

Vapour

Theme- My ISA, My Pride

Our ISA at WCA Singapore



ISA QUIZ & ISA CROSSWORD

Dr. Rama Krishna Reddy M, Dr. Abhyuday Kumar
& Dr. Milon Mitragotri

ISA ACTIVITIES

ART & LITERARY PAGES

YUVA PAGES

MY ISA, MY PRIDE



HIGHLIGHTS

Drs. Madhuri Kurdi, Swarnamba UN, Vikas Joshi, Ajay BC : ISA City branch Monthly Meets: Moments to share and Memories to cherish...

Dr. Raksha Kundal, Dr. Abraham Cherian: The ISA Family Benevolent Fund: A Lifeline Outside the Operating Room

Dr. Neeru Sahni: My ISA, My Pride: Gratitude for Academic Growth

Drs. Bhavna Gupta, Pallavi Ahluwalia, Lalit Gupta, Kamna Kakkar, Mridul Dhar: OUR ISA, OUR PRIDE: A Heartfelt Conversation on World Anaesthesia Day

Dr. Hiren Shah: My ISA, My Pride

Dr. Parna Thakkar: Embracing the ISA Spirit

Drs. Swati Jindal, Deepika Gupta, Avneet Singh: My ISA, My Pride

KALEIDOSCOPE:

: A Legend speaks: A tryst with Dr. Mohan Mathew

: A Yuva ISA leader speaks: A tryst with Dr. Arun Pandiyan

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**FAMILY BENEVOLENT FUND
OF
INDIAN SOCIETY OF ANAESTHESIOLOGISTS**

(Regd.629 / 2007 under Societies Registration act. 35 of 2001)

FORM OF MEMBERSHIP

(To be filled with Block letters)

(For Office Use only)

FBF No.
R.No.
Date :

Affix
Passport size
Photograph

ISA No.

Proposed by Dr.....

Life member of.....City Branch of ISA

SURNAME :

FIRST NAME :

NAME TO BE PRINTED ON CERTIFICATE AS :

NAME OF FATHER / HUSBAND :

DATE OF BIRTH :

AGE :

NAME OF NEAREST CITY BRANCH OF ISA :

CORRESPONDENCE ADDRESS :

PERMANENT ADDRESS

.....

.....

CITY..... PIN

CITY..... PIN

StAte.....

StAte.....

EMAIL

EMAIL

MOBILE.....

MOBILE.....

NOMINATION FORM

S. No.	Name of the Nominee	Relationship of the Member	Address
1.			
2.			
3.			

If the nominee is a minor, name of the person :

who represents the minor and his/her address

Date of birth and age of Minor :

Specimen Signature of the

Nominee of Minor's representative 1.

2.

3.

I hereby declare that the above information furnished by me is true and correct.

Signature of Applicant

I, the undersigned, hereby apply for the Membership of Family Benevolent Fund of Indian Society of Anaesthesiologists.

I enclose here with DD ☐ Cheque ☐ No datedCash Deposit ☐

SBI Collect ☐ transfer ☐ NeFt ☐ IMPS ☐

UPI ☐ credited on transaction

I do hereby declare that the above information is true withheld no information whatsoever regarding the application and I agree to pay the demanded amount as per the rules of this scheme.

I further agree to abide by all the conditions laid down in the Constitution of the Scheme and the amendments to be made from time to time.

I shall inform the change of address time to time.

Date :

Signature of the Applicant

Dr.Sugu Varghese
President

Dr.Abraham Cherian
Hony.Secretary

Dr. Joshy Jose
Treasurer

Applications may send to :

Dr.Abraham Cherian

Hon.Secretary, ISA FBF

Anaesthesia House, 1st Floor, GCDA Shopping Complex, Panampilly Nagar, Cochin 682 036

Ph : (Off.) 9895098098 Email : isafbfsecretariat@gmail.com

For Office Use Only

ADMISSION FEES

(1) A non-refundable deposit will be collected from members joining the Fund according to their age.

- | | |
|-----------------------------------|-------------------------------|
| a) Less than 30 years - Rs.2000/- | b) 31 to 35 years - Rs.3000/- |
| c) 36 to 40 year - Rs.4500/- | d) 41 to 45 years - Rs.6000/- |
| e) 46 to 50 years - Rs.8000/- | f) 51to 55 Years - Rs.10000/- |
| g) 56 to 60 Years - Rs. 15000/- | |

(2) Annual Membership fees Rs. 200/- (it is otherwise called as administrative charges)

Total - 1 (Admission fee) + 2 (administrative charges)

- N.B.
1. Demand Draft / At par cheque be drawn in favour of ISA FBF, payable at Ernakulam
**A/c details for online transfer : A/c Holder's Name : ISA FBF; Current A/c No. 35338132424;
Bank : State Bank of India; Branch : KIZHAKKAMBALAM, Kerala;
Branch Code : 70425; IFS code : SBIN0070425**
 2. Receipt of ISA Life Membership subscription issued by ISA or xerox copy of I.D. card must accompany this application form, as proof of life membership.
 3. Enclose two (2) passport size photographs.
 4. Certified xerox copy of Date of birth certificate / PAN card / Passport may be produced as proof of age.

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EDITOR'S NOTE



Dear esteemed members,

Warm greetings from Indian Society of Anaesthesiologists (ISA) National Headquarters!

I am happy to present to you the May-June 2025 issue of VAPOUR based on the theme 'My ISA, My Pride.'

Our ISA since its inception in 1947 has been growing by leaps and bounds in all directions. Its membership is now close to reaching 50,000 and is growing further. It is currently the second largest body of anaesthesiologists in the world. I am proud to say that it is doing well financially, has achieved several milestones and its activities have always been vibrant and are growing by the days. Its activities range from educational to cultural to financial and medicolegal support and social outreach and beyond. The educational activities including the sponsoring and hosting of workshops, CMEs and conferences and conduct of educational webinars, practitioner webinars, Clinical Practice oriented webinar series (CLIP) and Clinical Reasoning and Problem Solving webinar series (CRISP) have provided solace to many anaesthesiologists in search of new skills and knowledge and brought the continuum of education to their doorsteps. The ISA National PG online classes have become extremely popular amongst the postgraduate student world and lakhs of students tune in to these classes both live online and the recorded versions on YouTube. The classes have become a role model in teaching and learning both in our nation and beyond. Nonetheless, the establishment and start of functioning of the College of Indian Society of Anaesthesiologists (CISA) in 2023-24 marks a very significant milestone in the history of ISA.

The ISA as a body has also achieved phenomenal success in addressing the grievances of its members. The Medicolegal Cell, Financial Advisor Cell and Family Benevolent Fund provide a strong support to those in need. The Art and Literary Club and the Cultural Club are providing platforms for our members to explore and display their artistic and creative skills through online and physical events at conferences, art exhibitions and competitions. The ISA has always been giving impetus to the researchers in our nation through its official journal, the Indian Journal of Anaesthesia (IJA). Further, the new journal, the journal of CISA, viz- Practical Evidence in Anaesthesia Knowledge (PEAK) has been launched to widen the research publication platform for Indian researchers and clinicians. The ISA provides several prestigious podiums and awards for research paper presentations, innovations and poster presentations at its national and state conferences.

As the Honorary Secretary of this prestigious body, I have been blessed with the privilege of working for it. Most of my time is spent for ISA, with a very fine or no boundary many a times between day and night for me as far as work is concerned. No 'me time', no 'family time', no 'time to relax'... But I am sure that when I will look back and ruminate over these three years of my tenure as Secretary and the previous years as Governing Council member of ISA and Associate Editor-in-Chief of IJA, I will enjoy the taste of precious memories and derive an immense sense of satisfaction for having worked hard for this body. Given a chance, I would want to work for ISA again and again...

My dreams for the future of ISA are clear and crisp. I envision an ISA with its academics touching a global level. Its teachers and students and their knowledge need to be projected wider to the global academic community. Already, a Memorandum of Understanding(MOU) has been signed by the ISA recently with the American Society of Anesthesiologists and this may help in improving our global academic outreach. Our leadership roles in the global community have to improve. We have already made a beginning in this with some of our colleagues becoming members and ambassadors of several committees of the World Federation of Societies of Anaesthesiologists (WFSA) and occupying important positions such as the Chair of WFSA ICCM Committee, the Global Sepsis Alliance and the Editor-in-Chief of Anaesthesia Tutorials of the Week(ATOTW). Our scientific publications need to make a stronger global impact. Nevertheless, the authors, reviewers and editorial teams of IJA and PEAK need to work harder to achieve this. We need to publish Indian advisories and guideline formularies based on the requirements of the Indian anaesthesiologists.

I am ecstatic to announce that this issue of VAPOUR is the 20th issue and as the official newsletter of the ISA, it has already made a global impact with the publication of articles, activities and interviews of several of our national and international colleagues. I am certain that VAPOUR will grow further and strengthen its global presence in the days to come.

Till then, happy reading of the articles and activities published in this issue of VAPOUR.

Until we meet again, take care!

Long live ISA!

Dr. Sukhminder Jit Singh Bajwa
Honorary Secretary, ISA National
Editor-in-Chief
‘VAPOUR’
(The official newsletter of the ISA National)

ISA NOTICE BOARD

CONFERENCE & CME CALENDER OF ISA (2025-26)

Conference/CME (Coming up)	Location	Organised by	Dates
UPISACON 25 (47 th annual conference of ISA UP state)	Lucknow	Department of Anaesthesia, SGPGIMS, Lucknow & ISA Lucknow City branch	24 th -26 th October 2025
72 nd ISACON2025	Raipur	ISA Raipur	26 th - 30 th November 2025

Note: The dates mentioned in the above table are tentative & as per information received.
The list of upcoming conferences will be updated in subsequent issues.

ISA National PG online classes

These are being conducted regularly every Monday between 6.30 to 8pm. Experienced PG teachers are taking PG oriented classes including exam-oriented topics.

ISA academic webinar series
College of Indian Society of
Anaesthesiologists (CISA) under
the aegis of ISA National
presents webinars every month
on useful topics.



ACADEMICS: SPOTLIGHT:

Theme-

**My ISA,
My Pride**

ISA City branch Monthly Meets: Moments to share and Memories to cherish...



Dr. Madhuri Kurdi

Professor

Department of Anaesthesiology

Karnataka Medical College and Research Institute (KMC RI), Hubli

President, ISA Hubli-Dharwad city branch (2017-18)

ISA No. K1014

Dr. Swarnamba UN

Professor

Department of Anaesthesiology, KMC RI, Hubli

President, ISA Hubli-Dharwad city branch (2024-25)

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Department of Anaesthesiology, KMC RI, Hubli

Hon. Secretary, ISA Hubli-Dharwad city branch (2024-25)

ISA No. J0823

Dr. Ajay BC

Assistant Professor

Department of Anaesthesiology, KMC RI, Hubli

Hon. Treasurer, ISA Hubli-Dharwad city branch (2024-25)

ISA No. A3485



Introduction: Monthly meetings are a regular feature of the Indian Society of Anaesthesiologists (ISA) local branch activities. The branch President, Secretary and Treasurer plan the date, venue and agenda of the meets and local ISA members attend the meetings which have an academic taste combined with the flavour of good food and boozy cocktails. There are branches that conduct the meetings meticulously and regularly just as they would strictly follow traditional rituals. Further, there are branches that conduct them casually over a cup of tea and biscuits. Nonetheless, the enthusiasm and happiness in meeting for the celebration of World Anaesthesia Day surpasses all others.

Goals of Monthly Meets:

- They provide a forum for academic deliberations, educate the members and keep them updated with latest clinical knowledge.
- They provide a platform for discussion regarding any issues faced by the members. They keep all the members updated about the various decisions and policies of the parent body at state and national level.
- They enlighten the members and remind them that they are not alone; big brother ISA and all his siblings are there with them and this helps to boost up their professional morale and courage. The members support each other, offer encouragement to those in not-so-good professional/ personal times and share their burdens.
- Members can put forth their professional grievances and constructive ideas for the welfare of the organisation and its members.
- The meets break the monotony of professional and family life and reduce boredom in those suffering from intellectual exhaustion and burnout.
- Senior members get to know the new entries in the branch and vice versa.
- Felicitation of the achiever members can inspire other members.

Challenges in the organisation of ISA Monthly meets:

Finance, logistics, time concerns, lack of enthusiasm of the members, lack of good leadership, teamwork and coordination can make the organisation of monthly meets challenging. A full forum in the meeting hall cheers up the spirits of the organising members. Nevertheless, a sparse attendance is often noticed. In a busy world with a generous shower of scientific and extra-academic material from social media, members often bunk academic meets and find solace in their cosy homes with their phones and television sets. Reduced in-person interaction, lack of interest in real-world activities and social withdrawal are well-known effects of social media and these have taken a toll on monthly meetings too.

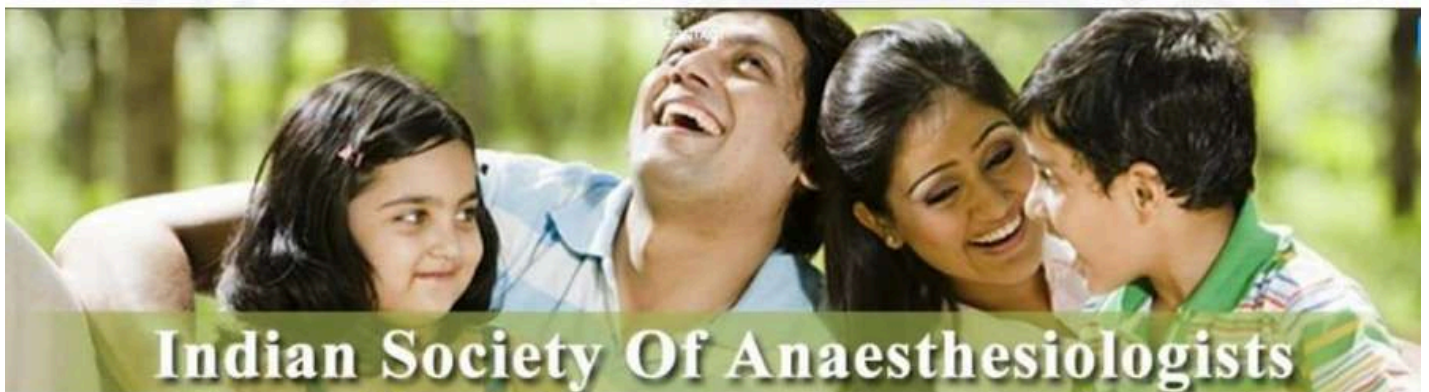
How to make the monthly meetings more effective and successful?

- Declare the date and put the invite well in advance so that members can plan their schedule. Planning a meeting on a weekend or keeping fixed days for the monthly meet can help practitioners fix up their duties to enable attendance.
- Good speakers and clinically useful topics for the academics can attract more members to attend. Clinical guidelines on varied topics can be discussed regularly.
- ‘Yuva’ meetings can be organised, wherein the ‘Yuva’ members take up the work of presentation. Postgraduate students from the medical institutions in the city can participate in the meetings. They can get to interact with practitioners, come to know the challenges of private practice and the role of ISA in the lives of anaesthesiologists by doing this.
- Interesting articles from journals of the ISA such as the Indian Journal of Anaesthesia, Practical Evidence in Anaesthesia Knowledge and the ISA Newsletter VAPOUR can be discussed in the meetings.

- Brief cultural events, fun stuff and ice-breakers can be added to make the gathering more interesting.
- Those members who have recently attended conferences/ CMEs can share their experiences with fellow members.
- Glimpses of the history of ISA can be shown at the monthly meets so that the members become aware of the illustrious history of ISA.
- Welcoming new ISA members to the society at each meeting can increase member participation.

Conclusion:

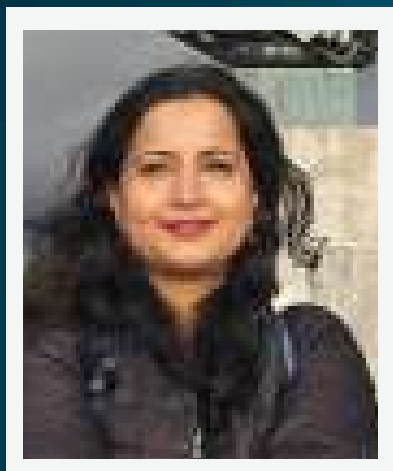
ISA monthly branch meetings should be regularly held inspite of the many challenges and limitations. They serve to bring all ISA members together in heart and spirit and foster a sense of unity and harmony amongst them. They remind us that we cannot lead our lives alone, we thrive on connection, support and camaraderie. Together we thrive, alone we can just survive.



Indian Society Of Anaesthesiologists Family Benevolent Fund



The ISA Family Benevolent Fund: A Lifeline Outside the Operating Room



Dr Raksha Kundal

**Associate Professor, AIIMS Jammu
ISA No. R1849**

“We save lives every day, and through ISA FBF, we keep the lives of those we love secure.”

As anaesthesiologists, we are the unseen shields of patient safety. We ensure that every heartbeat stays steady and every breath remains safe during surgery. But while we dedicate our lives to protecting others, we must also remember the needs of our own families.

We take great pride and gratitude in commemorating the ISA Family Benevolent Fund (ISA FBF) — one of the Indian Society of Anaesthesiologists’ (ISA) most compassionate and visionary endeavours. This initiative reflects the strength, unity, and social responsibility of our professional community.

What Does ISA FBF Mean?

The ISA Family Benevolent Fund is a social security programme that provides financial support to the families of ISA members in the unfortunate event of their demise. It serves as a safety net, ensuring that our loved ones are not left unprotected when we are no longer around.



Dr Abraham Cherian

**Hon. Secretary ISA FBF
ISA No. A0466**

Founded on compassion and solidarity, the fund extends our care beyond the hospital — to our homes and families.

Why Is ISA FBF Important?

Anaesthesiologists face the reality of life’s unpredictability every day. The ISA FBF transforms our collective strength into a practical safeguard for our families. It brings peace of mind, knowing that our loved ones will receive substantial financial assistance if something unforeseen happens. This shared commitment reflects the true spirit of our profession — standing by one another as we do for our patients.

The Journey of ISA FBF

ISA FBF traces its origins back to the year 2000, when the ISA Andhra Pradesh branch initiated a family support programme under the leadership of Dr. S.C. Parakh and Dr. G. Surender Reddy. Due to its success, the ISA National Body decided to make it a national program in 2001 during the Ahmedabad AGBM, led by Dr. B. Radhakrishnan.

Dr. S.S.C. Chakra Rao served as the inaugural convener, and Dr K.R.N. Tagore was the first president. The present ISA FBF consists of Dr

Sugu Varghese (President), Dr Asit Vaishnav (Vice President), Dr Abraham Cherian (Hon Secretary), Dr Gopalakrishnan (Joint Secretary), Dr S.C Parakh(Immediate Past President & Chairman Grievance Cell), Dr Joshy Jose(Treasurer).

Managing Committee Members (Dr Pheroze Shah, West Zone, Dr Anurag Garg, North Zone, Dr Manoj Kamal, West Zone, Dr Gurumukh Prasad, East Zone, Dr Ankur Khandelwal, North East Zone) Dr Anil Kumar Poduri Ex Officio member.

Who Can Join and How?

Any ISA member under the age of 60 years is eligible to join the fund.

Membership can be obtained easily by visiting the official website

<https://www.isafbfnational.in> or by downloading the ISA FBF mobile app from the Google Play Store.

How Does It Help Members' Families?

When a member passes away, their family receives a financial benefit contributed by all other members of the fraternity.

"This is but a humble contribution from the society, offered with care and solidarity during this difficult time."

Details about Contributions and Death Fraternity Claim (DFC)

To join ISA FBF, one must pay a one-time joining fee (ranging from ₹2,000 to ₹15,000, depending on age), along with an annual administrative fee of ₹200.

In addition, each member contributes annually toward the Death Fraternity Contribution (DFC).

The DFC amount per member is calculated as follows:

$$\text{DFC} = (\text{Number of deaths} \times ₹300) + ₹200 \text{ administrative charges}$$

The DFC payee list for each year is based on the membership status as of September 30 of the previous year.

The DFC amount disbursed to the nominee upon a member's demise is calculated as: No. of deaths $\times$ ₹300 $\times$ No. of active members as on 31st March of that year

The DFC claim is paid directly to the first nominee. The last claim amount paid to a nominee was ₹6,64,200. In the last year alone, ISA FBF disbursed over ₹78,67,800 to the families of our departed colleagues — a testament to the importance and impact of this programme.

DFC Notification and Payment

DFC notifications and reminders are sent periodically via email, SMS, and WhatsApp groups to encourage timely payment before 31st December each year.

Members can pay their DFC through multiple convenient options: Log in to the official website or ISA FBF Android mobile app; Use UPI, debit/credit cards, or other digital payment modes

Online payment is the most preferred mode, as it is fast, secure, and provides instant payment acknowledgment via SMS and email. Payment through NEFT/IMPS is also available. For detailed payment options, please refer to DFC Notice 25.

A Call to Strengthen Our Fraternity

The ISA FBF symbolises our deepest commitment and compassion toward our fraternity.

It is an opportunity to contribute meaningfully to our community — and, in turn, to protect the future of those we love most.

Please visit <http://www.isafbfnational.in> to join ISA FBF.

SAFE TOGETHER. STRONGER TOGETHER.
Join ISA FBF for your Family's Social Security.

My ISA, My Pride: Gratitude for Academic Growth

Dr Neeru Sahni

Additional Professor, Department
of Anaesthesia & Intensive Care,
PGIMER, Chandigarh.

E mail: neerunalin@yahoo.com

ISA No. N078

The journey of a medical professional is often defined not only by individual effort and clinical experience but also by the academic and institutional support that shapes their growth. Indian Society of Anaesthesiologists (ISA) has been such a pillar for many anaesthesiologists all over the country by providing a platform for intellectual development, professional recognition and most importantly, the confidence to pursue academic excellence.

From the outset, the young anaesthesiologists are welcomed into a community that values education and continual advancement of anaesthesia practice. Affiliation with ISA broadens one's academic horizons as it provides the opportunities to learn and grow through national conferences, scientific sessions, online webinars and hands-on workshops. ISA creates an environment where anaesthesiologists are constantly challenged to evolve. This is only possible with the humongous efforts of the governing team which works behind the scenes to foster high academic standards and continuous learning.

Association with ISA gives one the opportunity to engage in multiple academic roles namely, teacher, trainer, scientific reviewer and author. These roles not only deepen engagement with the subject but also enhance the ability to critically evaluate evidence, share knowledge effectively and contribute to the academic community. Under the banner of ISA, one gets the opportunity to mentor young anaesthesiology trainees, review scientific literature and participate in editorial processes, thus, helping the anaesthesiologists to grow

beyond the confines of the operating room and develop into well-rounded academicians. These experiences not only enrich one's own learning but also strengthen the ability to do team work and communicate effectively.

ISA's inclusive and supportive ethos act as a catalyst for professional recognition. It is indeed motivating to have acknowledgement of work in the form of invitations to speak on academic topics, opportunities to publish and involvement in educational initiatives. These small but significant recognitions inspire the anaesthesiologists to strive further toward excellence.

To be a part of ISA, a society that endeavours to nurture talent and actively invests in the academic growth of its members is both inspiring and humbling. One should feel proud to contribute to the Society's mission of advancing anaesthesia education and practice. Thus, there should be gratitude for the encouragement, opportunities, recognition and academic growth. Each role, each opportunity solidifies one's confidence.

With renewed enthusiasm and commitment, let us look forward to continuing this path of learning, teaching and contributing to the shared vision of excellence in anaesthesiology.

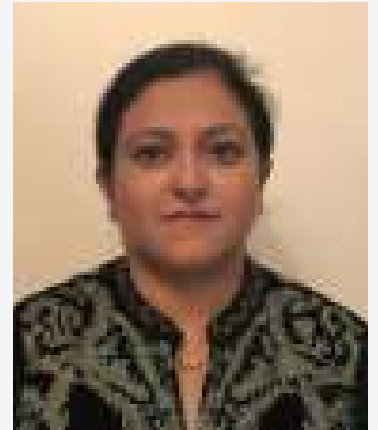
OUR ISA, OUR PRIDE: A Heartfelt Conversation on World Anaesthesia Day



Dr. Bhavna Gupta
Associate Professor,
AIIMS Rishikesh, ISA B1501



Dr Mridul Dhar
Associate Professor,
AIIMS Rishikesh, ISA M2191



Dr. Pallavi Ahluwalia
Professor, Teerthanker
Mahaveer Medical College,
Moradabad, ISA P1288



Dr. Lalit Gupta
Professor, Maulana Azad
Medical College, New Delhi,
ISA G0909



Dr. Kamna Kakkar
Assistant Professor, SGT
Medical College, Gurgaon,
ISA K2440

In a special round table for World Anaesthesia Day, we joined Dr. Bhavna Gupta, Dr. Pallavi Ahluwalia, Dr. Lalit Gupta, and Dr. Kamna Kakkar for a candid chat. Guided by Dr. Mridul, they shared stories and reflections on what the Indian Society of Anaesthesiologists truly means to them, revealing the passion and camaraderie that defines its journey.

(The conversation begins with warm greetings as everyone settles in.)

Dr. Mridul: *Welcome, everyone! It's wonderful to have you all here. As we celebrate World Anaesthesia Day, I want to talk about something close to all our hearts: the ISA. So let's start with a trip down memory lane. When you hear the phrase, "My ISA, My Pride," what's the first memory that springs to mind?*

Dr. Bhavna: Oh, for me, the memories take me right back to my residency days. I can still see myself in that crowded seminar hall, listening to my seniors speak with such reverence about the ISA — how it wasn't just a professional body, but a support system, a guiding light for every anaesthesiologist. Back then, I didn't fully grasp what they meant. But as I grew, I realised the truth in their words. Watching it now, standing tall among the world's largest anaesthesia societies, fills me with a deep, almost personal pride. It's like watching a family member flourish.

Dr. Pallavi: That's so true, Bhavna. For me, it's a feeling of coming home. The friendships, the professional growth, the comforting sense that someone always has your back— that's what ISA has given me since my very first meeting.

Dr. Lalit: I can completely relate to that. Hearing you both speak reminds me of being a young resident and hearing about the importance of the ISA from senior faculty. And now, seeing it become one of the biggest in the world makes me so proud. Over time, as a senior faculty member myself, it truly feels like family to me.

Dr. Kamna: It's so much more than just a society, isn't it? For me, pride in being an anaesthesiologist is an emotion that drives me to become better each day. I mean, the very act of pushing someone deep into unconsciousness and then waking them up unharmed is an act of superhuman capability! ISA helped me meet such superhumans from all over India— a network of equally passionate anaesthesiologists. I am so proud of being an ISA member, and I hope I make ISA proud of me someday.

Dr. Mridul: *Those are such powerful starting points— family, home, a network of superhumans! It's clear ISA made a strong first impression on all of you. So, how did that initial connection go on to shape your path as a clinician, a teacher, or a leader?*

Dr. Pallavi: I'll never forget the first time I represented ISA at a state-level academic event. Standing in front of my peers and mentors, I didn't just feel like an individual— I felt like part of something far greater. That moment stays with me as a reminder of the pride that comes from contributing to our collective mission: to ensure safe anaesthesia and compassionate care for every patient.

Dr. Bhavna : In countless ways, ISA became the wind beneath my wings, helping me discover a voice I never knew I had. In the early days, I was happy to stay in the background — working sincerely, doing my bit, and quietly contributing without ever imagining myself as a leader. Then came opportunities that changed everything. Bajwa sir encouraged me to take on small but meaningful roles — drafting newsletter articles, contributing to fresh initiatives of ISA, chapters, articles and lending my hand wherever I could. Each of these moments, though modest, became stepping stones. And before I realised it, ISA had gently transformed me from a silent worker into someone who could lead with purpose and gratitude. In clinical practice, too, ISA was my guide. Whenever dilemmas arose, especially during the uncertainty of the COVID era, their clear and timely guidelines lit the way forward.

Dr. Lalit: You've said it perfectly, Dr. Bhavna. It gave me the confidence to become a leader, too. I found my voice by writing for newsletters and joining new projects. And I'll never forget the first time I spoke on stage at the national ISA conference. Just like you said, Pallavi, I wasn't just representing myself; I felt part of a bigger mission.

Dr. Kamna: I was so fortunate in that regard. While at PGIMS Rohtak, I was part of Dr Naveen Malhotra sir's team. He made me don

so many different hats! One minute I was coordinating with delegates, the next I was designing certificates, writing newsletters, or even hosting events– skills I didn't even know I had! It all came in handy when we organised YUVA ISACON I and II, which were a superhit in COVID and post- COVID times. I thought I was just having fun doing extracurricular work during my otherwise stressful PG time, but Naveen sir was carefully sculpting a leader in me. He's iconic, and ISA is iconic.

Dr. Mridul: *Incredible stories of growth. It sounds like there have been many defining moments. Is there one particular moment from your ISA journey that you'll never, ever forget?*

Dr. Bhavna: For me, winning the ISA World Essay Competition and the prestigious Young Anaesthesiologist Awards just last year in 2024 are truly unforgettable. But it wasn't the award itself that moved me — it was what it represented: years of growth, learning, and the belief that ISA had placed in me long before I believed in myself. Another memory that I hold close is organizing a CME under the ISA banner. Watching a hall full of students and colleagues absorb knowledge, exchange ideas, and grow together made me realize — this, right here, is what being part of ISA means. We don't just practice anaesthesia; we nurture it, protect it, and pass it forward.

Dr. Lalit: I completely understand that feeling. That first time speaking at a state-level event for the ISA is a core memory. But being recognised with awards and appreciation for my work was just... just overwhelming. It felt like a warm hug from the entire community, a moment where I truly felt seen and valued by my peers.

Dr. Kamna: Hmmm... for me it's hard to pinpoint just one moment, as working with ISA has always been so rejuvenating. But one moment does stand apart. At the end of YUVA ISACON National II, all the organisers were felicitated.

I, too, was made to sit on a big chair on the stage, and the seniors stood beside me and blessed me with a sash and a trophy... all that jazz. It felt surreal! And the best part was, my husband, who's also an anaesthesiologist and the current treasurer of ISA Gurgaon, was watching me from the crowd with proud eyes and cheering me on. This was just after we just got married, so that was personal and very special.

Dr. Mridul: *These are such beautiful, personal memories. It's clear that ISA is more than just a professional body; it's deeply personal. Looking at the bigger picture, how have you seen ISA evolve, and what keeps you inspired about its future?*

Dr. Bhavna: ISA has been instrumental in ensuring Indian anaesthesiology has the recognition it deserves. Its collaborations with WFSA and other international bodies allow our collective expertise, compassion, and innovation to resonate globally. We are no longer silent heroes behind the drapes. Through ISA, our voice reaches policymakers, global peers, and patients' families. We are present, we are heard, and more importantly, we are united by one purpose — to make anaesthesia in India safer, stronger, and more compassionate.

Dr. Pallavi: Oh, absolutely. ISA has evolved so much. From traditional meetings to cutting-edge research, it continues to grow with the times without ever losing its heart for service. What inspires me most is how ISA consistently creates opportunities for young anaesthesiologists to learn, lead, and shine. Watching that fresh talent rise always fills me with hope.

Dr. Lalit: I couldn't agree more. While our expansion to an international presence is impressive, the real magic is in the "aha!" moments for our newest members. Seeing their eyes light up when they present their first research– that's the soul of the ISA for me. It hasn't gotten cold or corporate as it's grown. Instead, it doubles down on its mission to spot potential in young anaesthesiologists and provide them with the opportunities we once lacked.

Dr. Kamna: (Laughs) Well, I'm too young and inexperienced to comment on the evolution of ISA. But I can say with 100 percent surety that ISA is going to be the next big bang the universe will see. We are a giant network of competent experts where each person is willing to contribute. If each of us does our little bit, we can do a lot. So yeah, watch out! Here we come!

Dr. Mridul: *I love that energy, Kamna! That actually leads perfectly to my next question. If you had to describe ISA in just one word or a short phrase, what would it be?*

Dr. Kamna: I'll go with "Sarvochh Sanyaharan Sanghatan," which loosely translates to "the best anaesthesia society!"

Dr. Bhavna: For me, it's "My extended family", after my own family, of course!

Dr. Pallavi: I would say, "Strength with Soul." Because that's what it represents– the power of skilled professionals guided by compassion, empathy, and unity.

Dr. Lalit: I'd call it "A strong voice that cares." They're the people I can always count on, a place where I find support, guidance, and a deep sense of connection.

Dr. Mridul: *Fantastic descriptions. Let's talk about that voice. How do you feel ISA amplifies our collective voice, both in India and on the global stage?*

Dr. Bhavna: It's simple, really. By connecting us to the WFSA and by making sure our voice is heard, from policymakers to patients, ISA brings Indian anaesthesia onto the world map.

Dr. Kamna: I agree. Anaesthesiologists are often seen as the silent, unsung heroes in the OT. But silence is detrimental to our progress. ISA is the platform where we can air our issues, celebrate our talent, get support in our misery– especially with medicolegal challenges and

ultimately, we all back each other up. That's exactly why I love our ISA.

Dr. Lalit: You've both touched on something vital. Being part of ISA does two incredible things. On one hand, it puts Indian anaesthesia on the map. But on a deeper, more personal level, it's that emotional connection of standing shoulder to shoulder with colleagues who just get it. They understand the long hours, the tough decisions, and those quiet wins no one else sees. It's what transforms a professional group into a real family.

Dr. Mridul: *So it truly goes beyond a professional identity. It's about a shared human experience.*

Dr. Bhavna: Exactly. It means sharing in the sacrifices, the daily challenges, the small victories– all with others who truly understand what it means to be an anaesthesiologist.

Dr. Kamna: For me, it means friendship with some very cool people! Some are nerdy, respect-worthy scientists, some are amazing artists, some are melodious singers... To me, an ISA conference is more of a wholesome reunion of friends, juniors, and seniors that I enjoy so much.

Dr. Mridul: *As we wrap up our wonderful chat, I have one final question. On this World Anaesthesia Day, what is the one message you'd like to share with all our ISA colleagues nationwide?*

All (in spirited agreement): "My ISA, My Pride" goes beyond a theme– it's our collective journey. Our hearts are filled with gratitude for our mentors, for the friendships, and for every colleague who makes our specialty stronger. This World Anaesthesia Day, we carry deep gratitude — for the ISA leaders who paved our path, for the colleagues who walk beside us, and for the students who carry our light forward. My ISA, My Pride — it's not just a slogan. It's a sentiment that binds us all in purpose and pride.



My ISA, My Pride

Dr. Hiren Shah

Consultant Cardiac Anaesthesiologist,
Vishesh Jupiter Hospital, Indore.
Hon. Treasurer, ISA Indore City Branch
ISA No. H0622

The Indian Society of Anaesthesiologists (ISA)

The Indian Society of Anaesthesiologists (ISA) stands as one of the most respected professional organisations in the field of medicine. Established in 1947, the Society has consistently strived to advance the science and practice of anaesthesiology, while simultaneously promoting patient safety and professional excellence. Today, it represents thousands of anaesthesiologists across the nation, uniting them under a common vision of service, knowledge, and progress.

Academic Advancement

The ISA has always placed strong emphasis on academic advancement. Through its annual conference, ISACON, as well as state, city, and zonal meetings, the Society provides a vibrant platform for exchange of ideas, dissemination of new research, and continuous medical education. Such initiatives ensure that members remain updated with the latest developments in anaesthesiology and critical care, thereby enhancing the quality of patient care.

Public Awareness and Advocacy

Equally noteworthy is the Society's role in public awareness and advocacy. Campaigns on patient safety, observance of World Anaesthesia Day, and various educational outreach programmes have helped highlight the indispensable role of anaesthesiologists in healthcare. These initiatives not only strengthen public trust but also bring visibility to a speciality that often works behind the scenes, yet plays a vital role in saving lives and alleviating pain.

Professional Unity and Ethics

The ISA also fosters a sense of professional identity and unity among its members. It serves as a guiding body that upholds ethical standards, encourages research, and promotes collaboration at both national and international levels. By creating opportunities for professional growth and nurturing young anaesthesiologists, the Society ensures that the speciality continues to flourish in India.

Pride and Responsibility

For every anaesthesiologist, being a part of the ISA is a matter of both honour and responsibility. It is not merely an association but a professional family that symbolises excellence, service, and pride. The legacy of the ISA is a testament to the dedication of countless anaesthesiologists who, while often unseen, form the backbone of safe surgical and critical care in the country.

Our Commitment

As members of this distinguished Society, we take pride in carrying forward its mission—to strengthen our speciality, to serve our patients with utmost commitment, and to uphold the dignity of our profession.

The Indian Society of Anaesthesiologists is, indeed, our strength, our identity, and our pride.

Embracing the ISA Spirit

Dr. Parna Thakkar

Senior Consultant-Chief
neuroanaesthesiologist, Sir HN
Reliance Foundation Hospital,
Mumbai
ISA No. P0831



Dear ISAians,

I began my journey with Indian Society of Anaesthesiologists (ISA),in 1996, soon after I passed my MD exam. Few of us accompanied Dr. Dasgupta sir to the ISA national conference, ISACON, - Hyderabad and became an ISA member.

I always made it a point to attend the Mumbai annual conference, GS Ambardekar society and NEBS branch academic meetings. Thane ISA meetings always had good topics and I attended as well as started presenting there. My journey with the Thane ISA branch started right from its inception in 2017, as an executive committee member, Treasurer, Hon. Secretary and now the President of my branch. I enjoyed the process and it groomed me in many ways. I made many friends and my organisational skills sharpened.

It was a euphoric moment when I got elected as SAMS newsletter editor in 2023.This post gave me an opportunity to get connected with many members of the various city branches of SAMS (Society of Anaesthesiologists Maharashtra State) to get the articles for the newsletter. I take pride in saying that during my tenure as SAMS editor, I ensured that each and every branch of SAMS got an opportunity to participate and my work was really appreciated.

After my first National conference in 1996, there was a big gap and I attended the second National conference at Agra where I was called as a faculty. It was a real gamechanger. I Got inspired by many teachers and made new friends. National ISA offered an academic and cultural platform to get in touch with my hobbies like dancing and singing. My work got recognised and presentations improved my knowledge and skills.

ISA gave a new meaning to my life. Over the years, I have got woven with the threads of ISA to make a colourful life full of challenges and excitement!!!

Thank you ISA!
Long live ISA !!

my ISA, my PRIDE



Dr. Swati Jindal
Associate Professor
ISA No. S3544



Dr Deepika Gupta
Assistant Professor
ISA No. D2282



Dr Avneet Singh
Assistant Professor
ISA No. A3033

GOVERNMENT MEDICAL COLLEGE AND HOSPITAL, SECTOR 32, CHANDIGARH

ISA is not merely a professional body of anaesthesiologists; it fosters a community dedicated to the best practices in modern anaesthesia. It takes pride in providing patient-centered solutions rooted in India's unique socio-cultural diversity and resource challenges, while upholding the core principles of evidence-based care.

ISA has endeavoured to disseminate knowledge, skills, and wisdom among its members to bring everyone onto a common platform. A key focus has been the twice-weekly online national PG classes, which use a case-driven, interactive approach involving anaesthesiologists at various training and practice levels. The webinar series CRISP (Clinical Reasoning and Problem Solving) and CLIP (Clinical Practice Oriented) proved invaluable during the COVID-19 pandemic.

ISA today has 30 state branches and 238 city branches. Educational programmes are conducted regularly by its local and regional chapters ensuring that critical knowledge and lifesaving skills reach every corner of the country.

To standardise skill development, reduce perioperative complications, and foster a culture of patient safety, ISA has partnered with 20 simulation centres across the country to refine technical and non-technical perioperative skills including crisis management, teamwork, and communication. The annual ISACON conference, hosted under the aegis of ISA, serves as a major platform where anaesthesiologists- both young and senior from across the country gather for academic exchange, knowledge sharing, and professional collaboration. The workshops, lectures, panel discussions, pro-con debates, and demonstrations enable national and international experts to provide delegates with opportunities to learn about emerging developments and the latest research in the field of anaesthesiology. The society's Yuvacon initiative is dedicated to nurturing young anaesthesiologists and providing them with a platform to showcase their academic credentials and research.

The Indian Journal of Anaesthesia (IJA) which is the official open-access journal of ISA has been in publication since 1953 and continues to grow in

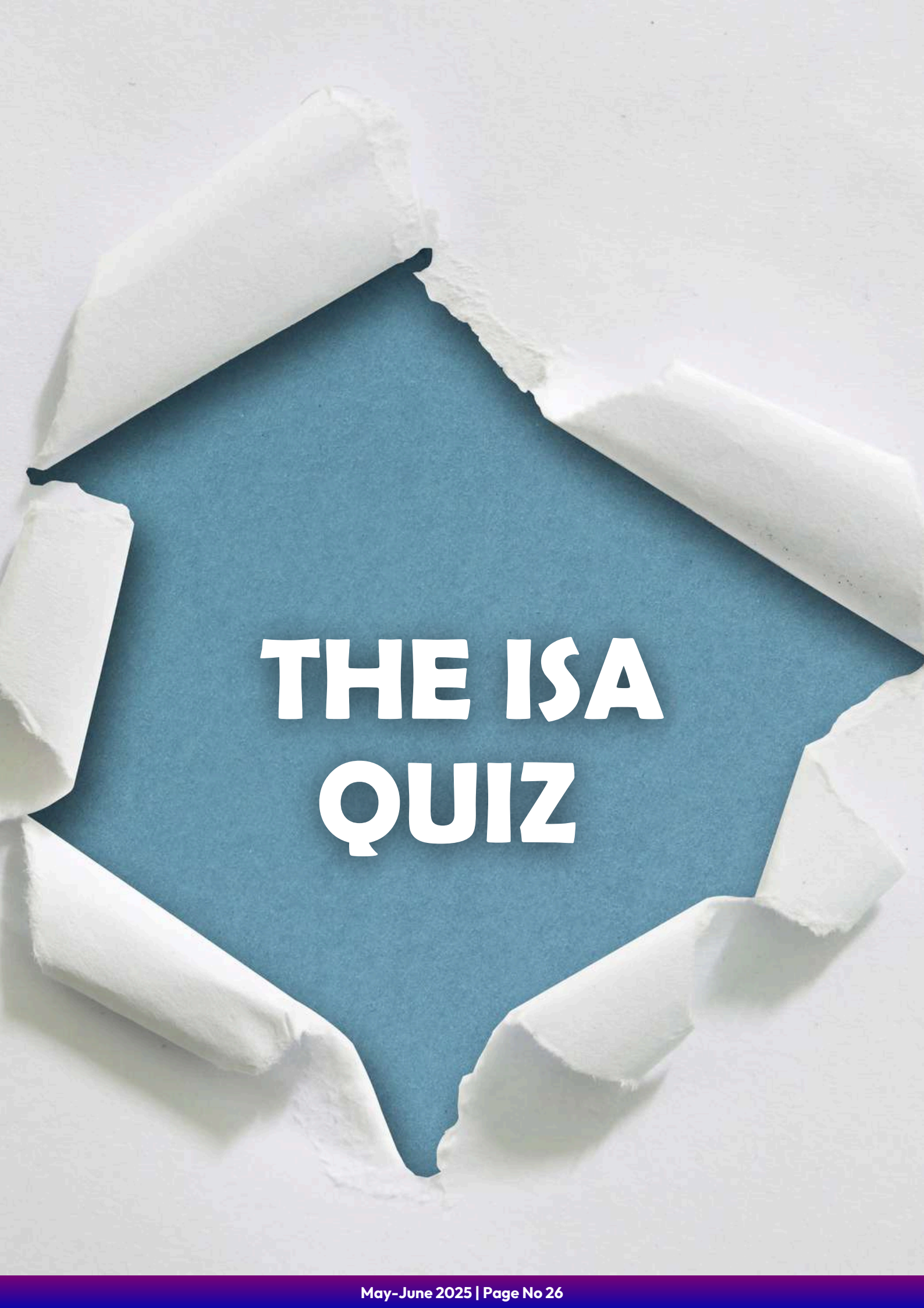
reputation. It publishes across anaesthesiology, intensive care, pain medicine, trauma and emergency care. IJA has adopted modern formats like infographics, podcasts, blogs, and REAP webinars to make scientific learning more accessible.

To coordinate and enhance its academic activities, ISA launched the College of Indian Society of Anaesthesiologists (CISA) in October 2024. Alongside, the open-access journal Practical Evidence in Anaesthesia Knowledge (PEAK) was initiated as the official journal of CISA to complement the IJA. Through its newsletter, VAPOUR, ISA keeps its members informed about vibrant activities, strengthening openness and inclusivity.

ISA continues to lead the development of evidence-based national guidelines that standardise anaesthesia care practices across India. Notable recent publications include the practice guidelines on preoperative investigations in 2022 and perioperative fasting and feeding guidelines for adults, obstetric, paediatric, and bariatric patients published in 2020. Recently a fellowship programme has been introduced wherein selected members can enhance their academic and research skills while gaining editorial experience and benefitting from mentorship.

We have all been associated in various capacities with ISA since the beginning of our professional journeys in the field of Anaesthesia. We remain deeply indebted to ISA for providing invaluable opportunities to present our work and contribute meaningfully at various stages of our careers. We are confident that ISA will continue to be a trailblazer carrying forward the vision of its past leaders and staying true to its mission of advancing anaesthesiology while serving its members with dedication.





THE ISA QUIZ

Quiz: My ISA, My Pride



Dr. Rama Krishna Reddy Mudiganti
Professor of Anaesthesia,
PMRIMS, Hyderabad
GC Member, ISA



Dr. Abhyuday Kumar
Associate Professor,
Department of Anaesthesiology
AIIMS Patna

1. Which ISA member was awarded Padma Shri, the fourth highest Indian civilian honour, for her extensive work in road safety awareness and training.

- A. Dr. Barkha Agrawal
- B. Dr. Gauri Arora
- C. Dr. Kirti Gujarkar
- D. Dr. Maya Tandon

Answer: D. Dr. Maya Tandon

2. The ISA hosted the First Independent Annual National Conference in 1965 at:

- A. Mumbai
- B. Hyderabad
- C. Delhi
- D. Kolkata

Answer: B. Hyderabad

3. The ISA published its own journal, the Indian Journal of Anaesthesia (IJA) for the first time in:

- A. 1953
- B. 1958
- C. 1959
- D. 1982

Answer: A. 1953

4. The blue and white colour of the ISA flag signifies:

- A. Peace and Service
- B. Medical gases
- C. Medical ethics and scientific spirit
- D. Humanity and Trust

Answer: B. Medical gases

5. "Life time achievement award – ISA" is awarded every year to honour whom:

- A. Dr. T. N. Jha
- B. Dr. Venkat Rao
- C. Dr. A. P. Singhal
- D. Dr. K. P. Chansoriya

Answer: C. Dr. A. P. Singhal





ISA ACTIVITIES

ISA ACTIVITIES

ISA Kolhapur city branch

Public Awareness Programme (01-05-25)

A public awareness programme and release of Anaesthesia booklet for common people in local language was held, followed by COLS activity. The programme included question-answer session regarding doubts about Anaesthesia by common people and scientific explanation by experts (Dr Sandeep Kadam, Dr Rashmee Chavan).

A small handy booklet in Marathi language containing basic information regarding anaesthesia and the myths related to it was also released. The programme was extensively covered by the media.

भूलतज्ञ संघटना कोल्हापूर
आयोजित

भूलशास्त्रविषयक आणि
आरोग्यविषयक जनजागृती अभियान

प्रमुख वक्ते

पद्मश्री डॉ. हिमंतराव बावस्कर
MBBS, MD
विषय : ग्रामीण भारत आणि
आंतरराष्ट्रीय दर्जाचे मूलभूत संशोधन

सन्माननीय अतिथी

डॉ. प्रतापसिंह वरुटे
MBBS, MS, FRCS (Glasgow)
विषय : भूलशास्त्र -
शस्त्रक्रियेसाठी वरदान

प्रमुख उपस्थिती

सर्व पदाधिकारी कोल्हापूर सर्जिकल सोसायटी

गुरुवार
1 मे 2025

स्थळ : शाहू स्मारक
दसरा चौक, कोल्हापूर

वेळ : सायं. 6 ते 9

प्रवेश
विनामूल्य

डॉ. प्रवीण चव्हाण
ज्येष्ठ SAK

डॉ. संदीप कदम
ज्येष्ठ SAK



संशोधनासाठी डॉक्टरांनी पुढे यावे : डॉ. बावस्कर
कोल्हापूर सर्जिकल सोसायटी, भूलशास्त्र संघटनेतर्फे जनजागृती कार्यक्रम

कोल्हापूर : पुढारी वृत्तसेवा
डॉक्टरांनी नेहमी आपली संशोधन जुरी वाढवून संशोधन केले पाहिजे. आपल्या परितरात कोणत्या समस्यांमुळे लोक प्रसन्न आहेत, हे पाहून त्याचे संशोधन करून विविध प्रकारच्या उपचार पद्धती शोधणे आवश्यक आहे, असे प्रतिपादन पद्मश्री पुरस्कार विजेते डॉ. हिमंतराव बावस्कर यांनी केले. कोल्हापूर सर्जिकल सोसायटी आणि कोल्हापूर भूलशास्त्र संघटना यांच्या संयुक्त विद्यमाने जनजागृती कार्यक्रमात ते बोलत होते. रात्री साहू स्मारक भवन येथे हा कार्यक्रम झाला. डॉ. बावस्कर म्हणाले, मोबाईल, टीव्ही, आणि प्लॅटिस्टिकचे विक्रमां यांमुळे भारत सापडला आहे. कुत्रेच येथेच अतिवासांमुळे मेंदूची कार्यक्षमता कमी होत आहे. पिस्तूल आपुनिक होत आहे; परंतु एआयएलएल तंत्रज्ञान हे मानवाच्या मेंदूवर ताबा मिळवत आहे. याचा दुष्परिणाम पुढच्या पिढीला

कोल्हापूर : 'भूल गोष्टी' लघु पुस्तिकेचे प्रकाशन करतांना डॉ. हिमंतराव बावस्कर, सोबत डॉ. प्रताप वरुटे, डॉ. आरती जाधव, डॉ. प्रवीण चव्हाण, डॉ. यानसिंग आडनाईक आदी.

भोगाचा लागेल, त्यामुळे परदेशात जरी लिंकला तरी ते ज्ञान हे आपल्या देशासाठी वापरा. देश सेवा करा असा संल्लोदोखील डॉ. बावस्कर यांनी दिले. डॉ. संदीप कदम, डॉ. रश्मी चव्हाण यांनी वेवदांतील प्रगुती घरेष भूलशास्त्राचे भलाय माघर मार्गदर्शन केले. डॉ. सखील सोमन यांनी भूलशास्त्राच्या जुन्या पद्धतींवरून आधुनिक भूलशास्त्रावरील बदलावर मार्गदर्शन केले. कार्यक्रमामदरम्यान

'भूल गोष्टी' या लघुपुस्तिकेचे प्रकाशन करण्यात आले. प्रास्ताविक डॉ. प्रताप वरुटे यांनी केले. भूलशास्त्र संघटनेच्या अध्यक्ष डॉ. आरती जाधव, रात्रिय डॉ. प्रवीण चव्हाण, डॉ. दिलीप देसाई, डॉ. आशिष जलवडे, डॉ. आनंद कामत, डॉ. रवींद्र खेत, डॉ. आबाबाईक किर्के, डॉ. संदीप कदम, डॉ. सुनील माडकरणी, डॉ. शिवाजी जाधव उपस्थित होते. जाधव डॉ. मादविंग आडनाईक यांनी मानले.

ISA, CISA & CAHO joint webinar on PCPNDT Act and Anaesthesiologists

23rd May 2025

Several facts about the PCPNDT act and the practical challenges in using the USG Machine were deciphered in this webinar. Dr Srinivasulu, Dr Rishabh Kumar Rana, Ms Dhanya Michael, Dr Ranjit James and Dr Pratibha Kane spoke in the webinar.



ISA
Indian Society of
Anaesthesiologists

CISA
Central Indian Society of
Anaesthesiologists

CAHO
Committed to Safer Healthcare

PCPNDT ACT
vis-à-vis
THERAPEUTIC CARE
– Roadblocks and Way Forward

 **23rd May 2025 | 6 pm to 7.30 pm**

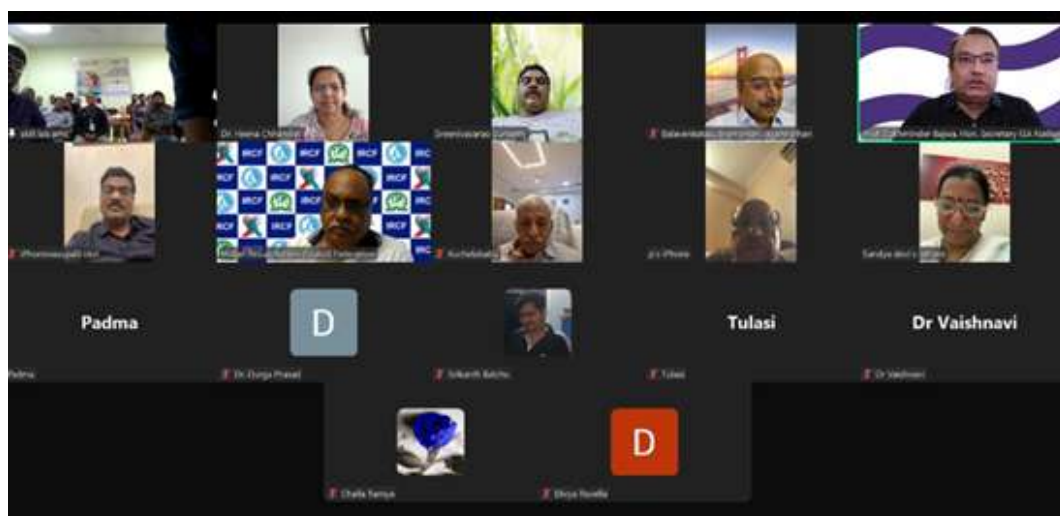
The Pre-Conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994 (PCPNDT Act) is an Indian legislation enacted to prevent sex-selective abortions and regulate the use of pre-natal diagnostic techniques.

Join us for an insightful webinar exploring the practical challenges faced by doctors and healthcare administrators, including but not limited to anaesthetists, critical care specialists, and emergency physicians, in complying with the PCPNDT Act while using point-of-care ultrasound for diagnostic and therapeutic purposes.

Emergency Anesthesia Simulation Workshop at the NELS Skill Lab, Andhra Medical College, Visakhapatnam

(25th May 2025)

The workshop was a truly enriching experience for both the faculty and the delegates. It was inaugurated online.



ISA Malanad city branch

INSIGHT 2025, Venue- Hotel Kabani Palace, Muvattupuha (01-06-25)

ISA Malanad city branch along with Idukki Malanad Ophthalmic Club (IMOC) conducted a CPD programme INSIGHT 2025, Recharge, Reflect, Realign Professional and Personal Development. Following talks were included:

-Learning, Unlearning and Re-learning (Dr K K Diwakar, Dean MOSC Medical College, Kolencherry)

- Nourish to flourish- Diet and Physical Wellbeing (Mrs Neetha Pradeep)
- Chaos to connection- Quality parenting (Mr Sunil D Kuruvilla)
- Pixel to protection- Eye safety in digital world (Mr Mathew G Vadath)
- Art of Resilience- Coping with failures and negativity (Mr S Sunil D Kuruvilla)
- Weaving wealth with wisdom (Dr Cessal T Kainickal)



21-06-25, Venue- MCS Hospital

BLS class and hands-on training was conducted for healthcare providers by ISA Malanad branch in association with IMA Muvattupuzha which was attended by 50 participants.




Kerala
Veterinary, Fisheries &
Aquaculture
Department
Kerala
State Council of
Medicine
Kerala
State Council of
Medicine
Kerala
State Council of
Medicine

**BASIC LIFE SUPPORT
CLASS FOR HEALTHCARE
PROVIDERS**

INSTRUCTORS: DR VINOD S NAIR ,
DR MANJIT GEORGE ,
DR RAVEENDRANATH KAMMATH

JUNE 21, 2025 , TIME 8:30 AM
MCS HOSPITAL , MUVATTUPUZHA

Organised by Society of Anaesthesiologists Pimpri Chinchwad (SAPC) YUVAMAHAACON 2025

(13th,14th and 15th June 2025)

SAPC under the aegis of Society of Anaesthesiologists Maharashtra State hosted Yuvamahacon 2025. Highlights of the conference were as follows:-

- It included four workshops on Haemodynamic Monitoring, USG Guided Blocks, Mechanical Ventilation and POCUS. Total 168 delegates participated in the workshops.
- Followed by two days conference at Hotel Regenta in Akurdi where Yuva were chosen as exclusive speakers with chairing and guiding by experienced chairpersons. Total 390 delegates participated in the conference, accredited with six MMC credit points.
- SAPC quarterly magazine "Pulse" was released by the hands of Dignitaries. The keynote address was by Dr. Balavenkat Subramanian, ISA National President.
- Paper and poster presentations had an overwhelming response from 134 students and Yuva consultants.
- Art gallery- Frozen Moments- where participants displayed their art work.
- Cultural evening included performances from SAPC members followed by Grand Finale with "Patriotic Theme Rampwalk".



ISA Visakhapatnam city branch

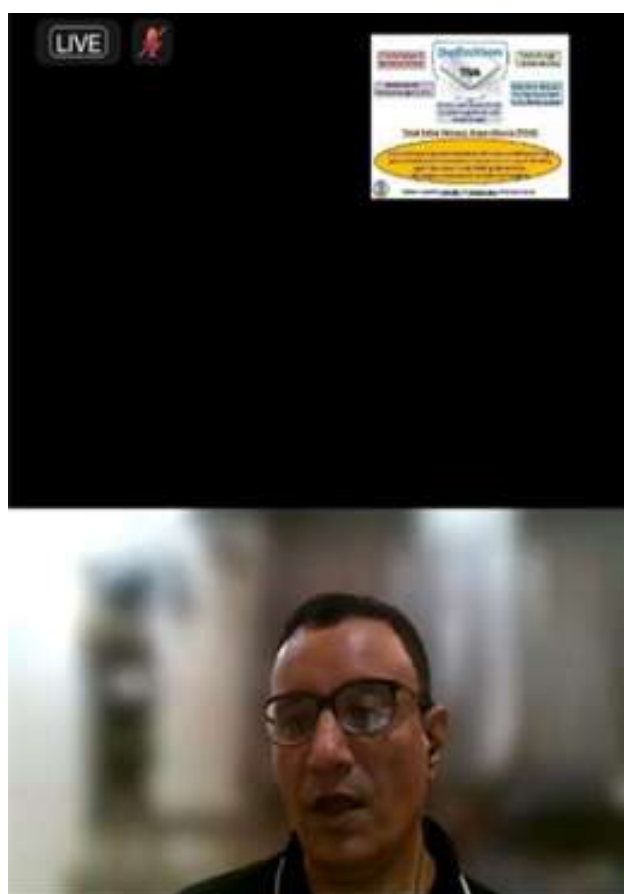
(27th June 2025)

ISA Visakhapatnam city branch conducted a webinar on TIVA TCI with recent updates on 27th June 2025 at 6 pm.

The speaker of this webinar was Dr Tushar M Chokshi, Consultant Anaesthesiologist Vadodara.

The Webinar was conducted by Dr Rama Krishna Reddy, GC Member ISA National Dean along with Dr K.L. Subramanyam, Anantpuram State Executive Member and Dr M Srinivasan, Hon. Secretary ISA Tamilnadu.

124 Delegates participated in this webinar.





ART & LITERARY PAGES

Zen drawing and idol making

Dr. Pallavi Kulkarni

Anaesthesiologist

Kolhapur

ISA No. P2620



The Ganapati idol is completely hand moulded and made of terracotta.



OWNING MY IMPERFECTIONS -Zen drawing

Water Colour Paintings

Dr. Hemlata Sanjay Desai

Anaesthesiologist

Dept.of CVTS, RCSMGM Kolhapur

Society of Anaesthesiologists, Kolhapur

ISA No. H0645/A



"Konkan diaries"



YUVA PAGES



My ISA, My Pride

*In hush of drapes where the shadows lie,
we guard each breath as moments fly .
Behind the mask unseen we stand,
Steady heart and gentle hand.
My ISA, My Pride, My Flame,
In every Case we sign in our Name.*

DR. ANKITA SAINI
DNB ANAESTHESIA
MAX SUPERSPECIALITY HOSPITAL, DELHI
ISA NO. A5124/A

Puzzle Pride

A crossword on 'Our ISA, Our pride'

Dr Milon V. Mitragotri

Assistant Professor

Department of Anaesthesiology

Karnataka Medical College and

Research Institute, Hubballi

ISA No. M1886



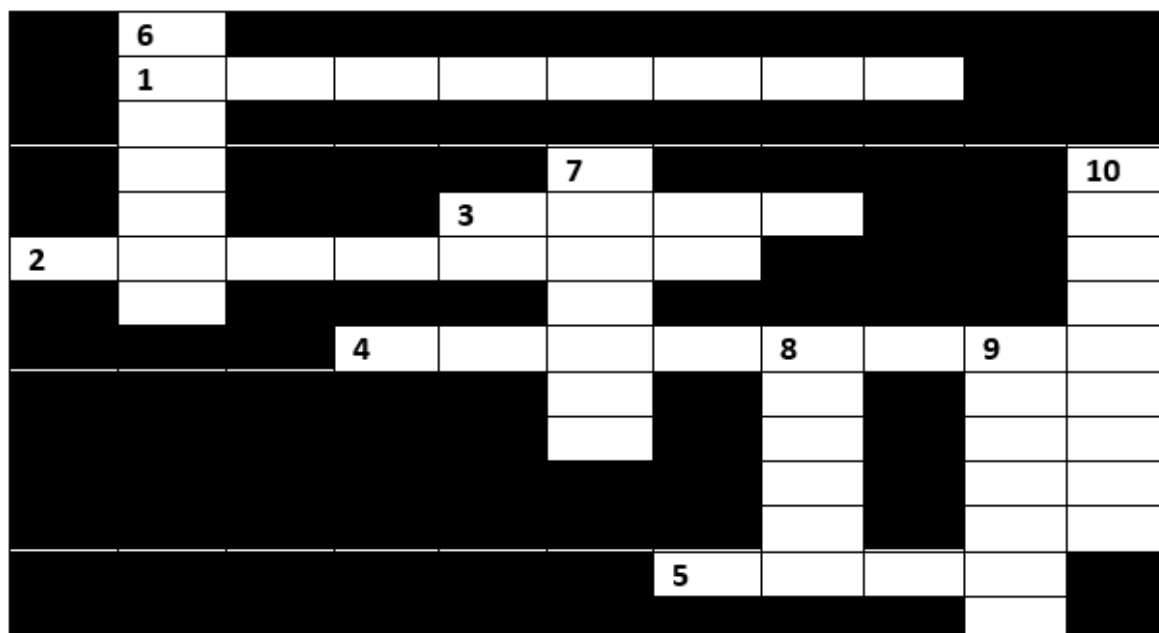
CLUES

ACROSS

1. Vapour has released total issues till date excluding this issue. (8)
2. Current ISA National Headquarters is located at in Punjab.(7)
3.award is a prestigious award instituted by ISA for best free paper in various subspecialties. (4)
4. ISA observes its birthday on 30th of 1947.(8)
5. The academic wing of ISA established in the year is called(4)

DOWN

6. Founding President of ISA was (7)
7.is the annual quiz conducted at ISACON for postgraduates.(7)
8. First annual conference of ISA was held at Seth GS medical college between 23rd and 24th December. (6)
9. The motto of ISA embedded in its logo is vigilance.(7)
10. First independent annual conference of ISA was held atin 1965.(9)



Answers

ACROSS

1. Vapour has released total NINETEEN issues till date excluding this issue. (8)
2. Current ISA National headquarters is located at PATIALA, Punjab.(7)
3. KOPS award is a prestigious award instituted by ISA for best free paper in various subspecialities. (4)
4. ISA observes its birthday on 30th of DECEMBER, 1947. (8)
5. The academic wing of ISA established in the year is called CISA (4)

DOWN

6. Founding President of ISA was Dr M.N. DESAI. (7)
7. GOLDCON is the annual quiz conducted at ISACON for postgraduates.(7)
8. First annual conference of ISA was held at Seth GS medical college, MUMBAI between 23rd and 24th December. (6)
9. The motto of ISA embedded in its logo is ETERNAL vigilance.(7)
10. First independent annual conference of ISA was held at HYDERABAD in 1965.(9)

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My ISA, My Pride

Dr. Namrata Patil Yadav

Karad, Maharashtra

ISA No.N2109



From being a new member of ISA Karad to being the Treasurer of the branch for the year 25-26, ISA Karad has influenced me and contributed to my growth in many ways.

Nevertheless, every member of ISA Karad is proud of ISA Karad for the right reasons.

Ever since its formation in March 2019, ISA Karad has been an achiever with several awards and achievements at the state and national level including best city branch, branch with best ether day celebration, best membership drive and best public awareness.

ISA Karad has always been in the forefront of public awareness about anaesthesia and COLS activities. Walkathon conducted during Dussehra 2022 as a part of Flame event on the Sangam Ghat (scenic spot of Karad) with the clipboards and slogans about anaesthesia was a major hit event of that year. It included a street play to create awareness of COLS followed by training of public with hands-on the mannequin. The dedicated members of ISA Karad continue to regularly conduct COLS for laypersons and frontline workers like security personnel and policemen. During Navaratri (2022), ISA Karad took COLS mission to a higher level with 9 days of life-saving skills training imparted in Daityanivarani Devi Mandir to all the devotees including the young and the old.

On the academic front, ISA Karad has hosted conferences like RESPICON , RAINCON , PGCON, and most recently the 4th BIENNIAL CME (2024) with the theme of “Update, Upgrade and Enrich” with recent advances, existing knowledge and skill sets. The BIENNIAL CME was an academic extravaganza conducted in KVV, Karad with about 150 national and international faculties, 3 scientific halls, 100 paper and poster presentations, 2 orations and a grand inaugural ceremony. This BIENNIAL CME provided a platform and opportunity for a ‘yuva’ member like me. Being the joint organising secretary, I was able to interact with all the faculties and could derive knowledge and wisdom from them. The distinctive feature of ISA Karad branch is that it welcomes new members with warmth and opens up new horizons for the ‘yuva’ members.

Apart from all the academic and awareness activities, members of ISA Karad also regularly meet and conduct cultural programmes where they present their cultural talents.

All the past and present office bearers have made our branch well organised and progressive with their constant efforts and I am proud to say that we ‘yuva’ members will continue to do so in the future. We aim to take ISA Karad city branch to newer heights.

Kaleidoscope

A LEGEND SPEAKS

A tryst with.....

Dr Mohan Mathew

**Chairman, Advisory Board, Welcare
Hospitals, Ernakulum, Kerala
ISA No. M0242**



Dr Mohan Mathew has 54 years of Anaesthesia and 36 years of Critical Care medicine to his credit. He is a senior anaesthesiologist and intensivist, a guide and inspiration to many.

Hello Sir! Warm greetings from the ISA Newsletter "Vapour!"

You have been a versatile anaesthesia and critical care professional, aptly called as the 'Legend of Anaesthesia' and the 'Pioneer of Critical Care' in Kerala. Today, we are privileged to have this opportunity to learn about your remarkable professional journey and to gain valuable insights from your extensive experiences.



1. Please tell us about yourself. You started your career as an anaesthesiologist and later shifted to critical care. Can you tell us what made you shift over to critical care?

It was, in many ways, destiny. I joined Christian Medical College(CMC), Vellore, for my post-graduation. In those days, students coming from other colleges were required to complete a Senior House Residency before being eligible for postgraduate training. After completing this, I applied for both Paediatrics and Anaesthesia and was allotted Anaesthesia.

In March 1975, I returned to my home state of Kerala and appeared for a Public Service Commission (PSC) interview. I was selected, and I must proudly say that I became the 21st qualified anaesthesiologist in Kerala. However, after a month in government service, I decided to move to the private sector and joined the Medical Mission Hospital, Kolenchery.

When I joined, it was a 100-bed hospital. Over the next 13 years, I witnessed its growth into a 450-bedded institution. In 1988, I moved to the Sultanate of Oman, where I was appointed as a Major in

the Armed Forces Hospital, Muscat — the flagship hospital of the Army. I was offered a British contract, and it was here that I was first introduced to the concept of Critical Care.

The Critical Care Department came under the Chief of Anaesthesia and was designated as the Department of Anaesthesia and Critical Care. It was a six-bedded Intensive Care Unit headed by Dr. M.F. Dawood, who had trained under Prof. Jack Tinker — the pioneer of Critical Care in the United Kingdom. Under Dr. Dawood's mentorship, I received my first lessons in Critical Care.

From 1988, until my retirement from clinical medicine in May 2025, I divided my professional time between Anaesthesia (about 65%) and Critical Care (about 35%). One of the main reasons I was drawn to Critical Care was the immense confidence of being an anaesthesiologist. I was not anxious about postoperative complications. My colleagues in various departments began to see me not only as an Anaesthesiologist but also as a Physician. I could directly call consultants or send referrals, and they would promptly attend to it.

I also began to interact more deeply with patients and their families — something that had earlier been limited to pre-anaesthetic evaluations. This became the way I practised Critical Care & Anaesthesia till I retired. Although I was granted admission rights, I used them sparingly.



2. What challenges did you face in the early days of your profession as an anaesthesiologist?

In those days, I chose a path less travelled. Looking back over the last 50 years, I can vividly see how far our speciality has come and how much it has evolved before my very eyes.

My first encounter with anaesthesia was in 1971 — a year before I joined Christian Medical College, Vellore. It was an open-drop ether and ethyl chloride technique, taught to me by an ENT surgeon who performed guillotine tonsillectomies. At that time, I had absolutely no understanding of patient monitoring. I must have administered anaesthesia for four or five such cases, under the supervision of the surgeon who operated and, at the same time, watched over the head end, guiding me when to stop pouring ether over the Schimmelbusch mask.

At CMC, my mentor was Dr. Martin Isaac, the first Gold Medallist in MD Anaesthesia from the All India Institute of Medical Sciences, New Delhi. Compared to today's standards, those were truly vintage days of anaesthesia.

Pre-anaesthetic medication usually consisted of tablet Phenergan, which served both as a sedative and antihistamine. Anaesthetists depended largely on manual skills, keen observation, and clinical judgment. Intubation was performed using basic laryngoscopes, and airway management was considered a true art. Thiopentone was used for induction, and red rubber endotracheal tubes—cleaned and reused multiple times—were the norm. Metallic bougies were available to aid difficult intubations.

Muscle relaxation was achieved using succinylcholine, a rapid-onset, short-acting depolarising neuromuscular blocker. The non-depolarising agents available then were curare and flaxedil. There were no ventilators, so all ventilation was done manually by hand. Reversal of neuromuscular blockade was accomplished with neostigmine and atropine, or occasionally glycopyrrolate, to prevent bradycardia, salivation, and bronchospasm.

Spinal and epidural techniques were practised, though with far less precision and safety protocols than we have today. The 1970s saw growing awareness of anaesthetic related morbidity & mortality leading to early development of safety standards & protocols.

3. You have spent some time professionally abroad. Can you tell us how trauma services abroad differ from those in our country? How can we improve Trauma Care in our country?

The Iraq–Kuwait war was fought in 1990. The third triage station for American troops was established at the 1708 Contingency Hospital in Muscat — a highly modern field hospital for its time, located on a vast expanse of land behind the Seeb International Airport.

Since I was an expatriate anaesthesiologist, the Director of the Armed Forces Hospital appointed me as a liaison officer and guide for the American Army medical team stationed there. The so-called “Mother of all Battles” lasted just three days, but the lessons it offered in organised trauma care were immense.



Iraq-Kuwait war – Dr Mohan Matthews(center) with Bill Bernard(1st from left)

The American Medical Director posted in Muscat was Dr. Bill Bernard from the Shock Trauma Centre, Baltimore. We became good friends, and in 1991 he invited me to visit the world-renowned Shock Trauma Centre in Baltimore.

At that time, the Shock Trauma Centre was considered one of the most advanced trauma facilities in the world — the very place where, if the U.S. President were to suffer an accident, he would be taken for treatment. Its founder, Dr. R. Adams Cowley, who had passed away that same year, was a true visionary in trauma medicine. His influence remained central to the centre’s mission and philosophy. One of Dr. Cowley’s greatest contributions was the “Golden Hour” principle — the belief that trauma patients must receive definitive care within 60 minutes to survive. This concept became the cornerstone of modern trauma systems.

By the 1990s, Maryland had adopted helicopter-based transport systems to rapidly transfer trauma victims to specialised centres. The Shock Trauma Centre served as Maryland’s primary adult trauma facility, focusing on severe head and spinal injuries, and was operated under the University of Maryland Medical System since 1984.

A key concept that emerged from Baltimore was the “nearest appropriate hospital first” policy — ensuring that trauma patients were taken directly to a designated trauma centre, rather than to the nearest general hospital.

I must make a mention about its Design;

Multi-level architecture: To accommodate growing patient volume and specialised units, the centre adopted a vertical design, stacking trauma bays, operating rooms, and ICUs across multiple floors.

Zoning for efficiency: Architectural zoning separated high-acuity trauma care from recovery and administrative functions, streamlining workflows and minimising patient transfer times.

Helipad and Rapid Access Infrastructure

Helipads and rapid access: A rooftop helipad allowed direct airlift access, perfectly aligned with the “Golden Hour” philosophy.

Modular operating rooms: Operating rooms were designed with modular walls and ceiling-mounted equipment to allow rapid reconfiguration based on case complexity.

How can we improve trauma care in India?

To put it simply — we still lack true, dedicated trauma care centres. In India, almost every hospital claims to be a trauma centre, but few truly function as one. There is often no cohesion, no integration, and limited multidisciplinary coordination.

In some places, trauma care has become commercialised. The practice of offering commissions to ambulance drivers — sometimes as much as 20% of the total hospital bill — has become disturbingly common. This unethical system diverts critically injured patients away from appropriate facilities, leading to delays and poorer outcomes, especially in polytrauma cases.

4. Do you think that nowadays students take up Post Graduation in Anaesthesiology with the Goal of practising Critical Care? Can you share with us your early experiences in Critical Care?

From my early days in Anaesthesia, I have seen the field diversify tremendously — and always in ways that strengthened the core of our speciality. Today, Critical Care Medicine has evolved into an independent speciality with its own credentials and qualifications. Experience in Anaesthesia, however, remains the foundation — the starting block — for those entering Critical Care.

Anaesthesiologists are uniquely positioned to transition into this field because of their deep understanding of airway management, resuscitation, physiology, and pharmacology. The various branches that have grown out of Anaesthesia all share a common ethos: precision, vigilance, and patient-centred care.

Critical Care Units (ICUs): Managing ventilators, sedation, and life-support systems, as well as treating sepsis and multi-organ failure.

Emergency Medicine: Rapid airway management, resuscitation, and polytrauma stabilisation.

Pain Clinics: Managing acute and chronic pain through nerve blocks, epidurals, and pharmacologic therapies.

The hallmark of these subspecialties can be summarised in four key principles:

Precision and Vigilance: Continuous monitoring and rapid, evidence-based decision-making.

Multidisciplinary Collaboration: Working closely with specialists from other fields to ensure the best possible outcomes.

Ethical Responsibility: Upholding informed consent, patient safety, and confidentiality.

Technological Proficiency: Mastery of advanced monitoring tools, ultrasound-guided procedures, and, increasingly, artificial intelligence-assisted diagnostics.

My Early Experiences in Critical Care

Entering the world of Critical Care for the first time was like stepping into controlled chaos — much like entering a cockpit without yet knowing how to fly. Initially, it felt overwhelming. Over the years, however, I learned to mentally triage patients and prioritise interventions. With experience, the chaos began to make sense, and confidence slowly replaced uncertainty.

In a single ICU patient, one might encounter multiple simultaneous crises — early signs of organ failure worsened by sepsis, a ventilated patient with COPD and coronary artery disease, neurological deterioration, and perhaps even a subacute intestinal obstruction. How do you approach these complexities? It is a sink or swim situation. You quickly learn about sepsis protocols, ventilator settings, vasopressors, and sedation strategies. Procedural skills: Central lines, arterial blood gases, intubation—each skill I acquired was with supervision and repetition. Decision-making: You begin to understand triage, prognosticate and solve ethical dilemmas.

These lessons were not learned overnight. Rome was not built in a day, and neither was I as a critical care physician.

5. How would you rate your professional experience in Anaesthesia & Critical Care? Which is more satisfying?

The answer depends on what kind of professional satisfaction you're seeking.

Here's a nuanced comparison to help you reflect:

If you seek precision, control and technical finesse, anaesthesia may feel more satisfying.

If you value complex problem-solving, longitudinal care and emotional depth, Critical Care might resonate more with you. You might find critical care intellectually and emotionally engaging—especially with the evolving role of artificial intelligence, remote monitoring and multidisciplinary leadership. If you value procedural clarity and defined outcomes, Anaesthesia offers a rewarding path too.

6. You have held various administrative positions in professional bodies such as the ISA & the ISCCM. Tell us how you want these bodies to reach out to the practitioners. What should ISA as a body focus on?

- We should champion practitioner interests by promoting education & skill development. We should establish structured mentorship programmes pairing junior doctors with experienced anaesthesiologists and intensivists. This fosters guidance, role modelling, and career clarity.
- Highlight dual-speciality pathways (e.g., anaesthesia + critical care) and showcase success stories of practitioners who transitioned into leadership or academic roles.
- Develop CME modules that integrate anaesthesia with critical care scenarios, e.g., perioperative management of sepsis, ventilator strategies in the operating room. Also, focus on case-based learning.
- Maintain ethical & professional standards including wellbeing & mental health.
- Facilitate global exchange programmes and collaborations with World Federation of Society of Anaesthesiologists (WFSA) and Society of Critical Care Medicine (SCCM).
- ISA should also focus on advancing perioperative safety, digital integration, academic leadership, and national advocacy to elevate Anaesthesia and Critical Care across India.

7. You are credited with having organised the first state conference in Kerala in 1976. Can you share with us some interesting experiences?

Since it was the very first annual conference in the state of Kerala, we decided to include anaesthesiologists from ISA Madurai too, as our numbers were still quite small at the time.

In total, we had about 53 participants, including delegates who had come from Madurai. The conference featured a series of lectures presided over by Dr. K. P. Ramachandran, who later went on to become the National President of the Indian Society of Anaesthesiologists (ISA).

We were also privileged to have Dr. Gheevarghese as our Chief Guest. At the time, he was working as an anaesthesiologist in the United States. Dr. Vishwanathan, Professor of Anaesthesiology at Madurai Medical College, also attended the conference along with his postgraduate students.

Dr. Mohan Das, who was then working as an anaesthesiologist at Sree Chitra Institute, Trivandrum, served as the Secretary of the conference. He later went on to become the Director of Sree Chitra and the first Vice-Chancellor of the Kerala University of Health Sciences.

(As I was formulating this response, I received the shocking news of Dr. Mohan Das's passing in a private hospital in Bangalore. He was an anaesthesiologist who rose to great heights — accomplishments few in our country have attained. A proud son of ISA. Pranam.)

Dr. Mohan Das and I were colleagues at CMC, Vellore, and it was he who first approached me with the idea of organising the first ISA Kerala State Conference. Parting ways after the conference was

truly difficult. I still remember the touching scene as we bid farewell to delegates — well past midnight — who had travelled by bus from Trivandrum to Kolenchery.

Little did I realise then that history was being created. From that modest beginning, ISA Kerala has never looked back.

8. You had championed the cause for equality of anaesthetists in the state of Kerala in 1977 when you were Secretary of ISA, Kerala. How successful were you in this endeavour? Do you think we have achieved this equality status today?

I am deeply honoured and humbled that the Indian Society of Anaesthesiologists (ISA) recognises my contributions and remembers my journey. I joined as a Consultant anaesthesiologist at the Medical Mission Hospital, Kolenchery, in 1975. Throughout my service of over half a decade, I was paid the same salary as the Chiefs of Surgery and Medicine.

Looking through the prism of Anaesthesiology in Kerala in the mid-1970s, I often felt hurt. Many of my colleagues were selling themselves cheaply. It pained me to see that a lot of them were functioning almost like nurse anaesthetists, practising the art through experience alone, often without formal qualifications.

The year after the first state conference, I took over as the ISA State Secretary. During my tenure, I visited six centres across Kerala that had more than three qualified anaesthesiologists. I carried a single message for my colleagues then,

“You are equal to any other branch of medical speciality. No surgeon can work without you. Hold your head high and claim equal benefits as your surgeon.”

In those days, we were not even considered as a separate speciality. We were under the direct orders from the Professor of Surgery. But by the 1980s, most departments of Anaesthesia across Kerala had gained independent status, and today we have grown into a force to reckon with.

My call for recognition was heard — and answered. I remain forever grateful to the veterans and founding fathers of the ISA, many of whom I had the privilege to know personally.

Today, I salute them all with pride and gratitude.

Jai ISA!!!

I sincerely thank the Editor-in-Chief, Dr. Sukhminder Jit Singh Bajwa, and the entire editorial team of VAPOUR for giving me this opportunity and featuring me on this prestigious podium of Kaleidoscope.

Thank you, sir. We are grateful to you for your amazing inputs. You are a guiding light and a beacon of inspiration for us.

**Editorial team
VAPOUR**

Kaleidoscope

A dynamic Yuva ISA Leader speaks...

A tryst with.....

Dr Arunpandiyan V

**Head-Anaesthesiology & Critical Care,
Erode Medical Centre, Erode
ISA No. A 2367**



Dr Arunpandiyan V is a young anaesthesiologist & intensivist and a very active ISA leader. Hello and warm greetings from the ISA Newsletter “Vapour.” You have been a versatile anaesthesia and critical care professional and have put Erode on to the national map with its ISA activities. It is a pleasure to have you on the sets of Kaleidoscope.

1. You are active in both, Anaesthesiology and Critical Care. Please tell us in brief about yourself and your professional career.

I come from a family of doctors — my father and brothers are all in this noble profession — so the passion for medicine has been a part of me since childhood. Over the years, I’ve realised that what keeps me going is the excitement of learning something new every day and staying engaged with people and ideas around me. I’ve always been a social person who enjoys meeting friends, connecting with colleagues, and sharing time with those who add meaning to life.

At present, I head the Department of Anaesthesiology and Critical Care at Erode Medical Centre. We run a four-theatre operation complex with around 80 to 100 surgeries every month, supported by a 28-bedded ICU divided into IRCU, IMCU, CTICU, and CCU units. Alongside clinical work, I have been actively involved in academics — I initiated and currently coordinate the NBEMS programmes in our institution for both Anaesthesiology and Family Medicine. Balancing patient care, administration, and teaching keeps me constantly inspired and connected to the true essence of our profession.

2. You are practising in a Tier 2 city like Erode. With your European Diploma Degree in Critical Care & other degrees, you could very well have gone abroad for a job. What pulls you to practise in Erode?

My decision to stay and practice here is rooted deeply in personal experiences. During my early school days, my father suffered a myocardial infarction, and at that time — nearly three decades ago — I witnessed first-hand how limited access to optimal emergency care could affect lives in smaller towns. Those moments left a lasting mark on me and shaped my decision to pursue Anaesthesiology and later Critical Care — to make a difference for patients like him, especially in towns that deserve better access to advanced care.

My elder brother is the Program Director of Muscular Dystrophy at Arkansas Children’s Hospital in the USA, so I’ve had the opportunity to appreciate both sides — the professional security and vast opportunities that life abroad offers, and also the emotional distance that naturally comes with being

away from loved ones. I have great admiration for his journey and all that he has achieved — it truly inspires me. But for me, happiness has always been tied to being close to my roots — my family, my patients, and the community that gave me everything. I didn't pursue the European Diploma in Critical Care to look for life elsewhere; I did it to learn, grow, and serve better here — in the place that feels like home.

I come from Sembanarkoil, a small coastal village near Mayiladuthurai. Life took me to Erode when my wife joined her DNB in Ophthalmology. Over time, both of us grew comfortable here — the people, the work culture, and the opportunities made us feel at home. More than a decade has passed now, and Erode has truly become our second home. My parents still live in my hometown, and we visit each other often — so I've managed to stay rooted while growing professionally where I belong.

3. What challenges do you face in your clinical practice at Erode?

Having trained at tertiary centres like Meenakshi Mission Hospital, Madurai, and Apollo Hospitals, Chennai, I've always aimed to bring the same level of quality care to my practice at Erode. To achieve this, we've upgraded our setup with advanced equipment such as Dräger Atlan XL and Primus workstations, Philips Intellivue and Efficia monitors with CMS integration, and gold-standard airway tools like C-MAC video laryngoscopy and chip-on-tip bronchoscopy. Continuous staff training and teamwork help us sustain these standards.

Balancing such quality with patient affordability in a Tier 2 city is a constant challenge, but with strong institutional support and a team that shares the same vision, we have managed it well. Recruiting and retaining skilled manpower remains difficult, yet we continue to build a dedicated and motivated workforce.

Through the Erode Society of Anaesthesiologists (ESA), we are also addressing another challenge — the public's limited awareness about our speciality. Our initiatives like CPR and BLS training programmes, and the annual ESA awareness calendar — the first of its kind in India — distributed during a Walkathon, are aimed at breaking the myths about anaesthesiologists and bringing our profession closer to the public.

4. You have a Fellowship degree in Diabetology. This is something unique. You are closely linked with Diabetes and Anaesthesiology. Do you think that Endocrine Anaesthesia will come up as a speciality in the coming days?

My interest in Diabetology came from two key reasons. Firstly, to enhance my ability to manage blood sugar levels in high-risk surgical and ICU patients throughout the perioperative period. Secondly, my father has been practising Diabetology in our hometown for many years, and I've seen how he changes lives — not just as a doctor but as a guide who motivates people to adapt and follow up regularly.

I believe Endocrine Anaesthesia has great potential and deserves more recognition as a focused area within our field. While it may not emerge as a separate speciality in the near future, it certainly demands deeper understanding, as endocrine disorders like diabetes and obesity are increasingly shaping modern perioperative care.

5. Do you think that nowadays, students take up postgraduation in Anaesthesiology with the goal of practising Critical Care? Is Critical care practice more rewarding than Anaesthesiology practice?

Nowadays, postgraduates are well aware of the various sub- and super-specialities available to them, and Critical Care continues to attract many. Each field, however, has its own pros and cons. I believe it is important for trainees to first master core Anaesthesiology before branching into Critical Care, as the skills and judgment gained in anaesthesia form the foundation for safe and effective ICU practice. Personally, I don't see Anaesthesiology and Critical Care as two separate workspaces in my setup — they complement each other seamlessly. We handle the entire perioperative journey of a surgical patient, and since many of our cases are high-risk, it is essential to plan and manage everything from the start through to ICU care.

In terms of recognition, Critical Care currently enjoys greater visibility among both the public and fellow doctors. But as an organisation, we are constantly working to ensure Anaesthesiology also receives the recognition it truly deserves, as both fields are equally critical to patient outcomes.

6. You are a winner of the ISA Young Talent Award in 2024. Your city branch of Erode won three national awards in 2024 when you were the Secretary of the branch. What were your experiences as regards infusing enthusiasm and motivation in the ISA members? How did you make the branch so vibrant?

Being part of the Erode ISA branch allowed me to gain a deep understanding of our society — its history, legacy, and the achievements of past state and national leaders — thanks to the guidance of our seniors. Our vision was to carry forward Erode's rich traditions while creating a more engaging and inclusive environment for all members.

We transformed monthly meetings into fun-filled experiences alongside academic sessions, introducing unique activities such as OT scrubs fashion parades, Tamil poem contests, rangoli competition, tug-of-war, quizzes with exciting gifts, state-level Tamil debate, photography contests, and various games and sports events. These activities encouraged active participation from every member and became a major draw, especially for young ESA members.

The Pongal Kondattam was introduced as a separate celebration. In the first year, it was a single-day family event within ESA, and in the following year, it expanded into a week-long celebration with state-level participation on the concluding day.

Community and social initiatives were equally important. Our blood donation camps, coordinated under the guidance of Dr. Chitra, brought seniors and juniors together. We also conceptualised and produced professionally made regional-language BLS and AED videos. The idea for our public awareness calendar started with our treasurer, Dr. Karthi VM, and was executed by a dedicated team, reflecting collaboration at every level.

We renewed the society registration, which had lapsed for few years, and implemented transparent accounting and auditing, gaining respect from all ESA members. Teamwork and brotherhood, values I carry from my Stanley Medical College days, were at the core of our approach — giving every member space and responsibility to contribute.

None of this would have been possible without the wholehearted support of our ESA members — seniors, colleagues, and friends (a special mention to Dr. Nithiyanandhan P, our upcoming ESA

Secretary) and, of course, my family, with special thanks to my wife, Dr. Amritha, for her constant encouragement and understanding.

Nothing we initiated was ever done with awards in mind — the recognitions we received were simply the by-products of sincere teamwork and shared passion. These acknowledgments from ISA National were truly motivating and helped us grow into a stronger, more vibrant society.

It was this collective spirit and unity that ultimately made it possible for us to host one of the finest state conferences — the O₂-themed ISACON Tamil Nadu 2025 at Erode.

7. You were the dynamic Organising Secretary of ISACON Tamilnadu 2025 at Erode. It was O₂ themed conference. What made you take up this theme?

Ever since my college days, I had been thinking of doing something big, meaningful, and memorable with the idea of oxygen. Oxygen is universally recognised as the lifeline, and during the COVID-19 pandemic, we experienced first hand how crucial and yet scarce it can be.

When my co-organisers — Dr. Saravanakumar (Chairman) and Dr. Karthi VM (Treasurer) — and I met on the very day we secured the bid for Erode, our chairman, Dr. Saravanakumar, suggested the name “O₂”, and we immediately felt it was perfect. It symbolised life and vitality, and also served as a tribute to the countless lives saved during the pandemic. The name was embraced by all ESA members, and we then designed a striking logo representing energy, life, and the spirit of anaesthesiology and critical care.

The O₂ theme gave the conference a unique identity, celebrating our profession’s vital role in preserving life and leaving a lasting impression on everyone who attended.

8. Apart from your academic pursuits, do you pursue hobbies and games to keep yourself happy?

My happiness comes from spending quality time with my family, kids, and parents. For physical fitness, I follow a routine of daily morning walks and 30–60 minutes of gym, five days a week.

I also love watching movies, which has always been my favourite way to relax, and it’s heartwarming to see my kids enjoying films just like me. Occasionally, I indulge in sports such as cricket, badminton, and kabaddi, often playing with our ESA members, which keeps me active and connected with colleagues in a fun way.

For me, balancing family, fitness, recreation, and work is essential — it keeps both my mind and body energised for professional and personal challenges.

9. What is your idea about the future of ISA? How can it grow further as a professional organisation?

I believe ISA should evolve into a more academic, technology-integrated, and youth-driven organisation, eventually becoming one of the strongest and most respected anaesthesiology societies in the world.

We already have an ISA app, but its potential is vast. I envision a next-generation integrated digital platform — “One Nation, One App” — that truly connects every anaesthesiologist in India. This platform could enable:

- Direct communication and notifications from ISA National or State to every member in real time.
- A grievance redressal system that makes reaching ISA leadership easier and more transparent.
- Nationwide conference and academic activity notifications visible to all members.
- Seamless facilitation of multicentric research and data collaboration.

- Standard Operating Protocols (SOPs) for various OR and ICU setups, ensuring uniform quality of care across all regions.
- Integration of meeting links, e-learning modules, and social-media-style engagement, all within a monitored, professional space — and a lot more possibilities as technology and teamwork evolve together.

Our state and city branches should act as mini learning and research hubs, encouraging simulation-based training, mentorship, and collaborative learning. Alongside public awareness campaigns, we must also focus on helping every anaesthesiologist realise the strength and significance of ISA. With inclusivity, innovation, and integrity as our foundation, ISA has the power not only to unify Indian anaesthesiologists but also to stand tall globally within WFSA — as a model society that blends tradition, technology, and teamwork to lead the way forward.

10. The number of members in ISA is growing fast with young members being added in large numbers. The young ISA members have a lot of potential and energy in them. Tell us how you would want them to work for ISA? What advice would you give to the ‘Yuva’ anaesthesia practitioners and intensivists of our country?

The first step is to strengthen ISA at the city level — that’s where true unity begins. Every member should feel that ISA is not a separate organisation, but our second family. When we create that sense of belonging, everything else falls into place.

We must also encourage social and extracurricular activities at the grassroots level, just like those successfully happening at the national level. A dedicated follow-up team can help these efforts reach even the smaller towns. The wonderful initiatives at the top are truly commendable — we only need to ensure their spirit gently percolates to every branch.

Sports play a vital role in bringing young anaesthesiologists together — they build friendship, teamwork, and pride in our profession.

To the 'Yuva' anaesthesiologists and intensivists, my message is simple:

- Be passionate and proud of your speciality — we are the unseen guardians of life.
- Keep learning beyond textbooks — physiology, technology, and teamwork matter equally.
- Be active in ISA — it’s your professional family. Stay humble, help colleagues, and focus on patient safety always.
- Take care of your physical and mental well-being — it’s the need of the hour. A healthy, balanced mind and body are essential to provide the best care for our patients and to sustain our passion for this demanding profession.
- Remember, the future of Indian Anaesthesiology will be written by the youth — write it boldly.
- Let curiosity be your lifelong companion. As the Tamil proverb wisely reminds us

“கற்றது கையளவு, கல்லாதது உலகளவு.”

What we have learned is just a handful; what remains to be learned is as vast as the world.

“May every ‘Yuva’ anaesthesiologist continue to learn, grow, and lift the ISA flag higher — with knowledge in one hand and compassion in the other.”

Thank you ISA National and the Vapour team for letting me share my journey and connect with the ISA family.

Thank you Sir! You are a true inspiration to the young anaesthesiologists of our nation. Keep up the momentum Sir. Thank you once again from the editorial team of VAPOUR.





72nd Annual Conference of the Indian Society of Anaesthesiologists

ISACON 2025

26th-30th November, 2025

Hotel Babylon International, Raipur, Chhattisgarh

CONFERENCE HIGHLIGHTS

Frontline Anaesthesia Innovations

Discover breakthroughs redefining perioperative care.



Interactive Panel Debates & Case Battles

Engage with experts. Challenge the status quo.



Hands-On Skill Labs & Immersive Workshops

Practical sessions that go beyond theory.



Next-Gen Poster & e-Presentation Arena

Spotlight on emerging talent and research.



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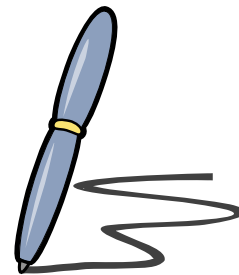
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*Thank you for entrusting us with your well-being—we're
committed to continuing this exceptional journey!!*

INVITATION TO CONTRIBUTE



‘Vapour’, the official newsletter of the Indian Society of Anaesthesiologists invites contribution of articles originally written by ISA members (Life and associate). The articles can be in the form of interesting case reports for discussion, articles on topics of current clinical relevance, photo-essays, articles on medicolegal /health/ financial/extracurricular issues of interest to the anaesthesiologists. Original literary works such as poems, funny cartoons or paintings on topics of anaesthesia are also welcome. **Information about extraordinary achievements /experiences of ISA members, book publication can be sent.**

The articles should be brief and written in font Times New Roman 12-14 size and presented in Microsoft office word document (rtf/doc files). Plagiarism and violation of copyrights should be strictly avoided. The articles should be e-mailed to isanhqvapour@yahoo.com with a covering letter addressed to the Honorary Secretary ISA National.

Dr Sukhminder Jit Singh Bajwa

Honorary Secretary, ISA National

&

Editor-in-Chief

VAPOUR

(The official newsletter of the ISA National)

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