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

GUJARAT MEDICAL JOURNAL
INDIAN MEDICAL ASSOCIATION, GUJARAT STATE BRANCH

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IMA NATCON - 2021, PATNA



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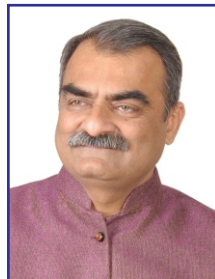
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Dr. Parth N. Patel Ahmedabad



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



Dear Members

“My will shall shape the future. Whether I fail or succeed shall be no man's doing. I am the force; I can clear any obstacle before me or I can be lost in the maze. My choice is my responsibility. Win or lose, only I hold the key to my destiny.”

Since the spate of cases in Covid had drastically declined, the last few months saw a lot of frenetic activity and people were slowly trudging into their daily routine. It was during these times that the medical fraternity breathed a sigh of relief and settled themselves into their normal activities. As we focus on the positive, we think fewer negative thoughts and develop a better attitude and gain a more optimistic approach to life.

The National Conference of Indian Medical Association was held in Patna, Bihar and was well attended by all members and adequately represented by all branches across the country.

This event needs a special mention since many of our branches and members were felicitated for their yeomen service to society. Hence, a few words of appreciation and commendation to all awardees who deservedly received one of the highest honours in medical practice from the national committee of IMA.

A special word of mention for Dr. Gargi Patel for being elected as the National Vice President of IMA, H.Q., New Delhi. Our admiration is immeasurable and we hold her in high esteem for her utopian achievement.

Melancholy is just an adjective to define the current scenario across the country and especially our state. We are again caught up in the throes of the 3rd wave. But various adjudicators have different opinions. We as



doctors are still battling an unnerving virus which is not ready to give up. Thankfully, this time over the admission rate and mortality is significantly lower and it seems the virus is dying a slow death.

Let us hope for the best and maintain all necessary precautions in such inimical times. A sincere advice to all our doctors – request you to keep up the morale of all your patients and help them tide this crisis in a healthy and prudent manner.

*“Accentuate the positive,
Eliminate the negative,
Latch on to the affirmative.”*

The timely intervention of the government machinery has really aided us in managing and treating the deluge of patients that keep knocking our doors throughout the epidemic. Once again, our health department is in the forefront and is helping us to efficiently manage the current barrage of cases. Our team had a conducive meeting with our **Union Minister of Health, Shri Mansukhbhai Mandavia** and **State Health Secretary, Shri Manoj Agrawal**.

They have assured us of all possible cooperation and guidance and will roll out the services of all government accoutrements if need be.

They say – justice delayed is justice denied. But timely intervention by the IMA HQ has brought us decisive results. Congratulations to all students appearing for their admissions in UG, PG and the super specialty branches of medicine. We fervently wish that the process gets completed smoothly and efficiently this time over.

We request all branches to expedite the process of updating of digital data and emails for effective and efficient communication. Any suggestions or recommendations are welcome and we hope to serve you better in the coming year through our network of communications.

Dr. Paresh M. Majmudar
(President, G.S.B., I.M.A.)

Dr. Mehul J. Shah
(Hon. State Secy., G.S.B., I.M.A.)

**CENTRAL COUNCIL MEETING**

The 96th National Annual Conference of Indian Medical Association 82nd Annual Meeting of Central Council of IMA 27th and 28th December, 2021 at Babu Sabhagar / S.K. Memorial Hall, Gandhi Maidan, Patna, Bihar.

Following members from our state attended the conference /Meeting.

1. Dr. Ketanbhai Desai Ahmedabad
2. Dr. Jitubhai Patel Ahmedabad
3. Dr. Paresh Majmudar Vadodara
4. Dr. Parimal Desai Ahmedabad
5. Dr. Gargi Patel Ahmedabad
6. Dr. Yogendra S. Modi Ahmedabad
7. Dr. Bipin M. Patel Ahmedabad
8. Dr. Devendra R. Patel Ahmedabad
9. Dr. Kamlesh Saini Ahmedabad
10. Dr. Mahesh Patel Ahmedabad
11. Dr. Navneet Patel Ahmedabad
12. Dr. Dilip Gadhavi Ahmedabad
13. Dr. Abhay Dixit Ahmedabad
14. Dr. K.R. Sanghavi Ahmedabad
15. Dr. Monaben Desai Ahmedabad
16. Dr. Rashmikant Dave Ahmedabad
17. Dr. Vandana Saini Ahmedabad
18. Dr. V. T. Parmar Bhavnagar
19. Dr. Kairavi Joshi Bhavnagar
20. Dr. Anil Nayak Mehsana
21. Dr. Rajendra Jain Mehsana
22. Dr. Vrinda Oza Rajkot
23. Dr. Swati Popat Rajkot
24. Dr. Pragnesh Joshi Surat
25. Dr. Girish Modi Surat
26. Dr. Parul Vadgama Surat
27. Dr. Vipul Chaudhary Surat
28. Dr. Hiral Shah Surat
29. Dr. Chandrakant B. Patel Surat



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

12-01-2022 Dr. Mehul J. Shah, Hon. State Secretary, Dr. Bipin M. Patel, Chairman, PPS GSB IMA, Dr. Tushar B. Patel, Hon. Treasurer, IMA GSB and and Dr. Dilip B. Gadhavi, President AMA. attended meeting with Chief Health Secretary, Shree Manoj Agarwal, regarding Covid Wave Management, Telemedicine & Role of IMA at Gandhinagar.

* * * * *

Meeting of IMA Doctor with Union Minister of Health Shri Mansukhbhai Mandavia

Meeting of 123 Doctors from IMA, ICMR, AIIMS and Health Officers was held with Union Minister of Health Shri Mansukhbhai Mandavia on date 11-1-2022 regarding COVID Third Wave.

Follwing members of Gujarat State Branch IMA, participated and given their inputs.

- (1) Dr. Mehul Shah (Secretary GSB, IMA)
- (2) Dr. Anil Nayak
- (3) Dr. Atul Pandya
- (4) Dr. Tejas Patel

It is decided to form WhatsApp group of all 123 doctors to share information of Local Level. Preperedness about hospital Beds, Oxygen and ICU Facility, was discussed in details.

It is also decided to form committees at district level for better co-ordination and management.

* * * * *

IMA Meeting For Issues related sector Medical Insurance companies

Online meeting on Grievance against public sector Medical Insurance companies was held by IMA GSB office bearers and various members on date : 02-01-2022.

Issues faced by our members like charges of PPN packages & other charges, Transparent process of cashless empliment of hospitals and charges. Stadardization of agreement etc. are discussed in details and inputs taken from all members



NEW LIFE MEMBERS

I.M.A. GUJARAT STATE BRANCH

We welcome our new members

L_M_No.	NAME	BRANCH
Ahmedabad		Ahmedabad
LM/30566	Dr. Bhattar Rohit	LM/30596 Dr. Shah Parth Nalinkumar
Kamalkishor		LM/30597 Dr. Shah Kush Pareshbhai
Kapadwanj		LM/30598 Dr. Rajput Manharsinh Ajitsinh
LM/30567	Dr. Doshi Varun Hemantkumar	LM/30599 Dr. Patel Gaurav Bharatbhai
Mehsana		LM/30600 Dr. Sheth Dhvani Palakbhai
LM/30568	Dr. Panchal Pankaj M.	LM/30601 Dr. Shah Rajvi Riteshbhai
Bharuch		LM/30602 Dr. Patel Alpesh Shankerlal
LM/30569	Dr. Trivedi Nisarg Pareshbhai	LM/30603 Dr. Patel Vaidehi Alpeshkumar
Navsari		LM/30604 Dr. Shah Priyam Ajaybhai
LM/30570	Dr. Dhada Danish M.Shafi	LM/30605 Dr. Parikh Archit Praybhai
LM/30571	Dr. Patel Nehakumari A.	LM/30606 Dr. Shah Anand Mukeshbhai
Anand		LM/30607 Dr. Prajapati Bhargav Shakarabhai
LM/30572	Dr. Shah Jinal Ronakbhai	LM/30608 Dr. Patel Jaimin Chaturbhai
LM/30573	Dr. Rathod Asmita Vinubhai	LM/30609 Dr. Nayak Sarita Keshavbhai
LM/30574	Dr. Prajapati Vipul Kantibha	LM/30610 Dr. Mavani Jatin Tulsibhai
LM/30575	Dr. Ahgera Tulsi Chunilal	LM/30611 Dr. Rana Hiren Arvindbhai
Surat		LM/30612 Dr. Desai Hitendra Pravinbhai
LM/30576	Dr. Noticewala Vaibhavee V.	LM/30613 Dr. Acharya Hriday Prashantbhai
LM/30577	Dr. Katrodiya Hardik Arvindbhai	LM/30614 Dr. Sutaria Rini Rajivbhai
LM/30578	Dr. Dhameliya Jaydeep Dhirubhai	LM/30615 Dr. Sharma Shivangi Maheshkumar
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CONGRATULATIONS

★ **Dr. Mukesh P. Jagiwala** (Surat)
Being Centurion Blood Donor 158 times whole Blood Donation,
felicitated by Mahavir International Foundation by Fourteenth
June "World Blood Donors' Day

* * * * *

OBITUARY

We send our sympathy & condolence to the bereaved family



Dr. Rameshchandra N. Mehta

(11/03/1936 - 06/12/2021)

Age : 86 years
Qualification : MS Ophthalmology
Name of Branch : Godhra

* * * * *

Dr. Dinesh N. Patel	29-11-2020	Ahmedabad
Dr. Narendra T. Vani	22-04-2021	Ahmedabad
Dr. V.V. Dixit	09-10-2021	Ahmedabad
Dr. Pratima B. Shah	15-10-2021	Morbi
Dr. Rajubhai J. Mayatra	25-10-2021	Devgad-Baria
Dr. Balkishan N. Desai	12-12-2021	Ahmedabad
Dr. Niranjan N. Doctor	13-12-2021	Ahmedabad
Dr. Kirit B. Shah	19-12-2021	Ahmedabad
Dr. Jaladhi M. Parikh	28-12-2021	Ahmedabad

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

**BRANCH ACTIVITY****AMRELI**

- 07-01-2022 “General aspect of malignancy” by Dr. Pooja Tanna.
“Case discussion of head and neck malignancy”
by Dr. Khyati Vasavada.

GANDHIDHAM

- 02-11-2021 Blood Donation camp. Total 68 Blood Units were collected.
16-11-2021 Blood Donation camp. Total 68 Blood Units were collected.
12-12-2021 Camp on Shram Card with the help of Labour Commissioner for Staff and their Family members and cover upto 2 Lakhs Rupees. Total 74 Shram Card has made.
26-12-2021 Mega Free Camp. Total 250 patients has been given free medicine with consultation.
05-01-2022 Interactive webinar CME on Omicron, around 1200 doctors have registered by Dr. T. Jacob John and Dr. N.K. Arora.
11-01-2022 Meeting with Govt. about Omicron Increasing cases.

MEHSANA

- 22-12-2021 “Screening and Early Diagnosis in Breast Cancer” by Dr. Nupur Patel.
“Treatment and management approaches in Breast Cancer” by Dr. Akash Patel.
“Biopsy” by Dr. Rajendra Solanki.
29-12-2021 Scientific CME.
CME on
1) Molecular genetics and fight against infections
2) RT-PCR Application in Diagnostic Settings and
3) Interpretation of RT-PCR result” by Dr. Panjak Chaudhari,
Dr. Nidhi Chaudhary and Dr. Manan Patel.
08-01-2022 IMA Mehsana Branch had participated in North Gujarat IMA Cricket Tournament, organised by IMA Visnagar Branch.



16-01-2022 Loving memory of Dr. Ashok D. Kanodia, Mehsana branch has organised Aao Gaon Chalen Community Services programme with Blood Donation Camp & Health Check up Camp at Vijapurda

MORBI

01-10-2021 Blood Donation Camp. Total 17 Units blood were collected.

01-12-2021 "Re Orientation Workshop PC and PNDT Act. 1994" by Dr. Katira

04-12-2021 Free Medical Camp.

05-12-2021 Free Diagnostic Camp for IVF & Testtube baby. Total 50 patients were benefited.

10-12-2021 "Revision of Renal System cases with recent advances" by Dr. Dimpy Gohi. Total 18 members were present.

11-12-2021 Weight Loss Surgery camp by Dr. Mehul Vikani. Total 8 patients were benefited.

12-12-2021 Free Blood Sugar Check up camp & talk about Diabetes. Total 54 patients were benefited,

25-12-2021 "Rotator cuff injury of shoulder" by Dr. Kaushal Patel.
"Emergency in neurosurgery-when refer to neurosurgeon" by Dr. Nidhikumar Patel
"Anaesthatic consideration in high risk HIP and Spine Surgery" by Dr. Mayur Santoki, Dr. Amish Sanghavi & Dr. Bhavesh Sachde. Total 18 members were present.

26-12-2021 Free Diagnostic Camp. Total 118 patients were benefited.
Otorcraft 2021 live ear surgery workshop. Total 5 surgeries ere done.
Free operative camp. Total 8 patients were benefitted.

NADIAD

19-12-2021 Sports event and Kids awards distribution.

PALANPUR

02-10-2021 Camp on Diabetes & its effects. 50-60 patients were benefitted.



- 29-10-2021 "Covid-19 3rd Wave Preparation & Dengue fever management (Do'S and don'ts) by Dr. Kamlesh J. Upadhyay.
- 18-12-2021 "Approach to Arthritis" Special Focus on Chikangunia" by Dr. Ratviz Mistry.

PALITANA

- 17-12-2021 CME on "Trauma & Head Injury" by Dr. Dijesh Shah, (MS Neuro Surgeon).
- 04-01-2022 CME on "Birds view on TMT Angiography & Angioplasty" by Dr. Varun Sibbal
- CME on "Brief over view on oral and maxillofacial surgery Sub-mucous fibrosis and its management" by Dr. Hiren Dungarani.

RAJKOT

- 28-11-2021 Organ donation activity at multiple ICU.
- 25-12-2021 Health checkup camp.
- 07-01-2022 Webinar on Newer Corona Variant for general public awareness with expert panel doctors live answers of questions from public were given regarding Corona diagnosis and management & vaccines.

* * * * *

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.



Report of IMA Community Services Day under banner of Aao Gaon Chalen Programme in memory of Late Dr. Ashok D. Kanodia - Social Service Activity, Ahmedabad Branch

In loving memory of late Dr. Ashok Kanodia, who has dedicated his life for welfare of the society, on his death anniversary, IMA GSB, AMA & organized a small event of social service. The notebooks were distributed to the needy & less privileged students. The event was arranged at Sarswati school, Maninagar EAST in presence of Dr Mehul Shah, Hon secretary, IMA GSB. The occasion was graced by Dr. Jaswant Darbar, past president, AMA; Dr. Hiren Shah, President, MMA & Dr Vishal Shah, secretary, MMA. Very large number needy students along with many teachers & administrative staff of the school were present.

* * * * *

Report of IMA Community Services Day under banner of Aao Gaon Chalen Programme in memory of Late Dr. Ashok D. Kanodia - Medical Camp (Old Age) Rajkot Branch

IMA Rajkot is happy to share that, IMA Rajkot had conducted health check-up camp in "Sadbhavna Vrudhashram-Rajkot" (Old Age Home) in regarding IMA Community Service Day. This camp had expert panel of doctors who rendered their valuable services. Blood pressure measurement, diabetic profile, gynaecology related issues, skin problems, orthopaedic related issues were evaluated and diagnosed and treated. We extended our humanitarian approach by not only conducting camp for single time but all patients having or diagnosed with any disease, our team will be treating them in future too. More than 100 old aged patients were benefitted in this camp.

IMA Rajkot team was led by President, Hon. Secretary and all senior renowned consultants of Rajkot and this camp was conducted on 9th January 2022 (Sunday) preponed because of the current prevailing COVID-19 pandemic.

Once again we are thankful to IMA Rajkot team and IMA GSB team for giving us opportunity to serve the needy and get blessings of elderly patients.

Dr Praful Kamani
President

Dr Dushyant Gondalia
Hon. Secretary

Dr Amit Agravat
Vice President, IMAGSB

**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.

RENEWAL NOTICE : 2022-2023

For the FY 2022-23 Annual Membership Contribution will be as below:

MBBS : . 100/- Specialists : . 500/-

Office Time for Payment : 2-00 p.m. to 6-00 p.m.

LAST DATE OF PAYMENT 31-03-2022

Dear Member,

““For the FY 2022-23 annual membership contribution will be as below :
MBBS- Rs. 100/- Specialists- Rs. 500/-.

For the subsequent years fee structure will be as per the committee's decision.

Thanking You - **Professional Protection Scheme, GSB, IMA**

Professional Protection Scheme has already sent a notice along with a Renewal Application form for renewing the membership before **31st March, 2022** for the year 2022-2023 **"By Registered Post January 2022** to all the members.

We request you to draw kind attention towards the constitution of P.P.S.G.S.B.I.M.A.

- Clause 10/B :-** A member who does not pay the annual membership fee in advance – before 31st March (before the expiry of the indemnity cover) shall be discontinued without any notice.
- Clause 10/C :-** However if a discontinued member wants to revive his/her membership within one month of the expiry of the indemnity cover he/she shall pay annual membership fee only, but the indemnity covered shall be provided from the day of revival of the membership.”
- Clause 10/D :-** After one month if a member wants to rejoin the scheme, he/she shall be treated as a new member and he/she shall have to pay admission fees as well as annual membership fees.”

For Online : **Renewal**
Please visit our
Website : www.ppsgsbima.com

Bm Patel
Dr. Bipin M. Patel
Chairman



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

“P. P. S. House”, Beside Sakar-V Building, Nr. Mithakhali Railway Crossing,
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Website : www.ppsgsbima.com

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

Sub. : Renewal Notice : 2022-2023

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.	12879	Dr. Bhuva Kaushik Vallabhdbhai	Amreli
2.	5507	Dr. Bhansali Darshan Ramkrishna	Ahmedabad
3.	15495	Dr. Chandarana Mitesh Vinodray	Ahmedabad
4.	11054	Dr. Kathiriya Manoj Vallabhdbhai	Ahmedabad
5.	12455	Dr. Nayak Biren Harshvadanbhai	Ahmedabad
6.	9029	Dr. Mehta Avani Bhavinkumar	Ahmedabad
7.	1378	Dr. Mehta Dhiren Sumanlal	Ahmedabad
8.	10525	Dr. Mehta Manish Rashmikant	Ahmedabad
9.	2448	Dr. Panchal Jashbhai Cahndubhai	Ahmedabad
10.	1484	Dr. Pandya Anjanaben Chandrark	Ahmedabad
11.	11850	Dr. Patel Amrita Devang	Ahmedabad
12.	12812	Dr. Patel Chirag Prahladbhai	Ahmedabad
13.	11849	Dr. Patel Devang Manibhai	Ahmedabad
14.	10039	Dr. Patel Dhrameshkumar Nandubhai	Ahmedabad
15.	12920	Dr. Patel Hiren Fuljibhai	Ahmedabad
16.	12919	Dr. Patel Snehal Hiren	Ahmedabad
17.	10768	Dr. Patel Sunilkumar Chhabildas	Ahmedabad
18.	8075	Dr. Purohit Apurv Dineshkumar	Ahmedabad
19.	8377	Dr. Radadiya Minakshi Rajnikant	Ahmedabad
20.	15605	Dr. Sanghvi Saumil Bhupeshbhai	Ahmedabad
21.	11133	Dr. Shah Rushabh Girishkumar	Ahmedabad
22.	12712	Dr. Shah Vidhi Shripal Kumar	Ahmedabad



23.	12659	Dr. Vaghela Shaktisinh Nareshkumar	Ahmedabad
24.	8990	Dr. Surati Pranavbhai Narendrakumar	Ahmedabad
25.	9083	Dr. Joshi Rohit Narawjibhai	Ahmedabad
26.	4013	Dr. Desai Sarvang Madhukarbhai	Ahmedabad
27.	5508	Dr. Bhansali Parul Darshan	Ahmedabad
28.	16585	Dr. Singhal Roopesh Rameshchandra	Ahmedabad
29.	11318	Dr. Patel Tarak Narayandas	Ahmedabad
30.	11883	Dr. Sagar Ameeta Prashantbhai	Bharuch
31.	9169	Dr. Ghelani Rupal Manojbhai	Bhavnagar
32.	15997	Dr. Zinzala Dineshkumar Gagjibhai	Bhavnagar
33.	89	Dr. Joshi Subhash Hirjibhai	Kalol (Ng)
34.	12929	Dr. Dharsandia Hardip Kishorbhai	Rajkot
35.	11044	Dr. Khambhaita Amit Nanalal	Rajkot
36.	14364	Dr. Ganatra Bhakti Mukeshbhi	Rajkot
37.	16235	Dr. Bhimani Sagar Pravinkumar	Rajkot
38.	8529	Dr. Bhushan Yashpal Keshavlal	Surat
39.	12334	Dr. Halvawala Miteshkumar Dilipkumar	Surat
40.	1472	Dr. Martin Pradipkumar Ishwardas	Surat
41.	8530	Dr. Patel Nilam Karsanbhai	Surat
42.	16678	Dr. Prajapati Rajesh Bhikhabhai	Surat
43.	13122	Dr. Yagnik Keyur R.	Surat
44.	8613	Dr. Karia Jagdish Bhagwanji	Vadodara
45.	2452	Dr. Nayak Siddhartha R.	Vadodara
46.	12641	Dr. Patel Hemantkumar B.	Vadodara
47.	16707	Dr. Shah Gajendrasinh Manjibhai	Vapi

* * * * *

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પ્રાઈવેટ ક્લીનીકના ડોક્ટર્સ તેમજ ફટલાઈન મેડિકલ વર્કસ માટે કોવિડ પ્રિકોશન ડોઝનું આયોજન

ગાંધીનગર, તા.૧૩ ઈ-લેન મેડિકલ એસોસિએશનના પીએનએન તેમજ ગાંધીનગર મહાનગરપાલિકાના સંયુક્ત ઉપક્રમે ગાંધીનગર જિલ્લાના પ્રાઈવેટ ક્લીનીકના ડોક્ટર્સ તેમજ ફટલાઈન મેડિકલ વર્કસ માટે કોવિડ પ્રિકોશન ડોઝનું આયોજન નગરપાલિકા પરિષદ ભવન સેક્ટર-૧૧ ખાતે કરવામાં આવ્યું હતું. આ પ્રસંગે જિલ્લામંત્રીશ્રી ડો.કરંજી ભોંડોલિયાના નેતૃત્વમાં ડોક્ટર્સ મેડિકલ એસોસિએશનના પ્રમુખ ડો. અનિલ ચૌહાણ, ઉપપ્રમુખ ડો.કલ્પેશ પરીખ, ડો.રશ્મિ પ્રજાપતિ, ગુજરાત રાજ્ય અર્બન હેલ્થમાંથી ડો.દિનેશ



પ્રમુખ ડો. અનિલ ચૌહાણ, ઉપપ્રમુખ ડો.કલ્પેશ પરીખ, ડો.રશ્મિ પ્રજાપતિ, ગુજરાત રાજ્ય અર્બન હેલ્થમાંથી ડો.દિનેશ

આઈએમએની મુંબેશ હેલ્થ 63 લોકોને રસી અપાઈ



સુરત : આઈએમએ-જીએસબી વેક્સિનેશન મુંબેશ હેલ્થ ટિલ્લી ગેટ ખાતે આવેલા ડો.વિનોદ સી.શાહની દિલ્લિટ પર 63 લોકોને કોરોના પ્રતિરોધક રસી આપવામાં આવી હતી. જેમાં 36 લોકોને પ્રથમ ડોઝ અને 27 લોકોને બીજો ડોઝ આપવામાં આવ્યો હતો.

ગાંધીનગર જિલ્લાના પ્રાઈવેટ દવાખાનાઓ ના તબીબો તેમજ ફટલાઈન મેડિકલ વર્કસ માટે કોવિડ પ્રિકોશન ડોઝ નો સુંદર આયોજન કરવામાં આવ્યું હતું.

આ પ્રસંગે ગાંધીનગર ઈન્ડિયન મેડિકલ એસોસિએશનના પ્રમુખ ડો.અનિલ ચૌહાણ

ઉપપ્રમુખ ડો.કરંજી ભોંડોલિયા, મુંબે ડો.રશ્મિ પ્રજાપતિ, ગુજરાત રાજ્ય અર્બન હેલ્થમાંથી ડો.વિનોદ સી.શાહના નેતૃત્વમાં ગાંધીનગર જિલ્લાના પ્રાઈવેટ ક્લીનીકના ડોક્ટર્સ તેમજ ફટલાઈન મેડિકલ વર્કસ માટે કોવિડ પ્રિકોશન ડોઝનું આયોજન નગરપાલિકા પરિષદ ભવન સેક્ટર-૧૧ ખાતે કરવામાં આવ્યું હતું.



સરકારીની ખાસ પ્રશાસક કરી હતી તથા સ્ત્રી સેવા વ્યાજના ઉચ્ચ કક્ષે નગરપાલિકાને પરિષદ કરવા જે અંગે દુબ સર્કલના આયોજકશ્રી ડો. મહિષા મોહિલા સહી હતી. આ કારણે ગાંધીનગર દવાખાનાઓના તબીબો તથા ડો.કરંજી ભોંડોલિયાના નેતૃત્વમાં ગાંધીનગર જિલ્લાના પ્રાઈવેટ ક્લીનીકના ડોક્ટર્સ તેમજ ફટલાઈન મેડિકલ વર્કસ માટે કોવિડ પ્રિકોશન ડોઝ આપવા મદદ માટે.

IMAએ સૂચવેલા વિકલ ઉપર નિર્ણય લઈ સરકારે એડમીશન પ્રક્રિયા પૂરી કરવી જોઈએ

વર્ષ 202૧ના પોસ્ટગ્રજ્યુએશનના વિદ્યાર્થીઓના એડમીશન ઘસા નહીં હોવાથી દેશભરની મેડિકલ કોલેજ સંકલન હોસ્ટેલને રેગીસ્ટર બરાબરીથી હલેનો કોરોનાના લોકો હલેનો સમય પણ ખરાબ ગાવી રાકે છે. ત્યારે ઈન્ડિયન મેડિકલ એસોસિએશન દ્વારા પ્રથમથી જ હાલના ઇસ્યુઓને સમલ મુલતવી રાખીને પ્રવેશ પ્રક્રિયા પાર પાડી દેવી જોઈએ સમીચી દેશભરના સંબંધિત રેસીડેન્ટ ડોક્ટર્સની અગત્ય નિશ્ચયી શકાય છે સમીચી કેન્દ્ર સરકારે આ અંગે ઝડપથી નિર્ણય લેવો જોઈએ તેવું રાજ્યના આઈએમએના પ્રેસીડન્ટ ડો પદેશ મજમુદારે જણાવ્યું હતું.

આ સમગ્ર કાર્યક્રમનું આયોજન ઈન્ડિયન મેડિકલ એસોસિએશન ગાંધીનગર તથા ગાંધીનગર મહાનગરપાલિકા ના સંયુક્ત ઉપક્રમે કરવામાં આવ્યું હતું.



સંકલનને સહીને ગાંધીનગર તબીબો સંગઠન અને સરકારી તંત્રો સાથે મેલ વેલ મિલિયન પુસ્તક સંબંધિત આ વેબીને ઉપલક્ષિતો તબીબોમાં નહીં પેરે છે.

વાયરસ સંદર્ભે ગાંધીધામમાં તબીબ ગોષ્ઠિ

ગાંધીધામ, તા. ૧૨ : આજના તબીબો સંગઠનની સાથે તમામ વેબીને સંબંધિત દાવા સંબંધિત મહાધારીને લઈને આનરપૂર્વિકાકરના પોષ્ટિક સંકલન મોડેલને લઈને આ ઉપક્રમ આઈ.એમ.એ. દ્વારા આરોગ્ય અને સહીતના કાર્યક્રમમાં આવી હતી. આ ઉપક્રમને આઈ.એમ.એ. દ્વારા આરોગ્ય અને સહીતના કાર્યક્રમમાં આવી હતી. આ ઉપક્રમને આઈ.એમ.એ. દ્વારા આરોગ્ય અને સહીતના કાર્યક્રમમાં આવી હતી.

વિષયના ૧૨૦૦ જેટલા ડોક્ટર્સ જોડાયા : માહિતીથી થઈ આપ-લે

અરોગ્ય અને મુખ સરકાર માહિતી આપી હતી. આ આયોજનમાં આઈ.એમ.એ.માં પ્રમુખ ભવનમાં આઈ.એમ.એ. મંત્રી મોહિલા પત્ની તથા ડો. નવીનમણી ઠક્કર, ડો. અરુણભાઈ સરદાર પ્રમુખના કક્ષમાં આવી. ગાંધીધામ આઈ.એમ.એ. શાખા દ્વારા આયોજિત મુખ સેવા સંબંધિત પ્રમુખ ડો. ભવનમાં આઈ.એમ.એ. મંત્રી સંગઠન સા માટે - 20 વિભાગ ઉપર પ્રશ્ન પાઠના જણાવ્યું હતું કે, આઈ.એમ.એ.માં આઈ.એમ.એ. મંત્રી સંગઠન તેને શબ્દો આપવા જોઈએ અને દરેક સંગઠનો

આવજા બનવું જોઈએ આ માટે એકામ મુખ જરૂરી છે. પાઠો આરોગ્ય નહીં પેરે માટે સરકારે આઈ.એમ.એ. પરિવાર બનાવ્યાં. મુખ સેવા માટે આઈ.એમ.એ. મંત્રી સંગઠનને લઈને સરકારી તંત્રો સાથે વેલ મેલ મિલિયન પુસ્તક સંબંધિત આ વેબીને ઉપલક્ષિતો તબીબોમાં નહીં પેરે છે.

અમદાવાદ મેડિકલ એસોસિએશન પસંદ કરેલા ડૉક્ટરો ટેલિફોનિક સેવા આપશે

અમદાવાદ, મંગળવાર - અમદાવાદમાં કોરોના કેસમાં વધારો નોપાઈ રહ્યો છે જેને લઈને હવે અમદાવાદ મેડિકલ એસોસિએશન મેદાને આવ્યું છે. તેમના દ્વારા કેટલાક ડોક્ટરોની પસંદગી કરવામાં આવી અને એ મુજબ ડોક્ટરોને સ્વોટ નક્કી કરી દેવામાં આવ્યા છે. પહેલા સ્વોટમાં ૪ ડોક્ટરો ડેગીનેટ કરવામાં આવ્યા છે જે સવારે ૯ થી ૧ વાગ્યા સુધી ટેલિફોનિક મદદ આપશે. બીજા સ્વોટમાં ૬ ડોક્ટરો

ડેગીનેટ કરવામાં આવ્યા છે જે બપોરે ૧ થી ૫ સુધી ટેલિફોનિક સમર્થનમાં રહેશે તે સાથે અન્ય ૫ ડોક્ટરો હશે જે સાંજે ૫ થી ૯ સુધી સેવામાં રહેશે. હાલ કોરોનાના દર્દીઓ હોમ આઈસોલેશનમાં રહે છે પણ ડિસ્કામ લોકો સોશિયલ મીડિયામાં ફરતા મેસેજ કે અન્ય કોઈની સલાહ થી જાતે સારવાર કરતા હોય છે જેના કારણે નુકસાન ખસ થતું હોય છે એવામાં હવે એમએમએ દ્વારા ડોક્ટરોના નમય જાહેર કરી લોકોની મદદ માટે આજબ આવ્યા છે.



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 December 2021 in addition to their routine work. These are as under :

01-12-2021 to 31-12-2021 : Intra domestic house to house survey & Covid-19 Vaccination by the centers of Ahmedabad

Rander - Surat : Mothers : 1000 Iron Tablet, were distributed

Nanpur - Surat : Mothers : 500 Calcium Tablets,

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 :

DECEMBER 2021

No.	Name of Center	New Case	Old Case	Total Case
(1)	Ambawadi (Jamalpur Ward)	1415	325	1740
(2)	Behrampura (Sardarnagar Ward)	1070	384	1454
(3)	Bapunagar (Potalia Ward)	1464	600	2064
(4)	Dariyapur (Isanpur Ward)	1332	100	1432
(5)	Gomtipur (Saijpur Ward)	3202	358	3560
(6)	Khokhra (Amraiwadi Ward)	1339	113	1452
(7)	New Mental (Kubernagar Ward)	1340	365	1705
(8)	Raikhad (Stadium Ward)	523	97	620
(9)	Wadaj (Junawadaj Ward)	1077	256	1333
(10)	Junagadh	—	—	—
(11)	Rander-Surat	—	—	—
(12)	Nanpura-Surat	—	—	—
(13)	Rajkot	1354	889	2243



DECEMBER - 2021

No.	Name of Center	Female Sterilisation	Male Sterilisation	Copper-T	Condoms (PCS)	Ocpills
(1)	Ambawadi (Jamalpur Ward)	22	—	34	9660	528
(2)	Behrampura (Sardarnagar Ward)	07	—	24	9600	1067
(3)	Bapunagar (Potalia Ward)	21	—	25	13294	224
(4)	Dariyapur (Isanpur Ward)	36	—	40	15575	818
(5)	Gomtipur (Saijpur Ward)	33	—	34	10650	429
(6)	Khokhra (Amraiwadi Ward)	30	—	40	4240	298
(7)	New Mental (Kubernagar Ward)	13	—	41	17900	669
(8)	Raikhad (Stadium Ward)	32	—	48	18900	767
(9)	Wadaj (Junawadaj Ward)	18	—	32	16000	2825
(10)	Junagadh	41	—	50	7000	216
(11)	Rander-Surat	07	—	07	530	36
(12)	Nanpura-Surat	17	—	57	1870	55
(13)	Rajkot	02	01	36	3000	288



COVID-19 Vaccines For Children

Key words: COVID 19 vaccination, Booster for COVID vaccine, Childhood vaccination

Abstract: Children are the most vulnerable population for COVID 19 infection. In addition to disease, they have a domino effect on overall development. Few vaccines like Covaxin&Pfizer/BioNTech are approved for use in paediatric population. In India, Children between 16 - 18 years are offered vaccination. In USA different vaccines & schedule are offered to children above 5 years of age. We need to monitor these vaccinated children for any short term or long term effect. The benefits of COVID 19 vaccination outweigh the known & potential risks. Remember – No one is safe until everyone is safe.

Introduction: Childhood is one of the most vulnerable periods for falling seriously ill. This is the period when protection is most needed, and thus children have traditionally been the primary recipient of vaccines. In fact this is for the first time that a vaccine is approved for use first in adults though the disease is prevalent both in adult & paediatric population. Now the question to be answered is whether we need to vaccinate children & if yes, when ?

THE NEED FOR COVID-19 VACCINES FOR CHILDREN

- Children under the age of 18 years form a large proportion of the population (41 % in India and [32% globally](#)). [So it is essential to protect a population which constitute more than a quarter of the total population. Without it pandemic control is not possible. This will be even more important as more & more adult population is covered under the vaccine umbrella.](#)
- Children usually have mild COVID 19 infection. Although they account for [1 in 9 SARS-CoV-2 infections, they constitute only 2% of all hospitalisations. Most infections in children are mild and they recover fully. Serious illness is rare, but well-described; this includes potentially deadly condition Multisystem Inflammatory Syndrome in children \(MIS-C\). Additionally, Children with other health conditions, such as obesity, diabetes and asthma, might be at higher risk of serious illness with COVID-19.](#)
- Children when infected, become a source of transmission of virus. So till all children are protected, they will continue to transmit the disease & control of pandemic will not be possible.
- Keeping schools open for off line classes is critical for children's education and development. In order to improve the presence, it is very crucial to guarantee sufficient protection to children.



So having a large cohort of unvaccinated and susceptible children, despite their lower risk of infection and transmission, can become significant if cases in the community begin to rise. Add to it is the ethical principle of distributive justice. It states that, the benefits and burdens should be distributed among society's members in a just manner. So considering all these points, children should be offered COVID 19 vaccine.

COVID-19'S DOMINO EFFECT ON CHILD HEALTH AND WELL-BEING

The overall effects of COVID-19 on children have been calamitous. Education is clearly suffering. Mental health issues are on rise. This includes anxiety, fear, depression, suicidal tendency & emotional distress. Closing schools also mean disruption in physical activity and routines and loss of access to a wide range of school-provided services such as school meals, health, nutrition and services targeted to children with special needs such as learning support, speech therapy and social skills training.

Many of these problems stem from societal pandemic responses and are not the direct effects of the virus on children. While we keep the focus on continuing safety measures, we must also plan safely opening up the world. Getting the world back to a place of safety and normalcy is a priority for public health, governments and society.

NO ONE IS SAFE UNTIL EVERYONE IS SAFE

How can we be safe till all are safe? We must continue efforts to work together, across borders, to ensure access to all routine recommended childhood vaccines. In parallel, planning and implementing rigorous approaches to identify safe and effective COVID-19 vaccines for children. This only will propel us towards making the world a safer place for everyone.

ASSURING VACCINE SAFETY IN CHILDREN

Once we have decided to vaccinate children, it is now even more important to assure the safety of vaccination. Far from being miniature versions of adults, children have striking differences in their metabolic and immunological processes compared to adults. Younger children have more active immune responses that translate into stronger reactions, such as higher fever and localised reactions. An uncommon immunological phenomenon is antibody-dependent enhancement, where [antibodies to SARS-CoV-2 elicited from a vaccine may result in worse disease. As documented previously in case of vaccines for Dengue & RSV, vaccines may paradoxically intensify disease, resulting in greater risk to vaccinated children. Because of this, long-term safety data in children must be meticulously studied before recommendations can be made for vaccine deployment in children.](#)

Running paediatric vaccine trials is even more complicated than adult trials due to ethical issues and a host of factors unique to children. Nevertheless, throughout the



world, there is growing recognition of the importance of including children and pregnant women in vaccine trials as early as possible. Many COVID-19 vaccine products authorised for emergency use in adults (Covaxin, AstraZeneca, Pfizer/BioNTech and Moderna) have initiated trials in children 12 years and older.

Results:

For kids ages 5 through 11, the FDA reviewed a vaccine study of more than 4,600 children in this age range. Of this group, about 3,100 were given the Pfizer-BioNTech COVID-19 vaccine. The other children were given an inactive (placebo) shot. Children who were given the vaccine were monitored for side effects for at least 2 months after the second dose. Side effects were generally mild to moderate.

The FDA also took an early look at cases of COVID-19 that occurred one week after children were given a second dose of the vaccine. None of the children in this analysis had been previously diagnosed with COVID-19. Among 1,305 children given the vaccine, there were 3 cases of COVID-19. Among 663 children given the placebo, there were 16 cases of COVID-19. The results suggest that the vaccine is about 91% effective in preventing COVID-19 in this age group.

For kids ages 12 through 15, the FDA reviewed a vaccine study of more than 2,200 U.S. children in this age range. Of this group, about half were given the Pfizer-BioNTech COVID-19 vaccine. The other children were given a placebo shot.

A week after the second dose was given, there were no cases of COVID-19 in the 1,005 children given the Pfizer-BioNTech vaccine. Among 978 children given the placebo, there were 16 cases of COVID-19. None of the children had previously been diagnosed with COVID-19. The results suggest that the vaccine is 100% effective at preventing COVID-19 in this age group.

COVID 19 VACCINES FOR PAEDIATRIC USE:

In India:

COVID-19 Vaccination of children in the age-group of 15-18 years is started from 3rd January 2022. For such beneficiaries, vaccination option would be "Covaxin" only. It is given in 2 dose schedule, IM, 4 weeks apart. Vaccine is same as that of adult.

In USA:

Ages 5 through 11: The U.S. Food and Drug Administration (FDA) has given EUA to a Pfizer-BioNTech COVID-19 vaccine for this age group. This vaccine involves two injections, given three weeks apart. It contains a lower dose than the Pfizer-BioNTech COVID-19 vaccine used for people age 12 and older. Research shows that this vaccine is



about 91% effective in preventing COVID-19 in children ages 5 through 11. If a child turns from 11 to 12 years of age in between their first and second dose, the second dose should be the Pfizer-BioNTech vaccine for people 12 years and older.

Ages 12 through 15: The FDA has given EUA to a PfizerBioNTech COVID-19 vaccine for this age group. This vaccine involves two injections, given three weeks apart. It contains the same dose as the Pfizer-BioNTech COVID-19 vaccine for people ages 16 and older. The second dose can be given up to six weeks after the first dose, if needed. Research has shown that this vaccine is 100% effective in preventing COVID-19 in children ages 12 through 15.

Ages 16 and older. The FDA has approved a Pfizer-BioNTech COVID-19 vaccine, now called Comirnaty, for this age group. This vaccine involves two injections, given three weeks apart. The second dose can be given up to six weeks after the first dose, if needed. This vaccine is 91% effective in preventing severe illness with COVID-19 in people age 16 and older. Early research also suggests that the vaccine is 96% effective at preventing severe disease with COVID-19 caused by the delta variant, the most common COVID-19 variant in the U.S right now.

An additional primary shot of a COVID-19 vaccine can help people who are vaccinated and might not have had a strong enough immune response. The CDC now recommends that children ages 5 through 11 who have moderately or severely weakened immune systems should get an additional dose of the Pfizer-BioNTech COVID-19 vaccine. This shot should be given 28 days after the second shot.

Booster:Booster doses can help people who are vaccinated and whose immune response weakened over time. Research suggests that getting a booster dose can decrease the risk of infection and severe illness with COVID-19. Kids ages 12 through 17 should get a Pfizer-BioNTech COVID-19 vaccine booster shot if they have been given both doses of the Pfizer-BioNTech COVID-19 vaccine and it's been at least 5 months. Currently, a booster shot is not recommended for children younger than 12 years old.

MONITORING AFTER VACCINATION:

As in case of adult, child will be monitored for 15 to 30 minutes to see if he or she has an allergic reaction that requires treatment. If required, a dose of paracetamol is given.

SIDE EFFECTS:

Children given the Pfizer-BioNTech COVID-19 vaccines had side effects similar to those experienced by people age 16 and older.

**Minor adverse reactions:**

- Pain where the shot was given
- Fatigue
- Headache
- Chills
- Muscle pain
- Fever
- Joint pain
- Swollen lymph nodes
- Nausea
- Decreased appetite

Similar to adults, children have side effects within 2 days after vaccination that typically last 1 to 3 days. More children reported these side effects, except for injection site pain, after the second dose of the vaccine. However, some people have no side effects.

Serious adverse reactions:

In the U.S., there has been an increase in reported cases of myocarditis and pericarditis after mRNA COVID-19 vaccination, particularly in males ages 12 through 17. These reports are rare. One study suggests that the risk of myocarditis in the week after being fully vaccinated with the Pfizer-BioNTech vaccine is about 54 cases per million doses given to males ages 12 to 17.

Of the cases reported, the problem happened more often after the second dose of the COVID-19 vaccine and typically within several days after COVID-19 vaccination. Most of the people who received care, quickly felt better after receiving medicine and resting.

Long-term effects of the Pfizer-BioNTech COVID-19 vaccines:

Because COVID-19 vaccine clinical trials only started in the summer of 2020, it's not yet clear if the vaccines will have long-term effects. However, vaccines rarely cause long-term effects.

Thus the benefits of COVID 19 vaccination outweigh the known & potential risks.

Difference in the ingredients or dosing of the Pfizer-BioNTech COVID-19 vaccines for younger children, older children or adults:

The Pfizer-BioNTech COVID-19 vaccine for children ages 5 through 11 contains a lower dose (10 micrograms) than the vaccine used for older children and adults (30 micrograms). Smaller needles are being used to deliver the vaccine to children ages 5 through 11.

The Pfizer-BioNTech COVID-19 vaccine for children ages 5 through 11 also contains a different buffer than the vaccine used for older children and adults. This different



buffer, which is used in other FDA-approved vaccines, will help keep the vaccine stable in refrigerated temperatures for longer.

The ingredients and dosing of the Pfizer-BioNTech COVID-19 vaccine are the same for children ages 12 through 15 and people age 16 and older.

Contraindication to Pfizer-BioNTech COVID-19 vaccine:

This vaccine is not yet available to children younger than age 5. Clinical trials involving younger children are in progress.

The vaccine also shouldn't be given to a child with a known history of a severe allergic reaction to any of its ingredients. If this is the case, your child might be able to get another COVID-19 vaccine in the future.

Combining COVID 19 vaccine with other childhood vaccination:

A COVID-19 vaccine and other vaccines can be given on the same day. Previously, due to the newness of COVID-19 vaccines, the CDC had recommended against getting any other vaccines two weeks before and after getting a COVID-19 vaccine. The CDC changed its recommendation based on safety data gathered in recent months.

Advantage of vaccinating children:

Getting a COVID-19 vaccine can help protect children ages 5 years and older from getting COVID-19. There are few more benefits of vaccinating children and adolescents that go beyond the direct health benefits.

- Vaccinating children can help protect family members, including siblings who are not eligible for vaccination and family members who may be at increased risk of getting very sick if they are infected.
- Vaccination can protect children from getting seriously sick even if they do get COVID-19.
- Vaccinating children ages 5 years and older can help keep them in school and help them safely participate in sports, playdates, and other group activities.

CONCLUSION:

To make the world safe from COVID-19, we need everyone vaccinated, including children. To get back to normality, we also need vaccinated adults, ongoing safety measures, safe re-opening of schools, access to all recommended vaccines – and importantly, a rigorous pathway to identifying truly safe COVID-19 vaccines for children.

Dr. Yagnesh Popat, MD Ped

Dr. Swati Popat, MD Ped

Rajkot

**CONGRATULATIONS****I.M.A. (HQ) Award Winners : 2020-2021**

Following Branches, Scheme & Members of GSB IMA has been Awarded at 96th All India Medical Conference on 27th & 28th December, 2021 at Patna.

- ❖ **Dr. Vijaykumar C. Popat** **Jamnagar**
Being awarded I.M.A. National President's Appreciation Award
- ❖ **IMA Gujarat State**
Being awarded IMA Dr.C.L. Jhaveri Safe Motherhood Activity Award for State/Terr. Branches
- ❖ **Dr. Erika Patel** **Ahmedabad**
Being awarded IMA Dr. C.L. Jhaveri Safe Motherhood Activity Award for Individual Members
Being awarded IMA National President's Appreciation Award for Best Project of IMA
- ❖ **Dr. Gargi Patel** **Ahmedabad**
Being awarded IMA Dr. Kanak Goel Award for SAFE MOTERHOOD PROJECT
- ❖ **Dr. Mona Desai** **Ahmedabad**
Being awarded IMA Prof. Rajam Authilingom Award for SAFE MOTERHOOD PROJECT
- ❖ **Dr. Kirit C. Gadhavi** **Ahmedabad**
Being awarded IMA National President's Appreciation Award for Best adjudged President of a Local Branch (For Major Branch >1000)
- ❖ **Dr. Kailash M. Parikh** **Vadodara**
Being awarded IMA National President's Appreciation Award for Best adjudged President of a Local Branch (For Major Branch >1000)
- ❖ **Dr. Hiralkumar B. Shah** **Surat**
Being awarded IMA National President's Appreciation Award for Best adjudged President of a Local Branch (For Major Branch >1000)



- ❖ **Dr. Bipin M. Patel** **Ahmedabad**
Being awarded IMA National President's Appreciation Award for Life Long Services to IMA.
- ❖ **Dr. Parimal Desai** **Ahmedabad**
Being awarded IMA National President's Appreciation Award for Life Long Services to IMA.
- ❖ **Dr. Parul Vadgama** **Surat**
Being awarded IMA National President's Appreciation Award for Best National Office Bearer
- ❖ **Ahmedabad Branch, Gujarat State Branch**
Being awarded IMA National President's Life Membership Enrollment Award to be given to a local Branch enrolling maximum number of Life Members during the Association Year.
- ❖ **Dr. Husen Boriwala** **Vadodara**
Being awarded For IMA Medical Student Essay Contest
- ❖ **Dr. Devendra R. Patel** **Ahmedabad**
Being awarded IMA National President's Appreciation Award for overall golden star Best adjudged President of State/Terr. Branch.
- ❖ **Dr. Kamlesh B. Saini** **Ahmedabad**
Being awarded IMA National President's Appreciation Award for overall golden star Best adjudged Hony.State Secretary of State/Terr. Branch.
- ❖ **Dr. Chandrakant B. Patel** **Surat**
Being awarded for IMA Community Service for Individuals
- ❖ **IMA National Social Security Scheme (Dr. Yogendra S Modi)**
Being awarded IMA National President's Appreciation Award for Best Runnerup Scheme of IMA
- ❖ **D. Vrinda Oza Agravat** **Rajkot**
Being awarded IMA National President's Appreciation Award for Women for Best Education activity



❖ **IMA Gujarat State**

Being awarded for IMA News Bulletin Award

❖ **Dr. Kairavi P. Joshi**

Bhavnagar

Being awarded IMA National President's Appreciation Award for Cultural Activities

❖ **Dr. Swati Y. Popat**

Jamnagar

Being awarded IMA National President's Appreciation Award for Cultural Activities

❖ **Dr. Chaudhari Vipul Prabhubhai**

Surat

Being awarded IMA National President's Appreciation Award

❖ **Dr. Sujata V. Modi**

Vadodara

Being awarded IMA National President's Appreciation Award

❖ **Dr. Bhaskaracharya D. Mahajan**

Ankleshwar

Being awarded IMA National President's Appreciation Award

❖ **Dr. Navin D. Modi**

Himatnagar

Being awarded IMA National President's Appreciation Award

❖ **Dr. Jayesh K. Sheth**

Mahuva

Being awarded IMA National President's Appreciation Award

❖ **Dr. Sunil L. Acharya**

Deesa

Being awarded IMA National President's Appreciation Award

❖ **Dr. Bhavik Yogeshkumar Khatri**

Gandhidham

Being awarded IMA National President's Appreciation Award

❖ **Ahmedabad Branch**

Being awarded for Best IMA Local Branch Rotating Trophy of Gujarat State Branch (For Major Branch > 1000 members).

❖ **IMA Gujarat State**

Being awarded IMA National President's Life Membership Enrollment Award to be given to a State/Terr. Branch enrolling maximum number of Life Members during the Association Year.



IMA NATCON - 2021





IMA NATCON - 2021





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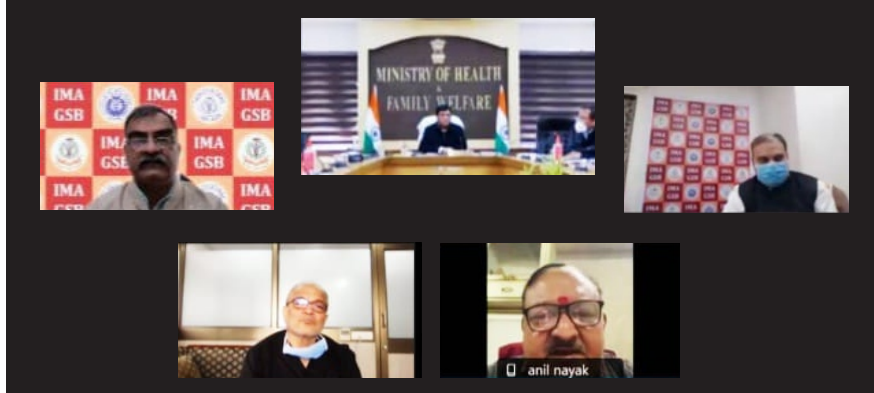


Meeting With Chief Health Secretary. Shree Manoj Agarwal Regarding Covid Wave Management



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Meeting of IMA Doctors with Union Minister of Health Shri Mansukhbhai Mandavia





IMA Community Services Day under banner of Aao Gaon Chalen Programme in memory of Late Dr.Ashok D.Kanodia - Social Service Activity, Ahmedabad Branch



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IMA GSB Meeting for Issues related for Sector Medical Insurance companies





IMA Community Services Day under banner of Aao Gaon Chalen Programme in memory of Late Dr.Ashok D.Kanodia - Blood Donation Camp & Medica Camp at Vijapurda, Mehsana Branch



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CME Mehsana Branch





IMA Community Services Day under banner of Aao Gaon Chalen Programme in memory of Late Dr. Ashok D. Kanodia - Medical Camp (Old Age) Rajkot Branch



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Sport Event Nadiad Branch





Precaution Dose Gandhinagar Branch



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Precaution Dose Rajkot Branch



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CME Palitana Branch





Medical Camp Morbi Branch



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Installation of new WDW team, Surat Branch



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Annual Get Together 2021 Bhuj Branch





INDIAN MEDICAL ASSOCIATION

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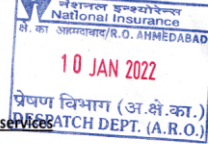
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Date: 07/01/2022

To,
The Deputy General Manager,
The New India Assurance Co. Ltd.
Ahmedabad,



SUBJECT: Representation of issues related to cashless services

Dear Sir/Madam,

Indian Medical Association is the largest representative body of the doctors across the country with more than 3 Lakh members. Gujarat State Branch of IMA has more than 30,000 members and represents various issues of members as well as helps government bodies in formulating various policies and directions.


At the outset we commend the efforts of insurance companies in bringing awareness of the various insurance products to the consumers and help them mitigate important crisis of life, health being one. We doctors have partnered with PSU undertaking insurance companies since inception and treated countless patients according to our agreement/understanding. Off late there has been some issues which are becoming hurdles in smooth functioning of the entire process. Few representations have been made by individual doctors/hospitals/associations in this matter but no satisfactory outcome has resulted. It is pertinent to note that due to these ongoing issues many patients, their families and public at large is suffering which is detrimental to overall healthcare structure of the society.


So as responsible bodies taking care of public health we should discuss the issues and solve it keeping in mind the larger objective of universal insurance coverage.

Enclosure: Issues to be addressed

Thanks & regards,

Yours Sincerely,


Dr. Paresh M. Majmudar
President


Dr. Mehul J. Shah
Hon. St. Secretary

Cc to:

- 1) Deputy General Manager, United India Insurance Company
- 2) Deputy General Manager, Oriental Insurance Company
- 3) Deputy General Manager, National Insurance Company
- 4) Secretary, Dept. of Financial Services, Ministry of Finance, Govt. of India
- 5) Chairman, Insurance Regulatory Development Authority
- 6) All the TPAs served by the Government Insurance Companies
- 7) Ms. Nirmala Sitharaman, Finance Minister, Govt. of India
- 8) Finance Secretary, Govt. of India
- 9) Mr. Amitabh Kant, CEO, NitiAyog
- 10) Shri Narendrabhai Modi, Hon. Prime Minister, Govt. of India



Enclosure: Issues to be addressed

These issues have direct bearing on the quality of treatment of patients.

1 **Transparent Process of empanelment of hospitals for cashless:**

The existing criteria for empanelment of hospitals and nursing homes for cashless facilities is not transparent. Any hospital and nursing home, which is registered with the local authority and willing to offer cashless services should be empanelled for providing cashless services. It cannot be left at the discretion of Insurance Companies or TPAs.

2 **Standardization of Agreement:**

As of now, there is no standard agreement of TPA/Insurance companies with the hospitals and nursing homes. There is a need of standardization of the agreements/MOU.

Standardization of agreements of Insurance Companies and TPAs with the hospitals/Nursing Homes must include the following points:

- a) The agreements must be legally binding and hence must be registered with the concerned authority.
- b) The agreement should be with the parent insurance company only and not with so many TPAs. That will ensure transparency and uniformity.
- c) Once an authorization is given by the TPA/Insurance company, the same cannot be revoked and must be honored under all circumstances and the payment must be made to the hospital/nursing home in the stipulated time.
- d) Once an amount is authorized by the TPA/Insurance Company, that full amount should be paid to the hospital/nursing homes. **There cannot be any deduction once the final authorization** has been provided to the hospital/nursing homes on discharge of the patient.
- e) The payment terms should be well defined. **The amount sanctioned at the time of issue of AL should be transferred to the hospital along with issue of AL. Balance payment must be made in 15 days of submission of the final bill , along with payment details, UTR details to the service provider by mail, SMS etc.** If the payment is not made in the stipulated time, the insurance companies must pay the authorized amount with an interest at 18% of the amount for the delay.
- f) It is the responsibility of the insurance companies to provide the details of any preexisting diseases to the hospitals and nursing homes and whether the authorization covers these diseases or not.



- g) The clause stating that hospitals/nursing homes cannot take deposits should be removed as hospitals/nursing homes have to take deposits from the patients for non-admissible expenses and expenses incurred beyond the insured amount.
- h) Charges such as nursing charge, special diet charges, Assistant Surgeon charges, duty doctor charges must be made admissible as hospitals/nursing homes incur additional costs on these services.
- i) It has been seen that even though the agreement is made for two years, the charges are not revised even after three years or more.

The agreement should be for one year only and the charges should be revised annually keeping in mind the inflation. A formula should be worked out so that the increase in costs of providing services is taken care of and when there is delay in new agreement, cost escalation should be made mandatory.

- j) When a patient is treated on a cash basis and later on goes for claim from the insurance company, the company asks the hospital to charge as per the agreement. This is not acceptable as the agreement is for providing cashless services. This clause needs to be removed from the agreement
- K. The discount asked as per agreement is on the total bill, which is ridiculous. The bill may be much higher than the sum insured for a patient. For example, if the bill is Rs. 10 lakhs and the MOU discount is 10%, the discount comes to Rs. 1,00,000. So in case the sum insured is Rs. 1 Lakh, the whole amount gets discounted. The discount should be applicable only for the sum insured amount. **The clause of discount should be canceled.**

3 Transparent Process of deciding Charges for Hospitals:

The existing process adopted by GIPSA companies for deciding tariff of the empanelled hospitals are not transparent and standardised. The tariff should be based on categories of hospitals and should be uniform in those categories. Equally important will be the seniority of the Clinicians.

A simple categorisation of Health care Facilities can be worked out after discussion with all stakeholders.

You are requested to come out with a transparent process of deciding tariff of various hospitals.

4 Charges for PPN Packages and other charges:

The rates for the procedures under PPN are **not viable** as the packages do not take into consideration any comorbidities like Diabetes, Hypertension, Heart



Diseases etc. Furthermore, the charges offered under the PPN packages are very low and non-viable. The PPN packages also do not take into consideration the infrastructure, seniority, experience and expertise of the Clinicians.

The PPN packages should be scrapped and charges should be admissible as per the SOC of the hospitals.

5. Appointment of non-qualified staff for scrutiny of claims and authorisation:

The TPAs and Insurance Companies must appoint qualified doctors of modern medicine for scrutiny of claims. The doctors appointed must be a specialist of the respective field to scrutinize the claims. E.g. if the patient has a cardiac condition and has undergone a cardiac surgery, the claim must be scrutinized by a Cardiac surgeon.

6 Provision of round the clock services by TPAs:

The TPAs and Insurance Companies must provide services round the clock as healthcare is a 24-hour profession. Any authorization given at the time of hospitalization must be honoured by the TPAs/Insurance Companies. The patients are their clients and not the clients of the hospitals/nursing homes in terms of payment. Hospitals lose revenues as patients remain admitted on holidays **due to non-functioning of TPAs on Sundays and holidays**

7 Disallowance of various charges:

Hospitals and nursing homes has to provide multiple services to the patients apart from providing hospitality (room). These services come at a cost and cannot be clubbed in room charges. The following are some of these services which are routinely not paid by the insurance companies without any reasons.

a) Charges for biomedical equipment. The bio medical equipment forms a major chunk of investments by any hospital. The bio medical equipment require maintenance as well as replacing consumable items. As of now, the insurance companies disallow these charges, placing a great burden on the hospitals. For many complex surgeries, certain costly equipment is mandatory for better clinical outcome. There is a huge capital investment made by the hospitals for acquiring this equipment.

b) Charges taken as service charges. Service charges constitute a lump sum per day charge taken for services which are provided by the hospital but cannot be billed to individual patients. Hospitals levy a service charge to cover the expenses of patient care attendants and other incidental charges, like utilities used by the patient relatives etc. Hence the service



charges should be paid by the insurance companies or the hospitals should be allowed to recover the same from the patients if the insurance companies cannot pay the same.

- c) **Nursing Charges:** The nursing services are provided by qualified nurses. The cost of hiring these nurses is substantial and constitute almost 20% of the salary costs of a hospital. Nursing services has to be provided round the clock to the patients.
- d) **Assistant Surgeon Charges:** For many complex surgeries, assistance of a qualified surgeon is required. It helps in reducing the operating time and gives better clinical results. He/she needs to be paid for these services. However, insurance companies do not pay these charges and the hospital bears the costs.

Please note that the hospitals incur various costs and to recover those costs, charges related to those services are billed to the patients. If the insurance companies cannot pay the charges, the hospitals cannot be stopped from collecting charges from the patients as those services have been provided to the patients.

8 Communication to patient for non-admissible charges:

The TPAs and Insurance Companies must communicate to the patients about the non-admissible charges directly once the final authorization has been given. The patients and their relatives start arguing with the hospital staff, creating a commotion in the hospital premises. **It is ridiculous that insurance companies deduct disposables like Gloves, IV Cannula, IV set and such other disposables. These are mandatory for any procedure.**

9 Delays in authorisation at the time of Discharge:

There are substantial delays for giving final authorization to the hospitals/nursing homes, resulting into extended stay of the patient. This results into irritation of the patients and a loss of revenues for the hospitals/nursing homes as the bed is occupied for which payment is not made. Insurance companies/TPAs must ensure that the discharge authorization is received within reasonable time of less than one hour of the receiving the final bill and other documents. For any delays beyond thirty minutes, the Insurance companies/TPAs must pay a proportionate bed charge in addition to the final bill.



10 Single Window to deal with all TPAs & General Insurance Companies

As of now, the hospitals has to deal with multiple TPAs and multiple insurance companies. There should be a single window system for all TPAs & Insurance Companies governed by GIPSA.

11 Other Issues:

- a) Once the AL is issued then there cannot be any deduction.
- b) On completion of the financial year, a list of payments made against the name of the patients and the TDS deducted, should be sent to the concerned hospitals/nursing homes.
- c) The policy of giving only 50% charges in surgeries for the second procedure and 25% for the third procedure should be scrapped. Sometimes when there are two different regions and many times the procedure is done by two different specialists in same region.
- d) There must be an escalation matrix for grievance handling of the hospitals by the Insurance companies.

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GUJARAT STATE BRANCH**

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