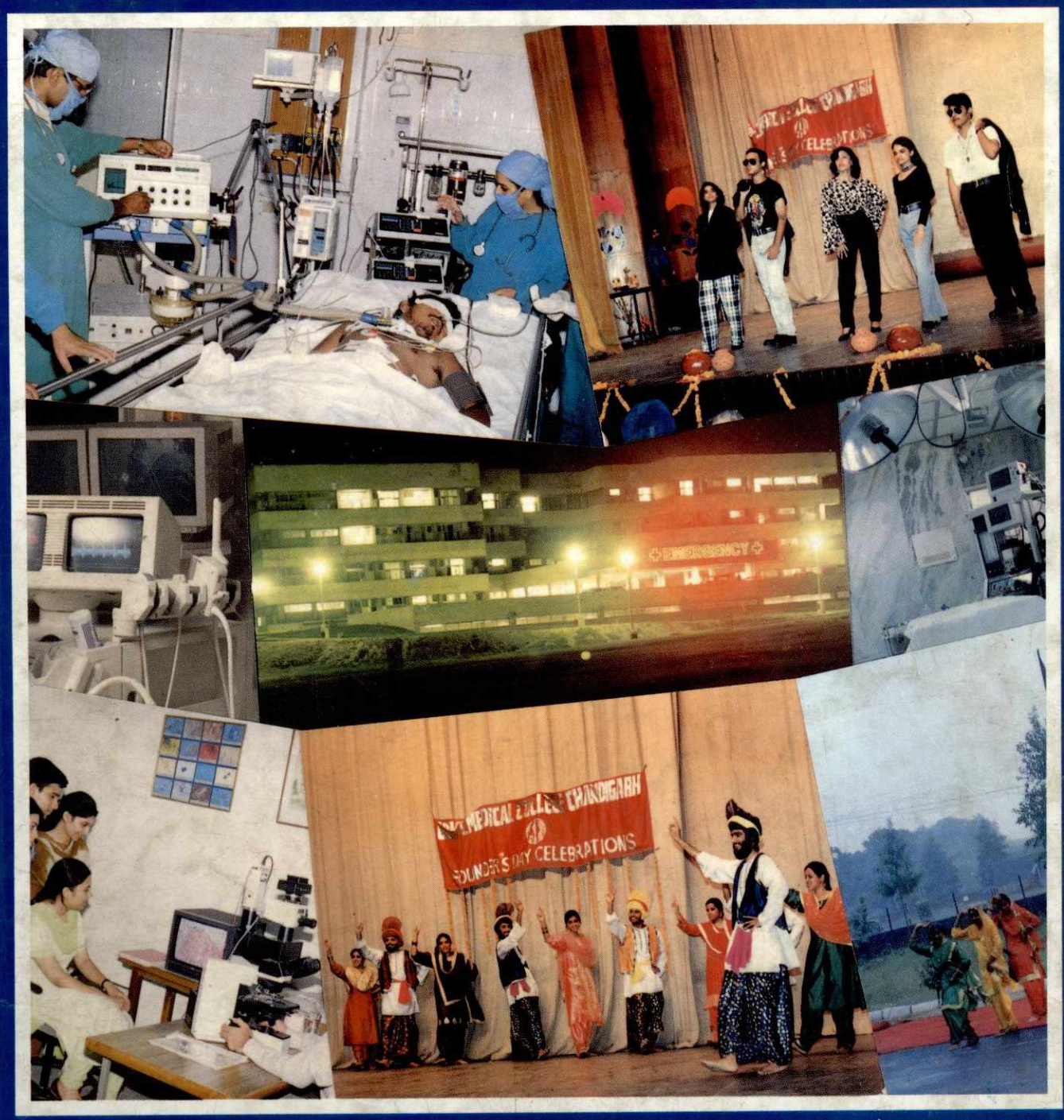
The Glimpse 1998



Government Medical College & Hospital
Chandigarh

Editorial Board 'The Glimpse' 1998

Sitting (Floor) : Saloni, Mili, Roosy, Sujata, Manish Thakur

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continued overleaf

Contents *(continued...)*

GOVERNOR

RAJ BHAVAN, PUNJAB,
CHANDIGARH-160 019.
September 2, 1998

I am pleased to know that Government Medical College, Chandigarh is releasing the first issue of its College Magazine on September 9, 1998.

I extend my best wishes on this occasion.

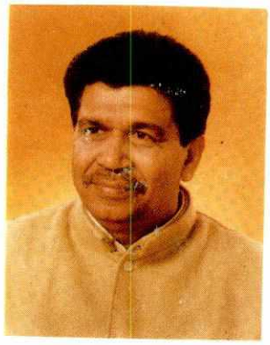
(B.K.N. Chhibber)
Lt. Gen. (Retd.)

Tel. : 714916 (O)
564404 (R)
561581

Gian Chand Gupta
MAYOR

MUNICIPAL CORPORATION, CHANDIGARH
NEW DELUX BUILDING, SEC. 17, CHANDIGARH

D.O. No. PA/Mayor/98/1323
Dated 2-9-98



वास्तुकला में श्रेष्ठ, विश्व की अति सुन्दर और आकर्षक नगरी चण्डीगढ़ की बढ़ती हुई जनसंख्या के दृष्टिगत इसे स्वस्थ और प्रदूषण-मुक्त बनाए रखने में सरकारी मैडीकल कालेज अस्पताल की रचनात्मक भूमिका है। शिक्षण और प्रशिक्षण की सुविधाओं के विस्तार में भी इस संस्थान का महत्वपूर्ण स्थान है क्योंकि यहां से ज्ञान पाकर हमारे चिकित्सक प्रिय भारत के विभिन्न क्षेत्रों में पीड़ित मानवता की सेवा करते हैं।

संस्थान के वार्षिक उत्सव पर कालेज मैगज़ीन का प्रकाशन, छात्रों में आधुनिक चिकित्सा ज्ञान और अनुसंधान के प्रसार को प्रोत्साहित करेगा।

मेरा विश्वास है और मैं मंगलकामना भी करता हूं कि छात्र और प्रशिक्षक स्वतन्त्र अभिव्यक्ति के इस उत्तम माध्यम से, विश्व भर की नई तकनीकों और जानकारी से निरन्तर सम्पर्क रख सकेंगे।

(ज्ञानचन्द गुप्ता)

सत्यपाल जैन
संसद सदस्य

I am very happy to know that the government Medical College, Sector 32-A, Chandigarh, is releasing the first issue of its magazine at the Annual Function of the College, being held on the 9th September, 1998.

I send my best wishes to the College Administration and other participants for the success of the Annual Function.

(Satya Pal Jain)

Jagdish Sagar, IAS
Adviser to the Administrator
Union Territory of Chandigarh
U.T. Secretariat, Sector 9
Chandigarh - 160017

I am glad to know that the Government Medical College, Chandigarh, has planned to release the maiden issue of the college magazine at its Annual Function on September 9, 1998.

The Government Medical College has grown in stature with each passing year since its inception. The college magazine will mirror the institution, highlighting all its achievements and future plans.

I wish the publication all success.

(Jagdish Sagar)

Anuradha Gupta, IAS
Home Secretary,
Chandigarh Administration,
Chandigarh

It gives me immense pleasure to know that the Government Medical College, Chandigarh is holding its annual function on Septmber 9, 1998 and also bringing out its first issue of the College Magazine.

The Government Medical College, Chandigarh has made rapid strides since it started functioning from the Prayas building in Sector 38 in 1991. It goes to the credit of the institution that in a short span of time, it has carved a special niche for itself in the field of medical profession. The faculty of the college, as I have known from its recent track record, has not only trained young, budding doctors, but has also distinguished itself in meeting the health-care requirements of this region through dedication and professional excellence.

Starting of the college magazine is another laudable step which should now enable people to recognize good work the institution is doing for the service of people. Besides, the publication would voice the feelings, hopes and aspirations of the students of the College.

I wish the Magazine all success.

(Anuradha Gupta)

दूरभाष/Phone Off 541062
PBX 541031-39, 541028-29 Ext. 205
Res 741577
फैक्स/Fax 0172-540401, 543078
इ-मेल/E-mail medinst@pgi.chd.nic.in
दूरसंचार/Grams POSTGRADMED

स्नातकोत्तर चिकित्सा शिक्षा एवं अनुसंधान संस्थान, चण्डीगढ़ - १६० ०१२ (भारत)
Postgraduate Institute of Medical Education and Research, Chandigarh - 160 012 (India)

प्रो. बी. के. शर्मा
Prof. B. K. Sharma
MD,FAMS,FISN,FICP
निदेशक
Director

संख्या/No. DPGI-3/98-8[illegible]

दिनांक/Dated 2/9/98

I am glad that the students of Medical College, Chandigarh are bringing out the first issue of the College Magazine which also coincides with the annual function of the college. College magazine is a mirror of aspirations, dreams as well as the talent of the students. It affords an opportunity to bring out potential and the hidden talents of the students and I have no doubt that Government Medical College, Chandigarh has plenty. I am sure the magazine will bring out the professional as well as the artistic expressions of the contributors. I take this opportunity, also to congratulate the Director-Principal, Prof. V. K. Kak for presiding over such events of this young Institute.

(B.K. Sharma)

प्रो. विजय कुमार काक
Prof. V. K. KAK
MS, FRCS, FRCSE, FAMS
Hony. Consultant to the Armed Forces
DIRECTOR - PRINCIPAL &
SECRETARY, MEDICAL EDUCATION & RESEARCH

चण्डीगढ़ प्रशासन
CHANDIGARH ADMINISTRATION
राजकीय आयुर्विज्ञान महाविद्यालय, सैक्टर 32-ए, चण्डीगढ़ 160 047
GOVERNMENT MEDICAL COLLEGE, SECTOR 32-A, CHANDIGARH 160 047
E-mail : gmcchd@chl.vsnl.net.in

सँख्या No.....

दिनाँक Dated.....

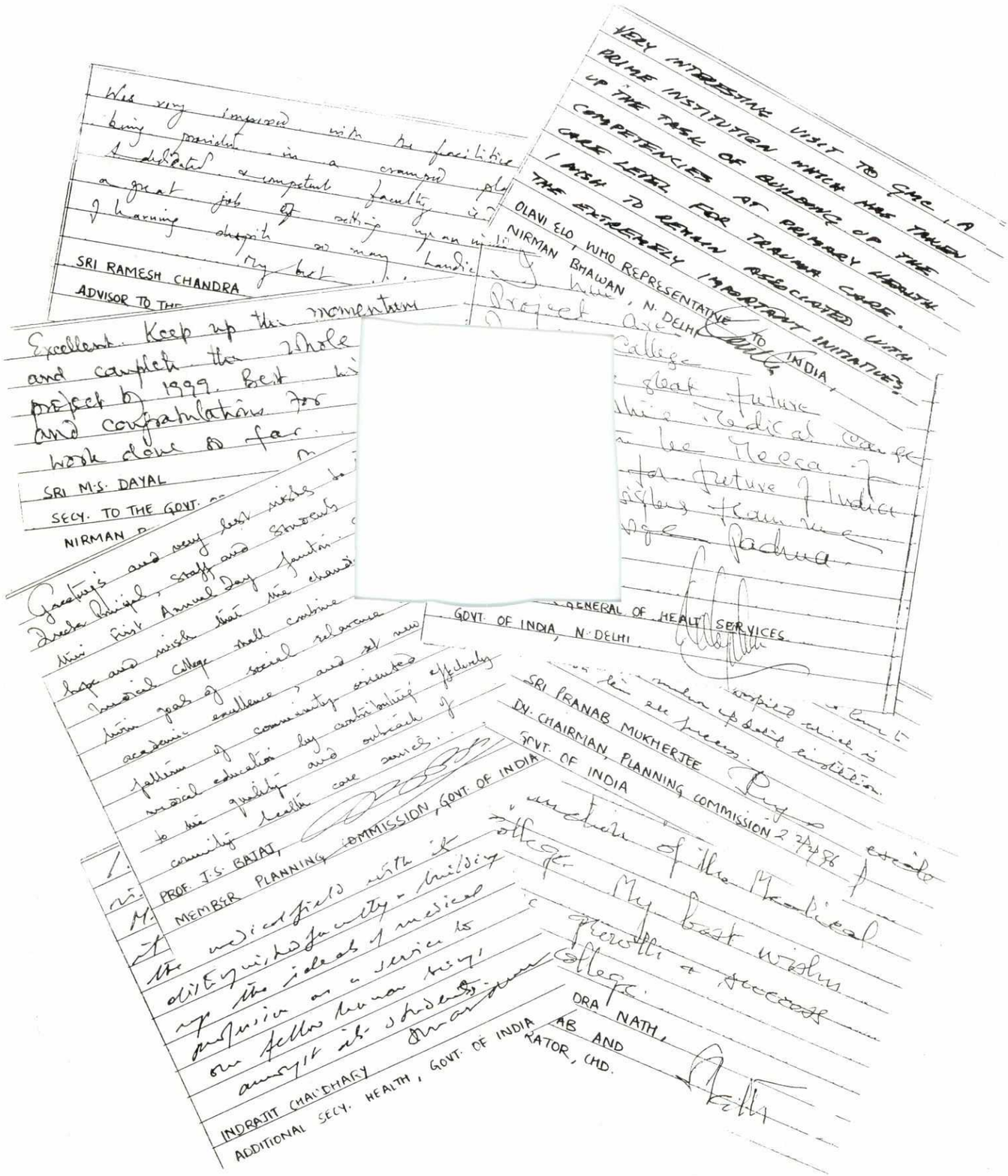
Governmentt Medical College, Chandigarh, is being developed as a State of the Art medical institution, located in the City Beautiful. Its students, selected purely on merit, have been the most disciplined, bright and hard working individuals who have not only excelled in the academic field but have also brought several laurels in literary, cultural and sports activities to this institution as well. The strong intellectuality of their minds seeks to learn the inner truth and all sides of human activity including language, grammar, medicine, philosophy and sports, in fact all arts and sciences.

Our earlier years have been full of trials, turbulations and turmoil, which have been bravely faced and adroitly dealt with by the students and staff of this College transcending all major and minor setbacks. It goes to the credit of our students and teachers that the first batch had passed their final examinations on schedule with flying colours. A number of our students have gained admission to various postgraduate courses at prestigious institutions. Their strength of faith, clarity of mind and undying devotion to truth and work has contributed immensely towards achieving their cherished goal.

The rise of scientifically based medicine has been founded on focussed scholarship and progress that characterised specialisation. There is perhaps no other field in human endeavour that illustrates this better than our profession, viz. medicine. Medicine's scientific and technical foundations have never been stronger; it is upto you to exploit this opportunity for the benefit of our patients.

Although Government Medical College, Chandigarh, was started in the year 1991, the absence of a College Magazine was a glaring deficiency. This has now been corrected. I convey my good wishes for continued success of this endeavour.

(V.K. Kak)



What They Had To Say ...

Editorial

LOOKING BACK ..... CHALLENGES AHEAD

With all humility, I must say that it is a proud privilege for me to write the editorial for the inaugural issue of our College Magazine.

When one looks back into the history of our 7-year old institution, one recalls the period with nostalgia as a fair mix of sweet memories and protracted struggle as typified in a love-marriage against the wishes of parents. The institution born in September, 1991 under the legitimate orders of the Government of India slowly evolved into a 'concept' which in the parlance of the Health Ministry as well as Chandigarh Administration came to be described variously as "state-of-the-art medical college" and "model and planned medical college in government sector for other new institutions to emulate" while cynics in public and press labelled it as a "five-star hospital". Whereas only part of the planned buildings have been commissioned and others are yet being developed, all said and done so far certainly cannot be dismissed as any other State Medical College even by the bitter critics. While the other four-decade old medical institute in the city has always been regarded as prestigious and each individual working there having a feeling as if the sun shines only at that place in the country, our institution has got a place in the hearts of people of the city and suburbs as well as earned a niche in the students in a short span. Hence an ongoing healthy competition between 'the greatest and oldest' and 'the young beauty with brains and service with personal touch' are some of the obvious observations of the discernible public.

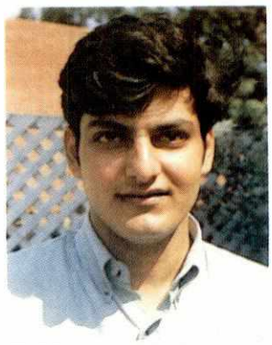
As expected, all institutions have teething problems in the initial years; so had we. However, since the inception of institution 7 years back, there has not been any compromise on providing facilities and in having adequate and qualified staff (presently it is 202% compared to the norms prescribed for 50 students). It is the result of preseverence of the authorities and extreme trust reposed by the students and their parents that all the students who have graduated from the institution so far have been accorded recognised degree. It is hoped that the last of the hurdles of having many senior faculty members on deputation having been largely overcome recently, shall pave the way for permanent recognition of the institution by the MCI. Meanwhile, the 'seven-year itch' has started in many departments for flirtation to start postgraduate courses at the earliest after permanent recognition for the graduate course is accorded. Hosting of CMEs, conferences, symposia, workshops and guest lectures as well as holding of academic sessions at departmental and institutional level for training of residents are steps in that direction.

All this time, the spirit of devoted services has remained high on the mind of men and women behind the machines in the institution. And the force behind the zeal for more and more hard work and devotion to duty has been the man behind the desk, the Director Principal, working for long hours every day with his three sets of tools - scalpel, pens and internet. He has always believed in the philosophies summed up as "he who sets an example of himself gets the best out of others" and "show your worth by deeds and not by words". The results have been obvious for others to percieve as apparent from the two main categories of users of services of the institution - the students and patients. Besides the high quality of teaching and training with modern aids, the students are encouraged to do more beyond mere academics in an attempt to expose their latent talent; the present venture too is a similar effort. The students of the institution have shown remarkable overall talent in all fields - academics, literary, cultural and sports activities. Above all, they develop into fine human beings with qualities of compassion, dignity, self-respect, confidence and a positive attitude. It is no small achievement that 18 ex-students of first two batches of MBBS have already got admission to postgraduate course in the country on the basis of All-India Entrance and State-Entrance examinations, of which four are in PGI, Chandigarh and three in AIIMS, New Delhi, while many have not taken the PG-entrance examination since they are on their way to US after having scored high percentile in USMLE.

The herculean task of bringing out the first issue of the college magazine THE GLIMPSE, summing up the activities and achievements of the institution in general and students in particular, in the last 7 years has been completed in record 7 days. It is the outcome of hard work and devotion of each and every member of the Editorial Board. Though every effort has been made to represent most events and include most of the articles submitted, elements of human error and omission are still likely. The lapses if any, I personally own; glorious moments we all members of the Editorial Board share together!

Prof. Harsh Mohan
Editor-in-Chief

REDEEMING THE PLEDGE



There is a symbiotic relationship between education and development - the two very vital socio-economic, political and cultural activities of the modern world. Our educational system has not yet succeeded in making the educated aware of the state of the nation.

Despite all the developmental efforts in the past decades and despite all the great technical and scientific achievements (the nuclear tests joining the list with a bang), more than half the people of India are unemployed or under employed; almost sixty percent have no access to proper sanitary facilities, safe drinking water or medical services; nearly fifty percent of the world's adult illiterates live in India and sixty three percent of childern in India are malnourished. Are we, the resposible citizens of the nation, aware of this dismal picture? Even if we are, perhaps this 'bland' data is pushed down to our subconscious level and we tend to focus our attention on some more 'demanding' / 'intellectual' events viz. the bomb blasts at Nairobi and Dar-es-Salaam, Mr. Bill Clinton's reluctant self flagellations over his sexual shenanigans, the tightrope walk by Mr. Jaswant Singh and Mr. Strobe Talbott to restore some equilibrium in post-Pokhran II Indo-U S relations, and so on.

Education can be brought back to the right track if we recognise its integral role in development based to fulfil the basic needs of the people. If our nation has to preserve the fundamental values of a democratic society, every person, whether a public functionary or a private citizen, must display a degree of vigilance and willingness to sacrifice. Without the awareness of what is right and a desire to act according to what is right, there may be no realisation of what is wrong. *"Long years ago we made a tryst with destiny, and now we shall redeem the pledge..."*

Dr. Nipun Vinayak
Intern
Student Editor

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Kudos to Dr. A K Attri whose entry for the name of the College Magazine **THE GLIMPSE** has been selected among the several names considered by the Editorial Board.

First MBBS Batch (1991-95)

(Left to Right)

Ist Row : Anu Goyal, Anupam Goel, Barjinder Kaur, Bindu Nalwa, Kamaldeep Sandhu, Kavita Mahajan, Kavita Mohindra, Meenakshi Sharma, Nidhi Gupta, Niveditta Chadha.

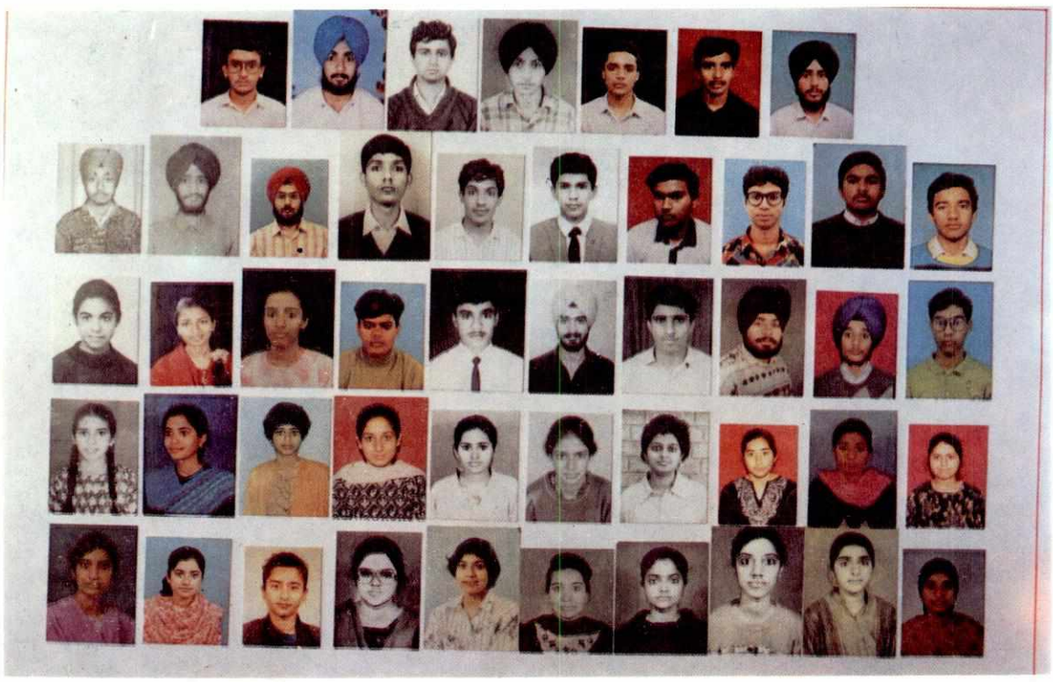
2nd Row : Preeti Sahota, Ramandeep Bhatia, Renuka Bansal, Rishi Mangat, Ritu Khanna, Rupali Tyagi, Sandeep Kaur Gill, Sangeeta Goel, Saroj Bala, Seema Chopra.

3rd Row : Seema Sharma, Shalini Grover, Suresh Kumari, Surmeet Kaur, Amarender Pal Sharma, Atul Handa, Devinder Singh, Harminder Pal Singh, Harpreet Singh, Harvinder Kumar Taneja.

4th Row : Jaswinder Singh, Nittin Pal Mittal, Pawan Kumar, Puneet Tuli, Ramandeep Singh, Sanjay Goel, Sanjeev Gupta, Vishal Pal, Vishal Veer Sharma, Sarabjit Kaur.

5th Row : Hemender Singh, Anjuman, Jaswinder Jally, Sharda Meel, Navneet Singh Majhail, Meeta Singh, Vivek Ahuja, Neeraj Manchanda, Amit Monga, Jagdeep Kaur Babra, Prashant Sharma.

Second MBBS Batch (1992-96)



(Left to Right)

1st Row : Alka Rani, Anju Mehndiratta, Gunjeet Dua, Gurpreet Kaur, Jasreman Hayer, Navneet Dhillon, Navneet Kaur, Nitika Jain, Pooja, Pravesh Sharma.

2nd Row : Rajni, Ripudaman Kaur Bagga, Ritu Arora, Rupinder Kaur Arora, Shaloo Gupta, Savita, Shilpi Aggarwal, Spinderjeet Kaur Gill, Sunny Rupal, Sneh Lata.

3rd Row : Tania Lamba, Veena Goyal, Vinita Rano Dodd, Akhil Kumar Verma, Anil Kumar Aggarwal, Amit Bir Chawla, Ashootosh Sharma, Kanwar Shamsher Singh Walia, Harvinder Singh Sabharwal, Harish Kumar Arya.

4th Row : Jagpal Singh Suman, Maninder Pal Singh Gill, Navneet Singh Chawla, Ravinder Kumar Banga, Rishi Kad, Rohit Rambani, Sandeep Bhatia, Ved Bhushan Arya, Vikas Goyal, Yogesh Gauba.

5th Row : Kuldeep Kumar Bassi, Gursewak Singh, Gaurav Bhardwaj, Harminder Singh Lorigia, Satinder Pal Singh Saini, Deepak Modi, Rajeev Singh Rana.

Third MBBS Batch (1993-97)

(Left to Right)

Ist Row : Aabha Sharma, Anamika Rai, Anuradha Gosain, Beenu Thakral, Gurpreet Sarao, Hem Lata Gupta, Kiranjot Gujral, Rakhi Aulakh, Romilla Mittal, Rozi Bhatia.

2nd Row : Rupali Soneja, Sapandeep, Sonia Bhalla, Sugam Sagar, Suman Lata Verma, Ajay Kundra, Anirudh Aron, Anup Kumar, Datinder Bir Singh Deo, Dinesh Arora.

3rd Row : Harinder Pal Singh Gokhar, Jasminder Singh, Nipun Vinayak, Pushpinder S. Sandhu, Rohit Jindal, Soneet Aggarwal, Sukant Kumar Garg, Sumesh Arora, Sumeet Khurana, Varinder Pal Singh.

4th Row : Manmeet Kaur, Meenu Jain, Naresh Bansal, Anuradha, Shalini Girdhar, Rajni, Nav Sankalp Kalsi, Aashish Gulati, Adheesh Agnihotri, Kiran Chahal.

5th Row : Jasmeet Singh Oberoi, Shishir Pareek, Mukta Goyal, Dashrath Rao, Mini Kamboj, Sandeep Singh Kochar, Ashina Goel, Tarun Narang, Rajesh Kaushik.

The Best Graduates

They won a place in the Roll of Honour

SHALINI GROVER
(MBBS 1991-95)

ALKA RANI
(MBBS 1992-96)

HARINDER PAL SINGH
(MBBS 1993-97)

Guest Article

PHYSICIANS OF 21ST CENTURY

(Dr. J.D. Wig, MS, FRCS)

Medicine is undergoing a series of phenomenal changes and the art of medicine is attaining its scientific foundation. A profession is incapable of progress unless it is oriented towards the future. Information technology has the potential to revolutionize the way medicine is learnt by students. Are we preparing our medical students to meet the expectations that individual patients and society as a whole will have for them? Concerns have been expressed about the capacity of the current system of medical education to prepare future generations to meet their obligations of society. There is a need to modify the curricula of medical schools to provide more suitable training for physicians of 21st Century. The word curriculum is derived from a Latin word meaning "running" or a "race course". Without frequent testing and feedback on the progress towards the goal of mastery of objectives, students may falter, and if not helped, may drop from the race. Burden of education is primarily the responsibility of the student.

The emphasis has been on a lecture format and mastery of material is determined by performance on examinations that measure little more than a student's ability to recall memorized facts. Any teaching that occurs is "teacher oriented" rather than student centered. Knowledge is accumulated passively and is not well retained. It has been well documented that student's retention of material presented in lectures diminishes from 60% within a few days of the lecture to 23% eight weeks later. Enforced student passivity represents the fundamental problem with the lecture method. Most students perpetuate the passive behaviour that was expected of them in their previous learning experiences and become intellectually passive members of the ward team, performing tasks without understanding the purposes behind them. Students in tertiary care centres suffer from a progressively decreasing experience to basic, commonly occurring disease processes.

Clinical examinations have focused on two aspects - the knowledge base that is assumed to be necessary for clinical practice, and the candidate's performance in diagnosing a small sample of patients with evident physical signs. Test items usually measure isolated facts rather than the application of knowledge. The traditional evaluations thus provide inaccurate assessment of student's performance.

Our educational system has emphasized breadth of training, but has failed to address the issue of expertise. Clearly we need both. Undergraduate medical education is changing and the thrust is towards reducing factural load in the curriculum and encouraging students to develop their skills at directing their own learning in preparation for continuing personal and professional development.

Community - oriented education and community based teaching : WHO has repeatedly stressed the importance of community - oriented medical education. The aim of community based education is to produce graduates who are responsive to the health needs of their community. This provides a chance for students to work in an environment similar to the one they are going to face in future, in particular in under served and rural communities. This will also help in preparing students for a community - oriented career and will also facilitate student perception of patients as part of the family and community.

Problem-based learning (PBL) : The first step in modifying an undergraduate medical education programme is that the emphasis needs to shift from the teacher to the 'learner'. Medicine must be learnt by the student. Self-learning is best accomplished through an active problem-solving approach. Teaching students to 'think' should become the primary goal. PBL offers an opportunity for students not only to acquire knowledge but also to develop problem solving capabilities that will serve them in their later professional lives. This will enable the students to learn on a basis of curiosity and the exploration of knowledge rather than on its passive acquisition, and on learning for examinations.

Wherever PBL has been introduced, it has been seen that the students have better clinical skills, are quicker at remedying gaps in knowledge and are more effective at working in teams.

Clinical skill training programmes (Skill laboratory): The curriculum designers need to consider ways to encourage training in physical examination skills. As the practice of medicine shifts to community setting, it is even more critical for doctors to rely on clinical skills. It needs to be emphasized that skills which are not taught correctly will continue to be poorly practised and they may be even more difficult to correct later. To achieve this aim, greater emphasis should be placed on small group teaching.

In various countries "skills laboratory" had been an advance to prepare students for their first contact with patients. Students can repeat procedures as often as they like in this laboratory. A systematic approach to observing student's performance of clinical skills should be a part of the curriculum.

Communications skills : It is hard to imagine any field of human activity where close and accurate communication between individuals is more important than it is in the practice of medicine. Communication is the fundamental instrument by which physicians and patients relate to each other and attempt to achieve therapeutic goals. Are we preparing our students for their first contact with patients in a hospital? The answer is 'no'. Poor communication skills limit the ability of doctors to acquire pertinent information and to satisfy patients. We have failed to teach our students the interpersonal skills which will enable to effectively communicate with the patient, to consider the patient's needs and wishes, to encourage the patient to appropriately participate in their care, and to treat the patient with respect and dignity. It is now well established that skills of this type can be improved through structured training programmes.

Trauma education: The increasing magnitude of vehicular accidents is an area of great concern and attention has to be focused on training to prepare physicians to deal with this 'epidemic'. The objective is to prevent unnecessary death and disability from trauma and assure quality care both at the site and some hours after injury (hospital setting) when resuscitation and stabilization are critical.

Information technology: Information technology has the potential to revolutionize the way medicine is learnt by students. Future generation of doctors need to be familiar with the application and scope of information technology. Multimedia and internet provide learners with access to large quantities of information which can be searched and viewed in a variety of ways. The internet can help learners from different countries to participate in tutorials and communicate with other learner and tutors.

Evaluation and testing methods : Testing is an integral part of learning. There is an urgent need for the objective structured clinical examinations. Students are presented with clinical problems in the form of a patient, a clinical scenario, or laboratory data and are expected to come up with solutions. Each question tests for a specific clinical skill, which may be the art of history taking, proficiency in physical examination or interpretation of a laboratory data. The evaluation is designed to judge the performance in the setting in which it was developed in a clinical context. The examination system should encompass problem solving capabilities, critical thinking, decision making, and systematic arguing. Case-based examinations are hard to grade and procedural skills cannot be assessed in formal examinations.

Undergraduate medical courses tend towards factual overload. Lecture and case discussion serve as the most common didactic methods for presenting the information which they are meant to regurgitate at the time of examination.

The Medical Council and educators need to establish some goals for the medical education - a student centred developmental philosophy of education with an emphasis on active rather than passive educational methodology. The medical education should instill in students the attitude of independent scholarly inquiry, help students develop the skills necessary for their continued self education, and to provide an atmosphere for students to achieve their greatest potential. There is a need to adapt medical education to changing patterns of health care delivery systems, special considerations of health care for elderly and decisions on the clinical use of technology advances. We need to ensure a sound background in modern biologic and clinical sciences serving as a basic knowledge for all students and a life-long hunger for learning.

Dr. J.D. Wig is Additional Professor, Department of Surgery and Incharge-Academics, Post-Graduate Institute of Medical Education and Research, Chandigarh.

CREATIVITY IN SCIENCE : CHANCE, GENIUS OR CULTURE

The movement of change is the only poem. Things do not change; we do. Sciences do not develop, we create. There is a time for departure, even when there is no certain place to go. But creating something new and logical is no joke, be it in the field of science, art or literature. God made everything out of nothing, but nothingness shows through. One must die to live. A scientist works on his next invention because he is not satisfied with his previous one. His creations mirror out his secret wishes.

Whether creativity in science is due to chance, genius or culture is really debatable. But it will be highly improper if we jump to any conclusion without digging ourselves upto roots of science and its creativity.

What is science? Science is organised knowledge, nothing more than a refinement of everyday thinking. T.H. Huxley defines science as "Nothing but trained and organised common sense." The term "Science" is derived from Latin word 'scientica' which means knowledge. It is in fact systematized knowledge derived from observations, study and experimentation carried out in order to determine the nature of principles of what is being studied. In science, all facts no matter how trivial or basic, enjoy democratic equality.

No person can call himself educated today unless he knows something of science and its creativity. We can't progress nationally or individually unless we profit ourselves by creations in science. It is creation in science alone that can solve the problem of hunger and poverty, of insanitation and illiteracy, of superstitions and deadening customs and traditions, of vast resources running to waste. In fact creativity in science is a certain way of approaching problems, a certain way of speaking truth. It is a certain empirical way whereby we get prepared to reject anything if we can't establish or prove it. Somebody has rightly said.

"With creativity of science, the law of parturation is reversed,

the threos are in conception, the pleasure is in the birth."

Thus, creativity is the search for truth and new knowledge, the capacity to change previous conclusions in the face of new evidence. It relies on observed facts and not on preconcieved history.

Creativity in science requires a scientific method and scientific attitude. The scientific attitude or temper refers to a set of human values in which logic replaces superstition and tradition. Scientific approach may vary but the basic attitude remains the same. Scientific attitude comprises of disbelief in superstitions, critical observations, alertness with keenness to get to the root of problem, patience for hardwork, disbelief in teleology boldness and courage, freedom from any kind of bias, prejudice or influence and willingness to change the opinion or being convinced that the change is necessary i.e. open-mindedness. Nehru believed that one can't apply science in industries keeping other departments of life free from it. He further said that while science changes with each new discovery and therefore there is nothing final about it, he maintained that scientific method doesn't change, and it is to that we must adhere in one's thought and activities, in research, in social life, in political and economic life.

What is scientific method? Actually there is no single method. Many methods are used to bring creativity in science. It is not possible to outline a single set of procedures that can be use in making every scientific discovery. The essence of scientific method is posing questions and the quest for answers but the questions must be scientific arising from observation and experiments and answers must be testable by further observation and experiments. The scientific method stresses acute observation, prediction, comparison and verification with scope for correcting errors.

Observation is a careful examination of a situation or a problem and accumulation of actual data by the scientists. After the observation has been made the next step of scientific procedure is to define a problem, one asks questions about observations. What is that which makes such and such happen and in this or that fashion. The next step invloves making of generalizations, guessing or predicting the possible answers to a question, selecting the known events and

correlating them. A hypothesis consists of a number of connected statements or assumptions which provide possible answers to the problem. The predictions made on the basis of hypothesis can be tested by controlled experimentation. It is here in construction of hypothesis that scientists differ most and true genius shows itself. Testing or experimenting is the hardest part of the scientific procedure. An ideal organisation of experiment requires proper designing alongwith control, appropriate materials in required proportions and a well defined procedure. A hypothesis that has been tested and found to fit the facts and capable of making valid predictions may be taken as a theory. A theory may become a principle or a law after it has been tested on a very wide scale.

Scientific methodology is often associated with an interesting phenomenon called 'serendipity'. These are the chance discoveries.

A snake licking his tail gave Kekule the idea that benzene has a ring structure. A chance observation of an apple falling from a tree gave Newton an idea about gravity. Lifiting of a lid of vessel containing boiling water inspired James Watt to invent the steam locomotive. It was serendipity after observing pox symptoms on milkmaid which prompted Edward Jenner to develop smallpox vaccine.

We have discussed above the role of chance in discoveries, the role of geniuses in carrying out scientific experiments and role of scientific culture in devising the scientific method.

Talking about role of chance in creativity in science, it is found that its role is superfluous. Archimedes, 'law of floatation' was inspired by the overflow of water from a bathing tub. But he discovered it not by chance but because of his imagination and a trained mind. The question had been bugging him for quite sometime. Many people before Archimedes must have seen water overflow from a tub but they never knew what was happening. Nobody got an idea about gravity from a falling apple, but for Newton. This is because they had never thought about it, didn't rationalize it but had accepted it blindly. On the other hand, Newton for his quest of logic got the solution. Still should we dismiss his efforts by describing them as a mere chance ! Chance in creativity in science counts for as much as companionship in marriage. Moreover, someone has rightly said, "Chance favours the trained mind." Gone are the days when discoveries were made single handedly. In today's highly sophisticated world with advent of higher technology, supercomputers and programmed data, discoveries are a result of team effort, hard work and talent where chance factor has been virtually reduced to nought.

Geniuses do have some role to play. But what is a genius? Genius is one percent inspiration and ninety nine percent perspiration as Einstein famously said. It takes people a long time to learn the difference between talent and genius. Genius means a little more than being talented alone.

Genius is often persevering effort in disguise. Patience is a necessary ingredient of genius. Creativity depends on adequate preparation and indomitable determination. All the performances of human science at which we look with awe and wonder are instances of restless force and perseverance. Firm must be the will, patient the heart, passionate the aspiration to secure fulfillment of some high and lofty dreams. There is no substitute to hard work. To find diamonds and gold one has to dig, sweat and search.

Deep study and accumulated knowledge are not a prerequisite for creativity. Without the power of imagination and fertile mind, much of their value is lost. Someone has correctly said, "Don't think! Thinking is enemy of creativity, it is self conscious and anything self conscious, is lousy. You can't try to do a thing you simply must do them".

Imagination makes people genius but where does this imagination come from - cultural background only.

When good taste and appropriate cultural background are lacking, imagination is likely to be deviated to wrong unethical channels and hence cause havoc in science. Disturbed imagination and melancholic minds prove ruinous. Then building castles will be possible in air only. Sir James Jean had rightly said, "Science should leave off making pronouncements, the river of knowledge has been often turned back on itself.

Thus geniuses or imagination can't creat science unless they are backed by ethical, pure and appropriate cultural background. Indian scientist H.G. Khurana was denied a job in Panjab University, Chandigarh. He went to America where he tuned up with their culture and synthesized DNA strand in vitro a discovery which fetched him Nobel prize. Was it that he became genius on landing in States or was it their strong culture which led him to this discovery.

Dr. Dinesh Arora
Intern

The author won the first prize for above written essay in an essay contest organised by Indian Institute of Microbiology, Chandigarh. The second and third prizes were won by Dr. Nipun Vinayak and Dr. Naresh Bansal, respectively.

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POSITIVE PERSONALITY

Persistant
Enthusiastic
Responsible
Sympathetic
Open
Nice
Aesthetic
Loving
Independent
Thoughtful
Youthful.

Dr. Alka Goyal
ENT

❖ ❖ ❖

☹ A surgeon, an architect and a politician were discussing which of their professions was the oldest. 'Mine, certainly,' said the surgeon, for it was inaugurated by God when he removed man's rib to make woman.' 'But before making man and woman,' the architect said, 'he had to be an architect to give form to the creation, producing it from chaos.'

'Exactly, 'said the politician,' and who made the chaos?'

☹ A customer who ate a meal at a restaurant, but unexpectedly found himself short of funds to pay for it, was told, "That's perfectely all right;

We'll jot down your name on the wall and you can pay us whenever you come back."

"That won't do," objected the customer "everybody will see my name on your wall."

"Don't worry about that," he was ensured, "your clothes will be hanging over it."

☹ A smuggler was clearing customs when an officer asked, 'What are you carrying, sir?'

'Food for my hens,' answered the smuggler. 'Open your bag, please,' said the officer. As he did so, out fell radios, cigarettes and watches. 'So that is what you call hen-fodder?' remarked the officer.1

'Yes,' replied the smuggler, 'I put these in the hen-coop and if the birds don't eat them I sell them at the market.'

ROMANCE IN MEDICAL COLLEGE

Having been in a Medical College for more than four years and seeing at close range romances of every hue and colour, I feel an urge to talk about them. And though being a careful observer and a distinguished gossiper, I have never been through the thick and thin of such romance. My critics should remember what that bright fellow said, "Those who can play, play, those who can't, comment." Sometimes when I see people discuss cricketing intricacies and strategies in my class, I wonder whether Tendulkar will be able to talk even half as brilliantly as them. No! Tendulkar would look at them, amazed, and sit at their feet and hear them talk and discuss. Until of course, the time comes to bat. Oh! I am deviating from the point. What I wished to say is that I feel even more competent than the romancers to discuss, debate and dissect this engrossing topic.

When our class began, the boys used to look at the girls and the girls pretended not to look (though if you were observant, you could watch them giving sideward glances). Gradually, the two groups started to talk. The first try at solid romance was quite early on, the seventh or eighth day, but that effort, as all initial attempts at achieving great feats (e.g. climbing Mount Everest), was badly crushed.

Medical Education has given me the habit of classifying everything, so not even the romancers could escape from this nagging habit of mine. They can be divided into four main groups :-

i) The Long Term Romancers
ii) The Short Term Romancers
iii) The Chronic Failures
iv) The Unromanced.

The Long Term Romancers

They are two people who meet, who talk and are glued together by unadulterated fevicol. Most such romances start in 1st year. A few pairs have a late take off mostly in final year as farewell gifts to the class.

The thing begins with the guy's first proposal which is usually turned down. The results of 2nd and 3rd proposals (to the same girl of course) are much more encouraging. Once the affair kicks off, your eyes will thirst to see one of them alone for a luxurious 30 seconds. But all in vain. They are as inseparable as the Siamese twins. Their love blooms in the formaldehyde laden D-Hall. The girl makes Anatomy diagrams for her guy, while he piths frogs for her in Physio. practicals. The late starters leave no stone unturned to make up for the lost time by not talking to anybody except each other - not even for social motives like, "Hi!, bye!, how are you?" etc. May God bless these exemplary proponents of love.

Short Term Romancers

These are people who meet, then equate and finally separate. In these affairs, one partner is usually spurred by the idea of romance rather than true love. Mostly that partner dumps the other one. The condition of the dumped fellow becomes pathetic. He pours his heart out to each and every sympathetic ear - soon, sympathetic ears run out of stock. Then, if a boy, he immerses himself into 2 A's - Absenteeism and Alcohol. If a girl, into 2 S's - simple suits and studies. Between one month to six months the attack passes off and all is well.

Chronic Failures

In the story of romance there is no chapter more thrilling than to see people try again and again, waging the eternal struggle of hope against reason. One of my friends gave a letter full of love to a junior while the juniors were being ragged. The girls mistook his love for an especially cruel form of ragging and threatened to report to the Principal. The boy apologised - this was three years back. He still wears an apologetic and defeated look.

The girls do courtship in a less dramatic but equally interesting ways. Have you watched a lady waiting for the man to propose- she evinces great interest even when his talk is boring, she laughs loudly even at his stale jokes and looks at him with adoring eyes. If you observe in a girl first loving, naughty glances, then anger and hatred and then

hopeless acceptance, then be sure you are looking at a heart broken from a long wait.

But these subtle signs can be read wrongly. One guy thought that a girl was giving him suggestive glances. He decided to propose. But before doing so, he discussed the text of his proposal with some boys. Soon the details of the text were out. They became a hot topic for incorrigible gossipers like me. The girl heard his proposal in the third person. He heard her refusal in the fourth person. He still carries the text of his proposal with him - titled "To whosoever it may concern."

The Unromanced

They are in every Medical College. Countless boys and girls who have never had a soulmate. Many a time it is because of lack of guts-either to propose (boys) or to accept (girls). This makes one's heart bleed. Somebody intensely wants to swim, but is so afraid of drowning that he goes nowhere near the pool. We have got a dashing senior - tall, fair and handsome. Recently he came to the college with a broken hand. Jokingly I asked whether he had collided with a beautiful girl. He smiled, a bitter, tragic, Dilip Kumarish smile "No! I don't seem to have a girl in my fate." 'Girls,' I replied, "you can have hordes of them."

"Everybody" he said, now with bitterness turning to anger, "everybody says this but where are the girls?" By now his arms were flailing dangerously and I escaped from the nearest available exit.

Another senior of mine- again a very smart guy - was travelling with me down the lift (He too is girlfriendless). On being told that another beauty had been hooked by somebody, his smiling face got immediately transformed to a picture of extreme sadness. "She too", he said, and in those two words he packed such pathos that my heart melted and I felt like crying.

Somebody said, "The meek shall inherit the earth". So, probably the unromanced will find unbounded love in the future and laugh at me for placing them in this category. I eagerly await that day, for what is more pleasurable than to be laughed at in love.

Vinay Mehta
'94 Batch

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☹ "If we get married, will you give up smoking?"

"Yes."

"And drinking too?"

"Yes."

"And you will stop going to your club in the evening?"

"Yes."

"And what else are you thinking of giving up darling?"

"The idea of getting married."

☹ After our two-month holiday in US and Canada, a man who loved food there came back looking remarkably fat.

"You spent all your dollars," gasped one of his friend.

"And brought back plenty of pounds."

MICROBIOLOGICAL DIAGNOSIS

When you have a microscopic lc
What you find is not always the crook.
Well, it could be your friend or foe,
Thus, do not go by merely so.
If the lab. by microbial feed,
Gives you an important lead,
Put up the biochemical,
To name the microbe in binomial.
You may not be lucky always,
Then trace the microbial pathways.
A shadow may have been left,
To be evident in the immunological test.
Although it gives you some light,
But not necessarily in black & white.
As shadow may be of snake or rope segment,
So must you correlate with clinical judgement.
Here I tell you a short story,
Which adds to microbial diagnostic glory.
To be remembered in the clinical practice,
For rendering fair professional justice.
A woodcutter with an axe was in police custody,
It was an unfortunate melody.
When he found a multiply-injured dead man,
While on way for his daily job he ran.
The case was taken to a court of law,
The judge declared many a flaw.
"Such cases I do not decide the fates,
Unless I prove Koch's postulates."

Prof. R.M. Joshi
Microbiology

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Better to hold a candle than curse the darkness.

ESSENCE OF LIFE

Man comes to this world without his consent and leaves it against his will.
On earth he is misjudged and misunderstood.
In infancy, he is an angel, in boyhood he is a devil, in manhood he is a fool.
If he has a wife and a family, he is a chum.
If he is a bachelor he is inhuman and mean.
If he enters a public house he is a drunkard.
If he stays out, he is a fanatic and a miser.
If he is poor, he has no brains;
If he is rich, he is a crook and has all the luck in the world.
If he has brains, he is considered too smart.
If he goes to church, he is a hypocrite.
If he stays away he is a sinful man.
If he gives to charity it is for advertisement.
If he doesnot he is stingy and mean.
When he comes into the world everybody wants to kiss him;
Before he goes out everyone wants to kick him.
If he dies young, there was a bright future before him,
If he lives to a ripe old age, everyone hopes he has made a will.
It is therefore impossible to please everyone so do your duty with honesty and be fearless.
If you do make a mistake, it is better than doing nothing.
Keep smiling as nobody wants to hear your troubles,
They have wagon loads of their own.

Prof. Arjun Dass
ENT

A MESSAGE TO DEAR FRIENDS

You are the one who have to decide, whether you'll do it or let aside.
You are the one to make up your mind, whether you'll lead or linger behind.
Whether you'll aim for a goal that's a far or just be contented to stay where you are,
Take it or leave it that's some thing to do,
Just think it over, dear friends, It's all upto you.

Dr. Amarjeet Singh Vij
Biochemistry

MEMOIRS

Our house was situated in the outskirts of the city. There were few other houses and orchards grew for hundreds of metres. Ours was a large family of six brothers and sisters, Ma and Bauji. Bauji practised, Ma worked diligently to make ends meet and all of us studied in a Government School, a mile away, apart from helping Ma in the household. But there was another member too, a huge handsome, intelligent yet faithful and unspoilt creature -our alsation - Tipu.

I was a kid then and liked to tease him like all other naughty children. He was a serious sort and always kept an eye on my doings as if warning. Then one day I started off from home and he started following me! I was suspicious. I walked on. I was going to the near by pond, hoping to learn swimming with a friend. I reached the spot we had decided. My pal did not turn up. I waited and waited. Tempted I removed my shirt and started off towards and then into the water. The water level rose slowly and I was in the pond. A few delightful steps and the silt beneath me was washed off. I found myself struggling in water. I was unable to swim. I cried frantically for help but in vain. My hands reached for every twig. My heart was pounding like hammer. I looked on shore only to see those threatening eyes glaring at me. I couldn't have been closer to death - this way or that but then something happened.The dog crossed me, went under water, between my legs and we moved towards land. I held on to him desperately. He walked till I could hold some strong weeds and then moved away. I found him next only at home - sitting at his usual place near the front door. I patted him once gratefully, frightened by his glaring eyes and shameful of my behaviour towards him. Ma rewarded him with ladoos as he wagged his tail. He was happy.

Things went on. Then one day, a monkey took my sister's book and jumped on the roof. He tore off some pages. My sister was almost in tears. We tried to shoo him away. He flung the book at last, jumped on the mango tree and disappeared. Tipu had been watching and barking all this while. The menancing monkey returned a few days later. He jumped down near the kitchen and was opening the cupboard to eat, but this was not to be- not with Tipu eyeing him. War followed suit. From the kitchen to the toilet. There were cries, howls, shrieks and bangs. Then everything was quiet, we called for Tipu. The monkey ran out-blood soaked and hurt. Tipu's eye was bleeding. We provided him with first aid and cleaned the mess. The monkey was never seen again.

Our love and admiration for Tipu was somehow unknowingly rising to greater heights. We patted him, removed his ticks, and once in a while, gave him 'gur' to relish (It was a celebre dish in those days). He loved to play with the ball and when we played, he was always around. In one of such session as we played, my then 'arch rival' friend was taking his pomeranion for a walk. It wore a foreign fur coat. As it stalked by, I looked at my dog. It stood there bare. I immediately 'shooed' him. The little dog let off his chain and ran, close behind was Tipu. They ran, not to be seen. I received a good scolding from Ma but my heart was filled with pride as our dog returned unhurt, followed slowly by the badly bruised Buzo with rags tied around him. I patted my Tipu's shoulders in appreciation. Good Dog. Good Dog.

We returned home. He had turned into my greatest pal. The list of his acts of courage increased when he scared away two dangerous thieves who were hiding on the roof. I really felt like giving him the bravery award. He had been a close friend for years, a creature of inspiring ideals - reserved yet loving, and of course - a diligent watchkeeper and guard. He died, when I was 14, of snake bite, but not before it killed it's victim on the stairs to Bauji's room. Years have passed, the city has grown, pets have come and gone but whenever I see a pampered city-dog being taken out for a walk with a coat on... my memoirs make me smile. Good dog Tipu. Good dog.

Sujata
'95 Batch

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Where boasting ends, diginity begins.

TRUTH

You come as intruder
into my secluded world.
And, I offered no more,
than the value of your faith.
Questioning my love.
Yet, I realise
still you hold the best in me.
Knowing - we'll live our separate lives;
But, in our thoughts-
together, we always will be.
What keeps me away?
Am I too much above this world for anything,
or, deficient in everything?
Hiding the eternal craving of my embodied emotions,
And reckless passions.
Just coveting for your conscience.
A spirit love! Isn't that enough?
Smiling at my sufferings,
Bleeding my beliefs.
But, holding on to you,
Like infinite reality.
Something pathetic about me is clutching at your soul,
Torturing myself with my battle against you.
Wouldn't that make you believe,
That what I hold for you,
is true?

Dr. Saloni Khatri Mehta
Ophthalmology

❖ ❖ ❖

Happiness begins where whishing ends; He who hankers after more, enjoys nothing.

❖ ❖ ❖

Man is known by his worth, not by birth.

YEARNING FOR HOLIDAYS

He visits us so rarely. So rarely indeed. O, how we crave for him. He's Mr. Holiday, the most good looking person in the whole college. With eyes that glow red on calendars, with a body that's carved out of gold, and with legs that are always on the move (probably unfortunately so).

The last time he visited us was last Sunday. Indeed, it was great meeting him. It always is. Each time he comes, he brings along three extra hours of sleep, plenty of relaxation and most importantly, freedom from college.

Freedom from college - yes, that's what makes us crave for him the most. Only a medical student can know what it means to have a day off from college. After a week full of grilling and grinding in this kitchen that literally 'cooks and boils' new doctors, complete with the pepper and chilly of vivas and tutorials, a holiday is indeed a refreshing change. Refreshing in its very flavour, and refreshing in its taste.

But then, a holiday for a medical student is never really what it is for a 'normal' inhabitant of the earth (not that medical students are entirely abnormal). I was shocked to hear from a friend, who's studying for a commerce degree in a local college, that holidays just sort of mingle with his daily routine, and mean nothing to him. 'Nothing?' Strange indeed. Success is counted sweetest by those who never succeed, holidays by those who rarely get them.

Holiday for a medical student, however, actually involves bringing a lot of work home. In fact, a medical student views a holiday as a chance of recapitulating the last week's work, and preparing for the battlefields in the coming week, which include thousands of mystifying diseases pestering thousands of poor patients, and a few doctors. Some holiday indeed!

Nevertheless, a holiday is still refreshing- refreshing by its sheer name, and refreshing indeed by its rarity.

Harmeet Singh
'96 Batch

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MURPHY'S LAWS

1) First Basic Law : If anything can go wrong, it will.
2) Law of Entropy : Left to themselves, things will go from bad to worse.
3) Law of Selective Gravitation : A dropped tool will land where it can do maximum damage, or if a buttered slice of bread falls from the table, the buttered side faces down.
4) Law of Incomplete Induction : If a project requires 'N' components, only (N-1) will be available.
5) Availability of a component is inversely proportional to its need.
6) Law of Reliability : An object selected from a group having 99% reliability will be a member of the 1% group.
7) Dimensions are usually expressed in the least useable form e.g. velocity in furlongs per fortnight.
8) Law of Probability : The probability of an error is directly proportional to the amount of damage it can cause.
9) A self starting oscillator never starts by itself.
10) A transistor protected by a fast acting fuse, will protect the fuse by blowing up itself.
11) If everyting seems to be going well, you have obviously overlooked something.

Vikramjit Singh
'97 Batch

THE NEW ARRIVAL

I still remember, it was the night of 19th July, near about errr... yes, 10.30 p.m. How can I forget it. I was anxiously waiting and there was my husband, his beaming face and the new arrival held in his arms, cuddled close to his chest; my face was also glowing with happiness; there was the feeling of fulfilment in both of us. We were proud of it and congratulated each other; few words were exchanged but emotions were immense and outpouring... He layed it beside me. It was so beautiful, so cute, so elegant... for once we dazed at it silently scanning each and every part; or say every nook and corner. "It's lovely", I said; with a deep sigh of satisfaction. We hardly had a wink of sleep that night.

The next day both of us had to join duties and half heartedly left it behind home. At our workplace, our thoughts were preoccupied with it... Both of us were anxious to reach home. We were missing it. But I must say, it rather improved our efficiency at the workplace, because we wanted to be home at the earliest!! Both of us rushing home to be the first to lay hands on it and play with it. It had a very special place both in our hearts and home.

Days went by and more fonder we became of it. Always playing with it, exploring new things. Each day we found something new and more interesting in it. Most of the times amusing us with its antics; strained to keep us happy... being so cooperative. At times it did dishearten us; when we were unable to understand its problems. But more so when it could not get what we wanted from it; seemed as though teasing us! We enjoyed every bit of it; pampering it getting new stuff for it, making it loot even lovelier and more enjoyable. It filled our life with true happiness especially being our hard earned possession.

I must confess, my husband became closer to it. For him, it was the first priority in all possible situations. Both of them were busy with each other late night when I dozed off but the sweet noises echoed in my ear. Early morning even before the sunrays blessed our home... both of them were again together. He cared for it much more; even squeezing time from his duties; missing his lunch... to be with it.

It seemed that it was the most pampered child with an equally doting father... yes it seemed!!

I lay in my bed, observing both of them busy; the tingles in my ear... I was fondly looking at... my husband. My thoughts withered to sweet dreams imagining him and a child instead, yes, instead of... it; our computer!! slept with complete satisfaction.

Dr. Deepa Sangwan
Anatomy

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☹ Question : "What's the difference between your first honeymoon and your second?"
Answer : "The first, Niagara; the second Viagra."

☹ A man went to the doctor complaining of a bad leg. Checking over the affected leg, the doctor put her ear to the knee and heard a little voice, "Lend me fifty pounds," it begged.

"This is very serious," the doctor commented.

"That's nothing," the man informed the doctor. "You should check out my ankle."

The doctor duly put her ear to his ankle and heard another tiny voice saying, "Lend me a hundred pounds."

"This is worse than I thought, " she looked up and said. "Your leg is *broke* in two places."

THE ART OF BEING LATE

Dear friends, 'Time and tide wait for none' goes the age old proverb. It is being put to practical use by our elite student community. Let's see how-

The clock has just struck 8.15 a.m. The old wooden door creeks meekly, and there is 120degree rotation of heads by the whole class. A guy stands at the threshold of class, desperately waiting to slip inside.

'May I come in S.S.S. Sir!!??'

"What's the time gentleman", bounces the question.

"Sir -a-a-a- 8:15" parries unsteadily the late comer.

"Why are you late", another beamer. Then comes the age old excuse, "Sir, I had a TYRE PUNCTURE", sending the class into peals of inhibited laughter.

Well, this was the prototype and large number of modifications of above described format exist. Some people enter with a bang, hyperventilating. And of course, the teacher keeping in view their hard work allows them in. There are others who simply creep in without anyone knowing and take the corner seat in the last row itself. Well, there are others, expert at sign language, who communicate from outside about the attendence-if Yes then Out, if No then "Let's try it".

A wide variety of excuses are prevalent because necessity is the mother of invention, for teachers refuse to be carried away by overused excuses thus inviting innovative minds to invent newer, more durable, realistic and BROAD SPECTRUM excuses like traffic jam, a challan, no electricty at home, a minor accident etc. SPECIALIZED EXCUSES like license making are not uncommon. There are certain elite students who arrive late intentionally to avoid brief Question Hours. Certainly, some credit must be given to late comers for inducing laughter at their cost. At times, they are denied even the opportunity to express themselves and are simply waved out. Well, sympathy for such persons. Thus being late is an art and "Art is Love and Love is God". Thus, I mean ...

Hemant Sharma
'95 Batch

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SOMEBODY SAID...

...a mother is an unskilled labourer. Somebody never gave a squirmy infant a bath.

...you know how to be a mother by instinct. Somebody never took a three-year-old shopping.

...that "good" mothers never yell at their kids. Somebody's child never sent a ball through a neighbour's window.

... a mother can find all the answers to her child-rearing questions in the books. Somebody never had a child stuff beans in his nose.

...a mother always adores her children. Somebody never tried to comfort a colicky baby at 3am.

... a mother can do her job with her eyes closed and one hand tied behind her back. Somebody never organized seven giggling Brownies into a cookie-selling brigade.

...the hardest part of being a mother is labour and delivery. Somebody never watched her "baby" get on the bus for the first day of kindergarten.

...your mother knows you love her, so you don't have to tell her. Somebody isn't a mother.

DANCING DROPS

I grow a couple of wings and prepare to fly,
Whenever I hear the call of this wild,
I race across the mustard farm,
The mangrove, the honey swarm,
Till I reach the enchanted land
Where silent pine trees gracefully stand.
The innumerable angles slowly drop,
Their steady voices never can stop.
They dance around my muddy feet,
A beautiful sight; for the eyes to treat.
The wind is my partner,
The mud our dancing floor.
We dance with love in our hearts,
On the raining rock 'n' roll.
I cry out my sadness,
The drops wash my tears away;
My heart is now free,
The feet poised to sway.
Before the present becomes a memory,
The rain water rushes by.
There is rainbow-- an arch of happiness
Waving goodbye.

Mili Bhardwaj
'98 Batch

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LIFE

A rich man burst into laughter and said, "Money is life".
A poor man trembling with cold said, "Life is struggle".
A lazy person dreaming in sleep said, "Life is a bed of roses".
A young star enjoying his life said, "LIfe is pleasure".
A Sadhu in his speech said, "Life is a way to divine".
A lover waiting anxiously for his beloved said, "Love is life".
But I say, "Life is an unresolved mystery".

Prof. Arjun Dass
ENT

NEW HORIZONS

Before the precious grains of sand trickle down the hourglass,
Rise my friends!
The children of the world.
Come! Together as one
Let's revive the marvel of the lost world and create a world anew.
Let's rise from the rubble of war and unite for a new renaissance,
For the world to be reborn,
Like the legendary Phoenix.
Let's join our hands
To recreate a world built of bricks of faith,
Bonded by mortar of love and hope,
Painted with optimism,
Ornamented with trust.
Let's rekindle the flame of a new world,
Where hunger gives way to content,
Where each grows and lets grow,
Where the blood of the martyrs blooms as roses of love,
Where humanity transcends the borders of colour and race,
Where the emblem of peace reigns supreme over the new horizons.

Mili Bhardwaj
'98 Batch

❖❖❖

TIME IS PRECIOUS

To know the value of one year, ask the student who has failed in the examination.
To know the value of one month, ask the mother who has delivered a premature baby.
To know the value of one day, ask the editor of a weekly.
To know the value of one minute, ask the person who has missed the train.
To know the value of one second, ask the one who has survived a accident.
To know the value of one millisecond, ask the athlete who has come second in Olympics.
Yes, time is very precious, please don't waste it!

Prof. Arjun Dass
ENT

TOPPERS IN AGGREGATE

1991 BATCH

SHALINI GROVER

- First Professional (Nov., 1992)
- Final Professional Part I (May, 1995)
- Final Professional Part II (Jan., 1996)

PREETI SAHOTA

- Second Professional (May, 1994)

1992 BATCH

VEENA GOYAL

- First Professional (Nov., 1993)

ALKA RANI

- Second Professional (May, 1995)
- Final Professional Part I (May, 1996)
- Final Professional Part II (Nov., 1996)

1993 BATCH

HARINDER PAL SINGH
- First Professional (Nov., 1994)
- Final Professional Part II (Nov., 1997)

RUPALI SONEJA
- Second Professional (May, 1996)
- Final Professional Part I (May, 1997)

1994 BATCH

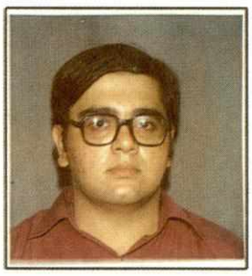
GUNCHAN PUNANI
- Second Professional (May, 1997)

ANISH K. GUPTA
- First Professional (Nov., 1995)
- Final Professional Part I (May, 1998)

1995 BATCH

ANU THUKRAL
- First Professional (Nov., 1996)
- Second Professional (May, 1998)

1996 BATCH



SHARAD PRABHAKAR
- First Professional (Nov., 1997)

1997 BATCH

ROOSY AULAKH
- First Professional (May, 1998)

Subjectwise Toppers in First Professional MBBS

ANATOMY

Nov. 1992	:	Ms. Kamaldeep Sandhu
Nov. 1993	:	Ms. Veena Goyal
Nov. 1994	:	Mr. Harinder Pal Singh
		Mr. Nipun Vinayak
Nov. 1995	:	Ms. Gunchan Punani
Nov. 1996	:	Ms. Anu Thukral
Nov. 1997	:	Ms. Shailja
May 1998	:	Mr. Abhinav

PHYSIOLOGY

Nov. 1992	:	Ms. Anjuman
Nov. 1993	:	Mr. Navneet Singh Chawla
Nov. 1994	:	Mr. Harinder Pal Singh
Nov. 1995	:	Ms. Richa Goyal
Nov. 1996	:	Ms. Anu Thukral
Nov. 1997	:	Ms. Shailja
		Mr. Sharad Prabhakar
May 1998	:	Ms. Roosy Aulakh

BIO-CHEMISTRY

Nov. 1992	:	Mr. Sanjeev Gupta
Nov. 1993	:	Ms. Alka Rani
Nov. 1994	:	Mr. Harinder Pal Singh
		Mr. Rohit Jindal
Nov. 1995	:	Mr. Anish K. Gupta
Nov. 1996	:	Ms. Surabhi Wig
Nov. 1997	:	Mr. Sharad Prabhakar
May 1998	:	Ms. Pooja Malhotra

Subjectwise Toppers in Second Professional MBBS

PATHOLOGY

May 1994	:	Ms. Preeti Sahota
May 1995	:	Ms. Rajni
		Mr. Rishi Kad
May 1996	:	Ms. Rupali Soneja
May 1997	:	Ms. Jasmine Kaur
May 1998	:	Ms. Surabhi Wig

MICROBIOLOGY

May 1994	:	Ms. Preeti Sahota
May 1995	:	Mr. Rishi Kad
May 1996	:	Ms. Rupali Soneja
		Ms. Anamika Rai
		Mr. Harinder Pal Singh
		Mr. Tarun Narang
May 1997	:	Ms. Richa Goyal
May 1998	:	Ms. Anu Thukral

PHARMACOLOGY

May 1994	:	Ms. Shalini Grover
May 1995	:	Ms. Alka Rani
May 1996	:	Mr. Tarun Narang
		Mr. Dinesh Arora
		Mr. Nipun Vinayak
May 1997	:	Ms. Gunchan Punani
May 1998	:	Ms. Anu Thukral

FORENSIC MEDICINE

May 1994	:	Ms. Seema Sharma
May 1995	:	Mr. Rohit Rambani
		Ms. Pooja
May 1996	:	Mr. Tarun Narang
May 1997	:	Ms. Jasmine Kaur
May 1998	:	Ms. Parul Mani Goyal

Subjectwise Toppers in Final Professional Part-I MBBS

OPHTHALMOLOGY

May 1995	:	Ms. Shalini Grover
May 1996	:	Ms. Tania Lamba
May 1997	:	Mr. Dinesh Arora
May 1998	:	Mr. Amit Saini

E.N.T.

May 1995	:	Ms. Shalini Grover
May 1996	:	Ms. Tania Lamba
May 1997	:	Ms. Sonia Bhalla
May 1998	:	Mr. Anish K. Gupta

COMMUNITY MEDICINE

May 1995	:	Ms. Sharda Meel
May 1996	:	Ms. Pooja
May 1997	:	Ms. Rozi
May 1998	:	Ms. Richa Goyal

Subjectwise Toppers in Final Professional Part-II MBBS

GENERAL MEDICINE

Jan. 1996	:	Ms. Shalini Grover
		Mr. Vishal Pal
Nov. 1996	:	Ms. Navneet Kaur
Nov. 1997	:	Mr. Nipun Vinayak

GENERAL SURGERY

Jan. 1996	:	Ms. Shalini Grover
Nov. 1996	:	Mr. Rishi Kad
Nov. 1997	:	Mr. Harinder Pal Singh

OBSTETRICS AND GYNAECOLOGY

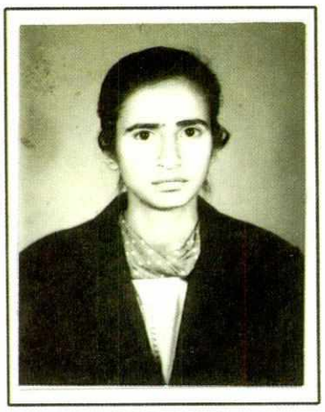
Jan. 1996	:	Ms. Shalini Grover
Nov. 1996	:	Ms. Alka Rani
Nov. 1997	:	Ms. Sonia Bhalla

SKILLFUL PERFORMERS IN LITERARY EVENTS

1991 BATCH

HEMENDER SINGH

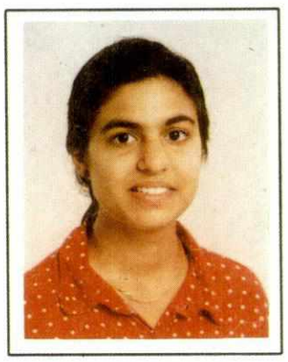
VISHAL PAL



ANJUMAN

1992 BATCH

NAVNEET CHAWLA

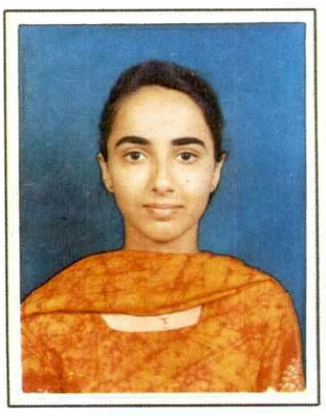


TANIA LAMBA

1993 BATCH

DINESH ARORA

ROHIT JINDAL



SAPANDEEP

SHINING STARS OF LITERARY GALAXY

ZOSPARC, Panjab University (1994)

English Declamation - 'Why worry about the future, let nature decide'.

Nipun Vinayak - 1st Prize

Sandeep Kochar - 2nd Prize

MEDIFEST, Christian Medical College, Ludhiana (Feb. 1995)

English Extempore : Nipun Vinayak - 2nd Prize

English Debate : Nipun Vinayak, Dinesh Arora, D B S Deo, Rohit Jindal - 2nd Prize

IMTECH, Chandigarh (Aug. 1995) :

Essay Competition - 'Science : Chance, Culture or Genius ?'

Dinesh Arora- 1st Prize

Nipun Vinayak - 2nd Prize

Naresh Bansal - 3rd Prize

LITFEST, Dayanand Medical College, Ludhiana (1997)

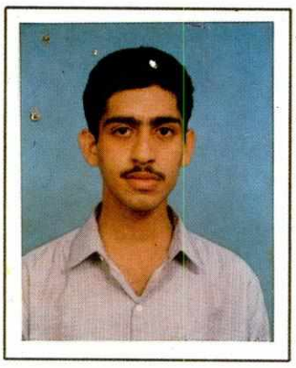
English Extempore : Jasmeet Singh Oberoi - 3rd Prize

English Declamation : Harmeet Singh - 3rd Prize

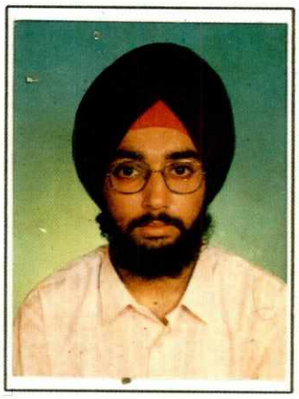
HAT-TRICK : All the three prizes (1st, 2nd and 3rd) were won by our students Mohit Walia (1995 Batch), Surabhi Wig (1995 Batch), and Nipun Vinayak (1993 Batch), respectively, in POEM RECITATION event at **LITFEST,** DMC, Ludhiana (1997).

They Excelled On Stage

JAGDEEP BABRA
Singer par Excellence



AMIT MONGA
Excellence in Choreography



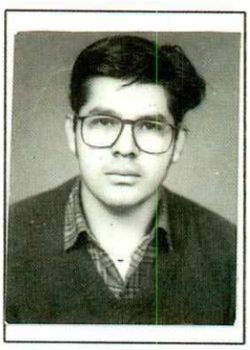
NAVNEET MAJHAIL
Guitarist

JASWINDER SINGH
Stage Artist

GAURAV BHARDWAJ
Outstanding Organiser

HARISH ARYA
Cartoonist

GUNJEET DUA
Outstanding Organiser



TARUN NARANG
Kavi 'Moradabadi'

MINI KAMBOJ
Modelling

Edging Above The Rest - Cultural Events

PULSE-93	AIIMS, New Delhi Choreography - GMC Team led by Mr. Amit Monga - 2nd Prize
STIMULUS-93	IGMC, Shimla Choreography - GMC Team led by Mr. Amit Monga - 2nd Prize
PECFEST-93	PEC, Chandigarh. Choreography - GMC Team led by Mr. Amit Monga - 2nd Prize
ZEE TV ANTAKSHRI	Jagdeep Kaur Babra (1991 Batch) participated
MEDIFEST-95	CMC, Ludhiana GMC, Chandigarh - 2nd overall position sketching : Tarun Narang - 1st Prize Cartooning : Tarun Narang - 1st Prize Antakshri : Sumesh Arora and Rohit Jindal - 1st Prize Pot Painting : Charanjit Singh - 1st Prize
PULSE-95	AIIMS, New Delhi Instrumental Music : Lokesh Handa - 2nd Prize
SYNAPSE-96	MAMC, New Delhi Solo Dance : Preeti Chawla - 2nd Prize Painting : Charanjit Singh - 1st Prize Rangoli : Preeti, Navdeep and Charanjit Singh - 2nd Prize
PULSE-97	AIIMS, New Delhi Group Folk Dance : GMC Team led by Ms. Reena Swami - 2nd Prize

Western Dance : Gagandeep, Reena, Reema, Sonali and Manish (1995 Batch)
Pulse-97 - 2nd Prize, Stimulus-97 - 2nd Prize, PECFEST-97 - 2nd Prize

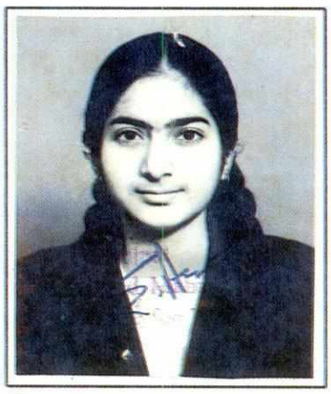
Stars Who Glittered On The Field

BEST ATHLETES

KIRAN CHAHAL
(1993 Batch)
Year - 1995, 1996, 1997

LAKSHMI SHANKAR
(1995 Batch)
Year - 1997, 1998

AMIT BIR CHAWLA
(1992 Batch)
Year - 1994



PARVESH SHARMA
(1992 Batch)
Year - 1994

SHAMSHER SINGH
(1992 Batch)
Year - 1995

HARINDER PAL SINGH
(1993 Batch)
Year - 1995

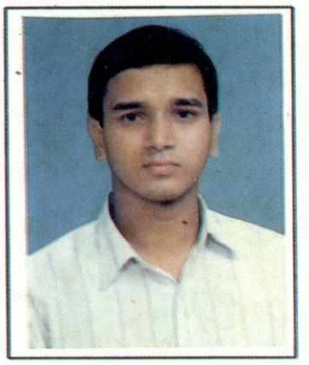
HARBIR BHULLAR
(1995 Batch)
Year - 1996

ANURADHA CHOPRA
(1996 Batch)
Year - 1998

Achievements in Sports

VARINDER PAL SINGH
(1993 Batch)
Best Organiser
1st in Table Tennis team event at **AURA-95,** Ludhiana

SANDEEP KOCHAR
(1993 Batch)
1st in Table Tennis team event at **AURA-95,** Ludhiana
Also won 1st Prize in Doubles Carrom event



ASHISH JINDAL
(1995 Batch)
2nd in Badminton Doubles at **STIMULUS-97**, Shimla

VOLLEYBALL TEAM (1995 BATCH)
2nd position in **STIMULUS - 97** at Shimla

WE ARE PROUD OF THEM

The institution takes pride in the following students who have excelled in various PG entrance examinations.

1991 BATCH

1.	Dr. Anu Goyal	Ophthalmology, Amritsar
2.	Dr. Kavita Mohindra	Medicine, DMC, Ludhiana
3.	Dr. Niveditta Chadha	Ob/Gynae, PGIMS, Rohtak
4.	Dr. Preeti Sahota	Medicine, AIIMS, New Delhi
5.	Dr. Shalini Grover	Medicine, Amritsar
6.	Dr. Harvinder Taneja	Medicine, PGIMER, Chandigarh
7.	Dr. Nitin Pal Mittal	Orthopaedics, DMC, Ludhiana
8.	Dr. Puneet Tuli	Surgery, Jaipur
9.	Dr. Sanjay Goyal	Paediatrics, Patiala
10.	Dr. Sanjeev Gupta	Dermatology and Venereology, PGIMER, Chandigarh Also qualified IPS
11.	Dr. Hemender Singh	Orthopaedics, Shimla
12.	Dr. Navneet Singh Majhail	Radiotherapy, AIIMS, New Delhi

1992 BATCH

1.	Dr. Alka Rani	Ophthalmology, AIIMS, New Delhi
2.	Dr. Veena Goyal	Medicine, Punjab
3.	Dr. Maninder Singh	Medicine, Amritsar
4.	Dr. Gursewak Singh	Medicine, Patiala
5.	Dr. Jasreman Hayer	Pathology, PGIMER, Chandigarh
6.	Dr. Navneet Kaur	Ophthalmology, Punjab

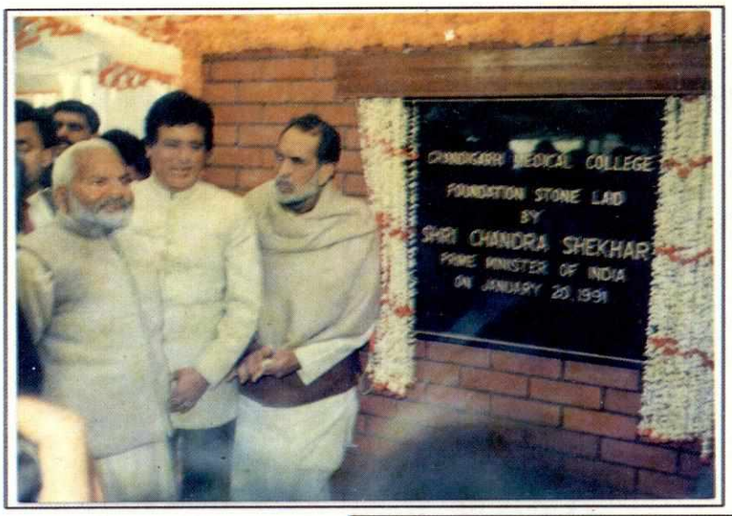
1991 BATCH

13.	Dr. Kamaldeep Sandhu	Dermatology and Venereology, PGIMER, Chandigarh
14.	Dr. Anupam Goel	Ob/Gynae, PGIMER, Chandigarh

GMC ALUMNI REGISTRY ON INTERNET

GMC Alumni Registry has been created on Internet. All the former students are requested to visit the website and enter their details at: **www.infophil.com/India/Alumni/GMC-Chandigarh/**

A STRONG FOUNDATION



THE BEGINNING...

A STEP FURTHER...

DIVERSIFYING FACILITIES...

The Lighter Moments

FOUNDERS DAY 1994
CELEBRATIONS -
DOCS OR MODELS?

ANNUAL DAY FUNCTION
(SEPT. '96) - TALENTS
UNMASKED

ANNUAL SPORTS DAY (FEB. '98)-'CUTS' WITH THE BAT

Make The World a Better Place

PPI (9 JAN. 96) - TOWARDS A POLIO-FREE WORLD

BLOOD DONATION CAMP (1994) - DONATE BLOOD, SAVE A LIFE

RUN FOR AIDS AWARENESS (OCT. 1996)- KNOW AIDS FOR NO AIDS

INTERNATIONAL ADVANCES-NATIONAL AT HEART

THE KEY-HOLE SURGERY-WE HAVE THE KEY (1994)

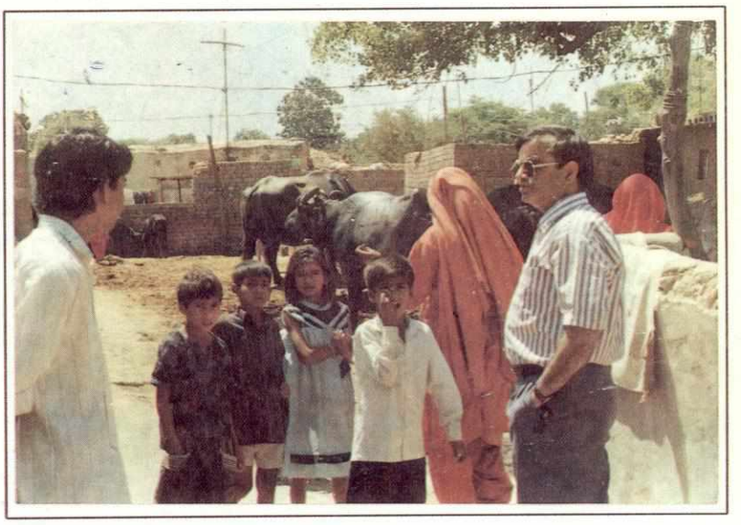
ANNUAL BOOK EXHIBITION (1997) IS THERE A LIMIT?

INDEPENDENCE DAY CELEBRATIONS-MAA TUJHE SALAAM!

Helping The Community

PULSE POLIO IMMUNIZATION - A MASS MOVEMENT DEC. 1996

ENVIRONMENTAL SANITATION CAMPAIGN AT SEC 25 SLUM, JUNE 1996



MEDICAL CAMP FOR CHILDREN AT GOVT. SCHOOL, SEC. 32 JAN 1998

Modern hospita' in Chandigar'

CHANDIGARH, Oct. 2 (UNI) provide' A modern Government teachi' hospital, compara- w' ble with the prestigious Post Gradu- ate Institute of Medical Education and Research (PGIMER) is fac' H' ' gu'

Planning body clears city medical colleg'

Tribune News Ser' CHANDIGARH, Feb ' Planning Commissio' the setting up Ch' College, formal' College is sch' The adv' today to' Minis'

New technique ractures introd

'RH, OCT 4

technique frac-

(lower end of the bone)." He added that screws are then put through the upper and lower ' ons of '

Medical college to be accorded permanent recognition soon

Sec 16 hospital attached to CMC

EXPRESS NEWS SERVICE

CHANDIGARH – The Chanc garh Administration has attach the 500-bed Sector 16 Gene Hospital with the Chandiga Medical College in order to g the Medical Council of Indi recognition to the institution.

This was revealed by Dr J Chopra, director-cum-principal the college, on the occasion of foundation stone laying ceremo conducted for the college's sidential complex by Baleshw Rai, Adviser to the UT Admin trator.

Speaking on the occasion, R said that the central governme has allocated a substaintial sum Rs 56.8 crore for the college the Eigth Five-Year Plan

tion from other colle cluding the PGI. Th Medical Council ports, been rai ing the depu to inaugu ditioned was a' 'or

Centre to approach MCI for required changes in t' ules to help expedite t'

CHANDIGARH, OCT

T' Un' ed h' can' A'

Sector 32 ho' in opened

'om page 1 col 5

he said

expressed the' oject would be in 1999. He ed but the intained

institutes, in- teams of the their re- regard- here' tical

services there. The new hospit' wished should be an excellent cen' Talking about setting up of a institute of public health here, he said it had run into some problems which were being sorted out. But the type of facilities available here, like the PGI, the Institute of Microbial Sciences and the new 500-bedded hospital Chandigarh should become

CH' muc' ha' Ho' u'

Emergency wing of College becomes opera

CHANDIGARH, March 25: The state-of-the-art emergency wing of the Government Medical College and Hospital, Sector 32 became fully functional with Adviser to the UT Administrator Vadish Sagar inaugurating the fully air condi- tioned ' ' today.

cost of Rs 60 lakh each, have the latest monitoring equipments besides having all the gadgetry at one single place so that it does not obstruct the surgeons. Video cameras have been fitted near the OT table lights so that surgeries could be telecast live to the class rooms. The intensive Care Unit has a centralised monitoring system where the can check the performance of the vital of all the patients. The PGI is also gets a similar centralised system. ully air conditioned emergency et to start functioning it has A resuscitation facilities. is just five yards away of the ambulance. h ventilators, ex- ors. the college security

gen, air under pre the medical an arrangemen thetic dir An' who'

CN

A Five Star Gov' Sect 32 hospital begins indoor services

The much ' started at ' for 32, ' ar' d

CHANDIGAR' awaited indoor' the Governm' Chandigarh ments of Pediatr' A' M' bed the I of Me in Sec with wh'

Nine year old Shireen can' ourun children f older than her to mother notes with a touch o Yet just an year ago she had sleepless nights wondering daughter would walk a Shireen injured by a hit and run after she got down from the sch bus, owes her active life to "Unc Raman" who picked up the tiny gir and rushed her to the hospital and the prompt medical attention she received at the state of the art emergency and trauma facilities at the Government Medical College and Hospital in Sector 32.

Raman, says he was amazed to see the speed and efficiency with which the girl was provided treatment. They put the patient first and left all form filling and questioning for later. Other visitors to the hospital are also pleasantly surprised as the hospital

Modern trauma centre at Medical College

CHANDIGARH, Aug 31: A 200-bed centrally air-conditioned trauma centre with all the modern gadgetry is coming up at the local Government Medical College. Doctors say that besides the facilities for managing routine emergency cases, there would be special arrangements for care of disaster victims who land in the hospital in large numbers.

The casualty ward will have a separate entrance and the ambulance can drop patients a few yards away from the main door.

The hospital also has a cardiac arrest room with all the equipment required for suscitating patients who have suffered sive heart attacks. Nearly 50 per cent can be avoided if the patients are gi ly treatment which includes electri with defribilators pace makers and life saving drugs. All such items would be available in the room.

A centrally air-conditioned 10-bed burns unit with washing facilities is also being provided.

Special cushioned transfer trolleys will be used as beds. The college principal Dr V.K.Kak, says that trolleys are convenient as the patient does not need to be lifted for taking an X-ray or surgery. "An X-ray film can be fitted under the trolley and its top can be removed and put on the operating table," he

There will be seven operation theatres ' orthostic facilities. doppler

equipped with a centralis of any emergency like alarms would start for t tion.

"There would be s diothorasic, neuro t emergency," po Malhotra, hea Medicine.

To mat three mo lances st will rema equipr Chavan fro para Dass from the ca College (MAM remaining depu to advertise pending wi vice C

FLASH

to rectify multir'
uced at GMC
rgeries being done
Sect 32 hospital

Tribune News Service
IANDIGARH, June 13
h-awaited surgical ope
e begun at the Sector 32
spital and the hosp
ilisation" in the s
ouched nearly 100.
Despite all this the
facilities like a chemist sho
ing the once allotted to
Bazaar authorities within
yet to open. Patien
nts wait for CTU
s at bus stand
from scorch

Rush at Sec 32

NAVEEN THUKRAL
CHANDIGARH

THE rush of patients at the out patie
departments (OPDs) of the De
opened Sector 32 Government M
College and Hospital has started

rding to official so
are being exp
hospi

nd to start soon.

V.K. Kak new medical college Principal

Tribune News Service
CHANDIGARH, June 29 —
Kak, Medical Superintend
Nehru Hospital of the P
be the new Directo
Medica

Hospital ready, faces staff shortage

By Prabhjot Singh
Tribune News Service

CHANDIGARH, May 29 — Work has been undertaken on a war footing to commission 200 of the 500 beds at the Sector 32 hospital on June 24.

Most of the support services at the new hospital will be run on a contract basis as the administration is yet to obtain sanction for the creation of new posts. These include security, sanitation, [illegible] the new hospital which will have 15 sisters, 10 to other [illegible] addition, part [illegible]

Within a week of its commissioning, the new hospital, unless the administration initiates steps expeditiously, will be rendered topless. The present ex-officio Secretary, Medical Education and Research-cum-Director-Principal of the Medical College, Prof J.S. Chopra, will retire on attaining superannuation. Professor Chopra, who is on deputation from the PGI, may prefer to go back to his parent cadre a few days before his formal retirement from service. His name also figures in the list of 10 senior faculty members of the institute who are being considered for the post of the Director, P.G.I.

The new hospital might be without a Medical Superintendent. Though the administration selected Dr A.C. Chaudhary of the Sector 16 General Hospital, who is on deputation from Haryana, for the post, his mention in a CBI case appears to have created a hurdle. Despite the fact that his parent cadre has cleared him of the initial charges framed by the CBI, the administration is yet to decide whether to appoint him or not. Though the selection committee also selected the Deputy Medical Superintendent of Rohtak Medical College Hospital as a standby, no decision has been taken so far.

Another senior functionary, Dr (Mrs) Kiran Chadha, who is Deputy Director, Administration, at Chandigarh Medical College, has been appointed Director in the Ministry of Commerce. She was asked to join immediately. It is learnt that the Adviser to the Administrator, Mr Vinod Duggal, has written to the Secretary, Commerce, to allow Dr Chadha to continue here till June 26 so that the commissioning of the hospital is not delayed.

As of today, by June 26, the Secretary, Medical Education and Research-cum-Director-Principal of the Medical College and the Deputy Director, Administration, will go and there is no Medical Superintendent. It will render the new hospital "topless" in its initial stages when it will be having teething problems. Staff shortage will add to the problem.

Further, the Chandigarh Medical College is yet to get approval from the Medical Council of India (MCI). Though the financial memorandum has been cleared in principle by the Union Finance Ministry, a formal sanction is yet to come. Once the clearance is received, a proposal will go to the Ministry of Health for the creation of posts of Professor and Assistant Professor.

The administration had invited a panel of names from Punjab, Haryana and the PGI for appointment of Director-Principal of the medical college. The new incumbent may be given the powers of ex-officio Secretary, Medical Education and Research, to the Chandigarh Administration, as held by Dr J.S. Chopra. Four senior doctors of the P.G.I. R.J. ap- the

GMCH writes to MCI on recognition issue

Tribune News Service
CHANDIGARH, Aug 27 — The authorities of the Government Medical College and Hospital (GMCH), Sector 32 here, have written to the Medical Council of India (MCI) saying that the case of permanent recognition for the college should be included in the agenda of the executive body meeting, [illegible] for September.

In a letter written to [illegible] authorities have [illegible] 11 new appo[illegible] today, thus me[illegible] MCI that ha[illegible] deputationists [illegible]

The other two [illegible] doctors, Dr (Mrs) K. S[illegible] working with an insti[illegible] Ministry of Defence in [illegible] and Dr Ashok Kumar wor[illegible] PGIMS, Rohtak, shall join [illegible] are relieved by their present e[illegible] ers. Once Dr Kumar joins, the pr[illegible] incumbent in the Chest Diseases [illegible] artment, Dr V.K. Maini, [illegible] utationist from Punjab, will be [illegible] ted to his parent cadre, sources

r these appointments, only re professors on deputation in at the GMCH. Prof S.B. n AIIMS and Prof Arjun (C) are two [illegible]

this issue alone. After the new GMCH author[illegible] favourable [illegible]

Joint replacem[illegible] surgery at GM[illegible]

CHANDIGARH, Nov[illegible] thopaedics Department [illegible] vernment Medical [illegible]

Medic[illegible]

:soo[illegible]

Chhibber okays GMC appointments

EXPRESS NEWS SERVICE
CHANDIGARH, AUG 26

DECKS have finally been cleared for the appointment of 11 professors in Government Medical College and Hospital in Sector 32, after the Union Public Service Commission declared their results late last evening. According to sources, the appointments would be made tomorrow as UT Administrator Lt Gen B.K.N. Chhibber (retd) granted his formal approval tonight.

The results, earlier kept pending by the UPSC following a court case, were declared after a Supreme Court ruling that there would be no reservation on single-cadre posts in GMC.

The interviews were held by UPSC from August to October last year.

Of the 11 professors to be appointed now, nine are already on deputation with GMC. The other two, Ashok Kumar and A. Nageshwari, are from Rohtak and Delhi, respectively.

Among the deputationist doctors selected are Harsh Mohan, D.P. Mehta, N.K. Goyal, K.K. Gomber, Raj Bahadur, Sarla Malhotra, Veena Panwar, A.J. Kanwar and Krishan Vij.

With the appointment of regular professors, the line is now clear for the recognition of GMC, pending by the Medical Council of India, the meeting for which is scheduled next month.

[illegible] superintending engineer S.K [illegible] was suspended following his convic[illegible] by the Central Bureau of Investigation [illegible] in an alleged case of corruption in [illegible] Chandigarh Administrator Advisor [illegible] Duggal is understood to have taken a [illegible] ncerned officials in May and [illegible] them to speed up the work. [illegible] Department officials are [illegible] pleting and handing over `A" [illegible] dical College authorities in [illegible] or-Principal of the College, that he had been assured that [illegible] would house the emer[illegible] ad the "D" block, which administrative block but [illegible] two weeks of the completed blocks to the college, he added. Chopra, who is also Secretary, Medical Education and Research to the Chandigarh Administration, asserted that every effort was being made to ensure that the 500 bed teaching hospital provided the best possible facilities to the patients in a most congenial atmosphere.

For this, the college was drawing upon the experience of senior doctors and nurses, both in the PGI and Sector 16 General Hospital and the advanced concepts adopted in private and government hospitals in other parts of the country, he said.

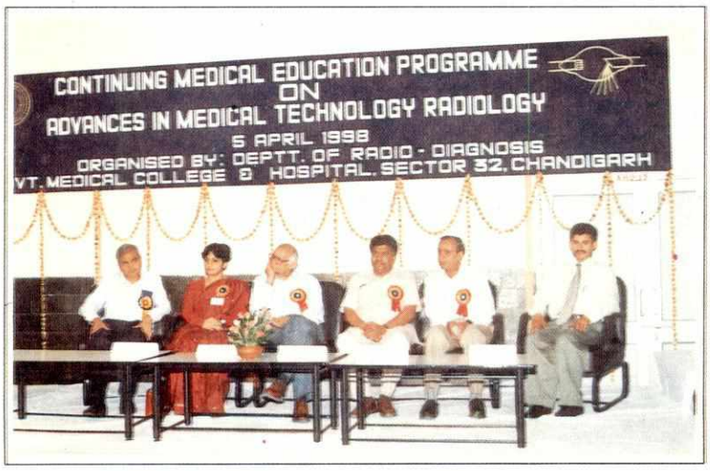
BACK

[illegible] had made a [illegible] following complaints [illegible] Kala — that Mani Majra recently, [illegible] Goyal and Mr Gurd [illegible] "step-motherly [illegible] body.

Academic Events

KEEPING PACE...

WITH THE...

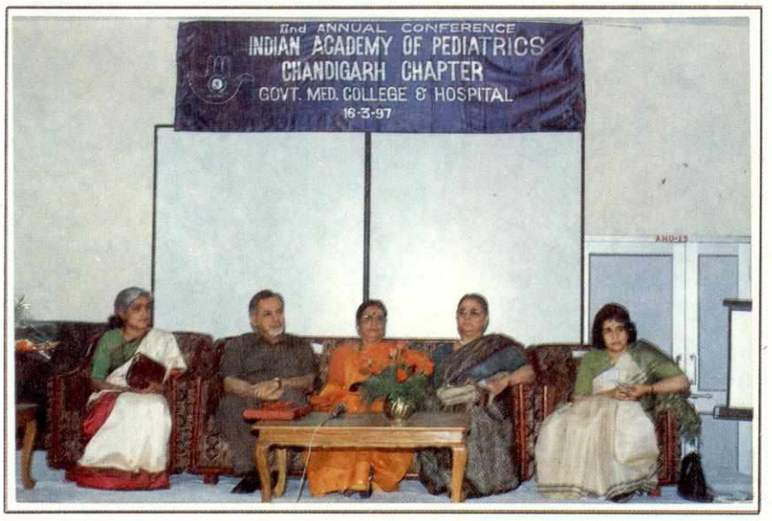


LATEST.

Academic Events

NW ZONAL CONFERENCE
OF INDIAN
ASSOCIATION OF
PATHOLOGISTS AND
MICROBIOLOGISTS, SEPT. '96

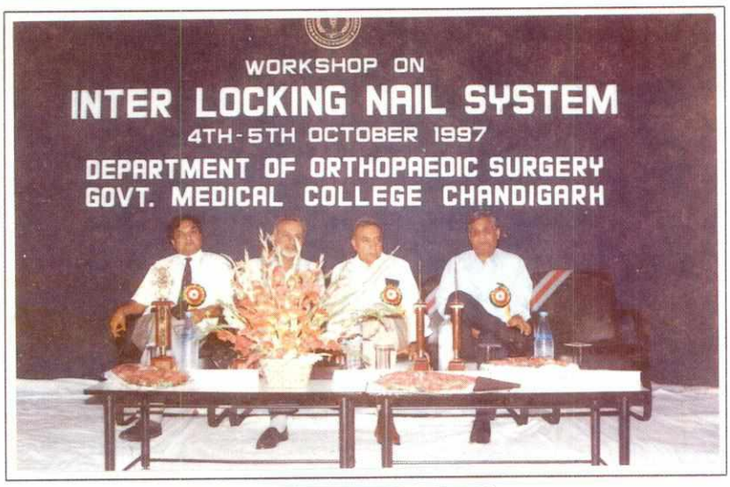
WORKSHOP ON
COLPOSCOPY
OCT., '96



II ANNUAL CONFERENCE
CHANDIGARH CHAPTER,
INDIAN ACADEMY OF
PAEDIATRICS, MARCH, '97

Academic Events

NUTRITION EXHIBITION-
ARE YOU ON A
BALANCED DIET ?



INTER LOCKING NAIL
SYSTEM -
'STATE OF THE ART'

NATIONAL
CONVENTION OF
MEDICAL LIBRARY
ASSOCIATION OF
INDIA DEC., '95

Annual Day Function -Sept. 94

PURANI JEANS AUR GUITAR...

VOTE FOR GHAGRA !

THE INDIAN
BEAUTY - NOT
JUST SKIN DEEP

It's Play Time, Folks !

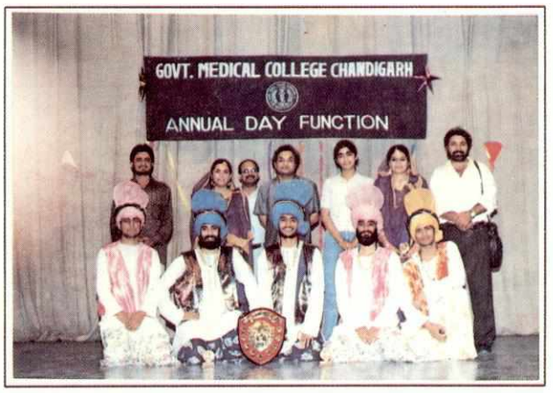
CHECK - MATE !

JO JEETA
WAHI SIKANDAR !

WHO PUTS IT IN FIRST !

Annual Day Function-Sept.'96

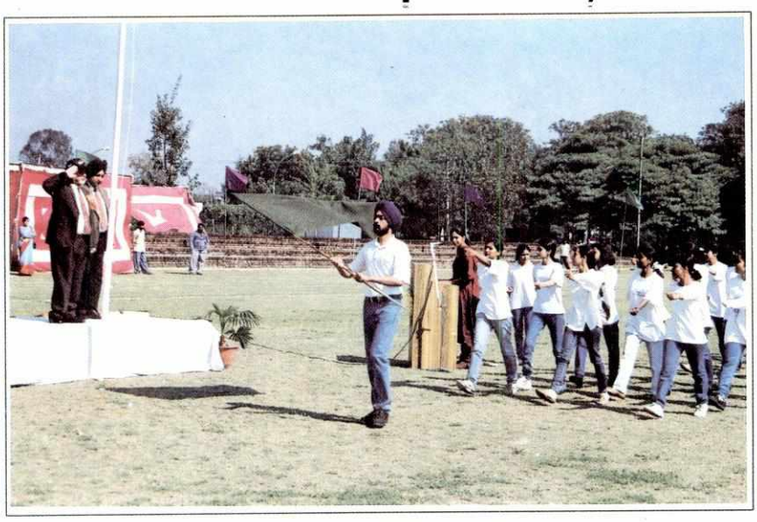
SARASWATI VANDANA



THE SPIRIT OF BHANGRA

RAJASTHANI DANCE -
COLOURFUL AS EVER !

Annual Sports Day - Feb. '98



TAKE OFF !

VICTORIOUS !

A HAPPY ENDING !

The Days That Were...

SWAGTTAM SHUBH
SWAGATAM

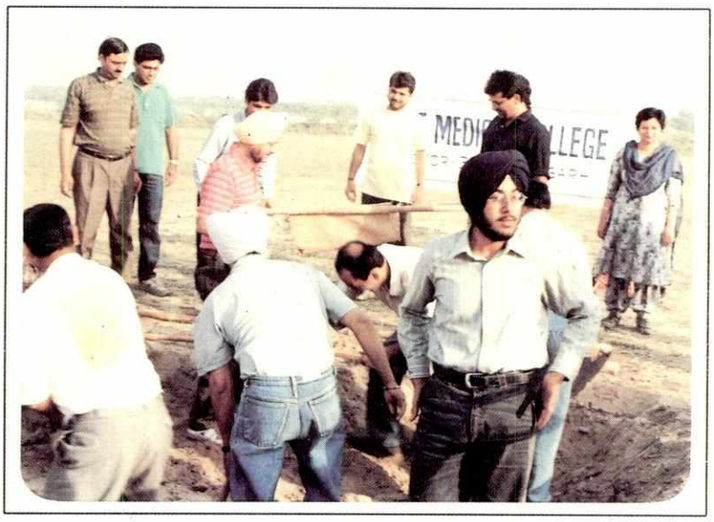
A WARM WELCOME

'THE CREATION' - WELL
CHOREOGRAPHED

Different Moods

RUN FOR THE CHAIR

SHRAMDAN AT SUKHNA
LAKE JUNE '94



VANDE MAATRAM

JUST THE SAME

Remember the last time you had an accident. How distressing it had been; how painful indeed. Remember how a slight dislocation of the wrist had troubled you for weeks. How difficult it had been to bathe, how difficult to dress up, how difficult even to eat. And how comforting then had been the presence of that noble person- Mr. Doctor.

Nearly 30% of Indians live (albeit exist) below the poverty line. Most of them, when they have an accident, have no doctor's presence to comfort them. The reason is simple - Mr. Doctor demands a fee.

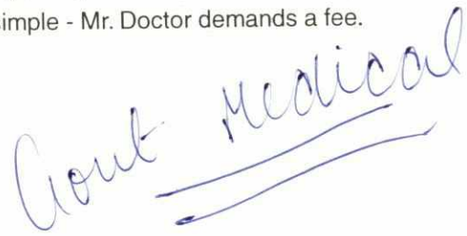
And why shouldn't he?

He has a family to support.

He has a status to maintain.

He has shoes that need a shine.

And he has a purse that demands a bulge.



When I decided I would be a doctor, the decision was borne more out of indecision. What tilted the balance in favour of medicine was an article by Dr. Christian Barnard which was part of our English curriculum in school. Although I had always been perturbed by suffering, at least half as much by others as by mine, it made me look at suffering in a different manner. And I took the plunge into medical stream, having decided that I will do at least something to free from suffering those who cannot afford to pay for that freedom.

Now, however, that I am in a medical college, I am increasingly realising something that is, by all means, depressing. After many months of introspection, and after many rounds of dialogue with the wouldbe doctors being shaped in this college, I have realised that the college is producing doctors who, though excellent in professional training and knowledge, will be just the same as thousands of doctors all over India and abroad - with little if any regards for the health of those who cannot afford to pay them. And, undoubtedly, I will be one of those, 'just the sames', too. Though many of us who do have good intentions right now, I doubt if those intentions will be able to survive the severe competition that the medical field presents. And I feel depressingly sure that we will be 'just the same'. Or is there hope?

Harmeet Singh
'96 Batch

❖❖❖

PETER'S PRINCIPLES

1) Every human being reaches his level of incompetence at some level.
2) Beauty is power; a smile is its sword.
3) That which is strikingly beautiful may not always be good; but that which is good is always beautiful.
4) We can't direct the winds, but we can always adjust the sails.
5) In case you are feeling happy, don't worry, you'll soon get over it.

Vikramjit Singh
'97 Batch

ABSTRACT

Feelings developing,
taking shape;
Assuring colours;
Thoughts being raped.
Then dark clouds
Black dots.
Polluted heart
Occult art
A second try
His face pries
Colourful paint
and lust for a saint.
Probing souls in black night
A touch of his mind and then all white.
Flipping through my mind
a new sect.
Colours and shape-
abstract.

Dr. Saloni Khatri Mehta
Ophthalmology

❖ ❖ ❖

BELIEVE IT OR NOT

1. The human eye can detect 500 different shades of gray.
2. APOLLO 8 astronauts used 'silly putty' -a children's toy-to hold down their tools while in space.
3. At the Sanwa Bank in Tokyo, Japan, currency notes are washed and sterilized before being dispensed from automatic lever machines.
4. One of the towers of New York city's Brooklyn Bridge is set on sand instead of bed rock.
5. The only colour a hedgehog can distinguish is yellow.
6. A book store in Tadmi, Japan, gave away over 25 acres of forest land in exchange for old books.
7. An elephant's ears stand straight up if the animal is frightened.
8. Iris Borgis of New York city gave birth to four identical baby girls - A one in eleven million occurrence.
9. During World War II, bubble gum was sold for $1 a piece.

Parul Mani Goyal
'95 Batch

FALSE PRIDE

When the moments of time and the destiny lines conspire,
When the truth of my small presence breaks the barriers,
Which behold my tears,
When unable to stand against the winds of change, I fall,
The transience of my existence dawns upon me,
When my altar of pride is swallowed by failure or fear,
When the jaws of my inability chew my dreams away,
When the treasonous beauty deserts my life and I,
Devoid of my Midas touch or the inherited treasure,
Lose my love,
And my life mocks at me,
I realize how wrong I was to swell with pride
for I am a mere human,
A tiny speck in the universe of life.

Mili Bhardwaj
'98 Batch

❖❖❖

If your head tells you one thing and your heart tells you another, before you do anything, you should first decide whether you have a better head or a better heart.

❖❖❖

Buying and reading a bad book is a little like having your pocket picked and your brain vacuumed.

❖❖❖

Successful men are those who build their foundation out of the stones thrown at them.

❖❖❖

A slip of foot you may recover, a slip of tongue you never get over.

❖❖❖

It's never too late, in fiction or in life, to revise.

DOCTORS JOINING CIVIL SERVICES

Before 1993, there were not many doctors who made to the Civil Services although once in a while, we did use to hear about doctors even amongst top echelons of the bureaucracy. Perhaps Civil Services had not fired their imagination as much as that of IIT graduates.

But after the introduction of Medical Science as one of the options, there has been a spate of medical students appearing in civil services. You won't believe, there are about one-third students every year from some Medical Colleges preparing for Civil Services. I will count every one medical student entering the civil services as one doctor scarified-added in fatality list.

Can you justify doctors joining civil services? Well, a similar question is going to be asked in the civil services interview exam. Govt. spends about half a million rupees for every MBBS graduate and by no means can a poor country like ours afford such a luxury.

Moreover if one was to become so much interested in civil services, what is the need to waste a seat in medical college.

- Regarding the reason for joining civil services some of quoted reasons are
- Power, status, prestige.
- To get directly associated with development activities underken by the government.
- Richness and variety being afforded by the job.
- Promotional avenue.
- Desire to remain at top level in an organization.
- A genuine desire to serve (joking?)
- Special liking for a job e.g. police (IPS)
- Foreign travel (IFS)
- Nuisance and money (IRS)

Are you convinced? Not at all. Well, some intelligent students may argue that their medical degree may be treated as an "asset" and not a liability. If given the health portfolio, they may be able to serve the community better. That is a separate story that they may have never attended their peripheral rural posting in Community Medicine.

In my opinion, real reason of people joining civil services are :

- Love for money
- Feudal mentality of educated middle class to use it as springboard for joining political career later.
- Family pressure.
- To ensure hefty dowry.

Most likely, civil services conjure up a vision of unlimited authority and power especially among the youngsters who are at best exposed to TV serial, on civil servants, gossips relating to bravado of police, custom or Income tax officials and celebrity shows highlighting life styles of IAS, IFS, IRS and IPS officers.

The reasons behind doctors being sucked into civil services is not diffiicult to fetham. After graduation, getting a seat for MD/MS in a top level institution like PGI and AIIMS and that too in a branch of your own choice is no easy task. Even if you are able to get such a breakthrough, your job career is still not secured unless you have made up for a private practice. However, a Junior/Senior Resident has to struggle much more than any beauraucat at any level. Still, the road of success to fulfil their cherished dream remains distant.

Doctors have been lured by the glowing red lights on cars, paraphernalia associated with them, high headedness which they maintain. And with stagnation in the ranks of medical field taking its toll, doctors feel frustrated.

Is it not frustrating that a young IAS officer of little experience is being invited to inaugurate a blood bank/library in the college premises when there are more than ten professors with more than twenty years experience? Isn't it frustrating that a private room is denied to a relative of medical student and allotted to a relative of a Civil Servant? If doctors are not interested in administration then why many doctors apply for post of Medical Supdt./Principal of the college leaving behind their OPD's and operation theatres.

The British had introduced the civil services under the name- Imperial civil services for their own convenience and allowed civil servants to be the rulers of the people. And even after fifty years of independence, with Imperial CS changing to Indian CS and rulers refined to as public servants, the characters remains the same. It has gone deep to such an extent that a notion has become 'Govt. service in India-Civil Service'. Where is this going to lead us? Unless we explode this myth, the trend of doctors joining civil services is going to continue.

And I again say, 'one medical student selected - one doctor sacrificed - added to fatality list'. And to your disbelief, I am also heading towards this fatality list.

Dr. Dinesh Arora
Intern

❖❖❖

PARKING - SENSE

God Almighty has gifted us with so many fine senses like visual sense, hearing sense, smell sense, taste sense and so on and so forth. In spite of all this sometimes we have a negative sense that is non-sense. I think, this is high time that we stick to letting good sense prevail on us. Remember, when we had a common parking place we struggled inch for inch to park the vehicle but now since the whole parking lot available for cars only, we think we can stretch upto any limit. This attitude is against the old age saying ''उतने पैर पसारिए, जितनी लम्बी चादर होए'' The exercise is very simple and there vehicles can be easily adjusted between two poles. Closer we stand, more united we are !

So, how do you like the idea?

Dr. Praveen Mohan
Obs. & Gynae

❖❖❖

Ther is too much said for the sake of argument
and too little said for the sake of agreement.

❖❖❖

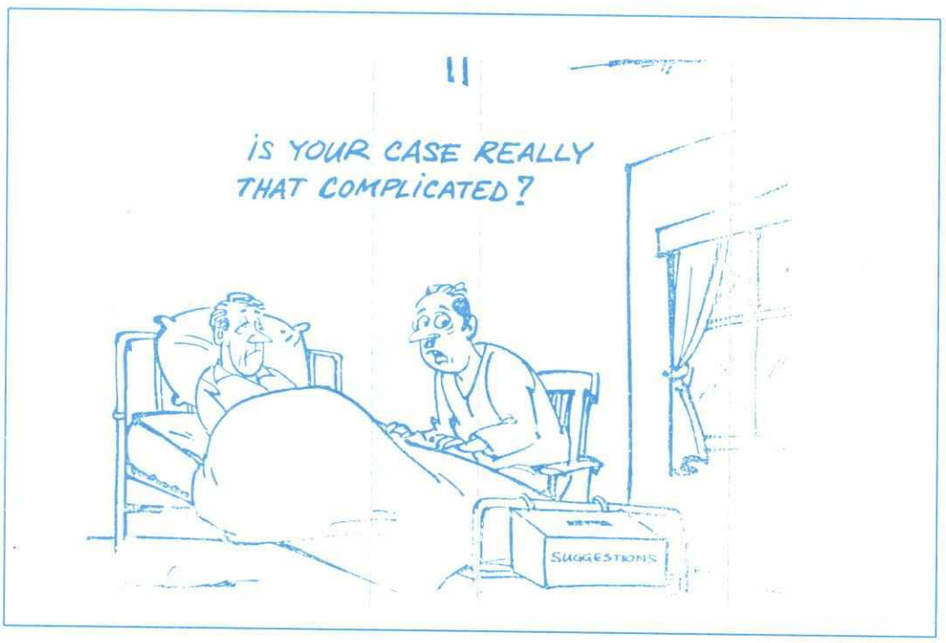
Do not go to a doctor who places his stethoscope on your wallet.

CREMATED WEDDING

All insufficient reasons for lifetime commitment,
But with him, she takes the wedding vows.
For a consolidate future - a new vent,
For her, just a destructive achievement.
What is there in a designed relationship,
Compassion, humanism, sympathy mingled with vague passions;
Or just a physical obsession?
So impersonal-her bonded liberation!
They live together in prison of their existence;
In chains of their relation with souls apart.
Making love in loveless night.
They have to spend a lifetime together
without touching each other's lives.

Dr. Saloni Khatri Mehta
Ophthalmology

Prof. K.K. Gombar
Anaesthesiology



Prof. K.K. Gombar
Anaesthesiology

FEELINGS

Though smiling at face,
But crying bitterly at heart.
They go on my visage,
But never know what is in my heart.
I want to pour my heart,
But to whom should I pour.
Oh God! I need someone,
with whom I can share my feelings,
Or who can understand me.
Do send him to me
For he is to be made only for me,
I need him, I need him, I need him.

Jaspreet Kaur
'97 Batch

❖❖❖

To be born a gentleman is accident, to die as a gentleman is an achievement.

MANAGING THE QUESTION ANSWER SESSION

As any of the seminar givers will tell you, it is not the seminar which one dreads but the Question-Answer session that follows it. There are 3 main types of question asking persons (QUAP).

i) IBD (Itch in Back Doctors).

ii) STD (Showy Type Doctors).

iii) PPD (Permanent Problem Doctors).

Here are solutions to these QUAPs who haunt you while preparing for a seminar. We will tackle them one by one.

(1) IBDs (Itch in the Back Doctors)

This QUAP sincerely believes that he can learn by asking questions.

It's good if you know the answer, otherwise an easy way to deal with them is to rephrase the question into a two line answer and quietly say that the issue being a tedious one, requires a detailed discussion.

Then refer a book for further study (preferably not easily available).

If the QUAP is still persistant, refer the question to your esteemed teacher.

(2) STDs (Showy Type Doctors)

This QUAP is a peculiar one. He asks the questions only to emphasise his better grip on the subject rather than the speaker. This QUAP makes long statements about the subject and his monologue ends with phrases like :

(i) What do comparative American studies show?

(ii) What other animals have been shown to suffer from same disease?

While dealing with these QUAPs avoid two temptations:

(a) Do not ask him to repeat the question.

(b) That you did not say what he says you said.

The Golden rule is "If you can't convince him, confuse him."

You can always make a very long statement misquoting what he said and thus confuse the whole issue. But if this QUAP is not an easy one to be fooled (they usually are), complement the QUAP for an excellent question and assure him that many other experts have the same opinions and then very quietly tell him that what he said was really a complementary aspect and not the contradiction of what you said. This will probably make everybody happy.

(3) PPDs (Permanent Problem Doctors)

This QUAP is most difficult to handle. This QUAP is very academic and has a real indepth knowledge of subject. Be warned friends, "Never get into a theoretical argument because in David vs Goliath, David wins only in mythology books and not in reality. Use the practical(ly) approach, use statements like, "Sir, in practice, this theoretical concept is not always true, and practically this is a better approach. But of course, sir, we would love to learn more about your experiences". This will in all probability pass the buck to him. But if this also fails, please keep your mouth shut, keep your fingers crossed and hope for the best.

Regrets for not including FUN TYPE DOCTORS (FTDs), who ask question just for fun of asking. But as these are few in number and generally harmless, no special precautions are needed.

We hope these tips will make you better equipped to handle seminars; and, of course, there is always a sadistic solution - TURN A QUAP YOURSELF

Dr. DBS Deo
Dr. Rohit Jindal
Interns

COMMON COLD

It came all of a sudden,
no warning, no portent of nature
to announce, what was to befall
that poor hapless creature.
Atishoo.....atishoo.....,
He steadied his shaken self,
As he wondered if his nose
Was at last free from the mischievous elf.
It was unnecessary, uncalled for,
Well, it was just a common cold.
"But can't neglect my health,
After all, that's how you get old".
So soon found himself sucked
Into the red crossed plantation;
Sucked in, all right but that's it,
for no branch ever offered an explanation.
Outnumbered by his own sheer numbers
He waited for the call that would never register,
Waited, almost indefinitely, until.....
"Well, you can come in mister".
"Hello mister, so what's your name,
Or just leave it, after all, what's in a name;
Now outdo your clothes and outdo yourself.
For whosoever comes here must do the same.
And then, what rained upon him
Well, it was his darkest hour in life,
That day it rained not cats and dogs
But needles, drips, syringes and knives.
What would never come when finally came,
The discharge letter, that is,
And when he finally did pass out,
Out of the college that is,
O, what a model man he had become
With bones of steel, a prosthetic heart of gold,
And no ailment to trouble him ever
Except for..... er..... the common cold.

Harmeet Singh
'96 Batch

I AM THE DOCTOR IN BORN

The way I cruise through streets,
The way I dress up like hell,
The way my spectacles tumble every now and then,
because as they say-
'I am the doctor in born',
The way I'm always seen with books,
The way I stare at people with terrible looks,
The way I enact possessing an air of authority,
because as they cry-
'I am the doctor in born'.
The way I smother other's wishes so mercilessly,
The way I take decisions so callously,
The way I run away from the hospital so swiftly,
It only portrays-
'I am the doctor in born'.
The way I surrender to hard times in stone,
The way I demand for more and more,
The way I take breaks so frequently,
as few say-
'I am the doctor in born'.
The way I bring a ray of hope in lost minds,
The way I set the tone to new highs,
The way I teach the crying soul to smile,
because as they say,
'I am really a doctor in born'.

Ankur Bindal
'97 Batch

There are two kinds of graduates :
Those who have learnt how to learn ; and
those who have learnt how to think

THE VOICE OF ETERNITY

The sound made on this earth,
and the cry that came with my first breath,
Has not yet become the true laughter,
I hope it turns into it before death.
The childhood dreams soon passed,
The age came when I really knew,
What I was, what I had to do,
My mind gathered the future view,
The dream of becoming great one day,
of shining like a star in the sky,
Reaching my goals with the finest colours,
Doing something before I die,
All this I had thought that day,
I sat to write it all down here,
So that I'm remembered of my own.
Whenever my heart is filled with fear
The aim of becoming immortal,
of making them proud of their eternity,
of learning this world with a winner's head
Will be remembered for eternity.

Pooja Malhotra
'97 Batch

❖❖❖

What is a vision?
It is a compelling image of an achievable future.

❖❖❖

We come to love not by finding a perfect person
but by learning to see an imperfect person perfectly

HUMOUR

☹ "Oh, so you do bird imitations, do you?" asked the circus manager.
"What kind of imitations" The applicant replied, " I can eat worms"

☹ Sign in a pet shop window-
For Sale. Pedigree Bull -dog, house trained, well mannered
Eats anything, very fond of children.

☹ Why was the crab arrested?
He was always pinching things.

☹ First Boy : My brother has been practising the violin for 10 years.
Second Boy : Is he good ?
First Boy : No, it was nine years before he found out that he wasn't supposed to blow it.

☹ What happened when the axe fell on the car? there was an axe-i-dent!

☹ Knock-Knock
Who is there
Aleu
Aleu who?
Aleuplain later

☹ Lila : You know, I'm the teacher's pet.
Mona : Good gracious, can't she even afford a cat?

☹ How can you make a witch scratch ?
Take away her 'w'

☹ Patient : Doctor, Doctor I need glasses.
Butcher : You certainly do, this is a butcher's shop.

☹ Does an apple a day keep the teacher away?
It does if you aim correctly.

☹ Customer : This restaurant must have a very clean kitchen.
Manager : Thank you, sir, what makes you say that?
Customer : Because everything tastes like soap!

☹ Why are musical instruments unemployed?
Because they only know how to play.

☹ Teacher : Chottu, can you name four members of cat family?
Chottu : Of course! Father cat, Mother cat and two baby cats.

☹ What does the monster eat after tooth-extraction?
Dentist!

☹ Ring around a neutron,
A pocket full of protons,
A fission a fusion,
we all fall down.

☹ What do you get if you cross a hedge hog with a giraffe?
A ten foot long toothbrush.

☹ What is a skeleton?
Bones with a person off!

☹ Little girl at fruit store with banana peel in her hand.
"What is it you want, darling?" said the vendor
"A refill" was the reply.

☹ "How can I be a great man like you?"
"Why be a great man?" said the master. "Being a man is a great enough achievement".

☹ "How did you get that beautiful black eye" John asked Bill
"My wife" Bill replied glumly
"But," John insisted, "I thought your wife was out of town,"
"That's what I thought too, "said Bill.

☹ Nervous patient : "Doctor, I often feel like killing myself. What shall I do?"
Doctor : "Leave it to me!"

☹ Patient : "I'm scared. This will be my first operation.:"
Doctor : "I know how you feel. This is my first operation too."

☹ One day Alfonso rumbles up in his truck to the ranch next door. "Don Luis," he says. "Four of my cows are in heat, and since I have no stud, I've brought them over to see if your bull will mate with them."
"It'll be a pleasure, my friend." Don Luis replies. "Come into the house. We'll have a tequila while they mate."
When it's time for Alfonso to leave, he asks, "How will know if the cows are pregnant?"
"Easy enough," replies Don Luis, "if you find them lying down first thing in the morning, it means they are."
The next day a despondent Alfonso returns with his cows because not one got preganant.
"Not to worry," says Don Luis reassuringly. "Leave them with the bull again."
The next day it was the same story, and the next and the next. One morning before down, Alfonso's wife shakes him excitedly. "Wake up, dear, it's the cows!"
"What? Are they lying down?"
"Nothing of the sort. They've all got into the back of the truck and they're honking the horn!"

GREAT SAYINGS

A man's best friends are his ten fingers. - *Collyer*

Do not hate if you cannot love. - *Christ*

The shame is in crime, not in punishment. - *Voltraire*

The smaller the head, the bigger the dream. - *Austinomalley*

Small deeds done are better than great deeds planned. -*Peter Marshall*

Nature has given us two eyes but one tongue to the end that we should hear and see more than we speak.
- *Socrates*

A country is strengthened not by great men with small ideas but by small men with great ideas. -*Unknown*

If you want to reach the highest, begin the lowest. -*Syrus*

There can be no rainbow without a cloud and storm. - *J.N. Vincent*

Error is discipline through which we advance. - *Channing*

Great minds have purposes, others have wishes - *Irving*

The commonest, one of the most often neglected and the safest form of opportunity for the common man to seize, is hard work. - *Francis Bacon*

Consider a postage stamp - its usefulness lies in its ability to stick to one thing till it gets there. - *J.F. Kennedy*

Silence is a great art of conversation. -*J.L. Nehru*

The best way to have a good friend is to be one. - *Emerson*

The grand essentials of happiness in life are- something to strive for, something to love and something to hope for

- *Thomas Carlyle*

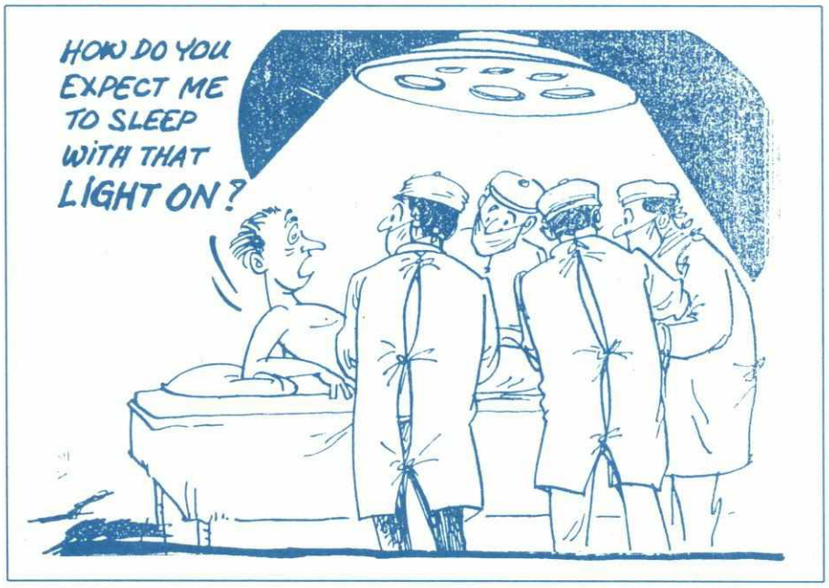
Laughter is the sun that drives winter away from the face. - *Oscar Wilde*

If a man empties his purse into his head, nobody can rob him. - *Benjamin Franklin*

ARMOUR

Silence is no more my defence.
Now you mutely pray,
And slowly demolish your castles of clay.
Lovingly, I adorn the flesh of my ideas-hurt by cold.
Your voice came, but so late.
Who cares for blossoms now;
Forever springs never wait,
Though sun ornates its throne in your noon,
But I don't want to scorch.
I'd rather live beneath the ecstasy of moon.
But its a masquerade.
Hiding emotions and resisting temptation of dying in your arms,
Silence is no more my defence.
But who knows my art?
Will my mind ever allow me,
to surrender my heart.

Dr. Saloni Khatri Mehta
Ophthalmology

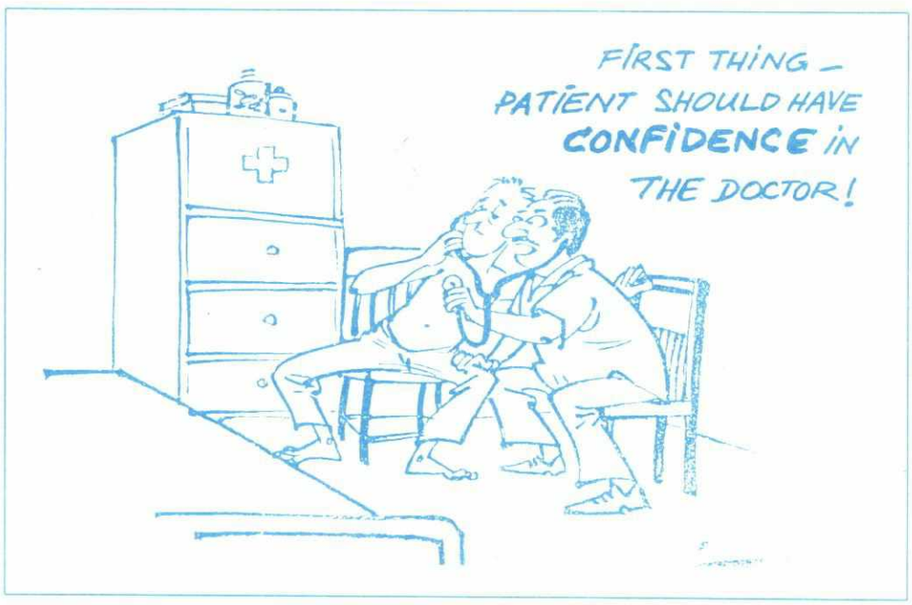


Prof. K.K. Gombar
Anaesthesiology

DREAMS

In a sleepy hamlet, Near the cascading stream
A pair of eyes dream, Dream of happiness
Dream of joys, Dream of a better life.
Clad in rags, His body shivers in the cold.
His empty stomach wails for want of food, Still he dreams
Dreams of a better world, For dreams are not captive,
Dreams cannot be snatched, Money may buy the whole world,
To buy dreams is beyond power of wealth,
Dreams colour the canvas of life.
Dreams bring words to the mute,
Dreams like a flicker of happiness, bring a smile on that wrinkled face.
Even those hazy eyes, With clouded vision dream
For dreams create lives,
So a pair of eyes in this inhospitable night dream of a new dawn
The dawn realising the cherished hope of a better world...

Mili Bhardwaj
'98 Batch



Prof. K.K. Gombar
Anaesthesiology

CLINICAL DEPARTMENTS में पहला कदम!

साफ सुथरा overall पहन, गले में stetho लटकाया
मां बाप से आशीर्वाद ले, OPD में पहला कदम बढ़ाया।
Patients की भीड़ मेरी ओर क्यों लपकी, मैं नहीं जानता
''वाह बेटा Doctor बन गया, हमें ही नहीं पहचानता''
एक ही दिन में मेरे कितने ही रिश्तेदारों ने लिया जन्म
दुर्भाग्य या सौभाग्य, Clinical Departments में था पहला कदम!

''Routine Check-up के लिए आया हूं'' पहले Uncle ने फरमाया
''Card बनवाया है क्या?'' मेरी ओर से उत्तर आया
Uncle घूरे, फिर मुस्कुराए ''बेटे तेरे कोट का क्या फायदा?''
मैंने कहा, ''Uncle कुछ तो चलता है कायदा।''
खैर मैं उन्हें Sir के पास ले जा धमका
पर मेरा माथा तब ठनका
जब Sir ने पूछा ''What do you think?''
"Sir, New Third Year" I replied with a blink.
Sir मुस्कुराए
मुझे लगा उन्हें अपने दिन याद आए
मेरी कामयाबी पर घर वाले मना रहे थे जश्न
दुर्भाग्य या सौभाग्य, Clinical Departments में था पहला कदम!

Relatives से पीछा छुड़ा मैंने Eye Deptt. में कदम बढ़ाया,
Ptosis का मरीज देख ''ये तेरी आंखें झुकी-झुकी'' गुनगुनाया
Ortho Department में हम लटके-झटके करते रहे
बेचारे मरीज अपने Fracture ले कर मचलते रहे
Psychiatry Department में अपने ही यारों से हुई मुलाकात
मरीज़ किस ओर है कुछ ऐसे उठते थे सवालात
वो हमें और हम उन्हें समझने का करते रहे यतन
दुर्भाग्य या सौभाग्य, Clinical Departments में था पहला कदम!

घुमा फिरा के भाग्य हमें Paediatrics में लाया
जहां एक बच्चे ने रो-रो कर आसमान सिर पर था उठाया,
मम्मी बोली, ''बेटे, Dr. Compu से Examine करवाएगा?''
मैंने सोचा, ''ये आया किसी भी तकलीफ से हो, Insomnia ले कर जाएगा।''
"Compu बच्चे तो Blah Blah Blah Blah से ही ठीक हो जाते हैं,

हम तो अभी खुद बच्चे हैं, चल Cold Drink पी कर आते हैं''
Canteen में सुमेश को पढ़ता देख हम हो गए Depress
वो बोला 'यार, Housies बहुत Smart हैं, उन्हें भी तो करना है Impress'
पढ़ाई करने का ये Reason मुश्किल था करना हजम
दुर्भाग्य या सौभाग्य, Clinical Departments में था पहला कदम!

Surgery Department में जब हमने पाया प्रवेश
वो Guinea Pigs ही थे, Patients का भले हो वेश
इससे पहले कि Budding Surgeon Dr. D B S Deo से Examine करवाना,
Hernia का Patient अक्सर Ward से ही गायब हो जाना
और जो Sir ने Plain X-ray Abdomen पर हमें Ileum, Jejunum, Colon दिखाया
वो उनकी Illusion थी या हमारी कोई नहीं जान पाया

Surgery से Take off करके हम ने Medicine में कदम बढ़ाया
यहां Guinea Pigs में कुछ शेरों को भी बैठे पाया
खैर Butter Dinesh ने कुछ पल शेरों के साथ बिताए
और शेरों को Nude Mice बना ले आए
हाए! वो Patient की Chest पर एक साथ रखे 15 Stethoscope
अच्छा भला Patient भी सोचने लगता 'There is no hope'
Auscultation में हम ये कभी न जान पाए,
वो Crepitations थी या सहयोगी मित्र की Percussion Try.

अब समझ आया लोग Teaching Hospitals में क्यों हैं आने से घबराते
बड़े - बड़े Doctors का नाम हैं सुनते, लेकिन हमें हैं सामने पाते
लेकिन बड़े Doctors भी इस Stage से गुज़रे होंगे ये मेरा है Impression
दुर्भाग्य या सौभाग्य, Clinical Departments में था पहला कदम!

Patients को Research Material नहीं इंसान समझो,
वर्ना तुम पछताओगे
आज भगवान हो उसकी नज़रों में तुम,
कल हैवान बन जाओगे।

डॉ. निपुन विनायक
इन्टर्न

इजाज़त तो दो

अगर चाहो तो छा जाएं आसमां पे काली घटा,
अपनी जुल्फ को खुल कर बिखर जाने की इजाज़त तो दो।

हम भी देखें अंधेरी रात में चांद कैसे निकलता है,
अपने रूख से परदा हटाने की इजाज़त तो दो।

बहार आ जाएगी पल भर में, पतझड़ के मौसम में भी,
अपने आंचल को हवा में लहराने की इजाज़त तो दो।

बचा कर रखूंगा तुम्हें जहां की बुरी नजरों से,
खुद को मेरे दिल में छुपाने की इजाज़त तो दो।

जहां क्या चीज़ है, जुदा कर सकेगा न खुदा भी हमें,
मुझे अपना हाथ थामने की इजाज़त तो दो।

दूर है मंजिल तो क्या, उसे पा ही लेंगे हम,
मुझे अपना हमसफर बन जाने की इजाज़त तो दो।

तय कर लेंगे हम चाहे कांटों से भरा हो सफर,
ले आऊंगा खुदा को भी ज़मीं पर, मुझे अपना साथ निभाने की इजाज़त तो दो।

छोड़ने हैं इश्क में आशिक घर बार, तो क्या, छोड़ दूंगा ये जहां भी मैं तो,
लेकिन जन्नत में भी अपना साथ निभाने की इजाज़त तो दो।

है गर अंधेरा तुम्हारी राहों में, तो भी रास्ता दिखाऊंगा तुम्हें,
मुझे जलकर शमा बन जाने की इजाज़त तो दो।

विशाल सिंगला
'94 बैच

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"ज़िन्दगी"

ये जो ज़िन्दगी मिली है,
ऐसी इसे बनाये
आओ करें हम नेकी,
न बदी की राह में जाये
ये जो ज़िन्दगी.....
जो भला करें किसी का
तो भला हमारा होगा,
न करें हम बुराई,
न पाप के पास जायें
ये जो ज़िन्दगी....
मिलें चाहे गम जितने भी
हंस कर उसे सहें हम,
मिले राह में जो दुश्मन भी
हंस कर गले लगायें
ये जो ज़िन्दगी....
गर आए कभी वक्त ऐसा
देश हित की खातिर देनी पड़ी कुर्बानी
तो बलिदानियों में भी अपना नाम
सबसे पहले आए।
ये जो ज़िन्दगी.....
लाखों गमों से बढ़कर
है क्षण इक खुशी का
ये जो समय मिला है हमको
इसे व्यर्थ न गंवायें
ये जो ज़िन्दगी.....

नवीन कोहली
माइक्रो बायोलॉजी विभाग

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आशा

श्रुति आज बहुत खुश थी। उसके मामा ने उसे एक प्यारी सी गुड़िया ला कर दी थी जिसका नाम उसने रखा था - आशा। माता - पिता की इकलौती संतान श्रुति के लिए आशा केवल एक खिलौना नहीं थी। उस बेजान मूक गुड़िया के साथ श्रुति का अटूट बन्धन बन गया था। वह दिन - रात उसे अपने पास रखती, उसके साथ सोती, खाती और खेलती थी। ''मां देखो, आशा बीमार हो गई थी, मैंने उसे इन्जेक्शन लगाया और वह बिल्कुल ठीक हो गई। आशा तो इन्जैक्शन का नाम सुनते ही रोने लग गई थी, पर मैंने उसे समझाया कि बहादुर बच्चे ऐसे नहीं डरते'' श्रुति ने अपनी मां से कहा था। बचपन के इस खेल ने अनायास ही श्रुति के मन में डॉक्टर बनने का ऐसा बीज बोया जो अन्कुरित हो एक विशाल तरू के रूप में प्रफुल्लित हो गया।

समय अपनी गति से चलता गया। अपने कठोर परिश्रम और लगन के बल पर श्रुति ने मैडिकल कॉलेज में प्रवेश पाया। आज उसे चिकित्साशास्त्र की डिग्री प्राप्त हुई थी। हर्षोल्लास से युक्त वह अपने कमरे में आशा को लेकर बैठी थी। तभी मां कमरे में आई और बोली, ''श्रुति अब तुम इतनी बड़ी हो गई हो, अब तो गुड़ियों के साथ खेलना छोड़ दो।'' यह सुन श्रुति केवल मुस्कुरा दी। आशा मात्र एक गुड़िया नहीं थी। वह तो उसकी प्रेरणा थी। बचपन में खेल - खेल में वह जैसे आशा की हर बीमारी का इलाज कर देती थी उसी प्रकार वह जीवन में भी मानवता को रोगमुक्त करने में प्रयत्नशील रहना चाहती थी।

एक दिन संध्याकाल के समय कमला श्रुति के पास आई और फूट - 2 कर रोने लगी। कमला उनके यहां सफाई करती थी। उसकी बेटी आशा तीन दिन से बहुत बीमार थी। श्रुति उसके करूण रूदन को सुन उसकी बेटी को देखने चल दी। उसकी टूटी हुई झोंपड़ी में जब पहुंची तो एक हृदयविदारक दृश्य देखा। सामने चारपाई पर बुखार और दस्त से पीड़ित निर्जीव प्रतीत होती एक बच्ची पड़ी थी। मां ने बताया कि उसने तीन दिन से कुछ नहीं खाया था। श्रुति ने झट से उसे दवाईयां लिख कर दीं और कुछ पैसे भी दिए। उसे ठीक प्रकार से खाना देने की हिदायत देकर जैसे ही वह जाने लगी तो उस निर्जर देह से आवाज़ आई, ''मां मुझे एक गुड़िया लाकर दो ना।'' श्रुति सारी रात सो नहीं पाई। आशा का रोगपीड़ित भोला सा चेहरा और अत्यन्त बीमार होने पर भी एक खिलौने की ललक श्रुति को सताती रही।

सुबह होते ही अपनी गुड़िया आशा को ले वह उस झोंपड़ी की ओर चल दी। वहां अंजीब सन्नाटा था। अन्दर गई तो देखा की आशा सो चुकी थी, कभी न उठने के लिए। वह अवाक् रह गई। उसकी मां हारी हुई सी एक कोने में बैठी थी। रोने तक की हिम्मत नहीं थी उसमें। चोट के निशान अनकही व्यथा सुना रहे थे। उसका शराबी पति रात को झगड़ा कर सब पैसे ले गया था। पत्नी और बीमार बेटी को उसने खूब पीटा था। आशा यह अत्याचार सह नहीं पाई। श्रुति यह सब नहीं सुन पाई। हाथ में पकड़ी आशा उसे एक अस्तित्वहीन निर्जीव गुड़िया लगी जिसे वह वहीं छोड़ कर चली आई।

निढाल मन से वह घर पहुंची। उसका मन अन्तरद्वन्द्व के वेग के साथ बह चला। 'क्या आशा मर गई'? क्या मेरी प्रेरणा हार गई? मैंने तो उसे बचाने का प्रयास किया था। किस से? रोग से? पर वह तो शारीरिक रोग से नहीं समाज के रोग रूपी भंयकर राक्षस का ग्रास बन गई थी। नहीं - नहीं। मैं आशा को हारने नहीं दूंगी । मैं उसे हर रोग से बचाऊंगी। फिर चाहे वह शारीरिक हो, मानसिक हो या सामाजिक। यह सोच एक नवीन रूप धारण किए आशा की वही किरण फिर उसके अन्तर्मन में प्रज्ज्वलित होने लगी। पर इस किरण में एक नया उत्साह, नया विश्वास था। आज उसके कर्तव्य को नया आयाम प्राप्त हुआ था। वह उठी और अपनी आशा को वापिस लाने के लिए चल दी।

शैलजा
'96 बैच

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आत्मकथा

ग्रहों की थी कुछ ऐसी माया,
बचपन में बस्तों का बोझा उठाया,
गणित जंचा नहीं, इतिहास पचा नहीं,
पिताजी ने उकसाया, तो मेडिकल अपनाया
कॉलेज में पड़ते ही कदम,
सहने पड़े सीनियर के सितम,
पढ़ना - 2 अटक गया, गलत दिशा में भटक गया,
कविता करना सीख गया, एक बार में चीख गया,
एक दिन होले - 2, कॉलेज के लड़के बोले,
यार किसी पे मरते हो, प्यार किसी से करते हो,
यूं तो भोले दिखते हो, कविता कैसे लिखते हो,
मैंने उनको बतलाया, बहुत बार ये समझाया,
दर्द पेट में होता है, अन्दर कोई रोता है,
खाना ठीक नहीं पचता है, कवि तब कविता रचता है,
उनको नहीं यकीन हुआ, एक रोज़ यह सीन हुआ,
एक कन्या पास आई, कुछ सकुचाई कुछ मुस्कुराई
बोली, यूं तो सुंदर दिखते हो, कविता कैसे लिखते हो,
मैं बोला हे चन्द्रमुखी! मैं जीवन से बड़ा दुःखी,
दर्द उठाए फिरता हूं, ठोकर खाए फिरता हूं,
तुम कॉलेज में आती हो, दर्द मुझे दे जाती हो,
नाम तुम्हारा खुद लेता हूं, कागज़ पर लिख देता हूं,
कविता खुद बन जाती है, आंसू से सन जाती है,
हंस कर कन्या चली गई, वो मिश्री की डली गई,
राम जाने कौन सी गली गई
मुझको उससे प्यार हुआ, शनि देव का भार हुआ
फिर ऐसा तूफान चला, प्रोफेशनल ऐग्ज़ाम चला,
फेल हुई फूलवती, संग सफलता हुई सती,
मैं ऐग्ज़ाम में पास हुआ, कैसा सत्यानाश हुआ,
पी.जी. में वो आ न सकी, मुझको वो पा न सकी,
मैं पढ़ने में पक्का था, लेकिन विरह का धक्का था।

मैंने पोथे नहीं रटे, अंक आए तेतीस बटे,
पिताजी ने कहा बेटा, तू तो निकला बिल्कुल अपलेटा,
मैं बोला हे पूज्य पिता, माफ करो तुम मेरी खता,
भारत मुझको जचा नहीं, ज्ञान यहां का पचा नहीं,
पैरिस मुझे भेज दीजिए, एक रिस्क ये भी लीजिए,
वो बोले तू नालायक है, क्या तू पैरिस के लायक है,
जो भारत में फिट न हुआ, रंग बदल के गिरगिट न हुआ
वो पैरिस क्या जाएगा, क्या करके दिखलाएगा।
मैं बोला लंदन की वो आबोहवा, कर देती है जादू सा,
गधा यहां से जाता है, घोड़ा बन के आता है,
टट्टू खच्चर जाते हैं, सब डॉक्टर बन जाते हैं,
वो मेरी एक न माने, सदा रहे भवें ताने,
चक्की में पिसता हूं, सूखा चंदन घिसता हूं,
आग सुलगती है मन में, शांति नहीं है जीवन में, घर से भाग जाऊंगा, जंगल में खो जाऊंगा,
भाड़ में जाए नौकरियां, कुंए में गिरें छोकरियां,
मुझे किसी से क्या लेना, मुझे किसी को क्या देना,
बुद्धम् शरणम गच्छामि, धर्मम शरणम गच्छामि।

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मोहित वालिया
'95 बैच

एक किताब की जुबानी

खरीदी गई थी मैं जल्दी से,
सोचकर यह कि कहीं स्टाक न खत्म हो जाय।
पीले रंग (पोलीथीन) के एक सुनहरे कागज़ में,
रखी गई मैं सब किताबों से ऊपर।
क्षमा कीजिए, माफ कीजिए,
अपरिचित थे हम, लो परिचय लीजिए,
मैं हूं फारमाकोलोजी की एक किताब Second Prof. के छात्र के लिये,
पहले दो-तीन महीने आराम फरमाए कपबोर्ड में,
फिर अचानक एक दिन उन कोमल से हाथों ने छुआ मुझे,
खिल उठा मन मेरा, तन भी पीछे न था,

पन्नों के उड़ने में था मेरा रोम रोम खिला,
खिला मेरा भाग्य क्योंकि टेस्ट था फारमाकोलोजी का
विषय उसका था इतना खुला कि सब बंधनों को तोड़ दे,
टेस्ट था Autonomic Nervous System का।
अब मैं रहती थी हर पल उसके हाथ में
मानों नन्हा सा बच्चा खेल रहा हो मां की गोद में,
नीले, पीले Fluorescent रंग से हो रही थी सजावट मेरी,
अपनी किस्मत पर मैं अठिआई,
घर और कॉलिज में बस मैं ही थी भाई।
आइए अब कुछ पढ़ाई हो जाए,
सीख लिए जाएं कुछ शब्दों के मान्य भी,
Adrenaline है यह एक ऐसा राजा, बढ़ा देता है हृदय की गति जो,
Hot Millions में बैठे एक Pair को परी लोक में ले जाए जो
आंख की पुतली को खोल देता है यह
ऐसा कि Comedy फिल्म भी Horror लगने लगे।
अब कुछ शब्द इसके सबसे बड़े दुश्मन के Acetylcholine कर देता है यह धीमी गति
चाहे दिल की हो या दिमाग की,
800 CC की कार में बैठकर मज़ा लो टोबू साइकिल का,
है यह दोनों बिल्कुल उलटे,
पर रहते हैं दोनों एक महल में
संग रहते हैं कुछ और लोग भी
70 Page के महल में
सदा साथ देखेंगें आप Adrenaline और Atropine को
पीछे नहीं होंगे Acetylcholine और Propranolol भी
अरे अरे! क्या सोच रही थी मैं
पता लगा अब टेस्ट था खत्म
पूछा मेरी आंखों ने फिर कब खुलूंगी मैं
धीरे से वह बोली मुझे
''सर जब कलम उठाकर नए टेस्ट पर साइन करेंगे तब
और डाल देंगे हमें मुश्किल में, परेशानी में
अब जाकर बैठ तू अपनी जगह पर,
यही है मेरी अपनी कहानी
एक किताब की जुबानी।

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अमिता उतरेजा
'96 बैच

नया इतिहास

इतिहास की परीक्षा थी उस दिन, चिंता से दिल धड़कता था
जब उठा मैं सुबह तभी से, बायां नयन फड़कता था।

जो उत्तर मैंने याद किए, उनमें से आधे याद हुए।
वो भी स्कूल पहुंचने तक, बीती यादों में बरबाद हुए।

एक सीट दिखाई दी खाली, उसी पर जाकर मैं डट बैठा,
अध्यापक एक था कमरे में, वो भी झल्लाया और ऐंठा।

रे! रे! तेरा ध्यान किधर है, क्यों करके आया देरी
यहां-कहां आ बैठा है तू उठ जा ये कुर्सी है मेरी।

परचे पर जब मेरी नज़र पड़ी तो, सारा बदन पसीना था।
लेकिन फिर भी डरा नहीं, क्यों? ये मेरा ही सीना था।

परचे के बरगद पर मैंने बस कलम कुल्हाड़ा दे मारा।
घंटे भर में ही कर डाला सब प्रश्नों का वारा न्यारा।

अकबर का बेटा था बाबर, जो वायुयान से आया था।
उसने ही हिन्द-महासागर को अमेरिका से भरवाया था।

सेल्युकस था बुद्ध महात्मा जो ताजमहल में रहता था।
ओ अंग्रेजो भारत छोड़ो, वो लाल किले से कहता था।

इंदिरा जी और लाल बहादुर रामास्वामी के थे चेले।
वो सभी बचपन में फेंटम संग, आंख मिचौनी थे खेले।

ऐसे ही प्रश्नों के पापड़ मैंने बेल दिए।
उत्तरों के ऊंचे पहाड़ बनाकर टीचर की और धकेल दिए।

टीचर बेचारे इस ऊंचाई तक भला कैसे चढ़ पाते,
लाचार पुराने चश्में से इतिहास नया क्या पढ़ पाते।

संजीव धनकड़
'97 बैच

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यादें.....

Anatomy, Physio, Bio-chemistry
पाई हमने जब इनसे छुट्टी,
Second Prof. में रखे कदम
तब सबके दम में था दम।

अब थी फुर्सत की बारी
घूमे - फिरे, ऐश की और की Dance Parties की तैयारी,
SYNAPSE पे हमने रंग जमाया
मस्ती का था आलम छाया।

बिगाड़ दी Muscles की Structure सारी
आयी जब खेल - कूद की बारी
Athletic Meet में मेडल कमाया
रोमांचक थी Second Prof. की माया।

Pharmacy में घुसते ही
समझ किसी के कुछ न आया
बना दी कुछ ऐसी दवाईयां
खाते ही जिसे मरीज़ की छूट जाएं हवाईयां।

Experiments में करते जब Pithing
Frogs कर देते Micturition
टीचर के मन कभी न भाया
जब - जब Graph हमने बनाया।

Micro Lab में जब Enter किए
Cultured Bacteria हमें थमा दिए
Toxoplasma को जब Taenia बताया
टीचर ने तब सर खुजलाया।

Patho Lab की बताएं क्या बात
Microscope से मारते थे आंख
Files रहती हमेशा Incomplete
Slides समझी कभी न ठीक।

Forensic में खेले हथियारों से
कभी Torture Ball तो कभी तलवारों से
Post-Mortem से हम घबराते
MLR लिखे न जाते।

फिर PULSE ने हमारी हिम्मत बढ़ाई
AIIMS पर तब कर दी चढ़ाई
वहां पहुंच के कर दिया धमाका
लहराई मौज-मस्ती की पताका।

टीचर रहते सदा हमसे परेशान
पढ़ाई का न था नामो-निशान
क्लास में सदा देरी से आते
पिछली सीटों पर सोए पाते।

Exams की फिर बारी आई
पढ़-2 के अपनी नींदे उड़ाई
Result ने होश ठिकाने लाए
Exams में जब नम्बर कम आए।

यादें-यादें, बस यादें रह जाती हैं,
कुछ मीठी, कुछ खट्टी यादें रह जानी हैं.....

लोकेश हांडा
'95 बैच

बेबसी

नज़रों के सामने जला है हमारा आशियां,
उसे बचाते हम खुद मिट गए।
बची हैं रेत की दीवारें,
चाहे बचा लो चाहे जला दो।।

ज़माने भर की ठोकरें खाई हैं हमने,
सहारा तलाशते नज़रें थक गई।
मिली हैं सिर्फ तन्हाइयां,
चाहे उठा लो चाहे गिरा दो।।

तूफान में ज़िन्दगी हमारी खड़ी है,
साहिल तलाशते जीवन बीत गया।
बचे हैं कुछ लम्हें,
चाहे हंसा दो चाहे रूला दो।

हमने सदा ही वफ़ा की है तुमसे।
और ज़िन्दगी भर करते रहेंगे।
बची हैं तुमपे उम्मीदें,
चाहे बुला लो चाहे भुला दो।।

सोनू
१६ बैच

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HONOURED FOR DEDICATED SERVICES

INDEPENDENCE DAY, 1997

Mr. Sewa Singh	Superintendent
Mr. Sudhir Prashar	Section Officer
Ms. Rewa Sharma	Dispensary Superintendent
Mr. Anil Moudgil	Senior Scale Stenographer
Ms. Agam Verma	Senior Lab. Technician
Ms. Promila	Junior Scale Stenographer
Mr. Suresh Kumar	Junior Lab. Technician
Mr. Bhinder Singh	Clerk
Mr. Rajinder Kumar	Laboratory Attendant
Mr. Rameshwar	Sweeper

REPUBLIC DAY 1998

Ms. Nirmal Rani	Accountant
Mr. J P S Kohli	Senior Assistant
Mr. Rajesh Sharma	Clerk
Mr. Hukam Singh	Stenotypist
Ms. Bobby Aggarwal	Senior Lab. Technician
Mr. Mahesh Dutt	Junior Scale Stenographer
Mr. Arun Sharma	Telephone Operator
Mr. Mintu Kumar	Lab. Attendant
Ms. Babita Suneja	Data Entry Operator
Ms. Palwinder Kaur	Staff Nurse
Mr. Rameshwar	Sweeper

HONOURED FOR DEDICATED SERVICES

INDEPENDENCE DAY, 1998

Ms. Narinder Baroke	Nursing Sister
Ms. Kawanljeet Kaur	Staff Nurse
Ms. Rajinder Kaur	Clerk
Mr. Bhupinder Kumar	Steno-typist
Ms. Antu Garg	Junior Lab. Technician
Mr. Pappu Lal	Plaster Cutter
Mr. Kishore Singh	Driver
Mr. Sandeep	Attendant

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LAURELS WON BY NURSING PERSONNEL

Ms. Anuradha Bansal	:	1st Prize as best student at "Workshop on Burns" at Jaipur in Jan. 1998
Ms. Rita Sikand	:	2nd Prize in Paper Presentation at Cardio Vascular Thoracic Surgeons Conference at Jaipur in March, 1998
Ms. Kanwaljit Cheema	:	1st Prize in Solo Dance; 1st Prize in Debate Competition ; and 2nd Prize in Quiz on Youth Culture at National level function held in Kerala

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Flash News

Sept. 8, 1998 : At the North Zone Inter-Medical Table Tennis **(NOZITT-98)** competition held at DMC, Ludhiana on 5 - 7 Sept., 1998, our teams won the trophy and got all the first prizes as under :

- ◆Mixed Doubles (Ms. Tripat, Mr. Geetender)
- ◆Women Doubles (Ms. Tripat, Ms. Anuradha)
- ◆Women Team Event (Ms. Anuradha and Ms. Tripat)

GOVERNMENT MEDICAL COLLEGE, CHANDIGARH

Departmentwise Faculty Staff

Name	Qualifications	Designation
ADMINISTRATION		
1. Prof. VK Kak	MS, FRCS Eng, FRCSE, FACS, FICS, FAMS	Director Principal
2. Prof. DP Mehta	MD, DHHM	Professor of Hospital Administration-cum-Medical Superintendent
3. Prof. SP Dhir	MS, MS (USA), PhD (USA), FRCOphth (UK)	Joint Medical Supdt
4. Mr. DD Gautam	HCS	Addl Director (Admn)
5. Mr. Goverdhan Lal	MA, SAS	AC (F&A)
6. Mr. Nirmal Singh	BA, LLB	Asstt Registrar
ANAESTHESIOLOGY		
1. Prof. KK Gombar	MD	Professor
2. Dr. Satinder Gombar	MD	Reader
3. Dr. Rajeev Malhotra	MD, DHHM	Reader
4. Dr. Sukanya Mitra	MD	Senior Lecturer
5. Dr. Charu Deva	MD, DA	Senior Lecturer
6. Dr. LK Anand	MD	Senior Lecturer
7. Dr. Deepak Thapa	DNB, DA	Lecturer
ANATOMY		
1. Dr. NK Arora	MS	Reader
2. Dr. Kanchan Kapur	MSc, PhD	Senior Lectuerer
3. Mr. C. Ananth	MSc	Lecturer
BIOCHEMISTRY		
1. Dr. Jasbinder Kaur	MD	Reader
2. Dr. Minni Verma	MSc, PhD	Senior Lecturer
3. Dr. Vinod Rattan	MSc, PhD	Senior Lecturer
4. Dr. Savita Prashar	MSc, PhD	Senior Lecturer
5. Dr. Sushma Sood	MSc, PhD	Senior Lecturer
6. Dr. Vinita Mishra	MD	Lecturer

COMMUNITY MEDICINE (SPM)

1.	Prof. HM Swami	MD	Professor
2.	Dr. VK Bhan	MD	Reader
3.	Dr. Vikas Bhatia	MD	Senior Lecturer
4.	Mr. Satpal S. Bhatia	MSc	Statistician-cum-Lecturer
5.	Dr. JS Thakur	MD, DNB	Epidemiologist-cum Lecturer

DENTISTRY

1.	Dr. Gurvanit Kaur Lehl	MDS (Pedodont)	Reader
2.	Dr. Debdutta Das	MDS (OMF Surg)	Senior Lecturer

DERMATOLOGY & VENEREOLOGY

1.	Prof. AJ Kanwar	MD	Professor
2.	Dr. Gurvinderpal Thami	MD	Senior Lecturer

ENT

1.	Prof. Arjun Dass	MS, DNB	Professor
2.	Dr. NM Nagarkar	MS, DNB	Reader
3.	Dr. Hemant Ahluwalia	MS	Lecturer

FORENSIC MEDICINE

1.	Prof. Krishan Vij	MD, LLB	Professor
2.	Dr. SS Barapatre	MD	Reader

GENERAL MEDICINE

1.	Prof. HS Malhotra	MD, DM (Nephro)	Professor
2.	Dr. Atul Sachdev	MD, DM (GE)	Reader
3.	Dr. Ram Singh	MD	Reader
4.	Dr. SS Lehl	MD	Senior Lecturer
5.	Dr. AK Sood	MD	Senior Lecturer
6.	Dr. AK Duseja	MD, DM (GE)	Senior Lecturer
7.	Dr. Sanjeev D'Cruz	MD, DM (Nephro)	Senior Lecturer
8.	Dr. Mandeep Bhargava	MD, DNB, DM	Senior Lecturer

GENERAL SURGERY

1.	Prof. VK Kak	MS, FRCS Eng, FRCSE, FACS, FICS, FAMS	Professor
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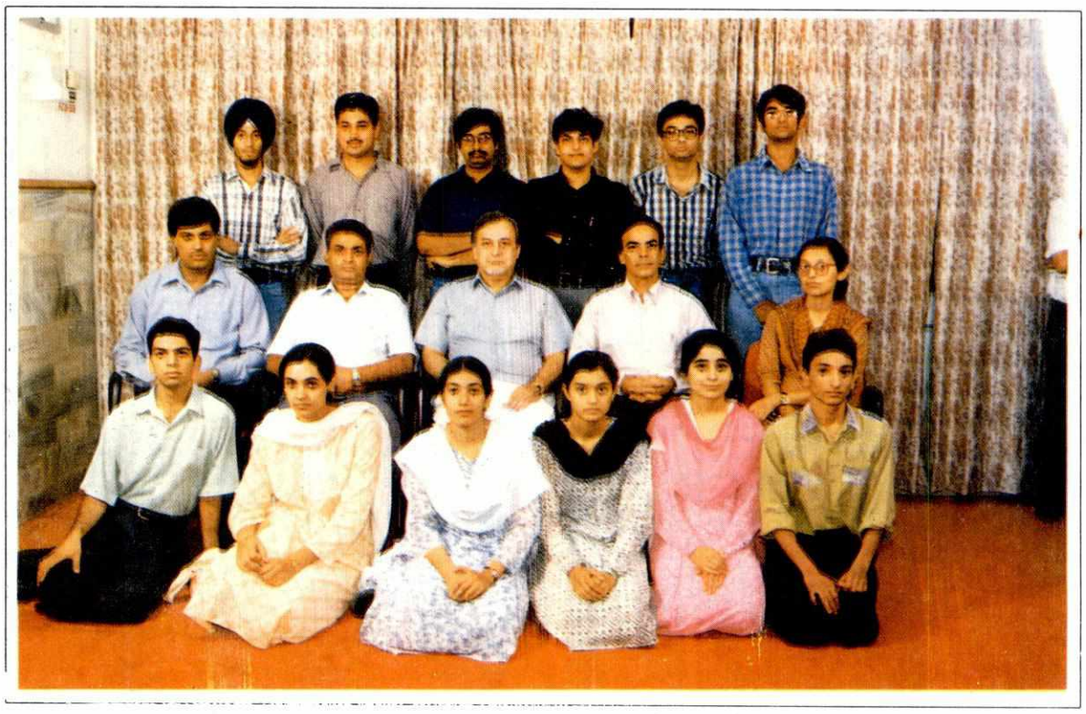

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Satish Kaushik
Artist
Deptt. of Pathology

Government Medical College & Hospital
Sector 32, Chandigarh 160 047
Tel. : 665 545-549

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