

Editorial

A Month at The All India Institute of Medical Sciences



Fig. 1 : Academic Block, All India Institute of Medical Sciences, New Delhi

The All India Institute of Medical Sciences was the brainchild of Rajkumari Amrit Kaur, the first Union Minister for Health in the Nehru cabinet of 1947, and only woman member thereof. She was the daughter of Raja Harnam Singh of Kapurthala. Educated at Oxford University, she met Gandhiji in 1919 and was his personal secretary for 16 years until his death. She was imprisoned by the British twice: for participating in the Dandi March of 1930 and the Quit India movement in 1942.

As the Union Health Minister of newly-independent India she felt the need for an Institute that would not only train future specialists, but also provide service to the medically needy and produce scientific medical research appropriate for the nation. While piloting the bill that would

lead to the establishment of AIIMS through Parliament she said, “It has been one of my cherished dreams that for post-graduate study and for the maintenance of high standard of medical education in our country, we should have an Institute of this nature in India which would enable our young men and women to have their post-graduate education in their own country, in their background with the necessary experience that we would like to give them to do research in the various spheres of medical education.” Initially established with financial aid from the Government of New Zealand, AIIMS consistently ranks amongst the best medical Institutes in India and the world, so that the Union government is opening similar Institutes in every state of the country.

Like many of my contemporaries, I sat both the AIIMS undergraduate and postgraduate entrance examinations, more as practice for the State and National entrance examinations than out of any hope of qualifying for a general seat. Since then I have visited AIIMS several times for conferences and workshops, and each time would regret that I never had the chance to study there.

I recently secured a travel grant to attend any Head and Neck Department in India for a month, and immediately decided to spend it at AIIMS. It transpires that the Institute has an established system of short term observerships, which can run from a week to several months. The would-be observer must be sponsored by his or her home Institute, after securing permission from the Head of the Department they wish to visit. The paperwork was surprisingly straightforward (at the end of the day it is a Government Institute!) and on the 10th of March at 9am I found myself at Gate Number 1 of AIIMS (Fig1.) New Delhi. The administrative fee for any observership is Rs 2000 a month, on payment of which I was issued an ID card describing me as a student: after 30 years I had finally managed a teenage dream!

For the next 4 weeks I immersed myself in the workings of the Department of Otolaryngology Head Neck Surgery. It is no small unit – 15 faculty and 55 residents (MS/SR/MCh), not to mention the rotating undergraduate students. Each of the 3 units cycles between an OPD (with Minor OT) day, a theatre day, and an academic day. Every day there are 5 dedicated ENT theatre lists in the

main campus surgical block – one local anaesthetic list and 4 general anaesthetic lists – with further lists at the National Cancer Institute in Jajjar which is also run by AIIMS. The average OPD footfall is between 120 and 150 new cases every day, with patients coming from all over the country. One thing that immediately struck me is the complexity of the cases, but then this is the apex government health care Institute of the country, and they cannot refer anywhere else. Apart from attending OPD and Minor OT, I attended the Head and Neck tumour boards (held twice a week), Skull Base clinic (twice a month) and Radiology meeting. In theatre I closely observed 24 complex Head Neck/Skull Base procedures. Apart from the clinical experience there were numerous little tips to be noted, from theatre setup to instrument clerking, which contributed to the efficiency of the Department. Although in surgical training we have moved on from the days of ‘see one, do one, teach one’ watching skilled surgery in real time with the ability to discuss areas of uncertainty is, in my opinion, an extremely educative experience.

I am extremely grateful to our Institute for agreeing to send me to AIIMS, to the authorities at AIIMS for facilitating my stay, and to the faculty and residents of the Department of Otolaryngology Head Neck Surgery at AIIMS for their kindness and hospitality. I would commend a short term observership to anyone looking for ways and means to improve their own Departments both academically and clinically.

Bibliography :

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2. Srinivas V. *AIIMS Act 1956 The Parliament Debate* 2016, K L Wig CMET AIIMS.