

THE TRAINED NURSES' ASSOCIATION OF INDIA

TNAI BULLETIN

VOL. 6 No. 1

JANUARY 2017

Learning from the Past to Fly High

For an individual or organisation to create landmarks, it is essential to have a sense of commitment. Together with appropriate and consistent efforts in right direction, there ought to be no doubt, it forges ahead towards realisation of its mission. Also, if the mission is great, it requires straining every nerve and a 'never say die' attitude to achieve the desirable. In fact the mission itself imbues enormous impetus to keep moving. Again, it is in process of struggle that true learning comes. An unshakable stance is also the key to eventually emerge as victor. Passing of a calendar year every time insinuates that what remained half done could be finished next year provided the commitment and perseverance remain undiluted. At TNAI we have seen dream coming true. Like TNAI could lastly have the twin entities of Central Institute of Nursing & Research (CIN&R) and Elderly Care Home (ECH) in Greater Noida in NCR, Delhi.

In our relentless journey towards striving for growth of Nursing profession and welfare of Nurses as part of our mandate, we had taken the issue of low salaries and unsatisfactory working conditions of Nurses in private institutions in some southern States to the apex court. It has been gratifying that after hearing TNAI, Supreme Court passed necessary orders after which Government of India issued comprehensive guidelines to be followed, also asking the States/ UTs to submit the compliance status. The process of identifying the erring institutions has thus set in and we can hope for improvement in wages to be paid to the Nurses and their working conditions. That has been a salient feature of the year gone by, for TNAI.

The new age demands skills and expertise to handle the nursing needs. In the coming year, we at

INSIDE

- 1 Editorial
 - 2 Revised Rates for NJI Subscription
 - 3 TNAI New Life Membership Card
 - 4 Economic Plan for Acquiring TNAI Membership
 - 6 TNAI Publications
 - 8-9 Hindi Matter
 - 10 Events of the Month;
 - 11 Hindi Matter
 - 12 Informed Consent is Essential for Patient-Doctor Relationship
 - 13 News from Nursing Institutions; Meritorious
 - 14 Invitation for Becoming Peer Reviewer for NJI
 - 14 Lodging at TNAI Headquarters Made Easier
 - 15 Hindi Matter
 - 16 Advice to the Contributors
- Advertisers List**
- 14 Teerthanker Mahaveer University, Moradabad, Uttar Pradesh

TNAI envisage strengthening the Daksh Skill Lab programme that is being implemented in collaboration with Ministry of Health & Family Welfare to provide skill training to medical practitioners and nurses. The other focus in 2017 is going to be expansion in the membership base. A sizable number of nurses in many States/UTs remain outside the TNAI purview. In the New Year, I urge the State Branches to work with renewed zeal to see how the uncovered Colleges and Schools of Nursing can be brought in TNAI fold. As an incentive to new members, we have already implemented from academic year 2016-17, student-friendly membership plan that ensures full membership in one go at entry point.

My best Christmas and New Year Wishes to you.

Mrs Anita Deodhar
President TNAI

Call for News Items from Nursing Institutions

Schools and Colleges of Nursing are welcome to submit for publication in monthly *TNAI Bulletin*, the news items and write ups about observances of Graduation Ceremony, Annual Day, Seminars, Conferences, important workshops, etc. The charges are Rs 1000 per item including one photograph. The Demand Draft should be in favour of **The Trained Nurses' Association of India (TNAI)**, New Delhi. Neatly spaced out hand-written matter, preferably typed in double space on one side of paper with photographs may be sent, along with requisite charges, to the Editor, TNAI Bulletin.

Advice to the Contributors

It is observed that some articles/ write ups submitted for publication in Nursing Journal of India (NJI) do not conform to the required instructions so that such articles are not likely to receive priority.

Kindly note that each article/ write-up for publication in NJI must indicate: TNAI Membership number of the Author(s); contact details including Mobile / Landline Number; email id; complete address of institution of the corresponding Author (if working).

Research articles must contain Abstract. The References must be double checked for accuracy of author(s) name(s) and completeness. The name & designation of Guide/ Co-Guide with Institutional affiliation as well as year in which study was conducted must also be mentioned.

New Discount Rates on Publications

Discount for Institutions:

Books 1 - 24 -- 10%; 25 and above -- 30%

Booksellers / Agents:

Sl. No.	No. of copies	Discount
i.	1 to 5	10%
ii.	6 to 14	15%
iii.	15 to 24	20%
iv.	25 to 49	25%
v.	50 to 99	30%
vi.	100 to 199	33.3%
vii.	200 to 499	40%
viii.	500 and above	50%

New Email ID for TNAI Publications

Attention - Authors, Contributors, Institutions, Advertisers, Book sellers, NJI subscribers, buyers of publications and individuals!

Kindly note that The Trained Nurses Association has a new Email ID now (i.e. **publicationstnai@yahoo.com**), exclusively for matters related with TNAI publications.

All concerned are therefore requested to address their queries and correspondence at the new email ID.

TNAI BULLETIN

Monthly Newsletter of

The Trained Nurses' Association of India
L-17, Florence Nightingale Lane, Green
Park, New Delhi - 110016

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E-mail: tnai_2003@yahoo.com, publicationstnai@yahoo.com

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थोड़ा, प्रेम से किया गया भोजन बेहतर रहता है सेहत के लिए

ईसा मसीह भक्तों को सलाह देते थे, “केवल ब्रैड यानी रोटी के बूते जिंदगी नहीं चलती”। किसी ने टिप्पणी की, “हमें तो वह भी नसीब नहीं होती।” कहते हैं यह सुन कर ईशू की आंखें सजल हो उठीं। दो जून खाए बगैर इंसान का कहां गुजारा, प्रभु का नाम लेना हो तब भी। भूखे भजन न होय गोपाला। लाजिमी है, भूख की बिलखन और रोटी नसीब नहीं होने की पीड़ा सभी भाषाओं के साहित्य और लोकगीतों में मुखर रही है। सुशासित व्यवस्था में सबसे पहले सभी नागरिकों को दो वक्त भोजन सुलभ होना चाहिए। इसके लिए दो जरूरी शर्तें हैं, देश में और जरूरतमंदों की पहुंच के भीतर खाद्यान्न उपलब्ध हो और उनके पास इसे खरीदने के लिए पैसा हो।

गरीबी रेखा के नीचे की देश की करीब 30 करोड़ आबादी को अनाज मुहैया कराने के लिए एफसीआई के जरिए अधिक उत्पादन वाले राज्यों से खरीद कर सार्वजनिक वितरण प्रणाली (पीडीएस) की शुरुआत हुई किंतु भ्रष्टाचार, कालाबाजारी, राशनकार्ड बनने की जटिल प्रक्रिया आदि कारणों से वांछित लाभ नहीं मिला। संशोधित पीडीएस व्यवस्था 1997, आईसीडीएस, कार्य के बदले अनाज जैसी योजनाएं भी आंशिक तौर ही कामयाब रहीं।

समूची जनता को भरपेट भोजन दिलाना कृषि विशेषज्ञों के लिए चुनौती रही है, आर्थिक सलाहकारों के लिए वाद-विवाद का ज्वलंत मुद्दा, सामाजिक संस्थाओं के लिए सदाबहार नारा और पक्ष-विपक्ष दुतरफा नेताओं के लिए जहां तहां फिट बैठता दहकता पासा।

विश्वस्तर पर आर्थिक वृद्धि की आलोचना में इंटरनेशनल मानेटरी फंड (आईएमएफ) के प्रमुख क्रिस्टाइन लार्ड ने हालिया वाशिंगटन में कहा कि वैश्विक वृद्धि का लाभ “अत्यंत लंबे अरसे से बहुत कम” लोगों को मिल पाया है। अधिसंख्य देशों में व्यापार को राजनीतिक गेंद की तर्ज पर इस्तेमाल होने से असमानताएं पाटी नहीं जा सकी हैं। डिजिटल रूप लेती आज की दुनिया में परिवर्तन के लिए समेकित मॉडल अपनाना होगा।

अमेरिकी डायटिशियन डाना मैकडोनाल्ड की राय है, खाने में किसी ऐसे पदार्थ का सेवन नहीं करें जिसे आपकी परदादी भोजन के रूप में न पहचान सके। भोजन में स्वाद और वेराइटी की चाहत अस्वास्थ्यकर ही नहीं, जोखिमभरी भी है। नामी होटलों रेस्तराओं में खाने के शौकीन पंचसितारा होटलों के प्रकाशित, प्रसारित इस आश्वासन को तवोज्जु नहीं देते “हम घर जैसा खाना परोसते हैं।” आज की अधिकांश व्याधियां – मोटापा, हाइपरटेंशन, डायबिटीज आदि अप्राकृतिक, प्रोसेस्ड भोजन की देन हैं जिनका खामियाजा भुगतने के बाद अब जैविक, कुदरती, कंटीनेंटल की ओर रुझान है।

जब उपन्यासकार वर्जीनिया वुल्फ कहती हैं, “भलीभांति भोजन किए बगैर ठीक से सोचना, प्यार करना या सोना संभव नहीं” तो उनका आशय महंगे या मनभावन व्यंजनों से नहीं बल्कि ग्राही मुद्रा में इत्मीनान से भोजन करने से है। खानपान के बाबत भारतीय पद्धति में इसके स्वरूप, पकाने वाले की मनोदशा, ग्रहण करने के तरीके, आदि पर विशद विचार होता था। आयुर्वेद में अल्प मात्रा में, मौसम अनुसार, हितकारी भोजन की वकालत है।

पोषण विज्ञानी भले ही भोजन में विटामिन, प्रोटीन, फैट, कार्बोहाइड्रेट आदि संघटकों की न्यूनतम मात्रा का सेवन स्वस्थ रहने के लिए अनिवार्य करार करते रहें, और इनके अभाव या असंतुलन को बीमारियों से जोड़ें, वैज्ञानिक यह भी ठोक कर कहते हैं कि अनाज के एक दाने में अथाव ऊर्जा निहित है। सवाल मात्रा का नहीं, इसके समुचित अवशोषण का है। जब हम स्वीकारात्मक मुद्रा में, भोजन को प्रभु का उपहार समझते हुए, उसके प्रति कृतज्ञ भाव से, सकारात्मक मुद्रा में सेवन करते हैं तो इसका एक-एक अंश शरीर में अवशोषित हो कर हमें सुपुष्ट रखता है।

अगली बार खाने की प्लेट सामने आए तो जीभ या पेट की नहीं, दिमाग की सुनें तो बेहतर होगा।

ATTENTION MEMBERS !

Although we take utmost care in checking the veracity of facts mentioned in the advertisements, yet readers are requested to make appropriate enquiries and satisfy themselves before acting upon any advertisement.

- Chief Editor

Revised Rates for *NJI* Subscription

It is to bring to notice of all *NJI* subscribers that as per decision of TNAI's EC (vide Minute No. EC/CL/2004/3 subsequent to meeting held on 18-19 Nov 2014) the yearly price of Nursing Journal of India shall be revised upwards from March-April 2016 issue, as under.

One-year subscription: For individuals Rs. 1,000/-; for Institutions Rs. 1500/-

Five-year subscription: For individuals Rs. 4,000/-; for Institutions Rs. 6,500/-

All payments shall be accepted in the form of demand draft in favour of **The Trained Nurses' Association of India** payable at **New Delhi**. Local subscribers can also deposit the subscription charges as cash at TNAI Headquarters.

All communication related to *NJI* should be sent to the following address:

Secretary General, The Trained Nurses' Association of India

L-17 Florence Nightingale Lane, Green Park, New Delhi-110016.

Phone: 011-26566665, 26966873

Fax: 011-26858304; Email: publicationstnai@yahoo.com, tnai_2003@yahoo.com

Website: www.tnaionline.org

NOTE: Those already enrolled for subscription of the Nursing Journal of India (NJI) may kindly ignore this communication.



You can also detach the proforma below, which should be duly filled in and sent along with demand draft of requisite value.

Name:

Complete address with pin code:

Phone No.

Fax:

Email id:

Demand Draft No.-dated

Drawn at (name of bank & branch)

Signature



Computerisation and layouts by anupamkamal@hotmail.com

Advertisement Rates

Monthly TNAI Bulletin and Bi-Monthly The Nursing Journal of India (NJI)

Consequent upon the decision of TNAI Executive Committee/ Council meeting held on November 18-19, 2014 at Lucknow (Minute No. EC/CL/2014/30, the advertisement rates for the NJI and TNAI Bulletin have been modified from April 2015 issue onward, as under.

TNAI Bulletin – Monthly

Advertisement Size	Contract Rate Per issue (Rs.)	Casual Rate Per issue (Rs.)	Foreign Advertisement Rate in US Dollar (\$) Per issue
Front Cover Inside/Last Cover Inside/Last Cover	30,400	36,500	2,025
Full Page B/W	22,300	24,300	1,620
Half Page B/W	12,200	16,200	810
Quarter Page B/W	8,100	12,200	405
Job Work B/W	Rs. 1215 per column per centimeter with minimum size as 7 cm i.e. Rs. 8,500 minimum charge		-
Lost & Found B/W		900	

The Nursing Journal of India (NJI) – Bi-Monthly

Advertisement Size	Contract Rate Per issue (Rs.)	Casual Rate Per issue (Rs.)	Foreign Advertisement Rate in US Dollar (\$) Per issue
Front Cover Inside/Last Cover Inside/Last Cover (Colour)	53,200	63,800	3,600
Full Page (Colour)	39,000	42,600	2,880
Half Page (Colour)	21,300	28,400	1,440
Quarter Page (Colour)	14,300	21,300	720
Full Page B/W	27,900	30,400	2,070
Half Page B/W	15,200	20,300	1,080
Quarter Page B/W	10,200	15,200	540
Job Work B/W	Rs. 1530 per column per centimeter with minimum size as 7 cm i.e. Rs. 10,700 minimum charges		-
Lost & Found B/W		1200	

- Contractual rates applicable to a minimum of 6 insertions in twelve months.
- Advertisement matter mentioning the size of advertisement, month of publication along with payment should reach TNAI office latest by the first day of the previous month (e.g., for publication in June issue, the advertisement matter and payment etc., should reach us latest by May 1).
- Outstation cheques will not be accepted.
- Payment shall be made in advance through Demand draft payable at New Delhi.

**For details, kindly contact: Telephone: 011-26966873, 26566665, 26534765; Fax: 011-26858304
Email: publicationstnai@yahoo.com & tnai_2003@yahoo.com**

TNAI New Life Membership Card

Members who are already enrolled with TNAI and would like to have new Computerized photo-ID Membership Card, are requested to fill in the new Application Form along with a payment of Rs.150/- through Demand Draft, drawn in favour of "The Trained Nurses Association of India, New Delhi" and send it to TNAI Headquarters. Application Form can be downloaded from TNAI Website: www.tnaionline.org or write to us. Else, they may send their request in the following format.



Application form for New Computerized Membership Card



The Trained Nurses' Association of India
 Incorporating Student Nurses' Association, The Health Visitors' League and Midwives & Auxiliary Nurse – Midwives Association
 L - 17, Florence Nightingale Lane, Green Park, New Delhi – 110 016.
 Tel.: 91-11-26566665, 26966873, 26534765. Telefax: 91-11-26856304
 Email: membership@tnaionline.org, tnai_2003@yahoo.com, Website: www.tnaionline.org

APPLICATION FOR NEW MEMBERSHIP CARD

- Instructions for Applicants
- Write with **ball pen (black)** in CAPITAL LETTERS only with one letter in one box.
 - Each word should be separated by one blank box.
 - Applicant should sign in full, clearly within the boxes provided.
 - Incomplete form will be rejected.

Applicant's full Signature

NO SIGNATURE

↓

Applicant's
Passport size
Photograph
Only

↑

TNAI Membership No.							
NAME:							
Address :							
Date of Birth	<table style="display: inline-table; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table>						
Please do-not sign on the photograph.							

Ph.....

Email:.....

Attention Advertisers !

Advertisers of the Admission Notices in *TNAI Bulletin* for the academic year 2016-2017 for Schools/ Colleges of Nursing are required to submit the copy of Indian Nursing Council (INC) recognition certificate along with the advertisement matter and payment, otherwise the advertisement shall be summarily rejected.

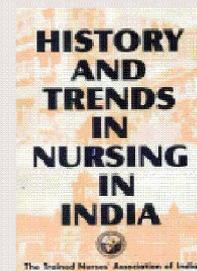
- Chief Editor

TNAI PUBLICATIONS

HISTORY AND TRENDS IN NURSING IN INDIA

The book is a must for entire Nursing Community providing the historical background of Nursing as a profession and provides an insight into its gradual development. It contains seven chapters: (1) Early Times (2) Military Nursing (3) Establishment of Significant Hospitals and Nursing Training Schools (4) Development of Nursing and Health Care: 1947-2000 (5) Development of Nursing Education in India (6) Development of Public Health and Public Health Nursing, and (7) The Trained Nurses' Association of India.

Price: Rs. 150/- (Packing & forwarding charges Rs. 50/- extra per book)

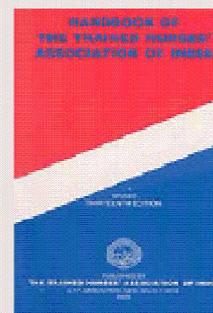


HANDBOOK OF THE TNAI

This book contains comprehensive information about TNAI - the only national level professional organisation of Nurses - its activities, constitution, rules and bye-laws. It also includes information on International Nursing and Health Organisations, development of Military Nursing Services, Public Health Nursing and Nursing Education.

Some of the important topics prescribed in the Basic Nursing syllabus of both GNM and B.Sc. (Nursing), are also dealt with. It is worth procuring as a personal copy and for the reference of libraries of Schools and Colleges of Nursing.

Price: Rs. 50/- (Packing & forwarding charges Rs. 50/- extra per book)

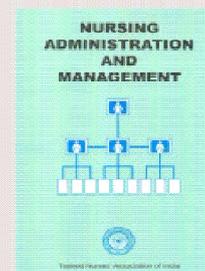


NURSING ADMINISTRATION AND MANAGEMENT

This book is extremely useful for the aspiring Nurse Managers and Administrators of the country.

It has five sections with elaborate chapters on Administration and Management, Nursing Service Administration, Community Health Nursing Administration, Administration and Management of Nursing Schools and Modern Management Techniques.

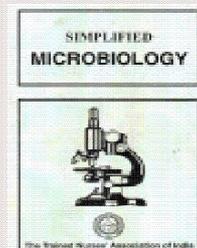
Price: Rs. 300/- (Packing & forwarding charges Rs. 50/- extra per book)



SIMPLIFIED MICROBIOLOGY

This book deals with history of Microbiology, classification of micro-organisms, laboratory methods for their identification and proper collection of specimens. It is primarily written for Nursing students at the Basic level.

Price: Rs. 40/- (Packing & forwarding charges Rs. 50/- extra per book)

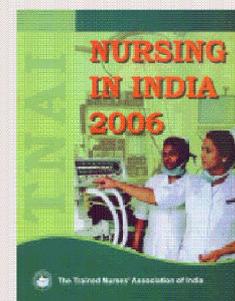


NURSING IN INDIA - 2006 (covers information upto 2012)

This publication, brought out to coincide with Centenary celebrations of TNAI, describes the milestones of TNAI. It has been made more broadbased by including issues of health, nursing and midwifery education in 21st century. Also covered are the topics like Government's new programmes in health care and new initiatives: National Rural Health Mission; Janani Suraksha Yojna; Accredited Social Health Activist (ASHA); India and AIDS; and Nurse Practitioner in Midwifery etc. There are topical articles on immigration of Indian Nurses and Post-Basic B.Sc. Nursing through distance education etc.

Price: Rs.300/- (Packing & forwarding charges Rs. 50 extra per book)

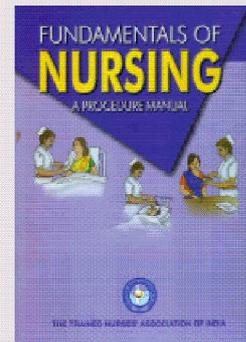
Note: 50% discount admissible for institutions and individuals.



FUNDAMENTALS OF NURSING - A PROCEDURE MANUAL

The book has been designed by nursing teachers of the country in such a way that it reflects all the domains throughout the text : knowledge, development of attitude and skills. Nursing teachers from various parts of the country have made tireless efforts to make the book comprehensive so that it can be used by all nursing students, teachers and practicing nurses. The book has 16 chapters and 52 units spread over 700 pages. Each unit contains procedures emphasising scientific and nursing principles. The illustrations, diagrams and examples have been incorporated to bring clarity in the textual material. In brief, the book is like a thesaurus.

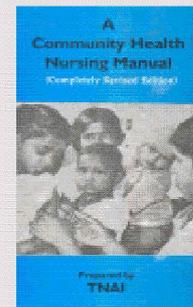
Price : Rs. 575/- (Packing & forwarding charges Rs. 100/- extra per book).



A COMMUNITY HEALTH NURSING MANUAL

This Manual is one of the most authentic books on Community Health. It covers all the major aspects of the subject in the minutest details and serves as a helpful guide for Community Health Nurse practitioners. It is extensively used by almost all Schools and Colleges of Nursing in India and other countries.

Price: Rs. 150/- (Packing & forwarding charges Rs. 50/- extra per book)



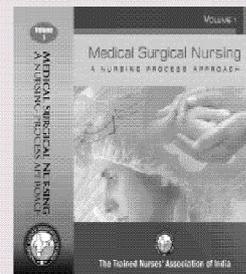
Medical Surgical Nursing: A Nursing Process Approach (Vol. I & II)

Advances in medicine and nursing have led to emergence of medical-surgical nursing as a specialty of choice among nursing students, attracting them in large numbers. It is also being increasingly opted by students as career. Considering the importance of the subject, TNAI took up the elaborate project of drafting and publishing a textbook on it.

Highly valuable publication for students of Nursing, this 2-volume text book has 15 units further divided into 47 chapters in both. Unit I dwells on concept of wellness and maintenance of Health including care of the elderly, Unit II, III and IV cover nursing processes, quality management, common problems of nursing practitioners and peri-operative nursing; Units V to XV describe various health disorders in surgical nursing and their management.

The anatomical and physiological aspects essential for grasp of health disorders as well as methods of assessment have been well covered in the book. The chapters of the book have been contributed by experts acknowledged in their field, so that the information being conveyed through text and illustrations is authentic and relevant to the students. As the entire book is in multi-colour, the illustrations come out clearly for easy understanding of the students. It is a 'must' book for nursing students on all counts: contents, coverage, treatment of subject, clarity of expression and price.

Price: Rs. 2,400/- (for 2 Volumes). Packing & forwarding charges Rs. 300/- extra (for 2 volumes)



TNAI / SNA Badges for Members

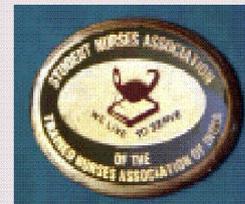
NURSE BADGE (TNAI)

The round metallic badge with TNAI logo designed, provides an identity to the nurses affiliated to TNAI. Available for Rs. 20/- from TNAI Headquarters.



STUDENT NURSE BADGE (SNA)

The badge for student nurses is oval in shape with inscription, "We live to serve". It provides an identity to the students affiliated to the SNA. Available for Rs. 20 from TNAI HQ.



Economic Plan for Acquiring TNAI Membership

With a view to make the TNAI Membership more attractive, the TNAI Council (vide Minutes No. EC/CL/2015/4) have decided to offer an attractive alternative Membership plan which is more simplified and economic for students.

A student opting for the new Membership Plan has to pay just a lump sum Rs. 2,000/- (inclusive of SNA subscription for 4 years, Scholarship Fund and SNA to TNAI Membership fee) and he/ she shall become a full TNAI Member automatically after completion of the course, thus saving substantially and avoiding to pay annual fee every year.

Under the existing rules, at the time of becoming SNAI Member the student pays Rs. 150/- per year plus Rs. 50/- (towards Scholarship Fund) for 1st year, and Rs. 150/- yearly for 2nd, 3rd and 4th years. Again, after completion of the course he/ she is required to pay the TNAI Membership Fee of Rs. 2,200/- to become SNA to TNAI Member.

The new Membership Plan shall be applicable from the academic year 2016-17 although the existing rules for SNA membership shall also remain valid. The Institutions are free to choose either of the Membership plans.

Secretary-General, TNAI

Non-Receipt of Copies of TNAI Bulletin

We take utmost care to ensure that subscribers receive the copies of *TNAI Bulletin* in time. The copies are dispatched in first week of every. However, in the event of a member not having received the copy of a particular issue, intimation to this effect, together with request (addressed to the **Chief Editor, TNAI Bulletin**) for another copy may be submitted by 15th day of the month so that we can consider sending another copy of the issue, subject to availability of copies. Members may note that late complaints i.e. those received after 15th day of the month shall not be entertained.

– Chief Editor

आपको मासिक पत्रिका टीएनएआई बुलेटिन मिलने में शिकायत तो नहीं है

टीएनएआई के कुछ आजीवन सदस्यों से हमें यदा कदा शिकायत मिलती रहती है कि उन्हें मासिक बुलेटिन की प्रतियां नहीं मिल रही हैं।

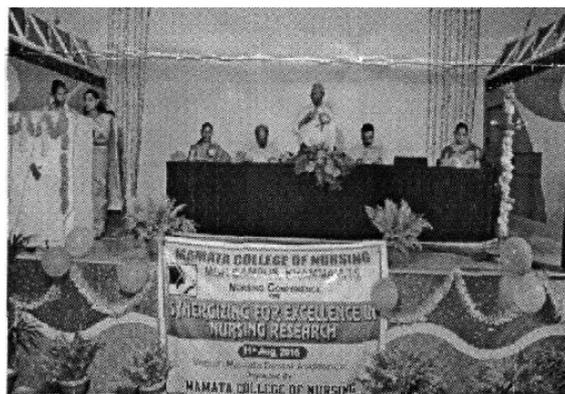
सभी आजीवन सदस्यों को अधिसूचित किया जाता है कि मासिक टीएनएआई बुलेटिन की प्रतियां नियमित रूप से भेजने की व्यवस्था है। आपको यदि इसकी प्रति नहीं मिल रही है तो:

1. स्थानीय डाकघर में पूछताछ करें और प्रतियां नहीं मिलने की शिकायत दर्ज करें।
2. यह सुनिश्चय करें कि टीएनएआई मुख्यालय को दिया गया आपके नाम और पता के विवरण में कोई त्रुटि नहीं है और यह संपूर्ण है। इसमें पिन कोड का उल्लेख किया जाना अनिवार्य है। मासिक बुलेटिन की सभी प्रतियां मुख्यालय से महीने के पहले सप्ताह में भेज दी जाती हैं। फिर भी किसी माह की प्रति आपको नहीं मिलती है तो उसी माह की 15 तारीख तक मुख्यालय को आवेदन करें, यदि संभव हुआ तो हम इसकी प्रति दोबारा भेजने का प्रयत्न करेंगे। याद रहे, उक्त तारीख के बाद मिली शिकायतों पर विचार नहीं किया जाएगा।

NEWS FROM NURSING INSTITUTIONS

Mamata College of Nursing (MCON), Khammam

(Telangana): Conference on Synergising for Excellence in Nursing Research was held on 11 August 2016 with Sri Puvvada Nageswara Rao, Founder- Mamata Educational Society, former MLC & former MLA as the chief guest. Dr Mrs B Ratna Philip, Principal- MCON delivered key note address. The resource persons included Dr BP Ravi Kumar, Professor & Head, Community Medicine, Mamata Medical College, Dr BR Ratna Philip, Mrs Radhika, Vice Principal- MCON and Mrs B Aruna Jyothi, Associate Professor, MCON. The Conference dwelt on, inter alia, Statistical applications in nursing research,



Communication, legal & ethical issues, trends in nursing research. Best poster award and certificates were given by Dr G Venkateswara Rao, Medica Director of Mamata Educational Society. The programme ended with National anthem.

MERITORIOUS

Mrs Bharati Sureshchandra Batra

Mrs Bharati Sureshchandra Batra, formerly Vice Principal at Training College of Nursing, a constituent of Indira Gandhi Government Medical College & Hospital Nagpur, was awarded PhD in Nursing by MGM Institute of Health Sciences, Navi Mumbai. The degree was awarded at the Institute's 6th convocation held on 30 August 2016.

The topic of her research [conducted under Dr Rakesh Ghildiyal, Professor & Head, Psychiatry Department, MGM Medical College; Dr Mary Mathews N, Principal MGM College of Nursing; and Dr Anand Milind Saoji, Associate Professor, Psychiatry Department, IGGMC&H Nagpur] was: Effect of Family Psycho Education on Knowledge, Quality of Life, Expressed Emotions, Burden of Disease and Coping among Caregivers of Patient with Schizophrenia.



Mrs Batra is recipient of Chief Minister's Best Nurse Award (1980-81) and many national and state-level awards including Rajiv Gandhi Education Excellence Award, Mahila Ratna Gold Medal and Quality Circle Forum of India Silver Award. She also served under Indian Technical and Economic Cooperation Programme to IGMH Male, Republic of Maldives, when on deputation to Ministry of External Affairs.

Mrs Batra gives credit of her achievements to her guides, colleagues and family members.

SNA to TNAI Membership Charges Slashed for ANMs

As per decision of EC/ Council (vide Minute No.EC/91/2016/3), the SNA to TNAI Membership charges for ANMs have been reduced from Rs. 1,800/- to Rs. 1,000/-.

विशेष साफ-सफाई मांगता है आपका किचिन

बात साफ सफाई की हो तो अधिकांश लोगों का ध्यान ड्राइंग रूम तक और बहुत हुआ तो टॉयलेट पर टिक जाता है। हकीकत यह है कि सेहत के हिसाब से सबसे ज्यादा सफाई जहां जरूरी है यानी आपका किचिन, वह उपेक्षित रह जाता है। जानिए कैसे।

ब्रिटेन की राष्ट्रीय स्वास्थ्य सेवा (नेशनल हेल्थ सर्विस) की मानें तो किचिन के सिंक में शौचालय से कई गुना ज्यादा कीटाणु मौजूद रहते हैं। स्पष्ट है किचिन की सफाई और इसे कीटों, कृमियों और कीटाणुओं से रहित बनाए रखने के लिए खास प्रयास किए जाने चाहिए। किचिन में पाया जाने वाला सबसे हानिकारक कीटाणु है ई कोली, जो पेट की अनेक बीमारियों के अलावा यूरिनैरी ट्रैक इन्फेक्शन के लिए भी जिम्मेदार है। स्वच्छता पर विश्वस्तर पर कार्यरत संस्था एन.एस.एफ. के अनुसार किचिन के फर्श, दीवारों और वहां रखे उपकरणों में किसी भी वक्त ढेरों किस्म के कीटाणु विद्यमान रहते हैं।

खाना पकाने और खाद्य पदार्थों के भंडारण के लिए प्रयुक्त किए जा रहे उपकरण प्लास्टिक के हों तो कीटाणुओं के पनपने की संभावना बढ़ जाती है। लागत कम रखने के लिए आजकल रसोईघर के अनेक उपकरण जैसे मिक्सी, आटा गूंथने की मशीन, मिक्सर आदि प्लास्टिक या अन्य ऐसे सिंथेटिक माल से तैयार हो रहे हैं जिनमें खाने की चीजें रखना खतरे से खाली नहीं है। दूसरा – अमूनन इस्तेमाल के बाद इन उपकरणों को ठीक से साफ नहीं किया जाता, इनमें गंदगी के अलावा हानिकारक बैक्टीरिया होते हैं। याद रहे, प्लास्टिक अपने आप में विष है और बार बार इसमें रखे पदार्थों के सेवन से विषों के कुछ अंश हमारे शरीर द्वारा ग्रहण कर लिए जाते हैं जो दीर्घावधि में कैंसर का कारण बनते हैं।

किचिन में इंसेक्टिसाइड या डिसइन्फेक्टेंट छिड़कते समय सावधान रहें कि यह उन बर्तनों या उपकरणों पर नहीं गिरे जिसके सीधे संपर्क में खाने की चीजें आएंगी, अन्यथा लेने के देने पड़ सकते हैं।

बर्तनों की सफाई के दौरान खयाल रखें कि इनमें खरोच नहीं लगी हो, चूंकि ऐसी जगहों पर बैक्टीरिया को अपना अड्डा बनाना सहज रहता है। साफ कर लिए गए भांडों-उपकरणों को भलीभांति सुखा कर ही जगह पर रखा जाए, कारण नमी या आर्द्रता में बैक्टीरिया को वृद्धि का अनुकूल वातावरण मिलता है।

सफाई का स्क्रब या जूने पर ध्यान देना भी आवश्यक है। इसे बराबर ठीक से धोते रहें और नियमित अंतराल पर बदल दें।

माटी से प्रेम किया जाए, हिकारत नहीं

कुछ दशक पूर्व तक, देहाती अंचलों में आज भी, छोटे बच्चे अमूनन मिट्टी या बालू के ढेर में खेलने, फुदकने, घर बनाने का आनंद लेते रहे हैं। मिट्टी से परहेज रखने वाले आज के अधिकांश माता-पिताओं के विपरीत तब इसे बुरा नहीं माना जाता था। मिट्टी, पानी, पेड़ पौधे आदि प्रकृति के तौहफों की करीबी हमारी कल्पना और सृजनात्मकता को सर्वर्धित करती है, सोच के नए आयाम मिलते हैं। इससे अधिक महत्वपूर्ण यह है कि प्रकृति से नजदीकी से उसके लिए दिल में प्रेम बना रहता है। दीगर है ऐसे बच्चे युवा हो कर प्रकृति के समुचित रख रखाव के प्रति अधिक सजग और निष्ठावान रहेंगे। स्कूली पाठ्यक्रम में क्विज सत्रों में मिट्टी या इससे मिलती जुलती सामग्री के उपयोग का मकसद उनकी सृजनात्मकता को नए आयाम देना है।

मिट्टी का सुसानिध्य हमारी मूल भावनाओं को तृप्त करता है। जिन पंचतत्वों से मनुष्य की उत्पत्ति हुई उनमें

मिट्टी ही है जो उसे स्थूल रूप देती है। अंत में प्रत्येक जीव का उसी में विलय होना तय है। इसीलिए आत्मा निकल चुके शरीर को मिट्टी भी कहते हैं। सभ्यता के शुरुआत, वरन् इससे पहले से मानव अभिन्न तौर पर मिट्टी से जुड़ा था। उसकी सभी आवश्यकताओं – भोजन, ईंधन, कपड़ा, घर – की आपूर्ति मिट्टी से होती थी। नंगे पांव चलने फिरने से वह सदा मिट्टी के संपर्क में रहता, उसी पर उठता-बैठता, सोता था और दुरस्त रहता था। धरती जिन दो तरीकों से मनुष्य सहित तमाम भूमंडल में सुव्यवस्था बनाए रखती है उनका सभ्य समाज को देर से पता चला। पहला है पृथ्वी में मौजूद विद्युत प्रणाली, जो मनुष्य में निहित विद्युत प्रणाली के अनुकूल है। दूसरा है भूमंडल की जैव विविधता, इसे जिस अद्भुत तौर-तरीकों से मिट्टी बनाए-संजोए रखती उसे ठीक से समझ पाना वैज्ञानिकों के लिए आज भी दुष्कर है। इस प्राकृतिक व्यवस्था में मानवीय हस्तक्षेप से उत्पन्न आपदाएं हम यदा कदा भुगत रहे हैं, सूखा, अतिवृष्टि, बाढ़, मौसमों में हेर फेर। समूची मानवजाति के अस्तित्व को सुरक्षित रखने के लिए प्रकृति की इस मूल्यवान धरोहर के प्रति निरंतर सजग रहने का विकल्प नहीं है।

मृदा के संरक्षण का उल्लेख आदिग्रंथकार, सभी पंथों के धर्मगुरु, वैज्ञानिक, पर्यावरणविद, समाजशास्त्री करते रहे हैं। वेदों में लिखा है, “मनुष्य के जीवित रहने का दारोमदार मिट्टी पर है; इसे सहज कर रखेंगे तो हमारी आवश्यकताओं की आपूर्ति होती रहेंगी और हम सौंदर्य से सराबोर रहेंगे। इसकी अवहेलना करेंगे तो हम नष्ट हो जाएंगे।” आस्ट्रियायी दार्शनिक विक्टर शाबर्गर ने भी कहा कि धरती पर विचरण करने या उड़ने वाला प्रत्येक जीव उस पर आश्रित है और यदि धरती नहीं रहेगी तो उन समस्त प्राणियों का अस्तित्व जोखिम में होगा।

प्राकृतिक कार्बन का विशालतम स्रोत होने के अलावा मिट्टी सुरक्षित जल मुहैया कराने और बाढ़ व सूखे के प्रकोप से बचाए रखती है अतः इसके संरक्षित करने के उपायों को जीवन में ढालना होगा। इसी दृष्टि से खाद्य एवं कृषि संगठन (एफएओ) प्रतिवर्ष 5 दिसंबर को विश्व मृदा दिवस आयोजित करता है और मृदा संरक्षण का संदेश प्रसारित-प्रचारित करता है। पूर्व अमरीकी राष्ट्रपति रूज़वेल्ट के शब्दों में, “जो राष्ट्र अपनी मिट्टी की हिफाजत नहीं करता उसका पतन हो जाता है।

मिट्टी की अद्भुत उपचारात्मक क्षमताओं पर टिप्पणीस्वरूप अल्मा हुशैन ने कहा था, “धरती माता के पास सभी रोगों का समाधान है। एक दिन हर किसी को अहसास होगा कि समूची फार्मसी की मलिकयत उसी की है, सभी दवाएं उसी के बगीचे से आती हैं।” याद रहे, भूमि को जितना हम देते हैं उससे तीन गुना वह लौटाती है।

भूमि के नैसर्गिक स्वरूप में ह्रास आने यानी इसके बीमार पड़ने के लिए मुख्य रूप से ज्यादा से ज्यादा हथियाने की प्रवृत्ति जिम्मेदार है। अमेरिकी साहित्यकार केन केसी की हिदायत पर गौर किया जाना सभी के हित में होगा। “आप उतना ही ग्रहण करें जिसका आप उपयोग करेंगे और बाकी सारे को नजरअंदाज कर दें।” यानी व्यक्ति में हवास नहीं हो और मिट्टी को समादर की दृष्टि से देखने की वृत्ति बन जाए तो मानवजाति पर मिट्टी की मेहरबानियां बरसती रहेंगी।

— हरीश बड़थवाल

Attention Advertisers !

Advertisers of the Admission Notices in *TNAI Bulletin* for the academic year 2016-2017 for Schools/ Colleges of Nursing are required to submit the copy of Indian Nursing Council (INC) recognition certificate along with the advertisement matter and payment, otherwise the advertisement shall be summarily rejected.

- Chief Editor

EVENTS OF THE MONTH

International New Year Day: 1 January

New Year's Eve on the last day of Gregorian calendar is celebrated with much fan and fanfare throughout the world on 31 December. Social gatherings, concerts, fireworks, outings, dance, etc. are usual part of the festivities. In recent years, Indian youth pick Goa and other natural locations as destinations of choice. Large crowds are witnessed at popular spots like Connaught Place in New Delhi, Gateway of India, Juhu Beach, Bandra Bandstand, in Mumbai, etc. Most people celebrate New Year eve with family and close relatives. Restaurants, hotels and resorts remain booked well in advance. Consumer goods companies make fabulous offers. Then there is, for quite some days with ringing in of the New Year exchange of good wishes, cards and gifts on the New Year. Exchange of Good Wishes apart, it is customary at New Year to make resolutions.

Advent of New Year is a subtle reminder to review the 12 months passed by and an opportunity to think and act anew so as to eliminate the drawbacks and the lacunae that hindered one's move to success. Ringing in of the New Year brings in possibilities of achieving those aims and objectives that remained half way.

World Braille Day: 4 January

Every year 4 January, the World Blind Union (WBU) celebrates the World Braille Day to commemorate the birth of Louis Braille, who developed a system of reading and writing used by people who are blind or disabled to see properly. Even after two centuries, the Braille system, adapted for languages worldwide, continues to be a highly invaluable tool of learning and communication for the blind, and it has been.

WBU has also been campaigning at the World Intellectual Property Organisation (WIPO) for the removal of copyright barriers which prevent the blind, partially sighted dyslexic and other 'reading disabled' people from accessing books.

India is home to the world's largest number of blind people; of the 37 million blind people across the world, over 15 million are from India. Good news is, 75 percent of these are cases of avoidable blindness, thanks to the country's donated eyes for the treatment of corneal blindness.

Established in 1943, till recently known as NIVH (National Institute of Visually Handicapped), recently renamed as National Institute for the Empowerment of Persons with Visual Disabilities, is an apex body of Government of India to devise appropriate plan for improving the person with visual impairment.

The Institute aims to conduct, sponsor, co-ordinate and/or subsidise research in collaboration with other NGOs and research organizations including Universities into various dimensions of the education and rehabilitation of the visually impaired; undertake, sponsor, co-ordinate or subsidise research into biomedical engineering leading to the effective evaluation of special appliances/instruments or suitable surgical or medical procedures or the development of new special appliances/instruments; undertake or sponsor the training of trainees and various specialised professionals including Teachers, Employment Officers, Psychologists, Vocational Counsellors and such other personnel as deemed necessary; and distribute, promote, or subsidise the manufacture of prototypes and to manage distribution of any or all devices designed to promote any aspect of the education, rehabilitation or employment of the visually impaired.

World Leprosy Day: 29 January

Also known as Hansen's disease, Leprosy is a chronic infectious disease affecting the skin, the peripheral nerves, mucosal surfaces of the upper respiratory tract and the eyes. It is caused by Mycobacterium leprae. It can occur to person of all ages, from early infancy to very old age. The good news is, leprosy is curable and early treatment averts most disabilities. World Leprosy Day is organised on last Sunday of January, i.e. 29 January in 2017. More than half the world cases of leprosy are in India.

The day was initiated in 1954 by French philanthropist and writer, Raoul Follereau, as a way to raise global awareness of this deadly ancient disease and call attention to the fact that it can be prevented, treated and cured.

The WHO Global Leprosy Strategy 2016-20 (theme: Accelerating towards a Leprosy-free World) seeks to strengthen efforts to control leprosy and avert disabilities, especially among children in endemic countries. The strategy emphasises the need to augment the number of skilled leprosy staff, improve the participation of affected persons in leprosy services & reduce visible deformities as also the stigmatisation associated with it. Apart from research and improved data collection and analysis, it calls for renewed political commitment and enhanced coordination among partners.

The key interventions to achieve the targets include: detecting cases early before visible disabilities are manifest with focus on children; and targeting detection among higher risk groups through campaigns in highly endemic areas/ communities. Other areas are, screening all close contacts of persons affected by leprosy, promoting a shorter and uniform treatment regimen; and specific interventions to fight stigmatisation and discrimination.

Facts about Leprosy

- * Leprosy is a chronic slightly infectious disease caused by a bacillus germ of tuberculosis family. Another name for leprosy, Hansen's disease, is after the name of Norwegian doctor Armauer Hansen who first viewed the bacillus under a microscope in 1873.
- * Most people — approximately 95% of us — have a natural immunity to leprosy.
- * Essentially a disease of the skin and nerves, leprosy does not affect the internal parts of the body.
- * Leprosy can be cured with multi-drug therapy (MDT) viz. rifampicin, clofazimine and dapsone with treatment for six months to two years, according to on the severity of the case.
- * Symptoms of leprosy are: pale patches on the skin accompanied with or without loss of sensation of the hands and feet. It is believed to be transmitted through cough or sneeze of the infected person.
- * Leprosy can have a crippling effect if it is not treated in early stages. A quarter to a third of all patients with leprosy will become disabled, according to some estimates; it is not associated with mortality. It is a public health problem in more than a dozen countries situated mainly in the inter-tropical belt of the world.
- * Leprosy continues to be one of the leading causes of preventable blindness globally.
- * Every two minutes, there is one new case world-wide.
- * About 14% of all new cases are children under 15 years old; 15% of all new cases already suffer visible disabilities.
- * Approximately 2-3 million people world-wide need ongoing care for leprosy related disabilities.
- * India has the highest prevalence of leprosy in the world, followed by Brazil, Nigeria, Myanmar and Indonesia. In US, around 150 people are diagnosed with leprosy every year.

अचार का नियमित सेवन सेहत के लिए हानिकारक है

भोजन में अचार का नियमित रूप से या ज्यादा सेवन करने वाले सावधान रहें। वे जल्द ही अनेक बीमारियों की चपेट में आ सकते हैं।

आंत का कैंसर उन्हें ज्यादा देखा गया है जो रोजाना अचार खाते हैं। कुछ तो सब्जी या दाल के बदले अचार को ही काफी समझते हैं। डायबिटीज़ के रोगियों के लिए अचार सुरक्षित नहीं है चूंकि इसे प्रिजर्व करने के लिए इसमें चीनी मिलाई जाती है।

अचार में नमक भी खासी मात्रा में मौजूद होता है जिसमें सोडियम है। यह शरीर में सूजन के लिए जिम्मेदार है। नमक ब्लड प्रेशर बढ़ाने के अलावा पेट की समस्याओं है। इसका कारण है तेल बहुत होने से यह ट्राइग्लिसराइड स्तर में बढ़ोतरी करता है।

Informed Consent is Essential for Patient-Doctor Relationship

The moment a patient is assessed in Emergency, the patient or his attendant is asked to sign on dotted lines on several papers. In anxiety and apprehensions about the fate of the patient, the accompanying kith and kin have neither the respite nor interest in perusing the lengthy documents called 'Informed Consent' as their sole concern is, recovery of the critical patient.

Not only in emergency situations, in routine cases as well the patient or attendant is cursorily told about the actual plight of the patient as well as the proposed line of treatment. Not infrequently, a doctor would appear from operating room, write the name and details of the medicine or implant on a piece of paper with instruction to procure it immediately. The chit would also contain particulars of the shop.

Informed consent means exercising knowledgeable option regarding medical care after having learnt the modus operandi and the implications of the proposed treatment or procedure vis-a-vis other options, which is one of the universally accepted rights of the patient. It is his prerogative to exercise his well considered choice when the issue is that of tempering with his body.

Unanimously accepted medical code of ethics warrants that the nature of disease, its gravity, the medical versus surgical options and in surgery, the alternatives together with costs involved etc. including the health and material risks, comparative analysis of benefits are explained to the patient or his kin in a language and manner that he/she understands unambiguously. Existing consent forms are too lengthy and elaborate; these need to be shortened and reworded in simple language.

Helsinki Declaration guidelines warn that "the benefits, risks, burdens and effectiveness of a new intervention must be tested against those of the best current proven intervention" before its general application. Admittedly, for any drug formulation or surgical procedure to be superior to the existing ones in terms of efficacy, risk, cost, and worth large scale application, clinical trials are essential to ensure its health benefits over space, time and varied climatic conditions. Yet in their over-enthusiasm to demonstrate innovation and advance their career prospects, some researchers of clinical trials neglect the vital aspect of duly seeking the informed consent of study participants. A case of large scale havoc in our country with low 'informed consent consciousness' was witnessed two years ago when 254 Indian women from poor families of Mumbai slums, villages in Osmanabad (Maharashtra) and in Dindigul (TN) succumbed to a US-funded clinical trial for screening of cervical cancer.

The concept of informed consent has been diluted by few health experts on the plea that the patient or his attendants are unable to make out the intricacies of the pathology and therapeutics and fail to exercise judicious choice. In advanced nations many patients legally appoint someone to take decisions on his/her behalf. As for faith in doctor, it was never beyond doubt in an era when they practiced with missionary zeal to serve – it is not so any more.

With growing consumer consciousness we witness rising numbers of doctors being driven to law courts for improper or mercenary handling. In this era patients are awaking to their rights of best alternative treatment available. They can no longer be taken for granted by denying a copy of 'informed consent' or their medical record. Their expectation for being adequately informed about the medications and procedure, to which they are being subjected, is legitimate. Open briefing shall shed the misunderstanding in patient-doctor relationship. ■

Invitation for Becoming Peer Reviewer for NJI

Nursing Journal of India (NJI), the bi-monthly research periodical of The Trained Nurses of India (TNAI) is brought out every alternate month i.e. in February, April, June, August, October and December. NJI contains original research articles, case studies, review articles, reports and general articles on Nursing and related issues.

We invite the subject experts in with sufficient experience exposure in any field of Nursing. The eligibility conditions for Peer Reviewer are as under.

- Masters degree in any field of Nursing from a recognized University in India or abroad;
- A minimum of ten years of experience in hospital/ reputed nursing home or clinic/ health care setting, or in college-level teaching in a recognized Nursing institution;
- The candidate must have got published at least ten articles in indexed/ reputed journals;
- The candidate should not be already a Peer Reviewer for more than two Nursing/ Health Journals.

Only such candidates, who can submit their observations on the article / other publication material, as per TNAI format, within three weeks of receipt of manuscript, are advised to apply.

Interested candidates may submit their CV to the Chief Editor, Nursing Journal of India, The Trained Nurses Association of India, G-17, Green Park, New Delhi - 110 016 by post or via email (tnai_2003@yahoo.com, with subject line: Application for Peer Reviewer).

Lodging at TNAI Headquarters Made Easier

TNAI Hqrs has expanded its capacity to accommodate more of TNAI members visiting Delhi. The TNAI members including students visiting Delhi on official or professional tours can avail the lodging facility, within the TNAI Hqrs premises at reasonable charges. The per day charges are as under:

TNAI Members:	Rs. 600/-
SNA Members:	Rs. 250/-
Non-Members:	Rs. 900/-
Children below 5 yrs:	No charges
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However, due to limited beds, interested members may get the booking done in advance.

Secretary-General, TNAI



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