

One Day Surgery Times

Volume 1 no. 7

Issue: Oct. 2013

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Board:

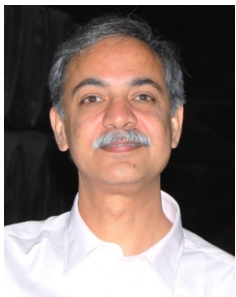
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A monthly publication of One Day Surgery India Private Limited Free for Distribution

www.one-daysurgeryindia.com

* **7th National Conference on Day Surgery, ADSCON 2014**, will be held in Chennai. On 19th & 20th April, 2014. Details soon on: www.daysurgeryindia.org

* **11th IAAS Congress** will be held in Barcelona, Spain, from 8th to 11h May, 2015.



From the Editors Desk:

36th ACRSI Conf.: Khajuraho:

This years National conference of the Association of Colon and Rectal Surgeons of India was held on 20th to 22nd Sept., in Khajuraho, M. P.

Apart from the fact that it was held in a city famous internationally for Kama Sutra, we were quite enchanted by the beauty of the temples. Its architectural work and technical advancement or rather, lack of it, was fascinating to imagine the labour and planing that went into the construction of the temples. Though, there were quite a few erotic sculptures panels along the various face of the walls, but, remarkable was the fact that these were blended and done so beautifully, that it did not stand out as pornography, as it is painted to be.

Having said that, hats off to the organisers of the conference, especially, Dr. D. U. Pathak, Dr. Mukesh Shrivastav, and Jabalpur Surgical society, for a great job indeed. It also give me pleasure in saying that, these two, who are member of our Day Surgery Association also, deemed fit to include a Guest lecture on 'Anal Surgeries as Day Care', in the Scientific session. This lecture was delivered by me.

This meeting was attended by prominent members of our Association. Namely, Dr. Ashok Ladha, Dr. C. P. Kothari, Dr. M. G. Nariani, Dr. M. M. Begani, Dr. Shekhar Suradkar, Dr. Kishore Adyanthaya, Dr. Nirangan Agarwal, Dr. Abhay Dalvi and Dr. Rajiv Ranjan Das, from UK.

There was a rich mix of leisure and scientific discussion, making it pleasurable to attend.

Khajuraho, to my mind, is the only small town that I know off, which boasts of 6 five star hotels in the city, because of the Temples.

Mind you, these temples dedicated to Shiva, Vishnu and Bramha in different forms, are now no longer worshiped due to the damages caused, it is said that earlier, there were regular prayers and congregations. All in all, these are still magnificent structures.

I bring you details of the Conference, pictographically.



'Anal Surgeries as Day Care' touched on the case selection, preparations and other Protocols for Day Surgery. A video of how to administer Pudendal block was also included in the presentation.



Dr. Begani's presentation was moderated by Dr. Kishore Adyanthaya, Dr. M. G. Nariani and myself.



It would be unjustified if I do not write on the historic significance of these temples. These temples were built from 950 AD to 1050 AD, that is it has taken 100 years to complete them. The construction was started by the Chandela dynasty.



Out of the 85 temples built, there are only 22 left. These were built in groups. Therefore, we have the Northern, Southern, Eastern groups of temple. These were rediscovered by the British and restored. The work is still going on.

Setting up a Day Surgery Center (DSC):

Very often, we come across doctors who would like to start their own DSC, but, do not have an idea as to how to go about it. Usually, they have several questions, like how big a center it should be, how many beds and how many Operation Theaters. What type of surgeries and what permissions do we need.

I would like to share with my enthusiastic friends, a few basic thumb rules, that will help in making up their mind if they should start one. Consider these essential points while looking for a place and talking to your architect or real estate agent. Apart from looking at a good location and its 'vastu', we have to keep in mind the mindless or mindful 'do's & don't' for any center.

To begin with, any new medical center will only correct the deficit that we have in our country, so do not worry about your center doing well or not. In the long run, it will do well.

From my experience, I can say, when I started One Day Surgery Center at Babulnath Hospital, I was not very sure if it will work. I did not have such a big practice so as to fill up the place on my own. Plus a high rent and overheads. I was cautioned, that, I should think of this project only if I have money to spare, (which, of course, I did not have), because, it could go down the drain. Anyway, I took the plunge, experimented with my idea of a DSC, and eventually, came up with country's first stand alone/free standing, Multi speciality, DSC. We have grown from strength to strength and today, as a private set up, we are most reasonably priced surgical center in south Mumbai.

With this back ground, the first thing that comes to my mind is to tell you that, a DSC should be ideally run by a Surgeon or an anaesthetist. More so, it should be set up with your practice in mind and not what others will utilize, that comes later.

As a thumb rule, if you want to set a Multi speciality center, a 10 bedded center with 1 OT would be ideal. Having said that, if you are thinking of your own speciality, then as a single surgical speciality, even 2 beds will do. But, remember, you will still have to register the center with the local municipal health department, who may want 10 beds in tier 2 cities and 15 beds in metros. Though we have convinced them to accept lesser number of beds, still, you never know. Also, when choosing a site for your center, keep in mind that, it is like a Nursing home, therefore, all

the rules and permission will be applicable to you. Having an OT is enough to put you in a Nursing home category. Therefore, you will also face certain pitfalls. For example, the most common difficulties are in the building you choose. If it is a commercial building, then the problem is less. If it is a residential building, then it should be situated on the ground floor, or maximum, on the first floor. Separate stair case, separate drainage, separate fire escape, are some of the hurdles that you will face. Fire norms are applicable to all, without this permission, no registration will be given. Some of the fire safety norms are: fire extinguishers, each, of 10 kgs per 100 sq mts., fire alarm, smoke detectors, no gas cylinder on the same floor as the hospital, it can be in the basement or another floor, etc. Therefore, a well thought of plan usually works well.

For a DSC, the OT is the most important place. In this case, size matters, therefore, an OT of 100 to 200 sq ft is ideal for all purpose, including protective zone and scrub area inside the double door structure. Depending on the speciality you want to establish. A Multi speciality will need, for example, Lap equipment, therefore, space to move around. OT should not be like a zig-saw puzzle, where, you have to move several pieces to get to one piece. A well lit OT utilising natural light is advisable. Windows can be made sound proof and air tight. Monitoring equipment is a basic minimum standard for every theater. Even a defibrillator should be considered, you may not use it ever, but, is mandatory, so is a battery back-up, in the form of inverter or gen-set. Other equipment necessary is a good electro-cautery, usually, a solid state type, which is not every expensive. Good over head lights, a Hydraulic table with multi attachments and standard Boyle's apparatus with a ventilator. Apart from these, resuscitation equipment like suction machine and emergency drug tray, etc is mandatory.


For a DSC, what really is optional is the Laminar air flow, Heppa filters, Epoxy floors or seam-less walls. But, if your speciality is Orthopaedics, Ophthalmology or even Plastic surgery, these can be considered.

Goes without saying, is that an air-conditioned surrounding, which can be easily cleaned and sterilized by the basic fumigation methods, are essential for a good OT. Again, these are basic information, details of every unit has to be tackled individually. I hope this is of some use to some of us.

- Dr. T. Naresh Row



Surgery & discharge on same day for:
Hernia, Piles, Fistula, Fissure, Diabetic foot,
Pilonidal sinus, Ingrown toe nail,
Lipoma, Sebaceous cyst, Abscess,
Circumcision, Vasectomy, D & C, Tubal
Ligation, Diagnostic Lap; etc. (In selected cases)
Extended stay: Appendix, Gall stones, Hystrectomy, etc.



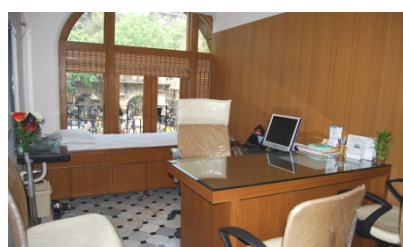
Other Surgeries related to: Paediatric, Urology, Plastic, ENT, Vascular. Chemotherapy & related treatment. (Please take prior appointment).

One Day Surgery Center

BABULNATH HOSPITAL

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Patient's convenience and safety is our prime concern.

Printed by: Dr. T. Naresh Row, **Published by:** Dr. T. Naresh Row, **Owned by:** Dr. T. Naresh Row, **Printed at:** Gemini Printing Press, 33/A, Kanbai wadi, Khadiikar Road, C.P. Tank, 1st fl., Opp. Pooja Cards, Mumbai-400 004. **Published at** One Day Surgery Center, 15, Sadguru sadan, Babulnath Road, Mumbai-400 007. **Editor:** Dr. T. Naresh Row