



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.

Phone : (079) 2658 7370 E-mail : imagsb@gmail.com Website : www.imagsb.com

OFFICE BEARERS

PRESIDENT

Dr. Chandresh S. Jardosh Surat
(M) 98791 32526

HON. STATE SECRETARY

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

IMM. PAST PRESIDENT

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

HON. JOINT SECRETARY

Dr. Shailendra N. Vora Ahmedabad

VICE PRESIDENTS

Dr. Jaswantsinh Darbar Ahmedabad Zone
Dr. Jitesh Desai Central Zone
Dr. Bhaskar Mahajan South Zone
Dr. Vinod Noticewala Surat Zone
Dr. Vinod Mehta Vadodara Zone
Dr. Naresh Joshi West Zone
Dr. Hiren Kothari Rajkot Zone

HON. ZONAL JT. SECRETARIES

Dr. Jitendra H. Shah Ahmedabad Zone
Dr. Rajnikant Patel Central Zone
Dr. Mayur N. Bhagat South Zone
Dr. Vinesh B. Shah Surat Zone
Dr. Paresh Majmudar Vadodara Zone
Dr. Kashyap C. Dave West Zone
Dr. Amit Agravat Rajkot Zone

TREASURER

Dr. Devendra R. Patel Ahmedabad

HON. ASST. SECRETARY

Dr. Bharat I. Patel Ahmedabad

GUJARAT MEDICAL JOURNAL

Editor

Dr. K. R. Sanghavi Ahmedabad

Hon. Secretary

Dr. Anil D. Patel Mehsana

SOCIAL SECURITY SCHEME

Hon. Secretary

Dr. Jitendra B. Patel Ahmedabad

COLLEGE OF G.P.

Director

Dr. Kirit C. Gadhavi Ahmedabad

PROFESSIONAL PROTECTION SCHEME

Managing Director

Dr. Bipin M. Patel Ahmedabad

ACADEMY OF MEDICAL SPECIALITY

Chairman

Dr. Vidyut J. Desai Ahmedabad

HEALTH SCHEME

Chairman

Dr. Navneet K. Patel Ahmedabad

FAMILY WELFARE SCHEME

Hon. Secretary

Dr. Jitendra B. Patel Ahmedabad

HOSPITAL BOARD OF INDIA

Chairman

Dr. Parth N. Patel Ahmedabad



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



Dear Members,
Season's Greetings,

We congratulate IMA Gandhidham Branch for successfully organised IMA PPS Educative Zonal Seminar at Gandhidham. It was very well attended by IMA members of Gandhidham-Adipur, Anjar, Bhuj and other IMA branches. As IMA GSB PPS is going to increase the indemnity cover to Rs 1 crore per year from 1st April 2020, we request our members who still not joined PPS, please be a member of PPS and take the advantage of our scheme. IMA GSB PPS is the first scheme which is going to give professional indemnity cover of Rs 1 crore per year.

Awaken India Movement at CONCORDIA 2020 on 16th February at Surat organized by IMA Surat & IMA MSN Surat with cooperation from State & National bodies in presence of National IMA President Dr. Rajan Sharma , National HSG Dr. R. V. Asokan, IMA MSN national & state leaders & Surat representatives & other office bearers.

More than 1100 medical students participated. 8 Scientific updates, 3 live workshops, MSN meetings of leaders, offbeat topics like life beyond medicine & discussion on future plans of MSN.

All students took Awaken India Pledge with NP Dr. Rajan Sharma & HSG Dr. R. V. Asokan.

IMA HQ has decided to launch a Awaken India Campaign from next month. This movement will be nationwide with following aim-

- Sensitisation of entire IMA membership.
- Sensitisation of people, political leaders, MLAs and social and cultural leaders.



- Connect State and local branches with medical college through IMA MSN.
- Take stock of status of Resident Doctors and young doctors. Strengthen IMA JDN.
- Strengthen Social Media penetration inside and outside the medical profession.

The issues of the medical profession that have been prioritised for a Nationwide Campaign starting from March 12, 2020 are violence on Doctors and hospitals as well as Quackery and Crosspathy. The uncertainties regarding EXIT exam and PG NEET of medicos are a burning issues to be addressed as well:

- Violence
- Quackery and Crosspathy
- Medical Education.

All the three issues will form the basis of the Nationwide Campaign of IMA from 12-3-2020. The Day has been chosen symbolically to mark the anniversary of The SALT MARCH by the Father of the Nation Mahatma Gandhi from Sabarmati to Dandi This was the turning point of our Freedom Struggle. The National Campaign of IMA will be no less. The challenges and opportunities remain the same.

The National President, Dr. Rajan Sharma will launch the Nationwide Campaign in New Delhi on 12-3-2020. The day will start with Homage to the Father of the Nation Mahatma Gandhi at Rajghat, New Delhi. The Campaign will extend from 12-3-2020 upto 31-3-2020.

The Campaign will involve all the State and Local Branch IMA members have to be reached and involved.

Long Live IMA.

Dr. C. S. Jardosh
(President, G.S.B., I.M.A.)

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



STATE PRESIDENT-HONY. SECY. & OFFICE BEARERS TOURS/VISIT

09-02-2020 Dr. Jitendra B. Patel, Past National President, IMA Hqs, Dr. Bipin M. Patel, Managing Director, PPS. GSB. IMA., Dr. Vinod C. Shah, Past President, Dr. Pragnesh C. Joshi, Past President, Dr. Monaben Desai, President, A.M.A attended IMA Extended Action Committee Meeting at IMA House New Delhi.

* * * * *

FUTURE CONFERENCE

IMA AMSCON 2020

IMA AMS Madhya Pradesh State Branch

Date : 19th & 20th September 2020

Venue : Jabalpur

Conference Secretariat :

Dr. Nihit Agrawal

Vijaya Memorial Medicare & Research Centre 806,
Golbazaar Jabalpur - 482 002.

M : 99936 99666

* * * * *

CONGRATULATIONS

❖ **Tirth Bhimani son of Dr. Amit Bhimani, Rajkot**

Being got 153 marks & 5536 National Rank in JEE advance exam.

* * * * *

DISCLAIMER

Opinions in the various articles are those of the authors and do not reflect the views of Indian Medical Association, Gujarat State Branch. The appearance of advertisement is not a guarantee or endorsement of the product or the claims made for the product by the manufacturer.



OBITUARY

We send our sympathy & condolence to the bereaved family

Dr. Rajendraprasad G. Upadhyay

(28-01-1954 - 02-12-2019)

Age : 65 year

Qualification : M.B.B.S.

Name of Branch : Jamnagar

* * * * *

Dr. (Mrs.) Damayantiben D. Doshi

(06-10-1939 - 08-01-2020)

Age : 80 year

Qualification : FCGP LMP GFAM

Name of Branch : Jetpur

* * * * *

Dr. Suryaprasad H. Mehta	24-09-2019	Ahmedabad
Dr. R.V. Danidharia	16-11-2019	Jamnaagr
Dr. Arvind K. Dangarwala	23-11-2019	Surat
Dr. Jaysukhlal K. Chauhan	09-12-2019	Bhavnagar
Dr. Aruna B. Ganatra	09-12-2019	Rajkot
Dr. Suresh P. Changela	11-12-2019	Jamnagar
Dr. Yogesh S. Hathi	19-12-2019	Gandhinagar
Dr. Ila G. Patel	21-12-2019	Ahmedabad
Dr. Chetankumar O. Thakkar	22-12-2019	Sidhpur
Dr. Kishorchandra R. Dodhia	25-12-2019	Wankaner
Dr. Harshadrai T. Vora	05-01-2020	Ahmedabad
Dr. Prafull V. Shah	11-01-2020	Rajkot

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/29126	Dr. Ramani Bhavesh Vitthalbhai	Surat
LM/29127	Dr. Zinzala Haresh Chhaganbhai	Surat
LM/29128	Dr. Mahakal Niralee Sandeepbhai	Navsari
LM/29129	Dr. Patel Dipika Dahyabhai	Navsari
LM/29130	Dr. Thakkar Shrijikumar Chetankumar	Sidhpur
LM/29131	Dr. Tanna Purvi Jawahar	Sidhpur
LM/29132	Dr. Gandhi Takshay Jagdishbhai	Ahmedabad
LM/29133	Dr. Parmar Hardik Kanaiyalal	Ahmedabad
LM/29134	Dr. Patel Parth Mahendrakumar	Ahmedabad
LM/29135	Dr. Salvi Nandish Satishbhai	Ahmedabad
LM/29136	Dr. Patel Hardik Sureshchandra	Ahmedabad
LM/29137	Dr. Jain Neelay Prakashchandra	Ahmedabad
LM/29138	Dr. Patel Mit Vikaskumar	Ahmedabad
LM/29139	Dr. Joshi Pratik Nareshkumar	Ahmedabad
LM/29140	Dr. Patel Nagendra Prabhudas	Ahmedabad
LM/29141	Dr. Patel Manisha Nagendra	Ahmedabad
LM/29142	Dr. Kothari Abhimanyu Deepakbhai	Ahmedabad
LM/29143	Dr. Barot Jigna Pankajkumar	Ahmedabad
LM/29144	Dr. Prajapati Amrut Gulabbhai	Ahmedabad
LM/29145	Dr. Kamdar Priyank Narendrakumar	Ahmedabad
LM/29146	Dr. Kamdar Jinal Priyank	Ahmedabad
LM/29147	Dr. Patel Devarsh Bharatbhai	Ahmedabad
LM/29148	Dr. Patel Divyesh Kiranbhai	Ahmedabad
LM/29149	Dr. Kalaria Harshil Arvindbhai	Ahmedabad
LM/29150	Dr. Patel Harshal Atulbhai	Ahmedabad
LM/29151	Dr. Patel Pinakin Sureshbhai	Ahmedabad



LM/29152	Dr. Patel Kesha Pinakin	Ahmedabad
LM/29153	Dr. Shekhawat Nikunj Priya	Ahmedabad
LM/29154	Dr. Pandya Ishan Asutosh	Ahmedabad
LM/29155	Dr. Sabnani Rajiv Kishanbhai	Ahmedabad
LM/29156	Dr. Sabnani Avani Rajivbhai	Ahmedabad
LM/29157	Dr. Merja Manthan Rameshchandra	Ahmedabad
LM/29158	Dr. Merja Apeksha Manthan	Ahmedabad
LM/29159	Dr. Modi Manasi Dhimantbhai	Bharuch
LM/29160	Dr. Patel Ashesh Bachubhai	Bharuch
LM/29161	Dr. Masani Ankur Kshitij	Bharuch
LM/29162	Dr. Patel Parimal Jayantilal	Navsari
LM/29163	Dr. Sureja Kelvin Bhagvanjibhai	Bhujkutch
LM/29164	Dr. Katharotiya Pooja	Bhujkutch
LM/29165	Dr. Patel Nishit Navneetkumar	Anand
LM/29166	Dr. Khatri Mohnish Rajeshbhai	Gandhidham
LM/29167	Dr. Khatri Mohit Rajeshbhai	Gandhidham
LM/29168	Dr. Chauhan Dishank Vasantlal	Surendranagar-Wadhwan
LM/29169	Dr. Chondigara Rohit Arvindbhai	Savarkundla
LM/29170	Dr. Qureshi Altaaf Mohd.Rafik	Savarkundla
LM/29171	Dr. Kamol Vijay Devchandbhai	Dahod
LM/29172	Dr. Bhokan Hardik Mahendrasingh	Dahod
LM/29173	Dr. Thacker Mansi Mukeshbhai	Bhujkutch
LM/29174	Dr. Sanghavi Sarju Jayeshkumar	Surendranagar-Wadhwan
LM/29175	Dr. Sanghavi Urvi Rajendrakumar	Surendranagar-Wadhwan
LM/29176	Dr. Desai Nirmalkumar Laljibhai	Palanpur
LM/29177	Dr. Kutchi Imran Abdulaziz	Botad
LM/29178	Dr. Vaniya Jaydeep Bhagvanjibhai	Bhavnagar
LM/29179	Dr. Chauhan Nayan Vinodbhai	Bhavnagar
LM/29180	Dr. Solanki Jivabhai Jahabhai	Mahuva
LM/29181	Dr. Baldha Pares Mansukhbhai	Mahuva
LM/29182	Dr. Patel Sanket Mukeshkumar	Mahuva



LM/29183	Dr. Galiya Dharmesh Vrajlal	Mahuva
LM/29184	Dr. Joshi Yatin Mahendrakumar	Vadodara
LM/29185	Dr. Patel Rachit Chandrakant	Vadodara
LM/29186	Dr. Shah Rutul Kalpeshbhai	Vadodara
LM/29187	Dr. Shah Bhavin Bhupendrakumar	Vadodara
LM/29188	Dr. Patel Maya Punambhai	Vadodara
LM/29189	Dr. Chaudhary Harsh Anilkumar	Modasa
LM/29190	Dr. Patel Divyang Dineshbhai	Surat
LM/29191	Dr. Jariwala Rohan Kiritkumar	Surat
LM/29192	Dr. Desai Rikin Navinchandra	Godhra
LM/29193	Dr. Kamodia Jinal Sanjivbhai	Godhra
LM/29194	Dr. Patel Vinay Kantilal	Valsad
LM/29195	Dr. Patel Rupal Kikubhai	Valsad
LM/29196	Dr. Gajjar Ekta Jagdishbhai	Kalol-Ng
LM/29197	Dr. Chaudhary Jigneshchandra Maknalal	Modasa
LM/29198	Dr. Gajjar Vijay Indravadan	Kalol-Ng
LM/29199	Dr. Patel Arjav Rajendrabhai	Ahmedabad
LM/29200	Dr. Shah Urvi Himanshubhai	Ahmedabad
LM/29201	Dr. Chaudhari Hardik Khumjibhai	Ahmedabad
LM/29202	Dr. Shah Henil Paragbhai	Ahmedabad
LM/29203	Dr. Shah Dhvani Henilbhai	Ahmedabad
LM/29204	Dr. Dalwadi Harsh Madhukar	Ahmedabad
LM/29205	Dr. Patel Ravi Manubhai	Ahmedabad
LM/29206	Dr. Desai Gazala Ishabhai	Ahmedabad
LM/29207	Dr. Garg Poonam Nikhilbhai	Ahmedabad
LM/29208	Dr. Dave Rucha Tarunkumar	Ahmedabad
LM/29209	Dr. Bahnsali Sureshchandra Kirtilal	Ahmedabad
LM/29210	Dr. Bhabhor Hiren Bachubhai	Dahod
LM/29211	Dr. Patel Chirag Bharatbhai	Visnagar
LM/29212	Dr. Sanghavi Nairuti Asitbhai	Palitana



BRANCH ACTIVITY

AMRELI

- 11-01-2020 "Stroke-Diagnosis and management" by Dr. Tanmay Trivedi.
"Acute kidney injury" by Dr. Nilav Shah.

GANDHIDHAM

- 04-12-2019 to Blood Donation Camps
31-12-2019 Total 500 unit of blood were collected.
05-01-2020 to Total 398 unit of blood were collected.
26-01-2020
08-01-2020 to Thalesemia Camps
19-01-2020 Total 882 sample were collected.
11-01-2020 "Obesity surgery ' how effective it is in diabetes resolution"
by Dr. Manish Khaitan.
06-02-2020 "Novel corona virus in association with health department"
by Dr. Kamlesh Upadhyay. Total 151 doctors were attended.

GODHRA

- 07-01-2020 "Screening of cancer" by Dr. Kartikeya Jain.
30-01-2020 "Approach to vascular disease and " Resent management in
DVT" by Dr. Vijay Thakore and Dr. Kushan Nanavati.

JETPUR

- 25-01-2020 "An approach to patient of Lymphoma Leukemia" by Dr.
Gautam Makadiya.
"Complication and management of spinal anesthesia" by Dr.
Rashmi M. Gohil.

KALOL

- 01-01-2020 Yoga for Abdominal problem, Constipation and Acidity.
02-01-2020 Yoga for Back Pain and Knee joint problems.
03-01-2020 Yoga for Stress, Anxiety, Depression and Insomnia.
04-01-2020 Yoga for Obesity.



- 05-01-2020 Yoga for Hypertension, Diabetes and Meditation.
 28-01-2020 "GI and Hepatobiliary Cancer update" by Dr. Chirag Desai.
 "Minimal Invasive Cardiac Surgery" by Dr. Sudhir Adalati.

MEHSANA

- 14-11-2019 Diabetes prevention and treatment awareness, slogans and banners. More than 150 patients in Rotary Hall.
 27-11-2019 "Asthma diagnosis to treatment" by Dr. Manoj Singh.
 Lecture on How Robotics is useful in surgical procedures by Dr Kamlesh Patel, He enumerate development of Robot in surgery and how the surgery becomes easy by using technology.
 11-02-2020 Seminar on recent epidemic of COVID-19 Virus in China in association with Health Department of Gujarat by Dr. Kamlesh Upadhyay. Approximately 140 members take the advantage of this lecture.

MORBI

- 05-01-2020 Annual Sports Day. More than 150 doctors and their family members were participate in different indoor and outdoor games.
 10-01-2020 "Update on Gynecology" by Dr. Rekhaben Patel, Anemia Newer drug therapy and Dr. Bhavnaben Jani, Case presentation on PPH. Total 15 doctors were participated.
 12-01-2020 Blood donation camp. Total 88 bottle blood collected.
 Health & Hygiene seminar and free checkup camp. Total 35 students and parents attended this seminar.
 19-01-2020 Free diabetes checkup camp. Total 82 peoples were benefited.
 24-01-2020 Live ENT surgical workshop "Excellent 2020". Total 133 doctors were participated.
 26-01-2020 Republic Day celebration. Total 30 doctors were participated.



- Free diabetes checkup camp. Total 60 people were benefited.
 30-01-2020 "Current issue of Corona Virus Infection in China and also in World" by Dr. Kamlesh Upadhyay. Total 45 doctors were participated.
 31-01-2020 "Endocrinology and cardiology" by Dr. Harsh Durgia Approach to a patient with suppressed TSH. Dr. Mandip Tilara. Newer guidelines to manage hypertension. Total 28 doctors were participated in this CME.
NADIAD
 08-01-2020 Government measures of monitoring and contain Corona virus related infection." by Dr Ajit Thakar.
 05-02-2020 "Community acquired pneumonia and recent scenario of Corona virus infection" by Dr. Yogesh Vaghela.

SURENDRANAGAR

- 22-01-2020 "Pyrexia of unknown origin" by Dr. Rajesh mishra.

Answer of MEDIQUIZ Published in November 2019 Issue Page No.33

- A 1. Benzhexol
- A 2. Restless leg syndrome
- A 3. β IFN, Glatiramer
- A 4. Pergolide
- A 5. Bromocriptine, pergolide (ergot derived dopamine agonists)
- A 6. Centrally acting reversible anticholinesterase
- A 7. Clozapine, Quetiapine (Note: Clozapine causes agranulocytosis)
- A 8. Decreased efficacy. (pyridoxine is a cofactor of dopa decarboxylase and increases the formation of dopamine in the periphery. This results in decrease in L-dopa's central penetration)
- A 9. Tetrabenazine
- A 10. Haloperidol



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 Jan-2020 in addition to their routine work. These are as under :

01-01-2020 to 31-01-2020 : Intra domestic house to house survey by the centers of Ahmedabad

Rander - Surat : Mothers : 3000 Iron Tablet, Calcium Tablet 1000 & Children 38 Vitamin A solution were distributed

Nanpur - Surat : Mothers : 1710 Iron Tablet, Calcium Tablet 18800 & Children 40 Vitamin A solution were distributed

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

JANUARY - 2020

No.	Name of Center	New Case	Old Case	Total Case
(1)	Ambawadi (Jamalpur Ward)	1431	532	1963
(2)	Behrampura (Sardarnagar Ward)	2476	389	2865
(3)	Bapunagar (Potalia Ward)	2934	441	3375
(4)	Dariyapur (Isanpur Ward)	2281	428	2639
(5)	Gomtipur (Saijpur Ward)	3947	516	4463
(6)	Khokhra (Amraiwadi Ward)	3142	405	3547
(7)	New Mental (Kubernagar Ward)	2052	360	2412
(8)	Raikhad (Stadium Ward)	1168	299	1467
(9)	Wadaj (Junawadaj Ward)	1235	417	1652
(10)	Junagadh	—	—	—
(11)	Rander-Surat	----	----	----
(12)	Nanpura-Surat	----	----	----
(13)	Rajkot	1616	791	2407



JANUARY - 2020

No.	Name of Center	Female Sterilisation	Male Sterilisation	Copper-T	Condoms (PCS)	Ocpills
(1)	Ambawadi (Jamalpur Ward)	19	—	31	16440	681
(2)	Behrampura (Sardarnagar Ward)	26	—	47	10330	1548
(3)	Bapunagar (Potalia Ward)	17	—	25	13363	258
(4)	Dariyapur (Isanpur Ward)	38	—	46	18600	592
(5)	Gomtipur (Saijpur Ward)	20	—	36	9550	473
(6)	Khokhra (Amraiwadi Ward)	29	—	37	4140	2610
(7)	New Mental (Kubernagar Ward)	22	—	32	18950	672
(8)	Raikhad (Stadium Ward)	34	—	50	19362	835
(9)	Wadaj (Junawadaj Ward)	13	—	33	10000	2445
(10)	Junagadh	46	—	42	4900	236
(11)	Rander-Surat	12	—	44	1110	40
(12)	Nanpura-Surat	10	—	39	1891	55
(13)	Rajkot	38	01	48	6100	285



NEWS CLIP

स्पेशियलिटीजना डोक्टरोअे स्टेज पर गीतो गायां

FRIDAY, 24•01•2020



अमदावाद: अमदावाद मेडिकल एसोसिएशन (अेअेमअे)अे ०८-२-२०२० स्पेशियलिटी अंताक्षरी स्पर्धांनू आयोजन करूं छतुं, जेभां 18 स्पेशियलिटीअे प्रत्येक त्रक्ष डोक्टरनी टीम साथे जेअेया छत। कुब 32 टीमे भाग लीथो छत।

नेताञ्जनी जन्मजयन्तिअे भावनगरभां रक्तदान केम्प योजथो



भावनगरभां नेताञ्ज सुभाषकांद ज्योगी वनमणवांदिना सारवरे भावनगरनी सरकारी मेडिकल कोलेज, IMAनी भावनगर शाखा अने ABVP द्वारा रक्तदान केम्पनू कर टी. होमिटरअे वड डीना रक्तशोभागी आओवन करअुं छतुं, जेभां मेडिकल कोलेजना डीन डॉ. हेमलताअे महता, BMA प्रमुखा डॉ. एशनभाअे शुक्रसे रक्तदान करूं छतुं।

गांधीधामभां क्षय नाबूटी रमबियान अंतर्गत विविध मुद्दे तबीजो द्वारा मार्गदर्शन आपायुं



गांधीधाम विद्य संस्था उषव्यअेअेओ द्वारा क्षय नाबूटी रमबियान शीर्ष करवामां आयुं छे, जेना भागडूवे गांधीधाम तेमज आडिपुरना डोक्टरो भाटे टीबीना निदान अने सारवारी नवी ज्ञासकारी, अपेरेट नोपली अंगे पाडितगार बवा कार्यक्रमं आयोजन करयुं छतुं. प्राइरेट तेमज पब्लिक सेक्टरना संलग्न प्रयासोधी क्षय जेवो जटिल रोग नाबूड बवो शक्य छे. कार्यक्रमं क्षयनू प्रमात्र, रोगना दर्दना बसमा, निदान, सारवार वगेरे ज्ञासकारी तज्ज्ञो द्वारा पुरी पाडवामां आवी छती. गांधीधाम आरंभअेअेना 2019-20ना प्रथम अं. भाविक भन्नी, डॉ. मुनीरा भेदता, डॉ. ज्येश राडो, डॉ. बलवंत राडो, डॉ. दर्शना जालाअे कार्यक्रमं सक्षम बनवववा योगदान आयुं छतुं.



कार्यक्रमां उपस्थित तबीजो तसवीरभां नजरे परे छे.

संयुक्त प्रयासो थकी जटिल क्षयरोगने नाबूड करवो शक्य

गांधीधाम, ता. १ : क्षयरोगने नाबूड करवा भाटे आर्डीनी ठिनियन मेडिकल एसोसिएशननी गांधीधाम शाखा द्वारा ताजैतरमां टीबी (क्षय)रोग नाबूटी रमबियान अंतर्गत तबीजो भाटे विशेष कार्यक्रमं आयोजन करवामां आयुं छतुं. विद्य संस्था उषव्यअेअेओ. द्वारा क्षय नाबूटी रमबियान आडरवामां आयुं छे, जेभां विश्वमां २०३५ सुधीमां क्षयना रोगने नाबूड करवामां लस्यंक राखवामां आयुं छे. भारतमां २०२५ सुधीमां आ लस्यने पुरो करवामां निर्लेप करवो छे अने आ मिशनमां ठिनियन मेडिकल एसोसिएशन पक्ष जेअेयुं छे. शक्य छे तेवो मत कार्यक्रम दूरभाष ल्यक्त करवामां छत। क्षयनू देशमां प्रमात्र, दर्दना बसमा, क्षयनू सचोत निदान अने तेनी सारवार, अम.डी.आर. टीबी, अक्स.डी.आर. टीबी रिपोर्टिंग, टीबी सर्वेवल अने डीएनए सखितनी माडिती टीबीना मिष पेटर्न, जटिल केसो अंगे ज्ञासकारी तज्ज्ञो द्वारा आपवामां आवी छती. आरंभअेअे. गांधीधाम शाखाना प्रमुखा डॉ. भाविक भन्नी, भन्नी अं. मुनीरा भदंतता, डॉ. जयेश राडो, डॉ. बलवंत राडो, डॉ. दर्शना जाला विगेरे कार्यक्रमं सक्षम बनवववा सहयोगी बनना छत।



वर्ल्ड कैंसर डे पर दमण मेडिकल एसोसिएशन द्वारा कैंसर जागरूकता कार्यक्रम आज

दमण मेडिकल एसो. प्रमुख पद्मश्री डॉ. एस. एस. वैश्य ने साथी डॉक्टरों के साथ प्रेस कॉन्फ्रेंस में दी जानकारी

(असली आजादी न्यूज नेटवर्क) दमण 3 फरवरी। वर्ल्ड कैंसर डे के उपलक्ष्य में दमण मेडिकल एसोसिएशन द्वारा कैंसर पर एक जागरूकता कार्यक्रम होटल रिवांता में रखा गया है। इस बारे में मीडिया को बताते हुए दमण मेडिकल एसोसिएशन के अध्यक्ष पद्मश्री डॉ. एस. एस. वैश्य एवं उपाध्यक्ष डॉ. बिजल कापड़िया तथा डॉ. कृष्णा दमणिया ने कहा कि यह एक जन जागरूकता के लिए सेमिनार रखा गया है। जिसमें डॉक्टरों के साथ सामान्य नागरिक भी भाग ले सकते हैं। उन्हें कार्यक्रम में भाग लेने हेतु पहले रजिस्ट्रेशन करना होगा। यह रजिस्ट्रेशन सेमिनार के दिन तक दोपहर 3.15 बजे तक चलेगा। 3.30 बजे डॉक्टरों का परिचय और सत्कार होगा। 3.40 बजे वाणी के डॉ. अश्व नाडकर्णी (कैंसर स्पेशलिस्ट) द्वारा लोकचर होगा। सभी को कैंसर के बारे में बताएंगे। इस कार्यक्रम का विषय एचवी थिंग अबाउट कैंसर रखा गया है। इस दौरान इंटरएक्टिव सत्र भी होगा, जिसमें सभी डॉक्टर एवं सभी लोग आपस में कैंसर के बारे में बातचीत करेंगे। इससे बहुत सारी कैंसर की बीमारियां जैसे गुठखा से मुँह का कैंसर एवं खास करके महिलाओं में ब्रेस्ट कैंसर, सरवाइकल कैंसर एवं दूसरे कैंसर की जानकारी दी जायेगी। इस कार्यक्रम में दमण मेडिकल एसोसिएशन द्वारा आयोजित 26



जनवरी को आयोजित मेडिकल चेकअप कैम्प में सहयोग करने वाले डॉक्टरों का सम्मान भी किया जायेगा। अतः सभी दमण के डॉक्टरों एवं आम जनता से आग्रह किया है कि इस सेमिनार में भाग लें, ताकि हरेक लोगों तक यह जानकारी पहुंचे सके।

वर्ल्ड कैंसर डे पर दमण मेडिकल एसोसिएशन ने किया कैंसर पर जागरूकता कार्यक्रम

डॉ. अश्व नाडकर्णी ने कैंसर के बारे में सभी तथ्यों पर सभी लोगों से किया इंटरैक्टिव प्रोग्राम, सुलझाए कई सवाल



(असली आजादी न्यूज नेटवर्क) दमण 04 फरवरी। अश्व नाडकर्णी ने कैंसर के लक्षण के बारे में बताया। साथ ही रिजर्वों में एवं परफो में होने वाले कैंसर के बारे में विस्तारपूर्वक जानकारी दी। साल में एक बार पूरे शरीर को जांच एवं कुछ भी असामान्य लगे तो तुरंत जांच कराने की सलाह दी। साथी के डॉ. अश्व नाडकर्णी (कैंसर स्पेशलिस्ट) ने कैंसर के बारे में निम्नलिखित बातें भी जतायीं पहलें

स्टेज पर ही और उसकी ठीक तरीके से इलाज हो तो। इस सेमिनार में मुँह के कैंसर, पेट, उपाध्यक्ष डॉ. बिजल कापड़िया, सेक्रेटरी डॉ. कृष्णा दमणिया, डॉ. कॉस्मिक राठोड, डॉ. सुधीर सोलंकी, डॉ. जयश्री कापड़िया खास तौर पर उपस्थित रहे। आयोजित 26 जनवरी के मेडिकल कैम्प में सहयोग करने वाले डॉक्टरों का सम्मान भी किया गया। इस सेमिनार में दमण मुख्य मेहमान के रूप में कोस्टगार्ड स्कूल की प्रिंसिपल बालनिका चक्रवर्ती एवं डॉ. प्रभाकर उपस्थित रहे।



દિવ્ય ભાસ્કર

કાલે વર્લ્ડ કેન્સર ડે | મહેસાણામાં 50 વયસ્કોએ પ્રોસ્ટેટ કેન્સર ટેસ્ટ કરાવ્યો 45થી વધુ વયના પુરુષોએ પ્રોસ્ટેટ કેન્સર અંગે ટેસ્ટ કરાવવો હિતાવહ

ભાસ્કર ન્યૂઝ | મહેસાણા

મંગળવારે વર્લ્ડ કેન્સર ડે નિમિત્તે મહેસાણા રોટરી ક્લબમાં પ્રોસ્ટેટ એસોસિએશન દ્વારા પ્રોસ્ટેટ અને કેન્સર જાગૃતિ સેમિનાર યોજાયો હતો. જેમાં તજજ્ઞ ડૉ. દિપક રાજ્યગુરુએ ઉપસ્થિત 200 સિનિયર સિટીઝનને પ્રોસ્ટેટ અને કેન્સરનાં લક્ષણો અને નિદાન અંગે વિગતે માર્ગદર્શન આપ્યું હતું. રાહેરના રોટરી ક્લબમાં યોજાયેલા સેમિનારમાં ડૉ. દિપક રાજ્યગુરુએ સરળ ભાષામાં સમજ આપતાં જણાવ્યું કે, 45થી વયુની વયના પુરુષે પ્રોસ્ટેટ કેન્સર



અંગેનો ટેસ્ટ કરાવી લેવો જોઈએ. આ ઉપર પછી આ કેન્સર થવાનું પ્રમાણ વધુ રહેતું હોય છે. પ્રોસ્ટેટ કેન્સર શરૂઆતમાં નિદાન થાય તો સંપૂર્ણ કેન્સરમુક્ત બની શકાય છે. આ માટે જરૂરી પીએસએ ટેસ્ટ કરાવી શકાય. કેલાયેલા કેન્સરમાં પ્રોસ્ટેટની સલાહથી ટવા પદ્ધતિ અપનાવીને કેન્સર કંટ્રોલ રાખી શકાય છે. જિલકુલ કાબજ લેવામાં ન આવે તો આ કેન્સર હવલેણા બની શકે છે. સેમિનારમાં 50થી વધુ વડીલોએ પ્રોસ્ટેટ અને કેન્સર માટે ડી ટેસ્ટ કરાવ્યા હતા.

જિલ્લાભરના અધિકારીઓ ઉપસ્થિત રહ્યા કોરોના હાઉ : મહેસાણા શહેરમાં પરામર્શ, પૂર્વ તૈયારીની તાકીદ

રોટરી ભવનમાં આઈએમએ અને આરોગ્ય વિભાગની સંયુક્ત બેઠક યોજાઈ

| મહેસાણા | (સ.ન્યુ.સ.)

મહેસાણા ખાતે જેલ રોડ ઉપર આવેલા રોટરી ક્લબ હોલમાં મહેસાણા જિલ્લા પંચાયતની આરોગ્ય શાખા તેમજ ઈ-ડીપન મેડિકલ એસોસિએશનના સંયુક્ત ઉપક્રમે કોરોના વાયરસથી ફેલાતા રોગચાળા માટે અટકાયતી પગલાં લેવા એક વર્કશોપનું આયોજન કરવામાં આવ્યું હતું. આ વર્કશોપમાં અમદાવાદની બી.જે. મેડિકલ કોલેજના પ્રો.ડૉ.કમલેશ ઉપાધ્યાય દ્વારા નોવેલ કોરોના વાયરસનાં અટકાયતી પગલાં

અંગે વિસ્તૃત ચર્ચા હાથ ધરવામાં આવી હતી. આ વર્કશોપમાં કોરોના વાયરસ સંદર્ભે રાજ્ય અને દેશની સ્થિતિ અંગે ચર્ચા કરવામાં આવી હતી. કોરોના વાયરસ સામે અટકાયતી પગલાં અને રાજ્ય સરકારના આરોગ્ય વિભાગ દ્વારા કરવામાં આવેલી પૂર્વ તૈયારી અને સારવાર વ્યવસ્થા અંગે માહિતી પુરી પાડવામાં આવી હતી. આ વર્કશોપમાં મહેસાણા શહેરના પાનગી તબીબો ઉપરાંત મુખ્ય જિલ્લા આરોગ્ય અધિકારી તેમજ તબીબી અધિકારીઓ અને મેડિકલ ઓફિસર હાજર રહ્યા હતા.

મહેસાણામાં ગર્ભાશયના કેન્સરનો સેમિનાર યોજાયો



મહેસાણા : મહેસાણા ખાતે રોટરી ભવનમાં ઈન્ડિયન મેડિકલ એસોસિએશન દ્વારા ગર્ભાશયના મુખના કેન્સર અંગે સેમિનાર યોજાયો હતો. આ સેમિનારમાં શહેરના જાણીતા ગાયનેકોલોજિસ્ટ ડૉ.નીનાબેન રાજ્યગુરુએ 9 પવ્લી થુડુ મહિલાઓને સરળ ભાષામાં માહિતી આપી હતી. તેમણે આપેલી માહિતી મુજબ વિશ્વમાં આ બીમારીથી પીડાતી મહિલાઓમાં ૨૫ ટકા દટીઓ આપણા દેશમાં જ છે. આ મીટીંગમાં મહેસાણા બાન્ધના પ્રેસિડેન્ટ ડૉ.મુકેશભાઈ ચૌધરી, સેક્રેટરી ડૉ.પિયુષ પટેલ હાજર રહ્યા હતા અને આ રોગના નિદાનના ટેસ્ટ-શિયુક કરાવી આપવાનું જણાવ્યું હતું.



દૈનિક ભાસ્કર

05-Feb-2020
સૂરત Page 3

સંસ્કૃતિ-રાજ્યના લોકોના જીવન અને વ્યવહારના વિકાસ માટે કાર્યક્રમો ચલાવવા માટે સરકારે ઘણા પગલાં લીધાં છે. આમાંથી કેટલાકની શરૂઆત થઈ ચૂકી છે. આવા કાર્યક્રમોના અમલમાં આવી શકે તેવા પગલાંની સમીક્ષા કરવા માટે સરકારે અન્ય પગલાં લીધાં છે.

કૈંસર દિવસ • ઈન્ડિયન મેડિકલ एसોસિએશન ને જાગરૂકતા કાર્યક્રમ કરકે કૈંસર કી રોકથામ કે ક્ષારે મેં ક્ષતાયા સિવિલ મેં નુવકડ નાટક કિયા, ડૉક્ટર મી રહે મૉજૂદ

કૈંસર દિવસે જાગરૂકતા કાર્યક્રમ કરકે કૈંસર કી રોકથામ કે ક્ષારે મેં ક્ષતાયા સિવિલ મેં નુવકડ નાટક કિયા, ડૉક્ટર મી રહે મૉજૂદ. ઈન્ડિયન મેડિકલ एसોસિએશન ને જાગરૂકતા કાર્યક્રમ કરકે કૈંસર કી રોકથામ કે ક્ષારે મેં ક્ષતાયા સિવિલ મેં નુવકડ નાટક કિયા, ડૉક્ટર મી રહે મૉજૂદ. ઈન્ડિયન મેડિકલ एसોસિએશન ને જાગરૂકતા કાર્યક્રમ કરકે કૈંસર કી રોકથામ કે ક્ષારે મેં ક્ષતાયા સિવિલ મેં નુવકડ નાટક કિયા, ડૉક્ટર મી રહે મૉજૂદ.

રાજસ્થાન પત્રિકા • સૂરત, ગુરુવાર, 30 જાન્યુરી, 2020
patrika.com

તાકિ લોગ રહેં સતર્ક નોવેલ કોરોના ઓર સ્વાઇન ફ્લૂ કે વાયરસ મેં કાફી સમાનતા

ગુજરાત એપેઝેમિક નોટલ ઓફિસર ને સરકારી, અડેસરકારી ઇલિક્ષણકો સે બેઠક કી ઈન્ડિયન મેડિકલ एसોસિએશન મેમ્બર વ નિજી ડૉક્ટર एसોસિએશન સે મી કી મુલાકાત



સૂરત મેં કોઈ મરીજ નહેં. નોવેલ કોરોના વાયરસ કા અહ સ્થાન મેં સ્થિતિ અવગણ્ય લગતો આચાર છે. સરકારે જાગરૂકતા કાર્યક્રમ હાથ ધરવા માટે તૈયારી કરવાની જરૂર છે. આવા કાર્યક્રમોના અમલમાં આવી શકે તેવા પગલાંની સમીક્ષા કરવા માટે સરકારે અન્ય પગલાં લીધાં છે.

સૂરત મેં કોઈ મરીજ નહેં. નોવેલ કોરોના વાયરસ કા અહ સ્થાન મેં સ્થિતિ અવગણ્ય લગતો આચાર છે. સરકારે જાગરૂકતા કાર્યક્રમ હાથ ધરવા માટે તૈયારી કરવાની જરૂર છે. આવા કાર્યક્રમોના અમલમાં આવી શકે તેવા પગલાંની સમીક્ષા કરવા માટે સરકારે અન્ય પગલાં લીધાં છે.



INDIAN MEDICAL ASSOCIATION, HQs

Kindly refer to the following actions IMAHQ had suggested a fortnight ago:

1. Sensitisation of entire IMA membership.
2. Sensitisation of people, political leaders, MLAs and social and cultural leaders.
3. Connect State and local branches with medical college through IMA MSN.
4. Take stock of status of Resident Doctors and young doctors. Strengthen IMA JDN.
5. Strengthen Social Media penetration inside and outside the medical profession.

The issues of the medical profession that have been prioritised for a Nationwide Campaign starting from March 12, 2020 are violence on Doctors and hospitals as well as Quackery and Crosspathy. The uncertainties regarding EXIT exam and PG NEET of medicos are a burning issues to be addressed as well:

1. Violence
2. Quackery and Crosspathy
3. Medical Education.

All the three issues will form the basis of the Nationwide Campaign of IMA from 12-3-2020. The Day has been chosen symbolically to mark the anniversary of The SALT MARCH by the Father of the Nation Mahatma Gandhi from Sabarmati to Dandi This was the turning point of our Freedom Struggle. The National Campaign of IMA will be no less. The challenges and opportunities remain the same.

The National President, Dr. Rajan Sharma will launch the Nationwide Campaign in New Delhi on 12-3-2020. The day will start with Homage to the Father of the Nation Mahatma Gandhi at Rajghat, New Delhi. The launching of the Campaign will be done in a meeting in Sri Sathya Sai International Centre, Pragati Vihar, Bhasham Pitamah Marg, Lodhi Road, New Delhi-11003 between 2:00 PM and 5:00 PM on 12-3-2020. Further details of the Programme will be sent in due course of time. The Campaign will extend from 12-3-2020 upto 31-3-2020. The Campaign will have the following 3 components which are as under:

1. Social Media Campaign
2. Interactive Meetings with opinion makers
3. Liaisoning

The Campaign will involve all the State and Local Branch IMA members have to be reached and involved.



Action Plan AWAKEN INDIA CAMPAIGN

The first phase and component of Awaken India movement ignited the fire in the minds of medical students by taking the torch of awareness to the medical colleges. The momentum of the same has to be further strengthened. Time is ripe to take the next step in the Awaken India movement. A Nationwide campaign will begin on 12th March 2020. The campaign will be launched by the National President Dr Rajan Sharma on 12th March 2020 in New Delhi.

Programme: 10 am Homage in Rajghat followed by lunch and a 3 hour interactive meeting in Sathya Sai auditorium, New Delhi between 2 pm and 5 pm.

Role of Local Banches:

1. All Local Presidents and Local Secretaries are expected to join the Homage at Rajghat and the Launch meet at Sathya Sai Auditorium.
2. The Delegation from every Local Branch/Zone should be as per the number of CWC members. The Local should arrange for the air travel or otherwise of this delegation.
3. IMA HQ will arrange for hotel accommodation and food.
4. The list of participants in the state delegation will be finalised by the State President.
5. The meeting at 2 pm is to be of representative character of the whole nation and fraternity.
6. Junior Doctors Network and Medical Students Network is being handled directly from IMA Hq. All Concerned local branches should connect with their JDN and MSN and facilitate their participation.
7. FOMA meeting has been called next week to co ordinate the speciality organisations.
8. Social media campaign needs to precede the campaign period.
9. Liaisoning with MPs, MLAs, political and cultural leaders and opinion makers is integral to the campaign.

Dr. C. S. Jardosh
(President, G.S.B., I.M.A.)

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



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: 16-2-2020

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/2020-2021**, further tabulated information is given below for the revision of fees effective from **1/4/2020**. 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 **31-3-2020** 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	10865 -00	800-00	{20-00}	Rs. 10065-00
Couple	16104-00	1240-00	{30.00}	Rs. 14864-00

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

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

Yours Sincerely

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



PROFESSIONAL PROTECTION SCHEME; G.S.B. I.M.A.

“P. P. S. House”, Beside Sakar-V Building, Nr. Mithakhali Railway Crossing,
Off Ashram Road, Navrangpura, Ahmedabad-380009.

Tele No. : 079-2658 8929 E-mail : ppsgsbima1@yahoo.in

Website : www.ppsgsbima.com

Attention Please !! -

ALL THE MEMBERS OF P.P.S.

Dear Member,

Professional Protection Scheme has already sent a notice alongwith a Renewal Application form for renewing the membership before 31st March, 2020 for the year 2020-2021 "By Registered Post January 2020 to all the members.

- **Kindly do Online Payment as far as possible.**
 - **There is No Extra Charges for Online Payment.**
 - **We have posted PPS Renewal Notice for the year 2020-2021, only pay Annual Fee, Don't pay Admission Fee.**
 - **No need to send Physical form to PPS office in case of Online Payment.**
 - **Instant Receipt Generation**
- Website : www.ppsgsbima.com**
For Online : Renewal Please visit our

Bmpatel

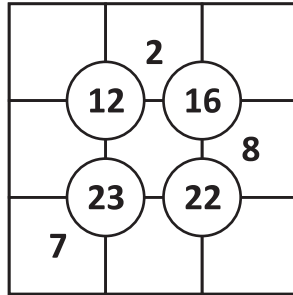
Dr. Bipin M. Patel
Managing Director



Games Corner

Dr. Chandresh Jardosh Surat

Chhota Sudoku



"Place the numbers 1 to 9 in the spaces so that the number in each circle is equal to the sum of the four surrounding spaces."

7 BR OK EN Words

By using following keys, join the broken words & find out the 7 different words related to Election

Key	Words
4 Letters	2
5 Letters	2
6 Letters	1
9 Letters	1
11 Letters	1

ND	ID	ST	PA	LL
OT	NE	PER	ER	BO
SL	BA	ST	LI	ATE
OTH	AGE	CA	IP	PO

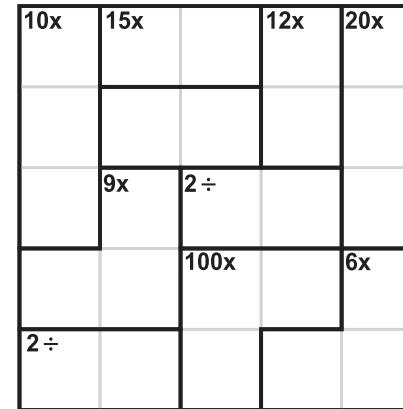
Sudoku

	8		7				1	2
		3						
			2		3	4		
				8			5	6
9	6						7	3
8	2			7				
		6	9		1			
						6		
5	7				8			4

The objective of sudoku is to enter a digit from 1 through 9 in each cell, in such a way that:
 Each horizontal row contains each digit exactly once
 Each vertical column contains each digit exactly once
 Each 3 by 3 square contains each digit exactly once



KEN KEN PUZZLE



- 1 Write down 1 to 6 in each row and each column in such a way they come only once, in each row and column.
- 2 The heavily-outlined groups of squares in each grid are called "cages." In the upper-left corner of each cage, there is a "target number" and maths operation (+, -, x, ÷).
- 3 Fill in each square of a cage with a number. The numbers in a cage must combine—in any order, using only that cage's maths operation—to form that cage's target number.
- 4 The number written in the cage of one square, will be the answer for the cage.
- 5 Important: You may not repeat a number in any row or column. You can repeat a number within a cage, as long as those repeated numbers are not in the same row or column.

FOR EXAMPLE

3+	1	2	6x	1	2	3
----	---	---	----	---	---	---

Answer Page No. 47

* * * * *

Attention Advertisers

- * You are requested to send your matter for advertisement in I.M.A.G.S.B. New Bulletin before **15th of Every month.**
- * Your advertisement matter has to be **ready to print format or at least matter** has to be in printed form.
- * In case of hand written matter, publisher will not be responsible for any kind of printing error.



PROFESSIONAL PROTECTION SCHEME; G.S.B. I.M.A.

“P. P. S. House”, Beside Sakar-V Building, Nr. Mithakhali Railway Crossing,
Off Ashram Road, Navrangpura, Ahmedabad-380009.

Tele No. : 079-2658 8929 E-mail : ppsgsbima1@yahoo.in

Website : www.ppsgsbima.com

(Reported by Dr. Bipin M. Patel, Managing Director, P.P.S.)

Sub. : Renewal Notice : 2020-2021

The Office has received back the Renewal Notices of the following members with postal remarks as 'left' or 'Not Known'. The concerned members are requested to notify immediately change of their addresses to the P.P.S. Office.

Sr. No.	P.P.S. No.	Name	Branch/ City
1	11668	Dr. Swaminarayan Mittalben Shaunakbhai	Ahmedabad
2	15205	Dr. Akhani Dhavalkumar Dineshkumar	Ahmedabad
3	13552	Dr. Ashar Rucha Pravinchandra	Ahmedabad
4	6475	Dr. Bansal Usha Vivek	Ahmedabad
5	5514	Dr. Bhagat Eva Ghansambhai	Ahmedabad
6	14925	Dr. Bhatt Darshankumar Madhavray	Ahmedabad
7	8361	Dr. Bhatt Maharshi Prakash	Ahmedabad
8	6890	Dr. Buddhadev Nitinkumar Amritlal	Ahmedabad
9	15228	Dr. Chahwala Pooja Mihir	Ahmedabad
10	15253	Dr. Chandarana Uttam Has Mukhbhai	Ahmedabad
11	13995	Dr. Chaudhari Vipulkumar Dineshbhai	Ahmedabad
12	9500	Dr. Chauhan Anjana Sureshbhai	Ahmedabad
13	15070	Dr. Dabhi Pradipkumar Arvind	Ahmedabad
14	11286	Dr. Dalal Maulik Pramodkumar	Ahmedabad
15	5793	Dr. Dalal Nipa Aroonkumar	Ahmedabad
16	14990	Dr. Dave Mitesh Kaushik	Ahmedabad
17	14991	Dr. Dave Shachii Mitesh	Ahmedabad
18	13813	Dr. Desai Ronak Narendrakumar	Ahmedabad
19	4013	Dr. Desai Sarvang Madhukarbhai	Ahmedabad
20	12876	Dr. Gaadhe Parul Pravindra	Ahmedabad
21	13237	Dr. Gaadhe Ravindra Laxmanbhai	Ahmedabad
22	4722	Dr. Gandhi Mayurbhai Rajendrakumar	Ahmedabad
23	14483	Dr. Gargiya Agam Jawaharlal	Ahmedabad
24	14482	Dr. Gargiyar Shweta Agam	Ahmedabad
25	11387	Dr. Ghatala Bharat Chaturbhai	Ahmedabad
26	13793	Dr. Ghoghara Suja Khivibha	Ahmedabad
27	4040	Dr. Godiawala Pulak Rameshbhai	Ahmedabad
28	8375	Dr. Gohil Yogesh Mafatlal	Ahmedabad
29	15109	Dr. Jain Vandana Prakashchand	Ahmedabad
30	12571	Dr. Jhala Jayant Khodidas	Ahmedabad
31	12572	Dr. Jhala Kashmir Jayant	Ahmedabad
32	8048	Dr. Kamdar Deepali Jayul	Ahmedabad



33	8047	Dr. Kamdar Jayul Rajnikant	Ahmedabad
34	14399	Dr. Katariya Ankitkumar Devayatbhai	Ahmedabad
35	6606	Dr. Khatri Hiren Himmatlal	Ahmedabad
36	14531	Dr. Lovina Neil	Ahmedabad
37	11580	Dr. Madhwani Ramesh Alamchand	Ahmedabad
38	13577	Dr. Madnani Manish Ashokkumar	Ahmedabad
39	9651	Dr. Mehta Nilay Navnitrai	Ahmedabad
40	15729	Dr. Mistri Jatinkumar Gunvantlal	Ahmedabad
41	12159	Dr. Modi Ripal Kamleshkumar	Ahmedabad
42	15440	Dr. Modiya Yogeshkumar Nanibhai	Ahmedabad
43	12588	Dr. Panchal Ajaykumar Jagdishbhai	Ahmedabad
44	10016	Dr. Panchal Swati Devendrabhai	Ahmedabad
45	1597	Dr. Pandya Satish Madhusudan	Ahmedabad
46	14656	Dr. Parekh Akash Rajeshbhai	Ahmedabad
47	7022	Dr. Parekh Sejal Jayeshbhai	Ahmedabad
48	12744	Dr. Parikh Devendra Ghanshyam	Ahmedabad
49	14118	Dr. Parikh Hardik Rashmikant	Ahmedabad
50	5996	Dr. Parikh Kalpesh Manharlal	Ahmedabad
51	12745	Dr. Parikh Kusuma Devendra	Ahmedabad
52	11820	Dr. Parikh Purvi Mitul	Ahmedabad
53	8633	Dr. Parmar Yogesh Virsinh	Ahmedabad
54	7077	Dr. Patel Atul Babubhai	Ahmedabad
55	6288	Dr. Patel Bhaveshkumar Ramchandra	Ahmedabad
56	1436	Dr. Patel Bipin Narshibhai	Ahmedabad
57	12416	Dr. Patel Brijesh Amrutlal	Ahmedabad
58	1394	Dr. Patel Girishkumar Somabhai	Ahmedabad
59	2565	Dr. Patel Harshida Kirtibhai	Ahmedabad
60	11887	Dr. Patel Hiral Dhavalkumar	Ahmedabad
61	9469	Dr. Patel Janakraj Kantilal	Ahmedabad
62	14870	Dr. Patel Jatinkumar Ambalal	Ahmedabad
63	2065	Dr. Patel Maheshkumar Chhotalal	Ahmedabad
64	11942	Dr. Patel Mahesm Dularidas	Ahmedabad
65	14688	Dr. Patel Maitray Kanubhai	Ahmedabad
66	14687	Dr. Patel Parthavi Maitray	Ahmedabad
67	3177	Dr. Patel Prahladbhai Narayandas	Ahmedabad
68	13667	Dr. Patel Snehalata Uday	Ahmedabad
69	13544	Dr. Patel Uday Dashrathbhai	Ahmedabad
70	7775	Dr. Pavra Jayesh Bhikhabhai	Ahmedabad
71	14358	Dr. Prajapat Moolchand Chhawarlal	Ahmedabad
72	2818	Dr. Prajapati Jayesh Ambalal	Ahmedabad
73	13349	Dr. Prajapati Sanjaykumar Jivanbhai	Ahmedabad
74	8075	Dr. Purchit Apurv Dineshkumar	Ahmedabad
75	13320	Dr. Rafaliya Suhilkumar Dhirajlal	Ahmedabad
76	12369	Dr. Rathod Gaurang Dineshbhai	Ahmedabad
77	12905	Dr. Rathod Pankajkumar Shantilal	Ahmedabad
78	12370	Dr. Rathod Vaishali Gaurang	Ahmedabad
79	11520	Dr. Raval Bina Manoj	Ahmedabad



80	14532	Dr. Rohra Neil Tikam	Ahmedabad
81	1591	Dr. Shah Amitkumar Kantilal	Ahmedabad
82	13368	Dr. Shah Bhavya Bharat	Ahmedabad
83	3240	Dr. Shah Ketan Shantilal	Ahmedabad
84	7971	Dr. Shah Minaxi Harshad	Ahmedabad
85	12604	Dr. Shah Nija Sanket	Ahmedabad
86	8300	Dr. Shah Pratik Meheshkumar	Ahmedabad
87	395	Dr. Shah Pravin Keshavlal	Ahmedabad
88	6289	Dr. Shah Rajesh Babubhai	Ahmedabad
89	1874	Dr. Shah Rashmikant Shantilal	Ahmedabad
90	13386	Dr. Shah Sanket Prashantbhai	Ahmedabad
91	12581	Dr. Shah Ugam Bharat	Ahmedabad
92	4588	Dr. Sheth Keyur Mahendrakumar	Ahmedabad
93	4691	Dr. Sheth Trupti Keyur	Ahmedabad
94	11553	Dr. Surela Roopchand Gangaram	Ahmedabad
95	12758	Dr. Swaminarayan Shaunak Mukeshbhai	Ahmedabad
96	15183	Dr. Tadaiya Manahvirkumar Virendra	Ahmedabad
97	15514	Dr. Thaker Parth Nishith	Ahmedabad
98	7083	Dr. Chotalia Kishori Dhiraila	Amreli
99	10810	Dr. Brahmabhatt Ashish Dinkarrav	Anand
100	15233	Dr. Mansuriya Jaimin Arvindbhai	Anand
101	15232	Dr. Mansuriya Jignasa Jaimin	Anand
102	4038	Dr. Patel Dipakkumar Bhailalbhai	Anand
103	3935	Dr. Patel Hitesh Sumanbhai	Anand
104	3936	Dr. Patel Nayna Hiteshbhai	Anand
105	6304	Dr. Patel Nimeshkumar Tribhovandas	Anand
106	6594	Dr. Sonpal Bharatkumar Dhirajlal	Anand
107	14655	Dr. Thakkar Amit Tarunkumar	Anand
108	15822	Dr. Vahora Nargisben Mahemudbhai	Anand
109	3484	Dr. Shah Falguni Rakesh	Ankleshwar
110	3485	Dr. Shah Rakesh Punjalal	Ankleshwar
111	3464	Dr. Patel Vineshkumar Baldevbhai	Baroda
112	9142	Dr. Saxena Atul Kumar	Baroda
113	7051	Dr. Shah Smita Chandulal	Baroda
114	856	Dr. Shah Mukesh Lilachandbhai	Bhabhar
115	11883	Dr. Sagar Ameeta Prashantbhai	Bharuch
116	11882	Dr. Sagar Prashant Laxmanbhai	Bharuch
117	4178	Dr. Chauhan Jaysukhlal Karsandas	Bhavnagar
118	13786	Dr. Gheewala Pratikkumar Dilipbhai	Bhavnagar
119	14017	Dr. Garg Sameep Shyamlal	Bhuj
120	11050	Dr. Salat Darshak	Bhuj Kutch
121	14016	Dr. Vaishnav Mitsu Vinay	Bhuj_kutch
122	15714	Dr. Rantesariya Milankumar Dineshbhai	Botad
123	3336	Dr. Patel Rajesh Ratibhai	Dakor
124	9691	Dr. Khedawala Pragnesh J.	Dhangadhara
125	24846	Dr. Masham Hiamin Maramanbhai	Dharampur
126	1720	Dr. Dubal Jagdish Ashwanikumar	Gandhidham



127	492	Dr. Chhatrar Yashvant Bhagwanji	Gandhinagar
128	11721	Dr. Desai Sanket Pinakinbhai	Gandhinagar
129	13636	Dr. Patel Ashishkumar Babubhai	Gandhinagar
130	11956	Dr. Patel Nilesh Jayantibhai	Gandhinagar
131	13525	Dr. Patel Ravi Rameshbhai	Gandhinagar
132	6810	Dr. Sharme Niranjana P.	Gandudhem
133	5286	Dr. Shah Kartikkumar Rameshchandra	Halol
134	5771	Dr. Chauhan Dilipkumar Narshibhai	Himatnagar
135	10457	Dr. Patel Rohitbhai Damubhai	Himatnagar
136	5128	Dr. Patel Vipulkumar Dahyabhai	Himatnagar
137	1118	Dr. Baruchia Bhavan Manjibhai	Jamnagar
138	9139	Dr. Chudasama Shilpa Laxmidas	Jamnagar
139	9309	Dr. Ganatra Jaydeep Rajnikant	Jamnagar
140	9373	Dr. Ganatra Mauli Jaydeep	Jamnagar
141	138	Dr. Ioshi Ashok	Jamnagar
142	10970	Dr. Pankhaniya Rajesh Naranbhai	Jamnagar
143	4058	Dr. Parmar Dipakkumar Sumanlal	Jamnagar
144	9473	Dr. (Mrs) Ali Juguni Mohiammed	Jasdan
145	12029	Dr. Ali Mohammed Shamim Anwar	Jasdan
146	9932	Dr. Lunaviya Dipti Dineshkumar	Junagadh
147	9931	Dr. Patel Divyang Dhirajlal	Junagadh
148	9048	Dr. Patel Parag Gopalbhai	Junagadh
149	9047	Dr. Patel Rupal Paragbhai	Junagadh
150	15068	Dr. Sakhareliya Tushar Hareshbhai	Junagadh
151	15539	Dr. Shah Manasi Rajendra	Junagadh
152	6620	Dr. Mehta Maulik Rameshchandra	Kalol N.g
153	8670	Dr. Audichya Bhanuprasad M.	Limbd
154	10858	Dr. Vesetian Jayeshchandra Mangaldas	Limbd
155	8074	Dr. Mer Dineshchandra L.	Limbd
156	8433	Dr. Suthar Manisha Gautamkumar	Mehsana
157	11572	Dr. Vala Girirajsinh Kalubhai	Mehsana
158	15357	Dr. Vestian Deep Harishkumar	Mehsana
159	14292	Dr. Maheshwari Shubham Dilipkumar	MundraKutch
160	7141	Dr. Ghadiali Jignesh Devendrabhai	Navsari
161	14134	Dr. Naik Nishith Vinodbhai Navsari	Navsari
162	3364	Dr. Vaidya Kiran Jaykrishna	Navsari
163	15236	Dr. Siroya Surkumar Shankerbhai	Patan
164	1566	Dr. Kotadia Manharlal Kantilal	Petlad
165	7552	Dr. Mehta Janakrai Vasantbhaj	Rajkot
166	10795	Dr. Chauhan Tejas Bharatkumar	Rajkot
167	14364	Dr. Ganatra Bhakti Mukeshbhai	Rajkot
168	2550	Dr. Kamdar Bhupendra Chandulal	Rajkot
169	11044	Dr. Khambhaita Amit Nanalal	Rajkot
170	8931	Dr. Lumbhani Niranjana Kanubhai	Rajkot
171	10234	Dr. Nathwani Pratirha Tryambaklal	Rajkot
172	3010	Dr. Parvadia Veljibhai Haribhai	Rajkot
173	13092	Dr. Patel Amit Pragjibhai	Rajkot



174	15244	Dr. Patel Chhayababen Savajibhai	Rajkot
175	9026	Dr. Patel Jatin Ghanshyambhai	Rajkot
176	9249	Dr. Rathod Dharmendra Rameshbhai	Rajkot
177	6899	Dr. Sheth Narendra Manekchandbhai	Rajkot
178	9453	Dr. Thakrar Sandip Jayantilal	Rajkot
179	4756	Dr. Trivedi Parimal Krishnakant	Rajkot
180	15007	Dr. Vora Krishna Pravinbhai	Rajkot
181	4085	Dr. Acharya Bhaskar Dahyalal	Surat
182	1821	Dr. Bardolia Kantilal Vrajlal	Surat
183	12686	Dr. Bhatt Jay Satish	Surat
184	12687	Dr. Bhatt Kalyani Jay	Surat
185	10971	Dr. Bhutwala Bhavin Chandrakant	Surat
186	15685	Dr. Chaudhari Vaishakhi Abhesinh	Surat
187	12422	Dr. Dacin Arvind Bhupendra	Surat
188	9341	Dr. Desai Kiran Hmribhai	Surat
189	9342	Dr. Desai Shaila Kiran	Surat
190	10382	Dr. Desai Vikas Khandubhai	Surat
191	9969	Dr. Gami Samir Prabhulal	Surat
192	13427	Dr. Gandhi Himesh Rameshchandra	Surat
193	13626	Dr. Gharla Meena Parimalsinh	Surat
194	12178	Dr. Gharin Parimalsinh Ajitsinh	Surat
195	13445	Dr. Gohil Jitendra Balubhai	Surat
196	9654	Dr. Grover Rishi Amiriltal	Surat
197	11770	Dr. Jariwala Chitrang Hemant	Surat
198	11769	Dr. Jariwala Meghna Chitrang	Surat
199	1472	Dr. Martin Pradipkumar Ishwardas	Surat
200	14488	Dr. Mishra Ajay Jagatnarin	Surat
201	13586	Dr. Mishra Dipti Ajay	Surat
202	11858	Dr. Nandurkar Satyam Diwakar	Surat
203	13005	Dr. Narang Devendrakumararaja U.	Surat
204	11949	Dr. Parmar Nishit Vijaykumar	Surat
205	14447	Dr. Patel Ankit Baldevbhai	Surat
206	7743	Dr. Patel Bhagvatiben Bhavin	Surat
207	13659	Dr. Patel Dhavalkumar Hasmukhlal	Surat
208	11797	Dr. Prasad Dinesh Gamgaalchand	Surat
209	11796	Dr. Prasad Sarita Dinesh Prashad	Surat
210	12485	Dr. Rathod Bhadrash Narendrakumar	Surat
211	9122	Dr. Shah Neepa Manharlal	Surat
212	14567	Dr. Shah Parth Mahendrakumar	Surat
213	9184	Dr. Sharivastava Rakeshkumar P.	Surat
214	9415	Dr. Shrivastava Anjani Rakesh	Surat
215	14371	Dr. Solanki Sandipkumar Rajnikant	Surat
216	9800	Dr. Suratwala Narendra Babubhai	Surat
217	8478	Dr. Suthar Harish Arvindbhai	Surat
218	10791	Dr. Tamaskar Rohit Moreshwar	Surat
219	13671	Dr. Tilavat Narendrakumar Dalapatram	Surat
220	12991	Dr. Tilavat Venus Narendra	Surat



221	12813	Dr. Vaishnav Abhik Parvinbhai	Surat
222	13960	Dr. Gami Gambhirsang Chandubhai	Surentranagar
223	5769	Dr. Binwale Samit Narendra	Vadodara
224	11586	Dr. Makwana Bhavesh Parshottam	Vadodara
225	12146	Dr. Modi Amit Vinodchandra	Vadodara
226	6691	Dr. Naik Pradeep Revadas	Vadodara
227	7418	Dr. Nair Unnikrishnan Gopinathan	Vadodara
228	11064	Dr. Pandya Chirag Bhupendra	Vadodara
229	10092	Dr. Pandya Hetal Bhargav	Vadodara
230	14161	Dr. Rathva Anilkumar Muljibhai	Vadodara
231	13927	Dr. Shah Darshankumar Harendrabhai	Vadodara
232	13708	Dr. Shah Ishita Darshankumar	Vadodara
233	12165	Dr. Shah Smit Navinchandra	Vadodara
234	14585	Dr. Shah Tapan Rajendra	Vadodara
235	7105	Dr. Solankee Uma Pulin	Vadodara
236	3515	Dr. Thakkar Nihalchand Hundaldas	Vadodara
237	10413	Dr. Vekaria Deepa Narendra	Vadodara
238	10412	Dr. Vekaria Narendrakumar Pravin	Vadodara
239	15251	Dr. Parikh Pratichi Jatinbhai	Valsad
240	347	Dr. Shukla Bhusan Vireshchandra	Valsad
241	1617	Dr. Patel Pankajkumar Kantilal	Vansda
242	14980	Dr. Shah Gajendrasinh Manjibhai	Vapi
243	574	Dr. Movalia Premui Deviishai	Veraval

Answers

Chhota Sudoku

3	2	5
12	16	
6	1	8
23	22	
7	9	4

7 BR OK EN Words

- 1 SLIP
- 2 LINE
- 3 BOOTH
- 4 STAGE
- 5 POSTER
- 6 CANDIDATE
- 7 BALLOT PAPER

Sudoku

4	8	9	7	6	5	3	1	2
2	1	3	8	9	4	5	6	7
6	5	7	2	1	3	4	8	9
7	3	4	1	8	9	2	5	6
9	6	1	5	4	2	8	7	3
8	2	5	3	7	6	1	9	4
3	4	6	9	5	1	7	2	8
1	9	8	4	2	7	6	3	5
5	7	2	6	3	8	9	4	1

KEN KEN PUZZLE

10x	15x	12x	20x
2	5	3	4
1	4	2	3
5	9x	2+	4
3	1	100x	6x
2÷	4	2	5
			1
			3



Biomedical Waste Management Rules 2016, BMW Amendments 2018, 2019 And their adverse impact on Hospitals

Biomedical Waste & Liquid Waste Management issue has raised concerns all across the country. BMW Rules 2016 & the Amendments 2018, 2019 thereafter have created panic among the entire healthcare sector in the country. Indian Medical Association being the sole representative of the medical professionals held the responsibility to deal with the issue. IMA & Hospital Board of India constituted the National Working Group (NWG) for this important issue. The NWG studied the BMW rules & Amendments and formulated a comprehensive representation comprising of gap analysis between Rules & ground realities. NWG also categorically put forth the possible solutions to address the issue of waste management. 95% of the healthcare of the country is provided by small & medium sized hospitals. The BMW rules & Amendments will have adverse effects on small & medium healthcare establishments (HCEs).

1. Red & Orange Categorization of HCEs with other industries is unfair & creates unnecessary red tapes for the HCEs. Mandatory CTE & CTO under Water & Air acts is undue & unfair expectation from HCEs. PCB Authorization should be treated as CTE/CTO for HCEs. The categorization of healthcare at par with industries is arbitrary & holds no rationale. IMA & Hospital Board of India has demanded special categorization of HCEs.
2. Statistically 80% water pollution is by domestic liquid discharge. Effluent/ Sewage Treatment Plant Compulsion (STP/ETP) on HCEs is not practical & will put severe financial burden on small or medium hospital owners. BMW Amendments 2018 & 2019 mentioned that 'HCEs less than 10 beds shall have to comply with the output discharge standard for liquid waste by 31st December 2019'. This has created several speculations about financial stress & space constraints that will surely make this clause impractical & impossible for HCEs. SPBs or local civic bodies at many places have been insisting on STP/ETP depending on the clause 3 of Amendment. While there is no specific stipulation in the act regarding this, the compulsion of STPs/ETPs is unfair. Hospital liquid waste is similar like the domestic & should not be treated as a personal onus on the HCEs. More than 95% patients receive domiciliary treatment on OPD basis & hardly 5% patients are IPD patients which will be better managed with CBMWTF & Common Liquid waste management facilities at local bodies than personal STPs or ETPs. This shall be only practical, cost effective & viable solution.
3. Common BMW Treatment Facility — IMAGE, a CBMWTF by Indian Medical Association is a biggest step towards clean environment mission. It is the



biggest asset for the government, society, and environment & has taken away the burden of BMW in the Kerala State. New rules/amendments have provisions of unfair, heavy fines under heading of Compensation Charges. It may prove disaster if the unit handling BMW of an entire state is treated unfairly by the governing authorities. While there is no supply & production by manufacturers in our country to upgrade & comply with the requisites as per new rules, it is unfair to punish the CBMWTF.

The facility of national importance should be exempted from new regulations till Indian manufacturers are able to supply the upgraded equipments.

4. Websites & Barcode Management onus is being shifted to HCEs. Monthly/Annual reports to be published on personal websites by HCEs is an unfair ruling. Bar-coding by HCEs is unnecessary onus while the third party agencies in contract with local administration should be responsible for bar-coding. HCEs being small establishments don't have websites. CPCB should have a common website or an app where data uploading can be easy. Data collection is possible only through common CPCB website or app.
5. CPCB should have common software for bar-coding to be provided to HCEs.
6. Environmental Compensation Charges demanded in the rules bear vague criteria for such fines. Arbitrary huge penalties by authorities shall prove may prove a fertile ground for corruption. Modifications to avoid misuse are must in BMW rules and amendments. No penalties for clerical errors should be levied to HCEs. Complete measures to avoid loopholes in the BMW rules are must to avoid the corruption.

IMA & IMA HBI has given in depth representation to the Union Minister for Environment, Forests and Climate Change Hon. Shri. Prakash Jawadekar in the Parliament office. IMA has also given representation to CPCB. Indian Medical Association HBI shall take every possible step to safeguard the HCEs of our country.

IMA has intervened in National Green Tribunal Case

IMA is closely observing the issue of medical waste before NGT, and have also seeking permission from NGT to intervene in the matter.

IMA has been served a notice on strike issue

The matter is before the Supreme Court, whereby on 13.01.2020, IMA was given time to file reply only in relation to essential services.



INDIAN MEDICAL ASSOCIATION

Summary of issues in regards to adverse impact of biomedical waste management rules amendments on small & medium Health Care Establishments (HCEs)

Small & medium hospitals provide 95% of healthcare of the country. (ref. 'Healthcare System in New India- Building Blocks' - NITIAayog)

NO.	BMW RULES - ISSUE	ACTUAL FACTS	SOLUTIONS
1	Categorization of HCEs <ul style="list-style-type: none"> Red & Orange Categorization of HCEs Mandatory CTE & CTO under Water & Air acts 	<ul style="list-style-type: none"> Arbitrary Categorization. RTI CPCB-No supportive data 80% water pollution — Domestic CTO/CTE difficult for HCEs to obtain 	<ul style="list-style-type: none"> ✓ HCEs must have 'Special Category' as 90% healthcare Delivery by HCEs ✓ Abolish CTE/CTO. ✓ PCB Authorization should be treated as CTE/CTO
2	Effluent / Sewage Treatment Plant Compulsion (STP/ETP) <ul style="list-style-type: none"> HCEs less than 10 beds shall have to comply with the output discharge standard for liquid waste by 31st December 2019. 	<ul style="list-style-type: none"> • SPBs insisting on STP/ETP • No specific stipulation in the act • Financial Constraints • Space Constraints • Hospital liquid waste is same as domestic • More than 95% patients receive domiciliary treatment on OPD basis • Domestic water pollution — 80% 	<ul style="list-style-type: none"> ✓ Common ETPs by local government bodies ✓ Such Terminal common plant is only practical, cost effective & viable
3	Common BMW Treatment Facility-(At present in Kerala) <ul style="list-style-type: none"> Heavy fines for Compensation Charges 	<ul style="list-style-type: none"> • No supply & production by manufacturers in our country to upgrade & comply • Indian manufacturers can not comply the CPCB standards- so unable to supply equipments 	<ul style="list-style-type: none"> ✓ IMA joining hands with 'Swachh Bharat Abhiyan through CBMWTF Kerala. ✓ The facility of national importance be exempted from new regulations till Indian manufacturers are able to supply the upgraded equipments.
4	Websites & Barcode Management <ul style="list-style-type: none"> Monthly/Annual report on personal websites for HCEs Bar-coding by HCEs 	<ul style="list-style-type: none"> • HCEs being small establishments don't have websites 	<ul style="list-style-type: none"> ✓ CPCB to have common website & an app where data uploading will be easy ✓ Data collection is possible only through common CPCB website or app ✓ CPCB should have common software for bar-coding
5	Environmental Compensation Charges	<ul style="list-style-type: none"> • Vague criteria for such fines • Arbitrary huge penalties by authorities • Fertile ground for corruption 	<ul style="list-style-type: none"> ✓ Modifications to avoid misuse is must ✓ No penalties for clerical errors, Avoid loopholes ✓ Minimize penalties

Courtesy IMA HQs



AAO GAON CHALE - Mega Medical Camp Virampur





AAO GAON CHALE - Mega Medical Camp Virampur



AAO GAON CHALE - Mega Medical Camp Virampur





Extended Action Committee meeting at New Delhi



REDMI NOTE 6 PRO

* * * * *

State Working Committee meeting Saputara



Blood Donation Camp Bhavnagar Branch



* * * * *

Blood Donation Camp Morbi Branch





Cyber Safety Seminar Ahmedabad Branch



* * * * *

Republic Day Celebration Ahmedabad Branch



Republic Day Celebration Morbi Branch



* * * * *

Republic Day Celebration Surat Branch





Republic Day Celebration Anand Branch



* * * * *

Republic Day Celebration Una Branch



IMA END TB INITIATIVE CME Mahuva Branch



* * * * *

IMA END TB INITIATIVE CME Petlad Branch





CME on Corona Virus Dahod Branch



* * * * *

CME on Corona Virus Palanpur Branch



CME on Corona Virus Surat Branch



* * * * *

Yog Sibir Kalol Branch





CME Amreli Branch



* * * * *

CME Godhra Branch



CME Mehsana Branch



* * * * *

CME Valsad Branch





CME Savarkundla Branch



* * * * *

Medical Camp Himmatnagar Branch



Annual Function Celebration Navasari Branch



* * * * *

Excellent 2020 Live ENT Surgical Workshop Morbi Branch





Members Directory Launching Gadhidham Branch



* * * * *

World Cancer Day Daman Branch



INDIAN MEDICAL ASSOCIATION & INDIAN SOCIETY OF ASSISTED REPRODUCTION IMA & ISAR VIEWS ON SURROGACY BILL 2019

The Surrogacy (Regulation) Bill, 2019 was introduced by the Minister of Health and Family Welfare, Dr. Harsh Vardhan in Lok Sabha on July 15, 2019 & was passed in Lok Sabha on August 05, 2019. Further it was referred to select committee on November 21, 2019.

As regulation of surrogacy the Bill prohibits commercial surrogacy, but allows altruistic surrogacy. It also lays down purposes for which surrogacy is permitted & eligibility criteria for surrogate mother & intending couple for the same.

We at Indian Medical Association (IMA) and Indian Society of Assisted Reproduction (ISAR) agree that surrogacy should be regulated, but the regulatory mechanisms should have practical considerations in view of ground realities. It is important too note that surrogacy process involves deep sentiments of people & their practical difficulties & ground realities must be considered before finalising the regulatory mechanism.

1 Close Relative :

CHAPTER I : 30 : (zf) "surrogate mother" means a woman bearing a child (who is genetically related to the intending couple) through surrogacy from the implantation of embryo in her womb and fulfils the conditions as provided in sub-clause (b) of clause (iii) of section 4;

CHAPTER III : Section 4 : (iii) : (b) : "the surrogate mother is in possession of an eligibility certificate issued by the appropriate authority on fulfilment of the following conditions, namely:—

(II) : no person, other than a close relative of the intending couple, shall act as a surrogate mother and be permitted to undergo surrogacy procedures as per the provisions of this Act.

IMA & ISAR VIEW

This point has not been defined in the Bill & does not hold practical considerations.

Chapter I : 30 should read as: "surrogate mother" means a woman bearing a child (who is genetically related to at least one of the intending Parent in case of a couple and in case of single parent to the single parent) through surrogacy from the implantation of embryo in her womb and fulfils the conditions as provided in sub-clause (b) of clause (iii) of section 4

Nowadays, because of the nuclear family structure and having only one or two children, it will be very difficult to find close relative as a surrogate mother.

As per ICMR guidelines Surrogate can be related and unrelated but not even 1% of the parents get support from close relatives. This involves the intimacy & stressed emotional issues of intending couples & also hurting to the right of confidentiality of



the couples as well as surrogate mother. Infertility is an issue where couples are not comfortable to discuss with the family and want to maintain confidentiality in interest of safeguarding marriage, self-respect & future interests of the child born out of surrogacy.

In those countries where altruistic surrogacy is permitted, such type of restrictions allowing only close relative of the intended infertile couple as surrogate does not exist.

Non-applicable in family with genetic diseases: This pre-condition of close relative acting as surrogate mother is not applicable in the families with medical history of congenital or genetic diseases, the close relative surrogate may not be medically fit to be surrogate mother.

There is a fear of Domestic Violence or abuse of domestic Violence law.

The relationships between Brothers, sisters, sister-in-law, who are probable close relatives, share dedicated, deep pious relationships in the cultured society. Thus, selectively using these pious relationships for surrogacy or placing the genetic material in the womb of sister or sister-in-law in the family, will go against depths & feelings within the family.

The welfare of child is utmost important, which can be highly jeopardised in case of conflicts between family members and there is a constant fear which hampers the regular bringing up or connect with the Parents, if the birth mother is in touch.

Hence, the word "close relative" should be removed or should not be the only option. Such a provision is arbitrary and unreasonable as it is disproportionate measure adopted and is too extreme a view adopted.

Article 21 of Indian Constitution states, "No person shall be deprived of his life or personal liberty except according to a procedure established by law." It is one of the six fundamental rights guaranteed and protected by the Constitution of India. The compulsion of 'Close Relative' clause in the bill is near violation of Article 21 of the Constitution of India.

2 Altruistic surrogacies: No Compensation at all.

IMA & ISAR VIEW

Altruistic surrogacy should be replaced with compensatory surrogacy. The regulatory mechanism should allow reasonable expenses and costs incurred by the surrogate mother including her diet (nutrition)/ upkeep/ the loss of earning / wages during Pregnancy. These are the pointers put forth in medical science as basic needs in pregnancy. The surrogacy bill should not curb these basic needs of mother to be & these basic requirements should not be mixed with commercial surrogacy. These are very different from each other.

The Bill has extreme views on commercial aspect of surrogacy & is mixing up basic maternal health needs with commercial surrogacy

3 Wait Period of (5) Five Years post marriage

Section 4 : (c) an eligibility certificate for intending couple is issued separately by the



appropriate authority on fulfilment of the following conditions, namely:—(II) the intending couple are married for at least five years and are Indian citizens

IMA & ISAR VIEW

The five year of duration after marriage is not logical & correct particularly in those cases where some congenital defects or serious medical disorders are present. Present and coming generations, marriages are taking place at a much later age due education / career etc. The slated law should further penalise them to wait for another five (5) years for becoming parents.

4 At least one of the Intending Couple should be genetically related to the child and in case of individual (single Parent), the individual shall be genetically related to the child. This shall facilitate the scope for egg donation Surrogacy.

5 Insurance of Surrogate mother with the Child The insurance to the surrogate child born through surrogacy should be included for the future of the child. In case of death of both male and female partners from the intended infertile couple during the gestational period, the insurance of the surrogate child born is very important. These intricacies need to be addressed in the bill.

6 Maternity benefit to the altruistic surrogate mother if she is working should be as per Government Law.

7 No Provision for LGBT and Single Parents While the slated act is for the entire Society, a section of society cannot be left out. There is no provision for LGBT community and also for the single woman, divorced/ widows. They are the ones who are in dire need of family.

8 Birth Certificate No provision has been made about the Birth Certificate to be issued. The birth certificate should be issued in the name of intended couple/Parent.

9 Privacy and Confidentiality of Surrogate No provision of confidentiality in the slated bill. In fact the clause of compulsory close relative only as surrogate is voiding the confidentiality of this most delicate issue.

10 No Surviving Child as a Precondition The Bill states, 'The intending couple have not had any surviving child biologically or through adoption or through surrogacy earlier', as a precondition. India does not have one child policy. So this precondition is unwarranted.

11 Professional involvements in regulatory boards Both in National and State Surrogacy Boards, professional experts from IMA & Indian Society for Assisted Reproduction should be included.

12 There is no term like "Human Embryologist" hence it should be replaced by "Clinical Embryologist".

13 The offence under this Bill has been considered as cognizable, non-bailable and non-compoundable which is too harsh and should be considered as non-cognizable offence and the Burden of proof should not be on the doctor to prove the innocence.



IMA HQs. Standing Committee For Medicolegal Cell



MEDICO LEGAL TIP No.- 1/2019

NATIONAL CONSUMER DISPUTES REDRESSAL COMMISSION NEW DELHI
CONSUMER CASE NO. BEFORE: HON'BLE MR. DR. S.M. KANTIKAR, PRESIDING MEMBER

Bushan Chimanlal Jain

...Petitioner

Vs

Dr. Chandru K.M. &Anr.

...Respondents

Dated : 27 Sep 2019

ALLEGATION:

- The OP-1 doctor casually examined the patient by putting stethoscope and gave treatment for simple throat infection and fever. He gave unnamed injection, few medicines from his clinic and prescribed some and called the patient on next day for lust and greed of earning money. The OP-1 also charged exorbitantly. The doctor prescribed inhalation of some camphor, menthol contained medicines i.e. Cap Karvol and Otravin nasal drop. He casually advised to take fruits like kiwi, khazoor and apple. Thus, OP-1 doctor ignored the serious condition i.e. the heart related problem of the patient. The doctor never asked the complainant no.1 (husband of the patient) to get done any tests for proper diagnosis though patient was complaining discomfort. According to the complainants, 'jaw' and 'ear' pain was due to blood clot which blocked near the ear and jaw and was creating trouble. It was further alleged that after taking Karvol inhaler, the blood clot might have moved very fast during 4-5 days from the ear. Further, the blood clot passed through brain but finally struck in the heart of the patient with so much force, which blasted the artery to the extent that there was a big patch of blood found in the anterior wall of the heart, which resulted in the immediate death of the patient by acute myocardial infarction (Acute MI).



- The Respondents Doctor whereas was working on his ordinary treatments of Cynus (C-Sinusitis) or bad throat etc giving medicines not required as per patient's grief & health complain, just to sell own dispensary medicines for greed of immoral money & never preferred or appreciated by going into the depth of the complaint & grief of suffering patient his/hervows & having lack of skills & knowledge, never referred his deceased patient to urgently meet Heart-Specialist & the deceased patient be taken to the famous Apollo or Fortis Hospital for complete body checkup / in particulars "Heart Check Up", which the surviving complainants have gained knowledge & learnt more of these modalities than of the Respondents Doctor upon meetings such tragedy.

REPLY:

- It was submitted that on 24.01.2017 the complainant took his wife (patient) at opposite parties' clinic with the complaint of headache, block nose, ear pain and sore throat. She did not complain of any chest pain. The opposite party No. 1 examined the patient, checked her blood pressure, it was normal 120/80 mm of Hg. The heart and chest examination was normal. There was no chest pain or breathlessness. The throat was infected. Based on the signs and symptoms of patient, the OP No. 1 doctor administered injection Gentamycin and prescribed medicines Paracetamol, Gellusil, Karvol, Tablet Zifi 200 and Otrivinnasal drops. The patient was much better on the next two days, therefore same medicines were continued for further two days. Patient was also advised to take cervical x-ray, but the patient did not turn up thereafter. The complainants used filthy language in the legal notice dated 27.06.2017 and made many defamatory allegations. As per the PM report, the cause of death was natural and it was not related with the treatment.



FACT OF THE CASE:

- Perused the PM report issued by NMMC General Hospital - Post Mortem Centre, Vashi. It is stated that, "history of fall in bathroom on 29.01.2017 at about 07.30pm. Admitted in Govt. hospital and she died at 20.30 pm". "DC shock given over chest - whitish pinkish. IV marks on Rt side of the neck, reddish. The heart revealed: "Pericardial cavity contains 100cc blood clot. A haemorrhagic patch of infarction seen over anterior wall 3x3cm. Greyish whitish decalcified plaques of atherosclerosis seen at the base of great vessels. Ostia of both the coronaries narrowed significantly. Thrombi seen in Circumflex artery." As per post mortem report, the opinion - probable cause of death "acute myocardial infarction".

COURT OBSERVATION:

- After examination treated the patient accordingly. As per the medical record of Terna Hospital and the PM report, admittedly the patient died due to cardiac arrest - acute myocardial infarction. Complainant No.1 had made vague attempts to prepare complaint based on findings in the PM report. Thus, the complainant's theory of "rotation of Big Blood Clot" (supra- paras 12 and 13) is just an imagination and not acceptable medically.
- The complainants alleged that the OP-1 has not referred the patient to Cardiologist or higher centre. It is clear from the prescription that from 24.01.2017 to 28.1.2017 the patient showed symptoms of fever, body pain, throat infection. OP No. 1 treated the patient with proper medicines. There were no symptoms suggestive of cardiac ailments, thus, OP No. 1 did not refer the patient. Thus, it was not negligence. Moreover, the patient and her husband failed in their prudence though they were educated and doing pharma business and supposed to have adequate medical knowledge.



- It is quite surprising to note that the complainant no.1 was aggrieved because OP-1 charged Rs.100/- as a fee to explain PM report. I do not find any wrong with the OP-1, it was his professional fee and he has every right to demand it.

COMMENTS:

This judgment will become a landmark judgment on several sensitive issues.

- **The imagination of the patient's attenders and the language of the Advocate who has represented have been reproduced here to understand the competence of the people who represent against the Doctors / Hospitals.**
- **It seems more like science fiction when it was enlisted how the 'BLOOD CLOT' has traveled in the human system to BLAST in the Brain and Heart.**
- **The knowledge of the patient and attenders were taken into consideration by the court and a reference was also mentioned in the Judgment. Hence forth we can quote this judgment when educated persons express ignorance of the medical facts when it is explained or consent expressed for treatment.**
- **Doctor has the right to charge the patient for the services he does, such as explaining the Postmortem report in this case.**



IN THE SUPREME COURT OF INDIA
Criminal APPELLATE JURISDICTION

CRIMINAL APPEAL NO. 770 OF 2009

Anjana Agnihotri & Anr.Appellant(s)

Vs.

The State of Haryana & Anr.Respondent(s)

O R D E R

This Appeal is directed against the judgment dated 23.04.2008 of the Punjab and Haryana High Court whereby the High Court upheld the order of Additional Sessions Judge dated 24.09.2004 by which the order dated 30.11.2000 of the learned Sub-Divisional Judicial Magistrate, Dabwali discharging the appellants for having committed offences under Section 304A Indian Penal Code, 1860 and Section 18-C/27-B of the Drugs and Cosmetics Act, 1940, was set aside.

The prosecution story is that Santosh Rani (deceased) was admitted to the Agnihotri Hospital run by the appellants herein. On 15.11.1998 at about 5.00 a.m. Santosh Rani was expecting a child and she was advised caesarian operation. Such operation was conducted at about 8.00 a.m. and a male child was born. After the birth of the child the doctors felt that blood was required to be given to Santosh Rani. Thereafter, her husband Nand Lal and brother Bhajan Lal offered to give blood and this blood was taken

Digitized by
eScribe
Date: 2020/02/13
12:30 AM
Page No. 78



and transfused to Santosh Rani at about 2.30 p.m. At about 2.00 a.m. the next morning Santosh Rani expired. Thereafter, Mulkh Raj, brother of the husband of the deceased filed an FIR with the police. It is important to note that in the FIR it is stated that in the hospital the blood of Nand Lal and Bhajan Lal was taken by the dispenser and Dr. Agnihotri of the hospital. It is further stated that these two persons tested the blood and transfused it to Santosh Rani and oxygen was also administered.

The main allegation against the appellants in the case is that they did not attend to Santosh Rani from 2.30 p.m. to 2.00 a.m. The Trial Court on the application of the accused discharged them relying upon the judgment of this Court in Jacob Mathew vs. State of Punjab & Anr. (2005) 6 SCC 1 case. The Additional Sessions Judge set aside the order of discharge and the order of Additional Sessions Judge in revision has been upheld. In Jacob Mathew's Case this court clearly held that in criminal law medical professionals are placed on a pedestal different from ordinary mortals. It was further held that to prosecute the medical professionals for negligence under criminal law, something more than mere negligence had to be proved. Medical professionals deal with patients and they are expected to take the best decisions in the circumstances of the case. Sometimes, the decision may not be correct, and that would not mean that the medical professional is guilty of criminal negligence. Such a medical profession may be liable to pay damages but unless negligence of a high order is shown the medical



professionals should not be dragged into criminal proceedings. That is why in Jacob Mathew's case (supra) this Court held that in case of criminal negligence against a medical professional it must be shown that the accused did something or failed to do something in the given facts and circumstances of the case which no medical professional in his ordinary senses and prudence would have done or failed to do. Therefore, this Court also directed in such cases an independent opinion of a medical professional should be obtained in this regard. We may make reference to the following observations in Jacob Mathew's case (supra). While concluding the judgment this Court gave certain guidelines. We need not refer to all, however Para 48(7) which is relevant is as under:

"(7) To prosecute a medical professional for negligence under criminal law it must be shown that the accused did something or failed to do something which in the given facts and circumstances no medical professional in his ordinary senses and prudence would have done or failed to do. The hazard taken by the accused doctor should be of such a nature that the injury which resulted was most likely imminent."

Further this court held in para 52 as under:

"The investigating officer should, before proceeding against the doctor accused of rash or negligent act or omission, obtain an independent and competent medical opinion preferably from a doctor in government service, qualified in that branch of medical practice who can normally be expected to give an impartial and unbiased opinion applying the Bolam test to the facts collected in the investigation."



In the present case the appellants failed to obtain any opinion of an independent doctor. The postmortem report does not show that the death of Santosh Rani had occurred due to the transfusion of blood. The only negligence that could be attributed to the accused is that they carried out the blood transfusion in violation of some instructions issued by the Chief Medical Officer that blood should be obtained from a licensed blood bank and that no direct blood transfusion from the donor to the patient should be done. In our opinion even if this is true the negligence is not such as to fall within the ambit of Jacob Mathew's case (supra).

In view of the above, we set aside the judgment of the High Court and restore the order of the trial court and discharge the appellants.

The Appeal is accordingly allowed.

Pending application(s), if any, shall stand(s) disposed of.

.....J.
(DEEPAK GUPTA)

.....J.
(HEMANT GUPTA)

New Delhi;
6th February, 2020.



ITEM NO.102 COURT NO.14 SECTION II-B

S U P R E M E C O U R T O F I N D I A
R E C O R D O F P R O C E E D I N G S

Criminal Appeal No(s). 770/2009

ANJANA AGNIHOTRI & ANR. Appellant(s)

VERSUS

THE STATE OF HARYANA & ANR. Respondent(s)

(List the matter on 04.2.2020. (Ref.: R/P dated 23.10.2019))

Date : 06-02-2020 This appeal was called on for hearing today.

CORAM :

HON'BLE MR. JUSTICE DEEPAK GUPTA
HON'BLE MR. JUSTICE HEMANT GUPTA

For Appellant(s) Mr. Vivek Sharma, Adv.
Mr. Vivek Narayan Sharma, AOR

For Respondent(s) Mr. Atul Mangla, AAG.
Mr. Enderjeet, Adv.
Mr. Prince Jindal, Adv.
Mr. Ashish Kaushik, Adv.
Mr. Vishwa Pal Singh, Adv.
Dr. Monika Gusain, AOR

UPON hearing the counsel the court made the following
O R D E R

The Appeal is allowed in terms of the signed order.
Pending applications, if any, stand disposed of.

(SUMAN WADHWA)
AR CUM PS

(PRADEEP KUMAR)
BRANCH OFFICER

Signed order is placed on the file.



Be a Member

of

- ACADEMY OF MEDICAL SPECIALITY
- C.G.P. I.M.A. G.S.B.
- HEALTH SCHEME
- SOCIAL SECURITY SCHEME
- NATIONAL SOCIAL SECURITY SCHEME
- PROFESSIONAL PROTECTION SCHEME
- FAMILY WELFARE SCHEME
- HOSPITAL BOARD OF INDIA