



NEWS & VIEWS

2009-2010

MAHIM DHARAVI MEDICAL PRACTITIONERS' ASSOCIATION

President : Dr. Sanjeev D. Khosla

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Dr. H. S. Shingam, Dr. Sudhir Patil & Dr. Akhtar Ansari

Vol. XXV No. 8

FEBRUARY 2010

EDITORIAL Journey to the Silver Jubilee Year

The final lap towards our journey to the Silver Jubilee Year (20th to 24th year) brought out the inner strength of MDMPA. The high standard of programmes set by the predecessors were successfully maintained, with few distinctive 'sparks' displayed by various departments.

Dr. Sudhir Patil (President: 04-05), the man with a passion for travelling around the world, meticulously planned a tour to Mauritius and Dubai. A 'Ghazal Nite' at MIG Club(22/8/04) with the members given an opportunity to display their talents in singing and a 'Pub Nite' at Ramee International (17/12/04) where the 'twinkle toes' danced away to glory till 2 am next morning was mind-blowing! The Cricket team reached the finals of a couple of tournaments. The CMEs went back to purely academics at Sion Hospital, reaching its crescendo at Taj Lands End-Bandra, the 13th Annual Medical Conference(5/12/04). The Annual Social at Blue Sea - Worli (17/4/05) was a cool retreat. A donation of Rs. 60,611/- was made towards Prime Minister's Relief Fund, by forfeiting the Annual Picnic.

Dr. R P Joshi (President:05-06) brought in a very innovative 'Monsoon Hungama'(4/9/05), a fun & frolic evening at Matunga Gymkhana, a fabulous overnight picnic at Pan Card Club- Pune(14th & 15th Jan. 06) and a high voltage Social at 'Velocity'(16/4/06). The Cricket team tasted their first success by winning the 25 overs - Super League Tournament.

Dr. Arun Bhure (President:06-07) brought in fitness consciousness by organising a 'Monsoon Trek' to Matheran(13/6/06). A 'Family Movie Show' for members at Starcity Cinema was held to spread the concept of MDMPAites as a big happy family. A cataract detection and treatment camp was held at Dharavi in collaboration with an NGO, Mahavir International. The Cricket team retained the 25 overs - Super League tournament.

Dr. Akhtar Ansari (President:07-08) introduced a new dimension in the scientific activities by tying up with Asian Heart Institute-BKC for a regular monthly CME in Cardiology. An unique CME was organised aboard a boat cruising in the waters of the Arabian Sea, off Gateway of India(27/1/08).

The young turk Dr. Milind Toraskar (President:08-09) kept the good work of MDMPA going with its CMEs, Conference, Monsoon Trek, Indoor Games, Picnic, Annual Social and the community health services of Rural Camps & School Checkup of children to usher the arrival of the Silver Jubilee Year(2009-2010).

Dr. Ajoy K. Saha, Editor

From the President's desk...

I am sure you all can feel the high energy levels that are flowing in our committee members. Every programme has a class and a personal touch, giving every member a grandeur feeling. The enthusiasm of our members spurs us to outperform our previous best. The outstation CME was a landmark achievement for our team, as it had all the best possible arrangements with loads of fun. Whether it was Antakshri on the way or the vast landscape of Prakruti or the exotic beach or the delicious food spread, it was just wonderful. We promise another grand experience at the Boat Cruise to make it feel a truly Valentine Day for our dear members. The prompt response to fill 50% of the seats for the Srilanka Tour has prompted us to arrange for more seats for our members and also make it memorable. The details are mentioned in this bulletin and book your seats at the earliest to avoid disappointment. We shall take care of almost everything except your shopping, for which we plan to take everyone to the best and very reasonable shopping centre at the end of the Tour. The confirmations must reach us by 25th Feb. 2010 to enable us to get the desired rates. The CME on 28th Feb. 2010 is an interesting combination of Dermatology and ENT, which I am sure shall be extremely informative and interesting. You shall be glad to read that for the first time an entire CME on Physiotherapy has been arranged. This CME shall benefit every member; be it a Consultant or a Family Physician. I am still awaiting regular communication from our members and to enhance this we are printing our website and email ID's of office bearers. The need of the times is to be communication savvy before we face embarrassment not only socially but even at home, where our children click into the vast ocean of information and knowledge. Our website shall be uploaded with latest happenings in MDMPA and photographs of various events. You can download any or all photos. Our children are soon to have their final exams. I wish them ALL THE BEST and also the parents in their most trying times. I assure the children that they shall have plenty to rejoice after their exams. Until then, Happy Reading.

Dr Sanjeev D. Khosla, President



RURAL MEDICAL CAMP
 Poshid - 1st October 2009
 Our team of doctors along with
 President, Dr. Sanjeev Khosla



**MDMPA T-10
 SILVER JUBILEE
 CRICKET TOURNAMENT**
 Indian Airlines Ground - 27th December 2009
 The Winners, MDMPA Cricket Team with
 Capt. Dr. Surendra Shingnapurkar



EMCURE MEDICRICKET
 Pune Club Ground - 17th January 2010
 The Winners, MDMPA Cricket Team &
 contingent, along with Mr. Chandu Borde,
 Mr. Ajit Wadekar,
 Mr. Arun Khanna (MD, Emcure) &
 Capt. Dr. Milind Toraskar

My Pranaam to all my respected teachers, my guiding guides and all the dear members of MDMPA

The more we become, the more we are capable of becoming and the more we are capable of becoming, the more we become. That's what is possible in a life of a Primary Care Physician.

We know now that just as our medical science can coax stem cells to take on the form of any cell in the body, creating heart tissue, bones and even brain tissue to replace the damaged body parts. So, we can coax our mindset to do a variety of things as Primary Care Physician in our clinics, which can bring in your life the romance of a Great General Practice.

A Primary Care Physician should do something more than putting a stethoscope on the chest and a torch in the mouth and be more interventional. He can do something like taking up any procedure in the field of cosmetology, ECG & doing ambulatory BP monitoring in Cardiology, doing sleep studies & spirometry in Pulmonology. A lot can be done for Geriatric population like giving RT feeds, catheterizations etc. Lots can be done for our diabetics, obese patients, counselling, family planning, vaccinations - paediatric and adults and in fact pick up anything from any branch of medicine which you are comfortable with or have passion to do. Get yourself adequately trained, gain all the experience and make that as your USP. Once you have opened up your doors of innovation you will find a plethora of opportunities waiting for you to walk in your life to give you all what you wanted in life. We all truly believe that our real purpose in life is growth and peace. You really are the creator of your own reality and we at MDMPA shall be creating together the reality of being experienced doctors. Using the power of sixth sense, clinical acumen, being the primary contact of the patient, the right attitude and mindset, we shall find infinite opportunities to choose and make of ourself the essential energy for every patient who came to us.

Keep your hand and your heart in the right direction and you'll not have to worry about your feet. Don't sit back and take what comes. Go after what you want & remember you are unique, just like everyone else. We should give meaning to life and not wait for life to give us meaning. This is the unspoken truth spoken fully.

Watch out in the next MDMPA Bulletin, which shall highlight "Learn avenues to earn revenues."

With loads of love and light.

I remain,

Warmly yours,

Dr. Deepak K Jumani, Co-Editor

SECRETARY COMMUNICATES

Hip Hip Hurray!

First of all I congratulate our MDMPA cricket team for winning the "Emcure Medi Cricket Tournament" at Pune on 17th January 2010. A great performance by our players against Mulund Medicos, which went to the "wire" resulting in victory for MDMPA!

Our Silver Jubilee Picnic was a great success, with lots of FUN, MASTI and DHAMAAL with family and friends at PRAKRUTI RESORTS, Kashid, Alibaug. It was luxurious and relaxing for our members who had an unforgettable experience.

As you all know we have organized a boat cruise on Sunday, 14th of February 2010 to celebrate Valentine's Day. Come one, Come all and have a gala evening.

After the enjoyment and fun-n-frolic, 2 CME's are waiting for you on 28th February 2010 at MIG Club, Bandra and 21st March 2010 at Acres Club, Chembur. Bookings have already started. Book early to avoid disappointment, since there are limited seats.

I wish all the members a VERY HAPPY HOLI!!

Thanks & Best Regards

Dr Satish Palshikar, Hon. Secretary

MDMPA LADIES WING PROGRAMME

On Monday, 8th March 2010 on the occasion of **International Women's Day**, a special programme for ladies will be held related to **Care of the Heart**, at A-12, Suraj Venture, Behind Paradise, Mahim West (MDMPA Office). For further details contact, **Dr. Prabha Shinde (M) 9821666589**.

MDMPA CLASSIFIEDS

- * **Congratulations to Dr. Nirav Chheda** on opening of his new ENT Hospital at Sion Circle. From: Dr. Sudhir Patil and Dr. Anil Pachnekar
- * **Available** place suitable for dispensary, X-RAY, PATHO-LAB at MAHIM EAST on RENT. 13 storey bldg. Grd Fl. Nr. Railway station. Call Dr. Hanif on 9867372603 between 3 p.m to 7 p.m.
- * Best wishes from Dr. C. A. Taware to **Dr. Nirav Chheda** on opening of his new ENT Hospital- A.S.C.ENT at Chaman House Sion, Mumbai
- * Wanted/Available **Healthy Semen Donor** for artificial insemination. Screened for Infectious Diseases & good sperm count. Contact: 9821316916
- * **Locum Doctors Directory:** Register your name in directory & do locum round the year. Send details to: mdmpa@rediffmail.com or by SMS to: 9324173663. **Free Service**
- * Announce in **MDMPA CLASSIFIEDS:** Change of address / Tel.Nos. / Birthdays / Anniversaries / CME's in Mumbai / Hospital, Lab, Clinic, Inauguration etc, **by donation of Rs. 200/- to MDMPA. Send SMS to 9324173663**
- * Join **MDMPA FREE SMS** service to get MDMPA programme news at lightening speed. **Just send one sms: JOIN MDMPA to 09219592195**
- * **Not getting Bulletin?** Address has changed? Send your new address to **Dr. Arun Bhure: 9322821919**

EARLY DIAGNOSIS OF CANCER = BENEFITS (Contd. form last issue)

Dr. Dhairyasheel Savant - Cancer Surgeon

Cancer is confirmed by finding cancer cells on microscopic examination of samples from the suspected area. Usually, the sample must be a piece of tissue, although sometimes examination of the blood is adequate (such as in leukemia). Obtaining a tissue sample is termed a biopsy.

Cancer Screening Recommendations	
Procedure	Frequency
Skin cancer	
Physical examination	Should be part of a routine checkup; more frequent examinations may be needed for people at high risk for developing skin cancer
Whole-body photography	Not routinely needed; may be helpful for people with multiple moles or in whom examination of the skin is difficult
Lung cancer	
Chest x-ray	Not recommended on a routine basis
Sputum cytology	Not recommended on a routine basis
Low-dose spiral computed tomography	Not recommended on a routine basis, but is under investigation
Rectal and colon cancer	
Stool examination for occult blood	Yearly after age 50†
Sigmoidoscopic or colonoscopic examination	Every 5 years beginning at age 50 (sigmoidoscopy)† Every 10 years beginning at age 50 (colonoscopy)
Prostate cancer	
Rectal examination	Yearly after age 50
Blood test for prostate-specific antigen	Yearly after age 50
Cervical cancer	
Papanicolao (Pap) test	Annual regular Pap test (or newer liquid-based Pap test every 2 years) beginning between ages 18 and 21. Some women 70 years of age or older who have had 3 or more normal Pap tests in a row may choose to stop having cervical cancer screening. For women over 30, some doctors recommend testing every 3 years with a conventional Pap test plus the human papillomavirus DNA test
Breast cancer	
Breast self-examination	Consider monthly self-examinations after age 20
Breast physical examination by health care provider	Every 3 years between ages 20 and 39, then yearly
Mammography	Yearly, starting at age 40

A person's physician can help the person decide when to begin screening and which tests should be used.

Diagnostic Tests and Staging

Diagnosis

Usually, when a doctor first suspects cancer, some type of imaging study, such as x-ray, ultrasonography, or computed tomography (CT), is performed. For example, a person with chronic cough and weight loss might have a chest x-ray; a person with recurrent headaches and trouble seeing might have a CT scan or magnetic resonance imaging (MRI) of their head. Although these tests can show the presence, location, and size of an abnormal mass, they cannot confirm that cancer is the cause. Cancer is confirmed by finding cancer cells on microscopic examination of samples from the suspected area. Usually, the sample must be a piece of tissue, although sometimes examination of the blood is adequate (such as in leukemia).

Tumor Marker	Description	Comment About Testing
Alpha-fetoprotein (AFP)	Levels may be raised in the blood of people with cancer of the colon. Blood levels may also be elevated in patients with other cancers or noncancerous conditions.	Testing can be useful in diagnosing these cancers and in monitoring treatment.
Beta-human chorionic gonadotropin (β-HCG)	This hormone is produced during pregnancy but also occurs in women who have a cancer originating in the placenta and in men with various types of testicular cancer.	Testing can be useful in diagnosing such cancers and in monitoring treatment.

contd. to page no. 6

CME ON ENT & DERMATOLOGY

Date : Sunday, 28th February 2010 **Time :** 6.30 pm onwards **Venue :** MIG Club, Bandra (E)
Topics : • Approach to Sinusitis : **Dr. Nirav Chheda-ENT Surgeon**
• Skin manifestations of systemic diseases: **Dr. Ram Malkani - Dermatologist**
• **Cocktails & Dinner**
Registration Charges : Rs. 100/- for members : Rs. 300/- for non-members (subject to availability)
• Limited seats • Register early to avoid disappointment • Registration centres mentioned below :

CME ON PHYSIOTHERAPY IN ACUTE AND CHRONIC PAIN

Date : Sunday, 21st March 2010 **Time :** 6.30 pm onwards **Venue :** Acres Club, Chembur
Physiotherapist, **Ms Yashodha Waugh**, ex HOD, Bhatia Hospital & Physiotherapist, **Deepak Kachalia** shall demonstrate.
Exercises of Neck, Shoulder, Back, Hip and Knee.
A unique opportunity to learn and discuss management of aches and pains.
Registration Charges: Rs. 100/- for members : Rs. 300/- for non members (subject to availability)
Register at any of the registration centres mentioned below.
The programme shall be followed by **Cocktails and Dinner**.

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REGISTRATION CENTRES

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Dr Sanjeev Khosla 9820296321	Dr Ajoy Saha 9820151272	Dr Pravin Gujarathi 9821316916	Dr R P Joshi 9821346977	Dr N Pednekar 9320908010
Dr Prabha Shinde 9821666589	Dr Akhtar Ansari 9821132111	Dr Milind Toraskar 9821469509	Dr Arun Bhure 9322821919	Dr C. A. Taware 9820124902

FORTHCOMING EVENTS

- **Sunday, 18th April 2010 :** GRAND ANNUAL SOCIAL. An evening of Family Entertainment with total Masti!
- **3rd Week of April 2010 :** 1st time in the glorious history of MDMPA an International CME in SRI LANKA
- 7 DAYS / 6 NIGHTS CME TOUR for MDMPA members & their families
- 2 nights at Kandy • 1 night at Nuwara Eliya • 2 nights at Bentota • 1 night at Colombo
- Tour cost for Adults; Rs. 30,000/- only per person, includes airfare, all meals, i.e. daily Breakfast, Lunch, Dinner, sightseeing alongwith cultural programmes. • Limited Seats • Prior confirmed booking is essential • Booking with initial payment of Rs10,000/- (non refundable). balance in two monthly instalments • Early bookings shall be given a special traveller gift • Book before 20th February 2010 with the Registration Centres mentioned above.

MYTHS & TRUTHS ABOUT HAEMORRHOIDES / PILES (vol:2)

Myth: Surgeons offer only Surgery as treatment for Haemorrhoides (piles). There is no other treatment in allopathy for surgeons to offer.

Truth: No, Surgeon = Surgery is a myth and is not true.

Non-operative treatments include Sclero-Therapy, Banding & I.R.C. (Infra-Red-Coagulation)

These are OPD procedures, which do not need anaesthesia or admission. They are painless, with no bleeding & no wound. They are safe in patients with Diabetes, HT, COPD, Coronary Heart Disease, Epilepsy & Pregnancy.

Simplified Explanation

A Colo-Rectal Surgeon or an Experienced Good General Surgeon would detect the Stage of Haemorrhoid the individual patient is suffering. Stage-I & Stage-II Haemorrhoides require non-operative treatment as mentioned whereas Stage-III & Stage-IV piles will require Surgery.

Principle of non-operative treatment: The blood vessel which supplies blood to the Haemorrhoid is blocked by these procedures. The blood supply to the pile mass is thus stopped. Thereby the bleeding from piles stop and they shrink in a few days time.

For further detailed scientific information of non-operative procedures for piles, please feel free to contact.

Dr. Pravin P. Gore-Jain

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Contd. from page no. 4

Beta2 (β2)-microglobulin	Levels may be raised in people with multiple myeloma or other cancers of blood cells.	This test cannot be recommended for cancer screening.
Calcitonin	Produced by certain cells in the thyroid gland (C cells). Blood levels elevated in medullary thyroid cancer.	May be used to monitor response to treatment of medullary thyroid cancer.
Carbohydrate antigen 125 (CA-125)	Levels may be increased in women with a variety of gynecological diseases, including ovarian cancer	This is not recommended for routine cancer screening.
Carbohydrate antigen 19-9 (CA 19-9)	Levels may be increased raised in people with cancers of the digestive tract, particularly pancreatic cancer.	This test cannot be recommended for cancer screening.
Carbohydrate antigen 27.29 (CA27.29)	Levels may be increased in people with breast cancer.	This test cannot be recommended for cancer screening.
Carcinoembryonic antigen (CEA)	Levels may be raised in the blood of people with cancer of the colon. Blood levels may also be elevated in patients with other cancers or noncancerous conditions.	After surgery for colon cancer, testing can be useful in monitoring treatment and detecting recurrence.
Lactate dehydrogenase	Levels can be raised for a variety of reasons.	This test cannot be recommended for cancer screening. However, it is useful in assessing prognosis and monitoring treatment, particularly for people with testicular cancer, melanomas, and lymphomas.

contd. to page no. 8

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Tel: 24464863, 24443563, 24444011, 24444012. SUNDAY OPEN 8.00 AM To 4.00 PM NIGHT OPEN

Contd. from page no. 6

Prostate-specific antigen (PSA)	Levels are raised in men with noncancerous (benign) enlargement of the prostate and often are considerably higher in men with prostate cancer. What constitutes a meaningfully abnormal level is somewhat uncertain, but men with an elevated PSA level should be evaluated further by a doctor.	Testing can be useful in screening for cancer and in monitoring its treatment.
Thyroglobulin	Elevated blood levels may occur in patients with thyroid cancer or benign thyroid conditions.	This test cannot be recommended for routine screening but may be helpful for monitoring response to treatment of thyroid cancer.

*Because tumor markers can also be produced by noncancerous tissue, doctors generally do not use them to screen healthy people. Exceptions may include PSA for prostate cancer and AFP for patients at risk for hepatoma. In families with inherited medullary thyroid cancer, a rare condition, calcitonin blood levels also may be a useful screening test.

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AMERICAN CANCER SOCIETY GUIDELINES ON DIET & CANCER

- **Avoid Obesity:** Obese persons are at increased risk of cancers of the Uterus, gallbladder, kidney, colon, and breast.
- **Eat lots of Fruits & Vegetables:** Decreases risk of lung, prostate, bladder, esophagus, and stomach cancers.
- **Eat High Fiber Foods:** (Whole grains, legumes, veggies & fruits). Lowers risk for colorectal cancer.
- **Cut Back on Fat Intake:** Decreases risk of breast, colon, and prostate cancers.
- **Don't Abuse Alcohol:** Heavy drinkers are at increased risk of breast cancer, colon and prostate cancers.
- **Foods that Protect Cancer** (Vits. A, C, E & Fiber)
- **Cruciferous Vegetables:** broccoli, cauliflower, brussels sprouts. (Vitamins A & C, Fiber)
- **Yellow & Orange Fruits:** apricots, cantaloupe, cherries, peaches, nectarines, mangos, watermelon, papayas. (Vitamin A)
- **Yellow & Orange Veggies:** carrots, yams, sweet potatoes, winter squash, pumpkin. (Vitamin A)
- **Citrus Fruits & Other Fruits & Veggies:** oranges, grapefruits, lemons, tomatoes, strawberries, red peppers, broccoli. (Vitamin C)
- **Nuts & Vegetable Oils:** Vitamin E
- **Whole Grains & Beans:** brown rice, whole grain bread and pasta, lentils, pinto beans. (Fiber)

WHAT TO REMEMBER ABOUT REDUCING YOUR RISK FOR CANCER

- **Don't Smoke**
- **Eat a Diet that is Plant Based:** Lots of Whole Grains, Vegetables, and Fruits for Fiber, Vitamins A, C, and E.
- **Eat a Diet with Few Animal Products:** Cut back on Meat and Whole Milk Products (High in Fat).
- **Exercise Regularly.** □□□

Free Eye Checkup Camp at Ambedkar Hall, Matunga Labour Camp, on Sunday, 14th March 2010, between 9 a.m. to 1 p.m. with Free Cataract Operation at K.B Haji Bacchu Ali Eye Hospital, Parel.
For details contact : **Dr. Praful Parekh, Mob.: 9833534395**



(For private circulation only)

Book Post



To,

2009-2010

MAHIM DHARAVI MEDICAL PRACTITIONERS' ASSOCIATION

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