

# APPNA 41st ANNUAL CONVENTION

July 4-8, 2018 Hilton Anatole, Dallas, Texas



Healthcare . Education . Advocacy



# Editor's Message



The geopolitical situation around the globe has changed significantly over last two decades and paradigms of human freedom, democracy and civil rights are being confronted with many threats and challenges. The members of APPNA with their unique and global perspective are offering unprecedented services around the world. APPNA has continued its momentous journey, making a difference in lives of many across the globe. This year the official theme of APPNA is "Healthcare, Education and Advocacy". This theme comes at a time when Pakistan is facing unprecedented and formidable challenges in

healthcare. Mass urbanization, industrialization, explosion in population, escalating health costs and disparity of service provision between urban and rural areas have emerged as consequential issues with far reaching and perilous impact on average citizens. The access to comprehensive health care remains a challenge, especially for elderly, women, children and disabled.

APPNA President Dr. Iqbal Zafar Hamid has launched a robust, successful and concerted advocacy campaign to promote education and healthcare around the globe. The APPNA Mobile Health Clinic Project was initiated earlier this year in remote and distant towns and villages of Pakistan. Many medical schools, local alumnus in US and entrepreneurs in Pakistan are already engaged in this unique project. Teams of highly skilled professionals from APPNA are offering free medical and surgical services in many parts of the world including Pakistan. President APPNA has taken concrete steps in establishing a Medical University in US and we are confident that one day this dream would transform into a reality. President APPNA Dr. Iqbal Zafar Hamid and President Elect Dr. Naseem Shekhani have signed a historical and landmark MOU with AAPI and BMANA earlier this year to improve healthcare in South Asia. The advocacy campaign is vital to promote the rights of those who are marginalized, vulnerable and victims of social injustice, poverty and in laying the foundations of a free society based on the values of justice, equality, acceptance and self-determination. We commend these efforts of APPNA under the leadership of President Iqbal Zafar Hamid.

APPNA has come a long way and has traversed through many precarious paths and stands firm after weathering many storms with turbulent and surging tides. We are at the crossroads of history and APPNA can become a lightning rod of hope and peace for others by setting an example of selfless, compassionate and benevolent work that must transcend across the barriers of human divisions based on color, creed, religion and political bigotry. Our journey has just started, destination is still far, and our dreams have yet to become reality. Let's join hands, walk together, keep our eyes focused towards infinite skies and continue this momentous journey for a better tomorrow, so we could tell our future generation with pride that, "We were the change".

In the end, I want to thank publication committee and individual authors taking time out of their busy schedules in contributing to this magazine. On behalf of Publication Committee, I would like to extend a special thank you to APPNA President Dr. Iqbal Zafar Hamid for his visionary leadership. Last but not the least, we are indebted to Dr. Dawood Nasir and his team for their hard work, dedication and commitment in arranging one of the most successful and historical summer convention.

Intikhab Ahmad, MD *Editor-in-Chief* 

# President's Message



Dear Members, families and guests,

For decades, APPNA Summer Convention has been the event where thousands of our members and their families get together for nostalgic reflection of the good old times, discuss current medical advances, give opinions about current geopolitical issues and brainstorm for APPNA to reach its full potential through education, healthcare, advocacy and philanthropy. This is the time of the year

when we celebrate and appreciate all the hard work by hundreds of our committed and dedicated members throughout the year.

Year 2018 has been extraordinary and unusual in the sense of what we have achieved so far despite all the unnecessary distractions. The credit goes to resilience of membership, who continue to believe in the organization and in those who serve it.

I have been very fortunate to be able to build a team of dedicated members from all around, who dedicated themselves to serve the organization without any personal interest. I was able to reach out to all the past Presidents of APPNA and got a very encouraging and supporting response. I was able to gather the best APPNA had to offer, and amazingly, everyone reacted positively to walk with me to take APPNA to newer heights. Executive committee and Council supported me in every endeavor and we were able to think out of box and act accordingly.

Within the first six months of my tenure, I am humbled and honored to report that:

- 1- To provide a true image of APPNA and propagate our projects out to our membership and the community at large, we have been able to collaborate very well with the media. We have signed an MOU with HUM TV, where they will propagate our Philanthropic projects from their stage of 6th HUM awards to be held in Toronto on July 28, 2018.
- 2- Two Mobile Health Clinics are currently operational in Mirpurkhas who are reporting to treat almost 1000 patients per month. Up to 10 more are being added as we speak in different parts of the country.
- 3- Bylaws amendments related to governance restructuring were approved by APPNA Council with overwhelming majority during APPNA Spring meeting.
- 4 MOU with APPI & BMNA: In any democratic society, strength is in numbers, therefore, I was able to sign a MOU with APPNA's counterparts from India and Bangladesh, AAPI (American Association of Physicians of Indian Origin) and BMANA (Bangladesh Medical Association of North America). This coalition makes us 130,000 members strong as it constitutes almost 15% of physicians workforce in USA. We will be working for the welfare of physicians from South Asia both here in US as well as in their respective countries.
- 5- "Dress a Bride" was introduced and is being very generously accepted and participated in by our members and their families Please donate your "clothes & shoes which are in good condition" to help the girls being wedded in Pakistan.

- 6- "Food Pantry" is in full swing to help the people in need in North America through the cooperation of different alumni and chapters.
- 7- Rohingya relief work has provided financial and professional support and helped those in dire needs Currently ongoing with the support of OBAT helpers.
- 8- Young Physicians support through YCP and Advocacy has greatly impressed me with their enthusiasm and devotion who have been mentoring new graduates and assisting with their visa issues.
- 9- Medical missions to Guatemala and Pakistan already completed. More trips are planned in the second half of the year.
- 10- Cornea transplant was an enormous success with more than 900 corneas provided for transplant in Pakistan and more are enroute with your help.
- 11- APPNA University in the making A tangible project of APPNA that will make every Pakistani proud of their contribution. Details to follow.
- 12- Seminars, workshops and hands on Surgery and anesthesia in Pakistan are currently in progress and will continue.
- 13- APPNA Pakistan Secretariat is formed to assist you for most of your needs in Pakistan. It is a collaborative effort of APPNA and its Sponsor CureMD.
- 14- 1st APPNA Global Healthcare Summit in Pakistan, a multi-disciplinary academic conference, first of its kind that will match the standards of any International conferences shall be held in Lahore and Karachi between December 18 & 22, 2018.
- 15- On the pattern of CAPPNA and SAYA, we are excited to announce the birth of APY(Young professionals of APPNA) which will cater to the age group of 24-33

To move forward and embrace the future with dignity, we need togetherness and unity. These are indeed crucial times for APPNA and more than ever, we need to stay united and continue to nurture a better future for our organization. We cannot stand still or slip backwards. We must go forward now, together.

I personally welcome you to our 41st Annual Convention and looking forward to seeing you in beautiful city of Dallas where the Host Committee is working very hard to ensure that you are taken care of every fine detail and making sure that you feel just like at home, away from home.

See you in Dallas.

Iqbal Zafar Hamid, MD President APPNA 2018

# Chair Host Committee Message



On behalf of APPNA Summer Host Committee, I invite all of you to attend the spectacular 41st annual convention in magnificent Anatole Hilton, in downtown Dallas.

In this year's meeting we are introducing several new projects in education & youth activities to engage the membership. Along with outstanding CME lectures, new recertification courses for ACLS, pain workshop & dermatology workshop are instituted.

We are having biggest youth convention in the history of APPNA in collaboration with Pakistani Embassy. Besides debate competition, chess championship, basketball matches, talent show, there are several lectures to mentor the youth and to address youth issues. This youth convention will stretch throughout APPNA meeting and youth will have their own entertainer for Saturday night.

We have also organized a world class mushaira with world class poets from all around the globe.

This year APPNA alliance is having a record attendance and due to high registration, there will be a sit down dinner for the attendee's.

Fashion show on Friday will have top class designers from across the world with outstanding models. The evenings are filled with top artists & entertainers to enjoy the melody in the family friendly atmosphere.

For the convenience of the members and their guests, more than two hundred booths are set up, so that businesses can showcase their valuable products to the sector of the community with strong buying capacity.

The host committee has worked very hard to make it a family friendly meeting with something for everyone from every age group to do. Education, advocacy, social & charitable projects, networking, camaraderie and world class entertainment are just a few of the highlights to mention.

We the host committee of APPNA'S 41st Annual Convention, cordially invite you to one of the most unique experiences of your home away from home. You will surely have the time of your life with your colleagues, business associates, friends and family.

Dawood Nasir, MD Chair, APPNA Summer Convention 2018

## Co-Chairs & Advisor



Mohammad Amir, MD Co-Chair Host Committee



Zahida Siddiqi, MD Co-Chair Host Committee



Naushad Zafar, MD Co-Chair Host Committee



Jalil Khan, MD Advisor



#### CITY OF DALLAS, TEXAS

The "Big D," as Dallas is called, is a glittering city of skyscrapers in the flat Texas prairie. The city offers the amazing experience to those who want it. However, Dallas is not stuck in the past. The city practically invented high-end department store shopping with Neiman Marcus, and an impressively sized Arts District. Head to Dallas to see the Texas you read about as a kid, but be prepared for a grown-up surprise.

Dallas also offers great selection of South Asian culture with variety of Pakistani restaurants, shops and other retail outlets.



#### VENUE INTRODUCTION

From stylish guest rooms to elegant suites, choose the space that is right for you at Hilton Anatole. All rooms offer thoughtful amenities including comfortable beds, WiFi, and HDTV.

New JadeWaters resort pool complex with a leisure pool, lazy river, luxury cabanas and a splash zone with two 180-foot slides. Home to a valuable fine art collection of more than 1,000 pieces. V Spa specialty facials, massages and more; book appointment online. Over 349,000 sq. ft. of flexible downtown Dallas meeting space.





SHEILA JACKSON LEE 18TH DISTRICT, TEXAS

July 7, 2018

#### Dear Friends:

On behalf of the constituents of the Eighteenth Congressional District of Texas, I am delighted to express my sincere congratulations to the Association of Physicians of Pakistani Descent of North America (APPNA) on the occasion of their 41<sup>st</sup> Annual Summer Convention.

I would like to take this opportunity to congratulate the Association of Physicians of Pakistani Descent of North America (APPNA) on their dedicated service and consistent commitment to over 18,000 physicians of Pakistani descent. Your shared values of compassion, trust, and dedication compel the association's membership to serve as model healthcare providers and exemplary Pakistanis.



Once again, I congratulate the Association of Physicians of Pakistani Descent of North America (APPNA) for celebrating 41 Years of service. Your contributions and charitable, educational, research and scientific projects around the world unite membership. I wish you many more years of prosperity.

Sincerely,

Sheila Jackson Lee Member of Congress



# Certificate of Congressional Recognition 18th District, Texas

## Association of Physicians of Pakistani Descent of North America

On the Occasion of the

### 41st Annual Summer Convention

- WHEREAS, The Association of Physicians of Pakistani Descent of North America (APPNA) was founded in 1976 with the mission to support scientific development and education in medicine, and delivering better health care, regardless of race, creed, or gender; and
- WHEREAS, The Association of Physicians of Pakistani Descent of North America has a membership of approximately 3,000 and headquarters based in Westmont, Illinois. The Association of Pakistani Descent of North America represents over 18,000 physicians of Pakistani descent and is the second largest International Medical Graduates (IMG), association in the United States; and
- WHEREAS, The Association of Pakistani Descent of North America is the largest organization of professional Pakistani Diaspora in North America. It is a not-for-profit, non-denominational organization that is involved in a number of philanthropic projects in Pakistan and the United States. APPNA members represent an array of specialties of medical practice; and
- WHEREAS, The Association of Physicians of Pakistani Descent of North America (APPNA) holds a National Healthcare Day (NHCD) providing free medical care annually and currently has free clinics in twelve states. The APPNA provides yearly scholarships to those in need along with a competitive loan program for deserving candidates.

NOW, THEREFORE, BE IT RESOLVED that, on behalf of the constituents of the Eighteenth Congressional District of Texas, I take great pride in recognizing and congratulating the Association of Physicians of Pakistani Descent of North America (APPNA) for their commitment to support scientific development and education in medicine, and delivering better health care, regardless of race, creed, or gender. Your dedication is worthy of respect, admiration and commendation of the United States Congress.



Sheila Jackson Lee Member of Congress July 7, 2018

# President Elect's Message



FROM THE DESK OF APPNA President-Elect 2018.

Greetings Everyone! Over the past six (6) months, I've had the opportunity to participate in numerous meetings to help me get a better understanding of how to position APPNA for greater success in the coming year. As I reflect over the information gathered, unity is the basic ingredient to achieve our goals. It is an exciting time to be a part of APPNA because a lot is going on and there are many

opportunities for each of us to learn, assist our juniors, look for opportunities where there is synergy to develop new relationships and partnerships, create and implement new initiatives and grow our organization!

**Strengthening the infrastructure** of APPNA will position us for more participation and growth. Understanding and acknowledging the skills and contributions of all members, will bring out innovation among our membership. Numerous projects are occurring, to name a few: APPNA Food Pantry, APPNA Clothing Drive, and APPNA Cornea Transplant Program. All these are successful programs.

**Develop advocacy in the healthcare system and be an active voice in medical education.**Medical education is a high priority which not only includes general CME, but also work-shops on a variety of topics. Streamlining medical education and establishing standard throughout Pakistan provides more uniform training for young physicians. Additionally, more fellowships for young physicians and to add other certifications, such as, ACLS, BCLS to our CME.

**Effective conflict resolution process.** Efforts will be made through arbitration to determine the most effective and objective approach of resolving internal issues to mitigate escalation of problems. The leadership needs to take a more proactive role in resolving issues.

*Merit criteria for state-run Medical Colleges.* Looking at merit issues, denial of the opportunity to become doctors based on what I view as greed, over a promising future, should be unacceptable. It should be required, for state-run Pakistani Medical Colleges, that 100% of the seats are given based on merit. A policy contrary to merit basis does not serve students who work hard and desire to be physicians.

LET'S WORK TOGETHER AND MAKE A DIFFERENCE!

Sincerely,

Naseem A. Shekhani, MD President Elect APPNA 2018

# Secretary's Message



Dear APPNA Members Welcome to Dallas!

Dallas Host committee lead by Dr. Dawood Nasir has worked very hard to make this Summer Convention the best ever by APPNA. Team 2018 is strong and ready to deliver!

Our President Iqbal Zafar Hamid has laid out a plan with a futuristic approach as you heard in the Strategy and Planning as well as Spring Meetings. The team is working hard to take every one together irrespective of political differences.

APPNA leadership is committed to transparency, financial and ideological growth of the association. The team is involved with improving educational, health care delivery, charitable and governance projects in APPNA. New challenges with the current geopolitical environment and new litigation culture are being handled with utmost care. APPNA's Legal Team has updated and was present at the spring meeting. Spring meeting had an open session with APPNA council where general information was shared and a closed session with the control group (Executive Committee) where privileged and non-privileged information regarding our legal challenges was shared.

Our Treasurer Lubna Naeem had presented to council a very open and transparent financials of APPNA and the finance committee is working hard to get the redistribution of 50% of APPNA's assets in large cap company as approved last year in the spring council meeting.

Good Governance model is approved by the APPNA council at the spring meeting with overwhelming majority and will be voted upon at the General Body meeting in Dallas. The role of Implementation Committee is becoming more and more important as many decisions made by council are never implemented and that's where things fall off - to the point that the problems reach monstrous proportions.

The hierarchy of the decision making process and the chain of command in the association is broken at many levels leaving the association in almost at a constitutional Crisis! Where various organs of the association are making independent decisions and implementing them as it may suit their purpose. By law of the land and in particular Illinois Law where our association is based out of, the law is very clear as explained by the APPNA Attorneys. Let me reiterate it!

General Body supersedes all, then comes APPNA Council (EC plus all Alumni and Chapter Presidents) then EC (Executive Committee) comprised of 5 elected officials of the association who are THE ONLY Board of Directors recognized per the law of the land and President as being the only spokes person for the association, then are committees of the association including Board of Trustees. BOT is like any other APPNA Committee and it's primary function is at the time of dissolution of the association when it becomes the care taker of all the assets of the association. All these committees in turn report to Board of Directors (EC) and then individual members.

We are a service oriented organization and our projects bring us together and are the reason for our existence - we are working hard to implement tangible and highly financially solvent projects like APPNA University and delivery of health care which further strengthen our charter.

We have a lot of challenges but united together, we can handle any thing - As your Secretary, I am facilitating with an open door policy and abiding by the constitution and bylaws irrespective. I welcome critique and disagreement, as that is the only way we can deliver better results with improved performance!

Please be involved, share your opinion and make it matter - please talk to me! Join us at the General Body meeting and Council meeting in Dallas.

M. Sohail Khan, MD Secretary APPNA 2018 Let's focus on NO to Negatives and YES to Positives

# Treasurer's Message



Esteemed Appna professionals,

APPNA's strength of commitment to our communities is measured on how much members can count on us. It is my pleasure to present to you the state of current APPNA finances and what the future might hold for us.

# KEEPING IT TRANSPARENT LONG AWAITED AUDIT COMPLETED:

Benefit of trust comes with promises kept.

The organization is catching up on what has been pending.

- 1- APPNA is fully caught up on all tax and audit filings for both APPNA and APPNA Foundation. The next filings and audit (2017) are due in November 2018.
- 2- It was approved in the Executive committee to put the summary of the audit on APPNA's website and the complete report be available on request.
- 3- The third party conducted the audit in accordance with auditing standards generally accepted in the United States of America and completed the twenty six page report.

# WHERE WE ARE AT AND WHAT THE FUTURE MUGHT HOLD FOR US CURRENT MODEL OF INCOME SOURCE: FUTURE IS IN MEMBER DRIVEN PROVISION OF SERVICES:

Besides financial planning, budgeting, reporting, monitoring of accountability policies, audits and keeping it transparent, being an elected official it is also my role to give direction and make proposals.

1- Currently more than two thirds of the income source comes from local meetings and international trips.

Profits from the meetings mostly cover the operational costs and some profits are allocated to few projects. The main share and the objectives of the meetings are that of mixers sponsored by our circle of friends to provide an opportunity develop friendship, possible networking and be entertained, that's where we have the most attendance!

2- And at the other end of the spectrum a dismal less than 1/3 of the income comes from Membership

This mirrors the organization is not member driven or member responsive.

The majority of income should be from membership so that APPNA remains first and foremost responsive to its members.

#### PROVIDING VALUED BENEFIT TO THE MEMBERS:

https://youtu.be/YUOX2hQB\_hk

We must offer tools, products and services to these physicians to help with their practices so they can offer the best care, offering members valued benefits and meaningful services so they can get far more representation than they actually pay in.

#### **BOTTOM LINE:**

There needs to be a paradigm shift:

There needs to be member driven provision of services to accomplish our mission of APPNA's financial stability and growth.

#### STANDING WITH PAKISTANI PHYSICIAN PROFESSIONAL

Lubna Naeem M.D APPNA TREASURER 2018

# Immediate Past President's Message



Dear APPNA Members,

APPNA seems to be at cross roads again and it is not an easy statement to be made nor should it be taken lightly. While APPNA has done a marvelous work through the past 40 years, it has always been felt that it never reached it's destined potential. The inner conflicts among its worthy members has led to significant discord and left a bad taste for the members of the organization. Unfortunately, the financial ramifications of the legal dispute between a past candidate

and present and past officers have resulted in a loss of significant amount of money, which could have been put to a more productive and humanitarian use. In the spirit of resolving the legal issues President Elect Dr. Naseem Shekhani and I have tried to mediate a resolution so that APPNA can be absolved of its legal battle, but it is still work in progress. I wish and pray that APPNA EC and board of trustees will be successful in reaching at a reasonable conclusion to end this legal turmoil in near future. After all, we all wish nothing but best for our beloved organization.

I am excited to update you on the project of free mobile health clinics from the platform of APPNA. The first mobile unit in collaboration of ICNA Relief started functioning as a health clinic in Dallas and our own Dr. Dawood Nasir and Mehmooda Nasir volunteered their services to see uninsured patients. Second unit was used for Health Fair lead by Dr. Babar Rao in New York.

The other 2 units are in progress and will be inaugurated in near future. As mentioned earlier, they have been equipped with all the necessities to work as an outpatient care clinic. The units will be stationed in Texas, Florida, Northeast and Midwest. It will expand our medical mission throughout USA and will be a great way to put APPNA's good name out in the community.

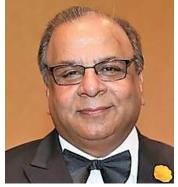
APPNA is at forefront of community service in USA, and our work has included community projects all over the country, through APPNA free clinics, medical missions and ongoing food pantry program. I hope that all of these and other projects will continue for years to come and become a beacon of light to attract those physicians in joining APPNA, who feel that APPNA hasn't done enough.

Sincerely,

Sajid Chaudhary, MD.

Immediate Past President APPNA

# **Publication Committee Report**



Dear APPNA members, Greetings.

This year APPNA Members are writing a new positive history. We had record breaking attendance in APPNA spring meeting in Chicago. It was well organized meeting. The APPNA mobile Clinic project is getting an unprecedented response and will be remembered as a milestone in APPNA history.

APPNA advocacy committee is working hard to communicate the real problems of Physicians of Pakistani descent. This is just the beginning. APPNA annual meeting is just at the horizon and new landmarks will be achieved in this monumental and spectacular convention. The organizing committee has worked hard to welcome and entertain you during the meeting.

Our strength depends upon our numbers. We need help from APPNA membership to bring new members to APPNA family.

In last, I personally thank to all members of memberships committee and our leader Dr. Iqbal Zafar Hamid for their support and leadership.

May God bless APPNA, USA and Pakistan

Your sincerely, Joseph Emmanuel, MD. *Chair, Publication Committee 2018* 



Intikhab Ahmad, MD Editor-in-chief



Zahida Siddiqi, MD *Member* 



Furqan Moin, MD *Member* 



Suleman Hashmi, MD *Member* 



Salman Haroon, MD *Member* 



Sunbal Zafar, MD *Member* 



Rehana Kaushar, MD *Member* 



Nadeem, Zaman, MD *Member* 

# Communication & Media Committee Report



APPNA historically has been outstanding in providing educational activities and philanthropic services both in Pakistan and here in United States, however, did not get due recognition due to lack of media coverage. One of our President, Dr. Iqbal Zafar Hamid's vision was to promote a positive image of APPNA in Pakistani community.

I am pleased to inform you that APPNA has signed a Memorandum of Understanding with HUM Network Limited, owner of HUM TV, who has already started advertising our work by televising a great coverage

of APPNA Mobile Health Clinic. They have agreed to conduct educational panel discussion, media bites to educate public of various illnesses and how to prevent them. They will also help us promote our projects in Pakistan such as Mobile Health Clinic, Global Healthcare Summit, Hepatitis Awareness and Maternal & Childcare campaigns. They will provide coverage to our meetings. HUM TV will remain our media partner during 2018 and are willing to work with incoming Presidents. They have agreed to promote APPNA's project in their upcoming 6th Annual Awards being held in Toronto on July 28, 2018 which will be a great boost to our image both in Pakistan as well as in Pakistani communities across the world.

For the first time, we have assigned a host committee exclusively to welcome and assist media personnel who are attending the 41st APPNA Annual Convention. We held our first press conference in Dallas on May 5, 2018 to introduce not only summer convention but many of our other ongoing projects and those which are scheduled. It was welcomed by media with great enthusiasm and in fact few TV channels and newspapers reported and provided excellent coverage. A 2nd press conference is scheduled on July 4th, 2018. Local non-Pakistani newspapers and radio stations from Dallas area also have shown great interest in providing due coverage to our Summer Convention.

We have efficiently utilized social media to inform our members about great projects and philanthropic activities that has been going on for past many months.

You may also have noticed the new more attractive format of our eNewsletter with more colorful graphic design and brief introduction of the projects that has a hyperlink for videos, photos and a narrative detailed description of the project. This provides a quick update at a glance and more information at links if they desire to do so. This has been very well received and viewing has significantly increased compared to previous years.

We are striving to provide a true positive image of APPNA and bring awareness to members and general public of all the academic, social, charity and philanthropic activities that APPNA has been engaged in over years. I have been fortunate to have an excellent team of dedicated and hardworking members, without whose support and assistance, we could not have accomplished what we have so far. We welcome any constructive feedback to improve these services on your behalf.

I wish you a safe travel and looking forward seeing you in Dallas.

Best Regards, Akhtar Hamidi, MD, FAPA, CCHP Chair APPNA Communications & Media Committee 2018

## Research, Education and Scientigic Affairs Committee



It is an honor to present this year's report of the Research, Education and Scientific Affairs Committee to improve the attendance. To improve attendance, this year the committee has revamped the CME program. As a result of those efforts, the CME program at the Chicago Spring meeting was one of the highest attended programs.

For the Summer Meeting in Dallas, we have created a unique neverbefore seen program including not just CME, but also practical workshops on common office based procedures in dermatology and

chronic pain management. These are hands-on learning opportunities for primary care and family practitioners who want to increase the breadth of services provided in their offices. We have included BLS and ACLS certifying courses to help physicians fulfill their licensing requirements. An additional forum will educate our members about the current mental health crises, namely, suicide and opioid crisis.

The Scientific Program covers cutting edge topics addressing the needs of the practitioner in this changing healthcare environment. In addition to the clinical updates, these topics include Practice management, Information technology, entrepreneurship, immigration reform, ACO, ethics and hospice and clinical molecular genetics. In all more than 24 CME credits will be awarded during this summer's meeting.

We are having a scientific poster competition, where the top three posters will be awarded \$500 each and a chance to present their work on the podium. We are also giving three "RESA Awards" to physicians demonstrating excellence in Research, Education and Community Affairs. The Nomination was done online and the Committee chose the awardees in a transparent manner. This year's award winners are Dr Teepu Siddique (Research), Dr Faisal Khosa (Education) and Dr Asim Shah (Community Affairs).

This would not have been possible without the help of my committee members, especially Dr Babar Rao, Dr Irfan Suleman, Dr Irfan Mirza and Dr Nameer Haider, the Host Committee Chair Dr Dawood Nasir and President APPNA 2018 Dr Zafar Hamid. I also want to thank the CME committee members of the Summer Convention for their hard work in making this program a success. I look forward to an exciting remainder of the year for the RESA committee and APPNA.

Sincerely
Saqib Masroor, MD
Chair RESA Committee

# Scholarship Committee Report



Dear Friends and Colleagues,

APPNA Alumni Scholarship Project was started in 2013 with a pledge of generous donation by an alumni member in the amount of ONE MILLION DOLLARS. The Scholarship Program is intended to help deserving students enrolled at respective medical colleges in Pakistan to defray some of their educational expenses. This is a way for us to Thank God Almighty for all the blessings we have had and help future students with their studies. The money is distributed from

the appreciation and income of invested funds and we are hoping that this program will be continued for years to come. The Scholarship Committee Members, in collaboration with the respective Alumni, have worked very hard to raise funds for this noble cause and have been able to raise 1.1 million dollars.

These funds are being invested in the dedicated APPNA Scholarship Endowment Account with sub-accounts for each alumni, according to the APPNA Finance Committee Guidelines. The investment is being managed by Stephens Inc., a member of New York Stock Exchange, under the close supervision of Hank Bashore who has been diligently managing APPNA Accounts for over 25 years. As you can see, we have had significant appreciation while we have distributed funds to the participating Medical School Alumni to benefit the needy students for past 3 years.

Following is a breakdown of Funds as of May 31, 2018:

Medical College	Initial investment	Funds Distributed	Current Account Value
Nishtar Medical College:	\$920,690.00	\$75,000.00	\$ 1,096,118.10
King Edward Medical University:	\$472,647.00	\$38,000.00	\$548,272.96
Jinnah Sindh Medical University:	\$182,376.00	\$16,600.00	\$215,891.95
Quaid-I-Azam Medical College:	\$128,300.00	\$9,700.00	\$160,106.13
Rawalpindi Medical College:	\$112,800.00	\$7,200.00	\$140,525.49
Fatima Jinnah Medical College:	\$79,330.00	\$5,350.00	\$92,293.59
Khyber Medical College:	\$28,063.00	\$2,450.00	\$34,698.15
Bolan Medical College:	\$20,000.00	\$0.00	\$21,940.26
Totals:	\$1,944,206.00	\$154,300.00	\$2,309,846.63

BECAUSE OF THIS PROGRAM SCHOLARSHIPS HAVE BEEN GIVEN TO 125 STUDENTS AT VARIOUS MEDICAL COLLEGES IN PAKISTAN.

The Scholarship Program is ongoing. All donations are TAX DEDUCTIBLE. Please visit www. appna.org to donate online or to download and print the pledge form to make your payment by check or credit card.

Respectfully Submitted,

M. Masood Akbar, M.D. Ghulam Qadir, M.D.

Chair - Scholarship Committee Co-Chair - Scholarship Committee

# Advocacy & Legislative Affairs Committee Report



Advocacy Committee of APPNA 2018 started work at the beginning of the year. The target was to engage all politically active APPNA physicians as well as APPNA alliance members. Two PACs (Political Action Committees) comprising majorly of APPNA physicians were brought on board with APPNA ADVOCACY COMMITTEE and an MOU was signed with PAKPAC to get help from its resources as well as consultant for APPNA ADVOCACY COMMITTEE was hired via that MOU. PAKPAC agreed to do exclusive Luncheon during Day on The Hill and invited Congressman Raul Ruiz, MD, a son of an immigrant and a Harvard trained physician. APPAC had to cancel their dinner during Day on The Hill due to some other commitments but it has assured its unconditioned help and support.

With the consensus of all committee members, Wednesday, April 25th, 2018 was picked. It was almost impossible to get nice room on "Wednesday" during election cycle, but using relationship of PAKPAC with Congressman, Mike Turner (R-OH), prestigious Speaker room H-122, exactly under the dome of capitol hill was obtained and by the time you will be reading this report, we would have had a great Day On The Hill. The agenda is simply one liner, "100% visa clearance for all matched residency candidates on time". The revolutionary step taken by APPNA PRESIDENT 2018 Dr. Iqbal Zafar Hamid and APPNA PRESIDENT ELECT for 2019 Dr. Naseem Shekhani, earlier this year during strategy meeting was to sign an MOU among APPNA, AAPI and BMANA to work together to improve healthcare in South Asia. This MOU gave rise to invitation of AAPI to APPNA to join their Day on The Hill on April 12th, 2018 and a delegation under the leadership of Dr. Shekhani attended it which gave us a chance to meet legislators and invite them on APPNA Day on The Hill on April 25th, 2018.

Since last year, there has been an epidemic of J1 refusals which got improved immensely with efforts of Advocacy Committee and YPC but it affected residency programs since residents couldn't join on time, the focus this year is to work on it in a way that it is solved permanent basis. Questionnaire was created to get all the information from applicants about the irregularities which might had caused "red flags" last year and gave chance(s) to visa councilor to refuse visas under section 214. Councilor can refuse visa under this law that the applicant will not return to the country of origin and his decision is final. At present there is legislation in senate to revoke 214. We will explain to the state department that our J1 visa holder physician are all legal and follow the guidelines of B1/B2 during residency quest.

The plan during state department meeting is

- 1. A group of five members will meet with state department officials to explain what happened last year and and that we don't want it to repeat again and are we want to help State Department anyway possible 2 We are preparing list of matched candidates in 2018 and also segregating lists of candidates according to constituency to give pertinent congressmen relevant cases of residents to get the support.
- 3. We are asking our representative to ask the state department to explain the reasons for last year epidemic and make sure this doesn't happen to our visa applicants this year.
- 4. We plan to circulate a petition to be signed by our members to be sent to secretary of state, if needed 5. We have retained a lobbyist/consultant via MOU with PAKPAC to facilitate our work at the congressional and state level.

WHAT CAN YOU ALL DO?

- -Call your representative to support visa issues.
- -Ask them to cosponsor the GRAD ACT.

We are very hopeful to get 100% visa clearance this year Regards,

Rao Kamran Ali, MD Chair Advocacy Committee APPNA

# Need Based Limited Term Loan For Medical Graduates - NBLTMG Report



Dear APPNA Family,

Need Based Limited Term Loan for Medical Graduates Committee is comprised of twelve members from various alumni. All the applications are sent to all members and decision is made on consensus. No one including chair and co-chairs have any discretionary powers at all. So far all of the applicants have been given loans, since the restricted fund is established in mid-October 2016. To date, over \$40,000.00 has been disbursed and more are in process. All applicants that fulfilled the most criteria have been selected by committee with 80-90% consensus.

It's a matter of great pleasure and honor that SIX candidates sponsored by "NEED BASED LIMITED TERM LOAN FOR MEDICAL GRADUATES" have been matched in 2018 while TWO were matched in 2017 and one of them returned 100% loan. Candidates were sponsored by:

Dr Najeeb Rehman to a small medical college candidate in Punjab

Dr, Ijaz Ahmad to SMC grad

Dr, Rizwan Naeem & Dr Mohammed Yaseen Abubaker combined to SMC grad

Dr, Raza Khan to AIMC grad

Dr, Rao Kamran Ali to a small medical college grad in Sindh

Dr, Aisha Zafar, Dr Rashid Hanif, Dr Omar Atig to a small medical college grad

Thank you all sponsors for having a faith in young physicians and helping them!!!!

(We don't mention the names of small medical colleges since only one to two grads match from there and it can reveal identity)

These all matched candidates will return 100% loan to relevant loaners within one year with NO interest.

This is the philosophy-of our committee to help our youngsters without losing a dime!!!! It's called WIN WIN deal.

Thanks to all Committee members, Drs Aisha Zafar, Muhammad Hassan Majeed, Faisal Jafri, Nadeem Shaikh, Jalil Khan, Ahmad Saeed Khan, Raza Khan, Waqas Ahmed, Farrukh Awan, Sarim Mir, Intikhab Ahmad, Najeeb Rehman, Special thanks to Dr Nasar Qureshi for helping creating it, to Dr Sajid Chaudhary and Dr Iqbal Zafar Hamid for fully supporting it!!!

We need alumni to participate in it actively since a few members can't help all physicians.

During spring meeting, APPNA members will be encouraging physicians from all government medical colleges to pursue for USMLE. Applications can be submitted at <a href="http://appna.org/need-based-limited-term-loan-for-medical-graduates-nbltlmg/">http://appna.org/need-based-limited-term-loan-for-medical-graduates-nbltlmg/</a>.

We, as the committee members, would like to request your help in generously lending to needy physicians and help strengthen APPNA and its affiliate chapters. To receive more information please contacts any of the committee members.

Rao Kamran Ali, MD Chair, Need Based Limited Term Loan for Medical Graduates

Co-Chairs: Najeeb Rehman, MD Aisha Zafar, MD

# Telemedicine Report



APPNA Telemedicine Project: Healing from a distance

Mission: To improve health care quality and access to specialist medical care in Pakistan

Goals and Objectives: To set up Internet based consultations between specialists in USA and referring doctors from Pakistan in order to improve patient care through recommendations for latest treatments

and timely access to specialist knowledge. This will also update Pakistani physicians on the principles of evidence-based medicine as practiced in USA.

APPNA has an Internet based Telemedicine initiative where physicians in Pakistan could discuss complicated patients with specialists in USA operational since January 2016.

- The system utilizes a store and forward methodology on a password protected secure website that is closed to open access.
- All communication is physician-to-physician only: the requesting physician in Pakistan and the US specialist will have access to the emails generated back and forth on the cases they discuss.
- A physician in Pakistan uses the secure website to request a consultation detailing out the particulars of the case. There is ability to upload images and attachments.
- The US consultant receives an email notification about a pending case that he/she can access from a computer or a smart phone.
- A medical record is created on the website with all multispecialty conversations saved about that patient.
- US consultants have access to all the cases they gave advice on.

In the last one year, second opinion was sought in more than 130 cases, mostly from CDRS Swat Mother and Child Health Center. The specialties most needed were Dermatology, Diabetes, Obstetrics, Infectious Disease And Cardiology. 73% of our consultants responded to the requested consults. Physicians in Swat have found this resource very valuable. We will soon be extending these services to the Gujrat Cleft Hospital and Muhammad Medical College. We need to recruit more US physicians in all different specialties and hope that many APPNA members will volunteer. If you are interested, visit <a href="http://appna.org/telemedicine-project/">http://appna.org/telemedicine-project/</a> and register as a consultant.

Looking forward to working with many of you.

G. Naheed Usmani, MD Chair, APPNA Telemedicine

Members: Shahzad Iqbal, MD Mujeeb Shad, MD Khalil Khatri, MD Mustafa Saad Siddiqui, MD

# APPNA COMMITTEE ON INSTITUTIONS OF HIGHER LEARNING AND MEDICAL EDUCATION (APPNA CIHLME)



History: **2014**: Establishment of **APPNA Medical School Committee** by Dr Asif Rehman & committee headed by Dr Shahid Latif with Research work & exploration work done for APPNA Medical School. Mr. Qamar Zaman Pledged One Million Dollars as donation for the Medical School to be established in North America.**2015**: Dr Mubshir Rana President Established **APPNA CIHLME** headed by Dr M. Sohail Khan with Reconfiguration of name & of the thought process with realization that to have a medical school which may be an eventual goal we need capital in the range of 250 million dollars. It was realized and agreed upon to start small & proceed step by step with creation of an infrastructure for eventual goal as well as advocacy among membership for the need for Educational Institutions and Healthcare delivery – with establishing school of allied health then bachelors and degree level then post graduate level education program, establishment of APPNA hospital and eventually APPNA Medical School - Presentations were made

to council meetings & approval of the concept to further the objectives established- which are in concurrence with the APPNA's Charter. Further weekly Clinical Skills training classes established and National Observership program launched. **2016**: President Dr Nasar Qureshi - Extensive Ground work was done, Donation made by Mr. Qamar Zaman of \$10,000 & creation of 18 documents with profes-sional help from Legal team, Business models prepared by NDH group and with market research for establishment of APPNA School of Allied Health with expended housing and information was presented to LRPC which approved. The information was presented to AP-PNA Council & was approved with sanction of US \$ 620K. APPNA paid for expenses of the course with establishment of **APPNA In-stitute of Clinical Research Training** with courses conducted and weekly education with Clinical Skills Training classes continued into 2016, 2017 and 2018 **2017**: President Dr Sajid Chaudhry: As above balance of about \$10,000. Clinical Skills training continued every Tuesday **2018**: President Dr Iqbal Zafar Hamid: Above balance in CIHLME/AICRT Account and Preliminary subgroup estab-lished to develop APPNA University with extensive work in progress.

**CIHLME Committee's mission and Objectives:**\* Bring all resources together within APPNA and otherwise to further APPNA's mission.\* To establish world class Educational institutions of Excellence and promote Medical Education and health care delivery.\*To establish relationships and partnerships with credible educational institutions that can further APPNA's mission and are not in conflict with our mission.\*To assist young physicians with Education and Subsidized Housing and getting established in USA

APPNA's Mission per APPNA's Constitution 3.0. AIMS AND OBJECTIVES This Association is organized for educational and scientific purposes, including for such purposes, the making of distributions to organizations, which qualify as exempt organizations under Section 501(c)(3) of the Internal Revenue Code of 1986 (or the corresponding provision of any future United States Internal Revenue Service Law). The other aims shall be: 3.1 To foster scientific development and education in the field of medicine and delivery of better health care, without regard to race, color, creed, gender or age. 3.2 To assist newly arriving Pakistani physicians in orientation and adjustment. 3.3 To institute ways and means to cooperate with other medical organizations in North America. 3.4 To encourage medical education and delivery of better health care in Pakistan specifically by arranging donations of medical literature, medi-cal supplies, and by arranging lecture tours, medical conferences, and seminars in Pakistan.

APPNA is doing a great job in charitable works. APPNA University should be pay back to the American Community we are living in, just like other Americans, like Jews, Catholics, Irish, Italians, African Americans etc., have done in establishing institutions of learning, hospi-tals, museums and institutions of arts etc. Dr Iqbal Zafar Hamid has further explained the concept of APPNA University and the im-portance of its need and how it can help our community here in North America and Pakistan. He talked about the conceptual model and briefly about the sub group and its work. Regarding goal to fund raise as well as raising monies from investors. Need to have a tangible project to take it to APPNA membership- Already approved \$9,900 for the preliminary paperwork, \$100K is requested in the budget for basic ground work and hope to get the approvals done by council soon.

It is clearly identified to have the structure and the business model in place and work is in progress. Immediate objective to acquire and start a University in the range of 7-10 million dollars and long term aim for an endowment for 100 million dollars for this university. Once the university gets going possibilities are enormous like venture out in Pakistan and lot of help can be provided from approvals to even possibility of financial aid and partnerships. It is also well recognized to shield the university project from APPNA politics and it is recom-mended that the project be under a separate 501c3 with investors being the board of directors with control of operations with ability for APPNA to buy back from investors gradually. Our committee recommends "To proceed with a process to establish APPNA University. Our goal is to present to you a solid plan soon that is Iconic, tangible, self-driven, highly professional and financially not just solvent but resourceful and responsible The challenges are: our limited resources yet an innovative design that is financially solvent, with a solid business model, with no room for failure and that the project changes the future course of APPNA. Bringing all and every member of our association together and make us all very proud with restoring dignity and faith in our beloved organization thus bringing into our folds those who stand on sidelines.

M. Sohail Khan, MD

Chair, APPNA Committee on Institutions of Higher Learning and Medical Education (APPNA CIHLME)

# APPNA International Meeting 2018 Singapore, Malaysia and Indonesia



I have the pleasure to recap the recently concluded APPNA International Meeting to the Far East from April 5 - 15.

We had a large group of more than 150 APPNA members and their families join us in Singapore. In Singapore we toured the city covering all the highlights of this modern metropolis while staying at the palatial Fullerton Hotel. We also visited the amazing gardens and partook in the world renowned Night Safari.

On the 7th of April, we headed to Kuala Lumpur while visiting the historical city of Melaka en route.

In Kuala Lumpur, we were joined by the remaining members of the group. While in KL, we visited

the incredible Petronas Twin Towers, Batu Caves, Islamic museum, nature reserves and a city with an incredible mixture of religions and races. In addition to the tours, we had some sumptuous meals, our first informative CME session, and a fun filled Masti Night.

From KL, we chartered an APPNA flight to Bali. Bali was a feast of natural beauty. We had the opportunity to visit several historic sights while also having the opportunity to enjoy the luxurious resort, long periods of gup-shup, the second CME session, and a truly entertaining and engaging APPNA Talent night.

Overall, we had a extremely successful meeting filled with learning, friendships, and fun. I would like to thank all the volunteers in helping organize and manage the trip.

Additionally, I would like to thank Tipu and Sikander in managing the details of the trip. And finally, I would like to thank Iqbal Zafar Hamid for his leadership and trust in our committee.

Aftab Ahmed, MD
Chair International Meetings Committee 2018







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\* China Pak Golf Estate is a GDA approved, mixed-use community assigned NOC no: 58/06/HS/GDA(B)

# Jinnah Sindh Medical University Alumni of North America Report



Dear Colleagues,

We started the year 2018 with a very Grand /successful 8th annual JSMUAANA retreat that we held in collaboration with APPNA Spring meeting in Chicago downtown. It was attended by over 500 people on Friday and around 700 people on Saturday night.

JSMUAANA has launched a Mobile Health Clinic project in collaboration with APPNA and have managed to get funds for one unit through the generous

donation of class of 89/90 which will be dedicated in the memory of our late Prof Dr. Minhas.

This year JSMUAANA has been instrumental in working out an agreement between Hull and East Riding Trust University Hospital, UK and Jinnah Sindh Medical University. Through this partnership, minimum of 50 doctors per year from JSMU will be able to go to England for a 2 year paid training program in various fields and will be given PLAB exemption also.

Dr. Naghmana Shafi is the chair of JSMUAANA Electives and mentoring committee. She has created a Facebook page "JSMUAANA Students and Faculty Mentoring Group" for JSMUAANA students. Kindly contact her if you can be of any help in supporting this cause.



Dr. Ateka Zaki chair of our food pantry committee was able to collect Four thousand dollars and also managed to get a two thousand dollar grant from APPNA to donate a total of Six thousand dollar to a food pantry in Houston in the month of Ramadan.

In the spirit of giving back to the community this year JSMUAANA has also sponsored an Iftar /dinner for a local women's shelter of domestic abuse called the Suzy's Place.

We are looking forward to seeing you all in our summer meeting.

Long live JSMUAANA.

Best Regards,

Dr. Mansoor Alam President JSMUAANA 2018 JSMUAANA Executive Committee



# Nishtar Alumni of North America Report



2017 brought many changes to our alma mater, Nishtar Medical College. It was finally granted the status of a medical university and a vice chancellor was appointed as its head. Nishtar Alumni of North America (NANA) has been, as usual, active in giving back to the people of our region through Nishtar hospital and medical college (now university). NANA also continues to evolve in its role to help the patients and students of our beloved Nishtar. Through all the changes, the Association recognized and reaffirmed its priority — to create opportunities for alumni to engage with Nishtar University and Nishtar Hospital. NANA has also been actively involved in developing and fostering a working relationship with our sister Nishtar

alumni from the UK. Dr. Aslam Nasir has proven to be an angelic force for our Nishtarian diaspora in the UK. He is leading them under the banner of Nishtar Renovation Project (NRP) through his charitable organization. NANA is seeking opportunities along with NRP to reinvigorate the Nishtarian spirit among the Nishtar alumni throughout the US, UK and around the globe. Nishtar is the common thread that connects us across distances and over time. Our current effort at NANA is to deepen our relationships with the University, Hospital and with each other. It's our hope that non-member alumni, still sitting on the sidelines, will get involved in a way that is meaningful. The common and ultimate goal is to be able to bring a consequential change in the education of students and healthcare delivery at Nishtar University & Hospital.

We invite all Nishtarian diaspora to join us at our meetings to learn more about how the NANA links alumni to each other, to current students, and to the traditions and rituals that made the Nishtar experience so special. Despite our small number of registered alumni, we are proud to have the largest scholarship endowment fund of 1 million dollars in APPNA. We grant 50 need-based scholarships every year to the students of Nishtar University. For this we are indebted to the untiring efforts of Dr. Ghulam Qadir, who has been instrumental in its foundation and delivery. In the last few years NANA has also been instrumental in establishing a Bronchoscopy unit and Endoscopy unit. Last year, in 2017, we were able to arrange for a C-arm fluoroscopy unit to complement the endoscopy suite. This year NANA advisory committee has approved to raise 1 million dollars to help renovate all operations rooms (theatres) and to help purchase a refurbished cardiac catheterization unit. This major donation-based funding is only going to be possible through the generous matching donation of up to \$500,000 by a Lifetime NANA-member. I am also proud of some NANA members who are active on an individual basis, especially in the Detroit area, to help set up a "Nishtar House" which provides accommodation and resources to Nishtarians preparing for their USMLE exams and their residency match.

Dear Nishtarians, believe me, you will find so many ways and opportunities to serve Nishtar by being a part of NANA. From mentoring or being a mentee, to serving on a NANA committee, to being actively fundraising within your alumni group, we offer an array of professional and social events, programs, and resources for alumni at every stage of life.

The few initiatives and accomplishments highlighted in this report are made possible only through the dedication and involvement of NANA members. As we look forward to the year(s) ahead, I invite all the Nishtarians in North America to be part of this incredible community called NANA to help Nishtar University regain the glory of its past and possibly surpass it.

Najeeb Rehman, MD President Nishtar Alumni of North America

## Dr. Kashafuddujah Professional Development Center (PDC)



Dr. Kashafuddujah Professional Development Centre (PDC) This project was launched in February 2017 in memory of our late Anatomy Professor Dr. Kashafuddujah. This was one of the most expensive projects ever conducted and then completed in timely manner by our Alumni with approximate cost of \$150,000. SMCians from all over the world donated in this project with major contributions from classes of 89, 91 and 90. Dr. Kashafuddujah PDC was inaugurated on December 18, 2017. This is a state of the art skill lab with cutting edge modern technology, computerized simulators

and manikins. It would continue to benefit students in years to come. We must acknowledge that this PDC at JSMU is only one of the few PDCs currently existing in Pakistan.

Long Live JSMUAANA Long Live APPNA

Intikhab Ahmad, MD Immediate Past President JSMUAANA (2017)





# CREATING OPPORTUNITIES AROUND THE GLOBE

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# SAVE THE DATES

# APPNA FALL MEETING 2018

VIRGINIA OCTOBER 18-21, 2018



**Tariq Shahab, MD**Chair Host Committee

Iqbal Zafar Hamid, MD President APPNA 2018

# APPNA 2018 At a Glance

Compiled by: Akhtar Hamidi, MD Saba Shabnam, MD

# **APPNA University**

## A Dream coming true

By Dr. Sohail Khan

We can make it happen soon.

Since its inception in 1979, APPNA has been involved in many philanthropic activities related to both education and health, collectively as well as through its various alumni chapters and individuals.

Since the last summer meeting in Orlando in July 2017, and even prior to that, there are many who have spoken and strongly believe that it is high time for APPNA to create and support educational and health care related projects that will create a legacy for our future generations and become a flagship of our association.

Through APPNA University we will be able to pay back to the community we are living in, just like Jews, Catholics, Irish, Italians and African Americans etc., who have historically established institutions of learning, hospitals, museums and institutions of arts etc.

The biggest challenge is our limited resources for an innovative design that is financially solvent. A project structured with a solid business model without flaws that can tailor the future course of APPNA in the field of education. APPNA University will help us bring all and every member of our association together who stand on sidelines, and will make us all very proud by restoring dignity and faith in our beloved organization.

At least 5 past presidents in recent memories have tackled, hard to implement projects with tangible results, namely Dr Javed Suleman with APPNA School of Public Health, Dr Asif Rehman with creation of Medical School Committee, Dr Mubashir Rana transforming to create APPNA Committee on Institutions of Higher Learning and Medical Education and LRPC, Dr Nasar Qureshi furthering with approvals of \$650,000.00 for APPNA School of allied Health and expanded housing and establishment of AICRT and Dr Sajid Chaudhry actively advocating Community engagement. Slowly but surely, we are moving closer to establishing an Iconic Educational project – It's time we do it!

Our goal is to present to you a solid plan by summer convention that is Iconic, tangible, self-driven, highly professional and financially not just solvent but resourceful. Our teams headed by APPNA CIHLME are working very hard to get it together in a very professional way. Please invest some time with us to see the details during the summer convention.



## Mobile Health Clinics in Pakistan

By Dr. Mubashir Rana

Dr. Iqbal Zafar Hamid, APPNA President, launched APPNA Mobile Health Clinic as a pilot project in Mirpurkhas, Sindh, Pakistan in collaboration with Mohammad Medical College through efforts of their Dean Dr. Razi Mohammad and APPNA team in February 2018. Dr. Mubashar Rana, Chair of APPNA Medical Corp is overseeing this project.

Two mobile health clinics were donated to the medical college that has been providing free health care five days a week to the indigent population in Mirpurkhas and the surrounding villages where people are unable to have access to basic health care needs. The mobile health clinics are also helping fulfill the need for 3rd and 4th year medical students clinical rotations as a part of their medical training. Patients of all races, religion, gender and socioeconomic status are treated where uncomplicated patients are treated on the spot and complicated patients that need in-hospital management are transferred to the hospital. So far more than 6000 patients have been treated by 2 mobile health units and about 200- 250 patients were transported to the Hospital after initial stabilization.

Five more Mobile Health clinics are already ordered and will be used in different parts of Pakistan in collaboration with local medical colleges and reputable NGOs. Hopefully, soon, we will have many more APPNA Mobile health clinics serving the people in need in different parts of the country and this tangible project of APPNA will continue to grow with trustworthy partners on the ground in Pakistan.



# APPNA Medical Mission to Gujrat, Gujranwala, Lahore and Islamabad

By Dr. Unser Khan

In February 2018, APPNA Medical mission lead by President APPNA Dr. Iqbal Zafar Hamid along with 4 anesthesiologists, 2 Plastic surgeons and one Public health expert, Dr. Dawood Nasir, Dr. Mubashir Rana, Dr. Farooq Shehzad, Dr. Unser Khan, Dr. Waqar Syed, Dr. Shah and Dr. Kaleem Syed visited Islamabad, Gujrat, Gujranwala, Bahawalpur, Mirpurkhas, Karachi and Lahore.

A 3-day medical camp was conducted at The Cleft Palate Hospital in Gujrat with the generous help of its CEO Dr. Ijaz Bashir. During the 3 days camp successful surgeries for children with Congenital birth defects including but not limited to Cleft palate, Cleft Lip, Eye Lid disorders were performed by APPNA's visiting faculty Surgeons and Anesthesiologists free of charge in collaboration with the hospital. During the camp APPNA physicians exchanged their state of the art techniques, skills and protocols with local physicians, surgeons and clinical staff members.

After 3 days of surgery, a lecture series was conducted for the benefit of local physician, nursing and para-medical colleagues. In Gujrat, at Aziz Bhatti Shaheed Hospital, the sessions covering Pediatric Anesthesia, Patient Safety, Infection Control and workshops on Ultrasound Guided Regional Anesthesia were extremely well attended and appreciated. After the lectures speakers visited the Nursing School for a repeat performance that was followed by interactive Q & A sessions. These lectures provided a rare opportunity for the local physicians to learn, interact and exchange the skills, knowledge and techniques with the US trained Anesthesiologists and Quality Control Experts.

The last series of lectures and discussions at the Department of Anesthesia KEMU, Lahore, Karachi and Mirpurkhas were followed by a workshop on Ultrasound guided nerve blocks. Second medical team of surgeons and anesthesiologists will be traveling to various cities in Pakistan from July 16 to August 3rd, 2018 to conduct similar clinics, camps, lectures and workshops to share and transfer the training in US with our dedicated and hardworking physicians in Pakistan.



# **APPNA-LRBT Corneal Transplant Project**

Give the gift of sight - Ankhian bari nemat hain By Dr. Aisha Zafar

APPNA Cornea Transplant Project began in 2017. So far 845 corneas have been sent to 14 cities in all provinces of Pakistan.

APPNA Corneal Transplant Project has already restored sight to 80 Pakistani citizens who otherwise were destined to remain severely visually impaired or go blind. Soon several hundred surgeries are expected to be completed. Some have been victims of accidents while others have eye diseases leading to blindness.

Corneal transplants have already been done free of cost for the recipients in cities such as Faisalabad, Lahore and Peshawar. More are planned in other cities such as Quetta and elsewhere.

Among hundreds there is this story of Umme Kulsoom now 23 years old. She wants to become a teacher, but her education was cut short because of keratoconus or thinning of the cornea, which assumes a conical shape instead of spherical. She dropped out of the 5th grade. Her father a poor farm laborer could not afford to pay for the required surgery. Umme Kulsoom has already received her left eye surgery, which was successful. She awaits corneal transplant to the other eye.

Dr. Fawad Zafar and KE class of 85 initiated this program.

## **APPNA Medical Mission Guatemala**

## By Dr. Zeenat Safdar

Guatemala is suffering from a crisis of chronic malnutrition, especially in indigenous Mayan communities where seven out of 10 children are stunted. According to the World food program, the country has the fourth-highest rate of chronic malnutrition in the world. These communities also often lack infrastructure including access to safe drinking water. Contaminated water can cause gastrointestinal infections that prevent the body from absorbing nutrients. A high rate of early marriage is also a factor. The Population Council says more than half of all girls in rural Guatemala become brides by 18. Many begin having children when they are still children themselves. These babies have an increased risk of malnutrition compared with children of older mothers.

APPNA has been actively involved in sending medical missions to Guatemala. The goal of these missions is to promote healthy pregnancies, detect problems early and encourage healthier choices.

The team of Primary care physicians including Family Medicine, Internal medicine, Pediatricians and OB-GYN have made several trips to provide the basic health and preventative care needs of the community specially children and malnourished young girls who have started bearing children. APPNA has successfully operated medical camps and treated more than 431 patients. APPNA provided free medical treatment, preventative care, medications and Vitamins to girls and women between the ages of 12-45 in collaboration with a grant from Vitamin Angels. APPNA's 4th medical mission comprising of Primary Care Physicians are planned to visit Coban, Guatemala to conduct medical camps from July 16, 2018 to July 21, 2018.

# APPNA, AAPI & BMANA

## Memorandum of Understanding

#### A historic moment!

We have partnered with AAPI (American Association of Physicians of Indian Origin) and BMANA (Bangladesh Medical Association of North America) to join forces with their medical organizations to expand and support physicians globally and particularly in South Asia region. The main area of focus will be increasing the Residency slot for foreign Medical graduates, Visa issues and healthcare issues in South Asian people in North America and South Asia. This coalition of more than 130,000 physicians will constitute about 15% of physician workforce in USA and will have a very forceful influence on the healthcare policies of USA.



# APPNA HealthCare Quality Projects (HQP)

By Dr. Kaleem Syed

Healthy Pakistan - Progressive Pakistan

From February 19- Feb 23, 2018 APPNA's team comprising of 2 Anesthesiologists and 5 Surgeons visited 9 hospitals in collaboration with the APPNA SAPPNA Medical Mission. During this mission a thorough evaluation of assessment, needs analysis, Identification of infection control, Sterilization activities in ICU, OR and general wards and other critical areas of practice in medicine and surgery was performed and plans were discussed that will layout the ongoing medical missions to Pakistan by APPNA physicians.

These 5 days activities included Aziz Bhatti Shaheed Hospital Tour and CME, Cleft Palate Hospital Tour and presentation, Gujrat Hospital Tour and Presentation, Gujranwala Civil Hospital Tour and Presentation, Rawal Institute of Health Sciences, Islamabad, Services Institute of Medical Sciences Lahore, King Edwards Medical University, Lahore Presentation, Jinnah Hospital, Lahore Dialysis Unit Tour, Indus Hospital Tour, discussion on Organizational and Governance Structure and Strategy Development and Memon Hospital, Karachi, site visit and presentation on Introduction to Patient Safety and Risk Management.

Through this medical mission APPNA's team was able to develop the professional relationship and collaboration with the physicians and hospitals in Pakistan on an ongoing basis that will benefit our generations to come. Chat groups were created where nurses and ancillary staff would periodically request assistance on a variety of Patient Safety, Infection Control and other clinical and ethical issues at Aziz Bhatti Shaheed Hospital and King Edwards Medical University.

In December 2018, follow up site visits to Aziz Bhatti Shaheed Hospital, Gujrat; Cleft Palate Hospital, Gujrat and King Edwards Medical University, Lahore are being planned that are anticipated to improve the practice of medicine and patient care in Pakistan. Some of them are as follows.

- Development of collaboration with other like-minded groups and individuals who have come forward and developing a more robust committee
- Developing educational material on topics of sustaining healthcare quality improvement, while utilizing existing resources
- Seek out local existing resources in Pakistan for sustainment of efforts.

## **APPNA Pakistan Secretariat**

### By Dr. Akhtar Hamidi

To continue working on his vision to provide better services to APPNA members and facilitate improved academic services in Pakistan, our President Dr. Iqbal Zafar Hamid feels humbled and honored to present to our members, a Satellite Office, APPNA Pakistan Secretariat, in collaboration with our partners and sponsors, CureMD. This service is provided free of charge to APPNA or its members. Currently services are limited to Lahore, however, as we grow these services will be extended in Karachi, Islamabad and Peshawar.

APPNA Pakistan Secretariat shall assist in providing concierge services, such as hotel accommodations, transportation and airlines tickets to APPNA members visiting Pakistan. They shall also assist with any administrative work related to the members' respective institution. They can be helpful with work related to Pakistan government agencies such as NADRA, Identity cards, background checks etc. Our staff will also be available to assist in relocation of any APPNA member or their family members such as children going to Pakistan for studies.

Another service provided by Pakistan Secretariat is to facilitate, coordinate or arrange academic sessions where visiting member can deliver lectures, seminars or workshop in their respective field at an institution closer to their city of visit. APPNA Pakistan Secretariat shall also help Pakistani medical graduates to prepare for USMLE by arranging webinars and providing training on EMR to avail these services, please visit www.APPNA.org and click on Pakistan Secretariat and fill out request form and someone from the office shall contact you within 48 hours.

# Rohingya Medical Relief

By Dr. Shahid Yousuf

In 2017 as a part of the global relief operations of Humanitarian Missions, APPNA joined hands with OBAT helpers to treat and provide relief to the families affected by Humanitarian crisis posed by Rohingya refugees coming from Myanmar to Cox's Bazar area of Bangladesh to escape prosecution from Myanmar's military.

Treatment of the minority group is so bad that US officials have declared it ethnic cleansing. Bangladesh Government has been very gracious to accept the refugees, but their resources are limited as it is a small country with a huge population to care for. More than half a million of Rohingyas have fled to Bangladesh to escape violence. Issues that are critical to the refuges beside medical needs are clean and drinkable water, immunization against communicable diseases, mental health, sanitation, malnutrition, protein deficiency, illiteracy, poverty and rehabilitation.

APPNA has sent several medical groups lead by physicians volunteering their time, expertise and other resources to help Rohingya refuges overcome the life-threatening challenges they are facing. A lot more physicians from APPNA have gone to these camps to serve on their own. We are looking forward for your help and support monetarily and in person to help curb this crisis.

# 1st APPNA YOUTH CONVENTION

## In collaboration with Pakistan Embassy

## By Zeeshan Hafiz

For the first time in APPNA's 40 years of history, there will be a Youth Convention co-hosted by the Pakistani Embassy. This is very exciting news for everyone in the APPNA family as the Convention promises to be a premier event this year with the tremendous potential in the future as well. The Convention was just a part of President Zafar Hamid's focus on improving the quality of the APPNA experience for the youth and to revitalize the organization with fresh blood.

For many years SAYA and CAPPNA have been hosting various events for the youth of APPNA. These events have included field trips, debates, concerts, career panels, fashion shows, cruises, dinners, basketball tournaments, talent shows and other events. Over the years events have come and gone, and interest has waned at times. This year, we have put together one of the best Youth Programs in APPNA History.

Before we get to that, there are a few other brand exciting new additions to announce. We are forming a new group called APY. Since the word APY translates to "older sister" in Urdu, APY will act as the older sister to SAYA. This group will be the premier organization for the youth of APPNA to carry on the torch once they have graduated and entered the workforce not just as doctors but for all other professionals. They will be able to participate in the Youth Convention as well as their own programming.

Another exciting announcement is the brand-new Scholarship Award founded by Dr. Hamid as well. We have established the APPNA Youth Achievement and Accolades Recognition Award (APPNA YAAR) to recognize the top group of elite students here in Northern America who have shown outstanding educational growth, improvement, commitment and intellectual development in their academic pursuits. We believe that recognition of their achievement and financial support of their efforts is the best way to foster future success in Innovation and Entrepreneurship for our community.

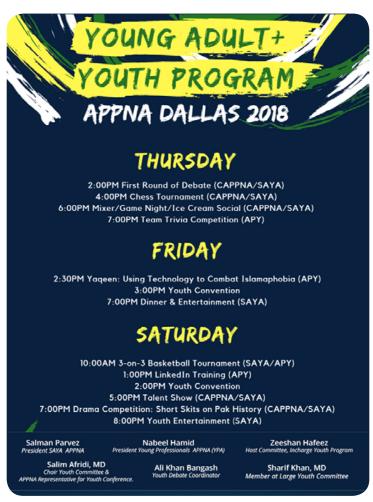
Now let's get to the programming. The youth will want to be there on Thursday as it promises to be packed with great programming. At 2:00PM we will commence with the First Round of the Debate. The debate is open to ages 10-23. The topic this year is "Civilized Societies should be Free of Gun Violence so the 2nd Amendment Must Be Repealed" (interested youth should register at http://aka.ms/debate). There will be the first ever APPNA Youth Chess Tournament open to all youth at 4:00PM (interested youth should register at http://aka.ms/chess). At 6:00PM, there will be a Mixer/Game-Night/Ice Cream Social open to all youth. At 7:00PM APY will host its first ever event, a trivia competition.

Moving on to Friday, which is the start of the Youth Convention. The first event of the day is an APY session at 2:30PM on Yaqeen using technology to combat Islamophobia. At 3:00PM we kick off the inaugural Youth Convention. The first program will be a session led by HEART Women & Girls entitled: Breaking Taboos—Unpacking Body Image Issues. Next, at 4:30PM famed scholar Omar Suleiman (named one of CNN's top 25 most influential American Muslim) will be hosting a session entitled, "Answering Questions about your Faith: Who taught you to hate yourselves?" That will conclude the first day's session of the Youth Convention.

SAYA will then have Dinner and Entertainment that will be bundled with the Mika Singh concert starting at 7:00PM.

Onto Saturday, we kick off the day with a 3-on-3 Basketball Tournament at 10:00AM (interested youth should register at http://aka.ms/sayabball). APY will be hosting a LinkedIn training at 1:00PM. Then the Youth Convention will restart at 2:00PM with the Final Rounds of the Debate. After the debate, at the conclusion of the conference, at 4:30PM the Pakistani Ambassador to the United States, His Excellency Mr. Ali Jehangir Siddiqui will deliver the Youth Keynote Address. At 5:00PM, we will host the annual Talent Show (interested youth should register at http://aka.ms/talentshow). Then at 7:00PM, for thespians, we have the first ever APPNA Drama Competition (interested youth should register at http://aka.ms/drama). Finally, we end the programming with the Saturday Night Youth Entertainment featuring Mickey Singh and Rwnl Pwnl.

This promises to be a historic conference, packed with plenty of top quality programming for APPNA's youth and young adults of all ages. Dr. Hamid and the executive board have dedicated hours to putting this program together through a large team ranging from myself, Nabeel, SAYA President Salman Parvez, Debate Organizer Ali Khan, Entertainment Organizer Rummi Khan, Dr. Afridi, Dr. Nasir and Dr. Sharif. The reason why this was so important to all of us is because we have all been a part of APPNA for so long and we are all invested in the future of this organization, which will undergo a transformation by the youth. Only through active youth participation and great choices for the youth, will APPNA continue to be the family-centric organization that it is. This investment will also guarantee the successful future of APPNA.

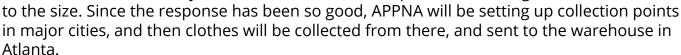


## APPNA DRESS A BRIDE

By Dr. Aisha Zafar

APPNA dress a bride project started back in March of this year, after a conversation with a philanthropist, Mr Azher Syed, who is a Pakistani American businessman, settled in Atlanta Georgia. Over the years, he had seen how we all accumulate clothes, shoes and other accessories and many of these, specially the clothes, of our heritage and can be best used in Pakistan. Shipping them is expensive and to pack and take along on our trips to Pakistan, was another hassle. He decided to send these clothes and accessories to Pakistan and started the project Twatur. (in coordination with Koohi Goth Hospital). It was then when we talked and this project of "APPNA Dress a Bride" started.

The response was overwhelming and hundreds of boxes of clothes from our members have been sent to the Mr Syed's warehouse. Clothes received are sorted out by volunteers there and then packed according



Initially the collection was limited to new and gently used clothes, but we are now encouraging members to also send shoes, handbags and men's and children's clothes as well. The clothes containers will be then sent to Karachi and Mr Syed has been kind enough to take care of the transportation as well as the port fees. Once in Karachi, the clothes will then be placed in a distribution center, dry cleaned and will be given to the deserving areas like Kachi Abadis, Orangi and Korangi.

The containers will be sent on regular intervals and so clothes can be sent anytime to Atlanta. Weddings in Pakistan have become a financial drain for the families and marriages are getting delayed due to the expenses involved.

Please support this initiative and send your gently used clothes thru your local APPNA Chapter. Alternatively you can contact us thru our website: www.APPNA.org

## Mobile Health Clinics in USA

By Dr. Babar Rao

APPNA mobile medical clinic project in USA was launched last year through the collaborative partnership of ICNA Relief and APPNA lead by Dr. Sajid Chaudhary. Three Mobile Units are operational in different regions of USA. Dr. Rao, Co-Chair of APPNA Medical Corp, oversees this program.

Through the mobile medical clinic project, APPNA envisions to proudly serve indigent population, patients without insurance, patients without access to transportation and senior citizens in need for home health care needs. This project is being run by APPNA physicians and other health care providers through volunteering their time and expertise. Patients are offered free Flu shots, Blood pressure, BMI and Lipid testing, Weight loss counseling, Discounted prescriptions, Eye exams, Ultrasound and other physician counseling are some of the services provided by the mobile health care units.

APPNA plans to add mobile medical clinics in every city in USA where APPNA chapter is established.

## 1st APPNA GLOBAL HEALTHCARE SUMMIT

#### By Dr. Akhtar Hamidi

To improve the quality of educational services provided to physicians and medical students in Pakistan, our President Dr. Iqbal Zafar Hamid is pleased to introduce and arrange 1st APPNA GLOBAL HEALTHCARE SUMMIT, which will take place in two major cities of Pakistan, Lahore and Karachi between December 18 & 22, 2018 (LAHORE: December 18-19, 2018; KARACHI: December 21-22, 2018). This summit will transform what our organization has offered to fellow physicians in Pakistan so far by arranging a state of the art academic and scientific sessions, lectures and seminars. To achieve our goal, we are inviting clinicians, academicians and scientists who are well reputed and highly regarded in their respective disciplines, from across the globe thus elevating our training to international standards. This conference will benefit physicians, medical students, scientists, and business professionals working in related fields. We shall also be providing training in Basic Life Support to first responders such as police officers, fire fighters, ambulance drivers. We are planning to invite Vice Chancellors of various universities to brainstorm about how APPNA can assist them in improving the standard of medical education in Pakistan. There will also be a discussion about how APPNA can assist new doctors transitioning to the workforce in the United States.

Attendees will spend two days in Lahore, and 2 days in Karachi, engaging in scientific, academic and social dialogue benefitting our attendees, the people of Pakistan, and the medical, academic, and scientific community internationally.

We are excited to partner with Sindh Institute of Urology & Transplant (SIUT) and other medical universities as we kick off the 1st APPNA Global HealthCare Summit.

To reach out healthcare professionals who are unable to attend the conference and the general public, various events during the 1st APPNA Global Healthcare Summit will be televised by our media partner, HUM TV. Additionally, most events will be live-streamed on various social media. We will have more information in the coming days.

Please mark your calendar.



## My American Visa & Larger Story of APPNA

By: Arif Ahmad, MD

(dedicated to Drs. Abdul Rashid Piracha, Rao Kamran Ali and many others in APPNA) The gentleman across the glass window folded my application neatly, placing it in my passport and handing it back to me. His action appeared meticulously slow or perhaps it was my perception. To say that I was shocked is an understatement. For someone who had never failed in or denied anything, I just had my American J visa refused at the American Consulate in Lahore, Pakistan.

The year was 1992. Last several years I had spent in studying and clearing the exams needed to start my Residency training in the USA. I had come to the USA for interviews on visit visa, clearly stating my reason to interview for residency slots, had signed out of match at a residency program in New York, then choosing J over H visa as I wanted to specialize and needed all those seven available years, and had gone back to Pakistan to have my J visa stamped in my passport, and then this refusal to put a pause on everything.

Wow, well.

The last several years rolled in front of my eyes, all that for what. Over the ensuing few months I again applied 2-3 more times and got denied each time. I had let the program in New York know of my situation which at this point I read as somewhere between wretched and hopeless.

I started practicing out of desperation at a friend's hospital nearby. It was a summer afternoon. This was the pre-computer era. I started writing a letter, a few pages long as it turned out. I addressed this to the head of the American Center Lahore and to the head of the American Consulate Lahore. I mentioned my situation and how ridiculous it seemed, my utter disappointment with what had transpired with me and my resolve to rediscover my life with or without America. I photocopied that handwritten letter and mailed it to the two addresses above.

It probably was a couple of weeks later. I was still in bed in the morning when father knocked on the door telling me that I had a phone call from the American Consulate. I took the call, the voice at the other end verifying my name and then requesting me to come in for a visa interview.

I went in again, invited this time, got my J visa with no questions asked and to recall and share this experience now decades later. The program I had signed kindly accepted me back, my start date was pushed back by one year, a year where I learned a lot about life and the curve balls it throws at you all unexpectedly.

That was then. Today APPNA helps the young Pakistani doctors with their visa clearances with the State Department. This is just one of the ways it helps besides soft loans, observership and residency help, housing for the future residents, etc., etc. I hope these young Physicians realize and appreciate how big this service is in this overall context.

I dedicate this writing to all those at APPNA helping the Young Physicians in their many capacities.

Dr. Rao Kamran Ali is the lead involved with Advocacy and some of the above services. He spends a considerable amount of time and effort for lending our voice in Washington, DC. Lately, he is spearheading the push for election reforms in APPNA, something which is long overdue, for the negativity the election cycles churn up, and successful or not, I am going to support him to the best of my abilities.

Kamran, however, is just the tip of the iceberg. There are many others whose shoulders he stands on and none more notable than Dr. Abdul Rashid Piracha for his years of service to this cause. Hats off to you Sir, and thank you so very much.

As I applaud you all for your commitment, enthusiasm, and services, this I present as just one of the many better sides of our APPNA.

## Lota in Chicago

The gift basket we all received at the recent spring APPNA meet was magnanimous and large for among other things it contained a good sized, well rounded, LOTA. Yes, it is not a typo, we all received a Lota.

Legend has it that in one of the previous APPNA meets there were complaints made by the Hotel administration for finding poo on the coffee pots in the rooms. Sorry everyone, this again is not a typo.

Quite often the Men's room at ICNA and ISNA meetings is flooded. People having visited the bathrooms on a PIA flight know what I am alluding to.

And what is the excuse for having dirty bathrooms with paper flying everywhere and water on the sink, walls, mirrors, and floor in the men's room at APPNA spring meeting evening events when there are primarily mature, Pakistani American, Muslim, Physicians in the audience?

I do not know who the perpetrators are, for sure some of us, perhaps all of us, but have we ever considered the people following us in these dirty places or the impression we make as a group on our American hosts and others.

My collective conscience at this point in time for this very issue feels ashamed.

The person doing this can hide but we as a group just cannot.

It was our Prophet (PBUH) who said, "Cleanliness is half the faith."

I apologize, and with this, I rest my case.



Dr.Arif is a Cardiologist and Electrophysiologist in practice in southern Wisconsin and northern Illinois. Uplifting or deadbeat, in rhythm or without, he uses the written word to emote, often untamed and exact out of his heart.

His writings are on CNN, The Moderate Voice and at multiple other online and print media sites and on his blog.

#### Yara

Out in the wilderness, and this feeling The rhythm, and this something All around in them all being With no beginning, or end My own though inevitable, impending

Miracles large and small Here nothing on show is in my control So much life so full of life Silver exuding moon, sun pouring gold The umpteen shades of green Smiling for no reason, crazy I ain't

Still that presence
One calming influence
Feel it at times
Besides my weight in sins
Yes
Yara
Bandeya
Bulleya
What is Taqwa?
Is this Khuda?

Footnote:
Khuda is God.
Taqwa is God consciousness.
Bulleya is Bulleh Shah, a Sufi, poet, philosopher of the yester years.
Bandeya a person, a creation of the Divine.
Yara is an informal close friend.



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## THE LIFE AND HEALTH OF REFUGEES: EXPERIENCES, CHALLENGES & CONTRIBUTIONS

Abdul K. Abdussalam, Shiza Haroon, Dina Ahmad, Abdullah Abdussalam

Service for others is at the core of APPNA. There are many issues we have the opportunity to advocate for, locally, in Pakistan and in other areas of desperate need. The current political climate has disrupted the lives of millions of innocent people. Conflicts in Syria, Yemen, Palestine and Myanmar represent the tip of the iceberg. And access to healthcare is a major issue in areas without conflict, including Pakistan, Africa and Latin America.

According to the United Nations High Commissioner for Refugees (UNHCR), there are greater than 65 million forcibly displaced people in the world1. 17% of those are being hosted in Europe. The provision of medical care for refugees is a major challenge for the health care systems of Europe. In 2017, an estimated \$331 million was needed for health-related humanitarian initiatives. Here we describe one physician's experience as a volunteer for refugees in Northern Greece. From a health standpoint, the situation in Northern Greece is quite uplifting. There are many non-profits working with UNHCR. At the time of this mission in December 2016, they alternated between 3 camps, which ranged from 150 to 350 people. New arrivals were treated for acute conditions, and chronic care was managed with electronic medical records. Acute care clinics were open to walk-ins seven days a week. Each day each clinic saw about 50 patients. Referrals were made in the Greek health system. And especially impressive was the longitudinal system in place for managing obstetric care.

The camps housed Syrian families. Some had been living there for more than a year. These included people who at home were physicians, chefs and accountants. Driven from their homes, they did not choose to migrate, but were forced. Resuming their lives was their primary objective. One man had set up a falafel shop, for some semblance of normalcy. Most had to wait months just to meet immigration officials. And mental health resources in a seemingly hopeless situation are virtually nonexistent.

Equally disheartening is how necessary and permanent these arrangements became. The Greek Ministry of Health is now supporting migrants, with financial support from UNHCR and the European Union2. This level of access is a success, but underscores the ongoing conflict that prevents a return home and the many more who have not made it out of conflict zones and underserved areas. We highlight this situation, to bring to light the ongoing need for help all around the world. Many of us are in a position where we can make a material difference in the lives of others, even if only just a few. We must continue to advocate for those not able to do so for themselves. With conflicts taking place on many fronts, innocent people are the ultimate losers.

#### References

- 1. UNHCR Population Statistics Database
- 2. Capsaskis L. Integrating Refugees Can Strengthen Greece's Health System. Refugees Deeply.

https://www.newsdeeply.com/refugees/community/2017/07/05/integrating-refugees-can-strengthen-greeces-health-system. Published July 5, 2017



Abdul K. Abdussalam, MD - Kabir is a medical school graduate pursuing residency and MBA student in Business Analytics.

Shiza Haroon - Shiza is a college student at University of Texas at Dallas, who is studying premed.

Dina Ahmad, MD - Dina is a Gastroenterology Assistant Professor at Creighton University.

Abdullah Abdussalam, MD - Abdullah is a Gastroenterology Fellow at Creighton University.

## Wednesday, July 4, 2018

Time	Event Session	Room Name
6:00 AM - 11:00 PM	Prayer Room	Emerald
12:00 PM - 10:00 PM	Registration	Tower Atrium
1:00 PM - 7:00 PM	Exhibit Registration & Move-in	Trinity Exhibit Hall/Tower Atrium
4:00 PM - 2:00 AM	Gup Shup Lounge	Peacock Terrace
6:00 PM - 11:00 PM	Inauguration Ceremony;	Chantily Ballroom East
	Chapter Night; IDOL &	
	Entertainment	
9:00 PM - 2:00 AM	Food Stalls	Tower Atrium

## Thursday, July 5, 2018

Time	Event Session	Room Name
6:00 AM - 11:00 PM	Prayer Room	Emerald
7:00 AM - 10:00 PM	Registration	Tower Atrium
7:00 AM	CME Breakfast	Chantily Ballroom West
9:00 AM - 6:00 PM	Bazaar / Corporate Expo	Trinity Exhibit Hall / Tower Atrium
7:30 AM - 12:30 PM	CME	Chantily Ballroom West
11:00 AM - 7:00 PM	Depilex Lounge	Plum Blossom B
11:00 AM - 5:00 PM	Food Court	Trinity Exhibit Hall
11:00 AM - 2:00 AM	Gup Shup Lounge	Peacock Terrace
12:30 PM	CME Lunch	Chantily Ballroom East
1:00 PM - 2:00 PM	ZT Corporate Seminar	Morocco
2:00 PM - 4:00 PM	Council Meeting	Sapphire
2:00 PM - 7:00 PM	Youth Convention/	Cortez A/B
	SAYA Program	
6:00 PM - 1:00 AM	Childcare	Monet / Metropolitan
7:00 PM - 12:00 AM	Alliance Night	Trinity Ballroom
10:00 PM - 12:00 AM	Alliance Entertainment	Trintity Ballroom
10:00 PM - 2:00 AM	Food Stalls	Tower Atrium

## Friday, July 6, 2018

Time	Event Session	Room Name
6:00 AM - 11:00 PM	Prayer Room	Emerald
6:30 AM	Golf	The Tribute Golf Course
		(Meet in the Atrium Front Desk)
7:00 AM - 10:00 PM	Registration	Tower Atrium
11:00 AM - 7:00 PM	Depilex Lounge	Plum Blossom B
7:00 AM	CME Breakfast	Chantily Ballroom West
7:30 AM - 12:30 PM	CME	Chantily Ballroom West
8:00 AM - 11:00 AM	Workshop on Ultrasounded	Coral
	Guided Chronic Pain & Regio	onal Anesthesia
8:00 AM - 11:00 AM	Workshop on Dermatology	Тораz
9:00 AM - 6:00 PM	Bazaar / Corporate Expo	Trinity Exhibit Hall / Tower Atrium
11:00 AM - 5:00 PM	Food Court	Trinity Exhibit Hall
11:30 AM - 1:00 PM	Presidents' Luncheon	De Soto - B
11:30 AM - 1:00 PM	DOGANA GB Meeting	Sapphire
11:30 AM - 1:00 PM	KEMCAANA GB Meeting	Coral
11:30 AM - 1:00 PM	JSMU GB Meeting	Topaz
11:30 AM - 1:00 PM	Alliance GB Meeting	Opal
11:30 AM - 1:00 PM	Nishtar GB Meeting	Morocco
11:30 AM - 1:00 PM	Khyber GB Meeting	Ruby
12:00 PM - 2:00 AM	Gup Shup Lounge	Peacock Terrace
12:00 PM - 1:00 PM	Protecting Legal	Grand Ballroom E
	Rights Seminar	
12:30 PM	CME Lunch	Chantily East
1:00 PM - 2:00 PM	Jumaa Prayer	Grand Ballroom A/B/C
2:00 PM - 5 :00 PM	Younth Convention/	Cortez A/B
	SAYA Program	
2:00 PM - 3:00 PM	GI/Hepatitis C initiative	Morocco
2:00 PM - 3:30 PM	Social Forum	Topaz
3:30 PM - 5:30 PM	Fashion Show	Trinity Ballroom

## Friday, July 6, 2018

	11100,001,001,00	
Time	Event Session	Room Name
3:00 PM - 4:00 PM	SAPPNA GB Meeting	Ruby
4 PM - 5 PM	ZT Corporate Seminar	Morocco
6:00 PM - 1:00 AM	Childcare	Monet / Metropolitan
ALUMNI DINNERS		
6:00 PM - 10:00 PM	Aga Khan	Cornado A
6:00 PM - 10:00 PM	Allama Iqbal	Grand Ballroom C
6:00 PM - 10:00 PM	DOW	Chantily Ballroom East
6:00 PM - 10:00 PM	Fatima Jinnah	Cortez A
6:00 PM - 10:00 PM	Khyber	Cortez D/C
6:00 PM - 10:00 PM	King Edward	Stemmons Ballroom
6:00 PM - 10:00 PM	Liaquat	Sapphire
6:00 PM - 10:00 PM	Nishtar	Grand Ballroom A
6:00 PM - 10:00 PM	Punjab	Desoto A
6:00 PM - 10:00 PM	Quaid-e-Azam	Comet (27th Floor)
6:00 PM - 10:00 PM	Rawalpindi	Cornado B/C
6:00 PM - 10:00 PM	Jinnah Sindh	Chantily Ballroom West
6:00 PM - 10:00 PM	Carribean / NAMA	Miro
6:00 PM - 10:00 PM	Dental	Desoto B
6:00PM - 10:00 PM	SAYA	Cornado D
6:00 PM - 10:00 PM	Young Prefessionals of	Coral
10.00 PM 0.00 A	APPNA Dinner	T D. II
10:00 PM - 2:00 AM	Entertainment Night	Trinity Ballroom
10:00 PM - 2:00 AM	Food Stalls	Tower Atrium

## Saturday, July 7, 2018

Time	Event Session	Room Name
6:00 AM - 11:00 PM	Prayer Room	Emerald
7:00 AM - 10:00 PM	Registrtion	Tower Atrium
11:00 AM - 7:00 PM	Depilex Room	Plum Blossom B
7:00 AM	CME Breakfast	Chantily Ballroom West
7:30 AM - 12:30 PM	CME	Chantilly Ballroom West
8:00 AM - 11:00 AM	Certification on Advanced	Coral
	Cardiac Life Support (ACLS)	
8:30 AM - 2:00 PM	Dental APPNA CE Meeting	Sapphire
9:00 AM - 6:00 PM	Bazaar / Corporate Expo	Trinity Exhibit Hall / Tower Atrium
11:00 AM - 5:00 PM	Food Court	Trinity Exhibit Hall
11:30 AM -2:00 PM	Hematology - Oncology	Opal
	Chapter Meeting	
11:30 AM -2:00 PM	Speciality Network Meeting	Fleur de Lis A
11:30 AM -12:30 PM	APPNA - OBAT Session	Morocco
11:30 AM -2:00 PM	APGNA Annual Meeting	Cardinal B
11:30 AM -2:00 PM	Class Reunion -	Cardinal A
	King Edward 1968	
11:30 AM -2:00 PM	Class Reunion - Dow 1993	Obelisk
11:30 AM -2:00 PM	Class Reunion - Dow 1984	
11:30 AM -2:00 PM	Class Reunion - Dow 1988	
11:30 AM -2:00 PM	Class Reunion - KMC 1988	Wyeth
11:30 AM -2:00 PM	Class Reunion - JSMU 1993	
12:00 PM - 2:00 AM	Gup Shup Lounge	Peacock Terrace
12:00 PM - 1:30 PM	APCNA Lunch meeting	Cornado B
12:00 PM - 2:00 PM	APPNA Peds Meeting	Ruby
12:30 PM - 2:00 PM	Advocacy Committee	Topaz
12:30 PM - 2:00 PM	Zia Mohyeddin	Chantily Ballrrom East
1:00 PM - 2:30 PM	MERIT /	Chantily Ballroom West
	Global Healthcare Summit	

## Saturday, July 7, 2018

Time	Event Session	Room Name
1:00 PM - 06:00 PM	Youth Convention / SAYA	Cortez A / B
1:00 PM - 2:00 PM	ZT Corporate Seminar	Morocco
12:30 AM - 2:00 PM	WAPPNA - HOPE meeting	Coral
2:00 PM - 5:00 PM	Young Physicians Committee	Topaz
2:30 PM - 4:00 PM	APPNA General Body Meeting	Chantily Ballroom West
4:00 PM - 5:00 PM	Candidates' Debate	Chantily Ballroom West
6:00 PM - 1:00 AM	Childcare	Monet / Metropolitan
6:45 PM - 1:00 AM	APPNA Banquet Dinner &	Trinity Ballroom
	Entertainment	
7:00 PM - 12:00 AM	CAPPNA -DJ Night	Sapphire
8:00 PM - 11:30 PM	SAYA Entertainment	Chantily Ballroom East
10:00 PM - 2:00 AM	Food Stalls	Tower Atrium

Mushaira

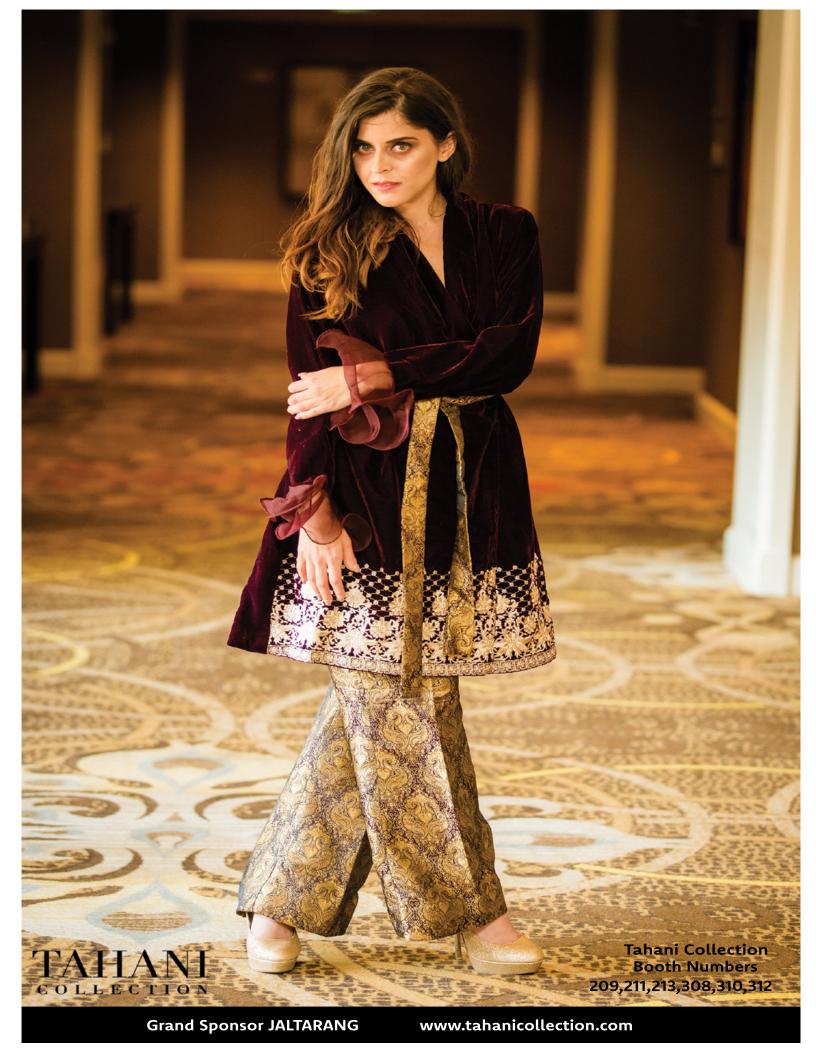
11:30 PM - 2:30 AM

## Sunday, July 8, 2018

Chantily Ballroom West

iime	Event Session	koom Name
8:00 AM - 11:00 AM	Brunch ( Halwa - Puri)	Trinity Exhibit Hall/ Food court
8:00 AM - 1:00 PM	Bazaar	Trinity Exhibit Hall
8:00 AM - 1:00 PM	Food Court	Trinity Exhibit Hall







## **APPNA 41st ANNUAL CONVENTION**

July 4 - 8, 2018 Hilton Anatole, Dallas, Texas

## "Nuts and Bolts for the Clinician"

## THURSDAY, JULY 5, 2018

7:00am-7:30am Breakfast

7:30am Welcome - Mustafa M. Husain, MD, CME Chair

7:35am-9:30am Session I

Session Chair: Mehmooda Nasir, MD

7:35-8:15 am

**Opioid Crisis: Challenges and Opportunities** to Change Course of the Opioid Crisis Sidarth Wakhlu, MD.

8:15am-8:50am

**Sleep Disoder Perspectives: Challenges in Treating Insomnias and Obstructive Sleep** Disorders Imran S Khawaja, MD.

8:50am-9:30am

**Controversial Therapies For Learning and Attention Disorders** Jeffrey Black, MD.

9:30am-9:45am Coffee Break

9:45am - 12:30pm Session II

Session Chair: Faisal Qureshi, MD, MBA

9:45am-10:35am

**Surgical or Non-Surgical Treatment of** 

**Obesity: A friendly debate** 

Sarah Barlow, MD

Faisal Qureshi, MD, MBA

10:35am-11:15am

**Poly-Pharmacy in the Medical Patient** 

Namirah Jamshed, MD

11:15am-11:55am

**The Broken Heart Syndrome** Imran Afridi, MD

11:55am-12:30pm

Healthcare Compliance: What to do when the Feds come knocking on the door! Samuel J. Louis, JD

12:30pm-1:30pm **Lunch And Guest Speaker Presentation** Pediatric Urology At SIUT, Pakistan Dr. Sajid Sultan

Immigration in Trump Era: What it means for Pakistanis, especially Medical Personnel Gordon J. Quan, JD

## FRIDAY, JULY 6, 2018 7:00am - 7:30am Breakfast

7:30am - 9:30am Session III Chair: Talat Kheshqi, MD, MS

7:30am - 8:00am Approach to patients with Inflammatory **Arthritis** Sharad Lakhanpal, MD

8:00am - 8:30am **Updates in Asthma and Allergies** Masood Ahmad, MD

8:30am - 9:00am **Dermatology for Non-Dermatologists** Sanober Amin MD, PhD

9:00am - 9:30am **Everyday Infectious Disease Issues: When to** 

Sofia Ansari, MD

9:30am - 9:45am Coffee Break

9:45am - 12:30 pm Session IV Chair, Muhammad Asim, MD



## "Nuts and Bolts for the Clinician"

9:45am - 10:20am Atypical Diabetes Mellitus: Diagnosis, Treatment and Complications Asra Kermani, MD

10:20am - 11:00am Non-Alcoholic Steatohepatitis; A Silent Epidemic Mohammad Ashfaq, MD

11:00am - 11:45am Recent PPI safety concerns: An evidence based approach Mohammad K. Ismail, MD, AGAF

11:45am - 12:30pm Chronic and Recurring Headaches: What You Should Know Anwar-ul-Haq, MD

12:30pm - 1:30pm Lunch and Oral Presentations of Poster Competition Winners Prize Distribution Poster Competition Mustafa M. Husain, MD

## **SATURDAY, JULY 7, 2018**

7:00am-7:30am Breakfast

7:30am - 9:30am Session V Chair: Mustafa M. Husain, MD

7:30am - 8:10am End of Life and Hospice Shahbaz Hasan

8:10am - 8:50am Billing Fraud and Ethics in Healthcare Charles Swift, JD

8:50am - 9:30am Biomarkers and Genetically Personalized Medicine: The Future is NOW! Rizwan C. Naeem, MBBS, FACMG 9:30AM-9:45am Coffee Break

9:45am - 12:15pm Session VI Chair: Nameer Haider, MD

9:45-10:30 am The Human Internet, Blockchain and Clinical Medicine. Nameer Haider, MD

10:30am - 11:15am
The Machine-Brain interface and the Future of Bioelectric Medicine
Daniel John DiLorenzo, MD, PhD, MBA

11:15am - 11:45am Physician Leadership in Healthcare: Better Quality and Lower Costs Haris Naseem, MD

11:45am - 12:15pm Partnering for Change From Fee for Service to Value Based Reimbursement Rick Click, PhD, MBA

12:15pm - 12:30pm RESA Awards Ceremony and Closing Zafar Hamid MD, President APPNA 2018 Saqib Masroor, MD, Chair RESA

#### **Accreditation Statement**

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of Amedco and Association of Physicians of Pakistani Decent. Amedco is accredited by the ACCME to provide continuing medical education for physicians.

#### **Credit Designation Statement**

Amedco designates this live activity for a maximum of 14.25 AMA PRA Category 1 CreditsTM. Physicians should claim only the credit commensurate with the extent of their participation in the activity.



## **APPNA 41st ANNUAL CONVENTION**

July 4 - 8, 2018 Hilton Anatole, Dallas, Texas

**CME FACULTY** 



**Saqib Masroor, MD, MHS, FACC, FCCP** Cardiothoracic Surgeon, Miami, FL



Namirah Jamshed, MD Associate Professor Geriatrics UT Southwestern Medical Center, Dallas, TX



Mustafa M. Husain, MD
Professor and Vice Chair, Dept. of
Psychiatry
UT Southwestern Medical Center, Dallas, TX



**Sanober Amin MD, PhD** Center for Dermatology, Flower Mound, TX



**Rizwan C. Naeem, MBBS, FACMG**Professor and Director Molecular
Pathology, Albert Einstein College of
Medicine, Bronx, NY



**Sarah Barlow, MD**Professor Pediatrics and Gastroenterology,
UT Southwestern Medical Center, Dallas, TX



**Sidarth Wakhlu, MD**Associate Professor and Director Addiction
Psychiatry Fellowship Peter O'Donnell Jr.
Brain Institute, UT Southwestern Medical
Center



**Shahbaz Hasan** Medical Director, Amity Hospice, Dallas, Texas



**Faisal Qureshi, MD**Associate Professor and Chief, Pediatric
Surgery UT Southwestern Medical Center,
Dallas, TX



Sharad Lakhanpal MD Rheumatology Associates, Clinical Professor of Medicine UT Southwestern Medical Center, Dallas, TX



**Imran Afridi, MD**Dallas Heart and Vascular Consultants, Dallas, TX



**Sofia Ansari, MD**Infectious Disease Doctors PA, Plano ,TX



**Samuel J. Louis** Strasburger & Price, LLP



**Gordon J. Quan** Managing Partner, Quan Law Group, PLLC



## APPNA 41st ANNUAL CONVENTION

July 4 - 8, 2018 Hilton Anatole, Dallas, Texas

## **CME FACULTY**



Nameer Haider, MD Minimally Invasive Pain Institute, Ashburn, VA



Daniel John DiLorenzo, MD, PhD, MBA Assistant Professor, Department of Neurosurgery, Loma Linda University Medical Center, Loma Linda, CA



**Charles Swift, JD** Muslim Legal Fund, USA



**Mohammad Asim, MD** Dallas, TX



**Talat Kheshgi, MD**MS Rheumatology Associates, Asst Clinical Professor of Medicine University of Texas Southwestern Medical Center, Dallas, Texas



Masood Ahmad, MD



**Rick Click, PhD.**Altus ACE, Chief Executive Officer

#### Imran S Khawaja, MD

Director Center for Sleep Medicine, VA North Texas Healthcare System Associate Professor Psychiatry and Neurology, UT Southwestern Medical Center

#### **Jeffrey Black, MD**

Director, Luke Waites Center for Dyslexia and Learning Disorders Texas Scottish Rite Hospital for Children

#### Mohammad Ashfaq, MD

Asstt Professor of Medicine and Hepatology Baylor All Saints Medical Center, Dallas, Texas

#### **Mohammad Kashif Ismail, MD**

Associate Professor of Medicine Program Director, GI Fellowship Univ. of Tennessee, Health Science Center, Memphis

#### Abhimanyu Garg, MD

UT Southwestern Medical Center, Dallas, TX

Anwar-ul-Haq, MD

Dallas, TX

**Moderator: Mehmooda Nasir, MD** 

Adult Psychiatrist, Dallas, TX

Harris Naseem, MD



## CDS, Science & Politics

#### Abstract

Over the last seven decades, both politics and ideology have come into play at CDC. But when ideology clouds the scientific research and blurs the public health judgment, decisions go askew, and "Politics" become dangerous.

#### CDC, Science & Politics

Like any other government organization, political oversight and political influence on Centers for Disease Control and Prevention (CDC) is expected. On the contrary, an average American believes that CDC is composed of and only run by scientists. But politics does play a role in functioning of the CDC. "Politics" does not simply mean partisan politics but rather it also implies a broader role of ideologies. Public health has always been at the crossroads of science and politics. Daniel Defoe reports a stark observation from 1665, the year of plague in London, that could apply to many public health interventions then and today, "This shutting up of houses was at first counted a very cruel and unchristian method... but it was a public good that justified a private mischief" (Defoe, 1722). Over the last seven decades, both politics and ideology have come into play at CDC. But when ideology clouds the scientific research and blurs the public health judgment, decisions go askew, and "Politics" become dangerous.

Science, public health, and politics are not only compatible, but I believe that all three are necessary to improve the public's health. In this complex threesome relationship, public health would only flourish when scientific evidence will guide the governmental policies. The best example of this scenario is how the scientific evidence of vaccination helped shape the national and global policies for the greater public good. However, the intrusion of politics becomes dangerous when it is driven by ideologies and misconstrues the science and then dictates skewed health policies. This can be exemplified by the ideologic divide on contraception and sexually transmitted disease (STD) prevention. Such religious ideology contradicts scientific observations and partisan politics thus lead to compromised public health policies. Similarly, in 1995, after undertaking extensive scientific research of firearm injuries and deaths, the CDC reached the conclusion that guns should be considered a public health threat and therefore be regulated in that context. The following year in 1996, due to lobbying of National Rifle Association (NRA), the Republicans in Congress stripped its funding and thus practically forced it to stop research into firearm injuries and deaths (Zwillich, 2015; Frankel, 2017). Therefore, I believe, it's impossible to have an honest debate or an effective policy about gun violence prevention when we can't even fairly study the issue.

Early in the AIDS epidemic, there was an ideologic divide between scientists and politicians as they struggled to devise policies about a new and emerging disease. These policy decisions and their inherent ideology were closely entwined with beliefs about sexuality. But overall politics and ideology did not effectively overshadow the scientific evidence and in 1990, according to Health Resources & Services Administration (2016), the US Congress enacted the Ryan White CARE Act, the largest federally funded HIV/AIDS program (n.d., 2008).

Due to political and financial innuendos, CDC had often failed to fill many of its overseas positions. CDC administration has worried about these vacancies since the threat of a bioterrorist attack from abroad "fuels the urgency to make overseas assignments in a timely manner" (Fies, 2007). Another reason for the delay in such overseas appointments was "an additional bureaucratic layer that requires CDC foreign postings be approved by a senior political appointee's office in Washington" (Fies, 2007). The CDC programs train front-line

workers in outbreak detection. It also helps and supports laboratory and emergency response systems in countries where disease risks are greatest. The goal is to contain and stop future outbreaks at their very source. CDC officials are not anticipating that the current administration will budget additional resources in coming years, due to ideological forces at play in the White House and the Congress. According to U.S. government officials, CDC is dramatically downsizing its epidemic prevention activities in 39 out of 49 countries because money is running out (McKay, 2018). The 10 countries where global health security will remain are: India, Thailand, Vietnam, Kenya, Uganda, Liberia, Nigeria, Senegal, Jordan and Guatemala. The CDC hopes funding for preventive work in the other 39 countries would transition to outside or private companies. Despite scaling back the initiative, the CDC will continue efforts to improve the detection of emerging infectious diseases and will help respond to emerging threats. The agency will also continue its global vaccination programs and keep up current efforts to track and combat HIV, tuberculosis, malaria and flu.

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Retrieved February 25, 2018, from https://www.pri.org/stories/2015-07-02/quietly-congress-extends-ban-cdc-research-gun-violence



Najeeb Rehman, MD

## At The Brink

I turned forty about an hour ago.

My seven-year-old was next to me, counting minutes and then seconds until he could sing happy birthday as I stepped into the next decade. I do not consider myself particularly vain, so the inevitable hint of grey in my hair, and the unironed contours of my face are not at the center of my thoughts right now. The question that begs to be answered at this juncture is rather, how well I understand life.

At two, as I walked and stumbled, uttering phrases that made little sense, I probably thought I understood life a bit.

At five, as dimensions of my personality emerged and began shaping who I'd become, I probably understood it better.

At sixteen, the world was mine, and I was sure that I understood it completely.

On my twentieth birthday, I wrote something about my deep understanding of life, and although I do not recall the exact words of what was titled 'Reflections in the Candlelight', I do remember the naivety engraved in the conclusion of that passage, something to the effect that I had seen it all. I do not have a compelling desire to look through scraps of yellowing paper in order to unearth that amateurish piece of writing.

In my younger days, my birthday had always been an exciting time of year for me, an excuse to spend time with my amazing friends and cousins, piling on solid bricks of memories with every milestone. My birthday falls in the midst of summer break, ensuring that academic pressures did not interrupt the fun. It was religiously hot in the sweltering Karachi sun, but weather was seldom a deterrent in the attainment of pure joy in those bygone youthful days.

At ten, I was a happy kid, a much- endeared, studious only child, my days filled with books and tests and friends, not to forget the countless attempts at quenching my creative thirst by always making time for writing, art and music.

At twenty, I was a medical student, with few worries beyond the pursuit of academic success.

At thirty, I was an immigrant physician in America, having completed my residency, and married for seven solid years.

At forty, I'm a mother, an oncologist, an author, and a divorce'.

Twenty years ago, I had envisioned myself as the first three.

Had there been a title in my college days of 'least likely to get divorced', I could have probably won it without much competition.

Strangely enough, I wrote an article at twenty, about the devastation of divorce. I wrote it in first person from the perspective of my friend who was going through it, in the form of a letter to her former husband. I mailed it from my college to Karachi's leading newspaper,

Dawn. I felt her pain and wanted desperately to share it with the world, never imagining that two decades later, this would become my own reality. To my surprise, I received several heartfelt responses from readers, and it began a conversation regarding arranged marriage and divorce and its consequences. It's ironic that that very article played a pivotal role in propelling me into the writing world as I realized the power and impact that words in print can have.

I had not predicted this to become the path of my own life, and yet I have embraced it, and am proud of myself for making brave decisions that I don't regret. I feel complete and free, and rediscovering who I was, and who I'm meant to be, as a mother and a person, is a gift that I'm eternally grateful for.

Benjamin Franklin said that most people die at twenty-five and are not buried until seventy-five. I wanted so earnestly to disagree with this beautifully articulated, profound thought, and now, I can.

I don't feel any different, fortunately, in the level of my physical endurance, although I have to confess that sleep doesn't come as effortlessly and gone are the days when I could indulge in a guilt-free scoop of ice cream.

I've gained knowledge by virtue of my educational path, but I've gained wisdom, I hope, by way of life lessons. I've reduced my working hours, in order to spend more time with those who will always matter far more to me than my job, even though I love my job, and consider myself blessed to be doing what I am so passionate about. I've spoken with people from many walks of life. Patients and friends and readers have confided in me, sharing their personal stories with utmost candor. I consider their trust a priceless gift. I've learnt that everyone has their share of problems, and profile pictures on face book can hide them well. In the process of sharing the pain of others, I have been healed myself.

I've learnt the nonlinear mathematics of balancing finances, the complex geography of the world, the peculiar science of relationships, and the fine art of saying No. I make decisions, both personally and professionally, and this has been truly liberating. I am more confident, more courageous, more grateful. I'm less trusting, but less judgmental. I'm able to see the spectrum of color in a world that I viewed before solely as black and white.

It's become easier to make acquaintances and harder to make friends--though I have found the very best and have hung on to them. I have friends that I made when I was seven, and they've continued to be an integral part of my life through ups and downs of each decade. I used to be afraid of driving, and now I've driven long- distance for hours in the night. Though I've laughed plenty at my own dearth of mechanical aptitude, I can now fill air in the tires of my car. Despite coming from a family who fears animals, I've killed a snake that was about to enter my home. I spend less time thinking of what others think of me, than I spend on pondering over verses of timeless poetry. I spend less energy on pleasing people than I spend on pleasing my conscience. I facebook less and read more. I procrastinate less. I walk more. I cook less. I travel more. I cry less. I think more.

I'm not as idealistic, perhaps, in that I know well that miracles can greet the very selfish, and catastrophe can strike the kindest of souls. I have realized that goodness is not as powerful a

weapon against adversity as I once thought it to be. I have not, however, permitted pessimism to infiltrate my psyche. I believe strongly in human resilience, and in the unmatched healing power that time holds within its palm.

I've changed in many ways, although at the core, I'm not entirely different from the ten-year-old or the twenty-year-old that I once was. If there's anything I've held on to, in all these years, its empathy, and I value that as something I've inherited and learned, and also passed on to my only child.

Turning forty has suddenly granted me permission to give some sincere advice, so I hope that you will take it.

Read. Respect. Write. Pray. Learn. Work. Love. Smile. Sing. Give. Grow. Hope. Carry on. I've learned to look at life as a well-written story---and so it must, while being filled with purpose, be filled also with surprise. I hold on to the conviction that the best stories are often written in first person, so one cannot expect another to fully understand one's joy or one's agony, and utmost credit must be given for a sincere attempt at doing so.

So, I turn the pages, one by one, working to deepen my understanding of what I've read and learnt so far, acutely aware that there is still a lot I do not know. All wisdom is relative and growing up does not guarantee its attainment. I try not to rush through this beautiful book of life, making sure to capture my son's innocent laughter, my mother's loving hugs, my father's reassuring voice, all at once--pausing to absorb the hues of every sunset, and admire each petal of the magnolia that blooms outside my window. I make sure I walk along the beach, letting my feet dip into the Florida ocean and feel the sand slipping gently away.

So, my friend, keep turning the pages, and don't let the twists in the story of your life frighten you. Well-written stories are meant to be unpredictable—so embrace the turns and bends. You may not be able to alter the main plot, or change the characters, but remember that you are the protagonist, and that role gives you the power to manage the joy and sorrow that come your way, and to find the fulcrum of your being.

You cannot control what others say or do, but you can control your reactions to them. Don't be afraid to edit and cut and paste--rewrite some pages or some chapters if that will make your story more genuine, and if it will lead to a more fulfilling conclusion. Your life-story doesn't have to be for everybody, as long as it has a small, but credible readership. It doesn't need to be a bestseller, and it doesn't need to be a critically acclaimed masterpiece either. Just make it a worthy contribution to the vast literature of lives.

Be inspired, and write it well.



Lara Zuberi is a graduate of AKU, Class of 2000. She is an Assistant Professor at The University of Florida in the department of Hematology/Oncology. She is an author of two novels, The first is The Lost Pearl and the second is Torn Pages. Both are published and available on Amazon and Barnes and Noble.com in both paperback and kindle format. The Lost Pearl is also published in Pakistan and is available in major bookstores. It has received critical acclaim including an honorable review in Dawn Newspaper. Torn Pages is in the process of being published by Ilqa publications in Pakistan later in 2018. All proceeds from both novels go to charities including Shaukat Khanum Memorial hospital, the Edhi trust and others. Currently she is working on her collection of Urdu poetry, which comprises of some forty nazms.

## Red Cell Distribution Width - An Emerging Prognostic

#### Abstract:

Red blood cell distribution width (RDW) is a measure of the variability in size of circulating erythrocytes. A higher RDW has recently been linked to a strong independent predictor of adverse outcomes in patients with chronic heart failure, coronary artery disease, peripheral arterial disease, acute myocardial infarction, pulmonary hypertension, pulmonary embolism, prostate cancer and community acquired pneumonia. High admission RDW levels in patient with ST-segment elevation myocardial infarction undergoing primary percutaneous coronary intervention is linked with increased risk for in-hospital and long-term cardiovascular mortality. A higher RDW level is also associated with active inflammatory bowel disease. Ghulam Abbas, M.D.

**Assistant Professor** 

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Red Cell Distribution Width an emerging prognostic marker Introduction:

Red blood cell distribution width (RDW) is a measure of the variability in size of circulating erythrocytes. The normal reference range for RDW is 11-15%. RDW is commonly measured, inexpensive, and is widely available (1). A higher RDW is a strong predictor of the risk of all cause mortality in critically ill patients in the intensive care units (2). Recent studies have found a strong link of increased mortality in patients with cardiovascular and pulmonary diseases with high RDW (3).

#### Discussion:

In cardiovascular diseases RDW has emerged as a new prognostic biomarker. In one study a total of 698 consecutive outpatients with chronic heart failure were studied with a median follow up period of 2.5 years. A total of 211 patients died and 206 required hospitalization for decompensated heart failure. Patients with RDW more than 15.4% had significantly higher death rate and hospitalization regardless of the presence of anemia (4). It was also observed that among non-anemic patients with acute decompensated heart failure, RDW measurement at the time of hospital discharge independently predicts lower hemoglobin concentrations and new-onset anemia over a 6-month follow up period (5). These findings suggest that RDW should be included as an independent risk marker for prognosis in outpatients with chronic heart failure. In older adults, RDW was a remarkably consistent and strong predictor of total and cause-specific mortality. For every 1% increment in RDW, the risk of death increased by 14% (6). This association was independent of several established risk factors for older adults, including hemoglobin concentration.

Studies concerning RDW for use in the assessment of inflammatory bowel disease have significantly shown that RDW is higher in patients with Crohn's disease and Ulcerative colitis than in controls (7). A subgroup analysis indicated that for a RDW cut-off of 14%, the sensitivity of detecting active Crohn's disease was 79% and the specificity was 93%. RDW was the most sensitive and specific marker for the active Crohn's disease, whereas ESR is an important marker for active Ulcerative colitis (7). Another study has found a graded independent relation between higher levels of RDW and risk of heart failure, cardiovascular events and all cause death in people with prior myocardial infarction but no evidence of heart failure at baseline (8).

Ultrasound detection of carotid plaque and carotid intimal medial thickness in asymptomatic patients is often related to advanced subclinical atherosclerosis, a risk of cardiovascular death and/or myocardial infarction. A higher level of RDW was observed in patients with an increased intimal medial thickness and carotid artery atherosclerotic plaque (9). Although the exact physiological mechanisms that underlie the association of RDW with carotid artery atherosclerosis are unknown, systemic factors that alter erythrocyte homeostasis, such as inflammation and oxidative stress likely play a role. It has been demonstrated that inflammation and oxidative stress are involved in arterial atherosclerosis (10).

A retrospective study of two thousand five hundred and six consecutive ST-segment elevation myocardial infarction patients undergoing primary percutaneous coronary intervention has shown that high admission RDW level was associated with increased risk for in-hospital and long-term cardiovascular mortality (11).

In pregnant women RDW can suggest early onset iron deficiency anemia before other tests can detect it. The sensitivity of detecting iron deficiency anemia in pregnancy was 82.3% and specificity was 97.4%. RDW appears to be a reliable and useful parameter for detection of iron deficiency during pregnancy (12).

In another study it was demonstrated that higher RDW values were independently associated with poor pulmonary function, a condition associated with oxidative stress (13). Elevated RDW was also associated with a significant increase in complicated hospitalization and 90-day mortality rates irrespective to hemoglobin levels in young patients with community acquired pneumonia (14). In a retrospective study of 162 patients it was found that higher RDW was independently associated with increased mortality in patients with pulmonary hypertension (15).

Patients with prostate cancer have high RDW as compared to normal controlled and a higher RDW was associated with an increased risk of progression, whereas a lower RDW value was correlated with a lower risk of progression. Based on this study it was suggested that RDW may be used with other parameters in the assessment of prostate cancer (16).

In a cross-sectional study, higher levels of RDW were independently associated with increased risk of peripheral arterial disease after adjusting for age, sex, race, body mass index, hypertension, hyperlipidemia, diabetes, smoking and other nutritional factors (17).

Higher RDW level and clinical significance in different medical diseases:

Medical disease Clinical significance

Chronic heart failure Increased hospitalization and higher death rate STEMI patients undergoing PCI Increased in-hospital and long-term mortality

Crohn's disease Active /flare

Pregnancy Early detection of iron deficiency anemia

Community acquired pneumonia Complicated hospitalization and higher 90-day

mortality

Pulmonary hypertension Increased mortality

Causes of High RDW:

The mechanisms through which RDW increases with age and is associated with mortality have not been defined; however it is possible that oxidative stress and inflammation play a role and both can reduce RBC survival, leading to a more mixed population of RBC volumes in the circulation (10). In patients with conditions characterized by increased levels of oxidative stress, such as Down syndrome, poor pulmonary function and dialysis, RDW values are elevated (13,18).

#### Conclusion:

The clinical utility of RDW beyond its current use in the diagnosis of certain anemias needs to be evaluated. A few studies have shown that RDW might be a useful screening marker for celiac disease, colon cancer and acute coronary syndrome in emergency settings. In the primary care office while reviewing complete blood count, elevated levels of RDW should not be ignored in patients with multiple co-morbidities.

Considering that RDW is an inexpensive test that is routinely reported to physicians, further research is needed to determine and establish whether RDW is a useful risk assessment tool in different clinical settings.



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## APPNA in collaboration with Depilex of smileagain Foundation





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Plum Blossom B Room

July 4-8, 2018 from 11am-7pm

## Facts about Human Growth Hormone

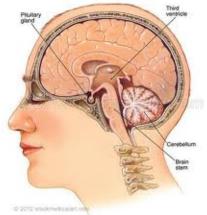
Our biological lives follow stages of growth and decline not too different from that of a plant. We sprout from seeds into stems that continually fortify themselves, trying to become the strongest possible vessel that can carry the more delicate parts of ourselves with necessary ease – the leaves and, if we're lucky enough, the flowers. These delicate attributes – our ability to dance, sing, think and understand information quickly, laugh and play – tend to supply the greatest meaning to our daily lives and create the softest, most treasured memories. Even as the stem begins to decline, these flowers remain in full bloom; they wither away before their time only when the stem is already too far beyond repair.

Supported by proper nourishment, health, exercise, and hormonal balance, the human growth hormone (HGH) serves the role of fortifying our stem. It works in balance with other hormones to provide energy, vitality, and physical growth during our thirties.

#### WHAT IS HGH

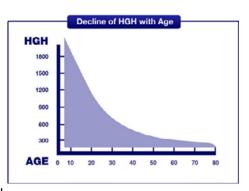
HGH is a combination of amino acids secreted from the anterior pituitary gland in response to the body's activation of the hypothalamo- hypophysial portal tract in the brain. It increases lean muscle mass, decreases body fat, enhances libido, lowers mental sluggishness, and provides clarity of thought.

As we age, HGH, testosterone and estrogen decline in quantity and are, as a result, unable to power the body as efficiently as they used to. The slowness and per-formative, graceful wisdom of old age now becomes an outdated archetype that simply promotes an accelerated decline which accepts the reduction in hormones without protest. Scientists and medical professionals have opted to build a new image of a graceful old age, one full of the energy and



vitality of our youth mixed with the wisdom of our experience and the fruits of our lifelong labors to make these later years of our lives some of the best we might live rather than a droll queue toward death.

Their work initially began with an injectable form of HGH and testosterone but, over time, that method has clinically shown to have a few drawbacks: it suppresses the natural production of hormones from the body's glands, so any interruption in the external supply would lead to catastrophe. These injections are also quite expensive, with each ampule costing up to fifteen hundred dollars. Alternative edible HGH products were also released onto the market with very little research performed to take advantage of the theoretical findings. Often coupled with incredible marketing campaigns and laced with often fabricated



feedback, these products rarely performed what they promised and carried a number of side effects. However, we shouldn't be discouraged by the scammers as the theoretical implications of the product are quite conclusive. We simply need to develop a more critical eye toward purchasing the appropriate product to do the job.

For instance, valuable products may contain the following ingredients:

ARGININE: Researchers have shown that Arginine causes the secretion of the human growth hormone naturally through out glands. As mentioned above, HGH increases fat burning, builds muscle tissue, increases the weight and activity of thymus gland, boosts immunity, fights cancer, protects the liver, detoxifies harmful substances, and restores sexual function in men (as it is a precursor of Nitric oxide, which plays a key role in initiating and maintaining an erection).

GLUTAMINE: Serves as the key to the metabolism and maintenance of muscle. It is the primary energy source of the immune system and essential DNA synthesis, cell division and

Insulin

Hypothalamus

**Pituitary** 

Liver

GH

Long bone with growth

Thyroid

Sex steroids

GH

hormone T3/4

Somatostatin

cell growth. These factors are enhanced by HGH.

GABA-Gamma Amino Butyric Acid: Studies have shown that GABA is a potent neurotransmitter, raises the threshold for tolerating pain, and can effectively potentiate the secretion of HGH, primarily among athletic individuals

ANTERIOR PITUITARY PEPTIDES: The Anterior Pituitary extract can stimulate the pituitary gland more efficiently and increase HGH release. This is a bio-engineered part of molecules from glandular extracts that has been used for years in various parts of Europe and has proven to be safe and effective.

HYPOTHALAMUS EXTRACTS: The peptides plates obtained from bovine hypothalamus also help in stimulating the pitiutary gland to produce HGH through hypothalamo-hypophysial portal tract in brain.

Adipose

tissue secreting

leptin

Products that contain these ingredients have been found to be particularly effective in naturally boosting the production of HGH. I hope this analysis helps you understand how to think about evaluating HGH products and I urge you to perform further research to find the best products that relate to your own anti-aging upkeep. In keep an attitude that prioritizes your own health at the latter stages of life, I hope you age with energy, wisdom, and grace.



Hozair Syed, MD MD (USA) FRCS (UK) MBBS(PAK)

## Here's Some Soap

Carrying neon colored hygiene packs, On the hunt for moms with babies. Before long we have children trailing behind our backs, "where's your mama, please?"

"My friend, my friend" they call out and lead the way. We can't open the borders, but here's some soap? Sorry tear gas is sprayed as your kids play. Here's a comb, maybe it'll give you hope?

"One, one, one" all around me they shout, Always on the look out for any aid their family can obtain. Feeling sorry, my heart sinks, "Khallas khallas, I'm out". As I watch their disappointment, my heart fills with pain.

I walked through all of the sections of the camp today, Meeting Syrians, Nepalis, Pakis, and Afghanis. All trying to communicate to the doctor their dismay, One man with kids in the hospital, because they'd been beaten by border authorities.

Despite the circumstances, I was met with kindness and smiles everywhere,

Kanwal Mirza, MD If there's no other way you can help, send prayer.

#### **President's Luncheon**

First time in the history of APPNA, past Presidents of invited to a Luncheon in the same pattern as past champions hold their dinner at Masters golf tournament. I am so excited and humbled to host these bright stars of APPNA who can truly help the organization in this tumultuous times.

The purpose of this luncheon is to recognize them and brainstorm a way for their continued involvement in the affairs of the organization.

Past Presidents have the most experience of the organization since they had been involved in all the decisions, they had to make as President. Lack of utilization of their cumulative experience and effort has been hurting the organization. They should be given advisory role to raise funds and should take part in tangible projects of APPNA. With the resources they have and time on their hand, they are the real assets of APPNA that we should be extremely proud of.

About 30 past Presidents have confirmed their presence at this APPNA President's Luncheon on Friday, July 6th at 11:30 am.

I am sure that if every one likes this idea, we will continue to have this gathering every year for a long period of time. Thank You Mr/Madam Presidents for your continued love of the organization.

Iqbal Zafar Hamid, MD President APPNA 2018

## Making of a Man

Once upon a time there was a 14 year old boy. He lived in a tent and slept on the ground alongside the rest of his family. All they wanted was to live in a place where they didn't fear for the lives of their children, but that must have been too much to ask.

There was a barbed razor wire fence that was preventing them from being able to move forward in search of such a place. Stuck in this purgatory this young boy would every so often survey the demon wire and its guardians.

One day he went to go survey the fence, as per habit. He was looking for a hole, a weakness, an opportunity for the 100th time - without much success. The guardians of the fence were patrolling with their ever ominous presence.

The boy grew frustrated, how was he ever going to help his family get to Germany this way? His usual timid demeanor fell away and he gave into his frustration. He picked up a rock from the otherwise barren ground and lugged it towards the keepers of the fence.

"Thwack", his rock unexpectedly impacted against the shields of one of the policemen. For 5 seconds the boy was elated, he felt a rush. Then as the officer locked eyes with him and picked up a rock of his own, the fear set in. The child realized what he'd done and fearing the officer would follow him and take him away or worse – he ran.

He ran as fast as his skinny legs could take him. He was in panic, all he knew was he needed to get to his father to keep him safe. And then his foot caught on a stone, he stumbled on the uneven terrain straight into the wire fence.

A scream escaped and within seconds he was surrounded by 10 men who picked him up and ran him over to the medical van. He'd suffered a deep laceration from the razor wire that required 8 staples. He asked that the doctors wait until his father was found but there were other casualties to be treated so the child was told he had to "man up".

The End Oh wait did you think I was telling you a fairytale story? Whoops



Kanwal Mirza, MD

The author is a PGY11 psychiatry resident at Tulane University in New Orleans, LA. She is originally from Texas and graduated from St. George's University School of Medicine in Grenada, West Indies. In 2016, she worked as a medical volunteer in Greece at a Syrian refugee camp on the border of Idomeni and Macedonia. Last year she was awarded first prize in the Gonzalez Resident Award for original research by the Tulane University Dept. of Psychiatry and Behavioral Sciences. She is currently a Training Residents in Psychiatry Scholarship (TRIPS) Awardee through the South Central Mental Illness Research Education Clinical Center of Excellence through the Veterans Administration.

## Jump Start

"Now boarding flight 311 for El-Paso", said the flight attendant over the intercom. I had just finished medical school at DOW medical college, and I was heading over to America for my residency. I had matched at Texas Tech University and was eager to continue my higher education.

When I landed in El-Paso, I realized I knew no one in America, had no means of transportation, and had no place to live. From the airport, I called the Graduate Medical Education (GME) office at Texas Tech and luckily, they were able to arrange a driver to pick me up. The diver took me to the GME office, where I met some of the residents. Another fellow Pakistani had recently bought a house and moved in with her family. She offered me a room there until I found a permanent place of my own. At first, I thought their home would be adjacent to the hospital, however they told me that it was not a safe neighborhood to live in, and that all the residents lived at least ten miles away. With my immediate housing problem taken care of, I then set off to get a car, which I badly needed as my residency began in three days.

The following day, a fellow resident Asif who owned a car, offered to help me buy one. Not knowing anything about automobiles or car dealerships in America, I was grateful that he was able to offer a hand. Asif asked me which car I wanted to buy, and I immediately said Toyota. Having lived in Pakistan all my life, I knew that a Toyota was the most reliable and a popular car.

Since I had no credit history in America and without any cash, the credit union was my best option. Together, we drove to the Texas Tech Credit union and told the nice lady behind the counter our reason for visiting. She told us they have never financed a car to someone with no credit history and no bank account, however, she offered to go ask the manager. The manger was worried that I had no reliable source of income, but luckily, I remembered having my residency contract in Asif's car. After I showed that to the manager, he reluctantly agreed to finance the car. After that, we went to the Toyota dealership where we met with one of the salesmen.

"Hey! What car ya' looking for?" The salesmen asked. Without missing a beat, I replied, "The cheapest one you have."

He took us to the lot and showed us the cheapest car they had, the Toyota Tercel. It wasn't easy on the eyes, but the small green car looked like it would get the job done. The salesmen mentioned that the car came with some extras, like seatbelts in the back, a radio, and a CD player. I asked him if they could be removed to make the price cheaper, to which he laughed and said no. The three of us then went inside to negotiate the price. I did my classic Pakistani style negotiation (which any Pakistani would do) and managed to decrease the price a significant amount from the sticker price. I thought I did a good job, but I saw that the salesperson was still eager to move the deal forward with a grin on his face. I signed the documents and bought the car. I still did not have a driver's license, so I decided to make that my next quest.

I asked the salesperson whether they knew where the closest DMV was, and he pulled out a map and showed me. Asif then left, as he had to go back to the hospital. Left alone, I decided to drive to the DMV by myself. Having never driven in America before, I was nervous, but the moment I sat down behind, my Pakistani survival instincts kicked in and I knew I could do it. With the map in one hand and the wheel in the other, I somehow managed to make it to the DMV.

I took the driving manual, skimmed through it, and took the test. A lot of the rules were foreign to me, like stopping on the side of the road if an ambulance is coming or keeping a safe distance

from the car ahead. Somehow, I passed.

"There's an opening for the drivers test too today," the lady said, "do you want to take that as well?"

I gladly agreed, and she went back to get the driver instructor. He was a very tall, strong, and intimidating police man. I nervously took him to my car, where we began the test. First, he walked around the Tercel to make sure everything was in order, when he realized something was wrong.

"Do you own this car?", the police officer questioned me.

"Y-y-yes" I replied back nervously.

"Where is your emissions sticker?" he continued the interrogation.

"Sorry, I don't know what that is."

He explained to me what it was and told me I cannot take the test until I have the sticker. I told him I just purchased this car this morning and they never gave a sticker. He told me I had to go back, get the sticker, and then come back again to take the test. With no other options in sight, I reluctantly complied. I drove all the way back again to the Toyota dealership and found the same salesmen again. I told him what the officer told me.

"What?", the salesmen exclaimed, "Doesn't he know that a car doesn't need an emissions sticker until its three years old?"

"Look, I don't care" I told him "Just put the sticker on my car so I can go back and take my test."

He put in on, and I took my car all the way back again to finally take the test. The same officer was waiting for me, and was satisfied with the sticker. We began the test, and I was very cautious throughout. I stopped at every intersection, regardless of there being a stop sign or not, which started to get on the police officers nerves.

"Why are you stopping at every intersection? You only stop if there's a stop sign."

"I'm sorry, I'm just being as careful as possible."

Finally, the hardest of the test arrived: parallel parking. I had never parallel parked before in my life. The officer told me to park between two flags, and I failed miserably at my first attempt. He told me I was to far away from the curb and offered me another chance. Again, I failed. the officer gave me a strange look.

"What do you do?" the officer inquired.

"I'm a doctor, starting my residency in a few days", I told him sheepishly.

He told me to bring the car back to the front, and we both went inside the DMV. He handed my report to the lady behind the desk, and walked away. After a few minutes, she called my name. I was sure I failed, but to my surprise, I was handed my license. And the rest was history.

This series of events changed my attitude towards life. I overcame many unexpected obstacles that day, which taught me, for the rest of my career, not to give up. Twenty-seven years later, I remain grateful to Asif, the credit union, the officer, and all the other people that showed me kindness that day. If it hadn't been for them, I don't know how I would have managed to start my residency. Now with todays technology many of these issues would have been handled with ease.

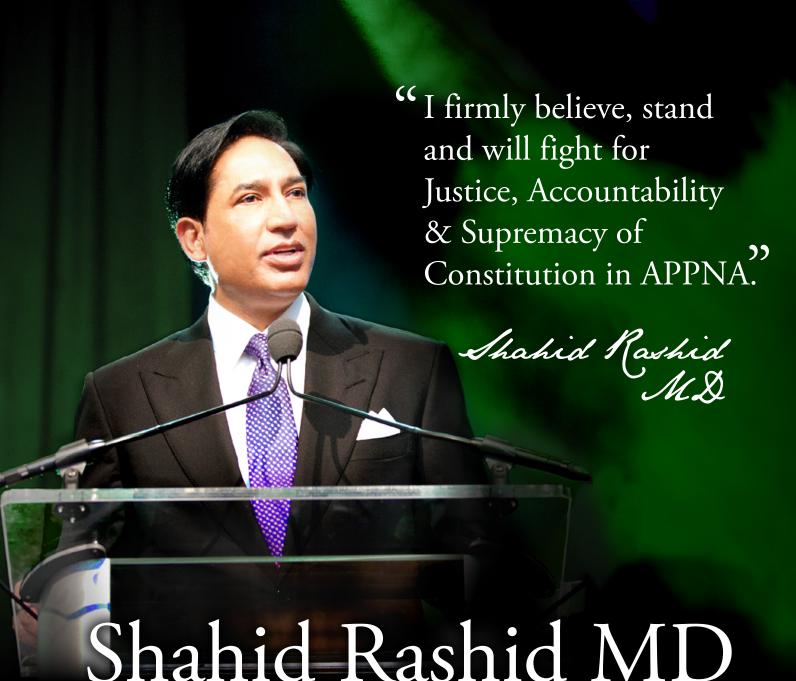


Syed Tariq Bin-Sagheer graduated from Dow Medical College in 1989. He did his internal medicine residency at Texas Tech University and Gastroenterology fellowship at the University of South Florida. He is now settled in Florida in a private practice.



- APPNA SECRETARY 2018
- APPNA TREASURER 2017
- APPNA ILLINOIS PPS PRESIDENT 2014
- APPNA DOW ALUMNI PRESIDENT 2011
- ILLINOIS STATE MEDICAL SOCIETY COUNTY PRESIDENT, SECRETARY & TREASURER 1997-2006
- APPNA DOW ALUMNI SECRETARY 1999-2000
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## Candidate For APPNA President Elect 2019

#### G. Naheed \* Usmani, MD

Professor of Pediatrics. Hematology/Oncology University of Massachusetts





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## Goals

Grow APPNA: Make APPNA attractive for all Physicians of Pakistani-Descent. Revitalize US-Canada Medical Graduates chapter with new ideas.

#### Strengthen APPNA

Education & Healthcare Initiatives: MERIT, Medical Corp, Telemedicine, New University Global Health Partnerships, Student Electives.

Raise APPNA Profile via Philanthropy, Civic Engagement. U.S. Scholarships & Faculty Chairs. Service on License Boards, Medical Societies, Health Policy.

Improve APPNA Governance, Restore Civility & Professional Discourse

APPNA MERIT: Created, Committee Chair for 5 years, Streams weekly lectures to 20+ Pakistani medical colleges, visiting faculty program, U.S. APPNA Specialty Network, New Specialty Fellowships

APPNA Telemedicine: Created, Chair for 3 years, for under served areas in Pakistan

APPNA New England Chapter: Founded, President 3 years, 2005 Earthquake relief work.

KEMCAANA President 2017: APPNA Council 4 years, 3 APPNA Presidential Awards

Shaukat Khanum Cancer Hospital: Founder, Chief of Pediatrics Oncology Department, 5 years

UMASS: Full Professor, Clinical Educator of the Year, Created Sidekicks program, copied by many US medical schools, covered by TV news, Sickle Cell Association of Greater Boston Award.



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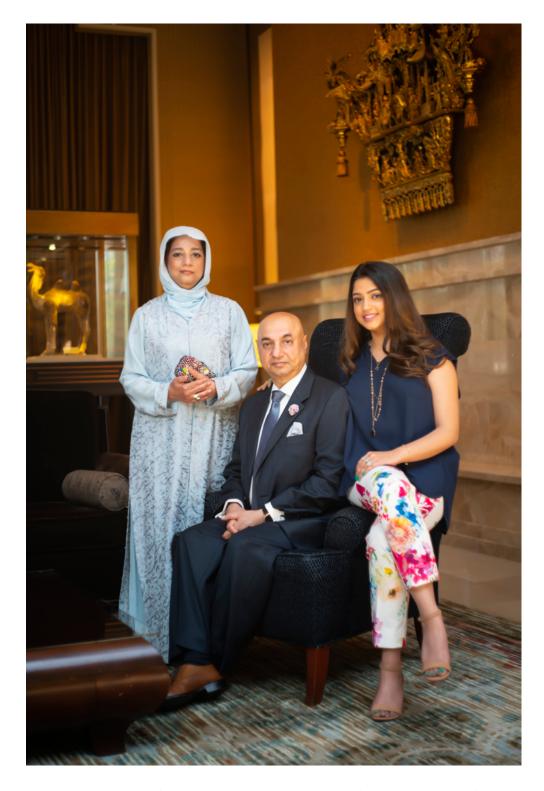
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AFTAB KHAN, MD

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Aftab Khan, MD

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- **Member** Appna Medical Corp Committee
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- **Chair**Appna Office Management Committee
- Chair, Appna Electives Committee
- Chair

Appna Strategic and Planning meeting

- Chair, Appna Spring Meeting

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- AANA President
- Board of Trustees PPS
- Board member Appna Clinic
- Co-Founder " E- APPNA"
- Co-Founder

Foreign Medical Graduates & APPNA Doctors Self Scheduling, Electives & Research Program

- Volunteer Physician of the year Pakistani Physician Society
- Volunteer Physician of the year APPNA
- Completed More than 500 hours of Volunteer work in APPNA Clinic



# SAJID MEHMOOD, MD

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- ★ Treasurer DOGANA 2012, the largest Alumnus of APPNA.
- ★ Chair, APPNA Free Clinics Committee 2017.
- ★ Co-Chair APPNA Scholarship committee 2013.
- ★ Current member of LRH-ICU Project.
- ★ Chair, PPS Community Outreach Committee 2018.
- ★ Recipient of Paul Harris Fellow Award of Rotary International for efforts in polio eradication.



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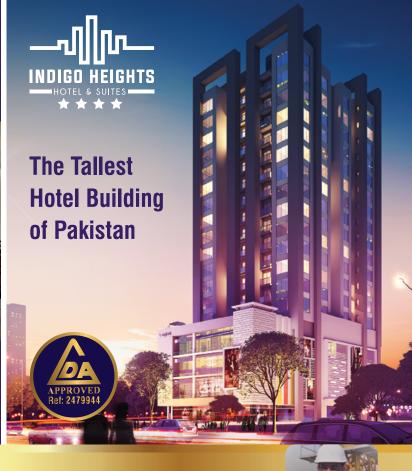




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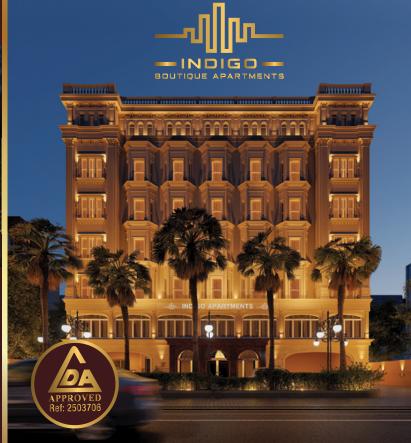


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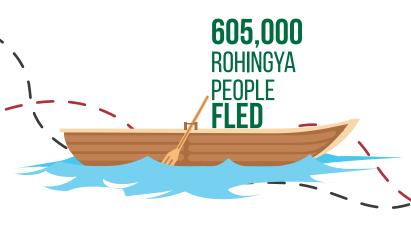
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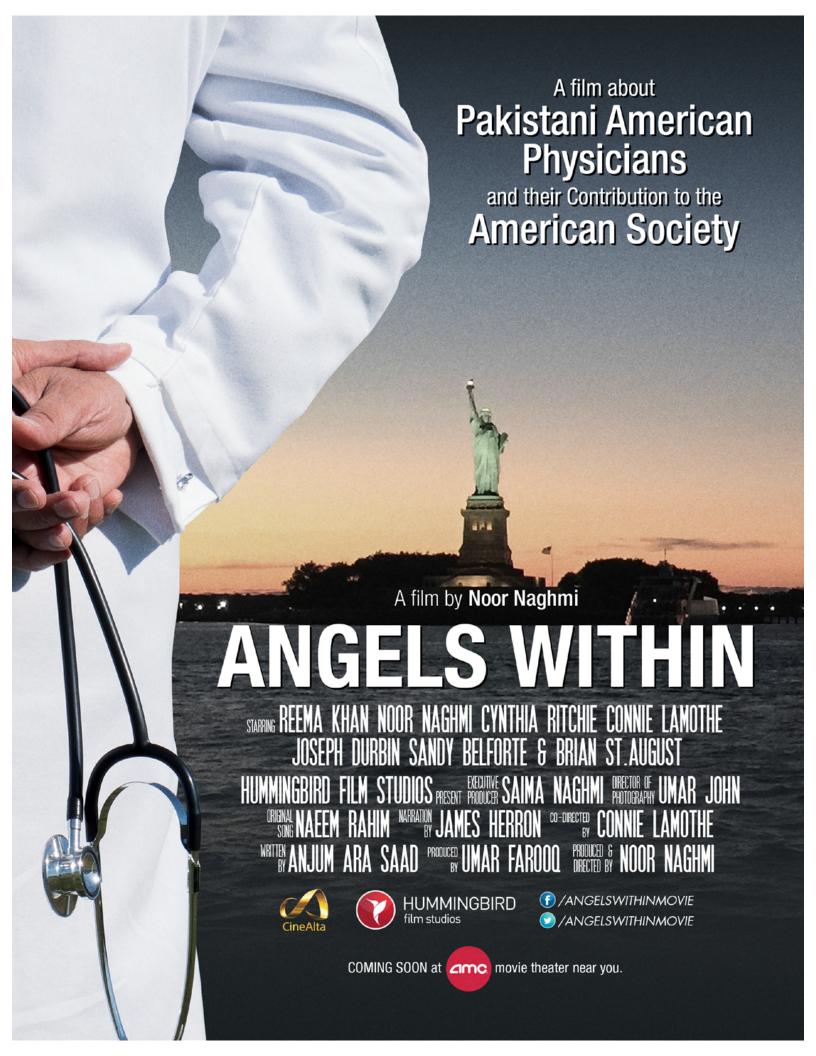
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# A personal approach to investing

#### Irshad R. Sheikh, MBA, AAMS®

Vice President - Investment Officer, Fundamental Choice Portfolio Manager



#### **Focus**

Irshad provides comprehensive wealth management and investment planning processes to help his clients achieve their specific goals. As a Vice President – Investment Officer and Fundamental Choice Portfolio Manager, Irshad manages risk in clients' portfolios with active tactical money management strategies including Social Responsibility portfolios. He works with each client in developing their financial plan.

2400 Dallas Parkway, Suite 100 Plano, TX 75093 Office: (972) 473-5944 • Direct: (314) 604-0822 irshad.sheikh@wfadvisors.com http://wfadvisors.com/irshad.sheikh

#### Background and Experience

For over a decade, Irshad has helped clients address their financial concerns and develop sound strategies by focusing on each individual's specific needs. He has over 20 years' experience as a successful business leader with an MBA -Public Accounting / Finance degree, leading to a Director of Finance position with a \$ 15 Billion company. With extensive experience throughout major shifts in the markets, he has dedicated his career to delivering the personalized investment planning services that his clients and their families deserve. He works with individuals, businesses focusing on their retirement plans, and Institutional Endowment Plans & Trusts. He also specializes in designing a suitable tax-deferred\* retirement plans to maximize tax savings for physicians and small to mid size business organizations. \* Wells Fargo Advisors is not a legal or tax advisor

### Educational Background and Certifications

Irshad earned his B.S degree in Finance

and MBA in Public Accounting from St. John's University, New York and holds Series 7, 63 and 65 registrations, as well as the Accredited Asset Management Specialist (AAMS) designation from the College of Financial Planning.

#### **Prior Corporate Experience**

In 2006 Irshad joined A.G Edwards as a Financial Advisor in the Town & Country Office in St. Louis, MO.

Before entering the financial services industry, Irshad worked for more than 20 years in Accounting and Finance with a Fortune 100 Company. He worked the last 8 years with May/Macy's as the Director of Finance where he managed assets in excess of \$1 billion.

#### Away from work

Irshad likes to play Golf and Racquetball and spends free time with his wife, Farrah, a Clinical Research specialist in Ophthalmology. They enjoy travel and volunteer work. Their son Raheel is MD and is doing his residency in Anesthesiology and their daughter Zofi, is studying to become a Psychologist.

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1. Sparano JA, et al. N Engl J Med. 2015;373(21):2005-14; supplemental protocol.

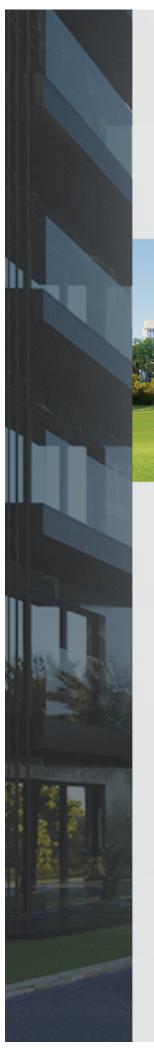
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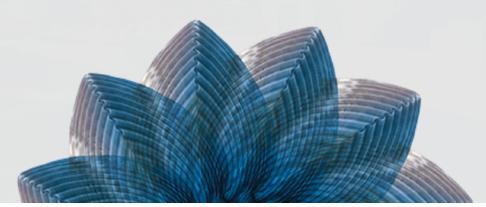
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#### Sofia Ansari, MD

I finished medical school at Allama Iqbal Medical College in Lahore in 2006 and graduated at the top of my class having received a Gold Medal in Internal Medicine. I completed my Residency and Fellowship in Infectious Diseases in 2014 at the University of Texas Medical Branch in Galveston TX. I am Board Certified in both Internal Medicine and Infectious Diseases. I started working in Dallas after completing my Fellowship in 2014 for a group practice. I work in both inpatient and outpatient settings, primarily at Methodist Richardson Hospital. I am certified in Hyperbaric Oxygen Therapy and Wound Care. I also have a special interest in Antimicrobial Stewardship and am the Director for this program at my hospital.



#### Muhammad Anwar, MD

I am board certified in infectious disease and internal medicine. I strive to provide compassionate care to my patients. My goal is to bring positive change in their lives by treating their infections. I treat a broad array of infectious conditions ranging from HIV, Hepatitis C, Endocarditis, Osteomyelitis, Wound infections, Clostridium Difficile infection and multi drug resistant infections. In particular, I like managing immunocompromised patients. My outpatient clinic is located in Bedford, TX and I primarily treat inpatient at Harris Methodist HEB, and Baylor Grapevine.



#### Aliya Haider, MD

I am board certified in infectious disease and internal medicine. I primarily treat infectious disease conditions including but not limited to Pulmonary Infections, Endocarditis, Osteomyelitis, Bone and Joint Infections, Skin and Soft Tissue Infections, HIV, and Hepatitis C. I am also certified in Hyperbaric Oxygen therapy and wound care. My outpatient clinic is located in Plano, TX and my primary hospitals are Baylor Plano, Medical Center McKinney, and Baylor McKinney.



#### Adnan Mushtaq, MD

I am board certified in internal medicine and infectious disease. I finished medical school at King Edward Medical University, Pakistan in 1998, and my residency and fellowship was completed SIU-School of Medicine, Springfield, IL in 2006. My outpatient clinic is located in Fort Worth, TX and I primarily treat inpatient at Baylor All Saints, Medical City Fort Worth, and Harris Methodist Downtown Fort Worth.

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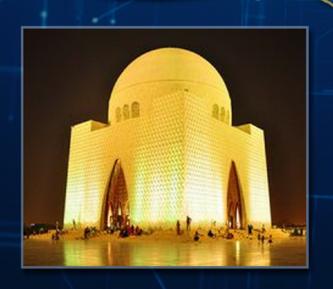
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