

Child India

March
2020



Monthly e-Newsletter of Indian Academy of Pediatrics



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PRESIDENT'S PAGE - Dr Bakul Parekh with Dr Thakre R - Quality Care: Need of the Hour - <https://www.indianpediatrics.net/mar2020/197.pdf> - where he exhorts all pediatricians to join hands and apply the science of improvement to our clinical care and have zero tolerance to risks, errors and harm.

Editor's Note

Dear Colleagues,

Greetings!!

Our President Dr Bakul Parekh has shifted gear and is actively working towards energizing IAPians to involve in the management of the COVID 19 pandemic in India and this issue will explain IAP Guidelines on various related issue.



March 14th was World Kidney Day (Theme - Kidney Health for Everyone Everywhere) calls for universal health coverage for prevention and early treatment of kidney diseases; World Down Syndrome Day (WDSD) was observed on 21 March Down Syndrome International focuses on the theme "We Decide": all people with Down syndrome should have full participation in decision making about matters relating to, or affecting, their lives; March 24th is World TB Day (Theme - Its time) to put the accent on the urgency to act on the commitments made by global leaders towards ending TB.

And please prepare for World Autism Awareness Day, observed on April 2nd, that aims to put a spotlight on the hurdles that people with autism – and others living with children and adolescents with autism – face every day; and World Health Day on April 7th (Theme - Support nurses and midwives) to celebrate the work of nurses and midwives and remind world leaders of the critical role they play in keeping the world healthy. Nurses and other health workers are at the forefront of COVID-19 response - providing high quality, respectful treatment and care, leading community dialogue to address fears and questions and, in some instances, collecting data for clinical studies. Quite simply, without nurses, there would be no response. Please send photos with captions of programs to childindiannewsletter@gmail.com.

Stay Safe.

Regards,

Jai IAP,

Dr Jeesson C Unni
Editor-in-Chief

President's Message

"Technology-driven Change is the New Reality"

A new year brings about new memories, new sciences and also let us not forget, new technologies! The world has seen a tremendous technology-driven change in the last couple of decades. Many things that were expensive and affordable only to the wealthiest people are now within reach of the common man.

The Internet, the World Wide Web, mobile phones and mobile smart phones have reduced the cost of communication to zero. Ready access to knowledge is no longer the privilege of the few. These technologies have also created an explosion of innovative services. These services include social media, search engines, online marketplaces, online stores, mobile payment, app taxis, online health services, and many more.

The next wave of change is even faster and more significant in impact. The wave is born of the convergence of the above technologies with the Internet of things, Artificial intelligence, Genetic engineering and Biotechnology.

We have all experienced the change, and in media, we often hear and read of the impending acceleration of change. But what does it mean for clinical pediatrics? What does it mean for the pediatrician? Is this a great opportunity that we must grab or does it threaten to disrupt our purpose, our profession and our practice?

And what does it mean for our Academy? How can we better serve our members and society at large by riding this wave of change?

Technology enables us to diagnose faster and more accurately. Diagnostic algorithms, diagnostic support and advanced diagnostic technology are available at the point of care. We can treat better. Standard therapeutic guidelines, Prescription guidelines, Algorithms and Specialist advice are integrated into Point of Care systems.

The increased capabilities at the point of care lead to an increase in the number of services offered by the pediatric clinic. We are thus reducing the need for referring patients elsewhere for specialized diagnostics or treatment. Pediatricians will have robust patient education and telemedicine tools. So we can expect better-informed patients and improved health outcomes.

The democratization of mobile phone technology has improved the phone density in India and brought it to the same level as in developed countries. In the same way, the democratization of technology for clinical practitioners gives our pediatricians access to the same capabilities that their developed-world counterparts have.

Our Academy is very well positioned to play a leadership role to accelerate the availability of technology and its benefits for our member pediatricians.



President's Message

- We must integrate the output of our Academy's committees, chapters and experts into digital systems. The output must become instantly available to all our members. The creators must have total and direct control over creation, publishing, updating and distribution. All types of one-way or interactive content must be supported – guidelines, papers, courses, lectures, interviews, demonstrations or clinics.
- We must establish physical video conferencing and webinar infrastructure across the nation. This infrastructure will create a vibrant Academy with the in-house capability to have thousands of academic activities, round the year, accessible to all members.
- We must leverage the Academy's reputation and large membership numbers to gain access to the latest and best technologies from anywhere in the world to serve our member-pediatricians.
- We must create technology infrastructure for inexpensive assimilation and rapid availability of cutting-edge services and technologies and make it available to all our members at the point-of-care.

We conceived and launched the dIAP program for IAP with precisely these objectives. dIAP is not only a window to IAP's services, but it is also the institutional, digital and financial architecture that will enable IAP to deliver on this promise – it is an integrated window to all existing IAP online services.

It gives me great pleasure to say that the Plan has already been activated. Some of these services are already available immediately to our members within the dIAP application. The dIAP application will be ready soon and I am sure that all of you will appreciate the hard work and the number of sleepless nights that have been spent by the entire team who have burnt the midnight oil just to turn our vision into a reality. I look forward to your support so that the rest of the dIAP Plan is implemented and made available to our members in the coming months.

Last, but not the least, I take this opportunity to welcome and congratulate all the elected Office Bearers, Executive Board members and most importantly, one of the past editor-in-chief of Indian Pediatrics and a great academician – Dr. Piyush Gupta, who has been elected as the President Elect. I feel truly honored and blessed to be working with such a dynamic team which is focused on taking IAP ahead. On seeing the wonderful team that has been elected by all of you, I can certainly say that IAP is going to achieve much greater heights in the coming year !

Jai Hind!

Jai IAP!

In the service of IAP,

Dr. Bakul Jayant Parekh

President

Secretary's Message

Dear Colleagues,

Greetings from your Secretary General!

I would like to start by thanking each of the members of our esteemed association for contributing to the present situation of the country. We are all aware that now we are on the verge of entering the 'community spread' stage of the COVID-19 pandemic and swift actions must be taken. The present situation is likely to last for at least eight more weeks before it would be a normal curve.

As the number of critically ill rises, we expect the health systems across the country, to be stretched beyond capacities. Effective solutions will be required to address the shortage of protective materials like three layered / N95 masks, gloves, gowns, PPE, alcohol hand rub etc. Remember, we as Doctors, will be on the front line of fighting this pandemic & hence we are that much more likely to contract this epidemiological nightmare, unless necessary precautions are taken. We would like to assure to you that this has been informed to the Government and a letter has been drafted to the Hon'ble Prime Minister, Sri Narendra Modi Ji.

I would also like to thank our honourable visionary President Dr Bakul Jayant Parekh, for initiating dIAP and taking maximum care to have the modules spread out equitably across all the zones with special attention "to reach the unreached". This program has reached to a number of more than 2300 and would like to congratulate each one you for your interest shown towards the same.

We are fortunate to have a vibrant team of members, whose passion for work & service, hasn't subsided, even if the situation is not the most inspiring. Despite of the present pandemic wreaking havoc all over, the enthusiasm shown towards other important days like World TB day is extremely appreciable. I hope the same will continue for other programs as well.

A special mention to our Editor- in- Chief, Dr Jeelson C Unni for doing a wonderful job to bring out the best in organisational activities through our e- Bulletin.

I would like to conclude by saying that we Doctors are the strongest professionals in the world and have faced extreme challenges and succeeded many times before too. Yet again, let's work together and take measures now to flatten the curve.

IAPians, be safe and keep everybody safe around you.

Jai IAP!

Jai Hind!

Sincere Regards,

Dr G V Basavaraja

Honorary Secretary General-2020-21



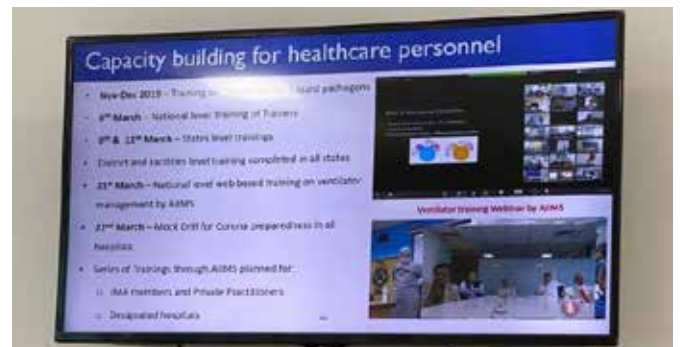
COVID has locked down everything

But could not stop IAP Academics and activities..

Thanks to the spirit of the team dIAP

Presidential Engagements

Webinar with PM Sri Narendra Modi



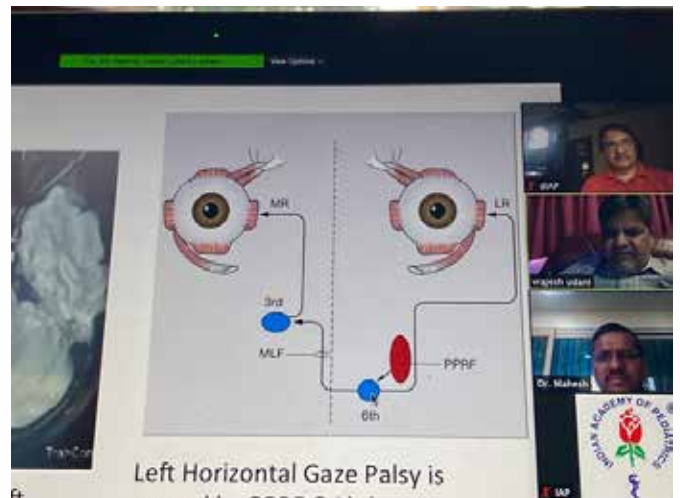
Key points discussed at the meeting

- Shortage of PPE across India
- Problem faced by nurses and other health workers - many are being discriminated and asked to vacated rented houses
- Demand for term insurance for health worker
- Legalise teleconsultations
- Demand for subsidies for salaries/ small hospitals
- Request tax rebates and relaxation in dates
- Request for authentic information from one website/ source
- Transportation for nurses and other health workers during curfew
- Specified COVID clinics, designated COVID hospitals rather than designated beds in different hospitals
- Strict action on curfew violators
- More work on public education
- Everyone pledged support and solidarity.

All associations gave information on their respective initiatives regarding COVID to honorable PM

Presidential Engagements

Webinar conducted on dIAP



Neuro-anatomic localization in Children - A Glimpse

Vrajesh Udani MD
Child Neurology & Epilepsy
Mumbai

Presidential Engagements

VACCICON at Kolkata on 7th and 8th of March



The organisers of VACCICON at Kolkata
on 7th and 8th of March

25 delegates from SAPA countries at VACCICON



ACVIP COMMITTEE meeting on 7th March
at Kolkata

Presidential Engagements

1st March - TOT on Pain and Palliative care at Wadia Children's Hospital... nearly 50 persons attended from all over the country



Launching dIAP Interactive Lecture Series - ACADEMIC PEARLS IN LOCKDOWN Starting, Monday - 30th March, 4pm to 5pm

Dear IAP Members,

We are excited and honoured to have esteemed IAP faculty sharing their views on very relevant topics over coming weeks. The interactive lecture series will be kicked off by Dr GV Basavaraj starting Monday, 30th March followed by many other experts.

Approach to Unconscious Child: Dr GV Basavaraj - Monday, 30th March
Personal Protective Equipment (PPE): Dr. Dhiren Gupta - Tuesday, 31st March
Localising Neurological Lesion: Dr V. Udani - Wednesday, 1st April

Neonatal Skin Care: Dr Sandip Kadam - Thursday, 2nd April
Approach to Short Stature: Vaman Khadilkar - Friday, 3rd
Early Markers of Developmental Delay: Dr Leena Deshpande - Saturday, 4th

Deranged LFT beyond Viral Hepatitis: Dr S. K. Yacha - Sunday, 5th
Recognition and Approach to Malabsorption: Dr Vishnu Biradar - Monday, 6th
Recurrent UTI: Dr Pankaj Deshpande - Tuesday, 7th

Critical Rashes in Paediatrics: Dr Atul Kulkarni - Wednesday, 8th
Shock Monitoring: Dr S. Udani - Thursday, 9th
Poisoning...Recognition and Management at Level I and II: Dr Mahesh Mohite - Friday, 10th

Medico-legally Safe OPD: Dr Satish Tiwari - Saturday, 11th
Autism: Early Recognition and Intervention: Dr Samir Dalwai - Sunday, 12th
Application of Haematological Indices: Dr Nitin Shah - Monday, 13th
Thrombocytopenia When and How to React: Dr Janani Shankar - Tuesday, 14th

This webcast is brought to you under dIAP, an initiative of IAP to facilitate e-learning in all spheres of pediatrics. Live webcast of the KOL lectures, webinar discussions, on-line clinics and their subsequent archiving is one of activities under this banner.

Kindly bookmark or save the link below to view and participate in the discussion.

DATE AND TIME: Starting 30th March, 4 to 5pm

CLICK HERE TO PARTICIPATE: ZOOM - <https://zoom.us/j/940891771>

YouTube LIVE - <https://bit.ly/33Rw8wb>

With warm regards,

Dr Bakul Jayant Parekh
National President, IAP 2020

Dr GV Basavaraj
Hon. Secretary General IAP, 2020 & 2021

Telemedicine Solution for IAP Members

Dear IAP members,

As you are aware, the Government of India has come up with new telemedicine guidelines and our doctors must have an immediate, easy to use, secure solution for tele-consultations, prescriptions and payments.

IAP has looked at different telemedicine offerings in the last few days and we feel it is best to use simple, well-known solutions which work for everyone - you and your patients. I am happy to share that WhatsApp Business for consultation with Paytm for Business managing your payments, is a very simple and practical solution. Please click the link below and refer to the document, GET STARTED IN 6 EASY STEPS.PDF

Part 1: Consultation

Given the privacy and security needs, and also to ensure that there is no learning curve for doctors and patients, IAP recommends “WhatsApp” as a good reliable solution. And to ensure that the system is used only for patients, we recommend “WhatsApp Business”. The end to end encryption of WhatsApp ensures that the patient data is not available with any private company offering any technology solution and is totally secure for doctor and patient.

You may add all your patients into your WhatsApp Business account and use it for consultation and prescription as per the instructions given in ANNEXURE 1 (click the link below to access). You can also watch this simple video to set up WhatsApp Business, <https://bit.ly/33PN1r8>

The good part about the WhatsApp Business solution is that it works with all third-party appointments, EMR and manual systems. Nobody is left out. It is fully compatible with every system available and all your patients already know how to use it. It also allows you to maintain complete, separate and auditable backups.

NB. You cannot use the same phone number to operate both regular WhatsApp Messenger and WhatsApp Business accounts. So if you don't have an alternate number, you may have to use your existing WhatsApp account for patient communication.

Part 2: Payments

IAP has identified a simple payment system that allows you to request payment and for your patients to quickly and easily pay you, using any digital payment means - UPI, net-banking, cards or mobile wallet. This could be easily enabled through Paytm. Paytm is by far the most accepted and widespread digital wallet with over 400million subscribers in India.

We reached out to Paytm and they have created a good solution for IAP members.

You should activate Paytm for Business on your phone which will allow you to generate a 'payment link' and share it with your patient. You get an instant notification once the payment is done and the money is settled into your bank account within 2 working days.

Also, once your clinic resumes operation, Paytm will deliver a Point of Sale (PoS) system. The POS system will be the latest with the best features amongst all others in the market and will be the least expensive as well.

Please go through the instructions given in ANNEXURE 2 (click the link below and access) to setup your Paytm for Business Account.

I trust you'll find the details useful and take this opportunity to quickly resume the practice with the patients.

For more details kindly download the following link:

http://www.mediafire.com/file/hl9oukclip949y05/IAP_%25282%2529.zip/file

With kind regards,

Yours sincerely,

Dr Bakul Jayant Parekh

National President, IAP 2020

Dr GV Basavaraj

Hon. Secretary General IAP, 2020 & 2021

Indian Academy of Pediatrics - Relief fund for COVID19 Pandemic

Dear Colleagues,

In the past few days, the COVID 19 disease has spread throughout the world. There are many victims of the disease in various developed countries and have enormous damage in terms of loss of lives and the economy despite the forewarning and all preparedness from the Govt machinery.

The World Health Organization has declared the disease a global disaster. This disease has adversely affected the Indian government as well as all state governments in terms of economy and productivity. Unfortunately, there are some victims of the disease who has lost their lives due to COVID 19.

IAP once again expresses its solidarity with the victims of the unanticipated fury of nature at our country. We as a professional body committed to the welfare of the nation at large would like to extend all possible support to the Government and other agencies working relentlessly to curtail the damages and to rehabilitate the affected families. We would like to contribute our might to the affected people of our country through the Relief Fund.

Central IAP requests its esteemed members to be involved in this noble venture by donating a minimum of Rs 1000/- or as much as possible till 15th April 2020.

Your contributions can be sent to CIAP account with an accompanying mail noting the reference number of the transaction. This will be consolidated with the contribution from CIAP and will be sent to the Government of India.

CIAP Account Details:

INDIAN ACADEMY OF PEDIATRICS

ACCOUNT NO: 42080200000253

BANK NAME: BANK OF BARODA

ADDRESS: JUINAGAR , NAVI MUMBAI

RTGS/NEFT IFSC CODE: BARB0JUINAG (5TH CHARACTER IS ZERO)

We appreciate the great work done by our esteemed members and all the Branches of IAP in providing relief to the victims of this global calamity.

Sincere Regards,

Dr Bakul Jayant Parekh

National President, IAP 2020

Dr GV Basavaraj

Hon. Secretary General IAP, 2020 & 2021

Instructions for Patients for teleconsultation during COVID Stay at home advisory

- 1. Ask patient's parent to Save your WhatsApp number in their address book**
- 2. Ask them to call the given number or text on WhatsApp to fix an appointment**
- 3. Share a QR code for payment. You need to scan the QR code and use UPI or Paytm wallet to pay the consultation fee.**
- 4. Start a WhatsApp video call at the appointment time**
- 5. Once the consultation is over, write the prescription and share the picture with the parent on WhatsApp**

Central IAP COVID Bulletin 21st March 2019

IAP appeals to all members to abide by the advisories issued by the Ministry of Health and Family Welfare. This bulletin is brought by Central IAP to keep the members updated on what is to be followed by the members in this outbreak. This bulletin will be updated regularly.

Covid 19 virus transmission.

Mainly by droplets, can travel upto a distance of 1-2 metres (upto 6 feet).

Clinical features:

Fever, Dry cough, fatigue, vomiting, diarrhea, headache, sore throat, coryza, conjunctivitis.

Can be classified as

1. Mild to Moderate (no pneumonia or pneumonia without distress),
2. Severe (dyspnea, respiratory frequency ≥ 30 /minute, blood oxygen saturation $\leq 93\%$, PaO₂/FiO₂ ratio < 300 , and/or lung infiltrates $> 50\%$ of the lung field within 24-48 hours)
3. Critical (respiratory failure, septic shock, and/or multiple organ dysfunction/failure)

As per data from China:

In general population, mild 80%, severe 15% and critical 5%

In children, Mild to moderate in majority cases; severe about 2.5% and critical about 0.2%

Covid Case definition

A patient with acute respiratory illness (fever and at least one sign/ symptom of respiratory disease (e.g., cough, shortness of breath) AND a history of travel to of residence in a country/area or territory reporting local transmission (See NCDC website for updated list) of COVID-19 disease during the 14 days prior to symptom onset;

OR

A patient / Health care worker with any acute respiratory illness AND having been in contact with a confirmed COVID-19 case in the last 14 days prior to onset of symptoms;

OR

A patient with severe acute respiratory infection (fever and at least one sign/symptom of respiratory disease (e.g., cough, shortness breath) AND requiring hospitalization AND with no other etiology that fully explains the clinical presentation;

OR

A case for whom testing for COVID-19 is inconclusive

Laboratory Confirmed case: A person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs and symptoms.

Mandatory notification by practioners

Self declaration forms regarding travel history should be made available.

If any patient is found to be a Covid Suspect as the Case definition below, the patient should be isolated in the hospital and tested for Covid at the designated centre.

Information of all such cases should be given to the State helpline and also to National helpline. Email can also be sent at ncov2019@gov.in

National Helpline numbers :

+91-11-23978046, Toll free 1075

Helpline Email id: ncov2019@gov.in

The following is the State wise list:

Current testing strategy (as per ICMR Version 3, dated 20/3/2020):

- . i. All asymptomatic individuals who have undertaken international travel in the last 14 days:
 - They should stay in home quarantine for 14 days.
 - They should be tested only if they become symptomatic (fever, cough, difficulty in breathing)
 - All family members living with a confirmed case should be home quarantined

All symptomatic contacts of laboratory confirmed cases.

All symptomatic health care workers.

All hospitalized patients with Severe Acute Respiratory Illness (fever AND cough and/or shortness of breath).

Asymptomatic direct and high-risk contacts of a confirmed case should be tested once between day 5 and day 14 of coming in his/her contact.

- . - Direct and high-risk contact include those who live in the same household with a confirmed case and healthcare workers who examined a confirmed case without adequate protection as per WHO recommendations.

IAP recommendations for Outpatient practices:

Scheduling of Daily OPD Appointments:

Schedule appointments for OPD patient requesting not to come for routine visits or routine immunization for next couple of weeks and to come to OPD only if essential to be seen.

Instruct those with respiratory symptoms to visit the OPD wearing mask.

Separate time slots can be provided for those with fever and respiratory symptoms at the time of appointment.

Encourage patients to come on time at the allotted appointment time.

For those practitioners who do not have an appointment system:

S.No.	State	Helpline numbers
1	Andhra Pradesh	0866-2410978
2	Arunachal Pradesh	9536055743
3	Assam	6913347770
4	Bihar	104
5	Chhattisgarh	077122-35091
6	Goa	104
7	Gujarat	104
8	Haryana	8558893911
9	Himachal Pradesh	104
10	Jharkhand	104
11	Karnataka	104
12	Kerala	0471-2552056
13	Madhya Pradesh	0755-2527177
14	Maharashtra	020-26127394
15	Manipur	3852411668
16	Meghalaya	108
17	Mizoram	102
18	Nagaland	7005539653
19	Odisha	9439994859
20	Punjab	104
21	Rajasthan	0141-2225624
22	Sikkim	104
23	Tamil Nadu	044-29510500
24	Telangana	104
25	Tripura	0381-2315879
26	Uttar Pradesh	18001805145
27	Uttarakhand	104
28	West Bengal	3323412600

S. No	Name of Union Territory (UT)	Helpline numbers
1	Andaman & Nicobar Islands	03192-232102
2	Chandigarh	9779558282
3	D & N Haveli	104
	Daman & Diu	104
4	Delhi	011-22307145
5	Jammu	1912520982
	Kashmir	0194-2440383
6	Ladakh	01982-256462
7	Lakshdweep	04896-263742
8	Puducherry	104

Keep a notice outside the clinic in local language to kindly return if they have come for regular vaccine or routine visit.

In the waiting Room

Instruct to inform receptionist immediately of travel history (both domestic and international), prioritise seeing this patient. Self declaration forms to be kept.

Receptionist should wear a mask.

Encourage use of hand sanitizer before entering the examination area.

Display posters of cough etiquette and hand hygiene.

Ensure cleaning of high touch surfaces like door knobs, receptionist table, seating chairs, toilet seats frequently (atleast every 2 hourly). Infant weighing scales needs to be wiped cleaned between each infant weight. If facility is available, lay disposable sheet between infants.

Floor should be cleaned atleast 3 times in a day. The heads of the mop should be cleaned in the beginning and in the end and dried in sunlight.

In the examination room

The doctor should wear a surgical mask.

It is preferable to wear a buttoned apron above clothes. The arms should be bare below the elbows.

Do not wear ties, blazers, rings, bangles, etc. Keep nails trimmed. This will apply to all health care providers.

Clean the diaphragm of stethoscope with cotton and hand sanitiser and perform hand hygiene between every patient.

If facilities are available, use disposable tissue sheets between patients. If using uncovered examination table, it is better to wipe clean the surface between patients with respiratory symptoms and when visibly soiled.

Biowaste generated should be managed by local waste management protocols.

Cleaning agents in health care setting

Dry sweeping or vacuum cleaners is not recommended.

Detergent solution gives effective cleaning. Mechanical cleaning is most important step. This can be followed with disinfectant use. If there is shortage of hospital disinfectants, decontamination may be performed with 0.1% sodium hypochlorite (dilution 1:50 if household bleach at an initial concentration of 5%). Surfaces that may be damaged by sodium hypochlorite may be cleaned with a

neutral detergent followed by 70% concentration of ethanol.

Preferably avoid use of nebulisation to prevent aerosol generation. Child can be given metered dose bronchodilator inhalers with spacer and mask.

General

All health care workers to perform thorough hand hygiene before leaving health facility and on reaching home take a bath. Also clean mobile surfaces with hand sanitizer. Avoid carrying non essential items to and fro health care centres.

Encourage dissemination of correct information in the society. Encourage healthy indoor activities for children like playing indoor games like chess, carom etc, doing art work, reading books. Discourage increased screen time for children.

Recommendations on wearing Masks

All health care workers and those having symptoms need to wear surgical mask.

N95 mask is recommended when dealing with Covid affected patient or during any aerosol generating procedure like intubation, resuscitation, etc.

No mask is recommended for non-health care associated personnel who is asymptomatic.

Masks should fit properly without leaving gap between face and mask, It should not be touched on the front part. It should be removed after 6- 8 hours or when it becomes damp. It should be disposed by removing from backside into the yellow dustbin and should not be reused or stored in pocket, drawer, etc.

Important news:

- Honorable PM Modi has announced self imposed home quarantine ,”Janta Curfew” on 22nd March from 7am to 9 pm barring emergency reasons.
- To avoid routine visits to hospitals/elective surgeries
- Has called on the country to express its gratitude to those working to keep the country going, such as doctors, nurses, paramedics, municipal staff and airport workers by going out on their balconies or standing at their doors and windows at 5 pm on March 22 and clapping, banging on their plates or ringing bells.

New steps taken through dIAP

Many new steps taken in the month of March through dIAP ...

1. Webinars on COVID 19, Vaccinology, Management of ARDS and COVID in ICU,
2. PEARLS in Pediatrics... talks on various topics by experts everyday from 4 to 5 pm with viewership of nearly 2500 everyday... which never happens during various physical conferences
3. Came out with IAP COVID BULLETIN
4. Guidelines for immunisation during COVID pandemic
5. DailyTalks from 4 to 5 pm are lined up for next full month and will continue as a regular activity for the full year

Permanent link is

YouTube Live - <https://bit.ly/33Rw8wb>

Planned Basic Ventilation webinar with Dr. Parmanand on Sunday 5th April 11 am to 1 pm. three 20 min talks f/b case base panel...

Talks...

1. Basic essential physiology... Dr. Uma Ali
2. Nomenclature and modes ... Dr. Farhan Sheikh
3. Monitoring patient on ventilator.... Dr. Jayashri M...

Panel discussion... case base of ventilated patients...

Moderator: Dr. Parmanand, Dr. Mahesh Mohite

Panelists experts: Dr. Uma Ali, Dr. Jayashri M, Dr. Farhan Sheikh,

Dr. Maninder Dhaniwal

IAP Bihar



01-Mar-20

01-Mar-20



08-Mar-20



IAP Kerala



Womens Day programme IAP Wayand



Womens Day medical camp by IAP Kannur



Womens Day night marathon by IAP Kozhikode



Womens Day medical camp by IAP Kannur



Adolescent parenting class to mothers
- IAP Trivandrum



Womens day programme IAP Kottayam

IAP Navi Mumbai

SOCIAL ACTIVITIES : MARCH 2020

1) FOOTPATH DISPENSARY :



2) Health talk and Parenting camp on Child Care in Airoli:

3)



IAP Navi Mumbai

MARCH 2020:

1) FOOTPATH DISPENSARY:

Navi Mumbai IAP celebrated our beloved National President, Dr. Bakul Parekh's birthday by spreading smiles and good health in the underprivileged children. The children in turn made the occasion special by singing the birthday song for him.

Team NMAP geared up Sunday morning to continue its Social Responsibility, the 2nd Street Children's Clinic at Koperkhairne- Ghansoli Underbridge.



IAP Navi Mumbai



IAP Navi Mumbai

2) Health Camp And Parenting Talk:

Health camp & Parenting talk on child care for community was attended by Dr Jeetendra Gavhane, Dr Santosh Kangule and Dr Mahendra Topale
It was Organised by LokmatSakhi Manch ,Airoli



IAP Navi Mumbai

3) Lecture on awareness of COVID 19 infection on Women's day in school for parents :

A Lecture for parents of students of NMMC School on awareness of corona virus infection was taken by Navi Mumbai IAP member, Dr. Pallavi Khare which was covered by the local newspaper.

4) Interactive Session on Update of COVID 19 and role of society in controlling spread of infection taken for cooperative society :

A Session on 'Update of COVID 19' for the society members of Sanpada was taken by Navi Mumbai IAP Members, Dr. Mangai Sinha and Dr. Madhavi Ingale; explaining to them all the precautions to be taken in order to curb this epidemic..at the end, they sat with the committee members and drafted a set of rules to fight the virus at the society level.

The feedback from the society was that if other societies also have similar session, it will lead to more awareness and less panic



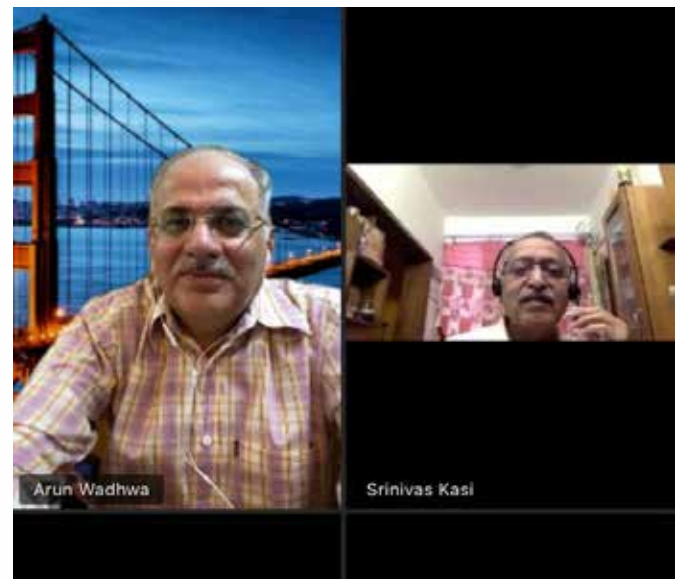
3) Lecture on awareness of COVID 19 infection on Women's day in school for parents; covered by local newspaper :

4) Lecture on Update of COVID 19 and role of society in controlling spread of infection taken for cooperative society :






Dr Prasanna Kumar Sahoo president of Orissa state contributed Rs51,000/- to Corona fighting fund



Immunization dialogue on 28/03/2020 moderated by Dr S G Kasi


 PRESENTS
**ACADEMIC PEARLS
IN LOCKDOWN...**

4pm Today

Neonatal Skin Care
DR SANDIP KADAM –Thursday, 2nd April

Approach To Short Stature
DR VAMAN KHADILKAR –Friday, 3rd April

Early Markers of Developmental Delay
DR LEENA DESHPANDE - Saturday, 4th April

Deranged LFT beyond Viral Hepatitis
DR SK YACHA –Sunday, 5th April

Recognition & Approach to Malabsorption
DR VISHNU BIRADAR –Monday, 6th April

This webcast is brought to you under dIAP, an initiative of IAP to facilitate e-learning in all spheres of pediatrics.

Join us at 4pm everyday for exciting talks on various topics, relayed live.

ZOOM - <https://zoom.us/j/940891771> (limited slots)
YouTube Live - <https://bit.ly/33Rw8wb>

With warm regards,
Dr Bakul Jayant Parekh
Dr GV Basavaraj

IAP

WEEKEND LOCKDOWN

(Don't Move Away from Laptop or Mobile)

Saturday, 4th April	Sunday, 5th April
11am - 1pm Teleconsulting Solutions For Pediatricians: A New Beginning Dr Maninder Dhaliwal in discussion with Dr Lokesh Tiwari, Dr Anand Vasudev, Dr Srinivas Gunda, Dr Indu Khosla & Dr Pawan Kalyan	11am - 1.30pm Understanding Basics of Ventilation in Pneumonia & ARDS Dr Parmanand Andankar & Dr Mahesh Mohite in discussion with Dr Madhu Ottiv, Dr Bala Ramakrishnan, Dr Farhan Sheikh & Dr Maninder Dhaliwal
4pm - 5pm Early Markers Of Developmental Delay Dr Leena Deshpande	2pm - 3.30pm Vitamin D Deficiency: Unanswered Questions And Recent Advances Hosted by IAP Nutrition Chapter
	4pm - 5pm Deranged LFT Beyond Viral Hepatitis Dr S K Yacha

Join us this weekend for live streaming of highly relevant content delivered by our esteemed faculty from across the country. I am indebted to all faculty for agreeing to take time out in these challenging times. In particular, I extend sincere thanks to Dr Piyush Gupta, IAP President Elect 2021 for his participation on the platform.

Hope all listeners and participants will make the most of this opportunity and join in large numbers.

Do not forget to subscribe to dIAP interactive channel:
YouTube Live: <https://bit.ly/33Rw8wb>

With warm regards,
Dr Bakul Jayant Parekh
Dr GV Basavaraj

Corona update by Dr Singaravelu



Autism Spectrum Disorder – Overview

P. Krishnakumar
Director, IMHANS, Kozhikode

