

AHMEDABAD MEDICO NEWS Registered under RNI No. GUJENG/2006/17532
Published on 27th of Every Month under Regd. No. GAMC / 1548 / 2019-2021 issued
by SSP Ahmedabad. Valid upto 31-12-2021 and Permitted to Post at without Prepayment
No. PMG/HQ/99/2019-2021 Valid Upto 31-12-2021 Ahmedabad PSO on 27th Date of every Month

- IVF - ICSI (Test Tube Baby Center)
- Blastocyst Culture
- Operative Laparoscopy & Hysteroscopy
- Thermal Ablation
- 3D (4D Live) Color Sonography



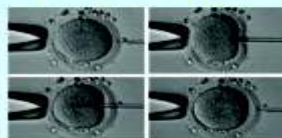
IVF



Dr. Laxmi Agrawal
(Art Specialist)



Dr. Hasmukh Agrawal
(Art Specialist)



Reshambai fertility Hospital

Center For Human Reproduction ivf-icsi (Test Tube Baby Center)

Swastik Complex, Opp. Rajsthan Hospital,
Shahibaug, Ahmedabad-380 004.

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Time : 10.00 a.m. to 2.00 p.m. • 5.00 p.m. to 7.30 p.m.



PUBLISHER AND EDITOR : **DR. DHIREN R. MEHTA** HON. SECRETARY, ON BEHALF OF
AHMEDABAD MEDICAL ASSOCIATION, AMA HOUSE, 1st FLOOR, Opp. H.K. Arts College,
ASHRAM ROAD, AHMEDABAD-380 009. PHONE : 2658 87 75

NAME OF THE PRINTING PRESS & ADDRESS :- **HITESHKUMAR & COMPANY**
AMRUT INDUSTRIAL ESTATE, DUDHESHWAR, AHMEDABAD - 380 004.
M. 92288 85157, E-mail : hiteshkumarandco@gmail.com

Month Face Value Rs. 08=00 - Yearly Face Value Rs. 96=00

AHMEDABAD MEDICAL ASSOCIATION

(Branch of Indian Medical Association)

ESTD : 1902

AHMEDABAD MEDICO NEWS

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President - AMA



DR. DHIREN R. MEHTA
Hon. Secretary - AMA

Imm. Past President - **DR. MONA P. DESAI**

VOL. 16

JULY-2021

ISSUE-3

HIGHLIGHTS

Programme

01-08-2021	દીબી હારેગા દેશ જીતેગા
08-08-2021	Scientific Program
08-08-2021	મૌસમ બદલ ડાલા
15-08-2021	Independence Day
13 to 15-08-2021	Sports Day
05-09-2021	119 th Annual Day

Article

Approach to Fever Short duration



'SERVICE TO MANKIND... NOT DESTINATION... BUT WAY OF LIFE'

Message From President's & Hon. Secretary's Desk



Dear Members,

“You give me the blood and I will give you the Independence.”

--- Netaji Subhash Chandra Bose

“If yet your blood does not rage, then it is water that flows in your veins. For what is the flush of youth, if it is not of service to the motherland.:

--- Chandra Shekhar Azad

Yes, this will be the month of Independence Day of our country. 15th August is celebrated in our country as Independence Day since we got freedom in 1947. This will be 76th Independence Day and we still think many times really are we free? We are still facing so many issues of racism, economical imbalance, social imbalance and even family issues for ladies. We have still to work hard in this direction. But at the another side, many people take disadvantage of freedom in many ways. But in these current days our only wish is to be free from COVID. We are really tired because of unending and most unpredictable situation of so many restrictions on social gathering, festivals and enjoyment. We really are now exhausted by doing extremely hard work. People want to go for outing, to play, to rejuvenate and to enjoy. Students want to go to their schools and colleges. But we all know that in this liquid and uncertain situation we have to follow all protocols when we are worrying for possible 3rd wave.

Last month, we had celebrated Happy Doctors` Day in unique and different way. We had tried to give best possible tribute to all Corona Warrior doctor members in presence of their family members. And how can we forget our beloved office (family) members respected Mr. Ramikaka and Mr. Prakashbhai ? We had given tribute to them also.

We are going to enjoy musical program of melodious songs, “Mausam Badal Diya” by our doctor friends, on 8th Aug.

We are going to celebrate our Sports Day this month on 13th and 14th August. The details are given at another place. We are inviting all members with their family members. Because of Corona protocols we have restricted for only Carrom and Table Tennis.

We are going to celebrate our most awaiting program, Annual Day, on 5th of September. We have invited nominations for different prizes and awards.

We also have completed election procedure and we will like to welcome our new President, Dr. Dilip Gadhavi and his new team for year 2021-22. We wish congratulations and the best of luck to all elected members. The date of installation will be informed in next month bulletin.

And once again at the last how can we forget Mahatma Gandhiji on Independence Day?

“Freedom is never deer at any price. It is the breath of life. What would a man not pay for living ? ”

Jay Hind

Jay AMA

Jay IMA

Dr. Kiritkumar C. Gadhavi

President

Ahmedabad Medical Association

Dr. Dhiren R. Mehta

Hon. Secretary

Ahmedabad Medical Association

HAPPY DOCTORS DAY - VIDEO CONFERENCE BY P.M. SHREE NARENDRA MODI AND SHREE DR. KETANBHAI DESAI FROM IMA H.Q.



HAPPY DOCTORS DAY - LIFE FOR LIFE



HAPPY DOCTORS DAY - LIFE FOR LIFE



HAPPY DOCTORS DAY - LIFE FOR LIFE



HAPPY DOCTORS DAY - LIFE FOR LIFE



HAPPY DOCTORS DAY - LIFE FOR LIFE



HAPPY DOCTORS DAY - LIFE FOR LIFE



Be a Member of
F.B.S.,
S.S.S., P.P.S.,
Health Scheme
and N.S.S.S.



NATIONAL PRESIDENT OF IMA HQ DR. J. A. JAYALAL
AND PRESIDENT ELECT IMA HQ DR. SAHJANAND PRASADSINGH



NATIONAL PRESIDENT OF IMA HQ DR. J. A. JAYALAL
AND PRESIDENT ELECT IMA HQ DR. SAHJANAND PRASADSINGH



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AND PRESIDENT ELECT IMA HQ DR. SAHJANAND PRASADSINGH



NATIONAL PRESIDENT OF IMA HQ DR. J. A. JAYALAL
AND PRESIDENT ELECT IMA HQ DR. SAHJANAND PRASADSINGH



TV-9 CONCLAVE ON “કોરોના કાળ સતર્ક ગુજરાત”



LADIES CLUB PROGRAMME



**A.M.A. BULLETIN INDEX**

Content	Page No.
» Message From President's & Hon. Secretary's Desk	2-3
» AMA Photos	4-14, 47-49
» CME for IMA - TB Harega Desh Jeetega.....	17
» AMA Annual Election 2021-22	18-19
» Scientific Programme.....	20
» AMA Sports Day	21
» मौसम बदल डाला, 15 th August - Independence Day	22-23
» AMA 119 th Annual Day Programme.....	24
» Annual Day Competitions	25
» Report of Doctor's Day	26
» New Life Members.....	27
» Obituary	28
» AMA Bulletin Return List	34-35
» Ladies Club Programme	36-37
» Articles	29-33, 38-44
» Advertisement	45-46



AHMEDABAD MEDICAL ASSOCIATION YEAR : 2020-2021

OFFICE BEARER


PRESIDENT DR. GADHAVI KIRITKUMAR C. 9998370353 VICE PRESIDENT DR. PATEL GARGI MAHESH 9824343744 DR. SHETH MAULIK SURESHCHANDRA 9825915464 HON. FINANCE SECRETARY DR. CHENWALA SUNIL B. 9428405490	HON. SECRETARY DR. MEHTA DHIREN RAMNIKLAL 9898854158 HON. JOINT. SECRETARY DR. RAO DEEPAK MUKUNDBHAI 9825210880 DR. SHAH SAHIL NITINKUMAR 9428501412 HON. LIB. SECRETARY DR. PANCHAL DEVAL DIVYESHKUMAR 9725753032 IMM. PAST PRESIDENT DR. MONA P. DESAI M. 98250 16769
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MANAGING COMMITTEE MEMBERS

P.G.	OTHER THAN P.G.
DR. DESAI RAJESH MOTIBHAI THALTEJ 9925193399 DR. DHARAIYA NISARG D. ELLISBRIDGE 7567200111 DR. GUPTA MAHESH G. SABARMATI 9825091092 DR. NAYAK MANJIT JITENDRABHAI NAVJIAVAN 9998227871 DR. PARIKH RUTVIJ B. ELLISBRIDGE 9427317915 DR. PATEL ANKIT M. GHATLODIA 9825336688 DR. PATEL MAITREYI JITENDRA NARANPURA 9979487372 DR. PATEL NAITIK B. MANINAGAR 9898129475 DR. PATEL SMEET S. BODAKDEV 7600001519 DR. PATEL SUMIT PRAVINBHAI GANDHINAGAR 9824223626 DR. PATEL YASH D. BODAKDEV 9687068399 DR. SHAH SUNIL N. NARANPURA 9824068716	DR. BHANSALI PIYUSH M. ABAWADI 8320365392 DR. DAVE KALPITA M. MEGHANINAGAR 9924558450 DR. MOD JAGDISH J THALTEJ 9898672481 DR. MOHATTA PRAKASH P. ISANPUR 9426355122 DR. PANDYA SATISH M. SHAHIBAUG 9825956928 DR. PATEL HEMANT B. RANIP 9879813741 DR. PATEL RAMESH ISHWARLAL PALDI 9426495264 DR. PATEL SURESH K. GHATLODIA 9824053995 DR. PATWARI H. G. BAPUNAGAR 9106318533 DR. RAVAL SHAILESH D BOPAL 9825300296 DR. SHAH JAGMOHAN M. RAKHIAL 9377403230 DR. SHAH JAYESH CHINUBHAI NARANPURA 9426274536


BULLETIN COMMITTEE

DR. MAHADEV DESAI DR. SANJEEV PHATAK DR. MAULIK SHETH	DR. KIRTI SANGHAVI DR. MONABEN DESAI DR. URVESH SHAH	DR. DEVAL PANCHAL DR. MANJIT NAYAK DR. VIPUL SHAH, ID
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Health and Family Welfare Department
Government of Gujarat



National Tuberculosis Elimination Programme



INVITATION

CME for Indian Medical Association

Place: AMA, Hall, Ahmedabad Date: 1st August 2021

Topic	Speaker	Time schedule
Registration and Breakfast		11:00 AM to 11:30 AM
Welcome address and light IAMP	Dignitaries from Dias	11:30 AM to 11:40 AM
Technical session – 1 Programmatic Updated in NTEP and TB Notification	Dr. Satish Makwana Joint Director -TB & State TB Officer Gandhinagar	11:40 AM to 12:20 PM
Technical session – 2 Diagnosis and Management of Drug Resistant TB	Dr Y K Jani Medical Consultant World Health Organization HQ, Gandhinagar	12:20 PM to 12:50 PM
Open Discussion	-	12:50 PM to 01:00 PM
Vote of thanks	Dr Tejas Shah, City TB Officer AMC	01:00 PM to 01:10 PM
Lunch	01:10 PM onwards	

TB Harega Desh Jeetega

#TBHAREGADESHJEETEGA #TBHAREGADESHJEETEGA #TBHAREGADESHJEETEGA #TBHAREGADESHJEETEGA

TO REACH THE #TBTARGETS2022



Dr. Tejas Shah
City TB Office, AMC

Dr. Kirit Gadhavi
President-AMA

Dr. Devendra Patel
President GSB IMA

TICKING


Health and Family Welfare Department, Government of Gujarat, Gandhinagar, (INDIA)

For more information contact
 1801116666

AHMEDABAD MEDICAL ASSOCIATION

ANNUAL ELECTION 2021-2022

AMA OFFICE HAS RECEIVED FOLLOWING VALID NOMINATIONS FORMS

All Members elected uncontested so there is
no election on 1-8-2021.

PRESIDENT [ONE POST]

1. DR. GADHAVI DILIP BANESINH ELECTED UNCONTESTED

VICE - PRESIDENT [TWO POSTS]

1. DR. SHAH URVESH VIPINCHANDRA ELECTED UNCONTESTED
2. DR. SHETH MAULIK SURESHCHANDRA ELECTED UNCONTESTED

HON. SECRETARY [ONE POST]

1. DR. PATEL GARGI MAHESH ELECTED UNCONTESTED

HON. JOINT SECRETARY [TWO POSTS]

1. DR. RAO DEEPAK MUKUNDBHAI ELECTED UNCONTESTED
2. DR. SHAH SAHIL NITINKUMAR ELECTED UNCONTESTED

HON. FINANCE SECRETARY [ONE POST]

1. DR. DAVE KALPITA MANISH ELECTED UNCONTESTED

HON. LIBRARY SECRETARY [ONE POST]

1. DR. PANCHAL DEVAL DIVYESHKUMAR ELECTED UNCONTESTED

MANAGING COMM.MEMBERS P.G. [TWELVE POSTS]

1	DR. GUPTA MAHESH GOPICHAND	ELECTED UNCONTESTED
2	DR. KALE SNEHAL BHALCHANDRA	ELECTED UNCONTESTED
3	DR. MAHESHWARI MUKESH AMBALAL	ELECTED UNCONTESTED
4	DR. PARIKH RUTVIJ BHARATBHAI	ELECTED UNCONTESTED
5	DR. PATEL ANKIT MANIBHAI	ELECTED UNCONTESTED
6	DR. PATEL MAHESH BABULAL	ELECTED UNCONTESTED
7	DR. PATEL SMEET SANJAYKUMAR	ELECTED UNCONTESTED
8	DR. PATEL VAIBHAV NAVINCHANDRA	ELECTED UNCONTESTED
9	DR. PATEL YASH DHANESHBHAI	ELECTED UNCONTESTED
10	DR. SHAH JIGNESH RATILAL	ELECTED UNCONTESTED
11	DR. SHAH SUNILKUMAR NAVINCHANDRA	ELECTED UNCONTESTED
12	DR. SHAH VISHAL RAJESHBHAI	ELECTED UNCONTESTED

MANAGING COMM. MEMBERS - [Other than P.G.] [TWELVE POSTS]

1	DR. BHANSALI PIYUSH MAFATLAL	ELECTED UNCONTESTED
2	DR. CHRISTIAN ROHAN PIYUSHKUMAR	ELECTED UNCONTESTED
3	DR. KHARSADIYA KIRIT HEMCHANDBHAI	ELECTED UNCONTESTED
4	DR. MAHESHWARI AMRATLAL KIRPALDAS	ELECTED UNCONTESTED
5	DR. MEHTA VIJAYKUMAR DINESHCHANDRA	ELECTED UNCONTESTED
6	DR. NAIK KAMLESH RAGHUVIR	ELECTED UNCONTESTED
7	DR. PATEL RAMESH ISHWARLAL	ELECTED UNCONTESTED
8	DR. RAJGOR JAGDISH BHANABHAI	ELECTED UNCONTESTED
9	DR. RATHOD BALKRISHNA NATHALAL	ELECTED UNCONTESTED
10	DR. SHAH HETALBHAI GUNVANTLAL	ELECTED UNCONTESTED
11	DR. SHAH JAGMOHAN MUSADILAL	ELECTED UNCONTESTED
12	DR. SHAH JAYESH CHINUBHAI	ELECTED UNCONTESTED

DR. KIRITKUMAR C. GADHAVI
Chairman

DR. DHIREN R. MEHTA
Returning Officer

DR. MEHUL J. SHAH
Member

DR. DEVENDRA R. PATEL
Member

Dt. 7-7-2021

Election Committee

Scientific Program

Dr. P. P. Mehta and Dr. H. G. Jambhekar Scientific Program

Dear Members,

Ahmedabad Medical Association invites you on quite different scientific program. The details are as following :

Date : 8/8/2021, Sunday

Venue : Dr. R. M. Fozdar Hall, AMA House...

Time : 9-30 am to 10-00 am.

Registration and Tea/Breakfast.

Session 1 : 10-00 am to 11-00 am

Subject : How to interpret the different laboratory markers ?

- 1) Dr. Manoj Vithalani, MD : CBC, ESR, Blood Indices.
- 2) Dr. Mahadevbhai Desai, MD : Liver Function Test
- 3) Dr. Urmanbhai Dhruv, MD : Renal Function Test
- 4) Dr. Sunil Mehta, MD : CRP, D Dimer.

Chair Person : Dr. Atulbhai Parikh, MD

Session 2 : 11-00 am to 12-00 noon.

Subject : 1) How to interpret CT Thorax.

Speaker : Dr. Hemant Patel, MD

2) Triathlon : Can we do it ?

Speaker : Dr. Abhay Khandekar, M.Ch, Uro.

Dr. Gargi Khandekar, MD

3) My experience of trekking high in Mountains.

Speaker : Dr. Prakash Darji, DM, Nephro

Chair Person : Dr. Mehul Shelat

Program will be followed by Lunch

Registration is must only up to 100 delegates at AMA office.

DR. KIRITKUMAR C. GADHAVI

President

DR. DHIREN R. MEHTA

Hon. Secretary

Ahmedabad Medical Association - Sports Day

Dear Members,

We think you all are tired now. We want to meet the friends, we want to enjoy, we want to play together. We all are fade off since more than 18 months doing hard work in COVID Pandemic. We had seen lots of patients struggling and losing their lives even after hard work of our friends. We really need some change and rejuvenation. And for this we are coming with sports for all of you.

We have planned Ahmedabad Medical Association - Sports Day. We are going to enjoy games at our premises. We invite all members with their family members to participate and to enjoy the games. So, friends, come forward and let us play.

1) Table Tennis : Singles and Doubles.

2) Carrom : Singles and Doubles.

Time : 2-00 pm to 5-00 pm.

Date : 13/8, Friday and 14/8, Saturday.

Final on 15/8, at 10-00 a.m.

Venue : AMA premises, Ashram Road.

Please register your names before 10/8/21 at AMA office on 26588775 in between 2-00 pm to 6-00 pm. Registration is free but mandatory for better management.

Program Coordinator: Dr. Brijan Choksi 98242 65642

Dr. Naitik Patel 98981 29475

Dr. Rutvij Parikh 94273 17915

DR. KIRITKUMAR C. GADHAVI

President

DR. DHIREN R. MEHTA

Hon. Secretary



મૌસમ બદલ ડાલા

(છેક થી છેક સુધી ભીંજવતા ગીતોનો સાંભેલાધાર વરસાદ)

માલિક છે !

માલિકનો કોઈ માલિક છે ?

એ ધારે તે કરે ! એ ધારે તેનું કરે ! અને ધારે તેનું કરી નાંખે !

રાજસ્થાનના જેસલમેરમાં પૂર લાવે અને ચેરાપુંજીને પાણીપૂરી પછીની મફતની કોરી પાણીપૂરી જેવું કોરું ચ રાખે !

ડીસેમ્બરને વરસાદનું આપટું ઝીંકીને દોડાવે ને જુવાનજોધ અષાઢને લંગડો કરી ચલાવે !

જગત કિકિયારીઓ કરતું હોય, ફૂદકા મારતું હોય ને ઉપરથી કાળમુખો કોરોના ભભરાવે... દુનિયા 'Global' કેદખાનું થઈ જાય ને કકળાટ ત્યા રોકકળ મચી જાય !

આ બધું આપણે ચૂપચાપ જોતા રહેવાનું,

ને મનોમન બોલવાનું, “માલિક તૂને... મૌસમ બદલ દિયા !”

બાપ ! માલિક રીસાયો છે ! આકરા પાણીએ છે !

પણ આપણે ચ ગુજરાતી માડુ ! પથ્થરમાંથી પાણી કાઢીએ ! આપણે ઘરમાં એ રીસાયેલાને મનાવશું ! આકોશને મોળો પાડશું ! ઘરમાં દાદા રીસાયને એમની વ્હાલી ગલીપચી કરે ને દાદા ખુશ થાય એમ !

યુનંદા ડૉક્ટરોની એક ટૂકડી સંજીદા ગીતોની સ્તુતિ કરશે અને એ ઉપર બેઠેલા રિસાયેલા દાદાને ગલીપચી કરી મનાવશે. અને તમારા માટે મુલાયમ, મખમલી અને માખણીયા ગીતોથી મસ્તીનું માહોલ ઊભું કરશે. આપણી રખીયા વળીગયેલી જિંદગીને ફૂંક મારી ધગધગતી કરશે.

તો તમે પણ દાદાને ગલીપચી કરવા દોટ કાઢશો ને !

આપણે સૌ ભેગા મળી, હર્ષઘોષ કરીશું...

“હમને ભી... મૌસમ બદલ ડાલા !”



તારીખ/વાર : ૦૮-૦૮-૨૦૨૧, રવિવાર

સમય : સાંજે : ૫.૦૦ થી ૮.૦૦ કલાકે

સ્થળ : એ.એમ.એ. હોલ, આશ્રમ રોડ

હા, કાર્યક્રમ પછી વાળું તો ખરું જ.

સૂચન : વહેલા તે પહેલા... (૧૨૫ જગા ભરવાની છે)

માત્ર ડૉક્ટર્સ અથવા ડૉક્ટર કપલ્સ માટે

રજીસ્ટ્રેશન રૂ. ૫૦/-

ફોન : ૨૬૫૮૮૭૭૫ એ.એમ.એ. ઓફીસ

:: સૌજન્ય ::

એપોલો : CVHF

DR. KIRITKUMAR C. GADHAVI
President

DR. DHIREN R. MEHTA
Hon. Secretary

15th August - Independence Day



Our Ahmedabad Medical Association is going to celebrate 75th Independence Day on SUNDAY - 15th August, 2021 at 9.00 a.m.

Flag Salutation : 9.00 a.m. sharp

Date : 15th August, 2021 Sunday

Venue : Ahmedabad Medical Association Premises.

DR. KIRITKUMAR C. GADHAVI
President

DR. DHIREN R. MEHTA
Hon. Secretary



Ahmedabad Medical Association Annual Day

119th Annual Day...

Date : 5/9/2021, Sunday
Time : 9-00 am onwards.
Venue : Dr. R. M. Fozdar Hall, AMA House...

Distinguished Guest : Dr. Abhijat C. Sheth,
MBBS, MD, M.Ch. (CT)
FRCS (CT)
Chairman of National Board of
Examination
DMS, Apollo Hospital.

Annual Day Program

8-45 am to 9-15 am : Tea/Coffee & Breakfast
9-15 am to 10-00 am : Dr. B.N. Mehta Oration
Speaker : Dr. Atul Patel, MD, ID Specialist.
Subject : Invasive Fungal Infection.
10-00 am onwards :

Welcome speech by President, AMA
Felicitations of Guests
Annual report by Hon. Secretary, AMA
Annual Day Celebration
Speech by Distinguished Guest
Felicitations of Members and Medical Students.
Vote of Thanks.

Program will be followed by Lunch

DR. KIRITKUMAR C. GADHAVI DR. DHIREN R. MEHTA
President Hon. Secretary



ANNUAL DAY COMPETITIONS

- (1) **Indian Association of Occupational Health Essay Prize**
(for all members)

Subject : “Work from Home” - a boon or a curse !

- (2) **Dr. R. K. Nanavaty Essay Prize**

Subject : “Your Positive Experience while treating Corona Patients” (for Family Physicians only).

- * Each candidates shall have to submit three copies typed and double spaced to the office before 18-8-2021 5 p.m. (Maximum 1500 words).
- * Candidates should not write their names or addresses on the essay. They should not reveal their identity in the essay. Candidate should write the name and complete address on a separate piece of paper.

- (3) **DR. PIYUSH SHAH PAPER PRESENTATION PRIZE**

(For Family Physicians only)

- * The last date for submission of abstract is 18-8-2021. 5 p.m. Complete text of the paper will have to be submitted on the day of presentation.
- * All papers accepted by the Scientific Committee will be read few days before our Annual Day function.
- * The paper must be original and must not have been published or read previously.

8 minutes will be allowed for presentation and 3 minutes for discussion. Presentation with slides / over head projector / transparencies / video will be appreciated.

- (4) **DR. B.C. AMIN MEMBERSHIP DRIVE TROPHY** will be awarded to the member who has enrolled the maximum number of members in the year 2020-2021.

Other Trophies : The entry fee is Rs. 100/- only.

- (5) **DR. K. K. SHAH TROPHY** For Best Nursing Home.
(6) **DR. P. B. HARIBHAKTI TROPHY** For Best Consulting Room.
(7) **DR. DAHYABHAI SHIVRAM JOSHI TROPHY** For

General Practitioner's best Clinic

Those members who want to take part in these competitions, should send the application on their letter pad.

Last date to submit 18-8-2021. before 5 p.m.

Note : The winners of the Trophy in past should not apply again.



Report of Happy Doctors` Day

Happy Doctors` Day is celebrated in our country on 1st July, every year in the memory of Legend Dr. Bidhanchandra C. Roy. As we all know very well that this day, 1st July, is birth as well as death anniversary of Late Dr. B. C. Roy. He was born in 1882 and died in 1962. He was a very gentle physician of West Bengal. He was MLA, CM of West Bengal and also had been MP from West Bengal. He had done a lot of social work. He also had remained President of IMA. He was also felicitated by Bharat Ratna by Govt. of India.

We had celebrated this day at our AMA premises in unique way this year, as` Life for Life`. We had planted tree in the names of all doctor members who had lost their lives in COVID, while serving the society. We cannot forget their crucial role for society in this critical condition of COVID. We had invited their family members and gifted plants to the each family. Our senior and stalwart, Dr. Jitubhai Patel, Dr. Parimalbhai Desai and other Past Presidents had given their valuable time and remained present throughout the whole ceremony.

We are thankful to Brain Heart Foundation, Directors, Dr. Sunil Thanvi and Dr. Arvind Sharma for supporting for this program with their active participation. We are also thankful to all family members of Corona Warriors doctor members, to our members who had remained present throughout whole program.



WE WELCOME FOLLOWING NEW LIFE MEMBERS

10276 L	DR. JAIN SAUMYA URESH
10277 L	DR. RATHI DIGANT SHANKARLAL
10278 L	DR. VARMA JAY ANIL
10279 LC(Transfer)	DR. PATEL NIRAVKUMAR H.
10280 LC(Transfer)	DR. KINNARI VILASCHANDRA AMIN
10281 L	DR. RATHOD KINNARI KIRANKUMAR
10282 L(Transfer)	DR. MACWANA JAYPRAKASHKUMAR I.
10283 L	DR. SUKHRAMANI BHARAT PREETAM
10284 L	DR. BHADIA HIRENKUMAR PRAVINBHAI
10285 LC	DR. CHAUHAN BHAVIKKUMAR ASHOKBHAI
10286 LC	DR. CHAUHAN SHREYA BHAVIKKUMAR
10287 L	DR. SHAH NUTI UTSAV
10288 L	DR. MODI SHREYA JAYESHKUMAR
10289 L	DR. SHAH RUSHIT SHAILESHKUMAR
10290 LC	DR. SHAH MEGHA RUSHIT
10291 LC	DR. ENGINEER DIVYESHKUMAR PRAVINCHANDRA
10292 LC	DR. DESAI MITALI AJAYBHAI
10293 LC(Transfer)	DR. BHAVSAR MRUGANK MAYANKKUMAR
10294 LC(Transfer)	DR. BHAVSAR MANSI MRUGANK
10295 L	DR. SHAH BHUMIKA NILAY
10296 LC	DR. MAHUVAKAR AASHISH MADHU
10297 LC	DR. MAHUVAKAR SHEETAL AASHISH
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10299 L	DR. CHAREL NILESHKUMAR RAMANLAL
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10301 LC	DR. TRIVEDI PRAGATI JAYANT
10302 L	DR. PATEL AMEE BHARATKUMAR
10303 LC	DR. SAVALIA PARIKSHIT JAYSUKHBHAI
10304 LC	DR. SAVALIA SHAILEE PARIKSHIT
10305 L	DR. PATEL HIMADRI LOKESH
10306 L	DR. PANDYA NIKITA DIPAKKUMAR

OBITUARY

We send our sympathy & condolence to the bereaved family.
May their soul rest in eternal peace.



DR. RAJNIKANT K. SHRIMALI
L-3075 M.B.B.S.

Date of Birth : 01-06-1960

Date of Death : 20-06-2021



DR. JAGDISHCHANDRA P. DAVE
L-154 M.B.B.S.

Date of Birth : 28-01-1941

Date of Death : 26-06-2021

CORONA WARRIORS



DR. DILIPKUMAR J. SHAH
L-884 GYNEC

Date of Birth : 27-09-1950

Date of Death : 31-01-2021



DR. JAYANTILAL S. GAJJAR
L-1965 GYN. PHY.

Date of Birth : 01-06-1945

Date of Death : 07-06-2021



DR. BHUPENDRA M. PANCHAL
L-2285 M.S. SUR.

Date of Birth : 24-04-1954

Date of Death : 09-06-2021

Doctor - Patient Relationship At Cross-Roads

- Dr. G. G. Oza

It is no longer a secret that the centuries - old Doctor-Patient Relationship has, now, become shaky. Frankly speaking, it has deteriorated so much that not only the common man, but even a good number of medicos themselves call it (of course, in whispers) a contract, a buyer-saler deal with hidden terms and conditions. It has, as if, become a market-commodity, where the patient is called a consumer and the medico is called a health-provider. As usually happens, whenever and wherever money takes over the centre - stage, everything else is pushed behind the curtains and whatever little resistance may be there is cleverly sidelined or smothered.

Thus, the faculty of Medicine, which evolved centuries back as an art over succeeding decades, with new discoveries became a science and now, has become a “commerce” which in practical terms is known as business, a trade in the market.

Still, illnesses, especially the serious ones are such threatening events that even the toughest individuals are overwhelmed and urgently run to the doctor or a hospital. It is such universal nature of several diseases and interdependence of patient and doctor that help to maintain and protect the doctor-patient relationship. For example, who can forget the sacrifices made by the ‘Corona Warriors’ recently ?

Till recently, and even at present (but to a lesser extent), patients and the common man consider medicos as ‘next to God’, angels, messengers of God (“messiah”).

Perhaps, medicine is the only profession wherein the sick man pays the fees and still feels obliged and even indebted to the medico.

But, one can not deny the fact that “All is not well” and the relationship which was golden in the past, has at present, become silvery. There is nothing more hurting than to fall from somebody’s esteem, and even more so from self-esteem.

Well, the most common, rampant, and even universal grievance of the patients is : “Doctors have no time to listen to the patient”. This generalisation, as with many other generalisations is not the whole truth, but all the same, difficult to deny with vigour and vehemence. Now a days, one can say that many medicos have become tools of their tools and, as a result, they seem to treat faceless laboratory reports; or a particular pathology detected on sonography, CT Scan, MRI etc. At the most, they treat a particular disease but not the patient who has that disease. Thus, monitors monitor the medical management ! and the patient who should be in the centre of the circle of the proceedings is pushed to the periphery. Such inattention, aloofness on the part of the medicos has led to deep cracks in the doctor-patient relationship. The situation is gradually, but decisively creeping to a breaking-point, here, there and almost everywhere (Physical attacks on the medicos are a lamentable evidence). There are many other areas of dissent, but in the present article, only the fundamental issue of “lack of time” is addressed because it is one issue to which all the medicos can contribute for the solution.

Medico will have to fall back on centuries-old and time-tested method of “History-taking” (art of

communication). Depending on the quality of his student days, he will have to revise, repeat, re-learn or even learn de novo ! To recapitulate,

- History-taking should be carried out in a quiet room (this applies to other occasions also e.g... when some important, strategic decision regarding treatment is to be taken).
- The medico should be congenial, gentle (and generic !).
- The distressed patient thirsts, craves for attention, empathy and compassion. He has what is called 'fear to the unknown'.
- Remember, when you are analysing the patient, he is also analysing you ! The patient is scrutinizing the over-all personality of the medico e.g., his appearance, his way of sitting, leaning forwards, voice quality, eagerness, simplicity, the style of putting the questions, his facial expressions e.g., smile, nodding of the head, sum-total of his body language, his patience, his mood (relaxed, unhurried conversing); His poise, patience, positivity, should radiate hope and emanate optimism. For example, a faint flicker of smile on medico's face at appropriate time is worth several medicines and several so called scopies. In the same way, a friendly nod of the head and a momentary gentle bend of neck, works like dew-drops on a parched desert. His mere arrival (entry) can light up the atmosphere and remove knots and doubts in the patient's mind.

- Well-planned and strategically-placed punctuations like 'Huh',
'Huh...Huh' or words like "What happened next ?" Suggest that medico is really interested in the patient's narration.
- Even if the patient utters something funny or bizarre, never laugh at him..... it hurts his dignity.
- Most important is : Let the patient speak. Let him narrate his medical problems in a 'free and fair' style. You have to be an active, keenly interested listener, but if the patient's narration strays wayward, you should tactfully bring him back 'inwards' !
- Some patients describe their symptoms with geometrical clarity and precision, some tell it in wave forms (big, small, changing form unpredictably) while some describe their history in the form of whorls i.e. wheels within wheels, and circle within a circle, while some describe their problems in 'jerks and jolts' or 'jumps and bumps' style.
- It is worth noting where patient puts in extra punch in his narration.
- The most important components (as far as the medico himself is concerned) lies in the choice of the words that he utters.
- A mature, experienced medico treats his patients with pills of medicine and pearls of his soothing words. Word is not just a word. It has a hidden double-edged sword in it. A negative, misplaced,



ambiguous word by the medico can cause permanent, irreparable harm to the patient, and that also when he is already under lot of anxiety, tension and feeling of uncertainty. To put it briefly, one can say that 'Naked truth can be more lethal than a naked sword'.

- At the same time, the medico should always be objective (never subjective). He should not allow his emotions to overpower his intelligence and wisdom.
- Medico need not follow a monotonous, mechanical pattern of history-taking. Remembering the basic, conventional pattern, he can tailor history-taking depending on the situation, place, time, urgency, temperament and patient's health. Initially, your new revised style will appear pre-planned, cultivated, rehearsed, but in the long run, it will become your natural, spontaneous method.
- The first session of history-taking can become a foundation stone for everlasting, mutually beneficial pleasant doctor-patient relationship.
- All throughout his medical practice, the medico has to remain a student of medicine-learning, relearning, revising, renewing, reviewing, refreshing, supplementing his knowledge. Only then, he can become a healer as well as a teacher (preacher) and thus, he can revive, regain, recreate, retrieve the glorious, noble tradition of Doctor-Patient relationship, for to-day, to-morrow and for ever...

सर्वे सन्तु निरामयाः



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લેડીઝ-ક્લબ

"STRONG WOMEN EMPOWER EACHOTHER"

Dear Friends,

તા. ૨ જુલાઈના રોજ Chef Alpa Majmudar પાસેથી આપણે હેલ્થી થાઈ રેસીપી બનાવતા શીખ્યા. બહેનોએ મોટી સંખ્યામાં તેનો લાભ લીધો.

મિત્રો, અષાઢસ્ય પ્રથમ દિવસથી જ કાળા ડિબાંગ વાદળો ઘેરાઈ જાય અને સૃષ્ટિનો રંગ તો બદલાય જ. પણ મોસમનો મિજાજ પણ જાણે વાદળો પાછળ સંતાઈ આંખ મિચામણી રમે અને એટલે જ સમગ્ર સૃષ્ટિને પ્રેમ કરવાનો મોકો મળી જાય. આ અસરથી પશુ પક્ષીઓ પણ બાકાત ના રહે તો મનુષ્ય કેમ કરીને રહી જાય !! કાલિદાસ અને કલાપિ જેવા કવિઓ પણ મન મૂકીને રચના કરે તો આપણા યુવાન હેયાઓ કેમ રહી જાય ! વરસાદ પહેલો હોય કે ના હોય પણ ધરા આખી ઝુમી ઉઠે અને દરેક જીવો પણ અને આ અસર ઘેરી બને શ્રાવણ માસમાં જ્યારે આપણા સૌના લાડકવાયા, “રોમેન્ટિક” દેવ આ પૃથ્વી પર અવતાર ધારણ કરે.

રાધા અને મીરા એમ માનતા રહ્યા કે કૃષ્ણ તો અમારા જ છે. પણ કૃષ્ણે તો આખા વિશ્વને વશીભૂત કરેલું છે અને એટલે જ કહેવાય છે કે ‘Beware of Krishna’ કોઈ જ બચી શક્યુ નથી એની આત્માથી અંજાયા વગર તો આવો આપણે સૌ મળીને ઉજવીએ આપણા આ વિશિષ્ટ દેવનો જન્મ અને એ પણ એક નવા જ અંદાજે, અને એક અગત્યની વાત નંદ-યશોદાને તો સૌ યાદ કરે છે. પણ એના માતા પિતા કે જેમણે ખૂબ કષ્ટ વેદીને ભગવાન શ્રી કૃષ્ણને જન્મ આપ્યો છે તે વાસુદેવ અને દેવકી ને યાદ કરીને, એમના બલિદાનને બિદરાવીને.

સખીઓ, આવો આપણે અવસર માણીએ આપણા ભાતીગળ (traditional) સુંદર વસ્ત્રોમાં સજ્જ થઈને.

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Approach to fever short duration

Fever is a friend and not a foe. Fever is an immune mediated response to fight against any offending agent in the body. Fever is centrally mediated rise in body temperature in response to many different pathologic insults. Mostly it is in the form of various types of infections. Fever is caused by release of certain endogenous pyrogens like cytokinines (interlukins), Tissue necrosis factor (TNF) and Interferon – .

Fever is a symptom and not disease Presence of fever indicates infection and/or inflammation

Most of the time fever is harmless,, self-limiting with little discomfort to a child.. Sometimes, however, it may be an initiation of serious disease. Immunocompromised child, severely malnourished child and very sick young infant often may not mount a robust immune response to infection and in such situations there may be mild fever or no fever even in presence of serious infection..

NORMAL BODY TEMPERATURE.

1. Normal Body Temperature - a narrow range of $98.2^{\circ}\text{F} \pm 0.7^{\circ}\text{F}$ ($36.8^{\circ}\text{C} \pm 0.4^{\circ}\text{C}$)
2. Diurnal variation: Temperature is lowest in the morning and highest in the evening (up to maximum of 100°F in the evening)
3. Measurement of temperature : Rectal or aural temperature represents core temperature of body. For all practical purposes axillary temperature is acceptable in children. In a grown up child oral temperature can also be used.

DEFINITION OF FEVER

“Fever is defined as an elevation of rectal temperature



>38.5 (101°F) or Oral temperature $> 37.8^{\circ}\text{C}$ or Axillary temperature $> 37^{\circ}\text{C}$).

Rectal or core body temperature is 0.7°F (0.4°C) higher than oral temperature and oral temperature is 0.7°F higher than skin temperature.. It is not mandatory to add this difference while recording axillary temperature.

Clinical approach to a case of short duration fever

The initial assessment of the feverish child is very important. The majority of children presenting with fever will have either a self-limiting viral condition or an obvious cause for their fever for which specific treatment can be given.. However, fever may also be the presenting feature of serious bacterial illnesses such as meningitis, septicaemia, urinary tract infections and pneumonia. Therefore a detailed history, recording of vital parameters and careful physical examination (including ENT examination) is a MUST.

This can be provided in a stepwise manner as discussed below.

STEP I

1. DOCUMENTATION OF FEVER
2. Identification and stabilization of sick child
3. Referral to higher centre if required.

Children with fever should be assessed for the presence or absence of symptoms and signs that can be used to predict the risk of serious illness.

Children with the following symptoms or signs should be recognised as being in a high-risk group for serious illness and needs urgent attention in terms of intervention, investigations and management. At this stage searching the cause of fever is not a priority unless it is evident on physical examination.





- Febrile neonate
- Fever in less than 3 months, especially sick looking
- Ill looking child
- unable to rouse or if roused does not stay awake
- weak, high-pitched or continuous cry
- pale/mottled/blue/ashen
- reduced skin turgor
- bile-stained vomiting
- moderate or severe chest in-drawing
- respiratory rate greater than 60 breaths/minute
- grunting
- bulging fontanel
- Unexplained death of a febrile child in close vicinity.

The following features are considered as Red Flag Signs AND NEED URGENT HOSPITALIZATION AND INTERVENTION.

- DISPROPORTIONATE HR and RR
- DIFFERENTIAL BODY TEMPERATURE
- CIRCULATION- COLD EXTREMITIES,
- POOR CAPILLARY REFILL
- CHEST RETRACTION
- MENINGEAL SIGNS
- PURPURIC SPOTS
- FAUCIAL MEMBRANE

STEP II

Once the seriousness of the febrile child is ruled out or taken care by appropriate intervention one should try to find out the cause of fever. If the child is not serious as explained by above criteria and is having discomfort, fever reducing measures and other therapeutic modalities should be instituted as under.



- Check that child is not over clothed or over rapped.
- Fan, A.C. etc. can be used if available and tolerable
- Give a dose of antipyretic
- Explain the red flags and ask them when to report
- Role of tepid sponging is doubtful but it should never be done with cold water or ice packs.
- Maintain hydration
- Light diet which should be fairly nourishing
- Provide specific treatment if the cause is absolutely evident.
- Provide symptomatic treatment for other symptoms if any.

Ask the parents to maintain temperature chart and note the details of behavior, appetite, well being, urine output etc.

- o Single reading has no meaning
- o Serial record is mandatory
- o Trend of fever
- o Response to antipyretic
- o Inter-febrile period
- o Intake and output
- o Behavior, activity of the child
- o Development of new symptoms

STEP III

After initial assessment once the gravity of the illness is ascertained and taken care, one should try to arrive at a reasonable clinical diagnosis and start specific treatment. At this stage one may have to send some investigations if it is not evident clinically.

The most common causes of fever in first week of illness are as under





- Acute viral fever
- URTIs -AOM, sinusitis, Tonsilo-pharyngitis
- WALRI
- Pneumonia
- Acute lymphadenitis
- Malaria
- Typhoid
- Dengue
- Urinary tract infection
- Septicemia
- bacteremia
- Hidden abscess
- Pyogenic meningitis
- Dehydration fever
- Vaccine associated fever
- Heat illnesses

In more than 80% cases it will be viral illness. Remaining cases may be due to bacterial and other infections. Following table will give us clue to differentiate them.

VIRAL	BACTERIAL
<ul style="list-style-type: none"> • Affects multiple mucosal systems of body • Fever high at onset but settles within next 5 days • Child comfortable during inter-febrile period • Similar cases in family and community • CBC not contributory, as polymorphonuclear preponderance is seen in first 2 days of viral illness 	<ul style="list-style-type: none"> • Bacterial infection is localised to one system or organ • Fever moderate at the start, peaks by 4-5 days • Child looks sick and often toxic during interfebrile period • Draining lymphnode often enlarged
ANTIBIOTICS NO ROLE	NARROW SPECTRUM APPROPRIATE SINGLE ANTIBIOTIC



Associated features in a febrile child are important clue for diagnosis as described below

- Fever, chills, aches, myalgia, respiratory symptoms- Viral, Flu illness like influenza, COVID
- Fever with or without chills, anemia, spleen+/- thrombocytopenia- Malaria
- Fever, retro-orbital pain, rash with muscle pains with rising hemoglobin and falling platelets - Dengue
- Fever beyond 4 days, sick looking, Liver and/or spleen +/- thrombocytopenia with leucopenia: Enteric
- Fever, myalgia, multi system involvement, thrombocytopenia-
- Brucellosis, leptospirosis, Rickettsia, non infectious diseases.

Fever pattern and progression during next 4 days will also be of great importance to clinch clinical diagnosis.

Cause of fever	ONSET OF FEVER	PROGRESS BY DAY 4	Associated features
Viral	HIGH	BETTER	Generalized manifestation, cough, cold etc
Bacterial fever	MODERATE	PEAKING	Local manifestation Toxemia, Interfebrile period sick Often progressive
Malaria	HIGH	BETTER IF TREATED	Erratic pattern, anemia

Associated features in a febrile child will help us to decide specific treatment. Most of the time in a community acquired infections, the site of pathology will be localised in 5-7 days as described in following table.





CONDITION	ASSOCIATED FEATURES	REMARKS	ANTIBIOTIC CHOICE	localization
AOM	URTI, EAR PROBLEM		AMOXYCILLIN	Day 2-3
SINUSITIS	URTI, NASAL DISCHARGE		AMOXYCILLIN	Day 2-3
PNEUMONIA	RAPID BREATHING COUGH	ADMIT IF SEVERE DISEASE	AMOXY,/ AMOXYCLAV	Day 2-4
CELLULITIS, IMPETIGO, PUSTULOSIS	SKIN lesions		Cephalexin/ cefadroxyl	Day 4-5
lymphadenitis	Tender swelling	Recurrence, Chroniity General well being	Cephalexin/ cefadroxyl	Day 4-5
Bacillary dysentery	Blood in stool	Toxemia Temp tenesmus	cefixime	Day 1-2
UTI	URINARY COMPLAIN MAY PRESENT WITHOUT FOCUS	ALWAYS Ix	CEFIXIME	Day 1-2
Intra-abdominal infection	Pain Bowel movement	Admit if needed ALWAYS Ix	Individual as per case	Day 1-7

Message

Fever is a symptom & not the disease itself. More than 80% cases are viral in etiology . Goal of therapy is not treating a number of thermometer, but rather a child's comfort. Paracetamol is the best choice in dose of 15 mg/kg and ibuprofen is second choice for relieving symptomatic discomfort in children. Non pharmacological measures like – Sponging, increased fluid intake, sufficient rest adds to the comfort of child.. Parents should be counselled on proper dose administration. Simultaneously the cause of the fever should be evaluated & treated accordingly.

