention and World Health Organization for providing resource material for this article and the Workshop. Major part of this article is based on the theme and messages of these scientific bodies.

- Dr. Naresh Nehhinani
Assistant Professor
Department of Psychiatry
Evolution and advancement is the name of the rapid development which we have witnessed over the last 2 years. New batches have joined and older batches have blossomed into fragrant flowers. Vigilant introduction of well researched elements in teaching have been introduced with local adaptations. Here, we share our experience with some of them:

1. **Foundation program for first year MBBS:** When a student joins the professional course with dreamy eyes, he is also apprehensive of the content, new challenges, new environment and some fear about the future. In order for the fresher students to learn medicine effectively, a 2 weeks program was introduced in our teaching curriculum since 2013. The faculty members have also become wiser since their previous experience and have introduced novelty in teaching methodology to this batch. The morning hours were devoted to learning terminology, course format and methodology for First professional subjects (Anatomy, Physiology and Biochemistry) whereas afternoon sessions were dedicated to sensitization to the concepts of doctor, medical profession, communication skills, ethics, humanities, research and evidence based medicine, contemporary information technology, safety and coping with stress. The sessions were in non-technical language and were interactive in nature. Students were made to feel at home and faculty members made all efforts to satisfy their queries and concern. We roped in more than one faculty member to ensure different views and more interaction. Overwhelming response was witnessed in some of the sessions especially while talking about humanities in medicine-teaching empathy. Students enjoyed all the sessions and faculty members made all efforts to satisfy their queries and concern. It was also observed that they appreciated multi-tutored interactive sessions. It remains to be seen how effective are these sessions in bringing out desired behavioral changes (which was our objective) versus what they have appreciated in these sessions and its application in future. It is our assumption that student may still not be mature enough to appreciate and grasp the value of the new methodology used in our sessions. These inputs, however, will definitely give impetus to refining our teaching strategies for the future batches.

2. **The first batch of AIIMS Jodhpur entered third year with Vth Semester and were introduced to concepts of “Problem Based Learning (PBL)” and “Integrated teaching”**. During the first week, they explored the sea of PBL on their own, consulting residents, books, internet with some guidance from teachers. Based on this system, they experienced their 1st PBL in 2nd week using a patient’s problems as triggers. Since they had not been exposed to this method of teaching in their previous schools or college, it inundated them in multiple domains-cognitive, affective and psychomotor. It made them learn concepts of teamwork and group dynamics. At one stage, they started to feel bogged down and exhausted by the sheer enormity of it all and started doubting whether they will survive the 2nd Professional subjects. But, soon they realized the multiple ways to learn such as of “Un-Conventional Learning Experiences (UNCLE)” and their fear gave way to confidence which can now be witnessed in their presentations and interactions. Parallel sessions on “Theme based Integrating teaching” were highly liked since they got on-the-spot feedback from teachers and their doubts were clarified immediately by a panel of facilitators. These sessions were prepared after discussing the topics with faculty of clinical and para-clinical subjects. On face value, the topics appeared to be very complex but, in practice, they were quite basic and provided a foundation for the students to move to higher levels in subsequent semesters. They also provided a platform for learning relevance of basic subjects and their practical application in healthcare. The students also enjoyed a Quiz through Polling Pads.

The second batches entered the clinical postings and were sensitized to dealing with patients in the form of Orientation to Clinical Medicine. Stretching over 3 weeks with 15 odd interactive sessions, these rigorous sessions exposed the students to concepts of clinical interview, art of history taking from children, adolescents and adults. They were also introduced to concepts of preventive and promotive health and the art of meticulous record keeping. Barring few unjustified demands, their feedback reflected high degree of satisfaction with the methodology employed. It was also observed that they appreciated multi-tutored interactive sessions. It remains to be seen how effective are these sessions in bringing out desired behavioral changes (which was our objective) versus what they have appreciated in these sessions and its application in future. It is our assumption that student may still not be mature enough to appreciate and grasp the value of the new methodology used in our sessions. These inputs, however, will definitely give impetus to refining our teaching strategies for the future batches.

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Dr Kuldeep Singh
Additional Professor & Head
Department of Paediatrics
The Psychosocial Moorings of Dieting

My mother died of diabetes mellitus. On her death-bed, with every possible complication of the disease, she blessed me saying “may this wretched disease be extinct from our progeny”. I knew it would be a stupendous task for me to ensure that her last wish was not belied, given my genetic predisposition, but I was determined to try hard. The prevention of diabetes can be summarized in two words: “diet” and “exercise”. In other words, one has to consume less carbs and burn more calories to dodge the disease. Those who feel that the former is easier couldn’t be more wrong if my own experience is anything to go by.

Before embarking on this onerous task, I made some quick, back-of-the-envelope calculations on the calorific content of my average diet and the calories burnt by me through the day. The results were a startling revelation: I realized that I have to walk miles to burn even the measly calories contained in a ‘diet’ biscuit, let alone the fat-laden delicacies that regale the taste buds. Surely, then, the solution lies in slashing the input of calories than trying to burn the calories consumed. But, that was easier said than done since the fiercest resistance to my dieting came from my sincerest well-wishers. Foremost among them, of course, was my wife, Madhumita. The first thing I did was to buy a digital weighing machine that displayed the kilograms with a least count of two decimals so that I knew even if I gained a hundred grams. The next was a ploy to take the tiffin, which Madhumita cooked so earnestly early in the morning, to the college and empty it routinely into the trash can during the lunch time. Over time, I changed tack in order to avoid the wastage of food and of course, to spare Madhumita the early morning hassle of preparing my tiffin. Instead, I asked her to provide me with dry food like muesli, oatmeal, milk powder and raisins that I would cook in the microwave oven in my office. Sure enough, I never ate them and the dry food piled up in my office cupboard even as I continued - The ancient foraging man did not have the luxury of a breakfast, lunch and dinner. They gorged themselves with food when it was available and starved for weeks when it wasn’t. Over the millennia, the living body was inured to the vagaries of nature and its bounties.

I shared my theory with many at the slightest opportunity, convinced that it was truly educative. However, never was it so rewarding as when I appeared for the interview for the post of Professor of Physiology in the newly-established AIIMS. At the outset of the interview, the Chairman of the interview board offered me biscuits. I saw my chance to veer around the course of the interview to my advantage and therefore, besides declining politely, I added provocatively, “That’s the prescription for peptic ulcer or people who are prone to it”, I explained to them with an air of authority and continued: “The ancient foraging man did not have the luxury of a breakfast, lunch and dinner. They gorged themselves with food when it was available and starved for weeks when it wasn’t. Over the millennia, the living body was inured to the vagaries of nature and its bounties.”

As I brooded over the problem, I suddenly had a eureka moment: “You should have small multiple meals…” I smiled to myself, delighted that he had bitten the bait, and rattled off my well-rehearsed lecture. The rest, as they say, is history.

- Dr. Sabyasachi Sircar
  Professor & Head
  Department of Physiology
The definition of a hospital information system (HIS) is unfortunately not unique. The literature of both the informatics community and health care data processing world is filled with descriptions of many differing computer systems defined as an HIS. In this literature, the systems are sometimes characterized into varying level of HISs according to the functionally present within the system. With this confusion from the literature, it is necessary to begin with a definition of an HIS. To begin this definition, we must first describe what it is not. The HIS will incorporate information from the several departments within the hospital, but an HIS is not a departmental system. Departmental systems such as a pharmacy or a radiology system are limited in their scope. They are designed to manage only the department that they serve and rarely contain patient data captured from other departments. Their function should be to interface with the HIS and provide portions of the patient medical/administrative record that the HIS uses to manage the global needs of the hospital and patient.

A clinical information system is likewise not an HIS. Again, although the HIS needs clinical information to meet complete functionality, it is not exclusively restricted to the clinical information supported by the clinical information systems. Examples of clinical information systems are ICU systems, respiratory care systems, nursing systems. Similar to the departmental systems, these clinical systems tend to be one-dimensional for with a total focus on one aspect of the clinical needs of the patient. They provide little support for the administrative requirements of the hospital.

If we look at the functional capabilities of both the clinical and departmental systems, we see many common features of the HIS. They all require a database for recording patient information. Both types of systems must be able to support data acquisition and reporting of patient data. Communication of information to other clinical and administrative departments is required. Some form of management support can be found in all the systems. Thus, again looking at the basic functions of the systems one cannot differentiate the clinical/department systems from the HIS. It is this confusion that makes defining the HIS difficult and explains why the literature is ambiguous in this matter.

The concept of the HIS appears to be, therefore, one of integration and breadth across the patient or hospital information needs. That is, to be called an HIS the system must meet the global needs of those it is to serve. In the context, if we look at the hospital as the customer of the HIS, then the HIS must be able to provide global and departmental information on the state of the hospital. For example, if we consider the capturing of charges within the hospital to be an HIS function, then the system must capture all patient charges no matter which departmental originated those charges. Likewise all clinical information about the patient must reside within the database of the HIS and make possible the reporting and management of patient data across all clinical departments and data sources. It is totality of function that differentiates the HIS from the departmental of restricted clinical system, not the functions provided to a department of clinical support incorporated within the system.

The development of an HIS can take many architectural forms. It can be accomplished through interfacing of a central system to multiple departmental of clinical information systems. A second approach which has been developed is to have, in addition to a set of global application, departmental or clinical system applications. Because of the limitation of all existing systems, any existing comprehensive HIS will in fact be a combination of interfaces to departmental/clinical systems and the applications/database of the HIS purchased by the hospital.

The need for integration of the patient data is as important as the longitudinal requirement. Traditionally the clinical information tended to be stored in separate departmental files. With this structure it was easy to report from each department, but the creation of reports combining data from the different proved difficult if not impossible. In particular in those systems where access to the
departmental data was provided only through interfaces with no central database, it was impossible to create an integrated patient evaluation report. Using those systems the care providers would view data from different screens at their terminal and extract with pencil onto paper the results from each departmental (clinical laboratory, radiology, pharmacy, and so on) the information they needed to properly evaluate the patient. With the integrated clinical database care provider can view directly on a single screen the information from all departments formatted in ways that facilitate the evaluation of the patient.

Today’s HIS is no longer merely a database and communication system but is an assistant in the management of the patient. That is, clinical knowledge bases are an integral part of the HIS. These knowledge bases contain rules and/or statistics with which the system can provide alerts of reminders or implement clinical protocols. The execution of the knowledge is highly dependent on the structure of the clinical database. For example, a rule might be present in the knowledge base to evaluate the use of narcotics by the patient. Depending on the structure of the database, this may require a complex set of rules looking at every possible narcotic available in the hospital’s formulary or a single rule that checks the presence of the class narcotics in the patient’s medical record. If the search requires multiple rules, it is probably because the medical vocabulary has been coded without any structure. With this lack of structure there needs to be a specific rule to evaluate every possible narcotic code in the hospital’s formulary against the patient’s computer medication record. With a more structured data model a single rule could suffice. With this model the drug codes have been assigned to include a hierarchical structure where all narcotics would fall into the same hierarchical class. Thus, a single rule specific only to the class “narcotics” is all that is needed to compare against the patient’s record.

These enhanced features of the HIS database are necessary if the HIS is going to serve the needs of today’s modern hospital. Beyond these inpatient needs, the database of the HIS will become part of an enterprise clinical database that will include not only the clinical information for the inpatient encounters but also the clinical information recorded in the physician’s office or the patient’s home during outpatient encounters. Subsets of these records will become part of state and national health care databases. In selecting, therefore, and HIS, the most critical factor is understanding the structure and functionality of its database.

There are so many aspects of HIS to be shared with you all, but we think that we will share those aspects with you all in future editions.

- Dr Rajesh Sharma
  Additional Professor
  Department of Physiology

- Dr Arvind Sinha
  Additional Professor & Head
  Department of Pediatric Surgery
In Remembrance

Hitesh Gautam
2013 Batch – MBBS

With a hole in our hearts & tears in our eyes,
We remember a friend who touched our lives.
With Hitesh looking over us from the skies,
His presence will be perpetual in our jives.

Hitesh, a person who stood by his name; “The one who cares for everyone else”, a good friend to so many. He could be counted on & depended on always; whether you need sound counsel, an empathetic ear, a shoulder to lean on; companiable silence or mischief - he was your bestie. He left an indelible imprint in our hearts, & some joyous memories that we'll rejoice for the rest of our lives. We'll always miss the friendship he brought into our lives.

You'll never be forgotten our friend....

- 2013 MBBS Batch
Year Book
B.SC. (Hon's) NURSING 1st YEAR

ABHILASHA CHOUDHARY
Caring

ALEENA SEBASTIAN
Pearl of Kerala

ANILIMA
Unpredictably innocent

ANJALI
Unpredictably innocent

ANITA KUMAWAT
Something Special

ANITA SOLANKI
Energetic

BABU
Kind Hearted

ANITA PRAJAPATI
Dar Ke Aage Jeet Hai

BANU PRIYA SHARMA
Full of Twists

ANJU SHARMA
Sensitive

BHANU BHAIYARIA
Lovely

BASANTI
Calm & Quiet

CHANCHAL
Confident

BASANTI
Calm & Quiet

DEEP SHIKHA BHANWARIA
Lovely

CHANCHAL
Still daddy's Lil girl

HEM PRABHA JANJ
Sparkling

ESTHER NENGZACHING
Cutie pie

HIMANI
Enthusiastic

JYOTI BALAMALAV
Friend Forever

JYOTI
The boss

BHAURU SHARMA
Full of Twists

JYOTI
The boss

HATNEIKIM HAOKIP
Laughter the best medicine

BABU
Kind Hearted

HEM PRABHA JANJ
Sparkling

HATNEIKIM HAOKIP
Laughter the best medicine

HEM PRABHA JANJ
Sparkling

HATNEIKIM HAOKIP
Laughter the best medicine
KARUNA
The Expression Queen

KANISHA SHARMA
Frank and empathetic

KARUNA
The Expression Queen

KMLALPAWL
Sleeping Beauty

KIMLALPAWL
Sleeping Beauty

KOMAL CHOUHDARY
Smart

KRISHNA MEENA
Sincere and optimistic

MANISHA
Singer of the Class

MANJU BISHNOI
Ambitious

MANJU DEV
A ray of sunlight

MANJU MUNDEL
Easy going

MADHU
Cute

MEENA BISHNOI
Decent and well behaved

MIRAGA BISHNOI
Smiling

MISHRABA
Fun loving

NONGMAITHEM ELIZABETH DEVI
Cinderella

PRIYA GOEL
Studious

PRIYA SOLANKI
The silent valley

POOJA
Born to Win

POOJA
Born to Win

POOJA SETHI
Bold and beautiful

POOJA SETHI
Bold and beautiful

PAYAL
Humble

NEHA
Creative

NISHA
Fun to be with

NISHA
Simplicity with Beauty

NEHA
Creative

NISHA
Fun to be with

NEHA
Creative

NISHA
Fun to be with

NEHA
Creative

MONICA
Kind and loving

MONICA
Kind and loving

MONICA
Kind and loving

38
AASHIMA
Miss Lost

ANKITA DEWASI
Sincerely Serious

BHARTI KACHAWA
Sugar & Spice n everything is Nice

CELINA SERTO KHAMNEIKIM
Nightingale – The Real Singer

ANITA BISHNOI
Daddy’s Angel

ASHIS RAPHAEL
Pretty Dancer

ASHRATJEET KAUR
Philosopher

ATHIRA A.
Quiet & Innocent

ANJALI DALAL
Queen of Hygiene

BAHRAH
Desi Kalakar

BARKHA
Desi Kalakar

BHARTI KACHAWA
Sugar & Spice n everything is Nice

CEILNA SERTO KHAMNEIKIM
Nightingale – The Real Singer

ANJANI WALIA
Miss Attitude

DEEPA
Sensitive

DEEPAK KUMARI
Advisor

DEB YI
Dreamer

DIVYA
Sunshine Smile

CHANDRIKA
Sincere

EKTA KHILRANI
Unity is Strength

ELIZABETH LUPHO
Honest & Understanding

EUNICE NIANGKIANVUNG
Doremon – The Entertainer

GIRIJA
Keep Calm and click my Pic

HARMANJOT DHINDSA
Genuine

HITESHI BORANA
Best Friend, till the End

HITESHI BORANA
Best Friend, till the End
Thoughtprints

As I wake up in the morning,
To gear up for the day,
I notice how the world has changed,
While I drifted away,
I muse while drinking coffee,
How simple life used to be,
When I was a child,
And seeing picture being clicked,
Gave a huge toothless smile

How my Grandmother told stories
Or played football in the rains,
How I dreamily talked to fairies
And cycled on the lanes.
How I cried before heading for school,
And painted handprints on the wall.
How I ran with my cars,
And dressed up my dolls.
Snuggling on the bed on being woken up,
Trying to be an adult, growing up everyday.
But in the very next moment,
Seeing an insect running away!
And then a bell rang,
I woke up.

To the THOUGHTPRINTS
Etched in my mind garden.
Now as I look forwards,
I plan to change as the circumstances have.
But I will strive that the childhood innocence still remains.

- Aashna Manoj Sachdeva
MBBS, 2013
Vision of a life

A vision of a life so nice
Carefree like a child’s paradise
Sleep every night without a worry
Neither planning tomorrow’s story,
Nor for the past day, you are sorry.

Be it hours of work every day,
A job that brings joy much like the games we play.
A home amidst the core of nature,
with a society acting rational and mature,
A day in arms of that beautiful creature
Admiring the orange sun and all that the rays nurture.

A moment to sit back and savor,
All that peace that there is to devour,
The sight of the greens and the touch of the wind
The song of the birds and the silence that intervened
The scent of the lilies and the colors of the flowers
The sparkle of the water drops left from the showers.

The life of a child in the lap of nature
Ordain such boon, O Lord, upon this poor creature.

- Galib Mirza
MBBS, 2012
जिन्दगी जीना तू सीख ले।
गिरकर सँभालना है जिन्दगी,
इसको जीना तू सीख ले।
हर रात पर काटे मिलोगे,
इन पर चलना तू सीख ले ॥

सुख-दुःख जीवन के दो पहिए
सुख मिले या दुःख
सुख में तो दुःख पुरकाता है
दुःख में सुखकाना सीख ले॥

समृद्ध की ऊंची छहरों से
जो तू घबराकर गिर जाएगा
मोटी की तो बात दूर
कंकड़ भी ना ला पाएगा

ख़ाकर आगे पीछे कदमों के निश्चित बनाना सीख ले
अपने पीछे तू एक नया इतिहास रखना सीख ले ॥

पृ० ४९
‘जिंदगी’

जिंदगीबुरीहैआज़तात्तेरी. परबुरीलीहैतू। मेरेरिअजीवनलानही मेरेअपनो के हितोकारी. पर जरूरी हैतू!

कभीगीरोमेंबीमोहनी खुशी। कभी खुशियोमेंबीपूजनमा। हाय! करोड्डकोशिशों के बादभीतुल्ला समस्या न पायेहम। कभी रुबरु होने की कोशिशादूककरती तोलुमजातेहम। औरकभीअपने में उठाते हो तुम्हे हँड़ेले की चाहती न करतेहम।

तुम्ह्याके शायदमुझु न पायेहम. जिंदगी परजुड़ीहैतू। तेरेहजीवनमुझु न पायेहम जिंदगी परजुड़ीहैतू। जिंदगीबुरीहैआज़तात्तेरीपरबुरीलीहैतू!

तुम्नेतोमझु रिख्तरोमेंदोस्तोमेंपुरनित रखा. परहमोजुआकोनीक्युं रहीदू। कभीतालुख तोकरतीगहोरुसे लगातेहम। क्योंकि, तुम्हे जानने की कोशिशोमेंती दे जरूर जानलिया किजिंदगीबुरीहैआज़तात्तेरीपरबुरीलीहैतू।

- हिंदी वाराणशीली
 हमा.वी.एस. 2013
कान्हा तुझे है संसार को बचाना

रो-रोकर आज हो गई है आँखे मेरी नम,
मैं हूँ एक आम-आदमी, क्या किसी को नजर नहीं आते गय।

मैं हूँ एक मुसाफीर जो बूँदने चलता था अपनी मंजिल का पता,
सीधे रात्रे पर चलना ही थी मेरे जीवन को सबसे बड़ी खता।

क्या यह ही मालिक, क्या यह ही है तेरी रजा,
सुदामा जैसा जीवन व्यतीत करने वालों की क्या आज यह है सजा।

आज के Transformers को तो लगती है गीता की बातें पुरानी,
कलदुग में कान्हा कहाँ बूँदे तेरी मीरा दीवानी।

उस मधुर बांसुरी की आवाज सुनने को तस्वर हैं मेरे कान,
बच्चे न जाने कब बंद करेंगे ‘या योहनी’ के करना गुणगान।

इसने निश्चय करने के बाद भी जब बचा न कोई खुद से, न किसी से,
तो आज भी समाज में कंस कँसे बच रहा तेरी रहमान से।

हे कान्हा ! गया था मैं बूँदने बूँदवन की गलियों में,
पर उससे पहले ही परम गया सांसारिक मोह-माया की पहलियों में।

अब तो तू आजा न इस 21वीं सदी में लेकर अजतार
आज भी है हर घर में उस यशोदा को अपने बेटे के वापस आने का इंतजार।

कहाँ गया यह बागा, वह जंगल, शायद जानवर भी कर रहे यह सवाल,
कान्हा देख तेरी बिना कौसा बुरा होता है इतना हाल।

हसीनापुर की तरह बन गया यह समाज,
तो आज भी किसी दोपहरी की बचती है न लज

कान्हा क्या तुम तक पहुँच नहीं रही हम भक्तों की पुकार,
आज तो कोई भी बन रही है सरकार।

आसमां भी इतना काला है, तुझे तक कँसे पहुँचेंगी न्याय की गुहार,
आज भी था, कल भी रहेगा तेरी कृपा पर महर्यां संसार।

श्रेया कृक्षा
यू.भी.भी.एस., 2013
बाज़ार

आया था शहर में गर्मी और अनधिकार फिरे, कमाल की पेटी। मेरा हर आहसास धीर गया।
गाँव में कहते थे, करोड़ों के भाव नहीं विकेगा,
तेरा ये वाशियदा कोठियाँ के भाव धीर गया।

मैं अकेला नहीं बिका, इस बिकने संसार में,
लगता है सारा ये जहां धीर गया।
गोड़ पर खड़े सिपाहीयों का क्या दोष?
जब शहर का हमारा शंकरास हिम गया।

इंसाफ की और क्या?
सर रहगुजर-दुनिया में होगी
जब जज से मुशातिब बो गवाह धीर गया।

यहाँ फूंसे महबूबा में लोगों का क्या होना है,
कोंम का ही जब रहतुमा धीर गया।
इंसाफ की और क्या?
होगी ओ कपड़ीयों,
ठेकेंद्रियों के बाढ़?
यहाँ खुदा धीर गया।

कला की पहचान क्या,
जहां में होगी है,
जब अखबारों का यहाँ,
मजहूल धीर गया।

इस पेंसे के महत में, इंसाफ का क्या गवाह?
बरे है शिष्य जिसम, सारा ईमान धीर गया।
बदला है ये सब कुछ, उस लक्षण के दुकान ने,
जब पेंसे में लोगों को खुदा दिख गया।
जब पेंसे में लोगों को खुदा दिख गया।
जब पेंसे में लोगों को खुदा दिख गया।

- मानेवंद्र सिंह तंदार
एम,बी,एस - 2012

(गर्मी और अनधिकार - शहर रहगुजर दुनिया - दुनिया का दासता
मुख्तिब - सामग्री)
आखिर किस तरह?

लहर खुशी की देश में लाओगे किस तरह सत्य में तुम स्वतन्त्र से आओगे किस तरह

थे जो लोग अपने, वे तो शत्रु बन रहे आतंक को इस देश में, फैला स्वतन्त्र रहें मुलक के बन जाओ अब तो यहेश तुम दंगियों को देश के, दाहोगे किस तरह

देश के इस हाल में, नेता दलाल है, भ्रष्टता का अपनी किसको मलाल है फाइलों का मेंज पर जंजाल हो गया कर्मशील देशगीत गाओगे किस तरह

सत्यता भी देश में, पश्चिम की आज है अधानगी नायिकाएं, काहे की लाज है नायक भी इस मुलक में नर नकली बन गए गर्व से चोटी पर लाओगे किस तरह

जुगड़ी में भी शिकायतें करते हैं आज लोग क्या रोहियों से घास की, कर लोगे आप भोग वे लाओ तो वतन पर बनवान हो गये सीमा के दुसरों को हराओगे किस तरह

लहर खुशी की देश में लाओगे किस तरह सत्य में तुम स्वतन्त्र से आओगे किस तरह

- विशाल नागर
एम.बी.बी.एस., 2013.
जरा इन्सान बनकर दिखा जा जरा इन्सान बनकर दिखा जा....
लड़-लड़ कर क्यों जी रहा,
लालची अधिकारों में क्यों खो रहा,
प्रेम से दो बोल दिखा जा....
जरा इन्सान बनकर दिखा जा....
क्यों मोह माया में खो रहा,
जीवन को व्यर्थ में गई रहा,
स्वार्थ को दो छोड़ रहा,
परमार्थ करना सिखा जा....
जरा इन्सान बनकर दिखा जा....
ऑपल गमता का छलनी कर रहा
जनक प्रेम अपमान कर रहा,
अमूल्य दिशाओं का मूल्य समझ
इनका सम्मान करना सिखा जा....
जरा इन्सान बनकर दिखा जा....
क्षण उदर क्यों चीर रहा,
नैतिक मूल्य क्यों खो रहा,
प्यारों को पानी पिला जा,
भूखे को भोजन करा जा,
जरा इन्सान बनकर दिखा जा....
जीवन का उद्देश्य बना,
आकाश की ऊंचाईयों को घूरकर,
गुरुजनों के वचनों को
कर्तव्य पृथ्वी बना जा,
इस मात्री का मीठा चुप्पा जा....
जरा इंसान बनकर दिखा जा....

- नगमा शीनम  
ए.वी.वी.एस.  2012
वो चेहरा

जब मैं सुबह उठता हूँ
जब शाम को सोता हूँ
मुझे एक ही चेहरा याद आता है
अंधेरी रात में, सोए सोए
जाने जाने ख्यालों में
यो गुलगुलाम है
वे शांत संगीत, वे शांत स्वर
कितना मेरे मन को भारता है
मे व्या करुँ
मुझे एक ही चेहरा याद आता है
कोई पत्‍ते बनकर
vे मेरे मन को उठाना जाता है
पता नहीं फिर मुझे व्या हो जाता है
kितना अलग, कितना मझुर
vे जलते दीवों की रोशनी सा
नेरी ऑखों में छा जाता है
मे व्या करुँ
मुझे एक ही चेहरा याद आता है
भीमी ऑखे, ठहरा मन
vे निदिया की धार सा
अपने साथ, मुझे भी बता हो जाता है
जब मैं सुबह उठता हूँ
जब शाम को सोता हूँ
मुझे एक ही चेहरा याद आता है

- पंकज वर्मा
प्रकाश बोस, 2013
जय और विजय

भगवान विष्णु के निवास धाम वैकृत्य के सात द्वार हैं। सातवें द्वार के द्वारपाल जय और विजय भगवान को बहुत प्रिय थे। जय और विजय दो मानव थे जो भगवान के बहुत बड़े भक्त थे और पूरी भ्राता से प्रभु की सेवा करते थे। परंतु वैकृत्य के आखिरी द्वार के द्वारपाल होने के कारण उन्हें अहंकार हो गया था।

एक बार भगवान ब्रह्मा के चारों मानस पुत्र भगवान के दर्शन प्राप्त करने को आए। पहले छः द्वार पर पहुंचे तो अहंकारी जय और विजय ने उनका मुख रोक लिया और उनके आने का कारण पूछा। ब्रह्मा पुत्रों ने उन्हें चेतावनी देकर कहा की समस्त विश्व में वे कहीं भी जा सकते हैं और उन्हें कोई नहीं रोक सकता, परंतु अहंकार से हुई विभक्ति के कारण जय विजय ने उन्हें वैकृत्य में प्रवेश नहीं करने दिया और कहा कि भगवान विष्णु की आज्ञा के बिना वे किसी को अंध्र नहीं जाने दे सकते। जय विजय के इस व्यवहार से कोहिल ब्रह्मा-कुमारी ने उन्हें उनके स्थान को स्थायी मूर्तिलोक में जन्म लेने का आयाम दे दिया। तब जय और विजय को अपनी गतियों का एहसास हुआ और वे ब्रह्मा-पुत्रों से क्षमा मांगने लगे। जब भगवान विष्णु को शात हुआ की ब्रह्मा-कुमार उनसे दर्शन हेतु वैकृत्य प्रवेश करते हैं तो वे स्वयं उनके पश्चात् गए और उनसे जय-विजय को क्षमा करने का अनुरोध किया। भगवान विष्णु की विनती को स्वीकार करते हुए ब्रह्मा-पुत्रों ने उनकी सजा कम करते हुए उन्हें दो विकल्प दिये। पहला, कि वे सात बार मूर्तिलोक में जन्म ले और इन सात जन्मों में वे भगवान विष्णु के बहुत बड़े भक्त हों या दूसरा विकल्प, कि वे तीन जन्म के लिए मूर्तिलोक में जन्म ले परंतु इन तीन जन्मों में वे भगवान विष्णु के शतु होंगे और भगवान विष्णु क्षमा ही उनका करता होगा। बहुत विचार करने के बाद जय और विजय ने निर्णय किया कि वे तीन जन्म के लिए विष्णु के शतु बनकर जन्म लेंगे जिससे वे शक्ति ही अपनी सजा पूरी करके वैकृत्य लीट आएंगे और प्रभु कि सेवा कर सकेंगे।

इस प्रकार ब्रह्मा के मानस पुत्रों के आयाम से जय और विजय ने सत्ययुग में ऋषि कश्यप और दैव-माता दिति के पुत्र हिरण्यक्षेत्र और हिरण्यकश्यप के रूप में जन्म लिया। हिरण्यक्षेत्र का भगवान के वर्तमान अवतार द्वारा वह किया गया और हिरण्यकश्यप को भगवान ने नरसिंह अवतार लेकर मारा। इसके बाद जेठा युग में इन्हें ऋषि विश्वक और राक्षसी कौंसली के पुत्र रावण और कूचकुंड के रूप में जन्म लिया जिनका उद्देश भगवान विष्णु के राम अवतार के लिए किया था। फिर ह्याप युग में जय और विजय ने इस प्रकार तीन बार मूर्तिलोक में जन्म लेने के बाद जय और विजय पुत्र: वैकृत्य लीट आए और भगवान विष्णु की सेवा में लग गए।

- अक्षित वृंदावन
MBBS 2012
Photo Courtesy:

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