

A large graphic of the number '10' is positioned on the left side of the page. The '1' is orange and the '0' is green. The '1' has a curved top edge, and the '0' is a simple ring shape.

A DECADE OF ANBAI

COMMITTED TO EXCELLENCE IN MEDICAL EDUCATION



Committed to Excellence in Medical Education

CELEBRATING THE JOURNEY

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M E S S A G E S



MESSAGE FROM DR. ALEXANDER THOMAS

PRESIDENT, ANBAI

The Association of National Board Accredited Institutions was created 11 years ago, bringing together all hospitals that offer National Board of Examinations (NBE) courses on a national platform. The intent was to form a countrywide network to protect the interests of these hospitals, while simultaneously helping them to enhance the quality of postgraduate medical education, so that specialized healthcare could be made available uniformly across the length and breadth of our nation.

As ANBAI steps into the second decade of its existence, it is heartening to note how much it has accomplished over the years in improving the quality of medical education. ANBAI works very closely with the NBE itself, and has established itself as a strong link between the regulator and stakeholders.

The introduction of the diploma seats under the NBE is a historic step, which will play an important role in the availability of specialists countrywide. ANBAI played a major role in the incorporation of communication and ethics into the medical undergraduate and postgraduate curriculum. Today, the top-notch quality of an NBE education and qualification is recognised the world over, with DNB specialists attaining competitive places across the globe. ANBAI has also partnered with state governments in facilitating the starting of courses in district hospitals.

For students, ANBAI has helped achieve an increase in the number of postgraduate medical seats, providing vital academic assistance

such as subject webinars and exam preparation resources, and solves student issues with the proactive help of the NBE. For teachers, ANBAI has achieved an increase in the number of NBE faculty, promoting the involvement of teachers as examiners and inspectors, and recognizes the services of senior teachers both at state and national levels.

Having served as the President of ANBAI since its inception, I am gratified to witness not just the achievements, but also the growth of this organisation into what it is today – a vibrant, solid network with 12 regional chapters, each contributing in its own way towards medical education in our country. As we work towards strengthening the regional chapters, we also endeavour to strengthen the alumni wing so that it can become a force to reckon with. The national secretary of ANBAI, Dr. Venkatesh, with his forward-thinking plans and strong commitment to implementation has played an important role in the organisation's development.

I am confident that in the years to come, the NBE stream of postgraduate education will become even more sought after for its high-quality standards and affordability. Ultimately, it is the citizens of our country who will be the beneficiaries of the improved quality of medical education.



MESSAGE FROM DR. RAJASEKARAN

PRESIDENT ELECT, ANBAI

I have been associated with ANBAI right from its inception and I am proud to be one of the Founder members of this association. The institutions which participate in the National Board of Examinations (NBE) contribute considerably to the education and training of various specialities in medicine and slowly the National Board institutions were playing more and more role in the post graduate medical training in India. It was obvious that these institutions should have a common platform so that they can share their experiences and needs and also collaborate more with the National Board.

Medical science in India is very different from that of the West and the DNB institutions have tremendous role in the health care scenario. There is ample evidence that a significant amount of advanced medical and surgical treatment in India is in DNB institutions and in many regions of the country, more cutting edge, more complicated and more sophisticated surgeries are performed in DNB institutions. The DNB institutions also have many eminent physicians and surgeons who are respected internationally, who have tremendous experience in their respective fields and who also play a prominent leadership role in their respective professional bodies. Many innovations and introduction of latest cutting-edge techniques also happen in DNB institutions much ahead of the Government institutions. In recent times, DNB institutions have played a major role in research also, placing India in the world map of research. In view of this, the Founder Members of ANBAI felt that there should be a platform for all the institutions to not only represent their ideas and needs but also bring together their skills and positive energies so that they can learn from each other and also contribute accordingly to education and training. The idea was to augment the capabilities and contribution of the institutions, playing a supportive and collaborative role to NBE.

The initial journey, as expected, was challenging as there was the problem of getting acceptance and recognition from NBE and also

wide membership of NBE institutions. This was however slowly overcome and now we are very pleased that ANBAI and NBE work hand in hand for the same issues in the promotion of training. This in fact is not a problem because there is no difference in the aims and objectives of ANBAI and NBE.

In the beginning, the most important thing was also to conduct many face to face meetings and conclaves, so that representatives of DNB institutions can meet together. It was a challenge to conduct big meetings and it was our privilege to have the first few conclaves in Coimbatore and in Ganga Hospital. The deliberations in these meetings formed the foundation of the society and we feel proud and privileged about this. Ganga Hospital feels privileged to have made this significant contribution to ANBAI.

Where can ANBAI improve as an organisation:

In other educational sectors and other universities, educational institutions have a major role in the curriculum and education and also participate in the governance by being members of this senate and governing bodies. This is fundamentally required and is integral for the development and growth of any association. Unfortunately this is not the case with the National Board. We strongly feel that this should change and National Board should have two members of ANBAI in the Governing Council. This will improve the transparency, enthusiasm and positive participation of all the institutions.

There is also a lot of scope for improving the communication between the National Board and the institutions. Any change in rules or regulations or change of requirements must be prospectively communicated to the institutions in advance and not retrospectively. But these are all changing for the better and we are fortunate to have our President Dr. Abhijat Sheth who is not only easily accessible but also is very sympathetic to the rightful needs of the institutions.



MESSAGE FROM DR. DEVI SHETTY

CHAIRMAN, NARAYANA HEALTH

It is a matter of pride and delight to note that Association of National Board Accredited Institutions (ANBAI) has successfully completed a decade of fruitful association.

I congratulate each of the member institutions for the role they have played in training medical specialists and super-specialists. The nation's secondary and tertiary care has received immense boost with ANBAI playing a major role in training the specialists for future.

If the past decade saw consolidation of specialist training, the coming decade will be an interesting mix of maximizing the training base and complementing the technology driven and safe health care to reach the masses.



MESSAGE FROM DR. ABHIJAT SHETH

PRESIDENT, NBE

I was the president of NBE for the five year term from 2016 to 2021. In that time, we have reformed the DNB, MB and MS seats and post graduate courses. When my tenure began in 2016, we had a total of around 4,500 seats and it has increased to over 10,500 now. Due to the collective effort from the NBE governing board, the administrative board and the stakeholders as well we have been able to achieve this growth. It would have been higher, however, we haven't been able to grow during the pandemic and that will definitely change soon. We revised the policy regarding accreditations, making it a bit easier and more encouraging for the participating institutions. This has encouraged more and more institutions to get involved. We have also liberalised some of the non-statutory criteria. Earlier, we allowed regional institutes of up to 100 member batches and less also to participate in the DNB programme. Earlier, the limit was 200 plus members. Now with a lower limit we have managed to include many other smaller hospitals in the accreditation process. There were many other reforms that took place over the past five years. We legalised faculty criteria, we put the entire accreditation process online and made things easier for stakeholders. The programme was then expanded to regional institutions, as well as in government institutions and district hospitals. At the same time, we removed certain blocks in the accreditation criteria, which really helped us in increasing the seats to 10,500.

One of the major reforms that we were involved in, was the introduction of diploma courses. We started post graduate diploma courses in eight broad specialities across the country - in paediatrics, anaesthesia, ob-gyn, gynaecology, ENT surgery and others. Through this we have encouraged more regional institutions, government institutions and district hospitals to join the programme. We will continue to work with the India National Medical Commission and want to reach 20,000 seats by 2025. We noticed a lot of issues faced by doctors across the country, which prompted us to investigate further and realise the need for a book of guidelines for medical practices, which was published by

us and saw the participation of many ANBAI leaders. We published the book for MBA students to avail of, so that they can understand the roles and responsibilities involved, as well as develop a professional approach in their formative post grad years. Another reform was when we started an International Fellowship Programme where those from SAARC countries, as well as the Far East and Middle East, can come here and take advantage of our skilled faculties. They can gain a better understanding of clinical medicine here before they go back home and implement what they have learned there. This will definitely add a boost to medical tourism in parts of India as well as in the respective countries. We made a few improvements and changes to our OSCE, the objective standard examination. We extended the OSCE examination across the country in more than 20 subjects. This helps candidates who could not travel to the main centres and take the exam, because of the lockdown and restrictions. We also started the NBE Wave learning programme, which is now extended to 27 specialities out of 84 specialities facilities and we are going to expand it further. We rolled out these two important learning tools that can be helpful for the doctors, during the pandemic.

Our next intention is to create a state of the art national skill and training institute for post graduate doctors across the country. This is a skills training programme, where we encourage the development of new modalities for training. We are also working to strengthen the existing modalities and push for technical advancement, the enhancement of virtual skill training, virtual simulation and virtual staff training. We are also going to establish a national institute that can be beneficial for DNB students and all the NBE students across the country.

We will continue our journey, with our stakeholders and with ANBAI. We have a very long relationship with them and have a clear vision for the next five years.



MESSAGE FROM PROF. PAWANINDRA LAL

EXECUTIVE DIRECTOR, NBE

I would like to congratulate the leadership of the Association of National Board Accredited Institutions (ANBAI) for releasing ANBAI Coffee Table Book 2021 on the occasion of the Annual Conclave being held at Hyderabad on the 4th and 5th of September 2021, celebrating 10 years of ANBAI.

The National Board of Examinations in Medical Sciences (NBEMS) is associated with more than 800 institutions in the entire country where nearly 30,000 trainees undergo training in DNB/DrNB/FNB courses. Since three-fourths of these are in the institutions represented by ANBAI, NBEMS has constantly engaged with it in order to hear the views and suggestions from its stakeholders and resolve them to the best of its ability. NBEMS looks at ANBAI as an important mediator between the NBEMS and accredited institutions towards improving the quality of training and incorporating the suggestions for the benefit of the trainees.

The country has gone through the biggest pandemic in recent history in the last 18 months seriously impacting hands-on clinical training in the respective subjects. NBEMS continued to perform its duties and conduct of National Entrance Examinations such as NEET-PG, NEET-SS, PDCET, FET and FMGE (Screening Test). Converting the pandemic into an opportunity, NBEMS devised OSCE format of exit examinations for all the DNB/DrNB trainees and nearly 8,000 candidates were evaluated using this modified examination method in 2020-21 in 27 subjects with an overall pass percentage exceeding 80%. NBEMS has continued to deliver

the same format of exit examinations in 2021 and more than 3,500 candidates have already appeared in the exit examinations held in the month of July, August and September 2021.

Despite the challenges of COVID-19, NBEMS has made up for the time loss and is now back to the pre COVID-19 calendar. This could not have been possible without active involvement of the NBEMS accredited institutions and the faculties.

NBEMS has also launched new diploma programmes in 8 subjects namely Anaesthesia, Obstetrics and Gynaecology, Paediatrics, Family Medicine, Ophthalmology, ENT, Radio Diagnosis and Tuberculosis & Chest Disease and nearly 1,500 seats will be added in the NEET-PG 2021. This is perhaps the biggest reform in medical education and training since independence where trainees will be able to get the best of hands on training in the district hospitals of India from clinicians having huge clinical volume while dramatically improving the round the clock medical care for the patients as district hospitals do not have a residency programme.

I would like to congratulate Dr. Alexander Thomas, President, ANBAI, Dr. H.S. Chhabra Vice President and Dr. Venkatesh K, Secretary, for bringing out this Coffee Table Book as a mark of celebration of 10 years of ANBAI and wish the Annual Conclave at Hyderabad all success.



MESSAGE FROM DR. G. S. RAO

ORGANIZING CHAIR OF ANBAI CONCLAVE 2021

I am happy to note that Association of National Board Accredited Institutions (ANBAI) is bringing out the “Coffee Table Book” on the auspicious occasion of National Conclave and Teacher’s Day celebration on 5th September, 2021.

It is a novel idea to bring out this book and it is a tribute to all those stalwarts who have worked for ANBAI, The contribution of the association is exemplary. The idea of conducting the teachers award ceremony by identifying the best teachers of the country is a marvellous act by ANBAI.

Congratulations and best wishes to the talented teachers, ANBAI team and in particular, ANBAI unit of Andhra Pradesh and Telangana State.

articles





DR. VENKATESH KRISHNAMOORTHY

HONORARY SECRETARY, ANBAI

ANBAI is a remarkable organisation that represents all the NBE accredited Institutions in the country. Its pan India presence has been made possible by the involvement of clinicians of international repute.

In addition to their regular clinical work, they have toiled several days and weeks to build the organisation to where it is today. Each one of them is highly respected both nationally and internationally in their own fields and are held in high esteem. Several of the institutions that they have built are recognized for displaying some of the highest levels of clinical work and training across the world.

It is a matter of pride that these private hospitals quietly shoulder the responsibility of postgraduate medical training for over 85 percent of the seats in the NBE stream of training.

This reminds me of a verse from English poet Thomas Gray's 'Elegy'.
*"Full many a gem of purest ray serene
The dark unfathomed caves of ocean bear:
Full many a flower is born to blush unseen
And waste its sweetness on the desert air"*

In this context, 'Elegy' is actually a metaphor for common folk who do heroic things that are never reported in the news or recorded in history. Like a precious stone lying unmined at the bottom of the

ocean, or a beautiful flower blooming in a deep neck of the woods, their work may not be seen or known, but it is nevertheless heroic in every sense of the word.

The NBE Accredited Institutions are these gems, and the lay public is unaware of the monumental work these institutions are undertaking, to help the government bridge the vast gap in the doctor-patient ratio across India.

It is but natural that in the middle of all their work, the organisation needs periodic calibration and alignment, especially when it has grown immensely over the decade.

It was in fulfilment of this requirement that over the last two years, ANBAI has gone into introspection and self-correct mode. It is now a lean and mean organisation that is going from strength to strength.

Every single improvement and progress has been due to unanimity in the support and agreement at all times. ANBAI can only go to greater heights from here, and will be a beacon to similar organisations across the subcontinent and elsewhere in the world too, where such training programs are conducted by their governments.

The sky's the limit for ANBAI now and I wish them all the very best.



DR. SUNIL SHARMA

JOINT SECRETARY, ANBAI

It has been more than five years since I have been the joint secretary at ANBAI. ANBAI has done a lot for the students as well as the institutions. We have approached NITI Aayog to provide free access to expensive journals for all the institutions in India. We have even asked the National Board to increase the fees for students so that institutions don't lose money. The fees, earlier, were not enough and institutions found it tough to keep up with the costs of teaching, maintaining facilities and other expenses.

We focus on issues and needs that are common between institutions - for eg: courses that need to be introduced, access to medical journals etc. We also do need to improve in certain areas when it comes to proper designations for professors, whether it's senior, associate or assistant.

The pandemic was a bit tough to handle, because the workload shifted completely towards treating COVID patients. It's not back to normal yet and it will take some time. Now the DNB students aren't getting enough patients to learn on the job, since COVID has seen a lot of elective procedures postponed.

The rural areas in India need our attention. We want to promote emergency medicine, for example, or preventive and social medicine. These are very important in India. We aim to push this, as well as implementing processes for tele-medicine. Remote areas don't have specialists, but via tele-medicine, there's a chance of implementing good solutions. Preventive medicine too is something that we are interested in promoting. We can share resources with smaller districts, where institutions can join ANBAI and get access to better resources, research and learning tools.



DR. A. LINGAIAH

ALUMNI COORDINATOR, ANBAI

We started the DNB Alumni Association in 2018 when we had a national conclave at Ganga Hospital in Coimbatore. We conducted two programs for the Alumni Association. One in 2018 and the second in 2019 in the presence of ANBAI executive members, the NBE president and executive director

One of our accomplishments was requesting for the equivalence of DNB courses with MDMS . Now that the National Medical Council has been formed, the degrees have been given equivalence. We also requested the DNB to engage NBE trained faculty that have passed in conducting exams. Now 50 percent of the examiners are those that have passed out of DNB. Now, our next request is to bring an equivalence to ranks like senior professor, instead of senior consultant.

The Alumni Association now has a representative in each state, who is reaching out to those passed out from DNB. We have created a website for placements and have asked institutions to provide information about speciality vacancies. Since the pandemic began, students have been unable to work on their thesis, and we have requested NBE to postpone submission dates.

At the Alumni Association meetings, we recognise students who get awarded a gold medal in DNB courses .We have plans for many more such events, which will help bring together more DNB alumni.



DR. DEVI SHETTY

PATRON, ANBAI

Higher medical education and Postgraduate Medical Education was not available to almost everyone for decades. However, thanks to the National Board of Examinations, higher medical education became a reality for a huge number of young doctors. The NBE opened excellent hospitals, which are not part of a medical college, for the purpose of training future specialists.

As the number of these hospitals conducting postgraduate training programmes increased, the different hospitals began to realize that we have a lot of common requirements, for instance an increase in faculty, a library that is current and a forum to discuss challenges that we, as individual Institutions and as a collective, face.

We envisioned a manner in which we could voice our issues to the board as a collective. If we came together to recognise a common problem and could effectively make our case to the NBE, it would be far more effective. We came up with a few possible solutions and that is how ANBAI came to be.

One of the main reasons that enabled us to be so effective in our endeavours was because of the immense support from the National Board. Not too long after we were formed, the National Board accepted us as an Organisation, a partner rather than a foe. That was when everything changed, for the better. It was the turning point, a crucial milestone in both our timelines. Once that happened, they became a part of our activities. We had support from the President, the Executive Director and everyone else on the National Board.

We managed to function well and efficiently simply due to their belief in us and our cause. One could say that both parties benefit here and that also pushes us to progress further.

If you check the records before ANBAI started and now, you will be able to chart our progress. The number of hospitals that started courses was a small number that has now increased tenfold. The number of courses in hospitals increased and by extension, the number of students. These are three most important aspects of our work.

Now, with the launch of diploma courses by the National Board, over a thousand hospitals who aren't big enough to have a full-fledged training programme, can now come under the ambit of ANBAI. I also expect that postgraduate training programmes, something that is desperately required, will be under the National Board of Examinations, which will lead to many more hospitals getting inducted into the programme. ANBAI will thus grow exponentially.

Our target is that every graduating doctor, who aims to become a specialist, has a PG seat available. I wait for the day when we can equalise UG and PG seats in the country. In the UK, for instance, there is no equivalent to the PG seat. If you want to become a specialist, you work in that speciality in a hospital. Then, at the end of the required years you appear for your exams. I see a future in India where the postgraduate training programme will evolve to resemble that format.

We count ourselves lucky because we have seen a series of young and passionate doctors who are passing on the baton with pride. The future of ANBAI is in the hands of the future generation of doctors who, when they graduate and become specialists, they continue to nurture ANBAI and raise the bar higher. That is very important for the progress of ANBAI. Organisations are nothing without the passionate people who drive them.



DR. BHABATOSH BISWAS

FOUNDER MEMBER, ANBAI

I have been a part of ANBAI from the very beginning. I've always felt that there was a need for more specialist doctors in the country. There are also several parts of the country where there are very few hospitals. This causes complications.

To address both the lack of specialists and good hospitals, doctors like Dr. Devi Shetty, myself and many others decided that the time to work to improve conditions in rural and remote areas was now. We have almost 700 districts. If the district hospitals are improved with reasonable facilities and reasonably trained doctors then these cases can be handled.

I was working in West Bengal as the vice president of the National Board. Our idea was to convert district hospitals into DNB specialists. The idea was accepted by the West Bengal Medical Department. Then six districts were selected and each district hired specialists in gynaecology, radiology, paediatrics etc. Through this, five departments in each hospital in six districts were converted into teaching hospitals.

Since students were coming in, there was pressure on the senior surgeons and hospitals to keep their facilities in order. After three

years, doctors started passing out in these new departments and the departments improved, the quality of service increased in these districts and the infant mortality rate came down.

As ANBAI we advise hospitals on how to go about this process – whether it was speciality training or inspection or facilities. How to organize the hospital, how to conduct training, how to share facilities in the hospital, how to optimally use manpower and machinery, how to make the teaching effective etc. – for all of this, hospitals needed hand holding and this hand holding and guardianship work is done by ANBAI.

What National Board expects from the institutions that are accredited, ANBAI manages to help hospitals deliver this quality. ANBAI is a platform that helps to improve the training structure of the entire country, which helps improve the condition of the hospitals, which works in favour of the regulatory bodies. That is how ANBAI helps solve problems on a national level.



DR. SUDARSHAN BALLAL

FOUNDER MEMBER, ANBAI

I am honoured to be one of the founding members of ANBAI. The seeds were sown in the boardroom of Baptist Hospital, where a few of us were training for DNB. Incidentally, one of our first actions was filing a lawsuit against the National Board. But even though we started off on the wrong foot, our institutions are the best of friends now. There is no ill will. We fought for a cause and despite our loss, we continued to fight for that cause, this time with the help and association of the National Board. I do believe that ANBAI has contributed greatly to all the DNB training institutions.

There was always a tussle between MD, MS, MCH, GM and DNB degrees. People considered some, like MS/MD etc, to be superior. But today, DNB has been given an equivalent status and many are applying for these degrees. I think the working relationship between the National Board and ANBAI contributed greatly to this.

In addition to what we are already doing there is still scope to increase the number of postgraduate candidates with an emphasis on rural setups. In the past, most DNB programmes were restricted to private organisations in cities. Now the government of Karnataka, for instance, is opening up many of its government hospitals for DNB training programmes and ANBAI has had a very large role to play in it.

We also need to recognise that healthcare is a fundamental right in this country. Though the Prime Minister has started Ayushman Bharat it has not reached the masses. Every Indian citizen should be eligible for good healthcare, just like many countries in the world. Universal health care is the need of the hour and most people suffered heavily during the pandemic because we don't have strong universal health care coverage.



DR. SRINATH REDDY

FORMER PRESIDENT, NBE

I was appointed as a chairperson of the National Board of Examination in October 2009. The NBE existed in various forms since 1973 and it was doing a good job of conducting examinations with a great degree of standardisation across the country, as well as running several academic programmes for postgraduate training.

However, there was a major lacuna in the way the NBE functioned with respect to communications. The board communicates with registered students, with institutions running the programmes and coordinators of hospitals. But the process of addressing issues and replying to queries was laggard and needed change. This was brought to my notice via e-mails and even during medical conferences and the like.

Fortunately, the NBE governing body is a group of passionate professionals so I didn't have to do much convincing. However, they are only the governing body. It is the duty of the secretariat to process all communications, so we had to bring up a few changes in their functioning. Slowly, things began to improve.

It was during this period that the various hospitals affiliated to NBE training programs decided to form ANBAI. The association was born out of a sense of frustration among the various institutions. Many at the NBE were unsure of what would happen if ANBAI was granted official status. Some suggested not holding a meeting between ANBAI and the NBE, as it would legitimise the association. But I was of the opinion that as stakeholders, they had every right to voice concerns, since they represent teachers and students as well

as run all the training programmes. We established a very cordial relationship with them, in the interest of the teachers and students.

When I stepped down in 2014, ANBAI was keen to continue this fruitful association, so I was invited to their meetings as a guest. I was then also the president of the public health foundation of India, which had a very strong training division. This prompted ANBAI to partner with the PHFI and organise training programmes for physicians. There was no conflict of interest with the NBE, so it was all above board.

The NBE has one of the best postgraduate training programmes in India. There are obvious advantages to training in a medical college. The wealth of experience and expertise that lies within these institutions running NBE programmes is of great value. The selection procedures are standardised across the country, as are the examination procedures. There is a high level of integrity in the ways the programs are conducted.

For the future, I think NBE and ANBAI should work together to increase the scope and quality of their post graduate training programs. The field of medicine is constantly changing and doctors need to keep abreast of the changes. There are a large number of postgraduate doctors who need training in multiple areas of speciality. NBE has a major role to play here and ANBAI, which represents the training institutions, should also look to increasing numbers without diluting quality.



PROF. PAWANINDRA LAL

EXECUTIVE DIRECTOR, NBE

The National Board of Education has a mandate to conduct post graduate training across various accredited hospitals in the country. They also conduct the super speciality examination for the entry towards these courses, not only for the National Board but for the entire country too. ANBAI is the nodal point of contact on behalf of all accredited institutions and we have dialogue with them. They convey the requirements of the National Board to institutions, and the requirements of the institutions and students to the National Board. This makes ANBAI a very important intermediary.

The NBE and ANBAI share a very healthy relationship. The National Board has been proactive in recognising the needs of the institutions, as well as the stakeholders within the ANBAI accredited institutions. We have always looked for ways and means to improve the training or address the issues that have been brought to our knowledge.

Obviously one of the most important mandates of the National Board is to increase the postgraduate seats with the condition that the quality of training is not compromised. So the addition of seats is not at the cost of quality or any compromise on infrastructure or in the faculty.

There are four types of degrees awarded by the National Board. There is the DNB degree for broad specialities, the Diplomate, the DRNB and the fellowship in the postgraduate and post doctor course, which is a two year programme. There are also six year courses run by the NBE. Therefore, it is very important to increase the number of seats across all these categories. ANBAI will ensure the quality of candidates and training remain impeccable. This is because the training at an ANBAI accredited institution is supposed to be comparable to

the national medical commission supervised training in medical colleges, both private as well as those run by the government. There is obviously a huge responsibility on NBE accredited institutions because they need to be at the same level as NMC accredited institutions.

At the National Board, we converted COVID-19 from a limitation into an opportunity, and divided new methods of examination. One of the most important changes was with the Objective Structure Clinical Examination (OSCE), which was held in 2020 for 8,000 candidates in 27 subjects. This was one of the largest examinations delivered by a single body in the middle of the pandemic.

This was successful, primarily because of the pro-active participation of ANBAI, and the National Board partner institutions and faculty of hospitals who worked with us to ensure that everything went smoothly.

The NBE also devised a teaching role, which was unique because the board wasn't involved with teaching at all. During the pandemic in 2020, we started webinars directly via the National Board. Around 35 subjects were covered in the classes, which were held every week for every subject. We will be training students via CME based lectures, tutorials, discussion, seminars and general clubs. All of this can be done via webinars. We hope that we could work together with ANBAI to ensure quality teaching and training across our accredited institutions.

I became the executive director in April 2020 and I would very much like to see the collaborative role between ANBAI and the National Board get strengthened further.



DR. RASHMIKANT DAVE

FORMER EXECUTIVE DIRECTOR, NBE

I have been with NBE as Vice President and then honorary executive director

When I started, we had around 5,000 seats for the post graduate and DNB programmes. When I left, we had more than 9,000 seats.

I had also initiated a diploma programme, a two year course where they could then work as a specialist. ANBAI and the National Board started to strengthen the district development DNB, mainly in Karnataka and other states.

We also started online counselling for DNB courses and conducted exams in a single day, as opposed to previously staging them on multiple days. We even streamlined the admissions process to a single phase admission, instead of twice a year admissions in the past.

ANBAI has developed a faculty development program for NBE. This is aimed at the teachers who are running DNB courses, in order to orient them and discuss different rules and regulations for NBE.

There has been an effort to involve more states in the DNB seats. More than 80% of the seats are in southern coastal states, Delhi and Maharashtra. The other 20% is spread over the rest of India. The National Board and ANBAI can work together to motivate the hospitals and government sectors to participate in the DNB programme so that more PG seats can be opened up.

Right now there is a dearth of specialists in certain areas. For instance, they're present in southern urban areas, but hardly any in rural UP, Rajasthan, Gujarat and Orissa.



DR. BIPIN BATRA

FORMER EXECUTIVE DIRECTOR, NBE

I am happy to see ANBAI grow leaps and bounds over the years. One of the biggest achievements during my tenure was the creation and introduction of centralized admissions. Candidates were given merit based choices and this had a positive impact on the system. The number of candidates appearing for the counselling and the entry examinations increased exponentially, by five to six times in the first year itself.

There was a time when around 7,000 candidates would be applying for roughly 2,500 seats. Today, there are around 30,000 candidates for 30,000 seats.

We ensured that all communication was responded to, so that stakeholders did not have to make multiple rounds of the office, or follow up continuously by phone. This was probably one of my biggest accomplishments as director of NBE.

Another achievement was the introduction of the DNB programme in district hospitals. The hospitals, too, benefit from the training programmes.

The future of this sector is robust, especially with the inroads ANBAI has made over the years.



DR. C. S. RAJAN

EMERITUS CONSULTANT SURGEON, ST. MARTHA'S HOSPITAL

National Board of Examinations (NBE) is an autonomous body under the Ministry of Health and Family Welfare (India), Government of India, and established in 1975 at New Delhi as a Society under Delhi Society registration act, to standardizing postgraduate medical education and examination in India.

Initially, under the aegis of the National Academy of Medical Sciences (NAMS), this system offered a parallel path of post-graduate education and qualification. It utilized medical infrastructure and teaching manpower outside the universities, to generate more qualified specialists and help address the growing need for such qualified specialist doctors across the country. The degree offered was the MNAMS (Membership of the National Academy of Medical Sciences). It was a 2 part examination. Part 1 was related to Basic Sciences, and was a theory examination of two papers, to be taken one year after completion of the rotating internship, and related to the specific speciality chosen. On passing this examination, the student was to work for 3 years in a 'recognised' hospital in the speciality, before being eligible to take the Part 2 examination. This consisted of a theory examination of 4 papers. A pass in all 4 papers was need, to be called for the 'Clinicals', a gruelling day long grilling, in a new city, by 4 senior Board appointed examiners (the safety net 'cover' of an internal examiner was never there). Pass rates were dismally low and very disheartening. By the Grace of God, I went through this process, and went to Calcutta (Kolkata) for my clinicals in Oct. 1982, and passed...!!

Thus becoming one of the first MNAMS in General Surgery in Bangalore. I proudly received my degree, signed by Prof Ramamurthy, from the then Chairman of the Planning Commission, Prof MGK Menon, at a colourful Graduation Ceremony at the Rajaji Hall, in Madras (Chennai), in 1984.

EARLY DAYS:

St. John's Medical College was established in Bangalore in 1963. As they did not have a dedicated hospital for clinical teaching, they approached the Sisters of the Good Shepherd, who were running the Mission Hospital, St. Martha's Hospital, in Bangalore, to allow use of this facility for clinical teaching, till their own hospital came into being. The Sisters agreed to this, and with an improvement in infrastructure, St. Martha's Hospital became the 'Teaching Hospital' for the initial batches of medical students of St. John's Medical College. This attachment lasted till 1983, and by this time the medical college had its own hospital, the St. John's Medical College Hospital, ready and working well, and so the connect with St. Martha's Hospital came to a close. The Sisters were left with the need to re-staff their hospital and continue. I was one the surgeons who joined this hospital in July 1982.

Looking at the good infrastructure for teaching and good clinical case load, the senior doctors met and decided to approach the National Board of Examinations for 'recognition' of the hospital for post graduate studies in the clinical subjects of General Medicine

and General Surgery. As I was the only doctor on the Staff with the MNAMS, I was used, to be shown as the 'example' to all. Many letters, telephonic discussions and inspections by the National Board appointed 'Inspectors' followed. The persistence of the seniors like Dr. CM Francis, the Director, Dr. Admiral Kuppuswamy the Head of Medicine, Dr. CK Subbaiah the Head of Surgery, Dr. KT Surendra, the Head of Orthopaedics and Sr. Terasita, the Medical Superintendent, finally bore fruit and due accreditation was achieved. The first resident trainees in Medicine, Surgery and Orthopaedics were admitted to the Hospital in 1984. Hence St. Martha's Hospital became the first accredited hospital in Bangalore to have the course, and all eyes were on us, to see how the arrangement went. This intake of one student per discipline per year lasted 3 years.

In 1985, there was a change in nomenclature of the degree offered from the MNAMS to that of the DNB [Diplomate of the National Board]. This I feel was a set-back. The word 'diplomate' was seen as a 'Diploma', and the university based institutions pounced on this, to discourage their MBBS students from joining the NBE residency programme

Now followed a very trying and frustrating time for the next 3 years. Communications with the Board were only by surface post. Telephone 'trunk calls' were seldom picked up...the fastest communication was with a one line text message sent through Telex...! I must mention the immense patience and documentation of Sr. Terasita, the Medical Superintendent, that made the process flow. However, uncertainty of syllabi, level and depth of knowledge required, and the 'teaching' of just one student, was not conducive to good learning for the resident, and all of them fumbled at the examinations.

In 1987, the intake at St Martha's was increased to 2 residents per year, per discipline, and recognition was offered in Paediatrics, and Obstetrics/Gynaecology too. This to me was the turning point. All other private and mission medical institutions in the city were watching developments at St. Martha's Hospital. The course offered a continuity of care by junior medical staff for 3 years, which was an

added attractive feature. Almost all of them approached us at St Martha's and learnt the ropes of how to achieve Board recognition. As I was the main young gun with the MNAMS, I voiced loud and clear, that this was the only Nationally recognised Post graduate qualification, and encouraged all institutions to use their facilities to have this form of training programme. I was called to meet the leaders at Baptist hospital, CSI hospital, Bangalore hospital, St Philomena's hospital, HAL hospital and the new Manipal Hospital, and offer guidelines on how to proceed with successful applications.

THE 1990s:

The early 1990s saw the withdrawal of the 2 part examination, to a single examination at the end of 3 years, and the introduction of a thesis as a requirement. These changes were done to keep abreast of the Masters programme in the Universities. People's ignorance and the strong opposition by University based programmes kept the DNB system in the shade. But, none the less we continued, and I championed the DNB system in all my talks and teachings.

Also, the 1990s, saw a dramatic increase in the popularity of the DNB system, and more medical institutions of the city, like the Narayana Hrudayalaya, Bhagwan Mahaveer Jain Hospital and Mallige Hospital also took guidance from the St. Martha's Hospital team and got the NBE 'accreditation' to commence DNB residency, in many disciplines. Speciality hospitals, like the Lion's Eye Hospital, the Gunasheela Maternity Hospital and the Nephro-Urology Institute also ventured to enlist with the NBE successfully. At St Martha's too, we got accreditation for a resident in Anaesthesia and for four residents in Family Medicine. With this, St Martha's now had recognition for DNB residency in 7 broad speciality disciplines, and with annual intake of over 20 residents per year, became one of the busiest hubs of DNB activity in the country. Medical institutions in other cities of Karnataka, like Mysore and Hubli, also joined the DNB band wagon. Whenever the Board raised queries, the St Martha's example and experiences was quoted or referred to, and issues were resolved. Thus Bangalore became a city with the largest number of DNB accredited Institutions, and Karnataka State became a lead state in the country. And all this stemmed from the

initial ground work done by St. Martha's Hospital in the 1980s and 1990s.

The late 1990s also saw a dramatic improvement of communications with the NBE, with the advent of the some electronic media. The announcements were complimented by 'information booklets' issued every 6 months to coincide with applications for examinations. Bank based payment and distributions meant going and standing in bank queues, filling Challans thrice and took this time. The 3 yearly inspections by the NBE appointed Inspectors, saw the scramble for paper work and overtime in the office, to ensure compliance. Almost all Institutions called us at St Martha's to clarify doubts and fine tune their papers. Each institution would have its own entrance examination and interview to select its candidates. This was good and it allowed junior house officer cadres to apply, and being known to staff/management, were given the seat. Thus many spent 4 years in an institution and came out as much better and wholesome doctors. Another very interesting fact was the very good competence of the DNB graduates being noticed at their work sites, and that they were being preferred for employment over the Masters graduates of Universities, with the exception of those from the Central Institutes. In fact, advertisements for junior consultants in the Gulf, openly preferred the DNB passed candidates.

But this was still not all a bed of roses. The eternal struggle to afford recognition and employment into teaching medical cadres continued to be a stumbling block. The MCI was very rigid in its stance and DNB graduates had to do 1- 3 years of 'Senior Registrarship' in the Medical College before being eligible for the Teaching post. This battle has been long drawn and one is never clear of the correct interpretation of conditions for employment into the medical colleges.

With the turn of the century came a move by the NBE to have a common entrance examination. Initially accredited institutions were resistant. However, they fell in line and allowed for the selection process to be central instead of with individual institutions. The board also produced educational CDs with theory and practice, and

institutions were tasked with maintaining a uniformity of instruction to residents.

Procedural delays, and the long wait for examination results meant students ended up spending almost four years in the course before gainful employment. The frustrations of the institutions resulted in many heads coming together and forming a single forum to represent all accredited institutions, and so the ANBAI [Association of National Board Accredited Institutions] was formed in 2011. The stellar efforts for the Bangalore Baptist hospital team in this regard must be appreciated. A further streamlining of processes ensued and due recognition of teaching effort and academic abilities has now been regularized.

The sterling work of the DNB residents in all the hospitals across the country, fighting the dreaded COVID pandemic, has been instrumental in reducing morbidity and mortality of the disease. Cooped up in PPEs and working long hours, these residents are overworked and battle scarred. Loss of proper study time and training has affected them a lot, but they have manfully stuck to their tasks. Teaching has moved to online webinars, and examination patterns have been altered to maintain COVID protocols.

The future looks bright and optimistic. The whole DNB institution has grown across many specialties and super specialties and lots more institutions are signing on. The single central office at New Delhi is overloaded and besieged. It is time the board is broken into four or five regional centres, with each centre catering to a select number of states This will ensure that this system of education will continue and be a boon to many medical graduates in the future. The system is free of all forms of capitation fees and expenses of the medical college systems and is far more fair and clean. It is now also up to the government to compensate Institutions with proper allowance and fund the DNB offices properly. The course cannot be made to run by 'accreditation fees' of institutions, which in turn is counter-productive to smaller institutions signing into the DNB system. The teachers in the system must be given some sort of social designation and standing.



Hospitals



GANGA HOSPITAL (COIMBATORE)

DR. RAJASEKARAN

There is always scope for improvement and at both the individual and institution level, in any organisation. ANBAI has allowed us to connect and learn from the sister institutions of the National Board and learn their good practices. ANBAI has also been good for Ganga, as for all other institutions of ANBAI, in making our genuine concerns be represented to the National Board.



BAPTIST HOSPITAL (BANGALORE)

DR. NAVEEN THOMAS (DIRECTOR)

ANBAI was initially birthed in Bangalore Baptist Hospital. When it started off, BBH (Bangalore Baptist Hospital) was used as the venue. Dr. Alex was the director at the time, and we felt there was a need for a forum of National Board Accredited Institutions.

It turned into a forum where we worked together with the NBE, instead of what many assumed would be a confrontational relationship. Today, for instance, Baptist Hospital has 13 National Board accredited subjects and almost 115 students through various post graduate residency courses. They have been with us every step of the way.

ANBAI has progressed as a voice of the institutions, teachers and the students. All three stakeholders are represented at ANBAI. We collaborate and work alongside them.

Looking back, we've had an interesting journey where we built relationships, and encouraged an exchange of ideas. We let people have a voice and it has also become a place where academics are respected and encouraged to say their piece.



SIR GANGA RAM HOSPITAL (DELHI)

DR. ANUPAM SACHDEVA

The Ganga Ram Hospital has been a part of ANBAI right from the start and we are happy and grateful for the association. ANBAI has been a great help for smaller hospitals like ours. It gives a collective voice to the institutions, and over a period of time the organisation has gained respectability and visibility. It's strong working relationship with the National Board has definitely been a boon for us. ANBAI has helped the institutions, and by extension the students. This has been done either directly as well as indirectly by working on their concerns and apprehensions.

Our hospital is one of the oldest institutions to be recognised by the NBE. We started DNB back in 1983-84 and are one of the single largest institution under the National Board. Today we have a large number of seats, 16 in Broad Speciality, 21 in Super Speciality, 7 for the Fellowship Programme and we also have a PhD programme with Indraprastha University.

In the future, we would love to see efforts made towards Uniform Learning Resources and also some incentives for teaching faculties in all the district hospitals across the country.



SAIFEE HOSPITAL (MUMBAI)

DR. IQBAL BAGASRAWALA

ANBAI was concentrated around India's southern region for a while now and they aimed to spread further north.

ANBAI handles a very important role, that of communicating the difficulties of institutions that have NBE or DNB programmes. These issues are communicated to bureaucrats up north, all of whom have different ways of operating. Our job is to try and find common ground with all of them. In the early days, it was an uphill task, but slowly frustration and disappointment has turned into camaraderie and understanding.

In Maharashtra, we have around 65 institutions that are offering NBE courses. The COVID-19 pandemic has brought on financial strain on people and, by relation, the institutions that they visit. As a result, many of our member hospitals are facing financial constraints. In this lean period, we need to forge stronger associations and bonds with our institutions and find ways to understand them better. We need more people to file for designations, as eventually someone will take over my role from me.

We recently had a get-together of all teachers and held an award programme for outstanding teachers. We had 156 teachers from across Maharashtra. The chief guest was a very reputed physician, Dr. Farooque Uladia, who turned out to be the teacher of many of our teachers. As a result, the teachers felt even more honoured to receive the award from him. This was at the state level. Now we have this coffee table book at the national level, with an annual teachers award.

The original Saifee Hospital was a sanitarium and was converted to a hospital in the second world war. Back then, they called it Polish Hospital and had just one wing. It originally had 80 barracks, today we are a 250 bed multi-speciality hospital. I've been associated with the hospital since 1979. We were awarded with the Best Teaching Hospital in the country by ANBAI.

A milestone for the future is getting super speciality PG training at my hospital. The first subject that we could work with is Uro-surgery.



STATE INSTITUTE OF HEALTH & FAMILY WELFARE – GOVERNMENT OF KARNATAKA

DR. PARIMALA S. MAROOR

I am the present additional director in NHM in Government of Karnataka department of health and family welfare. We have been associated with ANBAI for the past six years, even before starting our DNB courses in the government hospitals of Karnataka.

We decided to address the shortage of specialists in the hospitals. ANBAI really helped us out because we had to motivate our district hospitals. They aren't yet completely academically oriented and concentrate more on the academics. So we had to bring all of them together and convince them to apply for accreditation.

In 2016, I was working closely with Dr. Alexander Thomas and Dr. Venkatesh of NU hospital. We actually applied for an assessment and in March 2017, we got accreditation for one of the hospitals. Now, we have 12 district hospitals and one taluka hospital that has accreditation, for beginning DNB courses. We have applied for summer courses in 41 hospitals, starting DNB courses in all of them.

As of now, we have 114 DNB seats and 68 diploma seats approved by NBE. Over 80 percent of our students got through in the DNB theory exam and around 75 percent or more in the DNB practical exams. ANBAI has throughout supported us in mediating between NBE and state.

There are platforms where you can get teachers, and MCI has also approved the signing of teachers from medical colleges. We can also get teachers who can come in and teach students for a few hours, and get an honorarium from us. There is also scope to hire senior consultants, who have probably taught in medical colleges for a few years. I would like ANBAI to create an open platform for hospitals and teachers wherein issues could be addressed and we have a forum to discuss important topics.

STATE CHAIRS





KIMS HOSPITAL (TRIVANDRUM)

DR. SAFFIA

I retired from the medical college and joined KIMS hospital in 2015 and was by extension associated with ANBAI. Ours is a 800 bed hospital and we have 22 speciality students, both broad and basic specialities. In total, we have about 170 students.

Many issues that the hospitals faced, with regard to students, have been solved through ANBAI.

The close relationship with ANBAI and the National Board helps us get many of the issues sorted out. They are also working hard to try and enable medical libraries updated, by sourcing the journals and books.



AMANDEEP HOSPITAL (PUNJAB)

DR. AMANDEEP KAUR

I became a member of ANBAI two years ago, and I then took the role of president North Zone. Before that I was quite the silent member of ANBAI.

ANBAI has been quite active in working with the NBE. Now the hospitals are undergoing inspections, but there have been a few delays due to COVID-19.

Libraries are an integral part of a good hospital, and we have been maintaining libraries at all three hospitals. They need to exist for those who get degrees or diplomas from the National Board. A library for post graduate students is an integral part of all the hospitals who are a part of ANBAI.

ANBAI has been very productive for hospitals who are part of our National Board courses. This is a very useful bridge. Otherwise, access to the National Board was tough for hospitals.

As for our hospitals, I would love to increase the number of courses. We are already working on that, guiding the people in our region and the doctors from Jammu and Kashmir. They have been pretty active with us, despite the difficulty of access in the past.



Teachers



DR. MURALIDHAR KANCHI

TEACHER

I have been a part of ANBAI since its inception and have been very active with all related activities. I have a large interest in the progress of ANBAI, because they represent the National Board institutions in a very effective manner.

ANBAI was formed to safeguard the professional and academic interest of the National Board accredited institutions. Before the association was formed, it was extremely difficult to represent our concerns and problems to the National Board. The communication channels were poor and many calls and e-mails went unanswered. We found it tough to deal with student and institution related issues.

But today it's easier. However, turnaround times depend on the gravity and nature of the complaint. Some complaints are sorted within a day, some take a few weeks. Students are able to voice their concerns at ANBAI meetings, and talk to officials directly. We have also arranged for webinars in basic sciences for the schools.

There is a need to improve on the strategy for National Board examinations institutions. Right now, we have college board examination teachers, but we need to have professors and assistant professors. Since we are contributing to teaching, just like in medical colleges, it's only fair that we also have a National Board professor title.

There is also the matter of asking teachers to only choose one stream to teach. For example, I teach both general and cardiac anaesthesia. But now I have to choose only one. So, many teachers have been imparting knowledge for two-three decades and their talents should be utilised well. I understand that the train of thought involves different faculties for different streams, but concessions should be made. If someone can teach cardiology and interventional cardiology, then it should be so.



SR. LALITHA

TEACHER

I have been a coordinator with St. Theresa Hospital in Hyderabad for almost a decade now and a founder member of ANBAI. I am a general surgeon by profession and I practice in Hyderabad and the Bangalore branch of our hospital.

We also have a state wise ANBAI meeting frequently every month where we have an open forum to raise issues and stage discussions.

Mission hospitals are built to treat the underprivileged and we are thankful for all the help given by ANBAI. The fact that ANBAI also recognises doctors' services and achievements drives us to do better. We also need to work on a system so that smaller hospitals like ours get access to medical journals at affordable rates.

We also have doctors who are professors for over a decade and should be given a chance to become examiners. If they have been teaching for so many years they should automatically qualify.



DNB Student



DR. NAYAN

DNB STUDENT

I have been with ANBAI for three years and I am a DNB student in Urology at NU Hospital in Bangalore. ANBAI provided opportunities to interact with teaching and training personnel, which has been a big help. As students, we often need help with regards to our teaching programmes, or a thesis etc. They help us escalate the issue to the NBE.

The National Board is a huge organisation and there is often a delay in responses to e-mails or calls, perhaps some communication errors between the student and the NBE. ANBAI is very helpful in this regard.

A few things have changed, perhaps improved during the pandemic. Education has gone online, but we do need to be able to access some common library, where students can read articles, journals or attend a webinar. Online education and an online library are two areas that need some intervention.

ANBAI

Over the years



Dr. H. S. CHHABRA
VICE PRESIDENT, ANBAI

The National Board of Examinations (NBE) is an autonomous organisation established to promote and improve post-graduate medical education. NBE conducts the prestigious Diplomate National Board (DNB) and Fellow National Board (FNB) Programmes. The Association for National Board Accredited Institutions (ANBAI) is an apex organisation of leading hospitals and medical institutions in India that are accredited by the National Board of Examinations.

ANBAI was started in Bangalore in 2011 in response to the decision of NBE to take over admissions to medical courses in India. ANBAI was born with the aim of uniting accredited institutions in order to catalyse their energies toward developing better teaching programs, and to present a credible and united front to solve problems faced by the institutions conducting DNB and FNB courses.

The main focus of ANBAI is to improve camaraderie and encourage partnership between its member institutions towards achieving excellence in post graduate medical education. The association also provides a forum for innovative ideas in post-graduate medical teaching and to raise the standards of Indian students to an international level.

NBE and ANBAI have been working closely on issues surrounding medical education in India over the past 10 years. When the Indian Government introduced the National Commission for Human Resources for Health (NCHRH) Bill, both NBE and ANBAI agreed that the bill, as presented, would be detrimental to the health sector, and decided to join forces to prevent it.

Today, ANBAI is a network connecting NBE teaching hospitals in India through 12 regional chapters across the country.

ANBAI has highlighted the crucial role that teachers play in shaping the future of the students, especially in a highly-specialized field such as medicine. A dedicated, trained faculty can certainly contribute to the quality of the students in the healthcare sector, thus improving the delivery and quality of care for all citizens. Unfortunately, there is an acute shortage of high-calibre medical teachers in the country. ANBAI has recommended to the Ministry of Health and Family Welfare that a teachers' accreditation committee be set up for the accreditation of teachers not only from MCI and NBE, but also those in the private sector. This will contribute to an increase in the number of teachers while maintaining their quality standards.

In the past, NBE has instituted national awards to honour the contributions made by eminent medical teachers/professionals and institutions/hospitals to further the cause of medical education quality and excellence in the country. This tradition is being continued by ANBAI with active involvement of National Board.

ANBAI and NBE have worked together on several projects successfully: increasing the number of examiners and inspectors from NBE hospitals; increasing accreditation validity from three to five years; and resolving problems between institutions and students through ANBAI. Exam result rates have improved without any compromise on quality. ANBAI and NBE made a strong and successful case for equivalence between the Post Graduate medical degrees provided by MCI-recognized institutions, and the Diplomate of National Board (DNB) by NBE. The Medical Council of India granted equivalence in 2012, subject to certain criteria.

NBE and ANBAI have initiated many projects for the betterment of DNB faculty and students. The NBE faculty have been trained in healthcare communication and quality in health, two crucial areas which do not have a place in the present medical curriculum. ANBAI is on the NBE-UNESCO Steering Committee on Teaching of Bioethics in PG Medical Education and on the Uniform Learning Resources Committee of the NBE. ANBAI has contributed to the effort to introduce NBE post-graduate programs into district hospitals and training the clinicians in Karnataka, West Bengal, Tamil Nadu and other states and hand-held the faculty in training their Post Graduates into delivering the curriculum as well.

The ANBAI annual conferences provide opportunities for ANBAI members to interact with NBE officials and deepen their connections, sort out long outstanding issues etc. The partnership between NBE and ANBAI today is characterized by collaboration and strength in teamwork for the benefit of the health sector in our country.

ANBAI has been conducting online training programs and webinars for DNB/FNB students. With the COVID pandemic raging through the country and contact teaching not possible, ANBAI has increased the frequency of these webinars.

ANBAI started the project of Uniform Learning Resource (ULR) project to make available the medical journals at a fraction of the

cost through combined negotiation of all ANBAI institutions with the leading publishers. This project is now being taken forward by NBE with help from ANBAI to ensure that as a start NBE post graduates are benefitted. ANBAI is following up with NITI AAYOG to ensure that the entire medical faculty in the country will also benefit from a similar project on a larger scale.

In order to help various medical students, who pursue their MBBS abroad, but are unable to clear the MCI screening exam, that is Foreign Medical Graduates Examination (FMGE), ANBAI, AHPI have now launched a 6-month clinical apprenticeship program in association with M. S. Ramaiah Institutions.

The ANBAI Governing Council decided on the formation of a DNB Alumni Advisory Committee, which represents the NBE qualified specialists all over India. It is important for us to harness such resources of talent as this will further our aim of strengthening the health sector education in our country. ANBAI DNB alumni wing works for the betterment of these alumni, sorting out their problems with NBE or their parent institution with regard to proper faculty position or title. ANBAI also give them a platform to be recognized all over India by giving opportunity to conduct webinars and also attend the ANBAI annual conferences for networking and interact with higher management of leading medical institutions of the country conveniently at one place.

Other areas where ANBAI and NBE have jointly made things easier for the students and NBE institutions:

Hospitals had been requesting for an increase in DNB tuition fees. With the active intervention of ANBAI, these have been increased from Rs. 50,000/- per year earlier to the present Rs. 1,00,000/- per year. ANBAI was able to achieve this, while still keeping the DNB postgraduate courses the cheapest in the country.

With constant feedback about poor examination results, ANBAI through discussions with NBE have been able to improve the exam result rates, by improving with standardized and objective assessments, without compromising the quality of the evaluation.

ANBAI engaging with MOHFW, NITI AAYOG and PMO has enabled increase in the number of DNB seats, both for postgraduate medical education, as well as, the MBBS seats in the country, which is a boon

for most of the private teaching Institutions. It is also significant to note that NBE is starting diploma programs in smaller hospitals. This will go a long way to help fill up the vacancies of the tier 2 & 3 cities and rural areas.

Based on the feedback back received from Institutions, the PG thesis topic and research format approval can now be done by the individual hospital Ethics Committee itself. These institutions no longer have to wait for third party approval.

Most of the exam centres invariably were at Medical colleges. ANBAI's repeated pleas with the NBE and member hospitals, has resulted in acceptance of NBE accredited Institutes to be considered as examination centres. Teaching faculty from these Institutes are also now actively considered to be examiners.

ANBAI has been at the forefront of a game changing exercise – the abolishment of several exams for students to pursue their postgraduate career. Part of the efforts of the ANBAI has paid off in NMC announcing just one single exit exam to facilitate easier entry into postgraduate courses.

Basic Sciences teaching was earlier mandated to be done by faculty from medical colleges. ANBAI has again helped change this impractical rule. Basic Sciences teaching can be now done by the Physicians and Surgeons in the same teaching Institute itself. This is a paradigm shift in the way Basic Sciences teaching can be done.

Hence, if we trace the journey of ANBAI it is apparent that the organisation has been able to deliver with regard to the objectives with which it was framed. Of course, there is always a potential to achieve more. As the organisation has continuously evolved and matured, it should be able to live up to the expectations of its constituency.

Though a lot has been done, a lot more has to be done.

T I M E L I

- >> Formally registered at the Registrar of Societies in January 2011
- >> Took the NBE to court over their attempt to take control of admissions to medical courses in India. ANBAI lost the case and were ordered by the court to pay a fine.
- >> The Annual conclave was held at Ganga Hospital, Coimbatore on 27th Aug. 2011.

2011

2013

- >> NBE invited ANBAI members to be part of committee on knowledge sharing initiatives.
- >> The Annual conclave was held at Bangalore Baptist Hospital, Bangalore on 3rd Aug. 2013

2015

- >> Data Mining - This initiative was undertaken to get its members to network together & to have the database of its members.
- >> The Annual conclave was held at Hotel Marigold, Hyderabad on 8th Aug. 2015

2010

- >> NBE took over admissions to medical courses in India
- >> Formation of ANBAI with the aim of uniting accredited institutions
- >> First Governing Council Meeting was held on 16th Dec. 2010 at Bangalore Baptist Hospital, Bangalore

2012

- >> Getting equivalence between the Post Graduate medical degrees provided by MCI-recognized institutions, and the Diplomate of National Board (DNB) by NBE.
- >> Introduced NBE post-graduate programs into district hospitals of West Bengal.
- >> The Annual conclave was held at Amrita Institute of Medical Sciences, Cochin on 22nd Sept. 2012

2014

- >> Comments and suggestions were provided on the Clinical Establishment Act and the standards.
- >> The Annual conclave was held at Ganga Hospital, Coimbatore on 27th Sept. 2014.

N E M A P

2017

- >> DNB Alumni and Teachers committee was formed under the aegis of ANBAI to provide a unified voice of DNB graduates across the nation.
- >> Recommendations made for Medical Education Policy of Dr. K Kasturirangan committee for the National Education Policy.
- >> Instituted the national awards to honour the contributions made by eminent medical teachers/professionals and institutions / hospitals to further the cause of medical education quality and excellence in the country.
- >> The 1st National Teachers Award in Teaching and Clinical excellence organised by ANBAI was held at, National Board of Examination, New Delhi on 5th Sept. 2017
- >> Hand holding of the district hospitals of Govt. of Karnataka and Tamil Nadu in their accreditation process with NBE.
- >> The Annual conclave was held at Ganga Hospital, Coimbatore on 11th Nov. 2017.
- >> The Andhra Pradesh & Telangana Chapter conducted the Regional Teachers Award Function at Hotel Katriya, Hyderabad on 16th Dec. 2017

2019

- >> With the active intervention of ANBAI, DNB Tuition fees were increased.
- >> Played a major role in the incorporation of communication in the Undergraduate MBBS curriculum
- >> The ANBAI Secretariat was shifted from Bangalore Baptist Hospital to NU Hospital Bangalore.
- >> The ANBAI Karnataka Regional Teachers Award Function was held at Bhagwan Mahaveer Jain Hospital, Bangalore on 20th April 2019
- >> The Maharashtra Chapter conducted the regional Teacher's Recognition Ceremony on 13th July 2019 organized at Saifee Hospital.
- >> The North Zone Annual Awards was held at New Delhi on 22nd Aug. 2019.
- >> The 3rd Teachers Day Award function and the Annual conclave was held at India Habitat Centre, New Delhi on 5th Sept. 2019.
- >> The Andhra Pradesh & Telangana Chapter conducted the Regional Teachers Award Function at Hotel Katriya, Hyderabad on 23rd Feb. 2019

2016

- >> ANBAI and NBE joined forces to prevent the National Commission for Human Resources for Health (NCHRH) Bill as presented. ANBAI Lobbied with Authorities and were instrumental in getting the Bill modified.
- >> NBE had a long period without a Governing Board to conduct its activities. ANBAI had written to the Government of India, and NITI AAYOG drawing attention and resolving this issue.
- >> State Chapters were formed across the country
- >> The Annual conclave was held at the National Board of Examination, New Delhi on 6th Aug. 2016.

2018

- >> Uniform Learning Resource (ULR) – Attempt made to make available the medical journals at a fraction of the cost through combined negotiation of all ANBAI institutions with the leading publishers and the concept of National Medical Library was mooted.
- >> For teaching purposes, NBE qualifications from hospitals with more than 500 beds will be equal to corresponding degrees under the Act. In all other cases an additional year of senior residency in a medical college is required
- >> Recommendation to Parliamentary Standing committee on National Medical Commission
- >> Introduced NBE post-graduate programs into district hospitals in Karnataka and Tamil Nadu
- >> The 2nd Teachers Day Award function and the Annual conclave was held at Indian Institute of Science, Bangalore on 22nd Sept. 2018.

2020

- >> Teleconsultation services are offered to in NBE accredited Institutions
- >> Introducing NBE Diploma Courses in eight subjects ensuring availability of specialists countrywide.
- >> The Annual conclave was held virtually on 31st Oct. 2020.
- >> The 4th Teachers Day Award Celebrations of ANBAI was held virtually on 29th Dec 2020.

2021

- >> Promoting setting up of Teachers Training and Accreditation cell at National Medical Commission
- >> Efforts for the National Medical Library continues
- >> The North East chapter of ANBAI is formed and is being registered at Guwahati, Assam, for the smooth functioning of ANBAI to address the problems faced by teaching hospitals and students undergoing PG training in the North East Region.

**OFFICIALS
OF
ANBAI**

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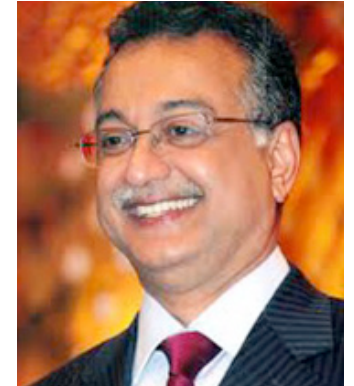
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DR. SUDARSHAN BALLAL



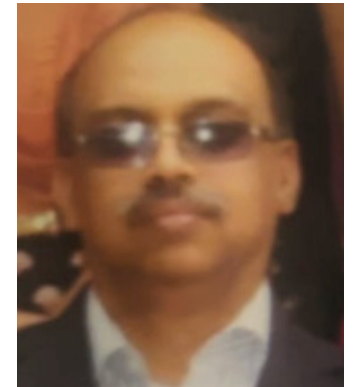
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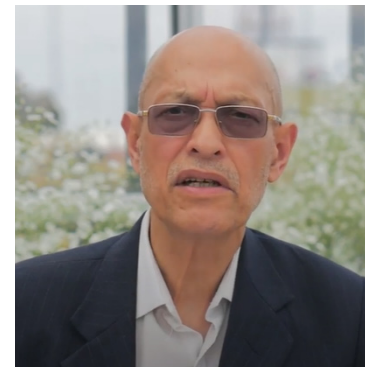
Vice President



DR. SHABINA KHAN

Secretary

NORTHEAST CHAPTER



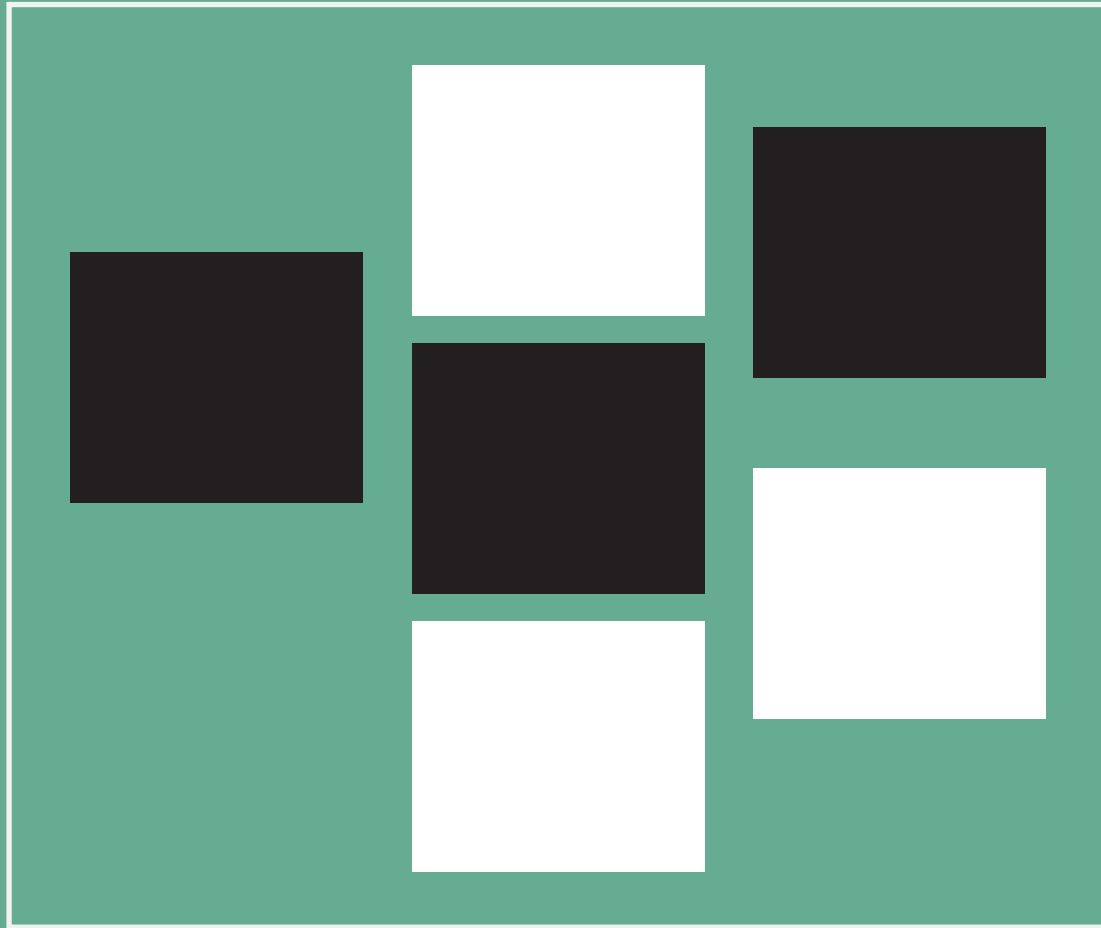
DR. GORDON RANGAD

Vice President, ANBAI Northeast



DR. SEDEVI ANGAMI

Secretary



GALLERY

GOVERNING BODY MEETINGS



1st Governing Council meet held at Bangalore

2010



Annual General Body Meeting,
Ganga Hospital Coimbatore.

2011



General Body meeting held at AIMS, Kochi



Governing Council meeting held at Bangalore Baptist Hospital



2012



ANBAI Governing Council Meeting held at Bangalore Baptist Hospital, Bangalore

2013

2015



GB & GC meeting held at Hyderabad.





Governing Council meeting held at NBE Auditorium, New Delhi

2016



Annual General Body Meeting held at Ganga Hospital

2017

2018



ANBAI Governing Council meeting held at IISc Auditorium, Bangalore

2019



2020



Annual General Body meeting 2020, virtual

STATE CHAPTER MEETINGS



AP & TS

DELHI



GUJARAT



KARNATAKA



KERALA

MAHARASHTRA





TAMIL NADU

WEST BENGAL





NHC 2019

Climate Change and Health

A White Paper based on National Health Conclave 2019



NATIONAL HEALTH **CONCLAVE 2021**

"Mental Health - From Distress to Wellness"

**White Paper
March 2021**





National Health Conclave

CHRONIC CARE – INNOVATIONS,
OPPORTUNITIES & CHALLENGES

White Paper–Post National Health Protection Scheme Announcement



Association of National Board Accredited Institutions
Committed to Excellence in Medical Education

A White Paper on

Enhancing the Availability of Competent Specialists through the Reformation of Higher Medical Education

COVID-19 INVOLVEMENT

COVID - 2019



AHPI & ANBAI DOCUMENT FOR VERIFYING AUTHENTICITY OF PPE CERTIFICATES



AHPI & ANBAI - Document for verifying Authenticity of PPE certificates - www.ahpi.in



COVID - 2019

AHPI & ANBAI - ADVISORY ON FOR GENERAL PUBLIC

AHPI & ANBAI - Advisory on for General Public - www.ahpi.in



COVID - 2019

AHPI & ANBAI - FAQ'S FOR PROFESSIONALS

AHPI & ANBAI - FAQ's for Professionals - www.ahpi.in



COVID - 2019

HOSPITAL VISITOR PROTOCOL

AHPI & ANBAI on Hospital Visitor Protocol - www.ahpi.in



COVID - 2019

AHPI & ANBAI - MYTHS DEBUNKED FOR PROFESSIONALS

AHPI & ANBAI Myths Debunked for Professionals - www.ahpi.in



POSITION STATEMENT ON RETURN TO PRACTICE FOR OTOLARYNGOLOGISTS

INDIAN ACADEMY OF OTORHINOLARYNGOLOGY
HEAD AND NECK SURGERY (IAOHNA)

APPENDIX - 3

AUTHENTICITY OF THE PPE CERTIFICATE - AHPI & ANBAI



COVID - 2019



AHPI and ANBAI - Advisory for General Public



Hands Protection

- Wash hands frequently with soap and water
- Apply hand sanitizer between washes



Nose/ Mouth Protection

#Mask to be worn - if you cough/sneeze or care for some with cough/sneeze

- Cover mouth and nose without gap between mask and face
- Change mask when damp, remove mask holding ear loops



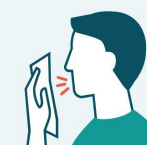
Travel related Protection

- Restrict travel unless necessary
- Avoid places of mass gathering



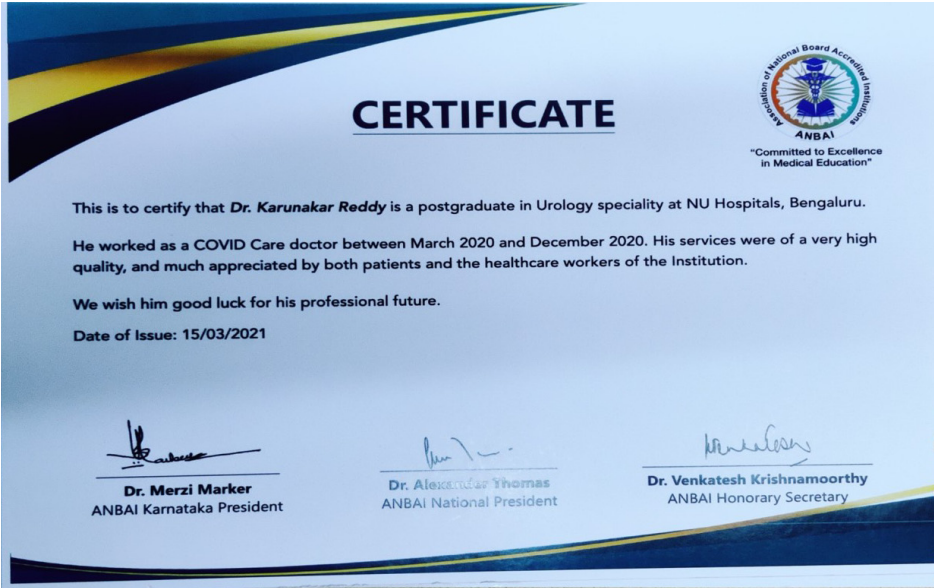
Public Protection

- Use elbow or tissue/hanky while coughing
- Visit doctor - if you have fever, cough & breathing difficulty



AHPI GLOBAL CONCLAVE-2021 • 47

CERTIFICATE DISTRIBUTION



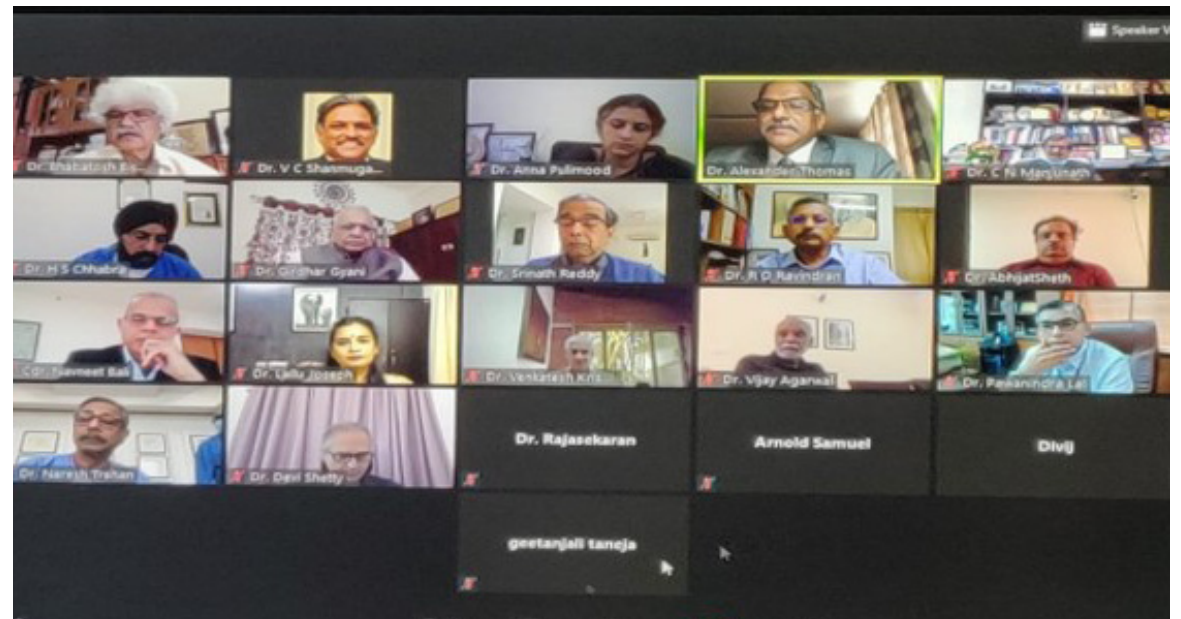
NATIONAL ACTIVITIES



ANBAI Meeting with publishers for uniform learning resource in Delhi.



ANBAI State Chapter Office Bearers and Governing Council members with Prof. Pawanindra Lal, Executive Director, NBE.



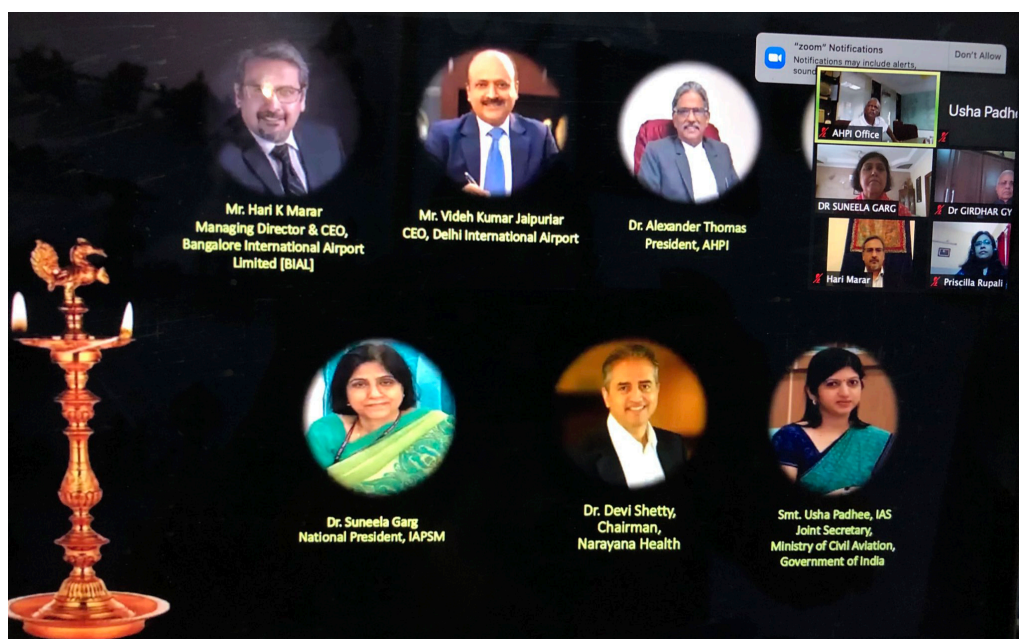
Press Conference organized by ANBAI to thank Honourable Prime Minister, GOI and NBE for approval of medical postgraduate diploma courses through NBE



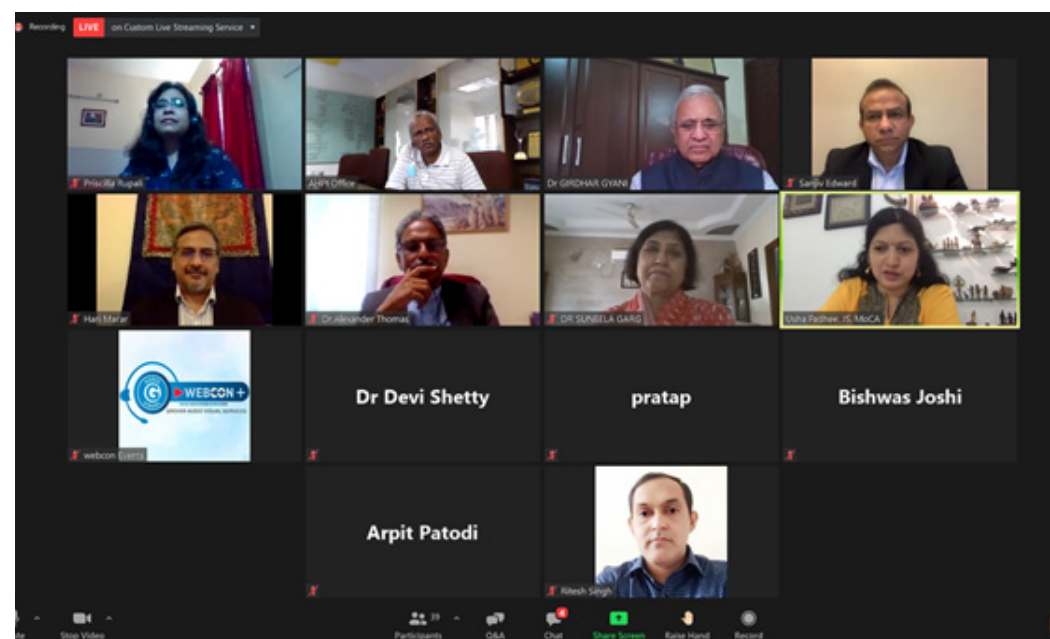
AP & TS Chapter members meeting with Vice President of India Shri. Venkaiah Naidu to invite him as a Chief Guest of ANBAI National Conclave at Hyderabad



Handing over of the Joint Advisory by Association of Private Airport Operators [APAO] & AHPI to to Shri. Pradeep Singh Kharola, Secretary, Ministry of Civil Aviation



Release of the Joint Advisory on Resuming Safe Air Travel by Smt. Usha Padhee I.A.S, Joint Secretary, Ministry of Civil Aviation, GOI.





ANBAI & NBE meeting with Dr. Vinod Paul,
Member Health, NITI Aayog



ANBAI & NBE President meeting with Shri J P Nadda,
Hon'ble Health Minister regarding DNB equivalence



ANBAI & NBE President meeting with Shri J P Nadda,
Hon'ble Health Minister regarding DNB equivalence



ANBAI at Consultative meeting on enhancing private sector
participation for training of specialist under the Chairmanship
of Dr. Vinod K Paul, Member Health, NITI AAYOG.



ANBAI at the Extraordinary meeting organised by Tamil Nadu Private Hospitals



ANBAI at the first, Sustainable Development Goal-3 meeting in Karnataka



ANBAI at the Health Quality Upgradation Enabled through Space Technology at ISRO.



ANBAI at the Health Quality Upgradation Enabled through Space Technology at ISRO.



ANBAI at the IAF Paramedical Seminar held at the Airforce Command Hospital.



ANBAI at the meeting on Ayushman Bharat National Health Protection Mission held at NITI AAYOG



ANBAI at the National Education Policy Consultation meeting



ANBAI at the Press meet on Karnataka Private Medical Establishment (KPME) Act



ANBAI at the round table meet on Development of Medical Tourism and Networks in India at National Institute of Science, Technology and Development Studies (NISTADS)



ANBAI in regard to the NBE courses in Karnataka, Government District Hospitals
- With Health Secretary and Executive Director of NBE.



ANBAI involvement in creating Healthcare Courses for Engineers



ANBAI meets National Board regarding the Teacher's Day Awards programme 2018



ANBAI meeting to discuss regarding Uniform Knowledge Resources across all NBE accredited institutes at an affordable cost



ANBAI meeting with Smt. (Ms.) Preeti Sudan IAS, Secretary, Dept .of Health & Family Welfare regarding equivalence of DNB



ANBAI meeting with the CM of Karnataka regarding the Karnataka Private Medical Establishment (KPME) Act



ANBAI with Dr. D K Sharma, Vice President, NBE, met Shri. J P Nadda, Hon'ble Union Minister of Health and Family Welfare regarding issues relating to DNB



ANBAI met with Dr. B N Gangadhar, Member Oversight Committee of MCI, in Bangalore regarding equivalence



ANBAI with NLSIU at the Round table meet on costing of procedures at Meenakshi Mission Hospital



ANBAI at the International Conference on Best Practices in Healthcare Management held at XIME, Bangalore



Jury Meeting - ANBAI National Teachers Award 2018



Launch of ANBAI DNB Alumni at Ganga Hospital



Meeting with Shri. Shivanand S Patil, Hon'ble Health Minister, GoK regarding DNB courses in Karnataka



NBE official visit to Karnataka



NBE-ANBAI with Shri. C. K.Mishra IAS, MOHFW regarding the DNB Equivalence



Aviation & Healthcare sector join hands on enabling resumption of safe air travel. Handing over of white paper to Ministry of Civil Aviation, NITI AAYOG & MOHFW.

TRAINING PROGRAMS



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ABOUT THE TRAINING PROGRAM

Background to why we are doing this
program..

Joining hands with NBE in our
commitment to Postgraduate Medical
Education



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PROGRAM TRAINERS & TOPICS



DR. SRINATH KUMAR
Orientation
Application process
Inspection Protocols



DR. ALKA GANESH
Formal teaching
Assessment techniques
Skills transfer



DR. C.S. RAJAN
Transfer of Knowledge
Communication Skills



DR. DILIP MATHAI
To build Academics for Non-Teaching Hospital
Harmonize and enhance clinical competence
Hand holding



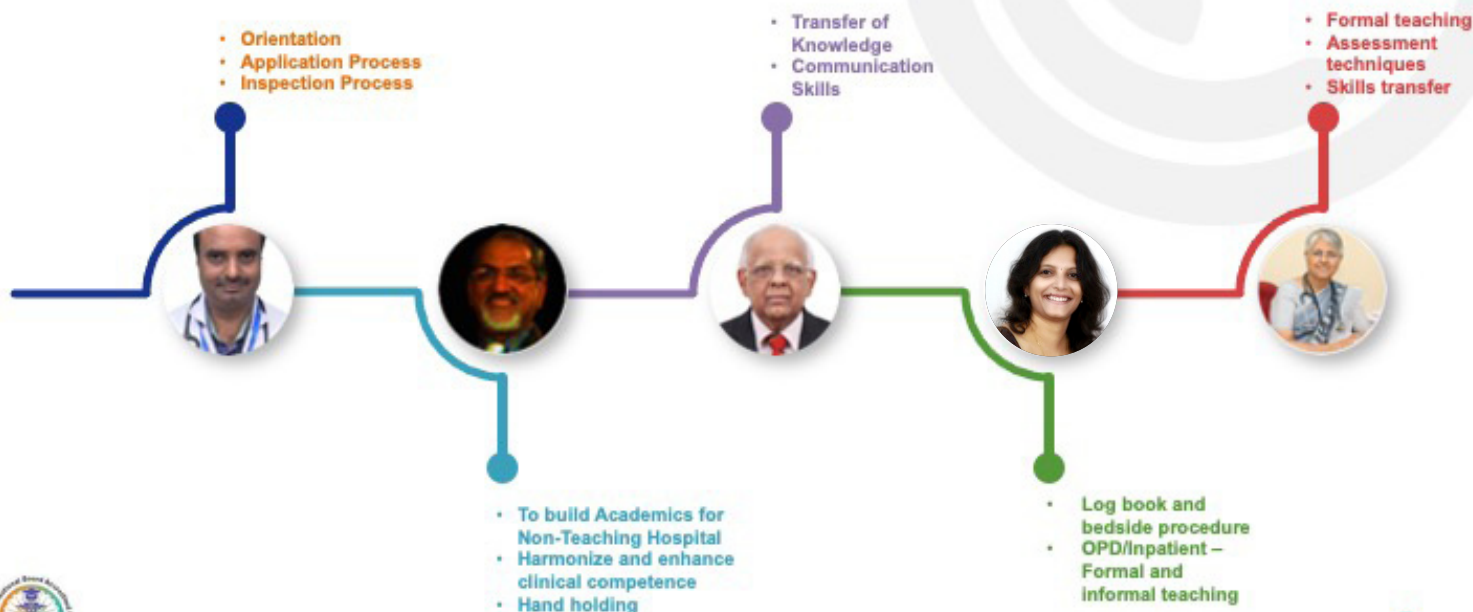
DR. VIDYA
Log book and bedside procedure
OPD/Inpatient – Formal and informal teaching



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3

SCHEDULE { 13 sessions, 60 minutes each with 20 minutes interactive session. }



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PARTNERING CONCLAVES



ANBAI partnered at the National Health Conclave 2017 on Chronic Care - Innovations Opportunities and Challenges

PARTNERING CONCLAVES



ANBAI partnered at the National Health Conclave 2019 on Climate Change and Health – Role of the Health Sector

WEEKLY WEBINARS



Committed to Excellence in Medical Education

ANBAI - LIVE WEBINAR

Immune Responses

Speaker



Dr. Madhavi K.V.
Consultant Internal Medicine and Allergy,
Mazumdar Shaw Medical Center, Bommasandra.

Moderator



Dr. Kingsly Robert Gnanadural,
Dy. Chief of Medical Services and
Head of Emergency Medicine Dept., Bangalore Baptist Hospital.

Date: 3rd November, 2020 | Time: 3.30 PM to 4.30 PM

Click the below Link to join the Zoom Meeting:
<https://us02web.zoom.us/j/88204243521?pwd=NXF1Q3dhcFpIT25neWUwcmRkaWwRsdz09>
 Meeting ID: 882 0424 3521 | Passcode: 057072



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ANBAI - LIVE WEBINAR

Conservative Management of Fibroids

Speaker



Dr. K. Sujatha,
MD (OBG), Ex. Prof. of OBG
K.R.C. Manipal & NRI Hospital Chinakalari
Specialist in Infertility & Laparoscopy
Yashoda Hospitals, Hyderabad.

Moderator



Dr. B. Balaraju,
President, ANBAI - AP & Telangana
Senior Physician & I/P, Medical Services,
Yashoda Hospitals, Hyderabad.
Former Prof. & HOD - Superintendent,
Gandhi Hospital & Medical College, Secunderabad.

Date: 9th February, 2021 | Time: 3.30 PM to 4.30 PM

Click the below Link to join the Zoom Meeting:
<https://us02web.zoom.us/j/88475859627?pwd=OHk3b0RlcUtrvjlwHfZkRlfeBmT3dz09>
 Meeting ID: 884 7585 9627 | Passcode: 621075



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ANBAI - LIVE WEBINAR


Pathophysiology of Diabetes

Speaker



Dr. Muralidhar Kanchi,
Director - Academics,
Narayana Health.

Moderator



Dr. T.S.Srinath Kumar,
Sr. Consultant, Head & Group Coordinator,
Department of Emergency Medicine, Narayana Hrudayalaya Ltd.

Date: 17th November, 2020 | Time: 3.30 PM to 4.30 PM

Click the below Link to join the Zoom Meeting:
<https://us02web.zoom.us/j/88134580929?pwd=YmRlMmRlN2EwNDRlbnMmVjVHkwbm1SU09>
 Meeting ID: 881 3458 0929 | Passcode: 844268



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ANBAI - LIVE WEBINAR

Hormonal Changes in Pregnancy

Speaker



Dr. Vinita Gupta
Associate Professor
BSA Hospital & Medical College
Delhi.

Moderator



Dr. Richa Chaudhary
Associate Consultant, Dept of OBG & Gynae,
Aakash Healthcare,
Dwarka, New Delhi.

Date: 27th July, 2021 | Time: 3.30 PM to 4.30 PM

Click the below Link to join the Zoom Meeting:
<https://us02web.zoom.us/j/87336521813?pwd=T29Ra21dLdEkwZ1dqMzYyVSsvVFYQT09>
 Meeting ID: 873 3652 1813 | Passcode: 528397

LIVE WEBINAR ON

CONSENT & FORMS IN THE CONTEXT OF RECENT NCDRC VERDICT *

ON AUGUST 14, 2020 FROM 3:00 PM TO 5:30 PM (IST)

IN ASSOCIATION WITH :
ASSOCIATION OF HEALTHCARE PROVIDERS, INDIA
NATIONAL INSTITUTE OF MENTAL HEALTH & NEURO SCIENCES
THINK TANK ON HEALTH, NATIONAL LAW SCHOOL OF INDIA UNIVERSITY
ASSOCIATION OF NATIONAL BOARD ACCREDITED INSTITUTIONS

SPEAKERS



Dr. B. N. GANGADHAR
Director, National Institute of
Mental Health & Neuro Sciences



Dr. HEMA DIVAKAR
Gynaecologist & Obstetrician
Former President, FOGSI



Dr. H. S. CHHABRA
Vice President, ANBAI



Dr. SURESH BADA MATH
Professor of Psychiatry & Head of Telemedicine Centre
National Institute of Mental Health & Neuro Sciences



PROF. (Dr.) O. V. NANDIMATH
Professor of Law & Executive Chair Professor
Think Tank on Health,
National Law School of India University



Dr. PAWAN KAPOOR
Vice Chancellor
Vice Chancellor - Lincoln University



Dr. ALEX THOMAS
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* Please follow the link for details of the NCDRC verdict and Webinar Agenda : https://ahpi.in/webinar_14.08.php



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SPEAKERS



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HEAD,
BSE INVESTORS PROTECTION FUND



DR. GIRDHAR GYANI
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DR. ALEXANDER THOMAS
PRESIDENT - AHPI & ANBAI



MR. BHARAT DAVE
SENIOR MANAGER,
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DR. ASHWINI JOGADE
MS - NANAVATI SUPER SPECIALITY
HOSPITAL, SEC AHPI & VP ANBAI
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