

Volume 01 | Issue 04 | July 2024

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HEALTH SHOTS

Unlock Your Wellness Potential!

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Power of Touch

We look into the full range of benefits that babies gain from regular massages.

6 How to Manage Stress During IVF

Some helpful pointers to make sure the pressure of fertility treatment doesn't fracture a couple's relationship.





FREE Workshop

For Couples Seeking Fertility Treatment

Deeper Insights into Fertility Treatments (Do's & Don'ts)

An Intimate Conversation with Fertility Experts

Speaker:

Dr. Kavitha Gautham

Managing Director of BloomLife Hospital and
Senior Consultant – Reproductive Medicine & High-Risk Obstetrics

LIMITED SEATS ONLY – REGISTER NOW!

Call +91-72999 11102

Date: 27 July 2024 (Saturday)

Time: 4.00 to 5.00 p.m.

Venue:

**Conference Room, Main Building,
BloomLife Hospital, 32, Taramani Link Road, Velachery**

Editor's Note



Dear Readers,

Does the name 'Louise Brown' ring a bell?

She is an important person in the field of reproductive medicine and fertility. You see, her birthday is celebrated as 'World IVF Day'.

On July 25, 1978, the first 'test-tube' baby was born. She was named Louise Brown, and the day of her birth was marked as World IVF Day. It was a day when the world witnessed a massive breakthrough in medical science, opening up hope and possibilities for couples who had hitherto been childless due to issues with fertility. Credit should be given to Dr. Robert Edwards, the British physiologist, and Dr. Patrick Steptoe, the gynaecologist, who were the minds behind the groundbreaking achievement.

Today, we have come a very long way in the field of assisted reproductive techniques. Yet, as I mentioned in my previous editorial, the decision to undertake IVF is one that brings anxiety and fear to many couples. On the one hand, they fear societal stigma (which we addressed in an article in the last issue). On the other hand, the desire to have a baby is so strong, it sometimes becomes a crushing burden that strains the relationship between both partners. In this issue, we look into how couples can handle the pressure without letting it affect their relationship.

World IVF Day is not just about the medical advancements that enable people with fertility issues to get pregnant - it is about the spirit of perseverance and dedicated effort that can, literally, change our world for the better. For our part, we will do all we can from a medical standpoint. For your part, bring in the most positive vibes, courage and determination. This is the best combination one could ask for! ♦

Dr. Kavitha Gautham

Managing Director, BloomLife Hospital Pvt. Ltd.

P.S.: We want to hear from you! Please keep sending your feedback, suggestions and questions to info@bloomhealthcare.in.

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To the finish line!



Dr. Aiswarya Nair
Consultant - General Medicine
BloomLife Hospital Pvt. Ltd.

When it comes to antibiotics, patients often ask us why they are given a 'full course' of the medicine, and why they should continue it even after they start to feel better. The answer lies in the important distinction between 'feeling' and actually 'getting' better.

"Why should I complete the antibiotic course? I am feeling much better now!"

This is a statement that I have come across many times during my career. Most people assume that the doctor prescribes a long course of antibiotics out of mere caution, but this is not entirely true.

Antibiotics are a type of oral medicine that patients are given to fight bacterial infections. The specific medication and the length of time they are prescribed for, are based on the type and severity of the condition - and this is decided by the treating doctor based on the patient's clinical presentation and blood reports.

Typically, a person may start to feel better after a couple of days of taking the antibiotics. This is because the majority of the bacteria that caused the infection in the first place is 'antibiotic sensitive'. In other words, the antibiotic causes a rapid reduction in the number of bacteria, thereby reducing the infection and associated symptoms.

However, this does not mean that you are completely cured.

This is because there is still a small section of the bacteria in your system that is not yet eliminated by the antibiotics, and is capable of becoming 'antibiotic resistant' if left unchecked. So, if you were to stop your antibiotic course before it is completed, these bacteria could become immune to the medicine, and it would become extremely difficult to treat or stop their growth into larger numbers. Such resistant strains of bacteria could cause a recurrence of the infection in a worse form, which would require even stronger antibiotics to overcome them. To stop this cycle from happening, you have to complete your course of antibiotics, as the medicine helps to prevent these bacteria from persisting and growing.

If you are finding it difficult to continue your antibiotics due to associated side-effects, please consult your doctor and explain your difficulties to them. They will be able to assess and advise on the best course of action. Furthermore, the doctor may prescribe some vitamin supplements that need to be taken along the length of, and in continuation after the course of antibiotics - this is essential and should not be skipped. ♦



How to **MANAGE** **STRESS** During IVF



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Dr. Aravind Ravichandran

Consultant - Reproductive Medicine & Fertility
BloomLife Hospital

In the last issue, we touched on why many couples hesitate to share with their family and friends about their decision to undertake IVF, and their experience thereafter. There is an even deeper issue to look at – namely, the physical and emotional stress associated with fertility treatments. In this article, we look at how couples can handle these pressures, such that it does not affect their bond with each other.



Infertility can often incite stress and anxiety in men and women alike. Although stress might not directly impact one's fertility, it does add a negative shade to the journey to parenthood.

During fertility treatments, anxiety and stress are often triggered by the cause of infertility and its intensity, societal expectations, partner's reluctance, fear of advancing age, financial constraints and career disruptions.

RESPONSE TO STRESS

In many couples, response to stress is often witnessed as continuous and aggressive pursuit of treatment to achieve a pregnancy at the earliest. Some others tend to completely discontinue the treatment and prefer to isolate themselves from family and friends.

Please understand that while both scenarios are often natural responses, they are not a positive sign, and the couple would need immediate attention to ensure their mental well-being.

HOW STRESS IMPACTS DECISION-MAKING

Decision-making in infertility is complicated. Each clinical option provided by the specialist has its own pros and cons. Even though the specialist guides the couples on these intricacies, the couple has the final say in which treatment plan to follow and how it is to be executed. Stress can make this critical step grueling and complicated. Worrying at every step leads only to confusion and uncertainty thereby endlessly fueling the stress cycle.

Being alert and stress-free, on the one hand, gives clarity of thought, helps in decision-making, makes one feel in control and improves his / her resolve to face the challenges with confidence. The pros and cons can be more effectively weighed and the right option considered.

MANAGING STRESS

Stress can never be eliminated but it can be managed, and even used to our advantage. Couples should actively seek and engage in ways to manage stress and anxiety during treatment. Some effective strategies include:

- Attending counselling sessions as a couple to support each other in understanding the challenges, and facilitating a collective decision.
- Engaging in regular physical activity, especially brisk walks and aerobic exercises.

- Following breathing exercises, yoga and meditation on a consistent basis.
- Incorporating a balanced and timely diet into one's routine.
- Getting enough sleep (7 to 8 hours every night).
- Developing a hobby to gain positive distraction.
- Reading books and / or listening to music.
- Meeting with a psychologist to share one's distress and seek help, especially when it starts to strain inter-personal relationships.

HANDLING OPINIONS WITH OBJECTIVITY

Friends and loved ones are often a great source of strength for those planning fertility treatments - just a 'listening ear' can make a huge difference to couples facing a burn-out. However, social stigma, too much interference, and unsolicited advice are some reasons why this option is met with reluctance. Also, constantly telling the couple, "Don't be stressed!" can often lead to greater stress.

If a couple is facing opinions that seem negative or discouraging, the best way to handle them is to take time and distance away from the source, and remind themselves objectively about the purpose of the treatment and the measures taken to make it a success. When the 'chatter' becomes too 'loud', medical professionals can help provide greater clarity.

TAKING HELP FROM MEDICAL PROFESSIONALS

Doctors, nurses and IVF counsellors are often like an extended family to the patients, as they navigate a very uncertain phase of the fertility pursuit, alongside the couple. Given their deep awareness of the different aspects that go into fertility treatments, they do not hold judgment in any situations. Having an open conversation with them can help to alleviate mental stress, infuse positivity, and provide motivation to stay on the course.

A note of caution: Couples should not wait to speak to their physician about support until they are completely overwhelmed. They should seek help as soon as they feel the first signs of stress - so that the doctor / medical professional can address the issue and help the couple feel better at the earliest.

Last, but in no measure the least, dwelling on the past only leads to disappointment. Speculating about the future is equally cruel as one has, essentially, no control. Staying in the present gives a frame of mind that can assess and cope in ways that suits one best. So, to all couples undergoing fertility treatments: Stay in the present, stay grounded and look to each new day as a blessing in its own right. ♦



Check It!

Dr. Rija Prathab
Manager – Billing & Insurance,
BloomLife Hospital Pvt. Ltd.

Choosing a health insurance provider is a critical decision – but how does one go about making it? We share a handy checklist of some important factors you should look at before signing on the dotted line.

Help, provided when you need it – that is the premises on which healthcare institutions operate. However, the expenses associated with the treatment and services can be high, and land upon a person at the least expected moment. With the right health insurance provider, you will receive assistance in minimising the financial burdens associated with medical emergencies and treatments.

However, selecting the right health insurance provider is a critical step, and involves careful consideration of your health needs, financial situation, and policy preferences. Apart from the financial stability of the provider and reputation, here are some important factors that you should look into.

Coverage and Benefits

Look into the complete list of medical services that are covered, including hospitalisation, outpatient care, maternity care, mental health services and preventive care. Additional benefits like Ayush wellness dental and vision care are also important. Compare a few policies to see which providers are covering more critical health services.

Network of Providers

Ensure that the insurance plan you are choosing includes your preferred hospitals within its network. The ease and speed with which you can reach the provider's in-network hospitals is a very important factor – and will be a key deciding aspect during health emergencies.

Deductibles

This refers to the amount of money you need to pay as part of the bill, such non-medicals. Also, look into the policy on co-payments or the share of costs you pay for covered services after the deductibles are accounted for. Look for any restrictions such as prior authorisation or step therapy, or any limits for specific surgeries or diseases.

Policy Exclusions and Limitations

What is not included in the policy is as important as what is provided for. Look into the aspects that are not covered by the plan, such as specific treatments, procedures or pre-existing conditions. In particular, check the waiting period for pre-existing diseases, and the cost of the insurance plans after taking into account the age, pre-existing diseases and so on.

Customer Service and Support

Consider the financial stability of the insurance company. Research into the provider's reputation for customer service, ease of claims process, and the availability of support services. Read the reviews and ratings from other policy holders closely.

Flexibility and Portability

Find out if the plan allows for changes as your needs evolve, and if the provider allows you to shift it along with a change in jobs or location. Some plans are compatible with a health savings account which can provide tax advantages for medical expenses – see if you can claim such benefits. ♦

If you have any specific queries related to medical insurance aspects, write to us at info@bloomhealthcare.in

Should you worry about your **CHILD'S SNORING?**

Snoring is a common condition that manifests as a form of disturbance in sleep. Many of us suffer from it in our adult years and often see it as a common enough occurrence. However, parents often get worried when their infant or older child starts to snore. When does it become a cause for concern?

Snoring is caused by an obstruction in the upper airway, which rests above our vocal cords. This condition is often seen to arise from problems affecting the nose, tonsils, adenoids, or any other part of the body associated with the throat, nose and mouth.

Typically, mild and rare / non-recurrent instances of snoring amongst children does not call for immediate attention or medical intervention. This is particularly so when the snoring comes about as a symptom of a cold or an allergic reaction, and disappears when the illness is cured. In such cases, the child doesn't need extensive examination or individually treatment unless and until it is too loud or if the child seems to be finding it difficult to breathe normally.

However, if the child is experiencing chronic snoring (i.e, when the snoring continues for more than a few months), the child can suffer from several issues arising from lack of quality sleep. For example, the child may regularly wake up, gasping for air or gagging, and then feel exhausted through the day despite having been in bed for a long time.

This kind of snoring is frequently found amongst overweight infants or children with short necks, but there could be other reasons as well. In such cases, it is crucial to consult your paediatrician, as they would be able to better guide you to a paediatric ENT (ears, nose, throat) specialist. The latter would have the expertise to best diagnose the cause of the snoring - be it an allergy, a bodily malfunction, and so on. The most common methods of medical investigation used by a paediatric ENT involve getting an X-ray and / or bedside examination to determine if the snoring is due to an allergic reaction. In rare cases, the doctor may



Dr. D. Balakumaran

Head of Paediatrics &
Neonatology
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advise an endoscopy, wherein a small camera is carefully placed inside the child's throat to look for obstructions or any signs that call for immediate intervention. A long-term approach would include sleep studies, where the child is made to sleep in a lab, and then he / she is observed and analysed over the course of their sleep. The doctors would also take note of some health parameters like the child's heart rate and the impact of the snoring on their daily life.

In most cases, to ease the snoring and help the child get good sleep, parents can try out steam inhalation, follow a prone nursing position (i.e. laying the child face-down, on its stomach), and make an active effort to eliminate or avoid suspected allergens or triggers. However, it would be best to check in with the paediatrician before implementing any of these measures. ♦



Legacy Beyond Life

There are some fine lines where medical and legal aspects cross – we break them down and give you a balanced insight.

Samuel Abraham

Legal Advisor - BloomLife Hospital Pvt. Ltd.

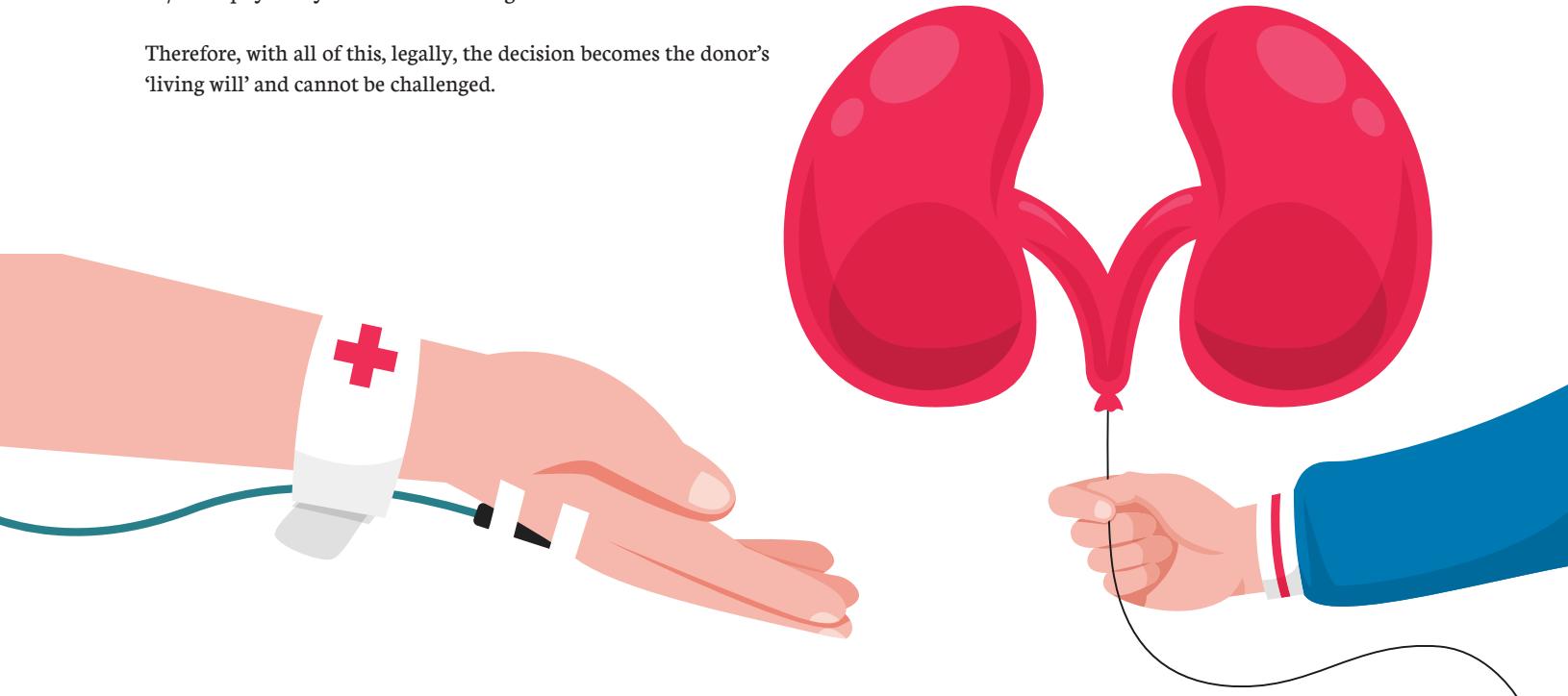
If a person has consented for organ donation after their death, can their family members protest or reverse the decision after the person dies?

The straightforward answer is: No, they cannot contest the decision. Of course, there are some checks and balances in the system. One of them is that the donor should be over 18 years old, and he /she should have signed their pledge before two witnesses. Then, they should have appeared before a Notary Public in person, who will attest the pledge and make an entry in his Notary Register for future reference. Moreover, it is mandated that the person's consent must be videographed and stored for future reference. In addition to all of the above, an authorised medical professional should examine the donor in-person, to ascertain that he/she is physically fit to donate the organs.

Therefore, with all of this, legally, the decision becomes the donor's 'living will' and cannot be challenged.

However, in the Transplantation of Organ Rules, in Form-7, there is advice given for the donor that even though organ donation is an individual decision, it is, in emotional terms, a family decision. Therefore, the donor should discuss his/her decision with family members and loved ones before finalizing their decision, so that there are no unpleasant repercussions after their passing.

Organ donation is a noble act, and the Tamil Nadu Government has made efforts to encourage organ donation among the people. For example, the funeral of a brain-stem death person (who is a donor) shall be conducted with State Honours, and the state shall be represented by the District Collector. ♦





Sunny Side Up

From helping with pain management during labour to playing an important role in the baby's growth and development, Vitamin D is an essential nutrient that pregnant mothers need in sufficient quantity. With exposure to sunlight being the main means for the body to synthesise this vitamin, what are some guidelines we need to follow for safe sun exposure?



Dr. Swarna Ganeshan

Consultant – Holistic Birthing
BloomLife Hospital Pvt. Ltd.

Humans are diurnal creatures. Our bodies are programmed in such a way that we prefer to stay outdoors in the sunlight, and indoors after the sun sets. Melatonin is secreted in the body during the night to help us get to deep sleep sooner and wake up early the next day. Keeping our circadian rhythm in good order prevents many mental disorders that may arise due to poor sleep-wake cycles. There is another important benefit associated with our daily routine: Vitamin D, a fat-soluble vitamin that is synthesised in the body by a photosynthetic reaction, triggered by exposure to the ultraviolet B radiation in sunlight. Sunlight exposure is the main source of this vitamin, and less than 10% of our Vitamin D is obtained from dietary sources such as mushrooms, fish, liver oil, egg yolk, butter, fortified milk and meat.

IMPORTANCE OF VITAMIN D DURING PREGNANCY

During pregnancy, Vitamin D requirements increase in the body as the growing baby requires this vitamin for bone development, skeletal health and normal brain function. The vitamin also helps prevent complications such as pre-term birth, low birth weight of the baby, enlarged ventricles, or other deformities. Deficiency of Vitamin D is also linked to reduced foetal head size, changes in structural and functional development of brain, and possibly, autism spectrum disorder. Vitamin D is particularly essential during the second trimester of pregnancy. It is during this period that the baby's immune system begins to show signs of developing, and the vitamin helps in protecting against allergens and immune-

mediated diseases in later years. Vitamin D also has an anti-microbial peptide that acts as a natural defence in the body, which is much needed as the body is more vulnerable to infection during pregnancy and childhood.

Vitamin D is also helpful for pain management during labour. Prostaglandin production is elevated in the body when there is a dip in Vitamin D – this is responsible for intense uterine contractions during labor. Optimal vitamin D levels have shown to lower back pain, and intrapartum labour pain, as the vitamin has anti-inflammatory effects similar to non-steroidal anti-inflammatory drugs (NSAIDs) used for pain relief.

HOW MUCH VITAMIN D DO YOU NEED?

Ideal levels of Vitamin D stand at 100-150 nmol / L. About 30 minutes of exposure to sunlight by sun bathing every day can enable the body to generate 20,000-30,000IU in tanned individuals, up to 50,000 IU in white people and 8000IU in dark individuals. The ideal time for sun bathing is between 10 a.m. and 11 a.m. in the morning and at 4 p.m. in the evening.

While being exposed to the sun, it is advised that the person wear minimal, comfortable clothing, preferably in white colour. The hands, legs and abdomen should be exposed – and the person should apply coconut oil on these areas prior to sun exposure to prevent damage by other ultraviolet radiation. Before, during and after sun exposure, the person should drink sufficient water to prevent dehydration. For those who have low Vitamin D levels, apart from sun exposure, the doctor may prescribe oral supplements as well. ♦



Map of the Machine

After the doctor has given the go-ahead to discharge the patient, the person and their caretaker(s) are often left waiting for several hours before they can actually leave the hospital and go home. Why does the discharge process take so long?

Anita Krishnaswamy

CEO of BloomLife Hospital Pvt. Ltd.

Afew years back, when I first joined the healthcare industry as head of business at this hospital, I spoke to some of my friends and asked them about aspects that were extremely important, which reflect substantially on a hospital's quality. Nine out of 10 people told me that if a hospital could bring the turnaround time or TAT for the patient discharge process, to within 3 hours from the time the consultant has announced a discharge, it would be a great achievement.

I raised my eyebrows in surprise when I heard this. Why should the discharge process take longer than a couple of hours? After all, it is just about collating the information and preparing the bill, right?

When I started working within the system, and got a close look into the process, it was nothing short of a mind-blowing experience!

When we enter the hospital as a patient / caregiver, it is only natural for us to miss seeing a lot of things that goes on behind-the-scenes when it comes to the treatment or care given to a patient. Much like a machine that operates on the function of numerous smaller units held together inside it, more than 20 departments have to work in tandem to serve a single patient.

To rattle off a few, the consultant, nursing, paramedical, lab technicians, pharmacist, housekeeping, laundry service, central

sterile services department or CSSD. There are special areas like the ICU, emergency, operation theaters, and recovery. There are also technicians working on the water purification plants, oxygen supply manifold and bio-medical waste segregators.

All of the above are primarily connected to the medical side of a hospital.

Then, there are departments helping with the non-medical part, including insurance, cash collection, billing, administration, infrastructure, safety, security, counselling, PR, reception and so on.

The presence and workings of most of these departments is not immediately evident for a patient / caregiver. When an outpatient comes in, they consult with the doctor, maybe take a few tests, get some medicines and go home. When a person comes as an inpatient (a person who is admitted for a treatment), the dynamics of admission is totally different. When a person is to be admitted for a treatment, to deliver a baby or for an elective procedure / surgery (i.e. not an emergency), they have a tour of the facility, they see which room they want, confirm the date of admission and so on. Then, the hospital starts preparing for their admission.

In case of an inpatient, there are a number of services that one avails. Beginning with the admission formalities, followed by the medical officers, nursing staff, pharmacy, lab investigations, procedures if any, consultants and super specialty consultants, additional services like physiotherapy, radiology, implants, ICU, OT, wards, labour room or any other depending upon the nature of the treatment.

In short, a huge team of senior consultants, medical officers, nurses, technicians and non-medical staff (including ward boys, cleaning staff, caterers, and so on) have to work in harmony to ensure round-the-clock service.

Even so, you might say, how does that affect the actual discharge process?

You see, what a patient hears is the consultant's announcement that they are fit to go home, and their confirmation of discharge. Their clock immediately starts ticking.

However, it is a different scenario on the back-end, when the departments begin to close the patient's file. Finalising the information does not happen simultaneously across multiple departments. It is more like a queue. We have to look at the pharmacy, the lab, we have to look at the nursing service provided, the consumables taken in the ward, the use of a theatre or ICU or recovery or labour room. In addition, we have to look at additional services undertaken.

This takes anywhere between 3 to 4 hours, as all of these people are also handling multiple patients at the same time. When all of this information is closed, the file goes to the IP billing department, where the information is verified. This is to ensure that no services have been missed out, and that the patient is not over-billed or wrongly charged. There is no room for error.

For all of this to be done correctly, a billing team has at least 7 to 8 members looking at every file. It is a linear process if it is a cash (i.e. self-paying) patient. The scenario is totally different for patients with health insurance.

If the patient has health insurance, at the time of admission for elective procedures, the consultant would have given them an estimated cost for the treatment. The hospital would have sent a pre-authorisation request to the insurance company for the said amount. The insurance companies will go back and forth on the package chosen, what scheme it comes under, the patient's allowance, and so on, before sanctioning it. If all goes well, and the final cost is within the pre-authorised amount, the billing process is fairly straightforward.

If the patient's choice of room or service results in a cost that is above the pre-authorised amount, or if the patient developed any complications or needed additional services, it will be reflected in the bill. This starts a round of dialogues between the hospital and the insurance company, wherein we need to show proof for the added amount.

As a parallel process, the discharge summary is being prepared. The primary consultant and all other visiting consultants (if any) who were involved in treating the patient have to ensure that all data and information have been recorded accurately. There may be delays if they are busy with other patients / procedures or if emergencies crop up. This document also includes instructions for post hospital convalescence period medications, and review and follow-up.

Let us create a mental map of this complicated machine. Essentially, I want every patient to understand there are a lot of departments that are working in tandem to give them the services, and they all have to prepare the bill correctly, with no errors. Today, though all of these functions are done through hospital management systems, the process of checks and balances is not simple.

When we understand just how much effort is put in, our empathy will overtake our frustration over delayed discharges. This understanding will help us maintain our calm, and help the staff carry out the processes with ease. ♦

Power of Touch

How Massages Benefit Infants

When carried out in the right manner, baby massages entail several benefits for the infant – from improved growth and development to better bonding with parents to helping with consistent sleep habits.

Baby massages are not a new phenomenon. They exist since ancient times, and many of us have surely seen our grandmothers massage infants with experienced fingers, in our homes. However, with shrinking families and increasingly hectic lifestyles, many families find it hard to keep up with such practices. It is important that we revive and follow the tradition of baby massages, as it provides a whole host of benefits for your little one.

BENEFITS OF BABY MASSAGES

There are several benefits to regular baby massages, with the most important ones mentioned below.

Better bonding: One of the most important benefits of massages is that it helps to release oxytocin, or the 'love hormone', thereby deepening the bond between the parent and baby. It also provides a way for the parent to better understand the baby's cues.

Boosting weight gain: Regular massages also help to enhance healthy weight gain in growing infants



Dr. A. Koushik Mathivanan

Consultant – Paediatrics

Improved overall well-being: Massages help to improve circulation, stimulate bowel movements, and alleviate colic.

Better sleep: Massages promote a sense of calm relaxation, thereby augmenting the quality of sleep. When the newborn sleeps well, the mother also benefits from periods of relaxation.

Developmental benefits: Structured infant massages help to promote motor skills and body awareness, improved muscle tone, joint mobility, tactile stimulation, and better self-regulation.

TECHNIQUES OF INFANT MASSAGE

Massages should be given in a calm, peaceful room with minimal distractions (soft music can be played). The temperature should be monitored to make sure it is suitable for the baby. The baby can be given a bath in lukewarm water before the massage. Organic coconut oil is a preferred option for the massages, as it is easily absorbed. The massage should be centred on circumductive motion in trunk, and provided with gentle pressure and rhythmic touch.

HANDLE WITH CARE

For a safe massage experience, please follow the below-given guidelines:

- Get your paediatrician's opinion before starting a massage routine.
- Choose an appropriate surface that is comfortable for the baby.
- Always do a patch test on a small area of skin surface with the oil to be used. Continue its use if no adverse reaction is seen.
- Gentle pressure should be applied, with smooth strokes, while avoiding stimulus-causing tickling.
- Don't massage over soft parts (such as anterior fontanelle or top part of the baby's head).
 - Make sure that the baby is calm and alert during the massage. If the baby is crying or seems uncomfortable, don't force it.
- Avoid feeding immediately after the massage. ♦





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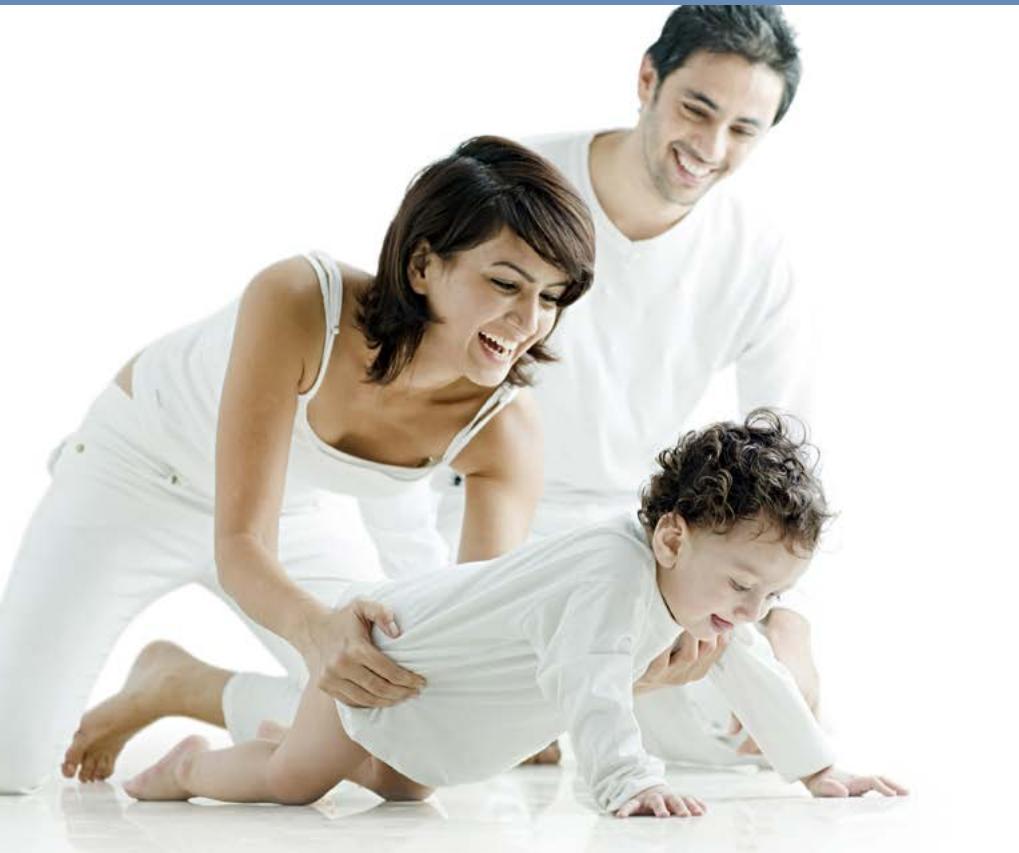
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- ◆ **Gastroenterology**
- ◆ **Anaesthesiology**
- ◆ **Laparoscopic Surgery**
- ◆ **Neurology & Surgery**
- ◆ **Oncology (Medical & Surgical)**
- ◆ **Pulmonology**
- ◆ **AYUSH Wellness**
- ◆ **Dentistry**
- ◆ **Dermatology**
- ◆ **Endocrinology**
- ◆ **Radiology**
- ◆ **Physiotherapy**