



# NEWSLETTER

APRIL 1987

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## Editorial

Dear Friends,

The sweet memories of XVI I. A. C. Conference at Pondicherry are still lingering in our mind as we are getting geared up for this year's conference. The XVII I.A.C. Conference is at Bangalore, the Garden city of India, on 31st Oct. and 1st Nov. 1987, with Pre-Conference workshop on 30th Oct. 1987. You must have received the brochure from Organising Secretary Dr. R. N. Visweswara Don't forget to send your abstracts before 15th August 1987.

Yes, there has been a change in the present issue. Using art paper for cover and back page, gave me the opportunity to give the Newsletter a better get up and good quality photograph reproduction. Utilization of first page has provided more space inside for other matter. In addition to 'Invited article' and 'Spot the diagnosis' we have in this issue, 'Rules and regulations' of Indian Academy of Cytologists, printed for the benefit of new members to know their association better.

Sincerely yours,  
**Dr. Prakash V. Patil.**

Edited & Published Bi-Yearly for : Indian Academy of Cytologists.

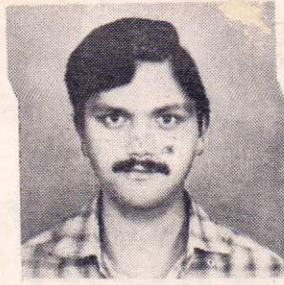
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## Winner of Nalinibai Thakkar Award, 1986



**Dr. K. N. Naresh.**

Completed M. B. B. S. in 1981 and D. C. P. in 1985 from Mysore Medical College, Mysore.

Presently doing M. D. ( Pathology ) at JIPMER, Pondicherry.

Chief hobby is dramatics. Has participated with distinction in State level Drama Competitions. Has talent for public speaking and forceful presentation of ideas.

Award winning paper : " Role of Fine Needle Aspiration in the Diagonosis of Pelvic Tumours "

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## Winner of Jwaladevi Award, 1986



**Miss. Manisha M. Joshi.**

Completed B. Sc. ( Micro. ) in 1983 and D. M. L. T. in 1984 from Bombay University.

Presently doing M. Sc. by research in Applied biology at Tata Memorial Hospital, Bombay, on ' Fine Needle Aspiration Cytology of Thyroid lesions '.

Award winning Paper : " Fine Needle Aspiration Cytology of Thyroid lesions as a Pre-operative Diagnostic Aid "



## Obituary



### **Dr. SATYAWATI J. MONGA**

( 1-9-1927 — 14-12-1986 )

As the Indian Academy of Cytologists progresses in years, it faces a classical situation of happy and tragic events. If new members are added, the old and not so old members leave us. One such sad event occurred on 14th Dec. 1986, that snatched one of our most active and cherished members from our fold.

Dr. Satyawati Monga ( nee Mehta ) was born at Multan ( West Pakistan ) on September 1927. Having obtained M. B. B. S. from Lady Hardinge Medical College, New Delhi in 1954, she opted for M. D. in Pathology under the tutelage of Dr. B. K. Aikat at Gwalior.

Her workfield remained Madhya Pradesh, where she worked in Gwalior, Rewa and Indore from 1954 onwards. 1960 took her to Ohio University ( U. S. A. ) to work in Neuropathology on becoming T. C. M. Fellow. In 1971 she became Professor of Pathology and took charge of Pathology and Cytology division of the newly established Cancer Hospital at Gwalior. Cytology now became her passion. In 1977, she also became associated with Gwalior Medical College in addition to the Cancer Hospital.

From 1972 to 1983 she was an active member of our Academy. Her unmistakable head of gray was seen at all annual conferences, mingling with the old and young, offering her services to the worthy cause, encouraging the youngsters, whether they were her students or not. It was not possible to forget her, having once basked in her all embracing affections.

She promoted Cytology in the true pioneering style, encouraging aspiration cytology much before it became the fashion it is today and published over 20 papers. She presented a paper on Cytopathology of Hepatitis at the first International Conference of Pathology at Islamabad in 1981.

She served as our Executive Council Member from 1972-75 and hosted a thoroughly enjoyable annual conference at Indore in 1976. 1977 saw her deliver an Oration on 'Aspiration Cytology of Breast' at our annual conference in Calcutta and receive a gold medal. She was a member of our Accreditation Committee from its very inception. Apart from serving as a Referee/Technical expert on Cytology Research of Indian Council of Medical Research, her advice on similar matters was sought by other Universities like Delhi & Chandigarh.

She was also an active member of Indian Association of Pathologists and Microbiologists and served as an Executive Committee Member in 1982.

It was a great blow to hear of her sad and untimely demise, that left not only her family but all her students, well wishers and members of I. A. C., in India and abroad poorer in spirit and inspiration.

MAY GOD REST HER SOUL IN PEACE.

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*Photo Courtesy : Garden Silk Mills, Surat, India.*



# Highlights of XVI Annual I. A. C. Conference

**Dr Darshana Daftary**  
**Secretary, I. A. C. Bombay.**

While the rest of India was reeling under the sweltering heat of the severe October sun, our entry into Pondicherry was welcomed by the cool and cloudy weather, the vast expanse of green and the sprawling grounds of JIPMER. The ride from Madras to Pondi on the road lines by the sea, hills and trees, sold our hearts to this last bastion of the French in India.

The workshop on Thyroid Cytology was well conducted by Dr. Mohini Nayar and her colleagues. We could not have asked for a better team, though Dr. Geeta Jayaram was missed.

The address by Lieutenant Governor Tewary was a study in Sanskrit eloquence and we have had few chief guests who have taken such sincere interest in us. President Dr. Krishna Bhargava stressed the progress made by I. A. C. Dr. Robert Yule from Manchester delighted us with not one but two lectures and emphasized the changing pattern of cancer cervix and how it reflected the change in norms of society.

Dr. Snehlata Mittal's oration on 'Oropharyngeal Cytology' reflected the pains she had taken over its careful preparation.

The symposium on colposcopy showed what we can achieve with non-invasive techniques and the various participants did their best under the guidance of Dr. Usha Saraiya to reveal the full scope of this technique.

Dr. K. Naresh's forceful presentation, with the excellent contents won the Nalinibai Thakkar Award amidst stiff competition. Both papers for the Jwaladevi Awards were good and the Thyroid aspiration paper read by Miss. Manisha Joshi proved to be the better of the two contenders.

The dinner was a lively affair with Dr. Valiath's warm hospitality and charm doing wonders to everyone's spirits and appetites.

The slide seminar by Dr. Harilal was a treat of colours and cases. We were glad that it was early enough in the morning for our minds to digest the feast that lay before us.

A variety of papers presented at the Conference were of great interest. The hospitality of Dr. Vanaja Sankaran and her band of dedicated workers left little, to say.

The wonderful charm of Pondicherry with the vast expanse of blue sea and the statue of Duplex standing guard, the peaceful atmosphere at Aurobindo Ashram, the quaint streets of Pondi with French Street signs, the small but interesting Museum and experiment of Auroville will never fade from our memories. This will be one more memorable event in our lives, to preserve and cherish.

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## Cytology Activities

Colposcopy workshop was held at Cytology Clinic, A M W I, Cama and Albles Hospital, Bombay, in September 1986, organized by Dr. Usha B. Saraiya in collaboration with Bombay Obstetric and Gynecological Society.

Gynaec Cytology Workshop was conducted at B. Nanavati Hospital, Bombay in September 1986, organized by Dr. M. K. Patel, Dr. M. Mataliya and Dr. Darshana Daftary, in Collaboration with Bombay Obstetric and Gynaecological Society.

A workshop on 'F. N. A. C. of Breast' was conducted by Dr. Darshana Daftary on 4th Jan. 1987 at Surat, where Pathologists from Medical College and in practice participated.



biopsied bit is non-malignant tissue, the intercellular adhesiveness will be intact, and cell droppings from the edge of cut surface will be less. When the biopsy bit is from inflammatory lesion the cells dropping out from the bit will be moderate. If the tissue is loose like lymphnode, spleen and bone marrow, then sediment will be automatically more, unconcerned of its benignancy or malignancy.

Thus formed sediment is collected, treated, stained and studied, by adopting established procedures of cytology. This is what we called as 'Biopsy Sediment Cytology.' The sediment can be collected from the leftover formalsaline in which the biopsy is sent. Other way will be transferring biopsy bit to fresh formalsaline and original fluid is centrifuged to obtain the sediment.

**Technique :**

The leftover formalsaline is thoroughly shaken and transferred to centrifuge tubes. Extra formalsaline is added when fluid is less to make 10 ml. When fluid is plentiful, only the sediment from the bottom of the container is collected after discarding the supernatant. The fluid is centrifuged at 3,000 r.

p. m. for 5 minutes and sediment is washed twice in normal saline. Smears are prepared from the sediment of not more than 1.5 cms. in diameter, fixed in etheralcohol for 10 minutes and stained by Papanicolaou's staining method and Hematoxylin and Eosin. Air dried smears are stained by Giemsa's stain. Stained smears are examined in detail for evidence of malignancy. Criteria adopted by previous workers in cytology to identify the cells from various tissues as malignant is followed. An attempt to identify the type of neoplasm is made. Cytology reports are correlated with histopathology findings.

**Preliminary trials and their results :**

We have got very good correlation with histopathology in our preliminary study ranging from 90 to 100% accuracy. However fixative fluids in which intact lymphnodes, encapsulated tumors ovarian cysts, loops of intestine, appendix, hysterectomy and endometrial specimens sent, were not included in the study. Table 1 shows split up of samples of important lesions studied, giving correlation between sediment cytology and histopathology.

**Table I**

Type of tissue	Cases Studied	Malignancy Detected		Accuracy Percentage
		Sediment Cytology	Histopathology	
Cervix	108	49	51	96
Lymphnode	78	26	28	92.8
G. I. Tract	73	27	27	100
Breast	51	22	24	91.6
Liver	32	6	6	100
Ulcer edge	23	11	11	100
Larynx and nasopharynx	23	13	13	100
Soft tissue	19	6	6	100
Resp. Tract	17	6	6	100
Bone	15	5	5	100

**What are the advantages of this procedure when biopsy of the lesion is done ?**

Firstly it can be said that by 'Biopsy sediment cytology', some lesions can definitely be diagnosed as malignant or non-malignant. Secondly by this cytology procedure one can diagnose the lesion in less than 3 hours on receiving the sample, where as biopsy report will be ready by 3 days or more. Cytology report can be still quicker if one trains his

eye for toluidine blue wet preparations. Thirdly this procedure will be one more method very close to impression cytology. However this method can be accepted only in selected cases. In addition to the above points, one should realise that the important material worth studying was just discarded earlier. From a specimen bottle one can therefore, have material for both histopathology and cytology.



**Is there any extra advantage of this method over F. N. A. C. ?**

Yes, F. N. A. C. can be practised only in institutions where pathologists and surgeons work very closely. F. N. A. C. is of less use to a surgeon practising away from pathologist or in mofusil places. Most of the surgeons working in mofusil places and in private practice go for a biopsy directly. It is here that the Sediment Cytology technique can be used for a quick provisional diagnosis. Secondly all sites will not be suitable for F. N. A. C. e. g., ulcer of

tongue, tonsil, pharynx, larynx, skin, gum, cheek. Thirdly, even for impression smear the tissue may be too tiny. e. g. one cannot handle liver biopsy roughly. Therefore, where F. N. A. C. is not suitable, this method can be adopted.

**Is it not risky to diagnose by this new method?**

It will not be a final report. It is only provisional report. Histopathology has to confirm it. This is true for any cytology.

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- 6) Sanerkin, N. G. and Jeffree, G. M. Cytology of Bone Tumours. Bristol, John Wright & Sons Ltd., 1980.

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***Changed Your Address ?***

If so, then please fill this slip and send to :

**Dr. Darshana R. Daftary**

Secretary, I. A. C.,  
Cytology Clinic, AMWI  
Cama & Albles Hospital,  
Mahapalika Marg, BOMBAY-400 001.

**PAST ADDRESS :**

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**PRESENT ADDRESS :**

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# Summary of "Report of the standing committee for Accreditation and Examination of the Indian Academy of Cytologists."

**Dr. Usha Luthra**  
**Sr. Dy. Director General, I. C. M. R.**  
**& Director, C. R. C., New Delhi.**

The Indian Academy of Cytologists in October, 1975 appointed a Standing Committee for Accreditation and Examination under the chairpersonship of Prof. (Mrs.) Usha K. Luthra with Prof. (Mrs.) Meera Aikat and Prof. (Mrs.) Satya Monga, as members. The objectives of this committee were: accreditation of cytology laboratories in the country; and (ii) organizing examinations for cytotechnicians and cytotechnologists. Initially, the life of the committee was for 3 years. Appreciating the tasks achieved and those ahead, the tenure of the committee was extended by three years in 1978 and again for three years in 1981 ending in Dec. '84.

Realising the excellent work done and the need ahead, the committee was reconstituted for 5 years till Dec. 1989, under the chairpersonship of Prof. Usha Luthra with Dr. Kusum Verma, as convener, Prof. M. K. Bhargava, Dr. Usha B. Saraiya, Dr. Subhash Gupta and Dr. Savita Mittal as members.

Detailed reports of the work undertaken by the committee and its progress had been presented at each of the annual meetings of the Academy.

The chairperson acknowledges with grateful thanks the help and co-operation received by her from the members both past and present in carrying out the assignments entrusted to the committee from time of time.

A sub-committee of the reconstituted committee consisting of Dr. Kusum Verma (Chairperson) and Prof. Usha K. Luthra, Dr. Subhash Gupta, Prof. Shobha Grover, Prof. M. K. Bhargava, and Dr. Dilip Das as members was constituted with a view to (i) update the curriculum for cytotechnicians and (ii) elaborate and finalize the curriculum for cytotechnologists examination to be initiated in the near future. A report by the chairperson of the sub-committee has been submitted.

## **New Direction :**

It was decided at the Executive and General Body meeting held at Aligarh in Jan. '85 that cytology laboratories will be accredited in 3 categories viz; (i) Comprehensive; (ii) Gynae only; (iii) Non-gynae. The number of laboratories accredited in category (i) will be at least 50% of the total accredited laboratories and in category (ii) and (iii) not exceeding 25% each.

## **I. Accreditation of Cytology Laboratories/ Institutes/Centres for Diagnostic Cytology Service :**

Till January '86, 16 laboratories in the country have been accredited/reaccredited for diagnostic cytology service under various categories viz; (i) comprehensive, (ii) gynae and (iii) non-gynae for initial period of three years:

## **II. Accreditation of Cytology Laboratories/ Institutes/Centres for Training and Examination of Cytotechnicians and Cytotechnologists:**

Till Jan. '86, seven laboratories have been accredited/reaccredited for a period of 3 years.

The committee recommends that these laboratories should (i) conduct workshops once in 2 years to a minimum of 12 participants from outside their city. Follow up of those trained in the workshop should be done as an integral part of the activity; (ii) in service training to existing cytology laboratory workers in the city once a year alongwith their follow up. This was duly approved by the members.

## **III. Human Resource Development :**

### **1. Cytotechnicians examination :**

This was conducted in Delhi, on 20th & 21st October, '86 at Cytology Research Centre. Eleven candidates applied, 9 appeared for the examination and 6 were declared successful. Mrs. Neelam Suri secured the highest marks and is recommended to receive D. Bhaskar Reddy award for the year 1986.



## 2. I. C. M. R. fellowships in Cytology :

In order to provide special and/or advanced training in laboratory techniques used in the field of cytology to cytotechnologists / cytotechnicians already employed in the institutes/centres on permanent job, the Council continued to provide fellowships for training programme during the year 1986. Four candidates were selected for cytotechnologist training for one year, while five were selected for cytotechnician's training for 6 months.

Indian Academy of Cytologists is extremely grateful to I. C. M. R. for instituting this very timely programme for Fellowships in Cytology, because of which it has been possible to generate a band of workers in this specialized field of bio-medicine. Larger number of applications are welcomed for consideration for these fellowships. This information should be disseminated widely.

### Perspectives in Development of cytology in India :

I. Following the panel discussion on Human Resource Development (HRD) in the field of cytology in Lucknow last year, it is hoped that the medical colleges/Regional Cancer Research & Treatment centres in the country would get involved in generating HRD for cytology. It is suggested that firm commitments for this must be taken as a first step by the accredited laboratories and other cytology laboratories in the country to meet the need and challenges of the recently introduced National Cancer Control Programmes in the country.

### II. School of Cytotechnology :

A committee has been formed for the above with Dr. Kusum Verma as convener, and Prof. Usha K. Luthra, Prof. M. K. Bhargava, Dr. Anita Borges, Dr. Sreedevi Amma, Prof. Subhash Gupta and Dr. Dilip Das as members. In addition to the above training programmes, it is essential to build institutions for formal training with appropriately constructed courses for cytology personnel in the form of Schools of Cytotechnology in the country.

### III. Other activities needing initiation are :

- i. National Examination for Cytotechnologists;
- ii. Strengthening and augmenting inservice training for cytopathologist;
- iii. Recognition of MAMS ( Cytopathology ) by the National Board of Examination.

## Accreditation Criteria For Investigative Cytology :

### 1. Status :

- (a) Cytology laboratory should be either a division or part of the Department of pathology, Gynaecology and obstetrics; laboratories attached to Obst. and Gynae. department or family planning clinics doing only gyane cytology or private laboratories specialised in the field.

OR

- (b) Independent institute / centre / department involved in research training and service aspects of Cytology.

### 2. Work load :

It should be actively involved in routine cytological work and training, and the minimum number of cases examined should be 500 per year. The number of cases & number of smears should not be considered as synonymous.

### 3. Staff :

It should have atleast one part-time pathologist, cytopathologist or gynaecologist and one cytotechnician with 5 years experience in the field of cytology or a cytotechnologist.

### 4. Adequacy :

The laboratory in its report on every case should document the possible inadequacy of the specimens preparation (such as improper preparation or poor fixation) or inadequacies of clinical information. It is suggested that minium information shall include anatomic site of preparation on every specimen; the age of patient, previous therapy (endocrine, surgical or radiation), if any, pregnancy status and last menstrual history.

### 5. Rescreening of specimens and diagnostic verifications :

The pathologist, cytopathologist or gynaecologist shall rescreen for proper staining and correct diagnostic interpretation atleast 10 percent random samples of cytological specimens from the female reproductive tract which has been interpreted as 'benign' by cytotechnician or cytotechnologist, atleast 15 percent of the cytologic preparation from anatomic sites other than the female genital tract interpreted as 'negative' by



the cytotechnician or cytotechnologist, all suspicious and positive smears from the female reproductive tract, all smears for hormone assessment and review all non-gynaecological cytology from symptomatic cases.

**6. Follow up :**

The Cytology laboratory would make an earnest effort to maintain adequate follow up information of all suspicious and positive smears.

**7. Progress reports :**

Progress reports shall be prepared by cytology laboratory preferable annually to include number of cases screened in each category, origin of smears, corroborating follow up data and discrepancies, if any, between clinical data, tissue sections and cytologic findings. In case an annual report is not possible, a progress report would be required for reassessment by the Indian Academy of Cytologists at the end of three year period.

**8. Slide files :**

The cytology laboratory shall retain all cytological specimens for atleast five years from the date of examination.

**9. Education :**

Since continuing education is essential for quality control, the laboratory shall be required to

provide regularly scheduled educational sessions for the benefit of the staff members. A minimum of one hour per week should be devoted to continuing education of the staff members. This should be in addition to the formal curricula as laid down.

**10. Library facilities :**

Departmental library, central library information be provided giving list of books and journals in cytology, pathology and allied subjects.

11. Accreditation of the cytology laboratory for examination purpose should also be on the basis of the visitation/inspection as is being done in the case of accreditation of cytology laboratories for diagnostic service. The criteria laid down should be strictly adhered to.

12. The possibility of recognising a group of 2-3 centres for imparting group educational activity for training and examination be identified in various regions which could together impart comprehensive training in the region.

13. Accreditation of the cytology laboratory/institute for diagnostic service should not automatically entitle the concerned laboratory/institute qualify for accreditation for examination purposes.

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**ANNOUNCEMENT**

The Symposium at XVII Annual I. A. C. Conference in Bangalore, will be on 'Aided Aspiration Cytology, ( Ultrasound / C. T, Scan ). Those who have worked in this field should contact :

Dr. Darshana Daftary,  
Secretary I. A. C.  
Cytology Clinic, Ca<sup>+</sup> & Albles Hospital,  
Mahapalika Marg, BOMBAY-400 001.



# Rules and Regulations of the Indian Academy of Cytologists

## Objects

The object of the Academy are.

- (a) To encourage research in both fundamental and clinical cytology.
- (b) To encourage co-operation among those actively engaged in the practice of clinical cytology.
- (c) To Standardize terminology.

## Membership

### Ordinary Members

Candidates for membership shall be nominated by two members of the Academy. The Application Form, duly filled, must be presented to the Council through the Secretary along with cheque / bank draft / money order or cash of Rs 50/- as processing fees. The names of the candidates for membership of the Academy must be accompanied by a letter from both the proposer and seconder. These letters must state in detail the qualifications of the candidates. The Secretary shall circulate to the Members of the Council, or place before the Meeting of the Council, the nominations, to be acted upon. Election to membership is by majority vote of the Council.

If, at any time, the Academy shall be of the opinion that the interests of the Academy require the expulsion of the members, they shall submit the question to the statutory meeting or to a special meeting called, at which, if two-thirds of the members present vote by ballot for the expulsion of the member in question, his subscription for the current year (if it has already been paid) shall be returned to him and he shall thereupon cease to be a Member of the Academy. The matter shall be discussed in a closed meeting.

### Obligation to be Subscribed

Every person elected as a Member of the Academy shall, before his admission, subscribe the obligation in the following words :-

I, the undersigned, do hereby engage that I will endeavour to promote the interests and welfare of the Indian Academy of Cytologists and observe its

Rules and Regulations so long as I shall continue a Member thereof.

## Privileges of Members

Members shall be entitled to the following rights and privileges :-

- (a) To be present and vote at all General Meetings.
- (b) To propose and recommend candidates for membership.
- (c) To introduce visitors at the Scientific Meetings of the Academy.
- (d) To receive gratis, copies of the Proceedings and Transactions of the Academy, issued during the continuance of their memberships, or such other publications as the Academy may decide from time to time.
- (e) To fill any office in the Academy on being duly elected thereto, subject, however, to the proviso that any member appointed to any office in the Academy, to which a salary or emolument is attached, shall lose, for the time being, the privilege of voting.

## Cessation of membership

Any member may withdraw from the Academy by signifying his/her wish to do so, by a letter addressed to the secretary, and it shall be effective from a date decided by the Academy after consideration of his communication.

## Life Membership

Ordinary Members may become Life Members by paying a sum of Rupees Five hundred only.

## Honorary Member

Honorary members may be elected at the statutory meeting on the nomination of the Council, notice being given on the Agenda Paper. The number of the Honorary Members shall not exceed 10. Honorary Members shall have the right to attend the meetings of the Association and to take part in discussions, but shall have no VOTE.

## Qualification For Membership

Admission to Membership of the Academy, except that of the Members of the Founder's Committee shall be by approval of the Executive Council.



Membership of the Academy may be offered to Graduates in Medicine or Masters of Science (Cytology) or Ph. D. (Cytology), with at least two of the following qualifications :-

- (1) Candidates must be engaged in the practice of cytology and have interest in cytology and its development for at least five years prior to nomination.
- (2) Candidates must be associated with a medical college/institute, a teaching hospital or a comparable research Institution at the time of nomination and admission to the Academy.
- (3) Candidates must have contributed scientific work in the field of cytology and must have been the author or co-author of at least three papers on cytology.
- (4) Any person who has been engaged in research or in the teaching of pathology or any allied science for atleast five years shall also be eligible for nomination.

#### **Associate members**

Associate membership will be offered to cyto-technicians and cytotechnologists who fulfill atleast two of the following criteriae :-

- (a) must be engaged in the practice of cytology atleast for 2 years prior to nomination.
- (b) must be associated with medical college/ institute/teaching hospital or research institute at the time of nomination and admission to the academy.
- (c) must have continued scientific work in the field of cytology or atleast one paper on cytology.
- (d) must be engaged in research or in teaching of pathology or any allied science atleast for 2 years or have a diploma or certificate in medical technology.

Associate members will not be eligible for life membership.

Associate members will have no voting rights and cannot stand for any office.

Associate members will pay annual fees of Rupees Thirty.

#### **Subscription**

Each ordinary member shall pay annual subscription of Rs. Fifty. The subscription is payable in advance, and becomes due on 1st January each year.

For membership of the Association to be effective, cash/cheque/draft or a banker's order for payment of the subscription shall be received by the Treasurer within three months of the election; but the Academy shall have the power to relax this requirement in exceptional cases. Any member whose subscription is in arrears for three years and who has been duly notified of the fact, shall, if the Academy decides, be removed from the membership of the Association. The Academy has the right to enhance the subscription as and when required.

#### **Meetings of the Academy**

General Meetings of the Academy shall be of the following kind :-

- (i) Annual
- (ii) Special
- (iii) Requisition

Annual and Special Meetings will be called by the President on the written requisition of 2/3rd of the members on role.

Scientific Meeting of the Academy will be held once a year. This may either precede or follow the General Meeting.

The following rules shall be applicable to all General Meetings of the Academy.

- (a) 20 Members shall constitute a quorum.
- (b) The President shall take the Chair. If the President is not present, on the expiration of fifteen minutes after the hour fixed for the Meeting, the Members present shall proceed to elect a Chairman.
- (c) The business of each Meeting shall be proceeded as per Agenda prescribed, but on written notice being given to the President or the Secretary, not less than 48 hours before the hour of meeting, a motion for the immediate transaction of urgent business may be made and, if such motion be seconded and carried, this Rule shall be suspended.
- (d) Notice of motion on any matter shall be given by a letter to the Secretary not less than one month before the General Meeting at which the motion is to be moved.
- (e) All motions and amendments, except those emanating from the Council, shall require to be seconded before they be discussed, Amendments must be sent in writing. Not



Not more than one of the offices of the President and the Secretary shall be held by the same person.

The Council shall nominate a President, Secretary and a Treasurer by election at the Statutory meeting of the Academy. In case of incidental vacancy of the President, the senior most member of the Council shall perform the duties of the President. In case of incidental vacancy of the Secretary or Treasurer, the President will nominate from amongst the members of the Council to hold the office till the next meeting of the statutory body.

**Miscellaneous :**

No person appointed to any office in the Academy to which a salary or any emolument, other than a conveyance allowance, is attached, shall have the privilege of voting. If any member be appointed

to any such office, he shall be incapable of voting at the Meetings of the Academy as long as he continues to hold it, but shall not be deprived any of his other privileges of Membership.

There shall be kept such record of the Proceedings of the Academy as shall, from time to time, be prescribed by the Council.

All letters, notices, minutes of the meetings and other documents connected with the business of the Academy, shall be filed in the order of their dates, and shall be preserved.

The Members of the Academy will be required to complete a proforma concerning themselves and their career, to complete their personal records to be maintained by the Academy.

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**ANNOUNCEMENT**

Dr. Vaidehi Kanan from Philadelphia, U. S. A., will conduct a workshop on 'Breast & Prostate gland cytology' on 1st August 1987, at Seth G. S. Medical College, Bombay. Those who are interested may contact ( before 20th July 1987 ) :

Dr. Darshana Daftary,  
Secretary I. A. C.  
Cytology Clinic, Cama & Albless Hospital,  
Mahapalika Marg, BOMBAY-400 001.

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**GREAT WORDS**

The perfection of any matter, the highest or the lowest, touches on the Divine.

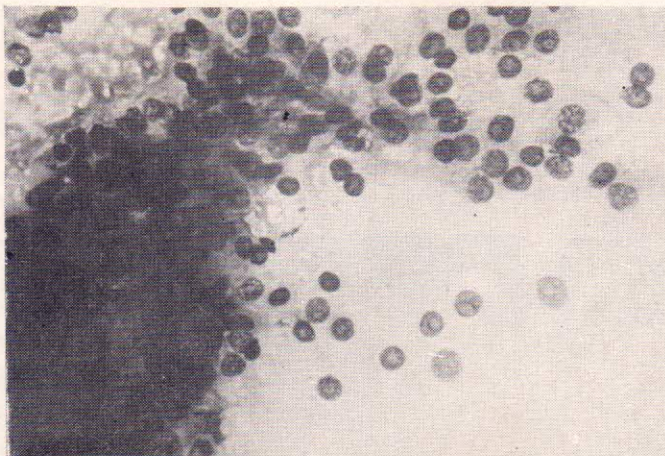
— *Martin Buber*

When you can do the common things of life in an uncommon way, you will command the attention of the world.

— *George Washington Carver*



## Spot the Diagnosis



### Short history of case :

30 years pregnant female c/o breathlessness and swelling in front of the neck, gradually increasing in size. Smear of F. N. A. B. from the swelling.

### Can you spot the diagnosis ?

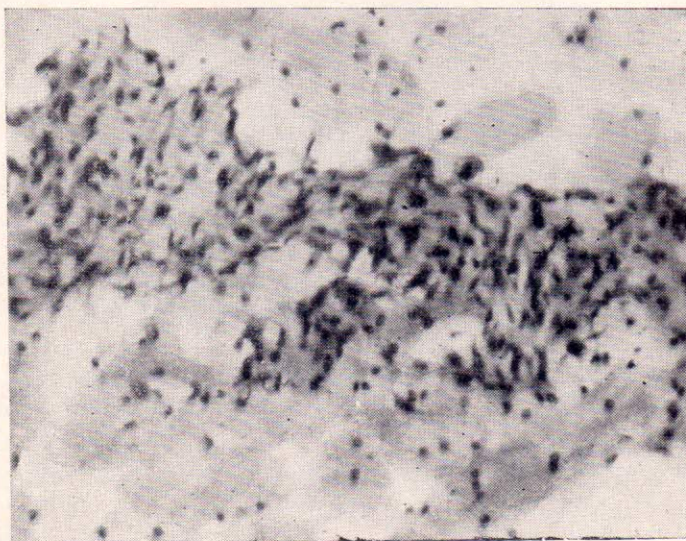
Send your answers to Dr. P. V. Patil, Editor, I. A. C. Newsletter, 'Shanti' 8th Cross, Dr. Radhakrishnan Road, Hindwadi, Belgaum-590 011. Write on the envelope 'Spot the Diagnosis.' Answers should reach not later than 31st August, 1987.

The first five correct entries opened on 1st September 1987 will be announced in next issue ( October 1987. )

Feature is compiled by :- **Dr. Mohini Nayar**, Cytopathologist,  
Dept. of Pathology, Safdarjung Hospital,  
New Delhi - 110 029.

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### Previous Case



**Diagnosis :** Endometriosis of Uterine cervix.

Feature was compiled by :- **Dr. Madhav K. Kolhatkar**, Consulting Pathologist,  
759/88, Bhandarkar Institute Road, Pune-411 004.

( None of the answers received were correct. )