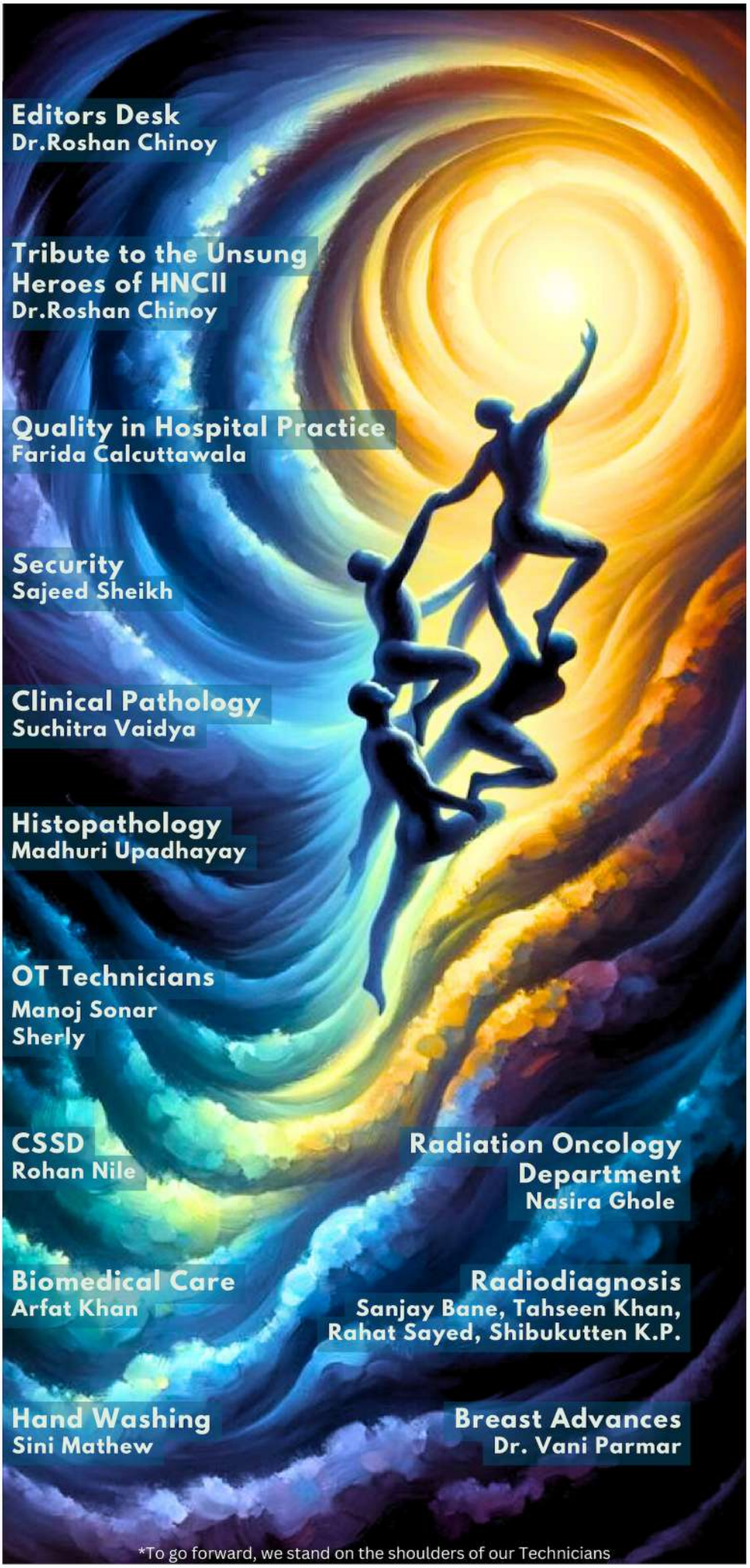
PUNYASHLOK AHILYADEVI HOLKAR
HEAD & NECK CANCER INSTITUTE
OF INDIA

HNCII NEWSLETTER



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Editors Desk

R. F. Chinoy

Our Secret Force

Many of us doctors and senior staff, are so cocooned and ensconced in our own workspace and jobs, that we don't know, or care to wonder about the kind of work going on in the next room, lab, or theatre. Our world is not the only realm of hard work. Our technicians do a great deal of their own specialized work, quietly, and most often, in the background. Our technical and support staff is generally reticent and shy, and rarely, if ever, do they come forth to blow their own trumpets.

Our techs and support staff keep us afloat

This issue is dedicated to our technical and security staff, and in essence this is our "Thank-you" acknowledgement and tribute, to the many

"UNSUNG HEROES OF HNCII"

Their work speaks for them, and just watch the panic and the chaos that sets in amongst doctors, when they are not around, absent or indisposed. Their presence ensures security, comfort levels for patients and doctors, and it is their work that generally keeps the 'ship afloat.' As doctors, we often don't know how to calibrate a machine, service a microscope, prepare a solution with a specific ph or ward off the odd violent patient or relative. They know.

Technicians are invariably good handmen and their understanding about trouble shooting in their jobs, gives them that special quality, which makes them indispensable.

Don't think that they do not enjoy their jobs. Most of them take pride in doing their jobs well, and this is what keeps them cheerful, vigilant, and alert in their jobs.

So, thank you, all our technicians, support staff and security officers.

THIS IS YOUR SPACE: TELL US ABOUT YOUR WORK AND YOUR WORLD.

FROM ALL DOCTORS OF HNCII

TRIBUTE TO THE UNSUNG HEROES OF HNCII

Expertly trained, yet in the background ***TECHS WORK,***
Never showy nor worshipped, yet our techs never shirk,
With care and concern, they fulfill every chore,
Their diligence is proof that their duties come first.

At our hospital gates, ***SMART GUARDS*** do stand,
Guiding sick people, with strong steady hands.
Our Security ensures a quantum of might,
Safeguarding us all, by day and by night.

PHLEBOTOMISTS whose hands are so light,
they can draw life's blood with rarely a flaw.
In slender limp veins, they can deftly insert,
The needle so fine, that it really won't hurt.

With the hum of machines in our OT's and labs,
Technicians stand tall, in all jobs they're just fab.
Our ***CSSD'S*** vital, yet who is aware?
They work very hard, far away from the glare.

And here in our OT's, our strong ***'HANUMANS'***
They carry our patients with strong caring hands,
They anticipate each move. the surgeons make,
Without them and ***OUR TECHS,*** all chaos would reign.

In Histopath labs our ***TECHS*** cut blocks,
Biopsied tissues in hot paraffin get locked.
Machines know their hands, and obey only them,
Butt in - and be sure, the machines would rebel.

In our radiology clinic, ***TECHS*** reveal such tales,
Of bones and organs that get sick or have failed.
They detect ultra-sounds, shadows and waves,
Of sinister lumps, that just misbehave.

All engineers, guards, and techs are so skilled.
Just think without them, docs work would be ***NIL***
In each discipline, none doubt your true worth.
Without ***QUALITY AND TALENT***
HNCII would stand..... ***COMPLETELY STILL.***

HNCII OUR VERY OWN SUPPORT SYSTEM

Quality in Hospital Practice

A Non-Negotiable Principle

Farida Calcuttawala
Manager Medical Administration

Quality in hospital care is paramount to ensuring the well-being and satisfaction of patients while promoting a culture of excellence among healthcare professionals.

In the dynamic and critical environment of healthcare, maintaining and continuously improving quality standards is essential for patient safety, positive outcomes, and the overall reputation of the hospital.

Patient-Centered Care:

Tailoring healthcare services to meet the individual needs and preferences of patients fosters a patient-centered approach. Communication, respect, and shared decision-making between healthcare providers and patients are fundamental components of quality care.

Clinical Excellence:

Clinical competence involves ensuring that healthcare professionals possess up-to-date knowledge, skills, and adhere to evidence-based practices. Continuous training and professional development play a crucial role in maintaining clinical excellence.

Safety Protocols:

Implementing rigorous safety protocols helps prevent medical errors, infections, and other adverse events. Regular training, clear communication channels, and a culture that encourages reporting and learning from mistakes contribute to a safer healthcare environment.

Accreditation & Compliance:

Hospitals often seek accreditation from reputable organizations to validate their commitment to quality. Adhering to industry standards and regulatory requirements ensures that the hospital operates within established guidelines, promoting consistency and reliability in patient care.

Efficient Processes:

Streamlining hospital processes enhances efficiency and reduces the likelihood of errors. From patient admission to discharge, optimizing workflows and utilizing technology can improve the overall patient experience while minimizing delays and inefficiencies.

Patient Outcomes & Follow-Up:

Monitoring and analyzing patient outcomes provide valuable insights into the effectiveness of healthcare interventions. Establishing robust follow-up procedures ensures that patients receive appropriate post-discharge care and that any potential issues are addressed promptly.

Patient Feedback & Satisfaction:

Actively seeking and incorporating patient feedback helps hospitals identify areas for improvement. Patient satisfaction surveys and open communication channels contribute to a culture of continuous improvement, demonstrating responsiveness to patient needs and concerns.

Staff Engagement & Well-being:

Hospitals should prioritize staff well-being, provide opportunities for professional growth, and create a positive work environment to retain skilled and motivated personnel.

We will soon be launching the Medblaze QMS to ensure greater efficiency and less waste, better understand our patient needs and finally get accredited by NABH.

In conclusion, ensuring quality in hospital care is a multifaceted endeavor that requires a commitment to patient-centered practices, clinical excellence, safety, efficiency, compliance, and continuous improvement. By addressing these aspects, hospitals can create an environment that not only meets but exceeds the expectations of patients.

Our PAH-HNCII hospital, has invested in the Quality Management System tools, which are software applications or platforms that facilitate a systematic approach to managing quality within organizations. They help hospitals to ensure that their services, and processes consistently meet our patients' expectations, regulatory requirements, and industry standards.

Security

Sajeed Sheikh
Sr. Executive responsible for Security

Shilrtna Jagatkar, Vinay Jaiswar, Rajendra Salunke, Anil Ghorpade, Swaraj Shirke, Sajeed Sheikh, Neha Patne, Aarti Kamble & Nitin Charniya

Workplace Violence

Our hospital is a very valuable asset to society, for our patients, doctors and all the staff that support the running of such a facility. In a world where workplace violence is increasingly common, our trained security staff and their safety policies are more important than ever. The indispensable role of our security guards, supervisors and team-leaders in today's world cannot be overstated. Our dedicated trained professional men and women, stand guard around the clock, at a myriad of locations, including at the entrance of our hospital, at all sensitive areas like OPD's emergency units, operation theatres, at the in-house pharmacy, wards and laboratories. Having proper levels of a mobile alert security staff in a hospital provides protection and peace of mind for all the patients treated at our hospital.

Peace of Mind

Hospital security responsibilities also extend to protecting the doctors, nurses, and all other staff members who merit a safe workplace. The mere presence of security personnel can discourage potential intruders and troublemakers.

Security guards help enforce guidelines, including fire safety, at points of entry like at elevators, and contribute to a safe and orderly environment. Our security guards, both men and women, are trained to handle emergencies, such as, happens during a fire, medical incidents, emotional outbursts of grief or frustration, and help to prevent injuries and save lives. Like our Javans at the borders of our country, our security staff are completely indispensable, and we salute their work and loyalty to HNCII.

Clinical Pathology

An Indispensable Asset

Ms Suchitra Vaidya
Senior Lab Manager.

SERVICES
In A Cancer Set-up

Bharti, Mitalee, Arshia, Firdous, and Zakir

Clinical laboratories are multifaceted healthcare facilities, that provide a wide range of laboratory procedures which help physicians to arrive at a complete clinical diagnosis. The different sub-divisions of a laboratory include hematology, clinical pathology, biochemistry, microbiology, and serology.

Today medical laboratory technology is the invaluable prop that all general physicians use on a daily basis. The expertise of yesteryears, of relying largely on clinical examination, are marginalized to the extent, that the general physician, will not even make a tentative diagnosis without a solid backup from laboratory results. Oncologists also rely heavily on radiology and histopathology for a specific cancer diagnosis. Nevertheless, the support given by a clinical laboratory is absolutely invaluable. No form of cancer therapy can ever start without the supportive findings of at least a basic blood report, serology or biochemistry result.

Holistic Rx

Cancer patients are often older patients and the possibilities of having life threatening co-morbid conditions necessitates the services of a robust clinical pathology laboratory. It makes no sense if a patient is cured of his cancer, but then goes on to die of a heart problem or a stroke or diabetes. Holistic treatment is the need of the hour for every patient. A clinical laboratory technician is a skilled professional who tests human samples for diseases. We scientifically analyze specimens such as blood, urine, fluid and tissue samples.

At Work

While we are not usually personally involved with patients, clinical laboratory technologists play a significant role in the process of providing personalized care. We analyze and generate critical data for detecting and treating heart disease, diabetes, blood or metabolic cancers and many other health conditions.

Duties

The duties and responsibilities of a clinical laboratory technologist include:

- Analyzing the chemical constituents of the patient's body fluids.
- Operating sophisticated lab equipment such as cell counters and microscopes.
- Evaluating test results for exactness and interpreting them with controls on a daily basis.

Our team includes Arshi, Firdous, Zakir, Mitalee, and Bharti. All are well trained with awareness of latest quality management systems. Our ultimate aim is to provide total care to the patients, in defined TAT with a compassionate approach.

Histopathology

Ms. Madhuri Upadhyay
Assistant Lab Manager

Shashank, Dipika, Madhuri, Sneha, Pooja, and Viraj

Gold Standard

Histopathology remains the gold standard for the diagnosis of cancers. All the technicians collectively help pathologists arrive at a diagnosis by preparing optimally prepared glass slides for interpretation.

Pooja

Shashank

How it starts

Patients come to our hospital because they see or feel a lump/swelling. They may, have complaints suggestive of a cancer. The surgeon does a biopsy, or excises the entire diseased tissue, and submits it to us. **Our Work Begins**. We receive the sample, check for accurate labelling, and now starts the cascade of events, leading to the final product - A set of glass slides, with thin slices of processed tissues on them..

Our Process

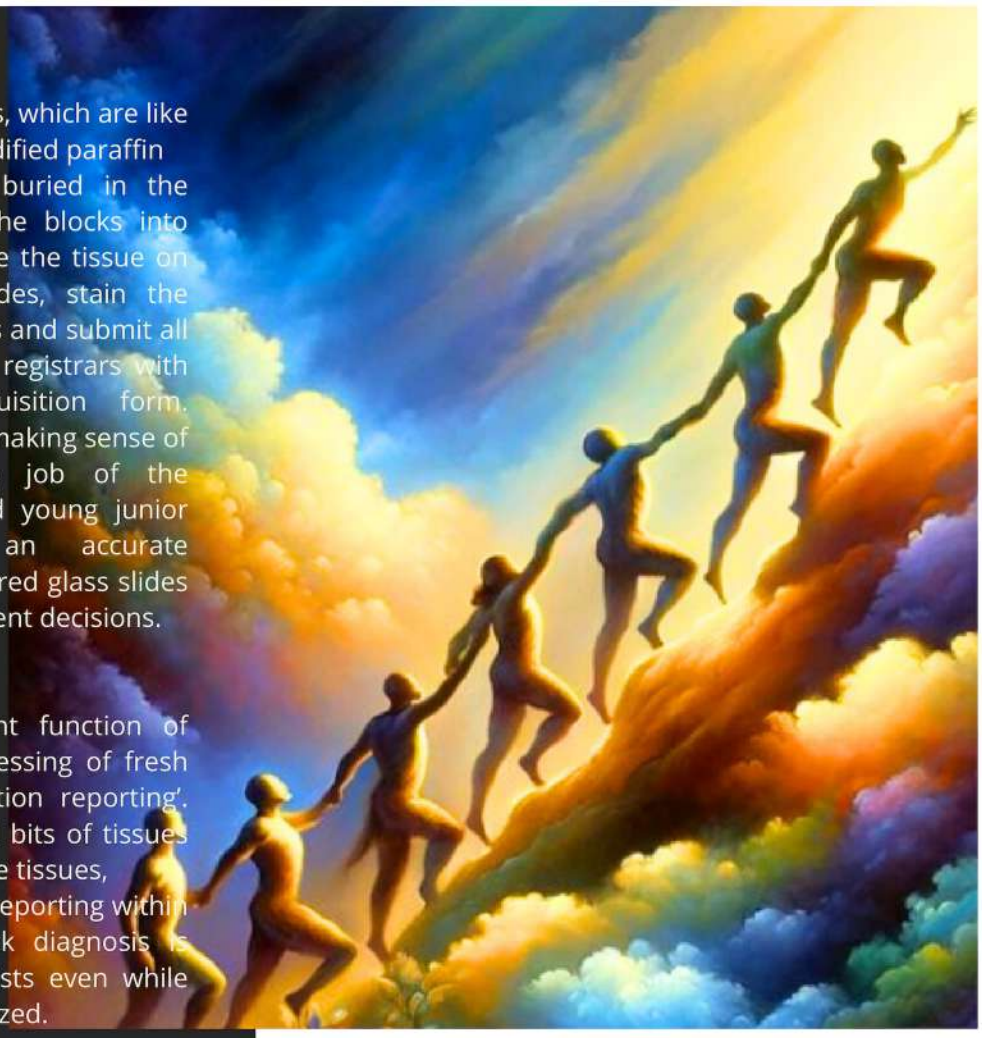
Firstly, as histo-technicians, we have to be 'tough', as seeing specimens like a breast or a diseased jawbone, or an eyeball, arriving in a jar, is a scary 'first time' experience, (feels akin to seeing a murder). But slowly, with time, training, and sensitive senior teachers, we get used to it.
We first "fix" the tissue in formalin to harden it and prevent it from deterioration. Then the pathologist will cut the tissues into thin slices, and we then take over. The tissue passes through a machine called the "Tissue Processor" which refers to treatment of the tissue, so that it gets impregnated by hot paraffin.

Paraffin Blocks

We make paraffin blocks, which are like little white bricks of solidified paraffin wax, with the tissue buried in the blocks. We then cut the blocks into ultra-thin sections, place the tissue on clear oblong glass slides, stain the tissues, seal it with glass and submit all the glass slides to the registrars with the appropriate requisition form. Reading the slides and making sense of the histology is the job of the consultant doctors and young junior registrars. Making an accurate diagnosis on well-prepared glass slides is imperative for treatment decisions.

Frozen Section

Another very important function of ours, is the rapid processing of fresh tissues for 'frozen section reporting'. We rapidly freeze small bits of tissues sent from the OT, cut the tissues, stain, and submit it for reporting within 10-15 minutes. A quick diagnosis is made by the pathologists even while the patient is anaesthetized.



Team work helps to lead everyone to the top

Our Team

We recognize how important our jobs are because we literally can 'make' or ruin a patient's life. If we are careless or make mistakes, it is the patient's life at stake.

Our technicians consist of very efficient, capable, and loyal colleagues, viz ***Shashank and Pooja***. We share the work in rotation, but it is also our added responsibility to oversee the quality of our daily work and maintain the stocks of reagents and lab materials.

Our attendant is ***Viraj***, a young quiet and very helpful young man, who assists everyone in all odd and regular jobs.

We have our two typists ***Dipika and Sneha***, who type out all our reports, (even though they have to struggle to read some of our doctors' illegible handwritings).

Our pathologists, ***Dr.Chinoy, Dr.Ketan, Dr.Netra and Dr.Khushboo***, are always available to guide and help us.

The atmosphere in our department is actually very cheerful, as we all bond together as a family.

Most importantly, we have all realized that our work is of utmost importance, as it throws light for a cancer diagnosis, and guides our pathologists. We feel proud and happy that we can help patients by doing our jobs well.

Good lab work sheds light on the road to an accurate diagnosis

O.T. Technicians

Manoj Sonar
Ms. Sherly

Amreen, Supriya, Reshma, Shehla

Our main tasks are:

- Keep the OT clean and ready for the daily surgery.
- Transport patients to and from their wards.
- Interact with CSSD and keep instruments and linen ready for each case.
- Help the scrub nurse to start the case and set up the necessary appropriate equipment.
- At the end of the surgery, they shift the patients very gently and carefully from the OT table to the transfer trolley.
- They work in the background but are the soldiers guarding our operating theatres and patients.

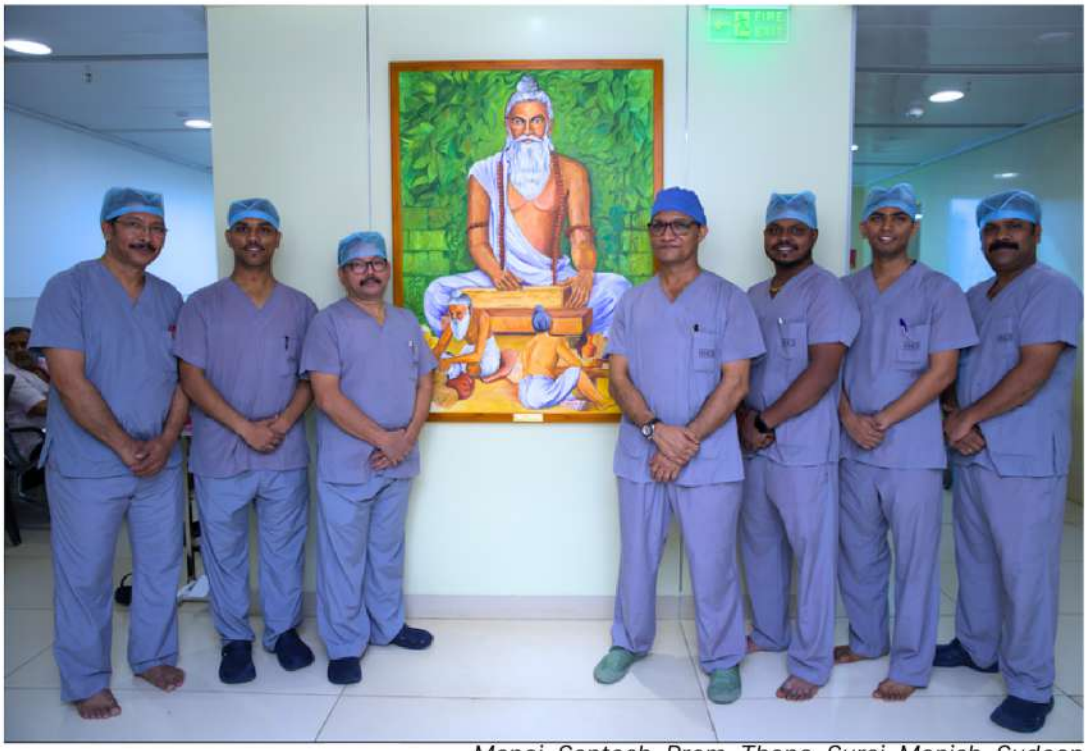
We OT technicians are certified allied health care professionals, who play an integral part in the smooth functioning of our OT.

Our OT is like the battleground, where our surgeons, nurses and paramedics fight to keep disease and cancer at bay, and literally 'cut the cancer off'. We OT technicians do everything to make this possible because we help to coordinate work with the whole team.

Technicians are an important component of the OT team. We work with surgeons, anesthesiologists, and nurses in order to provide quality patient care throughout all surgical procedures. We are responsible for preparation and maintenance of the operating theatres and equipment, before, during and after surgery.

WE OT TECHNICIANS

Manish Bhusare



Manoj, Santosh, Prem, Thapa, Suraj, Manish, Sudeep

In the heart of the OT, you cannot deny,
In this battlefield, patients' stakes are sky high.
So, all of our staff, take tremendous care,
To chase old 'Yamraj' and give him a scare.

In this haven, where bloody battles are waged,
All teams with skilled hands, are gainfully engaged.
To cut, clean and stitch, everyone takes such pains,
Where sickness and cancer are flung far
with disdain.

As OT techs, we all take delight,
To comfort, and calm those with nervous fright.
With gentle touch, we always take care,
To ease the pain, our patients must bear.

Paramedics, the unsung warriors true,
Swift and skilled, all crises - we subdue.
Racing against time, our mission sought,
To make lives whole, when all were distraught.

WE OT TECHS

After the battles, when work is all done,
Paramedics clean up, where victories were won.
Without us paramedics- it's a chaotic field,
Next day once again, all is clean and pristine.

Central Sterile Supply Dept. (CSSD)

The 'Yamraj' of Germs

Rohan Nile
Manager CSSD

BACKSTAGE *Branch*

Central Sterile Supply Department (CSSD) is a most underrated 'backstage' branch of any hospital, yet an integral, very vital part of any healthcare organization. We play a crucial role in breaking the chain of infection, which might otherwise nullify all the good work done by surgeons and nurses.
To begin this discourse, history recorded an alarming rate of 'Hospital Acquired Infections' (HAI) in Indian hospitals in the past. This phenomenon highlighted the importance of disinfection and sterilization. Achieving disinfection and sterilization through the use of optimal sterilization practices is essential for ensuring that medical and surgical instruments do not transmit infectious pathogens to patients. Our CSSD work is very significant for patients' health, and because we understand this, we take our responsibilities very seriously.

GUARANTEED STERILE *Equipment*

CSSD is a specialized area, responsible for the collection, decontamination, assembling, packing, sterilization, storing and distribution of sterile goods and equipment to all patient care areas. Being a service unit of the hospital, each and every member of my CSSD team is responsible for providing guaranteed sterile equipment/ instruments, laundry, gauze, and swabs, to all the departments of the hospital for use in direct patient care. We take on the task of delivering sterile supplies of surgical instruments, to wards, day care units, OT theatres and OPDs on a day-to-day basis. It is the primary essential step towards the prevention of hospital acquired infections (HAI).

ERADICATE GERMS AND HARMFUL *Chemicals*

Patients who are wheeled into the operation theatre, are nervous, frightened, and anxious about the after-effects of surgery. Very few realize that post operative infections can be more damaging and dangerous for health. It is here that we, from CSSD step in, right at the start, when patients get admitted into hospital and more pertinently at the beginning of surgery, and after surgery, as we eradicate and wipe out all possible germs and harmful chemicals that may have adhered to the instruments, bandages, gauze pieces, etc. that may be used during, and after surgery. Washing, cleaning and sterilization of instruments etc. sounds like a mundane job, but as with any home, hotel, or restaurant, it is a dynamic necessary service for civilized activity, more so in a hospital.

Killer of Germs

EXCEPTIONAL *Care*

Our hospital consistently demonstrates unwavering dedication to patient well-being, by providing exceptional care through a team of skilled and compassionate professionals. The joint commitment to maintaining high standards has a profound positive impact for bonding of the staff in our hospital. Our hospital's commitment to excellence is evident by the generous, excellent facilities and cutting-edge machinery placed in our department. This investment not only enhances the efficiency of our operations, and we all feel proud to be members of a team which maintains aseptic conditions in all healthcare areas and eliminate chances of hospital borne infections.
I feel fortunate and truly blessed to work with such a spirited team. We believe in working hard, and we strive to contribute towards the growth of our organization.
We all celebrate every occasion and festival as an extended family, which increases our bonding and circle of friends.

I would like to introduce my team members to you, one by one:
Our supervisor Pravin Pingulkar who is a very enthusiastic person who possesses good leadership qualities and ensures effective coordination amongst staff who never fail to follow sterilization protocols.

Our Executive Nilesh Patil is a very jolly person who helps maintain a happy healthy work environment. His decision-making skills along with deep understanding of regulatory compliance helps very much, in handling the department in absence of the seniors too.

Our CSSD officer Prasad Kondvilkar, exhibits careful and meticulous attention to detail in quality and efficiency. He has in-depth knowledge of sterilization processes and effectively communicates both with the team, and with other departments.

Our Officer Mayuri Parab is scrupulous and dedicated to executing sterilization processes, adhering to established protocols and ensuring the highest standards of instrument cleanliness. Her strong problem-solving skills and proactive approach helps establish her as a proficient CSSD officer.

Our officer Siddhi Ghanekar is highly organized and efficiently managing initial stages of sterilization processes, helps to set the tone for the day. Punctuality and attention to early morning inventory checks ensures a smooth and compliant start to daily CSSD operations.

Our Officer Ashish Pradhan possesses a comprehensive understanding of sterilization methods, operates specialized equipment with proficiency.

Our assistant technician Alex Anthony is a skilled CSSD technician who ensures effective decontamination of medical instruments and works harmoniously within the team.

Our support system, are our attendants:
Chetan Gorule exhibits diligence and precision in handling medical equipment during cleaning and sterilization processes.

Madan Nirbhavne, has a proactive approach to maintaining a clean and orderly workspace and attention to hygiene standards and good knowledge in linen making makes him a reliable resource.

Satish Waghmare demonstrates careful attention to detail while assembling and packaging medical accessories. He also has a thorough understanding of product specification for each procedure.

Rohan consistently exhibits exceptional leadership qualities in overseeing the CSSD department and fosters collaborative and a positive work environment. Through effective management, the team plays a crucial role in upholding the highest standards of safety and hygiene. The collective commitment to excellence, strategic decision-making and clear communication makes each member an invaluable asset to our organization.

Biomedical Upkeep

Arfat Khan
Biomedical Engineer

In the dynamic field of today's healthcare system, technology plays a pivotal role in diagnosis and treatment of critically ill patients.

Upkeep of Medical Equipment in HNCII

Reliability and continuous maintenance of medical equipment is vital especially in a super-speciality hospital dedicated to Head and Neck, and Women's Cancer treatment.

Silent But Essential

Not many know of the silent but essential work done by hospital biomedical engineers. As a Biomedical Engineer at our own institution, I consider it my duty and privilege to shed some light on the significance of 'Preventive Maintainence' for more than 350 medical assets, including advanced medical equipment such as PET- CT and LINAC. The seamless functioning of multiple machines is crucial for our patient care. Staff and patients should have the comforting knowledge and reassurance that not only are the doctors good, but the tools used by the medical teams, are well maintained, safe and are being routinely checked for accuracy, safety and efficient functioning.

Coordinated efforts from our dedicated 'Biomedical Engineering' team, are led by me, along with Pinky Thakur, and ably supported by our Engineering Head M.S.Rathod along with the Project Engineer Fardin Pathan, and the Building Management System (BMS) team. Our work involves ensuring optimal continued performance of all our hospital medical equipment.

Preventive Maintenance is not merely a routine task, it is a proactive exercise aimed at eliminating potential breakdown and ensuring the continuous, efficient operation of medical equipment. It involves systematic and timely inspections, detection of potential or actual breakdowns, corrective actions to avoid early failures, various tests and measurements. This strategic care and servicing and helps maintain equipment and facilitates the proper working of all machineries.

Benefits :

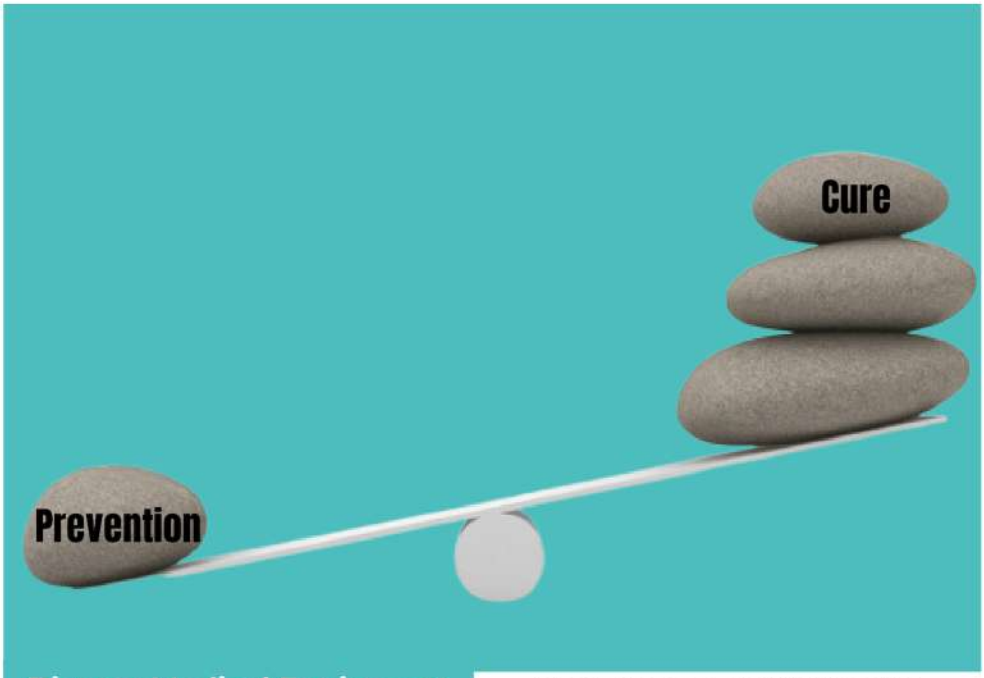
- **Patient Care and Safety:** Regular maintenance boosts confidence in healthcare professionals, ensuring proper functioning of equipment and enhancing patient care.
- **Cost-Effective Operations:** Preventive maintenance extends the lifespan of medical devices, preventing unexpected failures and costly replacements.
- **Regulatory Compliance:** Regular maintenance ensures adherence to federal regulations, including maintaining equipment inventory and following manufacturer's recommendations.
- **Increased Equipment Lifespan:** Saves costs and contributes to sustainable resource management by extending the life of medical equipment.
- **Reduced Risk of Equipment Failure:** Identifying issues early reduces the risk of equipment failure during critical procedures, safeguarding patient well-being.
- **Increased Asset Utilization:** Efficient maintenance improves the utilization of medical assets, ensuring optimal performance for each device.
- **Operational Efficiency:** Well-maintained inventory minimizes downtime and optimizes resource utilization, leading to increased operational efficiency.
- **Enhanced Reputation:** A hospital with well-maintained equipment signifies commitment to patient safety and quality care.

LINAC machine

C Arm in our OT

Video Conferencing demo for Surgeries

Anaesthesia Machines



Diverse Medical Equipment Under Our Care:

In our pursuit of maintaining the highest standards of patient care, our team is entrusted with the care of a diverse range of medical instruments.

a) Linear Accelerator (LINAC): At the heart of our cancer treatment endeavors, the LINAC demands meticulous attention. Regular calibration and performance checks are conducted by Nasira Ghole and her team to guarantee the accurate delivery of radiation therapy, essential for the success of our treatment protocols.

b) Radiology Equipment: Radiology holds a crucial position in our diagnostic capabilities, and the effective operation of radiology equipment is indispensable for our patient care standards. Within the confines of HNCII, we boast of a specialized department for Radiology, equipped with essential technologies such as 40kW fixed X-ray, 6kW mobile X-ray, OPG, Mammography, and Sonography. This dedicated unit underscores our commitment to providing comprehensive diagnostic services, ensuring the reliability and precision of our radiological procedures.

c) Patient Monitoring lamp; Patient Care Devices: From bedside monitors to specialized equipment for cancer patients, our team ensures the proper functioning of these devices.

This encompasses checking vital sign monitors, syringe and infusion pumps, and other critical devices, contributing to continuous patient monitoring and safety.

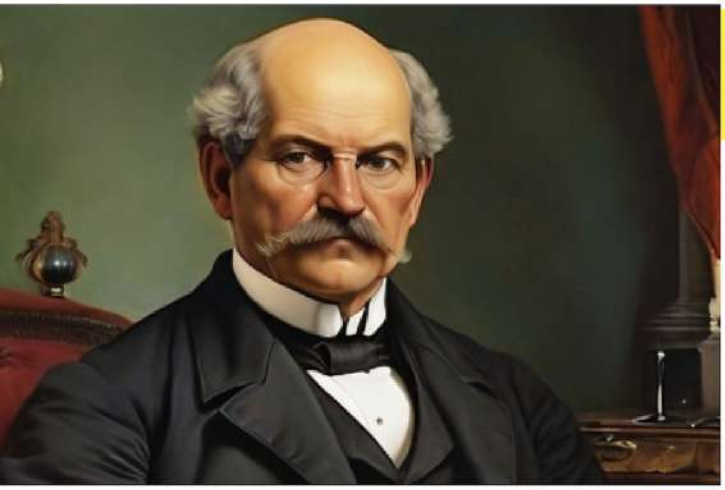
In conclusion, our commitment extends beyond routine maintenance; it is our dedication to uphold the integrity of the specialized instruments that form the backbone of our diagnostic and treatment capabilities. By consistently prioritizing preventive maintenance, we reinforce our commitment to providing unparalleled healthcare services at our hospital. This proactive approach is the cornerstone of our mission to ensure the safety, efficiency, and longevity of our medical equipment, contributing to the highest standards of patient care.

Our unwavering dedication to preventive maintenance underscores our pledge to deliver excellent healthcare services to our patients, aligning with our vision of becoming a beacon of excellence in Head and Neck Cancer treatment.

Endoscopy Machines

Hand Hygine

Ms. Sini Mathew
Chief Nursing Officer



Dr. Semmelweis

TOUCHING MORE LIVES

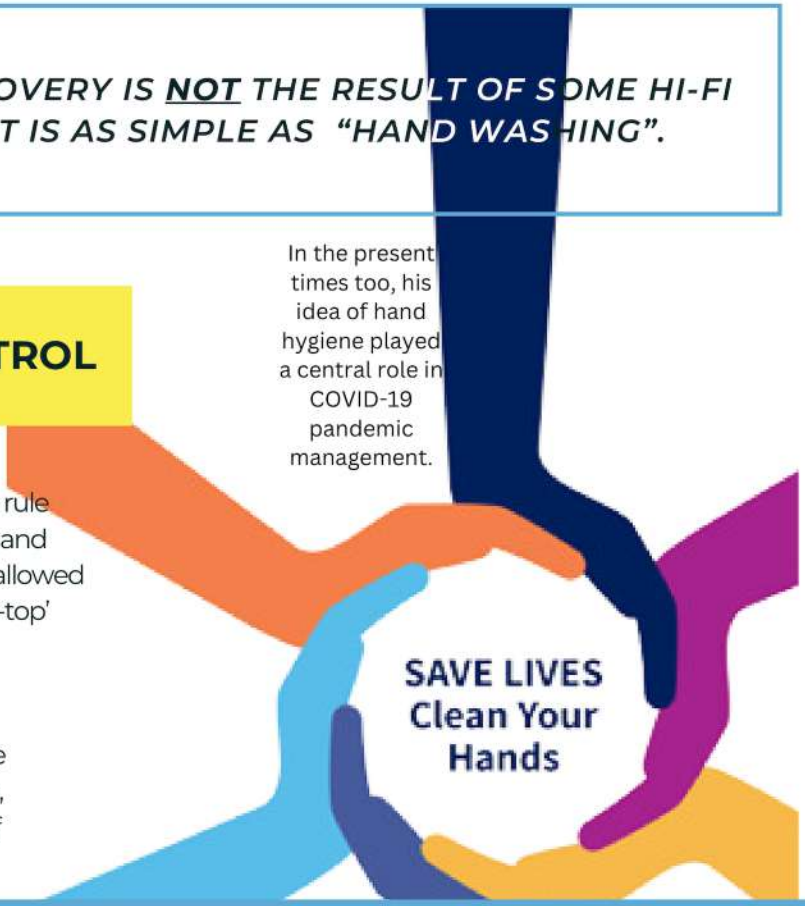
In 1847, Semmelweis, a Hungarian obstetrician was distraught and excessively upset, as he helplessly watched several women and newborn babies dying of puerperal fever (childbed fever). His clinical observations and logical reasoning slowly drove Semmelweis to suspect that "dirty" hands were probably responsible for transmitting puerperal fever from one patient to the doctor's hands, and there after to another woman.

EVERY DRAMATIC MEDICAL DISCOVERY IS <u>NOT</u> THE RESULT OF SOME HI-FI "ROCKET SCIENCE". SOMETIMES IT IS AS SIMPLE AS "HAND WASHING".

FATHER OF INFECTION CONTROL

It was in 1847 that he discovered the etiology and prophylaxis of puerperal sepsis and imposed a new rule mandating handwashing with chlorine for doctors and nurses. Those with unwashed hands were just not allowed to enter his labor room. This resulted in an 'over-the-top' decrease in maternal and infant mortality. Today Semmelweis is remembered as the **"Father of Hand Hygiene"** and the **"Father of Infection control"**, because of his simple insistence of hand washing in his wards. Since then, diligent hand washing has prevented the deaths of millions of humans.

In the present times too, his idea of hand hygiene played a central role in COVID-19 pandemic management.



FLORENCE NIGHTINGALE
(1820-1910)

THE SECOND MOST IMPORTANT PERSON IN HISTORY OF MEDICINE AND PUBLIC HEALTH

During the war in Turkey, Florence Nightingale strengthened hand-washing and other hygiene practices in the war hospital where she worked, and her hand-washing practices resulted in impressive reductions in infections.

URGENT NEED

Surprisingly, today there are still significant gaps in knowledge about hand hygiene among medical staff and particularly among undergraduate students. This lapse was particularly apparent in COVID-19 pandemic. An urgent need to strengthen existing teaching methods of simple procedures to positively impact on long term behavioral patterns. is required. This in turn will translate into better hygiene compliance among the future health workforce of our country. Effective Infection prevention and control are necessary to achieve quality healthcare.

The first step is hand hygiene. It's a simple, economical, and effective method for preventing nosocomial infections in health care settings. These infections are thought to be transmitted by the hands, hand-washing is a most important intervention. But it is not the sole measure. Other factors such as environmental hygiene, crowding, education, and knowledge about microbes are also important for effective infection control. Habits of hygiene inculcated from childhood, at home and in schools are important to alter human behavior for life.

Protect yourself
Protect Your Patients

PROCEDURE OF HAND WASHING

Getting back to the question of actual hand-washing procedures, the following precautions should be undertaken while performing hand-washing.

- When washing hands with soap and water, wet hands with water and apply adequate amount of soap necessary to cover all surfaces.
- Use clean, running water whenever possible. Avoid using hot water, as repeated exposure to it may increase the risk of dermatitis.
- Rinse hands with water and dry thoroughly with a single-use towel.
- Use a towel to turn off tap/faucet. Dry hands thoroughly using a method that does not re-contaminate hands.
- Make sure towels are not used multiple times or by multiple people.
- Liquid soap is better, it reduces the exchange of germs between users and is easy to use and refill.
- Hand rub containing Ethyl alcohol 70% + Chlorhexidine gluconate 0.5% w/v should be used.
- Hand rub is not a substitute for hand-wash. When the hands are visibly soiled hand-washing is must.

Procedure for Hand Rubbing:

- To effectively reduce the growth of germs on hands, hand rubbing must be performed. The process takes only 20–30 seconds! Apply a handful of alcohol-based hand rub and cover all surfaces of hand. Rub hands until dry.
- Precautions before surgical hand preparation using alcohol-based hand rubs.
- Ensure that the hands are visibly clean before applying alcohol hand rubs.
- Ensure that the hands are well dried before application of alcohol hand rubs.
- Use hand rubs after removing gloves, when the operation is over OR wash with soap and water in case of glove puncture or if any residual talc or biological fluids are present.
- The concept of hand-washing to prevent infection was discovered way before Robert Koch discovered that bacteria were the cause of diseases like tuberculosis, diphtheria etc. It was observation and logical analysis alone, that made Semmelweis see the association of infection and “dirty hands”.

LETS MAKE IT A HABIT

Germ: “I hate water”

Hand hygiene is a small yet all important act that contributes to the well-being of our community. By making it a routine part of our daily lives, we become guardians of health, fostering a safer and healthier environment for everyone. Remember, clean hands are a small effort for a big impact.

Radio-diagnosis

Our Vital Diagnostic "*NOT* such a Black and White" Team

Sanjay Bane, Tahseen Khan, Rahat Sayed, Shibukutten K.P.

Our radiology department boasts of having state of the art machinery like X-ray, USG, Mammography and PET/CT Departments. Whilst the HOD is Dr.Asif Momin, he is ably assisted by Dr Aditi, and 4 very specialized and experienced technicians who work at different areas and stations of radiology.

Tahseen Khan
(Mammography Technician) with over 10 years of experience in the field and specializing in mammographic techniques and her attentive and observant attitude is an invaluable asset in the Mammography department. She has completed her training from the prestigious Sir J. J. Hospital.

Rahat Sayed
(Sonography Technician), demonstrates commendable skill and attentiveness. Her effective communication skills and work energy ensures the smooth functioning of the department. She has received various awards and accolades in multiple medical conferences.

Sanjay Bane
(X-ray Technician), with over 30 years of experience, skillfully manages the X-ray department, working collaboratively with the team to ensure excellent quality care for the patients. He is alert and shows a very keen interest in learning newer modalities.

Shibukutten K.P.
(PET/CT Technician) with his extensive experience of over 20 years in MDCT and comprehensive skills, contributes significantly to the efficient functioning of the PET/CT department. With his extensive experience in MDCT, he is now venturing into the realm of advanced PET/CT.

Radiation Oncology Department

Ms. Nasira Ghole
Radiation Safety Officer

Aakash, Kishor, Payal, Nasira, Virendra, Krishna

RADIATION ONCOLOGY

The Radiation Oncology Department plays a pivotal role in the multidisciplinary approach to cancer treatment, employing advanced techniques to deliver targeted radiation therapy with precision and efficacy. Our department is dedicated to the management of cancer through the use of ionizing radiation, utilizing technologies such as linear accelerators.

MEET OUR TEAM

The continuous integration of research and technological advancements allows us to improve outcomes and enhance the quality of life for patients receiving radiation therapy as part of their cancer journey.
We are pleased to share that we have started functioning in December 2023, having received all regulatory approvals. We had successfully planned 100 patients presently 57 are on couch.
None of this would be possible without support from the management and the efforts of our entire team.

Radiation oncologists
Dr. Sharmila Agarwal (HOD) & Dr. Prashant (Consultant)

Medical physicists
Nasira Ghole (Radiation Safety Officer), Kishor Bhosale

Radiation Therapists
Eshwar Kotilingala, Mr. Akash Nag, Virendra Bhelawe, Jyoti Sawant, Payal Lokhande, Krishna Pramod

Nursing Staff
Shabana Shahnawaz, Meenakshi Gonbare

Reception Staff
Smita Jalgaonkar, Reshma Nandgaonkar, Siddhesh Kupekar

Breast Cancer Advances

Enhancing Aesthetics and Quality of Life

Dr. Vani Parmar
Chief Breast Surgical Oncology

EARLY DETECTION

Surgery for breast cancer does not always necessitate a mutilating mastectomy resulting in a negative impact on body image and self-esteem.
With early detection and advancements in Oncoplastic surgery, patients have more options that not only ensure oncological safety of 'Breast Conservation Surgery' (BCS), but also include aesthetic outcomes and overall well-being.
BCS has therefore emerged as the standard of care globally when breast cancer is detected early.

However, certain factors, such as a high tumor-to-breast volume ratio in small-breasted women or multifocal disease leading to larger excisions and significant volume loss, can make BCS less suitable or challenging from a cosmetic perspective. Additionally, large pendulous breasts pose radiation therapy challenges and may require high radiation doses, making breast conservation difficult.

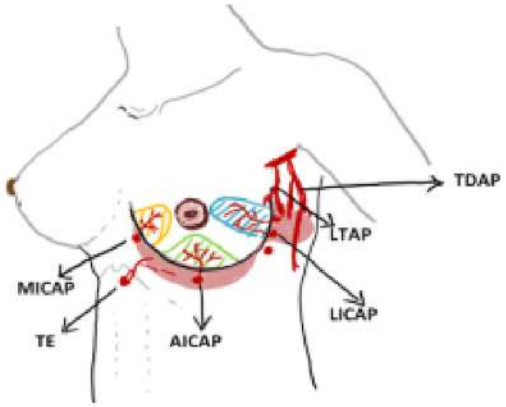
FLAPS

The evolution of oncoplastic surgery has paved the way for addressing these challenges, expanding the scope of breast conservation. It ranges from simple oncoplastic procedures that utilize breast glandular "flaps" to reshape the breast aesthetically and improve cosmetic outcomes, to advanced techniques involving the use of the skin and fat adjacent to the affected breast, based on perforator artery flaps, like the Lateral intercostal artery (LICAP), Anterior intercostal artery (AICAP), Medial intercostal artery (MICAP), Thoraco-epigastric (TE), Lateral Thoracic (LTAP), Thoracodorsal (TDAP), and Grid matrix flaps. Pedicled myocutaneous flaps, such as the Latissimus dorsi flap or TRAM flap, enable larger volume replacements. The choice of flap is based on the patient habitus, proximity of the perforator-based flap to the breast defect, and of course the volume of breast defects to be corrected.

In women with large pendulous and ptotic breasts diagnosed with breast cancer, the principles of reduction mammoplasty can be applied to reduce the breast size, both on affected and unaffected side, concurrent with the breast tumor removal, enhancing the patient's overall quality of life and body image while ensuring oncological safety during tumor excision.

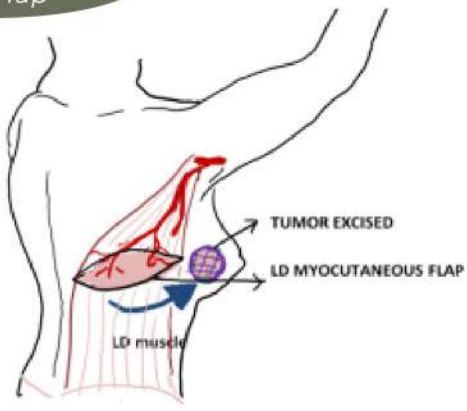
Where preserving the entire breast is not possible, but the skin, nipple, and areola are healthy, a skin-saving or nipple-areola-saving mastectomy, coupled with an extended Latissimus dorsi flap (LD flap) alone or LD flap with a silicone breast implant, offers improved cosmesis and volume replacement.

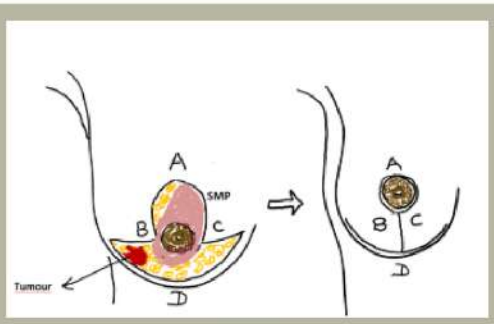
For those women requiring mastectomy, breast reconstruction using free microvascular flaps provide additional options with larger tissue availability but demand meticulous surgical skill and are labour intensive. Flaps may be derived from various parts of the body such as abdomen (DIEP flap), thigh (ALT flap), buttock (SGAP), or Gracilis muscle flap. Successful microvascular anastomosis, performed by a skilled reconstructive surgeon, is crucial, and the duration of surgery may extend to 6-8 hours.



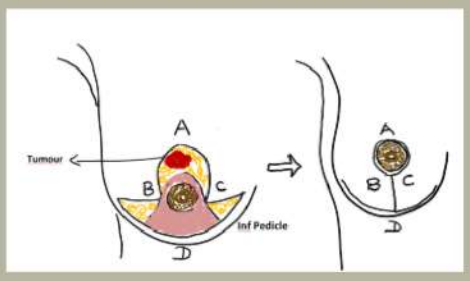
Perforotor Flaps

Pedicled Flap -LD Flap





Reduction Mammoplasty - Superomedial Pedicle



Reduction mammoplasty - Inferior Pedicle

The wide range of aesthetic correction options following breast cancer surgery has revolutionized the approach to and surgical management of breast cancer compared to the past.
As younger surgeons continually update their skills to keep pace with these advancements, medical oncologists play a pivotal role in the neo-adjuvant setting making it feasible to offer straightforward breast and axillary conservation, in select cases through downsizing tumors with neo-adjuvant systemic chemotherapy or hormone therapy.