







HEALTH PARTNER AT THE EDEN T201

Woodlands Hospital stood steadfast by the Cricket Association of Bengal (CAB) during the high-voltage India-England T20 match at Eden Gardens on January 22, 2025, managing 70+ cases with a 55-member team spread out in two mini hospitals, nine kiosks and ambulances, ensuring top-notch emergency response, apart from the field of play and players' medical room. Woodlands played a similar role at 2023 ODI World Cup, which saw the last international matches at Eden.





HR DIARY



December 27, 2024

Front row: Left to right riyanka Chakraborty, Uma Kar. Dipankar Bar. axmikanta Mandal

Pivali Jana. Suresh Chandra Das

Back row: Abhishek Seth



December 31 - Employee Retirement Ceremony



MD & CEO with Housekeeping, Security & F&B



Shishu Bhavan (Missionaries of Charity)



January 17 - Coffee with MD & CEO with Radiology Technicians

- 79 Years of service
- 6 Million+ patients

- 3 Lakh+ surgeries
- 50,000+ happy mothers

For suggestions and queries, please write to: corporate.communication@woodlandshospital.in





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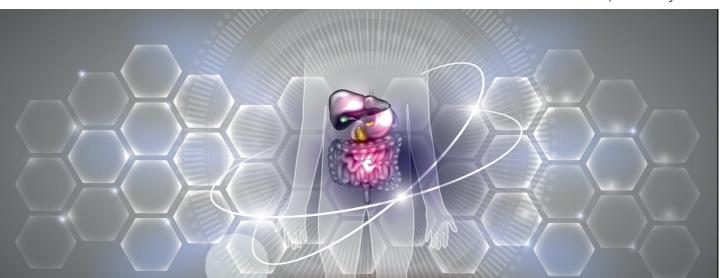
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Whats up

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A Lifesaving Breakthrough: Advanced Technology and Expert Care at Woodlands

HOW INTERVENTIONAL RADIOLOGY AND A SKILLED MEDICAL TEAM SAVED A LIFE FROM SEVERE INTERNAL BLEEDING

In a remarkable display of advanced medical technology and expert critical care, the team at Woodlands recently saved the life of a 68-year-old man suffering from a massive upper gastrointestinal (GI) bleed. When traditional treatments failed, doctors turned to interventional radiology, using the cutting-edge Transjugular Intrahepatic Portosystemic Shunt (TIPSS) procedure as a last resort. What made this even more extraordinary was that the procedure was performed while the patient was on mechanical ventilation, showcasing the highest level of medical expertise and precision.

A Critical Case: Beyond Traditional Measures

The patient, already battling chronic liver disease, was admitted to Woodlands with black stool and severe internal bleeding. His condition rapidly deteriorated, making even an endoscopy impossible. Conventional emergency treatments such as banding (placing rubber bands around bleeding veins to stop the haemorrhage) and sclerotherapy (injecting a clotting solution into the

veins) proved ineffective due to the massive and uncontrolled bleeding.

Recognising the severity of the situation, the medical team swiftly decided on TIPSS within an hour and the procedure was completed within the next few hours.

What is TIPSS and How Did It Help?

TIPSS (Transjugular Intrahepatic Portosystemic Shunt) is a minimally invasive procedure used to treat life-threatening complications of portal hypertension (high blood pressure in the liver's veins). This advanced procedure involves inserting a stent (a small tube) inside the liver to create a new pathway for blood flow, reducing pressure in the portal veins and stopping the bleeding.

Performed by Dr Mousam Dey, consultant, interventional radiology at Woodlands, the TIPSS procedure proved to be the turning point in the patient's survival.

Multispecialty Critical Care: The Battle Pre and Post

Upon admission, the patient's condition was dire. His haemoglobin was dangerously low at 5.5 g/dL (normal: 12-14 g/dL), platelets had plummeted to 30,000 (normal: 150,000-400,000), and his INR was at 3.25 (indicating severely impaired blood clotting). Given his critical state, Dr Susmita Debnath, consultant, critical care at woodlands, and her team immediately placed him on mechanical ventilation to stabilise his oxygen levels.

Continued on page 2















In parallel, multiple units of blood components were administered:

- RBC (Red Blood Cells) to boost oxygen transport
- RDP (Random Donor Platelets) to assist in clotting
- FFP (Fresh Frozen Plasma) to correct coagulation issues Despite the challenges, TIPSS was successfully performed while the patient remained on mechanical ventilation, a testament to the skill and coordination of the medical team.

The Battle Didn't End There: Post-TIPSS Challenges

The days following TIPSS were just as critical. While still on mechanical ventilation, the patient developed ventilator-associated pneumonia with septic shock, a severe infection that required immediate intervention. Dr Debnath and her team, guided by a constant discussions with Dr Kalyan Bose, director, gastroenterology, Woodlands and his team and skilled set of nurses trained in critical care, aggressively managed the infection with culture-sensitive antibiotics and antifungal medications, alongside continuous monitoring and supportive therapies:

- Multiple blood and blood product transfusions to maintain stability
- Inotrope support to stabilise blood pressure
- Adequate diuresis and electrolyte correction to maintain kidney function and prevention of Transfusion Related Acute Lung Injury (TRALI)

Slowly but steadily, the patient began to recover. He was successfully weaned off mechanical ventilation, his blood

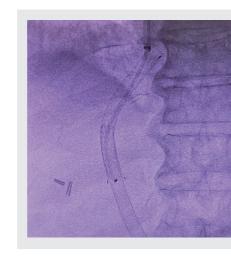
parameters normalised and he regained stable blood pressure, proper urine output and full sepsis control. A Remarkable Recovery and Discharge with his condition improving dramatically, the patient was shifted to the High Dependency Unit (HDU) for further monitoring. Soon, he was well enough to be discharged with medical advice, marking a remarkable turnaround

A Testament to Cutting-Edge Medicine and Expertise

This case highlights not only the power of advanced

from a near-fatal medical emergency.

interventional radiology but also the unparalleled dedication of Woodlands' multidisciplinary medical team. Their ability to rapidly assess, adapt and execute life-saving procedures was instrumental in



ensuring the patient's survival and recovery. At Woodlands, technology meets expertise to redefine the boundaries of critical care, making the impossible, possible

WOODY SAYS

Squad! Time to talk about something serious but super important—your gut health and keeping those nerves safe. There's been a spike in Guillain-Barré Syndrome (GBS) cases and the culprit? Campylobacter jejuni, a sneaky bacteria hitching a ride on contaminated food and water. But don't stress— Woody's got your back with some pro tips! 1 "Cook it right, fam!" - Undercooked chicken? Nah, not worth the risk.

Make sure your poultry is well-cooked and avoid unpasteurised milk like it's

2'Clean hands, clean life!" - Wash those hands like you just touched something sketchy. And no cross-contamination— raw chicken juice doesn't belong anywhere near your veggies!

3"Bad tummy vibes? Take action!" - If you're feeling the wrath of diarrhea, cramps or fever, don't just 'wait it out.' Early detection is key- get tested!

4"Hydrate to dominate!" - If you're hit with symptoms, rehydrate ASAP with fluids or electrolytes. Your body will thank you.

5 "BioFire for the win!" - Feeling weak or experiencing muscle pain? A BioFire PCR test can detect the bacteria early, so don't ignore the signs!

Stay sharp, eat smart and keep those germs in check! Woody out!

MD SPEAKS





Mr Rupak Barua Managing Director & CEO **Woodlands Multispeciality** Hospital Ltd.

Celebrating Six Months of Whatsup Woodlands

As we mark the sixth edition of Whatsup Woodlands, it is heartening to see how this initiative has evolved into a meaningful platform for sharing remarkable medical breakthroughs, expert insights and health awareness. Over the past six months, we have highlighted stories of resilience, innovation and excellence in patient care—this issue is no

In this edition, we showcase the lifesaving role of interventional radiology in a critical upper GI bleeding case, where our team successfully performed TIPSS while the patient was on mechanical ventilation. Such advanced procedures reaffirm our commitment to cutting-edge healthcare.

We also bring you the miracle story of a baby girl, whose survival against all odds is a testament to medical expertise and a mother's unwavering determination. Meanwhile, Woody Says keeps it engaging yet informative, reminding us to stay cautious about infections like Guillain-Barré Syndrome.

As we step into the next phase of this newsletter, we aim to bring more inspiring stories, expert opinions and health tips to our readers. Here's to many more milestones ahead!

MILESTONE

Miracle Baby Defies the Odds After Rare Pregnancy

A baby girl, born at just 35 weeks, is being hailed as a miracle child after surviving an extremely high-risk pregnancy. Her mother, a thalassemia minor patient, first visited Dr Ayesha Chaudhuri, senior consultant, obstetrics and gynaecology, Woodlands, when she noticed a watery sac protruding from her vagina at just 19 weeks of pregnancy. That 2.5-hour journey to Woodlands from Tamluk where she is a civil judge, in a private car, was critical as even the slightest trauma could have led to a

At Woodlands, a scan revealed an incompetent cervix, with the entire amniotic sac and umbilical cord already in the vaginal canal—a situation where most pregnancies end in loss. Determined to save her baby, the mother remained in a head-down position for three weeks, following Dr Chaudhuri's advice. This allowed the sac to recede back into the uterus, after which the doctor performed a cervical cerclage (placing a strong stitch or suture around the cervix) to reinforce the cervix. She was discharged at 25 weeks and continued follow-ups.

At 34 weeks, she was admitted for steroid injections to aid lung development and magnesium sulfate infusion to protect the baby's brain. A drop in haemoglobin to 8 g/dL required two blood transfusions.

On December 27, she went into preterm labor at 35 weeks, leading to an emergency C-section. A healthy baby girl was born, crying immediately. Both mother and baby were discharged on December 31— a true testament to medical expertise, perseverance and a mother's unwavering faith.

"This was only possible because of the team effort of Dr Jhuma Hazra (gynaecology), Dr Pulak Kole (paediatrics), Dr Rina Saha (sonologist) and, of course, Dr Sumana Kundu (anaesthesiology), who counselled the mother for spinal anaesthesia and so she could hear the first cry of the baby. Their dedication played a crucial role in this baby's survival," said Dr Chaudhuri.



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