

Connections

Bulletin of the Government Medical College Chandigarh Old Students Association (GMCCOSA)

Why (Or Why Not) Come To The USA?

Divyanshoo Kohli, 2003 batch

The GMCCOSA community was both pleased and surprised at the vehemence of the responses to Charanjeet's article on coming to the USA for residency (available at http://gmccosa.org/Connections_2012-01.pdf). His article while being extensively researched, au courant, hard-hitting and timely, was described variously as depressing, one-sided and harsh. Ahh well! Bitter truths are unpopular. As someone pursuing residency in the USA, I can certainly vouch for the accuracy of the facts presented earlier even though the conclusions may vary. At the cost of repeating myself, here are my 2 cents worth of thoughts.



Why should one come over to the USA for residency?

- I came over to the USA to pursue clinical research and learn medicine. While I could have learned medicine equally well in India too (institutes like AIIMS and PGIMER can match any US program at least in Internal medicine), research is one area that is critically encumbered in India. My own experience of pursuing research in India, though limited, left a bitter after-taste and propelled me to join the queue of MLE aspirants. Those aspirants coming to the US for medical training alone may not find an incredibly superior training. A lot of medicine here is based on protocols and extensive lab and radiological testing with a severely restricted scope of clinical exam and acumen.
- One of the more important reasons why people should come over to the US is the myriad cultural smorgasbord that is available here. In my limited stay, I have interacted with people from Pakistan to Peru and Canada to Italy while delighting my palate with borscht and biryani. There is an immense cultural enrichment that is a vital part of education beyond the staid academics.
- Another reason why I recommend pursuing medical training is that one learns to live life independently without the crutches and support of family (I will contradict myself soon enough!). Like all other seniors/colleagues, I learned about fiscal prudence, watching for my interests and taking a more assertive control of my life. All the above are difficult to achieve when the support and cocoon of family/ siblings/ parents is available.
- The work culture in the USA is definitely more egalitarian and inspires one to work hard. It is not exactly heaven and the bureaucratic red-tape is as thick as in India but the interaction among the residents and seniors/ consultants is less rigid and hierarchical. There is a welcome emphasis on team-work.

Why should one NOT come to the USA for medical training?

- Don't come to the US for the money- it is not worth it. There was a collective call-for-arms on the internet when CJ pointed out incontrovertible facts regarding the monetary aspects of living in the US. While the

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absolute amount of monetary compensation is substantially higher, in actual terms the differential is much lower. Just to give a perspective, my monthly take-home is \$3,000 or '1.5 lakh' but I pay \$1100 or '0.5 lakh' as rent for a tiny one room accommodation. I do not own a car and cook my meals to be able to come over to India every year. When the emolument is correlated with the cost of living, the picture becomes clearer. As a rough comparison, my batch-buddies in GMCH have a better lifestyle than I do.

- Don't choose USA because the USMLE is easy. It is true that the difficulty of questions in the Indian PG entrance exams is excruciating compared to the MLE, there are nuances that must be kept in mind. The 'required' score on the MLE is very high. Super-high 3-digit scores are now the norm. Further, unlike the Indian PG, one can take the USMLE only once. If the applicant errs during any one of the 3 tests (or 4 per the purists!), there is no rectification possible. The financial impact of the MLE is an entire different context. In a nutshell, don't think that the MLE is easy. And remember that good scores don't guarantee a residency spot unlike in India where rank 1 DEFINITELY means a residency of your choice.
- Don't come to the US thinking that there is no paper-work and no bureaucracy. The paper-work and red-tapism is comparable to any office in India. Every slight detail is required to be documented and a stack of photocopies of important documents is de-rigueur here as well.
- Don't come to the US because patients here are 'easy'. There was an aspirant who had emailed one of us and wanting to take the MLEs because the 'patients in the USA would be easier to deal and healthier in general'. I can say with immense confidence that nothing is further from the truth. Patients are humans and irrespective of their geographical location, have similar profiles. In fact, the depth and variety of the pathology seen at a particular place should be a determinant of training there.

Conclusions from this verbiage

Coming over across the seven seas is a deeply personal decision. Like the medicine that we practice, the decision has to be individualized and a one-size-fit-all policy cannot stand the test of scrutiny. It is prudent to talk to family and discuss long term plans and financial implications. Seniors and the GMCCOSA community is always available as well. What often comes up during discussions is whether the extreme separation from family, friends and a more familiar and comforting environment is really worth all the training and work. The professional 'satisfaction' we aim to achieve comes at an exceptionally steep sacrifice of personal satisfaction. Only those of us viewing snaps of 'holi' or 'Diwali' on FB can understand what we miss.

In a nutshell, think carefully of your plans, weigh the pros and cons and then decide what you want from life. And yes, at the end of the day the only person whose opinion matters, to borrow from Michael Jackson, is the 'man in the mirror'.

We welcome, once again, any comments/ articles/ suggestions/ critique and would be happy to share with the wider GMC audience. We invite other alumni to share their thoughts at [facebook.com/GMCCOSA](https://www.facebook.com/GMCCOSA).

Congratulations

Engagements & Weddings

Hitesh sharma (1997) & Deepika

Ankush Moza (2001)

Kanika Aggarwal (2001) & Darsh Goyal

Raghav Gupta (2001)

Vidhu Dhawan (2001) & Manmeet Kalra

Amit Rehlan (2002)

Mandeep Kaur (2002)

Krishan Sawhney (2003) & Vidushi (2001)

Rajan Mittal (2003) & Anshika Sehgal

Ridhi Gulati (2003)

Nitin Ahuja (2003)

Ashish Bansal & Priyanka Gupta (both 2003)

Babies

Mandip bhatia (1996)

Sharad Prabhakar (1996) - son Akshaj

Sushant Khanduri & Rakhee (both 2000) - daughter

The Unexpressed

Shivani Garg, 2005 batch

Millions of thoughts strike his mind
 Thousands of them are lost before he
 acknowledges – the depth behind,
 Many more lose their identity
 Before they enter his mind's territory,
 A few, have denied access
 Hardly, a single enters, but time is brief- for mind
 to reflect,
 Though rejected- by the conscious
 But still- registered in his subconscious,
 Every thought that is lost- so easily
 Fills, the subconscious- so heavily,
 Slowly like a river, the frustration levels rise up the
 danger
 And on subsequent ignorance, roars in anger,
 The high waves
 Strike here and there,
 Motive was not destruction

But the energy- was beyond limitations,
 The thoughts needed a vent
 Ending all the Negatives- till now which it sent,
 Through the crack
 Flooded the river of emotions,
 Causing mass destruction
 Beyond repercussions,
 In a day or two, cools down the tide
 Slowly sweeps away the destroyed,
 Ashamed of his arousal
 Stealing his eyes,
 In self pity, now he lies
 Everyday questioning-his tides
 'Why every thought he did not realize?'
 'Why, to the signal, he did not act wise?',
 If he vented his emotions that deep within lies
 That could have prevented- this rise!!!!



At the time of admission into professional college, we bear only one dream in our eyes, that is, to shine extraordinarily and to stand out bold in the crowd. Similar were my dreams when I joined GMCH-32. But soon, I realized that I was caught in a web of unexpressed emotions, piled up thoughts and unsaid words...

Every day I imbibed a bit of my patients feelings and slowly their fears became mine. Besides my job, my dreams for the future which I had nurtured urged me to work hard. To make the two ends meet, I curbed all emotions of my heart, so that these feelings don't become a

hindrance in my path. Unknowingly, I became a part of the rat race of world and kept running tirelessly in order to get success...

The unexpressed, became a source of negative energies which provoked my soul and despite of doing my best, created a feeling of failure. The trapped feelings created a vacuum inside me and slowly I withdrew from social gatherings. The silence kept growing and began to hurt my soul. My wounded soul reflected itself- in my words, gritty expressions, uneasy mind and a lot more. My weak soul robbed me of my confidence and nothing my mind could accomplish, when my soul walked away from the future challenges.

Tears rolled down, no words, not even talks could help me. Then, one fine day, I sat back and expressed all feelings in words and colors. I expressed all- whether it was a feeling that came when I encountered first death, or emotion that created turmoil when I realized that while doing CPR, soon my hands were pushing against the dead bare chest, or the fear that an antenatal had when she realized that she was HIV+, or the cries

of the family - when the inability to afford medicines ended up with death of their bread bearer. Love, Hopes, betrayal, loneliness and whatever else that were hidden in my heart so far, I tried to express all.

The expression and its sharing with family, made my soul rejuvenate from ashes, just like a phoenix. I could face all challenges well and slowly I accomplished the desired heights, in profession and in creativity as well...

Few days back I realized that many people are going through the same turmoil as I went through. So I compiled my artwork and displayed them all. My paintings were like mirrors which reflected the inner thoughts of every person's mind. Through the medium of paintings, I made people recollect their forgotten emotions and motivated them to express- the unexpressed.

This day, I am writing this long article not to tell that how well I am doing but to add an extra dimension to the personality and the outlook of my fellow students. I want all of you, who are struggling with their inner feelings, to buy a moment for yourself and sit back, relax, realize all what was left behind on the road of life. When you realize the forgotten, you will surely find a way to release these energies. Play with words, paint your heart, golf to eternity, dance to the rhythm of soul, juggle with the strings of life, do anything - but find a way to vent out your vacuum. Profession definitely gives you, your identity but pursuing a hobby will help you balance all odds and evens of life. Hobby will relax your soul and will refresh it when it gets tired of the worldly business.

Work hard, harder, and hardest but say all what your soul feels and success will- indeed follow...“A Moment out of your busy life- to express, Will shape your path to harmonious Life and success!!!”



Shivani held an exhibition of her paintings “The Unexpressed” in May 2012 at the Govt Museum and Art Gallery, Chandigarh.

Renowned architect, artist and sculptor, Dr SS Bhatti, inaugurated the exhibition and Sh Sanjay Tandon, President BJP Chandigarh, was the guest of honor. She can be contacted at shivaniarg88@yahoo.co.in for more information about her work.



Euphoria 2012

Charanpreet Singh, 2008 batch

Euphoria 2012- Unraveling the Mystery was organized this year like every year by the students of GMCH, Chandigarh. As one of the Chief Coordinators, it fell upon my shoulders and those of my fellow chief coordinators and batchmates to organize Euphoria, of course with the help of our seniors and juniors, and also our teachers.

Right from the start, our core committee had a vision, and that vision was to make Euphoria THE Medical Fest of the country. Euphoria had already cemented its place in the itinerary of all Medical students in the region, but we wanted Euphoria 2012 to be bigger and better than ever before, and set about trying to achieve this task. Right from the start, things seemed to be going our way and we were on our way to making this vision a reality. But as always, what seems too good to be true, usually is. We suffered many setbacks, but we overcame each one and came out stronger and more united than before.

As time progressed, we realized that many of the barriers we were experiencing came from home rather than from foreign influences. Getting everybody convinced on an idea was no mean feat, but convincing the teachers regarding the Dance Parties was a labor Hercules would have been proud of. Still we “labored on” (almost as painfully as the actual act!) and brought a new meaning to the word ‘Jugaad’. Everyone used every little influence and pull they had to give the smallest benefit possible for Euphoria.

Over time we developed a few of our own traditions. Most memorable for me personally was sitting in the Euphoria Control Room (ECR as we called it) every evening for one and a half months, eating Maggi noodles and sandwiches and getting out my ‘little black book’ and making sure we were on sure financial ground. We made some huge decisions this year, I feel. For the first time, Euphoria opened its doors to non-medical colleges of the region such as GCG and MCM, a step which I hope will take Euphoria to greater heights in the future.

Looking back to those actual 5-6 days, they all seem a blur. So much to do and so little time to do it in - we were basically working on our instincts. At that time, I think all of us from the core committee couldn't wait for it to be over and take a sigh of relief, but looking back, at least for me, that time represents a part of my life which I can count as among my greater achievements and something I will cherish for the rest of my life.

So, was Euphoria 2012 bigger and better than before?? Was Euphoria 2012 a success?? At the risk of sounding pompous, I would just like to say that with over 900 delegates, 10,000 people on the Honey Singh Night, and 7,000 people at the Gippy Grewal Night, the numbers speak for themselves. The fact that for the first time in the history of Euphoria, we had a near riot and barricades were broken at a star night, speak volumes about the magnitude of Euphoria 2012. But most of all, the large number of phone calls we received from delegates saying that they loved our organization and Euphoria 2012 is a testimony to the hard work we put in. Sure, we didn't please everybody, and yes some people would say that Euphoria 2012 wasn't very good. But in the end, you can't please everyone. And we chose to please the right people - the delegates and our students. It has been a hell of a ride, but boy has it been worth it!





Residency Updates

Shiv Bagga (94), Internal Medicine at Cleveland Clinic, Cleveland, OH

Rahul Kataria (01), Pediatrics at the Texas Tech University Health Sciences Center, El Paso, TX

Preet Mangat (04), Family Medicine at the University of Texas Medical Branch, Galveston, TX

Kanika Arora (04), Neurology at the University of Alabama, Birmingham, AL

Shivani Garg (05), Internal Medicine at the Albert Einstein Medical Center, Philadelphia, PA

Ankush Chugh(06) MS Surgery GMC Patiala

Siddarth Puri (06) MD Anesthesia DMC Ludhiana

Ena Arora (06) MD Anesthesia DMC Ludhiana

Nirupa R (06) MD Anesthesia GMCH Chd

Jyoti Deswal (06) MD ENT GMCH Chd

Kanika (06) MD Pathology GMCH Chd

Akanksha Gautam (06) MD Medicine IGMC Shimla

Saloni Arora (06) MS Ophthalmology GMCH Chd

Parveen Jassi (06) MD Radiology DMC Ludhiana

Amandeep (06) MD Radiology DMC Ludhiana

Nidhi Thakur (05) MD Ob & Gyn GMCH Chd

Nikhil Bansal (05) MS General Surgery GMCH Chd

Neeraj Jain (05) MD Psychiatry GMCH Chd

Shivani Kothial (05) MD Pulmonary Medicine GMCH Chd

Priyanka Makkar (05) MD Anesthesia GMCH Chd

Sudhanshu (04) MS Surgery GMCH Chd

Saurabh (04) MD Anesthesia GMCH Chd

Sandeep Tiwari (04) MD Pathology GMCH Chd

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