

GROW WITH INDIA INVEST WITH KEDIA

सितम्बर में 4 लाख MORE या

15

दिवाली तक 15 लाख रेट बढ़ेगी

जून + जुलाई + अगस्त + सितम्बर | दिवाली पर = 15 लाख

SOLD OUT - 3 BHK BIG KOTHI



KEDIA
सेजस्थान
KOTHI & WALK-UP APARTMENT

अजमेर रोड, जयपुर



PROPOSED FIXED RATE & RENTAL

बड़ी-बड़ी कोठी बड़े-बड़े फ्लैट	आज की रेट ₹	दिवाली की रेट ₹	पजेशन की रेट ₹	पजेशन के बाद रेटल POSSESSION DEC. 2025
युनिट टाइप	साइज			
2 BHK (GF) अपार्टमेंट	1350 Sq Ft	61.65 LACS	65.70 LACS	72 LACS
3 BHK (SF) अपार्टमेंट	1900 Sq Ft	68.50 LACS	73.00 LACS	80 LACS
3 BHK (FF) अपार्टमेंट	1900 Sq Ft	75.35 LACS	80.30 LACS	88 LACS
3 BHK BIG कोठी (SOLD OUT)	2000 Sq Ft	82.20 LACS	87.60 LACS	96 LACS
4 BHK BIGGER कोठी	2325 Sq Ft	95.90 LACS	102.20 LACS	112 LACS
4 BHK BIGGEST कोठी	3200 Sq Ft	137.00 LACS	146.00 LACS	160 LACS

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• SITE 360 TOUR
• E-BROCHURE
• WALKTHROUGH



*T&C Apply



गौ सेवा दिवस

07.09.2024

अखिल भारतीय कांग्रेस महासचिव
तथा राजस्थान प्रदेश कांग्रेस के
पूर्व अध्यक्ष और पूर्व उपमुख्यमंत्री

श्री सचिव पुराण ठारी

को जन्मदिन की हार्दिक बधाई एवं शुभकामनाएं

निवेदक



प्रशांत सहदेव शर्मा
विधायक: आमेर
महासचिव राजस्थान पीसीसी



राकेश पारीक
पूर्व विधायक, मसूदा



महेश शर्मा
पूर्व अध्यक्ष विप्र कल्याण बोर्ड
राजस्थान सरकार राज्यमंत्री



राजेश चौधरी
महासचिव पीसीसी



सुनील पारवानी
महासचिव, राजस्थान प्रदेश कांग्रेस कमेटी
निवर्तमान अध्यक्ष राजस्थान सिन्ही अकादमी



सुशील आसोपा
पूर्व सचिव, प्रदेश कांग्रेस



मोहम्मद इकबाल
पूर्व उपाध्यक्ष
राजस्थान क्रिकेट एसेमिण्डन



गिरीश पारीक
समाजसेवी
हवामहल विद्यानसभा



विजय शंकर तिवारी
सदस्य राजस्थान प्रदेश कांग्रेस



प्रभु चौधरी
चैयरमैन, प्रभुजी, डेवरी ग्रुप



नरेन्द्र यादव
पंचायत समिति सदस्य
गोविन्दगढ़



शशि गुप्ता
पूर्व सचिव, महिला कांग्रेस
विद्याधार नगर विद्यानसभा



रामू शर्मा
सचिव, अखिल भारतीय
पंचायत परिषद



एम. अकबर खान (एडवार्कट)
पूर्व उपाध्यक्ष, राज. हाई कोर्ट, जयपुर



हंसराज चौधरी गाता
युवा नेता, मालपुरा-
टोडारायसिंह विद्यानसभा



कुलदीप राजपुरोहित
पूर्व महासचिव, युवा कांग्रेस



राजेन्द्र शर्मा
जागृति ग्रुप



भंवर सारण
सदस्य, पंचायत समिति फुलेरा



अवधेश पारीक
मसूदा



सांघरमल घटाणा
रामपाली, केकड़ी

“मिले कदम—जुड़े पतन”

#CONSERVATION

International Vulture Awareness Day

Due to their scavenger nature, many misunderstand the wonderful and important birds known as *vultures*, many species, of which, are threatened or endangered.



It's safe to say that vultures, in general, and turkey vultures, in particular, have a pretty bad reputation. People, in many cultures, believe that vultures are disgusting, filthy, disease-carrying birds.

Such stereotype has some negative consequences in the real world and has brought about some struggles for these important birds, many of which can actually be quite beautiful! In order to correct it, various conservation groups

History

International Vulture Awareness Day, which aims to raise awareness of all species of vultures, began in 2009 through a collaboration between Birds of Prey Program in South Africa and the Hawk Conservancy Trust in the United Kingdom. Because of the strength of these two programs, the day quickly spread around the world.

Zoos and wildlife organizations from the United States and Canada to India, Uganda, Serbia, Australia, Tunisia and elsewhere host events where members of the public can learn more about vultures, and sometimes, even get up close to see and experience them! The first Saturday in September has been set aside as a day to consider the ecological importance of a bird of prey that is, otherwise, mostly

How to Celebrate

Looking for fun ideas and plans to celebrate International Vulture Awareness Day? Check out some of these ways to get involved with honouring this bird on this important day.

Watch a Documentary About Vultures

Learn more about vultures in honour of International Vulture Awareness Day and get that info from reading books, researching online or watching a documentary. Check out some of these shows and films that feature the important

Host a Vulture Themed Party

Sure, it's a weird reason to have a party, but it's a great way to raise awareness about vultures! Gathering a group of friends to watch a vulture-centric nature documentary can help share the love of these noble but misunderstood animals, in celebration!

Make a Donation to Help Vultures

Considering that some vultures are now at risk or in danger, International Vulture Awareness Day would be an ideal time to help out a charity that assists them.

THE WALL



Role Reversals In The OT

With advances in surgery (incidentally only possible because of good and safe Anaesthesia), the Anaesthetist is being given a separate identity. Those laid back physicians, who had restricted themselves to the Operation Theatre (OT), have now stepped into nearly every section of medicine. They now play a role in the care of the patient not only in the OT, but also have expanded into esoteric roles of helping in pain relief and care of all sorts of issues in the Intensive Care Unit, to name a few! They are also considered to be experts in therapeutics and pharmacology. Truly, they are the present era alchemists.

Dr. Nirmal Sen
Cardiothoracic
Anaesthetist

For a long while, during the beginning of our careers in medicine, Goutam and I were in a quandary as to which branch to choose for our postgraduate studies in the class. We had the option of many subjects to choose from. This was in those days when selection was made on the basis of Final MBBS marks. The All India PG entrance exam was not in existence at that time.

For Goutam, the choice was easier because he could choose according to his inclination. He was the class topper in Obstetrics and Gynaecology (OB & G). Some of the best specialists in the bigger metros in this branch were men. This was not true in Rajasthan as people were conservative and did not welcome men as specialist for the care of women in their families. All the same, he felt that the time had come to break this glass ceiling in Rajasthan. He applied for OB & G.

When he was called in for the interview, amused glances were exchanged after seeing his six foot plus figure. The Professor of OB & G, who knew him well, gave a half-amused and half-querulous glance. She began by saying that the application was refused. She maintained that even if she allowed him to join as a post graduate, he would, probably, be limited to paper work and never be allowed to touch a patient. Leave alone caring and operating! So, that was the end of the aspirations to become Obstetrician and Gynaecologist. His father had been an eminent surgeon, and so, he decided to follow his footsteps.

My choices differed. I, too, had many options because of my high scores in Final MBBS. I could choose any main subject. Those, who knew me, expected my choice to be OB & G. It would probably have been so, too, but for an incident. There was a one month gap between the ending of our internship and the counseling for post-graduation. I was accosted by Dr. S. N. Kakkar, Professor of Anaesthesia, in the corridor.

He asked: So, what are you doing now?

I answered: I was looking forward to the break.

He suggested: Why don't you come to the Anaesthesia department and help me with the handling of cases. I am desperately short of staff and would be grateful to have an extra hand. You would have a wonderful exposure to the subject.

I accepted the offer hesitantly.

Within few days, I realised how interesting the subject was. At that time, there was a major rush of work in the plaster room where reduction of fractures, dislocations and correction of congenital defects was done in large numbers. Normally, all of them required anaesthesia. The little children usually had very short duration procedures. The patient and general orthopaedic residents did not have the time or patience for the children to undergo anaesthesia because they would have to wait for the anaesthetist for long, at times. So, they would stun the child with a tight slap (*Jhappat*), and quickly get their job done. I was horrified to see this. Then and there, I chose Anaesthesia as a career.

So, when I entered the Principal's chamber for counselling, one of the senior professor in Medicine, Dr. L. R. Sarin, got abruptly, "What is this nonsense? You have chosen Anaesthesia. It is a behind-the-screen career. You are a bright girl. You could do wonders in OB & G or any other main branch. We are not going to give you a PG seat in Anaesthesia."

I was adamant. I was asked to go out and reconsider. Later, I was called in, and seeing my steadfast-

ness, I was reluctantly given the option. This was the year 1964.

It is true that in those days, patients did know the name of their surgeons, but did not have any idea of anaesthetist and the important role played by him/her. Knowing the name was a far dream.

For long, the role of the

Anaesthetist has been hidden

behind many curtains from the patients and the general public. It is only now, six years later, in 2024 that the situation has changed. With advances in surgery (incidentally only possible because of good and safe Anaesthesia), the Anaesthetist is being given a separate identity. Those laid back physicians, who had restricted themselves to the Operation Theatre (OT), have now stepped into nearly every section of medicine. They now play a role in the care of the patient not only in the OT, but also have expanded into esoteric roles of helping in pain relief and care of all sorts of issues in the Intensive Care Unit, to name a few! They are also considered to be experts in therapeutics and pharmacology. Truly, they are the present era alchemists.

As a result of 12000 to 16000 hours of training during PG, the present day anaesthetist is the

expert who is often consulted in the usage of specific drugs and their interaction. They are aware of even the minutest nuances of medicines used in the ICU. The fact is that in most ICUs, the anaesthetist has now taken over the post-operative care of the patient, giving the surgeon the time to do what he is skilled in, surgery. Interestingly, too, there are now ICU intensivists who were initially anaesthetists, and now, the complete moment to moment caretaker of the sick patient.

This is extremely hard work.

The question often asked is, What does the present day Anaesthetist do all day?

It is quite to the contrary today! He can be seen to be busy in the obstetric suite, giving epidural anaesthesia for a painless delivery, and at the next moment, may be asked to resuscitate a severe trauma patient in the casualty. It has been calculated that most anaesthetists do 8000 to 12000 steps in an 8 hour shift, moving from one place to another. This too may be a low estimate as most hospitals are short-staffed and the steps may easily increase by another 3000. Studies show that such duty doctors burn up about 3000 calories while having time for only a hurried cup of coffee/tea and maybe, a *kachori* or *samosa*.

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