

NEWSLETTER

ISSUE 4 / MAY 2021

Celebrating the Recognition

The most Socially Responsible Organization



From the desk of MD

We want to reach out as many rural areas as possible and establish CIPACA's quality of ICU services and save as many lives as possible by making it accessible to them

Chief Guest's Message

Quality ICU Care is always our mission as well as our vision but making it affordable at a nominal cost for the marginalised section of the society is our responsibility.





Clinical case study



Nursing case study COVID-19 Pneumonia with Depression Disorder and Parkinsonism



A Useful guide to dealing with anxiety in COVID times



COVID-19 Pandemic: Quick Bytes and Information



I may be Young but I am a Warrior!!



A Warrior, A Nurse, A Wife And A Mother!









We thank Asian-African Chamber of Commerce and Industry

for

Felicitating CIPACA as the "The Most Socially Responsible Company of the Year in Hospitals and Healthcare" for 2021

under the Leadership of

Dr Raja Amarnath, Managing Director







"We want to reach out to as many rural areas as possible and establish CIPACA's quality of ICU services and save as many lives as possible by making it accessible to them"

How many healthcare organisations think of patients' ability to access, avail, and afford the facilities offered by them? Most of them focus on making their services available in an area which is easier for them to set up and function. And quite often it is a posh area in a city where most of the economically well to do families reside. 65-70 percent of India lives in rural areas where the percentage of tertiary healthcare is almost negligible. This leads to thousands losing their lives as they do not receive the much needed emergency care on time.

Here is an organisation that received the 'Leadership Award' for being The Most Socially Responsible Company of The Year In Healthcare & Hospitals for the year 2021 by the Asian-African Leadership Forum. CIPACA (Chennai Interventional Pulmonology and Critical Care Associates) (P) Ltd. is a team of doctors, medical, para medical and business development professionals specialized in establishing tertiary level Multidisciplinary Critical care units, specially designed to cater urban and rural areas. The person behind this venture is Dr G. Raja Amarnath (MD DM, FCCP EDIC (UK)), who trained in Critical care in India and Abroad. Since its inception, CIPACA has set up 295 ICU teams, 340 Critical care beds and saved 189602 lives.

The absence of ICU care in rural and semi urban areas is a matter of grave concern as in case of an emergency, the time taken for accessing an ICU in a nearby city often comes at a cost. "We want to reach out to as many rural areas as possible and establish CIPACA's quality of ICU services and save as many lives as possible by making it accessible to them" said the founder Dr. Amarnath.

CIPACAs' social responsibility rests on three crucial factors, accessibility, availability, and affordability. According to Dr. Amarnath, "People in rural areas cannot afford the ICUS which are only available in metropolitan cities and are very expensive. They have two challenges: Reaching within the golden hour and the charges (even if you are surviving and reach there). This is what makes CIPACA a socially responsible organisation." The significant point about CIPACA is that their operation-driven model does not require any investment for themselves. We hope that Dr. Amarnath's dream of establishing a minimum of one ICU in every taluk may come true as early as possible.



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An excerpt from the interview of Dr Raja Amarnath, Managing Director, CIPACA





Chief Guest's Message

Quality ICU Care is always our mission as well as our vision but making it affordable at a nominal cost for the marginalised section of the society is our responsibility.

CU Care is a vast subject, especially for rural communities that are often deprived of minimal healthcare services. With cases of poisoning, snake bites, cardiac arrest, head injury, lung infection, breathing difficulty etc penetrating the morbidity ratio in rural areas, it is very important that we have ICUs in every nook and corner of the country so that we can treat and save the lives of critically ill patients, especially during the golden hour period when they are gasping for survival.

Sometimes, it's not just about the treatment but also the question of affordability that arises. The cost of ICU shoots the roof when patients are referred to Coimbatore or nearby city areas where the cost of ICU for a single day amounts to 50,000 to 60,0000 rupees per patient. By the time the patient is cured, the family is already in financial shambles.



Therefore, keeping such perennial problems in when we started our ICU mind. in Oddanchatram where our only motto was to save maximum lives during emergency and that too at an affordable price, since it's the rural demography that we are talking about. Sree Kumaran Hospital has saved 2000+ critically ill patients over the past two years and I would like to congratulate the entire team of CIPACA for saving more than 1,00,000+ lives across different locations of the country.

Quality ICU Care is always our mission as well as our vision but making it affordable at a nominal cost for the marginalised section of the society is our responsibility. We believe Sree Kumaran Multi-specialty Hospital will keep on saving lives and making a difference in rural India.

Dr Nachimuthu

MBBS. MS Managing Director Sree Kumaran Multi-specialty Hospital, Oddanchatram







SPOT LIGHT OF THE MONTH

Vestminster

Hospitals

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CIPACA joins hands

with Westminster Healthcare to provide state of the art and quality Covid ICU Services.

With a 20-member medical experts' team and an innovative strategy of combining on site critical care specialists and backup Telemedicine teams to run Covid ICU operations and combat related issues, we have embarked on a mission to serve the nation during these tough times!!

Westminster Healthcare join hands with

Westminster Healthcare join hands with CIPACA for Covid ICU operations

G BALACHANDAR

Chennai, April 23 Westminster Healthcare, a subsidiary of LycaHealth of the United Kingdom and a unit of Lyca Group, has partnered with CIPACA (P) Ltd, a leading healthcare institution that specialises in setting up and management of ICU operations, to offer Covid critical care services at its 70,000 sq ft facility in Chennai. "CIPACA delivers high-

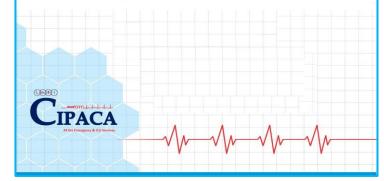
BusinessLine

quality services in rural areas against all odds, I am sure they would deliver the best in hospitals like Westminster that strives to offer international care. So CIPCA is the right choice for us," said TR Raghuraman, Medical Director of Westminster Hospitals.

CIPACA presently operates more than 300 emergency and ICU beds with a team of more than 120 Doctors, 300 nurses and 80 administration & business development professionals across hospitals in Tamil Nadu.

Expert team

Under the tie-up, CIPACA has deployed a 20-member medical experts' team for Westminster Hospital's Covid ICU operations and will initially set up 10 beds for the same. Depending upon the needs, Covid ICU care will be ramped up further.







quality Covid Critical Care Services

CHENNAI, APRIL.24: Westminister Healthcare joins hands with CIPACA to start COVID ICU To provide state of the art and quality Covid Critical Care Services, and to modernize to suit the current level of health-care, Westminister Healthcare launches a joint venture with CIPACA, the country's most renowned Critical care service provider to vari-ous health care institutions. Westminister Healthcare, a pioneer in concierge and be-spoke healthcare providers have consistently evolved to the needs of current pandemic situation. The pandemic effects everyone equally, we at Westminister, would like to provide quality ICU care for our Covid patients. CIPACA founded in

2014 specializes in provid-administration & business. Life Support and other man-ing quality and state of the development professionals. datory life support courses as art emergency and critical CIPACA is a shop in shop in USA and UK.

Сіраса



ary and tertiary level hospitals. It currently operates its services in health organisa-tions including medical college hospitals, trust hospitals, corporate hospitals of dif-ferent levels in South india. They operate more than 300 Emergency and ICU beds with a team of more than 120 Dactors, 300 nurses and 80

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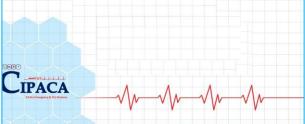
within the hospital. The team is highly skilled and trained in delivery of safe and qual-ity healthcare. The doctors are qualified and trained in India and United Kingdom. The protocols followed are in par with the NHS of UK. the doctors have compulsory training in Advanced Trauma

வெஸ்ட் மின்ஸ்டர் மற்றும் சிபாக்கா இணைந்து

சென்னை, ஏப்.24 மன கோவிட் கிரிட்டி கேர் சேவைகளை வழங்கு வதற்கும் தற்போதைய சுகாதார தற்பின் தமிகள் நிற திலைக்கு ஏற்பதவீன மயமாக்கு வதற்கும், வெஸ்ட்மின் ஸ்டர் ஹெல்ந்சேர் சிபானஷடன் இணைகின்றது!! வெஸ்ட்மின்ஸ்டரிக் nit Gurah". Gu

ளுகள் காடை குராபாள களுக்கு தர்பான ஐ.சி. யூ கவனிப்பை வழங்க விருப்புகிறோம்

லிப்பதற்கும் ந விண கிவேன்" இத்திகழ்ச்சுமில்



மனைகம் தென்னிற்றுள் ஆடுத்து பற்றிகைகளை தொடர்கத்தில், தனது இந்நிலழ்சிலில் வில் மல்ஹே நிலைகளில் இயல்தவின்றனர் பொல்ல வரவேற்பு உரையில், பொக்கானின் நிலான சன்ன பெரு திறனை மிகவும் நிலைமான வென்டமின் தலைவரும் தியல்தர பாட்டர் எனு மருத்து வமனை கம் மற்றும் பாதுகாப்பான வேரின் தலைவரும் திற்கை அமற்றாத் பொக்காவின்

ல்லும் 2014 ஆர். மாது அப்பான கேஷம் இறையபான வேல், பிருந்து இயக்கு பான், பிருந்து 2014 ஆர். ஆர்களும் மாது அப்பான என் எம் மற்றிய பாதனப்பான கேர்த்தலையற்றின்க அப்பிருந்தி பெல், பிருந்து இறையப்பட்ட பொக்கா கன்கிட்ட கனைறா இழ மற்றும் பருதனப்பான தேர்த்தலையற்றின்க அப்பிருந்து வெல், பிருந் இறையப்பட்ட பொக்கா கன்கிட்ட கனைறா இழ மற்றும் இறையப்பிருந்து இரு இறையப்பட்ட பொக்கா கன்கிட்ட கனைறா இழ மற்றும் இறையப்பிருந்து இரு இறையப்பட்ட பருத்து கனை அடந்தி வரத்திலு. பலிறில் பிருந்து இரு குறியப்பிருந்து வெல், பிருந்து வெல், பிருந்து விருந்து விரு மன்றைகளும் நன் களை அடந்தி வரத்திலு. பலிறில் பிருந்து இரு குறிய பருத்தவரும், நன் குழந்து வெல், பிருந்த மனைகில் நன் களை அடந்தி வரத்துது. மற்றும் இன் நிலின் பிருப்பட்ட மரத்துவர்கள். இன்றும் பிறுக்கு விருநிகள் பிருந்து மற்றும் பிறிரில் பிறி வருது அன்றுறை அனைவு வரல் பிருந்து இறின்பு மற்றும் விருக்கு விரு இரு தற்பாது மரத்துல பிருப்பிருந்து விருக்கு விரு கல்துரி மரத்துவலமைன் கன்னம். விருநிக இறையப்பிருந்து விருப்பிரு விருக்கு விருக்கு வரைமாக தல் வெல்ட்டில்லப்பிருந்து கல்துரி மரத்துவலமைன் கொண்டி விரும் வரத்தை விருதி பெற்று கை தவர்திது போர் கார்க்கு வரு புரு கல்துரி மரத்துவலமைன் கன்னம். விருறி பிருதல் பிறிப்பிரு விருப்பிரைகள் கேன்கு வேன்றுகள்கும் வரு ஆறி பார்களு அடில் வரை கல்துரி மரத்துவற்றது பிரப்பட்ட துறையைக் வேன்றுக் விருதின்றை வருக்கு வரைது விருப்பிது கைகுப்பார்க் வரைது வரத்துவற்றது பிரப்பட்ட அனா மற்றும் பிராக்கு சேவைகில் வண்டுறின்றின்றும் தல் பார் இன் குற்றுக் பிரப்பட்ட அன்றுக்கு பிரப்பின் விரத்தி விரப்பிற்றுறை வரை இன்று போர் காற்து கல்குறில் பிறிப்பிருக்கு விரப்பில் விரப்பிருக்கு சேவைக்கில் வண்டுற்று விரப்பாற்கள் அன்று கல் வரத்து கல்குறில் பிறுற்று கல் விரப்பிருறை தல் விரப்பிரு பிரப்பில் கலை வரைது விரப்பிற்றுக்கு வரை விரப்பிர்கள் விரப்பால் வரத்து கல்குறுக்கு விற்று விறப்பில் விரப்பிருறைக்கு விரப்பிற்றைகள் கண்டிறு விரப்பிறுறை விரப்பிற்று விரப்பில் விரப்பிற்று

Westminster

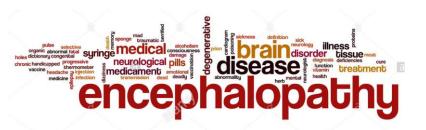
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Hospitals



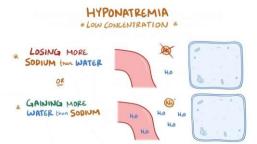


Clinical Case Study

Rajarajeswari Multi-specialty Hospital, Dindigul

A 44 years-Old female patient was admitted to CIPACA's ICU with Encephalopathy and Shock. Basic Investigations were done, report shows severe Hyponatremia. Patient was managed with Inotropes and other Supportive. Patient has improved Clinically and then the patient was discharged on Day-5.







Dr Vignesh Raj MBBS, MS Managing Director Rajarajeswari Multi-specialty Hospital



Dr Gawaskar MBBS Unit Incharge Rajarajeswari Multi-specialty Hospital



Dr Syed Ali Fathima MBBS Duty Medical Officer Rajarajeswari Multi-specialty Hospital, Dindigul

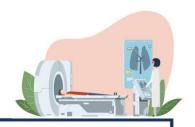
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Clinical Case Study

Aarogyam Hospital, Sambalpur Odisha



43 year-old male who was admitted to CIPACA's ICU. His CT thorax showed BILATERAL MULTILOBAR PATCHY GROND GLASS OPACITIES OF UPSHARP MARGINS PREDOMINANTLY IN PERIPHERAL SUBPLEURAL REGION. CORADS 5. CT SEVERITY 14/25. The patient was later managed in SARI ICU with Non invasive mechanical ventilation post which the patient's condition got improved and was then discharged from ICU.



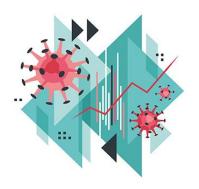


Dr Bhabani Shankar Behera MD ICU-Incharge Aarogyam Hospital, Sambalpur, Odisha



Dr Praveen Kumar MBBS Duty Medical Officer Sumathy Hospital- Villupuram





Nursing Case Study: COVID-19 Pneumonia with Depression Disorder and Parkinsonism

Introduction:

Patient Name: Mrs. Sumathi

Age - 68 years

Date of Admission- 12.04.2021 at 10.55PM

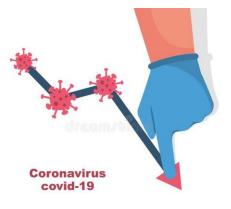
Provisional Diagnosis: Type 2 DM with SHTN with Old pulmonary tuberculosis with Parkinsonism

Final diagnosis: COVID-19 Pneumonia, Depression disorder, Parkinsonism, Old PTB, HTN, DM-II

Abstract:

Mrs. Sumathi was brought to casualty on 12.04.2021 with the complaints of breathing difficulty, generalized weakness since 2 days. She had a history of running nose since 2 days accompanied fever for the past 4 days. She was admitted to triage ICU under general medicine due to suspect reasons. RT PCR swab was sent and results were awaited. Psychiatric/ Neurological opinion was sought and patient was counseled by respective team of doctors.

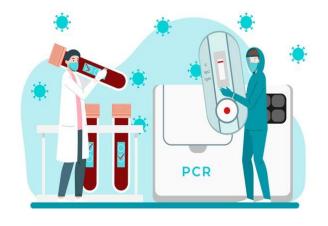
Mrs. Sumathi was brought to casualty on 12.04.2021 with the complaints of breathing difficulty, generalized weakness since 2 days.



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Background-

On admission dated 12.04.2021, patient was on NIV with FiO2 -70 PEEPS- 6, PS – 12 her vital signs showed a body Temp: 100.2 degree F, PR: 90b/min, RR: 44b/min, SPO2: 90%, BP: 130/90mmHg, GCS: 9/15



After receiving RTPCR positive reports, the patient was shifted to COVID - ICU where she was kept in close monitoring in special respiratory nursing care. IV fluids were started & Ryle's tube insitu and urinary catherization were done. Consultant's orders were followed and routine investigations were carried out (observed-CRP- 81mg/dl, D- Dimmer - 3590 were increased). Inj: Clexane 0.6ml, inj: Remdisivir 100mg was started. CT Chest showed extensive granulous opacities whereas CT Brain showed – age related atrophic changes, blood culture showed staphylococcus aureus grown. Bed sore was noted on the right side of the gluteal region with grade II. The patient was in alpha bed with everyday aseptic dressing being done. Position of the patient was changed in every two hours coupled by back care, which, too was rendered to the patient in every 2 hours.Perineum care was given daily and the patient was administered Nebulization every 8 hourly. Ryle's tube feeding was given every 4 hourly.

On 25th April repeat RTPCR tested and reports turned to negative.

On 26THApril patient general condition had improved considerably upon discharge. Patient was found to be hemodynamically stable., post which she was discharged .







Conclusion

The Patient was diagnosed in early stages of COVID- 19 because of which prompt treatment could be initiated and the patient got eventually discharged maintaining room air saturation and other vital status. The patient attenders were very satisfied by the effective and timely nursing care provided to the patient. They appreciated " CIPACA's nursing team" for their hard efforts and moral support which helped in patient's speedy recovery.



Ms. Moirangthem Chanchan Devi M.Sc Nursing, Ph.D Scholar Nursing Supervisor Madha Medical College and Research Institute, Chennai

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I may be a mother and a wife but before that I am a nurse and for me saving my patients' lives is my topmost priority.

Rose Mary has been working as an ER Nursing Supervisor for Sri Narayani Hospital and Research Centre, Vellore for past 1year. Having finished her GNM from Eshwari Bai School of Nursing, Secunderabad in the year 1999, Ms. Rose is not only a frontline healthcare worker, tending to hundreds of patients flooding the ER every day since April 2020 to till date, but at the same time, she is also a wife and mother, taking care of her family diligently. However, she is never scared to risk her life as she believes that helping the humanity is the world's noblest work.

Q 1. Most of the ICUs and Emergency wards in hospitals are converted to treat Covid-19 patients. How do you feel about this? How has this changed your life as a frontline worker?

Mary: Life is unpredictable so we must always be prepared for the worst. Not giving up and striving to uplift the mankind with your best has always been my motto and this is something which I don't just preach but also follow whole-heartedly. I have been working and dealing with COVID patients for the past one year now. Even though the work (treating the covid patients) is very challenging and risky, but I prefer never giving up. Since all the wards and ICUs are now converted to treat COVID patients, I honestly feel that I need to be more careful while rendering patient care. I see hundreds and thousands of people suffering every day because hospitals are ot equipped with enough number of beds to treat the critically ill patients, gasping for oxygen or ventilator support. While the COVID census keeps on increasing by each passing day, it is alarming to see how the mentally stressed out the patients are.

A Warrior, A Nurse, A Wife And A Mother!

Q 2. But apart from being a Nursing Supervisor of a frontline worker, you are also a mother and a wife. Every day, when you go back home, do you ever feel scared being a COVID warrior yourself? How do you take care of them in this crisis situation?

Mary: I may be a mother and a wife but before that I am a nurse and for me saving my patients' lives is my topmost priority. I remember when I first passed out from my GNM course; I was overjoyed and I pledged never to compromise anything for my noble profession. But it will be dishonest of me to say that I don't feel scared or worried about my family. Yes, ofcourse I do. It's my responsibility that my family feels safe and secured. So, even though I take precautions and all preventive measures by wearing PPE suits and other safety guards, somewhere I feel this uncanny fear of getting infected as well. Therefore, to take care of my family with extra care and caution,I use handrubs and herbal products to increase my family's immunity and to make them ready to fight this war.









As a ER nurse, I receive patients unexpectedly, I don't even have the time to check how many hours I had been working.

Q 3. Extended working hours, overloaded emergency, how do you manage it all? How do you motivate yourself not to give up even if there is a lot of stress?

Mary: As a ER nurse, I receive patients unexpectedly, I don't even have the time to check how many hours I had been working. In this pandemic situation, the workload is more than ever. We receive more Covid posiive patients, however, we don't mind the overloading of patients since we all work together as a team to give the best of the care to the patients struggling to get well soon. But, sometimes, the physical and mental exhaustion gets the best out of me for which I need some relieving leave days in between the days I work to free myself from the stress. I motivate myself everyday and am confident enough to keep saving lives like this.

Q 4. We see patients and patients' families fighting for beds and ventilators outside the Government as well as the Private Hospitals every day. What do you feel when you see patients lining up outside, waiting to get treated but much to your dismay, there are no beds? How does it affect you mentally, not being able to give patient care equally to everyone?

Mary: In emergency ward, there are plenty of COVID patients coming in everyday. Due to insufficiency of beds to cater to both stable and unstable patients, they really suffer and sometimes we often encounter patient attenders behaving arrogantly with the staffs. When managing all these situations, I feel really sorrowful towards the patients' condition deteriorating due to the unavailability of beds. I feel all the hospitals should take appropriate action to have extra infrastructure to deal with such pandemics. For example, when we receive COVID positive cardiac arrest patients, we do the required treatment, revive the patient and secure patient in ventilator but beccause of insufficiency of beds, we are compelled to refer the patient out to some other hospitals. At these times, the patient attenders get really depressed and sometimes patient may be declared dead in ambulance itself. Thinking about the rising mortality rate due to infrastructural deficiencies makes us feel really sad.

Q 5. Teamwork is very important during tough times. How do you motivate and manage your nursing team during crisis times?





It's my humble advise to the public to stay home unless they have a necessity to come out of the home every day.

Mary: An effective **teamwork** is essential for patient safety as it minimizes adverse events caused by miscommunication with others caring for the patient, and misunderstandings of roles and responsibilities. In crisis times and even when receiving emergency sick patients, the team we have inside the ER will rush to start the care required to treat the critically ill patient. I will always accompany them and guide them as a core team member and at the same time, I will also motivate the staff to take over all the needed protocols we maintain in the casualty. Teamwork is really a great strength in hospital, especially in an emergency ward. Our main goal is to save as many lives as possible so that they can go back to their families at an earliest.

Q 6. What will be your advice to general public to keep themselves safe and protected during this second wave of pandemic? Give some clinical/ home remedy tips.

Mary: As a healthcare worker, it's my humble advise to the public to stay home unless they have a necessity to come out of the home every day. Using handrubs and masks will reduce the spread of the virus. Social distancing and covering the cough and sneeze with a tissue or handkerchief will stop the infected droplets to spread in air. Besides researches are going on, the second wave of the mutated Corona virus having more capability to spread the infection faster it seems. So, public should take this pandemic situation more seriously and conductively as a responsible citizen of India to eradicate this Covid-19. Home remedies to manage and prevent the Covid conditions are using local herbal products like pepper, cumin seeds and turmeric as a cheaper antibiotic daily to increase immunity and keep us more safer from virus spread.





Ms. Rose Mary G.N.M Nursing Supervisor Sri Narayani Hospital and Research Centre, Sripuram, Vellore





I MAY BE YOUNG BUT I AM A WARRIOR!!





Q1. Covid-19 has shook the entire world, especially if we talk about the healthcare system around us. What is your thoughts, as a Unit Coordinator, on managing a Covid ICU from an administrator's point of view as well as a frontline healthcare worker? How do you find it different from your job role prior to pandemic?

Rantu: Covid 19 has impacted our healthcare system in every worst way possible. Lack of emergency resources, infrastructure has altogether affected millions of lives around us. Now-a-days, managing beds at our hospital and also taking decisions which patient should get admitted and which patient to receive isolation care has become an integral component of my daily life. Earlier, things were only confined to performing daily general admin work but running covid ICUs demand more commitment and mental strength, especially when you see patients gasping for oxygen. Rantu Paul has been associated with CIPACA since 2018. Hailing from Cooch Behar, West Bengal, he has always been passionate towards saving lives and making a difference in the lives of less unfortunate. His dreams took the shape of reality when he got appointed as the Unit Coordinator for Aarogyam Hospitals, Odisha from 28th September 2020. Since, then he has been taking care of managing the entire administration of the Covid ICUs.

But this is not all. It breaks my heart when I see patients lying in isolation for days without even contacting their family members. This is very heartbreaking and honestly should not happen to anyone. So, our team, from now and then, ensures that we provide them emotional support by boosting and encouraging the patients or by connecting them to their family members through the wide screens of our smartphone.

It breaks my heart when I see patients lying in isolation for days without even contacting their family members





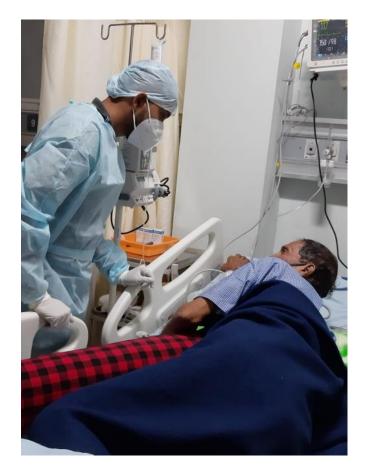
Q3. With ever increasing crisis at hand, it is also to be considered that the financial burden incurred during ICU Hospitalization is also increasing for the patients. How do you think we can help the patients in such situations? How is CIPACA helping to reduce the financial stress?

Rantu: ICU has always been a scarce and expensive service, considering how multidisciplinary and complex it is in its operations. However, our ICUs have always been affordable for the general public, especially because we provide critical care services to the rural community of the country.

But Covid has changed it all. Everywhere we go, we find ICU charges to be extremely high. But, we have customized our prices in such a way that maximum financial leverage can be given to the patient's family.

With this, it also raises the question that how much are we financially viable to look after our healthcare needs in times of emergency. Therefore, I would recommend everyone to avail for health insurance so that such crisis problems can be solved. Q2. These days, you often hear on the news that we are lacking ICU beds and equipment to treat the overflowing patient inflow. Now that each and every hospital is suffering crisis due to lack of ICU beds and equipment, how can you emotionally support your people and keep them motivated?

Rantu: Well, this pandemic was something nobody had imagined. More so, the way it spreads to the community at such a fast speed is unimaginable. However, rather than regretting or blaming each other for this crisis, we should come up with proper plan where we can categorize which patients need ICU admission and who all can recover from normal ward itself. It is very important that ICU care is only given to those who are in utmost need since it is a scarce commodity.









Q4. When you go for rounds inside the Covid ICU, you are required to wear PPEs. But wearing PPEs is not a joke. How do you tackle this uncomfortable situation?

Wearing PPE is like covering our bodies with plastic covers. But, wearing PPE is not a problem but the fact that you are not able to drink water or consume food is very uncomfortable. Also, the fact that everytime we wear PPEs, we feel like we are burning from inside.

Q5. As an administrator who helps patients all the time, how do you keep yourself mentally strong when you see families losing their loved ones due to Covid? Does it also question the safety of your family? Give your thoughts on this.

Rantu: It is commendable to see our staff nurses helping the patients 24x7, without taking proper rest or even worrying about their own well-being. It's the hardest and probably the most saddest part to keep oneself mentally strong cause every day we are see so many people succumbing to death because of Covid and we are unable to do anything for them since there are no proper drugs to help them recover from this disease completely.

But still we have to stay strong and fight this war with all our might, not the physical one but the mental one. I have prepared myself mentally in such a way that I can deal with the stress with a smile on my face. Although there would be times where I will breakdown but I know how to gear myself up and serve the ailing.

Sometimes, I do think about my family's safety and pray that they always stay safe and take good care of themselves. The fact that I am not there with them also makes me scared and worried at times.

Although there would be times where I will breakdown but I know how to gear myself up and serve the ailing.









Q6. We see many youngsters going out, partying with friends, and that too without wearing a mask. As a youngster and a frontline healthcare worker yourself, what advice would you like to give to the younger generation so that they can keep themselves safe and protected during this pandemic times?

Rantu: The Only message I would like to give to the youngsters is that if they love their families and want to spend a happy and long life with them together, kindly stay at home and don't go out unless it is very urgent. Moreover, get vaccinated as soon as possible and wear masks and sanitize yourself from time to time. If you survive this pandemic, you will get million more chances to enjoy and party but now is not the right time. Your carelessness can cost someone else's life!





Mr. Rantu Paul BBA (Hospital Management) Unit Coordinator Aarogyam Hospital, Sambalpur, Odisha









Α Useful Guide to dealing with Anxiety in Covid Times

Considering how we're in the midst of a worldwide pandemic with many places partially shutting down while others struggling to reopen safely, it's frightening to see some of us are residing in areas where the infection rates are getting worse.

Every day, all of us are watching the headlines and wondering, "When is this going to end?"

For many people, the uncertainty surrounding coronavirus is the hardest thing to handle. This all the more adds reasons for the situation to worsen and spiral out into overwhelming fear and panic.

But there are many things we can do—even in the face of this unique crisis!

To begin with, we need to manage our **anxiety and fears.**

Wondering How? Follow the following simple 4 steps.



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1. Stay informed and reduce media consumption

It's very important to stay informed about what's happening in our community and keep away from hordes of misinformation and rumours that keeps spreading around.

- Stick to trustworthy sources such as the CDC, the World Health Organization, and local public health authorities as the information you'll receive from them will be authentic and non-fabricated.
- If your anxiety is an ongoing issue, limit your media consumption to a specific time frame and time of day (e.g. thirty minutes each evening at 6 pm).
- Be careful what you share. Do your best to verify information before passing it on. Snopes' Coronavirus Collection is one place to start.

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It's very important to stay informed about what's happening in our community and keep away from hordes of misinformation and rumours that keeps spreading around.



2. Focus on the things you can control

A lot of things in our life are outside of our control, including how long this pandemic will lasts how other people behave, and what's going to happen in our communities.

When you feel yourself getting caught up in fear of what might happen, try to shift your focus to things you can control.



DOs

DON'Ts

•	Washing your hands frequently (for at least 20 seconds) with soap and water or a hand sanitizer that contains at least 60% alcohol.	•	Touching your face (particularly your eyes, nose, and mouth).
•	Staying home as much as possible,	•	Crowds and gatherings of 10 or more people.
•	Keeping 6 feet of distance between yourself and others when out.	•	avoiding all non-essential shopping and travel.
•	Following all recommendations from health authorities.	•	Missing out on adequate sleep

19





3. Stay connected

Evidence shows that many people with coronavirus particularly young, seemingly healthy people—don't have symptoms but can still spread the virus. That's why the biggest thing that most people can do right now to make a positive difference is to practice social distancing.

- Make it a priority to stay in touch with friends and family, but, digitally.
- Face-to-face contact is like a "vitamin" for your mental health, so substitute physical meets with video chatting.
- Social media can be a powerful tool for staying connected with family, friends, acquaintances as well as with large communities, country, and the world. It reminds us we're not alone.



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Be kind to yourself and go easy if you're experiencing more depression or anxiety than usual.

4. Take care of your body and spirit

Practice self-care in the face of the coronavirus pandemic.

- Be kind to yourself and go easy if you're experiencing more depression or anxiety than usual.
- Maintain a routine as best you can. Even if you're stuck at home, try to stick to your regular sleep, school, meal, or work schedule.
- Take time out for activities you enjoy such as reading a good book, watching a comedy movie, playing a fun board or video games or cooking with your family.
- Find ways to exercise. Staying active will help you release anxiety, relieve stress, and manage your mood.

Reference

https://www.helpguide.org/articles /anxiety/coronavirus-anxiety.htm

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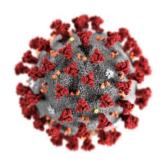




Mrs. Ida Jayasundar M.Sc (Nursing), M.Sc (Psychology) Assistant Regional Nursing Supervisor CIPACA

CEPACA 24 Hrs Emergency & ICU Services

COVID-19 Pandemic: Quick Bytes and Information

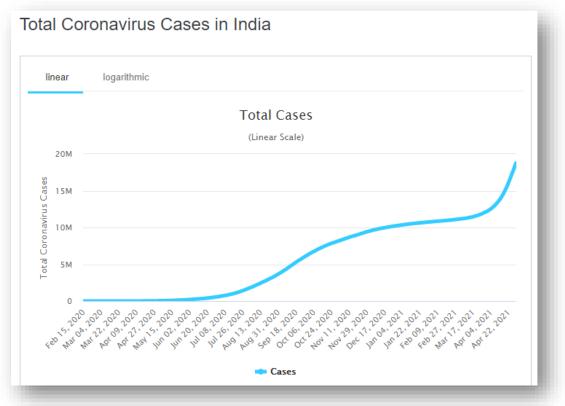


Coronavirus disease 2019 (COVID-19) is a respiratory tract infection caused by a newly emergent coronavirus, SARS-CoV-2, that was first recognized in Wuhan, China, in December 2019.On 30th Jan 2020, World Health Organization (WHO) has declared this as a pandemic. More than 18M people in India have been affected by COVID 19 and more than 7,000 people in India are getting affected in recent days. (Figure 1 & 2).

Vaccination in India have been started at 16 Jan 2021. As far now 9% of the Indian population have received the at-least dose 1. During this pandemic CIPACA has issued a handbook on 'Managing COVID-19 in ICU Current concepts in various editions to tackle this pandemic situation'

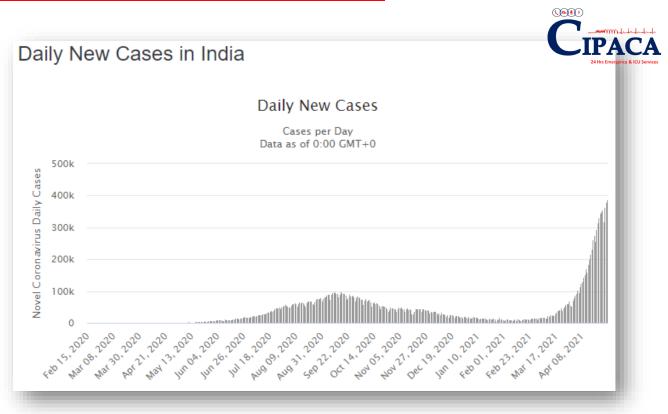
- Edition 1 (April 2020)
- Edition 2 (May 2020)
- Edition 3 (Aug 2020)

India is fighting to overcome the Pandemic with Vaccination. The data goes as below,



Source: Worldometer as on 30-04-2021



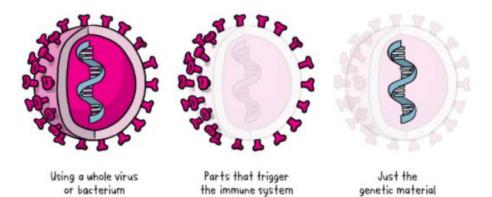


Source: Worldometer as on 30-04-2021

COVID-19 Vaccine: Quick Bytes

1. There are three main approaches to making a vaccine:

- Using the whole virus
- Parts that trigger the immune system
- Just the genetic material



There are three main approaches to making a vaccine:



2. Basic Difference between Covaxin and Covishield

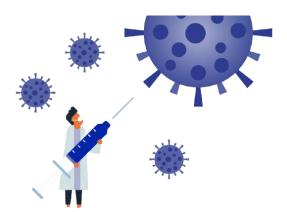
-	COVAXIN	VS	COVISHIELD
	DEVELOPED BY BHARAT BIOTECH ICMR		DEVELOPED BY SERUM INSTITUTE OF INDIA
JEL	VACCINE TYPE INACTIVATED		VACCINE TYPE NON REPLICATING VIRAL VECTOR
	EFFICACY N/A		EFFICACY DCGI: 70.42% overall
11.5	STORAGE TEMPERATURE 2-8 DEGREES CELSIUS		STORAGE TEMPERATURE 2-8 DEGREES CELSIUS
	DOSES TWO DOSES (0,14 DAYS)		DOSES TWO DOSES (GAP OF 2.5 TO 3 MONTHS)
	INDIA AVAILABILITY FIRST HALF 2021		INDIA AVAILABILITY ADAR: EXPECT FIRST BATCH IN 7-10 DAYS
VACUL	PRICE NOT DECIDED	8	PRICE ₹200/DOSE TO GOVT ₹1000/DOSE FOR PRIVATE MARKET

Source: Worldometer as on 30-04-2021



Did you know?

Covishield and Covaxin vaccines have been found to be most suited for India as they require to be kept at 2-8 degree Celsius. This makes transport and local storage of both Covid-19 vaccines safe and easy for all parts of the country.



3. Vaccination Status in India (till date)



150M							
100M							
				28 Apr 2021	Total	% of no	pulation
50M				At least 1 dose			9.0%
				Fully vaccinate			1.8%
0	24 Jan	8 Feb	24 Feb	11 Mar	26 Mar	10 Apr	28 Ap

Source: Our world in data, as on 30-04-2021

4. Side Effects of COVID-19 Vaccine

side effect vs. illness symptoms

Likely post-vaccine side effect	Possible onset of illness			
Fever lasting less than 24-48 hours	Cough			
Fatigue	Shortness of breath			
Headache	Sore throat/ runny nose			
Chills	Change in smell/taste			
کرہے۔ ساتھ Muscle or ساتھ joint pain	Fever lasting longer than 24-48 hours			

If the COVID-19 vaccination side effects persist for more than two days from start, or start more than three days after vaccination, isolate and schedule a viral test.

References:

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- Worldometer statistics on Corona Virus. Online access:https://www.worldometers.info/coronavirus/country/india/ . Last reviewed on 30-04-2021.
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Aiswarya Ravichandran

M.Sc. (Applied Nutrition, NIN) Research Analyst CIPACA





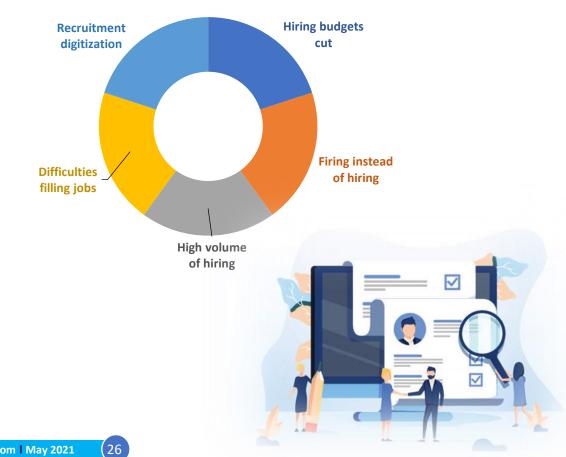
Challenges in Recruiting in times of **COVID-19: An Overview**

This global coronavirus pandemic has completely disrupted people's daily lives. It has obstructed the hiring plans for employers all over the world. Many employers are pausing their hiring plans until they see how the situation will evolve. Some of them have no choice but to shut down their business and fire their employees.

On the other hand, some industries, such as health care and logistics, are facing a sudden need for a huge number of new employees.

Recruiting in time of COVID-19: Key challenges

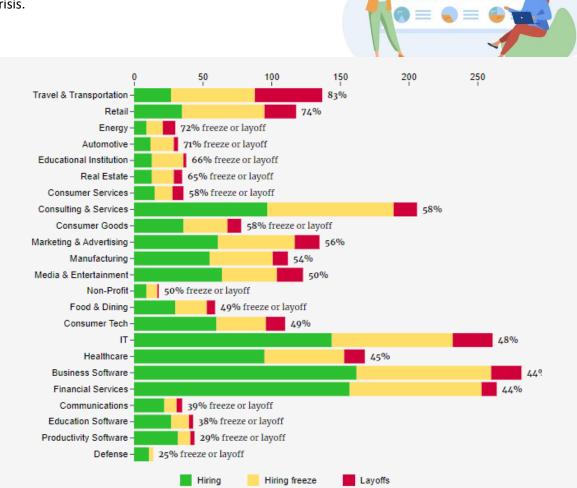
Here are the 5 key recruitment challenges caused by coronavirus pandemic:





1. Firing instead of hiring:

According to recent research from global risk management and advisory firm Willis Towers Watson, 42% of surveyed organizations have frozen or reduced hiring. Instead of hiring new employees, they are forced to fire their existing employees due to the coronavirus crisis.



2. High volume hiring:

While the coronavirus crisis is fatal for the industries such as tour and travels, entertainment and recreation industries etc, on the other hand it offers a sudden opportunity for certain other industries. Some companies are in need of additional workforce in order to support the growing need for their services. Postings for work at hospitals and other health-care jobs have also risen by 35%, according to LinkedIn's report.

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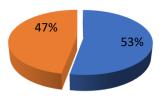
3. Difficulties filling jobs:

Many of the recruiters are facing the ongoing challenge of filling the existing open positions, especially those that were already hard to fill before the coronavirus pandemic.

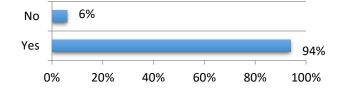
4. Digitization of recruitment

The coronavirus pandemic outbreak has completely changed the way we live and work. Offices are closed and we are all working from home - remotely. HR professionals and recruiters who want to survive this crisis have adapted to digital means of recruitment and manpower management as a whole.

According to WaveTrackR's report, there was a 47% reduction of applications on average across all industries In February 2020



Digital Impact on Recruitment during Pandemic





Mrs. Shireesha S Human Resource Manager CIPACA

Mr. Michael Stevenson B.Com Assistant Manager - Talent Acquisition CIPACA

Mrs Harini K MSW Senior Human Resource Executive CIPACA

Ms. Pooja K MA (HR) Intern CIPACA

5. Hiring budgets cut

Most of the recruiters and HR have cut down on their recruitment budgets into half.

The COVID-19 pandemic has caused unprecedented upheaval across the world. Everything from the simplest task (grabbing a cup at your favorite coffee shop), to complex decisions (how and when should your company adapt new hiring strategies), has become a challenge. But as every cloud has silver lining, there's always a solution to every problem, no matter how complex and complicated it seems.

We, at CIPACA, are too tackling the growing suppressed need to fill in increased vacancies as our ICUs get flooded with the shortage of manpower every now and then. By connecting through recruitment portals and taking full advantage of digital optimization, we are doing our best to fill in the gaps created every now and then.

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Happy Patients make us happy too!



"Saving a life in emergency" is the most noble service in the world. and **"Saving every single life in emergency"** is our dream.



Smt. Yasodha

"All doctors and nurses have been very attentive towards my mother and have given thorough treatment. The Guest Relations Executive has solved all my queries from time to time for which I extend my heartiest gratitude to the entire team."







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Mr. A.N. Shanmugam

"The medical team has given utmost care and have given us the confidence that my father's health will be improved. Tender, meticulous, affectionate and utmost hygiene care at an affordable and friendly manner"







Mr. Subramani

"Thank you for making my father feel better again. I express my heartfelt gratitude to the entire team for giving him quality patient care."





Smt. Muthammal

"The night shift doctors and nurses have been extremely diligent in giving proper care to my mother who has now recovered from the brink of critical condition. I am thankful to the medical team for their support and services."



CIPACA

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Family column





"The sense of language has also been strengthened by reciting more".

Recitation in general sense is the act of reciting from memory or a formal reading of a verse or other writings before an audience. Recitation actually means recreation of poems.

According to a famous educator, Wei Shusheng, "The sense of language has also been strengthened by reciting more". Recitation is one of the most important & effective modes of learning a language & appreciating a piece of literature.

Master Jignesh Raju (studying in 3rd standard at Sri Jadavbai Nathmal Singhvee Jain Matriculation Hr. Sec. School) son of Mr Raju, Unit Coordinator at Retteri Sri Kumaran Health Centre, Retteri is an amazing reciter! At such a young age, he has won Tamil and English recitation competitions. We wish him all the best and pray that his recitation skills can bloom more beautifully in the coming years. Enhances cognitive development in children Helps in learning phonetic sounds easily Generates curiosity and improves problem solving skills



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Behind the scenes





Human life is the most precious gift bestowed on earth. And we take every attempt to safeguard the well-being of human life.

uman life is the most precious gift bestowed on earth. And we take every attempt to safeguard the well-being of human life.

We are very happy to plant our very first **Tree** of Life on **15**th April **2021** across 5 of our ICUs

Each leaf on the enchanting tree will represent our patients who recover. And every time one of our patients recovers, we add a new leaf with their name.

As each of our **Trees of Life** grows greener and greener, so does our steadfast duty to saving lives. It will attest to our ceaseless efforts in emergency services and saving lives.

Sumathy Hospital, Villupuram











Rajarajeswari Hospital, Dindigul



Sree Kumaran Multispecialty Hospital, Oddanchatram





Retteri Sri Kumaran Health Centre, Retteri



Sri Lakshmi Narayana Institute of Medical Sciences, Puducherry



THE MOST SOCIALLY RESPONSIBLE ORGANIZATION



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