

Universal access to healthcare remains a challenge for low middle-income countries like India, especially in the rural areas. Cost-effective surgical solutions for common problems, like uterine prolapse, is the need of the hour.

The Okti foundation, which is a nongovernmental organization, has been effectively working in the remote areas of rural India to provide surgical relief to women with prolapse uterus for past 10 years under the "Project Prolapse". The surgical team has conducted 5301 surgeries over 97 rural surgical camps between 2009 to 2019 in areas such as Shillai, Raxaul, Sendhwa, Kachhwa in the remote areas of Himachal. Bihar and Uttar Pradesh. There was no access to surgical treatment locally and the poor socio-economic status of these patients refrained them to get treatment in tertiary care hospitals in neighbouring cities.

Currently, graduate students are given postings in rural areas for the purpose of their skill development, and the system has been the same for many decades now. This has certain disadvantages. The graduates are left to their own devices under little supervision, which refrains them from functioning effectively.

Moreover, the youth look for opportunities in the city and are hesitant to go to far off places. Needless to say, the system has become stagnant.

As we know, India is facing a demographic dividend and an unemployment crisis. Instead of sending amateur graduates who have yet to master surgery, we should consider sending skilled, elderly doctors or volunteers to rural postings. Medical infrastructure in many of these areas is already well developed, what is required is the presence of specialists. Hence skill should be mobilized to villages to achieve the goal of Universal Health for All and we at Okti Foundation strongly recommend this Model.....

Dr Sonal Bathla
MBBS,MD,FICOG,FICMCH,CIMP
Consultant Obstetrician, Gynaecologist,
Vaginal & Laparoscopic Surgeon
Secretary General Okti Foundation, Delhi



Timely access to safe anesthesia and surgery is an important component of any health care system. It is estimated that over 234 million major surgical procedures are performed annually worldwide, with the maximum numbers being performed in China followed by Russia and India. As per World Health Organization (WHO) and World Bank estimates, by the year 2026 the burden of diseases requiring surgery and anesthesia will overshadow that of HIV, tuberculosis and malaria. The WHO and the global health community at large now recognizes that anesthesia and surgical services are an integral component of the right to health.

Surgical care is essential for several diseases and accounts for 11% of global disease burden. Even then, the general impression is that essential surgery and anesthesia poses only a limited global burden of disease. Despite this, safe surgery and anesthetic care have long been neglected, and are not considered as part of program towards improving global health. Approximately one third of the global population has no access to basic surgical care. It is especially true for the remote, rural areas where non-permanent surgical programs or camps have become an effective method of expanding access to surgical services. Surgery camp programs have been reported in rural India, primarily in ophthalmic field and for family welfare procedures. However, provision of general surgical services in these settings is largely unknown. OKTI foundation has been trying to fill this gap by 'reaching the unreached' to provide quality surgical care to the rural masses.

The Problem

More than 3/4th of Indian population resides in rural, often far flung areas. Rural and remote populations across the world are older, sicker, poorer, and more accident prone than their urban counterparts. They face different health issues and different set of problems than people who live in towns and cities. Multiple hurdles in getting good healthcare in remote areas include, not being able to get to a hospital quickly in an emergency, travelling long distances and the transportation cost to get routine checkups and screenings. Patients, especially women have to overcome challenges of leaving home and children and the family dynamics where their medical needs are largely ignored. This leads to delay in seeking care, delay in reaching a care giver and delay in receiving care. Because it can be hard to get timely care, health problems in rural residents may be more serious by the time they are diagnosed. Patients have to surmount access challenges beyond simply cost of care.

Despite large number of primary health centers and rural hospitals, India's health service suffers from an urban bias and neglect of rural masses. According to an estimate, only 31.5% of hospitals and 16% hospital beds are situated in rural areas to serve 75% of total Indian

population. Rural India faces a significant shortage of anesthesiologists and surgeons mostly because doctors are unwilling to serve in rural areas mostly due to lack of adequate infrastructure and facilities. As a result, many people do not receive i13.8mpact. When evaluating the costs of timely access, the economic costs of not providing such access must be considered. For example, a lack of access to anesthesia and surgical obstetrical services, specifically timely cesarean delivery, can have devastating consequences for the mother, her infant, and the community at large. This situation can be improved only if affordable surgery is available near the homes of the patients. In this scenario, where institution based services are unable to meet the healthcare needs of Indian rural population spread across a wide area, a camp based approach has the advantage and flexibility of delivering healthcare to the patients at their doorsteps. A surgical camp is a temporary establishment that provides surgical facilities by a group of medical experts who are routinely not available in that region or center. Delivering quality surgical care and minimizing complications are the prime concern in this model of health service delivery.

Challenges to Providing Safe Anesthesia in Surgical Camps

Developing safe anesthesia services in surgical camps has several limitations which can broadly be divided into:

- Patient selection
- Technical resources
- Professional Skill.

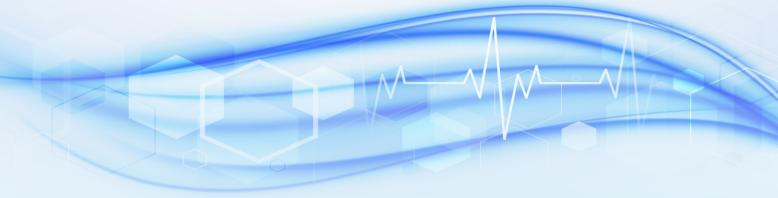
Patient Selection and Anesthesia

Proper patient selection is an important aspect of safe anesthesia. Camps are

usually conducted in collaboration with the local medical practitioners who advertise and recruit prospective patients requiring surgery. The anesthesiologist as the peri operative physician assures the wellbeing of patients right from the pre, intra to postoperative period. He conducts a thorough preoperative assessment of patients to evaluate their suitability to undergo anesthesia and surgery. He also assures patient wellbeing in the postoperative period by continuous monitoring. Providing pain relief is an important aspect of anesthesia care as it facilitates breathing and coughing to reduces respiratory complications. It also promotes early ambulation, recovery and rehabilitation.

Technical Resources

There is acute shortage of proper functional operation theaters in rural setups. Anesthetic machines, or basic airways management such as adult endotracheal tubes and laryngoscopes, are also scarce in most rural setups. This peri-operative equipment is essential for the provision of safe anesthesia. Our camps are conducted in local hospitals and OKTI foundation assures the availability of resuscitative equipment, airway devices, suction machine and basic intraoperative monitoring equipment. Their regular maintenance and servicing is also assured. The monitoring equipment includes blood pressure monitors, ECG monitors and pulse oximeters. Pulse oximeter is an essential anesthetic equipment which is used to monitor patients' oxygenation status and to detect any sign of deterioration during operations. Because of their usefulness, pulse oximeters have been included as essential components of the WHO's



Guidelines for Safe Surgery.

The other factors which significantly affect anesthesia and surgical services are the lack of or unreliable supply of basic utilities like electricity, water, oxygen and blood bank. The availability of oxygen is paramount in preventing hypoxemia. Due to paucity of oxygen cylinders in the rural setup, we use oxygen concentrators to fulfill this demand.

Unsafe anesthesia has the potential to contribute to perioperative mortality but anesthesia today is extremely safe and that mortality due to anesthesia has declined considerably over the last few decades. In its "Safe Surgery Saves Lives" campaign World Health organization (WHO) lists "safe anesthesia" as one of the four areas which can make dramatic improvements in the safety of surgical care In 10 years of surgical camps having operated on 5308 patients, we can proudly say that there has been no mortality till date.

Wherever possible, regional or local anesthesia is preferred over general anesthesia due to its simplicity, costeffectiveness and safety. The distinct advantage of regional anesthesia in prevention of airway-related complications is well documented. Most intra abdominal procedures can be performed under spinal anesthesia with mild sedation provided the surgeon is gentle with tissue handling and knows the time limit of the block. Most anesthetic drugs required for

general anesthesia, except narcotic analgesics, are available but are reserved for children and for procedures not possible under regional anesthesia.

Professional Skill

The single most important factor is the professional knowledge, skill and expertise of the operating team. In the era of super specialization, having a general surgeon who has knowledge and skills for different specialties and who can multitask is a boon. He should also have good clinical judgement as he cannot lean on other people or medical technology for diagnosis. He should know his limitations and when to refer cases to bigger hospitals. Having a trained anesthesiologist forms the core of safe anesthesia. India does not have trained nurse anesthetists and using the services of untrained nurse or technician can prove catastrophical.

Conclusion

The year 2019 has passed and clearly, we have not attained Health for All. Nowhere is this more evident than in the rural and remote areas where 75% of our people live. Timely access to safe anesthesia and surgery is an indispensable component of a functioning health care system. Surgical camps can fulfil the deficiency in our health care delivery system. Safe and effective surgical care reduces human suffering and the burden of disease and also supports emerging economies and infrastructure for growing communities.

Dr Vinod Kalla

MBBS,MD Consultant Anaesthesiologist Sant Parmanand Hospital Delhi

Dr Raminder Sehgal

MBBS,MD Ex Director Professor , Maulana Azad Medical College,Delhi

January-December 2019 I Surgical Ventures









Okti Foundation, Delhi in collaboration with Sant Parmanand Hospital, Rural Committee of Indian Menopause Society, RCOG (NZ), NARCHI Delhi Chapter & Association of Obstetrician and Gynaecologist of Delhi (AOGD) organized 12 Surgical Ventures in Five Indian states in the year 2019. A total of 344 patients in remote locations, got benefited last year. The dedicated team of professionals involved in voluntary services included Dr George Verghese, Dr Shiela Verghese, Dr T C Sharma, Dr Sonal Bathla, Dr Vinod Kalla, Dr Naresh Singla, Dr Preeti Yadav, Dr Shailesh, Dr Uttam Mohapatra, Dr Prabhu, Dr Mandeep, Dr Chingmak, Dr Babitha, Dr Tova, Dr Temsula, Dr Bhanupriya, Dr Shailesh, Dr Akansha, Dr Serin, Dr Mittali, Dr Anju Bala, Dr Sampat, Dr Dinesh, Dr Raju, Dr Shalu Jain, Mr Dilip Singh & Mr Harish. These ventures were financially supported by Oil & Natural Gas Corporation, Shree Cement Ltd and many friends of Okti Foundation.

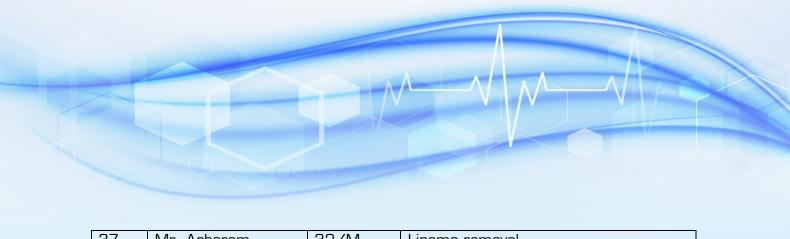
Shri Narayan Dasji Hospital, Sendhwa M.P - April 11-14, 2019

Supported by Navjeevan Community Development Society, New Delhi, a total of 40 patients were operated. The surgical team included Dr George Verghese, Dr Babitha, Mr Shiju and Mr Harish. All the patient did well and no complication was encountered.

List of Patients

S.NO	NAME	AGE/SEX	PROCEDURE
1	Mrs. Fuglibai	40/F	Vaginal Hysterectomy
2	Master Ashwin	5/M	Herniotomy
3	Mrs. Revali	45/F	Vaginal Hysterectomy
4	Mrs. Rajya Bai	50/F	TAH+ Lipoma Removal
5	Mr. Dhursing	48/M	Hernioplasty + Lipoma removal
6	Mrs. Kamli Bai	42/F	Vaginal Hysterectomy
7	Mr. Subash Dudwe	40/M	B/L Hernioplasty
8	Mrs. Surekha Bai	50/F	Vaginal Hysterectomy
9	Mrs. Lakdi Bai	20/F	Excision tumor of palate
10	Mrs.Sawitri Bai	38/F	Vaginal Hysterectomy
11	Mrs. Rekha Bai	40/F	Lumpectomy breast ®
12	Master Prakash	12/M	Hydrocelectomy

40			
13 N	Mr. Ashish	28/M	Herniotomy
14 N	Mrs. Binka	50/F	Vault suspension
15 N	Mrs. Parli Bai	32/F	TVH& PFR
16 N	Master ankush	4/M	Herniotomy
17 N	Mrs. Maya	60/F	TVH& PFR
18 N	Master Vikas	2.6/M	Circumcision
19 N	Mrs. Smruti rai	43/F	TVH & PFR
20 N	Mrs. Sephli Bai	50/F	TVH & PFR
21 N	Mrs. Santra Bai	35/F	TAH
22 N	Mrs. Yasodha	55/F	TAH
23 N	Mrs. Ganga Bai	40/F	TAH
24 N	Mr. Habib Khan	50/M	Hernioplasty
25 N	Mrs. Sunita Naik	42/F	TAH
26 N	Mr. Tika Kanoj	55/M	Hernioplasty
27 N	Mr. Dharmesh patel	32/M	Haemorrhoidectomy
28 N	Mrs. Fulbai	25/F	Haemorrhoidectomy
29 N	Mrs. Kashi Bai	40/F	TVH & PFR
30 N	Ms. Mahin	8/F	Appendectomy
31 N	Mrs. Seema	25/F	Appendectomy
32 N	Mr. Kanuda	50/M	Lipoma Removal
33 N	Mr. Puniya Chouhan	50/M	Multiple Lipoma Removal
34 N	Mr.Rameshwar	70/M	Wound debridement of leg- Diabetic
35 N	Mr.Ganesh Dawar	30/M	Lipoma Removal
36 N	Mrs. Nuri	30/F	Dermoid Cystectomy



37	Mr. Asharam	32/M	Lipoma removal
38	Master Amit jadhav	10/M	Lipoma removal
39	Mr. Shivram Dudwe	32/M	Tonsillectomy
40	Mrs. Jyoti	26/F	Manual removal of Retained Placenta















ECS Hospital, Longpang, Tuensang, Nagaland March 2019

A Surgical Venture was organized at ECS Hospital Longpang, Nagaland by ECS Society in collaboration with Okti Foundation in March 2019 . Total of 68 patients were operated free of cost. The surgical team included Dr George Verghese, Dr Sheilah Verghese and Dr Tova. The following type of surgeries were conducted.

S.N	Obs and Gynae	Plastics and paediatric	Orthopa edics	Genitourinary	General	Minor
1	Ovarian cystectomy and hysterectomy	Cystic hygroma neck	Knee Synovial excision	Ureterolithotomy	Laparotomy for Perforated bowel	Lipoma shoulder
2	Ectopic pregnancy	Z- plasty with grafting for contracture	Soft tissue tumour excision -leg	Pyelolithotomy right	Cholecystecto my	Excision node neck
3	Vaginal hysterectomy	Colostomy for imperforated anus	Disarticu lation left and right hips	Circumcision	Eversion of Hydrocoele sac	Excision breast mass
4	Tubectomy	hernia repair		Urethral stricture with end to end repair	Laparotomy for Gastric Perforation	Excision mass- upper neck
5	LSCS with Tubectomy	bilateral cleft lip repair		Cystolithotomy	laprotomy	Excision lipoma
6	Abdominal hysterectomy	cleft lip /palate repair			Herniorraphy	Supracond ylar # reduction
7	Ovarian cystectomy	cleft lip repair			Laparotomy for Perforated appendix with peritonitis intestinal obstruction	Excision of skin tags
8	LSCS				Cholecystecto my and tubectomy	Excision sebaceous cyst

9	Abdominal Hysterectomy		Gangrene toe Excision	.Varicose veins
10			Thyroid lobectomy	Extrafinger excision
11			Appendectom y and tubectomy	Inclusion cyst removal-lip
12			Parotid adenoma excision	Tooth extraction
13			Bilateral direct hernia repair	Skin grafting









Referral Hospital, Dimapur, Nagaland March 2019

A Surgical Venture cum Teaching Program was organized at Referral Hospital, Dimapur, Nagaland. Capacity building of young surgeons was done. The surgical team included Dr George Verghese, Dr Sheilagh Verghese and Dr Temsula.

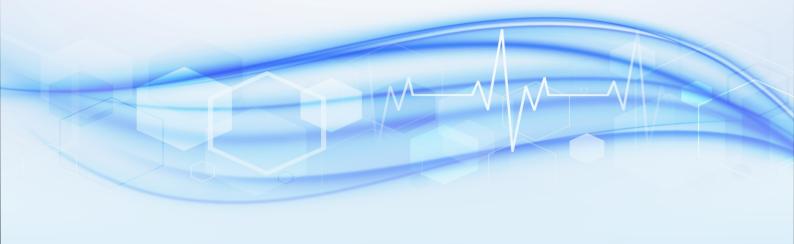
Christian Hospital Makunda, Assam March 2019

A Surgical Venture cum Teaching Program was organized at Christian Hospital Makunda, Assam in collaboration with Okti Foundation in March 2019 . The surgical team included Dr George Verghese, Dr Sheilah Verghese and Dr Temsula.

Civil Hospital, Joginder Nagar, Himachal Pradesh June 14-16, 2019

With financial assistance from Shree Cement Ltd., a Surgical Venture was organized at Civil Hospital JoginderNagar, Mandi, Himachal Pradesh. The surgical team included Dr George Verghese, Dr Bhanupriya and Mr Harish. Twenty three surgeries were conducted in this camp which was supported by the Rotary Club.

S.No	Name	Sex	Age	Diagnosis	Procedure	Anasthesia
1	Avni	F	3yrs	Left inguinal hernia	Herniotomy	GA
2	Rami Devi	F	50yrs	3rd degree prolapse	Vaginal Hysterectomy	SA
3	Sarla Devi	F	46yrs	Fibroid uterus	Vaginal Hysterectomy	SA
4	Phagni Devi	F	50yrs	Gall stones	Cholecystectomy	SA
5	Geeta Devi	F	60yrs	Prolapse uterus	Vaginal Hysterectomy	SA
6	Manish Kumar	М	39yrs	Left inguinal hernia	Herniorrhaphy	SA
7	Bhagwati Devi	F	70yrs	Prolapse uterus	Vaginal Hysterectomy	SA
8	Chandani	F	67yrs	Prolapse Uterus	Vaginal Hysterectomy	SA
9	Chamari Devi	F	45yrs	Gall stones	Cholecystectomy	SA
10	Pinki	F	48yrs	Gall stones	Cholecystectomy	SA
11	Khima Devi	F	81yrs	Gall stones	Cholecystectomy	SA
12	Kanta Devi	F	63yrs	Gall stones	Cholecystectomy	SA
13	Khuri Devi	F	48yrs	Gall stones	Cholecystectomy	SA
14	Neema Devi	F	47yrs	Fibroid uterus	Vaginal Hysterectomy	SA
15	Rekha Devi	F	44yrs	Prolapse Uterus	Vaginal Hysterectomy	SA
16	Parvati Devi	F	46yrs	Cervical Polyp	Polypectomy	GA
17	Sumna Devi	F	35yrs	Small fibroid	Vaginal Hysterectomy	SA
18	Seema Devi	F	43yrs	Gall stones	Cholecystectomy	SA



19	Khem Chand	М	58yrs	Left inguinal hernia	Herniotomy with mesh	LA
20	Mago Devi	F	53yrs	Gall stones	Cholecystectomy	SA
21	Gopal	М	63yrs	Right inguinal Hernia	Herniotomy with mesh	SA
22	Kamla Devi	F	70yrs	Gall stones	Cholecystectomy	SA
23	Baldev	М	41yrs	Perineal Abscess	I&D	SA



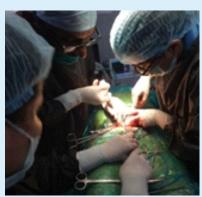






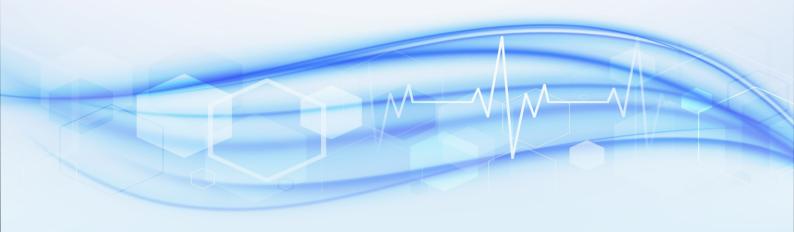














Rotary Club of Joginder Nagar, Distt. Mandi (H.P.)

Dr. Bhag Chand Th

Dated 9.7. 244

Respected Sir,

The Joginder Nagar free surgical camp was sponsored by Okti Foundation and Shree Cement with the support of Rotary Club of Joginder Nagar. The surgical team could perform 25 surgeries of the needy patients.

Rotary Club did the local arrangements and helped to have a smooth camp. Local community is grateful to Okti Foundation, Shree Cement and Rotary Club of Joginder Nagar for all the help and financial contributions.

Sahayak Surgical Centre, Manali, Himachal Pradesh-August 23 -25, 2019

A total of 27 patients were operated free of cost with financial support from Oil and Natural Gas Corporation (ONGC). The Surgical team included Dr George Verghese, Dr Shiela Verghese, Dr T C Sharma, Dr Sonal Bathla, Dr Tova and Mr Harish.

S.No	Name	Age	Sex	Diagnosis	Surgery	Anasthesia
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1	Meena	35yrs	Female	Ovarian cyst	Ovarian Cystectomy	SA
2	Jamuna	31yrs	Female	Gall Stones	Cholecystectomy	SA
3	Sharda	34yrs	Female	Gall Stones	Cholecystectomy	SA
4	Amra Devi	59yrs	Female	Gall Stones	Cholecystectomy	SA
5	Moni Devi	30yrs	Female	Gall Stones	Cholecystectomy	SA
6	Krishna	45yrs	Female	Gall Stones	Cholecystectomy	SA
7	Indira	51yrs	Female	Prolapse Uterus	Vaginal Hysterectomy & repair	SA
8	Ruplal	44yrs	Male	Gall Stones	Cholecystectomy	SA
9	Chering Lama	53yrs	Male	Gall Stones	Cholecystectomy	SA
10	Ahmad	60yrs	Male	Stricture Urethra	OIU	SA
11	Veena	38yrs	Female	Prolapse Uterus	Vaginal Hysterectomy & repair	SA
12	Shama Devi	42yrs	Female	Gall Stones	Cholecystectomy	SA
13	Tara Devi	53yrs	Female	Gall Stones	Cholecystectomy	SA
14	Sapna	30yrs	Female	Ureteric stone	Uretero Lithotomy and stenting	SA
15	Bhumi Devi	60yrs	Female	Gall Stones	Cholecystectomy	SA
16	Bhume Ram	65yrs	Male	BPH	TURP	SA
.17	Bhimi Devi	40yrs	Female	Gall Stones	Cholecystectomy	SA
18	Kusuma Devi	30yrs	Female	Fibroid uterus	Vaginal Hysterectomy	SA
19	Bimla Devi	50yrs	Female	Gall Stones	Cholecystectomy	SA
20	Uma	38yrs	Female	Gall Stones	Cholecystectomy	SA
21	Bhuvneshwari	49yrs	Female	Gall Stones	Cholecystectomy	SA
22	Chering Lama	26yrs	Female	Appendicitis	Appendectomy	SA
23	Dev Kala	42yrs	Female	Endometrial Polyp	Abdominal hysterectomy	SA

24	Saunki Ram	76yrs	Male	BPH	TURP	SA
25	Tenzin	37yrs	Female	Gall Stones	Cholecystectomy	SA
26	Kaushalya	39yrs	Female	Fibroid uterus	Abdominal hysterectomy	SA
27	Ajay	29yrs	Male	Gall Stones	Cholecystectomy	SA









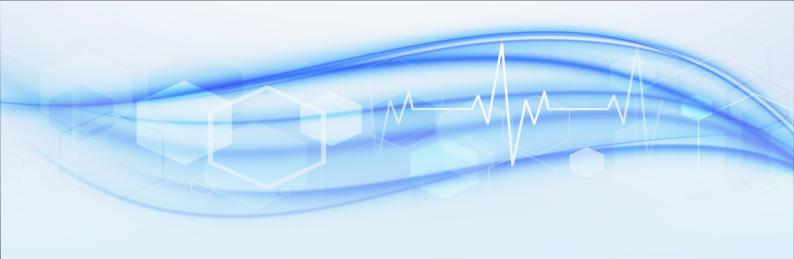




Duncun Hospital, Raxaul, Bihar October 5 - 8, 2019

A total of 25 patients were operated using funds given by Oil & Gas Corporation of India. The surgical team included Dr Sonal Bathla, Dr T C Sharma, Dr Uttam Mahopatra, Dr Shailesh, Dr Akanksha, Dr Serin, Dr Mittali.

S.No	Patient Name	Age	Sex	Diagnosis	Procedure
1.	"Shila Singh	49	Female	Prolapse Uterus	VH with PFR
2.	"Mina Devi	50	Female	Prolapse Uterus	VH with PFR
3.	"Vidhyawati Devi	35	Female	Prolapse Uterus	VH with PFR
4.	"Koraisa Khatoon	52	Female	Prolapse Uterus	VH with PFR
5.	"Bijalipati Devi	55	Female	AUB	NDVH
6.	"Poonam Devi	32	Female	Prolapse Uterus	VH with PFR
7.	"Hahka Bahadur	73	Male	Renal Calculus	PCNL
8.	"Ramdev Ram	60	Male	BPH	TURP
9.	"Shashi Bhushan	21	Male	Renal Calculus	URS
10	Alugu 'Sah	62	Male	BPH	TURP
11	Nagendra Singh	35	Male	Vesical Calculus	Cystolitholapexy
12	Abhinav Paswan	28	Male	Vesical calculus	Cystolitholapexy
13	Phulsu'nar Devy	55	Female	Renal calculus	PCNL
14	Kritika, Chandravasi	2	Female	Gross hydronephrosis	Nephrectomy
15	Rajesh' Prasad	40	Male	Renal calculus	PCNL
16	Rajan Kumar	18	Male	Renal calculus	PCNL
17	Aman 'Kumar	32	Male	Stricture Urethra	OIU
18	Samsuddin Ansari	55	Male	Renal calculus	PCNL
19	MD Gäyasudin	62	Male	Stricture Urethra	OIU
20	Pappu"Thakur	22	Male	Renal calculus	PCNL
21	Prabhu Kushwaha	38	Male	Right VUJ Calculus	Cystoscopy B/L RGP
22	Rinki Kumari	19	Female	Renal Calculus Hydronephrosis	Percutaneous Nephrostomy
23	Ajit Kulmar Giri	22	Male	Stricture Urethra	OIU
24	Hiralal"Bhagal	31	Female	Stricture Urethra	OIU Meatoplasty
25	Jay Shiiv Shankar Kumar	33	Male	Stricture Urethra	BNI



























Dr Prabhudas' Hospital, Totu, Shimla November 6-8, 2019

With financial support by the Oil & Natural Gas Corporation, 25 patients were operated at Totu , Shimla in Himachal Pradesh. The surgical team included Dr Prabhu Das and Dr Mandeep. All the patients were discharged in satisfactory condition.

S No.	Name	Age/Gender	Diagnosis	Procedure
1	Vivek Sharma	M/35	Lt Inguinal Hernia	Open mesh repair
2	Manjeet	M/36	Lt Renal Calculus	Nephrolithotomy
3	Perm Chand	M/50	Scrotal Mass (STS)	Wide excision
4	Bharat Bhushan	M/44	Scrotal Mass (STS)	Wide excision
5	Dalip Kumar	M/31	Lt Ureteric Calculus	Ureterolithotomy
6	Tarawati	F/58	Rt Ureteric Calculus	Ureterolithotomy
7	Swati Sharma	F/34	Cholelithiasis	Lap Cholecystectomy
8	Devi Sara	F/45	Appendicitis	Lap Appendicectomy
9	Ashu	F/26	Haemorrhoids	Haemorrhoidectomy
10	Mansara	F/56	Epigastric Hernia	Open mesh repair
11	Naveen	M/27	Haemorrhoids	Haemorrhoidectomy
12	Khadak Bahadur	M/28	Painful Floating rib	Rib resection
13	Het Ram	M/55	B/L Inguinal Hernia	Open mesh repair
14	Zareena	F/66	Cholelithiasis	Lap Cholecystectomy
15	Savitri	F/56	Fibroid Uterus	Hysterectomy
16	Prem Singh	M/52	Rt Inguinal Hernia	Open mesh repair
17	Bhagat Ram	M/50	Acute Cholecystitis with Cholelithiasis	Lap Cholecystectomy
18	Sulochana	F/40	Cholelithiasis	Lap Cholecystectomy
19	Veer Bahadur	M/45	B/L hydrocoele	Hydrocelectomy
20	Sulekh Kumar	M/40	Rt Inguinal Hernia	Open mesh repair

21	Dropti	F/52	Cholelithiasis	Cholecystectomy
22	Ashima	F/26	TO Mass	Rt salpingectomy
23	Sita	F/21	B/L Ovarian Endometriosis	Partial Cystectomy
24	Dechan	F/30	CIN 111	TAH with Conservation of ovaries
25	Prem Lata	F/50	Lt Renal Calculus	Pyelolithotomy

Civil Hospital Jogindernagar Himachal Pradesh November 1- 4, 2019

Total 30 patients were operated with support given by the the Oil &Natural Gas Corporation (ONGC). The Surgical team included Dr George Verghese, Dr Anju Bala, Mr Harish, Mr Dilip Singh , Sister Raksha and Somlata. All the patients were discharged in satisfactory condition.

S.No	Name	Age	sex	Diagnosis	Surgery
1	Anju Kumari	23	F	Cholelithiasis	Cholecystectomy
2	Vyash devi	30	F	Cholelithiasis	Cholecystectomy
3	Yog raj	53	F	Cholelithiasis	Cholecystectomy
4	Rani	44	F	Cholelithiasis	Cholecystectomy
5	Meena devi	33	F	Cholelithiasis	Cholecystectomy
9	Shakuntla Devi	60	F	Cholelithiasis	Cholecystectomy
7	Kanchana devi	36	F	Cholelithiasis	Cholecystectomy
8	Kaushalya devi	32	F	Post tubal ligation for tuboplasty	Tuboplasty
9	Rajni	24	F	Cholelithiasis	Cholecystectomy
10	Satya devi	33	F	Cholelithiasis	Cholecystectomy
11	Puranchand	33	M	Anal fistula	Fistulectomy
12	Vicky	21	М	Right indirect inguinal hernia	Herniorraphy
13	Rita devi	32	F	Cholelithiasis	Cholecystectomy
14	Sweta	27	F	Cholelithiasis	Cholecystectomy
15	Ishwar das	43	F	Cholelithiasis	Cholecystectomy
16	Kala devi	47	F	Cholelithiasis	Cholecystectomy
17	Gurdei	52	F	Cholelithiasis	Cholecystectomy
18	Guddi devi	52	F	Cholelithiasis	Cholecystectomy
19	Bhawna devi	37	F	Cholelithiasis	Cholecystectomy
20	Abhishek	8	М	Hydrocoele	Eversion of hydrocoele sac

21	Shanti devi	34	F	3rd degree UV prolapse with cystocoele	Vaginal hysterectomy with anterior colporraphy
22	Jaya devi	58	F	Cholelithiasis	Cholecystectomy
23	Tripta Devi	32	F	AUB(L)	Total Abdominal Hysterectomy with bilateral salpingectomy
24	Pooja	19	F	Cholelithiasis	Cholecystectomy
25	Sushma	58	F	Cholelithiasis	Cholecystectomy
26	Gargi Devi	61	F	3 degree UV prolapse with cystocoele with recocoele	Vaginal hystectomy with anterior and posterior perineorraphy
27	Dhruv Verma	10	F	Acute appendicitis	Appendectomy
28	Asha devi	24	F	Cholelithiasis	Cholecystectomy
29	Hada Ram	77	М	BPH	Suprapubic prostectomy
30	Asha devi	24	F	Cholelithiasis	Exploration of CBD



















Shri Narayan Dasji Hospital, Sendhwa M.P November 23-27, 2019

Supported by Shri Digamber Jain Divya Deshna Trust and Navjeevan Community Development Society New Delhi, a total of 63 patients were operated. The surgical team included Dr George Verghese, Dr Sampat , Dr Sonal Bathla, Dr Babitha and Mr Harish. All the patient did well and no complication was encountered.

S.No	Patient Name	Procedure		
1	Balki	TVH+AC+Perineorrhaphy		
2	Salu bai	TVH+AC+PC		
3	Rajkumar	Circumcision		
4	Karia Bai	NDVH		
5	Nandki Bai	TVH		
9	Badal	Herniotomy		
7	Suman Rai	NDVH		
8	Nuri bai	NDVH		
9	Sheetal	Gland Removal		
10	Raju barela	Removal of lipoma		
11	Hinda bai	TVH		
12	Seeta bai	NDVH		
13	Aladi bai	TVH+ AC		
14	Savitri	Tubal Ligation		
15	Rekha	Tubal Ligation		
16	Mankiya	Hernioplasty		
17	Putiya	Removal sebaceous cyst		
18	Devisingh	Haemorrhoidectomy		
19	Chouwdas	Removal sebaceous cyst		
20	Manya bai	TVH+AC+Perineorrhaphy		
21	Murli bai	Gland Removal		
22	Aditi	Circumcission		
23	Subrata	NDVH		
24	Dropati	Open cholecystectomy		
25	Jeela bai	TVH+AC+Perineorrhaphy		
26	Prem	Herniotomy		
27	Yammura bai	Open Cholecystectomy		
28	Revali bai	TVH+AC+PC		
29	Aryan	Circumcision		
30	Rasabai	NDVH		
31	Keni bai	TVH+AC+ PC		
32	Meera bai	NDVH		
33	Nursiya	TAH		
34	Mehanti bai	TVH+AC+Perineorrhaphy		
35	Lalita	NDVH		
36	Surmiya bai	TVH		
37	Rambal	NDVH		
38	Shubham	Contracture release & Skin craft		
39	Lalliram	Herniotomy		
40	Foppy	Anal tag removal		

41	Remulibai	Lump removal
42	Fizal	Excision of Lipoma
43	Chouwdas	Haemrhoidectomy
44	Surekha	Sebaceous cyst Excision
45	Urmila	Excision+Skin Graft
46	Leela bai Tukuram	NDVH
47	Leela bai jagdish	NDVH
48	Batirai	TVH+AC+Perineophaphy
49	Bistan Rupsingh	Hydreocele repair
50	Subha	Anal Tag Removal
51	Subi bai	Anal tag Removal
52	Amna bai	Lump Removal
53	Sakuntala kotla	Sebaceous cyst Removal
54	Siyani bai	Lump Removal
55	Raisa bai	Anal tag Removal
56	Sawadi	TVH
57	Parikshith sharma	Herniorrhaphy
58	Sardar	Haemorrhoidectomy
59	Zami	Lump Removal
60	Tukuram	Lump Removal
61	Bhagawati	Anal tag Removal
62	Bharti	Sebaceous cyst Removal
63	Sahib Rao	Anal tag Removal











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Kachhwa Christian Hospital, Kachhwa, Varanasi December 16-22, 2019

A total of 25 patients were operated using funds given by Oil & Gas Corporation of India at the 125 year old hospital in Kachhwa. The surgical team included Dr Sonal Bathla, Dr T C Sharma, Dr Dinesh, Dr Raju, Mr Harish, Sister Somlata and Dolma.

O NI	N.			Α.Ι.	D: ·	ъ.
S.No	Name	Age	Sex	Add	Diagnosis	Proceture
1	Reeta	38	Female	Mirzapur	Prolapse	Vaginal hysterectomy with anterior & posterior colporraphy
2	Pushpa	38	Female	Mirzapur	Prolapse	Vaginal hysterectomy with anterior & posterior colporraphy
3	Sumita	35	Female	Mirzapur	Prolapse	Vaginal hysterectomy
4	Lakhami	52	Female	Mirzapur	Vault Prolapse	Vault suspention
5	Sona	55	Female	Mirzapur	Procidentia	Vaginal hysterectomy with anterior & posterior colporraphy
6	Sushila	45	Female	Mirzapur	Cystocoele & Rectocoele	Anterior & posterior repair
7	Ratna	43	Female	Mirzapur	Prolapse	Vaginal hysterectomy with anterior & posterior colporraphy
8	Radha	48	Female	Mirzapur	Prolapse	Vaginal hysterectomy with anterior & posterior colporraphy
9	Kera Devi	56	Female	Mirzapur	Prolapse	Vaginal hysterectomy with anterior & posterior colporraphy
10	Gulabi	45	Female	Mirzapur	Prolapse	Vaginal hysterectomy with anterior & posterior colporraphy
11	Kunti	45	Female	Mirzapur	Prolapse	Vaginal hysterectomy with anterior & posterior colporraphy
12	Gita	58	Female	Mirzapur	Prolapse	Vaginal hysterectomy with anterior & posterior colporraphy

					Right	
13	Nilesh	23	Male	Bhadohi	hydrocele	Right hydrocelectomy
14	Munara	50	Female	Bhadohi	Prolapse	Vaginal hysterectomy
15	Raj Kumar	32	Female	Bhadohi	Polyp	Polypectomy
16	Heera Mani	50	Female	Varanasi	Prolapse	Vaginal hysterectomy
17	Chandra wati	55	Female	Mirzapur	Prolapse	Vaginal hysterectomy with anterior & posterior colporraphy
18	Geeta	32	Female	Varanasi	Prolapse	Vaginal hysterectomy with anterior & posterior colporraphy with culdoplasy
19	Manju Devi	38	Female	Mirzapur	Prolapse	Vaginal hysterectomy with anterior & posterior colporraphy
20	Sushila	48	Female	Bhadohi	Prolapse	Vaginal hysterectomy with anterior & posterior colporraphy
21	Shiv Devi	70	Female	Bhadohi	Prolapse	Vaginal hysterectomy with anterior & posterior colporraphy
22	Lalmati	36	Female	Mirzapur	Fibroid uterus	Non Descent vaginal hysterectomy
23	Jai Devi	50	Female	Allahbad	Prolapse	Vaginal hysterectomy with anterior & posterior colporraphy
24	Khedana Devi	48	Female	Kachhwa	Prolapse	Vaginal hysterectomy with anterior & posterior colporraphy
25	Hirawati Devi	45	Female	Kachhwa	Prolapse	Vaginal hysterectomy with anterior & posterior colporraphy















Sant Parmanand Hospital, Delhi

Low risk patients were selected for surgeries at remote locations while the high risk patients were brought to Sant Parmanand Hospital, Delhi for effective surgical management in collaboration with the ONGC. During 2018, 12 such patients were operated at Sant Parmanand Hospital by Dr Sonal Bathla, Dr T.C Sharma, Dr Shalu Jain, Dr Anju Bala, Dr Akanksha, Dr. Kalla, Dr B.N. Seth & team. The administration of the hospital including Sh B.G.Bangur, Dr Shekhar Agarwal and Dr Nirmala Agarwal were ever encouraging.

List of Patients

					_
S.NO	Name	Age	Sex	Diagnosis	Surgery
1	Sulekha	39	Female	Secondary infertility	Laparoscopy proceed laparotomy with adhesiolysis with hysteroscopy
2	Rakhi	32	Female	AUB with fibroid uterus	NDVH with conservation of ovaries
3	Radha	36	Female	Primary infertility on ATT with moderate anemia.	Diagnostic laparoscopy + Operative hysteroscopy with vulval tumor resection
4	Dechen Wangm o	30	Female	Pregnancy with CIN III on cervical biopsy with atypical glandular cells in LBC.	Termination of Pregnancy
5	Samina	21	Female	Secondary infertility with left adnexal cyst with right tubal block.	Laparoscopy with Hysteroscopy
6	Afroja Khatoon	25	Female	Primary infertility on ATT with hypothyroidism	Hysteroscopy with Laparoscopy with Left ovarian drilling
7	Asha	52	Female	P3 L3 post hysterectomy (TAH) with vesico vaginal fistula	Cystoscopy + Left DJ stenting with VVF repair
8	Nafeddin	36	Male	Right ureteric stone with Moderate HDUN with Acute renal failure	Right URS + D.J.Stenting
9	Heena	26	Female	Primary infertility.	Diagnostic Laparoscopy Hysteroscopy
10	Sukh Devi	40	Female	P4 L4 with hypothyroidism with IUCD in situ.	Hysterscopic guided CuT removal
11	Babli Sharma	54	Female	Gall Stone disease	Lap. Cholecystectomy
12	Julita Tirki	34	Female	G3 Ab2 with 38wks pregnancy with breech presentation	LSCS

B. OKTI's Other Ventures toward Rural Wellbeing

1. Awareness & Screening Camps

Project: Cervical Cancer Awareness, Screening & Vaccination-Phase 1-August 23, 2019

The Project "Cervical Cancer Awareness, Screening & Vaccination" was a joint effort of Okti Foundation and ONGC, Delhi. The first phase of "Cervical Cancer Awareness" was organised on August 23, 2019 at District Kullu, Himachal Pradesh.

The purpose of this project was to reach out to women and adolescent girls from the low income strata in remote locations and educate them about the prevalence of cervical cancer in India, its risk factors, and symptoms and spread awareness on the importance of screening and vaccination against it.

Awareness Talks were organized at various locations both for young girls and married women aiming at prevention and screening for cervical canc

- Haripur School Kullu, where health talks were given by Dr Shiela Verghese and Dr Sonal Bathla and about 100 young girls were encouraged for registration for vaccination.
- Day Star School, Manali where counselling of 100 young girls regarding sanitation, menstrual hygiene contraception and protection against cervical cancer was conducted.

- 3. Day Star School, Manali where perimenopausal women were counselled about perimenopausal health issues and screening against breast and genital cancers. The event was followed by refreshment. Registration for screening for screening against cervical cancer was initiated.
- 4. Village Saharan where 180 women were counseled by Dr George Verghese on August 6, 2019 regarding personal hygiene, menopausal issues, prevention of cervical cancer and harmony in family.

An overwhelming response was seen. Many women had emotional outburst after the event and they requested for another round of talks. The concept of vaccination was also welcomed by them. Some women had health gueries which were promptly attended. A total of 150 women were addressed .They were encouraged to take part in phase two, where screening and vaccination was to be executed. Enrolment for check-up was free and voluntary. With the help of volunteers, large number of women and girls were enrolled. The Information Booklets were distributed.



































Cervical Cancer Screening and Vaccination Drive Manali – Phase II September 29-30, 2019

With the commitment of dedicated team, Phase 2 of Cervical Cancer Screening and Vaccination Drive was accomplished on 29th and 30th September 2019 at The Sahayak Surgical Centre in Manali, Himachal Pradesh. A team of 4 doctors, 4 staff nurses, 2 laboratory technicians, 4 paramedics conducted the event, where a total of 226 women came for check-up and 160 girls came with guardians for vaccination

.

An overwhelming response was observed as women and school principals brought their daughters/young female relatives/students between 9 to 13 years for HPV vaccination. 160 girls were immunized with first dose of HPV vaccine after parental/guardians written and informed consent. It was informed that second dose will be given after 6 months.

Women of age group 21 to 70 years attended the camp. On the spot weight, Blood Pressure, random blood sugar was recorded to screen for obesity, hypertension and diabetes. Breast and abdominal examination was done for all. Per speculum examination was done forall women who were willing. Liquid based cytology was performed in 130 women. Thirty three women had unhealthy cervix who were subjected to HPV DNA testing on the same sample. Bimanual pelvic examination was done

and where ever suggestive of pelvic pathology, USG pelvis was advised. Women in whom unhealthy cervix was identified on speculum examination, visualisation after application of Acetic acid and Lugol's iodine was done. There were 17 such patients who were subjected to VIA/VILLI, 5 of them required biopsy followed by electrocautery under "SEE and TREAT" Program. Four punch biopsies and one polypectomy specimen were sent for histopathological examination.

There were 6 hysterectomised and 7 unmarried women. Uncontrolled hypertension (140/90 mm of Hg) was recorded in 27 women, 4 had high blood sugar (200mg/dL) and 10 were found to be anaemic. Syndromic treatment for Pelvic Inflammatory Disease and Vaginitis was given to 70 and 25 women respectively. Basic drugs like Iron, Calcium, Antibiotics, Vaginal pessaries were dispensed wherever indicated. On clinical examination 4 patients had pelvic pathology, for which they were referred for ultrasonography.

LBC showed atypical glandular cells in one patient, vaginitis in 10 and rest all were normal. Out of the 33 HPV samples, 6 came positive. One cervical intraepithelial neoplasia grade 3 was detected among 5 biopsy samples and the patient is being worked up for hysterectomy.

All the tests were done free of cost with financial support from ONGC. LBC, HPV testing and histological testing were done by Onquest Laboratory. We are thankful to Dr Sheila Verghese for conducting ultrasonography for the patients in need.

The venture was successful in terms of active participation of the healthcare volunteers and the women from and around Manali. The Venture was helpful in spreading awareness, serve and heal the women in the unreached area.

We are grateful to the volunteers, participants, ONGC, Okti Foundation, Sahayak Hospital and the supporting organizations for making this venture a success.

The team of doctors Dr George Verghese, Dr Sheila, Dr Sonal Bathla, Dr Preeti Yadav, Dr Dolkar and the paramedical staff including Ms Dolma, Ms Kulpreet, Ms Sweety, Ms Nirmala, Ms Raksha, Ms Somlata, Ms Kamla, Ms Cherring, Mr Dharam, Mr Dilawar put in their sincere efforts towards the cause.





















1.Solar lights in Chuhar Valley, Mandi, Himachal Pradesh

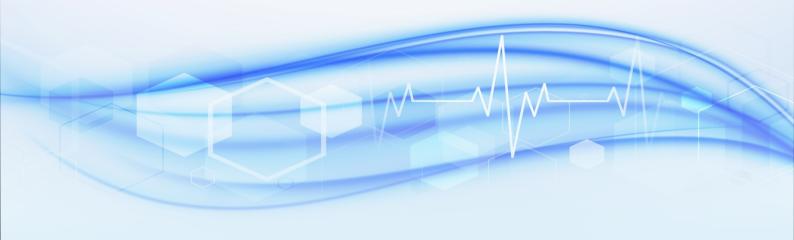
Solar powered street lights were installed in twelve villages of Chuhar Valley, Joginder Nagar Distt Mandi in Himachal Pradesh in March 2019 by Okti Foundation. One hundred twenty lights were financially sponsored by The ONGC to lighten up the dark villages. Small children were found to be sitting, studying under those lights. The lights brought awareness to the villagers regarding the usage of renewable source and energy.











Workshop on Personel Hygiene and Sanitation: Springdales School Pusa Road April 2019

Talk on 'Personal Hygiene and Sanitation' at Sprindales School Pusa Road in April 2019 to students from Govt Schools















चौहारघाटी में लगाई 120 सोलर लाइटें



विभावन दानड । एका

अोबिक फार्डरान प्रार पीतारकारी की तरमावान पंचायत के कई कांचे में अंग्रेर से नियाने के तिए 120 मोतार त्यादे त्याई कई है। को स्त्यांओं अकात गृह नेतृत्यत केस स्त्रेतीत्रक तिर्मार्थत मोत्रकार पोतांकर के तहत प्राचीतित किया कहा गृह की क्यांचेंत्र तीन बहुत गृह हैं। अंग्रिक कांचेंत्रक हम तरमावान पंचायत के चांच तरमावान, मार्थकरमण, तरहवान, स्थांतर, पड़पार्थ, परमार, पामेरह, धार, सूलंग, रामसामधार, प्रशासन और सही सामगाम में 120 मोला स्वाई सामगा में है। प्राचीन सूचाय पर ने कताया की इससे प्राचीनों को सूकित सिसी है। पाउडिशन के कोडिशर डॉकरा जार्ज, डॉकरा सोवास साजन और डॉकरा टीमी शर्म के सिंधन महाचेन से ही पार संच्या हो पाया है। वही स्वाचीय रखेन सूचाय पर, रोजन स्वाट, जात जिट, पान, पान, भीत, परिचान और सामी पान, नीत, परिचान और सामी पान, नीत, परिचान का अन्यार जनाया है।

Antenatal Physiotherapy, Yoga and Awareness Sessions

Awareness Sessions for Antenatal Women were organized monthly at Dr Sonal's Urogynae Clinic throughout the year where the antenatal women were counseled about ante, intra and postpartum care, supplementation of haematinics and Garbh Sanskar by Dr Sonal Bathla, Dr Shalu Jain and Dr Anju Bala. Training in yoga and antenatal exercises was given by Dr Divya and Ms Sakshi.

























Awards

Felicitation of Dr Sonal Bathla by Delhi Chapter IMS, FOGSI Midlife and Education Committee in Delhi towards services to women in remote locations and work for Menopausal Health in 2019.







"Compassion Extra Ordinaire" by Sh J P Nadda, honourable Health Minister of India and FOGSI President Dr Jaideep Malhotra for the surgical services and capacity building at remote villages pan India by the dedicated Team of Doctors in 2018.







The Okti Foundation Surgical Team represented by Dr George Verghese (Surgeon), Dr Vinod Kalla (Anaesthetist), Dr T.C Sharma (Urologist), Dr Sonal Bathla (Gynaecologist) was Nominated for the "Best Surgical Team "Award in South East Asia BMJ Awards in 2018 amongst nine countries and 1595 entries for contribution towards the Surgical Services and Capacity Building in Rural India







"Woman of the Year Award - 2019"
by "Delhi Gynaecologist Forum" and 'Wow India' to
Dr Sonal Bathla in 2019 in Delhi for





Acknowledgement

The Okti Foundation acknowledges the contributions of all the doctors, paramedical staff and community workers for their voluntary services for the cause of humanity. The Financial contributions made by various organizations and individuals, exhempted under 12A and 80G, are highly appreciated. The Awards conferred upon the organization by various Organizations and Institutions not only boosted the morale of each and every member of the organization but also enhanced the credibility to the authentic work. It has encouraged many more people to associate themselves to this humanitarian work. The financial contributions from the following donors are highly appreciated.

- ·Oil and Natural Gas Corporation
- ·Mr BK Kapila
- ·Ms Seema Bathla
- ·Shree Cement Ltd
- ·Sh HL Bathla
- ·Smt Sumitra Bathla
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Web Coordinator : Mr Deepak Bhatt

Accounts: Mr Arun Ahuja, Ms Devanshi Khattar, Ms Kanwal, Mr Sachin

Contact:

Dr Sonal Bathla & Dr George Verghese

6B/7, Raj Narayan Marg, Civil Lines, Delhi-110054.

www.oktifoundation.com

(M) 9811444563; drsonalbathla11@gmail.com

The surgical team that gave so willingly of themselves, that others might lead better lives

Dr Bazliel, Dr George Verghese, Dr Shiela Verghese, Dr T C Sharma, Dr Sonal Bathla,

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Dr Dolkar, Dr Bhanupriya, Dr Temsula.

