



Rules, Regulations, Guidelines and Curriculum for Fellowship in Neonatology under the aegis of Indian Academy of Pediatrics, Neonatology Chapter

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Section I

Statement of Goals and Specification of Objectives

A. Eligibility and Organization

Trainee:

Any student of Indian nationality who has completed the **M.D / D.N.B / DCh** course in Pediatrics from a **Medical Council of India or State Medical Council recognized University** in India is eligible for this fellowship program. Preference would be accorded to MD / DNB passed Candidates. If such candidates are not available then a DCh qualified candidate may be selected for the course (Only one of two candidates in an Institute can be DCh qualified). While the course tenure would be **one year for MD / DNB candidates**, it would be **one and half years for a DCh candidate**. At the time of application the trainee would have to produce a bonafide certificate from the Head of Department of Pediatrics of his / her institution where he / she has completed the post graduate training in Pediatrics, along with photocopies of the certificate of the post graduate degree from the University concerned, and the certificate of registration with the appropriate State Medical Council.

Any foreign student or a non-resident Indian student who wishes to apply should be a degree holder in Pediatrics post-graduate training and would have to produce a bonafide certificate from the Head of Department of Pediatrics of his / her institution where he / she has completed the post graduate training in Pediatrics, along with photocopies of the certificate of post graduate degree from the University concerned. The undergraduate and postgraduate degrees should be **recognized by the Medical council of India**.

All trainees joining the Neonatology fellowship program shall work as Full Time Residents during the period of training for one year (MD / DNB) or one and half years (DCh)

Institution:

The institution that wishes to take up the Fellowship program should be able to fulfill the following criteria:

1. The Institution should be in existence with a **tertiary level NICU** for **at least five years**.
2. The institution should have a Neonatal Intensive Care Unit, which provides tertiary level care to newborn babies. The NICU should fulfill the following criteria:
 - a) At least 20 separate cradles with radiant warmers
 - b) Central oxygen and suction supply
 - c) At least two functional ventilators that can provide CPAP and conventional ventilation with methods such as SIMV / AC etc, to neonates
 - d) Single and double surface phototherapy units
 - e) Pulse oximeters
 - f) NIBP monitors
 - g) Infusion pumps, syringe pumps, drip monitors
 - h) Standard equipment for procedures such as lumbar tap, intercostal drain insertion, peritoneal dialysis, exchange transfusion etc
 - i) 24- hr service of portable X-rays
 - j) 24-hr service for basic laboratory investigations
 - k) At least 50 admissions every month

- l) Staff nurses and a sister-in-charge who are specially trained and experienced in caring for neonates
 - m) At least 3 resident doctors who have minimum MBBS qualification, working in the unit
 - n) **At least two** fulltime or honorary staff members who have completed either **DM** in Neonatology with **at least five years** of postgraduate practice or **MD / DNB in Pediatrics** with **at least ten years** of post graduate practice **in level 3 NICU care**
 - o) An **ratio of one qualified (as above) teacher to one fellowship candidate** is necessary
 - p) **All teachers** at the Institute should be **Life members of Central IAP** (They are required to furnish their Life membership number) and **Life members of the IAP Neonatology Chapter**. Membership forms can be requested from the chapter. The membership form for membership of Central IAP along with the subscription fee is to be posted to the Central IAP office at Kailas Darshan, Kennedy Bridge, Nana Chowk, Mumbai – 400007. The membership form for membership of IAP Neonatology Chapter along with the subscription fee is to be posted to the Chairperson of the Chapter or In-charge fellowship Program. (Currently to Dr. Sailesh Gupta, Arushee Childcare Hospital, 1st Floor, Bharati Enclave HSG Ltd, Off Link Road, Chincholi, Malad West, Mumbai – 400065)
 - q) **All fellowship candidates** must also be **Life members of Central IAP** and **IAP Neonatology Chapter** and should follow the above technical advice.
3. The institution should have an in-house obstetric department with a turnover of at least 200 deliveries a month **or**
 4. The institution should be a dedicated pediatric hospital of which the NICU is a part, and have a average turnover of at least 50 neonate admissions every month
 5. The institution should also be providing the following services to neonates within its premises:
 - a) Training mothers to breastfeed, especially those babies who are the NICU graduates
 - b) Kangaroo Mother Care
 - c) Follow up outpatient services to these neonates
 6. The institution should also be providing the following services to neonates either within its premises or have a link-up with another institute for the following services:
 - a) Ophthalmologic evaluation of neonates that require it
 - b) Auditory evaluation of neonates that require it
 - c) Physiotherapy evaluation of neonates that require it
 - d) Surgical treatment of emergency surgical situations
 7. The institute should be **registered** with the **local health authorities**.
 8. **Only three new institutes** will be enrolled as centers for fellowship training every year and the **selection and allotment of seats will be based on inspection** of the institutes by a team of one / two inspectors appointed by the IAP neonatology chapter. The cost of travel and lodging of the inspectors will be the responsibility if the applying institutes, irrespective of their enrollment or otherwise as fellowship Institutes. An Institute scoring system is in place, and if there are more than three applicants, then the three highest scoring Institutes will be accorded the fellowship program.

B. a) Goal

The goal of Neonatology Fellowship program is to provide specialized training in Neonatology to produce competency in all the various fields of medical management of neonates, by obtaining

specialized training in Institutions that have specialized Neonatology departments with a Tertiary Level Care Neonatal Intensive Care Unit, over a stipulated period of one year or one and half years. These specialists will be capable of providing subsequent such care of neonates in the community as well as clinical tertiary care centers. They shall recognize the health needs of the community and carry out professional obligations ethically and in keeping with the objectives of the National Health Policy.

B. b) Objectives

After completing the Neonatology Fellowship course the trainee will be able to -

1. Provide primary, secondary, and tertiary care to all newborn infants including intensive care of a high standard to the critically sick neonates and very low birth weight infants using advanced therapeutic and supportive modalities and skills. In this regard:
 - a) He / she will also be able to effectively plan therapeutic, rehabilitative, preventive & promotive measures or strategies.
 - b) He / she will have the ability to set up level II and level III Neonatal units independently.
 - c) He / she will be able to take rationale decision in the face of ethical dilemmas in perinatal – neonatal diseases.
 - d) He / she will demonstrate empathy & humane approach towards patients & their families & exhibit
 - e) He / she will exhibit communication skills of high order and demonstrate compassionate attributes in the field of Neonatology.
 - f) He / she will use and maintain the essential neonatal equipment and keep abreast with advances in neonatal care technology.
2. The trainee will implement a comprehensive follow up and early intervention program for the “At risk” newborn infants and plan, counsel and advice rehabilitation of the neurodevelopmentally and physically challenged infants.
3. The trainee will be able to seek and analyze new literature and information on Neonatology, update concepts, and practice evidence based Neonatology. The trainee will be able to demonstrate adequate managerial skills.
4. The trainee will participate in the community programs and at the secondary level of health system and play the assign
5. He / she would work as a productive member of the interdisciplinary team consisting of obstetricians, neonatologists, pediatric surgeons, other doctors, nurses and grassroots functionaries providing care to the pregnant mother, the fetus and newborn in any setting of health care system.

Section II

Course Content

Since the students are trained with the aim of practicing as independent specialists, this course content will be mainly a guideline. They have to manage all types of cases and situations and seek and provide consultation. The emphasis shall therefore be on the practical management of the problem of the individual cases and the community within the available resources.

A. Academic topics

- Basic sciences pertaining to Neonatology:
 - Genetics
 - Applied anatomy and embryology
 - Fetoplacental physiology
 - Fetal growth
 - Neonatal adaptation
- Physiology and Development of various systems
 - Respiratory system
 - Cardiovascular system
 - Nervous system
 - Gastrointestinal system
 - Renal system
 - Hematopoietic system
 - Endocrinal system
 - Fetal and neonatal immunology
 - Fluids, electrolytes, glucose, proteins, complex carbohydrates and lipids, and vitamins, minerals and trace elements
- Common diseases and conditions in neonates of the:
 - Respiratory system
 - Cardiovascular system
 - Nervous system
 - Gastrointestinal system
 - Renal system
 - Hematopoietic system
 - Endocrinal system
 - Fetal and neonatal immunology
 - Inborn errors of metabolism
- Neonatal Therapeutics
 - Pharmacology
 - Nuances of drug dosage, administration, monitoring and toxicity

(For the exhaustive list of topics that need to be covered during the training, please refer to Appendix I)

B. General Topics

- Research methodology
- Biostatistics
- Computer & Information technology

C. Perinatology

- Perinatal and neonatal mortality, morbidity, epidemiology
- High risk pregnancy & impact on the fetus
- Fetal monitoring
- Intrapartum monitoring and procedures
- Genetic counseling
- Diagnosis and management of fetal diseases
- Fetal intervention
- Fetal origin of adult disease

Section III

Teaching, Learning methods and Activities

Learning in postgraduate program shall be essentially “Autonomous & Self directed”.

The following organized learning experiences should be provided to the students. Timetable for these programs will be drawn every six months.

- 1) Case presentation & case management in OPD & Indoor wards: The PG student will present cases daily on clinical rounds to the faculty members of the department. The students shall be provided facilities to manage cases of higher and greater complexity by allowing them graded responsibility, as the course program PG students shall be allowed to perform procedures under supervision and / or delegated authority depending on the experience and proficiency gained. The Heads of units and other consultants and guides shall be in-charge of the supervision and delegation of authority and responsibility to work.
- 2) PG lectures, Seminars, symposia, panel discussions of suitable topics: These will be held once a week. Topics of common interest to PGs will be covered in the program. Each PG student should present minimum 6 seminars every year.
- 3) Journal clubs: These will be held once a week. Each PG student should present minimum 6 journal clubs every year.
- 4) Medical audit / fatality case discussions: This will be done once a month by the PG student, who is expected to analyze & discuss the cases allotted to him/her.
- 5) Interdepartmental meetings will be organized with other departments of the institution or linked-up institutions such as Obstetrics, Pediatrics, Pathology, Radiology, Cardiology & Pediatric surgery departments as required. PG student
- 6) Preparation and presentation of a dissertation: Every PG student will be required to carry out one research project over one year under the supervision of his guide as identified by the institution. The project should be completed within 10 months of training, and then reviewed by the guide and given its final shape by the end of eleven months, one month before the stipulated date of completion of the Fellowship course.
- 7) The guide shall maintain a log book of all the activities carried out by the trainee and by the end of 12 months complete the form given in Appendix II and submit the same to the Chairperson, Neonatology Chapter of IAP for certification

The entire period shall be ‘in service’ training program based on the concept of ‘learn as you work’ principle.

Section IV

Evaluation will be Formative and Summative

- **Formative**

- Ward work
- Case presentation
- PG lecture
- Journal Club
- Internal assessment
- General assessment of attitude

- **Summative**

- Research project
- Final examination

Formative evaluation will be carried out over 5 activities of the P.G resident

- 1) Ward work
- 2) Case presentation
- 3) P.G Lecture
- 4) Journal club
- 5) General assessment: Rapport and attitude

Summative Assessment consists of two parts:

- 1) Evaluation of research by the trainee
- 2) Final examination

- **Research**

The topic for research shall be finalized and discussed in the departmental faculty meeting and allotted to the individual trainees before the completion of one month after admission. The purpose of dissertation is to develop in the trainee, the ability to perform an independent study keeping the principles and research methodology in mind. The trainee will therefore work on a prospective or retrospective project within the department or in collaboration with other departments. There will be continuous monitoring of the research work by the guides and co-guides and by the other department staff throughout the course. The trainee will present the progress of the research to the faculty on the completion of 10 months for monitoring and feedback, which will be given its final shape by the end of 11 months of training. The completed research should be submitted 2 weeks before the final examination.

- **Final Examination**

Eligibility:

- 1) Attendance: minimum 85%
- 2) Satisfactory Internal assessment
- 3) Approval of research project submitted

Trainees can appear for theory examination only after being certified on the basis of internal assessment.

A) Theory examination

- 1) There will be 2 papers, each of 3 hours duration.
- 2) There will be a choice in answering the questions (e.g. 5 out of 6 / 7)
- 3) Each paper will carry 100 marks; all questions will carry equal marks
- 4) Distribution of questions in the 2 papers is usually as follows:

Theory Paper I: Basic sciences, Perinatology, Research methods.

Theory Paper II: Case based questions

B) Clinical or Practical examinations

There will be one long case & two short cases. Each trainee will be allowed 1/2 hour to prepare the long case and half hour for two short cases. Two examiners will sit together to examine the trainee for the cases and viva voce.

The trainee must pass in theory (both papers included) and practical (aggregate marks) independently by obtaining at least 50% marks in theory as well as in practical exam and obtain an overall percentage not less than 50% (viz 250 / 500). It is essential to obtain 50% marks in the long and short cases. (80/160)

The summary of the examination is shown in Table: (Total marks obtainable = 500)

Theory (Paper I + Paper II)	100 + 100 = 200
Practical	300
Long case	80
2 Short cases	40 x 2 = 80
Viva Voce: drugs, equipments, procedures	40
Clinical study	50
Spots	50
Total marks obtainable	500

Section V

Recommended books and Resource Material

Textbooks (latest editions available)

<u>S no</u>	<u>Name of the Book</u>	<u>Author</u>
1	Neonatal –Perinatal Medicine; Diseases of the fetus and infant	Avroy A Fanaroff, Richard J Martin
2	Neonatology - Pathophysiology & Management of the Newborn	Gordon Avery, Mary Ann Fletcher, M.G. MacDonald
3	Avery Diseases of Newborn	S. Avery, Taeusch, Ballard
4	Polin & Fox - Fetal and Neonatal Physiology	Richard A Polin; William W Fox
5	Robertson's Textbook of Neonatology	Janet M Rennie, N.R.C Robertson
6	Neonatology - Principles and Practice	Dipak K. Guha
7	Manual of Neonatal Care	John P. Cloherty
8	Neonatology - Management, Procedures, On call problems; Diseases And Drugs	Tricia Lacy Gomella
9	Breastfeeding- A Guide to the Medical Profession	Ruth A. Lawrence; Robert M. Lawrence
10	Physical Diagnosis in Neonatology	Mary Ann Fletcher
11	Nelson's Textbook of Neonatology	Behrman, Kleigman, Arvin
12	Assisted Ventilation of the Neonate	Jay P. Goldsmith Edward H. Karotkin
13	Infectious Diseases of the Fetus & Newborn Infant	Remington & Klein
14	Neurology of Newborn	Joseph J. Volpe
15	Smith's Recognizable Patterns of Human Malformations	Kenneth Lyons Jones
16	Moss and Adams Heart Disease in Infants, Children, & Adolescents Including the Fetus & Young Adult	Emmanouilides, Riemenschneider Allen & Gutgesell
17	The Clinical Recognition of Congenital Heart Disease	Joseph K. Perloff
18	Pediatric Cardiology	Myung Park
19	Pediatric Hematology	Nathan , Oski
20	Medical disorders In Obstetric Practice	Michel Deswite
21	Neonatal drug formulary	IAP
22	Textbook of Preventive & Social Medicine	Park

List of Journals (Previous three years)

<u>S no</u>	<u>List of Journals</u>
1	Archives Diseases of Childhood: Fetal & Neonatal edition
2	The Journal of Pediatrics
3	Pediatrics (English Edition)
4	Indian Journal of Pediatrics
5	Indian Pediatrics
6	Clinics in Perinatology
7	Journal of Neonatology
8	Journal of Perinatology
9	Pediatrics Today
10	Archives of Pediatrics and Adolescent Medicine

11	Pediatric Clinics of North America
12	Pediatric Clinics of India
13	Recent Advances in Pediatrics
14	Seminars in Neonatology
15	Seminars in Perinatology
16	The Year Book of Pediatrics
17	Acta Paediatrica: an international journal of Pediatrics

Websites

No.	Website
1	www.cochrane.mcmaster.ca/neonatal/
2	www.nichd.nih.gov/cochrane
3	www.neonatology.org
4	www.emedicine.com/ped/neonatology.htm
5	www.nnfi.org

Appendix I: Detailed List of Topics for Training in the Fellowship Program

1) Neonatology

- Neonatal resuscitation
- Management of normal newborn
- Management of LBW, VLBW, ELBW infants
- Management of sick neonate
- Emergency neonatal care
- Thermoregulation
- Neonatal transport
- Fluid & electrolyte management
- Neonatal ventilation
- Blood gas and acid base disorders
- Neonatal assessment
- Assessment of gestation, neonatal behavior, neonatal reflexes
- Developmental assessment, detection of neuromotor delay, stimulation techniques

2) Respiratory system

- Neonatal airways: physiology, pathology; management
- Pulmonary diseases: hyaline membrane disease, transient tachypnea, aspiration pneumonia, pulmonary air leak syndromes, pulmonary hemorrhage, developmental defects
- Oxygen therapy and its monitoring
- Pulmonary infections
- Miscellaneous pulmonary disorders

3) Cardiovascular system

- Fetal circulation, transition from fetal to neonatal physiology
- Examination and interpretation of cardiovascular signs and symptoms
- Special tests and procedure (Echocardiography, angiography)
- Diagnosis and management of congenital heart diseases
- Rhythm disturbances
- Hypertension in neonates
- Shock: Pathophysiology, monitoring, management

4) Gastrointestinal system

- Disorders of liver and biliary system
- Bilirubin metabolism
- Neonatal jaundice, Prolonged hyperbilirubinemia, Kernicterus
- Congenital malformations
- Necrotizing enterocolitis

5) Neurology

- Clinical neurological assessment
- EEG, Ultrasonography, CT scan
- Neonatal seizures
- Intracranial hemorrhage
- Brain imaging

- Hypoxic ischemic encephalopathy
- Neuromuscular disorder
- Degenerative diseases
- CNS malformation

6) Renal system

- Development disorders
- Renal functions
- Fluid and electrolyte management
- Acute renal failure (diagnosis, monitoring, management)

7) Hematology

- Physiology
- Anemia
- Polycythemia
- Bleeding and coagulation disorders
- Rh hemolytic disease
- Blood Component therapy

8) Nutrition

- Fetal nutrition
- Physiology of lactation
- Lactation management
- Parenteral nutrition
- Vitamins and micronutrients in newborn health
- Human Milk Banking

9) Surgery and orthopedics

- Diagnosis of neonatal surgical conditions
- Pre and post operative care
- Neonatal anesthesia
- Metabolic changes during anesthesia and surgery
- Orthopedic problems

10) Neonatal infections

- Intrauterine infections
- Superficial infections
- Diarrhea
- Septicemia
- Meningitis
- Osteomyelitis and arthritis
- Pneumonias
- Perinatal HIV
- Miscellaneous infective disorders & fungal infections

11) Metabolic & Endocrine

- Glucose metabolism, hypoglycemia, hyperglycemia
- Calcium disorders
- Magnesium disorders
- Thyroid disorders
- Adrenal disorders
- Ambiguous genitalia
- Inborn errors of metabolism

12) Neonatal ophthalmology

- Development aspects
- Retinopathy of prematurity
- Sequelae of perinatal infections

13) Neonatal Hearing assessment

14) Community neonatology

- Vital statistics
- Health system
- Neonatal care priorities
- Care at primary, secondary & tertiary level of care
- Role of different health functionaries
- National programs
- IAP Neonatology Chapter

15) Neonatal dermatology

16) Neonatal Imaging

17) Development assessment & follow up

18) Organization of neonatal care

19) Adoption

20) Recent Advances

21) Neonatal procedures

22) Therapeutic agents

23) Biomedical equipments, use & maintenance

24) List of Skills

- Clinical
 - Neonatal examination & anthropometry
 - Developmental assessment
 - Neonatal resuscitation
 - Neonatal ventilation: CPAP, Mechanical ventilation

- Blood sampling: Capillary, venous, arterial
 - Insertion of peripheral venous, umbilical venous / arterial catheters
 - Monitoring: invasive, non-invasive
 - Enteral feeding (katori-spoon, gavage, breastfeeding)
 - Lactation management
 - Parenteral nutrition
 - Endotracheal Intubation
 - Lumbar puncture and ventricular tap
 - Placing of 'chest tube'
 - Exchange transfusion
 - Bed side tests: Hemoglucometer glucose estimation, Apt test etc.
 - Neonatal drug therapy
 - Nursery housekeeping routines
 - Infection control & Universal precautions
 - Handling, effective utilization and trouble shooting of neonatal equipment.
 - Decision making, clinical diagnosis, planning & interpreting investigations
 - Management of Neonatal problems
- Communication
 - Communication with parents, families and communities
 - Interdepartmental communication
- Education / Training
 - Teaching skills
 - Learning skills
 - Participatory and small group learning skills
 - Preparing learning resource material
- Self-Directed Learning
 - Learning needs assessment, literature search, evaluating evidence
- Research Method
 - Framing of research question
 - Designing and conducting study
 - Analyzing and interpreting data
 - Publication & writing a paper
 - Review & presentation of research findings

Appendix II: Evaluation Form for Trainees on Completion of One Year Fellowship

Full Name of Trainee: _____

Date of Joining Fellowship Program: _____

Date of filling evaluation form: _____

Guidance for Scoring: 1 2 3 4 5
 Poor below Average above Very Good
 Average Average

Evaluation form for Postgraduates: Clinical Work: Score: ()

Points to be considered:

- Punctuality
- Regularity of attendance
- Quality of Ward Work
- Maintenance of case records
- Presentation of cases during rounds
- Investigations work-up
- Bedside manners
- Rapport with patients

Evaluation form for Postgraduates: Seminar: Score: ()

- Presentation
- Completeness of preparation
- Cogency of presentation
- Use of audiovisual aids
- Understanding of subject
- Ability to answer questions
 - Time scheduling
- Consulted all relevant literature
- Overall performance
- Others:

Evaluation form for Postgraduates: Clinical Meeting: Score: ()

Points to be considered:

- Completeness of history
- Whether all relevant points elicited
- Cogency of presentation
- Logical order
- Mentioned all positive and negative points of importance
- Accuracy of general physical examination
- Whether all physical signs missed or misinterpreted
- Whether any major signs missed or misinterpreted
- Diagnosis: whether it follows logically from history and findings.

- Investigations required - Complete list -
Relevant order
Interpretation of investigations
- Overall ability to react to questioning –
Whether answers relevant and complete
Ability to defend diagnosis
Ability to justify differential; diagnosis
Confidence
Others

Evaluation form for Postgraduates: Research Work: Score: ()

Points to be considered:

- Interest shown in selecting a topic
- Appropriate review
- Discussion with guide and other faculty
- Quality of protocol
- Preparation of Performa
- Regular collection of case material
- Depth of analysis/discussion
- Departmental presentation of findings
- Quality of final output
- Defense in Viva
- Others:

Evaluation form for Postgraduates: Journal Club: Score: ()

Points to be considered:

- Choice of articles
- Cogency of presentation
- Whether he has understood the purpose of the article
- How well did he defend the article?
- Whether cross-references have been consulted
- Whether other relevant publications have been consulted
- His Overall impression of articles
If good - reasons:
If poor - reasons:
- Audiovisual aids
- Response to questioning
- Overall presentation
- Others:

Log (Performance record book)

Maintenance of performance record Logbook is mandatory. Certified and assessed copy should be made available at the time of practical examination for review by examiners

Log Book should contain:

- Certificate duly signed by teacher, head of department, head of institute - stating –

Dr..... has worked in department from to for a period of one year.

This performance record book contains the authentic record of work done and assessment for one year.

- Record of training
 - Name of the trainee
 - Name of the Hospital
 - Training period
 - Name of teacher
- Posting
- Working schedule
- Teaching program
- Presentation at Journal club: Date, Article Name, Assessment
- Seminars / Lectures: Date, Topic/ Subject, Assessment
- Case presentations: Date, Case, Teacher's signature
- Death Audit / C P C: Date, Case discussed, Assessment & Signature
- Procedures: Date, Name of patient, Type, complications observed
- Teaching activity: Date, Topic, Class
- Participation in Research Activity: Name of project, Duration
- Conferences / Workshop attended / Paper presentation
- Publications

Appendix III – Technical information relating to IAP Neonatology Chapter fellowship program

- 1) The IAP Neonatology fellowship program is **endorsed by the Executive Board of IAP**.
- 2) While there may be several applications from institutes to enroll for IAP neonatology chapter fellowship program, **only three institutes** will be recognized every year by the chapter. This selection will be based on the credentials + location + teaching facility of the institute. All applicant institutes will be **physically inspected** by a team of one or two members appointed by the chapter and the travel and lodging of these inspectors will be arranged by the applicant institute. The institutes will apply for fellowship through the institute head on institute letterhead and endorsed by the head of the neonatology unit / fellowship program coordinator. The application will be addressed to the Chairperson / In – Charge Fellowship Program of the chapter. The institute should be registered with the local authorities and the registration number and certificate should be attached with the application.
- 3) All teachers at the Institute must be **Life members of Central IAP and Life members of the IAP Neonatology Chapter**. The IAP Life membership number of all teachers at the Institute must be mentioned in the application form.
- 4) Each institute that conducts the fellowship program should advertize the positions as widely as possible to receive applications from all parts of the country and then **choose the best candidates** based on a system of interviews or examination, whatever the institute would prefer. The advertisement can be made in the institute bulletin or on institute notice board and in official instruments of IAP – the Academy today, Indian Pediatrics, and Indian Journal of Practical Pediatrics. Applications may also be invited through other reputed journals published by sister professional organizations.
- 5) Each institute can **register one / two candidates** as fellows (as per allotment by IAP Neonatology chapter). While Postgraduates who have **MD / DNB** degrees will take the fellowship examination **one year** after date of enrollment, the candidate with a **DCh** qualification will take the exam **1.5 years** after date of enrollment. Institutes are encouraged to enroll MD / DNB candidates whenever possible. In the absence of such a candidate, a DCh qualified candidate can be selected. However, only one DCh qualified candidate may be enrolled at a given time. Institutes that are allowed to train two fellowship candidates can have only two enrollments at any given time.
- 6) Ideally candidates should be enrolled on **January 1** of a given year. However for several considerations, the last date for enrollment may be extended to **February 15** of that year. No new appointments must be made after these dates. Candidates enrolled in the middle of the year to replace DCh qualified candidates will be enrolled on **June 1**, and latest by **July 15**.
- 7) Institutes will inform the chapter about change of **fellowship coordinator's name**, if and when that happens. Institutes will also inform the chapter about any **change in teaching faculty**.
- 8) Each candidate must submit a fellowship **fee of Rs. 12,500/-** in the form of a **Demand Draft** payable in the city where the chapter account is based (Mumbai at present), in the name of **'Indian Academy of Pediatrics – Neonatology Chapter'**. The DD should have the name, and cell number of the candidate, and the name of Institute of attachment written on the back.
- 9) The institute will submit a **fellowship information form** (appended with this document) which should contain information about the institute and candidates along with details of the DDs and copies of qualification certificates of the candidates. Candidate will not submit this information to the chapter individually. All communications regarding the technicalities of the fellowship

program and fellowship examination will be done by the fellowship coordinator and not by individual candidates.

- 10) The receipts for the DDs will be posted to the institute / fellowship coordinator and **not to individual candidates**.
- 11) **No refund** will be made if a candidate chooses to abandon the program at any time after enrolment.
- 12) Any dispute between the institute and candidate will be resolved between themselves **without any mediation** by the chapter.
- 13) The **exam fee of Rs. 3000/-** will be paid through a DD in the name of the chapter by each candidate, through the institute, with a covering note (sample appended with this document) after the exam date is announced, to reach the chapter address one month in advance of the examination date.
- 14) The names of candidates who pay the exam fee in time, will be intimated to the exam coordinator in the order of receipt of DDs and roll numbers for exam will be allotted in a likewise order.
- 15) If examination fee is not received **a month in advance of the examination date**, the respective candidate will not be allowed to take the fellowship exam. If a candidate withdraws from taking the exam after paying the exam fee, the fee will not be refunded.
- 16) The **thesis or clinical study** has to be submitted as **3 hard copies** along with CD containing thesis or study in Word document 97-2003 format and the clinical photographs if any with appropriate labeling, in jpeg 300 dpi format. The last date for submission of thesis is **20 days before the fellowship exam date**.
- 17) Each institute will be communicated the venue and date of the fellowship exam at least two months before the exam, and the details of the theory and practical examinations, roll numbers, and the specific dates allotted to individual candidates for practical exam will be communicated at least one month before the dates of examinations.
- 18) The roll number allotted to each candidate is **non-negotiable**. Individual requests from candidates or institutes for change of roll number or date of practical examination will not be entertained.
- 19) It is essential to obtain **50% marks in theory** (100/200), **50% marks in practical** (150/300) (80/160), **50% marks in clinical case presentations** (80/160) and **50% marks overall** (250/500) to clear the exam. It is not essential to obtain 50% marks in spots, viva, and clinical study individually.
- 20) Examination result will be **communicated to the institutes** on email immediately as it becomes available. Marks card (with details of marks) and the certificate (signed by the President IAP, & Chairperson and Adviser, IAP Neonatology chapter) will be posted to the institutes within 6 weeks of declaration of result. A gold medal will be posted to the candidate securing maximum marks, at a later date.
- 21) Candidates that **fail to clear the exam** may take another exam **after six months**, and reapply to the chapter with a DD for exam fee, whenever the dates and venue are announced. The candidates will take both theory and practical exam again. A failed candidate who may seek **reevaluation** of his / her theory paper marks, may request the chapter for the same, with endorsement from the

institute head, and submit a DD for Rs. 500/- for reevaluation of both theory papers, and Rs. 250/- for reevaluation of one theory paper. The theory papers will be reevaluated (re-read and remarked) by an independent examiner (other than the panel of original examiners). Marks will be communicated to the candidate within two weeks from the date of request.

Appendix IV - Pattern of Examination

1. The IAP Neonatology Chapter office bearers have the discretionary powers to decide the **venue of fellowship examination** based upon the number of candidates to be examined, availability of infrastructure and examiners, and the willingness of Institute to conduct the examination as per the guidelines of the chapter.
2. Examination will be conducted over **2 / 3 / 4 days** depending upon the number of candidates taking the exam.
3. While candidates' convenience will be kept in mind, they may be required to be present on **all days of the examination or only on specific days**.
4. **Four or more examiners** will be invited to conduct the exam. While at least half the number of examiners will be from outside the institute (and maybe outside the city / state), none of the examiners may be from the institute.
5. The **theory papers** will be set by two sets of examiners independently. The questions will be communicated to the chairperson / fellowship program in-charge of the chapter or an independent authority figure with no interest in the exam, and both sets of theory papers (I and II) will be brought to the examination hall in sealed envelopes. One of the envelopes will be opened for each of theory papers I and II.
6. Each theory paper will be of **3 hours** duration. The basic pattern will be as below; however, this may vary with the examiners.

Theory papers: (200 marks) (100 X 2)

- a) Paper – I: Theory questions: There will be choice of answering five questions out of six or seven. Each question will carry equal marks (20 marks). The questions may be long answer questions or multiple short notes, diagrams, or flow charts. Theory paper I will cover topics like community neonatology, demography, embryology, Pathophysiology of illnesses, recent advances, medicolegal aspects, preventive neonatology, fetal therapy, relevant aspects of obstetrics, human lactation and protocols in case of specific maternal illnesses.
 - b) Paper – II: Case-based questions: There will be a choice of answering 5 out of six or seven questions, each question carrying equal marks (20 marks). Theory paper II will contain 7 case illustrations. The purpose of this paper will be to test the candidate's ability to evaluate the case correctly and make correct clinical use of knowledge to make appropriate decisions.
7. Practical examination will consist of one long case, two short cases, ten spots for identification, and viva voce, inclusive of questions on the clinical study. The practical examination components will be staggered to accommodate all candidates, on one / two / three days.
 - a) Long case (80 marks): Each candidate will be given ½ hour to prepare for one long case and maximum ½ hr to present the same. Examples: MAS, RDS, CLD, HIE, congenital heart disease, multiple birth trauma, hydrops etc
 - b) Short cases (2 X 40 marks each): each candidate will be given ½ hour to prepare two short cases and maximum ½ hr to present both short cases (15 min each). Examples: spinal dysraphism, CP, congenital heart disease, hyperbilirubinemia etc.
 8. Viva voce by both examiners together (40 marks): 5 - 6 questions will be asked. The topics will cover recent advances, some questions pertaining to the clinical study done by the candidate and on equipment which is not easily available in India but which is increasingly used in other countries in neonatal care, e.g. ECMO, HFV, NO Rx, selective head cooling, CBF studies etc). There will also be questions on drugs, equipments, X-rays, ECGs, ABG reports etc.

9. Spots: (10 X 5 marks each) the candidates will be made to enter the spots' room all at once, one at each spot; a bell will be rung at end of every 2 minutes the candidates will move to the next spot; the spots' session should be over in about ½ hr time. The spots could include any of the following (examples only)

- a. Skin lesions e.g.
- b. Minor deformities e.g. CTEV, cleft palate, absent radius etc
- c. X-rays – CDH, pneumothorax, pneumomediastinum, NEC, SI obstruction etc
- d. ECG – congenital heart block, tachyarrhythmia etc
- e. ABG report – principal abnormality, compensation, complete or not, or mixed disorder etc
- f. CT / MRI / USG plates (with marking of abnormal area(s) and some clinical hint to facilitate diagnosis)
- g. Bilirubin report, biliblanket etc
- h. CBC report – raised IT ratio, thrombocytopenia etc
- i. Trisomies – clinical case of Down's
- j. Dwarfism
- k. Hypothyroid
- l. Drugs – e.g. IV MgSO₄, vecuronium, sildenafil tablet
- m. Apt test
- n. Baby with stridor and sternal retraction but stable
- o. Kangaroo mother bag
- p. Bulb syringe, PICC etc

Beside each spot there will be a question sheet on which one question will be printed out in bold letters and pasted on a stool / table next to the spot or on which the spot is placed

10. The clinical study (Marks – 50) will be evaluated on the following aspects –

- a) Clinical relevance in India, study size and statistical significance 10 marks
- b) Type of study – prospective/ retrospective, comparative, controlled, randomized, blinded etc 10 marks
- c) Presentation – use of flowcharts, clinical photographs, clarity of results 10 marks
- d) Discussion, comparison with similar other studies, ability to analyze the strengths, limitations and scope of the clinical study 10 marks

Appendix V – Sample of request letter for enrolment of Institutes for IAP Neonatology Chapter fellowship Program. The letter must be typed on the letterhead of the Institute

Date: _____

To,
The Chairperson / In-charge Fellowship Program,
IAP Neonatology Chapter
Address: _____,
_____.

Dear Sir,

We would like to apply for recognition of our Institute as a center for fellowship in neonatology by IAP Neonatology Chapter. We fulfill the criteria for recognition laid down by the chapter, detailed in the attached sheet on 'eligibility criteria'.

Our institute is registered with the local health authority, the registration number being _____. The relevant certificate is attached.

We have the following teaching / honorary staff associated with the NICU in our institute. Their qualifications and work experience are mentioned below –

- 1) _____

- 2) _____

- 3) _____

- 4) _____

The relevant certificates are attached.

We request you to please grant us recognition as center for conduct of IAP Neonatology Chapter fellowship. We are willing for an inspection of our institute and NICU. We will arrange for the travel and boarding of inspectors arranged by the chapter. We understand that our center may not be selected for the program. We have read and understood the guidelines for the fellowship program.

Thank you. Truly,

Institute head / Dean / Superintendent

NICU head / Fellowship program coordinator

Appendix VI – Eligibility criteria for enrollment as Institute for conduct of IAP Neonatology fellowship program

The institution which wishes to take up the Fellowship program should fulfill the following criteria:

- The institution should have a Neonatal Intensive Care Unit, which provides tertiary level care to newborn babies. The NICU should fulfill the following criteria:
 - At least 20 separate cradles with radiant warmers or incubators
 - Central oxygen and suction supply
 - At least 2 functional ventilators that can provide CPAP and conventional ventilation methods such as SIMV / AC etc to neonates
 - Single and double surface phototherapy units
 - Pulse oximeters
 - NIBP monitors
 - Infusion pumps, syringe pumps, drip monitors
 - Standard equipment for procedures such as lumbar tap, intercostal drain insertion, peritoneal dialysis, exchange transfusion etc
 - 24- hr service of portable X-rays
 - 24-hr service for basic laboratory investigations
 - At least 50 admissions every month
 - Staff nurses and a sister-in-charge who are specially trained and experienced in caring for neonates
 - At least 3 resident doctors who have the minimum MBBS qualification, working in the unit
 - At least 2 fulltime or honorary staff members who have completed M.D. OR D.N.B in Pediatrics and have at least 7 years of post graduate practice as full timers or in private practice (A teacher qualified in D.M. Neonatology would provide distinctive additional benefit, but this is not a must)
- The institution should have an in-house obstetric department with a turnover of at least 200 deliveries a month **OR**
- The institution should be a dedicated pediatric hospital of which the NICU is a part, and have a average turnover of at least 50 neonate admissions every month
- The institution should also be providing the following services to neonates within its premises:
 - Training mothers to breastfeed especially those babies who are the NICU graduates
 - Kangaroo Mother Care
 - Follow up outpatient services to these neonates
- The institution should also be providing the following services to neonates either within its premises or have a link-up with another institute for the following services:
 - Ophthalmologic evaluation of neonates that require it
 - Auditory evaluation of neonates that require it
 - Physiotherapy evaluation of neonates that require it
 - Surgical treatment of emergency surgical situations
- All teachers at the Institute should be Life members of IAP and IAP Neonatology chapter

Appendix VII – Eligibility form to be filled and attached with the application for enrolment as Institute to conduct IAP Neonatology Chapter fellowship program

- The institution should have a Neonatal Intensive Care Unit which provides tertiary level (level 3) care to newborn babies for the last five years.
 - The institution should have one DM Neonatology Teacher / Teacher with minimum ten years teaching experience in Neonatology for one Fellowship Candidate
 - All teachers / Neonatologists in the Institute should be Life members of IAP and IAP Neonatology Chapter
 - The NICU should fulfill the following criteria:
 - Total number of cradles with radiant warmers or equivalent number of incubators ()
 - Central oxygen and suction supply: Yes () No ()
 - Number of ventilators that can provide CPAP and conventional ventilation methods such as SIMV / AC etc to neonates: Number ()
 - Number of single & double surface phototherapy units ()
 - Number of pulse oximeters ()
 - Number of NIBP monitors ()
 - Number of infusion pumps, syringe pumps, drip monitors ()
 - Hemoglucometer: Available or not ()
 - Are the following procedures performed in your NICU:
 - lumbar tap ()
 - intercostal drain insertion ()
 - peritoneal dialysis ()
 - exchange transfusion ()
 - Are the following facilities available in your NICU?
 - 24- hr service of portable X-rays ()
 - 24-hr service for basic laboratory investigations ()
 - How many average admissions every month in the NICU ()
 - Approximate number of staff nurses in your NICU ()
 - Number of resident doctors who have the minimum MBBS qualification, working in the unit ()
 - Number of fulltime or honorary staff members who have completed M.D. OR D.N.B in Pediatrics and have at least 7 years of post graduate practice as full timers or in private practice ()
 - A teacher qualified in D.M. Neonatology (optional) ()
 - Average number of deliveries conducted in your institute every month ()
- OR**
- Monthly average deliveries conducted in the referring hospitals ()
 - Does your institution provide the following services to neonates:
 - Training mothers to breastfeed especially NICU graduates ()
 - Kangaroo Mother Care ()
 - Follow up outpatient services to these neonates ()
 - Does your institution evaluate the neonates for the following
 - Ophthalmologic evaluation of neonates that require it ()
 - Auditory evaluation of neonates that require it ()
 - Physiotherapy evaluation of neonates that require it ()
 - Surgical treatment of emergency surgical situations ()
 - All teachers at the Institute are Life members of IAP, the membership numbers being –
 - Dr. _____; IAP no _____
 - Dr. _____: IAP no _____
 - Dr. _____: IAP no _____
 - Dr. _____: IAP no _____

Appendix VIII – Submission of information after candidates are selected and appointed for fellowship (IAP Neonatology Chapter Fellowship Information Form)

Form 1

Date: _____

Name of the Institute: _____

Address: _____

Contact numbers: _____

E mail id: _____

Fellowship Coordinator: _____

Contact numbers: _____

Email id: _____

Candidate names:

1) _____

2) _____

Fellowship program fee - payment details:

1) Amount: _____/- ; DD number: _____ Bank: _____

Date: _____

2) Amount: _____/- ; DD number: _____ Bank: _____

Date: _____

Details of EACH candidate to be provided in form 2

Form 2 (Candidate 1)

Name of candidate: Dr. _____

Date of Birth: _____ Age: _____ years Sex: M / F

Address: _____

Contact numbers: _____

Email: _____

Qualifications: _____

Qualification details: (Please attach copy of Marks sheet and Passing certificate)

S no.	Qualifying exam	Year of passing	Marks obtained	% of Marks	Rank if any	Institute / University	Certificate attached? Y / N
1	MBBS						
2	DCh						
3	MD						
4	DNB						
5	Any Other						
6	Any Other						
7	Any Other						

Past professional experience:

S. no	Institute's name, location	Position held	Tenure in months	Year of working	Teacher's name	Certificate attached? Y / N
1						
2						

3						
4						
5						

Candidate's passport size Photograph

Candidate's Signature

Form 2 (Candidate 2)

Name of candidate: Dr. _____

Age: _____ years

Sex: M / F

Address: _____

Contact numbers: _____

Email: _____

Qualifications: _____

Qualification details: (Please attach copy of Marks sheet and Passing certificate)

S no.	Qualifying exam	Year of passing	Marks obtained	% of Marks	Rank if any	Institute / University	Certificate attached? Y / N
1	MBBS						
2	DCh						
3	MD						
4	DNB						
5	Any Other						
6	Any Other						
7	Any Other						

Past professional experience:

S. no	Institute's name, location	Position held	Tenure in months	Year of working	Teacher's name	Certificate attached? Y / N
1						
2						

3						
4						
5						

Candidate's passport size Photograph

Candidate's Signature

Institute Head's Signature

Fellowship Coordinator's Signature

List of Certificates and other documents attached (Both Candidates)

1) _____

2) _____

3) _____

4) _____

5) _____

6) _____

7) _____

8) _____

9) _____

10) _____

11) _____

12) _____

14) _____

Date: _____

To,
The Chairperson / In-charge Neonatology Fellowship Program,

_____,

Dear Sir / Madam,

The below mentioned fellowship candidates training at our Institute would like to take the IAP Neonatology Chapter Fellowship Exam Scheduled in _____ at _____.

The details of the candidates and their exam fee payment are given below –

1) Candidate’s name - _____

Qualification - _____ Date of Appointment - _____
(Please attach a copy of the appointment letter from Institute)

Completed 85% of the prescribed period of training: Yes / No

Performance / Conduct / Internal assessment – Satisfactory / Unsatisfactory

Clinical study completed – Yes / No

Exam fee amount - _____ (_____) DD no: _____

Bank _____ Date of DD: _____

2) Candidate’s name - _____

Qualification - _____ Date of Appointment - _____
(Please attach a copy of the appointment letter from Institute)

Exam fee amount - _____ (_____) DD no: _____

Bank _____ Date of DD: _____

Completed 85% of the prescribed period of training: Yes / No

Performance / Conduct / Internal assessment – Satisfactory / Unsatisfactory

Clinical study completed – Yes / No

Signature of Institute Head

Signature of Fellowship Coordinator

Appendix IX – Application for Reevaluation of Theory paper(s) (Separate forms for each candidate)

Date: _____

To,
The Chairperson / In-charge IAP Neonatology Fellowship Program

_____,

Dear Sir / Madam,

Our Fellowship Candidate named _____ took the IAP Neonatology Fellowship Exam on _____ held at _____, and obtained the following marks –

Theory - _____ / 200

Practical - _____ / 300; Clinical case studies - _____ / 160

Overall - _____ / 500

He / She was not declared PASSED based on the above marks.

We would like his theory paper(s) I / II / I and II to be re-evaluated by the IAP Neonatology Chapter. Kindly arrange for the same.

We are submitting a DD of Rs 250 / 500 for evaluation of one / both Theory papers. Kindly inform us of the result as soon as it is available.

Truly,

Institute Head

Fellowship Coordinator

Degrees Registration No. & Registering Authority (e.g. MCI or State Medical Council):

.....

Name & Membership No. & Signature of the Proposer:

.....

Name & Membership No. & Signature of the Seconder:

.....

Place:

Date :

(Signature of the Applicant)

MEMBERSHIP PRIVILEGES

The Society provides

- Facilities to Students, Scholars and Institutions for the study of or Research in Pediatrics in any of its aspects by way of scholarships, fellowships, grants, endowments, etc.
- Either through itself or in cooperation with other bodies or persons fellowships, prizes, certificates, diplomas of proficiency in the science of Pediatrics and conduct such tests, examinations or other scrutiny as may be prescribed from time to time.
- Free of cost or at subsidized cost its official journals, books, periodicals or publications on pediatrics and allied subjects which the society thinks is desirable for the promotion of its objects.
- Opportunity to its member to participate in Conferences, Lectures, Meetings, Seminars, Symposia, Workshops, Continuing Medical Education Programs, etc.
- Opportunity to become members of its Branches / Subspecialty Chapters / Groups / Cells / Committees.

Affiliations / Collaboration

The Society is affiliated to:

- (i) International Pediatric Association (IPA)
- (ii) International Society of Tropical Pediatrics (ISTP)
- (iii) American Academy of Pediatrics (AAP)
- (iv) Asian Pacific Pediatric Association (APPA)
- (v) Asian Society for Pediatric Infectious Disease (ASPID)
- (vi) Pediatric Association of SAARC (PAS)
- (vii) Royal College of Pediatrics and Child Health (RCPCH)

Categories of Membership

(1) **Student Member:** Applicant who has passed M.B.B.S. and doing Post Graduation allows the applicant to enroll himself/herself at 50% of the prevailing rate of life membership at the time of admission and the balance 50% to be paid within 4 years or earlier. On making full payment, he/she will be entitled to change the "Student" Membership category to either "Associate Life" or "Life" depending on the graduation / post graduation status.

(2) **Associate Associate Life Member:** Applicant who has passed M.B.B.S. only, have an option to become Annual Member i.e. "Associate" Member (renewable every year) OR "Associate Life" Member by paying life membership amount in one lump sum.

(3) **Ordinary Life Member:** Applicant holding M.B.B.S. and Post Graduation (such as D.C.H., M.D. (Ped), D.N.B. (Ped) or any other degree recognized by the Executive Board of IAP as equivalent) are eligible to be "Ordinary" Member (renewable every year) OR "Life" Member by paying life membership amount in one lump sum.

How To Apply for Membership

Application should be made on a prescribed form. Along with the application for membership of IAP, photo copies of the following documents should be submitted

- (i) Photo copies of the M.B.B.S. & Post Graduation Certificates as (as per degrees listed by you in your application).
- (ii) Photo copies of the degrees registration certificates with State Medical Council Medical Council of India (as the case may be).
- (iii) Certificate from the HOD stating that the applicant is the bonafide student of his/her Medical College (if the application is for "Student" Membership).

Membership Fee

The Membership Fee Structure is as follows:

Category of Membership	Admission Fee	Membership Fee	Total Amount Payable
Student	Rs.500/- (payable at the time of admission)	Rs.5000/- (Total payable Rs.5500/- at the time of admission i.e. 50% of the current life membership amount and admission fee) and balance Rs.4500/- on or before completion of 4 years of Student Membership).	Rs.10,000/-
Associate	Rs.500/-	Rs. 1000/-	Rs.1,500/-
Associate Life	Rs.500/-	Rs.9500/-	Rs.10,000/-
Ordinary	Rs.500/-	Rs. 1000/-	Rs.1,500/-
Life	Rs.500/-	Rs.9500/-	Rs.10,000/-

The Membership Fee should be paid by a crossed bank draft drawn in favor of "INDIAN ACADEMY OF PEDIATRICS" payable at Mumbai.

Appendix XI – Application for Life Membership of IAP Neonatology Chapter

IAP Neonatology Chapter Life membership Application Form

Name: _____

Sex: _____ **Date of birth:** _____

Address: _____

Telephone nos: _____ **cell no:** _____

E-mail id _____

Central IAP membership no: _____

Current Professional affiliation: _____

Past Professional affiliation: _____

Membership fee paid by cash / check no _____ **dated** _____

drawn on _____ **bank.**

[Check for Rs. 500/- to be drawn in favor of 'IAP Neonatology Chapter' and mailed to 'Dr. Sailesh Gupta, Chairperson, IAP Neonatology Chapter, Arushee Childcare Hospital, Bharati Enclave, Chincholi Bunder Road, Off Link Road, Malad [W], Mumbai – 400064, Phone: 0 98190 42213