



**ALL INDIA INSTITUTE OF MEDICAL SCIENCES, BATHINDA**  
JODHPUR ROMANA, MANDI DABWALI ROAD, BATHINDA,  
PUNJAB – 151001

ਅਖਿਲਭਾਰਤੀਆਯੁਰਵਿਗਿਆਨਸੰਸਥਾਨ, ਬਠਿੰਡਾ  
अखिलभारतीयआयुर्विज्ञानसंस्थान, बठिंडा

**RESEARCH ADVISORY COMMITTEE**



Ref. No. AB/RAC/2025/06/02

Date- 20/05/2025

## MINUTES OF MEETING- 20/05/2025

### Research Advisory Committee

#### 1. CALL TO ORDER

Prof. (Dr) Lajya Devi Goyal (Dean Research) called to order the meeting for discussion at 03:00 PM on 20/05/2025

#### • The following members were present in the meeting: -

Prof. (Dr.) Lajya Devi Goyal (Dean Research), Prof. (Dr) Anuradha Raj (Associate Dean Research), Dr. Soumya Swaroop Sahoo, Dr. Suresh Kumar Goyal, Dr. Apurba Patra, Dr. Vaibhav Saini, Prof (Dr). Kamlesh K Sharma, Dr. Mintu Pal.

#### • The following members did not attend the meeting:-

Prof. (Dr) Gitanjali

#### 2. AGENDA

Following the PG Theses were discussed by RAC and send the subsequent comments:

S. No.	Candidate Name	Title	Comments
1.	Aswathy Krishna V (Anaesthesia)	Comparison of AUB-HAS2 Risk Index versus Revised Cardiac Risk Index for Predicting Major Adverse Cardiovascular Events in Adult Patients with Cardiovascular Disease following Lower Limb Orthopaedic Surgeries: A prospective observational studies	<ul style="list-style-type: none"> <li>Title- Modifications required with full form no abbreviations, Title is too long write the Title concisely,</li> <li>AIM –Use full forms.</li> <li>Sampling technique- Rectification required.</li> <li>Mention Candidate name instead of PI.</li> <li>Clarify, how will you recruit the patient?</li> <li>Use full forms in the PIS/PICF.</li> </ul>
2.	Imolemla Longkumer (Anaesthesia)	A comparative study of the efficacy of Fuji Uniblocker and the EZ blocker for One Lung Ventilation in adult cardiothoracic surgery: A	<ul style="list-style-type: none"> <li>Modify the title of the study.</li> <li>Modify the primary objective to align with the title.</li> <li>Study Design: Remove “prospective” term, only wrote</li> </ul>



S. No.	Candidate Name	Title	Comments
		randomized controlled trial	<p>RCT.</p> <ul style="list-style-type: none"> <li>• Use full forms in the Inclusion &amp; exclusion criterion.</li> <li>• Write the pregnant women instead of the pregnant patient.</li> <li>• Remove dropouts from the sampling technique.</li> <li>• Materials and Methods: Who will open the sealed opaque envelopes for randomised sampling?</li> </ul>
3.	Satyam Patel (Anaesthesia)	To compare the prognostic utility of red cell distribution width and platelet distribution width with severity of illness score in predicting 28-day mortality in patients with sepsis admitted to the intensive care unit	<ul style="list-style-type: none"> <li>• Mention "Candidate" in place of PI.</li> <li>• Mention 'Surgical ICU' in the title of the study.</li> <li>• Modify the title &amp; mention study design in the title.</li> <li>• Define sepsis and specify the Day Zero.</li> <li>• Kindly provide the novelty of the study.</li> <li>• Clarify as the RDW will change in 3 months of the blood transfusion, is it feasible?</li> <li>• Kindly reassess for a more practical and feasible topic.</li> </ul>
4.	Aswin M G (Anaesthesia)	Comparison of first attempt success rate of videolaryngoscope-guided versus standard insertion technique of the Ambu AuraGain laryngeal airway in adult patients receiving general anaesthesia : A Randomised Control Study	<ul style="list-style-type: none"> <li>• Define videolaryngoscope-guided insertion "first attempt success" Is it already in routine use, or is it investigational in the setting?</li> <li>• Please check double blinding who might be: it is feasible, but observer blinding depends on an independent observer who may record the outcomes (make sure) but not the operator; otherwise, it would be single-blind.</li> <li>• Mention primary and secondary outcomes as discussed.</li> <li>• Signature missing on Submission of thesis protocol and IEC Performa.</li> <li>• Do the Page set up properly and correct the Typo error of the thesis title on Page No. 1.</li> <li>• Remove "comparison" from the title of the study and modify the title as suggested.</li> <li>• Correct the flow chart.</li> </ul>



S. No.	Candidate Name	Title	Comments
			<ul style="list-style-type: none"> <li>How to remove operator bias? (Operator bias in the study, so it is suggested that the similar level anaesthesiologist should perform the procedure)</li> <li>Kindly attach the plagiarism check report.</li> </ul>
5.	Parul Sharma (Anaesthesia)	Comparison of Subclavian vein and inferior Vena Cava diameter and collapsibility index for predicting post induction hypotension in obese patients undergoing elective surgeries under general anaesthesia: a prospective observational study	<ul style="list-style-type: none"> <li>Check the clarity: is it something like SCV and IVC diameters and their collapsibility indices (CI).</li> <li>Revise the primary objective as mentioned.</li> <li>Minor modifications of Secondary objectives: Last point is not clear: is it something like: To examine the association between pre-induction SCV/IVC measurements and the need for vasopressor support following induction (you have mentioned the amount of vasopressor...).</li> <li>The endpoint should include a measurable outcome to assess the effect of an intervention or simply reply, how well did SCV-CI predict hypotension? (not a protocol step or measurement schedule).</li> <li>SPSS version will be 29.0.</li> <li>Modify the title as suggested.</li> <li>Remove "predicting", modify the primary objective.</li> <li>Modify the secondary objective. (Remove 3<sup>rd</sup> point of the secondary objective).</li> <li>Remove "feasibility" and write "success rate" in 1<sup>st</sup> point of the secondary objective.</li> </ul>
6.	Shrinidhi R (Anaesthesia)	Pre-anaesthetic ultrasonographic evaluation of subclavian vein diameter and collapsibility index during normal and deep breathing to predict the occurrence of hypotension after spinal anaesthesia in patients undergoing elective caesarean section: A	<ul style="list-style-type: none"> <li>Use full forms in the thesis protocol.</li> <li>Remove "Correlation" term from primary objective.</li> <li>Write correlate in 2<sup>nd</sup> point of the secondary objective.</li> <li>Pg 14, Aim – Write "To correlate" instead of compare.</li> <li>Pg 14, Primary objective – Write to find the correlation instead of Comparison.</li> </ul>



S. No.	Candidate Name	Title	Comments
		prospective observational study	<ul style="list-style-type: none"> <li>• Secondary objective:- 2<sup>nd</sup> point "Relevance of the time taken".</li> <li>• Anyone will be blind.</li> <li>• Sampling design- consecutive or convenient?</li> <li>• Blinding of any of the assessor.</li> <li>• What is the hypothesis behind this study?</li> <li>• It is mentioned that this study has already been done (Reference 17).</li> </ul>
7.	Deepa Bharti (CFM)	Determinates of hypertension across life stages in District Bathinda: Cross Sectional Mixed Method study	<ul style="list-style-type: none"> <li>• Page no 1: Reference 4 is mentioned after reference 5---maintain the order</li> <li>• AIMS: Mention "in Bathinda District"</li> <li>• Eligibility criteria: Reframe this part.</li> <li>• Data collection method: Spell out the abbreviation STEPS survey [22]</li> <li>• References: Non-homogeneous follow Vancouver style</li> <li>• Clearly define the age group.</li> <li>• Major revision required for everything.</li> <li>• Kindly attach the plagiarism check report.</li> </ul>
8.	Usha Jaglan (Dermatology)	Impact of Acquired Dermal Macular Hyperpigmentation on the Quality of Life of Patients and Their Family Members: Cross-Sectional Study	<ul style="list-style-type: none"> <li>• Guide and Co-Guide has written that protocol has to be amended, so it will be evaluated once it is cleared by Guide and Co-Guide.</li> </ul>
9.	Nandini (ENT)	Comparison of effectiveness of CO2 laser vs coblation assisted reduction of inferior turbinate in cases of significant inferior turbinate hypertrophy : A Randomised Control Trial	<ul style="list-style-type: none"> <li>• Form for comments of HOD: In the table, the applicable comments need to be checked</li> <li>• Objectives – better to number the objectives.</li> <li>• Primary objectives can be rephrased</li> <li>• Sampling: Is there any concealment?</li> <li>• Sample size: is the attrition factor considered as the study involves long term follow-up</li> <li>• Exclusion criteria: why exclude pregnant/ lactating women? Are</li> </ul>



S. No.	Candidate Name	Title	Comments
			<p>these interventions conventionally not performed in them?</p> <ul style="list-style-type: none"> <li>• Who will be doing the post intervention assessments?</li> <li>• In PIS there are few points (3) which are copied from the sample format and seem redundant in present study.</li> <li>• Remove "comparison" from the title of the study.</li> <li>• The signature of the candidate is missing.</li> <li>• Remove references from the primary objective.</li> <li>• Minimum no. of references should be 14-15.</li> <li>• Major revision required, Not Approved (Present again).</li> </ul>
10.	Bhavika Mansion (ENT)	Comparison of Postoperative Hearing Outcomes and Complications in Skeeter Drill versus CO2 Laser-Assisted Stapedotomy: A Prospective Randomized Controlled Trial	<ul style="list-style-type: none"> <li>• Title: Prospective word can be removed.</li> <li>• No references in the intro part. Proper references of sentences to be provided in the Intro section.</li> <li>• Review of Literature to be rewritten</li> <li>• Objectives to be correctly phrased and complications to be specified.</li> <li>• Methodology to be rewritten, how the patients will be recruited, how randomisation will be done and allocation.</li> <li>• Statistical analysis to be rewritten.</li> <li>• References to be modified according to Vancouver.</li> <li>• Remove "comparison" from the study title.</li> <li>• Primary objective- It is suggested to start with comparison.</li> <li>• Use full forms in the title.</li> </ul>
11.	Ranjodh Singh (Forensic Medicine & Toxicology)	Detection of concealed information in a mock crime scenario using pupillometry and the concealed Information Test (CIT) among staff of a tertiary care hospital	<ul style="list-style-type: none"> <li>• Staff may guess the study's aim and modify their behaviour: how to tackle this, can affect the validity.</li> <li>• How to ensure true concealment, participants can hide true informations.</li> <li>• Why people will participate, recruiting enough participants from</li> </ul>

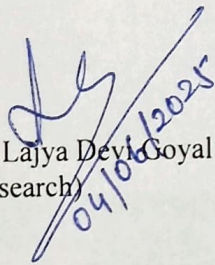


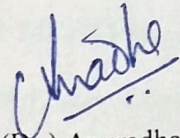
S. No.	Candidate Name	Title	Comments
			<p>hospital staff may be difficult.</p> <ul style="list-style-type: none"> <li>• A mock crime doesn't fully replicate real-world emotional stakes, can't generalize.</li> <li>• Sensitivity of pupillometry requires precise eye-tracking tools; slight errors can affect data accuracy.</li> <li>• Ethical concerns: Is simulating a crime, even fictitiously is ethical as this may cause psychological stress to the participants.</li> <li>• Study population: What is bulletin board entry?</li> <li>• Inclusion Criteria- Volunteers of either gender, 18-50 years old 27, 28, 29. Why these citations.</li> <li>• Exclusion criteria- Volunteers less than 18 years of age and more than or equal to 50 years of age: No need to mention.</li> <li>• Volunteers who refuse to provide written informed consent: already mentioned.</li> <li>• References are not homogeneous: Use Vancouver style.</li> <li>• Justify the practicability and the feasibility of the study.</li> </ul>

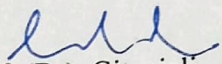


Minutes of Meeting held on 20/05/2025 regarding the evaluation of Theses projects

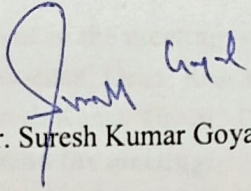
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Prof. (Dr) Lajya Devi Goyal  
(Dean Research)

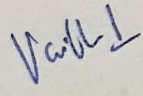
  
Prof. (Dr.) Anuradha Raj  
(Associate Dean Research)

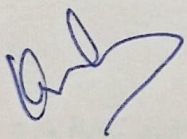
  
Prof (Dr). Gitanjali

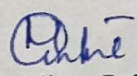
Dr. Soumya Swaroop Sahoo  
(Alt. Member Secretary)

  
Dr. Suresh Kumar Goyal

Dr. Apurba Patra

  
Dr. Vaibhav Saini

  
Prof (Dr). Kamlesh K Sharma

  
Dr. Mintu Pal