

NEWSLETTER

2nd Quarter, 2022



Executive & General Medical Check-up



In early days, people used to go to the doctor only when something was wrong. In recent years, more have been conscious about their health, prioritizing preventive care. Then, the unforeseen had happened, the COVID pandemic. At the backdrop of a health crisis, everyone has become more proactive in terms of taking care of their well-being. But beyond being advocates for hand washing and vaccination, you must prioritize regular executive check-ups as well.

Seeing your doctor regularly offers a host of benefits. It reduces your risk of getting sick, detects potentially life-threatening diseases early on, manages complications from an existing ailment, and improves your chances of recovery when you're already going through treatments. If executive check-ups weren't part of your habit before, you may be curious about other aspects of it on top of the benefits it offers. I have compiled some frequently asked questions about executive check-ups to help patients learn more about it, and more importantly, take charge of their health better.



What is an executive Medical check-up?

An executive check-up is an assessment that involves different medical evaluation aimed at preventing health problems. It's a lot more detailed than your visits to a single doctor. As mentioned earlier, taking care of one's well-being goes beyond going to the doctor for treatment. It's also about reducing the likelihood of catching diseases or addressing them early on before they progress into a serious case. With a medical assessment, the physician will recommend lifestyle changes to help you better take care of your physical health. This may include incorporating or avoiding certain food, taking medications, starting routines such as exercising, or breaking bad habits including smoking.

What are the benefits of a regular medical checkup?

Here are compelling reasons why individuals need to pay their trusted doctors a visit and have their routine physical exam at least once a year.

- I. Detect diseases early on
- 2. Increase chances of getting better treatment and cure
- 3. Keep track of health
- 4. Reduce healthcare costs over time

What does an executive check-up include?

In getting the full picture of your physical health, and executive check-up would involve different lab tests and procedures depending on your healthcare provider. But these are some of the most common:

Complete blood picture

- Liver function tests (LFTs)
- Kidney function test (RFTs)
- Lipid Profile
- HBsAg
- HCV
- Blood Grouping
- Urine RE
- Stool RE
- Vitamin D Level
- Vitamin B12 Level
- Thyroid Profile
- Blood Glucose Fasting

- Chest X-ray
- PSA
- Dexa Scan
- ECHO Cardiograph
- UltrasoundAbdomen
- Pap smear (for female Patients)
- Consultations
 - o Ophthalmologist
 - o Medical Specialist
 - o Nutritionist
 - o Dentist

Ali Medical ISO 9001:2015

Hospitals provide different kinds of packages, involving different procedures for each. Nonetheless, it's always a good idea to invest in preventive care. If one thinks about it, one can have more financial gains in the long run.

- Avoiding treatment costs down the road since the executive check-ups reduce the risk of getting sick.
- Steering clear of higher hospital bills if one does get sick because executive check-ups can help detect lifethreatening conditions early, while managing existing conditions. Taking a proactive approach in caring for one's physical well-being keeps their financial health in check as well.

Who doesn't want to be in good health so they can spend more time with the ones they love and care about, doing the things that make you happy? Experts in medicine and health, clinical and concierge staff members are dedicated to seeing our patients glow with wellness.

Ali Medical Centre is always ready to assist anyone, thanks to its full roster of trusted physicians and a wide range of procedures and tests available to those who need a medical checkup. Do not hesitate to reach out and set an appointment today or schedule a consultation with Ali Medical Centre and Drive-Thru Diagnostic.

Bariatric Surgery, Confidence Boost and Self-esteem

In the present times people tend to change themselves and their lives in various ways to meet their standards of satisfaction, while some who don't have health restrictions, work easily and smoothly reach their desired goals, others wish for drastic changes to take place overnight either due to failed attempts resulting from health issues or the level of impatience they have.

One of the changes that people want is reduction of weight in most effective way but in lesser time. Amongst different successful methods, one that is on rising trends with maximum results with in no time, is Bariatric (Mini Gastric Bypass) Surgery.



Ali Medical Centre, with maximum possible facilities available, has one of the best teams of doctors and Dr. Atif Inam Shami (Laparoscopic General and Bariatric Surgeon) needs no introduction is his field of specialty.



As Ali Medical Centre receives and deals with international clients as well, one such interesting case luckily happened on 31st March 2022 where a Scottish lady named Dawn Jennifer Clark who had approached Dr. Atif Inam Shami through her good friend Dr. Rutledge. Dawn was type I diabetic with 121 kgs weight and 44 BMI which was causing her associated health issues. She could not get her surgery done in UK due to premorbid and high cost. After several weeks of online consultations Dawn came to Islamabad (Pakistan), got admitted in Ali Medical Centre and had her MGB done. After being clinically stable she got discharged with detailed instructions about diet and life style changes she needed to make post operation.

According to Dawn, she was taken good care of, experienced no pain during or after the surgery, had her insulin pod lowered to 0.75 from 1.3. She also appreciated the efforts done by Ali Medical Center and the teams involved in her care. Dawn left with wonderful reviews about the hospital and the surgeon and also wished well for the both.

PICU Stats & Success Rate

Aliazay Noor, a 7 years female child presented with complaint of high grade fever for two weeks rash and very sore red swollen lips and red eyes. She was in extreme pain and was unable to eat or drink.

Patient visited multiple hospitals and was misdiagnosed as measles. Oral augmentin and cefotaxime were advised by different physicians. On examination she was sick looking, in pain and febrile with patchy maculopapular rash involving face upper torso and limbs. Lips were extremely red, edematous with sloughing of skin oral thrush and multiple oral ulcers. She was unable to open her mouth even for drinking water. Her eyes were congested hyperemic. Based on clinical findings and history patient was diagnosed and managed as per protocols of Steven Jhonsan syndrome.





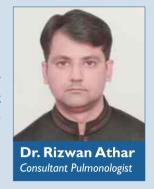
Particular care was taken off for her eyes as corneal ulcers can lead to corneal scars and severe impairment of vision. Meticulous care of lips and oral cavity was done by Nursing team. Patient improved with marked clinical response after 7 days of stay in PICU.

All PICU doctors and nurses took great care and did dedicated efforts to help the little princess get back to her routine life. She was discharged in very good health. Mother was hey happy with the services provided by Pediatric team and nursing staff. She presented for follow up after 3 weeks and was in in excellent health.



Obstructive Sleep Apnea

Obstructive sleep apnea (OSA) is a form of sleep-disordered breathing characterized by upper airway collapse resulting in obstructive apneas and hypopneas with desaturation. It occurs in 3-5% of the population, mostly in overweight, middle aged men. Its prevalence increases with age, menopause obesity and endocrine conditions such as a acromegaly and hypothyroidism.



Its symptoms are loud snoring, daytime sleepiness, unrefreshed sleep, morning headache nocturnal chocking. It is diagnosed by sleep studies. Untreated OSA leads to complications like anxiety and depression, hypertension, diabetes mellitus, ischemic heart disease, stroke fatty liver, cognitive deficits.

Ali Medical Centre has developed a state of the art sleep lab for diagnosis of OSA and other sleep related disorders. Effective treatment is being provided after OSA diagnosis under the supervision of renowned consultant pulmonologist Dr. Rizwan Athar at very affordable and cheap price as compared to other public/private hospitals in Islamabad/Rawalpindi.

Healthy Body Weight Management

The prevalence of obesity has been increasing rapidly in the last two decades or so. According to the World Health Organization (W.H.O.), more than 40% adults aged over 18 years worldwide are overweight while more than 13% are obese. Additionally, around 40 million under 5 children suffer from overweight or obesity. According to a recent survey, 26% women, 19% men and 9.5% under 5 children in Pakistan suffer from obesity.

Although body weight is not the only indicator of human health, yet it is one of the most important indicators of an individual's overall health status. It is thus extremely important to try and maintain an ideal body weight as per the sex, height and body frame size. As soon as an individual starts gaining excessive body weight, he/she is put to an increased risk of various non-communicable diseases specifically Cardiovascular diseases, Diabetes Mellitus, Hypertension and certain types of cancers.





Weight management is defined as the techniques involved in attaining and/or maintaining a certain body weight. The most important components of weight management include diet, physical activity, sleep and stress levels. All of these components are interlinked with each other in one way or the other. Healthy eating includes having a balanced diet on daily basis, not excluding any of the food groups from the diet and eating as per your caloric requirements, which primarily depend on the age, body weight, height, physical activity and physiological state of an individual.



The importance of physical activity in the maintenance of healthy body weight is second to none. The World Health Organization recommends at least 30 minutes of brisk walk, five days a week. Similarly, in order to maintain a healthy body weight, it is important to have 7 to 8 hours of good quality sleep and avoid stress as much as possible.

It is extremely important to highlight here that various fad diets such as Atkins diets, Detox diet, Banana diet, Boiled egg diet and many others are extremely low in calories and deficient in a lot of nutrients. People who fall a prey to these fad diets, may benefit from rapid weight loss but that happens for a very brief period of time. Moreover, these diets are unsustainable, carry several risks of nutritional deficiencies and more often than not, result in a poor nutritional status of an individual. Therefore, fad diets should never ever be followed to achieve the desired weight loss.

The only scientifically recommended way of maintaining body weight is to have a portion-controlled balanced diet coupled with regular physical activity, good sleep and stress-free life. It is also worth mentioning that while on a weight loss journey, losing maximum I pound of body weight per week is recommended. Trying to lose more than this though may result in rapid weight loss, yet it will have long term implications on an individual's overall health status.

Ali Medical Centre's official Eid Milan Breakfast!

Ali Medical Centre (AMC), Islamabad, hosted its official "Eid Milan Breakfast" on May 21, 2022, with over three hundred attendees from all departments, senior management, and consultants.

The event was held at AMC premises and included live-cooking buffet. The arrangements of the event, from the décor to the catering services, everything was outsourced, and the menu included Pakistani traditional breakfast items.

The "Breakfast", aimed to create a comfortable and casual environment for the employees to get together and socialize. It was likewise, a symbol of appreciation from the Top Management towards the employees, for the effort and dedication shown throughout the year. Chief Guests, Mr. Ali Raza Alvie (The Chairman) and Dr. Hassaan Khan (The CEO), commended participation from all the staff in making the event memorable.



































Academic Session In Ali Medical with Health Services Academy Isb



Students in every field and at any stage of life needs to get updated about the new or the current methodologies being practiced in different institutions for which various sessions are required and initiated, one of which is academic session (purely theoretical) comprising of Q &A.

By the approval of management, one such session was conducted at Ali Medical Centre on 15th June 2022 by a qualified team of students from the Health Services Academy Islamabad (HAS) hailing from different areas of Pakistan. Being a multilingual team they had a smooth mode of communication with different teams of concerned departments.



The HSA team was comprised of 6 doctors, led by Dr. Syed Atta UI Munamm. The team of AMC included Mr. Jawad Siddiqui (GM Administration), Ms. Sameena Khursheed (Head of QIPS), Dr. Bushra Tabbassum (AR-MSA) and the Nursing department.

The HSA team visited various areas of the hospital where they had taken pictures for academic purpose, had their questionnaire filled and interacted with on duty staff of different departments. The team was facilitated by Mr. Shumail Ahmed (Nursing Coordinator).

The main Q & A was held between the teams of HSA and AMC. The session started from the aim of building this institution (based on Ali Trust) to its future expansion along with its sister organizations and the message of helping the needy under its umbrella was conveyed clearly.

The students were provided with complete information needed to fulfill the purpose of their visit making an exception to the confidential information to which the organization holds the rights. The session came to an end with group photos of both the teams together.





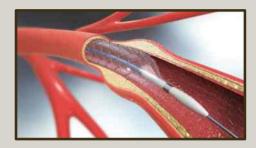
Vascular Surgery - An Introduction

Vascular diseases make a sizable portion of the health problems worldwide. According to one study published in Lancet Glob Health 2019; Peripheral Arterial Disease (PAD), affects about 3% of the total world population. In another study published in Ann Vasc Surg 2015 Feb;29(2): approximately 6.5 million people age 40 and older in the United States have PAD which makes about 16% of the total population.

Vascular surgery deals with these diseases commonly,

Chronic Ischaemia of the Limbs: By far the commonest problem, this commonly affects the lower limbs but can affect the upper limbs as well. The most common cause is Atherosclerosis but Vasculitis and Spastic disease are also seen. Patient feels pain on walking and has to stop after walking for some distance. The same disease in advanced stage causes gangrene and loss of the limb. A "Bypass Procedure" or "Stenting" will relieve symptoms and save the limb.





Acute Ischaemia of the Limb:A common emergency seen which can cause gangrene and loss of the limb within hours. This can affect the lower as well as upper limb or gut. This occurs due to sudden blockage of the main artery by a thrombus which is made in the artery or travels down from the heart in a patient suffering from Atrial Fibrillation, Valvular Heart Dissease or following a big Myocardial Infarct causing a no contractile segment in the myocardium.

This causes sudden onset pain and discolouration of the limb followed by gangrene and loss of limb. All this happens in hours. Gangrene may ensue in 6-8 hours. A timely intervention, Thrombo-embolectomy, within 6-8 hours will save the limb. This highlights the importance of being available and prepared to deal with this kind of emergency.

Carotid Artery Disease: Stenosis of the carotid artery can cause Stroke which may manifest in the form of Hemiplegia, Dysarthria or complete loss of speech or Quadriplegia thus causing unimaginable disability. Stroke may be permanent without any improvement at all. Stroke is the third leading cause of death in the United States approximately 83% of strokes are ischemic (thromboembolic), whereas 17% are hemorrhagic. A timely detection of the stenosis and its removal by Carotid Endartrectomy, or revascularization by Stenting may evert this disaster. The massive, multicenter trials like North American Symptomatic Carotid Endartrectomy Trial (NASCET), European Carotid Surgery Trial (ECST), Carotid Revascularization Endartrectomy verses Stenting Trial (CREST) and Asymptomatic Carotid Surgery Trial (ACST I and ACST2) support the claim. One very interesting thing about carotid disease is that it should best be detected and treated before any symptoms appear because once the patient has had a stroke; any attempt at revascularization may not reverse the damage, that's why we have massive, multicenter Asymptomatic Carotid Surgery Trials (ACST).

Aortic Aneurysmal or Occlusive Disease: Aorta, the mother vessel in the body from which all other vessels arise may get aneurysmal which apart from causing pain and the erosion of the surrounding organs may ultimately rupture causing sudden death. Abdominal aortic aneurysms (AAAs) account for at least 15,000 deaths per year in the United States, in fact these figures must be grossly under estimated as many patients with the ruptured aortic aneurysm will not even make it to the hospital. An occlusive disease will cause severe ischaemia of the limbs and viscera including gut and kidneys.

Repair of the Injured Vessels: Vessels may get injured i) primarily in an accident or an assault, ii) may complicate a fracture, iii) may get injured in another operational procedure or iv) may get injured during catheterization for haemodialysis or during angiography. I can, personally, recall repairing once Superior Mesenteric Vein and at another time the Coeliac Trunk at its origin from aorta in Whipple's procedure, repairing Aorta and at another time the Common Iliac Vein in lumber disc operation, repair of Iliac vessels in pelvic surgery and many times repairing for Cath injuries. Injury of the vessel in an accident or in an assault is a common occurrence and very often it is a joint venture of the vascular surgeon and orthopaedic surgeon.



Vascular Access for Haemodialysis: Making vascular access, AV Fisula, for haemodialysis is perhaps the most commonly done procedure by a vascular surgeon. It may be a Primary vascular access in which Radial or Brachial artery and the Cephalic vein is used to make the fistula or may be a Tertiary vascular access in which Basilic vein is trans positioned or a Synthetic Graft is used, a fairly lengthy and technical procedure. A successful vascular access procedure gives the renal failure patient a chance to live. The Renal Failure is quite common in Pakistan. The incidence in Pakistan was noted 100 per one million population every year (SIUT figure). Every year 15000 patients are added to the pool. In a tertiary care hospital in Islamabad, about 3000 dialysis are done every month and the patients include from young children to very old.

Varicose Veins: Varicose veins is a very common problem. In general population in Great Britain, 20–25 per cent of women and 10–15 per cent of men have visible varicose veins (British Journal of Surgery, Volume 81, Issue 2, February 1994). In the US, approximately 23% of adults have varicose veins (JAMA. 2012; 308:) and if spider telangiectasias and reticular veins are also considered, the prevalence increases to 80% of men and 85% of women (N Engl J Med. 2006; 355:). Not only that these look ugly but these cause pain affecting the normal daily work and in advanced cases cause serious complications like bleeding and varicose ulcers which make a person handicapped. The treatment of varicose veins is, essentially, surgical. Up till recently these have been treated by ligating and then stripping the Great Saphenous vein which needs incisions and open dissection and make a tunnel in the course of stripped Great Saphenous vein which gets filled with blood and slowly heals back to normal, the varicose tributaries are removed by Stab Avulsions. Now with, new technology, the vein is ablated at its site by thermal energy delivered by Radiofrequency (RF), thus called RFA, Radiofrequency Ablation. No cuts are made, no stripping is done, an RFA fibre is passed into the vein under USG guidance and lodged properly and is then slowly withdrawn as the vein is ablated. This is generally done under local anesthesia as a day case. We have acquired the equipment in Ali Medical Centre and will soon start doing cases. Cost is a big issue but in due course of time patients will be convinced with the advantage.

Diabetic Foot: Diabetic foot is a huge problem and it is indeed surprising that apparently a rather lesser problem not as big as Aortic Aneurysm or Limb Ischemia; it takes the biggest share of the budget for vascular services. In UK, the National Institute for Health and Clinical Excellence (NICE) figures are that 25% of all the Diabetic patients will have a minor or major foot problem and 7 persons in every 10,000 will have a major amputations. The figures are alarming and one has to keep in mind that all this is in a developed country like UK where facilities are much more as compared to a developing or under developed country. Almost 50% of the diabetic have ischemia of the leg too and need management for the ischemia, surgical, endovascular or medical as a prerequisite for the proper treatment of the foot, otherwise it may end up in an amputation.



Role of Imaging: Management of vascular cases is heavily dependent on good imaging services like, US Dopplers, CTAngio, MR Angio (MRA), and Digital Subtraction Angiography (DSA) or Conventional Angiogram. It will not be an over estimation to say that management of vascular cases is not possible without this support.

A Team Work: As we all know that a vast majority of the vascular cases are also suffering from Diabetes Mellitus, Hypertension and Ischemic Heart Disease and many from Chronic or Acute Kidney Disease; it is not difficult to understand that a proper management and care of a vascular disease patient will require a good support from Cardiology, Nephrology, Endocrinology, Neurology, along with and competent Anesthesia and ICU team.

Looking forward: In Ali Medical Centre, we have already started doing the complex and lengthy vascular procedures like Fem-Pop Bypass and Fem-Distal Bypass procedures. We have acquired a complete set of the instruments for vascular surgery. We have acquired the Radiofrequency Ablation equipment for varicose veins. We, very eagerly, look forward to upgrade our CT and MRI as the practice of vascular surgery is very heavily dependent upon imaging. I must express my gratitude for the support from the hospital administration which is really commendable.

Spine Injury Case

Ali Medical ISO 9001:2015

IS PATIENT'S RECOVERY POSSIBLEAFTER SPINE INJURY?

Spinal cord injuries (SCI) are one of the more frequently occurring injuries due to high energy trauma. In our country fall from heights is the most common cause. Furthermore, it affects the most productive part of population i.e. I 6-30 years old.

Although, complete recovery after severe spinal cord injury is rare, It takes a team effort to manage these patients in helping them achieve maximum recovery potential. The key members of the treating team include, Spine Surgeons, Anaesthetist, Intensivists and Rehab Specialist. The recovery path is slow and a dedicated, consistent effort is needed by every member of team. The recovery period can vary from 9 to 18 months. However maximum potential is achieved within first 06 months if the patient is correctly managed.



Dr. Yasir Umer
Consultant Orthopaedic
& Spine Surgeon









Zargham, is one of such patients managed by us. He unfortunately had a similar injury while he was visiting his village for vacations and sustained a fall from about 25 to 30 feet. He was unable to stand or move his lower body at all. He was immediately taken to a government tertiary care hospital in Islamabad where his treating surgeon told his family that there is no chance of recovery even after surgery. He was then shifted to Ali Medical Center where it was found that, he had no motor power in his lower limbs but sensations were preserved. His CT Scan and MRI showed burst fracture of LV2. His surgery was planned on urgent basis after counselling his parents and spinal fixation was done via pedicle screws and rods to reduce and stabilize his spine. All the bone fragments pressing upon the cord were meticulously removed. It was of paramount importance that spine fixation was rigid enough to allow early mobilization and rehabilitation of the patient.



Thanks to Almighty, the surgery was a complete success and was uneventful. The very next day physiotherapy was started. Miraculously, against all expectations, our efforts started bearing fruits and the patient started moving his legs. Six months into the therapy and at present Zaigham has full function of his bladder and bowl. He is back among his loved ones and family and is completely independent. He is using a treadmill to gain strength in his legs and visits gym regularly so that every part of his body gets due attention.

Zargham is one of the many faces around us who teaches us that, in life you always have a choice and if you are motivated enough and able to look in the future then there is no hurdle that can't be overcome.

"ONCEYOU CHOOSE HOPE, ANYTHING'S POSSIBLE" – CHRISTOPHER REEVE

New Consultants on Board





Dr. Rizwan Athar (Gold Medalist)

MBBS, FCPS (Pulmonology), MRCP (Medicine)

Consultant Pulmonologist and Specialist in TB

Dr Rizwan Athar is a consultant Pulmonologist and specialist in Tuberculosis. He is Gold medalist from Rawalpindi medical university under UHS Lahore. He took seven distinctions in MBBS from University of health sciences Lahore. He did his FCPS in Pulmonology from CPSP Karachi. He did his MRCP (Medicine) from UK. He is currently working as Head of department Pulmonology Islamabad medical complex- Nescom hospital H11/4 Islamabad. He is also head of Hyperbaric Oxygen therapy (HBOT) department at IMC-Nescom hospital Islamabad. He also worked as Registrar respiratory medicine in Manor Hospital Walsall UK. He also worked as consultant Pulmonologist in Fauji foundation hospital Rawalpindi. He has keen interest in treatment of Bronchial asthma, Allergies, COPD, ILDs, Covid 19 infection, Pneumonia, TB and sleep disorders. Dr Rizwan Athar is competent in doing diagnostic and therapeutic Bronchoscopy, Pleuroscopy, polysomnography and pleural biopsies by Abram's needle.



Dr. Nigam Sattar KhanBDS FCPS (Pak), FFD RCS (Ireland), CHPE, C-Implant
Assistant Professor Oral and Maxillofacial Surgery

Dr Nigam Sattar is a consultant oral and maxillofacial surgeon and working as Assistant Professor at Riphah International and Dental College. She previously worked as Senior Registrar at Shifa College of Dentistry. Dr Nigam did her graduation and post-graduation training from Khyber College of Dentistry. She did FCPS in oral surgery and FFD in oral surgery and oral medicine from Royal College of Surgeons, Ireland. She is one of very few surgeons in Pakistan and the youngest to have 2 fellowships in oral surgery. She has 7 years of experience in oral surgery. She also has certification in advanced trauma life support (Atls) Health Professional Education (CHPE) and Health research (CHR). She also has many national and international research publications to her accolade.

She is a certified implantologist and also deals with facial trauma, orofacial space infections, oral cancer and major and minor oral surgical procedures. She is well versed in general dental procedures like RCT, teeth whitening, veneers, scaling, polishing, crown and bridge. Her extensive knowledge combined with skills and friendly attitude make patients comfortable and confident during their dental procedures.



Dr. Naveed Ashfaq

MBBS, MD (USA), FRCS (UK)

Associate Professor General Surgery, Rawal Institute of Health & Science.

Consultant General & Vascular Surgeon

A qualified General Surgeon with 35+ years of experience in General Surgery.

Retired as Head of Department of General Surgery, CDA Hospital. First Surgeon to start Laparoscopic Surgery, in public sector in Islamabad, in 2001. Trained in UK & USA. Worked as Associate Surgeon in Vascular Clinic in USA.

PATIENTS' FEEDBACK



"The treatment was good and hospital services were nice. We are good to see the cleanliness of hospital. Endoscopy staff Ghalia & Dr. Omar Qureshi was kind to us and nice to get treatment from him."

Talha Nawaz

"I had a comfortable stay. The staff was very helpful and accommodating. The room was very comfortable as well. Ms. Haseena and Ms. Nadia were both very nice. Overall I had a very great experience."

Sana Faroog

"All staff is very good and cooperative. Excellent services. Hats off to all nursing staff and doctors."

Ammar Khan

"The service was spectacular and everybody was cooperative & quick. Extremely satisfied." *M Faiza Raza*

"We are very much satisfied with all hospital staff and services. Dr. visited our patient on regular basis and gave proper time and addressed all complaints. All other staff staring from parking guards, receptionists and all nursing staff were very cooperative. The most important and impressive thing was that the staff was present 24/7 with transplant patient."

Dr. Samia

"Overall experience was very good. I would like to say that the nursing staff and patient care is awesome. Specially I would like to say thanks to staff Aneeta. She is very professional and caring. May Allah bless all of you."

Zillay Huma

"We had a good experience. All the staff was very cooperative specially addressing patient complaints friendly. I specially appreciate nursing staff. They were competent and professional. The overall cleanliness was good. We don't have any complaints and suggest to maintain such standard."

Dr. M. Rashid

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