



# I.M.A.G.S.B. NEWS BULLETIN

**GUJARAT MEDICAL JOURNAL  
INDIAN MEDICAL ASSOCIATION, GUJARAT STATE BRANCH**

Estd. On 2-3-1945

Office : A.M.A. House, 2nd Floor, Opp. H. K. College, Ashram Road, Ahmedabad-380 009.

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## OFFICE BEARERS

### PRESIDENT

Dr. S. S. Vaishya Daman  
(M) 98794 75555

### HON. STATE SECRETARY

Dr. Kamlesh B. Saini Ahmedabad  
(M) 96019 49252

### IMM. PAST PRESIDENT

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(M) 94260 04474

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### HON. ASST. SECRETARY

Dr. Bharat I. Patel Ahmedabad

### GUJARAT MEDICAL JOURNAL

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Dr. K. R. Sanghavi Ahmedabad

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Dr. Parth N. Patel Ahmedabad



**STATE PRESIDENT  
AND  
HON. STATE SECRETARY'S  
MESSAGE**



Dear Members,  
Season's Greetings.

In response to our appeal, to help the families of victim of CRPF attack, Pulwama on 14-02-2019, our IMA Local Branches & members donated generously. As per our promise, we donated about Rs. 18 lacs. It could be possible because of support of every members and local branches. On behalf of GSB IMA, we are thankful to all, for their contribution & show their sympathies to the nation.

We congratulate Ahmedabad Medical Association for successfully organising felicitation of Dr. Anil J. Nayak I/C Vice Chancellor, Hemchandracharya North Gujarat University.

As estimated by the world Health Organisation by the year 2030 the global economy is projected to create around forty million new health sector jobs mostly in the middle and high income countries and despite the anticipated growth in jobs there shall be projected shortage of fifteen million health workers to achieve the sustainable development goals in low and lower middle income countries. The United Nation's Commissions on Health Employment and Economic Growth with a focus on building resilient health systems stresses upon strengthening the health workers and urges to ensure effective health employment.

Considering the age as a factor, India is one of the youngest countries of the world. By the year 2020, with sixth – four per cent of the population in the working age group, India is set to experience a dynamic transition as the population burden of the past turns into a demographic dividend. The rising global demand and need for health workers, over the next decade, presents significant challenges nationally as well as offers the opportunity to



generate employment not only to meet the demands but also to cater the global market.

Health workforce in Indian healthcare system has been defined with focus limited to few cadres such as doctors, nurses and frontline workers, wherein, several other healthcare professionals, have remained unidentified, unregulated and underutilized. The persistent demand for a regulatory framework to ensure appropriate regulation and standardization of such professions have been seen for several decades. In the last six years, over fifty allied and healthcare professions have been identified whose potential may be utilized in improving the access to care and all those professions are globally regulated professions.

With the advancement in the health sector, changing preferences of consumer and provider, it is now warranted to create a fresh vision of healthcare delivery with a patient centric approach and focus on moving to multi-disciplinary team-based care. There is a need to implement new ways of using health workers, strengthening the workforce by testing task shifting models and improving and increasing access to quality services through qualified and competent set of allied and healthcare professionals.


As decided by IMA HQ & in C.W.C. meeting at Jagganath Puri this month, we extend our support to IMA members who are contesting parliamentary election from main political parties in our states.

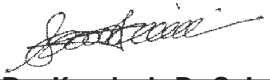
In our state 4 Allopathic doctor are contesting;

1. DR. KIRITBHAI SOLANKI- AHMEDABAD
2. DR. MAHENDRA MUNJPARA- SURENDRANAGAR
3. DR. K.C. PATEL- VALSAD
4. DR. TUSHAR CHAUDHARY- VYARA

On behalf of GSB IMA, we wish a great success to all of them.

Long live IMA.

  
**Dr. S. S. Vaishya**  
(President, G.S.B., I.M.A.)

  
**Dr. Kamlesh B. Saini**  
(Hon. State Secy., G.S.B., I.M.A.)



## CENTRAL WORKING COMMITTEE MEETING

Indian Medical Association, 221st Central Working Committee meeting was held on 6th & 7th April, 2019 at Hotel Om Leisure Resorts, Puri, Odisha.

Following members from our State attended the meeting.

- |                           |           |
|---------------------------|-----------|
| 1. Dr Ketanbhai Desai     | Ahmedabad |
| 2. Dr S S Vaishya         | Daman     |
| 3. Dr Kamlesh Saini       | Ahmedabad |
| 4. Dr Yogendra Modi       | Ahmedabad |
| 5. Dr Parimal Desai       | Ahmedabad |
| 6. Dr Monaben Desai       | Ahmedabad |
| 7. Dr Mahendra Chaudhary  | Bardoli   |
| 8. Dr V T Parmar          | Bhavnagar |
| 9. Dr Anil J Nayak        | Mehsana   |
| 10. Dr Jesang F Chaudhary | Mehsana   |
| 11. Dr Rajendra Jain      | Mehsana   |
| 12. Dr Praful Desai       | Navsari   |
| 13. Dr Atul Pandya        | Rajkot    |
| 14. Dr Girish Modi        | Surat     |
| 15. Dr Vinod Noticwala    | Surat     |
| 16. Dr Nitin Garg         | Surat     |
| 17. Dr Pragmesh Joshi     | Surat     |
| 18. Dr Mayank Bhatt       | Vadodara  |
| 19. Dr Chetan Patel       | Vadodara  |



## CONGRATULATIONS

### Ahmedabad Obstetrics & Gynecological Society (2019-2020)

- |                    |   |                     |
|--------------------|---|---------------------|
| President          | : | Dr. Anil Mehta      |
| President (Elect)  | : | Dr. Rajal Thaker    |
| Vice President     | : | Dr. Sunil Shah      |
| Hon. Secretary     | : | Dr. Mukesh Savaliya |
| Hon. Jt. Secretary | : | Dr. Lata Trivedi    |
| Hon. Treasurer     | : | Dr. Mahesh Jariwala |

\* \* \* \* \*



#### ❖ Dr. Vineet Mishra

Awarded as "Gujarat Glory in Medical Field" Excellency in Gujarat State by Shri Om Prakash Kohliji

#### ❖ Dr. Kedar Mehta

**Vadodara.**

Being awarded Presidential Appreciation Award for contribution in the field of community Medicine and "Saroj Jha Award" for best research paper in gender and health in National conference of IAPSM at IGMCSimla on 8-10th March, 2019.

#### ❖ Dr. Paragkumar Chavda

**Vadodara.**

Being awarded President Appreciation Award for recognizes the contribution made to IAPSM and good work done in the Community Medicine field IGMCSimla on 8-10th March, 2019.



## ATTENTION PLEASE !!!

### IMA LOCAL BRANCHES

**Election Notice of I.M.A. G.S.B. for the post of State President (Surat Zone) and Seven Vice Presidents (One from each zone) has been posted to the Local Branch Secretaries.**

#### **RULES AND BYE-LAWS OF THE LOCAL BRANCHES :**

- (A) A Local Branch shall make its own Constitution to govern itself taking the Constitution of I.M.A. H.Q. and of the State Branch as the guideline. The Constitution, Rules and Bye-Laws of a Local Branch shall not infringe or contravene the provisions of Memorandum of Association Rules and Bye-Laws of I.M.A. Headquarters and / or of the State Branch.
- (B) The Constitution, Rules and Bye-Laws so framed by a Local Branch and submitted to the State Branch, shall be forwarded to the Headquarters for approval and ratification with the remarks of the State Branch thereon if any, and it should be implemented only when it has been approved and ratified by the Working Committee of the IMA H.Q.
- (C) Till such time as the Constitution of a Local Branch has been approved by the Headquarters, the said Local Branch shall follow Model set of Rules and Bye-Laws and guidelines prescribed by the headquarters and the State Branch for a Local Branch.
- (D) The Rules and Bye-Laws of the Indian Medical Association Headquarters shall apply in any matter not covered by the Rules and Bye-Laws of the State Branch or of a Local Branch already ratified by the Working Committee.



## ATTENTION PLEASE !!!

### IMA MEMBERS

**Election Notice of I.M.A. G.S.B. for the post of State President (Surat Zone) and Seven Vice Presidents (One from each zone) has been posted to the Local Branch Secretaries.**

#### **ELIGIBILITY OF OFFICE BEARERS :**

- (A) State President shall be a Life Member of Association.
- (B) Vice President shall be from the same zone for which they have been proposed.
- (C) Hon. State Secretary, Hon. Jt. Secretary, Hon. Asst. Secretary and Hon. Treasurer candidates shall be from amongst the State H/Q.
- (D) Candidates for Zonal Posts shall be from amongst the eligible members of Local Branches from the same zone for which they have been proposed.
- (E) Eligibility of local branches for nominating the candidate for election of the State Branch.
  - 1) The local branch shall be an active branch not suspended or defunct.
  - 2) It shall have cleared its S.F.C. for the year by 15th April.
- (F) 1) **He/She must be a life member of I.M.A.**  
 2) **He/She must have seven years continuous membership of I.M.A.**  
 3) **He/She should have served G.S.B. I.M.A. as a Working Committee member for at least 3 years.**

**In case of non receipt of valid nomination, any other life member can be considered for that particular post.**

**For further information, please contact your Local Branch Secretary.**



## FUTURE CONFERENCE

### NATIONAL EVECON-2019

NATIONAL CONFERENCE OF WOMAN DOCTORS WING

IMA Goa State and Goa State WDW

**On 22nd and 23rd June, 2019 at Goa.**

Women Doctors (IMA members only)

Contact Details:-

**Dr. Mona Desai**

National Chairperson IMA WDW

Mail id : drmonaped@yahoo.co.in

M: 9825016769

**Dr. Neeta Biyani**

National Secretary IMA-WDW

Mail id : neetabiyani.dhule@gmail.com

M: 9511711077

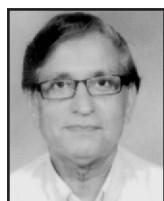
Registration form is also available on our

**website i.e. [www.imagsb.com](http://www.imagsb.com)**

\* \* \* \* \*

## OBITUARY

We send our sympathy & condolence to the bereaved family



**Dr. Navinbhai C. Sheth**

(24-2-1946 - 28-11-2018)

Age : 72 year

Qualification : M.B.B.S.

Name of Branch : Modasa

Dr. Vitthalbhai B. Oza                      16-02-2019                      Mehsana

We pray almighty God that their souls rest in eternal peace.



## NEW LIFE MEMBERS

**I.M.A. GUJARAT STATE BRANCH**

**We welcome our new members**

L_M_No.	NAME	BRANCH
LM/28410	Dr. Nandpara Jeet Girdharbhai	Vapi
LM/28411	Dr. Patel Hitesh Sureshbhai	Surat
LM/28412	Dr. Patel Ushma Dineshbhai	Surat
LM/28413	Dr. Limbani Vrajesh Derajbhai	Surat
LM/28414	Dr. Vala Vijay Bavkubhai	Amreli
LM/28415	Dr. Basiya Dhurutiba Vanrajsinh	Amreli
LM/28416	Dr. Thaker Parth Nishithbhai	Nadiad
LM/28417	Dr. Patel Atul Vinodbhai	Palanpur
LM/28418	Dr. Patel Dhvani Jayantilal	Mehsana
LM/28419	Dr. Patel Nikhil Bharatbhai	Bharuch
LM/28420	Dr. Sarvaiya Ruchik Naginkumar	Jetpur
LM/28421	Dr. Patel Jigar Kaushikkumar	Surat
LM/28422	Dr. Kakadiya Brijesh Rameshbhai	Surat
LM/28423	Dr. Zansiwala Harshvardhan Manojbhai	Surat
LM/28424	Dr. Sheth Moinuddin Abdulrauf	Himatnagar
LM/28425	Dr. Chavda Kahan D.	Bhavnagar
LM/28426	Dr. Tuvar Vishwa Mukeshbhai	Bhavnagar
LM/28427	Dr. Navadiya Jainam Bharatbhai	Bhavnagar
LM/28428	Dr. Thakral Anamika	Bhavnagar
LM/28429	Dr. Khodifad Ashish Mohanbhai	Bhavnagar
LM/28430	Dr. Zinzala Denish Gagjibhai	Bhavnagar
LM/28431	Dr. Singel Harsh Vinubhai	Bhavnagar
LM/28432	Dr. Patel Kashyap Ghanshyambhai	Bhavnagar
LM/28433	Dr. Bothra Jay Shreechand	Surat
LM/28434	Dr. Baldha Nayanaben Shamjibhai	Surat
LM/28435	Dr. Lad Hasit Dalpatbhai	Surat
LM/28436	Dr. Patel Saurabh Dhansukhbhai	Surat
LM/28437	Dr. Patel Amita Saurabhbhai	Surat
LM/28438	Dr. Mavani Mohit Vinubhai	Surat



LM/28439	Dr. Patel Nirali Dineshbhai	Surat
LM/28440	Dr. Savaliya Nitesh Parsotamdas	Surat
LM/28441	Dr. Hirani Madhav Gopalbhai	Bhujkutch
LM/28442	Dr. Hirani Divya Madhav	Bhujkutch
LM/28443	Dr. Raval Vivek Kamleshkumar	Bilimora
LM/28444	Dr. Rajpur Virendrasinh Ambuji	Visnagar
LM/28445	Dr. Desai Bhargav Atulkumar	Nadiad
LM/28446	Dr. Panchal Dhaval Jayanttilal	Vadodara
LM/28447	Dr. Shah Deepak Bhagwatlal	Vadodara
LM/28448	Dr. Soni Anisha Ajitbhai	Vadodara
LM/28449	Dr. Darad Dimple Hardikbhai	Vadodara
LM/28450	Dr. Dave Krishna Sanjaybhai	Vadodara
LM/28451	Dr. Patel Neel Bipinchandra	Visnagar
LM/28452	Dr. Gamit Darcas Naginbhai	Vyara
LM/28453	Dr. Chauhan Yesha Sharadbhai	Bhujkutch
LM/28454	Dr. Sathvara Jayanttilal Laljibhai	Bhujkutch
LM/28455	Dr. Patel Satyen Arvindbhai	Bilimora
LM/28456	Dr. Chaudhari Rutika Maheshbhai	Bilimora
LM/28457	Dr. Ajani Sunita Bhaskar	Vapi
LM/28458	Dr. Chudasama Chandan Kanjibhai	Bhujkutch
LM/28459	Dr. Desai Mansi Ashokbhai	Bilimora
LM/28460	Dr. Panchal Sanjay Muljibhai	Lunawada
LM/28461	Dr. Panchal Gaurang Maheshbhai	Lunawada
LM/28462	Dr. Panchal Shilpaben Muljibhai	Lunawada
LM/28463	Dr. Chauhan Pruthviraj Harisinh	Dadra-Nagar
LM/28464	Dr. Raulji Charu Jayendrasinh	Dadra-Nagar
LM/28465	Dr. Patel Vishal Shankarbhai	Palanpur
LM/28466	Dr. Kundariya Dhaval Rajeshkumar	Surat
LM/28467	Dr. Manavadaria Shreya Jayprakashbhai	Surat
LM/28468	Dr. Khatri Unnatie Kalpesh	Surat
LM/28469	Dr. Satyawani Manoj Vasudevabhai	Surat
LM/28470	Dr. Talukdar Atri	Surat
LM/28471	Dr. Kachariya Jignesh Laljibhai	Surat
LM/28472	Dr. Makwana Gopal Raghavbhai	Surat



LM/28473	Dr. Ramani Pankaj Ravajibhai	Surat
LM/28474	Dr. Patel Yatharth Kulinbhai	Surat
LM/28475	Dr. Mody Dwitiya Hemantkumar	Surat
LM/28476	Dr. Pandya Khyati Anilkumar	Surat
LM/28477	Dr. Banka Anurag Vijaybhai	Surat
LM/28478	Dr. Gondaliya Nirav Dineshbhai	Surat
LM/28479	Dr. Pandya Rajivkumar Bipinchandra	Surat
LM/28480	Dr. Marfatia Gopi Nehulbhai	Surat
LM/28481	Dr. Solanki Nisha Asifbhai	Surat
LM/28482	Dr. Patel Vivek Harilal	Surat
LM/28483	Dr. Paradava Vijay Kanjibhai	Surat
LM/28484	Dr. Hadia Alpesh Bhavanbhai	Surat
LM/28485	Dr. Ghoghari Yogesh Devjibhai	Surat
LM/28486	Dr. Nabhoya Varun Ramjibhai	Surat
LM/28487	Dr. Thummar Bhupendra Narshinhbhai	Surat
LM/28488	Dr. Bhardwaj Utkarsh Ajaybhai	Surat
LM/28489	Dr. Patel Chinmay Amitbhai	Surat
LM/28490	Dr. Ramoliya Ketan Harsukhbhai	Surat
LM/28491	Dr. Tuli Shreya Rajeshbhai	Surat
LM/28492	Dr. Shah Divyang Mukeshkumar	Surat
LM/28493	Dr. Shah Nidhi Nayanbhai	Surat
LM/28494	Dr. Ghadiya Satyam Rameshbhai	Surat
LM/28495	Dr. Prajapati Rilesh Ishwarbhai	Surat
LM/28496	Dr. Mistry Yogita Dalpatbhai	Surat
LM/28497	Dr. Dave Riya Rajnikantbhai	Surat
LM/28498	Dr. Vyas Vivaan Sanjivbhai	Surat
LM/28499	Dr. Rupala Ketan Gunvantbhai	Surat
LM/28500	Dr. Lukhi Hitesh Dayabhai	Surat
LM/28501	Dr. Gajera Zeel Vinodkumar	Surat
LM/28502	Dr. Ghelani Avani Karshanbhai	Surat
LM/28503	Dr. Desai Srushti Pankajbhai	Surat
LM/28504	Dr. Patel Ravish Shammibhai	Surat
LM/28505	Dr. Shah Aanal Rajivkumar	Surat
LM/28506	Dr. Kucha Pravin Bhupatbhai	Surat



LM/28507	Dr. Pindaria Kuldeep Prakashchandra	Radhanpur
LM/28508	Dr. Chhatrola Savankumar Dayalji	Rajkot
LM/28509	Dr. Thakrar Monil Prakashchandra	Rajkot
LM/28510	Dr. Makadia Akash Sureshchandra	Rajkot
LM/28511	Dr. Makadia Janki Akashbhai	Rajkot
LM/28512	Dr. Patel Hitesh Jayantilal	Patan
LM/28513	Dr. Naik Bhargav Ketanbhai	Surat
LM/28514	Dr. Barot Nidhi Harishkumar	Bhavnagar
LM/28515	Dr. Mehta Dhruvin Jayeshkumar	Ahmedabad
LM/28516	Dr. Satapara Darshan Jadavjibhai	Ahmedabad
LM/28517	Dr. Koyani Darshan Lakshmanbhai	Ahmedabad
LM/28518	Dr. Tamboliya Gautam Harishbhai	Ahmedabad
LM/28519	Dr. Chandak Amit Abhaykumar	Ahmedabad
LM/28520	Dr. Patel Sandip Dahyabhai	Ahmedabad
LM/28521	Dr. Patel Trupti Dipakbhai	Ahmedabad
LM/28522	Dr. Gandhi Darpan Pankajkumar	Ahmedabad
LM/28523	Dr. Pargi Rajesh Kanubhai	Ahmedabad
LM/28524	Dr. Ribadiya Nirav Chaturbhai	Ahmedabad
LM/28525	Dr. Solanki Anil Maganbhai	Ahmedabad
LM/28526	Dr. Sinol Hinalben Arvindkumar	Ahmedabad
LM/28527	Dr. Patel Jaymin Nareshkumar	Ahmedabad
LM/28528	Dr. Patel Ruchir Saurabhkumar	Ahmedabad
LM/28529	Dr. Patel Yesha Ruchirbhai	Ahmedabad
LM/28530	Dr. Sarda Praveen Kishanchand	Ahmedabad
LM/28531	Dr. Desai Kartik Yashvantkumar	Ahmedabad
LM/28532	Dr. Patel Kirtan Jitendrakumar	Ahmedabad
LM/28533	Dr. Gohil Ritesh Popatbhai	Ahmedabad
LM/28534	Dr. Jain Shubhi Pradipkumar	Ahmedabad
LM/28535	Dr. Patel Dhaval Babubhai	Ahmedabad
LM/28536	Dr. Patel Mansi Jayantibhai	Ahmedabad
LM/28537	Dr. Bhojwani Deepak Narain	Ahmedabad
LM/28538	Dr. Bhojwani Nisha Deepak	Ahmedabad
LM/28539	Dr. Parikh Aditya Kandarpbhai	Ahmedabad
LM/28540	Dr. Parikh Shailee Aditya	Ahmedabad



## BRANCH ACTIVITY

### AMRELI

23-03-2019 "Approach to congenital and paediatric limb deformities" by Dr. Rohan Parwani.

### GANDHIDHAM

02-03-2019 to Blood Donation Camp. Total 653 units were collected.

31-03-2019

### GODHRA

14-03-2019 "Understanding Menopause - Case based Approach" by Dr. Archana Dwivedi.

26-03-2019 Missing links for improving the quality of kangaroo mother care & breast milk feeding in private practice" by Dr. Shashiben Vani, Dr Parag Dagli, Dr Nitin Trivedi & KMC foundation.

### JETPUR

29-03-2019 "Endovascular Treatment for Neurological Diseases" by Dr. Gaurang Vaghani.

"Management of Accidental Injuries" by Dr. Sagar Chudasama.

30-03-2019 "Endovascular Treatment of Neurological Diseases" by Dr. Gaurav Vaghani.

"Management of Accidental Injury" by Dr. Sagar Chudasama.

16-04-2019 "What is new in fluid therapy" by Dr. Naresh Bharasara.

"Raised intracranial pressure-management and complication" by Dr. Sachin Bhimani.

### KALOL

26-03-2019 "Recurrent pregnancy loss" by Dr. Harshad D. Vaidya.

"How to handle emergency & common ENT emergency" by Dr. Vinod C. Shah. Total 40 doctors were attended.

**MORBI**

- 08-03-2019 "ECMO- The ultimate Cardiorespiratory Support" by Dr. Bhavin M. Gor.  
"Endovascular treatment for neurological diseases" by Dr. Gaurang Vaghani.  
Womens Day celebration. Total 28 doctors were attended.
- 14-03-2019 "Doctors as a entrepenuer, how to develop and maintain successful clinic practice" by Dr. Piyush Borkhatariya.  
"Case discussions in bronchoscopy" by Dr. Alkesh Patel.  
Total 18 members were attended.
- 24-03-2019 "Diagnosis of TB, Recent Challenges and updates" by Dr. Dhiren Tanna. Total 21 members were attended.
- 27-03-2019 World TB Day.  
"Approach to a child with jaundice" by Dr. Avval K. Sadikot.  
"Case discussion of Brucellosis" by Dr. Manish A. Sanariya.
- 29-03-2019 "Vedio presentation on management of routine and complex GI surgeries" by Dr. Karik Sutariya.  
"Lets fight obesity – an insight of weight loss surgery" by Dr. Mehul Vikani. Total 47 members were attended.

**NADIAD**

- 06-03-2019 "Thyroid Cancers - What A Physician And Surgeon Must Know" by Dr. Aditya Joshipura.  
"An Approach to Breast Cancer" by Dr. Mansi Shah.  
"Tomotherapy - A New Weapon in war against Cancer" by Dr. Samir Batham. Total 70 members attendance.

**SIDHPUR**

- 27-03-2019 "Case based discussion on LFT by Dr Tejas Modi.
- 04-04-2019 "FNAC in thyroid cases" by Dr Ilesh Safi.  
"Interpretation of CBC" by Dr Vijay Prajapati.

**ATTENTION PLEASE !!**

The office has received back News bulletins of the following members from Postal department with note as "Left", "Insufficient address" etc. The concerned member/friends are requested to inform the office immediately with change of address, L.M.No. & Local Branch

L.M. No.	NAME	BRANCH
LM/21416	Dr. Lakum Yuvraj Jasubha	Ahmedabad
LM/04582	Dr. Mysorewala Girish I.	Ahmedabad
LM/15527	Dr. Patel Himmatbhai Pushabhai	Ahmedabad
LM/19270	Dr. Patel Samir Ghanshyambhai	Ahmedabad
LM/13018	Dr. Patel Snehal Maheshbhai	Ahmedabad
LM/11851	Dr. Pavra Jayesh Bhikhabhai	Ahmedabad
LM/24567	Dr. Ramwani Mitesh Gautambhai	Ahmedabad
LM/15115	Dr. Shah Jitendra Indulal	Ahmedabad
LM/05105	Dr. Shaikh Gulhamid G.	Ahmedabad
LM/15217	Dr. Patel Baldev Hargovandas	Amreli
LM/02261	Dr. Patel Bharat V.	Anand
LM/10355	Dr. Sonpal Bharat Dhirajlal	Anand
LM/26416	Dr. Patel Durgesh Jitendrabhai	Bayad
LM/09155	Dr. Dhruv Hina Vijaybhai	Bharuch
LM/06417	Dr. Tailor M.H.	Bharuch
LM/03762	Dr. Vaidya Jayprakash Babubhai	Bharuch
LM/12896	Dr. Bhuva Pravin Ramjibhai	Dhari
LM/00293	Dr. Joshi M.P.	Dhoraji
LM/00934	Dr. Buch Bakul C.	Junagadh
LM/00964	Dr. Vaishnav V R	Junagadh
LM/10529	Dr. Chhatbar Hasmukh Chimanlal	Khambhat
LM/06890	Dr. Patel Vishnubhai I.	Mehsana
LM/22231	Dr. Patel Mehul Devkaranbhai	Modasa
LM/20379	Dr. Shukla Dhruvi Yoganand	Nadiad
LM/18065	Dr. Shukla Yoganand Hiralal	Nadiad
LM/01893	Dr. Thakkar J.J.	Patan
LM/09446	Dr. Chhaniara Ashit Popatlal	Rajkot
LM/13178	Dr. Rangani Mansukh Popatbhai	Rajkot
LM/21930	Dr. Trivedi Nikhil Rajendrabha	Rajkot
LM/16187	Dr. Agrawal Rajeev	Surendranagar-Wadhwan
LM/06823	Dr. Gandhi J.C.	Surendranagar-Wadhwan
LM/17754	Dr. Modi Jigar Gopalbhai	Surendranagar-Wadhwan
LM/13388	Dr. Amirneni Jyothsna Rajendra	Vadodara
LM/16334	Dr. Bhalsod Ashish Shamjibhai	Vadodara
LM/14081	Dr. Jani Mayur Vinodray	Vadodara
LM/16029	Dr. Kachchhi Udayan Maheshkant	Vadodara
LM/19734	Dr. Patel Ravindra Babubhai	Vadodara
LM/01158	Dr. Shah Hasmukh H.	Vadodara
LM/16961	Dr. Shah Lopamudra Anantkumar	Vadodara
LM/14013	Dr. Sirajwala Habibunnisa B.	Vadodara
LM/07931	Dr. Vora Amit Madhusudan	Vadodara
LM/07205	Dr. Ganatra K.C.	Veraval





## Family Planning Centre, I.M.A. Gujarat State Branch

Indian Medical Association, Gujarat State Branch runs 9 Urban Health Centers in the different wards of Ahmedabad City.

These Centres performed various activities during the month of March-2019 in addition to their routine work. These are as under :

01-03-2019 to 31-03-2019 Intra domestic house to house survey by the centers of Ahmedabad

Rander - Surat : Mothers 540 Iron Tablet, Calcium Tablet 1000 & Children 20 Vitamin A solution were distributed

Nanpur - Surat : Mothers 2230 Iron Tablet, Calcium Tablet 670 & Children 20 Vitamin A solution were distributed

The total number of patients registered in the OPD & Family planning activities of Various Centers are as Follows :

### MARCH - 2019

No.	Name of Center	New Case	Old Case	Total Case
(1)	Ambawadi (Jamalpur Ward)	1365	590	1955
(2)	Behrampura (Sardarnagar Ward)	1840	378	2218
(3)	Bapunagar (Potalia Ward)	2431	502	2933
(4)	Dariyapur (Isanpur Ward)	2019	368	2387
(5)	Gomtipur (Saijpur Ward)	2862	697	3559
(6)	Khokhra (Amraiwadi Ward)	2721	633	3354
(7)	New Mental (Kubernagar Ward)	1424	275	1699
(8)	Raikhad (Stadium Ward)	821	382	1203
(9)	Wadaj (Junawadaj Ward)	898	292	1190
(10)	Junagadh	—	—	—
(11)	Rander-Surat	----	----	----
(12)	Nanpura-Surat	----	----	----
(13)	Rajkot	1600	807	2407



### MARCH - 2019

No.	Name of Center	Female Sterilisation	Male Sterilisation	Copper-T	Condoms (PCS)	Ocpills
(1)	Ambawadi (Jamalpur Ward)	35	—	50	21700	940
(2)	Behrampura (Sardarnagar Ward)	21	—	79	11060	1338
(3)	Bapunagar (Potalia Ward)	20	—	46	13386	260
(4)	Dariyapur (Isanpur Ward)	55	—	50	19500	1615
(5)	Gomtipur (Saijpur Ward)	35	—	78	17675	496
(6)	Khokhra (Amraiwadi Ward)	32	—	38	13200	205
(7)	New Mental (Kubernagar Ward)	06	—	1	1746	477
(8)	Raikhad (Stadium Ward)	42	—	52	567	506
(9)	Wadaj (Junawadaj Ward)	04	—	30	14000	2354
(10)	Junagadh	20	—	43	7000	240
(11)	Rander-Surat	65	—	43	2280	66 P
(12)	Nanpura-Surat	22	—	74	2040	90 P
(13)	Rajkot	19	---	18	2000	286



Homage and support to  
**India's Bravehearts**  
 Ministry of Home Affairs, Government of India

*Thank You*

No. : 113805151893143

**IMA GSB RELIEF FUND**

*For honouring the supreme sacrifice of*

**Bravehearts of CAPF**

*and supporting Bharat ke Veer Fund with,  
 a contribution of Rs. 1270000/- on 26/03/2019  
 With gratitude from the entire Home Ministry family*



Contribution to Bharat Ke Veer (PAN - AADT B5021D) is exempted under Section 80(G) of Income Tax Act vide Order No. ITBAEX/MS/80/G/2018-19/1011893497 (1) dated 31/08/2018.



Homage and support to  
**India's Bravehearts**  
 Ministry of Home Affairs, Government of India

*Thank You*

No. : 11527779526216

**IMA GSB RELIEF FUND**

*For honouring the supreme sacrifice of*

**Bravehearts of CAPF**

*and supporting Bharat ke Veer Fund with,  
 a contribution of Rs. 242000/- on 30/03/2019  
 With gratitude from the entire Home Ministry family*



Contribution to Bharat Ke Veer (PAN - AADT B5021D) is exempted under Section 80(G) of Income Tax Act vide Order No. ITBAEX/MS/80/G/2018-19/1011893497 (1) dated 31/08/2018.



### RELIEF FUND - CRPF, PULWAMA

Following IMA Local Branches / Members has donated for Relief Fund for CRPF, Pulwama

1.	IMA Deesa Branch	201000-00
2.	IMA Bharuch Branch	136701-00
3.	IMA Bilimora Branch	102000-00
4.	IMA Ahmedabad Branch	100000-00

\* \* \* \* \*

1.	Krunal Kalaria	Morbi	2100-00
2.	Dr. Madhav Math	Rapar	11000-00
3.	Dr. Bhupendra Sheth	Rapar	5000-00
4.	Dr. Hiren Karoliya	Morbi	2500-00
5.	Dr. Sunil Shrotriya	Bhaurch	1000-00
6.	Dr. Ketan Doshi	Bharuch	1000-00
7.	Dr. Rupa Doshi	Bharuch	1000-00

\* \* \* \* \*

### IMA End TB Initiative C.M.E. on Tuberculosis

Sr. No.	Branch	District	Date of C.M.E.
1.	Ahmedabad	Ahmedabad	24-03-2019
2.	Bhavnagar	Bhavnagar	24-03-2019
3.	Gandhidham	Kutchh	24-03-2019
4.	Junagadh	Junagadh	24-03-2019
5.	Mehsana	Mehsana	24-03-2019
6.	Morbi	Morbi	24-03-2019
7.	Navsari	Navsari	24-03-2019
8.	Porbandar	Porbandar	24-03-2019
9.	Godhra	Panchmahal	27-03-2019



The Most Awaited Event  
71st Annual Conference of I.M.A., G.S.B.



**GIMACON 2019**  
THE DELTIN, DAMAN



Hosted by I.M.A. Daman

( In Association with Vapi Silvassa Valsad Bilimora and Navsari Branch )

**12th & 13th October**

**Early Bird Registration  
Starts From 12<sup>th</sup> April 2019**



**Organizing Chairmen**

Padmashree Dr. S.S.Vaishya | Dr. Bijal Kapadia

**Organizing Secretaries**

Dr. Brijal Patel | Dr. Samir Halpati



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**GIMACON 2019**  
THE DELTIN, DAMAN

Hosted by I.M.A. Daman

( In Association with Vapi Silvassa Valsad Bilimora and Navsari Branch )



**12th & 13th October**

REGISTRATION FORM

Name of Member / Spouse : .....

Address for Communication : .....

City : ..... State : ..... Pin : .....

Email : ..... M.: .....

Category of Registration : .....

(Single IMA Member / Spouse / RC - G.P. / RC - Consultant / Patron / PG Student / UG Student / NRI)

G.M.C. / M.C.I. Registration Number : .....

IMA Membership Number / Branch : .....

Details of accompanying person, if any (Name, Age)

1. ....

2. ....

3. ....

DD / Cheque in favor of Daman Medical Association-GIMACON 2019 payable at Daman.

Cash / D.D. / Cheq. No. .... Drawn on Bank .....

Branch ..... Amount .....

(Please write your name and mobile number behind the cheque)

Kindly send a Confirmation message to below mentioned mobile number once you have sent your payment.

Organizing Chairmen

Dr.S.S.Vaishya

Dr. Bijal Kapadia

C/O Life Care Multispeciality Hospital

Near Dhobi Talav,

Khariwad, Nani Daman,

Daman - 396 210.

Contact : +91-98251 12662 / +91-98251 12133

Email : gimacondaman@gmail.com



The Most Awaited Event  
71st Annual Conference of I.M.A., G.S.B.



**GIMACON 2019**  
THE DELTIN, DAMAN

Hosted by I.M.A. Daman

( In Association with Vapi Silvassa Valsad Bilimora and Navsari Branch )



**12th & 13th October**

REGISTRATION FEES

Category	From 12 <sup>th</sup> April to 11 <sup>th</sup> July 2019
Delegate	2000/-
Accompanying Person / Spouse	2000/-
RC - G.P.	5000/-
RC - Consultant	10000/-
Patron	15000/-
PG	1500/-
UG	1000/-
NRI	100 \$

Payment Options

NEFT Details

Bank: IDBI Bank

Name: Daman Medical Association  
-GIMACON 2019

A/c No: 0318102000004831

IFSC: IBKL0000318

Address: 9/120 Navi ORT Nani Daman  
Daman - 396 210.

DD/Cheque

DD / Cheque in favor of  
Daman Medical Association

GIMACON 2019

payable at Daman.

Dr. Bijal Kapadia

C/O Life Care Multispeciality Hospital  
Near Dhobi Talav, Khariwad, Nani Daman,  
Daman - 396 210.

Contact : 98251 12662 / 98251 12133



## NEWS CLIP

## ‘બુઝુર્ગો કા હમસફર’ના શતાબ્દી અવસરની ઉજવણીમાં સિનિયર સિટિઝનોની મેદની ઉમટી



સુરત : ફેમિલી ફીઝિશિયનસ સુરત દ્વારા સંચાલિત સિનિયર સિટિઝનો માટેના પ્રોજેક્ટ ‘બુઝુર્ગો કા હમસફર’ના શતાબ્દી અવસરની ઉજવણીમાં સિનિયર સિટિઝનોની મેદની ઉમટી હતી. ૧૭ માર્ચના રવિવારે ગાંધીસ્મૃતિ ભવન ખાતે યોજાયેલા આ શતાબ્દી ઉજવણી કાર્યક્રમમાં મુખ્ય મહેમાન તરીકે મહાત્મા ગાંધીજીના પ્રપૌત્રી નિલમ બેન પરીખ, ડૉ. ચોરાડીયા, ડૉ. જયેન્દ્ર કાપડીયા, ડૉ. વિનોદ શાહ, ડૉ. દિપક તોરાવાલા, ફેમિલી ફીઝિશિયનસ એસો.ના પ્રમુખ ડૉ. સ્નેહલ તલાટી અને ડૉ. સી. કે પટેલ હાજર રહ્યા હતા.

સંમિત

## મેડિકલ કોલેજમાં ‘હોલિસ્ટીક એપ્રોચ ટુ ડાયાબિટીસ’

ડૉ. શ્રીમંત શાહ ડાયાબિટીસ વિશેષજ્ઞ દ્વારા લોકોને બિમારીઓ સામે જાગૃતી માર્ગદર્શન



સાજકોટ

શહેરમાં વર્લ્ડ હેલ્થ ડેના ભાગરૂપે પી.ટી.યુ. સરકારી મેડિકલ કોલેજ ખાતે સુમન્ય વૈદ્ય પી.ટી.યુ. સરકારી મેડિકલ કોલેજ અને આઈએમએ સુમન્ય વૈદ્યમાં સંયુક્ત ઉપક્રમે સ્વાસ્થ્ય તરફ એક ડાબુ ‘સુદ્ધ બાપ ડાયાબિટીસ’ હોલિસ્ટીક એપ્રોચ ટુ ડાયાબિટીસ કાર્યક્રમનું આયોજન કરવામાં આવ્યું જેમાં ડાયાબિટીસ વિશેષજ્ઞ ડૉ. શ્રીમંત શાહ દ્વારા સંબંધે માસ દવા નહિ પેલું માનવીક ડીને શાંત સ્ત્રીને પણ ડાયાબિટીસ જેવી સંભવિત બિમારી સામે લડી શકાય છે. તેવા સલાહ-સુચનો આપવામાં આવ્યા હતા. સાપ્તસ્ય બાબાપ્રસારક વિષય



ડૉ. શ્રીમંત શાહ



તસવીર: સાગર અજર

વિવાલ્ય સાથે જોડાઈ ડૉ. શ્રીમંત શાહ દેશભરમાં ડાયાબિટીસ પર નિવેશન મેળવવા માટે સંખ્યાબંધ આયોજન કરવામાં આવે છે. કાર્યક્રમમાં મેડિકલ કોલેજના દિન ડૉ. જોરીબન, બાબાપ્રસારકના

અંજુ દોરી જેવા મહાનુભાવો ઉપસ્થિત રહ્યા હતા. અભાગ સાથેની વાતચીતમાં ડૉ. શ્રીમંત શાહને જણાવ્યું હતું કે વર્તમાન સમયમાં સમગ્ર વિશ્વમાં સ્વાસ્થ્ય સંબંધિત ડાયાબિટીસ બહુ

જ મેજર ઈસ્યું છે. ડાયાબિટીસ એક સાયલેન્ટ કિલરની માફક ઘાતક બિમારી છે. ડાયાબિટીસ વેચવામાં ડાયાબિટીસ ૧૦-૧૨ વર્ષ સુધીમાં હૃદયગત અંદરથી જ

(અનુ. આશ્રમા પાને)

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## INDIAN MEDICAL ASSOCIATION

GUJARAT STATE BRANCH

A.M.A. House, Opp. H.K. College, Ashram Road, Ahmedabad -380009

PHONE : (079) 265 87 370 Email: imagsb@gmail.com

Date: 18-2-2019

Dear Branch Secretary

I hope that this circular finds you in the best of health and spirit. In continuation of my circular A-11/HFC/LM/2019-2020, further tabulated information is given below for the revision of fees effective from 1/4/2019. Herewith I am sending the copy of I.M.A. H/Q fee schedule regarding revised fees.

Local branch share to be collected extra as per individual branch decision/resolution. Kindly note that fees at Old Rates will be accepted up to 31-3-2019 only at State Office. Thereafter the new revised rates will be applicable.

### LIFE MEMBERSHIP FEES

CATEGORY	TOTAL FEES	BR.SHAHRE	ADM.FEES INCLUDING GSB. IMA	TO BE SENT TO GSB. IMA
Single	10815 -00	790-00	{20-00}	Rs. 10025-00
Couple	16054-00	1230-00	{30.00}	Rs. 14824-00

Membership Fees by a Cheque / D.D. drawn in favour of “G.S.B. I.M.A”.

### I.M.A. COLLEGE OF GENERAL PRACTITIONERS

College of G.P	Rs. 2000-00
Life Membership	
Membership Fees along with Life Subscription of Family Medicine DD in favour of “IMACGPHQ”	
Payable at Chennai and send to us	

The above increase of fee Rs. 50.00 in Life Member every year is computed as per the resolution passed in 41<sup>st</sup> State Council at Nadiad on 12/05/1989.

Yours Sincerely

(Dr. Kamlesh B. Saini)  
Hon. State Secretary



## Tinea Unguium and Onychomycosis

Tinea unguium is clinically defined as a dermatophytic infection of the nail plate, Onychomycosis includes all infections of the nail caused by any fungus including non dermatophytes and yeasts.

The term onychomycosis is derived from the greek word onyx (nail) and mykes (fungus). Tinea unguium can be caused by dermatophytes most commonly *Trichophyton rubrum*, *T. mentagrophytes* var. *interdigitale* and *Epidermophyton floccosum*. Dermatophyte nail infections are more common in men than in women. Other contributory factors for tinea unguium are poor peripheral circulation, trauma to the nails, old age, smoking, narrow shoes and hyperhidrosis.

### Clinical features

Onychomycosis has been divided into four clinical types

- 1) Distal and lateral subungual onychomycosis (DLSO)
- 2) Proximal subungual onychomycosis (PSO)
- 3) White superficial onychomycosis (WSO)
- 4) Total dystrophic onychomycosis (TDO)

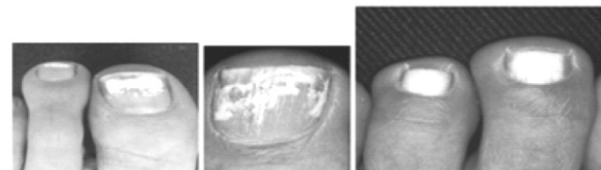
### Distal and lateral subungual onychomycosis

It is the most common type accounting for 90% of tinea unguium. Toenails are commonly involved than fingernails. It starts by invasion of the stratum corneum of the hyponychium of the distal nail bed or the lateral nail fold. Subsequently, the infection moves proximally in the nail bed and invades the ventral surface of the nail plate. Subungual hyperkeratosis occur because of the hyperproliferative reaction of the nail bed in response to the infection.



## White superficial onychomycosis

This is the second most common type of onychomycosis. In this type dorsal surface of the nail plate is affected primarily. It is characterised by well circumscribed powdery white patches away from the free edge of the nail. Ultimately the whole surface of the nail plate may be affected. The surface of the nail may be rough and friable.



## Proximal Subungual Onychomycosis

It is the least Common Variant of Onychomycosis. The first clinical sign is a whitish to brownish area on the proximal part of the nail plate. This area gradually enlarges to affect entire nail. This rare type is an early indicator of HIV infection and is also associated with peripheral vascular compromise.



## Total dystrophic onychomycosis

The invasion of the whole nail plate results in gross and total destruction of nail.

### Treatment

- **Topical treatment**
  - 5% amroline lacquer (To be applied once weekly)
  - 8% ciclopirox nail lacquer (can be applied daily)
  - 28% tioconazole



### • Oral treatment

- Terbinafine (Fingernails : 250mg/day for 6 weeks  
Toenails : 250mg/day for 12 weeks)
- Fluconazole (Fingernail : 150-300mg/week for 3-6months  
Toenails : 150-300mg/week for 6-12 months)
- Itraconazole (Fingernails : 200mg/day for 2 months  
Toenails : 200mg/day for 3 months)
- Griseofulvin (Fingernails : 500 mg/day for 6 months  
Toenails : 500/day for 12 months)

### Adjuvant treatments

Surgical or chemical nail avulsion may be useful in patients with severe onycholysis, extensive nail thickening or longitudinal streaks or 'spikes' in the nail. These nail changes can be caused by a granulated nidus of infection (dermatophytoma), which responds poorly to standard courses of medical therapy.

To improve treatment outcomes and prevent recurrence, nails should be cut short and kept clean. The feet need to be dried completely following a bath or shower. Recognizing and improving chronic health conditions (e.g., controlling diabetes, quitting smoking, etc.) may also affect the outcome of therapy. It would be appropriate to discard, or perhaps 'rest,' old pairs of shoes, once cure of onychomycosis has been achieved.

**Dr Maitreyi Patel**

Consultant Dermatologist and Cosmetologist  
Ahmedabad



## WMA DECLARATION OF SEOUL ON PROFESSIONAL AUTONOMY AND CLINICAL INDEPENDENCE

The WMA reaffirms the Declaration of Madrid on professionally-led regulation.

The World Medical Association recognises the essential nature of professional autonomy and physician clinical independence, and states that:

1. Professional autonomy and clinical independence are essential elements in providing quality health care to all patients and populations. Professional autonomy and independence are essential for the delivery of high quality health care and therefore benefit patients and society.
2. Professional autonomy and clinical independence describes the processes under which individual physicians have the freedom to exercise their professional judgment in the care and treatment of their patients without undue or inappropriate influence by outside parties or individuals.
3. Medicine is highly complex. Through lengthy training and experience, physicians become medical experts weighing evidence to formulate advice to patients. Whereas patients have the right to self-determination, deciding within certain constraints which medical interventions they will undergo, they expect their physicians to be free to make clinically appropriate recommendations.
4. Physicians recognize that they must take into account the structure of the health system and available resources when making treatment decisions. Unreasonable restraints on clinical independence imposed by governments and administrators are not in the best interests of patients because they may not be evidence based and risk undermining the trust which is an essential component of the patient-physician relationship.
5. Professional autonomy is limited by adherence to professional rules, standards and the evidence base.
6. Priority setting and limitations on health care coverage are essential due to limited resources. Governments, health care funders (third party payers), administrators and Managed Care organisations may interfere with clinical autonomy by seeking to impose rules and



limitations. These may not reflect evidence-based medicine principles, cost-effectiveness and the best interest of patients. Economic evaluation studies may be undertaken from a funder's not a users' perspective and emphasise cost-savings rather than health outcomes.

7. Priority setting, funding decision making and resource allocation/limitations processes are frequently not transparent. A lack of transparency further perpetuates health inequities.
8. Some hospital administrators and third-party payers consider physician professional autonomy to be incompatible with prudent management of health care costs. Professional autonomy allows physicians to help patients make informed choices, and supports physicians if they refuse demands by patients and family members for access to inappropriate treatments and services.
9. Care is given by teams of health care professionals, usually led by physicians. No member of the care team should interfere with the professional autonomy and clinical independence of the physician who assumes the ultimate responsibility for the care of the patient. In situations where another team member has clinical concerns about the proposed course of treatment, a mechanism to voice those concerns without fear of reprisal should exist.
10. The delivery of health care by physicians is governed by ethical rules, professional norms and by applicable law. Physicians contribute to the development of normative standards, recognizing that this both regulates their work as professionals and provides assurance to the public.
11. Ethics committees, credentials committees and other forms of peer review have long been established, recognised and accepted by organised medicine as ways of scrutinizing physicians' professional conduct and, where appropriate, may impose reasonable restrictions on the absolute professional freedom of physicians.
12. The World Medical Association reaffirms that professional autonomy and clinical independence are essential components of high quality medical care and the patient-physician relationship that must be preserved. The WMA also affirms that professional autonomy and clinical independence are core elements of medical professionalism.

Courtesy IMA HQs



### WMA STATEMENT ON GENDER EQUALITY IN MEDICINE

Adopted by the 69th WMA General Assembly, Reykjavik, Iceland, October 2018

#### PREAMBLE

1. The WMA notes the increasing trend around the world for women to enter medical schools and the medical profession, and believes that the study and the practice of medicine must be transformed to a greater or lesser extent in order to support all people who study to become or practice as physicians, of whatever gender. This is an essential process of modernization by which inclusiveness is promoted by gender equality. This statement proposes mechanisms to identify and address barriers causing discrimination between genders.
2. In many countries around the world, the number of women studying and practicing medicine has steadily risen over the past decades, surpassing 50% in many places.
3. This development offers opportunities for action, including in the following areas:
  - Greater emphasis on a proper balance of work and family life, while supporting the professional development of individual physicians.
  - Encouragement and actualization of women in academia, leadership and managerial roles.
  - Equalization of pay and employment opportunities for men and women, the elimination of gender pay gaps in medicine, and the removal of barriers negatively affecting the advancement of female physicians.
4. The issue of women in medicine was previously recognized in the WMA Resolution on Access of Women and Children to Health Care and the Role of Women in the Medical Profession which, among other things, called for increased representation and participation in the medical profession, especially in light of the growing enrolment of women in medical schools. It also called for a higher growth rate of membership of women in National Medical Associations (NMAs) through empowerment, career development, training and other strategic initiatives.

#### RECOMMENDATIONS

Increased presence of women in academia, leadership and management roles.





5. National Medical Associations/Medical Schools/Employers are urged to facilitate the establishment of mentoring programs, sponsorship, and active recruitment to provide medical students and physicians with the necessary guidance and encouragement necessary to undertake leadership and management roles.
6. NMA's should explore opportunities and incentives to encourage both men and women to pursue diverse careers in medicine and apply for fellowships, academic, senior leadership and management positions.
7. NMA's should lobby for gender equal medical education and work policies.
8. NMA's should encourage the engagement of both men and women in health policy organizations and professional medical organizations.

#### Work-Life Balance

9. Physicians should recognize that an appropriate work-life balance is beneficial to all physicians, but that women may face unique challenges to work-life balance imposed by societal expectations concerning gender roles that must be addressed to solve the issue. Healthcare employers can show leadership and help tackle this imbalance by:
  - Ensuring women who go on maternity leave are able to access all their rights and entitlements;
  - Introducing programmes which encourage men as well as women to take parental leave, so that women are able to pursue their careers and men are able to spend important time with their families.
10. Hospitals and other places of employment should strive to provide and promote access to high quality, affordable, flexible childcare for working parents, including the provision of onsite housing and childcare where appropriate. These services should be available to both male and female physicians, recognizing the need for a better work-life balance. Employers should provide information on available services which support the compatibility of work and family.
11. Hospitals and other places of employment should be receptive to the possibility of flexible and family-friendly working hours, including part-time residencies, posts, and professional appointments.



12. There is a need for increased research on alternative work schedules and telecommunication opportunities that will allow flexibility in balancing work-life demands.
13. NMA's should advocate for the enforcement and, where necessary, the introduction of policy mandating appropriate paid parental leave and rights in their respective countries.
14. Medical workplaces and professional organisations should have fair, impartial and transparent policies and practices to give all physicians and medical students equal access to employment, education and training opportunities in medicine.

#### Pregnancy and Parenthood

15. It should be illegal for employers to ask applicants about pregnancy and/or family planning in relation to work.
16. Employers should assess the risks to pregnant physicians and their unborn children, when a physician has recently given birth and when she is breastfeeding. Where it is found, or a medical practitioner considers, that an employee or her child would be at risk were she to continue with her normal duties, the employer should provide suitable alternative work for which the physician should receive her normal rate of pay. Physician should have the right to not work night shifts or on-call shifts during the later part of pregnancy, without negative consequences on salary, employment or progression in residency.
17. Pregnant physicians should have equal training opportunities in post-graduate training.
18. Parents should have the right to take adequate parental leave without negative consequences on their employment, training or career opportunities.
19. Parents should have the right to return to the same position after parental leave, without the fear of termination.
20. Employers and training bodies should provide necessary support to any physician returning after a prolonged period of absence including parental, maternity and elder-care leave.
21. Mothers should be able to breastfeed (or be given protected time for breast pumping) during work hours, within the current guidelines from the WHO.



22. Workplaces should provide adequate accommodation for women who are breastfeeding including designated areas for breastfeeding, breast pumping, and milk storage, which are quiet, hygienic, and private.

#### Changes in organisational culture

23. The medical profession and employers should work to eliminate discrimination and harassment on the basis of gender and create a supportive environment that allows equal opportunities for training, employment and advancement.
24. Family friendliness should be part of the organizational culture of hospitals and other places of employment.

#### Workforce planning and research

25. NMAs should encourage governments to take the increasing number of women entering medicine into consideration in the context of long-term workforce planning. A diverse workforce is beneficial to the health care system and to patients. Organizations delivering healthcare should focus on ensuring systems are appropriately resourced to ensure that all those working within them are able to deliver safe care to patients and are appropriately and equitably rewarded. Governments should also work to counteract negative attitudes and behaviour, bias, and/or outdated norms and values from organizations and individuals.
26. NMAs should encourage governments to invest in research to identify those factors that drive women and men to choose certain fields of specialization early on in their medical education and training and strive to address any identified barriers in order to achieve equal representation of men and women in all fields of medicine.
27. NMAs should encourage governments and employers to ensure that men and women receive equal compensation for commensurate work and strive to eliminate the gender pay gap in medicine

Courtesy IMA HQs



### Central Working Committee meeting at Puri, Odisha



\* \* \* \* \*

### Installation Ceremony of new team Himatnagar Branch





Felicitation of Dr. Anil J. Nayak I/C Vice Chancellor, HNGU



Felicitation of Dr. Anil J. Nayak I/C Vice Chancellor, HNGU





Felicitation of Dr. Anil J. Nayak I/C Vice Chancellor, HNGU



P.P.S. Zonal Educative Seminar Nadiad Branch





**CME on END TB Initiative Ahmedabad**



\* \* \* \* \*

**CME on END TB Initiative Bhavnagar**



**CME on END TB Initiative Gandhidham**



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**CME on END TB Initiative Godhara**





**CME on END TB Initiative Junagadh**



\* \* \* \* \*

**CME on END TB Initiative Mehsana**



**CME on END TB Initiative Morbi**



\* \* \* \* \*

**CME on END TB Initiative Navsari**





**CME on END TB Initiative Porbandar**



\* \* \* \* \*

**World TB Day IMA (HQs)**



**TB Day Ahmedabad Branch**



**Celebration of Holi**





**Seminar Navsari Branch**



\* \* \* \* \*

**CME Vadodra Branch**



**CME Nadiad Branch**



\* \* \* \* \*

**CME Morbi Branch**







### IMA is against Acupuncture as a System of Medicine

From

The Indian Medical Association,  
New Delhi.

To

The Secretary of Health and Family Welfare,  
Union of India.

Sir,

Sub : Regarding the order of the Ministry of Health and Family Welfare, Union of India, bearing No.U-11018/03/2018-HR dated 21.02.2019 relating to recognition of acupuncture as a system of health care therapy.

Ref: Objection of the Indian Medical Association-reg.

The Indian Medical Association, is a Professional Association of qualified Modern Medical Practitioners all over India. In the year 2003, the Government of India has considered the claim of recognition to various therapies including Acupuncture, as directed by the High Court of Delhi as per orders dated 18.11.1998 in CWP NO. 4015/1996 & OM NO.8468, by constituting a standing committee of experts under the chairmanship of Director General, Indian Council of Medical Research & members drawn from various fields of medicine. The said committee recommended, practice of Acupuncture and Hypnotherapy, only as a qualified mode of therapy which could be allowed to be practiced by the existing registered practitioners. Acupuncture has failed to qualify the test of the said committee as a separate system of medicine.

The Ministry of Health and Family Welfare Government of India vide G.O NO.I 4015/25/96-U&H(R)(Pt) dated 25.11.2003 accordingly has issued orders, recommending Acupuncture & Hypnotherapy only as a modes of therapy, which can be allowed to be practiced by registered practitioners or appropriately trained persons. Acupuncture was not given independent medical status since acupuncture failed to qualify the test.

The Government of India vide order of the Ministry of Health and Family Welfare, Union of India, bearing No.U-11018/03/2018-HR dated



21.02.2019 has declared Acupuncture as an independent system of medicine of Health care, without following the due procedures and tests for recognizing a system of medicine. In the order of the Ministry of Health and Family Welfare, Union of India, bearing No.U-1101 8/03/2018-HR dated 21.02.2019 the consideration to accept acupuncture as an independent system of medicine was considered by an inter departmental committee contrary to the existing practice of referring the matter for consideration by a committee under the Indian council of medical research.

It is submitted that, to fulfill the claim of an independent system of medicine it is required that, the respective system should have its own pharmacopeia, which the acupuncture is not having. It is for this reason that, in the year 2003 the Government of India vide order no. G.O NO.I4015/25/96-U&H(R)(Pt) dated 25.11.2003, denied acupuncture the status of independent system of medicine and had only permitted to continue as a mode of therapy to be practiced by competent registered medical practitioners.

It is strange that, a mode of therapy which was not having a pharmacopeia in the year 2003 and which was denied independent system of status suddenly in the year 2019 is granted the status of independent system of medicine.

The Indian medical Association submits that, if acupuncture is given independent medical practice without qualifying the test for any independent system of medicine, or without any duly prescribed qualification and curriculum, which does not exist in India at present, it will amount to large scale quackery endangering the public health against the protection of right to health prescribed by the Constitution of India.

Therefore, the Indian Medical Association humbly request the Government of India to reconsider the order of the Ministry of Health and Family Welfare, Union of India, bearing No.U-11018/03/2018-HR dated 21.02.2019 and permit only the registered medical practitioners who have undergone the prescribed training in acupuncture to practice acupuncture.

Courtesy IMA HQs



### IMPORTANT STATUTORY INFORMATION

Every IMA Branch State/Local must obtain following Statutory Certificates/Registrations for their respective Tax Compliance. Salient points are furnished for your perusal:

#### **You have to Register yourself with the local Registrar of Societies 12A Registration for Trust or NGO**

12A registration is one time exemption obtained by most Trusts, right after incorporation to be exempted from paying income tax. Trusts and NGOs having 12A registration enjoy exemption from paying income tax on the surplus income of the Trust or NGO. Income tax exemption is available for all non-profit NGOs. Hence, it is important for all Trusts, NGOs and other Not-for-Profit organizations to be aware of Section 12A of Income Tax Act and obtain the same, soon after incorporation of the Trust or NGO. In this article, we look at the procedure for obtaining 12A registration in India.

#### Applying for 12A Registration

Charitable Trusts, Religious Trusts, Societies and Section 8 Companies claiming exemption under Section 11 and 12 of the Income Tax Act, must obtain 12A registration. Private or family trusts are not allowed such exemptions and cannot obtain 12A registration. To obtain 12A Registration, an application for registration of charitable or religious trust or institution under clause (aa) of subsection (1) of section 12A of the Income-tax Act, 1961 must be made to the Commissioner of Income Tax along with the following documents:

Application for 12A Registration in Form 10A.

List of name and address of the Trustees.

Copy or Registration Certificate with Charity Commissioner or copy of application.

Notarized True Copy of the Trust Deed.

Copy of PAN Card of the Trust.

Copy of PAN Card of the Trustees.

#### **Apply for PAN**

PAN, or permanent account number, is a unique 10-digit alphanumeric identity allotted to each taxpayer by the Income Tax Department under the supervision of the Central Board of Direct Taxes. It also serves as an identity proof. PAN is mandatory for financial transactions such as receiving taxable salary or professional fees, sale or purchase of assets above specified limits, buy mutual funds and more.



It is mandatory for the bank account to have a Pan card associated with it, as most of the transactions are linked to PAN Card being provided only.

What can happen if a PAN Card number is not linked?

Opening a fixed deposit account or cash deposit for amount greater than Rs. 50,000 at any bank requires the Pan card number. Failure to submit the same would result in TDS getting deducted at 20% if the interest amount of FD account exceeds Rs. 10,000 which is higher than the current 10%.

Since many mutual funds are bought through your bank as the distributor, transactions exceeding Rs. 50,000 for equities/mutual fund/debentures/bonds will be rejected.

Apply for TAN

TAN stands for Tax Deduction and Collection Account Number. It is a ten digit alphanumeric number that allotted to those who are supposed to deduct tax at source or TDS. TAN number or TAN registration is very important for State / Local Branches of IAAA FOR deducting tax at source and is required to be quoted in TDS.

Penalty for Failure to Deduct Tax at Source

If a person who is required to deduct tax at source fails to deduct tax, wholly or partly or failure to pay wholly or partly, then the taxpayer can be held liable to pay a penalty. Penalty for failure to deduct tax at source is an amount equal to tax not deducted or tax not paid.

Taxpayers having a TAN (Tax Deduction and Collection Account Number) must file TDS return every quarter. If a taxpayer fails to file TDS return on or before the due date, then a fine of Rs.200 per day is applicable until the day to which the delay in filing of TDS return continues. The amount of penalty for late filing of TDS return can however not exceed the amount of TDS due.

Input Tax Credit under GST - Conditions To Claim

A registered person will be eligible to claim Input Tax Credit (ITC) on fulfilment of the following conditions:

Possession of a tax invoice or debit note or document evidencing payment Receipt of goods and/or services

goods delivered by supplier to other person on the direction of registered person against a document of transfer of title of goods/

Furnishing of a return

Courtesy IMA HQs



## UTILITY PAGES

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### POLICE

Police Control Room .....	25630100
Police Commissioner .....	25633636
P.R.O. To Commissioner.....	25633333
Navrangpura.....	26563711
Saherkotda .....	22111632

### POLICE STATIONS

Amraiwadi .....	22770280
Khadia .....	22142828
Bapunagar .....	22700585
Danilimda .....	25320153
Dariapur .....	22160906
Ellisbridge.....	26578202
Ghatlodia .....	27489127
Gomtipur .....	22941921
Haveli .....	25392647
Kagdapith.....	25454446
Kalupur .....	22167530
Karanj .....	25507580
Madhavpura .....	25632100
Maninagar .....	25460089
Meghaninagar.....	22681555
Naranpura .....	27472043
Naroda .....	22821480
Navrangpura.....	26440698
Odhav .....	22871091
Rakhial.....	22743609
Sabarmati.....	27517887
Saherkotda .....	22927072
Sardarnagar .....	22864345
Satellite.....	26860333
Shahibaug .....	22868025
Shahpur .....	25600545
Sola Police Station .....	27664590
Vatva .....	25710074

Vatva G1DC .....	25830004
Vejalpur .....	26810614
Women's Police Station.....	25507967

### FIRE STATIONS

Gomtipur .....	22776996
Jamalpur .....	25397959
Jashodanagar .....	32981439
Manianagar .....	25470221
Naroda .....	22200715
Odhav .....	22875434
Panchkuva .....	22120388
Sabarmati.....	27507302
Chief Fire Officer HQ .....	22148466

### TELEPHONE SERVICES

General Inquiry .....	197
Morning Alarm.....	116 + Time
Fault Repair .....	.....Exchange Code + 2198
BSNL Customer Service Centre (Land Line) .....	1500
BSNL Customer Service Centre (Mobile).....	9426024365
BSNL Phonogram / (India/International).....	1585
BSNL Trunk Booking .....	1580
BSNL Trunk Booking International .....	1586
BSNL - Railwaypura .....	22124660
Air Tel - Ashram Road .....	40072668/ .....9898954321
Hutch Ltd. - Navrangpura .....	9825098250
Idea Cellular Ltd. - Stadium .....	9824012345
Reliance Infocomm Ltd .....	30337777
Tata Teleservices Ltd - Ellisbridge .....	92270001 21
<b>AMBULANCE SERVICES</b> Ambulance - Danapith .....	22148465



Ambulance - AMC Danapith .....	22148468
Emergency Medical Council of Ahmedabad [EMS] - Ellisbridge.....	1056
Mission Life India -Drive In .....	26854849
Mission Life India - 24 Hrs .....	9825006000
Navdeep Emergency Service Income Tax - Day .....	27543333
- Night .....	9825029977
Sadvichar Parivar Civil Hospital .....	22680450

### EYE BANKS / HOSPITALS

Asopalav Eye Hospital -Shahibaug .....	22865537
CH.Nagri Eye Bank -Ellis bridge.....	26466724
C.S.Samaria Red Cross Int.Eye Bank Thaltej.....	1053 & 27450633
Hargovandas Prabhudas Sadvicriar ParivarEye Hospital -Naroda.....	22811476
Lions Karnavati Shantaben Vishnubhai Patel Eye Hospital -Ognaj .....	952717244052
M and J Inst. of Ophthalmology Eye Bank-Civil Hospital .....	22680314

### CIVIC SERVICE CENTRE

East Zone .....	32982474
Lal Darwaja.....	32091243
Law Garden .....	32981247
Maninagar .....	32981246
North Zone .....	32982471
West Zone .....	32981242

### AMC CONTROL ROOM (FOR COMPLAINTS)

Main .....	25353858/25353717
West Zone .....	27550910

North Zone .....	22801182
East Zone.....	22970422-24
New West Zone Bodakdev .....	32981396
Central Zone .....	25353717

### TELEVISION

Aaj Tak -Panchvati .....	26405253
CNBC -S G Road .....	40040825
Doordarshan -Thaltej .....	26853025
ETV Gujarati -Bodakdev .....	26871210
NDTV -C G Road .....	9825030011
Set India Ltd (Sony TV) Stadium .....	26565908/9825329091
Star News -S G Road .....	26872529
Zee News -Satellite .....	26922717
TV 9 .....	26810999

### PRINT

Business Standard Ltd -Ellisbridge .....	26577772
Chitralakha Group -Parimal Garden .....	26461711
Divya Bhaskar -S G Highway .....	39888850
Gujarat Samachar -Khanpur .....	30410000
Hindustan Times -Navrangpura .....	26560037
India Today -Panchvati .....	26569156/26560393
Indian Express -Bodakdev .....	26872481
Jaihind Press -Navrangpura .....	26587053
Jansatta -Bodakdev .....	26873995
Mumbai Samachar -Panchvati .....	26421783
Press Information Bureau -Bhadra .....	25507217
Press Trust of India Ltd. -Navrangpura .....	26430507
Rajasthan Patrika C.G. Road .....	30611565



Sambhav-Bodakdev.....26873914  
 The Sandesh Ltd.  
 -Bodakdev .....40004000  
 The Times of India Fadia  
 Chambers .....26553300/26582527  
 The Times of India  
 - Sakar 1 .....26554455  
 The Times of India  
 - Vejalpur.....26761495  
 Young Leader  
 -Khanpur .....25502999

**RADIO**

All India Radio  
 - Income Tax .....27542672  
 My FM-S G Highway .....26927943  
 Radio City  
 - S G Highway.....66119911  
 Radio Mirchi - Vejalpur.....66001100  
 Radio One.....67010013

**MEDICAL COLLEGE**

BJ.Medical College  
 - Asarwa .....22680074  
 College of Nursing  
 -Asarwa .....22681406  
 Suresh Brahm Kumar  
 Bhatt College  
 of Physiotherapy.....26583435  
 Smt. N.H.L. Municipal Medical College  
 Ellisbridge.....26576275  
 Institute of Kidney  
 Diseases and Research Centre  
 Asarwa .....22685601  
 U N Mehta Institute of Cardiology  
 and Research Centre  
 -Asarwa.....22682395

**ENTERTAINMENT HALLS**

Dinesh Hall  
 - Ashram Road.....26582123  
 Tagore Hall - Paldi .....26575741  
 Thakorbbhai Desai Hall  
 - Law Garden .....26400651  
 Town hall - Ellisbridge.....26582092

**AIRLINES**

Airport Authority of  
 India .....22867261  
 Air India Domestic City  
 Office Ashram Road .....26585633/44  
 Laldarwaja .....25503061/2/3  
 Airport.....22869233/44  
 Airport  
 Tele-Check-in .....22850376  
 Cargo .....22869236  
International  
 Airport.....22867237/5211/9238  
 Cargo .....22862976/29292100/03  
 Jet Airways  
 Ashram Road.....27543304 to 10  
 Airport.....22866540/240  
 Cargo .....22861407/8533  
 TeleCheck-in .....22866540/240  
 Jet Lite/Sahara .....1800223020  
 ...../22858003  
 Spice Jet .....18001803333/  
 .....09871803333

**TOURIST INFORMATION CENTRE**

Goa Tourism .....0832-2438750  
 Gujarat Tourism.....26589172  
 Himachal Tourism .....27544800  
 Kerala Tourism .....18004254747  
 M P State Tourism .....26462977  
 Rajasthan Tourism .....26565187  
 Uttaranchal Tourism.....26564245

**TELEPHONE NUMBERS**

**A.M.A.**.....**2658 8775**  
**A.M.A. (Fax)**.....**2658 7498**  
**G.S.B.** .....**2658 7370**  
**S.S.S.** .....**2658 0690**

**P.P.S.**.....**2658 8929**  
**N.S.S.S.**.....**2658 5430**  
**PHY.ASSO.**.....**2657 4763**  
**A.O.G.S.** .....**2658 6426**