



Rajiv Gandhi Cancer Institute and Research Centre

A Unit of Indraprastha Cancer Society
Registered under "Societies Registration Act 1860"

Architect's Impression of RGCI & RC (post expansion)



News Letter

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EDITORIAL

Year 2013 at RGCI & RC

As 2013 draws to a close, I am pleased to present before you the report card of RGCI & RC. Thousands of people have visited RGCI & RC from all over India with great hope in hearts looking for a cure and our team made all efforts to come upto their expectations.

RGCI & RC has invested in cutting edge technology by bringing world class medical equipments and latest facilities in the medical care. RGCI & RC has taken a significant leap forward with the introduction of Tomosynthesis (Hologic) for breast imaging. We have acquired HIPEC (Hyperthermic Intraperitoneal Chemotherapy) system for cancers like colorectal, stomach, ovary and pseudomyxoma peritonei. During HIPEC procedure, a surgeon circulates a heated sterile saline containing chemotherapeutic agent throughout abdomen after removing gross tumor. This way unusual side effect of high dose chemotherapy can be avoided. RGCI & RC has established first Biorepository in which biospecimen (tumor) is stored either for clinical or research purpose. We have renovated all eleven operating rooms with latest monitoring gadgets. More than 650 robotic operations have been performed for indications in Urology, Gynaecology, Thoracic and Abdominal Surgery. We have also upgraded our radiotherapy machines including Treatment Planning Systems. We have installed new CT Scanner (128 slices) and commissioned True Beam for precision radiotherapy. We have renovated IPD areas including Pediatric Ward.

The Institution has given special thrust to infection control and infection control committee has rigorously monitored and regulated infections at RGCI & RC. Infection rates are well within the accepted standard levels, comparable to well established hospitals in India.

Preventive team of RGCI & RC has screened 8207 persons in this year and detected 611 precancerous lesions and 53 frank cancers. Our palliative cancer care team made 726 home visits and enrolled 159 terminally ill cancer patients.

At RGCI & RC, the human resource system and Institute's environment nurtured creativity, innovation and greater efficiency in its human capital. Employee safety, protection against occupational hazards has been a constant theme throughout the year, which was addressed with educational drives, poster competition and on visit reviews of the prevalent knowledge amongst the staff.

RGCI & RC remained the focus of academic activities which included Musculoskeletal Oncology Update, The Pink Ribbon Meet, Myeloma Meet, Nursingcon in addition to annual RGCON 2013. Alumni Meet 2013, first ever get together of RGCI & RC consultants and residents was unbelievable moment of happy reminiscences.

We firmly believe in Excellence, Expertise and Empathy; these three E's define our culture. It is this philosophy that has propelled us to touch lives, to heal and to continuously improve healthcare delivery. We have recognized that healthcare delivery is a dynamic process. We are constantly thinking beyond today's reality evolving a smarter and better cancer care in future.

Dr. Dewan AK
Medical Director

*Wish you a very
Healthy, Prosperous &
Happy New Year 2014*



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and Research Centre**

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LYMPHOMA

"BIOLOGY TO THERAPY"

13th Annual International Conference

RGCON 2014

15th - 16th February 2014

Stein Auditorium, India Habitat Centre, Lodhi Road, New Delhi-03

INTERNATIONAL FACULTY



Dr. Ranjana H. Advani, MD
Saul A Rosenbeng Professor in Lymphoma
Stanford University Medical Center
875 Blake Wilbur Drive, Stanford, CA 94305-5821



Dr. S. David Hudnall, MD, F.C.A.P.
Professor of Pathology and Laboratory Medicine
Director of Hematopathology
Yale University School of Medicine
310 Cedar Street, New Haven, CT 06520



Prof. Bharat N Nathwani, MD
Director of Pathology Consultation Services
City of Hope, National Medical Center
1500 East - Duarte Road, California



Prof. h.c. H. K. Müller - Hermelink, MD
Professor Emeritus University of
Würzburg Wissenschaftsdirektor of the
Universities of Kiel and Lübeck, Germany



Dr. Wolfgang Hiddemann, MD, PhD
Ludwig-Maximilians-Universität (LMU)
Department of Internal Medicine 3.
Marchioninstr. 15. Munich, Germany 81377



Prof. Dr. Dr. h. c. Stefano A. Pileri
Full-Professor of Pathology
Director of the Haematopathology Unit, Department "Marcello Malpighi",
Bologna University School of Medicine,
St. Orsola Hospital, Building 8, Via Massarenti 9, 40138 Bologna (Italy)

TOPICS OF INTEREST

- Evolution of Lymphoma classification
- Dissecting low grade Lymphomas
- Current & novel treatment in Follicular Lymphoma
- Molecular Techniques in Lymphoma
- Morphological diversity of DLBCL
- Current treatment strategies in DLBCL
- Pathology of Mimickers of Lymphoma
- Molecular landscape of Hodgkins Lymphoma
- Current & future trends in treatment of HL
- Grey Zone Lymphomas
- Current treatment & novel immunotherapies
in Lymphoblastic Lymphoma
- Pathology & treatment PTCL
- A variety of Debates & Panel Discussions

Last date for Abstract Submission for Poster Presentation : 15th January 2014

For Registration, please contact: Ms. Mamta Arora at +91-11-4702 2621 / 2478 / rgcon2014@gmail.com

Your Conference has been accredited by the Delhi Medical Council for
15 Hours & 10 Minutes as CME Credit Hours (vide letter no. 1935 / DMC / CME / 16C / 2 / 2013 dated 28th November 2013)

JOURNEY AFTER ACCREDITATION

Journeys are made by people you travel with. The journey of Rajiv Gandhi Cancer Institute & Research Centre towards attainment of Quality Patient Care started much before the Institute achieved NABH accreditation. Quality has been the hallmark of the Institute since its inception. The philosophy of RGCI & RC is to constantly strive towards excellence in onco-care through combination of latest technology, competent personnel and humane touch. The Institute achieved NABH Accreditation on June 14, 2012; it is also accredited for its Lab and Blood bank services.

What is Accreditation? It is the Public recognition of the achievement of accreditation standards by a healthcare organization, demonstrated through an independent external assessment of that organization's level of performance in relation to the standards. National Accreditation Board for Hospitals and Healthcare Providers (NABH) is constituent board of Quality Council of India and has been set up by the Government of India. NABH has been running its Accreditation Program for hospitals successfully since more than 7 years with more than 190 accredited hospitals and over 550 hospitals in process. NABH standards have been acclaimed by both Indian health industry and internationally by ISQua (International Society for Quality in Healthcare). The uniqueness of implementing standards in the hospital is that they help you achieve standardization, develop a culture that is driven by uniform processes and lay emphasis on safety aspects for patients as well as employees. Achieving NABH accreditation is a herculean task in itself where traditional organizations have to battle with mind sets, continuous attrition, training, unplanned infrastructure and minimum resource allocation for quality per se. No quality movement can succeed without commitment and conviction from the top management along with the active participation of employees. The management needs to be committed to achieve accreditation; only then the fruits of hardwork are realized.

But what after accreditation? A sense of complacency is all around, people feel that they have achieved a milestone and that is it! But the real work starts then. It's a challenge for Quality Team and administrators to continue initiatives taken and rise further on the ladder of continuous quality improvement. Even the patients want to know today that how two accredited hospitals are different. Are we really aiming at patient satisfaction? Has the culture of safety imbibed in every corner of organization?

Patient care not only involves core clinical care, but also other support activities like requisition of tests, medicines, nurse doctor coordination, infection control practices, training and so on. These need to run seamlessly in the background to provide the best experience to the patient and relatives. A quality-conscious hospital will define all such activities internally, document the same and impart necessary training to the staff. Even after getting accredited, a strict Monitoring and Evaluation plan needs to be in place so that the gaps are known and continuously bridged. Every department must have a Quality Champion, who takes up roles and responsibilities pertaining to standards and report whenever there is any addition / deletion of services. Regular training and re training is the key to good learning and helps the new employees to learn things easily. Last but not the least, Quality Core group must meet every fortnight and make a plan of action. Quality team must be visionary as it is responsible for 'raising the bar' every time and create a culture i.e. process driven and aims at safety.

“When the winds of change blow, some people build walls and others build windmills”

Dr. Sippy Batra / Dr. Ruchika Girdhar
(Quality Team)

THE PINK RIBBON MEET 2013



Rajiv Gandhi Cancer Institute & Research Centre, Delhi, organized the annual symposium for breast cancer survivors, “**THE PINK RIBBON MEET 2013**”, on Saturday, 14th December 2013, at Hotel Crowne Plaza, Rohini, Delhi. About 250 survivors and caretakers not only attended, but also participated in the event in full fervor. The meeting was inaugurated by Shri D. S. Negi, CEO, RGCI & RC and Shri Krishan Kalra formerly Chairman of PHD Chamber of Commerce. Dr. Kapil Kumar, Sr. Consultant & Chief of Breast, Thoracic & Musculoskeletal Services welcomed the gathering.

The CEO emphasized upon the importance of survivor forums and applauded the initiative. Shri Krishan Kalra shared his personal ordeal against breast cancer with the survivors, inspiring in them a will to win over cancer. A visually challenged musical troupe mesmerised the audience with their melodious and motivational songs. Many a survivor, both young and old, came up with zeal to prove their mettle against cancer and the meet was an excellent platform for the same. One of them volunteered to paint the nails pink with art, while another celebrated her wedding anniversary with a song at the event. All's well that ends well & on the same note the meeting ended with Ms. Deepika Kaur, Clinical Psychologist, Max Hospitals, elaborating on the various psychosocial aspects of survivorship.

(Dr. Kapil Kumar / Dr. Ashish Goel / Dr S. Veda Padma Priya)
(Thoracic Oncology Services, Department of Surgical Oncology)

Mr. D. S. Negi (C.E.O.)
Dr. A. K. Chaturvedi
Dr. D. C. Doval
Dr. Gauri Kapoor
Dr. Anurag Mehta
Dr. S. A. Rao
Dr. P. S. Choudhury
Dr. S. K. Rawal
Dr. Kapil Kumar
Dr. Dinesh Bhurani
Dr. Sunil Kr. Gupta
Dr. B. K. Naithani
Dr. Rupinder Sekhon
Dr. (Col.) A. K. Bhargava
Dr. R. S. Jaggi
Dr. Vineet Talwar
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To:

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