



**VALLABHBHAI PATEL CHEST INSTITUTE
UNIVERSITY OF DELHI
DELHI – 110 007 (INDIA)**



Organises

**1st CONFERENCE OF THE
SOUTH ASIA ASSOCIATION OF ALLERGY
ASTHMA AND CLINICAL IMMUNOLOGY
(SAAAACI – 2011)**

on

12th and 13th February, 2011

Venue

Paintal Memorial Golden Jubilee Auditorium, VPCI

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RADIOLOGY FORUM

It is proposed to extend the scope of the Radiology Forum of our Journal by inviting our readers as well as other workers in the field of Respiratory Medicine to submit brief report of patients with interesting clinical and radiological features for publication. These will be published, provided that:

1. The condition is of sufficient clinical and radiological interest;
2. Photographs (10cm×8cm) are of excellent quality for printing (Maximum: 4 photographs);
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4. The chest radiograph is accompanied by brief clinical account, not exceeding two page typescript (with sub-head: Clinical Summary, Investigations, Diagnosis, Discussion and References)

All the material received for publication under the Radiology Forum section will be evaluated to judge the suitability for publication by our peer-review experts panel.

Editor-in-Chief

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Guidance for Authors appears in every issue.

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advised, such as avoidance of excessive ventilatory pressures, avoidance of application of negative pressure to the pleural space, and lateral decubitus positioning with the affected side facing up, to reduce intra-pulmonary shift and improve oxygenation. In severe cases, the patients may require endotracheal intubation and application of positive end-expiratory pressure. Differential two lung ventilatory strategies may be required in refractory cases.³

Re-expansion pulmonary oedema is a rare but serious complication of thoracentesis. Physicians should always consider the possibility and be alert to the varied presentation of this complication.

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