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تاریخی ترقیات کے لئے بہت شاخص ہے کہ پوری قوم کو ملکی اوردو حاصل کر دی جا جائے جس میں بھی اس کا تاثیر ہے کہ یہ کچھ دوسرے ممالک میں پڑتی ہو۔

دورا کھڑا ہے جبکہ ہم بھی دوارےہ میں ہم قرار ہیں۔ پاکستان نہیں۔ کیا کوئی کپڑہ کے لئے جذبہ ہے؟ ہمہ پاکستان ہیں۔

دادر کی صورت پر پاکستان کو ہم اکثر جانتے ہیں فی الحال کہ کسی بھی صورت میں ہم کا کردار ہے۔ ہمیں جو کچھ ہو گیا ہے لوگوں کی طرف سے پرچم پیچھے ہے۔

آپ زردار کے لئے اپنے کردار کے طرف انگریز کی اس قسم کا نہیں تھا۔ پاکستان کو اپنی ناداری میں بے شمار تجربات کی حمایت کی۔ ہم اپنی قدرت میں کچھ بیسے کی نظر میں ہم خودا رہتے ہیں۔

با یہ طریقہ پر ہمارے دل کے رینج کی ہے۔ پاکستان کو ہمیشہ صحتی حاضری کی یقین میں کچھ بیسے اور ہم اپنی تارکین اورناکی کے لئے جڑتے ہیں۔

شواہد کے لئے بھی راکھا جا سکتا ہے۔ جاہیزہ جو صفحہ ویالے کی طرف مہمہ فرمایا ہے۔ خریداری کے لئے خدیجہ کو مفید ہے۔

کئی طرز ذکر قابل ذکر ہے۔

جب ہم اقدار اور پارٹی صحراء پر لاپتہ ہنگامے میں انتهاء کی رہائی حاصل کرتے ہیں تو خودا لے م มาکی کملا کے کامیابی کی اجازت کے لئے تجربہ ہو جاتا ہے۔

کئی کوئی معاصرات اور روایات میں ایک ہے۔ ضرور مکمل کو مکمل اور روایات اور روایات کا اعلان ہے۔ بہت معاصرات کی چھوٹی کیوں نہیں۔

خاص طور پر خاص پر آپ وقت مکملی پر فوجی اورمنابات فوجی جوہر کی ذمہ داری سے کی گئی فوجی مشارکت سے نیچے کے جانب کو مہمہ کے ہے۔

دوران میں بلے گیا ہے۔ اس کے وقت کو مکملی ہیں۔ فی الحال کہ ہم سمجھنا چاہتا ہے کہ کبھی کپڑہ ہے کہ کسی دونوں نے کسی کا سیاحا بیان کیا ہے۔

بہت واضح ہے کیچھ مقامات پر ہمیں بہت کوئی بیاہ ہے۔

فرود کے لئے وقت باہ مکملی پر فوجی ہے۔ اپنے کے وقت باہ مکملی پر فوجی ہے۔

فی الحال کہ ہم ہوئے ہیں۔ کسی کوئی بیاہ ہے۔

فی الحال کہ ہم ہوئے ہیں۔ کسی کوئی بیاہ ہے۔

فی حال کہ ہم ہوئے ہیں۔ کسی کوئی بیاہ ہے۔

فی حال کہ ہم ہوئے ہیں۔ کسی کوئی بیاہ ہے۔
ادارہ

لاڈیم ناولی

کہتے ہیں کہ گاہوں میں ایک بھی کسی کی بھی نہیں ہو چکا ہے تھا کہ کسی کا مجموعہ جوہر یا پتھر کے میادین میں صحیح طریقے میں مصروف ہو گیا ہو۔ اس کا نتیجہ کہ کسی بھی شخص نے مظاہرہ کیا ہے کہ وہ کسی بھی استعمال میں نہیں پہچا ہے۔

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Dr. Amjad Hussain (OH) of Kissimmee, FL addresses a seminar on peace in Indo-Pakistan subcontinent.
APPNA Executive Committee Fall Meeting, Hyatt Regency Hotel, Houston, TX. Oct 3rd - 5th, 2003

(L-R) Drs. Raana Akbar (President), Hussain Malik (Secretary) and Zeelaf Munir (Treasurer) begin the proceedings.

(L-R) Dr. Rubina Inayat, Secretary FJ and Dr. Amna Buttar, President FJ Alumni Association rest after successful fund raising for Muslim Heritage Project for which $ 8,000 was raised in a 10 minute presentation.

(L-R) Drs. M. Aslam (NY), Iqbal Jangda (NY), Asim Malik (NY) and Rizwan Naeem (TX)

(L-R) Dr. Mahmood Alam (NY) raises a point during debate. Drs. Iltifat Alavi (IL) and Nadeem Kazi (AZ) wait to be recognized by the chair. Dr. Ishaq Chishti (MO) in foreground.

(L-R) Dr. Ifat Alavi, Dr. Waheed Akbar and Dr. Raana Akbar enjoy a brief respite before the banquet after an exhausting day of Executive Committee.

(L-R) Mrs. Samina Chaudhry (LA), Drs. Sehba Siddiqi and Wajid Siddiqi (OH) showing interest in photos of last APPNA Journal
(L-R) Drs. Amin Karim (TX), Hussain Malik (NJ) and Rizwan Naeem (TX) prepare for presentations

(L-R) Drs. Mujeeb Khalique (CT), Abdul Khalique (CT) Busharat Ahmad (MI) and Shahid Usmani (FL)

(L-R) Drs. Riaz M. Chaudhry (LA), Mohammad Suleman (LA) and Mufiz Chauhan (LA)

(L-R) Drs. Hussain Malik (Secretary 2003), Amanullah Khan (TX) (APPNA President 1983) and Omar Atiq (President Elect 2003)

(L-R) Dr. Omar Atiq (President Elect 2003), Dr. Aslam Malik (TX) (APPNA President 1984) and Mrs. Joyce Malik BELOW (L-R) Professor Mohammad Arshad Cheema (South Surgical Ward KEMC), Dr. Hassan Bukhari (President 1986) and Dr. Talat Bukhari (TX)

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On the Cover:
20 x 34 cm by Aisha Khalid. Untitled, 2003. The medium is opaque water color on wasli paper.

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**EDITORIAL**  Syed Nadeem Ahsan, MD

**APPNA’s God.**

77% of Alabamans can’t be wrong! Or could they? According to a recent Newsweek survey, the vast majority of the predominantly Christian population of Alabama thought it quite reasonable for the Alabama Supreme Court to display in its rotunda a 5,280 lb. granite carving — known as Roy’s Rock — bearing words that Christians consider divine. This in a building meant to dispense justice to all, regardless of race or creed, and this, perhaps more ironically, at the behest of the Chief Justice of the state of Alabama himself.

Thankfully, his colleagues in the State Supreme Court were made to see reason by such organizations as Americans United for Separation of Church and State (AUSCS) that filed suit against the monument and both Roy and his rock were sent packing. As Ayesha Khan, an attorney for AUSCS put it, this landmark decision is all about preserving the stature and sanctity of the Alabama court, but, not unexpectedly, Mr. Moore’s supporters are quite outraged by the removal of their beloved Ten Commandments judge.

In another development, on October 14, 2003, the U.S. Supreme Court announced that it would hear the case on the constitutionality of the phrase “under God” in the Pledge of Allegiance when it is recited in public schools. Earlier this year, the U.S. Court of Appeals for the Ninth Circuit ruled that the recitation of the Pledge with the words “under God” in public schools violates the Establishment Clause of the First Amendment.

And not to be left behind in the battle for the separation of Church from State — widely believed to be the very foundation upon which the spectacular renaissance of the western world has been crafted — the drafters of the constitution of the nascent European Union too are presently wringing their hands over proclaiming the EU’s official faith. Here the irony being that the continent that has benefited the most from distinguishing between divine and public domains is now home to the dispute over whether God and Christianity ought to be inserted into the draft of the European constitution, from which both are currently excluded. What are the two sides? In one camp are the mostly Catholic countries, Ireland, Spain, Italy and Poland, which, urged on by the Vatican, have been most active in demanding a more emphatic recognition of Europe’s religious roots. On the other side is a conviction, held most tenaciously by France and Belgium — which have perhaps the fiercest attachments to the idea of total church-state separation — that religion does not belong in the fundamental governing document of an association of European countries.

The EU debate is ultimately about the question as to how best to give expression to European diversity even while giving a common identity to 25 countries with different traditions and histories. Clearly, the concept “humanism” was central to that identity in the minds of the constitution’s drafters, though in the end, to accommodate demands for an acknowledgment of the religious heritage, they did put in that single phrase about “the cultural, religious and humanist inheritance of Europe.”

But what, in a microcosmic sort of way, does all this have to do with APPNA? Well, it would probably not be unfair to say that it is precisely this level of vigilance that the West devotes to separating religion from politics that has created the environment that gave us reason to migrate here from the Islamic Republic of Pakistan — and prosper. It would also not be too far from the truth to say that if we expected to be treated the way religious minorities are treated in Pakistan we would probably not have come.

So why then has our Association not learnt to cherish the value of true pluralism and why does APPNA seem to only cater to the whims of its Muslim majority while completely failing to even acknowledge the presence in this country of scores of Pakistani physicians that are not Muslim? It is no small tragedy that the Association of Pakistani-American Physicians of North America would be hard pressed to show even one non-Muslim name on its membership roster.

At the Summer Meeting in Orlando this year, several members took offence to being addressed in Punjabi during the fundraiser for APPNA-SEHAT, the premise being that public discourse ought to be conducted in a language that those present can understand. Interestingly, the very people that were so chagrined at being addressed — albeit rather briefly — in Punjabi (a language that most APPNA attendees can at least understand), feel no qualms about starting APPNA functions with Arabic recitations that are not only specific to only a certain faith but are actually only understood by a tiny fraction of those listening. Why the double standards?

Surely not everyone attending APPNA events is Muslim. Why then should the religious preferences of one (admittedly large) group take precedence over the religious sensibilities of those that do not belong to that faith? And why can APPNA — supposedly a secular organization for ALL Pakistani physicians — not adopt a strictly non-ecclesiastical countenance so that everyone present is
included and no one is excluded? Or, if APPNA's functions absolutely must start with invocations of God's mercy — or as in the case of the Mushaira in Orlando, with God's wrath — then let's at least have several of the main Pakistani religions represented.

APPNA's members in general and its elected officers in particular are urged to try and understand that APPNA belongs to all Pakistani-American physicians, be they Sindhi or Baluch, Muslim or Christian. And to be truly inclusive we need to go with the lowest common denominator and NOT with the whims of our seemingly rather insensitive majority.

As might be expected, when this matter was brought up on the APPNA listserver, the elected leaders of the Association pointed out that APPNA comprises primarily (if not exclusively) of Muslims and it was therefore appropriate for APPNA to have an obviously Muslim countenance viz a viz Tilawat and Azaans. When further pressed, they stated that APPNA as a 'democratic' organization, the decision to make it ecclesiastically neutral (so that every single Pakistani Physician could be included) — or not — should be voted upon by the membership. And one officer noted, perhaps quite rightly, that, if it came to a vote, the vast majority of APPNA's members would have no problem with maintaining the status quo and including only Islamic prayer in its functions!

77% of Alabamans can't be wrong! Or could they?
2003 PRESIDENT'S MESSAGE  

APPNA has a number of accomplishments to be proud of this year

Our constitution has been completely amended by the executive Council and is ready for circulation to the membership 30 days before the annual summer meeting of 2004. The first reading of the bylaws has also been completed. The second reading will be presented during the spring meeting in March 2004 in New York. My thanks go out to Dr Iltifat Alavi and his committee for a job well done.

APPNA has been accredited by the ACCME for a four year term and from now will be able to give credit for its own CME as well as that of its component societies. APPNA has recognized the efforts of Dr Raza Dilawari. This is no ordinary accomplishment. I would also like to acknowledge the Herculean efforts of the CME committee in this regard.

APPNA was also represented at the Specialty and Service Section (SSS) of the American Medical Association (AMA) for the first time. Dr Busharat Ahmed always facilitated the process.

A total of $217, 282.00 was sent to APPNA Sehat for its expenditure this year. More than $200,000 was donated through APPNA. This is the highest amount ever donated to APPNA Sehat from APPNA. I would like to thank the donors as well as the officers and all the host committee chairs for without their hard work this would not have been possible.

The relationship between APPNA Sehat and HDFNA has been long discussed in repeated sessions of the APPNA executive council. The ambiguity between the two organizations was removed whereas APPNA Sehat now functions as a completely separate organization which is being run under the direction of the APPNA executive council. I am extremely grateful to Dr Zaheer Ahmed for taking up this challenge and delivering on it. I am also grateful to Dr Aslam Malik for taking up the onerous task of leading the working group for delineating the relationship.

The philanthropic impulse of the Pakistani Physician was in full display this year. Another $50,000 was donated to various concerns through the Social Welfare Disaster Relief Committee whether it was a student mon­

arily stranded in New York, or a short documentary film being made on the plight of the killed physicians, due to sectarian violence in Karachi, APPNA members donated generously. The Social Welfare Committee in particular did remarkable work on women issues (specifically the women jailed in Pakistan under Hadood Ordinance) and disaster relief education. I want to thank Dr Javed Akhtar, Dr Naveed Iqbal, Dr Amna Buttar, Dr Zafar Iqbal, Dr Saud Anwar and Dr Nadeem Zafar.

The APPNA Task Force on Visa and Licensure successfully lobbied to get visas for at least 12 physicians who had been denied their J1 visas. Unfortunately there are many more that have not been able to get theirs. Drs Asim Malik, Nasir Gondal and Faisal Cheema delivered magnificently.

The Social Forum is in place and initial work has been done in its formulation. This has been set up to meet the needs of our children who have graduated and need an opportunity for social networking as well as involvement in community service projects. Mrs. Razia Chishtii and her team deserve a vote of thank from all of us.

The Youth forum has set up an electronic list for the first time and has revamped their web page. They had a significantly successful function. My thanks to Drs Mahjabeen Islam and Dr Mujeeb Khaliq for their input and hard work.

Online registrations were started for the first time for our Summer Meeting which has worked out fairly well. We also started a system for housing bureau. This has some glitches which need to be worked out. The web page was reorganized.

All our meetings throughout the year were thought provoking. With special emphasis on civil rights, these symposia were enjoyable and made sufficient amounts of money for APPNA to fulfill its charter of charitable giving. APPNA today is much more financially stable than last year. I recognize the efforts of Nasir Iqbal, Shahid Usmani and Amin Kareem in chairing these Meetings.

The number of committees was reduced from 21 to 15. There was diverse representation of each medical school. I would like to thank all the committee chairs for their dedication and commitment.

The primary address of all APPNA investments has been changed to the APPNA central office. All future transactions of APPNA Investments will need written approval from the Treasurer and the Chairman, Board of Trustees. I would like to acknowledge Dr Hassan Bukhari’s consistent and continuous stewardship of APPNA funds. It is because of his efforts that APPNA maintains its financial viability.

$5000 was donated to Shifa Eye Hospitals, a philanthropic chain of hospitals situated in all four provinces of Pakistan providing free eye care.

We had almost 2200 members this year.

There are a number of things that still need to be done.

There is an important report in this issue on negotiations which were undertaken to define the relationship
between APPNA Sehat and HDFNA by Dr Aslam Malik. He feels, and I concur, that HDFNA was not really serious about delineating the scope of this relationship. APPNA needs to institutionalize its fundraising not only for APPNA Sehat but all other concerns that are being run under the flagship of the Social forum Committee with its ever expanding activism. Since HDFNA is a totally independent organization I would recommend that APPNA should actively start planning for creation of an APPNA Foundation to cater to these needs.

The Central Office needs expansion so it can keep up with the constantly increasing scope of work being performed on behalf of our members. I had wanted to initiate this by hiring an executive director. Due to my ill-health in the latter part of this year, I was not able to do every thing I had set out to do. Dr Ilutfat Alavi details out the processes which were undertaken this year. We still have a candidate who fulfills most of our criteria. However I feel it is the prerogative of the incoming President to make an appointment as he is the person who will have to work with the appointee. The appointment of the Executive Director will facilitate membership drives, help update membership directory, assist create a placement service of physicians and residents looking for jobs or observerships and provide continuity in running all our Meetings. It will also impart leadership and a sense of direction in our central office. Unless we invest in the infrastructure of APPNA we cannot expect it improve its performance.

APPNA and Pak Pac functions should have better coordination in Pakistan. My understanding has always been that Pak Pac holds their annual function to promote the practice of democracy in Pakistan. As an officer in the KEMCAANA executive council I used to coordinate the functions of KEMCAANA, Armed Forces Medical College and Pak Pac. Pak Pac would always hold its dinner coordinating with the AFMC symposia and I always found their scheduling to be flexible. Last year the attendance of Pakistani American Physicians at the Pak Pac function was abysmal. It will be the same this year. Originally Pak Pac announced its function to be on Dec 22nd which would have clashed with our announced date for the Winter Meeting in Sind Medical College. Trying for better coordination the SMC function was moved by APPNA to Dec 23 which was subsequently followed by Pak Pac’s announcement of holding their function on the 23rd as President Pervaiz Musharraf was not available on the 22nd. In previous years it was not considered necessary to have the head of state attend the Pak Pac functions. Frequently the chairs of various political parties were invited for brainstorming and exchanging views. The effort has always been to promote the process of democratization and civil society in Pakistan.

APPNA Sehat needs to be registered in Pakistan as a not for profit organization. This is essential for diversification of its donor base. The APPNA executive council must determine the qualifications of the members of this board. Of a necessity some members should be from Pakistan, but the majority of the members should be either members of the APPNA Board of Trustees or Past Presidents of APPNA. The names of this board must be submitted to the APPNA executive council for approval.

I would like to take this opportunity to express my deep sense of appreciation and gratitude for the stalwart double term of Dr Hamzavi as a member of the Board of Trustees, who now steps down in favor of Dr Arain. Dr Hamzavi treated the office of trusteeship wisely and in a low key manner. His advice was immediately available. He did not impose his views on anybody. His presence was continuous but not insistent. His able handling of volatile situations defused many crises. His presence will be sorely missed. However, he leaves another sincere and dedicated individual as his successor. I would also like to thank Dr Mushtaq Khan and Dr Aslam Malik for their guidance and ever available advice, all the officers—Dr Hussain Malik in particular for his availability and never failing courtesy and all the other members of the Board of Trustees. I welcome the incoming team with my best wishes and an offer of support for a smooth transition.

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Dear Fellow APPNA Members,

Assalamo-aleikum. On January 1, 2004, I begin my year as the President of APPNA. I am humbled by the enormity of the trust and confidence imposed in me. Mindful of the responsibility, I have decided to start the year with a Strategic Planning Conference.

We will meet at the Westin Galleria in Dallas, Texas, for brainstorming sessions on Saturday and the morning of Sunday, January 24-25, '04, to review the state of APPNA, the progress it has made and to determine the goals and objectives for 2004, and beyond.

During the conference, I will present my vision of APPNA for 2004, emphasizing our main theme for the year: Freedom, Liberty and Justice - Preservation of civil rights. Then we will have an overview of the past year. Following that, the Chairs of various APPNA Committees will share their goals and plan of action for the year with the membership. Everyone present will be encouraged to participate in the streamlining of the strategies and plans. I expect a candid but a civil discourse on our strengths and weaknesses and on ways to improve and enhance the scope of our organization.

It is imperative that we transform APPNA into relevant, effective and progressive organization to meet the challenges that face us in this changed world. Only by putting our minds and resources together can we overcome our weaknesses, augment our strengths and march victoriously into the future. And that is our Goal.

I sincerely hope all of you will join me in this crucial endeavor. See you all in Dallas!

---

APPNA STRATEGIC PLANNING CONFERENCE
Westin Galleria, Dallas, Texas • January 24-25, 2004

Dear APPNA Members:

Thank you all for giving me the opportunity to serve you as APPNA Secretary for the year 2003.

APPNA Membership
Our membership as of October 30, 2003 is 2,114, which is the maximum ever. Two main reasons for the increase in membership: hotly contested elections and successful Summer Meeting in Orlando.

The details are as follows:

- **Annual Members**: 1,199
- **Lifetime Members**: 521
- **Physicians in Training**: 394

Even though our membership has increased significantly, it is still only 20% of the total Pakistani physicians in this country. We still have great a potential to grow and become stronger.

Fall Meeting in Houston
We would like to thank Dr. Asaf Qadeer, Dr. Rizwan Naeem, Dr. Amin Karim, and other members of the Host Committee for working very hard to make our stay comfortable and make the meeting very successful. Total members registered for the meeting were 65. There are still some wrinkles within the local physician community which need to be ironed out, but in spite of that we are seriously considering Houston to be the host city for our 2005 Annual Summer Meeting.

Winter Meeting 2003 in Pakistan
The Winter Meeting will initially be held at Liaquat Medical College in Hyderabad on December 19, 20 and 21, and later on at SMC in Karachi on December 22, 23, and 24. The Host Committee Chairmen have reassured us that they will do their best to make it a memorable meeting.

Summer Meeting 2004
The Summer Meeting will be held at Marriott Waldman Hotel in Washington, DC from June 9-13, 2004. The meeting is being held three weeks before the usual date of July 4th. This will give the Physicians in Training an opportunity to attend the meeting. Because of the proximity of Washington, DC to the Northeastern States with the largest number of Pakistani physicians, we hope to surpass the attendance and success of Orlando meeting.

Future Directions of APPNA

- **CBL Changes:** During our recent Fall meeting in Houston, we were able to approve more than half of the changes in the Constitution and Bylaws. This process will continue and hopefully finish next year.

- **Visa Issues and Residency Placement:** Our Day on the Hill on September 24th was a great success. As a follow-up we are in the process of drafting a letter to President George W. Bush asking him to resolve this issue. This letter will be sponsored by our congressional leaders.

- **Strategic Planning for the future:** We are planning to hold a strategic planning meeting in Dallas, Texas on January 24, 2004. By setting our short-term and long-term goals we would be more focused and would strive to achieve them.
Dear APPNA members,

Your organization continues to be financially stable and is in better fiscal health today than at the beginning of the year.

I had outlined in my initial report as Treasurer that as the organization grows, it is imperative that we focus on getting the house in order, improved fiscal management, standardization of policies and procedures and most importantly align fiscal policy with the long term strategic goals.

Some of our accomplishments this year;

♦ Increased revenue generation (nearly $350,000 from membership dues and meetings) and fundraising (over $80,000 for APPNA-SEHAT).

♦ Enhanced revenue collection from outstanding receivables (nearly $50,000 in receivables from previous years was collected and the goal is to collect the nearly $70,000 outstanding as of September from this year's summer meeting before the end of the fiscal year).

♦ Introduction of Variance reports at the presentation of quarterly financial statements for better monitoring.

♦ Enhanced processes of checks and balances, reducing errors, oversights and wastes.

♦ Enforcement of regulations outlining compliance by component societies of their constitutional requirements.

♦ Improved management and separation of the CME fund.

♦ Centralized management of the summer meeting accounts.

I am pleased to report that an in-depth Manual of Fiscal Policies and Procedures was developed and presented to the executive council at the fall meeting. Besides standard operating procedures, the manual is a comprehensive document highlighting meaningful budget preparation and future earnings projections to align fiscal pol-

icy with strategic planning. It will continue to be a work in progress and I am hopeful that it will serve as a valuable resource for organization and future Treasurers.

The following is a brief summary of APPNA's Lifetime dues portfolio mix and performance for 2003 through 9/19/03.

The market rally we have been experiencing since late March or early April has been sustained.

The Lifetime Dues portfolio’s mix as of 9/19/03 is 47% ($345,680.00) income and 53% ($389,750.00) growth. A major portion of the income side is invested in preferred’s valued at $261,290.00 (cost $254,168.00) with a current cash flow yield of 6.65%. The growth portion is invested

The following balance sheet is as of Sept 30, 2003. The detailed end of the year financial statements will be mailed to all paid members.

Fig. 1: The following balance sheet is as of Sept 30, 2003. The detailed end of the year financial statements will be mailed to all paid members.

ASSOCIATION OF PAKISTANI PHYSICIANS OF NORTH AMERICA
BALANCE SHEET
(Cash Basis)

<table>
<thead>
<tr>
<th></th>
<th>12/9/03</th>
<th>9/30/03</th>
<th>2002</th>
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<tbody>
<tr>
<td>ASSETS</td>
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<tr>
<td>GENERAL FUND:</td>
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<tr>
<td>Cash in bank (Exhibit A)</td>
<td>$11,690</td>
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<tr>
<td>APPNA SEHAT FUND:</td>
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<td>Cash &amp; Investment (Exhibit B)</td>
<td>7,435</td>
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<td>LIFETIME DUES FUND:</td>
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<td>Investment - Market value (Exhibit C)</td>
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<td>Cash and Investments (Exhibit E)</td>
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<td>SPECIAL PROJECTS FUND:</td>
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<td>Cash in Bank (Exhibit F)</td>
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<td>122,345</td>
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<tr>
<td>TOTAL ASSETS</td>
<td>1,113,999</td>
<td>1,076,089</td>
<td>981,242</td>
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<tr>
<td>EQUITY</td>
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<tr>
<td>NET ASSETS</td>
<td>1,113,999</td>
<td>1,076,089</td>
<td>981,242</td>
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Dear Sir:

I want to write a letter to the editor for APPNA Journal to elucidate the controversy over Dr. Zeelaf Munir’s speech at the PAKPAC dinner last year in Islamabad, Pakistan.

Dr. Bukhari, the then secretary of Pak Pac, informed me of a change in scheduling of the aforementioned dinner as the Iranian President was in town and thus President Musharraf would have been unable to attend the Pak Pac dinner. I was unable to adjust my schedule to that of Pak Pac as my flight returning to the United States was immutable. I informed Dr. Bukhari that I would be unable to attend and that he should invite Dr. Akbar, being the president-elect, to speak on behalf of APPNA. The decision making body of Pak Pac then went down the line of Appna leadership to find a replacement as Dr. Akbar had stated that she could not attend the meeting either.

As no members of the Appna executive council could attend the meeting to represent the organization, Dr. Munir, who was eight days away from obtaining the official title of Treasurer of APPNA, was asked to speak and albeit the time constraints and pressure of the situation, was able to deliver a poignant speech representing the APPNA organization to all that attended the dinner, including the Chief Executive of the Country.

Dr. Munir rose to the occasion that was presented to her and did all of the members of the executive council and APPNA a favor. She should be lauded, not reprimanded for her efforts. I hope the matter can be better understood and the organization can spend time on issues of greater significance in the future.

Mohammad Suleman M.D.
Immediate Past President of APPNA

Dear Sir,

I read the coverage in the APPNA journal on Dr. Zeelaf Munir’s speech at the PAKPAC dinner in Islamabad in December 2002. Dr. Asim Malik has misrepresented the facts and I wanted to set the records straight.

It is customary for the President of APPNA to represent APPNA at the annual PAKPAC events. Last year, because of the change of date of the event, the then President of APPNA-Dr. Suleman, could not attend the event. Hence, Dr. Hassan Bukhari, the Secretary of Pakpac requested the President-elect Dr. Raana Akbar who declined, stating she is unavailable for that date. Likewise none of the other officers were available. Dr. Zeelaf Munir, the then Treasurer-elect of APPNA was the only officer or officer-elect of APPNA who was present in Islamabad that day hence we requested her.

After having initially declined, Dr. Raana Akbar did make an unannounced appearance at the dinner at the last minute. Nonetheless, the officers of PAKPAC requested her again and she again declined.

Although Dr. Munir had been contacted and informed just a few hours before the event, she graciously accepted the responsibility. She not only prepared and delivered an eloquent, pointed and relevant speech, she fulfilled her duties and conducted herself as an officer and representative of APPNA with courage, grace and dignity.

In conclusion, I think it is really unfortunate for members to deliberately contort and misrepresent facts.

Thank you,
Parvez Shah, MD
President, PAKPAC

Editor’s note:
Since the above letters referred to Dr. Akbar’s presence at the PakPac function, we asked her to comment on the controversy.

I had the same logistical problems that Dr Suleman had due to the change in schedule of the PakPac dinner. I thought as an elected representative it was my duty to represent APPNA’s viewpoint at the PakPac dinner. I managed some how to rearrange my schedule. I flew from Lahore specifically that morning to attend the Pakpac function. My recollection of events is different from Dr Pervaiz Shah’s. I was not allowed to speak even though I was the President-elect and a member of the executive council for that year. What has passed is water under the bridge and no longer important. The only reason I am making a point is that there have been similar incidents in the past as well where an elected President of APPNA was not allowed to speak at a PakPac event. The elected representatives of APPNA should be given the respect accorded to them, regardless of any personal difference of opinions, as they represent the will of the APPNA membership.

Raana Akbar, MD
2003 APPNA President

Three past Presidents of APPNA with President Pervaiz Musharraf of Pakistan. L to R: Javed Akhtar, MD, Arif Toor, MD and Arif Muslim, MD.
The Shock of the Blue

Salima Hashmi

Aisha Khalid's Departure for Amsterdam, to take up a fellowship at the Rijksakademie in January 2001, initiated parallel departures in her work. Khalid had already assembled a coherent vocabulary of imagery and form at that point. Trained in the department of miniature painting at the National College of Arts (NCA) Lahore, Aisha Khalid's work had already made the transition from the constraints of the discipline to an articulation of her individual concerns.

Asserting that "my work is totally tied up with my life," her painting shed the revivalist agenda of her training early in 2000. Distancing herself from the romance of myth and legend, she probed the claustrophobia experienced in a patriarchal society. Pattern and ornament proliferated suddenly, as Khalid seized upon the possibilities in that domain. For Aisha Khalid, the burqah was not a theoretical image; her sister wore it as soon as she was considered 'of age' and the chaadar was her own lived experience.

In Khalid's work of 2000, the female is hemmed in, not once but twice. The burqah engulfs her - the curtains, walls, floors rush to contain her; they constrict, smother and silence, yet there is a delight in repetition of pattern. The lotus nibbles at the edge of the burqah, the flower's lyrical message subverting the silence of the shroud. Is this a legacy of 'making' things 'beautiful'? A need so familiar to women? Or is it the nostalgia that "is part of a deep rooted human emotion that neither somnolent visionaries nor fiery revolutionaries can steer clear of - an emotion that is typically human, born not of the body's instincts, or the needs of day-to-day existence, but of mind and memory and that inherent power of recall."

It may however be misleading to interpret the sumptuousness of the surface as a need to take refuge in a resplendent past; it could be a slant to indicate other messages. "The exquisite ornamentation in Khalid's work distils a duel sense of oppression and subversion."

With Aisha Khalid's shift to Europe, her concerns and her vocabulary gained intensity, intimating other directions. Contrary to her expectations, she found the European women far from the coveted goal of equality. She states "There is an illusion of freedom of the independent woman." Symbols and images employed earlier took on new lives and fresh connotations; curtains, flowers, and floors migrated with Khalid into her new habitat. Rows upon rows of white curtained windows in Amsterdam's houses are paralleled by the crimson drapes she encountered in the city's red light district - the former wide open, the latter shyly drawn to indicate the conduct of business. The floor tiles became delft blue; the lotus turned into a rose, then metamorphosed to tulip. Researching the celebrated Dutch flower, Aisha Khalid uncovered its journey from the seventeenth century Moghul miniature into Holland. It now travelled back, re-entering the miniature after three hundred years.

A major undertaking for Khalid was a series of works gathered into the pages of a manuscript without a text. Titled "Birth of Venus", this was a sequential visual narrative. Curtains parted, revealing the lotus, which subsequently disappeared, leaving its imprint behind. The rose takes its place, red with passion or with pain - perhaps the painter herself? The burqah is retained, its meaning now altered. Khalid observed that the notion of the veil, concretised in the burqah, also seemed to alter. The possibility of the women seeing all without been subjected to the reciprocal gaze became exciting. Certainly all earlier positions had to be scrutinised and redefined.

Aisha Khalid's "Birth of Venus" compressed many divergences into a single succinct visual document. The curtains, now 'red' and now 'white' were forced into opposition. The red rose turned true blue at the end of the 'diary', just as the tulip emerged, a signifier of travels and dislocations.
Separation and difference became accentuated after 9/11. Prophetically, Khalid had selected military camouflage fabric to embroider on a month before. Embroidered roses on this surface were eloquent with menace and imminent danger. The ‘rose’ was now red with bloodshed. Khalid’s response to the bombing in Afghanistan was urgent; she returned home, unable to view events as a distant bystander.

Many concerns run side by side in Khalid’s world: the hegemony of the mighty, the exoneration of cruelty by the ‘civilised’, the deafening silence of women, and the force of desire accompanied by the urge to subdue and restrain. Her response is intuitive and passionate, but also measured.

The need to combat the onslaught of cultural stereotyping and deny the label ‘traditional’ artist, have led Khalid into investigating a range of options. From video to embroidery, to resurrecting family textile holdings, Khalid has searched and probed. Sensing intuitively that “difference currently works to organise segregation and division and even makes us desire the continuance of its frontiers”, Khalid has bravely ventured into time-based media as well as ‘low-art’ making.

Rendering the ‘mark’ in thread is not a feverish rejection of the delicacy of squirrel-hair brush; it is an attempt to gently recall submerged voices, personal as well as of those the collective. Aisha Khalid invites in other procedures and absorbs diverse practices. Her traversing of many worlds, both literally and otherwise, has heralded a fluidity in the recent works. The positioning of the female, once invisible, is now celebratory in its visibility. Even clad in the blue of the burqah (now universally recognisable thanks to the media relishing its Afghan folds) she is now willing to confront the viewer. Once the burqah figures were turned to the wall; they now turn full frontal to face the tulip.

Centuries of cultural conditioning are filtered into ‘Visible / Invisible’ 1 and 2. The dominance of the centre invokes a shared pilgrimage. Oblique in its references, the revelation of the red emerging from within lends itself to many readings. Using her father’s marriage garland, she gathers glowing, jewel-like memories into the velvet black of the curtained cube. For ‘Visible/Invisible’-2, Khalid sifted through her mother’s trousseau, lifting the fabric into a fresh context, urging it to speak in a different voice. The glitter of the gold offers up the body, an invitation to life. This is provocative use of fabric, piercing it to reveal the density of the layers beneath.

Aisha Khalid has simultaneously altered the scale of the work. The cramped intensity of the ‘miniature’ format has been prised open, The curtain is retained, but the submissiveness of textile is under debate. Its conspiracy to conceal is dispensed with, and its blue presence is monumental. The broadening of scale makes the work almost poster-like, underlining an air of expectation. The tulip is both spectator and conversationalist as it wraps itself around the blue.

Not wanting to desert the intimacy of the diminutive, Khalid complements each large work with a small one, which although not an echo, reverberates with possibilities of dialogue. This is where dichotomies in her work become manifest.

This yearning to be on both sides of the divide, respecting difference, is perhaps at the core of Aisha Khalid’s art. There is an unwavering passion for truth with a covert understanding that it will be evasive. Such longings will have to settle for compromises. The struggle will be inconclusive, but will have to be waged.

4 Hashmi, p.157.
5 Griselda Pollock, Differencing the Canon (London: Routledge, 1999), p.11.
The mealy-mouthed apologists with the mantra that Islam was the first religion to give rights to women 1400 years ago obfuscate any discussion about the plight of women in Pakistan. Well, no one is arguing with what Islam offered to women in the seventh century - a share in inheritance, banning of female infanticide, and the right to divorce, among others. But wasn’t that more than a millennium ago? Shouldn’t contemporary yardsticks be used to judge the status of women in our society? And that, unfortunately, is the crux of the matter: we refuse to acknowledge that there is a problem.

We are in denial about the second-class status of women in our society and how our biases perpetuate that status. We rant about the decadence of Western culture, but resort to chicanery when uncomfortable realities like forced marriages and honor killings are brought up. Our moralizers are obsessed with petty issues like a woman’s dress or head cover, but the real scandal, the systematic discrimination against women by the state and the society fails to arouse their conscience.

Although we preach a lot about education, our literacy rate remains a pathetic 45% with an appalling gap between male and female literacy (56 vs. 32%). In rural areas where two-thirds of our people live, the female literacy spirals down to 12%. Only about 3% of our population makes it to a college or a university where despite an overall superior performance by women their entry is restricted to a handful of reserved female seats. Many are forced to prematurely end their education by family and spousal pressures.

Things don’t get any better in the health care area. The health indicators of Pakistani women are amongst the worst in the world. Pakistan is one of the few countries with fewer women than men, who live shorter lives, almost half are anemic, an average woman gives birth to more than five children, and about 1 in 38 dies from preventable pregnancy-related causes, not surprising as a trained provider assists only 1 in 5 during delivery. We keep women malnourished by giving them less to eat, marry them young and keep them pregnant or breastfeeding. These physical and emotional stresses undoubtedly contribute to a shorter life expectancy and disproportionately high psychiatric illnesses in our women.

In the economic arena, most women work as unpaid laborers both at home and outside without getting any recognition in the national productivity statistics. We rob them of the opportunity to study and limit their career choices in the name of Chadar and Chardiwari. Those who do get out face hardships due to a lack of supportive facilities like childcare, transport, and housing, made worse by sexual harassment in the work place. This discrimination relegates women to casual, low paid jobs that restrict upward social mobility.

We have done disgraceful things against women in the legal sphere. Although the 1973 Constitution guarantees equal rights to all citizens irrespective of sex, race, and class, the discrimination against women goes on with impunity. They have fewer rights to inheritance, divorce, and natural guardianship of children; they can be humiliated with polygamy and are often forced to stay in abusive relationships, as there are few provisions for subsistence and child support after divorce. Women have unequal rights under the citizenship laws, which guarantee citizenship through the father or the husband, but no citizenship through mothers or wives.

Anachronisms like the Hudood laws protect rapists and punish sexual assault victims in the name of adultery. It is mind boggling to see a society so punitive against women falsely accused of adultery turn a blind eye towards male adulterers in brothels and red-light areas that thrive in every city in Pakistan. Thanks to the law of Evidence, being a half-witness, a woman cannot even testify in her own defense. The Qisas laws reduce women to the status of a man’s property that can be exchanged in a financial transaction.

In political arena, we boast about electing a woman prime minister as a sign of female progress in our society. In reality, female representation in the elected bodies has always been a pathetic 0.1-3%. Women are almost non-existent in state institutions like the Army, civil bureaucracy and judiciary, whose policies impact the lives of millions of women.

So who is responsible for this wretched state of affairs? Ignoring the rhetoric of the self-appointed custodians of morality, the simple answer is patriarchal values. In other words, we accept the superiority of men in our society, giving them a disproportionately large share of legal and religious power. These patriarchal values are reinforced by local customs and tribal traditions, which view female sexuality as a threat to male honor. This obsession with female sexuality and honor leads to forced segregation of women in the name of purdah, domestic violence to keep them subservient to male wishes, and honor killings perpetrated by their own relatives in the name of izzat and ghairat. At a larger level, this attitude is responsible for institutionalized discrimination against women condemning them to an inferior status in society. Women themselves, lamentably, internalize these gender biases and play an instrumental role in creating the same gender ideology for their children.

Is there a remedy? Yes. Sincere and objective solutions based on scholarly research and empiric models have been proposed. But the question remains, who is going to implement them? I don’t know the answer, do you?
The Pakistan Fund at Johns Hopkins University

Nilofer Afridi-Qazi

The Pakistan Fund at the Paul H. Nitze School of Advanced International Studies (SAIS) at John Hopkins University: Washington DC is a pioneer initiative at one of the most reputable academic and public policy institutions in the Capital. The timing and necessity of such an investment is self-explanatory. The American Pakistani Physicians National Association (APPNA) should lead this initiative as one of the leading organizations within in the Pakistani American community.

SAIS has the only dedicated South Asia Studies program in Washington DC, which is incredible given the focus and interest in the region. The current think tanks in Washington DC who have an interest in the region, primarily focus on non proliferation issues and military strategic trends (e.g. Brookings Institute, Stimson Centre and Carnegie Endowment for International Peace). There is a one dimensional interest in Pakistan in the current public policy circles. Currently, any conference or discussion on Pakistan or related issue rarely has a Pakistani on the panel or in the audience for that matter. This has to change.

SAIS, can provide a platform for this change. SAIS offers courses for MA and MIPP students (mid career public policy one year degree), research, publications, internships and opportunities for Visiting Fellows to join the various institutes and programs at SAIS for a period of time. This provides an opportunity for a broader insight into the region with a variety of perspectives. Moreover, the spectrum of Pakistani studies with this Fund will allow an integrated and long term investment in a broader and a more holistic approach to Pakistan in the nation’s academic and public policy circles.

SAIS intends to outreach to the Pakistani American community all over the United States and businesses for this initiative. This will involve fund raising dinners all over America with the assistance of local Pakistani American leaders of the community. SAIS hopes APPNA will lead the way.

SAIS hopes the Fund will become an annual fund raising focus amongst the community. The current aim is to provide sufficient funds for MIPP students, Visiting Fellows and sufficient funds for conferences, outreach and internships on an annual basis. The average MIPP/VF costs about $45,000 annually. We hope the Fund will gather generous benefactors which will allow the Fund to become part of a permanent Endowment eventually.

I would encourage members of APPNA to contact Mr. Amir Pasic (apasic1@jhu.edu), Senior Director at the Development Office at SAIS or Nilofer Afridi-Qazi (nilofer-aq@jhu.edu) at the Foreign Policy Institute for further details of the Fund, regarding contributions and possible fund raising dinners in your local community.

Ms. Afridi-Qazi is Director of the South Asian Women in International Security(SAIS) Program, Foreign Policy Institute at Johns Hopkins University.

TREASURER’S AND FINANCE COMMITTEE REPORTS

continued from page 8

with Rittenhouse Large Cap Growth (38% or $147,150.00), MDT Advisors All Cap Core (39% or $152,797.00) and Lord Abbett Small/Mid Value (23% or $89,802.00). Recently we terminated Oppenheimer Large Cap Value as per Smith Barney’s Consulting Group downgrading due to loss of key money management personnel. We added Harris Bretall MDT Advisors Optimum Q, an all cap core manager, that will add diversification and increase flexibility for the manager to allocate to areas of opportunity. The overall growth has been 10-15%.

As per the strategy we set early in 2003 we continue to monitor the ratings of the preferred stocks and the performance of the money managers. The underlying philosophy has been preservation of capital. Also, as per the policy recommended by the finance committee and subsequently approved by the executive council, any and all transfers of funds will need written approval from the Treasurer and Chairman Board of trustees. This will also be reflected in the corporate resolution maintained by Smith Barney which should be renewed and updated every year.

It has been an honor serving the Association as Treasurer and I would like to thank you for providing me this opportunity. I would also like to thank the members of the finance committee for their due diligence and on their behalf would like to thank members of APPNA for providing us the opportunity to serve. I look forward to their and your continued support in the future.
Association of Pakistani Cardiologists of North America

We are presently assessing the interest level among prospective members to form the “Association of Pakistani Cardiologists of North America” (APCNA). This society will be a not-for-profit professional organization. All Cardiologists and Cardiac and Vascular Surgeons of Pakistani descent residing in North America will be eligible for membership. It will function as a component society or affiliate of APPNA.

The objectives of the association will be:

♦ To provide support and information helpful to the needs of North American Cardiologists of Pakistani origin and to function as a venue for educational, charitable and cultural activities that allow members to share common ideas and discuss mutual concerns.

♦ To contribute to the advancement of Cardiovascular Medicine in Pakistan and to form productive links with the cardiology community of Pakistan.

A meeting of qualifying interested physicians is tentatively scheduled during the ACC Annual Session in New Orleans, Louisiana in March 2004. For further information, please contact Dr. Javed Suleman at: 347-678-2734 or email with your contact numbers at: JSULEMAN@aol.com.

In the news...

Gov. Perry Appoints Six to Texas State Board of Medical Examiners

AUSTIN – Gov. Rick Perry today announced the appointment of six individuals to serve on the Texas State Board of Medical Examiners for terms to expire April 13, 2009. The board regulates licensed healthcare professionals in Texas and educates consumers regarding their rights in seeking quality health care.

Dr. Amanullah Khan of Dallas is the president of the Cancer Center Associates of Dallas and McKinney. He is a member of the American Medical Association, Texas Medical Association and the Dallas County Medical Society. Khan formerly served on the board for the Texas Department of Health. He is also a member of the St. Vincent Medical Foundation, the Kindness Foundation and the President’s Advisory Board for Asian Americans and Pacific Islanders. He received his medical degree from King Edward Medical College in Pakistan and the Graduate Research Center at Baylor University.

Smith Barney On Planning:

Every good investment strategy begins with a plan.

A plan, however, is only as good as its planners.

A Smith Barney Financial Consultant can help you focus your financial objectives, anticipate your changing needs, and, working with professional money managers, create a customized investment strategy. Put the knowledge, experience and resources of the world’s largest financial group to work for you.

Make your money work smarter. Call Hank W. Bashore, Senior Vice President–Investments, (214) 720-5090, Mac Hargrove, Second Vice President–Investments, (214) 720-5078, or (800) 527-5814.

The Plan:
- Retirement Analysis
- Asset Allocation Analysis
- Education Funding Analysis
- Estate Planning Analysis
- Distribution Analysis
- Employee Stock Option Analysis
- Net Worth Analysis

The Planners:
- Your Financial Consultant
- Citigroup Alternative Investments
- Consulting Group
- Private Portfolio Group
- Portfolio Management Group
- Guided Portfolio Management
- Philanthropic Services
- Citigroup Trust
- Lending Services
- Insurance Group

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APPNA Annual Winter CME Meeting

New Discoveries in Modern Medical Practice From Bench side to Bed side

In Karachi, Pakistan THE CITY OF LIGHTS AND THE CITY REVIVED from December 22nd to 24th at Pearl Continental Hotel and Sind Medical College JPMC.

Meeting Chair: Dr. Nadeem A. Kazi
Co-Chair: Dr. Rizwan Naem: President SMCAANA
Co-Chair: Dr. Jawaid Sullaiman: President Elect SMCAANA

Local Host Committee
Dr. Saeed Akhter Dr. S. M. Rab
Dr. Farooq Sattar Dr. Asghar Mehdi
Dr. Ghazanfar Taqvi Dr. Shahab Ullah Khan
Dr. I H Memon Dr. Babar Saeed Khan

This years APPNA annual meeting is unique in many respect as APPNA is coming back to Karachi after many years. Sind Medical College and JPMC are honored to bring APPNA back to Karachi and be the host this year. Please join us and get registered by contacting APPNA central office. Some of the highlights are:

1. Eights hours of CME program both at Pearl Continental Hotel and SMC and JPMC.

2. Continuation of BCLS/ACLS workshop.

3. Extension of ACLS program to Pediatrics PALS workshop.

4. Large number of Faculty members will be participation in clinical rounds and clinical cases conferences to train students and residents in the wards to have one on one contact.

5. Excellent Hotel rate of RS:3000.00 about $50.00 per night by contacting SMCAANA and APPNA

Karachi Meeting CME program

December 22
Welcome reception by the local host committee

December 23
Four Hours of CME
Dinner by APPNA
Invited guest
Governor Sind Dr. Ishrat-ul-Ibad
Dr. Farooq Sattar a SMCian and the Leader of the parliamentary party

December 24
Four Hours of CME

Dinner SMCAANA/Local host committee
Invited guest
Prime Minister Zafar ullah Khan Jamali

Faculty:
Gastroentrology
1. Arif Muslim M.D
2. Nadeem A. Kazi
3. Syed Abdus Samad

Cardiology
4. Javed Sulliman M.D.
5. Zia Moiz

Genetics and Cancer Update
6. Rizwan C. Naem M.D.
7. Shabir Safdar

Infectious Disease
8. Dr. Syed Iftikhar Hussain
9. Dr. Adeel Butt

Pediatrics
10. Dr. Kaukab Saeed
11. Dr. Sajida Malik

Psychiatry
12. Dr. M A Saeed

Internal Medicine
14. Dr. Sohail Siddiqui
15. Dr. Moin Fikree

Transplant:
16. Dr. Saeed Akhter:
Experience with Pediatric renal transplantation in Pakistan

Physical Medicine and Rehab
17. Dr. Shenaz Karim

Local Faculty:
Dr. A H Soomro Principal SMC
Dr. S M Rab
Dr. Saeed Akhter
Dr. Farooq Sattar
Dr. Asghar Mehdi

ACLS and PALS workshop Co-ordinator
Dr. Saeed Akhter
Dr. Moin Fikree
Dr. Kaukab Saeed
Tri-State Young Doctors’ Seminar

Mahmood Alam, MD, Chaudry Ghumman, MD

It was a nice Sunday afternoon on September 14, 2003 when more than 200 participants showed up in New York from all over the Tri-state area at the seminar organized by NYC-APPNA. This seminar was divided into two sessions. First session exclusively focused on the problems faced by young physicians and second session was dedicated to Pakistani-American Physicians and their role in the community.

In the first session, Dr. Mahmood Alam focused on the important issues confronted by the young International Medical Graduates (IMGs) in his introductory remarks. He ensured the audience that different faculty members were going to focus on these issues and would suggest solutions to overcome these problems.

Stephen M. Perlitch, Esq., an immigration attorney and counselor at law spoke about “Negotiating the Immigration Maze” and suggested how an attorney can help. He spoke about J-1 waiver at length and also went into details regarding H-1B Visa, National Interest Waiver, Labor Certification, O-1 Visa, and F-1 Visas. He was optimistic about being able to help those in need even in these days of anti-immigration sentiment and deportations.

“What options do I have with a borderline USMLE score?” was the topic of next power presentation by Dr. Alam. He focused on the issue peculiar to those with marginal scores in USMLE and residing in the US without a residency position. He advised such candidates to stay focused and to not give up. Key suggestions included getting counseling, set priorities, know ones strengths and limitations, explore a variety of opportunities within the healthcare system and improve ones qualifications by getting involved into different research options that can lead to publications. Doing MPH or masters in biological sciences may put a feather on ones cap that could impress a program director. One may consider changing ones profession to fields like information technology and computer science. These were some of the suggestions he could elaborate on while addressing to the most disenchanted group of IMGs.

J1 Visa issuance and Security Clearance-A Change in US policy: This burning issue related to the entrance of IMGs into the US after obtaining a legitimate training job, was addressed by Dr. Nasir M. Gondal, who is also a Co-chairperson of the APPNA Taskforce on this issue. The Mission of the Taskforce is as follows:

- To assess the magnitude of J-1 refusals and to identify the reasons behind this policy.
- To find ways to facilitate visa issuance.
- To create a Data Base of Physicians affected by Visa Refusal & Security Clearance and
- To develop recommendations for long term policy related to the issue. A detailed report of the taskforce was published in the fall issue of the Journal.

He suggested forming a Standing committee on young physicians with the provision of funds and staff to deal with this important task. He also suggested getting all the Alumni associations involved to start an organized effort in this regard. Moreover, he pleaded to establish and maintain contacts with legislators as a part of long term struggle to face this problem in future. We know now
that US embassy in Islamabad can be influenced in a variety of ways and we should use all these avenues to deal with that office, he added. The importance of media can not be underestimated either, he concluded.

"What APPNA should do for us and How"? This was the topic of talk presented by Dr. Faisal Cheema as a representative of young doctors. He gave an elaborate account of proposals to APPNA and suggested the means to go about them. He asked for compiling a comprehensive directory of Pakistani-American physicians who could offer help for those who need it. Directory of physicians in academics was even more important, he added. He suggested to set-up an interactive Web site where most physicians can log-in and exchange information. Dr. Cheema gave innovative ideas to address issues related to visas, research opportunities, externships, residencies, and provision of scholarships.

Dr. Hussain Malik, president-elect APPNA responded to Dr. Cheema's presentation. "What APPNA can offer to young physicians?" It was the question of the day. He briefly told what help APPNA members have provided in obtaining the residencies and externships. Some physicians were also placed in J-1 waiver positions by APPNA offices, he added. He suggested incorporating most of the suggestions made by Dr. Cheema in the next five year plan by APPNA.

Mr. Jack Liao, Assistant Director of FBI, NY, and special agent for security clearance was the next speaker. He appreciated the cooperation he and his bureau got from Pakistani-American community and offered his help to work on the individuals confronted with security clearance process. He informed the audience that computer system has been up-graded and its link to different agencies is being contemplated in order to streamline information. Once it's done, the delay in the clearance process should resolve, he speculated. He reiterated the notion that "we" are not against the Muslims but the terrorists.

The Keynote speaker for this evening was Dr. Busharat Ahmad, a life member of APPNA, who helped in the creation of IMGs section of American Medical Association (AMA). Most recently, Dr. Busharat was appointed to the Board and elected as a Secretary of the Education Council for Foreign Medical Graduates (ECFMG). In his speech titled, "IMGs – Opportunities & Challenges", he addressed the Seminar briefly. Dr. Busharat painted the positive picture of being Pakistani-Americans and suggested to take proactive role. He mentioned that opportunities come with challenges and it's our responsibility to face them with honor and courage. He emphasized on the involvement with the community. Dr. Ahmad assured the young physicians that he will do all he can from the AMA and ECFMG platforms. He encouraged the audience to become members of AMA.

After the keynote address a questions and answers session was conducted. Young physicians actively participated. A lot of questions were asked from Mr. Stephen Perllish, immigration attorney and Mr. Jack Liao, FBI director for security clearance. Moreover, participants wanted to know when and how APPNA would do anything about the recommendations that are made today? Nevertheless, overall response was positive and this effort on the part of NYC-APPNA was much appreciated.

The second part of the program was conducted by Dr. Chaudry S. Ghumman, the President of NYC-APPNA. A brief video presentation on Asset Management was given by vice-president of Nationwide Provident, Mr. Pervez Mehmood. This was followed by recognition and award giving ceremony for the outgoing Pakistani Consul General of New York, Mr. Mohammad Hafeez. Dr. Faheem Butt gave a brief speech in recognition of Mr. Hafeez's services to Pakistani-American community. Mr. Hafeez in his farewell address thanked the community for its support. Mr. M. Haroon Shaukat, the incoming Consul General of New York, pledged to follow the footsteps of his predecessor. The Chief Guest of this session was Mr. Ashraf Jehangir Qazi, Pakistan's Ambassador to the US. He was introduced by Dr. Asim Malik. He spoke on the present state of relations between Pakistan and USA. He told the audience that Pakistani Government was fully cooperating with US in the fight against terrorism. He spoke about the Camp David meeting of General Musharaf and President Bush. He told the APPNA members that President Musharaf did express his concern about Visa problem of Doctors to President Bush. Mr. Qazi was very articulate about the issues affecting to the security of Pakistan and Government's commitment to safeguard its borders. "I am here to plead the cause of Pakistan to the best my ability" he added. He extended full cooperation of his offices to all Pakistanis in America.
APSA: Defining a Common Vision for South Asia

Zafar Iqbal, MD, Amit Shah, MD

Home of one fifth of humanity and despite being rich in natural resources and cultural heritage, the social condition of South Asia today, with rampant poverty and endless conflicts, continues to be a cause for concern for us all.

Consider the following:

♦ 45% of South Asians live below the international poverty line of $1/day.
♦ Half of the world’s malnourished children < 5 years, 1/3rd of all maternity deaths and the largest number of adult illiterates are from South Asia.
♦ The communal/ethnic strife in most South Asian countries, rock the foundations of their national democracies and regional economies.
♦ If India and Pakistan cut their defense spending by a mere 5% p.a. over five years, an estimated $22 billion of “peace dividend” could release four times the resources needed for universal primary education.
♦ Ongoing cost and threat of mutual nuclear deterrence are unspeakable.

Today, all of us must also acknowledge the achievements of Pakistanis and Indians abroad and at home, in various fields including education, business, science, technology, academic life, and literature. And though justifiably known for women’s oppression, both countries have had women political leaders, activists, journalists, diplomats, novelists, and filmmakers. Progress will continue to elude both societies in the absence of good governance and security. For both peace is essential.

There are as many Muslims in India as there are in Pakistan. A Pakistani who cares about the welfare of...
Muslims everywhere must surely see that a weak and impoverished India is not in the interests of Indian Muslims. And if the hostility persists, Pakistan’s own interests will remain hostage to it. Indian nationalists concerned with India’s strength, prosperity, and security (or those aspiring to revive Hindu greatness) must see that a prosperous and democratic Pakistan is good for India and a weak and hostile neighbor is a liability.

The armed tension between them aggravates their poverty. Vast portions of their budgets have been devoured by their relentless search for military security or advantage with respect to the other. Their rush toward nuclear weapons compounds this vicious cycle.

The stakes are enormous. South Asia accounts for almost one-fifth of the human race. The populations of all South Asian countries are still predominantly rural, and their national economies rely substantially on the prosperity of farmers. All South Asian nations face common, even interrelated, problems of drug trafficking, international crime and terrorism. Cooperation on those would be of mutual benefit. All also face similar challenges of illiteracy, child labor, and oppression of women. But their common problems also offer the occasion for cooperation, which would be of mutual benefit. They could share experiences and learn from each other.

Peace is not merely an absence of violence but a positive state of social wellbeing. The true social wellbeing can be brought about without participative and sustainable development. Democracy and tolerance to religious and cultural diversity are essential for this process.

The initiation of such a visionary enterprise must come from both the political leaders and the business and cultural leaders and professionals including physicians, academicians and technocrats of all countries. Role of grass-roots organizations already addressing these problems is of enormous importance. Civil society can and must push politicians to do what is right. Separate advocacy and lobbying has not been effective to solve important problems of South Asia neither it has resulted in better security. Separate lobbying efforts has only benefited politicians and few wasted interest groups. Creating separate India caucus and Pakistan caucus has divided the South Asian community into artificial divisions and nobody has benefited. South Asian community is spending millions of dollars for advocacy and lobbying but without any meaningful outcome which can help common South Asian American or an average person in South Asia.

Rather, cooperation and common advocacy on common issues will yield a much richer dividend. It offers the almost certain prospect of more prosperity for business, better security, poverty reduction, popular empowerment and peace. In this process of collaboration, each could become what it aspires to, and what the other would respect rather than fear.

People of South Asian Origin can play a very important role in this peace process. About 1.6 millions South Asians, including about 60,000 physicians live in United States. They love their motherland and take pride in their rich cultural heritage. Most of them want to give back something to bring peace and prosperity in their country of origin. The time has come when we, South Asian-Americans can not afford to remain silent. South Asians must come together on this one common forum. Physicians can exert tremendous influence in their respective countries and people at large.

In order to work for peace and prosperity in South Asia, we have formed an “Action Group of Physicians of South Asia” (APSA). Started in July 2003, APSA is a well-connected forum of many Indian and Pakistani physicians who are open and honest in their mission.

After a long discussion on hard issues like Kashmir and religious intolerance etc. APSA recently came out with a resolution, which has broken from the traditional stated positions of Indians and Pakistanis.

**APSA’s RESOLUTION:**

Action group of Physicians of South Asia sincerely welcomes recent resumption of peace process aimed at normalizing relations between India and Pakistan. Relaxation of the restrictive visa regime and the restoration of air, road and rail links will facilitate people-to-people contacts and ease the hardships suffered by the peoples of the two countries.

The far-reaching initiatives include a new bus service between Srinagar and Muzaffarabad, a ferry between Mumbai and Karachi, the restoration of Khokhrapar – Munabao link by rail or road, free (by-foot) crossing of the Wagah border by senior citizens, resumption of sports-contacts, a hotline between the two coast guards, non-arrest of fishermen at sea, etc. In addition, willingness to restart the ‘Samjhauta Express’ and to increase the capacity of the Delhi-Lahore Bus services are also important steps.

While welcoming these fresh proposals, APSA would like to emphasize that peace and cooperative relations between the two countries require that both governments sincerely engage to settle the Kashmir dispute keeping in mind the wishes of the people of Jammu and Kashmir as declared on several forums since 1948.

It is obvious that neither Pakistan can force the solution by supporting terrorism nor India can keep peace in Kashmir with the use of force. The Kashmir dispute has held peace hostage in the subcontinent and without a substantive political dialogue that addresses the Kashmir dispute no sustainable peace can be built.

APSA also believe that strengthening democracy and curtailing religious extremism is important for long lasting peace and prosperity in South Asia.

Drs. Shah and Iqbal can be reached at Developinpeace@yahoo.com
Greetings and salutations we are offering. We are the Professor of Desiology but you may call me Your Royal Desiness. We are congenital purfessors. My great grandfather was awarded the original PhD by Malika Victoria herself and since then purfessor- ness has passed in the family jeans from father to son. For generations our family has adducated the less fortunate amongst us so that the best and brightest of them may become Depty Collectors and serve Malika Victoria's ancestors with loyalty and devotion.

Desiology is the study of desi behavior in foreign lands. My sub-speciality is my ispeIIing talent, as is obvious from my rightings.

During my childhood, I used to watch black and white television programs from foreign lands with great interest. "What intelligence, what isnow-whiteness" I used to marvel. Even lady dogs and dolphin fishes used to convey complex situations by a "woof woof" or "chirrup chirrup" to their white mistresses. For instance Miss lady dog would say "woof" and isnow-whiteness would say "What, there is a bomb in the tunnel." So impressed I was by it all that I would point to the TV iscreen and say to my mother, "Maan, I want one of these." She would always pat me on my well perfumed-oiled head and say "Go to sleep today I will get you one tomorrow." But she never did. She thought I meant the lady dog when in fact I was pointing to isnow-whiteness. Therefore I decided to come to the promised land myself to help myself to isnow-whiteness.

But I was in for a shock or two. The world of TV was all fraudulent. For starters I found many Afreeqi peoples living here! And they ispoke Inglish! Their pigmen-
Being the inquisitorial type, I wanted to know what if anything was made locally. So I asked Miss Mable. She is Chancellor sahib's secretary and she always smiles at me. (Oof, what I am to do!). She told me apple pie is all homemade. So I bought an apple pie. But I am suspectful it was also alien because it contained mono-potassium glutamate and that is mostly used by the Chinese for their cookery.

The peoples of this country ispend all their time resting or playing and therefore all the work is done by migrant workers who are also known as illegal aliens if the economics gets bad. Many daaktars from our country migrated to the ismall dakterless towns and villages of this country and became mono-ocular kings of blindvilles where they collected so much wealth that they were able to gold plate their bathroom fawcets and their wives. To dissolve with the locals they: 1. Joined country clubs and played golf even though they would have preferred gulli danda. 2. Called their isnow white friends by their first names and had their children sell lemonade and their wives perform bakery sales. Isplendid isolation caused complex psychological illnesses in these daaktars. They would ispeak in very loud voices in public places and would indulge in unsolicited auto introduction never forgetting to mention their profession and ispeciality. Unfortunately most send their ispoilt childrens to me for higher adducation. But I do not tolerate any mannerlessness. One day my class istarted punctually at 8 AM and most istudents istrolled in by 9 AM and I arrived promptly at 10 AM. Well, here arrives this barqhurdaar at 10.30 AM. When I pulled him by the ear lobules he istarted to show me his eye-balls. "Don't look at me in that tone of voice" I said. He advised me to go and procreate! And even though I am partial to such activity (having four wifes, you see) I decided to suspense bar­qhurdaar for 1 week from my class. Next day he arrived with Papa Huzoor who was preceeded by his eyeballs by thirty seconds. "I am Daakhtar XYZ and I am a urinologist. Who do you think you are to suspense my child" he thundered. "Glorified migrant worker of diseased dirty pipes" I responded calmly, "We are angrezzon ke zamaney key purfessor." But he remained unimpressed. "Do you know how far I can reach?" said he breathing onions and masala into my face. "No I don't, and given your occupation I rather not imagine either" said I in all honesty. Well he reported me to the Federal Bureau of Instigation who informed me I was a terribilist and as such would be locked up in a federal repenetentiary at a see-side resort for an extended all expenses paid vacation. But Allah bakhshyes Chancellor sahib made important telephone calls to the authorities and explained that the nation's ispelling would go down the drain without my able guidance. Well not everyone has my hasab nasab and my adducation. After all "Hum angrezzon key zamaney ke purfessor hain, hum ney jis ko parhaya wo depty collector ho gaya."

By Shahabul Arfeen, MD. The author practices Nephrology in Valparaiso, IN in his ispare tim.
It was a great honor and privilege to represent the Association of Pakistani Physicians of North America (APPNA) in the American Medical Association (AMA). APPNA’s provisional appointment as a member association by AMA to the SSS (specialty and service section) is a historic occasion. If the representation and the involvement of APPNA’s representative remain consistent for the next three years, this will become a permanent position for APPNA. This is a great opportunity for us because the AMA House of Delegates has minimal representation, if any, from people of South Asian origin.

The next morning was the opening session of the SSS meeting where Dr. Ahmed graciously introduced me and APPNA to the audience. I was welcomed by the chair as APPNA’s representative to SSS. Throughout these meetings, Dr. Ahmed took me to multiple groups, meetings, lunches, and caucuses, etc. to introduce APPNA and to emphasize the Pakistani physicians had finally “arrived.” My presence and introduction also helped develop and define the positions of APPNA during several of the committee’s deliberations. The meeting was lengthy and multiple topics were discussed. Topics pertinent to the IMGs were the shortage of physicians in relation to importing International Medical Graduates. The SSS house basically voted against the support of this resolution. Extensive discussion took place on the pertinence of secondary healthcare providers, who due to the lack of physicians in those specialties are trying to take over healthcare delivery as alternate healthcare providers such as nurse practitioners, psychologists, optometrists, etc.

Congressman Fox, from the Hawaii Congress and Senator Swantekka spoke to the house as well and gave us several tips on how to lobby. The main points they made were:

Lobbying should not be considered a dirty word. It is something that is definitely encouraged by the legislatures as this educates them.

Patient safety and advocacy should be kept at the forefront.

Also, go well prepared and be ready to discuss the pros and cons.

Do not act like a salesperson.

Discuss only the merits of your proposal.

That afternoon we discussed several resolutions during the Michigan State Medical Society (MSMS) caucus. Several of the above mentioned resolutions were again discussed by some other IMGs from Michigan, Dr. Ahmed and I and we were able to convince the delegates to support our resolutions.

That afternoon during opening session of the House of Delegates, the AMA president Dr. Donald J. Palmisano,
M.D. discussed the successes of the AMA work at the legislature level. This was subsequently discussed in several later sessions including the SSS meeting, the Michigan caucus, and the House of Delegates meeting. The AMA has been significantly successful in getting Congress to pass the new Medicare bill for drug coverage. This reverses the original plan to cut down physician payment by 4.5% to a positive 1.5% increase in 2004, which makes a net change of 6%. This is a tremendous success for organized medicine and AMA. On the average, this bill translates into $8,500 per physician change to the positive, which may translate somewhat differently for each state. The details of this are available through AMA.

The next morning we started again at 6:30 a.m. to discuss the resolutions and this time the Michigan caucus attended the caucus with Great Lakes Delegate representative for individual committees. Subsequently, the House of Delegates meeting, which started at 7:45 a.m. sharp, had a memorial for the Pearl Harbor attack, which occurred on Sunday, December 7th, 62 years ago. Coincidentally, this day was a Sunday, December 7th as well. The tribute was paid to the physicians who lost their lives as well as the physicians who spent numerous hours taking care of the wounded and injured during the Pearl Harbor attack. Then the rest of the morning, after the House of Delegates meeting, was spent in different committees and again both Dr. Ahmed and I actively lobbied on behalf of the International Medical Graduates.

My trip to Hawaii was spent 100% indoors, because the meetings usually started at 6:30 or 7:00 a.m. and continued until about 6:00 or 7:00 p.m. So here I was in Hawaii spending most of the time indoors exchanging ideas with other delegates and members at large introducing the Pakistani physicians. The meeting was at the Hilton Hawaiian Village, which was "a village" in itself, but I remained confused as to the natural Hawaiian habitat. These surroundings have been extensively duplicated across the continental USA. I recalled the Hawaiian Village in Walt Disney World and in comparison I wasn’t sure as to what was natural flora and fauna and what was artificial. The only reprieve we had from the meetings was one afternoon when Dr. Imam-Ur-Rahman, who is the president elect of the Hawaii Medical Association was kind enough to take us out for lunch given by one of the local organizations. This organization is basically a component of all the South Asian groups including people from Sri Lanka, Bangladesh, India, and Pakistan, etc. We drove several miles to a suburb to a meeting hall, which had verandas and with continuous rain, I was reminded of the monsoons. The local talent presented a brief entertainment program, including a discussion and comparison of different religions starting from Buddhism to the Bahai religion with various traditions about fasting. Dr. Rahman presented his poetry, which was very much appreciated. Back in the trenches we lobbied further for all causes related to International Medical Graduates.

Monday morning was the last day when I attended the SSS meeting. It was very heartwarming to see that all the resolutions we had lobbied for had been approved and were ready for discussion on Tuesday at the House of Delegates meeting where Dr. Ahmed, as a delegate, would further help in getting them approved by the AMA House of Delegates.

The take home message is that we have to stay involved with organized medicine. I would strongly encourage our (APPNA) members who are not members of AMA to become members of that organization. They are ready to listen, understand our problems, and help resolve them, if possible. Some IMGs may have some problems or concerns with the AMA policies, but I would argue for participation. They are ready to listen and change. I would encourage everybody to become members of AMA and members of local county and state medical societies. We need to be heard and the only way that will happen is if we speak up.

All the recommendations supported by us had some opposition, but after we presented our point of view they were finally amended to our liking. The remarkable work that the AMA has done to reverse the 4.5% decrease in physician Medicare reimbursements from 2004 and change it to a +1.5% for 2004 and 2005 translates into a 6% change for physicians around the country. Quoting from Dr. Ron Davis’s report, who is a member of the AMA Board of Trustees and is from Michigan, “This means more than $16,000 increase in payment per physician from Medicare for 2004. This is a really good investment for the 400 and some dollars, which are the yearly AMA membership dues. (The $16,000 increment in the payment keeps in consideration the fact that this policy change has improved physician payment by 6%, comparing the proposed 4.5% cut to the final version where payments were increased to 1.5%).

Dr. Busharat Ahmed in action.
The relationship between the Association of Pakistani Physicians of America and the Human Development Foundation of North America has never been clearly defined and formalized.

In July 2003 representatives of both organizations held a meeting and agreed to form a working group with two representatives from each organization. The task for this working group was to come up with recommendations to formalize this relationship. These recommendations were, then to be considered by the executive council of APPNA and the board of HDFNA.

Regrettably, no such recommendations are available to present as of this writing.

The working group has done some work but has not made much progress. The reasons for this are not completely clear. However, some possible explanations are in order.

After initial appointment of Dr Khalid Riaz and Dr Shaukat Khan by HDFNA and Dr D. Gilani and Dr Aslam Malik by APPNA, Dr Khalid Riaz got the process underway. Subsequently Dr Riaz was replaced by Dr Naheed Qayyum by HDFNA.

On July 14, 2003, APPNA (by letter from Dr Akbar) requested some documentary information from HDFNA. Dr Khalid Riaz wrote back that information will be completed and sent to APPNA. This never happened.

On Nov 16, 2003 Dr Malik spoke to Dr Shaukat Khan and on Nov 17 & 18, 2003 faxed him APPNA's position paper as possible basis for discussion and also reminded him that aforementioned information was still awaited. Dr Khan was requested to telephone Dr Malik after reviewing the draft of proposals as follows:

**APPNA - HDFNA (2) Objectives**

(1) Define and formalize the relationship between APPNA and HDFNA.

(2) Construct a structural relationship between the two organizations in such a way as to:
   (a) Conform to legal requirements.
   (b) Satisfy fiduciary responsibility.

(3) Enable each organization to help the other while maintaining permissible degree of autonomy.

**APPNA Position Statement**

Several models exist in which an organization or business entity creates a separate foundation for specific mission, goals, and task assignment.

In the current environment, donors as well as entities, which raise funds or provide resources for charitable and philanthropic purposes, are considered duty-bound to track those resources until the end-usage. It is considered a matter of legal responsibility to ensure proper utilization of resources.

**THEREFORE:**

(1) APPNA should consider adopting HDFNA as its foundation, which can retain semiautonomous status, as permitted by law.

(2) The aims, objectives, and mission of HDFNA can remain unchanged.

(3) With regard to HDFNA, APPNA should exercise oversight functions, participate in governance and funding according to customary and legal precepts and practices, by mutual agreement.

On November 19, 2003 we received a letter from HDFNA asking APPNA to submit goals, objectives, and expectations of each organization. This, in fact, had been done by the fax sent by us on November 17 & 18, 2003.

Rather than respond to our proposed draft on December 15, 2003 we received a letter from HDFNA without any mention of prior on going communications and follow up or any specific mention of our proposed discussion draft.

It is, therefore, obvious that up to this point this has been a disjointed undertaking. Hopefully, this process can be streamlined on priority basis, if there is enough political will and desire, in the year 2004.
Executive Director: - The concept of Executive Director was approved by Executive Council several years ago and a job description was developed.

Executive Director Job Description

Provide leadership and policy guidance for the organization

Manage and direct all operations being conducted at central office.

Implement the policy decisions and directives of the Executive Council.

Uphold and adhere to the policies and bylaws of APPNA

Report regularly to the president of APPNA and ensure that the Executive Council is fully informed of all the activities at central office.

Prepare annual budget for the central office in conjunction with the treasurer.

Hire, supervise and evaluate office staff.

Review and update office policy and procedure manual.

Insure timely mailing of dues statements, printing and mailing newsletter, election ballots and other special announcements. Insure proper operation of e-mail and website.

Review and update maintenance agreements, insurance policies (Building, Workmen’s Comp, and Officers liability), Condo Association directives and IRS requirements.

Since then attempts have been made to hire a qualified person for this post. During Dr. Riaz Chaudhry’s presidency, the position was advertised and budgeted for $50,000/year by the Executive Council. Soon it was realized that a full-time experienced executive director would cost $100,000 to $125,000, which was a lot more than APPNA’s approved budget. Therefore, at that time a consulting firm dealing with the management of organizations was contracted on a part-time basis. This did not work out. Earlier this year, the committee interviewed a gentleman who has worked as executive director of the Chicago Medical Society in the past. His salary package was about $120,000 and the committee felt that he lacked the practical experience, which APPNA has been looking for. The officers also interviewed the Executive Director of the Saginaw County Medical Society, who wanted to work full-time, but required a minimum of $75,000. Since then, the president, Dr. Raana Akbar and myself have spoken to several individuals informally regarding this position, but it has become quite clear to us that experienced individuals command a very high remuneration package and inexperienced candidates are also asking in excess of $75,000. Dr. Akbar sent recently 3 resumes to me. One of them had no practical experience, the other had some. The third candidate had worked at the United Way and has a Masters degree in Public Administration and a Bachelors degree in Business. He also wanted substantially more than APPNA has budgeted.

In the fall meeting in Houston, the officers had interviewed a young lady of Pakistani origin, who was born and brought up in this country and has a Masters Degree in Business Administration and a Masters Degree in Information Systems. It is my understanding that the officers are considering her and may be negotiating for a favorable contract. Our committee can provide her support and guidance if she is appointed.

2. For the first time APPNA has tried the experiment of housing bureau. From Central Office’s point of view this has been less than satisfactory. The committee realizes that this was the first experiment with the housing bureau and it will take some more time to work out all the glitches. All registrants should be notified of their registration and room confirmation numbers as soon as possible, either by e-mail or by postcard. The registration forms which are received in the central office, after verification and copying should be sent to the hotel directly.

3. Voters List: A complete updated list will be sent to the potential candidate after the nomination committee has nominated them. This will be free of charge. However, if a candidate wishes to have an eligible voter list earlier, they will be informed that the fee will be $850.00 and they will need to make a formal request to the Chair of Office Management Committee, who will then have the office print the copy and mail to the given address.

4. Deadlines for different events should not coincide on the same day! One, the last date for voter registration and payment of dues should be on March 31st. This would give the office staff time to verify licenses and necessary documents for the training programs. Two, the last day of hotel/convention registration should be at least five business days after voter registration. Three, the last day of receiving nominations in the office should be in the third week of March.
5. The minutes of the meeting should be sent to Central Office within five business days after the meeting, so that they can be typed within five business days and then be sent back to the secretary for corrections.

6. On the membership form, we should request a photocopy of medical license so the office personnel do not have to chase the licenses.

7. The computer was down for three days in August. The service contract took care of it.

8. On a lighter note, we have bought new phones for the office with caller ID.

**APPNA Disaster Relief and Social Welfare Project Committee**

*M. Javed Akhtar, M.D., FACS, Chairman*

The major challenge we face today is fundraising for Social Welfare projects post 9-11. Thanks to the generosity of our APPNA members, we were able to raise some money for the Disaster Relief and Social Welfare Project Committee. In that regard, I would especially like to recognize Drs. Ahmad and Naheed Hilal, from Alleghany, New York, our close friends who gave the single largest donation to the women's cause (women jailed in Pakistan under Hadood ordinance).

Since the scope of the committee was so vast, we decided in the beginning that we will sub-divide the committee into three or four sub-committees, with each sub-committee being run by the key person who was involved in that specific issue that was closest to their heart. The main areas recognized were women's issues, specifically the women jailed in Pakistan under Hadood ordinance. The second area was disaster relief, and the third area was families affected by secular violence in Pakistan. The sub-committee on the women's issue was very active during the year. We had a nice conference in July during APPNA's annual conference in Orlando. Our chief guest was Justice Nasir Zahid retired, who is our major liaison on women's issues in Karachi. He has set up an office in Karachi jail and has single mindingly donated his time and money for this cause. He also spoke during APPNA's executive session and brought everybody up to date on the project in Karachi jails. We have been able to raise roughly $14,000 to date to hire lawyers in Karachi and Lahore who will pick up the cases of those women jailed under Hadood ordinance and plead them on APPNA's behalf. In addition to Justice Nasir Zahid in Karachi, we were also very fortunate to recruit another excellent person in Lahore, Dr. Yaseem Rashid, who will coordinate our efforts in Punjab. Right now we are working on hiring two lawyers in Karachi and two lawyers in Lahore as a pilot project. As a matter of fact, the lawyers in Karachi had already started their work three or four months ago thanks to the diligence of Justice Nasir Zahid. Those of you who are traveling to Pakistan this December for our winter conference, I would strongly urge you to get in touch with me before going so that we can arrange for you to actually go and visit these women in jails to get a first-hand knowledge of the suffering those women are going through. It is not only those women who are suffering, but they also have dependent children who have to live in jails because their mothers are jailed.

As far as the disaster relief, Dr. Saud Anwar has been very actively involved on this sub-committee and has been helping me on this project. The Executive Council was generous enough to allocate and approve some money to be put toward that cause. Since the money is limited, the committee had decided that for the time being, the money should be channeled to a person or organization in Pakistan who is involved in disaster relief education. There were one or two professors who were recognized who were going and giving seminars to other government and non-government organizations and volunteers as to how to be prepared for a disaster. Most of this work has been taken over by the government and there is a lot of tussle going on for the moment between different governmental departments as to who should run the disaster relief. The major efforts that the government is doing is directed towards education, having a universal number like 911 here in North America which people can call, and coordinating with volunteer organizations. The committee also feels that we should have a major endowment fund available here and be prepared to face a major disaster in Pakistan, rather than wait until such a time where the disaster occurs and then try to raise money.

Another sub-committee has been involved in helping families who fell victim to the secular violence in Pakistan. As you are all aware, there were many doctors who were killed in secular violence in Pakistan and the families and children are suffering because they were the major breadwinners. Not much progress, unfortunately, has been made in this regard because of lack of information coming out of Pakistan, but we continue to try to recognize those families and then try to help them.

I urge all of you to donate generously for the above outlined causes. Please write a check to APPNA - Disaster Relief and Social Welfare Project Fund and we will make sure that your donation is spent on the people who are in real need of your help.
Membership Committee Report

Nadeem Kazi, M.D., Chair

This year APPNA membership approached a record 2200. There are more than 10000 physicians of Pakistani origin reside in North America. We still have to work hard to bring these physicians under the umbrella of APPNA. For the past 25 years, Pakistani physicians have made significant contributions to health care in this country, practicing in inner cities, rural areas and peripheral communities. However, potential members commonly ask “What Has APPNA Done For Us?”

I have discussed this issue with numerous APPNA members regarding their expectation of APPNA. Based on the responses I will answer what APPNA has done for you.

APPNA organizes an Annual Convention which allows membership to enjoy alumni meetings, reunions and cultural programs while earning CME credits and networking with professional colleagues. During this convention youth and children of APPNA members have their own educational and cultural activities.

APPNA has a history of involvement in Legislative Affairs affecting its members. In the past it played an important role in IMG issues with the AMA and in recent times APPNA has lobbied for J1 waiver issues. This is a very sensitive and important matter for the younger APPNA members.

APPNA provides high quality Continuing Medical Education (CME) to its members in USA and Pakistan. This is appreciated by APPNA members of all ages.

APPNA runs Charitable Foundation APPNA Sehat, delivering basic health care to thousands of people in the rural Pakistan. Members of APPNA launched HDFNA, providing basic training in small businesses, agriculture, and education together with small loans.

APPNA has started a Web Site (www.appna.org). Feel free to browse this medium to communicate with each other.

Members of APPNA started a Clerkship program for fresh graduates from Pakistan and also arranged residencies, another valuable initiative for the younger members.

Our members are very interested in Community Health and Social issues in USA. This year several programs were started by the new members under the supervision of senior members. These programs include free clinics, peace initiatives and involvement in political process in the US.

APPNA offers a variety of programs to fulfill the membership needs. The membership committee of APPNA urges you to renew your membership and if you are not a member yet then please join APPNA. The membership committee continues it work to attract more members. In October, the membership committee’s “Manual of Policy and Procedures” was presented to the Executive Council which should be approved next year. In December we will publish information about APPNA in Pakistani-American publications. It is our fervent hope that APPNA’s membership will continue to grow with the same momentum.

Constitution and Bylaws Committee Report

Ilftifat A. Alavi, M.D.

It gives me great pleasure to report to you that the proposed constitutional changes were discussed and approved at the summer executive council meeting held in Orlando FL on July 3rd 2003, with simple majority. As two-third majority is required to pass the constitutional amendment, these changes were mailed to the council members who were unable to attend, for their votes. Fortunately, enough members responded and the required two-third majority was achieved by the fall meeting in Houston in October 2003. An updated copy of the revised constitution is available at the central office and can be obtained via e-mail if the member wishes to go through the revised constitution.

In the fall meeting in Houston the first reading of the bylaws amendment was discussed and approved with changes. However sections 20 (Election), 21 (Impeachment) were tabled. Sections 22, 23, 24, 25, 26, and 27 remain the same as at present.

It is hoped that the second reading of the bylaws, with discussions of elections and impeachment will take place in the spring meeting of 2004 in March, 2004 in New York, and if approved, the whole package, i.e. constitutional and bylaws changes will be presented to the general body at the annual meeting to be held in Washington, D.C. in June 2004 for their approval.
The AIMCAANA general body meeting was held in Orlando during APPNA summer meeting. 40 members and their families attended the meeting. Unfortunately Dr Sibt-UL-Hasnain PEO, AIMC could not join us due to delay in visa processing. General body meeting was started by Tilawat. Dr Mahmood Alam presented the minutes from last year meeting. Dr Muhammad Tariq presented the Treasurer Report. A souvenir was presented to Dr. Mahmood Alam in appreciation of his services to AIMCAANA as outgoing President.

AIMCAANA general body unanimously elected Dr. Iqbal Nasir (MI), Dr. Muhammad Tariq (TX), Dr. Asad Qamar (FL) and Dr Rizwan Qureshi (FL) as president, president elect, secretary and treasurer respectively for the year 2004. Dr Mumtaz Alvi was nominated as chairman membership committee. Members showed great interest for liaison with our alma mater and as a first step general body on the proposal of Dr Sajid Chaudhary, approved AIMCAANA scholarship fund. This fund will be used to award scholarship to one student from year of Allama Iqbal Medical College each year.

Mr. Hank Bashore as a keynote speaker spoke about asset management and donated $1000 towards AIMCAANA scholarship fund. Newly elected president Dr Iqbal Nasir and Secretary Dr Asad Qamar equally matched this amount with $1000 each.

We have over 200 members in database, 2 life members and 32 annual members for year 2003. Iqbalians elist group (iqbaliansalumni@yahooogroups.com ) with 66 members is a forum to enhance communication and coordination among Iqbalians across the globe. Our newly renovated website is online www.aimcalumni.org.

Though Iqbalians are still going through settlement phase but they have started participating actively in APPNA matters. Dr. Nasir Iqbal and Dr. Jalil Khan are president for MI and North TX APPNA chapters respectively. Dr Mahmood Alam is serving as co-chair for APPNA membership committee. Dr Sajid Chaudhary represents the RI at the APPNA New England chapter (APPNE).

AIMCAANA’S main goal is to increase the membership and collectively work with all Iqbalians to achieve it’s objectives.

Dow Alumni Report

Zia Moiz Ahmad, President DOGANA 2003-2004

The strength of APPNA rests on the strong participation from individual alumni association. In the recent years the main driving force for the participation from Dow alumni is to make APPNA more stronger and productive organization. With all the other individual alumni associations we aim to make APPNA a truly an strong force here.

I am please to report that the revival of alumni activity in its true sense is occurring. From an individual effort to the collective work of Dow class, the spirit of giving back to Dow clearly is visible. All credit goes to these dedicated individual who sincerely devote their time, and resources for Dow. Individual class projects have help Dow and CHK tremendously. Now we strive for the next level of participation and planning for Dow. Here in US on regional levels, there would be more meetings this year. The Dow retreat in Spring is coming soon. For the first time, a coordinated Dow alumni activity and program with Dow administration is being planned this winter. All this to promote better networking for Dowites across the world.

Dow Alumni Association – A Concept.

Unfortunately, the concept of Alumni Association is lacking in Pakistan. It is important that one should be given enough encouragement to immediately become a part of the alumni association as soon as one graduates. This is the only way to remain in touch with his/her alma mater. Immediate enrollment in Alumni association should be established regardless of the subsequent location of the graduate. Once this is established an alumnus would be able to contribute more in person or in communication. This would eventually translate into the financial base of our Dow. The mechanism will be established in which the Dow graduating class will be encouraged to enroll and become a part of Alumni Association. We plan to meet with Dow Administration this winter to workout details to do just that.
**Dowites for Dow - The Only Way**

This is the only way we can help our Dow. I am sure everyone feels strongly about giving back to our Dow, we feel strongly attached to it. We must gather everyone and start networking. Once greater alumni association and concept is revived, the people in USA and UK with their resources, and people in Pakistan with their proximity to the institution having more insight into the daily hardship and priorities for Dow, would work together better. In this association comes in, the Master plan, where we hope to unite individual class projects, individual donations, sponsorships, Endowment funds, mentorship, lectures series, Research Setup, CME setup and Student Council. There are very talented Dowites in Pakistan working for Dow for years and many Dowites are visiting this year from USA and UK. The goal is to establish a core group of people to help build the sold structure of Dow Alumni Association from the graduating class of 2003 to 1950s classes. This winter for the first time we are taking the opportunity to launch a comprehensive program to strengthen the bond of Dow with its alumni.

1. Dow Alumni Open House December 23rd and 24th. The concept of “Open House” is to have few final year students ready to take the visiting Dow alumni in a small group for a tour of Dow and CHK. These final year students as the “touring guides” will have details about how things in various departments. Going on a tour the visiting folks will be able to get a clear idea and we hope that they would know how much help they can provide, financially, morally, professionally etc. They may be willing to do more for Dow once they see for themselves.

2. Dow Alumni Association Enrolment Drive: Start: December 23rd and 24th. The mechanism to be setup for the graduating class of Dow to have an enrolment to Dow Alumni Association as soon as they graduate. With the help of the administration all the New Dow Graduate should be given a small packet detailing the importance of Alumni Association, staying in touch with Alumni Activities etc. This way a graduating person’s information and contact can be established and would be entered into a larger database.

3. Dow Alumni Lecture Series: About 4 hour lectures series from the visiting Dow alumni in Arag for CME. This will inaugurate DOGANA Lecture Series where we would identify a monthly lecture from the visiting Dowite in coordination with a team in Dow and CHK to continue after December 2003.

4. Dow Alumni Annual Function 2003: At this Annual Function we would present from DOGANA the class projects from USA, highlighting the the help needed for our Dow. We would present the summary of preceding days and the impression of what Dow alumni have after the Tour and their pledge of support subsequently. For this communication and planning with the folks in Dow / CHK and administration is in progress. Soon we will have the details and let everyone know.

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**Nishtar Medical College Alumni Report**

*Abdul Khaliq, MD, FRCS*

The year 2003 has been very active and exciting and we have accomplished a lot. The Orlando meeting was attended by 85 members who discussed several issues especially the sponsorship of the Trauma Center to be built at Nishtar Medical College, Multan. This meeting was attended by Dr. Shabbir Nasser, Principal, Nishtar Medical College who showed us the architectural blue prints and cost estimates (2 Crore) for the project which, upon completion will benefit and provide services to 40 million people; he also informed us that the ground breaking of the Trauma Center is scheduled for December 26, 2003.

Donations by Nishtarians have been overwhelming and we do not foresee any problem with the funds. We also continue to provide financial support for the students at Nishtar Medical College. A donation by Bosch & Lomb to the tune of $35,000 in medical equipment was delivered to a non-profit organization in Pakistan and Alcon has pledged a donation of $12,000.

Awards were given to Dr. Shabbir, Dr. Nawab and Dr. Jalil for their outstanding services to humanity and dedication to the teaching profession.

At present our fund raising activities are in full swing and by the end of the year we should exceed our projected figure.

Finally on behalf of the executive council I take this opportunity to thank the membership for their efforts, dedication, good will and continued support.
Florida Chapter Report
Shahid Usmani, MD

Florida Chapter held its Fall meeting at the Sable Pines Crown Plaza Hotel in Tampa on October 18, 2003. The meeting was well attended by Florida Chapter members and their families and guests. We were delighted to see many new members who have become involved in the Florida Chapter since the success of the summer meeting, which was hosted by the Florida Chapter. Our CME program consisted of 4 CME credit hours which covered the Florida Mandatory Licensure requirements. A delicious Pakistani dinner was followed by entertainment provided by a local Tampa band by the name of "Hypertension - Not high blood pressure". This meeting was sponsored by several pharmaceutical companies and was hosted by Dr. Javed Hafeez and Mrs. Nasim Hafeez. The Florida Chapter has been actively involved in the local Florida community and also nationally in matters of interest to Pakistanis as well as in Pakistan.

New Jersey Chapter Report
Shaukat A. Chaudhrey, MD, FACC

It was in the winter early this year when Dr. Mahmood Alam approached me and some other friends to establish a New Jersey Chapter of APPNA. After initial skepticism, I agreed to participate. We developed an organizing committee that included Mahmood Alam, Shaukat Chaudhery, Avais Masood, and Mohammad Zubair. We sent out letters to about 150 Pakistani physicians to come and join us on April 27, 2003. 37 physicians showed up that Sunday afternoon. Dr. Hussain Malik, secretary APPNA, was also present in the meeting. Dr. Mahmood Alam, as a co-chairperson of the membership committee of APPNA, started the meeting and asked to form a formal chapter. A draft constitution and bylaws were also presented. Dr. Sultan Ahmed was requested to conduct the meeting while a heated discussion was carried on about the details of the proposed chapter. Finally, participants signed the petition to form a chapter. An interim body of officers was elected pending formal approval of the chapter by APPNA. Members elected Shaukat Chaudhery, Mahmood Alam, and Avais Masood as President, Secretary, and treasurer, respectively. Drs. Imtiaz Ahmad, Shahid Haque, Masud Iqbal, Zafar Jamil, M. Nassar Qureshi, and Mohammad Zubair were elected as Councilors. Our chapter was formally approved in the July 2003 executive council meeting. We have done two executive council meetings and two officers meeting of the chapter so far. An Eid Dinner is being organized, which will be held on Friday November 28, 2003. An active participation of the members is requested. A General Body Meeting of the Chapter has also been scheduled for December 14, 2003. Agenda includes approval of the minutes, approval of the chapter constitution and bylaws and an election of the officers for 2004. I am hopeful and enthusiastic to see this chapter grow and become an active body of Pakistani-American Physicians.
WINTER MEETING APPNA DECEMBER 2002 AT NISHTAR MEDICAL COLLEGE, MULTAN

(L-R) Dr. Mohammad Suleman, APPNA President 2002, Dr. Abdul Rashid Piracha, President Nishtar Alumni Assn 2002, Dr. Raana Akbar President-Elect 2002 APPNA, Dr. Shabir Nasir, Principal Nishtar Medical College

( L to R) Dr. Shabbir Safdar, Dr. Zeelaf Munir, unknown.

(L to R) Dr. Shabbir Safdar, Dr. Abdul Rashid Piracha, Prof. Hayat Zafar, Dr. Mohammad Suleman

Students of Nishtar Medical College perform a play.
### APPNA Sehat Donors for 2003
(As of November 30, 2003)

<table>
<thead>
<tr>
<th>Donor Name</th>
<th>Donor Name</th>
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<tr>
<td>Nadia Shahbano Afridi</td>
<td>RightPath Foundation – Amin Kareem</td>
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<td>Salim K. Afridi</td>
<td>Nadeem A. &amp; Hajra S. Kazi</td>
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<td>Jamshed G. &amp; Lubna S. Agha</td>
<td>Abdul Khaliq</td>
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<td>Amir &amp; Razia Amir Ahmad</td>
<td>Mohammad Y. Khan</td>
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<td>Amjad Z. Ahmad</td>
<td>Saadat U. Khan</td>
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<td>Sarfaraz Ahmad</td>
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<td>Raana Akbar</td>
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<td>Anne Mian</td>
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<td>Bilal A. &amp; Shakila M. Mian</td>
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<td>Muhammad R. &amp; Aarifa B. Akhtar</td>
<td>Farooq Ahmad &amp; Samina J. Mirza</td>
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<td>Mahmood Alam</td>
<td>Tariq Muhammad &amp; Afshan Meraj</td>
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<td>Mohammad Saleem Nagra</td>
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<td>Muhammad Ali</td>
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<td>Naeem &amp; Fakhra Pervaiz</td>
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<td>Anwar I. Qadeer &amp; Associates PC</td>
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<td>Asaf R. &amp; Tahseen H. Qadeer</td>
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<td>Muhammad Asim</td>
<td>Asad U. &amp; Humeraa Qamar</td>
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<td>Parvez Asmat</td>
<td>Farid Qazi &amp; Family</td>
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<td>Omar T. Atiq</td>
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<td>Fauzia N. Rana</td>
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<td>Mohammad Amjad &amp; Zaib Bhatti</td>
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<td>Muhammad A. &amp; Lubna Chaudhary</td>
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<td>Tipu &amp; Nigar Kirmani Sultan</td>
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<td>Shahid F. Usmani</td>
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<td>Syed Zubair &amp; Nisar Fatima Haq</td>
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<td>Ahmad &amp; Naheed Hilal</td>
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<td>Barry D. Hoffman</td>
<td>2 Donors wish to remain Anonymous</td>
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<tr>
<td>Aisha Bano &amp; Syed Imraan Husain</td>
<td>Amina Husain</td>
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2 Donors wish to remain Anonymous.
## APPNA'S SEHAT
Consolidated Income and Expenditure Statement
PERIOD: JANUARY TO SEPTEMBER, 2003

### INCOME
Beginning Balance from December 31, 2002: $64,134
APPNA Sehat Donations received as of 11/30/2003: $87,648
Last Quarter 2002 Payment from HDFNA: $17,500

**Total**: $169,282

### DISBURSEMENT
From APPNA Sehat Fund
January 15, 2003: $25,000
Last Quarter 2002 Payment HDFNA: $17,500
Donations Transferred March 31, 2003: $30,000
Donations Transferred May 18, 2003: $25,000
Donations Transferred July 23, 2003: $30,000
Donations Transferred October 27, 2003: $30,000

**Total**: $157,500

Balance as of November 30, 2003: $11,782

### ACCOUNTS RECEIVABLE
HDFNA 1st & 2nd Quarter of 2003: $43,000
2003 Donations pledged but not received: $16,052

**Total**: $59,052

### EXPENDITURE
1. Fixed Cost

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<td>2.5 Utilities (electric, gas, water)</td>
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<td>2.6 Phone, Fax, Postage, Courier, E-mail Expenses</td>
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3. Development Cost

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</thead>
<tbody>
<tr>
<td>3.1 Field Equipment</td>
<td>$1,693</td>
</tr>
<tr>
<td>3.2 Stationary / Computer Diskettes / Software, etc</td>
<td>$2,548</td>
</tr>
<tr>
<td>3.3 Annual Reports / Training Material / Periodicals / Copies / Printing Supplies</td>
<td>$3,759</td>
</tr>
<tr>
<td>3.4 Project Activities / Field Staff Travel</td>
<td>$1,960</td>
</tr>
<tr>
<td>3.5 Staff / LHV Training / Community Workshops</td>
<td>$3,893</td>
</tr>
<tr>
<td>3.6 Sehat Markaz</td>
<td>$2,093</td>
</tr>
<tr>
<td>3.7 Monitoring and Evaluation</td>
<td>$1,113</td>
</tr>
<tr>
<td>Sub-total:</td>
<td>$17,059</td>
</tr>
</tbody>
</table>

4. Miscellaneous

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1 Provident Fund</td>
<td>$858</td>
</tr>
<tr>
<td>4.2 Advances</td>
<td>$3,826</td>
</tr>
<tr>
<td>4.3 Expenses For AKU (Reimbursed)</td>
<td>$4,832</td>
</tr>
<tr>
<td>Sub-total:</td>
<td>$9,516</td>
</tr>
</tbody>
</table>

January 1 - September 30, 2003

**Grand Total**: $221,928

Winter 2003
A stopover in Dubai is a little different from rush hour traffic on the freeway. Try a yacht or dhow. Go dune bashing in a 4x4. Ski on sand or surf. Snorkel over coral reefs. Relax on a desert safari. Sound different? Luckily, getting there is different too.

Keep discovering.
With over 75 percent of population in Pakistan living in rural areas, availability of expert family physicians for basic health care needs is a scarcity. Pakistan Society of Family Physicians, Lahore Chapter, has been in collaboration with KEM-CAANA for over 15 years in arranging an annual CME Symposium in Lahore every winter. Dr. Bashir Malik (deceased) approached Dr. Hassan Bukhari during his tenure as KEMCAANA President to initiate CME meetings on an annual basis. Weekly CME meetings at Bashir Clinic were being held with lectures on different topics, with the Lecturers usually being local professors. KEMCAANA agreed to start annual symposia and these have been well attended ever since.

In 1999, the Society of Family Physicians approached Dr. Hassan Bukhari to devise a structured residency training program for family physicians in Lahore. Dr. Bukhari started an Endowment Fund with a target to raise six million Rupees initially. Investment returns at anywhere from 8-10 percent being available in Pakistan in different banks would, in the beginning, generate enough income to start the residency training program for up to two residents each year. Residents will be given an adequate stipend with living accommodations. Salaries for the department head and staff also will be paid.

The next step was to secure a place for the training. An obvious choice was King Edward Medical College. Negotiations started in earnest between the Pakistan Society of Family Physicians and King Edward Medical College. The College was agreeable to start the training program, but because of government bureaucracy, final agreement to start the program never could be achieved. This was going on for almost two years. Attention was then diverted to a private medical college. Dr. Hassan Bukhari and Dr. Tariq Aziz, Secretary of the Pakistan Society of Family Physicians, met in December, 2001 with Professor Zafar Iqbal Qureshi, Ph.D, a professor at the Lahore University of Management Sciences, who is Chairman, Board of Directors, Fatima Memorial Hospital Medical and Dental College, Lahore. The idea of starting a Family Medicine Residency Training program was received very favorably, and a written proposal was forwarded to the board. Within a week, the board agreed and an agreement was reached to start the training program in July, 2002 or soon afterwards.

The Endowment Fund collections, which had not been pursued too vigorously, because of uncertainty about the future of the program, were put into high gear. At the annual meeting of the Pakistan Society of Family Physicians in December, 2001, solicitation started in earnest to reach a goal of six million Rupees. Within a week, Dr. Bukhari, with the help of others, was able to get pledges of approximately 4.3 million Rupees. With contributions from many KEMCAANA members solicited on a personal basis, including Dr. Hassan Bukhari (one million Rupees), Dr. Rizwan Bukhari (half million Rupees), Mr. Hank Bashore (half million Rupees), Drs. Waheed and Raana Akbar (100,000 Rupees), Dr. Shehzad Sadiq (60,000 Rupees), Hussain Malik (60,000 Rupees), KEMCAANA (30,000 Rupees), Dr. Haider Shirazi (60,000 Rupees), Dr. Alam Gir (30,000 Rupees), Dr. Farhan Younus (150,000 Rupees), Dr. Asim Malik (60,000 Rupees), Dr. Mohammad Suleman (60,000 Rupees), Dr. Mufiz Chauhan (300,000 Rupees), Dr. Omar Atiq (120,000 Rupees), Nighat Bukhari (60,000 Rupees), and in addition many local physicians contributed quite generously so that as of the end of last year the balance invested amounted to in excess 3.5 million Rupees.

With the generation of income from the above investments, the program started with the taking of one resident officially in January of 2003 and we anticipate taking on another resident in 2004. The living accommodation is provided by the Fatima Memorial Hospital Medical and Dental College in the Residents’ Dormitory. In addition, the Department includes a Supervisor, who is Dr. Tariq Aziz, and a Medical Officer for Outpatients, who is also paid on a monthly basis.

The program has been devised with the help of the Aga Khan Program Format with the assistance of the Professor of Family Medicine there. It is a four year structured residency training program, which is recognized by the Pakistan Board of Medicine and Dentistry and also the Pakistan College of Medicine and Surgery. Trainees will be qualified to take MCPS Examination in Family Medicine after training is completed.

This is the first such program in Family Medicine Training that exists in Punjab. Hopefully with its success, other programs will be started and eventually trained family physicians will be available to look after the basic health care needs of the population. Contributions from all are welcome to make this a success.

The author, a 1962 graduate of KEMC, is Past President of APPNA, KEMCAANA and PAK PAC.
الوداع ظفري

تم تجهيز ودائع تزكية ربحية حديثة وسعت فروع خدماتنا في جميع أنحاء البلاد. استمرت عملية التوصيل حتى الآن في جميع أنحاء البلاد. نحن نعمل مجددًا على تحسين خدماتنا لتقديم أفضل الخدمات للمستهلكين. نود أن نشكر جميع العملاء الذين دعموا Salesforce في هذه الفترة.

دمشق 2003 مير سمك
غل١

غل یہ معنی کے لئے تصور ہے کہ جنھوں نے اپنے کو متوکل شنا رکھا تھا اور مطالبہ کیا اپنا حق۔ دینا نہیں کیا کہ میں صرف بھگوان کا خدا نہیں ہوں جس کو محنت میں دیکھا ہوا کہ ہم مسلمین کو خوش صرف ہو گیا ہے گاوں کو بھی کچھ ہاں کا خدا ہے کہ مطلوب ہے کہ کوئی مسلم بھی ہی کہ ہم ہوں گاوں کو بھی کچھ ہاں کا خدا ہے کہ مطلوب ہے کہ کوئی مسلم بھی ہی کہ ہم ہوں گاوں کو بھی کچھ ہاں کا خدا ہے کہ مطلوب ہے کہ کوئی مسلم بھی ہی کہ ہم ہوں گاوں کو بھی کچھ ہاں کا خدا ہے کہ مطلوب ہے کہ کوئی مسلم بھی ہی کہ ہم ہوں گاوں کو بھی کچھ ہاں کا خدا ہے کہ مطلوب ہے کہ کوئی مسلم بھی ہی کہ ہم ہوں گاوں کو بھی کچھ ہاں کا خدا ہے کہ مطلوب ہے کہ کوئی مسلم بھی ہی کہ ہم ہوں گاوں کو بھی کچھ ہاں کا خدا ہے کہ مطلوب ہے کہ کوئی مسلم بھی ہی کہ ہم ہوں گاوں کو بھی کچھ ہاں کا خدا ہے کہ مطلوب ہے کہ کوئی مسلم بھی ہی کہ ہم ہوں گاوں کو بھی کچھ ہاں کا خدا ہے کہ مطلوب ہے کہ کوئی مسلم بھی ہی کہ ہم ہوں گاوں کو بھی کچھ ہاں کا خدا ہے کہ مطلوب ہے کہ کوئی مسلم بھی ہی کہ ہم ہوں گاوں کو بھی کچھ ہاں کا خدا ہے کہ مطلوب ہے کہ کوئی مسلم بھی ہی کہ ہم ہوں گاوں کو بھی کچھ ہاں کا خدا ہے کہ مطلوب ہے کہ کوئی مسلم بھی ہی کہ ہم ہوں گاوں کو بھی کچھ ہاں کا خدا ہے کہ مطلوب ہے کہ کوئی مسلم بھی ہی کہ ہم ہوں گاوں کو بھی کچھ ہاں
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جہاں ہمیں محدودیت نہ ہو یا محدودیت ہو تو کہ کسی یا کسی لوگوں کے ساتھ جوش و جوہ کے فعال کرے عائشہ سے خاص کرے۔

دوسری طرف بھر دیگر سے جوہ کا ہے۔ خاص حالات کے لئے اس کا استعمال کیا جا سکتا ہے۔

دوبارہ ایکبار بھر دیگر سے خود کا ہے۔ خاص حالات کے لئے اس کا استعمال کیا جا سکتا ہے۔

جہاں ہم محدودیت ہو تو کہ کسی اور کسی کے ساتھ جوش و جوہ کے فعال کرے عائشہ سے خاص کرے۔

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བཞི་བོད་དང་། མཐོང་ཆེན་པོ་གཉེན་པོ་བདེ་ན་མཐོང་ཆེན་པོ།

བཞི་བོད་དང་། མཐོང་ཆེན་པོ་གཉེན་པོ་བདེ་ན་མཐོང་ཆེན་པོ།

ཞིག་ཤིག་ཀྱིས་བཏོན་པའི་དིང་འབུར་རྩི་པོ་བཞི་དྲུག་བཞིའི་བོད་

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Cyberians all. (L to R) Drs. Nadeem Zafar (TN), Azeem Qureshi (OH), javed Suleman (NY), Shahid Latif (AZ) and Shahid Sheikh (OH)

PAKPAC luncheon. (L-R) Dr. Saud Anwar, Dr. Hassan Bukhari, Dr. Omar Atiq, Dr. Zahid Butt, Dr. Hussain Malik, Congressman, Chairman of Black Congressional Caucus Elijah E. Cummings, Ambassador of Pakistan Mr. Ashraf Qazi and Dr. Pervez Ilyas Shah (at speaker podium)
APPNA Executive Committee Fall Meeting, Hyatt Regency Hotel, Houston, TX. Oct 3rd - 5th, 2003

(L-R) Drs. Raana Akbar (President), Hussain Malik (Secretary) and Zeelaf Munir (Treasurer) begin the proceedings.

(L-R) Dr. Rubina Inayat, Secretary FJ and Dr. Amna Buttar, President FJ Alumni Association rest after successful fund raising for Muslim Heritage Project for which $8,000 was raised in a 10 minute presentation.

(L-R) Drs. M. Aslam (NY), Iqbal Jangda (NY), Asim Malik (NY) and Rizwan Naeem (TX)

(L-R) Dr. Mahmood Alam (NY) raises a point during debate. Drs. Ilifat Alavi (IL) and Nadeem Kazi (AZ) wait to be recognized by the chair Dr. Ishaq Chishti (MO) in foreground.

(L-R) Dr. Ilifat Alavi, Dr. Waheed Akbar and Dr. Raana Akbar enjoy a brief respite before the banquet after an exhausting day of Executive Committee.

(L-R) Mrs. Samina Chaudhry (LA), Drs. Sehba Siddiqi and Wajid Siddiqi (OH) showing interest in photos of last APPNA Journal.
Dr. Omar Atiq (President Elect-2003), Dr. Aslam Malik (TX) (APPNA President 1984) and Mrs. Joyce Malik. Below (L-R) Professor Mohammad Arshad Cheema (South Surgical Ward KEMC), Dr. Hassan Bukhari (President 1986) and Dr. Talat Bukhari (TX).
APPNA Presidents
From the beginning to the present

Dr. Zaheer Ahmad
Dr. Kamal Muzaffar
Dr. Ayub Ommaya
Dr. Amjad Hussain
Dr. Amanullah Khan

Dr. Aslam Malik
Dr. Ikram Khan
Dr. Hassan Bukhari
Dr. Nasim Ashraf
Dr. Murtaza Arain

Dr. Arif Ali Toor
Dr. Arif Muslim
Dr. Mushtaq Khan
Dr. Pervaiz Shah
Dr. M. Khalid Riaz

Dr. Waheed Akbar
Dr. Mushtaq Sharif
Dr. Shaukat Khan
Dr. Durdana Gilani
Dr. Shabbir Safdar

Dr. Javed Akhtar
Dr. Riaz Chaudhry
Dr. Mohammad Suleman
Dr. Raana Akbar
Dr. Omar Atiq
Its all boys! Early arrivals for the Executive Council Meeting lounge in the lobby sampling cigars. Drs. Hussain Malik, Rizwan Naeem, Nadeem Kazi and Asaf Qadeer.

BELOW Another early arrival, Dr. Asim Malik relaxes before the next morning's rigors.

Dr. Rizwan Naeem (center) with the help of a banquet guest chooses a winner for the Gulf Air free business class ticket. Dr. Amin Karim (right) looks on.

BELOW Dr. Rizwan Naeem holds the winning ticket without announcing the winner who was announced after another brisk round of fund raising for APPNA Sehat. Dr. Karim attempts to guess.

(L-R) Morning Session of the first day. (R-L) Drs. Rashid Piracha (VV), Shabbir Safdar (MO) and Ishaq Chishti (MO)

Entertainment Program affords two APPNA members to enthrall the audience with their performances.

Photos Left to Right: Dr. Ghayas Ahmed (LA) and Dr. Mohammad Khalid (NY)

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