

Quarterly Newsletter of the Bombay Orthopaedic Society

DO SOMETHING WONDERFUL, PEOPLE MAY IMITATE IT ! ~ DR ALBERT SCHWEITZER



 Fruit fly from Calcutta - Macro photography by **Dr Jayant Jadhav**

>> page 10

From the desk of the President



Dear Friends,

As the phase of pandemic acceptance dawns in, we need to unfold our coping mechanism in alignment with everyday life. We started with virtual clinical meetings and master series, organised our EC meetings online, uploaded our video journals for the recent updates in Orthopaedic practice and announced digital instructional courses for the very first time in this country.

This E-newsletter is yet another venture to reach out to our esteemed members to keep them abreast with our academic as well as non-academic activities. This is a first of its kind for our society and we shall try to make it on quarterly basis in the academic year so that we remain in touch with you, our academic fraternity. It's been a mixed year so far with crests of achievements and troughs of losses. Very recently, we have had to bear the loss of bereavement when our mentor, guide, father figure and BOS past President, Prof. L.N. Vora, on whose shoulder we stand today, passed away. We hold our head in pride as one of the BOS funded premiere research projects got recognised and published in a peer reviewed journals of significant repute.

As IOACON 2020 got postponed to the next academic year, we gradually unlock ourselves, with an unfulfilled desire to meet and interact on a physical platform and in person, likely to see the light of the day during the designated "WIROC Unlocked".

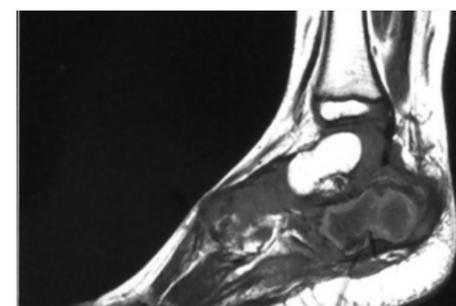
I appreciate the efforts of our newsletter editors, Dr. Kshitij Chaudhary, Dr. Arjun Dhawale and Dr. Swapnil Keny in making this a virtual reality. Any suggestions are welcome in my personal email id:

drssmohanty@hotmail.com

Wishing you a Very Happy and Safe "In-house" Diwali.

Best regards,

Shubhranshu S. Mohanty
President, BOS



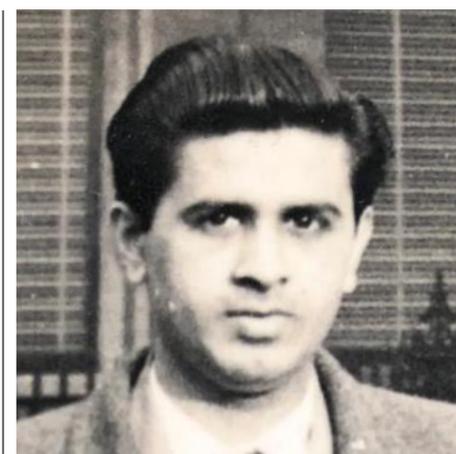
MDR TB



By **Dr Vikas Agashe**

BOS supported study
"A study of
Nonrespondents to
ATT in Osteoarticular
Tuberculosis."

>> page 5



Dr. LN Vora



Volumes could be written and printed about his contributions, and each one of us, who is reading this, would have his or her favorite LNV stories

>> page 2

The Renaissance Man

A heartfelt tribute to Late Prof (Dr) L.N.Vora

12/3/1931 – 31/5/2020

We should so live and labor in our time, that what came to us as a seed may go to the next generation as blossom, and that which came to us as blossom may go to them as fruit. That is what we mean by progress – Henry Ward Beecher

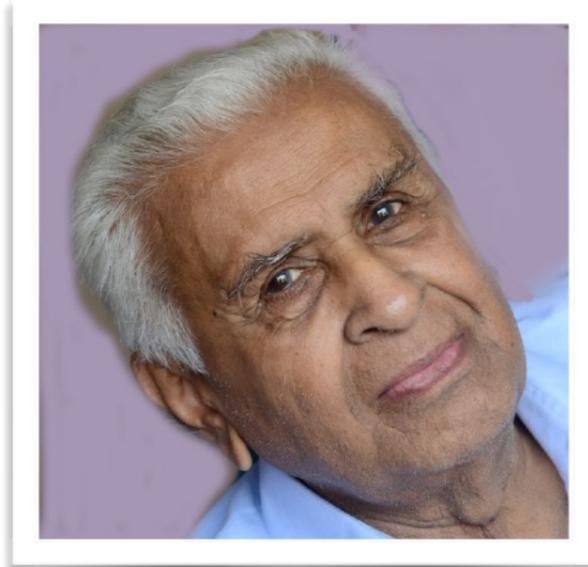
This quote best exemplifies the life and times of Prof Laxmikant Naranji Vora. A long, healthy, and fruitful life dedicated to orthopedics amounting to almost six decades of teaching and influencing the careers of generations of orthopedic surgeons. It could be said that he was indeed one of the 'Last of the Old Guard.'

If one ever had to reach out to a senior medical consultant, not necessarily an orthopedic surgeon, all one had to do was to give Prof's Vora's reference on the phone, and suddenly, the tone of at the other end of the line would change from authoritative and hostile to mellow and congenial. It would then become evident that this person, who was at the pinnacle of his field, had once been influenced by the academic aura of Prof LNV. Such was the impact of his name and the measure of respect he commanded across the entire faculty of medicine in the city of Mumbai.

Volumes could be written and printed about his contributions, and each one of us, who is reading this, would have his or her favorite LNV stories. What, however, distinguished him from others were the principles that governed his life.

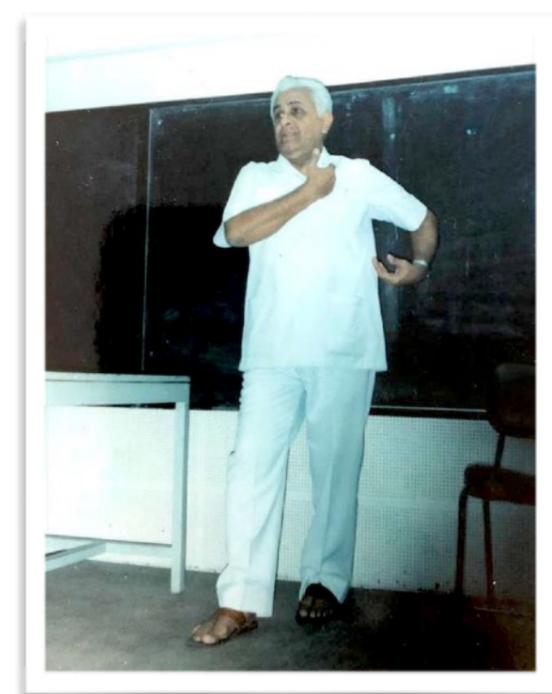
Discipline and Punctuality

In the words of Dr. Nicholas Antao, "At the stroke of 9 a.m, Dr.Vora was punctually in our midst. As he entered the OC ward, perfectly clad in a spotless white safari, a shiver ran down every spine. His keen eye would spot everything from an improperly made bed to wrongly applied splints and plasters, positioning traction units,



indoor case files, and X-rays. He would pick on that till he found perfection". Even if such actions exuded a disciplinarian persona, it also reflected the deep care and dedication of Prof LNV for the impoverished class of patients being treated in his unit at the KEM Hospital.

“At the stroke of 9 a.m, Dr.Vora was punctually in our midst. As he entered the OC ward, perfectly clad in a spotless white safari”



Even if such actions exuded a disciplinarian persona, it also reflected the deep care and dedication of Prof LNV for the impoverished class of patients

Clinical Acumen and a Zest for Teaching

Prof LNV was an ardent teacher and an excellent clinician with impeccable bedside manners. He would arrive at a clinical diagnosis by visualizing the patient's gait pattern from a distance. 'The types of gait' was a subject close to his heart, and he would demonstrate every pathological gait in an almost theatrical fashion for all his students. He could pin down an orthopedic resident by getting into the nanoscopic details on any topic related to orthopedics and applied sciences, as his knowledge of the subject was thorough and updated. He had explicit knowledge of General Surgery, Medicine, Physiology, Pathology, and Pharmacology in addition to Orthopedics.

Dr. Vikas Agashe fondly remembers Dr. Vora's teaching sessions during his undergraduate and postgraduate days:

"Prof LNV had phenomenal knowledge and keen observation power. Every round and every OPD was like an MS examination for his residents. One of my classmates popularly described the scene during our UG days" :

“His registrars sweat so much during his rounds that the floor needs to be mopped after he leaves the ward.”

Academic, Administrative and Leadership Capacity

In addition to being an astute clinician, Prof LNV was an able statesman, a skillful administrator, and a figurehead who lead from the front. Dr. Antao is reminiscent of the times when Prof LNV organized the Silver Jubilee IOACON in 1980. Decades before computers and mobile phones became household commodities and productivity gadgets, Prof LNV would not only remember and recollect the minutest of details but could ...

The Renaissance Man

A heartfelt tribute to Late Prof (Dr) L.N.Vora

12/3/1931 – 31/5/2020

... also reproduce them, verbatim purely by the computing power of his eidetic memory. Meticulous planning, attention to detail, and flawless execution of intent was not only his forte, but this was deeply ingrained in his DNA.

Therefore, it is not surprising that he served on the executive councils and presided over various national and international associations. He was responsible for not only streamlining the affairs of these societies but also

Working for the Rotary Club, conducting a free outpatient clinic at the Saifee Hospital, or even reflecting his generosity by providing a venue for various courses and academic events of the Bombay Orthopaedic Society at the CPS office, gratis, his benevolence would strike a chord in the hearts of people.

A People's Man

Prof Vora symbolized the definition of a family man. For him, WIROC was not only a conference but a family event. An event where his nuclear family interacted and mingled with his

... the mere mention of the 'Sahyadri Batatawada' would bring a sparkle to his eyes and a smile to his face.



served as an advisor and adjudicator on multiple issues, including intricate matters related to auditing and taxation.

His plethora of experience in constituting academic curriculums, designing exam patterns, and being an advisor and counsel to various state and national boards and universities was exemplary. In his later years, he served as the controller-in-chief of exams at the College of Physicians and Surgeons of Mumbai. Dr. Surendra Shukla remembers the dedication with which Prof Vora would plan the lecture

Prof. Vora symbolized the definition of a family man. For him, WIROC was not only a conference but a family event.

series, the postgraduate exams, and the zeal with which he would personally visit the practical examination center on the last day to inspect the setting and interact with all examiners.

The Humane Touch

An outsider would often misinterpret his stern exterior. For those who knew him, he possessed a very kind and considerate heart. Strict, yet practical, he would throw the rule book at you if you digressed from an issue, but would also be kind to help and explain the solution to that issue.

Working for the Rotary Club, conducting a free outpatient clinic at the Saifee Hospital, or even reflecting his generosity by providing a venue for various courses and academic events of the Bombay Orthopaedic Society at the CPS office, gratis, his benevolence would strike a chord in the hearts of people.

extended family of contemporaries and students. Vora sir, Bindu Madam, Niraj, and Poorvi were as much a part of every WIROC as the other orthopedic surgeons who would attend it. He gleamed with pride at both his children's achievement and would often narrate stories and incidents relating to them with a great deal of enthusiasm. Very particular about his food, he could conduct long and tiring executive council meetings and sessions but would leave for home by dinner time. However, the mere mention of the 'Sahyadri Batatawada' would bring a sparkle to his eyes and a smile to his face.

The Last of the Old Guards

A teacher, a mentor, a role model, a trailblazer, an idol, an inspiration, and an epitome of human endeavor left us on the 31st of May 2020. Yet, his life, legacy, teaching, and principles will serve each soul influenced by the Midas touch of this "The Renaissance Man."

Contributors -

Dr Nicholas Antao

Dr Vikas Agashe

Dr Surendra Shukla

Dr Swapnil Keny



Six Feet Away or Six Feet Under depends on Six Inches in Between

Dr Ram Chaddha



As I doffed my N95 mask carefully checking its reusability, I wondered how happiness in small things outweighs success in the big things in life. The fact that the mask was clean and I could store it for reuse, five days hence meant the world to me. I was so grateful that the N95 mask had conventional tie-ups rather than the slip-ons that traumatized my

ears and tormented the six inches in between them. The gratitude towards my colleague who had procured it from his Hospital Pharmacy in Navi Mumbai and got it hand-delivered to me in Mumbai, despite the lockdown in the COVID crisis, gave me that rush of Oxytocin.

Is it time to Mask or Unmask?

As we continue the horizontal flux between lives and livelihood, the struggle between masking and unmasking gets even worse. The deep chasm created by the COVID crisis has usurped many an unfed migrant worker treading home, many a fragile senior citizen, many a maestro with misplaced mental health not necessarily due to the virulent virus, but by the collateral damage. The Frontline Warriors, including Healthcare Workers, Police Force & other Essential services, have been Martyred without a War. The pandemic has created both panic and pandemonium.

Is it really the sanitization, masking & social distancing that will keep us alive & happy, or is it something else?

"The difficult is what takes a little time; the impossible is what takes a little longer." - Fridtjof Nansen

- Do we need to look at our Hands, heads, or hearts for the way forward?
- Do we need to modify Products, Processes, or Purpose?
- Do we need to protect Profits, People, or the Planet?

These questions enhance the Tetris Effect engaging most of our waking time, besides cannibalizing into our sleep & resting hours.

Have we successfully surfed the tidal wave, or is the tsunami lurking behind our blind spot?

It is time we start accepting us and ourselves, rather than live as I, me, and myself. We need to become Egalitarian from Egotists.

It has taken an invisible foe to teach us: "UBUNTU" ~ I am because you are. It is a culture of caring & compassion for the community. We have been struggling between our wants and our needs, notwithstanding the fact that we have all been served more than we deserve. It is in the race for power and prestige that we have amassed beyond our needs, denying the deserving destitute.

The virus has painted us all with the same brush. We are all a part of the same large canvass where the artist is making his final corrections. The few who blend and merge with the larger picture shall survive and shine, adding significance to society. It is time we take a step back before we take a step forward.

We need to wear our own mask before we help others wear theirs'. Let the smile of benevolence be evident through our eyes rather than our masked lips. Please care and share.

It is time to sanitize, not just our hands, but our heads and our hearts. For a change, let the heart rule the head, let the purpose personify the process, and let the planet be protected above the profits. Let the six inches between our ears choose to stay six feet away and keep as many of us not getting six feet under.

Let hand sanitization, face masking & social distancing be the universal new normal; however, let unmasking the head & the heart with compassion and empathy for the socially distanced be the "Make in India Mantra" for the Atmanirbhar Bharat.

Let us practice APATHEIA rather than APATHY.

- APATHEIA - in Stoicism – Equanimity – Dispassionate – Detached Involvement
- APATHY - Indifference – Lack of Interest – Lack of Enthusiasm

We need to transform the six inches in between our ears – we need a mindset change. If we are not a part of the solution, we are a part of the problem. To quote the legend Ratan Tata "If you want to walk fast, walk alone. If you want to walk far, walk together". We have to walk far, fearlessly with fortitude. Let us start practicing giving and forgiving rather than getting and forgetting.

Please Give:

- Time to the family and friends especially the elderly
- Meals to the hungry
- Employment to the willing
- Masks & sanitizers to the non-affording
- Education to the seeker
- Gratitude, Appreciation & Smiles to all

We should practice a passion for our purpose, dispassion for recognition &, above all, compassion for our family, co-workers & patients.

COVID-19 came as a problem that we have yet been unable to cure; it is now a predicament that we shall need to endure. Today, it is time for survival; later, we can think of security, stability & success.

Let us have faith in the six inches between our ears, to keep ourselves six feet away rather than six feet under.

Stay Safe; Stay Healthy!!!

Think globally, act locally

Dr. Vikas Agashe



BOS is a unique Orthopaedic association to implement the policy of **“Think globally, act locally.”**

Tuberculosis, especially drug-resistant TB, has been a threat to India and the world, especially since this century. Several BOS members

perceived that the incidence of patients not responding to Anti Tubercular treatment (ATT) had started rising. **The BOS “think tank” felt that many of these patients may be victims of masked drug resistance** and that the cause of poor response to ATT needs to be ascertained.

Hence, BOS initiated and financially supported the project **“A study of Non-respondents to ATT in Osteoarticular Tuberculosis.”** A senior philanthropic Orthopaedic surgeon also contributed by a handsome donation to this noble cause. It was decided to study patients who were not responding to appropriate ATT at three months or more. As BOS projects need to be assessed and sanctioned by a research society, we took inputs and got it sanctioned from the research society of Hinduja hospital and decided to conduct the study at Hinduja Hospital because of its excellent laboratory facilities.

We hypothesized that –

- 1) Drug resistance is the main cause of poor response,**
- 2) The resistance pattern is varied**
- 3) Some patients may be suffering from TB mimics**

The project was conducted for about **eight years**, with the enrollment of patients from **2010 to 2014**. The project was open to all members of the Bombay Orthopaedic society, and any member of BOS could send patients or samples for assessment and testing, making it a real “Pan Mumbai” study.

As hypothesized, of the 89 patients on ATT for an average of 9.33 months, 33 had resistance to at least one drug with 24 MDR, and three XDR. Sixteen patients were TB mimics. A comparison with the previous BOS project conducted between 2004 to 2007 revealed a worsening of the resistance pattern and the occurrence of primary resistance to even second-line drugs. All the patients were appropriately treated.

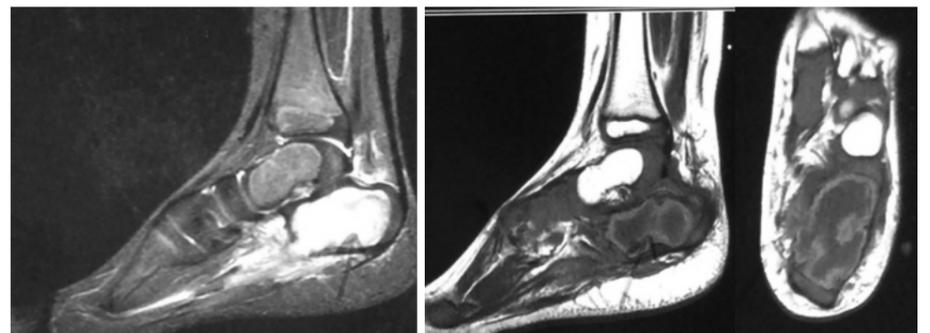
This study was awarded **“Golden Jubilee”** oration in IOACON 2019, and it is an honor that this study is now published in the Indian Journal of Orthopaedics.

Diagnosis and Management of Osteoarticular Tuberculosis: A Drastic Change in Mind Set Needed— It is Not Enough to Simply Diagnose TB

Vikas M. Agashe, Camilla Rodrigues, Rajiv Soman, Anjali Shetty, R. B. Deshpande, Kanchan Ajbani, Jitendra Pingle, Mandar Agashe, Hitendra Patil, Sagar Raghuvanshi, Mani Gundayda, Raju Gite, Mithun Jakkan. Amit Mishra, Aditya Menon : **Indian Journal of Orthopaedics**

<https://doi.org/10.1007/s43465-020-00202-7>

I sincerely thank the President, EC members, and the Research Committee members of BOS. Also, I express my gratitude for the members who contributed to the clinical material. And last but not least, I am thankful to all patients of this project. Finally, I must admit that my students and research fellows did most of the work, and I am sure they will contribute to BOS activities in a big way in the future. BOS has undoubtedly set an example for other organizations towards improving our healthcare.



CASE PRESENTATION

3 year old male child presented with discharging sinus on left heel since 6 months. Past history of pulmonary tuberculosis 1 year back for which he took first line ATT for 6 months. He had a history of contact with TB

MRI showed heterogeneous marrow abnormality with intraosseous abscess formation in left calcaneus and erosion of medial cortex.

Biopsy - Culture *M. Tuberculosis* resistant to Isoniazid, rifampicin, ethionamide, pyrazinamide, streptomycin

Patient was started on second line ATT: Inj-Amikacin 200mg IM alternate days for 4 months, Ethionamide 250mg once a day, PAS 2gm once a day, Clarithromycin 250mg once a day, Ofloxacin 200mg once a day

↓ Follow up at 30 months shows well healed sinus and good improvement on MRI



Measuring your Scientific Foot Print

Dr Swapnil Keny



validation may be categorized as Academic Impact.

Every academician and researcher yearns for peer validation. In a Physical meeting, this validation is almost instantaneous, depending upon the audience interaction. The same holds true for a web meeting, where views and comments are a decisive part of the validation process. These two forms of

On the other hand, a scientific footprint is a process of gaining peer recognition after the publication of a journal article in a particular journal. There is no intuitive way to measure this footprint and in fact it is sometimes difficult to quantify accurately. Specific metrics need to be understood to fathom how published research has impacted or altered the thought processes and the outlook of peers.

These metrics or parameters often seem complicated. This article is aimed at simplifying these complex measures.

There are 4 basic ways to measure one's research impact.

1. H- Index
2. Citation Analysis
3. Impact Factor
4. Altmetrics

H- Index :

It was described by Professor Jorge E Hirsh, a Professor of Physics at the University of California, San Diego. It is an attempt at measuring the impact and the productivity of the research of a researcher.

The h-index correlates with obvious success indicators such as winning the Nobel Prize, being accepted for research fellowships, and holding positions at top universities. The index is based on the set of the scientist's most cited papers and the number of citations that they have received in other publications. An h-index of 3, therefore, means that the author has published at least three articles, of which each has been cited at least three times.

How to calculate h-index?

Step 1: List all your published articles in a table.

Step 2: For each article, gather the number it has been cited.

Step 3: Rank the papers by the number of times they have been cited.

Step 4: The h-index can now be inferred by finding the last entry at which the citation number is greater or equal to the rank of the article Number

For example - 5 papers published by Person A

PAPER 1 = Cited (7)

PAPER 2 = Cited (6)

PAPER 3 = Cited (5)

PAPER 4 = Cited (10): Last Entry where Citation Number > rank of the paper

PAPER 5 = Cited (2)

For Person A, the H-INDEX IS 4

H-INDEX = 4, means that four papers have been cited more than four times or equal to 4 times

Another Example - 6 papers published by Person B

PAPER 1 = Cited (17)

PAPER 2 = Cited (12)

PAPER 3 = Cited (5)

PAPER 4 = Cited (5)

PAPER 5 = Cited (5) : Last Entry where Citation Number = rank of paper

PAPER 6 = Cited (0)

For Person B, H-INDEX IS 5

H-INDEX = 5 (means that five papers have been cited more than five times or equal to 5 times)

For a thorough analysis of an author's impact or a publication, one needs to look in multiple databases to find all possible cited references. The resources utilized include: Web of Science, Scopus, Google Scholar, and other databases with limited citation data.

Citation Analysis :

Citation analysis involves counting the number of times an article is cited by other works to measure a publication or author's impact. However, the caveat is that no single citation analysis tool collects all publications and their cited references. For a thorough analysis of the impact of an author or a publication, one needs to look in multiple databases to find all possible cited references.

Measuring your Scientific Foot Print

Dr Swapnil Keny

What are the common databases to find citation analysis?

Web of Science
Scopus
Google Scholar
EMBASE
Pub Med Central
Science Direct
Sci Finder scholar

Impact Factor :

Impact Factor calculation is an attempt to create a quantitative tool for evaluating journals. It represents the frequency with which the "average article" in a journal has been cited in a given period of time.

The calculation is usually based on a two-year period.

For example: if there are 100 papers published in a journal in 2009-2010 and there are 100 citations of articles from this journal in 2011, the Impact Factor'2011 is 1 (number of published articles/number of citations).

Tools to measure the impact factor

A) Journal Citation Reports

Journal Citation Reports provides a ranking for journals in the areas of science, technology, and social sciences. For every journal covered, the following information is collected or calculated:

Citation and article count, Impact factor, Immediacy Index, Cited half-life, citing half-life, Source data listing, Citing journal listing, Cited journal listing, Subject categories, Publisher information.

B) SCImago Journal Rank (SJR)

SCImago Journal Rank is an evaluation of scholarly journals to assign weights to bibliographic citations based on the importance of the journals that issued them so that citations issued by more important journals will be more valuable than those given by less important ones.

C) SNIP (Source Normalised Impact per Paper)

SNIP or The source normalized impact per publication is calculated as the number of citations given in the present year to publications of the past three years divided by the total number of publications in the past three years.

Altmetrics :

Altmetrics are non-traditional bibliometrics proposed as an alternative or complement to more traditional citation impact metrics, such as impact factor and h-index. Altmetrics uses public APIs (Application Program Interphases) across platforms to gather data with open

scripts and algorithms. Altmetrics calculate scholarly impact based on diverse online research output, such as social media, online news media, online reference managers, and so on. They can be applied to people, journals, books, data sets, presentations, videos, source code repositories, web pages, etc. Altmetrics could be applied to research filter, promotion and tenure dossiers, grant applications, and for ranking newly-published articles in academic search engines.

What are the sources of Altmetric Data?

Altmetric - <http://www.altmetric.com/>

The Altmetric score is a quantitative measure of the quality and quantity of attention that a scholarly article has received through social media.

ImpactStory (<http://impactstory.org/>)

Scholars enter information about the articles, such as the DOI, to generate an impact report (may provide the number of times an article has been liked on Facebook, tweeted, cited in publications, viewed at the publisher Web site, or shared on social bookmarking tools such as Delicious, Mendeley, or CiteULike).

CitedIn (<http://citedin.org>)

Scholars enter PubMed PMID to generate an impact report.

PlumX

PlumX Metrics provide insights into the ways people interact with individual pieces of research output (articles, conference proceedings, book chapters, and many more) in the online environment. Examples include, when research is mentioned in the news or is tweeted about. Collectively known as PlumX Metrics, these metrics are divided into five categories to help make sense of the huge amounts of data involved and to enable analysis by comparing like with like.

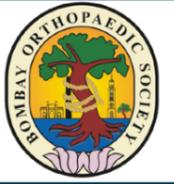
PlumX gathers and brings together appropriate research metrics for all types of scholarly research output.

PlumX categorizes metrics into 5 separate categories: Citations, Usage, Captures, Mentions, and Social Media.

To Summarise

Like the famous New York Times Columnist, Thomas Friedman once wrote, "The world is flatter than ever." In today's day and age, dedicated researchers with well-documented data, methodical analysis, and tenacity to publish are ever so likely, not only to flatten the scientific world further but even make a dent in the universe with the footprint of their research.

UPCOMING MEETINGS



WIROC Unlocked 19-21st Mar 2021



2020.....!! What a year it has been.....!!

The world we live in today is not the same as the one we lived in a few months ago... As our world came to a grinding halt on 19th March 2020, we adapted ourselves by participating in webinars, “zoom meetings” and web conferences.

However, as the curve starts flattening and the lockdown seems to be ending, we feel and sincerely hope that the end of the pandemic is upon us. It is a time for us to move on, albeit with great caution. With this hope, we the organizing team of WIROC 2020 would like to invite you to the first post- pandemic conference- the WIROC- Unlocked.... **from 19th-21st March 2021 in Mumbai.**

This will herald a new Beginning- a new Hope and a new “Normal”... We will take the utmost care to meet all the health guidelines and requirements and will endeavor to make it an academically enriching, socially entertaining, healthy and safe experience.

Abstract submissions are open since 15th September and **registrations will open as soon as the Governmental directives and approval arrive.**

Come, join us exactly one year after our lives changed...
Come, meet us in Mumbai for WIROC UNLOCKED.....!!



Dr Mandar Agashe (Organising Secretary)



Dr Satish Mutha (Organising Secretary)



Dr Shubhranshu S. Mohanty (Organising Chairman)

Virtual Courses



BOS Hand Surgery Course

September 24-26, 2020 - 6 to 9 pm

Registration Rs 800

Convener - Dr. Rohan Habbu (9820727963)

Co-Convener - Dr. Bipin Ghanghurde (7738729068)



BOS Basic Arthroplasty Course

September 24-26, 2020 - 4 to 8 pm

Registration Rs 1000

Convener - Dr. Abhijit Kale (9819957525)

Co-Convener - Dr. Sudhir Sharan (9867967061)

Co-Convener - Dr. Anoop Dhamangaonkar (9819419898)



BOS Basic Trauma Course

October 10-11, 2020 - 10 am to 2 pm

Registration Rs 1000

Convener - Dr. Pankaj Pundlik Pawar (9930433842)

Co-Convener - Dr. Santosh Banshelkikar (9930402122)

UPCOMING MEETINGS



IOACON 2020NE



IOACON - Mumbai - 2020NE

The 65th Annual Conference of the Indian Orthopaedic Association

In accordance with the IOA - Executive Council decision dated July 19, 2020, IOACON - Mumbai - 2020 is now IOACON - Mumbai - 2020NE. This rescheduling was in response to the unprecedented COVID-19 crisis.

On behalf of **Dr. R.C. Meena - President & Dr. Atul Srivastava - Hon. Secretary** of the IOA, we, the Organizing Committee, welcome you to participate in large numbers* at the much-awaited mega-event "IOACON - Mumbai - 2020NE". The dates scheduled for the

last quarter of 2021 **will be announced soon.**

We promise to deliver our best in making this an inspiring, innovative & iconic experience.

Please join in large numbers for an avant-garde journey in search of excellence.

Dr. Ajit Shinde (Organising Chairman)

Dr. Parag Sancheti (Conference Director)

Dr. S. S. Mohanty (Organising Co-Chairman)

Dr. Ram Chaddha (Organizing Secretary)

BOS ACTIVITIES SO FAR



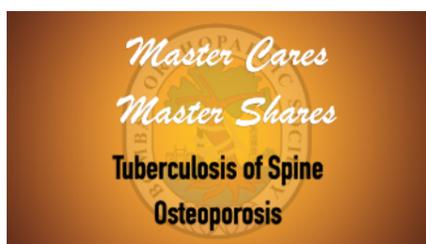
Click on the link (pictures) to watch the recordings!
Subscribe to the BOS Youtube Channel and get notifications of new uploads



MASTER CARES MASTER SHARES



May 2020
Office Orthopaedics



Jul 2020
TB and Osteoporosis



Sept 2020
Peripheral nerve injuries in the upper limb

CLINICAL MEETING



April 2020
Invictus 2.0



June 2020
Clinical Meeting Nair Hospital



Aug 2020
Clinical Meeting KEM Hospital

VIDEO JOURNAL CLUB



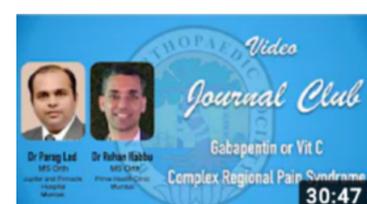
Tibial Plateau Fractures - Dr Vivek Shetty



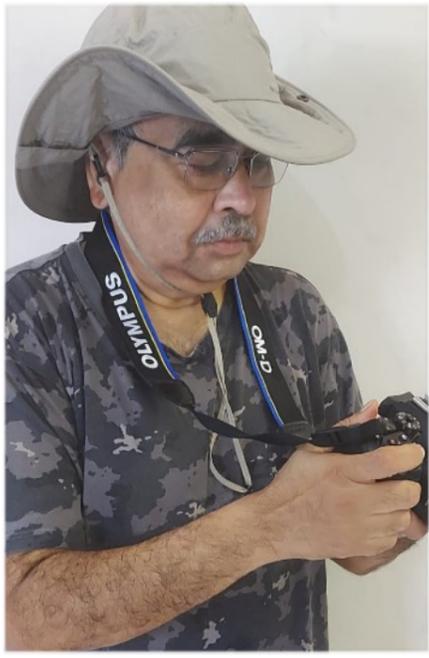
Pink Pulseless Hand - Dr Sandeep Patwardhan



Dual Mobility Acetabular Cups - Dr Nikhil Pradhan



Complex Regional Pain Syndrome - Dr Rohan Habbu and Dr Parag Lad



Dr Jayant Jadhav

Senior BOS member

Photographer &
Orthopaedic Surgeon

Between every two
pines is a doorway to
a new world.

- John Muir

Dr Jayant Jadhav, a
senior BOS member,
is an alumni of the
KEM Hospital,
Mumbai and
practices in Virar.

MACRO PHOTOGRAPHY

Two roads diverged in a yellow wood





Artist

Dr. Manoj
Singrakhia

BOS Member
GSMC/KEMH Alumni
Practicing in Nagpur

Subscribe!



Submit your
artwork /
photograph

Editors
Dr Swapnil Keny
Dr Kshitij Chaudhary
Dr Arjun Dhawale