The two years ..... 2008 and 2009

In 2002 we set the goals for a decade and we are coming close to the finish line. So perhaps we should assess the work done, using those stated goals as the yardstick of performance.

We wished to establish the role of Plastic Surgery and Microsurgery in acute trauma. We seem to have done fairly well. We have been able to serve more patients every year than the previous years ever since we started in 1991. In 2009, our unit crossed the milestone of 6000 surgical procedures per year and this has been possible due to the close co-operation with the departments of Anaesthesia and Orthopaedics. It is the TEAM which has brought forth this result and sustained the growth.

We intended to increase public awareness of the impact of the recent advances in Plastic Surgery. This remains an unfinished challenge because even today it is not uncommon for people to ask us 'What does a Plastic and Reconstructive Surgeon do?' Many remain in the dark of the possibilities of Reconstructive Surgery.

In our last activity report we put in real patient histories which we face on a daily basis. It was well appreciated and this has encouraged us to continue the format in this issue. The coming two years will see us take up the office of the President of the National Plastic Surgery and Hand Surgery associations and it will give us further avenues to spread the awareness and potential of the specialties.

We strive hard to nurture talent and provide opportunities for every team member to reach their full potential. Many of the staff have taken up leadership positions in professional associations and we are sure that every one of them will give their best for the growth of the specialty.

We aimed to become one of the preferred centres for training in Plastic and Microsurgery on a global level. The volume of work, combined with quality helped us attract visitors and trainees. In the two years under review we had 181 visitors and trainees, out of which 110 were from abroad. The microsurgery training lab continues to be popular. Since its inception in 2000, 337 surgeons from 33 countries have been trained in this lab. While many hospitals take pride in treating patients from abroad, we take satisfaction in having made Coimbatore a destination for advanced teaching and training.

One thing continues to be the same as ever - that is our commitment to patient care and putting patients first in everything that we do. We are convinced that it is that which has brought us to this level.

We wish to create a cult of excellence and for that we are guided by what **JRD Tata said, 'Aim at perfection and only then you will reach excellence'**

S. Raja Sabapathy

Dr. S. Raja Sabapathy

Our Vision

To showcase to the world the best in patient care, surgical expertise, academics, medical ethics and state of the art technology.

To be a centre which will be a pride of our country.

Our Mission

To provide quality treatment at affordable cost so that the expertise will be available to every citizen of our country.

Growing organisations in any field must constantly evolve, accept or even seek new ideas, new visions and new enthusiasms.

JRD Tata

Patient Care

**The interest of the patient is the.
only interest to be considered**

Dr. William J. Mayo

We make living possible.

For some, fingers are everything in life.

Who would discount the role of fingers in every day life? All of us value our hands and fingers. We use them to eat and drink, earn our living and communicate to the world with them. For Nagarajan, fingers are much more than that. Because he is blind. He sees the world through them.

Do you know how remarkable are your fingertips? The sensory perception is so acute that no computer can match the speed and the accuracy with which we differentiate hot and cold, the grades of texture of surfaces and objects. In the blind the acuity develops higher and they can distinguish two points from one another at a distance of less than 2 mm. That is the basis of their teaching aid Braille.

Nagarajan, as he arrived to the hospital with chopped off fingers.

Though Nagarajan was blind he was earning a living by working in a printing press where he was trained in book binding. He has been doing it for 16 years. Accidents do happen and on the fateful day all the four fingers of his left hand and part of right index , middle and thumb were amputated. While this is a very serious injury for anyone, it is a disaster for a blind person.

The totally amputated fingers of the left hand.

In the left hand all the four fingers were cut off at the base. We reattached all the four fingers with the help of microsurgery. The surgery took 9 hours. The damage to the amputated parts in the right hand was severe and we did reconstructive surgery to make them heal uneventfully.

3 weeks in hospital and 6 months of rehabilitation went on. He needed assistance to come to the hospital for physiotherapy and one day we found that he managed to come alone. We then knew the rehabilitation has been a success.

The rejoined fingers of the left hand.

Now you will be amazed to see him. He sells incense sticks. With the fingertips he differentiates different brands and flavours – by the feel of the wrappers he distinguishes sandalwood from rose and lavender from jasmine. What is more, with the reattached fingers distinguishes 10, 20, 50 and 100 rupee notes and hands over the change to the buyers! At the back of this successful rehabilitation lies 9 hours of microsurgery and 6 months of physiotherapy. You will agree that the effort has been worthwhile.

In his new job selling incense sticks.

We just don't reattach amputated fingers

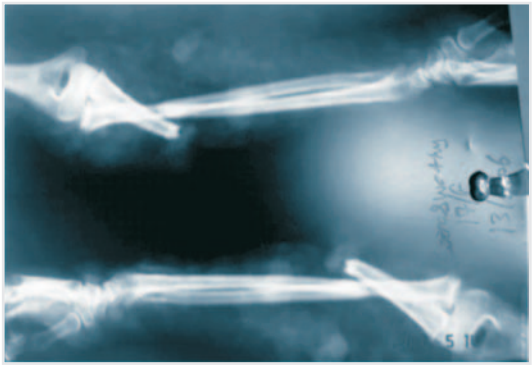
We make living possible.

We keep dreams alive

Making of a Doctor.

Saraswathy is a brilliant girl. She always dreamt to be a doctor. She was in her school finals and knew that she needed to put in hard work and stand ahead in the class. It needed preparation and she was taking special coaching classes. One day on the way to the class, she was involved in an accident and her right forearm was caught beneath the tyres of a bus. She lost all the skin covering the forearm, many muscles were in shreds and some irreparably lost. It looked as if a full stop was put on the way to her dreams.

Badly crushed and mutilated hand.



The broken bones of the forearm.

We may not realize that our hands are the greatest of all instruments in the world. Powered by the human brain, it is irreplaceable. Even in this advanced computer era, we are far from producing a satisfactory hand prosthesis. In our two decades of work at Ganga Hospital, we have realized that no effort is too big to salvage the hand.

The reconstructive surgical team set to work immediately. All the crushed tissues were removed. The wound was full of road dust and it took 2 hours just to get rid of the contaminants. The fractured bones were fixed with plates and screws. What was lost in a fraction of a second took nine operations spread over ten months to reconstruct. We transferred tissue from the abdomen and transferred muscles from one side to the other to make the hand work better. She lost a year, but not her dreams. With determination and very supportive parents she inched on.

Fully healed and functional hand.

Can make a fist like before.

Writes her exams comfortably

Now she is in the pre-final year in medical college. She has passed her exams effortlessly by writing with her reconstructed right hand. Patients who undergo major reconstruction do come regularly for follow up. Last year also she came but for a different purpose. She came to do a study sponsored by Indian Council of Medical Research! She wants to become a surgeon and she is pressing us to provide her the best. The determination of such patients drives us to push the boundaries of care.

Training to be a good doctor

We just don't reconstruct injured hands

We keep dreams alive.

We bring back smile to the face

A Face to face the World.

Accidents provide a lot of challenges to the reconstructive surgeon. We knew we had a great challenge in hand when 5 year old Keerthika came to us. She was wearing a mask and her frock was wet with drooling saliva. She had a tracheostomy tube (to enable her breath and not choke) and hence was unable to speak. A few weeks ago she mistook a cracker to be a sweet and tried to bite it. It resulted in a blast totally destroying her lower lip, most of her upper lip and the jaw bone was in pieces. We some times use the term 'blown to pieces'. In such cracker blast injuries, not only the face is blown to pieces, but also the whole family's life is blown to pieces.

Can't talk, can't eat, can't control the drooling of saliva she was in a pathetic condition. When a child's face has to be covered while coming to the hospital to prevent curious glances from on lookers, life for the family can be miserable. We set in to work. Initially the tissues available but displaced were put in their position. The loose bits of jaw bones were brought together. Now she needed lips.

For a lay person it is easy to underestimate the amount of tissue required to create lips and the efforts needed to make them function. The tissues that make up every part of the face be it the lips, the nose, the ears or the eyelids are so special that similar tissues do not exist in other parts of the body. When the loss is small it is possible to share from the other lip or side but when the defect is large as in the case of Keerthika, tissues have to be brought from other parts of the body.

Microsurgery offers hope for these patients and enables us to transfer large amounts of tissue from one place to another. But our Keerthika had more problems. The injury was so severe that it had destroyed the vessels in the surrounding areas making microsurgery a very difficult option. We then resorted to a technique founded 400 years ago whereby tissues from the inner part of the arm is brought to the face in stages. She stayed in and out of hospital for 6 months. It is just not medical care that takes these children through. We

even provided the toys that she liked.
Such children and the families can demonstrate profiles in courage. When we failed to obtain the expected outcome in one stage and had to redo it again, the message was greeted only with an understanding smile. That tenacity could be stunning and humbling. Now she goes to school, smiles and plays like any other child. Her mother who had cried in loneliness many a night said that she is able to sleep now.

Tagliacozzi (1545 - 1599), the Italian surgeon who described the technique which we did for Keerthika said, 'We bring back to wholeness what nature gave, but chance destroyed, not that they may charm the eye but they may be an advantage to the living soul, and the features fulfill their offices according to the nature's decree'

It was told more than 400 years ago. People say that things change. They do. But human and emotional needs do not change. Keerthika's brush with disaster proves that.

We just don't reconstruct blown up faces

We bring back "Smile" to a family.

We create functional units

We create thumbs.

4 year old Vignesh loves to play with the ball. Like any child of his age he does not know how much his thumb is important to hold the ball. He learnt it the hard way.

While at play one day, his hand accidentally touched a high voltage wire and he suffered major electrical burns. The entry point was the right thumb and it bore the brunt of the attack. 20% of his body surface suffered burns. Electrical burns are usually deep and he required good acute care and skin grafting. Only thing that we could not save was his right thumb which was damaged beyond salvage.

The charred right thumb due to electrical burns.

The hand before thumb reconstruction.

All of us know the value of the thumb but no one has expressed it better than the famous scientist Sir. Issac Newton who said, 'In the absence of any other proof, the thumb alone would convince me of God's existence'. In the length, strength and stability of the thumb lies the function of the human hand. Just try to strap your thumb to the palm for half an hour and find out how difficult it is to carry on.

Fortunately microsurgery can help to create thumb by transferring one of the toes from the foot to the position of the thumb. It is a demanding operation that takes about 6 hours to do but when done well it is one of the most satisfying procedures in hand surgery.

3 months after the injury when all other wounds healed well we got Vignesh readmitted for reconstruction of the thumb. We transferred his right great toe to the position of the right thumb. The toe is harvested from the foot by isolating the blood vessels, nerves and the tendons and the toe is removed through the joint at the base of the toe.

The great toe harvested from the foot just before reattaching to the hand

"Now I have ten fingers"

Great toes make Great thumbs!

It was reattached in the new position by fixing the bone and repairing all the nerves, tendons and brought to life by joining the blood vessels. It is a joy to see the harvested toe become pink and back to life as a thumb.

It is now more than a year after the surgery. He plays cricket as before. He can hold the ball to bowl. People who see him for the first time rarely notice the difference. In the foot also he does not have any problem. He runs to the school.

His parents are naturally happy. Microsurgery put to rest all the doubts and questions they had on the day when he arrived to the hospital – Will he write like before? Can he eat? Can he play? He does all of them thanks to the advances in microsurgery.

'Now I can throw the ball'

We just don't create thumbs

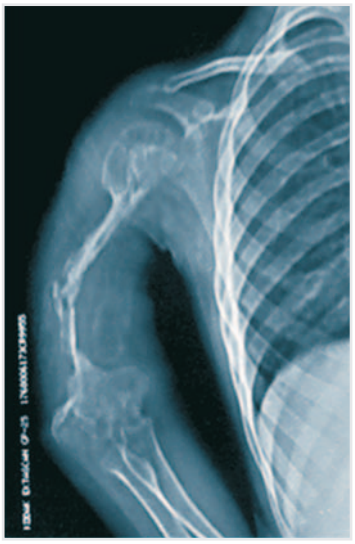
We help a child to play with the ball.

We bridge big bone gaps

We convert a flail hand into a useful hand.

Arigeet Ghosh is 3 years old and hails from a village in West Bengal. For his age he has spent more time in and out of hospitals than most people would do in their life time. When he was just 9 months old he developed infection in his right arm. Partly due to delay and partly due to inadequate treatment the infection spread to the bone and it destroyed significant part of the bone in the arm. The weak bone broke, and so much got resorbed that the limb became flail and was hanging without support. He had a good hand to use, but was useless since it can't be positioned in the place where it has to be.

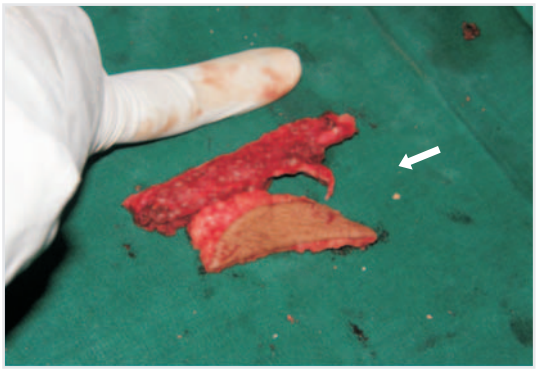
With no bones the arm could be twisted anyway



X-ray showing destroyed bone of the arm

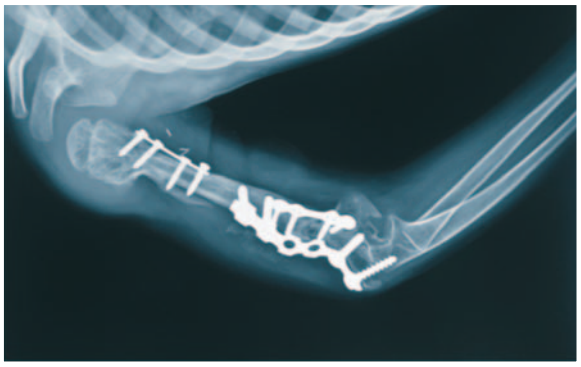
As if the problem by itself was not big enough, more setbacks were in store for him. Multiple attempts were made to bridge the bone gap by taking bone from the hip region and when that failed, another centre tried fibular bone graft (the thinner of the two bones in the leg). When one failed they tried the bone from the other leg. Unfortunately it again failed. So, 6 to 7 operations later he was with a flail limb and with bone graft sources also depleted. With every operation the gap was becoming bigger. Then the big disaster struck. His father died in an accident.

Treatment seemed to be reaching a dead end. But his grandfather was not willing to give up. Through enquires he found his way to our centre. By then one of the bones in the leg, where originally the bone had been taken had reformed. Arigeet required significant length of bone. We thought we would take a chance by harvesting that bone with its supplying blood vessels to bridge the gap.



The small bone of the leg taken with its blood vessels (arrow) and an island of skin from the leg. The length of the bone required is just the length of the surgeon's little finger.

Bone grafts are very common procedures. Normally the grafted bone survives in its new place by getting blood supply in its new place. But when the gap is big, this type of bone graft may not work.



The bone has united and consolidated well.

Arigeet with his loving grand father.

Microsurgery provides an answer for this problem by enabling us transfer large segments of bone with its blood supply. The bone is taken with its supplying blood vessels and made to live in the new place by reattaching the blood vessels in the new area. The transferred bone ends unite like a fracture. This has been a boon to many and has saved many limbs.

We took the bone from the right leg with its blood vessels and transferred to the right arm. The arm was very scarred due to multiple surgeries but we managed it. The bone survived to the joy of all of us. Gradually the bone consolidated and became strong. Joint efforts of skilled plastic and orthopaedic teams is essential for success in such cases.

Arigeet is a very happy boy. His grandfather is happier. Travelling thousands of miles to another city is not an easy decision to make when you are poor in resources, don't know the local language and not sure of the outcome. We asked him how he made the decision to come. He said that when there is abundant love and great faith in God nothing can stop anyone from achieving what they wanted. He wanted to do what his son would have done had he been alive and felt that it was his **'duty'**.

He can now play like any other child.

We just do not bridge big bone gaps

We help a grandfather perform his 'duty'.

Surgery statistics

Detail	2008	2009
Total Number of surgical procedures done	**6178**	**6655**
Total Number of new hand surgery patients	**2239**	**2393**
Total Number of new general plastic surgery patients	**2090**	**2431**

Hand Surgery

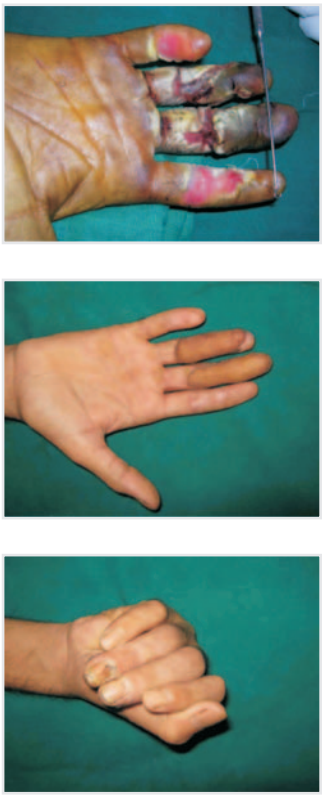
A committed 24 hour hand injury service is run by the department and it is facilitated by the team of surgeons, anaesthesiologists and availability of dedicated operation theatres. The assistance of a very skilled orthopaedic service is always available for the management of major proximal injuries. A total of 6 operation theatres are available round the clock for the Plastic and Hand injury service and it enables us to reduce the waiting time for the procedures. A summary of important surgical procedures are given below. It is by no means exhaustive, but provides the number of important procedures done during the two years (2008 and 2009).

Finger Injuries

Nail bed repair	-	411
Nail bed graft	-	3
Straight triangular flap	-	143
Oblique triangular flap	-	100
Cross finger flap	-	281
Littler Island flap	-	1
Reverse Dermis flap	-	4
First Dorsal Metacarpal artery flap	-	4
Transposition flap	-	23
Shortening and closure	-	352
Split skin graft	-	121
Full thickness graft	-	18
Palmar graft	-	2
Ray amputation	-	15

Non microsurgical flaps in acute hand injuries

Lower Abdominal and Groin flaps	-	274
Transposition flaps	-	29
Posterior Interosseous flaps	-	20
Reverse Radial artery flap	-	6
Pedicled Latissimus Dorsi flap	-	9
Lateral Arm flap	-	2
Becker flap	-	1



Devitalised skin of middle and ring fingers following an industrial accident. Good functional outcome following a thin pedicled abdominal flap

Surgery on Flexor Tendons

Flexor Tendon repair	-	139
Flexor tendon grafting	-	16
Flexor tenolysis	-	7
Major flexor tendon reconstruction	-	8

Surgery on Extensor Tendons

Mallet finger correction	-	45
Extensor tendon repair at other levels	-	189
Extensor tendon grafts	-	9
Extensor tenolysis	-	20
Secondary surgery for finger deformities	-	8

Tendon transfers - 83

Surgery on the Bones

Moulding of Fractures	-	44
Zimmer splint traction	-	21
Fixation of Fractures		
Terminal Phalanx	-	9
Middle Phalanx	-	119
Proximal Phalanx	-	335
Metacarpals	-	226
Bennett's fracture	-	24
Rolando fracture	-	2
Scaphoid	-	12
Dislocations		
Lunate	-	3
Carpo Metacarpal Joints	-	29
Metacarpo Phalangeal Joint	-	14
Proximal Interphalangeal Joint	-	16
Distal Interphalangeal Joint	-	4
Thumb Interphalangeal Joint	-	5
Major Carpal Injuries	-	7
Proximal Row Carpectomy	-	11
Total Carpectomy	-	1
Arthrodesis of Joints		
Wrist	-	13
CMC Joints	-	16
MCP Joints	-	14
PIP Joints	-	58
DIP Joints	-	33
Thumb IP joint	-	12
Surgery on Ligaments		
Ulnar collateral ligament injury of thumb	-	10
PIP joint collateral ligament release	-	26
Volar plate release (PIP joint)	-	15
Corrective osteotomy (in fingers)	-	15
Bone graft to phalanges and metacarpals	-	29

A 12 year old boy from Bangladesh suffered electrical burns and lost a long segment of all flexor tendons, median and ulnar nerves. Arrived with an insensate stiff hand with poor quality skin around the wrist

Supple skin cover was provided by an abdominal flap. It was followed by reconstruction of flexors (20 cm defect) by fascia lata tendon grafts,an opponensplasty and nerves by sural nerve grafts. Achieved a very powerful grip and significant sensation.

He now has a hand capable of holding small and big objects and even bending a flexibar. In his father's words "The surgery has changed him from a withdrawn personality to a normal child of his age".

Post Trauma Secondary Reconstruction	-	369

Surgery on the Nerves

Digital Nerve Repair	-	110
Median Nerve Repair	-	41
Ulnar Nerve Repair	-	56
Radial Nerve Repair	-	15
Sciatic Nerve Repair	-	1
Nerve Grafts		
Digital Nerve	-	1
Median Nerve	-	23
Ulnar Nerve	-	14
Posterior Tibial nerve	-	2
Common Peroneal Nerve	-	2
Neurolysis		
Ulnar Nerve	-	6
Median Nerve	-	5
Common Peroneal Nerve	-	2
Neurolysis in Compartment Syndrome	-	9

Congenital Hand Surgery

Syndactyly separation	-	35
Polydactyly	-	7
Paediatric Trigger thumb & fingers	-	25
Thumb Duplication	-	1
Radial club Hand – Radialisation	-	4
Pollicization	-	9
Hypoplastic thumb – Ligament reconstruction and Opponensplasty	-	2
Symbrachydactyly	-	16
Free toe phalangeal transfer	-	2
Macrodactyly	-	5
Camptodactyly	-	3
Clasped Thumb	-	1
On top plasty	-	1

Surgery for Spastic Hands

FCU to ECRB transfer	-	23
FCU to EDC transfer	-	1
Flexor release / fractional lengthening	-	14
Pronator release	-	2
Pronator rerouting	-	8
Thumb in palm	-	1
Plication / rerouting of EPL	-	3
Infantile Hemiparesis – Pectoralis release	-	1

Complex Congenital Syndactyly - Right hand

Complex Congenital Syndactyly with Cleft Hand - Left side

All fingers were separated and thumb creation was done by 'policization' of the radial most finger on both sides. The child uses the hand almost normally.

Surgery for Rheumatoid Hand

Dorsal Synovectomy	-	9
Flexor synovectomy	-	12
Trigger fingers	-	68
Trigger thumb	-	8
MCP joint replacement	-	2
Centralisation of Extensor tendons	-	2
DeQuervains disease	-	12
Biceps rupture	-	1

Tumours

Ganglions	-	30
Osteoid Osteoma	-	1
Glomus tumour	-	6
Neurofibroma	-	1
Schwannoma	-	5
Enchondroma	-	3
Giant cell tumour of tendon sheath	-	4
Giant cell tumour (PPx)	-	2
Malignant Fibrous Histiocytoma	-	1
AV Malformation	-	4
Haemangioma	-	2
Pseudoaneurysm	-	2
Lipoma	-	2
Implantation dermoid	-	1

Amputations

Above elbow amputation	-	38
Below elbow amputation	-	35

Miscellaneous

Carpal tunnel release	-	100
Guyons canal release	-	18
Cubital tunnel release	-	7
Thoracic outlet syndrome (cervical rib excision)	-	5
Meralgia parasthetica	-	1
Congenital torticollis release	-	1
Pterigium Elbow	-	1
Dupuytrens contracture release	-	4
Foreign bodies	-	16
Surgery for infections	-	49

Malignant Fibrous Histiocytoma of the thumb treated by radical excision. The index finger is unsupported due to the excision of the second metacarpal

The index pollicized and the veins of the dorsum of thumb were linked to veins at the wrist.

The gap in the first web space was covered with posterior interosseous flap.

The polizicied index acts as static post for his day to day activities.

Reconstructive Microsurgery

The years 2008 and 2009 saw the development of a bigger team to perform microsurgery procedures and this enabled us to spare more time for complex reconstruction procedures. The increased norms of industrial safety has shown the welcome trend of reduction of industrial injuries. We have pushed the boundaries of care by salvaging more complex injuries and striving for better outcome in our patients.

Statistics of 2008 & 2009

Replantations		
Fingertip	-	3
Fingers	-	69
Thumb	-	23
Ring Avulsion amputation	-	2
Transmetacarpal level	-	2
Hand	-	9
Forearm	-	9
Arm	-	1
Heterotopic replantation	-	9
Total	**-**	**127**
Revascularisation		
Digital artery	-	116
Transmetacarpal level	-	6
Ulnar artery	-	49
Radial artery	-	36
Brachial artery	-	30
Axillary artery	-	4
Femoral artery	-	4
Popliteal artery	-	14
Posterior tibial artery	-	3
Anterior tibial artery	-	1
Vein grafts	-	13
Venous augmentation	-	3
Total	**-**	**279**
Microsurgical Free Flaps		
Latissimus Dorsi	-	99
Gracilis	-	165
Free Fibula	-	9
Toe transfer for thumb and fingers	-	9
Radial artery forearm flap	-	6
Anterolateral thigh flap	-	11
TDAP flap	-	1
DIEP flap	-	2
Lateral Arm flap	-	1
Total	**-**	**303**

The department has extended the indications for replantation of proximal crush and avulsion amputations.

After secondary nerve surgeries and therapy, patient is able to use the left hand for basic activities. There is no social deprivation.

Brachial Plexus Surgery

One of the fields which showed high volume increase in the years 2008 and 2009 is our work on Brachial Plexus injury management. Availability of quality therapy support helps in assessment and post op rehabilitation. Brachial plexus registries with organized folders for photographs have been set up.

Statistics of 2008 & 2009

Adult:		
Exploration with primary repair	-	1
Neurolysis	-	10
Intraplexal : Nerve grafting	-	9
Neurotizations:		
Oberlin's transfer	-	55
Spinal Accessory to MCN	-	25
Spinal Accessory to SSN	-	39
Triceps to Axillary	-	28
Ulnar to Triceps Nerve	-	1
ICN to MCN	-	2
ICN to Triceps Nerve	-	1
ICN to Pectoralis Nerve	-	1
Free Functioning Gracilis Transfer	-	5
Secondary Procedures		
Steindler's flexor plasty	-	1
Trapezius transfer	-	13
Deltoid to Triceps	-	6
Wrist arthrodesis	-	7
I CMC joint arthrodesis	-	4
Brachial Plexus tumors	-	2
OBBP		
Neurolysis	-	2
Nerve Grafting	-	2
Spinal Accessory to SSN	-	2
Oberlin's transfer	-	3
Botox for Biceps	-	21
Mod Quad Release	-	68
Triangular Tilt	-	22
Humerus Derotation osteotomy	-	3
Fore-arm Ostetomy	-	1
Deltoid to Triceps	-	1
Biceps Rerouting	-	3
FCU to EDC	-	1
Total number of patients operated	-	**271**

A young person with upper trunk brachial plexus paralysis, with inability to lift shoulder and bend the elbow

Multiple nerve transfers done

A well rehabilitated patient

Non-Hand Plastic Surgery Procedures
Maxillofacial Surgery

We run a busy Maxillofacial Trauma service. A beginning has been made in Orthognathic procedures in 2009 and we are happy about the expansion of the scope of the service

Trauma		
Panfacial Injuries	-	19
Nasomaxillary Complex	-	5
Nasal Bone Elevation	-	58
Fracture Zygoma – elevation	-	57
Fracture Zygoma – ORIF	-	50
Fracture Mandible – ORIF	-	128
Fracture Mandible – IMF	-	9
Dentoalveolar Fracture Stabilisation	-	17
Fracture Maxilla – ORIF	-	29
Orbital Floor Reconstruction	-	7
Fracture Nasoethmoid Complex - ORIF	-	2
Fracture Frontal Bone – ORIF	-	7

Orthognathic Surgery & Distraction Osteogenesis		
Maxillary Osteotomy (Le Fort I)	-	4
Mandibular Ostetomy (Sagittal Split)	-	3
Genioplasty	-	2
Mandibular Distraction Osteogenesis	-	2
Surgical extraction of impacted wisdom teeth	-	52

Hypoplastic maxilla secondary to cleft lip and palate deformity. Underwent Bimaxillary Osteotomy (Le Fort I Osteotomy & Bilateral Sagittal Spilt Osteotomy)

Head and Neck

The year 2008 saw the development of collaboration between the Onco Surgery unit of GKNM Hospital, Coimbatore and our Unit. 27 major excision and reconstruction procedures were done in our unit and was followed up later by the Onco Surgery team.

Face and Scalp lacerations	-	253
Oral Cancer reconstruction	-	27
Cheek and forehead local flaps	-	10
SSG to face	-	10
Facial scar revision	-	8
Microtia ear reconstruction	-	1
Partial ear reconstruction	-	3
Surgery for facial nerve palsy	-	1
Tagliacozzi flap	-	1
Hairy naevus face excision / reconstruction	-	5
Parotidectomy	-	3
Sebaceous cysts / Dermoid cysts face	-	10
Torn ear lobe repair	-	12
Ear lobe keloid reconstruction	-	4
Haemangioma / AVM face	-	7

Squamous cell carcinoma involving the right cheek. Full thickness excision reconstructed with folded forearm flap

Cleft Surgery

Our cherished partnership with the organisation Smile Train has enabled us to reach larger number of children in the years 2008 and 2009.

Lip repair	-	72
Palate repair	-	73
Secondary cleft deformity correction	-	23
Abbe flap	-	4
Palatal fistula closure	-	6
Alveolar bone grafting	-	1
Pharyngoplasty	-	2
Craniofacial clefts	-	5

One hour surgery - A smile restored for life

Lower limb trauma

The collaboration between the Departments of Plastic Surgery, Orthopaedics and Anaesthesiology has been acclaimed as one of the best by the peers. This synergy has enabled us to hone our skills to deliver better care and obtain better outcome. The input of senior level persons from the three disciplines are available all the time.

SSG to lower limb	-	457
Fasciocutaneous flaps	-	275
Gastrocnemius flap	-	72
Soleus flap	-	19
Sural artery flap	-	27
Lateral calcaneal artery flap	-	7
Cross leg flap	-	15
Ext digitorum brevis flap	-	3
Abductor Hallucis flap	-	2
Perforator flaps	-	4
Propeller flaps	-	3
Major degloving injury to lower limb	-	7
VAC system of closure	-	36
Pressure sores in the foot	-	3

A major crush injury of the foot and ankle with fractures and extensive soft tissue loss

The protocol of immediate radical debridement, skeletal fixation and early micro surgical (Lat. Dorsi Free flap) flap cover has provided an excellent outcome.

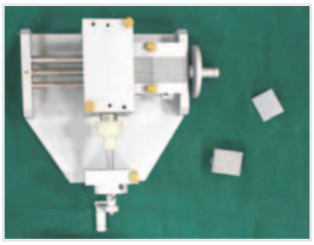
Burn Surgery

The unit is now fully equipped both in infrastructure and personnel to take care of major acute burns. The special skills available in the department is used to obtain good functional outcome in the management of post burn contracture of hands and in rehabilitating electrical burns injuries. Facility to make custom made compression garments compliment the care.

Early Surgery		
Tangential Excision and Grafting	-	43
Early Surgery for Burns	-	24
Early Surgery for Electrical Burns	-	10
Chemical Burns	-	2
Friction Burns	-	4
Escharotomy	-	1
Post Burns Scar Contracture Release and Secondary Surgery for Electrical Burns	-	107

The New additions to improve burns care

Padgett Dermatome



Meek Micro Grafting Apparatus

Diabetes Related Surgery

The thrust for future development of work is towards the care of diabetic patients. Availability of experienced diabetologist on our panel, skilled anaesthesiologist to take care of co-morbid conditions and micro-surgical skills help us render better care. In 2008, we have started a in-house foot wear manufacturing facility to provide comprehensive care to the patients.

Tarsal Tunnel Release	-	16
Major Surgery for Diabetic Foot ulcers	-	78

Radical debridement followed by VAC application helps us to save both the patient and the foot

Presentation of a Diabetic foot with the patient in severe sepsis

The well healed foot after skin grafting. Long term result

Aesthetic Surgery

A small beginning has been made in Aesthetic Surgical procedures and we are sure this number will increase in the coming years.

Rhinoplasty	-	4
Liposuction	-	9
Abdominoplasty with Liposuction	-	16
Incisional Hernia repair with Abdominoplasty	-	2
Gynaecomastia	-	12
Hair transplant	-	2
Fat injection	-	3
Major keloid management	-	5

Pre-Operative

Post-Operative

Pressure Sores

Sacral pressure sores	-	17
Trochanteric pressure sore	-	6
Ischial pressure sore	-	7

Miscellaneous

Macrodactyly foot	-	2
Toe duplication	-	1
Lipoma	-	1
Haemangioma foot	-	1
Tibialis posterior tendon transfer for foot drop	-	6
Tendo Achillis repair	-	32
Tendo Achillis lengthening	-	5
Ingrowing toe nail	-	32
Chronic venous ulcers – varicose veins	-	27
V – Y flap in foot	-	4
Surgery for massive infection	-	14
Foreign body leg	-	3

Amputations

Above knee	-	56
Through knee	-	3
Below knee	-	113
Forefoot	-	5
Toes	-	139

Bilateral sacral pressure sores treated by thigh flap

Anaesthesia Department

The anaesthesia department headed by Dr V Ravindra Bhat and ably assisted by Dr G Venkateswaran and Dr V Boopathy continues to play a very valuable role to make feasible the activities of the department. They provide 24 hours high quality anaesthesia cover which is fundamental for the delivery of the emergency care services. The 'on arrival block', concept of pain relief for accident victims initiated by the department has become popular in many centres.

Dr. G. Venkateswaran, Dr. V. Ravindra Bhat and Dr. Boopathy

Statistics of 2008 & 2009

GENERAL ANAESTHESIA	SPINAL ANAESTHESIA	BRACHIAL BLOCK	COMBINED SPINAL AND EPIDURAL ANAESTHESIA
1609	4692	5496	51

The years 2008 and 2009 saw the department grow in strength in the field of teaching and training.

Fiber Optic Bronchoscope used for difficult intubation

DNB – Anaesthesia

The Department of Anaesthesia was accredited by the National Board of Examinations for the conduct of the DNB course in Anaesthesia from Jan 2009. 2 primary candidates and 2 post diploma candidates are selected every year.

Post Diploma Candidates	Primary Candidates
Dr Maheshwari Kumar	Dr Nikhil
Dr Meenakshi	Dr Ashwini M. Shah

Aesculap – B Braun Fellowship in Regional Anaesthesia:

The Aesculap Academy in association with the Anaesthesia Department of Ganga Hospital, provides week long training to anaesthesiologists from different parts of the country in regional anaesthesia techniques. In addition to learning the regional anaesthesia techniques, the visitors find the exposure to the philosophy of care and working very stimulating and useful.

No of anaesthesiologists who underwent the programme in 2008 and 2009 = **86**

Trauma and Regional Anaesthesia fellowship

Dr. Mandeep Kaur

The increasing popularity of the training opportunities led us to create a fellowship programme in Trauma and Regional Anaesthesia of six months duration. The first candidate Dr Mandeep Kaur from Goa, joined in October 2009 and she had this to say about her experience on her return.

I am fine here and enjoying my work. I am using the knowledge gained from you all and trying to teach my juniors also.

Two Fellowships are available every year and they are of the value of ₹1.2 lakhs for the 6 month period.

Department of Intensive Care

The hospital is supported with a fully equipped 8 bedded intensive care unit headed by Dr V M Balasubramani, a full time intensivist and dedicated staff. We provide one to one nursing for all ventilated patients. The ICU is equipped with multi para monitors, state of the art ventilators, portable ultrasound and bronchoscopy.

The staff also provide follow up service for all the critically ill patients who are discharged from the ICU.

Dr. V.M. Balasubramani in his morning rounds

Mechanical ventilation

Invasive ventilation	142	144
Non invasive ventilation	17	64

Total admission in ICU:

2008	2009
341	**529**

Distribution of cases

Polytrauma	197	342
Head injury	82	115
Spine injury	47	62
Medical /burns	15	10

Procedures

Percutaneous Tracheostomies

2008	2	2009	22

Dr. V.M. Balasubramani functions as a Chairman of the Infection Control Programme of the Hospital. He submits surveillance report and audit reports once every three months. This helps us to reduce hospital acquired infections and surgical site infections. The ICU team regularly conducts Basic Life Support Course for the hospital staffs.

Department of Radiology

The Department of Radiology is ably run by radiologists Dr V Ilayaraja and Dr J Senthil Kumar. The department has a SIEMENS Sonatron Emotion CT Scan 6 slice machine, Siemens Magnetron Symphony 1.5 tesla MRI machine and Siemens Ultra Sound machine. The incorporation of the VEPRO PACS (Picture Archiving and Communication System) has enabled immediate viewing of radiographs in all the wards, outpatient departments and in ICU enhancing the quality of care delivered to patients. The department works round the clock and delivers around 15000 X-rays, 430 CT Scans, 500 MRI and 130 ultra sonograms in a month. In addition the department strongly supports research activities of the hospital.

Dr. J. Senthil Kumar and Dr. V. Ilayaraja
Our Radiologists

Department of Physio and Hand Therapy

The Department is supported by a committed Physiotherapy and Occupational Therapy Unit. A total of 18 therapists work in the hospital and of them 7 are exclusively taking care of Hand and Reconstructive Surgery patients.

Patients treated in 2008 and 2009 : 4573

The Unit has the facility to make detachable thermoplastic splints required in the rehabilitation of hand surgery patients.

No.of splints made : 942

A room has been colorfully painted and a lot of play equipments have been provided to encourage children to come for physiotherapy and enjoy the experience.

Academic Activities

The Department has been academically active and is a popular choice for physiotherapy graduates in this region for spending few months of their internship postings.

No. of trainees to the department :

Year	Students	Interns
2008	126	231
2009	148	191

Mrs. Suchithra Mallar, senior therapist was awarded a scholarship to attend the 35th Annual Symposium on 'Surgery and Rehabilitation of the Hand with emphasis on the Wrist' at Philadelphia, USA. There she delivered a visiting therapist's talk on type and nature of the work done at Ganga Hospital.

Our Therapist, Mr. Kiswar, Ms. Aruna, Ms. Kalpana and Ms. Saranya attended the Therapists' Programme conducted on the eve of Annual Conference of the Indian Society for Surgery of the Hand (ISSH), held in New Delhi, December 2009.

The highlight of the academic activity was the visit of Ms. Lynne Feehan, President Elect of International Federation of Societies for Hand Therapists from 6th to 9th December 2009. Her visit was a very stimulating experience for the therapists.

Hand Therapist at work

Wednesday morning review meetings of Surgeons and Therapists

The newly painted Paediatric Therapy Room

Ms. Suchithra our Physiotherapist at the Philadelphia meeting with Ms. Judy Colitz, President IFSHT

Our therapists Kalpana, Saranya and Aruna with Ms. Lynne Feehan, President Elect, IFSHT and Ms. Sarah Eward, Secretary, IFSHT at the New Delhi 2009 ISSH Meeting.

Blood Bank Services

Ganga Hospital Blood Bank is recognised by the government as a regional blood bank. It also has a component separation unit. It supports the need of Ganga Hospital and nearby Institutions by issuing around 900 units of blood and blood components every month. The staff of the Blood Bank are also active in promoting voluntary blood donation.

Comfortable blood donor area

Component separation unit

Ganga Hospital Silicone Prosthetic Centre & Otto Bock® Health Care

QUALITY FOR LIFE

The collaborative venture between Ganga Hospital and Otto Bock Health Care was started in 2002 to make Silicone Prosthesis for fingers and hands. They also provide quality lower limb prosthesis. Around 50 silicone hand prosthesis and 300 lower limb prosthesis are fitted in the centre every year. The centre also has good post prosthesis rehabilitation training facilities.

Expansion of the facility was done in 2009 and plans are present to expand the field of operations to make Maxillofacial Prosthesis (Ear and Nose).

Silicon prosthesis for amputated fingers

Silicon prosthesis for partial amputation - feet

Ganga Hospital - Mala Pressure Garments

Presence of an inhouse facility to measure and fabricate custom made pressure garments is of great help to obtain better outcome in burns patients and in patients after major reconstructive surgery. Quality compression garments can be supplied to the patient in a day.

583 patients were provided with pressure garments in 2008. This number rose to 718 in the year 2009.

Pressure Garments manufacturing facility

Publications & Presentations

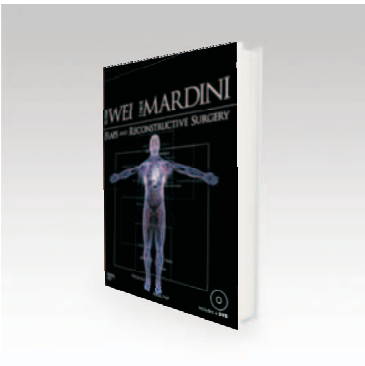
A few observation and much reasoning lead to error; many observations and little reasoning to truth.

- Alexis Carrel

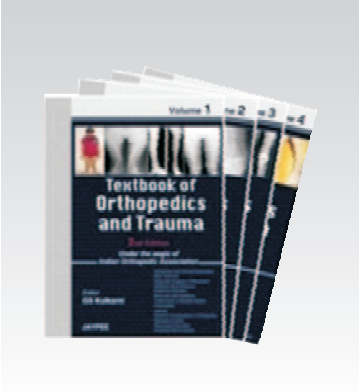
Book Chapters

1 Sabapathy SR. Hand Burns. In: Sarabahi S ed. Principles and Practice of Burn Care, Jaypee Publishers, 2010 : 362 – 382. (Chapter 27).

2 Sabapathy SR. Amputations and Replantations. In: Guyuron B, Eriksson E, Persing JA. Ed.Plastic Surgery – Indications and Practice. Elsevier. 2009: 1211 – 1224.
(Chapter 94)



3 Sabapathy SR. Vessels. In: Wei FC and Mardini S, ed. Flaps in Reconstructive Surgery, Elsevier, 2009: 81 – 92. (Chapter No 9)



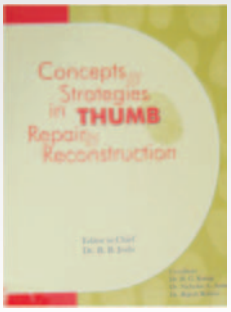
4 Sabapathy SR. Soft Tissue Coverage for Lower Extremity. In. Text book of Orthopaedics and Trauma. 2nd ed. Vol 2. Kulkarni GS. ed. Jaypee Brothers, 2008; 1306 – 1311. (Chapter 159).

5 Sabapathy SR Refinements of Pedicle Flaps for Soft Tissue Cover in the Upper Limb. In: Venkataswami ed: Surgery of the Injured Hand – Towards Functional Restoration. Jaypee Publishers. 2009: 131 – 138. (Chapter 10).

6 Sabapathy SR, Rajasekaran S. Management of Complex Injuries of the Upper Extremity Proximal to the Wrist. In: Venkataswami R. ed: Surgery of the Injured Hand – Towards Functional Restoration. Jaypee Publishers. 2009: 150 - 160. (Chapter 12)

7 Sabapathy SR. Organization of a Microsurgery Service. In: Venkataswami R. ed: Surgery of the Injured Hand – Towards Functional Restoration. Jaypee Publishers. 2009: 497 - 500. (Chapter 39)

8 Sabapathy SR, Venkatramani H. Microvascular Techniques in Thumb Reconstruction. In: Joshi BB ed Concepts and Strategies in Thumb Repair and Reconstruction. Jess Research and Development Society. 2008; 105 – 123. (Section IX).



9 **International Guest Editor**

for an issue on

'Challenges in Replantation Surgery'
in **Seminars in Plastic Surgery**
(to be published)

Contributions of the unit

1. Challenges in Major Replantation
2. Secondary Procedures in Replantation
3. Technical Considerations in Scalp Replantation

Publications - International Journals

1

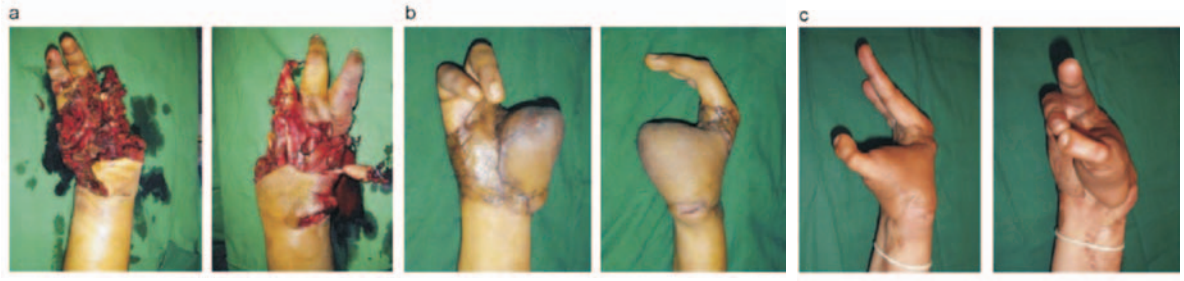
Raja Sabapathy S, Praveen Bhardwaj,
Soft tissue Cover in Hand Injuries.
Current Orthopaedics. 2008; 22: 1 – 8.

Summary

Prompt coverage of skin loss associated with major hand injuries ensures primary healing, protects the reconstruction of the underlying structures and facilitates early rehabilitation. Radical debridement prior to the provision of skin cover is important. Flap cover is chosen according to the functional requirements of the site to be covered, need for access for further procedures and donor site morbidity. Combined defects can be reconstructed with composite flaps. Coverage of large defects can be made simpler by providing flap cover only to critical areas which definitely need flap cover and the rest with skin grafts. With the wide choice of flaps available to cover a particular defect, the surgeon's experience with the particular flap and donor site morbidity, on which depends the long-term satisfaction of the patient, become the main considerations in the choice of the flap.

(a) *(b)* *(c)*

(a) Dorsal combined loss due to road traffic accident with heavy contamination. (b) After radical debridement. (c) Well healed flap without any infection, which is possible only due to radical debridement



(a) Radial crush hemi-amputation of the right hand of the right hand. (b) Non-critical areas covered with skin graft and a pedicled abdominal flap given in the direction of the proposed thumb reconstruction. (c) Second toe with metatarsal transfer to create a well functioning thumb.

2

Venkatramani H, Bhardwaj P, Faruquee SR, Sabapathy SR.
Functional Outcome of Nerve Transfer for Restoration of Shoulder and Elbow Function in Upper Brachial Plexus Injury.
Journal of Brachial Plexus and Peripheral Nerve Injury. 2008; 3:15.

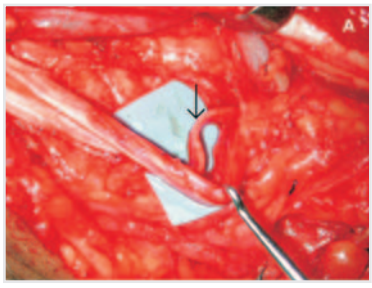
Abstract

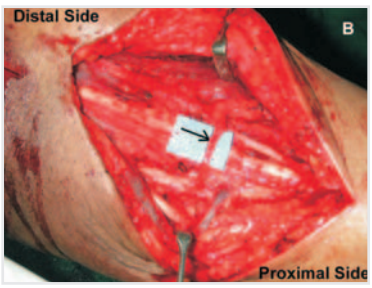
Background: Purpose of this study was to evaluate the functional outcome of spinal accessory to suprascapular nerve transfer (XI-SSN) done for restoration of shoulder function and partial transfer of ulnar nerve to the motor branch to the biceps muscle for the recovery of elbow flexion (Oberlin transfer).

Methods: This is a prospective study involving 15 consecutive cases of upper plexus injury seen between January 2004 and December 2005. The average age of patients was 35.6 yrs (15–52 yrs). The injury-surgery interval was between 2–6 months. All underwent XI-SSN and Oberlin nerve transfer. The coaptation was done close to the biceps muscle to ensure early recovery. The average follow up was 15 months (range 12–36 months). The functional outcome was assessed by measuring range of movements and also on the grading scale proposed by Narakas for shoulder function and Waikakul for elbow function.

Results: Good/Excellent results were seen in 13/15 patients with respect to elbow function and 8/15 for shoulder function. The time required for the first sign of clinical reinnervation of biceps was 3 months 9 days (range 1 month 25 days to 4 months) and for the recovery of antigravity elbow flexion was 5 months (range 3 1/2 months to 8 months). 13 had M4 and two M3 power. On evaluating shoulder function 8/15 regained active abduction, five had M3 and three M4 shoulder abduction. The average range of abduction in these eight patients was 66 degrees (range 45–90). Eight had recovered active external rotation, average 44 degrees (range 15–95). The motor recovery of external rotation was M3 in 5 and M4 in 3. 7/15 had no active abduction/external rotation, but they felt that their shoulder was more stable. Comparable results were observed in both below and above 40 age groups and those with injury to surgery interval less than 3 or 3–6 months.

Conclusion: Transfer of ulnar nerve fascicle to the motor branch of biceps close to the muscle consistently results in early and good recovery of elbow flexion. Shoulder abduction and external rotation show modest but useful recovery and about half can be expected to have active movements. Two patients in early fifties also achieved good results and hence this procedure should be offered to this age group also. Surgery done earlier to 6 months gives consistently good results.





Oberlin procedure. *The motor fascicles are separated from the rest of the nerve over a distance of 2–3 cm (arrow). The fascicles are turned laterally and superiorly towards the biceps motor branch and coapted with it (arrow).*

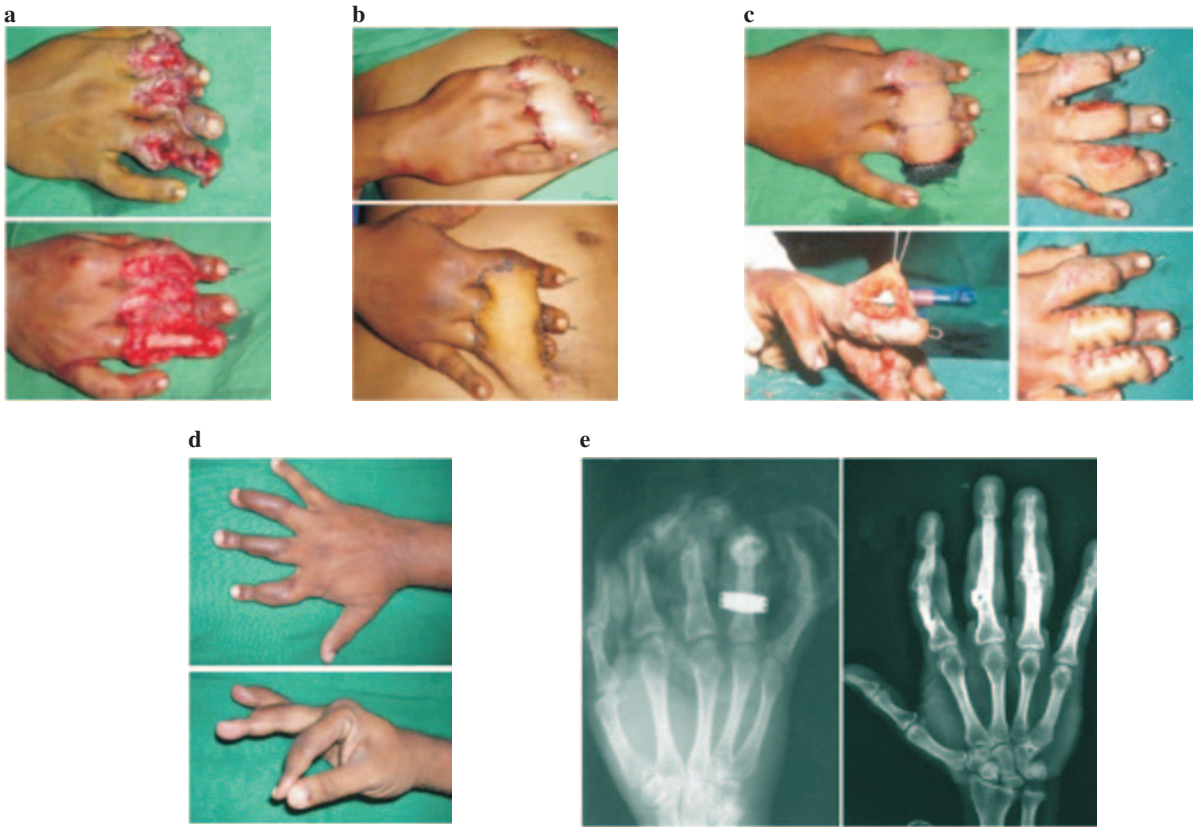
Clinical photograph showing good results for elbow function

3

Raja Sabapathy S, Venkatramani H, Giesen T, Ullah SA.
Primary bone grafting with pedicled flap cover for dorsal combined injuries of the digits.
The Journal of Hand Surgery (Br), 2008; 33E: 65-70.

Abstract:

Twenty digits in 15 patients with dorsal combined tissue loss were treated by radical debridement, primary non-vascularised iliac crest bone graft and immediate lower abdominal flap cover between 1996 and 2006. The average length of the bone grafts was 3.3 (range 2.5–5) cm. No extensor tendon reconstruction was carried out. The flaps were divided at 3 weeks without delay. Permissible thinning of the flap was done at the time of division of flaps. No secondary procedure was done. All patients were retrospectively reviewed and X-rays obtained. Radiological union was achieved in 18 of 20 digits. One bone graft was removed because of infection. One bridging bone graft united with the distal phalanx but had a painless non-union with the proximal phalanx. There were no flap complications. Bone graft length resorptions of 20% and 15% occurred in two terminal bone grafts. We recommend this protocol as a solution to this challenging problem.



(a) A textile machinary injury of the index, middle and ring fingers. Bridging bonegrafts in place after radical debridement. The fingers have been syndactly fixed prior to flap cover. (b) The pedicle SIEA flap in the immediate post operative period and just before flap division. (c) The stages of flap division. Flap division and syndactyly separation are done at the same time and the flaps are radically thinned at the operation, without disturbing the skin attachment. The thinned flaps are then dropped over the raw area. (d) The result after two years. (e) Preoperative and Postoperative x-rays.

4

Raja Sabapathy S, Vijay Langer, Ankur Bhatnagar.
Intraneural Lipoma Associated with the Superficial Peroneal Nerve.
The Journal of Foot & Ankle Surgery.2008; 47: 576 -578.

Abstract:

Intraneural lipoma is a hamartoma that may involve various nerves, although its association with the superficial peroneal nerve is extremely rare. In this article, we describe the case of a young female with an intraneural lipoma localized to the superficial peroneal nerve. Also highlighted is the importance of meticulous clinical examination in order to accurately diagnose the entity so as to avoid expensive diagnostic imaging investigations.

FIGURE: 1 A clinical view of the intraneural lipoma shown to be mobile in the transverse axis, as demonstrated by strumming the lesion in the medial-to-lateral fashion.

FIGURE: 2 Intraoperative view showing the lateral branch of superficial peroneal nerve (intermediate or lateral dorsal cutaneous nerve) proximally in association with the mass.

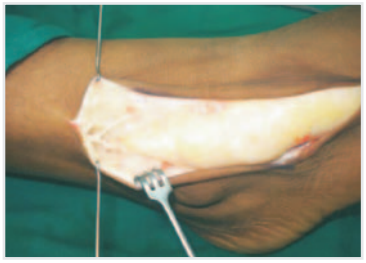


FIGURE: 3 Intraoperative view showing the normal-appearing nerve trunk in continuity with the proximal and distal terminals of the elevated hamartoma

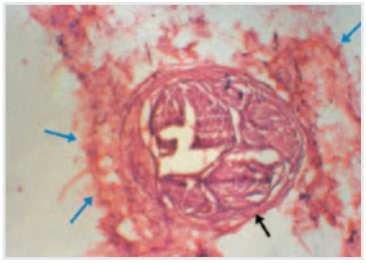


FIGURE: 4 Photomicrograph of the tumor, showing the small cutaneous nerve with intraneural fascicies (black arrow) closely abutting lipomatous tissue (blue arrows) magnification x 40, hematoxylin and eosin stain).

5

Rajasekaran S, Dheenadayalan J, Babu JN, Sundarrajan SR, Venkatramani H, Sabapathy SR.
Immediate Primary skin closure in type – III A and B open injuries. Results after a minimum of five years.
Journal of Bone and Joint Surgery. 2009; 91B: 217 -224.

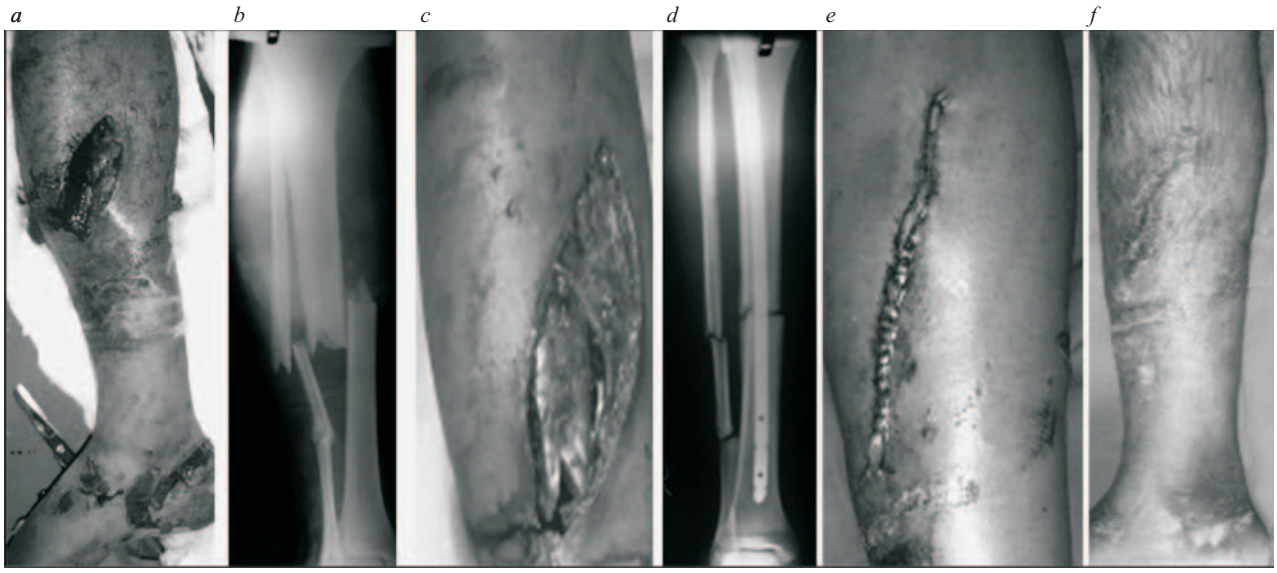
Abstract:

Between June 1999 and May 2003 we undertook direct primary closure of the skin wounds of 173 patients with Gustilo and Anderson grade-IIIA and grade-IIIB open fractures. These patients were selected from a consecutive group of 557 with type-III injuries presenting during this time. Strict criteria for inclusion in the

study included debridement within 12 hours of injury, no sewage or organic contamination, no skin loss either primarily or secondarily during debridement, a Ganga Hospital open injury skin score of 1 or 2 with a total score of ten or less, the presence of bleeding skin margins, the ability to approximate wound edges without tension and the absence of peripheral vascular disease. In addition, patients with polytrauma were excluded.

At a mean follow-up of 6.2 years (5 to 7), the outcome was excellent in 150 (86.7%), good in 11 (6.4%) and poor in 12 (6.9%). A total of 33 complications occurred in 23 patients including superficial infection in 11, deep infection in five and the requirement for a secondary skin flap in three. Six patients developed nonunion requiring further surgery, one of whom declined additional measures to treat an established infected nonunion.

Immediate skin closure when performed selectively with the above indications proved to be a safe procedure.



Photograph (a) and radiograph (b) showing a type-IIIB open fracture of the tibia with a wound 10 cm × 4 cm in size on the anteromedial aspect of the tibia. The wound was (c) debrided and (d) stabilised with an intramedullary nail with ten hours of injury. At the end of the debridement and skeletal stabilisation, the skin edges could be approximated without tension and satisfied the inclusion and exclusion criteria of our study . The wound was managed by immediate direct skin closure (e) with an excellent outcome (f).

6

Sabapathy SR.

Invited Commentary on 'Temporary catheter perfusion and artery–last sequence of repair in macroreplantations'.

Journal of Plastic Reconstructive and Aesthetic Surgery. 2009; 62, 1326.

7

Ravindra Bharathi R, Terrence Jose Jerome, Kalson NS, Sabapathy SR.
V – Y Advancement Flap Cover of Toe – Tip Injuries.
The Journal of Foot and Ankle Surgery. 2009; 48(3), 368-371.

Abstract:

Toe-tip injury presents a challenging problem. There are few techniques that provide cover for distal toe defects, and most injuries are usually treated with terminalization or a skin graft. In patients with toe-tip injuries where there is preservation of the plantar toe pulp, V-Y flap advancement is a therapeutic option. In this article, we describe the surgical technique used and present the results of 10 patients with dorsal oblique or transverse toe injuries that underwent V-Y flap advancement for defect coverage. Eight patients had distal great toe injuries, 1 had a dorsal oblique amputation of the third toe, and 1 had a transverse amputation at the metatarsophalangeal joint level. Mean follow-up was 5 months, at which time all patients had returned to their previous activity level, and showed acceptable levels of scarring. The V-Y advancement flap, commonly used in fingertip injuries, when indicated and carefully performed gives excellent contour and padding, maintains toe length, and provides good cosmesis for treatment of toe amputations.

(A) Dorsal oblique amputation of the left great toe with nail bed laceration.

(B) The skin is incised, leaving the subcutaneous tissue and vascular supply intact. The fibrous septa are then cut, releasing the flap from the periosteum and the flexor tendon sheath.

(A) The flap is advanced distally and sutured to the nail bed. (B) The excess subcutaneous tissue along the base of the flap may be removed to facilitate the closure. (C) The remainder of the incision is closed in a V-Y fashion. It is essential to avoid tension.

8

Sabapathy SR.
What is new in Microsurgery?
WSRM Newsletter Nov 2009. Vol 1 p. 2 – 3.

9	Libberecht K, Sabapathy SR, Bhardwaj P. The relation of patient satisfaction and functional and cosmetic outcome following correction of the wrist flexion deformity in cerebral palsy. **Accepted for publication in the Journal of Hand Surgery (E)**
10	Venkatramani H, Vimalambiga R. Sabapathy SR. Giant Cervicothoracic lipoma – As a manifestation of HIV associated lipodystrophy. **Accepted for publication in Plastic and Reconstructive Surgery.**
11	Sabapathy SR, Venkatramani H, Bhardwaj P. Pseudarthrosis of Cervical Rib: An Unusual Cause of Thoracic Outlet Syndrome. **Accepted for publication in the Journal of Hand Surgery (A).**
12	Kannan Balaraman, Venkatesh G, Bharathi RR, Vimalambiga R, Sabapathy SR. Post traumatic Blepharocele – Report of an unusual case. **Submitted to the International Journal of Oral & Maxillofacial Surgery**

Publications - National Journals

13	Venkatramani H, Raja Sabapathy S. A useful technique to maintain the position of hand following abdominal flap. **Indian Journal of Plastic Surgery. 2008; 41: 100 – 101**

Figure 1

Abstract:

Pedicled abdominal flaps are commonly performed to provide soft tissue cover for post-traumatic defects in the hand and upper limb. Following flap transfer, the hand has to be positioned well to prevent kinking of the pedicle. In the immediate postoperative period, this is done with the help of adhesive plasters and sometimes with flap-positioning

splints. Later, the patient and the relatives are instructed about the correct position. Which ever teachnique is used, it would be good to have a system whereby the position preferred by the surgeons is conveyed to the people who monitor the flap in the ward and at home in a simple and straightforward manner, which is easy to understand and replicate. We have found the following technique to be very useful over the last four years.

After the flap is inset into it's final position, the hand is held in the most optimal position and three parallel lines are drawn with marking ink just proximal to the wrist. The lines start from the abdominal wall proximally, then across the distal forearm and continue distally again over the abdominal wall (Figure 1). The patient is shifted from the operating table after the lines are drawn. During the transfer of the patient and immediately after the transfer to the bed in the ward, the position is again checked - the lines must be in continuity. In the ward, the significance of the lines and the need to prevent kinking of the pedicle are explained to the staff nurse.

14

Sabapathy SR,
CME - Acute Finger Injuries.
Physicians Digest 2008; 17: 30-35.

15

Sabapathy SR, Bajanthri B, Bharathi RR.
Management of Post Burns Hand Deformities.
Accepted for publication in the Indian Journal of Plastic Surgery.

16

Sabapathy SR. Langer V (Col).
Decision Making in the Management of Major Limb Injuries.
Submitted to the Medical Journal Armed Forces India.

17

Tamil translation of the
Disability of Arm Shoulder and Hand (DASH) score.

The department has translated the commonly used upper limb disability score (DASH) in Tamil language and is under validation for Cross-Cultural Adaptation of Health Status Measures. Translated version of this score is available in 35 languages. **(www.dash.iwh.on.ca)**

Invitations for Contributions

1. Sabapathy SR. Tendon Injuries. Chapter to be published in **Mercers Text book of Orthopaedics.** Submitted for Publication.

2. Sabapathy SR. Hand Surgery in India in **Hand Surgery Worldwide – International Reconstruction of a Beautiful and Ready Instrument of the Mind.** Eds Urbaniak J, Levin S Soucacas P. To be released during the International Congress on Hand Surgery (IFSSH) at Seoul, Korea in November 2010.

3. **Operative Microsurgery – Ed. Neil Jones and Brian Boyd. McGraw Hill**
   Chapter 26: Major Replantation
   Chapter 56: Revascularisation and Replantation in the Lower Extremity

4. **Wound Management – Ed. Sujatha Sarabahi.**
   Chapter: Debridement – Preparing the wound bed for cover
   Chapter: Management of Crush injury in the limbs

5. **Journal of Hand Surgery (American Volume).**
   Invited to contribute to the Current Concepts section on the topic 'Replantation'.

A new premises for the Department Library & The DR BB Joshi Collection.

The department takes pride in its collection of books and journals. While we can't claim it to be the largest, with 592 books and 1908 journal copies related to the field of Plastic and Reconstructive surgery it will be one of the best collections in our country.

Prof BB Joshi, one of the doyens in Hand Surgery wanted us to meet him. On the way to a conference when we met him at his residence in Mumbai, we were pleasantly surprised when Mrs and Dr Joshi and their family told us that they would like to donate his entire collection of books, journals, case records and awards to our Department. Their daughter Mrs. Sandhya Koushik and Dr (Mrs) Swaran Arora, coordinated the transfer process.

Dr S Raja Sabapathy symbolically receiving a book at Dr Joshi's Residence.

The department library which was till then housed in our Operation Theatre was thought to be too small to house this treasure. A 450 Sq ft. library was designed for the purpose. We had a special function to mark the occasion. Dr MB Pranesh, a distinguished neurologist, lover of books and member of the Osler club spoke on the occasion of the handing over of the books. It was marked by the presence of the entire members of the Prof Joshi family and his friends.

Prof Joshi said that the books he left with us were his greatest asset and each and every one of them he acquired with great love. We assured him that we were eternally grateful for choosing our centre to be the home for his collection of books and it will be available for generations to come.

Dr M B Pranesh Senior Neurologist and an avid lover of books speaking as the Guest of Honor

Section of audience Dr and Mrs Joshi, Dr A Koushik, Dr Ram Prabhoo, Dr S Arora and Mrs. Koushik are in the front row.

A view of the new library premises

Mrs. Muruga Vidya Librarian

Invitation Lectures and Presentations International

2008

1 15th to 17th Feb 2008, 7th Congress of the Asian Pacific Federation of Societies for Surgery of the Hand, Hong Kong
Invited talk: Principles in the selection of Soft tissue cover in the management of major hand injuries.
Dr S Raja Sabapathy

2 15th to 17th Feb 2008, 7th Congress of the Asian Pacific Federation of Societies for Surgery of the Hand, Hong Kong
Podium Presentation: Reconstruction of long segment loss of tendons and nerves in electrical burns of the wrist
Dr S Raja Sabapathy

3 15th to 17th Feb 2008, 7th Congress of the Asian Pacific Federation of Societies for Surgery of the Hand, Hong Kong.
Podium Presentation: Functional outcome of one bone forearm in salvage situations.
Dr S Raja Sabapathy

4 15th to 17th Feb 2008, 7th Congress of the Asian Pacific Federation of Societies for Surgery of the Hand, Hong Kong.
Poster Presentation: On arrival block in the management of mutilating upper limb injuries.
Dr S Raja Sabapathy

5 15th to 17th Feb 2008, 7th Congress of the Asian Pacific Federation of Societies for Surgery of the Hand, Hong Kong.
Poster Presentation: Primary bone grafting with pedicle flap as cover in the management of dorsal combined injuries of the digits.
Dr S Raja Sabapathy

6 19th to 21st Jun 2008, XIII Congress of the Federation of European Societies for Surgery of the Hand. IX Congress of the European Federation of Societies for Hand Therapist, Lausanne, Switzerland
Represented India in the council meeting of the IFSSH
Free Paper: Technical Considerations and Functional Outcome of Complex Elbow Injuries.
Dr S Raja Sabapathy

7 19th to 21st Jun 2008, XIII Congress of the Federation of European Societies for Surgery of the Hand. IX Congress of the European Federation of Societies for Hand Therapist, Lausanne, Switzerland
Poster Presentation: Primary bone grafting in phalanges with pedicle flap as cover.
Dr S Raja Sabapathy

8 18th to 20th Sep 2008, 63rd Annual Meeting of the American Society for Surgery of the Hand., Chicago, USA

Invited Faculty - Pre course: Surgical Reconstruction of Upper Extremity Injuries: An International Perspective Initial Assessment of the Limb.
Dr S Raja Sabapathy

9 18th to 20th Sep 2008, 63rd Annual Meeting of the American Society, Chicago, USA
Invited Faculty - Pre course: Surgical Reconstruction of Upper Extremity Injuries: An International Perspective Complex Replantations

2009

10 17th to 20th Dec 2009, 4th Turkish Society for Reconstructive Microsurgery, Antalya, Turkey.
Invited Guest Speaker: Challenging Thumb Reconstructions
Dr S Raja Sabapathy

11 17th to 20th Dec 2009, 4th Turkish Society for Reconstructive Microsurgery, Antalya, Turkey.
Invited Guest Speaker
Video session: Scalp Replantation
Dr S Raja Sabapathy

12 6th to 9th May 2009, 78th Annual Scientific Congress of the Royal Australian College of Surgeons, Brisbane, Australia
Distinguished Visiting Lecturer of the College and Guest Professor of the Australian Society for Surgery of the Hand
Master class: Management of Major Limb Injuries – Optimizing the outcomes
Dr S Raja Sabapathy

13 6th to 9th May 2009, 78th Annual Scientific Congress of the Royal Australian College of Surgeons, Brisbane, Australia
Keynote address: Organizing a Trauma, Hand and Microsurgical centre in a Non Metropolitan area
Dr S Raja Sabapathy

14 6th to 9th May 2009, 78th Annual Scientific Congress of the Royal Australian College of Surgeons, Trauma section, Brisbane, Australia
Invited Lecture: Maximum outcome with Minimal Resources in the Management of Mangled Limb Injuries.
Dr S Raja Sabapathy

15 6th to 9th May 2009, 78th Annual Scientific Congress of the Royal Australian College of Surgeons, Brisbane, Australia
Invited Lecture: Minor Replants – Tips for success
Dr S Raja Sabapathy

16 6th to 9th May 2009, 78th Annual Scientific Congress of the Royal Australian College of Surgeons, Combined Plastic Surgery and Hand Section Brisbane, Australia
Invited Lecture: Major Replants – Lessons learnt
Dr S Raja Sabapathy

17 12th May 2009, Meeting of the Victorian Hand Society, St Vincent's Hospital, Melbourne
Invited Guest Speaker: Challenging Thumb Reconstructions
Dr S Raja Sabapathy

18 24th to 27th Jun 2009, 5th Congress of World Society for Reconstructive Microsurgery, Okinawa, Japan.
Panel Speaker: Lower Extremity Reconstruction. – Reconstruction of Complex injuries around foot and ankle and outcome determinants
Dr S Raja Sabapathy

19 24th to 27th Jun 2009, 5th Congress of World Society for Reconstructive Microsurgery, Okinawa, Japan.
Moderator: Symposium on Upper Extremity Reconstruction.
Dr S Raja Sabapathy

20 24th to 27th Jun 2009, 5th Congress of World Society for Reconstructive Microsurgery, Okinawa, Japan.
Chairperson: Free paper session on Perforator Flaps
Dr S Raja Sabapathy

21 2nd to 5th Sep 2009, Combined Annual Meeting of the American Society for Surgery of the Hand and American Society of Hand Therapists, San Francisco
Invited Faculty: Pre course: Mutilated Hand – from the Emergency room to Return to Work.
'Secondary Flexor and Extensor Reconstruction'
Dr S Raja Sabapathy

Invitation Lectures and Presentations National

2008

1 26th to 30th Nov 2008, 32nd Annual Meeting of the Indian Society for Surgery of the Hand and 2nd Combined Meeting of the Indian Society for Surgery of the Hand and the British Society for Surgery of the Hand – Bangalore
Faculty for Operative Demonstration Surgery: Post Burn contracture release and custom designed groin flap
Dr S Raja Sabapathy

2 26th to 30th Nov 2008, 32nd Annual Meeting of the Indian Society for Surgery of the Hand and 2nd Combined Meeting of the Indian Society for Surgery of the Hand and the British Society for Surgery of the Hand – Bangalore
Faculty: Master Class: Mutilating Injuries of the Hand
Dr S Raja Sabapathy

3 26th to 30th Nov 2008, 32nd Annual Meeting of the Indian Society for Surgery of the Hand and 2nd Combined Meeting of the Indian Society for Surgery of the Hand and the British Society for Surgery of the Hand – Bangalore
Brachial Plexus Symposium: Secondary Procedures in Brachial Plexus Injury
Dr S Raja Sabapathy

4 26th to 30th Nov 2008, 32nd Annual Meeting of the Indian Society for Surgery of the Hand and 2nd Combined Meeting of the Indian Society for Surgery of the Hand and the British Society for Surgery of the Hand – Bangalore
Art of the Possible Symposium: The winning algorithm in the establishment of a teaching Hand surgery unit
Dr S Raja Sabapathy

5 8th to 9th Nov 2008, Association of Plastic Surgeons of India - Instructional Course in Hand Surgery – Varanasi
Invited Faculty: Lecture: Replantation Surgery
Dr S Raja Sabapathy

6 8th to 9th Nov 2008, Association of Plastic Surgeons of India - Instructional Course in Hand Surgery – Varanasi
Invited Faculty: Lecture: Secondary Procedures in Brachial Plexus Surgery
Dr S Raja Sabapathy

7 8th to 9th Nov 2008, Association of Plastic Surgeons of India - Instructional Course in Hand Surgery – Varanasi
Invited Faculty: Lecture: Boutonniere Deformity
Dr S Raja Sabapathy

8 11th to 15th Nov 2008, Annual Meeting of the Association of Plastic Surgeons of India, Varanasi.
Dr M Murari Mukherjee Oration: 'You be the change that you would like to see'
Dr S Raja Sabapathy

9 11th to 15th Nov 2008, Annual Meeting of the Association of Plastic Surgeons of India, Varanasi
Lecture: Surgery for Spastic Hands
Dr S Raja Sabapathy

10 11th to 15th Nov 2008, Annual Meeting of the Association of Plastic Surgeons of India, Varanasi
Faculty: How I do it session: Management of Complex Dislocation of MCP joint
Dr S Raja Sabapathy

11 10th to 13th Sep 2008, 12th International Perforator Flap Course, Ganga Hospital, Coimbatore
Plenary Lecture: Microsurgery Scenario in India and setting up of a Microsurgical Unit.
Dr S Raja Sabapathy

12 21st to 24th Aug 2008, 12th Annual Conference of International Trauma Anaesthesia & Critical Care Society-Indian Chapter, Cochin.
Invited Lecture: Critical Care Issues in Reconstructive Surgery
Dr S Raja Sabapathy

13 19th to 20th Apr 2008, 4th Basic Course in Hand Surgery – Indian Society for Surgery of the Hand, Kasturba Medical College, Mangalore
Faculty Lecture: Clinical Evaluation of Hand Injuries
Dr S Raja Sabapathy

14 19th to 20th Apr 2008, 4th Basic Course in Hand Surgery – Indian Society for Surgery of the Hand, Kasturba Medical College, Mangalore.
Faculty Lecture: Debridement
Dr S Raja Sabapathy

15 19th to 20th Apr 2008, 4th Basic Course in Hand Surgery – Indian Society for Surgery of the Hand, Kasturba Medical College, Mangalore.
Faculty Lecture: Acute Extensor tendon injury
Dr S Raja Sabapathy

16 19th to 20th Apr 2008, 4th Basic Course in Hand Surgery – Indian Society for Surgery of the Hand, Kasturba Medical College, Mangalore.
Faculty Lecture: Collateral Ligament injuries of the thumb
Dr S Raja Sabapathy

17 19th to 20th Apr 2008, 4th Basic Course in Hand Surgery – Indian Society for Surgery of the Hand, Kasturba Medical College, Mangalore.
Faculty Lecture: Nail bed injuries
Dr S Raja Sabapathy

18 19th to 20th Apr 2008, 4th Basic Course in Hand Surgery – Indian Society for Surgery of the Hand, Kasturba Medical College, Mangalore.
Faculty Lecture: Flaps to the Hand
Dr S Raja Sabapathy

19 5th to 6th Apr 2008, 2nd National Workshop on Propeller Flaps – Right Hospitals, Chennai
Chairperson: Lecture session and Moderator for operative demonstrations.
Dr S Raja Sabapathy

20 22nd to 24th Feb 2008, 9th Biennial Meeting of the Indian Society for Reconstructive Microsurgery, New Delhi
Invited Talk: Bone Transport vs. Vascularized Bone Transfer in Lower Limb Reconstruction
Dr S Raja Sabapathy

21 22nd to 24th Feb 2008, 9th Biennial Meeting of the Indian Society for Reconstructive Microsurgery, New Delhi.
Invited Talk: Coping with long hours and long years in Microsurgery.
Dr S Raja Sabapathy

22 22nd to 24th Feb 2008, 9th Biennial Meeting of the Indian Society for Reconstructive Microsurgery, New Delhi.
Invited Talk: Mutilating Injuries of Upper Limb
Dr S Raja Sabapathy

2009

23 18th to 20th Jan 2009, 7th Asia Pacific Burns Congress and 17th Annual Conference of National Academy of Burns – New Delhi.
Presentation: Reconstruction of long segment flexor and nerve loss at the wrist level following Electrical Burns
Dr S Raja Sabapathy

24 24th and 25th Jan 2009, Tamil Nadu and Pondicherry Association of Plastic Surgeons Annual Meeting. Erode
Invited Presentation: Secondary procedures in Brachial Plexus palsy
Dr S Raja Sabapathy

25 24th and 25th Jan 2009, Tamil Nadu and Pondicherry Association of Plastic Surgeons Annual Meeting. Erode
Invited Presentation: Surgery for Spastic Hands
Dr S Raja Sabapathy

26 24th and 25th Jan 2009, Tamil Nadu and Pondicherry Association of Plastic Surgeons Annual Meeting. Erode
Session Coordinator: Remembering the Legend – Personal Reminiscences. A session on Prof CR Sundararajan.
Dr S Raja Sabapathy

27 6th to 8th Feb 2009, 33rd Annual Conference of Karnataka Orthopaedic Association. Mangalore.
Operative session on Tendon Transfers: Faculty. Live Demonstration of tendon transfers for Radial nerve paralysis.
Dr S Raja Sabapathy

28 20th to 22nd Feb 2009, 3rd Biennial Meeting Brachial Plexus Surgery Group of India. Coimbatore
Basic Science Session: Chairperson
Lecture: Pathophysiology of Brachial Plexus Injury
Dr S Raja Sabapathy

29 20th to 22nd Feb 2009, 3rd Biennial Meeting Brachial Plexus Surgery Group of India. Coimbatore
Panel Discussion – Adult Brachial Plexus Palsy
Moderator
Dr S Raja Sabapathy

30 20th to 22nd Feb 2009, 3rd Biennial Meeting Brachial Plexus Surgery Group of India. Coimbatore
Lecture: Shoulder Reconstruction in OBPP
Dr S Raja Sabapathy

31 Association of Surgeons of India, Coimbatore City chapter.
Presentation: Primary Micro Vascular Reconstruction of post surgical defects in Head and Neck Cancer
Dr S Raja Sabapathy

32 11th July 2009, Annual Meeting of the Indian Association of Paediatric Surgeons. (Tamil Nadu and Pondicherry Branch), Coimbatore,
Mohammed Yusuf Oration: Paediatric Trauma – Optimizing the outcome.
Dr S Raja Sabapathy

33 Comprehensive Trauma Life Support Course, International Trauma Care (Indian Section) Tirunelveli
Lecture: Primary management of Hand Injuries
Dr S Raja Sabapathy

34 Comprehensive Trauma Life Support Course, International Trauma Care (Indian Section) Tirunelveli
Lecture: Primary Management of Burns
Dr S Raja Sabapathy

35 12th July, 2009. Association of Surgeons of India (Erode Chapter). Erode.
Guest speaker: Topic: Plastic Surgery for General Surgeons.
Dr S Raja Sabapathy

36 23rd July 2009, Armed Forces Medical College, Pune,
Invited Guest Lecture: Limb Salvage surgery after trauma
Dr S Raja Sabapathy

37 23rd July 2009. DY Patil Medical College, Pune,
Guest Lecutre: An approach to Hand trauma
Dr S Raja Sabapathy

38 5th to 9th Aug 2009. Annual Conference of the Association of Plastic Surgeons of India, Chennai
Convenor of Dr RN Sinha Symposium on Burnt Hand
Presentation: Electrical burns to the Hand
Dr S Raja Sabapathy

39 5th to 9th Aug 2009. Annual Conference of the Association of Plastic Surgeons of India, Chennai

Faculty talk: Reconstruction of thumb following amputation at CMC joint level
Dr S Raja Sabapathy

40 20th to 23rd Aug 2009, Annual Meeting of the International Trauma Care – Indian Chapter (ITACCS). Kolkatta,
Prof Martin Isaac Oration: 'Improving Trauma Outcomes in India – What we can do?'
Dr S Raja Sabapathy

41 22nd Sep 2009, Comprehensive Trauma Life Support Course – INS Aswini, Mumbai
Lecture: Immediate Management of Hand Injuries
Dr S Raja Sabapathy

42 22nd Sep 2009, Comprehensive Trauma Life Support Course – INS Aswini, Mumbai.
Lecture: Immediate Management of Burns
Dr S Raja Sabapathy

43 26th Sep 2009, 175th year celebrations of Madras Medical College, Chennai
Symposium on Hand Surgery: Invited Lecture: Congenital Hand Anomalies.
Dr S Raja Sabapathy

44 23rd Oct 2009, Ganga Orthopaedic Trauma Course – Ganga Hospital, Coimbatore.
Lecture: Wound Cover for Open Injuries – a Potpourri of Options.
Dr S Raja Sabapathy

45 4th to 6th Dec 2009, Annual Conference of the Indian Society for Surgery of the Hand, New Delhi.
Workshop Faculty: Tendon and Nerve Repair.
Dr S Raja Sabapathy

46 4th to 6th Dec 2009, Annual Conference of the Indian Society for Surgery of the Hand, New Delhi
Convenor of Symposium: Brachial Plexus injuries
Lecture: Secondary surgery in Obstetrical Brachial Plexus Palsy.

Dr. R. Ravindra Bharathi
Consultant, Plastic Surgery

2008

1 15th to 17th Feb 2008, 7th Congress of the Asian Pacific Federation of Societies for Surgery of the Hand, Hong Kong
Poster presentation: Techniques for restoring the nail in total avulsion injuries of the digits.
Dr. R. Ravindra Bharathi

2 29th Feb to 2nd Mar 2008, 7th National Conference of Indian Society of Cleft Lip, Palate and Craniofacial anomalies (ISCLPCA), Mangalore
Chairman: Free paper session on Cleft Lip and Palate
Dr. R. Ravindra Bharathi

4 9th to 11th May 2008, 21st State Conference of Plastic Surgeons of Kerala, Kottayam
Invited talk: Management of Dorsal Composite injuries of Hand
Dr. R. Ravindra Bharathi

5 22nd to 26th Sep 2008, Cleft 2008, Conference of ICPF, Dallas
Dr. R. Ravindra Bharathi

6 11th to 15th Nov 2008, 43rd Annual Conference of Association of Plastic Surgeons of India, APSICON 2008, Varanasi
Podium presentation: Techniques of restoring the nail in total avulsion injuries of the digits.
Dr. R. Ravindra Bharathi

7 11th to 15th Nov 2008, 43rd Annual Conference of Association of Plastic Surgeons of India, APSICON 2008, Varanasi
Podium presentation: Analysis of free flap cover in lower limb injuries of Pediatric Patients
Dr. R. Ravindra Bharathi

2009

8 12th to 15th Feb 2009, 8th Annual Conference of Indian Society of Cleft Lip, Palate and Craniofacial anomalites(ISCLPCA), Pondicherry
Chairman: A free paper session on Cleft Lip and Palate
Dr. R. Ravindra Bharathi

9 30th Aug 2009, EduPlast 5, a CME programme conducted at Stanley Medical College, Chennai.
Invited Talk: Dorsal composite loss in Hand
Dr. R. Ravindra Bharathi

10 4th to 6th Dec 2009, 33rd Annual Conference of Indian Society of Surgery of the Hand, New Delhi
Podium presentation: Heterotopic replantation of digits to reconstruct the thumb
Dr. R. Ravindra Bharathi

Dr. Hari Venkatramani
Consultant, Trauma Reconstructive Surgery

International

2008

1 22nd to 25th Oct 2008, 2nd Annual Meeting of Bangladesh Society for Surgery of Hand, Dhaka, Bangladesh.
Invited Talk: Major Revascularization Upper Limb.

2 22nd to 25th Oct 2008, 2nd Annual Meeting of Bangladesh Society for Surgery of Hand, Dhaka, Bangladesh.
Invited Talk: Fingertip reconstruction.

3 22nd to 25th Oct 2008, 2nd Annual Meeting of Bangladesh Society for Surgery of Hand, Dhaka, Bangladesh.
Invited Talk: Selecting Soft Tissue cover in Upper Limb.

4 22nd to 25th Oct 2008, 2nd Annual Meeting of Bangladesh Society for Surgery of Hand, Dhaka, Bangladesh.
Invited Talk: Digital Replantation.

2009

5 13th to 15th Nov 2009, 8th Asia Pacific Federation of Societies for Surgery of the Hand, Kaohsuing, Taiwan.
Free Paper: Multiple nerve transfers for restoration of shoulder abduction and elbow flexion in upper brachial plexus palsy.

6 13th to 15th Nov 2009, 8th Asia Pacific Federation of Societies for Surgery of the Hand, Kaohsuing, Taiwan.
Free Paper: Soft tissue release procedure for improving shoulder abduction in brachial plexus birth palsy.

7 13th to 15th Nov 2009, 8th Asia Pacific Federation of Societies for Surgery of the Hand, Kaohsuing, Taiwan.
Free Paper: Heterotopic replantation.

National

2008

1 30th and 31st Jan 2008, 7th Annual Conference of Tamil Nadu and Pondicherry Association of Plastic Surgeons, Kanyakumari.
Guest Lecture: Major Revascularisation in Lower Limb Injuries.

2 22nd to 24th Feb 2008, 9th Biennial Meeting of the Indian Society for Reconstructive Microsurgery, New Delhi.
Free paper: Free functioning gracilis muscle transfer for restoration of elbow flexion in global brachial plexus palsy.
Panel discussion: Nightmare in Microsurgical reconstruction.

3 13th Jul 2008, CME on Trauma Reconstructive Surgery, Indira Gandhi Medical College and Hospital, Pondicherry.
Invited Talk: Upper Limb Reconstruction– Ganga Hospital Experience.

4 13th Jul 2008, CME on Trauma Reconstructive Surgery, Indira Gandhi Medical College and Hospital, Pondicherry.
Invited Talk: Lower Limb Reconstruction- Ganga Hospital Experience.

5 27th to 30th Nov 2008, Combined meeting of Indian Society for Surgery of the Hand and British Society for Surgery of the Hand, Bangalore.
Free paper: Free functioning gracilis muscle transfer for restoration of elbow flexion in Global brachial plexus palsy.

6 27th to 30th Nov 2008, Combined meeting of Indian Society for Surgery of the Hand and British Society for Surgery of the Hand, Bangalore.
Free paper: Replantation of Avulsion Amputation of Thumb.

7 5th Nov 2009, Annual meeting of Tamilnadu Association of Radiation Oncologists, Coimbatore.
Invited Talk: Primary Oro microvascular Reconstruction following head and neck cancer resections.

2009

8 9th Jan 2009, CME and Workshop on Brachial Plexus Surgery, at Rani Durgavati Medical College and Hospital, Jabalpur.
Workshop Faculty: Live Demonstration of Oberlin's and Somasak Transfer and Free Gracilis Muscle Transfer.

9 9th Jan 2009, CME and Workshop on Brachial Plexus Surgery, at Rani Durgavati Medical College and Hospital, Jabalpur.
Invited Speaker: Limb Salvage and Reconstruction.

10 9th Jan 2009, CME and Workshop on Brachial Plexus Surgery at Rani Durgavati Medical College and Hospital, Jabalpur.
Invited Speaker: Adult Brachial Plexus Reconstruction.

11 24th to 25th of Jan 2009, 6th Annual Conference of Tamil Nadu and Pondicherry Association of Plastic Surgeons, Erode.
Invited talk: Primary Oro-microvascular Reconstruction following head and neck cancer resections.

12 6th to 8th Feb 2009 3rd Biennial meeting of Brachial Plexus Surgery group of India, 2009, Coimbatore
Invited talk: Surgical Anatomy of Brachial Plexus

13 5th to 9th Aug 2009, 44th Annual meeting of Association of Plastic Surgeons of India, Chennai
Free paper: Restoration of Shoulder abduction and Elbow Flexion following upper Brachial Plexus Avulsion Injuries – Review of 50 cases.

14 5th to 9th Aug 2009, 44th Annual meeting of Association of Plastic Surgeons of India, Chennai.
Invited Talk: Reconstruction of heel pad following Trauma

15 5th to 9th Aug 2009, 44th Annual meeting of Association of Plastic Surgeons of India, Chennai.
Kilner Essay Award: Finger Tip Replantation: to do or not to do it an Indian Experience

16 23rd to 25th Oct 2009, Annual Maharashtra Orthopedic Association, Aurangabad.
Invited Talk: Soft tissue cover in upper extremity

17 23rd to 25th Oct 2009, Annual Maharashtra Orthopedic Association, Aurangabad.
Invited Talk: When to say no to Salvage in lower limb injuries

Dr. Kannan Balaraman
Consultant, Maxillo Facial Surgeon

2008

1. 24th Feb 2008, Indian Dental Association meet, Coimbatore branch
   Invited Lecture and workshop: Medical emergencies and CPR training for dentists

2. 9th Mar 2008, PG Symposium, ROME (Ramachandra Oral & Maxillofacial Education), Sri Ramachandra Dental College & Hospital, Porur, Chennai
   Invited Faculty: Trauma Clinics

3. 6th Jun 2008, Training for House Surgeons, Ramakrishna Dental College and Hospital, Coimbatore
   Course Faculty: Dental Emergencies & Basic Life Support and CPR Training

4. 27th Jun 2008, Training for House Surgeons, Ramakrishna Dental College and Hospital, Coimbatore
   Course Faculty: Dental Emergencies & Basic Life Support and CPR Training

5. 8th Oct 2008, 7th Asia Pacific Craniofacial Association and 6th International Society for Simulation Surgery Conference, Taipei, Taiwan
   Free Paper: Post traumatic Blepharocele – A case report.

6. 30th Nov 2008, 33rd Annual Conference of the Oral & Maxillofacial Surgeons of India, Lucknow
   Free Paper: Post traumatic ear lobe defect reconstruction

2009

1. 25th Jan 2009, 8th Annual Conference of the Tamil Nadu & Pondicherry Association of Plastic Surgeons, Erode
   Invited Speaker: Principles of Management of Pan Facial Trauma

2. 9th Aug 2009, 57th Annual Conference of the Tamil Nadu Ophthalmologists Association, Coimbatore
   Invited Speaker: Orbital Floor Fractures

3. 27th Aug 2009, Training for House Surgeons, KSR Dental College & Hospital, Thiruchengode
   Course Faculty: Dental Emegencies & Basic Life Support and CPR Training

4. 19th Sep 2009, PG Symposium, Ramachandra Oral & Maxillofacial Education, Sri Ramachandra Dental College & Hospital, Porur, Chennai
   Invited Speaker: Apertognathia (Anterior Open Bite Deformity) Correction

5. 27th Nov 2009, 1st Indo British Joint Conference and 34th Annual Conference of the Association of Oral & Maxillofacial Surgeons of India, Cochin
   Free Paper: Unusual Orbital Injuries

6. 27th Nov 2009, 1st Indo British Joint Conference and 34th Annual Conference of the Association of Oral & Maxillofacial Surgeons of India, Cochin
   Free Paper: Management of Frontal Sinus Injuries

Dr. V. Ravindra Bhat
Consultant Anaesthesiologist

2008

1. 12-13th Jul 2008, Indian Society of Anesthesiologist – State conference, Coimbatore.
   Podium Presentation: Concerns and Controversies in Management of Polytrauma

2. 21- 22st Aug 2008, International Trauma Anesthesia and critical care Society- Indian Chapter, Cochin
   Podium Presentation: Controversies in Trauma Resuscitation

3. 19-21st Sep 2008, Indian Society of Anesthesiologist- South Zone Conference, Mangalore
   Panelist : Management of Polytrauma patient

4. 8th Oct 2008, Annual Conference of Sushrutha Institute of Plastic, Reconstructive and Aesthetic Surgery, Thrissur
   Podium Presentation : Trauma Care – Emergency Management of a Trauma Victim

2009

1. 7th- 8th Feb 2009, ISA Kerala PG Quest, Mid Term CME & Workshop 2009
   Podium Presentation : Initial Assessment of a Trauma Patient

2. 20th -21st Sep 2009, 13th Annual Conference of International Trauma Anesthesia & Critical Care Society
   Podium Presentation: Management of Spine injuries

3. 23rd Oct 2009, Ganga Ortho Trauma Course
   Podium Presentation : Chest injuries – A Ticking Time Bomb

Dr. V.M. Balasubramani
Chief Intensivist

1. 28th Mar 2009, ISSCM meting, Coimbatore branch, Coimbatore
   Invited lecture: Management of drowning and electrocution in ICU

2. 25th Apr 2009 ISA, Coimbatore branch, Coimbatore
   Debate: Who should run the ICU?

3. 23'd Oct 2009, Trauma conference, Ganga Hospital, Coimbatore
   Invited lecture: ARDS – Just when you thought it was over

4. 15th Nov 2009, Critical care meeting, Coimbatore
   Invited lecture: Management of multi drug resistant organisms in ICU

5. 4th Dec 2009, Critical care meeting, Coimbatore
   Invited lecture: Preventing catheter related infections in hospital

Teaching & Training

Teaching is the royal road to learning

- Jessamyn West

Ganga Hospital – Johnson & Johnson Fellowship in Hand and Reconstructive Microsurgery

This educational initiative **started in the year 2002** is very popular and enables two promising young surgeons to spend two months in the unit. They participate in all the clinical and academic activities of the department and on return serve as wonderful ambassadors of the unit. All of them have found the experience gained during their stay useful in their day to day practice.

2008

Dr Nisha Barot MS MCh
Junior Consultant Plastic Surgeon
Rajasthan Hospital
Ahmedabad

"It was an enriching experience. The micro lab course was good. It was a good learning experience both in terms of patient care and knowledge"

Dr Sajal Halder MS MCh
Plastic Surgeon
Sir Gangaram Hospital
New Delhi

"It has been a great opportunity for me to be a part of the system comprising of the majestic 400 bed hospital dedicated only to Plastic surgery and Orthopaedics, pioneering leadership, excellent team with state of the art patient care. I pray God that this institute grows much further so that many of us can get such exposure and training so that we can spread the same for a greater cause"

2009

Dr Srinivasan Rajappa MS Orth
Asst Prof of Orthopaedics
Sri Ramachandra Medical College and Research Institute
Chennai

"Thanks so much for giving me an opportunity to train here. You are all such a great example of hard work and passion for work"

Dr Gayan Ekanayake MS
Plastic and Reconstructive Unit
National Hospital of Sri Lanka
Colombo, Sri Lanka.

"Glory of Ganga is beyond comparison. I wish to recreate this bliss in a smaller scale to give the best of care for my people. I would keep coming back for guidance from you"

Ganga Hospital – Carl Zeiss Fellowship in Hand and Reconstructive Microsurgery

Established in the year 2003 this carries a fellowship grant of Rs. 50000. Every year two selected fellows spend the months of January and February in the unit. Through them we reach out to patients far beyond, pushing the boundries of care. The industry leaders also feel that one of the best and consistent training programmes they are associated is with our department.

2008

Joan Arakkal D Orth FRCS
Surgeon, Mount Medical Centre
Perth, Australia.

'I feel privileged to have known and associated with this unique hospital, that is Ganga. This place has come to be through the talent, dedication and hard work of more than one generation. While thanking Dr SRS and his team for the wonderful time I have had here, I wish this place and its people the very best.'

Lt Col. (Dr) Vijay Langer MS MCh DNB
Consultant Plastic Surgeon
Army Hospital, (Research and Referral)
New Delhi.

'This my second home coming as I call it, has been even better than the last visit. The hunger for perfection, excellence and sheer hard work and perseverance is worth emulating. I have indeed imbibed much from this exceptional experience.'

2009

Dr Jerker Brandt MD Ph D
Consultant, Department of Hand Surgery
Malmo University Hospital
Malmo, Sweden.

'My 2 months Carl-Zeiss fellowship fulfilled all my expectations – and they were high! –on the quality and quantity of surgery. I especially came for exposure to microsurgery and learning from your work has involved so many things from technical tips and tricks to the whole philosophy of care in replants and major extremity trauma…'

Dr Niranjan Bista MD MS
Senior Resident, Plastic Surgery
Nepal Orthopaedic Hospital
Kathmandu, Nepal.

'It has been a great experience for me here on a new plane with great surgeons. My whole fellowship period was very fruitful for me. The knowledge and the exposure which I got here will be very useful for me in my future career. I leant that besides surgical tips and tricks , patient care and devotion to your work is essential to be a great successful surgeon'.

Bruce Bailey Fellowship

Ganga

Mr. Bruce Bailey, Retired Senior Consultant Plastic Surgeon at Stoke Mandeville Hospital, United Kingdom passed away in April 2001. He was responsible for training many Plastic Surgeons from India including Dr. S. Raja Sabapathy. He opened the windows of opportunities for many young surgeons from our country. In the memory of this great man "Bruce Bailey Traveling Fellowship" was set up by Ganga Hospital. Bruce visited India many times and loved it. It was felt that setting up a Fellowship to enable a British Trainee visit our unit for a period of 6 to 8 weeks is a good way to keep the memory of the great man alive. It surely will build bridges between the two countries to mutual advantage. The Fellowship is recognized and announced in the newsletters of the British Association of Plastic Surgeons and the British Society for Surgery of the Hand for the information of the interested candidates.

Dr. Raja Sabapathy with Mr. Bruce Bailey (1989)

Bruce Bailey Fellow - 2008

Mr. Steven Lo, MA BMBch MRLS(Eng) MRCS(Glasg)
Specialist Registrar in Plastic Surgery,
Queen Victoria Hospital,
East Grinstead, United Kingdom

I have had the privilege to come to Ganga on the Bruce Bailey Fellowship. From a clinical standpoint this has been outstanding with numerous cases performed here that I have not encountered in the U K. In terms, of leadership and work ethic there is no better example of this than Dr. S. Raja Sabapathy and I have learnt a great deal from him. The Consultants, Fellows and Registrars have been extremely welcoming and have made my stay very enjoyable. The added bonus of the Microsurgery Course has been the icing on the cake. I hope to have made lifelong friends from my visit, and will hopefully return when I am a Consultant.

Bruce Bailey Fellow - 2009

Mr Adam Blackburn, B Sc(Hons) MBBS (Dist) FRCS (Plast)
Specialist Registrar in Plastic Surgery,
Royal Victoria Hospital,
Newcastle Open Tyne, United Kingdom

It has been a real honour to be this year's Bruce Bailey Fellow. Even though, I visited this unit last year and through that I knew what I was letting myself for, this stay has surpassed my expectations. I had taken for granted the microsurgical training that I would receive in the lab and the excellent patient care that I would see and I was not disappointed. However, I had not appreciated the commitment by the team to teaching with morning meetings 3 days a week and a Visiting Professor with 'Live operating' and a day of lectures. Also, I have learnt much more than Plastic Surgery theory, technique in that I have had some insight into setting up and building a fantastic hospital, team and what it takes to be a great leader. Thanks again to all in the team for making me feel so welcome. No doubt we will meet again (hopefully)

Ganga Hospital Fellowship for Bangladesh Hand Surgeons

A one year fellowship is sponsored by the Department of Plastic Hand and Microsurgery of Ganga Hospital to enable young surgeons from Bangladesh to train in Trauma Reconstructive Surgery. Started in the year 2006, the fellow is selected by a team comprising of Prof. Kairy and Prof. Kalam to undertake training with the sanction of the Government of Bangladesh. The candidates on their return have done good service in their areas.

Dr. Debashis Biswas, MBBS, MCPS (Surgery), MS (Ortho)
Assistant Professor of Orthopaedics
Uttara Adhunik Medical College and Hospital, Uttara,
Dhaka, Bangladesh.

Dr. Shamim Hassan, FCPS (Surg), MS (Plast.Surg.)
Rangpur, Bangladesh.

It was a great experience to be a part of world class trauma care delivery system. I feel honoured and fortunate. I pay my gratitude for providing me this opportunity to improve my skill, knowledge and experience and above all to uplift my confidence. Once, you (India) helped us to gain our freedom, now you (Ganga Hospital) are helping us to the improve the discipline of Plastic Surgery and Hand Surgery in Bangladesh. No word will be enough to express gratitude.

Ganga Hospital Fellowship for Kenyan Surgeons

A Memorandum of Understanding was entered into by the Plastic Hand and Micro Surgery Department of Ganga Hospital and the Vice-Chancellor of the University of Nairobi, Kenya on 30th Jan 2009 to co-operate and conduct joint teaching programmes for post graduates and facilitate students and faculty exchange.

Dr. Peter R. Oduor, MMed. (Surg.) FCS(ELSA),
Consultant Surgeon, Rift Valley Provincial General Hospital
Nakuru, Kenya.

My 6 months stay at Ganga Hospital has been a great experience. You have set up a unique hospital with wonderful people. For the volume of work, the results that are achieved are incomparable. It has been a learning experience for me and I believe that the knowledge gained will help our patients in Kenya. One great thing that I learnt is the importance of commitment and hard work. You and your staff are wonderful. God Bless you.

Dr. Shaban Saidi, MBChB., MMed (Surgery)
Consultant Surgeon
Thika-Kenya.

Different continent, language, food, culture; I never noticed. I was very much at home in Ganga and consider the last six months the most well spent in my life. The hospitality was amazing. The academic cup was overflowing; too much to learn with too little time available. I managed to learn at least one new thing every day for six months.

Medecins Sans Frontieres (Doctors without Borders)

Dr. Chanjiv Singh

Ms Farhat Mantoo

Medicines Sans Frontieres is an organization which renders medical care in regions of conflict and its service was recognized for the Nobel Peace Prize in the year 1999. At the recommendation of Plastic Surgoen, Dr Chanjiv Singh, Ms. Farhat Mantoo , Human Resources Officer of MSF – India, New Delhi visited our centre on 1st Aug 2008. She penned the following words in our visitors book.

"I thank you for the hospitality. I have seen the Hospital and I am really impressed. I found the people welcoming and the best was seeing the Iraqi patient and your nonverbal communication. You can really bridge barriers. Dr Sabapathy, I appreciate your support and willingness to extend your expertise to all."

- Ms Farhat Mantoo

She found that the type of work done and the learning opportunities available in the department would be very useful to surgeons in regions where reconstructive surgery is much needed. As a pilot project 2 surgeons from Iraq, from the region of Sulaimaniya came for a few weeks and also took the microsurgery lab course. They found it useful and visit to Ganga Hospital has become a routine to surgeons with responsibility in reconstructive surgery and maxillo facial surgery in the region. So far 14 surgeons from Sulaimaniya, Iraq have come for training and we are happy that indirectly we are able to make a difference in the lives of people far away.

Comments of an Iraqi Trainee

"It was a golden time for me, when I worked in this hospital. During this time, I did the microsurgical course and saw a number of operations which are not done in our Hospital. I greatly thank all doctors here. I want to tell that Iraqi people need help from other countries. So wish the doors of Ganga Hospital be always open for our doctors...."

Dr Hawre Abdulstar Hassan
Burn and Plastic Centre
Sulaimania, Iraq.

Medecins Sans Frontieres works without borders

We train people to work beyond borders

Conferences Conducted

12th International Perforator Flap Course, 10th – 13th September 2008.

We were honored to have the opportunity to host this prestigious course. Faculty and 231 delegates from 27 countries participated making the meeting truly international. It had a live demonstration workshop, cadaver dissections and didactic lectures and discussions. We gratefully acknowledge the help received from Mr. Venkat Ramakrishnan and Dr. Philip Blondeel to making it a very successful conference.

Sitting (L- R) : Dr. Venkat Ramakrishnan, Dr. Koenraad Van Landuyt, Dr. Phillip Blondeel, Dr S. Raja Sabapathy, Dr. Isao Koshima, Dr. Robert Allen
Standing (L - R) : Dr. Niri Niranjan, Dr. Claudio Angrigiani, Dr. Suhan Ayhan, Dr. Jaume Masia, Dr. Robert Whitfield (Delegate), Dr. Geoff Hallock, Dr. Steve Morris.
Faculty not in picture : Dr. Natalie Roche

Cadaver dissection course in progress

Some comments from the faculty

- * Great course
  * Magnificent Organization
  * Impressive team of surgeons and nurses
  * Beautiful Hospital
  * Warm hospitality
  * Inspiring leader (Raja!)
  * Fantastic climate
  * Intriguing country and city
  * Challenging food (!)
  * Smart and challenging colleagues
  * Most important - A lot of friendship

- Phillip Blondeel

- My first trip to India has exceeded all expectations. The east is different from the west and makes the whole. The course was outstanding and extremely enjoyable. I have loose rubies, Indian clothes and memories to take back

-Robert Allen

- Thanks very much to all of the wonderful people I have met from Ganga Hospital. I have never encountered a more enthusiastic, hospitable, friendly group of surgeons, anesthesiologists, nurses & students ever before in my life. Congratulations to all of you – The Team – for working together so effectively to coordinate such a challenging meeting so well. Every one learned a great deal and had a wonderful time!

- Steve Morris

- You with your team have done an excellent job. You have really perforated through and come out with an outstanding course.

- Niri Niranjan

3rd Biennial Meeting
Brachial Plexus Surgery Group of India Meeting, 20th to 22nd February 2009

The department hosted the 3rd biennial meeting. 116 delegates from 13 countries participated in the meeting and it was a great educational and cultural success.

Prof Aymeric Lim, Singapore

Prof Alex Musset, Spain

Dr Jorge Clifton, USA

Forthcoming Conferences at Ganga Hospital

35th Annual Conference of the Association of Oral and Maxillofacial Surgeons of India (AOMSI), 1st to 4th December 2010.

Organizing Secretary : Dr Kannan Balaraman

Scientific Committee Member : Dr Vimalambiga Ramani

Conference Secretariat : Ganga Hospital

Ganga International Wrist Course, 7th and 8th Jan 2011

An intensive course with live surgical demonstration will be conducted by this world renowned faculty

Prof. Weiland

Prof. Gelberman

Prof. Boyer

Mr. Hobby

46th Annual Conference of the Associations of Plastic Surgeons of India APSICON 2011 7th to 11th Sept 2011

Excel, Educate and Empower

7th Sept. 2011 : Dr CR Sundarrajan Live Surgery Demonstration Workshop

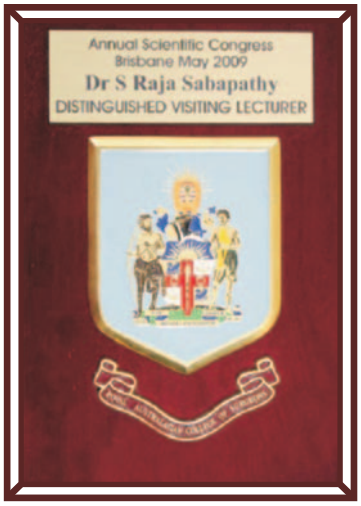
8th Sept. 2011 : Charles Pinto CME in Plastic Surgery

9th to 11th Sept. 2011 : Annual conference of APSI

Awards & Achievements

I feel that the greatest reward for doing is opportunity to do more

- Jonas Salk



Distinguished Visiting Lecturer of the Royal Australasian College of Surgeons and the Australian Hand Surgery Society

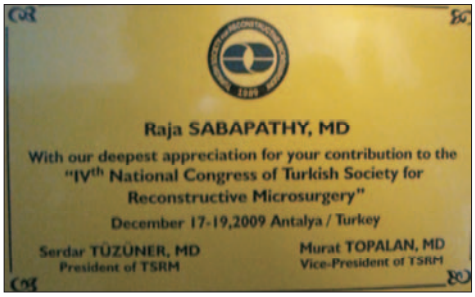
for their Annual Scientific Congress in Brisbane, May 2009.

Yusuf Memorial Oration – 2009

Association of Paediatric Surgeons of India,
Tamil Nadu Chapter – July 11, 2009, Coimbatore.
Title: 'Optimizing Outcomes in Paediatric Trauma'

Martin Isaac Oration – 2009.

International Trauma Care, Indian Chapter
August 22, 2009, Kolkatta.
Title: Improving Trauma Outcomes in India-
What we can do?'



Invited Guest Faculty

for the Annual Congress of the Turkish Society for Reconstructive Microsurgery.

December 2009, Antalya, Turkey.

Dr. Murari Mukurjee Oration

of the Association of
Plastic Surgeons of India
APSICON - November 2008, Varanasi
Title : 'Be the change that
you want to see in the world'

NH Antia Prize of the Association of Plastic Surgeons of India.

This prize is given by the association to the best paper published by its member in an international peer reviewed journal in the year 2008. **Dr Hari Venkatramani** will receive this award in APSICON 2010. The following paper was selected for the award.

Journal of Brachial Plexus and Peripheral Nerve Injury

BioMed Central

Research article

Open Access

Functional outcome of nerve transfer for restoration of shoulder and elbow function in upper brachial plexus injury

Hari Venkatramani*, Praveen Bhardwaj, Sajedur Reza Faruquee and S Raja Sabapathy

Address: Department of Plastic, Hand and Reconstructive Microsurgery, Ganga Hospital, Mettupalayam road, Coimbatore, India

Email: Hari Venkatramani* - drhariv@gmail.com; Praveen Bhardwaj - drpb12@yahoo.co.in; Sajedur Reza Faruquee - rocky27@hotmail.com; S Raja Sabapathy - rajahand@vsnl.com

* Corresponding author

Kilner Essay Prize of the Association of Plastic Surgeons of India, 2009

Dr Hari Venkataramani was awarded the Kilner Essay Prize of the Association of the Plastic Surgeon India for the essay titled "Finger tip Replantation – To do or not to do? An Indian Experience"

The department has to its credit one of the largest series of successful finger tip replantation in the country. It has innovated techniques which simplifies this demanding surgical procedure.

Best Paper Prize in the Joint meeting of the Indian and British Societies for the Surgery of the Hand, Bangalore, November 2008

Dr Praveen Bhardwaj receiving the award from Prof.Joseph Dias, President, British Society of the Surgery of the Hand.

His presentation titled "Management of the Complex Injuries of the Elbow" was adjudged as the best paper of the combined meeting of Indian and British Hand Societies.

Junior Travelling Fellowship of Asian Pacific Federation of Societies for Surgeries of Hand, Hong Kong, Feb 2008

Dr Praveen Bhardwaj was chosen for the fellowship to attend the APFSH Meeting at Hongkong. Here he is seen after receiving the award from Dr Josephine Ip, President APFSSH

Responsibilities Undertaken

Dr S Raja Sabapathy

Appointed by the sanction of the President of India on 27th Oct 2009 to be the Non Official Member of the Armed Forces Medical Research Committee (AFMRC) of the Defense Research & Development Organization (DRDO) for a three year term from 4th Jan 2010.

Unanimously elected as the Vice President - President Elect of the Association of Plastic Surgeons of India at the annual meeting in Chennai August 2009. He will hold the office of the President of the association in the year 2011.

Unanimously elected as the Vice President of the Indian Society for Surgery of the Hand during the annual meeting held at Bangalore in November 2008. He will hold the office of the President of the association for the years 2010 - 2012.

Unanimously elected as the Vice President of the Brachial Plexus Surgery Group of India during the biennial meeting of the association held at Coimbatore in February 2009. He will hold the office of the President of the group for the years 2011 - 2013.

The President of the World Society for Reconstructive Microsurgery Dr Soucacos appointed Dr Raja Sabapathy to be liaison for India.

The executive and the members of the Indian Society for Surgery of the Hand appointed Dr S Raja Sabapathy to the responsibility of being the Organizing Chairman for the 12th Triennial Congress of the International Federation of Societies for Surgery of the Hand and the 9th Triennial Congress of the International Federation of the Societies for Hand Therapy to be held in New Delhi from 4th to 8th March, 2013

Co-chairman of the Scientific Committee for the 15th World Congress of the International Confederation of Plastic Reconstructive and Aesthetic Surgery held at New Delhi from 29th Nov to 3rd Dec, 2009

Dr Hari Venkatramani

Was re elected to be the Secretary of the Tamil Nadu and Pondicherry Association of Plastic Surgeons for the period 2010 - 2013

Executive Committee Member of the Brachial Plexus Surgery Group of India.

Dr Kannan Balaraman

Organizing Secretary of the 35th Annual Conference of the Association of Oral and Maxillofacial Surgeons of India, December 2010, Coimbatore.

Visitors

They give me of their dreams and
I give them of my experience and
I get the better of the exchange

- William J. Mayo

GANGA HOSPITA

Brachial Plex

2008

Sl No	Name of Visitor	Designation	Place	Duration
1	**Dr. Joan Arakkal**	Surgeon, Mount Medical Centre, **Ganga Hospital - Carl Zeiss Fellowship**	**Perth, Australia**	01-01-08 - 20-02-08
2	**Lt. Col.Dr. Vijay Langer**	Plastic Surgeon, R & R Hospital, **Ganga Hospital - Carl Zeiss Fellowship**	New Delhi	02-01-08 - 21-02-08
3	**Dr Umesh Sharma**	Plastic Surgery Resident, VS General hospital	Ahmedabad	01-01-08 - 18-01-08
4	**Dr. John Lindsay**	Surgical Trainee, Bradford Royal Infirmary	**Bradford, U K**	14-01-08 - 18-01-08
5	**Dr. Srinivas Reddy**	Registrar, Trauma & Hand Unit, Selly Oak Hospital	**Birmingham, U K**	21-01-08 - 25-01-08
6	**Dr. Susan Chung**	**Bonner Scholar**, MD PhD Program, Mayo Clinic	**Rochester, USA**	22-01-08 - 05-03-08
7	**Mr. Satish Kalra**	Regional Director - South Asia, Smile Train Project	New Delhi	13-03-08
8	**Hon Dr. Justice Shivaraj V. Patil**	Former Judge, Supreme Court of India Member, National Human Rights Commission	New Delhi	01-02-08
9	**Dr. Shaheen Habeebulla**	M.Ch Plastic Surgery Resident, Calicut Medical College	Calicut	02-02-08 -19-02-08
10	**Dr. Ziad Sophie**	Peripheral Vascular Surgeon, Agha Khan University Hospital	**Karachi, Pakistan**	04-02-08 - 08 02-08
11	**Dr.Sunitha Sequeira**	4th Year Medical Student, Washington University	**St. Louis, USA**	10-02-08 - 08-03-08
12	**Dr. Sumit Agrawal**	M.Ch. Plastic Surgery Resident, Civil Hospital	Ahmedabad	25-02-08 - 08-03-08
13	**Dr. Bipin Batra**	Director, National Board of Examinations	New Delhi	13-03-08
14	**Dr Narender Saini**	Senior Registrar (Hand Surgery), SMS Hospital	Jaipur	17-03-08 - 21-03-08
15	**Dr. Preeti S. Vyas**	M.Ch. Platic Surgery Resident, LG General Hospital	Ahmedabad	23-03-08 - 05-04-08
16	**Dr Manav Suri**	Plastic Surgeon,	Ahmedabad	25-03-08 - 03-04-08
17	**Dr. Nisha Barot**	Consultant Plastic Surgeon **Ganga Hospital - Johnson & Johnson Fellowship**	Ahmedabad	30-03-08 - 30-05-08
18	**Dr Sajal Halder**	Plastic Surgeon, Sir Gangaram Hospital, **Ganga Hospital - Johnson & Johnson Fellowship**	New Delhi	31-03-08 - 25-05-08
19	**Dr. Gnanaprakash**	Consultant Orthopaedic Surgeon	Salem	31-03-08 - 04-04-08
20	**Dr. Santhosh Rath**	Consultant Hand Surgeon, **Secretary, Indian Society for Surgery of the Hand.**	Bhubaneshwar	07-04-08 - 24-05-08

21	**Dr. Bhaskaranand Kumar**	Prof. of Orthopaedic Surgery, Kasturba Medical College	Manipal	28-04-08
22	**Dr. Adiga**	Deputy Registrar-Technical, Professor of E & E Engg Manipal University	Manipal	28-04-08
23	**Dr. Aadil Ali Khan**	Registrar, Plastic Surgery, John Radcliffe Hospital, Oxford University,	**Oxford, UK**	28-04-08 - 02-05-08
24	**Dr. Le Anh Tuan**	Consultant Urologist, Binh Dan Hospital	**Ho Chi Min City, Vietnam**	28-04-08 - 02-05-08
25	**Dr. Pham Nam Viet**	Consultant Urologist, University Medical Centre	**Ho Chi Min City, Vietnam**	28-04-08 - 02-05-08
26	**Dr.Ms.Salma Ahmed Salem Al-Shalji**	Plastic Surgery Trainee	**Dubai, United Arab Emirates**	01-05-08 - 30-05-08
27	**Dr.Sanjay Sheoran**	Consultant Plastic Surgeon	Hisar, Haryana	01-05-08 - 15-05-08
28	**Dr Bhavin Patel**	Consultant Plastic Surgeon	Surat	01-05-08 - 15-05-08
29	**Dr Parag Mahadik**	Consultant Plastic Surgeon	Satara, Maharashtra	01-05-08 - 10-05-08
30	**Dr. Abdullah Oral**	Surgeon, Vejle Sygehus	**Floo Vejle, Denmark**	01-05-08 - 30-05-08
31	**Prof Chih-Hung LIn MD**	Chairman, Plastic and Reconstructive Surgery Chang Gung Memorial Hospital **Ganga Hospital - J & J Visiting Professor**	**Taipei, Taiwan**	09-05-08 - 14-05-08
32	**Dr. ASM Monirul Alam**	Assistant Professor, National Institute of Traumatology and Orthopaedic Rehabilitation(NITOR)	**Dhaka, Bangladesh**	12-05-08 - 13-05-08
33	**Mr. Ballal Hossain**	Physiotherapist, Dhaka Community Hospital	**Dhaka, Bangladesh**	14-05-08 - 28-05-08
34	**Dr. Mohammed Mostafa Monovere**	Dhaka Community Hospital	**Dhaka, Bangladesh**	14-05-08 - 28-05-08
35	**Mr. Mohammed Wakar Hossain**	Administrative Officer, Dhaka Community Hospital	**Dhaka, Bangladesh**	14-05-08 - 28-05-08
36	**Ms. Pritilata Golden**	Senior Staff Nurse, Dhaka Community Hospital	**Dhaka, Bangladesh**	14-05-08 - 28-05-08
37	**Dr. Anusha Hennedige**	Specialist Trainee Plastic Surgery,	**Edinburgh, U K**	18-06-08 - 23-05-08
38	**Mr. Nageshwar Patna**	Physiotherapist, Paralytic Limb Research Foundation,	Bhubaneswar	19-05-08 - 27-05-08
39	**Mr. Dilip Kumar Sahoo**	Physiotherapist, Kar Clinic & Hospital Pvt. Ltd.	Bhubaneswar	19-05-08 - 27-05-08
40	**Dr. Peter Olaiton**	Consultant Plastic Surgeon, Lantech Teaching Hospital	**Osogboo, Osun State Nigeria**	26-05-08 - 30-05-08
41	**Dr. Sharad Jain**	Orthopaedic Surgeon,	Meerut	01-06-08 - 07-06-08

42	**Air Vice Marshal TP Madhusudanan**	Principal Medical Officer, Command Hospital,	Bangalore	06-06-08
43	**Mr. Jay Watson**	Medical Student, Sheffield Medical School	**Sheffield, UK**	11-06-08 - 26-07-08
44	**Dr. Christopher Davis**	Foundation Year I Surgeon	**Bristol, UK**	29-06-08 - 05-07-08
45	**Dr Sunderraj Ellur**	Plastic Surgeon, Asst. Professor, St. John's Medical College	Bangalore	30-06-08 - 04-07-08
46	**Dr Vijay.P.G**	Assistant Professor in Orthopaedics, MES Medical College	Perinthalmanna	30-06-08 - 04-07-08
47	**Ms. Farhat Mantoo**	Human Resources Officer, Medecins Sans Frontieres - H India	New Delhi	01-08-08
48	**Dr. Nathan L.Van Zeeland**	Orthopaedic Hand Fellow, Washington University	**St. Louis, Missouri, USA**	02-08-08 - 15-08-08
49	**Dr. Chris Stutz**	Ortho & Rehabilitation Surgeon, Vanderbilt University Medical Center	**Nashville, Tennessee, USA**	02-08-08 - 28-08-08
50	**Mr. Nick Kalson**	Medical Student, University of Manchester **BAPRAS Elective Grant Student**	**Bedford, UK**	06-08-08 - 26-08-08
51	**Dr. Sridhar**	Orthopaedic Surgeon, RV Institute of Ilizarov Methodology	Palakkad	15-08-08 - 30-08-08
52	**Dr. Marlo Oyster**	Orthopaedic Hand Fellow, Washington University	**St. Louis, Missouri, USA**	16-08-08 - 29-08-08
53	**Dr.Sandiya B**	M.Ch Plastic Surgery Resident, Trivandrum Medical College	Trivandrum	18-08-08 - 30-08-08
54	**Dr. Mohammed Ayub Alip**	Plastic Surgeon	**Chittagong Bangladesh**	05-09-08 - 09-09-08
55	**Dr. Ravinder Singh Bains**	Ullevaal University Hospital	**Oslo Norway**	05-09-08 - 09-09-08
56	**Dr. Declan Collins**	Plastic Surgery Trainee	**London, UK**	05-09-08 - 09-09-08
57	**Dr. Nikhil Patel**	Plastic Surgery Trainee	**Chelmsford, UKO**	5-09-08 - 09-09-08
58	**Dr. Shuji Suzuki**	Yamanashi University	**Chuo-shi, Japan,**	05-09-08 - 09-09-08
59	**Dr. Niranjan Bista**	Senior Resident, Plastic Surgery, Nepal Orthopaedic Hospital	**Khatmandu, Nepal**	05-09-08 - 09-09-08
60	**Dr. Vani Prasad**	Plastic Surgery Registrar, Queen Elizabeth Hospital	**Adelaide, Australia**	05-09-08 - 09-09-08
61	**Dr. Salim Ahmed**	Specialist Registrar, Aberdeen Royal Infirmary	**Aberdeen, Scotland, UK**	05-09-08 - 09-09-08
62	**Dr. Claudio Angrigiani**	Consultant Plastic surgeon	**Buenos Aires, Argentina**	10-09-08 - 15-09-08

63	**Dr. Jamie Mausia**	Consultant Plastic surgeon	**Barcelona, Spain**	10-09-08 - 15-09-08
64	**Dr. Suhan Ayhan**	Consultant Plastic surgeon	**Ankara, Turkey**	10-09-08 - 15-09-08
65	**Dr. Nathalie Roche**	Consultant Plastic Surgeon, University Hospital	**Gent, Belgium**	10-09-08 - 15-09-08
66	**Dr. Philip Blondeel**	Consultant Plastic Surgeon, University Hospital	**Gent, Belgium**	10-09-08 - 15-09-08
67	**Dr. Steve Morris**	Consultant Plastic Surgeon	**Halifax, Canada**	10-09-08 - 15-09-08
68	**Dr. Niri Niranjan**	Consultant Plastic Surgeon	**Chelmsford, UK**	10-09-08 - 15-09-08
69	**Dr. Robert J. Allen**	Consultant Plastic Surgeon	**Charleston, South Carolina, USA**	10-09-08 - 15-09-08
70	**Dr. Geoffrey Hallock**	Consultant Plastic Surgeon	**Allen Town, Pennsylvania, USA**	10-09-08 - 15-09-08
71	**Dr. Koenraad Van Landuyt**	Consultant Plastic Surgeon	**Gent, Belgium**	10-09-08 - 15-09-08
72	**Prof. Isao Koshima**	Consultant Plastic Surgeon	**Tokyo, Japan**	10-09-08 - 14-09-08
73	**Mr. David Rice**	Plastic Surgery Clinical Assistant	**Allen Town, Pennsylvania, USA**	10-09-08 - 15-09-08
74	**Mr. Venkat Ramakrishnan**	Consultant Plalstic Surgeon	**Chelmsford, UK**	10-09-08 - 15-09-08
75	**Dr. Ramakant Bembde**	Consultant Plastic Surgeon	Aurangabad	13-09-08
76	**Dr. Milind Wagh**	Consultant Plastic Surgeon, Hiranandani Hospital	Powai, Mumbai	13-09-08
77	**Dr. Harron Ur Rashid**	Consultant Hand Surgeon, Asst. Professor of Orthopedics, Aga Khan University	**Karachi, Pakistan**	13-09-08
78	**Dr. Srinjoy Saha**	Chief Resident, Tata Dept of Plastic Surgery JJ Hospital	Mumbai	09-09-08 - 18-09-08
79	**Dr. Gayan Ekanayake**	Senior Registrar in Plastic Surgery National Hospital of Sri Lanka	**Colombo Sri Lanka**	09-09-08 - 18-09-08
80	**Dr. Heiko Kerkmann**	Cranio Maxillo Facial Surgeon, University Clinic	**Giessen, Germany**	09-09-08 - 18-09-08
81	**Mr. Stuart Enoch**	Specialist Registrar, Plastic Surgery University Hospital of Manchester	**Manchester, UK**	10-09-08 - 18-09-08
82	**Dr. Opara Kingsley**	Surgeon, IMO State University Teaching Hospital	**Orlu, Owerri, Nigeria**	10-09-08 - 18-09-08
83	**Mr. Mark Sheldon Lloyd**	Specialist Registrar in Plastic Surgery, St. Andrews Centre for Plastic Surgery and Burns	**Chelmsford, Essex UK**	10-09-08 - 18-09-08

84	**Dr. Apurva Patel**	Consultant, Plastic Surgeon, Kanchi Nursing Home.	Mumbai	30-09-08 - 04-10-08
85	**Dr. Ramesh Vidyadharan**	Department of Plastic Surgery Birmingham Childrens Hospital	**Birmingham, UK**	30-09-08 - 04-10-08
86	**Dr. Gurupal Singh Chhabda**	Plastic Surgery Resident VS General Hospital	Ahmedabad	30-09-08 - 08-10-08
87	**Dr. Balachandra Menon**	Consultant HPB and Transplant Surgeon	Cochin	20-10-08 - 24-10-08
88	**Dr. Michael Spink,**	Fellow in Head and Neck Cancer, Amrita Hospital, Cochin	**Northhampton, Maryland, USA**	20-10-08 - 24-10-08
89	**Dr.Jonathanan Hobby**	Consultant Hand Surgeon North Hampshire Hospital **Graham Stack Fellowship, BSSH**	**Bassingstoke, U K**	21-11-08 - 26-11-08
90	**Mr. Stewart Watson**	Consultant Plastic Surgeon Wythenshawe Hospital	**United Kingdom**	21-11-08
91	**Dr.Jill Webb**	Consultant in Hand and Plastic Surgery Shelly Oak Hospital	**Birmingham, UK**	01-12-08 - 02-12-08
92	**Dr. Prof. R. R. Kairy**	Professor of Orthopaedics, National Institute of Traumatology and Orthopaedic Rehabilitation (NITOR)	**Dhaka, Bangladesh**	01-12-08 - 03-12-08
93	**Dr. Sajedur Reza Faruquee**	Hand Trauma & Reconstructive Surgeon, National Institute of Traumatology and Orthopaedic Rehabilitation (NITOR)	**Dhaka, Bangladesh**	01-12-08 - 03-12-08
94	**Dr.Sahan Rannan-Eliya**	Senior Registrar and Inteface Fellow in Hand Surgery Sheffield Teaching Hospital	**Sheffield, U K**	01-12-08 - 11-12-08
95	**Dr. Murali Krishna**	Associate Professor in Plastic Surgery, Vijayanagar Institute of Medical Sciences	Bellary	01-12-08 - 14-12-08
96	**Dr. Vivek Narayanan**	Senior Registrar, Department of Orthopaedics, Fortis Hospital	Noida	01-12-08 - 05-12-08
97	**Dr. Yogishwarappa C.N**	Asst.Professor in Plastic Surgery, Bowring and Lady Curzon Hospital, Bangalore Medical College and Research & Institute	Bangalore	01-12-08 to 14-12-08
98	**Dr. ASM Monirul Alam**	Asst Professor, National Institute of Traumatology and Orthopaedic Rehabilitation (NITOR)	**Dhaka, Bangladesh**	07-12-08 - 11-12-08
99	**Dr. Nakul Kumar Datta,**	Associate Professor of Orthopaedic Surgery Bangabandhu Sheikh Mujib Medical University	**Shabag, Dhaka, Bangladesh**	07-12-08 - 11-12-08
100	**Mr.Prashanth.P.Kashyap**	Physiotherapist, Vikram Hospital	Mysore	01-12-08 - 12-12-08
101	**Mr.Pradeep Kumar.M.N**	Physiotherapist, Vikram Hospital	Mysore	01-12-08 - 12-12-08
102	**Mr.Puttaraju.G**	OT Technician, Vikram Hospital	Mysore	01-12-08 - 11-12-08
103	**Dr. Rahul Nath**	Director, Texas Nerve-Paralysis Institute	**Houston, USA**	28-12-08 - 31-12-08

2009

104	**Dr. Jerker Brandt**	Consultant Hand Surgeon, Department of Hand Surgery, Malmo University **Ganga Hospital - Carl Zeiss Fellowship**	**Malmo, Sweden**	31-12-08 - 27-02-09
105	**Dr. Niranjan Bista**	Senior Resident in Plastic Surgery, Nepal Orthopaedic Hospital, **Ganga Hospital - Carl Zeiss Fellowship**	**Kathmandu, Nepal**	31-12-08 - 27-02-09
106	**Air Marshal P Madhusoodanan** AVSM VSM	**Director General of Medical Services (Air),** Armed Forces Medical Services	New Delhi	10-01-09
107	**Dr. Ketan Patel**	Associate Professor of Plastic Surgery Government Medical College	Bhavnagar	11-09-09
108	**Dr. Hawre Abdulstar Hassan**	Plastic Surgery Resident, Burns & Plastic Centre	**Sulaimaniy, Iraq**	11.01.09 - 23-01-09
109	**Dr. Saman W. Boskany**	Postgraduate in Faciomaxillary Surgery Teaching Emergency Hospital	**Sulaimaniy, Iraq**	11.01.09 - 23-01-09
110	**Dr Aashish Chaudhry**	Senior Resident, Department of Orthopedics, Sushrutha Trauma centre	New Delhi	19-01-09 - 23-01-09
111	**Dr. Preetha Muthiah**	Specialist Registrar in Plastic Surgery Northern General Hospital	**Sheffield, U K**	19-01-09 - 23-01-09
112	**Ms. Angela Ketenum RN**	BSN Health Care Coordinator, Resident Nurse, Hebron School Lushington Hall,	Ootacamund	24-01-09
113	**Dr. Biju Murali**	M.Ch Resident, Medical College	Trivandrum	12-01-09 - 26-01-09
114	**Dr. Kinnar Kapadia**	Plastic Surgery Resident, Civil Hospital	Ahmedabad	05-01-09 - 04-02-09
115	**Dr. Pramod S Chinder**	Fellow in Hand and Microsurgery National University Hospital	**Singapore**	26-01-09 - 30-01-09
116	**Dr.Jakub S. Langer**	Resident in Orthopaedics, Washington University	**St. Louis, Missouri, USA**	25-01-09 - 31-01-09
117	**Dr. Joyce M. Wilson**	Resident in Orthopaedic surgery, Washington University	**St. Louis, Missouri, USA**	25-01-09 - 31-01-09
118	**Dr. David Izadi**	ST2 Plastic Surgery Trainee, South West Deanery Frenchay Hospital	**Bristol, UK**	15-02-09 - 23-02-09
119	**Mr. James Chan**	Specialty Registrar Year II, Oxford Deanery	**Oxford, UK**	15-02-09 - 19-02-09
120	**Dr. Kshemendra Senarath Yapa**	Specialty Registrar Year II, Northwest Deanery	**Bolton, U K**	15-02-09 - 22-02-09
121	**Dr. Bharath Kadadi**	Consultant Hand Surgeon	Bangalore	15-02-09 - 22-02-09
122	**Dr. Yasas Abaywickrama**	Senior Registrar- Plastic Surgery Lady Ridgeway Children's Hospital	**Colombo, Sri Lanka**	19-02-09 - 28-02-09
123	**Dr. Prashanth Yadav**	Plastic Surgery Resident, Civil Hospital	Ahmedabad	10-02-09 - 05-03-09
124	**Dr. Vikram Kumar Raja**	Plastic Surgery Resident, Madras Medical College	Chennai	09-03-09 - 13-03-09

125	**Dr. Anuragh Chitranshi**	Plastic Surgery Resident Government Medical College	Nagpur	09-03-09 - 13-03-09
126	**Prof Andrew Burd**	The Chinese University of Hong Kong, Prince of Wales Hospital, **Ganga Hospital - J & J Visiting Professor**	**Shatin, Hong Kong**	06-03-09 - 12-04-09
127	**Dr. Chandrashekar V Mudgal**	Associate Professor of Orthopaedic Surgery, Karnataka Institute of Medical Sciences	Hubli	10-04-09 - 13-04-09
128	**Dr. David Gerlach**	Resident In Orthopaedic Surgery, Barnes-Jewish Hospital Washington University	**St. Louis, USA**	11-04-09 - 24-04-09
129	**Dr. T. Ayyappan Thangaavel**	Consultant Plastic Surgeon	Ahmedabad	10-04-09 - 13-04-09
130	**Dr. Shkar K. Ahmed**	Resident, Burns, Reconstructive & Plastic Surgery Emergency Hospital	**Sulaimaniy, Iraq**	09-04-09 - 23-04-09
131	**Dr Damawand H.Salih Abdulla**	Resident, Plastic, Reconstructive & Burns Surgery Emergency Hospital	**Sulaimaniy, Iraq**	09-04-09 - 23-04-09
132	**Mr. Adam Blackburn**	Specialist Registrar in Plastic Surgery Royal Victoria Hospital	**New Castle, UK**	27-04-09
133	**Dr. Gayan Ekanayake**	Senior Registrar in Plastic Surgery National Hospital, Colombo **Ganga Hospital-Johnson & Johnson Fellowship**	**Sri Lanka**	19-02-09 - 21-04-09
134	**Dr. Srinivasan Rajappa**	Consultant Orthopaedic surgeon, Sri Ramachandra Medical College and Research Institute, **Ganga Hospital-Johnson & Johnson Fellowship**	Chennai	01-03-09 - 24-04-09
135	**Dr. Adel Omer Albaiti**	General Surgeon, Modern German Hospital	**Sanua, Republic of Yemen**	28-01-09 - 28-04-09
136	**Dr. Steven Lo**	Specialist Registrar in Plastic Surgery Queen Victoria Hospital, **Bruce Bailey Fellowship**	**East Grinstead, UK**	16-05-09 - 13-06-09
137	**Dr. Faisal Ameer**	Senior Resident, King George Medical University	Lucknow	16-05-09 - 22-05-09
138	**Dr. Panchu Subramaniyan**	Orthopaedic Surgeon Krishnakumar Orthopedic Hospital	Nagerkoil, Kanyakumari	23-05-09 - 29-05-09
139	**Dr. Syed Ashfaq Hasan**	Associate Professor of Orthopaedic Surgery, University of Arkansas for Medical Sciences	**Arkansas, USA**	23-06-09 - 08-07-09
140	**Dr. Satya Saraswat**	Consultant Plastic Surgeon, Saraswat Hospital	Agra	13-07-09 - 19-07-09
141	**Mr. Sivakumar Veeramani**	Specialist Registrar in Plastic Surgery Royal Victoria Infirmary	**Newcastle, UK**	20-07-09 - 24-07-09
142	**Mr. Viswanath Reddy Mula**	SHO, Burns and Plastic Surgery, St. Andrew's Unit, Broomfield Hospital	**Chelmsford, UK**	20-07-09 - 24-07-09
143	**Dr. Faraydoon Karim Rasul**	Resident in Plastic and Burns surgery Emergency Hospital	**Sulaimaniy, Iraq**	16-07-09 - 27-07-09
144	**Dr. Kurdo Akram Qaradagli**	Resident, Reconstructive Plastic & Burns Centre	**Sulaimaniy, Iraq**	16-07-09 - 27-07-09
145	**Dr. Sameer Latheef. T.K.**	Senior Resident, Government Medical College	Calicut	01-07-09 - 31-07-09

146	**Dr. Sreelal**	M.Ch Resident, Medical College	Kottayam	01-07-09 - 30-07-09
147	**Dr. med.Claire Jane Zweifel**	Clinical Fellow Plastic and Hand Surgery, St. Andrew's Centre for Plastic Surgery and Burns	**Chelmsford, U K**	10-08-09 - 14-08-09
148	**Ms. Helena Van Dam**	Specialist Registrar Plastic Surgery, St. Andrew's Centre for Plastic Surgery and Burns	**Chelmsford, U K**	10-08-09 - 14-08-09
149	**Mr. Jeff Pike**	Clinical Fellow, Washington University	**St. Louis, USA**	09-08-09 - 15-08-09
150	**Dr. Lakshmi Ananth**	Assistant Professor, Department of ENT and Head and Neck Surgery, Siddhartha Medical College	Tumkur	10-08-09 - 15-08-09
151	**Dr Pradeep Hosamani**	Assistant Professor, Department of ENT and Head and Neck Surgery, Siddhartha Medical College	Tumkur	10-08-09 - 15-08-09
152	**Dr. Nicole Strauss**	Hand and Upper Extremity Fellow Washington University	**St. Louis, USA**	24-08-09 - 28-08-09
153	**Dr. Pashupati Chaudhary**	Assistant Professor in Orthopaedics BP Koirala Institute of Health Sciences	**Dharan, Nepal**	12-09-09 - 15-09-09
154	**Dr. Santosh Kumar**	M.Ch Resident, Patna Medical College	Patna	08-09-09 - 15-09-09
155	**Dr. Mayank Singh**	M.Ch Resident, V. S. Hospital	Ahmedabad	07-09-09 - 11-09-09
156	**Dr.Gunaratnam Shyamalan**	V Year SW Thames Specialist Registrar Royal Free Hospital	**London, UK**	01-07-09 - 20-09-09
157	**Dr. Charudatta Chaudhari**	Consultant Plastic Surgeon Kokilaben Dhirubhai Ambani Hospital	Andheri (W), Mumbai	20-07-09 - 27-09-09
158	**Dr Olesegun. A. Kehinde**	General Surgeon, Olaturi Onabanjo University Teaching Hospital	**Ogun State, Nigeria**	12-06-09 - 06-10-09
159	**Dr. Dharini Kulendran**	Registrar, Plastic Surgery St. Andrew's Centre, Broomfield Hospital	**Chelmsford, UK**	12-09-09 - 16-09-09
160	**Dr. Mobin Syed**	Registrar, Plastic Surgery, St. Andrew's Centre, Broomfield Hospital	**Chelmsford, U K**	12-09-09 - 16-10-09
161	**Dr. Satyanarayan Mishra**	Professor of Plastic Surgery, Annamalai University	Chidambaram	26-10-09 - 30-09-09
162	**Dr. Manish Gupta**	Specialist Registrar, Birmingham Hand Centre Selly Oak Hospital	**Birmingham, U K**	28-10-09 - 30-09-09
163	**Dr. Gaurav Raj Dhakal**	Orthopedic Surgeon, Kathmandu University Hospital	**Dhulikhel, Kavre, Nepal**	30-10-09 - 31-10-09
164	**Dr. K.V.Nageswara Reddy**	M.Ch Resident, Nizam's Institute of Medical Sciences	Punjagutta	19-10-09 - 31-10-09
165	**Dr. G. Venkatesh Babu**	M.Ch Resident, Nizam's Institute of Medical Sciences	Punjagutta	19-10-09 - 31-10-09
166	**Dr. Carlos Gonzalez Legarda**	Consultant Plastic Surgeon, Partenon Clinic San Rafael University Hospital	**Bogota, Columbia**	19-10-09 - 05-11-09

167	**Dr. Ravi K Gupta**	Associate Professor, Department of Orthopaedics Government Medical College, **ISSH - Ethicon Fellowship in Hand Surgery**	Chandigarh	01-11-09 - 08-11-09
168	**Dr. Ashraf M Albustanji**	Maxillofacial Surgeon, J R C Hospital	**Amman, Jordan**	02-11-09 - 6-11-09
169	**Dr. Zbigniew Szlosser**	Registrar, General and Hand Surgery Pomeranian University	**Szczecin, Poland**	20-09-09 - 09-11-09
170	**Dr. Abdulrahman Ali Jaf**	Senior House Office, Registrar in Plastic, Reconstructive and Burns surgery, Emergency Hospital	**Sulaimaniy, Iraq**	01-11-09 - 14-11-09
171	**Dr. Diyar Abdulwahid Salih**	Plastic Surgery Registrar, Emergency Hospital	**Sulaimaniy, Iraq**	01-11-09 - 14-11-09
172	**Dr. Mu'ammar Abu Serriah**	Oral & Maxillo Facial Surgeon Northampton General Hospital	**Northampton, UK**	29-11-09 - 04-12-09
173	**Dr. Mrinal Raghavan**	Orthopaedic Surgeon, Krishna Hospital	Kasaragod	29-11-09 - 04-12-09
174	**Dr. Roijin George Joseph**	Orthopaedic Surgeon and Director, Medical Trust Hospital, Nedumkandam	Idukki	29-11-09 - 04-12-09
175	**Dr. Paul Di Giovine**	Repatriation General Hospital, Flinders Medical Center	**Adelaide, Australia**	01-10-09 - 09-12-09
176	**Ms. Lynee Feehan**	**Treasurer and President Elect, International Federation of Societies for Hand Therapy (IFSHT)**	**Vancouver, Canada**	06-12-09 - 09-12-09
177	**Dr. Milap Rughani**	Registrar in Plastic Surgery, John Radcliffe Hospital	**Oxford, U K**	07-12-09 - 12-12-09
178	**Ms. Nicola Petrie**	Registrar, Plastic Surgery, St. Andrew's Unit for Plastic Surgery, Broomsfield Hospital	**Chelmsford, U K**	07-12-09 - 11-12-09
179	**Dr. Rajat Kumar Srivastava**	M.Ch Resident, Department of Plastic Surgery Baroda Medical College	Baroda	05-12-09 - 12-12-09
180	**Dr. Jeremy Prakash**	Registrar , Department of Orthopaedic Surgery University Malaya Medical Centre	**Kuala Lumpur Malaysia**	07-12-09 - 17-12-09
181	**Dr.Yukichi Zenke**	Orthopaedic and Hand Surgeon, Department of Orthopaedic Surgery,University of Occupational and Environmental Health	**Kitakyusha city, Japan,**	07-12-09 - 18-12-09

Corporate Social Responsibility

Helping others is like helping yourself

- Henry Flager

Swasam
Caring for life

Dedication of the Project 'Swasam' to the community - 3rd May 2008 by

Hon. Dr. APJ Abdul Kalam,
Former President of India.

Ganga Hospital has always been passionate about health and human issues. We strongly believe that recognition and returns alone cannot define our success. Lending our services to the needy and making a difference in their lives greatly matters to us.

The launch of 'Swasam', is a step towards making our vision take shape. Swasam is a service oriented venture through which Ganga Hospital extends its service to the society through various health, education and environment related projects. Through 'Swasam', we believe in taking small but sure steps, where every step is towards a little better life, a little wider smile and a much better world.

Our former President launching the project to the community and making a reference to the child with radial club hand in the ward. Mr D R Karthikeyan, former Director of CBI presided over the function.

A ward was dedicated on the occasion wherein any child with a deformity could be treated free of cost if the parents cannot afford the care. Our former President of India is seen here spending a few happy moments with a child.

The various community outreach programmes will come under the banner 'Swasam'. Several programmes that we have done are,

'Save the Working Hand' Projecct

Free surgeries for poor hand injury patients (in association with Rotary club of Coimbatore Metropolis)

'Help for the Hands in Need'Project

Free Hand surgeries for patients with injuries, children born with deformities and for corrective surgery for spastic children (in association with Rotary club of Coimbatore Metropolis).

Project Helpline

Free deformity corrective surgeries (in association with Round Table, India).

Project 'Smile Train'

Free surgery for children born with cleft lip and palate (in association with 'Smile Train).

UYIR

People's movement against road traffic accidents (in association with Rotary)

Road Safety & First Aid Awareness Programme

Free workshops for school and college students.

Accident Helpline Centres

Free ambulance and paramedical services on certain highways.

Ganga Hand Injury Support Group

Information & resource centre for rehabilitation of patients with injuries of the hands and upper limb.

Ganga Orthopaedic Research & Education Foundation

Providing free education for poor students and funding research projects.

**Every step is towards
a little better life,
a little wider smile and
a much better world.**

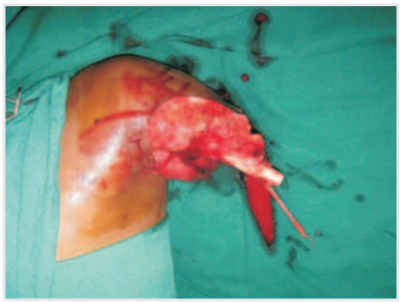
Chief Minister Kalaignar's Insurance Scheme for Life Saving Treatments

The scheme was envisaged by the Tamil Nadu Government to make quality surgery available to the masses living below the poverty line and is managed by Star Health Insurance. Ganga Hospital offered its services for the scheme and was recognized in Sept 2009. In the next 9 months 3500 surgeries were done under the scheme and the institution topped the list of hospitals in performance in the state. Cutting edge technology and services were made available to the poor in the management of complicated trauma situations and secondary reconstructions.

Hon. Dy Chief Minister of Tamil Nadu Mr MK Stalin visited the Hospital and applauded the work of the Hospital. Dr Raja Sabapathy explaining to him about a major replantion patient done under the scheme. Mayor of Coiimbatore, Mr Venkatachalam (partly hidden), Mr MK Stalin (Hon Dy Chief Minister), Dr P Umanath IAS (Collector of Coimbatore), Dr S Rajasekaran, Mr P Palaniswamy (Hon Minister for industries) and Mr Raja (Hon Union Minister for Communications) are in the picture.

The patient

13 year old Master Mohan suffered total amputation of his left arm in a machinary accident, about 300 km from Coimbatore. The awareness of the procedure done at Ganga Hospital and the scheme is so high, that immediately he was sent to Ganga Hospital by the local doctor. He is now able to bend his elbow and has started to move his fingers.



Many demanding emergency procedures like replantation and complex secondary reconstructions have been done free to the patients under the scheme.

Smile Train

The Smile Train was founded by Mr. Charles B Wang and Mr. Brian Mullaney in 1999 with the objective of eradicating the problems of patients born with cleft lip and palate. Most of these patients went through their lives without undergoing treatment because they could not afford it or they were not aware of the possibilities. Often they became social recluses due to constant ridicule from others.

Unlike the previous charities the approach of Smile Train was different in that they involved the local surgeons in the treatment rather than bringing the surgeons from abroad who used to go back after the surgeries. This ensured that the patients had a good followup from the surgeons who operated on them. To this effect they partnered with the local hospitals to get these patients treated.

The entire treatment is done free of charge to the patient. They need not pay anything for their treatment, stay or medicines. Ganga Hospital became a proud partner with the Smile Train in 2007 and we have operated on 191 patients till December 2009. The oldest patient was 38 years of age and was thrilled to see his face appear normal. Apart from this we have been involved in increasing the awareness about the management of congenital anomalies by teaming up with various NGOs and participating in health camps.

Total number of patients operated 191
(till December 2009)

Cleft lip	
Bilateral lips	11
Unilateral lips	57
Cleft Palates	69
Secondary Cleft deformity	54

Dr. R. Ravindra Bharathi attended the 2008 International Cleft Lip and Palate Foundation meeting in Dallas, USA (seen with Dr. Sathish)

A Bilateral Cleft lip child who underwent surgical correction under the scheme. Here the child is seen with her happy parents on a follow-up visit with the smile train gift bag. She is now ready for school.

Dr. B. Kannan received a scholarship from Smile Train to attend the 4th Chang Gung forum and the Seventh Asia Pacific Craniofacial Association Conference in Taipei, Taiwan in October 2008

Ganga Hand Injury Support Group

The support group to help rehabilitate the hand injured patients was inaugurated in Dec 2007 by Hon. Dr Justice Shivraj V. Patil. Mr Arun Kumar, MSW was in charge of the project and Mr Ashok Kumar MSW, took over from him on 9th November, 2009.

Mr Ashok Kumar takes active part in counseling the hand injured patients regarding the jobs available, about the facilities and schemes offered by the Government and Non-Governmental organisations for the disabled. This increases their self confidence and helps them rehabilitate at a much faster pace.

Services Undertaken

Bus passes for Hand injured patients to undergo physiotherapy.

We have taken steps to procure point to point bus passes to enable poor patients to come to Ganga Hospital for physiotherapy regularly. This has increased compliance and helps obtain improvement in outcome after major hand injuries and complex secondary reconstructions.

The social welfare officer Mr. Ashok, counselling a patient who has suffered a major hand injury

Job placement for disabled people

Suitable employment was arranged for 17 differenly abled persons through Ganga Hospital, Isha Foundation and UDIS forum.

- **Prosthesis for amputees**
- **Educational Scholarships for hand injury patients**
- **Provide awareness of Government schemes for the differently abled**
- **Helping recycle thermoplastic splints for use by poor patients**
- **Counselling of patients who were found positive for HIV and Hepatitis viruses**
- **Arranging congenital anomalies screening camps**

Ganga Hand Injury Support group will

- *Help people live with change*
- *Face the world with confidence*
- *Open up windows of opportunities*

People

Our People - Our asset

People

In the year 2008 & 2009 several senior people joined our team to help us reach our goal.

Dr. T. Manonmani MBBS., DNB., PGDHA.
Medical Administrative Officer

Completed her MBBS in 1986 from University of Madras followed by DNB in General Medicine. Practised as physician in a Corporate Hospital for more than 12 years. Owing to a great passion for hospital administration, completed PGDHA and joined us as the Medical Administrative Officer on 16-05-2008.

Dr. Babu Bajantri MS., MCh (Plastic)
Consultant Plastic Surgeon

Joined the consultant team in 2008. He brings with him a rich and varied experience of 18 years and his skills very well complement the effectiveness of the team and adds strength to the teaching programme.

Dr. Sanjai Ramkumar MS., DNB (Plastic)
Senior Registrar, Plastic Surgery

Joined the DNB programme of our hospital in 2006 and qualified in 2009. He joined the team as Senior Registrar after qualifying. His energy and wide general surgical experience adds strength to the trauma and onco surgical services of the team.

Dr Vimala Ramani BDS., MDS (Maxillofacial)
Senior Registrar, Maxillofacial Surgery

Joined as Registrar in 2006 and became a Senior Registrar in 2009. Apart from her contribution to the Maxillofacial services she effectively contributes to the unit's progress by taking an active part in administrative activities.

Dr. Praveen Bhardwaj MS (Ortho)., FNB (Hand and Micro Surgery)
Senior Registrar, Hand Surgery

Successfully completed the post doctoral FNB programme in Hand and Microsurgery in our unit in 2009. His special interests are in Brachial plexus surgery and the Surgery of the wrist.

Medical Images Archiving Team

Ms. Brindha and Dr. Anuradha J. Patil

Dr. Anuradha, Senior DNB post graduate in Plastic Surgery and Ms. Brindha are incharge of archiving photographs and maintaining the database according to the diagnosis. Everyday about 400 photographs are categorized and saved.

Operation Theatre Nurses

The theatre nurses efficiently manage the seven operation theatres which are available round the clock for Plastic Surgery Services.

Secretaries

Mr. M. Sasidharan, Mr. H. Seshagiri, Mr. K. Vignesh and Mrs. S. Gayathri

Out Patient Staff

CELEBRATIONS & EVENTS

Medical Exhibition for School Students

Introducing technology to future Microsurgeons!

Independence day & Republic day

The nurses steal the show with their marchpast and cultural programmes

Founder's Day

The enthusiasm and the acting skills should be seen to be believed

Ayudha Pooja Celebrations

A fitting finale to a fantastic and successful international course

Cultural Events of the Perforator Flap Course

Felicitating Mr. Vellingiri (Theatre Manager, 3rd from standing right) & Mrs. Chandrika (Nursing Superintendent, 3rd from standing right) on completion of 25 years of service