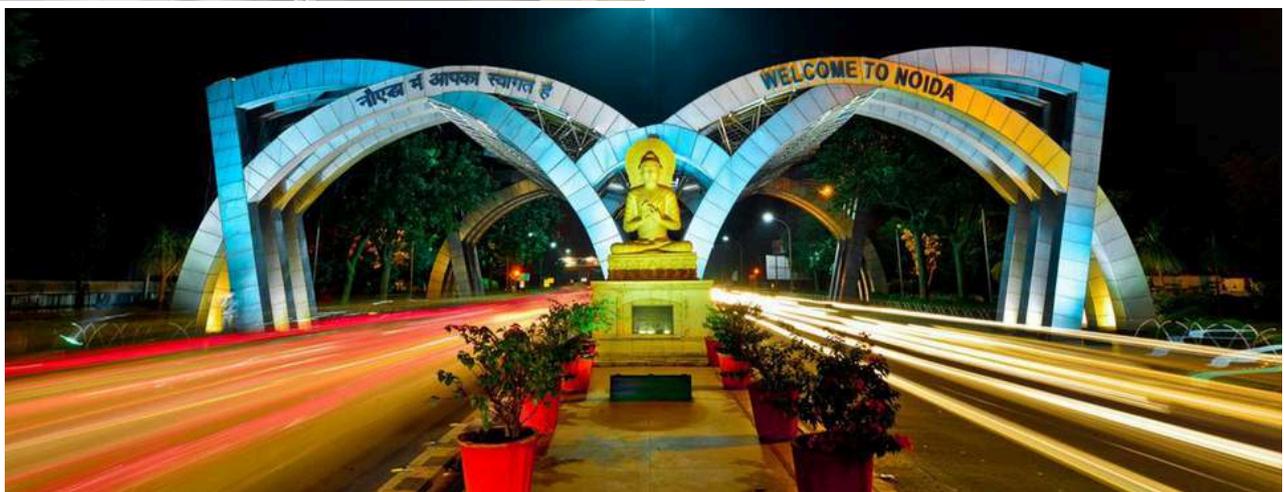
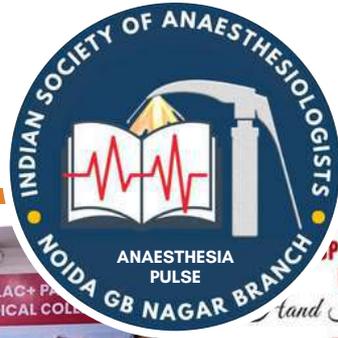
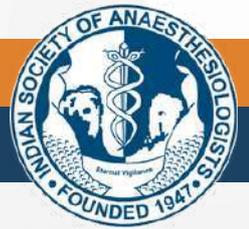
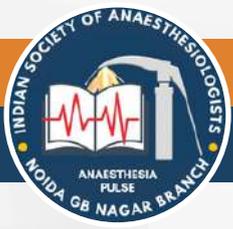


Volume 1 Issue 8 ~ Apr-Jun 2025

# The Anaesthesia Pulse

The Official Newsletter of ISA Noida GB Nagar





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# Executive Members of ISA Noida GBN



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(President)



Dr. Kapil Singhal  
(Founder President)



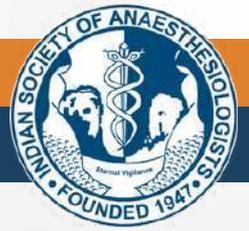
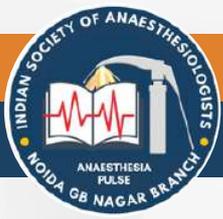
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(Vice President)



Dr. Subrat Dam  
(Hon. Secretary)



Dr. Sameer T. Bolia  
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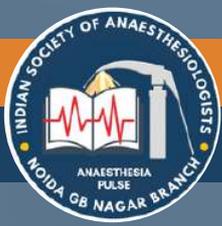
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# Message from President ISA Noida GBN



**Dr Peeyush Chaudhary**

Dear friends and colleagues,

As we enter a new quarter, I am delighted to share with you that our chapter has been buzzing with excitement and activities on both academic as well as non academic fronts. Celebrations of Holi Party at Torque on March 26th was a resounding success! It was wonderful to see our members and their families come together to celebrate the festival of colors. The event was filled with laughter, music, and joy, and I'm grateful to everyone who participated.

Academic Excellence continued with our monthly CME at Apollo Hospitals on April 24th, with a focus on adjuvants in regional anesthesia. The discussion was informative and engaging, and I'm thankful to our speakers and attendees for making it a valuable experience.

We're proud to have organized a Hospital Infection Control Workshop and CME at Metro Hospitals from May 21<sup>st</sup> to 24<sup>th</sup>. This event was a testament to our commitment to providing high-quality education and training to our team members. We had our next monthly CME at GIMS on local anesthetics in June, which was an enriching experience.

Looking Ahead

As we move forward, I'm confident that our chapter will continue to thrive and grow. I'm grateful for the support and participation of our members, and I look forward to seeing you all at our future events. Thank you for your continued support,

Jai Hind, Jai ISA  
Warm regards,

**Dr Peeyush Chaudhary**



# Message from Founder President ISA Noida GBN



**Dr Kapil Singhal**

Dear ISA Noida Gautam Budh Nagar Members,

I am delighted to express my heartfelt appreciation for the outstanding activities and initiatives undertaken by our city chapter. Your tireless efforts and dedication to promoting anesthesia care and education have been truly impressive. I would like to extend my special appreciation for the successful conduct of COLS activities at numerous hospitals in Noida on first day of HIC week. These programs have not only enhanced the skills of our staff members but also contributed to improved patient care and safety.

Our HIC (Hospital Infection Control) Week celebration was a resounding success, highlighting the importance of infection control practices in our hospitals. It was highlighted by the presence of so many senior faculty members from all across NCR and participation of more than 100 nursing and technical staff of different hospitals. Your enthusiasm and participation in this demonstrates our commitment to patient safety and quality care.

The continuous activities and initiatives undertaken by our chapter have not only enhanced the professional development of our members but also contributed to the growth and reputation of ISA Noida Gautam Budh Nagar branch at National platform. Your efforts have set a high standard for other city chapters to follow.

Lastly, I would like to urge all members to continue their active participation and engagement in our activities, including upcoming Annual CME and Foundation Day Celebration on 2nd Aug, 2025. Your contributions, whether big or small, are vital to the success of our chapter.

Once again, I would like to express my sincere appreciation for your dedication and hard work. I am confident that ISA Noida City will continue to thrive and excel in its mission to promote anesthesia care and education.

Jai Hind Jai ISA  
Best regards,

**Dr. Kapil Singhal**



## Message from Hon. Secretary ISA Noida GBN



**Dr. Subrat Dam**

ISA GB Nagar branch under the strong leadership of Dr. Peeyush Chaudhary and Dr. Mukul Jain and our financial wizard Dr. Sameer Bolia continues to impress in all spheres. I also take this opportunity to thank our flag bearer and most admired Dr. Kapil Singhal, President, ISA UP chapter for his constant support in all branch activities of the best branch of ISA.

The HIC week was conducted successfully at Metro hospital 21st- 24th May and was well attended. 3rd Foundation day CME on 2nd August at GIMS Greater Noida will be conducted under the leadership of Dr. Nazia Nazeer. Our monthly academic calendar is rolling smoothly and is also well attended. The number of members in our city branch has crossed 125 and more are expected to join soon.

We request all members to participate wholeheartedly in our academic and cultural activities, contribute interesting cases and topics in our quarterly newsletter and also highlight academic achievements. My special thanks to Dr. Priyankar Sarkar for his silent but consistent time consuming efforts to bring out the newsletter with interesting academic and social posts. Last but not the least, I would request members to volunteer for academic contribution in the form of lectures, poster presentations or as faculty in workshops in the upcoming 72nd Annual ISA meet to be held in Raipur between 26th and 30th November and bring laurels to the branch. Looking forward to a more vibrant and robust ISA Gautam Budh Nagar branch.

**Dr. Subrat Dam**



### Dr. Priyankar Sarkar Editor's note

Greetings of the day!

It is my pleasure to bring another edition of the Anaesthesia Pulse, the official newsletter of ISA Noida GBN. In this edition, we bring to you glimpses from the 3rd Hospital Infection Control week organised by Metro Hospitals Noida under the aegis of ISA Noida GBN. We also bring to you reports of the monthly CME meets held at Apollo hospital Noida (offline) and Government Institute of Medical Sciences, Greater Noida (online). Our monthly meets underpin the robust academic environment we are trying to foster in our branch.

We are all proud of the HIC week being conducted annually by Metro Hospitals Noida under the able leadership of Dr Kapil Singhal, Director and Head, Department of Anaesthesia and critical care and President ISA UP along with his superb team. Leadership in anaesthesia is not only about what happens inside the OT but also includes dissemination of knowledge and adequate training of allied staff including OT technicians, nursing staff, gda staff (ward boys etc) and staff in the emergency department. The organisers showed imagination in using technology to connect to other hospitals in the district to train their staff. It is a good example of how technology can facilitate the spread of required learning at a nominal cost and empower hospital staff of all denominations, thereby improving overall level of care imparted by participating hospitals.

We have an interesting case report on emergency airway management by Dr Subrat Dam and team from Kailash Hospital and Neuro Institute, sector 71.

I would like to thank you for your support and hope for greater engagement from each one of you to take our newsletter to greater heights.



**Dr. Priyankar Sarkar**

ISA Noida Gautam Budh Nagar successfully organized 3rd Annual Hospital Infection Prevention week in association with Metro Hospitals and Heart Institute, Noida from 21st May - 24th May. It was a four days program, in which lectures and workshops were conducted by eminent faculty-- Anesthesiologists and Intensivists-- of the region.

On 21st May, Day 01 began with disinfection, bio medical waste management and hand hygiene training for GDAs and housekeeping staff which was attended by more than 500 delegates in different Hospitals of Noida and Greater Noida under the leadership of Dr. Peeyush Chaudhary and coordinated & co performed by Dr. Ankita Sharma. It was a Marathon task completed & conducted workshop simultaneously in many hospital of Noida & Greater Noida in one day offline as well as online. They were made aware about the importance of disinfection, biomedical waste management and hand hygiene and were also trained in all the implementation techniques.

From May 22nd to May 24th, Day 02-04 were kept for training of nurses in which around 100 nurses from different hospitals of Noida and Greater Noida registered as delegates. On Day 02, 20 didactic lectures were delivered and chaired by eminent faculty of Noida NCR and were very well appreciated by all the delegates.

Inauguration function was presided by Directors of Metro group of Hospitals Dr Sonia Lal Gupta and Dr Sameer Gupta, Dr. Kapil Singhal, Dr Peeyush Chaudhary, Dr Kanika Kanwar (Medical Director - Metro Hospitals and Heart Institute) were other dignitaries on the dias. Dr Sonia Lal Gupta lauded the efforts of ISA Noida GB Nagar in partnering for various academic endeavours and pledged to take this annual event to a larger scale from next year onwards. All the dignitaries on the dias addressed the audience and inauguration function ended with vote of thanks by organising secretary Dr Kapil Singhal. Workshops on high-level disinfection of scopes, surgical sterilisation, Hospital Acquired Infections, Care Bundles etc were conducted and all the delegates were given chance to have hands on experience.

On 24th May, Last and final day was an exciting one for the participants-- it was marked by poster presentations, quiz competitions and slogan competition. Total 20 teams participated in quiz competition, 16 posters were displayed and 15 slogans were received. All the participants, delegates and winners were felicitated by Dr Kapil Singhal, Dr Peeyush Chaudhary, Dr Kanika Kanwar Dr Sameer T Bolia, Dr. Deepak Kr Thapa.





Monthly Academic meet held in Apollo Hospital Noida on 24th April, 2025

It was conducted in the offline mode . The speakers were Dr Kanika Goyal , Associate Consultant & Dr Sarvanan, Clinical Associate. The session was chaired by Dr Sameer Bolia who is Senior Consultant Anesthesiology in Apollo Hospital, Noida.

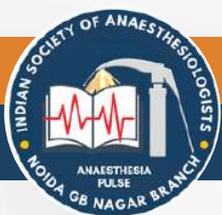
First discussion was by Dr Sarvanan regarding comparative study of epidural dexmedetomidine and fentanyl as additive for 0.2% ropivacaine for postoperative analgesia.

Detailed discussion regarding methodology and pharmacology of study drugs was done and result was found comparative in both study groups .

Second Topic for the session was comparative study of IV propofol and IV dexmedetomidine as adjuvant for spinal anaesthesia. It was a Case series of 150 cases showing comparison of duration of sensory and motor block and also comparison of sedation score in patients receiving i.v. dexmedetomidine and iv propofol in lower limb surgeries. Inclusion and exclusion criteria ,study design and methodology were explained with detailed pharmacology and physiology of study drugs. Conclusion of study was that patients received dexmed were easily arousable with significant longer sensory and motor block in comparison of propofol group.

In both lectures ,use of sedation scores like BIS monitoring and Ramsay scoring and Bromage scale for motor blockage assessment were discussed in detail during methodology. Other uses of fentanyl and dexmedetomidine in intensive care unit and in monitored anaesthesia care cases were discussed. It was a fruitful session overall with around 20 attendees and ended with certificate distribution as token of appreciation to both speakers.





# Clinical Monthly Meet

## May 2025



Monthly Academic meet held in Government Institute of Medical Sciences, Greater Noida on 13th May, 2025

It was conducted in the hybrid mode. The speaker was Dr Priyanshu who is the Junior resident in the dept. of Anaesthesiology in Government Institute of Medical Sciences, Greater Noida. The session was chaired by Dr Savita Gupta who is the Associate Professor in the dept of Anaesthesiology in Government Institute of Medical Sciences, Greater, Noida.

The topic for the session was 'Anaesthetic Management Of A Pregnant Patient With Ovarian Cyst Posted For Exploratory Laprotomy : CASE REPORT AND DISCUSSION' . Case of A 22 year old primigravida with 5 months of amenorrhea with large ovarian cyst was presented at the session. Detailed case was presented along with the challenges such type of a patient had. It was a case of obstetric patient posted for non-obstetric surgery. Anesthetic challenges , preparation of such a patient for OT and best possible management from anesthesia point of view was discussed. Recent advances and expertise of the attendees were discussed along with in such a case. Newer modalities available were discussed. It was a fruitful session overall with around 20 attendees including virtual ones.

## Surgical management of a complex tracheal injury in a polytrauma patient

**Anaesthesiologists:** Dr. Subrat Dam, Dr. Mrinal Kamal, Dr. Manish Kumar

**Surgical teams:**

**ENT;** Dr. Om Prakash/Dr. Ruchi sharma

**CTVS:** Dr Satish Mathew

**Thoracic surgery:** Dr Pallavi Purwar

**Institute:** Kailash Hospital and Neuro Institute, sec-71, Noida

We received a 24 year old man with polytrauma as a result of a house collapse due to severe rains. The patient was received in emergency in gasping condition; immediate interventions in the form of two wide bore intravenous cannulations, a FAST scan, intravenous antibiotics and high flow oxygen administration via face mask were done. Immediate investigations were performed and the following problems identified—

- Cervical spine injury with fracture of odontoid
- Fracture of mandible on both sides with subluxation of left temporomandibular joint
- Moderate pneumomediastinum with right pneumothorax and right upper lobe lung contusion; extensive soft tissue emphysema in the neck on both sides
- Comminuted fracture of body of scapula with fracture of acromion
- Fracture of bilateral humerus and forearm, multiple fracture pelvic region

A multi-speciality approach was taken. FAST was negative while it was decided to conservatively manage the cervical spine injury. Intercostal chest drain was inserted on the right side.

By consensus it was agreed that the immediate concern was tracheal injury.

CT chest showed 6-7mm defect in the right lateral wall of trachea, about 3mm above the carina.

### **Preoperative airway management**

Awake fiberoptic bronchoscopy was done which showed multiple tears in cervical trachea extending to thoracic trachea.

**Plan:** Tracheal repair by ENT surgeons, thoracic team under general anaesthesia

### **Anesthesia:**

Standard monitors were applied following which right radial artery was cannulated. Central venous cannulation was secured in right femoral vein. General anaesthesia was induced with injection etomidate, injection fentanyl and injection rocuronium, maintained on oxygen/sevoflurane and intermittent injection rocuronium. Endotracheal tube (ETT) #8.5 was inserted though there was substantial leak.

Methylene blue test and saline test was performed to check for esophageal tear which was found negative. Laryngeal tear at cricotracheal region was repaired by ENT surgeon while intermittent fiberoptic bronchoscopy was done to assess the status. Finally a thoracotomy was performed to identify the cause of major air volume leak—found to be a circumferential tear in thoracic tear.

At this point the circumferential tear in thoracic trachea gave way and airway was completely lost. Because of a bloody field surgeons and anesthesiologists struggled to gain control of the airway-- saturation dropped significantly. As a last resort left bronchus was identified under fiberscope and left endobronchial intubation was secured with a flexometallic tube (FMT) passed through the neck wound while ET tube was withdrawn.

Oxygenation improved and hovered between 85-90% with one lung ventilation while the difficult repair was performed. Subsequently a repeat fiberoptic bronchoscope guided ETT was passed and the remaining tracheal repair carried out after removing FMT from the neck.

At the end of surgery fiberoptic bronchoscopy was repeated to assess tracheal integrity, FMT replaced with a PVC ETT and patient shifted to ICU on mechanical ventilator.

On 3rd postoperative day further surgeries were performed—open reduction and internal fixation of both upper limbs and pelvis.

### **Extubation**

It was well accepted by the multidisciplinary team that extubation of this patient will be fraught with risk and may be a stormy process. Accordingly on 10th postoperative day the ENT surgeon planned a tracheostomy. However the team of intensivists and anaesthesiologists differed and wanted a trial of extubation with full vigilance and emergency airway cart backup.

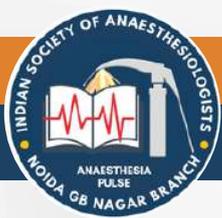
After due discussion, patient was taken to OT where he was extubated and observed for an hour before shifting him back to the ICU.

As on the 20th postoperative day, patient is doing well, hemodynamically stable in the ward.

### **Conclusion**

Our case represents how tricky it is to deal with polytrauma cases with airway injuries. Investigations might well indicate the cause but to actually manage such cases in the OT require clinical acumen, modern devices like fiberoptic bronchoscopy and a multi-disciplinary team approach.

I would like our readers to ask what alternative approaches are possible for repair of a shattered cervicothoracic trachea. Please feel free to reply on the newsletter email address or on whatsapp.



# Online Academic Activity



Dr Ankita Sharma, Senior Consultant, Anaesthesia Department and Critical Care Specialist at Neo Hospital, in collaboration with CLIRNET under the aegis of ISA NOIDA GBN conducted an online live CME on the topic anaesthesia management in emergency and trauma surgeries : A Narrative Review ' on 9th April, 2025.

The feedback received of this session pan India underscores the significant impact of her expertise and the engaging manner in which the presented case-based discussion was done during the session.

Such sessions have greatly enriched our community of doctors, fostering an environment of shared learning and understanding.



# Upcoming Clinical Meets



## ISA GAUTAM BUDDHA NAGAR 3<sup>RD</sup> FOUNDATION DAY & ANNUAL CME 2025

2nd Aug 2025, Saturday | GIMS, Greater Noida



*Theme - "Diverse role of Anesthesiologist  
in health care emergencies"*

[Click to  
Register](#)

**REGISTRATION FEES (TILL 15<sup>TH</sup> JULY 2025):**  
RS 1000 FOR CME | RS 2000 FOR CME + BANQUET  
**ADDITIONAL CHARGES FOR SPOUSE- RS 1500**

Approved 3  
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Hours



CME 8.30 am to 5 pm followed by  
Banquet at Stellar Gymkhana,  
Greater Noida

**Scan the QR Code for Payments**

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(Founder, ISA Noida GB Nagar  
President ISA UP State)



**Dr. Peeyush Chaudhary**  
(President,  
ISA Noida GB Nagar)



**Dr. Mukul Kumar Jain**  
(Vice President,  
ISA Noida GB Nagar)



**Dr. Subrat Dam**  
(Hon. Secretary,  
ISA Noida GB Nagar)



**Dr. Sameer T. Bolia**  
(Treasurer,  
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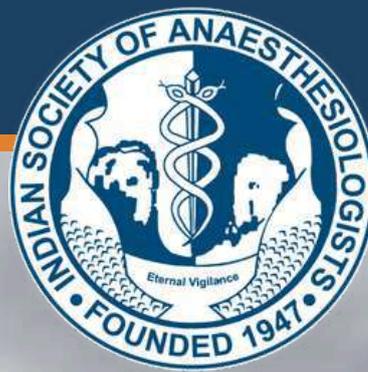
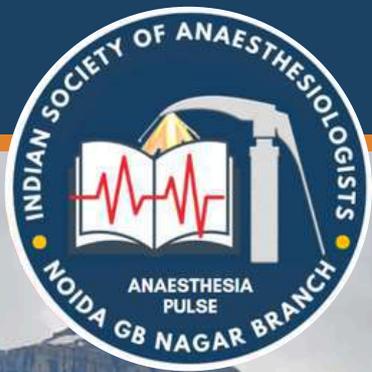
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