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Sri Aurobindo Medical College & P.G. Institute





CONGRATULATIONS!

*We congratulate Dr Manjushree Bhandari for her appointment as chancellor,
Sri Aurobindo University*

SAIMS family



Dr. Manjushree Bhandari

From the Chancellor's Desk

'My dream comes true'

I always dreamt of multidimensional expansion of medical education. With the Sri Aurobindo University, we are fortunate enough that by the grace of GOD our dream come true. Sri Aurobindo University is a milestone in our never-ending quest for excellence in providing reliable and affordable health care to society. We are also dedicated to upholding the highest standards of academic excellence and focusing on empowering our society with competent, dexterous and responsible health professionals. It is a great honor and immense pleasure to have an opportunity to lead Sri Aurobindo University.

Our ultimate goal at Sri Aurobindo University is to provide 'Holistic approach for complete health'. Our dream is to provide complete health

to each & every patient coming to us, either by allopathic system or by alternative systems of medicine. In our viewpoint, holistic care entails more than just integrating Eastern and Western medicine. It's a more comprehensive and personalized way of thinking about wellness. Therefore, it is my personal dream to explore power of subconscious mind of an individual, who is sufferer. We want to transform patient into healthy person that means liability into asset for the family, society and the nation.

In order to promote physical, emotional, spiritual, and social well-being, we are starting world-class alternative eastern medicine systems in addition to allopathic medicine. We will develop high standard teaching, training and research in all facets of AYUSH, including Ayurveda, Acupressure, Yoga and Naturopathy, Unani, Siddha and Homeopathy.

We are also committed to develop super speciality nursing training under this banner, such as ICU, Cardiac Surgery, Neurosurgery, Caesareans and many more. Sri Aurobindo University is also developing similar diploma and certificate programmes to provide our students with better job opportunities.

Along with medical education, we intend to establish a Centre for excellence in the field of other higher educational branches such as law, journalism, engineering, management and so on in the near future.

I wish our University every success in the coming years. All of our new initiative would be impossible to achieve without cooperation & whole hearted support of our dedicated teams.

Thank you

With best wishes,
Dr. Manjushree Bhandari
 Chancellor,
 Sri Aurobindo University, Indore

From the Vice Chancellor's Desk



MY VISION OF SRI AUROBINDO UNIVERSITY

My vision of SAU is driven by my thirst for excellence in the assignments that I take up as challenge and the immense confidence that I have gained through my achievements over the past 35 years. I envisage a new revolution in the field of education at SAU through implementation of recently announced education policy. I strongly believe that this will contribute to India's vision to become a world leader in the field of science and technology. This university should cultivate an active, technology-enhanced, learning environment where each individual can grow and thrive.

My vision is that Sri Aurobindo University is marked by aspiring candidates in the country as one of the most favored universities to begin teaching and research careers or their student lives. SAU should be widely recognized as a destination for world-class talent from around the globe and to cultivate a transformative university community committed to (a) attracting and retaining diverse, world-class talent; (b) creating a collaborative environment open to the free exchange of ideas, where research, creativity, innovation, and entrepreneurship can flourish; and (c) ensuring individuals can achieve their full potential. I wish SAU to impact society in a transformative way — regionally, nationally, and globally — by engaging with partners outside the traditional borders of the university campus.

Basic principles which should guide SAU should be our research, education characterised by a quest for high quality; our standpoints and decisions based on a clear responsibility for the development of society; our work guided by a global engagement that constantly reminds us of our role in the world; and an inspiring work environment.

We intend to propel SAU upwards in ranking at national and international level through an outstanding student placement record, international standard of higher education and research publications, and creation of state of the art facilities on the campus (such as e-learning facilities, e-library, sophisticated laboratories, sponsored research and industrial consultancy, modernization of hostels and sports facilities, create entrepreneurship park etc). The campus community should pursue strategic partnerships and focuses on solving societal challenges. This university will create a transformative educational experience for students focused on deep disciplinary knowledge; problem solving; leadership, communication, and interpersonal skills; and personal health and well-being.

SAU intends to be a Quality driven university is characterised by innovative multidisciplinary research based on strong individual disciplines. All education is research based; as part of their studies, our students are put in contact with active researchers and highly advanced research. The quality of our research and education is strengthened through close contacts with the world around us. SAU will create stimulating and dynamic work environment where respect for everybody's equal value is completely natural. The University intend to be an attractive employer and the study environment will provide optimal work conditions for students.

My vision is to promote sponsored research and industrial consultancy, alumni participation etc for development of various facilities on the campus, establish national awards in various disciplines and provide support to students from weaker section of society. In the coming years, the research at the SAU should be characterised by global perspectives and should attract leading researchers from around the world. All programmes should offer international outlooks and student exchange opportunities. Attractive highly advanced programmes should attract students from all over the world. The University should be a prioritised cooperation partner in international initiatives.

Dr. Jyoti Bindal

Vice Chancellor, Sri Aurobindo University, Indore

An Inspiring Personality



Dr. Sukhwant Bose
Director Medical Education
of SAIMS

Dr. Sukhwant Bose, Director of Medical Education, SAIMS, has been instrumental in bringing the institute to this stage. She has been the member of SAIMS since 2005 and has also served as the Dean of our medical college. She is known for her innovative ideas, dynamism, workaholic attitude, and dedication to work.

She is committed and dedicated teacher of physiology and known among her thousands of students for providing individualized attention & creating and distributing educational content. She is also renowned for her love and care as well as her ability to facilitate learning.

She was influential in introducing the white coat ceremony and cadaveric oath in the history Medical Education of Madhya Pradesh. She is also the convener of the regional Medical Education training centre, which has been serving the states of Madhya Pradesh and Bihar for many years.

Registrar Speaks.....



Dr. Anand Misra
Registrar, Sri Aurobindo University

Sri Aurobindo university is the latest feather in the crown of Sri Aurobindo Institute of Medical Sciences, it is the dream that we have been nurturing since last so many years and have been starving hard to achieve this milestone. Thanks to the relentless efforts of our founder Chairman Dr. Vinod Bhandari, Chancellor Dr. Manjushree Bhandari and their dynamic team, that this dream could be converted in reality. Now all the institutions founded by SAIMS shall grow under the umbrella of this university and achieve global heights. We are also committed to introduce very innovative and job oriented programs and also to establish institutions of international status in the field of law, skill development, organ transplants etc. We shall leave no stone untouched to develop Sri Aurobindo university par excellence. I am extremely happy to know that now regular publication of SAIMS times has also commenced simultaneously and I am sure that as the flagship journal and periodical magazine of SAU, SAIMS times shall not only keep its readers updated of each and every academic and administrative activity of SAU but at the same time shall offer a feast of useful and excellent scientific information to its readers. I take opportunity to congratulate the editorial team of SAIMS Times and wish every success to this novel endeavor.

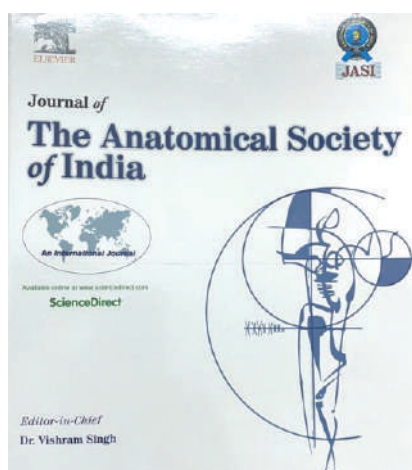
SAIMS role in controlling COVID-19 pandemic : A meeting with our Chief Minister



(C.M. taking video conference, Dr.Vinod Bhandari & Dr. Mahak Bhandari also seen)

India is currently witnessing the deadly second wave of COVID pandemic. The central and state governments are taking all the necessary steps. Madhya Pradesh Chief Minister Hon. Shri Shivraj Singh Chauhan is also making every effort to combat the spread of COVID-19. On April 5, 2021, the Chief minister had a meeting with authorities from various medical institutions in MP including the founder chairman of Sri Aurobindo Institute of Medical Sciences, Deans of Gwalior, Indore and Jabalpur Govt. Medical Colleges, Doctors of LN Medical College and People's Medical College. As an invitee to this video conferencing meeting, to discuss how to curb the spread of COVID-19, our founder chairman, Dr Vinod Bhandari, has made the following suggestions, as asked by the Hon. Chief Minister :

1. Increase the number of ICU beds in all government and private medical colleges in Madhya Pradesh.
2. Ayushman card holders should get treatment free of charge.
3. GST should be exempted on Injection Remdesivir and other drugs required for COVID-19 serious patients so that patient can afford them.
4. Day care treatment for patients with mild symptoms and having less than 10% lung involvement, low CT severity Score and normal markers.
5. Cheaper investigation facility for all.



Kudos to Dr S.D. Joshi

Dr S.D. Joshi, Director Professor of Anatomy, SAIMS was awarded best publication gold medal for the research paper published in the journal of Anatomical Society of India on Gross Anatomy (including Osteology and Physical Anthropology). The medal to be awarded during the National Conference of Anatomical Society of India



Let food be thy medicine and medicine be thy food.— Hippocrates

BARIATRIC SURGERY FOR THE GLOBAL



Obesity is increasing in epidemic proportions across the world. Bariatric Surgery also commonly known as Weight Loss Surgery in India is done for patients who are obese and suffering from co-morbidities like Type 2 Diabetes, Hypertension, Sleep Apnea etc. Bariatric Surgery is considered to be most sort for procedure for Weight loss and remission from associated co-morbidities.

Mohak Bariatrics and Robotics Surgery Centre is a world-renowned center dedicated to obesity, and diabetes surgery. It is situated in central part of India, Indore. It is the highest volume center globally with most well-equipped, par excellence Bariatric facilities. The center is led by Dr Mohit Bhandari who is the Founder, Director and Chief Surgeon of Mohak Bariatric and Robotics. He is credited with performing more than 15,000 bariatric surgeries in India and seventy other countries such as Germany, Belgium, China, Australia. Mohak Bariatrics and Robotics is not confined to just Indore or India. We have patients from across the globe. Mohak Bariatrics & Robotics, Indore has been a go-to center for the people of not just Kenya but most of East Africa. We have been treating patients with morbid obesity and associated diseases from the past several years with more than 200 happy and satisfied patients of different Ethnicity. We also have our huge patient base from United Emirates and few patients also from UK and USA.



Message from Editorial Board

Dear Colleagues,

Thank you for your cooperation and support to SAIMS Times. Please send your activities before last working day of the month. Please note that the word limit for the case reports will be maximum 300 words and that the word limit for submissions related to faculty and students sections will be maximum 200 words. In this way, we will be able to include as many eligible entries as possible.

Kindly extend and continue the same zeal for next issue, so that members of SAIMS family as well as members of Indian medical association will know the special events, academic activities and extraordinary work going on in our beloved institute.

Editorial board

SAIMS Times

A good physician treats the disease, the great physician treats the patient who has the disease. – William Osler

Artificial Intelligence in the field of Medical Sciences :



Dr. Jaishree Tapadia

The evolution of technology has brought a paradigm shift in a spectrum of fields including medical sciences, the role of technology in medical sciences has transformed from assistance in surgical procedures to AI enabled patient-oriented care. The innovative utilization of AI in the recent times could be discerned from the contact tracing mechanism employed by the government during the period of a global pandemic with AI based application programming interface that can be used on smartphones. The AI demonstrates a promising future in the field of medical sciences but there exists a lot of misconception as to the future of AI in the field.

The application of AI based systems in the field of medical sciences can be broadly classified into three fields; (1) Patient-oriented AI, (2) Clinician-oriented AI, and (3) Administrative and Operational-oriented AI. Although the first two categories pose for promising changes in the field, Administrative and Operational oriented AI has the potential of bringing about radical changes in the field of medical sciences. In any AI based systems, data plays a key role in effective implementation of that system and the same is true in the field of medical sciences as well. The larger usage of such data could be made in the field of Administrative oriented AI system.

The accurate and unmitigated data collection, is a very important step in the process of creating an effective AI system. The large amount of high-quality data plays a pivotal role in the better performance of an AI system, there is also a need to create an unbiased model to process the data entered and adopt an algorithm that is best suited to handle the task at hand.

AI systems will play an important role in freeing up the time for doctors by transcribing notes, entering and organizing patient data into portals (such as EPIC) and diagnosing patients, potentially serving as a means for providing a second opinion for physicians. Artificial Intelligent systems can also help patients with follow-up care and availability of prescription drug alternatives. AI also has the capability of remotely diagnosing patients, thus extending medical services to remote areas, beyond the major urban centers of the world.

Making it more administrative centric, the AI applications that can be introduced in hospitals are those related to Diagnostics and Medical Operations Software but AI cannot replace the physicians even in the long run but there is growing scope for use of AI in administrative procedures. The three ways in which AI here used is through aiding in Drug Discovery and Development, Managing appointments and also Maintaining the patient population. The possibility of this can be by introducing AI-based automated software for which there should be acceptance and compliance mechanism. This has its way and we are aiming to come to it really soon. Infact, we have taken steps towards it. Aurobindo will be the first in MP to start certification courses & fellowship program for doctors & others courses.

We are starting primary teaching to our medical, dental, nursing & paramedical technical staff to orient with this new technology of Artificial Intelligence. On clinician and patient oriented side, Aurobindo is one of the premium institution that has started Robotics in Bariatric Surgery since years.

Dr. Jaishree Tapadia

Professor & Head

Dept. of Human Physiology,

Convener, Curricular-Sub-Committee (Phase-I)

SAMC & PGI, Indore (M.P.)

Institutional Advances

Cochlear Implant for Person with Hearing Loss

A cochlear implant is one of the modes of implantable treatment option which enables to cope with hearing impairment among individuals with moderately severe to profound hearing loss who receive limited benefit from hearing aids. Since 2013, cochlear implant program has been successfully running under Otolaryngology and Speech & hearing department collaboratively at Sri Aurobindo Institute of Medical Sciences (SAIMS), Indore.

It was only possible with foresee vision, support and guidance by Dr Vinod Bhandari, Founder Chairman, Indore. A well co-ordinated team work is headed by Cochlear implant surgeons namely Dr. Vishal Ratan Munjal (HOD of ENT) and Dr. Digant Patni (Associate Professor) in association with Mr. Nirnay Kumar Keshree (HOD, Speech and Hearing). SAIMS is the first approved centre for cochlear implant program in the whole state of Madhya Pradesh. This centre has received approval from various state and central government schemes in order to run cochlear implant project. Under RBSK, MBSY, ADIP, ESIC and Self funded schemes there are 409, 49, 23, 03 & 24 no. of implantees respectively till the date.



This is the only centre where all the pre and post medical as well as audiological cochlear implant facilities are available under one roof in the city of Indore. Some of the evaluations to name are CT/MRI, IQ testing, pure tone audiometry, otoacoustic Emissions, immittance audiometry, auditory brainstem Response (ABR), Speech and language

evaluation etc. SAIMS is striving continuously hard to accomplish one of its goal of providing qualitative hearing services at utmost convenience to all the implanted/ to be implanted cochlear recipients.



जिले में पहली बार एक साथ 14 बच्चों में होगा कॉकलियर इंप्लांट

अब सुन और बोल सकेंगे 14 दिव्यांग



पत्रिका साहित्य स्टोरी

ये है कॉकलियर इंप्लांट

प्रकाश अर्जुन सिंह का कहना है कि वह एक दृष्टिहीन व्यक्ति हैं। उन्होंने बताया कि वे अपने बच्चे को सुनने और बोलने में मदद करने के लिए कॉकलियर इंप्लांट का उपयोग कर रहे हैं। उन्होंने बताया कि वे अपने बच्चे को सुनने और बोलने में मदद करने के लिए कॉकलियर इंप्लांट का उपयोग कर रहे हैं। उन्होंने बताया कि वे अपने बच्चे को सुनने और बोलने में मदद करने के लिए कॉकलियर इंप्लांट का उपयोग कर रहे हैं।

Extension and outreach rehabilitative services were initiated by SAIMS at Mandala district, Madhya Pradesh for those children who could not travel due to long distance and receive post implant services. These children are provided with regular mapping, troubleshooting of cochlear implant and speech & language therapy for effective outcome from their implanted device. The complete speech and hearing assessment and rehabilitation services are also delivered at outreach centre district hospital, Indore.



रंगों की पहचान कर मनाया होली सेलीब्रेशन

जिला शोध पहचान एवं हस्तक्षेप केन्द्र में थैरेपी के साथ कराई गतिविधियाँ

बच्चों के लिए जिला शोध पहचान एवं हस्तक्षेप केन्द्र में थैरेपी के साथ कराई गतिविधियाँ। बच्चों को रंगों की पहचान कर मनाया होली सेलीब्रेशन। बच्चों को रंगों की पहचान कर मनाया होली सेलीब्रेशन। बच्चों को रंगों की पहचान कर मनाया होली सेलीब्रेशन।

श्री प्रेम नारायण शर्मा जी का अभिनंदन

सरल, सौम्य, कर्तव्यनिष्ठ, संकल्प के धनी और कर्मठता के पर्याय की श्री प्रेमनारायण जी शर्मा का जन्म 1937 में हुआ था। आप जब 2003 में उपजिलाधीश पद से सेवानिवृत्त हुए तभी से भण्डारी समूह से जुड़े और भण्डारी परिवार से आत्मीयता का ही सहज परिणाम है कि वे अपनी समर्पित सेवाएं आज पर्यन्त निरन्तर प्रदान कर रहे हैं। उनकी कर्तव्यनिष्ठा, समर्पण भाव और अनथक सेवाओं का भण्डारी समूह हार्दिक अभिनन्दन करता है और उनका तदर्थ हृदय से आभारी है।



Declare the past, diagnose the present, foretell the future.— Hippocrates

Workshops Conducted

Workshop on Basic Implantology

Department of Periodontology, Sri Aurobindo College of Dentistry, Indore conducted a workshop on “Basic Implantology” in collaboration with International Team for Implantologists, (ITI), on 9th march 2021.

The organizing team comprising of Dr. Kanteshwari I. K, Principal, Professor and Head of Department, Dr. S.V. Dhodapkar, Professor, Dr. Gagan Jaiswal, Professor, Dr. Rajesh Kumar, Professor and Course Coordinator and Dr. Heena Agrawal, Sr Lecturer, conducted the workshop with great efficiency.

Guest speakers for the event were Dr. Nikhil Deshpande, ITI Convener of India Section and Dr. Priyam Mishra. A total of 55 delegates attended the workshop. The workshop was sponsored by Straumann Dental India. The program commenced with the Inaugural Ceremony. The chief guest for the program was honorable Chancellor Dr. Manjushree Bhandari.

The Inaugural Ceremony was followed by extremely educational lectures on incisions, flaps, suture techniques and implant placement by Dr. Priyam Mishra and Dr. Nikhil Deshpande respectively. This was followed by hands-on implant placement demonstration. All the delegates placed the implant in the models thereafter under the supervision of guest faculty, who mentored with personal concern.

6 CDE points were accredited to this program by MPSDC vide their letter reference no. MPSDC/21/248 dated 03/03/21. All the delegates were highly appreciative of the workshop. The delegates feedback reflects the need for more of such programs to be organized.



Thesis Protocol Writing & Basic Research Methodology

Department of Community Medicine in Collaboration with Institute of applied Statistics & NIMS – ICMR conducted a Workshop for First Year Postgraduate on Thesis Protocol Writing and Basic Research Methodology on 13th and 14th March 2021.

The Speakers for the workshop were Dr. Shubham Pandey (National Coordinator for the workshop by IAS-ICMR), Dr. Dhruvendra Pandey and Dr. Neeraj Kumar Agrawal (State Coordinators for the Workshop by IAS –ICMR). The Sessions were chaired by Dr. R. R. Wavare and Dr. Ajit Deshpande. The Workshop was organized by Dr. Harshal Gupta.



ACTIVITIES

World Oral Health Day celebration "Be proud of Your Mouth"

The World Oral health day was celebrated on 20th March by the Department of Public Health Dentistry like every year. This year we celebrated the day with a theme of "Be proud of Your Mouth". Our primary objective was to spread the message of good oral health & raising awareness among patients about the importance of sterilization, sanitization and making them ensured that getting dental treatments is safe in this COVID-19 Pandemic era. It was a great honour to have respected Dr. Vinod Bhandari, founder Chairman, Sri Aurobindo College of Medical Sciences; Dr Anand Misra, Registrar, Sri Aurobindo University; and Dr Kanteshwari IK, Dean, college of dentistry with us.

The program began with the welcome speech from the HOD, Dr Sandesh N followed by inspirational words on the importance of Oral Health by program chief guest Dr Vinod Bhandari and Dr Kanteshwari IK. The event was coordinated by Dr Dhaman Gupta and Dr Richa Shrivastava. It was followed by cake cutting ceremony by our chief guest.

With the immense efforts of our faculty, post graduate students, Interns, and final year students, we celebrated this day by organising various activities for faculty members and dental students. This activities included two competitions, 'Best Smile' and 'Advertisement competition' which were organized by Dr Shantanu Sontakke and Dr Athira Prakash. The Celebration was followed by Street play prepared by our final year students that highlighted dental treatments in COVID- 19 Pandemic. The highlight of the program was video messages shared by our esteemed heads of the various departments and other faculties about this day. Furthermore, Dr Prashant Mishra, Professor, aired on 94.3 My FM to discuss and raise awareness of oral health on this day. The program concluded with the prize distribution to the winners.



Women's Day Celebration

International Women's day is all about feeling self-worth and achieving the Goals as per the potentials, with the same hope for the first time in the History of SAIMS, "8th March International women's day" was celebrated by Shri Aurobindo Institute of Allied Health & Paramedical Sciences.

The event was honored by the presence of founder chairman Dr. V. Bhandari, Chancellor Dr. Manjushree Bhandari and graced by DME Dr. S. Bose, Dr. Kanteshwari Principal Dental College, Dr. Chintamani Principal School of Nursing. After lamp lightening guest and all female HOD's were welcomed by Dr. Shekhar Modak Director Allied Health & Paramedical Sciences and Dr. Anand Misra Registrar SAU. Compering was Done by Dr. Priyanka Tiwari & Dr. Deepti Garg.

The celebration was all about women empowerment from a housewife who raises here children and heads her household to a serving to society, well explained by Dr. Mrs. S. Bose, who have the power to inspire & motivate by her catching Words. We were fortunate with the words of Dr. Manjushree Bhandari who very well defined the theme of this years International women's day "Choose to challenge" & maintained remarkable poise in the face of a potentially hostile audience by saying that a women gets strength from troubles, smiles when distressed and grows even stronger with prayers and hope.

The event was enthralled by the Words of Dr. Kanteshwari, Dr. Chintamani & Dr. Gunjan Kela, who talked about to uphold women's right and fully leverage to the potential and highlighted the issues and problems they are still facing in their respective lives. Dr. Anand Misra, appreciated role of women in society and capacity to create change all around. He expressed gratitude towards women who is symbol of power, support, energy and emotions, who wraps herself with confidence and work Hard. Dr. Priyanka Tiwari gave a terrific & fascinating presentation about journey of a women & factors affecting Health.

The celebration was concluded with beginning of "Female Health Awareness Camp for SAIMS women" & "Inter College Poster Competition". Moreover, the celebration was a sign of appreciation, respect, love & Care towards women in our lives & society and to honor women who are making success in their lives and bring success in the life of other women those around her. The camp had clear motto to inform and empower women to take responsibility for their own health, to understand their Health options and to give them best physiotherapy services which will help them prevent and reduce poor health.



On the occasion of International women's day, nursing students : Anshul Bhadoriya, Asmita Gupta, Kashmeera Mahajan, Pragati Shimpi (Batch 2017-18), Kajal Keshari, Meghna Jain, Priyanka Gova, Yashika Karnawat, Ankita Bhawasar, Krati Jain, and Bhumi Jain made beautiful rangoli. This rangoli represented the theme for this year's women's day; Women in Leadership: Achieving an Equal Future in a COVID-19 World'.

According to a proposed plan SAIMS College of Nursing organized poster making competition, which was held on Friday 5th March 2021 at the Nursing College Library. The theme was “Highlight specifics of Nursing College”.

- 1.Infrastructure
- 2.Affiliations & achievements of Nursing College
- 3.Job placements of passed out students

A total of 20 students participated in the competition. The students expressed their views & ideas based on the theme. One could see and feel the enthusiasm students had in their presentations. This activity kept the students engaged and it was organized to explore and encourage creativity in students and offer them a platform to showcase their skills.

It inspired them to think and work creatively in order to promote artistic excellence. The efforts and initiative of students was appreciated by one and all.



Occupational Therapy



Our team of occupational therapist's treat many patient's with buccal mucosa cancer in oncology department. We are giving them oral placement therapy and oromotor activities. For the ease of activity and for getting better results, a device made named Jaw Opener and Closer by team of occupational therapist Laxmi Yadav, Shruti Sharma, Neha Patel, Shivani Patel, Sapna Patel, Rishika Bajpai, Ajit Singh Rajput under the guidance of Dr. Subhash Garg.

We are very keen to do better every time and always looking forward to restore function and renewing life.

* Dr Kavitarati Dharwadkar joined on March 2nd, 2021 as Professor and Head in the Department of Biochemistry. Previously, she was working as Prof and Head, as well as Coordinator of Medical Education Unit at People's College of Medical College and Research Centre, Bhopal, MP.

* Dr Jyothi Tilak joined on 13 Feb 2021 as Assistant Professor, Department of Biochemistry. Previously, she has worked for 3 years in Lady Hardinge Medical College after obtaining MD. After that, she served at geographically difficult area of Andaman and Nicobar Islands for 1 year and 6 months.

* Dr Rajdeep Singh Bagga MBBS,MS, DNB, FASSI, joined the Department of Orthopaedics as Spine surgeon. He will be available in the OPD on every Wednesday and Friday from 9 am to 2 pm.

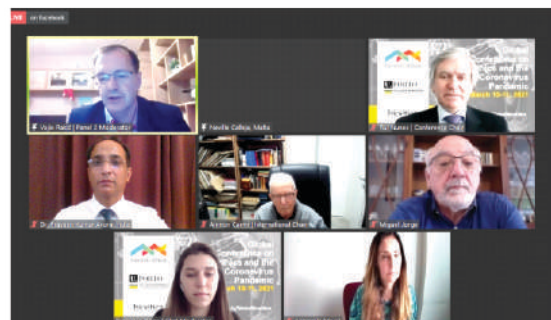
Faculty Conference Presentations

- * Dr. Manoj Kela, Prof & HOD Surgery presented guest lecture on “PET CT -USES & ABUSES” on 25th March in the Surgeons state conference-“e MPASICON” organised by Gwalior Surgeons. The lecture was greatly appreciated.
- * Dr. Dilip Kumar Acharya, Prof. Surgery, conducted “PG Surgery QUIZ” (1 ½ hrs.) as quizmaster during Surgeons state conference -“e MPASICON” organised by Gwalior Surgeons on 25th March. Surgery post graduates from 10 medical colleges of MP participated. The quiz was very interesting and contained questions from various aspects of surgery.
- * Mini IOACON was held from 5th to 7th March 2021 at Jaipur. Prof. Dr. Pradeep Choudhari, HOD, Department of Orthopaedics, SAIMS presented a paper on “Fracture Dislocation of talus” and was also chairperson in various sessions.
- * Prof. Dr. Saket Jati presented a paper on “ Proximal Humerus fractures: Keys to success”.



Invited lectures

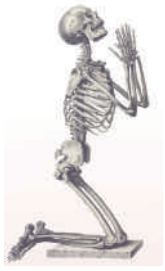
- Dr. Praveen Arora, Professor and Head, Department of Forensic Medicine and Toxicology, was invited as a panelist for the panel discussion on 'Covid-19 and Human Rights' at 'Global Virtual Conference on Bioethics and the Coronavirus Pandemic' organized by UNESCO Chair in Bioethics, University of Haifa, Israel and University of Porto, Portugal on 10th and 11th March 2021. He presented his views on the alleged violation of Human Rights during Covid-19 pandemic due to various restrictive actions enforced by the Governments across the globe, along with other eminent bioethicists from around the world.



- Dr Rakhi Sivakumar Associate Professor Department of Physiotherapy was invited as a Chairperson and shared her valuable insights at 7th International Conference on “Emergence, diagnosis, treatment & impact of Covid-19 - A global health perspective” held on 5th & 6th March 2021 organised by Career college, Bhopal.

- The 22nd Joint State online Conference of Indian Association of Preventive and Social Medicine (IAPSM) and Indian Public Health Association (IPHA) Maharashtra was organized by the Department of Community Medicine, IIMSR Medical College, Badnapur, Dist. Jalna, Maharashtra, on 3rd & 4th April 2021. Dr. R R Wavare, Dean and Professor, SAIMS was invited as an Orator for "Padma Shri Dr. D. N. Pai Memorial Oration", dated 3rd April 2021. Dr. R R Wavare successfully delivered Oration on the topic "Changes in MBBS Curriculum by NMC- Challenges and Opportunities in Community Medicine".





Thus spoke the cadaver

Handle me with little love and care
As I had missed it in my life affair
Was too poor for cremation or burial
That is why am lying in dissection hall

You dissect me, cut me, section me
But your learning anatomy should be precise
Worry not, you would not be taken to court
As I am happy to be with the bright lot

Couldn't dream of a fridge for cold water
Now my body parts are kept in refrigerator
Young students sit around me with friends
A few dissect, rest talk, about food, family and movies
How I enjoy the dissection periods
Don't you? Unless you are interrogated by a teacher
When my parts are buried post-dissection
Bones are taken out for the skeleton

Skeleton is the crown glory of the museum
Now I am being looked up by great enthusiasm

If not as skeletons as loose bones
I am in their bags and in their hostel rooms
At times, I am on their beds as well
Oh, what a promotion to heaven from hell
I won't leave you, even if you pass anatomy
Would follow you in forensic medicine and pathology
Would be with you even in clinical teaching
Medicine line is one where dead teach the living

One humble request I'd make
Be sympathetic to persons with disease
Don't panic, you'll have enough money
And I bet, you'd be singularly happy

Courtesy: Dr. Krishna Garg, BD Chaurasia's Human Anatomy,
8/e (Volumes 1-4), CBS Publishers and Distributors, 2021.

"Acid Attack and Women Bravery"

FACULTY SECTION

एक कहानी जो मुझको अब है सुनानी,
लगता है लोग भूल गए हैं,
हर उस "लक्ष्मी" की कहानी,
जो आज फिर मुझको है दोहरानी।
मेरा एक सवाल है ??
क्यों अमल बिक रहा खुले आम है ?
क्या इस की बेधड़क बिक्री से झुका नारी का स्वाभिमान है ?
क्या व्यापारियों के लिए यह महज़ व्यापार का सामान है ?
इसको बेचने का आखिर कब किसने दिया प्रमाण है !
चंद बूंदें तेजाब की उसको गलीज़ नहीं बनाएंगी !
एक छोटी सी शीशी उसके चेहरे की खूबसूरती नहीं मिटा पाएंगी !
यह कोई श्रृंगार का सामान नहीं है
यह नारी है इसके ज़बे को यह सब नहीं झुका पाएंगी !
मां बेटी पत्नी बहू के किरदार को उसने बखूबी निभाया है !
तेरे फेंके अमल को ज़ेल जिंदगी का चक्र आगे भी चलाया है !
तोड़कर जंज़ीर और हटाकर पर्दे,
आखिर उसने हर पल खुद को साबित करके दिखाया है।
बस अब बंद करो खुले आम ये अमल का व्यापार,
चंद पैसों के लिए मत करो किसी के जीवन के साथ अत्याचार,
हर रोज़ नारी के स्वरूप का गला घोट जाता है,
कहता है ज़माना उसको देवी का रूप,
फिर क्यों इतनी बर्बरता से उस पर अमल उछाला जाता है..!

Dr. Chirag Shrivastava
BDS faculty in Conservative Dentistry and Endodontics

दरख्वास्त

कल मैंने इक गुनाह सरेआम कर दिया,
इक इंसान को जो मैंने इंसान कह दिया।
इक मरहूम का धर्म पूछ रहे थे लोग,
मैंने इंसानियत ही धर्म का नाम कर दिया।
क्या अजब सी हो गयी है फितरत हमारी,
खुद को इंसान मानने से ही इंकार कर दिया।
मुझको काफ़िर ही मान लो ए दोस्तो,
मैंने धर्म जात का चश्मा उतार कर दिया।
क्या मज़हब, क्या जात, इन खयालों पर ही,
हमने खुद को औरो से जुदा कर दिया।
तालीम का भी हम पर कुछ फर्क ना हुआ,
अंधेरो ने रोशनी को अंधकार कर दिया।
ए दोस्त संभल! तू वारिस है इस शमा का,
बुझ ना पाए तूफानों में, ये चराग जो लिया।
प्रवीण! कुछ चार वो मिलें जो कहें,
हमने बांटे हुआ को इक इंसान कर दिया।
मत बांटो इंसानों को बेहिसाब में,
आखिरी अब ये दरख्वास्त कर दिया।

Dr. Praveen Kumar Arora
Professor and Head,
Department of Forensic Medicine and Toxicology,



Dr Prachi Paliwal,
Department
of Biochemistry
(Oil Painting
on Canvas)

STUDENT SECTION

World Health Day: Building A Fairer, Healthier World

I have a vision;
A vision I saw back in my childhood.
Where the world is always spring;
Where the plant are always green and new wood.
Where the birds chirp all day long;
Where the animals feel merry of the world they belong.
Where the babies and the old's share the same laughter;
Where young dances to the beats of happy life lore.
I have a vision;
A vision I saw back in my childhood.
I have a vision;
A vision I saw back in my childhood.
Where no one coughs;
Where no one sneezes.
Where the air is purer than diamond;
Where no one wheezes.
Where no one has blurry vision;
Where "chashmish" is not a word used to tease.
Where I won't die;
Of eating a whole carton of cheese.
I have a vision;
A vision I saw back in my childhood.
I have a vision;
A vision I saw back in my childhood.
Where "Cancer" isn't a fear;
Where "Stress and Depression", no one has to bear.
Where cheeks are as red as rose;

Where limbs are ever ready for any yogic pose.
Where people die of happiness and not pain;
Where no one's pain becomes someone's professional gain.
I have a vision;
A vision I saw back in my childhood.
I have a vision;
A vision I saw back in my childhood.
Today I wear "The White Hood".
The white hood people respect;
and at times unfortunately fears.
Many a times people see;
healing and curing, as magic I perform.
But in my vision;
I don't have to cure,
For their are no diseases to endure.
I have taken an oath,
and have my sleeves curled;
to make this vision a reality.
And,
We all living and "building fairer healthier world".
For,
I have a vision;
A vision I saw back in my childhood.
By:

SEJAL GODHA
Intern
(2015-16)

World Oral Health Day

Wondering, 'What is World Oral health day? '
It is dedicated to your mouth, yes a whole day!
So, let us talk about this least talked upon topic and taboo today!
Will teach you easy to maintain oral hygiene, how & why the Dentist's way!
As Homo sapiens we are made up of soft & hard tissues!
We got to keep our organs in harmony to stay away from health issues,
Keep your mouth clean to stay away from tooth decay!
Also, it keeps our heart healthy & saves it from fray!
Basic step to keep your oral cavity healthy is to brush & floss twice a day!
I know its very cliché,
But it is the best way to clean what crap you eat away!
Sugary foods, junks & aerated drinks? Stay away!
Eat green & clean to keep oral cavity from being attacked,
Mouthwash rinses essential, to keep mouth being halitosis hi-jacked!
Must visit your Tooth Doctor every 6 months,
To save your mouth to turn into decomposed skunk!
Taking proper dental treatment is a responsible choice,
Home remedies always doesn't work!
Be smart & use it for your well-being,
Follow your Dentist's advice always stop being so mean!
World Oral health day signifies the importance of Oral hygiene impact on normal life actions,
So follow protocols be a good citizen!

Noble Mehra
BDS -FINAL YEAR 2015-16

We also appreciate Dr. Rupam Sarkar (MPT student, Cardiorespiratory), and BPT students including Ashwin Dubey, Sumit Kumar Pati, Devyani Moharil, and Shivam Ojha for their articles on World Health Day.

Education is not the filling of a pail, but the lighting of a fire. – William Butler Yates

Flash of IMA Activities



Covid-19 is taking all toll on to the Indore administration, Government and to the citizen of the city as second or third Covid-19 wave with all its dreaded virulence, is spreading to the citizen of Indore and thereby depleting us with not only diagnostic kits, hospital beds, oxygen supply but also letting us run out of our courage, enthusiasm and hope. The team of doctors is working day in and day out, beyond the boundaries and Indian medical association Indore branch is leaving no stone unturned to set a designated protocol for variety of management strategies regarding Quarantine /isolation/ bed availability availability of drugs/ online consultation/Vaccination and what not....

District administration is keeping Indian medical association with its office bearers abreast with decisions regarding lockdown, vaccination and drive to educate masking / sanitizing and social distancing. IMA is helping in establishing new vaccine centre to penetrate deeper in society.

It is now the duty of people at large to *discipline* ourselves in such a way that we don't go out without a purpose and make things so disciplined that we break the chain of transmission from one person to another. Bike riders, cyclists, car drivers, car passengers, bus passengers, magic van passengers have to understand that this pandemic is something very unique in transmission and causing high infection as well as mortality rate across the nation and it must be understood that the easiest way to curtail the transmission from one person to another is just masking and social distancing.

We, the community of doctors request all and sundry to please observe lockdown which can be termed as a *self imposed lockdown* so that you don't become a carrier of the virus or a patient suffering with this SARS COV 2, virus and transmitting it from one person to another.

Indian medical association Indore branch with its office bearers, is all committed to serve in all conditions and people can seek advices and call us to get rid of myth about covid-19 and be aware of the facts about this dreaded infection.

Please don't be panic and have faith in mother nature and respect the regulations laid down by the state and district administration.

Thanking you



Dr Satish Joshi
President



Dr Sadhna Sodani
Secretary



Dr Rakesh Jain
Editor

CASE REPORT 1

Isolated Tuberculosis of Talus : A Case Report

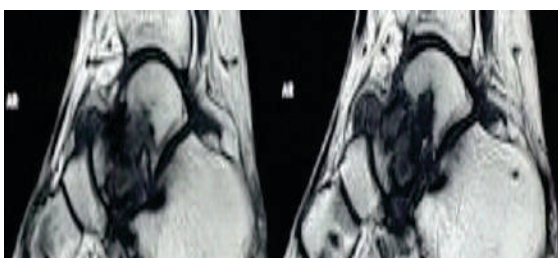
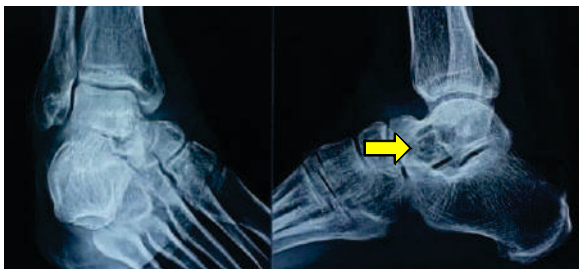
Author : Prof. Dr Pradeep Choudhari, HOD, Department of Orthopaedics

30-year-old male with 6-month history of swelling & pain in his right ankle joint. Fever, weakness, & loss of weight were absent but there was history of loss of appetite. Examination showed sealed sinus on anteromedial aspect of right ankle ROM restricted & painful. CBC & ESR- WNL. Mantoux test and X-ray chest were normal and sputum for AFB was negative. BCG vaccination done at birth. X-ray: Irregular lytic lesion of the talus was seen. MRI of the talus showed necrotic and lytic lesions over the posteromedial aspect.

Open bone curettage & debridement through a anteromedial approach was done. Below knee POP cast for 1 month along with 12 months of anti-tubercular chemotherapy. Patient had no pain while walking and was able to perform daily activities without restrictions at 1 year follow up.

Rarity of the lesion & atypical presentation makes tuberculosis of the talus a difficult diagnosis on clinical grounds prevent its misdiagnosis and delayed treatment. In patients with local involvement of the talus, bone curettage plus systemic chemotherapy are the treatments of choice.

ANTERO LATERAL APPROACH TO TALUS



Pre-operative

1 Year follow up

What sculpture is to a block of marble, education is to a human soul. – Joseph Addison

CASE REPORT 2

Pulmonary Hydatid Cyst with Co-existing Fungal Infection

Authors : Dr. Amit V. Varma, Dr. Shilpi Dosi, Dr. Avinash Raghuwanshi, Dr. Sushmita Tripathi

Department of Pathology

A 33 year male admitted to the Department of TB & Chest with chief complaint of breathlessness. Patient was already on anti-tubercular drugs. Provisional diagnosis was Non-resolving empyema. Patient was referred to the department of surgical oncology for decortication. Laboratory blood analysis revealed a hemoglobin level 11.6 gms% and TLC 8000/cumm. No evidence of eosinophilia on peripheral smear examination.

Chest X-ray was suggestive of Right sided Hydropneumothorax.

Chest CT-scan showed right sided Hydropneumothorax with partial collapse of underlying lung. Thickening and enhancement of pleura with membranous opacities suggestive of empyema with Sloughed membrane. Pleural fluid cytology was suggestive of acute inflammatory exudate.

Gross examination showed a well-defined white cyst wall along with multiple daughter cysts aggregate measuring 11x10x3 cm. (Figure 1)

Microscopy showed parasitic laminated cyst wall with germinal lining, brood capsules and hooklets. Focal area of parasitic cyst wall showed invasion by fungal hyphae. Surrounding tissue show inflammatory granulation tissue. (Figure 2)

PAS stain showed parasitic cyst wall with fungal colonies. (Figure 3)

Our final diagnosis was Hydatid cyst - Pleural cavity and secondary empyema with fungal infection.

Figure 1 : Gross-Parasitic cyst wall with daughter cysts.



(Gross A)



(Gross B)

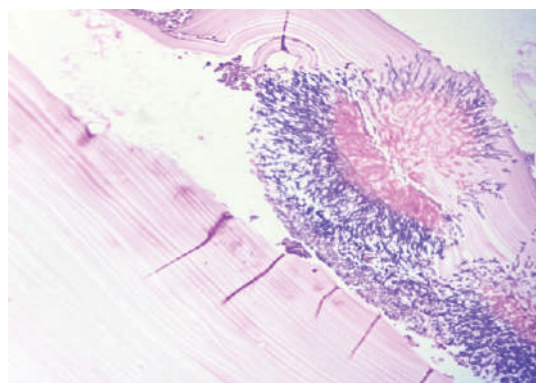


Figure 2 : Photomicrograph-Parasitic laminated cyst wall with fungal hyphae. (H & E 40X)

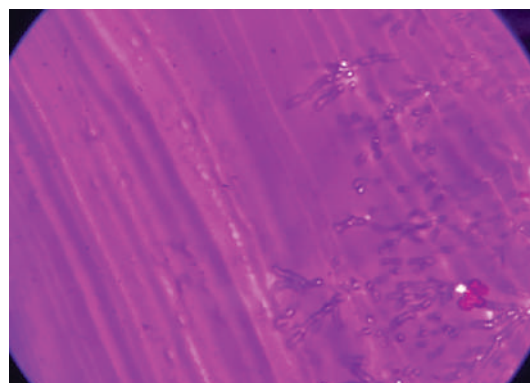


Figure 3 : Photomicrograph-Parasitic laminated cyst wall with fungal hyphae. (PAS stain 40X)

CASE REPORT 3

Uterine Lipoleiomyoma: A Rare Benign Tumor of the Uterus

Authors : Dr. Shazi Qureshi, Dr. Neeta karda

Uterine lipoleiomyoma is an unusual fatty uterine tumor. It is a benign variant of leiomyoma and very rare tumor with the incidence of 0.03% to 0.2%. It occurs most frequently in asymptomatic obese postmenopausal women. It develops due to fatty metamorphosis of smooth muscles of leiomyoma. We are presenting a case of such a rare uterine tumor.

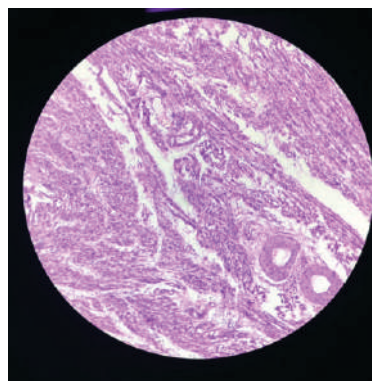
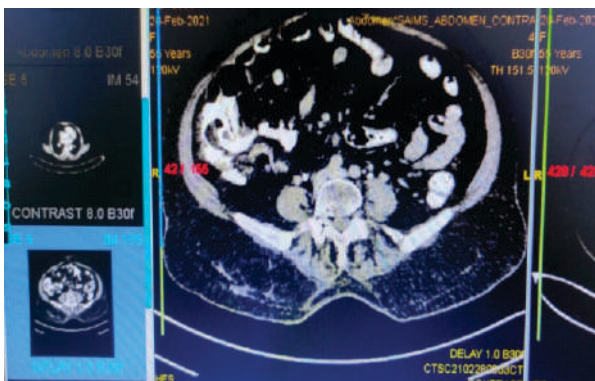
A postmenopausal 61-year-old P2L2 women came with complaint of gradually increasing abdominal mass since 2 years with associated bloating and decreased appetite. Patient was known case of diabetes, hypertension and bronchial asthma. On examination patient was stable and had 30-week size firm, mobile, non tender mass.

USG pelvis suggested 10*8*10.2 cm well defined heterogenous hypoechoic round mass likely dermoid cyst. CECT abdomen suggested large 9.7*8.8*9.7 cm well defined, round, predominantly fatty lesion seen in region of uterine fundus and body. Mild enhancement of peripheral wall, multiple intervening septa, amorphous eccentric calcific foci was noted. No lymphadenopathy and ascites seen. MRI shows well defined margins fatty nature and no diffuse restriction within lesion. Possibility of uterine leiomyoma was suggested as it has fatty component and is uterine in origin.

After all pre op work up and fitness total abdominal hysterectomy with bilateral salpingooherectomy was done. Intraoperatively uterus was 26 week size uniformly enlarged with large 12*10 cm round, encapsulated, well defined lesion in fundus and body of uterus. Cut section shows 10*8.5 cm intramural encapsulated, large well circumscribed, solid, yellowish mass seen. HPR shows intramural tumor composed of sheets of monomorphic spindle cells with uniform nuclei intermixed with mature adipocytes. Mitotic figures not seen. Post op course was uneventful and patient discharged on post op day 7.

Uterine lipoleiomyoma is very rare and needs to be differentiated from mature benign ovarian teratoma, pelvic lipoma, liposarcoma, and fatty degeneration of lipoma. Imaging plays a important role in diagnosis. MRI is diagnostic modality of choice as it delineates fat component better. Treatment is similar to leiomyoma and is dependent on clinical symptoms and size and location of lesion.

We are thankful to Dr Shweta Bhatnagar, department of Radiodiagnosis and Dr Amit Varma Prof and HOD, department of Pathology for their contribution in the case.



CASE REPORT 4

Radix Entomolaris in Mandibular First Molar : An Endodontic Challenge

Authors : Dr. Krupa Kapadia, Dr. Pallav Patni, Dr. Pradeep Jain, Dr. Swadhin Raghuwanshi, Dr. Sonal Singh Arora, Dr. Sanket Hans Pandey. Department of Conservative Dentistry and Endodontics

The majority of first and second mandibular molars are two rooted with two mesial and one distal canals. A major variant in this group is the mandibular first molar which has three roots. This has a frequency of less than 3% in white Caucasian (UK, Dutch, Finnish, German), African (Bantu Bushmen), Eurasian and Indian populations. This third lingual root, first mentioned in the literature by Carabelli in 1844, is called the radix entomolaris (RE).

A 37 year-old Indian female patient reported to the Department of Conservative Dentistry and Endodontics with the chief complaint of pain in left lower back tooth region since 7-8 days which aggravates on lying down. On clinical examination, deep occlusal caries was seen in mandibular left first molar. Tenderness on vertical percussion was positive. On cold testing, lingering pain persisted even after removal of stimuli. On radiographic examination showed radiolucent area involving enamel, dentin, and approaching to the pulp was seen. Periodontal ligament space widening was noticed in the mesial root. An extra distal root was present. With the help of the buccal object rule (Same Lingual Opposite Buccal rule; SLOB rule) it was determined that additional root was located distolingually (Fig. 1A). Diagnosis of irreversible pulpitis with apical periodontitis was established with the help of clinical and radiographic findings. The root canal treatment was planned. The tooth was anesthetized using 2 ml of lidocaine containing 1:200,000 epinephrine and isolated with rubber dam. Access cavity was prepared using round diamond bur no. and deroofing of pulp chamber was done using Endo z bur. Four distinct orifices were located using DG16 i.e. mesiobuccal, mesiolingual, distobuccal and distolingual. The canals were first negotiated by ISO #10 K file. Working length determination was done using Root ZX mini apex which was confirmed by radiovisiography (RVG) (Fig. 1B). Glide path was established using manual preparation till ISO # 20 k- file. Canals were instrumented using NeoEndo Flex rotary files. During instrumentation canals were irrigated with 2.5 ml 5% sodium hypochlorite followed by saline solution and RC-Help containing 17 % Ethylene diamine tetra acetic acid was used as a lubricant. Final irrigation was done using 2 ml of 2% Chlorhexidine gluconate. Master cone radiograph (Fig. 1C) was taken and canals were dried using paper point. Obturation was done using corresponding size gutta-percha and AH Plus sealer. Post endodontic restoration was done using composite resin (Fig. 1D). Patient was asymptomatic on three months follow up. It is of prime importance for a clinician to be aware of these anatomical and morphological variations while treating the lower mandibular molar.



Fig. 1A

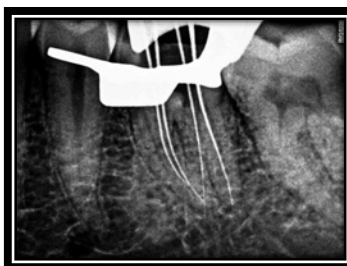


Fig. 1B



Fig. 1c

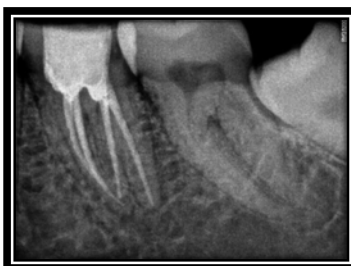


Fig. 1d

CASE REPORT 5

Prosthetic Rehabilitation of a Patient with Ocular Defect: A customized eye

Authors : Dr. Anup Vyas, Dr. Priyanka Nagar, Department of Prosthodontics, Crown, Bridge and Implantology.

Congenital defect, pathology or accidental trauma to eye may necessitate surgical intervention resulting in the removal of the eyeball. In such cases, a prosthetic eye can prove beneficial. A 42-year-old male patient reported to the Department of Prosthodontics, Sri Aurobindo College of Dentistry, Indore with a chief complaint of missing right eye since 8 years. On eliciting history, it was noted that the patient was a construction worker who met with an accident while working. He was operated for the same by surgical enucleation. A semi-customized ocular prosthesis with stock iris and custom made sclera was planned for the patient.

For the fabrication of ocular prosthesis, primary impression with Alginate impression material was taken with impression tray (old conformer) (fig a-c). Then, a silicone putty index was made following by fabrication of wax pattern. then it is inserted in the ocular cavity and checked for stability and esthetics. Then, final impression with light viscosity polyvinyl siloxane impression material has taken (fig d-f). Then investing, dewaxing, packing of finished pattern was done. Iris transfer has done followed by characterization of eye. Trimmed sclera was replaced by packing clear heat polymerizing acrylic resin followed by finishing, polishing and insertion of the prosthesis (fig 2)..

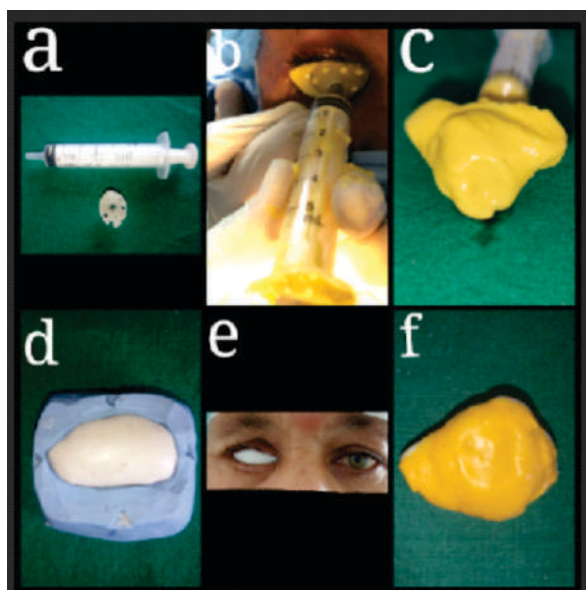


Fig. 1

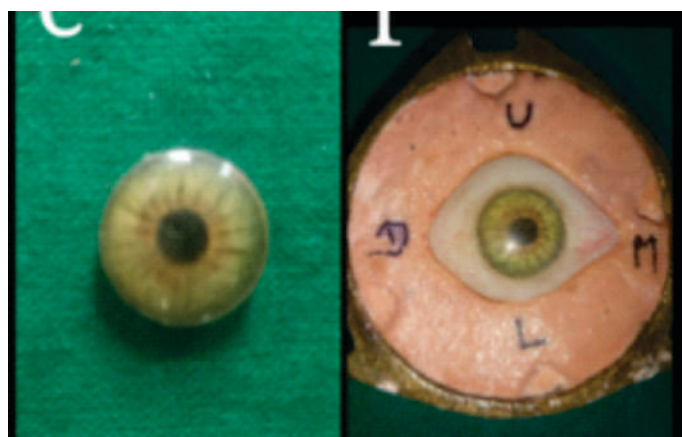
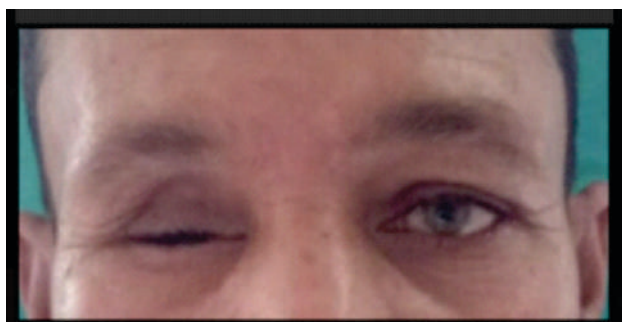


Fig. 2



Before



After

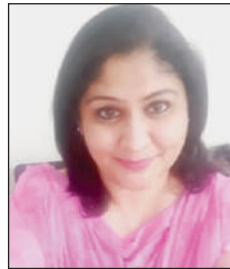
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ANATOMY



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ANESTHESIOLOGY



DR. KAVITARATI
BIOCHEMISTRY



DR. VISHAL R. MUNJAL
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Web : www.saimsonline.com Email : saimstimes@saimsonline.com