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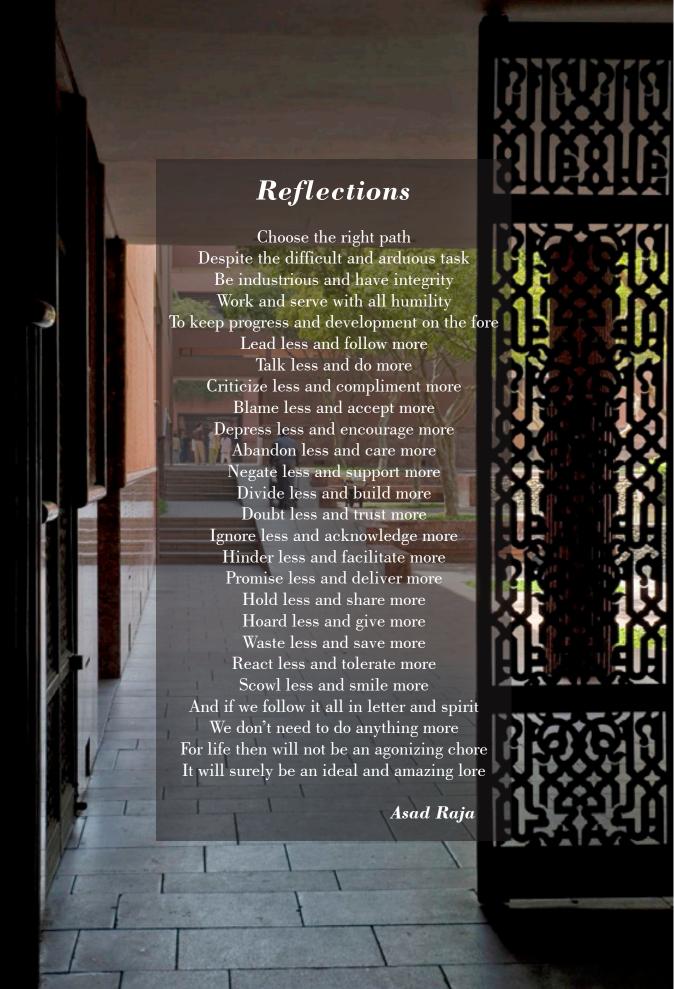
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Welcome to the Editorial Board!

Heartfelt thanks to all who have contributed for this issue of Cutting Edge. We appreciate your valuable input and expertise. The editorial board is excited to work with you all! As we move forward, please don't hesitate to contact any member of our editorial board listed below with your questions or suggestions.

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WORKSHOPS, COURSES and SYMPOSIA

Advanced Hernia Workshop-

February 6, 2012

Visiting faculty: Dr Tim Tollens, General Surgeon at Imelda Hospital, Bonheiden, Belgium

Hernia is one of the most common surgical problems requiring surgery. Laparoscopic treatment of hernia has added a new dimension to the treatment with less pain, good cosmetic outcome and early return to work.



Surgery team with guest faculty

A master trainer from Belgium, Dr Tim Tollens was invited to conduct a workshop jointly with general surgery faculty members Dr Hasnain Zafar, Dr Tabish Chawla, Dr Rehman Alvi and their teams. Dr Tollens along with the host team performed laparoscopic inguinal and umbilical hernia surgery. During the course of the day, five laparoscopic hernia operations were performed. Dr Tollens demonstrated recent advances in this technique.

The workshop was attended by senior surgeons from Karachi, Punjab and Khyber Pakhtunkhwa.

8th AKU Ilizarov Course

March 30-April 1, 2012

Visiting faculty: Dr Yasser Elbatrawy, Professor of Orthopaedics, Cairo University, Egypt

A KU Ilizarov team conducted the eighth successive course from March 30 to April 1, 2012. Dr Masood Umer was the course director and Dr Haroon Rashid was the course coordinator.

So far a total of 150 orthopaedic senior residents and consultants have been trained in this technique at AKU. There were a total of 30 participants, 14 from Karachi, 6 from Peshawar, 2 from Lahore, Islamabad and Mardan respectively, and 1 each from Hyderabad, Kohat, Miran Shah, and Bannu. Likewise, there were 23 operating room personnel, 17 from AKU and 6 from various institutions in Karachi.

We organized 10 workshop tables each, for 3 participants and 2 ORP. There were 20 lectures and 9 hands-on workshops on saw bones, along with 2 paper workshop exercises. Each participant was given enough opportunity for independent hands-on learning of these demanding skills.



WORKSHOPS, COURSES and SYMPOSIA

Building Bridges - A Trip to Jamshoro

March 30, 2012

7th International Symposium at LUMHS

The life of a surgical trainee is always caught between long hours, unending surgeries and making countless trips between the emergency room, the ward and the OR. Between that and the troubling backaches,

gastritis, plantar fasciitis, time to socialise is left somewhere far behind.

Hence, when a surgical trainee finds out about

LIAQUAT UNIVERSITY OF MEDICAL & HEALTH SCIENCES

General surgery team at Jamshoro

Hence, when a surgical trainee finds out about making a road trip with the rest of his or her colleagues, whether it is for academic or leisure purposes, it is of course an exciting proposition.

Five residents, one Fellow and one Surgical SMO presented at the 7th International Symposium 2012 at LUMHS, Jamshoro. It was heartening to note that the largest number of presentations was made by the trainees at AKU. A number of topics were discussed, from trauma and damage control surgeries to recent work in breast surgery. All presentations were taken very well by all those

who attended and all our trainees were greatly appreciated. We thank Dr Hussain Leghari for being our host at LUMHS.

AWARDS

Best Oral Presentation Award ————

April 24, 2012

Aamir Hameed, Saulat Fatimi and Shazia Perveen won the 2nd Best Oral Presentation Award in Cardiology and Cardiac Surgery Session for their presentation: Pulmonary Aspergilloma: Experience in AKUH over 9 years, at the 49th Annual Medical Symposium held from April 20-24, 2012 at Jinnah Postgraduate Medical Centre, Karachi.



Dr. Aamir Hameed receiving his award

College of Physicians and Surgeons Pakistan and Postgraduate Medical Training in Future

The College of Physicians and Surgeons Pakistan (CPSP) is now 50 years old. It is a national institution that has been certifying doctors in over 60 specialities and has almost 16,000 alumni. It has accredited over 200 institutions and departments and there are over 2,500 supervisors and 14,000 trainees on its register.



Dr Rizwan AzamiAssociated with the Department of Surgery for the past 27 years
A Prolific Surgeon and Mentor

Over the years the College has established its reputation of credibility as an examining/certifying body. Any influence on the training of PGs has been by virtue of 'reverse influence'. That is, by having both the trainee and the supervisor:

- a) Meet the requirements of the examination in the form of writing a dissertation and keeping a log-book of activity through the training period.
- b) Prepare for the examination and seek a valid experience that helps them succeed in it.

There is no doubt that the onus to be well trained has been largely on the shoulders of the trainee. However, the outcome when trainees are left to their own devices is not surprising and the College has been concerned because of the very high failure rate in the exit examination.

There are many factors that contribute to this lack of success in the exit examination and there are many important factors that contribute to the great variety of experiences individuals get in different training programmes.

Below is a brief list of possible factors leading to below par performance:

- The difference in the quality of undergraduate training and experience.
- The difference in the curriculum of approximately 40 different types of undergraduate programmes being conducted at medical colleges all over the country and the lack of standardisation within the final MBBS examination.
- The difference in recruitment criteria for postgraduate programmes.
- The difference in the opportunities and experience gained from centre to centre.
- The difference in emphasis on academic achievement versus provision of service from programme to programme.
- The difference in physical facilities and working conditions from institution to institution.
- The difference in the nature of academic support provided by individual supervisors.
- The quality of mentoring provided by the supervisor.

This lack of standardisation through an individual's evolution as a professional is a major contributor to the high failure rate. The College recognises that many of these factors are intrinsic and have more to do with the individual and the training institution. It is also appreciated that achieving even nominal uniformity is a virtually impossible feat, because of the established traditions and systems in units and institutions on the one hand and the attitudes and practices of supervisors on the other.

This may seem like an impossible task when one looks at the terrain:

- 200 different institutions
- over 2500 supervisors
- 60+ specialities
- spread out over the country

This change is certainly not going to happen overnight. To produce this change the College is seeking in the coming years to change the emphasis on the details of training, which has many facets and involves many different groups of people with diverse interests and requirements. The challenge will be to unravel this Gordian knot and begin this gargantuan task today. The seed has to be planted now. Circumstances are right for this activity. The outcome will be manifest and rewards will come many decades from now.

Over the last decade opportunities to travel, acquire experience abroad and be certified there have become increasingly difficult. Jobs are scarce and competition stiff (because of nationality) for those who do manage to go abroad. Within the country several generations of trainees have qualified from the college. Its alumni are now in key positions. One would hope that they will understand the importance of their contributions and their role in the future. They need to be convinced, converted and recruited to a worthwhile and immensely important task.

The country's population needs a huge number of specialists to help challenge the ravages of disease, ignorance and poverty. The governmental understanding of healthcare and commitment to a serious and meaningful change is important and needed, but far from materialising.

The governments of the immediate future will be beset with problems and diversions that will cause healthcare to be relegated to an even lower priority than it has had on their agenda over the past 60 years. They will therefore be happy to let someone else handle the problem.

The college needs to grow and expand its role as a repository of experience and also as a fountainhead of standardised information for its trainees and alumni. Individual specialists and specialities cannot be expected to be the prime movers. They are both distracted and divided on the way forward. They cannot be expected to deliver.

The College can play an important role in this divisive milieu. It can provide a unifying platform, in addition to providing the direction and raison d'etre for all these diverse individuals and groups (i.e. specialists and specialities). In order to do this it needs an army of volunteers. They are available, but need induction, support, direction and appropriate involvement. Many believe that this is not possible with the current group of supervisors - they are too motley a group and a more homogenous generation needs to be groomed to do the task. Such a group would certainly be easier to work with. While this may be true, I look upon this as an argument to postpone the change that is inevitable. One cannot wait for the perfect day to begin, a journey. We choose the day and hour of convenience and necessity. This is our hour of necessity and many who will contribute already exist within the ranks of the rigid and unbelieving that may be at the helm of affairs in various institutions today.



TRAVELOGUE

Shigar Fort – Fong Khar of Skardu - Dr Hammad Ather

Fong Khar is what the locals call the palace on the rock, or Shigar Fort. It was built upon a huge boulder at the foot of a steep rock. The complex at Shigar comprises the 400-year-old palace fort and two more recent buildings, the 'Old House' and the 'Garden House.' This is a former palace of the Raja of Shigar; besides a guest house it also has a museum of Balti culture.



In the Garden House there is a centuries-old Chenar tree. Chenar (*Platanus Orientalis*), or the Oriental Plane, is a large, deciduous tree of the *Platanaceae* family, known for its longevity and spreading crown. The Chenar tree trunk at Shigar was so big that it was possible for my two sons to walk in.

We took PIA, which operates a Boeing 737 flight, daily, from Islamabad to Skardu. It was a spectacular one-hour flight. We were treated to a dramatic view of the Karakoram, Himalayas and Hindukush mountain ranges, with views of five 8000+metre peaks, including the famous K-2 and Nangaparbat. As soon we landed at Skardu we were driven to Shigar, which is located about 45 minutes by road from Skardu airport.

The Shigar Fort Residence was much more than our expectations. We have been told that many adventures



could be undertaken from Shigar, including hiking to the old Shigar Fort or trekking to K-2 base camp alongside day hikes to remote valleys and other points of interest such as the Deosai plateau; visits to cultural sites that reflect the unique mix of Hindu, Buddhist and Islamic influences, including the 'Buddha Rocks' and the nearby settlements of Khaplu, Kiris and Kharmang; a short hike to the 'organic' village of Nangasoq, near Skardu; a visit to the hot springs at Chutron (two hours from Shigar); or perhaps a polo match at the birthplace of the game.



TRAVELOGUE

My Experience as Enumerated by my 14-year-Old Son Jamil Ur Rehman Alvi

Dr Rehman Alvi

Gilgit has always been known for its majestic mountains and breathtaking sights, but never did we expect that we would also witness magic along the way.

It was 4:00 am and we (Jamal and Salam) were ready and packed for a long day of trekking. I was wearing my CAT shoes specially designed for high altitudes and long treks, but like always, I thought of the day as just another day with the family, or like most teenagers like to call it 'a snooze fest', or as I like to call it, Sunday. I did not like the idea of trekking with

my family - no privacy, with mom and dad talking about the 70s and 80s, I was in no mood to hurry. But



it seemed like everyone else was in a hurry, including the driver who was supposed to drop us off at the base of our trek.



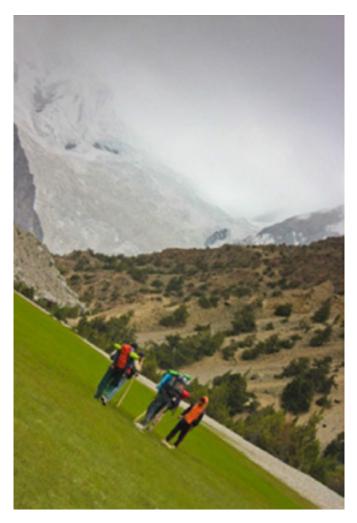
We stayed at the village guest house in the 'Passu' village in the Gojal district of Gilgit Baltistan; owned and run by our uncle. We were now on our way to the base from where our actual journey would begin. We were headed to the pastures of Yashperth, which had to be reached after a 12 to 14-hour trek crossing the majestic Batura Glacier. We started our journey in a classic 4x4 wrangler jeep that took us to 'Janabad', which was about 15 minutes from our guest house. After Janabad, we mounted our rucksacks upon our shoulders, which seemed to be weightless, because we were told to only carry light luggage. Thus the journey began as we slowly moved towards our destination. My dad took it as a personal challenge to prove to himself that being 51 did not affect his abilities or stamina in anyway, so he took the lead. We walked and walked for a long time, after a few hours we saw the sun rising from behind the mighty Passu cathedral peak and I saw a glimpse of what lay ahead. I could see the Batura Glacier from a distance. For a second there I thought it was shining, as if it had a light source of its own, but then I realized that the sunlight had hit the black and white glacier that made it glitter and glow. So for the first time I was excited to reach the glacier.

However, I had not noticed that my dad and the other kids were in the lead, and were continuously moving further and further apart, I decided to keep up with the pace and started taking long strides towards them, but at that height I did not know that it was a very stupid idea as my muscles started to ache suddenly and my breathing became very laboured. I stopped to rest alone when all of a sudden my dad came along and told me not to stop. I pleaded that I was tired but he told me that it was better if I continued walking. After a 15 second break we were off again together and I was relieved to be with the rest of the group once again. It was already around 9:00 am when we finally came to a stop in front of what seemed to be a residence on the edge of the glacier, my dad told me it was called the 'Summer House' where the shepherds came to rest on their way to the pastures. The house contained cooking utensils, water and a little bit of salt and tea. We rested and feasted on the desi parathas that we had prepared for the trip and drank tea. After cleaning up we started the journey again, only this time we did not even realize that the journey had just started.

The Batura Glacier is 57 km long and is one of the largest and longest glaciers outside of the Polar Regions. It is safe to say it was a difficult journey. After another hour of walking on the grey sea of rocks and gravelly moraine, we began to get tired and the rucksacks began to feel like they weighed a ton but that was the beauty of it, even as we were tired and our bodies hurt the scenery refused to stop being interesting and challenging, we were not going to quit until we saw the pasture as we had seen it a thousand times before in pictures.

Of course we did not know at the time that all my dad had in his rucksack were his socks and a pair of shorts, he became our beacon of hope that our destination was right around the corner. And amazingly by 1:00pm we came to a halt in front of what seemed to be another house, it was called the 'Ali Daad' house. We took a 30-minute stop where we had tea again, and made lunch with instant noodles. I wanted to lie there forever, and then "Jamil, time to move," yelled my dad. So we went on towards our destination with at least a little more energy.

We continued our long journey with constantly singing songs and me having fun with the kids and within another four hours, my dad stopped and took a long



pause and yelled, "Ladies and gentlemen, I give you Yashperth." As soon as we saw it we started yelling and threw our bags on the ground and took our shoes off. My dad pointed to a stream of water and we quickly jumped in, the water was ice cold, which made our feet happy and for awhile we forgot all the pain and worries that we had.

Yashperth was on top of our view, which meant another hour long journey, it was surrounded by old and green trees, but that wasn't the only thing we saw; we saw a few homes that had our names written on it as we pictured ourselves sleeping in them. We reached the houses after another 2 hours of a tiring and painful trek. Yashperth was everything we had dreamed it would be and then we experienced our magic; we forgot the journey and felt a new energy that we had never experienced or expected. We quickly went inside the beautifully built little stone house, whose keys we had. We unpacked and cleaned those to set up our sleeping bags and changed into our shorts and slippers. We went outside and walked a little and enjoyed the first breeze we felt from the Batura Mountain. We were home.

INNOVATIONS IN SURGERY

$\begin{array}{c} \textbf{Integrated Operating Room (OR1)} - \\ \textbf{Dr Asad Jamil Raja} \end{array}$

The Main Operating Room (OR) Suite at AKUH started functioning in 1985 with eight operating rooms which were later expanded to eleven to meet the cardiac surgery expansion. At present, over 10,000 in-patient surgical and gynaecological procedures are performed annually.



In order to accommodate new programmes and ever increasing volumes the Hospital has added three new modern ORs to the existing suites. Two of these were commissioned on May 2, 2012 and the third will be commissioned in next 3-4 months. One of the commissioned ORs is state-of-the-art integrated OR1. This is the first OR of its type installed in Pakistan.

The OR1 is new custom-designed with state-ofthe-art technology and provides fully integrated environments which augments the surgeons' skills and help the entire surgical team to work more safely and efficiently. It will particularly help in the growth of minimally invasive surgery and will enable sharing





of information among healthcare professionals for better continuity of care for the patient.

Technically OR1 is a comprehensive operating room integration solution from KARL STORZ that seamlessly combines high-performance surgical and imaging technologies, as well as data management to offer a range of advanced capabilities. Touch screen panels feature a realistic user interface for



icon-based control, giving surgeons and OR teams centralised control of all components of the operating room, including overhead mounting systems, lighting, operating room tables, endoscopic equipment, cameras, image capture systems and information networks. Multiple high definition monitors allow the surgeon to view radiology images for comparison, see endoscopic or microscopic views as well as real-time laboratory and other diagnostic test reports. The operating rooms are equipped with latest tale medicine connectivity that enables procedures to be transmitted live for the purpose of teaching and training anywhere in the university or to any other institution.

NEW APPOINTMENTS - January 2012

Dr Moghira Iqbaluddin Siddiqui

Assistant Professor Section of Otolaryngology Head and Neck Surgery Department of Surgery



Dr Abida Sattar

Assistant Professor Section of Breast Surgery Department of Surgery



Dr Zia ur Rehman

Senior Instructor Vascular Surgery Section of General Surgery Department of Surgery



Dr Aliya Irshad

Assistant Manager - Education and Research Department of Surgery



Dr Seema Mahenoor

Assistant Manager Department of Surgery



Azam Khan

Administrative Assistant Department of Surgery



Burhanuddin Ali

Administrative Assistant Department of Surgery



PROUD TO ANNOUNCE

The Department of Surgery Proudly Announces



Dr M. Shahzad Shamim Assistant Professor

Section of Neurosurgery

Cleared European Board Examination of Neurosurgery - 2012



Dr Shazia Sadaf

Senior Instructor

Education Coordinator, Department of Surgery and Joint appointment with Department of Education Development

Completed Masters in Medical Education from the University of Dundee, UK - 2012



Ms Shireen Jiwani

Sr Administrative Assistant Section of Neurosurgery and Ophthalmology

Completed Masters in Business Administration (HR) from IQRA University -2012



Mr Salman Alwani

Senior Secretary to Chair





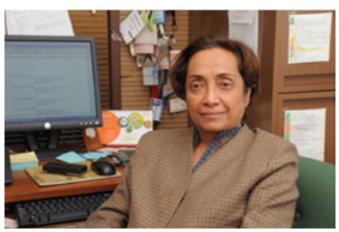
PROUD TO ANNOUNCE

Section of Breast Diseases

The Department of Surgery is proud to announce the establishment of Section of Breast Diseases in the Department of Surgery, Aga Khan University. The new Section is led by Professor Shaista Khan as the founding Section Head.

Professor Shaista Khan and her team, through years of dedication and commitment have provided this platform for the development and recognition of this speciality for training and clinical services. The Section of Breast Diseases would be the first of its kind in the country and is expected to take on a leadership role in further advancing breast care in the region.

The section offers highly specialized breast care using a multidisciplinary approach for surgical oncologic and reconstructive procedures for early and advanced



Professor Shaista Masood Khan Section Head of Breast Diseases

treatment cancer. As part of its commitment to clinical and academic excellence, research and development, the Section of Breast Diseases also offers a two year multidisciplinary Fellowship Program.

Conference Planning and Organization:

Dr Farhan Raza Khan (Chair, Conference Committee) Dr Rizwan Khan (Member, Conference Committee)

Keynote Speaker:

Prof Jamsheer Talati;

Title: Challenges in Development of Clinical

Competence



Surgery Faculty Participation in Workshop:



Dr Farhan Raza Khan facilitated the Research Protocol Writing Workshop

Dr Rizwan Khan facilitated the Assessment of Competence workshop

Surgery Faculty as Judges:

Dr Rizwan Khan was the judge for the Poster and Moderated Poster competition



Dr Hammad Ather was the s judge for the Oral Competition for Surgery and Allied group held at the Auditorium



Dr Shahzad Shamim was the judge for Oral competition for Surgery & Allied group at Auditorium





Dr Faisal Qayyum was the judge for Oral competition for RAP-Dental group at AKU-SON



Winners of Oral Competition in RAP-Dental Group:

Dr Tania Arshad (Orthodontics)



Dr Muhammad Hassan (Operative Dentistry)





Winners of Oral Competition in Surgery and Allied Group

First Position Oral presentation: Dr Ghulam Murtaza

Topic: "Harmonic Scalpel vs. Electrocautery Dissection in Modified Radical Mastectomy: A Randomized Controlled Trial"

Authors: Salma Khan, Shaista Khan, Naveed Haroon, Tabish Chawla, Ghulam Murtaza



Winners of Oral Competition in Surgery and Allied Group

Second Position Oral Presentation: Dr Mehwash Nadeem

Topic: "Attrition in Surgical Residency: The Real Face of a Hidden Problem"

Authors: Mehwash Nadeem, M. Shahrukh Effandi, M. Hammad Ather



Poster Category:

Second Position Poster Presentation: Dr Rizwan Sultan

Topic: "Effect of Post Call Status of Surgery Residents on their Score in PGME Annual Examination"

Authors: Rizwan Sultan, Rizwan Khan, Asad Jamil Raia





Faculty and Staff Appreciation Evening

January 19, 2012

Recipients of the 25 Years of Service Award

Dr Shaista M. Khan

Professor and Section Head Breast Diseases Department of Surgery



Mr Murad Ali Bana

Senior Administrative Officer Department of Surgery



Recipients of the 20 Years of Service Award

Dr Farhat Abbas

Professor and Dean Medical College Aga Khan University



Mr Shaikh Rahmatullah

Senior Administrative Assistant Department of Surgery



Dr Azam Ali -

Associate Professor Section of Ophthalmology Department of Surgery



ALUMNI AFFAIRS

Dr Mohsin Azam

Igraduated from the Orthopaedics residency programme at AKU in November 2009, cleared my FCPS in orthopaedics in March 2010 and Joined Memon Medical Institute Hospital (MMIH) Karachi. During the residency I was inspired by Dr Masood Umer and Dr Haroon ur Rashid to pursue Ilizarov surgery. So I joined a fellowship in Limb reconstruction and Ilizarov surgery at Istanbul University in January 2011. The fellowship provided both basic and advanced experience in deformity correction, limb lengthening and reconstruction with Ilizarov and other methods. I got to see a wide variety of problems being dealt with the Ilizarov method, Taylor Spatial Frame and Smart Correction Frame. One of the highlights of the fellowship was a chance to assist in many intramedullary motorised limb lengthening device (fitbone) surgeries. There was a lot of emphasis on pre-operative planning as it is an integral part of all orthopaedic surgeries specially deformity correction surgeries. During the same period I completed two research papers which have been submitted



Dr Mohsin with Dr Mehmet and Levant at University of Istanbul

to Journal of Bone and Joint Surgery for publication. My mentors at Istanbul University, Professor Mehmet Kocaoglu and Professor Levent Eralp ensured that I could make full use of my time at the University. Apart from that, Istanbul is a beautiful city full of heritage and culture and I visited many parts of the city. After returning to Pakistan, I have started Ilizarov surgeries at my department for bone loss, osteomyelitis and limb lengthening.

2nd Indus Hospital Hand Surgery Course

Dr Syed Kamran Ahmed is AKU alumnus of orthopaedic surgery residency programme, 2003. He was an instructor at the Orthopaedic Section from 2003-2004 at Aga Khan University Hospital, Karachi. He is currently Associate Professor and Consultant Orthopaedic, Hand and Micro Vascular Surgery at The Indus Hospital, Karachi. Dr Ahmed as Course Director, organised the 2nd Indus Hospital Hand Surgery Course on March 23-24, 2012, at The Indus Hospital. Delegates from all over Pakistan including orthopaedic, plastic and general surgery consultants and trainees attended the course.



Faculty and participants at the Hand Surgery Course

The registration was limited to 50 participants. Twenty prominent national and international faculty members facilitated the course. Twenty five lectures were delivered by the faculty. Three interactive international video conference lectures were also conducted on second day of the course. Three surgery sessions took place on the second day which included one live surgery. A best choice question test was conducted and the winner of the test awarded a cash prize.

The prominent national and international faculty members attended the course included Professor Tahseen A. Cheema (USA), Profesor Josephine Wing Yuk Ip (Hong Kong), Dr Sudhir Warrier (India), Professor Muhammad Umar, Professor Mamoon ur Rashid, Professor Moazzam N. Tarrar, Dr Mazhar Nizam, Dr Shehab Ghani, Dr Shehab Afzal Beg, Dr Fazal ur Rehman, Dr Haroon ur Rashid, Dr S Yawar Mehdi, Dr M. Imran Ahmed and Dr Syed Amir Jalil. Dr Sadaf Saeed was the Course Coordinator.

PROMOTIONS

Section of Dentistry

Dr Farhan Raza Khan as Assistant Professor



Section of Neurosurgery

Dr M Shahzad Shamim as Assistant Professor



Section of Urology

Dr Syed Nazim as Senior Instructor



Vascular Surgery

Dr Iram Naz as Assistant Professor





FELLOWSHIP RECEIVED

Fellowship in Paediatric Laparoscopic Surgery at Capital Institute of Paediatrics, Beijing, China

Dr Saqib Qazi completed the Fellowship in Paediatric Laparoscopic Surgery at Capital Institute of Paediatrics, Beijing, China between August 2011 and January 2012.



Dr Saqib enjoying a weekend on the Great Wall of China

The Capital Institute of Paediatrics is a tertiary care referral centre for Paediatric diseases in Beijing, China and is rated Grade-A hospital; simply meaning the best in China. It is an affiliate of Peking University Teaching Hospital and Beijing Medical College Teaching Hospital, responsible for undergraduate, graduate and post-graduate education. Moreover, it is also a Beijing Paediatric Residency Training Base for advanced studies.

This 500-bed hospital has 120 paediatric surgical beds. This hospital is composed of 21 clinical departments, including paediatric surgery which includes sections of neonatal surgery, paediatric ordopaedic surgery, paediatric endosurgery, paediatric orthopaedic surgery, paediatric ophthalmology, paediatric otorhinolaryngology, paediatric gynaecology among others. Each year, the Centre entertains about 1.82 million paediatric out-patient visits including emergency visits and around 14,000 in-patients with annual paediatric surgical procedures nearing 7000.

Dr Qazi's recollections

I joined the Capital Institute of Paediatrics, as a Clinical Fellow in paediatric laparoscopic surgery on August 4, 2011. My training and quality patient care that I had acquired in the academic environment of AKU was promptly realized and appreciated by my supervisor Professor Li Long and therefore as a Clinical Fellow I was given full privileges very soon after joining the programme. My responsibilities included almost independent operating five days a week.

The working environment was excellent and all team members were very caring and respectful. My supervisor Professor Li Long is not only the Chairman, Department of Paediatric Endosurgery there but he is also Chairman of Chinese Paediatric Endosurgery Group. I had the opportunity to perform on more than 40 laparoscopic cases every month. I was able to scrub in 240 cases in these six months of which I performed 91 independently. This is an impressive number for any paediatric laparoscopic centre in the world. My experience was further enhanced by the efforts of Professor Li Long who gave special teaching sessions outside the operating room. I connected well with the resident community and they too were impressed with my approach to patient care under such circumstances.

Professor Li Long impressed me with his knowledge of general paediatric surgery, paediatric hepato-biliary surgery and paediatric laparoscopic surgery. He also provided me an opportunity to attend one of the great meetings of the International Endoscopy Doctors Conference and Paediatric Minimally Invasive Surgery: Showcase in Asia, where I had



Dr Saqib Qazi with Prof Li Long

the opportunity to meet and listen to international speakers. I enjoyed my stay in the wonderful city of Beijing with excellent Chinese hospitality. Beijing is a very expensive city and cost of living is very high. Language remained my major problem. Even the consultants and residents could not understand or speak English. TV was of no use as all channels are in Chinese except one news channel. The computer was my only solace. During my stay, the realization dawned upon me that I have a talent in cooking.

I brought with me a wealth of knowledge and experience to share and build on further here at AKU. I am thankful to the Dean and Chair, Department of Surgery beside the section head of Paediatric Surgery for the opportunity in the advancement of my surgical career.

RESIDENT'S CORNER

Cleared FCPS II in General Surgery March 2012 —

Dr Sana Nasim



Dr Salma Khan



Dr Ghulam Murtaza



Dr Samiullah Khan Niazi



Dr Sadaf Qadeer Ahmed

Resident – ENT

Cleared her intermediate module examination on May 25, 2012



Professor Farhat Moazam's Surgical Grand Rounds Awards

- Dr Tania Arshad Siddiqui received Certificate of Best Presentation for the period July to September 2011
 Topic: 'Comparison of Orthodontists' and Patients' Perception using Index of Orthodontic Treatment Need'
- Dr Mehwash Nadeem received Certificate of Best Presentation for the time period October to December 2011 Topic: 'Attrition in Surgical Residency Real Face of a Hidden Problem'

Best Poster Awards -

- Mehwash Nadeem, M Shahrukh Effendi, Hasnain Zafar have been awarded 2nd best poster presentation award 9th Infectious Disease Society of Pakistan Annual Conference held between February 29-March 3, 2012, Karachi.
 Topic: Localized Fungal Infection in a Prosthetic Mesh Treated Conservatively
- Syed Muhammad Nazim, Imran Khan Jalbani, Farhat Abbas, Khurram Minhas won the best poster award at the 13th International Urological Conference (UROCON) 2012 Lahore, held on April 20-22, 2012.
 Topic: Sarcomatoid carcinoma of prostate involving whole lower urinary tract and rectum.

Poster Presentation

Dr Mohsin Qadeer

presented my poster on 'Prophylaxis of early post traumatic seizures: Phenytoin versus enteral Leviteracetam', at the International Brain Injury Association's 9th World Congress on Brain Injury, from March 21-25, 2012, in Edinburgh, Scotland, which is the largest gathering of international professionals working in the field of brain injury.

The congress was a five day event and started with pre congress workshops on paediatric brain injury which were extremely useful in bringing up new concepts. Here I also had the opportunity to be a part of the IMPACT working group for recommendations



regarding management guidelines, and coming up with ICD codes for separate recognition of brain injury as a chronic disease by WHO. These were followed by expert lectures on all the different aspects of brain injury and really opened up the horizons of research for me. There was special emphasis on management of brain injury in the developing and underdeveloped world, which is more than 80 per cent of the world population. I also had very healthy discussions on the topic of my presentation with the attendees and received encouraging feedback, including an offer for intellectual and logistic support for taking it a step ahead and conducting a collaborative multicentre trial. I also had the honour of having detailed discussions with Professor David Mandelow who is one of the world leaders in the area of brain injury. The last day consisted of a visit to the Royal College of Glasgow and a state of the art lecture on Glasgow College of Surgeon by the person who first introduced it, Professor Graham Teasdale.

First Paediatric Orthocon 2012 - Lahore

Dr Idrees Shah

This year the first paediatric orthopaedic conference was arranged at Children Hospital, Lahore by Pakistan Orthopaedic Association (POA) from March 16-17,2012. There were several preconference workshops also arranged including Ponseti serial cast application and paediatric orthopaedic trauma course. The whole conference was unique in terms of its content and participation by several international faculties. Among the national faculty Dr Shahryar Noordin represented AKU in pre-conference workshop and the conference itself. The Section of Orthopaedic Surgery AKU sent two senior residents, Dr Idrees Shah and Dr Shahid Khan for the conference and workshop.





During the Ponseti cast application workshop all participants were provided ample opportunity to apply cast on patients under supervision of national and international faculty. The whole conference was divided in different sessions dedicated to particular themes including congenital paediatric disorders, cerebral palsy, infection and musculoskeletal oncology.

After the conference sessions participants visited historical places in Lahore, including Badshahi Mosque, Shahi Qila and Minare-Pakistan. Overall the visit to Lahore was very useful in terms of academic, social and geographic learning.

Cricket Clash between Laparotomy Lions and Damage Controllers — Dr Noman Shahzad

On March 11, 2012, the Section of General Surgery organized a cricket match. The idea was to have a break from monotonous daily routine of hospital life. This was half day dedicated to cricket by general surgery group in which almost all faculty members, fellows, instructors and residents both males and females in General Surgery participated. Two teams were made by the names of Laprotomy Lions (GS 1 n 3) and Damage Controllers (GS 2 n 4). Two matches of 10 overs per innings were played. First match was a tie, with both teams scoring 77 runs while the second was won by the Laprotomy Lions.





Overall it was a fun day, full of joy which was doubled by the critical commentary of Dr Shaista Khan. All of us left the ground with feelings of a unified professional family, though for next two days we had aches and pain in every part of our bodies.

Great support was provided by the faculty, both from general surgery and other sections, and passion and enthusiasm of the participants was commendable.

In future, we would encourage such refreshing activities.

International Electives Experience

Dr Naveed Baloch, Orthopaedic Resident - PGY VI -

✓ y first month of observership was at New York **▲**University Hospital for Joint Disease, located in Manhattan, New York and headed by Dr Joseph Zuckerman, then president of American Academy of Orthopaedic Surgeons. I got the opportunity to observe many diverse procedures in spine surgery ranging from cervical to lumbar disc replacement, percutaneous placement of intervertebral fusion devices followed by instrumentation, deformity correction including correction of scoliosis and kyphosis with monitoring of motor evoked potential for each screw placement. I also got opportunity to work on a research project with Dr Baron S. Lonner, clinical professor at Hospital for Joint Disease and director of scoliosis and spine associates, on comparison of all pedicle screw versus hybrid Dr Naveed Baloch with Dr. Chitrangen S Ranawat (2nd from constructs for correction of thoracic AIS curve. Over all this was a good experience.



left) and two fellows

For the second month, I moved to Louisville, Kentucky. CMKI is the institute founded by two great hand surgeons Dr Harold E Kleinert and Dr Joseph E Kutz. Named in honour of Dr Kleinert's mother, this institute is famous worldwide for its research and education in upper extremity care and microsurgery. America's first successful hand transplant was performed here. Diverse procedures which I observed here included elbow and wrist arthroscopy, total elbow replacement, distal radio ulnar joint replacement. Observing distal radial ulnar joint replacement performed by inventor of the implant Dr Luis R. Scheker, was also great fun.

For the third month I again moved back to New York and joined the Hospital for Special Surgery affiliated with Weill Medical College of Cornell University. This hospital is currently ranked number one in US for orthopaedic care. Special aspect of this observership was permission to scrub in surgeries. Of many different procedures



I observed there, computer assisted unicondylar knee replacement is important to mention. With Dr Amar Ranawat I got the chance to meet his father Dr Chitranjan S. Ranawat, a legendary knee surgeon, founding president of the Knee Society and designer of many J&J implants including famous rotating platform TKA implant. Meeting and scrubbing in with Dr Ranawat was a dream come true.

Over all this was a great experience of gaining and sharing knowledge and experience and I will highly recommend international electives for future residents.

9th Annual Middle East Update in Otolaryngology Conference & Exhibition of Head & Neck Surgery at Madinat Jumeirah, Dubai, UAE —

Dr Adeel Khan has attended 9th Annual Middle East update in Otolaryngology Conference and Exhibition of Head and Neck Surgery at the Madinat Jumeirah, on April 22-24, 2012 at Dubai, UAE.



Dr Adeel presented his presentation on 'Variation in Lateral Lamella of the Cribriform Plate; Software-Enabled Computed Tomographic Analysis and its Clinical Relevance in Endoscopic Sinus Surgery'at the Conference. A total of 50 residents were selected from Middle East and Pakistan for presentation of their research projects.



Dr Nabeel Hassan presented a research paper on "Surgical approach to manage Cerebrospinal Fluid RhinorrhoeaThrough Nose or Through Vault" awarded complete scholarship by Middle East society of Otolaryngology to present it in 9th Annual Middle East Update in Otolaryngology Conference.

The Conference was held between April 22-24, 2012. A number of sessions were held in an attempt to cover almost all the aspects of Otolaryngology in threedays. Speakers at the Conference included some of the most famous names in the field.



Paper Presentation at UROCON 2012 Lahore

Dr Mehwash Nadeem

TROCON is the biggest urological conference held annually nation wide and is well attended by national as well as international participants. This year the UROCON took place in Lahore.

Pre-conference workshop was arranged at Sheikh Zayed Hospital, Lahore followed by conference at the Pearl Continental Hotel. Residents and alumni from Aga Khan University had significantly contributed to the success of the conference.

I had the opportunity to presentone poster presentation and two oral presentations at the conference, which led to the productive discussions of the participants. This experience has not only



enhanced my knowledge but also developed my confidence to emerge as a researcher and an academic surgeon which falls on an ultimate institutional goal. The conference was a huge success.

Association of Surgeons in Training (ASIT) Cardiff, UK-

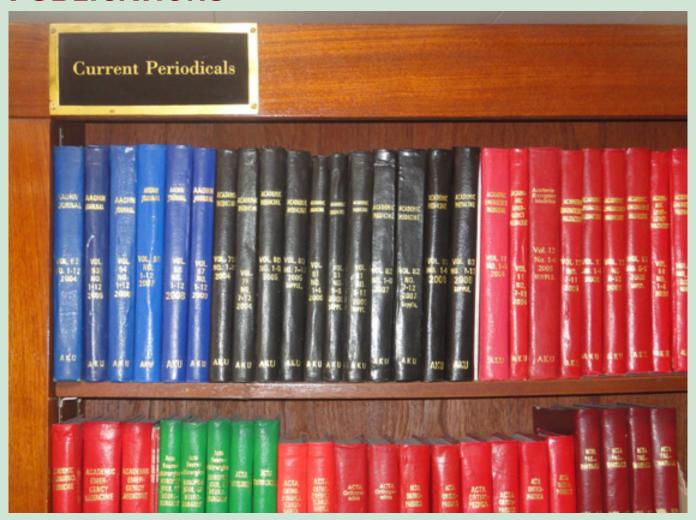
Dr Salma Khan

The Association of Surgeons in Training (ASIT) conference was held on March 22-25, 2012, at Cardiff, UK. It was an international meeting, with a worldwide attendance, primarily directed to promote young surgeons in training activities. Dr Salma Khan, Resident, Section of General Surgery, presented an abstract on 'Harmonic Scalpel vs. Electrocautery Dissection in Modified Radical Mastectomy,' which was accepted for oral presentation. "It was a privilege for me to receive departmental as well as PGME support to attend this training session," Dr Khan says. Her presentation was well received and was followed by an active discussion. "It was challenging to interact during the critique, however I felt well rewarded with my presentation being



selected for the Best Oral Presentation Award," Dr Khan reminisces. Such experiences open new horizons through the opportunity to interrelate with surgical residents from all over the world who share their training experiences with each other.

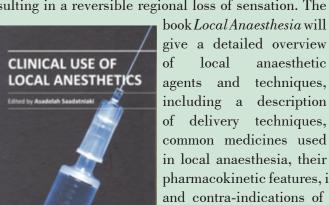
PUBLICATIONS



Collaborative Book Chapter by Dr Hammad Ather and Dr Nasir Suleman

Clinical Use of Local Anaesthetics

Local anaesthetics inhibit depolarization of the nerve membrane and the propagation of action potential, resulting in a reversible regional loss of sensation. The





pharmacokinetic features, interactions and side effects. It will describe indications and contra-indications of this type of anaesthesia, its risks and benefits and conclude with an overview of future trends in local anaesthesia.

One of the chapters in the book is written by Dr Hammad Ather, titled'Common urological procedures under local anaesthesia'.

Section of Cardiothoracic Surgery

Barolia R, Ali F, Jaffar S, Sami S. Coronary artery bypasses grafting: quality of life of patients in Karachi. Br J of Nursing 2012; 21: 6.

Shahabuddin S, Sami SA, Ansari JA, Perveen S, Furnaz S, Fatimi S, Sharif H. Coronary Artery Bypass Grafting After Percutaneous Coronary Intervention. J Coll Physicians Surg Pak 2012; 22 (5): 340-341.

Section of Dentistry

Sukhia RH, Fida M, Azam SI. Dental age table for a sample of Pakistani children. Eur J of Orthodontics 20.

Islam ZU, Shaikh A, Fida M. Dentoalveolar heights in skeletal class I normo-divergent facial patterns. JCPSP 2012; 22 (1): 5-9.12; 34: 77–82.

Ansari BB, Umer F, Khan FR. A clinical Trial of Cold Lateral Compaction with Obtura II technique in root canal obturation. Journal of Conservative Dentistry 2012; 15 (2): 156-60.

Tauheed S, Shaikh A, Fida M. Microaesthetics of the Smile: Extraction vs. non-extraction. J Coll Physicians Surg Pak 2012; 22 (4): 230-234.

Sarwat Memon, Mubassar Fida and Attiya Shaikh. Comparison of Different Craniofacial Patterns with Pharyngeal Widths. Journal of the College of Physicians and Surgeons Pakistan 2012, Vol. 22 (5): 302-306.

Section of General Surgery

Naz I, Rehman ZU, Aziz M, Sophie Z. Subclavian artery aneurysms: management implications in a resource-limited setting. Royal Society of Medicine Press. Published online on 23 January 2012 vascular, doi: 10.1258/vasc.2011.oa0307.

Siddiqui NA, Azami R, Murtaza G, Nasim S. Postoperative port-site pain after gall bladder retrieval from epigastric vs. umbilical port in laparoscopic cholecystectomy: A randomized controlled trial. Int J Surg 2012; 1-4.

Section of Neurosurgery

Shamim MS, Enam SA, Tahir MZ, Khan M. Prospective case control evaluation of epidural midazolam for improving pain and ambulation after microdiscectomy. J Pak Med Assoc 2012; 62(6): 561-565.

Razzak JA, Shamim MS, Mehmood A, Hussain SA, Ali MS, Jooma R. A successful model of road traffic injury surveillance in a developing country: process and lessons learnt. BMC Public Health 2012; 12:357.

Shamim MS, Ali SF, Enam SA. Commentary on letter to Editor: "Rahimi-Movaghar V, Rasouli MR. Spinal cord decompression. Is country of surgery a predictor of outcome?" Surg Neurol Int 2012; 3:36.

Shamim MS. Commentary on letter to Editor: "Rathore FA, Farooq F, Mansoor SN. Non-operative management is superior to surgical stabilization in spine injury patients with complete neurological deficits: Some additional perspectives." Surg Neurol Int 2012; 3:22.

Hussain M, Nasir S, Murtaza G, Moeed U, Bari ME. Magnetic resonance imaging in cervical facet dislocation: a third world perspective. Asian Spine Journal 2012; 6 (1): 29-33.

Zafar SN, Khan AA, Ghauri AA, Shamim MS. Phenytoin versus Leviteracetam for Seizure Prophylaxis after Brain Injury - A Meta-Analysis. BMC Neurol. 2012 May 29;12(1):30

Shallwani H, Tahir MZ, Bari ME, Tanveer-Ul-Haq. Concurrent intracranial and spinal arteriovenous malformations: Report of two pediatric cases and literature review. Surg Neurol Int. 2012;3:51. Epub 2012 May 14.

Tahir MZ, Quadri SA, Farooqui M, Bari ME, Di X. Tension arachnoid cyst causing uncal herniation in a 60 year old: a rare presentation. CNS Neurol Disord Drug Targets. 2012 Mar;11(2):127-31.

Jooma R, Khan A, Khan AA. Protecting Pakistan's health during the global economic crisis. East Mediterr Health J. 2012 Mar; 18(3):287-93.

Jooma R.Proposals for a scheme for continuing professional development in Pakistan.J Pak Med Assoc. 2011 Dec; 61(12):1231-3.

Section of Ophthalmology

Chaudhry TA, Aman T, Shaikh F, Ahmad K. Corneal swapping in a bomb blast victim. J Pak Med Assoc. 2012 Jan; 62 (1):67-8.

Choudhary MM, Saeed MU, Ali A. Removalofsilicone oil: Prognostic Factors and Incidence of Retinal Redetachment. Retina. 2012 May 30.

Section of Orthopaedics

Fazal A, Rashid HU, Cheema T. Peroneal island flap for wound coverage in complex injuries of the lower extremity. Dovepress Orthopedic Research and Reviews 2012; 4: 1-4.

Fazal A, Lakdawala RH. Fourth-generation spinal instrumentation: experience with adolescent idiopathic scoliosis at a tertiary care hospital in Pakistan. International Journal of General Medicine 2012; 5: 151–155.

Fazal A, Lakdawala RH. Patellar resurfacing versus no-resurfacing in total knee arthroplasty for osteoarthritis: experience at a tertiary care institution in Pakistan. Open Access Surgery 2012; 5: 9-14.

Qadir I, Umer M, Baloch N. Functional outcome of limb salvage surgery with mega-endoprosthetic reconstruction for bone tumors. Archives of Orthopaedic and Trauma Surgery; 17th May, 2012; DOI 10.1007/s00402-012-1542-3.

Raza H,Hashmi P,Abbas K,Hafeez K.**Minimally invasive plate osteosynthesis for tibial plateau fractures**. Journal of Orthopaedic Surgery 2012; 20(1):42-7

Umer M, Qadir I, Azam M.Subacromial Impingement Syndrome. Orthopedic Reviews 2012; volume 4:e18.

Section of Otorhinolaryngology, Head & Neck Surgery

Suhail A,Ahmed MS, Sobani ZA, Ghaffar S. Laryngeal tuberculosis presenting as laryngeal carcinoma. J Pak Med Assoc 2012; 62(2).

Baloch MA, Awan MS, Nabeel H. **Angioembolization in intractable epistaxis – a tertiary care experience**. J Pak Med Assoc 2012; 62(3) 254-257.

Akhtar S, Shamim AA, Ghaffar S,Ahmed MS, Ikram M. Adult laryngeal haemangioma; a rare entity. J Pak Med Assoc 2012; 62(2); 173-4.

Junaid M, Choudhary MM, Sobani ZA, Murtaza G, Qadeer S, Ali NS, Khan MJ, Suhail A. A comparative analysis of toluidine blue with frozen section biopsies for intraoperative assessment of tumor margins in oral squamous cell carcinoma. World J of Surg Onc 2012; 10:57 doi: 10.1186/1477-7819-10-57.

Masoom A, Akhtar S, Humayun NH, Ikram M. Daycare adeno-tonsillectomy: is it safe in developing countries? J Pak Med Assoc 2012; 62 (5): 458-60.

Section of Urology

KhanN, Ather MH, Ahmed F, Zafar AM, Khan A. Has the significance of incidental findings on unenhanced computed tomography for urolithiasis been overestimated? A retrospective review of over 800 patients. Arab Journal of Urology.

Nazim SM, Ather H. Alpha blockers impact stent related symptoms- A randomized, double blind placebo controlled trial. J Endourol. 2012 May 7 PMID: 22563773.

Hassan Abol-Enein *, Nuzhat Faruqui, Nashwa Barakat, Ahmed A. Shokeir. **Does the afferent tubular segment in an orthotropic bladder substitution compromise ureteric antireflux properties? An experimental study in dogs**. Arab Journal of Urology Volume 10, Issue 2, (June 2012) 125-130.



GUEST LECTURES

Topic: Oral Cancer -

Professor Takashi Saku

Division of Oral Pathology, Department of Tissue Regeneration and Reconstruction, Niigata University Graduate School of Medical and Dental Sciences, held on February 23, 2012.

CONTINUING MEDICAL EDUCATION

Free Orthopaedic Clinic on January 1-2, 2012-

An Orthopaedic Clinic was conducted on January 1, 2012 at Quetta Serena Hotel by Dr Shehryar Noordin andDr Tashfeen Ahmed.



The clinics started at 9:00 am and ended at 10:00 pm during which 275 patients were attended with different orthopaedic complaints. Most of the patients were advised total knee



replacement and arthroscopic surgeries.

Update on Arterial Disease Management

n January 21, 2012, a CME session was conducted at King Edward Medical University (KEMU) auditorium,

Lahore. Dr Iram Naz gave her presentation on 'An Update on Arterial Disease Management', covering management options for lower extremity arterial diseases and extra-cranial carotid artery stenosis. Chair of Department of Surgery emphasised the need of CME for life-long learning to the audience before presentation. It was well attended by undergraduate, postgraduate trainees and faculty of Department of Surgery and Pathology at KEMU, Lahore. Total of 84 participants registered for the event. Audience took special interest in assessment and management of gangrene of toes and amputation prevention in diabetic patients.



SIGNS SYMPTOM AND CARE

(PUBLIC HEALTH AWARENESS SEMINAR)

Public Health Awareness Programme on World Cancer Day —

lack public awareness programme was organised by AKU on February 8, 2012 to commemorate the World

Acancer Day. Dr Rizwan Khan was one of the invited speakers on this occasion from the department of surgery. Dr Rizwan emphasized on the risk factors, diagnosis and treatment options for liver cancer. Although the overall prognosis of patients with liver cancer is not very promising, it was noted that prevention of this disease was possible by societal and lifestyle changes including surveillance and control of hepatitis B and C. The need for development of a liver transplant programme was also emphasized.



Public Health Awareness Programme on Osteoarthritis and Recent Advances in Treatment —

Dubai, May 26, 2012

Dr Pervaiz Hashmi

Consultant Orthopaedic Surgeon and Section Head of Orthopaedic Surgery

Dr Pervaiz Hashmi specializes in joint replacement, reconstructive orthopaedic oncology, shoulder and brachial plexus surgery. He is also trained in hand and reconstructive, microsurgery from Singapore.



EVENTS

Department of Surgery Celebrates Annual Night - 2011 -

On December 31, 2011, the Department of Surgery celebrated its annual surgical night. Yet another memorable year was seen off by the Department of Surgery in a befitting manner by celebrating the annual surgical night at the AKUH auditorium. The idea was to gather the whole department of Surgery out of their busy day-to-day schedule and to appreciate the graduating residents and fellows, share and enjoy some memorable moments of the year and say goodbye to those passing out.

The night began with recitation of Holy Quran





by Neurosurgery Resident. Dr Asad Jamil Raja, Chairman Department of Surgery opened the event with a warm welcome. Dr Rehman Alvi as Chairman of PGSEC welcomed the guests and briefly shared the new changes in the residency program along with the support from the department of surgery to the Residents and Fellows. He was confident that the guests would enjoy the event which was organized by the Residents.

Dr Mahwash and Dr Tariq were the masters of ceremony and were helped out by Dr Saad and others belonging to different sections of the department. The programme included hilarious skits, short plays, parodies and comics made by the residents and interns, to remind the senior residents and faculty of some of their good times and habits in a very entertaining but mature manner. The show was thoroughly enjoyed by everyone. Awards were given by faculty members to the successful residents and fellows on completing their surgical training.

The Best Resident's Award 2011 on Research was given to Dr Johar Raza of Urology and the Most Popular Resident of the Year 2011 award was given to Dr Montasir Junaid of ENT.



On this occasion Dr Sadaf Khan was awarded a token of appreciation for her contributions towards undergraduate surgical training. Awards were also distributed amongst the administration and office staff appreciating their efforts.

The event was formally concluded by Dr Muneer Amanullah and Dr Khurram Siddiqui by paying a vote of thanks to all who attended the event. Many of our faculty, alumni, fellows, residents, staff, and many supporters had joined in those festivities. Group and individual photographs were also taken by the residents and faculty.

Dinner was followed by a highly entertaining musical evening by Mr Ammar Ali Khan. Interestingly equal participation came from residents who sang very well and included Dr Zia-ur-Rehman, Dr Muhammad Nazim, Dr Johar, Dr Muhammad Tariq, and Dr Waqas. Dr Roger played wonderful guitar.



It was an entertaining event organized superbly by the residents and interns. We as a department showed how proud we all are of our graduating residents and fellows and look forward to their successes, which is actually success of the Department of Surgery.

Annual PICNIC

Department of Surgery

Celebrated the summer season Picnicby bringing faculty, residents, staff, and volunteers together to the Dream World Water Park for a fun-filled day on Sunday, April 15, 2012. Activities included swimming, canoeing, water rafting and much more.



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Cutting Edge
Department of Surgery
Aga Khan University

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