

Know Your KEM Colleague

Dr. Amrut Oswal

With an illustrious career spanning over 30 years, Dr. Amrut Oswal is currently the Consultant for the Orthopaedics Department at KEM Hospital.

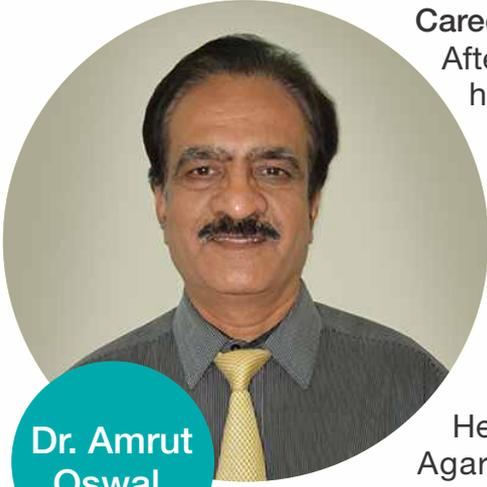
Early Life:

Born in 1957 in Mudhol, Karnataka, he completed his high school graduation from Malojirao Ghorpade School, Mudhol, and attained his MBBS and MS in Orthopaedics from Jawarhalal Nehru Medical College in Belgaum. Simultaneously, he pursued a Diploma in Orthopaedics from Karnatak Medical College in Hubli.

Career Highlights:

After the completion of his education, he moved to Mumbai and got an opportunity to work at the PD Hinduja National Hospital in Mumbai. He worked with Dr. K.T Dholakia, one of the best Hip and Knee Replacement Surgeons and Dr. A.V. Bavdekar, who is known for his proficiency in Spine Surgeries.

He also worked alongside Dr. Sanjay Agarwala to gain experience in the management of complicated fractures with the help of the A-O Technique. With his special expertise in this field, he has been sought after to treat renowned celebrities such as-Harivansh Rai Bachchan, Leela Wati Khanna and Prem Chopra.



Dr. Amrut
Oswal

The KEM Connection:

With his valuable learning, he moved from Mumbai to Pune in January 1991. It was then that he took a step forward to join the KEM Hospital in Pune. His journey from that day to becoming the Head of Orthopedics Department has been nothing short of a roller coaster ride.

Orthopaedic surgeries like polytrauma, minimal invasive surgeries, spine surgeries (fractures, tumor and tuberculosis) and fixation with screws and cages have made him stand out from the rest. He practices Orthopaedics and Joint Replacements at the KEM Hospital and has continued his service for hip, knee and shoulder replacement, and revision replacement since the last 30 years with the latest

Please Welcome

The following consultants have joined us this month.

Dr. Swapnil Kulkarni
MD (Pulmonary Medicine),
DNB (Respiratory Medicine)

Associate Consultant
Respiratory Medicine

Dr. Aradhana Chouvhan,
DNB (General Medicine),
DNB (Neurology)

Associate Consultant
Neurologist

Dr. Reashma Roshan
MD (Internal Medicine),
DM (Clinical Haematology)

Associate Consultant
Clinical Haematologist

materials, such as, oxinium and ceramic implants, which make the joints long lasting and strong. He has a special interest in treating pelvis and acetabulum fractures and has performed over a 100 of such surgeries.

A Charitable Heart:

Apart from such a fulfilling career, Dr. Oswal is also keen on serving the needy. Being a member of the Rotary Club of Pune-East for the past 26 years, he has conducted Polio Camps, where he operated on 100 patients, completely free of cost. For this gesture of compassion and service to humanity, he was awarded the Rotary International Award.

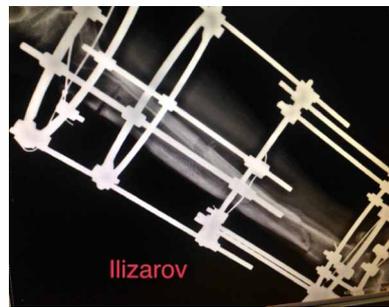
Coming to his personal life, Dr. Amrut's wife is a creative thinker in the field of interior designing. He has two children – a son, who has pursued his Master's Degree and is currently working at Amazon Web Services in Dublin and a daughter, who is an engineer working at Uber Eats in Pune. In his spare time, Dr. Oswal enjoys travelling and reading.



**Ilizarov
For Femur Fracture**



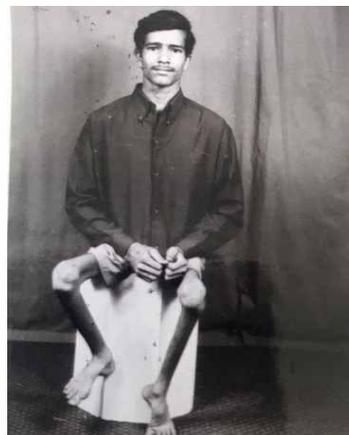
**Acetabulum
Fracture Fixation**



**Ilizarov
For Tibial Fracture**



With Dr. K. T. Dholakia



**Deformity
Before Operation**



After Operation



**Total Knee
Replacement**

**Total Hip Replacement
for Avascular**

**Osteoarthritis Knee
Necrosis of Femoral Head**

The Department of Ophthalmology at KEM Hospital recently conducted a Diabetic Retinopathy Screening Camp at KEM Hospital in the Ophthalmology OPD on December 16, 2018 from 11 am to 1 pm. The camp was conducted in association with the Maharashtra Ophthalmological Society and Poona Ophthalmological Society.

Aim of the Screening Camp:

The camp was organised to provide free Random Blood Sugar Level (BSL) check-up to the patients. The Screening Camp was carried out under the supervision of esteemed doctors such as, Dr. Sanjay Shah, Dr. Nitant Shah, Dr. Aditi Patwardhan, Dr. R D Kolte and Dr. Jignesh Taswala.

A total of 48 patients were screened, and six diabetic patients were detected, among whom five were known diabetic and one was diagnosed with diabetes for the first time.

Diagnosis & Treatment:

After the initial screening, patients with RBSL of more than 200 were screened for Diabetic Retinopathy and four patients, with BSL greater than 200, were found diabetic. Two more patients, with BSL below 200, were found to be diabetic as well. Patients with Diabetic Retinopathy were advised and recommended laser treatment.

The Diabetic Retinopathy of the six diagnosed patients found five of them with a minimal fundus—an anomaly detected from the interior surface of the eye, while one patient had proliferative diabetic retinopathy. A fundus photograph, which involves capturing a photograph of the back of the eye, was also taken.



**Department of Ophthalmology,
KEM Hospital in association with
Poona Ophthalmological Society and
Maharashtra Ophthalmological Society
brings to you a Diabetic Retinopathy
Screening Camp**

**16th December 2018
11:00 AM to 1:00 PM**
Free Random Blood Sugar Level (BSL)
check-up and those found diabetic will be
screened for Diabetic Retinopathy

Venue:
Ophthalmology OPD No. - 104,
1st floor, Banoo Coyaji Building,
KEM Hospital, Pune - 411011

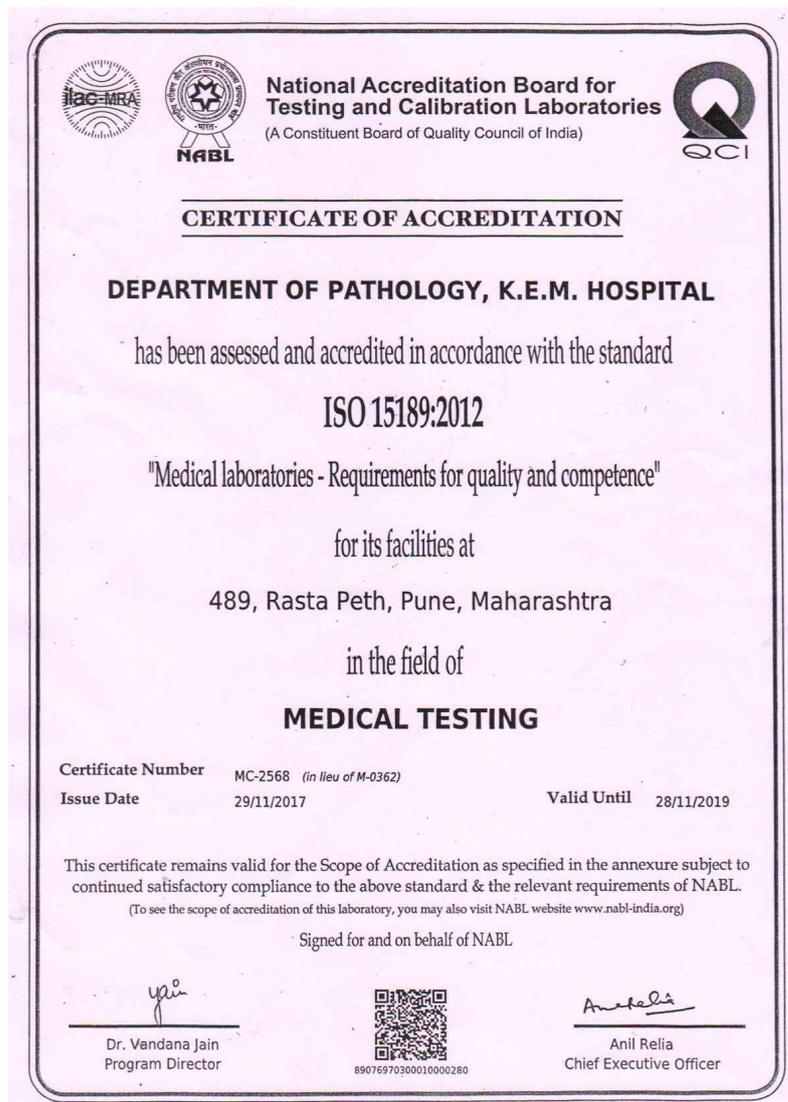


KEM Hospitals' vision of quality and ethics in patient care – also means that we ensure quality check in the different areas of the hospital and we adhere to stringent compliances to ensure our patients receive the best in healthcare all the time. The KEM's Department of Pathology is assessed by NABL every year for ISO-15189 compliance, since 2012. The laboratory has been awarded the Accreditation Certificate to provide medical laboratory services in Clinical Biochemistry, Hematology, Clinical Pathology, Microbiology and Serology and Histo & Cyto-Pathology.

NABL has also authorized qualified personnel to certify the results.

NABL (National Accreditation Board for Testing and Calibration Laboratories) has been entrusted the responsibility of assessing medical laboratory services for ISO-15189 compliance by Quality Council of India.

ISO (International Organization for Standardization) is a worldwide federation of National bodies. The ISO Technical Committee prepares International standards. ISO-15189 was prepared by the Technical Committee ISO/TC 212, Clinical Laboratory Testing and in-vitro diagnostic test systems.



Enuresis or bedwetting is a common childhood problem. Though children usually become dry by day by 4 years of age, night time bladder control takes longer and is not expected until a child is between five and seven years old. However, 16% of 5 year olds have enuresis and by 15 years of age, only 1 to 2 percent continue to wet the bed. Though enuresis resolves as the child matures, this is true only when it is mono symptomatic i.e. not accompanied by daytime symptoms. In addition, the age at which enuresis is considered a "problem" depends on the perspective of the child and the parents. For most children, enuresis is troublesome when it interferes with their ability to socialize with friends. It has a significant psychosocial impact on the child, in particular the fear of being discovered by others and experience a loss of self-esteem. For this reason alone, enuresis must be addressed whenever the child is brought to medical attention. Urotherapy (basic non-pharmacological therapy) is the first line of management and alarm therapy followed by drugs when necessary. The following brief feature was written for public awareness.



मुले बिछान्यात सू करत असतील तर.... दुर्लक्ष करू नका.

बिछान्यात सू करणे म्हणजे काय ?

- * हा आजार नसून समस्या आहे. सर्वसामान्य मुलांमध्ये आढळू शकतो. पण बऱ्याचदा पालकांकडून त्यांच्याकडे दुर्लक्ष किंवा टाळाटाळ केली जाते.
- * ५ वर्षांपेक्षा लहान मुलांमध्ये लघवीवर नियंत्रण ठेवण्याचे तंत्र विकसित नसते तसेच ते कपड्यात न कळत लघवी करतात.
- * वयाच्या ५ वर्षात जर मुलांना बिछान्यात सू होत असेल तर ही लक्ष वेधनीय बाब आहे.

असे काय होते ?

- * निश्चित कारणे माहित नाहीत. पण हे नक्कीच मुलांच्या आळसामुळे नाही. * - ५ वर्षांच्या मुलांमध्ये हा विकास प्रकृतीतला टप्पा आहे. * मुत्रसंस्थेचा आजार माणसिक कारणे उदाहरण असुरक्षितता, पालकांची लक्ष वेधून घेण्याची इच्छा, रात्री लघवीला बाहेर जाण्याची भिती इत्यादी * भावनिक समस्या - कौटुंबिक असू शकते.

लक्ष देणे का गरजेचे आहे ?

- * मुलांना लाजिरवाणे व तणावपूर्ण वाटू शकते.
- * ते स्वतःला दोषी समजण्यास सुरुवात करतात.
- * त्यांच्यात सामाजिक चिंता निर्माण होते.
- * त्यांचे हसू होऊ शकते.
- * अभ्यासात व इतर गोष्टींमध्ये लक्ष लागत नाही.
- * ते आपला आत्मविश्वास गमवतात. रात्रीच्या सहलीला किंवा नातेवाईकांकडे जाण्यास संकोच करतात. त्यांच्या झोपेवर परिणाम होतो. ह्या गोष्टी त्यांचे व्यक्तिमत्त्व विकास व अंतरमनावर प्रभाव टाकतात.

पालकांची प्रतिक्रिया काय असते ?

पालक बऱ्याच मुलांना रागवतात, तिरस्कार करतात. त्यांनी मुलांच्या मनात भिती निर्माण होते व त्यांची समस्या अजून वाढते. पालकांनी नेमकं काय करावे ?

आपल्या मुलांना दोष देऊ नये, त्यांना मारू किंवा रागवू नये, त्यांना शिक्षा देऊ नये व त्यांचा तिरस्कार करू नये, इतरांसमोर त्यांचे हसू करू नये, त्यांना टोचून बोलू नये व टोमणे मारू नये, पालकांनी समजून घ्यावे की मुले स्वतःहून बिछाना ओला करत नसतात., हे करून पालक मुलांना बिछाना ओला करण्याच्या दुष्ट चक्रातून बाहेर काढू शकतात., भावंडाना समजावून सांगणे. त्यांनी मुलांना चिडवू नये मुलांना आश्वासन व धीर देणे, त्यांना कळवून देणे की तो किंवा ती एकदा नाही की त्याला ही



Team Pediatric Nephrology
King Edward Memorial (KEM) Hospital, Pune.
Centre: Dr. Jyoti Sharma , Consultant Pediatric Nephrologist &
Dr. Jyoti Singhal, Junior Consultant.
Dr. Nivedita Pande (Trainee), Dr. Punit Chajjed (Trainee)

समस्या आहे., जर घरातल्या कुठल्याही वयस्क व्यक्तीला लहानपणी ही समस्या होती तर त्यांनी मुलांना सांगावे याने मुलांवरचा तणाव व चिंता कमी होते.

उपाय :-

मुलांना दिवसा जास्त पाणी देणे व संध्याकाळी रात्री पाण्याचा उपभोग कमी करणे, झोपण्याआधी साखर व कॅफीनयुक्त पदार्थ (ज्यूस, चहा, कॉफी), कोल्ड्रिक्स, सोडा इत्यादी) देऊ नये, मुलांना झोपण्याआधी लघवी करण्यास देणे, रुममध्ये खुप अंधार असू नये, जेणेकरून मुल रात्री लघवीसाठी जाण्यास घाबरू नयेत., जरी त्याने बिछान्यात लघवी केली तर पालकाने शांतपणे वागणे व सकारात्मक रहाणे., मुलाला बिछाना बदलण्यास सहभागी करून घेणे, ज्या दिवशी बिछाना ओला केला नाही. त्यादिवशी त्याचे कौतुक करावे.

डॉक्टरांकडे कधी न्यावे ?

* जर मुलाला, पालकांना अत्यंत काळजी वाटत असेल किंवा चिंता असेल तर ३ वर्षांपुढील मुलांना डॉक्टराकडे नेणे, ६ महिने कोरडे राहून परत ओले करायला लागल्यास दिवसा जागे असताना ओले करत असताना रात्री घोरत असेल, लघवी करताना दुखणे, आग होत असेल दिवसा, रात्री वारंवार लघवी करणे.* मुलांचा अवरोध होणे (पोट साफ न होणे) वरील उपाय उपयोगी ठरत उपयोगी ठरत नसतील तर " हे एक मुक दुःख आहे ज्याचा प्रभाव, मुलांच्या भवितव्यावर असू शकतो "

शिक्षेपेक्षा क्षमेनेच काट्यभाग साधता येतो.

To,
The Management,
KEM Hospital,
Pune

Dear Doctor Staff,

We wish to thank you from the bottom of our hearts for the tireless and selfless support and care provided to my son Mr. Kunal Sachdev.

Your timely service made it sure that we can move him to Delhi for Further Medication and Care.

Thanking you once again and best wishes to everyone.

Warm Regards,
Rajan Sachdev