



ISA
Indian Society of
Anaesthesiologists
Delhi Branch

Eternal Vigilance



**PRE
ANAESTHESIA
CHECK UP**

ISA DELHI

**Monthly Bulletin of Indian Society of Anaesthesiologists (Delhi Branch)
Theme: The Anaesthesia Connection: From Patients to People**

ISSUE 01, December 2025

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President (ISA Delhi)

Dear Esteemed Members of ISA Delhi,

I am deeply honoured and humbled to assume the office of President of the Indian Society of Anaesthesiologists, Delhi State Branch. I extend my sincere gratitude to all members for the trust and confidence reposed in me.

ISA Delhi has always stood for academic excellence, professional integrity, and collective growth. As we move forward, our vision is to further strengthen our academic activities, promote skill enhancement, support young anaesthesiologists, and uphold the highest standards of patient safety and ethical practice.

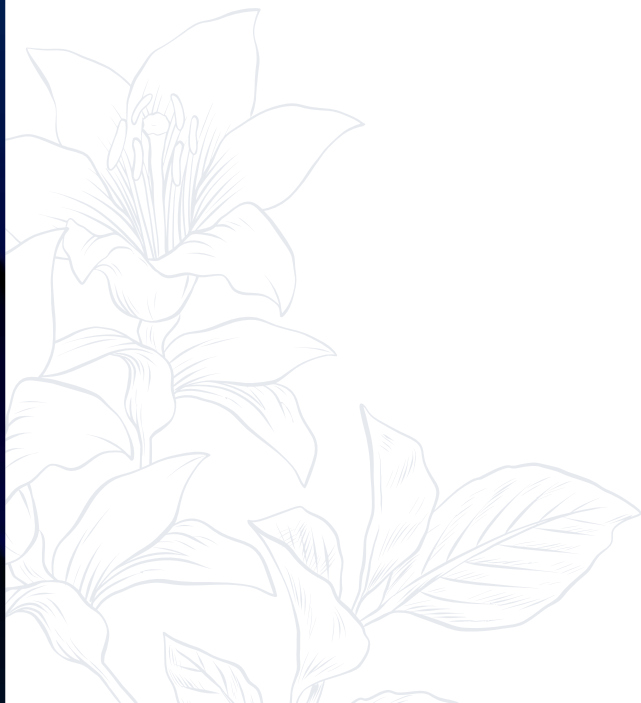
I look forward to working in close collaboration with you all, the senior colleagues, our dynamic younger members to make ISA Delhi more inclusive, responsive, and future-ready.

I seek your continued guidance, cooperation, and active participation as we embark on this journey together.

With warm regards and best wishes,



Dr Neerja Banerjee
President
ISA Delhi



Vice President (ISA Delhi)

Dear Esteemed Members,

It is with great pride and deep gratitude that I step into the role of Vice President ISA Delhi to serve this vibrant and dedicated fraternity. The strength of ISA Delhi has always been its members—anaesthesiologists who work tirelessly behind the scenes, safeguarding patient lives every single day. Your commitment to clinical excellence, patient safety, and academic growth continues to elevate our specialty and inspire us all.

I take this opportunity to appreciate each one of you for the exemplary work you do in operating rooms, ICUs, emergency services, and beyond. Your expertise, vigilance, and compassion ensure that patients receive the highest standard of care. As a fraternity, your contributions have strengthened the reputation of anaesthesiology as a pillar of modern medicine. I look forward to reading the newsletter designed by our new editorial team. They have been working tirelessly to bring out the December issue.

As the new team, we are committed to building on this strong foundation. In the coming year, we aim to enhance academic activities, promote innovations in safe anaesthesia practice, strengthen member engagement, and encourage collaborative learning across institutions. Together, we hope to create more opportunities for professional development, research, and leadership for all members.

I look forward to your continued participation, guidance, and support. Let us move ahead with collective enthusiasm and a shared vision—advancing patient safety, strengthening our fraternity, and taking ISA Delhi to even greater heights.

With warm regards and best wishes,



Dr Gurpreet Singh Popli
Vice President
ISA Delhi

Honorary Secretary (ISA Delhi)

Dear Delhi ISAIans,

Greetings from ISA Delhi Headquarters!

The year 2025 is soon coming to an end, I am sure you all must have made amazing memories with your loved ones and attained new heights. It was a remarkable year for ISA Delhi as well as our team had left no stone unturned to glorify the branch with many new initiatives.

My vision as Honorary Secretary of ISA Delhi is very clear. My team took charge in 2023 with the concept of "Unified ISA Delhi" where there should be equal opportunities for ISAIans from medical colleges, private practitioners, free lancers and YUVA rising stars.

ISA Delhi YUVACON 2025 and ISACON Delhi 2025 were the true reflections of the same. I wish to thank GC 2024-2025 specially my then president Dr Munisha Agarwal and Vice President Dr Sonia Wadhawan for always guiding us and supporting us throughout the year with their innovative ideas. I also wish to express my gratitude to our Honorary Treasurer Dr Abhijit Kumar for not only maintaining our accounts efficiently but also being a rock solid support in almost all endeavours. I also wish to thank my GC Members Dr Nishkarsh, Dr Geetanjali, Dr Anshu, Dr Nitesh and Dr Ridhima for all your support.

ISACON Delhi 2025 comprised of 6 well crafted workshops on 12th September at different institutions of Delhi and conference on 13th and 14th September which was largely attended by nearly 500 anaesthesiologists. It was a true amalgamation of academics and socialisation. I thank my organising team, governing council members and seniors for making it a grand success.

I wish to congratulate ISA Delhi members and council members for bringing lots of individual and state branch laurels at National Conference in Raipur (detailed report in January Issue). I congratulate our own Dr Rajiv Gupta for taking oath as Honorary Secretary of ISA National body, its a matter of pride for all us at Delhi and wish him luck and good wishes. I on behalf of my council assure full support and cooperation to national headquarters.

I also congratulate Dr Neerja Banerjee , Dr GS Popli and Dr Farah Husain for taking over as President, Vice President and Editor of ISA Delhi during a plush ceremony on the auspicious occasion of World Anaesthesia Day on 16th October 2025. I am sure their vision and dedication will add more wings to the journey. I humbly request all senior anaesthesiologists, teachers and colleagues to keep guiding us with the valuable inputs so as to take ISA Delhi to further heights in new year

Long Live ISA
Long Live ISA Delhi



Dr Amit Kohli
Honorary Secretary
ISA Delhi

Honorary Treasurer (ISA Delhi)

Dear ISA Delhi members,

Greetings from the treasurer's desk.

As this remarkable year comes to an end, I want to extend my heartfelt gratitude to each one of you for making the activities of ISA Delhi a resounding success.

ISACON Delhi 2025, held from 12th to 14th September 2025, was a true testament to the collective efforts and dedication of our Governing council. From the engaging sessions to the impactful collaborations, the event showcased the best of what we can achieve together. It is still receiving many accolades from all over India and the ISA Delhi branch has been conferred multiple awards by ISA National during ISACON 2025 in Raipur and your participation, enthusiasm, and contributions have been invaluable in bringing those prizes to ISA Delhi.

Looking back at this year, it has been nothing short of eventful. We have navigated challenges, celebrated milestones, and built a strong foundation for the future. As treasurer, I am proud to report that we have managed our resources responsibly, ensuring the sustainability and growth of our initiatives.

On behalf of the ISA Delhi branch, my heartfelt gratitude goes out to all those who have attended the ISA monthly clinical meets in massive numbers. Please keep the spirits high and participate in the forthcoming ISA Delhi activities with similar ardor.

Thank you all for being valuable members of ISA Delhi.

Long live ISA.

Jai Hind.

With regards,



Dr Abhijit Kumar
Honorary Treasurer
ISA Delhi

Editor (ISA Delhi)

Dear Fellow ISA Delhi Members and Readers,

As I take on the role of ISA Delhi Editor in Chief for the Newsletter, I am grateful and blessed to have a wonderful 12 - member editorial team to collaborate with. We've worked very hard, with complete coordination and creativity to bring to you this month's multifaceted newsletter. With themes that will interest and involve you, we are in the process of designing newsletters that will also pleasantly surprise you. It gives me great pleasure to release the first issue of the ISA Delhi Newsletter with the theme "The Anaesthesia Connection: From Patients to People" for December 2025.

Whether you're a seasoned anaesthesiologist or a young resident still learning the ropes, our newsletter aims to engage readers from all generations of anaesthesiologists. This month's issue highlights how even though we stand silently behind the curtains; we have the ability to develop long-lasting connections with our patients, colleagues and people at large. The newsletter has been divided into 5 very interesting sections: Featured Research, In the Spotlight, Case of the Month, Thinking Out of the Box, and the Creative Corner – each with narratives and articles relevant to the primary theme of the newsletter.

In the coming issues, we'll dive into the latest techniques, research, and innovations in anaesthesia and also showcase our skills as emergency physicians, integrative therapists, and troubleshooting heroes and heroines. Our goal is to keep you informed, inspired, and connected to the pulse of anaesthesia - not just as a practice but a life skill set to be proud of.

I would love to hear your feedback and suggestions

Long Live ISA !

Best



Dr Farah Husain
Editor in Chief
ISA Delhi

Glimpses from ISACON Delhi 2025



Glimpses from ISACON Delhi 2025



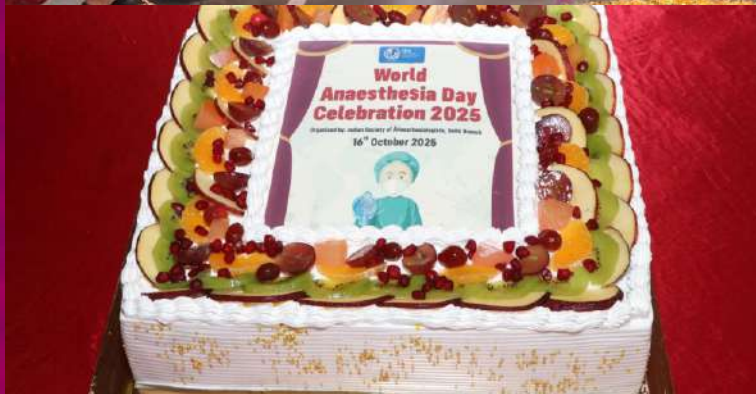
Glimpses from ISACON Delhi 2025



World Anaesthesia Day 2025



World Anaesthesia Day 2025



ISA Delhi Activities for Public Awareness

ISA Delhi initiatives for public awareness in Anaesthesiology

Anaesthesiology is one of the most vital yet often misunderstood branches of medicine. While the surgeon's role is visible to patients and their families, the anaesthesiologist usually remains in the background, ensuring safety, comfort, and pain relief throughout surgical and critical care procedures.

Despite this wide scope, the general public's awareness about the specialty remains limited. Many patients still believe that anaesthesia may be administered by paramedics or that it involves "simply putting the patient to sleep." Misconceptions, fears, and lack of knowledge about anaesthesia are common, even among educated patients. Hence, ISA Delhi strongly felt the need of public awareness activities across the capital city to reinforce patient trust in the system.

Public awareness activities in anaesthesiology aim to bridge this knowledge gap by informing people about the role of anaesthesiologists, safe anaesthesia practices, and the importance of pre- anaesthetic check-ups. Such initiatives also highlight the expanding domains of anaesthesiology — including pain medicine, critical care, and emergency response. We are in the era when image of the anaesthesiologist as a "silent guardian" is gradually evolving into that of a "visible protector."

Governing Council ISA Delhi declared 16th September to 16th October as public awareness month. President, Honorary Secretary and Honorary Treasurer made the draft of various activities and shared the vision with head of the departments of both government and private institutions across Delhi.

The enthusiasm shown by heads and senior faculty members in executing the plan was tremendous and highly appreciable. 10 such public awareness activities including nukkad natak, camps and dedicated talks, were carried out on different days across the state. Awareness about role of anaesthesiologist, facts about pre anaesthesia checkup, camps for chronic pain cancer pain, palliative care, resuscitation for lay persons were carried out.

ISA Delhi thanks its members, seniors, Yuva ISAians, patients, attendants, paramedics, lay persons, security guards for taking active participation in the public awareness month.

Long Live ISA
Long Live ISA Delhi



ISA Delhi Activities for Public Awareness

Public Awareness Program on Chronic pain and Palliative Care ABVIMS, Dr. RML Hospital

“When we recognize pain and treat it correctly, we begin to restore the dignity and comfort of the patient.” The Department of Anaesthesia, ABVIMS S Dr. RML Hospital under the aegis of ISA Delhi Branch, organized a Public Awareness Program on Chronic Pain and Palliative Care on 9th October 2025 from 10:00 AM to 1:00 PM under the guidance of Dr. Neerja Banerjee, HOD Anaesthesia.

The program was aimed to raise awareness about the importance of recognizing and treating pain correctly, and the role of anaesthesiologists in providing pain management services. The community, patients, and healthcare professionals were sensitized towards the importance of early recognition, timely intervention, and holistic management of chronic pain and end-of-life care. The program witnessed enthusiastic participation from patients, their family members, faculty, postgraduate students, and healthcare staff. The event also marked a significant step in the hospital's ongoing efforts to promote compassionate, patient-centered care.

The program was attended by a diverse group of healthcare professionals, senior faculty from the institute, nursing officers, patients, and caregivers. Dr. Neerja Banerjee, HOD Anaesthesia emphasized the importance of pain management and palliative care.

Anaesthesiologists play a crucial role in pain management, particularly in the perioperative period and they are increasingly being recognized as specialists in pain medicine. The program highlighted the various interventional pain procedures that anaesthesiologists can perform which can provide significant relief for patients with chronic pain, improving their quality of life and enabling them to return to their daily activities. Faculty from the Department of Anaesthesiology trained in pain medicine and palliative care explained how pain can persist long after tissue healing and can become a disease entity in itself. They discussed the common conditions leading to chronic pain such as arthritis, neuropathic pain, post-surgical pain, cancer-related pain, and musculoskeletal disorders. The talk highlighted modern approaches to pain management including pharmacological therapy, nerve blocks, physiotherapy, behavioral therapy, and interventional pain procedures. Special emphasis was placed on the multidisciplinary approach, wherein anaesthesiologists, physiotherapists, psychologists, and palliative care specialists work together for comprehensive patient care.

Patients were apprised that department has all the state of art equipments with well trained faculty to treat various painful conditions like low back pain, facial pain, headache, joint pain (osteoarthritis knee, frozen shoulder etc), coccydynia, neurolytic block like celiac plexus and splanchnic nerve block for palliative care. They were told that dedicated Pain OPD is functional on Thursday and Saturday and Palliative Care OPD on every Tuesday in Superspeciality OPD, OPD Block from 9-1 PM.

The session concluded with a consensus on the need for stronger collaboration between departments, improved patient education, and continued advocacy. The program also included a QSA session, where patients and caregivers had the opportunity to ask questions and share their experiences. The participants were enthusiastic and engaged, asking thoughtful questions and seeking advice on managing their pain. One of the most impactful segments of the program was the interactive session with patients. Their testimonials highlighted the transformation in their quality of life after being introduced to specialized pain management and holistic support.


ISA Delhi Activities for Public Awareness

A patient suffering from long-standing trigeminal neuralgia narrated how interventional pain management procedure (Gasserian Ganglion Radiofrequency RF ablation) had made her pain free and helped her regain her confidence and independence. One of the faculty also shared her experience with Frozen Shoulder. Another patient with advanced urinary bladder cancer with metastasis expressed gratitude for the palliative care team for supporting him physically and emotionally through his illness journey. These heartfelt stories reinforced the importance of awareness and access to appropriate pain relief measures.


To make the session more engaging and educational, demonstrations on mannequin was made about the site of injection, pain assessment techniques, use of pain scales, and non-pharmacological methods such as relaxation therapy and guided breathing exercises.

The program was followed by expert inputs from Director, Dean and Additional MS from the institute. They ensured of providing continued support from the administration in terms of providing equipment and all the logistics. The faculty encouraged patients and caregivers to disseminate the message within their neighborhoods. The hospital also announced plans to conduct regular awareness camps and pain management clinics for the community.

The Public Awareness Program on Chronic Pain and Palliative Care was a resounding success, both in terms of participation and impact. The diverse role of anaesthesiologists was reinforced among the attendees. The overwhelming response from patients and their families reflected the deep need for such programs. Faculty members reiterated the hospital's commitment to continuing these initiatives and strengthening pain and palliative care services. The event concluded with a vote of thanks to all participants, patients, and the organizing team for their valuable contributions.



दर्द निवारण (Chronic Pain Relief)












Indian Society of
Anaesthesiologists
Delhi Branch

जन जागरूकता कार्यक्रम



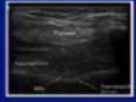

स्थान : 6th फ्लोर ट्रामा बिल्डिंग
डी आर एम एल हॉस्पिटल

दिनांक : 09 अक्टूबर 2025
समय : सुबह 10 बजे

 <p>कमर दर्द/साइटिका (Back Pain/Sciatica)</p>	 <p>चेहरे का दर्द (Facial Pain)</p>	 <p>कंघा जाम (Frozen shoulder)</p>
 <p>गर्दन में दर्द (Neck Pain)</p>	 <p>पिर दर्द (Headache)</p>	 <p>मांसपेशियाँ में दर्द (Myofascial Pain)</p>
 <p>फाइब्रोमायलजिया (Fibromyalgia)</p>	 <p>घुटने में दर्द (Knee Pain)</p>	 <p>कैंसर दर्द एवं पैलियेटिव केयर (Cancer Pain & Palliative Care)</p>

प्रत्येक दर्द का इलाज : संभव

- नसों में इंजेक्शन
- नसों को जलाना
(Radio Frequency Ablation)
- जोड़ों में इंजेक्शन
(Steroids/ PRP/ Ozone)
- दवाई



आयोजक : **संज्ञाहरण विभाग**
(Department of Anaesthesia)
ABVIMS, Dr. RML Hospital

दर्द निवारण ओ पी डी वीरवार, सनिवार (सुबह)
पैलियेटिव केयर ओ पी डी मंगलवार (सुबह)
तीसरी मंजिल ओ पी डी बिल्डिंग, RMLH

ISA Delhi Activities for Public Awareness

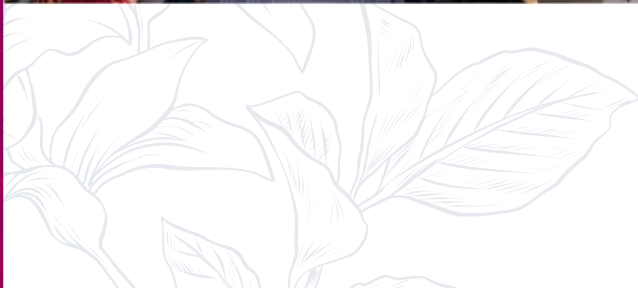
World Hospice and Palliative Care Day Celebration at AIIMS New Delhi on 11th Oct 2025

Department of Onco-Anaesthesia and Palliative Medicine, BRAIRCH, AIIMS Delhi, awareness program in collaboration with ISA Delhi on World Hospice and Palliative Care Day under leadership of Prof. and Head Seema Mishra. The World Hospice and Palliative Care Day is observed globally to raise awareness and understanding of the importance of palliative care. It aims to influence policies, strengthen community engagement, and reduce the stigma associated with palliative care. Hospitals, healthcare institutions, and community groups observe the day through seminars, cultural events, patient stories, and awareness campaigns, reaffirming the global commitment to ensure that palliative care becomes a universal right for every individual.

Globally, the need for palliative care is immense, with over 56 million people requiring it each year, and approximately 31 million in the final year of life. However, only 14% of those in need receive the support they deserve. The challenge is most acute in low- and middle-income countries, where nearly three-quarters of adults needing palliative care live; however, services are often few and far between. Cancer is the most common reason why people require palliative care, and the numbers are staggering. GLOBOCAN 2022 reported 20 million new cancer cases and 9.7 million deaths worldwide. India's cancer burden is rising sharply, with 1.46 million new diagnoses and more than 850,000 deaths annually. More than 60% of Indian patients are diagnosed at an advanced stage, when the focus shifts from cure to comfort, dignity, and relief from pain.

Despite this enormous need, fewer than 4% of Indians who require palliative care receive it. Important steps have been taken, such as the launch of the National Program for Palliative Care in 2012 and changes in 2014, to simplify opioid access for pain management. However, much more work is needed to bring palliative care to every level of healthcare, beyond major hospitals and into local communities.

Following these principles, the All India Institute of Medical Sciences (AIIMS), New Delhi, observed World Hospice and Palliative Care Day 2025 with great enthusiasm and reflection on 11 October 2025. Organized by the Department of Onco-Anaesthesia and Palliative Medicine, B.R. Ambedkar Institute Rotary Cancer Hospital (IRCH) and National Cancer Institute (NCI), Jhajjar. The event revolved around this year's global theme-“Achieving the Promise: Universal Access to Palliative Care” highlighting the need to make compassionate, person-centred care available to all.



ISA Delhi Activities for Public Awareness

The celebration began with a warm welcome to esteemed faculty members, distinguished guests, and participants, setting an inspiring tone for the day by Prof. Seema Mishra, Head of the Department of Onco-Anaesthesia and Palliative Medicine, delivered the welcome address, emphasizing that “Quality of life is as vital as the length of life” and reaffirming AIIMS's commitment to compassionate, patient-centred care. Prof. Pratik Kumar, Acting Chief of Dr. B.R.A. The IRCH and the Acting Head of the NCI inaugurated the event, highlighting the need for empathy and connection in medical practice. The ceremony also featured remarks from Prof. Sunil Kumar, Head, Department of Surgical Oncology, and Prof. Rakesh Lodha, Associate Dean (Academic), AIIMS, who underscored the unmet needs in Palliative Medicine and the importance of multidisciplinary collaboration. The department launched its first bulletin, a testament to its academic and clinical growth. Special talks, such as Prof. Mohit Gupta's “Power of One Thought” and Prof. Urvashi Goja's “Holding Space: The Quiet Power of Empathy in Palliative Care,” were moving reminders of the vital role of hope and empathy. Faculty and residents performed a skit highlighting patient and family challenges, showing how compassionate care transforms lives. The poignant skit captures the essence of resilience, compassion, and humanity, adding emotional depth to the occasion. The program ended with a creative burst of slogans and poems demonstrating palliative care's emotional and ethical heart. This was followed by the announcement of the results for the poem and slogan writing competitions for doctors and nurses by Dr. Nishkarsh Gupta. Prof. Seema Mishra summed up the ethos beautifully. The winning slogans were

1. **“Palliative care is not about giving up; it is about giving comfort, respect, and meaning to every remaining moment.**
2. **Universal access is not a luxury; it is an ethical and public-health imperative.”**

The AIIMS's initiative is about more than a single event; it is a vision for palliative care integrated into oncology and chronic illness care, for training professionals, and for building bridges to communities. As India faces an aging population and rising non-communicable diseases, the urgency for accessible, culturally sensitive palliative care is growing ever stronger. This year's celebration rekindled collective determination to turn universal access into a lived reality, reaching one patient and family at a time.

In the vote of thanks, Prof. Sachidanand Jee Bharati expressed heartfelt gratitude to all participants and contributors. The event concluded with reflections on the collective promise to ensure that palliative care becomes a universal right, not a privilege, reaffirming AIIMS's leadership in compassionate healthcare.



ISA Delhi Activities for Public Awareness



ISA
Indian Society of
Anaesthesiologists
Delhi Branch

PUBLIC AWARENESS PALLIATIVE CARE

11 October 2025 | Ramalingaswamy Board Room, AIIMS Delhi

HIGHLIGHTS

Holistic Healing: Mind, Body and Spirit | *Skit: Awareness about palliative care*



Dr. Seema Mishra

Professor and Head
Department of
Onco-Anaesthesia and Palliative
Medicine, Dr BRA IRCH and
NCI Jhajjar, AIIMS, New Delhi



Dr. Rakesh Garg

Professor
Dept. of Onco-Anaesthesia and
Palliative Medicine, Dr. B.R.A.IRCH,
AIIMS, New Delhi



Dr. Nishkarsh Gupta

Professor
Dept. of Onco-Anaesthesia and
Palliative Medicine, Dr. B.R.A.IRCH,
AIIMS, New Delhi



Dr. Sachidanand Jee Bharati

Professor
Dept. of Onco-Anaesthesia and
Palliative Medicine, Dr. B.R.A.IRCH,
AIIMS, New Delhi



Dr Munisha Agarwal
President



Dr Sonia Wadhawan
Vice President



Dr Amit Kohli
Honorary Secretary



Dr Abhijit Kumar
Honorary Treasurer



Dr Nishkarsh Gupta
Editor

ISA Delhi Activities for Public Awareness

“Public Awareness on Pain & Palliative Care” on 13th October 2025 at the Advanced Skill Lab, 3rd Floor, UCMS & GTB Hospital, Delhi

The **Department of Anaesthesiology and Critical Care**, University College of Medical Sciences (UCMS) and Guru Teg Bahadur (GTB) Hospital, Delhi, organized a **Public Awareness Program on Pain and Palliative Care** on **13th October 2025** under the aegis of the **Indian Society of Anaesthesiologists (ISA) – Delhi Chapter (East Zone)**. The event was held as part of the activities commemorating **World Anaesthesia Day**, to sensitize healthcare workers and the public to the importance of understanding, assessing, and managing pain, as well as introducing the principles of palliative care.

The program aimed to bridge the gap between awareness and implementation of pain relief and palliative services—an essential yet often neglected component of healthcare. It also sought to highlight the pivotal role of anaesthesiologists not only in perioperative care but also in pain management and holistic well-being.

The inaugural session began with the ceremonial lighting of the lamp and was inaugurated by the **Honourable Principal of UCMS, the Medical Director of GTB Hospital**, and **Dr. Medha Mohta**, Head of the Department of Anaesthesiology and Critical Care, UCMS S GTB Hospital. In their addresses, they emphasized that pain relief and end-of-life care are fundamental human rights and that every healthcare professional bears the responsibility to alleviate suffering and uphold dignity in care. The program was graced by **Dr. Ashok Kumar Saxena**, a distinguished **Emeritus Professor** and **stalwart in Pain Medicine**, whose vast experience and contributions have greatly advanced the field. His presence added immense value and inspired all attendees.

The program was attended by nearly **70 participants**, including **resident doctors, nursing officers, nursing students, and technical staff** from GTB Hospital. The enthusiastic participation reflected the multidisciplinary nature of pain and palliative care and underscored the need for collaborative, team-based approaches in these domains.

The academic sessions provided a concise yet comprehensive overview of pain management and palliative care. Experts from **UCMS & GTB Hospital, HIMSAR Delhi, DSCI, and IHBAS** delivered lectures on a range of relevant topics. The sessions began with a discussion on “Pain and its types”, explaining the mechanisms of nociceptive, neuropathic, and nociplastic pain and stressing the importance of accurate assessment for effective management.

“**Chronic pain management**” talk was addressed with a focus on pharmacological, interventional, and rehabilitative approaches, highlighting the role of early intervention and psychological support. This was followed by deliberations on “**Acute postoperative pain management**”, emphasizing multimodal analgesia, patient-controlled analgesia systems, and the need for structured postoperative pain protocols to enhance patient satisfaction.

A talk on “**Myths and Facts Related to Pain Management**” was delivered to dispel common misconceptions about chronic pain, emphasizing evidence-based approaches, multidisciplinary care, and the importance of patient awareness in achieving effective pain control. The session on “**Introduction to Palliative and Neuropalliative Care**” drew attention to the philosophy of improving quality of life for patients with life-limiting and neurological illnesses through compassionate, multidisciplinary care.

ISA Delhi Activities for Public Awareness

Interactive segments encouraged active participation from the audience. Practical demonstrations on pain assessment tools, myths related to opioid use, and the role of nurses and technicians in pain management added value to the learning experience. Nurses and resident doctors shared their daily challenges in managing pain, while faculty members offered practical solutions based on real-world experience. The interactive nature of the program transformed it into an engaging dialogue rather than a series of lectures, promoting a culture of shared learning and reflection.

In her closing remarks, **Dr. Geetanjali T. Chilkoti**, Director Professor, Department of Anaesthesiology S Critical Care, UCMS S GTB Hospital, **Program Coordinator**, and **Governing Council Member – East Zone, ISA-Delhi**, expressed heartfelt gratitude to all speakers, participants, and institutional authorities for their enthusiastic support. She encouraged young doctors and nurses to continue building their knowledge and sensitivity toward pain and end-of-life care through regular training and participation in similar initiatives.

The participants provided overwhelmingly positive feedback, describing the program as **informative, interactive, and inspirational**. Many expressed that it broadened their understanding of pain and palliative care and motivated them to implement best practices in their respective areas of work. The program succeeded in enhancing awareness, fostering empathy, and strengthening interdisciplinary collaboration across the healthcare spectrum.

To summarize, the **Public Awareness Program on Pain and Palliative Care** at UCMS S GTB Hospital was a resounding success. It not only disseminated crucial knowledge on pain and palliative care but also reaffirmed the collective commitment of the medical fraternity to compassionate and ethical pain management. By bringing together experts and learners under one platform, the event reinforced the vital message that alleviating pain and suffering is central to the mission of medicine. The Department of Anaesthesiology S Critical Care, through such initiatives, continues to uphold its dedication to academic excellence and community outreach— true to the vision of the Indian Society of Anaesthesiologists.



ISA Delhi Activities for Public Awareness



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Public Awareness on Pain & Palliative Care

13 October 2025 | Advanced Skill Lab, 3rd Floor, UCMS & GTB Hospital

PROGRAM

Time	Topic	Speakers
11 AM-11:15 AM 12: 00-12:15 PM	Understanding pain- Information for patients & Families	Dr Poonam Rani Department of Anaesthesiology, UCMS & GTB Hospital
2:00-2:20 PM	Inauguration & Welcome Address	
2:20-2:40 PM	Common causes of chronic pain - when to see a Pain Physician ?	Dr Geetanjali T Chilkoti/ Dr Poonam Rani Department of Anaesthesiology, GTB Hospital
2:40-2:50 PM	Caring for patients after surgery	Dr Chhavi S Sharma Department of Anaesthesiology, GTB Hospital
2:50- 3:10 PM	Myths and Facts about Pain Relief – Interactive session	Dr Anwesha Banerjee Department of Anaesthesiology, HIMSR
3:10-3:20 PM	Palliative care-Support for serious illness	Dr Anuradha Patel Department of Anaesthesiology, DSCI
3:20-3:30 PM	Special care for patients with Brain and Nerve Disorders (Neuropalliative care)	Dr Deepti Agarwal Department of Neuropalliative Care, IHBAS

Kind Host



Dr Medha Mohta

GC Coordinator



Dr Geetanjali T Chilkoti



Dr Munisha Agarwal
President



Dr Sonia Wadhawan
Vice President



Dr Amit Kohli
Honorary Secretary



Dr Abhijit Kumar
Honorary Treasurer



Dr Nishkarsh Gupta
Editor

ISA Delhi Activities for Public Awareness

“Onco Anaesthesiologist: A Silent Companion in Cancer Care”

14th to 16th October 2025 at the Rajiv Gandhi Cancer Institute and Research Centre (RGCIRC), New Delhi.

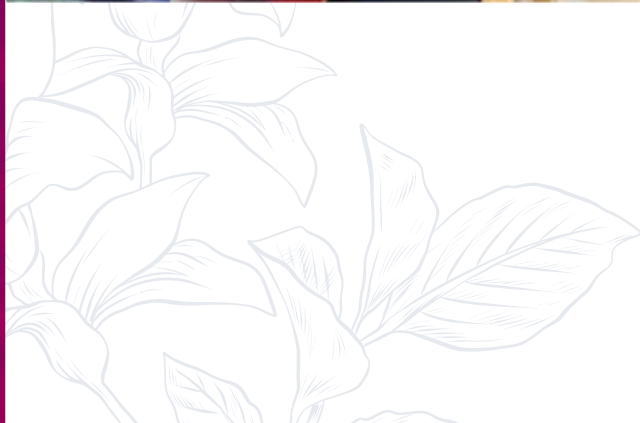
The event aimed to highlight the crucial yet often under-recognized role of **onco- anaesthesiologists** in comprehensive cancer care. It focused on educating patients, caregivers, and the general public about the significance of anaesthesia in cancer surgeries and pain management, as well as the safety measures and advancements that ensure better outcomes.

As part of the awareness initiative, **digital demonstrations** were showcased across all kiosks within and outside the hospital premises, explaining the **importance of anaesthesia**, its **processes**, and addressing **common myths and facts** related to anaesthetic care in oncology.

The event also featured a **recorded message** by **Dr. Sudhir Kumar Rawal (Medical Director, RGCIRC)** and **Dr. Rajiv Chawla (Director, Anaesthesiology, RGCIRC)**, emphasizing the importance of anaesthesia safety and the pivotal role of anaesthesiologists in cancer treatment. Their messages were shared widely on social media to reach a broader audience.

The event was coordinated by **Dr. Nitesh Goel** under the able leadership of the ISA Delhi Branch team - **Dr. Munisha Agarwal (President)**, **Dr. Sonia Wadhawan (Vice President)**, **Dr. Amit Kohli (Honorary Secretary)**, **Dr. Abhijit Kumar (Honorary Treasurer)**, and **Dr. Nishkarsh Gupta (Editor)**.

This awareness campaign successfully brought attention to the indispensable contribution of onco-anaesthesiologists — the “silent companions” who play a vital role in ensuring patient comfort, safety, and well-being throughout the cancer care journey.



ISA Delhi Activities for Public Awareness



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Public awareness on Onco Anaesthesiologist: A Silent Companion in Cancer Care

14 - 16 October 2025

Venue: Rajiv Gandhi Cancer Institute and Research Centre, New Delhi

HIGHLIGHTS

- Demonstration on importance of anaesthesia, its process, myths and facts on all digital kiosks across Rajiv Gandhi cancer institute, inside and outside the premises
- Recorded message by Medical Director and HOD anaesthesia regarding anaesthesia safety on social media



Dr Sudhir Kumar Rawal
Medical Director, RGCIRC



Dr Rajiv Chawla
Director Anaesthesiology, RGCIRC



Dr Nitesh Goel
GC Coordinator



Dr Munisha Agarwal
President



Dr Sonia Wadhawan
Vice President



Dr Amit Kohli
Honorary Secretary



Dr Abhijit Kumar
Honorary Treasurer



Dr Nishkarsh Gupta
Editor

ISA Delhi Activities for Public Awareness

Public awareness and training for CPR

The **department of Anaesthesia LPMC New Delhi** conducted a series of activities for public awareness and training for CPR during the recently concluded Anaesthesia week. Apart from providing training to the general public in batches of 10-20, a structured training to the medical graduates was also provided .

Approximately 150 people were trained during the events conducted once every day.

We identified key areas in the hospital ie the OPD premises, wards, postoperative recovery area.

The trainees were briefed on

1. How to identify a victim of cardiac arrest ?
2. The importance of starting resuscitation without wasting time.
3. The concept of scene safety.
4. How to activate the EMS?
5. The correct technique of CPR explained in simple terms.
6. Special emphasis was laid on the correct technique of chest compression and the principle of "push hard and push fast"
7. They were also apprised of the location of AEDs in the hospital.
8. A demonstration of how to use AED.



ISA Delhi Activities for Public Awareness

“Preanaesthetic Checkup (PAC)”

on 15th October 2025 at the Patient Holding Area outside the PAC Clinic, Lok Nayak Hospital, and Maulana Azad Medical College (MAMC), New Delhi.

A Preanaesthesia Checkup (PAC) Awareness Program conducted in the Lok Nayak Hospital Anaesthesia Outpatient Department (OPD) on World Anaesthesia Day was a valuable initiative by the Indian Society of Anaesthesiologists (ISA) aimed at educating the public, empowering patients, and improving surgical outcomes.

Overview

The PAC Awareness Program took place in the OPD of LNH, focusing on educating patients awaiting elective surgeries and their families about the necessity, procedure, and benefits of PAC.

The event utilized informative banners, interactive talks, and direct patient–anaesthesiologist engagement to maximize impact.

Objectives

- To inform patients and families about the importance of PAC for surgical safety.
- To clarify misconceptions such as the belief that PAC is unnecessary for minor procedures.
- To encourage honest disclosure of medical history.
- To build trust and reduce anxiety regarding anesthesia.
- To improve perioperative outcomes through enhanced understanding and patient compliance.

Activities undertaken

1. Educational Skit/ Nukkad natak

Doctors – faculty and residents- delivered a skit covering:

The process of PAC — including medical history, physical examination, and relevant tests. The importance of accurate and complete health information.

The anaesthesiologist's crucial role in ensuring patient safety.

Risks prevented through proper PAC, such as unexpected complications or last-minute surgery cancellations.

The skit was very well received by the patients attending the OPD as is clear from the photos. Many patients from other OPDs flocked to the PAC clinic to witness the skit done by the doctors. There was good participation from faculty and residents who enacted their roles in such a way as to engage the audience. The skits were very simple but extremely relevant in dissemination public awareness regarding pre anaesthetic awareness.

2. Interactive Q&A Sessions

Following the skit, patients were encouraged to ask questions, helping dispel common doubts such as: “Is PAC necessary for local anesthesia?”

“Why do I need to stop certain medicines before surgery?” “How should I prepare on the night before my procedure?”

3. Demonstrations

Doctors demonstrated common assessment components such as blood pressure measurement, airway evaluation, and medication review.

ISA Delhi Activities for Public Awareness

4. Group Engagement

The OPD setting, with its high patient flow, enabled broad participation.

Visual aids, role-play scenarios, and interactive discussions helped increase engagement and understanding.

Impact and Outcomes

1. Enhanced Patient Knowledge.

Post-program surveys revealed a marked improvement in patients' understanding of the PAC process and its importance for all surgeries. Participants showed greater willingness to share comprehensive medical histories.

2. Increased Patient Confidence.

Informal feedback indicated reduced anxiety levels. Patients expressed greater trust in their surgical and anesthesia teams.

3. Improved Perioperative Processes Following the awareness drive:

Fewer last-minute cancellations occurred.

Reduced preoperative congestion was noted in the OPD suggesting improved PAC compliance and efficiency.

Challenges Encountered

Time Constraints: The busy OPD schedule required concise sessions.

Literacy Barriers: Some patients needed personal assistance to understand written materials.

Misconceptions: A few believed PAC was unnecessary for minor surgeries; this was addressed during the event.

Conclusion

A well-structured Preanaesthesia Checkup Awareness Program in the hospital OPD effectively bridges the information gap among patients, enhances perioperative safety, and fosters trust and transparency.

By directly engaging patients and families, such programs empower the community, reduce surgical complications, and ensure safer and smoother surgical experiences for all involved.

Frequent public awareness drives on various aspects are required to foster a better patient doctor relationship, improve the quality of patient care and reduce medicolegal litigations.



ISA Delhi Activities for Public Awareness



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Public Awareness about Preanaesthetic Checkup

15 October 2025

**Venue: Patient Holding area outside PAC Clinic, Lok Nayak Hospital and
Maulana Azad Medical College, New Delhi**

HIGHLIGHTS

- Importance of a detailed PAC report
- Educating about expected risks before any surgery
- Understanding what is optimisation for anaesthesia

नुक्कड़ नाटक का शीर्षक: "ऑपरेशन से पहले बेहोशी की जाँच"

- बेहोशी की जाँच क्यों ज़रूरी है?
- बेहोशी की जाँच में क्या-क्या होता है?
- क्या इसके लिए खाली पेट आना होता है?
- जब मरीज़ फिटनेस के लिए ज़ोर डालते हैं तो उन्हें क्या समझाएँ?



Dr Anju R Bhalotra

Director Professor and Head,
Department of Anaesthesiology,
MAMC, New Delhi



Dr Farah Husain

(Lead Faculty and Script Writer)
Specialist Lok Nayak Hospital,
New Delhi

Team: Dr Snigdha, Dr Khushboo, Dr Divya Gehlot, Dr Wahaja Karim, Dr Akshay, Dr Anshuman Das



Dr Munisha Agarwal
President



Dr Sonia Wadhawan
Vice President



Dr Amit Kohli
Honorary Secretary



Dr Abhijit Kumar
Honorary Treasurer



Dr Nishkarsh Gupta
Editor

ISA Delhi Activities for Public Awareness

Public Awareness Program on Pre-Anaesthesia Check-up and Anaesthesia in Oncology Set-up at Delhi State Cancer Institute, DSCI on 16 October, 2025

Under the aegis of ISA Delhi, The Department of Onco-Anaesthesia, Delhi State Cancer Institute (DSCI) conducted a Public Awareness Programme on the importance of Pre-Anaesthesia Check-up (PAC) and the role of Anaesthesia in Oncology Care as part of the ISA Delhi public outreach initiative. This event was organized on World Anaesthesia Day on 16 October, 2025 with great enthusiasm and public participation. This program was organized with the primary objective of educating patients, attendants, and the general public about the significance of anaesthesia services in safe surgical care, especially for cancer patients who often undergo complex and prolonged procedures.

Background

Cancer surgeries are among the most demanding operations, requiring multidisciplinary coordination. The role of the anaesthesiologist extends far beyond the operation theatre — encompassing pre-operative optimization, intra-operative management, and post-operative pain and critical care. However, public understanding of anaesthesia as a medical specialty remains limited. Many patients associate anaesthesia only with sleep during surgery, without realizing its critical contribution to safety and recovery. Moreover, many patients prioritize their interactions with the surgeon and may ignore anaesthesiologist's advice during PAC. Low public awareness regarding PAC leads to incomplete medical history, increased anxiety preoperatively, uncontrolled comorbidities, poor compliance with medications and thus increased risk perioperatively.

Recognizing this gap, team DCSI took up the initiative to spread awareness among patients, caregivers, and hospital staff about:

- What is a pre-anaesthesia check-up?
- Why is PAC essential before surgery?
- How anaesthesiologists ensure safety during cancer surgeries.
- Myths and facts about anaesthesia.
- The evolving role of anaesthesiologists in oncology, and pain management.

Programme Highlights

The event was held in the hospital outpatient area to ensure maximum participation of patients and attendants. The programme included interactive talks, poster displays, and patient engagement activities. The main goal was to bring clarity and confidence among patients, ensuring them the importance of safe anaesthesia.

1. Inauguration and Welcome address

The event began with a welcome address by the Dr Surendra Kumar, Head of the Department of Anaesthesia, who highlighted the vision of ISA Delhi in promoting community awareness regarding anaesthesia safety and patient rights. He emphasized on the indispensable role of anaesthesiologists in every surgery. A brief introduction to the role of anaesthesiologists in oncology was given, emphasizing the multidisciplinary approach to perioperative cancer care. This was followed by welcome address by Dr Ravinder Singh, Joint Director, DSCI who commended the initiative and emphasized that such awareness programs are necessary for bridging the communication gaps between patients and doctors.

2. Educational Talks and Interactive Panel Discussion

Faculty members and residents interacted with patients and their attendants, educating them about the significance of anaesthesiologists in the operation theatre, critical care and pain management. The

ISA Delhi Activities for Public Awareness

interactive session aimed to dispel myths with respect to anaesthesia, improve public understanding of its safety, and highlight the role of anaesthesiologists in ensuring comfort during oncosurgeries. This was an interactive questions and answers session where patients and their relatives shared their experiences and cleared their doubts about anaesthesia procedures.

Topics included:

- Importance of Pre-Anaesthesia Check-up: what patients should expect.
- Who does the PAC and when should it be done?
- What should I bring during my PAC appointment?
- Will I get fitness if I have health problems like DM, high BP or asthma
- What if I had problems with anaesthesia in the past?
- Why do some surgery gets postponed after PAC?
- Is PAC required for non surgical procedure like endoscopy, radiotherapy or CT scan.
- Pre-operative optimization of cancer patients — how we prepare patients with anaemia, diabetes, hypertension, or chemotherapy-related issues.
- Myths vs. facts about anaesthesia.
- Role of anaesthesiologists in pain and palliative care.
- Fears and misconceptions related to anaesthesia
- Different types of anaesthesia
- Key aspects of post-operative care

2. Poster Display

Attractive and informative posters of PAC patients information sheet were displayed in both English and Hindi in simple language. These included frequently asked questions about anaesthesia, why is PAC important for cancer patients, what to bring during PAC appointment, what happens during PAC, important pre-surgery instructions, special considerations in oncology and the role of prehabilitation.

3. Patient interactive Activities

Patients were encouraged to ask questions related to PAC and anaesthesia. Those patients taking active participation were also felicitated.

4. Anaesthesia in Oncology Setup

The team discussed the unique challenges in onco-anaesthesia, including management of patients undergoing chemotherapy and radiotherapy. Emphasis was placed on the holistic care model, where anaesthesiologists play a key role in pain relief, intensive care, and quality-of-life improvement.

5. Media and Outreach

The event was covered through hospital social media handle. This public awareness drive was covered by various media such as Hindustan, Drug today, Caas India Web Team, Punjab Kesari, and Press Trust of India.

6. Participants

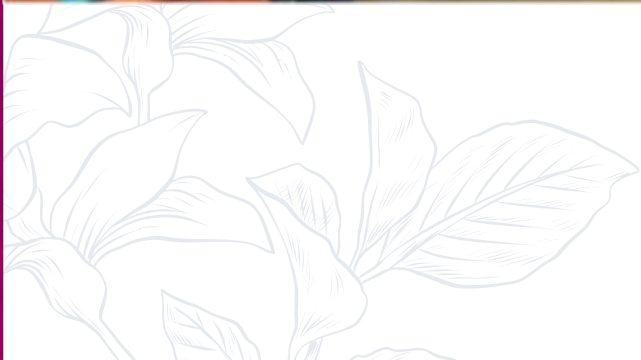
The programme was attended by more than 150 patients and caregivers, along with nursing and paramedical staff.

Conclusion

This public awareness activity under ISA Delhi's initiative was a resounding success, fulfilling its aim of demystifying anaesthesia, enhancing public understanding and confidence in anaesthesia care. The enthusiastic participation from patients, staff, and faculty reflected a growing recognition of anaesthesiologists as patient advocates and safety leaders.

ISA Delhi Activities for Public Awareness

The Department of Onco-Anaesthesia, DSCI remains committed to continuing such awareness drives in the future — through posters, community talks, and digital outreach — to ensure that every patient entering the operation theatre is informed, reassured, and confident in the care they receive.



ISA Delhi Activities for Public Awareness

CPR Awareness Month 2025: GIPMER Joins Effort Led by ISA Delhi Branch Dr Kiran Kiro, Dr Monica S Tandon

The **Department of Anaesthesiology & Intensive Care**, Govind Ballabh Pant Institute of Postgraduate Medical Education and Research (**GIPMER**), proudly joined the **Indian Society of Anaesthesiologists (ISA) Delhi Branch** initiative in observing **CPR Awareness Month** from **16 September to 15 October 2025**. As part of this statewide public health campaign, the department organized a **CPR Awareness and Training Session** on **15 October 2025**, marking its active participation in a movement dedicated to empowering citizens with lifesaving skills.

A Collective Movement for Public Health

The CPR Awareness Month, spearheaded by ISA Delhi Branch, has emerged as a landmark initiative uniting anaesthesiology departments across Delhi–NCR under one mission - **to take resuscitation knowledge beyond hospital walls and into the community**.

ISA's leadership has been pivotal in galvanizing this effort, encouraging medical institutions to reaffirm their commitment to public education and emergency preparedness. By designating a full month for CPR outreach, the Society has provided a structured platform for hospitals and colleges to engage directly with citizens, breaking traditional barriers between healthcare providers and the public. For GIPMER, participation in this campaign symbolized both **professional responsibility and civic duty**—a reaffirmation of the institute's enduring ethos: to serve not only patients within its wards but also the wider society through education and empowerment.

Highlights from the GIPMER Session

Under the guidance of **Prof. (Dr.) Monica S. Tandon**, Head of Department, and with coordination by Dr. Kiran Kiro, the CPR Awareness Session at GIPMER was conducted as an interactive, inclusive, and high-impact event.

The session began with an insightful talk by **Dr. Rachna Wadhwa**, who simplified the principles of **Basic Life Support (BLS)** and **CPR** for a lay audience. Her clear, relatable explanations bridged the gap between medical complexity and everyday understanding, emphasizing that anyone— regardless of training—can make a difference in a cardiac emergency.

The heart of the program lay in its **hands-on CPR skill stations**, led by the department's dedicated **CPR Training Team** comprising **Dr. Sagar Debbarman, Dr. Shruti Sharma, Dr. Ayush, Dr. Priyanka, Dr. Manopriya, and Dr. Akif**.

Over 150 participants, including medics, paramedics, and members of the general public, practiced key lifesaving techniques—**chest compressions, airway clearance, and recognition of cardiac arrest**—under expert supervision. The interactive format encouraged questions, fostered confidence, and transformed theoretical awareness into tangible competence.

Participants also learned that **CPR is not an exclusive medical skill but a universal right and responsibility**. By empowering the public with this knowledge, the department reinforced the message that lifesaving begins with awareness.

The event culminated in a **CPR Awareness Pledge**, symbolizing a collective commitment to act decisively in emergencies. The session was graced by **Dr. M. A. Geelani**, Hon'ble Director, GIPMER, whose presence and

ISA Delhi Activities for Public Awareness

encouragement underscored the institute's dedication to community health education and its alignment with ISA's vision.

Anaesthesiologists: From Clinical Experts to Public Educators

Anaesthesiologists traditionally serve as the unseen backbone of patient safety—experts in airway management, hemodynamic stability, and resuscitation. This unique expertise makes them ideally positioned to lead CPR initiatives, both within hospitals and in the public domain.

Historically, CPR training in teaching hospitals has focused inward—targeting healthcare professionals such as doctors, nurses, and paramedics. While this internal emphasis has maintained high clinical standards, it has also limited outreach. In the constant demands of critical care, **public training often took a back seat**, not out of neglect but due to sheer clinical workload.

The ISA Delhi Branch recognized this gap and responded with a **transformative intervention**—the institutionalization of **CPR Awareness Month**. This initiative has redefined the role of anaesthesiologists, urging them to step out of operating rooms and into community halls, classrooms, and public spaces. It has reminded us that the mission of anaesthesiology extends far beyond the perioperative period—it encompasses **public education, preventive action, and community empowerment**

Bridging the Gap: From Knowledge to Action

The GIPMER event exemplified how structured public training can bridge the gap between clinical expertise and societal benefit. Through simple demonstrations, participants learned the **chain of survival**, emphasizing early recognition, immediate CPR, and prompt emergency activation.

Many attendees admitted that while they had heard of CPR before, this was the first time they practiced it. Their feedback reflected both gratitude and newfound confidence:

“Now I know I can help if someone collapses—it's not as complicated as I thought.” “This training should be mandatory for everyone, not just medical people.”

Such responses affirm that CPR awareness initiatives are not merely educational—they are **transformative acts of empowerment**.

A Call to Sustain the Momentum

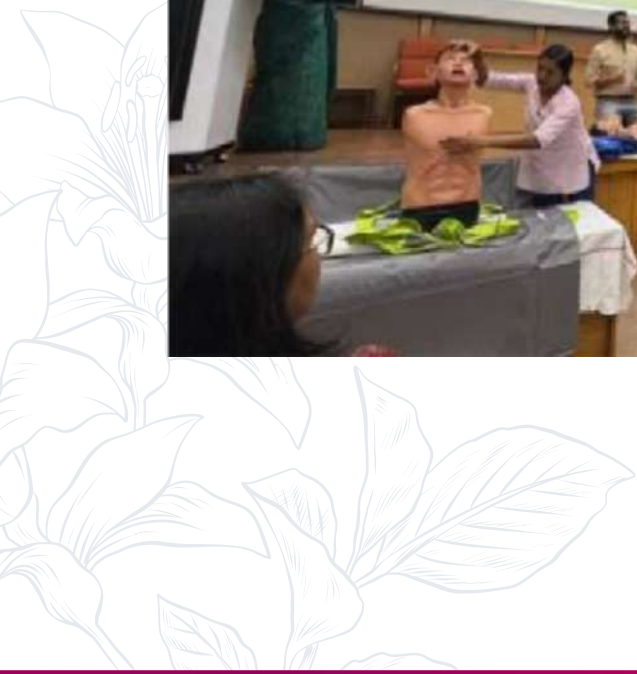
As GIPMER reflects on its participation in the ISA-led campaign, the experience has reinforced an essential truth: **saving lives is not limited to hospitals—it begins in homes, schools, workplaces, and streets**. By training even a small section of the public, we create ripple effects that multiply through families and communities, building a society where bystanders can become first responders.

The department acknowledges the catalytic role played by ISA Delhi Branch in organizing, motivating, and standardizing the CPR Awareness movement. Their leadership has created a replicable model for other states to emulate—a reminder that large-scale change begins with small, well-coordinated efforts.

Looking Ahead: Building a Community of Lifesavers

The success of the CPR Awareness session at GIPMER is not an endpoint but a beginning. The department envisions integrating **regular community outreach modules** into its annual calendar, collaborating with schools, civic bodies, and NGOs to extend the reach of CPR education. As anaesthesiologists, we recognize that our calling is not just to administer anesthesia or manage critical care, but to **teach the art of saving a life** to every citizen willing to learn. GIPMER's contribution this year was a **humble yet heartfelt step** in that direction. As we move forward, let us continue to strengthen this collaboration between institutions, professional societies, and the community—working together to ensure that no life is lost for want of a helping hand.

ISA Delhi Activities for Public Awareness



Featured Research

Reflecting upon the anaesthesia connection from patients to people; what do people know about us!

Authors: Dr Rohan Magoon¹ and Dr Anju Gupta²

1 ABVIMS & Dr RML Hospital and 2 AIIMS, New Delhi

The Specialty of anaesthesia is a scientific boon to humanity, with reach extending far beyond the perioperative services to the care of critically ill and the alleviation of pain, contributing right from the dawn of life to the provision of comfort at its' termination. That said, there is indeed a concurrent need to reflect upon the lag in the patients-to-peoples' knowledge about this holistic specialty of medicine, especially when acknowledging the presence of same despite the ever-growing role of anaesthesiologists in the modern-day context.

In this regard, a National survey from Korea, published in 2014, captivates attention. The former was specifically curated by the Korean Society of Anaesthesiologists, to comprehend the public awareness on the specialty of anaesthesiology and the corresponding role of anaesthesiologists wherein the allied questionnaire emanated from a thorough review of the literature in close relation to the local perspectives. The questionnaire, having gathered information on the participant characteristics (age, gender, occupation, education, and the existing anesthesia exposure), focused on the perceptions towards branch and the anaesthesiologists' contribution within and outside the operating theater, meanwhile simultaneously exploring the participants' desire for more comprehensive elaboration by anaesthesiologists and their opinions on the measures to heighten awareness about anesthesia and anaesthesiologists. Of note, this offline survey was conducted by a professional research organization, based in Seoul, Korea, to involve a cohort of 1000 individuals from the general public with no specific anesthetic or surgical tie-ups, selected proportionally from each province from the National population.

Of those involved in the survey, every other participant reported previous anesthetic-surgical experience, with others reporting no such prior experience. In the former group, 42%, 21%, 9%, and 17% of the participants replied having received general anaesthesia, spinal anaesthesia, ambulatory sedation, and other forms, respectively with rest of the 11% participants answering: "I don't know." As many as 25.2% i.e. one out of every four respondents failed to acknowledge that a physician specialized in anaesthesiology oversaw their surgery. Furthermore, the detailed results revealed that even respondents who knew the former had meagre knowledge of the roles and responsibilities of the anesthesiologist. Even in specific relation to the preoperative part played by the anaesthesiologists, 86.5% and 70.8% of the participants respectively, believed the surgeon decides upon the operability alongside the nil-per-oral requirement. As for the operative period, 46.2% of them replied the surgeon to be responsible for monitoring the vital signs, albeit this being one of the characteristic roles of anaesthesiologists, as perioperative physicians. Remarkably, one-third believed the nurse to be associated with this role in the survey. A considerable proportion of those surveyed also thought that the blood loss estimation and transfusions were handled by the surgeon (65.1%, 45.5%), to be closely followed by the nurse (24.3%, 42.7%). Of note, only 8.2% and 9.5% of the respondents selected anesthesiologist as being associated with these roles. Additionally, as many as 91.6% of the participants thought that the surgeon performed resuscitation during the surgical conduct. As for the role beyond the operating room, 6-28.7% were aware of the anaesthesiologists' work profile with half of them of the belief that the anaesthesiologist conducts local anesthesia for simple surgeries in the outpatient department, denoting that the public has limited comprehension of the actual functions of an anesthesiologist.

Delving into the reasons for these findings, the fact that the surgical counterpart explains the procedure, accounts for the patients' belief that the surgeon has a key role to play in most of the allied areas, including anaesthesia. At the same time, most of the patients are in direct contact with the nurses in face of any problems in the immediate recovery period. Meanwhile anaesthesiologists tend to visit the patients preoperatively itself, studies exist to project patient orientation in the pre-anesthetic visit as an important instrument to effectively publicize the professional image of the anesthesiologist and achieving the

Featured Research

Reflecting upon the anaesthesia connection from patients to people; what do people know about us!

Authors: Dr Rohan Magoon¹ and Dr Anju Gupta²
1ABVIMS & Dr RML Hospital and 2AIIMS, New Delhi

requisite patient recognition, only when 91% of the respondents in the survey expressed a desire for information regarding their anesthesia plan. Indeed, dedicated, and personalized care and attention including the postoperative visits has been revealed to be one of the pivotal factors affecting the overall perception of the anesthesiologist.

Meanwhile the present survey findings demonstrate 38.7% of the respondents to have experienced the roles of anaesthesiologists through mass media. Those surveyed, nonetheless, differed in their opinion regarding the best possible way to increase awareness about anesthesia and the anaesthesiologist depending, to an extent whether they had or did not have a prior experience with anesthesia. The experienced public happened to choose television > informative brochure > internet, but none of the experienced public chose television > internet > informative brochure. This goes on to reflect the paramount role of information about anaesthesia and the anaesthesiologist given by brochure during the primary admission for any surgical procedure. An elaborate explanation of anesthesiology and anesthesiologists ought to be lucidly communicated to the public, which can go a long way in helping to develop a deeper and nuanced comprehension over time. Simultaneously, a cohesive practice environment, is expected to strengthen the anesthesiologist-patient relationship, and alleviate the incidence of medical disputes.

Reduced public awareness about the specialty of anaesthesiology in patients and their family tends to predominantly attribute the perioperative success to the surgeons, in isolation, thereby overlooking the crucial contributions of the anaesthesiologists, leading to an attenuated sense of clinical achievement, with negative consequences on their professional confidence. The situation becomes difficult when anesthesiologists suffer from physical-psychological challenges, as was in the case of the coronavirus 2019 pandemic. This results in potential talent loss at the organizational level as well, hindering the overall development of branch, at large.

Practically a decade later in 2024, not much has changed. A nationwide survey in China that enrolled 1,001,279 participants (male, 40.7%) found that public knowledge of anesthesiologists' work and duties during surgery was quite low, with correct response rate ranging from 16.5% to 52.9%. The anesthesiologist responsibilities were often mistakenly attributed to surgeons or nurses. It was disappointing to note that more than half of participants still thought that, once the patient fell asleep after receiving anesthetics, the anesthesiologist could leave the operating room.

To conclude, whether it is for the index survey or the 2016 Indian survey or the cross-sectional survey of 1 million participants from China, they serve as important exemplars, that public awareness regarding anaesthesiology and anaesthesiologists remains inadequate. Dedicated public awareness websites, official twitter handles, and accounts, alongside the mobile applications can further publicize the milestones related to anaesthesiology and anaesthesiologists. These can be constructively worked upon to strengthen the prevailing anesthesia connections and awareness amongst people.

Suggested Reading:

1. Lee JJ, Lee NH, Park CM, Hong SJ, Kong MH, Lee KH, et al. Public awareness about the specialty of anesthesiology and the role of anesthesiologists: a national survey. *Korean J Anesthesiol.* 2014;66:12-17.
2. Bhandary A, Pallath NM, Ramakrishna M, Shetty SR. A survey on patients' awareness about anesthesia and anesthesiologist. *Indian Journal of Clinical Anaesthesia.* 2016;3:196-206.

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1ABVIMS & Dr RML Hospital and 2AIIMS, New Delhi

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In the Spotlight: Reaching out to Students and People

Interview with Dr Munisha Agarwal – Dean Maulana Azad Medical College

Past President ISA Delhi and Former Head of Department, Dept of Anesthesiology and Intensive Care, Maulana Azad Medical College, New Delhi

Interviewed by Dr Farah Husain, Maulana Azad Medical College & Lok Nayak Hospital

Q1. Ma'am you have placed a lot of importance on reaching out and connecting to students. Under your headship, department of anesthesia became one of the first departments at MAMC to include a mental health initiative through music therapy-based life skill classes as a part of PG curriculum. What made you start this initiative?



First Day in Office

The ecosystem in which the PGs join any department is very different now from what it used to be in the past and so is the mindset of the students. Their minds are nowadays fraught with a number of stressors – academic, social, financial, etc. and many of them face a cultural shock when they come to a new place requiring a lot of adjustments at every level. For the past few years, I now realize that there is large percentage of postgraduate students who suffer from mental health issues, and I wish their problems would have been detected earlier. Only as supervisors when we interact with them on a personal level, we come to know about these pre-existing issues.

“Mental health” is very close to my heart, and unless we help students solve these issues, we cannot expect them to study, excel and perform well. Anesthesia is a very stressful branch that needs a lot of expertise, precision, concentration and very fast reflexes. I don't mean to say it's not needed in other branches, but in our field emergency or crisis can happen within fraction of seconds and we need to have the ability to be troubleshoot timely. As expectations from this branch are high, the student must also be mentally strong and emotionally resilient, else they may not be able to cope with the pressures of this specialty. When we anaesthetize a patient from a state of complete wakefulness to plane 3, there is very thin line between plane 3 and plane 4 and this needs a lot of precision and concentration. Hence taking care of their mental health is very important and we need to train our students accordingly. Students may not open up about their existing mental health issues hence it is important to provide them with destressing techniques right in the first year of their residency. So, we started music therapy classes for the first years based on topics like happiness, resilience and stress management. These were conducted as part of their first-year academic curriculum and provided them with simple, easy to apply techniques since music is mostly enjoyed by everyone.

Q2. Now as the Dean of Maulana Azad Medical College, what is your most important objective for students studying at MAMC?

Since I took over as Dean, there were a lot many revelations for me. When I compare my student life to that of today's student; life appears to be very different. Today, I see many students from different parts of the country, belonging to different cultures, socio economic strata and upbringing coming to the national capital of the country to spend a large part of their youth. These students not only have academic, emotional, social and financial stressors but a lot of them also have body image issues and these issues start playing on their mind during the initial residency days. And it's very important that they get acclimatized to these stressors soon. They all come to MAMC from a very protective environment; leaving their families and friends, and suddenly have to deal with a lot of things independently in the medical college, which gets intimidating and overwhelming for them. Hence my objective for these young students is not just that they become medicos, but holistic individuals who will be able to cope with these pressures confidently. One cannot isolate these two developments, as these are their formative years when they step into the adult world. That is why, whenever an undergraduate joins MAMC, there is a 15-day foundation course where they are all taught and trained with topics related to their mental health and wellbeing.

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The academic stress is also on another level once you enter into medical college. I was a very bright student, a topper during my school days, but the first Anatomy stage exam on upper limb, where we had to read and understand Cunningham, I flunked that exam, got a 4 out of 10. Something that I can never forget. It came as a huge shock to me, and then my seniors and peers guided me and explained how studying for college is different from school study, the curriculum is vast, and we need to prioritize and be selective. It was very stressful time for me, but it became a lesson, to put in much more effort, a different ball game. I would like students to remember that even though it is normal to feel stressed about this change, please do not get intimidated. And most students believe in e-teaching and online academics, but believe me interacting with teachers during class room teaching is the best way to learn and absorb knowledge. I also feel that students should take part in their college extracurricular activities, dance, music, sports to build a strong peer support for themselves.

Q3. Coming to our specialty, why do you think people in India are still unaware about anesthesiology? And what made you decide on creating public awareness activities during your tenure as ISA Delhi President on topics like Pain and palliative care, Pre-anesthetic Checkup, CPR etc.

For a long time, general public has felt that there are only two kinds of doctors, the surgeons and the non-surgeons. But if you ask any patient who comes for any surgery, if he has any apprehensions, the most frequently asked question is “Will I have pain?”. They are not aware about the doctor who will take away the pain, or the importance of anesthesiologists during any surgery. People at large, are unaware about our speciality. The pandemic had a silver lining to that black cloud, by making the anaesthesiologists, a prominent figure as we worked at the frontline, when suddenly the word oxygen and ventilator became a household name. People associate us with ICU doctors, but our position in the operation theatre is still dominated by the surgeons. Many complicated surgeries that require preoperative optimisation, ERAS protocol, the anaesthesiologist has a very important role to play as perioperative physicians.

Q4. What steps can we take to highlight the importance of anesthesia to the society at large and how would you like to bring our speciality to the limelight?

In today's world, with the social media tools at large, we should periodically conduct public awareness lectures and activities in the college and premises of the hospital, where general public can gather to listen and ask questions. We are planning to have these in our auditorium, and anesthesia is not confined to just the theatre, we are now in remote locations, and resuscitation, pain management, palliative care. All Delhi hospitals should take up this initiative and plan to conduct public awareness activities regularly.

Q5 Why did you choose anesthesia as a speciality?

Anesthesia is almost 80% medicine. I had wanted to do MD Internal Medicine, and had joined the same in Jodhpur while I waited for my Delhi results, where I had given anesthesia as my second choice. When I finally got my seat in Delhi, my parents were most happy that I will get to stay with them. So, I joined my postgraduation in anesthesia in Delhi and I have never regretted that decision. As an anaesthetist, we can practically do so much more for the patient with the expertise and skills that we attain, airway management, resuscitation, optimisation, perioperative pain management, critical care etc.

In the spotlight: Anaesthesia Outreach When integrative research goes viral !!

Authors: Dr Farah Husain & Dr Sonia Wadhawan
Maulana Azad Medical College & Lok Nayak Hospital

Sometimes an overwhelming interest by the public towards scientific-research brings medicos face to face with media personnel who wish to understand the science and the impact it has created. However, in order to not sensationalize the evidence generated, it takes a lot of effort to explain ethics, protocol design, evidence generated and statistical significance in lay-man terminology to a non-medico. When our research paper on integrating music therapy with anesthesia was accepted by an international journal Music and Medicine, little did we expect that it would generate the kind of impact that it did. With over 14 articles (4 international) written about our study, the role of the anesthesiologist was once again in the international news. In these times of social media explosion, news channels like WION and BBC also generated videos and reels to reach out to the masses explaining how integrating music therapy with anesthesia could reduce anesthetic requirements, mitigate hemodynamic changes and the stress response (cortisol levels) of surgery. Integrative medicine is still in the nascent stages in India and an open mindedness to exploring new frontiers is required to generate research-based evidence. With this research going viral and our news journey, we realized the importance of 'the anesthesia connection: moving from patients towards people'.



Case of the month

The Unsung Pillar of Surgery: Anaesthesia in microvascular hand reimplantation Surgery - A Narrative Recap

Authors: Dr Anupama Gill Sharma, Dr Jyoti Gupta, Dr Sonal Yadav
ABVIMS & Dr RML Hospital

Hand reimplantation is one of the most complex microsurgical emergencies, demanding not only surgical expertise but also an equally coordinated anaesthetic strategy. For the anaesthesiologist, such cases test clinical skill, endurance, and the ability to make rapid, high-stake decisions in emotionally charged situations.

The Call That Changes the Night

During a late-night emergency duty, a young man arrived with a mangled, severed right hand after an accident involving a wood-cutting machine. The hand completely severed from the wrist & transported in a polythene bag with ice by the family. Anaesthesiologist's first reaction admittedly human, was, "This is going to be a long night in OT."

But the moment the patient presented in OT complex — pale, exhausted, holding onto consciousness with surprising calm with his distraught newlywed wife, the shift was immediate. The case was no longer about an 11-hour emergency OT. It was about the life, livelihood, and identity this man would lose if that hand was not salvaged.

Anaesthesiology often stands at the intersection of medicine and humanity. In that moment, clinical hesitation dissolved into clarity:

"We cannot delay it. This hand needs to be saved."

As with most devastating trauma, investigations were incomplete. The team was mobilized quickly — securing venous access, sending stat labs, arranging blood, warming the patient, and coordinating with the ICU for anticipated postoperative monitoring and ventilation.

Add to this another challenge — a full stomach. Given the emergency and high aspiration risk, a plan for General Anaesthesia with Rapid Sequence Induction (RSI) was made. RSI was performed smoothly, and a long procedure began.

Key anaesthetic considerations included, microsurgery requirements i.e. a bloodless field with stable haemodynamics, temperature management, analgesia for an ultra-long surgery and Fluid and blood management. Fluids were titrated, closely, guided by vitals, urine output, and blood loss.

The surgeons, residents, nurses, and anaesthesia team working as a single unit, all hands in hand to save a person's hand. The surgery continued for 11 hours, without any major complications.

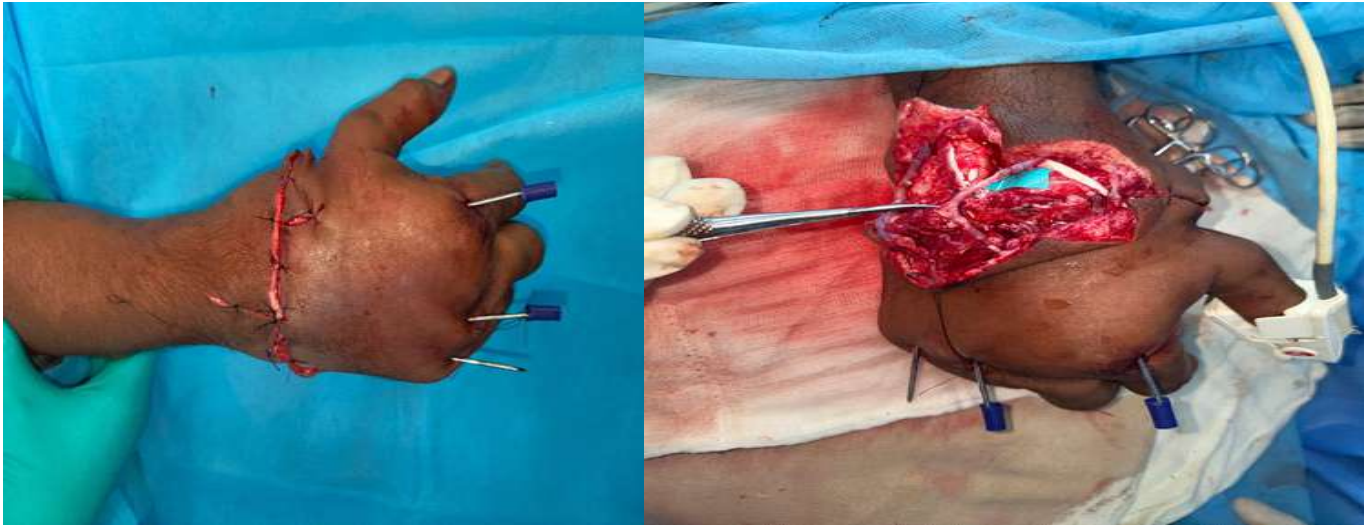


The traumatic amputated stump of hand

Case of the month

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Microvascular surgical repair of the hand

Postoperative Care

The patient was shifted intubated to the post op ICU for monitoring after a prolonged surgery & anaesthesia. Adequate analgesia with multimodal techniques including regional block was ensured postoperatively without causing any excessive vasodilation or hypotension which could have precipitated vasospasm disrupting microvascular flow.

The next day, he was extubated uneventfully.

To everyone's' dismay, he required surgical re-exploration on third day of postoperative period. And once again, the anaesthesiologist was engaged in saving the patients hand with the same zeal. But this time, the wife was not trembling or crying, she was hopeful. She held anaesthetist hand and spoke softly:

“Madamji... jaise pichli baar aapne inke haath ka dhyaan rakha tha... is baar bhi rakhiye.”

That one sentence encapsulated the essence of anaesthesia — invisible work, visible trust.



The hand after surgical repair

Case of the month

The Unsung Pillar of Surgery: Anaesthesia in microvascular hand reimplantation Surgery - A Narrative Recap

Authors: Dr Anupama Gill Sharma, Dr Jyoti Gupta, Dr Sonal Yadav
ABVIMS & Dr RML Hospital

24-year-old factory worker undergoes successful hand reimplantation at Delhi's Dr. RML Hospital

TOI City Desk / TIMESOFINDIA.COM / Oct 4, 2024, 08:21 IST

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A 24-year-old factory worker had his severed hand successfully reimplanted at RML Hospital, New Delhi, after nine-hour surgery. The collaborative effort of plastic and orthopaedic surgeons, along with anaesthesia and support staff, ensured the operation's success, emphasizing timely medical intervention in such emergencies



The success of the surgery was made possible through coordinated efforts involving OT nursing and paramedical staff,...

NEW DELHI: A 24-year-old factory worker from Bahadurgarh, Haryana, has undergone successful hand reimplantation surgery at Ram Manohar Lohia (RML) Hospital in New Delhi.

The worker's right hand was completely severed by a laser woodcutting machine, and he was rushed to the hospital on 28th September. A skilled team of plastic and orthopaedic surgeons worked for nine hours to save his hand, according to hospital officials.

Anaesthesia in Re-exploration: Same Challenges, Higher Stakes

Re-exploration carries additional complexities, oedema at the surgical site, uncertain vascular patency, risk of thrombosis, altered fluid-electrolyte balance and most importantly patient's psychological fatigue. Yet, the procedure proceeded safely, and the limb was salvaged.

Reflections-

A hand reimplantation is never "just another emergency surgery." For anaesthesiologists, it is-

1. Balancing perfusion, oxygenation, temperature, fluids, and prolonged anaesthesia.
2. A technical challenge: RSI, long-term ventilation planning, invasive monitoring, and endurance.
3. Surgeons and anaesthesiologists coordination to avoid exaggerated hypotensive episodes that can disrupt the delicate micro-anastomoses
4. Witnessing the patient's and family's vulnerability, and realizing the profound impact of our decisions.
5. Teamwork as no single specialty can save a limb; it takes coordinated precision from everyone — surgeons, anaesthesia, nurses, technicians, ICU staff.

Conclusion

In trauma anaesthesia, decisions are made under pressure, emotions run high, and outcomes can have lifelong consequences. This case reminds us that our role extends far beyond the OT table.

It is about:

A hand injured.

A hand anaesthetized.

A hand surgically revived.

A hand held in reassurance.

A hand placed in trust.

Sometimes, medicine is simply this —

all hands coming together for one hand.

Beyond the OT: Why Anaesthesiologists Are Quietly Sneaking into Side-Hustle Stardom

Dr. Santvana Kohli in conversation with Dr Vishal Bajaj
VMMC & Safdarjang Hospital

Anaesthesiologists are frequently regarded as the vigilant yet understated protectors of the operating theatre, delivering critical care discreetly behind the mask. Yet for all the dignity and drama of holding someone's airway (and sometimes the surgeon's sanity) together, the specialty is assumed to be largely surgeon-dependent. No surgeon, no case; no case, no anaesthesia; no anaesthesia... well, there's always pre-operative optimization, but you can only adjust so many antihypertensives before existential questions arise.

It is no surprise, then, that more anaesthesiologists are peeking outside the OT doors and discovering a world where they can earn, express, and experiment—without waiting for the surgeon to finish “just five more minutes.”

Why the shift?

Because anaesthesiologists, despite being the steadiest hands in the hospital, also have a pulse for opportunity. With increasing workload, capped government salaries, and the perpetual pressure to be “on call, but not too far,” many are turning to non-medical ventures—some for financial wellness, others to showcase dormant talents, and some simply because writing Instagram reels about propofol is oddly therapeutic.

1. Scrubs Business: Time to Switch the Stitch

Who better than anaesthesiologists to design scrubs that don't ride up, fall down, cling wrong, or suffocate your soul? Many are launching their own scrub lines—comfortable, stylish, and with enough pockets to hide an entire set of IV cannulas and the emotional burden of being blamed for last-minute cancellations. It's a natural extension of OT life, and honestly, if surgeons can have personalised equipment, we can surely have scrubs that don't make us look like tired pistachios.

2. Mutual Funds & Finance: Switching from Blood Pressure to Market Pressure

A surprising number of anaesthesiologists have become the unofficial financial advisors in their social circles. After all, if you can calculate drug doses for a 6-kg child under pressure, SIP planning is practically meditation. Some are even getting certified, advising colleagues, and entering financial-wellness content creation—because apparently, explaining equity vs debt funds is far less stressful than an unexpected Mallampati IV.

3. Social Media Influencing: Because Someone Needs to Correct the Memes

Let's face it—OT humour online is dominated by surgeons. Anaesthesiologists entering influencer space are not only balancing the narrative, but doing it with style. Whether it's educational content, humorous reels (“How surgeons think anaesthesia works in 3 seconds”), or lifestyle posts, showcasing that anaesthesiologists do have a life outside the OT—they're finally claiming the spotlight they never asked for, but definitely deserve.

4. Creative Pursuits: Writing, Art, Podcasts, You Name It

Years of talking patients through spinal anaesthesia has given anaesthesiologists superb storytelling skills, while countless hours of relative OT silence (except the beeping) have given rise to painters, writers, musicians, and podcasters. Creativity, it seems, thrives between cases.

Beyond the OT: Why Anaesthesiologists Are Quietly Sneaking into Side-Hustle Stardom

Dr. Santvana Kohli in conversation with Dr Vishal Bajaj
VMHC & Safdarjang Hospital



From Navy-Blue Scrubs to a Business Dream: Dr Vishal Bajaj's Story

In 2013, while I was pursuing my MD in Anaesthesia in Patiala, my life revolved around OTs, night calls, and the eternal struggle of trying to drink chai before it turned cold—an impossible feat. Those were the days when scrubs were nothing more than functional cloth sacks: loose enough to house a family of squirrels, anonymous enough that no one could tell if you were a doctor, a medical student, or a lost visitor who wandered into the OT by mistake. And, of course, they were always that same faded ceiling-blue, as if every department in the hospital had collectively agreed that style was a sign of weakness.

One day, out of sheer frustration—and perhaps a moment of rebellion—I decided I wanted something different. Not glamorous, not dramatic, not something that would violate the OT infection control policy... just something that fit me like it was meant for a human being. So, I did the unthinkable: I got some scrubs stitched - in a deep, dignified navy blue. Custom-fit. Comfortable. Not sliding off one shoulder. Not billowing like a parachute. Just... normal. And very “me.”

I wasn't trying to make a statement; I just wanted to feel a little more put-together while navigating the chaos of residency. Looking back, I didn't realize I was about to commit a minor fashion revolution within the hospital premises. The day I wore it, something strange happened. People noticed!

In the corridors, residents gave second glances—rare in anaesthesia, where the only thing people truly look at is the monitor alarm. Surgeons, who typically only notice two things (their scalpel and their schedule), paused long enough to ask, “New scrubs?” Nurses smiled approvingly, which I knew was a very high compliment. Even the usually stoic OT technicians looked mildly impressed, and trust me, if you've ever tried making OT technicians react, you know this is practically a standing ovation. Soon enough, questions started trickling in.

Beyond the OT: Why Anaesthesiologists Are Quietly Sneaking into Side-Hustle Stardom

Dr. Santvana Kohli in conversation with Dr Vishal Bajaj
VMMC & Safdarjang Hospital

“Where did you get this stitched?”

“Is the fabric comfortable?”

“Paaji, navy blue looks nice—can I get one too?”

The navy-blue scrubs became a small but persistent conversation starter, floating between OTs and corridors like a gentle rumour. And every time someone asked, something stirred inside me—not vanity, not pride, but a quiet whisper of possibility.

You see, I grew up in a business family. I've watched people sense opportunity the way some people can smell sambhar from two floors away. Even though I had chosen medicine professionally, the entrepreneurial instinct was somewhere in my DNA, waiting for a moment to stretch its legs. At first, I brushed it off. I was a resident, constantly tired, always hungry, and mostly surviving on caffeine. Starting something new felt... ambitious. But the idea didn't go away. It would tap me on the shoulder between cases. It would tease me during night duties. It would spark again every time someone asked, “Can I get one stitched too?”

I started imagining things—scrubs in different colours, sizes that actually made sense, fabrics that didn't feel like sandpaper, designs that acknowledged that doctors are allowed (in theory) to feel good while working. I wondered why we all accepted such uninspired clothing when we spent more hours in scrubs than in our actual clothes. Why shouldn't scrubs be stylish? Comfortable? Personal? The more I thought about it, the more it felt like a seed worth planting.

So, somewhere between a long night shift and an early morning OT list, the idea started shaping itself—messy at first, like an ECG when the leads are loose, but clearer each day. What began as a single stitched set of scrubs quietly evolved into something bigger: a brand, a thought, a movement even. And that's how Febris was born—not with a business plan, not with market research, not with venture capital, but with one slightly annoyed resident who just wanted better-fitted scrubs.

Of course, the journey wasn't instantly glamorous. No fairy lights, no dramatic soundtrack. Just a lot of trial and error. I learnt the difference between good fabric and fabric that becomes transparent under OT lights. I discovered that doctors want pockets everywhere—in the front, at the side, on the sleeve, probably even on the back if you let them. I realized colour preferences are very personal and sometimes surprisingly emotional. (“No maroon. My ex liked maroon.”)

Slowly, Febris grew—one stitch, one set of scrubs, one curious colleague at a time. It wasn't just about clothing; it became about identity. I also discovered something unexpected: this little venture brought me joy. Creative joy. Entrepreneurial joy. The kind of joy that makes you see life beyond duty rosters. And it made me realize that as doctors, we don't have to be confined to just one lane. We are allowed to dream, to create, to build—outside the hospital walls too. Today, when I look back, I laugh at how something so small, so unintentional, became something meaningful. Febris didn't start with ambition. It started with discomfort. And maybe that's how all good beginnings are—born from a tiny dissatisfaction and a spark of imagination.

So, here's to the navy-blue scrubs that changed my life. Here's to the residents who asked questions. Here's to the business instinct that woke up inside me. And here's to every doctor who dares to do something beyond the expected. Sometimes, you don't chase the idea. Sometimes, the idea finds you—in this case, hanging quietly from a tailor's hanger.

Creative Corner
The Anaesthesia Connection: Word Cloud

Author: Dr. Nitin Choudhary
Assistant Professor, AIIMS, Delhi

leadership
crisis oxygenation
safety pharmacology precision
sedation management analgesia
empathy communication ultrasound
intubation collaboration
monitoring patient-centred technology
anaesthesia
connection
airway competence recovery
simulation perioperative resilience
professionalism
regional innovation critical
ventilation
teamwork
care



Creative Corner

The 5Ms of Modern-day Anaesthesia: Connecting to Evolve and Evolving to Connect!

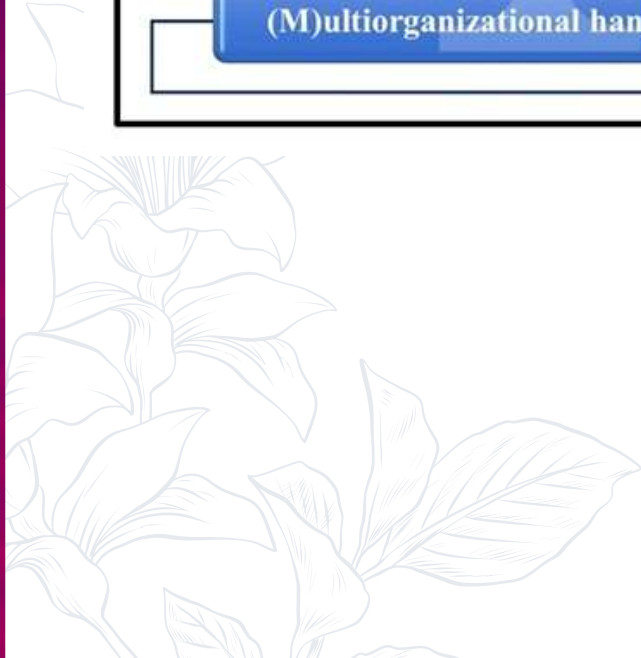
Author: Rohan Magoon

Department of Cardiac Anaesthesia, ABVIMS & Dr RML Hospital, New Delhi, INDIA.

Modern-day anaesthesia has indeed come a long way, driven by the cutting-edge technological advancements and the concurrent refinements in perioperative practice.

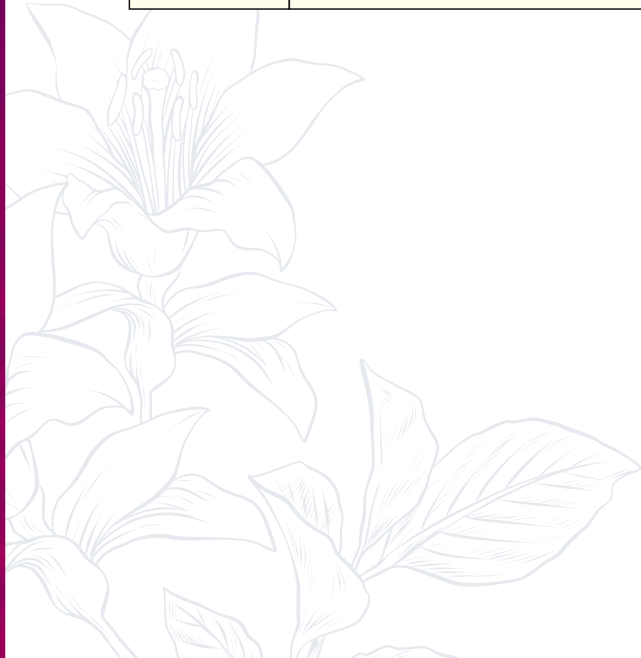
The 5Ms presented in the central illustration signify the **Myriad** fronts at which approaches have been evolving in our discipline, only to be catalyzed by the **Maturing** integration of artificial intelligence and **Machine learning Models**. Alongside the improvements in delivering safe anaesthesia-analgesia to our patients, an increasing recognition and the proposition of the **Mitigation** steps to **Minimize** the carbon footprint of our practice, captivates particular attention.

Moving ahead in the ever-changing times, **More** power to us, as anaesthesiologists, to keep thriving in our noble profession of care and compassion, being simultaneously **Mindful** of our responsibility towards the **Mother Nature**! The 5 Ms, thus, not just help build stronger connections with the technology, technique, and transformation by bridging some of the crucial gaps, but also aid us to contribute **Meaningfully** to the community, at large.



ISA DELHI CME cum clinical meeting Calendar for 2025-2026

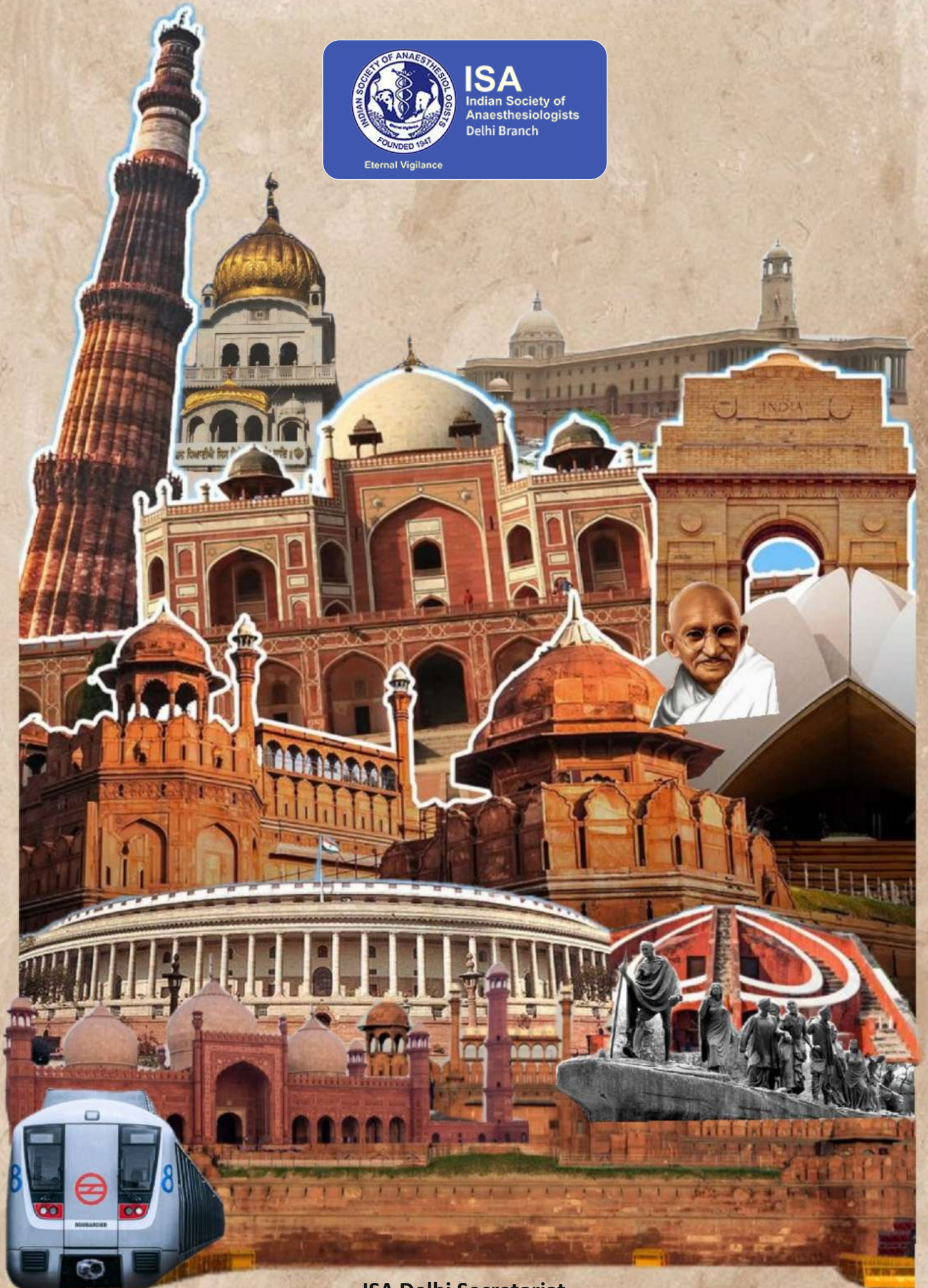
S.No	Month	Institution / Venue
1.	December, 2025	CK Birla Hospital
2.	January, 2026	Dr. Baba Saheb Ambedkar Hospital
3.	February, 2026	MAMC
4.	March, 2026	VMMC & Safdarjung Hospital
5.	April, 2026	UCMS and GTB Hospital
6.	May, 2026	ESI group of hospitals
7.	June, 2026	Hindu Rao Hospital
8.	July, 2025	LHMC
9.	August, 2026	AIIMS Delhi





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Delhi Branch

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