DAY SURGERY			
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Editor: Dr. T. Naresh Row Board: Dr. Paras Jain Dr. T. Seema Row Dr. Kishore Adyanthaya Dr. Bharat Shah Ms. Smita Khanna	A monthly publication of <b>O</b> ne <b>D</b> ay <b>S</b> urgery India Private Limited Rs. 10, www.one-daysurgeryindia.com		
	Wishing you all a	all those who lost their lives in the t peaceful and healthy New Year. May you t rom: The Staff of One Day Surgery Centre - Babuli	nave a fearless & safe 2009.



## From the Editors Desk:

Enough.....

The massacre of Mumbai, once again has made us all wonder the mysterious ways of God. Even the most optimistic person would hesitate to look for a brighter side in this situation.

Several questions arise in our mind, are we at war? Such situations arise in a war torn country, where death is omnipresent. What has

created such a situation? Is it us? We have chosen our leaders, are they competent? Could they have prevented this situation by taking necessary steps right from the start? Is Kashmir the issue? If yes, is it not a major problem that needs to be resolved? Is 60 years of negotiations not enough? Are we just happy that we live in the largest democracy of the world? Have our leaders given us a state which is free from fear of terrorists? We have enough struggle and internal strife in our hands that we have to keep looking over our shoulder for the fear of being struck from behind. The mindless killing of innocent people has only one purpose: to create chaos and fear. Is it too much to ask for its prevention? Have we become so heartless that for a fist full of money we can sell our souls and turn a blind eye to the carnage it can cause? Why would a group of disgruntled people want to destroy the peace and harmony of a nation? There has to be a reason for the repeated blasts over several years, which refuses to stop. We need to resolve by getting to the core of the issue. We pat our backs at our small achievements. We are constantly denying the existence of problems, this is human nature. Life goes on, we compromise on everything. Even when choosing our leaders. Important are issues like improved infrastructure, better education, increase in job opportunities, exports, more buying power, India must shine. But, one incidence of terror is enough to make the shining dull. The blame game.....heads must roll.

Everything else becomes insignificant when we think of the loss of our near and dear.

We need a leader who will have only one agenda and that is, to restore peace, forever, if possible. Someone, who will resolve Kashmir; who will prevent Babri masjid, Godhra, Malegaon, Mumbai blasts and terror attacks from happening again.

Can we choose a leader or a group who will have this single agenda?

Think about it. Remember, do not forgive or forget. Enough...... Regards, Naresh

### Criteria's for Day Care Surgery:

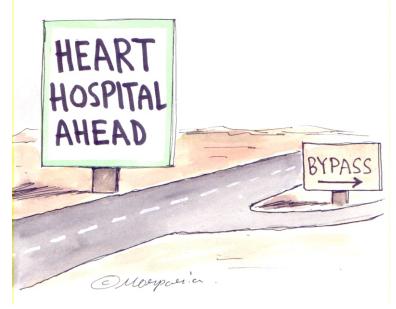
Selection of patients and cases are of prime importance in the success of safe Day Surgery. We strictly follow these criteria's, which are of international standards & are modified to suit our situation.

#### 1. Criteria's for Patient selection:

- Age: more than 6 months old.
- Medically fit and stable patients {ASA I, II, III (well controlled)}.
- Well motivated and psychologically / mentally stable.
- Toilet, transport, telephone and responsible relation at home.
- -Body mass index > 35.

#### 2. Patient preparation:

- Examination & diagnosis.
- Investigations (Haemogram, Bl. Sugar, HIV, HBsAg, Urine, Stool, X-ray Chest, ECG; USG, Liver & Kidney function-if indicated).
- Medical fitness (Physician/ Cardiologist/ Diabetologist/ Anaesthesiologist).



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- -·Overnight fasting.
- Bowel preparation (Laxatives, enemas)
- Advise regarding pre-op. Medications (Inj. Tetanus Toxid, Anti Hypertensive, to stop Aspirin at least 2 days before surgery).
- The use of alparazolam or any anxiolytic / mild sedative, on the previous night, helps in reducing the anxiety of the patient.

#### 3. Anesthesia used:

- a. Local anesthesia:
- -.2% Lignocaine HCI, with or without adrenaline.
- 0.5% Bupivacaine.
- Mixed in equal quantity.
- Injected through a 26G or 27G no. Needle.
- On table sensitivity test is done in all cases.
- **b.** Blocks regularly used:
- -·Pudendal.
- -∙Ring.
- Field.
- -·Inguinal.
- Scrotal / Cord.
- ·Costal.
- **c.** General anaesthesia (Short G.A.): Halothane and Nitrous Oxide, Full doses of Ketamine, propofal, pentothal, scoline.
- **d.** Short acting drugs and I.V. sedation: Midazolam, Small Doses of Ketamine.

#### 4. Criteria for discharge:

- The patient is fully conscious.
- Haemodynamically stable.
- No giddiness on standing.
- Able to walk without support.
- Tolerating orally without vomiting.
- No or minimal pain.
- Passed urine.

- Responsible person is present to take the patient home.
- No surgical complications.

#### 5. On discharge:

- Written instructions.
- Verbal instructions.
- Contact no.s of all our team, including the operating surgeons, in case of any questions and complications.
- Instruction on how to look for complications and its management: Train the patient, relatives, staff and Family physician.

#### 6. Contraindication for Day Care Surgery:

- Medically unfit for discharge on the same day.
- Mental retardation / psychologically unstable.
- Highly infectious disease.
- Upper respiratory tract infection.
- Premature or less than 6 month old babies.
- Requiring extensive post-op. monitoring.
- Long distance from home.
- Shock / trauma.
- High fever.

Protocols are of prime importance in dispensing high quality care and governance in any set-up or organisation.

May be, we should adopt some such protocol while selecting our leaders.

Dr. T. Naresh Row

#### About the author:

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