

FOGSI CONNECT



Issue 2 | April 2026

Forever in our Hearts



Dr. Rakhi Singh

11/10/1970 — 27/3/2026

Chairperson, Endocrinology Committee FOGSI (2020-2023)

Message from President

Dear FOGSIANS

I am delighted to write this message for the second issue of FOGSI Connect for the year 2026. This issue compiles our activities in the first three months of our tenure and highlights the upcoming events for the next quarter.

Our team was installed in a glittering ceremony at the AICOG on the 15th of January 2026 at the Yashobhoomi Convention Centre, Dwarka, New Delhi. The team from AOGD led by Dr Ashok Kumar and Dr Aparna Sharma organized a spectacular conference in an amazing venue. The meeting was rich in academic content with great evening programmes and looked after minute details to enhance the comfort of the delegates. I had the opportunity to meet many of you there and I hope the event remains as a cherished memory for all of us.

We had announced a reduction in conventional conferences; the only conference we had in this quarter was the FOGSI East Zone Conference with YUVA on February 27,28 & March 1 in the holy city of Gayaji. The team from Magadh Obs & Gynae Society led by Dr Ramadhar Tiwary, under the able guidance of Dr Abha Rani Sinha, Vice President, touched us with their warm hospitality. The meeting was well organized and well attended and the venue was superb.

We have proposed nine conclaves this year which are two day focused single hall meetings with hands on stations on simulators. The PPH conclave happened in March at Salem, attended by over 450 delegates with an excellent scientific programme and useful skill enhancement session. I congratulate the Salem team led by Dr Saravanakumar and National Resource person Dr Mahesh Gupta. The Art of Birthing Conclave happened in Lucknow where multiple stakeholders including the UP government and NGOs and donors participated. The deliberations were excellent with several skill enhancement stations, with over 600 participants. Dr Priti Kumar, Vice President, Dr Seema Mehrotra and the entire team of Lucknow Obs & Gynae Society deserve a huge applause for this meeting.

We also had an Endometriosis Consensus meeting, a one day single hall meeting, which produced a crisp Consensus Clinical Practice Points which I believe will be helpful to the clinicians. This meeting was organized by the AOGO (Cuttack Society) in Bhubaneshwar under the dynamic leadership of Dr Sujata Mishra and Team.

On the publications front, at the AICOG we released the updated FOGSI GCPR (Good Clinical Practice Recom-

mendations) on Hypertensive Disorders of Pregnancy. We have also prepared a FOGSI Position Statement on Vaccination in Pregnancy.

The flagship programme of this year are the REACH CMEs which are 2-3 hour modular programmes held at societies. I am pleased to inform we already had close to 100 CMEs in all categories of societies. We aim to hold over 1000 in the year. This has been possible due to the untiring efforts of the three National CME convenors, Dr Seetha Ramamurthy Pal, Dr Poushali Sanyal and Dr Bidisha Roychoudhury, ably supported by the regional and state co-ordinators, the national co-ordinators of the modules and the respective committee chairpersons.

FORCE, the PG teaching programme led by Dr Ashish Kumar Mukhopadhyay has had a sharp take off and we hope to have over 25 programmes in the year. The EAGLE Project by the Endoscopy Committee and the POISE programme by the Imaging Science Committee are continuing and we have started a new skill transfer programme on hysteroscopy.

Given the intensity of our profession and the hectic organisational responsibilities, it is important to relax once in a while; so we had the FOGSI GALACON at Langkawi in January and the FOGSI FRIENDS Conclave at Khajuraho in April.

In another first, the FOGSI Leadership Summit had the entire top leadership in a two night residential huddle brainstorming to set the course forward for FOGSI over the next few years.

I take this opportunity to thank the Vice Presidents, the administrative Office Bearers, and the Committee Chairpersons for their hard work and co-operation. I must specially mention Dr Soma Datta, Joint Secretary, Dr Basab Mukherjee, National Co-ordinator and the Publication Convenors Dr Ramprasad Dey, Dr Priyanka Pipara and Dr Sebanti Goswami.

Please feel free to write to us with your suggestions, grievances and feedback. I hope to meet many more of you in the course of the year.

With warm personal regards

Bhaskar Pal

President, FOGSI



Message from Secretary General

I am pleased to present a brief overview of FOGSI's academic activities from January to April 2026, reflecting our commitment to excellence and knowledge-sharing across the country.

The year commenced with Galacon Langkawi in January, a remarkable platform for international collaboration and scientific exchange. This was followed by the PPH Conclave at Salem and the Endometriosis Consensus meeting in Bhubaneswar in February, both of which fostered high-level discussions on critical clinical challenges. February also saw the meeting for the Position Statement on Vaccination in Pregnancy, emphasizing FOGSI's proactive role in public health advocacy.

The YUVA FOGSI East Zone program in Gaya (27th February to 1st March) provided an engaging forum for our young members, nurturing the next generation of leaders. In March, the Leadership Summit in Goa further strengthened strategic thinking and leadership skills among our senior members.

April witnessed the FOGSI Friends Conference in Khajuraho and the Art of Birthing Conclave in Lucknow (11-12 April), offering diverse learning experiences spanning clinical, scientific, and practical domains.

Under the academic wing of REACH CMEs, we have successfully integrated FOGSI societies, big and small, into structured continuing medical education, completing almost 100 programs to date. This effort has reinforced our mission of extending quality education to every corner of the country.

These initiatives collectively highlight FOGSI's sustained dedication to advancing obstetrics and gynecology, fostering collaboration, and empowering our members with contemporary knowledge and leadership skills.



Dr. Suvarna Khadilkar

Message from Vice President, East Zone

It is my privilege to serve as Vice President FOGSI, the largest professional organisation of gynaecologists of India under the dynamic leadership of President FOGSI, Dr Bhaskar Pal.

The first event assigned to me as Vice president was FOGSI East Zonal Conference with Yuva, organized by Magadh Obstetrics & Gynaecological Society. It was held successfully from February 27th to March 1st, 2026, at the Mahabodhi Cultural Centre in Bodh Gaya, Bihar under the leadership of FOGSI President Dr. Bhaskar Pal. This mega event was convergence of young talent and experienced professionals in the field of Obstetrics and Gynaecology. The galaxy of speakers, were the masters with vast experience, well known and recognised clinical academicians. The topics for workshop and scientific session were well chosen to provide the most needful update on the spectrum of medical, Obstetrical and gynaecological problems of the speciality This major academic event focused on young gynaecologists, featuring specialized 8 workshops and 4 parallel scientific halls offering a comprehensive platform for academic exchange.

The REACH (Reinventing excellence across clinical horizons) Is the most popular academic programme initiated by President FOGSI. Through these CME's the evidence-based knowledge and skills is reaching across the country specially the remote areas. had the opportunity of coordinating along with the Reach CME team in execution of modules related to early pregnancy, Adolescence. Medical disorders in pregnancy, Stillbirth, Rh Mac, Emergency and operative obstetrics and managing normal pregnancy.

I take this opportunity to extend warm invitation for participation in FOGSI STILL BIRTH CONCLAVE 2026 in Patna Bihar to be organized on 18th and 19th July 2026.

With best wishes



Dr. Abha Rani Sinha

Message from Vice President, West Zone

Dear Delegates

There is a certain energy this year... and it is unmistakable.

I would like to acknowledge the inspiring leadership of Dr. Bhaskar Pal, the esteemed President of FOGSI. His visionary thinking, clarity of purpose, and deep commitment to women's health are not just guiding us—they are energizing the entire organisation.

What we are witnessing today is not merely the execution of a plan, but the unfolding of a powerful vision. Across the country, this vision has begun to move—swiftly, purposefully, and with remarkable clarity and impact. The Conclaves are setting a new academic tone—focused, one-hall, high-impact platforms where learning is not diluted, but deeply experienced. With a strong emphasis on practical application and meaningful exchange, they are redefining how we engage with knowledge. These are not just conferences, but thoughtfully curated spaces for deep learning and real-world relevance.

At the same time, the REACH CMEs are truly living up to their name—reaching far and wide, bridging gaps, connecting societies big and small, and ensuring that quality academics travel beyond boundaries. This scale, inclusiveness, and consistency reflect the true strength of this year's direction. There is momentum. There is direction. And above all, there is a shared enthusiasm that binds us together as one strong FOGSI family. I am confident that each one of us will not only be enriched by this journey but will also take pride in being a part of this transformative year. This is not just a beginning... this is a movement.

This is FOGSI in action.

With warm regards,



Dr. Anju Soni

Message from Vice President, West Zone

Dear FOGSIANS,

Warm greetings to each one of you.

It is my proud privilege to present a brief overview of activities and progress during the first quarter of this FOGSI year. The initial months have been very productive and hectic with the timeline of our dynamic president Dr Bhaskar Pal. Going back in time, when we were preparing for this year's activities, we thought that the plans put up by our president were too enthusiastic but lo and behold we are about to finish 100 Reach CMEs by the end of this month.

We have committed FOGSI member societies who have actively collaborated with these CMEs with good participation and knowledge sharing with our colleagues. Advocacy has been a priority, with first very successful consensus meeting on Endometriosis in Bhubaneswar. The conclaves on PPH and Art of birthing were very specific to the topic and useful with hands on workshops. A special mention of another successful conference EZYF at Gaya.

Additionally, Hysteroscopy workshops have kickstarted and it will reach the enthusiastic colleagues who are keen to get skill trained in this very important minimally invasive procedure.

Leadership summit was one of its kind activities where we were blessed to have our respected past presidents of FOGSI and senior key opinion leaders. The summit was a super amalgamation of meaningful discussions and a great learning experience.

Special attention has been given to public programs on FOGSI days and on International Women's Day.

With continued support and collaboration, we are confident of achieving our shared goals.

So long for now!

Warm regards,



Dr. Meenu Agarwal

Message from Vice President, North Zone

It gives me immense pleasure to highlight the successful conduct of multiple academic initiatives under FOGSI Connect, reflecting our continued commitment to excellence in women's healthcare.

The year 2026 began with the prestigious AICOG Conference at Delhi, followed by the EZ Conference with YUVA at Gaya, both witnessing enthusiastic participation and rich academic exchange. Additionally, the Galacon Conference held at Langkawi in January was a remarkable international academic engagement.

Under the Conclaves, the PPH Conclave was successfully conducted at Vijayawada in March 2026, and the Art of Birthing Conclave held at Lucknow on April 11–12, 2026 was highly appreciated for its impactful sessions and organization. The Collaborations with organization working in Maternal and Newborn Health like UNICEF, Jhpiego, UNFPA, Laerdal Foundation, Aastrika Foundation, CIFE, Maternity Foundation, Global Health Strategies, Safe Care, Centre for Catalyzing Change is praiseworthy. The Support of Government of Uttar Pradesh made a huge impact in enrolling doctors and nurses from public health facilities.

Additionally, the Consensus Meeting on Endometriosis, held at Bhubaneswar in February marked an important step in advancing clinical knowledge and collaborative discussions.

These programs truly reflect the spirit of FOGSI Connect in bringing together experts, promoting knowledge sharing, and strengthening evidence-based practices across the country and beyond.

I extend my heartfelt congratulations and appreciation to President FOGSI and organizing teams & participants for making these initiatives a grand success.

Dr Priti Kumar



Message from Vice President, South Zone

Dear Colleagues and Friends,

The past few months have been marked by vibrant academic and professional engagement under FOGSI's banner. Our flagship events began with Galacon in Langkawi from 24th to 27th January, providing a platform for knowledge exchange and networking among members. The Endometriosis Consensus Meeting in Bhubaneswar on 8th February successfully consolidated expert opinions to guide clinical practice. On 15th February, a focused meeting on the Vaccination in Pregnancy Position Statement was held, emphasizing our commitment to maternal and fetal health.

The East Zone Conference with Yuva in Gaya from 27th February to 1st March energized young members and fostered regional collaboration. The Leadership Summit in Goa from 27th to 29th March highlighted strategic planning for FOGSI's future initiatives. Subsequently, the FOGSI Friends Conclave in Khajuraho from 3rd to 5th April promoted peer learning, while the PPH Conclave in Salem on 7th and 8th March and the Art of Birthing Conclave in Lucknow on 11th and 12th April addressed critical clinical competencies.

In addition to these major gatherings, nearly 100 FOGSI REACH CMEs have been conducted nationwide, reaching societies large and small, under FOGSI's academic wing. These programs continue to strengthen professional development, knowledge dissemination, and regional engagement, reaffirming FOGSI's commitment to excellence in obstetrics and gynaecology.

With warm regards,

Prof Dr Vidya Thobbi



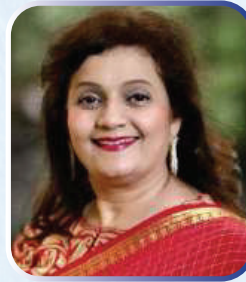
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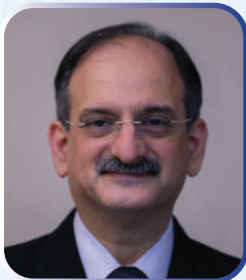
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Odisha	Indira Palo, Sandhyarani Panigrahi
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Uttarakhand/HP	Arti Luthra, Alope Sharma
Rajasthan	Ritu Joshi, Monika Gupta

AICOG 2026 : A Resounding Success in Advancing Women's Health



The **All India Congress of Obstetricians and Gynaecologists (AICOG) 2026**, the flagship annual conference of the Federation of Obstetric and Gynaecological Societies of India, concluded on a high note, marking yet another milestone in advancing women's healthcare in India. Hosted in the vibrant city of New Delhi, the conference brought together **thousands of delegates**, including clinicians, academicians, researchers, and trainees from across India and around the world.

The conference venue stood out as a cornerstone of its success, offering world-class infrastructure with **multiple state-of-the-art halls, over 20 parallel session spaces**, and seamless accessibility for participants. The thoughtfully designed layout ensured smooth movement of large crowds while maintaining a focused academic environment.

Academically, AICOG 2026 set new benchmarks with over **1,000 scientific presentations**, including plenary sessions, symposia, panel discussions, and free papers. The conference featured more than 100 international speakers alongside leading national experts, delivering cutting-edge insights across all domains of obstetrics and gynaecology. A highlight was the introduction of India's first **Metaverse Simulation Zone in OBGYN**, offering immersive, technology-driven learning experiences.

Pre-conference engagement was equally robust, with **18+ hands-on workshops** covering subspecialties such as fetal medicine, laparoscopic surgery, labour ward emergencies, ART, oncology, and preventive health. These workshops

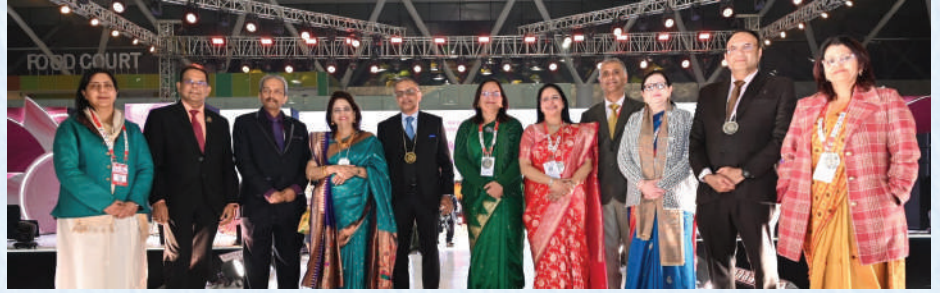
provided practical, skill-based learning opportunities to hundreds of participants.

A defining feature of AICOG 2026 was its strong public health focus, with **7 dedicated public forums** addressing critical issues including cervical cancer elimination, violence against women, transgender health, preconception care, menstrual health, non-communicable diseases, and safe motherhood. These forums reinforced FOGSI's commitment to bridging the gap between clinical expertise and community impact.

Beyond academics, the conference offered a rich cultural and social experience. **Multiple curated social evenings**, attended by thousands of delegates, created a vibrant atmosphere of networking, collaboration, and celebration—capturing the true spirit of AICOG.

The hallmark of the event was its **seamless organization**, supported by a dedicated team working behind the scenes. With **hundreds of sessions conducted over 4 days**, time management was exemplary, with strict adherence to schedules and smooth transitions between sessions—an achievement of note for an event of this scale.

In essence, AICOG 2026 was not merely a conference but a landmark gathering that showcased the strength, innovation, and unity of the obstetrics and gynaecology community in India. With its scale, scientific depth, and flawless execution, it sets a new gold standard for conferences in the years to come.





PANEL DISCUSSION

14th to 17th January, 2026
 11:00 AM to 12:00 PM
 (Public Internet) (Conventional & Ergo Centre)
 New Delhi

- However, despite these advances, hysterectomy is not without risk.
- Complications can range from minor, self-limiting issues to serious, life-altering events affecting the urinary tract, bowel, vascular structures, and overall quality of life.
- This panel discussion is designed to critically examine the spectrum of complications associated with hysterectomy, identify risk factors, discuss prevention strategies, and share practical approaches to early recognition and management.



East Zonal Conference with Yuva

The FOGSI East Zonal Conference with Yuva, organized by the Magadh Obstetrics & Gynaecology Society, was held successfully at ITC Welcome and Mahabodhi Society, Gaya, Bihar between 27th Feb to 1st March.

A vibrant academic gathering of approximately 600 gynaecologists. The conference featured 8 enriching workshops, 4 parallel scientific halls, engaging academic deliberations, beautiful cultural programme, and sumptuous food that added warmth to the experience.

The event was conducted under the able leadership of FOGSI President Dr Bhaskar Pal and East Zone Vice President Dr Abha Rani Sinha.

Heartfelt appreciation to the entire organizing team for their warm hospitality and flawless arrangements, under the guidance of Dr Ramadhar Tiwari, which made the conference truly memorable. Congratulations to the Magadh Obs Gyn Society for hosting such a successful and enriching event.



PPH Conclave

The FOGSI PPH Conclave 2026, held in Hotel Radisson, Salem, Tamil Nadu on March 7-8, 2026, focusing on advancements and best practices in managing Postpartum Haemorrhage (PPH) was a resounding success. The event fostered exchange of knowledge addressing PPH challenges under the theme “Every Drop Counts – Science and Skills”. The Conclave was hosted by the Obstetrics and Gynaecological Society of Salem (OGSOS), led by Dr. Saravana Kumar (Organizing Chair) and Dr. Davashree (Organizing Secretary). The total number of registration was 470. The conclave comprised of focused single-hall discussions, hands-on workshops, expert panel discussions, video sessions, free paper/poster presentations, and scientific exhibition.

Dr. Bhaskar Pal, President of FOGSI, graced the inaugural ceremony and shared insights on the federation’s initiatives in maternal health, PPH reduction strategies, and national priorities for safer motherhood.

The single-hall format ensured focused discussions, while interactive elements like expert panel and video demonstrations enriched the learning experience. Feedback indicated high satisfaction with the practical, skill-oriented approach directly applicable to clinical practice.



Art of Birth Conclave

The FOGSI Art of Birthing Conclave – Womb to World Con 2026, themed “Safe Birth,” was successfully organized by the Lucknow Obstetrics and Gynaecological Society (LOGS) under the aegis of the Federation of Obstetric and Gynaecological Societies of India from 10th to 12th April 2026 at the Atal Bihari Vajpayee Scientific Convention Center, King George’s Medical University, Lucknow, under the able guidance of FOGSI President Dr. Bhaskar Pal and Vice President Dr. Priti Kumar.

The conclave witnessed enthusiastic participation from over 400 nursing students and nursing tutors and 600 doctors, including approximately 215 faculty members, creating a robust academic platform for interdisciplinary learning and exchange.

The academic richness of the conclave was further strengthened by the participation and support of leading national and international organizations, including Jhpiego, Laerdal Global Health, UNICEF, UNFPA, Maternity Foundation, Global Health Strategies, Aastrika Foundation, and Centre for Catalyzing Change, which provided valuable technical and academic inputs. The Government of Uttar Pradesh also endorsed the initiative and deputed 50 nurses and doctors, contributing to

capacity building within the public health system.

The pre-conference day on 10th April 2026 focused on nursing and midwifery workshops emphasizing respectful maternity care, labour room preparedness, labour monitoring, and postpartum care in alignment with WHO guidelines. The main conclave day on 11th April 2026 included focused scientific sessions and high-yield skill stations with delegates gaining valuable practical skills. The formal inauguration was held with FOGSI President Dr. Bhaskar Pal as Chief Guest, followed by a cultural program, “Art of Birthing – Rhythm of Nature,” celebrating safe motherhood. The final day, 12th April 2026, focused on advanced clinical decision-making in operative obstetrics and panel discussions addressed complex clinical scenarios. The academic program also included 98 e-poster presentations and 130 free paper presentations by postgraduate students. A highly competitive postgraduate quiz saw participation from 25 teams representing over 15 medical colleges.

Overall, the conclave was a resounding success, achieving its objective of promoting safe, respectful, and evidence-based maternal and newborn care.



Endometriosis Consensus Meeting

The Endometriosis Consensus Meeting held on 8th February at the Mayfair Convention Centre organised by AOGO was a focused one-day academic event conducted in a single-hall format to encourage in-depth discussion and interaction. The meeting brought together 28 expert faculty members and 140 registered delegates, creating a dynamic platform for knowledge exchange and collaborative learning.

Expert-led sessions were complemented by interactive discussions, allowing participants to engage directly with leading specialists and share practical insights.



The program covered a comprehensive range of topics, including clinical presentation and diagnosis of endometriosis, medical and surgical management strategies, as well as critical aspects such as infertility and disease recurrence.

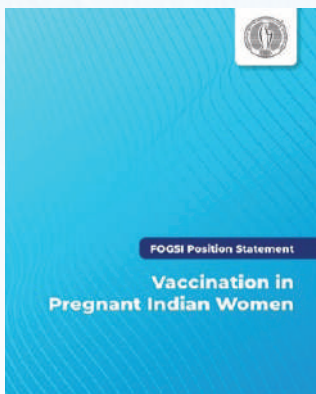
The primary aim of the meeting was to develop and consolidate practical, evidence-based “Endometriosis Practice Points” that can guide clinicians in improving patient outcomes and standardizing care.



FOGSI Position statement – Vaccination in Pregnancy

A focused expert meeting was convened on 15th February in Mumbai with the objective of developing a comprehensive position statement on vaccination in pregnancy. The meeting brought together 22 distinguished experts from all over

India. Overall, the meeting was highly productive and marked a significant step toward establishing standardized, evidence-based guidance on vaccination in pregnancy, aimed at improving maternal and neonatal health outcomes.



FOGSI Leadership Summit

The summit was held from 27th to 29th March in Goa, marking a well-organized and engaging gathering over three days. The summit aimed to thoughtfully deliberate and define the strategic roadmap for FOGSI Vision 2035, bringing together 88 distinguished delegates.

The summit proved to be an enriching and impactful experience, fostering meaningful dialogue on governance, strategic vision, and the future roadmap of FOGSI. The exchange of ideas, collaborative planning, and shared

commitment underscored the organization's dedication to growth and excellence.

A unique strength of the summit was the convergence of esteemed past leaders—offering wisdom and experience—and emerging future leaders, contributing fresh perspectives and innovation. This seamless blend of legacy and forward-thinking ensures that FOGSI remains resilient, progressive, and future-ready.



Galacon

The FOGSI Galacon held at Langkawi from 24th to 27th January 2026 was a vibrant and memorable event conducted under the leadership of FOGSI President Dr. Bhaskar Pal. The meeting was efficiently organized by Chairperson Dr. Sampathkumari and Organizing Secretary Dr. Subash, with enthusiastic participation from 48 FOGSI members along with 32 accompanying family members.

The academic highlight of the event was a comprehensive Adolescent (Adol) CME, which covered a wide spectrum of adolescent health issues, fostering meaningful learning and

discussion. Adding to the spirit of the gathering, Republic Day was proudly celebrated at Langkawi, creating a sense of unity and patriotism even while abroad.

The program also featured engaging entertainment sessions, offering relaxation and bonding opportunities for all attendees. Overall, the Galacon was a perfect blend of academics, celebration, and camaraderie—an enjoyable and enriching experience filled with learning, fun, and lasting memories.



FOGSI Friends Conclave



The program offered a perfect mix of academics, fun, relaxation, and camaraderie. The academic sessions offered a comprehensive and insightful learning experience, addressing some of the most relevant and evolving areas in women's health. The important highlights of the trip included a refreshing visit to Kutni Dam with its scenic surroundings, an excursion to the

breathtaking Raneh Waterfall, and a memorable visit to the stunning temples of Khajuraho.

From learning to laughter, nature to spirituality—this “Funference” truly offered an unforgettable experience, blending knowledge, bonding, and blissful moments.



REACH CME

CME Modules	Committee Chair	VP	Nat Co-ord	Local Co-ordinator
1 Early Pregnancy	Rohan Palshetkar Archana Kumari	Abha Rani Sinha	Supriya Jaiswal	Susmita Chattopadhyay
2 Infertility	Neena Malhotra Kalpana B	Meenu Agarwal	Kundan Ingale	Mariam Khanam
3 Infection in Gynaecology	Alka Kuthe Apurba Dutta	Priti Kumar	Geetha Balsarkar	Sebanti Goswami Tulika Jha
4 Nutrition	Asha Jain Gaurav Desai	Vidya Thobbi	Ritu Khanna	
5 Endometriosis	Anu Chawla Sejal Naik	Meenu Agarwal	Ramani Devi	Priyanka Pipara
6 AUB	Kavita Barnwal Monica Umberdand	Anju Soni Meenu Agarwal	Priyankur Roy	Puja Chatterjee
7 Hysterectomy	Suman Sinha	Anju Soni	Charulata Bapaye	Mahua Bhattacharya
8 Menopause	Archana Dwivedi	Anju Soni	Rajendra Nagarkatti	Sharmistha Ganguly
9 Preterm Labour/PPROM	Bharti Rajshekhar Kavita Barnwal	Vidya Thobbi Anju Soni	Priti Vyas	Manisha Vernakar
10 PPH	Poonam Goyal Jeyarani Kamaraj	Priti Kumar	Kiranmai Devineni	Manjir Mitra
11 Managing Normal Pregnancy	Nibha Mohan	Priti Kumar	Pratibha Singh	Alpana Chhetri
12 FGR	Brajbala Tiwary Sujit Kondkar	Anju Soni	Seetha Ramamurthy Pal	Debasmita Das Choudhury
13 PCO	Chaitanya Ganapule Mala Shrivastav	Vidya Thobbi	Rakhi Singh	Sujoy Dasgupta
14 Caesarean Section	Nibha Mohan Umaiyal Murugesan	Priti Kumar	Parag Biniwale	Shabana Roze Choudhury
15 HDP	Aruna Suman	Meenu Agarwal	Girija Wagh	Soumyajit Pal
16 Emergency & Operative Obs	Rashmi Kahar	Abha Rani Sinha	Vinita Singh	Abhishek Bhadra
17 Genetics in OBGY	Sweta Kaul Jha	Vidya Thobbi	Neharika Malhotra	Ramprasad Dey
18 Anaemia	Kanchan Sharma	Vidya Thobbi	JB Sharma	Ifra Iqbal Ononna Das
19 Contraception/MTP	Priya Gupta	Anju Soni	Rajendra Singh Pardeshi	Biswajyoti Guha
20 Medical Disorders in Preg	Rekha Rajendrakumar	Abha Rani Sinha	Charmila Ayavoo	Jayita Chakrabarty
21 Rh MaC & More	Rohan Palshetkar	Abharani Sinha	Chinmayee Ratha	Seetha Ramamurthy Pal
22 Adolescent	Supriya Arwari Archana Kumari	Abha Rani Sinha	Girish Mane	Siddhartha Majumdar
23 Oncology	Saritha Samsundar	Priti Kumar	Neerja Bhatla	Dipanwita Banerjee
24 Hyperglycaemia in pregnancy	Priya Gupta Suman Sinha	Anju Soni	Vaishali Chavan	Ritwik Ghosh Halder
25 Induction of Labour	Brajbala Tiwari	Anju Soni	Archana Baser	Shabana Roze Choudhury
26 Stillbirth	Jyoti Bunglowala	Abha Rani Sinha	Sampathkumari	Seetha Ramamurthy Pal

REACH CME

REACH CME *Module: Catch Them Young (Adolescent Health)*

Date	Place	No of Attendees	National Faculty
22/02/26	Raipur	49	Dipika Loganey, Veronica Yuel
07/03/26	Indore	76	Supriya Arwari, Girish Mane
22/03/26	Calicut	41	Umaiya Murugesan, Durgadas Asranna



Raipur



Indore



Calicut

REACH CME *Module: Pale to Pink (Anaemia)*

Date	Place	No of Attendees	National Faculty
21/02/26	Purnea	25	Priyankur Roy, Mahua Bhattacharya
08/03/26	Cochin	60	Jayam Kannan, Shameema Anwar
14/03/26	Jabalpur	49	Deepti Gupta, Mudita Jain



Purnea



Cochin



Jabalpur

REACH CME *Module: Healthy Mother Healthy Baby (Managing Normal Pregnancy)*

Date	Place	No of Attendees	National Faculty
10/04/26	Erode	54	Sasithara Damodaran, Madhumitha Arunkarthik



Erode

REACH CME

Module: *The unspoken Flow — Conquering AUB*

Date	Place	No of Attendees	National Faculty
01/03/26	Ahmedabad	52	Anita Soni, Jayesh Patel
10/03/26	Lucknow	102	Sonia Naik, Basab Mukherjee
11/03/26	Hyderabad	150	Basab Mukherjee, P Balamba
31/03/26	Kolkata	110	Sampathkumari, Sailakshmi Dayaani
03/04/26	Agra	45	Suyesha Khanijao, Richa Singh
04/04/26	Nagercoil	40	Gayathri Siva Ramakrishnan
08/04/26	Khordha	59	Jaishree Gajraj, Hara Pttanaik
09/04/26	Ludhiana	122	Vidhu Modgil, Ginny Gupta
12/04/26	Vapi	35	Priti Vyas, Sejal Naik



Ahmedabad



Lucknow



Hyderabad



Hyderabad



Kolkata



Agra



Agra



Nagercoil



Khordha



Ludhiana



Vapi

REACH CME *Module: Cesarean Section — The right Way*

Date	Place	No of Attendees	National Faculty
14/02/26	Guwahati	52	Indira Palo, Ashish Kumar Mukhopadhyay
20/02/26	Bangalore	100	Kiranmai Gottapu, Uma Devi



Guwahati



Bangalore

REACH CME *Module: The Responsible Choice (Contraception / MTP)*

Date	Place	No of Attendees	National Faculty
15/03/26	Jaipur	129	Anju Soni, Sonal Kotdawala
22/03/26	Bangalore	76	Gayathri Kamath, Shobha Gudi
26/03/26	Dibrugarh	42	Pratibha Singh, D K Neog
27/03/26	Mangalore	65	Mala Raj
29/03/26	Cochin	82	Sunita Singal, Pradip Kumar Chakraborty
08/04/26	Gurgaon	65	Alka Kriplani, Priya Gupta



Jaipur



Bangalore



Dibrugarh



Mangalore



Cochin



Gurgaon

REACH CME *Module: Decoding Early Challenges (Early Pregnancy Problems)*

Date	Place	No of Attendees	National Faculty
20/02/26	Alwar	35	Ritu Joshi, Mala Srivastav
21/02/26	Gorakhpur	31	Uma Pandey, Reena Srivastava
14/03/26	Mirzapur	24	Ritu Khanna, Shashwati Sen
21/03/26	Burla	43	Ojaswini Patel, Monu Pattanaik
26/03/26	Tamluk	46	Narahari Agasti, Poushali Sanyal
05/04/26	Darbhangha	25	Meena Samant, Monika Anant



Alwar



Gorakhpur



Mirzapur



Burla



Tamluk



Darbhangha

REACH CME *Module: Beneath the Surface: Endometriosis Unveiled*

Date	Place	No of Attendees	National Faculty
21/03/26	Hyderabad	85	Asha Rao, Manjula Anagani, Shraddha Ramchandani
28/03/26	Mysore	73	Mahesh Koregal, T Ramani Devi



Hyderabad



Mysore

REACH CME *Module: Rush Hour Obstetrics (Emergency & Operative Obstetrics)*

Date	Place	No of Attendees	National Faculty
08/03/26	Kurnool	79	Anju Soni, V. Radha Lakshmi
20/03/26	Davangere	74	Rekha Rajendra Kumar, Deepa Thangamani
22/03/26	Ranchi	70	Archana Kumari, Moushami Das Ghosh
29/03/26	Surat	105	Datta Panandikar, Vipul Kapadia



Kurnool



Surat



Davangere



Ranchi

REACH CME *Module: Blueprint of Life (Genetics in Obstetrics and Gynaecology)*

Date	Place	No of Attendees	National Faculty
20/02/26	Cuttack	60	Seetha Ramamurthy Pal, Priti Dubey
22/02/26	Siliguri	43	Chinmayee Ratha, Dipanjana Dutta
14/03/26	Shillong	20	Prasanna Roy, Sweta Das
12/04/26	Bareilly	37	Vibha Jain, Neha Gupta



Siliguri



Shillong



Bareilly



Cuttack

REACH CME

Module: Small Baby Big Concern (FGR)

Date	Place	No of Attendees	National Faculty
15/02/26	Rajkot	30	Sujit Kondakar, Madan Kamble
22/02/26	Vizag	78	Apurba Kumar Dutta, K. V. Sridevi
22/02/26	Bhilai	53	Asha Jain, Vinita Singh
28/02/26	Jalandhar	41	Alok Sharma, Sheeba Marwah
08/03/26	Dhanbad	36	Nivedita Dutta, Apurba Kumar Dutta
08/03/26	Baroda	70	Darshan Wadekar, Upma Saxena
13/03/26	Nizamabad	48	Phani Jyotsna, Sampath Kumari



Rajkot



Bhilai



Jalandhar



Dhanbad



Baroda



Nizamabad



Vizag

REACH CME

Module: PCOS Unplugged

Date	Place	No of Attendees	National Faculty
20/03/26	Gulbarga	70	Vidya Thobi, Kasturi Donimath



Gulbarga

REACH CME *Module: The Grand Exit (Hysterectomy)*

Date	Place	No of Attendees	National Faculty
01/03/26	Pune	130	Hemant Deshpande, Girija Wagh
08/03/26	Berhampur	46	Narhari Agasti, Manoranjan Mahapatra
12/04/26	Durgapur	50	Priyanka Pipara, Tanuka Das Gupta



Pune



Berhampur



Durgapur

REACH CME *Module: No Pause at Menopause*

Date	Place	No of Attendees	National Faculty
15/02/26	Calicut	50	Madhumitha Arun Karthik, Rejeesh S Ravi
01/03/26	Nashik	40	Aditi Rathore, Anil Sakhare
08/03/26	Nagpur	20	Kavita Kamble, Kalpana Gulwade



Calicut



Nashik



Nagpur

REACH CME *Module: When Medicine Meets Motherhood (Medical Disorders in Pregnancy)*

Date	Place	No of Attendees	National Faculty
04/04/26	Aurangabad	52	Rajendra Singh Pardesi, Sujit Khondkar
05/04/26	Valsad	34	Darshan Wadekar, Jagruti Desai
10/04/26	Palakkad	38	Neeta George, Chandrakala Maran



Aurangabad



Valsad



Palakkad

REACH CME *Module: The Bittersweet (Hyperglycaemia in Pregnancy)*

Date	Place	No of Attendees	National Faculty
20/02/26	Trichy	75	Saravana Kumar, Charmila Ayyavoo
28/02/26	Ahilyanagar	49	Renuka Pathak, Girija Wagh
13/02/26	Faridabad	35	Pikee Saxena, Basab Mukherjee
13/02/26	Gurgaon	45	Pikee Saxena, Basab Mukherjee



Ahilyanagar



Faridabad



Gurgaon



Trichy

REACH CME *Module: Reproductive Dysbiosis (Infections in Gynaecology)*

Date	Place	No of Attendees	National Faculty
06/03/26	Karimnagar	54	Lakshmi Garude, Sravanthi
27/03/26	Trichy	75	T Ramani Devi, Asha Rao
11/04/26	Medinipur	30	Biswajyoti Guha, Queen Aditya



Karimnagar



Trichy



Medinipur

REACH CME *Module: Nourish to Empower (Nutrition)*

Date	Place	No of Attendees	National Faculty
07/03/26	Agartala	35	Prerna Keshan, Ram Prasad Dey
28/03/26	Jhansi	53	Roza Olyai, Sultana Khan



Agartala



Jhansi

REACH CME *Module: Born Too Soon (Preterm Labour/PPROM)*

Date	Place	No of Attendees	National Faculty
31/03/26	Madurai	81	Priya Kanappan, P. Jyothi Sundaram
12/04/26	Gwalior	55	Roza Olyai, Alka Sethi



Madurai



Gwalior

REACH CME *Module: Every Drop Counts (PPH)*

Date	Place	No of Attendees	National Faculty
07/02/26	Puducherry	95	Meera Raghvan, Priya Kannappan
18/03/26	Kolhapur	44	M.B. Bellad, Aruna Suman



Puducherry



Kolhapur

REACH CME *Module: Rh MaC and More*

Date	Place	No of Attendees	National Faculty
14/03/26	Guntur	40	V Padmaja, Jaya Chawla
15/03/26	Vijayawada	32	V Padmaja, Jaya Chawla
22/03/26	Kakinada	156	Sushila Pinnamaneni, Umashankar S
28/03/26	Bilaspur	65	Rashmi Sharma, Preeti Tomar
28/03/26	Kanpur	85	Seema Mehrotra, Yuthika Bajpai



Guntur



Kakinada



Bilaspur



Kanpur



Vijayawada

REACH CME *Module: Stillbirth — When Silence Speaks*

Date	Place	No of Attendees	National Faculty
04/04/26	Ajmer	53	Priya Gupta, Sampathkumari
11/04/26	Beed	45	Madan Kamble, Milind Shah
13/04/26	Sitamarhi	35	Alka Pandey, Sunita Singhal



Sitamarhi



Ajmer



Beed

REACH CME *Module: Unlocking Subfertility*

Date	Place	No of Attendees	National Faculty
14/02/26	Ujjain	33	Shweta Kaul Jha, Brajbala Tiwari
15/02/26	Patna	50	B Kalpana, Pragya Mishra
17/02/26	Ambala	65	Vidhu Modgil, Jyoti Bunglowala
08/03/26	Jamshedpur	65	Suman Sinha, Suparna Banerjee
14/03/26	Coimbatore	100	Jeyarani Kamaraj, Kunjumoideen
25/03/26	Bhubaneswar	21	Sujata Kar, Ritu Santwani
27/03/26	Satara	81	Nalini Bagule, Kedar Ganla
28/03/26	Asansol	36	Mariam Khanam, Koushiki Roy Sarkar
10/04/26	Amravati	60	Basab Mukherjee, Rohan Palshetkar



Ujjain



Patna



Ambala



Jamshedpur



Coimbatore



Bhubaneswar



Satara



Asansol



Amravati

FORCE

The FORCE 2026 series was successfully conducted across multiple centers this year under the able guidance of FOGSI President, Dr. Bhaskar Pal, with Dr. Ashis Kumar Mukhopadhyay serving as the National Convenor. This initiative continues to provide a dynamic and inclusive academic platform where postgraduate students from

diverse institutions and backgrounds can engage in meaningful learning and interact freely with experienced faculty. Overall, FORCE 2026 has continued to uphold its objective of strengthening postgraduate education through collaborative learning, expert guidance, and interactive teaching methodologies.

	Date	Place	No of Attendees	National Faculty
FORCE 1	23-24 March	SCB Medical College, Cuttack	100	Ashis Mukhopadhyay Kasturi Dominath
FORCE 2	1-2 April	GSVM Medical College, Kanpur	150	Ashis Mukhopadhyay Hafizur Rahaman
FORCE 3	7-8 April	JIPMER, Puducherry	145	Ashis Mukhopadhyay Arup Kumar Mahji



POISE

The POISE (Preventive Obstetrics through Imaging Skill Enhancement) Workshop, with hands-on simulator training in ultrasound, continues to gain momentum under the inspiring leadership of Dr. Neena Malhotra, Chair of the Imaging Science Committee, FOGSI, along with Dr. K Aparna Sharma.

The first POISE workshop of 2026 was conducted on 31st January at AIIMS New Delhi, followed by the second on 14th March at AIIMS Jodhpur. These workshops have been instrumental in enhancing practical imaging skills among participants, reinforcing the importance of structured, hands-on learning in advancing preventive obstetric care.



EAGLE

FOGSI, in collaboration with IAGE, continues its one-day Sensitization and Simulation Training Programme for skill building in Gynaecological Endoscopy under the EAGLE Project (Every Aspiring Gynaecologist Should Learn Endoscopy). The programme is conducted under the able guidance of Dr. Bhaskar Pal, President of FOGSI; Dr. Kalyan Barmade, Past President of IAGE; and Dr. Sudha Tandon, President of IAGE.

The initiative is further strengthened by the support of Dr. Meenu Agarwal, Vice President, and Dr. Subhash Mallya, National Coordinator. Special appreciation goes to Dr. Sejal Naik, Chair of the Endoscopy Committee FOGSI, for her untiring efforts in taking this training programme to every corner of India.

EAGLE No	Month wise No	Date of Project	Medical College, City	State	Zone	No of Surgeries	No of Participants
1	Jan-01	21/01/26	Malla Reddy Institute of Medical Sciences, Suraram, MRVV	Telangana	South	4	55
2	2	28/01/26	Kanyakumari Medical Mission College	Tamil Nadu	South	6	50
3	3	30/01/26	Bharti Vidyapeeth Medical College, Sangli	Maharashtra	West	6	68
4	Feb-01	21/02/26	Bharat Ratna Late Shri Atal Bihari Vajpayee Memorial Medical College, Rajnandgaon C.G. (BRLSABVMC)	Chattisgarh	North	5	40
5	2	25/02/26	Govt Medical College, Surat	Gujarat	West	7	130
6	Mar-01	07/03/26	JNMMC Raipur	Chattisgarh	North	7	80
7	2	14/03/26	Theni Medical College, Theni	Tamil Nadu	South	5	80
8	3	15/03/26	Government Medical College, Miraj	Maharashtra	West	10	398
9	4	17/03/26	Shri Shankaracharya Institute of Medical Sciences, Bhilai (SSIMS)	Chattisgarh	North	7	50
10	5	28/03/26	Dayanand Medical College, Ludhiana	Punjab	North	4	35
11	Apr-01	09/04/26	Gwalior Medical College	Madhya Pradesh	Central	Scheduled	
12	2	20/04/26	Dr RPGMC, Tanda, Kangra	Himachal Pradesh	North	Scheduled	
13	3	21/04/26	GSS Medical College, Faridkot	Punjab	North	Scheduled	
TOTAL						61	986



Observing Days, Weeks & Months

FOGSI marked World Cancer Day on Feb 4, with impactful quizzes, awareness webinars, and CME sessions, led by Dr. Saritha Samsundar, Dr. Nibha Mohan, and Dr. Archana Kumari—driving awareness and action in cancer prevention and care.

On the occasion of World Obesity Day, 4th March, FOGSI marked the day by hosting a public awareness webinar aimed at educating and empowering women about obesity and its health implications.

The program saw active participation from Dr. Chaitanya Ganapule, Chair of the Endocrinology Committee, Dr. Monica Umbardand, Chair of the Public Awareness Committee, and Dr. Kanchan Sharma, Chair of the NCD Committee, FOGSI along with their active members.

FOGSI celebrated International Women's Day on 8th March through webinars highlighting the journeys and achievements of inspiring women champions. This interactive session featured accomplished women from diverse fields, who shared their experiences, challenges, and successes, motivating others to strive for excellence and leadership. Committee Chairpersons of FOGSI organised multiple public awareness programmes for upliftment of women's health. Dr Bhaskar Pal, President FOGSI inaugurated the Full Stop Campaign at Salem organised by Dr Jeyarani Kamaraj, Chair No to VAW Committee of FOGSI.

On 21st March, World Down Syndrome Day, FOGSI marked the occasion with meaningful initiatives to promote awareness and inclusion.

A public awareness webinar was conducted with active participation from Dr. Sujit Kondkar, Chair, Fetal Medicine & Genetics Committee FOGSI, and Dr. Monica Umbardand, Chair, Public Awareness Committee FOGSI, who shared valuable insights on early diagnosis, management, and social inclusion of individuals with Down syndrome.

Across the country, various FOGSI societies enthusiastically contributed by organizing CMEs, awareness walkathons, and cultural programmes. A particularly heartwarming highlight was the participation of special children along with their parents, celebrating their abilities, talents, and spirit.

On Safe Motherhood Day, 11th April various societies of FOGSI did awareness sessions, antenatal care camps, high-risk pregnancy screenings, and training programs for ASHA workers, nurses, paramedics, as well as final-year medical and MD students. Additional efforts included essay writing competitions, newspaper articles, and radio talks to further spread awareness. The REEL competition also witnessed enthusiastic participation, receiving around 188 entries. These initiatives were organized under the able leadership of Dr. Poonam Goyal, Chairperson of the Safe Motherhood Committee, FOGSI.

During Endometriosis Awareness Month in March, FOGSI took meaningful steps to spread awareness through webinars, CMEs, and a walkathon—encouraging education, early diagnosis, and better care for women affected by endometriosis.



Days to Observe

DATE	DAY	EVENTS
8th May 2026	Friday	World Thalassemia Day
28th May 2026	Thursday	World Menstrual Hygiene Day
5th June 2026	Friday	World Environment Day
14th June 2026	Sunday	World Blood Donor Day
1st July 2026	Wednesday	Doctor's Day
11th July 2026	Saturday	World Population Day
9th August 2026	Sunday	Abhaya Day
12th August 2026	Wednesday	International Youth Day
4th September 2026	Friday	Sexual Health Day
5th September 2026	Saturday	Teachers Day
10th September 2026	Thursday	World Suicide Prevention Day
17th September 2026	Thursday	World Patient Safety Day
5th October 2026	Monday	PPH Day
11th October 2026	Sunday	International Day of the Girl Child
18th October 2026	Sunday	International Menopause Day
17th November 2026	Tuesday	World Prematurity Day
1st Dec 2026	Tuesday	AIDS Day

Weeks to Observe

DATES	EVENTS
24th-30th April 2026	World Immunisation Week
1st-8th August 2026	World Breastfeeding Week
1st-7th September 2026	Nutrition Week
25th Nov-10th Dec 2026	International Fortnight for VAW

Months to Observe

MONTHS	EVENTS
September 2026	Polycystic Ovary Syndrome Month
October 2026	National Breast Cancer Awareness Month



The images are for representation purpose only.

Help her *Embrace every stage* of change.

In hypothyroidism treatment,¹

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75 YEARS² OF
BEING YOUR CONSTANT IN HER
Change

Thyroxine Sodium 12.5/25/37.5/50/75/88/100/125 mcg

PATIENT-SPECIFIC DOSING RANGE



References: 1. Eltroxin tablets Prescribing Information Version: ELT/PI/IN/2026/01 Revised on 02-Jan-2026 2. GSK, data on file (REF-218475)

Key safety information for Eltroxin¹

Contraindications: Eltroxin tablet is contraindicated in hypersensitivity to any of the component; untreated hyperthyroidism, untreated subclinical/overt thyrotoxicosis, untreated adrenal/pituitary insufficiency, acute myocardial infarction /myocarditis / pancarditis. During pregnancy, concomitant intake of Eltroxin and an antithyroid agent is contraindicated. **Special warnings and precautions for use:** Thyroid hormones must not be given for weight reduction. When switching from another levothyroxine product to this product, the values of TSH and T4 should be measured after four to six weeks. Before starting thyroid hormone therapy, the following diseases or conditions must be excluded or treated; coronary heart disease, angina pectoris, hypertension, pituitary and/or adrenocortical insufficiency, thyroid autonomy. In thyroid hormone therapy, more frequent monitoring of thyroid hormone parameters must be performed. **Undesirable effects:** (Rare $\geq 1/10000$ to $<1/1000$); Benign intracranial hypertension in children.

Abbreviated Prescribing Information of ELTROXIN (12.5 mcg / 25 mcg / 37.5 mcg / 50 mcg / 75 mcg / 88 mcg / 100 mcg / 125 mcg) TABLETS (Thyroxine Sodium Tablets LP)

ACTIVE INGREDIENTS: Each uncoated tablet contains Thyroxine Sodium LP: 12.5 mcg/ 25mcg/37.5 mcg/ 50mcg/75mcg/88mcg/100mcg/125mcg

THERAPEUTIC INDICATIONS: Each uncoated tablet contains Thyroxine Sodium LP: 12.5 mcg/ 25mcg/37.5 mcg/ 50mcg/75mcg/88mcg/100mcg/125mcg. **THERAPEUTIC INDICATIONS:** Hypothyroidism POSOLOGY AND METHOD OF ADMINISTRATION: Total daily dose should be taken orally in the morning on empty stomach at least half an hour before breakfast. Tablets should be swallowed whole with some liquid. Due to lack of data, it is not appropriate to crush ELTROXIN tablets. Dosing information serves as a guideline. Individual daily dose should be determined by laboratory diagnostic tests and clinical examinations. If any residual thyroid function remains, a lower replacement dose may be sufficient. In elderly patients, patients with coronary heart disease and patients with severe or chronic hypothyroidism, thyroid hormone treatment must be initiated with particular caution, i.e. by selecting a low initial dose and increasing it slowly and at longer intervals, with frequent thyroid hormone monitoring. Experience has shown that a lower dose is also sufficient in patients with a low body weight and in patients with large goitres. As T4 (thyroxine) or T4 (free thyroxine) levels may be increased in some patients, determination of serum TSH concentrations is better suited for monitoring treatment regimen. Adults: 25-50 mcg/day initially, followed by 100-200 mcg/day (increased at 2 to 4 week intervals in increments of 25-50 mcg). Children: Use in neonates, children under 2 years and other children who are not able to swallow tablet cannot be recommended because of lack of data on crushed ELTROXIN tablets. National treatment guidelines should be followed and largest dose consistent with freedom from toxic effects should be given. Elderly: In individual cases, a g.i. in the presence of cardiac problems, slow up titration of the levothyroxine sodium dose is recommended, together with regular monitoring of the TSH level. Renal/hepatic impairment: No relevant data available. **CONTRAINDICATIONS:** Hypersensitivity to any component, untreated hyperthyroidism, untreated subclinical/overt thyrotoxicosis, untreated adrenal/pituitary insufficiency, acute myocardial infarction/myocarditis/pancarditis. During pregnancy, concomitant intake with antithyroid agents is contraindicated. **SPECIAL WARNINGS AND PRECAUTIONS FOR USE:** Thyroid hormones must not be given for weight reduction. When switching from another levothyroxine product to this product, values of TSH and T4 should be measured after 4-6 weeks, and dose should be adjusted according to patient's clinical response and laboratory values. Caution is required to maintain thyroid balance in women who are pregnant or are planning conception, hypothyroidism, congenital or acquired in childhood, suppressive therapy in patients with previous thyroid cancer, especially if frail or elderly, patients with central hypothyroidism, patients with cardiac symptoms, or diabetes mellitus or insipidus. Before starting thyroid hormone therapy, exclude or treat coronary heart disease, angina pectoris, hypertension, pituitary and/or adrenocortical insufficiency, thyroid autonomy. Even relatively mild, medicinal product induced hyperthyroid function must be strictly avoided in cases of coronary heart disease, heart failure, tachyarrhythmias, chronic hypothyroidism or in patients with a history of myocardial infarction. In secondary hypothyroidism or panhypopituitarism, it must be established whether adrenocortical insufficiency is also present. If thyroid autonomy is suspected, it is recommended that a TRH (thyrotropin-releasing hormone) test or suppression scintigram be performed. When administering levothyroxine therapy to postmenopausal women, who are at increased risk of osteoporosis, monitor thyroid function more frequently to avoid supra-physiological blood levels of levothyroxine and the dosage of thyroxine should be titrated to the lowest possible level. Monitor haemodynamic parameters while initiating therapy in very low birth weight preterm neonates as circulatory collapse may occur due to immature adrenal function. Care is required when levothyroxine is administered to patients with known history of epilepsy. Patients with myoclonic have an increased sensitivity to thyroid hormones; in these patients the starting dose should be low with slow dosing increments. Levothyroxine sodium absorption is decreased in patients with malabsorption syndromes. It is advised to treat the malabsorption condition to ensure effective levothyroxine treatment with regular levothyroxine dose. Biotin may interfere with thyroid immunoassays that are based on a biotin/streptavidin interaction, leading to either falsely decreased or falsely increased test results. **UNDESIRABLE EFFECTS:** Clinical trial data: No relevant data. Post-marketing data - Rare ($\geq 1/10000$ to $<1/1000$): benign intracranial hypertension in children. Frequency not known: anaphylactic reaction, hypersensitivity reactions including rash, pruritus and oedema, hyperthyroidism, increased appetite, osteoporosis at suppressive doses of levothyroxine, especially in postmenopausal women, mainly when treated for a long period, agitation, insomnia, restlessness, tremor, convulsion, headache, angina pectoris, arrhythmia, palpitations, tachycardia, heart failure, myocardial infarction, flushing, hypertension, dyspnoea abdominal pain, nausea, diarrhoea, vomiting, ataxia in children, hyperhidrosis, allergic reactions such as skin erythema, muscle spasms, muscular weakness, premature closure of epiphysis in children, irregular menstruation, craniosinosis in infants, pyrexia, temperature intolerance in children, decreased weight.

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India Day

Saturday | July 4, 2026 | 10:30 - 6:00 PM
Kensington Convention Centre, London
Organised by: FOGSI-RCOG-AICC RCOG

Ticket Price:

**INR 19000 / 155 GBP – Includes Scientific Sessions,
Lunch, Cultural Program & Dinner**

INR 10500 / 90 GBP – Cultural Program & Dinner Only

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Card Only)



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Weigh the transformation with,
ONCE-WEEKLY
POVIZTRA®
 semaglutide injection **2.4 mg**

An **innovator semaglutide** for patients with obesity or who are overweight

Transformative weight loss

≥20%

weight loss achieved by 1 in 3 patients*1

Proven to reduce CV events

20%

risk reduction in CV death heart attack, and stroke*2



The photographs are only for illustrative purposes.

*40.6% of patients achieved 20% weight loss. Mean Baseline bodyweight 102.5 ± 25.3 in STEP 8 for Poviztra® patients. †MACE hazard ratio, 0.80; 95% CI, 0.72 to 0.90. CV, cardiovascular.

References: 1. Rubino D, et al. JAMA. 2022;327:138-150. 2. Lincoff M, et al. N Engl J Med. 2023;389(24):2221-2232.

Generic Name: Semaglutide Injection (0.25 mg/0.5 mg/1.7 mg/2.4 mg), solution for injection (r-DNA Origin) in pre-filled pen
Brand Name: Poviztra® FlexTouch™
Presentation: Poviztra® FlexTouch™ is available in 0.25 mg, 0.5 mg, 1.0 mg, 1.7 mg and 2.4 mg. **Indication: Weight Management:** Semaglutide Injection (Poviztra®) is indicated as an adjunct to a reduced calorie diet and increased physical activity for chronic weight management in adults with an initial body mass index (BMI) of 30 kg/m² or greater (obesity) or 27 kg/m² or greater (overweight) in the presence of at least one weight-related comorbid condition (e.g., hypertension, type 2 diabetes mellitus, or dyslipidemia). Limitations of Use: Poviztra® should not be co-administered with other semaglutide containing products or with any other GLP-1 receptor agonist. The safety and effectiveness of semaglutide in combination with other products intended for weight loss, including prescription drugs, over-the-counter drugs, and herbal preparations, have not been established. Poviztra® has not been studied in patients with a history of pancreatitis. **Established cardiovascular disease:** Semaglutide Injection (Poviztra®) is indicated to reduce the risk of major adverse cardiovascular events (cardiovascular death, non-fatal myocardial infarction, or non-fatal stroke) in patients with established cardiovascular disease and either obesity or overweight. **Description:** Poviztra® is a clear and colourless solution for injection in pre-filled disposable pen. **Dosing and administration:** The maintenance dose of semaglutide 2.4 mg once-weekly is reached by starting with a dose of 0.25 mg. To reduce the likelihood of gastrointestinal symptoms, the dose should be escalated over a 16-week period to a maintenance dose of 2.4 mg once weekly. In case of significant gastrointestinal events (cardiovascular death, non-fatal myocardial infarction, or non-fatal stroke) until symptoms have improved. **Method of administration:** Subcutaneous use. Poviztra® is administered once weekly at any time of the day, with or without meals. It is to be injected subcutaneously in the abdomen, in the thigh or in the upper arm. The injection site can be changed. It should not be administered intravenously or intramuscularly. The day of weekly administration can be changed, if necessary, as long as the time between two doses is at least 3 days (72 hours). After selecting a new dosing day, once-weekly dosing should be continued. Patients should be advised to read the instruction for use included in the package leaflet carefully before administering Poviztra®. **Special Population:** No dose adjustment is required based on age. Therapeutic experience in patients ≥85 years of age is limited. No dose adjustment is required for patients with mild or moderate renal impairment. Experience with the use of semaglutide in patients with severe renal impairment is limited. Semaglutide is not recommended for use in patients with severe renal impairment (eGFR <30 mL/min/1.73m²) including patients with end-stage renal disease. No dose adjustment is required for patients with mild or moderate hepatic impairment. Experience with the use of semaglutide in patients with severe hepatic impairment is limited. Semaglutide is not recommended for use in patients with severe hepatic impairment and should be used cautiously in patients with mild or moderate hepatic impairment. The safety and efficacy of semaglutide in children below 12 years of age have not been established. **Contraindications:** Hypersensitivity to the active substance or to any of the excipients. **Special warnings and precautions:** In order to improve the traceability of biological medicinal products, the name and the batch number of the administered product should be clearly recorded. Patients should be advised of the potential risk of dehydration in relation to gastrointestinal side effects and take precautions to avoid fluid depletion. Acute pancreatitis has been observed with the use of GLP-1 receptor agonists. Patients should be informed of the characteristic symptoms of acute pancreatitis. If pancreatitis is suspected, semaglutide should be discontinued, if confirmed, semaglutide should not be restarted. Caution should be exercised in patients with a history of pancreatitis. In the absence of other signs and symptoms of acute pancreatitis, elevations in pancreatic enzymes alone are not predictive of acute pancreatitis. Semaglutide should not be used as a substitute for insulin in patients with type 2 diabetes. Semaglutide should not be used in combination with other GLP-1 receptor agonist products. It has not been evaluated and an increased risk of adverse reactions related to overdose is considered likely. Patients treated with semaglutide in combination with a sulfonylurea or insulin may have an increased risk of hypoglycaemia. The risk of hypoglycaemia can be lowered by reducing the dose of sulfonylurea or insulin when initiating treatment with a GLP-1 receptor agonist. The addition of Poviztra® in patients treated with insulin has not been evaluated. In patients with diabetic retinopathy treated with semaglutide, an increased risk of developing diabetic retinopathy complications has been observed. Rapid improvement in glucose control has been associated with a temporary worsening of diabetic retinopathy, but other mechanisms cannot be excluded. Patients with diabetic retinopathy using semaglutide should be monitored closely and treated according to clinical guidelines. There is no experience with Poviztra® in patients with type 2 diabetes with uncontrolled or potentially unstable diabetic retinopathy. In these patients, treatment with Poviztra® is not recommended. **Use in special populations (Fertility, pregnancy and lactation):** Women of childbearing potential are recommended to use contraception when treated with semaglutide. There are limited data from the use of semaglutide in pregnant women. Therefore, semaglutide should not be used during pregnancy. If a patient wishes to become pregnant, or pregnancy occurs, semaglutide should be discontinued. Semaglutide should be discontinued at least 2 months before a planned pregnancy due to the long half-life. Semaglutide should not be used during breast-feeding. The effect of semaglutide on fertility in humans is unknown. **Drug Interaction:** Semaglutide delays gastric emptying and could potentially influence the absorption of concomitantly administered oral medicinal products. No clinically relevant effect on the rate of gastric emptying was observed with semaglutide 2.4 mg, probably due to a tolerance effect. Semaglutide should be used with caution in patients receiving oral medicinal products that require rapid gastrointestinal absorption. Paracetamol: Semaglutide delays the rate of gastric emptying as assessed by paracetamol pharmacokinetics during a standardised meal test. No clinically relevant effect on paracetamol was observed with semaglutide. No dose adjustment of paracetamol is necessary when administered with semaglutide. Oral contraceptives: Semaglutide is not anticipated to decrease the effectiveness of oral contraceptives as semaglutide did not change the overall exposure of ethinylestradiol and levonorgestrel to a clinically relevant degree, when an oral contraceptive combination medicinal product (0.02 mg ethinylestradiol/0.015 mg levonorgestrel) was co-administered with semaglutide. Atorvastatin: Semaglutide did not change the overall exposure of atorvastatin following a single dose administration (40 mg). Atorvastatin C_{max} was decreased by 38%. This was assessed not to be clinically relevant. Digoxin: Semaglutide did not change the overall exposure or C_{max} of digoxin following a single dose of digoxin (0.5 mg). Metformin: Semaglutide did not change the overall exposure or C_{max} of metformin following dosing of 500 mg twice daily over 2.5 days. Warfarin & other coumarin derivatives: Semaglutide did not change overall exposure or C_{max} of warfarin following a single dose of warfarin (25 mg), and the pharmacodynamic effects of warfarin as measured by the international normalised ratio (INR) were not affected in a clinically relevant manner. However, cases of decreased INR have been reported during concomitant use of acenocoumarol and semaglutide. Upon initiation of semaglutide treatment in patients on warfarin or other coumarin derivatives, frequent monitoring of INR is recommended. **Undesirable Effects:** In 4 phase 3a trials, 2,650 patients were exposed to Poviztra®. The duration of the trials were 68 weeks. The most frequently reported adverse reactions were gastrointestinal disorders including nausea, diarrhoea, constipation and vomiting. In general, these reactions were mild or moderate in severity and of short duration. Other undesirable effects being delayed gastric emptying, dysgeusia, dizziness and intestinal obstruction. **Shelf Life:** Before use: 36 months. After first use: 6 weeks. Store below 30°C or in a refrigerator (2°C to 8°C). **Storage:** Keep this medicine out of the sight and reach of children. Store in a refrigerator (2°C to 8°C). Do not freeze and do not use Poviztra® if it has been frozen. After first use: Store below 30°C or in a refrigerator (2°C to 8°C). Keep the pen cap on when the pen is not in use in order to protect it from light. Always remove the injection needle after each injection and store the pen without a needle attached. **Disclaimer:** The abbreviated package insert is updated from the CDSCO approved package insert (File no.: rDNA-150112/27/2023-office (e-office no. 28957) dated 30 Oct 2023). Poviztra® FlexTouch™, Novofine™ and Apis bull logo is a registered trademark owned by Novo Nordisk A/S and registered in Denmark. Imported by: Novo Nordisk India Private Limited, Bangalore. Marketed by: EMCURE PHARMACEUTICALS LTD, 255/2, Hinjawadi, Pune - 411 057, India. *For full prescribing information, please contact +91-80-03032000 or write to us at INAgree@novonordisk.com or reach us at Novo Nordisk India Pvt Ltd, NXT Tower-2, Floor 1&2, Embassy Manyata Business Park, Nagavara Village, Kasaba Hobli, Bangalore - 560 045, India.

Note: For detailed information on this product, please refer to full package insert*.
 This material is developed by: Novo Nordisk India, Private Limited,
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For the use of HCPs or medical practitioners only.
 The photographs are only for illustrative purposes.



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 For any medical query, please write to us on emquest@emcure.com
 To report any adverse event or product complaint, please write to Safety.IN@emcure.com
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Calendar Events Ahead

<i>May 2026</i>		
8–10 May 2026	VP Conference	Indore
<i>June 2026</i>		
7th June 2026	Infections in Gynae Consensus	Gandhinagar
13–14 June 2026	Sexual Medicine / Cosmetic Conclave	Guwahati
19–21 June 2026	WZ with YUVA	Amravati
27–28 June 2026	HIP / Obesity Consensus Meeting	Pondicherry
<i>July 2026</i>		
4th July 2026	India Day	London
11–12 July 2026	Critical Care Conclave	Trichy
18–19 July 2026	Stillbirth Conclave	Patna
26th July 2026	Environment/Nutrition Consensus	Faridabad
<i>August 2026</i>		
1–2 August 2026	Fetal Medicine Conclave	Cochin
7–9 August 2026	Collaborative Conference	Hyderabad
9th August 2026	Abhaya Day	
22–23 August 2026	ICOG	Bengaluru
29–30 August 2026	Preventive Oncology Conclave	Aligarh
<i>September 2026</i>		
4–6 September 2026	SZ with YUVA	Rajahmundry
12–13 September 2026	Urogyn/Vag Surg Conclave	Ranchi
19–20 September 2026	Fertility Regulation Conclave	Jaipur
26–27 September 2026	Collaborative Conference	Mumbai
26–27 September 2026	MCM	Mumbai
<i>October 2026</i>		
2–4 October 2026	NZ with YUVA	Jammu
23–25 October 2026	RCOG Annual	Mumbai
October 31 – Novmber 1 2026	Endoscopy PVR	Nagpur
<i>November 2026</i>		
12–15 November 2026	Presidential Conference	Kolkata
28–29 November 2026	Research Summit	Belgaum
<i>December 2026</i>		
5–6 December 2026	Endo ART Conclave	Pune
<i>January 2027</i>		
6–10 January 2027	AICOG	Surat