

14th Anniversary Commemorative Issue | Jan 2015



manohriday

THE JOURNAL OF SRI SATHYA SAI INSTITUTE OF HIGHER MEDICAL SCIENCES



*D*ear readers,

As we commemorate the 14th year of the hospital, we realize that no numbers do justice to the millions that have been touched. Patients continue to stream in through our doors, nurses and clinicians continue to labour long hours to bring them a smile, and an extended team of volunteers and support staff continue to live His message of service.

This issue chronicles all that we are proud of, and we bow in humility to our Master, who has made this possible this year. The hospital has scaled greater heights in academics and clinical expertise, continues to draw professionals from around the world, and inspires millions through its message of health beyond socio-economic barriers.



His message lives on in all of us, and it is our joy to share this with you. We present to you, our annual commemorative issue of ManoHriday. It has been a treat to put these articles together, and we hope you will enjoy it as much as we have enjoyed putting it together for you.

– The Editors

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On Gurupurnima Day in July 2011, when our beloved Bhagawan's Samadhi was unveiled, I decided I would not be able to live in Puttaparthi any longer. It was Swami's boundless love that had responded to the deep yearning in my heart and brought me to His hospital in Puttaparthi in 2008. Now the Samadhi felt an inadequate source to heal my aching heart.

Why do I feel so sad today?

I lost physical contact with you this day

My heart stops beating

Eyes are forever weeping

Oh! Where is my Master so merciful & giving?

There is no reason for me to be living.

I contemplated returning to Delhi – my home of over seventy years – to grieve and reminisce, to cherish quietly what had been given to me. But when I was asked to take charge as the Director of SSSIHMS, Whitefield instead, it came as a mixed blessing. Swami says, "Much is expected of those to whom much is given", and with these words ringing in my heart, I arrived at Whitefield. Little did I know then that Swami had brought me here to heal me. Here, I found myself among several brothers and sisters who all shared my irrevocable loss, and suddenly, my heart seemed light. All of us had been touched by Him, and now we were united by a single thought - "How best can I show my love and gratitude to my God and Master?" I was no longer alone. I felt His Living, Loving Presence in my heart and from now on, I just had to shut my eyes and touch my heart for Darshan, Sparshan and Sambhashan.

Suddenly I hear Him saying that I am wrong,

To complete His mission is the reason that is strong.

I was planning to leave with sadness,

He desired that I serve with madness;

There is no time for lament and despair,

Showering His Grace on the Director's chair.

"Is the Hospital working OK?"

Ever since the Mahasamadhi, my staff and I are frequently asked, by both anxious devotees and curious non-devotees, whether the work at the hospital is being sustained. Swami's tiny but towering physical Presence brought confidence and reassurance and quite naturally, this concern surfaces about His Institutions after April 24th, 2011. To all these queries, I have a single reply. In pushing us to let go of His physical form over three years ago, He has only engraved His message of service deeper into our hearts. While we all deeply miss His constant



physical guidance, yet, His Life and Teachings speak to us, bringing answers and strength.

At the inauguration of our hospital in January 2001, Swami blessed the Institution and said, "This hospital will live for hundreds of years." Swami's Word and Sankalpa brook no doubt. And so it has been at SSSIHMS. The hospital continues to scale greater heights and symbolizes light and hope for thousands. Over the next few passages, I hope to share my insights with you on how Swami's hospital remains a unique, shining example of medical service in the world today.

A Rising Graph

The unaffordable costs of cardiac and neurologic treatment, both requiring super-speciality level of care, make these diseases untreatable for most Indian families. In the infant years of SSSIHMS, Swami would often enquire how many patients had been treated in a given period. We knew that it was never about the statistics really. To Swami, each patient who went back home healed, meant a family that would resume living a normal life. The following numbers reflect the continuing commitment of SSSIHMS to making a difference.

	Patients from January 2001 to March 2011	Average per annum	Patients from April 2011 to December 2014	Average per annum	% increase in per annum work	Commercial Value of Work Done so far
Out Patients						
Cardiac Sciences	4,68,941	45,750	1,87,445	47,931	5%	Rs. 32,81,93,000
Neuro Sciences	2,37,702	23,190	1,24,268	31,464	35%	Rs. 18,09,85,000
Surgeries and Cath Procedures						
Cardiology	30,075	2,934	15,583	4,013	37%	Rs. 228,29,00,000
Cardiac Surgery	11,660	1,138	4,895	1,311	15%	Rs. 165,55,00,000
Neurosurgery	13,239	1,302	7,218	1,846	41%	Rs. 204,57,00,000
Total Commercial Value of Work Done						Rs. 649,32,78,000

As may be observed from the above, there has been an increase in the number of patients served across all departments. The 41% increase in neurosurgery and 37% increase in Cardiology diagnostic and interventional procedures highlight the growing pace of work at SSSIHMS. Commercial value of work done so far at SSSIHMS, Whitefield in the last 14 years amounts to Rs.649 crore.

Harbinger of Health and Hope

Swami tirelessly worked to bring cheer to the ones who had become despondent, and our patients are often those who have little to look forward to. To many of them, life, that is already a day-to-day economic struggle, becomes unbearably hard when poor health arrives as an unwelcome guest. Take for example the new-born child, who should have brought happiness to the family, arrives with a hole in the heart. A growing child whose developments don't match milestones is diagnosed with neurological disorders. A young mother discovers that the chronic fatigue she has been suffering is because of a narrowed heart valve. Middle-aged fathers, suddenly put down by coronary disease or spinal degeneration, are unable to provide for their families. To each of these people, SSSIHMS is the single candle in the dark. A glimpse into the demographic profile of our patients reveals this. More than 70% of our patients lie below the global standard for poverty, earning less than \$2 a day (Rs.36,000/annum). More than 67% come from other states in the country, many travelling for as much as 3-4 days to get to the hospital. The hospital clearly is a lighthouse in a dark world for the indigent.

Patient First

Whenever asked how far we should extend ourselves for our patients, Swami would ask us to "Do everything that is necessary". The cost of the treatment was never a factor in His decision, if the consequence of the treatment was a healthy patient. Swami constantly directed us to put the "Patient first, Institution next and Individual (meaning, ourselves) last". And it is this lofty principle that inspires us to always do the best we can. Ensuring that the patients we treat return to health when they leave our portals is our primary goal.

At SSSIHMS, advanced techniques are introduced so that our patients benefit from scientific progress. Thus, children with holes in their hearts, who required to under go painful open-heart surgeries, now get these holes closed using catheters through a small puncture in the thigh. Even where patients are compelled to undergo cardiac surgeries, minimally invasive procedures are performed where feasible. Patients needing complicated brain surgeries now "stay awake" during certain surgeries, and adenosine-induced cardiac standstill is adopted for complex aneurysms. These sophisticated techniques, offering quicker recoveries, better results and shorter hospital stays, are employed by very few centres in our country.



Millions of dollars have also been spent over the past three years to acquire state-of-the-art medical investigation equipment. Our hospital now has a high-end 1.5 Tesla MRI and a 128-slice CT Scanner to detect disease faster and more accurately. We are among the few in the country to have a modern biplane cath lab with fractional flow reserve and intra vascular ultrasound capabilities that allow us to image the heart and brain with greater precision. Our cardiac investigations have been enhanced by top-of-the-line electrophysiology equipment used to diagnose faults in the electrical conduction of the heart and 4D cardiac ultrasound machines. Our Lab set up has been boosted by the automated bacterial culture analyser & antibiotic sensitivity testing analyser and the chemiluminescence analyser, which enable speedier diagnosis. In neurosurgery, a high-end neuro navigation system aids surgeons with advanced visualization, localizing small tumors, and minimizes the extent of incision. Advanced operating microscopes provide fluorescence imaging intra-operatively, showcasing the efficacy of clipping aneurysms during high-risk surgeries.

Our dedication to high quality of care can be gauged by several indicators. One of these is our low infection rate of less than 2%, which is comparable to the best hospitals in the US, and has been achieved by setting protocols and implementing proactive systems aimed at preventing infection.

Also, SSSIHMS is a pioneer in the country in offering holistic medical care. Swami always taught that true healing encompasses the body, mind and spirit. SAI Counselling, a special program inspired by Swami and put together by a dedicated team of counsellors enables the hospital to be responsive to each patient's personal circumstances, looking beyond clinical parameters and medical files. Counsellors teach patients simple, universal techniques in breathing and relaxation to help them cope and heal themselves. The counselling team has also begun to share this model of healing with other institutions in India and abroad, demonstrating the role of a more integrated approach to medicine.

Academic Excellence

Another equally significant aspect of medical excellence is peer reviews by the medical fraternity, indicated by academic and research success. This reflects that we are sharpening our saw and remaining current in a field that is constantly evolving. SSSIHMS has received consistent recognition for excellence in post-graduate medical training, with our students receiving Gold medals at the national level in the DNB Program in Cardiology and Cardiac Surgery. Our nursing and paramedical students too, have been obtaining the highest ranks at the Rajiv Gandhi University of Health Sciences.

The clinical and support departments are academically active. The Neurosurgery team has over 100 publications in indexed national and international journals. Our doctors participate actively in national and international forums and have

received innumerable awards, many of which have given them opportunities to get trained at leading medical universities in the US, UK, and Europe. We have also collaborated with a number of international institutions and have conducted several conferences and workshops. At a conference held by our Hospital Management Information Systems department, we were commended for the seamless integration of IT Solutions in healthcare.

This pursuit of academic excellence is never an end in itself, but is led by the keen desire of every staff member to do the best they can for each patient we serve.

Inspired Workers

Swami always emphasized that people are truly what make up an organization, not just equipment or infrastructure. The divine magnet that He was, He also drew to Himself some of the most distinguished and reputed medical professionals to participate in His mission. Both Dr. A N Safaya and Dr. A S Hegde, the previous Directors of this Institution, and Dr. Choudary Voleti, the current director of our sister Institution at Prasanthigram, are fine examples of such professionals. Dr. Safaya held a senior administrative role in the All India Institute of Medical Sciences (AIIMS), the premier medical institution in our country; Dr. Hegde is considered among the finest neurosurgeons in Asia. All it took was a word from Swami, and they readily gave up their erstwhile positions to serve Him. To Swami's devotees, all other achievements and successes pale into insignificance when compared with the opportunity to contribute to Swami's Mission in any possible capacity. This has been my experience too – all my accomplishments in senior administrative roles in national and international organizations, including being the Executive Director of the National Board of Examinations, seem a mere training ground for being a Sevak for Swami. I continue to believe that I am the first Sevak of this Institution.

I am also fortunate to have a number of highly accomplished physicians heading and working in all the departments. Each one of these individuals, having forsaken the rewards of a corporate career, has chosen to work with single-minded determination to further Swami's medical mission. We have a number of distinguished faculty from around the world visiting us periodically. In the last one year, we have had teams from Australia, Canada, USA, UK and Sweden visit and work hand-in-hand with our specialists to provide the best possible care to all our patients. Each one of them travels thousands of miles to give their best to our patients and often, they leave wistfully for their stay here lights a spark setting them off on their own inner journey.

Our staff never ceases to overwhelm me with their commitment as they come together to make this an exquisite embodiment of Love in Action. Supported by spirited Seva Dal volunteers, no challenge seems impossible, no task too small if it brings the patient a smile.

Our patients are our Swami now

On January 19, 2014, when we celebrated our Anniversary and gathered at our Master's Feet in Parthi, one of our young patients, Shreya, came along with us. She offered a flower to our Lord – a flower that completed the circle of love that Swami had initiated by setting up His Medical Mission. She was treated here for a hole in her heart and now wants to return as a doctor. A receiver of care has just become a potential care-giver.

Whenever I look back at the disquiet I experienced in September 2011, the words of Haji Allah Baksh, a 57 year-old patient from Uttar Pradesh, bring me peace and strength. Visibly emotional as he was being discharged after a successful bypass surgery and a valve replacement, he remarked, "Mein teen baar Haj pe gaya, lekin meine Khuda ko yahan paayaa." *I went on a pilgrimage thrice, but it was here - in SSSIHMS - that I found God.*

The poet in me can't help but reaffirm our commitment to Him with these words:

*Let us all pray for His love and grace,
And brave all challenges with a smiling face,
Our devotion will fail Him never,
His Mission will go on forever.*

(This article was originally published in the special issue of Sanathana Sarathi released in November, 2014. The statistics in the article have been updated till 31-Dec-2014.)





SSSIHMS

The foundation stone for the Sri Sathya Sai Institute of Higher Medical Sciences was laid on Sep 2, 1999 and it was inaugurated on Jan 19, 2001. It is a remarkable feat of engineering that within 16 months, a super-speciality hospital of this size could be conceived and executed.

We present Mano Hriday's nostalgic conversations with some of them... architects, medical planner and the project engineer.

Mano Hriday: Can you please share how you came to Swami?

Rajan Sood: I was born, brought up, and educated in Delhi. It was in Delhi in 1972, that I saw Swami for the first time in Delhi. I was a student of architecture at the time. He spoke to me for the first time in '73, when I enrolled in the Seva Dal. In '74, I was allowed to attend the Summer Course in Brindavan. That is where the serious interaction with Swami started. From then on, He had been guiding me in my career as to which offices to work at and so on. So before the hospital project came by, I had been with Swami physically for 25 years.

MH: Did you do any projects for Bhagawan before the Hospital project?

RS: The first project I did for Swami was a girls' school which happened in '77-78. I designed it and Swami approved the drawings Himself before construction. In 1999, I designed a boys' school in Rishikesh for the Delhi-UP Trust.

MH: How did the Hospital project come about?

RS: It was during the boys' school project, that on one occasion, when I went to Puttaparthi, I carried with me the school drawings to show them to Swami. Swami called me in and started talking about the Bengaluru hospital. I thought it

was only a news item He was giving me. He spoke about it quite a bit and, at that time, only my wife and I were sitting at His feet.

Swami used to speak to me in Hindi or English or a mix of the two. He said, "Bengaluru mein hospital banaata hai". "Idhar Puttaparthi mein banaaya ... Puttaparthi village hai." (*I am building a hospital in Bengaluru; I have already built one in Puttaparthi, a village*). Then he added, "...Bengaluru...city hai. So, grand hospital banaata hai." (*Bengaluru...it is a city, so I am building a grand hospital*).

He then put the drawings of Rishikesh project aside and started to talk about what would happen in that hospital like cardiac surgeries and so on and so forth. Then he suddenly patted me on the cheek and said, "Design karo" (*You design it*).

Now, in architecture everybody has a specialisation, and mine was far from hospitals or large buildings! We were focused on high-end homes. My disbelief must have shown on my face, and he just nudged me with his foot and he said, "Kar sakta hai. Karo." (*You can do it; do it*).

He started explaining further, "Dekho, Bengaluru kitna bada city hai. Bahut bada hospital banata hai. Usko look do Buckingham Palace jaisa." (*Bengaluru is a*



large city, so I am building a large hospital. Give it a look like the Buckingham Palace) These were His words.

I was pretty foxed, but came back to Delhi, and started preparing the designs. In my next visit to Swami, which was within a month, I carried those drawings with me.

MH: *Did he give any other specific instructions during that interview?*

RS: The only instruction was 'Buckingham Palace'. At the time Swami used to live in the Poornachandra Auditorium. When I prepared a new set of drawings and took them to Swami, he called me to His room. I showed Him all the drawings and after He had seen them all, He said they are nice and He said, "Come."

He took me behind His room. I think this was the backstage of the auditorium and that place was full of models of the Bengaluru hospital! They were designs in three-dimensions, made by some of the finest, internationally known architects, all lying there. I don't even know how many there were! The very sight stunned me.

I felt very funny that I had come with these little drawings and here, people of international acclaim, have worked on the hospital design.



Swami's purpose of taking me in was to show me the number of people who would have given anything to do that project. He then said something very beautiful to me. He said, "Dekho, Kitna architect design banaake bheja. But I chose you." (See how many architects have sent me designs, but I chose you) He had His own way of overwhelming you with His words, His love, His affection.

MH: *And how did the designs begin to take shape?*

RS: Since I was based in Delhi, it was not possible for me to be in Bengaluru all through. So, the basic plan, designed by an architect in Bengaluru, in consultation with the doctors, medical planners etc. was sent to me in two-dimensions.

Keeping Swami's brief in mind, I came back with the hospital design as it is made today. I took those drawings to Swami; Swami called me to Poornachandra to look at those drawings. At that time, the central dome, wasn't as tall as it is now. So he said, "Dekho, 75th birthday pe inaugurate karta hai. So 75-feet high dome." (The Hospital would be inaugurated for the 75th Birthday, so let it have a 75-feet high dome).

I took a taxi, came to Bengaluru, got the drawings modified as Swami wanted and took them back to him. He looked at them



Before the construction began in mid 1999



and said, “Ye barabar hai. Shuru karo” (*This is fine; start the work*).

So I came back to Delhi and we started working. The whole office was at it. Barely 15 days later, I got a call from a gentleman from the Trust, and he said, “Rajan, are you ready?” I said, “No, it’s going to take me quite some time.” And the gentleman says, “I have a very strong feeling that Swami is going to ask for you in a day or two.” I said, “I am definite. I can’t be ready in that time.”

As the elevations were elaborate, making a drawing of everything and the detailing was taking a lot of time. I think it was the very next day that the gentleman called me and said, “Swami is asking for you. Please come with the designs.” And much to my surprise, within that day, it transpired that – we didn’t work overtime, we did nothing – all the drawings were ready! I packed and the very next day I left for Bengaluru.

Swami was in Brindavan at that time. The L&T team was already there. Swami came out and came to where I was sitting and asked me, “Kabhi aaya?” (*When did you come?*) I said, “Swami, I came last evening.”

“Drawing laaya?” (*Did you bring the drawing?*)

I said, “Haan (Yes), Swami.”

He then told the Chairman of L&T (Shri A. Ramakrishna), “Take your team and sit with Rajan in the guest block at the back of Brindavan”. And to me, “Aap udhar jaake saara discuss karo. Mein baad mein dekhta hai.” (*You meet and discuss; I will see you all later*).

We had a long discussion with all the drawings. Shri A. Ramakrishna and his team looked through them, and about an hour later we got a call Swami wanted to see us. We went into Trayee and Swami was sitting in His chair in the small living room and called for the drawings. There were a huge number of drawings and He looked through each and every one of them.

MH: *Were they the elevations or the interiors also?*

RS: The interiors came a little later. Of course, the interior columns around the mandir I had done. He saw all of them. And he said, “Barabar hai. Shuru karo.” (*They are fine. Start the work*).



The work started and went on full swing. I would spend 15 days in Whitefield, and 15 days in Delhi getting things ready and during every visit monitor the progress and review. I would click pictures of the hospital and, I would take them, along with further drawings that were made, to Swami. That year, I must have met at least 12 or 15 times. The moment He would see me, He would call me in and start looking at all drawings and every photograph, and ask questions about the progress.

He monitored everything very, very minutely; everything and every aspect of it. Every time He would wait and ask, “What have you brought? What is the new thing they are going to do? What are the additions we are doing? What is the development that we made?”

I recollect the episode about the photograph in the mandir. I didn’t know which one to choose. Somebody directed me to a devotee who was into printing on flex. I went to his

factory, and we chose some photographs. I had four or five of them done up the same size and next morning I took them to Swami.

Swami asked, “Kya hai?” (*What is it?*) I said, “Swami, mandir ke liye photographs hain.” (*Swami, they are photographs for the mandir*) “Dikhao.” (*Show me*) And on the road in front of Trayee, we opened them up and He chose the one in the yellow robe, “This one. This is the one I want there.” To that extent, He was involved. It was Him initially, and Him taking care of everything till the end.

And towards the end, I think, last one or two days to the opening, somebody walked up to me and said, “There is the gold kalash that has to go on top of the dome; tell us how to do it.” I said, “I haven’t the faintest idea, and I think it is too late in the day to do it.”

And on the day of the opening, as I was approaching the hospital, I saw the kalash was already up! He has his way of making things work. He doesn’t need us.

My understanding is that we were used just to make us feel part of His team to receive His love. Everyone has been given something that Swami could use in His missions, not because that person is special but may be that becomes the way of Swami’s conveying love to you. There is no other reason.

I know I wasn't capable of doing it. But the very moment when He patted my cheek and said, "You can do it", I guess that is where it came from, that energy probably transmitted. I don't know how but we did finally manage to do it and He was very happy, very happy.

MH: *In the normal course, how much time would you have taken to design a project like this?*

RS: If I were to do a project like this, I think 5 to 6 years is the minimum time, for a project like this to come up, with this kind of intricacy. Plain simple buildings are very easy to do. But when you want to match the level of Buckingham palace, it is a tall order — a very, very tall order.

MH: *Did you actually see the Buckingham Palace in person?*

RS: (laughs) Later. These days we don't have to see, you just log on to the web and you got the world there. I don't think Swami meant we should replicate the Buckingham Palace. What He was trying to convey was that it should be something as grand as the Palace. If you see the two buildings, they have nothing in common. Our hospital, in terms of its detailing, the concept — it is very Indian. It is more like a very grand Indian palace. When you look at the details — the columns, the brackets, the domes, the gopurams on the parapet, all of that is very Indian. There is nothing of Britain in that. So, as I understood it, what He meant was that it had to be grand like the Buckingham Palace. Other than that there is nothing in it that looks like the Buckingham Palace. I think our hospital is more intricate than Buckingham Palace is.

MH: *Would you rate this as one of the best projects that you have done?*

RS: Yes, undoubtedly, for many reasons, but mainly because this was created with Swami.

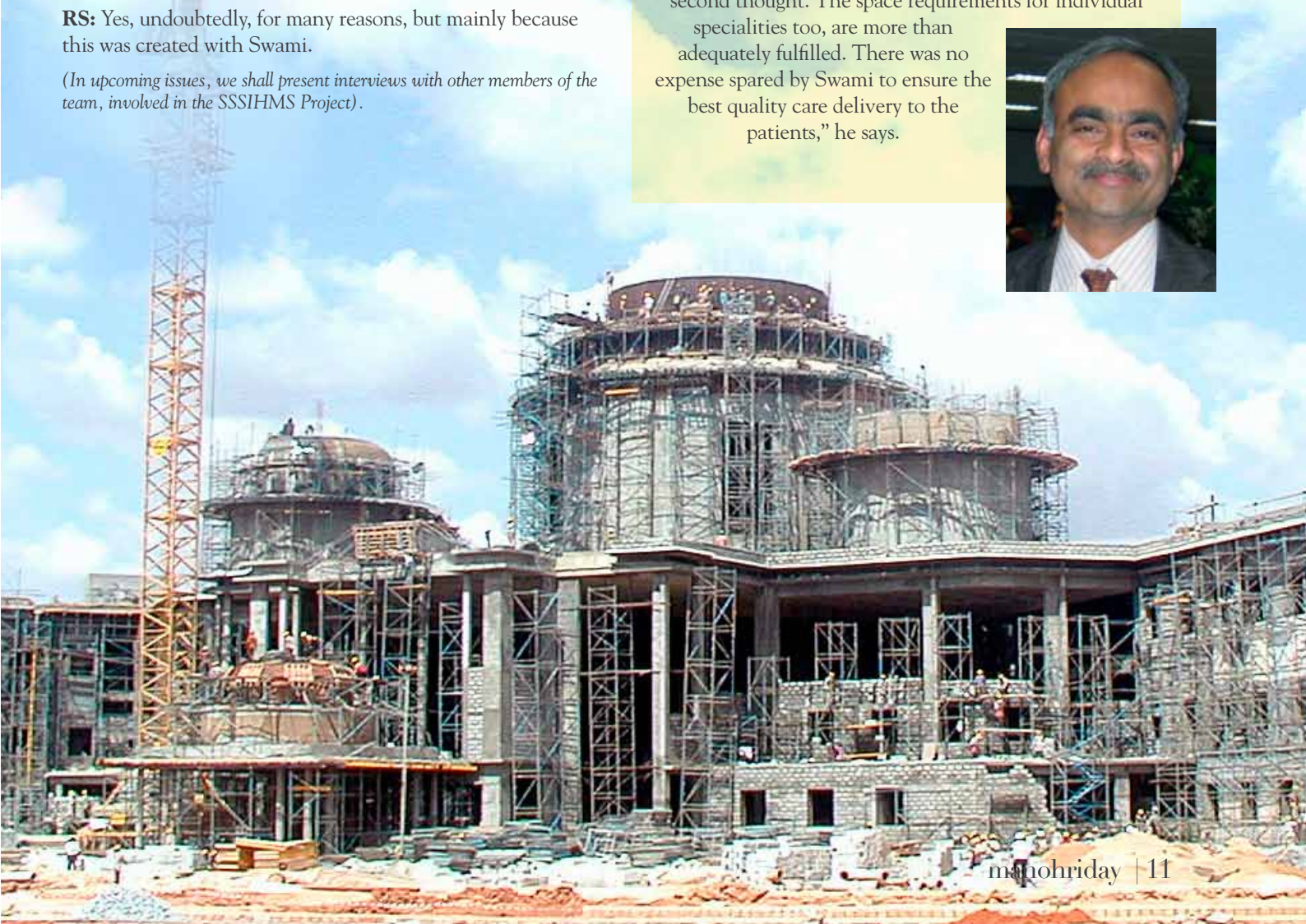
(In upcoming issues, we shall present interviews with other members of the team, involved in the SSSIHMS Project).

Shri A. Srivathsan, presently CEO, Vidal Health, was involved in the SSSIHMS Project as a medical planner and provided his inputs towards the facility planning and design. He fondly remembers his participation in the project:

"I vividly recall an interaction between Swami and the Managing Director of L & T, the prime contractor of the Project. Swami asked him about the project team, which comprised of the best people from various specialities. He replied, 'Swami, it is a great team'. Swami corrected him and said, 'No, not great team! I have given you a good team.' He went on to explain to all of us that while Ravana might have been great, Rama was good, distinguishing for us the subtle difference between good & great.

"The Hospital project was a very unique opportunity for me. Having been involved in the design of many corporate hospitals, the SSSIHMS hospital project was a paradigm shift, where the patient and the patient needs came first.

"Since they were no agreed-to standards in those days, we followed the US standards in many cases, and in certain cases, we evolved our own. These standards, keeping Swami's guideline of 'Patient First' in mind, surpassed some of the US standards too! The sterile areas were provided with 100% fresh air, which ensure higher air quality, and faster patient recovery. Given that such a feature would mean higher capital & running costs, even reputed corporate hospitals would give such decisions a second thought. The space requirements for individual specialities too, are more than adequately fulfilled. There was no expense spared by Swami to ensure the best quality care delivery to the patients," he says.





Mano Hriday: *Can you please share your background and how you came to Swami?*

Ravi Shankar: I received my B.Arch degree from Bangalore University in 1981 and after working for various firms for a few years, started out on my own in 1991. I was initially into design of residential buildings and later, till 1999, specialized in office and residential interiors. Later on, I

started designing office complexes, industrial buildings and commercial buildings.

I was studying in Chikballapur, and had my first darshan of Swami as a nine-year old boy. As I grew up, I found being drawn to Him and became a devotee. In 1992, I had a chance to design the present book stall building at Brindavanam. Swami inaugurated the building on 14-Apr-92, and it happened to be my birthday. For the first time, I had a chance to have blessings of Swami and from that day, His blessings started showering on me. It was an unforgettable day in my life. As a professional, I have had the great good fortune to have numerous interactions with Him and design some of Swami's buildings, including the Hill-View Stadium, Shanthi Bhavan and the Sri Sathya Sai Mirpuri College of Music.

MH: *How did your interest in hospital design come about?*

RS: While I was primarily into designing office spaces and industrial complexes, I also got opportunities to design small nursing homes in and around Bengaluru and it was during this time that my interest in hospital design started. It was a fascinating area of expertise, and it was during this period that I got to know closely the needs of the doctors, patients and the requirements of various clinical specialities.

In early 1999, Bhagawan announced His plan to build the super-speciality hospital in Bengaluru, and I was eagerly looking forward to the opportunity to design the hospital, though it seemed very ambitious.

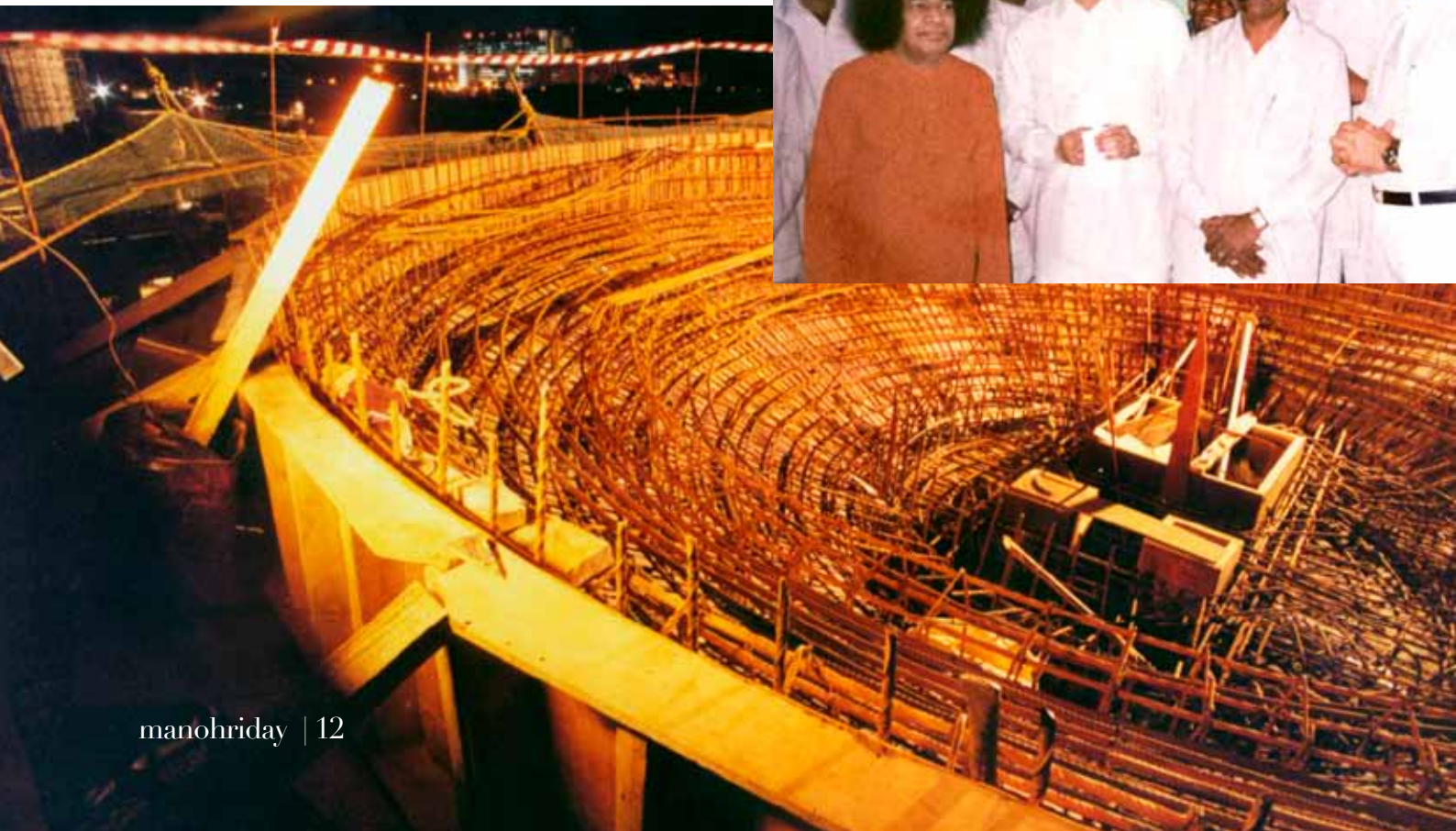
MH: *And how did Swami make it happen?*

RS: When the Chief Minister of Karnataka, JH Patel, came to Puttaparthi to offer to Swami a large piece of land to Baba for constructing a super-speciality hospital, I was fortunate to be a witness to this event.

Shortly thereafter, I was present at Bengaluru, along with a cabinet minister. Swami called us both in for an interview and He presented me a navarathna ring and told me I will be very busy after August. I could not grasp the import of Bhagawan's words at the time. It was around June-July, that my prayers were answered and I was instructed to present a design of the hospital. My joy knew no bounds, and I set off the designing the hospital in earnest.

MH: *And how did the actual hospital design take shape?*

RS: Since I had no prior experience of designing large hospitals, I visited various hospitals in Bengaluru to understand the clinical requirements. Also, there were Bhagawan's guidelines that the building should not look like a hospital, but like a temple of healing. His other inputs were for it to be grand, have sufficient light and ventilation. This was how the K-shaped structure came about. The ceilings were all made 14-feet high, as opposed to the conventional 9-12 feet, to give the building a grand look.



As the design progressed, we wanted to prepare a model to show Bhagawan, so it will give Him a clear picture of the character and style of the building. Within three weeks' time, the model was ready. When we took it to Parthi for Bhagwan's inspection, Bhagawan saw it, and said, "You have designed the building just like the Buckingham palace, which was in my mind," and presented vibuthi and blessed me.

Though I made the design, I cannot take credit for the design, as it was purely Bhagawan's inspiration and blessings.

At Swami's behest, I was asked to explain the key components of the design to a team of doctors, which was apparently satisfied with the design. At this moment, I felt I have achieved a significant goal in life, but I still kept my fingers crossed that I will be given the opportunity to work on this project.

I must share here that during this period, I had only five members on my team, and all of us used to work 18-20 hours daily for a period of three weeks. In spite of such a hectic schedule, we never felt tired or stressed in our minds and body. This can happen only with Bhagawan's blessings.

Finally, to my joy and efforts of my team, we were awarded the contract of designing the hospital. We were to work along with Shri Rajan Sood from Delhi, the work allocation being we were to design the basic framework and provide for the various services within the framework and Shri Rajan's scope was to design the façade of the hospital. We worked very closely with each other on this project.

MH: *Could you share how the hospital colours are muted, and different from other Swami's buildings?*

RS: During the construction stage, we had numerous visits to Parthi to update Bhagawan on the progress. During one such visits, Bhagawan granted me an interview, during which I informed Him that we would be trying out different colour schemes and make samples on parts of the buildings and that we would need His approval. Bhagawan graciously consented and informed that He would see the building when He next visits Bengaluru. Within a week, Swami came to the site, saw the color and approved the present color scheme.



MH: *What, in your opinion, was the critical factor for such a short project execution period of 16 months?*

RS: The critical factor is solely Swami's blessings and the shakthi Swami gave the project team and of course to L&T, whose micro planning was commendable and we were able to adhere to all timelines.

Also, I recall how, in an interview to the project team, Swami taught us the importance of teamwork, using the example of a garland. He explained how a garland looks very fresh and beautiful on the first day, and how the next day it fades to 75% of its beauty and on the third day the flowers will dry and fade. But, He mentioned, the thread holding the flowers together, continues to be strong. He emphasized teamwork and said that all the individuals should hold their hands together and work together and be like the thread in the garland.

We had a very good project team, headed by the project coordinator Shri Satish Nayak, Mr. Srivathsan, who helped us with the critical area of medical planning, the L&T Director, Shri A. Ramakrishna. They were all highly competent individuals, and more than that, very devoted to Bhagawan.

Of course, there were many other individuals, both named and unnamed, who selflessly worked for the project, inspired by Bhagawan's ideal.

Without Bhagawan's blessings, it would have been humanly impossible to accomplish the task of building such a huge structure within such a short time-frame.



After passing out with an Engineering degree in 1953, I worked for the Indian Railways, the Ghana Railways, and the World Bank, before I retired and was extremely fortunate to get the opportunity to work for Swami from 1997. I considered myself thrice blessed when I was given the role of Project Engineer for Swami's Bengaluru Hospital Project in 1999. I also had the good fortune to work with Shri Rajan Sood, Shri Ravi Shankar, Architects, and Shri Srivatsan, Hospital Design Expert, as well as with a wonderful team of Accountants, Engineers and others. Some of them are still working as busily as ever in the Hospital. Dr. Hegde, who later became the Director of the Hospital, gave us invaluable advice during its construction. The cooperation and advice from L & T, headed by Shri A. Ramakrishna, was invaluable. The leadership of Shri C. Sreenivas, who spearheaded the project and followed it up, played a major part in its successful execution.

When preparing the Project Report for the Hospital, I realized that it was not going to be a place where the benefit of the treatment would go to the patients only, and where the benefits could be measured with the WHO unit of DALYs (Disability Adjusted Life Years). Since the Hospital was going to provide totally free succour to all, including the poorest of the poor, who would otherwise leave their families destitute, it was going to provide major resultant benefits to society, and also be an instrument of societal transformation. The societal benefit was not confined to the patients alone; their families and progeny would not only be saved from distress, but they would also be prevented from possibly going to the streets and causing crime, with major costs to society.

Three architectural designs were received: (i) a conventional rectangle-based building with corridors, (ii) a square building with a quadrangle in the middle, and (iii) the one which was selected by Swami- the present K shaped building wherein the two angular wings looked like open arms welcoming the sick, with a promise of cure. I was also told that Swami wanted that:

- the front elevation should bear a resemblance to Buckingham Palace
- the patients should be able to see an expanse of green from their beds if they look outside
- the front set-back from the road should be at least 200 ft.
- the hospital should neither look, or smell, like a hospital.

During the construction of the Hospital, many very unique features were observed, which could occur only with Divine Grace. Contractors and suppliers were falling over each other in trying to fulfil their obligations. Bidders wanted to provide their inputs at the least possible price, as they wanted to have the satisfaction of having participated in a Divine Mission. Members of the construction team coordinated their activities



and cooperated with each other in an exemplary fashion without any ego-barriers. When there was a state-wide sand strike, the sand truckers continued sand supplies, sometimes by night. Everyone involved knew that it was a Divine work, which needed nothing less than their best efforts. There was no industrial accident at all during the whole project period. When one supplier, selected by tender, could not get the imported item in time at a critical stage of construction, the higher bidder who had offered an item of a higher standard, gave the supplies from his stock at the lower price. Our team always remembered Swami, and after lunch every day, which we had seated together, one of us, by rotation would read out a piece of valuable advice from "Sathya Sai Speaks".

Among many other valuable pieces of Divine Advice, Swami specified the height of the top of the dome from the ground level to be 108 ft. He also specified the diameter of the rotunda to be 75 ft. The overhead water tank was previously located at the southwest corner of the site. Swami wished that it should be shifted to the side of the building on the southern side, as, in the earlier location, the tank structure hid the view of part of the building from the main road, when approaching from the South.

Swami took a keen interest in the assembly, on site, of the elements of the large chandelier in the dome. Swami also visited some of

the staff quarters in the stage of construction. Every visit of Swami to the construction site was an eagerly awaited event. We would wait for the phone call from Brindavan Ashram, saying Swami is leaving. Swami used to come once in four or five days, whenever He was in Brindavan. Every visit, every moment was treasured by all. I was blessed to drive Him round the various important areas three times in a golf cart, with Him sitting next to me. Every moment, every second was precious. And, He gave me the most treasured minutes in my life, when, during one of his rounds (May 23, 2000), He created a gold chain and put it round my neck. Swami always brought sweets and goodies in a vehicle that followed His car, and we would enjoy them after the Divine Visit.

The work which involved the construction and finishing of over half a million square feet was completed in sixteen months. It was only Swami's Divine Grace that made it possible. The project includes, besides the Hospital Building and associated facilities, a staff colony with quarters, a Canteen, a water supply distribution system, and a Sewage Treatment Plant. The last mentioned was not very common in those days, but it helped keep the lawns and garden green even in the driest of years, because the double treated water was used for gardening, apart from reducing fresh water consumption to a significant extent. It was only Swami's guidance that must have led us to put up the plant. The entry against the item "Quantity of effluent from the site" in the form to be filled in for the Pollution Control Department was: "zero".

When the day for the inauguration was coming nearer, Swami made it clear that He did not want an empty hospital to be formally opened - He wished that there should be some post-surgical patients in the wards on the day of inauguration. Needless to say, His wish came true!

Whenever I see the Hospital now, I think of the lakhs of people it has saved from disaster. When I hear of the societal transformation taking place in the localities where the treated patients live, I am convinced that it is a Temple of God radiating Divine Blessings, and not a mere Hospital - and my feelings of gratitude to Swami for giving me a miniscule part in His Mission overwhelm me. How can I ever thank you, dear Bhagavan?



The glass chandelier, in the foyer of the Hospital, is a work of art from Murano, Italy, an island in the Venetian lagoon, where glass has been made for over 700 years. The journey of the chandelier from Murano to SSSIHMS, Whitefield is a fascinating one.

The Daswani family has been devoted to Swami for many decades. When they heard about the Whitefield Hospital coming up, Mrs. Shakuntala Daswani sought Swami's permission to donate a chandelier for the central dome of the hospital. Swami not only blessed her with the opportunity, but also indicated the colors of the chandelier.

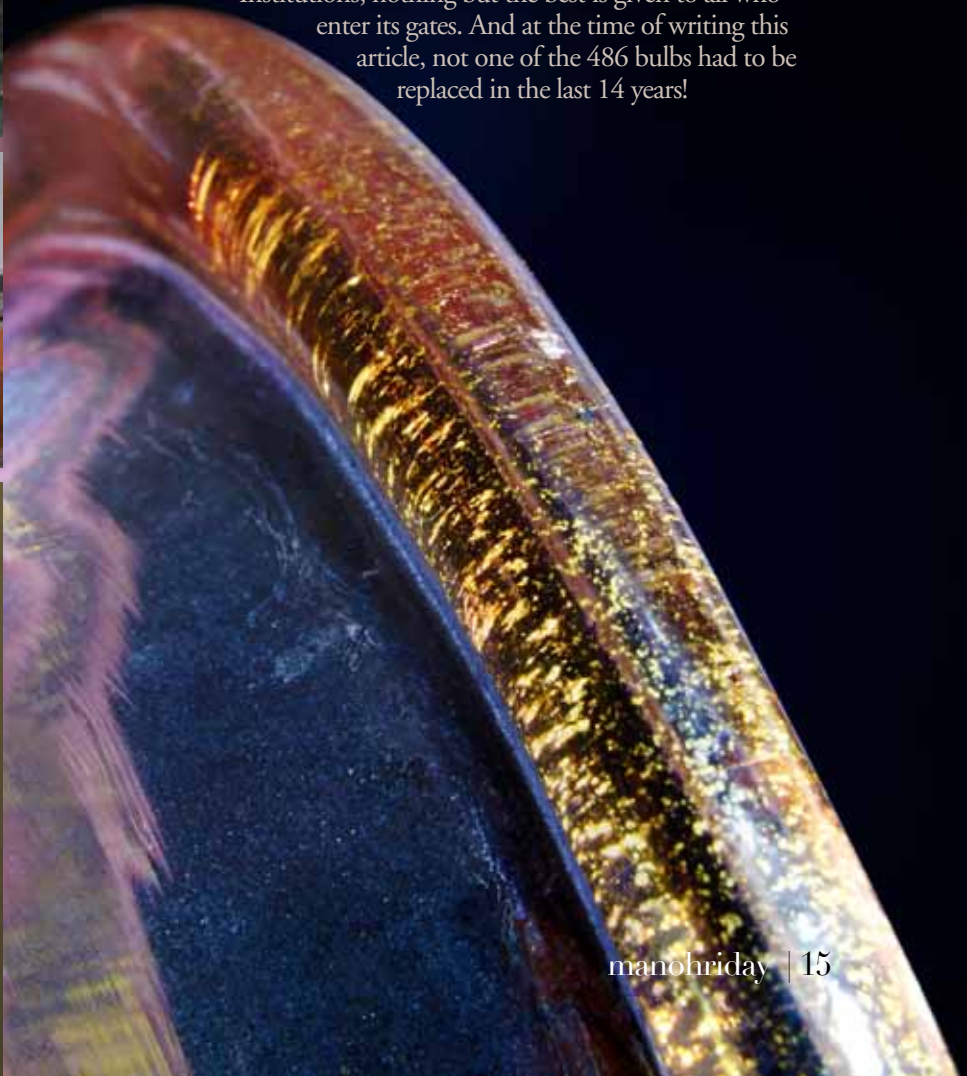
While looking for a factory, which could make large chandeliers, they were guided to Andromeda S.r.l., which had, in 1991, supplied the chandelier, adorning the central dome in the Puttaparthi super-speciality hospital.

Andromeda S.r.l. offered a special price for the chandelier, and once on the job, almost 30 people at the Andromeda factory worked continuously for 3 months to create the chandelier, made up of 11,000 individual pieces of glass, all blown entirely by mouth.

The model of the chandelier is Ca rezzonico (named after a palace located on the Grand Canal in Venice) and the colour shade is 'Clear & Ruby'. The height of the chandelier is 12 m (36 feet) and its diameter 7.2 m (22 feet). The gross weight of the chandelier is about 2 tons, and it has a total of 486 bulbs of 60 watts each.

The chandelier arrived by air in Bengaluru in a 40' container. Five engineers from the Andromeda factory worked round the clock and installed the chandelier in five days.

The chandelier embodies Swami's principle that at His Institutions, nothing but the best is given to all who enter its gates. And at the time of writing this article, not one of the 486 bulbs had to be replaced in the last 14 years!



Patient Story "Carried in, walked out!"

Anil looks just like another teenage kid. Only when you listen to his story, do you realize what a fortunate boy he has been. Here is the fascinating story of a boy who had to be carried into the hospital in his father's arms, but after treatment, walked out on his own feet.

Anil was born a normal child, except for a short neck and restricted neck movements. The only child of a weaver of the famous Dharmavaram silk sarees, he was studying in the 9th standard in the government school in Dharmavaram town, approximately 185 kms from Bengaluru. The 16-year old loved to ride to school on a bicycle, but on one fateful day, had a fall that cost him movement in both his left limbs.

His father, not a man of any means, took him to the local government hospital, but the treatment given there did not help. Within three months, Anil's weakness progressed to both right limbs and he had to be nursed and fed in bed. It was the most frustrating time in his life. In his own words, he felt it would have been better if he had not been born.

Being close to Puttaparthi, his father carried him to the Sri Sathya Sai General Hospital at Puttaparthi. From there, he was referred to the Neurosurgery Dept. at Sri Sathya Sai Institute of Higher Medical Sciences, Whitefield. Anil's dad carried him in his arms to the Casualty of SSSIHMS, Whitefield, where a battery of tests was carried out, necessary to diagnose his condition.

Dr. Sai Kiran, HOD, Neurosurgery recalls, "Anil was bed-ridden with very minimal movements in all four limbs. CT and MR imaging was suggestive of basilar invagination, a complex congenital bony anomaly, causing severe compression on the spinal cord resulting in weakness of all four limbs. He needed a

Transoralodontoidectomy and occipito-cervical fusion, a complex spine surgery, involving removing the bone causing compression on the spinal cord, and stabilizing the spine with titanium rods and screws."

"The surgery was performed successfully and the excellent post-op care by the nursing staff aided Anil's recuperation. He showed remarkable recovery in motor power after surgery and the weakness in all four limbs dramatically improved by the time of discharge. He started walking without support," recalls Dr. Sai Kiran.

Only a few centers in this country have the required expertise and infrastructure to handle such complex cases, and very few patients can afford expensive treatment in a corporate hospital. It would cost a patient lakhs of rupees to undergo a complex surgery, involving titanium implants, and expensive post-operative ICU care.

"Many patients with similar spinal anomalies come to this hospital for treatment. With state-of-the-art OT, ICU facilities, and with the support from the dedicated nursing and anaesthesia staff, we neurosurgeons have successfully operated on more than 45 such cases this year," he continues.

Three months after discharge, Anil shows signs of remarkable progress. With no residual weakness, his strides turn more confident by the day. Anil aspires to become a businessman and work with computers. "I would like to support my dad, who works very hard as a weaver and have him live a comfortable life," he says with intensity in his voice.

The hospital has put Anil back on his feet, and he looks ahead with a rare optimism that was unknown to him a few months ago.



When Naresh Kumar first heard he had a hole in his heart, he couldn't believe it. What surprised him even more was that he had lived with it for close to five decades. A busy executive in a large multinational company, this 48-year old had lived a life with ample success and fulfilment. A very active athlete, he completed five full marathons (26-miles / 42.195 km) by the time he received the diagnosis.

This news came crashing down on him like a ton of bricks. "The doctor in a private Hospital told me that I had to get the hole attended to," he says. The only question was "Where?" Like many middle-aged corporate-goers, Naresh had a number of options available to him. "When I first heard about the Sathya Sai Hospital, I hesitated to come here. I did not want to deprive a poor man of this facility," he says.

The Sri Sathya Sai Institute of Higher Medical Sciences may have been built with the indigent in focus, but when the well-endowed visit its portals, it truly embodies the spirit of "Health for All", with which it was conceived. "You can pay for your treatment any where, but you are never sure if the decisions are not being made with commercial interests in mind. I came here because I knew this hospital would always put the patient first."

Naresh was diagnosed with an atrial septal defect (ASD), a hole between the upper chambers of his heart, which led to mixing of blood between the left and right atria. While many subjects are diagnosed with this defect early in life, it was not so in his case. A heart ultrasound picked it up during a routine hospital visit, and he was advised to undergo surgery. He heard about our hospital through a friend who volunteered here, and his first reaction was of healthy skepticism. "The façade of the hospital is truly impressive, but to experience the spirit of medicine, one needs to be a patient," he says.

As medication cannot heal the defect, traditional closure of an ASD had required sawing open the sternum, accessing the heart and closing the septum with a patch. In recent times however, technology has provided a means to approach the defect using wires and catheters, through a small incision in the groin. Very few centers in Bengaluru closed holes, employing percutaneous, or non-surgical interventions, and the Sri Sathya Sai Institute is one.

"Sometimes, it's not the news per se that hits you. It's how it is conveyed," he says. "While in many centres, the doctors painted a grim picture with all that could go wrong during the procedure, I had a very positive experience here. The doctors instilled courage and optimism."

His stay at the hospital was brief, as percutaneous interventions do not require prolonged, post-procedural intensive care. In a mere three days, he was admitted, operated and discharged, in an almost clockwork fashion. "My friends were surprised to see me walk out so quickly without a scar on my chest. My kids couldn't believe that I had a heart procedure!"

Ask him about what lingered the longest after his treatment and he is quick to reply. "The commitment, love and dedication I saw here is unparalleled. Doctors, nurses, technical staff and volunteers worked with a passion to serve that, in my world, money cannot buy. The hospital has healed my heart in many ways, and closing up a hole is just the tip of the iceberg. I have got the gift of a lifetime."

As we write this account, Naresh Kumar has just hit another milestone. He completed his seventh full marathon at Bengaluru, the second full marathon he has run since his procedure, and is now training to run his eighth full marathon at Mumbai, on the eve of the Hospital's 14th anniversary.

A fitness freak for as long as he has known, the first thing he checked with his doctor during his first post-operative follow up at the hospital was whether he could get back to a normal, active lifestyle. The doctors gave him a green signal. As he will hit the finish line this time, louder than the crowds cheering, would be the sound of his healed heart, vigorously pumping life-sustaining blood to his body.



GOING THE EXTRA MILE

B. Satish Chandra, working as Sr. Manager-Central Stores, and an avid cyclist undertook a unique journey in November, 2013, where he cycled across Kerala meeting patients, operated at Sri Sathya Sai Institute of Higher Medical Sciences, Whitefield & Prashanthi Gram.

Responsible for procurement of the medical & engineering equipment, Satish's day-to-day work involves negotiating with vendors, preparing cost-comparison statements and briefs for the purchase committee. His desire to experience first-hand Swami's healthcare mission had him travel across Kerala to study the Sai Rehab Program, a very unique out-reach program, under which the Sri Sathya Sai Seva Organization provided continued care to the cardiac patients operated at Baba's Hospitals, either at Whitefield or Prasanthigram.

"It has been a richly rewarding experience. One of the highlights of the trip was interacting with a patient, operated 20 years ago in Swami's hospital, and, till date, undergoing regular checkups under the Sai Rehab Program," Satish recounts.

"Apart from that, I have had the unique opportunity & privilege of being welcomed so warmly into the homes of the patients, who have all gone back to living a productive life, be it as a mason, carpenter, plumber or as a healthy house-wife. The devotion & service-minded attitude of the office-bearers of the Sri Sathya Sai Seva Organization is an inspiration to me," he says.



Read a detailed account of his journey captured by Radio Sai at http://media.radiosai.org/journals/vol_12/01MAY14/sathya-sai-super-hospital-Circulating-the-Joy-of-Service-Through-Scintillating-Cycling-01.htm



രോഗികൾക്കടുത്തേക്ക് യുവാവിന്റെ സെക്കിൾ പര്യടനം

മഹാനഗ്ദർ: രോഗികളുടെ സന്ദർശനത്തിന് ആവശ്യമായ സൗകര്യങ്ങൾ വർദ്ധിപ്പിക്കാനും സെക്കിൾ പര്യടനം ആരംഭിക്കാനും തീരുമാനിച്ചിരിക്കുകയാണ് മഹാനഗ്ദർ നഗരസഭ. നഗരസഭയിൽ ഉൾപ്പെട്ട 1000-ഓളം രോഗികൾക്ക് സെക്കിൾ പര്യടനം നടത്തുന്നതിന് തീരുമാനിച്ചിരിക്കുകയാണ് നഗരസഭ. നഗരസഭയിൽ ഉൾപ്പെട്ട 1000-ഓളം രോഗികൾക്ക് സെക്കിൾ പര്യടനം നടത്തുന്നതിന് തീരുമാനിച്ചിരിക്കുകയാണ് നഗരസഭ.

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Back to normal... years after Sai Care

Advanced Cardiac Interventions take Center Stage

The department of cardiology conducted a number of advanced interventional camps during the year. In the month of March, 2014 a team of electrophysiology (EP) specialists from University of California, San Diego and Davis, visited the hospital to work alongside staff cardiologists in performing complex EP procedures. During this time, a CME in advanced EP was conducted at the hospital, and was attended by close to 100 physician delegates from around the country. EP procedures are highly specialized interventions concerning the diagnosis and treatment of abnormal cardiac electrical pathways.

In October 2014, Dr Yegya Raman and Dr Ashok Garg from New Jersey and Arizona respectively, worked with cardiologists at the Institute to implant a number of advanced pacemakers in a number of patients. Techniques such as 3D mapping were employed to improve accuracy and effectiveness of these procedures. Advanced pacemakers are expensive devices, each costing many lakhs of Indian rupees. The platform also created a forum to share experiences, where both visiting teams and staff cardiologists benefitted.

“Cardiac electrophysiology, as a field, is still young, in our country with equipment being expensive and expertise being sparsely available only in apex centres across the country,” says Dr. P.K. Dash, HOD, Dept. of Cardiology. “Our regular EP program and the annual national-level EP Conference at SSSIHMS, Whitefield, are both aimed at promoting interest in the field of electrophysiology among budding cardiologists from our country, as well as to bring together the best of teachers in this field to discuss & explore newer avenues of diagnosis and management,” he adds.

Developments in the Neurosurgery Dept. during 2013-14

Conducted camp in October 2014 for various complex spinal disorders requiring spinal implants. Spinal implants with donated by Dr Ravi Goyal and Medtronic were used to treat twenty one patients during this camp.

Procured Zeihm Solo C-arm, Nihon Kohden intra-op monitor and Karl Storz endoscopic skull base surgery set, adding to the existing state of art equipment in the department.

Nomination to IACTS

Dr. Tushar Gajjar and Dr. C. S. Hiremath, both Additional Senior Consultants, Dept. of CTVS from SSSIHMS, Prasanthigram and Whitefield have been nominated as members to the executive committee of the prestigious Indian Association of Cardiothoracic and Vascular Surgeons (IACTS) for the years 2013-16.



CARDIAC SURGERY SAYS, "SMALL IS BIG"!

The field of cardiac surgery in the past two decades has made tremendous progress by way of beating heart surgery and minimal access cardiac surgery (aka key-hole surgery). Cardiac surgeons were hesitant to pick up minimal access methods, while their peers in general surgery introduced laparoscopic cholecystectomy many years ago.

With the advent of technology, especially imaging modalities and instrumentation like shaft instruments, percutaneous cannulation etc. minimal access cardiac surgery is fast becoming safe and easily reproducible. It is not far when it will become the norm in the treatment of most cardiac ailments. Cardiac centers world over are preparing for this eventuality.

Aligned with this direction, the CTVS Dept. at SSSIHMS has been doing Minimal Access Cardiac Surgery (MACS) procedures for the past 4 months with excellent results.

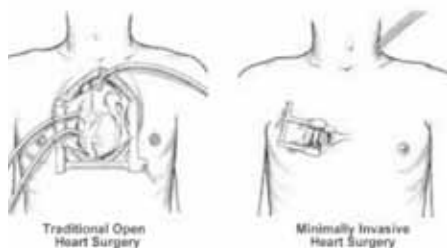
Currently, the following procedures are being done routinely:

- Ostium Secundum Atrial Septal Defect Closure
- Mitral Valve Repair and Replacement Procedures
- Off Pump Coronary Bypass Graft Surgery Procedures
- Aortic Valve replacement

Why MACS?

Dr. G. Chandrasekhar, HOD, CTVS answers, "In a departure from the conventional technique, where a 8-10 inch incision is made in the sternal bone, MACS is done through a 3-4 cm incision in the chest wall, avoiding splitting open the breast bone. Post-operative pain is greatly minimized and recovery is faster. The patient can be discharged within a couple of days and can return to their regular activities, without a prolonged period of convalescence.

"The savings in hospital costs benefit charitable institutions like ours. The blood loss is minimal and the requirement of blood transfusion is almost nil or negligible. Cosmetic benefits of MACS are appreciable, more so in young female patients,



when compared to conventional surgery," he adds.

The trend now is towards totally endoscopic, robotic-assisted cardiac surgery through smaller key holes (port access), measuring few millimetres in length, without compromising the results or benefits.

PAEDIATRIC CARDIAC SURGERY

Our nation has the highest number of congenital heart ailments. A majority of such children do not have access to timely surgery, due to limited speciality centers that cater to paediatric cases, and also due to high surgery costs. And surgeries performed later in life cannot correct the irreversible changes in the child, which take place, while awaiting surgery.

This stimulated our endeavor to deliver cardiac surgery to small babies, weighing less than 8 kg. While on this path, we had four visiting teams from across the globe, which helped improve our techniques and skills in operating these babies. During the visits of the visiting teams in the past one year, a total of 42 surgeries were performed in which 23 surgeries were on children of ages two years and below. The results were extremely gratifying. All these children operated upon will now grow up to be normal children.

VIDEO-ASSISTED THORACIC SURGERY (VATS):

Video-assisted thoracic surgery has formed the gold standard in operating for lung conditions worldwide. The CTVS Dept. at SSSIHMS is embracing this with open hands and progressing towards superior quality of healthcare delivery. Video-assisted surgery will widen the cardiac surgeons' perspective, and this will also form an essential part of the DNB training curriculum.

With support from the Chairman CTVS & Director, SSSIHMS-PG, Dr. Voleti Choudary & Director, SSSIHMS-WFD, Dr. Swarna Bhardwaj, the CTVS Dept. has progressed in delivering advanced cardiac care from the conventional way towards smaller incisions and smaller patients. We are embracing cutting-edge technology to provide better patient care.

With Swami's vision guiding us and continued support from the Central Trust,



we strive towards providing excellent & advanced health care to the neediest patients.

Report on Neurology Dept for the year 2014

The Department of Neurology acquired state-of-the-art equipment from Nihon Kohden, Japan for advanced Electro-diagnosis: Video EEG, ENMG, and Evoked Potential.

Basic training in EEG & ENMG was provided to Shri R. Mohan Kumar, Sr. Manager-Perfusion and after advanced training in intra-operative monitoring (IOM), IOM service has commenced in Neurosurgery.

Dr. Joshy, HOD Neurology, created and distributed free of charge throughout India a DVD titled, "Case-based Neurology", containing 48-hours of study material. This DVD has been attracting trainees to come and work with the Dept. Dr. Milan, an MD Psychiatrist, from Gujarat is currently offering his services as a resident in Neurology for six months. Also, one batch of MD General Medicine post-graduates from Kannur, Kerala are currently on deputation in the Neurology dept.

Courses conducted by the Neurology Dept.:

2-day Case-based Neurology Course – 16 hours of CME program designed for Postgraduates/Residents and practicing physicians on the 7th & 8th March 2014. Dr. Anand Kumar, faculty from Amrutha Institute, Kochi, who heads one of the finest Neurology departments in the country, was deeply impressed by the facilities and service being provided at our Institute.

Full-day course on "Soul Medicine" for the Neuro-psychology postgraduates at the Christ University on 23-8-2014, spreading the Sai message of Compassionate care.

Full-day Neurology course (as a solo-faculty) at MVJ Medical College, Bengaluru on 13-Sep-2014 in partnership with Sai Counselling department of SSSIHMS, Sai Counselling for Neurology outpatients commenced.

Apart from these, Dr. Joshy was an invited speaker at various state & national-level conferences & CME programs.

Focus on Heart Valves – ASEF at SSSIHMS

Rheumatic heart disease (RHD) remains a major public health concern, with an estimated 15 million cases of RHD worldwide, including 282,000 new cases and 233,000 deaths annually. The American Society of Echocardiography Foundation (ASEF) and the Sri Sathya Sai Institutes of Higher Medical Sciences (SSSIHMS) in Bengaluru and Puttaparthi teamed up against RHD during the month of August this year.

The ASEF Valvular Assessment Leading to Unexplored Echocardiographic Stratagems (VALUES) program was a teaching and research event which assessed the full spectrum of abnormalities seen in rheumatic valvular heart disease using state of the art echocardiographic modalities and mobile health (mHealth) devices. Over the course of 4 days, 10 cardiovascular sonographers, 5 physicians, 30 Indian trainees and local staff imaged and assessed 256 patients with rheumatic heart disease.

Each morning, a live web-cast conducted at the hospital showcased the highlights of the previous day. World renowned cardiologists such as Dr. James Thomas, Dr. Roberto Lang, Dr. Thomas Ryan and Dr. Jagat Narula shared a virtual dais with in-house experts Dr. P. K. Dash, Dr. Banajit Barooah, Dr. Ramnath Iyer and Dr. Srikanth Sola as they discussed aspects related to the management of one of the world's oldest diseases. These were broadcasted worldwide on YouTube. The sessions were attended by a number of physicians around the country, both as on-site participants and as webinar participants. The event also witnessed the first time Google glass was used in India during a mitral valvuloplasty in the cardiac cathlab.

Cardiology post-graduate training gains SPEED

Training to become a cardiologist can be a rough terrain. Post-graduate students spend many years studying to take the final test conducted by the National Board of Examinations (NBE), and the standards of evaluation are stringent.

The Sathya Sai Institute of Higher Medical Sciences has witnessed a commendable record in the national examination, with a number of its students bagging medals for outstanding performance. To share the success story in this domain with the rest of the country, the department of cardiology conducted a special CME on 22-23 March, 2014 to prepare DNB/DM exam-going students to take the final examination.

Recalling how the event came about, Dr. P.K. Dash, HOD, Cardiology says, “SPEED (Sathya Sai PrEparatory course for Examgoing DNB/DM) students has been a unique initiative of SSSIHMS, to provide students from across the country a common platform to hone their clinical skills in Cardiology. Not all students from our country have equal levels of exposure to different types of clinical cases in Cardiology. At SSSIHMS, being a tertiary-care referral centre, and due to the plethora of cases, we are perfectly placed in offering that exposure to budding students so that they may pass out as more fulfilled cardiologists tomorrow and serve the nation better.”

Coined ‘SPEED’, this 2-day event simulated the high-pressure environment of a final examination, and through a combination of didactic lectures, case presentations, and faculty interactions, exposed the visiting faculty to a spectrum of cardiac presentations. Over 100 post-graduate students and 12 nationally renowned faculty attended the event conducted at the hospital. The feedback was overwhelmingly positive.



Anesthesia Education

The SSSIHMS Anesthesia Conference (SANCON) 2014, an annual conference on anesthesia machine and monitoring equipments was held on 29th & 30th March 2014. A total of 196 delegates & 15 faculty attended this academic event from across the nation. The scientific program, consisting of deliberations, post-graduate debates and live workshops, was highly appreciated by the audience.

A two-day CME, "Cardiac Anesthesia Update 2014" was conducted by the Dept. of Anaesthesiology, under the auspices of the Indian Association of Cardiovascular Thoracic Anaesthesiologists (IACTA) on Dec 13-14, 2014.

"The focus of the CME was to integrate theoretical knowledge with practical skills needed in the day-to-day work in operating rooms and ICUs," says Dr. Kolli Chalam, HOD, Dept. of Anesthesiology.

"Didactic presentations by renowned faculty and a live TEE demo by Dr. Srikanth Sola exposed the over 160 practicing Anesthesiologists / fellows / PG students across India to discuss recent advances in technology," he continued. The didactic sessions were chaired by eminent cardiologists, cardiac surgeons and cardiac anesthesiologists. The live demo of TEE by Dr. Srikanth Sola, Sr. Consultant, Cardiology has been rated by most delegates as excellent.

SACRED Initiatives

The Radiology departments of SSSIHMS, Prashanthigram and Bengaluru have been organizing CME programs since Nov-2009 on various radiological sub-specialities under the aegis of "SACRED (Sri Sathya Sai Academy of Radiology Education)". As of Jan-2015, 14 such CMEs have been conducted.

Between Jul 2013 and Dec 2014, four CMEs were conducted by SACRED by in-house & reputed external faculty on wide-ranging topics, which were well received:



- Update on Musculo-skeletal Imaging on 26-Oct-2013
- Spine Imaging on 12-13-Apr-2014
- Paediatric Neuro-radiology on 13-Jul-2014
- Body Imaging on 19-Oct-2014

Neurosurgery and Neuroradiology Conference

Conducted Micro-neurosurgery and neuro-endovascular workshop on 16-17 Feb, 2014. It was attended by around 150 delegates from all over the country. Eminent neurosurgeons Dr. Anil Nanda, Professor and Chairman of the Department of Neurosurgery, Louisiana State University Health Sciences Center, Shreveport, USA and Dr. Murali Guthikonda, Chairman, Department of Neurosurgery, Wayne State University, USA, performed live surgeries during the workshop. Dr. Santosh Joseph, Professor and Head, Department of Radiology, SRMC, Chennai, demonstrated the placement of pipeline diverters for complex aneurysms during the workshop.



Dept. of Cardiology – National Level Presentations & Awards

The department of cardiology made a number of presentations at the national level during the last quarter of 2013 & through 2014. Most of these were oral presentations, and a number of them won awards in various categories.

Most notable of these presentations were the following:

1. “8 year old congenital PS with three cardiac arrests treated as ‘syncope’ elsewhere, who underwent PVBD from jugular route” selected among top 8 cases in the National Cardiology Society meeting, 2013.
2. “PCI in patients with severe LV dysfunction” selected as the best abstract (Case-series) during the National Cardiology Society of India meeting 2013.
3. “Bailout device closure of aortic rupture during intervention for coarctation, using 8 mm ASD device” selected as BEST case during the National Cardiology Society of India meeting 2013.
4. “Grapes in the heart – Infective Endocarditis of Implanted ICD device” selected among 5 Best cases award, EchoIndia 2013.
5. “Immediate effects of Percutaneous Transvenous Mitral Commissurotomy on Right Ventricular Function” selected for best oral abstract at Echo India 2013.
6. “Passive versus Reactive Pulmonary Hypertension - effect on right ventricular function: a catheterization and echocardiographic study” selected for best Clinical Research Award at World Summit of Echocardiography, New Delhi 2013.
7. “Balloon not deflating; ST elevation for patient and operator!” selected as one among the best 10 abstracts during the National Interventional Council (NIC) meeting, 2014.
8. Live-case demo of BMV at ASEF Values program August 2014 with visiting teams of US experts.
9. 6 oral presentations during the Cardiology Society of India, Bengaluru Chapter meeting.
10. “Standing quietly, yet getting injured – Infective Endocarditis of the tricuspid valve in Rupture of Sinus of Valsalva (RSOV)” and “Mechanical complications of MI” - 2 cases accepted for best cases oral presentation in Echo India 2014 and subsequent publication in the Journal of Indian Academy of Echocardiography.
11. 11 moderated posters accepted at the National Cardiology Society of India Meeting, 2014.
12. “Stranglehold amidst plethora” selected as best case at national Cardiology Society of India meeting, 2014.

International Rewards

Dr. Riyaz Mujawar won 1st prize at CAD Summit, 2014, enabling him a two-week observership in Interventional Cardiology in Europe during 2015.

Dr. Prayaag Kini successfully completed a fellowship at Mt. Sinai Hospital, New York, in April 2014, during which he underwent hands-on training in advanced cardiac catheterization, notably Intra Vascular Ultrasound (IVUS), Fractional Flow Reserve (FFR) and Optical Coherence Tomography (OCT).

Neuro-surgery Publications in 2014

1. **Surgical outcome of primary clipping for anterior circulation aneurysms of size 2 centimetres or larger.** Furtado S.V., Saikiran N.A., Thakar S., Dadlani R., Mohan D., Aryan S., Hegde A.S., Clin Neurol Neurosurg. 2014 Jul;122:42-9. doi: 10.1016/j.clineuro.2014.04.012.
2. **The impact of telemedicine in the post-operative care of the neurosurgery patient in an outpatient clinic: A Unique perspective of non-exigent utilization of this valuable resource in the developing world, an experience of over 3000 tele-consultations.** Dadlani R., Mani S., Jai Ganesh A.U., Mohan D., Rajgopalan N., Thakar S., Aryan S., Hegde A.S., World Neurosurg. 2014 May 30. pii: S1878-8750(14)00534-8. doi: 10.1016/j.wneu.2014.05.027.
3. **Paraspinal muscle morphometry in cervical spondylotic myelopathy and its implications in clinicoradiological outcomes following central corpectomy: clinical article.** Thakar S., Mohan D., Furtado S.V., Sai Kiran N.A., Dadlani R., Aryan S., Rao A.S., Hegde A.S., J Neurosurg Spine. 2014 Aug;21(2):223-30. doi: 10.3171/2014.4.SPINE13627.
4. **Economics of epilepsy surgery.** Sadanand V., Ann Indian Acad Neurol. 2014 Mar;17(Suppl 1):S120-3. doi: 10.4103/0972-2327.128685.
5. **Emergent management with favourable outcome of an unusual presentation of a primary CNS lymphoma in an immunocompetent patient.** Rao A.S., Dadlani R., Ghosal N., Hegde A.S., J Neurosci Rural Pract. 2014 Jan;5(1):88-90. doi: 10.4103/0976-3147.127925.
6. **A 16-gene signature distinguishes anaplastic astrocytoma from glioblastoma.** Rao S.A., Srinivasan S., Patric I.R., Hegde A.S., Chandramouli B.A., Arimappamagan A., Santosh V., Kondaiah P., Rao M.R., Somasundaram K., PLoS One. 2014 Jan 24;9(1):e85200. doi: 10.1371/journal.pone.0085200.
7. **Reversible extrapyramidal symptoms of extrapontine myelinolysis in a child following surgery for craniopharyngioma.** Sai Kiran N.A., Mohan D., Sadashiva Rao A., Assis Z.A., Thakar S., Hegde A.S., Clin Neurol Neurosurg. 2014 Jan;116:96-8. doi: 10.1016/j.clineuro.2013.10.016.
8. **Atypical cerebellar slump syndrome and external hydrocephalus following craniocervical decompression for Chiari I malformation: case report.** Thakar S., Dadlani R., Tawari M., Hegde A.S., Neurol Med Chir (Tokyo). 2014;54(7):567-71.
9. **Infantile holocord cellular ependymoma with communicating hydrocephalus: unusual presentation of a rare case.** Aryan S., Ghosal N., Aziz Z.A., Hegde A.S., Dadlani R., Brain Tumor Pathol. 2014 Jan;31(1):47-50. doi: 10.1007/s10014-013-0145-1.
10. **Synchronous subcutaneous and calvarial Rosai-Dorfman disease diagnosed on fine needle aspiration cytology.** Ghosal N., Furtado S.V., Thakar S., Kumaran S.P., Cytopathology. 2014 Feb;25(1):65-7. doi: 10.1111/cyt.12049.
11. **Should adjuvant radiotherapy be recommended for pediatric craniopharyngiomas?** Dadlani R., Ghosal N., Hegde A.S., J. Korean Neurosurg Soc. 2014 Jan;55(1):54-6. doi: 10.3340/jkns.2014.55.1.54.
12. **Giant calvarial desmoplastic fibroblastoma.** Dadlani R., Ghosal N., Hegde A.S., Gupta K., J. Clin Neurosci. 2014 Apr;21(4):696-9. doi: 10.1016/j.jocn.2013.05.026.

CTVS Dept. Academic activities:

- Events conducted in campus:

1. CME cum 'wet-lab' on VATS – 19th April 2014.
2. VATS workshop – live case demonstrations by Dr. Sai Yendamuri.

- Conference lectures/ presentations/ Publications

1. Dr. Kumaran presented a paper in a national conference of International College of Surgeons on the topic of Offpump Surgery in Critical Left Main Coronary Artery Disease with Critical RCA Disease held in Bengaluru - September 2014.

- New procedures/ techniques performed:

1. Minimal access ASD (more than 20 nos.) and a couple of minimal access valve replacements.
2. Repair of complex congenital heart defects in babies less than 8 kg – with assistance from four visiting teams of professionals who worked with us for one week each.
3. A visiting surgeon, expert in adult cardiac surgery, came & trained our surgeons (on Total Arterial revascularization, Aortic root enlargement, Bentall).



Students from Sri Sathya Sai Institute of Higher Medical Sciences, Whitefield win All India Gold Medal

Sri Sathya Sai Institute of Higher Medical Sciences, Whitefield has been conducting post-graduate training in the fields of Cardiac Surgery, Cardiology, Neurosurgery, Radiology and Anesthesiology under the aegis of National Board of Examinations, New Delhi leading to Diplomate of National Board (DNB) post graduation.

The standards of examination are very high, resulting in only 40% of students passing across the country. SSSIHMS has the distinction of 100% of students passing across all the specialities.

Dr. Vijay L from Cardiac Surgery has bagged the gold medal for DNB Cardiac Surgery and Dr. Rohit Dixit has bagged the gold medal for DNB Cardiology during this year's convocation. So far, SSSIHMS, Bengaluru has bagged 5 gold medals.

Dr. P.K. Dash, HOD, Dept. of Cardiology says, "We, as teachers, have always believed that the first and most important step in becoming a complete cardiologist, is to be a good bedside diagnostician. They say that what lies between the two earpieces of a stethoscope is more important than any piece of gadgetry or advanced machinery!"

Dr. Barooah, Sr. Consultant, Dept. of Cardiology adds, "We have always stressed upon and inculcated the importance of developing clinical skills on our rounds; the results of this approach are obvious in the laurels and praise our students have garnered in the national level DNB exams, while presenting clinical cases to examiners from across the country."



Let's celebrate their success !



The First Annual Alumni Meet of Sri Sathya Sai Institute of Higher Medical Sciences

The Sai Vaidya Sangamam, the First Annual Alumni Meet of Sri Sathya Sai Institute of Higher Medical Sciences, Prasanthigram and Whitefield was organized at SSSIHMS, Prasanthigram, on 20-Dec-2014. The conference saw the participation of over 300 alumni of SSSIHMS, Prasanthigram and Whitefield, cutting across various specialities, and coming in from all over the country and abroad.

Speaking on the occasion, Shri K. Chakravarthy, Trustee, Sri Sathya Sai Central Trust said that it was heartening to see the response to the Alumni Meet and said that he would expect more and more alumni to participate in future. "I think that would give the greatest joy to Bhagawan Baba," he said.

"Out of the 52 weeks in a year, if you are able to give one week to the Hospitals, that will go a long way in not only connecting you to the Institutions and creating a strong bond, but also help the hospitals gain from your experience," he said. Shri Chakravarthy also added that the one week the alumni spend in this holy place will provide them sufficient energy, spirit and passion to carry on with their profession outside, for the rest of the year.



Earlier welcoming the alumni, the Director of SSSIHMS, Prasanthigram, Dr. Choudary Voleti said that Bhagawan Baba's philosophy was simple - "Love All, Serve All" and "Help Ever, Hurt Never", but in today's world, the two most service-based professions - medicine and education - have become the most successful businesses. "This is how much we have degraded ourselves..." Dr. Voleti said, and "...it is important for us to bring in the values taught to us in Swami's hospitals to our work," he added.

The Director of SSSIHMS, Whitefield, Dr. Swarna Bhardwaj, in her talk to the alumni delineated the road map for an Alumni Association of SSSIHMS, Prasanthigram and Whitefield. The day ended with the birth of the SSSIHMS Alumni Association and the office bearers being unanimously chosen.

President: Dr. Keshava Murthy
Institute of Nephro Urology, Bengaluru

Vice President: Dr. Kavita Rao
Retina Institute of Karnataka

Vice President: Dr. K. Visvanathan
MIOT Hospitals, Chennai

Treasurer: Dr. Vijay Sai
Vydehi Institute of Medical Science, Bengaluru

Secretary: Dr. Isha Samadhiya
SSSIHMS, Prasanthigram.

President Elect: Dr. Dwarakanath
Fortis Hospitals, Bengaluru.

Visit <http://sssihmsspg.wordpress.com/?ref=spelling> for more pictures.



The role of Seva, or selfless service, in Swami's mission cannot be overemphasized. Time and again, He has referred to this a royal means to fulfilment.

The Hospital relies on Seva Dal (volunteers), who come from all the 35 Sri Sathya Sai Districts of Karnataka, to carry out many of the essential hospital functions. Men and women, from a wide spectrum of occupations and age, devote one week of their time at a stretch to serve patients in various capacities. While women are assigned tasks of sweeping floors, cutting vegetables and guiding patients, men take up serving food to patients, security, and crowd-control.

There are some Seva Dal volunteers who serve on a regular basis, and either reside on campus or commute every day from their home. Shri Rajagopal is one such person.

A retired bank manager, who turned 75 recently, he is one person, who has found fulfilment in service and it shows in his demeanour and outlook. Always with a smile and a helpful nature, Shri Rajagopal's ability to serve knows no bounds. He manages the critical tasks of receiving patients at the Q-complex early morning, allotting Sevadals to various duty points and also takes care of briefing them every week before they start their duties. Apart from this, being a former bank manager, book-keeping comes naturally to him, and he manages the accounts of the Sevadai Canteen, keeping meticulous records of the donations received and of the expenditure incurred. With these qualities, we are sure, he would have been an asset to the bank he worked so far.

Born in 1940 in Anantapur, and the eldest in a family of 13 children, Shri Rajagopal completed his SSLC in Hindupur in 1957 and after a one-year diploma, was posted as a Secretary of a Cooperative Society in a tiny village in Chittoor district. In 1960, he was appointed Supervisor in the Anantapur Cooperative Agricultural Development Bank. From thereon, with diligence and industry, he served the bank for over 38 years and retired in 1998 as the Dy. General Manager of the bank.

Though physically located close to Swami, it does need an opportune time to be called to Him. It was in 1972 that Shri Rajagopal had his first darshan of Swami in the Hyderabad Exhibition Grounds, where he had gone to attend a conference. In 1985, during Swami's 60th Birthday, he was posted at Dharmavaram, as the Bank Manager of the Dharmavaram Bank and recalls going to Parthi for Swami's darshan.

After having lost his wife due to ill-health in 1981, and having seen both his son & daughter settle down well in life, Shri Rajagopal had no other desire but to serve. "I am proud to say that I am the son of a poor father, but the father of a rich son," he quips jovially.

It was in 2004 that Shri Rajagopal, met Shri Venkatraman, the Sevadai Coordinator at the time. Shri Rajagopal was using a walking



stick at the time, and recalls their reluctance in taking him in, considering his age. "They thought I might stay only for a week or two, but I assured them I would stay here forever," recalls Shri Rajagopal.

As he entered the hospital for the first time, he was greeted by the statue of Hanuman, the embodiment of an ideal servant, who incidentally happened to be his own family diety. Shri Rajagopal took to serving at the Institute like a fish to water; with all his family commitments taken care of, the Hospital provided an ideal environment in which to serve. Ten years later, 2014, as he turned 75, there has been no looking back for him.

His living is Spartan. He sleeps along with the other volunteers in the dormitory. He relishes the bland ragi ball and has stopped drinking tea & coffee since his wife's passing away. In the ten years that he has been here, he has taken up numerous initiatives to improve patient care and gained the affection and confidence of the staff, Seva Dal and the patient attendants whom he interacts with. "Everyone calls me 'Uncle' with love; what greater achievement does one need?"

His daily regimen is unlike the relaxed life of a pensioner. He is up by 3:30 am and after bath and

prayer to Lord Hanuman, he is ready by 6 am at the main Hospital gate to receive patients into the Q-complex. Once the Q-complex activities are completed he takes up book-keeping in his office in the Seva Dal Canteen. Afternoons, He goes on rounds in the hospital, to check the availability of Seva Dals at the various duty points.

It is not as if there were no challenges he faced with his health. In a routine cardiac checkup in 2005, the doctors had prescribed Ecosprin (a blood-thinning medication). In the same year, diagnosed with arthritis, he was scheduled for knee surgery in the Sri Sathya Sai General Hospital; just before surgery, while reviewing his medication and noticing he was on Ecosprin, the surgeons requested cardiac clearance. In the process of obtaining cardiac clearance they found that three of his heart vessels were blocked. Shri Rajagopal was unfazed; with faith in Swami he gathered courage to undergo the heart surgery, and later on both two knee surgeries.

After an uneventful recovery, and with renewed vigour Shri Rajagopal continues to serve the Institute and Bhagawan.

On the 14th Anniversary of our Institute, we salute the spirit of Service, being lived out by all Seva Dal volunteers, who tirelessly and cheerfully serve Bhagawan through their service to the patients who come to the Hospital.

Endoscopic Skull Base Surgery Receives a Boost

Endoscopic skull base surgery is a minimally invasive technique wherein the surgeon uses an endoscope to access and remove tumours from the skull base. This technique allows a well-illuminated and magnified view of the skull base, with the ability to overcome the line-of-sight limitation of the operating microscope. This affords a more complete tumour excision with lesser nasal trauma than the conventional microscopic technique, and a possibly faster discharge from hospital.

With the intent to introduce endoscopic skull base surgery in the SSSIHMS neurosurgery department's vast surgical armamentarium, some of the doctors in the department have been focussing on acquiring the necessary skills by attending national skull base conferences and hands-on endoscopy workshops. To pursue this interest further, and also to be able to effectively use the expensive Karl Storz endoscopy set the hospital has procured, Dr. Sumit Thakar visited the Neurosurgery department at King's College Hospital, London for a month in the summer of 2014. This hospital boasts of one of the largest skull base surgery centres in the United Kingdom, ably headed by Dr. Nick Thomas, a widely acknowledged pioneer in endoscopic skull base surgery and a valued panel member on many UK and International workshops on endoscopic pituitary surgery.



During the course of his observership, Dr. Nick Thomas and his team shared with Dr. Sumit the technical nuances of a wide variety of endoscopic skull base procedures, including those for pituitary tumours, craniopharyngiomas and also some extended skull base approaches for tumours like meningiomas. Dr. Sumit also got an opportunity to attend the proceedings of various multidisciplinary skull base meetings comprising of experts from the King's College Hospital's Radiology, Pathology, Endocrine and Neurosurgery departments.

Dr. Nick Thomas has expressed interest in visiting SSSIHMS in the future. His humanitarian streak is reflected by the fact that he has been visiting Sri Lanka for more than a decade to boost the surgical skills of local neurosurgeons.

Upon his return to Bengaluru, Dr. Sumit shared his experience with the rest of the neurosurgery team, and with Swami's grace, the SSSIHMS Neurosurgery department recently conducted its first successful endoscopic skull base surgery, and now looks forward to progress rapidly in this field.



Sai Radiologists excel at the RSNA

The Radiological Society of North America (RSNA) is an international society of radiologists, medical physicists and other medical professionals, with more than 53,000 members from 140 countries across the globe. RSNA Annual meet is the world's premier event in medical imaging held at McCormick place in Chicago. This year was the 99th annual meeting of the society. 54,008 attendees, representing more than 130 countries attended the event.

SSSIHMS, Whitefield was represented at the RSNA conference held in Dec, 2013, by five staff from the Dept. of Radiology, Dr. Sanjaya Viswamitra, HOD, Dr. Zarina A. Jr. Consultant, D.V Chandrasekhar, Sr. Manager, Dr. Prakash, II Yr Resident, and Dr. Rajashri Patil, II Yr Resident.

Dr. Sanjaya Viswamitra, HOD, Dept. of Radiology recalls, "The program included 238 refresher courses, 89 collaborative multi session courses across various Radiological superspecialities. In addition to attending a number of these courses, the team benefitted from the exposure to some of the most recent technology developments in Radiology aimed at promoting education and patient care. This included free informatics-based software tools, RSNA online resources and one of the world's most spectacular technical exhibits that had over 600 technology vendors demonstrate the latest in imaging technology."

"I am also proud to mention that the department presented 7 educational exhibits in the conference, of which 2 won a certificate of merit award from the evaluating committee," he adds with pride.

"This platform provided an opportunity to interact and network with Radiology professionals for exchange of knowledge and future collaboration. There were discussions on how to utilize the potential of the network to further collaborate and provide better support and enhance the Radiology services at our institutions," mentions DV Chandrasekhar, Sr. Manager-Radiology.

"I was overwhelmed when my abstract got accepted for presenting at RSNA conference at US. I thanked the Almighty for providing this opportunity and it was clear in my conscience that I should use this world stage not only to showcase my scientific work but also to keep up the flagship and spread the message of Sri Sathya Sai Baba."

Dr. Zarina A. Assis
Interventional Radiologist



Conferences Conducted by Nursing College In 2013-14

- Cultivating Ethical Awareness – The Core of Caring on 7-Dec-2013
- Emerging Technologies and Modernization - The Praxis of Nursing Science with Professional Practice on 19-Dec-2014.

An Eventful Year for the Nursing College

Training to be a nurse is filled with long days of hard work and study. But why should fun and creativity be left behind? The year 2014 was peppered with a number of events to keep the students' creative juices flowing.

SNA Carnival: The Student Nurses Association (SNA) organized a carnival on 2nd August 2014, complete with activities, fun exhibits and a food court for all students and staff. Stalls included "Dreamers Delight" (Saloon), Khaana Khazaana (Food Court), Funville (Games), Scary house and Carnival emporium. Needless to say, it was jolly good ride!

Freshers' Day: The 7th batch of nursing students was welcomed with aplomb on the Fresher's day conducted on 19th September. The Director, Dr. Swarna Bhardwaj, was the chief

guest. In the course of her address, she highlighted the importance of human values and wished the freshers a fulfilling student career. This was followed by a cultural program that brought out the talents of the students who had just joined the nursing program.

World Mental Health Day: "Living with Schizophrenia" marked the theme for World Mental Health Day, celebrated on 10th October. An entertaining skit was enacted by the students, followed by a quiz that engaged the audience. The 3rd year nursing students displayed commendable creativity in models and the activity session that followed.

Internal Sports: All work and no play make Jack a dull boy. Why should Jill be left behind? Table tennis, shotput, long jump, shuttle badminton, elocution, painting and a number of other activities filled the days of the students starting October



8th. In tune with the spirit of all-round education offered by the institution, students were encouraged to participate in these activities.

World Diabetes Day: To mark the World Diabetes day, free health screening, health education and creative models were on display on 14th November. 48 subjects were screened for Diabetes, stratified based on predisposition, and health education was provided to all.

Gita Jayanthi: To celebrate verses from the Bhagavad Gita, and their relevance to our lives, the students put up a program comprising chants, talks, a dance recital and skit on 2nd December. The chief guest of the programme was Prof. Dr. Ramakrishna Kavi, who highlighted the significance of our epics in her talk. The three levels of human were highlighted in Gita as a part of awareness program by Shrimathi. Saroja

Krishna Murthy, EHV guru, followed by that Mass Chanting of Key Slokas of Bhagavad Gita by students of the 3rd year. This was followed by a vibrant cultural performance.

Lamp Lighting: The Lamp lighting Ceremony for the 7th batch of Nursing and Allied Health Sciences was held on December 9th 2014. The chief guests were Dr. Ravikumar, Warden, Sri Sathya Sai Institute of Higher Learning, Brindavan campus and Dr. Swarna Bhardwaj, Director. The programme comprised a dedication song by the students, followed by an oath taking ceremony led by the Nursing Superintendent, Col. Rajalakshmi. During the address, Dr. Ravi Kumar highlighted the significance of the lamp, and extolled the nursing profession.

Healthy, Wealthy & Water-Wise

Hospitals are water guzzlers. The norm of water consumption per hospital bed is 450 litres per day. The use of water is ubiquitous in a hospital, used everywhere from washing linen, instruments, cleaning floors, gardening and so on.

As part of the hospital project, the Institute was equipped with sullage & sewage treatment plants, which allow re-use of water up to three times. When the Institute commenced its operations, there were only two bore wells, available to meet the needs of the hospital & the residential quarters. The overall consumption was around 2,50,000 litres (250 KL) per day.

As the Institute grew older, the requirements of water also grew, and gradually the bore well yields reduced, and were not able to meet the requirement. It is a scary thought to imagine a Hospital without water, and the impact of water shortage on cleanliness and infection rates is not unimaginable.

During the period 2012-13, the water shortage led the Institute to purchase water. It was a sad moment, when the first water tanker made its entry into the Hospital.

With the support of the Trust engineers, various water conservation measures were undertaken to restore self-sufficiency in water. The primary goals were to capture as much rain water as possible and either recharge the bore-wells or make available water for direct use. This would reduce the dependency on bore wells.

Given the lay of the land and a well-designed storm-water drain network, a pond with a water-holding capacity of 25 lakh litres was conceived, which would receive water from the storm-water network. This structure was sited near the highest yielding bore wells, and the water from the pond, after filtration percolates into the bore well, recharging it. The project, executed by Water Literacy Foundation, commenced in Sep, 2013 and completed in Feb, 2014. In the rains we have had since its construction, the lake has over flown at least twice,

and preliminary survey indicates the water table has risen by about 6-8 metres and the bore-well yield has gone up by about 1,000 litres per hour.

There is another example of direct re-use of rain-water in the service block. The rain-water down-take pipes from the service block terrace were tapped and led to an above-ground sump, with a capacity of 300 KL. The cooling towers, which use up to 20 KL of drinking water every day, now use rain water, when available, reducing the burden on the bore wells. This project was commissioned in Aug, 2013, and it has harvested over 900 KL of rain water till date.

Apart from these measures, the Institute has invested in replacing buried GI water pipelines with above-ground lines, to reduce the incidence of under-ground leakages. Also, treated sewage water has been made available for flushing toilets in the residential quarters, hospital & few other areas. Block water meters have been installed in the quarters and few important locations in the hospital to monitor water consumption.

Till date, the Trust has invested Rs.35 lakh towards all the above projects, and the estimated water savings from all these measures is almost 40-50 KL per day. The fact that the overall water consumption did not go up when the new residential block of 48 flats was occupied is proof enough that these investments paid off.

It has been a long time since a water tanker has entered the hospital premises, and with responsible use of water, it is intended to keep it that way!





Cumulative Statistics Jan. 2001 - Dec. 2014

Out Patient Visits	
Cardiology	6,56,230
Neuro Surgery	2,16,482
Neurology	1,45,644
Total	10,18,356

Cardiac Catheterization Procedures	
Diagnostics	18,462
Interventions	26,354
Pacemaker implantations	842
Total	45,658

Surgeries	
Cardiac Surgeries	16,555
Neuro Surgeries	20,457
Total	37,012

Laboratory Tests	
Biochemistry	26,96,979
Blood bank	3,35,267
Haematology	35,44,023
Histopathology	9,744
Microbiology	65,539
Serology	3,15,297
Total	69,66,849

Radiology Exams	
CT Scan	49,499
MRI	1,16,637
Neurocathlab	2,068
Ultrasound	20,955
X-rays	1,75,294
Total	3,64,453

Festival Celebrations...





**SRI SATHYA SAI INSTITUTE OF
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