Sri Sathya Sai Mobile Hospital

The objective of the Sri Sathya Sai Mobile Hospital programme is to provide an integrated medical care service with equal emphasis on Curative & Preventive aspects.



In the month of January 2012, Sri Sathya Sai Mobile Hospital served 7,340 patients from 12 different mandals. These patients were drawn from nearly 500 villages. A team comprising of 42 doctors (14 each in 3 batches of 4 days of duration) belonging to 11 different specialities and 35 technicians, paramedics rendered their services during the 12 days of the programme.



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January 2012 Programme – Highlights

The presence of a Cardiologist and Cardio-Thoracic Surgeon in the team helped in reviewing patients listed for surgery at Sri Sathya Sai Institute of Higher Medical Sciences (SSSIHMS) and taking a decision on whether these patients should be advised to go to State-sponsored Institutions through the 'Aarogyasri' scheme, depending on their medical status. Also patients who underwent Cardiac surgeries either at SSSIHMS or other hospitals were reviewed by these specialists.

Mr. Narasappa, aged 30 years, diagnosed with Post-Tuberculosis Cavitary Mycetoma (Aspergilloma) from Nidimamidi village was evaluated by the Mobile Hospital and had been referred for surgery to Hyderabad through the 'Aarogyasri' scheme. Dr. Venkat Vijay, M.S., M.Ch who had operated on the patient at Medicity Hospitals, Hyderabad who was the Cardio-Thoracic Surgeon for the programme this month reviewed the patient at his door step!

- The addition of 'sputum for acid-fast bacillus (AFB)' test as part of the diagnostics wing of the Mobile Hospital is a major step in helping patients from the villages covered by this programme, since tuberculosis is very common in this region. Mr. Sharat, a senior Technician from TB Microscopy Centre, Warangal who had been part of the team this month trained one of the paramedics at the Mobile Hospital in preparing and staining of the slides. Slides would be reviewed every month by Dr. Srikanth, M.D., Pathologist who is available on the last 2 or 3 days of programme.
- Screening for Neuropathy was conducted using Biothesiometer on 226 patients with diabetes. Among the patients screened, 2 were found to be affected with severe, 4 with moderate and 6 with mild incidence of Neuropathy.
- Screening for Diabetic Retinopathy was conducted on 76 patients. While none of them were found to have Proliferative Retinopathy, 10 patients had mild to moderate Non-Proliferative Diabetic Retinopathy (NPDR). Dr.Anil, M.S., who performed the examination had a special session with the physicians of SSSMH and emphasized the importance of periodic examination and early diagnosis.

January 2012 Programme – Highlights (Contd...)

- Surgeries were performed on patients diagnosed and evaluated during the programme last month (December 2011). Ten different surgeries were performed on two days at Sri Sathya Sai General Hospital, Prasanthi Nilayam which had spared its Operation Theatre and beds for the surgical team from the Mobile Hospital.
- On 4th January 2012, the surgical team from the Mobile Hospital performed ENT surgeries at the Sri Sathya Sai General Hospital, Prasanthi Nilayam. Two of them were tympanoplasties and the third was on a 11 year old boy who had a tamarind seed retained in his nostril for 8 months!
- The Obstetrics & Gynecology team continued its Cervical Cancer screening service in addition to routine curative clinical work. 255 women were screened by the team using Visual inspection with acetic acid (VIA) method. Among the 61 patients who were found to be positive, 46 underwent cervical biopsy and 4 of them pap smear. These have been sent for histo-pathological examination and necessary treatment will be provided during the review in February 2012. A similar exercise had been conducted during the month of December 2011 wherein, of the 231 women screened, 40 were found to be positive. 40 biopsies and 1 pap smear had been performed. From the biopsy report, 2 were Cervical intraepithelial neoplasia (CIN)-I, 2 of them CIN-II and 2 of them Carcinoma in situ (CIS). Necessary treatment was given to these patients.
- Community level sessions on health education/awareness were conducted in 12 villages on a wide variety of topics using audiovisual tools.

Dr.K.Narasimhan Programme Director 31st January, 2012