GCS NEWSLETTER Usue:44 Oct-Dec' 2024



GCS MEDICAL COLLEGE HOSPITAL & RESEARCH CENTRE





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Vision

To be a premier medical college and state-of-the-art multispecialty hospital, world class research facilities with compassionate team of doctors and staff.

Mission

To offer medical education and create a continuous stream of trained medical professionals to provide diagnostic, therapeutic and preventive healthcare to the patients at an affordable cost.

Core Values

We, GCS members hold the values and act according to these values.

Glow - We seek growth of all

Care - Care of patient is our prime objective

Serve - Serving to the mankind

Honored with Padma Bhushan: A Legacy of Excellence!



Heartíest Congratulations

to our Executive Chairman, Vice president and trustee

Shri. Pankaj Patel

on conferred with

Padma Bhushan

award, a truly proud moment for us all!

We extend our heartiest congratulations to Shri Pankaj Patel on being conferred the prestigious Padma Bhushan award - one of India's highest civilian honours in recognition of his extraordinary contributions to the pharmaceutical industry, healthcare sector, and national development.

A visionary entrepreneur, compassionate leader, and tireless social contributor, Shri Patel has consistently set new benchmarks in innovation, ethics, and service. Under his dynamic leadership, Zydus Lifesciences has grown into a global healthcare powerhouse, committed to making affordable and quality healthcare accessible to all.

Beyond his corporate achievements, his philanthropic efforts have left an indelible mark-most notably through commissioning hospitals in and around Ahmedabad that provide care to the poorest of the poor, ensuring that even the most underserved communities receive medical attention with dignity.

His humility, grounded nature, and unwavering encouragement have inspired countless individuals and professionals across industries. In the field of education, he has played a pivotal role through his long-standing associations with IIM Ahmedabad and IIM Udaipur, fostering academic excellence and nurturing future leaders. His appointment as an Independent Director on the board of the Reserve Bank of India stands as a testament to his broad expertise and commitment to national progress.

This well-deserved recognition fills the entire healthcare and academic community with pride, as it honours a man whose leadership is defined not only by innovation and success, but by compassion, responsibility, and an enduring commitment to the greater good.

OUR PATRONS

PRESIDENT

Hon. Governorshri (Gujarat) Shri Acharya Devvratji

EXECUTIVE CHAIRMAN & VICE PRESIDENT Shri Pankaj R. Patel

VICE PRESIDENTS

Minister of Health (Gujarat State) Dr. Pankaj M. Shah Shri Chintan N. Parikh Shri Sandip Engineer Shri Satyanarayan Dangayach

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Shri Pankaj R. Patel Shri Kshitish Madanmohan Shri Rajesh Jaykrishna HON. GENERAL SECRETARY

Shri Kshitish Madanmohan

SECRETARY Shri Deevyesh Radia

SECRETARY Shri Kaushik Patel

TREASURER CA Bipin Shah



COO's Desk : Dr. Jagdish Khoyani Chief Operating Officer Gujarat Cancer Society

At GCS, we strive to set a benchmark for future generations by delivering exceptional education that encourages critical thinking and innovation. Our mission extends beyond classrooms

advancing scientific knowledge through

impactful research and providing high-quality, affordable clinical care. We're committed to empowering our students and professionals with cutting-edge technology and modern

infrastructure to support learning, discovery, and healing. Through proactive community education on preventive healthcare, we aim to reduce disease burden and promote healthier living.

With unwavering dedication to excellence, GCS envisions shaping a healthier, smarter tomorrow.



Director's Desk : Dr. Kirti M. Patel Director - GCS Medical College, Hospital & Research Centre

At GCS Hospital, our mission is to make

high-quality healthcare accessible to all especially through inclusive initiatives like the Ayushman Yojana. We are committed to delivering excellent medical care at affordable rates, ensuring that no one is left behind in times of need.

With a team of experienced professionals, we offer compassionate care and advanced treatment options tailored to each patient. Our focus is on empowering individuals with the right healthcare solutions to live healthier, happier lives.

Backed by state-of-the-art infrastructure and cutting-edge technology, we strive to provide every patient with the best care possible.

Dean's Desk : Dr. Yogendra S Modi

Dean - GCS Medical College, Hospital & Research Centre



Welcome to GCS Medical College - where passion meets purpose and learning leads to impact. We're excited to welcome our new students to an institution that blends academic excellence with real-world clinical experience.

With cutting-edge facilities, dedicated faculty, and a culture of innovation, we're here to shape not just skilled professionals, but compassionate healthcare leaders. Your journey with us is more than just education - it's about making a difference, transforming lives, and building a healthier future. Welcome to GCS, where your aspirations take flight.

EDITORIAL TEAM

PUBLISHER: Dr. Kirti M. Patel (Director)EDITOR: Neha Panchal (Branding)

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Significant Events

Gujarat Cancer Society Annual General Meeting

A Commitment to Transparency and Governance

The Annual General Meeting (AGM) of the Gujarat Cancer Society was held on December 06, 2024, at our institute. This significant event was graced by esteemed dignitaries, including the **respected**

Hon. Governorshri – Shri Acharya Devvratji, Executive Chairman & Vice President Shri Pankaj J. Patel, General Secretary Shri Kshitish Madanmohan, Vice President Dr. Pankaj J. Shah, Director Dr. Kirti Patel, COO Dr. Jagdish Chhoyani, and Dean Dr. Yogendra Modi.

Their distinguished presence underscored the collective commitment to advancing the society's mission of providing quality healthcare, promoting cancer awareness, and fostering medical innovation. The AGM serves as a vital platform for organizational transparency, strategic discussions, and collaborative decision-making, ensuring effective governance and stewardship of the society's objectives.

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Dr. Heena Chhanwal Elected as Governing Council Member – ISA

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We proudly congratulate Dr. Heena Chhanwal, Medical Superintendent & Professor of Anaesthesia, on being elected as a Governing Council Member of the Indian Society of Anaesthesiology (ISA) at the National Level.

She took the oath at the ISA convention in Patna, marking a significant achievement in her career.





Healthcare Insights

Oct - Dec'2024

Y-O-Y Growth

OPD	13%
IPD	12%
EMD	32%
SURGERY	19%
ENDOSCOPY	18%
CATH LAB	60%
DIALYSIS	13%
DELIVERY	7%
CHEMOTHERAPY	32%
RADIOLOGY	7%
LABORATORY	44%

GCS Medical College, Hospital & Research Centre continues to make strides in delivering quality healthcare services.

Outpatient Department (OPD)

Recorded a 13% increase, reflecting a steady rise in patient consultations and clinical visits.

Inpatient Department (IPD)

Achieved a 12% growth, indicating enhanced patient admissions and improved hospital capacity utilization.

Emergency Department (EMD)

Significant growth of 32%, showcasing our readiness to handle urgent and critical cases effectively.

Surgical

Surgical cases increased by 19%, highlighting advancements in surgical procedures and patient outcomes.

Endoscopy Unit

Grew by 18%, demonstrating improved diagnostic and therapeutic capabilities.

Cath Lab

Leading with a remarkable 60% growth, driven by advanced interventional cardiology services and increased patient referrals.

Dialysis

Increased by 13%, reflecting our expanded capacity to manage patients with chronic kidney conditions.

Maternity & Delivery

A 7% growth in deliveries showcases the hospital's trustworthiness in providing quality maternity care.

Chemotherapy Unit

Marked a 32% increase, indicating higher patient volume and improved oncology care.

Radiology Services

Grew by 7%, reflecting an increased demand for diagnostic imaging and advanced radiological procedures.

Laboratory Services

Experienced a 44% growth, emphasizing our commitment to providing accurate and timely diagnostic support.

Conclusion

This growth reflects our dedication to providing advanced medical care, ensuring patient satisfaction, and continuously improving our healthcare delivery. Together, we move forward, strengthening our services and expanding our impact in the community.

New Horizons

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Introducing GCS Physiotherapy College

Shaping Future Healthcare Leaders

GCS Medical College, Hospital & Research Centre proudly announces the **launch of GCS Physiotherapy College, offering a Bachelor of Physiotherapy (BPT) program under the leadership of Principal Dr. Anjali Bhise. Affiliated with Gujarat University and approved by the Gujarat State Council for Physiotherapy,** this program is committed to nurturing skilled physiotherapy professionals ready to meet the evolving challenges of modern healthcare.

What Makes Us Unique?

Practical 750+ be hospital,	On Clinical Training exposure through our dded multi-specialty including a dedicated rapy OPD and inpatient services.	Expert Faculty Learn from experienced professionals committed to academic and clinical excellence.	
State-of-ti well-e compret	dern Facilities ne-art infrastructure, equipped labs, a nensive library, and ernship opportunities.	Central Location Conveniently located in Ahmedabad, providing easy access for students.	
Affiliated with Gujarat University proved by the Gujarat State Council for Phys GCS Medical C, Hospital & F Office, Near C	siotherapy		BEGENERAL WARD 908 TO 910

Inauguration Child Development Centre

The Child Development Centre was inaugurated at GCS Medical College, Hospital & Research Centre through the collaborative efforts of **the Departments of Pediatrics and Psychiatry**.

As mentioned by UNICEF, "Science shows that life is a story for which the beginning sets the tone." This emphasizes that early childhood years are a time of great opportunity and vulnerability. The quality of early experiences plays a critical role in how a child's brain develops.

In the first few years of life, more than one million neural connections are formed each second – a pace never repeated again. This period offers a crucial window to shape a child's holistic development and lay the foundation for their future.

While these principles apply to children developing "typically," they are even more essential for children born with or who acquire conditions affecting their development. The term "neuroplasticity" refers to the nervous system's ability to change its activity in response to intrinsic or extrinsic stimuli.

This underscores the significance of early identification, appropriate diagnosis, and timely management of developmental challenges in children.

Given the multidimensional nature of childhood developmental characteristics and problems, a comprehensive approach is required. The Child Development Centre brings together a multidisciplinary team of experts to optimize the development of children.

The Child Development Centre at GCSMCHRC is uniquely positioned to provide holistic care under one roof. Its **expert team includes professionals in Developmental Pediatrics (Dr. Baldev S. Prajapati - HOD, Dr Prarthana Kharod Patel)**, **Pediatric Neurology (Dr Harsh Patel)**, **Child and Adolescent Psychiatry (Dr. Dharmesh Patel - HOD, Dr Aalapi Prajapati)**, **Physiotherapy (Dr Anjali Bhise and team)**, **Occupational Therapy (Ms. Binal Gohel)**, **Clinical Psychology, and Speech Therapy**.

The Centre focuses on caring for children with developmental issues such as cerebral palsy, autism, ADHD, developmental delays, and behavioral problems. In addition to therapeutic care, it aims to promote nurturing care programs for the holistic well-being of all children.





Elevate Medical Research Excellence with GCS Central Research Unit!

Establishment of the Central Research Unit (CRU) has further reinforced the foundation of conducting quality research at GCS Medical College, Hospital & Research Centre. CRU, serving as a key facilitator, is connexion between consultants/researchers, Site Management Organizations (SMOs), and Contract Research Organizations (CROs). It ensures more efficient clinical trial conduct with stringent ethical protocols and foster smoother collaboration. Additionally, CRU is committed to supporting the development of future healthcare researchers by assisting MBBS, MD/MS, and DM students for their research, thesis, and dissertation work. Foster a research-driven culture within the institute, enhancing interdepartmental collaboration and strengthening the institute's research capabilities and overall excellence is the primary aim of CRU. To enhance students' research skills and knowledge, CRU organizes workshops, CME sessions, and seminars as required by NMC guidelines.

The CRU has achieved impressive progress toward accomplishing its objectives since its inception; among the noteworthy achievements are:

Effective Training Programs and Workshops:

A Good Clinical Practice (GCP) workshop was organized under the flagship banner of CRU in April 2024, in collaboration with the renowned Cliantha Academy, a leading institution for pharmaceutical and medical research training. The event was graced by a total of 210 participants, including 55 faculty members. CRU organized a state level workshop on Good Laboratory Practice (GLP) for postgraduate students with backgrounds in pathology, microbiology, and biochemistry in July 2024 in partnership with premium mentoring institute, L. M. College of Pharmacy. A total of 150 participants, including attendees from different medical colleges across the states of Gujarat, Rajasthan, Karnataka, and Tamil Nadu attended the workshop. In March 2025, CRU arranged a Research Methodology Workshop for first-year postgraduate medical students to enhance their comprehension of research

methodology and provide them with the fundamental skills required for successful research. Sessions were taken by in-house faculties: Dr. Nayan Patel, Dr. Akanksha Prajapati, Dr. Jaydeep Ghevariya and Dr. Divya Kheskani. Total 70 budding research scholars attended this workshop. In collaboration with the departments of Psychiatry, Nephrology, and Obstetrics and Gynaecology, CRU has initiated three successful clinical trials to date. CRU has filled multiple clinical trial feasibilities for GCSMCH & RC from which many are currently under the registry process and others awaiting approval to begin at the institute.

Future Aspects:

The Central Research Unit (CRU) envisions becoming the institute's premier research hub, driving advancements in patient outcomes and healthcare through high-quality research. To achieve this, the CRU plans to expand its research infrastructure, build a robust research team, and provide comprehensive workshops and training. Fostering an innovative research culture, the CRU aims to secure collaborative grants and establish a comprehensive research repository. By enhancing the hospital's research capabilities, the CRU is committed to making significant contributions to medical science and establishing itself as a leading force in academic and clinical research.

A meaningful career is built at the intersection of purpose and persistence.



Advance Your Healthcare Career with **GCS Healthcare Academy!**

GCS Healthcare Academy, affiliated with Gujarat University, is offering comprehensive 1-Year Diploma/Certificate Courses in paramedical and healthcare fields. These programs are designed to provide hands-on training and industry-relevant knowledge, empowering you to excel in the healthcare sector.

Available Courses:

ECG, ECHO, TMT Technician	Infection Control Nurse
Medical Laboratory Technician	Dialysis Technician
Operation Theatre Technician	Cath Lab Technician
X-Ray/USG/CT Scan & MRI Technician	Histology & Cytology Technician
CSSD Technician	Medical Record Management
Endoscopy Technician	



Worth a Read



Deep Work Cal Newport

Revolutionizing Diagnostics

State-of-the-art CT Scan Machine

We are proud to announce the installation of a state-of-the-art CT scan machine in the Department of Radio Diagnosis. This advanced technology enhances our diagnostic precision and ensures faster, more accurate results for patients.

Key Facilities Available:

Non-Invasive Coronary Angiography

Accurate heart and blood vessel imaging without surgical procedures.

Calcium Scoring

Early detection of heart disease by measuring calcium buildup in arteries.

Carotid Angiography

Detailed visualization of carotid arteries for stroke prevention and vascular health monitoring.

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Prevention today protects possibilities tomorrow.

New Advanced Equipment



Phaco Machine

A state-of-the-art system for advanced cataract surgery, ensuring precision, faster recovery, and better visual outcomes.

Fractional CO₂ Laser Machine

A highly effective tool for skin rejuvenation, scar treatment, and various dermatological procedures, offering safe and advanced care.



Worth a Read

The Power of Now Eckhart Tolle

Newbies on Board

General Surgery

Dr. Abhi M. Shah Assistant Professor

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Dr. Shaival K. Shah Assistant Professor

Orthopedic

Retirement Tribute

Dr. Asha Purohit Professor & Head - Pathology **Dr. Vilas Patel** Professor & Head - Physiology

Join Our Team Shape the Future of Healthcare

At GCS Medical College, Hospital & Research Centre, we believe in advancing healthcare with compassion and innovation. With our comprehensive multi-specialty departments and a commitment to patient care, we offer an exceptional platform for medical professionals to grow and make a difference.

Why Join Us?

All-in-One Specialties: Work alongside expert teams across diverse medical disciplines under one roof.

Career Growth:

Access to continuous learning, research opportunities, and professional development.

Collaborative Culture:

Engage with a supportive and dynamic team fostering innovation and patient-centered care.

State-of-the-Art Facilities:

Be part of a modern healthcare environment equipped with advanced technology.

Apply Now: info@gcsmc.org

Big goals need brave steps — and a relentless mindset.

Ophthalmology

Dr. Vyoma Shah Assistant Professor





Heartfelt Testimonials Voice of Gratitude and Trust

Mr. Kiran Badgujar

I would like to share my experience regarding my grandmother's recent admission at GCS Hospital. From the moment we arrived, we were met with professional and compassionate care. The hospital staff, including doctors, nurses, were incredibly attentive and ensured my grandmother was comfortable throughout her stay. The facilities were clean and well-maintained, and the hospital environment was calm. Overall, we are grateful for the quality care provided at GCS Hospital, and I would highly recommend it for anyone looking for reliable and compassionate healthcare.

. Mr. Solanki Ronak

The facility of your hospital is very good, the doctors, nursing staff here are all doing a very good job, the patients are taken care of very well here.

Mr. Hiren Parmar

I have done my health check up today and it was done within an hour with all supportive staff and doctor team. Thank you.

. Mr. Nikunj Prajapati

Treatment very good nursing staff doctor very helpful

Mr. Kudrati Khushi

I have multiple times visited here my son was admitted here the doctors and staff are very supportive they all are make sure that u feel comfortable even peun nd swipers also so good to everyone one of the best hospital alone service and best environment.

Mr. Dipak Nai

Best treatment in Gujarat For specialy for cancer treatment

Ms. Bharti Gahlot

Best surgical team. Got operated without any problem. Fast recovery.

Mr. Mahesh Makwana

Good facility and treatment hospital GCS and all doctors and staff.

Mr. Mohit Kushwah

I got treated for pilonidal sinus. Doctor and staff were good with us. The hospital is kept clean.

Worth a Read

for Meaning Viktor E. Frankl

18 Clinical Journal

An epidemiological assessment of health status among a cohort of tuberculosis survivors: prospective research in a western Indian city

Journal Name : Monaldi Archives for Chest Disease Venu Shah, Viral Dave, Vaidehi Gohil, Hardika Khanpara DOI: https://doi.org/10.4081/monaldi.2025.3163.

Long-term follow-up of tuberculosis (TB) is important to monitor treatment outcomes, prevent relapse, and improve patient care. The aims of the current study are: i) to assess

various epidemiological parameters among TB survivors, like mortality and morbidity,

with emphasis on recurrence status during pre-defined long-term follow-up; ii) to assess factors responsible for the recurrence of TB among study participants. A prospective observational study was

conducted among cured cases of pulmonary TB registered at the TB unit of Ahmedabad City, India. As per the calculated sample size, 180 study participants were recruited by systematic random sampling from a list of cured TB cases from July to September 2021. Follow-ups of participants were conducted at 6, 12, 18, and 24 months post-recruitment. The status of cured cases was assessed by a pre-validated questionnaire. Factors significantly associated with the likelihood of TB were analyzed using logistic regression. Of the total 180 cured TB cases, 22 (12.2%) developed recurrent TB, and 12 (6.6%) deaths were recorded during the entire follow-up duration of 2 years. Among the cases assessed, 106 (71.6%) were found to be asymptomatic in the context of TB at 2 years post-treatment completion. Around 17 (77.2%) recurrent cases were diagnosed within a year of treatment completion. Factors significantly associated with recurrence were age (p=0.01), body mass index (p=0.02), and socio-economic status (p=0.03) of the study population. Overall recurrence assessed during 2 years of post-treatment follow-up among the cohort of TB survivors was 12.2%. As per the study findings, socio-demographic and nutritional factors play a significant role in the development of recurrent TB, highlighting the importance of targeted interventions.

A Cross Sectional Study to assess Beliefs, Behaviours, and Opinions about Blood Donation among visitors of admitted patients at tertiary Care Hospital, Ahmedabad

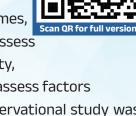
Journal Name : Indian Journal of Community Health

Himadri Patel, Arpit Prajapati, Madhur Modi, Sahilkumari Chaudhari

DOI: https://doi.org/10.47203/IJCH.2024.v36i05.014

Background: A significant number of patients admitted to hospitals in low- and middle-income countries face the challenge of not having timely access to a safe and free blood supply and India is no exemption. Aims & Objectives: To assess beliefs,

behaviours and the exploration of barriers about Blood Donation among visitors of admitted patients. Methodology: A cross section study was done among 356 visitors of admitted patients of tertiary care hospital of Ahmedabad city. Visitors were selected through non probability sampling technique from wards of hospital. Results: Average age was 39.1 ± 11.2 years and 53.9% were male. Only 21.3% people had done blood donation in the past ever. Male were significantly donated the blood (p<0.0001). 94.9% people found blood donation as an important act and 98.3% believed that it can save lives. 39.9% and 12.9% had a knowledge regarding minimum eligible age and weight for blood donor respectively. Donating blood would lead to weakness (37.8%), vertigo (13.3%), infection and HIV (17.8%). Conclusion: People may find blood donation as a significant step to prevent many deaths but very few of them had done blood donation in past ever. People are having fear and misconceptions that is preventing them from donating blood.



A Record-Based Study on Epidemiological and Clinical Characteristics of Measles Patients Admitted in a Tertiary Care Hospital of Ahmedabad City, Gujarat

Journal Name : Journal of Communicable Diseases

Arpit Prajapati, Sahil Kumari Chaudhari, Himadri Patel, Margi Sheth

DOI: https://doi.org/10.24321/0019.5138.202442

Introduction: Measles is an acute and highly infectious disease of childhood, transmitted by droplets from the nose, mouth or throat. In India, doses of measles containing vaccine are postponed or missed due to a lack of awareness among people



to utilise immunisation services, rural residence, COVID-19 pandemic, home birth, low birth weight for newborns, early age at first birth, and lower maternal education. This delayed or missed vaccination increases the risk of bigger outbreaks around the world.

Objective: To determine the epidemiological and clinical characteristics of patients with measles. Material and Method: A record-based study on all clinically or laboratoryconfirmed patients admitted in the years 2019 to 2023 was conducted at a tertiary care hospital in Ahmedabad city. Data collection was done using a pre-tested and pre-designed questionnaire to include all the recorded cases diagnosed with measles.

Results: Among a total of 150 participants, there were 52.7% males and 47.3% females. The mean age of patients was 37 months ± 32 SD. Around 61.3% of cases were in the age group of 1–5 years. In 96.6% of patients, fever and rash were the most common symptoms, followed by coryza in 88% and conjunctivitis in 29.3% of the patients. An increase in the number of cases was observed during the winter months of 2022–23, while there were fewer cases admitted duringthe COVID-19 pandemic period. About 62.7% of patients who were admitted had not taken any dose of measles vaccine.

Conclusion: There were more cases observed in the winter months. The important epidemiological factors found were age group (1–5 years) and unvaccinated status of the children. There is an increasing need for awareness about measles immunisation in order to reduce morbidity among children.

Papillary Carcinoma Within a Thyroglossal Duct Cyst

Journal Name : Cureus Journal, Part of Springer Nature Vishva S. Shah, Rahul U. Vaidya, Shashank C. Desai, Jaimish P. Gajjar

DOI: https://doi.org/10.7759/cureus.74407

Thyroglossal duct cysts (TGDCs) are typically located in the midline of the neck.

Carcinomas arising within these cysts are extremely rare, with papillary carcinoma

being the most common type. Diagnosis is generally confirmed postoperatively following excision.

We report the case of a 38-year-old female diagnosed with papillary carcinoma within a TGDC who underwent a Sistrunk procedure followed by a total thyroidectomy.





Clinical Outcomes Following Treatment of Cervical Spondylotic Radiculopathy With Cervical Posterior Decompression Using Unilateral Biportal Endoscopic Technique: A Single Center Retrospective Series of 20 Patients

Journal Name : International Journal of Spine Surgery Keyur K. Akbari, Teo Hong Lee Terry, Umesh Kanade and John Choi DOI: https://doi.org/10.14444/8690

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Clinical Journal



Background: Unilateral biportal endoscopy (UBE) is a minimally invasive approach to treat cervical spondylotic radiculopathy (CSR), which is a common condition caused

secondary to disc herniation, disc degeneration, uncal osteophytes, and other conditions manifesting as neuropathic radicular pain. Anterior cervical discectomy and fusion (ACDF) is the gold standard surgical technique for treating CSR. However, it has several disadvantages, including loss of mobile segment, adjacent segment degeneration (ASD), implant- and approach-related complications, and high hospitalization costs.

Objective: The current study aimed to evaluate the safety and efficacy of UBE decompression for CSR. **Methods:** After obtaining IRB approval, a single-center retrospective study was undertaken. Included patients underwent UBE decompression for CSR with a minimum of 6 months of follow-up. Patient demographics, perioperative data, and length of hospital stay were reviewed. Clinical outcomes were assessed using VAS scores for neck and arm pain, and NDI scores were measure preoperatively and at 1 and 6 months after UBE decompression. A repeated analysis of variance test was performed to measure the difference between VAS and NDI scores.

Results: Twenty patients (M: 15, F: 5) with a mean age of 56.7 \pm 10.2 years were included. The mean follow-up period was 8.4 \pm 1.8 months. The mean surgical time was 64.3 \pm 10.6 minutes. The average length of hospital stay was 1 day. At the final follow-up, the mean VAS for arm pain improved from 6.4 \pm 0.7 to 0.6 \pm 0.5 (92% improvement) and the mean VAS for neck pain improved from 3.3 \pm 0.4 to 2.0 \pm 0.2 (40% improvement). NDI score improved from 23.2 \pm 1.95 to 5.7 \pm 0.6 at the final follow-up (75% improvement). There were no complications.

Conclusion: UBE is a safe and effective surgical treatment option for patients with CSR with excellent clinical outcomes.

Clinical Relevance: Clinical relevance of this case series study is to demonstrate the safety and efficacy of the novel unilateral biportal endoscopic decompression of cervical spondylotic radiculopathy and its short term clinical outcomes.

Isolated Cardiac Echinococcosis of Interventricular Septum

Journal Name : Journal of American College of Cardiology (JACC) Roopesh R. Singhal, Zeeshan H. Mansuri

DOI: https://doi.org/10.1016/j.jaccas.2024.102848

Cardiac cystic echinococcosis is a rare form of cystic hydatid disease. Hydatid cysts are multilocular and are picked up incidentally.

Scan OR for full version

We here describe a case of an isolated unilocular cardiac hydatid cyst of the interventricular septum with multimodality imaging, treatment approach, and operative findings.

Clinical Journal

A Study of Serumalt, Ast And Ggt (Hepatic Markers) In Patients With Chronic Alcoholic Liver Diseases In Tertiary Level Care Hospital

Journal Name : Indian Journal of Public Health Research & Development Rahima Malek, Sohil Mansuri, Rizwan Ansari, Shagufa M Pathan DOI: https://doi.org/10.37506/fkz2g630

BACKGROUND: Excessive alcohol consumption and consequent medical disorders are considerable problems in many countries. Aminotransferases (alanine

aminotransferase ALT and aspartate aminotransferase AST) are the liver enzymes commonly used for detecting excessive drinking. Gamma-glutamyl transferase (GGT) is a membrane-bound glycoprotein enzyme widely used as an index of excessive ethanol intake. The aim of this study is to determine the changes in levels of ALT, AST and GGT in chronic alcoholic liver diseases. MATERIALS AND METHODS: A cross-sectional study was done and included 100 individuals (50 chronic alcoholic liver diseases cases and 50 normal controls). Serum ALT, AST, GGT were estimated by colorimetric method on fully automated chemistry analyzer. RESULT: Data were fed under Microsoft Excel 2007 and statistically analyzed by Graphpad software; Version 6.0, which evaluated the differences of various parameters in both groups on the basis of p value. Serum ALT, AST & GGT levels were significantly elevated in chronic alcoholic liver diseases patients as compared to normal healthy controls. CONCLUSION: Chronic consumption of alcohol results in the secretion of pro-inflamatory cytokines(TNF alpha, Interleukin 6 [IL6] and Interleukin 8 [IL8]), oxidative stress, lipid peroxidation, and acetaldehyde toxicity. These factors cause inflammation, apoptosis and eventually fibrosis of liver parenchyma which leads to elevations in liver enzymes like AST & ALT. GGT is an enzyme produced in the bile duct. Measurement of GGT is an extremely sensitive test. It is induced by alcohol and its serum activity may be increased in heavy drinkers even in the absence of liver damage or inflammation. Hence these parameters should be regularly monitored in chronic alcoholic liver diseases.

Recurrent Giant Cell Tumour with Secondary Aneurysmal Bone Cyst in Cuboid Bone: A Case Report

Journal Name : Journal of Medical Sciences and Health

Anupama Dayal, Raval Chhabra, Tejas Atulbhai Contractor, Sandesh Omparkash Agrawal **DOI:** https://doi.org/10.46347/jmsh.v10.i3.24.25

This case report discusses Giant Cell Tumors of Bone (GCTB), constituting 5% of bone

tumors, often found in long bones but rarely in foot bones (2.6%). These tumors exhibit a spectrum from benign to locally aggressive, with high recurrence rates despite surgery. Occasionally, GCTB leads to secondary Aneurysmal Bone Cysts (ABC), complicating diagnosis and treatment due to their similar presentation and high recurrence risk. The case involves a 25-year-old male with recurrent GCTB in the cuboid bone, initially excised. Subsequent evaluation revealed an expansive lesion, initially misinterpreted as other conditions. Histopathology confirmed secondary ABC arising in GCTB. Diagnostic biopsy, curettage, and tricortical bone grafting provided relief. Discussion highlights GCTB's aggressive behavior in foot bones, challenges in diagnosing secondary ABC, and the success of extensive treatment in managing GCTB with secondary ABC. Managing such lesions effectively is crucial due to associated severe morbidity. The case emphasizes the need for a comprehensive approach for diagnosis, treatment, and recurrence prevention, contributing to the evolving understanding of GCTB and secondary ABC interplay in different bone locations and to the growing body of literature on the challenging interplay between GCTB an secondary ABC.







22 Clinical Cases

An Interesting Case of 10 year old boy with involuntary movements

Dr Prarthana Kharod Patel (Professor, Pediatrics) | Dr Harsh Patel (Pediatric Neurologist) Dr Dhrumika Sheth (Assistant Professor, Pediatrics) | Dr Saumil Patel (Assistant Professor, Pediatrics)

A **10 year 6-month-old male child** with **normal pre morbid growth and development** was brought by parents with **illness of around 2 weeks duration.** The illness started as a **febrile illness with mild cough and cold** which resolved over 2-3 days with medications taken from private practitioner.

However, parents noticed **involuntary movements** along with **irritability and sleep disturbances with resolution of fever** (around day 4 or 5 of illness). They further noticed **frequent falls while walking, falling of objects from hands and difficulty in speaking** over subsequent 5-6 days. There was no history of loss of consciousness, seizures, feeding difficulty, facial deviation, regurgitation of feeds or involuntary micturition or defecation.

On examination the child was **conscious, co-operative and oriented** with **normal comprehension**. The child was **talking appropriately but with low volume unclear speech**. Cranial nerve examination was normal. Motor examination showed **hypotonia in all four limbs** with power of 4/5 bilaterally and **milkmaid grip.** Involuntary movements were observed in the form of **sudden jerky movements of neck, shoulder and arms(chorea)**. The child was walking with narrow based clumsy gait.

Further examination revealed jack-in-the-box phenomenon involving tongue, dinner fork deformity of upper limb and polygraphia. Other systemic examination was normal. Possibilities considered were Post infectious-immune mediated (basal ganglia) encephalitis, Wilson's disease and Sydenham's chorea.

Relevant investigations were sent. CSF examination was done which was normal. MRI brain showed clinically insignificant diffusion restriction in cortical and subcortical region of left high parietal region, left caudate nucleus and right high parietal region.

Liver function tests and serum ceruloplasmin were normal. **ESR was raised (40 mm in first hour). ASO titre was positive (952 IU/ml).** 2D echo was done to rule out endocarditis which was normal. Modified Jones criteria for rheumatic fever were reviewed and possibility of rheumatic chorea was kept and child was given Inj. Benzathine Penicillin.

Oral prednisolone was started. Symptomatic treatment for chorea was also started (oral phenobarbitone and tetrabenazine). Child was discharged on oral steroids and symptomatic treatment for chorea and 3 weekly injection benzathine penicillin prophylaxis. On treatment, child's clinical condition improved, involuntary movements subsided, speech became clearer and gait was normal.

Final diagnosis:

Acute onset movement disorder with basal ganglia involvement due to rheumatic chorea.

Progress may be slow, but persistence always pays off.

Clinical Cases

Successful Management of Compressive Cervical Myelopathy

Dr Keyur Akbari (Consultant - Spine Surgeon)

A 67-year-old gentleman presented with complaints of neck pain radiating to both upper limbs, inability to stand and walk, and difficulty in grasping objects for the past two months. The patient was a known case of hypertension and type 2 diabetes mellitus and was on regular medications.

On examination, the patient exhibited upper motor neuron signs in both upper and lower limbs, with clawing of the right hand. Muscle strength was graded as MRC grade 2 in the upper limbs and MRC grade 3 in the lower limbs. Bowel and bladder functions were normal.

The patient's Modified Japanese Orthopaedic Association (MJOA) score was 9/17. The Visual Analog Scale (VAS) score for neck pain was 5/10, and for upper limb pain was 6/10.



Based on clinical and radiological findings, a diagnosis of compressive cervical myelopathy at C4-C5, C5-C6, and C6-C7 was established. After obtaining informed and written consent, the patient underwent C4-C5, C5-C6, and C6-C7 anterior cervical discectomy and fusion surgery.

The postoperative course was uneventful, and the patient was discharged on postoperative day 3 (POD-3). At the two-week follow-up, there was a significant reduction in upper limb pain (VAS 1/10) and neck pain (VAS 2/10). The patient was able to walk short distances multiple times a day with walker support.

At the one-month follow-up, there was a marked reduction in hand spasticity, and the patient could grasp objects with minimal difficulty. Walking distance further improved with walker support.

At the three-month follow-up, the patient was able to walk without walker support for almost a kilometer. Hand function also showed significant improvement.

As compressive cervical myelopathy is often a progressive condition, timely diagnosis and management can lead to better functional outcomes.

Worth a Read



Dare to Lead Brené Brown



Dr. Baldev S. Prajapati M.D, D. Ped. Gold Medalist, FIAP, MNAMS

HOD & Professor of Pediatrics, GCS Medical College, Hospital & Research Centre - Ahmedabad

Introduction

It is wide spread perception amongst the patients, public & even medical personnel that quality care in medical field has significantly deteriorated over last several years. It is deteriorating very fast. It is the time for all of us to look into the matter, to analyze it, to locate the lacunae & to think for possible practical solutions. Quality is defined as providing services of desired standards with current science. Quality is not an accident. It is the result of well planning, perfect execution with best efforts. Let us see how we can translate it into our practice.

Medical Practice is a Profession, Make it a Mission

Profession is defined as a skillful work, rewarding & satisfying the person. He gains some return for working, but return is a byproduct. If a person is interested in his profession, he gets involved in working, enjoying the work, not getting tired, he does not feel any burden of working, he does not develop frustrations, he has no time limit for working & he is capable of giving best of his ability. We are fortunate to have the opportunity to work in the noble profession. This ideology is the first pre requisite for offering quality in patient care. **Very rightly Mother Teresa said, "Medicine is a Mission. It is not a Profession & Never a Business."**

Qualities of a Medical Person

The medical person should be accessible & available. The affordability of the patient should not come on the way of providing quality care of the patients. Sincerity, punctuality & meticulous working pattern of a medical person makes certainly a difference in quality care. To remain well-versed with current information of the science is essential.

Art of Medical Practice

Any art can not be learnt without devotion & special efforts. It is absolutely true for the art of medical practice too. Paracelsus very rightly said, "Medicine is not only science; it is also an art. It does not consist of compounding pills & plasters; it deals with the very process of life, which must be understood before they may be guided."

Detailed History Taking

To collect the detailed information of an illness is the basic requirement of the clinical medicine. Patient hearing is one of the good qualities of the clinician. Patient listening to all that the patient wants to tell is not the waste of time, but may offer a clue to the diagnosis. Patient is never vague. Patient may be illiterate, still his observations are more reliable than observations made by any other person.

Thorough Clinical Examination

Organized & disciplined approach is very important for proper clinical examination of the patient. Patient should be examined at an appropriate place only. The extra clothes of the patient should be removed before examination. Then, undescended testis, inguinal bernia, by pospadias δ_{i} some other malformations will not be

examination. Then, undescended testis, inguinal hernia, hypospadias & some other malformations will not be missed. Methodological & well organized examination is always rewarding. Disorganized & haphazard clinical

examination is very risky, several important points can be easily missed. Points of clinical examination should be recorded properly. Herny Cohen rightly said, "Most errors in clinical medicine are made by making cursory, incomplete examination than due to lack of knowledge & skills." Sir Robert Hutchison said, "There are no short cuts to physical diagnosis. It is learnt only by practice not a dull & dreary or monotonous practice but practice with all the five senses alert."

Documentation of History & Clinical Examination

Proper documentation & maintenance of clinical findings help a lot. It provides important points for analysis of the case, especially with some chronic illness. Documentation also ensures transparency in the clinical practice.

Analysis & Clinical Diagnosis

After detailed history & thorough clinical examination, the information should be analyzed. Important information from history & positive findings on clinical examination should be arranged in proper order. It will create an impression or an image in your mind regarding some possible conditions likely to be with the patient. It becomes a working or functional diagnosis. Such an approach offers a quality care. Drawing the clinical conclusion is an art. It can be learnt by experience & continuous efforts. Proper correlation of information collected on history taking & positive clinical findings lead to a definite conclusion. With this academic exercise, one should consider common conditions in a chronological order of their occurrences. **One should keep in mind the dictum, " If we diagnose common conditions commonly, most of times we are correct & if we diagnose rare conditions commonly, we are rarely correct."** Before planning for investigations & starting the treatment, to derive the clinical diagnosis (functional diagnosis) is must. It avoids unnecessary investigations & drug therapy to the patient.

Laboratory Investigations & Interpretation of their results

Laboratory investigations should be planned pertaining to your clinical diagnosis. Investigations are neither short cut nor final answer for the diagnosis. It is not the final answer. It is not the substitute for clinical diagnosis. Clinician should draw the final conclusion with correlation of clinical aspect, investigations, use of his knowledge, experience & wisdom.

Medical Audit

Prescription analysis is very useful academic exercise for rational drug therapy. Analysis of our own prescriptions teaches us a lot. Those who are practicing in intensive care units can have discussion on their death cases. What best was possible to offer in a critically ill hospitalized patient who died later on, a postmortem analysis would derive several points. It becomes the best learning exercise for everybody. It increases our competency to offer quality care in critically sick children. Clinicopathologic correlation (CPC) is the proven best learning exercise. Every academic institutions should have regular CPC at least once a month.

Ethics In Medical Practice

Establishment of reputation & good conduct following ethics in practice is the key for success & self satisfaction. Clinician should know his limitations. Ethics & quality care always go together.

Efficient Administration

One has to learn the administration whether he is running a small nursing home, a big hospital or working as an administrator for some institution. Without efficient administration, good quality in practice is not possible. With well organized approach, the clinician can offer adequate time to the patient. **To offer the compromised quality care of the patient due to busy schedule or overload of work are just excuses. It is the failure of the person to manage it efficiently.**

Counseling

Communication skill is very essential for the clinician for successful establishment in the profession & good quality care. Proper information to the patients, increases their confidence with the treating person. It also decreases their anxiety.

Research In Clinical Practice

Always note & record the unusual findings. Keep & compare your observations. Communicate or publish short notes on anything that is striking or new. - Sir William Osler

Epidemiological studies of infectious diseases, analysis of clinical cases, examination of school children are few illustrations for research work to undertake even at private office practice. Learning from such projects enables one to offer quality care in his practice. Research work is possible only at medical colleges & institutions is myth amongst us. At all the level of different type of research work can be carried out.

Worth a Read The Miracle Morning Hal Elrod

26 Academic Updates



























Caring is the most powerful form of connection.

Academic Updates

Anaesthesia Department

Dr. Heena Chhanwal and Dr. Bipin Shah moderated a session on anaesthetic management of renal transplant surgery at ISA National PG Class.

Dr. Divya Kheskani chaired a CME workshop on mechanical ventilation at Dr. MK Shah Medical College.

Dr. Heena Chhanwal participated as faculty in a CME workshop on managing common crises, organized by ISA Surat Branch.

Biochemistry Department

Hosted the 31st AMBICON conference with 12 workshops across major medical centers.

Dr. Ramesh Pradhan delivered a presidential oration on using quizzes as a learning tool and conducted a national PG quiz.

Dr. Rosy Lekharu Pradhan moderated a panel on CBME curriculum and Biochemistry.

Dr. Herat Soni chaired a scientific session, and Dr. Chinka Patel coordinated a workshop.

Cardiology Department

Dr. Zeeshan Mansuri presented a systematic review at AHA Scientific Sessions in Chicago, focusing on ticagrelor monotherapy after PCI.

Community Medicine Department

Dr. Arpit Prajapati chaired a session on health sector preparedness for climate change and presented papers on TB and burnout at conferences in Rajasthan and Gujarat.

Critical Care Department

Organized a POCUS & Radiology workshop at Gujarat CRITICON, attended by 60 delegates, including hands-on ultrasound practice.

Dr. Rushi Patel participated as a faculty member in the critical care workshop at Gujarat CRITICON.

Microbiology Department

Dr. Urvesh Shah participated in a panel on antimicrobial resistance (AMR) and organized a WHO-supported workshop on AMR capacity development.

OBGY Department

Dr. Kanupriya Singh judged paper presentations and was a panelist on immunomodulation in ART at FERTIVISION.

Dr. H. U. Doshi chaired a session in the FOGSI ICOG Certificate Course on Menopause and delivered a guest lecture at the Chhattisgarh state conference.

Pediatrics Department

Dr. Aditi Dubey won second prize for a poster on mineralizing arteriopathy at GUJPEDICON.

Dr. Baldev S. Prajapati received the prestigious IMA Academy of Medical Sciences - Professor award.

Dr. Prarthana Kharod Patel delivered a talk on child development and participated in a panel on developmental problems.

Pharmacology Department

Dr. Vipul Chaudhary chaired a session at NAPTICON at AIIMS Nagpur.

Dr. Rajat Thumar secured third prize for a paper presentation at IntPCON in Goa.

Physiology Department

Dr. Fairy Panchal completed a DNB in Physiology and attended an international conference at AIIMS Patna.

Psychiatry Department

Dr. Aalapi Prajapati was selected as a Women's and Children's Mental Health Committee Member of the West Zone IPS.

Conducted lectures on de-addiction and celebrated International Men's Day by collecting messages on men's issues.

Radiology Department

Dr. Asutosh Dave was felicitated at the IRIA Gujarat state conference for his contributions to academic activities.

Conducted a mock exam for 84 PG residents, involving 35 examiners from Gujarat, Udaipur, and Chennai.

Respiratory Medicine Department

Dr. Rushi Patel chaired a session at a Sleep Symposium held at Marriot, Ahmedabad



Tools of Titans Tim Ferriss

Surgery Department

Dr. Shashank Desai moderated live operative surgery at HERNIACON on laparoscopic procedures.

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Reaching the Community, Changing Lives

Through regular medical camps and health education sessions, the Community Medicine Department continues to extend quality healthcare to underserved areas. From preventive care to chronic disease management, our team is committed to promoting health and well-being for all.

UHTC- Madhupura

Medical Camps: 10 camps, 815 beneficiaries.

Health Education Sessions:

7 sessions, 365 beneficiaries on handwashing, mental health, breast cancer, diabetes, winter diseases, HIV/AIDS, and respiratory care.

RHTC- Kanij

Medical Camps: 7 camps, 697 beneficiaries.

Health Education Sessions:

6 sessions, 245 beneficiaries on breast cancer, geriatric health, diabetes, adolescent health, COPD, and nutrition.



Camp Updates

Free Multi-Specialty Health Camps Across Gujarat, Rajasthan & Madhya Pradesh

11,000

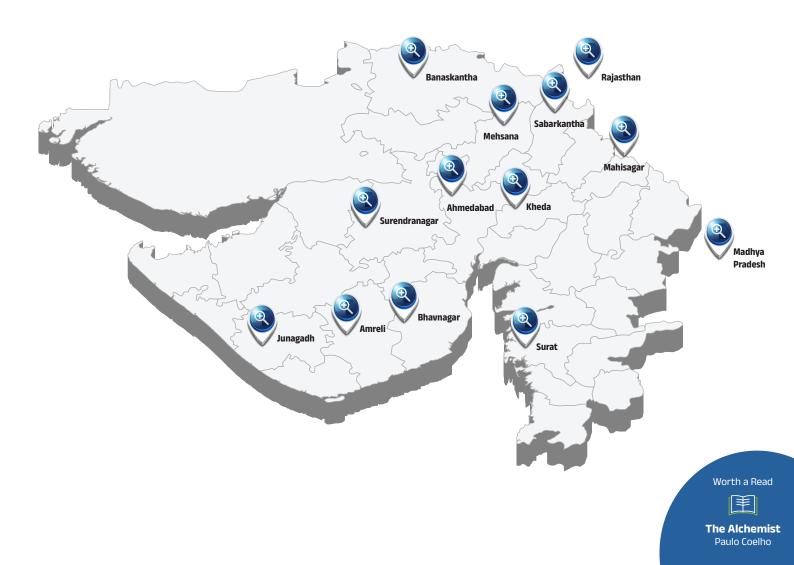
Patient

Bringing Healthcare Closer to Communities **Across Gujarat**, **Rajasthan & Madhya Pradesh!**

Our free multi-specialty health camps span Gujarat, Rajasthan, and Madhya Pradesh, reaching cities like Ahmedabad, Surat, Gandhinagar, and more. These camps offer expert consultations, diagnostic tests, medications, and referrals at no cost.

Specialties include general medicine, pediatrics, gynecology, ophthalmology, and dermatology, ensuring comprehensive care for all.

Join us in empowering communities to prioritize their health and well-being, one camp at a time!







Anaesthesia

Dr. Asmita Chaudhary (Professor) Dr. Kinjal Sanghvi

(Professor)

Anatomy

Dr. Ritesh Shah (Professor)

Dr. Shital Shah (Professor)

Dr. Kiran Arora (Associate Professor)

(Bio-Chemistry)

Dr. Ramesh Pradhan (Professor)

Mr. Vijay Pandhare (Assistant Professor)

Community Medicine

Dr. Viral Dave (Professor) Dr. Kamlesh G. Jain (Professor)

Dr. Venu Shah (Professor)

Dr. Asha Solanki (Assistant Professor)



Dr. Gunjan Shah (Professor)



Dr. Vishal Dave (Professor)

Medicine

Dr. Shaila Shah (Professor) Dr. Naimish Patel

(Professor)

Dr. Harshit Acharya (Professor)

Dr. Neha A. Shah (Professor) Dr. Vipulkumar B. Prajapati (Associate Professor)

Microbiology

Dr. Urvesh Shah (Professor) Dr. Neha N. Patel (Professor)

Obst & Gynec

Dr. Haresh U. Doshi

(Professor) Dr. Pooja Singh (Professor) Dr. Jaishree Bamaniya (Professor) Dr. Kanupriya Singh (Professor)

(F10163301)

Ophthalmology Dr. Hemaxi Desai

(Professor)

(Professor)

Orthopaedics Dr. Mukesh Shah

Paediatrics

Dr. Baldevbhai S. Prajapati (Professor)

Pathology

Dr. Anupama Dayal (Professor) Dr. Rupal J. Shah (Professor) Dr. Puja Jarwani (Assistant Professor)

Pharmacology

Dr. Vipul P. Chaudhari (Professor)

Physiology

Dr. Anand Mistry (Professor) Mrs. Lopa Vaidhya (Associate Professor)

Radiology

Dr. Ajay Upadhyay (Professor)

Dr. Nikunj C. Desai (Professor)

Skin & VD

Dr. Nayan Harshad Patel (Professor)

Surgery

Dr. Shashank Desai (Professor) Dr. Vidhyasagar Sharma (Professor) Dr. Sushil Akruwala (Professor)

Nursing

years

Ms. Sonal Prajapati (Nursing Superintendent) Ms. Heena Nambiar (Deputy Nursing Superintendent)

Ms. Hemangini Patel (Ass. Nursing Superintendent) Ms. Jagruti Dodiya (Ass. Nursing Superintendent) Ms. Saroj Levy (Ass. Nursing Superintendent)

Ms. Jayshree Chauhan (Ass. Nursing Superintendent) Ms. Jyotika Vaghela (Nursing Incharge)

Ms. Falguni Acharya (Nursing Incharge)

Ms. Nilam Mahida (Nursing Incharge)

Ms. Sheetalbahen Christian (Nursing Incharge)

Ms. Anitaben Pandya (Nursing Aid)

Ms. Hemlatta Rathod (Nursing Aid)

Ms. Malti Prajapati (Nursing Aid)

Ms. Rekhaben Leua (Nursing Aid)

Ms. Pratiksha Brahmaniya (Nursing Aid)

Ms. Nilam Solanki (Nursing Aid)

Ms. Vimala Parmar (Nursing Aid)

Ms. Daksha Mahida (Nursing Aid)

Ms. Josfina Christian (Nursing Aid) <u>Ms. Anju Kun</u>chara

(Nursing Aid) Ms. Jenny Sonara

(Nursing Aid) Ms. Kirti Ayre (Nursing Aid)

A journey of dedication, loyalty, and commitment.

Celebrating the unwavering service of our team members who have been the backbone of GCS Medical College, Hospital & Research Centre for over a decade.

Nursing

Ms. Minaxi Solanki (Nursing Aid) Ms. Alvina Naydu (Nursing Aid) Ms. Kokilaben Solanki (Nursing Aid) Ms. Nilam Shah (Nursing Aid) Ms. Alpa Parmar (Nursing Aid) Ms. Pravina Shah (Nursing Aid) Ms. Christian Hanokhbhai (Nursing Aid) Ms. Jaya Rathod (Staff Nurse) Ms. Seema Khristi (Staff Nurse)

Accounts

Ms. Binjal K. Desai (Assistant Manager) Ms. Rachana Pathak (Assistant Manager) Ms. Maitri Shah (Assistant Officer) Mr. Sandip Chauhan (Sr. Assistant) Mr. Manish Thoriya (Sr. Executive) Mr. Bhashkar Parmar (Executive)

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Administration-C

Ms. Kalpana Panchal (Personal Assistant - Dean) Ms. Kiran Panchal (Assistant Manager) Mr. Trivedi Kaushikbhal (Assistant Officer) Ms. Heena Sharma (Assistant Officer)

Mr. Shivang Gandhi (Jr. Assistant)

Bio Medical Eng. & Gas Plant

Mr. Suresh Kantilal Rana (Sr. Technician)

Business Development

Mr. Sarfaraj K. Mansuri (Assistant Manager)

Front Office

Mr. Parthesh Bhatt (Assistant Manager) Ms. Megha Chauhan (Sr. Executive)

Engineering Services

Mr. Harshad Patel (Technician) **Mr. Bhavesh Thaker** (Jr. Executive) Mr. Jignesh Patani (Sr. Electrician) Mr. Lalshih Thakor (Assistant) Mr. Pravin Vaghela (Flectrician) Mr. Balwant Parma (Sr. Electrician) Mr. Brahmbhatt Bhanuprasad (Maintenance Engineer) Mr. Alkesh Rana (Supervisor)

Governing Body

Ms. Jagruti Vipul Patel (Sr. Executive) Ms. Raval Diptiben (Jr. Executive) Ms. Patni Pravinbhai (Jr. Executive)



Ms. Christian Ribeca (Manager) Mr. Patel Jitendra (Executive)

Laboratory

Ms. Usha Patel (Sr. Technician) Mr. Rajeshkumar Maurya (Jr. Technician) Ms. Vaishali Bhavsar

(Sr. Technician) **Ms. Vandana Thakkar**

(Assistant Officer)

Ms. Renuka Patel (Executive)

Ms. Namrata Masani (Sr. Technician)

Ms. Renuka Patel (Executive)

Library

Mr. Shailesh Chauhan (Executive) Ms. Sejalben Raiyani (Executive)

Facility

Mr. Paragji Parmar (Officer)

Ms. Sunita Modi (Assistant Officer) Mr. Dobarival Sudhirprasad

(Sr. Security Supervisor) **Mr. Rameshchandra Thakkar** (Jr. Executive)

Medical & Admin

Mr. Prashant Raval (Officer) **Ms. Renuka Rajwadi** (Executive)

MRD

Ms. Gitaben Solanki (Jr. Executive)



Mr. Himmat Rawat (Sr. Assistant)

Mr. Pravinbhai Vaghela (Sr. Assistant)

Ms. Ramila Parmar (Jr. Assistant)

Pharmacy

Mr. Ashok Solanki (Sr. Assistant)

Purchase

Mr. Nirav Raval (Sr. Executive)

Mr. Prakash Patani (Sr. Assistant)

Stores

Mr. Alpesh Priyadarshi (Sr. Executive) Mr. Pukhrajsinh Chauhan (Sr. Assistant)

Mr. Kanaiyalal Thakor (Assistant)

Students Hostel

Mr. Pradhuman Chavda (Warden)



Ryan Holiday

The faculty of GCS School and College of Nursing organized various training sessions and continuous nursing education programs for both students and faculty members. **The sessions covered essential topics, including:**

Polio immunization training	Needle stick injury prevention
Hands-on training on cardiopulmonary resuscitation (CPR)	Extended and expanded roles of nurses
Hand hygiene practices	Al in nursing
Biomedical waste management	Wound care management
Fire safety training	Pain management

These training programs aimed to enhance professional competencies and equip students with practical skills for effective healthcare delivery.

Day Celebrations

Nursing students and faculty actively participated in various awareness campaigns and creative activities. Posters, exhibitions, and competitions were organized to highlight key healthcare topics, foster-ing knowledge-sharing and engagement.

Through these initiatives, the institution continues to promote excellence in nursing education and professional development.

Your work matters more when it reflects who you are.

GCRI Updates

Palliative Medicine Department

Celebrated World Hospice and Palliative Care Day with presentations by Dr. Bhavna Patel, highlighting the role of palliative care.

A creative display symbolized the relief from severe symptoms through palliative care.

Anaesthesiology Department

Organized training on Anesthesia Awareness and Compression-Only Life Support (COLS-CPR), engaging 241 participants.

Oncology Department

Hosted a training on the medical use of essential narcotic drugs, with 9 participants attending the three-day session.

CME on Breast Cancer Screening focused on patient-centric approaches, digital innovations, and national guidelines. Over 120 participants attended, with panel discussions on advanced technologies.

Breast Cancer Awareness Lok-Darbar: Community outreach event with 800 participants, providing expert insights on breast cancer prevention and offering free screening coupons for women.

National Cancer Awareness Day: Cancer survivors led an inspiring event themed "Strength, Hope, and Victory," sharing their journeys and spreading awareness. Distinguished guests honored the survivors' resilience.

Special Lecture

Dr. Suresh Alahari delivered a lecture on "Novel Small Molecules Suppressing Triple Negative Breast Cancer," sharing insights on therapeutic targets and treatments.

Collaborative Events

World Meditation Day: In collaboration with the Art of Living Foundation, experts highlighted the benefits of meditation for physical and mental

Patient-Centric Initiatives

Healing Therapy for Patients: Surabhi Ensemble performed at GCRI, offering cultural healing through music and dance to provide emotional relief to patients and staff.



Staff Welfare

Self-Defense Program for Nursing Staff: Conducted by RKKF's Chief Instructor, empowering 80 participants with practical safety techniques.

Staff Achievements

Dr. Shubham Koirala won 1st runner-up at AROICON 2024 poster presentation.

Dr. Rekha Solanki was elected President of the Indian Society of Anaesthesiology, Ahmedabad, and received multiple awards.

Dr. Virajsinh Padipsinh Rathod secured 2nd prize in the poster presentation at AROICON 2024.

Worth a Read



Robert Greene

Touching Lives, Building Awareness

Awareness Programs

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Breast Cancer Awareness – Over 40 women attended an awareness program led by Dr. Geeta Joshi, focusing on breast cancer, cervical cancer, and the HPV vaccine.

Cancer Awareness for Women – At Lambha, 30 women participated in an awareness session by Dr. Geeta Joshi.

Bike Rally for Cancer Awareness – A bike rally, supported by Civil Defence and Epic Foundation, promoted cancer awareness across Ahmedabad.

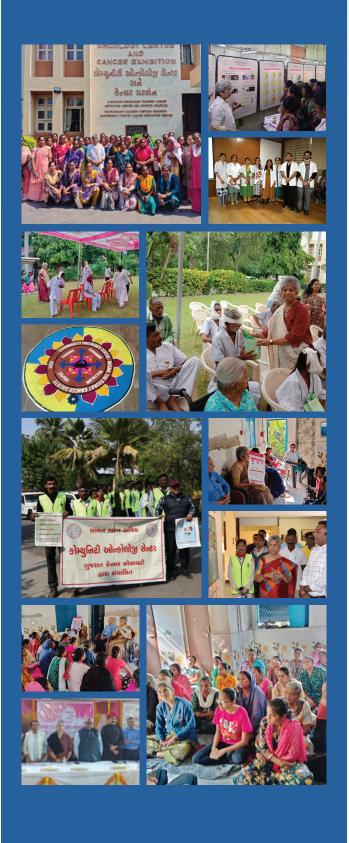
Celebrations & Events

Diwali Celebration – Team celebrated with lunch, rangoli, and joyful moments.

Laughter Program – A laughter event with comedian Shri Harpal Singh Zala brought smiles to cancer patients.

Patient Support

Palliative Care Day – Patients received hygiene kits and enjoyed fun activities and snacks.



Letting go clears the space for something better to grow.

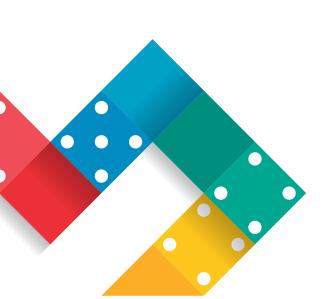
Puzzle Play : Challenge your mind, one square at a time!

Fill in the puzzle so that every row across, every column down and every 3 by 3 box contains the numbers 1 to 9.

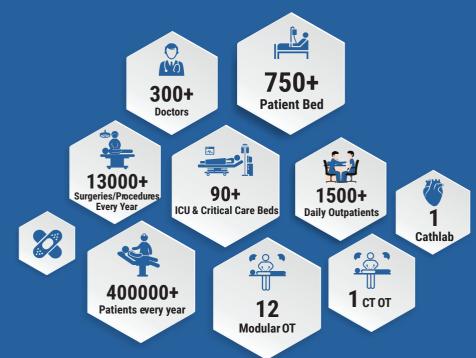
6	5	9		1		2	8	
1				5			3	
2			8				1	
			1	3	5		7	
8			9					2
		3		7	8	6	4	
3		2			9			4
					1	8		
		8	7	6				

Clues: 1. Seek a 2 in the centre block of squares **2.** Finish the centre block of squares **3.** Search for 2s everywhere

Submit your answers before May 1, 2025 on WhatsApp to +91 99798 49537 in this format: 1. Your Name 2. Department 3. Contact Number. Lucky winners will be awarded!







GENERAL SPECIALITIES:

- Anesthesia
- Dentistry
- Dermatology (Skin & V.D)
- Emergency Medicine
- Ear, Nose & Throat (ENT)

SUPER SPECIALITIES:

- Cardiology
- Cardiothoracic Surgery
- Critical Care
- Endocrinology
- Gastroenterology
- Gastrointestinal Surgery
- Interventional Radiology

CLINICAL SERVICES

- Intensive Care Unit PICU NICU, ICCU, SICU
- Endoscopy

24X7 SERVICES

- Emergency
- Ambulance

- General Medicine
- General Surgery
- Gynaecology & Obstetrics
- Maxillo-Facial Surgery
- Ophthalmology
- Medical & Surgical Oncology
- Nephrology & Kidney Transplant
- Neurology & Neuro Surgery
- Ortho-Dentistry
- Paediatric Dentistry
- Paediatric Neurology
- Paediatric Surgery
- Dialysis
- Cathlab
- Physiotherapy
- Radiology Services
- Laboratory Services

- Orthopaedics & Joint Replacement
- Paediatrics
- Psychiatry
- TB & Respiratory
- Plastic, Cosmetic & Reconstructive Surgery
- Rheumatology
- Spine Surgery
- Urology
- Vascular Surgery
- IVF
- Dietetics
- Health Check-up
- Blood Centre
- Indoor Pharmacy

Empanelled with **Ayushman Bharat PM-JAY Yojana** for **Free treatment** to beneficiaries. Empanelled with all leading Insurance - TPA Companies for **Cashless / Mediclaim** Facility.



GCS Medical College Hospital & Research Centre



Opp. D.R.M. Office, Near Chamunda Bridge, Naroda Road, Ahmedabad - 380025

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